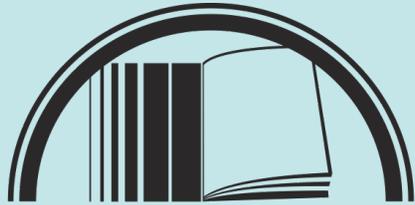


# MACAR Workshop Track

## The Learning Different Child: Social Skills and Classroom Discipline

### Session 6



THE SHELTON WAY

A World Model for Educating Students Who Learn Differently

AMS Annual Conference  
Dallas, 2014

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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

## 5 SENSES INPUT

See Hear Feel Smell & Taste

**Sustained  
Attention**

## Brain Interpretation

**Percept**

**Concept**

**Memory**

**Higher Cognitive Functions**

# PROCESSING WITH DYSFUNCTIONS

## 5 SENSES INPUT

See Hear Feel Smell & Taste

Brain Interpretation Dysfunction

Incorrect Perception

Concept Formation Faulty –  
Language Weakness

Gaps in Higher Cognitive  
Functions

Faulty  
Attention

Inadequate  
Memory

# 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*

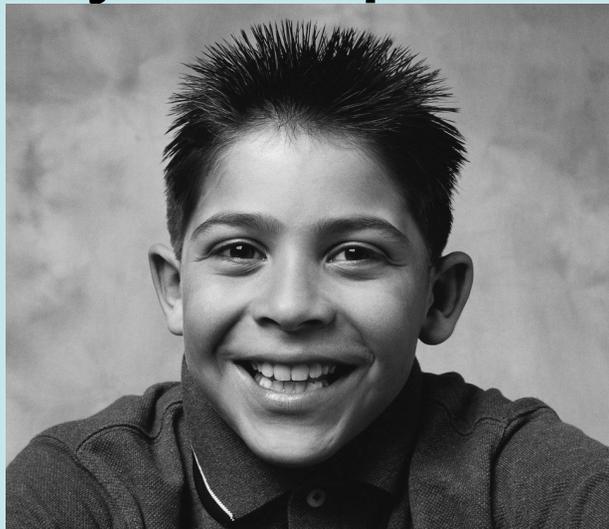
# What Is Social Competence?



# 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



# Dyslexia Definition Adopted by National Institutes of Health

- One of several distinct learning disabilities;
- Specific language-based disorder of constitutional origin characterized by single word decoding
- Reflects insufficient phonological processing abilities
- Difficulties in single word decoding - unexpected in relation to age & other cognitive & academic abilities.

# Dyslexia - NIH Definition

## continued

- Not the result of generalized developmental disability or sensory impairment
- Manifested by variable difficulty with different forms of language, including in addition to problems reading, conspicuous problem with acquiring proficiency in writing and spelling.

# Related Disorders

**refers to learning differences in reading comprehension, attention, math, coordination, social skills and oral language disorders.**

# 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.

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

## Essential Features:

- A. 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.
- B. Some hyperactive-impulsive or inattentive symptoms must have been present before seven years of age.
- C. 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)

# Autism Spectrum Disorder \*

## Diagnostic Criteria:

**A. Persistent deficits in social communication and social interaction across multiple contexts, as manifested by the following:**

- Deficits in social-emotional reciprocity
- Deficits in nonverbal communicative behaviors used for social interaction
- Deficits in developing, maintaining, and understanding relationships

\*Not classified as a Learning Disorder

# Autism Spectrum Disorder

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

- Stereotyped or repetitive motor movements, use of objects, or speech
- Insistence on sameness, inflexible adherence to routines, or ritualized patterns of verbal or nonverbal behavior
- Highly restricted, fixated interests that are abnormal in intensity or focus
- Hyper- or hyporeactivity to sensory input or unusual interest in sensory aspects of the environment

# Autism Spectrum Disorder

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

**D. Symptoms cause clinically significant impairment in social, occupational, or other important areas of current functioning**

DSM-5, page 50

Sensory  
Input

```
graph TD; A[Sensory Input] --- B[Visual]; A --- C[Auditory]; A --- D[Kinesthetic]; A --- E[Tactile];
```

