

## ENFORCING COMPETENCIES IN CHILDREN WITH THE RISK OF BEHAVIORAL DISORDER IN CONDITIONS OF CHILDREN'S HOME AND PRACTICAL PRIMARY BOARDING SCHOOL

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***Abstract:** Drama education within the process of prevention and intervention of behavioral disorder risk in conditions of children's home and practical primary boarding school. Research presentation.*

***Keywords:** Prevention, intervention, behavioural disorder risk, development risk factor, institutional care, social competencies, social stability, social relationship, special education diagnostics assessment, structured evaluation, intervention principles, intervention triangle, drama in education, reflection.*

The concept of healthy school reflects the health quality at school from the pupils' and educators' viewpoint. Pupils' approach and their experience with school environment and chance to gain education is the alpha and omega of education efficiency from the individual viewpoint in relation to fulfillment of potential for every pupil (comp. Wearmouth, Glynn, Berryman, 2005, Helus, 2004). The education is perceived as a process which integrates the **individual expectations of pupils** in relation to their further chances (perspectives); **the individual experience following learning** in relation to motivation; **satisfactory social integration** in relation to identity forming; the chance of success in connection with attaining certain social status in a group (comp. Řehulka, 2007, Vojtová, 2008). Identification of these risks and reduction of their impact on pupils' education is the first condition for the creation of a responsive environment for all children (comp. UNESCO, 2005).

In our contribution, we would like to introduce the concept of research focused on creation and trial of intervention programs in group of children endangered in their development. The survey is undertaken by the Faculty of Education team consisting of Pavlovská M., Širůček, J., Vojtová, V. The survey is undertaken within research design of the Faculty of Education, Masaryk University, id.n. MSM0021622443 "Special needs of children in context of The Common Education Program for Primary Education" (CEP PE) lead by Prof. PhDr. Marie Vítková, CSc.

Selected bachelor students of special education cooperate on the intervention program and verify it. The aim of the longitudinal research is to create the methodology of coordinated prevention and early intervention with the help of drama education as a working method in order to attain the desirable academic results and social competencies in the children at risk. It is this group of children which is at risk of developing antisocial behavior that we consider the most endangered by the pathological phenomena of the social environment.

## Research basis

Longitudinal studies evaluating the results of interventions show their effectiveness and prove that the sooner and the more complexly we take the intervention, the better results we will get (Rutherford Jr., Quinn, Mathur, 2004, Běhouňková, 2007). The real prevention of behavioral disorder risk doesn't solve the problems at the moment of their becoming visible and hard to solve (e.g. termination of studies, law violation, alcohol and drug abuse etc.), but the prevention programs that are to be successful focus on the problems before the child's behavior exceeds the tolerance limit of the school and community and before there is a criminal sanction (Vojtová, 2008). The surveys (Lane, Gresham, 2002, Walker, Severson, 2002) prove that prevention of academic failure in children at risk is the most efficient intervention in problem development and behavioral disorder. This fact is underestimated in the Czech school environment. It was proved by the survey undertaken in 2007 by Czech Ministry of the Interior ordered by the Czech Government as a basis for *The Evaluation of the Care of Children at Risk* (2007): From the group of 221 children that were taken away from the normal educational environment and placed into a reform school due to the behavioral disorder risk a whole third of them didn't go through any intervention previous to the action. Only 35% of them had an examination by the educational-psychological service (Ministry of the Interior, Czech Republic, 2007). It follows from this fact that the responsible institutions (school, the social and legal protection authority for children) didn't even come up with the idea of intervention and placed the child into the intuitional care right away (comp. Vojtová, 2008). Such a significant intervention into the life situation of a child influences its social bonds, its perception and its further future in adult life (comp. Störmer, Vojtová, 2006).

The UNESCO concept „School for all“ emphasizes the responsibility of every school for a healthy environment for all children, for the emotional and creativity development of all children. The development of all these factors is set equal to the cognitive aspect of child's personality. Similarly, the Common Educational Program as the primary curricular document in Czech school environment emphasizes the significance of support of the pupils from **socially disadvantaged environment** and pupils with **behavioral disorders** in order to maintain their difference and involve them in educational activities. It encourages the schools to create the opportunity for such children to attain education according to their potentials (comp. CEP PE, 2005, Helus, 2004) despite the barriers caused by their disadvantages or differences (comp. Vojtová, 2008a).

