

SOCIAL SKILLS TRAINING: EFFECTS ON BEHAVIOR AND RECIDIVISM WITH FIRST-TIME ADJUDICATED YOUTH

Kathleen A. Bailey, Ed.D.
Department of Criminal Justice
Grand Valley State University

James David Ballard, Ph.D.
Department of Sociology
California State University Northridge

This study examines the effects of social skills training on a group of first-time adjudicated male offenders from the juvenile justice system. Three types of groups were used to evaluate the effects of such programs on behavioral change. These groups included youth who received: 1) social skills training with parents or guardians; 2) social skills training without parents or guardians; 3) no skills training. Differences in the scales and subscales scores from the Jesness Inventory standardized test were evaluated and analyzed in conjunction with the type of offenses (status, misdemeanor, and felony) for the three groups. This exploratory study yielded some recommendations for further research and suggests specific program modifications that can assist those who contemplate the administration of such training for youth.

Correspondence concerning this article should be addressed to Kathleen A. Bailey, Ed.D., Department of Criminal Justice, Grand Valley State University; email: baileyk@gvsu.edu

Studies examining social skills deficits in early childhood and adolescence demonstrate that youthful maladjustments are strongly related to an assortment of behavioral problems. For this reason, social skills training (SST) has become a popular treatment alternative for youth involved in the juvenile court system. Although the literature pertaining to the various uses of SST is plentiful, the research evaluating its effectiveness with newly adjudicated youth is almost nonexistent. Similarly, there is very little research on differences between youth whose parents or guardians also participate in SST training and those who participate without parental or guardian involvement. Thus, the purpose of this research project was to explore these two areas, albeit with a primary focus on the latter.

Social Skills Training

Social skills refer to “positive skills that are at least minimally acceptable according to societal norms and that are not harmful to others. This excludes exploitative, deceitful, or aggressive ‘skills’ which may be of individual benefit” (Combs & Slaby, 1977, p. 162). Positive social skills that are mutually beneficial to the user and others include the ability to communicate, give and receive negative feedback, negotiate, and problem-solve. Youth who lack these essential skills may struggle with the ability to successfully direct their lives or function well in the world. This inability, in turn, leads to frustration and emotional stress. This altered emotional state can result in further delinquency, as the individual, lacking problem-solving skills and social resources, turns to “solutions” that violate the law (Elliot, Huizinga, & Menard, 1989; Henderson & Hollin, 1986; Hollin, 1990; Huff, 1987; Renwick & Emler, 1991).

One remedy for this "vicious circle" utilized by some juvenile courts may be SST, a treatment approach that provides opportunities for youth to learn and experience useful and beneficial social skills (Leiber & Mawhorr, 1995; Simons, Whitbeck, Conger-Rand, & Conger, 1991). Such training programs have been used extensively as a treatment technique for juvenile offenders (Renwick, 1987), and have been used in conjunction with other procedures with different offender populations (Priestley, et al., 1984), including sex offenders (Abel,

Blanchard, & Becker, 1976), arsonists (Rice & Chaplin, 1979), chronically aggressive and conduct-disordered youth (Goldstein & Glick, 1994; Hansen, St. Lawrence, & Christoff, 1989), and incarcerated delinquent youth (Shivrattan, 1988).

A study by Roedell, Slaby, and Robinson (1977) showed that social skills are learned in three ways: (1) from adult direction, teaching, and reinforcement; (2) from watching others' social behaviors and their consequences; and (3) from experiencing connection with others and collaborative efforts to work through social situations. Other studies have demonstrated that youth can learn new behaviors from observation alone, and that modeling procedures can be effectively used to eliminate various patterns of avoidance (Bandura, 1969). In conjunction with these studies, O'Connor (1969) notes that peer group interaction in a directed supportive setting decrease the chances that a youth will be avoidant and thus can help to overcome social fears.

Although there are many studies researching the effects of social skills training, few have explored the effects of utilizing SST programs that include both youth and their families (Serna, Schumaker, Hazel, & Sheldon, 1986). It seems likely that the behavior of a delinquent youth may be positively enhanced and strengthened by the modeling, reinforcement, and practice of social skills in their own family or home environment. Additionally, little research has been conducted on first-time adjudicated youthful offenders and SST. The expectation of this project is that such early intervention would alter the deviant trajectory of the offender and hopefully reduce their participation in criminal behavior.

