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Behavior modification: Addressing the challenging behaviors within an Early Childhood Program

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**Behavior modification: Addressing the challenging behaviors within an Early Childhood
Program.**

by

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Abstract

Addressing challenging behaviors in our Early Childhood Programs will always be a topic of concern for the teachers as well as for the students. One solution in avoiding misbehavior is to find the antecedent before the behavior can begin to be a disruption. A discussion of the consequences are also important aspects for children and adults to understand when thinking about how to control an unwanted act of aggression. “Aggressive behavior usually follows an event that the patient perceives as provocative. Types of provocation include perceptions of disrespectful treatment; unfairness/injustice; frustration/interruption; annoying traits, and irritations” (Daffern & Tonkin, 2010, para. 21). Research has found that how a child behaves can stem from cultural backgrounds, whether the child is raised in the rural or urban areas and how differences can play a role within different daycare centers. The findings within this research opened a discussion and posed the question: what can we do as teachers to prevent misbehaviors? Thinking about where the behaviors are coming from each educator will view each case on an individual level when looking for a solution or a prevention to the current problem.

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Chapter 1

Behavior modification: Addressing the challenging behaviors within an Early Childhood program.

Introduction

What is behavior modification? “Behavior modification is the application of experimentally established principles of behavior to problems of behavior” (Behavior Modification, para. 3). Behavior modification is the attempt to take away any negative behavior by using positive reinforcements. It is an attempt to “structured learning in which new skills and other behaviors are learned, undesired reactions and habits are reduced, and the client becomes more motivated for the desired changes” (para. 4). “B. F. Skinner proposed behavior modification as a way to shape behavior” (Bucher & Manning, 2001, para. 2). Teaching children to make good choices and to avoid negative feedback from adult authorities.

Behavior modification is a topic that has been in existence dating back to the time of Adam and Eve. I came to this conclusion when I was thinking about how our first parents were as children. How did they behave in the garden of paradise and how did they listened to their Father? Adam and Eve only had one rule which needed to be obeyed. It wasn't what time they needed to be home, no running in the garden, talking with a full mouth,, or going to bed at a decent hour, it was the forbidden tree. Of course as with all children, the tree became a strong temptation. Children and adults are easily influenced by their peers. Teenagers especially like to feel accepted and not rejected by their peers. Like with the story of Adam and Eve, negative peer influences took over their decision in choosing right from wrong. If you tell a child not to touch something,

curiosity and the desire to touch is already upon that child. Adam and Eve were young people that needed guidance and instruction on how they should've behaved appropriately. When they disobeyed their Father they hid because they were ashamed, and I imagined scared of what the consequence of their fallen action was going to entail. If Adam and Eve would have known exactly what was going to happen as a result of their disobedience would they have listened to the negative influences? Of course God knew what was going to happen and he allowed his children to make their choices with the hope of learning from their mistakes. Adam and Eve as a reaction to their disobedience participated in blaming one another, instead of looking into the fact that the choice to do wrong falls only on the person making the wrong choice, not on the person telling them to do wrong. This is a hard lesson for children to understand. "Historically, moreover, the child body has been deemed 'irrational', lacking discipline and uncontrolled, and hence it is constructed as being much closer to nature"(Stephens, 2006, para. 1).

I think that parents and educators do have a challenge with allowing their children the freedom to explore, to investigate, make decisions and to learn from mistakes they have made. Parents and teachers are here to help guide, to mold, to shape the young child into a functioning adult that will later become part of this society. These children that we have molded will then mold their own children and the cycle will continue from generation upon generation. With the use of behavior modification children will learn appropriate techniques and will learn how to self-regulate their misbehaviors and will learn how to ask for help. Important life skills to have in the present as well as in the future.

Teaching children is a gift and there are consequences for any misbehaviors that takes away from the learning of others. In Adam and Eve's case, it only took one mistake for the fall to

happen. In our human reality, we have many chances and consequences to redeem our actions and make every attempt to do the right thing. As teachers, I feel that is our responsibility to teach these children, to help, to guide, and to give them a solid foundation which is needed in order to be successful.

