

SCHOOLS CAN IMPROVE THE SOCIAL AND ACADEMIC SUCCESS OF AT-RISK STUDENTS: EFFECTIVENESS OF A SOCIAL SKILLS COUNSELING INTERVENTION

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Abstract

The primary goal of schools is to educate students, however, in considering the collaborative role of professionals in achieving this goal, consensus exists that schools can only be effective learning environments if strategies are implemented that build and maintain appropriate social behavior (Horner, Crone & Stiller, 2001). The purpose of this pilot study was to investigate an intervention for at-risk elementary school students who did not respond sufficiently to a universal school-wide social skills program. The manualized social skills counseling intervention was implemented for 2 years, and sought to create and maintain appropriate student relating and problem solving, and to improve academic performance. The effectiveness of the intervention was determined using measures of behavior, grades, standardized tests, and need for special services collected pre and post intervention for individual students, the intervention group and a comparison group. Results suggest substantial positive intervention outcomes across multiple variables for individual students and between groups. Implications of this field based study are considered in terms of applied school practice.

Keywords: At-risk students, social skills intervention, manualized group counseling, academic improvement, prosocial skills, violence prevention, bullying.

INTRODUCTION

Consensus exists that schools can only be effective educational environments if strategies are implemented that build and maintain appropriate social behavior [1]. Many school based interventions are explicit social skills training curricula designed to impact all students in a school. These universal intervention programs often have a positive impact for many students, but, typically not all students respond sufficiently. In this regard, school reform efforts have not specifically addressed the diverse needs of at-risk and minority students [2]. For these students interventions that enhance social skills, including self-regulation and problem solving, can be powerful predictors of academic achievement and disrupt negative behavioral trajectories [3]. By contrast, problems with aggression and peer rejection increase children's risk for maladjustment and school failure [4]. Researchers have long considered schools important systems of intervention and care, as they present enormous opportunities for both prevention and intervention with children who display signs of mental health and educational difficulties [5]. However, an extensive literature review indicated that few formal, evidenced based programs appear to exist, or to be implemented for at-risk and disadvantaged children [6].

METHODOLOGY

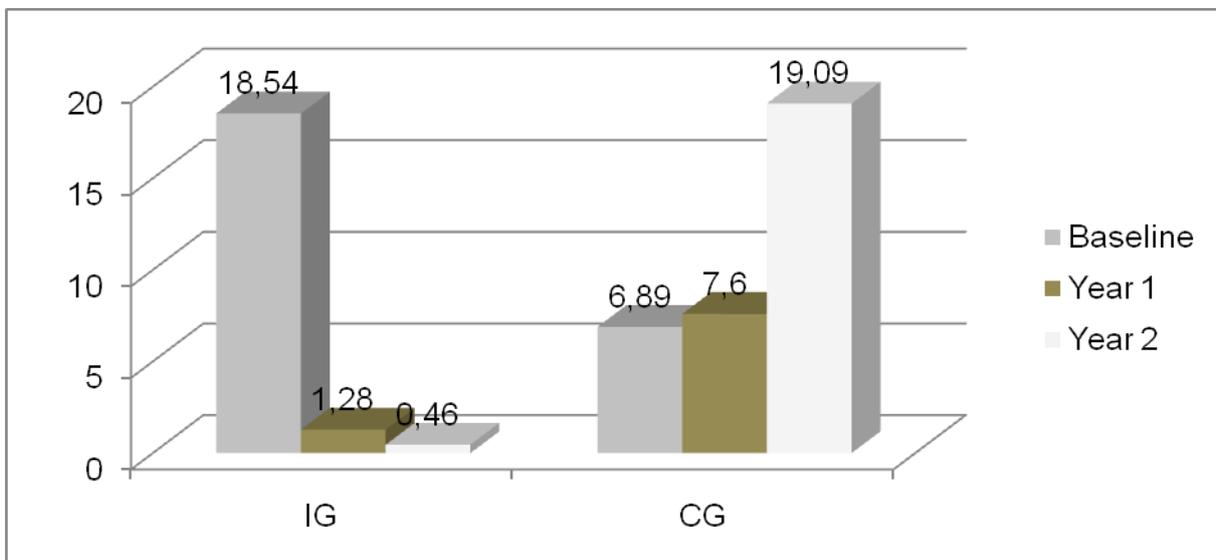
The purpose of this pilot study was to investigate a manualized social skills counseling intervention for at-risk students who had not responded to a universal social skills intervention. The 35 most seriously problematic elementary school students (grades 3 through 5) received the group intervention one class period weekly for 2 consecutive school years. A comparable student group, awaiting intervention, was followed for comparison. The social skills practiced included prerequisite, interpersonal, problem solving and conflict resolution skills. The standardized format for each counseling lesson included a teaching and modeling script for the group leader and involved the students in a club- like format with fun practice activities. Pre and post intervention data was analyzed for the intervention group (IG) and the comparison group (CG), and for individual students in each group , across multiple variables of : 1-number of office referrals, 2-end year report card grades in reading and math, 3- state test results in reading and math, and 4-support services needed.

