

Social Interaction Skills and Strategies for Supporting Families to Apply Sibling-Implemented Intervention

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《 Abstract 》

The finding of a research synthesis (Kim & Horn, 2010) provides research and professional literature on the effectiveness of siblings' roles as intervention agents for improving their siblings with disabilities' age-appropriate skills in their natural environments. Based upon the literature review, this paper provides a practical and user-friendly description of the procedures, strategies, and techniques for implementing a sibling-implemented social interaction intervention to facilitate young children with disabilities' play engagement and social interaction skills. Thus, practitioners such as early childhood special teachers, family members, and other researchers can after reading the paper apply the intervention with their typically developing children in their natural environment. Finally, this paper implicates that the effectiveness of the sibling-implemented intervention focusing on social interaction skills for young children with disabilities needs to be investigated for future research.

주제어 : Sibling(s), Young children with disabilities, Social interaction, Intervention

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I . Introduction

Social integration and formation of peer relationships are considered to be major issues for ensuring successful inclusion of young children with disabilities into typical educational settings (Guralnick, 1990; Odom, 2002; Odom, McConnell, & Chandler, 1993; Odom, McConnell, & McEvoy, 1992; Strain, 1990). Therefore, achieving age appropriate peer interaction skills and the ability to develop positive peer relationships for young children with disabilities is a major focus for their families and practitioners. Acquisition of age-appropriate social interaction skills is, in fact, a critical factor for ensuring young children with disabilities' successful participation and having a sense of belonging in school setting.

Young children's positive peer interactions and relationships also play a foundational role for building peer friendships in the future (Odom, McConnell, & Brown, 2008; Odom, McConnell, & McEvoy, 1992; Vaughn, Colvin, Azria, Caya, & Krzysik, 2001). However, children with disabilities frequently have difficulties with participating in reciprocal peer interactions due to their limited or lack of specific social skills. Thus, they frequently have very limited peer-related social experiences although they may be exposed to peers in preschool settings. Although children with disabilities attend an inclusive preschool setting, they infrequently initiate or maintain appropriate social interactions with other children.

Many typically developing children has the opportunity to spend large amounts of time with their sibling playing together in their daily routines (Azmitia & Hesser, 1993; Downey & Condrón, 2004; Stoneman, 2005). Older siblings are frequently expected by their parents to serve as peers as well as facilitators during playtimes. However, if siblings experience no or negative responses from their siblings with disabilities, they may feel frustrated and thus hesitate to engage in play or social interactions with their siblings with disabilities. Both children with disabilities and their siblings may experience limited positive daily learning opportunities even though they spend significant amounts of time together in their family contexts (Kim & Horn, 2010; Knott, Lewis, & Williams, 2007; Stoneman, 2005). Thus, siblings may need to learn some specific social interaction skills to facilitate positive interactions with

their siblings with disabilities. If siblings learn specific skills to support their siblings with disabilities' social initiations and interaction, they can potentially play an important role in improving the social interaction skills of their preschool siblings with disabilities. Thus, sibling-implemented social interaction intervention has the potential to provide young children with disabilities with additional positive opportunities for learning and practicing peer social interactions. Children with disabilities' social interaction skills can be enhanced through these learning and practice opportunities with their siblings who have more advanced social skills which in turn support their use of the skills with peers at school (Kim & Horn, 2010).

A large body of research, in fact, has demonstrated that peer-implemented interventions are an evidence-based practice in that peers are powerful intervention agents for enhancing social skills of children with disabilities, particularly, children with autism (McConnell, 2002; Odom, Brown, Frey, Karasu, Smith-Canter, & Strain, 2003). In these studies, the peers were taught specific social skills and strategies to support their initiation and response to children with disabilities and for sustaining interactions once begun. Currently only a few studies (i.e., James & Egel, 1986; Tsao & Odom, 2006) are available in which siblings have been demonstrated to be effective intervention agents for improving their siblings with disabilities' social interaction skills. However, given the strong evidence of effectiveness of peer-implemented interventions, it would appear that siblings could also be successful intervention agents if they are systematically taught appropriate social skills and strategies.

