

A cognitive behavioral program to acquire social skills for students with learning difficulties

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Abstract

Difficulties is one of the fields that researchers have paid attention to because they know that the rate of learning difficulties among children reaches 43% among children in the field of special education and learning difficulties result in behavioral effects deficits in social skills and the occurrence of cognitive and behavioral disturbances. Most researchers in this field believe that the need for social skills training is considered as a fundamental part and component of the transitional program for all stages and life periods that a child with learning difficulties experiences. Therefore this study came with the aim of developing and proposing a cognitive behavioral program to gain social skills for students with learning difficulties. About the study sample it is consisted of 26 male students and 29 female students in the third grade of primary in Al-Fahaheel Model School in Kuwait. The researcher followed the descriptive and analytical approach in order to describe the phenomenon in theory as They exist in reality and then analyze their characteristics that distinguish them and determine the factors that cause them but the quantitative approach is used to convert the qualitative data into quantitative.

As for the study tools the researcher has used picture and electronic books and published references dealing with the same topic in order to write the theoretical framework. And Walker-McConnell Scale of Social Competence and School Adjustment tool to analyze the answers statistically and graphically.

That study indicated in its results that:

a. The training program simulates an organized experience on a number of individuals who were found to have a direct need for obtaining that training.

B. The training experience is considered a relatively new experience because it is considered unfamiliar with the academic education that children receive throughout the study period, which indicates the novelty of this program in the framework of the topics it deals with, and how it is presented as well.

C. This program creates an opportunity for students to participate and delve into the issue of acquiring and identifying various skills.

Dr.. The activities and tasks of the program, in addition to the roles and positions that were practiced within its framework, were characterized by high rates of attractiveness and compatibility with the characteristics of individuals from the study sample.

E. The program provided support for the family's role in developing their children's skills in social terms by introducing parents, in a written style, to the objectives of the training program, as well as the skills that the program intends to impart to students.

Keywords: *Cognitive behavioral program - social skills - with learning difficulties*

I. Introduction:

The field of learning difficulties is one of the newly emerging fields and its emergence was as a single field in the field of special education in the 1960s. In the twentieth century, the concept of learning difficulties became clearer because they continued for a long time under the weight of a number of concepts and other terms and areas that had nothing to do with them, and they were also subject to diagnosis, interpretation and treatment of their phenomena under these fields and terms (Al-Quraiti 2005, p. 409), and the field of learning difficulties is one of the fields that Researchers paid attention to it because they know that the percentage of learning difficulties among children reaches 43% among children in the field of special education, and this percentage is not stable or subject to decline, but rather it increases annually by up to 40% since the beginning of 1977 (Al-Zayat, 1998) , P. 2).

All these disorders are among the fundamental disorders of the individual and he is exposed to them due to the disturbance in the functional performance of the central nervous system, and these disorders are not related to a specific period of time or one stage in his life, but can occur in any period of life, and learning difficulties are included in the literature of special education and are done Divided into developmental learning difficulties and academic learning difficulties, and water learning difficulties represented in the inability to conduct the process of attention and the inability to remember, perceive, think or speak, but academic learning difficulties contain learning difficulties related to reading, writing, spelling, expression and mathematical operations (Abu Fakhir, 2004, p.153)).

Learning difficulties have been identified because they leave an impact on the educational aspect and aspect of the individual, but their effects and results do not stop there, so they spread to other areas and left effects on social skills, and it is one of the main problems faced by children with learning difficulties (Hallahan, Kaufman, 2008) . Children with learning disabilities suffer from problems with social skills by up to 75% (Kavale, 1996).

The deficit in social skill results in the child receiving negative feedback from those around him, old and young, and he does not receive any support from them and does not meet the acceptance and approval of those around him (Gildard and Guildro, 2005, p. 345). Also, the child's sense of powerlessness and his weak personal abilities makes him inclined to social withdrawal (bavri&monda-amaya, 2001). The negative impact due to deficiencies and deficits in social skills does not stop at the childhood stage only, but extends to the next age stages and thus leaves an unpleasant effect on the job performance of the adult category at work and in academic achievement (Gildard, Gildro, 2005, p. 345). And social skills from Spencer's point of view (1991): are the basics, cognitive parts, and behavioral elements necessary in order to obtain positive results when conducting the process of interaction with those around them, and that will result in people making judgments and evaluations that will be positive and acceptable as an evaluation of behavior (Al-Mutawa, 2001, p. 15).

Most researchers in this field believe that the need for social skills training is fundamentally a part and component of the transitional program for all stages and life periods that a person goes through (Hallahan and Kaufman, 2008, p. 272). Most of the research and studies have tried to focus on developing programs and plans that relate to helping children with learning difficulties who also suffer from deficits in conducting social, behavioral and cognitive skills.

The study problem and its question:

As we said above, children with learning difficulties suffer from various problems in the academic, developmental and social fields, and that the deficit in social skills is one of the most important indicators that indicate the existence of learning difficulties. This is because children with learning difficulties most of them suffer from a deficit in the skills of initiating interaction and expressing negative or positive feelings, as well as problems in emotional social control, and the deficit in social skills of children with learning difficulties results in an inability to obtain the most benefit from educational services. The qualification that is provided to them, which aims to develop and improve their capabilities in a number of areas, because of this, most studies have confirmed that the development and development of training programs are the necessary and necessary things and steps because they aim to develop social skills in children with learning difficulties, and this is because they are among the necessary skills that exist in a person's life and that a person's life is devoid of social skills that are commensurate with and compatible with Cultural rules and constants make human life full of a number of difficulties, including learning difficulties that are a number of practical areas and daily skills in life, the inability to live alone and social introversion.

And according to what the researcher knew, the local environment did not conduct any research or studies in it in order to identify the problems of social skills in children with learning difficulties, and when the researcher reviewed the theoretical literature for behavioral therapy knowledge it became clear to her that there is agreement and agreement about the success and effectiveness of the method and method And that some of his methods that were relied upon in order to treat and solve a large number of problems, including social skills, was an effective and successful method, and an extract for all this. The current study will try to reveal the success and effectiveness of the training program that depends on cognitive behavioral therapy in order to improve and develop the social skills of children with learning difficulties, which will be activated and applied to them, and some of the supporters of this method of treatment support and agree to the adoption of methods and methods The functionalities contained in this treatment method. Therefore, the study problem can be formulated in the following main question: What is the success and effectiveness of the training program that will rely on cognitive behavioral therapy in order to impart some of the social skills of a sample of third grade students at the Child Education and Assessment Center in Kuwait. More precisely and comprehensively, the current study will attempt to provide answers to some of the following questions?

1. How effective is the training program, which takes the course of controlling and modifying cognitive behaviors, in influencing the social competency skills of third-grade students?
2. What is the impact of this training program to increase peer assessment scores regarding the participation of students of the same class in play?

Objectives of the study:

This research mainly seeks to:

- 1- Explain what learning difficulties are, their history, and theories of their interpretation.
- 2- Explain what is meant by social skills, their types and theories.
- 3- List the most important points and information on emotional behavioral and cognitive therapy.
- 4- Developing and proposing a cognitive behavioral program to acquire social skills for 26 male students and 29 female students with learning difficulties, a number in the third grade of primary school at the Child Education and Assessment Center in Kuwait.

II. The theoretical framework

The first topic: What is learning difficulties as a type of Occupational burnout?

The first requirement: the definition of the term learning difficulties and the historical development of its emergence

Definition of learning difficulties:

There may be many concepts that referred to the definition of learning difficulties. The following are the most prominent findings of a number of specialized international bodies, in addition to the concepts of some of the first pioneers in this regard. The National League Council indicated in 1981 that learning difficulties is one of the general terms that include a heterogeneous number of disorders, which is illustrated by problems Notable in the use and acquisition of listening and speaking skills, as well as reading, writing and speaking, in addition to problems of deduction and mathematical abilities, these disturbances are characterized by being continuous throughout life, and within this concept, there are symptoms associated with learning difficulties, which are problems of self-regulation of behavior and perception, in addition to Social interaction problems, however, these symptoms do not belong to learning difficulty per se. Rather, learning difficulties accompany a number of other disabilities, such as sensory disabilities and mental retardation, in addition to exposure to severe psychological and emotional disorders. (Hammill, 1981, p336-342)

From the perspective of the American Association of Learning Difficulties, in 1986 AD it referred to the term learning difficulties. As it is this chronic disease, which is caused by problems in the central nervous system, which negatively affects growth and integration, as well as poor linguistic and non-linguistic abilities, as well as disability-specific learning difficulty gradated in degrees of severity, throughout the life stages that the individual goes through. , And appears clearly during the performance of an occupation, as well as when practicing daily routine activities.

