ODD in the Classroom:
Strategies for Dealing with Behavioural Issues

By
Jessica Nielsen

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Abstract

This study examined the strategies that two classroom teachers are currently using with students who have a confirmed diagnosis of ODD. Through a qualitative research design, I found that developing a strong relationship between the teacher and student was the primary strategy used by both my participants. Other strategies included maintaining predictability, preferred seating and classroom structure, breaking assignments or classroom work into smaller portions, and establishing a protocol with the student to use when they required a break from the classroom. Through a conceptual framework of teacher attitudes and self-efficacy beliefs, these results also suggest that teachers with high self-efficacy beliefs concerning their impact on the behaviour of these students and who exhibit positive attitudes towards these students are more likely to take an active approach to developing strategies for these students. They also may be more able to build strong relationships with these students, despite the difficulties they pose in the classroom environment. However, further research is required to examine the effectiveness of the strategies discussed in these findings and to determine how they may be best employed within the classroom.

Key Words: ODD, defiance, strategies, teacher self-efficacy, classroom management
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Chapter One

Introduction to the Research Study

1.0 Introduction

The prevalence of serious behavioural disorders is on the rise in elementary schools (McDougal, Nastasi, & Chafouleas, 2005). Oppositional Defiant Disorder (ODD) is one of the more challenging behavioural disorders mainstream educators are currently struggling to address within the classroom. This disorder is characterized by a pattern of behaviour that is not appropriate to the individual’s developmental level and is consistently negativistic, defiant, and disobedient (Hamilton & Armando, 2008). As more and more children are entering school with a diagnosis of ODD, teachers must find a way to work successfully with these students and stabilize their behaviour in the classroom. Many students with an ODD diagnosis exhibit primarily behavioural symptoms and as such are typically placed in a mainstream classroom rather than in a specialized program. This has resulted in mainstream teachers with little to no background information about ODD being faced with these students and the complex issues they bring to the classroom environment. These teachers lack the tools necessary to understand the nature of this disorder and to adequately support these students. Without being able to provide the essential care these students need, teachers run the risk of greatly decreasing the amount of academic success these students will achieve and disrupting the learning environment for all of their students.

The current research has focused on parent training programs and clinical practices that will benefit children with ODD. Researchers have identified several
strategies for behavioural management that are beneficial for these individuals, including behavioural modification programs, parent training and strategies such as not engaging in power struggles with the child, staying calm when misbehaviour does occur, and using effective communication skills (Burroughs & Barlow). However, the research is lacking when it comes to specific strategies that teachers can successfully and consistently apply with their students. A few studies have looked at preventative strategies designed to avert behavioural issues but there is little research to support the efficacy of these strategies in the classroom.

The strategies made available to teachers must be both preventative and reactive. Preventative measures are essential for teachers of ODD students to employ in the classroom as they provide stability and routine, but the nature of the school environment is one of constant change. When the routine is disrupted, through the presence of supply teachers, special events, or visitors, other strategies become necessary to deal with the consequences. The current research also has failed to identify a range of strategies that teachers can employ when behaviours are beginning to escalate. For example, a preventative strategy is to always provide the student with choices (Burroughs & Barlow). However, if the student refuses to make a choice or attempts to engage in a power struggle, their behaviour may begin to escalate. Even if the teacher follows the expected routine of refusing to engage in the power struggle, the student may become verbally aggressive. If the behaviours are not curbed promptly, further escalation is possible. Without strategies to defuse these situations, teachers are forced into a passive role and can only watch a crisis unfold.
1.1 Background and Purpose of the Study

The purpose of the present study was to find strategies that will help teachers successfully work with students who have been diagnosed with ODD. Teachers need to have a variety of tools they can use to help these students and should not be limited to preventative measures. This study aimed to identify strategies that can be added to every mainstream classroom teacher’s theoretical toolbox. When a student with ODD enters their classroom, many teachers do not have the tools to properly react and successfully work with that student. They often feel unprepared and unable to cope with the situation (Martin, Lloyd, Kauffman, & Coyne, 1995). Teachers especially need strategies that they can employ in the earliest stages of behavioural escalation, so that they are not solely relying on preventative measures. The strategies discovered in this study must be furthered investigated in a variety of classrooms and with diverse groups of students so that they may be further tested for efficacy. This must occur before any new strategies can be introduced into all classrooms.

1.2 Statement of the Research Problem

This study began to address the extremely lacking amount of information about ODD students in the classroom within the current literature. The purpose of this qualitative study was to discover and describe the strategies used by two mainstream elementary school teachers in southern Ontario with students who have been diagnosed with ODD (Creswell, 2013). Research sub-questions addressed the following: How does self-reported teacher self-efficacy affect strategies for management of students with ODD? How do self-reported teacher attributions affect strategies for management of
students with ODD? Using a case study design, two teachers with a wide variety of experiences working with students who have a confirmed diagnosis of ODD will be interviewed. These interviews were conducted in a semi-structured format to allow for some flexibility in the questions being asked if unexpected or particularly interesting answers are provided. The interview questions focused on the types of crises that the participants have encountered and the methods they used to attempt to resolve the issues. These methods were then reviewed for effectiveness and alternative actions were discussed. In attempting to answer these questions, the research also identified patterns of ODD behaviour in the classroom and teacher attitudes toward those behaviours.

1.3 Significance of the Study

This study began to fill in a serious gap in the literature. There is very little information on mainstream classroom strategies for dealing with students who have ODD. Also, the current research has largely focused on anticipatory strategies. These tools are absolutely critical to teachers working with ODD behaviours; however, it is not realistic to assume that every situation will be effectively mitigated preventatively. A school environment is an ever-changing one and therefore difficult to keep completely stable and predictable as is recommended by the current research. Supply teachers, school assemblies, and fire drills are just a few of regular interruptions to a classes’ routine that may occur. Therefore, it is critical that a variety of successful strategies for coping with ODD behaviours are discovered, investigated, and disseminated to teachers. These strategies must also be specifically taught to all preservice teachers so that they can be immediately employed when a student presents with an ODD diagnosis. Methods of de-
escalation will be another tool that teachers can add to their repertoire and will fill a significant gap in the current knowledge.

1.4 Background of the Researcher

As a supply teacher, educational assistant, and child and youth worker, I have had a variety of experiences working with individuals who have a diagnosis of ODD. In my experience, these were some of the most challenging cases to face. I was not given any information that was specific to working with individuals who had a diagnosis of ODD prior to meeting these individuals. There was also no information provided in my training on how to successfully de-escalate ODD individuals once they had begun to deteriorate behaviourally. This resulted in the feeling of being lost and like I had been thrown out into a volatile situation without a safety net. I found that no matter how effective the preventative measures typically are, the potential for behavioural crises is always present.

Many colleagues presented the belief that once behaviours became intensified, it was too late and that crisis was imminent. In a group home environment, this often meant moving rapidly to physical interventions, such as restraining the individual so they did not hurt themselves or anyone else. This was particularly unhelpful and self-defeating. As the children in our care realized how quickly the situations would escalate to physical restraint, they begin to trust us less and interacted with staff in more negative patterns.

In the school system, I found that the lack of de-escalation strategies were even more detrimental to the other students in the class. When ODD students are in crisis in the classroom they disrupt the learning environment of the other students in the room. If the behaviour escalates to become aggressive or violent, the other students are put at
physical risk. I have seen entire classes of students need to be evacuated from their classroom because the student with ODD has entered into a crisis state and is physically demolishing the room. Not only does this disrupt the learning of all the students in the moment, but also effects their long-term learning environment. The threat of violence negatively impacts the other students and their ability to learn.

1.5 Limitations of the Research

This research was limited most severely by time. As a masters’ degree requirement, this project must have been completed under a strict time frame. This greatly impacted the scope of the research. It was impossible to conduct a long-term study and so these results must be interpreted as a snapshot in time. As the research was conducted with a case study design, the results are bounded to the situation in which they take place. One cannot assume that all behavioural issues discussed will be typical of any student with ODD. It is also extremely unlikely that this study was able to touch on every strategy that has been used. This was simply not feasible given the time constraint and sample size. Furthermore, as the research was conducted with a small number of teachers from one geographical area, any results cannot be easily generalized to other schools or classrooms. However, hopefully, the successful strategies discussed in this report can be further tested to find a variety of widely effective tools for effectively working with individual who have ODD within the classroom environment. Another limitation of the sample size is the possibility that no efficacious strategies were identified. This result would suggest that a great deal of further research is critical to finding ways to help students with ODD succeed in the classroom.
1.6 Overview

My personal experiences working with students who have a diagnosis of ODD have made this research very important to me. Despite its’ limitations, this study was able to identify a number of efficacious strategies used by two teachers. With further research and teacher training, these strategies may have an incredible impact on the lives of both students with ODD and the teachers who teach them.

The following chapter describes the results of the literature review that I conducted in the course of this research. Chapter three describes the methodological approach used by this study, followed by a description of the data collected in chapter four. Finally, chapter five discusses the results of this study and the resulting recommendations and implications. A list of references used and the appendices follow at the end of this study.
Chapter Two

Literature Review

2.0 Introduction

As more students are entering their school years with a diagnosis of Oppositional Defiant Disorders (ODD), many mainstream classroom teachers are being expected to develop an understanding of this complex disorder and how to help these students in an extremely brief amount of time. Some of these teachers may have not even heard of ODD before a student with this diagnosis joins their class. As such, teachers are required to learn strategies for working with students who have ODD as they interact with the student. The result is often the development of successful strategies as a product of trial and error. This study examined the strategies two mainstream classroom teachers are using with students who have a diagnosis of ODD as well as the role of teacher self-efficacy beliefs and attitudes on the types of strategies used.

2.1 Oppositional Defiant Disorder

The Diagnostic and Statistical Manual of Mental Disorders (DSM-V) defines Oppositional defiant disorder as a pattern of negativistic, hostile, and defiant behaviour for at least a six-month period (American Psychiatric Association, 2013). This behaviour is usually directed towards authority figures (Winther, Carlsson, & Vance, 2014). These behaviours are more severe than common testing behaviours typical of children. They may include losing their temper, arguing with adults, continuous acts of defiance, blaming others for their mistakes, being easily annoyed, and displaying angry, spiteful
and/or vindictive behaviours (Bondy & Smith, 2007). It is often diagnosed when the disruptive and antisocial behaviour exhibited by the child begins to interfere with the child’s academic, emotional and/or social development (Winther, Carlsson, & Vance, 2014). Research shows that children with ODD not only score lower than typically developing children for social adjustment, but also show greater impairment in social domains than children with bipolar disorder, major depression and anxiety disorders (Sutton Hamilton & Armando, 2008). The disorder may be diagnosed with varying severity and can often be a precursor to more severe behavioural disorders, including conduct disorder and anti-social personality disorder. Without treatment ODD has been shown to have a persistence rate of 57% over a four-year period (Britt Drugli, Larsson, Fossum, & Morch, 2010). This suggests that children diagnosed with ODD have a 57% chance of maintaining that diagnosis four years later. However, other studies have suggested that ODD diagnoses may be unstable, particularly in the early years, and should be regularly reassessed (Bunte, Schoemaker, Hessen, van der Heijden, & Matthys, 2014). This disagreement in the literature could be the result of initially incorrect diagnoses being made and then altered over time to a more suitable choice. Another possibility is that these individuals who no longer meet the diagnostic criteria for ODD either received adequate treatment or developed significant coping skills to learn how to effectively manage the outward symptoms of their disorder.

