Developing Peer-Mediated Social Skills Intervention Model for Children with Special Needs

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Abstract: This research aims to develop a model of social skills training for children with special needs in inclusive elementary schools. Training model involves the normal child as a mediator training is peer-mediated social skills intervention (PMSSI), which developed into seven-step development. Results of development are: (1) the model PMSSI appropriate to meet the needs of children with special needs and normal children's social skills training; (2) The components of the model of the description measures of social skills training, organized, hierarchical sequence, and clear; (3) Model PMSSI also useful for classroom teachers and the special teacher in inclusive elementary schools; and (4) Model PMSSI efficient in terms of cost but is less efficient in terms of time. Based on the results of the development there are two suggestions: (1) the need for training of trainers on the use of models PMSSI before being applied in inclusive elementary schools, and (2) the implementation of social skills training should be done in an integrated manner in academic activities or in a group setting play.

Keywords: PMSSI model, children with special needs, inclusive elementary schools.

Good social skills are the foundation to pursue a healthy and normal life (Meadan & Monda-Amaya, 2008). Inadequate social skills will result in: (1) increasing behavior problems due to the lack of social interaction skills, (2) increasing the possibility of maladaptive behavior later in life, and (3) reduce the positive support to build a good relationship peer (Robertson, et al, 2003; Miller, et al, 2005). Children with special needs who are at risk of problematic elementary schools socially inclusive because of their failure to replicate and understand social situations around it and they are difficult to interpret social initiations undertaken by other children (Klavina & Block, 2008).

Harris, et al (2009) suggest that children with special needs do not experience a complete failure in social interaction, the social skills must be improved. At first, social skills training conducted by adults on children with special needs (Rogers, 2000), but that approach has the disadvantage of their disregard for the child's social interaction in the natural environment and social skills taught are the desire of adults not take place as the children children playing with their peers (Rogers, 2000). The strategy is transformed into a strategy that involves peer (normal child) to teach social skills to children with special needs. Peers as a model for children and can strengthen the social behavior (Bandura, 1977). Harris, et al (2009) suggest that children with special needs do not experience a complete failure in social interaction, the social skills must be improved. At first, social skills training conducted by adults on children with special needs (Rogers, 2000), but that approach has the disadvantage of their disregard for the child's social interaction in the natural environment and social skills taught are the desire of adults not take place as the children children playing with their peers (Rogers, 2000). The strategy is transformed into a strategy that involves peer (normal child) to teach social skills to children with special needs. Social skills peers as a model for children and can strengthen the social behavior (Bandura, 1977).



During this time, social skills are considered as a skill that can be mastered by children themselves. The assumption is not correct, because those skills should be practiced based on the circumstances of the child. In children with special needs who are in the inclusive school, social skills are skills that determines their success as they interact directly with normal friends. Be regarded as decisive, because children with special needs are socially accepted will get a high level of acceptance from peers (Marlina, 2008). Even if no social skills training, are not conducted in a structured and performed on certain types of special needs children. Harris et al (2009) for example, social skills training to children with special needs kindergarten age. Webb et al (2004) examined the social skills in children with autism and Vaughn et al (2001) on children's learning disabilities. Several studies were conducted with the collaboration techniques with children with special needs.

One way to teach social skills is the peer-mediated intervention (PMI), the normal peer teaching social skills to children with special needs (Harris et al, 2009). PMI consists of three types, namely, peer proximity, peer prompting and reinforcement, and peer social initiation. Peer proximity do with the closeness between children with learning disabilities peer mediator. Peer prompting and reinforcement is done by teaching how to start a social interaction (Harris et al, 2009). Based on the concept of Harris et al, (2009), the researchers developed a model of social skills training for children with special needs called peer-mediated social skills intervention (PMSSI).

If seen the conditions in Indonesia and throughout the researcher knowledge, no studies have attempted to develop a model of social skills training for children with special needs, particularly using PMSSI. PMSSI a social skills training strategy that uses peer (normal children), classroom teachers and special teachers are integrated in a training setting (Clikeman, 2007; Harris, et al, 2009). Departing from these problems, the authors propose the formulation of the problem:

- 1. How to develop a model appropriate social skills training for children with special needs in inclusive elementary schools?
- 2. How to develop social skills training model is useful when the model is applied in the inclusive elementary schools?

