

Social Competence, Transition Plans and Children with Learning Disabilities

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Abstract

Social competence is the ability to use the appropriate social skills in every aspect of life. For children with learning disabilities, it is a difficult skill to master. These children have trouble with communicating, following directions, listening and completing a task, which can cause problems in the classroom and in adulthood. Yet, these skills are rarely addressed on the individual education and transition plans for these students. The purpose of this paper is to explore the characteristics of children who have learning disabilities and social competence deficits. The difficulties of social competence are examined through the definition of this skill, classroom implications, complications in adolescence/adulthood and a discussion of the importance of adding social skills training to the curriculum.

Introduction

Social competence plays an integral part in how well a young person transitions into adulthood. Without adequate social skills a person may experience trouble in the areas of employment, daily living skills, independent living and participating in the community. Employers often claim that social competency is more important than actual experience in the work place (Mellard & Hazel, 1992). Being able to organize thoughts and questions, having a sense of humor, dealing with money and successfully communicating with co-workers have been stated by employers to be critical attributes for doing well on the job (Doren, et al., 1996; Mellard & Hazel, 1992). Also, poor peer relationships and low social skills have been linked to drop outs, juvenile delinquency, job termination, suicide, police contacts and dishonorable discharges from the military (Bryan, 1997). Children and adults must display appropriate social skills within the rules of their culture to maintain relationships that will help them to be independent and successful. Those who display inappropriate social behaviors are less appealing to their peers and have been found to have continual problems in life (Pavri & Luftig 2000).

Social competency is an area of concern for those who work with students who are learning disabled. According to a 1995 study (Haager & Vaughn 1995), it is estimated that 35 to 75 percent of students with learning disabilities have social skill deficits. Furthermore, children who are labeled learning disabled are more likely to have

emotional problems, low self-esteem, and conduct deficiencies (Pavri 2001). Therefore, the development of social competency should be an essential aspect of educational planning for these children. However, since the label learning disabled often carries a comparatively mild stigma, these children are frequently expected to move into adulthood with less transition planning than those with more severe disabilities (Cronin, 1996; Sitlington, 1996).

Importance of Social Competency in the Classroom

A lack of social competency can be due to situational factors; it often involves perceived behaviors. Research indicates that the majority of children with a learning disability need more time than average to encode and produce information in various social and educational situations (Mellard & Hazel, 1992; Tur-Kaspa & Bryan, 1994). In most educational settings this time delay is perceived to be socially unacceptable. Therefore, the processing difficulties eventually may lead to social skill deficits. At times, teachers have been found to use social skills to judge the quality of a student's performance with the result that poor social skills snowball into poor achievement and less reinforcement or opportunities (Bryan, 1997; Cronin, 1996; Pavri & Luftig, 2000).

Students with learning disabilities often exhibit social misbehaviors in the classroom. Teachers comment that these students are off-task and engage in more negative peer interactions (LaGreca & Stone, 1990; Sitlington, 1996). Other problems include not being able to comply with the rules of the classroom, being unable to communicate effectively and difficulties with independence (Pavri & Luftig, 2000). Also, children with learning disabilities frequently have trouble making themselves understood. Being unable to ask clarifying questions or express their needs creates barriers, which may lead to interpersonal problems such as making friends, working in groups and self-control (Bender & Wall, 1994; Mellard & Hazel, 1992).

While social competency will ultimately be necessary to succeed in the working world, it also plays a major role in classroom success. The school environment is a fine tuned machine with deep-rooted traditions and strict rules (Pavri & Luftig, 2000). Although the classroom has rules and social structures, which may vary from the rules of society, children are expected to be multi faceted and socially competent from day to day, hour to hour, situation to situation (Goodwin, 1999). The classroom is where children with learning disabilities have the most trouble.

For children who are learning disabled poor academic progress is a likely consequence of a lack of social competence. Studies have shown that social competency affects the academic world of a child to such an extent that experts are starting to suggest that this should become the number one criterion for labeling a child as learning disabled (Coleman & Minnett, 1993). Although the idea may appear extreme, it highlights how necessary it is for students to work well in the classroom in preparation for doing so and later in society.

Defining Social Competency and Transition Plans

Social competency is usually defined broadly and its definitions are complicated by a lack of objectivity regarding social skills. What one person believes to be a suitable social skill may seem inappropriate to another. Being able to sit quietly during free time may be imperative to one teacher, yet not a problem for another. Also, different skills are necessary in different situations. The social skills a person exercises with a friend or relative are not the same as with an employer or landlord. According to Bender and Wall (1994), basic social proficiency is reflected in the student's having the ability to interact appropriately with others in various situations. A major component of the definition is determining appropriate behavior. For example, some children may possess the correct social skill, but may use it at the wrong time or only when it is personally beneficial (Haager & Vaughn, 1995). A socially competent person can correctly determine which behaviors are appropriate in a given situation.

