An Evaluation of PALS (Play and Learning to Socialise) in Primary School Settings in Ireland

Valerie Jones

Institute of Education, University of London

Acknowledgements

I would first of all like to thank my thesis supervisor Dr. Julie Radford for all her support and words of encouragement throughout. I would also like to thank Dr. Karen Majors for her constant guidance, creativity and clarity.

Thanks to Dr. Ed Baines and Jim Stack for all their kindness and patience while I completed my stats. Special thanks to Dr. Baines for helping me with the design of my observation schedule and pointing me in the right direction. Many thanks, to Brenda Taggart for allowing me to use of the Child Social Behaviour Questionnaire.

I would also like to thank my parents, siblings, placement supervisors and friends for their humour and many words of encouragement. Thanks to Julian for remaining patient and supportive.

Most of all I would really like to thank my mum, for supporting me when times were tough and for never doubting me.

Abstract

Background: Social and emotional competence is an important factor which aids the development of positive peer relationships. Children who present with internalising or externalising behaviour have often been shown to have difficulty forming positive peer relationships. Research into this area has focused on the importance of early years interventions to support these children. One intervention that aims to develop the competencies in such children is the play and learning to socialise (PALS) social skills programme.

Aims: This mixed methods research sought to examine the effectiveness and feasibility of PALS in a number of primary school settings in Ireland with a view to exploring whether it impacted positively on the children selected for participation.

Participants and method: Ninety children, male or female, aged between four and six, were selected from fifteen primary schools. Six children from each school were selected and schools were assigned to either the intervention or waiting list/control group. Eight staff members and twelve parents, two from each school in the intervention group, were interviewed post PALS to explore their perceived effectiveness of the programme. Data was gathered pre and post intervention from both groups using a fixed interval observation schedule and two behaviour rating forms (Child Social Behaviour Questionnaire and the Strengths and Difficulties Questionnaire).

Results: Results of the study indicate that PALS was effective in reducing certain negative behaviours and increasing positive, social interactions in children selected for participation. Empathy and children's ability to identify feelings was an area outlined as needing further development in the PALS programme.

Conclusions: This research highlighted the importance of developing social and emotional competencies in all children. It also emphasised the importance of

supporting staff members and parents in this area to equip them with the skills needed to support those children presenting with internalising or externalising behaviours.

Certificate of originality

I hereby declare that, except where explicit attribution is made, the work presented in this thesis is entirely my own.

Word count (exclusive of appendices, list of references and bibliography): 34, 854 words.

Table of contents

Appendices

List of Tables

List of Figures

Chapter 1
Introduction

1.1 Introduction

The transition from early years' settings or home to primary schools can be difficult for certain children. For these children, engaging with large numbers of peers can be problematic due to lack of prior socialisation opportunities or other difficulties acquiring appropriate social and emotional competencies. In recent years, the region where this research was undertaken has seen both an increase in the number of children being referred to educational psychologists for social, emotional and behavioural difficulties and also an increase in teachers requesting training in how to best meet the needs of these children. Many of these children are described by staff as having difficulties relating to their peers and difficulties concentrating during class.

Research into children's development of social and emotional competencies has found that children who do not learn to develop vital social skills early in life are at risk of peer rejection in later life (Hartup, 1999). Research into the area indicates that children who are at risk of social isolation due to poor social adjustment are less likely to achieve academically throughout their education. Reasons for this include loss of interest in school from lack of sustained friendships and rejection from peers which leads to lower self esteem and isolation (Sim et al., 2006).

The need for schools to recognise the importance of social and emotional competence and its impact on learning is extremely important. A study carried out by Bracken and Fischel (2007) relating to readiness for school, highlighted a connection between early behavioural difficulties and poor academic achievement. This study also highlighted that for children who do not develop appropriate social and emotional competence, frustration and academic disinterest often develops which leads to disruptive and non-compliant behaviours in the classroom (Bracken and Fischel, 2007).

In order for children to develop positive social and emotional competencies early interventions are a possible way of developing such skills. The importance of early intervention programmes is based on the premise that the first few years of life are essential in setting the foundations for lifelong learning, behaviour and health outcomes (Mc Cain & Mustard, 1999; Gauntlett, Hugman, Kenyon and Logan, 2000). In addition to this, there is some evidence by Cooper et al., (2003) which suggests that interventions for children with behavioural problems are more effective in settings involving the children themselves as opposed to parenting programmes where difficulties lie in recruiting parents of children presenting with behavioural difficulties.

1.2 Background and purpose

In Ireland social and emotional competencies have in the past decade been acknowledged as an important aspect of pupil's learning. The Irish National Teachers Organisation (I.N.T.O) (2008) reported on pupil's transition to primary education. Teachers reported that the skills most needed for a positive transition to primary school were independence, social and communication skills. Parents reported the desire for their child to settle into school, make friends and mix with other children. Challenges listed by teachers as areas impacting on transition for some children were; sharing with others, concentrating and socialising with large number of peers in the yard (INTO survey, 2008).

In order to support children's social and emotional competencies within the school environment the Department of Education and Science in Ireland introduced Social, Personal and Health Education (SPHE). The previous curriculum (*Curaclam na Bunscoile*, 1971) in Ireland placed an emphasis on children being taught literacy, numeracy and language. However, the revised Primary Curriculum (1999) stressed the importance of also teaching children SPHE. One of the general aims of the revised curriculum was to facilitate the child to develop socially through living and co-operating with others and so contribute to the good of society (Primary Curriculum, 1999). In doing so the curriculum has acknowledged that in

order for children to be open to learning and achieve optimal outcomes, it is necessary that all areas of their development are taken into account. It envisages that children will be cognitively, physically, emotionally and creatively engaged in the learning process, in order to internalise and gain ownership of what is learned (Murphy, 2004).

Although SPHE aims to address the social-emotional competencies of all pupils there are still a number who need further support in order to develop in this area. The INTO report (2006) carried out a survey and found that only five percent of staff members reported spending more than one hour per week teaching SPHE with sixty seven percent spending less than one hour. This would indicate that for those pupils who find it particularly difficult to interact positively with peers, their needs may not be addressed in the Irish primary school. The need to support all pupils within the Irish primary school context is important as many pupils who lack the skills necessary to interact positively with others often find it difficult to access the curriculum also.

In comparison to the Irish education system, the UK has introduced SEAL (Social and Emotional Aspects of Learning). SEAL aims to develop the social and emotional competencies in all children under the governments 'Every Child Matters' (ECM, 2004) agenda to promote health and wellbeing in all children (ECM, 2008). SEAL is currently being run in most schools across the UK and is completed in three waves in each school: whole school development focusing on ethos and climate, small group interventions for children who require additional support and one to one individualised work aimed at those children requiring further intervention (DCSF, 2007). However, to date, there are no such interventions being run in the Irish education system.

In Ireland pupils faced with such difficulties in the classroom are in many cases referred to outside professionals. In certain cases these children are labelled as

having emotional and behavioural difficulties. While a minority of children may require services outside the school environment, many children can benefit from support in school. Additional support can come in the form of early years' intervention programmes which focus on promoting social and emotional competencies in the children who need it most.

1.3 Rationale

Research which focuses on the use of early interventions to support social and emotional competence has relevance for all those involved with young children. Exploring the impact of a research based intervention on children in schools in Ireland hopes to inform better practice within the classroom to meet the needs of children who find it difficult to develop appropriate social skills. It was hoped that this research would benefit staff in developing skills and assist them in how to best meet the needs of all learners. It was also hoped that this research would benefit those wishing to further explore the development of social and emotional competence and how early interventions can assist these factors. One of the important roles of educational psychology practice is supporting pupils with social and emotional difficulties. As educational psychologists are best placed to support schools in implementing evidence based research, it was hoped that the skills developed would promote best practice in the Irish context and support those pupils who may otherwise not have their needs appropriately met.

Chapter 2
Literature review

2.1 Introduction

In this chapter current research in relation to social and emotional competence in the early years is reviewed. This chapter is divided into sections. Section two explores the term social and emotional competence. Section three explores theories and definitions relating to the term social and emotional competence. Section four outlines how children develop socially and emotionally followed by section five which outlines difficulties for those who fail to develop socially and emotionally. Section six outlines the importance of early years' interventions. Section seven explores the importance of acknowledging children's stage of development in running successful interventions. Section eight highlights the current early years' interventions. Section nine discusses the intervention that is being explored in this study. Section ten outlines the aims of the research and finally section eleven highlights the research questions asked followed by concluding remarks.

2.2 What is social and emotional competence?

As a separate entity, social competence is defined broadly as the ability to select and pursue desired goals by achieving control over one's actions and emotions by understanding, connecting with, and influencing other people (Ewart et al., 2002). When considered together it is defined as

> " the ability to understand, manage, and express the social and emotional aspects of one's life in ways that enable the successful management of life tasks such as learning, forming relationships, solving everyday problems and adapting to the complex demands of growth and development" (Elias et al., 1997 p. 2).

Although social and emotional competence clearly involves two distinct skills, Gilman et al., (2009) suggest that they are still highly interconnected. Gilman et al., (2009) outlines that social competence calls upon emotional competence when

children need effective skills such as reading emotions in others and empathising in order to encode and interpret social cues effectively.

To date many researchers have examined social and emotional development of children and the importance of becoming socially and emotionally competent. Current research debates the existing definitions of social and emotional competencies and how these can be measured, although common themes have emerged (Rose-Krasnor, 1997). The themes that have emerged indicate that social and emotional competence is acquired when children are able to, a) remember the overall rules or conditions of the task as they pursue the goals of the moment, b) engage in effective communication and c) understand the relationship between their own actions and understand the thoughts and needs of others (Rose-Krasnor, 1997, Hartup and Stevens, 1997 and Stafford, 2004). Thus, the development of social and emotional competence is a complex process, one that requires an amount of skills and growth in children. Although much debate and explanations exists in defining and understanding this term, it can be said that those working and living with children would view social and emotional competence as a child's ability to adapt positively to their social environment i.e. to socially adjust.

2.3 Theories and definitions relating to social and emotional competence

Other theories and definitions put forward relating to social and emotional competence have been developed by a number of theorists and psychologists for a number of decades. A number of other academic definitions and theories relating to social adjustment have been referred to in research relating to how children develop positive social interactions. These definitions often overlap or are used intermittently throughout studies examining those who fail to develop appropriate relationships with peers.

For the purpose of this study the term social and emotional competence is used in reference to how children develop the skills necessary to become successful in their interactions with peers. Social competence refers to children's ability to use

social knowledge and skills to interact effectively with their peers. However, emotional competence refers to a child's ability to express himself, understand his feelings and recognise emotions in others. Bierman and Welsh (2000) describe social and emotional competence as an organisational construct that reflects a child's capacity to integrate behavioural, cognitive and affective skills to adapt flexibly to diverse social contexts and demands. Saarni (1999) suggests that emotional competence is crucial to social development as both contribute to positive relationships with others.

One of the first psychologists to examine the importance of social adjustment was Thorndike (1920). Thorndike (1920) put forward the concept of social intelligence which referred to a person's ability to understand, manage and engage in social interactions.

Throughout the early twentieth century with the focus on defining the concept of social intelligence, an emphasis was also placed on the importance of measuring social intelligence. According to O'Sullivan and Guilford (1965) social intelligence can be measured and should be viewed as a separate cognitive capacity from general intelligence, one that requires people to understand thoughts, feelings and intentions in others.

Crick and Dodge (1994), similar to O'Sullivan and Guilford (1965), thought that the ability to interact with others should be measured in order to help those who have difficulty adjusting socially. An initial model was devised in order to measure the effectiveness of social skills training. This model, known as the social information processing model, stated that children, when faced with a social situation engage in four mental processes; 1) encoding of situational cues, 2) representation and interpretation of those cues, 3) mental search for possible responses to the situation and 4) selection of a response (Crick and Dodge, 1994). Crick and Dodge (1994) proposed a new reformulated model. This model indicates two extra steps; 1) encoding of internal and external cues, 2) interpretation and mental

representation of those cues, 3) clarification or selection of a goal, 4) response access or construction, 5) response decision and 6) behavioural enactment. (Crick and Dodge 1994),

Although to some extent they do acknowledge the importance of emotions, emotions are not considered a large factor in developing appropriate social behaviours in this model. This model also fails to outline environmental influences on the child and tends to focus mostly on within child factors. This model outlines that children behave in a social situation based on how they perceived a similar situation previously. In using this model, it predicts that reactions to situations follow a sequence of the six steps and that unless children acquire positive reactions to certain events, their social adjustment will remain negative throughout their childhood and into adolescence.

While both of the models indicate a measuring system to examine children's social adjustment, other theories and definitions have also been put forward. These include; emotional intelligence (Goleman, 2003), emotional regulation (Eisenberg and Spinrad, 2004), social skills (Warnes et al., 2005), social development (Schaffer, 1996), and theory of mind, (Repacholi and Slaughter 2003). It is important to briefly emphasise these theories and definitions as they are relevant to certain aspects of development in young children, and thus linked to social and emotional competence.

Crick and Dodge (1994) outline briefly the need for children to develop an understanding of emotions in order to interact positively with others. In more recent years the importance of emotional competence in developing social competence has been further acknowledged (Zeidner et al., 2009). The following academic authors place importance on the role of emotions in social adjustment.

Emotional Intelligence has been explored by Goleman (1995) who held that emotional intelligence was seen to overlap with social intelligence. It is seen as an

area of psychology which " brings together both emotions and intelligence which are useful sources of information that helps one make sense of and navigate through the social environment" (Salovey and Grewal, 2005). According to Mortimer (2001) emotional intelligence is a type of social intelligence that involves the ability to monitor one's own and others emotions, to discriminate amongst them and to use the information to guide one's thinking and actions.

However, Goleman (2003) tells us that emotional intelligence is not fixed, instead emotional intelligence appears to be largely learned, and continues to develop throughout life as we learn from our experiences. Goleman (2003) believes that when children develop their emotional intelligence they also develop the skills necessary to read emotions in others and therefore interact positively. Although emotional intelligence takes account of how an individual understands feelings and thoughts, many children may be able to express or understand emotions in others but may not have developed the skills to interact or the ability to interact positively i.e. a child may understand and read the emotions in group of children playing but may not have the skills to ask if he/she can also play.

Another area of emotional development that has been linked to emotional competence is emotional regulation (Saarni, 1999). Emotional competence, according to Saarni (1999) is categorized under three broad categories: emotion expression, emotion understanding and emotional regulation. According to Webster-Stratton (1999), emotional regulation is a developmental achievement which is not present at birth i.e. it must be learned. Children learn to regulate their emotions as their language and communication skills develop, thus enabling them to form relationships with peers. This process enables children to regulate how they feel in certain situations and modify these feelings to suit others. One of the most prominent authors who examined the definition of emotional regulation and how children must acquire these skills in order to relate to peers effectively is Eisenberg (2004). As of yet, emotional regulation does not have a universal definition. According to Eisenberg and Spinrad (2004) emotional regulation is:

"the process of initiating, avoiding, inhibiting, maintaining, or modulating, the occurrence, form, intensity, or duration of internal feeling states, emotion related physiological, attentional processes, motivational states, and/or the behavioural concomitants of emotions in the service of accomplishing affect-related biological or social adaptation or achieving individual goals"
(Eisenberg and Spinrad, 2004 p. 338).

In more recent years, theory of mind has been highlighted. This concept is specifically relevant to literature examining children with autism as one of the features of this disorder includes a lack of social adjustment. According to Repacholi and Slaughter (2003), theory of mind is an important aspect of peer acceptance which requires children to predict and explain the behaviours of their peers. Theory of mind is an awareness of false beliefs, awareness that other children can have internal representations that are different from reality and each other (Gopnik, 1993). Repacholi and Slaughter (2003) outline several studies which indicate that children who have not developed a theory of mind are more likely to be rejected by peers as they have difficulty understanding and reading emotions in others and thus are less likely to play cooperatively with peers. Hence, children must acquire a theory of mind in order to become socially and emotionally competent.

Although emotional aspects play an important role in social adjustment, children must also acquire the skills necessary to interact with others. Social skills are a term used throughout research to describe, identify and understand children who fail to become socially adjusted. Social skills are an important aspect of social competence as children require certain skills in order to interact positively with peers (Webster-Stratton, 1999). According to Warnes et al., (2005), socially skilled children are those that are able to understand that others may have different perspectives and react to these in an appropriate manner. As outlined in their study, social skills are discrete and goal directed to ensure positive interactions with others. Social skills have been linked to social competence as

"children must be able to use their social skills to negotiate the differences in expectations and demands across settings and behave in a way that adapts to the parameters of the context i.e. become socially competent" (Warnes et al., 2005, p. 174).

Schaffer (1996) defines social development as "the behaviour patterns, feelings and attitudes children display in relation to other people and the way in which these aspects change over age" (Schaffer, 1996, p.1). Sanson et al., (2004) looked at temperaments of children, both internalising and externalising, and highlighted that the ability to recognise and respond to social situations and regulate emotions all impact on the process of social development.

As outlined, social and emotional competence is defined in many different terms throughout psychology. Each theory, definition and model focuses on either social or emotional aspects of interactions and in some cases an emphasis is placed on both concepts. Although social and emotional competencies are often referred to separately, each definition emphasises the importance of recognising self and others in order to develop positive peer relationships.

2.4 How children develop social and emotional competence

Many definitions and theories exist as to how children develop social and emotional competence. However, it is important to note that relationships with peers develop very early out of their family of origin.

According to Boxer et al., (2005), in the earlier stages of developing relationships with peers, children's friendships tend to be based on shared activities. As children develop, friends are seen as people who are nice to them and play with them. From a young age children can see that friends as those who display kindness, commitment and trustworthiness (Hartup, 1992). Young children are also influenced by characteristics in other children such as their cognitive abilities,

sociability, aggressive behaviours and withdrawn behaviours (Abound and Mendelson, 1996, Dunn, 2004).

Hetherington et al., (2003) examined developmental charts identified in several research studies and found that children who have developed the competencies that are necessary to adjust to peers, do so in the following stages:

- "Twenty five to thirty six months children are able to play and interact socially through communicating meaning and inviting others to play. At this stage children begin to prefer peer play over adults;
- Three years, children begin to engage in complex cooperative and dramatic play;
- Four years, children begin to share with peers and engage in fantasy play;
- Four and a half years, children are more willing to accept different roles during play;
- Six years, shows a peak in imaginative play and by seven years children often begin to choose same gender playmates" (Hetherington et al., 2003, p.525).

The charts also outline that from three to seven years, children who develop the appropriate skills necessary to interact with others are able to engage in coordinated and successful play (Parke and Locke, 2003).

This suggests that at the younger stages of development it is important that children develop positive personal attributes which will enable them to develop, engage positively with peers and practise social adjustment. Friendships, according to Dunn (2004) help to increase children's understanding of others' feelings. Children who do not learn to develop such competencies often have difficulties as they develop into adults. This is in relation to the fact that children who find it difficult to generate positive ways of dealing, predicting and evaluating a negative situation are more likely to engage in an inappropriate social response

(Spence, 2003) and therefore have difficulties developing and maintaining positive peer relationships.

2.5 Implications for those experiencing difficulties with social and emotional competence.

Current research focuses on the importance of children becoming socially and emotionally competent in order to progress successfully throughout life. Children who fail to develop the skills necessary to relate positively to others are likely to be faced with many difficulties as they progress into adulthood. Further to this, children who lack friendships report more feelings of loneliness than those with friendships (Dunn, 2004).

In general, children with low peer acceptance show difficulties joining ongoing play or keeping play episodes. They observe the peer play rather than initiate play or else they are likely to show aggressive behaviour during play and so are rejected by their peers (Putallaz and Wasserman, 1989; Hwa Choi and Kim, 2003).

Research carried out by Hay et al., (2004) established the theory that children's lack of social interactions may contribute to the genesis of disorders, in particular anxiety, depression and conduct disorder; conversely children with disorders may find themselves at odds with their peers from the very first years of life. Hartup (1999) further argues this point by saying, one of the best childhood predictors of adult adaptation is not school grades and classroom behaviour but the ability to get along with other children. Added to this, children who do not develop the skills necessary to relate to others and engage in positive peer relationships are more likely to engage in negative social behaviours (Hartup, 1999).

In a study carried out by Sim et al., (2006), children who are rejected by their peers due to inadequate social and emotional competence have a strong bearing on social and public health costs in later years. Throughout childhood these costs are due to school truancy, school suspension, delinquency, educational remedial

services, school dropout and involvement with law enforcement in adolescence (Sim et al., 2006). As these children develop into adults the cost to society includes; sick days from work, access to clinical services, unemployment and criminal justice (Bor, et al., 2004).

Further research indicates that it is often the case that intergenerational transmission exists whereby parental antisocial behaviour is related to problems that exist for these adults when they themselves were children (Kim et al., 2009). This study examined intergenerational effects on families and found that poor social and emotional competence in the families who participated passed through as much as three generations. The factors leading to such difficulties were due to failure to develop the skills necessary to interact positively with others, which prevented the development of appropriate social responses (Kim et al., 2009). Unfortunately, this all indicates that families where such competencies are lacking may impact negatively on future generations.

Of all children who fail to develop appropriate social and emotional competencies, two main groups are seen to be most affected. The two main personal attributes seen in a young child that often leads to peer rejection and poor social development in later years are aggressive and/or withdrawn attributes. While popular children tend to be cognitively and scholastically able, rejected children tend to lack social skills and are relatively aggressive and/or withdrawn (Abound and Mendelson, 1996). Although this may be the case for some children, it is important to outline that not all withdrawn and or aggressive children lack friendships. However, children who find it difficult to interact positively with others may develop friendships that do not provide comfort or close companionship. It is also important to note that children who find it difficult to develop relationships can develop friendships. For example, Dunn (2004) outlines a situation whereby a child who was initially aggressive developed a positive friendship with another child. The result of this positive relationship was an increase in their own sense of security which helped develop an ability to relate to, understand and show sympathy

towards others. However, it is necessary to outline that some children will still require support in this area.

For the purpose of this research, aggressive, hyperactive, stubborn and acting out children are referred to as children with externalising behaviours. Those with shy, timid and withdrawn behaviours are referred to as children with internalising behaviours. Prior to discussing both internalising and externalising children as separate groups, it is first necessary to outline the negative impact of these behaviours.

Peer rejected children according to Goldman (2002) are more likely to attribute peer acceptance to unstable external factors and peer rejection to internal, stable factors.

Much research to date focuses on externalising behaviours in children from disadvantaged backgrounds (Aken et al., 2007, Webster Stratton, 1997, 1999, Sylva et al., 1999, Leeuwen et al., 2004). Although much of the focus in these studies relate to children from disadvantaged backgrounds and how such dynamics lead to children presenting with externalising behaviour, negative life experiences also exist in the general population which impact on many children. However, such experiences also lead to children presenting with shy, timid and withdrawn behaviours.

These two groups will now be examined in more detail as these two groups, although both present as being at risk for peer rejection, often have different behaviour traits.

2.5.1 Internalising children

Cheek and Melchior (1990) believe that shy children are seen as having symptoms that affect their behavioural, somatic and cognitive domains. Many children who present with shy, timid and withdrawn behaviours often have self defeating

thoughts, perhaps due to fear of being rejected by others (Halford and Foddy, 1982). According to Coplan and Murray (2009), shyness primarily is nervousness and fear when encountering new people and situations for the first time. According to Coplan and Murray (2009), it is important to note that internalising behaviours should be seen under an umbrella term as ranging from mild to severe as not all children remain consistently shy and some will, after a period of time settle and initiate play and interact with others.

Possible factors leading to internalising behaviour

According to Perren (2007), internalising children have high levels of emotional empathy which increases their own depressive and anxious feelings. Perren (2007) suggests that such children may be too nice to peers and as a result of this can be victimised and abused, leading to further internalising and withdrawn behaviours.

There are many factors which may lead to children either becoming shy or maintaining internalising traits. Certain research indicates that shy, timid and withdrawn children are often children whose parents subconsciously reinforce such behaviours, especially parents who present with the same behaviour traits (Rubin et al., 1999; Kaitz and Maytal, 2005). According to Bayer et al., (2008), temperamental inhibition, parental illness/death and overprotective parenting are the main factors that have been shown to lead children to present with internalising behaviour. In cases where parents are over protective and/or shy themselves, their children, from the earlier stages of developing social and emotional competence are not presented with as many opportunities to interact with other children as such parents are likely to avoid social situations.

Bayer et al., (2008) on the other hand indicates that certain aspects of within child factors can lead to such children presenting with internalising and/or externalising behaviours such as the child's own; physical health, difficult personality or if they have an insecure attachment to a primary caregiver. However, Bayer et al., (2008) also examined the external factors such as parental mental health, separation and

divorce in a family, daily hassles and a strict or over anxious parent (Bayer et al., 2008). Leeuwen et al., (2004) suggest in their study that internalising behaviours in mothers significantly predicted increased levels of internalising symptoms for boys and girls.

Other research indicates that socially anxious children are those who are anxious because they believe they lack social skills (Rapee and Heimberg 1997). Although many potential mechanisms have been put forward as reasons for children presenting with internalising behaviours, one common theme presented throughout all research on such children is negative self perceptions i.e. viewing social interactions in a negative way leading to further withdrawal.

Negative impact of internalising behaviours

Children's early interactions with peers can also lead them to maintain or overcome these symptoms. Peer exclusion tends to exacerbate shy children's internalising symptoms and as a result discourages further social development (Gazelle and Ladd, 2003). In a study by Burgess et al., (2006), internalising children are those who are rebuffed by peers and therefore become adult dependent during peer conflict, are more likely to give in and may endorse other non assertive strategies in social situations (e.g. cry but do nothing). These traits are likely to lead to further peer exclusion.

While it is evident that there are many causes for children either becoming shy and withdrawn or maintaining these behaviours it has been shown to impact on their overall ability to develop and maintain positive peer relationships. Long term social anxiety leads to limited opportunities to practise social skills and these subsequent skill deficits are a consequence rather than a cause of anxiety (Cartwright-Hatton et al., 2003).

Internalising children may internalise negative social situations and therefore withdraw further from peers. Internalising children also tend to often be overlooked

in school as their behaviours do not interrupt the everyday practices and routines.

2.5.2 Externalising children

Children who present with stubborn, hyperactive, aggressive or acting out behaviour are most often the cause for teacher concerns in school. Angry feelings or problems associated with anger are features which are often associated with disorders such as personality disorders, anxiety disorders or depression (Conger et al., 2003).

For the majority of children presenting with such behaviours, many are referred to clinical teams and are labelled as having Attention Deficit Hyperactive Disorder (ADHD), Oppositional Defiant Disorder, (ODD) or Conduct Disorder (CD).

Possible factors causing externalising behaviours

Research examining how children acquire these skills has highlighted three factors that lead to externalising behaviours. In a study carried out by Miller Lewis et al., (2006) these three factors include a) child characteristics b) parenting techniques and c) family adversities, both difficulties and disadvantages. In a paper by Najman et al., (2004), low socio economic status is highly correlated as impacting and leading to externalising (and in many cases internalising behaviours). According to Najman et al., (2004), the quality of the home environment and limited access to resources are seen as likely causes for such behaviours as parents do not have the abilities within themselves to teach appropriate social responses.

Bayer et al., (2008) put forward several other aspects that impact or influence externalising behaviours; male gender, having siblings, poor parental social support systems, and poor access to quality child care. In Aken et al.'s., (2007) study on externalising children, parental psychopathology and behaviours influence child behaviours, parental personality (the degree to which parents are responsive and interact positively with their child) are also seen as factors that can lead to externalising behaviours. (Aken et al., 2007). These factors are not only applicable

to those from disadvantaged backgrounds, they are likely to be seen in the population as a whole.

Whatever the cause, many research studies focus on parenting styles only. Of the studies that focus on children born with genetic disorders, birth difficulties, maternal psychopathology or neurobiological disorders (e.g. Liu 2004) the majority of these also outline the impact the child's environment has on their development.

Impact of externalising behaviours

Children who present with angry, hyperactive and frustrated behaviours have difficulty forming positive peer relationships. In a study by French and Waas (1985) peer rejected externalising children tend to have few friends and are generally disliked by other children. According to Ladd, (1996), children who rely on aggressive tactics with peers develop adjustment problems earlier in the life span. For these children, anger is a form of dealing with and responding to social situations. Aggressive behaviours that are seen in children often lead to these groups being rejected by their peers. Children who are generally disliked by other children or who are aggressive, disruptive and who are unable to sustain close peer relationships are seriously at risk (Hartup, 1999).

Fabes and Eisenberg (1992) carried out a study which examined child relationships and found that children who were rated as popular were less likely to participate in anger conflicts and more likely to deal with anger provocations in direct and non aggressive ways. Children who are unable to identify the presence of a challenging situation, to generate a possible alternative way of dealing with a situation are less likely to engage in an appropriate social response (Spence, 2003).

Internalising and externalising children although presenting with different behaviours are similar in that both are likely to be rejected by their peers. Although there are certain personality traits that lead to certain negative/withdrawn

behaviours, the environment has been shown throughout all literature to play an important role in positive social adjustment. Therefore, it is likely that the majority of negative social behaviours could be improved with the help of interventions to assist in developing positive friendships for these groups. Burgess et al., (2001) examined friendships in children presenting with internalising and externalising behaviours and found that although these groups have negative perceptions of difficult social situations, elements of their thinking improve when they have friends.

Therefore, developing these children's social and emotional competence will enable them to develop a more appropriate understanding of social situations and work towards developing friendships. One way of doing so is through early years' interventions.

2.6 Importance of early years' interventions

Throughout the early 1970's and 1980's in America there was much debate surrounding the impact of early interventions and whether they were effective in promoting social, emotional, educational and cognitive abilities in the children selected. Early interventions were examined by Lee et al., (2003) who researched seventeen different early years' interventions and found that they had both immediate and positive effects for parents, staff and the children selected, especially those that were highly structured and ran by highly trained staff.

