SPECIFIC APPROACH TO CHILDREN WITH BEHAVIOURAL PROBLEMS

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Abstract

This is a qualitative research study focused on the issue of children with behavioural problems in the Czech Republic. It represents a collection of complete opinions of experts from various professions on the manifestations, causes and possibilities of diagnostic and, in particular, intervention methods in these children. The goal of the study was to define the time-proven approaches, methods and forms of work that could be generalized and recommended as examples of good practise for working with the given target group under the conditions of schools and school consulting facilities.

Key words: *behavioural problems, behavioural disorders, a child with a behavioural problem, manifestations of hyperactivity, impulsiveness, and aggression, attention disorders, institutions, family environment*

Introduction

In the Czech Republic, the concept of behavioural problem or behavioural disorder is usually understood as a negative deviation from the standard regarding the manifestations of a child's behaviour. Various terms have been used from different classification systems – behavioural disorder, behavioural problem, hyperkinetic disorder, specific and unspecific behavioural disorder, ADHD.

The question remains as to what is the actual behavioural standard. Lechta states that the concept of standard, if understood as fiction, pertains to the indispensable manifestations of heterogeneity in children in schools and school facilities (Lechta, 2010). On the other hand, it is necessary to define the standard for the society to function as a whole. The behavioural standard is anything that is evaluated as common and is expected or presumed in the given individual. The expectation is influenced by the child's age, the situation in which he/she expresses himself/herself, and the cultural effects. We can never evaluate an individual's behaviour without his/her social context (Pokorná in Hadj-Moussová, 2004; Lechta, 2010).

The term behavioural disorder should have clearly set defining criteria; otherwise, various phenomena could be included, sometimes as standard development, and other times as the manifestations of temporary social maladjustment, and, finally, as clearly antisocial behaviour (Hort et al., 2000; Paclt at al., 2007; Richter et al., 2012).

Conversely, the concept of ADHD or hyperkinetic disorders (note: in the Czech Republic, the 10th revision of the International Classification of Diseases is used, but the term ADHD

from another classification system is also commonly used) includes behavioural disorders developed by the influence of various external and internal factors on the basis of the existing proven debilitation or changesto the central nervous system.

Current description (Czech Republic)

We can state that despite all efforts, there still persists a non-uniform approach between school and healthcare facilities dealing with the issue of behavioural problems, behavioural disorders and ADHD in the Czech Republic.

We can also notice a non-uniform terminology used in this sphere – medical, psychological, special education; however, all these divisions are justified and make sense. With regard to the importance of an interdisciplinary approach and the indisputable requirement for not only diagnostic but also therapeutic approaches to children with problematic behaviour being complex, we stem from the division of behavioural disorders in the classification system according to the International Classification of Diseases, 10th revision.

Research goals

The goal of the research was to collect the views, opinions and attitudes of experts from various professions (special educators, ethopedists, consulting, clinical and school psychologists, social workers and curators, psychiatrists, psychotherapists) with respect to the manifestations, causes and the possibilities of diagnosis and intervention in children with behavioural problems.

We were looking for time-proven approaches, methods and forms of work that could be generalized and recommended as examples of good practise. These can also include specifying the pitfalls and risks of universalizing these procedures, approaches and methods and, last but not the least, the search for inspiration for professional work with children having behavioural problems.

Addressing the problem; formulation of research issues

As stated in the previous text, the noticeable behaviour, behavioural problems, behavioural disorders, and disordered emotions constitute a semantically non-uniform context which, on the one hand, causes professional, contextual and formal fragmentation, but, on the other, shows that it is not possible to determine and recommend methodological procedures, methods and programmes resulting in a positive change in the child's behaviour if applied to a child with a behavioural problem.

We tried to formulate four spheres in which we defined the causes and manifestations of problematic behaviour, the period when a problem arises, the bearer of the problem, how the problem is exhibited in the child's behaviour, how it is manifested, and the child's emotional experience relevant to the problem. We focused on the evaluation, diagnosis, programmes and methods that work, and onthepossible examples of good practise duly recommended by the respondents. The following research issues ensued from these spheres:

• Which spheres of the child's manifested problematic behaviour are the most noticeable and have the decisive influence on his/her social relationships?

• Is the child's schoolwork and success influenced by the manifested problematic behaviour?

