

Working with a student with difficulties

Note: Be Save at School - Be Save in Life project benefits from a grant of EUR 86,735.70 received from Iceland, Liechtenstein and Norway under the EEA Funds.

The goal of the Project is to develop and update educational offerings at different levels of education (excluding VET) by creating a training program for teachers, scenarios for talks/activities, providing a support module and creating a publication summarizing the project, and consequently contributing to the reduction of social disparities (also within the EEA).



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Introduction

The publication contains an analysis of specific cases of difficult situations and the possibility of their solution (case study). It was created as one of the activities undertaken within the project "Be save at school - be save in life" implemented by STAWIL Ltd. in cooperation with the Psychological and Pedagogical Clinic No. 2 in Rzeszow and the K. Pulaski Elementary School No. 31 in Rzeszow.

As part of the Project, a course program for teachers was developed, using action learning methods, which in 4 modules addresses issues related to working with children with educational difficulties, symptoms of developmental disorders, support of leadership (leader) skills, working in a group (class team), peer conflicts, conducting meetings with parents and conversations (with the so-called "difficult parent"), with education for social responsibility.

The program for teachers is innovative, original through its subject matter and modular structure that allows its flexible use, adaptation to the current needs of a particular group, such as a broad discussion of a topic that is particularly relevant to that group. It also contains innovative teaching methods. Its great advantage is that it was developed through practitioners - psychologists and pedagogues from the Psychological and Pedagogical Clinic No. 2 in Rzeszow and teachers from SP 31 in Rzeszow. The program, along with a demonstration training for 10 teachers, is available in the support module at: <https://bs.stawil.pl/> and on the project website: <https://besave.stawil.pl/>.

As a result of the project "Be save at school - be save in life" also developed scenarios for talks/classes for teachers on the most common problems arising in schools, including peer conflicts, alternative methods of dispute resolution, meetings with difficult parents, issues related to the age of adolescence, including, risky behavior related to online activities (such as sexting, hating, patostreaming), dealing with emotions, stress, rebuilding interpersonal relationships after the COVID 19 pandemic. The method of determining the subject matter of the scenarios is innovative, as it is a response to the needs of teachers present at the methodological and scientific seminar entitled Working with students with difficulties. The method of determining the topics of the scenarios is innovative because it is a response to the needs of teachers present at the methodological and scientific seminar entitled Working with a student with difficulties. The seminar was held in November 2022 and its participants had the opportunity to determine the topics of the scenarios most useful to them in their educational work. The scenarios are available in the support module at: <https://bs.stawil.pl/> and on the project website: <https://besave.stawil.pl/> . We encourage you to use them during classes (e.g., parenting lessons) at different levels of education.

A permanent teaching tool developed within the framework of the project "Be save at school - be save in life" is a supporting module (online access <https://bs.stawil.pl/>), used to increase the activity of teachers interested in the subject matter of the Project. The

supporting module is at the same time an additional channel for the dissemination of the results and materials developed in the Project. Within the module, it is possible to actively engage in the creation of content, by, for example, posting comments, asking questions to the psychologist. The questions and answers of the psychologist are included at the end of this publication. In addition, it is possible to supplement the module with additional content in the future (e.g., courses).

This publication presents 5 different situations involving school-age children and adolescents as seen from three perspectives: the child/teenager, the parent and the teacher. The case descriptions are supplemented with suggested interventions for each party. The people in the situations described are fictional, although their stories are inspired by the experience of the diagnostic and therapeutic work of the Psychological and Pedagogical Clinic and the experience of the work of teachers.



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Case 1: Susanna 12 years old, Asperger's syndrome

Parents:

Zuza was sensitive from birth, often cried and did not like to be touched, but she was easily parted from us and stayed from the age of 3 in the nursery. However, there was a problem with using the toilet. She wore a pampers for a long time. She would not knock it down to change it. She reacted with fear to the toilet, not wanting to enter it. After a while, maybe after about six months, she was already using the potty at home, and in the nursery, she was already letting the toilet change her pampers. However, she still did not signal her physiological needs, and did not use the toilet throughout her day at the nursery. The nursery school ladies reported that Zuza understood and followed simple and complex commands.

Zuza liked to be among her peers, she tended to do what the children wanted, such as being the baby in the family, sometimes interfering with the play of others by taking away toys.

When eating, she would lick, chew the food and spit it out. Then she ate selected meals.

Sometimes she took toys, objects especially oval-shaped objects into her mouth.

School started with difficulties. Zuza cried constantly and still does, at school they don't know why. Neither do we, by the way, always. She says she is disgusted to go to the toilet at school because it is dirty. She doesn't use the toilet all day, which is why she cries.

Zuza doesn't have favorite subjects she studies alone; her grades are good. She has a hard time establishing relationships with others.

At home, Zuza sometimes draws, plays computer games about 2 hours a day, sometimes reads a book. She shares a room with her younger sister.

We moved to Rzeszow in October (a few months ago). We thought that our move might change something, that Zuza was getting less fearful and more mature, that in the new environment she would care about the acceptance of others and would not want to stand out with her behavior.

We tried to diagnose her at our previous residence, but Zuza did not establish a good rapport with the psychologist, did not want to go to her, and we did not complete the diagnosis.

Polish language teacher – class tutor:

Zuza is a shy girl, she is ashamed to speak up, she does not express herself on the forum. In science she has no difficulties, has good grades and intellectual abilities. Occasionally she makes spelling and punctuation mistakes. Writes letters unevenly, does not fit in the ruler. Reads quite fluently, although she gets frustrated when doing so. She is able to draw conclusions.

Attention is drawn to the pressure of the writing tool, low graphic level of writing. I believe that the student's writing reflects great sensitivity, emotional lability (as if she wrote with a trembling hand).

Zuza speaks infrequently, usually single words or sentences. Written statements are on topic, well composed and rich in content.

At school, Zuzanna reacts with hysterical crying. Classroom teachers have observed that this happens after pointing out to her that she has done something wrong, but they also sometimes don't know why she cries, can't calm her down, and even sometimes attempts to calm her down intensify the crying.

Emotional instability makes it difficult for Zuza to learn and function with her peers. She has no classmates to spend recess with, and refuses to participate in class outings or trips.

Sometimes she gets offended, thinks her classmates are laughing at her while others know they are joking. I also noticed in Polish language that Zuza has difficulty interpreting poems, proverbs, metaphors. I think it's adaptation difficulties, after all, Zuza has only been living in Rzeszow since autumn.

Zuzanna:

I like the school, but there are dirty toilets in it.

The teachers are okay. The class is also okay, better than the previous one. They used to tease me before. I prefer to be alone than with someone. I don't like small classrooms. I am interested in many things e.g., art music, origami. However, I am most interested in the history of World War II. I like to draw; I also like music. I'm also interested in the Internet, because it's fun sometimes to find something that everyone has long forgotten.

I like to be with my family, I don't get bored at home.

I'm a little strange. Sometimes I cry, I can't calm down, my nerves are not strong. Sometimes my younger sister teases me, I have a room with her. I am most afraid of spiders. Sometimes I am sad and lazy. Sports are not my strong point.

Intervention parents:

Due to the difficulties presented since early childhood, Zuza should be under the systematic care of a pediatrician. Anxiety behaviors, difficulties in relationships with peers, emotional lability, reluctance to change also requires consultation with a psychiatrist.

Due to the difficulty in using the toilet, it is worth considering a diagnosis of SI (olfactory, tactile hypersensitivity). Perhaps Zuza is overly sensitive to sensory stimuli or has difficulty integrating



image: Freepik.com

them. A sensory integration therapist will suggest activities with a child, but also tasks to do at home to level out the hypersensitivities.

It is worthwhile to take advantage of the school for parents. This is a program of structured classes designed to provide parents with information, tools and support in raising and caring for their children. Such programs help parents develop parenting skills, understand their child's needs and developmental stages, and deal with various challenges that may arise in the process of raising children. Participation in a parenting school can improve communication within the family, and allow you to feel more confident in your role as a parent. Schools for parents are usually conducted in counseling centers, schools, support groups.

It is advisable to have an examination at a psychological-educational counseling center to determine the intellectual potential, possible educational difficulties.

It is important to allow contact with peers outside of school. Since the family is new to the city, it is worth considering participating in neighborhood or city events where there is a chance to meet other residents. It is important to invite friends/colleagues to your home, neighborhood meetings, joint meetings at the cinema, a gallery, etc. It is worth encouraging Susie to participate in extracurricular activities, which should be chosen in cooperation with the girl. The added value, in addition to developing peer contacts, will be the development of interests, their clarification, which in the future will facilitate the choice of further educational path, also positively affect self-esteem. Sharing passions with others is an opportunity to meet new people.

The development of social skills will be fostered by independent trips to the store for shopping, the post office and family gatherings. These natural life situations will allow to practice social competence, answer questions, enter into dialogue.

School Intervention:

Communication:

It is necessary to pay attention to the messages used with the girl - the way to get her attention. It is worth talking about emotions.

Conversations with Zuza, but also with other students, should be conducted in an atmosphere of calm and security. For this to be possible, an important aspect seems to be the well-being of the teacher, who should take care of himself, take care of his leisure, pursue his passions, but also de-stress. Such activities will allow you to remain calm and patient with your students. It is worth remembering to have difficult conversations when you yourself are calm, patient and rested. It is important to take care of yourself!

It is important to understand and accept the child's emotions, name them, e.g. "I can see that you are crying, you must be sad," and to listen to what the student is saying, even when it seems trivial to us. It is important to avoid interrupting and judging.

It's best if the messages directed to Zuza are simple, short and specific.

It is advisable to encourage the student to express her thoughts using open-ended questions, and avoid closed questions (It is better to ask "How do you feel?" than "Do you feel bad?" - this allows the interlocutor to collect her thoughts, to look for her answer, without being suggested by the question).

Positive reinforcement is important, so praising Zuza when she does something well, e.g. Saying to Zuza: "I see that you are sitting calmly and taking a note. That's what I mean. Keep it up", will likely reinforce her behavior (make her repeat it) and perpetuate it. We must also remember to apply similar praise to other students. Positive reinforcement will increase desirable behavior in the classroom.

If a difficult behavior occurs, such as Zuza's crying, which is not loud enough to disturb the group, it can be ignored, giving the student a chance to self-soothe. Ignoring difficult behavior can extinguish it. On the other hand, if the behavior is so difficult, such as crying is very loud, that it disrupts the process of the lesson, it is then worth finding a place of quiet for Zuza. Here it can be very helpful to work with a pedagogue or school psychologist, who will initially go out with Zuza, show her a place of tranquility. Ultimately, it would be good if Zuza is able to handle such a situation herself, so when she cries, she has the opportunity to go out to the place of tranquility.

Excessive criticism and punishment should be avoided. Messages such as "Don't cry", "You're acting like a child", "At your age it's not appropriate to behave like that", can cause Zuza to think badly of herself and negatively affect her self-esteem and self-image.

