Beata ŁUKASIK
https://orcid.org/0000-0002-4432-6729
Jan Dlugosz University in Czestochowa, Poland

Emotional Dysregulation of Children and Adolescents as a Cause of Exclusion from the School Environment – Possibilities for Counteracting the Phenomenon

Abstract

Emotional dysregulation, which refers to difficulties in managing, controlling and adequately expressing emotions, is a phenomenon more and more frequently diagnosed among young people disrupting their functioning in many areas, including: interpersonal relationships, everyday activities, but above all education, threatening the phenomenon of exclusion from the school community. However, to prevent this from happening and to ensure that pupils with difficulties in controlling their emotions have equal opportunities for development, appropriate school measures are needed to safeguard their special needs. Some of the possible intervention strategies of the school aimed at creating an optimal environment for the development of a pupil with emotional dysregulation and enabling them to participate fully in the life of the school, but also outside its space have been presented in this article. Among the forms of psychological and pedagogical support dedicated to pupils with emotional dysregulation, the following were mentioned: social skills training, mindfulness, the use of elements of cognitive behavioural therapy and dialectical behavioural therapy, peer mediation and peer tutoring, work on the pupil's positive self-esteem, as well as establishing cooperation with the child's family and involving it in the intervention process. As part of the postulates and indications for practice, attention was drawn to the need for appropriate education of teachers and psychologists, with particular emphasis on preparing staff in the area of early diagnosis of emotional disorders, which in turn is a key issue for effective intervention and minimising the threat of educational exclusion of the pupil**.**

Keywords: emotional dysregulation, social exclusion, intervention strategies.

The phenomenon of emotional dysregulation is being more often diagnosed among children and adolescents and is beginning to pose a serious challenge to nowadays education. Difficulties in managing emotions effectively have a significant impact on the functioning of young people in various spheres of life, including school environment. School, being one of the environments fundamental to social and emotional development, can both support a pupil who is unable to manage his or her emotions and, unfortunately, exacerbate the problem by contributing to exclusion meaning the pupil's isolation from peers and full participation in school life.

The aim of this publication is to outline what the phenomenon of emotional dysregulation is and to point to possible interventions, mainly by the school, aimed at counteracting the exclusion from the school community of pupils struggling to manage their emotions.

Social exclusion

Social exclusion is an extremely complex issue. It is a multi-faceted structure and can occur at many levels (Giddens, 2005), causing divergent interpretations. Although identifying a universal way of understanding exclusion is a challenge beyond the scope of these considerations, it can be assumed that social exclusion means "voluntary isolation or, more often, isolation forced by external conditions" (poverty, unemployment, different skin colour, religious beliefs, disability, environmentally unacceptable behaviour, etc.) (Jarosz 2008, p. 10). One aspect of social exclusion is educational exclusion. Children exposed to exclusion due to their own dysfunctions are characterised by certain problems that contribute to the escalation of the phenomenon, but are also its cause. It seems necessary to point out here, for example: deprivation of needs (which results in their satisfaction in an unacceptable manner), learning difficulties, disorders in emotional and social functioning. The cause of the latter is very often emotional dysregulation. The phenomenon of exclusion at school can take the form of more or less overt segregation of pupils (Lewandowska-Kidoń, Witek, 2012). Adolescent exclusion is characterised by a lack of bonds with peers, rejection by the class team, abnormal relationships with adults, lack of success in the learning process, lack of motivation to learn and make efforts, interests and passions in life, a sense of loneliness or lack of support from positive personal role models (Miłkowska, 2005; Lewandowska-Kidoń, Witek, 2012). There are various consequences of peer rejection: "from feelings of isolation, loneliness and depression to engaging in antisocial behaviour" (Musialska, 2011, p. 75), including risky behaviour, conduct disorders, oppositional defiance, violence, school failure or

dropping out of school. Pupils experiencing such problems require assistance to enable them to fulfil their developmental tasks and their own life chances.

Having the subject of the considerations in mind, the purpose of this paper is to identify the possibilities of counteracting the phenomenon of social and educational exclusion by means of activities (mainly school) in providing psychological and pedagogical assistance to pupils at risk of exclusion. However, prior to their presentation, it is worth considering what the phenomenon of emotional dysregulation is.