METHOD

Development Method

Model Development PMSSI using methods of research and development (research and development), referring to the Borg and Gall (1989). The development of research procedures are: (1) assess the nature of children with special needs, inclusive schools and social skills; (2) assess the learning models; (3) selecting a learning model that is adapted to be adopted as a model PMSSI; (4) developed the first form PMSSI models for children with special needs, which is done by modifying the model that has been chosen; (5) explores opinion of regular teachers and special teacher about the accuracy, feasibility, appropriateness and usefulness of the first form PMSSI models that have been developed; (6) test the acceptability of the first form PMSSI models through expert testing. Thus social skills training model developed theoretically tested acceptability; and (7) the results of activity (number 4) and (number 5) are used as the basis for revising the first form PMSSI that have been developed.



The First Phase Development

The first phase development procedure includes the following activities: (1) determine whether the model PMSSI is a training model, using the criteria of Harris, et al (2009); (2) determine the suitability of the model components PMSSI when used as a model of social skills training in inclusive elementary schools; (3) determine whether PMSSI model components need to be modified when used in inclusive elementary schools; (4) modify the Model PMSSI become a model of social skills training for children with special needs; (5) develop a Social Skills Training Manual for Classroom Teachers and Special Teachers then develop a Social Skills Training Material Books; and (6) develop a draft example of social skills training for children with special needs.

The Second Phase Development

Development of the second phase is the evaluation of the prototype model of social skills training, using Focus Group Discussion and Delphi Technique. FGD conducted to explore the opinion of a special teacher and classroom teacher about PMSSI Model developed. Delphi technique conducted to collect expert opinion and agreement of the outstanding education and inclusive education experts on the prototype Model PMSSI.

The Subject of Development

Subject development consists of two groups: (1) group of classroom teachers and special teacher (who was involved in FGD) were selected purposively. FGD attended by 25 participants (20 classroom teachers and 5 special teacher). (2) a group of experts who examine the acceptability of the prototype Model PMSSI which consists of five outstanding educational experts and 2 inclusive education experts.

Development Instrument

Data were collected by questionnaire to gather expert opinions on the acceptability of models that include usability, accuracy, and feasibility PMSSI models. Usability, referring to how much PMSSI models developed to benefit the classroom teacher, guidance counselor specialized, and peer mediators in inclusive elementary schools. Feasibility, refers to how real when PMSSI models implemented in inclusive elementary schools. Accuracy, refers to how the right model PMSSI meet the needs of students social skills training. Contents validity of this development instrument determined by using expert judgment.

Data Analysis

Data analysis consisted of two, namely (1) the data analyzed by the technique FGD Cutand-Paste; and (2) expert assessment data were analyzed by using percentage. To know the difference between the acceptability of the model PMSSI exceptional education experts and inclusive education experts, analyzed with the Kruskal-Wallis nonparametric statistics.

RESULT AND DISCUSSION

The results of research are grouped in three, which is the result of the development of the model, FGD results, and the results of the expert test.



Model Development

The development phase begins with an assessment of a number of models of learning and teaching models comparing them. Based on the results of the study and comparison of teaching models, found a number of reasons which enables the model PMSSI adapted as a model of social skills training in inclusive elementary schools. *First*, PMSSI models can be used as a model social skills training pedagogical charged, because PMSSI models emphasize the importance of the use of learning objectives as a training base. *Second*, PMSSI models meet the requirements of social rehabilitation and educational function. This is indicated by PMSSI model characteristics, namely: (1) focusing on specific behaviors and ignoring the causes negative behavior; (2) focus attention on academic behavior and social behavior from the standpoint of behavioral, making it easier to take measurements directly. *Third*, the model PMSSI easily used by classroom teachers, subject teachers and special teacher. *Fourth*, the model PMSSI a prescriptive training model, whose components consist of a set of measures of systematic training, so easily implemented by classroom teachers and special teachers.

PMSSI models adapted by modifying components. Modifications were done by adding components: (1) identification and assessment of children with special needs who have problems of social skills; and (2) identification of peer mediator who will mediate learning social skills. The component is added as a first step in the model of social skills training. Social skills training measures are developed based on the model PMSSI, composed of fifteen steps, namely: (1) identify children with special needs who have problems of social behavior; (2) identify the peer mediator; (3) pair of children targeted by the peer mediator; (4) identify the behavior of social skills of children with special needs (children target); (5) to train classroom teachers, special teacher and peer mediator; (6) to formulate the goal of social skills training; (7) selecting and applying measurement techniques of social skills; (8) collecting baseline data the target child's social skills; (9) evaluate the performance targets based on the child's social skills of baseline data; (10) apply intervention techniques; (11) to collect data during the intervention period; (12) evaluates the performance of social skills during the intervention period; (13) implement a maintenance techniques behavioral social skills; (14) collecting data during the maintenance period of social skills; and (15) to evaluate the performance over a period of social skills training. Component model of social skills training is a step-by-step social skills training for children with special needs in inclusive elementary schools.

