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Using a Social Skills Group to Develop and Maintain Relationships

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Acknowledgements

How do I begin to describe this fascinating journey that has come to a close? I can remember walking into Self in Society not knowing what to expect. I had heard rumblings from others that this course would change my life. I heard from others that I would learn things about myself that I did not already know. I could not have imagined how right those people were. Throughout this entire program I have learned new and exciting things about myself. Throughout this program I have grown tremendously, not only as a student, but also as a person and colleague. I have met amazing people and have had the opportunity to learn something from each one of them. There are numerous people that I can thank and credit for my success.

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Abstract

This research investigated the relationship between social skills groups and the promotion of adolescent friendships in girls. All participants were identified as lacking social skills and having no friends. Each week of group focused on a different social skill and included a skill-basked activity. Each participant rated their social skills and capabilities by completing a survey developed by the researcher during the initial group session in a pre and post test. Results indicated that participant's social skills increases by the final group session. The discussion focuses on implications for further research as well as limitations to this research.

Adolescent development is a widely researched topic. The development of early adolescent friendships has been included in the research done on adolescent development. Adolescence is a time in development marked by biological, cognitive, and social changes (Biggs, Greenhoot and Vernberg, 2000). Theses changes can make it difficult for adolescents to build meaningful relationships. During this time some girls utilize social skills groups in school or in the community to support them in their friendship making skills. In these groups, girls are provided the necessary skills needed to build and maintain long lasting friendships. Below you will find results based on a study conducted with girls who participated in a social skills group. The participants of the group have been identified as girls who have difficulties building relationships. The group focused on enhancing the girls' social skills and supported them in building and maintaining friendships. Each group session focused on a different skill and provided the girls an opportunity to develop and practice those skills. The skills practiced during the twelve week period were: initiating conversations, nonverbal communication, friendship makers, friendship breakers, positive friendship qualities, negative friendship qualities, listening, observation, friendship do's, and friendship don'ts. Each participant completed a friendship survey during the initial group session and the exact survey during the final group session. It is important to know what is effective in helping girls build friendships during this complicated phase in their life.

<div align="center">Review of the Literature</div>

Adolescent female development has been widely research especially in the context of adolescent female friendships. The literature on adolescent friendships including group therapy ranges from adolescent development to group development and structure. According to Brendt (1982) adolescent friendships have a major affect on the development of an

adolescent's personality, social skills, and social behavior. Developmental Psychologists widely

agree that peer friendships are critical to adolescent development (Barr, 1997). Adolescent

female development also includes puberty and the effect that has on how females develop and

form relationships. During puberty girls often go through a process of transformation where

their minds and bodies begin to change (Crosnoe, 2007). Biddle et al. (2004) stated that

adolescence is a period when girls strive to create an identity for themselves. This identity

conforms to the requirements of self, peer, cultural standards, and the physical self. This all

provides the possibility of projection of the adolescent's identity into the public domain.

During the period of adolescence, girls begin to form more intimate and close

relationships. These relationships are crucial to the development of self. Parents play a crucial

role in facilitating these relationships. Briggs, Greenhoot, and Vernberg (2006) suggested that

parents can move the process of adolescent friendship development along by meeting other

parents and encouraging the adolescents to interact with one another. Briggs et al also felt that

adolescents who have poor family relationships tend to have strained relationships with peers.

How adolescent girls develop friendships is also widely researched. The development of

adolescent friendships is spoken in terms of how adolescents choose their friends. Masson and

Verkuyten (1996) suggested that adolescents choose friends primarily on the basis of personality

characteristics and dispositions. Barr (1996) stated that youth develop friendships in childhood

within their already established peer groups. During this time children begin to engage in same-

sex, best friend relationships.   These relationships are typically used by the child to promote the

development of personality and self (Barr, 1996).

Intimacy and closeness in adolescent friendships is key in the sustainment of that

particular relationship (Berndt, 1982). Berndt suggested that the concept of intimacy is used to

refer to any and all features of a relationship that make it seem close or intense. Shechtman et al. (2005) suggested that close friendships are a unique developmental task distinguishable from general peer relations. Sharabany (1994) suggested that intimacy is defined as a unique relationship, including components of frankness, spontaneity, sensitivity and empathy, liking and feeling close, exclusivity, giving, sharing and the ability to count on help, common activities, and trust and loyalty. At theses difficult times in an adolescent's life, friendships can offer potential benefits of support, the mutual exploration of identity, a sense of closeness, and a channel for expressing emotions (Cooper & Cooper, 1992; Reis and Shaver, 1988).

Biggs, Greenhoot, and Vernberg (2006) suggested that a constellation of adolescent characteristics may affect the development of close friendships. Adolescents tend to "hang out" with friends whose behaviors mirror that of their own (Bates, Dodge, Laird & Petit, 1999). Adolescents who engage in negative behavior, such as, drinking, smoking, and drug use will have close relationship with other adolescents who participate in the same behaviors (Bats, Dodge, Laird and Petit, 1999). Friends are also similar in their school attitudes, their educational aspirations, and their actual achievement (Berndt, 1982). Adolescents have a need for agreement between friends when it comes to schooling, if friends have different attitudes or values regarding school achievement, they are likely to have frequent conflicts with each other (Berndt, 1982).

Girls with Attention-Deficit/Hyperactivity Disorder (ADHD) tend to develop and maintain relationships different than girls who do not struggle with ADHD. Symptoms of ADHD are long lasting, pervasive and offer developmentally extreme difficulties in hyperactivity, impulsivity, and inattention (Blachman & Hinshaw, 2002). Girls with ADHD tend

to be to be subjected to peer rejection, therefore making it more difficult for those children to make and maintain friendships (Blachman & Hinshaw, 2002)

Yalom (2005) suggested that there are eleven elements of group therapy including: instillation of hope, universality, imparting information, altruism, family recapitulation, developing of socializing techniques, interpersonal learning, cohesiveness, catharsis, existential factors, and imitative behavior.

Adolescent Development

Berndt (1982) stated that friendships during adolescence have a major influence on the development of personality, social skills, and social behavior. Berndt suggested that there are three general types of explanations for the special significance of early adolescent friendships. First, adolescence traditionally has been defined as beginning with the onset of puberty. Puberty is physiological event that profoundly transforms the human body. Yet, the significance of this event extends far beyond the physiological or biological into the social and psychological domains of the early life course (Stattin and Magnusson, 1990). Cavanagh, Riegle-Crumb, and Crosnoe (2007) determined that when girls undergo puberty the changes that their mind and bodies go through shapes their sense of self as well as their social relationships.

Puberty in girls, a time when their bodies are changing is related to higher levels of problem behaviors, such as drinking, smoking, and sexual activity. That is, early maturing girls are more likely to be embedded in social contexts that offer them opportunities to engage in riskier behaviors. Because these girls have had less time to integrate healthy coping skills needed to manage adolescence, they negotiate these opportunities often without the socio-emotional resources they need to make healthier choices (Cavanagh 2004; Haynie, 2003; Jessor & Jessor 1979). The biological changes associated with puberty may be troubling or disturbing to

adolescents, they may turn to friends for assistance in understanding and adapting to them. Puberty has been shown to be a time when sedentary behavior patterns change. Changing body compositions during adolescence may be a correlate of such behavior changes via its association with self-esteem. During free-time it is common to choose behaviors that increase or maintain positive self-esteem. This may be achieved by behaving in such a manner that maximizes positive, and minimizes negative, feelings of physical self-worth (Murdey, Cameron, Biddle, Marshall, & Gorely, 2004). Biddle et al. (2004) stated that adolescence is a period when individuals strive to create an identity for themselves that conforms to the requirements of self, peer, and cultural standards, and the physical self provides the projection of this identity into the public domain.

