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**Supporting Self-Regulation in Elementary School Students with Disabilities**

Jessica Guerra

Capstone Project for the Bachelor of Science in Human Development and Family Science

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### **Introduction**

This project focuses on increasing self-regulation in first and second-grade students with learning disabilities (LD) and emotional or behavioral disorders (EBD). Classroom behavior problems such as disruptions, not staying on task or following directions, and inappropriate behaviors and language increase the teacher's and students' stress levels. Also, Outbursts and minimal understanding of how to redirect these types of behavior can disrupt the flow of classroom instruction and impede students' learning (Parsonson, 2012). These issues relate to poor cognitive skills, so healthy self-regulation can not be developed properly. To improve these cognitive skills and support self-regulation of students with special needs, I developed three lessons to help support positive social and emotional development for these children. The first lesson teaches students how to identify their emotions and will learn techniques to regulate those emotions. The second lesson will teach students how to appropriately express their feelings with those around them. Lastly, the third lesson will teach students how to ask for help when overwhelmed and use previously taught techniques to self-regulate their emotions. Over three weeks, these lessons would occur at Monterey Bay Charter School in Pacific Grove, Monterey County.

### **Needs Statement**

“Enacted in 1975, the *Individuals with Disabilities Education Act* (IDEA) mandates the provision of a free and appropriate public school education for eligible students ages 3–21. Eligible students are those identified by a team of professionals as having a disability that adversely affects academic performance and as being in need of special education and/or related

services” (IES, NCES). For the US, the average percentage of individuals who receive IDEA services in the school year of 2021-2022 is 15 Percent, while in California, the average percentage of individuals who receive IDEA is 13 percent. Among students who received special education and/or related services under IDEA in the school year 2021–22, the disability types with the largest reported percentages of students were specific learning disabilities (32 percent) and speech or language impairments (19 percent). Children with emotional disturbances or disorders were about 5 percent (IES, NCES).

Healthy self-regulation allows individuals to use their skills and achieve goals by understanding and identifying the qualities that helped them achieve these goals. “This is done by clearly defining the individual’s goals through self-monitoring, evaluation, and promotion” (Youssef & Wahba, 2021, as cited in Khasawneh, 2021). Children with LD and EBD need to learn how to adapt to new circumstances and think in new, innovative ways to adjust to their surroundings. This requires them to learn cognitive skills that allow for flexible thinking. Cognitive flexibility allows for adapting to new educational circumstances and situations by reducing and comparing the children with old experiences, simplifying the complex ones, and collating similarities and differences (Khasawneh, 2021). Achieving this in the classroom will benefit these children educationally and allow for better success later in life. Throughout the rest of this paper, I will elucidate what these types of disabilities are, explain the possible interventions/services that will empower success in these children's lives, and share the results of how these techniques played out throughout my lessons.

“A learning disability is a neurological disorder that affects the brain’s ability to receive, process, store, and respond to information” (NASSET, nd). Learning disability (LD) is a general term to describe an individual or group of people with trouble learning or using different skills.

These skills often refer to reading, writing, listening, speaking, reasoning, and mathematics. Not every person with a learning disability lacks the same skills as someone else. They vary from person to person and “affect their ability to interpret either what they see and hear or to link information from different parts of the brain” (NASET, nd). No prominent sign indicates that a child has a learning disability, but noticeable differences exist between how well a child is doing in their class and how well they could do. A few signs could indicate a child has a learning disability, but it does not always mean they can be diagnosed with it if they show these signs. As (NASET, nd.) stated, these signs include “having trouble learning the alphabet, rhyming words, or matching letters to their sounds, have real trouble with spelling, struggle to express ideas in writing, learn language late and have a limited vocabulary, hearing slight differences between words, have trouble following directions, mispronounce words or use a wrong word that sounds similar, have trouble organizing what he or she wants to say or not be able to think of the word needed for writing or conversation, not follow the social rules of conversation, such as taking turns, and may stand too close to the listener, confuse math symbols and misread numbers, not be able to retell a story in order (what happened first, second, third), and not know where to begin a task or how to go on from there.” Most of these signs are related to elementary school-age children because that is when most students are diagnosed. The child could also show a few of these signs, but most likely not all.