The National Consultative Commission presented the concept of children with special learning difficulties, as a group that shows a disorder in one of the basic psychological processes, or more than one, including understanding, and the use of spoken or written language and this is evident in the disorders of listening and thinking. Also, speaking and reading, difficulty being able to spell, and difficulty performing arithmetic operations. This concept includes cases of cognitive impairment, in addition to brain injuries, and the

inability to read developmental, in addition to simple functional disorders that occur in the brain, and the whole concept does not include cases of disabled children with sensory disabilities, including visual, auditory or physical disabilities. This concept is also a case of mental retardation and those with emotional disorders or environmental defects. (Kirk, 1968, p32)

From the foregoing it is clear that there are a number of common features between these bodies in the framework of presenting the concepts of learning difficulties, including the consensus that learning difficulties are related to the disorder that occurs in a heterogeneous number of basic operations (language, listening, reading, writing, arithmetic) This disorder may be in one of those processes, and it includes a problem in more than one process, and the definitions agreed among them that these effects cannot be traced back to social or environmental factors, but rather are the product of some of the functional disorders occurring in the central nervous system.

- The historical development of the term learning difficulties:

Researchers' attitudes varied and the efforts made to research learning difficulties varied, but neuroscientists and anatomists, in addition to those interested in physiology, played a major role in developing learning difficulties research, and among the first scientists who worked hard in identifying the locations of the main functions of the body, such as memory, personality and speech And intelligence was the German doctor "Franz Gal", and the study of the relationships between disorders in the brain and language disorders noticed his interest, and an explanation for that link. Gal assumed that there are some areas in the human brain that are concerned with controlling specific mental activities, and in the event that a person is exposed to an injury in the brain, which causes an effect on those areas, and therefore a language disorder in the form of speech occurs. (Wiederholt, 1974)

Efforts and studies continued after Doctor Gal, including what John Jackson contributed in 1858 AD, where he revealed the sites of language and speech disturbances and their location in the brain specifically in the cerebral cortex. Jackson drew criticism in his study of ideas that deal with the main functions such as speaking as a bet other places of the brain . Accordingly, he reclassified a holistic classification and an identifying system that includes the components of speech and language, and within the framework of Jackson's study, he acknowledged that speech is not limited to understanding and using speech, but rather includes a number of other processes such as meanings, tones, physical movements and other matters that occur in the context of what is being done. Hearing or pronouncing it, and he emphasized that the speech relates to the existing functional work of the brain as a whole without linking to specific locations within the brain because from his perspective all parts of the brain are linked to each other to perform a single functional work that is characterized by integration. (Ali, 2005, p. 15).

Among the studies that dealt with speech disorder was the study (Broca, 1860), that study said that the functions of the left part of the brain differ from those of the right side, as well as confirmed that the sites responsible for the performance of speech functions are located in the left side of the brain, and it included The results of that study indicate that the cause of speech and language disorder; It is due to an injury to the far left of the frontal lobe of the brain, which is the area known as "Broca's area". In 1872 AD, the area responsible for understanding words and sounds was identified and located in the left temporal lobe of the brain, and he linked that region with written language And writing, by the German neuroscientist Karl Wernicke, and that region was

known as the "Wernicke region." While the Broca region is responsible for producing speech, the Wernicke region is the one that deals with the way this speech is understood. (Ali, 2005, p. 15)

In one of the medical reports, submitted by William Broadbent, in 1872 AD, this report dealt with the case of a patient who had a high IQ, was good at reading and writing, but he lost the ability to read printed and written characters completely, after suffering a brain injury (Broadbent, 1872) , p26). Five years after the presentation of that report, the term "Word Blindness" appeared in 1877 AD by a German doctor named Adolf Kussmaul, after studying a case of an adult patient who could not read despite his lack of visual, mental or verbal disabilities, and from this Rationale The idea of reading difficulties arose. (Kussmaul, 1877, p770), and the concept of word blindness expanded by 1894 AD at the hands of two physicians, Henschlewood and Pringle Morgan. The term became congenital word blindness among children (Hinshelwood, 1917, p72), and the scientist Samuel Orton explained a number of characteristics of people with reading difficulties in 1928. Moreover, he was the first to come up with a model that includes a multiple training method. Senses "Multi-Sensory" for children who suffer from problems in the process of reading, and this was shown in his book (Reading, Writing and Speech Difficulties in Children), which was published in 1937 AD and later became famous for the Orton Gillingham method for teaching reading (Al-Batayneh et al., 2007, p. 188).

The scientist Kurt Goldstein studied a number of brain injuries sustained by soldiers during the First World War, and was able to identify some of the behavioral characteristics after noticing a case of loss of focus in these soldiers during the process of exposure to reading a printed text. (Goldstein, 1936, p586-610). In a series of studies conducted at the end of the thirties, by two mental and neuroscientists, namely Alfred Strauss and Heinz Vernes, with the aim of examining brain injuries in children who were mentally retarded for reasons not related to origin, any external causes, and their efforts reached the possibility of identifying a set of characteristics The characteristic behavior of these children, and these characteristics were known as a group of Strauss symptoms, and include distraction in attention and hyperactivity and disturbance in perception as well as movement as well as some problems related to the regulation of behavior. (Werner, 1941 & Strauss).

A number of studies were conducted in this regard in the late fifties, and carried out by Cruikshank and others. These studies concluded that the cause of cognitive disorders as well as movement lies behind the learning difficulties of children, even those with high IQs. (Al-Zayat, 1998, p. 41). The year 1960 AD represents a focal point in the transformation, as educators paid attention on their part to children who cannot receive education in an appropriate manner because they do not correspond to their mental capabilities. A number of concepts have been established that explain and describe these cases, including the concept of educationally disabled children and children with disabilities. Difficulties with language, cognitive impaired children, and children with learning difficulties, however, a number of meetings were held that discussed these concepts in 1963 CE, where she opposed these terms, and the goal of these meetings was to look again at those concepts, and she expressed dissatisfaction with them which laid the first strings for establishing a National Assembly; Means the care of that category of children, based in the United States of America. (Al-Khatib and Al-Hadidi, 2005, p.102)

Dr. Samuel Karak suggested in one of the meetings the term "learning difficulties", and he is considered one of the pioneers in the field of special education in America and accordingly, that term was approved. The Association for Children with Learning Difficulties announced its goal, which lies in the educational

development process for children who suffer from educational difficulties despite their high levels of intelligence, and those difficulties take a cognitive or conceptual character as well as synergistic (Al-Khatib and Al-Hadidi, 2005, p.102)

The second requirement: the prevalence of learning difficulties:

Although there are some general criteria set for learning disabilities, it is difficult to establish a fixed percentage indicating the expression of those who suffer from this type of difficulty. Due to the differences that require a number of tests, including standardized achievement tests, psychological processes, and tests that have reference criteria, in addition to informal questionnaires in this regard (Al-Sartawi and Sisalem, 1992, pp. 74-76).

These different types of tests aim to identify academic or developmental learning difficulties, but nevertheless they cannot reveal a statistically significant diagnosis of the rates of learning difficulties in one form, and if there are some studies that indicate that the percentage of learning difficulties among children is (1-3 (%), And (Gades, 1979) has indicated the prevalence of children with learning difficulties at a rate ranging between (5-15%), within the school community, which indicates the disagreement between researchers in determining this percentage, so that there are others among them admitted The prevalence of learning difficulties among school children out of the total number of students, by (20-30%).

However, in Arab settings, a number of different studies in this regard have approved higher rates for students with learning difficulties, as this percentage sometimes exceeds 30%. (Abu Fakhir, 2004, p. 166) Accordingly, there are no confirmed official statistics regarding the prevalence of learning difficulties. The reason for this can be attributed to the different diagnostic tests used by researchers, in addition to the different environments in which each of these studies are applied, meaning that the samples of each study differ from the other.

The third requirement: the theories explaining learning difficulties:

The opinions and entries made by the scholars differed; In order to explain learning difficulties, in a way that reflects the extent of the difference between the intellectual theories and the various methodological schools. Here are five of those different theories in this area:

1- Development portal:

This entry assumes the existence of a number of developmental patterns. Which is concerned with the normal and healthy growth that is generally accepted. Growth is governed by laws that guarantee its continuity and regularity, which is reflected in the various behaviors, and therefore growth does not happen in a random manner, which means that the presence of any deviation in one of its stages inevitably leads to an imbalance in behavior, and from the external perspective it is considered These assumptions are scientific and logical, but the rates of growth differ relatively between the various cultural frameworks, as well as the different developmental stages according to a set of genetic factors that govern them in addition to environmental factors represented in nutrition, the psychological and social climate surrounding the person, and the mental and cognitive stimuli he is exposed to. Some researchers and those involved in testing the hypotheses based on this approach indicate that they have a kind of credibility among children with learning difficulties. (Al-Zayat, 1998, pp. 148-151)

There are some studies that have confirmed that the main cause of learning difficulties comes from disturbance in maturity, including the study (Slingerland, 1971). Those in favor of the trend in favor of the reflection of the process of learning difficulty in the context of visual, motor or linguistic processes, as well as matters that attract attention The cognitive development of a person is distinguished, and in this context the study (O'Brien et al, 1988) revealed that there are significant differences regarding cognitive and visual abilities among children with learning difficulties from others, and the performance level of persons with learning difficulties decreases significantly, while taking a test Cognitive abilities compared to others, according to the study (Riley, 1989).