**2.1.1 Conduct Disorder**

Conduct disorder (CD) is a diagnosis given to a student who displays impairing antisocial behaviour. These behaviours are repetitive and persistent and include
aggression to people or animals, destruction of property, theft, and other violations of major age-appropriate societal norms (Loeber, Burke, Lahey, Winters, & Zera, 2000; Winther, Carlsson, & Vance, 2014). They may present this behaviour either overtly or covertly and CD is typically associated with proactive aggression (Loeber, Burke, Lahey, Winters, & Zera, 2000). The diagnostic criteria illustrate a decreased empathetic response and a variety of callous traits. The criteria lists lack of remorse or a general lack of concern for negative consequences, a lack of empathy for others, a lack of concern for performance whether in work, school, or activities, and a deficient affect or decreased expression of emotion as important facets of this behaviour (Benesch, Gortz-Dorten, Breuer, & Dopfner, 2014). Callousness is highly correlated with oppositional, aggressive and anti-social behaviour, even when controlling for a lack of concern for performance and decreased affect (Benesch, Gortz-Dorten, Breuer, & Dopfner, 2014). This disorder can affect both males and females, but the diagnostic criteria may not be accurate for identifying females, as they tend to show more covert types of aggression rather overt (Loeber, Burke, Lahey, Winters, & Zera, 2000). Research suggests that persistent ODD symptoms precede and usually predict an early onset of CD (Loeber, Burke, Lahey, Winters, & Zera, 2000). This suggests that ODD may serve as a precursor to a diagnosis of CD for many individuals. CD has shown a 50% persistence rate in the general population after seven years (Britt Drugli, Larsson, Fossum, & Morch, 2010).

Approximately half of all children with a conduct disorder diagnosis will receive a diagnosis of Anti-Social Personality Disorder (ASPD) later in their life (Winther, Carlsson, & Vance, 2014). In a recent study, 69.1% of boys with a CD diagnosis already
showed three or more symptoms of ASPD between the ages of seven and twelve (Loeber, Burke, Lahey, Winters, & Zera, 2000).

### 2.1.2 Confusion Between ODD and CD

Confusion between the two diagnoses is common in the education system. According to the criteria of the DSM-V, a student with ODD does not exhibit physical aggression to people or animals (American Psychiatric Association, 2013). However, many students in the education system have an ODD diagnosis and frequently demonstrate aggressive behaviours. There is some evidence to support diagnostic delineation between ODD and CD, but this has been questioned in the literature. Some researchers suggest that the distinction is not valid and that the disorders should be merged into a single diagnosis (Loeber R., Green, Keenan, & Lahey, 1995). One body of work suggests that the parameters of the diagnostic criteria should be altered to have one syndrome with ODD behaviours with CD aggressive behaviour and another syndrome that has ODD behaviours and non-aggressive CD behaviours (Loeber et al., 2000). Some of the current research points to a parallel development of ODD and CD symptomology throughout early childhood and adolescence rather than a progression from ODD to CD as was previously suggested (Luman, van Noesel, Papanikolau, Veugelers, Sergeant, & Oosterlaan, 2009).

### 2.1.3 Risk Factors

Both ODD and CD are more common in families with a low socioeconomic status (Loeber, Burke, Lahey, Winters, & Zera, 2000). ODD is typically diagnosed in
individuals during preschool or early elementary school, a few years after the first appearance of symptoms (Sutton Hamilton & Armando, 2008). This suggests that children are entering the education system with complex defiant behaviours or developing them shortly after entering school age. The age of the child’s mother at birth of her first child, paternal or maternal substance abuse and the child’s IQ are associated with an increased risk of an ODD or CD diagnosis (Loeber R., Green, Keenan, & Lahey, 1995). CD is also associated with resistance to discipline, inconsistent discipline and poor supervision (Loeber R., Green, Keenan, & Lahey, 1995). Contrary to popular belief, CD is not associated with ethnicity, single parent families, parental ASPD diagnosis, anxiety or depression (Loeber R., Green, Keenan, & Lahey, 1995). CD and ODD are negatively associated with close family attachments and strict family supervision, suggesting that these may be protective factors (Canino, Polanczyk, Bauermeister, Rohde, & Frick, 2010). Meta-analysis shows no significant variances between culture and prevalence of either ODD or CD (Canino, Polanczyk, Bauermeister, Rohde, & Frick, 2010).

### 2.1.4 Comorbidity

ODD is often comorbid with a variety of other impairments and disorders, including: language impairments, learning difficulties, ADHD, mood disorders, anxiety disorders, somatoform disorders and substance abuse problems (Loeber, Burke, Lahey, Winters, & Zera, 2000; Winther, Carlsson, & Vance, 2014). When diagnosed together, ADHD and ODD have a great deal of overlap and can be considered an entirely separate subtype rather than manifestations of two distinct disorders (Luman, van Noesel, Papanikolau, Veugelers, Sergeant, & Oosterlaan, 2009). Individuals with both ODD and
ADHD engage in more risk-taking behaviours than individuals with just ODD or ADHD, however, they are also more sensitive to negative punishments (Humphreys & Lee, 2011). Some researchers have suggested a plausible link between ODD plus ADHD and an early onset of CD symptomology (Loeber, Burke, Lahey, Winters, & Zera, 2000). When CD is comorbid with ADHD, the prognosis is generally worse for the individual (Loeber, Burke, Lahey, Winters, & Zera, 2000).

### 2.2 Current Treatments

Treatment for ODD and CD is primarily addressed through parent training programs. These models have a variety of levels, addressing the individual, parent, family, school, and community (Winther, Carlsson, & Vance, 2014). When parents are dealing with children exhibiting the behavioural issues associated with ODD and CD, they often struggle to cope with the negative and disruptive behaviours. They may liken the behaviours to that of an abusive partner: intentionally hurtful, deliberate and purposeful (Sutton Hamilton & Armando, 2008). This can negatively impact the mental health of parents (Sutton Hamilton & Armando, 2008). Parent training methods focus on teaching parents a more positive and less harsh discipline style and a collaborative style of problem solving to motivate children to comply with parental requests (Sutton Hamilton & Armando, 2008). Programs also emphasize positive reinforcement, effective limits and punishments, and parent-child relationship building (Winther, Carlsson, & Vance, 2014). Methods include role playing and behavioural reversals, modeling, and goal setting with regular review (Winther, Carlsson, & Vance, 2014). Parent training has shown significant improvements for children with ODD and CD in the scientific
literature. In one study, results were maintained for five to six years after initial
treatment, with two-thirds of participants no longer meeting the diagnostic criteria for
ODD or CD (Britt Drugli, Larsson, Fossum, & Morch, 2010). Teachers also report
decreased conduct behaviours within the classroom with parent training programs
(McTaggart & Sanders, 2003). However, concerns have been raised about the cost and
amount of resources that are required to implement these programs (Winther, Carlsson, &
Vance, 2014; Nixon, Sweeney, Erickson, & Touyz, 2003). The inclusion of teacher
training with parent training programs has been shown to increase the effectiveness of
these programs in the school domain (Reid, Webster-Stratton, & Hammond, 2003).
However, Reid, Webster-Stratton & Hammond (2003) demonstrated that the most
significant factor in determining success at a two year follow-up was maternal criticism.
Those individuals with mothers who exhibited highly critical behaviour showed a
nonresponse rate of eighty percent. This suggest that parental influence is stronger than
that of a teacher, even within the school domain, and that without parental support and
positive reinforcement, children with ODD are unlikely to improve (Reid, Webster-
Stratton, & Hammond, 2003). However, the teacher’s role is still critically important to
the overall well being of the student, particularly as it can be one of the most stable
relationships in the child’s life.

2.3 School Responses to Behavioural Disorders

There are very few Ministry documents discussing the impact of students with
behavioural disorders on the mainstream classroom teacher. Unlike the variety of
released documents that focus on the classroom practices and policies for those students
with Autism Spectrum Disorders, there are no documents listed on their website that primarily focus on any behavioral disorders. In the ministry document, “Education for All - The Report of the Expert Panel on Literacy and Numeracy Instruction of students With Special Education Needs, Kindergarten to Grade 6” focuses solely on ADHD as an example of a behavioural disorder and does not mention any other possible diagnoses (Ontario Ministry of Education, 2005). The “Learning for All – A Guide to Effective Assessment and Instruction for All Students, Kindergarten to Grade 12” document has a brief section on behavioural disorders but provides no concrete strategies for working with any behavioural disorders effectively within the classroom (Ontario Ministry of Education, 2013). Instead, it focuses on the importance of differentiated instruction for students who have behavioural challenges. The Toronto District School Board (TDSB) has a document on its’ website describing the process for diagnosing ODD, but again lacks specific strategies for teachers to use (Toronto District School Board, 2000). It is interesting to note that the TDSB’s “Mental Health Strategy Overview Year Two” makes no mention of behavioural disorders that affect mental health, and in fact only uses the word “behaviour” four times (Toronto District School Board, 2014). Ministry documents also suggest that students with behavioural disorders, like ODD or CD, may benefit from inclusion in special education programs. However, space in these programs is limited and funding does not always allow for every student who could benefit from such a program to participate. As the number of students with ODD continues to increase, mainstream teachers must be better prepared to work with these students. Research, such as this study, will help ministries of education and school boards create resources to support teachers of students with ODD and other behavioural disorders.
2.4 Current Teacher Strategies

Research on the current strategies teachers are using with students who have ODD in mainstream classrooms is lacking in the present literature. Teachers are encouraged to create and maintain a psychologically supportive classroom environment (Patrick, Turner, Meyer, & Midgley, 2003). This environment requires caring relationships between adults and students, clear expectations, and opportunities for meaningful participation in learning (Bondy & Smith, 2007). This type of classroom environment will be beneficial for all students, not just those with ODD. It is also important to maintain predictability in the classroom schedule (Bondy & Smith, 2007). Changes in the schedule may disrupt the student and lead to an increase in behavioural issues. Increasing opportunities for the student to make choices can also decrease power struggles between the student and teacher by making them feel as though they have some control in the classroom (Bondy & Smith, 2007). Teachers must be clear and firm when they provide consequences and should alert the student to the possible consequences of particular behaviours before problems begin or escalate (Bondy & Smith, 2007). The use of “When…Then…” statements can be very useful for calmly and directly informing students of the expectations (Bondy & Smith, 2007). Behaviour tracking charts and time outs are also recommended strategies (Bondy & Smith, 2007). Time outs can be particularly useful when the teacher also needs some time to cool down and regain their emotional balance before continuing to engage with the student in the proper manner (Bondy & Smith, 2007).