Social Skills Defined

Social skills are conceptualized in this study as learned behaviors occurring primarily within intimate groups. This study rests on the assumption that positive social skills are needed for mutually beneficial interactions with others in social situations and the lack of positive social skills can often lead to problems in interpersonal relationships. Social skills training is useful for children and adolescents, who must learn to interact positively with a multitude of people, including peers, teachers, parents, police and other criminal justice professionals (Guerra & Slaby, 1990).

The improvement of social skills among delinquent youth is of increasing concern to service providers in the juvenile justice field and one underlying motivation for this study. Research in the area of SST for delinquent youth has shown this intervention to be useful in changing offenders' behaviors. Unfortunately, most of this research has been conducted on youth in institutional settings and not directed at those entering the system for the first time. Research on the effects of SST with first-time adjudicated youth in a community-based setting (youth who are treated in their own home and everyday social environments) is in short supply and provides yet another motivation for this project.

Study Groups

The research population selected for this study was 60 males, ages 13 through 15, selected from the group of first-time adjudicated youth at a local Juvenile Court in Grand Rapids Michigan.¹ Of the 60 youth who were referred and placed in the research study, only 46 completed the treatment and testing.² The original three groups of youth were each composed of 20 adolescent males. Each group was selected in clusters so that SST "pods" (classes) could be formed in manageable sizes (10 participants in each). Thus, the sample was divided into six "pods" of 10 members each, with two pods in each of the three groups noted in Table One.

Due to docket conflicts and adjudication hearing time constraints, it was necessary to select this exploratory sample of youth as they were taken into the Court's Intake Department. The assignment of youth to one of the three groups was conducted in the order that the referrals were received at the Intake Department in a systematic convenience sampling methodology, not randomly. The first set of 10 youth (Pod 1) were assigned to the SST With Parents group, the next 10 youth (Pod 2) were assigned to the SST Without Parents group, the third set of 10 youth (Pod 3) were assigned to the Control group and the assignment cycle repeated thereafter. It required approximately five months to assign youth into the three groups and to fill all six treatment pods.³

Table 1: Demographic profiles of study participants

GROUP DETAILS	AGE	RACE
Group 1: SST with parents and/or guardians. Original Starting N = 20. Final N = 16.	13 years old – 19 % (N = 3) 14 years old – 44 % (N = 7) 15 years old – 37 % (N = 6)	African American – 50 % (N = 8) Caucasians – 38 % (N = 6) Hispanics – 12 % (N = 2)
Group 2: SST without parents and/or guardians. Original Starting N = 20. Final N = 16.	13 years old – 19 % (N = 3) 14 years old – 37 % (N = 6) 15 years old – 44 % (N = 7)	African American – 69 % (N = 11) Caucasians – 25 % (N = 4) Hispanics – 6 % (N = 1)
Group 3: SST control group, no SST training. Original Starting N = 20. Final N = 14.	13 years old – 14 % (N = 2) 14 years old – 36 % (N = 5) 15 years old – 50 % (N = 7)	African American – 71 % (N = 10) Caucasians – 21 % (N = 3) Hispanics – 8 % (N = 1)

METHODOLOGY

Random assignment of youth to one of the three groups was not possible and, as noted previously, youth were placed into groups on the basis of convenience sampling. According to Miller and Whitehead (1996) the “problem with such a sample is that it can contain numerous biases that make it an inaccurate representation” (p. 120). For example, in this sample, the bias might reflect arrest trends such as a police “sweep,” in which numerous individuals are arrested and processed on the same charge and at relatively the same time. The effects of such factors could therefore result in a lack of variance within one group and a lack of homogeneity among all groups. One small control for this effect was the rotating assignment to different pods with two cycles necessary to fill all three groups.

