CLASSIFICATION OF EMOTIONAL AND BEHAVIORAL DISORDER

Introduction

This topic addresses the characteristics, categories, and treatment options for internalizing emotional and behavioral disorders, focusing on anxiety, depression, and related conditions. It aims to equip educators, parents, counselors, and mental health practitioners with actionable insights and strategies for recognizing and managing such disorders in children and adolescents. Emphasis is placed on understanding symptoms, diagnosing disorders, and applying effective interventions in educational and therapeutic contexts.

Audience

The intended audience for this topic includes:

- Educators and school administrators: To identify and support students with internalizing behaviors.
- Counselors and mental health professionals: For therapeutic interventions and management.
- Parents and caregivers: To recognize signs and provide appropriate home-based support.
- Students in psychology and education disciplines: For academic learning and research.

Length of Topic

The topic is designed to be concise yet comprehensive, with a reading and learning duration of approximately **3-4 hours**, segmented into manageable topics covering:

- Characteristics of Internalizing Behaviors
- Categories of Emotional and Behavioral Disorders
- Symptoms and Diagnostic Criteria
- Treatment and Intervention Strategies

Topic Outcomes

- To identify key characteristics and signs of internalizing emotional and behavioral disorders.
- To differentiate different types of internalizing emotional and behavioral disorders
- To employ effective therapeutic approaches, including behavioral, cognitive, and school-based interventions.

Technological Requirements

To ensure accessibility and effective learning, the following technological tools and resources are recommended:

- Digital Devices such as laptops, tablets are important for displaying this information
- Assistive technologies such screen readers are crucial for audience with disabilities

Classification of Emotional and Behavioral Disorder Overview

Basically, there are two basics classification of emotional and behavioral disorders

- A. Internalizing behaviors
- B. Externalizing behaviors

Internalizing Behaviors/Acting in Behaviors

Children with internalizing behaviors are characterized with immature or withdrawal behaviors most commonly anxiety, depression and other indicators of mental and emotional conflicts but all those behaviors are **not age-related behaviors**.

Characteristics of Internalizing Behaviors

- They avoid social interactions. They usually have no social skills needed to make friendship for instance; lacking sharing, being not funny, having not skills of giving and taking, they like to have others properties, they are always not patient
- Excessive fears or worries, or extreme feelings of guilt. They are always fearful of things which do not harm them for instance insects, darkness, sleeping alone, fearing going to the toilet alone,
- They have frequent complains of being seek but when asked or diagnosed the sickness cannot be realized
- Feeling sad or down (Persistent sadness two or more weeks).
- Confused thinking or reduced ability to concentrate.
- Extreme **mood changes** of highs and lows (Mood Swings)

- Talking about death or suicide.
- Outbursts or extreme irritability/bad temper.
- Out-of-control behavior that can be harmful.
- Significant tiredness, low energy or problems sleeping
- They feel rejected hence they end up of rejecting themselves
- They experience problem in making and keeping friends/they have lower level of understanding others' problems
- They exhibit antisocial behaviors in extra curriculum and social activities
- They have low quality of relationship caused by their inability to socialize
- They lack secondary skills like attending, following direction, using tools appropriate for a certain task which eventually lead their failure
- Those with serious EBD fights, destroys properties, are non-compliers, lies, they are abusive verbally, much argumentative,
- Those who are less disturbed end up with isolating themselves from peers, reduces social interaction, being sad, day dreaming, feeling gilt, being in a classroom but flying outside for instance thinking about nice house, nice car, owning much money, suffering phobia and anxiety.

Categories of Internalizing Emotional Behaviors Anxiety disorders

Anxiety is defined as worries or fear about future events. There is an infinite number of human experiences that cause *normal* anxiety. Life offers us the experience of many anxiety-provoking "firsts," such as a first date, the first day of school, the first time away from home.

Life has got many important events, both good and bad, that cause varying amounts of anxiety. These events can include things such as, taking a school exam, getting married, becoming a parent, getting divorced, changing jobs, coping with illness, and many others.

Anxiety is just normal fear that makes people take initiatives of effectively attempting their responsibilities so as to overcome the consequences of the events ahead them. For example, the fear students have about failing the exams if they won't make a thorough studies or preparation. That is to say, if a person does not make effective preparation for the exams, he/she may probably fail. That situation of taking initiatives to study hard so as to pass exams means fear placed on the examination failure. That fear towards failure is what is referred to as anxiety.