The methodological approaches used in the framework of the development approach also varied; As every child who suffers from learning difficulties has a different pattern from others in the manifestations and deficiencies or delay in maturity, meaning that each of them differs in the mechanism of crossing their own developmental stages, and in succession, the use of a curriculum that exceeds the capabilities and capabilities of these children, the merit is Result The impact is an expectation for that group during the academic stages. (Ali, 2005, pp. 24-25)

2- Behavioral approach:

The behavioral approach stems from the presence of some behavioral determinants that can be taken to be a normative framework for the pattern of education in its natural form, and in the event that a child cannot reach this standard level, this reflects the child's suffering from a specific problem, and constitutes the intervention process in order to cooperate with the child to achieve his attainment. One of the most important pillars of treatment is the standard level. (Al-Zayat, 1998, p.160)

Hence, these assumptions are based on that behavior is the essence of the problem and that the treatment of that problem includes changing ineffective behavioral patterns with other effective behavioral patterns and working on focusing efforts on the problem in a way that suits the characteristics of each child, which means the possibility of generalizing the results and increasing their applicability. And, on the contrary, this precludes avoiding the ineffective or ineffective worlds directly related to the problem, which ultimately leads to the failure to reach the level, and thus the child's frustration. (Ali, 2005, p. 28)

From seeing the behavioral approach, learning difficulties may be due to inadequate teaching methods and methods, or to the child's lack of sufficient motivation to learn in addition to some other environmental conditions that hinder learning naturally. (Turki, 2004, p. 18). This is evidenced by the differences between mental abilities and expected levels of academic achievement, which leads to failure in academic skills, compared to others. (Coptine, 1988 & Morgan)

Within the framework of the behavioral approach, we find many researchers interested in deducing some principles and strategies governing the methods of dealing with children with learning difficulties, including the study of the researcher (Haeding, 1986) who expressed that the strategy of using positive reinforcement in order to support a desirable behavioral pattern while activating Use negative reinforcement to stop unwanted behavior. One of the most important strategies in this regard, which increases the effectiveness of its use with those in need of encouragement and achievement in the event of an increase in their activity and the

lack of this motivation of encouragement, as well as with those who are impulsive or have low levels of frustration. (Al-Zayat, 1998, p. 164)

Among the criticism directed at the behavioral approach is not to give an explanation of the learning difficulties of children who come from high economic environments, in addition to not explaining the visual and auditory perceptual disturbance, in addition to that it did not address the effects of motivation or the role of cognitive processes in learning. (Turki, 2004, p. 19)

3- Knowledge approach:

The cognitive entry data assume the existence of a number of processing mechanisms in humans, each of which has a specific function, and it is assumed that this is done in an organized and sequential manner. The aim of the cognitive portal is to identify human behavior within the framework of the optimal exploitation of his mental and cognitive potentials and abilities. When a person receives a set of information, he must perform a specific task, and from here it is necessary to choose specific processes and neglect others to complete that task. (Akari, 2010, p.57)

The cognitive approach is based on two things: the first is the function of acquiring concepts and cognitive strategies, as well as systems for preparing information related to cognitive learning, which is based on processing and processing, and the second one comes from looking at education as one of the types of cognitive mental activities, including all previous knowledge and methods that worked on Acquiring, preserving and storing them along with strategies for using this knowledge, which means the difference in learning difficulties between children and adults in both quantitative and qualitative terms compared to their peers from ordinary students within the same age group, according to a number of cognitive variables, including: (the student's linguistic and cognitive outcome from multiple concepts and strategies The cognitive and the extent of the ability to use it in an effective way, the information processing systems, the extent of working memory activity, as well as the efficiency of cognitive representation (Al-Zayat, 1998, p. 184)

The cognitive portal indicates that the reason behind the emergence of learning difficulty is due to the inability to preserve and retrieve information as well as the deficiency of processing, storing and proper use of that information in addition to the lack of the possibility of processing and processing information as well as extracting strategies due to the inefficiency of the mental cognitive representation of that information, which is not related. With mental capabilities from near or from afar, as the differences between those with learning difficulties and other ordinary students lie in the ability to create links between the cognitive units formed within the cognitive structure. (Al-Zayat, 1998, p. 201)

4- Neuropsychological approach:

There are many hypotheses on which the neuropsychological approach is based, and they are represented in the normalization of the central nervous system's growth on some quantitative and qualitative characteristics in a manner that differs from that abnormal growth, in both structure, structure and functions. This can be identified by conducting neuropsychological tests, as this entry indicates that any disorder in the central nervous system of a child necessarily means the emergence of that disorder and its reflection on the various behaviors of that child. (Ali, 2005, p.30)

The neuropsychological entrance theory provides an explanation for learning difficulties saying that they are caused by organic damage to the brain that leads to deficiencies in functions, which can be expressed by the term "simple brain disorders." The information that is in the brain, so the information is received through those centers, which stimulates the brain in the areas of thinking and movement or the issuance of certain emotions. From this logic, the presence of any disorder in one of the centers has negative effects on the sensory functions that are related to this center, meaning that this results in disturbances in various different cognitive functions. (Turki, 2004, p.13).

5- Basic operations approach:

This approach and other various approaches to development are based on the philosophy that the natural growth of the controlling system is followed by normal and normal behavior, and the basic processes approach stems from the premise of the existence of some major processes that exist behind every direct or indirect behavioral activity. With regard to learning, these processes are characterized by a gradual progression from the top to the bottom to reach all the direct behaviors of the teaching process, and accordingly, the behaviors are nothing but the product of a number of basic processes and thus there is an ability to distinguish between the processes that are related to education in terms of behavior and identify what affects those behaviors Certain deficiencies or disorders. (Al-Zayat, 1998, p.170)

The psychological operations approach is based on the perceptual processes and the ability to pay attention in addition to the extent of memory capabilities, and from the perspective of the supporters of that approach, they believe that these processes are nothing but components that are not connected, but they did not consider the integration of cognitive processes in the belief that they can be divided and treated. (Sileo, 1985)

Supporters take central nervous system functions as the basis for various interpretations of disorders, and then all their therapeutic efforts are directed in this regard, but there are those who focus on one of the characteristics of the central nervous system or on the functional exchange of processes responsible for behaviors. (Ayres, 1972) Also, those who have acknowledged the possibility of using the method of training basic psychological operations, they assume that these processes interfere in the study, and therefore children can be trained to obtain a more effective and sufficient performance which will be reflected in the result, for example if there is a child suffering from a lack of reading due to problems Related to visual perception, it must be trained in visual perception skills before entering the stage of learning to read. (Ali, 2005, p. 27)

6- Cognitive theory (Beck):

Supporters of cognitive theory assume that cognitive factors play a role in the failure of social skills, such as negative expectations or self-evaluation (Abdullah, 2000, p. 259). Within every human being there are assumptions that drive him to desire to be the best on an ongoing basis, and these assumptions remain from an Emery perspective. Emery hesitates within the human being until he is exposed to some failure, and the internal negative beliefs are activated and strengthened strongly, which leads to the deviation of thought and a negative facade, as well as a number of reactions that are reflected in the thought with more disturbances and distortions, and as a result, a severe deficiency in the skills that a person possesses. (Wahba, 2010, p. 59)

The deficiency in skills is one of the most important factors that negatively affect individuals' relationships with others and the extent of interaction with them, and this matter would generate negative

feelings of sadness, isolation and low self-esteem in addition to avoiding participation and interaction with others, which leads to a lack of confidence in the other and the fragility of ties. The social issue of this individual, and the matter does not stop only they are, but extends to the extent that a person loses his purpose and passion in life and the meaning of life is absent, which deepens the social gap. (Ali, 2012)

Skills deficiencies are divided into four sections (Al-Humaidhi, 2004), and those sections are identified as follows, as:

1- Deficit in social skills: that is, there are some individuals who suffer from the absence of the skills necessary to establish social interactions, in an appropriate manner.

2- Deficiency in performing social skills: the individual may have good knowledge and information about the formation and establishment of social skills, but he is not able to practice those skills in the desired manner in relation to daily life; The reason for this may be a lack of motivation and motivation or poor opportunities for best behavioral performance.

3- Impotence of emotional control related to social skill: There are a number of individuals who lack the enjoyment of certain social skills due to the occurrence of some situations as the emotional response of these persons prevent them from acquiring appropriate skills, these emotional responses that represent a barrier to fear, anxiety, tension in confronting various positions.

4- Insufficient self-control during the performance of a skill: Some individuals possess social skills, but they do not perform that skill properly due to the responses that arise as a result of emotional signals in addition to control problems, which means the ability of these people to learn the social skill. They remain hidden or may appear, but not inappropriately.

