Social competence for students with learning disabilities in English

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Abstract. The study aimed at investigating the effect of a training program based on extracurricular activities in developing social competence among a sample of students with learning disabilities in the basic stage in Irbid Governorate. The sample consisted of (40) third and fourth-grade students enrolled in the resource rooms. The study sample was divided into two groups; an experimental group (20) students and a control group (20) student. The training program for developing social competence was applied only to the experimental group. The Walker-McConnell Scale of Social Competence-Children version (prepared by "Walker-McConnell", translated into Arabic by Ahmed Awad 2002) was applied to all study members before and after the application of the training program. The statistical analysis of the data resulted in the presence of statistically significant differences at the level of ($\alpha\leq0.05$) between the mean scores of the experimental and control groups on the social competence scale and the total score of the scale, in favor of the experimental group. There were no statistically significant differences at ($\alpha\leq0.05$) between the mean scores of the experimental and control groups on the social competence scale due to the interaction between age and group in the post-test.

Keywords. students with LDs, social competence, English language

Introduction

Students with learning disabilities show problems in the academic and social fields compared to their peers who do not suffer from learning disabilities. These problems are related to the level of social skills that they are characterized by (Vaughn, 2001). They also suffer from problems in self-concept, social competence, and achievement, until these problems have become one of the emotional, social and academic characteristics that characterize this category (Chapman, 2000).

The literature showed that there is a correlation between learning disabilities and social and emotional problems. Academic problems result in social and emotional problems, and vice versa (Al-Khatib and Al-Hadidi, 2015). Also, children with low social competence early in school are often at risk in several developmental outcomes. They become antisocial and having aggressive behavior, dropping out of school, poor school fit, neglect, problems with academic achievement, and mental health problems in adulthood (Awad, 2002).

The researchers believe that many of the educational problems that students suffer are related to their acquisition of social-behavioral skills. These studies have indicated that the student’s lack of social skills may cause inefficiency in learning, low achievement, and low
self-concept (Al-Khatib and Al-Hadidi, 2015). Special education has linked academic education on the one hand, and social adjustment on the other hand, because of their mutual effects, and each affects the other. Poor academic achievement negatively affects social efficiency, and vice versa (Awad and Sherett, 2004).

Therefore, the purpose of this study is to investigate the effect of a training program based on extracurricular activities in developing social competence among a sample of students with learning disabilities in the basic stage in Irbid, Jordan.

Research Questions
The study seeks to answer the following questions:
1. What is the effectiveness of the training program based on extracurricular activities in developing social competence among a sample of students with LDs in the basic stage in Irbid?
2. Does the social competence of the experimental group differ before and after the application of the training program?
3. Does the effectiveness of the training program based on extracurricular activities in developing social competence among students with LDs differ according to age, group, and interaction between them?

Significance of the Study
The significance of the study stems from preparing a training program based on extracurricular activities to develop social competence among students with LDs. The study contributes to providing a training program that can be used to develop social skills that such students suffer from. The results of the current study might assist specialists, teachers, and decision-makers in evaluating the effectiveness of training programs in developing the social competence of students with learning disabilities in regular schools. The study provides recommendations for the spread, dissemination, and application of these programs to students with learning disabilities who suffer from weak social competence in order to improve and develop them.

Delimitations of the Study
The results of this study are determined by the study instrument and its validity and reliability, as well as the skills that were selected for training in the training program, which are cooperation, taking into account the feelings of others, listening when others speak, sharing laughter with peers, eye contact with the person, helping peers, take advantage of free time, keenness to perform the tasks assigned to him.

Definition of Operational Terms
Learning disabilities: A disorder in one or more of the basic psychological processes involved in understanding or using language, whether oral or written. This disorder appears in the form of an inability to listen, speak, read, write, spell, or perform mathematical operations. The definition shows that learning disabilities do not include learning problems that are mainly due to mental, auditory, visual, behavioral, motor, or environmental, economic, or cultural deprivations (Hallahan and Mock, 2003).

Social Competence: Social competence is defined as "the efficiency of the social behavior of the child, which is reflected through many important social outcomes, such as acceptance of the teacher, acceptance of peers at school, the formation of friendships, the growth of social support networks among peers, and the individual's social skills in performing
social tasks that are assigned to him” (Awad, 2002). It is defined procedurally as the total score obtained by the student on the Walker-McConnell scale of social competence.

