

New Trends and Issues Proceedings on Humanities and Social Sciences



Issue 7 (2017) 1-7

ISSN:2547-8818 www.prosoc.eu

Selected Paper of 8th World Conference on Psychology, Counseling and Guidance, (WCPCG-2017), 28-30 April 2017 Grand Park Lara Convention Center, Lara – Antalya, Turkey

The Effect of Social Skills Through Role-play on the Self-concept of Students with and without ADHD

Malihe Shirazi ^a*, Islamic Azad University, Karaj, 1584743311, Iran Maryam Zarnaghash ^b, Islamic Azad University, Karaj, 1584743311, Iran Alireza Dashti ^c, Islamic Azad University, Karaj, 1584743311, Iran

Suggested Citation:

Shirazi, M., Zarnaghash, M. & Dashti, A. (2017). The effect of social skills through role-play on the self-concept of students with and without ADHD. New Trends and Issues Proceedings on Humanities and Social Sciences. [Online]. 07, pp 1-7. Available from: <u>www.prosoc.eu</u>

Selection and peer review under responsibility of Prof. Dr. Marilyn Campbell, Queensland University of Technology, Australia

[©]2017 SciencePark Research, Organization & Counseling. All rights reserved.

Abstract

The aim of the present research is to find out the effect of role-playing on total self-concept score of students suffering from ADHD (attention-deficit hyperactivity disorder). Participants of this study were 120 children divided into two groups of 60. The first group included ADHD children, and the second group were normal children. The participants in the second group were randomly selected among the students of a primary school. The research instruments were ADHD Questionnaire (Tavakoli, 1380), Piers-Harris Children's Self-Concept, and Scale Role-playing scenarios & Clinical interview. The data gathered through the questionnaires were analyzed by the t-test. This is the indicator of a positive effect of role-playing on self-concept of the students with or without ADHD.

Keywords: role-playing; self-concept; ADHD;

^{*} ADDRESS FOR CORRESPONDENCE: **Malihe Shirazi**, Islamic Azad University, Karaj, 1584743311, Iran *E-mail address*: <u>malih_hashemi@yahoo.com</u> / Tel.: 98-21-88830826-30

1.Introduction

The inattention and hyperactivity-impulsivity that characterize children with attention-deficit hyperactivity disorder (ADHD) are associated with organizational problems, risk of achievement difficulties, and extensive negative criticism from parents and teachers (mohsen, Milich, & Diener, 1998). These children experience negative outcomes in personal, educational, and social domains that might impair their functional adaptation throughout their life (Barkley, Fischer, Smallish, & Fletcher, 2006).

An effective structure on educational progress and education is self-concept which has been addressed in many studies seeking to find out the factors affecting it in different educational levels and also the role it plays in educational problems. Recently, the analysis of "self" and its various aspects has been addressed by many researchers in the fields of psychology and education. According to educational experts and theoreticians, the most important and frequent behavioral disorders and problems are rooted in "self". Therefore, clinical experts including the psychiatrists and psychoanalysts as well as cognitivists and behaviorists have theoretically, clinically, and educationally focused on "self" and its components (Mohseni & Nikchehre, 1996). Meanwhile, an aspect of "self", which is most widely taken into consideration by psychologists, is a concept literally referred to as "self-concept".

Self-concept is a set of beliefs an individual has concerning his/her various features; how he/she sees, how he/she copes with others, how he/she performs in different homework activities, and so on and so forth. The assessment of the individual of such beliefs and the significance they have for him/her is what is referred to as self-esteem (Berden, 2005). On the other hand, parents and teachers face too many challenges while trying to elicit a positive integrated self-concept in children. One of these challenges is some behavioral and cognitive childhood disorders which are classified under the category of attention deficit hyperactivity disorder and impulsivity. This group of problems includes inattention, overstimulation, hyperactivity, impulsivity, irritability, and lack of delayed gratification. Such conditions are diagnostically attributed to attention deficit hyperactivity disorder (ADHD) (Kaplan & Sadock, 1991) which is one of the most complex childhood disorders and based on the data reported by the American Psychiatric Association (2000), about 2 to 20 percent of school children and 3 to 5 percent of elementary schoolchildren suffer from this disorder. This disorder continues to exist during the adolescence for 50 to 80 percent of the children identified to suffer from it and it also continues to exist at adulthood for 30 to 50 percent of them. The main problems these children develop during their developmental age include: low educational progress, poor social behavior (such as aggression, and having difficulty with making friends), anxiety, delinguency, drug abuse, problems in getting married or employed, driving problems as well as instability and not following up works and affairs (Queen & Stern, 2006). Most children suffering from ADHD are emotionally unstable, that is to say, their mood is suddenly changed. The parents complain about how rapidly their children move from good to evil and again from evil to good; hence, it seems that these children not only suffer from behavioral problems but they are also very sensitive and get easily angry and as a result they are prone to emotional problems. On emotional problems of these children, King and Nashpitz (1991) believe that such problems form a "vicious circle" confining these children.