“About 10% of students in the United States have been classified at some time in their lives as having a learning disability” (Boston Children's Hospital, n.d). No identified cause leads to a child having a learning disability. Learning problems often run in the family, but environmental factors could also be a potential cause. “Mostly, learning disabilities occur because there is an enormous range of variation that occurs normally in people's cognitive

strengths and weaknesses” (Boston Children's Hospital, n.d). Every child has a cognitive profile, which leads to the ability to complete different tasks that others may not be able to do. In school, children are asked to complete specific tasks that are age-appropriate and challenge their grade level. Still, if children are already performing under their designated grade level, they tend to have more trouble completing the tasks asked of them than their peers. This leads to the “diagnoses” or identifiers that the child may have a learning disability. As stated in (Boston Children's Hospital, n.d.), the long-term outlooks depend on many factors, such as if the child receives good support and redirects their goals to call upon their strength, they tend to succeed and do very well as adults. If the child had no help or support growing up, they usually struggle throughout life, affecting their occupational goals and personal qualities.

“Emotional behavior disorder is a condition in which an individual's behavioral or emotional responses are different from those of their general age group or classmates, ethnic or cultural norms, or academic progress in and out of the classroom” (Lehr, 2005). Researchers have found that students with EBD typically lack the basic skills necessary for positive social and emotional functioning (Smith. et al., 2016). These children tend to be less engaged in school activities and struggle to succeed academically and emotionally. As cited in (Smith & Taylor, 2010), “Students with EBD can exhibit behaviors such as chronic classroom disruption, aggression, and general maladaptive behavior toward peers and adults. Some students exhibit depression, obsessive/compulsive behavior, and excessive fears and phobias”. Because of this, these children find social situations difficult due to the lack of motivation and understanding or recognition of their feelings. In addition, students with significant behavior problems have difficulty using their working memory to interpret social cues accurately. It is also more

challenging for them to access schemata for navigating difficult situations, making inaccurate inferences about what others might be thinking, and focusing on hostile or antagonistic cues, which can lead to inappropriate outbursts. They are thus more likely to get angry or frustrated since they do not know how to manage or understand their emotions appropriately (Smith., et al., 2016). All of this results from poor development of self-regulatory functioning and lack of executive functioning.

There are a few factors that can cause emotional behavior disorders. Still, it usually has to do with how the brain is cognitively and emotionally wired, along with the experiences that an individual has experienced. Many children have experienced abuse, neglect, or a traumatic experience that can trigger your fight-flight or freeze mode in their amygdala, which is responsible for the “regulation of autonomic and endocrine functions, decision-making and adaptations of instinctive and motivational behaviors” (Simic et al., 2021). As stated by Wynne et al., (2013), “The prevalence of mental health problems serious enough to warrant a DSM diagnosis in children and adolescents is 25%, and between 3% and 17% are diagnosed as having a serious emotional disturbance. However, less than 1% of the school-aged youth receive special education services for EBD.” This goes to show that there are still a lot of unmet needs for children with EBD in school districts, which can later lead to adverse outcomes. Students with EBD usually fall behind academically and are suspended or expelled from school due to the “zero tolerance act,” which causes them to drop out of school twice as much (Smith et al., 2016). Undiagnosed or untreated children with emotional behavior disorders usually create escalating conflicts with peers and adults, leading to long-term social trajectories. Some other long-term effects are a higher rate of post-school unemployment and approximately 75% entering the juvenile system (Smith et al., 2016). Furthermore, learning disabilities and emotional behaviors

can also be a cause of other neurological conditions as a result of their co-existing conditions and treatments.

My first lesson consisted of reading a book by Elizabeth Verdick, “Calm-down Time,” which teaches children how to identify their emotions and how to work through them appropriately. It teaches different breathing techniques and showcases that children can talk to their teachers and parents when they are feeling stressed out. At the end of the lesson, I had the groups discuss and list what techniques or strategies they can use when they are feeling stressed, mad, or frustrated.