The importance of early intervention programmes is based on the premise that in the first few years of life the developmental stages of emotions are essential in setting the foundations for lifelong learning, behaviour and health outcomes (Mc Cain & Mustard, 1999; Gauntlett, Hugman, Kenyon and Logan, 2000). According to Johnson and Maynard (2007) early interventions are necessary as gaps compound and become more costly and difficult to address as children grow and develop into adolescents. Johnson and Maynard (2007) also outline that social and emotional competencies are acquired hierarchically with complex skills being built on more basic ones, therefore the need for children to develop effective simple skills is

necessary to build effectively on the more complex skills.

A substantial proportion of children presenting with internalising and externalising behaviours do not receive specialist treatment in order to address such behaviours (Gunther 2003). Throughout Ireland, there is currently a large amount of waiting lists for children presenting with such behaviours in early years. However, due to lack of current government funding for employment, many children presenting with such difficulties are put on waiting lists and unfortunately cannot be seen during this vital time. In order to overcome such difficulties, it is necessary that early years interventions are put in place within the community to reach out to the majority of children in need. As schools are the place where children spend their early years and youth, these places are best suited to carry out interventions. Through early years interventions, staff and parents can be equipped with skills needed to address such behaviours. The use of group interventions will also allow for a large portion of children benefiting, thus reducing referral rates and empowering all adults involved with internalising and externalising children, while increasing these children's self perceptions.

In order for children to develop positive personal, social and emotional competence it is essential that adults partake in this area of development. Early interventions are aimed at improving negative/unwanted behaviours in children. However, equipping the adults involved in the lives of these children facilitates positive interactional styles, coping strategies and better relationships which further supports the children that are most vulnerable and at risk. Research by White and Kistner (1992) showed that staff working with children presenting with externalising behaviour responded to negative behaviours on a continual basis which in turn highlighted these children's negative personality traits to the children's peers. By teaching staff members more appropriate responses to these children, positive interactions increased amongst staff working with the children and also peers' perceptions of these children (White and Kistner, 1992).

With regard to adult participation, Cooper et al., (2003) showed that interventions relating to children with behavioural problems are effective in settings involving the children themselves as opposed to parenting programmes where difficulties exist in recruiting parents whose children are presenting with behavioural difficulties. This was also highlighted in a study by Webster- Stratton et al., (2001) who found that in an early years parenting programme children whose parents had received training continued to have peer relationship problems, academic and social difficulties two to three years later (Webster-Stratton, 1990a). A finding in this study showed that parents whose children were in need of social skills training could not or would not participate in training due to life stress, work, personal psychopathology or lack of motivation (Webster-Stratton et al., 2001).

Although parenting courses as a separate entity may not be beneficial, it is essential to include parents in early years' interventions so that their child's skills can be reinforced in the home place. Bronfenbrenner (1979) introduced the importance of seeing the child within the context of their environment. It is seen therefore, that the child's bonding to social institutions such as the school place, as well as the family's bonding to the child and school are believed to be critical features in prevention of unwanted behaviours (Webster-Stratton, 1997). Therefore it is vital that schools if not integrating the parent fully into the intervention programme must maintain relationships with parents and share information being taught in order for these skills to be reinforced.

Within the child's environment the school setting is a beneficial place for carrying out such interventions. Parents and teachers often make referrals for children who lack social and emotional competencies to mental health services. However as these children are deemed 'socially disorganised', they often do not fulfil criteria for a diagnosis and therefore are not able to access specialist support and so often remain isolated (Savidge et al., 2004). Therefore, it is essential that support systems are put in place within the schools in order to meet the needs of these vulnerable children.

Bayer et al., (2008) sum it up by affirming that early years' interventions are most effective in addressing externalising and internalising behaviours. With regards to early years' interventions within Irish primary schools, it is hoped that implementing such programmes aimed at the general population will lead to a positive school ethos and cultures. The following statement suggests that interventions aimed at promoting mental health in children should

> *"adopt a more ecological perspective and aim to include all relevant stakeholders including pupils, teachers, school administrators, parents and community members in fostering a positive school environment, ethos and sense of connectedness for pupils and staff bringing attention to school policies, codes of conduct and values e.g. in dealing with bullying, conflict resolution and issues of diversity"* (Barry et al., 2009 p. 45).

However, when setting up and running such programmes in schools it is necessary that these are set at an appropriate developmental stage.

2.7 Importance of acknowledging children's stage of development in intervention programmes.

In order for children to gain maximum benefit from an early years' intervention it is necessary that the intervention itself is pitched at their level of social understanding. Many children who are unable to form positive peer relationships are children that have difficulty understanding how others may feel in a situation. The majority of these children find it difficult to control their own body signals and how they should respond to social situations and therefore are unable to respond appropriately to others. For these reasons it is necessary that early interventions are aimed at a level to which a child is able to respond.

Theory of mind would argue that a child aged between four and five is not able to understand that others have beliefs separate from their own (Gopnik and Meltzoff, 1994). Social skills training should therefore consider direct instructions such as modelling, coaching, behavioural rehearsal, role play, feedback and reinforcement of skills which have been found to be effective in producing short term

improvement in specific social skills with children of a young age (Gresham, 1981). Research which has focused on different interventions and their effectiveness has found that it is necessary to relate the intervention to the child's current level of understanding. When presented with an ambiguous social interaction, young children may find it difficult to understand another perspective and so a programme must be targeted at concentrating on how the child behaves himself rather than on peer intentions (Boxer at al., 2005). Dunn (2004) would argue that children will identify feelings, needs and wishes in friends from as young as four years and from two years will comfort others when upset, indicating that children acquire such skills from a very young age. However, for children who find it difficult to acquire these skills it is necessary that support is put in place. Webster Statton (1999) reports that when given clear instructions children begin to understand, take the perspective of others, perceive social cues, label feelings and as a result begin to know how to respond appropriately to social situations.

2.8 Early years' interventions in Ireland

Throughout Ireland there is a lack of research on effective early years' interventions based on social skills in primary schools. On offer to schools in Ireland are social skills programmes such as "Time to Talk" (Schroeder, 2001), "Socially Speaking" (Schroeder 1996) and "Talk about" (Kelly, 1997). However, these programmes are offered to schools as guidance, generally for pupils with mild to moderate learning difficulties. They include weekly sessions aimed at developing social and communication skills. All of these programmes are based on book work and group work. To date the impact of these programmes and the benefits, if any, for children within the Irish primary school setting have not been published in Ireland.

In UK and other countries there are a number of studies which have looked at social skills interventions. These interventions have been based on improving social skills in the children involved. A number of studies have examined the backgrounds of the children targeted by early intervention programmes and have

found that children selected for participation are predominantly from socially disadvantaged backgrounds (Bickford-smith et al., 2005; Nisbett & Watt, 1994; Whitely et al., 2005; Melhuish, 2004).

There is few structured, evidence based early years interventions carried out from children who come from a range of backgrounds. Many early years interventions have used a cognitive behaviour therapy approach to teach children how to interact positively with their peers which is difficult to replicate as they vary and are not consistently applied.

Flem et al., (1998) examined the effectiveness of a six week early years intervention based on developing social competence. The theoretical underpinning for this intervention was based on the "cognitive social learning theory" (Schaffer, 2008). Participants selected were eight six year old boys and girls presenting with internalising and externalising behaviours. Children were shown appropriate social skills such as supporting others, cooperating, establishing social contact, participating in play, reducing aggression and handling conflict. Children were given nine 30-33 minute sessions which varied between group work and skills being taught in the class group. Results indicated that some behaviours improved although not all. Unfortunately no control group was selected to compare the effects of the intervention, along with this no specific programme was followed which means this study would be difficult to replicate. Children were observed during play and videotaped in order to compare pre and post measures. Children were also asked to rate themselves on their behaviour. Although results indicate a slight improvement, it is difficult to say whether this was due to bias from the children rating themselves. This study also fails to state whether the skills taught were generalised to the home environment.

As outlined, throughout Ireland the lack of social skills training being implemented or researched is of major concern. One study that has been set up and is currently being researched is the Incredible Year's Programme which was brought to Ireland

in 2007. One aspect of the Incredible Year's Programme is known as the 'Dinosaur Programme' which consists of 20-24 sessions aimed at teaching children positive social skills, problem solving and anger management through the use of puppets, video vignettes and homework being sent home based on the skills taught.

In 2001 Webster Stratton carried out research on the 'Dinosaur Programme' using two groups of four to eight year olds who were assigned to experimental or control conditions. Children selected for participation had to 1) be aged between four to eight, 2) no physical impairment, intellectual deficit or history of psychosis, 3) reason for referral had to be child misconduct and 4) the child had to meet criteria for Oppositional Defiant Disorder (ODD) and/or Conduct Disorder (CD). Children who met the criteria were given a diagnosis of ODD and/or CD.

Weekly sessions were based on group activities, practicing concepts, role play and stories of social situations. Two therapists ran the six month programme. Results showed a significant improvement in negative behaviours as reported by parents and teachers, two months post intervention. Although this is a very comprehensive intervention which is evidence based and has been shown to work, a lot of time is needed to complete the programme with highly qualified trainers indicating that it would be very costly to run. In Webster Stratton's (2001) study, interventions were carried out in a clinical setting and therefore it is difficult to say whether skills taught generalised to the school environment. As children selected had to meet the criteria for ODD or CD it increased labelling of children.

Although there are strengths in the Dinosaur Programme, the study currently being run in Ireland is only aimed at children from disadvantaged backgrounds and is not being run in Irish primary schools. As this programme is currently being evaluated it is difficult to say whether it is effective in promoting social and emotional competence and whether the programmes results if positive, can be generalised to the wider Irish population. Also, it fails to acknowledge children with internalising behaviours.

2.9 The PALS intervention- what the research has shown

One intervention which has been shown to be successful in promoting social and emotional competencies during the early years is the PALS programme. The PALS programme was set up in Australia by Cooper at al., (2002) and is aimed at children aged three to six years. Research carried out in Australia found that children with behaviour problems are a major concern for teachers. Cooper et al., (2002 and 2003) carried out two studies to examine the effectiveness and found that in the past ten years in Australia, there has been an increase in the number of children being diagnosed with ADHD, ODD, CD and Aspergers syndrome, all of which show a deficit in social adjustment. One approach to helping is to provide a problem solving and social skills programme which has a positive effect on these children (Webster Stratton, Reid and Hammond, 2001).

Cooper et al., (2002) designed the PALS programme to examine the effectiveness of significantly reducing problem behaviours in young children and increasing their social skills. Unlike other early years' interventions, the PALS programme is aimed at children presenting with internalising and externalising behaviours. The skills taught are aimed at developing their social and emotional competencies through teaching positive social skills. Skills taught throughout the ten week programme which is run weekly for approx 20-30 minutes are; Greeting others, taking turns-sharing, taking turns-taking and listening, asking for help, identifying feelings, empathy, overcoming fear & anxiety, managing frustration and calming down.

Cooper et al., (2002) carried out research on PALS with a total of 55 children aged three to five years both pre and post intervention. This study asked those working with the children to complete two forms pre and post for both the control and intervention group using the Preschool Kindergarten Behaviour Scale (PKBS, Merrell, 1994) and the Caregiver-Teacher Report Form (C-TRF) which is part of the Child Behaviour Checklist (Achenbach & Edelbrock, 1991). The PKBS scale measures a child's social skills and socio-emotional problems, whereas the C-TRF

measures problem behaviours as well as standardised T scores for internalising and externalising behaviour. Results of the study found that teaching children positive social skills significantly decreased internalising and externalising behaviours. However, results of the study only generalised to early years centres and not school settings. The sample size was also small for a programme that was set up and run in over 300 early years settings across Australia (Cooper et al., 2003).

Cooper et al., (2003) further examined the effectiveness of PALS using 77 children. In this study the Sutter-Eyberg Student Behaviour Inventory (Eyberg, 1984) (SESBI) was used. This measures a pupil's problem behaviours. Results indicate that there was a significant decrease in problem behaviours. However, this failed to acknowledge the internalising children and therefore it is difficult to say whether it was effective for both groups.

The PALS programme was brought to the UK in 2006. The programme was first piloted in Hillingdon by James and Mellor (2006) who examined the effectiveness of the programme by asking staff members to complete two behaviour forms, the SESBI and Early Years Behaviour Checklist (Barnes and Richman, 2003) (EYBC). Results of the study found a 98% difference in problem behaviours between the intervention and control group using the SESBI. Findings also showed there was no significant difference on the EYBC. However, as the SESBI only measures problem behaviours, therefore failing to acknowledge the internalising children, it is difficult to account for 98% difference in all children selected for participation.

As outlined, previous studies which examined the effectiveness of the PALS programme (Cooper et al, 2002, 2003 and James and Mellor, 2006) reported that PALS had a significant impact in improving negative/unwanted behaviours in the children selected for participation. However, these studies sought information through behaviour forms completed by staff running the programme and although the findings have been positive throughout the three studies, the behaviour forms

used focused mostly on externalising behaviours. These studies also fail to outline whether staff found certain sessions particularly beneficial or lacking in content. The studies have only been carried out in early years centres and therefore it is not possible to say whether skills taught are applicable to older children (children aged six).

Another important factor is that both studies failed to examine whether the skills taught in PALS are generalised to the home environment and/or free play or the school environment.

For the purpose of this research, PALS was selected in order to explore its effectiveness in developing social and emotional competence in children in Irish primary schools. This programme was selected in order to gather data omitted in previous research. PALS was also selected in order to evaluate the effectiveness of the programme itself and establish whether it is a suitable early years intervention for primary schools throughout Ireland. Although there are a number of other early years' interventions, these are often costly an time consuming and require extensive training. However, according to the authors PALS is simply designed, created for early years and easy to implement which were also factors considered for this study.

2.10   The aims of the current study

To examine the effectiveness of the PALS programme in a number of primary school settings in Ireland.

2.11 The research questions

Based on a mixed methods approach in order to gain sufficient data to establish impact of PALS the research questions asked:

1. Is PALS effective in promoting social and emotional competence and reducing aggressive and withdrawn behaviours in the children participating in the research?

2. Are the skills taught effective and will these skills be used when children are observed during free play?

3. Do the programme's outcomes generalise to the home environment?

4. Do staff perceive the programme as beneficial for the children involved?

5. Does the programme make a positive contribution to the schools, their culture and their practices?

This study was aimed at children in their first and second year of primary school who have difficulty interacting positively with peers. Throughout a teacher's career it is possible that many staff members will teach a number of children with internalising and externalising behaviours. Therefore, it was hoped that research questions four and five would examine whether staff members felt that PALS is an effective intervention in enabling them to support children who need positive social and emotional competencies. It was also hoped that sending parents weekly information would reinforce skills taught and enable children to develop appropriate skills within the context of the home environment. This research hopes to extend and gather new data that has not been examined in previous studies in relation to the effectiveness of PALS.

2.12 Conclusion

It is evident from the literature reviewed that social and emotional competence is a very important element in children's overall growth. It is also evident that children develop the skills necessary to adjust to their social environment through contact with peers and through positive reinforcement from the adults in their lives. This literature review outlined that not all children acquire the skills necessary to adjust to their social environment. Reasons vary from lack of adult support to children's own personal factors. However, the main theme running throughout the literature is the role the environment has, whether positive or negative on developing children's social and emotional competence. For those that have difficulty developing such skills, early interventions such as the PALS programme was examined as one possible way of overcoming such difficulties.

Chapter 3
Method

3.1 Introduction

This chapter will begin by outlining the research design and defining the methodological perspective that was chosen for this study. The mixed method approach will be introduced and its suitability for this study will be described. An outline of the research processes and steps taken to set up the intervention and gather the data will be provided. The weekly sessions of the PALS programme will be summarised and the support that was provided throughout the research will be discussed. Following this, a detailed description will be given of the sample chosen for the study, ethical considerations will be highlighted. Finally data collection and analysis will be outlined.

3.2 Research design

This between studies design aimed to examine the effectiveness of the PALS programme. In order to do this an evaluation of the programme was utilised whereby PALS, the independent variable aims to increase positive social interactions, the dependent variable.

Evaluations have the fundamental purpose of making judgements about the merit, effects, effectiveness and worth of programmes (Tashakkori and Teddlie, 2003). Evaluations are used to establish how an intervention is implemented, identify the barriers that impact on the intervention and how these might be overcome. The approach used in this study to evaluate PALS was a summative evaluation. Robson (2002, p. 208) indicates that "summative evaluations look at the impact of a programme, not simply the extent to which stated goals are achieved, but all the consequences that can be detected". Another evaluation is formative which is used to help in developing programmes (Robson, 2002). However, for the purpose of this study, PALS has already been developed and so a summative evaluation was deemed more suitable.

3.3 Theoretical perspective

In order to answer the research questions asked, a mixed methods approach was employed. Researchers who dispute this approach believe that social observations should be treated as entities and that the observer should be separate from the entities that are subject to observation (Johnson and Onwuegbuzie, 2004). The quantitative purist approach focuses on the idea of objectivity, control, positivism and scientific methods, while the qualitative purists acknowledge their value systems and how they conduct and interpret the research data (Teddlie and Tashakkori, 2009). The mixed methods approach however, focuses on subjectivity, complexity, difference, interpretation and understanding.

In this study it was felt that by using the mixed methods approach data could be collected through the use of a fixed interval observation schedule, behaviour rating scales and by also using semi structured interviews with the staff and parents of children involved in the study, thereby leading to a richer and more detailed description of how the PALS programme impacted on the children both in the home and school environment.

By combining the two traditions of mixed methods we have what is called a qualitative- mixed methods- quantitative continuum, whereby the researcher is seen as working primarily within the pragmatist paradigm (Teddlie and Tashakkori, 2009). The pragmatist paradigm allows the research to link the choice of approach directly to the purpose of and the nature of the research questions posed (Creswell 2003). By using the mixed method approach the researcher can maximise the strengths of both approaches, address confirmatory and exploratory questions and provide the opportunity for greater assortment of divergent views (Teddlie and Tashakkori, 2009).

Mixed methods enables the researcher to "collect and analyse data, integrate findings and draw inferences using both qualitative and quantitative methods in a single study or program of inquiry" (Tashakkori, and Creswell, 2007p.4). One of the

disadvantages of using this approach is that the mixed methods approach "operates on the assumption that findings will coincide and this will be a positive contribution to the research, so when this does not happen it may lead to difficulties for the researcher" (Denscombe, 2007, p. 119). Another disadvantage that is outlined by Denscombe (2007) is that this method can often extend the time frame for the research data collection.

3.4 Ethical considerations

Prior to beginning the research, ethical approval was sought from the Ethics Board at the Institute of Education, University of London. Permission from the relevant authorities was also sought within the region where the study was carried out prior to contacting the schools. Once ethical approval was obtained, permission for undertaking the research started by distributing detailed information sheets to all parents whose children were eligible to participate in the study (see appendix 12, p203).

Informed consent involves giving information to perspective research participants about the research, obtaining their permission to be a participant of the study and insuring them of confidentiality (Humphries and Martin, 2000). The information provided outlined details of the programme itself. Participants were informed that they could withdraw at any time without giving a reason. Parents were given a contact name and number prior to their child's involvement in order to answer any questions or concerns that might arise throughout the study. Full written consent was obtained from all parents prior to their, and their child's involvement in the research.

Under the Irish Data Protection Acts (1988 and 2003) importance was made regarding the privacy of all those who participate in the research. The names of all research participants and schools remain anonymous. All data gathered was stored within the educational psychology service in a secured cabinet and all electronic data was stored with a secure password.

3.5 An outline of the research process

Having received ethical approval from the Ethics Board contact was made with twenty primary schools throughout the area where the research was to take place. In order to do this a list of all schools in the region was used. Schools were chosen by highlighting twenty schools on the educational psychology services list and were spread out throughout the region. Contact was made with every third school on the list and discussions regarding the study followed with all principals who agreed to participate in the study. Discussions also took place with the staff members (learning support/resource teachers and class teachers) who wished to participate in training and implementation of the programme in the primary school settings.

Following these discussions, letters outlining the nature of the study were sent out to all primary schools informing them of their involvement in the study (See appendix 1, p.151). However, after initially agreeing to partake in the study five schools later decided that their school would not be suitable for participation as they felt there was too much commitment needed by the staff. Therefore, a total of fifteen schools (eight intervention and seven control) took part in the study. Fortunately, the response for participation was strong as schools reported they had no other form of intervention or programme to offer those pupil's who had difficulty interacting with others.

The next stage of the study involved training staff in how to set up and run the programme in each of the primary schools. In order to do this, all primary school staff, two from each school, who agreed to participate, attended a training day (see appendix 2, p. 154). Staff were trained to set up, run the programme and select children for participation.

Information regarding informed parental consent for each child's participation in PALS was given to staff. This information also asked parents to consent to their child being observed during free play by the researcher (see appendix 12, p.203).

Again, guarantees of confidentiality and anonymity were assured. Parents were informed that their child could withdraw at any stage.

Once parental consent was given, staff were able to run the programme in each of the primary schools. Schools were asked to stagger the beginning dates in order for time to be given to gather data at pre and post stages. The data collection stage of the study took place from February to June 2009.

3.6 PALS sessions

The PALS social skills programme consists of ten sessions, each lasting between 20-30 minutes and completed once a week. Each session in the programme consists of developing children's social and emotional competencies by equipping them with the skills necessary for positive interactions.

The first five sessions include teaching children how to share, talk to others, listen, ask for help, take turns and meet and greet others. The second half of the programme involves teaching children skills such as identifying feelings, how to empathise, overcome fear and anxiety, manage frustrations, calm down and speak up. A problem-solving framework is also used to develop appropriate ways of managing conflict. Short role plays (through scenarios and a DVD) are used to develop and model appropriate problem solving, turn taking and breathing techniques. According to Canavan et al., (2009) educational theories of learning suggest that programmes based on promoting positive interaction skills with peers are most effective when students are actively engaged in the learning process including activities such as role play, reflection and discussions, which are all aspects of PALS.

At home parents were encouraged to reinforce the skills taught during the sessions. In order to do this, parents received information on a weekly basis in

relation to the skills that had been taught (e.g. see appendix 5, p.172). All schools were informed at the training day that it was necessary that weekly information provided by PALS was sent home to parents. Schools were contacted during the intervention as a reminder of this. All schools that participated stated that this was done throughout the ten weeks.

As the researcher did not run the programme in the primary schools, there was no possibility of controlling all aspects of implementation. However, in order to ensure a valid evaluation of the schools that took part in the intervention, none of the children had completed a similar social skills intervention in their school. During the intervention none of the schools in the intervention or control group ran another social skills intervention alongside PALS. In order to ensure all staff would implement and run the PALS programme they attended a training day which involved training them in how to set up and run the programme in their school. Although all staff members were enthusiastic about running PALS, there may have been a slight variation in the enthusiasm and efforts made during the sessions and throughout the running of the programme. However, staff in each school ran PALS by following the same ten sessions, with the exact same structure and script (e.g. see appendix 6, p.175).

3.7 Support provided to school staff and parents participating in the research

Support was provided throughout the ten weeks in the form of:

- Training staff to set up and run the programme;
- Providing information on how to select the participants. Staff were also advised on the selection of individual children and in certain cases observations were made where questions arose as to whether the individual child would benefit from the programme;
- Phone support was offered to both parents and staff involved in the programme throughout the ten weeks.

3.8 The school sample

All fifteen primary schools selected were spread out throughout the region and schools were similar in terms of demographic backgrounds. Although two staff members attended the training day and both selected children for participation, only one staff member ran the PALS programme.

Of the fifteen primary schools, eight were assigned to the intervention group and seven to the control/waiting list group. The purpose of having an intervention and control group is that it enabled comparisons to be made between those who received the programme and those who did not.

Schools were randomly assigned to the intervention or control groups based on a points system which is used by the National Educational Psychological Service. This system is current practice used in Ireland whereby all primary schools are given points for the educational psychology service's involvement. This system allocates points to schools based on their needs. Points are given to schools based on three aspects:

- The first aspect is DEIS (Delivering Equality of Opportunity in Schools), which is a system that was set up based on the definition of "educational disadvantage" in the Education Act (1998). The aim of DEIS is to address the educational needs of children and young people from disadvantaged communities, from pre-school through second-level education (DES, 2005);
- The second aspect is the number of pupils with learning difficulties that are in the school;
- The third aspect is the number of overall pupils in the school with boys receiving more points.

Based on the above three aspects, schools were ranked from one to fifteen. The primary schools with the odd numbers were assigned to the intervention group and the primary schools with even numbers were assigned to the control/waiting list

group. This stratified randomisation procedure (Torgerson and Torgerson, 2003) was used as it was felt it would ensure a more accurate and balanced randomised allocation to conditions.

Table 1: Demographic background of schools.

Group	Average School Roll Numbers	Average Points based on DEIS, number of boys, SEN	Average number of Integrated low Incidence pupils (ADHD, ASD etc.)	Number of DEIS status schools
Intervention group	162	366	4	1
Control	143	279	5	2

In this study, there were no concerns expressed by the schools allocated to the control group as these were assigned to the waiting list group and ran the programme at a later stage.

3.9 Research participants

3.9.1 Children

One of the most crucial aspects at this stage of the research was the recruitment of children. Purposive sampling was the method used. This is a process that draws upon those participants who would best suit a study due to their typicality (Cohen et al., 2001). Purposive sampling allowed for the selection of children with attributes the research aimed at studying. Denscombe (1998) states that sometimes it is appropriate to select the sample on the basis of knowledge of the population, its elements and the nature of the research aims, in short, based on the

purpose of the study. Therefore, two staff members from each school involved in the programme and familiar with the children were asked to select the participants themselves as it was felt they knew the children best. Two staff members were asked to select the children as it was hoped that this would eliminate bias and give a more balanced account. Both staff members had attended the training day and were familiar with the terms internalising and externalising behaviours.

In order to help staff with their selection, all staff members selected a number of children they felt would be suitable and then liaised with the researcher prior to starting the intervention in order to ensure the likelihood that children selected would benefit. This enabled staff members to consider those they identified as most suitable. Prior to starting the intervention, staff members also completed two behaviour rating scales to establish the strengths and difficulties in the children selected (one of which gave a good measure of internalising and externalising behaviour and the other which focused on pro-social behaviours. These are outlined later in this chapter).

Within each school a total of six children, male or female aged between four to six years old (mean age 4 years 11 months) were selected for participation, totalling 90 children overall (due to school absences it was not possible to gather data on eight of these children although they participated in the programme). 53 boys were selected in total with 22 presenting with internalising behaviours and 31 with externalising behaviours. 37 girls were selected for participation, with 22 presenting with internalising behaviours and 15 presenting with externalising behaviours. The PALS programme itself outlines that although it can be used for larger groups, it is most suitable for groups of six to eight children (Cooper et al., 2007). Of the six children selected in each school, three were presenting with shy, timid and withdrawn behaviours also known as internalising behaviours. The other three children were presenting with stubborn, aggressive, disruptive and impulsive behaviours also known as externalising behaviours. As stated in the literature these two groups are seen as benefiting most from early years' interventions

(Abound and Mendelson, 1996). Of the children selected, two had English as an additional language. A small number had a diagnosis of ADHD and/or ODD. Although PALS teaches children with a diagnosis of Aspergers or autism skills needed to interact with others, only one child with Aspergers was selected for participation.

3.9.2 Parents

In order to ascertain whether the skills taught were transferred to the home environment, two parents whose children were involved in the intervention group in each school were asked by staff members, to participate in a semi structured interview at the end of the ten weeks. In order to do this sixteen parents (fifteen female and one male), two from each primary school in the intervention group were selected, eight of whom had children presenting with internalising behaviours and the other eight had children presenting with externalising behaviours. Parents selected were asked to participate in the interview at the beginning of the ten weeks, in order to ensure staff did not select parents of children who had made the most progress. However, on the day the interviews took place, only twelve parents attended. Parents who did not attend informed the school that they would not be able to attend due to other commitments.

3.9.3 Staff

For the purpose of setting up and running the programme, two staff members from each primary school became involved. Staff members included both learning support teachers/resource teachers and class teachers. In all, four classroom teachers (three female and one male) and four learning support/resource teachers (all female) ran the programme itself with the support of the class teacher or learning support/resource teacher. For the control/waiting list group, four classroom teachers and four learning support teachers (all female) ran the programme at a later stage and again were supported by the classroom teacher or learning support/resource teacher.

It was felt that by involving learning support teachers in the study future practices within each primary school would benefit. This is because learning support teachers/resource teachers have a strategic role within each school as they impact not only on the children but on the systems and culture of the school itself. Eight staff members involved in the intervention group were asked to become involved in a semi structured interview at the end of their involvement. Staff insights were obtained in order to establish whether the programme benefited their school and the children involved, as outlined in the research questions.

3.10 The Hawthorne effect

As this study involves an intervention and control group, it is necessary to outline the possibility of the Hawthorne effect (Mayo, 1932).The Hawthorne effect would suggest that any positive impact PALS makes might be due to the attention the children receive during the intervention as opposed to the intervention itself. Although the children were informed that they would be involved in PALS programme they were not informed that observations made pre and post were in relation to the intervention. Children were not made aware that they were being observed. Parents of the children were informed. Also, there was no contact made between the researcher and the children involved in the study which would eliminate a change in their behaviour during the observations made.

Another factor which aims to account for the reliability of treatment effects is that staff members and parents, as opposed to the children themselves met to discuss the outcome of PALS. As these focused on the children and not the staff or parents, it is expected that the effects showed an impact on the children as opposed to the adults.

3.11 Data collection methods

Table 2: Outline of the data collection.

Pre Research data collection	Post research data collection
Intervention group • Staff completion of the Strengths and Difficulties Questionnaire (SDQ) and Child Social Behaviour Questionnaire (CSBQ) • Observations of each child during free play	**Intervention group** • Staff completion of the SDQ and CSBQ • Observations of each child during free play • Semi structured interview of each staff member who ran the programme • Semi structured interview of two parents from each school whose children were involved
Control group • Staff completion of the SDQ and CSBQ • Observations of each child during free play	**Control group** • Staff completion of the SDQ and CSBQ • Observations of each child during free play

As previously mentioned, a mixed methods approach was utilised in this study in order to gather data. This method was chosen as it was felt it would give a richer and more detailed account of how this intervention impacts on the children involved. In order to gather sufficient information a number of research tools were selected.

