

## SOCIAL PARTICIPATION AND FRIENDSHIPS OF PEOPLE WITH LEARNING DIFFICULTIES: A REVIEW

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### Introduction

Wolfensberger (1983) states that "the most explicit and highest goal of normalization must be the creation, support and defence of valued social roles for people who are at risk of social devaluation". One of the most important ways in which roles may be obtained (and retained) is through the development of friendships (Kings Fund, 1982). According to the popular Oxford Dictionary, friends feel 'mutual regard and affection', implying that to have friends can assure one of socially valued status.

..... Research findings on the number and type of friendships and relationships of people with learning difficulties are not heartening. McConkey *et al.* (1983) surveyed 160 adults attending day-workshops and found that they had a very limited range of community contacts and

few friendships. De Kock *et al.* (1985) reported that the social contacts of individuals with a severe or profound handicap were almost completely limited to immediate family or staff. Cheseldine & Jeffree (1981) found that only 57% of adolescents with learning difficulties reported having a friend and that this friend invariably had a learning difficulty.

### Psychological Well-being

In addition to social role valorization, another potential benefit of acquiring and maintaining friendships is the positive relationship between psychological well-being and successful social functioning, reported by a small body of literature. Psychological well-being has been reported to be lower in people with learning difficulties. For example, Thompson

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*et al.* (1985) administered three self-report measures of depression to 21 people with mild learning difficulties. They found that 52% of the sample scored in the clinically depressed range on both the Zung Self-rating scale (Zung, 1965) and on the Beck Depression Inventory (Beck *et al.* 1961). These results are significantly different from the normal population of whom only 15% are expected to score in the clinically depressed range (Beck *et al.* 1979).

Reiss & Benson (1985) investigated the relationship between levels of social support, perceived stigmatisation and levels of depression in 45 subjects with mild learning difficulties. A powerful negative relationship between social support and depression was found, as well as a positive relationship between levels of perceived stigmatisation and depression. The authors postulate several reasons why they found such a strong relationship between levels of social support and depression. They include loneliness and not being able to cope with stressors because of lack of support. Furthermore, the depression may have resulted in the loss of social support as depressed people may be less rewarding to be with and therefore avoided by others.

Hesel & Matson (1988) investigated the possible relationship between depression, intellectual functioning, receptive language and social skills. Ninety-nine people with learning difficulties were included, ranging from those with mild to those with severe learning difficulties. The results revealed significant negative correlations between de-

pression and social skills measures but there was no significant relationship between receptive vocabulary and either depression or social skills. Intellectual level was not a significant factor.

Laman & Reiss (1987) reported associations between depressed mood, low levels of social support and poor social skills in their sample of people with learning difficulties. A factor analysis was performed on the social skills data, revealing that those subjects with high depressed mood were more likely to show inappropriate behaviour (e.g. psychopathic behaviour, threatening others, taking advantage of others, showing less interest or enthusiasm for other people's good fortune, and unassertive behaviour). There was also evidence of withdrawal in some of the highly depressed subjects.

Luftig (1989) investigated the estimated ease of making friends, the perceived social competency and loneliness in 73 adults with mild learning difficulties compared to 181 chronological age-matched controls and 132 mental age-matched controls. Subjects completed a 24-item scale designed to measure perceived social adequacy. Compared to the control groups, the group with learning difficulties reported fewer perceived difficulties in making friends, and were less critical of their own social competency skills. However, this group also reported significantly higher rates of loneliness. Unlike the control groups, this group of youngsters with learning difficulties did not see a strong relationship between social competency and loneliness. This apparent lack of insight signifies

according to the authors that people with learning difficulties do not only require help in developing their social skills but also need to learn to recognise the importance of these skills.

## **Social Skills**

Various social skills training programmes have been developed for people with learning difficulties. Robertson *et al.* (1984) reviewed outcome studies which had applied social skills training. Criteria of success included a range of targets, for example, hand-waving, eye contact, conversational questions and prompts. Most of the studies attempted to increase or change discrete types of verbal and non-verbal behaviour and were hence aimed at the performance level of social skills functioning. Most reinforcers employed in the programmes were either tangible or social. There were few attempts to modify a person's environment to provide more incentives for appropriate behaviour in natural settings. An exception was Matson & Zeiss (1979) who included peer monitoring and peer feedback. More recently, McEvoy (1988) and Knapczyk (1989) have employed peer-mediated training to promote play and interaction between young children with and without learning difficulties.