As a first step in the analysis of the data, the researchers felt it necessary to test the assumption that the three groups were

fairly homogeneous. Although availability or convenience sampling creates bias (noted above), the research design attempted to be sensitive to this problem by testing this factor with a one-way analysis of variance, which was used to assess homogeneity of variance among all groups for offense types (status, misdemeanor, and felony). The findings of this analysis show that at the 0.05 level of significance there was not sufficient evidence to conclude that at least one category/group and their respective number of offenses differed from the other groups number of offenses (see Table 2).

Table 2: Homogeneity of offense data

	Group 1 Mean number of offenses per category	Group 2 Mean number of offenses per category	Group 3 Mean number of offenses per category
Status offenses	.18	.25	.14
Misdemeanors	.68	1.12	.28
Felony offenses	1.00	1.81	1.35
Alpha = .05, no significant differences in groups was noted.			

After testing confirmed that the three groups were fairly homogeneous, at least with respect to the important characteristic of type of offense, the researchers proceeded with an analysis of the effects of SST training on these youth. A multiple stage post test design was used to investigate what, if any, effect the training had on behavior for these groups.

Behavioral Study Design

The design to assess the behavioral change in these youth was the three-group pretest, post-test 1, post-test 2. Such a design is well established in the literature (Ary, Jacobs & Ravick, 1972). The independent variables are SST with youth and their parents or guardians, SST for youth alone, and a measure for the control group. The dependent variables were: (a) the self-reported behavior changes as measured by the Jesness Inventory (JI) personality scales and sub-scales scores; and (b) post treatment offense type and number (ON). Table 3 offers a visual representation of the variables and their relationship to the design.

Table 3: Three-Group Pretest, Post test 1, and Post test 2 Design

Group	Pretest	Independent Variable	Post test 1	Post test 2
Experimental Group 1	Jl/ON	Social skills with parent(s) or guardian(s)	Jl/ON2	Jl/ON3
Experimental Group 2	Jl/ON	Social skills without parents or guardian(s)	Jl/ON2	Jl/ON3
Control Group 3	Jl/ON	No treatment	Jl/ON2	Jl/ON3

The JI was administered one week prior to the beginning of the SST Program for all youth in the treatment groups. The JI was administered to youth in the control group the week after all youth in the control group youth had been adjudicated. The JI was administered again to all youth in the treatment groups one week after the SST had been completed (11 weeks into the program) and it was administered again to all youth in the control group 11 weeks after their first test. The final JI (post-test 2) for all groups was administered 10 weeks after the first post-test was given or at the time a youth was discharged from probation, whichever came first. These tests (JI pretest, post-test 1, and post-test 2) were administered by one of two Master's level psychologists.

Social Skills Training Materials

The SST material used with the groups and their parents or guardians (where applicable) was adopted from the ASSET (A Social Skills Program for Adolescents) program (Hazel, Schumaker, Sherman, & Sheldon, 1995). The ASSET program targets the teaching of eight social skills, and is especially designed for delinquent youth (Hazel et al., 1995). These eight skills include: (1) giving positive feedback, (2) giving negative feedback, (3) accepting negative feedback, (4) negotiation, (5)

resisting peer pressure, (6) following instruction, (7) problem-solving, and (8) communication.

As youth learned the social skill designated for that day, their parent(s) or guardian(s) learned the same skill. As part of this process, parents also rehearsed scenarios that they might encounter with their youth. The parents or guardians section also included the following additional components:

- (a) Trouble-shooting component for the discussion of successful and unsuccessful parent-youth interactions in the home during the previous week;
- (b) A rationale component for encouraging the parents to learn new parenting behaviors in order to build a positive and reciprocal parent-adolescent relationship; and
- (c) An information component for providing the parents with information about adolescent growth, simple behavioral techniques and their effects, and adolescent social behaviors concerning peer groups, parents, and authority figures that related to recent parent-youth problems (Serna et al., 1986, p. 69).

Instrumentation

The JI was originally developed for the assessment and classification of young male delinquents (Jesness, 1988).⁴ The JI was specifically developed to predict delinquency and to evaluate the responsiveness of delinquent youth to treatment (Jesness, 1988; Munson & Revers, 1986). The original JI was subsequently modified for older male adolescents, females, and adults (Jesness, 1996) and this revised instrument was used in this study.