• Is it necessary to create special diagnostic batteries for diagnosing and evaluating the manifestations of children's problematic behaviour (in the sphere of social relationships, emotional experiencing, empathy, cognitive functions, etc.)?

• Can the professionals' experience in the used methods, programmes, approaches and techniques be generalized as example of good practise?

• Is it possible to refer to these examples of good practise as recommended procedures for working with children with behavioural problems?

Used methods

The research used the qualitative research methods. We believe that they satisfy the requirement for methods of collecting data as being open, and place emphasis on the subjective importance and interpretation.

The goal was to obtain a complex and broad description of the professionals' experience, focused on the specifics of children with behavioural problems, the experiencing of the problem itself and its bearer, the child's subjective experiencing, and the professionals' attitudes to these children or the given problem. The method of semi-structured interview was applied.

Selection of informants; group characteristics

We applied the method of intentional selection. It is a procedure aimed at looking for participants based on their certain characteristics. The selection criterion included the selected characteristic feature or its exhibition.

Basic selection criteria:

• Obtain the broadest possible range of professionals working with the given target group, having diverse experience as to its length and focus, and holding various positions.

• The informant is able to formulate his/her experience and evaluate the suitability of its generalization.

• The informant is willing to be interviewed.

Interview structure

The structure of the interview stemmed from the concept of spheres ensuing from the research questions, and four spheres were set.

The **first sphere of questions (What is it?)** focused on definingnoticeable behaviour when the noticeable element becomes a problem, specifying the perception and conception of the term behavioural disorder from the respondent's perspective, naming the bearer of the problem, and perceiving child's personality and the disharmonic development of personality. It also focused on characterizing the child's family and the school environment and his/her relationships with peers and authorities.

The **second sphere of questions (How is it for a child and the people around him/her?)** was devoted to the manifestations of the child's problematic behaviour. We wanted to know the participating persons' opinions on these children's relationships in the school environment, success and failure, and how they were related to these children's experience and satisfaction.

The **third sphere of questions (How is it recognizable?)** was characterized by the possibilities of evaluation and diagnosis – in the school environment, consulting services, diagnostic institutes, etc., being both psychological and special education or, possibly, neurological and pedopsychiatric.

The **fourth sphere of questions (What can be done about it?)** looked for the possibilities of using therapeutic and psychotherapeutic approaches, training programmes, recreational activities, and the measures of integrating a pupil with a specific behavioural disorder into special schools and classes for these children.

Research course

The collection of data took place from June 2012 to May 2013. Fourteen interviews with 14 informants were undertaken. The informants were selected intentionally from the

whole Czech Republic. The main endeavour was to obtain their most varied sample. One of the selection criteria was at least ten-year experience in working with the given target group. Differences consisted in the profession, position, sex and education. The respective informant was informed about the implemented research and its purpose, and the date of the interview was pre-agreed with him/her. The course corresponded to the usual phases of an interview, from the preparatory phase through the core up to the conclusion and completion. The obtained data was fixed through Dictaphone and each respondent's anonymity was guaranteed. The fixing of data created material that was subsequently processed accordingly.

Results and analysis of the research

The process of analysing and interpreting is associated with procedures the aim of which is to minimize the risk of unreasonable distortion that may arise by processing, analysing or interpreting qualitative data.

1. Perception and conception of children's behavioural problems

The first sphere of questions focused on specifying how individual informants perceived the terms behavioural disorder, behavioural problem or noticeable behaviour. All of the 14 informants provided their opinions, but each of them accentuated a different sphere – behavioural disorder, noticeable behaviour, specific exhibitions (attention disorder, hyperactivity, impulsiveness, aggression) in the context of the child's family, school, and teachers and, last but not the least, in the context of the child himself/herself. They considered the fact as to which individual manifestations of problematic behaviour in a given environment disrupted most the common functioning of the child and his/her class and family, what kind of families the children manifesting problematic behaviour came from, and who could do what to resolve the problem. The informants did not indisputably exceed the framework of the given sphere. The influence of their profession and position was strongly evident, and not all of them reacted to all the available spheres of questions. One of the informants pointed out: *"I don't like using labels..."* (informant No. 14)

• **Noticeable behaviour**

Three informants (out of 14) reacted to the issue of noticeable behaviour. The following statement was the most typical: *"The child's noticeable behaviour exceeds expectations with regard to the child's age or the child does not get on well with anybody anywhere."* (informant No. 3)