The drama education is one of the ways of arranging these opportunities and of enforcing the healthy school environment for all pupils. In a play, the drama education enables the child to cope with analogical life situations by the means of own experience, to support the development of a child in all socially significant areas. It is important to stress that it happens within the play and only as if. The children are protected by the fiction, it is only “as if”, within the game they try to live through something that could happen to them in reality, but they mustn’t fear the consequences of their behavior or decisions, and there is no danger of punishment (Pavlovská, 2004; Machková, 2006). The drama education is one of the ways to understand one another and themselves, one of the ways to gain positions and roles which make them question their ethical principles and personal values. They learn to accept order, respect variable ideas, respect others, support justice, and develop the sense of what is right and what is wrong. The drama education makes the children listen and hear, watch and see and feel. It is a very important way, where the individual realizes what it means to be a human. The drama education uses above all the social play which is a natural activity for the children.

## The research target group

The target group is the children in risky development; they already have disturbed development in social and sometimes also personal aspect. They are placed into not closely specified children’s home<sup>1</sup> by the court, or by the child care authority into the practical primary boarding school. They are a) children in institutional care, b) children staying in practical primary boarding school for social reasons (often it is a reaction to a proposal of social workers of the social judicial protection authority as the last degree of a life situation solution before handing in the proposal for an institutional education). These are not disabled children; they come from a dysfunctional environment. The WHO emphasizes that in the people without disability with lower ability to work it is mostly the dysfunctional environment that directly causes the behavioral problems. The WHO sees the cause of these problems in insufficient support, discrimination or stigmatization (ICF, 2001).

The first group consists of **children from children’s home** – in institutional care. The children and young people get into the institutional care (act n.109, 2002) for social and educational reasons (comp. act n. 359, 1999, act n. 218, 2003). The cause of dysfunction (ICF, 2001) lies in each of these subgroups of placed children on a different level. In children placed into the school institutions for institutional and protective care for social reasons it is the outer level, the level of social environment. In children placed in institutional and protective care for educational reasons it is mostly for inner reasons: due to the child’s personality. But in most cases it is both these aspects that disrupt the equilibrium of proper functioning of these children in their natural social environment, even though the problems on one level can be move intensive or more frequent. The second analyzed group of children is **children who spend the weekdays in a boarding school**. The reasons for their placement there are similar, but their gravity doesn’t request taking the child away from the family. It

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<sup>1</sup> We cannot give the name of the institution due to the protection of data of the target group children. We archive the exact identification data.

is mostly children from socially unsuitable environment. The research will therefore concern two groups, which both have its specific features. By the placement in the institutional care, these children lose their reliance which is normally granted to most of the children. Their contact with the immediate family isn't continuous, their life experience and current life situation *disrupt their social stability* and create *unfavorable predestination of social relationships quality* (comp. Širůček, Širůčková, 2006, Vojtová, 2008). These risks can be the direct cause of their behavioral problems. They come into the children's home or boarding school with their own experience of risk behavior (truancy, running away from home...), with the experience of stigmatization. The little stimulating environment of the family of their origin limits the performance capacity of a child and represents a risk of problem behavior. The social environment of these children is unstable and offers them negative social experience and wrong patterns for their own model behavior (comp. Kaufman, 2001, Vojtová, 2004, Wearmouth, Glynn, Berryman, 2005). The most frequent reasons for placing the child into a children's home are following situations:

1. the parents fail *their parental duties*: they do not use or they misuse the rights ensuing from the parental responsibilities;
2. when the children were placed into the care of another natural person than their own parents and this person fails to perform the duties ensuing from the placement of the child;
3. when the child became a victim of a criminal act putting its life, health, human dignity, moral development or possessions in danger, or there is a suspicion of such an act;
4. when the children are frequently placed into a continuous care institution on the request of the parents or other people responsible for the upbringing or the child's stay there lasts more than 6 months;
5. when the children are endangered by violence between the parents or other people responsible for the upbringing, or violence between other natural persons;
6. when they as asylum seekers are separated from their parents or other people responsible for their upbringing (act n.359, 1999);

These situations must last long enough or be intensive enough to influence the child unfavorably or must possibly be a direct cause of its unfavorable development. To place the child into the boarding school care the reasons n. 1 and 2 must be fulfilled, while the family isn't so neglected and dysfunctional not to be able to cooperate. The most frequent reason for placing the children in to the boarding school are truancy and inability or unwillingness of the parents to ensure the school attendance. The depositional coping strategies (Vodáčková, 20002) enable children to – more or less – cope with the situation when they are taken away from the family and transferred into the institutional care. The loss of contact with the key person and transfer from the family disrupts their “set of cognitive representations” (Širůček, Širůčková, 2006) and opens the room for risks in their development (Heath, Sheen, 2005). We speak of the concept of “**At-risk Youth**” (comp. Barr, Parret, 2001, Jahnukainen, 2001) of the children in risk of behavioral disorder development.