It's a good idea to name your emotions, talk about them, give students an example of how we deal with our emotions ("I'm sad, so when I get home, I'll have a good cup of coffee/call a friend to talk to her about it/listen to music", "I'm happy today - I'll go for ice cream/go to the cinema/dance"). Such an open way of talking about emotions will make it easier for students to name difficult emotions and help them find their own way to deal with them. When dealing with students, patience is very important. It is important to remember that the actions taken do not have the desired effect right away. Change needs a relationship based on mutual respect and understanding.

Communication is an art. It is worth practicing the ways of open communication, for example, during a training pedagogical council.

Adapt educational requirements to the individual needs and abilities of the student:

If Zuza reacts by crying to getting attention it may be difficult for her to meet the requirements. There is a need for an examination at the psychological-educational counseling center to determine the cognitive development of the student and the examination of perceptual-motor functions, to determine any objective difficulties of the student (whether intellectual development is in the norm or below, whether there are lags in school knowledge, especially since there was a change of school).

Provide the child with psychological and pedagogical assistance through individual meetings with a psychologist:

The psychologist's work should include the development of the student's social-emotional competence, methods of regulating emotions, coping with emerging tension, and developing adaptive social strategies. Initially, individual classes are needed for the psychologist to establish a bond, a relationship with Zuza, to help her acquire and practice social skills in a safe atmosphere. Later, pair and small group classes should be considered. The skills gained would contribute to better functioning in the class group.

Integration activities in the classroom:

It is necessary to take care of the right atmosphere in the classroom through regular integration activities, sociometry, which will allow Zuza to function better in school, facilitate the building of successful, positive relationships with her classmates, allow the creation of a cordial and friendly atmosphere that will make her feel accepted and safe in the class team. Creating the opportunity to directly share her achievements and successes will satisfy her needs for recognition and approval, build her confidence in herself and in the class team. Zuza could conduct an origami workshop to showcase strengths.

Integration activities will positively influence the formation of tolerance and empathy, which is important for mutual understanding. A greater sense of security, acceptance from the class and the knowledge that it is easier to overcome difficulties together will make it easier for Zuza to function in many school situations, mainly involving new, unfamiliar conditions.

Intervention child:

It is necessary to provide Zuza with support, care, unconditional acceptance of her person. In a safe environment, with a sense of being accepted Zuza will feel more confident. It is worth teaching Zuza to be open in communication, to express her needs. If it's difficult at this stage then individual work with Zuza should focus on recognizing needs. Zuza should work individually with a school psychologist/pedagogue.

Individual work should continue in pairs, small groups, Zuza would find it easier to speak up, to establish deeper relationships with peers. Work under the guidance of a psychologist/pedagogue would bring tangible results in the form of a better feeling in the classroom and greater activity of the girl in class (generalization).

It is necessary to develop Zuza's interests, to give opportunities to show them at school - an exhibition of origami works, participation in a competition on World War II, etc.

Relaxation training, visualization may be important.

Results of psychological and pedagogical tests:

Zuza has a rather low need for school achievement, and similarly low motivation and anxiety levels in school situations. Zuza does not strive to show her full potential, avoids asking questions, establishing cooperation, and does not take advantage of the help offered. She

likes to be alone, and at her previous school she was alienated, ridiculed by her classmates. She avoids being away from home, does not want to attend extracurricular and after-school activities, even those in line with her interests and preferences.

Zuza presents a low level of social-emotional competence, has no idea how to deal with her own emotions especially difficult ones, and lacks adaptive social strategies that would help her function in a peer group.

Zuza's current general intellectual performance is shaped on average. At an age-appropriate level, the schoolgirl has mastered the ability to efficiently solve logical tasks that involve discovering the relationships in which various objects remain in relation to each other. She is able to detect the changes to which successive elements of a sequence are subjected. He is good at recognizing relationships between elements of a sequence. Recognizes the rules in relation to the pattern in the task, notices the essential elements or inaccuracies of certain situations. The level of general knowledge presented by Zuza, accumulated both in the course of formal education and as a result of environmental and cultural stimulation (including the influence of the family environment), testifies to proper stimulation of development. The scope of Zuza's general knowledge is adequate for her age.

Quantitative reasoning, problem-solving skills and mathematical tasks are average. Zuza correctly copes with visual-spatial tasks. She perceives patterns and relationships in visual material. The result also indicates correct spatial orientation and understanding of concepts related to this area. At the average level ranks the range of working memory, which is an important condition for effective mental work on a variety of tasks.

The functioning of school techniques is correct. Zuza reads fluently with comprehension, especially books that interest her, memorizes the content very well, although she is reluctant to narrate it.

She is able to formulate written statements on a specific topic, while she expresses herself briefly, laconically, generally vaguely. She has trouble making and maintaining eye and verbal contact. During emotional tension, at times there is no fluency in speech.

When writing, the student makes few mistakes, but the graphic image of the writing is disturbed. Zuza distorts letters, the writing is not kept in the line of the notebook. The writing is not very legible, which is associated with low graphomotor efficiency. The development of eye-hand coordination with right lateralization is lowered.

Zuza has mastered mathematical knowledge and skills well; she counts efficiently in memory.

Results of medical consultation:

On the basis of the medical and pedagogical interview with the parents, psychiatric, psychological, pedagogical examination, analysis of the documentation provided and observations, it is concluded that the disorders occurring in Zuza meet, according to the ICD-

10 classification, the diagnostic criteria for the diagnosis of autism spectrum disorders - Asperger syndrome F84.5.

Developmental abnormalities are evident in the areas of:

- Communication - the student speaks in complex sentences, has a rich active vocabulary, often uses phrases characteristic of adults, there are grammatical errors in speech, difficulties in understanding abstract content, the girl is characterized by wordiness.
- Social interaction - in the preschool period she always kept to herself, was accepted and liked, rarely got into conflicts. Currently, Zuza manifests difficulties in recognizing the understanding of complex emotional states, inadequate level of empathy for age, has difficulties in correctly understanding social situations, assessing the intentions and motives of others. She is characterized by literalism in perception, increased emotional lability, the need to control situations, the desire to stand on one's own, lack of age-appropriate ability to cope with failure, setbacks.
- Behaviors - excessive attachment to constancy, immutability, specific interests (currently World War II), schematism in daily functioning, sensory disturbances.

Conclusion:

It is necessary to undertake intensive therapeutic interventions aimed at compensating for the identified deficits by participating in systematic multifaceted individual psychological therapy and group activities. Zuza requires the care of a psychiatrist. Psychoeducation for parents is also indicated.

Recommended literature:

Thomas Gordon (2007) "Upbringing without failure in school". PAX Publishing Institute.
Faber Adele Mazlish Elaine (2013) "How to talk so children will listen to us". Media Family.
Kolakowski Artur, Pisula Agnieszka (2021) "The way to a difficult child". GWP.
Baker Jed (2022) "Social skills training". Harmonia Publishing House.



Case 2: Anna 12 years old, adaptive disorder

Teacher – class tutor:

Ania is a student of class 6. Last school year she did very well in math lessons: she was always prepared, reported in class, was active, solved tasks correctly, did her homework regularly, even took part in a school competition, although she did not take a significant place in it. Perhaps she was sorry about this? Although when I asked her about it she said she didn't.

In the previous year, Ania was also active in other classes, she achieved very good grades, she finished class 5 getting a certificate with a red stripe. She applied for a presidential scholarship, but unfortunately did not get it.

In addition to her academic achievements, she was the soul of the company, for 2 years she was class president. She always spent her breaks in the company of other classmates.

This year I sometimes get the impression that I am teaching a "different" girl. Ania is reluctant to solve tasks, she is apathetic and thoughtful. When I ask her to the blackboard, Ania often does not know what is going on, does not know which tasks the class is solving. She seems very uninterested in lessons. She rarely does her homework.

During breaks I see her sitting against the wall, she doesn't walk around the corridors with her classmates as before. I have signals from other teachers that she is not preparing for lessons.

I wanted to talk to Anna, but she says everything is fine. I see, however, that she spends her breaks alone, looking off into the distance somewhere.

Mother:

Ania was always ambitious, she cared about her school achievements. From the earliest grades she sat down to do her homework on her own, I didn't have to rush her. She brought the best grades, certificates with a red stripe, I was very proud of her. Ania always strongly experienced failures, she compared herself with others. She competed with a classmate for the top spot in the class. She applied for a presidential scholarship, but did not get it. I explained to her that nothing happened, but she wouldn't talk to me.

Ania was always sociable and did not cause educational problems. During the vacations, she started getting headaches. She spent most of her time at home, explaining that she was unwell, she did not go out with her friends, it was difficult to take her out shopping or to her grandmother for dinner.

Before the vacations, in her spare time she played the violin, sang, and went to music school. At the end of August, however, she said she didn't want to go there anymore, that she couldn't cope there. She has always been sensitive, her grandfather died in the pandemic, she experienced it very much.

Maybe it also matters that my husband and I are separated? It's hard for me to talk about the separation myself, I'm experiencing it a lot, I don't know how to tell Ania and the whole family that we're getting divorced. I keep a good face to a bad game. I want to protect Ania for as long as possible, so that she feels our divorce as little as possible.

Anna:

I want to be like I used to be, I want to study like I used to study, but suddenly everything stopped entering my head, and sometimes I can't make myself study either. There is so much learning, I don't know how to get into it. I'm often sad. I sleep after lessons because of fatigue. In general, I'm tired all the time. I find it hard to decide on something, I look bad in my clothes, I don't like myself. I often don't sleep well, I feel tired, I eat poorly, I get headaches.

My friends annoy me, they talk about silly things, clothes, boyfriends, I'm not interested. Parents also annoy me. I'm not sure if I'm important to them yet - something is happening and I don't know what, they don't tell me about something, they burble to themselves. I think something bad is happening. I often want to cry.

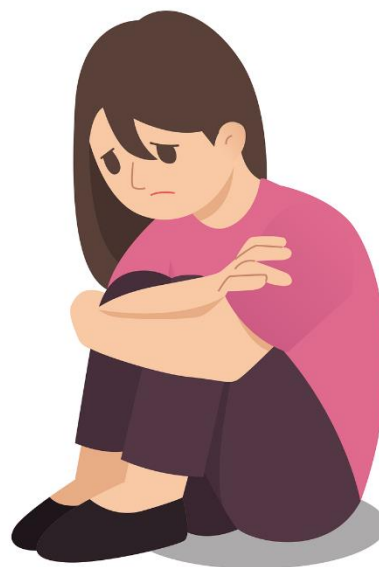
Intervention parents:

It is worthwhile to be in close cooperation with the class teacher and subject teachers to provide ongoing support for Ania in overcoming emerging difficulties, provide assistance. It is necessary to set requirements appropriate to her age and abilities. To be able to do this,

it is worth checking Ania's intellectual potential, reporting her for an examination at the Psychological-Pedagogical Clinic. Perhaps obtaining very good grades in all subjects with an increase in the scope of the material, exceeds her current capabilities.

