Abstract

The disruptive, provocative and intentionally aggressive behaviours of children are one of the most challenging issues that teachers and schools face today (Bloomquist & Schnell, 2002). Extensive research shows that the wide range of aggressive behaviours identified in school age children is directly related to dysfunctional family systems, or to problematic and even aversive parenting and educational practices, albeit it often in the context of socio-economic deprivation (Campbell, 2002). Research also indicates that disruptive, aggressive behaviours should be examined and treated from a contextual transactional perspective, and not exclusively within an individual psychopathology approach (Sameroff & MacKenzie, 2003).

This empirical study was undertaken in the Cretian context and was qualitative in nature. Dialogical counselling and dynamic assessment interviews were the methods employed. The study aimed to understand how a sample of 11 school aged children (6-12 years old), diagnosed with conduct disorders, experience their teachers', parents', and classmates' attitudes. In line with contemporary inclusive education research, and based on the social model of disability, the authors attempted to go beyond the aggressive symptoms and through the interviews give voice to these children in order to explore their social and emotional needs and difficulties. A series of interviews with parents and classroom teachers was also organised around each pupil in order to collect more information on the child’s social-academic trajectory and behaviour, the family dynamics, and the school's coping strategies. Though extended and more rigorous research is needed, the findings of this study clearly suggest that there is a family history of traumatic experiences or highly dysfunctional relational patterns in all the children’s cases. Additionally, this study speculates that
traditional educational practices fail to properly understand and respond to these children’s social and emotional needs and difficulties, and therefore seriously risk jeopardizing their interpersonal and school trajectory.

*Key words:* Aggressive children, Qualitative approach, School Inclusive practices

**Introduction**

The processes involved in the onset, maintenance, or deterioration of challenging and aggressive behaviours in childhood have been explored in multiple ways for some decades now. Findings suggest that aggression in childhood is associated mainly with family factors, and with factors related to the social and school context. Therefore, many of the problem behaviours (defiant, oppositional, challenging, aggressive) exhibited in schools are related, beyond the child’s family problems and her/his own individual characteristics or deficits, to parameters associated with school (teacher’s behaviour, peers’ attitudes, inclusive policies or available services for pupils with problems, etc.) and social-interpersonal contexts.

Many hypotheses have been advanced regarding the meaning, function and aim of children’s defiant, oppositional or aggressive behaviours. Depending on the child’s case the etiology, dynamics, as well as the aims and the (conscious or unconscious) function of the aggressive behaviour (e.g., self-protection mechanism, coping strategy, etc.) may vary. Moreover, disruptive aggressive behaviours in children are associated with underlying emotional disturbances or unbearable emotions which in their turn are related to distressing or traumatic experiences within family or at school (Schmidt Naven et al., 2002). If the painful and confusing emotions that some children experience are not contained adequately with children’s cognitive and mental mechanisms, these emotions may be externalized as enduring aggressive or disorganizing acting-outs (Campbell, 2002; Kourkoutas, 2012).

Research evidence suggest that to achieve a thorough understanding of challenging, disruptive or aggressive behaviours in childhood, researchers and professionals should adopt a holistic and multimodal model of approach and analysis of the problem behaviour. This is necessary when, as previously mentioned, the behavioral problems are associated with a wide number of individual, family, community and school pressuring factors, which contribute to the development and maintenance of these behaviours.

**Children with Behavioral and Aggressive Problems in Schools and Intervention Strategies**

Most children with aggressive behavioral problems encounter serious adjustment difficulties in school, and are at risk of exclusion and rejection at both the academic and social level, as well as developing mental health problems and dropping-out of school in adolescence (Frick & Kimonis, 2008). These significant adjustment problems and the limited effectiveness of treatments has forced policymakers and practitioners to re-evaluate the
traditional medical- and exclusively individual-based approaches to serving these students (Hart & Blincow 2007; Kourkoutas, 2012; Schmidt Naven, 2010).

In fact, the design of comprehensive and effective intervention programs should be informed by a thorough analysis of the children’s strengths and weaknesses, as well as the contextual risk and promoting factors that impede or promote children’s inner potential. Moreover, it has been proposed that the development of systems of care requires the use of alternative, creative approaches to research and evaluation, both of the personal-individual qualities and needs (e.g., learning, social, emotional, etc.) and the family, social, and school parameters (Quinn et al., 1996).

