

## **The Effectiveness of Social Skills Training on Communication Empowering Deprived Students**

**Fateme Nequee**

Department of Psychology, Payame Noor University, Iran.

**Mehri Rahmani** (Corresponding Author)

Department of Psychology, Payame Noor University, Iran

2112livd2112@pnu.ac.ir

**Ali Rahmani**

Department of Psychology Azad University, Iran

**Sahar Jadidoleslam**

Department of Biology, Payame Noor University, Iran.

**Abdollah Rahimi**

Academic member, Islamic Azad University, Arak Branch, Iran

### **Abstract**

The present study was carried out to compare social skills among Iranian students. The primary purpose of this study was to examine the effect of social skills training on communication ability of deprived students. 864 high school students in Mahallat city were randomly selected by clustering method and were evaluated by using social skills training inventory (Indrebitzen and Foster, 1992). According to scores of social skills Inventory, students divided into two groups including 31 students with social skills training and 31 students without social skills training as control group. Group members were evaluated before and after 10 training sessions. ANCOVA was used for group comparisons in pretest and post -test. In general, results showed that social skills training method increased positive social skills and decreased negative social skills in experimental group. However, scores of negative and positive social skills in control group had no difference in pretest and posttest. On the other hand, training sessions was effective in increasing social adaptive, personal efficacy and prevention of traumas.

**Key Words:** social skills training, negative social skills, positive social skills

### **Introduction**

Nowadays our life is really complicated. According to the World Health Organization (WHO) types of psychological trauma are increasing in social communities, and these injuries often are more prevalent in low socioeconomic communities. Mental disorders, drug dependence (addiction) and antisocial behavior and delinquency, especially the younger generation, have been rising. These are related to people's social skills. However, these social and psychological problems not only burden a significant costs on society, but also their effectiveness is very limited and often is negligible (Campan, Saddok, 1988; Taylor, 1995). This reality cause specialists of mental health, in all around the world, concentrate on prevention programs. These programs emphasis on individuals dignity and prevent the formation of harmful behaviors to improve their health and mental health. Life skills training (1993), which used by W.H.O for many countries, related to programs that enhance "mental capacity" of persons for decreasing their pressures and dealing with their problems and challenging situations for preventing from and coping with depression, antisocial behaviors,

drug dependence .individuals method for coping is not the same. People are different in coping and defense reactions, and it is attributed to a psychological capacity for positive reaction, as well as adaptive and efficient behavior to deal with and resolve the problems. Psychological capacity to promote mental health in all three aspects of physical, mental and social is very important. Psychological intervention would be inevitable in situations that a person, for solving his/her problems used from non-accommodate behavior models. Researchers such as Matson (1998) stress on life skills effects on reducing substance abuse.

In research literature, the concept of social skills is defined in different ways. Matson (1998) suggest that social skills are behaviors which their evolution can positively effect on mental health and social behaviors. Schneider, Rubin, and Ledinghan (1985) consider social skills as a connector between persons and environment. They suggested it is effective for mental health of people with no rich environment. In fact, these skills would change learner feelings and attitudes about him/her.

In this framework, despite the proven effectiveness of social skills training to empower people for prevention mental disorders, according to social studies (e.g. Wood, Harington and Moore 1996; Graham, 1998; Rosolow and Bernal, 1999; Telj and Millburn, 1985) these skills are cognitive-behavioral and effect on both individual and his environment. Young people, especially in lower classes, are more vulnerable social disorders. Therefore, social skills training are necessary for these individuals.

The purpose of the present study is to examine the effectiveness of social skills training (short term sessions) and it attempts to answer the following questions:  
1 - Do social skills training workshops decrease negative social skills of deprived students?  
2 - Do social skills training workshops increase positive social skills of deprived students?

### Methodology

This study investigated the effects of social skills training including pre-test - post-test with control group. Statistical population consists of deprived male and female students of Mahallat city. In order to determine the sample, 60 bona fide students (15- 18 years old, socially and economically deprived, without acute physical and mental disorder etc.) were selected randomly and were divided into control and experimental groups (30 people for each group). Then, the experimental and control groups were given pretest. Experimental group was influenced by the independent variable - social skills training. Control group received no intervention. After completion of sessions, posttest was performed for both groups. (Figure1).

**Figure 1. Diagram of research design.**

Pre-Test Group	Independent Variable	Post-Test
Test Group	T <sub>1</sub> X	T <sub>2</sub>
Controls Group	T <sub>1</sub>	T <sub>2</sub>

Finally, in order to collect data Inderitzen and Foster questionnaire (1992) were given to the participants in both groups.

