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Game effectiveness of cognitive behavior therapy on improving social skills in children with AD – hyperactive in Sanandaj

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Keywords: Game cognitive - behavioral therapy, social skills, learning difficulties.

ABSTRACT. The purpose of this study, the efficacy of cognitive-behavioral play therapy to improve social skills in children with AD - more active Sanandaj. Is a quasi-experimental study pretest – post test control group not equivalent. The study population consisted of all elementary school students with "11- 9" years , referring to a centers of learning disorders in Sanandaj 94-95. Using convenience sampling of 20 children with learning disorders were selected and assigned to two experimental and control groups. For data collection, a checklist was used to assess social skills children Matson. After 10 sessions of cognitive-behavioral play therapy was applied to the experimental group, the results showed that the game - the treatment is to increase and improve social skills.

1. INTRODUCTION

Attention deficit-hyperactivity fact a form of physical processes (such as neurological disorder or chemical) that social factors, psychological or environmental (eg, frustration, social isolation and lack of education) interact. Research Activities Attention Deficit Hyperactivity about studying concepts such as executive functions, the ability to monitor and manage their behavior, due process, impulse control and think about the consequences of their actions reflect [1]. Children with this disorder often face significant difficulties in school and in terms of training and in terms of class management, always a significant challenge in front of their teachers. In adulthood, the disorder causes damage long enough to focus on a specific job, and keep track of things until they have problems individual on the job may of the duty, Such task jump each little progress they are not, and none to the end [2] . Children with attention deficit - hyperactivity, memory problems are not specific, but their academic performance quite impressed by the neglect of their impulsivity and lack of planning [3]. Adolescents with social relationships with their peers often encountered problems [4] . Some of these children have difficulties in coping with their peers and to enjoy with others because they show aggressive behavior, it does not promote positive social interaction [5].

Other children with this disorder behaviors such as cruelty to animals that are seriously anti-social or social damage, and may indicate other mental health problems in children[6]. These behaviors can be effective in the low social status of children in the age and last for years [7] . This pattern may over time so as to increase the risk of committing illegal acts, spread. Social skills, behaviors acquired through observation, modeling, practice and feedback to be learned, based on environmental characteristics where the person is located, developed and via training grow[8]. Children with the disorder are cited by other children may be rejected or hated them, because they disrupt their play or damage to equipment other children and problems such as this are usually on children with ADHD, conveniently labeled as "troublesome" is corroded and parents often think that such inappropriate behavior by the lack of precise control of children is formed [9]. Some of the problems associated with hyperactivity in children with AD is that they do not realize what impact their behavior can have on others. They may seek to make friends, but have no idea on how to do so and what is said to not listen to them and necessary for carrying out a task they forget, think

before you act[10]. Overall, poor social skills. So find a way to enable the child that the manner of verbal expression, express your emotions seem absolutely necessary. The game is a tool to help children express themselves, and for every child regardless of race, language and nationality have appropriate means to discharge emotions and express themselves and communicate more with others is. Play therapy and interpersonal dynamic between one (or a person of any age), and therapist who is trained in play therapy techniques, and selection of play equipment provides for the child (or anyone at any age), makes it easier to create a secure connection to the game (ie the most natural means of communication for children), their (feelings, thoughts, experiences and behaviors), to express and to explore this issue to development optimal achieve. Children can use play therapy toys, to express ineffable and express emotions that will be faced with a reprimand [11] . Including effective methods of play therapy, cognitive-behavioral approach[12] . In this way the therapist believes that any behavior with the intention and purpose to do. In this method of treatment as adults, the impact of maladaptive or dysfunctional beliefs and attitudes emphasized[13] . The default is to use the child's reaction to an event, which is influenced by the meaning and implications of the event. Given the above, and the various problems that children with learning difficulties in terms of emotional, psychological, and social-work experience, which is essential for this disorder and ways of reducing the incidence of this disorder more research carried out, that's why this research to investigate whether the game of cognitive-behavioral therapy improves social skills in children with attention Deficit hyperactive disorder can be carried out . zare and ahmadi (2010) In their study conducted on children 9-7 years of age, showed that cognitive-behavioral therapy play in reducing behavioral problems in these children is significantly effective [13].beh pajhooch and bonab (2013) Game effectiveness of cognitive-behavioral therapy on behavior problems of students tested mentally O my son. The results showed that this approach leads to significantly reduced behavioral problems among students was mentally retarded [14] .bagerly and jenkniz(2009) The effectiveness of child-centered play therapy and diagnostic agents and increase in homeless children looked on. The results showed significant growth in the Bank's growth and improved profiles[15] .

2. RESEARCH METHODOLOGY

The study of quasi-experimental (experimental), with pretest-posttest and control group.

experiment	X1	R	X1
control	X2	-	X2

3. METHOD OF THE RESEARCH PRACTICE

The population in this study consists of all children with ADHD AD referred to a specialized center hyperactivity (semesters 94-93), in the city of Sanandaj. Out of this population sampling method 20 were selected and randomly divided into two groups of 10 patients assigned to control testing. That is called the need for more active involvement of children in social skills training was conducted. And parents are completely voluntary register and to prepare themselves and their children to take part in the training announcedAfter registration and pre-test registered 20 children randomly assigned to two experimental and control groups. The experimental group trained cognitive behavioral therapy were game.The control group received no training. After the training period, both groups are subject to post-test and follow-up test was performed again after a month.