It is very important to recognize and emphasize strengths, commitment to work, not just the end results (grades). Anna accustomed parents to very good grades, it was for them that she was praised. It must not be allowed that praise stops, because it is what builds confidence in one's abilities, mobilizes one's efforts, develops motivation. The fact that Anna has worse grades than before does not mean that there is nothing to praise her for. You can praise her for many activities of daily life, such as taking out the garbage, calling her grandmother, making tea, etc.

It is worth helping Ania to schedule her day, so that she is provided with the right daily rhythm (adequate time for rest and sleep, study). The scheme of the day, routine make the child feel safe, have a sense of constancy, which is essential for proper emotional development.



To ensure proper sleep, which is essential for effective school functioning, the use of the phone, TV, etc. should be kept to a minimum, especially in the evening. Anna should have the opportunity to unwind her emotions, reduce emotional tension by engaging in physical activities (swimming pool, bicycle, maybe together with a parent - then an additional benefit is spending time together, deepening the relationship, the teenager feels that she has the attention of a parent, that is important to her).

Relaxation techniques (breathing techniques, relaxation training, which are best discussed in collaboration with a school psychologist/educator) will be helpful in regaining balance.

Consider attending a "School for Parents". "This is a meeting program for anyone looking for a way to establish deeper and warmer relationships with their children or alumni. Its main goal is to support parents and educators in coping with daily interactions with children and young people. Learning the ability to communicate better, reflecting on one's own parenting attitude, exchanging experiences, are small steps toward a deeper relationship that gives satisfaction, a sense of mutual closeness. It's also learning to dialogue and forming bonds based on mutual respect. While teaching the skills of open communication in the family, the program simultaneously contributes to building a strong bond between parents and children, which (according to J. D. Hawkins' research) makes it also a preventive program. The School for Parents and Educators teaches not so much 'methods' as building relationships in the spirit of subjectivity and dialogue." (citation: School for Parents and Educators - Center for Education Development, ore.edu.pl).

It is advisable to stabilize the family system, frequent conversations about feelings especially difficult ones (sadness, longing, anger), asking Ania about her opinion on various topics ("What do you think about...", "What idea do you have..."), which will make the teenager feel important, her self-esteem will increase.

Conversations about so-called "adult issues" should be avoided in the presence of Ania, but also keep in mind that it is impossible to hide the changing family situation (parents' divorce) from the teenager. Clear, open communication, avoiding lies, hiding facts will allow Ania to maintain trust in her parents. It is worth sitting calmly at the table, talking about the decisions made, at the same time emphasizing that the parents' feelings towards Ania remain constant and unchanged. Ania should be allowed to express her feelings and ask questions and get answers to them. The information provided about the family situation should be adapted to Ania's age. If it's difficult for the parents, it's worthwhile to use the help of a psychologist, family mediation or family therapy, which will help consider and resolve difficult issues related to the divorce.

Anne will probably need time to accept the information about the divorce. So, it's good to be available to talk and help as needed, to be patient and flexible in adjusting to Ania's emotional needs. Comprehensive help is most effective, so it would be good if the school and the class teacher were informed of Ania's changing family situation.

Due to her recurring headaches, Ania requires consultation with a pediatrician to find or rule out a medical cause for her headaches.

Due to her lowered mood, difficulty sleeping, and decreased motivation, Ania requires consultation with a psychiatrist.

Teacher intervention – class tutor:

Ania requires psychological and pedagogical assistance in the form of teaching-equalizing classes in subjects that cause her difficulties, which will help her to catch up, if any. The information contained in the opinion of the Psychological-Pedagogical Counseling Center would be useful, so it is worth talking to her parents to go there.

It is recommended to adapt the educational requirements to the individual abilities and needs of the student by:

- allowing time for her to collect her thoughts during an oral answer, asking additional questions, directing her train of thought,
- extending the time on tests so that she can demonstrate her knowledge,
- extending the time allotted for independent work with text, tasks with content and written work, which will increase the chance of communicating the message more fully,
- discreetly controlling the course of Ani's work in class, calling attention when she loses concentration,
- when encountering difficulties, it will be helpful to mobilize effort, activity, support,
- giving positive feedback to increase her confidence.

There is contemporary research on educational burnout in students (Tomaszek K., Muchacka-Cymerman A. 2018), which is characterized by chronic fatigue, frustration, lack of motivation to learn, and affects students who have had high school achievement.

Educational burnout is fostered by school stress, a large amount of homework, pressure from parents and teachers to achieve, lack of support and conflicts with peers. Therefore, it is worthwhile to recognize Ania's educational situation in cooperation with her parents, educator/school psychologist. Individual conversations with Ania, in which Ania can point out possible conflicts between students and teachers, learning overload, too much homework, excessive demands, will be helpful.

It is important to prevent feelings of loneliness through, for example, inclusion in group activities and various ventures that require cooperation and collaboration, which will create a cordial and friendly atmosphere that will make Anna feel accepted and safe in the class team. The class should be offered an integration activity/trip, which will positively influence the climate of cooperation, create opportunities for direct sharing of achievements and successes, satisfy the need for recognition and approval, build confidence in the class team, provide opportunities to receive support from peers.

Ania's self-esteem should be fostered through frequent praise, recognizing contributions of work and effort, motivation and perseverance. During the oral testing of knowledge, it is advisable to create a kind and calm atmosphere.

It is necessary to be in constant contact with the student's parents - in order to exchange information, to determine joint teaching and educational interactions.

Ania's intervention:

Ani should be supported through individual meetings with a school educator/psychologist, where she can talk about difficult situations. During the discussions, it is worth focusing not only on her academic performance, but also on her strengths, to help build an adequate self-image. It's worth discussing the difficulties she encounters in the course of her school education and together with her establish a plan of action or strategies for dealing with them.

Systematic discussions with Anna will allow you to better understand her problems. It is worth discussing and practicing relaxation (breathing) techniques, developing coping skills to deal with stress and school pressure, for example, through relaxation techniques and time planning. It is worth referring to the period when Anna went to music school, when singing and playing the violin gave her pleasure. Perhaps it is these activities that will give her a break from difficult situations and help her cope with stress.

The school psychologist may suggest psychotherapy for Ania, since her situation is complex - it involves functioning at school, but also difficulties in the family home.

Psychological and pedagogical diagnosis:

The current development of the student's intellectual functions is shaped on average. Ania's strength is abstract reasoning, reasoning by analogy, which is developing above average. At a similar level runs the ability to quickly process information, search for stimuli that differ from others by certain characteristics.

Anna correctly acquires and applies verbal knowledge, creates, generalizes, compares concepts. Adequate for age is the ability to store, extract and process auditory information, as well as perceptual abilities to perceive visual stimuli, analyze and remember them. Anna grasps spatial relations well.

Perceptual-motor functions such as phonological memory, phonemic hearing, auditory analysis and synthesis, as well as eye-hand coordination, are developing properly. The rate of graphomotor work is less well developed.

The analysis of written work allows us to conclude that the student's work has an occasional number of errors, mainly typical spelling and punctuation errors (both during transcription, writing by ear and creating essays). She has a habit of self-control and self-correction.

However, she does not remember individual spelling rules - the rules for "rz", "ż", "ch", "h" require repetition. A greater increase in errors occurs during tests, which may be related to

emotional tension. When adjusting the pace of work to Ania's abilities, her writing is legible, while her lesson notes have such a reduced graphic level that they lose legibility. The student reads fluently, quickly, correctly. She understands independently analyzed content, although sometimes she needs additional questions.

Anna had no major learning difficulties in earlier stages of schooling - she demonstrated good and efficient arithmetical thinking, as well as age-appropriate mathematical skills and knowledge. Currently, she is not able to cope with solving mathematical tasks due to difficulties in concentrating attention, in following the flow of reasoning.

During the examination at the counseling center, it was possible to observe that Ania's mood is depressed, she looks physically tired (despite her declared sleep before the visit) - from the information obtained, it seems that her diurnal rhythm has been disturbed for some time. It was also apparent that the student's very slow pace of work made her unable to demonstrate her knowledge. For a long time, Anna has had difficulty in scheduling her studies - she starts repeating the material very late, and is tired in the morning. She is observed to have a high level of anxiety in school situations and low motivation to learn in the school system.

Psychiatrist:

Depressed mood, adolescence, high school demands, Ania's tendency to perfectionism, complicated family situation. Adaptive disorders. The student needs psychological support, individualization of the educational and educational process, systematic psychiatric control.

Conclusion:

Due to the complexity of Ania's situation (school, motivational and family problems), it is very important to cooperate with all the environments in which Ania functions and to be consistent in taking action. Regular meetings with parents, exchange of information on Ania's current mental state, as well as the provision of guidance for work at home by teachers, by parents of guidance, information on medical and psychological examinations performed and recommendations for work with Ania will be helpful.

Recommended literature:

Faber and E. Mazlish "Liberated parents, liberated children. Your path to a happy family" (2017). Media Family

Faber A., Mazlish E. "How to talk so children learn at home and at school" (2022). Media Rodzina

Tomaszek K., MUCHACKA-CYMERMAN A. (2018) "Selected environmental causes of burnout syndrome in middle school students". Pedagogical Quarterly

Zubrzycka E. (2020) "Surviving the storm. How to help a child when his family is in crisis". GWP

Case 3: Julka 7 years old, behavioral problems



image: Freepik.com

Parents:

Julka developed normally from the beginning of her life. She reached developmental milestones according to the norm. She began to speak words and sentences relatively quickly. She always wanted to be independent, to decide what she would do and where she would go. She is an open and communicative girl, easily establishing contact with adults and peers. Her emotional reactions to various events were often intense and volatile. Julka had problems dealing with unwanted emotions, did not tolerate losing and failures, always wanted to be first and best. It was easy to get her off balance and upset, especially when something not to her liking happened. Julka can't cope with anger, she gets irritated quickly, often cries, bites her lips, clenches her hands. Her reactions are sometimes very intense, sometimes she gets into hysterics, runs jumping, scatters objects.

It is very difficult for her to adapt to the requirements, the prevailing rules. Her parents rarely took her to public places, e.g., to the store, church.

She has often been admonished because of her inquisitiveness, hyperactivity and impulsiveness. She has trouble following instructions, often ignores them, and performs tasks in her own way. Julka is very active, she spends a lot of time outside the house, in the garden, on the playground. It happened that she stayed away from home without parental permission, ran away from the kindergarten and headed home. The girl is observed to have increased mobility, quick distraction, the need for many breaks and calling her attention. There were also moments of reverie, suspense, momentary loss of contact with the environment. During table work, the girl often gets up from the chair, stands next to it, sitting down on the chair she curls up her legs, leans against the tabletop, supports her head. In a situation of strong emotion, Julka usually goes to her room, where she calms down. She requires motivation to finish a task she has started, willingly changes activities frequently, shifting her attention to side issues. She is observed to have sensory hypersensitivity. Julka likes creative toys and cuddly toys, but is most fond of motor games. Among other children she competes, wants to be the best and show her abilities. Sometimes she is unable to accurately assess the risks of her behavior.