The need for structured peer involvement in integrated educational settings was highlighted by Gilkey & Zetlin's (1988) observational study. They noted a striking lack of peer interaction when 17 students with severe learning difficulties (age 17 - 21) were integrated into mainstream secondary education.

Robertson's *et al.*'s (1984) review clearly shows that individual and group interventions can be successful in teaching a wide range of social behaviours. Teaching methods have included prompting, shaping, providing detailed instructions, providing feedback, role playing and modelling. However, many of these studies did not investigate generalization of the learned behaviours into the natural setting. Often follow-up was carried out after a short period (less than six months) and only involved role-play rather than a natural setting. Robertson *et al.* query the clinical significance of the results and suggest that future researchers need to focus their attention on finding factors that may be used in predicting successful adjustment to 'normal living'. They emphasise that the behavioural changes obtained need to be socially validated and that social skills training must be carried out in conjunction with the provision of environments that are conducive to appropriate behaviour.

## **Beyond Social Skills Training**

Problem-solving techniques have more recently been used to equip people with learning difficulties for social functioning. Castles & Glass (1986) compared the use of social skills training and problem-solving techniques, individually and in combination. Findings indicated that those who received the inter-personal problem-solving training component improved on ratings of personal-social responsibility. However, generalisation of treatment gains was again not investigated.

Foxx *et al.* (1984) endeavoured to teach people with learning difficulties about appropriate social/sexual behaviour by means of an adapted board game. Although participant's knowledge of appropriate behaviours was significantly increased after the training sessions, no behavioural measures of social functioning were employed to assess efficacy.

It should also be questioned whether the specific range of behaviours taught in social skills and problem-solving training programmes are sufficient to improve social interaction. They may only form a small part of a complex set of behaviours that must be used in synchrony to be of any value. Hence, improvement in just one aspect may not bring about a significant improvement in real life situations if the newly learned behaviour is not incorporated accurately into a web of social nuances.

Hobson *et al.* (1989) investigated one possible source of inter-personal difficulty, and hence lack of relationships and friendships. They reported that people with learning difficulties are less sensitive to other people's bodily expressions of affect. Although they performed equally well to a control group on a non-emotion recognition task, they performed less well when they had to recognise emotional states from photographs and tape-recorded voices.

Reed & Clements (1989) investigated the relationship between ability to recognise and understand emotional states and level of language ability of 37 young adults with learning difficulties. There was a high correlation between language ability and emotional aware-

ness. However, this sample required greater language abilities in order to be successful in the emotion recognition tasks than would be expected from studies using young children. Hence, one could argue that people with learning difficulties have specific deficits in relation to emotional awareness, separate from language abilities.

### Opportunities for Integration

The acquisition of appropriate social skills and knowledge necessary to engage in meaningful relationships will not necessarily lead to the formation of such relationships. Having the opportunity to meet and socialise with other people is an essential part of acquiring friends and acquaintances. The number of friendships that people with learning difficulties have is extremely low and often zero (Felce, 1988; Fleming & Stenfert Kroese, in press). Felce (1988) emphasises that although frequency of contact can be measured, it is difficult to obtain a measure of quality of any one relationship, which is necessary in order to define a friendship. However, Felce also stresses that such concepts are at present superfluous because of the paucity of relationships that can be analysed in this manner.

Use of amenities, particularly in the pursuit of leisure activities, may provide an avenue for social integration and hence possibilities for friendships to develop. However, historically leisure time of people with learning difficulties has been mostly passive and often spent in solitary activities, 'the TV in the evenings pattern, (Tyne, 1978). Donegan &

Potts (1988) confirm this in a study of nine people with learning difficulties who lived alone in the community. All participants were knowledgeable about local facilities. However, due to lack of money and poor social networks they engaged in few activities outside the home. The authors describe their subjects as living on "the fringe of society".

Fleming & Stenfort Kroese (in press) evaluated the quality of life of 17 adults who had moved from long-stay hospitals to group homes one year previously. The evaluation revealed that there had been an increase in adaptive behaviour, particularly in house-bound skills. However, there was low community presence, with few of the activities of the residents being integrated, and with evening outings occurring on average less than once a fortnight. Low staffing ratios and transport problems were cited by staff as being the cause of these difficulties.

Providing a range and balance of activities that may lead to greater community presence and satisfying relationships requires both creativity and persistence by staff. Cragg & Garvey (1990) have devised a menu of possible activities based both in and out of the home. Included in the menu are 48 activities centred around forming, developing and maintaining relationships. The efficacy of such a 'menu' approach is still to be investigated.

