Does a School-Based Social Skills Program Have an Effect on Students’ Behavior and Social Skills?


Introduction

The importance of friendships and social interactions in children’s development is well known and has been documented by numerous research studies. Social skills, which enable children to interact with others in acceptable ways, are the foundation for these important relationships. Furthermore, poor social functioning in childhood has been linked to later psychological disturbances. In an effort to promote positive social skills for all children, social skills programs are sometimes implemented in schools, often with particular attention focused on children with behavior problems or interpersonal difficulties. Verduyn, Lord and Forrest (1990) evaluated the effectiveness of a school-based social skills program.

Method

Research Design: Verduyn et al. (1990) used a randomly assigned matched control group study to answer their research question: “Is a school-based social skills program effective at increasing positive social skills of children with behavior problems and/or difficulties in social interactions?” The researchers used performance on self and teacher-report surveys (specified below) as their dependent measures. Mean scores on all measures between the intervention and control groups were examined using two-way ANOVAs. Significant effects for gender and school year were examined using paired t-tests.

Participants: After obtaining parental consent, the researchers screened children in their second, third and fourth years at a middle school in England (10-13 years of age) for behavior problems and/or difficulties with social interactions. After screening 365 children, 34 were deemed eligible (based on screening measures described below) for the study and were randomly assigned to the intervention group (Group 1, n = 17; 7 boys, 10 girls) or the control group (Group 2, n = 17; 8 boys, 9 girls). Teacher and self-report data were collected on both groups before Group 1 received the intervention, after Group 1 received the intervention, and at a 6-month follow-up period.

Instruments: To screen children for participation in this study, the researchers used the following measures: 1) Rutter’s (1967) B2 scale, a teacher rating scale that assesses the frequency of emotional and antisocial behaviors, and 2) a standardized sociometric questionnaire designed to produce peer preference ratings for each child in a class (MacMillan, Kolvin, Garside, Nicol, & Leitch, 1980). Inclusion cut-off scores were established to include only those children with extreme scores on both measures. The following four measures were used before and after the intervention to assess social behaviors: 1) a social behavior checklist (completed by parents and teachers) developed by the authors based on various questionnaires, 2) the Social Situation Checklist (Spence, 1980), 3) the Self-Esteem Inventory (Coopersmith, 1967), and 4) a
weekly diary of social activities, completed by the children each morning for one week. Additionally, at post-intervention, teachers reported whether each child had improved, had become worse, or did not change with regard to behavior problems. Teachers also commented on the perceived usefulness of the program.

**Intervention:** Children in the intervention group were informed of its purpose and encouraged to share any feelings they had about participating. The 17 children in the intervention group were further divided into four smaller groups for training sessions, led by a graduate psychologist, which were conducted for one hour twice a week, and lasted for four weeks. Four additional booster sessions were conducted four weeks after the intervention was completed. Each session focused on a specific aspect of social interaction using teaching, group discussion, modeling and role-play. Sessions followed a pre-arranged formal structure, which included a discussion of homework from the previous session, a warm-up exercise and introduction to the theme of the session (which included coping with bullying, responding to criticism, asking for help, making friends and giving compliments), a brief period of instruction, behavior rehearsals, role-play, summing up and homework for the next session.

**Results**

**Screening:** Intervention and control groups did not differ significantly on the screening measures, nor were there significant gender or school year interactions.

**Pre-Intervention:** The intervention group had significantly more problem behaviors than controls ($t = 2.06, df = 32, p < 0.05$), based on the Parents’ behavior checklist. No significant differences were observed on any other instruments.

**Post-Intervention:** Significant differences were observed between groups on the parents’ social behavior checklist ($t = 2.06, df = 32, p < 0.05$); the intervention group displayed significantly fewer problem behaviors than at pre-intervention, and problem behaviors of the control group remained the same. No significant differences were observed on the teachers’ social behavior checklist or on the Social Situation Checklist. An overall treatment effect was not observed on the Self-Esteem Inventory, but gender and age interactions were identified within the intervention group (the younger children showed significant changes in self-esteem, but the older children did not). At post-intervention, the intervention group was more socially active than the control group ($F = 6.94, df = 16, p < 0.01$). Teachers’ comments showed overall satisfaction with the program.

**Follow-up:** On the parents’ social behavior checklist, there were no significant differences between groups suggesting that results were maintained at follow-up. On the Self-Esteem Inventory, there were no significant differences between groups; however, intervention group scores were significantly higher than at the pre-intervention phase ($t = 2.401, df = 16, p < 0.05$). There were no significant differences on any other measures at follow-up.
Implications

This study provides support for the use of a school-based social skills program to increase the social skills of students with behavior problems and/or difficulties with social interactions. Based on the results of the parent questionnaire, it is suggested that learned social skills were generalized outside of the school environment. Further research should address some limitations of this study, especially the lack of a placebo control group to authenticate that improvements were in fact due to the intervention and not due merely to increased attention or heightened expectations.

Critical Perspective

The following evaluation and critiques focus on seven dimensions currently being used by the National Panel for School Counseling Evidence-Based Practice to evaluate the quality of outcome studies.

Measurement: Although most of the measures that the researchers used had been utilized in previous studies, the authors made no mention of the reliability or validity of these measures. Furthermore, a rationale for the appropriateness of the measures for use with the participants was not provided. The dependent variables and measures were restricted to the personal/social domain. While we can conclude from this study that school-based social skills training is likely to increase prosocial behavior, we do not know whether this change results in measurable increases in achievement or declines in disciplinary referrals. Replication of this study using a broader range of measures is needed.

Comparison Groups: The researchers included a comparison control group that did not receive the intervention, but they did not include a placebo control group. This limitation is prohibitive in that we are unable to be certain that the significant differences between the two groups are due to the content of the intervention. Student change may be a result of increased adult attention or heightened expectations rather than the learning resultant from the intervention. Again, replication of these findings with larger sample sizes and additional appropriate controls is warranted.

Statistical Analyses of Outcome Variables: Statistical analyses documented low probabilities of committing Type I errors \((p < 0.05\) for all analyses). The authors did not compute effect sizes that would have allowed for the estimation of the potency of the intervention’s effects. Effect sizes should be reported in subsequent replications.

Implementation Fidelity: The researchers mention that the graduate psychologist who ran the intervention groups had previous experience with social skills programs, but there was no mention of training or implementation fidelity. While the intervention was well structured, it would be difficult to replicate it exactly in subsequent studies. Follow-up research should implement a more “manualized” intervention and assure that this intervention was delivered according to plan.

Ecological Validity: The groups in this study were matched for school year, but there was no discussion of diversity beyond gender. This may be due in part to the fact that the study was
conducted in England. Replication with a larger sample size in a diverse school would permit the determination of whether the intervention works for all groups of students equally and whether the effects produced by a school-based intervention are large enough to warrant use of the intervention.

**Persistence of Effect:** Results were demonstrated at 6-month follow up on personal/social skills measures. Whether these effects alter longer-term academic-related variables (e.g. achievement, attendance, disciplinary referrals) needs to be evaluated.

Based on this review using the Evidence-Based Practice dimensions, the present study provides some very promising evidence that social skills training is an effective school-based intervention. School counseling researchers need to build on the foundation of this study through systematic replications to increase the implementation of social skills training in schools that have predictable and beneficial effects on school behavior and student learning.

**References**