Teachers:

The girl is showing good progress in school skills. Julka recognizes most letters and numbers, begins to read short words, add and subtract in the range of 10. She is characterized by a good memory and a large vocabulary. She is curious about the world, likes to get new information to learn about things, asks many questions. She often changes the object of interest, is susceptible to distractions, especially sounds. Julka easily enters into conflicts, explodes with anger. She absorbs the attention of children, likes to be the center of events, wants to be accepted at all costs.

First-grade students played a thematic game during integration activities, assigning each other the role of different animals. Julka was supposed to be a sheep; however, she did not agree. She started saying uncensored words to her classmates, hitting and pushing them. The educator immediately reacted and tried to calm her down. Julka did not respond to admonitions, shouted uncensored words, and every attempt to approach the child resulted in running away and throwing objects off tables. The girl also threw objects in the direction of the teacher, while when stopped she bit him on the forearm. Left on her own, under the watchful eye of the educators, Julka calmed down after a while.

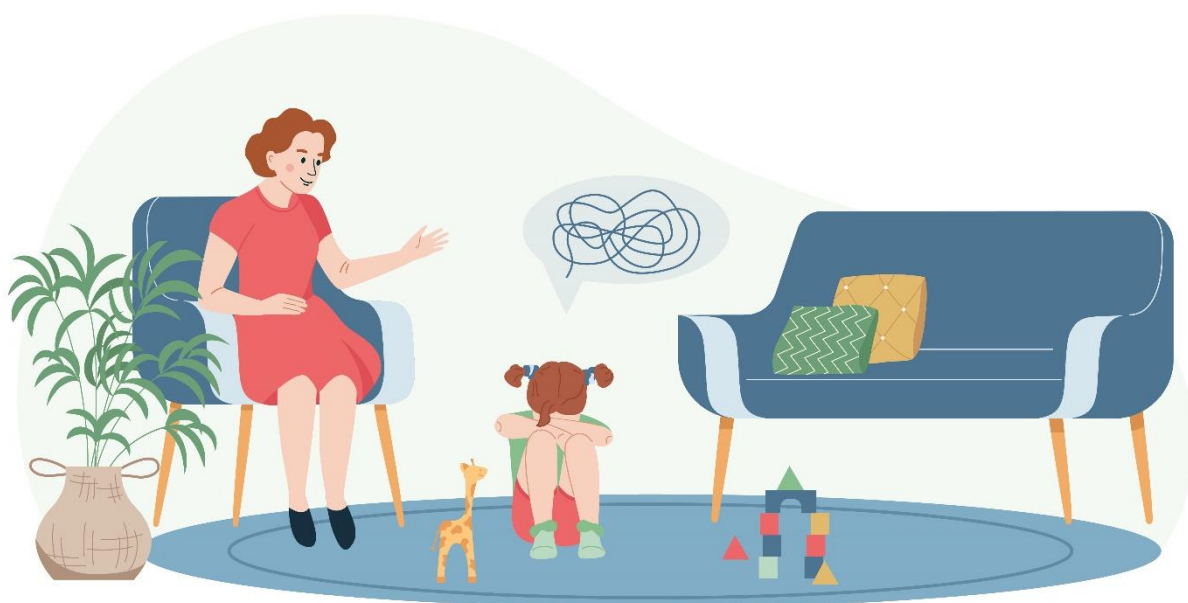
After a few days, the situation repeated itself during lessons. The children were supposed to draw slides, the girl became upset, scattered objects from the cabinets, shouted, kicked the teacher while trying to hold her down. The child shouted that she would take a gun and kill herself. The principal's intervention and removal of the child from the room resulted in her calming down. Excessive emotions (mostly anger) were also noticed when something not to her liking happened, e.g., she couldn't pencil a crayon or find a needed item in her backpack.

Julia's parents were called to the school and informed that the child had ADHD. On other days, the girl generally behaved correctly and did not cause problems. She adapted to the situation in class and the teacher's demands. There were, however, situations of concern, such as thoughts of resignation and a sense of lack of understanding by those around her.

Julka:

Julka likes to go to school, enjoys spending time in the company of older children, is interested in everything others say, observes her surroundings, likes to try new things. She is constantly on the move, often spends time out of the house, does not like to sit at a table and work in silence. She is easily distracted by numerous distractions and quickly loses interest. She manifests nervous movements, is unable to sit still, squirms in her chair. The girl recognizes her difficulties, but is unable to say why she behaves this way.

Julka is eager to make contact, talks a lot, mostly about herself, interrupts the statements of others. She collects mascots, enjoys creative toys, but is happiest when spending time actively. She invites other children to play tag, hide-and-seek or makes up games herself. Eagerly plays board games with parents, then the troubles associated with the situation of defeat and loss are evident. She cries and gets angry when something doesn't work out for her, wants to be first and best at everything. Julka gets upset quickly, reacts impulsively and often can't control her behavior. She calms down in a place of seclusion, cut off from other stimuli. She has trouble with self-regulation and high attention span. She finds it difficult to listen to instructions to the end and follow certain rules and directions. When no one is watching she performs tasks in her own way and exceeds established norms. Julka is very independent, is most likely to act individually, and finds it difficult to cooperate with other children. She would like to have a sibling, although she is reluctant to share with others.



Parental intervention:

Due to the diagnosis of symptoms of psychomotor hyperactivity, it is advisable to continue care at a mental health clinic for children and adolescents. Julka should be under the constant care of a psychiatrist, who may decide together with her parents to include pharmacotherapy.

It is advisable to include specialized therapy designed for children with ADHD. The Association for Children with Attention Deficit Hyperactivity Disorder offers sensory integration therapy, biofeedback therapy. In addition, parents can benefit from psychological consultations, group classes for children and hand therapy.

Sensory integration therapy involves providing the child with a controlled dose of sensory sensations, the intensity of which is adjusted to the nature and severity of SI disorders, which in Julka's situation includes sensory hypersensitivity.

Biofeedback training involves monitoring and controlling physiological processes (brain waves, muscle tension). It is used in the therapy of children with concentration disorders, hyperactivity and low resistance to stress.

Hand therapy involves improving precise movements of the hand and fingers, aimed at engaging the entire hand to perform various manual tasks.

It is also worth taking advantage of Workshops for Good Parents, which are intended for parents of children with ADHD, concentration disorders, children's outbursts of anger or oppositional and rebellious behavior. During the workshops, parents gain practical knowledge about behavioral techniques for working with children, which they can practically practice with their children at home.

Julka needs a stable family environment with a clearly defined system of rewards and consequences. During psychoeducational meetings regarding her behavior, you should work on the ability to set boundaries, develop empathy and experience difficult situations in a way that is safe for the child and the environment.

Parents should also consider participating in therapeutic meetings to try to understand what is causing their daughter's aggressive behavior, whether she is experiencing emotional difficulties, whether she is worried about something, whether she feels safe in her natural surroundings.

It is important to teach Julka how to deal with defeat. In a situation of failure, she should be allowed to show emotions in a safe way that does not violate the well-being of any person. It is worth planning for situations in which something goes wrong and requires correction. For this purpose, you can also use therapeutic stories and share personal situations in which parents failed. Julia should be convinced that unsuccessful attempts are part of acquiring every skill.

It is important to consistently apply the recommendations by both parents and teachers. She must know for what behavior she is entitled to privileges, and for what behavior she loses them or receives negative consequences.

Teacher intervention:

Due to the severity of the symptoms of hyperactivity, impulsivity and attention disorders, the girl needs to divide the material into smaller parts and recall attention while performing tasks. It is also important to provide support in reading the command, or you can divide the command into several small stages.

The girl should sit in the first bench so that the teacher can supervise and check her work. It would be good for her to be accompanied by a quiet student, but not her best friend. It is worth making sure that she sits away from distracting elements (windows, doors, colored boards). Only necessary items should be available on the table, e.g., notebook, pencil, exercises.

Due to the variable pace of work, the girl may need to extend her working time. Julka's tasks should not be longer than her current attention span.

She should be provided with breaks during which she can move around, e.g., approach the blackboard, walk to the back of the class, hand out materials to the children.

It is important to distinguish behavior resulting from symptoms of hyperactivity from other difficult behaviors and to apply the principle of not punishing for ADHD symptoms. You should maintain a balance between the number of comments directed at her to correct her behavior and the amount of praise describing the desired behavior.

It is worth planning a specific place of silence in isolation, so that Julka can regulate her emotions in a safe place, e.g., a quiet corner at school.

It is necessary to set clear norms and rules of conduct at school and to respect them consistently and at the same time gently. Julka should know exactly what requirements are placed on her and how exactly she can fulfill them.

Develop a short set of classroom rules of conduct, write them down, and post them in a visible place so you can refer to them quickly. The rules of conduct apply to all children in the class, so Julka will not feel singled out.

The girl should be presented with role models and examples of behavior that she can imitate. In addition, it is necessary to organize educational situations in which the girl, in interaction with other peers, will be able to learn to perform various social roles, e.g., helping others, performing tasks in pairs or small groups.

In a situation of increasing emotional tension, which may lead to an escalation of difficult behavior, an individual calming procedure should be developed, e.g., moving to the back of the room, minimizing verbal contact, being able to safely release emotions, staying in a place of isolation.

At school, the girl should be provided with psychological and pedagogical assistance in the form of classes that develop social and emotional competences. These meetings will contribute to the development of pro-social skills, building a system of values, acquiring empathy skills, assertive behavior, and coping with emotional tension.

Julka should be encouraged to take up activities that require cooperation with other children, involve her in participating in class and school events, and be active in extracurricular activities. In addition, care should be taken to ensure that the proposed exercises sufficiently involve the girl in working to the best of her abilities, and to use tasks in the sphere of her immediate development.

It is worth engaging the girl in tasks that pose a challenge to her, e.g. involvement in class self-government, volunteering, participation in competitions. Julka can take part in activities of interest groups, which will help her focus on developing very good intellectual abilities.

Child intervention

The girl needs therapeutic interventions aimed at developing adaptive ways of coping with difficult situations. Individual therapeutic meetings should also include problems in peer relationships and ways of reacting and expressing emotions in experienced situations. Participating in group social skills training will also be helpful. Such classes will allow Julka to learn effective ways of social functioning. Social skills training includes communication exercises, coping with difficult situations, recognizing, naming and expressing emotions. Additionally, Julka's participation in Aggression Replacement Training is recommended, which will help correct aggressive behavior. These classes teach the ability to control one's own impulsivity, apply pro-social skills and support the development of moral thinking. Due to sensory hypersensitivity, diagnosis and the resulting sensory diet and sensory integration therapy are recommended.