RESULTS

Research supports a correlation between better and focused behavior, and improved academic progress. The results of the universal school-wide social skills intervention study, done prior to this study, indicated improved grades and standardized test scores as a correlate of improved behavior in about 89% of the schools' students [2]. The present study considers whether behavioral improvement and academic success can co-occur for at-risk students. Student variables were compared pre and post intervention for IG and CG students.

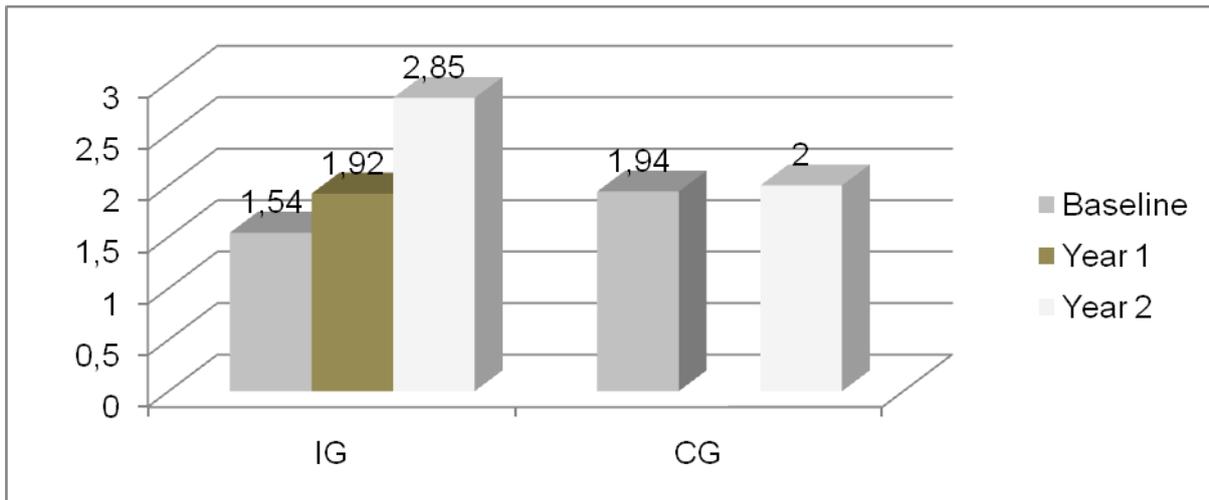
Annual numbers of student office referrals for interpersonal and discipline problems were statistically analyzed. A significant reduction ($p < .001$) was found for the IG while a significant increase ($p < .001$) was found for the CG. Mean number of office referrals for the IG decreased from 18.54 to 0.46 while it increased for the CG from 6.89 to 19.09 (Fig. 1). At post intervention, office referrals per student for year 2 ranged from 0 to 3 for the IG and from 5 to 50 for the CG. All IG students decreased number of office referrals while 94% of CG students increased number of office referrals.