Emotional dysregulation – definition, causes, consequences

The process of emotion regulation is a multifaceted phenomenon. When disturbed, it plays a fundamental role in the development of psychopathology (Kaufman, Xia, Fosco, Yaptangco, Skidmore, & Crowell, 2016). It can be defined as the ability to identify, understand and accept emotions, but also (depending on the context) to flexibly manage emotional control (Kaufman et al., 2016). Meanwhile, emotional dysregulation is "the difficulty or inability to experience, process and manage emotions effectively" (Leahy, Tirch, Napolitano, 2014, p.23). It can mean both "overly intense emotional reactions and difficulty modulating or suppressing emotions" (Linehan, 2016 p.32), often leading to impulsive, aggressive or withdrawn behaviour. Marsha Linehan (2016) distinguishes three components of emotion dysregulation: increased emotional sensitivity (i.e., a low threshold of sensitivity to emotional stimuli); increased emotional reactivity (a rapid increase in emotional intensity in response to specific stimuli); and a slow return to an initial emotional state, all of which become problem in controlling impulsive behaviour and the expression of negative emotions, while also contributing to significant difficulties in interpersonal relationships.

The causes of emotional dysregulation are complex and multifactorial (Linehan, 2016). They include both biological aspects, such as abnormal functioning of the nervous system, and environmental factors, such as: stress, violence, instability in the family environment and inadequate patterns of emotion management in the child's environment. Such experiences can lead to abnormal development of the systems responsible for emotion regulation, which in turn results in difficulties in managing emotions. Emotional dysregulation can also result from the neurochemical system disturbance, particularly in the functioning of neurotransmitters such as serotonin, dopamine and norepinephrine (Butcher, Hooley, Mineka, 2020).

Emotional dysregulation gives rise to negative consequences in the area of interpersonal bonds, affecting other aspects of an individual's life as well. In the context of mental health, indoviduals with emotional dysregulation are more

likely to develop mental disorders such as depression, anxiety disorders (Mennin, Heimberg, Turk, Fresco. 2002), personality disorders and eating or substance abuse disorders (Fairburn, Cooper, Shafran 2003). In some circumstances, they can also become a source of conflict with the law, particularly when emotional disturbances become the cause of aggressive or impulsive behaviour.

During childhood and adolescence, emotion dysregulation is often associated with learning problems. It has a significant impact on the that a pupil functions in the school environment, often being the cause of exclusion. Before this happens, however, the child's difficulties may be observed, such as problems concentrating attention, difficult relationships with peers and teachers, "difficult" behaviour (aggression, rebelliousness, etc.) (Bloomquist, 2011), which can ultimately lead to stigmatisation and exclusion.

Reduced ability to concentrate attention and assimilate educational material is one of the problems faced by pupils experiencing concomitant emotion dysregulation. Excessive or inappropriate emotional reactions interfere with the ability to focus attention, leading to difficulties in performing tasks that require prolonged concentration (Mathews, MacLeod, 2005). Intense emotions such as anxiety, anger or sadness become a cause of cognitive overload, which in turn can result in task avoidance, reduced school performance, consequently leading to a decrease in the pupil's motivation to continue education.

As already mentioned, emotional dysregulation can also lead to difficulties in interpersonal relationships, whether with peers, teachers, parents, other adults. It is often associated with behavioural disorders, which seem incomprehensible and disempowering to those around them. Behavioural disorder is a category of psychiatric disorders that encompasses "an established and recurring pattern of behaviour manifested by violations of the rights of others or of social norms and rules applicable to a particular age group" (DSM-5 Diagnostic Criteria for Mental Disorders, 2018, p. 574). Children with dysregulation often react with excessive and inadequate anger or aggression to situations that others find neutral or of little emotional challenge, so they are often perceived as unpredictable and peers avoid contact with them fearing their inadequate reactions. This usually leads to escalating conflicts. Long-term problems in peer relationships lead to lower self-esteem and feelings of loneliness, isolation, and avoidance of social interaction, which exacerbates emotional problems and sustains the vicious cycle of peer exclusion (Cole, Hall, Hajal, 2008). Like peers, teachers or other adults may perceive children who do not manage their emotions properly as "problematic". Educators who are not adequately trained in recognising and dealing with emotional dysregulation see pupil's behaviour as a lack of discipline or so-called "bad parenting". As a result, they may respond to these behaviours in ways that exacerbate the problem, such as through fre-

quent comments, punishment or exclusion from class, which in turn exacerbates the pupil's aggression or withdrawal. The lack of understanding and support from the teachers perpetuates the emotional problems of these pupils, while the educators themselves may feel helpless, leading to their frustration and further exacerbating the conflicts, and ultimately isolating the child. For a pupil who struggles with emotional dysregulation such isolation means a loss of access to positive behavioural patterns and social support, which are crucial for proper development.