The purpose of this paper, thus, is to provide information on effective peer intervention strategies that families of children with disabilities can implement to facilitate their children's meaningful social interactions during playtimes. Specifically, this paper will describe a process and useful information for families and practitioners to work together to implement systematic training for siblings on how to become successful social skills intervention agents. The sibling training presented is a modification of a peer-mediated intervention, "Stay-Play-Talk," developed by English and colleagues (English, Shafer, Goldstein, & Kaczmarek, 1997). In adapting the "Stay-Play-Talk" program, elements of the Social Skills Curriculum developed by Strain and colleagues (Strain, Danko, & Lawry, 1998) were incorporated into the

sibling training as well. In the remainder of the paper, the sibling training intervention will be presented beginning with preparation and planning tips followed by a description of how to implement the training.

II. Method and Procedure

1. Preparation and Planning Tips

To support successful implementation of the sibling training, families and their professional partners should engage in some preplanning and consider the following: (a) preparing the setting and selecting appropriate materials, (b) scheduling training and play times, and (c) understanding the role of each family member and other adults.

2. Setting and Materials

Preparing the setting and gathering the needed materials is an important first step in setting for ensuring children's social interaction during their playtime. In preparing the setting or play area, we need to address multiple aspects including: a) Is it a comfortable setting with appropriate lighting and noise levels? b) Is the size of the space appropriate? c) Are opportunities for disruption/distraction reduced? and d) Are the materials provided supportive social interactions? Play areas need to be comfortable as well as quiet enough that children can pay attention to their play. The space allotted for play needs to be of an appropriate size to allow the children to move freely yet not so large that the children can easily play completely separate from one another. Play areas should also be chosen such that the chance for intrusion by others and other distractions (e.g., lots of toys, accessible foods/snacks) is reduced.

Selection of toys and materials should be carefully considered once families have chosen the appropriate play area. Some toys or materials such as dramatic play materials or toy barn with animals facilitate more

children's social interaction than other more solitary toys or materials such as books, puzzles, and art materials. Additionally, all children have preferences for specific toys and materials and use of these preferred materials will support their sustained interests and attention. Thus, families and professionals should as they select toys or materials consider the children's preferences and how the toys might create opportunities for social interaction between the children.

3. Scheduling Dates and Time

As plans are made for beginning intervention, the family should carefully think through the scheduling issues of their children both the child with disabilities and the typically developing sibling. The frequency and length of the sibling implemented training should be appropriately matched to the children's time availability, chronological ages, needs, and level of understanding. For example, sibling training for a four-year old child who has a relatively short attention span would need to be different from that for a nine-year old child. For the four-year old child, the parent would need to schedule short session in the beginning and then gradually increase the length of the session as the child becomes more comfortable and confident. This will also serve to prepare the sibling for training for later learning of more complicated skills and strategies that requires longer attention spans. Furthermore, the parent would incorporate more frequent breaks for a younger sibling when the sibling is learning more complicated and difficult skills and strategies. However, breaks should not be so long as to potentially result in the sibling finding it difficult to return to the training.

Some children may need more praise and encouragement in order to maintain their attention. In this case, the parent needs to carefully plan for how they will provide frequent praise and encouraging comments. Thus as they plan the intervention, the parents need to carefully consider their children's learning characteristics and styles. Parents must also carefully observe both of their children and be prepared to alter the training and play setting based upon behaviors observed. For example, if either child is having a bad day due to illness or possibly having experienced a conflict

with their sibling or a friend, the session may need to be shorten or skipped altogether. Certainly changes to the planned schedule may also need to occur due to schedule conflicts (e.g., doctor's appointments, birthday party, unexpected family event). However, maintaining as consistent schedule as possible is strongly recommended.

The frequency and length of the sibling training may also need to be modified depending on the amount and difficulty of skills or strategies that the siblings have to learn. For example, some skills and strategies are more complicated and difficult for the sibling to master than other skills and strategies. In order to teach relatively complicated and difficult skills and strategies, the parent will need to spend more time with the sibling by providing several different examples, modeling specific examples, and repeatedly practicing the skills and strategies so that the sibling can feel confident in their ability to use the skills and strategies.

4. Understanding Roles

Before a family starts to work with their children, all participants should clearly understand their respective roles. For the parents' role, both parents need to carefully read through the description of the intervention components and sequences, the specific social interaction skills and strategies, the tips for parent assistance, and each family member's role. Then, they need to explain the intervention briefly to the sibling. During the sibling training, one parent teaches the specific social skills and strategies to their older child (i.e., sibling without disabilities) and practices the skills with the sibling through role plays. While one parent works with the sibling, the other parent or other adult may need to supervise their child with a disability. Following the sibling training session, the parent will ask their children to play together and specifically asking the sibling to use the learned skills and strategies. The parents provide assistance in the form of prompts and reminders as needed. For example, if the sibling does not appropriately use the skills during the play session, the parent would provide a cue card or verbal prompt. Or if the child with a disability displays a negative behavior, the parent would step in and help to resolve

the issue and then assist with resuming the play session as appropriate.