**The Present Study**

This study is part of a wider action research project in Cretan primary schools conducted in collaboration with colleagues from the Universities of Rome and Brighton. In particular, the research presented in this article is part of a larger plan of intervention programs for children with social, emotional and behavioral disorders (SEBD) and their families. The first data from this program evaluation have been already published (Kourkoutas, 2008).

Every piece of research refers to an implicit or explicit epistemological and ideological background which shapes its theoretical approach, tools, and research goals. This research project is in accordance with the social model of childhood disability-difficulties, and is in contrast to a reductionist deficit-centered and “within the child pathology” approach (Schmidt Neven, 2010). In fact, traditional behavioral and psychiatric oriented research mainly focus on the external symptoms and aggressive behaviours, losing from view the inner emotional dynamics of these children.

In our research project, we sought to use alternative and more personalized and individualized methods of approaching the child with behavioral problems, in order to gain a clearer insight into the various aspects and dimensions of his or her life, which are usually neglected or underestimated by conventional research. Hence, these data could help us to design more meaningful and comprehensive interventions in partnership with the educational staff and the family.

Overall, the main goal of this study is to present information that may challenge the dominant psychiatric view of children with behavioral and aggressive disorders and offer a new insight into the “disordered aggressive child”. To our knowledge, very few studies up to now have adopted this research perspective (interviewing children) in order to contribute to the understanding of children’s disruptive and aggressive behaviours (Cooper, 2001).

**The Rationale of this Study**

A thorough and comprehensive needs assessment and evaluation plan must include quantitative and qualitative data as part of the process. To date, most of the needs assessments and evaluations are primarily based on quantitative data. Data collected using a qualitative approach
may give us better insight into how teachers’ and parents’ behaviours and actions are received, perceived and experienced by the “problem” children. It may also help us understand how the practices that family and school have developed to deal with their identified disruptive or aggressive behaviours affect them.

Qualitative research seems to be an appropriate method for highlighting emotional-psychological and social processes and investigating them in depth. Qualitative research allows researchers to “dig deep” in exploring beliefs, perceptions, behaviours, attitudes and social representations, feelings, emotional reactions, and experiences, in contrast to quantitative methods which operate in a different epistemological reference frame (a positivist one) and explore exclusively those parameters and phenomena that lend themselves to quantification (Willing, 2008).

In the case of childhood behavioral difficulties and aggressiveness it is important to form a complete picture of the child and investigate both their personal experience of the relational context, and the way important persons interact with them. According to Cantwell (1996), we should thoroughly interview anyone who acts as parent/carer to the child. Likewise, siblings, teachers, educators and other professionals, who might be able to give us important information about the child’s functioning and offer us new insights into neglected aspects/features of his character/personality, should also be interviewed. Furthermore, researchers should interview the child in order to elicit the child’s view of the problem and to enlighten the child’s relational experiences with significant persons, as well as the child’s experience of other people behaviour toward them. The interviews included screening for other problems (personal, family, school, or social) that might be a real source of difficulty, enclosing the child in a vice cycle of negative interactions and escalation of reactive, oppositional and violent behaviours.

**Method**

**Setting, instruments and participants.**

This study was conducted in 8 primary schools in the Rethymno (Central Crete) area. The children with behavioral and conduct problems who participated in this study were nominated by teachers and diagnosed with conduct problems by the Regional Diagnostic Centre. A total of 11 school-aged children (6-11 years old) participated in the study, which lasted almost an academic year. Two students were in the first grade (6.5 years old) and the rest of the students were in the fourth and fifth grades (9.5 years old on average). A series of semi-structured individual interviews were conducted with each nominated child. The Achenbach System of Empirically Based Assessment (ASEBA), a multi-informant tool of child assessment, was also administrated in an effort to ensure a more differentiated picture of the child’s disorder than is provided by the prevailing diagnostic systems. Most children were from middle class families in the exception of two children who were from low socioeconomic level families and one from a family of high socioeconomic level.

Collection of relevant data involved additional strategies, including a review of case records, interviews with parents, and interviews with the
educational staff, in order to form a complete picture of the developmental and longitudinal pathway of the behavioral problems’ onset. The case records review and interviews afforded the opportunity to use a single case study to comprehend the characteristics of referred children and families, and how the school system responded to these children. In addition, a multi-axial life-event timeline was used to provide a qualitative analysis of the relationship between the children the families and the educational staff responses, and on the eventual impact of various “adverse” incidents on the child’s functioning and behaviour.