3.12 Fixed interval observation schedule

Brown and Dowling (1998) state, the use of a fixed interval observation schedule enables all forms of the phenomenon to be categorised. One of the benefits of using observation forms is that often children's social and emotional competencies are measured by self-reports, teacher/parent reports and/or laboratory testing as

opposed to seeing the children in their natural environment which can be done using an observation schedule (Pepler and Craig, 1995). Although self and adult report methods of data collection aid in developing an understanding of children's social adjustments, naturalistic observations according to Pepler and Craig (1995) allow for real life situations, which are ethically sound and allows for observations of those behaviours that may not be acknowledged in a report or laboratory i.e. negative behaviours such as bullying. In this study both observations and teacher reports were used.

3.13 Development of coding system

As outlined in the literature, children with low peer acceptance show difficulties joining play or keeping play episodes. They observe peer play rather than initiate play or alternatively they exhibit aggressive behaviour during play and so are rejected by their peers (Putallaz and Wasserman, 1989; Hwa Choi and Kim, 2003). Thus, it was hoped that the schedule would examine whether the skills taught in PALS were effective in equipping children with the skills needed to interact positively.

The development of the codes was adapted from previous research by Blatchford, Baines and Pellegrini, (2003) which examined activities chosen by children during play and also their interactions with peers. For the purpose of this study the schedule was adapted in order to eliminate certain codes which were not related to the current study and combine certain codes to suit this study. The three categories chosen for this study from Blatchford, Baines and Pellegrini (2003) were mutually exclusive and covered; 1) levels of interaction, 2) behaviour and 3) participation.

The first category examined types of interaction and whether the children selected engaged in social interactions with peers. In doing so, solitary, parallel and social play were selected from the Blatchford, Baines and Pellegrini (2003) observation schedule, as these codes would examine whether children engaged with others or remained solitary.

The second category examined the behaviours children could exhibit during free play. PALS aims to provide children with skills needed to interact positively with others. The codes for this category were adapted from the Blatchford, Baines and Pellegrini, (2003) study which used ten codes to examine behaviour. However, for this study the negative behaviours such as teasing, aggression and disputing were grouped together and were coded negative behaviour. Positive behaviour was devised based on each child either displaying or expressing a positive behaviour or emotion. The neutral code was added to code behaviours that were neither negative nor positive.

The final category (participation) devised was the type of engagement in play. Children who have difficulty interacting positively with others also have difficulty engaging and maintaining play. By establishing codes that would examine the level of participation it would ascertain whether those selected for PALS were able to sustain play episodes or whether they remain passive in their interactions with others.

When devising the codes it was necessary that all behaviours were observable and exhaustive. After initially adapting the codes to suit this study, these were shared with a colleague to establish whether the adapted codes were not subjective or judgmental. It was also necessary to ensure that the codes enabled examination of explicit behaviours.

3.14 Inter- observer reliability

Prior to undertaking the research a pilot study was completed in early February 2009 in order to establish whether the category definitions were accurate enough to measure the behaviours. The benefit of adapting an observation schedule which was previously used is that it ensures better reliability and validity. However, in order to ensure inter-rater reliability a pilot study was completed. Inter-rater reliability is the extent to which two or more observers obtain the same results when measuring the same behaviour e.g. when independently coding (Robson,

2002). This was done by training another individual to use the coding sheet and to complete the fixed interval observation schedule. This pilot study was carried out within an early years setting with both researchers observing the same child during free play noting the behaviours observed at timed intervals. Both observation schedules were then used to complete Cohen's Kappa.

For the purpose of calculating inter-rater reliability Cohen's Kappa was calculated based on the agreements and disagreements obtained in the pilot study. Cohen's Kappa is a measure of chance agreement between two observers and is a method that has been highlighted as valuable by Bakeman and Gottman (2007). Results from this show Cohen's Kappa to be .88 which is a score that is deemed excellent when measuring inter-rater reliability (see appendix 7 for calculations, p. 183).

3.15 Procedures followed during observation

For the purpose of this research unobtrusive observations were used whereby the researcher did not interact with the children during the playground. Therefore, it must be considered that not all of the social skills taught could be observed (i.e. language used between children). However there are advantages to using this approach as it allows for data to be collected in a naturalistic environment by an individual who is not familiar with the children and therefore it minimises bias.

Observations of all children in the control and intervention groups were carried out by the researcher in order to establish their behaviours during free play and establish whether PALS had an effect. These observations took place prior to the intervention and after the intervention i.e. before week one and after week ten.

The observation technique used in this study involved: observing each child for a fixed time, in this case predominant activity sampling was used. Predominant activity sampling is a method whereby observations are continuous and an estimate is made to the leading behaviour that occupied the time interval (Russell and Roberts, 2001). Other methods of data collection, such as unit sampling,

whereby the behaviour is recorded only once if it occurs in a time, or instantaneous sampling whereby the behaviour is recorded at predetermined moments (Greig, Taylor and MacKay 2007) were considered as it was felt that predominant activity sampling was most suited. Predominant activity sampling was used as it would measure the main behaviours internalising and externalising children were presenting within free play as opposed to the rate at which they occurred.

Children selected for participation, control and intervention, were observed for all lunch time while playing in the yard. These interval recordings amounted to a total of fifty minutes per day with a total of five minutes observations per child (extra time was allocated to locate each child in the playground). Every twenty seconds behaviours were observed allowing a further ten seconds to chart the behaviours observation sheet (see appendix 3, p.159). These observations resulted in a total of 1,800 scans overall for the intervention and control group with ten scans per child both pre and post PALS. For every observation made, each child was recorded under each one of the three categories. For example, in one observation a child could be recorded as being engaged in social play, displaying positive behaviour and being actively engaged in the activity. An example of a typical coding sheet is available in appendix 3 p.161.

As the children selected for participation were not made aware that they were being observed, it was necessary to have each child identified by a staff member prior to the observations. This was done by staff members discretely identifying children as they entered into the yard.

3.16 Selection of behaviour rating scales
In order to assess whether PALS is effective in decreasing negative unwanted behaviours and increasing positive behaviours, behaviour rating scales were used in addition to observing the children and interviewing parents and staff. This form of data collection was used as it provides a standardised format, provides low frequency and high frequency data that may be missed in an observation,

capitalises on observations made by adults over time and is usually completed by an adult that knows the child well (Merrell, 2008).

For this study behaviours were measured both pre and post intervention for both the intervention and control group using two separate screening measures. These behaviour rating scales were completed by two staff members, the classroom teacher and another member of staff who were familiar with the children (in most cases the learning support teacher or resource teacher) in all primary schools (intervention and control) participating. All staff members were asked to complete the forms separately in order to eliminate any potential bias. However, staff members in all schools later reported that they discussed each child and completed both forms together. These scales were used twice, first as an initial screening tool and then to measure children's behaviour post PALS. Parents in this study did not complete the forms. Although there is a possible potential bias in having staff members completing the behaviour forms, for example, staff members scoring children higher after completing the PALS programme, it was felt that staff members running the programme would be most suitable in completing the forms as they each knew the children best.

Selecting the tools for this research involved a lengthy process of elimination. Previous research looking at the effectiveness of the PALS programme in the UK (Mellor et al., 2006) asked staff in the settings to complete the EYBC and the SESBI. Similar to the study carried out in the UK, the Australian research by Cooper et al., (2003) also examined the effectiveness of the PALS programme using similar scales. By using these measures in the two studies, the children presenting with shy, timid and withdrawn behaviours were overlooked. Therefore it was decided that these measures would not be sufficient for this study.

In order to examine both groups of participants it was necessary to adopt appropriate measures. To do this a number of scales, inventories and questionnaires were examined. It became evident that most of these measures,

although appropriate for the ages of children in this study, only focus on children's externalising behaviours. As a result of this they fail to acknowledge those with internalising (shy, timid and withdrawn) behaviours.

One of the most widely used measuring tools of both internalising and externalising behaviours is the Child Behaviour Checklist (CBCL) which was developed by Achenbach (2001). This scale was designed to assess children's behavioural problems and social competencies. However, the scales are split into two age ranges, 1.5 years to five years (completed by parents) and six years to eighteen years (completed by parents and teachers). As the participants in this study are aged between four to six years it was felt that this measure would not be suitable.

Another difficulty which presented was the majority of measures for early years only focuses on defining children's behaviour problems and difficulties and thereby fails to recognise their strengths. Bearing this in mind two measures were selected which recognised both internalising and externalising behaviours, were age appropriate and also recognised the children's strengths.

3.16.1 Child Social Behaviour Questionnaire (CSBQ) (Sammons et al., 2003).

For the purpose of this study an adapted ASBI form which was renamed the CSBQ by Sammons et al., (2003) was employed (see appendix 8 p.186). The original ASBI is a 30 item screening measure for children aged between 24 to 36 months developed by Hogan et al., (1992). This scale is a measure of children's pro social skills. It was originally developed as there was no other scale which measured a child's social competence, pro-social and anti social behaviours. Factor analysis undertaken by the creators on the ASBI found three interpretable factors which measures children's social skills (express, comply and disrupt) with good internal consistency and concurrent validity (Hogan et al., 1992). Inter-rater reliability and internal consistency for the ASBI were also found to be good in a study by Greenfield et al., (1997).

The ASBI was adapted for the Effective Provision of Pre- School Education (EPPE technical paper 8b) research paper in order to measure the impact of pre-school on children's social/behavioural development over the pre-school period. For this study, the ASBI was adapted for school age children, approximately five years and renamed the Child Social Behaviour Questionnaire by Sammons et al., (2003). The adapted version of the ASBI as outlined in Sammons et al., (2003) and Sylva et al., (2006) includes fifteen additional questions which were added to the original ASBI, five additional questions were taken from the SDQ, five from the Pro-social Behaviour Questionnaire (Weir, Stevenson and Graham, 1980) and the remaining five from an unpublished instrument developed by Peter Blatchford at the Institute of Education, University of London. The adapted version of the ASBI is rated on a five point scale as opposed to the original 3 point scale. The factors accounted for 52% of variance in the ratings (Sammons et al., 2003).

Based on the forty five questions brought together, Sammons et al., (2003) carried out a factor analysis and found six underlying factors that cluster together, independence and concentration, peer sociability, co-operation and conformity, anti-social/worried, empathy and pro-social and openness.

3.16.2 Strengths and Difficulties Questionnaire (SDQ) (Goodman, 1997).

The SDQ is a brief behavioural screening questionnaire for teachers or parents for children aged between four to sixteen years. Questions relate to twenty five attributes which are divided into five scales containing five items each. These scales generate scores for conduct problems, hyperactivity, emotional symptoms, peer problems and pro-social behaviours (Goodman et al, 1997). The SDQ comes in the different forms, one for parents, one for teachers and another for a child to complete. For the purpose of this study the teacher form was used (see appendix 9, p.194). Due to the time constraints of the research it was decided to elicit the required information from the teachers who had knowledge of the children's behaviours and so the parents form was not used.

The SDQ has been shown in a number of peer reviewed papers to have good estimates of reliability and validity (e.g. Palmieri and Smith, 2007, Goodman and Scott, 1997). Previous studies carried out which compared the SDQ with the Child Behaviour Check List (Achenbach, 1991) found that the SDQ was significantly better than the CBCL at detecting inattention and hyperactivity, and at least as good at detecting internalising and externalising problems (Goodman and Scott,1997).

For this study both the SDQ and CSBQ were used as both measures are applicable to the research questions being asked. Both behaviour rating scales were also selected based on their practical use as they can be completed by staff members in each primary school. The SDQ gives a good measure of both internalising and externalising behaviours. The CSBQ is used in this study as it focuses on children's strengths with less focus on pathologising and measures the competencies PALS aims to develop.

3.17 Semi structured interviews

In order to gather information on the effectiveness of the PALS programme within the school and home environment a qualitative approach using interviews was used. Semi-structured interviews were conducted with parents and staff members. Questions asked and the content of the questions were based on the findings from the literature review, the research questions and the aims of the research itself. Mason (1996) refers to qualitative interviewing as an in depth semi-structured or loosely structured form of interviewing. Although pre-determined questions are prepared the interview is freely organised and can be modified to suit the situation. The benefits of using this approach are that interviews are likely to yield detailed information, the risk of low response rates is lessened and issues can be probed in depth (Hammersely et al., 2001). However, limitations of using this approach include the risk that it can lead to researcher and participant bias, excessive demands on time and difficulties associated with the analysis of the interview data (Hammserley et al., 2001). Kumar (1996) further argues the point that a

disadvantage of interviews is that the researcher may introduce his own bias. In order to overcome these difficulties, awareness of these points were vital to the research.

Piloting of the semi structured interviews took place prior to interviewing staff and parents for data collection. Two parents who had been sent weekly information (e.g. see appendix 5, p.172) and one staff member participated, all of whom had been involved in the PALS intervention. The piloting of the interviews sought to develop the interview questions and interviewing style.

The pilot interviews outlined areas which needed further development prior to the data collection stage; avoidance of leading questions, avoidance of asking closed questions, the need to consider pace and approach when asking questions. It was found that by giving interviewees time to think about and process questions being asked, yielded more valuable data.

Prior to conducting the interviews, school staff and parents were all thanked for agreeing to participate in the study. Guarantees of confidentiality and anonymity were stated once again.

3.17.1 Parent's perspective
In order to gain insight into the effectiveness of the programme and its impact on the children in the home environment, semi structured interviews were carried out with parents whose children were involved in the intervention (see appendix 10, p.197). These interviews were completed by selecting sixteen parents (although only twelve attended on the day).

3.17.2 Staff's perspective
The semi structured interview schedule for the school staff was carried out post intervention in order to gain insight into their perceptions of the programme. It consisted of four main sections (see appendix 11, p.200). This was based on an

analysis that looks at strengths, weaknesses, opportunities and threats (SWOT). A SWOT analysis is generally associated with strategic planning, with strengths and weakness usually been seen as connected with the internal environment of an organisation, opportunities and threats associated with the external environment (Burkhart and Reuss, 1993). This approach sought to gain perspectives relating to whether staff members felt the programme was beneficial in their primary school.

3.18 Data analysis

In order to evaluate the data collected, a parallel mixed methods data analysis was used. In order to analyse the data gathered, the following was completed:

3.18.1 Quantitative analysis

The first phase of the data analysis was to analyse the quantitative data gathered through both fixed interval observation schedule and behaviour rating scales. This was completed by entering the data into SPSS 18 (Statistical Package for Social Sciences, Nie et al., 1975) both pre and post intervention i.e. week 1 and week 10. Prior to completing the stats, a Cronbach's alpha was conducted for the CSBQ questions to establish the reliability of the scale. This was previously conducted for the EPPE (Sammons et al., 2003) research paper and results showed appropriate reliability for all six factors i.e. all six factors were above 0.60. For the purpose of this research it was felt suitable to carry out this analysis again as the context of the study had changed. Results of the Cronbach's alpha were all above 0.60; independence and concentration (0.89), co-operation and conformity (0.92), peer sociability (0.87), anti-social/worried (0.81), empathy and pro-social (0.80) and openness (0.68).

3.18.2 Exploratory data analysis

In order to examine the nature of the data and possible errors descriptive statistics were conducted. The descriptive statistics obtained gave measures of the means, distributions, ranges, skewness and kurtosis (see appendix 4, p. 162). Ranges are presented in each table throughout the quantitative chapter.

3.18.3 ANCOVA analysis

As outlined in the methods chapter, analysis was conducted using ANCOVA to compare the intervention and control group scores both pre and post PALS i.e. week 1 and week 10. In cases where significant results were presented, further analysis was conducted with internalising versus externalising added in order to see whether the effects were similar for the two groups or more evident for either group.

Although the data has outliers, ANCOVA was used to analyse the data. It was felt that the ANCOVA is sufficiently robust to handle minor deviations from normality, especially with a large sample size. According to Rutherford (2001), most psychological statistical tests report ANCOVA as being robust with respect to violations of normality, especially when the experimental conditions are symmetrical and the sample size is greater than twelve.

3.18.4 Qualitative analysis

Thematic analysis was utilised as outlined by Braun and Clarke (2006). This approach was adopted as a method for analysing the qualitative results as this form of analysis has been described as an appropriate tool for those "early in a qualitative research career" (Braun and Clarke, 2006, p. 81). Both data and theory driven analysis was used to inform coding (Boyatzis, 1998).

During the semi-structured interviews, field notes were taken and initial thoughts written down. In order to analyse the data the following steps were taken as outlined by Braun and Clarke (2006):

1) All data was transcribed and transcripts were repeatedly read to ensure familiarisation, searching for meanings and patterns.
2) Coding of data began and themes emerged.
3) Once data was coded, mind maps were devised on a broad sheet in order to examine existing codes and examine themes.

4) Themes were examined and certain themes developed were either abandoned or collated to provide a more detailed account of the impact of PALS. Throughout all of the analyses of the qualitative data, the research questions were referred to in order to ensure that certain themes beginning to emerge could be examined further.

5) Themes were defined and named and subthemes were outlined.

6) Themes were written up in the qualitative chapter.

Transcripts were read by two colleagues and themes were explained during the analysis stage in order to ensure validity. This method of analysis was utilised to establish whether the reasoning behind the analysis was clear, concise and conceptually relevant.

3.19 Conclusion

This chapter began by outlining the research design used in this study followed by the theoretical perspective which included the benefits of using a mixed methods approach. The ethical considerations, research process and PALS intervention was then outlined. Following this the sample, participants and the possibility of the Hawthorne effect were detailed. Data collection methods were examined and the use of different tools for gathering information. The steps taken to analysis the data collected were then outlined, which concludes the methods chapter.

Chapter 4
Quantitative results

4.1 Introduction

In order to establish the effectiveness of the intervention on the children selected and to investigate whether the skills taught during PALS sessions were being used during free play, the behaviour rating scales and observation schedule were analysed.

4.2 SDQ and CSBQ

Both the SDQ and CSBQ were utilised to establish whether staff felt that PALS had a positive impact on the children selected. The results of these forms relate to research questions one and four:

1. Is PALS effective in promoting social and emotional competence and reducing aggressive and withdrawn behaviours in the children participating in the research?

4. Do staff perceive the programme as beneficial for the children involved?

4.3 Strengths and Difficulties Questionnaire

As outlined in the previous chapter, the strengths and difficulties questionnaire aims to look at children's scores for:
1. Conduct problems
2. Hyperactivity
3. Emotional symptoms
4. Peer problems
5. Pro-social behaviours
6. Total difficulties (total of numbers 1-4).

The questionnaire asked staff who knew the children best to rate their behaviours on a scale with questions relating to the areas as outlined. The results from the

scale are outlined below. In order to examine the effectiveness of the intervention, the results from the questionnaires are divided into the areas as outlined in the SDQ.

4.3.1 Conduct problems

Conduct problems generally apply to negative behaviours such as temper tantrums and disobedience.

Table 3

Conduct Problems	Intervention group		Control group	
	Week 1	Week 10	Week 1	Week 10
Internalising children				
Mean	2.15	1.80	1.00	1.20
Standard deviation	2.48	2.44	1.26	1.47
Ranges	0-9	0-8	0-4	0-4
Externalising children				
Mean	5.48	4.29	3.52	3.66
Standard deviation	2.50	2.15	1.99	2.12
Ranges	0-10	1-8	1-9	0-9
Combined scores for internalising and externalising children				
Mean	3.85	3.07	2.29	2.46
Standard deviation	2.98	2.59	2.09	2.20
Ranges	0-10	0-8	0-9	0-9

As can be seen in table 3 there is a trend in the intervention group indicating that conduct problems reduced. There is no notable decrease for the control group. Results from the ANCOVA indicate that there was a significant difference between the control and intervention group (F (1, 79) =.551, p<.05).

Results of the ANCOVA, which examined the interaction between the internalising versus externalising children by condition, was not significant (F (1, 77) = .2.01, p>.05). However, there were no notable trends for both the internalising and

externalising children in the intervention group although both slightly decreased their conduct problems. There was a slight increase in conduct problems for both internalising and externalising children in the control group.

4.3.2 Hyperactivity

Hyperactivity measures whether children are overactive, fidgeting, easily distracted and whether they think things out before acting.

Table 4

Hyperactivity	Intervention group		Control group	
	Week 1	Week 10	Week 1	Week 10
Internalising children				
Mean	4.50	3.80	4.45	4.45
Standard deviation	3.27	2.64	3.30	3.06
Ranges	0-9	0-7	0-10	0-10
Externalising children				
Mean	7.29	6.62	6.29	6.38
Standard deviation	2.88	3.19	2.88	2.78
Ranges	1-10	1-10	0-10	0-10
Combined scores for internalising and externalising children				
Mean	5.92	5.24	5.39	5.43
Standard deviation	3.24	3.23	3.05	3.05
Ranges	0-10	0-10	0-10	0-10

As can be seen in table 4, the intervention group's hyperactivity rating appeared to decrease over the intervention while the levels remained the same for the control group. There were slight decreases in hyperactivity for both internalising and externalising children in the intervention group but no considerable changes for the control group. The results of the ANCOVA confirmed a significant difference between the control and intervention group for the hyperactivity variable ($F_{(1, 79)}$ =4.12, $p<.05$) indicating that PALS had a positive impact on the overall group. Results of the ANCOVA, which examined the interaction between the internalising

versus externalising children by condition, was not significant (F (1, 77) = .018, p>.05).

4.3.3 Emotional symptoms

Emotional symptoms, which measures psychosomatic complaints, unhappy, scared and fearful behaviours were analysed.

Table 5

Emotional symptoms	Intervention group		Control group	
	Week 1	Week 10	Week 1	Week 10
Internalising children				
Mean	5.45	4.05	4.00	4.00
Standard deviation	2.95	2.89	2.27	2.62
Ranges	0-10	0-10	1-8	0-9
Externalising children				
Mean	3.14	2.62	2.38	2.43
Standard deviation	3.14	2.99	2.25	2.20
Ranges	0-10	0-9	0-8	0-8
Combined scores for internalising and externalising children				
Mean	4.27	3.32	3.17	3.20
Standard deviation	3.22	2.99	2.38	2.51
Ranges	0-10	0-10	0-8	0-9

As can been seen in table 5, there is a trend over time in the intervention group in terms of a decrease in their emotional symptoms. There is a slight trend for the internalising and externalising children in the intervention group in that they decreased their emotional symptoms. There were no trends for the control group. Results indicate that emotional symptoms for the group variable is significant (F (1, 79) =4.97, p<.05). Results of the ANCOVA, which examined the interaction between the internalising versus externalising children by condition, was not significant (F (1, 77) = .1.071, p>.05).

4.3.4 Peer problems

Peer problems measures whether a child has difficulty in interacting positively with others.

Table 6

Peer problems	Intervention group		Control group	
	Week 1	Week 10	Week 1	Week 10
Internalising children				
Mean	3.20	3.20	3.80	3.65
Standard deviation	1.99	2.42	2.44	2.56
Ranges	0-7	0-10	0-8	0-8
Externalising children				
Mean	2.81	2.09	3.00	1.67
Standard deviation	2.71	2.00	2.81	1.63
Ranges	0-7	0-6	0-6	0-5
Combined scores for internalising and externalising children				
Mean	3.00	2.95	3.39	3.22
Standard deviation	2.02	2.20	2.10	2.15
Ranges	0-7	0-10	0-8	0-8

Table 6 indicates that peer problems did not notably decrease for the intervention or control group. An ANCOVA did not find a significant difference between the intervention and control group for the peer problem variable (F (1, 79) =.010, p>.05). There is no decrease for internalising children's peer problems in the intervention group, with a slight increase for the control group. There was a slight decrease in peer problems for the externalising children in both conditions.

4.3.5 Pro- social skills

Pro-social skills measure a child's ability to interact positively with peers.

Table 7

Pro-social skills	Intervention group		Control group	
	Week 1	Week 10	Week 1	Week 10
Internalising children Mean Standard deviation Ranges	5.30 3.48 0-10	5.30 3.20 0-10	5.25 2.45 1-10	5.20 2.38 1-10
Externalising children Mean Standard deviation Ranges	4.24 2.46 0-9	4.67 2.43 1-9	4.48 1.63 1-8	4.57 1.75 1-8
Combined scores for internalising and externalising children Mean Standard deviation Ranges	4.76 3.01 0-10	4.97 2.82 0-10	4.85 2.08 1-10	4.87 2.08 1-10

Table 7 indicates that pro-social skills did not notably increase for the control group. There is a slight increase in pro-social skills for the intervention group. The ANCOVA suggests that there was no significant difference between the two groups in the changing levels of the pro-social skills variable (F (1, 79) =.272, p>.05). Externalising children in both conditions appeared to slightly increase their pro-social skills although these were not considerable. There were no considerable differences for the internalising children in both conditions.

4.3.6 Overall difficulties

In order to get a score of the participants overall difficulties, all scores were added together, excluding those from the pro-social scale.

Table 8

Overall difficulties	Intervention group		Control group	
	Week 1	Week 10	Week 1	Week 10
Internalising children				
Mean	15.30	12.85	14.28	13.08
Standard deviation	5.89	6.37	5.97	6.45
Ranges	5-24	1-26	4-24	1-26
Externalising children				
Mean	19.62	16.24	15.19	15.28
Standard deviation	8.58	7.03	5.70	6.05
Ranges	4-41	7-32	5-26	5-26
Combined scores for internalising and externalising children				
Mean	17.51	14.59	14.24	14.32
Standard deviation	7.62	6.85	5.87	6.37
Ranges	4-41	1-32	4-32	3-26

Table 8 indicates that there is a trend in the intervention group with difficulty levels reducing over the period of the intervention. There was no notable trend in the control group, although it is important to note that levels for the control group were lower than those at post test for the intervention group. Results of the ANCOVA indicate that there is a significant change over time in favour of the intervention group for the overall difficulties variable $(F (1, 79) = 6.32, p < .05)$.

Table 8 would suggest a decrease for both internalising and externalising children's overall difficulties in both conditions with a notable decrease for the externalising group in the intervention group. Results of the ANCOVA, which examined the interaction between the internalising versus externalising children by condition, was not significant $(F (1, 77) = .059, p > .05)$.

4.3.7 Summary of SDQ

The results from the SDQ indicate that there was a significant difference between the intervention and control group for the hyperactive, conduct problems, emotional symptoms and overall difficulties variable, indicating that PALS had a positive impact in these areas. There was a notable trend for the externalising groups overall difficulties and internalising children's emotional symptoms. Results of the ANCOVA, which examined the effects for the internalising versus externalising children by condition, confirmed no significant differences. These results would indicate that although there was a considerable trend in the internalising children's decrease in emotional symptoms, overall PALS had a positive impact for the overall group as opposed to either the externalising or internalising children when examined separately. There was no significant difference between the intervention and control group in the peer problems or pro-social skills.

4.4 Child Social Behaviour Questionnaire

The CSBQ is an adapted form of the ASBI which was originally developed as there was no other scale available, which measured a child's social competence, pro-social, and anti-social behaviours. The six factors which measures children's social and emotional competencies, independence and concentration, peer sociability, anti-social and worried, co-operation and conformity, empathy and pro-social, and openness, were used. Staff involved in the intervention and control group were asked to complete the questionnaire pre and post PALS in order to establish whether children's social and emotional competencies improved. The results from the scale are outlined below.

4.4.1 Independence and Concentration

This measures a child's ability to work independently and concentrate in class.

Table 9

Independence and concentration	Intervention group		Control group	
	Week 1	**Week 10**	**Week 1**	**Week 10**
Internalising children				
Mean	29.40	30.20	27.40	28.75
Standard deviation	7.85	7.66	6.84	7.07
Ranges	12-41	13-45	15-39	15-42
Externalising children				
Mean	22.43	25.10	25.95	26.52
Standard deviation	7.33	8.72	8.30	8.57
Ranges	10-34	12-42	12-43	12-43
Combined scores for internalising and externalising children				
Mean	25.83	27.59	26.66	27.60
Standard deviation	8.28	8.52	7.56	7.85
Ranges	10-41	12-45	12-43	12-43

As can be seen in table 9, there are slight upward trends in levels of independence and concentration for both the intervention and control groups. An ANCOVA did not find a significant difference in the levels of change between the intervention and control group for the independence and concentration variable ($F_{(1, 79)}$ =.796, $p>.05$). There is a slight increase in both internalising and externalising children in both conditions although these are not substantial.

4.4.2 Peer sociability

Peer sociability, similar to the SDQ measures a child's ability to interact positively with others.

Table 10

Peer sociability	Intervention group		Control group	
	Week 1	Week 10	Week 1	Week 10
Internalising children Mean Standard deviation Ranges	20.45 7.57 9-31	21.25 6.26 10-32	17.60 5.07 7-27	18.25 5.31 8-29
Externalising children Mean Standard deviation Ranges	24.52 4.17 15-34	25.10 4.60 17-34	25.76 4.59 17-32	26.05 5.06 17-33
Combined scores for internalising and externalising children Mean Standard deviation Ranges	22.54 6.34 9-34	23.22 5.74 10-34	21.78 6.31 7-32	22.24 6.46 8-33

Table 10 indicates peer sociability did not notably increase for the intervention or control groups or the internalising and externalising children in both conditions. Results of the ANCOVA highlight that there was no significant difference between the intervention and control group for the peer sociability variable ($F_{(1, 79)} = .247$, $p > .05$).

4.4.3 Co-operation and Conformity

Measures a child's ability to co-operate and agree with others during play or when interacting with peers and adults.

Table 11

Co-operation and conformity	Intervention group		Control group	
	Week 1	Week 10	Week 1	Week 10
Internalising children				
Mean	45.00	47.25	44.70	45.30
Standard deviation	11.77	10.91	6.34	6.44
Ranges	19-60	27-60	33-57	32-57
Externalising children				
Mean	31.00	35.38	37.71	38.62
Standard deviation	9.19	10.02	8.19	9.08
Ranges	17-49	16-49	22-52	22-58
Combined scores for internalising and externalising children				
Mean	37.83	41.17	41.12	41.88
Standard deviation	12.58	11.95	8.07	8.50
Ranges	17-60	16-60	22-57	22-58

Table 11 indicates that co-operation and conformity did not notably increase for the control group, however, there is a trend suggesting increased levels of co-operation and conformity for the intervention group. There is also an increase in co-operation and conformity for the internalising group, however there is a considerable increase for the externalising group. There is a slight increase for the internalising and externalising children in the control group, although not considerable. The ANCOVA confirmed this difference in levels of co-operation and conformity in favour of the intervention group (F (1, 79) =4.69, p<.05).

