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Social Skill Development of Adults with Disabilities in a Community Drama Group

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SOCIAL SKILL DEVELOPMENT OF ADULTS WITH DISABILITIES

IN A COMMUNITY DRAMA GROUP

(Thesis format: Monograph)

by

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ABSTRACT

This thesis investigates whether a community-based drama group for adults with disabilities enhances their perceived social and personal development. A multiple-case study approach was used with each member of the drama program being viewed as a single case. A final summary of the cases was then used to determine the overall effectiveness of the program. Included as participants for this study were: (a) drama group members, (b) parents/guardians, and (c) instructors of this drama program. Data collection included the use of standardized measures, questionnaires, semi-structured interviews, and observations for each case. The skills on which participants improved the most were initiating conversations, sharing ideas, speaking in front of others, making friends, and building confidence. The skills for which there were some improvements were giving feedback, responding to criticism, and listening to/respecting the ideas of others. The skill for which there were no improvements was giving and receiving social invitations.

Keywords: adults, disability, drama, theatre, community, social skills, social development, personal development, case study, triangulation

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CHAPTER ONE: INTRODUCTION

The ability to engage in social interactions with those around us is crucial to many aspects of daily living, and for individuals with disabilities, it may mean the difference between being socially isolated or included in society. Being able to socialize with others is key to the development of self-concept and self-esteem and is also integral to the ability to navigate school, work, and the larger community (Alwell & Cobb, 2009). Cook and Oliver (2011) define social competence as a broad term that incorporates social skills and behaviour and involves being able to interact with others with successful social outcomes relevant to the situation. For example, changing one's tone when speaking to a teacher rather than a peer, or knowing how to behave in a library versus a gymnasium. For many individuals with disabilities, however, social deficits are at the core of their defined impairments. This is particularly true for individuals with low-incidence disabilities such as Autism Spectrum Disorder, Intellectual Disabilities, and multiple co-morbid disabilities, the populations of individuals on which this study will focus. Students with social deficits require special attention from educators since the presence of a social deficit may make it difficult for one to be fully integrated in the classroom. Therefore, it is important to help individuals with disabilities develop the social skills necessary in order to help them become more integrated within the classroom and within the community. These skills will ultimately be beneficial in helping these individuals to procure and maintain future employment.

Many researchers have sought to determine the most effective way to help individuals with disabilities to develop social skills. A detailed explanation of how social skills are manifested in individuals with both ASD and intellectual and developmental disabilities is

provided in the literature review. Studies focusing on individuals with Autism Spectrum Disorders have typically consisted of warm-ups or other activities, teaching targeted social skills, practicing the skills using role-plays or other activities, accompanied by games or free time for socialization and a homework assignment. Outcome measures have ranged from qualitative to quantitative indicators of skill development with reports from parents, teachers, the participants themselves, or a combination of these. The studies reviewed for the purpose of this proposal demonstrate mixed results. Several found no significant differences post intervention; some found only modest improvements for a portion of the target social skills or with only a subgroup of participants; and others reported significant improvements.

The amount of research conducted on social skill development for individuals with intellectual or developmental disabilities is limited. Many of these studies use similar structures to the studies previously discussed using a warm-up, lesson, practice, games, and homework. Reviews of these studies revealed some positive treatment effects and modest support for the interventions used. Although it is difficult to compare studies on individuals with intellectual and developmental disabilities to those on individuals with Autism Spectrum Disorders due to the discrepancy in the volume of studies for each population, overall it appears that traditional social skills interventions may be slightly more effective for those with intellectual and developmental disabilities.

In addition to the traditional social skills training methods mentioned above, researchers have also sought alternative methods, including the use of drama, music, and art interventions, to help individuals with disabilities learn social skills. Drama interventions have included various forms of dramatic activities such as creating characters, developing skits, and role-playing, as the central focus for developing social skills. Positive outcomes were found

for most drama-based interventions with significant results found in several studies and mixed results in the others. Fewer studies are available for music-based interventions and the one study illustrated in this review did not clearly describe how music was used nor did it find significant differences between the music group and the non-music group. Varying results were also found for interventions using visual art as the main tool for teaching social skills. Visual art therapies have included various art activities such as drawing, moulding, painting, and creating collages usually in combination with paired or group work in order to foster social interaction. Participants in art therapies were also encouraged to express their feelings through their art. Improvements in social interaction were found for the participants of some of these studies based on several different outcome measures, whereas other art therapy interventions found no significant differences, once again demonstrating the mixed results that are common within and across studies focusing on social skills.

Based on the literature, it would appear that among the most effective alternative methods of helping individuals with disabilities to develop social skills are drama-based programs. It is noteworthy that even traditional approaches commonly use role-play, a dramatic activity, to help participants learn social skills. However, even the drama-based interventions reviewed demonstrated mixed results based on several factors such as the measurement outcomes used, the age of participants, and the respondents (either the participants themselves, parents, teachers, or staff). Therefore, more research needs to be conducted in this field in order to provide better empirical evidence to support the potential effectiveness of drama-based programs. If support were to be found for these programs, there is a possibility that resources could be directed towards creating more dramatic arts groups for individuals with disabilities with the explicit intention of helping these individuals develop the

necessary social skills while simultaneously enhancing their personal development. If this were to be demonstrated, one could argue the importance of implementing drama programs in schools for adolescents with disabilities. Although personal development has scarcely been mentioned in the literature, it is still an important aspect to be considered. If a program does not produce strong outcomes for social development, it would still be beneficial to know whether the program has produced other positive gains for the participant such as improved self-esteem and self-confidence. Therefore, the proposed study will seek to determine whether a community-based drama program for adults with disabilities enhances perceived social and personal development.

CHAPTER TWO: LITERATURE REVIEW

The most prominent learning theory is Bandura's Cognitive Social Learning Theory. Within this theory, Bandura outlines observational learning, which is learning that occurs as the result of observing the behaviour of other people, such as peers, siblings and parents (Shaffer, Wood, & Willoughby, 2002). Observational learning is possible only if cognitive processes are at work, since a lot of processing is involved. An individual must be able to pay attention to a model's behaviour, to encode what they have observed, to retain this information in memory, and to imitate it later on. According to Bandura's theory of observational learning, one could argue that individuals with cognitive delays might struggle with observational learning due to its cognitive demands. This provides evidence for the need to provide direct social skill instruction for individuals with disabilities who may not learn these skills as naturally as their typically developing peers.

Autism Spectrum Disorders

For individuals with Autism Spectrum Disorders, a profound deficit in social reciprocity is its underlying feature. The spectrum includes Autistic Disorder, Aspergers Disorder, and Pervasive Developmental Disorder-Not Otherwise Specified (PDD-NOS) (White et al., 2007). These three autism disorders are included within the term Pervasive Developmental Disorders (PDD) along with Rett's Disorder and Childhood Disintegrative Disorder. Autistic Disorder is associated with extreme delays in language and social functioning as well as repetitive behaviours such as rocking back and forth. Aspergers Disorder is characterized by severe social difficulties but without a language delay. Individuals with Rett's Disorder often display extreme behaviour and social difficulties and frequently

demonstrate severe mental retardation. Individuals with Childhood Disintegrative Disorder show typical development until the age of two or four, and then demonstrate extreme declines in social, cognitive, and language functioning. Pervasive Developmental Disorder-Not Otherwise Specified (PDD-NOS) designates children who do not fit into any of the previous categories but who show difficulties in at least one of these areas of development (Diagnostic and Statistical Manual, Fourth Edition, Text Revision, (DSM-IV-TR) 2000 as cited by Gonzalez & Cassel, 2011). Within the DSM-IV-TR (2000), which includes criteria for the classification of mental disorders published by the American Psychological Association, social deficiencies in the Autism Spectrum Disorders include impairment in the use of non-verbal behaviours such as eye contact, facial expression, and body language, as well as failure to develop developmentally appropriate peer relationships, a lack of spontaneous enjoyment seeking with others, and a lack of social and emotional reciprocity (Bellini, 2011). In addition to these, other impairments include a reduced ability to take the cognitive and emotional perspective of others, which may result in the misinterpretation of social signals. This can also result in problems understanding what others may ask of them in conversation, even for individuals who can speak well themselves (Gillberg, 2007). Another common aspect of ASD is poor speech prosody which involves differences in voice pitch and inflection that aid in communication (White et al., 2007). Unfortunately, all of these impairments can often worsen as the individual approaches adolescence as a result of increasingly complex social demands and of a greater awareness of their social disability (Tantam, 2003).

Intellectual and Developmental Disabilities

Impairment in social functioning is also a defining feature for intellectual and developmental disabilities. According to the ICD 10/ICF, the World Health Organizations

International Classification of Diseases, mental retardation includes a reduced level of

intellectual functioning which results in an impaired ability to adapt to the demands of one's

social environment. In the AAMR 10, which is the tenth revision of the American Association for

Mental Retardation's manual, mental retardation is defined by both limitations in intellectual

functioning and by adaptive behaviour including conceptual, social and practical adaptive skills.

For these populations, the severity of social skills deficits varies according to the level of

impairment in intellectual ability. Individuals with *mild* intellectual disability develop

communication and adaptive behaviour skills more slowly in their preschool years compared to

typically developing children, but by age five they are able to interact socially with others with at

least some degree of competence. Those with *moderate* intellectual disabilities demonstrate a

significant delay in the development of adaptive behaviour skills in childhood. During later

childhood, some develop the social skills necessary to interact with adults and peers, but others

struggle to develop these skills even during adulthood. Individuals with *severe* intellectual

disabilities show a pronounced developmental delay in the development of adaptive behaviour.

However, some individuals with severe intellectual disability may develop the skills necessary to

interact socially during their primary school years, whereas others will struggle to develop these

skills throughout their lives. *Profound* intellectual disability is defined as a severe developmental

delay, and these individuals whose social skills are also severely impaired typically require

intensive supports from others throughout their lives. The term "adaptive behaviour" is a crucial

element in all of these definitions as it encompasses the following three domains: conceptual

skills, social skills, and practical skills. The social skills domain involves the ability to make and

to maintain relationships, the ability to perform responsibilities appropriate to age and ability

level, the capacity to develop self-esteem, the ability to understand informal social rules, and the

ability to interpret social situations accurately (Carr & O'Reilly, 2007). For individuals within

the mild range of ID, levels of social impairment are vital to diagnosis, since the degree of social

impairment represents the difference between dependence and independence (Sukhodolsky &

Butter, 2007). To the contrary, some disabilities are rarely associated with higher levels of

sociability, which has been noted amongst individuals with Williams Syndrome (Klein-Tasman

& Mervis, 2003).

Comparative Skills Studies

Several studies have been conducted in order to determine the similarities and differences

in the social abilities of individuals with various disabilities. One such study conducted by

Njardvik, Matson, and Cherry (1999) sought to compare the social skills of adults with Autistic

Disorder (AD), PDD-NOS, and mental retardation (MR) divided into three groups, participants

for this study were 36 adults diagnosed with profound mental retardation. The first group

included individuals with profound mental retardation alone; the second group was individuals

with an additional diagnoses of PDD-NOS; and the third group included individuals with an

additional diagnoses of AD. The Socialization Domain subtest of the Vineland Adaptive

Behaviour Scale (VABS) and the Matson Evaluation of Social Skills in the Severely Retarded

(MESSIER) were administered to all participants to assess their social skills. The Socialization

Domain of the VABS assesses interpersonal skills, play and leisure time, and coping skills

(Sparrow & Cicchetti, 1985) while the MESSIER is an 85-item instrument which measures

social skills and social behaviour in individuals with severe and profound mental retardation. The

six dimensions included in the MESSIER are positive verbal, positive nonverbal, general

positive, negative verbal, negative nonverbal, and general negative (Matson, Leblanc, &

Weinheimer, 1999). Statistical analyses of the scores demonstrated that social skills deficits were

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greatest for the AD group, followed by the PDD-NOS group, and the MR group. On the General

Positive subscale of the MESSIER, the MR group received the highest mean score, followed by

the PDD-NOS group and finally the AD group. On the Positive Nonverbal subscale, the AD

group received the lowest mean score, followed by the PDD-NOS group and the MR group who

scored the highest. On most measures, the PDD-NOS and MR groups could not be differentiated

from one another, but mean scores for the PDD-NOS group displayed more severe social deficits

than the MR group (Njardvik, Matson, & Cherry, 1999). The overall findings of this study

suggest that social skills deficits were present for all three groups, but the individuals with

profound mental retardation who had an additional diagnosis of Autistic Disorder showed the

most severe social impairments, and individuals with a diagnosis of profound mental retardation

alone showed the fewest social impairments compared to the other two groups.

A similar study conducted by Wilkins and Matson (2009) also explored the nature of

social abilities for adults with ASD and ID. This study included 333 adults with ID who were

placed into three groups: the first group consisted of individuals with ID and Autism, the second

group with ID and PDD-NOS, and the third group with ID only. The MESSIER and VABS were

used to assess social strengths and weaknesses. The five subscales of the VABS include

Communication (receptive, expressive and written), Daily Living Skills (personal, domestic, and

community), Socialization (interpersonal, play and leisure time, and coping), Motor (fine and

gross), and Maladaptive Behaviour (Sparrow & Cicchetti, 1985). All six subscales of the

MESSIER were used for this study. Similar to the Njardvik, Matson, and Cherry study

mentioned above, the individuals with Autism demonstrated the greatest social skill deficits, with

significantly lower scores on the Positive Verbal, Positive Nonverbal, and General Positive

subscales of the MESSIER, and higher scores on the Negative Nonverbal subscale compared to

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controls. Overall, individuals with Autism showed the greatest level of social impairments, followed by the PDD-NOS and the ID only groups. These social impairments include deficits in both verbal and nonverbal positive social skills, and the presence of negative social behaviours, such as isolating oneself (Wilkins & Matson, 2009).

Smith and Matson (2010) also used the MESSIER to determine group differences in social abilities for adults with ID, with ASD, or with epilepsy. One hundred participants with ID were divided into four groups: ID only, epilepsy, ASD, and combined ASD and epilepsy. Results from the MESSIER showed that individuals with combined ID, ASD and epilepsy demonstrated significantly more social deficits than the ID only group and than groups with only one co-morbid factor (ASD or epilepsy). Also, the two ASD groups (ASD alone and ASD with epilepsy) demonstrated more impaired non-verbal social skills such as sharing interests, playing, smiling, and communicating using gestures. The findings in this study suggest that the presence of multiple disorders increases the likelihood of having impaired social skills (Smith & Matson, 2010).

Social Skills Interventions

Since it has been well established that significant social deficits are at the core of a variety of disabilities, researchers have developed methods of teaching individuals these skills and have tested the effectiveness of these methods, with varying results. These studies have included a wide range of subjects, different targeted social skills, and an assortment of treatment approaches all with the intent of equipping individuals with disabilities with the social skills necessary to engage in positive social interactions. This portion of the literature review will outline several of these studies and reviews in order to shed light on the effectiveness of traditional social skills training programs. Traditional social skills training programs generally

follow the same model, with interventions that include various forms of warm-ups, teaching of targeted social skills, practicing the skills using role-plays or other activities, accompanied by games, free time for socialization, and a homework assignment.

Autism Spectrum Disorders

The first group of studies to be discussed are those that have focused on social skills instruction for individuals with Autism Spectrum Disorders (ASD). Marriage, Gordon, and Brand (1995) conducted a social skills training group for boys with Aspergers aged eight to 12. This design included two phases: the first phase involved highly structured two-hour sessions with homework assignments, and the second phase included six of the original participants and less structured sessions of only an hour and a half. Teaching techniques for the sessions included warm-up exercises, role playing, videos displaying the social skills being taught, games to practice social skills, activities such as cooking a simple recipe, and homework with one to three tasks for the boys to carry out at home. Parents of the boys completed pre-group and post-group questionnaires which asked them to rate their sons' abilities to hold conversations with peers and adults, to behave correctly in public, to join in activities with peers, and to respond appropriately to criticism. Parent ratings before and after phase one showed negligible differences for these particular social skills. However, comments made by the parents were mostly positive and included statements such as "child is better able to verbalize feelings" and "child has better eye contact". Observations made by the researchers suggest that positive gains were made in self-confidence and in the development of some concrete social skills. However, feedback from the parents and from the boys themselves suggests that skills did not generalize to other settings, contrary to the researchers' attempt to increase generalization by rotating among four sites for the intervention.

White, Koenig, and Scahill (2010) also developed a group-based social skills training program for youth aged 11 to 14 with ASD. This intervention consisted of four groups, each of which included four teens with ASD and one typically developing peer tutor whose purpose was to model social skills and encourage interaction. The social skills taught included giving a compliment, initiating and maintaining conversations, listening to and speaking in front of others, problem solving, giving feedback, identifying emotions, turn-taking, common social rules, and handling teasing and bullying. Each session included a warm-up, homework review, the teaching of skills, role playing to practice skills, games, group snack, and free time for socializing. The progress of the participants was measured at baseline, immediately after the treatment, and three months later using the Social Responsiveness Scale (SRS) and the Social Competence Inventory (SCI), both of which were completed by parents and teachers. Teacher reports did not show any significant change on the SRS. However, parent reports did show significant improvement on the Social Communication and Social Motivation subscales of the SRS. As for clinical significance, researchers reported that only one participant showed a reliable change in Social Motivation, and nine of 15 demonstrated reliable change on the Social Communication subscale. The authors stated that this discrepancy could be the result of a possible positive reporting bias from parents. Overall, these two studies are illustrative of the mixed results that are commonly found in the literature on social skills training research.

Comprehensive Literature Reviews

Due to the volume of research on social skills training that has been published over recent decades, many literature reviews have been conducted in order to summarize the findings of this vast array of work. White, Keonig, and Scahill (2007) performed a review of research in group-based social skills training programs for individuals with ASD ranging in age from 6 to 35 years.

This review included 14 studies published between 1985 and 2006. The outcome measures used in these studies involved various forms of parent reports, teacher reports, child self-reports, and direct behavioural observations. According to White et al., qualitative and observational data from these studies showed mostly beneficial results, but the results for quantitative skill-based measures were inconsistent. Some studies showed no improvement (Ozenoff & Miller, 1995; Webb et al., 2004 as reported by White et al., 2007) whereas others demonstrated small to moderate improvements (Cotter, 1997; Provencal, 2003 as reported by White et al., 2007). Although parents generally reported high satisfaction with the groups, parents infrequently reported actual changes in children's behaviour. White et al. concluded by stating that although some social skills may be demonstrated in clinical settings, these skills do not necessarily generalize to other aspects of the participant's daily life (2007).

Rao, Beidel, and Murray (2008) reviewed the literature on social skills training interventions for children under age 18 who had been diagnosed with Aspergers Syndrome or High Functioning Autism. Studies included in this review used either an experimental research design, single case study design, or a clinical trial and included direct measures of change in social skills. Of the 10 studies chosen for this review, seven reported positive treatment effects, although for some of these studies positive outcomes were found for only a subset of subjects or for certain outcome measures. For the other three studies, no treatment efficacy was reported. Rao et al. attribute the mixed results to the lack of common definitions of social skills and to the difficulty of operationalizing and assessing social behaviours which makes it difficult to compare and assess treatment programs (2008).

Cappadocia and Weiss's (2011) review organized the literature into three groups: traditional social skill training groups, cognitive-behavioural social skill training groups, and

social skill training groups with parental involvement, all of which were designed and implemented for youth diagnosed with Aspergers Syndrome or High Functioning Autism. According to Cappadocia and Weiss, traditional social skills training groups (SSTG) involve providing instruction and practice without formal psychotherapeutic interventions. The first example of a traditional SSTG reported by Cappadocia and Weiss is the study by Barnhill et al. (2002) which targeted nonverbal communication for adolescents aged 12 to 17 with ASD. This program included eight sessions, with the first four sessions focusing on prosody, which is the use of voice tone to express different emotions, and the remaining four sessions focusing on identifying facial expressions. Each session was followed by a two-to-three-hour recreational activity. Barnhill et al. found no significant differences between pre- and post- measures of nonverbal communication skills, but they did suggest that the group did have a positive effect on many of the participants since 87% stated that they had made a friend in the group. Another traditional social skills training study was conducted by Webb et al. (2004) who developed a program for adolescents with Aspergers or High Functioning Autism aged 12 to 17 years (Cappadocia & Weiss, 2011). For this intervention, five social skills were targeted, including sharing ideas, giving compliments, offering help or encouragement, giving positive criticism, and exercising self-control. Significant improvements were found for four of these five social skills, according to observations made by researchers during role play situations. Tse et al. (2007) also conducted a traditional social skills training group for adolescents with Aspergers and High Functioning Autism (Cappadocia & Weiss, 2011). Group meetings for this 12-week program included check-in, review, introduction of new skill, role-play, snack, activity, and closing. A wide range of social skills was targeted for this program and ranged from making eye contact to dating etiquette. Significant improvements were found for pre- and post- measures of social

competence based on parent reports, which could be related to the larger sample used for this study (n=48).

As for cognitive-behavioural social skills training groups, Bauminger (2007) analyzed an extensive program for pre-adolescents with ASD that included 50 sessions over seven months (Cappadocia & Weiss, 2011). These small group sessions took place within the participants' schools and were conducted by their teachers. Cooperative activities and role play were used to teach the targeted social skills. Improvements were reported on pre- and post- measures of mutual planning, cooperation, sharing, and social and emotional understanding for students with ASD. The last category of literature on social skills training groups is the parental involvement group, which included studies that focused on supporting the parents as well as the child (Cappadocia & Weiss, 2011). Cappadocia and Weiss reported on a study conducted by Barry et al. (2003) which involved an eight-week program for children aged six to nine with High Functioning Autism. Sessions began by teaching children a particular social skill, such as greeting, conversation skills, and initiating and responding to play invitations. This was followed by play time with a typically developing peer and by role-playing learned skills for parents. Pre- and post-intervention improvements were observed for greeting skills, play skills, and some conversation skills. The social skills training group evaluated by Beaumont and Sofronoff (2008) also included a parental involvement component (Cappadocia & Weiss, 2011). This eight-session intervention for children with Aspergers aged seven to 11 included both an intervention and wait-list control group. This program included a computer game designed to teach social skills, a social skills training group to generalize skills learned from the computer game, a parent training group that focused on the social skills that children were learning, and handouts for teachers. Significant improvements were found between pre- and post- parent reports and direct

measures of social skills for the intervention group (Beaumont & Sofronoff, 2008, as reported by

Cappadocia & Weiss, 2011). However, parents' awareness of the social skills being taught may

have resulted in a positive reporting bias.

Bellini (2011) also conducted a review of several studies and meta analyses on social

skills training for individuals with Autism Spectrum Disorders and concluded that these studies

had failed to support social skills training in general and have been found to be only minimally

effective.

Intellectual Disabilities

Another group of individuals with exceptionalities for whom studies on social skills

training have been conducted are individuals with intellectual disabilities. Hall, Dineen,

Schlesinger, and Stanton (2000) using a multiple baseline design for six participants, developed a

group treatment program for adults with developmental disabilities. The targeted social skills for

this intervention included engaging in social conversations, asking someone to a social event,

saying no, giving criticism, receiving criticism, and differing in opinion. The itinerary for the

sessions included teaching the targeted social skill by demonstrating the appropriate way to

respond to a particular situation, by practicing in role-play situations, by participating in a group

discussion with participants and leaders, and by homework. Hall et al. found that both individual

and group data demonstrated only modest support for this intervention. Some improvements

were seen for social conversation, social invitation, and saying no skills. However, the data did

not show any improvements for the other three skills of giving criticism, of differing in opinion,

and of receiving opinion. Hall et al. stated that this could be the result of the increased difficulty

of the last three skills compared to the others. The researchers concluded that group-based

interventions may be more suitable for individuals with higher levels of skill competence and

that individual treatments may be more appropriate for individuals functioning at a lower level.

In another study aimed at teaching social skills to adults with intellectual disabilities, O'Reilly, Lancioni, Sigafoos, O'Donoghue, and Lacey (2004) compared an external control method to a problem-solving method of social skills instruction. The sample for this study included five adults within the mild range of intellectual disability and consisted of individual one-hour sessions. The targeted social skills included managing conflict with a roommate and responding to corrective feedback from care staff. The problem-solving training technique included giving the participants a rationale for learning the skill, describing the social situation in which it would occur, and then modelling the correct social rules and behaviours. For the external control training technique, the therapist would describe the social situation, model the appropriate social behaviours, and then have the participant role-play the behaviours with, and then without, feedback. Measurements were taken at baseline, directly after the intervention, and then four weeks later. O'Reilly et al. found that there was very little difference between the problem-solving and external control techniques, suggesting that these two interventions may be equally effective at teaching social skills to participants. However, since each participant was given both instruction methods, there may have been some carry over effect from one treatment method to the other making it difficult to determine which one contributed the most to their social skill acquisition. Both training methods were relatively effective as demonstrated by the fact that after four training sessions, three of the five participants were correctly performing the targeted social skills 80% of the time. The other two participants displayed minimal improvements and continued to have difficulties. Follow-up measurements demonstrated that the learned social skills were maintained four weeks after the intervention (O'Reilly et al., 2004).