The JI is a 155 item forced-choice inventory designed to measure self-reported behaviors related to effective personal functioning. The examinee is instructed to select the one statement in each pair that is deemed most representative of his or her sense of self. The JI includes 11 personality scales and 9 subtype scales. Table 4 includes the scale names and designations as well as the sub-scale names and designations.

Table 4: Revised Jesness Inventory (JI) Scales and Subscales

Scale name and designation	Sub-scale name and designation
1. Social Maladjustment Scale (SM/SM)	1. Unsocialized Aggressive/ Undersocialized Active (AA)
2. Value Orientation Scale (VO)	2. Unsocialized, Passive/ Undersocialized, Passive (AP)
3. Immaturity Scale (Imm)	3. Immature Conformist/ Conformist (CFM)
4. Autism Scale (Au)	4. Cultural Conformist/ Group-oriented (CFC)
5. Alienation Scale (Al)	5. Manipulator/ Pragmatist (MP)
6. Manifest Aggression Scale (MA)	6. Neurotic, Acting-out/ Autonomy-oriented (NA),
7. Withdrawal-depression Scale (Wd)	7. Neurotic, Anxious/ Introspective (NX)
8. Social Anxiety Scale (SA)	8. Situational Emotional Reaction/ Inhibited (SE)
9. Repression Scale (Rep)	9. Cultural Identifier/ Adaptive (CI)
10. Denial Scale (Den)	
11. Asocial Index (AI)	

ANALYSIS

The results of the data derived from the repeated measure ANOVA, with appropriate corrective measures, was summarized for each of the eleven (11) scales and nine (9) subscales of the JI noted above and the three (3) offense types (status, misdemeanor, and felony). First, the Mauchly's W test was used with the alpha level set at 0.25 in order to assess the determination of unequal variance across groups. Sphericity was satisfied in nine scales, subscales, and offense types.

A number of scales, subscales, and offense types required the use of the Greenhouse-Geiser corrected F-test because sphericity was not satisfied. Sphericity required correction in certain scales, subscales, and offenses. Once the sphericity

condition had been satisfied, the correct F-test output from the repeated measure ANOVA was performed. The results of the data derived from the repeated measures ANOVA demonstrated no significant interaction at the .05 alpha level between time (pretest, post-test 1, and post-test 2) and group (Group I, Group II, and Group III) for many of the scales, subscales, and offense types.

There was a significant difference on two scales, the SM/SM Scale (0.03) and the AU (0.01). The Dunnett's Multiple Comparison Test was used to examine this significant interaction. The results of this test demonstrated no significant interaction at the .05 alpha levels for either Group I, or Group II, as compared to Group III, across the three time periods on either of the two scales. As there was no interaction effect between either of the experimental groups as compared to the control group, further post hoc testing between Group I against Group II was not necessary. That is, the treatment did not produce significant changes when compared to the control group.

It must be noted that the IMM scale and all three offense types showed statistically significant changes over time. There were no significant group/time interactions or main effects. No post hoc analysis was run because there was not sufficient evidence supporting a time/group effect.

For the group/time interaction, there were statistically significant differences (at the .05 alpha level) in the mean change scores of the following scales, subscales and offenses: SM/SM Scale score (0.039), VO Scale score (0.151), Imm Scale score (0.302), Au Scale score (0.012), AI Scale score (0.134), MA Scale score (0.899), Wd Scale score (0.507), SA Scale score (0.284), Rep Scale score (0.787), Den Scale score (0.868), AI Scale score (0.118), AA Subscale score (0.375), AP Subscale score (0.240), CFM Subscale score (0.163), CFC Subscale score (0.566), MP Subscale score (0.187), NA Subscale score (0.693), NX Subscale score (0.294), SE Subscale score (0.679), CI Subscale score (0.359), Status Offenses score (0.935), Misdemeanor Offenses score (0.181), Felony Offenses score (0.176), across the three groups over the three time periods.

For the group main effect, there were no statistically significant differences in the mean scores of many scales, subscales, or with respect to the offense types. For the time main

effect, there were no statistically significant differences in the mean scores of many of the scales, subscales, or offense type scores. The results of the data derived from the Dunnett's Multiple Comparison Test demonstrated no significant interaction at the .05 alpha level for either Group I or Group II, as compared to Group III across time.