In summary, the purposes of this study were: (a) to illustrate how teachers and parents perceived children’s behavioral problems and how they dealt with or reacted to these aggressive and disruptive behaviours; (b) to document in a qualitative manner an association between adverse or traumatic family experiences and the child’s aggressive and disruptive behaviours; (c) to identify eventual transference of parental “coercive practices” phenomena into the school context and shed more light on the problematic interactions between the child and his school or social environment; (d) to explore and illustrate how children with aggressive and disruptive behaviours perceive their family and school reality, and the specific actions or strategies they use to deal with their “problematic” behaviour; (e) to generate new hypotheses for further extended research concerning sources of stress, anxiety and pain for children with aggressive behaviours, based on their perception of their lives; (f) to suggest intervention strategies that take into consideration each child’s individual and family profile beyond the “symptom” and the identified “problematic” behaviour and aggressiveness.

Analysis of collected data using NVivo 9 software is in process. For reasons of brevity and clarity, from the huge amount of collected data, this article will present a general overview of findings from interviews with the children, and suggest some preliminary hypotheses regarding family and school life and their disruptive, aggressive behaviour.

The interviews with the pupils.

Interviews with students, lasting 45-60 minutes, were conducted at school by two experienced psychology researchers trained in psychodynamic psychotherapy; they were semi-structured and had an exploratory character. Interviews were audiotaped and transcribed by three independents researchers upon gaining parents’ consent and children’s permission. Two external raters coded thematically the interviews’ data with a high inter-rate agreement. The research team together with the interviewers and the raters discussed and analyzed the interviews’ data in a series of meetings.

The total number of interviews per pupil was 4 or 5 within a period of two and a half months. The main objective of the interviews was to provide students with the opportunity to talk about their experiences at school and in the family, their relations with their peers, their perception of the school attitude, and their parents’ behaviour. The attitude of the researcher during the interview was highly attentive and supportive, comfortable and not at all intrusive or judgmental, with the aim of
developing a climate of trust and reassurance, so that pupil felt free to talk about emotionally intense issues or painful experiences. Drawings, playing and some of the images of the Children Apperception Test (C.A.T.) were used in order to facilitate communication with the younger children.

Difficulties, limitations and strengths of the interviews with pupils.

To ensuring the validity of the collected data, interviews were based on the non-directive, but facilitating stance of the researcher, and used predetermined questions and lines of the research based on contemporary literature. The researchers were careful to highlight all aspects of the children’s responses and reactions, and to further the exploration of their experiences, views, and beliefs.

Overall, interviews with pupils were very rich in information including strong emotional exchanges that produced a lot of discussion and real fruitful communication, even though two or three of the children encountered some initial difficulties in self-disclosure and expression, and in developing a trusting relationship with the interviewer. Only one child (whose profile has been assessed as “passive aggressive” with “sporadic disobedient and challenging behaviours”) refused to participate in the last session. This child in the previous interview had, with much difficulty, revealed that he “hates his dad” because he is very “nervous” and “cruel” to him, and therefore quite “frightening”.

Data Presentation

As mentioned above, we will provide some general information about the collected data regarding the child’s psychosocial profile and his problematic aggressive behaviour, and form some initial hypotheses.

Children’s behaviour and psychosocial profile.

Conclusions on each child’s behaviour and psychosocial profile were based on ASEBA data, on teachers’ and parents’ information, and on a detailed analysis of each case’s family history and of the child’s academic and school adjustment pathway.

All children, with the exception of one child in the first grade and another in the fourth grade, displayed open physical, aggressive behaviours within the school context (in the classroom or the school yard), and were frequently involved in quarrels or fights with other students or classmates, and in challenging, oppositional or reactive incidents with their teachers. Most of them, though qualified by their teachers as clever students had low school performance. One child was also involved in bullying incidents both as the victim and the perpetrator. One of the children in the first grade exhibited both a dangerous, intentional, aggressive behaviour towards a classmate by making her ear bleeding (an act which was evaluated as “sadistic” by the teachers), and vandalistic behaviours against school property.