Results of Focus Group Discussion

Focus Group Discussion begins by discussing about the usefulness PMSSI Model. There are two poles of opinion with regard to the PMSSI Model developed. On the one hand, a number of research subjects assume that social skills training model, which has been described in the form of guidebooks, useful for the implementation of the class teacher assignments. On the other hand, there are participants who seem to doubt the usefulness of social skills training model for teacher specialized counselors. With regard to the ability to use PMSSI Model in school, the teachers want their classroom training before implementing models of social skills training as designed in the guidebooks. On the other hand there is a special tutor who felt unable to carry out social skills training sebagimana designed in the guidebooks. In general, the participants found that social skills training objectives written in the manual is clear and understandable.

While the clarity of the component measures of social skills training model, generally classroom teachers state that the component is sufficiently detailed and understandable. Instead a number of special teacher had difficulty in understanding the description of the application



procedure PMSSI. Regarding the feasibility aspect of social skills training in schools, a participant may doubt the possibility of implementation of such training because of the unavailability of special hours for teachers. In the following discussion, the school obtained a description that no one has time for behavior modification activities of children with special needs, but there are also schools that do not.

With regard to the amount of time to carry out social skills training, nearly all classroom teachers contend that the time required to carry out social skills training has not been effective. Regarding the issue of the cost required to implement social skills training, there are two different opinions. Some participants stated that they would have difficulty if you had to double the guidebook for peer mediators and social skills training materials, some states there is no problem because the principal costs to provide funds for behavior modification activity in school children with special needs. In the focus group discussions, the participants were asked to provide suggestions to improve the Social Skills Training Manual for Teachers Classroom and Special Teachers and Social Skills Training Materials.

Test Results Experts

Here's a description of the results of the expert test analysis accuracy, feasibility and usefulness PMSSI models.

a. Accuracy PMSSI Model

The indicators used to describe the accuracy of the model social skills training is the appropriateness of social skills training procedures when applied by peer mediators to children with special needs.

Table 1. Consensus Degrees PMSSI Model Accuracy

the Questions	Consensus
	Degrees
The accuracy of measures of social skills training when applied to a peer mediator	58,4%
The accuracy of measures of social skills training when applied to children with special	75%
needs	

Different test results an expert opinion on the accuracy of the model of social skills training, performed with techniques Kruskal-Wallis nonparametric statistics, showing that the Chi-Square = 3.6070; df= 1; and α obtained at 0.0575. This means that there is no difference of opinion between experts outstanding education and inclusive education experts about the accuracy of the Model PMSSI.

b. Feasibility Model PMSSI

Indicators used to demonstrate the feasibility of social skills training model is a model of practicality and efficiency of the model.

Table 2. The Degree of Consensus Feasibility Model PMSSI

the Questions	Consensus Degrees
Practicality measures designed social skills training in PMSSI manual	71,1%
The amount of power needed to carry out the social skills training as designed in	70,5%
the PMSSI manual	
The time required to carry out the social skills training as designed in the PMSSI manual	83,3%
How big is the impact of the development of this PMSSI model to choose social	56%
skills training approach that "cost-beneficial"?	3070



The results of different test analysis showed that there was no difference in expert opinion on the feasibility of the model of social skills training. This is evident from the results of calculations performed using the Kruskal-Wallis following: Chi-Square = 3.6070; df= 1, and α = 0.4029.

c. Usability Model PMSSI

The usefulness of the model PMSSI indicated by the following indicators: the requirement for users to be able to implement the model, the scope of the model, the model kebernilaian interpretation, the clarity of the components of the model, and the impact of the use of models.

Table 3. The Degree of Consensus User Requirements Model PMSSI

the Questions	Consensus Degrees
Whether or not a special education classroom teachers in the field of social skills	46,6%
training	
Whether or not special teacher specialized in the field of social skills training	50%
The need for classroom teachers have the technical competence in the field of social skills training	61,3%
Whether or not to have the special teacher specialized technical competence in the field of social skills training	58,3%
Whether or not to have the classroom teacher substantive knowledge in the field of social skills training	62,3%
Whether or not to have the special teacher substantive knowledge in the field of social skills training	58,3%
Whether or not the classroom teacher has interpersonal relationship skills	50%
Whether or not to have the special teacher interpersonal relationship skills	50%

Furthermore, the results of data analysis with respect to the interpretation kebernilaian models showed only 25% of experts who state that social skills training model developed in this study useful for classroom teachers, while 75% of experts stated very useful for classroom teachers.