The siblings' specific role is the intervener for their siblings with disabilities by using the specific social skills and strategies they have been taught by their parent. Thus, after participating in the training with their parent, they practice the learned skills and strategies through role plays with their parent. Finally, the siblings play with their sibling with a disability using the skills and strategies first receiving assistance from their parent(s) as needed but with the ultimate goal being that they do so without assistance from their parent(s). For the children with disabilities, the expected role is that they play with their sibling with their sibling's support and help.

Finally, if a professional such as early childhood special education teacher or researcher is working together with the family to implement the sibling training, the professional or researcher may need to work together and teach the parents how to implement the training including providing support and coaching. The professional/researcher should discuss together with the parents the general nature of the training and strategies for planning for and implementing effective training. For example, at initial meeting the parents and professional/researcher brainstorm ideas and fully discuss the key elements for successful training with the parents including the frequency and length of each training session, teaching strategies that are matched to their children's learning and play characteristics, and coaching strategies. During the implementation of training by the parent, the professional/researcher can serve in the role of supporting the parent and providing them with feedback as they conduct the training sessions with the sibling and as the parent coaches the sibling in the practice session with the child. At the end of the session the professional/researcher and parent can meet as needed and discuss ideas and thoughts for solutions of difficult situations that might arise. For example, if the child consistently refuses to play with the sibling even after the sibling's several asks to join in play, the parent and professional/researcher could meet together and generate the solution of having the parent in the next session play together with the sibling using the child's preferred toys. The parent and professional/researcher would hypothesize that this solution might serve as an attention getting and motivating strategy to bring the child into the play context.

III. Sibling Training Implementation

Once the preparation activities have been completed, the family is ready to begin implementation of the intervention. The sibling training is comprised of the following three steps: Step one—*Stay*, Step two—*Stay and Play*, and Step three—*Stay, Play, and Talk* (adapted from English et al., 1997). For Step one—*Stay*, the sibling is taught how to move into physical proximity of the child with a disability, stay in proximity, and get the child's attention. For Step two—*Stay and Play*, the sibling is taught to get the attention of the child and join in play with the child. Finally, for Step three—*Stay, Play, and Talk*, the sibling is taught how to begin a conversation with the child while continuing to play with the child. Prior to implementing Step 1—*Stay*, the parent needs to decide if this step is needed. That is, if the sibling already routinely initiates play with their sibling with a disability, the parent should move directly to teaching the skills and strategies for Step 2—*Stay and Play*. The following sections provide detailed descriptions of each step including strategies for the withdrawal of assistance by the parent.

1. Step 1 – *Stay*

As previously noted, one parent primarily works with the sibling while the other parent or other adult as appropriate stays with the child with a disability. The sequences for step 1 include: (1) parent provides a definition of the skill to the sibling, (2) sibling completes verbal rehearsal of the definition, (3) sibling applies the skill to an example provided by the parent, (4) parent provides instruction on the use of a “cue card,” (5) parent models the skill for the sibling, and (6) parent and sibling role play the use of the skill. Table 1 provides the example script for Step 1—*Stay*. Given that Step 1 is relatively simple and straightforward, it is not necessary for the parent to require the sibling to demonstrate acquisition of the skills by playing with their sibling with a disability. Instead, the parent moves directly to Step 2, *Stay and Play*, and will have the sibling practice

the Step 1 and 2 skills and strategies after completing the teaching of the skills for Step 2.