I also have a belief that learning begins in the womb from the moments that hearing becomes evident. "Sensory and brain mechanisms for hearing develop at 30 weeks of gestational age; the study shows that unborn babies are listening to their mothers talk during the last 10 weeks of pregnancy; and at birth, they can demonstrate what they've heard ("Babies Learn Language in," 2013).

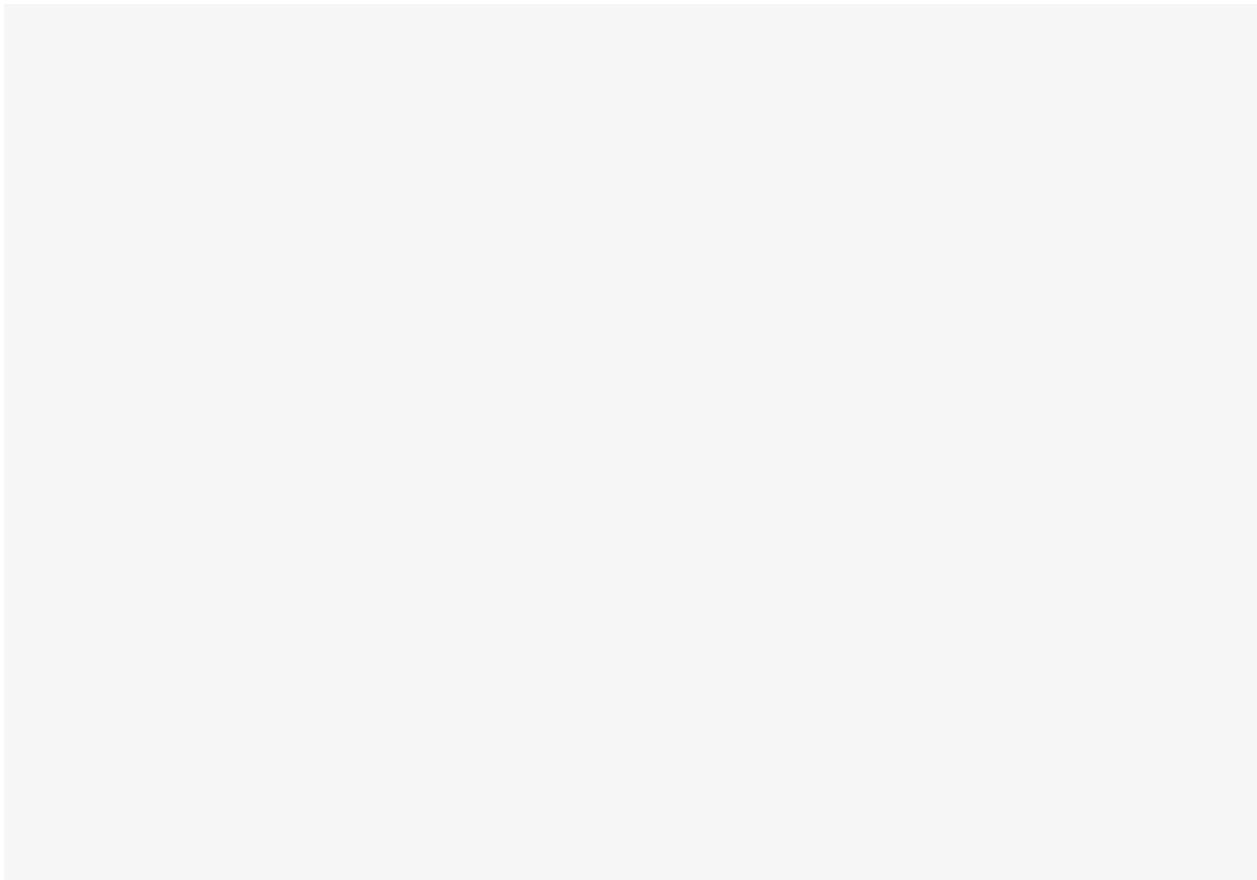
The purpose of this study is to take a closer look at Early Childhood programs to examine challenging behaviors and to learn how to use behavioral modification intentionally within our ECE (Early Childhood Education) programs that will benefit our children to learn and to grow.