### **Social Skills scale TISS**

Amini translated Inderitzen and Foster questionnaire (1992) and normalized it in Tehran city for high school students. The negative coefficient Rating was 68/0. The questionnaire contains 39 items and 6 main groups. The questions ranged from 1 "not at all true" to 6 "always true".

The tool consists of two parts: positive behavior and negative behavior and scoring method for each section is the same. Positive behavior sections consist of items 3, 6, 7, 9, 11, 15, 17, 39, 38, 37, 35, 34, 33, 18, 24, 25, 26, 28, 29, 30 propositions, and negative behaviors, consisting of items 1, 2, 4, 5, 8, 10, 12, 13, 14, 16, 19, 20, 21, 22, 23, 27, 31, 32, 36 or more propositions. It should be noted that, in principle, in 40-item inventory of social skills due to the lack of harmony with our culture, the question 23 was deleted. Regarding positive part of this questionnaire, reliability coefficient was computed by Cronbach's alpha model equivalent was 8071/0 and its negative part credit equals to 8051/0 was used.

The reliability coefficient for positive was 90% and for negative part was 72% and its internal consistency was 88%. Finally, convergent validity was estimated with several ways such as the comparison of the questionnaire with self-evaluation data, assessment peers.

### **Social skills treatment stages**

In order to do the intervention program, the following treatments stages were done:

Session I: It included introducing group members to each other, familiarity of members with aims and rules of group counseling, skill definition, talking about skills necessity and session schedule along with title of each session.

Session II included self-awareness skills, physical and mental components of consciousness, self-correction, human characteristics and pressure groups Session III: Managing anger control, reasons of anger, and individual reactions against anger. First step was emotional self-awareness. In the second step, neutralizing anger according to short and long strategies was done, and finally predomination was done.

Session IV: stress management, individual differences, individual methods, the effects of stress on the body, stress and psychosomatic illness, relation stress and excitement, strong personality.

Session V: problem solving and decision makes skills, features of persons who have not these skills, the problem solving stage. Self-awareness, define the problem, brainstorming, evaluation of strategies and finally choosing the best solution were done, respectively.

Session VI included communication skills, effective interpersonal communication, the beginning, continuing and the ending of communications, and enhancing the relationships with others

Session VII: assertive communication, healthy relationships conditions and symptoms of a bad relationship.

Session VIII: Creative Thinking Skills, definition, part of this thought, processes and the barriers to creative thinking, creative thinking and its relation with humor, creative thinking and experience.

Session IX: Critical thinking, Introduction, definition of critical thinking and reflection components.

### Results and discussion

In analyzing the survey data, when descriptive values were calculated, in order to compare the averages of posttests in target groups, ANCOVA tests and LSD (least significant difference by Fisher's method) were used.

In Table 1, the mean and standard deviation of the experimental and control groups related to any of the dependent variables at pre-test - post-test is presented.

**Table 1. Descriptive statistics for pre-test - post-test in experimental and control group**

Negative Skills	Negative Skills			group
25	30/083	Mean		
2/17	2/42	standard deviation	pre-test	
33/41	24/66	Mean		Social skills training
3/11	2/49	standard deviation	post-test	
24/83	29/41	Mean		
1/85	2/14	standard deviation	Pre-test	
2608	29	Mean		control
2/84	2/13	standard deviation	Post-test	

As can be seen in Table 1, the mean of each dependent variable, namely, positive and negative social skills, in pre-test - post-test steps for experimental group is different while the difference of the means in pretest – posttest for control group is negligible.

Results of covariance analysis are presented in Table 2. (Equality of variance of the dependent variable in the groups was confirmed by Levine's test.)

**Table 2. Results of ANCOVA on the impact of social skills in post- test**

Source	Dependent variable	Sum of squares	Mean square	F	Sig
Pre-test group	Negative social skills	88/68	88/68	6/49	0/0001
	Negative social skills	313/71	156/85	29/17	0/0001
Post-test group	positive social skills	47/53	47/53	34/01	0/0001
	positive social skills	73/389	36/694	26/26	0/0001

According to the above table, we can conclude that the observed differences in moderated mean score for positive and negative skills is statistically significant ( $29/17 = F, 0001/0 > P$ ). By looking at table 2, we conclude that mean score of post-test for negative social skills in experimental

group is less than the mean in control group. But this score is the same for post-test and pre-test for control group. Therefore, we can conclude that social skills training workshops was effective for reducing the negative skills. The extent of this effect is 64/0, namely, 64/0 of variance explained in adjusted mean for negative social skills of both groups in post-test step is due to therapy techniques.