For this matter, anxiety is a necessary condition for life. It makes a balanced life among individuals because it shapes people's behavior by avoiding behaviors that might cause destruction or disintegration. It builds awareness about our surroundings. Anxiety is a normal human experience. In fact, it can be a potentially beneficial response in anticipation of dangerous situations. So, anxiety is normal and beneficial. It is intermittent and is expected based on certain events or situations.

Anxiety disorder is described as maladaptive emotional state or behaviors caused by excessive fears or irrational fears and worries about the future events.

It is unrealistic worries, fears and tension, this means unjustifiable fears, no reason to fear what the person fear about the future.

It is uncontrollable feelings of anxiety and fear such that a person's academic, social, occupational, and personal functions are significantly impaired.

It causes avoidance behavior, incessant/non-stop worry, and concentration and memory problems.

It causes the physical responses to the anxiety (such as palpitations and stomach upset), distorted thoughts affecting the usual way a person lives life and interacts with others

N.B. An anxiety becomes as a disorder when the fear becomes too excessive, chronic, irrational (with no reason), interferes personal daily life performance, affects personal interactions with others.

It becomes a disorder when a person sees destruction within an opportunity. When a person refuses to find an opportunity for the fear that it will hurt him/her. That person doesn't look significance available within that opportunity by perceiving it in another way round of negativity. For instance, a woman might say I cannot be married because the man will mistreat me. I cannot travel because I could die due to car accident. I cannot conceive because I will die during delivery. That, avoidance behavior increases without apparent reason is what is referred to as anxiety disorder.

Types of anxiety

a. Generalized anxiety disorders

Generalized anxiety disorder refers to unrealistic fears, worries and tension about various topics, events and activities that lasts for 6 months or more.

Worry occurs more often than normal for at least six months and is clearly excessive," along with physical and cognitive symptoms of anxiety, for example

Adults

- Adults fearing to die and leaving children alone
- Fear of losing job in which in real sense there is no base for fear
- Fear of professional failure of job, for example fear of doctors to attend operation

Youth

- Fear to be embarrassed
- Fear of school failure
- Fear of extra curriculum activities

Individuals with generalized anxiety disorder displays poor coping strategies when encounter problems. Anxiety is said to be common to girls

Symptoms

- Excessive worries or overwhelming problems
- Unrealistic tension regarding daily activities
- Anticipating worse even with no or little reason to expect so
- Frequent ache and pains that cannot be traced to an illness or injury for instance nausea (unstable stomach illness)

- Feeling irritable, tired or fatigue
- Bad tempered or short tempered
- Less tolerant even to things that need tolerance
- Regular body shivering or shaking without apparent reason
- Interference of daily activities due to excessive fears and worries
- **N.B.** GAD can be mandated by the presence of 4 to 6 symptoms in an individual

The possible reasons for generalized anxiety disorder can be; over demanding and restrictive parents, who assume everything a child does is wrong.

b. Separation Anxiety Disorder (SAD).

Involves a child's excessive worries and fear related to being separated from significant individuals. Children with this type of EBD do not find meaning in life when separated from their close persons. They feel like their parents/significant people can be harmed/not survive when they are not in place with them. Young children with SAD are being pre-occupied with frightening thoughts, that bad things are happening to their significant people especially parents thus they may refuse to attend schools or attend social activities unless they go with their parents.

Symptoms

The symptoms for SAD differ according to age for example;

• 5-8 years children experience excessive worries and night mares about their parents being harmed.

- 9-10 years children may display excessive sorrow/beyond fear and angered when separated from their parents or significant people.
- 13-16 years refuse to go to school and establish their own reasons of somatic complain such as having head ache, nausea, stomach ache just to avoid going to school

N.B. For an individual to be termed as having SAD the behavior must have been present continuously at list for 2 weeks

Out of educational context, such individuals can be those who do not go for marriage because of fear of being separated from parents, do not go to work in strange places because of fear of getting out from their familiar places, ect.

1. Phobia

Phobia means an intense fears about something or **specific situations** that actually poses little or no really danger to individuals. In this the feared object or situation is normally avoided as it is approached with an attitude of extreme and unreasonable fear or panic, for example, a fear to give the last respect to the diseased person. The most common phobia is the one associated with animals like dogs, snakes, insects, bites, mice ect. Other phobia includes seeing blood, heights and air planes. It is most common to females compared to males.

Symptoms/Behavior associated with Phobia

- Crying
- Irritability/temper tantrums
- Paralysis
- Avoiding situations or objects

Physical ache or pain, stomach or head ache

Social phobia

This is a form of phobia which is directed towards social contexts/circumstance. It is an intense fear on social situation where by an individual afraid that, he/she might be embarrassed for some reasons.

