CHAPTER VI

SUMMARY AND CONCLUSIONS
Preadolescence has been recognized as a significant stage for learning new social skills in the socialization process. The impact of peer group influences in patterning social behaviors of the preadolescent is well documented (McCandles, 1969). The concept of Social acceptance appears to have special relevance for this group, as preadolescents begin to establish social relationships and social norms independent of parental control. Social isolation experienced during this stage is found to have a lasting effect on personality development and later adjustment (Waldrop and Halverson, 1975). Several studies on elementary school children have led Gronlund (1959), Kundu and Maite (1979) and others to conclude that social isolation is indicative of severe emotional disturbance.

Since the works of Moreno (1934), social acceptance has been assessed by peer group evaluation of a member given in terms of choice preference for varied social activities. In many studies, social acceptance is recognized as a key factor in group dynamics and interpersonal relationships. Social acceptance is found to be related to factors like ability to meet the needs
of others, initiative, independence, sociability, ego strength, social adjustment, self concept, social maturity, interpersonal skills, communicative skills, social cognitive skills and opportunity to interact with others. Hence, any programme designed to enhance social acceptance would involve plans for improving these related aspects and the validity of such a programme could be assessed by the extent to which gain on Social Acceptance is accompanied by gain on these aspects of personality.

A review of studies in the area of small group interaction methods indicates that activity groups, social skills training, and transactional analysis groups are the major effective procedures with preadolescents. Role play and simulation games are widely used in all these methods. But in very few studies have the relative merits of these procedures emerging from different theoretical orientations been compared. None of these studies have been designed to explore the differential effects these procedures may have on groups differing in a number of personality and demographic variables.

Dearth of such studies on Indian children needs special mention in the context of concentrated efforts of the government to restructure the objectives of education and educational policies (Ministry of Education, 1985).
In view of the above observations, the present study was undertaken to develop packages of programmes along different group counseling approaches and to investigate the effects of such planned small group interaction procedures on Social Acceptance and related variables like Self-Esteem, Adjustment and Personality factors.

The secondary objective of the study was to determine the influence of factors of Self-concept, Socio-metric status, Age-grade, Sex and Socio-economic status on Treatment effects. The influence of the timings of intervention programme on treatment effects was also studied. Null hypotheses were formulated with regard to the influence of these independent variables on treatment effects.

A quasi-experimental approach was followed with a factorial design. One of the main independent variable was the four experimental treatments - the small group interaction procedures based on different theoretical orientations. The treatment groups consisted of subjects exposed to concepts of transactional analysis or social skills - forming two types of psychological intervention, a placebo activity group for measuring the Hawthorne effect and a no-contact control group to check practice and maturational effects on dependent variable measures. The design involved multiple groups as several other
independent variables like Sex, Standard of study, initial level of Self-esteem and Socio-economic status were included in the study. Subjects forming homogeneous blocks on these independent variables were randomly assigned to the four treatments. The differences in performance of the subjects prior to and after the intervention programme (gain score) on measures of Social Acceptance and related variables were treated as the dependent variable measures.

The sample was drawn from registered English medium primary schools in the Bangalore South range specified by the Directorate of Public Instructions, Government of Karnataka. Sociometric questionnaires were administered to 1,744 boys and girls in sixth and seventh standards of eight primary schools. Out of these, 643 children were selected on the basis of their sociometric scores, as belonging to four categories of sociometric status: Accepted, Rejected, Isolated and Mixers. In the final analysis the responses of 499 children - 224 girls and 275 boys were included.

Following scales were used as measures of social acceptance and related variables.

1. Sociometric questionnaire (Adapted from Peery's Model, 1979).

2. 'Who are they?' questionnaire (Havighurst and King, 1953).
3. Teachers' questionnaire for individual differences in the social behavior of children (Adapted form of Roper and Hinde, 1979).


