

# USING SOCIAL STORIES TO TEACH SOCIAL SKILLS:

## A Professional's Guide

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## **What are Social Stories?**

Social stories are a growing topic in the education field. They are a behavioral intervention to improve children's social skills through combination of visual and verbal cues. Children who are diagnosed with mild to severe disabilities are evaluated and assessed. Teachers then develop and implement an intervention they believe will be successful and effective in improving the child's social skills. The teacher uses task analyses to break down behavioral goals through language.

They teach children appropriate skills such as:

- Prompting
- Joining-in behavior
- Sportsmanship
- How to maintain conversation
- Skill Acquisition
- How to respond to cues
- How to describe settings

## **Why use Social Stories?**

The overall purpose is to increase children's social competence. By improving their independence, children gain confidence communicating with their peers and engaging in play alongside peers. As a result, they learn to share materials in their classroom, learn turn taking and other choice making skills. Each social story intervention is geared specifically towards the child. Social stories emphasize on cognitive growth, social skills, emotional capacity and self-regulation.

## **Who needs social stories?**

Social stories benefit children with mild to severe disabilities, specifically children with Autism or Asperger's. Teachers will evaluate and assess the child's behavior that needs to be addressed. Social stories are found in various education settings, but are most common in school classrooms. It is important for the intervention also to take place in a naturalistic setting, so they will also assess the child in their home environment.



**Case Study:****Before the intervention:**

Picture an 8-year old girl, Emily, lost in her 1st grade classroom. She wants to be liked by her peers, but they ignore her and tease her. She looks just like them, but her social behavior is not the same. She misinterprets their gestures and expressions. She has no one to play with during recess. Emily feels isolated. She has trouble getting up in the morning to go to school to face this social rejection.

**After the intervention:**

Our goal is to implement an intervention that will help increase positive social behavior for Emily. We will design social stories with the intent of helping Emily become more comfortable with her peers. In order to do this, a teacher will use role-plays to help Emily predict how others will deal with specific situations. A teacher with knowledgeable strategies of social stories will be able to give Emily an insight of her peers' feelings. They will help Emily interpret facial expressions and gestures. This will give Emily an opportunity to develop her social skills so she has a higher self-esteem when interacting with others at school. The teacher should give Emily advanced warning about this schedule in the classroom for the day. This will help reduce her anxiety. If there is minor adaptation to the routine, she will not be as surprised because she will have had forewarning.

By implementing social stories as an intervention to help Emily, the teacher will focus on improving her social skills. According to Emily's case study, the evaluation shows she has difficulty conversing with peers and understanding how to react in situations. The goal of the social stories will be to give Emily the ability to match her social skills with the demands of a situation. This lack of social skills has impacted Emily's daily life and has been emotionally draining to her personal development of self-esteem and confidence. If necessary, we can increase the number of social story sessions with the hope of the best outcome possible. The first few sessions should be done on a one-on-one basis with Emily. With Emily's permission, we can expand the social stories to a cooperative small group setting. This would give Emily the opportunity to explore sensitive issues and learn how to evaluate a solution to a problem at hand.

## **Steps to follow to deliver this intervention:**

(Swaggart, 1995)

1. Identify a target behavior or problem situation for social-story intervention.
2. Define target behaviors for data collection.
3. Collect baseline data on the target social behavior.
4. Write a short social story using descriptive, directive, perspective and control sentences.
5. Place one to three sentences on each page.
6. Use photographs, hand-drawn pictures, or pictorial icons.
7. Read the social story to the student and model the desired behavior.
8. Collect intervention data.
9. Review the findings and related social story procedures.
10. Program for maintenance and generalization.

## **Suggested steps to take:**

### **Alter the intervention if necessary:**

If the desired behavior fails, adjust to the child's functioning level.

Review the findings and social story procedures.

Alter the program that is being implemented.

### **Use appropriate language.**

1. Descriptions of environmental, social, and/or behavioral cues that a student can learn to identify and discriminate from other stimuli;
2. Directive statements that tell the student how to respond to the cues described;
3. Statements that describe other people's thoughts, feelings, and behaviors; and
4. Descriptions of the setting and typical behaviors in that setting that may help the individual recognize the context of the social story (Barry & Burlew, 2004, p.45).

### **Use proper teaching strategies.**

### **Follow a specific routine.**

### **Use target books.**

### **Accept every student the way they are.**

## Discussion Questions:

### What is an example of a Social Story?

An example of a Social Story for “Looking and Talking” (Scattone, 2007, p.399).

