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Friendship Club: Development and implementation of a 12-week social skills group curriculum

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Abstract

Background: Friendships help children cope with stress, become more socially competent and achieve well academically. The Friendship Club (Tillman, 2012) is a small group school counselling intervention that meets weekly for 12 weeks to focus on social skills training for elementary age children.

Aims: The purpose of the study was to determine the effectiveness of the curriculum in improving the social skills and overall well-being of the participants and examine the psychometric properties of parent, teacher and self-report pre- and post-tests.

Methodology: Thirty-four children between the ages of six and 12 participated in Friendship Club groups at local elementary schools. Prior and after the group sequence, parents, teachers and children were given a standard pre-test which assessed such dimensions as friendships, communication skills, interpersonal skills such as sharing, and abilities such as conflict management. Paired-samples *t* tests were conducted between key items and scale averages.

Results: All four scales designed to assess implementation of social skills showed excellent levels of internal consistency. Qualitative parent-report results include several improvements. Qualitative self-report included a number of clear strengths-based improvements. Quantitative results include that students reported a significant increase in their willingness to socialise with others. Additionally, the average score of children's implementation of helpful social skills as reported by their parents rose significantly.

Conclusion: After examining the quantitative and qualitative parent and child reports, this study concludes that overall the group curriculum for the Friendship Club was beneficial at facilitating the integration of social skills for children identified as struggling to maintain relationships.

KEYWORDS

adolescents, group curriculum, school counselling, social skills

1 | BACKGROUND

The ability to develop and maintain relationships is an important part of childhood for a variety of reasons. For example, relationships help students undergoing difficult events (Adams, Santo, & Bukowski, 2011) and increase well-being in a variety of settings (Chu, Saucier, & Hafner, 2010). Students with friends develop social

competence and develop positive experiences (Erwin, 2013) and are more academically successful than their peers without friends (Elias & Haynes, 2008). Developmentally important skills include those related to communication, conflict resolution, developing and maintaining trust and intimacy (Michelson, Sugai, Wood, & Kazdin, 2013), which in turn facilitate friendships that may serve as basic building blocks for adult relationships of an intimate nature (Erwin, 2013).

School counsellors have the ability to enhance student well-being by helping students learn and practise social skills that will serve them throughout life.

In order to develop and maintain friendships throughout early childhood and as they develop in the future, students need to learn and implement helpful social skills, including the ability to form friendships; resolve conflicts; apologise; share with others (both initiating and reciprocating); play cooperatively; and other similar adaptive behavioural aspects of prosocial interactions (Jones, Greenberg & Crowley, 2015). When students lack the skills to connect and interact appropriately with others during their elementary school years, they tend to fall into two broad categories: (a) neglected students, who are usually introverted and passive; and (b) rejected students, grouped into rejected-withdrawn and rejected-aggressive (Kostelnik, Whiren, Soderman, Stein, & Gregory, 2002). Regardless of their specific status, students with poor social skills may suffer academically, socially and psychologically; and suffer also later in life (Parker, Rubin, Erath, Wojslawowicz, & Buskirk, 2006). Academically, they may perform lower than their peers with more relationships and social skills, and view school negatively (Wentzel, Battle, Russell, & Looney, 2010). Socially, they can feel isolated and alone and have difficulty initiating and maintaining play with their peers (Rubin, Coplan, & Bowker, 2009). Clearly, students who struggle socially often struggle in a host of other areas.

Despite the clear need for a group to address the needs of otherwise developmentally normative children struggling with poor social skills outside the context of severe psychopathology, few such curricula exist. Overwhelmingly, existing social skills groups have been developed to treat adults with schizophrenia (Pilling et al., 2002) and were popularly developed in the 1980s with a decrease in frequency of development since then. The structure of these groups tended to be psychoeducational, didactic, slow and repetitive (Lieberman & Martin, 1988). For children, few social skills training programs exist, and those that do are designed for children with specific disorders such as autism spectrum disorder (Sundberg, 2008; White, Keonig, & Scahill, 2007). A review of such groups found that they were designed to meet the needs of severely disabled or dysfunctional children (Gresham, Sugai, & Horner, 2001) and fail to maintain effectiveness over time. Many such groups have been developed to address autism (Hopkins et al., 2011; Laugeson, Frankel, Gantman, Dillon, & Mogil, 2012), but a notable lack of documented interventions exist for children without apparent developmental disorders. Further, those that do exist, fail to provide a manualised list of sample activities, discussions and themes that can be adapted to meet the needs of various ages, developmental levels or skill ranges. This limits practitioners' use of these interventions, or researchers' ability to build upon or implement these principles.