In their experimental research, Pfiffner and Mcburnett (1997) randomly classified ADHD children under three groups. The first group learned social skills directly. In the second group, the parents learned social skills to practice them with their children at home and the third group was taken as a control group and received no intervention. The teaching process for the first and the second group was performed by a psychologist within 8 sessions and the results showed a significant improvement in the experimental groups retaining after a 4-month follow-up period. Treuting and Hinshaw (2001) classified ADHD children under two groups of aggressive and unaggressive children in order to analyze their self-concept. Based on their findings, overall self-concept was low in both groups, however, there were some differences concerning the subscale scores of self-concept. The unaggressive group of ADHD children had a significantly low score in social self-concept, while the other group showed low

scores also in other 3 subscales. Hoza, Pelham, Dobbs, Owens and Pillow (2002) carried out a research on 195 boys suffering from ADHD and found out that in some self-concept subscales, these schoolchildren had a higher score than what their peer group and teachers reported. Such subscales included: educational acceptance, social acceptance and behavioral acceptance. In this study, the researchers concluded that ADHD students have a false positive self-concept, and this might be why they do not realize their wrong behaviors. Tomaj, Estebsari, Taghavi, Borim, Nejad, Dastoorpoor & Ghasemi (2016) studied The Effects of Group Play Therapy on Self-Concept among 7 to 11 Year-Old Children Suffering From Thalassemia Major. Their samples include intervention (30 children) and control (30 children) groups. Tomaj et al. (2016) showed that the mean self-concept score was significantly higher at the second point in time compared to the baseline (P < 0.001), going from 60.539 to 69.908. Likewise, comparing the first and third time points, the mean score significantly increased and reached 70.611 (P < 0.001). Their study showed that group play therapy improves selfconcept in children suffering from thalassemia major Naderi, Heidarie, Bouron & Asgari (2010) examine the Efficacy of Play Therapy on Attention Deficit Hyperactivity Disorder (ADHD), Anxiety and Social Maturity in 8-12 years old male and female children. The sample subsumed 80 boys and girls who were selected randomly via simple sampling procedure from clientele children who were identified and diagnosed for ADHD and Anxiety in counseling clinics. Their results authenticated that play therapy as an effective therapeutic procedure is a conceivable intervention for children experiencing a broad range of problems such as ADHD and anxiety involving no any significant risk. LeBlanc and Ritchie (1999) conducted as well a meta-analysis of outcome research that supported the effectiveness of play therapy. Overall, play therapy has been demonstrated to improve a child's selfconcept, decrease anxious behaviors, lessen externalizing and internalizing problem behaviors and increase social adjustment (Ray, 2006).

2. Method

In this project, the measurement tools for variables, ADHD Questionnaire (Tavakoli, 1380) and Piers-Harris Children's Self-Concept, Scale Role-playing scenarios& Clinical interview form were used and the perception of two groups' ADHD Disorder group and normal group were studied. Participants of this study were 120 children divided into two equal groups. The first group included ADHD children, and the second group were normal children. The participants in the second group were randomly selected among the students of a primary school.

2.1. Role-playing scenarios

The content of these self-made scenarios prepared by the researcher deals with social skills application defined by Gresham (1986) under three categories of inter-individual behaviors, self-care behaviors and task-related behaviors. These skills include: 1) initiating conversation with others; 2) dealing with others' anger; 3) apologizing others; 4) performing a task, which were arranged based on step-by-step social skills teaching (David & Tierney, 2005).

