

10 Ways to Keep Order during a Bible Lesson Connecting Teens to God's Word (part 8)

Idea #1: Set _____ as needed.

If behavioral issues arise in the group, the first step is to identify exactly what is causing the problem and then establish a rule.

Idea #2: Talk _____.

If your group is large or it is an especially serious problem, you can even have them raise hands if they have something to say.

Idea #3: No _____ conversations.

Even if someone is not interested, they shouldn't hinder others from hearing.



Idea #4: Have other leaders sit next to _____.

Assistants that aren't leading should always help with crowd control.

Idea #5: Give kids 'stuff' _____ during the lesson.

Help your kids be active during the lesson.

Idea #6: If possible, don't teach near _____ where kids come in.

When they arrive, they can quietly come in and sit at the back, rather than drawing everyone's attention as they come through the door.

What can you do when the group is great but one or two kids spoil it?

Idea #7: Talk to your difficult student _____.

the 'sandwich method' in confronting a difficult issue: a positive – a negative – a positive.

The talk should not feel confrontational, but more like the two of you on the same side, trying to fix the problem for the good of everyone.

If you see that these talks are not working, and it's possible, try the same approach with a parent.

Idea #8: Differentiate between mistakes and willful _____.

If a teen is disobeying on purpose to gain attention, get revenge on someone, or intentionally show disrespect, then have a serious talk and give him a chance to change. If he will not change, there needs to be consequences for the behavior.

Idea #9: Look for symptoms of ADD and _____ kids

This is a chemical disbalance in the brain that causes kids to be impulsive, to have difficulty considering the consequences of their actions. They often have trouble paying attention, interrupt a lot, and struggle to fit into group activities.

See the list of symptoms at the end of these notes and links in the video description.

Idea #10: Build positive _____ with all of your students.

One of the best things we can do is to find ways to genuinely like the teenager; to be on their side.

When a young person knows you like them and want them to succeed, sometimes the problems become less and they become more open to your correction.

Discussion Questions

1. What problematic behavior in your group concerns you the most?
2. What rule or rules could you implement to stop such behavior?
3. Which of the ten ideas might be most helpful for your group?

Some Indicators of Attention Deficit Disorder (a checklist)

- ☐ 1. The child can be looking right at you when you speak and still not hear you.
- ☐ 2. The child does not follow instructions well and sometimes not at all, even though he or she may seem to understand them.
- ☐ 3. The child gets bored *fast*. Routine tasks and rote drill cannot hold a child's attention for more than a few minutes.
- ☐ 4. The child procrastinates dreadfully, especially when difficult projects, chores, or homework are the tasks at hand.
- ☐ 5. The child's attention and enthusiasm bounce from thing to thing; repeatedly, the child starts projects eagerly only to abandon them, unfinished.
- ☐ 6. The child displays amazing artistic skill and creativity, particularly in one-on-one interactions.
- ☐ 7. The child's attention may become so focused upon something – Nintendo, for example, or action TV - that you can't tear the child away.
- ☐ 8. The child constantly lives in a sphere of noise; if the noise does not come from outside, the child creates it.
- ☐ 9. The child loses things a lot, usually through carelessness or forgetfulness.
- ☐ 10. The child *talks*. This does not mean sustained conversation. The child talks loudly and randomly, bouncing from subject to subject sometimes in midsentence.
- ☐ 11. The child constantly irritates others by interrupting and butting in, paying no attention to others' sensibilities or needs, acting inappropriately (often highly so), wrongly responding to others' behavior, refusing to take turns in an orderly way. In other words, social skills are zilch.

- ___ 12. The child very often acts without thinking. He or she might run out into the street after a ball, turn and punch a kid without considering the consequences, blurt out the answers before the question is completed, or do “dumb stuff” that can be just plain dangerous.
- ___ 13. The child is very easily distracted. The noise of a fan, pictures on the wall, peripheral movement such as another child sharpening a pencil, a bird, a dust mote - anything, and sometimes nothing – seizes the child’s attention at the expense of the project at hand or schoolwork.
- ___ 14. The child’s mind wanders. Daydreaming, wool-gathering, being spacey, call it what you will, this predilection to wandering dominates the child’s mental processes.
- ___ 15. The child moves constantly and forcefully, fidgeting, running, slamming around, failing to sit still for more than a few minutes at a time.
- ___ 16. The child’s moods swing like a pendulum and are largely unpredictable or inappropriately expressed. Anger is instantaneous and quite often overdone for the situation, joy is so grotesquely joyous as to be annoying, and so on.
- ___ 17. The child needs constant attention and instant gratification. Attention *now!* A reward *now!* More attention *now!* A need or perceived need met *now!* More attention *now!* All the time.
- ___ 18. The child shows great difficulty completing workbooks, math problems, and the like, as well as complex assignments and other linear-thinking tasks.
- ___ 19. The child creates constant stimulation, but at same time, he or she cannot handle stress of all. The child goes ballistic when overstimulated and yet starts caroming off the walls if external stimulation is withdrawn or is minimal.
- ___ 20. The child’s mind and surroundings are either chaotic and disorganized (the normal state for ADD kids) or, in older children at times, obsessively ordered.

From “You and you’re A.D.D. Child: how to understand and help kids with attention deficit disorder” by Paul Warren, M.D. and Jody Capehart, M.Ed. 1995, Thomas Nelson Inc, Publishers, pages 3-5.