Together with the girl, you should develop an individual set of ways to regulate excessive emotions, e.g., going to a separate room, holding her hand, giving her a strong hug, gently rocking her.

It is worth trying mindfulness training, which involves exercises and games that teach you how to control your thoughts and emotions and be "here and now". The exercises involve stopping to notice everything that is related to the sensations from the body, thoughts and emotions. Thanks to this, the child can improve the ability to concentrate and better cope with difficult emotions, tension and frustration.

A code of anger should be introduced, the same at school and at home. The Anger Code contains the following elements:

- Everyone has the right to feel angry.
- You can express anger in the following ways (examples).
- You must not express anger in the following ways (examples). If such inappropriate behavior occurs, we apply previously specified consequences.

The anger code should be placed in a visible place so that it can be easily referred to. Due to difficult situations in the area of social contacts, Julia's participation in selected extracurricular or out-of-school activities should be considered, which are also therapeutic in nature and adapted to the child's interests, e.g., dance, art, music, sports classes.

Results of psychological and pedagogical research:

Julka had a higher than average level of intellectual development. The girl's definitely strong point is thinking based on specific, thematic material, which is developed at a very high level. The girl perfectly creates the representation of concepts and detects analogies between objects. It correctly identifies common features of abstract objects, detects relationships between them and includes elements in a set based on a selected feature. Visual perception and spatial imagination are at the upper limit of the norm. Julka can organize, analyze and synthesize visual stimuli. Effectively uses imaginary material and solves problems related to spatial reasoning. Direct visual memory and lasting verbal memory develop similarly. The girl keeps visual stimuli from the environment in her perceptual field and is able to store and process them in working memory. However, direct auditory memory is low, which is related to concentration of attention.

Julka has extensive knowledge of the surrounding environment and is willing to talk about various topics. She has mastered colloquial concepts and is familiar with her immediate surroundings. At her age, visual and motor functions are developing. The girl knows directions well and distinguishes between the left and right sides of the body diagram. Correctly determines spatial relations. She can analyze and synthesize the sounds of shorter words, but she still has difficulty skipping selected sounds. Gross and fine motor skills develop appropriately to the child's age. Julka willingly undertakes physical tasks, except for those requiring manual work at the table. There is a tendency to act quickly, switch attention and actively explore the environment.

Medical test results:

Julka is under the care of a mental health clinic for children and adolescents. She was diagnosed with Attention Deficit Hyperactivity Disorder F 90.1 Attention Deficit Hyperactivity Disorder includes problems with maintaining attention, difficulties in controlling impulsivity and hyperactivity that is excessive in relation to the child's age and level of development. Children with ADHD are restless, have difficulty staying in one place, are easily distracted, cannot wait for their turn, and have difficulty following subsequent instructions. They often switch from one unfinished activity to another, interrupt others and seem not to listen to what is being said to them. They may engage in dangerous activities without considering the possible consequences.

The girl will probably undergo pharmacotherapy and psychotherapy.

[Recommended literature:](#)

Kołąkowski A., Wolańczyk T., Pisula A., Skotnicka-Chaberek M., Bryńska A., (2022) ADHD - attention deficit hyperactivity disorder: a guide for parents and educators, GWP

Miller K. (2022) Me and my ADHD: 60 exercises that will help your child self-regulate, concentrate and succeed, GWP

Kołąkowski A., Pisula A. (2021) A way to deal with a difficult child, GWP

Snel E., (2022) Mindfulness and peace of the frog, CoJaNaTo Publishing House

Stążka-Gawrysiak A., (2022) Self-Regulation. Stories for children about how to act when emotions take over, Sign

Case 4: Kacper, 14, food selectivity

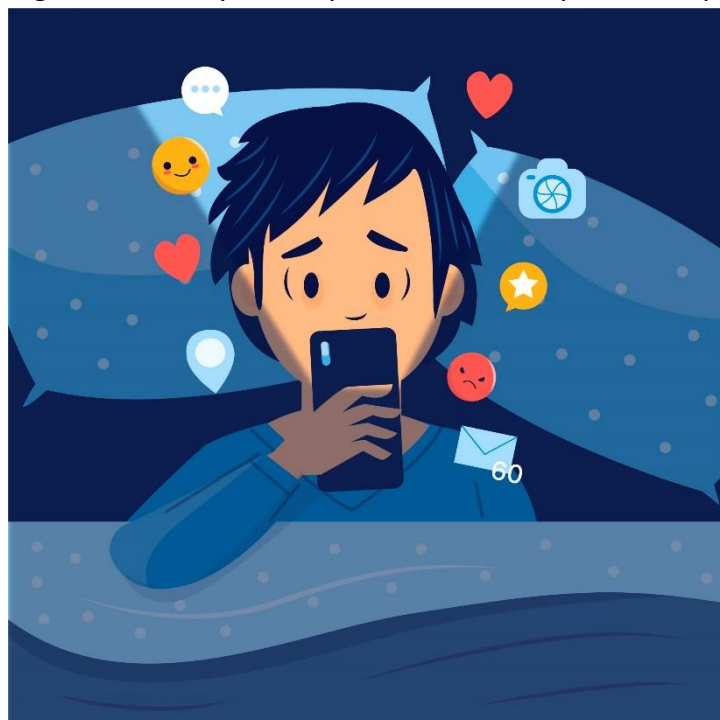
Parents:

Kacper developed normally and was rarely ill. However, from the very beginning he had problems with eating. He only ate his favorite foods, no one could convince him to eat meat. He ate mainly potatoes, dumplings, sausages, and white bread rolls. Sometimes he will eat a sandwich with yellow cheese, but without butter. The only fruit he eats is a banana. He preferred only milk and black tea to drink.

Kacper is my 2nd child, from my 2nd relationship. My first husband died suddenly in an accident. Then I was alone for a long time. I knew Kacper's father for a short time. I thought he would be a man who could be a father to my older son. Unfortunately, it turned out that we couldn't be together. The son has no contact with him, and the father does not strive for a relationship with him either. We moved to Rzeszow when Kacper was 3 years old. My older son helped me a lot in taking care of his younger brother. I had to go back to work to support my family. I work shifts in a large hypermarket, but the nights are the worst. Kacper went to kindergarten and did quite well. The only thing that worried me was frequent outbursts of anger and crying for no apparent reason, but that's normal at this age. A year after the move, the mood changes subsided.

When Kacper went to school, he already knew how to read and write. He was always not very careful when writing. He liked comics the most. He often watched cartoons.

Unfortunately, my shift work meant that he had to stay with his older brother, who had no patience for him and let him watch cartoons. It was a difficult time for me because I had night shifts every few days. When I had days off, we spent every evening together and then



everything was fine. My son studied well and had no major problems.

The problems started during the pandemic. He spent all day on the computer because school was remote. He played with his friends, often until late at night. Locked at home, he didn't go anywhere. He didn't feel the need to leave.

Returning to school was very painful for us.

During the last vacation, Kacper went to bed very late. He played on the computer for a long time, but it was holidays and I didn't mind it. He slept until noon. School was now a

nightmare. I wasn't able to wake him up at 8:00 in the morning. He was late for school every day. He came for the 2nd and 3rd lessons. He slept on the bench and was rude to teachers. About 4 lessons, he felt better, participated in the lesson, but withdrew more and more from the peer group. There was a lot of anger and tension in the house. Nothing helped. He reported that he couldn't fall asleep earlier. In the evenings, he walked around the apartment until late and complained that he couldn't sleep. My friend advised me to ask the doctor for some sleeping pills. The teacher called me for an interview. She stated that this situation could not continue. In the morning he is sleepy and hears nothing, there is almost no contact with him. He gets increasingly poor grades. A year ago, his grades were good, sometimes very good, and now he has almost only poor grades. The teacher asked me if there was anything going on at home. He suspects that he may be under the influence of drugs. I didn't notice anything. Kacper definitely doesn't smoke. I couldn't answer the teacher what was really happening.

I don't have such a good relationship with my son anymore. We often argue about school, bedtime, and computer time. I try as a mother. I buy him what he likes to eat, and he is very picky. He mainly likes fast food and cola. It's good that at least he drinks milk (only in the morning). He spends his time mainly at the computer. Since the pandemic, he has been reluctant to go out. He has a few friends, but one friend with whom he plays online. They rarely see each other because I don't let him go out or invite friends over when I'm not home. In the evenings, he sometimes reads a book and usually watches some comedies and TV series. He is interested in old cars and watches many videos and programs on this subject. I can't believe he's taking anything and he denies it. The family doctor suggests depression, so we are waiting to see a psychiatrist.

Kacper:

My name is Kacper and I am 14 years old. I don't like studying very much, but that's not my only problem. I don't think I'm capable. I was always doing something wrong. For example, I can't write nicely. I don't know what I could do with my life, but I guess I'm not worried about that now. I like old cars. I would like to buy them and make them rideable again. Mom works a lot. I don't know my father and I don't think I want to know him because he doesn't care about getting to know me. I have an older brother who is very smart, but generally cool.

I have a few friends with whom I play and talk about what interests us. I have always had problems with eating. I don't like meat, especially for dinner. Fruits and vegetables disgust me. My mother always tried to feed me some vegetables. I was really nervous about it. Whenever she asked me to try something, I got very stressed. Some foods are disgusting and smell terribly. For some time now, my mother has given me a break and no longer bothers me with healthy eating.

I don't like getting up for school. There's no point in getting up at night. I can't open my eyes and I don't know why my mother is shouting at me. I go to school, but only because they tell me to. I fell asleep during class a few times and they made fun of me. I felt stupid and very angry. I also received some comments because I recently said what I thought and they probably got offended. I would like to return to remote lessons.

I don't feel like sleeping in the evening. I tried going to bed earlier, but I stayed in bed for several hours. Then I watch videos and sometimes read. I also like comedies because they are funny and fun to watch. Then my mood improves. I don't understand why anyone has a problem with me. School is the worst. I think I'm different somehow.

Teacher - class tutor:

Kacper is a talented boy, but he does not always work systematically. He did much better in the first stage of education. He showed interest in the lesson and asked many questions. He didn't always bring homework, but those were occasional. He established appropriate relationships with other children. During the first stage of education, the teacher reported difficulties in writing. The student has trouble keeping within the lines of the notebook and writes simplified letters that do not keep the correct shape. From grade 4 onwards, the boy's handwriting became increasingly difficult to read. Teachers ask student to read the content written during written assignments and tests.

Currently, Kacper has many absences and delays, which happen almost every day. He is often unprepared for lessons. The biggest problem concerns poor contact with the child for several hours in the morning. Kacper is lying on the bench; he has fallen asleep several times. The problem is so serious that this behavior significantly interferes with his functioning at school. He has already received many failing grades. He is physically at the lesson, but he does not receive the messages. Sometimes he responds rudely to the teacher. He uses vulgar words. Teachers also observe isolation from peers. Unfortunately, it happened many times that Kacper was the object of ridicule and laughter when he fell asleep during class. The child's mother is informed about each such situation.