Further, we can come to this conclusion that the difference between the adjusted mean of positive social skills in the experimental and control groups is statistically significant. ( $26/26 = F$ ,  $0001/0 > P$ ). Thus, it is clear that social skills training workshop are effective on enhancing positive potentials. The main effect of 0/62 and the level of significance of . /0001 and 0/96 indicate high statistical accuracy of these tests.

### Conclusion

The present study examined the effectiveness of social skills training in changing positive and negative skills among deprived students of Mahallat city. The results showed that ten skills training sessions are effective in enhancing people capabilities ( $P < 0/0001$ ) In other words; this method could enhance the positive social skills and reduce negative skills among the students. The findings revealed that workshop applied in the experimental group ( $30 = n$ ) has been effective. Comparing the pre-test and post-test scores of the experimental group and comparing with control group showed a significant increase. However, pre-test - post-test scores showed no significant difference.

The findings also revealed significance of changed adaptive behavior after social skills training. These findings are aligned with Nihira, Foster, relax and Shell has (1974). The researchers showed that increasing social skills can fully or partially cause independence. In other words, we can say, teachings of the ten skills can increase daily life skills in experimental group subjects. The findings of the research are also in agreement with the studies done by Giloes and Wolf (1982).

Social skills training are relevant with learning theory "bandura". According to Bandura (1977) develop a model of social behavior can be an effective factor in social skills and lead to positive results in social relationships. Trif (1976) trained 58 adolescents in a youth hostel .He successfully taught empathy, cooperation, and self-restraint skills to them (Cart ledge et. Al, 2000). This research was regular training of social skills based on Bandura's perspective.

This result can confirm the study done by Trif (1976) findings in which, education to family-like young people caused their success in social relationships.

This research has focused on the role of mentor as a role model. This confirms Bandura's theory of learning (1977). In this study, first, coach has been implemented social skills such as self-expression and embodiment of feelings and emotions. After observing the behavior, the students, attempted to learn and to practice it as homework.

This program was set up because the students had main role in doing works. Primarily in educational skills, if the person has the opportunity for performing the behavior and gaining feedback, therefore his/her behavior should be strengthened. This training was conducted in groups. Peers supported and gave feedback to each other. In other words, if the positive feedback was given to the behaviour, that behavior would be reinforced and if negative feedback was given to the behavior, that behavior would be corrected.

Observing the principles of social learning paradigm (model), role playing, feedback and reinforcement can be used to increase the social development of students covered by. Based on the findings, both male and female wanted to be successful in social relations, social compatibility, and both of them were interested and demonstrated strong motivation for this work.

### References

- AIM, C. & Linda Berg, F. (1999). Attributions of shyness-resembling behaviors by shy and non-shy individuals. *Personality and Individual Differences*, 27.
- Argyle, M. (1981). Some new development in social skills training, *Bulletin of the British Psychological Society*, 37, 405-410.
- Arjomandi, Z. (2002). Effects of social skills training on the adaptive behavior of educable mentally retarded children. *Tehran, Psychology and Educational Sciences*, 12.
- Aypakchy, H. (1980). Studying and evaluating the practices of family-like care and independent boarding in Tehran, Welfare Organization Press.
- BehPajoo, A., Ghobary, B., Alizadeh, H., & Hemmati, Gh. (2007). The impact of social skills training techniques to control attention-deficit hyperactivity disorder students. *Psychology and Educational Sciences*.
- Giles, M. & Wolf, M. (1993). *Social Competence and mental Handicap: An introduction to social education*. New York: Williams.
- Goleman, D. (2004). *Emotional Quotient*, translated by Nasrin Parsa, Tehran. Roshd Publications.
- Hossain Chary, M. & Agha Delavarpoor, M. (2006). If shy people have no communication skills? Iranian Psychologists, Iranian Psychological Association.
- Kelly, J. (1982). *Social skills training*. New York, Springer.
- Nazer, M.A. (1993). Effects of social skills training, self-control training and parents training on reducing aggressive behavior of aggressive children, Tehran, Tehran Psychiatric Institute.
- Poor Sharifi, H., Bahrami, E. & Tayefeh Tabrizi, R. (2006). Studying the effectiveness of life skills short-term training. Tehran, Iran Congress of Psychology.
- Sharafi, M.R. (1985), *the stages of human growth and development*, Tehran, published by the Ministry of Culture and Islamic Guidance.
- Sohrabi, H.R. (2005). *The psychology of human relationships: people skills*, Tehran, Roshd Publications.