Alwell and Cobb (2009) reviewed scientifically-based research studies which examined

social and communicative interventions for youth with disabilities. Articles selected for this review included participants with disabilities between the ages of 12 and 22. Alwell and Cobb reported that the social skills training studies in particular displayed positive treatment effects and at least modest treatment gains, concluding that this review supported the efficacy of social skills training interventions for youth with disabilities.

Arts-Based Social Skills Training Methods

Branching away from traditional social skills training methods, researchers have also explored whether the arts can be utilized to aid in the social development of individuals with exceptionalities. This approach has resulted in the emergence of several arts-based therapies including drama therapy, visual art therapy, and music therapy. According to Crimmens (2006), drama therapy is a productive way to teach and practice social skills with individuals who have cognitive and communication impairments and involves creating change within individuals and groups through direct experiences with theatre arts. This could be said of other arts-based therapies. Such a definition allows for several different interpretations of how an art therapy program might be conducted, and this makes comparisons of research efforts across different types of art therapies difficult. Nonetheless, it is necessary to review these types of studies in order to examine their potential effectiveness. The following are examples of empirical studies that have examined the effectiveness of arts-based programs on the social development of individuals with disabilities.

Music Therapy Interventions

Duffy and Fuller (2000) investigated the effectiveness of a music therapy program in facilitating the social skills of children with intellectual disabilities. Thirty-two children aged five to ten were split into two program-based groups: a music therapy social skills program (MP), and

a non-music social skills program (NMP). Both programs were designed to facilitate five targeted social skills: primary, initiation, turn-taking, vocalization, imitation and eye contact. The music program included a 30-minute cassette of pre-recorded music accompanied by a therapeutic manual which explicitly outlined how each session must be carried out. The only difference between the MP and the NMP is that the musical activities in the latter were substituted for non-musical ones. In order to measure social skills in each child, a brief test was designed to allow participants to display each of the target social skills during a series of table top activities. A five-point Likert scale was used to rate the presence of the social skills, with one suggesting that the skill was very poor and five meaning that the skill was well developed. The results of the pre- and post- measures of the targeted social skills indicated that significant improvements occurred for both the MP and NMP participants. However, when comparing the skill development provided by these two interventions, significant differences were not found. The only targeted skill for which the music program appeared to be more effective was imitation. After taking these results into consideration, Duffy and Fuller (2000) raised the question of whether music really needs to be included or whether it merely serves as an alternative form of social skills training, rather than a more effective one.

Art Therapy Interventions

Got and Cheng (2008) investigated the effects of an art facilitation program on the quality of life of Chinese people with developmental disabilities living in Hong Kong. This study utilized a randomized control trial with two groups: an art facilitation group with 21 participants and a non-treatment group with 20 participants. Ratings were gathered from the participants, their parents, and staff members of the day centres. One instrument used was the Quality of Life Enjoyment and Satisfaction Questionnaire (Q-LES-Q) (Endicott, 1990), a self-report measure of

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the life satisfaction of adults with cognitive or medical disorders. Four of the nine subscales of this instrument were used: subjective feelings, leisure time activities, social relationships, and general activities. The Scales of Independent Behaviour-Revised (SIB-R) (Bruininks, Woodcock, Weatherman, & Hill, 1996), the other instrument used, measures functional independence and adaptive functioning. Three of the 14 subscales were used: social interaction, language comprehension, and language expression. Pre-test measures were taken seven to 10 days before the treatment, and post-test measures were taken within one week after the treatment concluded. Each treatment session focused on a theme such as friendship and included a warm-up and various art activities: group collage, ink blots, play dough, story simulation, and the five senses. Paired and group work were used in the sessions in order to facilitate social relationships. Participants were also encouraged to share their artwork and their feelings with the belief that this would foster mutual trust and help the participants develop higher self-esteem. Between the two groups, no differences were found on the self-report quality of life variables. Unlike the parents of the control group, the parents of the participants in the treatment group reported improvements in social interaction and language comprehension. Staff members also reported that participants in the treatment group improved slightly in language comprehension. Overall, Got and Cheng (2008) found preliminary evidence for the effectiveness of art facilitation programs for individuals with disabilities which led them to conclude that art was no longer just a leisure activity but an avenue that promoted personal growth.

Freilich and Shechtman (2010) conducted a study to examine the impact of art therapy on the socio-emotional and academic achievements of children with learning disabilities. The study included 93 children with learning disabilities, with 42 in the art therapy group and 51 in an academic assistance group. Children in art therapy received two hours of academic assistance

and one hour of art therapy each week, and children in the academic assistance group received three hours of academic assistance per week. During the art therapy sessions, children were encouraged with the assistance of a therapist to express and to explore their feelings through an art project of their choice. The academic assistance was provided to increase knowledge and to develop skills. The hypothesis that art therapy would contribute to the adjustment of children with learning disabilities was mostly supported, with significant differences based on child reports, the pre-/post test, and the clinical measures. However, teachers reported no differences between the two groups.

Drama Based Interventions

Walsh, Kosidoy, and Swanson (1991) conducted two short-term, school-based creative drama programs with small groups of children and early adolescents to see if the programs would improve their peer interaction skills. Students were expected to improve on their self-rated levels of confidence in dealing with peers, on teacher ratings of social-emotional behaviour and peer relations, and on parents' ratings of social-emotional behaviour and peer relations. The first study included five boys and seven girls with social-emotional and cognitive difficulties. Students were assigned to either the fall group or the winter delayed-treatment comparison group. Assessments took place for all participants in September, December, and April. The post-intervention scores of the fall group were compared to the scores of the winter group before their drama program had begun. Students completed the Children's Self-Efficacy for Peer Interaction Scale (PIS) (Wheeler & Ladd, 1982) which measures 12 conflictual and 10 cooperative peers situations. Teachers completed the Child Behaviour Rating Scale (CBRS) (Weissberg et al., 1981) which includes 11 problem items related to classroom behaviours, shyness, anxiety, and learning difficulties. The CBRS also includes 15 competency items including frustration,

tolerance, gutsiness, and peer sociability. Parents completed a measure adapted from the CBRS which also included 11 problem items and 15 competency items.

During the drama sessions, participants were encouraged to choose their own characters and storylines, to play their selected roles, to self-reflect, and to provide constructive feedback about the performances of other group members. Providing peer feedback was viewed as the main avenue for learning specific social skills. The analyses conducted following the fall group intervention demonstrated that the fall group improved as much statistically as the winter delayed-treatment group. The fall group exceeded the winter group on the PIS conflict scale. However, the winter group showed more improvement than the fall group on P-CBRS Problems. Within-group analysis produced mixed results with significant changes indicated on the Conflict scale of the PIS and the Problems scale on the P-CBRS but not on any of the other scales.

A second study conducted by Walsh, Kosidoy, and Swanson (1991) again used a pre-test, post-test delayed-treatment comparison design to evaluate a creative drama program, but this time they also made comparisons between groups of younger and older students. The total number of participants was 25, with 16 in the fall intervention and nine in the winter intervention. Once again, the children completed the PIS, but the researchers chose to use different measures for parents and teachers this time due to the results of the first study. The first of the two measures completed by parents and teachers was the Group Participation Scale (GPS) which is an unpublished measure of children's behaviour modified from a similar scale developed by Pancer (1986). The GPS includes a Problems scale which is comprised of 19 items related to acting out and negative emotions, as well as a Strengths scale, which includes 22 items relating to social communication, leadership, and positive emotions. The second measure was the Inventory of Personal, Social, and Learning Skills (IPSALs) (Pancer, 1986). This study used a

subtotal of 32 items pertaining to peer interaction, group interaction, emotional expression, tasks, and activities, behaviour compliance, and problem-solving. As for the intervention, the same drama group procedures were used as those in study one. Results from the PIS demonstrated that the fall experimental group did not significantly improve compared to the winter comparison group on non-conflict items, but they did improve significantly on conflict items. Ratings from the GPS showed that the fall group did not improve significantly compared to the winter group on both the Problems and Strengths scales. However, on the IPSALs, the fall experimental group did exceed the winter comparison group significantly. Qualitative observations also described clear positive changes for the majority of participants. In particular, one male participant in the younger group, who was originally referred due to his aggressive behaviour towards other children, learned how to deal more appropriately with his frustrations, to take turns, and even to give compliments as the intervention progressed. For the older group, as the lessons progressed, the prosocial behaviour increased, as demonstrated by the higher-functioning group members going out of their way to include the two shyer boys. Walsh et al. (1991) concluded that although the qualitative and quantitative results of Study One show partial success, the results of Study Two demonstrate more clearly the effectiveness of a creative drama program, likely due to the measures used.

    Jindal-Snape and Vettraino (2007) conducted a review of the literature on the use of drama techniques to foster the social-emotional development of individuals with special needs. Drama techniques were defined as any dramatic activity which is designed to promote the development of participants. Social-emotional development was defined as the aspect of development which has an impact on an individual's socialization and emotional well-being, and the term "special needs" was used to refer to any disability or disabling condition which may

have an impact on an individual's social-emotional development. This review included eight studies conducted between 1990 and 2005. After examining the research, Jindal-Snape and Vettraino found many faults with these studies. One of the issues raised was the lack of substantial evidence to prove that drama was an effective intervention for people with special needs. Jindal-Snape and Vettraino suggested that research designs needed to be presented more clearly in order for researchers to make any credible claims. Also, many of these studies used statistical measures with very small samples. Pre- and post- measures were often used, but these measures were unable to demonstrate clearly what worked and what did not. Another important issue was that the perspectives of participants were rarely presented, which ignored a key insight into the effectiveness of these interventions. Of all the measures that were employed, qualitative measures such as observations allowed researchers to make stronger claims about the effectiveness of drama-based programs. To conclude, Jindal-Snape and Vettraino (2007) stated that there was some evidence that drama could be used effectively to promote the social-emotional development of people with special needs, but that research in this area needs to be conducted more vigorously in the future.

Quibell (2010) examined the effectiveness of a drama therapy intervention on children who were demonstrating problems in school, including poor classroom behaviour; performance below their potential; and incidents of aggression, shyness, low self esteem, social exclusion by peers; and predictable negative behaviour patterns. Participants were randomly placed in either a treatment or control group. The treatment group used creative expressions and psychodrama approaches including role-play and a variety of dramatic techniques. This intervention focused on the inner states of children and on their relationships to school and family for the purpose of allowing students to develop self-expression and reflect on their experiences. The control group

focused on curriculum studies in math and English. Teachers reported that the children in the drama therapy intervention showed more emotional and behavioural improvements compared to the curriculum studies group, with improvements still present one year later. Parents also reported that children in the drama therapy intervention showed more emotional and behavioural improvements compared to the curriculum studies group, but the parents did not report that the effects remained after the end of the intervention. The children themselves reported emotional and behavioural improvement in both groups, but they did not rate the drama therapy group as being better.

Researchers de la Cruz, Lian, and Morreau (2011) sought to determine whether a creative drama program would increase the social skills and expressive and receptive language skills of 35 children with learning disabilities. The targeted social skills for this study were divided into non-academic and academic skills with the non-academic skills described as "apologizes when action has injured or infringed upon another" and "finds acceptable ways of using free time when work is completed", and the academic skills described as "ignores distractions from peers when doing seat work assignments" and "follows written directions" (de la Cruz, Lian, & Morreau, 2011, p. 90). Participants were administered either the Primary or Intermediate Test of Language Development (TOLD-2) to assess language skills and the Walker-McConnel Scale of Social Competence and School Adjustment (WMS) was used to measure participants' social skills. The four targeted social skills were measured using a 16-item rating scale of Specific Social and Oral Language Skill (SLS). Tests were administered two weeks before intervention, two weeks afterwards, and once again eight weeks later for the drama group. In addition, in order to gain insights into their experiences qualitative structured interviews were conducted with the participants in the drama program. As for treatment, members of the experimental group were

engaged in 12-minute sessions of creative drama which focused on each of the targeted social skills. Drama lessons included the facilitator showing students a picture (for example, a child crying), asking the students questions about the picture, and then making conclusions about the picture (i.e., why the child is crying). Afterwards, the facilitator led the children in determining appropriate responses. The children would then perform acting improvisations based on the situation discussed in order to help them practice what they had learned. The comparison group received a traditional curriculum for social and oral skills development.

For the drama group, significant gains were seen in the mean WMS social skills scores as well as for the mean SLS scores. Structured interviews also revealed positive gains for the four target social skills for the drama group. In addition, follow-up assessments administered eight weeks later demonstrated that the drama group had maintained their social and oral language skills. According to de la Cruz, Lian, and Morreau, "Creative drama basically entails self-expressive, social interactions which emphasize speaking spontaneously in improvisations, thereby leading to better interpersonal communication skills (2011, p. 93)". They concluded that this study demonstrated that creative drama does have the ability to contribute to enhancing specific language and social skills for individuals with disabilities.

The final study discussed here closely resembles the research method to be used in this thesis. This study, conducted by Lynch and Chosa (1996), examined the relationship between participation in a community-based expressive art program for individuals with disabilities and perceptions of psychosocial functioning change. The participants were individuals who had been part of a community-based arts program for at least one year. Researchers used questionnaires which included statements that addressed three main areas of psychosocial change of social interactions, behaviour, and self-esteem or self-concept. Change was rated on a Likert scale. The

follow-up interviews conducted were semi-structured and included eight questions. Completed questionnaires were received for 34 individuals, and interviews were conducted with 10 of these individuals. Based on the questionnaire data, changes in positive directions were noted for a majority of the participants, particularly for self-esteem which was a positive change for 91% of the participants. For the interviewees, nine of 10 attributed positive changes in social interactions to their involvement in the expressive arts program. Eight of ten interviewees also reported positive changes in self-esteem as a result of the art experiences. Also noted by a few of the interviewees was the difficulty that they faced in finding opportunities to interact with peers, particularly as they were young adults who were out of school. Overall, positive psychosocial changes were perceived by the majority of the participants. One noted drawback of this study is that it focused on expressive arts in general and included elements of music, art and drama together. However, since distinctions among music, art and drama were not made, it is difficult to determine whether the involvement in one of these programs was more effective in producing positive social outcomes than was involvement in the others.

As was indicated at the beginning of this literature review, social skills deficits present substantial problems for individuals with disabilities. As described in the latter portion of this literature review, many researchers have dedicated a lot of time to finding ways to help them develop these skills. Although many of these studies have shown positive gains, an answer has not been found. One method which has shown a lot of promise, however, is using drama to foster social skill development, even though not all of the studies that have focused on drama techniques reported overall significant improvements. This result can likely be attributed to the measurement techniques employed. In most of the studies, only a single perspective related to skill change was taken or only a single measurement was used. This limitation reduces the

potential that a treatment effect will be evident, since it does not provide a full account of what has occurred. It is logical, therefore, that a study that utilizes multiple measurement methods and multiple perspectives might obtain a more detailed picture of any social skill changes experienced by the participant.

The purpose of this study, therefore, is to investigate whether a community-based drama program for adults with disabilities enhances their perceived social and personal development. In this study, social development will refer to the types of skills that would likely be developed in settings which aid in the acquisition and maintenance of positive social relationships, such as greeting behaviours, initiating conversations, extending and receiving invitations, employing listening skills, using conversational turn-taking, giving positive feedback, responding appropriately to criticism, demonstrating an openness to share ideas, and respecting the ideas of others. Personal development will refer to the types of characteristics associated with self-concept, self-esteem, and self-efficacy.

The first way in which this study differed from previous studies is that it used two forms of triangulation, including data triangulation and methodological triangulation. Data triangulation involves using a variety of data sources for a single study (King & Horrocks, 2010) and for this study, included obtaining data from participants, from family members, and from staff of the drama program. Methodological triangulation involves using different methods to address the same research problem (King & Horrocks, 2010) and for this study included the use of questionnaires, interviews, and researcher observations. According to Berg (2007), every research method provides the researcher with a different line of sight directed toward the social phenomenon being observed, and by combining different lines of sight, researchers are able to obtain a richer picture of reality. By taking more than one viewpoint into consideration and by

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using multiple research methods, this study combined different lines of sight directed towards each of the drama group participants. Therefore, the use of triangulation for this study aided in providing deeper understandings of how this drama program has impacted the lives of its participants.

The second way that this study differed from previous research is that most studies in this area focus on social skills alone. By adding an analysis of personal development, the study might obtain a more detailed depiction of the potential benefits of the program. In addition, the program observed differs from many other drama-based social skills training programs in that the participants are involved in almost every aspect of dramatic performance, from the creative process of developing the characters, plot, and script, to set design and acting in the final performances. Through the use of interviews and observations, this study explored whether these creative processes contribute to the development of the social skills previously mentioned. A community-based program was selected because of its accessibility by individuals with disabilities in the community. It is important to have community-based programs for adults with disabilities who are no longer in secondary school but who still want to develop certain skills and/or to have opportunities to interact socially with others. If this program is found to be effective, the suitability for implementing a drama program solely for individuals with disabilities in secondary schools would be warranted. Using empirical methods, we can gain insight into how this program might have improved the quality of life of its participants, and we can determine whether additional resources are needed to provide more of these programs in the community and in schools.

CHAPTER 3: METHOD

Program Description

This program is part of a charitable organization in Southwestern Ontario that promotes the inclusion of adults and youth with disabilities. It is governed by the organization's Association for Adults with Disabilities and it runs in three month intervals with two-week breaks in between and a longer break during the summer months. The first sequence runs from September to December with two meetings per week on Mondays and Fridays from nine in the morning until noon. The second sequence is a continuation of the first sequence and runs from January to June.

The program is run very much like any theatre group whereby members are involved in every aspect of the process including developing characters and story lines, line memorization, blocking, rehearsing scenes and musical numbers, set building, costume design, lighting, and performing in the final production. The fact that all group members are involved in every aspect of the creative process is what makes this program unique compared to other drama therapy programs in which participants usually play drama games or put on pre-written skits. This program provides its participants with an entire theatre experience, including an audition process that determines participant skill levels.

The two instructors of the drama group have been with this program since it was first implemented approximately nine years ago. The instructors have been instrumental in developing this drama group and making it what it is today. During the drama group meetings, the instructors facilitate group discussions and script writing sessions, engage the participants in several different dramatic activities, and ultimately direct and run the final performance. The

instructors work very closely with each of the group members to teach them the necessary drama skills and to help them improve on these skills best of their ability.

Participants

This study focused on adults with disabilities who had been involved in the community-based dramatic arts program examined in this research. Participants in this program displayed a wide range of intellectual and developmental disabilities and Autism Spectrum disorders including Autism, Asperger's Disorder, Down Syndrome, ADHD, acquired brain injury, cerebral palsy, Williams Syndrome, Rubinstein-Taybi syndrome and two undiagnosed developmental disabilities. At the time of this study, there were 12 members in this drama program between 18 and 65 years of age. This group of participants will be referred to as the subjects (SUB) for the purpose of this study. Members of this drama program were included in this research only if both they and their parent/guardian gave consent. Therefore, only seven of these 12 group members were included in this study.

Also included as participants in this study were the parents or guardians of the subjects (P/G). In those cases in which there was no access to a parent or guardian, someone personally close to the participant was selected instead. In one instance, this included a participant's daughter and in another instance this included a participant's sister. By including close family members, I felt assured that these individuals knew the participant well enough, both before and during their participation in this program. This allowed them to make astute observations about whether the behaviour of the participant had changed since joining the program. This data provided an alternate but complementary perspective to that of the subjects who may not have been fully aware of whether their behaviour had changed. It also allowed the researcher to gather evidence about whether the skills developed in the program had been generalized to other

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settings.

The third group included as participants in this study were the instructors of the program (Instructors). The perspectives of the Instructors provided additional complementary insights into how participants had developed as a result of being part of this program. Instructors were able to provide important details about interactions among group members within the context of the drama program and whether these interactions had improved over the years. The Instructor group includes the two facilitators/directors of the program.

Data Collection

Questionnaires and semi-structured interviews were completed by all participants in all groups (SUB, P/G, and Instructors). Questionnaire items and interview questions were designed prior to use in this study and were based on a combination of studies on social skills interventions (Cappadocia & Weiss, 2011; Duncan & Klinger, 2010; Marriage, Gordon, & Brand, 1995; Tse, Strulovitch, Tagalakis, Meng, & Fombonne, 2007; White, Koenig, & Scahill, 2010). Questionnaires allowed for comparisons among and across all groups while the follow-up interviews allowed for a more in-depth description of any perceived changes. The Social Abilities Questionnaire is comprised of 12 social and personal behaviours that are evaluated on a five-point Likert scale (see Appendix A). In order to measure change, participants chose between Much Better, Better, No Change, Worse, and Much Worse for each item. An example of the Social Abilities Questionnaire is presented in Table 1.

Table 1

Excerpt from Social Abilities Questionnaire

Please indicate the level of change in the participant's ability to do the following tasks since being a part of this program:

1. Say hello and goodbye	Much Better	Better	No change	Worse	Much Worse

The Social Abilities Questionnaire for all three groups was distributed between February and May 2012 and took approximately 10 minutes to complete. Instructors were required to complete a questionnaire for each subject who volunteered to participate. The participants in the P/G and Instructor groups were expected to complete the questionnaires on their own. Due to potential language comprehension problems for individuals in the SUB group, a research assistant individually administered the questionnaires to all participants in this group, excluding one participant. This participant was not attending drama group meetings at the time of this study, and for the sake of timing the researcher administered the questionnaire to this participant. A script was designed to outline precisely how the questionnaires should be administered (see Appendix C). This increased uniformity across the administration of the questionnaires. The SUB group were also asked to complete a 10-minute Self-Perceptions of Personal Abilities Questionnaire (see Appendix B) which required responses to self-statements that measure personal development. These questions were only asked of the SUB group because they measure internally perceived changes, which may be different than the externally noticeable behaviours measured in the Social Abilities Questionnaire. While an individual's behaviour may have changed, only the individual might know the true cause of this change, while others would be making assumptions. The same research assistant administered the SPPAQ. An example of the

Self-Perceptions of Personal Abilities Questionnaire for SUB group is presented in Table 2.

Table 2

Excerpt from Self-Perceptions of Personal Abilities Questionnaire

Please select the answer which best represents how you feel you have or have not changed in the following areas since being a part of this program:

1. My ability to make new friends	Much Better	Better	No change	Worse	Much Worse

In addition to these two questionnaires, individual semi-structured interviews (see Appendix D) were conducted with consenting members of the three groups (SUB, P/G and Instructor). All members from all groups were invited to participate in the interviews. Semi-structured interviews, also know as semi-standardized interviews, involve asking pre-determined questions in a consistent order, while allowing the interviewer the freedom to go beyond the standardized questions and gain a deeper understanding of the subject's point of view (Berg, 2007). Semi-structured interviews were used because they provide a reasonable balance between heavily structured interviews, which do not allow the participant the opportunity to offer interesting perspectives unanticipated by the researcher, and entirely unstructured interviews, which may fail to address important issues (King & Horrocks, 2010). The topics covered by the semi-structured interviews were directly related to the items on the questionnaires, but they allowed for more detailed descriptions of how this program had impacted the development of social and personal skills. Interviews were conducted face-to-face with consenting participants and took place from February to May 2012. The interviews took approximately 45 minutes for each participant, but the total time varied depending on the length of the participant's responses and whether the participant divulged insightful information that was unanticipated by the

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researcher. Interviews for Instructors (see Appendix F) were structured differently compared to those for the SUB and P/G groups since they were asked to provide information about each participant. Therefore, they were asked fewer questions but were asked to answer them seven times over, once for each subject. All interviews were recorded and transcribed to allow for detailed analysis.

The interviews for the SUB and P/G groups (see Appendices D and E respectively) included three types of questions: opening questions, key questions and closing questions. Opening questions serve the purpose of developing rapport with the interviewees before asking the key questions so they feel comfortable enough to tell their story. These questions are broader but are still related to the research topic. Key questions are the questions that are directly related to the research topic and include probes which help the researcher gain detailed information, examples, and a deeper understanding of the interviewee's perspective. Closing questions help to slowly reduce the rapport that has been developed and to fade out the interview (Hennink, Hutter, & Bailey, 2011). An example of the interview schedule for the SUB group is presented in Table 3.

Table 3

Excerpt from Interview Schedule for Subjects (SUB)

Opening Questions

1. How long have you been a member of the Hutton House Players?
2. Do you have any previous theatre experience?

Key Questions

3. Have you made any new friends since joining the Hutton House Players?
4. Do you invite other members of the group to spend time with you outside of the meetings?

Closing Questions

19. Do you have any suggestions for how the weekly meetings could be improved?
20. Would you suggest this program to a friend?
21. Is there anything else that you would like to add?

The Instructor group, however, was asked only a few key questions for each subject in order to limit the length of the interview (see Appendix F).

Finally, regular on-site observations were recorded by the researcher during the weekly group meetings (Mondays and Fridays from nine until noon). According to Hennink et al. (2011), researcher observations are conducted to document an individual's actions and interactions in social settings, to complement other methods of data collection, and to provide contextual understandings about the data from other research methods such as interviews and surveys. These observations could provide insights into how and why this program might be improving the social and personal development of its participants. Being on site on a regular basis and observing the interactions among the subjects allowed the researcher to determine whether there was a discrepancy between what participants said and what actually occurred during the meetings, rehearsals, and preparations.