Questions: What causes a child to possess a challenging behavior? Is the behavior an expression of something that the child is missing in his/her life? What is the reason and why do young children possess these skills? Where do these behavior problems come from? Is it genetics, experiences (influences) or family upbringing? Can behavior result from medication such as antibiotics or asthma meds? What can we do as teachers to prevent misbehavior?

The question of prevention is key in this research study. I will study and research thoroughly 20 to 25 articles and will attempt to find a solution or a potential cause in determining why challenging behaviors can be an issue, and what we as educators can do to help minimize its effects in our classrooms.

Currently, I work in a child care center that takes care of children from birth through school age. Looking at behavior modification has been a topic that many educators have used within their own classrooms, and is a topic that constantly needs to be revisited. In the next couple of chapters, I will reflect on some relevant articles that will explain some of the association with behavior modification according to research. In chapter three I will reflect on some experiences of working in daycare centers for nearly 30 years, methods that have been used and some changes we have seen through the years in relation to behavior modification.

I will also discussed where this research will take us in the future. What will be the goals and objectives of where educators will be in shaping the minds and hearts of our young students?



Chapter Two

Review of the Literature

Preventing Challenging Behaviors in Early Childhood: A behavior modification approach.

“Problem behaviors can take many forms; however, what defines a problem behavior is not the form that it takes, but its impact on a student and the social systems in which the student lives and learns” (Bambara & Kern, 2005, p. 1).

My intentions will be to examine the findings and the research. I will take a look at the different ways that people, in general, will view behavior modification. I will take a look at how different cultures view aggressive behavior and how it is considered normal development while others believe that it is the adult who is responsible for shaping our children. If the proper behavior is not taught then aggression will become a part of who they will become.

Behavioral Influences

Daycare center based programs versus staying at home will be taken into consideration. Is a challenging behavior something that is taught in the home or can it be taught and influenced by their peers? Children learn from examples and from a prevalent role model, whether a teacher, a peer or a parent. Where do children learn how to behave? To answer this question briefly Gardner & Shaw gives a short definition of the influence behavior can have on a child. The authors mentioned that behaviors within a preschool child could be influenced by their genes and

by their social environment and of course the caring atmosphere of the teachers within the classroom (Gardner, & Shaw, n.d.). Since we have an idea of what can influence behavior, what are some things we need to do to control or to change behavior?

William, Armstrong, Agazzi, and Bradley-Klug (2010) gave a statement that behaviorism relies on the previous conduct, the consequences of the action and the results of the punishment and reinforcements to shape and to change behaviors (Williams, Armstrong, Agazzi and Bradley-Klug, 2010). According to this research knowing the facts before an incident is as important as knowing what the necessary reinforcements will be to change an unwanted behavior.

Challenging behaviors refers to behaviors which are inappropriate, harmful to self or others and is considered behavior that is not on task as well as actions which interrupt the class from learning (Barnett, Elliott, Wolsing, Burger, Haski, McKissick, Vander & Carolyn, 2006). Teachers, society, and parents had different views on what is acceptable behavioral practice and what is inappropriate and considered a challenged. These differences depend on the cultures and the opinion of how each person was raised within their own family.

Rural and Urban areas is another consideration when thinking about challenging behaviors. Is there a difference in how children behave in those areas? Another fact is gender. Do challenging behaviors affect boys and girls differently?

Culture

According to Kaiser and Raminsky (2007) cultures do have various opinions about aggressive behaviors. “When they encourage it, the result is an aggressive society” (Kaiser and Raminsky, 2007, p. 17). When the opposite occurs like discouraging aggression, a peaceful environment exists like within the Amish community (Delgado, 1979). It is important to encourage children to learn how to cooperate and to get along rather than to promote aggressive behavior. The more practice the child receives in learning acceptable behavior, the more it will become a part of his personality.

