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*Characteristics of Emotional and Behavioral
Disorders of Children and Youth*

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***For my children, Tim and Missy,
and their children, Rachel, Loren, and Emma***

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In a classic treatise on definition and identification, Bower (1981) defined “emotionally handicapped” students as those exhibiting one or more of five characteristics to a marked extent and over a period of time (pp. 115–116):

1. An inability to learn which cannot be explained by intellectual, sensory, or health factors
2. An inability to build or maintain satisfactory interpersonal relationships with peers and teachers
3. Inappropriate types of behavior or feelings under normal conditions. . . .
4. A general, pervasive mood of unhappiness or depression. . . .
5. A tendency to develop physical symptoms, pains, or fears associated with personal or school problems

According to Bower, the first of these characteristics, problems in learning, is possibly the most significant school-related aspect of emotionally handicapped youngsters’ behavior. Another important feature of his definition is the inclusion of degrees or levels of severity.

Emotional handicaps may be displayed in transient, temporary, pervasive, or intensive types of behavior. To complete the definition, it would be necessary to establish a continuum in which the degree of handicap can be perceived and perhaps estimated, especially as it relates to possible action by the school. One could begin such a continuum with (1) children who experience and demonstrate the normal problems of everyday living, growing, exploration, and reality testing. There are some, however, who can be observed as (2) children who develop a greater number and degree of symptoms of emotional problems as a result of normal crises or stressful experiences, such as death of father, birth of sibling, divorce of parents, brain or body injury, school entrance, junior high school entrance, or puberty. Some children move beyond this level of adjustment and may be described as (3) children in whom moderate symptoms of emotional maladjustment persist to some extent beyond normal expectations but who are able to manage an adequate school adjustment. The next group would include (4) children with fixed and recurring symptoms of emotional maladjustment who can with help profit by school attendance and maintain some positive relationships in the school setting. Beyond this are (5) children with fixed and recurring symptoms of emotional difficulties who are perhaps best educated in a residential school setting or temporarily in a home setting. (Bower, 1981, p. 119)

Bower’s definition has many good points, particularly its specification of five characteristic types of behavior. Still, it does not easily enable one to determine that a particular child or youth is or is not emotionally handicapped (see Epstein & Cullinan, 1998). There is much latitude in terms such as *to a marked extent* and *over a period of time*. There is also a need for subjective judgment about each of the five characteristics. Consider the problems in answering these questions:

Just what is an inability to learn? Is it evidenced by a one-year lag in achievement? Six months? Two years? Does it include inability to learn appropriate social behavior, or only academic skills?

How do you establish that an apparent inability to learn is not explainable by intellectual factors or health factors? Do health factors include mental health factors?