While conducting the observations, brief notes were taken regarding the itinerary for the day, interactions among participants (including details of what happened), and brief summaries of conversations (including non-verbal behaviours such as keeping eye contact and body language). Specifically, notes were taken about the presence or absence of the social skills outlined in the questionnaire, including extending and receiving invitations, listening skills, initiating conversations, conversational turn-taking, giving positive feedback, responding appropriately to criticism, openness to share ideas, and respecting the ideas of others. To make this recording process efficient, a checklist of all potential observable behaviours was developed and used (see Appendix G). The checklist also had ample room to record notes about unanticipated behaviours.

Upon exiting each program session, detailed descriptions based on the notes taken in the field were written by the researcher. This included descriptions of direct observations, analytic notes, and subjective reflections. Analytic notes are ideas that occur to the researcher as he/she writes up the full field notes, and these may include linkages that were realized or possible theories that may explain what happened. Subjective reflections include personal observations, feelings and self-reflections about what he/she has observed (Berg, 2007). It is important to keep analytic notes and subjective reflections separate from direct observations. Rather than trying to record the behaviours of all seven participants during every meeting, three participants were selected as the focus for observation at each meeting. These specific, individual focused observations took place between January and April 2012. During this time, each subject was observed three times. This ensured that detailed observations took place for each of the participants equally. Nonetheless, the design and implementation of the program necessitated that all SUB group members participate together nearly all the time. Therefore, the researcher

was able to record any highly noticeable and/or important behaviours by the SUB group participants regardless of whether they were selected for observation on any given day. An example of the observation checklist is provided in Table 4.

Table 4

Excerpt from Observation Checklist

Subject Number _____

Target Skills	Observations
1. Saying hello and goodbye	
2. Listening to others	
3. Sharing with others	

It is possible that the subjective comparisons about changes in social and personal behaviours examined in this study were susceptible to *social desirability bias*, a research term used to denote the tendency of respondents to reply in a manner that will be viewed favorably by others, usually by over-reporting good behaviours and/or underreporting bad behaviours (Crowne & Marlowe, 1960). To safeguard against this effect, the SUB data was triangulated with the data gathered from the P/G and Staff groups and researcher observations about each SUB participant.

Standardized measures were also used in order to provide a picture of each Subject's current state. The following two standardized tests were administered, the Coopersmith Self-

Esteem Inventory: Adult Version (Ryden, 1978) and the Vineland Adaptive Behaviour Scales, Second Edition (Sparrow, Cicchetti, & Balla, 2005). The Coopersmith Self-Esteem Inventory: Adult Version, a version of the original Coopersmith adapted by Ryden (1978), measures self-esteem in adults. It measures attitudes towards the self in various areas of experience such as social, academic, and personal. In the Self-Esteem Inventories manual, self-esteem is defined as reflecting a personal judgement of worthiness expressed in an individual's beliefs towards the self (Coopersmith, 1987). The Coopersmith Self-Esteem Inventory: Adult Version was administered to the SUB group and took approximately 10 minutes to complete.

The Vineland Adaptive Behaviour Scales, Second Edition (Vineland-II) (Sparrow, Cicchetti, & Balla, 2005) is an individually administered measure of adaptive behaviour for individuals from birth through age 90. The Vineland-II includes two forms which differ only in how they are administered, the Survey Interview Forms and the Parent/Caregiver Rating Form. Examiners may choose the Parent/Caregiver Rating Form when a face-to-face interview is not practical or when the quantity of information provided by the semi-structured interview is not needed. The Vineland-II assesses adaptive behaviour in the following four broad domains: Communication, Daily Living Skills, Socialization and Motor Skills. For this study, the Survey Interview Form for the Socialization Domain was administered to the P/G group. The Socialization Domain includes three subdomains. The first subdomain is Interpersonal Relationships, which measures how individuals interact with others. The second subdomain, Play and Leisure Time, measures how individuals spend their leisure time. The third and final domain, Coping Skills, measures how individuals demonstrate responsibility and sensitivity to others. The Survey Interview Form takes approximately 20 to 60 minutes to administer. However, this study used only one of the four domains, and so the administration of this form varied between

five and 15 minutes (Sparrow, Cicchetti, & Balla, 2005). In addition to helping the researcher gain deeper insight into participants' current levels of social functioning, the use of the Vineland-II in this study allowed for easy comparison to other studies examining social skills. The Vineland Adaptive Behaviour Scales are a commonly used measure of social skills, as demonstrated in the literature review section.

Data Analysis

The data gathered for this study resulted in five different data sets about potential changes in each SUB's social and personal behaviours: 1) SUB self-perceptions of social abilities; 2) SUB self-perceptions of personal abilities; 3) P/G perceptions; 4) Instructor perceptions; and 5) researcher observations. All five data sources were analyzed separately and then triangulated to provide multiple perspectives as to whether the program had resulted in any changes.

The Social Abilities Questionnaire asked members from all groups (SUB, P/G, Instructor) to make comparisons between current point-in-time social and personal behaviours and those the SUB demonstrated before being involved in the drama program. This resulted in three comparison indicators for each of the seven Subjects. These three indicators would reveal whether changes had occurred for each of the behaviours listed on the questionnaire.

The Self-Perceptions of Personal Abilities Questionnaire provided each SUB's perspective on four personal development behaviours.

Interview data analyses were conducted using the thematic analysis process as outlined by Braun and Clarke (2006). According to Braun and Clarke, thematic analysis is a method for identifying, analyzing, and reporting themes within data. For this study, themes included perceived levels of change in relation to the targeted social skills and personal development items. However, the analysis also allows flexibility for the potential emergence of other related

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themes. The thematic analysis process includes the following six phases: 1) familiarizing oneself with the data, which involves actively reading all of the data while searching for themes and taking notes; 2) generating initial codes, which for this study are related to perceived level of change; 3) searching for themes, which involves sorting codes into different themes, 4) reviewing and refining themes; 5) defining and naming themes, which includes writing a detailed analysis of each theme; and 6) telling the story of the data through a detailed report. Using this same thematic analysis method, all researcher observations about each SUB were categorized into themes. Comparisons revealed that the researcher observation themes were the same as those that resulted from the interview analysis.

Once all five data sets were analyzed separately, the resultant evidence from each was triangulated for each of the SUB group members. Triangulation is the comparison of different types of data from different sources to see whether they converge around the same set of events or facts (Yin, 2006). To accomplish this, the researcher compared the results from the analysis of each source of data and made an interpretation as to whether the results from these different data sources supported or contradicted each other (Creswell, 2005). This enabled the researcher to determine whether there was enough evidence to state whether behavioural changes had occurred. This determination was supported by details about the triangulated frequency and significance or weight of behavioural occurrences. Once all of this evidence was interpreted for each individual Subject, the overall results were analyzed to determine the overall effectiveness of the drama program.

CHAPTER 4: RESULTS AND ANALYSIS

Of the 12 participants enrolled in this drama group, I was able to recruit six to participate in this study, plus one more who had been a member of the group previously but who was not enrolled at the time of this study. Included among these seven participants is one individual who was new to the drama program. I decided to include one participant who had been in the program for less than a year in order to determine whether length of time in the program influenced results. As for the participants whom I was not able to recruit, they were either not interested in participating, their parents did not want them to participate, or they felt that they did not meet the criteria for participation (i.e., they claimed to have a physical disability, not an intellectual or developmental disability).

Overall, 17 interviews were conducted: seven from the SUB group, eight from the P/G group, plus the two Instructors. The P/G group included one daughter, one dad, one sister, and five mothers. There were also a total of 29 Social Abilities Questionnaires returned, as well as seven Self-Perceptions of Personal Abilities Questionnaires. The data for each subject will be presented in the following order: standardized measure scores, questionnaire data, interviews, and observations for each target social skill (subject's perspectives, family perspectives, and both Instructor perspectives), followed by a brief summary.

According to Perry, acquiescence, the tendency of the participant to say yes to questions regardless of their content, is the most common form of response bias among individuals with intellectual disabilities (2004). Acquiescence involves complying with instructions given by individuals in authority, or agreeing without complaint. This form of response bias was evident in a few of the interviews wherein the participant would respond with a "yes" to most of the

questions asked, which resulted in the researcher's continual prompting to try and retrieve a more detailed response from the participant. According to Heal and Sigelman (1995), acquiescence bias is more exaggerated in respondents with low mental abilities. Hartley and MacLean (2006) found that adolescents and adults with intellectual disabilities had a tendency to choose the most positive response available in Likert scales, and this bias was seen to increase with individuals who demonstrated lower levels of intellectual functioning. This presents a problem for the questionnaire data since it suggests that participants with intellectual disabilities would be more likely to select *Much Better* on the questionnaire. However, Perry (2004) also stated that including third party responses, such as those from staff or parents, is one possible solution to the response bias issues mentioned previously. Although the drama group participants themselves tended to have high responses on the questionnaires, the other two perspective groups also had generally high responses on the questionnaires. This suggests that these responses were likely accurate. Having the addition of the P/G group and the Instructors helped to provide a more accurate description of the rate of change for each participant.

Laura

Laura is a 69 year-old woman who was previously married but who now lives with her partner. She has two daughters and five grandchildren. Laura had no theatre experience when she joined the drama group nine years ago as one of the original members. According to Laura's daughter, she has fibromyalgia and anxiety. Laura classifies herself as a housewife and homebody who once worked in a department store long before she had kids.

Standardized Measures

On the Coopersmith Self-Esteem Inventory: Adult Version (Ryden, 1978), Laura's score was 43, which is considered a somewhat above average self-esteem score among adult women.

The Socialization Domain of the Vineland Adaptive Behaviour Scales, Second Edition (Vineland-II) (Sparrow, Cicchetti, & Balla, 2005) includes three subdomains: Interpersonal Relationships, Play and Leisure Time, and Coping Skills. The Vineland-II uses the v-scale, a standard-score scale, to describe an individual's relative level of functioning compared with that of others of the same age. Vineland II v-scale scores range from 1 to 24 with a mean of 15. Laura's v-scale scores in the subdomains, along with the bands of error at the 95th percent level of confidence, are as follows: Interpersonal Relationships, 10 ± 2 (8-12); Play and Leisure Time, 13 ± 2 (11-15); and Coping Skills, 16 ± 1 (15-17). Age equivalents were 11:3, 15, and 22+, respectively. For Play and Leisure Time and Coping Skills, Laura's scores are considered "Adequate" when compared to other adults of the same age, whereas her Interpersonal Relationships score are considered "Moderately Low". This suggests that Laura would have difficulties engaging in or doing the following with others: meeting with friends regularly, starting conversations with others, and understanding indirect cues in conversations.

Table 5

Summary of Social Abilities Questionnaires for Laura

Skill	Laura	Daughter	Instructor 1	Instructor 2
1. Say hello and goodbye	No change	No change	Much better	Better
2. Listen to others	Better	Better	Much better	Better
3. Share with others	No change	Better	Much better	Much better
4. Encourage others	No change	Better	Much better	Much better
5. Interact with peers	No change	Much better	Much better	Much better
6. Take turns in conversations	Much better	Better	Much better	Better
7. Give compliments	No change	Better	Much better	Better
8. Give positive feedback	No change	Better	Much better	Much better
9. Respond appropriately to criticism	No change	Better	Much better	Better
10. Share ideas with others	No change	Much better	Much better	Much better
11. Respect the ideas of others	Much better	No change	Much better	Better
12. Give and receive social invitations	No change	No change	Much better	Much better

Table 6

Laura's Self-Perceptions of Personal Abilities Questionnaire

Item	Response
1. My ability to make new friends	Better
2. How I feel about myself	Much better
3. My ability to carry out a task	Much better
4. My ability to speak in front of others	Much better

Based on the summaries of questionnaire data pictured in Table 5 and Table 6, it appears that there is a variation in the reports of Laura's rate of change. On the Social Abilities Questionnaire, the only items for which Laura reported improvements were listening to others, taking turns in conversations, and respecting the ideas of others. On the Self-Perceptions of Personal Abilities Questionnaire, she reported improvements for all of the items. Her daughter reported a much higher rate of improvement, and the Instructors reported improvement for all of the social skills listed.

Giving and Receiving Social Invitations

When asked whether she invited other group members to spend time with her outside of meetings, Laura said, *"Not really."* When asked why, she said, *'I don't know, I guess I'm just not the person that invites other people, and it doesn't just go for here, it's anywhere."*

According to Laura's daughter, Laura does not ask group members to spend time with her socially and she does not spend much time with members outside of meetings.

Observations: With a few other group members, Laura helped to develop a skit demonstrating how to appropriately ask someone to spend time with you socially by phone.

Initiating Conversations/Reciprocal Conversations

Laura doesn't feel that she is very good at starting conversations with others. She's not sure that this has changed since joining the drama group because she feels that she still has a tendency to hold back.

Laura's daughter believes that her ability to initiate conversations has improved because, as she says, *"My mother has always been very timid, she sort of stays in the background, but I think she speaks her mind a bit more now than she ever did before. She's actually not as intimidated to speak up."*

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Observations: During drama group meetings, particularly during the break, Laura engaged in many conversations with other group members. Also, Laura did not interrupt while others were speaking.

Listening to/Respecting the Ideas of Others

Laura stated that she enjoys listening to other group members share their ideas. She is a lot more vocal now when she likes someone's ideas. She will tell the person that she likes their idea because she feels that they need to know that, whereas before she would simply sit back and smile.

On whether Laura's ability to listen while others are speaking has improved, Instructor 1 stated: *"Yup. She actually shows an interest in everything that people say."*

Observations: While working in a small group, Laura listened while others shared their ideas, encouraged them, and did not reject any of their ideas.

Laura appeared to listen carefully while others were speaking and responded with comments to show that she was interested, such as "Oh yeah?" and "Is that right?".

Sharing Ideas

According to Laura, she has no problem sharing her ideas with the group. However, when she first joined the group, she was far less inclined to share her ideas because she was too shy, and she was worried that what she had to say would be considered stupid.

Laura's daughter also believes that Laura is now more likely to share her ideas: for example, *"when they are brainstorming for ideas for their different plays and things like that she often offers a lot of ideas which again she would have never done that for fear that someone would think it's silly."*

Instructor 1 stated, *"Yes she would never share ideas. Now she is very active in sharing*

ideas…. She loves the creative process, she loves to create characters and costumes and is very willing to participate in any conversation, not only for herself but everyone else as well."

Instructor 2 added, *"Yep, in sharing sessions she talks about her life now, and what's important in her life, not just research and other things, she never used to do any of that. She was a very private person."*

Observations: While working on a skit in a small group, Laura contributed ideas to the discussion.

During one of the meetings, Laura discussed taking the train to visit family, which was relevant to the main production on which they were working. During this meeting, Laura also talked about a play that she was doing at that time with a different organization.

Giving Feedback

Laura's daughter does not believe that Laura's ability to provide feedback to others has improved mainly because Laura does not like to criticize people, whether it be constructive or otherwise.

Instructor 1 said, *"She didn't offer feedback when she arrived, and as I said before she is the mother figure, she is the one they approach first if they have an issue."*

With regard to Laura's ability to give positive feedback, Instructor 2 stated: *"She is a leader there, along with [Jacob] and a couple other people. Positive feedback, she is good with that. Every show we have done for the past five years, after the shows are over she will encourage them to decide on what their strengths were through all five or six shows, with what their weaknesses were."*

Observations: After two other members rehearsed a skit that they had created, Laura encouraged them by laughing and saying "That's what they do!" in reference to the characters

they had created.

After performing a skit with another member who had not had the chance to rehearse, Laura told them, "You did very well!".

Responding to Criticism

Previously, when Laura felt her ideas were being critiqued, it made her less likely to share her ideas again. Now, it doesn't bother her as much when people don't like her ideas, she believes that everyone has their own ideas and they don't have to like yours.

According to Laura's daughter, Laura still is upset by criticism, although she may not be quite as sensitive now.

Instructor 1 believes that Laura *"accepts it… actually looks for feedback whereas before she would hate to have people talk to her about things, but will actually ask for feedback now, how am I doing, what can I do better, I don't know show me. Total turn around."*

Instructor 2 said: "*Well it has to have changed because she didn't like to hear it before I'm sure, nobody likes to hear that they are anti-social or that they're not participating. That's the way it was so now she embraces the group, you know."*

Observations: While rehearsing a skit, Laura got the lines wrong and was corrected by another group member. Laura responded, "Oh, that's right!" and continued.

Speaking in Front of Others

When asked how she feels about speaking in front of others, Laura said: *"I'm a lot better than I was!...I said at the very first Christmas party that I MC'd, that I would never say boo behind a bus ticket before. Now, I don't mind, obviously!"* When asked how she felt when she first joined the group, she said: *"I would never have done it at the beginning. No way."*

Laura's daughter also believes that Laura has improved in her ability to speak in front of

others: *"She gets all dressed up in front of people, she gets on stage in front of people. She never ever ever would have done that in the past."*

According to Instructor 2, *"[the organization] couldn't hardly believe the change in her, so the administrators asked, why don't we ask her to MC the big Christmas party? 300 people. She had that kind of confidence now."*

<u>Observations</u>: Laura appeared to have no difficulty getting up in front of the group to do a monologue, to rehearse a skit, or to share her ideas.

Making Friends

With regard to her ability to make new friends, Laura stated: *"It's better than it was. I guess if somebody comes into my life that I'd like to make a friend with, I think I could do it more now than a few years ago."*

According to Laura's daughter, Laura's ability to make new friends has improved, and she is more outgoing now than she ever was.

Instructor 2 said that when Laura first joined the group, *"she was anti-social. She will admit it herself. She had problems with noise level, she was just irritable, she really didn't want to do group work or work with people, she was just like 'leave me alone!"* Now, she accepts others, respects them, and embraces them. She is a lot more sociable.

Confidence

When Laura first joined the drama group, she was terribly shy. In her own words, *"I was very withdrawn….this ended up being a whole new experience of me finding out who I was."* As for her reasons for joining the drama group, she said: *"I guess I was looking for something that I could do, most of my life was you can't do this and you can't do that. I guess I was looking for something I could do, and this ended up being it."* When asked if she views herself differently

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now as compared to when she first joined, she said: "*Oh yeah, definitely. I have more confidence in myself, a lot more. And I like who I am, which years ago I wouldn't have said that.*"

Laura's daughter agrees: "*She's a lot more confident, it's like I'm repeating myself. She is not nearly as timid. If something needs to be done she will do it, instead of waiting for someone else to do it…. To be out there as herself in front of people is not something she would do. She would not take charge, she would not do that type of involvement at all.*"

Additional Outcomes

Less Time in Wheelchair

"*When I first came to [the drama group], they couldn't get me out of my chair. That's how 'in' I was.*"

According to Instructor 1: "*[Laura] was very much a very cross, middle aged woman when she came to us, confined to a wheelchair, or reliant on a wheelchair. Not outgoing, very much a quiet person….She's come back to life, from a woman who was basically reliant on a wheelchair to a very happy, instead of grumpy and miserable, very happy [sic]….she doesn't use the wheelchair anymore when she is here.*"

Instructor 2 stated that when Laura first joined the drama group, she was in so much pain from arthritis that she was basically reliant on a wheelchair. After some time, she started to get out of her chair. As Instructor 2 said, she would "*move just for 10 minutes at a time and then quickly back to her chair. And that started increasing, 15 minutes, 20 minutes, and then she forgot she needed the chair…. And the theatre, the movement and the singing and speaking helped her forget her pain.*"

Becoming the "Mom" of the Group

"*I attribute a lot to the [drama group], they have done so much for me. They have made*

me a completely different person to what I was. Like I said I like who I am now, and I'm a lot

better at giving opinions or trying to help somebody. I think I've become a bit of a mom to that

group. I like it, it's kind of neat."

Laura's daughter added: *"I would expect you have probably seen she is like the mother*

hen. She is mothering them and they are probably going to her as well."

In Instructor 1's opinion, *"...from being a very stern middle aged woman she's turned*

into very much a mother or grandmother figure to a lot of the cast members. They all trust her

very much. She's the first one they come to."

Instructor 2 said that Laura *"became sort of the [drama group] mother, you know. They*

relied on [Laura] in a lot of ways. She helped them to organize themselves better with their

books, and if they couldn't make notes sometimes she would make them for them, but she helped

them organize their drama books and scripts."

Becoming More Involved

Laura was recently involved in a play put on in the community outside of this drama

group. This was the first time that she has performed in a play with a different community

organization. Laura believes that being a part of the drama group has helped her to become more

involved in other activities and programs in the community, which is demonstrated by her having

auditioned for another play.

According to Laura's daughter: *"She also recently did a play with [community*

organization], which is outside of that group and that comfort zone which she is used to, and

again she would never have done something like that."

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Laura: Triangulation of Data and Summary

From the qualitative evidence above, Laura's overall perception of her abilities appears to be mostly consistent with her scores from the Coopersmith Self-Esteem Inventory-Adult Version. For example, Laura answered *Like Me* to a number of positive statements from the inventory, including: I like to be called on when I am in a group; people usually follow my ideas; I'm never shy ("*not anymore!*"); I'm pretty sure of myself; I'm easily to like; and I'm pretty happy. She also answered *Unlike Me* to the following statements: I find it hard to talk in front of a group; someone always has to tell me what to do; I don't like to be with other people; and I always know what to say to people. She also answered *Like Me* to the following negative statements: I get upset easily when I am scolded, I often feel upset, and most people are better liked than I am. The first sentence, "I get upset easily when I am scolded" is consistent with Laura's daughter's comment that Laura still gets upset when criticized. However, the last two statements are inconsistent with the qualitative data.

Laura's Vineland-II scores were also consistent with the qualitative data. For example, both Laura and her daughter said that Laura does not ask friends to meet with her outside of meetings. Laura also stated that she still has difficulty initiating conversations with others, which is consistent with her daughter's response on the Vineland-II. However, the questions on the Vineland-II can be somewhat misleading. For example, one of the questions asks whether the subject goes out with friends in the evening with adult supervision. For a high-functioning adult like Laura, she would not need adult supervision, and therefore her daughter responded "never", thus lowering Laura's score. However, her daughter responded "usually" when asked whether Laura meets with friends in the evening without adult supervision. She also responded "never" when asked whether Laura meets with friends regularly. This demonstrates how the questions

lead the respondent to a particular answer. If the subject is adult and doesn't need supervision, they would not go out in the evening with friends with adult supervision. Therefore, they must go out in the evening with friends without adult supervision, even though the respondent previously stated that the subject does not meet with friends regularly.

Overall, it appears that the only two skills in which Laura showed little or improvement on were in giving and in receiving social invitations and in initiating conversations. For giving positive feedback and responding to criticism, there were mixed results, with some respondents saying that Laura had improved, and others saying that she had not. The skills for which Laura had significant improvement were sharing ideas, speaking in public, and demonstrating confidence. Laura is far less shy now as compared to when she first joined the group, and she has developed the confidence not only to speak in front of the group, but also in front of hundreds of people, something Laura and her daughter never thought she would do.

Ashley

Ashley is a 43-year old woman with a mild intellectual disability and a functional age of 13 years. She has been a member of this drama group for approximately nine years and does not have any prior theatre experience.

Standardized Measures

On the Coopersmith Self-Esteem Inventory: Adult Version (Ryden, 1978), Ashley's score was 22, which is considered a significantly below-average self-esteem score among adult women.

As for the Vineland-II (Sparrow, Cicchetti, & Balla, 2005), Ashley's v-scale scores in the subdomains, along with the bands of error at the 95th percent level of confidence, are as follows: Interpersonal Relationships, 8 ± 2 (6-10); Play and Leisure Time, 11 ± 3 (8-14); and Coping Skills, 11 ± 2 (9-13). Age equivalents were 7:10, 13:0, and 11:9, respectively. For Interpersonal Relationships, Ashley's adaptive level is "Low," and for Play and Leisure Time and Coping Skills, her adaptive level is "Moderately Low." This suggests that Ashley would have difficulties engaging in or doing the following with others: meeting with friends, going on dates, not saying inappropriate things in public, controlling negative feelings, keeping secrets, and thinking about the consequences before making decisions.

Table 7

Summary of Social Abilities Questionnaires for Ashley

Skill	Ashley	Dad	Instructor 1	Instructor 2
1. Say hello and goodbye	Much better	No change	Better	Better
2. Listen to others	Better	Better	Better	Better
3. Share with others	Much better	Better	Better	Better
4. Encourage others	Better	Better	No change	Better
5. Interact with peers	Much better	Better	Better	Better
6. Take turns in conversations	Much better	Much better	Better	Better
7. Give compliments	Much better	Much better	Better	Better
8. Give positive feedback	Much better	Much better	Better	Better
9. Respond appropriately to criticism	Much better	Much better	No change	Better
10. Share ideas with others	Better	Much better	Better	Better
11. Respect the ideas of others	Much better	Much better	Much better	Better
12. Give and receive social invitations	Much better	Much better	Better	Better

Table 8

Ashley's Self-Perceptions of Personal Abilities Questionnaire

Item	Response
1. My ability to make new friends	Much better
2. How I feel about myself	Much better
3. My ability to carry out a task	Much better
4. My ability to speak in front of others	Much better

For the questionnaire summaries in Table 7 and Table 8, improvements were noted across the board for almost all of the items. However, Ashley and her dad were more likely to report a higher rate of improvement than were Instructor 1 and Instructor 2.