Tobin, Wu, and Davidson in their book titled, *“In Preschool in Three Cultures...”* (1989) have discussed the difference in opinions when dealing with aggression. The authors first described a 4-year-old in a Japanese preschool who enjoys wrestling, fighting, loud singing, joking, ruining games, throwing cards and making comments toward other activities. The teacher's idea was to ignore the behavior. The belief is not to punish or to confront the child but only through interacting with his peers. The Japanese believe this behavior is normal development and that the children need to learn to deal with conflict to be complete individuals.

The Chinese believe that adults need to interfere rather quickly. If children misbehave within the classroom without redirection, the children will think it is acceptable behavior. The

Chinese believe that the teacher is responsible for teaching appropriate and acceptable behavior (Tobin, Wu, and Davidson, 1989).

In the USA, the authors describe another very different approach is that using our words will solve aggressive issues. The teacher and the children will work together to come up with a solution that will address the reason behind the aggression. The teacher and the class will discuss the rules, what is expected and what they need to do if they feel angry (Tobin, Wu, and Davidson, 1989).

Three different approaches within three distinct countries all have the well-being of raising the children into respectable adults. Is one approach better than the other? According to these individual cultures, the answer would be “no.” Parents and teachers all come into this world learning from their parents, culture and their teachers. Beliefs and traditions are handed down from generation to generation. A teacher with experience and knowledge will take into consideration the child’s culture, home background, and personal experiences when thinking about the reasons why these particular challenges play a role within the classroom.

Daycare Center Based Programs versus Home Care

“A Pilot Study of Day Care Centers and Their Clientele” by Prescott & Witmer (1965) states very clearly that children who are in daycare centers are less likely to test their freedom and to experiment with new risk-taking skills than children who have the freedom at home. Daycare

centers have rules, daily plan activities, and more than one child that needs attention. Children at home are supervised less often and will most likely take chances as well as being able to test their boundaries and to learn to grow from their mistakes.

As compared with home care, group care may provide fewer opportunities for children to observe adult activities and transactions (Prescott & Witmer, 1965). Even though this article is from 1965, it relates still today to the challenges we face with our children in society. This makes sense in reality when thinking about why a child might have a tantrum. In a daycare setting, there is constant supervision. Along with constant supervision, children will have restrictions and constant redirection. Children like their independence and some will fight for that right.

Behavioral challenges can become an issue when children refuse to do what they need to do while in the care of someone other than their parent.

Votruba-Drzal, Levine Coley, Maldonado-Carreño, Li-Grining, and P. Lindsay Chase-Lansdale (2010) has mentioned in their article *Child Care and the Development of Behavior Problems among Economically Disadvantaged Children in Middle Childhood* a correlation between home care and center based daycare centers. It is stated that there is a risk for behavioral problems especially if the family is poor, ethnicity is taken into consideration and if the child is from a single family, the stakes are much higher of having a challenging behavior within the daycare and within the home (Votruba-Drzal, 2010). There are still some other

challenges that are still in existence, for example, teacher turnover rate, larger group sizes, and not as many adults can cause greater problems in regards to self-regulation and behavioral issues among their peers (Dowsett, Huston, Imes, & Gennetian, 2008). In another article, *Behavior Problems of Preschool Children From Low-Income Families* by Huaqing Qi & Kaiser (2003) states that children whose families were low income had a higher percentage of challenging behaviors in comparison to the others in different populations. "Behavior problems were associated with multiple risk factors found in these children's lives related to child, parent, and socioeconomic characteristics" (Dowsett, et al., 2008, para. 1).

On the other hand, the child's "predispositions and characteristics may influence their attention, actions, and the responses they elicit from caregivers in their environments. In addition, children's interactions, experiences, and opportunities influence the way such predispositions express themselves" (Votruba-Drzal, Coley, & Chase-Lansdale, 2004 p. 296). This quote is correct, the child is influenced by his peers and his caregivers to either act appropriately, or the impacts the child receives could be negative causing a behavior to be a challenge. Prevention of behaviors is our ultimate goal to help these young children to self-regulate and to have control over their emotions.