**The Training Program:** The training program is defined procedurally as a set of exercises and extracurricular activities to develop eight social skills (cooperation, taking into account the feelings of others, listening when others speak, sharing laughter with peers, communicating by looking at the person who is talking, helping peers when they ask for help, benefiting from spare time, keenness to perform the tasks assigned to him). These skills are distributed over three components of social competence, teacher relationship, peer relationship, school compatibility. The program consists of (20) training sessions.

**Literature Review**

Some students with learning disabilities show social and emotional problems, and they are more prone to these problems than their normal peers. They suffer from peer rejection and low self-concept. The emotional-social problems of these students can be attributed to their weak social cognition, they misinterpret the feelings of others, they are not good at reading social cues, and they do not realize when their behavior is annoying to others (Al-Khatib et al., 2018).

Any lack of social skills may affect all aspects of life, due to the inability of the individual to be sensitive to others and to perceive, like the rest of his colleagues, the image of the situation surrounding him. Therefore, we find that these children fail to build sound social relationships, which may come from their difficulties in expressing and selecting the appropriate behavior at the appropriate time. Studies have indicated that (34%-59%) of students who suffer from learning disabilities are exposed to social problems. Also, those individuals who are unable to form healthy social relationships are classified as reclusive and depressed, and some of them tend to have suicidal thoughts (Bryan, 2005).

In addition, their many problems in the process of adapting to school requirements greatly frustrate them and may lead to their unwillingness to appear and integrate with others. Therefore, they refrain from participating in answering questions, or participating in internal and sometimes external classroom activities (Hallahan et al., 2007).

These characteristics also affect the individual’s ability to learn, especially those related to social problems, as they affect his academic achievement and his motivation to learn and affect his relationship with his peers and interaction with them. This might leads to his isolation and his failure to acquire the experiences and social skills necessary to remain in contact with his peers, and this also leads to a slowdown in his social and emotional development compared to those of his age.

**Social competence among students with learning disabilities:**

During his interaction with peers, companions, and community members in different social situations, the child faces many challenges, which require a number of different social skills that enable him to find solutions to these social problems. Social skills also express the ability to actively participate in various social situations.

Social skills and competencies represent one of the important foundations necessary for social interaction and daily success in real life, with peers, teachers, and all other persons. Good interaction with others reflects an appropriate degree of social and emotional sensitivity to social rhythms and symbols until society approves them (Al-Zayyat, 2014).

Social competence is linked to social skills and social acceptance, and antisocial behavior is considered a troublesome problem for both the school, the home, and the
community. Social behavior appears in different forms, such as lying, running away, cheating, and sabotaging property (Khasawneh, 2021).

Therefore, we note that the cause of the problems faced by people with learning disabilities in the field of social relations is due to the shortcoming they suffer in social skills and their lack of a high level of social competence. They may not be able to read different social situations with the same skill level as other peers, so they cannot understand how others are trying to influence them, or what others want them to do, or how others perceive them.

**Previous Studies**

The issue of social competence for students with learning disabilities and training programs related to the development of their level of social competence has received increasing attention in Western countries, especially in the past few decades. However, in Arab countries, attention to this topic is still little. The following is a presentation of the results of some studies conducted in Arab and other countries.

Boutros et al (2020) explored the effectiveness of a training program to develop social competence of kindergarten children with learning difficulties. The study was applied to twenty children with learning difficulties at Port Said Governorate. The research followed the experimental design with two groups experimental and control groups. The study used John Raven colored sequence matrix test, Developmental learning disabilities battery, kindergarten children with learning difficulties social competence scale as instruments to collect data. The results revealed that there are statistically significant differences between the mean scores order of the experimental and control groups in the post kindergarten children with learning difficulties social competence scale in favor of the experimental group. Also, there are no statistically significant differences between the mean scores of the posttest kindergarten children with learning difficulties social competence scale of the experimental group after a period of time.

Al-Jilani and Maliki (2019) conducted a study to identify the relationship between social competence and the self-concept scores of students with LDs and predict social efficiency through self-concept scores. The results showed a relationship between social competence and self-concept among students with learning disabilities in the upper grades at the primary stage in the city of Mecca. As for the dimension of the physical self, which was significantly correlated only with the dimension of controlling skills, the self-efficacy scale has a value of (0.214), which is positive, weak, and significant at (0.05). There was no correlation recorded with the other two dimensions of the social competence scale.

Abu al-Rub (2018) explored the effectiveness of a training program based on Psychodrama on improving social competence in children with learning disabilities. The sample of the study consisted of 50 students who suffer from a lack of social competence and who were enrolled in the resources rooms in government schools in Jeddah. The hypotheses of the study were tested with Wilcoxon Z test. The results indicated that there were significant differences in the means of performance of the experimental group between post-implementation of the two scales. According to the results, the researcher recommends the use of psychodrama as a strategy to improve social competence in children with learning disabilities, in addition to training teachers on how to select and develop such programs.