Giving and Receiving Social Invitations

According to Ashley, she does not invite other group members to spend time with her outside of meetings, and she cannot remember whether anyone has ever asked her.

Ashley's dad believes that being a member of the drama group has helped her to become more comfortable asking friends to spend time with her socially, but she does not really have any friends from the drama group who will come over to the house.

Initiating Conversations/Reciprocal Conversations

Ashley feels comfortable starting conversations with others, and she said that this is because she is less shy now compared to when she first joined the drama group.

According to Ashley's dad, her ability to initiate conversations with others has improved since joining the drama group.

Observations: During breaks, Ashley engaged in conversations with other group members.

Listening to/Respecting the Ideas of Others

Ashley said that she does not know what she does when other group members share their ideas.

Instructor 1 believes that Ashley is a good listener and has always been a good listener, but that she just gets the facts confused sometimes.

Observations: Ashley appeared quiet and attentive while others were speaking during

group discussions.

Sharing Ideas

Ashley now feels comfortable sharing her ideas with the group, whereas when we first joined the group, she felt that she was really shy. She feels that her friends in the group have helped her to become less shy, and now she talks a lot more.

According to Instructor 1, when Ashley first joined the group, she was very quiet. Now, if it is an area of conversation about which she feels comfortable, she will share her ideas with the group.

Instructor 2 agrees: *"The first few years we were working with her, she never had an opinion about anything, she was just closed right up. She was a good listener, no one ever knew how [Ashley] felt, and that started to change…. She understands everything that is going on, but she wasn't very vocal about it. We helped her to learn that theatre is very vocal, it helps you to be expressive."*

Observations: During drama group meetings, Ashley infrequently contributed to group discussions unless she was asked directly for her input or unless the group was discussing her character. However, during one of the meetings, several of the members were home sick and so there were only five people present. During this meeting, Ashley appeared to be more comfortable sharing her ideas and experiences with the group.

Giving Feedback

Ashley said that if she does not like another group member's ideas, she will just walk away. She doesn't know how she responds when she likes another group member's ideas.

Ashley's dad does not feel that her ability to provide constructive criticism to others has improved.

Instructor 1 had a similar response: *"Sometimes her advice or feedback is not the best, but she is always there and willing to help, wants to be supportive, but sometimes the advice isn't the best."*

In relation to giving feedback, Instructor 2 believes that if Ashley had something to say, she would only offer it to the group if it was really important to her.

Observations: Ashley was rarely observed giving feedback to other group members, but she did sometimes give a few words of encouragement. For example, when another group member gave an idea for their character, she responded, "That's good!"

Responding to Criticism

Ashley said that she does not respond when another group member does not like one of her ideas.

With regard to Ashley's ability to respond to criticism, Ashley's dad believes that it depends on who is criticizing her. He feels that she is perfectly fine with criticism from the staff of the drama group, whereas at home she is not as accepting of criticism. However, he does feel that her ability to respond to criticism has changed since joining the drama group.

Instructor 1 believes that Ashley's ability to respond to criticism has improved. When she first joined the group, she would get very angry directions during play rehearsals if she were given that she found confusing. Now, if she gets upset, she will try to remove herself from the situation.

According to Instructor 2, it was not easy for Ashley to accept criticism. She used to have anger issues, but she has taken some anger management courses and now she is better at dealing with her anger.

Observations: During a rehearsal, Ashley began to speak one of her lines and was cut off

by Instructor 2, who asked her to say her line differently. Ashley listened to what Instructor 2 had to say and started again with his suggestions. She did not appear to be upset that he had interrupted.

Speaking in Front of Others

Ashley said that she feels comfortable with speaking in front of others now, whereas before, she was very, very shy and did not talk at all.

Ashley's father believes that her ability to speak in front of others has improved since joining the drama group. For example: *"Last year [Ashley] was asked to speak to those who participated in the golf and country club. She was asked to stand up there and speak about [the drama group] and her participation there and so on. She was pretty at ease about it and I think for the most part did a very good job."*

Instructor 2 agrees: *"For quite a while, you could hardly hear her when she spoke on stage…. She has improved a lot in that area. And she was nervous about singing, she was nervous in groups period and speaking up in front of people."*

Making Friends

Ashley feels very good about her ability to make new friends. Before she joined the drama group, she did not have any friends, but now she does, a change which she attributes this to the drama group.

Ashley's father believes that her ability to make new friends has improved since joining the drama group.

Observations: Ashley interacts freely with many of the group members and appears to have many friends in the group.

Confidence

According to Ashley's dad, her confidence has improved noticeably since joining the drama group.

Instructor 1 stated that Ashley's self-esteem is better than it was, and that she thinks better of herself than she did previously.

<h3 style="text-align:center">Ashley: Triangulation of Data and Summary</h3>

It appears that based on the Coopersmith Self-Esteem Inventory-Adult Version, Ashley's overall perception of her abilities is fairly inconsistent with the qualitative evidence. For example, on the Coopersmith, she answered *Like Me* to the following statements: I find it very hard to talk in front of a group; I have a low opinion of myself; I don't like to be with other people; and I get upset easily when I am scolded. The fact that she answered *Like Me* to these statements seems contrary to the interview and questionnaire data. However, she also answered *Like Me* to these statements: I'm a lot of fun to be with; I'm popular with people my own age; I like to be called on when in a group; and if I have something to say, I usually say it. These statements seem to be more in line with the qualitative evidence, except that she does not seem to say too much during group meetings.

Ashley's Vineland-II scores seem consistent with the qualitative data, since the interviews seem to suggest that she does not spend very much time with friends outside of group meetings. However, the question that was once again misleading asked whether she goes places with friends in the evening with adult supervision. Since Ashley's dad said that she does not need supervision, he answered "*Never*" to this question, even though she sometimes goes places with friends without adult supervision. This resulted in Ashley having a lower score for this subdomain.

According to the interviews and observations, there appears to be no change in Ashley's ability to give and to receive social invitations, but according to the questionnaires, there does appear to be improvement. Based on the interviews and questionnaires, Ashley's ability to initiate and to engage in conversations with others has improved. It is difficult to say whether her ability to listen to others has improved or whether this is something at which she has always been good. As for sharing her own ideas, there does seem to be improvement, which Ashley attributes to the fact that she is less shy now. However, during observations, she did not appear to share her ideas very often. Based on the interviews, there does not seem to be any change in Ashley's ability to give feedback to others, but the questionnaires suggest that she has improved. It appears that Ashley's ability to respond to criticism has improved, since she does not become as angry as she did when criticized in the past. However, in one of the interviews it was mentioned that she had taken an anger management course, and so the change could be a result of this and not of the drama program. Based on the questionnaires and interviews, it appears that her ability to speak in front of others has improved. Yet, on the Coopersmith, she answered *Like Me* to the statement "I find it very hard to talk in front of a group." Finally, Ashley's ability to make friends and her confidence has also improved.

Jacob

Jacob is a 42 year-old male with borderline intellectual and developmental impairments whose functional age is around 16 years. He also has dyslexia and a processing disorder. Since having been laid off several years ago, Jacob no longer has a job, but he is involved with several groups in the community. In relation to previous theatre experience, Jacob had been involved in drama in high school but had drifted away from it until approximately eight years ago when he became a member of this community drama group.

Standardized Measures

On the Coopersmith Self-Esteem Inventory: Adult Version (Ryden, 1978), Jacob's score was 38, which is considered to be an average self-esteem score among adult men.

As for his scores on the Vineland-II (Sparrow, Cicchetti, & Balla, 2005), Jacob's v-scale scores in the subdomains, along with the bands of error at the 95th percent level of confidence, are as follows: Interpersonal Relationships, 10 ± 1 (9-11); Play and Leisure Time, 10 ± 2 (8-12); and Coping Skills, 12 ± 2 (10-14). On all three subdomains, Jacob's adaptive level was "Moderately Low" as compared to the scores of other adults of the same age. Age equivalents were 11:3, 10:6, and 12:9, respectively. This suggests that Jacob would have difficulties engaging in or doing the following with others: going places with friends during the day or in the evening with or without adult supervision, staying away from situations or relationships that are dangerous, using caution when entering risky social situations, and understanding indirect hints or cues in conversations.

Table 9

Summary of Social Abilities Questionnaires for Jacob

Skill	Jacob	Mom	Sister	Instructor 1	Instructor 2
1.Say hello and goodbye	Much better	Much better	No Change	Much better	Better
2. Listen to others	Better	Much better	Much Better	Better	Better
3. Share with others	Much better	Better	Much Better	Much better	Much better
4. Encourage others	Better	Much better	Much better	Better	Much better
5. Interact with peers	Much better	Much better	Much better	Much better	Better
6. Take turns in conversations	Better	Better	Much better	No change	Better
7. Give compliments	Better	Better	Much better	Much better	Much better
8. Give positive feedback	Much better	Much better	Much better	Much better	Better
9. Respond appropriately to criticism	Much better	Much better	Much better	Better	Better
10. Share ideas with others	No change	Much better	Much better	Much better	Much better
11. Respect the ideas of others	Much better	Much better	Better	Much better	Better
12. Give and receive social invitations	Much better	No change	Better	No change	Better

Table 10

Jacob's Self-Perceptions of Personal Abilities Questionnaire

Item	Response
1. Ability to make new friends	Much better
2. How I feel about myself	Much better
3. My ability to carry out a task	Much better
4. My ability to speak in front of others	Better

A summary of the questionnaire data depicted in Table 9 and Table 10, suggests that the only skill for which two respondents reported *no change* was give and receive social invitations. For all other items, at least four of the five respondents answered *better* or *much better* for Jacob's degree of improvement.

Giving and Receiving Social Invitations

When asked if he invited other group members to spend time with him outside of group meetings, Jacob said that he did not, simply because he prefers to keep home and work separate, and he considers the drama group to be work that he really enjoys. When asked if other members of the group ask him to spend time with them outside of meetings, Jacob said that they have but that he declines their invitations for the same reason mentioned previously.

According to Jacob's sister, he does have friends at all of the groups for which he is a part including the drama group and different organizations in the community, but he does not invite these friends to spend time with him outside of meetings. The only instances in which Jacob has spent time with these friends outside of meetings are those that have been pre-arranged by one of the leaders within the group, and not by any of the members.

However, according to Instructor 2, Jacob does go to lunch with one of the members of the group every Friday, which was arranged by the two of them.

Observations: Working with three members of the drama group, Jacob co-wrote a short skit that demonstrated appropriately how to invite someone over the phone to spend time with you socially.

Initiating Conversations/Reciprocal Conversations

When asked how he feels about starting conversations with others, Jacob said, *"I am somebody who starts conversations very well. I don't have any problem asking someone how*

their day is going and kind of working from that point on." When asked whether this has changed since joining the drama group, Jacob responded, *"I am not as scared to have a conversation with someone I don't know all that well."*

Jacob's mom and sister both agree that being a member of the drama group has helped Jacob with his ability to initiate conversations. Jacob's sister said: *"He's not as scared if someone is talking about something to start throwing out suggestions or an idea or thought, like I heard this on the radio, and he will talk about hockey with someone who he knows like sports."*

With regard to conversational turn-taking or reciprocal conversations, Jacob's mom and sister believe that he has improved. According to Jacob's mom: *"He would just keep chattering even though someone else was talking…. if he was nervous he would just keep on chattering. Being at [the drama group] has helped a whole lot."* His sister added: *"He sort of realizes okay, yes I am nervous, but pause and count to ten, do you really need to say what you need to say, or can you hold it back until later."*

According to Instructor 1, *"[Jacob] was the outcast for many groups because he was always the outspoken one and wouldn't let anyone else have a word. Now his timing is much better, his social skills have improved immensely, he knows when it is time to listen and time to talk."*

To summarize what was stated by Instructor 2, Jacob is able to carry out conversations now with at least half a dozen members of the group, whereas previously he had been more self-centered. He used to interrupt a lot and had to be spoken to about giving everyone a turn, but now he is not interrupting as much. Listening for cues in theatre to know where to say his lines has helped him learn about cues in regular conversations.

Observations: It was noted during all three observation periods that in group discussions,

Jacob would sometimes interrupt or speak over others while trying to make his point. This appeared to happen less often while in one-on-one conversations.

Listening to/Respecting the Ideas of Others

When asked what he does when other members of the group share their ideas, Jacob said, *"I listen very closely to what they have to say. I think about their ideas and see if there is any way we can try to incorporate a few of the ideas together and kind of put it in such a way where we can kind of use all the ideas to come up with something that is going to work."* When asked what he used to do when he first joined the group, Jacob said he *"would sit back and not pay attention and not listen….at the time I was just frustrated."*

According to Instructor 1, Jacob's ability to sit and listen while others are speaking has improved. Jacob has also learned to catch himself when he feels that he is talking out of turn.

Instructor 2 stated: *"He has trouble listening, but there is a small bit of improvement there. He is trying to hold himself back and hear as much of the whole thing as possible. We don't have to say let me finish here as often now."*

<u>Observations</u>: It was noted that Jacob would listen consistently throughout the three-hour meetings. He would often make comments on what was being discussed and share his personal experiences. However, it was also noted that Jacob would sometimes interrupt while others were speaking. If one of the instructors interrupted him while he was speaking out of turn, he didn't appear to be angry; he would simply stop talking.

While in a small group working on a skit, Jacob appeared to respect the ideas offered by other group members and made comments such as "that could work" while nodding his head.

Sharing Ideas

When asked how he feels about sharing his ideas with other members of the group, Jacob

said that he believes that sharing his ideas is always a good idea and that it is important for all members of the group to share their ideas since someone else may suggest a better way of doing things. However, when looking back to when he first joined the group, Jacob said that he *"would be very hesitant to tell you about myself or give you my thoughts or ideas on anything. It just wasn't me."* Now, he feels that he is one of the mentors of the group and said that he has no problem offering his ideas.

When asked whether Jacob is more likely to share his ideas now compared to before he joined the drama group, his sister replied: *"Absolutely. He was always worried that what he was going to suggest was wrong and what somebody else would think about it. At [the drama group], and even outside of [it], he will say what he is thinking even though maybe somebody doesn't agree."*

According to Instructor 2, Jacob will do research on a variety of topics relevant to that on which the group is working. He will bring in what he has found, read it the group, pose questions, and discuss it. Previously, he would usually interrupt and repeat what other group members had said, but he never really talked about his opinion.

Observations: Members of the group were asked to do some research at home to generate some ideas for the play. Jacob researched pictures of trains and dining cars for the train station scene and printed them to share with the group.

While script writing with the group for the main play, he made suggestions for the script (e.g. "should we put the tickets in French?", and "Where in Canada should we start the play? Where should we board the train?").

When one of the instructors poses a question, he is usually the first member to respond. Sometimes he appeared too eager to share his ideas, and so a few times the instructors interjected

and stopped him from sharing ideas that were not relevant.

Giving Feedback

When asked what he does when he does not like another group member's ideas, Jacob said, *"I will be very courteous in the way that I inform them that I am not totally for their idea…. I try to show them positive as well as negative."* When asked how he used to respond, he said, *"I would be willing to be more direct with them and tell them I don't like your idea, your idea is not what we want, come up with another one. I never gave them something positive to take out of it."*

On the contrary, when asked how he responds when he does like another group member's ideas, Jacob responded: *"I will tell them that their idea is good…. I will give them the credit that they are due."* Previously, Jacob was ashamed to say that he would sometimes take credit for someone else's ideas.

According to Jacob's sister, *"He struggles with that, but although because of the drama troupe they turn around and sort of, everybody does their thing, and everybody says what you did good, what would you change a bit, what did you think, so they work with them on giving that feedback, positive or negative, so he is getting better at that."*

Instructor 2's opinion is that Jacob likes giving feedback to the other group members and that he is always looking for the strengths and weaknesses of the play. When he first joined the group, he would criticize, but he wouldn't always relate the criticism to the program.

Observations: After two of the group members had presented a short skit that they had written, Jacob told them what he liked about the skit and suggested one small change to their script.

It was noted that during meetings Jacob would give feedback regarding what was being discussed or produced. For example, when another member suggested a name for a character, he

exclaimed, "I actually like that!" and then laughed.

Responding to Criticism

When asked what he does when someone in the group doesn't like one of his ideas, Jacob responded, *"I will take it as constructive criticism because I also know that my ideas are not always going to be the idea that is favored by everyone. It is constructive criticism, I learn from it."* When asked what he used to do, he said: *"I used to get very angry and very confrontational if I felt that somebody was, I don't want to say disrespecting me, but kind of not giving me what I felt was the respect that I had earned."*

According to Jacob's sister, his ability to respond to criticism has improved, but he does still take it personally on occasion.

With regard to Jacob's ability to respond to criticism, Instructor 1 believes that he has learned to distinguish between what is real criticism and what is merely a joke. He used to take everything very seriously, whereas now he can distinguish between the two through reading of body language and tone of voice.

Instructor 2 responded that Jacob used to become very upset when someone would criticize him because he felt as though someone were ridiculing him. He has learned the difference between someone trying to support him and someone disrespecting on him.

Observations: When Instructor 1 made a joke at Jacob's expense, he responded, "Oh it's OK I'm used to him jabbing me" in what appeared to be a playful manner.

Speaking in Front of Others

With regard to how he feels about speaking in front of others, Jacob's response was that it is a skill that he has developed quite readily. In the beginning, however, he felt different because he *"felt as though everyone's eyes were on me to see what I was going to say, kind of like they*

were trying to size me up and see where I fit in the group. And now that I've found a spot and

I've become a mentor, I am not as intimidated by speaking in front of groups."

When asked whether Jacob's ability to speak in front of others has improved since joining

the drama group, his sister responded, *"Yes. Even to the point where he would have trouble sort*

of coming up with the words that he wanted to say because he was really panicked, he would just

sort of clam up, and now sometimes you can't get him to shut up, it has improved."

According to Instructor 2, Jacob has no problem making a presentation in front of the

group.

Making Friends

Jacob feels that his ability to make new friends is one of his strengths, but this has

changed considerably over the years. When Jacob was younger, he *"was not known to make a*

whole lot of friends because I just felt that if I just pulled into myself, I was the only one I could

trust. I have learned since then that I can trust other people as much as I can trust myself, with

certain things." He expressed that he was bullied a lot in high school, and this made him

withdraw and not want to be friends with anyone for fear of being ridiculed by them.

According to Jacob's mom, he never had a problem making friends. His problem was

judging between good friends and bad friends. Jacob's sister, however, believes that being in the

drama program has helped him to learn the difference between the two.

Confidence

When asked whether Jacob's confidence has improved since becoming a member of the

drama group, his sister responded:

"By 200 percent and then some! He has not a problem, in fact, he always was scared

about singing anything in front of the family, and he wrote a song for my uncle who was dying

from cancer. He was [Jacob's] godfather, and out of the blue they put the music on at the family picnic and they gave [Jacob] the microphone and he sang in front of 150 family members, which you couldn't pay him to do in a million years!... [The drama group] helped him feel comfortable doing that, standing in front of people, singing the songs, doing the actions, acting whatever role. It built his confidence so that he doesn't always worry about what everyone else thinks, he still does, but he is able to manage that better so he could do that."

Instructor 1 believes that Jacob has a lot more self-confident now, and that he feels a lot better about himself. This results in his being more ready to participate whereas before he was reluctant.

In Instructor 2's words: *"He has great pride in what he is doing in theatre. He has overcome a lot of obstacles. He used to think he couldn't sing at all. We have proven with [Jacob] that there is a voice there and he can sing. So pride in his musical ability, pride in learning difficult conversations, speeches, lines, communication, so there is more confidence there and pride there."*

Additional Outcomes

Becoming a Leader/Mentor

According to Jacob, one of the most important ways in which he has improved as a result of being a part of this drama group is in his ability to work with others. He also mentioned several times throughout the interview that he has become a mentor in the group. In his own words: *"I view myself as somebody who has grown up and have learned from the experiences I have come across and who can be a leader within the group and is willing to be a leader within the group and somebody that new members of the group can look up to and ask questions."*

Jacob's mom and sister also discussed how he enjoys mentoring members of the group

who may have more challenges. He loves feeling that he can help.

Instructor 1 stated that Jacob used to be a follower whereas now he has taken on a leadership role which he really enjoys.

Observations: During a read-through of the play, Jacob volunteered to read the lines for group member who was absent.

Reduced Stress

Jacob's sister discussed how he used to get upset and stressed when he was in big crowds or when he had to do anything in front of a group of people and these situations would trigger seizures. The drama group has helped to teach him how to control his anxiety, and now he has fewer seizures. He is a lot calmer and more comfortable with who he is.

Instructor 2 observed: *"When I first met [Jacob], he was stiff as a board, he was so nervous he couldn't relax. And of course he does worry a lot and suffers from seizures. He used to have frequent seizures....since he has become more confident and since he has more pride now in himself, he has less seizures."*

Making a Difference

Jacob also expressed that this drama program has *"shown me that it's not me that has to change, as much as it's the people who look at people who have disabilities who have to kind of change a little bit because there are still a lot of people out there who think that because you have disabilities you can't do this or that and they are almost too quick to judge what you can or cannot do without giving you the opportunity to show them what you can do."*

Jacob's sister and mom believe that through the drama program, he is realizing that what he says and what he does matters. He is showing what people with disabilities can do, not just what they can't do.

Jacob: Triangulation of Data and Summary

From the qualitative evidence above, Jacob's overall perception of his abilities appears to be consistent with his scores from the Coopersmith Self-Esteem Inventory-Adult Version. For example, Jacob answered *Like Me* to the following questions from the inventory: I'm easy to like; I'm a lot of fun to be with; I'm proud of my work; I'm popular with people my own age; I like to be called on when I am in a group; people usually follow my ideas; if I have something to say, I usually it; and I get upset easily when I am scolded. He also responded *Unlike Me* to the following statements: I find it very hard to talk in front of a group, and I don't like being with other people. These self-statements are related to the interview and questionnaire items above, such as his ability to make friends, to speak in front of others, and to share his ideas.

Jacob's Vineland-II scores were also consistent with the qualitative data. For example, his lowest scores were for Interpersonal Relationships and Play and Leisure Time. The related items from the Interpersonal Relationships subdomain on which Jacob scored low were: meets with friends regularly, understand indirect cues in conversations, and goes on group or single dates. Jacob's low-scoring items from the Play and Leisure Time subdomain were also related to going places with friends. The interview data suggests that Jacob rarely meets with friends outside of group meetings, and so this is consistent with the Vineland-II. As for understanding indirect cues, it seems that this is a skill in which Jacob has improved, but has not yet mastered.

Overall, it appears that the only skill in which Jacob had little to no improvement was giving and receiving social invitations. The skills in which Jacob appears to have improved the most are those related to speaking and engaging in conversations. According to Jacob, his mom, and his sister, he is now better at initiating conversations. The interview data also show that he has improved in his ability to engage in reciprocal conversations, according to his mom and

sister and both instructors. He doesn't interrupt nearly as much as he did, and he is listening more to what others have to say. However, Instructor 1 circled *no change* for Jacob's ability to take turns in conversations. This is in contrast to what Instructor 1 stated in his interview, which was that Jacob's timing is much better and that he knows when it is time to listen and time to talk. According to all interviewees, observations, and questionnaire data, Jacob has become better at sharing his ideas, at giving positive feedback to other group members, and at speaking in front of others. One interesting additional outcome that emerged was that Jacob has become a leader and mentor in the group. This was mentioned by Jacob himself, by his mom and sister, and by Instructor 1.

David

David is a 32 year-old male who has been a member of this drama program for approximately six years. He has cerebral palsy and a mathematics learning disability. Although he has not been officially diagnosed, his mom said that the possibility of his also having Autism has been discussed with his doctors. David has a university degree in Film and English, and his previous theatre experience includes being involved in his college's drama program. As well, he was involved in a government sponsored training program in theatre which teaches how to be an actor, playwright, and stagehand.

Standardized Measures

On the Coopersmith Self-Esteem Inventory: Adult Version (Ryden, 1978), David's score was 49, which is considered to be a significantly above-average self-esteem score among adult men.

As for the Vineland-II (Sparrow, Cicchetti, & Balla, 2005), David's v-scale scores in the subdomains, along with the bands of error at the 95th percent level of confidence, are as follows: Interpersonal Relationships, 9 ± 2 (7-11); Play and Leisure Time, 11 ± 3 (8-14); and Coping Skills, 16 ± 2 (14-18). Age equivalents were 9:6, 13:0, and 22+, respectively. For Interpersonal Relationships, David's adaptive level is considered "Low," for Play and Leisure Time, "Moderately Low," and Coping Skills, "Adequate". This suggests that David might have difficulties engaging in or doing the following with others: meeting with friends, starting conversations with others, and understanding indirect cues in conversations.