<Table 1> *Training Script for Step 1 – Stay*

	Script
Parent:	“When you want to play with your friends, you need to be with them, which we will call it ‘stay’.” “Stay means that you move to the child...” “Now, can you tell me what would you do for stay?”
Sibling:	“Move to where (name) is playing.”
Parent:	“That’s right. Now, let’s suppose that you see (child’s name) playing with a car in the living room and you are in the kitchen, what do you think you should do?”
Sibling:	“I move to the living room where (name) is playing with the puzzle.”
Parent:	“Great, when you move to (name), what would you do next?” (if the sibling does not respond, wait 3 sec. and provides a hint)
Sibling:	“Look at ...”
Parent:	“Right. Now, let’s think about what you would do after you stay with (name). Although you stay with (name), he/she may not look at you. So, you may need to get the child’s attention. In this case, what kind of things do you think would be good to say to (name) for getting his/her attention?”
Sibling:	“Hi” “Call (child’s) name.”
Parent:	“That’s right. You did a great job. Here, let’s look at a cue card I have that can help you remember these steps.”
Sibling:	<div style="border: 1px solid black; padding: 5px; margin: 5px 0;"> <p>“Hi” Touching / Smiling Naming “What are you doing?” / “You are doing puzzle.” “That looks like fun.” / “I like it.”</p> </div> <p>“Let’s practice with this card.” Provide a model for each strategy.</p> <p>Read and observe the model provided by the parent. Then, practice with the parent. (parent plays the child’s role)</p>

- * Note : a. If the sibling does not respond, the parent will wait 5 sec. and then re-ask a question with prompts.
 b. If the sibling continues not to respond to the parent’s question, the parent will provide the answer and then re-ask the question.
 c. If the sibling has some difficulties with practice, the parent will provide a model.

2. Step 2 – *Stay and Play*

After completing the training process for Step 1–*Stay*, the parent begins the training on Step 2–*Stay and Play* with their children. The activities for Step 2 are similar to those of the previous step. First, the parent engages in a brief review by asking the sibling if he or she remembers the skills learned and they briefly talk through them. Then the parent moves to building on these previously learned skills for Step 2. Table 2 describes the example script for Step 2–*Stay and play*. The parent also provides additional instruction as appropriate for the sibling’s skill and knowledge level on the use of social strategies such as sharing and requesting to share that may help the sibling’s use of the skills. Specific descriptions of some of these relevant social strategies (i.e., sharing and requesting to share) are provided in Table 3. The parent should model each selected strategy and then practice through role playing with the sibling.

Once the parent and sibling have completed the training on Step 2, the parent asks the sibling to play with the child with a disability using the skills and strategies learned in Step 1 and 2. The parent provides verbal prompts if the sibling does not initiate or does so inappropriately. The parent may also provide “cue cards” if the sibling continues to have difficulties with using the skills. The parent needs to stop the session if their child with a disability engages in a challenging behavior that would be inappropriate for the sibling to address.

<Table 2> *Training Script for Step 2 – Stay and Play*

	Script
Parent:	“Do you remember what you need to do for ‘stay’? Tell me what you would do for ‘stay’.”
Sibling:	“Move to where (name) is playing, then look at (name) and then say ‘hi’ or call his/her name to get his/her attention.”
Parent:	“That’s right. You remembered. Now, let’s think about what you would do to play with (name). After you stay with (name) and get his/her attention, what would you do to join in play with (name)?”
Sibling:	“Asking, ‘can I play with you?’ ”
	“Very nice. When you want to join in the play, you need to ask if you can play. Now, let’s look at this cue card.”
Parent:	Ask to play with (name) (“Can I play with you?”) Bring a toy over/Put a toy in their hand Share/ Use the same toy Ask to help (“Do you need some help?” / “I can help you.”)
Sibling:	“Let’s practice with this card.” Provide a model for each strategy. Read and observe the model provided by the researcher. Then, practice with the researcher.
Parent:	“Very nice.” Now, I will tell you some tips in the case (name) does not answer or respond to you even though you asked to join in the play.” ☞ See Table 3 (i.e., ‘Sharing’ and ‘Requesting to share’).

- * Note :
- a. If the sibling does not respond, the parent will wait 5 sec. and then re-ask a question with prompts.
 - b. If the sibling continues not to respond to the parent’s question, the parent will provide the answer and then re-ask the question.
 - c. If the sibling has some difficulties with practice, the parent will provide a model.