Fig. 1 Mean Office Referrals



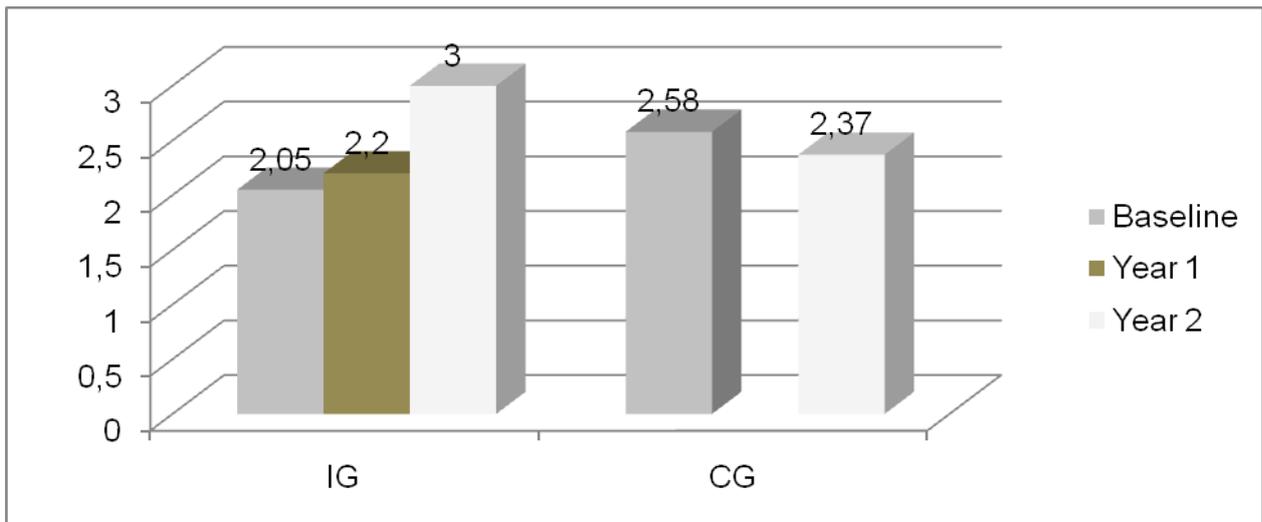
Year end report card grades were compared to understand student classroom progress using letter grades ranging from A (excellent) to F (failure). The letter grades correspond to a number scale as follows: A=4.0, B=3.0, C=2.0, D=1.0 and F=0. Intervention goals were to have all students achieve a criteria grade of C (2.0) and to have students improve their grades. Mean baseline reading grades for both groups were below criteria. The IG mean was 1.54 and the CG mean was 1.94. At post intervention, year 2 mean reading grade was 2.85 for the IG and 2.0 (just at criteria) for the CG (Fig. 2). At post intervention, all but one IG student met criteria or better for reading and 86% of the IG students reading grades improved by 1 or more level, while the other 14% of the IG students remained at the same level. At post intervention, 43% of the CG students were below criteria with reading grades of D or F. At post intervention, 46% of the CG students' reading grades remained at the same level, 28% of the CG students' reading grades improved by 1 level (1/2 of these students went from below criteria to criteria), and 26% of the CG students' reading grades decreased 1 or more levels. Overall, year end reading grades, on average, evidenced substantial improvement beyond criteria for the IG, and remained flat for the CG.