Berndt (1982) suggested that the social environment of the early adolescent is different from that of the child or later adolescent. Social relationships are transformed as adolescents acquire greater independence. Briggs, Greenhoot, and Vernberg (2006) described the adolescent years as being a period of growing autonomy and independence; however, they went on to say that many adolescents continue to depend on their parents for support, particularly in times of transition and stress. Berndt (1982) stated that cognitive attributes continue to develop during adolescence. He presented that adolescence acquire a new consciousness of self and of their own identity, a more sophisticated understanding of other people and events, and greater skills in the logical analysis of ideological positions and social institutions. Berndt (1982) went on to say that adolescents' cognitive ability are likely to affect their friendships as well. For example, adolescents should be more able to understand their friends' thoughts and feelings and be more aware of the importance of mutuality or reciprocity in friendships.

Blackmore (2008) provided research on adolescent brain development, which can also affect adolescent friendships. According to Blackmore (2008), until recently there had not been a lot of research done on adolescent brain development, especially the social brain. There has been a handful of new magnetic resonance imaging (MRI) studies looking at the development of the human adolescent brain. There was also information provided related to the changes occurring in several areas of the cortex, which is directly related to the social brain (Blackmore, 2008).

Bates, Dodge, Laird, and Petit (1999) all suggested that peer relationships in childhood and adolescence play an important role in desirable and undesirable developmental outcome. Information on whether a child has friends, the quality of the child's peer relationships, and the identity of the peers all contribute to understanding the developmental implications of peer relationship experiences (Bates, Dodge, Laird, & Petit, 1999).

Characteristics specific to Adolescent Girls

Nilan (1991) felt that friendships among adolescent girls have traditionally been characterized by parents, teachers, and educational researchers as fundamentally different from friendships between adolescent boys. Explanations for the difference in friendships between boys and girls have tended to emphasize perceived irrationality, obsessiveness, jealousy, and the importance of the "best friend" (Nilan, 1999).

Promotion of Adolescent Friendships

Briggs, Greenhoot, and Vernberg (2006) contributed adolescence having difficulty maintaining friendships to poor familial relationships. Adolescents who experience poor familial relationships may not have the support and assistance of their parents needed to make new friends and problem solve about friendship issues. Parents can also facilitate adolescents making

new friends by meeting other parents and providing opportunities for their adolescent to socialize

with other peers (Briggs, Greenhoot & Vernberg, 2006). Siblings provide another potential

support to adolescents in making friends (Briggs, Greenhoot & Vernberg, 2006). Being

engaging, considerate of others, and mindful of social cues can lead to acceptance by peers,

maladaptive behaviors such as aggression, withdrawal, or depressive symptoms can lead to

rejection by age mates (Briggs, Greenhoot & Vernberg, 2006).

Development of Adolescent Friendships

Friendships differ in form, content, and meaning depending on age, in contrast to children,

adolescents see friendships more as a stable relationship in which loyalty and trust are important

(Masson & Verkuyten, 1996). Masson and Verkuyten (1996) suggested that adolescents choose

friends primarily on the basis of personality characteristics and dispositions. Developmental

Psychologists widely agree that peer friendships are critical to adolescent development (Barr,

1997). Kon and Losenkov (1978) stated that it is important to look at adolescent friendships in

terms of developmental psychology. Peer relationships are more symmetrical in terms of

authority, knowledge, and skills than are adult-child relationships (Barr, 1997). Barr suggested

that young people learn from one another in crucial ways that are different from the ways in

which they learn from relationships with adults. The need for an alter ego and the individual's

propensity for social interaction are closely related to the development of self-awareness (Kon &

Losenkov, 1978). The study of age related criteria and the functions of friendships and its place

among other interpersonal relationships helps in understanding the deep-rooted processes of

personality formation (Kon & Losenkov, 1978). Kon and Losenkov (1978) found it critical to

mention that friendships are an important socio-psychological phenomenon, the study of which

is imperative for an understanding of the nature of interpersonal attractions, the relationship of sexual and nonsexual attachments, and related dynamics.

Barr (1997) stated that experiences within childhood peer groups are central to personality development and lay important foundations for later, more intimate peer relationships, the friendships of early adolescence. Barr (1997) described the vital role of peer relationships in personality development during what he calls the "juvenile era" (6-9 years of age), which, he wrote "represents the child's first big plunge into socialization," as he or she enters school and is exposed to children with ways of behaving different than those learned in the home. Relationships with peers during the "juvenile era" provide the opportunity to balance out whatever limitations or peculiarities characterize socialization in the child's family, and to learn social accommodation, a simply astounding broadening of the grasp of how many slight differences in living there are; and how many of them do not seem to be right, but nonetheless how unwise one is to attempt to correct them (Barr, 1997). Adolescent learn how to compromise, cooperate, and compete that necessary for forming a sense of belonging within peer groups (Barr, 1997).

Friendships have also been investigated in relation to ethnic preferences and cross-ethnic relations (Masson & Verkuyten,). Masson and Verkuyten (1996) stated that friendship is seen as an indicator of group differentiation and ethnic identity. Various cultural differences may exist including differences in the meaning of friendships and the norms and values guiding friendship behavior (Masson & Verkuyten). From a cross cultural perspective, friendship or intimate relationships in general, are very scarce indeed (Masson & Verkuyten, 1996).

Youth develop friendships in childhood within their peer groups, friendships in early adolescence are of a different nature (Barr, 1996). Barr (1996) stated that during late childhood

or early adolescence children begin to engage in same-sex, best friend relationship that is suffused with the youth's deepest emotions. Youth have distinct attachments to their caregivers, but the emotional bonds between very close early adolescent friends can provide a secure base form which youth can explore new ways of thinking, feeling, and behaving (Barr, 1997). These types of relationships offer qualitatively different opportunities for psychosocial growth than earlier friendships or adult-child relationships (Barr, 1997). In friendship literature it is argued that there is a fundamental need for consensual validation, which is satisfied by means of having friends with similar characteristics (Masson & Verkuyten, 1996). Masson and Verkuytn (1996) suggested that similarities can be detected in many different areas; there could be similarities in ethnicity, religion, race, achieved attributes, personal beliefs, attitudes, abilities, and values. In some cultures there is more emphasis placed on the impression of others, and less attention placed on personal and individuating features, such as, physical attraction (Masson & Verkuyten, 1996).

Bramley and vanKraayenoord (1993) stated that adolescence is a time of great conformity and extreme sensitivity and self-consciousness about real or imagined differences or failings. The formation of friendships with peers from school, the neighborhood, and through cultural or recreational activities is generally accepted as being a normal part of the average adolescent's life (Bramley & vanKraayenoord, 1993). The development of these types of friendships and acceptance by a group of peers can be seen as part of a social and emotional process whereby young people gradually move towards independence and away from family and parental influences (Bramley & vanKraayenoord, 1993).