Results of the ANCOVA, which examined the interaction between the internalising versus externalising children by condition, was not significant (F (1, 77) = .255, p>.05).

4.4.4 Anti-social and Worried

This scale, similar to the SDQ's emotional symptoms, measures children's internalising and externalising behaviours.

Table 12

Anti- social and worried	Intervention group		Control group	
	Week 1	Week 10	Week 1	Week 10
Internalising children Mean Standard deviation Ranges	13.85 4.74 7-27	13.75 6.84 7-31	11.95 4.30 8-23	11.85 4.65 7-23
Externalising children Mean Standard deviation Ranges	22.10 5.27 7-30	20.48 5.36 11-32	18.38 4.21 9-27	18.10 4.10 9-25
Combined scores for internalising and externalising children Mean Standard deviation Ranges	18.07 6.48 7-32	17.20 6.94 7-32	15.24 5.37 8-27	15.05 5.35 7-25

Table 12 indicates that the anti-social and worried variable did not notably decrease for the control group or for internalising and externalising children in this group. There is a slight decrease in ratings of anti-social and worried for the intervention group and also internalising and externalising children, although this is not a considerable trend. Results from the ANCOVA indicate that there were no significant differences between the intervention and control group for this variable (F (1, 79) =.284, p>.05).

4.4.5 Empathy and Pro social

This measures a child's ability to interact positively and show empathy towards others.

Table 13

Empathy and pro-social	Intervention group		Control group	
	Week 1	Week 10	Week 1	Week 10
Internalising children Mean Standard deviation Ranges	18.25 6.58 7-30	19.20 7.05 8-30	16.95 3.87 10-23	17.10 4.02 10-23
Externalising children Mean Standard deviation Ranges	16.10 4.13 8-23	16.86 4.64 7-26	17.14 4.70 9-28	18.19 5.24 11-30
Combined scores for internalising and externalising children Mean Standard deviation Ranges	17.15 5.50 7-30	18.00 5.98 7-30	17.05 4.26 9-28	17.66 4.66 10-30

As can be seen in table 13, the empathy and pro-social variable did not increase considerably for either the intervention or the control groups. This is also the case for the internalising and externalising children in both conditions. The ANCOVA did not show a significant difference between the two groups for this variable ($F_{(1, 79)}$ =.150, $p>.05$).

4.4.6 Openness

This variable measures a child's ability to open up and talk with others.

Table 14

Openness	Intervention group		Control group	
	Week 1	Week 10	Week 1	Week 10
Internalising children Mean Standard deviation Ranges	 13.50 3.38 5-19	 14.95 3.35 9-20	 11.60 2.76 6-19	 11.65 2.48 8-19
Externalising children Mean Standard deviation Ranges	 14.48 3.66 7-20	 15.00 3.94 6-20	 14.62 3.01 9-20	 15.14 3.26 9-20
Combined scores for internalising and externalising children Mean Standard deviation Ranges	 14.15 3.5 5-20	 14.97 3.62 6-20	 13.14 3.24 6-20	 13.44 3.37 8-20

Table 14 would indicate that the openness variable slightly increased for the intervention group but not the control group. This is also the case for the internalising and externalising children in both conditions. The ANCOVA also failed to identify a significant difference in levels between the intervention and control group ($F_{(1, 79)} = 2.36$, $p > .05$).

4.4.7 Summary of the CSBQ

Results from the CSBQ indicate that there was a significant difference between the intervention and control group for the co-operation and conformity variable. There is a considerable trend in externalising children increasing their co-operation and conformity in comparison to the internalising group which illustrates a slight increase. Results of the ANCOVA, which examined the effects for the internalising versus externalising children by condition, confirmed no significant differences for

co-operation and conformity. These results would indicate that PALS had a positive impact for the overall group as opposed to the externalising or internalising children when examined separately. There were no significant differences between the intervention and control groups for the independence and concentration, anti-social and worried, empathy and pro social behaviours, and openness or peer sociability variables.

4.5 Fixed interval observation schedule

Treatment effects for the fixed interval observation schedule were analysed pre and post PALS.

The observation schedule was utilised to establish whether the skills children were taught in PALS, had been adapted when they were amongst peers during free play. This relates to research question one and two:

1. Is PALS effective in promoting social and emotional competence and reducing aggressive and withdrawn behaviours in the children participating in the research?

2. Are the skills taught effective and will these skills be used when children are observed during free play?

4.5.1 Solitary play

Measures whether children tended to interact with others or remain alone.

Table 15

Solitary play	Intervention group		Control group	
	Week 1	Week 10	Week 1	Week 10
Internalising children				
Mean	42.00	13.00	28.50	34.00
Standard deviation	28.58	17.80	8.13	41.35
Ranges	0-100	0-50	0-70	0-100
Externalising children				
Mean	21.43	10.95	20.95	27.62
Standard deviation	22.65	13.75	30.81	28.27
Ranges	0-70	0-40	0-100	0-80
Combined scores for internalising and externalising children				
Mean	31.46	11.95	24.63	30.73
Standard deviation	27.44	15.89	28.03	34.96
Ranges	0-100	0-50	0-100	0-100

The data in table 15 suggests a substantial reduction in levels of solitary play for the intervention group and an increase in solitary play for the control group. This difference between the two groups was found to be significant (F (1, 79) =9.62, p<.05).

Table 15 suggests a slight decrease in solitary play for both the internalising and externalising children in the intervention group and a slight increase for internalising and externalising children in the control group. Results of the ANCOVA, which examined the interaction between the internalising versus externalising children by condition, was not significant (F (1, 77) = .118, p>.05).

4.5.2 Parallel play

This variable measures whether children tended to play alongside others during play.

Table 16

Parallel play	Intervention group		Control group	
	Week 1	Week 10	Week 1	Week 10
Internalising children				
Mean	14.50	2.00	3.50	9.50
Standard deviation	18.20	8.94	8.13	24.17
Ranges	0-60	0-40	0-30	0-100
Externalising children				
Mean	6.19	2.38	5.71	4.76
Standard deviation	11.61	8.89	14.69	12.09
Ranges	0-30	0-40	0-50	0-40
Combined scores for internalising and externalising children				
Mean	10.24	2.20	4.63	7.07
Standard deviation	15.57	8.81	11.85	18.87
Ranges	0-60	0-40	0-50	0-100

Table 16 indicates that the intervention group and both internalising and externalising children in this group decreased their parallel play. However, there is a slight increase in the control group's parallel play and for internalising children in this group. However, there is a slight decrease in externalising children's parallel play although this is not considerable. The results from the ANCOVA indicate that there was no significant difference between the intervention and control group for parallel play ($F_{(1, 79)} = 1.73$, $p > .05$). Although there is a decrease in parallel play for the intervention group, the high level of within group variability in the scores would impact on the overall significance of the results.

4.5.3 Social play

Social play was used in the observation schedule to measure whether children participated in peer play.

Table 17

Social play	Intervention group		Control group	
	Week 1	Week 10	Week 1	Week 10
Internalising children				
Mean	43.50	85.00	68.00	56.50
Standard deviation	28.70	23.51	26.48	43.32
Ranges	0-100	10-100	20-100	0-100
Externalising children				
Mean	72.38	86.67	73.33	67.62
Standard deviation	24.89	15.27	37.59	31.61
Ranges	20-100	60-100	0-100	0-100
Combined scores for internalising and externalising children				
Mean	58.29	85.85	70.73	62.20
Standard deviation	30.24	19.49	32.36	37.72
Ranges	0-100	10-100	0-100	0-100

Table 17 highlights a considerable trend as social play increased for the intervention group. However, there is a slight decrease in social play for the control group. There is also a slight increase for both the internalising and externalising children in the intervention group and a decrease for internalising and externalising children in the control group. For the social play measure, as seen in table 17, the standard deviations are quite high which would indicate that there is individual variability in levels. Results from the ANCOVA indicate that there was a highly significant difference between the intervention and control group for the social play variable ($F_{(1, 79)} = 12.27$, $p < .001$).

Results of the ANCOVA, which examined the interaction between the internalising versus externalising children by condition, was not significant (F (1, 77) = .48, p>.05).

4.5.4 Negative behaviours

This measures whether children displayed negative behaviours during play.

Table 18

Negative behaviours	Intervention group		Control group	
	Week 1	Week 10	Week 1	Week 10
Internalising children				
Mean	3.50	2.50	10.50	5.50
Standard deviation	7.45	9.10	13.17	9.45
Ranges	0-20	0-40	0-30	0-30
Externalising children				
Mean	28.10	7.62	10.48	11.90
Standard deviation	23.37	8.89	12.84	15.69
Ranges	0-80	0-30	0-30	0-50
Combined scores for internalising and externalising children				
Mean	16.10	5.12	10.48	8.78
Standard deviation	21.31	9.25	12.84	13.27
Ranges	0-80	0-40	0-30	0-50

Table 18 indicates a marked decline in negative behaviours for the intervention group and externalising children in this group indicating that negative behaviours decreased. There is a slight decrease in negative behaviours for the control group and internalising children in this group although this is not a considerable decrease. However, further analysis using an ANCOVA indicates that there was not a significant difference between the intervention and control group for negative behaviours, (F (1, 79) = 2.27, p>.05). It is important to note the high standard deviations found in both groups pre and post PALS suggests that a large

discrepancy in negative behaviours were present. This would impact on the overall results and thus the significance for both intervention and control group.

4.5.5 Positive behaviours

Positive behaviours measures whether children displayed positive/pro-social behaviours during play with peers.

Table 19

Positive behaviours	Intervention group		Control group	
	Week 1	Week 10	Week 1	Week 10
Internalising children				
Mean	12.50	25.00	18.00	12.50
Standard deviation	15.03	19.33	12.81	14.10
Ranges	0-70	0-60	0-50	0-40
Externalising children				
Mean	14.81	23.81	15.71	20.00
Standard deviation	11.17	21.09	19.89	17.02
Ranges	0-30	0-70	0-60	0-60
Combined scores for internalising and externalising children				
Mean	13.68	24.39	16.83	16.34
Standard deviation	14.77	20.01	16.65	15.93
Ranges	0-70	0-70	0-60	0-60

As seen in table 19, there is a marked increase in the intervention group's positive behaviours. There is no trend of increased positive behaviours in the control group. There is a slight increase for both the internalising and externalising children's positive behaviour in the intervention group and for externalising children in the control group.

The ANCOVA indicates that there was a significant difference between the intervention and control group for the positive behaviours variable (F (1, 79) =4.19, p<.05). Although there is a significant increase in positive behaviours for the

85

intervention group, it is also important to note that there is an increase in the standard deviations also suggesting variability amongst the children's behaviours in this group.

Results of the ANCOVA, which examined the interaction between the internalising versus externalising children by condition, was not significant (F $(1, 77) = 1.26$, $p>.05$).

4.5.6 Neutral behaviours

Neutral behaviours measured children's interaction with others. These behaviours were impartial and did not impact positively or negatively on the group.

Table 20

Neutral behaviours	Intervention group		Control group	
	Week 1	**Week 10**	**Week 1**	**Week 10**
Internalising children				
Mean	84.00	72.50	71.50	82.00
Standard deviation	21.62	19.16	14.24	14.36
Ranges	10-100	40-100	50-100	40-100
Externalising children				
Mean	56.19	68.57	73.81	68.10
Standard deviation	23.97	17.69	20.85	23.16
Ranges	0-100	30-100	40-100	30-100
Combined scores for internalising and externalising children				
Mean	69.76	70.49	72.68	74.88
Standard deviation	26.60	18.30	17.75	20.39
Ranges	0-100	30-100	40-100	30-100

Table 20 indicates a slight increase in neutral behaviours for both the intervention and control group, although these were not considerable. There are slight decreases in neutral behaviours for the internalising children in the intervention and

externalising in the control group. There are slight increases for the externalising in the intervention and internalising children in the control group. Further analysis using an ANCOVA indicates that there was no significant difference between the intervention and control group for neutral behaviours, $(F (1, 79) = .862, p>.05)$.

4.5.7 Active participation

Active participation measures whether children were actively involved in play with peers.

Table 21

Active participation	Intervention group		Control group	
	Week 1	Week 10	Week 1	Week 10
Internalising children				
Mean	57.50	79.50	63.50	65.50
Standard deviation	26.13	19.86	31.50	27.43
Ranges	0-90	40-100	0-90	0-80
Externalising children				
Mean	50.00	84.76	73.81	67.14
Standard deviation	41.71	22.05	22.47	20.77
Ranges	0-100	20-100	0-60	30-100
Combined scores for internalising and externalising children				
Mean	53.66	82.20	68.78	66.34
Standard deviation	34.77	20.92	27.40	23.95
Ranges	0-100	20-100	10-100	20-100

Table 21 indicates that active participation notably increased for the intervention group, although this is not a considerable trend. There was a notable increase for both internalising and externalising children's active participation in the intervention group. There is a slight increase for the internalising children and a slight decrease for externalising children in the control group.

Results from the ANCOVA indicate that there was a highly significant difference between the intervention and control group for the active participation variable (F (1, 79) =12.76, p<.001). Results of the ANCOVA, which examined the interaction between the internalising versus externalising children by condition, was not significant (F (1, 77) = .395, p>.05).

4.5.8 Passive participation

This measures whether children remained passive and did not fully engage in play with peers.

Table 22

Passive participation	Intervention group		Control group	
	Week 1	Week 10	Week 1	Week 10
Internalising children				
Mean	42.50	20.50	36.50	34.50
Standard deviation	26.13	19.86	31.50	27.43
Ranges	0-90	0-60	10-100	0-80
Externalising children				
Mean	50.00	15.24	26.19	32.86
Standard deviation	41.71	22.05	24.47	20.77
Ranges	0-100	0-80	40-100	0-70
Combined scores for internalising and externalising children				
Mean	46.34	17.80	13.22	33.66
Standard deviation	34.77	20.92	27.40	23.95
Ranges	0-100	0-80	10-100	0-80

Table 22 indicates a reducing trend in the intervention group for passive participation. There is a slight decrease in passive participation for the control group, although this is not a considerable trend. The ANCOVA indicates that there was a highly significant difference between the intervention and control group (F (1, 79) =12.76, p<.001).

Table 22 would suggest a slight decrease for both the internalising and externalising children in the intervention group and also for the internalising children in the control group. There is a slight increase for externalising children in the control group. Results of the ANCOVA, which examined the interaction between the internalising versus externalising children by condition, was not significant (F $(1, 77) = .395$, p>.05).

4.5.9 Summary of Observation schedule

The results from the observation schedule indicate that there were significant differences between the intervention and control group in the changing levels of solitary play, social play, positive behaviours and active and passive participation variables. When examining internalising versus externalising children, there is a considerable trend in both groups in their increase in active participation and decrease in passive participation. There were no significant differences between the internalising versus externalising children by condition. These results would indicate that PALS had a positive impact for the overall group as opposed to the externalising or internalising children when examined separately. There was no significant difference between the intervention and control group for the parallel, negative behaviours and neutral behaviour variables.

The large standard deviations for all observation variables, especially for positive behaviour, solitary play, parallel play and negative behaviours is similar across all groups and time points which would indicate a great deal of variability amongst the children selected for PALS. This is likely to have impacted on the significance of results for both the intervention and control group.

Chapter 5
Qualitative results

5.1 Introduction

This chapter outlines the primary findings from interviews with twelve parents and eight teachers with the findings based on the analysis of the interviews. The semi-structured interviews were analysed using thematic analysis as outlined in the methods chapter.

This chapter will begin by outlining the findings from the staff interviews. The second section outlines the results from the parent's interviews. It is important to outline that, numbers found at the end of each quote correspond to the number assigned to the interviewee. All twelve parents were numbered one to twelve during the analysis phase and all staff members were numbered one to eight. Therefore, quotes under each theme and sub-theme correspond to the number assigned to each individual during analysis.

5.2 Interviews with staff

It was envisaged that interviews with staff would elicit views on how the programme affected their school, whether they themselves benefited from becoming involved with PALS and whether they felt it made a positive impact on the children selected for participation.

The findings from the staff interviews relate to research questions one, four and five:

1. Is PALS effective in promoting social and emotional competence and reducing aggressive and withdrawn behaviours in the children participating in the research?

4. Do staff perceive the programme as beneficial for the children involved?

5. Does the programme make a positive contribution to the schools, their culture and their practices?

Eight staff members were interviewed using semi-structured interviews. All staff interviewed had run the PALS programme in their school.

5.2.1 PALS more effective for internalising children

When staff were asked how they perceived PALS had impacted on the children who participated, there was a common response. Of the eight staff interviewed, seven staff members stated that they felt, although all children benefited from PALS, the internalising children who participated in the intervention benefited more than the externalising children.

Table 23: Benefits for internalising children

Theme : More effective for internalising children	
Sub-themes	**Quotes**
Behaviour	"I found the kids who were squirming found it very difficult to pay attention, therefore I thought the shy kids probably took in a lot more" (2).
	"Some of the louder ones thought parts were a bit babyish for them and didn't engage as much as the quieter ones" (1).
	"The shyer girls found it really helpful because they grew in confidence and listened throughout but the louder ones know all the skills already but just didn't really want to try them" (7).
Group size	"What was very helpful for those children, I think the fact that they were in a small group so it gave them the confidence to speak up more" (8).
	"Because it was in a small group they were more confident

	and hopefully they will transfer that back when they are in a bigger group. They didn't mind as much speaking out after a few weeks" (5).
New skills	"Normally he just walks in with his head down and doesn't see anybody whereas he is starting to say hello and smile" (3).
	"The quieter children definitely did get more confident in asking other children could they play and things like that but I don't think there was much of a difference in the other children" (7).
	"I would see her sitting on her own but I think now she is more confident, she will put herself into a game" (6).
Empowerment	"One day I asked him, how are you today? And he said, "teacher I'm excellent", I never heard him so enthusiastic about anything before. He was really, really delighted to be part of the PALS, he just really seemed to love it all" (3).

5.2.2 PALS teaching methods

Throughout the interviews staff highlighted different aspects of PALS that affected the setting up and running of the programme. Staff outlined how the teaching methods of PALS impacted on the children selected and on the staff themselves.

Table 24: PALS teaching methods

Theme : PALS teaching methods	
Sub-theme	**Quotes**
Efficient script	"I thought it was pretty clear and you could see pretty quickly what the objective was" (4).
	"It is all laid out for you, it is perfect as in, read the story

	now, ask the questions now, all these questions are there, you don't have to come up with any, look at this part of the DVD, everything is there for you. You couldn't go wrong" (5).
	"It just took ten minutes or so to get my thoughts together and so it was very teacher friendly" (3).
	"It was very teacher friendly, it was easy to use in that the whole kit was there prepared and ready to use, you didn't have to go looking for stuff" (6).
Children's enjoyment during sessions	"They're very proud of themselves for being on it and they just seemed to be really enthusiastic about it" (3).
	"If they were in the class it was "when are we going? It was seen as a treat for them" (8).
	"They looked forward to coming down. They felt they were a bit special" (4).
	"They loved the puppets and they loved the whole thing" (1).
Maintaining children's interest	"But they did contribute and the idea of the puppets helped a lot because they liked the idea" (2).
	"It kept their interest in the stories and they were able to understand the stories and then answer questions afterwards" (3).
	"They were going from the song and then they had a little

	story and talk about the end of the story and discussion again and then they had a DVD. It wasn't just sitting in the one spot for twenty minutes they were moving" (6). "It's fun for the kids with the songs and DVD, it's always changing, you are not spending the whole twenty minutes on one thing hammering it home, it is changing and that is what you need with infants" (8).
Amount of information	"I found it took them ages to take it in and so after one session they were nearly overloaded and then they had to back to the class to try and catch up" (2).
Certain skills too advanced	"I know we were looking at the pictures in the book when it was about emotions and the emotions were pretty simple for us to see but the children found it a lot harder. So in that example maybe it was a little too advanced for them" (7). "I think a lot of time, just on the emotions, that's a difficult concept. I think we could do a lot more with emotions or something because they didn't really get a lot of the concepts. It would have taken a couple of more session's maybe to get some of the stuff" (2).

5.2.3 Managing school demands

The majority of staff interviewed acknowledged that it was difficult to get support from their school with regards to time and supervision of classes. Staff highlighted two main themes that impacted on the time allocated to PALS.

Table 25: Staff support

Theme : Staff support	
Sub-theme	**Quotes**
Other school	"I was involved in an art project myself and we had parties

commitments	for the children and all the general mayhem that goes with the end of year and building a new block onto the school" (1). "Just trying to get a cover for the class and trying to find a classroom available was a bit trickier" (4). "We did felt the pressure as the weeks went by because different things were happening towards the end of the year" (7).
Teachers not having time or support	"Logistically it was hard to manage in that I was relying on another teacher to step into my class for a half an hour and some mornings it didn't suit her". (4). "Time was a bit of an issue in trying to cover my class" (8).

5.2.4 Skills taught

The PALS programme is best suited to teaching children the eleven main social and emotional competencies throughout ten sessions (see appendix 13, p.203). Of the eight staff interviewed, each highlighted skills that they felt all children developed and benefited from most. Bar chart 1 indicates the new skills staff felt the children developed.

Bar chart 1: Skills most developed according to staff.
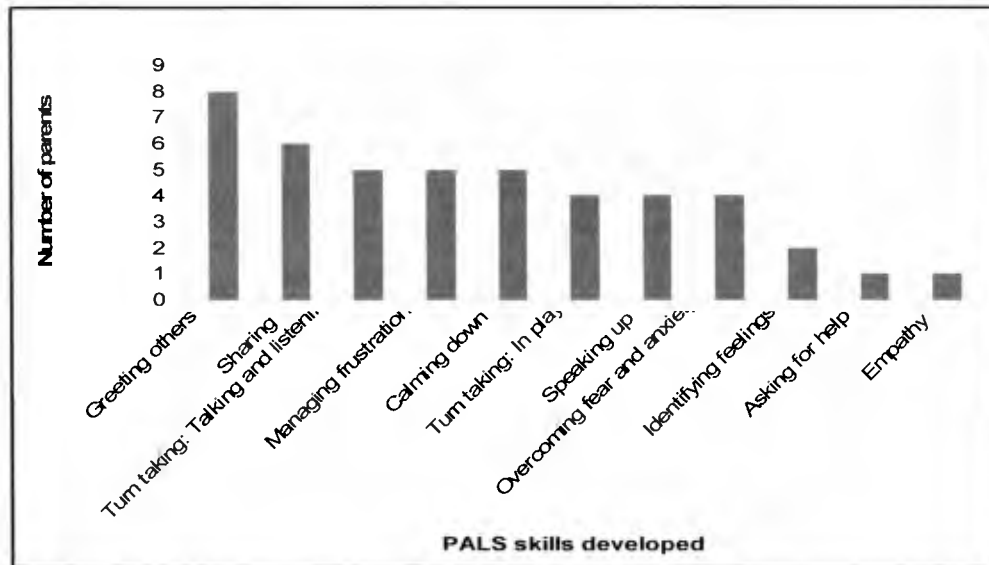
Greeting others was a skill that all eight staff members stated as an increased competency for all children: "it helped the kids a lot I suppose in greetings. A lot of them don't know how to interact with one another from the outset and so it helped them a lot" (8).

Sharing was a skill that six staff members felt had improved: "the two girls that have been quite dominant personalities and self centred, I found that they were a lot more willing to be considerate of others and share more" (4).

Five staff members felt that turn taking, talking and listening benefited both internalising and externalising children: "the listening they were very into when I was in the room and looking and listening" (1).

Taking turns during play was a skill four staff members felt also applied to both groups of children: "We had a lovely bouncy ball that they all had an interest in, so they did take their turns" (4).

Managing frustrations was a skill developed that applied mostly to externalising children: "defining in their head what they are going to do rather than lashing out and getting angry and cross straight away" (5).

Five staff members out of the eight felt that children selected benefited from learning how to calm down: "they seemed to like that and they were into the breathing and calming down and then working out solutions to the problems" (5), "and for calming down, it gave them a strategy to understand what they were doing" (2).

Four staff members expressed that children selected for participation, especially the quieter children, benefited from developing skills such as speaking up: "It gave them a chance to speak up more so than in a class setting where they wouldn't do that" (7). Four staff members also stated that children selected for participation had developed skills in overcoming fears and anxieties: "she was a child that used to cry in a toddler like way out in the yard and that has decreased" (6).

Two staff members reported that children's ability to identify feelings in others developed: "the kids always recognise when the behaviour on the DVD wasn't as it should be and I think one or two of them saw it and the impact this behaviour can actually have on other people" (4).

Only one staff member outlined that asking for help was a skill developed in the children selected: "For us I thought mainly looking for help. That helped a lot" (2).

Only one staff member noted empathy as a skill developed. This skill is taught by encouraging children to respond appropriately and understand feelings of others through four skills, sadness, fear, anger and happiness. However, the majority of staff felt these skills were too advanced for the children: "the emotions were pretty simple for us to see but the children found it a lot harder" (7). However, the staff member who felt this skill had developed stated, "they had a lot more empathy as a

team as well. That certainly came up there", "the kids always recognise when the behaviour on the DVD wasn't as it should be and I think one or two of them saw it and the impact this behaviour can actually have on other people" (4).

5.2.5 Implementation PALS concepts in schools

During the interviews, staff outlined a number of practices they adapted and developed from participating in PALS. Staff highlighted how the concepts and skills taught in PALS impacted on their school.

Table 26: Implementation of PALS concepts in schools

Theme : Implementation of PALS concepts in schools	
Sub-theme	**Quotes**
School practices	"I will be recommending it to the infant teachers as an early intervention programme next year" (1). "I would have noticed that perhaps as an introduction to the school and school system that we could use it almost like screening – could they keep eye contact, could they....It would be no harm for little pockets of groups to do it" (2). "As I will be organising the interventions for the infants this year, I would hope to make it very much part of that" (1).
Classroom practices	"The greeting others in the beginning one, I think it is lovely because I am the junior infants teacher and so obviously it's a great way for breaking the ice when they come in. I would definitely use it" (8). "I would say that next year I will use the DVD in the whole class" (4). "We will be using parts of the programme when in class with

	some or all of the children" (2). "I think that maybe go over the little rules every time are quite good and something I would use in class" (8). "I will probably adapt the skills to my own lessons so it was helpful in that way" (7). "Teachers were given the staff information and so they did work on it a little bit with a full class during whatever week" (5).
New skills	"It's all about good communication and it's not only the children, I found it effective for myself" (1). "It has informed me as a teacher. It kind of gave me insights into different ways I can encourage the quieter children. In saying that, I will probably adapt the skills to my own lessons so it was helpful in that way" (7). "I have recommended it to friends of mine who would have challenging behaviours, I would say that I have used this and learnt how to deal with some behaviours" (3).

5.2.6 Future of PALS in schools

The majority of staff interviewed overall felt happy with their participation and found PALS beneficial. However, staff acknowledged a number of aspects they felt would improve PALS in order to increase the benefits for the children involved.

Table 27: Future of PALS in schools.

Theme : Future of PALS in schools	
Sub-theme	**Quotes**
Separate groups	"Maybe you could split the programme a little bit for junior infants maybe the look, listen, you know that sort of thing and then emotions for the senior infants" (2). "Half the programme maybe, the confidence side of it with the little quite ones and maybe bring in more quiet ones to build them up and then split your group and have your more louder, boisterous, confident children and do all the aggression and frustration side of it and all that" (5).
Additional skills	"There was something missing, yes maybe a little bit more on the anger I suppose would have been helpful" (2). "The three little quiet ones needed confidence and I would have liked a bit more on that, not to be afraid to speak out" (5). "Doing what your asked the first time or following the rules, maybe it could have done a bit more on that" (3).
Reinforcement of skills	"I would say they would forget easily, but I would say with practice and if it went on for longer and say if you did a review after a few months, I would say then they would get it into their heads" (5).
Time of year	"I feel that the first term would be better. It would be a lovely introduction for the first infants" (1)
Staff time allocation	"Maybe if it wasn't the class teacher running the programme but maybe another staff member in the school who had the time" (7).

5.2.7 Summary of staff interviews

To summarise, results would indicate that overall, staff members were pleased with the outcome of PALS and the programmes impact variable the variation between the two groups was not significant on the children selected for participation. Staff members reported that they felt internalising children benefited most. Staff members were also able to outline the impact of PALS on the cultures and ethos of their school, along with aspects of PALS they would adapt to further develop PALS and the children's social and emotional competencies.

5.3 Interviews with parents

Twelve parents, two from each of the intervention schools, whose children had participated in the PALS intervention, were interviewed. Semi- structured interviews were chosen in order to elicit parent's views of the PALS intervention and the impact it had on their children.

It was hoped that these interviews would highlight parent's views of PALS and whether it made an impact on their children. These relate to research questions 1 and 3:

1. Is PALS effective in promoting social and emotional competence and reducing aggressive and withdrawn behaviours in the children participating in the research?

3. Do the programme's outcomes generalise to the home environment?

5.3.1 Empowerment of parents and children

Of the twelve parents interviewed, eleven stated that they were particularly pleased with their child's involvement in PALS and expressed different benefits for both their children and themselves. The one parent that was not as pleased, felt that her child's behaviours were too difficult for PALS to be effective and more support was needed in a one to one setting to support her child's needs.

Table 28: Empowerment of parents and children.