The second topic: what are social skills?

The first requirement: the concept of social skills

The continuous scientific progress has affected the concept of social skills and made it a multi-term concept, and there is not only one definition, but scientists differed in its definition, and we will show some of these definitions:

1) Defining Al-Mahdi (2000) of social skills as: the exchange of personal relationships with others in what is considered among the human social competencies in addition to academic skills, psychological and physical skills, and this contributes to the formation of a complete personality and here we can consider that the term social skills is one of the terms used to describe Social functioning which includes friendships, social standing, social satisfaction, and adaptive functioning.

2) Defining (Lannucci, 2000, p45) describing it as: skills and behaviors necessary for individuals in order to help them to behave in a good manner and acceptable to others, and among these skills is the possibility of conducting the communication process and finding solutions to social problems facing the human being as well as self-understanding and establishing good relationships and bonds And successful with those around.

3) Social skills from the viewpoint of Williamson (2002) & Dorman): Clear behaviors and cognitive tasks and behaviors that occur during interaction with the surroundings, and the cognitive functions are

(attention, memory, organization, evaluation of the consequences of social behavior that occur internally in the brain and impossible to see. The apparent behaviors are those that visualize and refer to social skills to us and contain verbal and non-verbal actions that can be seen and observed through social situations.

4) Social skills from the point of view (Al-Samaduni, 2001) are: the possibility and ability of a person to express emotional and social expression as well as his ability to receive emotions issued by others, analyze and interpret them. By social interaction, and his ability to control and organize non-verbal expressions is also considered a possibility and enable him to play the role and social self-control and prepare them socially.

5) Defining social skills from the point of view (Shash 2002) are: the child's ability and ability to conduct social interaction with those around him and with peers as it is described as the ability to independence and conduct cooperative operations with the surrounding individuals and it is also self-control in addition to some other personal skills That must be present and are represented in the establishment of positive and beneficial ties and relationships, the ability to act well and conduct matters, and the ability to control the academic skills of the school.

The second requirement: types of social skills

Abd al-Rahman, (1998) has classified and evaluated emotional and social skills into four basic areas in late childhood, and these areas are:

1) Initiate interaction: It means the ability of a person to conduct interaction with others verbally and behaviorally, and he is the party who started the interaction process. These behaviors are to get to know others, provide assistance, conduct visits or share their pain and sorrows, and help them solve their problems in order to reduce the burden on them. .

2) The skill of expressing negative feelings: It is intended to enable the child to express his feelings in a verbal and also behavioral manner, such as direct response or indirect response to exercises and activities that he performs that do not obtain his approval and approval.

3) The skill of emotional social control: It is the empowerment of the child and his ability to slow down, patience and control his emotions in the various social situations that connect him with others, with the aim of preserving and maintaining the good relations and bonds that bind them together. And good control over it.

4) The skill of expressing positive feelings: It represents the child's ability to establish and establish good, acceptable and successful relationships based on his expression, his acceptance of others, his cooperation with them, compliments, conversations and discussions with them and play, and that will actually benefit the child and everyone who deals with or befriends him.

Caldarella and Merrell (1997) divide social skills into five dimensions and aspects, which are as follows:

1) Relationship skills with peers: They are represented in offering help, providing a helping hand to others, and expressing compliments and compliments on their actions.

2) Academic skills: They are represented by walking on directions and instructions, using leisure time in a good and useful way, and following laws and regulations.

3) Self-management skill: It is represented in controlling emotions, controlling oneself, at a time of anger and a time of joy, and walking on order and under the leadership of the law.

4) Self-affirmation skill: It consists in having conversations as a first party, creating a team, inviting peers to play, and being the owner of the initiative in other work, and he is not ashamed of being the one who initiates all matters.

5) Obedience skills: They are represented in not violating instructions and directives, not showing disobedience to them or rejecting them, and that he follows the laws and regulations and follows them.

The third requirement: theories explaining social skills

There are a number of theories that have analyzed people's acquisition of social skills, including:

First: the behavioral theory:

The behavioral theory considers behavior as a unit and an integrated and comprehensive system, and it may be divided into units that are less and simpler than them, and these units are considered the primary responses that relate to a number of specific stimuli (Mansour and colleagues, 2003, p. 245).

The viewpoint of the owners of this theory believes that human behavior is nothing but a number of habits that a person acquires and learns during his various stages of development, and that the controller and the officer here in the process of formation and mental formation are the forces of prevention and the forces of excitement and these two forces control a number of conditional responses and the owners of this theory return the reason To the environmental factors that surround the individual and block his path as they believe that learning processes take place when new learning is acquired and learned or returned. Hence, this theory considers human behavior as behavior acquired through the learning process and also considers that the individual's behavior is flexible to the degree of his acceptance of improvement and change through the availability of conditions And the appropriate educational climate (Wahba, 2010, p. 58).

According to the behavioral theory, social skills are considered a number of behaviors, performances, or habits that a person practices through his acquisition of them through the learning process in his various stages of development and also by relying on the educational methods present in social formation and establishment, and by relying on the forces of prevention and arousal forces that control and control skills and control. We can erase and cancel some of these responses in humans by stopping the reinforcement processes that were compatible and supportive of this behavior or human actions. When we cancel rewards or psychological reinforcements, the responses It will gradually decrease and will be extinguished and from here, the response draws its strength from the reinforcements to the consequence and consequence of them, and from here we can erase and erase the incorrect or negative and unacceptable behavioral habits from the performance of the individual through the method of not following it and stopping it by stopping the rewards, reinforcements and support that are Accompany this act (Abu Mansour: 2011).

Second: Social Learning Theory (Bandorra):

Andorra believes that the external and internal environments and climate surrounding a person work together in a united way, and each of them depends on the other. Here learning takes place as a natural result of the interactions that have been exchanged between the environment and the internal climate, between the

external environment and the cognitive processes, and Andorra has called these exchanges the process of mutual determination, and that the forces that help the person to push are not the forces, motives, and needs that are called internal forces, nor because of the environment The external ones represented in the stimuli of the environment, but we can analyze the psychological behavior in the form of a mutual interaction between the personal determinants and the environment, and from here we can conclude that the coding, organizing and subjective considerations are the processes that contribute and play a major role in conducting the learning process. He also made assumptions in Andorra about learning by lesson or what is meant by modeling or representation and denotation with an example and considered in Andorra that learning by modeling is the basis and the most important thing on which the acquisition process depends (Abu Shendi: 2015).

Another model and example of social learning has been presented by Mahony&Thoreson. The performance and behavior of human beings falls between two main events, which are previous events, also known as introductions and between subsequent events, also known as outcomes, and introductions are the precursors and precursors of human behavior. As for the results that come after the behavior has been issued, and there is a relationship and a link between the introductions, the behavior and the results, and this relationship is a functional relationship, the events that occur in the introduction and the results leave an impact on what a person must do and do, and when controlling one of the events or in them both results from this Control is a person's success in solving his problems and finding ideal solutions for them. Social learning here is based on the field or dimension in which these events and behaviors take place (Abdullah, 2000, pp. 260-261).

The third topic: what are the cognitive behavioral therapy and counseling programs?

The first requirement: behavioral counseling

Not all human beings have all degrees of perfection in regard to what they perform different actions, which represents the biggest and most important cause of affective disorder from the perspective of the scientist and researcher Alice, and then the goal of behavioral therapy is to provide assistance to these characters in order to contribute to achieving more acceptance They have the self, even if they are imperfect, in addition to deepening self-vision in isolation from the roles they play and their performance towards various life situations. Also, behavioral therapy for people with emotional disorders is done according to new ways of thinking, which works to switch from negative emotions to other positive ones. Therefore, behavioral therapy is that therapy that works on self-acceptance as well as the other unconditionally. (Simson, 2010)

The second requirement: cognitive-emotional therapy

The following are a number of tasks that a professional performs in presenting mental therapies in an emotional form, according to (Corey, 2012):

1- Providing assistance to people suffering from an emotional disorder; So that they can achieve a better understanding of themselves, and their irrational thoughts, which appear in their verbal syndromes, and then the guide can examine the thoughts of the patient and direct him to a number of activities that contribute to confronting and changing irrational beliefs, with more rational beliefs.

2- Reaching the patient to the point where he is aware of the mechanism of action of irrational thoughts; By attribution of the reason for these ideas by the specialist to the irrational thought pattern followed by this person.

3- Trying to reduce irrational thoughts and reform guided thinking. It is extremely difficult to completely remove irrational thoughts, but there is a possibility to reduce them, and that is the goal of cognitive behavioral therapy.

4- Creating a challenge in his troubled soul; To seek with the intention of developing his epistemological philosophy, and his perceptions of life, so that they are not prisoners of those ideas that are extremely harmful to their future.