5. The Battery of Preadolescent Personality tests (Pareek, et al., 1975).


In addition, an information schedule was used to obtain data on demographic details. The above questionnaires gave scores on a total of twenty six variables.

The questionnaires were selected and adapted where necessary and reliability and validity of the tools for the present sample were assessed on the basis of information gathered in the pilot study. The activities and exercises for different types of intervention were also selected on the basis of the pilot study.

The study was carried out in five stages. In the first stage, two sociometric questionnaires were administered in classrooms of the selected sections of eight schools. On the basis of the scores obtained by the students, four groups of subjects - accepted, rejected, isolates and high social impact groups - were selected for the study. In the second stage, the selected
questionnaires were administered to these subjects in four sessions. Responses of the subjects to the tests were obtained in groups of twenty to thirty, by two research assistants (postgraduates in psychology trained for the purpose). School teachers in charge of most of the selected sections in each school were contacted and their ratings of subjects on items of 'Teachers' questionnaire for individual differences in social behaviour of children were obtained.

In the third stage of the study, subjects were assigned to the four experimental treatments and their respective sessions of intervention programme were held. Kelman's (1963) objectives for group therapy were kept in view while developing the intervention programmes. Exercises, games and home assignments were used in the two treatments involving psychological intervention. Children knew that their performance would be periodically assessed for improvement in participation, by other group members and that there were prizes for improved participation and performance.

The first treatment group - the TA group - was exposed to the concepts of transactional analysis through exercises and games. T.A. provides a cognitive framework to understand and interpret the behaviour of self and others. The plan emphasised structural analysis with
the introduction of concepts of Parent, Adult and Child ego states and the need to shift from one ego state to the other. Analysis of games, transactions and rackets were also introduced. Importance of strokes, feeling of O.K.,ness and avoidance of collecting stamps were emphasised. The exercises were mainly based on the exercises given by Freed and Freed (1977). Introductory statements and illustrations were drawn from the works of Berne (1961), James (1975) and James and Jongward (1971).

The second treatment group - the Social Skills Practice group - was exposed to a few social skills recognised as components of effective social interaction. The major areas introduced through exercises and role play were participation in groups, communication, social problem solving, interpersonal relations, self assertion, self-evaluation, accepting responsibility for self, recognition of alternate modes of action and relaxation. These exercises were drawn mainly from the works of Johnson, et al., (1974), Hendrick and Roberts (1977), Grove (1976) and Spivack, Pratt and Shure (1976).

The placebo activity groups were conducted with the assistance of teachers. Children in this group were included in sports teams and they practiced the games once a week. They were included in the school band/singing or drama groups. As a team, they supervised one aspect of the arrangement for the school exhibition
or prepared models/charts. They participated in a question quiz for groups and group games.

The no-contact control group participated in pre and post intervention testing sessions. These children were not involved in any activity except for their normal interactions in school.

At the end of the 24 intervention sessions in each school, subjects were assessed again on the selected questionnaires in the fourth stage of the study. As before, sociometric questionnaires were administered in the classrooms of the selected sections of eight schools.

In the fifth stage of the study, comparison of scores obtained on the pre and post intervention assessments was made for the different groups. Treatment effect was assessed by the gain score (post intervention test score minus pre intervention test score) for each individual. Suitable statistical techniques were applied to test the null hypotheses set up with regard to the influence of several independent variables on the dependent variable measures that were considered in the study. Analysis of the data has led to the following findings:

1. The intervention programmes have brought about significant changes in many of the dependent variable measures.
(a) Significant changes noticed in the group exposed to the concepts of Transactional Analysis were:

1) an increase in peer nominations on Social Acceptance and teacher ratings of Sociability;

2) a decrease in peer nomination on items indicating Rejection, Aggressive Maladjustment and Social Isolation;

3) an increase in Adjustment, Classroom trust and Initiative on Preadolescent Test Battery and Self-Esteem on Children Self-concept scale;

