Utilizing special classroom strategies to foster greater social acceptance of mainstreamed learning disabled students may be more efficient than having school personnel constantly involved in resolving student-to-student conflicts and assuaging hurt student feelings. Learning disabled students assigned to mainstream classes often present serious social skill deficits which impede their social acceptance by their non-disabled peers. Skill deficits can be caused by the following factors: (1) perceptual and linguistic processing deficits; (2) non-verbal ingratiating behavior deficits; (3) dysfunctional patterns of family relationships; (4) failure-laden prior school history; and (5) differential treatment in the mainstream environment by teachers and peers. The following strategies for use by regular classroom teachers and personnel are discussed: (1) manipulation of antecedent events and use of cooperative goal structures; (2) behavior modification, including reinforcement and group contingency management; (3) cognitive and/or instructional strategies, including description, modeling, rehearsal, and feedback; and (4) self-evaluation procedures. A list of 22 references is appended. (FMW)
Understanding Social Skill Deficits of Mainstreamed Learning Disabled Students And Specialized Strategies Teachers Can Use to Foster Greater Social Acceptance

Susan Rovet Polirstok Associate Professor Lehman College The City University of New York

Requests for reprints should be sent to Susan Rovet Polirstok, who is now at the Department of Specialized Services in Education, Lehman College, Bedford Park Blvd. West, Bronx, New York 10463.

Running Head: SOCIAL SKILL DEFICITS OF LD STUDENTS
Abstract

Learning disabled students assigned to mainstream classes often present serious social skill deficits which impede their social acceptance by their non-disabled peers. These deficits can be attributed to a host of factors including perceptual and linguistic processing deficits, non-verbal ingratiating behavior deficits, dysfunctional patterns of family relationships, failure-laden prior school history, and differential treatment in the mainstream environment by teachers and peers. Detailed in the text is a discussion of how perceptual and linguistic processing deficits impact on student social performance and acceptance with non-disabled peers. A variety of specialized classroom strategies are suggested which regular educators and other support personnel in the schools can employ to foster greater social acceptance of these learning disabled students with social skill deficits. From a time expenditure perspective, utilizing specialized classroom strategies may indeed be more efficient than having school personnel constantly involved in resolving student-to-student conflicts and assuaging hurt student feelings.
Under the least restrictive environment of PL 94-142, more and more learning disabled students are returning to mainstream classes and receiving part-time special services in a resource room program. Regular educators are faced with the job of integrating these learning disabled students into their classes. To be successful at this task requires that the regular educator be able to make adjustments in class assignments to afford this student every opportunity to achieve his/her academic potential. However, the regular educator's task does not end here. Just as the mainstream teacher must identify academic areas of strength and weakness, so must the teacher also be able to identify areas of social strengths and weaknesses. Just as the teacher must be able to implement strategies to improve academic performance, so must the teacher be able to implement strategies to improve social performance. This paper will discuss the types of social skill deficits that mainstreamed learning disabled students bring to regular classrooms, and the specialized strategies which teachers can employ to foster greater social acceptance of these students.
The poor social skills that learning disabled students are found to demonstrate are related in varying degrees to a broad range of factors including: perceptual and linguistic processing deficits, non-verbal ingratiating behavior deficits, dysfunctional patterns of family relationships, failure-laden prior school history, and differential treatment in the mainstream environment by teachers and peers. While all of these factors have been widely documented as related to poor social skill development in learning disabled students, none have been proven to be causal agents. Hence all that is known is that for some learning disabled students with poor social skills, a constellation of these factors can be readily noted. It is important for the classroom teacher to understand the extent to which these factors, particularly perceptual and linguistic processing deficits as well as non-verbal ingratiating behavior deficits, impinge on the social behavior(s) of learning disabled students and the resultant problems in day to day classroom operation that may ensue.