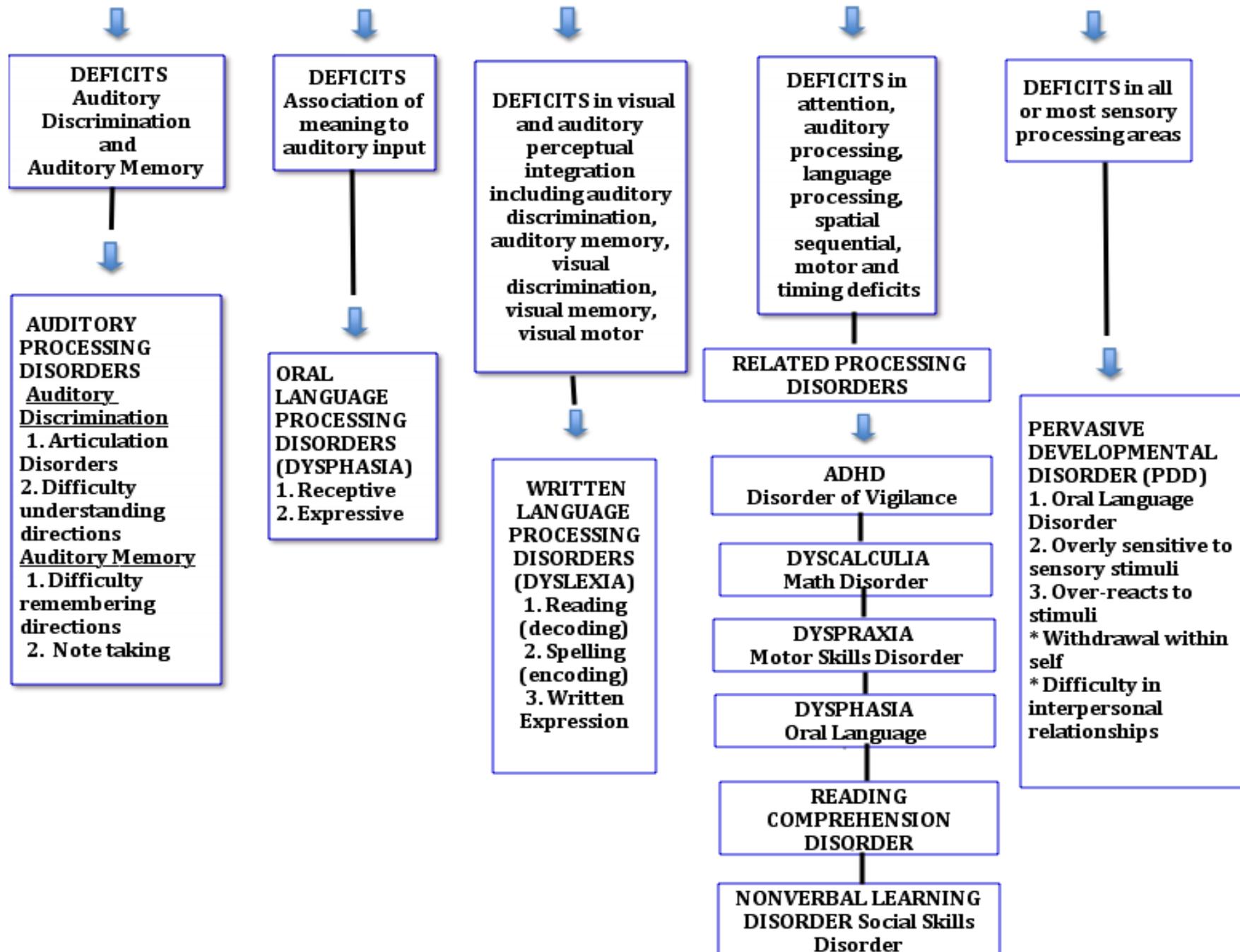
Visual

Auditory

Kinesthetic

Tactile

# Processing Disorders



# Delays in Social Development of the Child with Learning Differences



# Developmental Dysfunctions and Possible Effects on Social Ability:

## **Attention**

- Impulsive, poorly planned social acts
- Egocentricity, trouble sharing
- Spatial and temporal-sequential problems reading nonverbal feedback (i.e. facial expressions)
- Sequential difficulty with prediction, flow in social contexts