Intervention strategies – psychological-educational assistance

In order to effectively counteract the exclusion of emotionally dysregulated pupils, it is necessary to implement comprehensive intervention strategies in schools in the form of psychological and educational support. One form of such assistance is access to a school psychologist, whose tasks should include helping to develop social and emotional skills, organising mindfulness training or introducing elements of cognitive behavioural therapy (CBT), which have been shown to improve the wellbeing of people with emotional dysregulation (Hofmann, Hayes, 2020; Barlow et al, 2020; Beck, 2005; Kendall, 2006).

The development of emotional skills, which includes the ability to recognise, understand, express and regulate emotions, is essential for effective functioning in everyday life (including education). Despite the ambiguity of definition, social, or social and emotional skills are equated with the widely accepted, conflict-free functioning of the individual, which seems to be an extremely important finding in the context of emotional dysregulation and its consequences. Research in this area is particularly abundant with regard to the relationship with expressions of aggression and violence (Frey et al., 2005). Low levels of social competence can manifest themselves in aggressive behaviour and have also been linked to peer rejection (Volling, Mackinnon-Lewis, Rabiner, Baradaran, 1993). A child's aggressiveness (as an expression of difficulty managing their own emotions) increases the risk of rejection by the peer group and may perpetuate tendencies towards asocial behaviour (Urban, 2012). The most recognised social competence training programme, Aggression Replacement Training (ART) (Goldstein, Glick, 1994), has seen numerous implications in many countries, including its application in Poland (Morawski, 2005; Pawliczuk, Łobodda, Nowińska, 2015; Czarnecka-Dziulak, Drapała, Ostaszewski, Więcek-Durańska, Wójcik, 2015). It is worth mentioning that this programme is based on the assumptions of social learning theory and the cognitive-behavioural stream, considered to be one of the most effective in working on emotional dysregulation. According to cognitive behavioural therapy, thoughts, emotions and behaviour have impact on one

another, so that by changing one of these elements we can influence the others. It mainly focuses on changing distorted thinking (e.g. challenging and reformulating catastrophic thoughts), modifying maladaptive behaviour and developing more constructive ways of coping (Dziektarz , Wojcik, 2022; Beck, 2005; Kendall, 2006).

Similarly to CBT (cognitive behavioural therapy), dialectical behavioural therapy (DBT) (which includes elements of CBT) should be used in difficulties with emotion management, which focuses on developing emotion regulation skills (which helps to reduce the intensity of psychological symptoms) and identifying and modifying maladaptive behavioural patterns that contribute to difficulties in interpersonal relationships with both peers and adults (Linehan, 2016; Neacsiu, Bohus, Linehan, 2020).

A response to the need for schools to provide appropriate interventions to help children and young people cope more effectively with emotional dysregulation is mindfulness training. The first formalised mindfulness-based programme to support work with stress was MBSR (Mindfulness Based Stress Reduction) by Jon Kabat – Zinn (Kabat-Zinn, 1990). Mindfulness means the full acceptance of awareness of the current experience. Mindfulness is also referred to as "acceptance without valuing", observation or orientation to the present moment (Germer, 2015, p. 34). This practice allows one to deepen self-awareness and learn more about one's own emotions, thoughts and reactions to difficult experiences. In addition to their impact on the emotional realm, formal mindfulness training practices focus on exercising multiple qualities of attention, improving cognitive and metacognitive functions. Their use can improve the efficiency of the learning process, affect overall school functioning in terms of increasing knowledge, competence, thus contributing to improved school grades. According to clinical research, mindfulness trainings also promote improved interpersonal relationships (Craswell, 2017). A decrease in impulsive and aggressive behaviour and an increase in optimism allow for improved integration and group cooperation and a reduction in conflict. This results in the accumulation of positive experiences in the area of social relationships and perceiving them as more pleasant and desirable (Brown, Creswell, Ryan, 2015). In addition to the school psychologist, mindfulness practice can also be introduced by teachers and parents in family homes. Although for many, mindfulness may seem a bit complicated, one does not have to be a professional trainer to practise mindfulness (at school or at home), as a few activities can be incorporated into subject lessons or parenting lessons and implemented consistently throughout the school year. The first steps are simple techniques such as concentrated breathing, awareness of the child's body or attentive observation of the surrounding world. The decision to introduce mindfulness into daily rituals can be the start of an extraordinary journey to achieve control over one's own emotions. Mindfulness training is not psychotherapy, however, as confirmed by sci-