Physical aggressive behaviours against teachers were not registered at all. In contrast, all teachers reported being involved in one or more defiant, oppositional incidents with their pupils. One of the students in the
first grade was an oppositional, passive-aggressive child with challenging behaviours mainly targeting his teacher, whilst he was not aggressive at all with his classmates. The child in the fourth grade who didn’t display any overt aggressive behaviour was assessed by his teachers and parents as very hyperactive and not intentionally disruptive. According to parents two of the children assessed with conduct problems didn’t present any aggressive behaviour at home.

In general the students included in this study were assessed by their teachers as very problematic and in many cases the schools were likely to expel them.

On the basis of the ASEBA protocol scoring, all the children’s profile analyses included significant externalizing problems and most of them had important internalizing (emotional) difficulties, with the exception of one child who didn’t exhibit any obvious signs of internalizing difficulties or disorders.

### Concluding remarks from the interviews of children.

The followings conclusions, among others, have been drawn from the analysis of the child interviews.

All the children, with the exception of the two children in the first grade (C1 and C2), reported in one way or another some family or school incidents that have had a distressing, confusing or destabilizing effect on them (“my father always hits me”; “I remember that my father wanted to struggle me...he hurt me a lot”; “my mother is very nervous [...] she gets upset so easily[...] I hate her”; “Yes, my father is very ill [...] I feel very sad for him [...] He always shouts on me and hits when I'm disobedient [...] I don't know if I hate him”).

Many times the children talked about their family situation and their relationship with their parents in a very emotive manner (crying or shouting full of anger, etc.); two children (C1 and C2) reported their fathers’ absence as very stressful and painful for them.

Most children, especially the older ones, were very critical towards school and teachers’ attitudes, and on many occasions expressed very negative feelings and thoughts against specific teachers (“He is mean and stupid”; “he does not understand at all...he always shouts on me.... I hate him”; “I'm afraid of my teacher...she is very nervous”; “they are very unfair [...] my classmates always tease me and provoke me and the teachers put the blame on me”).

Most children have had problems in their relationships with classmates and other children; all of them reported being rejected by their peers and in some cases also being bullied by them or being involved in fights because they have been insulted.

Most children expressed their willingness to be accepted and play with their peers or classmates; some of them reported that they have friends with whom they can play; some of the children expressed, in a very intense emotional manner, their sadness and anger at not being accepted, and being openly or covertly rejected by their classmates.
Most children admitted that they would like to do better in school and that they need some academic support as they are not able to improve on their own; Some of them reported feeling very “sad” and some of them were quite “upset” at not being “good students”.

Many children reported that because they are not able to follow classroom activities, they are often distracted or very much “annoyed” and “feeling nervous”, “anxious” or “distressed”; C7 and C8 admitted that “very often feel like disturbing their classmates or the classroom teacher”; some others confirmed that being in the classroom makes them feel “out of the classmates’ group” or “even stupid” and isolated (“alone”).

Most of the children believed that even if some of their teachers tried to be polite or gentle, or even accepting of them, they in fact felt (e.g. C9: “deeply inside them”) that they “didn’t like them” or wanted to “get rid of them”; three children (C1, C2 & C10) believed that their teachers really “hate” them.

Some of the children also expressed their difficulty in maintaining stable friendships with students from other classes, or regularly participating in the schoolyard plays and activities.

Most of the pupils reported not having any particular relationship with classmates outside of school; some also confirmed that they don’t have any “trustful” or “good friends” outside of school;

At the initial interviews almost half of the children reported that “they are doing well at being aggressive”, “disobedient” or “defiant” and “challenging” against the school, because schoolteachers and school heads are not able “to care for them” or “don’t like them” and “want to send them to other schools”.

At the initial interview most children were not able to associate their behavioral problems and aggressiveness with their experiences within the family or their parents’ behaviour and practice toward them.

Only two children reported from the beginning that because they are treated this way by their parents they may become “violent” or “challenging” against others; one of them confirmed that this was his way to “take revenge” on his parents.

Four children later admitted that their parents’ behaviour makes them feel “unhappy”, “sad”, “terribly upset”, “frightened”, “lost” or “distressed” and “anxious”, and probably “aggressive” as well; another reported being “driven mad” by his father’s and his teacher’s behaviour.