One prevention technique that helps with children who are challenging is for parents to enroll in a homeschool based program for preschoolers. This is a school for parents to learn how

to use meaningful communication in the home to prevent misbehavior. The findings of this program have helped reduced the number of incidences of behavioral problems. “Regression analyses indicated that children assigned to the Preschool First Step intervention had significantly higher social skills, and significantly fewer behavior problems...” (Feil, Frey, Small, Seeley, Golly, & Forness, 2014, p. 151).

Rural and Urban Areas

In my research of finding the differences between rural and urban areas in regards to behavioral issues is that in rural areas there are fewer resources that are available. Less intervention is offered, and teacher burn-out is common due to the lack of benefits and salary in comparison to urban areas (Pennington, Horn, & Berrong, 2009). Rude, Jackson, Correa, Luckner, Muir, & Ferrell, K. (2005) have also stated that 53% of the population in the rural areas were not using any intervention support to help guide students with behavioral problems or disabilities. The other half of the population reported that their students did not receive the adequate help that their students need to concentrate within the classroom setting, therefore causing more behavioral issues and negativity than in the urban areas who will take advantage of the resources given to them. Hammond and Ingalls (2003) found that most of the educators had negative opinions when it came to inclusion as well as the teacher's lack of sufficient training. Finally, due to lack of resources and training available teachers may lack the ability to provide

necessary activities within the community to keep the children interested in learning and growing to their full potential (Pennington, Horn, & Berrong, 2009).

Gender

Gender differences are apparent when thinking about challenging behaviors. Boys and girls actions behaviorally show a difference based on their biological genes and their social influences (Rimm-Kaufman & Kagan, 2005). Boys do have a tendency to be aggressive and show a character who expresses assertiveness as well as patterns of behavioral issues than girls (Francis, 2000; Grossman & Grossman, 1994; Zahn-Waxler, 1993). Gender differences reflect on their characters at school with their caregivers. Girls are more likely to receive acceptance and praise for acting appropriately, and boys receive praise for thinking about their behaviors in a creative way (Delamont, 1990). Research has made a point that in American cultures girls are encouraged to be unsure of their behavioral tendency while boys are especially expected to be outgoing (Sadker & Sadker, 1994). By the time these young children reach kindergarten they have already adopted their original prospected gender characters and will act upon them accordingly (Bandura, 1986).

Prevention of Challenging Behaviors

Challenging behaviors can be answered by meeting the child's needs and supporting the family. Positive behavioral interventions and supports (PBIS) will honor the family as a whole while the child undergoes special treatment to help in managing his therapy sessions (Alkahtani, 2013). According to Mathur, Oakes, Clark, & Griller (2013), the most common behavior challenging behavior most seen in young children were those actions that were considered “off-task” and the least prevalent behavior was “isolation” or no social skills or interactions with fellow peers (para. 3).

In Bayat book, *Addressing Challenging Behavior and Mental Health Issues* (2015) he discussed ways that are beneficial in meeting the children’s needs and will aid in the prevention of misbehaviors. First, the activities need to be Developmentally Age Appropriate (DAP). DAP has always been in practice, but it was NAEYC (National Association for the Education of Young Children) who implemented the term DAP since the 1980’s. “As NAEYC defines it, *developmentally appropriate practice* (DAP) is a framework of principles and guidelines for best practice in the care and education of young children, birth through age 8. It is grounded both in the research on how young children develop and learn and in what is known about educational effectiveness”(DAP frequently asked questions, para 1). Secondly, teacher and child interactions are important. Thirdly, build a classroom which is safe for exploration, and fourthly, build a trusting relationship with the student. These ongoing changes and implications with the children

in the teachers care, need to be interesting to entice the children to want to play and to explore.

Therefore hoping to avoid any potential challenging behaviors in the future. These techniques will work in most cases, but if a child is struggling with deep emotions and is having trouble with concentration, then it is best to get a diagnosis and to ask for further assistance.