Teachers may encourage non-compliant behaviours when they allow power struggles to occur (Zirpoli & Mellow, 2001). It is critically important not to allow oneself
to be drawn into an argument with a student. The teacher may need to give direction once with firmness and then disengage from the conversation to prevent a power struggle. Reacting to negative behaviours and/or responding inconsistently to students may also encourage problematic behaviours (Zirpoli & Mellow, 2001). A student with ODD may interpret any reaction by the teacher to negative behaviours as positive attention and therefore the teacher ignoring or not responding to negative behaviours may be necessary. Encouraging positive behaviours with attention is much more beneficial (Bondy & Smith, 2007). Other problems may arise from a result of the teacher being too general in their expectations, too passionate or upset in their reactions to behaviours, or trying to please the student in order to win them over (Bondy & Smith, 2007). There are many challenges associated with effectively working with students who have ODD, and much more research is needed to determine the most successful strategies for mainstream classroom teachers.

2.5 Conceptual Framework

This study will use a conceptual framework to orient that data analysis. Teacher attitudes and self-efficacy beliefs are critically important to determining the actions and strategies teachers incorporate into their personal practices. As a result, they affect the reactions and coping methods teachers will engage in when faced with behaviourally challenging students. Students with ODD have many complex and difficult behaviours that teachers must be able to deal with successfully in order to maintain the environment of the classroom. This study will examine the strategies used by three southern Ontario teachers with student who have ODD from the perspective of the teacher’s self-efficacy
beliefs and attitudes.

2.5.1 Teacher Attitudes

Teacher self-reports suggest that today’s teachers are frequently working with students who display exceptionally challenging behaviours (Ford, 2007). Students who have special needs are often being educated in mainstream classroom by teachers who lack experience or understanding of the needs of these students (Poulou & Norwich, 2000). Research suggests that mainstream classroom teachers are very likely to encounter students who have been previously diagnosed with emotional, cognitive or behavioural disorders, all of which are associated with classroom management difficulties (Shillingford & Karlin, 2014). Many teachers also perceive that the severity of student disorders and complications have increased as compared to in the past (Martin, Lloyd, Kauffman, & Coyne, 1995). These teachers often do not believe that they were sufficiently prepared to deal with the challenges these students bring to the classroom (Ford, 2007). They feel they did not receive adequate training in their pre-service education and do not feel that they are able to take advantage of any further training (Martin, Lloyd, Kauffman, & Coyne, 1995). This may be due to a lack of further training being offered to teachers concerning students with ODD.

A study of teacher attitudes towards inclusion determined that teachers are typically less willing to accommodate students with behavioural disorders, such as ODD or CD, than they are for students whose disabilities are purely physical (Shillingford & Karlin, 2014). This relationship can be mitigated by previous exposure or increased information about students with disabilities (Shillingford & Karlin, 2014). Mainstream
teachers cite a number of reasons for classroom difficulties with these students, the most frequent one being defiance (Briesch, Ferguson, Volpe, & Briesch, 2012). Other behavioural concerns include inappropriate physical behaviour, aggression, social problems, abusive language, destruction of classroom property, extended tantrums, and self-harm behaviours (Ford, 2007) (Briesch, Ferguson, Volpe, & Briesch, 2012). It is interesting to note that the majority of behaviours that teachers find most problematic in the classroom are characteristic of ODD and CD.

Mainstream teachers express feelings of irritation, anger and indifference towards students who present conduct problems, suggesting that teachers experience negative feelings towards students with ODD and CD (Poulou & Norwich, 2000). Some believe that the rights of those students with behavioural disorders are being protected to the detriment of other the students in the classroom (Fontaine, 2012). These feelings will negatively impact the development of a positive relationship between the teacher and the student. Poor student-teacher relationships are associated with low achievement, and disengagement (Brown Hajdukova, Hornby, & Cushman, 2014). By attaching a label of deviance to students, teachers may exacerbate behavioural problems and increase issues of disrespect (Brown Hajdukova, Hornby, & Cushman, 2014).

### 2.5.2 Teacher Attributions and Self-Efficacy

When teachers have expectations that are lower than the students’ actual achievement level it can result in maladaptive development, as evidenced by lower achievement results the following year (Zhou & Urhahne, 2013). The teachers who have low expectations for their students tend to believe that internal factors affecting the
student are more influential than any external factors, such as the teacher’s choice of strategies (Fontaine, 2012). This can result in the teacher interacting with the individual less frequently, further damaging the relationship between teacher and student (Fontaine, 2012). Teachers who struggle with students who have ODD or CD may perceive the conduct problems as being fixed, internal, and the result of uncontrollable factors. This is characteristic of a medical disorder and results in a belief that any interventions made by the teacher will not be successful (Fontaine, 2012). In comparison, if teachers believe that the behaviours are flexible, stable, and external, they believe that they can successfully impact the student with more education or effort (Fontaine, 2012).

As a result, the self-efficacy beliefs of teachers will be low if they believe their ability to bring about change is limited by external factors; namely the student’s home life, family background, and the influence of their parents (Shillingford & Karlin, 2014). Teachers who have these low self-efficacy beliefs do not think they have a strong impact on students and tend to give up or reduce their efforts in the face of challenges (Shillingford & Karlin, 2014). In contrast, teachers with high self-efficacy are likely to be motivated to determine the reasons behind student behaviour, as it will help guide their actions within the classroom (Fontaine, 2012). These teachers are also more likely to seek help from other professionals or attempt alternative interventions (Fontaine, 2012).

If teachers do not believe they can effectively make a difference in the lives of students with ODD, they are less likely to seek out new methods or strategies for working effectively with these students. This is not beneficial for either the student or the teacher, as the student will continue to struggle and the teacher will become irritated, and often angry, with the student for the on-going conduct problems (Poulou & Norwich, 2000).
Teachers with high self-efficacy beliefs are more likely to proactively seek out interventions and assistance when faced with challenging behaviour from a student.

### 2.6 Present Situation

Currently, Ontario mainstream classroom teachers are woefully unprepared to deal with the behavioural challenges a student with ODD can present in the classroom environment. They require more guidance from the Ontario Ministry of Education to be able to successfully cope with the difficulties associated with these behavioural complications. Teachers often feel they did not receive the appropriate training concerning these behavioural disorders and that the severity of behavioural problems has increased (Martin, Lloyd, Kauffman, & Coyne, 1995). There is not enough information to determine whether the strategies that are taught at the preservice level are actually being successfully applied in the natural environment of the classroom (Manning, Bullock, & Gable, 2009). Without further research on effective classroom strategies for students with ODD, teachers will continue to struggle with the effects of this behavioural disorder within their classrooms. This study will identify some of the strategies that are being used by two Ontario mainstream classroom teachers so that they may be further researched and then distributed to the mass of teachers who so desperately need them.
3.0 Introduction

This study is a qualitative research report that investigated the strategies two Ontario mainstream classroom teachers are using with students who have been diagnosed with Oppositional Defiant Disorder (ODD). This chapter will discuss the methodology of this study, including the instruments of data collection, participants, data collection, data analysis, ethical review procedure, and limitations of the study.

3.1 Research Approach and Procedures

Qualitative research was the ideal choice for this study. As there is very little information about students with ODD in the current research, conducting a qualitative preliminary study allowed for the identification of a number of strategies that teachers are currently using the classroom. The primary goal of this study was identification of the strategies teachers are presently using rather than examining the efficacy of these strategies. Using a qualitative case study design allowed me to directly interview participants about their experiences and approach to working with these challenging students. These strategies can be further investigated with both qualitative and quantitative methods now that they have been identified.

I conducted a literature review to inform the data analysis. The literature review focused on research published within the last ten years, but also included older studies that were still relevant to the subject matter. Many different types of sources were
included, such as qualitative studies, quantitative studies, ministry documents and on-line resources for parents and teachers of children with a diagnosis of ODD. As there were very few studies concerning classroom strategies, much of the research focused on programs that have been successfully used by parents or caregivers. Two interviews were conducted with Ontario elementary school teachers who have had students in their classroom that have a confirmed diagnosis of ODD. These interviews were conducted in person in a location of the participants choosing.

3.2 Instruments of Data Collection

Data was collected from two semi-structured interviews. Semi-structured interviews were used to focus on the research questions while allowing for flexibility in response to the information provided by the participant. Interviews were no more than sixty minutes in length. Participants were provided a written scenario of a hypothetical student exhibiting characteristics of ODD and asked about the strategies they would use with the student. Other questions discussed the amount of support or preparation teachers received prior to having the student in their classroom and the specific challenges they have faced with these students (see Appendix B for interview questions). To address the role of self-efficacy beliefs and attitudes, participants were also asked about the impact they felt they had on these students.

3.3 Participants

Three mainstream teachers participated in this study. These teachers worked at elementary schools in the eastern region of Ontario and had experience as classroom
teachers of students with a diagnosis of ODD. I selected participants that fit my sampling criteria through my sampling procedures. This section also includes biographical statements about each of the participants.

3.3.1 Sampling Criteria

The participants of this study were required to meet a number of sampling criteria. These criteria included; experience as a mainstream elementary classroom teacher, experience as a classroom teacher of at least two different students diagnosed with ODD, and teachers of good standing with the Ontario College of Teachers. To best address the research problem the participants were classroom or mainstream teachers, rather than special education teachers. This allowed me to look specifically at the strategies being used in the typical classroom, rather than in specialized settings. It was also necessary that they had experience working with at least two different students with a confirmed diagnosis of ODD. This was critical as it gives the teacher experience with a variety of behavioural traits associated with the disorder and different possible expressions of those traits. It also allows the teacher to have some experience with strategies that were not successful and how they may need to be adjusted for different individuals.