• **Behavioural disorder**

Twelve informants out of the 14 provided their opinions in this context. Their answers were manifold. Eleven respondents differentiated between behavioural disorders and ADHD, and only one of them stated: *"The real behavioural disorder is hyperkinetic or hypokinetic only when the problems are reflected in the schoolwork."* (informant No. 5)

The most frequent answers could be expressed or summarized by the following statement: *"... behavioural disorder is a state when the child stops functioning, is unable to make friends, has no relationships, everything goes together – the behaviour, relationships, emotions, learning, failure, and behaviour without restraints. Nothing works in this child and one must wait until the emotions fade away."* (informants No. 1 and 11)

Twelve informants out of the 14 agreed that the most frequent manifestations of problematic behaviour included truancy, theft and aggression.

• **Behavioural problems**

Ten out of the 14 informants commented on behavioural problems from the perspective of when noticeable behaviour became a problem, and on who was the bearer of the problem, whether a family member, the teachers or the child himself/herself. Informant No. 5 stated an

original opinion: *"Many children labelled as behaviourally disordered do not actually have a behavioural disorder, but their problems stem from the boundless upbringing or its bad system showing that the parents do not bring up their children towards moral values."* This informant also used an original to-the-point term "disordered upbringing".

In the context of the above categories, the respondents also provided opinions on the school and the prevailing family environments, both the child's and the teacher's personality, authority and power or helplessness, and the development-related phenomena.

● **School environment**

All of the 14 informants provided their opinions on the teacher's personality, authority and power rather than on the school environment in general. Some of them also addressed the relationships in the class and the relationships between an individual and a group. They agreed that teachers did not know how to deal with children manifesting behavioural problems whensuch manifestations of problematic behaviour disturbed the teaching process. Five out of the 14 informants stated that children with behavioural problems did not respect the teacher's authority, and 3 informants agreed that teachers could not express respect towards the children. Informant No. 3 stated as follows: *"...teachers express allergy towards children."* Informant No. 7 remembered the teachers' different ages: *"Younger teachers have a closer relationship with children, but their classes are chaotic since they are not able to click the children into shape in the sense of their work obligations. Conversely, older teachers take account of these children, but not in the way that would be suitable. They are able to reduce the quantity and the contents, but not the attention – the child then destroys the whole structure of a lesson."*

Four out of the 14 informants reacted to the power and helplessness in relation to both pupils and teachers. Informant No. 14 stated the following: *"These children strongly feel the need for protecting their helplessness and often manifest aggression. Aggressors strongly need the position of power since such position legally enables the strengthening of this principle."*

Informant No. 11 stated an original opinion: *"...teachers do not express attitudes but only play their role and confuse the role with personality, which is more noticeable in women – teachers."*

● **Family environment**

Most informants referred to behavioural problems being associated with the family environment. Twelve informants expressed their opinions in the family context, six of whom agreed that if the parents did not cooperate, the child could not be approached efficiently either: *"...if the parents do not cooperate, it leads nowhere"* (respondent No. 2) or *"...without the family's correction, every effort is futile"* (respondent No. 12). Two more informants agreed that *the percentage of the family functioning correctly was infinitesimal*in children included in school facilities to undergo institutional education (informants No. 12 and 13). The other statements were unique, original and inspirational, for example: *"The parents do not like the fact that the school is picking on them, which results in them not attending school meetings and being reluctant to hear negative news about their children again and again. They are not sure whether they are good parents and have doubts about their role."* Note: 97% of elementary school teachers in the Czech Republic are women.

● **Hyperactivity manifestations, attention disorders, aggression, impulsiveness**

The informants paid most attention to the issue of attention that was addressed by six out of the 14 informants. The statement expressed by informant No. 8 was fitting: *"... concentrating attention is physically exhausting, even painful, for a child. It is difficult for a child to stay attentive for 4 hours."* Five informants accentuated both the physical and verbal manifestations of aggression. Three informants commented on hyperactivity and three informants noted that these children experienced problems not only in their relationships with authorities, but, in particular, with their peers: *"They cannot make friends."* Two informants

referred to the fact that children with behavioural problems did not respect and have no boundaries. Two informants agreed to the opinion that these children committed crimes. One of the informants stated that they most disliked these children's aggression accompanied by impulsiveness.