2.2. Clinical interview form

To ensure the presence of disorder in students who had obtained scores higher than curt-off score in the Inventory of ADHD Symptomatology administered by the teacher, a clinical interview inventory administered to parents was filled in by Behavioral Disorder expert. The following data were obtained by this inventory concerning the situation of the child and his/her parents: age, gender, current health status, history of disease, educational status of the student, and age, job and educational degree of the parents as well as the number of family members, history of disease in the family and special cases affecting the current status of the family. This inventory was prepared by the researcher based on

cases identified as a differential diagnosis for this disorder and confirmed by 5 behavioral disorders experts.

3. Findings

To study the degree of the relationship between the Self-concept and factors of Attention disorder/Hyper Active disorder, the Pearson Correlation coefficient was used and the results have been mentioned in the following table.

	1	2	3	4	5	6	7	8
AD &HD	1							
Self- Concept	*8-0.34	1						
Behavior	**-0.42	**0.75	1					
Mental ability	**-0.27	**0.82	**0.60	1				
Physical Variable	**-0.25	**0.72	**0.35	**0.62	1			
Anxiety	**-0.18	**0.76	**0.50	**0.56	**0.40	1		
Calm & Sociability	*-0.19	**0.69	**0.52	**0.48	**0.49	**0.55	1	
Happiness & Satisfaction	**-0.32	**0.73	**0.54	**0.56	**0.56	**0.66	**0.46	1
**P,0.001	*P,0.005							

Table1. The Matrix of Variables & Their Dimensions Correlation

To study the comparison between total self-concept of students suffering from ADHD in the posttest and pre-test mean and standard deviation was used, and the results have been mentioned in the following table.

	Pre	- Test	Po	ost- Test
Group	Mean	S-D	Mean	S-D
Control	47.03	16.09	45.62	1.56
Exprimental	55.43	13.55	56.83	1.56

Table 3. Pre- test and post- test of Self-Concept of ADHD Children in two groups

0.49				
Group	Mean	S-D	т	P<
ADHD Child	46.28	11.04	2.96	0.005
Normal Child	52.65	13.22	2.86	0.005

To study the effect of role playing on ADHD self-concept of children, Covariant was used, and the results have been mentioned in the following table

Table 4. Covariant of ADHD Children's self- Concept

		df	R2	F	P<	Eta
Group	1858.71	1	1858.71	24.45	0.0001	0.30
Pre- Test	8504.72	1	8504.72	111.91	0.0001	0.74
Error	4331.60	57	75.99			
Total	171386.0	60				

Table 5.Mean & Standard deviation of ADHD Children

Group	Mean	S-D
Control	46.62	1.56
Exprimental	56.83	1.56

To study the effect of role playing on self-concept of normal children Covariant was used and the results have been mentioned in the following table

Table 6. Covariant of Normal Children's self- Concept

		Df	R ²	F	P<	Eta
Group	109.09	1	109.09	2.16	0.14	0.03
Pre- Test	8509.44	1	8509.44	168.59	0.0001	0.74
Error	2876.95	57	50.47			
Total	189908.0	60				

Table 7. Mean & Standard deviation of Normal Child

Group	Mean	S-D	
Control	53.01	1.31	
Experimental	55.78	1.31	

To compare the effect of role playing on self-concept of normal children & ADHD children Covariant was used and the results have been mentioned in the following table.

		Df	R ²	F	P<	Eta
Group	649.94	1	649.94	11.04	0.0.002	0.16
Pre- Test	8404.83	1	8404.83	142.84	0.0001	0.71
Error	3353.73	57	3353.73			
Total	206261.0	60	60			

Table 8. Covariant of Normal Children's self- Concept & ADHD children's Self- Concept

Table 9.Mean and Standard Deviation of self-Concept of ADHD and Normal group

Group	Mean	S-D
ADHD	60.49	1.46
Normal	53.33	1.46

4.Conclusion

The analysis of the data shows the difference of the self-concept between the students suffering from ADHD and not suffering from ADHD. A comparison between total mean scores of self-concept for the students with or without ADHD in pretest showed that the students suffering from ADHD had a lower self-concept compared to the students not suffering from this disorder.