It is noted that existing social skills programmes are almost exclusively limited to the United States (Domitrovich, Cortes, & Greenberg, 2007; Grossman et al., 1997; Webster-Stratton & Reid, 2004). Commonly, these programmes do not include a description of the actual interventions, goals or techniques in the study and instead direct readers to a proprietary system not detailed in the

article (Kam, Greenberg, & Kusché, 2004), which limits the ability of practitioners internationally to adapt the programmes as may be needed. As social skills are clearly related to the culture in which the individual is located (Chapdelaine & Alexitch, 2004), it is difficult to transfer a programme completely to a new culture or location in which it was not normed, and this would be impossible without a clear delineation of each component of the programme. Increased distribution and examination of programmes, along with their actual content and progression, would thus be useful to both practitioners and researchers.

To address this shortcoming, the present article introduces a pilot study of the first social skills curriculum in a sample without a clear and severe psychological disorder, providing discussion points to facilitate counsellors employing this curriculum or developing a similar one for the needs of their particular community or setting. To develop this group, a psychologist with extensive training and experience in school counselling, and with input from and collaboration with other school psychologists examined research on social skills training for children with autism (Ozonoff & Miller, 1995), and other disorders (Gaffney & McFall, 1981), that demonstrated significant, positive effects as a result of the training. Additionally, reviews of the techniques employed in existing and previous social skills training programmes were examined (Spence, 1995, 2003), that corresponded with developmental milestones, to ensure appropriateness for the participating children (Bandura, 1977).

A curriculum was developed to foster collaborative skills, and to encourage interpersonal and emotional growth amongst students rejected or neglected by their peers. This curriculum, Friendship Club (Tillman, 2012), is a small group school counselling intervention that meets weekly 12 times to focus on social skills training for elementary age children. The curriculum consists of 12 semi-manualised group meetings, with materials, activities, discussions and inventories structured to guide school counsellors (including those in training) to lead the group progression and create an environment in which children learn the social skills critical to immediate and sustained well-being. The curriculum represents a pilot attempt to develop, preliminarily test, and communicate the results of a newly developed programme to address a lack in clinically oriented literature. The programme was developed by examining various existing curricula which, despite limited evidence or success themselves, were helpful in identifying potential skill areas that students need in order to develop healthy friendships. The programme developer, currently a licensed psychologist, spent many years working with children in both small group and individual counselling settings to develop the present protocol. The present study represents the first structured application and evaluation of the programme in its published format. It is noted that, while adverse life events such as neglect and abuse may interfere with the interpersonal and behavioural functioning of children (Kaplan, Pelcovitz, & Labruna, 1999), it is important to evaluate children for appropriate of group-based rather than individual intervention. A group-based social skills curriculum as used presently would likely not be the appropriate intervention and would not address the underlying

source of distress or environmental stressors contributing to the child's clinical presentation. The present group is not intended to address psychopathology or the effects of severe negative events.

1.1 | Aims

The present study serves as a pilot study for the employment of this newly developed curriculum and begins to establish its effectiveness in improving the social skills and well-being of the participants. It was hypothesised that:

1. Group-based activities and interactions would lead to the increased utilisation of helpful social skills and,
2. Group-based activities and interactions would lead to decreased negative reactions associated with social interaction and increased positive reactions, as described through open-ended responses.

To develop a preliminary assessment of the effectiveness of the group, brief paired pre-post inventories were given to parents, teachers and students as a first step towards assessing and refining the present curriculum. The assessments were a secondary consideration to the actual curriculum and used to better refine or validate the programme moving forward.