Fig. 2 Year End Mean Report Card Reading Grades



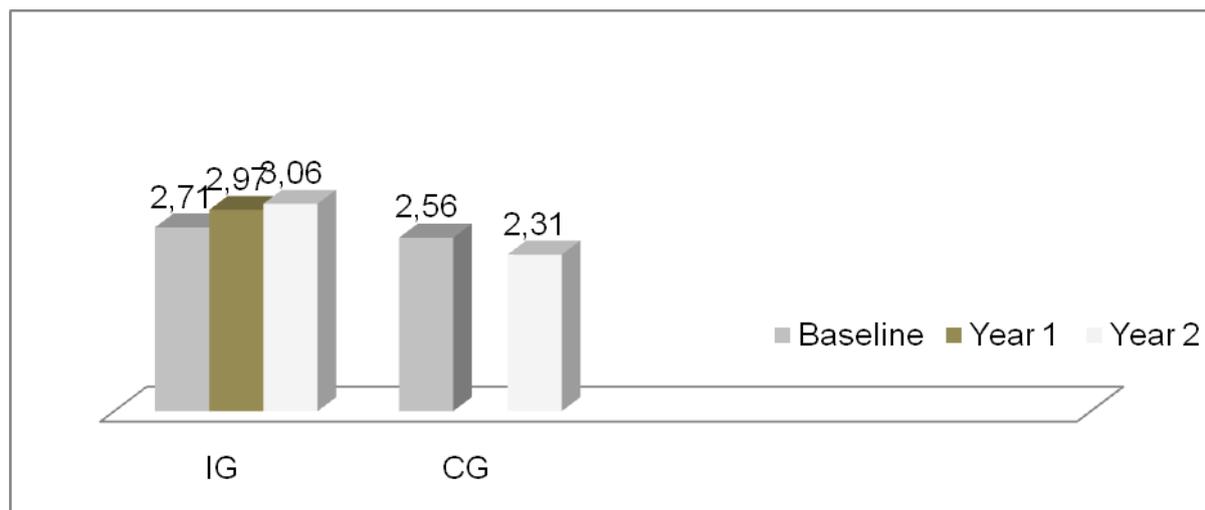
On average, the year end math grades, pre and post intervention, were above criteria for both groups, but the same pattern is seen with improvement/no improvement for the IG and the CG as with reading grades (Fig. 3). The IG mean year end math grades went from 2.05 to 3.0, while the CG mean year end math grades decreased from 2.58 to 2.37. By post intervention, 100% of the IG students and 66 % of the CG students were at or above criteria.

Fig. 3 Year End Mean Report Card Math Grades



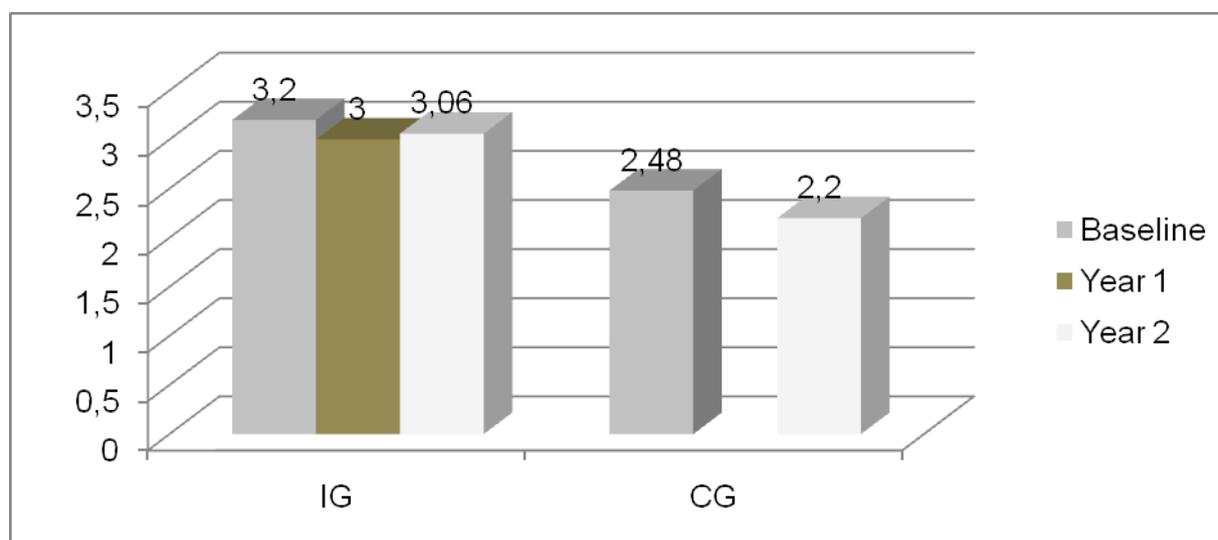
The New York state reading test (ELA) is administered annually to measure school and student progress. Levels 1 and 2 are not proficient and levels 3 and 4 are proficient or better. At baseline the ELA mean scores for both groups were not proficient with an IG mean of 2.71 and a CG mean of 2.56. By post intervention the year 2 ELA mean score was beyond proficiency at 3.06 for the IG and below proficiency at 2.31 for the CG (Fig. 4). Individual student progress was considered from pre to post intervention with positive results for more IG students. From pre to post intervention, the IG students increased from 71% to 94% of students having proficient or better ELA scores, while the CG students decreased from 51% to 43% of students having proficient or better ELA scores. From pre to post intervention, no IG students decreased ELA levels and 34% increased ELA scores by 1 or more levels. For CG students, 66% remained at the same ELA level while 34% decreased ELA score levels.