The indicative relationship in cognitive-emotional therapy is a direct cognitive relationship. From this it is clear that there is no strong relationship between the specialist and his patients, as a result of treatments that center on the specialist counselor, and the role of the emotional cognitive therapist stems from exerting effort. In order for a person to achieve self-acceptance unconditionally, and the same is true for others, Alice believes that excessive sympathy and understanding of the situation can work to let down these individuals and reduce their responsibility, which will be reflected in their performance negatively, so the emotional cognitive therapy is based on the basis is on the type of trust that appears between the therapist and the mentor, in the extent of the ability and support of the therapist that he directs to the counselor; In order to change itself, and by using a number of tools that increase the effectiveness of the treatment. (John, 2005 & Rita)

The third requirement: methods of cognitive therapy

Cognitive-affective therapy is a process with a multitude of dimensions. Because it is subject to many therapeutic techniques, in terms of behavioral and cognitive treatments with flexibility, and in a manner that is appropriate to the condition of each guide (Sharf, 2012), and below we discuss some of those methods and techniques in some detail:

1) Cognitive methods

a. Refuting irrational thoughts:

It is one of the most common techniques used in cognitive-emotional therapy. By identifying and identifying irrational thoughts, the therapist can attempt to replace those thoughts, to be replaced by epistemic thoughts.

B. Homework in cognitive-emotional therapy:

Here, the patient is supposed to prepare a list that includes all the problems he suffers from, through which he performs what he thinks of irrational thoughts, and then tries to change them, and in this context the therapist provides the patient with some models that aim to advance the self; Because of its methods that increase the effectiveness of understanding the irrational thoughts that a person has, and during the therapy session, the (ABC) model is applied; And that on all daily situations and events that meet the guide.

C. Change the language:

Phrases that include words such as (must, must, must ...) and what is on the same basis are among the most important causes for affective disorder, and from here the guide must help the person in light of the emotional turmoil to replace those words with others, such as saying " It was a difficult event, but I can deal with it "instead of saying," It was a very painful and unbearable event. "A person suffering from a mental disorder

usually uses expressions that denote pain, and are not without direct blame to the self. The therapist is here to replace these phrases with positive ones that contribute to sound thinking, and a shift from the negative point at which the emotionally disturbed person stands.

D. Psychological educational tools:

Cognitive emotional therapy uses a number of educational tools, just like other treatments, which means that the specialist works to provide a number of clear information about the problems facing the patient, in addition to the data of the treatment method, and the majority of people with disorders react positively to that treatment when they have an adequate understanding of the goal behind each step of the treatment.

2) Emotional methods

A number of therapists require the method of cognitive-emotional therapy for the emotional method, which includes some ideas, including: (accepting oneself and the other unconditionally, performing emotional roles, working on emotional cognitive fantasies, activating activities to combat shyness ...) and other exercises that intend to Help the troubled person get rid of irrational negative thoughts, and work to replace them with positive rational thoughts, and below we address these exercises with more clarity:

a. Emotional cognitive fantasies:

This method is used in order for the patient to find new behavioral models, and this happened by stimulating the patient to imagine himself while thinking, feeling and taking the path he desires, in the way they want, in addition to the process of recalling a number of painful situations as he spoke with them in At the same time, and thus work to replace positive attitudes, which results in the formation of better experiences and experiences for the individual.

b. Role play:

This method contributes to confronting irrational thoughts, by invoking a number of situations that work on afflicting the troubled person with stress and anxiety, as well as, for example, ideas related to a specific profession, and then the therapist represents the role of the person causing this anxiety, in an attempt to break those thoughts Negativity in emotional turmoil.

c. Shy attack exercises:

This is related to people with emotional disorder confronting thoughts related to generating a feeling of shyness in them, and this occurs within the framework of a discussion between the mentor and the mentor, which contains the ideas that revolve in his mind, as well as related topics or matters that cause shyness, and then the guide works to direct Being guided by a number of homework duties related to those situations that represent irrational thoughts; To contribute to overcoming them, and to replace them with rational ideas and experiences. (Corey, 2012)

3) Behavioral methods

Cognitive therapy resorts to the use of many behavioral methods, such as: systematic elimination of sensitivity, techniques that work to obtain a measure of relaxation, as well as mechanisms of self-management, modeling, and self-control, and cognitive therapy pays great attention to home remedies, as it is more important

than the treatment sessions itself. ; So that it contributes to the systematic exposure and elimination of allergies in a totally self-reliant manner, which means more effectiveness in cognitive-emotional therapy.

Practical framework

Study Approach:

The necessity of following an approach for any field study that requires the existence of a used method, here is the descriptive and analytical method, so that the phenomenon is described theoretically as it exists in reality, and then analyzes its characteristics that distinguish it and determine the factors causing it, but the quantitative approach is used to convert the qualitative data into quantitative. The methodological aspect came after the introductory introduction in which we mentioned the problem of the study and its questions, as well as the objectives of the study.

As for the theoretical aspect of the study, it was divided into three sections. The first topic we studied learning difficulties, their definition, history and theories. As for the second topic, it deals with what social skills are, and the third topic deals with what cognitive behavioral therapy is. As for this practical aspect, it will deal with the analytical aspect that will depend on the data transcription through personal interviews and field visits with 26 male students, and 29 female students with learning difficulties in the third grade of primary school, the Child Education and Assessment Center in Kuwait, and we also extracted the results obtained Finally, the conclusion comes, which is a summary of what has been presented in the theoretical and applied part.

Study instrument:

As for the tools for collecting data, they are conducting personal interviews and field visits to the Child Assessment and Education Center in Kuwait, applying the McConnell Scale, one of the measures of social competence, and identifying the degree of school adaptation on them to analyze the answers statistically and graphically. And also for the theoretical side, its study tools were in books, magazines, and illustrated, paper or electronic references to collect information on how to develop and propose a cognitive behavioral program to acquire social skills for students with learning difficulties.

But the researcher will list both tools in detail:

In addition to the study's reliance on the Walker-McConnell scale of social competence and school adaptation, auxiliary tools were used for the measure, namely: the peer assessment model as well as the training program, and we discuss in the following each of these tools in some detail:

First: The Walker - McConnell Scale of Social Adequacy and School Adjustment (Elementary Level):

The goal behind the Walker & McConnell scale is to identify students who need to receive training that develops their social skills, in addition to counting the total skills that students find difficult to practice, and the Walker-McConnell scale is one of the measures that serve as a tool; It would assess the effectiveness of intervention programs for developing social skills. The Walker-McConnell scale is concerned with testing and measuring adaptive behavior and social competence. As for adaptive behavior, it is measured through some practices for a number of basic skills within the classroom, independently, while social competence is clustered in a number of basic skills that maintain the process of interaction with between different classroom students.

This scale includes 43 positive paragraphs, in the process of giving a description of social skills, so that the responses of individuals are measured after each paragraph, according to what is known as the response scale, which consists of a five-letter gradient that contains (never, rarely, sometimes, often, always), so that These items are distributed within the scale on three dimensions, which are the most preferred social behavior on the part of teachers, the social behavior favored by friends, as well as school adaptation.

Second: the peer recognition model:

The peer assessment model was used as one of the study tools aimed at determining the student's social standing in the classroom. To find out if he is facing issues related to inadmissibility, neglect, or popularity, then students with low peer grades can be identified; In order to enroll them in the training programs to develop social competence, the researcher also re-applied the above-mentioned model after receiving the training program; In order to know the extent of the effectiveness of this program in terms of developing students' social competence.

Third: the training program:

The goal of the (Next Step) program is to develop social and emotional skills, as it is one of the basic skills of the child, and it also helps him achieve his successes within the framework of the social relationships that he forms with his colleagues, and children from kindergarten to the grade can benefit from this program. (Frey &Hirschstein, 2000)

There are a number of tools that the trainer uses when using the next step program, and they are as follows:

1- Identification cards of the main and subsidiary dimensions: the training program is divided into three dimensions, namely emotional assimilation, impulse control and ability to resolve problems, in addition to anger management, and each card for any of these dimensions includes theoretical information, as well as goal information, and what each dimension requires Of skills, as it contains the titles of the meetings; To receive those training sessions.

2- Picture cards: Each coach uses a picture card with a number of large-sized color photos; to express certain social interactions between the characters of the pictures, and at the back of each card are recorded goals, terms, as well as strategies, questions that should be asked, or discussions, in addition to role-playing situations.

3- Classroom posters: These posters provide support that contributes to a visually necessary calming strategy, in addition to the steps by which social problems can be solved. These posters deal with anger management strategies, and each student of the trainee is provided with his own copy of these posters.

4- Watching video TV: During some training meetings, video shows were exposed; the story and discussions benefit the session.

5- The family and the training program: Through the training program, work is done to highlight the importance of the family and the roles it plays in this framework. Whereas, worms have a major role in developing the social and emotional skills of their children, and the effectiveness of the program increases if the parents join the process of participating in the goals of the program at home, by strengthening the social skills that occur at home, as well as what requires different situations, and the training sessions deal with a dedicated

part To direct messages to parents; In order to include the total skills that their children need to be trained on, in addition to the need to record observations related to the child's performance at home.