Intervention by the school:

Due to the child's increasing difficulties in functioning at school and poor academic progress, a meeting was organized during which, together with the mother, we wondered why this was happening.

Kacper's mother willingly cooperates with the school and cares for her son. She did not report any suspicions regarding the boy's use of psychoactive substances. However, she confirmed that educational difficulties were escalating more and more.

The school suggested an examination at a psychological and pedagogical clinic, or contact with a family doctor who could order basic tests to exclude any disease factor in the child's behavior. The teacher also suggested contacting a child psychiatrist who could help

determine the cause of the deterioration of the boy's functioning (the school psychologist suggested symptoms of depression). It was suggested that students could have conversations with a psychologist at school. One meeting took place on a day when the boy fell asleep during class and then became angry when the class laughed at him. He was reluctant to cooperate because he didn't want to say what happened. The class teacher suggested preparing information from the school about the student's behavior for diagnostic purposes.

Intervention – mother:

The mother, concerned about the deterioration of her child's functioning and the increasing difficulties in her relationship with her son, decided to take action to help her child. She submitted an application to a psychological and pedagogical counseling center to determine the causes of the child's difficulties.

The mother also decided to visit the family doctor, to whom she reported the disturbing behavior and provided instructions from the school. Additionally, she made an appointment with a child psychiatrist (in accordance with the guidelines of the school and diagnosticians from the psychological and pedagogical clinic).

The child's mother decided to closely monitor her son's behavior during the intervention and diagnostic tests. If possible, he will give up night shifts to spend as much time as possible with his son.

Medical studies:

At the request of the family doctor, basic tests were carried out, which did not detect any major abnormalities. The level of iron in the blood was found to be reduced and pharmacological treatment to supplement iron deficiency was implemented. The food selectivity and deficiencies resulting from an incorrect diet requires additional supplementation.

A consultation with a child psychiatrist ruled out the suspicion of depression. The doctor noticed changing moods and difficulties in relationships with peers typical of adolescence. This period is a time when the child undergoes many very important changes, both biological, social and, above all, emotional. It is also a difficult time for parents. Additionally, the time of isolation meant that the child did not acquire the appropriate skills to cope with a larger group. The doctor suggested an examination for sensory integration by a suitably qualified therapist due to the symptoms of difficulties in this area. He excluded other diseases that would significantly affect the child's observed difficulties.

Research results at the Psychological and Pedagogical Counseling Center:

There is an above-average level of general intellectual development. Kacper's strengths include the ability to store information in long-term memory and retrieve it from it, which is

fundamental for the acquisition and reproduction of school knowledge. At the upper limit of average results, fluid intelligence is formed, i.e., the ability to recognize relationships between elements and rules in relation to the pattern in a task. Kacper correctly perceives relationships and is able to cope with logical thinking and abstract reasoning using concrete and pictorial material. The speed of processing, spotting differences and the ability to ignore unimportant elements are at a good level. The ability to remember a sequence of heard numbers and letters after a short-term delay (short-term auditory memory) is similar. Kacper's age-appropriate ability to acquire and apply verbal knowledge develops by classifying, searching for similarities, combining into categories and creating general concepts. The level of short-term visuospatial memory responsible for the ability to differentiate and remember shapes and spatial relationships is average. Visual processing, i.e., the ability to receive visual stimuli and analyze them, is relatively weaker, but still within average results.

In the emotional sphere, the boy shows slight immaturity. The boy shows problems in difficult situations, such as failure or criticism. Due to the strong need to strive for the best possible results, when difficulties arise, the person cannot cope, becomes frustrated, avoids or withdraws from tasks. He is quite impulsive in his actions, finds it difficult to concentrate on a difficult task and adapt to time constraints.

In terms of perceptual and motor functions, auditory perception and phonological memory develop properly. Graphomotor performance is borderline normal, but the writing hand becomes tired quite quickly. The deficit includes eye-hand coordination.

The student has correctly mastered the reading technique, maintained a fast pace, and correctly understood the text read independently. He makes occasional mistakes when writing. The graphic level of the writing is significantly impaired and its notes are difficult to read. Kacper can construct an independent written statement on a given topic, correct in terms of content and composition. In mathematics, he has mastered memory and written counting techniques, minor problems are observed when solving multi-stage text and geometric tasks.

Additionally, there are disorders in the reception of sensory stimuli (olfactory hypersensitivity) and food selectivity, which significantly affects the selection of foods in the diet. The boy prefers only his known and favorite dishes, he is reluctant to stay in rooms with intense odors, such as cloakrooms, fruit and vegetable stores or supermarkets, so he is reluctant to engage in activities in these spaces. It is important to work on regulating your child's diet.

It is advisable to adjust educational requirements and provide the child with psychological and pedagogical assistance at school in the form of teaching and compensatory classes. An individual teaching and educational approach to the student is recommended, and graphomotor skills should be improved when working with them. It is advisable for Kacper to conduct self-education work at home under the supervision of adults, aimed at improving

the level of graphic handwriting. For this purpose, you can use exercises proposed by the Polish Dyslexia Society and/or various multimedia programs. A follow-up examination in one year with documented writing work is recommended.

At home, the boy should be motivated and mobilized, and the manifestations of desired behavior should be rewarded and appreciated. It will also be helpful to introduce a clear system of rules and norms that will be consistently followed in everyday life.

You should help your child develop ways of dealing with difficult situations, coping with stress and controlling negative emotions. Problem situations should be discussed with the child so that he can make decisions and choices and build rational solutions to problems. At every opportunity, you should strengthen your child's positive thinking about himself and raise his self-esteem.

It is recommended to shape the child's cognitive curiosity through various types of extracurricular activities, programs, popular science films, attractive aids for enriching knowledge, didactic games, etc.

Conclusions and recommendations resulting from the intervention:

The time of social isolation during the pandemic significantly contributed to the boy's development of a way of spending his free time. Therefore, the student preferred to stay in his room, a safe place. No autism spectrum disorders were detected. Psychological tests indicate very good intellectual capabilities of the child (higher than average intelligence quotient).

Adolescence is a turbulent time for most teenagers. An increased intensity of emotional reactions, attempts to build one's own idea of life, personality formation, and beliefs are then observed. Abstract thinking, increased reflectivity and criticism. This is a very difficult moment also for parents, because what they have developed for many years suddenly ceases to matter because their child is looking for new ideas for life. A teenager needs more freedom, a sense of making decisions independently and, above all, being taken seriously. A young person wants a lot of attention, but in a different way than a small child, indirectly. One could say that he was rather distant, but close enough to accompany him in his everyday difficulties. You also need to remember about the dynamic change in external appearance. The pubertal growth spurt in young men occurs between the ages of twelve and fifteen and causes weight gain and height gain of up to 20 cm. During adolescence, the body, proportions, face and facial hair change.

Due to graphomotor difficulties and reduced legibility of handwriting, it is recommended to undergo hand therapy and undergo a follow-up examination at a psychological and pedagogical clinic to determine whether dysgraphia may be the cause of writing difficulties. A carefully conducted interview, observations and tests excluded the diagnosis of depression or addiction to psychoactive substances. An important cause of the child's problems with falling asleep turned out to be the fact that the child often drank drinks with an increased

amount of caffeine (cola, energy drinks) in the afternoon and evening. Excluding them from the diet in the evening significantly influenced the leveling of activity during the day and, above all, reduced problems with falling asleep. The boy was not aware that drinking such drinks late at night would adversely affect his sleep hygiene. The mother's frequent absences in the evenings and at night caused the boy to additionally cross boundaries and not follow his mother's instructions from a distance. This whole situation caused difficulties in falling asleep and a shift in the time of wakefulness and sleep.

Sensory processing studies confirmed olfactory hypersensitivity and food selectivity. It was recommended to contact a dietitian in the future and work on healthy eating and the teenager's awareness. The sensory integration therapist conducted psychoeducation on sleep hygiene and the importance of an appropriate diet for the development and functioning of the human body. The student quickly cooperated and got involved. He asked to see a dietitian and offered the possibility of preparing some of his meals himself. After a few weeks, the child's functioning improved and his mood improved. Kacper was also more and more willing to go out with his friend and they also met at his house (until now he couldn't invite his friends if his mother wasn't at home). He asked his mother to buy a bicycle. Due to graphomotor difficulties and reduced legibility of handwriting, it is recommended to undergo hand therapy and undergo a follow-up examination at a psychological and pedagogical clinic to determine whether dysgraphia may be the cause of writing difficulties.

Recommended literature:

Ayers J., "Child and sensory integration" (2015) Harmony.

Dutkiewicz A., "Eating difficulties in children and teenagers", (2022) Natuli - children are important.

Faber A., Mazlish E. "How to talk so that children learn at home and at school" (2022). Media Family.

Odowska-Szlachcic B., Górka-Pik N. "Sensory strategies in eating and speaking) (2020) Harmony.

Links:

<https://dziecisawazne.pl/bulka-obiad-sniadanie-kolacje-neofobia-zywniowa/>

<https://dziecisawazne.pl/moje-dziecko-nie-chce-jesc/>

Case 5: Kuba, 12 years old, peer violence

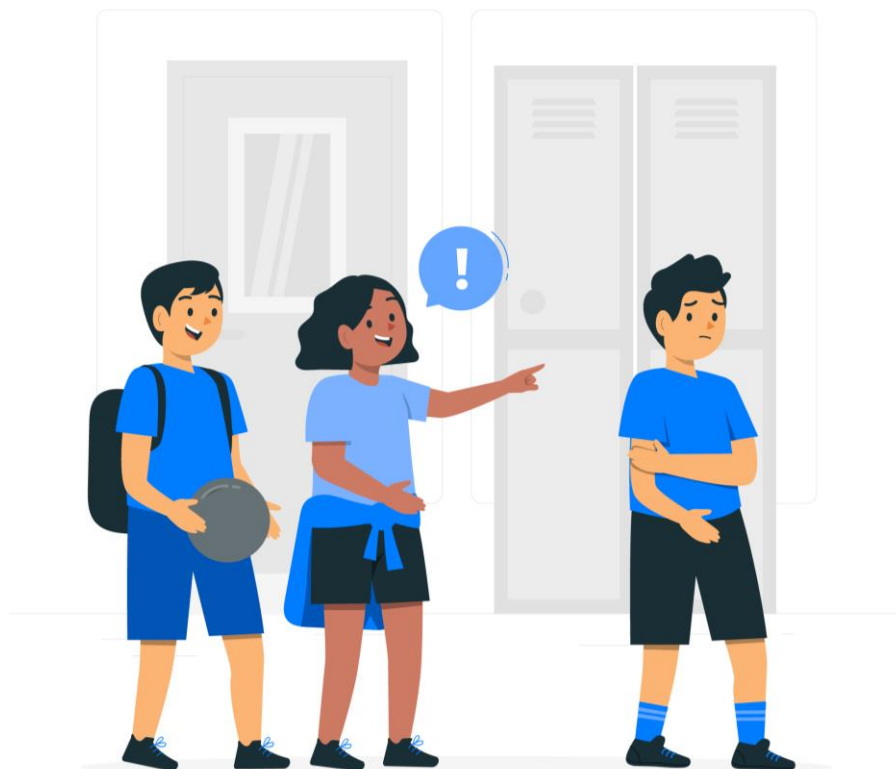
Parents:

Kuba developed well from the beginning of his life. At the beginning of his preschool period, the boy was often sick, his immunity was weakened and he was prone to infections. For this reason, later i.e., from the age of 5, he started attending kindergarten. He took longer to adapt to the new situation, carefully established relationships with children, willingly played alone or waited for other people's initiative. He has two older siblings, a sister and a brother, who are protective of him, but only at home.