When investigating the social skill deficits of children with learning disabilities, the discrepancy between perceptions of what is appropriate to one person and not to another must be addressed. Educators often dismiss social competency as a skill that cannot be taught; something children learn from parents and the community (Anderson, 2000). Many view social competency as readily acquired, such that if a child is socially incompetent, the child needs to be taught how to act; otherwise he or she is simply choosing to be defiant or disruptive (Doren, et al., 1996). On the other hand, many schools have recently adopted school-wide behavior plans to address the need for social skills training in all students. In these plans, guidelines are set forth by the administration to create safe and positive schools (Lewis & Sugai, 1998). Each student is required to follow these guidelines which spell-out appropriate behavior (e.g., be kind, be safe, be respectful). Often, a system that monitors and rewards students' behavior is created in conjunction with the procedures. Still, these guidelines rarely address the specific types of difficulties that students with learning disabilities may have, assuming that their needs and deficits are the same as all children.

Most of the skills that are needed in the classroom are academically related; being academically proficient is the focus of educators, peers, and parents in the classroom society. Teaching social and interpersonal skills is not a high priority for most teachers, including special education teachers. Social skills are often not included in individualized education plans (IEP) or the basic curriculum (Pray, et al., 1992). As Anderson (2000) reported, only 37 percent of students who need social skills training have it written into their IEP/ITP. At the same time, teachers consider following directions, completing tasks, and dealing with emergencies and ethics to be very important (Goodwin, 1999). These learned social skills are crucial for academic success; many children with learning disabilities have trouble mastering them (Hazel & Schumaker, 1988). Other social behaviors including turn taking, listening and managing conflict, can also be difficult for children with learning disabilities to master (Doren, et al., 1996). These skills are necessary for becoming successful and independent in the world outside the school walls and need to be incorporated into the curriculum for all children (Goodwin, 1999).

Children with learning disabilities and low social skills tend to grow into adults with learning disabilities and low social skills (Anderson, 2000; Mellard & Hazel, 1992).

Statically, the outcome for students with learning disabilities once they move into the adult world is poor. Unemployment rates are higher than the general population, and community living arrangements and opportunities are low. In 1996 11.4 million people with disabilities were unemployed and only two-thirds of those employed worked full time. Also, 83 percent of students with learning disabilities still resided with their parents/relatives two years after high school graduation (Sitlington, 1996). In addition, adults with learning disabilities have reported difficulty in performing daily living skills, as finances and time management (Mellard & Hazel, 1992). They also claim unsatisfactory social lives, reporting fewer friends and higher divorce rates (Cronin, 1996; Hazel & Schumaker, 1988; Sitlington, 2001). This dissatisfaction has also been seen earlier in adolescents, when students with learning disabilities and low social skills feel alone, out of control, irresponsible and alienated by their peers (Hazel & Schumaker, 1988; Sitlington, 1996).

Addressing Social Skills in Individual Transition Plans

Despite these circumstances insufficient attention is paid to the assessment of social skills in formulating individual education plans (IEP) or individual transition plan (ITP) of students with disabilities, especially those with a learning disability (Anderson, 2000). Behavioral considerations during the IEP/ITP process are often discussed only if the child is emotionally impaired or has displayed dangerous behavior in the past. Once the student reaches the secondary level little is explored beyond employment and residential issues. A student's recreation and leisure capabilities are frequently given little attention with limited consideration of whether or not the student is competent in the social skills necessary to create and maintain positive and beneficial relationships (e.g. employment, friends, romantic, etc.). As discussed earlier, these skills play an integral part in how well a person makes the transition into adulthood.

Recently, transition has become a prominent issue in special education. School districts are pushing to create better programs to address post-secondary education, the military, competitive/supported employment, living arrangements and adult services. However, social competency is rarely on the list of needs for transition reform. The June 2002 issue of the Center for Educational Networking journal from the Michigan Department of Education Office of Special Education and Early Intervention Services was dedicated to addressing transition. This journal discussed the need for reform, funding, administrative support, do's and don'ts and parent perspectives on the subject. To improve the outcomes of children with disabilities as they move into post-school activities a widely applied framework for educational practices was examined. The taxonomy of the proposed framework, developed by Kohler (2002), organizes transition into five areas: student-focused outcomes, student development, interagency collaboration, family involvement and program structures and attributes. Each area covers the components necessary to create a well-rounded transition plan for a student moving into adulthood. A limitation however, is that social competency is only addressed under student development and appears not to be incorporated throughout.