I chose to interview elementary school teachers because symptoms of ODD typically begin in early childhood. It is also a critical point for students to develop coping strategies to help them throughout their lives. In my personal experience, I have seen a number of students in mainstream elementary school classrooms who present severe difficulties for their teacher. In causal conversations I learned that many elementary school teachers feel unprepared and unable to deal with the challenges and wished to
research this further. I also specifically looked to interview teachers who had completed additional qualifications in special education and some who had not. This would have allowed me to consider the how differences in education could impact the strategies used within the classroom. However, both of my participants had completed at least parts one and two of the Special Education Additional Qualification.

3.3.2 Participant Recruitment

Participants were recruited to this study through messages sent to their school board email address and word of mouth referrals. I relied on convenience sampling for this study as I was limited by time. As such, I used my personal network and existing contacts to find individuals who would meet my sampling criteria. By accessing teachers who work for the same school board I do I was able to access more possible participants at a much faster rate. As a supply educational assistant and unqualified emergency teacher, I have worked in a majority of the schools in this region. This made it much easier to reach out to different groups of teachers and greatly improved the response rate. I had knowledge of a number of teachers who would meet my sampling criteria and was able to access them through direct contact and through fellow colleagues by word of mouth. Being a member of this region also allowed me to have an understanding of the socioeconomic challenges associated with the region and its’ students.

To avoid any issue of teachers feeling pressured to participate, I sent the necessary information about my study to all the elementary teachers on the school board email. This allowed only those who were interested in volunteering for the study to contact me directly, rather than being nominated by a colleague. When using word of
mouth referrals, I simply asked my contacts to spread the information to their colleagues. I asked them to avoid any use of peer pressure tactics and to focus on simply providing the information to contacts that may then decide to participate.

3.3.3 Participant Biographies

My first participant has been a certified teacher for 10 years. Erin has been a teacher at the same school in southeastern Ontario for the past 9 years and has taught grades three through eight. Recently she has also taken on the role of In School Resource Teacher (ISRT) at the same school. Erin has taught two students with a confirmed diagnosis of ODD over her career. The school Erin has worked at for the majority of her career is located in a low SES neighbourhood and has a high proportion of students with diverse special needs. Her experiences with students with a range of behavioural disorders, and particularly with ODD, made her input invaluable to this study.

Marie has been the ISRT at her school for the past five years. Prior to that, she was a mainstream classroom teacher for ten years and taught nearly every grade. In our interview, we focused on her time as a mainstream classroom teacher. During her time as a classroom teacher, Marie has taught approximately six students who have been diagnosed with ODD. However, she suspects there were quite a few students who had ODD but had not seen a specialist for a diagnosis. Like Erin, Marie works at a school in a low SES district. Her school also has a high number of students with Individual Education Plans (IEP) and her experience as both a teacher and an ISRT provided a varied and critical viewpoint for my research.
3.4 Data Collection and Analysis

Data was collected from the two face-to-face interviews with participants. Each interview was recorded as an audio file, which was then transcribed verbatim. During the interview I made written notes of interesting points, questions, and thoughts. Immediately following the interview I also made reflective notes concerning the overall tone of the interview, themes that I had noticed, and a summary of my understanding of the participants approach to students with a diagnosis of ODD. To analyze the data I collected I followed the data spiral described by Creswell (2013). This process begins with data managing, followed by reading and memoing; describing, classifying, and interpreting; representing and visualizing (Creswell, 2013, page 183). Data management was achieved through the transcription of the interview. I then created written memos through reflection, reading of the transcripts, and my own observation notes. The first step in the analysis process was to code the transcripts. This was done as described by Creswell (2013); the text was broken into smaller categories of information (pg. 183). To allow for better organization of ideas and themes, I began with a few categories developed from similarities between the interviews. These categories were later expanded as necessary to code all pertinent information. I then sorted my data into themes, which Creswell (2013) describes as “broad units of information that consist of several codes” (p.186). These themes included the importance of the teacher-student relationship, communication, effective strategies and challenges. I focused my themes to address the identification of classroom strategies used with students who have been diagnosed with ODD and the critical analysis of such strategies through the lens of teacher attitudes and self-efficacy beliefs. It is important to note that this study did not specifically measure
teacher self-efficacy beliefs. Rather, I relied on self-reported perceptions of the teacher’s ability to impact the behaviour of their students. Teacher self-efficacy beliefs are frequently used as a conceptual framework in qualitative research concerning teaching mathematics and literacy. This study extends that lens to the teacher’s use of effective classroom management with students who have a diagnosis of ODD.

3.5 Ethical Review Procedures

This study followed the ethical review approval procedures for the Master of Teaching program at OISE, University of Toronto. Participants were recruited through the school board email and word-of-mouth referrals. When participants responded with a desire to join the study they were provided with a brief description of the research study and how they would contribute. If they remained willing to participate they were sent a consent letter (see Appendix A). They were required to sign the consent form to take part in the interview. Participants were also informed they had the right to withdraw from the study at any time. Both the participants and I have a signed copy of the consent form, which will be preserved until the research has been completed and/or published. All interview data has been securely stored on my personal computer. To preserve the anonymity of the interviewees, pseudonyms were used.

3.6 Methodological Limitations and Strengths

This research study is limited by many factors. As a requirement for the Master of Teaching program at OISE, University of Toronto, this study was limited in both time and scope. In order to successfully complete this study in the allotted time, the scope of
the research had to be restricted. The time constraints force this study to be interpreted as merely a snapshot in time, rather than a long-term perspective. Other limitations include; a selective literature review, small sample size, lack of generalizability and representativeness, limited interview questions, and researcher bias.

The literature review was quite selective, and while I attempted to ensure that all pertinent information was included, there are areas in which further research would be beneficial. A lack of current literature concerning the use of strategies for students with ODD also limited this project, as it made it necessary to start with identifying which, if any, strategies mainstream teachers were using. Time constraints also limited the depth of the interviews and did not allow for comprehensive investigation of the participants’ knowledge and experience. The questions had to be designed to best answer the research question and sub-questions within a sixty-minute period, which again limited the scope of the discussion.

The small sample size of this study also limited the generalizability and representativeness of the findings. This may affect the validity and reproducibility of my results. There were only two teachers interviewed for this study, meaning the results cannot be generalized to the entire population of teachers. The methods they discuss are limited to their own classrooms and may not be representative of the experiences or success in other classrooms. Despite all participants teaching in the same school board, the sample size is still too small to generalize the results even for this region. It is also possible that the experiences of the two participants are not representative of the larger group of teachers. However, I believe the strategies discussed in this report will be able to inform further research by identifying possible strategies. These strategies can then be
tested in a variety of classrooms to determine their efficacy with a variety of populations.

Personal bias may have also limited this study. This study was born out of my personal frustration at the lack of resources and well-defined strategies to allow these students to be successful in a mainstream classroom. My personal experiences also likely influenced my interpretation of the data collected. As an employee of the same school board as my participants and as an individual with my own experiences working with students who have ODD, my personal beliefs may have influenced my analysis of the strategies used by these teachers and could have resulted in my bias for one method over another.

Despite its limitations, this study has a number of strengths. The case study design allows for a deeper insight into the authentic teaching practices of the participants, with much more detail than could be achieved through a survey or other format. By directly asking participants about their lived experiences with students who have ODD, I was able to uncover an authentic picture of the challenges they are facing with these students and the methods they are using to cope with these difficulties. The semi-structured interview allows me to engage in a more fluid discussion with my participants and provides me with the freedom to ask different questions depending on the responses of the teachers. As previously stated, the qualitative research design is well suited to the task of initially identifying the strategies being used by these classroom teachers. Further research may then employ other methods to more closely examine the effectiveness of the strategies discussed in this paper.
3.7 Conclusion

This qualitative research study sought to identify the strategies two classroom teachers in Ontario are currently using with student who have a confirmed diagnosis of ODD. Data was collected through interviews with two teachers in southeastern Ontario and examined through conceptual framework of teacher self-efficacy beliefs and attitudes. This study may have been limited by its sample size, generalizability, time constraints, and personal bias. However, this study identified a number of key strategies for teachers to use with students who have ODD, as will be described in the next chapter.
Chapter 4

Findings

4.0 Introduction

In this chapter I will discuss the findings from the interviews conducted with two Ontario mainstream classroom teachers of students with a diagnosis of Oppositional Defiant Disorder (ODD). Erin has been a classroom teacher for ten years and has taught at least two students with a diagnosis of ODD, while Marie has been teaching for the past fifteen years and recalls approximately six students with a confirmed diagnosis of ODD. These teachers shared their knowledge and experiences regarding students with ODD in their classroom and the strategies they employed with those students. The role of support and preparation for teaching students with behavioural disorders will be discussed. Teacher attitudes towards students with an ODD diagnosis and teacher self-efficacy beliefs about their impact on these challenging students are also considered. I chose to use the self-efficacy beliefs expressed by these teachers and teacher attitudes as a lens for determining why a teacher may choose a particular strategy and why a strategy may be or may not be successful. Finally, the considerable roles of relationship and communication are examined for their effect on effective strategies teachers can use to be successful with students who have a diagnosis of ODD.

4.1. Support and Preparation for Teachers

To better understand how the lack of literature affects teacher’s professional practice, I enquired about how prepared my participants had been to work with students
who have been diagnosed with ODD. I had considered that there might have been a lack of literature because the majority of teachers did not require extra support to address the special needs of students with ODD. Perhaps they had more access to resources about students with ODD or they had received more adequate preservice training. It was possible that my personal experience was outside of the norm and that most teachers are not struggling to find and employ effective strategies with these students. However, my participants reaffirmed my initial conclusion that a great deal of additional information and resources are needed to address this gap in the literature.

4.1.1 Special Education Preparation

These two teachers were in agreement about the distinct lack of preparation they had received before working with students with an ODD diagnosis. Erin noted that in 2004, the initial teacher education program she participated in had very little information about any aspect of special needs education. She expressed hope that today’s teacher education programs were better able to address these concerns with practical information and strategies that are effective in today’s classrooms. Marie expressed concern that teacher education programs do not adequately address “real world” situations and as such new teachers are ill-equipped to deal with the behavioural challenges they face in the classroom. This agrees with the research that suggests teachers do not feel they were adequately prepared to address the increased challenges associated with these behavioural disorders (Martin, Lloyd, Kauffman, & Coyne, 1995). It also questions whether the theoretical practices pre-service teachers learn are actually effective in the real environment of the classroom (Manning, Bullock, & Gable, 2009).
While both Erin and Marie did their teacher training over ten years ago, they still note a significant lack of professional development available for teachers of students with behavioural disorders. Erin could only reference a single workshop she had attended that she felt she was able to apply to her practice in a meaningful way. This was a result of the practical nature of the workshop. The presenter focused on how students with Fetal Alcohol Spectrum Disorders (FASD) would present in the classroom, what to do, what not to do, and possible consequences of specific actions. She expressed a desire for more workshops with a similar practical focus about a variety of disorders, including ODD. They also suggested that school boards create a focus on special education needs in the same way they do math or literacy. This would allow for school Learning Teams to address special education needs in a variety of situations and create many more opportunities for professional development. As Erin said, “We can’t get at the learning without special education.” A school board inquiry focused on special education would allow teachers and administration to more clearly identify effective strategies for approaching the challenges of special education in the mainstream classroom.