Many children expressed a similar idea about their challenging or aggressive-rejecting behaviour: these behaviours make others reject or hurt them, but they don’t care; from the other side, almost all of the children advanced in one way or another the idea that they are victims of others; they were complaining or protesting that others “don’t care”, “don’t feel”, “don’t understand”, “don’t know”, or that the others are “mean” or “doing it on purpose”.

Some reported that their parents and teachers didn’t really know the “right way” to help them with their homework or even “they didn’t really care about their school performances” or “being very critical and violent
because of their school and learning problems”, whilst “without helping them”.

Three of the children reported a humiliating and painful experience in school with teachers; two of them also reported being in open conflict in one way or another with some of the school teachers; another two children reported aggressive and insulting behaviour on the part of other teachers.

Some of the children referred to very aggressive relationships and incidents with other kids; four of them mentioned incidents during which they have been bullied, bitten and teased or ridiculed.

One child (C1) in the first grade was not able to talk about his parents, although he confessed that “he wanted to spend more time with them and was not sure of their love” (this child was living with his grandparents and displayed serious conduct problems in school; besides, the grand father seemed to justify or even support his aggressive behaviour; he used to refer to it as “real male behaviour”; this child has been considered as abandoned by his (socio-economically high level) parents, as they were seeing him only two hours per day at their home); the second child in the first grade (C2) admitted that he was strongly missing his father (who was working in the commercial navy and, therefore, was absent for several months at a time); he also affirmed that he felt “very angry with his mother” and being “always in quarrel” with his two older sisters.

During the interviews many children in one way or another expressed conflicting or ambivalent feelings towards their parents, or even to some of their teachers, and how they are not able sometimes to control their behaviour (e.g., C8: “I know that my teacher likes me and what she did was for me [...] but I can’t help being all the time quite [...] sometimes...I don’t want it, but I become very mean with her”; C7: “Sometimes I think my father likes me...sometimes not...me, I don’t know if I love him”; C4: “our teacher, she is a good one...but sometimes.. I know she doesn’t care for me...because my peers say bad things about me to her and if she believes them, I become a fool”).

Most children affirmed that “the school is not a place for them”; they feel badly because their classmates and the other students don’t understand them; teachers are “sometimes good”, “sometimes bad”.

All children responded positively to participating in educational activities that have a playing dimension and more action or role-playing.

Using the C.A.T. pictures or during playing narrated stories with figures some children displayed ambivalent feelings and trends (C10: “he wanted to do his best...but he killed the boy (!!)); or heroes with contradicting and even bizarre characteristics (C5: “a very nice and frightening man”; C3: “a child with a little bad animal in his arms and in his soul a small monster”), probably as a reflection of their own sentiments toward significant others or of their own conflicting self-representations.

Overall, many of the children expressed significant negative emotions during the interviews while some others had enormous difficulties to put words to hard to express emotional experiences, notably with their parents, and with their teachers and classmates as well.

At least three children cried during the interviews, whilst talking about their parents, most of them at times were emotionally very touched
or overwhelmed by the researchers’ questions or comments, and only one child was considered “enclosed” and defensive.

In summary, most children showed a particular attachment to the interviewers, affirming that this was the first time they had talked about “such issues” and things that make them “crazy” or “sad”.

**Discussion**

These preliminary analyses of the children’s discourses and narratives suggest that behind the problematic, challenging and aggressive behaviour, and the violent tantrums, may lay, feelings of sadness, depression and fear, coupled with anger and sentiments of revenge or conflicting and ambivalent emotions towards significant others (parents, siblings, teachers, peers). In most cases, these children’s narrative also revealed low and problematic self- and others-representations and a certain inability to negotiate interpersonal problems and difficulties with others. It is quite likely that the intense negative feelings these children experience impede them in developing the necessary problem-solving skills and coping strategies.

Moreover, based on children’s protocols and teachers’ reports, we conclude that in many cases children’s problematic and aggressive reactions have been transferred into school, creating a very intense and conflicting relational frame and putting the child at risk of further emotional and behavioral problems. In fact, many children with aggressive behaviours are engaged in a vicious cycle of escalating negative and reactive-aggressive behaviour with peers and other adults or teachers, which exacerbate their conflicting emotional states and reactions. Because of the strong negative emotional reactions that the children’s behaviour triggers in teachers and parents, their underlying emotions and needs seem in most cases to be underestimated, neglected or even ignored, both by the parents and the school practitioners who don’t know how to react.