The study sample:

The study included 56 individuals divided into 26 male students, and 29 female students with learning difficulties at the Child Assessment and Education Center in Kuwait, and that sample enrolled in the third grade of primary school, and they were classified as low in their social level according to the Walker-McConnell scale, which is one of the measures of adequacy. This sample was chosen based on what the classroom teachers nominated, in addition to the pupils' beliefs from their peers, and the following are the steps on the basis of which the members of that study were selected:

1- The total number of schools with learning difficulties in the Capital Region of Kuwait was enumerated in the first region, specifically what includes the third grade mainly, provided that it is mixed.

2- Working on choosing the school through the simple random method, and then the choice fell on the Mixed Child Assessment and Education Center, and thus choosing the sample from its students.

3- Through the use of the Walker-McConnell scale of social competence and school adaptation, it was applied to all students in the third grade of the Basic Mixed Child Assessment and Education Center, and it included 280 male and female students, and the scale was based on the assessment of classroom teachers, and their own view on social behavior and school adjustment For third graders; As each teacher was directed to a request containing a description of what was concluded after observing the social behavior of each group of children, one group consisted of 4 or 5 children, and that was over two days, after which they were able to fill in the scale data, and accordingly, a teacher was awarded Each class has its own estimates of the social behavior of about (39-41) students, which represents the number of students within each class. The final score of the scale was reached, after applying it to a total of 280 male and female students, with an estimated (43-215) mark, and then working on arranging these students in descending order, according to their grades, and in order to identify the lesser students in terms of social competence. The standard approved by each of (Beebe-Frankenberger, 2005 Lane, Bocian, Gersham&Macmillamn) has been used, and according to this criterion, between (15% to 20%) of school students need addition programs. Concerned with equipping their social skills; As everyone who obtained a score of less than 20% was considered among the lowest in terms of social competence.

4- In the next step the researcher worked on distributing the peer assessment form to all third-grade students, and there were a number of instructions that every student must adhere to, and these instructions include the following:

- The list contains the names of colleagues in a row, and each name in front of it has numbers ranging from 1 to 3, and then each student must choose No. 1 in the event that he does not prefer playing with the name's owner, or put a circle around No. 2 when it is a matter of playing with This fellow is normal for you, as for choosing No. 3, it is due to the case that the child prefers and likes to play with this colleague, taking into account that none of the signs in front of the front of the signs have chosen the name of the student who fills out the list. Explain and clarify all instructions.

5- After the step of obtaining peer ratings, the researcher met with the classroom teachers, in the presence of the school principal, and clarified the meaning and concept of social competence, and what are the

behaviors indicating it, and directed them to a request to observe those behaviors of each group of children x through a number of Social interaction situations, and thus referring to the student who is noticed to have a decrease in the level of social competence, or who has less friendships, as well as those who have no friends.

6- A list was prepared that includes the names of students who were classified according to two of the criteria that we discussed earlier, provided that the classification based on the Walker-McConnell scale is one of the two criteria, and the results are as shown below:

- The classification of 10 students matches the Walker-McConnell scale of social competence and school adaptation, in addition to their compatibility with the criterion of nominating female teachers.

- 21 male and female students applied in the classification according to the Walker-McConnell scale, as well as with the standard of grading their peers in the same semester.

- However, there were 25 male and female students who matched their classification under the Walker-McConnell scale, in addition to the criteria for teacher nomination and peer evaluation. Consequently, according to the three criteria, students with low levels of social proficiency were reached, and their number was estimated at 56 male and female students.

7- After selecting and identifying the students, they were divided randomly into two groups, one of them experimental and the other control, and each group consisted of 28 students and Table (3) deals with the distribution of study members according to the group variable and gender.

Study application procedures:

The study was applied within the framework of a number of steps, which are listed as follows:

- Preparing the Walker - McConnell scale of social competence and school adaptation, ensuring the psychometric characteristics of this scale, and working on applying it to a survey sample, in addition to working on preparing the training program, and testing its validity.

- Approval of the Ministry of Education in Kuwait to allow the implementation of both the scale and the program within a school at the Child Education and Assessment Center in Kuwait.

- Obtaining permission from the school administration itself; Its consent to implement the program at the school, during official times; So that two meetings were arranged every week for the experimental group, during the second semester of the academic year 2005/2004.

- Then the study sample was divided into two groups randomly, which are the experimental group and the control group.

- Later on, the training program was implemented by the researcher, by the second semester of the year shown above, for a period that lasted up to 11 weeks, and was conducted through two meetings every week for the experimental group, and the first week of those meetings was a prelude.

- This step is the process of applying the telemetry through the use of two tools, namely (Walker - McConnell scale, and the peer assessment model), on all the sample members within the framework of that study.

In the end, a number of statistical analyzes were carried out; In order to analyze the hypotheses on which the study is based, in addition to revealing the results.

III. Discussing and analyzing the results of the study:

The study was conducted with the aim of identifying the results and effects of using a training program, on the extent to which the social competence of students who suffer from lack of these levels, and enrolled in the third grade, was developed, in addition to the effect of this program on the rise of peer assessments related to participation in play.

To achieve these goals, and to test the extent of the program's impact and effectiveness, in the framework of its application, the Walker-McConnell scale of social competence and school adaptation, in addition to the peer assessment model on two groups (experimental - control), was employed as a measure before and after the implementation of the program.

In the context of the study, the researcher also tried to answer some questions, which are:

3. How effective is the training program, which takes a course of controlling and modifying cognitive behaviors, in affecting the social competency skills of third-grade students?

4. What is the impact of this training program to increase the grades obtained by peers regarding the participation of students of the same class in play?

The answer to the first question necessitated that the arithmetic mean and the standard deviation of students 'performance be calculated before and after applying the Walker-McConnell scale of social competence and school adaptation, and this is evident in the following table:

Table (1) the arithmetic means and standard deviations of the performance of the members of the two experimental and control groups on the Walker - McConnell scale of social competence and school adaptation

Dimension	Group	Pre		Post	
		Mean	S.D	Mean	S.D
Favorite social behavior of teachers	Experimental	17.39	4.20	24.03	5.21
	Control	19.07	4.24	16.67	3.55
Peer favorite social behavior	Experimental	42.89	7.96	67.10	15.81
	Control	53.10	9.57	45.89	8.68
School adaptation	Experimental	24.78	6.62	39.50	10.33

	Control	29.64	9.01	28.82	6.79
Total	Experimental	85.07	15.76	130.64	29.01
	Control	101.82	18.31	91.39	16.92

The table highlights some differences between the performance of the experimental and control groups, in relation to the total score, as well as the dimensions of the sub-dimensions of the social competency scale and school adaptation, and the results came in favor of the experimental group, and in order to ascertain the significance of these differences, an analysis of common variance (ANCOVA) was used.

The results also revealed a clear effect between the pre and post measurement. Where the value of "F" symbolizing the pre-measurement, which relates to dimensions represented in (the most preferable social behavior of teachers, social behavior favored by peers, as well as school adaptation, and the overall score) reached, respectively, (18.5-8.34-7.09- 15.41).

Also, there was a difference between the two groups according to the same dimensions. This was evident in the statistical values "F", which came as follows (60.46-51.53-29.08-63.67), and all are statistically significant at the 0.05 level.

In order to determine the positions of the significant differences between both groups, and based on the effect of the pre-measurement on the dimensional measurement, the means were calculated after adjusting, in order to arrive at the effect of the pre-measurement on the dimension and define it within the framework of all dimensions, and Table (2) includes these modified averages, in addition to The standard error of the dimensions of the scale of social competency and school adaptation, and after the overall score.

Table (2) adjusted performance means* on the overall score of the Walker-McConnell scale and its sub-dimensions

Dimension	Group	Mean	S .Error
Favorite social behavior of teachers	Experimental	24.48	74
	Control	16.23	74
Peer favorite social behavior	Experimental	69.83	2.4
	Control	43.16	2.45
School adaptation	Experimental	40.42	1.60

	Control	27.89	1.60
Total	Experimental	136.16	4.22
	Control	85.86	4.22

After exposure to this table, it can be concluded that the modified means of the experimental group are higher than those of the control group, which indicates the effectiveness of the training program, in terms of developing the social competence of third-grade students, who share poor levels of proficiency.

In order to answer the above-mentioned second question, arithmetic means were calculated, as well as standard deviations, and also an analysis of the common variance of students' grades within the peer rating model was made, and both Table (3) and Table (4) reflect these results.

Table (3) the arithmetic means and standard deviations of the pre and post measures on the peer assessment form

Groups	Pre		Post	
	Mean	S.D	Mean	S.D
Experimental	60.37	11.55	62.20	14.64
Control	62.42	9.84	45.95	11.21

It is evident from Table (3) that the arithmetic mean of the control group reached (62.42) for the pre-measurement, while it was estimated at (45.95) for the members of the same group in the post measurement, that for the arithmetic mean of the experimental group members, it was (60.37) when the pre-measurement, While it reached (62.20) when measuring the post measurement, and it is worth noting that there was a difference between the arithmetic mean between the experimental and control groups in the process of conducting the post measurement, and to make sure that this difference is statistically significant, a common variance was made, as shown in Table (4).