Fig. 4 Mean ELA Levels



The New York state math test (NYMA) is administered annually to measure school and student progress and is scored with the same levels as the state reading test. Pre and post intervention, mean math test results remained above proficiency for the IG and below proficiency for the CG (Fig. 5). Individually, IG students either remained at the same math test level or increased levels, while CG students either remained at the same math test level or decreased levels. From pre to post intervention, IG students increased from 71% to 94 %, the number of students at or above proficiency levels while the CG students decreased from 54% to 31% the number of students at or above proficiency levels.

Fig. 5 Mean NYMA Levels



Non-mandated support services or mandated special education support services and/or placements are given to students who are not able to be successful in school independently in their regular education classes. Each student can only be placed in one classroom setting but can receive one or more services according to his/her needs. Numbers of students who required combinations of support services and/or placements for learning and/or behavior was compared for the IG and the CG pre and post intervention. Numbers of students requiring non-mandated services (Fig. 6) or mandated services and/or placements (Fig. 7) decreased for the IG and increased for the CG over the course of this study.

Fig. 6 Number of Students Receiving Non-Mandated Services

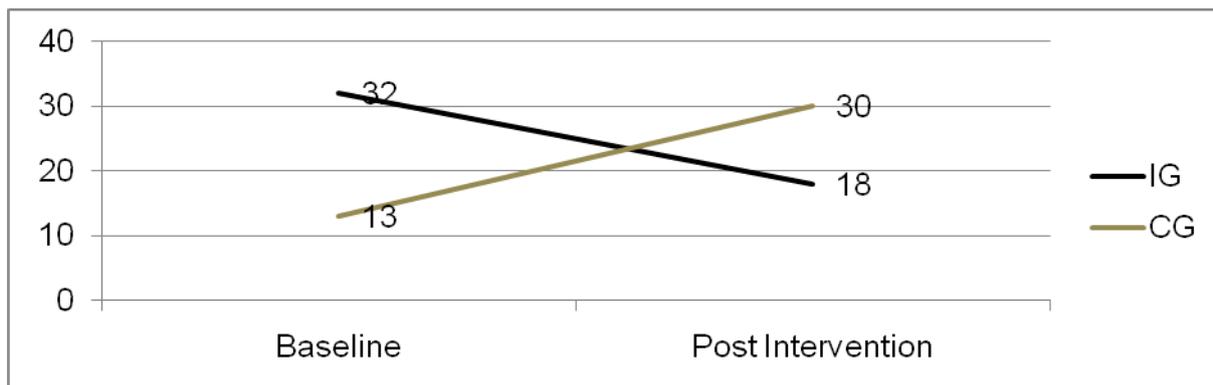
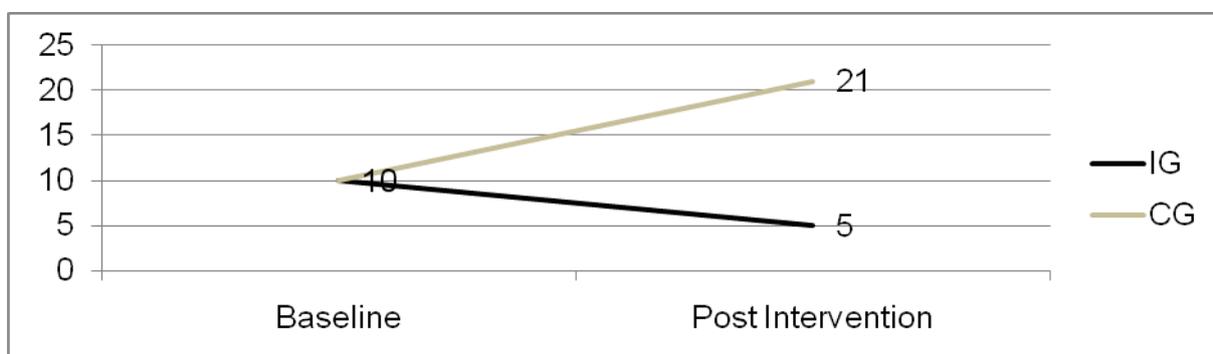