He experienced stressful situations very much and did not show any emotions. Kuba has been learning letters and numbers for quite a long time. From the beginning of his schooling, he had difficulties in mastering school skills. He devoted a lot of time to studying and required support and encouragement when doing his homework. His parents and older siblings constantly helped him learn and alternately accompanied him while solving tasks. Excessive tension associated with educational failure was observed. Kuba did not want to talk about his school problems. He had difficulty remembering and understanding what he read literally. He required constant support and assistance in performing exercises. Parents also observed major problems with concentration and remembering while learning at home. Kuba was easily distracted, he was hyperactive, fidgeted and constantly stood up while studying. After completing grade 3, he moved to another school due to a change of place of residence.

The parents of Kuba, who is currently a sixth-grade student, came to school to inform the teacher about the unpleasant event. Their son was in the toilet during a break before a physical education lesson and was recorded on a mobile phone while were performing physiological activities. Kuba, with a great sense of shame and humiliation, did not come to school for the next few days. The parents also told that the boy did not feel accepted in class. His classmates ridicule him when he shows up during classes, they tell him to be silent, they say unpleasant words, and during breaks he is isolated by his peers.

Kuba likes to spend his free time alone or with his siblings at home, playing computer games. He is reluctant to talk about himself and situations that concern him, except for light and casual topics.



Teachers:

Kuba joined the current class two years ago, in the fourth grade. Previously, he attended a small school in a small town. The certificate obtained at the end of grade 3 indicated average mastery of school skills. Kuba took quite a long time to adapt to the new class. From the beginning, he kept to himself and was reluctant to engage in tasks aimed at getting to know his peers better. He was characterized by low perseverance and a fast pace of work to finish the task he started as quickly as possible.

During oral responses, the boy sometimes speaks unclearly, but when writing, he builds simple and short sentences. He has trouble staying engaged during classes. Additionally, the boy is withdrawn, excessively distracted and tired, sometimes even drowsy. Kuba seems absent-minded during the lesson. When asked, he gives laconic answers, thinks for a long time and looks for the right words. The boy speaks too quietly and not clearly. Sometimes he gets irritated by the validity of questions and instructions. He nervously asks why he should perform a specific task and questions its meaning. He likes to attract attention to himself and comments on tasks while they are being performed.

The student does not have closer relationships with his classmates, he sometimes talks to selected boys. It was noticed that he was trying to submit to them in order to be accepted. Last school year, Kuba was observed making unusual and repetitive movements, especially in situations of excessive emotional tension. The greatest difficulties concern learning Polish

and foreign languages, but he copes better with tasks requiring manual dexterity, for example during technology classes.

Kuba receives psychological and pedagogical assistance at school at the request of his parents due to difficulties with reading and writing. He attends didactic and remedial classes in Polish and the "Master of Spelling" classes. The parents are interested in the boy's progress, they attend class meetings and ask about his learning progress. They cooperate with teachers in situations that require it.

Jakub:

Kuba believes that when he was little, things were better for him, especially at his previous school. Now he doesn't like going to school, he is irritated by the younger classes, he prefers to stay at home. He enjoys playing computer games and football. He is the worst at reading, often does not understand what he reads, prefers to read summaries and listen to audiobooks. He studies at home for about an hour, but rarely alone, usually with his mother or brother. He goes for lessons in Polish and mathematics. Technology and mathematics are best learned. He doesn't like to answer when he is asked questions at school, but sometimes teachers let him pass the material after class.

Kuba claims that his class is okay, but sometimes "weird" because they disrupt the lesson and sing the same songs over and over again. He thinks that most of the girls in his class are weird too. He would like the holidays to last longer, to have more time off from school, then he would go swimming or skiing. He hates learning because, as he says, he has a poor memory. He doesn't know what he wants to know, he can't answer questions. He is afraid of "dark dreams", then he has a headache.

At home, he likes to help his parents, he helps his mother with cleaning, and with his father he repairs various devices. His parents get angry when he says he has a bad memory. Kuba reports that he still has some penalties and bans, most often they do not allow him to play on the computer. When things go badly, he gets discouraged and feels resigned.

He went to a psychologist, but he thinks it is pointless. He doesn't understand why his colleagues behave this way.

Parental intervention:

A psychiatric examination at a mental health clinic for children and adolescents will help identify Kuba's current well-being.

Previously observed adaptation difficulties, problems in communicating with the environment and atypical behavior in situations of emotional tension may result from the health condition. Due to the tendency to isolate oneself and problems in establishing social relationships, tests should be carried out to rule out Asperger's syndrome.

The boy's current emotional state may also indicate symptoms of depression. His symptoms include low mood, depression, anxiety, withdrawal and avoidance of school. The effects of experienced violence may resemble a depressive episode.

Kuba's parents, as well as his siblings, should receive help in understanding the situation of violence he experienced at school, not only in the context of crisis intervention, but also in taking supportive actions.

Systematic conversations with a psychologist may include topics related to peer violence - what are its causes, course and possible consequences for the child during adolescence, as well as understanding their role in the process of Kuba coping with the effects of school experiences. It is important to provide support from the family, eliminate the feeling of loneliness and being marked by a situation of violence, and show what are the ways out of a situation of violence.

It is important to conduct psychoeducational meetings aimed at developing the ability to express one's emotions, feelings and needs. It may be helpful to participate in "School for Parents" meetings, during which the topic of deepening relationships with children is discussed. Exercises as part of the "School for Parents" lead to learning better communication skills and reflection on parental attitude. Such meetings are usually held in clinics, schools, and support groups.

Parents should talk to Kuba about who, when and how he can ask for help. You should ask him questions - who among the adults at school does your son trust the most? Which school employee does he value and like the most? These questions will help you plan which adult Kuba can tell about another difficult situation for him, and who to turn to for help.

You should help him define specific support strategies in difficult situations, for example – in the event of aggressive behavior on the part of his colleagues, Kuba can immediately go to a trusted person to report it. You can also use an international non-verbal signal to report situations of violence. The "help me" sign discreetly shows a call for help. This sign should be made with your hand – show your open hand, then make a fist with your thumb inside.

It is also advisable to deepen the diagnosis of the son's school situation, especially in the context of previous school experiences and his adaptation to the current school. Perhaps certain factors influenced his position in the class (changing schools, lack of acceptance in the class, omitting Kuba because he was different, learning problems).

It will be useful to carry out a diagnosis in a psychological and pedagogical clinic aimed at determining the boy's strengths and weaknesses, recognizing his intellectual capabilities, as well as deepening the assessment of the state of socio-emotional development.

During the meeting of the parents of Kuba's class, a talk should be held to deepen the parents' awareness of what acts of aggression their children encounter, both online and in everyday situations. It is important to sensitize them to skillfully monitor what their children do online.

Teacher intervention

After revealing a situation of violence, the circumstances of the event should be determined i.e., identifying the perpetrator, witnesses of the situation, materials and the method of their dissemination (in Kuba's case, recording a video with his participation). However, the most important thing is conversation, advice and support for the victim of violence.

It is important to precisely secure evidence. The school principal and the school pedagogue/psychologist should be notified immediately. The situation should be analyzed in the presence of the teacher/psychologist and the school principal. The parents of the injured student should be informed about the incident, the school's actions taken and provided with advice and assistance. First of all, provide aid to Kuba and constantly monitor its situation. The parents of the perpetrator and witnesses of violence must be notified and informed about further proceedings and consequences towards the child. The student should also be obliged in writing to stop acts of violence and remove the materials from the Internet. Next, psychological help should be provided for the perpetrator.

It is necessary to conduct individual conversations with students in the class in order to diagnose the situation and to conduct sociometric tests and take appropriate actions based on them. Sociometric research mainly concerns the analysis of relationships between students in the classroom, their position in the group and the acceptance of individual students. The results of the diagnosis carried out in the classroom are the basis for building a plan to improve relationships between students, to include and strengthen the position of rejected or isolated people, and to involve people with the status of sociometric stars in this process. Examples of sociometric research are the "Guess Who" and "Plebiscite of Kindness and Reluctance" techniques.

It is worth carrying out preventive activities not only in Kuba's class, but also throughout the school. Their aim is to learn the rules of use and risks associated with the use of communication technologies. Students should know how to use the Internet safely so that it does not become a tool of peer violence and learn the consequences of risky online activities.

If the school has a developed procedure for responding to peer violence, it should be used. This procedure includes an algorithm for intervention in the case of peer violence and covers both students, parents, teachers and other school employees. The procedure should include ways of providing support to the victim of violence, securing evidence and determining the circumstances of the incident, as well as drawing consequences against the perpetrator of violence and working to change the attitude of students.

It is worth inviting a representative of the police or the justice system to an educational lesson in order to make children aware of the legal consequences for perpetrators and witnesses of violence. If the perpetrator's parents refuse to cooperate and the student does

not stop the aggressive behavior, the school principal should notify the family court of this situation in writing.

Moreover, when the school uses all available educational measures and their application does not bring the expected change, the director should apply to the family court to take appropriate measures under the Act on the treatment of minors.

The most important thing is to stop peer violence in the classroom. When working with the whole class, you should primarily discuss the topics of recording videos, taking photos against the will of others, publishing them on the Internet and commenting. Failure to respond to peer violence makes it worse, and the longer it lasts, the more difficult it is to deal with.

When working with Kuba's class, you should discuss the issue of mutual relationships and strive to develop a model of cooperation in the classroom. Individual and group conversations about peer violence should be conducted to prevent socially negative behavior.

It is worth developing attitudes of disclosing situations of aggression towards others, emphasizing that not disclosing aggression means consent for the perpetrator to use violence. It is worth pointing out short- and long-term consequences.

Child intervention

Kuba should be provided with psychological support to be able to talk about his experiences in the classroom and work on the symptoms of the consequences of the violence he experiences (cognitive distortions, Stockholm syndrome). For this purpose, he should be provided with the opportunity to meet with a school psychologist, as well as support in a specialist center dealing with violence e.g., the Crisis Intervention Center.

The boy must be confident that the school will take appropriate steps to solve the problem. This belief will help rebuild the sense of security associated with being at school and among friends.