Table 11

Summary of Social Abilities Questionnaires for David

Skill	David	Mom	Instructor 1	Instructor 2
1. Say hello and goodbye	Much better	Better	Much better	Much better
2. Listen to others	Much better	Better	Much better	Much better
3. Share with others	Much better	Better	Much better	Much better
4. Encourage others	Much better	Better	Much better	Better
5. Interact with peers	Much better	Better	Much better	Better
6. Take turns in conversations	Much better	Better	Much better	Much better
7. Give compliments	Much better	Much better	Much better	Much better
8. Give positive feedback	Much better	No change	Much better	Much better
9. Respond appropriately to criticism	Much better	Better	Much better	Better
10. Share ideas with others	Much better	Much better	Much better	Much better
11. Respect the ideas of others	Much better	Much better	Much better	Better
12. Give and receive social invitations	Better	Better	Much better	Better

Table 12

David's Self-Perceptions of Personal Abilities Questionnaire

Item	Response
1. My ability to make new friends	Much better
2. How I feel about myself	Much better
3. Mt ability to carry out a task	Much better
4. My ability to speak in front of others	Much better

A summary of the questionnaire data depicted in Table 11 and Table 12 reveals that there was only one skill for which one respondent answered *no change* (mom-positive feedback). For the remainder of the skills, all of the respondents answered *better* or *much better* for David's rate of improvement.

Giving and Receiving Social Invitations

David goes out for lunch with Jacob every Friday and attends organized field trips with the other group members, but otherwise he does not spend much time with other group members outside of meetings.

David's mom said that he generally does not invite other group members to spend time with him socially. However, he did ask the instructors to be on his team in a trivia competition.

Initiating Conversations/Reciprocal Conversations

"One on one meetings and conversations, that has become much easier thanks to the [drama group] experience because before that, I used to find small talk very difficult to do. Now, it is much easier." With regard to starting conversations with others, David said: *"… if it is someone I know relatively well, it is easy to start a conversation, but if it is someone I don't know relatively well, I am a little apprehensive."*

When asked whether David's ability to initiate conversations with others has improved, David's mom said: *"I would say it has, yes. It is all part of his gaining a little bit of confidence. Some of that predates [this drama group], but it's from the same experience. When he was at university, he was with the Underground Players. That whole experience made a huge difference for him as an undergrad student. He connected with people through that drama group, and that's really the only way he connected with other people. That also taught him some strategies, some ways of approaching people."*

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Instructor 1 concurred: *"He used to not be able to make eye contact when speaking, was always fidgeting, when talking was not confident in talking with people. But now is very capable of sitting and looking you straight in the eye confidently...."*

Observations: In conversations, David appeared very polite and did not interrupt or speak over others. While waiting for directions from the instructors, David engaged in small talk with other group members. He also engaged in conversations with group members during the break, particularly with Laura and Jacob.

Listening to/Respecting the Ideas of Others

According to David, when listening to the ideas of others, he tries to take an active interest in what they have to say and does his best to come up with a positive response. When he first joined the group, he did his best to pay attention but found it difficult until he got to know the other group members.

Instructor 2 agreed: *"He has always been a good listener, very good listener. And he can summarize. He can listen for 10 minutes or so about a topic and summarize."*

Observations: David listened and was respectful towards what others had to say, and he would respond to show that he was listening and understood what was said.

Sharing Ideas

"I feel really comfortable with [sharing ideas] because as far as I'm concerned if we don't share ideas, we basically don't get anything done....I feel like I have been with them long enough that it is easier to express an opinion than it used to be".

When asked whether David is more likely now to share his ideas, his mom replied: *"Yes I think so. That is one of the significant parts about the way they do things with the players is that they talk through their ideas and figure out how they are going to write something. They do it*

from scratch, that whole brainstorming and discussing, that's an experience that he doesn't have anywhere else, and he has really benefitted from that."

Instructor 1 shared this observation: *"Much like [Jacob], he was a follower, and now he's great. He's very good in the leadership role. He is very good at also helping others participate if they can't, or if they have a hard time to understand what the situation is. He has a good gift of explaining things a different way."*

Instructor 2 also appreciated David's contribution: *"He always expressed opinion, and that has just blossomed. He is very intelligent, very intellectual. He is well read. He has so much to share so it wasn't hard for me to get [David's] opinion on things."*

<u>Observations</u>: For homework, group members were asked to create taglines for the play on which they were working. David came up with 10 funny taglines that he shared with the group.

During observations, he also made numerous suggestions for the play, including script, character development, blocking, and set design. For example, one day David brought in several pictures of set design ideas that he had printed off from the Internet and passed them around while explaining to the group which ideas he felt that they could incorporate into their own set design.

Giving Feedback

David doesn't often dislike other group members' ideas, but when he does, he will *"try to politely suggest another way to do something, because if you are really critical in a tight setting, it gets very uncomfortable."* When he does like another group member's ideas, David will *"enthusiastically respond by complementing them on the idea and also extending it and seeing how far we can take that idea."*

David's mom believes that David's ability to provide constructive criticisms to others has improved, but it is not something at which he is very good. This is because he would prefer not to say anything instead of expressing a criticism.

Instructor 1: *"All feedback out of [David] is positive, all, very rarely do you hear a negative thing come out of his mouth."*

Instructor 2: *"Yep, he helps [give feedback]. He helps to critique and evaluate the work we are doing."*

Observations: David reacted positively to ideas from others, and would often respond with "I like that because…". He also gives suggestions for improvement to group members. For example, he told Jacob that he should face the audience when he is delivering his lines and encouraged him when he did so.

Responding to Criticism

According to David, he does not feel that they are given very much negative feedback in the group; he feels that it is usually more positive.

David's mom believes that he responds quite well to criticism and that since joining the drama group, he is much more open to suggestions and doesn't lose his temper as often. She attributes most of this to the program but also to maturity.

Instructor 1: *"Like [Laura] he asked for criticism. He wants feedback, he's eager to learn, he wants to do better."*

Instructor 2: *"No I don't see any changes there, he's very mature, I find him very mature, so he wouldn't get embarrassed or intimidated or insulted by a bit of criticism, so we don't have a problem there."*

Observations: When David was making suggestions for the script that Instructor 2 didn't

think would work, David responded: "Oh, I see" and changed his suggestions to be more in line with what Instructor 2 had in mind.

Speaking in Front of Others

David feels very good about his ability to speak in front of others now, which he attributes to both the public speaking class that he took in University and to the drama group. However, the drama group helped him to feel more comfortable speaking in front of strangers, since in the public speaking class he would only speak in front of a small group of classmates. As a result of his ability to speak in front of others, David was asked to be the guest speaker at the golf tournament banquet.

According to David's mom, *"Oh I would say it's improved, it's always been something he has been good at, but I would definitely say it's improved."*

<u>Observations</u>: During observations, David appeared to have no difficulty sharing ideas or making presentations in front of others.

Making Friends

With regard to his ability to make new friends, David stated: *"I feel very good about that now, it used to be very difficult because I used to, you know if I was in a large group and I didn't know too many people, it used to be very very difficult to talk to people that I didn't know too well, but now it is a lot easier."*

According to David's mom, she feels that his ability to make new friends has improved, and that *"he has gained a little bit of confidence in approaching people he doesn't know."* However, David's mom also said that he does not have much of a social life outside of church and the drama group.

Instructor 2 offered these thoughts: *"He's not anti-social, he may have been a little bit*

when he came, but you know it didn't take long. Not like some of the others. No he interacts with others pretty good."

Confidence

According to David, *"I feel more comfortable with myself, I have more self-esteem, and also I think it is easier for me to express myself publicly than it used to be."*

When asked whether David's confidence has improved, his mom responded: *"Yes, it has greatly. Nothing did more for his self-confidence then when a whole group of people from church came to one of the [drama group] performances."* His mom also added that he is very well educated and has an incredible memory, *"so there are things he can do, that he can help with, and yet there is no place for him to do that. What the [drama group] gives him is that sense of self-worth, that place where he can be where some of the things that he is good at are valued."*

Instructor 1 also saw evidence of David's growth: *"He is growing, he is growing in confidence, self-esteem, personal awareness. Movement abilities, he moves better, he is much more graceful, although that could be confidence too. His head is high, his shoulders are up instead of slouching."*

Additional Outcomes

Making Difficult Decisions

As a result of being a member of the drama group, David feels that he is more comfortable with making difficult decisions. In his words: *"Through various stages of the process, you have to make a whole bunch of decisions on what you will keep in the script, what you will take out of the script, what props we will be using, being responsible for knowing where you are in the script, watching for your cue lines. If you are being prepared to watch out for things like that in that situation, it is much easier to watch for those sorts of things when you are*

outside of it."

David: Triangulation of Data and Summary

From the qualitative evidence above, it would appear that David's overall perception of his abilities is generally consistent with his scores from the Coopersmith Self-Esteem Inventory-Adult Version. For example, David responded *Like Me* to the following statements: I'm pretty sure of myself; I like to be called on when I am in a group; people usually follow my ideas; and if I have something to say, I usually say it. He also responded *Unlike Me* to the following statements: I find it hard to talk in front of a group; and I get upset easily when I am scolded. These responses are consistent with the interview data above.

As for his Vineland-II scores, they are also mostly consistent with the qualitative data from above, but they are also somewhat misleading. For Interpersonal Relationships, most of his low-scoring items had to do with meeting with friends, with starting conversations, or with going on dates. For the most part, this is consistent with the interview data, except for initiating conversations, which both David and his mother said he had improved. For Play and Leisure Time, his low-scoring items were once again related to spending time with friends with or without adult supervision during the day or at night. However, these items are misleading because part of the reason that David does not go places with friends is that his family lives in the country and he does not have a driver's license. This may also explain why David's mother said that he does not have much of a social life outside of the drama group or church.

For giving and receiving social invitations, David has shown little or no improvement. For initiating conversations, he finds small talk easier now and has less difficulty approaching people whom he doesn't know. For listening to and respecting the ideas of others, something at which David is currently very good, it is difficult to conclude whether this is something at which

he has always been good or whether there has been improvement. It does appear that he is better at sharing his ideas now compared to when he first joined the group. With regard to giving feedback to other group members, David's feedback is always very positive, and he is rarely critical. In relation to his ability to respond to criticism himself, it seems as though he has improved, but it is difficult to determine whether this is the result of the program or of maturity. However, it does not seem as though this is something with which he ever had too much difficulty. He was fairly good at speaking in front of others when he joined the group, but he has improved even further as a result of his involvement in this program. The item for which there seemed to be significant improvement was confidence.

Kyle is a 32 year-old male with Downs Syndrome who has been a member of this drama group for approximately 6 years. According to his mom, he has been involved in drama since he was very young, and he was involved with a different drama group in another city for a few years before he became a member of this one. Kyle said that he performed in the *Wizard of Oz* and *West Side Story* with the previous theatre group.

Standardized Measures

On the Coopersmith Self-Esteem Inventory- Adult Version (Ryden, 1978), Kyle's score was 40, which is considered an average self-esteem score among adult men.

As for the Vineland-II (Sparrow, Cicchetti, & Balla, 2005), Kyle's v-scale scores in the subdomains, along with the bands of error at the 95th percent level of confidence, are as follows: Interpersonal Relationships, 11 ± 2 (9-13); Play and Leisure Time, 10 ± 3 (7-13); and Coping Skills, 12 ± 2 (10-14). Age equivalents were 12:9, 11:3, and 15:0, respectively. For all three subdomains, Kyle's adaptive level would be considered "Moderately Low." This would indicate that Kyle would have difficulties engaging in or doing the following with others: meeting with friends regularly, going on dates, planning activities or outings, and controlling anger or hurt feelings.

Table 13

Summary of Social Abilities Questionnaires for Kyle

Skill	Kyle	Mom	Instructor 1	Instructor 2
1. Say hello and goodbye	No Change	Better	Much Better	Better
2. Listen to others	Much Better	Much Better	Much Better	Better
3. Share with others	No Change	Better	Much Better	Better
4. Encourage others	Better	Much Better	Better	Better
5. Interact with peers	Better	Better	Better	Much Better
6. Take turns in conversations	Better	Better	Better	Better
7. Give compliments	Better	Better	Much Better	Better
8. Give positive feedback	Better	Better	Better	Better
9. Respond appropriately to criticism	Better	Better	Better	Better
10. Share ideas with others	Better	Much Better	Better	Much Better
11. Respect the ideas of others	Better	Better	Better	Better
12. Give and receive social invitations	Better	No Change	Better	Better

Table 14

Kyle's Self-Perceptions of Personal Abilities Questionnaire

Item	Response
1. Ability to make new friends	Better
2. How I feel about myself	Better
3. My ability to carry out a task	Better
4. My ability to speak in front of others	Better

A summary of the questionnaire data shown in Table 13 and Table 14 suggests that there is general agreement across all of the respondents for all of the items, with the majority of respondents selecting *better* to describe Kyle's rate of improvement.

Giving and Receiving Social Invitations

Kyle said that he sometimes invites a girl from the drama group to spend time with him outside of group meetings, and sometimes other members ask him.

According to Kyle's mom, he does not invite others to spend time with him socially and he doesn't spend time with group members outside of meetings. He means to do that, but it never really happens.

Initiating Conversations/Reciprocal Conversations

Kyle listed the different people in the group with whom he likes to talk, including Jacob, David, and Laura. Although he feels that he is quiet, he believes that it is easier to talk to other people than it was before joining the drama group.

Kyle's mom believes that his ability to initiate conversations with others has improved as a result of the confidence which he has gained from being in the group, and also as a result of the input group members have in the plays which they write.

<u>Observations</u>: During a break, Kyle walked up to David and said, "Hi buddy how are you?" and asked him what he was doing for the rest of the day. The two of them then talked about their plans for the day.

Listening to/Respecting the Ideas of Others

Kyle likes the other group members' ideas and thinks that their ideas are a good thing for them to have.

Instructor 1 noted Kyle's growth: *"I think he is listening all the time because he offers*

personal experience very readily", whereas before, *"he had a tendency to just sit and stare at the table."*

According to Instructor 2, Kyle used to have problems listening and paying attention during group meetings because he had a hard time staying awake. Once the Instructors realized that this was because he was up late watching movies at night, they spoke with his family about his sleep habits, and after this, he started to be more alert and began to participate more.

Observations: During group meetings, Kyle often appeared to be listening since his head was up and he was looking at the Instructors, but it was difficult to tell whether he was paying attention. During one of the observations, Kyle put his head down on his desk and appeared to be tired.

Sharing Ideas

Kyle feels that sharing his ideas makes him happy, and he likes to share with a girl from the group. He said that when he first joined the group, he would talk to the floor with his head down. Now, he can look up and see everyone's face.

Kyle's mom believes that his ability to share his ideas has improved since joining the group.

Instructor 1 agrees: *"He does it much more often. He's comfortable in his arena now."*

Instructor 2 also saw these changes in Kyle: *"When we first met him, he wasn't really expressing his opinion about anything, it was always sort of yes and no and humming and hawing. But now, he's like I've got an idea, and he will go in front of the class and make a presentation."*

Observations: During one of the meetings, Kyle put up his hand because he wanted to say something, but he went unnoticed by the instructors. He seemed discouraged afterwards. This

happened again during the same meeting; Kyle put his hand up to say something and went unnoticed.

During another meeting, when the group was talking about cell phones, Kyle shared how he felt about people who talk on their cell phones while driving.

Giving Feedback

Kyle said that if he does not like another group member's ideas, he will keep his criticism to himself. When he first joined the group and someone said something he did not like, Kyle said that he would just walk away. If he likes another group member's ideas, he will tell them that he likes their opinion.

When asked whether Kyle's ability to provide constructive criticism to others has improved, his mom responded, *"I believe so."*

Instructor 1 had some reservations: *"[Kyle's] never really, he gives feedback, but, it's positive feedback but it's not at the right time."*

Responding to Criticism

Kyle said that when another group member does not like his ideas, he will keep it to himself.

According to Kyle's mom, how Kyle responds to criticism depends on the type of criticism that he is given. However, she didn't seem entirely sure that his ability to respond to criticism has improved.

Instructor 1 offered this summary: *"He's still quite sensitive, but tries very hard…. So we challenge him in each and everything we do, his responsibilities become more and more."*

Observations: While setting up the opening scene for the play on which they were working, Instructor 2 told Kyle how to stand and what to do differently, and Kyle listened and

responded to the suggestions. Kyle also needed a lot of help with his lines during the rehearsal, but he responded well to the prompting and did not appear frustrated.

During another rehearsal, Instructor 2 asked Kyle to say the lines for another member who was absent, in addition to his own lines. Kyle did very well but he needed a lot of direction to know when to speak and where to stand. However, he listened and followed the directions he was given. As a result of playing two characters at once, though, he exclaimed afterwards, "My head is going bonkers!"

Speaking in Front of Others

Kyle said that when he first joined the group, he used to be shy and would talk to the floor with his head down, whereas now, he looks up to see everyone's face.

Kyle's mom believes that he has always been quite capable of speaking in front of others. When he graduated from high school, he was one of the speakers at their convocation ceremony. He has never been afraid to participate in concerts, plays, and other similar activities.

Instructor 2 has noted Kyle's improvement: *"The first few years, he wouldn't say 'boo' in front of the group. He would sit in his chair, say 'yes' and 'no' and a couple of things. It was senseless getting him up because that's when he would disappear, his head would go down, he would talk to the floor, so it was a real struggle to get him to keep the head up and open up. But we made it! Because here he is now, he made a presentation for his character…. in our latest play. He was able to get right up there in front of the group, give us ideas for his character."*

Observations: Each of the group members had to make a short presentation as an audition for the character whom they wanted to play. When it was Kyle's week to present, he stood up in front of the group and recited a few lines that he had written for the character.

Making Friends

According to Kyle, he has made a lot of good friends since joining the drama group, and that is one of the goals that he had.

In relation to Kyle's ability to make new friends, his mom is not sure that it has improved only because she thinks he has always had that ability.

When asked whether Kyle's ability to interact with other group members has improved, Instructor 2 said: *"That has yeah. Because there was none before, he didn't seem to be looking for a friend even, he just seemed to be anti-social that way. I don't think it was anti-social, but he just had so many fears."*

Confidence

When asked whether Kyle's confidence has improved since joining the drama group, his mom said: *"Yes, I would have to say yes."* When asked how she would describe this, she said: *"Just again, I'm amazed. It's the way he can approach things, how he deals with things."*

Kyle's instructors concurred, Instructor 1: *"I've seen growth and confidence, self-esteem, he's not ashamed of who he is because of the way he is anymore. He is much more outgoing, talks with his face up, and he uses a good loud voice".*

Instructor 2 agreed: *"He's got more self-confidence, and body language always showed that he didn't think much of himself. That's changed too. Just squaring his shoulders, standing tall, and looking at others."*

Additional Outcomes

Memory

According to Instructor 1, the instructors work with Kyle on his memory and try to help him to remember his lines by putting cues in the script. A few years ago, his character was a

puppet, and he would repeat someone else's lines because he had such a hard time memorizing the script. In the most recent show, he sang an entire song on his own.

Instructor 2 explained: *"We used to do things like shrink his script, so if we had a 30 page script, we would pull out his parts and get them on one page to overcome the fear and help him realize he really didn't have 30 pages of script, he just had that one half a page for him, then the next show was three quarters, then the next show was one whole page of script! We had to help him with his memory."*

Kyle: Triangulation of Data and Summary

It would appear that, for the most part, Kyle's evaluation of his abilities from the Coopersmith are consistent with the qualitative evidence from above. For example, he answered *Like Me* to the following statements: I find it very hard to talk in front of a group; I'm popular with people my own age; if I have something to say, I usually say it; I like to be called on when I am in a group; and I am never shy (he said that he used to be, but was not shy any more). He also responded *Unlike Me* to the following item: I get upset easily when I am scolded. The first statement, "I find it hard to talk in front of a group," does not seem entirely consistent with the qualitative data, but this is partially because the responses to this question are mixed. However, the statement "I'm popular with people my own age" is consistent with the data because he feels that he has made a lot of good friends. Also, the fact that he feels that he does not get upset easily when he is scolded is fairly consistent with the data from the responding to criticism section.

As for his scores on the Vineland-II, they are also fairly consistent with the qualitative data from above. For example, according to the Vineland-II scores, Kyle is able to start small talk with others, which is consistent with the data above. Most of his lower scoring items are related to going places with friends and to planning activities, which is also consistent with the data.

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However, he also received lower scores for items related to controlling anger or to having hurt feelings. During observations, when Kyle was given constructive criticism from the instructors, he didn't appear upset at all. However, his mother and Instructor 1 both suggested that Kyle is still sensitive to criticism.

Based on the interviews, it appears that Kyle does not ask others to spend time with him socially. However, on the questionnaire, three respondents said that he has improved. With regard to initiating conversations, Kyle feels that he socializes with many members of the group, and his mom believes that it is easier now for him to approach people. It is hard to say whether Kyle has improved in his ability to listen to the ideas of others during the group meetings, since he still often appears sleepy, but there might be some improvement since he first joined the drama group. Kyle's mom and both instructors believe that Kyle has improved in sharing his own ideas. However, he may not have an equal opportunity to share his ideas during the drama group meetings. There doesn't seem to be any improvement in Kyle's ability to give feedback to other group members, but his ability to receive criticism himself may have improved. The interviews show that he is still somewhat sensitive to criticism, but it was observed during meetings that he seemed to respond quite well to criticism and direction from others. With regard to his ability to speak in front of others, Kyle's mom believe that this is something he has always been good at, but Kyle and Instructor 2 believe that he has improved since joining the group. Once again, in relation to his ability to make new friends, Kyle's mom believes that he has always been good at that, and Instructor 2 has witnessed improvements for Kyle in that area. Based on the interviews, it is apparent that Kyle's confidence has increased, and this is evident in the way in which he carries himself now: with his head up and his shoulders back. The instructors also believe that Kyle's memory has improved in that he is now able to memorize

more lines compared to when he first joined the group.

Lucas

Lucas is a 25 year-old male with Aspergers who had been a member of this drama program for six years. The year before this study took place was Lucas's final year in the program, and so he was not actually enrolled in the program at the time of this study. Therefore, for the observational data, Lucas's support worker, who attended drama group meetings with Lucas, was interviewed to discuss how Lucas displayed the targeted social skills during group meetings. There was an incident at the end of Lucas's final year in the program in which he became agitated and acted out aggressively towards the other group members and toward the instructors. As a result of this incident, he was not allowed to return to the program for the following year.

Standardized Measures

On the Coopersmith Self-Esteem Inventory: Adult Version (Ryden, 1978), Lucas's score was 33, which is considered a significantly below-average self-esteem score among adult men.

As for the Vineland-II (Sparrow, Cicchetti, & Balla, 2005), Lucas's v-scale scores in the subdomains, along with the bands of error at the 95th percent level of confidence, are as follows: Interpersonal Relationships, 9 ± 2 (7-11); Play and Leisure Time, 10 ± 2 (8-12); and Coping Skills, 12 ± 2 (10-14). Age equivalents were 7:11, 12:0, and 12:9, respectively. For Interpersonal Relationships, Lucas's adaptive level is considered "Low," and for Play and Leisure Time and Coping skills, his adaptive level is considered "Moderately Low." This suggests that Lucas might have difficulties engaging in or doing the following with others: meeting with friends, going on dates, understanding indirect social cues, controlling his emotions, refraining from acting impulsively, and avoiding potentially harmful social situations.

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Table 15

Summary of Social Abilities Questionnaires for Lucas

Skill	Lucas	Mom	Instructor 1	Instructor 2
1. Say hello and goodbye	Better	Better	Better	Better
2. Listen to others	Better	Better	No change	No change
3. Share with others	Better	Better	No change	Better
4. Encourage others	Better	Much Better	Better	No change
5. Interact with peers	Better	Better	Worse	better
6. Take turns in conversations	Better	Better	Worse	Better
7. Give compliments	Better	Better	Better	No change
8. Give positive feedback	Better	Better	Worse	No change
9. Respond appropriately to criticism	Better	Better	Much worse	No change
10. Share ideas with others	Much Better	Better	Better	Better
11. Respect the ideas of others	Better	Better	No change	No change
12. Give and receive social invitations	Better	No change	No change	No change

Table 16

Lucas's Self-Perceptions of Personal Abilities Questionnaire

Item	Response
1. My ability to make new friends	Better
2. How I feel about myself	Much better
3. My ability to carry out a task	Better
4. My ability to speak in front of others	Better

A summary of the questionnaire data displayed in Table 15 and Table 16 suggests that there is a wider variation in responses across the respondents. Lucas and his mom reported that Lucas had improved on all but one of the skills listed. For "give and receive social invitations" Lucas's mom responded *no change*. The majority of responses from Instructor 1 and Instructor 2, however, indicate that Lucas did not improve on many of the skills listed and may have even gotten worse at performing some of them.

Giving and Receiving Social Invitations

According to Lucas, he has asked other group members to spend time with him, but these get-togethers never materialized. He tried to arrange to get together with Kyle, but it never happened. When asked whether other group members ask him to spend time with them, he said, *"No I've always gone to them."*

When asked whether Lucas invites others to spend time with him socially, his mom answered: *"No. He would like to, but he still doesn't have the ability to do that on his own…. He and [support worker] tried to get together with [Kyle] a few times but it didn't work out."*

Initiating Conversations/Reciprocal Conversations

When asked whether his ability to initiate conversations has changed since joining the drama group, Lucas responded: *"Yes, immensely. A lot…. I'm not as shy to start things, to talk to people about things. I mean like, first I wasn't really talking to anyone, and then I started getting bolder to people."*

With regard to whether Lucas's ability to initiate conversations with others has changed, his mom said: *"It might've. I can't really you know necessarily pin it down to that, but I think you know, that's part of it, definitely."*

Observations: During group meetings, Lucas would often start conversations with other

members. For example, he would approach Jacob and ask him how his sister was doing, or he would approach Laura and ask her how she was doing.