The risks are potential barriers for successful socialization processes and education of a child. Therefore, we focused the prevention in our program on forestalling the formation of these barriers. We try to stop the undesired trends in children's behavior by intervention and set new models of their reactions and behavior (comp. Vojtová, 2008).

## **Drama education as a communication bridge**

The prevention and intervention program will be made up of a methodological set based on drama education. Drama education (DE) is a young field of study; it entered our school at mid 1990's with the educational program Primary School. Since then it's been part and parcel of school curriculum. It became very popular with many teachers, because it uses natural, easy way of teaching; it teaches by means of one's own experience. Special education teachers use the term **dramics**, which, in their view, captures the focus on special educational needs children better, we will therefore use this term further in the paper. The methodology series for prevention and intervention in children by means of dramics methods and techniques will be focused on eliminating undesirable manifestation of behavior and creating desirable behavioral attitudes. First, we want to find out the current state of personal, social and ethic competencies by means of dramics methods, then we want to develop the individual abilities of the children by intervention techniques, which correspond with the basic competencies worded in the CEP PE. It is the following competencies: communicative competencies, social and personal competencies, competencies to learn and work, problem solving competencies, competencies of a citizen. The dramics develops all the above competencies and some more that are connected to the theatre as a specific way of perceiving the world (understanding the basics of interpersonal communication, by role play taking and analyzing attitudes to life events, active participation in joint creative effort, perceiving the dramatic art as a sovereign kind of art, being able to differentiate the individual genres).

## **Dramics and its contribution in development of key competencies**

Communicative competences – the child in role and outside the role learns to formulate its views, defend them, argues, communicates with the audience, and learns to respect the views of the others, listen to them, and appreciate their contribution.

Social and personal competencies – the child takes up different roles, i.e. the characters of other people, acts as them, expresses their thoughts and views, even though it could be quite different personalities than his/her own. He/she is protected by the fiction; he/she doesn't need to fear the future, the sanctions in reality.

Learning competence – the child learns to search the information, sort them, analyze various situation from different points of view, learns to decide. We observe the development of specific abilities (psychosomatic, game abilities), he/she learns to reflect and evaluate.

Problem solving competence – the child learns to analyze problem situations and consequences of human behavior ensuing from them, analyze the problem solutions, learns to realize the relationship of the fictive situations and the real life situations, he/she learns to recognize and understand a problem, think about the discrepancies and

their causes. The children understand that there could be different views of a conflict, which leads to the realization of significance of the responsibility for their decision and the realization of the need to reflect on their decision and evaluate them.

Competencies of a citizen – while working with different topics regarding the functional society, children learn to take their attitudes as a citizen, learn skills, abide by the rules, they develop their creativity, relationship to the cultural heritage as a whole, to ethic values. They learn to participate in the school or community life by different performances and theatre projects.

Working competencies – the child participates in creating theatre scenes, posters, theatre production etc. (CEP PE, 2005). In working with children, we can use the dramatics as a subject, as a method of work or as an educational principle. In the context of prevention and intervention, the main contribution lies in the following attributes:

- 1) it helps to create experience,
- 2) gives the opportunity to think independently (group work, every individual is important, he/she has the chance to express his/her ideas, contribute to the whole),
- 3) grants freedom to the group (under the sensitive leadership of a teacher the group learns to accept, appreciate and encourage one another),
- 4) gives the opportunity to cooperation (joint effort, including so called outsiders),
- 5) gives the opportunity to build social consciousness (entering the role, becoming someone, understanding this person, decide in role and for oneself),
- 6) it helps to release the emotions (in conflict solving, various problems, relax, get rid of the tension),
- 7) helps the communication development, sentence vocabulary, working with voice.

## The strategy of intervention processes

While planning the methodic set, we concentrate on self-perception, cooperation, communication, problem solving, ethics and emotionality (Matějček, 1994). The activities and topics will be deliberately chosen to reinforce the resistance of children to negative social influences, to reinforce the patterns of desirable behavior. We proceed from the bibliography of a child, from his competencies and potentials. The special education diagnostics of behavior and competencies of individual children gave rise to the practical implementation of the research. Only a good familiarity with individual children can help us react properly to their educational needs, use their skills and fulfill their potential (comp. Helus, 2004).