Although the present curriculum is tested in this pilot study in a group-based format, the programme is not limited to use in a structured, manualised small group format. This is consistent with established practice, as manualised individual therapy programmes have been modified for groups (Wilfley, Frank, Welch, Spurrell, & Rounsaville, 1998), and adult-group DBT has been adapted for individual work with children (Perepletchikova et al., 2011) in the past. Consequently, the present curriculum was specifically designed to be adaptable through: (a) use of common developmental markers; (b) clear discussion of each goal and intervention; and (c) a mixture of evaluation approaches to encourage practitioners to assess progress and create modifications in an ongoing manner. Additionally, although the present study was conducted by school counselling graduate students, the interventions are not designed to address a student's academic performance and may be used in non-school settings as well. These are designed for clinicians to use with children in almost any counselling setting (including outpatient, long-term hospital and other facilities where children might benefit from interventions to improve social skills).

2 | METHOD

2.1 | Participants

Group members were selected based on referrals from school teachers, school counsellors, other school personnel and parents. A brief description of the group was included in school newsletters and mailings, as well as verbally to teachers and staff. Informal recommendations to school counsellors were made by teachers and staff based on their personal or professional belief that a student was not demonstrating social skills at the expected level. Following these

referrals, school counsellors privately discussed the group with parents and students, which included an informal assenting process. Ultimately students were included if a teacher, the student, parent and school counsellor felt it would be useful. Exclusionary criteria for the present sample consisted of students with a diagnosis of autistic spectrum disorder, history of recent physically aggressive behaviour, self-reported potential for difficulty in attending weekly meetings for 12 weeks, or assessment that their presenting behaviours and emotional symptoms were inappropriate for this skills-based format. The counsellors who conducted the programmes were based in schools, where group counselling is the preferred method of counselling involving more than a few sessions. Therefore, students needing individual interventions were deemed ill-suited for the group counselling delivery of this programme. These students were instead seen as part of the counsellor's individual practice. The curriculum was designed for a broad range of communities nationally, structured to balance techniques to facilitate universal aspects of interpersonal relational skills (including initiating contact or apologising), with the flexibility to tailor interventions to the school and community in which it is used.

Thirty-four students aged 6–12 participated in Friendship Club groups at elementary schools in several areas across the United States, with group sizes ranging from five to eight. Groups consisted of a single grade or two consecutive grades. Five school counselling graduate students facilitated the groups in the study. All students attended each of the 12 sessions. The average household income was roughly \$42,000. Twenty-two students identified as male and 12 as female. Six students were in the second grade; seven were in the third grade; six in the fourth grade; seven in the fifth grade; and eight in the sixth grade. The majority of participants ($n = 29$) identified as white, five as Native American.

2.2 | Measures

Measures were developed specifically for use in the present curriculum. These included a student self-report pre- and post-test, a teacher report pre- and post-test, and a parent-report pre- and post-test. Although no prior testing of the measures took place, the present scales were developed as a method of initial testing of the present pilot study and were evaluated for preliminary internal consistency, with values reported in the present manuscript.

2.2.1 | Student self-report

The student self-report pre-test consisted of 10 questions. The first four items were phrased as yes/no questions, each assessing a different dimension of interpersonal skill. The next four questions asked students to describe what they may do in common social situations and assessing their interpersonal readiness. The last two items included a question about the hardest part of making friends, and a final question asking what else they would like us to know. The paired post-test consisted of the same 10 questions, but with the addition of the students' favourite and least

favourite aspect of the group curriculum. Children who expressed, or were observed to have, difficulty with written or open-ended language were assisted in recording their responses by a facilitator who discussed their reactions with them individually. Facilitator assistance with writing and responding was provided only on an as-needed basis to ensure the greatest degree of consistency between participants possible.

2.2.2 | Teacher report

This paired pre-test/post-test consisted of 16 items. The first asked about grades typically earned, and the last was open-ended, including “what else would you like me to know about this student?” Items 2–15 are scored on a four-point scale and include a variety of behaviours that contribute to an overall degree of interpersonal effectiveness. Teachers were asked to report their student’s typical behaviour in domains such as initiating engagement, conflict resolution, consequence acceptance and emotion management in situations specific to social interaction.