Table (4) Results of the analysis of covariance for the peer assessment model between members of the experimental and control groups

Covariance source	sum Squares	D.F	Means of Squares	F value	sig

Pre	4159.08	1	4159.08	44.05	*0.000
group	4582.42	1	4582.45	48.53	*0.00
Error	5192.33	53	94.40		
Total	13933.84	55			

Table (4) expresses the existence of a statistically significant difference, with the peer rating model. The statistical value "P" reached (48.53), a value that is at the level of (0.05). Looking again at the arithmetic means, we find that there is an increase in the rate of peer evaluation when expressing their desire to play with members of the experimental group, which is means an effect of the effectiveness of using the training program; for students to gain more acceptance from their classmates.

After exposure to all of the above, and after the results of the statistical analyzes were determined from: calculating arithmetic averages, standard deviations of the pre and post measurement, as well as analysis of common variance (ANCOVA), a statistically significant difference at level # was detected between the experimental and control groups, In favor of the experimental group, based on the overall score of the Walker-McConnell Scale of Social Adequacy and School Adjustment.

This is in addition to the presence of statistically significant differences at the level of significance # between the two groups, according to the peer assessment model for preference for playing with these students, and it came in favor of the experimental group.

IV. Discussing the results:

The reason behind the superiority of the experimental group is due to the implementation of the training program, which aims to develop social competence, but the results of the study included more support for the effect of this training program, on the development of social skills, previous studies have revealed in this context the contribution of training programs to modify behavior And enhancing the acquired skills of the trainees, which can then be generalized in the face of various other situations, which means achieving more acceptance by peers, i.e. reducing social hostilities. (Elliot et al., 2001), and the following are a number of factors that can explain the high rates of social acceptance of the experimental group, as:

A. The training program simulates an organized experience, on a number of individuals who were found to have a direct need to obtain that training.

B. Training experience is a relatively new experience; Because it is considered unfamiliar with the academic education that children receive throughout the study period, which indicates the novelty of this program in the framework of the topics it addresses, and how it is presented as well.

C. This program creates an opportunity for students to participate, to delve into the issue of acquiring and identifying various skills.

D. The activities and tasks of the program, in addition to the roles and positions that were practiced within its framework, were characterized by high rates of attractiveness, and compatibility with the characteristics of individuals from the study sample.

E. The program provided support for the family's role in developing their children's skills in social terms by introducing parents, in a written style, to the objectives of the training program, as well as the skills that the program intends to impart to students.

The following are some of the recommendations proposed by the researcher regarding the study's findings:

1. Researchers and those interested in psychology conduct research and studies aimed at evaluating the impact and effectiveness of training programs in improving the child's social competence in the long term, instead of stopping and stopping efforts at the point of obtaining the effectiveness of training programs in the short term.

2. The design of training programs concerned with developing social skills that differ from those targeted by that study; For example, these programs are implemented independently, or within the framework of some specific academic subjects.

3. Obtaining the maximum possible benefit from all procedures and activities that have been activated for use in this study, to be included in the school curriculum; which increases the effectiveness of the learning and teaching process.

References:

1. Al-Rimawi, Mohamed Odeh (2003). Psychology of development and adolescence. Jordan, House of the March for Publishing and Distribution.
2. Hallahan, Daniel; Lloyd, John; Kaufman, James; Weiss, Margaret (2001) Learning disabilities:
3. Mr. Ibrahim Al-Samadouni (1991): Scale of Social Skills, Cairo, The Anglo-Egyptian Library.
4. Safia Muhammad Jaidah (1991): The Effectiveness of a Counseling Program for the Development of Social Skills among Elementary School Children, an unpublished Master Thesis, College of Education, Ain Shams University.
5. Al-Qatawneh, Yahya Hussein (2001): Building a behavioral training program and measuring its effectiveness in developing social skills and self-esteem among hearing-impaired students in Jordan, unpublished PhD thesis, Amman Arab University, Amman, Jordan.
6. 31. The Effectiveness of Using a Cognitive-Behavioral Therapy Program in Developing Emotions and Emotions in Autistic Children and Their Parents - PhD 2002

7. Ibrahim, Saada (1991): *Modifying Some Characteristics of Social Behavior in Children with Learning Difficulties*, Unpublished Master Thesis, Faculty of Education, Tanta University, 1991.
8. Abu Al-Saud, Nadia (2002): *The effectiveness of a cognitive-behavioral treatment program in developing feelings and emotions in children with autism and their parents*, unpublished PhD thesis, Ain Shams University.
9. Abu Hassouna, Nashaat (2001): *The Impact of a Social Skills Training Program in Improving Self-Perception, Social Competence, and Achievement of Students with Learning Difficulties*, Unpublished PhD Thesis
10. Abu Helw, Nehme (2008): *Social skills and decision-making ability among women leaders in Palestinian civil society*, unpublished MA thesis, Al-Azhar University, Gaza, Palestine.
11. Abu Shendi, Yousef (2015): *The feeling of psychological loneliness and its relationship to some variables among students of Zarqa University*, *Journal of the Association of Arab Universities for Education and Psychology*, 13 (14), 181-. 212
12. Abu Ali, Abd Ali (. 2012). *The effect of a counseling program in reducing the feeling of social isolation among first-grade students of the secondary stage in Jordan*. Doctor thesis. College of Education, IbnRushd, University of Baghdad, Iraq.
13. Abu Fakhr, Ghassan (2001) *Special Education for the Child*, Damascus University Publications, Damascus, Syria.
14. Abu Mualla, Taleb (2006): *Social skills, self-efficacy and their relationship to the trend towards the nursing profession for students of nursing colleges in the Gaza Strip*, unpublished master's thesis, Al-Azhar University, Gaza, Palestine.
15. Abu Mansour, Hanan (2011): *emotional sensitivity and its relationship to social skills among the hearing-impaired in Gaza governorates*, unpublished master's thesis, Islamic University, Gaza, Palestine.
16. Ahmed, Arafat Salah Shaaban (2001): *The Effectiveness of Some Behavioral Therapy Techniques in Modifying the Social Skills of Children with Learning Difficulties*, Unpublished PhD Thesis, Ain Shams University, Cairo, Egypt.
17. Bakhsh, AmiraTaha (1991): *The effectiveness of a social skills development program in reducing aggressive behavior among mentally retarded children who are able to learn*, *Journal of Educational Sciences*, Issue 21 (1): 91-
18. Al-Batayneh, Osama; The surgeon, Abdel Nasser; Ghawanmeh, Mamoun (2001) *Psychology of the Extraordinary Child*, Dar Al Masirah, Amman, Jordan.
19. Turki, Jihad (2001). *The Effectiveness of a Cognitive Behavior Program in Developing Self-Regulatory Skills for Children with Learning Difficulties and Its Relation to Their Classroom Behavior*, PhD Thesis, Amman Arab University for Graduate Studies, Amman, Jordan.

20. Al-Turki, Salih (2000): The Effectiveness of a Training Program for Some Social Skills in Modifying the Behavior of Social Withdrawal among a Sample of Primary School Students, Unpublished Master Thesis, College of Education, King Saud University, Kingdom of Saudi Arabia.
21. Jaber, Jaber, Abdel Hamid, Omar, and Mahmoud, Ahmed (1989): emotional sensitivity of a sample of primary and middle school students in the State of Qatar and its relationship to both psychological unit and academic achievement, *Psychological Studies Journal*, 26 (12), 30-42.
22. Gabriel, Mustafa (1991): Some psychological and social characteristics of people with learning difficulties among middle school students, *Journal of the College of Education, Mansoura University*, Issue 31, pp. 3-59
23. Goleman, Daniel (2000): *Emotional Intelligence*, translated by Leila Al-Jabali, The World of Knowledge 262, National Council for Culture, Arts and Literature, Kuwait.
24. Gildard, Catherine; Gildro, David (2002): *Psychological Counseling for Children "An Applied Perspective,"* translated by Samira Abul-Hassan (2005) The Supreme Council of Culture, Cairo, Egypt.
25. Hafez, Nabil (2000): *Learning Disabilities and Curative Teaching*, First Edition, Zahraa Al Sharq Library, Cairo, Egypt.
26. Habib, GamalShehadah (1997): *Environment, People and Social Service*, Cairo: Marnia House for Printing.
27. Al-Humaidhi, Ahmad (2004): The effectiveness of a behavioral program for developing some social skills among a sample of mentally retarded children who are able to learn, an unpublished master's thesis, Naif University for Security Sciences, Kingdom of Saudi Arabia.
28. Al-Khatib, Jamal (1991): *Behavior Modification*, Printing Press Workers Association, Amman, Jordan.
29. Al-Khatib, Jamal (2001): *Teaching People with Special Needs in Regular Schools*, 1st Edition, Dar Al-Awael Publishing and Printing, Amman, Jordan.
30. Al-Khatib, Jamal; Al-Hadidi, Mona (2005) *Introduction to Special Education*, Hanin House for Publishing and Distribution, Amman, Jordan.
31. Dabbash, Ali, Musa, and Ali (2011): The effectiveness of proposed programs to alleviate social anxiety among secondary school students and its impact on self-esteem, an unpublished master's thesis, Al-Azhar University, Gaza, Palestine.
32. Radwan, SamerJamil (2009): *Clinical Psychology, Models of Psychiatric Disorders in Childhood and Adolescence*, University Book House, United Arab Emirates.
33. Al-Zarrad, Faisal (2005): *Cognitive-behavioral psychotherapy for cases of obsessive-compulsive disorder, anxiety, and phobia*, Dar Al-Alam for the Millions, Beirut, Lebanon
34. Al-Zayyat, Fathi (1989): A study of some emotional characteristics of people with learning difficulties among elementary school students, *Umm Al-Qura Journal*, No. 2, pp. 118-196.