Getting to know their needs was divided into two steps. The **first step** was to evaluate the problem of every child and create the structured evaluation record of the problem. We proceeded from a) the analysis of children's documentation, d) observation in their natural social group. For the record, we used self-made tools: ad a) the outline for structured evaluation, b) behavioral disorder reference list. The **second step** was the behavioral diagnostics in relationship with the peers. The measurements a) were carried out before the intervention; b) will be carried out three months after the application of the intervention. This measurement will be carried out by students – experiment organ-

izers, teachers of the pupils, external observers – research team members. The **third step** is the intervention itself.

## **Problem evaluation of an individual child and structured evaluation record**

The evaluation of problems in school environment is to some degree problematic. Subjective aspect in the records is a great danger, also the focus of the assessor on the areas that really relate to the behavioral problems of a child (comp. Störmer, Vojtová, 2006). We can avoid these risks by combination of forms and tools of observation. We set two basic processes in our research: direct observation of a child in class and structured evaluation for behavioral evaluation. We used these observations in the beginning of our work with children, before the intervention. And we will use them again after the intervention; the differences will show the effectiveness of the intervention processes in individual children. We attach the record sheet in the end of the contribution; the behavioral monitoring was carried out in intervals set beforehand (attachment 1 and 2).

## **Behavior diagnostics in relation to the peers**

Another form of the observation of behavior was the observation of social competencies of the children. The observation a) was carried out in the beginning of the intervention; b) will be carried out 3 months after the implementation of the intervention. The observation will be carried out by students – experiment organizers, the teachers of the pupils, external observers – research team members. In the attachment n. 3, we list a scale of social competences of children, purpose of which is to create a basic algorithm for the diagnostics of problem behavior. Using this scale ensures intentional records and teachers focus on behavior diagnostics and the diagnostics of signs of behavioral problems. There is a possibility to specify another variant in every dimension (attachment 3). We use the scale before and after the intervention again.

## **The intervention**

Three basic starting points form the framework for creation of the intervention processes: social skills of individual problems, social standards of skills, and the opportunity to learn. These starting points of the intervention process are illustrated by the intervention triangle. They are connected to each other and define the intervention activities. We compare the standards with the current competencies of a child and use this comparison when constructing the learning situations. We see the intervention as a process that takes into account the past, current and future competencies development of a child; a process that respects the individual skills of a child. Besides the standards and the current state of social competencies, we also have to work with future opportunities of a child (with his or her potential). We work with the zones of future development of an individual child and the quality of the relationships in the given group, with experience and possible opportunities in particular life and educational situations and in

child's social network (comp. Strömer, Vojtová, 2006). There are **social skills** of a child one side of the triangle; it is its state and competencies in the current time, when he or she enters the intervention process. There are **social standards of skills** on the triangle peak, which should be reached by the child; they are the usual competencies of a child of his or her age. The third side of the triangle is constituted by activities and stimuli which help to create the **opportunity to learn** and develop social skills of a child. This development leads to the peak of the triangle, to the standard social skills (intervention goals).

## **Three main components (processes) of intervention**

The skill (competence) intervention training is aimed at 1) social skills (we mustn't forget the deficiency in other fields; learning and activities connected with the school work represent a way to reinforce the feeling of competence – leads also to reinforcing the social interaction...); skills and techniques for small group work; group activities coordination.

### ***Ad 1) The skill (competence) intervention training aimed at social skills.***

Interactive relationship between peers – perception of the position of the other – the empathy is rozvíjena by the following activities. The examples above define the basic structure to support the child at risk. The teacher creates other models of concrete activities within this framework.

## **Intervention principles – implementation and feedback**

### **When planning the intervention activities the teacher should keep in mind:**

- the child him-or herself has to be active, all opportunities would be vain without own active approach;
- the activity of a child is initiated, enforced and kept by an opportunity (stimuli) and the significance of the opportunity for his or her own perception (feedback);
- the child carries own experience from a social interaction in a different environment;
- the child and his or her behavior are influenced by interaction from the teachers and peers (comp. Helus, 2004, Říčan, 2004, Vojtová, Bloemers, Johnson, 2006).