2.2.3 | Parent report

These matched pre-test and post-test inventories consisted of 15 items. Items 1–14 asked about their child’s interpersonal effectiveness with the items paired to the teacher report items previously described. It did not request information related to grades. All other questions were matched with teacher report, substituting “my child” for “this student.” These items were averaged to calculate a mean score of utilisation of social skills. Items were on a four-point scale from Strongly Disagree to Strongly Agree. Items included “Typically, my child deals with conflict appropriately” and “Typically, my child shares and cooperates well with other children.”

2.3 | Data analysis

Descriptive analyses were first conducted to examine data distributions, with brief written responses examined by the research team. A short adapted procedure was employed; specifically, two members of the research team met and discussed their perceptions to ensure agreement. Responses were examined in terms of general tone (positive, negative or neutral/mixed), as well as what observations were made that could be incorporated into future sessions. Responses were limited in thematic breadth as the items, though open-ended, were specific to their perceptions of the group and its impact on social skills. Following this, psychometric properties of the scales were developed, to test hypotheses that the parent and teacher report forms would represent unidimensional inventories with good internal consistency. Last, paired-samples *t* tests were conducted to compare post-group growth from parent and teacher inventory averages, as well as between key self-report items assessing student well-being. As the student self-report inventory consisted of only four independent Likert-type items and several qualitative items, numerical items were examined individually.

2.4 | Procedure

The group procedures were conducted by graduate students in an accredited school counselling programme, under the weekly supervision of faculty psychologists, including the creator of the curriculum. This project represented the culmination of a Master of Science degree for students following completion of other coursework. Students were trained in the group protocol in class and small group, with role-play and demonstrations prior to beginning the group. Students were also completing practicum placements at the school and thus had some familiarity with students, parents, teachers and staff. Prior to any interaction with students or parents, the institutional review board (IRB) of the sponsoring University was contacted for approval. This board reviewed proposed study protocols and procedures utilised in the present study and, with ongoing oversight provided, allowed the study to occur under the auspices of the sponsoring University. Following parental consent and student assent procedures, in accordance with IRB approval, counsellors arranged facilities and times to meet with the groups. Prior to and 1 month after the group sequence, parents, teachers and students were given a standard questionnaire which assessed such dimensions as friendships, communication skills, interpersonal skills such as sharing, and abilities such as conflict management. Both quantitative and qualitative dimensions were assessed, with the student self-report being primarily qualitative and the parent and teacher forms consisting primarily of quantitative items.

Each group met once a week for 12 weeks, with groups starting shortly after returning from winter break to avoid interruptions that may have complicated comparability of data between groups. Groups were held in a classroom, immediately after the school day for 1 hour. Arrangements for this, including transportation, were made with parents before the group began. No students were reported to have withdrawn from the study or to have declined to complete information at the start and conclusion of the group. Each weekly session had a general theme, such as “complimenting friends” or “dealing with conflict,” objectives to accomplish during the group, which helped standardise the goals of the given session across groups, and activities to help accomplish this goal, including vignettes, role-playing and games (Table 1).

2.4.1 | Curriculum

Group 1: Listening to Others—During this session, the professional introduced themselves to students, oriented the students to the group topics, requested that students agree to a list of group rules and engaged students in a getting-to-know-you activity that encourage them to listen and respond to peers appropriately; a variation of an ice-breaker game for children, such as remembering their name, and a favourite thing about them and sharing with someone else.