Intimacy and Closeness in Friendships

Intimacy in close relationships has been defined in several different ways (Berndt, 1982). Berndt (1982) suggested that the concept of intimacy is used to refer to any and all features of a relationship that make it seem close or intense. Shechtman et al. (2005) suggested that close friendships are a unique developmental task distinguishable from general peer relations. It differs from social acceptance and social status in the sense that it requires relational competence defined as the ability to handle oneself skillfully when dealing with intimacy, privacy, and trust. Intimate friendships are defined by intimate self disclosure, the sharing of personal or private thoughts and feelings with friends. The actual knowledge of personal and private information about a friend, such as the friend's worries, fears, or personality traits also define self disclosure (Berndt, 1982). Sharabany (1994) suggested that intimacy is defined as a unique relationship, including components of frankness, spontaneity, sensitivity and empathy, liking and feeling close, exclusivity, giving, sharing and the ability to count on help, common activities, and trust and loyalty. These components have been found in many types of intimate relationships, including couples, parent-child relationships, and close friendships. Close friendships are rendered necessary for the happiness and physical and emotional well-being of all human beings, particularly at times of difficulty in the life of many young people (Myers, 2000; Seligman & Csikszentmihalyi, 2000). At theses difficult times in an adolescent's life, intimate friendships can offer potential benefits of support, the mutual exploration of identity, a sense of closeness, and a channel for expressing emotions (Cooper & Cooper, 1992; Reis & Shaver, 1988). Many adolescents have difficulty establishing and maintaining a close friendship, even when they demonstrate social skills. This is particularly true of boys, but is also true of girls. Research has also shown that girls are more intimate than boys in their relationships and that this trend

begins in pre-adolescence and goes through late adolescence (LeCroy, 1986; Sharabany,

Gershoni, & Hoffman, 1981).

Intimate friendships emerge during early adolescence and some children may form

intimate friendships during the years just before puberty (Berndt, 1982). Berndt (1982) also

noted that some children form these intimate type friendships later in life. Comments about the

intimate sharing of thoughts and feelings with friends increase dramatically between middle

childhood and early adolescence, references to intimacy do not occur most frequently in early

adolescence, however, they are even more frequent after age sixteen (Berndt, 1982). Before

young people are able to share their thoughts and feelings with a friend and respond

appropriately when the friend shares with them, children must be able to keep their own views

and another person's views in mind at the same time (Berndt, 1982). Berndt (1982) stated that

during early adolescence children achieve a level of being able to share personal information

with a friend. Adolescents also need friends to help them cope with sexual impulses sexual

drives, and sexual energy that begin at the onset of puberty (Berndt, 1982). Berndt (1982)

suggested that during intimate conversations, adolescents can express their feelings about the

changes that they are experiencing and receive the friends' advice and support. Intimacy is

especially important in early adolescence because impulses and drives are most intense during

this period (Berndt, 1982). Berndt (1982) stated that developmental changes in the intimacy of

friendships appear to be related to cognitive development, because early adolescents with

greater cognitive ability have more intimate knowledge of their friends, they may also be related

to changes in social environment during early adolescence. Berndt (1982) also suggested that

intimate conversations with friends can contribute to adolescents' self-esteem or, to the

validation of self-worth by showing adolescents that another person respects their ideas and

wants their advice. Intimate adolescent friendships can contribute to the development of social skills and the sense of security that are necessary for intimate relationships later in life (Berndt, 1982). Intimate conversations with friends may also reduce adolescents' fears and anxieties about the physical and emotional changes that occur during early adolescence and, therefore, improve their actual adjustment (Berndt, 1982). Adolescent friendships differ in form, content, and meaning depending on age (Masson & Verkuyten, 1996). Masson and Verkuyten (1996) stated that adolescents view friendships more as stable relationships in which loyalty and trust are important. It is also assumed that adolescents choose friends based primarily on the basis of personality characteristics and disposition (Masson & Verkuyten, 1996

Competition in Friendships

The responsiveness of friends to each other's needs and desires has usually been equated with the degree to which they share and help each other (Berndt, 1982). During middle childhood, friends and non friends are more likely to compete than to help each other (Berndt, 1982). During this stage children become sensitive to their friends' needs only when they have developed an intimate friendship (Berndt, 1982).   Intimate friends try to maximize each other's happiness and assure that their interactions will be mutually satisfying.

Characteristics of Adolescent Friendships

Biggs, Greenhoot, and Vernberg (2006) suggested that a constellation of adolescent characteristics may affect the development of close friendships. Adolescent confidence and ease in social situations will influence the way in which adolescents build relationships (Biggs, Greenhoot & Vernberg, 2006). Adolescents tend to "hang out" with friends whose behaviors mirror that of their own (Bates, Dodge, Laird & Petit, 1999). Adolescents who engage in negative behavior, such as, drinking, smoking, and drug use will have close relationship with

other adolescents who participate in the same behaviors (Bats, Dodge, Laird & Petit, 1999). To go one step further, adolescent female relationships have been characterized as "bitchy". Adolescent females are also involved more frequently in two-person relationships (Nilan, 1991). Qualities of dyadic friendships in particular are important for adolescents' social adjustment (Bates, Dodge, Laird & Petit, 1999). Companionship, lack of conflict, support, security, and closeness are some of the qualities that are important in dyadic friendships (Bates, Dodge, Laird & Petit, 1999). Dyadic friendships characterized with high levels of companionship, support, closeness, and security and low levels of conflict are expected to provide adolescents with the social support and intimacy needed in times of crisis as well as with opportunities for spending time with peers and learning to solve peer relationship problems constructively (Bates, Dodge, Laird & Petit, 1999). Friendships among antisocial adolescents have been found to be of lower quality than friendships among less antisocial adolescents (Bates, Dodge, Laird & Petit, 1999).

Adolescent group relationships have also been identified and looked at by researchers, Bates, Dodge, Laird, and Petit. Group relationship qualities are similar to dyadic friendship qualities in that they focus on the attachment to, and potential support received from, the group (Bates, Dodge, Laird & Petit, 1999). The association between group relationship qualities and adjustment are more tentative, because fewer empirical studies have explored those relationships. Adolescent adjustment has been associated with: whether adolescents believe themselves to be members of a group, how involved and attached the adolescents feel to a particular group, and how important the group is to the adolescent (Bate, Dodge, Laird & Petit, 1999). Adolescents who belong to a group and who feel valued by the group are likely to have a more positive self-image, greater self-confidence, and well developed interpersonal skills in comparison to

adolescents who do not belong to a group or who feel they are not valued by fellow group members (Bates, Dodge, Laird & Petit, 1999).

Berndt (1982) found similar characteristics between friends in personality, and social behavior. During adolescence, similarities between friends make it easier to achieve an intimate relationship. Friends' similarities may also reflect an intolerance of differences between people at these ages (Berndt, 1982). Berndt stated that on the other hand, early adolescents sometimes are described as choosing friends with complementary interests and traits, friends whom they can idealize or friends who engage in behaviors that fascinate them but that they are afraid to perform themselves. Berndt also found that early adolescents who are friends appear to be similar to their friends in two general classes of attributes and behaviors, school and their orientation toward contemporary teen culture.

Friends are similar in their school attitudes, their educational aspirations, and their actual achievement (Berndt, 1982). Adolescents have a need for agreement between friends when it comes to schooling, if friends have different attitudes or values regarding school achievement, they are likely to have frequent conflicts with each other (Berndt, 1982). Adolescents with similar views of school are likely to have more pleasant interactions and more stable relationships (Berndt, 1982). The other similarity that can result in positive friendships is the similarity toward contemporary teen culture. Friends who like the same music, have similar taste in clothes, and enjoy the same kinds of activities are likely to have positive experiences with one another (Berndt, 1982). Berndt suggested that if an adolescent drinks alcohol or uses drugs, her friends are likely to do so as well. The similarity between friends on these attributes and behaviors indicates their importance in early adolescents' lives; adolescents who disagree about these matters probably will not become friends (Berndt, 1982).

Similarity in friendships can develop during the course of friendships and as friends influence each other's interest and behavior (Berndt, 1982). The selection of friends similar to oneself and the development of similarity through social influences cannot be distinguished in cross-sectional studies, but may be distinguished in a longitudinal study (Berndt, 1982).