When I come to the clinic, I see lots of people. Some are nurses. Some are doctors. Some are kids! Usually someone talks to me. When someone talks to me, I will try to look at part of their face. Most people like it when I look at their face. Looking at their face makes them feel good. This lets them know I'm listening. If I look at them when I am talking, they will like this a lot. They will think I'm a nice boy I will try to look their face most of time we are talking.

Comprehensive Questions:

1. Who do I see at the clinic?
2. What should I try to do if someone talks to me?
3. Do most people like it when I look at them while we talk?

### Children have different types of social impairments. Let's compare three common types.

1. **Social avoidance:** Children with tantrums, children who shy away or escape from social activities. This may be because they have hypersensitivity to certain sensory stimuli. A child who is constantly overwhelmed by his environment will likely not be successful in many interventions. Thus, part of the intervention will be addressing those sensory stimuli that bother them.
2. **Social indifference:** Majority of children with autism are socially indifferent because they do not actively seek social interaction, yet do not aggressively avoid interaction. Social Stories help children with Autism because they simplify and illustrate an interaction they may otherwise avoid.
3. **Social awkwardness:** Children who are higher functioning children but lack reciprocity in conversation and interest. They will focus on their favorite topic and ignore conversation about other subjects. Social stories are often very effective for these children because they teach them about their environment and suggest appropriate behaviors.

## Frequently Asked Questions:

### **Do social stories need to be implemented in schools, home, or both?**

Interventions are not only done in the school setting. For example, in the home setting they may help with a child's difficult bedtime routine. This yields positive outcomes for the school setting because if they are able to improve the child's bedtime routine, it is likely that they will be coming to school calmer and more rested. Thus the child will be prepared for school, attentive in class, and receptive to learning overall.

### **How long does it take to see an effect on the child's social skills?**

The effectiveness of the story should be monitored consistently. If after a week or two of working with a particular story, there is little noticeable change, the story should be reworked. As the child becomes more and more successful with the situations presented in a particular story, that story can begin to be faded out or changed to meet the new needs of the child. The number of review sessions can be lessened from once a day, to every other day, to once a week, to twice a month, and so on until they are no longer needed.

### **What skills could be taught by using social stories?**

They teach children appropriate skills such as maintaining a conversation with peers, joining-in behavior and sportsmanship. They teach children how to describe settings, respond to cues, and prompting.

They give children perspective on thoughts, emotions, and behaviors of others. They help them predict the actions of others, they may otherwise not understand. The structure of social stories, their pictures and text descriptions help children with autism, rather than observing others and not knowing their behaviors.



## Annotated Bibliography

Barry, L.M., & Burlew, S.B. (2004). Using social stories to teach choice and play skills to children with autism. *Focus on Autism and Other Developmental Disabilities*, 19(1), 45-51.

This study discussed the importance of social stories on two children with severe Autism. The researchers examined the results of a teacher and teacher's aide who taught children choice-making and play skills in their classroom. The teachers used task analyses to break down behavioral goals through language. They taught the child how to respond to cues and how to give descriptions of their settings. This close evaluation and initiation helped recognize the positive effect of social stories. Even though the study showed these results, there are limitations because the study only looked at two children and two teachers. One participant was placed in a general education classroom as a result of her improved play skills. The other participant showed increased independence and was able to engage in appropriate play. They were able to individually assess the skills of the two Autistic children to develop and implement a successful intervention.

Gut, D.M., & Safran, S. P. (2002). Cooperative learning and social stories: Effective social skills strategies for reading teachers. *Reading and Writing Quarterly: Overcoming Learning Difficulties*, 18(1), 87-91.

This article focused on strategies that teachers can use to increase social competence. Cooperative groups and social stories help children improve their social behavior. Many children with mild disabilities are rejected by peers. Meanwhile many children also face anxiety when schedules are changed, whether it is at school or at home. Social stories are a way to explain what is occurring and why it is occurring. This study describes visuals and illustrations and how these two key tools can help specific skills.

Quilty, K.M. (2007). Teaching Paraprofessionals how to write and implement social stories for students with autism spectrum disorders. *Remedial and Special Education*, 28(3), 182-189.

This study closely looked at data focusing on ways to write and implement social stories for children with autism. The data looked at the social story's impact on children with autism and how effective they are. This study offered professionals feedback and suggestions specifically how to format social stories for each child.

Rahill, S.A., & Teglassi, H. (2003). Processes and outcomes of story-based and skill-based social competency programs for children with emotional disabilities. *Journal of School Psychology, 41*(6), 413-429.