Table 4. The Degree of Consensus Relevance Model PMSSI

the Questions	Consensus Degrees
Model PMSSI relevance when applied to normal children	75%
Model PMSSI relevance when applied to children with special needs	58,3%

Table 5. The Degree of Consensus Important Benefits and Value Model PMSSI

the Questions	Consensus Degrees
Model PMSSI benefits for classroom teachers	75%
Benefits Model PMSSI for special teachers	58,3%
Model PMSSI important value for classroom teachers	58,3%
Model PMSSI important values for special teachers	75%

Table 6. Degree of Consensus the Clarity of Model PMSSI Components

	the Questions	Consensus Degrees
1.	The clarity of description of steps to identify children with special needs	58,3%
	who have problematic social skills	
2.	The clarity of description identifying step of peer mediator	63,3%



3.	The clarity of description of the steps to pair the child target with peer	70%
	mediator	
4.	The clarity of description of steps to identify the target child behavioral	66,6%
	social skills	
5.	The clarity of description of steps to formulate the goal of social skills	50%
	training	
6.	The clarity of description of the steps to select and apply the measurement	55,5%
	technique social skills	
7.	The clarity of description of steps to collect baseline data the target child's	54,6%
	social skills	
8.	The clarity of description of measures to evaluate the performance of social	50%
	behavior based on baseline data	
9.	The clarity of description of the steps to apply intervention techniques	41,6%
10.	The clarity of description of steps to collect data during the intervention	66,6%
	period	
11.	The clarity of description of measures to evaluate the performance of social	66,6%
	behavior during the intervention period	
12.	The clarity of description of the step of applying the techniques of	58,3%
	maintenance of social behavior	
13.	The clarity of description of the steps to collect data during the maintenance	58,3%
	period of social behavior	
14.	The clarity of description of measures to evaluate the performance of	50%
	students on the behavior of the maintenance period	

Table 7 Degree of Consensus General and Special Goals of Social Skills
Training in Social Skills Training Material Books

the Questions	Consensus Degrees
Material 1 on Listening Skills	66,6%
Material 2 on Asking for Help Skills	58,3%
Material 3 on Saying Thank You Skills	58,3%
Material 4 on Following the Orders Skills	41,6%
Material 5 on Discussion Skills	58,3%
Material 6 on Helping Friends Skills	39,6%
Material 7 on Asking Questions Skills	36,75%
Material 8 on Making Correction Ownself Skills	31,6%

The result of calculation to see dissent exceptional educational experts and education experts about the usefulness of social skills training model shows that Chi-Square values obtained at 0.9263; df = 1; and α of 0.3358. This shows there is no difference of opinion between expert outstanding education and education experts about the usefulness of social skills training model.

In general, the findings of this study indicate that: (1) the PMSSI model appropriate to meet the needs of special needs children and normal children social skills training; (2) the components of the PMSSI model in the form of measures of social skills training, organized, hierarchical sequence, as well as a clear description of the measures training; (3) the PMSSI models are also useful for classroom teachers and special teachers in inclusive elementary schools; and (4) have developed a model PMSSI efficiency in terms of cost but is less efficient in terms of time required to carry out the social skills training.

The findings of this study are consistent with Kavale & Forness (1996) which states that one way to improve the social skills of children with learning disabilities is a peer intervention. There is an increased social skills at children with learning disabilities who peer-medited than with classroom teachers. This study are supported by Nowicki (2003) which compares social skills among the children with learning disabilities, the average students, and the underachiever



students. The results show that after acquiring social skills training, children with learning disabilities obtain higher performance than the average students and the underachiever students. Teaching is mediated by peer influence on children's social skills and participation of the children with special needs in the overall learning process in the classroom activities. This finding is supported by Robertson, et al (2003) that once applied the inclusion of peers in learning, active in asking, answering questions, and active discussion on children with special needs in inclusive schools increased significantly. Staubitz, et al (2005) confirms the application of the involvement of peers also affect the emotional maturity and behaviors. The patterns shown more controlled emotion, capable of expressing emotions appropriately and be able to understand the emotions of others. Behavior in the classroom is also more adaptive to peers and teachers after the application of the involvement of peers. Vandenberg (2001) adds the involvement of peers also can improve the behavior persist with a task (on-task behavior) in children with attention disorders.