Al-Aqil and Al-Jawaldah (2018) identified differences in emotional and social intelligence among average achieving and learning Disabilities students at Bani Kenana Educational Directorate in Jordan. The study sample consisted of (272) students (136 with learning Disabilities students and 136 average achieving students). The study used two instruments, the first to measure social intelligence (63 items), the second was used to measure
emotional intelligence (50) items. The findings indicated that social and emotional intelligences levels among average achieving students were high. As for emotional and social intelligences levels among learning Disabilities students, the total score on both measures was low. Results of the study indicated significant differences between average achieving and learning Disabilities students in emotional and social intelligence total constructs and all individual domains of the two constructs in favor of average achieving students.

Ahmed, M. R. S. (2018) identified the relationship between social competence in children with learning difficulties and the psychological rigidity of their mothers. The study used the descriptive analytical method. The sample consisted of (83) mothers of pupils with learning disabilities, and (83) students and students of their children enrolled in the resource room in primary schools in Najran, Saudi Arabia. The findings showed that the mothers of children with LDs enjoyed a high level of psychological rigidity, while the level of social competence among pupils with learning difficulties was moderate. The results also revealed that there are no statistically significant differences in the overall degree of social competence in children with learning difficulties due to the gender variables, the socioeconomic level, the educational level of the mother.

Research Methodology
This section provides information on the methodology of the present study, which includes population and sample, research instrument, and validity and reliability of the instrument.

Population and Sample
This study was conducted on a sample of students with learning disabilities in the basic stage enrolled in the resource rooms. The final sample of the study consisted of (40) students, who were chosen randomly.

Research Instrument
Two instruments were used in this study: the Walker-McNeill Scale of Social Efficiency (Children version), in its translated form into Arabic (Awad, 2002), and the training program for developing the components of social competence (prepared by the researcher).

First instrument:
Validity:
The validity of the instrument was verified by using the Cronbach Alpha coefficient of stability, for the members of the application sample, where the reliability coefficient of the total sample was (0.9630).

Radiality:
The reliability of the scale was verified by calculating the internal consistency of the scale by finding the reliability of the items and dimensions of the scale. All the correlation coefficients between the items and the total score for the scale, and between the items of each sub-test and the total score of the test were high and the lowest correlation coefficient was (0.446) and the highest was (0.848). The correlation coefficients between vocabulary and the total score for each sub-test were higher than the correlation coefficients between vocabulary and the total score of the scale. All correlation coefficients were significant at the level (0.01). These results confirm the consistency between the three subtests.
Correction of the scale:

The degree is extracted from the total score on the scale by collecting the numerical estimates (1-5) for the items of the scale. Table (1) shows the extent of the scores on the dimensions of the social efficiency scale.

Table (1): Scores on the dimensions of the social competence scale

<table>
<thead>
<tr>
<th>Dimensions</th>
<th>No. of items</th>
<th>Range of degrees</th>
</tr>
</thead>
<tbody>
<tr>
<td>Teacher's preferred social behavior</td>
<td>16</td>
<td>80 - 16</td>
</tr>
<tr>
<td>Peer preferred social behavior</td>
<td>17</td>
<td>85 - 17</td>
</tr>
<tr>
<td>School conformity behavior</td>
<td>10</td>
<td>50 - 10</td>
</tr>
<tr>
<td><strong>Total degree</strong></td>
<td><strong>43</strong></td>
<td><strong>215 - 43</strong></td>
</tr>
</tbody>
</table>

**Second instrument: the training program**

The training program was built to develop the components of social competence using extracurricular activities for a sample of students with learning disabilities in the basic stage. The extracurricular activities are defined procedurally as a set of different activities and exercises, which are not included within the context of the official school curricula. These activities may be (sports or games popular stories, meaningful social stories, or cultural activities). The program was presented in its initial form to a group of specialized judges in the field of special education, where the judges recommended making some modifications.

**Results and Discussion:**

**First: results of the first question**

To answer the first question, the mean scores and standard deviations were found for each of the experimental and control groups for the post-test, as shown in Table (2).