〈Table 3〉

Social Strategies

Strategies	Description	Examples	Tips for use
Sharing	Giving a toy or material to the other child	“Here, ...” giving a toy over or put a toy in ... hand	If the target child drops or throws the toy, or even walks away, it does not mean that the child does not want to play. Try again! - Drops or throws: Pick it up and ask in another way, “Here, (name) You have a red car. You like it?” “Do you want another? How about a blue car?” - Walks away: Touching shoulder or arm, saying “Hey, here it is. Let’s play with me.” Etc.
Requesting to share	Asking for a toy	Holding out your hand, “Can you give me a car?” “Can I get the red car?”	If the target child does not respond or does not want to give what siblings asked, ask him/her again! Show him/her you need something by holding your hand out and say “thank you” when he shares.
			- Wait a few seconds and ask again, “(name) Can I have the red car, please?” - Touching and ask him again.
Offering help	Asking if the child needs help or offer physical or verbal help	“Can I help you?” Holding the target child’s hand over the toy, “I can help you. Here...”	If the target child does not respond, wait a few seconds and say that again. If the target child tries to walk away, touch his shoulder or arm and say that again.
Play organizing	Provide ideas that can have extended play	“Let’s play with a parking garage.” “I will be a taxi driver and you will be a ...” “You can make a castle with the blocks”	When the target child does not feel interested in the play, suggest ideas that help extend the play. If the child does not respond or tries to leave, bring a new toy that is related to the play and ask him/her again. Or show him/her how to play in new settings or with new materials.

<Table 3> *Social Strategies (continue) (continue)*

Strategies	Description	Examples	Tips for use
Compliment	Provide praises and encouragements	Say nice things, “Good job” “That is great!” “How nice” “I like it” Give them a high five.	Provides these praises and/or encouragements as much as you can.

3. Step 3 – *Stay, Play, and Talk*

The sequence of activities for Step 3– *Stay, Play, and Talk* are the similar to those of the previous step, *Stay and Play*. Table 4 provides the example script for Step 3. In this step, the parent needs to provide specific explanations and models on the use of social strategies that will help their children’s extended play. The recommended social strategies included in this stage of training are offering help, suggesting play skills, organizing the play, and giving compliments. Specific descriptions of these social strategies are provided in Table 3. Once competing teaching component, the parent again directs the sibling to practice the strategies with the child as the parent provides assistance as needed just as in the previous step.

<Table 4> *Training Script for Step 3 – Stay, Play, and Talk*

	Script
Parent:	“Do you remember what you need to do for <i>Stay</i> ? Tell me what you are doing for ‘stay’.”
Sibling:	“Move to (name) where ... is playing, then look at (name) and then say ‘hi’ or call his/her name to get his/her attention.”
Parent:	“That’s right. Good job. Now, can you tell me what you are doing for <i>Stay and Play</i> ?”
Sibling:	“I will ask to (name), ‘can I play with you’ or ‘can I share the toy with you?’ etc.”

<Table 4> *Training Script for Step 3 – Stay, Play, and Talk (continue)*

	Script
Parent:	“You are doing a very nice job. Do you remember the tips that I let you know in the case that (name) does not answer or respond to you even though you asked to join in the play?”
Sibling:	“I need to touch his shoulder and ask to (name) again if I can play with (name).” or “I need to wait for a few seconds and ask again.”
Parent:	“Great! Now, we are going to talk about how you can continue playing with (name). While you play with (name), he/she can lose his/her interest in the toy or play because he/she does not know how to play with the toy or how to extend the play. So, if you help (name)’s play, you can continue play with the child. Suppose that you and (name) start to play together with a puzzle. (name) picks up a puzzle piece but he does not put it in the right place. What would you do in this case?”
Sibling:	“I will help him so that he knows how to do that.”
Parent:	“That’s right. You can show him how to match each piece of the puzzle into the right place. For example, you can point where the piece of the puzzle should go or you can hold his hand to put the puzzle in the right place.” “Now, let’s think about another situation...” (Provide several different play examples)
Sibling:	Think about another situation and respond to the parent’s question.
Parent:	“Now, let’s see this card.” ☞ See Table 3 (i.e., ‘Offering help’, ‘Suggesting play skills’, ‘Play organizing’, ‘Compliment’). Provide a model for each strategy. “Let’s practice together.”
Sibling:	Read and observe the model provided by the parent. Then practice with the parent.

- * Note : a. If the sibling does not respond, the parent will wait 5 sec. and then re-ask a question with prompts.
 b. If the sibling continues not to respond to the parent’s question, the parent will provide the answer and then re-ask the question.
 c. If the sibling has some difficulties with practice, the parent will provide a model.