These data, together with the information from the family and teacher’s interviews and the detailed family history analyses, clearly suggest that many of the incidents and relationships within the family and school have had a traumatic effect on the child’s functioning. In fact, we have made a number of associations between family dynamics and children’s specific behaviours in each case, which allowed us to advance a series of hypotheses regarding the developmental pathway toward the problem behaviour of each child. Therefore, it has been hypothesized that in many cases a “traumatic or harmful relationship” with a parent or “a highly distressing family event” (father’s illness, father’s absence, violent couple relationships), and a series of enduring inadequate and disturbing parental practices, have had a dramatic impact on the child’s psychosocial development (Greenwald, 2002).

The child, as a part of a psychosocial system of multifaceted relationships and longitudinal interactions (family, school, neighbourhood, various social contexts and subsystems, etc.), is continuously evolving and changing, and pathology is one of the possible developmental outcomes (Sroufe et al., 2000; 2005). Problem aggressive behaviour can no longer be considered an exclusively individual trait, or a personal disturbance, without
referring to the role of the relational and social setting, as well as the specific conditions under which this behaviour occurs (Kourkoutas, 2012).

Therefore, behavioral dynamics and reactions can only be fully understood within the particular framework from which they have emerged (Fraser, 2004).

Conclusions and Suggestions

Traditional research and intervention practice mainly focuses on behaviour measurement and modification, frequently in opposition to contemporary research evidence that suggests an ecosystem view of children’s behavioral disorders, and a dynamic interaction of contextual risk and individual factors. Emotional processes and disorders are therefore neglected in childhood, with disruptive and aggressive behaviours considered as a separate nosological dimension (comorbidity) (Sroufe et al., 2000; 2005).

In our study we sought to go beyond a formal diagnosis and a reductionist view of the children’s symptoms and explore the underlying transactional-relational and intrapsychic dynamics that are associated with disordered and aggressive behaviours in childhood.

The main scope of this study was to challenge the traditional or conventional medical-based models of approaching and analyzing the childhood challenging and aggressive behaviour and, in accordance with the social model of childhood disability/disorders, provide new insights into this complex phenomenon.

Recent evidence challenges the idea that traditional behavioral interventions with children with conduct problems are very successful (Carr, 2009; Weisz et al., 2005). Therefore, the final conclusion drawn from our study is the following: to be successful interventions (a) should be based on a thorough analysis of these children’s emotional needs and self- and other- perceptions, and (b) should be holistic, encompassing a series of counselling or psychotherapeutic strategies to provide guidance and support for teachers and parents in order to minimize the contextual risk factors that exacerbate children’s conduct problems.

Limitations of this Study

This study is designed to investigate in a personalized and individualized manner, a series of parameters and processes that are related to the experience of children with aggressive behaviours in the family and at school and as well as to their way of acting and behaving within these contexts. Therefore, the nature of the study and the restricted number of the children sample does not allow the generalization of findings. Though this study was informed by another epistemological paradigm, the absence of a randomized control group of children may also limit the value of our findings.
Bibliography


Cooper, P. (2001). Medical con trick or new paradigm for emotional and
behavioural difficulties? The case of attention deficit/hyperactivity
disorder. In: H. Daniels, T. Cole & J. Visser (Eds.). *International
Perspectives on Inclusive Education* (pp. 143-164), London: Sage.

Fraser, M. W. (2004). The ecology of childhood: A multisystemic
perspective. In M.W. Fraser (Ed.), *Risk and Resilience in Childhood. An
Ecological perspective*, (pp.1-12). Washington, DC: NAWS Press

B.A. Winstead (Eds.), *Psychopathology: Contemporary issues, theory,

Greenwald, R. (2002). *Trauma and juvenile delinquency. Theory, research and


children with mild psychosocial problems and academic difficulties:
prospects and limits of the evaluation process. In J. K. Whittaker, C.
Canali, & T. Vecchiato, (Eds.), *Assessing the Evidence-based of
Intervention for vulnerable children and their families*, (pp. 434-439).
Padova: Zancan Foundation

psychodynamic interventions within family and school context*. New
York: Nova Science