A child with perceptual processing problems might have as much difficulty reading faces as (s)he has reading words or numbers (Osman, 1982). The learning disabled child often does not perceive the same cues as others from the environment. Facial cues and body movements tell us if our companions are happy, angry, bored or fearful. However,
the learning disabled student might not perceive these non-verbal cues, or may only partially perceive them. This inability to interpret non-verbal communication may account for inappropriate remarks, gestures and actions on the part of the learning disabled student (Axelrod, 1982; Bryan, 1977; Goldman & Hardin, 1982; Smith, 1978).

Not only might a learning disabled student have difficulty with processing non-verbal communication, but linguistic processing deficits may exist as well which are even more debilitating. Being able to express oneself and understand the verbal communications of others is an important aspect of socialization and may very well impact on social acceptance with peers. Weiss (1985) found that learning disabled children tend to view social interactions as more unfriendly than their non-disabled peers. According to Weiss, when the learning disabled child needs to resolve contradictory information, (s)he uses the more overt, observable social cues and misses the more subtle cues. This is consistent with children who have problems processing receptive language, where such children may misinterpret the main idea of a conversation or take everything said literally.
Learning disabled children with expressive language deficits may have difficulty making themselves understood particularly when trying to resolve a conflict. Expressive language deficits may also impede LD students (especially adolescents), when trying to resist peer pressure around breaking school or parental rules, drug abuse, and becoming sexually active (Schumaker & Hazel, 1984).

In light of these perceptual and linguistic processing deficits, LD students may often appear insensitive because they fail to correctly interpret the cues that reflect the feelings and thoughts of others. They are unable to view a situation from another's perspective, a phenomenon termed by Smith (1978) as an "egocentric outlook" or by Lerner (1985) as a "role-taking" deficit. As Pearl and Cosden (1982) demonstrated, learning disabled children had poorer comprehension of social situations than their non-disabled peers when asked to view social vignettes. In fact, disabled students often have difficulty thinking through and projecting a logical sequence of events that might follow a given action or situation. Bryan (1982) showed that although LD children understand socially acceptable behavior in isolation, when asked to respond appropriately to a given social situation, these same children could not choose an appropriate behavior. Hence it is difficult for a teacher or a parent to require that an LD student assume
responsibility for his/her actions, when in fact the student cannot correctly assess the situation or fully anticipate all the resultant consequences.

Another area of possible deficit for LD students may involve the use of overt non-verbal ingratiating behaviors (Bryan & Sherman, 1980), where such behaviors include smiles, sustained eye contact, or a firm handshake (Smith, 1978). Bryan and Sherman (1980) demonstrated that learning disabled students made less face to face contact and smiled less than did their non-disabled peers. Further, Schumaker and Hazel (1984) found learning disabled students tended to exhibit deficits in such overt behaviors as using hand gestures while talking, and in leaning the body forward when communicating. These non-verbal deficits impact on socialization with peers in that if the LD student doesn’t smile or sustain eye contact, peers will often assume that these are signs of disinterest and exclude the student from the activity at hand. The smiling behavior is of particular importance in new situations, where approachability is essential to making new friends or even succeeding at an interview.

The deficits discussed thus far contribute to LD students making inappropriate responses to given social situations. These inappropriate responses put them "at risk" for ridicule, fights, and exclusion from certain
activities by their non-disabled peers as well as for punitive measures and disapproval from their teachers. A cycle of on-going and often escalating disapproval and rejection may characterize the relationship between the socially deficient LD student and his peers and/or teachers, with the quality of these interactions related to the degree of severity of the social deficit (Polirstok, 1986; 1987). Since most learning disabled students have incurred a history of failure-laden school experience, the differential treatment by peers and teachers further validates for them their own lack of self-worth. This becomes evident in the number of negative self-referent statements made by these students. Since a good socialization with peers is based on liking and accepting oneself, changing the quality of interactions between teachers and peers is essential to enhancing self-worth and fostering greater social acceptance for the mainstreamed LD student (Polirstok, 1986).

This brief review was aimed at helping teachers to recognize the impact of certain perceptual, behavioral and linguistic processing deficits on the social acceptance of mainstreamed learning disabled students. However, once teachers are able to recognize these deficits, the important question becomes how to help LD students gain increased social acceptance from their non-disabled peers. The
discussion which follows will provide teachers with some helpful strategies.