4. Withdraw Assistance

Once the sibling successfully uses the skills and strategies and rarely needs prompts or cues from the parent, it is time to begin the withdrawal of assistance. The parent needs to make a decision about withdrawing their supports in a timely manner so that the sibling can ultimately independently use the combined skills and strategies for all three steps in interacting with the child. For example, the parent provides supports such as showing a cue card or providing verbal prompts to the sibling if the sibling does not appropriately use the skills and strategies they learned within three to five seconds. However, as the sibling begins to use the skills and strategies more confidently and thus displays some improved use of the skills and strategies, the parent needs to decrease the frequency of showing the cue card, providing verbal prompts, and other corrective strategies. Once the sibling is more consistently using the skills without the need for corrective prompts, the parent needs to step back from the children's play and allow the sibling to practice the use of the skills and primarily provide positive feedback for the child's correct implementation of the behaviors. Then, as the sibling proficiently uses the skills and strategies in interacting with the child (i.e., during the play session the sibling appropriately and consistently uses several of the skills to engage their sibling), the parent should fully withdraw their support including immediate positive feedback. However, although parent support is withdrawn, the parent needs to stay with their children and observe their play such that they can intervene with prompts if needed. Furthermore, parents always need to be available to intervene in case a serious issue arises with either of their children.

IV. Conclusion

Sibling-implemented intervention for improving social interaction skills of young children with disabilities can be beneficial for both children with disabilities and their typically developing siblings. By learning specific social

skills and strategies from their parents, typically developing children (i.e., siblings) may be able to have more meaningful social interaction with their siblings with disabilities. This, in turn, may lead to more enjoyable playtime and the siblings with disabilities' learning new positive social interaction skills. For successful implementation of sibling training, the children's parents should complete several preplanning steps including preparing the play setting, selecting appropriate materials or toys that facilitate their children's interactions, scheduling training and practice sessions, and assessing their children's learning characteristics and needs. When the parents are well-prepared and systematically implement the training strategies, children with disabilities and their siblings may be able to improve their social interactions and thus experience more meaningful play and learning opportunities. Furthermore, given that our ultimate goal for children with disabilities is developing age-appropriate social interaction skills and thus increasing the opportunities for positive interactions with their peers in community and educational settings, it would be very useful for the family to share the training and outcomes of the intervention with teachers and other professionals who work with their child with a disability. Teachers may also want to implement a modification of this training by teaching the skills and strategies to some of the typically developing children in the child's classroom who would be appropriate play partners for the children with disabilities.

1. Implications for Research

The sibling training of social skills and strategies leads directly to important implication for future research. Research studies on sibling-implemented intervention targeting social interaction skills for young children with disabilities are needed to support the effectiveness of the intervention in the future. In addition, research studies on sibling-implemented social interaction intervention need to include socialization and relationship with their siblings with disabilities that can potentially impact on the effectiveness of the intervention.

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장애유아의 사회성 발달을 위한 형제·자매 참여 중재:
사용자를 위한 중재 적용

김태영

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<Abstract>

최근 연구된 본 저자의 research synthesis (Kim & Horn, 2010) 결과에서 보았듯이, 장애유아의 형제 및 자매의 역할은 장애유아의 나이에 적합한 발달을 위해 매우 중요하다. 이에 장애 유아의 형제 및 자매가 교우 및 친구와 비슷한 역할을 할 수 있다는 점을 고려하여, 그들에게 특정한 사회성 기술을 가르치는 중재를 발전시켜 보았다. 본 논문의 중점은 장애유아의 사회성 발달을 목적으로 한 장애유아의 형제나 자매가 참여하는 중재를 가족들이 그들의 일상생활 속에서 쉽게 적용하고 실천할 수 있도록 유용한 정보를 제시하고자 한다. 즉, 이를 위해 형제 및 자매가 참여하는 중재를 위해 시·공간적 혹은 환경적 준비, 참여자의 역할, 사용될 사회성 기술 (Stay, Play, and Talk) 및 전략 (Social Strategies), 중재 사용법 등을 설명하였다. 본 논문은 또한 사회성 중재기술 및 전략을 아동의 개개인의 특성에 따라 수정 및 변형을 할 수 있도록 다양한 예를 제시해 주었다. 이로써, 장애유아의 가족들뿐 아니라 유아특수 교사 및 전문가들도 쉽게 일상생활 속에서 장애 유아의 사회성 발달을 돕기 위해 본 중재를 적용할 수 있는 지침서가 될 것이다. 앞으로 본 논문의 정보 및 전략예시를 기초로 연구자가 실질적인 형제·자매가 참여한 사회성 발달 중재에 의한 효율성을 검증해 볼 필요가 있다.

Key Words

: 형제 및 자매, 장애유아, 사회성, 중재

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