DISCUSSION

Explaining the limited results of such statistical analysis requires that the researchers seek answers within the structure of the program and its implementation. The above results were not significant, statistically or otherwise, but do hold some valuable lessons for programmers. These findings may indicate to those unfamiliar with juvenile programming that SST was not effective, but the authors would disagree. Study concerns such as attendance, parental engagement, interactions with probation officers, reincarceration during program, length and depth of treatments, and programmatic approach are all variables that should be noted from this project and hopefully offer program managers insight into the mistakes made by this project and its researchers (discussed in more detail below) while suggesting a better pathway for future research. While a strict statistical analysis of the experimental data would suggest that SST was ineffective, additional information and considerations must be addressed in future research if these evaluations are to be made by policy makers. Below we address these in two phases, study concerns and directions for future research.

Study concerns

The first concern of this study was poor attendance rates for the program. In Group I, attendance rates at the treatment sessions were 55.6% for youth, and 55% for parents and guardians. For Group II, attendance rates at the treatment sessions were 76.25%. Some absence rates were primarily attributed to conflicts with transportation, childcare, and work schedules.

The disparity between Group I and Group II attendance rates for youth is noteworthy. In addition to work schedule conflicts, childcare, and transportation difficulties, it is possible that parents or guardians did not encourage their teenagers to

attend sessions that they themselves did not want to attend for a variety of reasons. This raises the question of whether involving parents or guardians encourages or hinders youth from attending social skills treatment programs.

With regard to work schedule conflicts, childcare, and transportation difficulties, such obstacles could have been overcome by providing related program services. For example, instead of meeting at the same time every week, a more flexible scheduling system might have been able to accommodate client needs. Similarly, transportation for those without vehicles may have increased attendance. For this study, the local bus service stopped at 6:00 p.m.; participants without vehicles or funds for taxi service sometimes had no way to get home.

Likewise, childcare was a problem. Many parents or guardians had additional children at home needing their care and programmatic childcare was not provided. Hence, parents or guardians often were unable to afford or secure childcare services for their children to attend the required meetings.

Attendance was also affected by the absence of court sanctions. This research was conducted as a one-time effort that provided SST for a small number of youth without formalized consequences if sessions were missed. Although participants were ordered into the program, few options were available to probation officers to insure that youth would attend by way of either negative or positive sanctions. Typically, after offenders were ordered into the treatment, probation officers prepared them for this treatment intervention, reminded them to attend, and confronted them when they did not attend. Probation officers could not insist that they finish the program before they were discharged from probation because once this research study was completed, no further SST programs were offered. Thus, longitudinal services may have assisted the process and provided much need aftercare.

Additionally, youth were reminded that at their review hearing, a judge would be notified of attendance and participation in the program and it would be to their advantage to attend and participate. While some youth and parents had a number of valid reasons why they were unable to attend, others were simply unconvinced by the courts' demand that they attend the social skills training.

Another unforeseen problem that impacted attendance was the incarceration of some of the youth participants during the time they were in SST, as provisions were not in place to continue the treatment during the period of incarceration. Because of security concerns, such youth could not be transported and allowed to participate in the SST programs; thus, a youth might miss weeks of treatment while in locked custody.

Another explanation for the lack of positive results from SST might be the length of treatment. The SST program occurred once a week for 10 weeks, with each session lasting 1 hour and 30 minutes. The first 60 minutes of each session were spent introducing a particular social skill and discussing the skill steps, implications, and use. The last 30 minutes were devoted to practicing the skill and role-playing. For some youth, 10 weeks of instruction and such limited time for practice of any particular skill may not have provided ample time for them to develop the internalized resources necessary to make meaningful or significant changes in their lives.

One of the fundamental errors of most rehabilitation programs is that they isolate certain behaviors for change and fail to consider the client (in this case, delinquent youth) within the larger social context from which they emerge. In such narrow approaches (in this case, teaching only social skills to delinquent youth), treatment strategies are primarily concerned with the measurable behavior, while failing to take into account why those behaviors occurred in the first place. Illustrating this point, the therapists for this project said that it was often difficult to follow the programs social skills building (scaffolding) format and yet attend to the overwhelming concerns that youth and their parents or guardians often brought to the sessions. For example, every week the therapists voiced their dilemma about trying to attend to other issues, such as street and family violence, drugs, peer pressure, and school truancy, all the while trying to provide the mandated treatment agenda.