PMSSI model development emphasizes the social skills of children with special needs in elementary schools. PMSSI the model was developed based on peer-mediated intervention (Harris, et al, 2009). At this time, children are required to interact in a neighborhood with good schools. The application of models involvement of peers who normally have done, Meadan & Monda-Amaya (2008) and Robertson, et al (2003), which proves that peer-mediated intervention is a learning strategy effectively for improving social skills in children with special needs elementary school age. Laushey and Heflin (2000) proved the effectiveness of the PMI in improving social interactions in autistic children in elementary school. Research results have shown that children with autism can say hello, greeting, and introduce him/herself after intervention by the PMI. Research Ryan, et al (2004) reported the PMI effectively reduce emotional and behavioral disorders. Research Ryan, et al (2004) in line with research findings that show a change in the behavior of children with special needs for intervention with PMI, such as babbling in class, interrupting teachers and friends, and disrupt the class discussion. Such behavior is reduced after PMI applied in learning.

These results indicate the involvement of peers can help the teacher's role. Peer mediators (normal children) give and provide opportunities for children with special needs to participate fully improve social skills (Estell, et al., 2008; Harris, et al, 2009; Kamps & Barbetta, 1994; Meadan and Monda-Amaya, 2008; Schneider & Goldstein 2008). If the peer mediator given the opportunity to play a role in the learning process, it is the responsibility of learning can be transferred from the teacher to the peer group.

Application of PMSSI by peer mediator to children with special needs a positive effect both for peer mediator and children with special needs. The research findings indicate there is an increase in the attitudes and perceptions of peer mediators for children with special needs. Peer mediators are more accepting, positive outlook, honed his leadership skills, more confidence, feeling self-esteem, and is proud to help a friend. These findings are relevant to the research Staubitz, et al (2005) that the benefits of the inclusion of peer to peer mediator, among others: (1) improve the attitude toward school and reduce the number of dropouts; (2) prevent the social barriers and create friendships; (3) provide emotional support and positive role models; (4) increase the pride of helping others; (5) improve the mastery of academic skills; (6) has a great sense of dedication to the teaching itself so that they can transfer the teaching to children with special needs effectively; (7) increases self-esteem, self-confidence; (8) increases the sense of responsibility and awareness in transferring knowledge; and (9) fosters empathy toward children with special needs.

Application of PMSSI in inclusive schools also affects the child's academic and social progress of normal, these are improving the language skills of children (Harris, et al, 2009); (2) learn to accept and appreciate individual differences among peers (Widerstrom, 2005); (3)



increased confidence by being a model of positive behavior (Pretti-Frontczak & Bricker, 2004); (4) build character by giving encouragement to children with special needs when participating in learning activities in the classroom (Morrison et al, 2001); and (5) develop leadership skills and help teachers improve the social skills of children with special needs (Sandall et al, 2005). Conceptually, this study proved that peers can be a source of learning for other students. Social skills training will work well if applied in an inclusive school is integrated into the academic curriculum. Can be done with a variety of strategies, taught in classes in a particular subject or integrated into the academic curriculum, taught individually, in small groups or big groups (Bond & Castagnera 2008; Clikeman, 2007; Shepherd, 2010; DiSalvo & Oswald, 2002; Fenty, et al, 2008; Delano & Snell, 2006).

Viewed from the perspective of educational psychology, PMSSI application provides the flexibility to think and to act in children because of the absence of a psychological burden with a friend. This finding is related to the concept of joyful learning. Atmosphere fun teaching and learning process can focus on learning the child's full attention so that time on task is high. From the perspective of special needs education, which was to develop the potential of individuals and develop independence. This view is understood that although children with special needs have the disorder, but its potential can still be developed through the learning process so as to achieve optimal results. The trick is to develop learning tools that accommodate learning needs of all children both in academic and field social (Wong, 2004).