4) an increase in scores suggesting changes toward sociability (Factor A), higher scholastic mental capacity (Factor B), emotional stability (Factor C), assertion and independence (Factor E), venturesome and spontaneous behavior (Factor H) and controlled and socially precise behavior (Factor Q₃) was noticed on CPQ. There was also a decrease in scores on this questionnaire suggesting a decrease in excitability (Factor D), doubting and obstructive behavior (J), Shrewd and calculating behavior (N), apprehension and worry (O) and tense reaction (Q₄).
(b) Significant Changes noticed in groups exposed to Social Skills Practice were:

1) a reduction in peer nominations of Social Isolation;

2) a decrease in teacher ratings on Aggression;

3) an enhanced positive Self concept;

4) greater independence, Classroom trust and Initiative;

5) an increase in warm hearted, outgoing, participating behavior (Factor A), scholastic mental capacity (Factor B), emotional stability (C), realistic and self reliant behaviour (I), self assured and secure response (Q₃), relaxed responses (Q₄), and a decrease in doubting and restrained behaviour (J).

(c) In the Placebo activity control group significant changes noticed were:

1) higher Self esteem;

2) an increase in Classroom trust and Initiative;

3) an increase in participating and outgoing behaviour (Factor A), scholastic mental capacity (B), emotional stability (C), natural and forthright behaviour (N), self assured and secure responses (Q) and relaxed behaviour (Q₄).
Children also tend to be less excited and impatient (D) and less restrained (J).

(d) In the No-Contact control group there was -

1) a decrease in peer nominations on Aggressive Maladjustment and Social Acceptance;

2) a decrease in Adjustment and an increase in Initiative, and

3) an increase in Self Esteem.

II. Significant differences in treatment effects on dependent variable measures as indicated by the F-ratios suggest the following:

a) Compared to other intervention programmes, exposure to concepts of Transactional analysis was more effective in bringing about changes (PAAS) suggestive of Self adjustment, self assured and secure behaviour (Factor 0), venturesome and spontaneous behaviour (H), reduced tension (Q4) and a decrease in excitation and impatience (D).

b) Compared to other procedures, social skills practice was more effective in bringing about changes suggestive of a decrease in teacher rating of Aggression, Increase in Initiative,
Warm hearted and outgoing behaviour (Factor A), and realistic and self reliant behaviour (Factor I).

c) The factor of emotional stability and ego strength (Factor C) was influenced more by Placebo activity.

d) In the No-Contact control group, the changes in the favourable direction noticed in the three variables, viz., Aggressive Maladjustment, Self-Esteem and Initiative were less compared to the remaining treatments. Further, a decrease in Social Acceptance and Adjustment was also noticed.

III. Subjects at different levels of sociometric status were found to differ in their reactions to treatments. Compared to other groups, very few changes were noticed among the 'Accepted' and maximum changes were noticed among the 'Rejected'. The significant 'F' ratios obtained from a two way ANOVA of gain scores for the effects of treatment and sociometric status suggest the following:

a) With regard to the two measures of Social Acceptance based on peer nominations, the 'Accepted' group showed a decrease in scores while the 'Rejected' and the 'Isolates' showed an increase in scores after intervention.
b) In the case of measures of Aggressive Maladjustment and Rejection, the 'Isolates' showed an increase in peer nominations after treatment while the 'Rejected' and the 'Mixers' showed a decrease in these scores.

c) Teacher ratings on Sociability improved significantly in the case of the 'Isolates' and the 'Rejected'.

d) All the groups, except the 'Accepted', showed improvement on Initiative.

e) With regard to the factors of CPQ, the maximum gain was shown by the 'Rejected' group on factor A (warm hearted, outgoing) and by the 'Mixers' group on factor B (Scholastic mental capacity). On factor H the 'Accepted' group showed a decrease in score (Shy and Restrained) while the 'Isolates' group showed an increase (venturesome and socially bold). The 'Accepted' also showed a decrease in scores on factor I (Self reliant and realistic).

f) Interaction effects of Sociometric Status and Treatment appeared to be significant on four of the variables.