It has three sub-categories

Agoraphobia; which is the anxiety directed towards imaginary problems that could happen in open places like market, church, school, assembly, bridge. A person might develop fear about a problem that might happen when passing across the bridge, develops fear on may be eruption of fire in the market place. Thus, people find alternatives for themselves to avoid the feared places or they keep on suffering when they are in such particular open places.

- Specific phobia; this is the anxiety directed towards the specific circumstances like marriage, driving, strangers (xenophobia-fear of strangers). A person feels fear of driving a car, that he/she has a car but he/she cannot drive because of fear related into the action of driving. Likewise, to marriage, one does not marry because of fearing the consequence of the marriage, due to the negativity associated with marriage.
- Social anxiety phobia; it is an excessive fear a person develops when
 in a social group. Feeling negatively about how others perceive
 him/her. The person may feel like not to belong to the social class of
 the people he stays with. He/she feels failure to present his ideas

before others perceiving that people will quote him wrong, or what he will say might not sound useful.

Characteristics

- Avoiding social activities because of fear of meeting new people
- Sweating and shaking uncontrollably when people look at him/her
- Physical sign of fears like heart palpitation, sweating, diarrhea, confusion, withdrawal or shyness. These people fear that others might notice the physical changes they might be facing
- They experience extreme anxiety in anticipation of social events thus they avoid
- They fail to speak in front of others

Treatments

- Application of Cognitive Behavioral Therapy; it involves anxiety reducing techniques by improving social skills, patterns of self-concept and self-esteem, relaxation technique. It focuses on thinking patterns that help a person to think about situations.
- Application of Medication, the use of antidepressant is advised for very serious problems that might not be treated by psychotherapy

2. Post-Traumatic Stress Disorder

This is the emotional and behavioral disorder which is caused by traumatic/shocking events or stress, for example the death of the beloved person. It is the mental or emotional disturbance which occurs due to traumatic events. It includes wide range of events from physical abuse, sexual abuse, serious accident, death of the beloved person/family member, witnessing any form of violence or natural disaster.

Common Symptoms

- The individual may reveal the incidence over and over again in the form of flashback, night mares, dream with intense fear and see helpless.
- Trying to avoid any activity, situations, people and conversations that may provoke memories of the original traumatic incidence
- Experiencing difficulty sleeping, feeling over anxiety, problem with concentrations, high hypersensitivity and easily get anger
- For children, they may sometimes show physical symptoms like stomach and head ache.

Criteria for Diagnosis

- The person may be considered as PTSD when the aftermath of any traumatic incidence interferes with daily responsibilities
- Symptoms must be revealed for more than 1 month
- Symptoms must be associated with reduced or inability to socialize, to go to school, to work or inability to maintain daily productive level of activity

Treatment Options for Post-traumatic stress disorder

1. Behavioral therapy

This will enable an individual learn alternative **patterns of behavior** so as to display the so unrealistic in the minimal level, it helps a lot to control it. It helps to reduce unrealistic behavior that individual displays. Behavioral therapy uses self-instructional therapy to help individuals learn methods that will help to think and solve problems in different contexts out of the time.

2. Cognitive therapy

Major purpose is to reduce patterns of non-productive or unrealistic **thinking** by teaching an individual how to restructure false thinking processes in order to reduce unrealistic fears and worries.

3. Cognitive behavioral therapy

This teaches new alternative **behavior and thinking patterns** to reduce and eliminate symptoms of anxiety

4. Relaxation therapy

This helps individuals to learn how to reduce **feeling of anxiety and stress** that are overwhelming.

- It is emphasis is on the methods of alleviating the physical symptoms of stress such as shivering, heart beating, dizziness, shorten breath.
- The person has to be asked and provided with the things he most like.
- A person must not be let alone, he/she may be within group of peers or other individuals in which he/she cannot find time to feel lonely
- Being brought to recreational places/ leisure and pleasure places to generate his/her happiness and joy.

Depression

Depression is a psychological/psychiatric term which refers to rejected mood, reducing vitality (great energy) and feelings of despair/hopelessness.

Types/Categories of Depression

A. Unipolar/Major Depression

This is a type of depression in which the behavior of the person is generally in the depressed mood or in the low category without the period of highly elevated mood. In this type mood swings are less extreme usually ranging from normal to extreme feeling of unhappiness. It usually categorizes mood into the sense of extra-ordinary unhappiness.