Group 2: Asking Questions—During this session, students learned about the importance of getting to know potential friends. They learned how to focus on another person’s experience by asking their peers questions. Using group materials, students were introduced to question words such as who, what, when, where, why

TABLE 1 Group sequence

Session #	Group topics	Group objectives	Group activities
Session #1	Listening to others	Build rapport and trust Establish group rules Learn to listen and respond	Creating group rules Introduce listening topic Get to know you listening game
Session #2	Asking questions	Focus on others' experiences Ask questions about their peers	Introduce questions topic Modified 'show and tell'
Session #3	Complimenting friends	Learn how to compliment friends	Introduce complimenting topic Semi-structured art activities
Session #4	Inviting others to talk or play	Learn how to invite others into play or conversations	Introduce inviting others topic Semi-structured role play
Session #5	Joining play or conversation	Learn how to join in peers' play and conversation	Introduce joining others topic Semi-structured play scenario
Session #6	Sharing and cooperating	Learn to share and cooperate with one another	Introduce cooperation topic Cooperative play activity
Session #7	Asking for help	Increase awareness of when to ask for help and ability to do so in social situations	Introduce 'asking for help' topic Activity with vignettes
Session #8	Accepting consequences	Learn to recognise feelings and deal with them appropriately	Introduce consequences topic Turn-based game playing
Session #9	Apologising	Learn to apologise when they have made an interpersonal mistake	Introduce apologising topic Puppet show
Session #10	Dealing with conflict	Learn to listen to another's perspective and problem solve	Introduce conflict strategy topic Role play scenarios
Session #11	Dealing with teasing	Learn to deal with teasing in healthy ways	Introduce teasing topic Worksheets on teasing
Session #12	Smiling and having fun	Learn how to enjoy and have fun with others when playing	Introduce peer enjoyment topic Game day/goodbye activity

and how, engaged in a show-and-tell activity and asked questions to learn more, while feedback encourages students' use of questions.

Group 3: Complimenting Friends—During this session, students learned to compliment their peers. The professional may begin by explaining what compliments are, how they are done, and exploring with students why they are important. Students may draw something that makes them happy, and simple but specific compliments on their work, encourage students to do the same for others.

Group 4: Inviting Others to Play and Talk—During this session, students learned to invite others to play or talk with them. A poster board is used to invite others, including: (a) identifying a topic to discuss; (b) looking for someone who is not already playing with anyone; (c) walking to the person and making eye-contact; (d) asking what they are doing; (e) if the person is playing individually, asking if you can join; (f) asking if the person would like to play with you; and (g) following the rules of the game or conversation. Following this, role-plays can be held, in which students can take turns initiating and joining play.

Group 5: Joining Others' Play and Conversations—During this session, students learned to join the play and conversations of peers.

Depending on the age of the group members, a puppet show or modelling good conversation-starters would be helpful. The four steps of joining play would include: (a) waiting for an appropriate time to interrupt; (b) complimenting the students who are playing; (c) asking if he or she can join the game; and (d) following the rules of the game. Activities include having rotating card games that students can join.

Group 6: Sharing and Cooperating—During this session, students learned how to share and cooperate with their peers, by verbally exploring the nature of sharing and cooperation, including reasons to do so and how the student and their peers feel when this occurs. The students worked together to create a story, with each contributing the next story event. For older students, activities involving toothpicks and marshmallows to create the tallest towers possible while providing positive feedback may help them become more cooperative.

Group 7: Asking for Help—During this session, students learned when and how to ask for help. A list of scenarios was created that the students may have experienced or about which they have expressed frustration. Scenarios are worked through as a group, gathering input on when and how to ask for help and from whom.

Scenarios can include help completing a task, to prevent a fight, to have someone join you, when overwhelmed with emotions, and asking for information from a peer. These and other scenarios are practised by working in small groups.

Group 8: Accepting Consequences—During this session, students learned to recognise their feelings, and ways to cope with those emotions. Before beginning the exercises, topics of discussion should include what consequences are, why they happen, how they feel and how to gracefully accept them. Activities children regularly engage in are used, such as playing board games and providing positive feedback to students when showing good sportsmanship. Process questions are used during and after the activities to ask how it felt to accept these consequences.

Group 9: Apologising—During this session, students learned how, why and when to apologise to friends when they have made a mistake. Steps related to apologising include: (a) identifying the behaviour for which they want to apologise; (b) telling someone else what you are apologising for and why; (c) ask what you can do to fix the problem; and (d) fix the problem or change the behaviour. Puppet shows or role-playing can create situations where one character should apologise to another, with students needing to identify why, how they would do so and how to fix the problem. Real-life examples of when students have apologised can be discussed, and these stories generalised for group understanding.

