EMOTIONAL DISTURBANCE: A PRIMER FOR PARENTS AND TEACHERS

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Often, parents and teachers observe emotional or behavioral problems in children or adolescents. Although most children and adolescents display problem behaviors at one time or another, for some these behaviors continue over long periods. These behaviors may also be severe enough to affect performance in school and relationships with peers and adults. When behavior problems become this serious, students may be eligible for services through special education under the category emotional disturbance. This handout is intended to inform teachers and parents about how emotional disturbance is assessed, some characteristics and behaviors associated with emotional disturbance, possible services provided to students identified with emotional disturbance, and discipline issues associated with emotional disturbance.

What Is Emotional Disturbance

The term emotional disturbance is used as a disability category in federal special education legislation and in many states. Some states use the term emotional disorder or emotional behavioral disorder or serious emotional disturbance. Regardless of the term, all states and schools base their definitions on the requirements of the Individuals with Disabilities Education Act (IDEA).

Qualifying conditions. According to IDEA, students who are classified with an emotional disturbance must exhibit problem behaviors that meet three conditions. The behavior:

- Must occur over a long period
- Must be extreme or severe
- Must negatively affect the student’s educational performance

Criteria. The problem behavior must also meet one of the following five criteria:

- An inability to learn that cannot be explained by intellectual, sensory, or health factors
- An inability to build or maintain satisfactory interpersonal relationships with peers and teachers
- Inappropriate types of behavior or feelings under normal circumstances
- A general pervasive mood of unhappiness or depression
- A tendency to develop physical symptoms or fears associated with personal or school problems

A student who does not meet the criteria for emotional disturbance is judged to be ineligible for special education on the basis of emotional or behavioral disorders. The definition does not include students who are socially maladjusted, unless they also display behavior consistent with at least one of the five characteristics above and meet all three qualifying conditions. Although students do not need a psychiatric diagnosis to meet the special education criteria for emotional disturbance, children who are diagnosed with schizophrenia meet the definition.

Prevalence. Data from the Office of Special Education Programs (OSEP) of the U.S. Department of Education indicated that, in school year 2002–2003, more than 480,000 students K–12 were served in special education under the classification of Emotionally Disturbed. OSEP estimated that approximately 0.73% (less than one in 100) of the school-age population is identified as emotionally disturbed. However, this may be a significant underestimate of the number who need services for emotional disturbance: The 1999 Surgeon General’s Report on Child Mental Health estimated that 1 in 5 children have a “diagnosable mental, emotional or behavioral disorder” and as many as 1 in 10 may suffer from a “serious emotional disturbance.” Although prevalence of most major mental health disorders among
adults is thought to be similar across ethnic groups, non-Caucasian populations have lower rates of diagnosis owing to inequities in insurance and access to health care. Boys, and typically African American boys, tend to be referred and classified by school teams as having emotional disturbance at a significantly higher rate than girls or Caucasian students. Girls, although more likely to have a diagnosis of depression than boys, are not as likely to be referred and classified as having emotional disturbance during childhood and adolescence.

**Causes of Emotional Disturbance**

There are many types of behavior problems and disorders that might be classified as emotional disturbance. Because there are so many variations of disturbance, there are also many different causes of this disability. Some disorders appear to have a primarily biological basis: There are abnormalities in the way the brain processes certain chemicals that affect mood and regulation of behavior. Schizophrenia, depression, and severe anxiety are examples. Other severe behavior and emotional problems appear to be more related to traumatic experiences, family disruption, and inadequate or inappropriate learning experiences. There generally is no single cause of the behaviors and emotional problems that lead to a diagnosis of emotional disturbance, and often it appears that emotional disturbance is the result of multiple factors.

**Behavioral Characteristics**

Some of the characteristics and behaviors seen in children who have emotional disturbance include:

- Hyperactivity (short attention span, impulsiveness)
- Aggression/self-injurious behavior (acting out, fighting)
- Withdrawal (failure to initiate interaction with others; retreat from exchanges of social interaction; excessive fear or anxiety)
- Immaturity (inappropriate crying, temper tantrums, poor coping skills)
- Learning difficulties (academically performing below grade level)
- Mood swings or the appearance of sadness
- Peer rejection
- Oppositional or noncompliant behavior

Children with the most serious emotional disturbances may exhibit:

- Distorted thinking (unrealistic, grandiose, or illogical ideas or reasoning)
- Excessive anxiety
- Bizarre body movements
- Abnormal mood swings

Many students who do not have emotional disturbances may display some of these same behaviors at various times during their development. However, students with an emotional disturbance demonstrate these behaviors over long periods and with a level of intensity and severity that is atypical. Students with an emotional disturbance have difficulties coping with their environment or peers.

**Assessing Emotional Disturbance**

Students who are assessed for emotional disturbance typically have displayed problem behaviors within the school and classroom for a long period. Often they also have experienced difficulties at home and in the community. Despite attempts at intervention, their behaviors fail to improve and are significantly disruptive to the learning of both the child and classmates. Frequently, parents or teachers initiate the request for a multidisciplinary evaluation owing to persistent concerns about these problem behaviors and to determine if the child is eligible for special education services. A comprehensive assessment by a multidisciplinary team is required for the identification of emotional disturbance under IDEA regulations. The assessment should address patterns of behavior, the context of behavior, the impact of behavior on learning and socialization, and developmental factors.

