Title Behaviour and reading difficulties: some implications for those

concerned with intervention

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# Behaviour and reading difficulties

# some implications for those concerned with intervention

PAMELA SHARPE

### Introduction

This paper addresses firstly, the nature of behaviour difficulties in young children and secondly, the relationship to reading difficulties in school. The first part of the paper describes and discusses the terminology variously used when referring to children who are observed to have behaviour problems. The discussion then turns to the associated complexities involved in the children's learning in general, and to reading in particular.

# **Behaviour Problems in Young Children**

A glance at the literature on this topic reveals numerous descriptions of children in terms of their activity levels, general behaviour, and problems related to school learning. The prevalence of behaviour problems in young children has been found to be associated largely with family issues. (Coleman, Wolkind & Ashley, 1977, Richman, Stevenson & Graham, 1975, McGuire and Richman, 1986, 1987).

Significant, is the research which points to instances of discipline preferences based on parents' perceptions of their childrens motives for misbehavior. The research of Dix Ruble & Zambarano, (1989), indicates a strong relationship between parents' discipline techniques, and knowledge of their children's competence, age, and level of responsibility. Furthermore, research which focusses partially on teachers' perceptions of children's temperament, indicates the significance for children's adjustment

and teachers' control of early disturbances. (Zajdeman & Minnes, 1991). Given the availability of suitable screening devices for the early identification of possible behaviour problems, (Mcguire & Richman, 1986, 1987) more recent evidence indicates parents' and clinicians' concerns for adequate and timely intervention. (Stallard, 1993).

Other related studies have indicated cultural differences in prevalence and management of behaviour problems in young children. (Newth, & Corbutt, 1993, Weiss, et al 1993). Other evidence points to the possible and long term effects of certain negative teacher behaviours, perceptions and attitudes towards children exhibiting behaviour problems. (Phillips et al., op. cit. Holloway & Reichhart, op.cit., Zajderman & Minnes, op.cit.).

Problems have arisen however with attempts to classify behaviour difficulties in young children. (Prendergast, et al 1988). A summary of the most common characteristics have been identified in terms of:

- a) high levels of motor activity
- b) uneasiness
- c) fiddling
- d) short attention span
- e) distractibility
- f) excitement
- g) low tolerance
- h) impulsiveness

It appears though that most concern about "impulsiveness" is related to problems with academic tasks. It has been found that difficulties are compounded by frequencies of errors, which in turn lead to frustration, poor motivation, and failure to thrive in attainment. In general terms, whilst such children identified as "impulsive" would normally be found in the regular school system, their progress, being somewhat delayed, renders them as having learning difficulties.

## Some Causes of Behaviour Problems

The effects of diet, medication, and/or environmental pollution have been found to be causal factors of certain types of a typical behaviour patterns. In particular, the effects of diet have aroused much attention (Feingold 1975). However, Silver's review (1987), indicates that the elimination of certain additives such as synthetic food colouring, does not significantly alter certain behaviour patterns. Furthermore, Adler (1990), distinguishing between food allergy, intolerance, and aversion, supports this finding.

Some support for the view that the effects of medication, in particular methylphenidate, may be related to certain changes in impulsive behaviour, stem from a study by Taylor et al (1987). This study claims positive short term benefits for some children considered to be hyperactive. Relatedly, a longitudinal study into the effects of lead on children's behaviour indicated a small relationship to hyperactivity, (Sylva et al 1988).

More recent research has centred on physiological explanations for the effects of certain types of food on certain types of individuals. Wright, (1992), reviews the evidence for the effects of certain foods for those with deficiency diseases; the implications for educational achievements of malnourished children, and the variety of variables influencing the potential effects of food on cognitive performance. For example, the timing, and/or omission of meals, appears to be significant for some but not others. One explanation quoted concerns the nature of the food eaten at certain times which may lead to mood swings. It is suggested that for some, foods which activate serotonergic functions (eg high carbohydrate and low protein snacks), may cause an increase in activity. Clearly, if food is found to be effective in causing mood swings it could conceivably be used to control mood swings in certain individuals, especially those with behaviour problems, for example.

#### **Behaviour Problems and School Performance**

Given that there appears to be some difficulty in arriving at an overall classification of the factors contributing to children's

behaviour problems, researchers concerned to maximise the potential of children deemed to be hyperactive, have focused on measures of attention, in order to plan appropriate intervention.

In one study, (Boudreault et al 1988), an analysis of the results of individual tests, showed that reading difficulties featured significantly, indicating a relationship between attention problems and cognition. In relation to strategies for intervention, Van der Meere and Sergeant (1988), investigating the relationship between attention and/or hyperactivity and poor school performance, suggested that teachers should give consideration to adequate instruction and appropriate feedback. Before developing this issue further, the topic of reading difficulties and the relationship with children with behaviour problems is considered.

# **Reading Difficulties and School Performance**

The debate about poor reading standards amongst children in Britain, continues to cause serious concern. A report by HMI in January 1991, revealed that in 20 per cent of British Primary Schools, one in four seven year-olds could not read with accuracy and understanding. The resulting furor in educational circles centred on questionable teaching methods and teacher competencies. Should "phonics" or "look and say" methods prevail? Turner, (1992), the author of the original crisis criticises teachers' reliance on methods which, he claims, fool them into believing that children are reading. The combined remedies proposed by other "experts" call for agerelated standards of achievement, learner motivation, and literacy activities beyond school, and, a general combination of methods and materials. It is little surprise then that an examination of teaching nethods is underway.

With timely advice from the author of a successful reading programme overseas, (Clay, 1982), it is envisaged that further crises will be averted. Nevertheless the concern with reading standards has been expressed in terms of children, one assumes, who do not have learning difficulties per se. What then of children who do?

