



♥ HAPPY VALENTINES DAY! ♥

## Troubled Teens Benefit from Volunteering

According to the latest Harris Poll, fifty-six percent of teens are out volunteering in their communities, and some of them are the most unlikely of teens.

In Atlanta, GA, teens kicked out of school for bad grades, fighting, or using alcohol or drugs are sent to volunteer at a food pantry. Nearly all teens said they thought they'd hate it, but ended up with a different opinion afterwards. "It's actually, really, really fun," commented one teen;



another said, "It makes me feel like I'm doing something important with my time. That I'm helping other people out and that they're getting what they need."

That's the point, experts say. Helping others helps these teens understand how important they are. "We've had people who come in here, and they literally are crying. You know, 'thank you so much,' and hugging these kids' necks," says Deborah Swank, executive director of Hearts to Nourish Hope. "It makes a big difference, and it makes them see themselves differently—'Well, you know if I could do this, maybe I can do something else.' The first thing they have to learn is what a lot of people say, but not many believe: Each one of us can make a difference."

"It makes you happier. You know, helping people out brings something out in you that you usually wouldn't feel," said 15-year-old Tristan. Dorothy Law Nolte writes, "If a child lives with sharing, [he or she] learns about generosity."

In Chicago, the public schools offer community service as part of their balanced and restorative justice strategies for students with policy violations. This allows the offender to be held accountable for their actions, and provide meaningful contributions to the community.

Experts say volunteering is a way to help others and redefine yourself.

Suggestions to help improve the ethics of children and make them more thoughtful and generous include:

- model sharing and giving
- recognize their spontaneous gestures of sharing and emphasize the result of their kindness to others
- ask students questions about how they show and receive kindness and generosity, and have them respond by writing their answers in a journal

(Sources: www.connectwithkids.com, 12-16-09; www.cps.edu)

## ↑ The Ups & Downs of Alcohol, Tobacco, & Other Drug Use ↓

Results from the annual Monitoring the Future (MTF) study, conducted by researchers at the University of Michigan, report increased youth use of marijuana and a flattening out of many other types of illicit drug use after a prolonged decline.

**Marijuana** use has crept back up to the levels last reported five years ago after a steady decline, and was almost entirely responsible for the uptick in overall drug-use rates among teens. "Not only is use rising, but a key belief about the degree of risk associated with marijuana use has been in decline among young people even longer, and the degree to which teens disapprove of use of the drug has recently begun to decline," said lead researcher Lloyd Johnston. In 2009, 32.8% of 12th graders, 26.7% of 10th graders, and 11.8% of 8th graders reported past-year marijuana use.



**Prescription Drugs** remain problematic, with almost one in 10 high school seniors reporting misuse of the prescription painkiller Vicodin, and prescription drugs accounting for 8 of the 13 drugs most frequently abused by 12th graders.



**Salvia Divinorum** has received substantial media coverage in recent years. Researchers found that 5.7% of high school seniors reported using salvia in the past year.

**Alcohol** use in 2009 ticked downward among 8th graders, but 10th and 12th graders drank and binged at about the same rate as 2007, showing the trend toward declining use may be slowing to a halt. Sixty percent of students reported they could easily obtain alcohol.



**Methamphetamine** was identified as having a significant decline in reported teen use. Just 1.2% of high school students reported using the drug in 2009, the lowest rate since 1999.

**Smoking** rates among teens have fallen to the lowest levels in history, although tobacco-control experts worry that use of smokeless tobacco products could be rising. In 2009, smoking rates declined among 8th, 10th, and 12th graders. Just 11.2% of high school seniors report they smoke cigarettes, less than half the rate in 1997. Use of smokeless tobacco rose slightly among 10th graders, with 6.5% reporting use of products that the tobacco industry has been marketing as an alternative to smoking.



**Other Drugs:** Cocaine use is at its lowest levels since the early 1990's, and the use of ecstasy, inhalants and LSD have either fallen or flattened out at relatively low levels.

(Source: www.jointogether.org, 12-15-09)



## Working with Students with Serious Behavior Disorders

Oppositional Defiant Disorder (ODD) and Conduct Disorder (CD) are psychiatric disorders that can be very disruptive in a classroom. Many children will exhibit these behaviors at one time or another, however, the key to ODD and CD are behavior patterns that are in place for at least 6 months. While these disorders are similar, CD is much more severe, the child's behaviors are very deliberate, and many also have learning disabilities. Characteristics associated with having ODD and CD are:

- Defiant and doesn't obey rules/routines; will be non-compliant; argues often with adults and peers (both)
- Lacking accountability and blames others for inappropriate behaviors (both)
- Often seems angry, spiteful and vindictive (both)
- Goes out of his/her way to: annoy others in very bothersome ways (ODD); bully and harm others (CD)
- Often loses his/her temper and is prone to tantrums (ODD)
- Physical aggression towards people and animals; destructive to property (CD)
- Is difficult to control (CD)
- Will be involved in theft, start fights, and lacks respect for authority (CD)
- Rarely shows concern for others (CD)
- Tendency to run away (CD)



The best way to treat a child with ODD or CD includes behavior management techniques, using a consistent approach to discipline and following through with positive reinforcement of appropriate behaviors. Be fair but be firm, give respect to get respect.

- Develop consistent behavior expectations
- Communicate with parents so that strategies are consistent at home and school
- Apply established consequences immediately, fairly and consistently
- Establish a quiet cooling off area
- Teach self talk to relieve stress and anxiety
- Provide a positive and encouraging classroom environment
- Promote confidence and self-esteem, which these children are often lacking
- Give praise for appropriate behavior and always provide timely feedback
- Use behavior contracts



It is important to avoid confrontation and power struggles. Tips for accomplishing this are:

- Remain calm; do not show your anger or frustration. You don't want to escalate the student's behavior.
- It is very important not to humiliate the child in front of their peers. Get the rest of the class working to enable you to have a one-on-one conversation with the disruptive student outside the classroom or quietly at their desk. Do not engage with anger, frustration or anything that may intimidate the student; your goal is to calm the student. Validate the student's need, "I can see why you are angry about...but if you work with me, we'll talk about this later."
- Do not engage the student; you'll end up in a power struggle. Ignore minor behaviors; if the behavior is such that a response is required, use a matter of fact comment, "Your comment isn't appropriate, let's talk about it later and carry on." If it's more severe, "Your comments surprise me, you're a capable student and can do better. Do you need me to call the office?" This way they make the choice.
- Deflect the student's attention by ignoring what was said and ask if a specific assignment is done or if they have something that needs finishing. You might want to talk to the student later, suggesting you didn't appreciate the interruption earlier, but you're happy to see them working productively again. Ask the student how the problem can be resolved, make the student part of the solution.
- Allow the child chilling out time; ask if they need quiet time elsewhere. Allow time for the child to calm down before determining the consequence. This helps to deescalate the child's anger.
- Remember the golden rule: Up, down, and up again. For example, "You've had a terrific day, I've been so proud of you. I don't understand why you're not following directions now. I'll give you 5 minutes to think about it and you'll be that terrific person I know you to be." Up, down, up.



Success requires commitment and follow up on a regular basis from both parents and teachers. Some setbacks are expected, but an ongoing consistent approach is in the best interest of the child. Remember, even though you put the best of strategies in place, the outcome may still be negative. However, even the smallest improvements are worthwhile for both you and the child!

(Source: <http://specialed.about.com>)

**Watch for the next "Updates From SCIP" coming in April! We will include information on classroom routines and creating non-threatening environments that may benefit you when managing children with ODD and CD.**