Directions for Future Research

Given what is known about the complexity and socially imbedded nature of delinquency and the inadequacy of criminal justice services for youthful offenders, it is perhaps unreasonable

to hope that any one treatment would be consistently appropriate and efficacious. Certainly, this particular social skills training approach was not. What does emanate from this study are some directions about strategies for establishing future research that might provide a more complete picture of SST's successes and failures, and such research can hopefully help direct more promising services and approaches.

In this experiment, the formal results were based on 46 boys, which allowed for approximately 15 boys in each group under investigation. According to Kerlinger (1986), "the smaller the sample the larger the error, and the larger the sample the smaller the error" (p. 117). A larger population for the analysis would permit more confidence in conclusions drawn from the research.

Secondly, program leaders felt that the total number of sessions should be increased to 15 or even 20 to help foster a comprehensive understanding of the social skills. Also, an increase in the number of sessions would better accommodate the intellectual functioning of some of the youth, some of whom had difficulty in conceptualizing the skills and their uses in such short sessions.

Other factors for consideration should be the optimal length of the SST and what exactly should be done to insure the transfer of these social skills to other areas in the youth's life (i.e. school, job). Transition training or follow-up services for adolescents has been discussed in the literature, but little research has been conducted in this area. Primarily, what is unknown is the degree to which these behaviors are generalized to other environments. For example, while this study examined behavioral change as measured by the JI and offense types, it did not systematically examine other behavioral or cognitive measures to determine the effects of the program on the attitudinal change and general social performance of the youth.

Useful behavioral or cognitive measures that program providers might evaluate in future research include school behavior reports, detention behavior reports, and pre- and post-training questionnaires from youth and/or parents to assess their perceptions of change. In particular, these measures should help evaluate whether the cognitive-behavioral component of SST is

extensive enough for youth to generalize treatment to their post-treatment environments, assess those changes, and provide corrections when necessary.

Another area for future study with SST would be to discriminate between different types of offenders, possibly targeting three groups of low, medium, and high-risk youthful offenders, as defined by a standardized risk assessment instrument. Questions persist about this program's ability to be more or less successful with these different types of offenders. Additional analysis of such factors as family structure, race, prior court involvement, and type of offense (person vs. property) might reveal discrepancies in behavioral changes for youth in the aforementioned categories.

Lastly, future research might also offer more support mechanisms to enhance family participation and thus attendance by the youth and parents/guardians. These supports could include providing childcare, offering an array of session times from which to choose, and providing transportation. Offering the SST at different times would enable youth and parents or guardians to choose a time conducive to their schedule. These provisions could increase attendance.

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¹ Since the youth were court-ordered into treatment, it was originally expected that dropout rates would be limited. Unfortunately, dropout rates were a concern and will be discussed in the footnote on sample mortality (number 3 below).

² Of these 46 youth, 8 (17.4%) were 13 years of age, 18 (39.1%) were 14 years of age, and 20 (43.5%) were 15 years of age. Of the 46 youth who completed this research study, 29 (63%) were African American, 13 (28.3%) were White, and 4 (8.7%) were Hispanic.

³ Sample mortality became an issue for this research. Of the 60 youth ordered into the study, only 46 youth completed the program and/or testing. The sample mortality of the 14 youth who did not complete the SST was distributed across the three groups: (1) of Group I: four youth refused to participate; (2) of Group II: one youth was murdered, one youth transferred to the adult system, and two youth refused to participate; and (3) of Group III: six youth refused to participate.

⁴ Initial normative and validation studies were based on a sample of 970 male delinquents and 1,075 male nondelinquents between the ages of 8 and 18, and on a sample of 450 female delinquents and nondelinquents ranging in age from 11 through 18. All delinquents were adjudicated, and most were awaiting placement in California Youth Authority institutions. The nondelinquent sample was obtained at 10 public schools in northern California. (Jesness, 1996, p. 5)

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