Group 10: Dealing with Conflict—During this session, students learned conflict resolution skills that will assist them in resolving disputes with friends, including exploring what conflict resolution is, and why it may be important to them. Discussion involved four steps to resolving conflict: (a) expressing empathy and acknowledging how the other person feels; (b) hearing each other's side of the story; (c) developing possible solutions; and (d) compromising. During role plays, students were asked about participant feelings, both sides of the conflict articulated, possible solutions generated and an agreeable solution developed.

Group 11: Dealing with Teasing—During this session, students learned how to deal with teasing in assertive and non-violent ways. When discussing teasing, whether students feel physically safe or unsafe is differentiated, and how this shapes their response. Skills were presented that they may use in response to teasing such as staying calm and relaxed, ignoring the teaser, standing up for themselves and telling the teacher. Vignettes of common teasing situations are discussed, and group members can explore how that situation may be handled.

Group 12: Smiling and Having Fun—Students learned about the importance of smiling and having fun during play and conversations. The importance of maintaining a positive and fun approach to friendship is discussed with the group. Students were encouraged to bring in a fun object to play with such as a game, cards or toy, that can be shared with others, and allowed to teach others how to use them and join in the game. A goodbye activity was conducted, including asking students draw a picture of themselves or a favourite memory and supporting group members to share positive feedback with each student.

3 | RESULTS

Administration of each scale (parent pre and post; teacher pre and post), designed to represent an initial effort to gauge the effective implementation of social skills, showed good to excellent levels of internal consistency: parent pre-test (0.88), parent post-test (0.90), teacher pre-test (0.88) and teacher post-test (0.94).

When parents were asked what else they would like us to know (about the child and their social skills) prior to beginning the group, parents primarily reported challenges such as that their child “struggles with being wrong or corrected,” that they frequently make themselves a “class clown,” or that “he gets in arguments with his brothers and always feels like he's being picked on.” Following the group, only positive statements were reported, including “he learned to not leave fellow school kids singled out” and that “**** really enjoyed the group; thank you very much!” Parents unanimously reported positive statements in relation to their children's social skills following the completion of the group, whereas before the group, parents overwhelmingly reported negative statements focusing on difficulties and challenges their children experienced and presented to others.

When asked for their likely response to normal social situations before the group, students showed a low level of social skills development. For instance, when asked what they would do if a friend won a game they were playing, responses included the following: “get angry,” “sad,” “who cares,” “mad” and many other emotionally reactive reactions. Post-group responses were almost unanimously positive, mostly quoting words such as “tell them good job.” This pattern correlated with related questions such as how they would apologise (if at all), and reactions to teasing and desire to join a game. Students reported that it is much easier to make friends after the group, and ending miscellaneous-item responses were strongly positive, including “I play good with friends.” Instances of negative or maladaptive responses to real-life social situations were isolated (approximately 0%–3% of study post-test items). These included one student reporting to, “lose my temper” if teased. Regarding students' reported least favourite aspect of group, responses included a disproportionate number of girls to boys in one group, perceiving themselves as easily upset, and having to write responses. The majority of students explicitly responded “nothing” and roughly 10% did not respond to the item, which marked the least-completed item asked. Overall, the growth from pre-group to post-group was visible, as students reported well-developed and highly appropriate social skills after the conclusion of the group but struggled to participate in normal social interactions prior to the start of group. This description of increased positive emotions and decreased negative reactions to social interactions is considered to provide continued positive support for the second hypothesis.

Quantitative results indicate that students reported a significant increase in their willingness to socialise with others ($t(34) = -2.24$, $p < 0.05$), reflecting the unique value of Friendship Club. Additionally, the average student score of implementation of helpful social skills, as reported by their parents, rose significantly ($t(33) = -2.35$, $p < 0.05$). The student implementation score represents parents' average

rating of their children's use of social skills, and thus an overall assessment of the children's social skills. While this assessment did not explicitly measure specific emotions anticipated as a result of an interaction, increased willingness to socialise is consistent with an interpretation of decreased anticipatory anxiety related to interaction.