2. What are the manifestations of problematic behaviour for a child and the people around him/her?

The second sphere of questions focused on how problematic behaviour was perceived by the child himself/herself, his parents, siblings and close relatives, how the behavioural problems were manifested, what the child and the people around him/her did not like, and how his/her day-to-day life was disrupted. Among other things, we also focused on these children's school success and failure, and their satisfaction with schoolwork.

Again, the topics penetrated into other spheres of questions. What is interesting is that the answers reflected the respondents' experience acquired within their work and oftentimes related to the institution where they work.

• **Family**

The family and the importance of its role in a situation of a child with a behavioural problem were dealt with by 11 out of 14 informants. In their statements, all of them expressed the opinion that the parents' role was crucial. If the parents do not cooperate with other institutions, it is very difficult to expect a positive change in the child's manifested behaviour. Most opinions were characterized by the following statement: *"A family is psychosocially disrupted if ADHD vaults over a behavioural disorder. These families are not functional and do not provide support. In particular, mothers fail."* (informant No. 1)

As stated by informant No. 13: *"for working with the family, family therapy is effective, but it is hardly ever implementable."* Or informant No. 6: *"Many parents do not perceive the child's problematic behaviour as a problem and have different social norms."*

• **Institutions – Pedagogical Psychological Consulting Room, Body for Social Legal Protection of Children, School, Teachers' Assistants**

This sphere of questions was considered by 12 out of 14 informants. The spectrum of answers was broad. Each inoformant defined his/her answer from his/her point of view. The answers were original and each respondent accentuated something different based on which a varied range of answers was created. An identical opinion was expressed only by those working in the same positions, for example, social curators or school consultants. Four informants (out of 14) expressed their opinion on the topic of teachers' assistants in children with ADHD or a behavioural disorder. For example: *"If the child does not talk with an assistant, it is very problematic..., I attend therapy so as not to have an assistant..."* (informant No. 7), which was also completed by informant No. 6: *"....the assistant must talk not only with the child but also with the teacher."* The importance of teacher's personality is highlighted by the statement of informant No. 11: *"....the best teacher for a child with ADHD is the one having a child with ADHD at home."*

• **School success**

The importance of success at school or the fact that children with behavioural problems experience failure at school was considered by 8 out of 14 informants. The most typical statement was as follows: *"...very few children with a behavioural disorder experience success at school. Teachers forget to appreciate, praise and encourage..."* (informant No. 8) or *"it depends on how this child is accepted by a group when he/she has not experienced success at school in the long term or does something for what he/she is appreciated by the group regardless of its negative nature"* (informant No. 9). The statement of informant No. 1 was also fitting: *"The risk of failure at school in children with ADHD is associated with the extent*

to which the grade corresponds to the child's abilities and to which it evaluates that the child is naughty at school, that is, manifests behavioural problems."

• **Problem, reflexion of the situation by the child himself/herself and his/her inner world**

These topics were addressed by 10 out of the 14 informants. We joined the problem, the reflexion of a situation by the child himself/herself and the conception of his/her inner world into one group since they overlapped in the respondents' answers. The following statement can be considered as typical: *"The child is not able to admit that he/she has a problem..."* (informant No. 5). Other informants (No. 13, 5 and 4) focused, in this context, on the child's motivation, which was represented by the following most frequently expressed statement: *".... these children's motivation is purposeful..."* Conversely, informant No. 12 dealt with these children's inner world: *"The children's inner world is not worked with, it is generally known. We name the problem on the outside, but nobody wants to know more. The workers have no capacity. The investments they bring are definitely not worth it."*

3. How can a child with behavioural problems be recognized?

In the third sphere of questions, we looked for answers to questions relating to the evaluation and diagnosis of children with behavioural problems, what needed to be accentuated in these children in the diagnostic process and, conversely, what was not essential, or, possibly, which diagnostic tools were considered as time-proven by the respondents and were used in their work.