Furthermore, Bayat (2015) also discussed strategies that will promote a positive classroom environment. It is important to establish positive relationships by “interacting with children on their own level and terms” (Bayat, 2015, p. 105). He continues by adding a visual schedule to the classroom as well as classroom rules and regulations. Transitions plans need to be well established, engaging children in exciting activities, DAP lessons, and feedback to all children with “encouraging words” is important for self-esteem and motivation (Bayat, 2015, p.105). Having an intentional plan with the consideration of each student and giving each student the attention he or she deserves will reap the reward of having a peaceful classroom.

Chapter 3

A Reflection

Behavior modification in regards to challenging behaviors is the focus of any childcare facility and it is a main distraction and redirection tactic found in the home. Behavior modification will always be perfected with practice as long as we still have challenging behaviors in existence.

In this chapter, I will first discuss the issue of prescription drugs that are available to young children to control behaviors of hyperactivity, discussion of redirection and behavior modification and how it works will be discussed, and finally some thoughts on my experiences and how I see behavior modification and challenging behaviors shaping our future.

The first thing that is a major concern for our young children today needing extra attention is the fact that the medication Ritalin tends to be frequently prescribed. It is a drug that is known to cause “cardiovascular damage” (Breeding, 2014, para. 7). According to the National Alliance (2001), there was a count of 186 deaths between the years 1990 and 2000 due to children taking the drug for an extended period to control hyperactivity. Another area of concern that has been researched is the number of children who are diagnosed with bipolar disorder. According to Breeding (2014), these children who have become bipolar is a result or side effect of using stimulants to control ADHD in children. Our society is quick to prescribed medication to keep our

children sedated not realizes the long term effects this drugs can have on a person, and what physical damage these drugs can cause. Instead of helping the situation drugs used to treat ADHD and bipolar disorders can create a sense of confusion, impulsivity, and random emotional outbursts (Breeding, 2014). Ritalin might have some benefits for children who have trouble concentrating, focusing and maintaining control, but I would, as a parent, be very cautious of the long term effect that Ritalin can play on the cardiovascular vessels of the heart.

There are reasons to why children are born with challenging behaviors. I have discovered that the children who were born with drug and alcohol abuse will produce highly functional children. Infants have shown signs of irritability, children have demonstrated behavioral issues, and teenagers may recycle the aggressiveness onto their children. The problems that are caused by alcohol and drugs according to the research can be reconciled with the improvement and acceptable functioning of the family working together (Calhoun, Conner, Miller, Messina, 2015). Therapy might be an option in helping families to learn how to self-regulate their emotions, learning healthy ways to deal with anger, and learning ways to manage parenting skills.

Other behavioral issues include negative and positive attention, children who are overly tired, lacking nutrients in their diet, or is already on a medication that causes irritability. The stakeholders have a difficult job knowing when a child might need help versus a child who exhibits lots of high functional energy.

Secondly, we need to think about behavior modification and redirection and how this method of rewarding and attempting to change a child's behavior will reap its benefit among educators, community helpers, and personal life.

According to Mace, & Nevin, (2017) behavior modification will work if an alternative action replaces the unwanted behavior. Mace and Nevin have described two types of reinforcers that are called "differential reinforcement" and "noncontingent reinforcer"(para. 18). The differential reinforcers primary concern is to increase reinforcement for some other replacement behavior in order to decrease the unwanted behavior. For example, given the child an alternative to their actual behavior, a purposeful redirection to achieve the desired behavior in order to reduce the unaccepted behavior. Noncontingent reinforcer will arrange reinforcers to be given to the students on an independent level regardless of the behavior they are currently involved in (Mace, & Nevin, 2017). For example, a reinforcer is given to a child based on that's child individual performance regardless of any misbehaviors being performed and seen by their teachers. These two forms of behavior modification have strong accountability with approving to be effective in reducing the unwanted behavior. Constant reinforcers will take away from the negative causing children to forget their misbehaving actions. Reinforcing the desired behavior will take motivation, consistency, and a dedicated team. The only way these methods will not work is that the reinforcers were disrupted by inconsistency, inaccurate interventions, reducing reinforcement

rates, and introduction problems that were already previously corrected (2017). The outcome would be that the problem behavior returns at a much higher rate than previously known.