1) The treatments TA and SSP have brought down the score on peer nomination of Rejection in the 'Rejected' group. The 'Accepted' showed an increase in score with TA and NC treatments.
while the 'Isolates' showed an increase with all the treatments. A decrease in score was found among the 'Mixers' with TA.

2) The group differences noticed in the gain score on peer nominations on Aggressive Maladjustment were: the 'Rejected' group showed a decrease in score with TA, SSP and PC treatments; the 'Isolates' showed an increase in score with TA, PC and NC; the 'Mixers' showed a decrease in score with TA and NC, and the 'Accepted' showed a non-significant positive gain.

3) The gain scores suggested an increase in score on factor C (Ego strength and emotional stability) among the 'Accepted' with treatment SSP, among the 'Rejected' with TA, SSP and PC and among the 'Isolates' with TA. While the 'Mixers' showed an increase in score also with NC, the 'Accepted' and the 'Rejected' showed a decrease.

4) For factor D (Excitable, impatient), the least effective treatment was SSP. The 'Accepted' as compared to others showed a greater decrease in score on the factor with treatments TA and SSP.
IV. a. Subjects with 'high' and 'low' levels of initial Self-Esteem did not show significant differences in their gain scores except the gains on five variables - Self-Esteem, Initiative and CPQ factors E, F and Q₃. While the group with Low Self-Esteem showed a higher gain on the variables Self-Esteem and Initiative, the 'High Self Esteem group showed a higher gain on factors E (assertive, independent) and Q₃ (controlled, socially precise). In the case of factor F (sober - happy go lucky) the two groups differed in the direction of their gain.

b. The interaction effect of treatment and initial level of Self-Esteem was found to be significant for two of the factors of CPQ. When exposed to the concepts of TA both the 'high' and 'low' groups on Self-Esteem showed an increase in venturesome and socially bold behavior (factor H). They also showed a reduction in tense and driven behavior (factor Q₄) with PC. Further, on factor H, the LSE showed a decrease in score with SSP and HSE with PC. In the case of factor Q₄, the LSE showed a decrease in score with PC and HSE with SSP.
V. Sex differences were noticed in the gain score on teacher rating of Aggression, Adjustment and CPQ factors C (ego strength and emotional stability), G (super ego strength), J (doubting and restrained behavior), O (apprehension and worry), Q3 (Controlled and socially precise response) and Q4 (tense and driven behaviour).

Boys responded more favourably to the intervention programmes compared to the girls and maximum improvement on most of the factors was found with the Treatment TA.

VI. Children from the two standards — sixth and seventh — were found to differ in their gain scores on ten of the dependent variable measures as indicated by the significant 'F' ratios for two way analysis of variance of gain scores. The details are as given below:

a) In the peer nominations of Social Acceptability the older group showed an increase, while the younger group showed a decrease, especially with PC. In the teacher rating of Sociability an increase in scores was seen with all the treatments in the older group, but the younger group showed no significant increase.

b) Social skills practice was more effective in decreasing the teacher rating of Aggression, especially in the younger group. On this factor the younger group responded more favourably than the older to the three treatments – TA, SSP and PC.
c) SSP was more effective in reducing the scores on Dependency and in increasing the score on Initiative as measured by the Preadolescent Test Battery. The older group was better with regard to Dependency measure and the younger on Initiative.

d) The two groups differed in their performance on factors A (outgoing, warm hearted), C (Ego strength), D (Excitation and impatience), G (Super ego strength) and N (Shrewd, calculating). The younger group showed a higher gain on factors A and G and a decrease on factors D and N. The older group exceeded the gain of the younger group on factor C.