Lucas demonstrated the ability to engage in reciprocal conversations with others. However, during group discussions, he would sometimes attempt to monopolize the conversations in order to make his point.

Listening to/Respecting the Ideas of Others

Lucas said that when other members of the group shared their ideas, he would listen to what they were saying and try to give them a few ideas, or at least laugh or respond to each one. When reflecting on when he first joined the group, he said that he would usually wait until there was a play on words and then participate. He also said that he used to play his Gameboy a lot.

When asked whether Lucas's ability to listen while others are speaking has improved, Instructor 1 said that Lucas listened to everything that they said and he didn't miss anything, but that he found that listening to what they said was boring. He said that the meetings were possibly too slow for him, and so his release was his Gameboy. He would play with that and listen at the same time.

According to Instructor 2, Lucas was better at listening when he left as compared to when he had first joined the program. He sometimes had problems with sleeping during the group meetings, which possibly was due to his medications. However, Instructor 2 also mentioned that Lucas had a problem with wanting to play with his games during class, and that he had to be reminded that it was not fair to the other group members.

Observations: Lucas would frequently play his Nintendo DS during group meetings, and he appeared to do this when he was bored. However, when the group was engaged in playwriting, he appeared to pay more attention and would join in the discussion. He appeared to

pay more attention when the ideas being discussed pertained to his character.

Sharing Ideas

Lucas found sharing ideas with the group to be very fulfilling because everyone got to share their ideas. He said that when he first joined the group, it was not easy for him to share his ideas because he did not know how to convey them.

According to Lucas's mom, the way in which Lucas has changed with regard to how he shares his ideas is that he has learned that it could not always be his ideas that were used, everyone in the group contributes, and that his ideas are a part of that contribution.

Instructor 1 explained: *"He has no problem sharing his ideas at all, he is very well spoken, he just gets off track and distracted."*

When asked whether Lucas's ability to share his ideas with the group has changed, Instructor 2 stated: *"I would say so because there was a moment there where he was able to do a five minute presentation on his own, so he was really ready to present to the group, and share with the group."*

Observations: Lucas frequently shared his ideas with the group, and although he usually shared ideas for his character, he also would contribute ideas for other aspects of the play. He would sometimes be singularly focused on things that he liked and would try very hard to make his point.

Giving Feedback

Lucas said that when he did not like another group member's ideas, he would *"just call them on it, but just try and ask if they could change it around enough so everybody wins."* When he first joined the group, he said that he used to try to keep his mouth shut, or that he would try to find a play on words. When he did like another group member's ideas, he said that he would

make a little victory sound and say, *"Oh yeah!".*

With regard to whether Lucas's ability to give feedback to others has improved as a result of his participation in the group, his mom stated: *"It probably has helped, it depends on the type of mood state he is in how appropriate he is in that area, but I think it probably did."*

When asked whether Lucas's ability to give feedback to other group members had improved, Instructor 1 said: *"Yes, like I said, from being a total outsider, he was a part of the group and did enjoy that except when other things came up."*

Instructor 2 said: *"He was critical all along, right from the beginning, the whole time he was here, he would criticize what somebody said or what somebody did or how successful our show was. Yeah he has that ability."*

Observations: Lucas would usually give feedback on ideas that were related to his character. If someone suggested an idea that he did not like, he would openly say that he did not like it. If someone suggested an idea that he did like, he would get excited and say "that's perfect!"

Responding to Criticism

When asked what he would do when someone in the group didn't like one of his ideas, Lucas said that he: *"Tried to change it around, or just kind of get frustrated and left it."* When asked how he used to respond when he first joined the group, he said: *"You wouldn't wanna know. Not even for this."*

According to Lucas's mom, he does not really like to be criticized, but she thinks that this has changed somewhat as a part of the whole evolution of how he has changed over the last several years.

However, the instructors believe that being open to criticism is still difficult for Lucas.

Instructor 1 stated: *"He's very defensive, very defensive about any type of criticism,"* while Instructor 2 said: *"That wasn't a good one, that wasn't a good one. He fought that. When you laid the facts in black and white and you criticized the behavior or the work that was being done, he tended to want to do it his way."*

Observations: During script writing, when the group did not follow one of his ideas, Lucas appeared frustrated and would disengage and play his Playstation DS. When rehearsing the play, Lucas would sometimes respond well to direction and accept it, but at other times he would become frustrated.

Speaking in Front of Others

With regard to speaking in front of others, Lucas said that he is a little shy at first but that if he keeps trying, then he is good. When he first joined the group, he did not really want to speak in front of people.

Lucas's mom believes that Lucas likes to be in front of people, and this drama group gave him the outlet to do that. Lucas has also recently had a few speaking engagements at local elementary schools where he talked to students about Autism. His mom believes that being involved in the drama group gave him the confidence to do an acitivity like that.

Observations: Lucas had no difficulty speaking in front of others, and he would often make presentations in front of the group. For example, in front of the group he made a presentation about his trip to Niagara Falls. During one of the recent shows, he also did an entire scene by himself.

Making Friends

When asked how he feels about his ability to make new friends, Lucas said: *"Well I can't kind of just go out there and make new friends, I have to go to a set place and gauge everyone.*

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Still is hard as five years ago."

With regard to Lucas's ability to make new friends, his mom stated: *"It seems like he'll go talk to people, especially people with disabilities, more freely maybe than he used to."*

<u>Observations</u>: During group meetings, Lucas would make an effort to speak with everyone in the group. In particular, he had a few friends in the group that he would interact with frequently.

Additional Outcomes

When asked if he views himself differently now as compared to when he first joined the group, he said, *"I'm much more of a mushroom."* When asked to explain this, he said, *"Yeah, a fungi"*, making a play on words with "fungi" and "fun guy."

More Social

Lucas believes that the drama group has helped him become more social, and he can now talk to people more easily.

Lucas's mom believes that Lucas is now better at socializing in a group setting and that he has fewer outbursts than he used to have. In her words: *"I think just his ability to interact in a group setting, I mean that's always been difficult for him, but he was able to do it quite well, and he evolved over the years. Like at first it wasn't very good and there were incidents fairly often, not major things, but you know things that weren't all that great and those really diminished over the time he was there. He still had difficulties, but they certainly diminished in their intensity up until the last one he had."*

Instructor 1 concurred: *"He became more tolerant of people. Instead of working one to one he became a lot more tolerant of being in a group, not perfect but much more tolerant…. Yeah he started out a loner and became much more a part of the group before he left. He was*

part of the group, he was one of the guys. He was accepted and reciprocated that acceptance."

Instructor 2 also agreed: *"It took a long time, but there was a period where he was definitely interacting really well, I've got to say some really positive things there. He appeared to be enjoying their company, there was fellowship there, he had made new friends…. But it just didn't last and I felt so bad, and I still don't know what triggered it or what caused it all."*

Tolerance for People with Disabilities

According to Lucas's mom, one of the biggest changes in his behavior as a result of becoming a member of this drama group is his tolerance for people with disabilities. She gave the following example of an incident that she felt was a turning point for him:

"[Kyle] at that point was the most physically noticeably disabled person, and I think [Lucas] was maybe okay with him, but then one day, I think this was a couple of years in, [Kyle] was coming in and he was kind of struggling with his backpack and his coat and stuff, and [Lucas] went over and helped him, took his backpack and helped him, and he did it on his own."

According to Instructor 1, Lucas learned to *"accept people with physical disabilities and intellectual disabilities that are in the group, rather than think of them as something inferior to him."*

Observations: Lucas was very patient and gentle towards Kyle, who had the most obvious physical disability. For example, he would let Kyle come up behind him and tickle him behind the ear, something he would not let anyone else do.

Lucas: Triangulation of Data and Summary

Lucas's responses on the Coopersmith seem consistent with the qualitative data above. For example, he answered *Like Me* to the following statements: I get upset easily when scolded; I'm popular with people my own age; I like to be called on when in a group; people usually

follow my ideas; and if I have something to say, I usually say it. He also responded *Unlike Me* to the following statements: I find it hard to talk in front of a group; I don't like to be with other people; and I give in very easily. However, his overall self-esteem score is considered significantly below average does not seem consistent with the qualitative data above. For instance, on the Self-Perceptions of Personal Abilities Questionnaire, he responded *Much Better* to "how I feel about myself." It may be possible that his low self-esteem score is related to the incident that resulted in his not being allowed to be a part of the group any more. He answered *Like Me* to the following items, which may support this theory: there are lots of things about myself I would change if I could; I'm often sorry for the things I do; I often feel upset; and I often feel ashamed of myself.

Lucas's score on the Vineland-II seems to be consistent with the qualitative data above. For example, some of the items for which Lucas had a low score had to do with meeting with friends or with going on dates and planning activities. Some of the items for which he scored slightly higher were related to starting conversations with others, controlling anger or hurt feelings due to criticism or not getting his way, and choosing not to say rude things.

With regard to Lucas's ability to give social invitations, Lucas said that he has tried to get together with someone from the group, but that it "just hasn't worked out yet." His mom believes that he does not yet have the ability to do that on his own. Based on the interviews and the observations, it seems as though his ability to initiate conversations has improved. As for listening to and respecting the ideas of others, it is hard to say whether these skills have improved. Although he was likely listening during the group meetings, Lucas would often be playing his Playstation DS at the same time, which was interpreted by the instructors as being disrespectful to the other group members. Lucas's ability to share his ideas with the group seems

to have improved, but he would still get frustrated if his ideas were not used. As for Lucas's ability to give feedback to group members, there seems to be some variability in the data. For example, in the interview, Instructor 1 suggested that Lucas's ability to give feedback had improved, but on the questionnaire, the instructor marked down that it had gotten worse. However, based on the interviews and observations, it seems as though Lucas has no difficulty being vocal about ideas that he does or does not like. As for responding to criticism, there may have been slight improvement for Lucas in this area, but he can still become frustrated by criticism. As for speaking in front of others, Lucas is quite good at this and enjoys it very much, and the drama group gave him the outlet to do that. He may have improved slightly on this skill, and it may have given him the confidence to do speaking engagements in schools. Although Lucas finds it just as difficult now to make new friends as compared to when he first joined the group, he does feel that he has become more social and he now finds it easier to approach people. The interview data show that Lucas's ability to interact in a group setting has improved. However, Instructor 1 responded on the questionnaire that Lucas's ability to interact with peers had gotten worse, but in the interview the instructor said that it had improved. Finally, it appears that Lucas's tolerance for people with disabilities has improved since joining the drama group.

Ryan

Ryan is a 21 year-old male with Downs Syndrome, who at the time of these interviews had only been a member of this drama program for five months. Ryan has very little previous theatre experience, but he likes drama very much. He took a drama course in high school and was recently in a small play with his music class.

Standardized Measures

On the Coopersmith Self-Esteem Inventory: Adult Version (Ryden, 1978), Ryan's score was 43, which is considered a somewhat above-average self-esteem score among adult men.

As for the Vineland-II (Sparrow, Cicchetti, & Balla, 2005), Ryan's v-scale scores in the subdomains, along with the bands of error at the 95th percent level of confidence, are as follows: Interpersonal Relationships, 13 ± 2 (11-15); Play and Leisure Time, 12 ± 3 (9-15); and Coping Skills, 13 ± 2 (11-15). Age equivalents were 16:0, 16:0, and 16:3, respectively. For Interpersonal Relations and Coping Skills, Ryan's adaptive level would be considered "Adequate," and for Play and Leisure Time, it would be considered "Moderately Low." This would indicate that Ryan might have difficulties engaging in or doing the following with others: starting conversations, understanding that others do not know his thoughts, using caution when talking about personal things or when entering risky social situations, and controlling emotions due to criticism.

Table 17

Summary of Social Abilities Questionnaires for Ryan

Skill	Ryan	Mom	Instructor 1	Instructor 2
1. Say hello and goodbye	Much Better	Better	Better	Better
2. Listen to others	Much better	No change	Better	Better
3. Share with others	Much better	No change	No Change	Better
4. Encourage others	Better	Better	No change	No change
5. Interact with peers	Much better	Better	Much better	Better
6. Take turns in conversations	Better	Better	No change	No change
7. Give compliments	Much better	No change	No change	No change
8. Give positive feedback	Much better	No change	Better	No change
9. Respond appropriately to criticism	Better	No change	Better	Better
10. Share ideas with others	Much better	Better	No change	No change
11. Respect the ideas of others	Much better	Better	Much better	No change
12. Give and receive social invitations	Much better	No change	No change	No change

Table 18

Ryan's Self-Perceptions of Personal Abilities Questionnaire

Item	Response
1. My ability to make new friends	Much Better
2. How I feel about myself	Much better
3. My ability to carry out a task	Better
4. My ability to speak in front of others	Much better

Based on the questionnaire data displayed in Table 17 and Table 18, it appears that the skills that Ryan had improved on and for which there was agreement across all four respondents were saying hello and goodbye and interacting with peers. For listening to others, for responding to criticism, and for respecting the ideas of others, three of the respondents reported improvement and one reported *no change*. For the remainder of the items, at least two of the respondents reported *no change*. It also appears that Ryan was much more likely to respond *much better* to describe his rate of improvement.

Giving and Receiving Social Invitations

Ryan spends most of his time with his girlfriend, but he doesn't invite other members of the drama group to spend time with him socially, nor do other members ask him to do this.

According to Ryan's mom, he spends most of his time with his girlfriend and his best buddy whom he invites over frequently, but he has not asked anyone from the drama club to spend time with him socially.

Initiating Conversations/Reciprocal Conversations

Ryan said that he feels comfortable starting conversations with others, and he thinks that it is very interesting to hear what they have to say. However, he was unclear as to whether his ability to initiate conversations has changed since joining the group.

When asked whether Ryan's ability to initiate conversations with others has improved, his mom stated that she has not observed any evidence.

Observations: During the observation periods, Ryan did not appear to speak with any of the group members during the breaks.

Listening to/Respecting the Ideas of Others

Ryan thinks that it is really fun when other members of the group share their ideas. He

said that when other group members share their ideas, he will tell them that he likes the idea and that they should try it out sometime.

The instructors also believe that Ryan listens and participates effectively. Instructor 1: *"[Ryan] listens really well and he tries really well to put into practice what you tell him."*

Instructor 2 stated: *"He seems to be focusing, he seems to be listening, he's just not vocal about it. But that will take time as it did for everybody else."*

<u>Observations</u>: During group meetings, Ryan sat quietly and appeared to be listening, since he was looking up at the instructors and other group members and smiling at their remarks.

Sharing Ideas

Ryan said that he likes to share his ideas with the group and that he now feels different *"in a good way"* about sharing his ideas as compared to when he first joined the group.

When asked whether Ryan is more likely to share his ideas now, his mom stated: *"He's pretty quiet about things, you tend to have to pull them out, but yeah, maybe a little bit more."*

Instructor 1 added: *"No he doesn't speak out too much unless he is put on the spot. If you put him on the spot he will speak his mind. That can be very uncomfortable for him, so you don't know whether you are getting a true response or what he thinks you want to hear."*

Instructor 2 offered: *"He's pretty quiet, he's not verbal. He's not asking or answering too many questions, unless you direct him one on one."*

<u>Observations</u>: Ryan did not share his ideas with the group unless he was directly asked to do so. He remained very quiet during all of the meetings.

Giving Feedback

According to Ryan, when he does not like another group member's ideas, he will wait to hear what they have to say and sit quietly.

Ryan's mom stated: *"He doesn't tend to be a negative person, so that's a hard one I think for him to criticize people."*

Instructor 1 offered: *"He does it with a smile. If he smiles and laughs at what others are doing, that is his way of offering positive feedback."*

Instructor 2 does not believe that Ryan's ability to give feedback to group members has changed yet.

Responding to Criticism

Ryan said that if someone in the group does not like one of his ideas, they can choose another instead. When he first joined the group, he said it would make him sad if someone did not like one of his ideas.

When asked whether Ryan's ability to respond to criticism has changed since joining the drama group, his mom responded: *"I haven't noticed anything but then I'm not sure…. Maybe taking it more in stride?"*

Instructor 1 suggested: *"He's okay with criticism as I said, he is learning to keep his chin up, that was the biggest concern was that he would speak to the floor…. He speaks now with his chin up. We are working on his eyes, trying to get him to look at who he is talking to."*

Instructor 2 made these observations: *"He hasn't taken any offence, and he is trying to change when you criticize, you should move there, you should say it like this. He is responding to criticism in a positive way."*

Observations: During rehearsals, Ryan took direction from Instructor 2 very well. He was speaking his lines very quietly and had to be reminded several times to speak loudly.

Speaking in Front of Others

Ryan said that he does not get nervous when he is speaking in front of others. He feels

better about speaking in front of others now, and he added that the instructors are helping him with speaking in a loud voice.

According to Ryan's mom, he has had many speaking engagements in the past and he is not too nervous speaking in front of people. However, she believes that since he joined the group, he has gotten better at looking at the audience.

Making Friends

Ryan feels that making friends is good to do, and he likes talking to them. He also thinks that he is good at making friends, since he already has some good friends outside of the group.

When asked whether Ryan's ability to make new friends has improved, his mom stated: *"I don't know that it has effected his friendship, he is always pretty easy to make friends, but I'm sure it helped him to be a little more outgoing."*

According to Instructor 1, Ryan seems to make friends really slowly. When he comes to meetings, he sits in the same spot, talks to the same people, and doesn't really make himself available to the others.

Confidence

Ryan feels that he has become more confident since joining the group.

Instructor 1 also believes that Ryan's confidence has improved.

Ryan: Triangulation of Data and Summary

Ryan's score on the Coopersmith seems fairly inconsistent with the qualitative data above. For example, Ryan answered *Like Me* to the following statements: I like to be called on when in a group; I'm popular with people my own age; I'm never shy; if I have something to say, I usually say it; and I get upset easily when I am scolded. These statements are inconsistent with the data above, since Ryan rarely shares his ideas with the group. Further, he seems

uncomfortable when he is called on in a group, and he is quite shy. However, he did answer *Unlike Me* to the statement "I find it hard to talk in front of a group," which is consistent with what his mom stated.

Ryan's Vineland-II scores seem to be consistent with the qualitative data from above. For example, his low-scoring items included starting conversations with others and controlling anger or hurt feelings as a result of criticism. The interviews and questionnaires suggest that he has difficulty starting conversations with others, and on the Coopersmith, he answered that he gets upset easily when scolded. Ryan had high scores on items related to going places with friends, which is consistent with what was stated about his spending time with his girlfriend and with his best friend.

With regard to giving and receiving social invitations, Ryan spends most of his time with his girlfriend and his best friend, and does not invite members of the drama group to spend time with him. Therefore, there is no change here. Also, there appears to be no change in Ryan's ability to initiate conversations, since he is still quite shy. Ryan appears to have improved in his ability to others. However, it is difficult to tell whether he has always been good or whether he has improved. There seems to be very little improvement in Ryan's ability to share his ideas with the group, since he usually remains quiet unless he is spoken to directly. Ryan does not appear to give feedback to other group members, and therefore there is no change in this area. Ryan takes criticism and direction very well, but it is difficult to tell whether he has improved or had these skills before he joined. With regard to his ability to speak in front of others, Ryan's mom believes that he has always been good at this skill, but he has gotten better at speaking with a loud voice and at looking at the audience. As for his ability to make friends, he has his girlfriend and his long time buddy, but he has not yet made friends with anyone from the group.

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Results: Comparison of Qualitative and Quantitative Data and Overall Summary

In order to provide a detailed summary of the overall effectiveness of the program, each targeted social skill will be revisited once more. First, a summary of the interview data for all participants will be presented for each skill. If it is stated that participants demonstrated meaningful improvements, this means that there was *strong agreement* across all four perspectives that those participants improved on that skill. If it is stated that participants improved, it means that there was *general agreement* across all four perspectives that positive change had occurred. When it is stated that interview data for participants are neutral or mixed, this means that there was little or no agreement across the four perspectives as to whether change had occurred or that very little change was reported.

A summary of the questionnaire data from the Social Abilities Questionnaire and from the Self-Perceptions of Personal Abilities Questionnaire for all participants will also be reported. A total of 28 Social Abilities Questionnaires are included in this report, with seven of these being from the Subjects, seven from the P/G group, seven from Instructor 1, and seven from Instructor 2. One of the participants had two questionnaires returned from the P/G group (his mom and his sister responded), and so only the questionnaire from this participant's mom will be included in this evaluation to avoid the results being weighted in favour towards one participant. There were also seven Self-Perceptions of Personal Abilities Questionnaires filled out by the Subjects.

Giving and Receiving Social Invitations. According to the interview data, none of the participants improved in their ability to give social invitations, and none of them reported receiving social invitations from members of the group. However, results from the Social Abilities Questionnaire shown in Figure 1 suggest that several participants did improve in their

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ability to give and receive social invitations. This finding is different from previous research

conducted by Hall et al. (2000) in which it was found that participants improved in their ability

to give social invitations. White et al. (2010) also indicated that the social skills intervention that

they employed produced improvements in participants' social initiation and willingness to
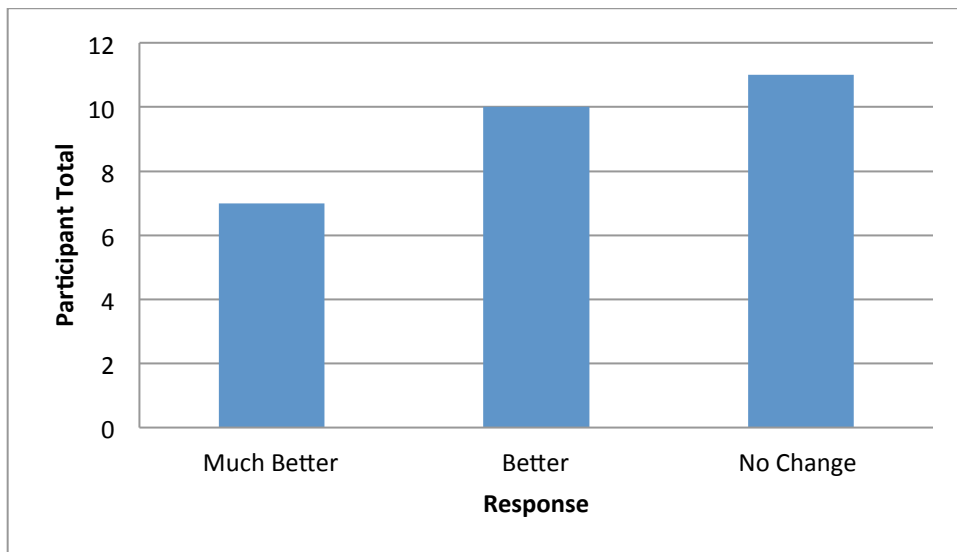
participate in social activities.

Figure 1. Overall results for the item "giving and receiving social invitations" from the Social

Abilities Questionnaire.

Initiating Conversations and Reciprocal Conversations. Based on the interview data for

engaging in conversations, one participant improved significantly, four improved, and two were

neutral or mixed. In general, the interview data have the same pattern as the questionnaire data in

Figure 2. However, in the interviews, there were no comments regarding someone getting worse

in their ability to engage in reciprocal conversations. This finding is supported by previous

research conducted by Marriage et al. (1995) which indicated that participants were more likely

to initiate conversations with others after their intervention. Hall et al. (2000) also found improvements in participants' ability to engage in social conversation after their intervention. This finding was reproduced in a study by Tse et al. (2007) which indicated that participants improved in their ability to have conversations. However, they found little improvement for participants' ability to make small talk.
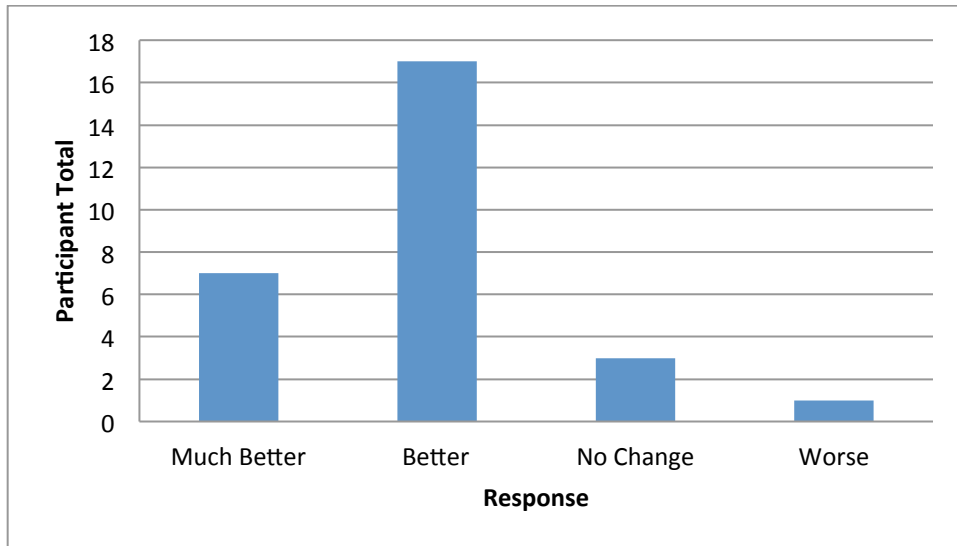

Figure 2. Overall results for the item "taking turns in conversations" from the Social Abilities Questionnaire.