4.1.2 Specifically For Students With ODD

Marie and Erin had each completed Part 2 of their Special Education Additional Qualifications but could not call to mind any specific information they had received about students with ODD. Much of their approach to students with ODD has resulted from their own trial and error with students, rather than from the use of resources or information they had been given. When looking specifically at ODD, Erin and Marie described a very sorry picture of their available resources. Each has a single textbook that
describes a large number of disorders in very little detail. While the text does provide some possible strategies, the list is far from extensive or complete. Neither teacher was provided any extra information by the ISRT or administration when a student with ODD entered their classroom, not even when it was the first time they had encountered that disorder. They were largely left to find information about ODD on their own. They could approach colleagues and administration for suggestions and access the pitiful number of resources available in their schools.

Unfortunately, while these teachers could clearly identify where they would appreciate support, preparation and resources for all areas of special needs education, they noted a significant lack of personnel to make it possible. Speaking of her administrator, Marie recognized that she tries to support her staff as much as possible with these students but “she is only one person.” Without the human resources available to successfully address the needs of these students for the necessary amount of time, the challenges associated with teaching students with ODD diagnoses will only continue to grow.

I was unsurprised to hear of the participants frustrated with the lack of preparation, resources, and support available to them concerning students with ODD. The lack of literature I was able to find on working with students who have a diagnosis of ODD in the mainstream classroom had prepared me to find that their was a significant deficiency of resources specific to ODD available. Clearly, further studies must be conducted to identify effective resources and strategies. Once identified, these resources must be widely disseminated to teachers so that they can be applied in the classroom.
4.2 Self-Efficacy Beliefs

Teacher self-efficacy beliefs describe the impact a teacher perceives that they have on their students, specifically on the student’s achievement (Erdem & Demirel, 2007). High self-efficacy beliefs in teachers often correlate with increased motivation to discover the reasons for a given behaviour and attempt alternative interventions (Fontaine, 2012). However, if the teacher has low self-efficacy beliefs, they are more likely to give up in the face of challenges (Shillingford & Karlin, 2014). Therefore, when faced with the challenge of a student who is consistently defiant and difficult to manage, teachers with high self-efficacy beliefs are less likely to give up on the student. They will attempt to identify triggers for the student’s behaviours and attempt to address these behaviours in a variety of ways. In this study, I focused on whether the participants felt that their interventions had an impact, whether positive or negative, on the students. In my personal experience, I have encountered many teachers who felt that their actions had no impact on students with behavioural disorders. Contrary to what I had initially expected, however, both the teachers interviewed for this study felt they had an immensely significant impact on students with a diagnosis of ODD. As the literature focuses on the role of the maternal relationship, I had expected that my participants would view the teacher’s impact as being lesser than the parental influence (Reid, Webster-Stratton, & Hammond, 2003). However, I was encouraged to find that this was not true of these two teachers.
4.2.1 Teacher Perceptions of Their Efficacy

Erin discussed a previous student with whom she felt she had been able to build a strong, enduring relationship. She noted a significant decrease in negative behaviours as she developed and strengthened the relationship with this student. When the student did begin to escalate, Erin was able to help turn her around, even after that student was no longer in her class. She credits the relationship she built with the student for the difference in behaviours, as this student did have more frequent outbursts of behaviours typical of ODD with teachers who did not have the same strength of teacher-student relationship. Erin continues to see this student, now graduated from the school, out in the community and has received a great deal of positive feedback from the student’s parents. Erin became very emotional discussing the impact she felt she had on the student and noted that the effect of the relationship she had with the students extended beyond academics throughout the students life outside the classroom. The parents of this student continue to praise the effort and effect Erin had on their child. Critically, Erin did not view this student’s behaviour as fixed or unchanging, which allowed her to take action rather than simply accepting that the behaviours would be present no matter what she did.

4.2.2 Teacher vs. Parental Impact

While the research suggests that the maternal relationship is the strongest predictor of the outcome for children diagnosed with ODD, my participants felt that their influence was, in many cases, equal to that of the parents (Reid, Webster-Stratton, & Hammond, 2003). In instances where parenting is not effective or the home is unstable, Marie believes the teacher often takes over the role of parent. She notes the amount of
time teachers spend with their students, which is often more than the parents are able to, particularly during the week; “we often spend more time with them so we should have a huge influence on them.” In elementary schools in particular, most classroom teachers are female and can easily slide into the maternal role for their students. Marie notes the number of times students call her “mom” as an example of how the role of the maternal parent and teacher can become blurred in a child’s perception. It is possible that this would not be true of male teachers, or of teachers who do not exhibit stereotypically maternal characteristics. However, it raises an interesting point for further examination.

Interestingly, Marie also noted positive long-term effects from maintaining relationships with the parents as well as the child. To have effective communication between the parents and teacher there must be a great deal of respect and trust. Marie emphasizes that the parent must be comfortable “airing their dirty laundry” to the teacher to be able to effectively communicate about any issues with behaviour or personal conflicts. She reflects on parents who still praise her work with their children and wish she were still teaching in the mainstream classroom. She recognizes that the effect she has on these challenging students is far-reaching and can also impact their families. Just as with Erin’s example, Marie’s belief in her ability to alter the outcomes for the student, suggest high self-efficacy beliefs.

4.3 Teacher Attitudes

In my personal experience, I have met a number of teachers who expressed unfavorable attitudes towards students with ODD. Memorably, one teacher once told me that the students with an ODD diagnosis were “just a**holes” rather than students with
special needs. I have also heard teachers who believe that students with ODD get away with or are not held accountable for their actions in any way because of their disorder; that the diagnosis is little more than an excuse to behave poorly. Shillingford and Karlin (2014) found that teachers are less willing to accommodate students who have behavioural disorders in their classrooms. Teachers often express negative feelings towards students with conduct problems, including irritation, and anger (Poulou & Norwich, 2000). Having a negative view of students with behavioural disorders is sure to impact how the teacher will interact with that student. The research shows that these negative feelings will be detrimental to the development of a positive relationship between the teacher and student (Brown Hajduкова, Hornby, & Cushman, 2014). I would expect that the more favourably a teacher perceives students with an ODD diagnosis, the more optimistically they will interact with them. This would likely result in more positive outcomes than if the teacher portrays negative attitudes about students with ODD.

Fortunately, both of the teachers I spoke to in this study did not express negative attitudes about students with ODD. Despite hearing similar negative viewpoints expressed by colleagues, Erin and Marie did not have the same perspective. Erin was once told by a colleague “It’s not ODD, it’s just B A D,” which she strongly disagreed with. She notes that while they may approach situations differently than they would if the child did not have ODD, they are still always held to the same high expectations as the rest of the students.

However, the frequent conflicts with students who have ODD can negatively impact the teacher. In the heat of the moment, it is very hard not to interpret the student’s attitude and challenges as a personal attack against the teacher. When Marie was
describing these situations and her personal reactions she said she often thought, “You don’t listen to anything I say and you are jeopardizing the learning all the time.” This suggests that the constant conflict threatens not only the teacher’s emotional state but also the learning experience of other students in the room. This is also evident when Marie notes that the affect of the power struggles on her mood and patience with other students. She feels that she is not able to be at her best and apply her ideal teaching practices for the other students in the classroom when a student is constantly challenging her authority.

4.3.1 Same Rules, Different Process

It is critical to recognize the difference between fairness and sameness, equity and equality, when approaching situations with students who have ODD. While both Marie and Erin stated that they maintain the same classroom behavioural expectations for all students in their room, they recognized that they approach conflict very differently with these students. Instead of immediately responding to behaviours, they are more likely to pause and delay their response time if the student has ODD. This gives the situation time to de-escalate and return to a calmer baseline before they begin attempting to address the issue. Marie says that to maintain her emotional balance she often needs to take a step back before engaging in the situation. She notes, “It’s hard not to take it personally and it affects your mood.” This helps her to avoid becoming embroiled in a power struggle and further escalating the problem. Where students without ODD may be able to respond positively to authority when in crisis, this is typically not the case for students with this diagnosis. Therefore, these teachers adapt their approach and initiate a longer wait time to better help the student. The problem will still be addressed, just not immediately. Erin
often waits until lunch or recess time to approach the student, as this is a natural break
time and allows her to remove the student from the classroom without causing a scene in
front of their peers. By not immediately or directly confronting the student in front of
others, they are able to minimize the perceived conflict and negative behavioural
responses from the student.

4.3.2 Role of Reputation

Both these teachers emphasize the importance of holding these students to the
same standards as every other student. “We don’t treat them with kid gloves,” Erin says.
They are always accountable for their actions, but Erin also emphasized that they do not
“blackball” them either. It is important to be able to let the problem go once it has been
dealt with, and not hold it against them forever. She has noticed that students with ODD
often response very positively to teachers who do not judge them by their reputation. This
way, the student knows they have an opportunity to make a fresh start. As Erin describes
it, “the student knows they will be held accountable but that they won’t be unfairly
punished and that it won’t be held over their heads forever.” Marie also points out that
these students will have bad days, just like any other person; “Sometimes the best thing
you can do for them is just to understand that they are having a rough time and not
interpret it as a personal attack.”

4.4 Strategies For Working With Students With ODD

This section looks more specifically at the authentic challenges teachers are
experiencing with students who have ODD and the strategies they are currently
employing to address those issues. These teachers had a handful of strategies they used regularly, but not enough to address the multitude of conflicts that can arise with a student who has ODD. I was not surprised that these teachers had very few strategies that they could use when a conflict or power struggle had already begun or that they used to de-escalate a situation. My literature review had identified a significant gap, as the majority of research focused on pre-emptive strategies. Many of the strategies discussed in the literature were also being used by participants, including consistency and the use of time-outs or wait time (Bondy & Smith, 2007). The focus on the relationship between the teacher and student that my participants displayed was very interesting. In my research, I did not see the same emphasis on relationship-building as my participants described in their own practice.