Atkinson's (1985) survey of 50 people who had moved to independent community-based accommodation found that this relatively able group of people participated in a variety of activities,

many of which were based in the community. However, many participants in the study described social activities that they *used* to do. Often an activity was stopped because there was nobody to do it with, suggesting a lack of social ties. Another trend was that of 'getting stuck'; many of the participants had interests that could have been expanded into a more social or shared activity if the person had the confidence or 'know-how' to do so. It was also found that although participants mixed with members of their community, this did not always result in actual contact with individuals. The person with a learning difficulty often acquired observer status, i.e. tending to watch activities rather than joining in.

Salzberg & Langford (1981) described a model for providing opportunities for people with learning difficulties to participate in leisure activities and form contacts with non-handicapped people. People with learning difficulties were matched to non-handicapped individuals depending on their interest and abilities in leisure activities. They were asked to engage in at least one leisure activity per week in an integrated setting. Though this scheme did not specifically aim to help people with learning difficulties to make friends, it did provide opportunities to meet and mix with ordinary people and it gave them opportunities to gain skills in leisure activities. However, long term benefits of this scheme were not evaluated.

A similar scheme reported by Walsh (1985) found that 22 out of 25 'friends' wished to maintain contact with their person with learning difficulties

after a four month period. However, the 'friends' did encounter some difficulties, particularly in terms of communication and in pitching so as to ensure enjoyment and avoid failure. The feedback from the people with learning difficulties and their families was on the whole very positive. However, as in the Salzberg & Langford programme, no detailed efficacy measures were employed.

Citizen advocacy with its aim of: "helping to build one to one relationships between community members interested in sharing their time, abilities and friendship with individuals who have limited opportunity to participate as valued community members" (Forrest, 1986), has been another way of helping people with learning difficulties to form meaningful relationships with members of the community. Citizen advocacy is still in its infancy in the UK with less than 20 schemes in operation, but it is well established in the U.S.A. Apart from encouraging people to befriend a person with learning difficulties, this approach also encourages the 'advocates' to speak up for the person and defend their rights. It is too early to assess whether these schemes actually result in meaningful and long-term friendships.

Thus, there are a number of ways in which opportunities for social contact with the community can be encouraged. However, how effective these schemes are in producing long-term, socially relevant benefits for people with learning difficulties has not yet been established. It must also be recognised that many of their social contacts will still be with other people who also have learning difficulties. For example, Koller *et al.* (1988) investigated the relationships

of young adults with learning difficulties. They found that people who received day services had a higher level of socialising than those who did not, but almost exclusively with other people with learning difficulties. As these social contacts and friendships can be said to be equally valuable, it is important that factors related to degree and quality of relationships between people with learning difficulties should also be investigated. Foxx-Henning (1979), who made extensive informal observations in a sheltered workshop, argues that helping behaviours between people with varying degrees of learning difficulties and physical disabilities are self-reinforcing. They provide the helper with a sense of usefulness which may increase self respect. Helping behaviours were observed to be consistent and resistant to attempts by staff to 'extinguish' them.

## Conclusions

It appears that moving people with learning difficulties into houses in the community will not ensure per se that relationships with others living in that community will be established. Hence, more active policies must be pursued to provide opportunities for people with learning difficulties to form acquaintances and friendships. Such policies may include forms of leisure and activity planning (Cragg & Garvey, 1990) as well as schemes which make use of volunteers for befriending initiatives.

Of course, no number of introductions will guarantee a successful social life, and hence interventions which enable people with learning difficulties to

understand and participate in the complex but rewarding dynamics of friendships must not be discarded. Simplistic social skills training packages need to be broadened so as to move beyond the teaching of superficially appropriate behaviours in artificial settings. They should aim to enable people to perceive, understand and respond to the subtler meanings of these behaviours, as they occur in everyday life. Peer-mediated learning may well be an important development towards this aim as it overcomes problems of generalisation both in terms of setting as well as the people involved in the social context.

## Summary

Community presence and participation, especially in the form of meaningful relationships and friendships, have been recognised as important objectives for a quality community care service for people with learning difficulties. However, such relationships are often noticeably lacking in the lives of this section of the population. This paper describes some of the literature relevant to enabling social relationships and friendships, both in terms of acquiring the appropriate social skills and in terms of service developments which may provide better opportunities for social participation.

Evidence for potential benefits of acquiring and maintaining friendships, such as the positive effects on psychological well-being are reviewed, and implications for service planning, such as structured staff procedures and advocacy schemes are discussed. Also, the research methodology in this area is critically

reviewed and treatment outcomes are discussed in terms of generalization and clinical relevance.

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