Theme : Empowerment of parents and children	
Sub-themes	**Quotes**
Attitude towards school improved.	"He has definitely stopped crying in the mornings and that is a big thing to me to have stopped the tears. Before I would drive into the car park and the tears would start and I would drag him out of the car into school saying "I'm not going" (9). "She is happy now in the class because she knows she has friends" (3). "This years teacher says he will put his hand up whereas last years teacher said he didn't put up his hand" (4). "Yes he loves school and he talks more to the teacher now" (6).
Parents ability to reinforce skills taught	"Oh I was happy with the information because I was going through it at home and I was able to deal with all that at home myself by reading the information" (9). "Definitely the information was brilliant to have at home so that you could put it into practice" (11). "We often practised it at home and playing with other kids and sharing things out I thought it was very good" (12).
Enjoyment of programme	"She loved it you know playing with the puppets and that sort of thing. She liked it" (2). "I got leaflets home and he was all excited about it. The next thing is "mammy that's not on today" he said "I'm raging I

	had great fun", that's what he said (12). He talked about it and I would ask what he did and he would say well we watched a DVD or he played with a little girl and she is my friend now or whatever. He liked it and he really enjoyed it" (9).
Information was helpful	"I felt the information we got was quite good. It was to the point and it gave a few tips on how to explain things" (11). "It was very good for him because it was easy and simplified for them so that he could actually understand (9).
Parents and children's enjoyment at being selected	"She would be apprehensive to a degree and as I said, she is easily led and can be taken advantage of. So we were happy she was asked to be on it" (3). "It was 100% beneficial for him. I was delighted he was picked for it and so was he" (12). "He said that he really enjoyed it, and I think that's true because he used to tell me on the mornings that it was PALS today" (7). "I was happy he joined it" (10).
Parental skills developed	"It was a learning process for me also to stand back and label "well you are annoyed now because you can't do such a thing" and he would calm down then" (11). "You realise that you have to simplify it and emphasise it more in the everyday stuff" (5). "I did try it at home and it did improve my second son as well

	as I was using the language and tips from the sheets when I was telling him to calm down" (9).

5.3.2 Aspects hindering children's progress

Although parents were overall happy with the PALS intervention and their children's participation, there were aspects that they highlighted as hindering their child's overall progress. Parents expressed a number of issues and a number of themes emerged from the interviews.

Table 29: Aspects hindering children's progress.

Theme : Aspects hindering children's progress	
Sub-themes	**Quotes**
Certain skills didn't apply to children	"It was grand but some of it wasn't relevant to him, like the sharing, he know how to share and I could say he knows that" (4). "Maybe some of the earlier ones were a little bit behind. She was maybe a little but ahead of the earlier ones" (2). "I suppose maybe the very first or second one he was a little bit old for, you know maybe it's the fact that he is not a shy child" (4). "He went to Montessori and learnt some of the stuff there so he was a bit old for the programme" (6).
Certain skills still not developed	"It worked a little bit he still wouldn't have great confidence that way" (9). "I don't think his empathy levels have developed and I think that's where his problems come from" (5).

	"I think labelling is still something she still needs to work on" (2).
Lack of parental involvement	"I would have probably liked something run alongside it" (5).
	"Maybe a little bit more information sent home during the week or that might have been better because then you know what is going on. It was done more in school and if you got a little bit more information than you would know how they were getting on" (1).

5.3.3 Introverted children's development from PALS

Of the twelve parents interviewed, six were parents whose children were quite shy, timid and withdrawn. During the interviews, these parents highlighted different habits and traits their children had developed from being selected on the PALS programme.

One of the sub-themes highlighted, related to the main skills children are taught during the programme. Of the ten sessions that were specifically taught, parents of the introverted children stated that their children were now using the following skills when interacting with others:

Bar chart 2: Skills most developed by internalising children.
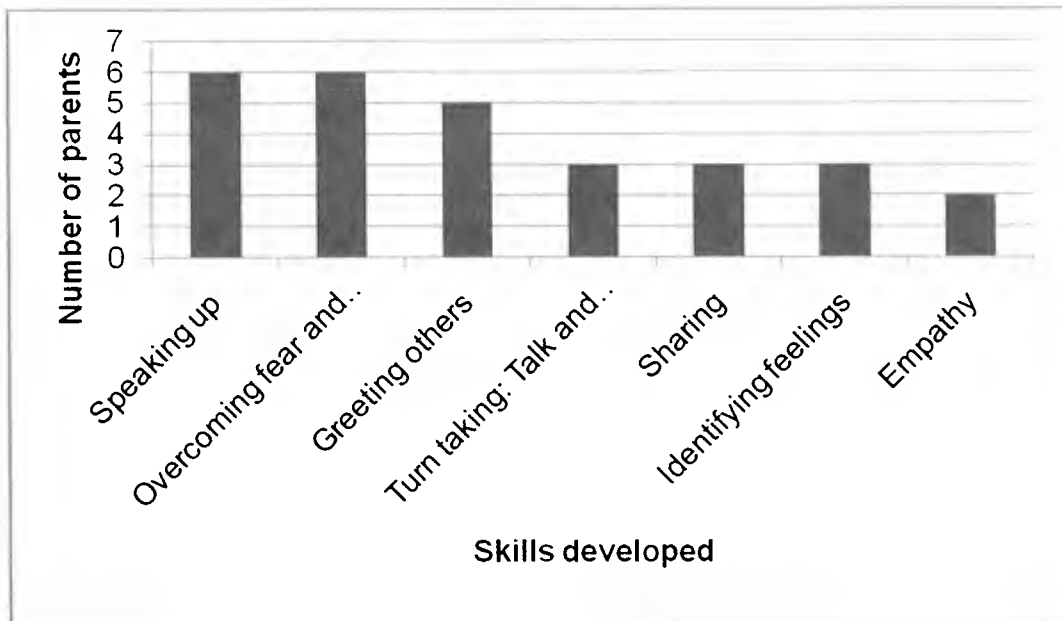
Six parents stated that their child was now speaking up more: ".I was shocked as to how he just came out of himself and was comfortable in talking to him" (8). All six parents also stated that their child had developed skills in overcoming fears and anxieties: "Now the tears have stopped and he will stand holding my hand until he sees the teacher coming and then he will go to the teacher, the tears have stopped which is brilliant" (9).

Five parents stated that their child had developed their skills in greeting others such as saying hello and making eye contect: "if someone I knew said hello, he wouldn't say hello. Whereas now he is saying hello to them before I would" (8)

Three parents of the six stated that their child benefitted from the listening skills taught: "He has often said to me that in school that if somebody is talking he is not to interrupt, you have to wait and listen, wait until somebody else is finished and then ask your question, you don't interrupt" (1). Sharing with others was also outlined by three parents of internalising children: "Sharing definitely, he is a lot better at home" (9).

Three parents outlined identifying feelings: "but in general she is starting to know how she feels and she is starting to read body language" (3).

Two parents identified their child as having developed their empathy skills: "She shows fierce kindness to her teacher. Asking if she's alright, coming over to hug her or kiss her. She would be very emotional that way. But she is now more open that she can talk about it" (3).

In addition to the skills developed that applied directly to PALS, parents of the internalising children also expressed other areas of development in their child.

Table 30: Introverted children's benefits from PALS.

Theme : Introverted children's benefits from PALS	
Sub-themes	Quotes
Ability to interact with peers in school	"Usually it would be him and his cousin, but now I hear him talking about others" (1). "there is a special needs assistant in with a student in his class and he went to her the whole time, he would walk around to her and depend on her an awful lot, but now he is mixing with and beginning to play with other children" (9). "I find that he interacts more with kids now. He started to play football and interacted with more kids which he never did before" (4).
Mixing more outside of school	"When we had someone to paint our house he was very comfortable with him and chatty" (8). "When we go to a friend's house and there are other children

	there he will play with them" (9). "Before he would shy away but he would interact better even with adults and say kids of his own age" (1). "He wouldn't mix with people and other kids and I would have to go over with him, but not anymore, now I could leave him anywhere now to get minded and he will get by now" (12). "To anybody else that came into the house I said hello and he would now. He actually did it was a great achievement for him because he would never ever have said hello to anyone before" (4).
Confidence	"I suppose confidence wise definitely it has helped outside the home environment" (9). "I was shocked as to how he just came out of himself" (8). "She is more confident, she's like can I do that, can I play for that and things like that. She is stepping out more (3). "He is very adventurous and confident now" (12).
Assertiveness	"When she sees something that is not right she will say it" (3). "I saw him once when they were all wanting a drink of water and he wanted a drink of water but he would stand back and he might have said "can I get a drink" and if he didn't get it he would stand back, whereas now if he wanted it he will keep pushing to make sure that he does get it" (1).

5.3.4 Externalising children's benefits from PALS

Six of the parents interviewed had children selected for the programme as their children were presenting with externalising behaviours. Of the six parents interviewed five were very happy with their children's involvement, one parent agreed that although she was happy with aspects of the programme, she felt her child's behaviours would need further support and intervention. Of the six parents interviewed, they highlighted the following skills their child developed that were specifically related to the ten sessions.

Bar chart 3: Skills most developed by externalising children.
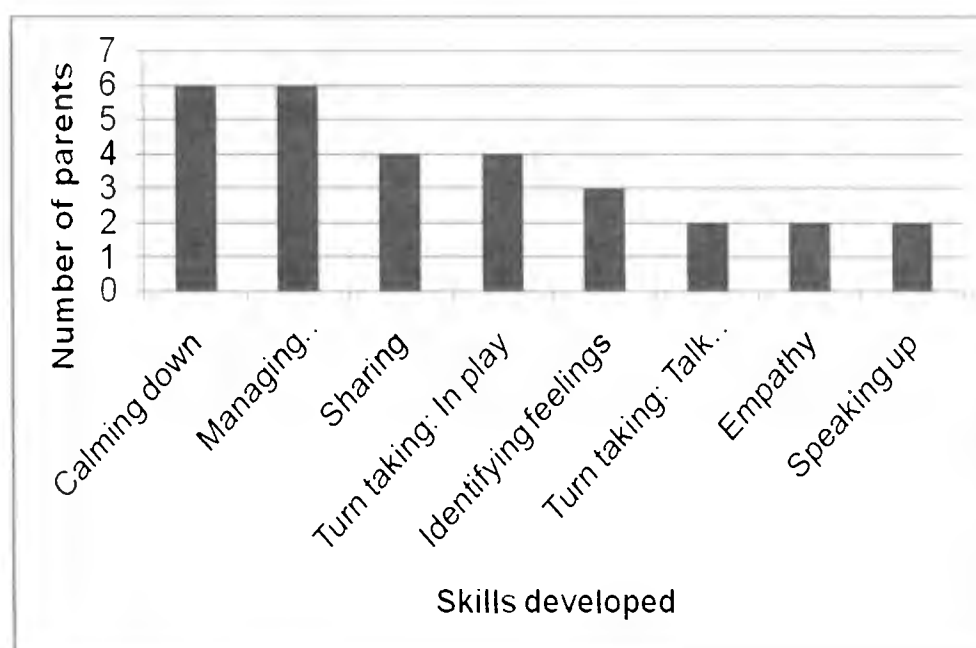
Calming down was outlined by all six parents as a noticed improvement in their child's behaviour: "He would have got angry then, but now he could storm out of the room and come back in two minutes later and say "if I wait till after dinner, can I have them then?" and so I know he has gone out the door and had a little think and then come back" (5). Along with calming down, managing frustrations was also outlined as skills developed in six children: "He gets cross when he doesn't get the ball or they don't throw it to him and he has learned to accept that" (6).

Sharing was outlined by four parents as having improved: "Now she would say its fine you can have it" (2).

Turn taking in play was outlined as having improved by four parents: "I do think she is taking turns and waiting more I noticed that definitely she is taking turns more" (3).

Identifying feelings was outlined by three parents as a skill developed: "he is starting to think about how he is feeling because I don't think he ever really did that, he just reacted and so he is starting to stop and think about how he is feeling now" (5).

The turn taking: talking and listening was outlined by two parents as having improved: "The look, listen and learn one stuck out with him. That's the one he remembers most" (11). Two parents also outlined empathy as a skill developed: "think about what they told him and he will share then - empathy, definitely, he just learned, in the past week I had a terrible cold and he keeps asking me am I alright" (6).

Two children who were described by their parents as speaking up more in school: "he loves school and he talks more to the teacher now"(6).

Externalising children were also outlined by their parents as developing additional social-emotional competencies.

Table 31: Externalising children's benefits from PALS.

Theme : Externalising children's benefits from PALS	
Sub-themes	Quotes
Taking account of	"The girls in the class were finding it hard. He might jump up and say "I love you" or something, push them, hug them, that

others	sort of thing. Nearly every day that was happening and I must say in the last two months I haven't had any incidents" (7). "She is an only child as well so she was always the centre of attention. But now she lets someone else have a go" (2). "I think the fact that it was a small group and having to interact with a small group that he wouldn't normally do and to think about them as well as himself" (5).
Behaviour at home	"There was a definite marked improvement in his behaviour" (7). "Because he is two years older than his brother he would have just grabbed as he is stronger because his brother was saying no but now he would just say "can I have this" (5). "She seems to have levelled out and calmed herself. She just seems more relaxed (2). "At home when I would be on the phone I would put my hand up and say shh and he would actually stop now" (11).
Behaviour in school	"She said sports day went well, there was no problem with that. They were the sort of things she would ring about before" (7).
Mixing better with peers	"Just in mixing with her friends, I felt it helped her. I felt it has helped her mix better" (2). "He gets cross when he doesn't get the ball or they don't throw it to him and he had learned to accept that" (6).
Concentration	"The programme seems to have brought her back down a

	little she seems to have focused herself a little. Her concentration is very weak and this has improved" (2).

5.3.5 Future points to better PALS

Of the twelve parents interviewed, a number of them stated that they felt certain aspects would allow an improvement and better outcome for both the children and the parents themselves.

Table 32: Future points to better PALS.

Theme : Future points to benefit PALS	
Sub-themes	**Quotes**
Parental involvement	"I would have liked to have seen how PALS worked in the school and yes I would have liked to have been involved" (8). "I think I would have made more effort if I went to the group and took on board more of what they were doing" (7). "I probably would have liked something run alongside it". If the opportunity was there I would have been involved (5).
Time of year	"I reckon if another programme was being offered again and I was to make a suggestion I would say to try and do it at the beginning of the year when the children are a little bit more settled" (7).
Information day	"I was learning information as it went along but something maybe beforehand. Maybe a meeting to run through what we should expect" (2).
More information during participation	"Maybe a bit more information sent home during the week or that might have been better because then you know what is going on. It was done more in the school and if you got a little bit more information than you would know how they

	were getting on" (1).
	"As well as the leaflets that came home perhaps if there was a little note in it" (5).

5.3.6 Summary of parent's interview

The findings of the interviews with parents would indicate that parents were generally happy with their child's progress. Through the interviews, parents were also able to outline aspects of PALS and its implementation that impacted negatively on their child's progress. Parents were also able to outline possible future suggestions that would increase the impact of PALS and parents overall ability to develop their child's social emotional competencies.

Chapter 6
Discussion and conclusion

6.1 Introduction

This research set out to explore the PALS programme and the impact it had on the children who participated. Internalising and externalising children were highlighted by PALS as needing to develop appropriate social and emotional competencies. A number of research studies highlight the fact that children who fall into these two groups are most at risk of failing to develop peer relationships (Cooper et al., 2003).

This chapter will discuss the results found in chapters four and five in relation to the five research questions while drawing on relevant literature. It outlines how this research has implications for future practices within primary school settings in Ireland. It will then look at the limitations of this research followed by possible suggestions for future research. It also outlines recommendations for schools, PALS and for educational psychology practice. This chapter finishes with the final conclusions.

The aim of this research was to examine the effectiveness of the PALS programme in a number of primary school settings in Ireland.

6.2 Discussion of research question 1

1. Is PALS effective in promoting social and emotional competence and reducing aggressive and withdrawn behaviours in the children participating in the research?

Although the data was collected separately using quantitative and qualitative methods, every method of data collection was applicable to research question one.

Cooper et al (2003) state the aim of PALS is to provide children with the skills necessary to interact positively with others with a view to decreasing negative/unwanted behaviours. Results from the SDQ indicate a significant difference between the intervention and control group for hyperactivity, conduct

problems, emotional symptoms, and overall difficulties. There were no differences between the intervention and control group in peer problems and pro-social skills. Results from the CSBQ indicate a significant difference between the intervention and control group for co-operation and conformity. Data analysis for the CSBQ, SDQ and observation schedule indicates that the externalising children improved their co-operation and conformity whereas, there was only a slight increase for the internalising children. For the internalising children, there was a considerable decrease in emotional symptoms but only a slight decrease for the externalising children. Thus indicating areas where either internalising or externalising children benefitted. However, there were no significant differences between the internalising and externalising children suggesting that PALS benefited the internalising and externalising children as an overall group.

One of the negative aspects in the findings is that peer problems, pro-social skills, (in the SDQ) peer sociability and empathy and pro-social skills (CSBQ) did not indicate differences between the control and intervention group. This indicated that staff reports did not find a great improvement in the children, when in free play. A possible reason for this finding may be that staff may have identified the skills developed to the classroom situation and not to the behaviours seen during free play in the playground. Therefore, skills such as interacting positively with peers may not have been as apparent as the behaviours that improved in the classroom. The reason for this is that findings from the interviews and observation schedule report positive increases in peer interactions.

There were no notable differences in any of the scales for the control group, although in certain cases there were marked changes in the intervention group. The CSBQ indicates notable trends in openness and independence and concentration for the intervention group indicating that PALS had a positive impact on this area.

Another factor which may have impacted on the scores obtained in the SDQ and CSBQ is that the skills addressed by the rating scales were not an explicit part of PALS and therefore staff may not have attributed changes in children selected. For example, questions asked relating to pro social skills on the SDQ overlap with empathy and children's ability to identify feelings (considerate of others, feelings, kind to younger children, volunteers to help others) as opposed to how they interact with others. Empathy was a skill outlined by staff and parents as not fully developed in the children selected and a skill that children found difficult to comprehend. This may have impacted on the scores obtained for peer sociability (SDQ) and empathy and pro-social skills (CSBQ). Therefore, PALS may benefit from examining these concepts and developing more age appropriate methods of teaching such competencies to the children selected for participation.

During the identifying feelings session children are taught to identify anger and sadness by looking at facial expressions in photographs, postures and tone of voice. Empathy is taught by teaching children how to respond to sadness, fear, anger and happiness, with no input on teaching the meanings of these emotions prior to asking children to identify them. As children selected for participation are between the ages of three and six reading these expressions would be a difficult concept. By teaching more basic concepts such as labelling different feelings and emotions, prior to asking a child to recognise these may be more beneficial and age appropriate.

Data was collected from a variety of sources in order to account for the possibility of expectancy effects amongst the staff that completed the forms. Information gathered from the observation schedule and parent and staff interviews can be drawn upon to gain further insight into why certain skills may not have significantly improved, according to the SDQ and CSBQ. It is necessary to outline however, that staff and parent reports may also have been more positive during the interview with parents and staff reporting more positive results as both groups volunteered for participation. It is also possible that these parents may be more positive in

terms of the PALS programme as staff may not have selected parents with negative perceptions. However, by examining the overlaps and conflicting findings of all data collection it may account for differences in the results.

With regards to the qualitative data gathered in relation to research question one, parents reported that they found their child's behaviours (both internalising and externalising) had considerably improved through the skills taught on the PALS programme. Parents of externalising children also reported an increase in competencies such as their child taking account of others in play, improved behaviours at home and in school. Interestingly, parents of externalising children, also reported an increase in concentration (hyperactivity was also an area that significantly decreased in the SDQ). Although there were no significant differences between internalising and externalising children's hyperactivity, there was a notable increase in externalising children's co-operation and conformity according to the CSBQ, which would benefit this group in a classroom situation. On the other hand, parents of internalising children noticed a marked improvement in their child's confidence, assertiveness and ability to mix with others. Results of the SDQ noted a considerable decrease in internalising children's emotional symptoms.

During the interviews staff reported that although both groups of children benefited from PALS, seven of the eight staff felt that internalising children may have gained more from participation. Although not evident in the quantitative results, staff interviews reported reasons were due to the size of the group, internalising children's behaviour during sessions, and the fact that these children had come to PALS without previously having the majority of the skills taught. Staff felt that the internalising children were generally quieter and tended to take in more information, whereas the externalising children were not as focused when new skills were being taught during the sessions. Staff also reported that many of the externalising children knew the skills being taught but were not interested in putting these skills into practise.

Information gathered from parents indicates that PALS did have a positive effect on decreasing unwanted negative behaviours in externalising behaviours e.g. parents reported that their child developed skills such as managing frustration and calming down. This raises the possibility that staff may have negative perceptions of the children presenting with externalising behaviours as they felt that these groups verbally did not make as much progress even though their ratings of children's behaviour on the SDQ and CSBQ would indicate differently. Research carried out by Cooper et al., (2002 and 2003) and James and Mellor (2006) suggests that PALS had a positive impact on decreasing problem behaviours. In this research, although findings suggest a decrease in problem behaviours, it may not have been as significant as outlined in James and Mellor (2006) who suggest a 98% significant decrease in negative behaviours.

The themes outlined in the interviews show that staff felt internalising children benefited more from participation as the externalising children already had most skills that were taught in PALS but needed more input on managing and controlling their anger as outlined by staff, although findings in the quantitative data would argue this, as there were no significant differences between the internalising and externalising children. Reasons for externalising children not benefiting as much, according to staff interviews were due to this group's lack of co-operation during sessions and ability to concentrate. This reflects current research outlining that staff working with externalising children often respond to these children on a continual basis, highlighting these children's negative traits (White and Kistner, 1992). Although the results would indicate that overall both internalising and externalising children benefited as a group as there were no significant differences between the two. The results obtained in the behaviour scales indicate that those involved in the intervention showed marked improvements in their conduct problems, hyperactivity, emotional symptoms, ability to co-operate and conform and overall difficult behaviours decreased. Also, according to staff and parent reports, there was an increase in children's ability to manage frustrations and calm down.

The increase in sociability according to parents, staff and the observation schedule reports different findings from the SDQ and CSBQ suggesting the possibility that questions asked in the forms may not have picked up on the competencies children were taught. Reasons for this relate to staff and parent reports which indicate marked improvements in positive dispositions, ability to mix with others and form new friendships which are not outlined as areas of significant improvements in the SDQ or CSBQ. Parent reports also indicate positive improvements seen in the home place, which may not have manifested in the classroom situation and therefore may not have been picked up in the behaviour forms. Parents of externalising children also reported a marked improvement in their child's ability to interact and take account of other's needs. The results of the observation schedule also indicate a significant difference between the intervention and control group's positive behaviours and ability to mix with others, thus indicating that the skills outlined in the SDQ and CSBQ i.e. ability to interact positively with others, may not have identified these skills. It is also possible that staff members may not have seen these skills manifest in the classroom situation as opposed to the playground and therefore may not have attributed the skills developed to the behaviour forms.

6.3 Discussion of research question 2

2. Are the skills taught effective and will these skills be used when children are observed during free play?

Results from the observation schedule indicate a significant difference between the intervention and control group in relation to solitary play, social play, positive behaviours, active participation and passive participation. There were no significant differences in parallel play, negative behaviour or neutral behaviour. There were also no significant differences between internalising and externalising children. However, results indicate that overall children who participated in the interventions ability to interact positively with others and maintain social interactions increased positively during free play. This concurs with findings outlined by Dunn (2004) who

suggests that when children who initially find it difficult to form friendships, go on to develop positive relationships, this development helps to further increase their social and emotional competencies.

In terms of negative behaviours there were no differences between the intervention and control or internalising and externalising groups although there was a notable decrease for the intervention group. One of the factors which may account for the lack of significant findings between the intervention and control groups is that the standard deviations, as seen in the observation schedule results for positive behaviour, solitary play, parallel play and negative behaviours, would indicate that the scores are widely dispersed. This is possibly due to the great discrepancies in the behaviours observed. This is likely to have impacted on the overall results obtained for the observation schedule. A minority of children selected for PALS would have presented with more extreme externalising or internalising behaviours in comparison to the general group and this would account for variability in the observation schedule. For example, a minority of children would have presented with higher levels of negative behaviours than the majority of children and this would impact on the standard deviations. Another possibility which may have impacted on the results obtained for the observation schedule is that the number of observations per child was completed in a short time in one context i.e. the playground. It is possible therefore that the wide variability may reflect the lack of sufficient observations of individual children across activities, e.g. externalising children would not always show negative behaviour especially not when engaging in solitary or parallel play, although this might be observed in conflict based situations. Some children would have been observed in a provocative context whereas others may not have been and hence a wide range of results

The increase in social play and positive behaviour relate positively to research outlining that children with low peer acceptance show difficulties joining on-going play or sustaining play episodes because they observe the peer play rather than initiate play, or else they are likely to show aggressive behaviour during play and

so are rejected by their peers (Putallaz and Wasserman, 1989; Hwa Choi and Kim, 2003). However, findings would suggest that the children involved in PALS utilised the skills they had developed and were able to maintain play amongst their peers.

Data gathered from children's parents outline that both internalising and externalising children have used the skills taught in PALS when mixing at home. Parents of internalising children reported an increase in their children's friendships, assertiveness and confidence in mixing with others. Parents of externalising children on the other hand reported that their children were now taking account of others in play and had improved their behaviour both at home and in school and their concentration also improved. Both of these outcomes are positive findings. This information also conflicts with the argument staff made regarding externalising children not benefiting as much, as both internalising and externalising as a group significantly increased in their ability to interact positively with others. This also conflicts with findings from the quantitative chapter which highlight that there were no significant differences between the internalising and externalising children.

6.4. Discussion of research question 3
3. Do the programme's outcomes generalise to the home environment?

The importance of liaising between home and school was expressed during this research as an important area in developing the social skills and competencies of the children who participated. Results indicate that parents who had received ongoing weekly information outlining the social and emotional competencies their child had been taught were able to reinforce these skills at home. Parents were able to acknowledge the skills their child had developed through PALS and the impact this had made in the home environment.

All parents interviewed reported marked improvements in their child's social and emotional competencies which they noted in the home environment over the course of the PALS intervention. Parents of introverted children expressed that the main skill developed for their child was speaking up and overcoming fear and

anxiety, greeting others, interacting more with peers and were more assertive. Parents acknowledged that as a result of these competencies their child had developed their confidence both at home and in school. In comparison to the introverted children, parents of the externalising children expressed that calming down and managing frustration, sharing, taking account of others in play, improvement in behaviour both at home and in school were the main skills developed. Both groups of parents reported that through information being sent home, parents were able to reinforce the skills taught and apply these to all children in their family.

An interesting finding was that parents acknowledged through their child's participation they themselves were able to develop their parenting skills. Parents reported that they too developed skills in teaching their children pro-social skills. Studies by Melhuish et al., (2001) and Desforges and Abouchaar (2003) amongst others indicate that parents' ability to teach children social and emotional competence has a bearing on a child's adjustment to their peers and also their educational attainments. Parents in this study were able to acknowledge that by utilising the skills outlined in the weekly information sent home, they were able to develop appropriate language and means to interact with their children and develop their skills. One negative aspect was that parents reported that they would have benefited from more involvement whether it was provided through a parenting programme, more information being sent home or even an information day. This has implications for future interventions.

Another interesting finding was that parents expressed their appreciation and their child's appreciation for being selected as PALS participants. Parents also reported their child and they themselves felt empowered by being selected and as a result of this their attitude to school improved. This conflicts with research by Webster Stratton et al., (2001) who outlined that parents whose children are in need of social skills training find it difficult to participate due to life stress, lack of motivation and psychopathology or work. However, it supports research highlighting the

importance of promoting positive family and community experiences for young children during the early years (Mc Cain and Mustard, 1999).

Parents did report different aspects which hindered their child's progress in PALS. Time of year running PALS, skills being too advanced and certain skills not applying to their child were outlined as the reasons for progress being hindered. In relation to the time of year, parents felt that, had PALS been run in September when their child was more settled, it may have been more beneficial. Parents also felt that emotions were a difficult concept and that their child would need further support in order to develop in this area.

6.5 Discussion of research question 4
4. Do staff perceive the programme as beneficial for the children involved?

Results of the staff interviews indicate that overall staff were pleased with their participation. Staff reported that the children selected for participation benefited from developing specific social and emotional competencies.

Although mixed findings have been outlined, staff reported that through the use of the SDQ and CSBQ, PALS has been effective in decreasing negative unwanted behaviours and increasing positive social skills. Staff reported several other aspects that have led to improvements in developing social and emotional competence in children selected.

In relation to all children every staff member outlined greeting others as a skill developed. Staff also reported sharing, taking turn listening and talking, managing frustrations, calming down turn taking in play, speaking up and overcoming fear and anxiety as the main skills developed. Interestingly, the second, third and fourth skills outlined as having improved significantly, apply to mostly to the externalising children which again conflicts with reports stating that externalising children did not practice the skills taught.

With regards to all children selected, staff noticed improvements in children's ability to interact with others and initiate and maintain play. Staff maintained that the majority of skills taught were beneficial and required by children in order to develop their social and emotional competencies.

Staff reports indicate that the implementation of the programme was straightforward. One of the sub-themes highlighted that the use of a script along with the songs, DVD and use of puppets allowed children and staff to remain motivated and interested throughout the ten sessions. In particular staff felt that the children really responded to the puppets. This is consistent with research by Webster Stratton et al., (2001) which shows that children are more likely to respond to puppets than therapists when being taught appropriate social skills and that these children are more likely to demonstrate the actions of puppets. It also supports Cooper et al's., (2003) research reports that PALS is an easy to use, simply designed programme which is accessible to staff working with young children.

Studies carried out in relation to social skills interventions have highlighted the importance of teaching to children's strengths and cognitive abilities (Gresham, 1981). Staff reported that although externalising children found it difficult to remain focused for long periods of time, children selected were generally able to maintain interest throughout the sessions whilst learning new skills as the teaching methods were clear with straight forward instructions.

One of the draw backs in developing children's social and emotional competencies was that certain sessions had a lot of information to teach and children may not have developed the skills taught. This was particularly reported in relation to emotions, which was also outlined as a difficult concept by parents. Seven out of eight staff felt that children were too young to understand emotions and empathy.