Table (2): Mean scores and standard deviations of the study scale according to the group and the post-test

<table>
<thead>
<tr>
<th>Group</th>
<th>Mean scores and standard deviations</th>
<th>Post-test</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td>First dimension</td>
</tr>
<tr>
<td>Experimental</td>
<td>Mean score</td>
<td>62.06</td>
</tr>
<tr>
<td></td>
<td>standard deviation</td>
<td>7.508</td>
</tr>
<tr>
<td>Control</td>
<td>Mean score</td>
<td>50.6</td>
</tr>
</tbody>
</table>
It is clear from Table (2) that the mean score of the experimental group on the post-test was (161.5), while the mean score of the control group was (122.2). It is noted from the table that there are apparent differences between the mean scores of the experimental and control groups. To show the direction of the differences between both groups on the social competence scale after applying for the program, the T-test method was used as shown in Table (3).

Table (3): T-test results for independent samples for the first study question

<table>
<thead>
<tr>
<th>Dimensions</th>
<th>Group</th>
<th>Mean score</th>
<th>standard deviation</th>
<th>Freedom value</th>
<th>T-value</th>
<th>Sig.</th>
</tr>
</thead>
<tbody>
<tr>
<td>First dimension</td>
<td>Control</td>
<td>50.48</td>
<td>1.597</td>
<td>28</td>
<td>-5.855</td>
<td>.000</td>
</tr>
<tr>
<td></td>
<td>Experimental</td>
<td>62.08</td>
<td>7.506</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Second dimension</td>
<td>Control</td>
<td>45.14</td>
<td>2.294</td>
<td>28</td>
<td>-18.537</td>
<td>.000</td>
</tr>
<tr>
<td></td>
<td>Experimental</td>
<td>61.68</td>
<td>2.583</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Third dimension</td>
<td>Control</td>
<td>26.54</td>
<td>1.303</td>
<td>28</td>
<td>-16.908</td>
<td>.000</td>
</tr>
<tr>
<td></td>
<td>Experimental</td>
<td>37.68</td>
<td>2.194</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Total</td>
<td>Control</td>
<td>122.1334</td>
<td>4.53346</td>
<td>28</td>
<td>-14.383</td>
<td>.000</td>
</tr>
<tr>
<td></td>
<td>Experimental</td>
<td>161.4001</td>
<td>9.55287</td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

It is clear from Table (3) that the differences between the mean scores of the experimental and control groups were statistically significant. The T-value was (14.383) for the total score of the scale, which was statistically significant at a level ($\alpha = 0.05$). Therefore, the first null hypothesis is rejected, and the alternative hypothesis, which indicates the existence of statistically significant differences at the level ($\alpha = 0.05$) is accepted.

The performance achieved by the experimental group is due to the effectiveness of the training program based on extracurricular activities, which aimed at developing the components of social competence for that group of students with learning disabilities. The increase in the rate of social competence components among the members of the experimental group can be explained by a set of factors. The training program provided the members of this group with regular training experiences, and directly, they were not familiar with it before to train on the components of social competence. It was found that they need it to raise their low level of social competence.

The improvement in social efficiency may be due to the students’ mastery of some social skills through the training program, which they did not learn before receiving the program, or they had learned some of them before implementing the program but were failing to perform them.
Second: Results of the second question

To answer the second question, the mean and standard deviations of the experimental group were found before and after the application of the training program, and Table (4) illustrates the results.

Table (4): the mean scores and standard deviations of the scores of the experimental group before and after the application of the training program

<table>
<thead>
<tr>
<th>Group</th>
<th>Mean scores and standard deviations</th>
<th>Pre-test</th>
<th>Post-test</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td>First dimension</td>
<td>Second dimension</td>
</tr>
<tr>
<td>Experimental</td>
<td>Mean score</td>
<td>47.6</td>
<td>42.8</td>
</tr>
</tbody>
</table>

Table (4) shows that the mean scores of the experimental group on the pre-test for the total score of the scale was (115.4), while the mean scores of the experimental group on the post-test for the total score of the scale was (161.3). It is noted from the table that there are apparent differences, and to show the direction of the differences between both groups on the scale of social efficiency before and after the application of the training program, the T-test was used as shown in Table (5).