Listening to and Respecting the Ideas of Others. Based on the interview data, four of the group members improved in their ability to listen to others, and the results for the other three were neutral or mixed. The questionnaire data pictured in Figure 3 and Figure 4 suggest that there was more improvement in participants' ability to listen to and to respect the ideas of others than was shown in the interview data. This finding is supported by previous research conducted by Lynch and Chosa (1996). In that study of participants in a community arts program, 70.6 of those interviewed reported feeling that they had improved in their ability to sit quietly and listen.
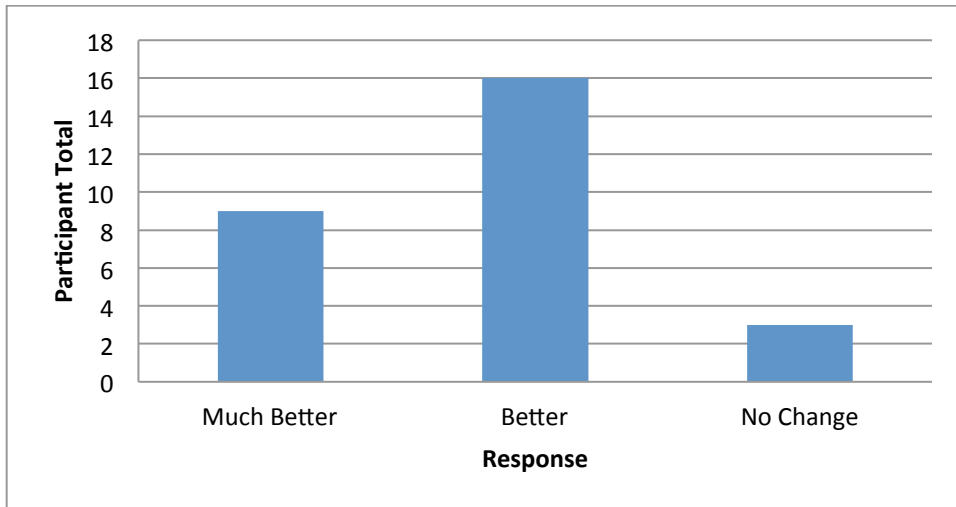
Figure 3. Overall results for the item "listening to others" from the Social Abilities Questionnaire.
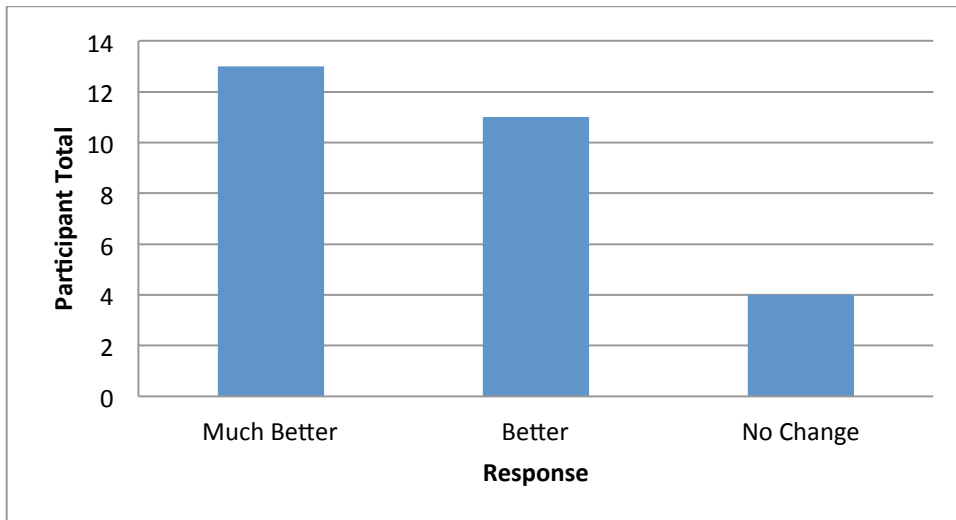

Figure 4. Overall results for the item "respecting the ideas of others" from the Social Abilities Questionnaire.

Sharing Ideas. Based on the interview data, two of the group members improved significantly in their ability to share their ideas with the group, four improved, and one participant had neutral or mixed results. The questionnaire data pictured in Figure 5 suggests that there should be a higher number of participants with significant improvements in their ability to share their ideas with others. This finding is supported by previous research conducted by de la Cruz et al. (2010) which indicated that children with learning disabilities can improve their social and oral expressive language skills through drama. The children in this study reported that they were able to listen and to speak more effectively as a result of the drama program. However, the study conducted by Lynch and Chosa (1996) found that only 61.8% of participants felt that they had improved in their ability to express their thoughts and feelings as a result of the community arts program.
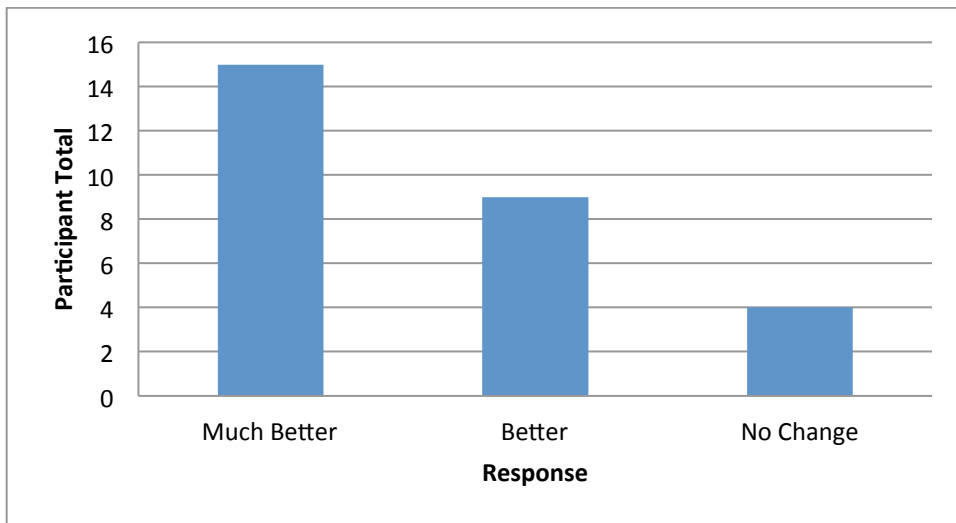

Figure 5. Overall results for the item "sharing ideas with others" from the Social Abilities Questionnaire.

Giving Feedback. As for giving feedback, the interview data show that three participants improved significantly, one participant's results were neutral or mixed, and three participants did not improved in their ability to give feedback to others. However, the questionnaire data pictured in Figure 6 suggest a higher rate of improvement, and once again, there were no comments in the interviews about someone becoming worse in their ability to give feedback since joining the group. This finding is supported by the research conducted by Hall et al. (2000) which found fewer improvements in participants' ability to give criticism to others.
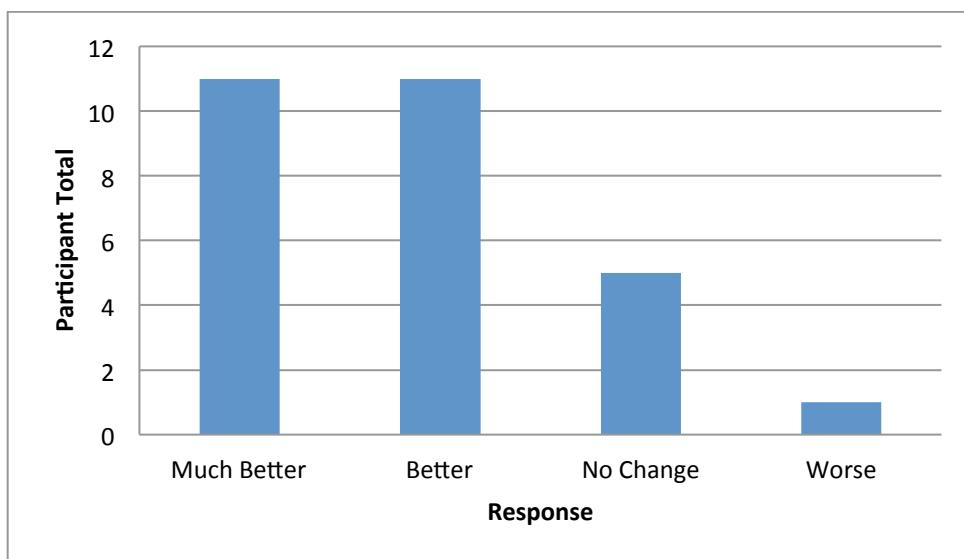

Figure 6. Overall results for the item "giving positive feedback" from the Social Abilities Questionnaire.

Responding to Criticism. The interview data show that four participants improved in their ability to respond to criticism, and three participants had neutral or mixed results. This seems consistent with the questionnaire data pictured in Figure 7. Previous research conducted by Hall et al. (2000) also found fewer improvements in participants' ability to receive criticism after the social skills interventon.
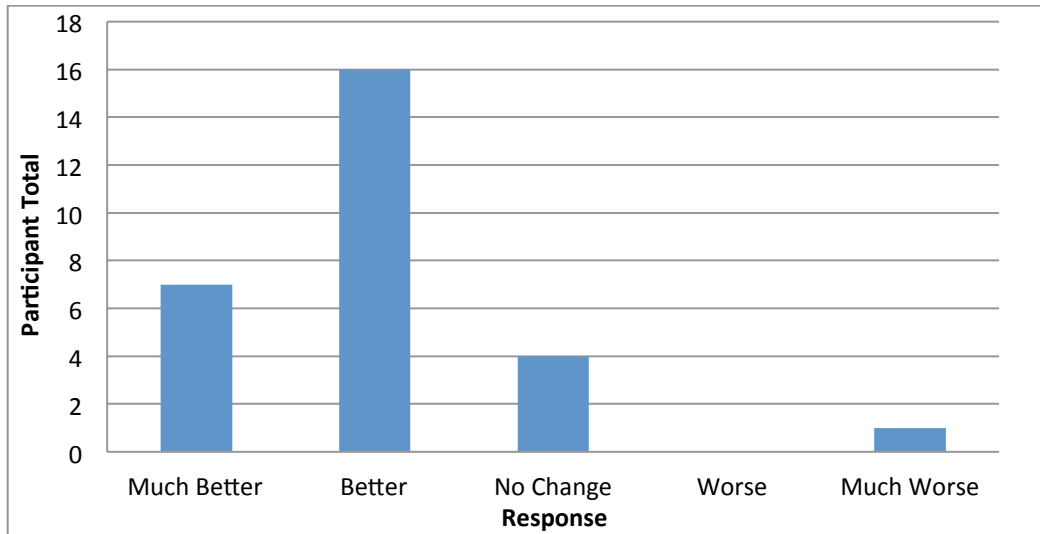
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Figure 7. Overall results for the item "responding to criticism" from the Social Abilities Questionnaire.

Speaking in Front of Others. As for speaking in front of others, the interview data show that there was improvement for all participants, with two participants who improved significantly and five participants who improved. Based on the results of the Self-Perceptions of Personal Abilities Questionnaires (SPPAQ), there were a higher number of participants who reported significant improvement in their ability to speak in front of others, as pictured in Figure 8.
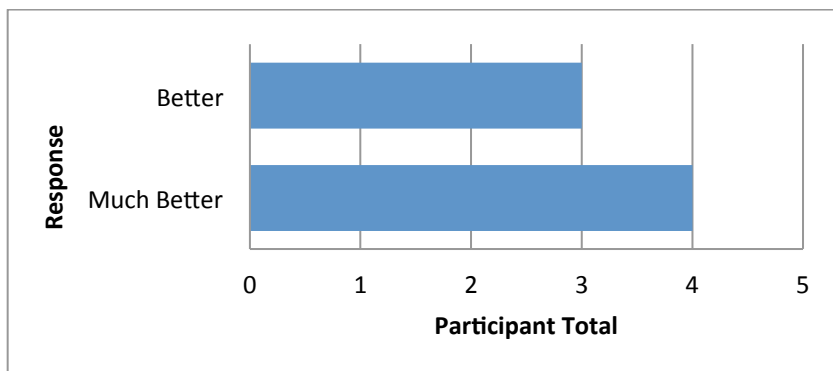

Figure 8. Overall results for the item "my ability to speak in front of others" from the Self-Perceptions of Personal Abilities Questionnaire.

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Making Friends. Based on the interview data, five participants improved in their ability to make new friends and two participants had neutral or mixed results. Based on the results of the Self-Perceptions of Personal Abilities Questionnaires pictured in Figure 9, all participants felt that they improved in their ability to make new friends. Data from the Social Abilities Questionnaires in Figure 10 also suggest that participants improved in their ability to interact with peers, which would improve their ability to make new friends. This finding is supported by previous research which frequently reports that participants are likely to make friends within social skills training programs. For example, the study conducted by Tse et al. (2007) reported that all except for one adolescent reported that they had made friends in the group. Lynch and Chosa (1996) also reported that 75.6% of participants felt that they had improved in their ability to interact with peers as a result of the community arts program.
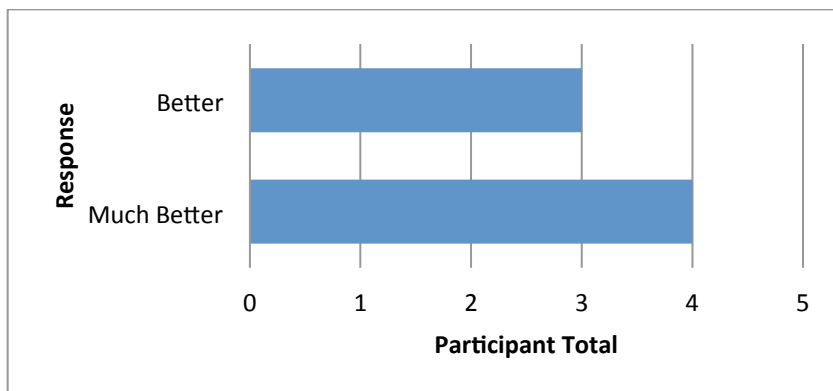

Figure 9. Overall results for the item "my ability to make new friends" from the Self-Perceptions of Personal Abilities Questionnaire
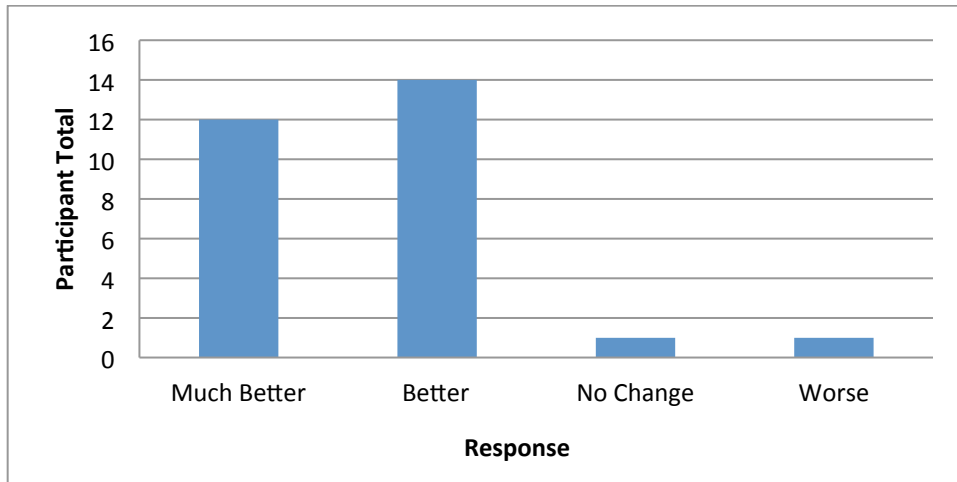
Figure 10. Overall results for the item "interacting with peers" from the Social Abilities

Questionnaire.

Confidence. With regard to confidence, three of the participants' confidence improved

significantly, another three participants' confidence improved, and one participant had neutral

results. The results of the questionnaires pictured in Figure 11 show that the majority of

participants feel much better about themselves since joining the drama group. Participants also

feel better about their ability to carry out a task (see Figure 12), which demonstrates self-efficacy

and confidence in their personal abilities. This finding is supported by previous research which

indicates that social skills training programs have the ability to improve participants' confidence.

For example, Tse et al. (2007) reported improvements in participants' confidence. Lynch and

Chosa (1996) also reported that eight of the 10 participants interviewed expressed positive

changes in their self-esteem and confidence as a result of the arts program.
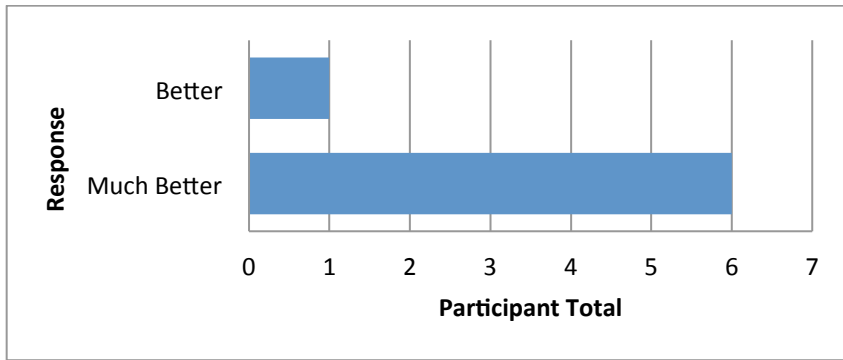
Figure 11. Overall results for the item "how I feel about myself" from the Self-Perceptions of Personal Abilities Questionnaire.
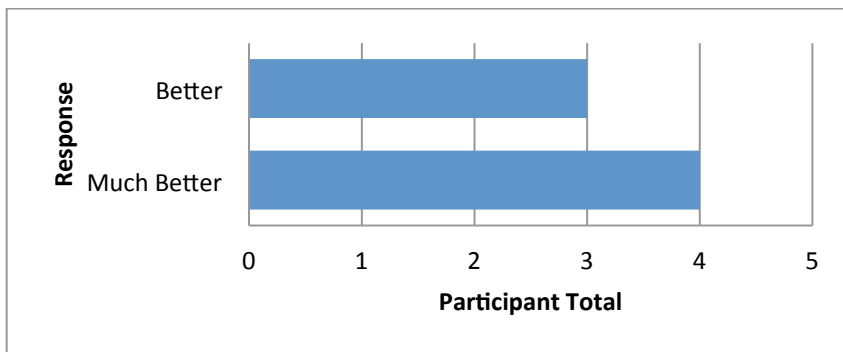
Figure 12. Overall results for the item "my ability to carry out a task" from the Self-Perceptions of Personal Abilities Questionnaire

Additional Outcomes

As for additional outcomes, three participants improved in their leadership abilities, and one participant improved on each of the following items: spending less time in a wheelchair, being more involved in the community, having less stress, making a difference, decision-making, using memory effectively, and interacting with peers.

Compilation of the Data

Based on the data presented, it would appear that the only targeted skill which had little or no improvement was giving and receiving social invitations. The skills on which participants improved the most were initiating conversations, sharing ideas, speaking in front of others, making friends, and demonstrating confidence. The skills for which there were some improvements were giving feedback, responding to criticism, and listening to and respecting the ideas of others. Although group members appeared to be good friends and often described the group as being like a family, they spent very little time with one another outside of group meetings unless it was at an event organized by the community organization in which the drama group took place. These findings appear to be supported by previous research on social skill training methods.

CHAPTER 5: DISCUSSION AND CONCLUSION

The purpose of this study was to investigate whether a community-based drama program for adults with disabilities enhanced the perceived social and personal development of its participants. For this study, social competence was defined as being able to interact with others with successful social outcomes relevant to the situation (Cook & Oliver, 2011). Therefore, social development for this study refers to the types of skills which would likely be developed in a setting such as this, and which would aid in the development of positive social relationships. The social skills that were the focus of this study include: giving and receiving social invitations, initiating conversations, engaging in reciprocal conversations, listening to the ideas of others, respecting the ideas of others, sharing ideas, giving feedback, and responding to criticism. In order to determine whether this drama program enhanced the perceived social and personal development of its participants, I interviewed the drama group participants, the family members, and the instructors of the group. All participants filled out questionnaires and participated in individual interviews. In addition to these measures, two standardized measures were used: the Vineland-II (Sparrow, Cicchetti, & Balla, 2005), which was administered to the family members of the drama group participants, and the Coopersmith Self-Esteem Inventory-Adult Version (Ryden, 1978), which was administered to the drama group participants. Researcher observations also occurred during the weekly drama group meetings to determine whether/how participants demonstrated the targeted social skills within this setting, and if so, how these were demonstrated. The following section will begin with a discussion of the results, followed by implications and future research, limitations, and a final conclusion.

Discussion

      The skills which demonstrated the most improvement including initiating conversations, sharing ideas, speaking in front of others, making friends, and demonstrating confidence, seem to be those that are more directly addressed by this drama program which requires participants to share their ideas, to work in a group, to make presentations, and to speak in front of strangers. The skills which had fewer significant improvements (but some improvements nonetheless), are those that are less directly addressed by this drama program, such as giving feedback, responding to criticism, and listening to and respecting the ideas of others. These findings are supported by Bandura's Cognitive Social Learning Theory, in which it is stated that cognitive processes must be at work in order for observational learning to occur, and therefore, individuals with cognitive delays may struggle with observational learning due to its cognitive demands (Shaffer, Wood, & Willoughby, 2002). This suggests that the skills which had fewer improvements may require more direct instruction in order for greater improvements to occur, particularly for individuals with more severe cognitive delays. For example, in order to help participants with cognitive delays to learn these skills, the instructors of the program that was studied could make more of an effort to include these participants in group discussions. After the final performance, the instructors spend a portion of the next meeting discussing the show, including what the group members felt that they did well and what they would like to improve for the next show. However, it is usually the same individuals who provide the most feedback, and these are the group members who tend to be high functioning. The group members with more severe cognitive delays are less likely to contribute to these discussions. Perhaps it would be beneficial for the instructors to ask these participants directly for their feedback and to provide them with specific examples of how to give feedback.

In the study conducted by Hall et al. (2000) discussed previously in the literature review, they found that the data did not show any improvements for the three skills of giving criticism, differing in opinion, and receiving opinion. Hall et al. stated that this could be the result of the increased difficulty of the last three skills compared to the level of difficulty of the others. They concluded that group-based interventions may be more suitable for individuals with higher levels of skill competence and that individual treatments may be more appropriate for individuals functioning at a lower level. The three skills in the study by Hall et al. that did not show any improvements are similar to the skills in this study that demonstrated fewer improvements, which supports the theory that more direct instruction for these skills that require a higher level of cognitive functioning should be employed in drama programs. Also similar to the study by Hall et al., the current study found that high-functioning individuals were more likely to show improvements on the targeted social skills than were individuals with lower cognitive functioning. Direct instruction was most frequently used during the directing process of the program studied. For example, when rehearsing for the show, the instructors would give the participants directions for how they should move on stage, for how and when they should speak their lines, and for which emotions they should be portraying. This included continual prompting from the instructors, with directions such as "Speak with your head up," "Look at the audience," "Speak louder so we can hear you," "In this scene you are sad so you need to speak your lines like you are sad, and hunch your shoulders" and so on. During the script writing process, participants were frequently prompted to share their ideas. However, it was the same few participants who contributed most of the ideas to the discussion. The group members with lower cognitive functioning shared their ideas less often, and some of them shared their ideas only when they were directly asked to do so. Perhaps it would be beneficial to be more direct in

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asking each of the participants to share their ideas in order to encourage the individuals with lower cognitive functioning to participate more.

After conducting a review of social skills interventions that utilize drama, Jindal-Snape and Vettraino (2007) concluded that of all the measures employed, qualitative measures were able to make stronger claims about the effectiveness of drama-based programs. Although many of the studies reported in this review used pre- and post- measures, the authors felt that these measures were unable to clearly indicate what worked and what did not. In the current study, the standardized measures often reported that individuals' social skills were relatively low, even though improvements in social development were often reported in the interviews. This demonstrates why it is important to include qualitative data in order to provide a holistic depiction of the change that has occurred, rather than relying on standardized measures that do not always tell how and why participants have changed. For example, on the Coopersmith Self-Esteem Inventory-Adult Version (Ryden, 1978), Ashley's self-esteem score was significantly below average, whereas the interview data suggest that her confidence and self-esteem had improved, that she is less shy, and that she finds it easier to speak in front of a group.