entific research in psychology and neuroscience, it is an excellent complement to work on mental health and improving mental resilience (Żejmo, 2022).

An effective tool, or type of intervention to help reduce social isolation of emotionally dysregulated pupils, is peer group support. In recent years, there has been increasing interest in mediation, including peer mediation, although it still seems to be underestimated in Polish schools. They have the advantage that they are conducted by another child, i.e. a person who knows and understands the needs and problems of their peers very well due to their own membership in the group of pupils (Raszewska-Skałecka, 2013). They also allow children to resolve conflict situations without the involvement of adults. Peer mediation programmes teach young people how to resolve conflicts in a constructive and supportive way (Duda, 2019). Pupils with emotional dysregulation, who are more likely to have conflicts with their peers, can benefit from this type of support, which helps them to establish and maintain good relationships. Their participation in mediation proceedings has a number of positive effects in different spheres of their lives. It provides an opportunity to talk about their experiences, feelings, and facilitates the discharge and expression of emotions, which is particularly important in emotional dysregulation. It is also an opportunity to understand the other person and the motives behind their actions. Peer mediation is listed as an evidence-based method by the *National Professional Development Center on Autism Spectrum Disorders*. This means that it is a method the effects of which have been demonstrated in scientific studies and recommended for use in educational settings (Wong et al., 2015). Research findings indicate an increase in the level of empathy and competence in recognising other people's feelings in adolescents who have received peer mediation training and gained knowledge about the specifics of this procedure, the methods and techniques used (Sahin, Serin, Serin,2011).

Having in mind the fact of including peers in the assistance directed to pupils with emotion dysregulation, it is worth noting peer tutoring, which can, in addition to its scientific (academic) character, developing specific areas of knowledge and skills, take the form of developmental tutoring, referring mainly to humanistic skills and knowledge, social and organisational and communication skills (Brzezińska, Rycielska, 2009; Budzyński, 2009). Researchers and advocates of tutoring (e.g. Slavin, 2013; Topping, 2005) cite numerous studies confirming that the use of peer tutoring has benefits for both the cognitive development of participants and social and emotional development, including, among others, the development of empathy, the strengthening of bonds between pupils, increased self-esteem.

Whether it is peer mediation, peer tutoring or other forms of peer support, it is important to emphasise their importance in increasing the awareness of mental health of children and adolescents, their understanding of what their peers are fac-

ing and their willingness to support them. Raising awareness of mental health among peers leads to a more inclusive and supportive school environment.

Having in mind the possible negative events that a pupil with emotional dysregulation may have experienced, such as educational failure, criticism from peers or educators as well as parents, it is important to take care of the pupil's self-esteem and motivation. Despite the fact that the topic of self-esteem is so popular among theorists and empiricists, the term "self-esteem" has not yet been clearly defined. Despite the diversity of its approaches, it is quite often emphasised that self-esteem is a set of opinions and judgements relating to one's own person, e.g. "intelligence, physical attractiveness, sense of humour, interpersonal competence" (Strelau, 2003, p.579). In other words it is a way of perceiving oneself, it can be a positive or negative attitude towards the Self (Schaffer, 2018; Brown, 1998; Rosenberg, 1965).