Patterns of Friendship of Girls with ADHD

Symptoms of Attention-Deficit/Hyperactivity Disorder are long lasting, pervasive and offer developmentally extreme difficulties in hyperactivity, impulsivity, and inattention (Blachman & Hinshaw, 2002). Blachman and Hinshaw suggested that children with ADHD are more likely to be subjected to rejection of peers, therefore making it more difficult for those children to make and maintain friendships. Children with ADHD have a difficult time controlling their attention as well as their disruptive behaviors (Blachman & Hinshaw, 2004). This type of peer rejection occurs almost immediately upon social interaction (Erhardt & Hinshaw, 1994). The most commonly used treatment for children with ADHD is psychopharmacology as well as some sort of psychosocial intervention. These interventions are used to decrease negative social behavior, but they have more limited impact on daily peer interactions (Blachman & Hinshaw, 2004). The seemingly inflexible peer problems of children with ADHD remain an area of concern for researchers and clinicians, particularly in light of the stability of peer rejection (Coie & Dodge, 1983) and the great amount of evidence demonstrating the role that adolescent peer difficulties play in both concurrent and future maladjustment in such areas as mental health problems, delinquency, school failure and peer relationships (Kupersmidt, Coie, & Dodge, 1990). In addition to considering whether or not a child has friends, recent work has also examined key features of friendships, mainly, relationship quality and stability. Relationship quality, defined by the positive and negative features of a friendship (e.g., level of

intimacy or conflict; (Berndt, 1996, 2002), is essential, as the mere presence of a friend may not lead to positive adjustment outcomes (Hartup, 1996). Indeed, peer acceptance, having a friend, and friendship quality each uniquely predict feelings of loneliness (Parker & Asher, 1993). In addition, Oldenberg and Kerns (1997) found that peer popularity and friendship quality made independent contributions to depressive symptoms, particularly for girls.

Group Development

Therapy/counseling groups of an interpersonal or interactional (Yalom, 1985) type, appear to be a viable intervention to address the issues around intimacy and closeness in friendships (Shectman, Vuerebrand, & Hertz-Lazarowitz). Group intervention has been long recognized as a helpful prevention and intervention method to assist adolescents in making a transition from childhood to adulthood (Corey, 1990; Gladding, 1995; Hoag & Burlingame, 1997; Homes & Sprenkle, 1996; Rose, 1998). Shectman, Vuerebrand, and Hertz-Lazarowitz (1994) suggested that small therapy groups have the potential to provide a social climate of cohesiveness and belonging, feelings of acceptance, norms of self expressiveness and self disclosure, and the provision of constructive feedback that often to lead to positive interactions. Empirical research has pointed to the positive impact on group therapy on the development of a single intimate friendship (Schectman, 1991). Specifically, social skills groups provide children with the opportunity to discriminate features of their own and others' social behavior and then apply it to the newly acquired skills in naturally occurring situations (Walker *et al*., 1994). Groups involve peers both as a context for intervention and as an essential ingredient in accomplishing the goals of intervention (Gallagher, 1991). Schectman and Katz (2007) also suggested that treatment of social skills is usually carried out in groups. Schectman and Katz

(2007) stated that children with DSM-IV diagnosis have clear social difficulties that have been lessoned with the use of social skills groups.

Therapeutic factors are one of the essential aspects of group treatment processes. They explain how people are helped in group counseling (Shechtman & Gluk, 2005). Yalom (1995) delineated and described eleven therapeutic factors as essential elements of group promoted change, factors that are generally accepted by the professional community. The eleven elements include instillation of hope, universality, imparting information, altruism, family recapitulation, developing of socializing techniques, interpersonal learning, cohesiveness, catharsis, existential factors, and imitative behavior (Yalom, 2005).

Group Structure

Hargrave and Hargrave (1983) suggested that the best age range for pre-adolescents to participate in group therapy is between nine and twelve. They stated that within this age range is when children demonstrate the ability to use the group interaction and activities and gain the most therapeutic change. Hargrave and Hargrave (1983) also suggested that same-sex group for pre-adolescents are most effective in developing relationships, which is typically the goal of the group. The ideal size of the group would range from eight participants to ten participants with an ideal ratio of one leader to every three participants (Hargrave & Hargrave, 1983). The size of the group provides the participants the opportunity for self-expression and also providing a sufficient amount of participants for various activities (Hargrave & Hargrave, 1983). Having enough therapist to lead the group tends to decrease the amount of limit testing and allows the leader to attend to group process (Hargrave & Hargrave, 1983). Hargrave and Hargrave (1983) suggested that having too many leaders can result in adult-oriented group interaction that impedes on the interaction of the participants. Rose (1972) felt that it is important to screen participants for

group therapy in order to match the members up appropriately. This will allow members to have someone in the group that is similar than them and also have positive behaviors to imitate (Rose, 1972).

Group Activities/ Discussion

Group activities are designed to provide the member with opportunities to practice the learned skills in a variety of different ways (Hargrave & Hargrave, 1983). Hargrave and Hargrave (1983) suggested that skills gained in group sessions should be transferable to other settings. During group discussion or process participants are able to discuss general problems that have occurred during the week in between group (Hargrave & Hargrave, 1983). Hargrave and Hargrave (193) suggested that group members tend to enjoy doing this at the beginning of group so that they can hear what has happened with each group member during the week. Maintaining this ritual provides a safe, repetitive way to enter group and establishes closeness between members (Hargrave & Hargrave, 1983).

Method

Purpose/Demographics

This research was conducted to determine whether group therapy is effecting in helping girls build and maintain relationships. The group was comprised of four participants, all of which were identifies by their individual therapist as needed support around making friends. This research was conducted in an outpatient mental health clinic in the Northeast section of the country. The clinic works from multidisciplinary framework. The staff is made up of Psychologists, Psychiatrists, Nurse Practitioners, Licensed Practical Nurses, Licensed Clinical Social Workers, Licensed Mental Health Therapist, Mental Health Therapists, Licensed Art Therapist, Marriage and Family Therapists, and Psychology and Psychiatry Trainees, Fellows

and Interns. The clinic serves a wide population of youth. Patients ranged in ages from birth to eighteen-years-old. The patients also came from a number of different cultural backgrounds, races, ethnicities, socio-economic statuses, and geographical locations. All families participated in a phone screen prior to being selected into the group therapy program at the clinic. Once the phone screen was completed, families were assigned an individual therapist and then a group screen was conducted. Families who only wished to participate in group therapy were also required to go through a phone screen and then a group screen conducted by an assigned clinician. All families who only wished to participate in group therapy must have had an outside therapist so that individual and group services can be coordinated.

Participation

All group members were identified by their primary therapist and referred for group. All participants went through a screening process prior to being placed in a group. There were four members selected for this particular group. Three of the members were nine-years-old and only one member was ten-years-old. Each participant had their own DSM-IV-TR diagnosis. Three members were diagnosed with Attention-Deficit/Hyperactivity Disorder, and one member was diagnosed with Anxiety and Obsessive-Compulsive Disorder.

Procedures

A twelve week social skills group was conducted with four participants. The group ran from 5:30-6:30 every Tuesday for twelve weeks. These were structured groups lead by two co-leaders. Each week the members participated in a check-in, where they were asked to tell the group one "high" and one "low" for the week. A "high" is described as something that happened during the week that was particularly good. A "low" is described as something that happened during the week that was particularly bad. The participants were allowed to give a combination

of one "high" and one "low", two "highs" or two "lows". The group leaders did not participate in check- in due to time constraints.

After check-in, the group would complete the skill-basked activity for that week. The skill-based activities were related to the skill that was being taught in group that week. The skill-based activity ranged from games to role plays. All participants participated in the skill based activity and occasionally the leaders would also participate depending on the activity.