**Specialized Strategies to Increase Social Acceptance**

There are various specialized strategies that can be used to increase social acceptance. Among the strategies that will be discussed herein are: a) manipulation of antecedent events and use of cooperative goal structures, b) behavior modification strategies including reinforcement and group contingencies, c) use of cognitive and/or instructional strategies including description, modeling, rehearsal and feedback, and d) use of self-evaluation procedures. The role of the teacher in implementing each of these suggested strategies is critical; the teacher is the behavioral engineer in charge of creating specialized classroom environments which will result in greater social acceptance of mainstreamed LD students by their non-disabled peers.

*Manipulating antecedent events and cooperative goal structures.* This approach is based on the premise that the social environment does not set occasions for positive exchange between disabled children and their non-disabled peers (Gresham, 1982). In the absence of this positive exchange, disabled students become classroom isolates. Therefore it is up to the teacher to create situations where
positive exchange between disabled and non-disabled students can occur. One way of accomplishing this would be to pair disabled and non-disabled students as "helping pairs" either for study purposes where each can assist the other with a particular skill, or for a brief "game period". "Helping pair" time can be established for a period of a month and evaluated in terms of how disabled students appear to be relating to non-disabled students in other aspects of the program. Pairs that are not successful can be re-assigned; those that are successful may wish to continue. The key to the overall success of this type of approach is the degree of teacher reinforcement and flexibility.

Pairing students in this task-oriented way is referred to in the literature as use of "cooperative goal structures." Schumaker and Hazel (1984) report that LD students exhibited significantly more friendly interactions and showed marked improvement in such skills as working together, listening, and questioning when cooperative goal structures were used. Similarly, Cosdan, Pearl and Bryan (1985) demonstrated that LD children working in cooperative groups have more positive attitudes towards other group members and a greater feeling of being liked than do LD children not participating in such cooperative groups. In general, while the overall academic gains derived from cooperative goal structures are less than dramatic, the
social gains are well documented, particularly for LD girls. Continued study using this technique needs to be done to determine whether the social skills learned by LD students are generalized to other social situations.

**Behavior modification strategies.** The use of teacher social reinforcement (verbal praise or hugs) or token reinforcement can be very potent in shaping appropriate social interaction between LD and non-LD peers. Much of behavioral literature focuses on "catching a target child being good." Where remediation of social skill deficits is concerned, the teacher wants to catch an LD student making an appropriate social initiation and reinforce that behavior. Similarly non-disabled peers who include LD students in classroom activities should also be reinforced. Teachers can readily use token reinforcement or verbal praise for such social behaviors as sharing and cooperation. The use of reinforcement increases the likelihood that appropriate social initiations and interactions will occur again. If token systems are used, teachers must be careful to keep accurate records and to make prizes or rewards for token exchange meaningful, interesting, and readily earnable.

With group contingency management, the rewards for the whole group can be made contingent on the performance of one student, a group of students, or the entire class. Hence if
the teacher wishes LD students in the class to engage in more cooperative play with non-disabled peers, class free time may very well depend on the extent to which LD students engage in such play. The positive aspect of this approach is that if a LD student was playing alone, other students might deliberately involve the target student in order to be sure that they would later receive free time. On the negative side, contingency management sometimes causes undo stress for the target child(ren). Therefore it is essential that before setting up any group contingencies, a teacher be sure that the target children are really capable of the desired behavior(s) with enough frequency to ensure that they will not feel the brunt of peer pressure.