e) The interaction effect of the two variables - Treatment and age, was significant on CPQ factors G, H and J. The gain score of the younger group on factors G and J was higher with treatments SSP and PC, where as, the gain score of the older group was higher with TA. The older group of children also showed a significant decrease in score on factor J (doubting, restrained) with PC. In the case of factor H (venturesome, socially bold), only the older group showed an increase in score with TA.
VII. Children attending two different types of schools - indicative of upper middle and the lower middle class socio-economic status of their parents - differed in their performance on few of the variables.

a) Peer nominations on Aggressive Maladjustment and Social Isolation were found to have decreased to a greater extent in type II school (Higher SES). TA was more effective in bringing down the score of both the groups.

b) The score on teacher rating of Aggression was decreased in type II and was increased in type I schools (Lower SES). In both groups decrease in score was more with SSP.

c) The two groups differed in their performance on CPQ factors A, D and H. Higher gain in type II was noticed on factor A, and in type I, a higher decrease was noticed on factor D.

d) Interaction effect of the two variables, viz., Treatment and Type of school, was found to be significant on Adjustment, Initiative and on factors B, C and J.

In type II school (Higher SES), subjects were more influenced by TA and SSP. The influence of placebo activity was found to be more on the gain scores in
the type I schools.

VIII. The intervention programmes held during the holidays were found to be most effective and the ones held during the second term were least effective especially in enhancing the scores on sociometric variables.

IX. The effects of interaction of the variables Treatment, Sociometric status, Sex, Class and Socio-economic status were found to be significant mainly on the gain scores of Sociometric variables.

X. a. The difference in the gain scores between the two sexes noticed at the two Age-grade levels were found to differ on PAIQ and CPQ factors N and Q_3. While significant differences in the gain scores of the two sexes were not noticed at the seventh standard level on factors N and Q_3, these differences were found to be significant at the sixth standard level with girls showing a greater decrease. In the case of PAIQ, girls showed a higher gain at the sixth standard level and boys at the seventh standard level.

b. The difference between the two sexes in terms of gain scores noticed in the two types of schools were found to differ on TQ-Agg, PAAS and CPQ.
Boys of the type II schools showed a greater decrease in Aggression, while the scores were found to increase to a similar extent in the remaining groups. While there was no significant variation in the gain scores of the two sexes on Adjustment (PAAS), Assertion (factor E) and Scholastic mental capacity (factor B) in type II schools, the girls in type I schools showed a decrease and boys an increase after intervention. While all the groups except girls of type II schools showed significant decrease to a similar extent in the score on factor D (excited, impatient), the only significant gain noticed on factor H (venturesome, socially bold) was in the case of boys in type II schools.

Social Acceptance as measured by the two sociometric questionnaires and the teacher ratings of Sociability have significant positive correlations which indicate the reliability and validity of the measures. Social Acceptance was also found to be related to Self-Concept, Adjustment, Classroom trust and Initiative. Significant positive correlations were found between Social Acceptance and factors B, C and Q3 of CPQ.

Social Acceptance was found to have negative correlations with factor O of CPQ and with measures of Rejection and Aggressive Maladjustment.
Isolation was found to have a negative correlation with Self-Esteem.

The results obtained in this study were discussed in the light of observations made by earlier investigators pertaining to the areas of (1) effect of intervention programmes, (2) cultural and social group differences in the effects of intervention programmes, (3) different patterns of responses of sociometric groups, (4) developmental changes during preadolescence and (5) problems involved in the assessment of gain score.

The practical implications of the study and the scope of further research in the area were also delineated. Findings of the present study emphasise on the following:

1. Importance of involving the 'Isolates' and the 'Rejected' in extra-curricular activities of the school for their social growth.

2. Importance of providing opportunities for role play and analysis of peer behavior along a cognitive or transactional analysis model in
order to facilitate personality growth.

The changes noticed on the variables like scholastic mental capacity, classroom trust, initiative and self-dependency are suggestive of the influence of intervention programmes on scholastic achievement.