Chapter 8

A Cognitive–Behavioral Play Therapy (CBPT) Approach for Adolescents’ Pro–Social Skill Development in the School Setting

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ABSTRACT

In this chapter, the authors will discuss the use of a cognitive-behavioral play therapy approach (CBPT) for teaching social skills to adolescents using expressive art techniques in a school setting. Expressive art techniques are integrated into an eight-week social skills curriculum, which represents a cognitive-behavioral play therapy approach for the development of pro social skills with adolescents. Consultation and collaboration with classroom teachers and parents are integrated into the pro social skills model. The inclusion of The American School Counselor Association (ASCA) National Model (2012) will provide applications to support the importance of pro social skills for adolescents in the school setting.

INTRODUCTION

Social development is crucial to the identity formation of adolescence, second only to infancy. Social skills that are taught in childhood are honed, defined, and refocused during adolescence (Feldman, 2014). Adolescents’ social skills development can alternate between superficial and intimate relationships, developing advanced levels of empathy, learning to accept rules, structure and negotiating issues of separation and dependence with their primary caregivers can be profoundly challenging for a number of adolescents (Vickers, 2002). Pro social skills are defined as: socially acceptable learned behaviors

DOI: 10.4018/978-1-5225-2224-9.ch008
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that enable children and adolescents in a school environment to interact with their peers and teachers in ways that elicit positive responses and assist in avoiding negative responses as a result of these interactions (McClelland, Morrison, & Holmes, 2000). The peer group connection for an adolescent can be viewed as a natural and effective setting to enhance and maintain pro social skills (Warner, Fisher, Shrout, Rathor & Klein, 2007).

Adolescents can have great difficulty in developing and maintaining pro social skills, such as: following instructions, using self-control, responding to teasing, and avoiding fighting that can occur when feelings of awkwardness and uncertainty regarding changes, which are occurring both individually and socially are present (Goldstein & McGinnis, 1997). These difficulties with social skills experienced by adolescents can lead to thoughts of negative expectations, self-deprecation, and physiological arousal. The aforementioned difficulties can contribute to dysfunctional social performance, which can lead to a major social skill and academic deficits. These deficits could cause an adolescent to avoid social situations, and foster feelings of isolation and depression.

SOCIAL SKILLS GROUPS AND PLAY THERAPY WITH ADOLESCENTS

Social Skills Groups

The group process, especially smaller groups, is particularly useful in facilitating the development of social skills, and decision making skills to help adolescents be more successful in their lives (Trotzer, 2006). According to Gladding (2012), groups of all kinds can be helpful to adolescents in making a successful transition from childhood to adulthood. They are valuable because they allow members to experience a sense of belonging, share common problems, to find and provide support, to facilitate new learning, to help ease internal and external pressures, and to offer hope and models for change (p.266). Peer relationships provide an important context for social learning and support individual development. These relationships are strongly related to social, emotional, and cognitive functioning during adolescence (Parker et al. 2006). Social interaction, in a group setting, during adolescence in particular have distinctive impact on long-term patterns of both intra-and interpersonal functioning (Hartup, 1983; Piaget, 1954; Savin-Williams and Berndt, 1990; Sullivan, 1953).

The importance of pro social skills training for adolescents in a group setting is well defined in the literature (Hemphill & Littlefield, 2001, Fisher, Masia-Warner, & Klein, 2004, Cartwright-Hatton, Tchernitz & Gomersall, 2005, Flanagan, Allen & Henry, 2010, Ellis, 2002). McGinnis (2012), along with Goldstein and McGinnis (1997), have developed a prosocial skills curriculum, facilitated in a group setting, using a cognitive-behavioral model. The curriculum includes teaching skills that address the following topics: dealing with feelings, alternatives to aggression, dealing with stress, and planning skills (McGinnis, 2012). A meta-analytic study conducted by Spence (2003), suggest that social skills training interventions that combine behavioral modeling with instruction in social perception skills, self-regulation techniques, and social problem skills produce the most positive treatment effects. These elements should be included in school social skills training programs to maximize efficacy (Harrell, Mercer, & DeRosier, 2008).