Cognitive and/or instructional strategies. Cognitive strategies usually include descriptive discussion, modeling, rehearsal, and feedback. Using descriptive procedures, a teacher will define a desired skill, specify why the skill is needed and when the skill should be performed (Schumaker & Hazel, 1984). A teacher may also describe several situations and ask the student(s) to discriminate which situation would be most appropriate for the skill being taught. Descriptive procedures have been used successfully in group learning situations involving reduction of temper tantrums and physical aggression, and the increase of appropriate social interactive skills (Amerikaner & Summerlin, 1982; Wanat, 1983).
Modeling is another cognitive strategy useful in the teaching of social skills. Modeling involves the sequential presentation of social performances through either a live or film format. When using live modeling, the target child observes a peer modeling a behavior in a naturalistic setting. In film modeling, the child observes the behavior on film or videotape. Gresham (1982) found that when using modeling, narration was important to call attention to the model's behavior. Live modeling is a most readily available technique for teachers in the classroom. Cooke and Apolloni (1976) used live modeling to teach smiling, sharing, and positive verbal interaction to learning disabled children.

Use of role play to demonstrate an acceptable resolution to a classroom problem, where the teacher sets the stage and uses descriptive language to illustrate the important mood, attitude or behavior shift, can be most effective and easily employed.

Rehearsal and feedback are two other cognitive strategies that may be utilized to improve social skills. Most often, these two techniques are used together to maximize change. Initially, target students verbally rehearse the steps necessary to perform a social skill in order to memorize the sequence of requisite behaviors. The rehearsal may take the form of a structured practice, involving both verbal and written responses. Use of teacher
praise during rehearsal helps keep students on task and motivated. Following the rehearsal, the teacher can then provide feedback as to the correctness or completeness of the material rehearsed. Videotape can be used to increase the student's self-evaluation ability. Teacher feedback gleaned from observation and videotape is most helpful to a student in that it provides an immediate evaluative response to a given behavior, which in turn helps the student to adjust that behavior accordingly.

**Use of self-evaluation techniques.** Self-evaluation or self-management has been identified as one of eight essential characteristics for effective mainstreaming (Wang, 1981). Self-evaluation places the responsibility for behavior on the child him/herself and teaches the child to provide consequences for his/her own behavior. Using self-evaluation, children become more aware of their actions and can learn to regulate them according to environmental expectancies (Polirstok, 1989; 1987; O'Brien, Riner & Budd, 1983). The most widely accepted components of self-evaluation include self-assessment, self-recording, self-determination of reinforcement, and self-administration of reinforcement. Self-evaluation procedures may be designed using a cognitive behavior modification approach focusing on behaviors of deliberation, problem solving, planning and evaluation. A critical component of this approach involves
verbal self-instruction, where students talk to themselves to control their behavior, using active rehearsal and modeling as training techniques (Graybill, Jamison & Swerdlik, 1984).

The components most often present in the training of self-evaluation include: a) application of self-evaluation techniques on naturally occurring, clearly delineated daily events that students are familiar with; b) use of cueing procedures to signal initiation of self-recording and/or self-instruction; c) fading of cueing procedures over time to increase student responsibility for self-evaluation; d) use of feedback to provide information to subject about the appropriateness of his/her responses (often done through a matching of student self-ratings to teacher ratings over a set period of time); and e) the use of token reinforcement to reward accurate self-reporting. Overall, self-evaluation procedures can be the key many teachers seek to assist learning disabled students in making a smooth transition to regular class placements.
Conclusion

All of the specialized strategies presented herein require extended training over time; none can produce dramatic effects in one session. Many existing social skills training programs employ a combination of descriptive, modeling, rehearsal and feedback techniques for one to two hour sessions per week for six to ten weeks, with rehearsal criteria set at 90% - 100% (Hazel, Schumaker, Sherman & Sheldon, 1982; LaGreca & Wesibov, 1981). However, if regular educators are able to recognize the social skill deficits mainstreamed learning disabled students present and employ some of the suggested strategies, the time spent in implementing such strategies will in the long run be more efficient than constantly having to resolve student-to-student conflicts, assuage hurt student feelings, and mete out punishments.

Constant teacher reinforcement of newly acquired social behaviors derived as a consequence of training by mainstream teachers may contribute to generalization and maintenance of these social behaviors across teachers, peers, school settings, and time. The end result of such generalization would be increased social acceptance of learning disabled students and an enhancement of their social status among their non-disabled peers.
References