In this same journal article one parent of a child with disabilities provides the following perspective on transition:

To me, transition is a way to make sure the students with disabilities get connected to the help they need to make a successful transition from what they are doing in school to what they are going to become and do as adults (Saur, 2002, p. 13).

This parent also discusses transition involving educational goals, career preparation, life skills and interagency resources, which should be provided at an earlier age. Still there is no mention of the need for social skills to serve as the foundation for development of a career, to be able to access interagency services or live independently. A child with a learning disability will have trouble connecting to the community or “become and do” anything as an adult, if he or she fails to display the appropriate social skills to work in groups, ask questions, solve problems, take turns or advocate for his or her needs (Doren et al., 1996). Social competency needs to be addressed in the IEP/ITPs for children with learning disabilities so that team members will explore whether or not the student requires interventions, which can be reflected in their IEP/ITP goals and objectives (Anderson, 2000).

Appropriate Transition Plans

Most transition plans for students with learning disabilities address employment, residential arrangements, vocational training, post secondary education, adult services, and recreation and leisure. Often medical and transportation needs are also discussed. All IEP/ITPs review the details of how the student will be assessed in each area, available options, names and duties of service providers, community based opportunities, and start and stop dates. Often, a section is included in the IEP/ITP to discuss other important life considerations. This section is where social skills necessary for a student with a learning disability to attain and maintain independence and success in adulthood should be addressed. For example, a child with a learning disability who has trouble organizing thoughts and questions and communicating successfully with other students may have similar difficulties in an employment situation. As with all students with special needs the IEP/ITP team considers the level at which the student will be able to work, competitive or supported, and goals and objectives are developed to attain said employment. Vocational assessment and options are reviewed, and job matching and placement can begin.

The team should also evaluate the other social skills needed to perform a job and keep it; plans to increase these skills should be included in the IEP/ITP. The team should first ask, what is the employment goal of this student? Does the student wish to work in an environment that requires communicating with customers, group projects, organization skills, and problem solving or asking for help. If the student is deficient in these areas, the IEP/ITP should address ways to attend to insufficiencies while trying to achieve the long-range goal.

Often, “work related” skills are assumed to have already been learned by students with learning disabilities until they have trouble moving into adulthood (Dunn, 2001, Sitlington, 1996). Anderson (2000) reviewed the use of literature as a tool for teaching social skills to adolescents with learning disabilities. One example divides social competency into four components: positive peer relationships, appropriate social

perception, absence of maladaptive behaviors and appropriate social behavior (Vaughn & Hogan 1990). Vaughn (1985) encourages these components to be folded into the regular curriculum. The teacher should use observation to get to know the student with a learning disability and be able to specifically address the problem areas. In addition, the student needs to understand and perceive what is happening in different social situations (Vaughn & Hogan, 1990).

Strategies for including social skills training into the curriculum involve empathy, cue sensitivity, alternative thinking, consequences, implementing skill and best practice and integration (Vaughn, 1985). By using literature to tackle social skill deficits, a teacher can combine interpretations of main events in a story or scene in a play with social intervention. In one example, the student is required to interpret the consequences that result from certain actions in the story as in real life. Vaughn (1985) also cites the use of identification strategies to explore the emotions experienced by the characters in a story and the action they exhibit. Once students investigate these actions they can develop alternative actions that may yield alternative outcomes.

Role-play and scenarios can be created in the classroom and used in vocational training for job interviews, group project deadlines, asking for a raise, dealing with upset costumers, or asking clarifying questions (Goodwin, 1999; Smith 1995). Points or token systems can be set up for displaying appropriate “work related” behavior in the classroom. In these ways, classrooms can be set up to address appropriate work habits as being on time, neatness and completing work on time. These skills should be included in their IEP/ITPs so they may become independent and successful in society.

Summary and Implications

Being socially incompetent translates into a basic inability to relate to others and interact appropriately with the types of relationships and interactions in which our society is based. Children, adolescents and adults must be able to deal with a wide range of societal situations to be successful in life. The need for social competency can be seen in almost every part of everyone’s life. The mastery of social skills links directly to academic success, better peer relationships and greater satisfaction in adulthood. How we interact with others often relates to innate behaviors. However, appropriate behaviors are learned through experience and interaction. A child with a learning disability may have less opportunity for such interactions; therefore, social skills must be taught and considered an important part of a child’s development. Social skills should be addressed in IEP/ITPs, and incorporated into the curriculum in schools.

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