The second lesson consisted of flashcards with a different scenario on each card for the children to work through. This gives children the chance to use the previous techniques taught to them while also physically working through different emotions and getting peer feedback hands-on. Learning how to express emotions appropriately is a key component of healthy self-regulation. So practicing and introducing this at a young age can benefit every child.

The third lesson was a phonics lesson aimed at children with a learning disability. Phonics is a good way to work on grammatical abilities. This lesson could create some frustration for the students who struggle with vocabulary, which is why I chose to do this lesson last. Since the children were previously taught different self-calming techniques and worked through tough scenarios the days before, they should be able to use everything that was taught to them and work through the lesson even if they were getting frustrated.

### **Needs Statement: Summary of Points**

15 Needs Statement Content (20)

03.5 Reference Section (04) < Not all listed sources were used in the paper.

02 Writing Quality (03) < There are too many direct quotes in this section. Change some of them to paraphrasing. Citation does not equal

quotation.

\*You lost sight of your main topic (emotion regulation).

02     Formatting (03)

< Citation formatting errors; reference page errors

22.5    Total (30)

### **Theory**

This project is influenced by Albert Bandura's social and cognitive learning theory. As McLeod (2024) states, "Social cognitive learning theory is often described as the 'bridge' between traditional learning theory (behaviorism) and the cognitive approach. This is because it focuses on how mental (cognitive) factors are involved in learning." He believed that we learn through our interactions with others in a social context and emphasized through his theory the importance of observing and modeling the behaviors and emotional reactions of others (Mobley & Sandoval, 2008).

This theory relates to my project because children ages 6-7 need role models in their lives to help positively self-regulate their emotions. The children at Monterey Bay Charter School do not have the social skills or emotional support needed to self-regulate their emotional behaviors. This is why Bandura believes children learn in three layers (McLeod, 2024), which allows them to interpret their experiences actively. The first layer is influence. As educators or caregivers, we need to be the positive role models our children look up to because they imitate what they see and hear at this age. So, if we cannot regulate our emotions as adults, then it is more likely that our children won't be able to. The second layer is reward, which determines what the children will imitate. If they see another child rewarded for good behavior, they will likely imitate that behavior and vice versa. The third layer is self-efficacy. If children positively view themselves, they will be able to achieve more goals, but if they feel they can not do things, then there is a

hard time achieving goals in and outside of the classroom. Both parents and teachers must be able to communicate what is happening in the classroom and at home and develop a plan that is the same so there is more than one role model in the child's life. I incorporated Bandura's three layers to create a set of three lessons over the course of three days. For the first lesson layer, "influence," I used the book "Calm-Down Time" to act as the influence. For the second lesson layer, "reward," I told the children at the beginning of the day that they would get a reward if they could get through the whole lesson with minimal disruptions. Finally, for the third lesson layer, "self-efficacy," I assessed the children to see if they could work through their frustrations using the previously taught technique.

### **Consideration of Diversity**

Over three weeks, these lessons would occur at Monterey Bay Charter School in Pacific Grove, Monterey County. "Monterey Bay Charter School is a tuition-free public school using the core principles of Public Waldorf Education aligned to the state standards. The school emphasizes a solid academic foundation, artistic expression, and social/emotional development. A holistic, arts-integrated approach to learning emphasizes the child's relationship to the natural world, promoting respect for the environment and humankind. The goal is to nurture the whole child, enabling students to become self-motivated, competent lifelong learners. They are committed to educating the whole child, and the school endeavors to foster the unfolding of each child's full potential" (Monterey Bay Charter School).

At my service learning site, there was a wide range of students with special needs. There were children with some type of learning disability, emotional behavior disorders, autism, vision impairment, and deaf/hard of hearing. The children I worked with had a learning disability,

Emotional behavior disorder, or a combination of both. These children are in a general education classroom but are pulled out in the morning or afternoon for their small group lesson with the special education teacher. Their ages ranged from six to seven years old, meaning they were in first or second grade. Seven children were white and five Mexican children, and they were all English language learners. Every child received lunch from school unless they brought a home lunch.