My final thoughts lead me to discuss my reflection and experiences: What I have seen in my own daycare experiences, how things have changed, and how I see behavior modification shaping today's children for a better society.

I have been in the field of education with young children for nearly 30 years. At the beginning of my career, I had not seen my co-workers, parents of the daycare children or my parents use any form of redirecting unwanted behavior. The only type of correction was spanking, using the belt, telling children "no," yelling, threatening them, and making them feel guilty for their behaviors. Children in that society learned very little about self-regulation and learning to cope with anxiety and anger. Even though challenging behavior still exists, I sense that the teachers, parents and the children today are trying to set realistic goals in establishing a method to control unwanted behaviors. Teachers today, are more compassionate, redirection is noticeable, in their teaching styles as well as guiding, reinforcing acceptable behavior, supporting, giving them love and hope for a better future is evident with today's educators.

In my current day care center, I have parents that know their children can be a challenge and will seek outside help from therapists, as well as a mentor that will help the child to learn acceptable and appropriate behaviors while attending school. We also have parents that will not

support the teachers in helping their child have access to services. These children will need extra love, new reinforcers, reminders, and constant supervision and support from the whole team to decrease unwanted behaviors as much as possible to make a learning environment expandable for all the children. I have also learned that children need to learn to behave by giving them exercising like “deep breathing, meditation and mindfulness” may help with behavioral incidents (Minahan & Schultz, 2014, para. 14).

I also have noticed that some causes of behavioral issues and irritability have to do with a lack of sleep, lack of attention and lack of appropriate medications. Working parents having to get up early, and children not sleeping at night are some of the concerns that need to be taken into consideration when thinking about behavior modification. In addition, parents not spending enough time together with their children, as well as using medication as a suppressor can cause behavioral issues in our young children as well as our older children. Some parents will have their children at daycare ten hours a day. Reducing daycare hours, reducing work schedules, giving children undivided attention and getting to bed early are some suggestions for avoiding misbehaviors. Today’s society can be fast paced, money and time are always a concern. Having a plan to balance family, work, and daycare is a challenge and will take careful planning to make the system work well for everyone.

According to Schwartz, & Feeny (2007), it is important to establish an intervention and a routine when going to bed. The authors explained in great detail in how to overcome sleep issues and overcoming unnecessary irritability. For example, if you get up at 6:30, then 9:30 is bed time, avoiding liquids, TV, homework, phone, and maintaining a consistent bedtime routine will help with reducing behavioral issues and will make life conducive to learning (2007). Another way to reduce a misbehavior is by giving them the attention they need both in the home and in the school environment. Children who lack attention thrive for attention whether it is negative or positive.

In comparison to my first teaching job until the present time of age, the knowledge that teachers have possessed about child development and learning about challenging behaviors have changed. Teachers are dedicated in their field of study. Educators are pursuing higher education and knowledge on how to teach and how to care for our young children. Many classes are offered on how to deal with challenging behavior and most importantly how to use behavior modification in support of the child, the parents, and the teachers. Challenging behaviors among our children are still present in today's society but how we as educators addressed each issue has changed over the years. Changing negative behavior into positive ones is a struggle that constantly needs support from all stakeholders involved in the child's life.

In conclusion, children like adults struggle with issues like sleep, and the ability to be heard and to feel like they are apart of the community. Our students might tend to lack

self-control only because that part of themselves isn't fully developed and they need to learn acceptable forms of behaviors. Children need reassurance, and even though some children might need extra help from therapists and medications, we as educators should be understanding and supportive whenever the child needs love and guidance for example while in attendance at the daycare. Our goal is to minimize the stress and reduced unwanted behavior to make happier children within our society and happier adults. This is our future and where I see our children learning to grow to make a better tomorrow.

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