Children with low self-esteem often perceive their failures as the result of a lack of ability rather than difficulties beyond their direct control, and they most often locate the source of failure within themselves, attributing it to internal, fixed and global factors (e.g. low intelligence), and successes to external factors, e.g. luck. This perception leads to avoidance of difficult tasks and reduces motivation to undertake further activities, which are often restricted due to an inadequate fear of failure (Crocker, Luthanen, Cooper, Bouvrette, 2003). Underrated self-esteem can contribute to the phenomenon of the self-fulfilling prophecy, in which pupils begin to behave in ways that are consistent with their negative expectations of their own abilities (Wood, Heimpel, Manwell, Whittington, 2009). If pupils believe that they are unable to succeed, their behaviours, such as task avoidance, lack of effort or withdrawal, may actually contribute to failure. This in turn reinforces their negative self-esteem and leads to further exclusion from the educational process.

Low self-esteem not only affects educational achievement, but also interpersonal relationships. Pupils with low self-esteem may avoid interacting with their peers out of a sense of being inferior or not fitting into the group (Schaffer, 2018). Thus, one of the most important aspects of intervention is to support the development of positive self-esteem in pupils. The school psychologist, teacher and parent can support the child by offering constructive feedback (Hattie and Timperley, 2007), recognition for effort and celebration of small successes. It is important that pupils develop a sense of self-worth based on their achievements and not just on school assessments. What is more, there is a need for teachers, educators and school psychologists to use a range of exercises and trainings to raise pupils' self-esteem to a higher level, including play therapy, interpersonal training, psychodrama, music and bibliotherapy, and relaxation exercises (Wosik-Kawala, 2007). An important part of self-esteem-building methods is training in verbalising what children like about themselves and consider to be

their strengths (it is important that they also gather this kind of information from others during the exercises). Improving positive thinking about oneself is supported by completing unfinished sentences (e.g. "I am cool, because…..", "I am valuable, because…..") (Chomczyńska-Miliszkiewicz, Pankowska, 1998, p.53). Building self-esteem is also fostered by working on the "inner monologue". It develops the ability to notice and transform sentences that lower self-esteem. The self-confidence-draining thoughts include: negative sentences about oneself ("I am clumsy"), catastrophising sentences ("Today they will laugh at me") and self-punishing sentences ("As usual, I have made a fool of myself'). It is necessary to replace these sentences with self-esteem-building forms, such as: "Well, I don't always show off my dexterity", "I often think like that and then it turns out that nobody laughed at me", "I was surprised that I didn't know how to behave" (Chomczyńska-Miliszkiewicz, Pankowska 1998, p.53).

Moreover, it is worth noting that when working with a pupil with emotional dysregulation, it will be valuable for the teacher to take care to individualise teaching, both in compulsory and additional educational classes. This means adapting the ways, methods and means of teaching and enforcing knowledge to the capabilities and needs of the child with emotional dysregulation. The extent of the adaptation may include, among other things: rules for the presentation of knowledge (e.g. avoiding forum questioning); dividing tasks into stages; setting "partial" deadlines, etc. Pupils who receive tailored support are more likely to be able to manage their emotions better and reduce the risk of exclusion.

In relation to intervention strategies, the pupil's family and the need to provide them with appropriate support cannot be forgotten either. The involvement of the family in the intervention process is fundamental for the educational success of the child. School-family partnership programmes, which should include regular meetings, parental support and parental education (e.g. parent club, parental support groups), can significantly contribute to the improvement of the child's functioning in the school space. This type of support offered to the family is aimed at strengthening parental competences, improving the relationship between parent and child, supporting the child's development through joint activities between the school and the family home. However, these forms may not be sufficient, therefore it seems that close cooperation between the school and entities of the local environment providing assistance to the child and family is needed, consisting, among other things, in joint problem solving, sharing of knowledge and experience, and implementation of the developed solutions (Lewandowska-Kidoń, 2017).

It is worth emphasising that the intervention strategies outlined in these considerations, such as emotional skills development programmes, mindfulness training, peer group support, work on pupil self-esteem, mental health education, etc., are intended to help pupils to better manage their emotions and can

be implemented both in the classroom and as additional forms of psychological support. Individual and group therapy can be particularly relevant. In the context of emotional dysregulation, individual therapy allows for the creation of a safe space where the patient/pupil can freely explore their emotions and thoughts and the therapist has the opportunity to tailor interventions to individual needs, while group therapy offers the unique benefits that come from interacting with others with similar emotional problems.