This sphere received the fewest answers (11 out of 14 informants). The most striking were the contradictory statements. Four out of the eleven respondents who provided their opinion on the given topic stated that they did not need the diagnosis and diagnostic tools (in particular, the examination of the structure of intellectual abilities) and did not consider them as important. For example, informant No. 9: *"...I do not need any intellectual abilities, it is like the performance of an engine..."* Other informants (No. 3 and 4) stated that they did not diagnose children, but were only sending them for examination if needed. Conversely, informants No. 2, 6, 7 and 11 emphasized its irreplaceable role and accentuated, in particular, the projective testing methods and the emphasis on discovering the personality potential and social relationships of children with behavioural problems. Informant No. 6 stated as follows: *"For diagnosis, I must have a structure of intellectual abilities in order to exclude, for example, a slight mental retardation..."*

An interesting opinion was expressed by informant No. 11: *"The diagnosis in children with behavioural problems does not work under greenhouse conditions, for example, of a school consulting facility. The child cannot be encouraged in his/her context. It can only be recognized during interaction with other children, that is, in a group or a class."*

Informant No. 8 stated as follows: *"...to determine the diagnosis as a behavioural disorder, it is essential to consider his/her family environment."*

Three informants (out of 11) would welcome the development and extension of the approaches of dynamic diagnosis that is not spread in the Czech Republic at all in the sphere of children with behavioural problems.

4. How to work with these children?

The last sphere of questions focused on recommending how to work with these children, whether there were any approaches, methods and forms of work that could be generalized and recommended as examples of good practise. The answers were considerably manifold. However, we can state that the most frequent partial agreements were reached in this sphere.

• **Relationship, respect**

Eleven informants (out of the 14 informants) stated that when working with children with behavioural problems, it was the most substantial for the child to feel that the adult has a

relationship with, and respect for, him/her. *"A relationship is content - the client should meet his/her therapist - and, conversely, the technique is a form – I must find what is suitable..."* (informant No. 14)*, "...it works for them to believe me; relationship, trust, risk of worker's job – exhaustion..."* (informant No. 12)

- **Rules, structure, thoroughness, justice**

Eight of the 14 informants stated that the set rules, the structure, thoroughness and justice were important in relation to these children. For example, informant No. 6 stated as follows: *"Thoroughness is the alpha and the omega, even when the requirements are reasonable..."*

- **Institutions' cooperation**

The necessity of cooperation of all of the involved institutions, that is, the family, the school, social curators, psychiatrists, was accentuated by 6 out of the 14 informants.

- **Workers' lifelong education; professional erudition, experience**

Six out of the 14 informants accentuated the need for workers' further education in the form of therapeutic training, courses, training of social and communication skills, etc.

However, the informants did not reach an agreement on any approach that could be generally recommended. For this reason, the recommended approaches and methods included, for example, the Feuerstein's method of Instrumental Enrichment, weekend trips for children, individual, group and family therapy, parent groups, or experience-based education. Two informants agreed on the method of filming the interactions, but each of them applied it differently. *"I film them without a camera. They describe how it is to steal, how they enjoy it and how they could enjoy something else..."* (informant No. 9). Conversely, informant No. 7 stated as follows: *"...working with a camera is interesting. The children like seeing themselves. They watch the record together and evaluate it."*

Resume

- Most of the informants (12 out of 14) identify with the term behavioural disorder.
- Seven (out of the total number of 14 informants) associated the demonstration of behavioural disorder in children with impaired social relations, failure at school and emotional disorders.
- 10 out of the 14 informants perceived, as interesting food for thought, the demonstration of behavioural disorders in children as contemplating on who actually has the problem (the child or the family members, school staff, etc.).
- All 14 informants agreed on the fact that teachers have significant problems with children with behavioural disorder and they are not able to completely solve these problems.
- 10 out of the 14 informants said that a child with a behavioural problem is not able to perceive his/her behaviour as a problem, but that the problem is with everybody else (parents, teachers, etc.).
- Specialized pedagogues, and social workers, as opposed to psychologists, do not use any standardized or non-standardized diagnostic tools.
- 11 out of the total number of 14 informants said that the most important factor in working with children with behavioural disorders is the relation of the adult with the child and respect for the child.
- 8 out of the 14 informants consider, as the most important factor for working with such children, rules, consistency and fair approach of the adults in their relation with these children.