After the skill-based activity, group members were allowed five to seven minutes for choice time/practice in play. During this time the participants could choose to engage in any activity of their choice in the room. The room contained an easel for painting, paper for coloring, a doll house, a sand box and other various toys. During this time, the participants were also encouraged to interact with one another and practice their social skills.

After the choice time was finished, the members participated in feedback. Feedback was very structured and each member followed a script. The script for feedback was _____ can I please give you feedback? Once the participant received an answer they could then follow the remainder of the script. The last part of the script was: When you did_____, it made me feel_____. All feedback had to be positive at the request of the group leaders. Group leaders also participated in feedback. Member and group leaders were allowed to give feedback to one other member or the group as a whole.

Survey/Consents

The group completed a survey entitled "Friendship Survey" during the initial group session and the same survey during the termination session. The survey was a compilation of ten scaled questions developed by the researcher. The survey was developed using a Liker's Scale. The survey measured the participant's personal reactions to their own friendship skills. The

purpose of the survey was to determine whether the skills taught in group had an effect on how the members rated their friendship skills. The participants only needed a pencil or pen and the actual survey to complete the task. Members were given ten minutes to complete the survey, but all members were finished within five minutes.

Each participant required parental/guardian approval to participant in this research. All parents/guardians were required to sign a consent allowing their child to participate in the study prior to the initial session. Each member was also required to sign a consent form to participate in the research. Each member signed the consent during the initial session, prior to completing the survey.

Group Sessions

Each week focused on a different social skill. All participants were present for session one. During the initial session, the girls completed the consent forms as well as the friendship survey. The skill-based activity was a get to know you M & M game. The members had to pick an M & M from a cup and answer the question that corresponded with the color M & M that they chose. The group leaders also participated in this activity. Group members also developed a list of group rules during this session. The group rules were posted in the room for each remaining session.

The second session focused on providing each participant with skills on how to initiate conversations. Three out of the four members were present for this session. The girls were asked to role play different scenarios related to meeting new people. All the scenarios were produced by the leaders. The members took ten minutes to discuss and practice their role plays then they acted them out for the group leaders. After both role plays were completed, the girls processed the activity as a group.

Three out of four girls were in attendance for the third session. This session was dedicated to non verbal communication. Each member picked a feeling from a hat and had to act out that particular feeling without using words. The other members had to guess what that participant was feeling based on their non verbal's. Members took turns being the "actress". Each member got two chances to be the "actress". The group leaders did not participate in this activity. The group leaders processed as a group the importance of non verbal communication.

The fourth session focused on "friendship makers". Friendship makers are the characteristics that make a good friend. Girls were asked to identify all the characteristics that make a good friend and create a list of these characteristics. The group members had to compromise and agree on what to add to their list. The group leaders also added characteristics to the list. Group members then processed and discussed their list. The members talked about how important it was to have all the characteristics that were on the list. All members were present for this session.

The fifth session focused on the opposite of the fourth session. Group members were asked to develop a list of "friendship breakers". Friendship breakers are characteristics or qualities that can break a friendship or inhibit one from beginning. The members developed a list of friendship breakers. Members had to compromise and agree on what characteristics and qualities to add to the list. The group leaders participated in this activity. After the list was generated, the group discussed how to turn the "breakers" into "makers". All participants were present for this session.

The sixth session focused on giving others constructive feedback. Each member was given a task to give another member constructive feedback. The feedback was scripted and produced by the leaders. After each member gave their scripted constructive feedback, they then

had to come up with their own constructive feedback for another member. Each member had to run their idea by a group leader before giving their constructive feedback to make sure it was appropriate. One group leader was absent during this session, but all participants were present.

The seventh session was dedicated to teaching the members skills on perspective taking. Perspective taking was described to the members as walking in someone else's shoes. The members were given the task to brainstorm different perspectives on certain situations. The situations were provided by the leaders. All members were present for session seven.

Session eight was devoted to observation skills. Before completing the skill-based activity, the group discussed the importance of observation. The group thought that observation was important to determine how someone else was feeling. The skill-based activity was the observation game. One member left the room and changed one thing about her. The other members had to guess what was different about that member once she came back into the room. Each member had an opportunity to leave the room and change something about her. The group leaders did not participate in this activity, but one leader did accompany each member when they left the room to change something about themselves. Each member was in attendance for session eight.

Session nine focused on listening skills. Prior to completing the skill-based activity, the group discussed how to listen and the importance of listening when others are talking to you. The group, including the leaders played the game "telephone". A phrase was started by one of the group members and whispered to each group member going in a circle. The group played four rounds of telephone and then processed the activity as a whole. Group members discussed their frustrations around not being allowed to repeat the phrase. All members were present for session nine.

Session ten was dedicated to using the appropriate tone of voice. Group members were asked to pick a feeling and a phrase from a hat. Each member was directed to say the phrase that they chose using the tone of voice they chose. The other members had to guess what feeling was trying to be represented. A group leader demonstrated the activity for the members, but did not participate in the guessing of the feeling. One member and one leader was absent for this session.

Session eleven was dedicated to problem solving. Members worked in dyads to solve a problem given to them by the group leader. Each dyad came up with several ways to solve the problem and then presented it to the entire group. Each dyad worked together with one group leader. All members were present for this session. This session was also used to discuss termination and plan for the last session.

Session twelve was termination. During this session members were asked to give feedback to other member related to something that they were going to remember about that member. Participants also made memory pages related to group and the other members. Group members passed their memory pages around and each member and leaders were able to write a message to that person. Once all members had an opportunity to write a message to all the other members, participants were allowed to decorate their memory pages, using markers, crayons, colored pencils, and stickers. Members were also given a snack during this session provided by the group leaders. There were only three members present for this session. One member had a planned absence.

Results

The hypothesis of this research suggested that adolescent girls who participated in a social skills group would gain important friendship skills and therefore form positive relationships with peers. Each participant rated themselves prior to learning the social skills

taught in the group and again after the group was completed using the same survey. The results

for the pre-test questions are represented in tables 1 and 2. The results were gathered by using

the mean of all participants' responses to each individual question on the survey. The mean then

was represented as the percentage of participants who agreed to each question. The results are

represented using the mean percentages out of a total of 5%.