This study looked closely at social stories and skill streaming. They used small groups of elementary school children from 2nd to 6th grades. They examined behavioral scales, assessments, peer influences, and teacher ratings. When comparing both social stories and skill streaming, the cognitive scores were higher for social stories. This cognitive growth was shown with continued sessions, therefore the more sessions, the better. During the sessions, they researched risk and protective variables that shape interactions in each setting. The treatment was also effected by the impact of the teacher's strategies. The results show that different intervention programs are based depending on individual differences. This study emphasized the participant's cognitive growth, social skills, emotional capacity, and self-regulation.

Rogers, M. F., & Myles, B.S. (2001). Using social stories and comic strip conversations to interpret social situations for an adolescent with Asperger syndrome. *Intervention in School and Clinic, 38*(5), 310-313.

This article focused on the use of comic strip conversations to help adolescents with Asperger's. In order to determine if the study was effective, the teacher counted the number of verbal redirections the child needed and the number of minutes the child was late to class. The child ended up requesting comic strip conversations both in school and at home. This technique clearly helped the child understand his social world. By drawing cartoons of social situations, he was able to visually understand connotations of words that he previously misunderstood.

Sansoti, F.J., & Powell-Smith, K.A. (2008). Using computer-presented social stories and video models to increase the social communication skills of children with high-functioning autism spectrum disorders. *Journal of Positive Behavior Interventions, 10*(3), 162-178.

The purpose of this study was to see if computer-presented social stories were successful tool to increase social skills of children with autism. The computer-presented social stories and video models were implemented then the participants were observed during recess time to see if their behavior had improved. The participant also watched video tapes repetitively to learn and memorize behaviors. Video modeling helps the child learn how to modify their behavior, change what they are doing wrong and shape the behavior for the appropriate setting whether it is home or school. Overall, the data showed the combined treatment of both social stories and video modeling was effective.

Sansoti, F.J., & Powell-Smith, K.A. (2006). Using social stories to improve the social behavior of children with Asperger's syndrome. *Journal of Positive Behavior Interventions*, 8(1), 43-57.

The purpose of this study was to see the success of individualized social story intervention. The study looked at three children with Asperger's Syndrome and the results showed two of three children's social behaviors increased when social stories were implemented. The direct observations occurred during the children's unstructured activities at school. The intervention resulted in an increase in skills such as prompting, joining-in behavior, sportsmanship, maintaining conversation and skill acquisition. Errors with the study were found with inconsistent responses from the third respondent. The issue found was their parents did not follow through making sure their children completed their journal entries at home. This study was significant because it looked at social stories applied and evaluated in a naturalistic setting, both in the children's school and home environments.

Scattone, D. (2008). Enhancing the Conversation Skills of a Boy with Asperger's Disorder through Social Stories and Video Modeling. *Journal of Autism and Developmental Disorders*, 38(2), 395-400.

This study combined social stories with video modeling to help a boy with Asperger's Disorder increase his conversation skills. Video modeling has been proven effective with children with autism by improving their conversational speech with different partners and settings. In the case of this study, the boy's eye contact immediately improved. He also increased smiling and social interactions with peers in school. This study gives examples of social stories for eye contact, smiling, initiations and taking turns talking. A setback to this study is researchers are not sure how to determine which component, social story or video modeling, was more effective.

Soenksen, D. & Alper, S. (2006). Teaching a young child to appropriately gain attention of peers using a social story intervention. *Focus on Autism and Other Developmental Disabilities*, 21(1), 36-44.

The purpose of this study was to describe how to use a social story intervention to teach a child ways to gain attention of his peers. Two ways that were suggested to gain attention of peers was to say the peer's name or look at the peer in their face while talking. The social story was a story book that included both verbal and visual cues. The social stories were easy to implement and were age appropriate specifically for the child. The results of the study indicated the social stories were effective across settings for the child in math class, recess, and during choice time at school. The child learned how to gain attention of his peers and was able to maintain the behavior.

Swaggart, B.L. (1995). Using social stories to teach social and behavioral skills to children with autism. *Focus on Autistic Behavior*, 10(1), 1-16.

The purpose of this study was to describe the success of social story intervention programs on three children with moderate to severe autism. The authors provide suggestions for implementing strategies to increase appropriate social behavior. One of the participants had inappropriate social responses so the researchers targeted her greeting behavior for intervention. They looked closely at improving her greetings, appropriate touches, eliminating aggression, and teaching the participant from ignoring others. Other social story interventions taught the participants to encourage sharing and processing one concept at a time in book-like format presentations. Overall, it is vital to individually structure the intervention based on the child's functioning level.