It also appears that length of participation in the program may be a factor that influences how much group members have improved in their social abilities. For example, Ryan had only been a member of this drama program for five months when data collection took place, and the data suggest that he had substantially fewer changes on the targeted social skills compared to the changes of the other six participants who had been enrolled in the program for anywhere from six to nine years. This may seem obvious, but it is important to note because most studies that focus on social skill development examine programs which are in place for a few months and most rarely last longer than one year. According to Bandura's Cognitive Social Learning Theory

(Shaffer, Wood, & Willoughby, 2002) which suggests that individuals with cognitive delays may struggle with observational learning due to its cognitive demands, this does not seem to be a sufficient amount of time for participants to learn these complex social skills. For example, if social skill instruction includes modelling of appropriate social behaviours and learning through observation of peers with more advanced social skills, participants with cognitive delays would require more exposure to these interventions in order to learn the skills being taught. Therefore, it is likely that participants with intellectual and social skill deficits would benefit from being in drama-based social skills programs for longer periods. The reasoning here is that these individuals learn slowly and that multiple opportunities for the repetition and reinforcement of proper social skills would be of benefit. Within this program, since most of the participants had been members of the program for several years, the instructors have been able to spend a substantial amount of time helping each group member to develop certain skills. For example, the instructors spent the first few years encouraging Kyle to speak with his head up and to use a loud, confident voice when speaking his lines. Now, this is no longer a problem for him, and so the instructors are now working with him to memorize longer scripts. Throughout this process, Kyle also improved in his ability to respond to criticism, in his ability to speak in front of others, and in his ability to share his ideas with the group. It is possible that the comprehensiveness of this drama program contributes to the acquisition of such a wide variety of skills. Having participants involved in every aspect of the creative process of developing a show provides participants with multiple experiences to learn and to practice these social skills. For example, within the script writing process, group members are encouraged to share their ideas with the group and to work together to decide what elements they will include in the show, which teaches participants to provide feedback to others as well as to receive feedback and criticism. Since

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most of the participants have been members of this drama group for several years, they have had the opportunity to continue to develop these skills each year. Perhaps the reason why so many studies on social skill development find mixed results is that the length of the program is too short and not that the program itself is ineffective. However, since there was only one new group member to participate in this study, it is impossible to make absolute inferences about the effect of the length of participation on skill development.

Based on the results of this study, I will present some suggestions for how a school-based drama program for students with disabilities should be implemented. Since it appears that length of participation and repetition may be of benefit, I recommend that students should be encouraged to participate from grade nine until they finish high school. I also recommend that students should be involved in every aspect of the creative process, including generating ideas for the show, developing characters, writing scripts, developing set and costumes, and of course, performing in the final production. Group meetings should also begin with warm-up activities and drama games in order to teach participants basic drama skills and to offer practice in learned skills. All participants should be given the opportunity to participate equally, and each participant should be given the opportunity to apply their strengths and to experience success in order to enhance confidence and self-esteem. Social skills should be taught through modeling by the instructor and also through explicit instruction and direct feedback. For example, during the script writing process, the instructor will demonstrate how to give appropriate feedback to other group members, explain how to give feedback, encourage other group members to give feedback, and then offer suggestions for improvement. Students should also be encouraged to practice the skills that they have learned in the drama group in their classrooms, and they should be provided with examples of how to do so.

Implications and Future Research

Three of the skills on which participants improved the most are sharing ideas, speaking in front of others, and demonstrating confidence. These are very important skills to have in order to be able to participate in class discussions. For many of the participants, it was reported that they did not have the confidence to speak up and to share their ideas or personal experiences or to engage in public speaking before becoming a member of this drama program. In the interviews and observations, it was noted that several of the participants would conduct research on different aspects of the show on which they were working, such as set design and character development, and they would present the information that they had found to the group. It would be interesting to discover how the participants performed these tasks when they were still in school, since these are tasks that students are often asked to perform. Because it is apparent that the participants improved on these skills since joining this drama group, one can assume that they did not perform these tasks as successfully when they were in school. The ability to conduct research, to share ideas, and to make class presentations, whether alone or in a group, is very important for success in school.

The other two skills in which participants improved the most were initiating conversations and making friends. These are very important skills to have in order to foster inclusion within schools. Having an increased ability to initiate conversations with others and feeling as though one is able to make new friends would be very beneficial in helping students with disabilities to navigate the social complexities of school life. It would then be logical to suggest that future research should be conducted within schools in order to determine whether these valuable educational skills learned within the drama group transfer to participants' classrooms. The school-based drama program should be designed as described above. In a

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review of social skill intervention research for students with autism, White et al. found that although some social skills may be demonstrated in clinical settings, these skills do not necessarily generalize to other aspects of the participant's daily life (2007). If drama-based interventions were implemented in schools, perhaps the skills learned in these programs would generalize to other areas of academic and social life within schools. According to Duncan and Klinger (2010), implementing social skills interventions within schools is beneficial because the school setting provides students with opportunities for additional contact with same age peers so that social skills can be learned, maintained, and generalized. Marriage et al. (1995) also propose that social skills programs should be conducted within the school setting to allow individuals to acquire social skills in an environment where they are able to practice and strengthen learned skills. Direct instruction might also enhance the opportunity for generalizability to occur if participants are directly taught how to apply learned skills to other settings. For example, in a school based drama program, instructors can provide participants with explicit examples of how to apply skills learned in the drama group to their classrooms, such as participating in class discussions. Future research in this area needs to be conducted with the direct intent of testing to see whether generalization occurs.

Limitations

One potential limitation of this study is that it measures the effectiveness of a pre-existing program. Since participants have been involved for a number of years, it was not possible to use a pre-test/post-test design, which would measure the presence of targeted social skills both before and after involvement. Instead, this study measured perceived changes based on the opinions of the three groups previously mentioned. Since several of the members of this drama program have been a part of this group for several years, participants were required to reflect a

great deal to and recall whether specific behaviours have changed since joining this group. These demands on memory may be difficult not only for the drama group participants but also for the staff members and individuals close to the drama group members. However, by interviewing these three groups and by triangulating the results, I believe that a relatively accurate account of behavioural change for each drama group member was obtained.

Response Bias

According to Perry (2004), there are significant difficulties when trying to gain the views of individuals with intellectual disabilities regarding complex, abstract issues. This was a challenge faced in this study, particularly with the participants who had more severe intellectual impairments. Although every attempt was made when conducting the interviews to ask all of the questions in ways that would make it easier for individuals with disabilities to understand, asking an individual to evaluate their own personal growth involves some relatively complex cognitive processing. During the interviews with participants who had intellectual impairments, it was at times difficult to obtain accurate or reliable responses regarding how they had changed as a result of the drama program. By contrast, in the interviews with the high-functioning participants, I was able to obtain very detailed responses. This is consistent with Perry's position that open-ended questions may be more appropriate for individuals with higher cognitive and communicative skills, since these questions are less likely to elicit response bias (2004). However, in the interviews conducted with participants who had lower levels of intellectual functioning, some response bias was noted.

Conclusion

This study sought to investigate whether a community-based drama program for adults with disabilities enhances their perceived social and personal development. Based on the data gathered, analyzed, and presented within this report, it appears that this community-based drama group does enhance the perceived social and personal development of its participants. However, some of the targeted social skills studied in this research were more enhanced than others, and it appeared that high-functioning individuals were more likely to improve on the targeted social skills compared to those with more significant cognitive delays, particularly for those skills that require higher cognitive processing. There were also several additional skills for which some participants reported improvements, including leadership skills, community involvement, memory, and making decisions. Although none of the participants improved in their ability to give and receive social invitations, all participants (excluding the one participant who had only been in the program for five months) reported that they had become very close friends with the other group members and that they often referred to themselves as being like a family. Therefore, the majority of the participants reported that they had developed positive social relationships with other members of the group.

Another theme that emerged in the interviews was that this program focuses on what participants can do, whereas many of them have been told repeatedly throughout their lives what they cannot do. This emergent theme was also reported in the study conducted by Lynch and Chosa (1996) that examined participants' experiences with a community-based arts program for individuals with disabilities. Throughout the interviews they conducted, "individuals with disabilities and family members reiterated that people with disabilities receive numerous reminders (e.g., by schools and other agencies) of all the things they cannot do" (p. 79), and

"Sixty percent (n=6) of the individuals stated that community-based art programming was one of the only opportunities for positive and supportive experiences" (p. 79). Lynch and Chosa also reported that all 10 interviewees believed that their involvement in the community arts program positively influenced the way others view them. In the interview data for Jacob, it was stated that Jacob is realizing that what he says and what he does can make a difference, and he feels that he is demonstrating what people with disabilities can do, not just what they cannot do. This demonstrates the importance of providing individuals with disabilities with opportunities to explore their talents and experience success in order to enhance their self-esteem and confidence. According to Duncan and Klinger (2010), "It is necessary for social skill interventions to be implemented in the clinic, school, and community settings to increase learning, maintenance, and generalization of social skills" (p. 190). Overall, this study demonstrates the positive impact that being a member of this drama program has had on its participants, regardless of the number of target social skills in which each member improved.

As mentioned previously, it would be beneficial to implement drama programs within schools for the purpose of helping students with disabilities learn necessary social skills and improve their confidence and self-esteem. As this study has shown, drama groups have the ability to teach participants skills that would be beneficial in fostering inclusion in schools, such as the ability to share ideas, to speak in front of others and to make presentations, respond to criticism, and to initiate conversations. Future studies should explore whether high school drama programs for students with disabilities enhance their social and personal development, and whether these skills transfer to students' behaviour in classrooms.

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Appendices

Appendix A

Social Abilities Questionnaire

Please indicate the level of change in the participant's ability to do the following tasks since being a part of this program:

1. Say hello and goodbye	Much Better	Better	No change	Worse	Much Worse
2. Listen to others	Much Better	Better	No change	Worse	Much Worse
3. Share with others	Much Better	Better	No change	Worse	Much Worse
4. Encourage others	Much Better	Better	No change	Worse	Much Worse
5. Interact with peers	Much Better	Better	No change	Worse	Much Worse
6. Take turns in conversations	Much Better	Better	No change	Worse	Much Worse
7. Give compliments	Much Better	Better	No change	Worse	Much Worse
8. Give positive feedback	Much Better	Better	No change	Worse	Much Worse
9. Respond appropriately to criticism	Much Better	Better	No change	Worse	Much Worse
10. Share ideas with others	Much Better	Better	No change	Worse	Much Worse
11. Respect the ideas of others	Much Better	Better	No change	Worse	Much Worse
12. Give and receive social invitations	Much Better	Better	No change	Worse	Much Worse

Appendix B

Self-Perceptions of Personal Abilities Questionnaire

Please select the answer which best represents how you feel you have or have not changed in the following areas since being a part of this program:

1. My ability to make new friends	Much Better	Better	No change	Worse	Much Worse
2. How I feel about myself	Much Better	Better	No change	Worse	Much Worse
3. My ability to carry out a task	Much Better	Better	No change	Worse	Much Worse
4. My ability to speak in front of others	Much Better	Better	No change	Worse	Much Worse

Appendix C

Questionnaire Script for Subjects (SUB)

 I am going to ask you some questions about how you think you may have changed since joining the [drama group]. For each question, I would like you to tell me whether you think you have gotten better or worse at doing the following things.

Example for examiner: For question one, ask: "Do you think you have gotten better at making new friends since joining the [drama group]?".

If they respond with a yes, ask: "Do you think you have gotten better, or much better?".
If they respond no, ask: "Do you think you have gotten worse at making new friends?". If they once again say no, circle No Change. If they respond yes, ask: "Do you think you have gotten worse or much worse?".

Repeat for each question.

Appendix D

Interview Schedule for Subjects (SUB)

Background Information:
Age:
Gender:
Occupation:
Living Situation (i.e. independent living, assisted living, with parents or family):

Opening Questions:

3. How long have you been a member of the [drama group]?
4. Do you have any previous theatre experience?
Probe: Includes drama groups, plays, variety shows, musicals ect.
5. Why did you choose to join the [drama group]?
6. What is your favourite memory from being a part of the [drama group]?
Probe: Could be from one of the shows, meetings, or any experience from this group.

Key Questions:

5. Have you made any new friends since joining the [drama group]?
6. Do you invite other members of the group to spend time with you outside of the meetings?
7. Do other group members ask you to spend time with them outside of the meetings?
8. How often does this happen?
9. How do you feel about starting conversations with other people? Has this changed since joining the group?
10. How do you feel about sharing your ideas with the other members of the group? How did you feel about sharing your ideas when you first joined the group?
11. What do you do when other members of the group share their ideas? What did you used to do when other members shared their ideas when you first joined the group?
12. What do you do when someone in the group doesn't like one of your ideas? What did you used to do?
13. What do you do when you don't like another group member's ideas? How did you used to respond?
14. What do you do when you like another group member's ideas? How did you used to respond?
15. Do you view yourself differently now compared to when you first joined the [drama group]?
16. How do you feel about your ability to make new friends?
17. How do you feel about speaking in front of others? Did you feel differently when you first joined the group?
18. In what ways do you think you may have improved as a result of being a part of the [drama group]?

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Closing Questions:

22. Do you have any suggestions for how the weekly meetings could be improved?
23. Would you suggest this program to a friend?
24. Is there anything else that you would like to add?

Appendix E

Parent/Guardian Interview Schedule

Opening Script: I am going to ask you a few questions about any potential changes in _____'s behaviour since becoming a member of the [drama group]. I would like you to answer these questions to the best of your ability given that you may have to think far back and recall specific instances to answer the following questions.

Background Information:

7. What is your relationship to _____?
8. (If not a direct family member) How long have you known _____?
9. How frequently do you see _____?

Opening Questions:

19. How long has _____ been involved in the [drama group]?
20. How do you feel about _____'s involvement in the [drama group]?
21. Has it been a positive experience for him/her?

Key Questions:

25. Has _____'s ability to make new friends improved since joining the [drama group]?
26. Does _____ invite others to spend time with him/her socially? Had this changed since joining the [drama group]?
27. Does _____ spend time with members of the group outside of meetings?
    -(yes) How often does this happen?
10. Has _____'s ability to initiate conversations with others improved since joining the [drama group]?
11. Is _____ more likely to share their ideas with others?
12. Has _____'s ability to provide constructive criticism to others improved?
13. How does _____ respond to criticism themselves? Has this changed since joining the [drama group]?
14. Has _____'s confidence improved since becoming a member of the [drama group]? How would you describe this?
15. Has _____'s ability to speak in front of others improved since joining this group?
16. What other changes in _____'s behaviour have you noticed since their involvement in this group?

Closing Questions:

17. Is there anything else that you would like to add?
18. Do you have any recommendations?

Appendix F

Instructor Interview Schedule

Opening Script: I am going to ask you the following questions for each member of the [drama group]. Lets start with _____.

Key Questions:

10. Has _____'s ability to interact with other members of the group improved since their involvement in the [drama group]?
11. Has _____'s ability to appropriately sit and listen when others are speaking improved?
12. How about _____'s ability to share their own ideas with the group, has this changed?
13. Has _____'s ability to give positive feedback to other group members changed?
14. How about _____'s ability to respond to criticism, has this changed since their involvement in the group?
15. What overall changes in _____'s behaviour have you witnessed since they have joined the group?

Closing Questions:

22. What aspect of the group do you think may be contributing to these behavioural changes?
23. What techniques do you employ that you think may contribute to the social skill development of these individuals?

Appendix G

Observation Checklist

Subject Number _____

Target Skills	Observations
1. Saying hello and goodbye	
2. Listening to others	
3. Sharing with others	
4. Encouraging others	
5. Interacting with peers	
6. Taking turns in conversations	
7. Giving compliments	
8. Giving positive feedback	
9. Responding appropriately to criticism	
10. Sharing ideas with others	
11. Respecting the ideas of others	
12. Giving and receiving social invitations	
Additional Positive Social Behaviours	
Additional Negative Social Behaviours	

Appendix H

LETTER OF INFORMATION
Drama Group Participants

Introduction

My name is Jenny McAlpine and I am a Master's student at the Faculty of Education at The University of Western Ontario. I am currently conducting research into whether a community-based dramatic arts program changes the social and personal development of adults with disabilities and I would like to invite you to participate.

Purpose of the study

The purpose of this study is to investigate whether drama is an effective alternative to traditional social skills training programs for adults with intellectual and developmental disabilities and Autism spectrum disorders. Through the use of observations, questionnaires, and interviews, I hope to gain insight into whether this program has changed the social skills and personal development of participants.

If you agree to participate

If you agree to participate in this study, you will be asked to complete two ten minute questionnaires, to participate in a one hour interview with myself and to be the subject of researcher observations during the weekly [drama group] meetings. During the [drama group] meetings, I will be looking at how you and the other drama group members interact with one another and how you participate in the meetings. These observations will happen at the Monday and Friday meetings from January to March. Questionnaire and interview questions will ask about your social interactions with others and how you feel about carrying out certain tasks since becoming a member of this program. For example, "How do you feel about starting conversations with other people? Has this changed since joining the group?". Interviews will be audio-recorded and transcribed into written form. You will also be asked to nominate someone personally close to you, preferably a parent or guardian, to take part in this study as well. This individual will also be asked to answer questions about whether they have noticed changes in your social behaviour and attitude since you became a member of the [drama group]. Teachers involved in the [drama group] will also be asked to give their thoughts on your social development since you have been a member of the program.

Confidentiality

The information collected will be used for research purposes only, and neither your name nor information which could identify you or the program will be made public or used in any publication or presentation of the results. All information collected for the study will be kept confidential. No identifying information will be recorded on interview data, questionnaires, or observation notes. A pseudonym will be created for you and this will be recorded on each data source. The main list of participant identifiers and their pseudonyms will be kept in a secure location separate from any research data. Data will be kept secure until the thesis is defended, and then destroyed.

Risks & Benefits

There are no known risks to participating in this study.

Voluntary Participation

Participation in this study is voluntary. You may refuse to participate, refuse to answer any questions or withdraw from the study at any time with no effect on your participation in the dramatic arts program.

Questions If you have any questions about the conduct of this study or your rights as a research participant you may contact the Office of Research Ethics, The University of Western Ontario. If you have any questions about this study, please contact Jenny McAlpine or Dr. Alan Edmunds.

<div align="center">LETTER OF INFORMATION</div>
<div align="center">**Parents/Guardians**</div>

Introduction

My name is Jenny McAlpine and I am a Master's student at the Faculty of Education at The University of Western Ontario. I am currently conducting research into whether a community-based dramatic arts program changes the social and personal development of adults with disabilities and I would like to invite you to participate.

Purpose of the study

The purpose of this study is to investigate whether drama is an effective alternative to traditional social skills training programs for adults with intellectual and developmental disabilities and Autism spectrum disorders. Through the use of observations, questionnaires and interviews, I hope to gain insight into whether this program has changed the social skills and personal development of participants.

If you agree to participate

If you agree to participate in this study, you will be asked to complete a ten minute questionnaire and to participate in a 75 minute interview with myself related to the social skills and personal development of the individual who nominated you to take part in this study. Questionnaire and interview questions will be related to their involvement in the drama program and their ability to engage in specific social interactions. For example, "Has _____'s ability to initiate conversations with others improved since joining the [drama group]?". Interviews will be audio-recorded and transcribed into written form.

Confidentiality

The information collected will be used for research purposes only, and neither your name nor information which could identify you or the program will be made public or used in any publication or presentation of the results. All information collected for the study will be kept confidential. No identifying information will be recorded on interview data, questionnaires or observation notes. A pseudonym will be created for you and this will be recorded on each data source. The main list of participant identifiers and their pseudonyms will be kept in a secure location separate from any research data. Data will be kept secure until the thesis is defended, and then destroyed.

Risks & Benefits

There are no known risks to participating in this study.

Voluntary Participation

Participation in this study is voluntary. You may refuse to participate, refuse to answer any questions or withdraw from the study at any time with no effect on the drama group participant's involvement in the dramatic arts program.

Questions

If you have any questions about the conduct of this study or your rights as a research participant you may contact the Office of Research Ethics, The University of Western Ontario. If you have any questions about this study, please contact Jenny McAlpine or Dr. Alan Edmunds.

This letter is yours to keep for future reference.

[Signature]

LETTER OF INFORMATION

Program Facilitators

Introduction

My name is Jenny McAlpine and I am a Master's student at the Faculty of Education at The University of Western Ontario. I am currently conducting research into whether a community-based dramatic arts program changes the social and personal development of adults with disabilities and I would like to invite you to participate.

Purpose of the study

The purpose of this study is to investigate whether drama is an effective alternative to traditional social skills training programs for adults with intellectual and developmental disabilities and Autism spectrum disorders. Through the use of observations, questionnaires and interviews, I hope to gain insight into whether this program has changed the social skills and personal development of participants.

If you agree to participate

If you agree to participate in this study, you will be asked to complete a ten minute questionnaire for each member of the program who volunteers to participate in this study. You will also be asked to participate in a one hour interview with myself and an additional half-hour interview if further information is needed. Questionnaire and interview questions will be related to each subjects' ability to engage in social interactions with other group members. For example, "Has _____'s ability to interact with other members of the group improved since their involvement in the [drama group]?". Interviews will be audio-recorded and transcribed into written form. In addition, I will be conducting observations at the weekly meetings from January to March. During these observations, I will be taking notes regarding the social interactions between group members. Notes about interactions between yourself and group members may also be recorded.

Confidentiality

The information collected will be used for research purposes only, and neither your name nor information which could identify you or the program will be made public or used in any publication or presentation of the results. All information collected for the study will be kept confidential. No identifying information will be recorded on interview data, questionnaires or observation notes. A pseudonym will be created for you and this will be recorded on each data source. The main list of participant identifiers and their pseudonyms will be kept in a secure location separate from any research data. Data will be kept secure until the thesis is defended, and then destroyed.

Risks & Benefits

There are no known risks to participating in this study.

Voluntary Participation

Participation in this study is voluntary. You may refuse to participate, refuse to answer any questions or withdraw from the study at any time.

Questions

If you have any questions about the conduct of this study or your rights as a research participant you may contact the Office of Research Ethics, The University of Western Ontario. If you have any questions about this study, please contact Jenny McAlpine or Dr. Alan Edmunds. This letter is yours to keep for future reference.

Appendix I

SOCIAL SKILLS AND PERSONAL DEVELOPMENT IN THE DRAMATIC ARTS

CONSENT FORM

I have read the Letter of Information, have had the nature of the study explained to me and I agree to participate. All questions have been answered to my satisfaction.

Name (please print):

Signature: Date:

Name of Person Obtaining Informed Consent:

Signature of Person Obtaining Informed Consent:

Date:

SOCIAL SKILLS AND PERSONAL DEVELOPMENT IN THE DRAMATIC ARTS

CONSENT FORM

I have read the Letter of Information, have had the nature of the study explained to me and I agree to participate. All questions have been answered to my satisfaction.

Name of Drama Group Participant (please print):

Signature: Date:

Name of Legally Authorized Representative (print):_____

Signature of Legally Authorized Representative:_____

Date:_____

Name of Person Obtaining Informed Consent:

Signature of Person Obtaining Informed Consent:

Date:

Appendix J

Ethics Approval Form

FORM A

Faculty of Education
Graduate Programs & Research Office

Print Form

Reset Form

Western
Education

APPROVAL OF M.Ed. THESIS PROPOSAL

If the proposed research does not involve human subjects or the direct use of their written records, video-tapes, recordings, tests, etc., this signature form, along with ONE copy of the research proposal should be delivered directly to the Graduate Programs & Research Office for final approval.	If the proposed research involves human subjects, this signature form, along with ONE copy of the research proposal and Ethical Review Form signature pages (Section 1.1 to 1.7) must be submitted to the Graduate Programs & Research Office for final approval.

IT IS THE STUDENT'S RESPONSIBILITY TO PROVIDE A COPY OF THE RESEARCH PROPOSAL (INCLUDING REVISIONS) TO THE THESIS SUPERVISOR AND ALL MEMBERS OF THE ADVISORY COMMITTEE.

Student's Name: Jennifer McAlpine   **Student #:**

Field of Study: Educational Psychology / Special Education

Title of Thesis: Social Skills and Personal Development in the Dramatic Arts

Name of Thesis Supervisor: Dr. Alan Edmunds

Name of Thesis Advisory Committee Member: Dr. Elizabeth Nowicki

DOES THIS RESEARCH INVOLVE THE USE OF HUMAN SUBJECTS: ◌ Yes   ◌ No

APPROVAL SIGNATURES:

Graduate Student: Date: November 11, 2011

Thesis Supervisor: Date: Nov 23/11

Advisory Committee: Date: November 11, 2011

Ethical Review Clearance: Date: Jan 19/12

Ethical Review Number: 1111-7

**Associate Dean
Graduate Programs & Research:**   Date: Jan 26, 2012

A STUDENT MAY PROCEED WITH RESEARCH WHEN A COPY OF THIS FORM CONTAINING ALL APPROVAL SIGNATURES HAS BEEN RECEIVED.

A copy of this proposal may be made public and kept on a two-hour reserve in the Faculty of Education Library.

Version Date: January 2010

The University of Western Ontario   Faculty of Education   Graduate Programs & Research Office

Curriculum Vitae

Name: Jennifer Richardson

Post-secondary   University of Western Ontario
Education and   London, Ontario, Canada
Degrees: 2006-2010 B.A.