Table (5): T-test results for independent samples for the second study question

<table>
<thead>
<tr>
<th>Dimensions</th>
<th>Group</th>
<th>Mean score</th>
<th>standard deviation</th>
<th>Freedom value</th>
<th>T-value</th>
</tr>
</thead>
<tbody>
<tr>
<td>First</td>
<td>47.6</td>
<td>4.372</td>
<td>14</td>
<td>-8.950</td>
<td>.000</td>
</tr>
<tr>
<td></td>
<td>62.2</td>
<td>7.506</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Second</td>
<td>42.8</td>
<td>3.106</td>
<td>14</td>
<td>-18.604</td>
<td>.000</td>
</tr>
<tr>
<td></td>
<td>61.8</td>
<td>2.580</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Third</td>
<td>25.2</td>
<td>2.342</td>
<td>14</td>
<td>-16.424</td>
<td>.000</td>
</tr>
<tr>
<td></td>
<td>37.8</td>
<td>2.192</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Total</td>
<td>115.7</td>
<td>9.133</td>
<td>14</td>
<td>-19.502</td>
<td>.000</td>
</tr>
<tr>
<td></td>
<td>161.5</td>
<td>9.553</td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>
It is clear from Table (5) that the differences between the mean scores of the experimental group before and after the training program was statistically significant. The T-value was (-19.502) for the total score of the scale, and it is statistically significant at the level of significance (α≤0.05).

Students with learning disabilities have low levels in all dimensions of social competence that were measured in this study compared to their peers of normal, superior, or low or average achievement. The results of this study showed that students who underwent this program developed the level of their social competence. They were able to communicate effectively with others and establish positive relationships with others and understanding them. The training program also helped students with learning disabilities to develop a positive self-concept and increase acceptance by others and their positive interaction in the educational or community field.

The improvement that occurred in the experimental group after applying the program is due to the fact that the items of the program were easy, simple, and clear in purpose. This made it easier for students to interact with them and absorb them and thus apply them in their practical reality. The way the information was presented through the use of modern techniques helped students to participate, such as dialogue, discussion, playing, and telling the story. This made them more eager to attend, listen and try to understand through questions and inquiries, all of which enhanced the chances of success of the program and raising the level of social efficiency, which has already been achieved. The diversity of activities and events presented in the training program (stories, sports, cultural competitions, library visits) had a significant impact on making students more interested in attending and following up on these events, and keener to understand and apply what is given to them during training sessions.

**Third: results of the third question**

To answer the third question, the mean scores and were found according to the variables of age and group and the interaction between them, as shown in Table (6).

<table>
<thead>
<tr>
<th>Age Group</th>
<th>(8-9)</th>
<th>More than (9-10)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Experimental</td>
<td>160.450</td>
<td>161.410</td>
</tr>
<tr>
<td>Control</td>
<td>123.630</td>
<td>121.420</td>
</tr>
</tbody>
</table>

It is clear from Table (6) that the mean score of the age group from (8-9) in the experimental group was (160.450), while the mean score of the age group from (8-9) in the control group was (123.630). The mean score of the age group (more than 9-10) in the experimental group was (161.410), while it was for the same age group in the control group (121.420). It is noted from the previous scores that there are apparent differences, and to detect the direction of these differences, the ANCOVA analysis was used, as shown in Table (7).

<table>
<thead>
<tr>
<th>Source of variance</th>
<th>Sum of squares</th>
<th>Freedom value</th>
<th>Mean square</th>
<th>F-value</th>
<th>Sig.</th>
</tr>
</thead>
<tbody>
<tr>
<td>Age</td>
<td>.813</td>
<td>1</td>
<td>.813</td>
<td>.014</td>
<td>.908</td>
</tr>
</tbody>
</table>

To answer the third question, the mean scores and were found according to the variables of age and group and the interaction between them, as shown in Table (6).
It is clear from Table (7) that the differences between the mean scores of the two age groups in social competence did not reach the level of statistical significance. This means that there are no statistically significant differences between the average scores of the two age groups. The F-value was (0.014) and with a level of significance of (0.907), which is greater than the significance level used in this study ($\alpha \leq 0.05$), which means that there is no effect for the two age groups (8-9) and (more than 9-10).

The results mentioned in the previous table also indicate that there is no statistically significant difference in the dimensions of social competence scale for students with LDs due to the interaction between the group and age. The F-value was (0.386), and with a significance level of (0.542). The result of the current study was not affected by the age variable, which may be due to the fact that the study group of students was of approximately one age (8-10) years, and this is a not wide age range, and they enjoy the same social characteristics. Therefore, the perception and way of thinking of this age group are close and similar, and their life experiences are similar as well. This also indicates that the program was positively effective for all age groups included in the study.

Recommendations

Based on the results of the study, it is recommended to use the current training program by special education teachers and resource room teachers, and circulate it to schools concerned with people with learning disabilities. It is also recommended to design training programs using other methods and techniques to develop the social competence of people with learning disabilities. More studies dealing with other dimensions of social efficiency, which the current study did not address, could be conducted. The current study recommends conducting research to study the relationship between the improvement in the level of social competence and its effect on the academic achievement degrees of students with learning disabilities.

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