### **Before the intervention implementation, the teacher should answer the following questions:**

- if the teaching goal of the educational activity in question is clear;
- if he or she has enough technical knowledge to teach the given topic;
- if he or she has the necessary material and tools ready;
- if the chosen activity corresponds with the goal of the work;
- if the chosen methods and tasks are adequate to the age of the children, their interests and their needs, if they connect to their previous experience;
- if the chosen motivation is strong enough to motivate the children;



- how he or she will carry out the reflection and evaluation;
- if there is enough time to do the final reflection with the children;
- if he or she takes the individuality of a child into account.

**During the intervention implementation the following should be monitored:**

- interest of the children;
- busyness of children and their activity in the individual activities;
- the cooperation of the children;
- children's reaction to teacher's questions;
- if the activity respects children, their wishes and proposals;
- if the chosen teaching methods aim the purpose;
- way of using prepared materials and tools;
- if the teacher offers enough feedback and stimulates them to further steps;
- the flow of time in order to have enough time for the closing reflection

**After the intervention implantation, the teacher should carry out self-reflection and sincerely answer following questions:**

- if he or she achieved in the process of prevention and intervention his or her set goals;
- if the activity and teaching methods were well chosen;
- if the materials and tools used supported children's work;
- if the class atmosphere is calm and relaxed and the relationship between the teacher and the pupils is based on mutual respect and trust;
- if all the pupils participated (comp. Svozilová, 2001; Pavlovská 2004, Vojtová, 2008)

We **focus** the feedback on **success, activities and experience that turned out well** and fulfilled the expectations. We also monitor the shortcomings! Their identification helps to reassess the present intervention strategy and create new opportunities. In the dramatics, we use the reflection after almost every activity, we evaluate the work and see that the child itself reflects its actions, success and failures, then we let the group to do the talking and then comes the teacher's feedback. The educator acts as a facilitator who guides the child on its way to knowledge. She or he doesn't offer, doesn't force, just opens the imaginary door to knowledge. Information intended for the child should be a part of the reflection: how the child worked, what progress he/she made, the group should evaluate the mutual cooperation. The reflections following individual activities are usually oral, but sometimes the teacher chooses a gesture, colored expression or sound reflection. The closing reflection is usually carried out in a circle and everybody has a chance to express their opinion. Sometimes a written reflection is incorporated, it is mostly in cases when the child is to think about the problem (comp. Pavlovská, 2004; Macková, 2007. The teacher should also monitor shortcomings in order to help him during the activities; they represent a challenge for amendments of the current intervention strategy (Vojtová, 2008).

## The current state of research

At the time of writing this contribution, we are in the beginning of our research. The first diagnostic stage of the research was completed, we created the methodology of structured behavior evaluation, scale of behavioral disorders and we are in the process of their verification now. We develop the intervention series based on the diagnostics and we will start working with the program in the beginning of the next school year. We see the children regularly once a week and work with them in course of the intervention activities. In the second half of 2008, we plan to finish the methodology series of intervention, carry out the repeated special diagnostics and analyze the development and effectiveness of the intervention. We will inform the expert public of our results.

### *Summary*

*The contribution introduces the research carried out together with the students of the special education department. The intervention program in question is aimed at children at risk of behavioral disorder development in the environment of children's home and practical primary boarding school.*

## **Attachment n. 1**

### **Record sheets**

#### **Record sheets for behavior monitoring 1**

#### **In-class monitoring**

It is suitable for short-term monitoring as data for teacher's decision about the intervention processes.

Includes following domains:

#### 1. Attention

- ▶ conscious
- ▶ attention span

#### 2. Interaction

- ▶ with the teacher
- ▶ with the schoolmate in a pair
- ▶ with schoolmates within the group

#### 2.1. Communication: verbal, non-verbal

- ▶ with the teacher
- ▶ with the schoolmate in a pair
- ▶ with schoolmates within the group
- ▶ in front of the audience

#### 3. Ability to work

#### 4. Ability to respond to teacher's instructions

#### 5. Ability to stick to the rules

- ▶ independent
- ▶ in a group
- ▶ in workplace organization, while working on given task

6. Reaction to evaluation – praise, reprove, good and bad
7. Significant aspects influencing behavior

## **Attachment n. 2**

### **Record sheet for behavior monitoring n. 2**

Structured problem evaluation (by Elliott, Place, 2002)

It is used for long-term problem evaluation, it doesn't take only the pupil within the school environment into account, but also his or her environment, the relationships with peers, life histories of a pupil.