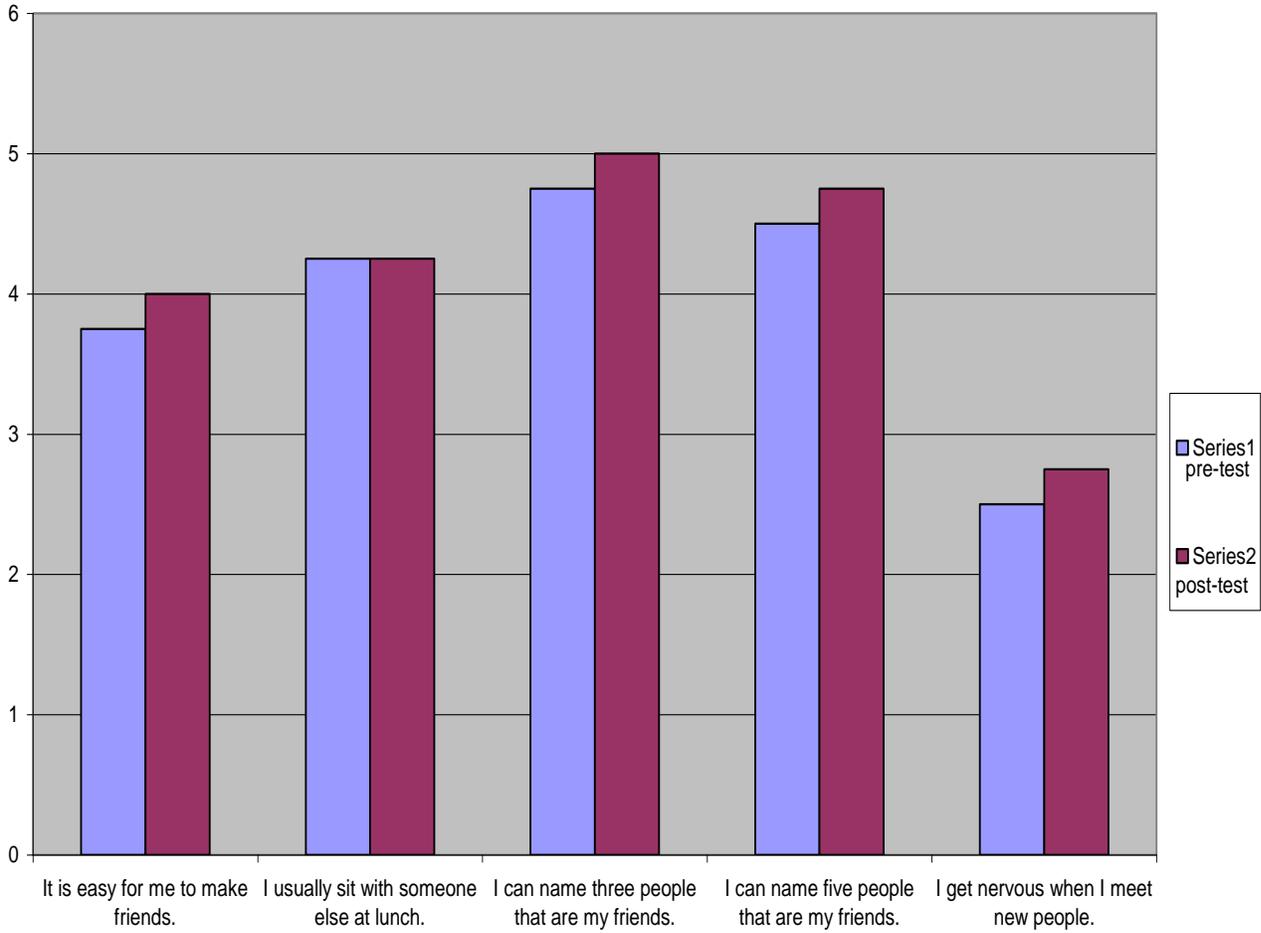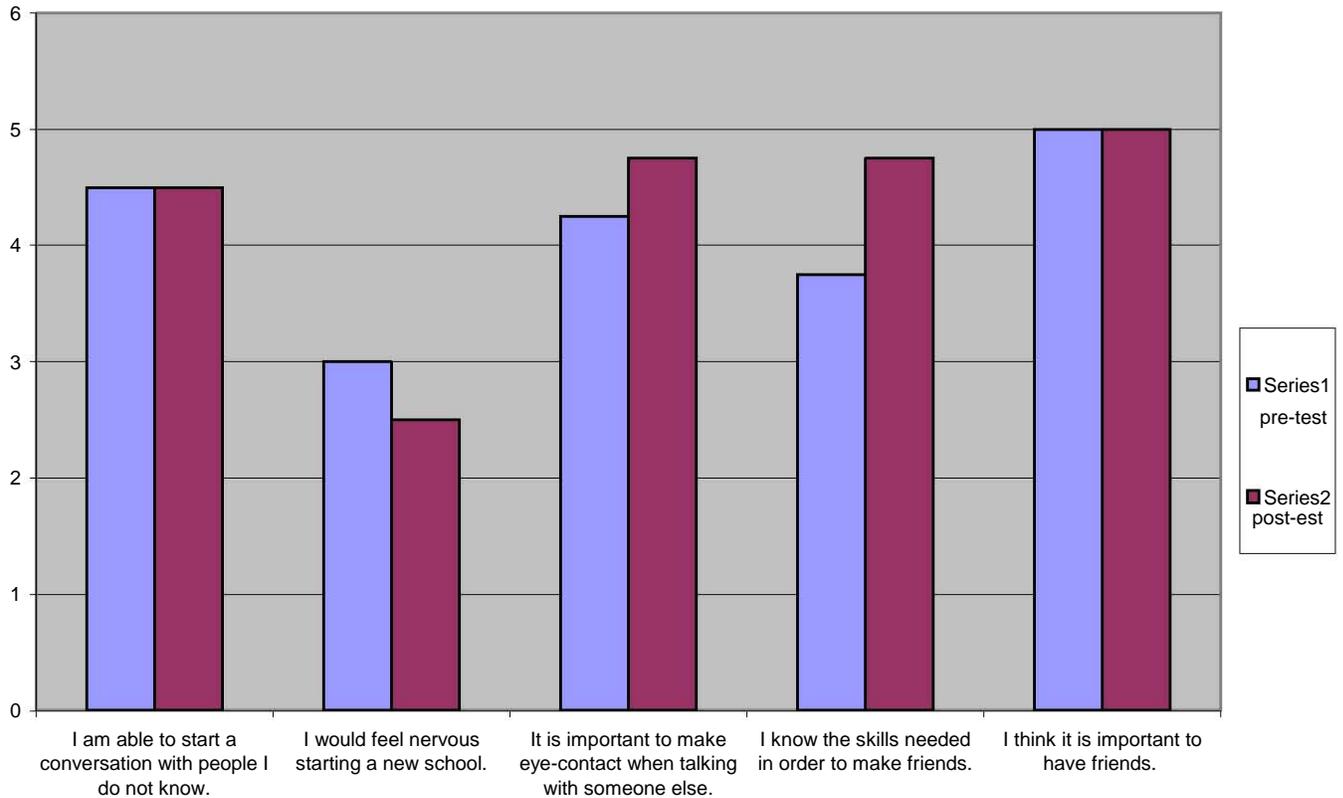**Table 1- Survey Questions 1-5 Resuts**
n=5

Table2-Survey Question 6-10 Results
n=5

The results show that 3.75% of the participants agreed when asked if it easy for them to make friends on the pre-test. The post-test showed that the percentage increased to four percent who agreed when asked the same question. Results for question two were the same on the pre and post-tests. The question asked the participants if they sit with someone else at lunch and 4.25% of the participants agreed with that statement. Question three asked the participants if they could name three people that were their friends. On the pre-test, 4.75% of the participants agreed with this question. On the post-test, all participants agreed with the question. Question four asked participants if they could name five people who were their friends. On the pre-test, 4.5% of the participants agreed with the question and 4.75% of the participants agreed on the post test. Question five asked the participants of they felt nervous when meeting new people.

2.5% of the participants agreed with the question, and 2.75 agreed on the post test. Question six

on the survey asked whether the participants felt comfortable starting a conversation with people

that they do not know. On the pre-test 4.5% of participants agreed with this statement. On the

post-test, when asked the same question, the results were the same as the pre-test. Question

seven rated the participants on how they would feel starting a new school. The pre test suggested

that 2.5 percent of the participants would feel nervous starting a new school. The post-test

represented that 3% of the participants would feel nervous starting a new school. Question eight

asked the participants if they felt that making eye contact was important. 4.25% of participants

agreed with this question on the pre-test and 4.75% of the participants strongly agreed on the

post-test. Question nine asked the participants if they knew the skills needed to make friends.

3.75% of the participants agreed on the pre-test. On the post test, 4.75% of participants agreed.

Question ten asked participants if they felt that it was important to have friends. All participants

agreed with this statement on both the pre and post tests.