Fig. 7 Number of Students Receiving Mandated Services / Placements



Number of students receiving non-mandated services from pre to post intervention went from 32 to 18 for the IG, and from 13 to 30 for the CG. For students who required mandated special education services and/or placements the number of IG students decreased from 10 to 5, and the number of CG students increased from 10 to 21. As these students approached middle school and adolescence the trends differed substantially for the IG and the CG students. Overall, IG students appeared better able to successfully manage their learning and behavior more independently. Overall, CG students seemed to be less able to be successful academically and behaviorally, which led the school to substantially increase support services and/or placements to these students.

DISCUSSION

Research has shown that providing students with social skills is an effective tool that can serve as a protective factor against negative developmental trajectories, including but not limited to, problematic behaviors and a lack of school success. More intensive interventions than school wide universal interventions do seem necessary to assist at-risk students improve their prosocial choices and problem solving [2].

The results of the pilot study suggest that a social skills intervention that is developed based on research principles and applied in an effective, thorough and consistent format over a two year time period can substantially assist at-risk students. The importance of such an intervention in regard to student behaviors is apparent by the significant decrease in IG mean office referrals. These findings suggest that the IG students appeared to use more positive problem solving and conflict resolution strategies to self manage their own behavior than they previously had used and than their comparison group peers used. By contrast, the CG had equally significant 2 year office referral results but in the opposite direction. This finding confirms earlier research which indicated that students identified with behavior problems in childhood, typically do not spontaneously improve their behavior and often have even worsened behavior as they become adolescents [3, 4, 7].

Pilot study results suggest that an intensive school based intervention which targets improvement in school behavior for at-risk students correlates with improvement in other areas of school functioning

such as academics. Also implied is that with appropriate intervention the potential capabilities of at-risk students can be tapped. At-risk students can be capable of achieving average or better grades and standardized test scores. The intervention appeared to impact most of the IG students' academic trajectories for the better while the trajectories of the no intervention group students often remained at the same plateau or worsened. The pilot study results for grades and state test scores suggests that that at-risk students who received the 2 year intervention are more able to be academically engaged, perhaps by being more focused and effective in their learning, and/or by spending more time on task in class. Study results imply that more reading and math curricula was mastered by more IG students than by CG students, and that the IG students were better able to apply learned material during a test situation. Another way to view the intervention results is to consider student needs for support services and special education services and/or placements. Overall, the at-risk students receiving intervention appeared to be better able to have school success more independently than at-risk students receiving no intervention.

It is incumbent upon education reform advocates to learn how to customize and implement programs to build academic competence and social-emotional resilience. Pilot study results suggest that most IG students were internalizing and generalizing their gains both behaviorally and academically. These gains imply more personal pride and self-efficacy for post intervention IG students than they previously displayed or than their CG peers.

That this pilot study is a field based study in a school is both a major strength and a limitation. Taken as a strength a field based study strengthens the existing research base by providing the often missing key piece of whether an intervention has been found to be effective and practical with the real problems faced by schools and students. An inherent weakness when doing applied research is the lack of strict methodology. Another study limitation is the small sample size and single population sample. Further, a longitudinal follow-up to be certain that documented student gains persist throughout their school years would be valuable. Future studies need to replicate the pilot study findings, and to strive for a broader reach in sample populations and in research design.

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