### **Structured evaluation**

1. Basic topics
  - What are the basic problems? Whom do they concern? Who is involved in them and why?
  - Find out the details about the problems – when they started, how long they have lasted, circumstances, intensity, consequences.
  - Attitudes of people in question – pupil him/herself, his/her parents, teachers, schoolmates.
2. Development history
  - Did anything in the pupil's life happen that could influence his/her current problem?
3. School performance
  - Does it correspond to his/her education?
  - Relationship to the teachers
  - Relationship to the pupils – watch out for bullying
4. Hobbies and free time activities
  - Does he/she have any hobbies?
  - Is he/she interested in anything at all?
  - How does he/she spend her/his free time?
5. Traumatizing events
  - Did anything happen in the near past that could be the cause of current problems?
6. Family relationships
  - The best is the observation at the interview
  - Who does the most talking
  - Who is the most relevant speaker
  - Who is the authority in the family, for the pupil
7. Child's behavior
  - Moods
  - Balance
  - In class, in free-time activities, in pauses, on the way to and from school

### Attachment n. 3

#### Relationship to peers (Vojtová, Širůček)

In following situations	What is the most suitable answer?
<b>1. Cooperating behavior with peers or similar situation.</b>	A. Demands his own way of playing games. B. Conforms to the instructions of the others who push forward their way of playing. C. Gives up things he likes and plays with to the friend whenever he is asked to. D. Other reaction.
<b>2. Connecting with peers or similar situation</b>	A. Relaxed and confident in contact with children s/he doesn't know. B. Avoids social contact with peers even when he is given the chance. C. Open and friendly with the peers but is inexperienced in leading the conversation or the play. D. Other reaction.
<b>3. Relationship hierarchy with other children.</b>	A. Expresses concerns what others think of him/her. B. Thinks himself/herself superior to his/her peers. C. S/he cannot step up against unreasonable opinion of a peer. D. Other reaction.
<b>4. Friendship with peers known to the child and similar situations.</b>	A. S/he often competes with peers, challenges them to competitive games (cards, board games etc.) B. Helps his/her friends with their tasks and duties. C. He is hostile to the peers who try to make friends with him/her or his/her friends. D. Other reaction.
<b>5. Reaction maturity to other children.</b>	A. Frequent quarrel and rage fits with peers. B. Makes hostile remarks about his/her peers. C. Comes often in contact with his/her peers, addresses them with their first names. D. Other reaction.
<b>6. Leadership</b>	A. Orders his/her peers around. B. Demands obedience. C. Can conform to the views of the majority. D. Other reaction.
<b>7. Conforming to the norms of the peer group.</b>	A. Ignores the rules of the peer group. B. Takes part in group activities, but only passively. C. Frequent imitation of peer behavior. D. Other reaction.
<b>8. Provocation of others</b>	A. Frequent verbal provocative behavior towards the peers. B. Frequent physical provocation of the peers. C. Frequent destruction of the property of others. D. Other reaction.
<b>9. Helping others</b>	A. Perceives the ill luck (uncertainty) of a friend, tries to help without hesitation. B. Perceives friend's difficulties, but hesitates with help. C. Ignores the effort of his/her peers who seek his support and consolation. D. Other reaction.

<b>10. Aggression against peers</b>	A. Uses reasonable arguments to convince the peers. B. Exerts pressure to push his/her opinion through. C. Uses physical threats to force others. C. Other reaction.
<b>11. Respect from the others</b>	A. Children respect him/her. B. Children mock him/her. C. Children ignore him/her. D. Children isolate him/her deliberately. E. Otherwise

## POSILOVÁNÍ KOMPETENCÍ U DĚTÍ V RIZIKU VÝVOJE PORUCHY CHOVÁNÍ V PODMÍNKÁCH DĚTSKÉHO DOMOVA A INTERNÁTU ZÁKLADNÍ ŠKOLY PRAKTICKÉ

**Abstrakt:** Dramatická výchova v procesu prevence a intervence rizik poruch chování v podmínkách základní školy praktické a dětského domova. Prezentace výzkumu.

**Klíčová slova:** Prevence, intervence, riziko poruchy chování, riziko vývoje, ústavní výchova, ochranná výchova, sociální kompetence, sociální stabilita, sociální vztahy, speciálně pedagogická diagnostika, strukturované hodnocení, zásady intervence, intervenční triangl, dramatická výchova, reflexe.