4.4.1 The Challenges

There are a number of challenges associated with teaching students who have been diagnosed with ODD. As previously discussed, a lack of preparation and the sparse available resources have a significant impact on teachers in this situation. Erin and Marie identified a number of other challenges they have encountered, including the unpredictability of the student’s behaviour. They may react differently to the same stimulus depending on the day, which presents a significant challenge for planning and creating a routine. This also makes it difficult to prepare guest teachers or classroom visitors for being in the classroom. Both Marie and Erin described the detailed notes they leave for supply teachers, including a list of “Do’s and Don’ts” or “Tips for the Day” for working with the student who has ODD, but Erin noted that despite this, the student
always seemed to struggle more if she was not present. This could be the result of the change to the student’s routine, structure, and the lack of consistency in their experience. Mindful grouping is also an important challenge for these teachers, as groups that are more likely to experience conflict can escalate the behavioural issues of a student with ODD. Erin explained that there are some activities she is not comfortable doing when she is teaching a student with ODD because of the risk for interpersonal conflicts, both between her and the student, and the student with their peers.

The way a student with ODD interacts with authority figures is an area of significant challenge for these classroom teachers. As the research shows, the primary source of conflict with these students is their defiance (Briesch, Ferguson, Volpe, & Briesch, 2012). The student often demonstrates a lack of respect for the teacher and will frequently argue any direction or statement made by the teacher. Marie describes the unfortunate irony of the situation, “It’s challenging when they don’t respond to authority and you are the authority figure in the room.” No matter how the teacher approaches their role, they are the head decision maker of the classroom and cannot avoid being a figure of authority. She describes the classroom as the teachers “sacred place, their safe place all day long” and where the teacher must set the rules and expectations every year. Marie also recognizes how difficult it can be to remain calm and avoid a power struggle when the student is directly challenging the teacher. With most of the strategies for working with students who have ODD being focused on pre-emptively addressing conflict, there is very little information or resources about how to successfully de-escalate conflicts with a student who has ODD. This leaves teachers in a very difficult position. It is impossible
to always successfully stop a behavioural crisis before it begins, and therefore they require strategies they can employ throughout the situation, not just at the beginning.

4.4.2 The Importance of Relationships

My literature review pinpointed a number of strategies that teachers could be using to work with students who have ODD, including maintaining predictability, offering choice, avoiding power struggles, and using when… then statements (Patrick, Turner, Meyer, & Midgley, 2003) (Bondy & Smith, 2007). However, my participants identified building a relationship as the most important strategy they use when dealing with students who has been diagnosed with ODD. I was very surprised to hear this. As teachers we strive to create meaningful relationships with all our students, but this can be difficult with more challenging students. If a student is continually challenging the teacher, I can imagine this would make it even more difficult to focus on creating that bond. As Rita Pierson (2013) so eloquently put it “You won't like them all, and the tough ones show up for a reason. It's the connection. It's the relationships.” It is possible that the reason these participants have been successful with students who have ODD is due to this incredible focus on relationships. This could be the key factor for these students that has been missing from the current literature. Further research is necessary, but I would also expect that teachers with high self-efficacy beliefs, who believe they can make an impact on even the most difficult students, would be more likely, and more able, to cultivate these relationships, to the benefit of all.
4.4.3 The Process of Building Relationships

Erin described the process she uses to begin developing a relationship with a new student. She seeks to get a one-on-one situation with the student, often by asking for their assistance. This may be help putting materials away, or help with a technology piece with an older student. Then she has an opportunity to engage the student in conversation. She may invite the student to play a game throughout the rest of the recess and then begin asking questions to better understand the student and their home life. By developing rapport early in the interactions with the student, she can quickly lay the foundation for a relationship with the student. If the student is unwilling to engage with the teacher, she may pair them up with a peer who can be a calming influence. She recognizes that intermediate students may respond more to peer influences than adult influences and so this strategy may be more beneficial for them.

By establishing communication early, teachers can more easily work with the student to identify triggers and patterns of behaviour. This also helps establish a foundation of trust between the student and teacher. If the student feels comfortable speaking to the teacher, they are more willing to communicate their frustrations and need for help. As Erin notes, that trust helps the student believe that the teacher has their best interest as their focus and that they will believe them when they say they need a break. This is also critical for any strategy that relies on signals between the teacher and student, such as a hand signal to let the teacher know the student is becoming frustrated.

Researchers have noted that stronger bonds between teachers and students are associated with fewer disciplinary issues in the school (Crosnoe, Johnson, & Elder, 2004). A caring student-teacher relationship is also associated with better academic
outcomes for students with emotional and behavioural disorders (Mihalas, Morse, Allsopp, & McHatton, 2008). However, building a relationship with a student who has ODD has unique challenges. The behaviours that teacher typically find most problematic in the classroom include inappropriate physical behaviour, aggression, social problems, abusive language, extended tantrums, and most of all defiance (Briesch, Ferguson, Volpe, & Briesch 2012; Ford 2007). These behaviours are characteristic of students with ODD. Even the diagnostic criteria for ODD suggests that the child is not open to positive interactions, as the DSM defines ODD as a pattern of negativistic, hostile, and defiant behaviour for at least a six-month period (American Psychiatric Association, 2013). These students also exhibit significant impairments in social domains (Sutton Hamilton & Armando, 2008). As such, relationship building with a student who has ODD can be exceptionally difficult. Research literature concerning how to effectively establish a relationship with these students is currently lacking.

### 4.4.4 The Role of Communication

Any good relationship requires a foundation of clear communication. When it comes to working with a student who has ODD, communication between the student, parents, school staff and the classroom teacher is critical for success. Both Marie and Erin noted that much of the information they received about a child’s diagnosis came from the parents and frequent communication with parents was exceptionally helpful in working with these students. Information about the student may also be found in the Ontario Student Record (OSR), however, when students are in the process of transferring schools the OSR may not arrive prior to their entry into the classroom and as such does not allow
the teacher to prepare for that student’s challenges preemptively. Individual Education Plans (IEPs) may also be a useful source of information, if one has been created for that student.

4.4.4.1 With the Parents/Caregivers

Parents and caregivers can be excellent sources of information about a child. They are familiar with many of the student’s emotional triggers and the strategies that they employ at home. Knowledge of a child’s home life and environment can be very helpful in determining how to approach them, but the family must trust the teacher enough to share that information. Erin particularly stressed the importance of frequent communication between school and home. On days where the student has had a rough start to the day, or something is going on at home, a simple call or note in the agenda can help the teacher. If the teacher is unaware that the child is already struggling, they cannot take steps to further minimize triggers. This can set the student up for a very hard day. Unfortunately, this kind of communication is rare. In my experience, many parents can become overwhelmed by calls from the teacher that occur too frequently. However, it is critical that teachers strive to keep these lines of communication open.

4.4.4.2 With Colleagues

Students with a diagnosis of ODD present challenges beyond the walls of their classroom. They may interact with other teachers and authority figures in other subjects, on the schoolyard, and in the hallways. Erin stresses the importance of communication between colleagues. Everyone needs to be “on the same page” when it comes to working
with these students, as consistency is very important. If every adult approaches the student differently, that results in a lot of mixed messages for that student to sift through. This also speaks to teachers supporting one another and presenting a united front. In any situation with multiple authority figures, individuals may move from person to person until they get the response they are seeking, just as a child may ask their father for something that their mother has already denied them. If every teacher and administrator has the same expectations and understanding of strategies that work for a particular student with ODD, they can help to minimize some sources of conflict. This communication also allows teachers to more easily approach their colleagues about strategies that they have found effective with a student and facilitate a better transfer of information.

4.4.5 Specific Strategies

Outside of relationship building and communication, these teachers did identify some specific strategies that they regularly employ with students who have ODD. To determine if a strategy is successful, both participants look for compliance, de-escalation of behaviours, and a decrease in negative behaviour patterns. If a strategy is unsuccessful and triggers the student, it typically has a more negative impact on other students in the classroom, as they are now witnessing a power struggle or conflict. These teachers also noted that students might outgrow strategies, which presents a new challenge for the teacher. For example, both Marie and Erin noted that as students move into the intermediate grades, their relationships with their peers might become more important to
them than their relationship with the teacher. First they must recognize that a strategy is no longer having a positive impact and then find a successful alternative.

Prior to any conflict, both Erin and Marie try to structure their classrooms to minimize conflicts. This may mean seating the student close to the teachers, or in the student’s own space. Marie notes that, in her experience, students with ODD often become easily frustrated with schoolwork and this may lead to behavioural eruptions. In this case, she will strive to not overwhelm them with work by giving them assignments in chunks or decreasing the number of questions the student is required to answer. Both teachers also avoid yelling at the student or invading their personal space, as this typically escalates the student’s behaviour. The research often describes the importance of giving the students choice, however neither of my participants mentioned this as a key strategy that they use regularly (Bondy & Smith, 2007).

Regular communication between teachers and caregivers can also serve as a strategy for curbing negative behaviours. If the student is aware that the teacher regularly speaks to their caregivers, they may be less inclined to engage in negative behaviours. This is also important if the teacher says they will have to speak to the caregiver about an incident, because then the student knows the teacher will actually follow through and that it is not an empty threat. Marie frequently uses this strategy and suggests that it is most effective when students witness communication between the teacher and caregivers as this eliminates any doubt about the teacher’s willingness to follow through.

The use of breaks and signals was also a common strategy between these two teachers. Marie described signals she has used with student in the past, such as putting a specific colour of marker on their desk, a hand gesture, or a break card, that the student
can use to alert the teacher to a problem. They may become upset because of frustration with classwork, peers, or their emotional state. Having a signal allows them to communicate that they are struggling without calling negative attention to themselves. The teacher can give them a different task to do or send them on an errand to give them a chance to step away from the source of their struggle before it becomes a conflict or behavioural crisis. This is also particularly helpful if the student is unable to articulate why they are struggling or upset. However, Erin reports that this requires a great deal of trust and a strong bond between the teacher and student. They have to feel comfortable admitting that they are struggling and be able to recognize that the teacher is looking out for their best interests if they tell the student they need a break. She has seen situations where a teacher tried to suggest a break to a student with ODD with whom they did not have a relationship or foundation of trust and having that trigger the student’s negative behaviours.