Both parents and staff reported emotions and empathy as an area the PALS programme would need to acknowledge and develop as the programme is based on children aged three to six. The majority of children selected for the PALS programme were aged between four and six. As staff members outlined, some children aged six were unable to understand the concepts of emotions, hence it would therefore be very difficult for a three or four year old child to understand. Much research to date examines how and when children learn to recognise and understand the feelings of others. Research has highlighted that between the ages 3-6 children begin to develop knowledge of labelling and recognising certain emotions such as happy, sad or angry (Mortimer, 2001). However, studies show that socially anxious children, and children with externalising behaviours, have difficulty developing and acknowledging these emotions (Melfsen and Florin 2002, and Cooper et al, 2007). For the children selected, the majority would have presented with traits similar and found it difficult to label their own feelings and recognising others. Becoming aware of their own emotions and the emotions of others is often a difficult time for young children and therefore the use of different methods in PALS or extra sessions as outlined by staff would have been beneficial. Learning to deal with these emotions and understand others is an important factor in early social adjustment (Mortimer, 2001).

Therefore, although social competencies may have significantly increased, emotional competencies may have increased slightly but PALS could improve this area by providing children with more appropriate developmental activities prior to teaching them how to recognise emotions and feelings in others.

6.6 Discussion of research question 5

5. Does the programme make a positive contribution to the schools, their culture and their practices?

Research has been carried out in relation to managing negative and unwanted behaviours that are seen in classrooms. Teachers working with internalising and

externalising children often express their concern for both groups and these groups are often referred to outside professional services for intervention. Research on teacher stress has reported that classroom disturbances through externalising behaviours causes teachers to lack confidence, impact on classroom management and impact on the educational outcomes on the children themselves (Ross et al., 2007). In order for staff to feel competent in managing such behaviours it is necessary that they feel equipped to do so. Staff reported that through participation, they have developed skills necessary in dealing with such behaviours and have therefore adapted certain skills taught to their classroom practices. One of the interesting findings that emerged from the interviews was that staff reported through their involvement with PALS, that they themselves had developed expertise in dealing with and responding to behaviours of both internalising and externalising children. Staff reported that the use of PALS and skills taught to children have been beneficial in helping them to communicate effectively with other children. This has also been outlined by parents as an area developed. Prior to staffs participation in PALS they expressed concerns relating to dealing and responding to such children. This was also outlined in the introduction chapter and literature review as a reason for completing PALS in Irish schools and an area of importance for child adjustment in school (INTO survey, 2008).

Staff reported several positive changes PALS had made to both their classroom practices and to their schools practices. Reponses to the classroom practices outline that the skills developed through PALS were being incorporated into their classroom. Although staff did not run PALS in the classroom they reported that aspects of the programme were being utilised and adapted to every day practices. Another sub theme that emerged in staff interviews was PALS is a tool staff members will use in screening children on entry into their school. Staff reported that PALS could be used in order to teach all children social and emotional competencies in their first term in primary school. This would indicate that PALS had a positive effective in demonstrating to staff the importance of developing and teaching children appropriate social and emotional competencies.

The culture and practices in all schools play a vital role in how children are encouraged and how they develop and progress. PALS research found that staff expressed difficulties in their school in relation to finding time to carry out PALS sessions in their school. Staff also reported difficulties in finding another staff member to cover their classroom whilst PALS was taking place. Other school commitments were also highlighted as a difficulty in running PALS. Lack of support was highlighted by staff in running PALS. Early interventions have been outlined as been best suited to being carried out in the school environment as this is the place children will spend a lot of time. It is also the place where internalising and externalising behaviours are most apparent due to children mixing with large amounts of peers. However, one of the draw backs in this research and also an interesting finding is the lack of support teachers reported they experienced when running PALS. Although staff expressed that they felt they had developed skills in responding to difficult behaviours, their difficulties in finding time to run PALS could be seen as a negative aspect in schools managements.

Staff, similarly to parents reported that time of year was difficult in running PALS. Reasons for this were other school commitments and activities being run. This information is useful and can be considered when running future PALS programmes.

6.7 Future of PALS

Although not outlined as a research question one theme developed through interviews with staff and parents was how PALS could be improved. Therefore, it was felt necessary that these should be outlined and discussed.

Staff reported that they were pleased with how skills were taught and ideas gained from the sessions but they felt that more specific sessions aimed at teaching certain skills would have been beneficial for both groups. In particular staff felt that they would have liked more input on teaching internalising children skills such as speaking up and more skills on managing frustration for the externalising children.

127

Staff also reported that PALS could develop in many different ways in order to improve participation and outcomes for both children and staff. The idea of running separate PALS groups for the internalising and externalising children was highlighted. However, PALS authors found through their research on the programme that the mix of internalising and externalising children is beneficial for both groups (Cooper et al., 2007). Results of the intervention would indicate that children selected did not fail to develop skills due to the mix of children and that internalising children began to speak up more and grew in confidence as they became more confident in the group as reported by staff members. Parents also reported that their child had become more aware of others through participation. The mix of these two groups has shown in this study to be beneficial as it has allowed internalising children to speak up amongst their externalising peers and has also taught the externalising children to take account of their internalising peers.

Staff reported the possibility of splitting PALS in half and teaching younger children skills such as greeting others, turn taking, sharing and asking for help and teaching older children the second half relating to emotions, overcoming fear and managing frustrations. Reasons for this were that staff felt certain aspects of PALS were too advanced for the younger children and two childish for the older children. However, the results would indicate that all children benefited from the earlier skills taught. Results from parents indicate that the internalising children, although benefited from all PALS sessions, in particular benefited from the skills taught in the first half of the programme, in particular greeting others. Whereas, the externalising children mostly benefited from skills such as sharing and turn taking which are also taught in the first few weeks. As a result of the findings in this study splitting the groups or teaching skills to different children may not be beneficial to the children participating in PALS as both groups and ages appear to benefit from each other in their stages of development or personality traits.

One of the important aspects of PALS is for the skills taught to be generalised to all situations, therefore it stresses the importance of both school and home teaching the skills to children. However, parents did highlight that although they had information sent home the use of an information day or parenting programme run alongside PALS would have been beneficial. Although this was not a part of the PALS research in this intervention due to time constraints it is an idea that would be of particular importance in later programmes. Cooper et al., (2007) outlines that although PALS does have benefits when run on its own, parents may benefit from a programme or parenting group. For the purpose of increasing the positive effects and outcomes for the children involved, it may be beneficial to run a similar programme or information day in order for parents to have a greater insight into the programme and how to specifically teach the skills taught to their child at home. One of the problems highlighted by research when it comes to parental participation in parenting programmes is that attendance in such programmes is often weak (Webster Stratton, 2001, Cooper et al., 2003 and Boyle et al., 1999). Although a number of parents expressed that they would have attended a programme had it been set up and run, many parents reported that they would not have had the time to attend due to work or other commitments.

It is important to note that parents were selected by staff for interviews in order to get parents who were most likely to attend. The parents selected may therefore have been more willing than others to participate and give time for parenting programmes. It may be difficult to recruit those parents who were not selected for participation or who may not have time to attend. However, the use of an information day or programme is an area that would benefit parents in future PALS programmes and may also have benefits for future research.

6.8 Strengths and limitations of the research
6.8.1 Strengths
One of the main outcomes in carrying out this research is that PALS has equipped staff in Irish primary schools with skills needed to support those children who find it

difficult to interact positively with peers. In doing so it developed and empowered both staff and parents involved.

One of the strengths of this research design is that the sample is representative of the general population. This study was based throughout a region in Ireland. Schools were selected randomly and assigned to either intervention or control group based on a ranked system. All schools were similar in their demographic backgrounds. These schools are representative of a typical primary school throughout the country and therefore the sample is representative of the general population.

Another area of strength of this research relates to the size of the sample as other research relating to PALS had small samples of participants. Also, the use of a control group who were later given the opportunity to run the programme in their school enabled all schools to receive the intervention.

Prior to carrying out research and during data collection the educational psychology service offered support and advice to each school involved in the programme and best practice regarding implementation of PALS. All concerns expressed during the intervention and data collection stages regarding certain children selected for participation were brought to team meetings and schools were informed that any child still presenting with concerns regarding his or her behaviour could be referred to the educational psychology team through their school. This enabled children selected for participation to receive support where needed and acknowledged ethical considerations.

The mixed methods approach used allowed for a further exploration of PALS and for a number of perspectives to be gathered. Previous research in relation to PALS (James and Mellor, 2006) found that PALS had a 98% effectiveness however data in these studies was only gathered using behaviour rating scales. The use of the

observation schedule and semi-structured interviews enhanced further insight into PALS and the ability to explore its strengths and weaknesses.

This research adds to current research highlighting the importance and effectiveness early years interventions have on young children and the development of their social and emotional competence. It has also empowered schools in Ireland to further acknowledge the importance of teaching children social and emotional competencies and acknowledge the impact this has on children's overall development. It has also, as outlined by staff equipped them with skills in teaching children appropriate social skills and how to deal with internalising and externalising behaviours.

6.8.2 Limitations

In order to examine the effectiveness of the PALS programme a number of strategies were utilised in order to gather information. Although all forms of data collection had their strengths they also had limitations which impacted on the results obtained.

The use of the observation schedule enabled children to be viewed during free play and was a useful tool in gathering information relating to whether PALS was effective when children were not in a structured setting. While using this approach allowed for ethical data collection observations of children were carried out during free play in the school yard and as a result of this time was limited regarding observations made per child. The data gathered for each child was therefore limited and can only be seen as a snapshot of the child's overall development as opposed to an insight into each child's behaviour. Behaviours observed may have been significantly increased as a result of this as opposed to how each child behaves or interacts generally.

For the purpose of this research two behaviour forms were used when gathering data both pre and post PALS. These forms were used to distinguish whether PALS

had a positive impact on increasing pro-social skills and decreasing negative/unwanted behaviours. The idea of using both tools was to strengthen the outcome and reports by staff. The SDQ is a widely used tool for measuring positive attributes and negative symptoms in children. However, one of the limitations of the SDQ is that questions relate to children with psychopathology, therefore some questions may have been extreme for the participants selected. The CSBQ was selected because in comparison to other behaviour rating forms it focuses more on positive attributes. The positive aspect of using this form was that it provided a measure of children's ability to socially adjust to their environment and was also age appropriate. Although this scale was devised for the EPPE project (Sammons et al., 2003) with factor analysis carried out in order to outline the six main factors, there were no scoring forms which made it difficult to interpret results. Also, there are no studies reporting the validity and reliability of the scale as it is not a widely used measure. Another negative aspect of using this form is that it was difficult to gather information from its source in relation to scoring and analysing data, therefore, prolonging analysis of the data.

As behaviour forms were not completed by the parents it limited triangulation of the data. All data gathered was obtained by the staff only, therefore it was not possible to triangulate the findings from the parents and staff. Prior to conducting the data collection, two staff members from each school were asked to independently complete the SDQ and CSBQ, however staff members later reported that they completed forms together. This could also have impacted on the reliability of the results obtained from both SDQ and CSBQ.

The limited follow up period between the pre and post measures is also a possible constraint. It may have been more beneficial to complete more post intervention data collection in order to establish the medium to long term effects of PALS. This would have allowed a comparison to be made between the immediate and long term impact of PALS and thus help establish whether PALS is effective long term. However, due to time limitations it was not possible to carry out such data

collection for this study. This would be a very interesting implication for future studies of the PALS programme.

6.9 Suggestions for future research

The results of this study have highlighted a number of areas that require further investigation.

In relation to the research design, the use of more prolonged observations per child would allow for more insight into each child's behaviour. The possibility of a second observer may allow for longer observations per child. This would also enable the researcher to compare notes of each child, thus enabling more valid and reliable results.

Future research could consider collecting behaviour rating scales from parents, thus allowing for triangulation of data. Although parent's views were gathered through the semi structured interviews, the use of the behaviour rating scales could be valuable in examining the overall effectiveness of PALS.

In relation to the semi-structured interviews, parents and staff were fortunately very forthcoming in their views and opinions of the children and the programme. Through the interviews staff and parents acknowledged that empathy and emotions were a difficult concept for the children to develop. Only one staff member outlined this as a skills developed. Many staff felt that this skill was particularly difficult for the children to learn as they were not developed enough to understand these concepts. Future research could explore this concept further and examine in more detail the reasons why children failed to develop this competency.

In relation to the PALS programme and its effectiveness in schools it may be valuable to further explore the impact of PALS on the children in the classroom. As the majority of the literature review outlines that those who fail to develop and adjust socially in school are more likely to find it difficult to achieve academically

(Sim et al., 2006). Future research may explore the impact PALS has on children in the classroom situation and establish whether it impacts positively when they are in the classroom setting.

Another interesting study could examine the effectiveness of staff methods and approaches when teaching PALS sessions. Due to time constraints it was not possible to analyse or gather data in relation to teaching practices in weekly sessions. However, this is an important factor in running any intervention. Although staff attended a training day and were given a script, additional practices such as their relationship with the children, their level of enthusiasm, impacted on the outcome of the PALS. In the PALS book, staff are asked to reinforce skills taught in each session by incorporating these skills into everyday routines, however it may prove valuable to gather information in relation to teaching practices and the outcome of the participants.

The use of a follow up programme to distinguish the medium to long term impact of PALS could also prove to be beneficial. This would establish whether PALS impacts on the children's development when not immersed in the programme itself. It would also establish whether the skills are effective and maintained when they are not being reinforced both at home and in school.

Future research could also explore the impact PALS would have if it is run alongside a parenting programme and the impact this would have on the children selected. Although parents outlined that they would have liked an information day or parenting programme a study exploring whether PALS has more impact on children when their parents are involved also could prove very interesting. As outlined in the literature review, there are many aspects in a child's environment that can cause or hinder their social and emotional competencies (Bayer et al., 2008). Studies have outlined that parental influences play a major part in how a child learns to interact with others. Although there are a number of factors e.g. biological, death in family, illness of parent which are difficult to control, there are

also a number of factors that can be supported e.g. parenting style, parenting discipline and parental influences. Supporting these factors through a parenting programme and equipping parents could be beneficial. Parents in this study reported that the sheets sent home were helpful as it allowed them to reinforce skills taught and develop their own parenting style. A parenting programme would enable parents to meet with other parents of children with similar behaviours and develop skills to support these children long term. It may also benefit other siblings of the children.

6.10 Recommendations for Schools and PALS

This research has shown that by running a programme, focused on developing social and emotional competencies in children equipped those closest to the child and the children themselves to improve their management of internalising and externalising behaviours.

It is hoped that schools will continue to place an emphasis on the importance of teaching such skills to children in the early years of primary education. The schools selected for participation clearly stated that they hope to run PALS as a programme for all children entering into their school in the next academic year. Staff members also outlined that they hope to use PALS as a screening tool to identify those children coming into primary school without the competencies needed to interact positively with their peers.

School staff emphasised that PALS had a positive impact in their school, on its ethos and their practices. However, in relation to future practices school staff would benefit from acknowledging that not all children entering into primary school come equipped with the skills necessary to interact positively with others. There are many children in Irish primary schools that require additional teaching and practice in how to interact positively as outlined in this study.

One of the sub themes that emerged in this study was that some staff felt their school did not acknowledge the importance of PALS and that it was often difficult to get cover for their class. While staff acknowledged the importance of teaching such skills to children and the impact this had on the children selected for participation, consideration needs to be given to the advantages of PALS in order to promote children's social and emotional competencies. In doing so, staff would need ongoing communication with staff members and school management in order to gain support in developing social and emotional competencies.

6.11 Recommendations for educational psychology practice

This research adds to the growing body of knowledge developed by educational psychologists. In Ireland, this is the first study exploring the impact of the PALS programme and there is little research relating to other early interventions for children who find it difficult to develop positive peer relationships. This research has outlined the importance of developing such skills, thus indicating the importance of educational psychology services to:

- Advise schools on how to support all children who fail to develop appropriate social and emotional competencies
- Support schools in implementing support systems to enable such children to develop appropriate competencies
- Equip staff and parents with the skills necessary to support children who find it difficult to develop appropriate social and emotional competencies
- Enhance pupils' educational experiences by equipping them with the competencies needed to interact positively with others

Educational psychologist's are best placed to support large numbers of children as they are continuously supporting and advising schools. Introducing early years' interventions such as PALS will enable a more cost effective method of supporting large numbers of children.

Educational psychologists, in Ireland support and advise the Department of Education and Science on aspects relating to learning, social and emotional development. Ongoing research in this area is essential so that educational psychology can make recommendations in relation to policies and practices outlining the importance of developing social and emotional competencies which will support those children in the education system at risk of being marginalised.

6.12 Conclusion

PALS, a ten week programme was set up in order to support those children most at risk in both their educational and social adjustment in school. The programme was designed so it could be run by school staff working with young children. It enabled an effective, evidence based intervention aimed at internalising and externalising children. Very clearly the major finding of this research is that overall the programme has many strengths.

The findings clearly demonstrate that the social and emotional competencies have benefited those children who participated. A very telling finding showed that PALS equipped children with the skills necessary to interact and maintain play with their peers. It empowered the internalising children with the confidence to overcome fears and anxieties when mixing with peers. It has also enhanced their ability to speak up when interacting with others. It has equipped the externalising children with the skills needed to calm down and manage frustrations which in turn empowered them to interact better with peers. Additionally, a very important point highlighted by staff is that emotional competencies require additional teaching in order for all children to benefit. PALS would need further sessions or emotions targeted at a younger population in order for the children to benefit from developing these competencies and ability to empathise

These results have important implications for the Irish Primary Education system. It has important messages not only for educational psychology services but for policy makers, parents and all school staff who work with young children.

One of the main advantages of running this study in Irish primary schools is that it has shown staff and schools that focusing on teaching and developing such competencies in children has benefits for all those involved. Another fundamentally important finding relates to staff and parents. Staff reports indicate that PALS has been effective in the schools selected for participation. Also staff and parent reports clearly indicate that PALS equipped and enabled them to work towards supporting children with internalising and externalising behaviours.

Running the programme in Irish schools has not only shown the benefits of the PALS programme, it has also equipped staff members with additional knowledge, understanding and skills to empower such children and their families which in time could lead to a decrease in referrals to outside professionals.

The benefits of PALS have been outlined in this research. With future interventions aimed at examining the effectiveness of PALS it is possible that skills such as emotions, feelings and empathy could be explored further. This could benefit those selected for participation and enable children in primary schools to overcome those issues placing them at risk.

References

Abound, F.E., and Mendelson, M.J. (1996). Determinants of friendship selection and quality: Developmental perspectives. In Bukowski, W. M., Newcomb.

Achenbach, Thomas M. & Rescorla, Leslie A. (2001). *Manual for the ASEBA School-Age Forms & Profiles*. Burlington, VT: University of Vermont, Research Centre for Children, Youth, & Families.

A.F., and Hartup, W.W. (1998). *The company they keep: Friendships in childhood and adolescence*. Cambridge studies.

Ainsworth, M. (1979). Infant- mother attachment. *American psychologist*, 34, 932-937.

Aken, C.V., Junger, M., Verhoeven, C. M., Aken, M.A.G., and Dekovic, M. (2007). The interactive effects of temperament and maternal parenting on toddlers' externalising behaviours. *Early development and parenting*, 16 (5), 553-572.

An Roinn Oideachais (1971). *Curaclam na Bunscoile- Primary School Curriculum, Cuid 1 agus 2- Parts 1 and 2* (Dublin Stationary Office).

Bachman, L.F., and Kunnan, A.J. (2005). Statistical analysis for language assessment. Cambridge: Cambridge University Press.

Bakeman, R., and Gottman, J.M. (1997). Observing interaction: An introduction to sequential analysis, 2nd edition. In Robson, C. (2002). *Real world research*. Blackwell publishing.

Barnes, J., & Richman, N. (2003). *Early Years Behaviour Checklist Handbook*. London: NFER-Nelson [Revision of PBCL Handbook].

Barry, M.M., Canavan, R., Clarke, A., Dempsey, C., and O'Sullivan, M. (2009). *Review of evidence based mental health promotion and primary/secondary prevention*. Health Promotion Research Centre (June 2009) National University of Ireland, Galway.

Bayer, J.K., Hiscock, H., Ukoumunne, O.C., Price, A., and Wake, M. (2008). Early childhood aetiology of mental health problems: a longitudinal population based study. *Journal of child psychology and psychiatry*, 49 (11), 1166-1174.

Bickford-Smith, A., Wijayatilake, L. & Woods, G. (2005). Evaluating the effectiveness of an early years language intervention. *Educational Psychology in Practice* Vol (21) (3) 161-171.

Bierman, K.L. & Welsh, J.A. (2000). Assessing social dysfunction: the contributions of laboratory and performance-based measures. *Journal of Clinical Child Psychology*, 29, 526-539.

Blatchford, P., Baines, E., and Pellegrini, A. (2003). The social context of school playground games: Sex and ethnic differences, and changes over   Time after entry to junior school. *British journal of developmental   Psychology*, 21 (4), 481-505.

Bor, W., McGee, T.R., & Fagan, A.A. (2004). Early risk factors for adolescent antisocial behaviour: An Australian longitudinal study. *Australian and New Zealand Journal of Psychiatry, 38,* 365-372.

Bowlby, J. (1969). *Attachment.* New York: Basic Book.

Boxer, P., Goldstein, S.E., Musher- Eizenman, Dubow, E. F., and Heretick, D. (2005). Developmental issues in school-based aggression prevention from a social- cognitive perspective. *The journal of primary prevention*, 383- 400.

Boxer, P., Goldstein, S., Musher- Eizenman, D., Dubow, E., and Heretick, D. (2005). Developmental issues in school based aggression prevention from a social cognitive perspective. *The journal of primary prevention*, 26, 283-400.

Boyatzis, R.E. (1998). Transforming qualitative information: Thematic analysis and code development. Thousand Oaks, CA: Sage.

Bracken, S.S., and Fischel, J.E. (2007). Relationships between social skills, behavioural problems, and school readiness for head start children. *NHSA dialogue*, 10 (2), 109-126.

Braun, V. & Clarke, V. (2006). Using thematic analysis in psychology. *Qualitative Research in Psychology*, Vol (3), 77-101.

Bronfenbrenner, U. (1979). *The ecology of human development.* Cambridge, MA: Harvard University Press.

Brown, A., and Dowling, P. (1998). *Doing research/reading research.*   Routledge Falmer.

Burgess, K.B., Wojslawowicz, J.C., Rubin, K.H., Rose-Kasnor, L., and Booth-LaForce, C. (2006). Social information processing and coping strategies of shy/withdrawn and aggressive children: Does friendship matter. *Child development*, 77 (2), 371- 383.

Burkhart, P. J., & Reuss, S. (1993). *Successful strategic planning: A guide to nonprofit agencies and organizations.* Newbury Park, CA: Sage Publications.

Cartwright-Hatton, S., Hodges, L., and Porter, J. (2003). Social anxiety in childhood: the relationship with self and observer rated social skills. *Journal of child psychology and psychiatry*, 44(5), 737-742.

Cheek, J. M., & Melchior, L. A. (1990). *Shyness, self-esteem, and self-consciousness*. In H. Leitenberg (Ed.), Handbook of social and evaluation anxiety (pp. 47-82). New York: Plenum.

Cohen, L., Manion, L. and Morrison, K. (2001) Research Methods in Education, London and New York, Routledge Falmer.

Conger, J.C., Conger, A.J., Edmondson, C., Tescher, B., and Smolin, J. (2003). The relationship of anger and social skills to psychological symptoms. *Journal of Assessment*, 10 (3), 248-258.

Cooper, J., Goodfellow, H., Mulheim, E., Paske, K & Pearson, L. (2007) (3rd edition). *PALS Social Skills Program: Playing and learning to socialise:* Resource book. In script Publishing.

Coplan, R.J., and Murray. (2009). Shy and soft spoken: Shyness, pragmatic language, and socio- emotional adjustment in early childhood. Infant *and child development*, 18 (3), 238-254.

Craig, W.M., and Pepler, D.J., (1995). Observations of bullying and peer victimization in the school yard. *Canadian journal of school psychology*, 13 (2), 41-59.

Creswell, J.W. (2003). *Research design: qualitative, quantitative, and mixed methods approaches,* (2nd edition). In Teddlie, C., and Tashakkori, A. (2009). Foundations of mixed methods research: integrating quantitative and qualitative approaches in the social and behavioural sciences. Sage publications.

Crick, N. R., and Dodge, K. A. (1994). A review and reformulation of social information-processing mechanisms in children's social adjustment. *Psychological Bulletin*, 115(1), 74-101.

Data Protection Acts (1998, 2003). Irish Data Protection Commissioner.

Denscombe, M. (2007). Communities of practice and mixed methods research: a research paradigm based on reflexive pragmatism. *International Mixed Methods conference*, Cambridge.

Department for Education. (1994) Circular 9/94 *The Education of Children with Emotional and Behavioural Difficulties*. London: Department for Education.

Department of Education and Science (1998). *Education Act*, Dublin, Stationary Office.

Department of Education and Science (2005a). *DEIS (Delivering Equality of Opportunity in Schools): An action plan for educational inclusion*: Dublin: Author.

Desforges, D. and Abouchaar, A. (2003) *The impact of parental involvement, parental support and family education on pupil achievement and adjustment,* DfES.

Dunn, J. (2004). Children's frienships: the beginnings of intimacy. Blackwell publishing.

Eisenberg, N., and Spinrad, T.L. (2004). Emotion-Related Regulation: Sharpening the Definition. *Child development*, 75 (2), 334-339.

Elias, J. M., Zins, J.E., Weissberg, R.P., Frey, K.S., Grennberg, M.T., Haynes, N.M., Kessler, R., Schwab-Stone, M.E., and Shriver, T.P. (1997). *Promoting social and emotional learning; guidelines for educators*. Association for supervision and Curriculum Development.

Erikson, E. (1959). Growth and crises of the healthy personality. *Psychological issues*, 1, 40-52.

Ewart, C.K., Jorgenson, R.S., Suchday, S., Chen. E. and Matthews. K.A. (2002). Measuring stress resilience and coping in vulnerable youth; the social competence interview. *Psychological Assessment*, 14 (3), 339-352.

Eyberg, S., & Pincus, D. (1999). *Eyberg Child Behavior Inventory & Sutter-Eyberg Student Behaviour Inventory* - Revised. Odessa, FL: Psychological Assessment Resources.

Fabes, R., & Eisenberg, N. (1992). Young children's coping with interpersonal anger. *Child Development*, 63, 116-128.

Field, A. (2005). *Discovering stats using SPSS*. 2nd Ed, Sage Publications Ltd.

Flem, A., Thygesen, R., Valas, H., and Magnes, E. (1998). A social skills intervention programme for kindergarten children at risk of developing behavioural problems. *European Journal of Special Educational Ncognieeds*, 13 (2), 208-215.

French, D. C., & Waas, G. A. (1985b). Teachers' ability to identify peer-rejected children: A comparison of sociometrics and teacher ratings. Journal of School Psychology, 23, 347-353.

Fuller, R., and Petch, A. (1995). *Practitioner research: The reflexive social worker.* Buckingham Open University Press.

Gaub, M., & Carlson, C. L. (1997). Gender differences in ADHD: A meta-analysis and critical review. *Journal of American Academy of Child and Adolescent Psychiatry*, 36, 1036-1045.

Gauntlett, E., Hugman, R., Kenyon, P. & Logan, P. (2001), *A Meta-analysis of the impact of community-based prevention and early intervention*, Commonwealth Department of Family and Community Services, Canberra, ACT.

Gazelle, H., & Ladd, G.W. (2003). Anxious solitude and peer exclusion: A diathesis-stress model of internalizing trajectories in childhood. *Child Development*, 74(1), 257-278.

Gilman, R., Furlong, M.J., and Huebner, E.S. (2009). *Handbook of positive psychology in schools.* Routledge.

Goldman, S., Akin-little, K.A. (2002). The causes and consequences of peer rejection. *The School Psychologist Newsletter*, 56(1), 10-14.

Goleman, D. (2003). Working with emotional intelligence. Bantham books.

Goodman, R. (1997). The Strengths and Difficulties Questionnaire: A research note. *Journal of Child Psychology, Psychiatry, and Allied Disciplines,* 38 (5), 581-586.

Goodman, R., & Scott, S. (1999). Comparing the Strengths and Difficulties Questionnaire and the Child Behavior Checklist: Is small beautiful? *Journal of Abnormal Child Psychology*, 27 (1), 17-24.

Gopnik, A., and Meltzoff, A.N. (1994). Minds, bodies and persons: young children's understanding of the self and others as reflected in imitation and theory of mind research. In Boxer, P., Goldstein, S., Musher- Eizenman, D., Dubow, E., and Heretick, D. (2005). Developmental issues in school based aggression prevention from a social cognitive perspective. *The journal of primary prevention*, 26, 283-400

Greenfield, D.B., Wasserstein, A.B., Gold, S., and Jorden, B. (1997). The Adaptive Social Behavior Inventory (ASBI): Evaluation with High-Risk Preschoolers. Journal of psychoeducational assessment, 15(4), 322-333.

Gresham, F.M. (1981). Social skills training with handicapped children: A review. *Review of educational research*, 51, 139-176.

Gunther, N., Slavenburg, B., Feron, F., and Van Os, J. (2003). C hildhood social and early developmental factors associated with mental health service use. *Social Psychiatry*, 38 (3), (101– 108).

Halford, K., Foddy, M. (1982). Cognitive and social skills correlates of social anxiety. *British journal of clinical psychology*, 21, 17-28.

Hammersley, M., Gomm, R., Woods. P., Swann, J., Baker, S., Bird, M., and Carty, J. (2001). *Research Methods in Education Handbook*. Milton Keanes, Open University Press.

Hartup, W.W. (1992). Friendships and their developmental significance. In H. McGurk (Ed), *Childhood social development: contemporary perspectives* (pp.175-205). Hove, England: Erlbaum.

Hartup, W.W. (1996). The company they keep: Friendships and their developmental significance. *Child development*, 67, 1-13.

Hartup, W.W. and Stevens, N. (1997). Friendship and adaptation in the life course. *Psychological bulletin*, 121, 355-370.