Discussion

The social skills group that was researched as well as the outcomes can be looked at as

beginning steps in helping mental health professionals understand what is necessary in helping

adolescent girls build and maintain friendships. There are a lot of specific social skills that can

be taught and practiced. The idea of this research was to determine what skills were most

important and which skills would make the biggest impact. This particular group was comprised

of four participants ages nine and ten. The participants were identified by their primary therapist

as girls with social deficiencies. The group ran for twelve weeks and focused on a different

social skill each week. The skills were introduced the participants by the group leader then

practiced using a specific game or activity. The participants rated their knowledge of specific

social skills and their ability to make friends using an survey developed by the researcher. The participants completed the survey during the initial group session and again at the final group session. All parents of participants were required to sign a consent allowing their daughter to participate in the study and each participant also had to sign consents prior to the initial group session.

Research shows that girls develop and maintain relationship differently than boys. The development of the female relationship can be effected by parents, cognitive development, psychiatric diagnosis, physical pubertal development and much more. It is important that mental professionals are aware of what can contribute to the deficits females face when attempting to build and maintain friendships. Social skills groups are beneficial in promoting positive peer relationships amongst adolescent girls. Research also shows that social skills groups can be effective in promoting relationships in adolescents. Bierman & Furman (1984), Greenberg, Kusche, Cook, & Quamma (1995), la Greca & Santogrossi (1980), and Webster-Stratton, Reid, & Hammond (2001) all suggested that social skills group are effecting when working with adolescents who have psychiatric diagnosis.

The current research found that the participants learned specific skills that would be beneficial in supporting them in their peer relationships. The results indicated that the participants were more knowledgeable of some the social skills needed to develop and maintain relationships. The questions on the survey that rated the social skills of each individual participant increased or stayed the same in terms of the percentage of participants who agreed from the pre-test to the post-test. The questions from the survey that rated the participants on if they currently had friends also increased or stayed the same. The group was effective teaching the skills necessary for adolescent girls to build and maintain relationships and also feel

comfortable with using the skills that were taught. Each participant was allowed to give feedback to the group leaders during the final session. The feedback that was received was positive and some participants mentioned how they would remember the skills they learned in group and use them in their real life.

Interpretation of Findings

The first question on the survey rated the participants on easy they feel it is for them to make friends. The participants were to able to choose from the following options for each question asked: Strongly Disagree, Somewhat Disagree, Undecided, Somewhat Agree, and Strongly Agree. The mean percentage for question was 3.75%. The result indicates that 3.75% out a total of 5% of participants initially agreed that it is easy for them to make friends. The results from the post-test indicated that 4% of participants felt it is easy for them to make friends. Researchers have shown that it is not always easy for adolescent girls to make friends. Shechtman et al (2002) suggested that many adolescents have difficulties establishing and maintaining close friendships even when they are able to demonstrate many social skills.

Question number six asked the participants if they felt they could start a conversation with someone they did not know. The pre-test indicated that 4.5% of the participants felt they could start a conversation with someone they did not know. The result remained steady on the post-test. Having the skills to initiate conversations is an important social skill for adolescents to have. Turkstra et al (2003) stated that adolescent social communication takes place largely in conversations. Conversations provide a unique medium for assessing communication behaviors. They occur with no advanced notice, yet require sophisticated planning, timing, and self-regulation in their execution, and thus may reveal impairments that not evident on standardize tests (p. 117). The impact of social communication skills on valuable life experiences and the

frequency of conversations in adolescents every day lives support the need for data on typical

adolescent communication interactions (Turkstra et al, 2003).

Question number eight asked the participants whether they felt it was important to make

eye contact when talking with someone. The pre-test indicated that 4.25 % of participants felt it

was important to make eye contact when talking with someone else. After completed the twelve

session socials skills group, the post-test indicated that 4.75% of participants felt it was important

to make eye contact when talking with someone else. Eye contact is necessary in terms of

showing that one is interested and listening. Arnold et al (2000) suggested there is a widespread

belief that teaching eye contact behaviors will enhance the social skills of children. Eye contact

is a prerequisite to behaviors that are more complex and is often targeted first (Lovaas, Berberich,

Perloff, & Schaeffer, 1966).

Question nine was general and attempted to encompass all social skills. Question nine

asked the participants if they felt they knew the skills necessary to make friends. The pre-test

showed that 3.75% of the participants felt they knew the skills necessary to make friends. The

post-test results increased by 1% to 4.75% of participants who felt they knew the skills necessary

to make friends. These results indicate that the participants learned some effective skills during

the course of the group. With these results, one can assume that the participants increased their

ability to make friends during the twelve weeks of group. During preadolescents more time is

spent with peers and the opportunity to master new cognitive and social skills is present

(Herbert-Myers et al, 2006). Preadolescents who do not acquire necessary social skills may have

difficulty establishing and maintaining satisfactory interpersonal relationships, gaining peer

acceptance, and making meaningful friendships (Gresham, 2002). The preadolescents who fail

to acquire necessary socials skills are also at risk for developing high levels of emotionality and

impulsive behaviors (Hubbard & Dearing, 2004; Snyder, Prichard, Schrepferman, Patrick, & Stoolmiller, 2004). There is significant importance for adolescent to learn the necessary social skills for reason stated above. This current research shows that the group was successful in teaching some of the necessary social skills.

Limitations

There were a few limitations to the current research. Co-leading a social skills group can be complex developing, planning, and managing. The current research was conducted with four participants. Small groups allow for more individualized attention from the group leaders and more opportunity for processing and discussion. A group of six participants would have allowed for clearing and more efficient results. With a larger group, the group leaders would have had a better understanding of the results and determining if the group was truly effective. For the purpose of the current research, the participants who were selected were selected based on their availability to do group at the particular day and time.

Having the participants complete a self survey may have caused some fluctuations in the accuracy of the responses. This type of research can be revised to have the parents or teachers complete the surveys on the clients or students. The problem with having the participants complete the survey is that they may rush through them just to get it done. It is also possible that some participants may not understand the questions and therefore they just mark an answer. It is much more likely that a researcher would get a better understanding of the participant's skills if those skills are rated by an adult.

The survey used for the current research was general and did not gage more specific social skills. The survey could be geared more at rating specific social skills at the initial group session and then at the final group session. It might have been more effective to rate the

participants on the specific social skills that were going to be addressed in the group. With

specific skills on the survey, it would have been valuable to the outcome of the research.

Implications for Counselors

Counselors/ Mental Health Professionals are at the forefront of providing adolescents

with the social skills necessary. Counselors in school settings and Mental Health Professionals

in community setting are in positions were they could conduct these specific type of groups for

identified students or clients. Counselors often serve as the go to person at their schools or

agencies, and their skills allow them to play a vital role in making positive changes in the lives of

their students or clients. It is recommended that counselors attempt to teach the most critical

social skills initially. After counselors have taught the most critical skills they can then move on

to other skills. Counselor should use creative activities and games to tech the social skills. The

creative activities and games will hold the groups focus and keep them engaged and interactive.

It is also important that counselors keep in mind the make-up of the group. It is important that

group members are able to work together and benefit from the group. Counselors who work as a

part of an interdisciplinary team are able to consult with their team members for creative ideas to

address the social skill deficits that are represented in the group.

Implications for future research

Future research can address different psychiatric diagnosis and how that affects

adolescent's social capabilities. This research touched on how adolescent girls who are

diagnosed with Attention-Deficit/Hyperactivity Disorder have difficulties developing friendships.