A comparison between total self-concept of students suffering from ADHD in the post test and pretest effect control, showed an increase for total self-concept score after the implementation of the role-playing model in the experimental group. This reveals the positive effect of role-playing on the self-concept score of students suffering from ADHD. A comparison between the mean scores of total self-concept of students without ADHD in post-test and by controlling the effect of pre-test showed an increase in the total self-concept after the implementation of the role-playing model in the experimental group; this is to say that role-playing has a positive effect on self-concept score of the students without ADHD.

Therefore, the implementation of the role-playing model can increase the self-concept of the students with ADHD and the students without ADHD.

A comparison of the mean scores of self-concept sub-scales in two control and experimental groups of ADHD students showed that the increase of post-test scores of experimental group has been higher than the control group in all cases. This indicates a positive effect of role-playing on different kinds of self-concept in these students. Such effectiveness on mental abilities and school condition has been higher than other areas, while the lowest effectiveness goes to behavior. As in self-concept pre-test, this subscale (behavior) showed a higher score than other subscales, the reason might be due to the fact that the students with ADHD discovered their behavioral problems during role-playing and find a real self-concept in this regard, and so the negativity of their behavioral problems has been more effective on their self-concept than role-playing.

The analysis of the difference between total self-concept mean score of the students with and without ADHD in the self-concept post-test and by controlling the effect of pretest showed an increase of total self-concept after implementing a role-playing model for both experimental groups. This is the indicator of the positive effect of role-playing on self-concept of students with or without ADHD. However, the results revealed that such effectiveness has been higher for the students with ADHD than the students without ADHD.

References

David, T. & Tierney, J. (2005). *Teaching Social Skills to Youth* (2nd Ed.). Boys Town: Nebraska.

- Hoza, B., Pelham, W. E., Dobbs, J., Owens, J. S. & Pillow, D. R. (2002). Do Boys With Attention-Deficit/ Hyperactivity Disorder Have Positive Illussory Self-Concepts? *Journal of Abnormal Psychology*, 111 (2), 268-278.
- King, R. A. & Noshpitz, J. D. (1991). Pathway of growth: Essentials of child psychiatry (VOL.2): Psychopathology, New York; Wiley.

Mohseni & Nikchehre. (1996). Self concept (child to adult). Tehran. IRAN.

- Naderi, F., Heidarie, A., Bouron, L. & Asgari, P. (2010). The Efficacy of Play Therapy on ADHD, Anxiety and Social Maturity in 8 to 12 Years Aged Clientele Children of Ahwaz Metropolitan Counseling Clinics. *Journal of Applied Sciences*, 10: 189-195.
- Pfiffner, L. J. & Mcburnett, K. (1997). Social skills training with parent generalization: treatment effect for children with ADD. *Journal of Consultin g and Clinical Psychology*, 65, 5, 749-757.
- Plumer, P.J. & Stoner, G. (2005). The Relative Effects of Class Wide Peer Tutoring and Peer Coaching on the Positive Social Behaviors of Children With ADHD. *Journal of Attention Disorders, 9*, 1, 290-300.
- Publication manual of the American Psychological Association (6. bs.). (2010). Washington, DC: American Psychological Association.
- Ray, D.C. (2006). *Evidenced Based Play Therapy. In: Contemporary Play Therapy: Theory, Research and Practice.* Schaefer, C.E. and H.G. Kaduson (Eds.). Guilford Press, New York.
- Tomaj, O., K. Estebsari, F., Taghavi, T., Borim Nejad, L., Dastoorpoor, M. & Ghasemi, A. (2016). The Effects of Group Play Therapy on Self-Concept Among 7 to 11Year-Old Children Suffering from Thalassemia Major. *Iran Red Crescent Med*, 18(4): e35412.
- Treuting, J. J. & Hinshaw, S. P. (2001). Depression and self-esteem in boys with attention deficit/hyperactivity disorder: Associations with comorbid aggression and explanatory attributional mechanisms. *Journal of Abnormal Child Psychology*, 29, 23-39.