35. Al-Zayat, Fathy (1998): *Learning Difficulties: Theoretical, Diagnostic and Therapeutic Foundations*, Cairo, University Press, first edition.
36. Al-Saeed, Khaled (2005) *Diagnosis of reading difficulties in fourth grade of primary school and the effectiveness of a proposed treatment program*, PhD thesis, Damascus University, Damascus, Syria.
37. Al-Saqa, Sabah (2005): *The Effectiveness of a Cognitive-Behavioral Treatment Program in Reducing the Severity of Depression Symptoms*, Unpublished PhD Thesis, College of Education, Damascus University, Damascus, Syria.
38. Soliman, Abdul-Rahman (2001): *Psychology of people with special needs (characteristics and features)*, first edition, Zahraa Al-Sharq Library, Cairo, Egypt.
39. Al-Sayed, Abdel-Hamid (2000): *Learning Difficulties*, 1st Edition, Arab Thought House, Cairo, Egypt.
40. Shehadeh, Hussam (2012): *Effectiveness of an educational program using Psychodarma in developing some social skills among introverted children*, an unpublished master's thesis, College of Education, Islamic University, Gaza, Palestine.
41. Shawky, Tarif (1998): *Self-affirmation: An introduction to developing personal competence*, Dar Gharib, Cairo, Egypt.
42. Sheibi, Al-Jawhara (2000): *Psychological Unit and its Relationship to Personal Traits in a Sample of Female Students at Umm Al-Qura University*, Unpublished Master Thesis, Umm Al-Qura University, Makkah Al-Mukarramah, Saudi Arabia.
43. Saleh, Saleh (2002): *Social isolation and its relationship to social skills and social support among university youth*, *Journal of the College of Education*, 12 (52), 123-142.
44. Sayah, Mansour (2005), *differences in the level of information processing between pupils with reading comprehension difficulties and ordinary students at the elementary stage in the Kingdom of Bahrain*, PhD thesis, Damascus University, Damascus, Syria.
45. Al-Zahir, Qahtan (2001): *Learning Difficulties*, First Edition, Wael Publishing and Printing House, Amman, Jordan.
46. Abd, Syed (2000): *Research in social and personality psychology*, Cairo: Dar Gharib for printing, publishing and distribution.
47. Abdul-Rahman, Al-Sayyid (1998), *Study in Mental Health and Social Skills*, *Psychological Independence*, Volume (2), Cairo: Dar Quba for Printing, Publishing and Distribution.
48. Abdul-Rahman, Muhammad Al-Sayed (1998): *Studies in Mental Health*, Cairo: Dar Quba.
49. Irfan, Zidan, and Khalil (2001): *Cognitive behavioral therapy in the service of the individual and alleviating the severity of social and psychological problems for female students residing in university cities*, an unpublished master's thesis, Institute of Educational Studies, Cairo.
50. Al-AqeebSaad Bin Misfer (2003): *Extra-curricular activities and social skills for university students*. *Journal of Social Work*, 21 (10), 47-137.

51. Al-Akkari, Omar (2010). The effectiveness of a training program based on the theories of multiple intelligences for students with numeracy learning difficulties to improve the skills of solving arithmetic problems, Master Thesis, University of Damascus, Damascus, Syria.
52. Allam, Arhab (2008): *Social Skills in Our Contemporary Lives*, Cairo: Dar Gharib for Printing and Publishing.
53. Ali, Khadija Hamou (2012): Psychological unit and its relationship to depression in a sample of elderly people residing in care homes with their families, an unpublished master's thesis, College of Social Sciences and Humanities, visiting visitor.
54. Ali, Salah (2005). *Difficulties in Learning Reading and Writing: Diagnosis and Treatment*, Al-Falah Library for Publishing and Distribution, Amman, Jordan.
55. Al-Omari, Hassan (2013): Indicators of stability and veracity reported for the Scale of Social Skills of Students on Jordanian Samples, *Journal of Educational and Psychological Sciences*, 14 (2), 25-42.
56. Al-Faouri, Ayham (2010) Study of the prevailing thinking styles of students with learning difficulties in mathematics, MA thesis, Damascus University, Damascus, Syria.
57. Farag, Shawky (2003): *Social and emotional skills*, Cairo: Dar Gharib for printing and publishing.
58. Al-Quraiti, Abd al-Muttalib Amin (2005): *The psychology of people with special needs and their education*, House of Arab Thought, Cairo, Egypt.
59. Qatarneh, Dalamah Muhammad (2014): *The Effectiveness of a Cognitive Behavioral Group Counseling Program in the Development of Some Social Skills among a Sample of Juveniles in Southern Jordan*, an unpublished Master Thesis, College of Education, Mutah University, Jordan.
60. Al-Muhareb, Nasser Ibrahim (2000): *A Guide in Cognitive Behavioral Therapy*, King Fahd National Library, Kingdom of Saudi Arabia.
61. Al-Mashat, Hoda (2008): The relationship between the behavior pattern of isolation, social skills and self-efficacy among a sample of female students in the College of Teachers 'Numbers, Jeddah Governorate, *Journal of Education Sciences*, Cairo University, 4 (2).
62. Al-Mutawa, AmnaSaeed (2001): *Social skills and emotional stability among pupils of depressed mothers*, unpublished master's thesis, Cairo University, Cairo, Egypt.
63. Al-Mutawa, Umniah (2001): *Social skills and emotional stability among students who are children of depressed mothers*, an unpublished master's thesis, Institute for Educational Studies, Cairo.
64. Al-Ma'aniMaysoon, Dhari, and Karim (2002): *Academic achievement and its relationship to isolation behavior and the counseling needs of female students in distinguished schools and their comparisons in other regular schools*, an unpublished master's thesis, College of Education, for girls, University of Baghdad, Iraq.
65. *Its Concept - Its Nature - Therapeutic Learning*, translated by Adel Abdullah Muhammad, Dar Al Fikr, Amman, Jordan.

66. Malika, Lewis Kamel (1990): Behavioral Therapy and Behavior Modification, Dar Al-Qalam Publishing and Distribution, Kuwait, Kuwait.
67. Mansour, Talaat and colleagues (2003): Foundations of General Psychology, The Anglo-Egyptian Library, Cairo.
68. Al-Nefaiei, Fuad (2009): Social skills and self-efficacy among a sample of outstanding and ordinary high school students in Jeddah, Umm Al-Qura University, Makkah Al-Mukarramah, Saudi Arabia.
69. Haroun, Salih (2000): Teaching People with Simple Disabilities in the Regular Class, First Edition, Dar Al Zahraa for Publishing and Distribution, Riyadh, Saudi Arabia.
70. Hallahan-Daniel B., Kaufman-James M. (2005): Learning difficulties: their concept - their nature - curative education, translated by: Adel Muhammad, House of Thought, Amman, Jordan.
71. Hallahan, Daniel; Kaufman, James (2006) The Psychology of Extraordinary Children, translated by: Adel Muhammad, Dar Al Fikr, Amman, Jordan.
72. Hindi, Muhammad Sa`idSalama (2003): The Effectiveness of a Cognitive-Behavioral Treatment Program in Alleviating Depression in Children, Unpublished PhD thesis, AinShami University, Cairo, Egypt.
73. Al-Waqi, Radi (2003) Learning Difficulties: Theoretical and the Applied, Princess Tharwat College Publications, Amman, Jordan.
74. Wahba, Hoda (2010): Social Skills and their Relationship to Symptoms of Psychological Loneliness in Adolescents, Unpublished Master Thesis, Faculty of Arts, Helwan University, Egypt, Cairo.
75. Yahya, Khawla (2006) Educational programs for individuals with special needs, Dar Al Masirah, Amman, Jordan.