

Nonverbal social interaction skills of children with learning disabilities

Ioannis Agaliotis^{a,*}, Efrosini Kalyva^b

^a *University of Macedonia, 156 Egnatia Street, P.O. Box 1591, 540 06 Thessaloniki, Greece*

^b *City Liberal Studies, Thessaloniki, Greece*

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Abstract

Many children with learning disabilities (LD) face problems in their nonverbal communication, which constitutes an important component of their social skills. This study explores the frequency of nonverbal initiations and responses of 36 children with LD and 36 children without LD matched for age and gender, who were observed for 40 min during the break. Younger and older children with and without LD did not differ significantly in their nonverbal responses, but there was a statistically significant difference in terms of younger children's nonverbal initiations. Younger children with LD exhibited significantly fewer nonverbal initiations than younger children without LD. Findings are discussed and suggestions are made for further research. © 2006 Elsevier Ltd. All rights reserved.

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The social skills of children with learning disabilities (LD) are compromised, to a larger or smaller extent (Bryan, 1998). More specifically, children with LD compared with their non-LD peers: have more social information-processing deficits (Tur-Kaspa & Bryan, 1994), are less popular and more rejected (Stone & LaGreca, 1990), and have fewer mutual friends (Wiener & Schneider, 2002). Children with LD also exhibit higher levels of disruptive and aggressive behaviours (Sale & Carey, 1995), face more difficulties in certain aspects of interpersonal conflict resolution (Agaliotis & Goudiras, 2004), present lower levels of positive social behaviours (Newcomb, Bukowski, & Pattee, 1993), and have more adjustment problems in adolescence than their non-LD counterparts (Kupersmidt, Coie, & Dodge, 1990).

The problems that children with LD face in their social interaction are usually attributed to a lack of skills in initiating and sustaining positive social relationships (Bauminger, Edelsztein, &

* Corresponding author. Tel.: +30 2310891383.

E-mail address: iagal@uom.gr (I. Agaliotis).

Morash, 2005), which are deemed essential for successful social interactions (Bryan, Donalue, Perl, & Sturm, 1981) and for the effective inclusion of children with LD in the classroom's social interaction network (Winzer, 2000). Both initiation of, and response to, a social interaction presuppose the possession and effective use of verbal and/or nonverbal communication skills, since these are the means through which the participants of an interaction convey their intentions and emotions (Beilinson & Olswang, 2003). However, children with LD have deficits in initiating (e.g., asking another child to play) and in responding (e.g., following another child's invitation to play) behaviours in comparison to children with average/high achievement (Vaughn & Hogan, 1994; Vaughn, Zaragoza, Hogan, & Walker, 1993).

Children with LD are believed to face difficulties in identifying expressive (Holder & Kirkpatrick, 1991) and situational cues (Nabuzoka & Smith, 1995) and in decoding nonverbal cues (Creasey & Jarvis, 1987). They receive or send nonverbal emotional information in a way that differs from that of typically developing children (Bauminger et al., 2005). As far as the response to an initiation of an interaction is concerned, children with LD are likely to misinterpret the initiation attempt of a peer and to respond to it as if it were hostile (Nabuzoka & Smith, 1999), because they exhibit reduced ability to understand nonverbal aspects of communication (Bryan, 1998) and they face difficulties with the performance of social-cognitive processes underlying the situational cues and the other person's intentions involved in a social interaction (Vaughn, Elbaum, & Boardman, 2001).

Some scientists (e.g. De Paulo & Rosenthal, 1978; Dimitrovsky, Spector, Levy-Shiff, & Vakil, 1998) have taken the view that at least certain aspects of nonverbal communication skills improve with age, while others have (e.g. Holder & Kirkpatrick, 1991) concluded that these skills remain unaffected by maturation. For example, a developmental differentiation has been observed in the ability of children with LD to distinguish among serious and playful fighting, which includes also the interpretation of nonverbal behaviour with older children with LD being more able to make this distinction (Nabuzoka & Smith, 1999). Age differences were reported also in friendship patterns of children with and without LD (Wiener & Schneider, 2002). However, although the documentation of social skills deficits in childhood (e.g., Nabuzoka & Smith, 1995), in adolescence (e.g., Most & Greenbank, 2000), and in adulthood (e.g., Goldberg, Higgins, Raskind, & Herman, 2003) suggests an element of continuity, the need to look at age differences in the existence of social skills deficits through longitudinal or cross-sectional studies (Bauminger et al., 2005) has been largely overlooked; an issue that will be addressed in this paper.

A further point of interest in the present study is the nonverbal social interaction skills of children with LD. The distinction between social competence and social skills, which are interrelated but not identical as pointed out by Elksnin and Elksnin (2004) and McFall (1982) is adopted. Social competence constitutes mainly an evaluative term that is based on judgements that people make regarding their performance on a social task. Social skills, on the other hand, represent a specific behaviour that people exhibit in specific situations in order to perform competently on social tasks (Rubin, Bukowski, & Parker, 1998). The social deficits that characterise individuals with LD refer to either acquisition deficits or performance deficits (Gresham, 1981). Acquisition deficits are social skills deficits in which the individual does not possess a particular social skill. Performance deficits refer to the individual's failure to perform the social skills that he/she possesses (Kavale & Forness, 1995).

Most studies have focused on perception and comprehension of nonverbal communication (e.g., Bauminger et al., 2005); that is, nonverbal acquisition social skills. Researchers assessed children's accuracy in labeling photographs or silent-film scenarios (Nabuzoka & Smith, 1995),

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