To make my project culturally sensitive to all participating, I communicated with the special education teacher I was working with to create three lessons over the course of three days that she thought would benefit every child since she is more familiar with her students. Since I only had children who were white and Mexican and all spoke English, the teacher and I did not have to make any adjustments to the lessons. Since my project was aimed at students with learning disabilities and Emotional behavior disorders, I tried to make each lesson geared toward their disabilities. For example, the first two were aimed at children with an Emotional behavior disorder, which taught them how to regulate their emotions, and the third lesson was aimed towards children with a learning disability because I incorporated a phonics lesson to support grammatical abilities.

### **Theory/Diversity: Summary of Points**

11.5	Theory section (15)
07	Consideration of Diversity (10)
05	Writing and Formatting (05)
23.5	Total (30)

### **Learning Outcomes**

I designed a workshop for first—and second-grade students to support their self-regulation skills. It focused on the following learning outcomes.

1. SPED students can identify their emotions by using techniques taught to help foster their ability to self-monitor.
2. SPED students will demonstrate how to appropriately express their feelings with their teachers and peers.
3. SPED students will be able to demonstrate how to ask for help in managing their negative feelings and stress levels.

## **Method**

### **Location and Participants**

I conducted the three lessons at Monterey Bay Charter School at the Foothill campus in Pacific Grove (Tk-2nd grade). While developing these lessons, the special education teacher knew which students would best benefit from these activities. She picked out a total of 12 students that I would work with six first graders in the morning and six second graders in the afternoon. For the first graders, there were four boys and two girls; three had a learning disability, two had an emotional behavior disorder, and one had a combination of both LD and EBD. For the second graders, there were three boys and three girls; two had a learning disability, two had emotional behavior disorder, and two had a combination of both LD and EBD. Overall, my group had a wide range of diversity because every child struggled with a different disorder.

### **Procedures and Materials**

I conducted three lessons over the course of three different days in three different weeks. The first lesson's learning outcome was that special education students can identify their emotions using techniques taught to help foster their self-monitoring ability. To foster this learning outcome, I had the children work with air-dry clay, allowing them to create whatever they wanted to keep their hands busy while I read "Calm-Down Time" by Elizabeth Verdick. The book worked as an influence and modeling technique to tie in Albert Bandura's first layer, influence, of his social learning theory. This is because the book teaches children different self-calming techniques they can use when feeling stressed or frustrated. To assess the children during this lesson, I scored them on whether they were focused and engaged with the book activity and how often I had to redirect their attention and behaviors.

The second lesson's learning outcome was that SPED students will demonstrate how to appropriately express their feelings with their teachers and peers. At the beginning of the lesson, I told the students that if we were able to get through the whole lesson with little to no disruptions, I would give them a sweet treat at the end of the lesson to tie in Albert Bandura's second layer, reward, of his social learning theory. To foster this learning outcome, I took turns reading four different scenarios to one child at a time, asking them what emotion they would feel and then asking them what they would do in that scenario. Based on their responses, I either agree and reiterate what they said or give a better example and introduce positive self-regulatory actions. To assess the children during this lesson, I scored them on whether they were on task and engaged with the activity and how often I had to redirect their attention and behaviors.

The third lesson's learning outcome was that SPED students will be able to demonstrate how to ask for help in managing their negative feelings and stress levels. To achieve this learning outcome, I incorporated a phonics lesson aimed towards the students with a learning disability to

help foster their grammatical abilities. I used playdough to keep the children engaged with the lesson by having them set up five little balls of playdough in front of them, and for every word I had them sound out, they would press on one ball for each letter sound. This lesson tied into Albert Bandura's third layer, self-efficiency, because I aimed to see if they would use the calming skills previously taught or ask for help if they were confused or frustrated. To assess the children during this lesson, I scored them on whether they were on task and engaged with the activity and how often I had to redirect their attention and behaviors.