Sargeant's comments about task management (op cit.) appear appropriate, and the attention to be given to the Reading Recovery Approach pioneered by Marie Clay (1982). Such intervention might clearly be of assistance to some children and their teachers involved in this controversy.

Interesting though this debate is, the needs of children with behaviour difficulties, and those with attention problems might best be served by some of the "Reading Recovery" prescriptions, namely: individualised instruction; reading for meaning; attention to basic skills; provision for highly motivating materials; a stress on the sight vocabulary of key "survival words"; finally, the continual monitoring of progress.

#### Conclusion

This paper has attempted to show that some behaviour problems in young children are often complex in origin and description, and attitudes to their control and management especially when children are labelled as "hyperactive" or "difficult to manage" are variable. The relationship of any misperceptions about cause and management of such characteristic behaviours, to school progress, appear to be negative, even though such labels are used to describe a number of learning-related problems in children. However, links with attention levels and school performance in general, and reading in particular, have been highlighted, and it appears possible that appropriate intervention may reap benefits. This would involve the selection of appropriate teaching methods and resource materials, geared towards the individual needs of children: appropriate diet and/or medication; realistic expectations; but above all, an understanding of the nature of the behaviour problems in each individual child. Given that many children are wrongly labelled, it may be desirable that the individual behaviour problems of each child are scrutinished and assessed, before any useful general prescriptions for intervention are proposed.

### References

- Adler, B. (1989). Food Allergy in Children. Newsletter of the Association for Child Psychology and Psychiatry, 12 (6), 5-8.
- Boudreault, et al. (1988). Cognitive Development and Reading Achievement in Pervasive-ADD, Situational-ADD and Control Children. *Journal of Child Psychology and Psychiatry*, 29, 611-620.
- Clay, M. (1982). Observing Young Readers. Exeter: Heinemann.
- Coleman, J., Wolkind, S., Ashley, L., (1977). Symptoms Of Behaviour Disturbance And Adjustment To School. *Journal of Child Psychology and Psychiatry*, 18, 201-209.
- Dix, T., Ruble, D.N., Grusec J., E., & Nixon, S. (1986). Social Cognition in Parents: Inferential and Affective Reactions to Children Of Three Age Levels. *Child Development*, 57,879-894.
- Dix, T., Ruble, D.N., & Zambarano, R. J. (1989), Mothers' Implicit Theories of Discipline: Child Effects, and the Attribution Process. *Child Development*, 60, 1373-1391.
- Feingold, B. (1975). Why Your Child is Hyperactive? New York: Random House.
- Holloway, S., D., & Reichhart-Erikson, M., (1988). The Relationship of Day Care Quality to Children's Free-Play Behavior and Social Problem Solving Skills. *Early Childhood Research Quarterly*, 3, 39-52.
- McGuire, J., Richman, N., (1986). Screening For Behaviour Problems In Nurseries: The reliability And Validity Of The Preschool Behaviour Checklist. *Journal of Child Psychology and Psychiatry*, 27,455-472.
- McGuire, J., Richmann, N., (1987). Outcome of Behaviour Problems in The Preschool Setting. *Child: care, Health and development*, 13, 403-414.
- Newth, S., J., Corbett, J., (1993), Behaviour and Emotional Problems in Three-Year-Old Children of Asian Parentage. *Journal of Child Psychology and Psychiatry*, 34, 3, 333-352.
- Phillips, D., McCartney, K., Scarr, S., (1987). Child-Care Quality and Children's Social Development. *Developmental Psychology*, 23, 4, 537-543.

- Prendergast, M. et al. (1983). the Feingold Diet: A Reappraisal. *Journal of Learning Difficulties*, 16, 319-323.
- Richman, N., Stevenson, J., E., Graham, P., J., (1975) Prevalence Of Behaviour Problems in 3-Year-Old Children: An Epidemiological Study In A London Borough. *Journal of Child Psychology and Psychiatry*, 16, 277-287.
- Silver, L.B. (1987). The 'Magic Cure'. A Review of the Current Controversial Approaches to Treating Learning Disabilities. *Journal of Learning Disabilities*, 20, 498-504.
- Stallard, P., The Behaviour of 3-Year-Old Children: Prevalence and Parental Perception of Problem Behaviour: A Research Note. *Journal of Child Psychology and Psychiatry*, 34, 3, 413-421.
- Sylva, P.A. et al. (1988). Blood Lead, Intelligence, Reading Attainment, and Behaviour in Eleven year old children in Dunedin, New Zealand. *Journal of Child Psychology and Psychiatry*, 29, 43-52.
- Taylor, E. et al. (1987). Which Boys Respond to Stimulant Medication? A Controlled Trial of Methylphenidate in Boys with Disruptive Behaviour. *Psychological Medicine*, 17,121-143.
- Taylor, M. (1992). Organised Inferiority? Reading and The National Curriculum. *Education Section Review*, BPS Vol. 16, No. 1, 1-9.
- Van der Meere, J. and Sergeant, J. (1988). Acquisition of Attention Skills in Pervasively Hyperactive Children. *Journal of Child Psychology and Psychiatry*, 29, 301-310.
- Weiss, J., R., Sigman, M., Weiss, B., Mosk, J., (1993), Parent Reports of Behavioural and Emotional Problems among Children in Kenya, Thailand, and the United States. *Child Development*, 64, 98-109.
- Wright, P. (1992) Food for Thought. The Psychologist. vol 5 pps 400-402.
- Zajdeman, H., Z., Minnes P., M., (1991). Predictors of Children's Adjustment To Day-care. *Early Child Development and Care*, 74, 11-28.