# 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

# 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



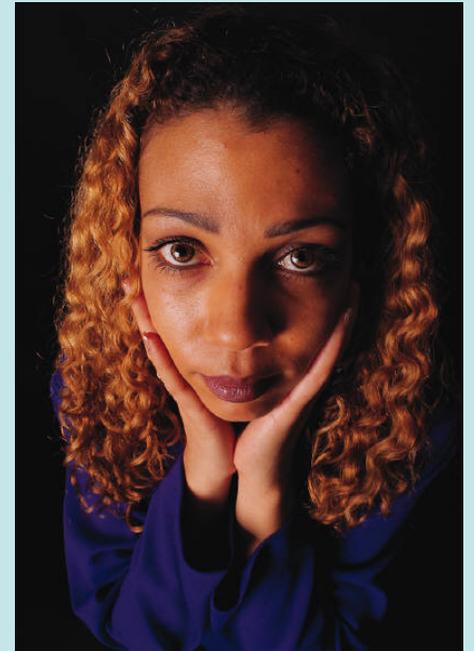
- Less responsive to other's initiations
- Inappropriate verbal exchanges
- Difficulty shifting between giving and receiving information

# Deficit Social Cognitive Skill

- Less eye contact and affection
- 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

# A Negative Cycle of Social Incompetence

If you lack social interactions

then you fail to develop social relationships in which you practice social skills

If you lack social relationships

then you lack opportunities to interact with others

If you lack opportunities to interact with others

then you fail to develop the social skills needed to be socially competent

If you are socially incompetent

then you are often labeled maladjusted & excluded from social interactions

# 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 Pickering added oral language development components
- Laure Ames rewrote Dr. Shedd's stories and role plays and related the difficulties in social development of the learning different child to current research.

# Choices

## Four Levels

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

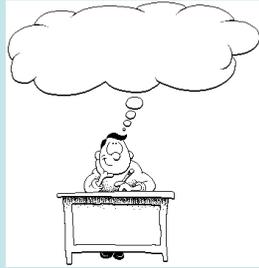
1. Introduce the concept
2. Read the story
  - ✓ Discuss the vocabulary
  - ✓ Analyze cause and effect
  - ✓ Discuss questions related to the story
3. Role play
  - ✓ Critique verbal and non-verbal communication using the Communication Checklist
4. Research activities

# Lesson Format

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

# How We Teach Social Skills

SHELTON  ON



# 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

SHELTON

# Story and Discussion

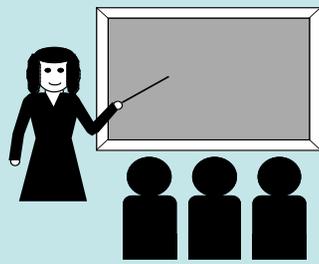


# Stories – Level One

## A Summary

### The Berenstain Bears and the Bad Habit by Stan & 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?”
2. How do these type of boys become people you can depend on?
3. Are these good habits the same for boys and girls?

# UNDERSTANDING CAUSE & EFFECT

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

## The Problem

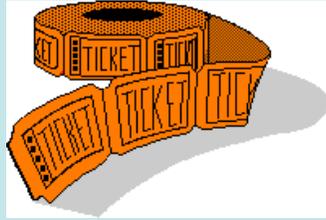
Sister Bear bites her fingernails.

## 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

SHELTON



Let's Act

SHELTON



# 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 smilie) on the chart every time they are successful and the teacher compliments them.

#### COMPLIMENT CHART FOR HABITS



### LEVELS ONE, TWO, AND THREE



## REFERENCES

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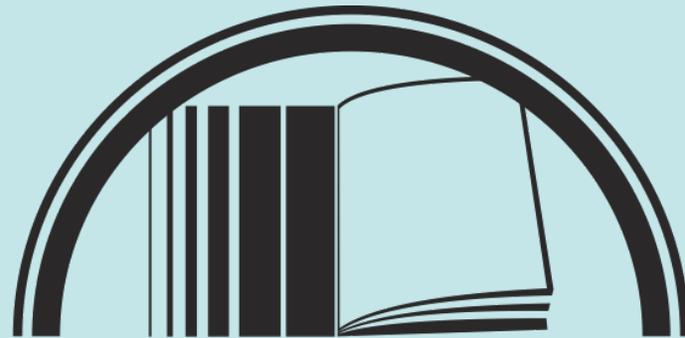
Wood, Audrey. *Elbert's Bad Word*.