### Method: Summary of Points

04.5 Participants and Location (5)

10.5 Procedures and Materials (15)

15 Total (20)

< There are problems with how you did the lessons and assessments. There are flaws in your approach—i.e., in how the lessons and assessments fit the LOs.

### Results

The learning outcome for lesson one was that SPED students could identify their emotions using techniques taught to help foster their self-monitoring ability. This lesson was done on one day during week one out of three weeks, once in the morning with six first graders and once in the evening with six second graders. The procedures for this lesson included an art activity using air-dry model clay while reading a book about regulating one's emotions for positive modeling and influence. Based on how many distractions each group had, I would assess them using a six-point grading scale. Five out of six first graders were engaged with the activity, and I only had to redirect one student's attention and behaviors (83%). For the second graders,

three out of six students were engaged with the activity, resulting in me having to redirect three students' attention and behaviors (50%). Based on these scores, my learning outcome was partially met because 75% of the first graders passed, but only 50% of the second graders passed.

The learning outcome for lesson two was that SPED students would demonstrate how to appropriately express their feelings with their teachers and peers. This lesson was done on one day during week two out of three weeks, once in the morning with six first graders and once in the evening with six second graders. The procedures for this lesson included a set of flashcards with different scenarios that made the children think of how they would feel and how they would react, along with a sweet treat reward for completing the lesson with little to no disruptions. While still using the six-point grading scale, six out of six first graders passed with 100%, and five out of six second graders passed with 83%. I only have to redirect one student's attention and behaviors. Based on these scores, my learning outcome was fully met because both groups of students scored higher than 75%.

The learning outcome for lesson three was that SPED students will be able to demonstrate how to ask for help in managing their negative feelings and stress levels. This lesson was done during week three, once in the morning with six first graders and once in the evening with six second graders. The procedures for this lesson included a phonics lesson using flashcards and playdough to see if the students would use the skills taught to them to help them accomplish this lesson and lower their own stress levels. While still using the six-point grading scale, six out of six first graders passed with 100%, and five out of six second graders passed with 83%. I only have to redirect one student's attention and behaviors. Based on these scores, my learning outcome was fully met because both groups of students scored higher than 75%.

### **Discussion**

The focus of my project was to support self-regulation in first and second-grade students with learning disabilities and emotional behavioral disorders. Overall, my group had a wide range of diversity, which influenced my project positively and negatively. Since there was a wide variety of students, I gathered more data and saw what activities worked best for different students. All three learning outcomes were a success, with the first one being partially met and learning outcomes two and three being fully met. With this, students from both groups showed great improvement and started using the techniques taught to them; the first graders and some second graders seemed engaged in the activities, the percentage scores went up every lesson, the results were consistent with research and Bandura's theory, making my project suitable for students with a learning disability and emotional behavior disorder ages 6-7 years old.

Even though my first learning outcome was partially met, incorporating the art activity made the lesson too busy. I was trying to incorporate some type of hand manipulative to keep the children engaged. Still, I feel that specific manipulatives distracted them, taking away from the book's main purpose and modeling different calming techniques. On the other hand, my project with such a wide range of students presented some challenges. Developing activities that would benefit both groups of children was more difficult; the second graders did not seem interested in what was being taught, and there was much redirecting their attention and behaviors.

To make my project more accessible and inclusive to this age group, I would focus on one disability rather than two or ask more special education teachers what activities would best benefit both groups of students. In the future, I would strengthen and expand my project by inviting parents to the lessons, or I would send home flyers with different techniques that help foster their child's self-regulation. I would also conduct these lessons for more than three days

because these students need repetitiveness to fully comprehend what is being taught to them.

This would make my project more effective because if parents and teachers work together to help improve their child's self-regulation, there is a better chance that the child will succeed, and it will create more positive role models in their lives to help them along the way.

### Results and Discussion: Summary of Points

26 Results (30)

13.5 Discussion (15)

39.5 Total (45)

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