Further research can touch on more of the highly diagnosed disorders in adolescents, such as:

Oppositional Defiant Disorder, Conduct Disorder, and Disruptive Behavior Disorder. It is also

suggested that future research look at the development of peer relationships with adolescents who are diagnosed with mood disorders, such as: Depression and Bipolar. Counselors interested in this topic can also look at how adolescent boys develop relationships and compare that to the way adolescent girls develop relationships. In looking at the difference in how adolescent boys and girls develop relationships it would be imperative to look at the cognitive and physical development as well. Physical and cognitive development has as an effect on how adolescent girls develop relationships, as the research has shown.

Conclusion

Using a social skills group to build and maintain friendships in adolescent girls has been proven effective. It is imperative for adolescent girls to posses the skills necessary to build positive friendships. It can be difficult for adolescent girls to build relationships due to the way their physical bodies and cognitive minds are changing and developing, but it is also necessary for their development.

It is proven that basic social skills can be taught. Most people develop social skills naturally, but some people do not, or they are inhibited by psychiatric disorders. With support from parents, mental health professionals and peers, girls are able to learn skills and practice them. Groups are an essential place for girls who struggle socially to learn and practice. Groups provide a safe environment for adolescents to share their thoughts and feelings. Adolescent girls are also provided fun activities to practice their newly taught skills. Mental health professionals/counselors have the tools to provide girls with the group experience. Research continues to show that girls have a more difficult time building relationships than boys and may require additional supports. A social skills group is most effective in providing adolescents what they need.

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Appendix A

STATEMENT OF INFORMED CONSENT FOR PARENTS OF MINORS

This form describes a research study being conducted with adolescent girls to determine if group therapy is effective in helping them develop and maintain relationships.
The purpose of this research project is to examine the effectiveness of group therapy for young girls who struggle to develop and maintain relationships. The research is also being conducted in order for me to complete my Master's thesis for the Department of Counselor Education at the State University of New York College at Brockport.

You are being asked to give permission for your daughter to participate in this research. If you agree that your daughter can participate in this research, she will be a participant in a social skills group, along with as many as seven other girls. She will be asked to complete a ten question survey during the first session of group and another ten question survey during the final session of group.

The possible benefit from this research is that information will be gained that would allow professionals to better understand the skills young girls in order to build and maintain friendships. Your daughter will also gain specific social skills necessary to develop and maintain friendships.

Any information obtained from your child is completely confidential and will only be used for the purpose of this research. The only way that confidentiality will be broken is if your child discloses something happening in her life that presents immediate and/or serious danger to her health or physical safety. In that case, I may have to contact you as parents and possibly another professional. I will always discuss this with your child first. Besides this consent form and the consent form that your daughter will sign, no other research material will have your child's name on it. If the write-up of this research happens to become published, results will be given anonymously, so that your child cannot be identified.

Consent forms, data, and surveys will be destroyed by the primary investigator once the research has been accepted, approved and completed. The primary investigator will shred above mentioned documents.

Choosing not to participate in this study will not affect the services that your child receives at Strong Behavioral Health

I understand that:

1) My child's participation is voluntary and she has the right to refuse to answer any questions.
2) My child's confidentiality is taken into account. Her name will not be written on the survey. There will be no way to connect my child to her written survey. If any publications results from this research, my child will not be identified by name.
3) There will be no anticipated personal risks or benefits because of my child's participation in this project.

4) My child's participation involves reading a written survey of ten questions and answering those questions in writing. It is estimated that it will take no more than fifteen minutes to complete the survey.
5) No more than eight people will take part in this study. The results will be used for the completion of a Masters thesis by the primary researcher.
6) Data will be kept in a locked filing cabinet at the research site. The primary investigator will be the only one with access. Consent forms will be destroyed by shredding when the research has been accepted, approved and completed.
7) Choosing not to participate will not affect services received at Strong Behavioral Health.

I am 18 years of age or older. I have read and understand the above statements. All my questions about my participation in this study have been answered to my satisfaction. I agree to participate in the study realizing I may withdraw without penalty at any time during the process.

If you have any questions you may contact:

Primary Researcher   Faculty Advisor
Sharee Washington   Thomas Hernandez, EdD., LMHC
(585) 224-9077   Department of Counselor Education
                                                      (585) 395-5498

I understand the information provided in this form and agree to have my child_____ participate.

Parent or Guardian

Signature _____

Date_____

Appendix B

STATEMENT OF INFORMED CONSENT FOR MINORS

This form describes a research study being conducted with young girls. The purpose of this research is to determine whether or not group therapy is effective in helping young girls develop and maintain relationships. The primary investigator is a Master's student at the State University of New York College at Brockport. If you agree to participate in this study, you will be asked to fill out a ten question survey during the first session of group and another ten question survey during the last group.

There are no anticipated benefits or risks from participating in this study. Your participation will allow other professionals to better understand what skills are necessary for young girls to have in order for them to develop and maintain friendships.

Any information that you give during this research is completely confidential. The only time I will need to contact your parents or other professionals is if you disclose information that presents immediate and/or serious danger to your health or physical safety. I will always talk to you about this first. The consent forms are the only items that will have your name on them and they will be kept in a locked filing cabinet.

Your participation in this study is totally voluntary, which means you can agree to be in it or not be in it. If you chose not to be involved in this study, it will not affect the services that you receive at Strong Behavioral Health. You are free to change your mind or stop participating at any time during the project.

You are being asked whether or not you want to participate in this study. If you wish to participate, and agree with the statement below, please sign your name in the space provided.

If you have any questions you may contact:

Primary Researcher   Faculty Advisor
Sharee Washington   Thomas Hernandez, Ed.D, LMHC
(585) 224-9077   Department of Counselor Education
                                                    (585) 395-5498

I understand the information provided in this form and agree to participate as a participant in this project.

Signature of Participant_____

Date_____

Birthdate of Participant_____

Witness (18 years of age or older) _____

Appendix C

Friendship Survey

Please answer the following questions:

1. **It is easy for me to make friends.**
   1) Strongly disagree
   2) Somewhat disagree
   3) Undecided
   4) Somewhat agree
   5) Strongly agree

2. **I usually sit with someone else at lunch.**
   1) Strongly disagree
   2) Somewhat disagree
   3) Undecided
   4) Somewhat agree
   5) Strongly agree

3. **I can name three people that are my friends.**
   1) Strongly disagree
   2) Somewhat disagree
   3) Undecided
   4) Somewhat agree
   5) Strongly agree

4. **I can name five people that are my friends.**
   1) Strongly disagree
   2) Somewhat disagree
   3) Undecided
   4) Somewhat agree
   5) Strongly agree

5. **I get nervous when I meet new people.**
   1) Strongly disagree
   2) Somewhat disagree
   3) Undecided
   4) Somewhat agree
   5) Strongly agree

6. **I am able to start a conversation with people I do not know.**
   1) Strongly disagree
   2) Somewhat disagree
   3) Undecided
   4) Somewhat agree
   5) Strongly agree

7. **I would feel nervous starting a new school.**
   1) Strongly disagree
   2) Somewhat disagree
   3) Undecided
   4) Somewhat agree
   5) Strongly agree

8. It is important to make eye-contact when talking with someone else.
   1) Strongly disagree
   2) Somewhat disagree
   3) Undecided
   4) Somewhat agree
   5) Strongly agree

9. I know the skills needed in order to make friends.
   1) Strongly disagree
   2) Somewhat disagree
   3) Undecided
   4) Somewhat agree
   5) Strongly agree

10. I think it is important to have friends.
   1) Strongly disagree
   2) Somewhat disagree
   3) Undecided
   4) Somewhat agree
   5) Strongly agree

Appendix D

Girls Social Skills Group
Session Agenda

I. **Highs and Lows for the week**

II. **Activity**

III. **Process Activity**

IV. **Choice Time**

V. **Feedback**