**Evaluation team.** A multidisciplinary evaluation is conducted by a team that includes parents, at least one regular education teacher, at least one special education teacher, other school personnel who are knowledgeable and qualified to address the suspected emotional disturbance (such as the school psychologist), an administrator, and, when appropriate, the child. Others who might appropriately participate in the team evaluation include, for instance, a guidance counselor, social worker, and school nurse. A school psychologist may be particularly well qualified to collect and compile the information provided by the team. As specified in IDEA, the team must use multiple methods of collecting information, and must assure that the methods used are fair relative to the student’s age, culture, and language. The team may collect information through observations, interviews, standardized measures, and review of school records.

**Observations.** Since student behavior may vary from one context to another, it is important to obtain various forms of information from several team members and across different settings. Several team
members may conduct observations of the student in
the settings where the problem behaviors are most likely
to occur to assist in determining why the student is
displaying the behavior and what environmental factors
are precipitating or reinforcing the behavior.

**Interviews.** The school psychologist or other team
members may interview the student, parents, and
teachers to collect details about the student’s
development and school history, descriptions of the
presenting problems, causes and effects of the behavior,
parents’ or teachers’ reactions to the behaviors of
concern, expectations regarding the behavior,
interventions that have been attempted, and family
stressors related to the behavior problem. Interviews
can also provide information about a student’s strengths
and talents as well as any cultural issues that may be
relevant to understanding the student’s behaviors and
family expectations.

**Standardized measures.** While observations and
interviews provide helpful information about a student’s
behavior, it is also important to measure different
patterns of behaviors and comparing these patterns to
those of other students of the same age and grade level.
Standardized instruments such as rating scales are
based on considerable research usually involving large
populations of students from the normal school
population and therefore help teams determine the
degree to which the referred student’s behavior is
similar to or different from what is expected for his or
her age and gender. Standardized measures can be used
to obtain parents’ and teachers’ ratings of emotional or
behavioral problems, as well as a student’s own views of
his or her problems. Information from these measures
might help identify other behavioral issues, such as
anxiety, that may not be easily observed by others who
do not know the student well.

**Review of records.** The team will also collect
information through a review of the student’s records.
Medical records may provide information regarding the
child’s development and any health concerns that may
be related to the behavior problem. Educational records
provide information regarding attendance, discipline,
and academic achievement. A student may also have
records from an outside mental health agency that may
be useful in providing information about possible
diagnoses that may explain the behaviors observed in
school and may indicate what medications or other
types of treatment (counseling, family therapy) have
been prescribed.

**Functional Behavior Assessment.** Functional
Behavior Assessment (FBA) is a process of determining
why, when, and under what conditions a behavior
occurs. It is most effectively used when students have
challenging behaviors that resist typical classroom
interventions and is helpful in both determining a
student’s need for special education services and in
designing specific interventions to address challenging
behaviors. Many of the above procedures can be used as
part of the assessment, particularly observations and
interviews.

**Services**

Students needing services to benefit from their
education are entitled to receive special education
services according to IDEA. An Individualized Education
Program (IEP) is developed by the multidisciplinary
team to establish goals to minimize problem behaviors
and foster appropriate behaviors. Depending on their
degree of need, students receive support services in the
least-restrictive environment (the setting that most
resembles the typical school setting or *mainstream*).

Some students are able to receive all services within
their regular classroom, while others with more severe
behavior problems may receive some or all services
outside of their regular classroom. The continuum of
services might include adaptations in the regular
education classroom (such as reducing anxiety with
untimed tests), behavior plans managed by a special
education teacher, support in a resource room for part of
the school day, or partial or full-time placement in a
special classroom or special school for students with
severe emotional disturbance. An IEP for children with
emotional disturbance may include:

- Emotional and behavioral support (including
  specific behavior plans)
- Academic support (tutoring, modifications in
  assignments)
- Social skills and other direct instruction to promote
  positive peer interactions, self-awareness, self-
  control, and self-esteem
- Classroom accommodations (such as modified
  schedules, untimed tests, quiet study areas)
- Psychological or counseling services
- Modifications to school discipline procedures
- Monitoring of medication by the school nurse (if
  medication has been prescribed by a physician)
- Inter-agency collaboration (communication and
  collaboration between school personnel and
  community service providers working with the
  student and family)

**Discipline Issues**

When students with emotional disturbance violate
school rules, there are discipline procedures that must
be addressed based on current IDEA mandates.
According to IDEA, parents must be notified when a disciplinary action is taken. Depending on the severity of the rule violation and the provisions of the IEP, a student with emotional disturbance may be suspended from school or removed to an alternative educational setting if he or she engages in dangerous behaviors as defined in current law and regulation (such as bringing a weapon to school, selling or using drugs on campus, or other dangerous behaviors that are likely to injure himself or herself or others). Each state further defines dangerous behaviors and disciplinary procedures as applied to students with disabilities, including emotional disturbance.

Summary
Students with emotional disturbance present many challenges to parents and educators. Special education laws mandate services to support these students in schools. As part of the IEP team, parents serve as participants in assessment and program planning, as well as advocates for the most appropriate instruction and behavioral support for their child. Classroom teachers similarly play key roles in the educational program to support these students. Teacher observations are critical to the comprehensive assessment, and their implementation of behavior plans and other strategies in collaboration with special education personnel provides the support that these students need in order to learn and feel successful.

Resources

Websites
Center on Positive Behavioral Interventions and Supports—www.pbis.org
Federation of Families for Children's Mental Health—www.ffcmh.org
IDEA Data (annual reports and other data on special education)—www.idea-data.org
National Clearinghouse on Family Support and Children's Mental Health—www.rtc.pdx.edu
National Mental Health Association—www.nmha.org
National Mental Health Information Center—www.mentalhealth.org