Postulates

A child's emotional dysregulation and often associated behavioural disorders can lead to exclusion, posing a serious challenge to the educational system and society. The consequences of exclusion are far-reaching, affecting the educational, social and psychological development of the pupil. In order to effectively counteract these problems, it is necessary to implement integrated intervention strategies. However, in order to create proper psychological and pedagogical care and to be able to counteract the consequences of the emotional dysregulation experienced by adolescents, special attention must be placed on qualifications of teachers, not only their further education, postgraduate studies, courses, etc., but, above all, the attention must be placed on preparing educators reliably already at the stage of academic training and to equip them with tools and strategies that will enable them to effectively manage problematic behaviour in the classroom. A particularly important task is to prepare teachers in the area of early diagnosis of emotional disorders, which in turn is a key issue for effective intervention. Early recognition of emotional problems allows for quicker implementation of appropriate measures and reduces the risk of the disorder worsening and having a negative impact on the child's development.

It is very important to prepare both educators and school psychologists in de-escalation techniques, developing communication skills and working with pupils with special needs, as well as developing empathetic and supportive attitudes among peers, which can significantly improve school functioning, foster a supportive learning environment and reduce the risk of exclusion. It is also worth noting that it is essential to train professionals in peer collaboration, which can provide comprehensive support to pupils with emotional problems. Training should include information on available resources, procedures for referring pupils to specialist and strategies for working together to develop a plan to support the pupil.

Having in mind counteracting the effects of a pupil's emotional dysregulation, the involvement of the child's family in the process cannot be forgotten, thus creating a more inclusive and supportive educational environment. In ad-

dition, working with pupils' families and providing support at home can significantly improve the effectiveness of school-based interventions. Involving the family in the intervention process, through education about emotional disorders and active participation in therapeutic programmes, furthermore allows for the creation of a synergistic relationship that is supportive of the child's struggle with an internal, often incomprehensible and difficult world of emotions. It facilitates knowledge of this world and control of the experiences connected with this world, while at the same time providing an opportunity to realise the ideas of diversity, equality and inclusion in education.

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Dysregulacja emocjonalna dzieci i młodzieży przyczyną wykluczenia ze środowiska szkolnego – możliwości przeciwdziałania zjawisku

Streszczenie

Dysregulacja emocjonalna odnosząca się do trudności w zarządzaniu, kontrolowaniu i adekwatnym wyrażaniu emocji jest zjawiskiem coraz częściej diagnozowanym wśród młodych osób i zaburzającym ich funkcjonowanie w wielu obszarach, m. in.: w relacjach interpersonalnych, codziennych czynnościach, ale przede wszystkim w sferze edukacyjnej, grożąc zjawiskiem wykluczenia ze społeczności szkolnej. Aby jednak do niego nie doszło, i by uczniowie borykający się z trudnościami kontrolowania własnych emocji mieli równe szanse rozwoju, potrzebne są odpowiednie działania szkoły, zmierzające do zabezpieczenia ich specjalnych potrzeb. W niniejszej publikacji zostały nakreślone niektóre z możliwych strategii interwencyjnych szkoły zmierzających do stworzenia optymalnego środowiska dla rozwoju ucznia z dysregulacją emocjonalną i umożliwienia mu pełnego uczestnictwa w życiu szkoły, ale i poza jej przestrzenią. Wśród form pomocy psychologiczno-pedagogicznej dedykowanych uczniom z dysregulacją emocjonalną przywołane zostały m.in.: treningi umiejętności społecznych, mindfulness, stosowanie elementów terapii poznawczo-behawioralnej i dialektyczno-behawioralnej, mediacje rówieśnicze i tutoring rówieśniczy, praca nad pozytywną samooceną ucznia, a także nawiązanie współpracy z rodziną dziecka i zaangażowanie jej w proces interwencyjny. W ramach postulatów i wskazań dla praktyki zwrócono uwagę na konieczność odpowiedniego kształcenia nauczycieli i psychologów, ze szczególnym uwzględnieniem przygotowania kadr w obszarze wczesnej diagnozy zaburzeń emocjonalnych, co z kolei jest kluczową kwestią dla podjęcia skutecznej interwencji i minimalizowania zagrożenia, jakim jest edukacyjne wykluczenie ucznia.

Słowa kluczowe: dysregulacja emocjonalna, wykluczenie społeczne, strategie interwencyjne.