B. Bipolar Depression/Manic Depression

The lower depressed moods are punctuated by periods of highly elevated moods. This is contrast to the first type. It is a category of depression in which an individual feels unrealistic sense of extra-ordinary happiness/well-being with failure to explain the reason.

Dysthemic/Chronic Depression

This is the category of depression in which a person feels facing the feeling of unhappiness that are inconsistent or unrelated with one's circumstances or environment and lasts for a year or more. The inconsistency between the feeling of an individual and the environment mean environment favors a person to be happy but the person is unhappy.

The Symptoms of Depression

The symptoms are similar to people of diverse ages (children, adult, adolescents)

- Persistent sad or irritable mood
- Difficult sleeping
- Sleeping too much
- Loss of energy even in light duties a person become weak
- Feeling of worthlessness or inappropriate guilt (the person feels responsible in any bad event)
- Recurrent thought of death or suicide, they feel death to be the solution to their problems
- They engage in excessive use of alcohol or substance abuse
- They face social isolation from all social activities
- They experience difficult relationships since they experience frequent confrontation with his or her partner, they breakout relationships so easily.
- They provide preference to heavy metal rock music

Categories of Depressed Behaviors

A. Academic Category

 It is noted when a child fails in all grades/acquire below in general school performance that cannot be explained by illness, injury or any other source

- Loss of interest in school subjects and activities that were once enjoyed
- Giving up easily on challenging school project or may not finish school assignment completely or out of time due to (failure to concentrate, hard thinking)
- The increased tiredness ends up of truancy, chronic absenteeism and school drop outs

B. Emotional Category

- Uncontrollable crying whenever things go wrong
- Inability to respond to humor (failure to withstand jocks)
- Acting suddenly and lonely
- Inability to take pleasure in activities which were once enjoyed

C. Cognitive Category

- Poor self-concept (they do not have any image about who they are/have no perception of themselves)
- Low self-esteem (they hold poor evaluation about their selves/they put little value to themselves)
- Feeling of hopelessness (loss of hope about the future chances)
- Excessive/unrealistic feeling of guilt

D. Motivational Category

- Social withdrawal (they don't prefer social activities even with the use of rewards and encouragements)
- Suicidal ideation (thinking and talking about suicide, threatens to commit suicide, showing suicidal gestures, thinking that suicide could easily solve their problems)

E. Physiological Category

- They experience more physical complains ranging from general body aches and pains to more specific body illness
- Feelings of chronic body fatigue (being tired all over time)
- Changes in appetite, weight or eating patterns (eat very little or too much eating) hence weight loss or gains
- Experiences complains about different problems associated with eating for instance upset stomach,
- Experiences insomnia (sleeping difficulty) and hypersomnia (sleeping too much)

Treatment Options for Depression

School based Intervention for Depression From Behavioral Approach or Therapy

- Emphasizing social interaction with peers
- Formulating foster team work to reduce anxiety
- Being kind to victims by understanding and responding to their needs and interests

- Listening to their views and suggestions so as to hear and learn their inner conflicts, feelings
- Providing them objects to interact with so that they can express their inner wishes, feelings and fantasies
- Emphasizing play with peers as much as possible
- Providing consistent rewards, approval and praise
- Applying alternative punishments when you realize one form of it is not working
- Be positive upon them when teaching to allow them feel being important part of learning
- Invite parents and other necessary stakeholders so as to work as a team
- Refer them to psychologists/counselors and physicians when necessary
- Formulate classroom rules and regulations for students to adhere
- Find the source of students' misbehaviors
- Remain patient and in control
- Ignore some inappropriate behavior, don't be much demanding
- Apply time-out approach sometime, take them to leisure situations students with EBD to find new experiences, new situation that might inspire meaningful behavior

Cognitive Therapy

- Assigning classroom activities considering learners' cognitive capability
- Politely and slightly teach them so as to make them love learning
- Provide them an opportunity to make self-evaluation of their accomplishments
- Provide them an ample time to do their assignments/activities appropriately
- Provide environment that facilitates free exploration and discoveries
- Avoid being a source of pressure
- Spend much of time to interact with them even through play to build friendship
- Identify their mistakes and give them opportunity to correct such mistakes
- Opt to be a role model by avoiding the behaviors they attempt because of their disorders for instance abusive language, improper dressing code, avoiding being harsh
- Provide effective and specific instructions to prevent misconceptions of instructions that could harmonize EBD
- Help them to realize relationship between efforts and success to harmonize working hard especially for those experience fatigue and tiredness

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