Discussion

The concept of behavioural problems (so-called behavioural disorders) in children in the Czech Republic is influenced by the highly disjointed system among the resorts, large

number of participants, often unclear rules and financial resources, with accompanying range of stereotypes, and established processes and prejudices. This system often becomes the subject of criticism from the professional and non-professional public on national as well as international levels. The system is currently undergoing transformation and it is clear that the reform will be a long-term process, the expected results of which may only become apparent after several years. This situation is unintentionally reflected in the conducted survey. It is interesting to analyse the individual statements, which actually reflect the generally known facts, e.g. a dysfunctional family environment, failure at school, and the personality of the teacher and its influence on the child's behaviour; however, on the other hand, they also offer completely original answers and sources of inspiration for working with the given target group. There is a range of stereotypes regarding children with behavioural problems both among the professional and the non-professional public. Some of these stereotypes were confirmed by the carried-out survey, others were disproved. Many statements are quite polemical and arguable; nevertheless, they are undoubtedly inspirational for continuing work with such children and for future research in this area.

It was very difficult for the informants to clearly define their answers. The informants also referred to the significant distinction in the children's manifestations, family background, personality, and motivation towards change. Their answers reflected their life and work experience and, in particular, the job they do. Only the last sphere of questions traced certain elements of an agreement when relationships and mutual respect were accentuated by the overwhelming majority of the respondents. These concepts overlap and accompany answers of all respondents who, although they have had many years' experience in working with the given target group, are still looking for new directions, approaches and forms of working with these children. Many statements were original, but also full of contradictions and polemics. However, all of them lead us to considering more deeply not only children with behavioural problems but also all conceptual categories that appeared in this context.

With respect to children with problematic behaviours, some informants accentuated their disorderly family situation and complicated family relationships, while others stressed their school teacher's authority and personality, their low school achievement, etc. Such variety of responses had not been anticipated. It would be extremely difficult to determine preferences of each individual informant and their statements can be interpreted from a number of different angles.

It is necessary to point out that the research was also the part of, and inspiration for, more extensive research devoted to children with behavioural problems.

Conclusions

We set research questions to which the spheres and questions in the implemented interviews corresponded.

The first sphere of questions focused on specifying the most striking manifestations of a child's problematic behaviour with impact on his/her social relationships and whether the respondents reached any strong disagreement on something. The most frequently stated disorders were attention deficits, hyperactivity, impulsiveness and aggression.

In the next question aimed at the impact of problematic behaviour on the child's schoolwork and success, most informants (8 out of 14) agreed that the stated disorders had strong influence on schoolwork and that the children with behavioural problems experienced success at school only rarely.

The last set of questions focused on generalizing the professionals' experience in applying the methods, programmes, approaches and techniques as examples of good practise and the possibilities of stating these examples as recommended approaches for working with children with behavioural problems resulted in the fact that the respondents did not agree to

any method that could be so generalized and recommended. Nevertheless, they agreed that relationship and mutual respect constituted the cornerstone for working with these children, which is not insignificant at all.

References

1. Hort, V. a kol. (2000). *Dětská a adolescentní psychiatrie.* Praha, Portál.
2. Lechta, V. (2010). *Základy inkluzivní pedagogiky.* Praha, Portál.
3. Paclt, I. a kol. (2007). *Hyperkinetické poruchy a poruchy chování.* Praha, Grada Publishing.
4. Hadj-Moussová, Z. a kol. (2005). *Pedagogicko-psychologické poradenství I.* Vybrané problémy. Praha, Univerzita Karlova v Praze, Pedagogická fakulta.
5. Richter, K., Hutyrová, M. a kol. (2012). *Co s tím mám dělat.* Olomouc, Magistrát Města Olomouce.

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The paper was to collect the views, opinions and attitudes of experts from various professions (special educators, ethopedists, consulting, clinical and school psychologists, social workers and curators, psychiatrists, psychotherapists) with respect to the manifestations, causes and the possibilities of diagnosis and intervention in children with behavioural problems.The research used the qualitative research methods. We believe that they satisfy the requirement for methods of collecting data as being open, and place emphasis on the subjective importance and interpretation. The structure of the interview stemmed from the concept of spheres ensuing from the research questions, and four spheres were set.

For the informants to clearly define their answers. The informants also referred to the significant distinction in the children's manifestations, family background, personality, and motivation towards change. Their answers reflected their life and work experience and, in particular, the job they do. Only the last sphere of questions traced certain elements of an agreement when relationships and mutual respect were accentuated by the overwhelming majority of the respondents. These concepts overlap and accompany answers of all informants who, although they have had many years' experience in working with the given target group, are still looking for new directions, approaches and forms of working with these children.