Hartup, W.W. (1999). Constraints on peer socialisation: let me count the ways. *Merrill- Palmer Quarterly*, 45, 172-183.

Hay, D.F., Payne, A., and Chadwick, A. (2004). Peer relations in childhood. *Journal of child psychology and psychiatry*, 45 (1), 84- 108.

Heather Hebert-Myers, H., Guttentag, C.L., Swank, P.R., Smith, K.E., Landry, S.H. (2006). The importance of language, social, and behavioural skills across early and later childhood as predictors of social competence with peers. *Applied developmental science*, 10 (4), 174-187.

Hetherington, E.M., Parke, R.D. & Locke, V.O. (2003). *Child psychology: A contemporary viewpoint*. (6th ed.). New York: McGraw-Hill.

Hogan, A.E., Scott, K.G., and Bauer, C.R. (1992). The adaptive social behaviour inventory (ASBI): A new assessment of social competence in high risk three year olds. *Journal of psychoeducational assessment*, 10 (3), 230-239.

How Choi, D., and Kim, J. (2003). Practicing social skills training for young children with low peer acceptance: A cognitive-social learning model. *Early childhood education journal*, 33(1), 41-45.

Humphries, B., and Martin, M. (2000). Disrupting ethics in social research. In B. Humphries, (Ed), *Research in social care and social welfare* (pp. 69-85). London: Jessica Kingsley.

Ireland and National Council for Curriculum Assessment (1999). *Primary school curriculum*. (Dublin Stationary Office).

James, S., & Mellor, J. (2005). *Evaluating the use of playing and learning to socialise (PALS) programme.* London Borough of Hillingdon.

Johnson, I.P., and Maynard, J. (2007). The case for, early, targeted interventions to prevent academic failure. *Journal of education,* 82(4), 587- 616.

Johnson, B., and Onwuegbuzie, A. (2004). Mixed methods research: A research paradigm whose time has come. *Educational researcher,* 33 (7), 14-26.

Kim, H.K., Capaldi, D.M., Pears, K.C., Kerr, D.C.R. and Owen, L.D. (2009). Intergenerational Transmission of Internalising and Externalising Behaviours across Three Generations: Gender-Specific Pathways. *Criminal behaviour mental health,* 19 (2), 125-141.

Katz, M., and Maytal, H. (2005). Interactions between anxious mothers and their infants; an integration of theory and research findings. *Infant mental health journal,* 26 (6), 570-597.

Kathy, S., Melhuish, E., Sammons, P., Siraj- Blatchford, I., Taggart, B., & Elliot, K. (2003). *The effective provision of pre-school education (EPPE) project: findings from the pre-school period.* Institute of Education, University of London, University of Oxford. Birbeck, University of London

Katz, L. in Dowling, M. (2000). *Young children's learning: Personal, social and emotional development.* Paul Chapman Publishing.

Kelly, A. (1997). *Talkabout: A social communication skills package.* Speechmark.

Kumar, R. (1996). *Research methodology: A step by step guide for beginners.* Longman.

Ladd, G.W. (1996). The child behaviour scale: a teacher report measure of young children's aggressive, withdrawn, and pro-social behaviours. *Journal of developmental psychology,* 32 (6), 1008-1024.

Lee, J.M., Alfonso, F. (2003). The effectiveness of early intervention with young children "at risk": a decade in review. *The school psychologist,* 57 (2), 42-49.

Leeuwen, V., Mervielde, K.G., Braet, I., Bosmans, C.G. (2004). Child personality and parental behavior as moderators of problem behavior: Variable- and Person-Centred Approaches. *Developmental Psychology,* 40, 1028–1046.

Liu, J., and Worker, A. (2004). Biosocial bases of aggressive and violent behavior—implications for nursing studies. *International Journal of Nursing Studies,* 42 (2), 229-241.

MacDonald, E., Chowdhury, U., Dabney, J., Wolpert, M., Stein, S.M. (2003). A social skills group for children. *Journal of emotional and behavioural difficulties*, 8 (1), 43-52.

Mason, J. (1996). *Qualitative researching*. Sage Publications.

Mayo, E. (1933). *The human problems of an industrial civilization*. New York MacMillan.

McCain, M.N. & Mustard, F. (1999), *Reversing the brain drain: Early study: Final report*, Ontario Children's Secretariat, Toronto.

McDowell, D.J., Kim, M., O'Neil, R., and Parke, R.D. (2002). Children's emotional regulation and social competence in middle childhood. The Role of Maternal and Paternal Interactive Style. *Marriage and family review*, 34 (3), 345-364.

Melfsen, S., and Florin, I. (2002). Do socially anxious children show deficits in classifying facial expressions of emotions? *Journal of nonverbal behaviour*, 26 (2), 109-126.

Melhuish, E.C., Sylva, K., Sammons, P., Siraj-Blatchford, I. & Taggart, B. (2001). *The Effective Provision of Pre-school education Project. Technical Paper 7.* Social/Behavioural and cognitive development at 3-4 years in relation to family background. London: IOE/DfEE.

Melhuish, E.C. (2004). A literature review of the impact of early years provision on young children, with emphasis given to children from disadvantaged backgrounds. *Report to the Comptroller and Auditor General.* London: National Audit Office.

Miller- Lewis, L.R., Baghurst, P.A., Sawyer, M.G., Prior, M.R., Clark, J.J., Arney, F.M., and Carbone, J.A. (2006). Early childhood externalising behaviour problems: child, parenting, and family predictions over time. *Journal of abnormal child psychology*, 34 (6), 886-901.

Mortimer, M. (2001). *Personal, social and emotional development of children in the early years*. Lichfield Staffs: QEd.

Murphy, B. (2004). Practice in Irish infant classrooms in the context of the Irish Primary School Curriculum (1999); insights from a study of curriculum implementation. *Journal of early years education*, 12 (3), 245- 256.

Najman, J.M., Aird, R., Bor, W., O'Callaghan, M., Williams, G.M., and Shuttlewood, G.J. (2004). The generational transmission of socioeconomic inequalities in child cognitive development and emotional health. *Social sciences and medicine*, 58 (6), 1147- 1158.

Nie, N. H., et al.: SPSS: Statistical Package for the Social Sciences. 2nd Ed. New York, McGraw-Hill, 1975.

Nisbett, J. & Watt, J. (1994). Educational Disadvantage in Scotland- A 1990s perspective. Edinburgh: Scottish Community Education Council.

O'Sullivan, M., Guilford, J.P., & deMille, R. (1965). The measurement of social intelligence. *Reports from the Psychological Laboratory, University of Southern California*, No. 34.

Palmieri, P.A., & Smith, G.C. (2007). Examining the Structural Validity of the Strengths and Difficulties Questionnaire (SDQ) in a U.S. Sample of Custodial Grandmothers. *Psychological Assessment*, 19, 189-198.

Perren, S., Stadlemann, S., Von Wyl, A., and Von Klitzing, K. (2007). Pathways of behavioural and emotional symptoms in kindergarten children: what is the role of pro-social behaviour. *European child and adolescent psychiatry*, 16 (4), 209-214.

Piaget, J. (1952). *The origins of intelligence*. New York; Norton

Pullatz, M., and Wasserman, A. (1989). Children's naturalistic behaviour and sociometric status: A developmental perspective. In Hwa Choi, D., and Kim, J. (2003). Practicing social skills training for young children with low peer acceptance: A cognitive-social learning model. *Early childhood education journal*, 33(1), 41-45

Rapee R. M., Heimberg R. G. *(1997)*. A cognitive-behavioral model of anxiety in social phobia. *Behaviour Research & Therapy*, 35, 741-756.

Repacholi, B., & Slaughter, V. (Eds.). (2003). *Individual differences in theory of mind: Implications for typical and atypical development*. Hove, UK: Psychology Press.

Robson, C. (2002). *Real world research*. Blackwell publishing.

Rose-Krasnor, L. (1997). The nature of social competence: A theoretical review. *Social development*, 6(1), 111-135.

Ross, C. P., Little, M., and Kienhuis, M. (2008). Self reported and actual use of proactive and reactive classroom management strategies and their relationships with teacher stress and student behaviour. *Educational Psychology*, 28 (6), 693-710.

Rubin, K.H., Nelson, L.J., Hastings, P. and Asendorpf, J. (1999). The transaction of their children's shyness and their parenting styles. *International journal of behavioural development*, 23(4), 937-957.

Saarni, C. (1999). *The development of emotional competence*. Guilford press.

Sammons, P., Sylva, K., Melhuish, E.C., Taggart, B. & Elliot, K. (2003) The Effective Provision of Pre-School Education Project: Technical Paper 8a. Measuring the Impact on children's cognitive development over the pre-school years. London: IOE/DfEE

Salovey, P., and Grewal, D. (2005). The science of emotional intelligence. *Current directions in psychological science*, 14 (6), 281-285.

Sanson, A., Hemphill, S.A., and Smart, D. (2004). Connections between temperament and social development: A review. *Social development*, 13 (1), 142-174.

Savidge, C., Christie, D., Brooks, E., Stein, S.M., and Wolpert, M. (2004). A pilot social skills group for socially disorganized children. *Clinical child psychology*, 9 (2), 289- 296.

Schaffer, R.H. (1996). *Social development*. Blackwell Publishers Ltd.

Schaffer, D.R. (2008). *Social and personality development*. (6th Ed) Wadsworth.

Schroder, A. (1996). *Socially speaking: A pragmatic social skills programme for pupil's with mild to moderate learning disabilities*. Learning Development Association.

Schroder, A. (2001). *Time to talk: A programme to develop oral and social interaction skills for reception and key stage one*. Learning Development Aids.

Shadish, W., Cook, T.D., and Campbell, D.T. (2002). Experimental and quasi-experimental designs for general casual inference. In Teddlie, C., and Tashakkori, A. (2009). Foundations of mixed methods research: integrating quantitative and qualitative approaches in the social and behavioral sciences. Sage publications.

Sim, L., Whiteside, S.P., Dittner, C.A., and Mellon, M. (2006). Effectiveness of a social skills training program with school age children: transition to the clinical setting. *Journal of child family studies*, 15, 409-418.

Siraj-Blatchford, I., Sylva, K., Melhuish. E.C., Sammon, P. & Taggart, B. (2003). Effective Provision of Pre-School Education Project: Technical Paper 10. Intensive case studies of selected centres. London: IOE/DfEE.

Spence, S.H. (2003). Social skills training with children and young people: Theory, evidence and practice. *Child and adolescent mental health*, 8 (2), 84-96.

Stafford, L. (2004) communication and sociocultural proprieties of middle childhood. In Heather Hebert-Myers, H., Guttentag, C.L., Swank, P.R., Smith, K.E., Landry, S.H. (2006). The importance of language, social, and behavioural skills across early and later childhood as predictors of social competence with peers. *Applied developmental science*, 10 (4), 174-187.

Sylva, K., Sammons, P., Melhuish, E., Siraj-Blatchford, I. & Taggart, B. (1999). Introduction to the Effective Provision of Pre-School Education Project: Technical Paper 1. London: IOE/DfEE.

Sylva, K., Siraj-Blatchford, I., Taggart, B., Sammons, P., Melhuish, E., Elliot, K. and Totsika, V. (2006), 'Capturing Quality in Early Childhood Through Environmental Rating Scales'. *Early Childhood Research Quarterly* 21 (1), 76-92.

Tashakkori, A. and Creswell, J.W. (2007b). The new era of mixed methods. *Journal of mixed methods research*, 1, 3-7.

Teddlie, C., and Tashakkori, A. (2009). Foundations of mixed methods research: integrating quantitative and qualitative approaches in the social and behavioural sciences. Sage publications.

Thorndike, E.L. (1920). Intelligence and its use. In O'Sullivan, M., Guilford, J.P., & deMille, R. (1965). The measurement of social intelligence. *Reports from the Psychological Laboratory, University of Southern California*, No. 34.

Torgerson D.J. and Torgerson, C.J. (2003). Avoiding bias in randomised controlled trials in educational research, *British Journal of Educational Studies*, 51:36-45.

Warnes, E., Sheridan, S., Geske, J., & Warnes, W. (2005). A contextualized approach to the assessment of social skills: Identifying meaningful behaviours for social competence. *Psychology in the Schools*, 42, 173-187.

Webster-Stratton, C. (1990a). Enhancing the effectiveness of self-administered videotape parent training for families with conduct-problem children. Journal of Abnormal Child Psychology, 18, 479-492.

Webster-Stratton, C. (1995). Preventing conduct problems in Head Start children: Short-term results of intervention. Paper presented at the Society for Research and Child Development.

Webster-Stratton, C., & Hammond, M. (1997). Treating children with early-onset conduct problems: A comparison of child and parent training interventions. Journal of Consulting and Clinical Psychology, 65(1), 93-109.

Webster-Stratton. C. (1999). How to promote children's social and emotional competence. London: Sage.

Webster-Stratton, C., Reid, J. & Hammond, M. (2001). Social skills and problem solving social skills training for children with early onset conduct problems. Who benefits? *Journal of child psychology and psychiatry*, 42(7), 943-952.

Webster-Stratton, C., Reid, M. J. (in press) 2009. In R. Murrihy, A. Kidman & T. Ollendick (Eds.), Clinician's handbook for the assessment and treatment of conduct problems in youth: Springer Press.

Weir, K., Stevenson, J., and Graham, P. (1980). Behavioural deviance and teacher rating of prosocial behaviour. *Journal of American academy of child psychiatry*. 19, 68-77.

White, K.J., and Kistner, J. (1992). The influence of teacher feedback on young children's peer preferences and perceptions. *Developmental Psychology*. 28(5), 933-940.

Whitely, H., Smith, C. & Hutchinson, J. (2005) Empowering early years workers to identify and target areas of difficulty in pre-school children. *Early Years* Vol (25) (2) p 155-166.

Zeidner, M., Matthews, G., and Roberts. R.D. (2009). *What we know about emotional intelligence: how it affects learning, work, relationships and our mental health.* The Massachusetts Institute of Technology.

APPENDIX 1

Letters to primary schools

Dear Principal,

Following our recent contact, I am writing to provide you with some information regarding the research which is being carried in the xxxx region. I am very grateful that you wish to become involved in this research. Your participation is really appreciated, and I hope it will prove to be of benefit to the children and all others involved.

As a student on placement with ......, the research I am undertaking relates to the area of social skills development with children aged 3-6 years. This research involves looking at the PALS (Play and Learning to Socialise) programme and examining its effectiveness on the children participating.

For this study, I have randomly selected twenty schools throughout XXX and, with your consent have assigned your school to the experimental/control condition.

My involvement throughout the intervention will include:
- Training staff to set up and run the programme
- Helping staff to use the PALS guidelines to select the children for the programme
- Working with staff in obtaining parental consent
- Carrying out observations of the children during the intervention in order to gain both pre and post measures
- I also hope to carry out semi- structured interviews with staff and parents involved in the programme in order to establish how the programme is impacting on the children involved.

I have attached some information regarding the PALS programme with this letter. I will be in contact with your school in the coming weeks in order to arrange details regarding dates etc. for the intervention. If you have any further enquiries please do not hesitate to contact me at 087............, and be assured that I will be available to discuss any issue as the research progresses. I look forward to working with you soon.

Best wishes,

Dear Principal,

I recently made contact with your school regarding the possibility of carrying out research on the PALS (Play and Learning to Socialise) programme. I also outlined what form your participation would take, whether your school would be assigned to experimental or control/waiting list conditions.

As I informed you, there is a training day for the staff member who agreed to participate in the research. I have arranged for this to take place in **xxxxx Education Centre on Thursday the 5th March from 2:00 pm until 3:00 pm.**

With this letter I am also enclosing the PALS parent information sheet, parental consent form in for the children's participation and also a parental consent form for my involvement in the research. However, I am aware that you may wish to word the consent form for my involvement differently in order to suit your school. I hope that as you are going to select the children for participation in the research, you will also be able to send these forms out to parents in order to gain parental consent. I am available to discuss with you the children you wish to involve.

As a reminder, the children who would benefit most from the programme are: 3 children that present with shy and withdrawn behaviours and 3 children with more aggressive and stubborn behaviours. This totals 6 children aged between 4-6 years from junior and senior infants for participation in the programme.

I look forward to meeting with your school staff member soon and I would like to thank you again for becoming involved with this research. If you have any queries please do not hesitate to contact me on 087........... I look forward to hearing from your school soon.

Best wishes

APPENDIX 2

Staff Training

An evaluation of the effectiveness of PALS (play and learning to socialise) social skills programme
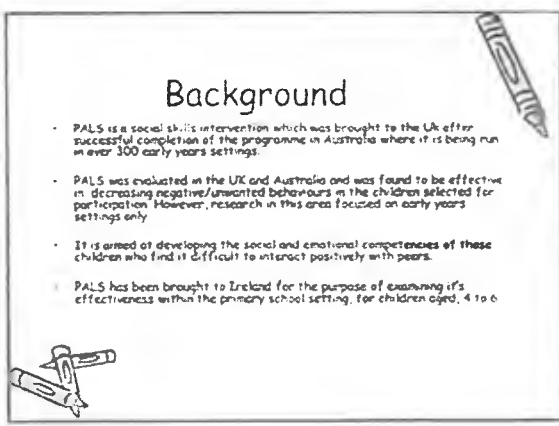
Background

- PALS is a social skills intervention which was brought to the UK after successful completion of the programme in Australia where it is being run in over 300 early years settings.

- PALS was evaluated in the UK and Australia and was found to be effective in decreasing negative/unwanted behaviours in the children selected for participation. However, research in this area focused on early years settings only

- It is aimed at developing the social and emotional competences of these children who find it difficult to interact positively with peers.

- PALS has been brought to Ireland for the purpose of examining it's effectiveness within the primary school setting, for children aged, 4 to 6
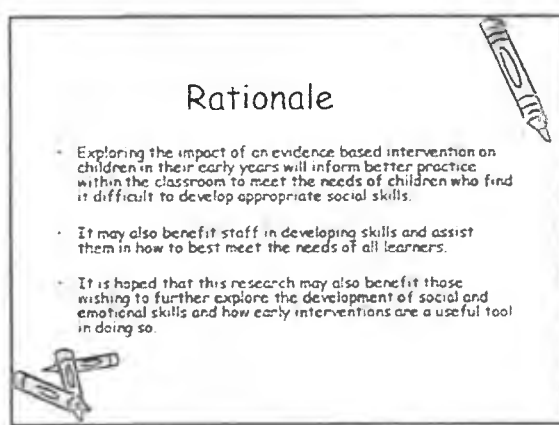
Rationale

- Exploring the impact of an evidence based intervention on children in their early years will inform better practice within the classroom to meet the needs of children who find it difficult to develop appropriate social skills.

- It may also benefit staff in developing skills and assist them in how to best meet the needs of all learners.

- It is hoped that this research may also benefit those wishing to further explore the development of social and emotional skills and how early interventions are a useful tool in doing so.

Why focus on teaching appropriate social skills?

- Behaviour is an area all staff throughout the region feel they would benefit from gaining support and insight.

- Research focusing on social skills maintains that "it is now very clear that unless a child achieves a minimal level of social competence by the age of six he or she is at risk for the rest of his/her life. The risk also affects the ability to form stable relationships, to maintain employment and to function well in marital relationships and parental roles. (Katz, 2000)

- The two main personal attributes seen in a young child which often lead to peer rejection and poor social development in later years are aggressive and/or withdrawn attributes

Why use PALS?

- PALS is an **evidence based**, user friendly, early years specific, structured intervention which is a cost effective method.

- It is simply designed.

- It was created purely for the Early Years.

- It has been shown to work

- Targets children at high risk of later behavioural and emotional problems

Process of PALS

- The sessions last for 20 to 30 minutes and for 5 out of the 10 sessions the skill is reinforced by showing a video in which children solve a similar problem.
- Each session follows the same structure:
  - Greeting
  - Review the rules
  - Review previous session
  - Puppet story
  - Activity
  - Farewell.

What do the 10 Sessions Teach?

1. Greeting others
2. Taking turns: talking and listening
3. Taking turns playing games
4. Sharing
5. Asking for help
6. Identifying feelings
7. Empathy
8. Overcoming fear & anxiety
9. Managing frustration
10. Calming down and speaking up

Methodology- Participants

- Approx 6 children will be selected in each school. Children will be aged 4-6 years with 16 schools in total.

- 3 children selected will be presenting with externalising behaviours such as, aggression and stubbornness. The other 3 with shy and withdrawn behaviours

- Children will be selected by staff that are familiar with the research aims, using early years screening tool (CSBQ and SDQ) and guidance as outlined in PALS.

Methodology- ethical considerations

- Informed consent and the right to withdraw from the study will be given to the parents whose children are involved

- Parents will also be given a phone number in case they wished to make further queries throughout the 10 weeks.

Data collection

- Pre and post measures will used from sessions 1 and 10 using the behaviour screening tool completed by 2 staff members (CSBQ and SDQ)

- Children will be observed using a fixed interval observation schedule at week 1 and 10

- Semi- structured interviews with approx 16 parents whose children participated in the programme and each staff member.

Behaviour screening

Internalising behaviours
- Low or restricted activity
- Shy, timid or unassertive behaviour
- Avoiding, withdrawing from social situations
- Preferring to play or spend time alone

Externalising behaviours
- Aggression
- Not doing as asked
- Stubbornness
- Disruptive behaviour
- Difficulty making friends and staying on task

Behaviour screening

- Stage 1- select 10 children who display greatest number of the behaviours

- Stage 2- from the stage 1 list, choose six children about whom you are most concerned.

(Remember 3 children should be presenting with internalising behaviours and the other 3 with externalising behaviours)

Appendix 3

Observation schedule

Observation schedule during free play

Level of social interaction

- **Solitary**- target child is not interacting or in a parallel activity with other pupils e.g. standing on the edge of a game watching but not involved.

- **Parallel**- target child is playing closely to other children and both are doing the same activity although not interacting or talking.

- **Social**- target child is engaged in physical or social interaction or involved in a socially organised game or activity. Child may be standing alone but is involved in the activity.

Behaviour

Positive- This includes the target child having a positive effect on others around him/her. The target child is displaying sings of reciprocated laughter/smiling joking. Positive action also includes friendly teasing, play fighting and rough and tumble.

Negative- The behaviour of the target child is having a negative effect on those around him/her. The target child acting in an aggressive manner towards other children whilst playing such as pushing, kicking, and making contact with another child in a harmful manner or crying.

Neutral
- Includes the target child not having an obvious effect on the others around him/her. The target child is not displaying any negative or positive behaviours,

Active participation- The target child is talking to others, actively taking part in the game by speaking to other children about it. In class active participation would be talking to the teacher/adult either to initiate, respond or sustain a conversation

Passive participation - The target child is engaged in the activity but not contributing or getting involved verbally. The target child may be taking part in an activity but his/her presence seems unnoticed.

Name of school:
Date:
Participation:
Name of child:

Time	1	2	3	4	5	6	7	8	9	10
Solitary	X	X								x
Parallel			x	x	x	X				
Social							x	x	X	
Positive behaviour							x	X		
Negative behaviour										
Neutral behaviour	X	X	x	x	x	X			X	X
Active participation			x	x	x	x	x	x	x	
Passive participation	x	x								X

APPENDIX 4

Descriptive statistics

Below is a description of the descriptive statistics followed by the tables outlining the analysis of the results:

SDQ descriptive statistics

For the SDQ scores, measures of skewness were within the acceptable range (both skewness and kurtosis when reported as being close to 0, indicating a perfect distribution of scores. However, a score of +/- 2 is considered acceptable (Bachman and Kunnan, 2005). For the most part kurtosis scores were acceptable; however, for conduct scores at week 1, the internalising children in the control group have a kurtosis value above 2. There are no extreme outliers for the intervention or control group.

ASBI descriptive statistics

For the ASBI scores, the values of skewness for all six measures are within the acceptable range. For the openness measure pre and post PALS, the internalising children in the control group have a kurtosis value above 2.

Observation schedule descriptive statistics

The kurtosis values for positive behaviour and neutral behaviour in week 1, for the internalising group (intervention), have kurtosis values above 2. Parallel play in week 1 is also above 2 for the control group (both internalising and externalising children). At week 10 parallel play, social play and negative behaviour have kurtosis values above 2 for the internalising children in the intervention group. Parallel play, neutral behaviour and passive participation are above 2 for the externalising children in the intervention group. Parallel play also has a kurtosis value above 2 for the externalising and internalising children at week 10 in the control group.

GROUP = experimental, personality = internalising, week 1

Descriptive Statistics[a]

	N	Skewness		Kurtosis	
	Statistic	Statistic	Std. Error	Statistic	Std. Error
SOLITARY	20	.122	.512	-.841	.992
PARALLEL	20	.933	.512	.071	.992
SOCIAL	20	.202	.512	-.627	.992
POSBEH	20	1.980	.512	4.568	.992
NEGBEH	20	1.847	.512	1.769	.992
NEUTBEH	20	-2.245	.512	6.709	.992
PASSPART	20	-.304	.512	-.703	.992
ACTPART	20	.304	.512	-.703	.992
indandconpre	20	-.476	.512	-.114	.992
coopandconpre	20	-.508	.512	-.498	.992
peersocpre	20	-.213	.512	-1.442	.992
antisocpost	20	1.244	.512	1.013	.992
empathypre	20	-.133	.512	-.679	.992
openpost	20	.020	.512	-1.160	.992
hyperpre	20	-.236	.512	-1.372	.992
peerprobpost	20	1.153	.512	1.864	.992
prosocialpre	20	-.022	.512	-1.451	.992
emotionalpre	20	-.136	.512	-.523	.992
overalldiffpre	20	-.324	.512	-.973	.992
conductpre1	20	1.426	.512	2.126	.992
Valid N (listwise)	20				

a. GROUP = experimental, personality = introvert

GROUP = experimental, personality = externalising, week 1

Descriptive Statistics[a]

	N	Skewness		Kurtosis	
	Statistic	Statistic	Std. Error	Statistic	Std. Error
SOLITARY	21	.604	.501	-.874	.972
PARALLEL	21	1.482	.501	.435	.972
SOCIAL	21	-.430	.501	-.708	.972
POSBEH	21	.077	.501	-1.331	.972
NEGBEH	21	.747	.501	-.272	.972
NEUTBEH	21	-.583	.501	.171	.972
PASSPART	21	.069	.501	-1.699	.972
ACTPART	21	-.069	.501	-1.699	.972
indandconpre	21	-.204	.501	-1.033	.972
coopandconpre	21	.288	.501	-.857	.972
peersocpre	21	-.110	.501	.693	.972
antisocpost	21	.416	.501	-.156	.972
empathypre	21	-.248	.501	-.723	.972
openpost	21	-.902	.501	.364	.972
hyperpre	21	-.634	.501	-.878	.972
peerprobpost	21	.188	.501	-1.288	.972
prosocialpre	21	.315	.501	-.363	.972
emotionalpre	21	1.016	.501	.128	.972
overalldiffpre	21	.743	.501	1.098	.972
conductpre1	21	-.434	.501	-.075	.972
Valid N (listwise)	21				

a. GROUP = experimental, personality = extrovert

GROUP = control, personality = internalising, week 1

Descriptive Statistics[a]

	N	Skewness		Kurtosis	
	Statistic	Statistic	Std. Error	Statistic	Std. Error
SOLITARY	20	.144	.512	-1.301	.992
PARALLEL	20	2.502	.512	5.952	.992
SOCIAL	20	-.290	.512	-.711	.992
POSBEH	20	.414	.512	.650	.992
NEGBEH	20	.667	.512	-1.442	.992
NEUTBEH	20	.315	.512	.048	.992
PASSPART	20	.112	.512	-1.521	.992
ACTPART	20	-.112	.512	-1.521	.992
indandconpre	20	-.103	.512	-1.052	.992
coopandconpre	20	.012	.512	-.176	.992
peersocpre	20	-.291	.512	-.065	.992
antisocpost	20	.902	.512	.135	.992
empathypre	20	-.157	.512	-1.251	.992
openpost	20	1.186	.512	2.882	.992
hyperpre	20	.296	.512	-.426	.992
peerprobpost	20	.330	.512	-.816	.992
prosocialpre	20	.037	.512	-.438	.992
emotionalpre	20	.899	.512	.181	.992
overalldiffpre	20	-.018	.512	-1.027	.992
conductpre1	20	1.061	.512	.112	.992
Valid N (listwise)	20				

a. GROUP = control, personality = introvert

166

GROUP = control, personality = externalising, week 1

Descriptive Statistics[a]

	N	Skewness		Kurtosis	
	Statistic	Statistic	Std. Error	Statistic	Std. Error
SOLITARY	21	1.353	.501	.687	.972
PARALLEL	21	2.409	.501	4.613	.972
SOCIAL	21	-1.142	.501	-.210	.972
POSBEH	21	1.042	.501	-.207	.972
NEGBEH	21	.687	.501	-1.331	.972
NEUTBEH	21	-.125	.501	-1.289	.972
PASSPART	21	.149	.501	-1.340	.972
ACTPART	21	-.149	.501	-1.340	.972
indandconpre	21	.002	.501	-.648	.972
coopandconpre	21	-.361	.501	-.630	.972
peersocpre	21	-.594	.501	-.579	.972
antisocpost	21	-.032	.501	.208	.972
empathypre	21	.548	.501	.385	.972
openpost	21	-.236	.501	-.849	.972
hyperpre	21	-.509	.501	-.223	.972
peerprobpost	21	-.044	.501	-1.414	.972
prosocialpre	21	.123	.501	.629	.972
emotionalpre	21	1.050	.501	.371	.972
overalldiffpre	21	.218	.501	-.759	.972
conductpre1	21	.991	.501	1.365	.972
Valid N (listwise)	21				

a. GROUP = control, personality = extrovert

GROUP = experimental, internalising , week 10

Descriptive Statistics[a]

