

Chapter 2: Impediments to Managing Behavior

- I. The Medical Model
 - A. Why differential diagnosis is ineffective
 - 1. places blame on student
 - 2. student becomes the behavior
 - 3. all interventions medical
 - B. The myth of mental illness
 - 1. behaviors can't be explained by deficit of disease
 - 2. diagnosis requires comparison to social norms
 - 3. treatment non-medical
- II. Academic and Social Behavior
 - A. Academic and social behavior viewed differently
 - B. Governed by same principles of learning
 - C. Power of paradigms
- III. Contextual Variation
 - A. Context as a determinant of behavior
 - 1. context gives behavior its meaning
 - 2. context serves as a cue to perform certain behaviors
 - B. Appreciate context
 - C. Facilitate opportunities for students to interact
 - 1. social reciprocity
 - 2. create interactive classrooms
- IV. Personal Standards and Social Behavior
 - A. Personal standards socially determined and negotiated
 - B. ADHD and the normal curve
- V. Concept of Control
 - A. Control mentality
 - 1. produce academic behavior
 - 2. control inappropriate social behavior
 - B. Instruction vs. correction
 - 1. instruction is proactive
 - 2. correction is reactive

Chapter 2 Test Questions: Impediments to Managing Behavior

- ___ 1. Which of the following most accurately defines the term “paradigm?”
- a. a process for determining events that elicit certain behaviors
 - * b. a set of rules and regulations that establish boundaries and explain how to be successful solving problems within the given boundaries
 - c. a concept for understanding how reinforcement can be used to increase socially desirable behaviors
 - d. a large body of knowledge that can be used to determine how children obtain academic skills
- ___ 2. Labels such as conduct disorder, oppositional defiant disorder or adjustment disorder:
- a. are helpful in developing appropriate interventions for addressing the particular problem
 - b. take the focus away from the actual behaviors children exhibit, which should be the focus of intervention
 - c. are based on the concept of differential diagnosis
 - * d. both b and c
 - e. all of the above
- ___ 3. Why is the practice of “differential diagnosis” ineffective for individuals with interpersonal problems?
- a. because there are not enough well-trained psychiatrists to properly diagnosis behavioral and emotional problems
 - * b. because the concept of differential diagnosis is grounded in the medical model, yet labels used to describe individuals with interpersonal problems are socially determined and socially negotiated
 - c. because differential diagnosis implies that the clinician can ascertain differences between two or more disorders that are manifested simultaneously
 - d. because there are not enough labels to describe the multitude of conditions exhibited by children and adolescents
- ___ 4. Which of the following represents a problem with conceptualizing behavior problems as “mental” illness or “disorder?”
- a. bizarre behavior cannot typically be explained by a defect or disease of the nervous system
 - b. there are not enough trained professionals to identify normal from abnormal behavior
 - c. making a diagnosis requires a clinician to compare a child’ observed behavior to some societal standard which vary across contexts and cultures
 - * d. both a and c
 - e. all of the above

- ___5. Why is the distinction between academic and social behavior arbitrary?
- a. because academic behavior is controlled by intelligence and social behavior is determined genetically
 - b. because neither the academic or social behavior of handicapped children can be improved
 - c. because children with both academic and social behavior problems come from single parent families
 - * d. because both academic and social behavior are governed by the same principles of learning and respond to similar interventions
- ___6. The same social behavior can be both appropriate and inappropriate depending upon:
- a. the student's intelligence quotient (IQ)
 - * b. the particular context or situation
 - c. the number of children in a student's family
 - d. the amount of preservatives in a student's food
- ___7. Social reciprocity refers to:
- a. the process of analyzing a child's development in relation to an adult's parenting style
 - b. the phenomenon of observing an effect of a person's behavior and ascribing a biological cause to that behavior
 - * c. mutually reinforcing interactive exchanges between individuals
 - d. an agreement between two societies to share knowledge and technology in a manner to improve the lives of children
- ___8. Why is social behavior difficult to evaluate?
- * a. because there are no pre-determined, well-defined standards for social behavior
 - b. because children do not engage in social behavior in the classroom
 - c. because parents never follow through when given the task to observe their child's behavior
 - d. both b and c
 - e. all of the above
- ___9. Which of the following statements is **true**?
- a. all classrooms require the same social behaviors to be performed by students
 - b. standards for social behavior are well defined
 - * c. behavioral requirements of the classroom differ from those of the real world
 - d. it is impossible for the same social behavior to be both appropriate and inappropriate

____ 10. The concept of control refers to the belief that:

- a. children can control their own behavior
- b. children can be used to control other children's behavior
- * c. teachers are hired to produce academic behavior and control bad social behavior
- d. teachers lack the skills to control students' behavior

____ 11. Instruction is to proactive as correction is to:

- * a. reactive
- b. punishment
- c. distractive
- d. reward
- e. disorder