Emotional support from adults should include the following elements:

- assurance that Kuba did the right thing by reporting the situation of violence,
- understanding that it is difficult for him to talk about what happened to him,
- confirmation that no one has the right to behave this way towards him,
- understanding the complex emotional consequences of this situation.

It is important for Kuba to determine who among the adults working at school inspires him the most confidence. Together with that person, you should establish a strategy for quickly asking for help in the event of another threat of peer violence. It may be a well-liked teacher, a psychologist/school counselor or another school employee who has good contact with the boy.

The boy should be provided with psychological and pedagogical assistance at school in the form of classes developing social and emotional competences. Kuba needs support in

establishing and maintaining proper social relationships. You should also help him express his needs, develop assertive behavior, and acquire the ability to set boundaries.

It is worth remembering that this experience causes an increased level of emotions (fear, anxiety, surprise, sadness, shame, anger). Kuba may experience fear of repetition of such a situation, of retaliation from the perpetrator of violence.

You should pay attention to his current emotional state and shaping his self-image based on school experiences. The boy may have negative thoughts about himself, his value, and his sense of agency. Poorer academic results and low attendance at classes should be a starting point for analyzing the boy's school situation.

It is worth teaching Kuba how to defend himself in a situation of violence, and together with the boy, develop a list of ways to defend and prevent aggression. We should also talk about the causes and forms of peer aggression.

It is also worth remembering about specialists who help young people who experience peer violence. In situations of violence on the Internet or via telephone, you can contact the Helpline.org.pl team - by phone 800 100 100 or via the website www.helpline.org.pl. People experiencing direct peer violence can seek support from the Helpline for Children and Youth 116 111, as well as via the website www.116111.pl, which allows you to send anonymous messages online 24 hours a day.

The boy needs favorable social relationships and contacts with other peers outside the school premises to experience a positive support group. Perhaps a good solution will be to look for extracurricular activities tailored to Kuba's interests, for example those related to technology. It is also worth looking for supportive classmates to engage them in peer support.

At this time, it is important to individualize pedagogical behavior towards kuba. During periods of intense emotions, they may have trouble concentrating, learning and giving answers, both verbally and in writing. Knowledge should be checked in a form that is most convenient for him, and questions should be allowed after the lesson.

Results of psychological and pedagogical research:

The overall intellectual development is in the lower range of average results. Among the cognitive functions studied, auditory immediate memory is the best developed. Verbal reasoning and the ability to classify concepts into a superior category are correct. Short-term visual-spatial memory remains at an average level. However, the ability to process visually perceived material, the ability to recall information from long-term memory, as well as abstract reasoning on visual material is reduced.

The boy reads at a rather slow pace, rather fluently and comprehensively. He remembers what he has read well, but has trouble formulating oral and written statements. It is difficult for him to form sentences, he speaks laconically and does not care about their correctness.

The boy's statements are accompanied by great stress, increased tension, nervousness or irritation. Kuba makes fleeting eye contact.

The boy's handwriting is illegible, sloppy, distorted, and goes beyond the designated lines in the notebook. The student makes numerous mistakes, which are also related to the lack of knowledge of spelling rules. He did not sufficiently master the mathematical knowledge and skills taught in this and last school year.

In individual contact, Kuba showed great emotional tension and irritability. In case of the slightest difficulties, he gave up on the task and became discouraged. He took the comments very personally, interpreting them to his detriment. Kuba behaves similarly when studying at home. It is difficult for him to complete a task he has started if he encounters any difficulty. The boy has difficulty carrying on a conversation and does not engage in it spontaneously. Sometimes he doesn't explain what he's talking about, which makes him misunderstood. His behavior is schematic and he takes most things literally. He cares very much about relationships with peers, which is why he is willing to adopt a submissive attitude in order to be accepted by the group.

The boy was referred to a mental health clinic for further diagnosis. The initial diagnosis indicates the need to monitor Kuba for Asperger's syndrome and a depressive episode as a result of peer violence.

[Recommended literature:](#)

Pyżalski J., (2012) Electronic aggression and cyberbullying as new risky behaviors of young people, Oficyna Wydawnicza Impuls

Pyżalski J., (2011) Electronic aggression among children and adolescents, GWP

Kolanko A., (2022) I deal with violence at school and on the Internet: worksheets for children and adolescents aged 9-16, including students on the autism spectrum, Harmonia Publishing House

Kerth M., (2020) How to survive hate: how to recognize if your child hates or is being hated? SBM Publishing House

Questions for a psychologist with answers



In recent years of work, I have noticed that my students have more and more difficulty concentrating. During the lesson, when discussing the topic, you can see that their thoughts "wander" somewhere, they look at the window, yawn, "play" with objects. When I ask questions about the content I talked about, they often cannot repeat it. What could this be due to? How to help a student concentrate effectively?

Developmental norms indicate that a school-age child can concentrate for about 30 - 60 minutes. It depends on the level of difficulty of the task, interest in the topic, psychophysical condition of the person, and individual differences. With such great diversity among students, it is a great challenge for teachers to maintain and extend students' concentration. Breaks in the transfer of knowledge are necessary. Even short physical exercises will improve oxygenation of the brain, improve its functioning, avoid fatigue and prevent distraction. It is important to use different styles and techniques and engage many senses in learning. Depending on the sensory preferences of individual people, illustrations, diagrams, multimedia presentations, recordings, podcasts, audiobooks, various games, scenes and projects will be attractive.

It is worth raising the issue of difficulties in concentrating at a meeting with students' parents and discussing the impact of a hygienic lifestyle (adequate exercise, sleep, proper nutrition, digital hygiene) on difficulties in concentrating.

If the "shutdowns" are repeated and it is difficult to get the student's attention i.e., after talking to him directly he does not respond, it is worth talking to the student's parents to consult a neurologist.

How to build motivation to learn?

We often think that motivation depends on whether something benefits us i.e., in a school situation – what do I get from learning for this test? We are used to the system of rewards and punishments, the "carrot and stick" method. However, to feel true joy in learning, children must find internal motivation, because it is this that allows us to face difficult tasks. At the top of Maslov's pyramid of needs is the need for self-actualization, which results from internal motivation. It makes the child want to learn something new. Students want to feel that they can influence what they learn. It is most difficult for them to perform tasks that are strictly imposed and completely boring.

At the beginning of the school year, it is important to define clear goals for the year, which will have a positive impact on motivation. The student should understand why a particular activity is important. Setting short- and long-term goals can be helpful here.

Interesting and interactive lessons, various materials, projects, and tasks to be completed result in greater student involvement and maintain motivation. Remember to take into account individual differences and level of advancement. The tasks to be performed must be tailored to the student's individual capabilities and take into account the student's strengths and interests.

Whenever possible, students should be provided with situations where they can make choices e.g., choose the topics that interest them the most. This will increase motivation, give a sense of control and agency, and allow students to experience that a lot depends on themselves.

Cooperation and interactions between students are valuable in strengthening motivation. Projects and discussions can strengthen engagement through the exchange of ideas and learning. It is important to appreciate students' progress, sometimes even their efforts.

Can individual materials of the “Simply Relationships” course be used in younger grades of primary schools?

The course is intended for use in working with children and adolescents in primary school. The role of the leader is to flexibly select and/or adapt individual exercises to the group's level of maturity, integration, openness, etc. During the classes, you can use all the suggestions or select a few, conduct classes during several lesson units or, for example, during homeroom hours.

I observe that students are too focused on their phones. What can be done?

Smartphones have become an integral part of the modern life of children, teenagers and adults. We spend a lot of time online, working, learning, paying bills, resting, and killing boredom. The Internet brings many benefits, but also threats.

In shaping the digital hygiene of children and adolescents, cooperation with parents and psychoeducation for both children and adolescents, but also for parents regarding threats, cyberbullying, contacts with strangers and sharing private information are necessary. A key element of conversations is open and trusted communication.

It can be helpful for parents and children to establish screen time rules together. It is also worth offering children other activities in their free time, such as sports, cinema, walks. Time spent together as a family will strengthen the bond and relationship between parents and children.

To show the youngest children the virtual world, it is worth using websites and applications designed especially for children.

- [Dbamy o bezpieczeństwo dzieci w internecie - Co robimy - Site \(fdds.pl\)](#)
- [Uczeń w sieci. Jak mądrze korzystać z Internetu? \(uniwersytetdzieci.pl\)](#)

From September, I will be a class tutor for the first time. It will be 4th grade. How to start the school year well in a new role?

The beginning of each school year is an important beginning for every educational participant (students, parents and teachers). The first impression and first feelings are important, as they would promote a sense of security, acceptance and development. From the very first moment, creating an atmosphere of kindness, but also curiosity about what will happen in the new school year. It is worth devoting the first classes to preparing clear rules with the students i.e., a kind of contract that everyone will sign and follow. The rules must be well thought out and achievable. You can use ready-made materials and scenarios available on the project website (<https://besave.stawil.pl/>) and in the supporting module (<https://bs.stawil.pl/index.php/materialy>) created as part of the project "Be save at school, be save in life." A very important aspect is organizing integration activities for children so that they can re-establish common relationships in an atmosphere of more relaxed fun and activity. The teacher can observe how children react to various social and relational situations. They will build positive relationships that will make educational work more effective and child-friendly.

Summary

Experiencing by contemporary students various forms of verbal and physical violence, humiliation, abuse, exclusion, comparison with others, ridicule and unfair treatment lead to a wide scale of dissatisfaction with the school environment.

The persistent state of anxiety, uncertainty and threat (caused, among others, by the war on our eastern border and the COVID-19 pandemic) affects the mental health of children and adolescents. The lack of a sense of security in children generates educational and health problems and often, as a consequence, reduces the quality of life.

The rapidly changing reality, the intensity and a large variety of difficult situations among children and young people mean that the school faces one of the most important challenges, which is ensuring the sense of security of students who spend most of the day at school.

Teachers are obliged to ensure that students feel safe during classes organized by the school. We all need reassurance that school is a safe, friendly and accepting place.

The "Be safe at school - be safe in life" project, through the successive results, showed a broader perspective for people working with students, especially teachers. The course for teachers prepared as part of the project gave the opportunity to work through current situations at school, a chance to improve teachers' professional competences in the field of assistance in current educational difficulties, relationship problems, ability to work in a class team and work with parents. It also expanded its skills in working in the context of developmental disorders and conflict situations. The scenarios for teachers presented as part of the project presented similar topics, additionally covering ways of dealing with emotions, coping with stress, understanding risky behaviors and behavioral addictions. The support module with online access allowed interested teachers to actively engage by asking questions, commenting, adding information, and asking the psychologist on duty about a specific difficult school situation.

This publication, which contains an analysis of specific events seen from various perspectives, presents possible solutions to them. The characters appearing in them are fictitious, although their creation was inspired by real difficult situations occurring in our surroundings, experienced both in diagnostic work at the Psychological and Pedagogical Counseling Center as well as in the educational work of the school. Any similarity of people and events is coincidental.