	N	Skewness		Kurtosis	
	Statistic	Statistic	Std. Error	Statistic	Std. Error
SOLITARY1	20	.926	.512	-.731	.992
PARALLEL1	20	4.472	.512	20.000	.992
SOCIAL1	20	-1.945	.512	4.378	.992
POSBEH1	20	.121	.512	-1.313	.992
NEGBEH1	20	4.097	.512	17.291	.992
NEUTBEH1	20	.053	.512	-1.339	.992
PASSPART1	20	.416	.512	-.964	.992
ACTIVEPART1	20	-.416	.512	-.964	.992
indandconpost	20	-.188	.512	.183	.992
coopandconpost	20	-.769	.512	-.648	.992
peersocpost	20	-.095	.512	-.625	.992
antisocpost	20	1.244	.512	1.013	.992
empathypost	20	-.035	.512	-1.224	.992
openpost	20	.020	.512	-1.160	.992
hyperpost	20	-.119	.512	-1.547	.992
peerprobpost	20	1.153	.512	1.864	.992
prosocialpost	20	.320	.512	-1.085	.992
emotionalpost	20	.438	.512	-.616	.992
overalldiffpost	20	.101	.512	-.122	.992
conductpost1	20	1.778	.512	2.705	.992
Valid N (listwise)	20				

a. GROUP = experimental, personality = introvert

GROUP = experimental, personality = externalising, week 10

Descriptive Statistics[a]

	N	Skewness		Kurtosis	
	Statistic	Statistic	Std. Error	Statistic	Std. Error
SOLITARY1	21	.961	.501	-.207	.972
PARALLEL1	21	4.201	.501	18.183	.972
SOCIAL1	21	-.675	.501	-1.033	.972
POSBEH1	21	.785	.501	-.384	.972
NEGBEH1	21	.989	.501	.332	.972
NEUTBEH1	21	-.361	.501	-.123	.972
PASSPART1	21	1.604	.501	2.347	.972
ACTIVEPART1	21	-1.604	.501	2.347	.972
indandconpost	21	.246	.501	-1.087	.972
coopandconpost	21	-.169	.501	-1.229	.972
peersocpost	21	.439	.501	-.462	.972
antisocpost	21	.416	.501	-.156	.972
empathypost	21	-.245	.501	-.094	.972
openpost	21	-.902	.501	.364	.972
hyperpost	21	-.210	.501	-1.535	.972
peerprobpost	21	.188	.501	-1.288	.972
prosocialpost	21	.315	.501	-.939	.972
emotionalpost	21	1.003	.501	-.251	.972
overalldiffpost	21	.334	.501	-.526	.972
conductpost1	21	.493	.501	-.744	.972
Valid N (listwise)	21				

a. GROUP = experimental, personality = extrovert

GROUP = control, personality = internalising, week 10

Descriptive Statistics[a]

	N	Skewness		Kurtosis	
	Statistic	Statistic	Std. Error	Statistic	Std. Error
SOLITARY1	20	.547	.512	-1.619	.992
PARALLEL1	20	3.173	.512	10.923	.992
SOCIAL1	20	-.145	.512	-1.862	.992
POSBEH1	20	.760	.512	-.677	.992
NEGBEH1	20	1.506	.512	1.059	.992
NEUTBEH1	20	-.033	.512	-1.165	.992
PASSPART1	20	.256	.512	-1.301	.992
ACTIVEPART1	20	-.256	.512	-1.301	.992
indandconpost	20	-.019	.512	-.473	.992
coopandconpost	20	-.426	.512	-.106	.992
peersocpost	20	-.179	.512	.026	.992
antisocpost	20	.902	.512	.135	.992
empathypost	20	-.232	.512	-.927	.992
openpost	20	1.186	.512	2.882	.992
hyperpost	20	.303	.512	-.660	.992
peerprobpost	20	.330	.512	-.816	.992
prosocialpost	20	.129	.512	-.111	.992
emotionalpost	20	.137	.512	-.394	.992
overalldiffpost	20	-.259	.512	-1.318	.992
conductpost1	20	.826	.512	-.836	.992
Valid N (listwise)	20				

a. GROUP = control, personality = introvert

GROUP = control, personality = externalising, week 10

Descriptive Statistics^a

	N	Skewness		Kurtosis	
	Statistic	Statistic	Std. Error	Statistic	Std. Error
SOLITARY1	21	.605	.501	-1.052	.972
PARALLEL1	21	2.312	.501	3.958	.972
SOCIAL1	21	-.630	.501	-.768	.972
POSBEH1	21	.604	.501	-.248	.972
NEGBEH1	21	1.284	.501	.580	.972
NEUTBEH1	21	-.252	.501	-.902	.972
PASSPART1	21	.059	.501	-.988	.972
ACTIVEPART1	21	-.059	.501	-.988	.972
indandconpost	21	-.184	.501	-.837	.972
coopandconpost	21	-.020	.501	-.066	.972
peersocpost	21	-.462	.501	-1.024	.972
antisocpost	21	-.032	.501	.208	.972
empathypost	21	.676	.501	.187	.972
openpost	21	-.236	.501	-.849	.972
hyperpost	21	-.682	.501	.295	.972
peerprobpost	21	-.044	.501	-1.414	.972
prosocialpost	21	-.008	.501	.102	.972
emotionalpost	21	1.035	.501	.538	.972
overalldiffpost	21	.032	.501	-1.069	.972
conductpost1	21	.415	.501	.543	.972
Valid N (listwise)	21				

a. GROUP = control, personality = extrovert

Appendix 5

Example of weekly information

This week's skill:

Greeting Others

About this skill

Children who are withdrawn as well as children who do not do as they are asked tend to lack social skills. If these children are not taught the basic social skills in the early years, they may continue to experience problems at school.

If children respond positively, others will be more likely to interact with them. Teaching children greeting skills is, therefore, an important first step in their developing friendships.

Cultural and personal issues

The following issues may need to be taken into account for individual children as required:
- Making direct eye contact may not be acceptable for some people from different cultures.
- Some people are very shy and looking at someone while talking to them may cause anxiety.

Supporting skills in the classroom

- In the morning greet all children a ; they come in. If children who are usually shy make any attempt to respond, such as a quick look up, even a mumbled 'hello', make a simple mention of it. Be careful to reinforce only appropriate responses. For example:
  'That was a friendly look.'
  'What a nice smile.'
  'That was a good "hello".'
- Throughout the day, as children come to you, say 'hello' and praise any response.
- Frequently model friendly greetings by smiling, looking and greeting staff and children with a smile and 'hello'.
- Help children greet visitors to the preschool.

Before implementing classroom activities in relation to the PALS Social Skills Program, it is recommended that the relevant session in the PALS book be consulted. Each session includes a list of suggested classroom activities and resources.

This week's skill:

Greeting Others

Greeting others is the first step in most social interactions. It is the first step towards friendship. If children do not greet others (or respond to the greetings of others), then other children (and adults), are likely to ignore them, with the result being that they miss out on valuable social experiences.

While all children go through stages when they may act shy and look away when spoken to, by the time they attend school they should be more skilled at greeting others.

If children continue to have difficulties greeting others at preschool or school, they may find that other children are less likely to play with them, while some adults may pay less attention to them.

Some children may need particular help to develop the skills involved in greeting others.

What your child learnt this week

In this week's session the skill of greeting others was broken down into three steps:
1. Look at the person.
2. Smile.
3. Say 'hello' in a clear voice.

Each child was helped to practice saying 'hello' to his or her teacher, or to the puppets used in the program.

Sometimes just a smile can be enough.

APPENDIX 6

Example of PALS script

Session 1

Greeting Others

About this skill

Children who are withdrawn as well as children who do not do as they are asked tend to lack social skills. If these children are not taught the basic social skills in the preschool years, they may continue to experience problems at school.

If children respond positively, others will be more likely to interact with them. Teaching children greeting skills is, therefore, an important first step in their developing friendships.

Cultural and personal issues

The following issues may need to be taken into account for individual children as required:
- Making direct eye contact may not be acceptable for some people from different cultures.
- Some people are very shy and looking at someone while talking to them may cause anxiety.

During the session

- To break down the skill of greeting into the following three components:
  1. Look at the person.
  2. Smile.
  3. Say 'hello' in a clear voice.

Breaking the skill into parts gives children the opportunity to develop the skill of greeting step-by-step. This may be particularly important for children who are withdrawn or shy, who may find looking at people while talking to them difficult.

After the session

- For teachers and parents to encourage the children's use of this skill in a range of situations with a range of people.

1. **Greeting.** Greet the children as a group — 'Hello children' or 'Hello everyone'. Introduce yourself if the children do not know you.

2. Briefly introduce the idea of the group, and discuss what will happen each week — stories, songs and games to help learn about being friends.

3. Develop group rules consistent with the centre or class rules. You may like to ask the children to suggest rules. Restate the rules simply and in positive terms (what you would like the children to do) rather than in negative terms (what you don't want them to do). Three or four rules are sufficient. Examples of group rules:
   - Walk when inside.
   - Use indoor voices.
   - Be gentle with our friends.
   - Find your own place to sit, not touching anyone else.

   Write the rules up on a poster with a visual cue, such as a line drawing or magazine picture, for each rule. You may prefer to do this after the session. Display the 'Group Rules' poster each week, and review the rules at the commencement of each session. During each session praise children for following the rules.

4. Introduce Kate the kookaburra, Anna the kangaroo and Jack the koala. Ask the group as a whole to say 'hello' to the puppets and/or the presenter.

5. **Story.** Present the story using the puppets. After each part, lead a discussion using the questions provided.

6. **Audiovisual.** Show PALS DVD Episode 1: Greeting. Sing 'The Hello Song' with the group and discuss the episode using the question provided.

7. **Activity.**

8. **Farewell.** Children can say 'goodbye' to the presenter and/or the puppets. Direct children to the next activity.

PALS resources:

- Puppets: Kate the kookaburra, Anna the kangaroo and Jack the koala
- PALS poster (A3 size Snow Gum Preschool image)
- Audio CD Track 1: 'The Hello Song'
- PALS DVD Episode 1: Greeting, including 'The Hello Song'
- Staff information sheet for Session 1
- Parent information sheets for Session 1

Additional resources needed

- Paper and pencils to make a 'Group Rules' poster
- Television and DVD player
- CD player

NOTES

DIALOGUE

Dialogue in black indicates that the presenter is talking to the children in the group, and dialogue in red indicates that the presenter is talking as or to one of the puppets

PRESENTER:
Point to the PALS poster. Elaborate on the similarities between Snow Gum Preschool and your centre or school.

This is Snow Gum Preschool, the school that Anna and Jack go to. Like our school there are lots of fun things to do and lots of children to play with.

When we are together in this group we're going to hear some stories about the different things that happen at Anna and Jack's school.

Let's see what's happening today...

This can either be acted out directly using the puppets or narrated.

Put Kate the kookaburra and Anna the kangaroo puppets on hands.

Anna enters looking down at the ground.

Anna and Jack are arriving at school. They have said 'goodbye' and are waving to their mums and dads. Now it's time to go into school.

Anna goes into school first.

KATE (KOOKABURRA):

Hello Anna.

PRESENTER:
Place Anna the kangaroo in bag.

Anna walked straight past her teacher Kate. She didn't even look up when Kate said 'hello'.

Jack is watching this and he remembers when he was new at school like Anna, he had trouble looking at people and saying 'hello'. But now that Jack is a bit older, he knows that if he looks up at people and says 'hello', nothing bad happens. In fact, saying 'hello' and smiling makes you feel good.

Put Jack the koala and Kate the kookaburra puppets on hands. Jack enters school.

As Jack walks in, the first person he sees is Kate. Kate looks over towards Jack and gives him a smile.

PRESENTER:	Jack looks at Kate and smiles. Kate smiles at him again which makes Jack feel good.
Place Kate the kookaburra in box. Put Anna the kangaroo puppet on hand.	Jack sees Anna sitting by herself so he goes over to her.

JACK (POSSUM): Hello Anna!

PRESENTER:	Anna doesn't say anything. She doesn't even look at Jack. Jack tries to say 'hello' to Anna again.

JACK (POSSUM): Hi Anna!

PRESENTER:	But Anna still doesn't say anything. Jack thinks that Anna doesn't want to play with him so he goes off to find someone else to play with.
Place all puppets back in bag.	

Discussion of story

1. What does Jack do that is friendly? (He looks, smiles and says 'hello'.)
2. What could Anna do when Kate says 'hello'?
3. Jack was trying to be friendly to Anna by saying 'hello'. What could Anna have done to be friendly to Jack? (Elicit 'say "hello" back'.)
4. Can anyone show how Anna could say 'hello'?

PRESENTER:
Put Anna the kangaroo and Jack the koala puppets on hands.

Let's see what happens next...

While Jack was playing with the other children, Anna was on her own. She could see how much fun the others were having. Now Anna walks over to Jack.

PRESENTER:

Place all puppets back in bag.

Anna and Jack run off together to play with the other children.

1. What did Anna do this time that was friendly? (Elicit 'say "hello"'.)
2. What else could Anna do that is friendly? (Discuss looking. smiling and using a clear voice.)

Audio CD Track 1: **The Hello Song**

When I see my friends,
We like to go and play.
First we do three friendly things **(Hold up three fingers.)**
To have a real fun day.

Number one is look. **(Hold up one finger then point to eyes.)**
Number two is smile **(Hold up two fingers then point to smile.)**
Number three is say 'hello' **(Hold up three fingers.)**
Let's go play for a while.

Watch me say 'hello'.
I smile and look at you **(Smile and point at other person.)**
Can you smile and look at me **(Smile and point at self.)**
When you say 'hello' too? **(Wave with one hand.)**

DVD Episode 1 **Greeting**

Discussion of episode
Lily is the little girl in the episode. What did Lily learn to do that is friendly? (Prompt discussion of the three parts of greeting.)

1. Point out the three things that you can do when saying 'hello':
   - Look at the person.
   - Smile.
   - Say 'hello' in a clear voice.
   Discuss appropriate tone of voice, for example 'Do you yell or whisper "hello"?'.
2. Practice each step.
3. Help each child say 'hello' by:
   - saying 'hello' to each child and asking him or her to say 'hello' back OR
   - asking each child to say 'hello' to the puppets OR
   - asking each child to use the puppets to say 'hello'. (This approach may be easier for children who are shy or withdrawn.)

Note. As young children will vary considerably in their ability with this skill, praise children for any effort towards looking, smiling and saying 'hello', especially children who are more withdrawn. If a child is reluctant, don't push him or her. Continue to praise other children in his or her presence for each step of the skill. By having the skill broken down into three steps, each step can be praised while the next step is prompted — 'Amanda, that's a lovely smile, let's try saying "hello" next.', for example.

Supporting skills in the classroom

Skill for the week: Greeting others

- In the morning greet all children as they come in. If children who are usually shy make any attempt to respond, such as a quick look up, even a mumbled 'hello', make a simple mention of it. Be careful to reinforce only appropriate responses — 'That was a friendly look.', 'What a nice smile.', 'That was a good hello.', for example.
- Throughout the day, as children come to you, say 'hello' and praise any response.
- Frequently model friendly greetings by smiling, looking and greeting staff and children with a smile and 'hello'.
- Help children greet visitors to the preschool or centre.

Suggested classroom activities and resources

Activities

- Set up play areas or activities where children can practice greeting — a shop or post office, for example.
- Learn greetings in other languages. The poster 'Greetings Around the World' is a useful resource.
- Create a 'Hello, my name is...' poster, on which photographs of smiling children are displayed. Add personal information about each child — 'My favourite game is...', 'My favourite song is...', 'I like...', for example.
- At roll call, use the opportunity to ask the children to say 'hello' to the educator in response to their names.

Music

- 'What Do You Think My Name Is?' from *The New Useful Book: Songs and Ideas from ABC Play School* by Henrietta Clark.
- 'Two (Fat) Gentlemen Met in a Lane', replacing 'How do you do?' with 'Hello to you'.
- 'Hello, hello, hello, and how are you today? I'm fine, I'm fine, I'm fine and I hope that you are too.' The word 'hello' in this song could be replaced with greetings from other languages — *bonjour* in French, *bongiorno* in Italian, *ola* in Spanish, for example.

Literature

Hello! How Are You? by Shigeo Watanabe, illustrated by Yasuo Ohtomo. Little Bear says 'hello' to those he meets.

After the session

- Photocopy the Staff Information sheet for Session 1 and put it on the wall or noticeboard for all staff to read.
- Photocopy the Parent Information sheets for Session 1 for children to take home.

APPENDIX 7

Cohen's Kappa

Measuring inter- observer agreement

1. Drawing up the 'confusion matrix' enables the researcher to examine the agreement between the two observers. If different codes are used, then it is a disagreement. Patterns of agreements and disagreements are shown below

	Observer 2								
Observer 1	A	B	C	D	E	F	G	H	TOTAL
A	3	0	0	0	0	0	0	0	3
B	2	5	0	0	0	0	0	0	7
C	0	0	5	1	0	0	0	0	6
D	0	0	0	4	0	2	0	0	6
E	0	0	0	0	5	0	0	0	5
F	0	0	0	0	0	3	0	0	3
G	0	0	0	0	0	0	5	0	5
H	0	0	0	0	0	0	0	5	5
	5	5	5	5	5	5	5	5	40

2 Proportion of agreement (P0)

(3+5+5+4+5+3+5+5)/ (3+5+5+4+5+3+5+5 + 2+0+0+1+0+2+0+0)

35/ 40= .88

3 Proportion expected by chance (Pc)

(.05 × .03) + (.05 × .07) + (.05 × .06) + (.05 × .06) + (.05 × .05) + (0.5 × .03) + (.05 × .05) + (0.5 × .05)

.017

4 Calculate Cohen's Kappa (K)

$$K = \frac{P0 - Pc}{1 - Pc}$$

0.88- 0.017= .863

1- .017= .983

.863/.983= .88

Kappa above .88 is deemed strong

APPENDIX 8

Child Social Behaviour Questionnaire

Child Social Behaviour Questionnaire

Name ....Date of Birth ....

Name of School .... Date of administration ....

Name of administrator ....

1. Rarely
2. Not often
3. Sometimes
4. Usually almost
5. Always

1. Understands others' feelings, like when they are happy, sad or mad

| 1 | 2 | 3 | 4 | 5 |

2. Thinks things out before acting

| 1 | 2 | 3 | 4 | 5 |

3. Is helpful to other children

| 1 | 2 | 3 | 4 | 5 |

4. Tries to be fair in games

| 1 | 2 | 3 | 4 | 5 |

5. Is obedient and compliant

| 1 | 2 | 3 | 4 | 5 |

6. When you give him/her an idea for playing, he/she frowns, shrugs shoulders, pouts or stamps foot

| 1 | 2 | 3 | 4 | 5 |

7. Follows rules in games

| 1 | 2 | 3 | 4 | 5 |

8. Gets upset when you don't pay enough attention

| 1 | 2 | 3 | 4 | 5 |

9. Is sympathetic toward other children's distress, tries to comfort others when they are upset

| 1 | 2 | 3 | 4 | 5 |

10. Can behave appropriately during less structured sessions, with no more than one reminder

| 1 | 2 | 3 | 4 | 5 |

11. Waits his/her turn in games or other activities

| 1 | 2 | 3 | 4 | 5 |

12. Is open and direct about what he/she wants

| 1 | 2 | 3 | 4 | 5 |

13. Co-operates with your requests

| 1 | 2 | 3 | 4 | 5 |

14. Easily distracted, concentration wanders

| 1 | 2 | 3 | 4 | 5 |

15. Can easily get other children to pay attention to him/her
| 1 | 2 | 3 | 4 | 5 |

16. Says nice or friendly things to others, or is friendly towards others

| 1 | 2 | 3 | 4 | 5 |

17. Can move to a new activity on completion of a task

1   2   3   4   5

18. Will join a group of children playing

1   2   3   4   5

19. Can independently select and return equipment as appropriate

1   2   3   4   5

20. In social activities, tends to just watch other

1   2   3   4   5

21. Follows school rules

1   2   3   4   5

Please Turn Over

22. Says "please" and "thank you" when reminded

1   2   3   4   5

23. Constantly fidgeting or squirming

1   2   3   4   5

24. Asks or wants to go play with other children

1   2   3   4   5

25. Is calm and easy-going

1   2   3   4   5

26. Can work easily in a small peer group

1   2   3   4   5

27. Plays games and talks with other children

1   2   3   4   5

28. Shares toys or possessions

1   2   3   4   5

29. Teases other children, calls them names

1   2   3   4   5

30. Is confident with other people

1   2   3   4   5

31. Will invite others to join in a game

1   2   3   4   5

32. Prevents other children from carrying out routines

1   2   3   4   5

33. Perseveres in the face of difficult or challenging tasks

1   2   3   4   5

34. Tends to be proud of things she/he does

1   2   3   4   5

35. Accepts changes without fighting against them or becoming upset

1   2   3   4   5

36. Likes to work things out for self; seeks help from teacher/other children only as a last resort; can work independently

| 1 | 2 | 3 | 4 | 5 |

37. Bullies other children

| 1 | 2 | 3 | 4 | 5 |

38. Is interested in many and different things

| 1 | 2 | 3 | 4 | 5 |

39. Apologises spontaneously after a misdemeanour

| 1 | 2 | 3 | 4 | 5 |

40. Is worried about not getting enough (where enough might include attention, access to toys, food/drink etc.)

| 1 | 2 | 3 | 4 | 5 |

41. Is bossy, needs to have his/her way

| 1 | 2 | 3 | 4 | 5 |

42. Restless, overactive, cannot stay still for long

1   2   3   4   5

43. Enjoys talking with you

1   2   3   4   5

44. Offers to help other children who are having difficulty with a task in the classroom

1   2   3   4   5

45. Sees tasks through to the end, good attention span

1   2   3   4   5

Thank you for your help

APPENDIX 9

Strengths and Difficulties Questionnaire

Strengths and Difficulties Questionnaire

For each item, please mark the box for Not True, Somewhat True or Certainly True. It would help us if you answered all items as best you can even if you are not absolutely certain or the item seems daft! Please give your answers on the basis of the child's behaviour over the last six months or this school year.

Child's Name .... Male/Female

Date of Birth...

	Not True	Somewhat True	Certainly True
Considerate of other people's feelings	☐	☐	☐
Restless, overactive, cannot stay still for long	☐	☐	☐
Often complains of headaches, stomach-aches or sickness	☐	☐	☐
Shares readily with other children (treats, toys, pencils etc.)	☐	☐	☐
Often has temper tantrums or hot tempers	☐	☐	☐
Rather solitary, tends to play alone	☐	☐	☐
Generally obedient, usually does what adults request	☐	☐	☐
Many worries, often seems worried	☐	☐	☐
Helpful if someone is hurt, upset or feeling ill	☐	☐	☐
Constantly fidgeting or squirming	☐	☐	☐
Has at least one good friend	☐	☐	☐
Often fights with other children or bullies them	☐	☐	☐
Often unhappy, down-hearted or tearful	☐	☐	☐
Generally liked by other children	☐	☐	☐
Easily distracted, concentration wanders	☐	☐	☐
Nervous or clingy in new situations, easily loses confidence	☐	☐	☐
Kind to younger children	☐	☐	☐
Often lies or cheats	☐	☐	☐
Picked on or bullied by other children	☐	☐	☐
Often volunteers to help others (parents, teachers, other children)	☐	☐	☐
Thinks things out before acting	☐	☐	☐
Steals from home, school or elsewhere	☐	☐	☐
Gets on better with adults than with other children	☐	☐	☐
Many fears, easily scared	☐	☐	☐
Sees tasks through to the end, good attention span	☐	☐	☐

Do you have any other comments or concerns?

Please turn over - there are a few more questions on the other side

Overall, do you think that this child has difficulties in one or more of the following areas: emotions, concentration, behaviour or being able to get on with other people?

	No	Yes- minor difficulties	Yes- definite difficulties	Yes- severe difficulties
	☐	☐	☐	☐

If you have answered "Yes", please answer the following questions about these difficulties:

● How long have these difficulties been present?

	Less than a month	1-5 months	6-12 months	Over a year
	☐	☐	☐	☐

● Do the difficulties upset or distress the child?

	Not at all	Only a little	Quite a lot	A great deal
	☐	☐	☐	☐

● Do the difficulties interfere with the child's everyday life in the following areas?

	Not at all	Only a little	Quite a lot	A great deal
PEER RELATIONSHIPS	☐	☐	☐	☐
CLASSROOM LEARNING	☐	☐	☐	☐

● Do the difficulties put a burden on you or the class as a whole?

	Not at all	Only a little	Quite a lot	A great deal
	☐	☐	☐	☐

Signature .... Date ....

Class Teacher/Form Tutor/Head of Year/Other (please specify:)

APPENDIX 10

Parent's semi structured interview

Interview schedule for parents

1) General information

The general information section was concerned with introducing the nature of the parents' involvement and clarifying how much information they received from the primary school in relation to the research.

- How old is your child?

- Is your child male or female?

- How would you describe your child's personality prior to the PALS programme

- What information did you receive from the school in relation to PALS?

- How did you find this information?

- Were any of the skills at home?

2) The effectiveness of the PALS programme

These questions were designed to elicit the parent's views on how the programme influenced their child's social and emotional development. It also aimed to establish whether they felt the skills being taught were being used in the home environment.

- What new social skills has your child learned, if any, from being on the PALS programme?

- Has your child's ability to mix with others changed?

- Can you give examples of how his/her skills have changed?

- Are there any other areas where PALS has helped with your child's overall development?

3) Parents satisfaction

This section sought to establish whether the parents felt the programme was beneficial and to determine their satisfaction with their child's involvement.

- Were there any benefits or no benefits to your child participating in the programme?

- Were there any other factors that could have added to the development of these new skills?

- Overall how do you feel about your child's involvement?

- Overall how do you feel about the skills taught?

- Would you recommend the programme to others?

APPENDIX 11

Staff's semi-structured interview

Staff's semi structured interview

Questions were elicited based on the following four areas (SWOT analysis):

What were the strengths in the PALS programme, if any?

- Do you feel any children benefited?

- What behaviours do you think changed, if any?

- Can you give me an example of situations where the children used the skills taught?

- Do you feel the programme was accessible regarding time available?

- Do you feel the programme was easy or difficult to follow and complete?

What were the weaknesses in the PALS programme, if any?

- Were there any weaknesses in the programmes content?

- Were there any behaviours the programme did not cover?

- Are there any other weaknesses in the programme that you feel impacted on the children involved?

Did any opportunities arise from using the programme?

- Did the programme impact on the school culture and practices?

Were there any obstacles encountered while using this programme i.e. other priorities and commitments?

To finish, would you recommend the programme to others?

APPENDIX 12

PALS information and consent for parents

Dear Parent.

I am writing to provide you with some information regarding the research which is being carried out in the ▬▬ area. I am writing to you in the hope that your child may become involved in the research that is being run in their school. Your participation would be really appreciated. The details of the research are outlined in the parental consent form and parent information form accompanying this letter.

I am currently undertaking a doctorate in educational psychology at the Institute of Education, University of London and I am on placement with
                                    The research I am undertaking is part of my thesis and relates to the area of social skills development with children aged 3-6 years. This research involves looking at the PALS (Play and Learning to Socialise) programme and examining its effectiveness on the children participating.

For this study, I have randomly selected twenty schools throughout   and ten of these schools will be taking part in the research immediately. The other 10 will be taking part in the programme at a later stage. I hope that you will consent to your child's participation in the study.

As part of my involvement with this research I will be training staff in how to set up and run the programme. I will also be gathering data throughout the programme which will involve observing your child during their play time in the yard. I also hope at a later stage to gather more information through interviews from some of the parents whose children have been involved. This will take the form of a small number of parents who will be randomly selected.

If you consent to your child taking part in the research, please complete the following details along with the details attached to this letter and return to your child's school. If you have any further enquiries please do not hesitate to contact me at 087- and be assured that I will be available to discuss any issue as the research progresses. I look forward to working with you soon.

Best wishes.

Educational psychologist in training with

I...(parent/guardian), consent to my
son/daughter..taking part in the PALS
social skills programme. I understand that any information provided by myself or my
child's teacher will be treated with confidentiality.

Signature................................
Date..../..../....

An introduction to social skills

As parents you want a happy and healthy future for your children. While most people emphasise the importance of language, motor and cognitive skills for children, it is only recently that the importance of social skills has emerged. Yet good social skills are essential to how well a child adapts to school. This program teaches social skills in a thorough and systematic way.

During the early years these skills start to develop rapidly, making it an ideal time to support and encourage the development of a range of socially skilled behaviours. For young children, the skills that will help them in social interactions include:

- fundamental skills, such as looking at people when talking to them, listening and not interrupting, following class rules, sharing and taking turns;
- complex skills, such as identifying the emotions of others and responding appropriately, managing conflict without aggression and asserting one's own needs appropriately.

When these skills are performed well, children are able to develop positive relationships with other children and adults, manage conflict and learn how to express their own feelings safely. In general, children who develop these skills form good relationships with peers and adults. As a result, they develop a strong sense of self-esteem and self-confidence.

Experiencing success in a range of social situations is essential to a child's development. Children who have difficulty developing and using social skills may be disruptive or aggressive, or become withdrawn and uninvolved in social activities. It is important that we assist children to master the skills that will help them develop relationships, which are essential for their future.

About PALS Social Skills Program

The program is designed to help young children develop a range of social behaviours that will help them develop friendships and get along with others. Story-telling, songs, games, role-play and activities are used to teach the children the various skills. The program runs for ten weeks and each session lasts for 20 to 30 minutes.

The program consists of ten sessions, each one focusing on a particular skill. One skill builds on another so that the program gradually progresses to the more complex skills required for competent social interaction. The skills taught are:

1. Greeting others
2. Taking turns: talking and listening
3. Taking turns at play
4. Sharing
5. Asking for help
6. Identifying feelings
7. Empathy
8. Overcoming fear and anxiety
9. Managing frustration
10. Calming down and speaking up

How to help your child

Each week you will receive information telling you about the skill your child is learning. The Parent Information sheets will also contain suggestions for how you can help your child develop each skill at home. Like learning to walk and talk, learning social skills takes time and practice. Your support and encouragement will help your child learn to use these skills not only at preschool but also at home.

Privacy policy

Any information provided by you or your child's teacher will be treated with confidentiality.

APPENDIX 13

PALS skills taught

Contents