4 | DISCUSSION

The present study aimed to implement and evaluate a manualised approach (the Friendship Club protocol) to facilitate the development of social skills in the students. This curriculum was developed to address a notable gap in the literature related to the relative lack of current social skills interventions. Despite the importance of social skills in childhood emotionally (Adams et al., 2011), academically (Elias & Haynes, 2008) and interpersonally (Erwin, 2013), few programmes exist for children, with more programmes to treat adults (Pilling et al., 2002). While existing programmes do exist, these are overwhelmingly for particular diagnoses such as autism spectrum disorder (Hopkins et al., 2011).

To address this gap, the present curriculum was developed to be implemented in children without identified disorders, to allow them to increase their functioning in a group setting in schools. In the present pilot study, preliminary effectiveness was measured. The present hypotheses included that children would increase utilisation of social skills and improve their reactions to social stressors. Although preliminary in nature, the present study found support for both hypotheses. As this represents a pilot study of a previously untested curriculum designed specifically to address a lack of such a programme, it is not possible to clearly compare the present findings with existing studies or previous programmes. However, the implications of the findings in the context of the available literature are discussed.

The first hypothesis was that the present group-based curriculum would lead to increased utilisation of positive social skills. Regarding this hypothesis, the following improvements in helpful social skills were noted: students' ability to initiate, maintain and heal relationships improved; satisfaction was reported qualitatively and quantitatively by children and parents reported qualitative and quantitative improvement in their children's social functioning, and emotional satisfaction. Qualitatively, students reported improvement in terms of satisfaction with the programme, notable improvement in their interpersonal relationships, and increased knowledge and comfort with a variety of social situations. This is consistent with formative programmes that, while both limited to specific disorders and rather dated, demonstrated positive growth as a result of group-based programmes (Ozonoff & Miller, 1995; Gaffney & McFall, 1981). The present study extends this by developing and validating scales that may be used in future studies to work towards a standardised method of validating social skills growth in similar programmes.

The second hypothesis was that following the curriculum students would demonstrate decreased negative reactions and increased positive reactions associated with social interaction, as

gauged through open-ended responses. This hypothesis appeared to be confirmed through a variety of open-ended questions asked to parents, teachers and students to assess their reactions and behaviours in common social situations. After examining the quantitative and qualitative parent and child reports, this study supports an initial finding that overall the group curriculum for the Friendship Club was effective at facilitating the integration of social skills for children identified as struggling to maintain relationships. Given the established link of social well-being to overall life satisfaction (Parker et al., 2006) as a source of meaning and positive emotion as well as a protective factor against physical and emotional distress (Adams et al., 2011), the present curriculum presents a promising approach to improving and maintaining an increased sense of well-being for students socially and ultimately emotionally.

One potential strength of the programme was that in this pilot investigation it was applied over a range of ages from six to 12 years. Each weekly session was designed to be applicable to each age within this range, by covering topics such as teasing, receptive and active communication skills, conflict resolution and group engagement skills. To facilitate this flexibility, a combination of open-ended and quantitative questions designed to allow parents and teachers to respond about their children, specifically, was included. Additional accommodations were employed such as adjusting the language used in each grade level, ensuring that school counsellors worked with the age range most comfortable to them, and structuring activities and scenarios to be most applicable to that age range. To clarify that these accommodations and the group as a whole led to improvements, the qualitative responses were evaluated for reactions to the group curriculum itself, as observed by parents and teachers and reported by students.

4.1 | Implications for practice

Although clinicians will recognise the importance of helping students increase their social skills, without a structure to lead a group it is difficult to know which skills should be developed, how to assess for these skills, or sample interventions to help guide students over the 12 session themes. The present study thus manualises the progression of group social skills interventions by allowing clinicians a framework of skill development from which to build a programme, with earlier skills integrated into, practised and refined over the course of later topics. The present interventions are designed to serve as samples to be modified according to the age and developmental level of the students, as well as to the comfort and interests of the therapists.