When faced with a student she has not had a chance to develop a relationship with, Erin focuses on finding commonalities she can use to quickly establish rapport. This could be as simple as a Blue Jays hat that she uses to engage the student in a positive conversation. Erin’s go to strategy when a conflict does arise is the use of restorative questions, such as “Tell me what happened?” and “What do you think we should do next?”. These questions give the student an opportunity to share their perspective of what happened and examine other possible courses of action to use in the future. They also require the student to take responsibility for their actions. As previously mentioned, she will often delay approaching the student until they have calmed to avoid further escalating or re-igniting the situation.
4.5 Conclusion

This study was largely inspired by the lack of resources available for mainstream classroom teachers concerning students with ODD. My participants confirmed my personal experience in feeling unprepared and ill equipped to successfully interact with these students in a mainstream classroom. Their positive attitudes and high self-identified efficacy beliefs allowed them to actively approach coping strategies with students who have ODD. The number of strategies they were able to bring forward and their effectiveness using these strategies is very promising for future research.

I was very surprised to discover that the primary strategy they used for working with these challenging students was to focus on building a relationship with them. When presented with the case study in the interview, both my participants said establishing rapport and creating the foundations of a relationship was the very first strategy they would employ. While strong relationships between teachers and students are shown to decrease disciplinary issues and increase academic success, students with ODD present a variety of challenges for the teacher who is striving to establish a relationship. My participants also employed a number of strategies in their mainstream classrooms, including maintaining predictability, preferred seating or classroom structure, breaking assignments or classroom work into smaller portions, and establishing signals for the student to use to indicate their frustration or need for a break from the classroom. The use of frequent and detailed communication between parents and colleagues was also a very important strategy in my participant’s professional practice. In the following chapter, I will discuss these findings, the implications and recommendations of my research, and suggest directions for future studies.
Chapter 5

Discussion

5.0 Introduction

This chapter discusses the overall findings of this research study, implications, recommendations, and areas for further research. My two interviewees shared their experiences concerning students who have Oppositional Defiant Disorder (ODD) in the mainstream Ontario classroom. They shared a number of strategies that they use with students who have a diagnosis of ODD. In particular, these teachers focused on the importance of teacher-student relationships and communication for successfully working with students who have ODD in the mainstream classroom. The findings in this study have wide-ranging implications for both the entire educational community and individual teachers and researchers, particularly concerning teacher preservice programs, teacher self-efficacy beliefs and the importance of the teacher-student relationship. I make a number of recommendations to better address the needs of these students and teachers, including the creation of new resources, professional development opportunities and the use of the strategies discovered in this study. Finally, I propose a number of areas for further research, including examining the efficacy of preservice teacher training, investigating the connection between teacher self-efficacy beliefs, attitudes, and their effect on strategies teachers employ with students who have ODD, continuing to examine the effectiveness of teacher-student relationship as a strategy, and finally, the role of gender on the teacher-student relationship.
5.1 Overview of Key Findings

In this research study, I found that both of my participants felt significantly under prepared to work with students who have a diagnosis of ODD in the mainstream classroom. Despite both having completed at least the Special Education Part 1 Additional Qualification, neither could remember any specific information they received about students with ODD or about ODD in general. Neither could they recall any professional development opportunities that had been offered regarding ODD. This suggests that teachers are not being adequately prepared to face the unique challenges these students bring to the mainstream classroom. The teachers I interviewed displayed high self-efficacy beliefs and positive attitudes, which allowed them to take an active and varied approach to working with these students. Both my participants believe that they have a significant impact on the lives of these students, both within the school and throughout the many other aspects of their lives, including how they interact with their parents and caregivers. As a result, they were more likely to attempt to engage with these students in a positive manner. The primary strategy these teachers employed with students who have ODD was building a strong teacher-student relationship. This included rapidly establishing rapport through common interests and effectively using open communication between the teacher, student, and their families. They did not believe that a diagnosis of ODD made the student a “bad kid” and strove to hold the student to the same standards as their peers, albeit in a different way. Finally, other strategies discussed included maintaining predictability, preferred seating or classroom structure, breaking assignments or classroom work into smaller portions, and establishing signals for the student to use to indicate their frustration or need for a break from the classroom.
5.2 Implications

This section discussed the implications of the research findings. They have been divided into broad, or far-reaching, implications that concern teacher training programs and the Ministry of Education. Narrow implications are specific to teachers and schools.

5.2.1 Broad Implications

The experiences shared by my participants suggest that there is a significant gap in the preservice teacher training programs in Ontario. Students with ODD present a considerable challenge for the mainstream classroom teacher, particularly as a result of their pattern of defiance and social problems (Briesch, Ferguson, Volpe, & Briesch, 2012; Ford, 2007) Without the necessary knowledge about ODD, teachers will struggle to successfully address the unique needs of these students. By not preparing teacher candidates with a deep understanding of this disorder and a selection of possible strategies to apply with these students, these training programs are doing a serious disservice to the educational system. Neither of my participants had received any information about students with a diagnosis of ODD in their preservice programs and, as such, they were woefully unprepared to face the challenges these students present. Despite their teaching training taking place over ten years ago, this situation has not yet been rectified, as I also have not received any specific information about students with ODD in my own training program.

This issue is further exacerbated by the lack of relevant professional development for teachers of students with ODD. My participants had not been able to access any opportunities to extend their knowledge or to collaborate with other professionals and were not aware of any being offered. This prevents teachers from sharing and attempting
new strategies and limits their ability to engage in collaborative problem solving. The Ministry of Education must recognize the challenges students with ODD can pose for mainstream classroom teachers and provide effective resources. Currently, there are no resources available on the Ministry of Education’s website that specifically concern students with ODD, or any behavioural disorder. The “Education for All- The Report of the Expert Panel on Literacy and Numeracy Instruction of students With Special Education Needs, Kindergarten to Grade 6” only mentions ADHD as a possible behavioural disorder. Even the “Learning For All– A Guide to Effective Assessment and Instruction for All Students, Kindergarten to Grade 12” only has a brief section on general behavioural disorders and no specific strategies. It is unacceptable that the schools my participants work in only have a single textbook that has any information on working with students who have ODD. With more resources, professional development, and support from school administration, teachers can be better prepared to successfully engage with these challenges.

5.2.2 Narrow Implications

The connection between the self-efficacy beliefs of the teacher and how they approach students with ODD also has some interesting implications for individual teachers. The research illustrates that teacher with high self-efficacy beliefs concerning their effects on students with ODD are more willing to try a wider variety of strategies with their students for a longer period of time (Shillingford & Karlin, 2014; Fontaine, 2012). They are also more likely to believe that their actions will have a significant impact on their students (Shillingford & Karlin, 2014; Fontaine, 2012). My participants both described high self-efficacy beliefs through their perceptions of the significant
impacts they had on students with ODD and their behaviour. If they did not believe they could have a significant impact on these challenging students, it is possible they would not have engaged in the same strategies they described in this study, or been as successful using these strategies. As students with ODD present a number of varied and dynamic challenges within the classroom, they require teachers who are willing and able to attempt a variety of strategies and persevere in the face of failure. Therefore, we need to ensure that new teachers are joining the profession with the understanding that they absolutely can have a significant impact on the outcomes of their students. By increasing the quality of teacher preparation for students with ODD, we can increase their confidence and self-efficacy beliefs and, in turn, their effectiveness with students who have ODD.

This study uncovered a number of possible strategies teachers can begin using in their own classroom. Most importantly, the teachers in this study focused on the teacher-student relationship as the primary facet of their approach to working successfully with these students. They attribute the majority of their success with these students to the strength of the relationship they were able to build with their students. Research has show that a strong teacher-student relationship is associated with fewer disciplinary issues for the student (Crosnoe, Johnson, & Elder, 2004). This suggests that a strong teacher-student relationship could be very important to students who typically have a great deal of trouble with behavioural outbursts. Students with behavioural disorders are also more successful academically when they have a caring relationship with a teacher (Mihalas, Morse, Allsopp, & McHatton, 2008).
When initially approaching a student with ODD, teachers must be careful not to let their own biases or previous experiences to negatively impact their impression of the student. Erin noticed that students with ODD responded very positively to teacher who did not “hold their reputation against them.” By allowing students to begin with a clean state, teachers can help students feel more secure and positive. It also gives the teacher an opportunity to recognize the positive attributes of the student, rather than simply labelling them a “bad kid” because of their diagnosis. When teachers attached negative labels to students they can exacerbate behavioural conflicts and increase the student’s defiance (Brown Hajdukova, Hornby, & Cushman, 2014). Having a positive attitude towards these challenging students can help the teacher build a strong teacher-student relationship and more effectively engage the student. This is also likely to have a significant impact on the willingness of the teacher to persevere through conflicts and actively seek trial strategies to help the student be successful within the classroom.

The results of my research will inform my personal teaching practices. While I have always believed in the importance of building meaningful relationships with my students, these findings illustrate how much more importance that relationship is for students who have a diagnosis of ODD. These students may be challenging for teachers to work with on a daily basis; however, the rewards of building a strong teacher-student relationship far outweigh any negatives. By avoiding judging students on their reputations and recognizing that I can have a positive impact on the lives of any student, despite their diagnosis, I will apply the practices described by my two participants in my own classroom.
5.3 Recommendations

The results of this study led to number of recommendations concerning teacher preservice training, professional development, and classroom teachers.

5.3.1 For Preservice Training and Professional Development

To address the lack of preparation faced by my participants, teacher-training programs must be adapted to better tackle the challenges mainstream classroom teachers face with students who have behavioural disorders, such as ODD. Neither of my participants could call to mind any specific information they received about students with a diagnosis of ODD, which suggests that either there is a serious lack of information being disseminated in preservice teacher education, or that information is not being presented in meaningful, practical way. With the recent shift to a two year Bachelors of Education in Ontario instead of a single year, hopefully teacher candidates will be provided with a more comprehensive understanding of ODD and other behavioural disorders. They must be provided with courses that describe practical strategies, such as the ones described in this study, that they can readily employ in a variety of situations when they encounter a student who has ODD. Ideally, these courses should be provided during preservice training, and then regularly updated through professional development workshops.

One of my participants, Erin, expressed a desire for more professional development opportunities, both about general special education topics and specifically ODD. She spoke very highly of a workshop she attended on Fetal Alcohol Syndrome Disorders (FASD) for its practical approach and concrete strategies to use or avoid, and wished for a similar workshop for ODD. Ideally, teachers should have access to similar
professional development opportunities about a wide variety of topics, but this is particularly true of topics such as working with students who have ODD, as there is so little information currently available for teachers. Research has shown that professional development that focuses on specific and practical instructional opportunities are most beneficial for teachers (Desimone, Porter, Garet, Suk Yoon, & Birman, 2002). Both of my participants also suggested that school boards create an inquiry focus on special education, much like they already do with literacy or mathematics. This would allow for a school board wide focus on effective special education in a variety of contexts and clearly identify the challenges and possible strategies or solutions teachers can use to address these issues. It would also help teachers access more professional opportunities to extend their understanding and increase their confidence in their ability to successfully work with students who have ODD and a variety of other special education needs.