# 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**



**THE SHELTON WAY**

A World Model for Educating Students Who Learn Differently

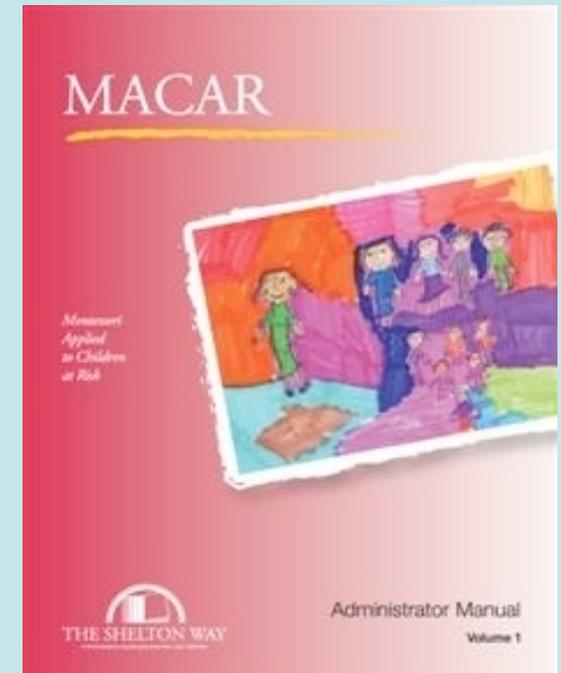
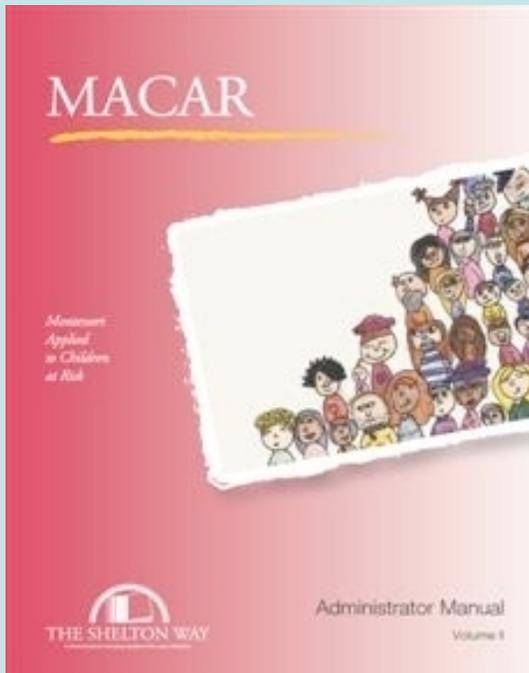
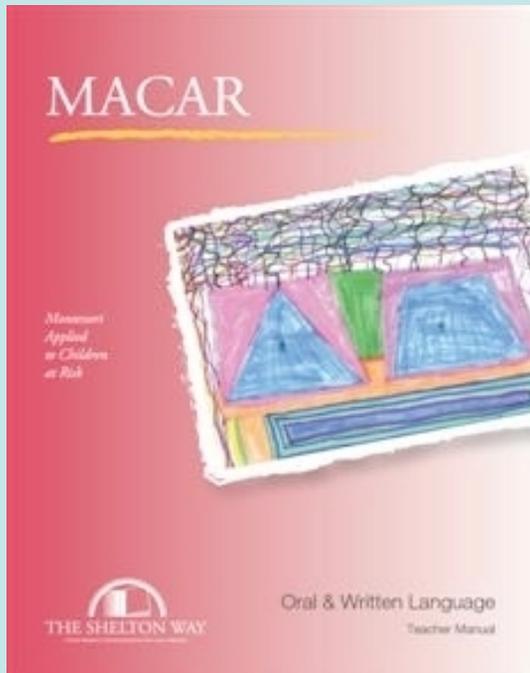
# CHOICES

## *The Shelton Model for Teaching Social Skills and Social Values*



[www.shelton.org/store](http://www.shelton.org/store)

For further information about the  
MACAR Course or Materials,  
please visit the Shelton website  
[www.shelton.org/MACAR](http://www.shelton.org/MACAR)



# **MONTESSORI APPLIED TO CHILDREN AT RISK FOR LEARNING DIFFERENCES (MACAR)**

**JULY 7-16, 2014  
(no class on Sunday)**

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

## **Manuals Included:**

- **MACAR Binder**
- **Practical Life**
- **Sensorial**
- **Math**
- **Oral Language Development**
- **Oral & Written Language**
- **SEE I Beginning**
- **SEE Handwriting & Auditory**

**[www. shelton. org/macar](http://www.shelton.org/macar)**