The present group framework may also be adapted to presenting concern or context, as the difficulties within each skill may differ somewhat. For instance, in a setting with conflict-prone children, emphasis may be placed on identifying precipitants of conflict, de-escalating the confrontation and resolving it as amicably as possible. These skills may be applied and rehearsed in other weeks, such as in joining play, apologising and complimenting others. Children without developmental disorders, who may have a more specific mental health-related difficulty such as mild anxiety, may benefit from increased use

of processing questions and group discussion, to help build insight, normalise negative thoughts and feelings. However, it is noted that the present protocol was not structured to address such presenting concerns, and any adaptation to address a specific difficulty may lead to the risk of placing children in overwhelming situations if not structured as a therapeutic and well-monitored group. Additionally, while the present protocol, due to its relatively non-invasive or threatening nature, may be more easily implemented by a novice counsellor, if the group interventions or goals were incorporated into a more traditional therapeutic structure, to ensure compliance with ethical and professional considerations, only an appropriately licensed practitioner would be able to facilitate such a group.

In terms of information school counsellors use in their practice, the structure of the group may serve to guide assessment to identify which skills a given child or small group of children may find most beneficial and to develop that skill independently under time or other constraints. For instance, during an initial conversation with students, professionals may discuss common situations such as apologising, complimenting others, suggest an instance of conflict, and use this group progression to achieve a preliminary understanding of which skills a student may lack and plan their interventions accordingly.

Internationally, the lack of existing group curricula is particularly notable. Existing social skills groups, while dated and oriented towards disorders such as autism (White et al., 2007), have exclusively targeted American samples (Domitrovich et al., 2007), and thus potentially American-specific social norms. As existing programmes have typically not explicated and manualised the steps, goals and interventions used (Kam et al., 2004), it is unclear to what extent these would be applicable internationally. They may limit the ability of others to adapt and apply portions of the curriculum to a setting and location relevant to them. The present study, though representing a feasibility study, is intended to support the proof-of-principle that such a group can be effectively employed in developmentally normative youth in a group setting, reducing burden on individual therapeutic services in areas where such professionals are limited, and maximising the ability of youth to learn from peers in a variety of social situations within their culture.

4.2 | Limitations and future directions

One limitation of the present study is that since this is the first year of implementation in schools, and the programme is structured to be a small group curriculum, the sample size and lack of control group were not sufficient for additional exploration. However, the present curriculum offers an approach to a problem that, although universal, is not previously met in a satisfactory way. Based on the present results, this pilot curriculum is thus far adequately substantiated as a school counselling approach in elementary schools. As implementation of the curriculum continues, sufficient data will be collected to conduct confirmatory factor analyses and sets of comparisons, such as those between schools in rural and urban areas. It would also be advantageous for additional inventories to be included in later examinations, comparing the results of the group and the data collected from the piloted instruments with more established measures. Further exploring

the validity and other psychometric properties of the present measures would provide greater detail into the effectiveness and potential shortcomings or strengths of the present curriculum.

As previously discussed, the present programme is designed to be adapted to meet the presenting concerns of children within their various settings. This may include individual interventions or a greater emphasis on some rather than all stages of the process. It is recognised that doing so would limit empirical support for the programme, as these formats would not have clear evidence of effectiveness. However, a strong precedent of adaptation of existing protocols exists, and the clinical judgement and client-driven needs of the practitioners employing the protocol are recognised to, at times, potentially necessitate modification. Amongst possible adaptations, a counsellor may choose to employ a greater degree of play, either individual or group-based, to address the content areas in the present programme. This may be structured to include role play between students or with facilitators, or unstructured play in which children design and engage in interactive play with supervision. The present study is a novel approach to assisting students develop interpersonal skills in a group setting, and the implications of this for improving the well-being of students emotionally, academically and behaviourally are significant.

CONFLICTS OF INTEREST

Kathleen Tillman and Michael Prazak declare that they have no conflicts of interest.

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