5.3.2 Within the Classroom

Mainstream classroom teachers should also begin applying the strategies uncovered in this research study. Primarily, teachers must focus on building strong teacher-student relationships with students who have ODD. They can begin by attempting to establish rapport with the student, possibly through the student’s interests or hobbies. The use of one-on-one conversations can help the teacher identify more information about the student through questions about themselves and their home lives. Teachers must be understanding and willing to listen to the student, as communication is another key component of a successful approach to working with students who have ODD. This communication needs to include the parents or caregivers of the student as well. To
establish this communication, teachers can use daily communication logs or agendas so they can share both positive and negative comments with parents. This also allows parents to communicate any information or concerns to the teachers. Phone calls and in person meetings are also excellent ways to enable communication between the caregivers and teachers.

It is important to remember that teachers are not lowering the behavioural expectations in the classroom for students with ODD. They are still expected to follow the rules of their school in all situations. My participants noted the importance of not using the diagnosis as an excuse to behave poorly. Otherwise, as Marie commented, we do our students a critical disservice. Many of the behaviours associated with ODD, such as defiance of authority, would not be acceptable in a workplace. If we do not teach our students how to successfully cope and adapt to behavioural expectations, they will not be able to be successful in their future endeavours. However, when there are problems with behaviours with these students, they must be dealt with differently. Teachers must institute a period of wait time between the behavioural issue and discussing it with the student. This will help ensure the student has calmed and prevent escalation of the issue. Marie suggested that this wait time is also particularly helpful for allowing the teachers to regain their own emotional equilibrium.

Teachers can also focus on maintaining the predictability of the classroom schedule, as my participants found that having an established routine helped decrease behavioural outbursts for these students. The student may also require preferred seating within the classroom. Accommodating the student by breaking assignments or classroom work into smaller portions may also prevent them from feeling overwhelmed or
frustrated. Restorative questions are helpful for dealing with behavioural issues and conflicts, both between peers and staff. Finally, teachers can work with the student to create a signal that will inform the teacher that the student is becoming upset and requires a break from the classroom, without drawing negative attention from the students peers. This could be gesture or a specific colour of marker placed on the desk. If possible, establishing a positive peer connection can also be helpful for the student, particularly if they are having trouble engaging with the teacher.

5.4 Areas for Further Research

As both my participants described feeling unprepared for teaching students with behavioural disorders like ODD, some research should be undertaken to determine how well current teacher preparation programs are addressing these disorders. The two teachers I interviewed had both done their teacher training over ten years ago, so it is possible more current graduates are being better prepared for the challenges associated with students who have ODD. As the initial teacher education program has recently been extended to a two-year program, ideally teacher candidates will receive the much needed training and resources for working successfully with students who have behavioural disorders. However, as a current student in a preservice teacher-training program, I have yet to be given any information or strategies I can employ immediately upon encountering a student with ODD. Therefore, changes still need to be effectively implemented.
I had hoped to examine how beliefs about attributes affected teacher self-efficacy beliefs but was unable to do so due to the time constraints of the interview format. For example, if a teacher believes that a student’s behaviours are fixed, stable, and global, will they perceive that they can have an impact on that student? I was unable to examine the source of the teacher’s attributions in depth, which leads to a superficial connection identified in this study. The participants of this study both focused on the changes they observed in their students; which suggests that they saw their student’s attributes as malleable. Their perception of their impact on the students they worked with and the resultant efforts to support the student suggest high self-efficacy beliefs. I had suspected that this would lead to positive beliefs about teacher self-efficacy, as it has for my two participants, but further research is necessary to support this link.

Further research should also delve more deeply into the role of teacher attitudes concerning students with ODD. Do more positive teacher attitudes correlate with more success or better outcomes for students with ODD? Due to the limited scope of this study, I was not able to look more closely at the relationship between teacher attitudes and self-efficacy beliefs. This deserves additional development in future studies, and I suspect that teachers with the most positive attitudes and highest self-efficacy beliefs will perceive the most success with students who have ODD in their classrooms. It is also very interesting to note the connection between positive attitudes and teacher-student relationships. Both my participants identified building a strong relationship with a student who has ODD as their number one strategy for minimizing negative behaviours. Building a strong relationship is not possible when the teacher is harbouring negative attitudes about the
student, and as such, teachers with negative attitudes about students with ODD may be eliminating a particularly effective method for working with these students.

Finally, the importance of the teacher-student relationship for students who have been diagnosed with ODD merits a great deal of future research. Firstly, research must examine the effectiveness of the teacher-student relationship as a strategy for working with students who have ODD in a much larger population. It is possible that the two teachers I interviewed were anomalies in the research. Therefore, the sample size must be increased to confirm the validity of this finding. As these students are typically resistant to authority figures, teachers will also require a deep understanding of how to develop a strong and meaningful relationship with these students. This should include strategies for quickly developing rapport with new students and a variety of practical approaches a teacher could use in the mainstream classroom.

My participants also raised a very interesting point about the role of gender that deserves further inquiry. Marie noted that she often easily slides into the maternal role for her students, due to her gender and the amount of time she spends with them. She feels that this helps her develop a relationship with her students and increases the significant of her impact on the outcomes for the student. This raises the question of gender bias and whether this would impact male teachers of students with ODD. Does the teacher’s gender affect the type of relationship they can build with a student? Or does a teacher need to display the characteristics associated with being maternal to be able to engage in effective relationship building? As individuals with ODD are characteristically resistant to authority figures, it is possible that they interpret male teachers more authoritative than female teachers, due to their socialized understanding of gender roles.
Some research does suggest that male teachers are more authoritative in the classroom, whereas female teachers are more supportive (Duffy, Warren, & Walsh, 2001). Understanding the dynamics of gender and their effects on teacher-student relationship will be critical to understanding how teachers can effectively develop meaningful relationships with all students, but particularly with students who have ODD.

5.5 Concluding Comments

This study has begun to fill the significant literature gap concerning teaching students with a diagnosis of ODD in the mainstream classroom. There is still a great deal more research to be done, but my participants were able to raise a number of significant points that are very important for both individual teachers and the educational community at large. Their focus on the importance of the teacher-student relationship was very interesting and poses a variety of future research questions. The strategies that they provided can, and should, be immediately applied in mainstream classrooms. These strategies include establishing a strong teacher-student relationship, effective communication between teachers, students, and parents, preferred seating, breaks from the classroom, and maintaining predictability in the classroom environment. By providing teachers with more knowledge about students with ODD, through better preservice training, resources and professional development, we can increase their confidence and self-efficacy beliefs regarding working with these students and, in turn, encourage success for these students in the classroom and beyond.
References


Appendix A

Letter of Consent for Interview

Date: ___________________

Dear ___________________,

I am a graduate student at OISE, University of Toronto, and am currently enrolled as a candidate in the Master of Teaching program. I am studying the use of classroom strategies for students diagnosed with Oppositional Defiant Disorder for the purposes of investigating an educational topic as a major assignment for our program. I believe that your knowledge and experience will provide insights into this topic.

I will be writing a report on this study as a requirement of the Master of Teaching Program. My course instructor/research supervisor who is providing support for the process this year is Dr. Peter Yee Han Joong. The purpose of this requirement is to allow us to become familiar with a variety of ways to do research. My data collection will consist of a sixty-minute interview that will be tape-recorded. I would be grateful if you would allow me to interview you at a place and time this is convenient to you. I can conduct the interview at your office or workplace, in a public place, or anywhere else that you may prefer.
The contents of this interview will be used for my assignment, which will include a final paper, as well as informal presentations to classmates and potentially at a conference or publication. I will not use your name or anything else that might identify you in my written work, oral presentations, or publication. This information remains confidential. The only people who will have access to my assignment work will be my research supervisor, my research group members, and my course instructor. The audio file of the interview will not be shared. You are free to change your mind at any time, and to withdraw even after you have consented to participate. You may decline to answer any specific questions. I will destroy the tape recording after the paper has been presented and/or published which may take up to five years after the data has been collected. There are no known risks or benefits to you for assisting in the project, and I will share with you a copy of my notes to ensure accuracy. You will also be provided with a copy of the final product.

Please sign the attached form, if you agree to be interviewed. The second copy is for your records. Thank you very much for your help.

Yours sincerely,

Jessica Nielsen
Instructor’s Name:

Email:

Research Supervisor’s Name:

Email:

Consent Form

I acknowledge that the topic of this interview has been explained to me and that any questions that I have asked have been answered to my satisfaction. I understand that I can withdraw at any time without penalty.

I have read the letter provided to me by Jessica Nielsen and agree to participate in an interview for the purposes described.

Signature: ______________________________________

Name (printed): __________________________________

Date: ______________________
Appendix B

Sample Interview Questions

The interview will be conducted in a semi-structured format. These questions are samples of the questions that will be asked in the interview, but may change as a result of the information provided. Participants will be provided with a written copy of the scenario.

1. How long have you been teaching? What grades have you taught? Do you have any specific qualifications for working with students who present behavioural challenges?

2. Approximately how many students have you worked with that have a diagnosis of ODD?

3. What are some of the specific challenges you have faced in the classroom with these students? How have these challenges influenced your decision-making?

4. Did you feel you were properly prepared to work successfully with these students?
   a) Were you aware of the student’s diagnosis before they joined your class?
   b) What types of resources were provided to you?
   c) Did you receive adequate support from resource teachers, ISRTs, administration?
   d) What resources or information do you think should have been provided to you or would have been beneficial to you?
5. What types of strategies have you used with these students?
   a) How do you judge whether these strategies have been successful or not?
   b) Which have been successful?
   c) Which have failed?
   d) Are there any you have discovered that you have not tried to use in the classroom?

6. How would you respond to the following student
   a) If they entered your classroom and you had no background information about them? (ie- starting strategies)
   b) If you knew they had an ODD diagnosis and were familiar with their behaviours and challenges?

Bobby is a grade seven student. His academic work is average when he turns it in, but he rarely submits assignments. In the classroom he is often disrespectful to both staff and peers. When Bobby is directly asked to do something, he is consistently defiant and becomes combative. He regularly instigates power struggles with staff members. When he does not get his way or is unable to create a power struggle he frequently yells and throws items around the classroom. He has hit peers over trivial incidents and tried to hit female staff members. A few times he has become so aggressive that his fellow students have had to be evacuated from the classroom.

7. Do you believe you have been able to influence or affect the outcomes or success of these students? What do you believe has the most influence on these students?

8. How do you think other students in your classroom are affected by the presence of behavioural issues associated with students who have ODD?