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REFFERENCES

- Bond, R. & Castagnera, E. 2008. Peer Supports and Inclusive Education: An Underutilized Resource. *Theory into Practice*, 45 (3): 224-229.
- Clikeman, M.S. 2007. *Social Competence in Children*. Michigan: Springer Science Business Media.
- DiSalvo, C.A & Oswald, D.P. 2002. Peer-Mediated Interventions to Increase the Social Interaction of Children with Autism: Consideration of Peer Expectancies. *Focus on Autism and Other Developmental Disabilities*, 17 (4): 198-207.
- Estell, D.B., Jones, M.H., Acker, R.V., Farmer, T.W. & Rodkin, P.C. 2008. Peer Groups, Popularity, and Social Preference: Trajectories of Social Functioning Among Students with and without Learning Disabilities. *Journal of Learning Disabilities*, 41 (1): 5-14.
- Fenty, N.S., Miller, M.A. & Lampi, A. 2008. Embed Social Skills Instruction in Inclusive Settings. *Journal of Intervention in School and Clinic*, 43 (3): 186-192.
- Gonzales-Lopez, A., Kamps, D.M. 1997. Social Skills Training to Increase Social Interactions between Children with Autism and Their Typical Peers. *Focus on Autism and Other Developmental Disabilities*, 12: 2-14.
- Gresham, F. M., Cook, C. R., & Crews, S. D. 2004. Social Skills Training for Children and Youth with Emotional and Behavioral Disorders: Validity Considerations and Future Directions. *Behavioral Disorders*, 30: 32-46.





- Harris, K.I., Pretti-Frontczak, K. & Brown, T. 2009. Peer-Mediated Intervention: An Effective, Inclusive Strategy for All Young Children. *The National Association for the Education of Young Children*. 1 (1): 1-15.
- Kavale, K.A, & Forness, S.R. 1996. Social Skills Deficits and Training: A Meta Analysis of the Research in Learning Disabilities. *Advances in Learning and Behavioral Disabilities*, 9: 119-160.
- Klavina, A. & Block, M.E. 2008. The Effect of Peer Tutoring on Interaction behaviors in Inclusive Physical Education. *Physical Activity Quarterly*, 25 (2): 132-158.
- Laushey, K.M. & Heflin, L.J. 2000. Enhancing Social Skills of Kindergarten Children with Autism through the Training of Multiple Peers as Tutors. *Journal of Autism and Developmental Disorders*, 30 (3): 183-193.
- Marlina. 2008. Dinamika Penerimaan Teman Sebaya pada Siswa Berkesulitan Belajar di Sekolah Inklusif. *Jurnal Pembelajaran*, 30 (2): 1-10.
- Meadan, H. & Monda-Amaya, L. 2008. Collaboration to Promote Social Competence for Students with Mild Disabilities in the General Classroom: A Structure for Providing Social Support. *Intervention in School and Clinic*, 43 (3): 158-167.
- Miller, M.J., Lane, K.L. & Wehby, J. 2005. Social Skills Instruction for Students with High-Incidence Disabilities: A School Based Intervention to Address Acquisition, Deficits. *Preventing School Failure*, 49 (20): 27-39.
- Nowicki, E.A. 2003. A Meta Analysis of the Social Competence of Children with Learning Disabilities Compared to Classmates of Low and Average to High Achievement. Learning Disabilities Quarterly, 26 (1): 1-61.
- Plumer, P.J. & Stoner, G. 2005. The Relative Effects of Classwide Peer Tutoring and Peer Coaching on the Positive Social Behaviors of Children with ADHD. *Journal of Attention Disorders*, 9 (1): 290-300.
- Robertson, Jo, Green, K., Alper, S., Schloss, P.J. & Kohler, F. 2003. Using a Peer-Mediated Intervention to Facilitate Children's Participation in Inclusive Childcare Activities. *Education and Treatment of Children*, 26 (2): 249-267.
- Ryan, J.B., Reid, R. & Epstein, M.H. 2004. Peer Mediated Intervention Studies on Academic Achievement for Students with EBD. *Remedial and Special Education*, 25 (6): 330-341.
- Schneider, N. & Goldstein, H. 2008. Peer-related Social Competence Interventions for Young Children with Communication and Language Disorders. In W. H. Brown, S. L. Odom, & S. R. McConnell (Eds.), *Social Competence of Young Children: Risk, Disability and Intervention* (233–252). Baltimore, MD: Brookes.
- Shepherd, T.L. 2010. Working with Students with Emotional and Behavior Disorders: Characteristics and Teaching Strategies. New Jersey: Pearson Education Inc.
- Staubitz, J.E., Cartledge, G. & Yurick, A.L. 2005. Repeated Reading for Students with Emotional or Behavioral Disorders: Peer- and Trainer-Mediated Instruction. *Behavioral Disorders*, 31 (1): 51-64.
- VandenBerg, N.L. 2001. The Use of a Weighted Vest to Increase On-Task Behavior in Children with Attention Difficulties. *The American Journal of Occupational Therapy*, 55 (6): 112-134.