4. RESEARCH TOOLS

1 questionnaire (checklist to assess children's social skills Matson, 1984): Cronbach's alpha coefficients were calculated with and split-half and Cronbach's alpha and split-half the amount for the entire scale is equal to 0/86 [16] . Coefficients obtained in Iran is good and acceptable in terms

of scale. Analysis of the factors used to determine the validity of social skills. 640 Matson check list of questions that are appropriate and inappropriate behavior, social skills, the scores of 3-3-3 5 of the study and questions related to each factor is as follows:

3-3-3-1 factor appropriate social skills: Questions (9-10-12-13-16-20-23-24-28-31-32-34-37-40-42-43-44-46-50-52-55-56-59).

3-3-3-2 factor inappropriate assertiveness: Questions (2-7-11-14-17-19-21-22-29-30-39-41-53-60-61-62). 3-3-3-3: impulsive behaviors and Syangrayanh: Questions (3-4-5-6-35).

3-3-3-4: arrogant behavior and a lot of make: Questions (8-33-36-57-58).

3-3-3-5: jealous and seclusion-seeking behaviors: Questions (15-38-49-54).this scale between 64 and 320 fluctuate. Note: Questions (1-18-25-26-27-45-47-48-51) related to various behaviors that have been studied in this research.

The content of therapy sessions:

Then the experimental group individually and in 10 one-hour sessions twice a week, play therapy, cognitive-behavioral-based methods were applied. The control group received no intervention. After 10 sessions of therapy with the experimental group of subjects in both groups were tested and their scores were recorded. From the perspective of cognitive-behavioral therapy sessions curriculum content using (CBT, Astlard, translation: Alizadeh, and Goudarzi, 2010) [17], (play therapy, art of communicating, Landreth, 1937, translation: Davarpanah, 2011)[11], (play therapy theories and methods of intervention, Samadi, 2010)[12] , (choice of play therapy techniques, Kdasn, Schaeffer, 1998, Translation: Saber and lawyer, 1389)[18] . (Educating children, big, Agah Harris, Optical, 2010)[19] . Translation of the article (Shadbvrn, 2005)[20] as: therapeutic play activities to increase self-esteem as well as a workshop on Cognitive Behavioral Play Therapy [21], Iranian Psychological Association, and cognitive-behavioral therapy workshop for children [21].

Including meeting sessions

Trading first child with the therapist, to provide a safe environment and appropriate, encourage and strengthen relationships through play and drawingThe introduction and training of emotions (loneliness, sadness, anger, happiness, fear), using modeling and chairs game. And pantomime. With the aim of identifying, separating and accepting emotions. Third over the previous session, read the story of the little rabbit, game to color your world now, with the aim of expressing and accepting emotions in ways comfort and convenience. Fourth thoughts and behavior training, using water colors and finger paints. With the aim of clearing the thoughts and feelings of each other's behavior.

Fifth, identify and understand the relationship of thinking, feeling and behavior (magic circle) with each other by playing detective, missing the game spider trap.Sixth automatic thoughts and thought errors (negative gentleman glasses, stickers, magnifying glass or zoom in), using traffic lights and detective game play. With the goal of understanding and identification of automatic thoughts and mental mistakes. Seventh relaxation training (play rock and jelly), breathing relaxation training (play bubble, flowers and candles), and writing a letter to his family, with the aim of seeing its positive aspects and replacing negative thoughts about yourself with thoughts positive, expression, attracting family support. And can play to reduce tensions and concerns internal concerns.

The eighth problem solving game by reading the news, with the aim of increasing verbal skills and problem solving skills. Finding and applying solutions and Jdyd.v behavior and game animals to increase self-esteem and strengthen the power of positive emotions toward their children. Ninth game play using finger puppets with the aim of self-awareness, self-efficacy and skills to enhance relationships with Hmsalan.dadn worksheet me anything I can do, with the aim of encouraging children to express feelings in different situations. I review past sessions and create good memories of the end of treatment.

5. METHOD ANALYSIS THE DATA

Statistical analysis: The results of the study hypothesis with respect to the methods of descriptive statistics (mean and standard deviation) and inferential statistics (analysis of covariance) was used. Data analysis was done by software spss version 21.

6. FINDINGS

The descriptive findings of the study:

Table 1 descriptive findings related to age grades and subjects shown.

Table1. Demographic indicators describe the status of control and experimental groups

Group	variable	Abundance	precent	Downer	Upper	Standard deviation	Mean
Experiment	Age	Age 9	1	0/10	9	11	0/69921
		Age10	4	0/40			
		Age11	5	0/50			
Experiment	class	3th	2	0/20	4	5	o/788
		4th	4	0/40			
		5th	4	0/40			
Control	Age	Age9	2	0/20	9	11	0/737
		Age10	5	0/50			
		Age11	3	0/30			
Control	class	3th	4	0/40	3	5	0/875
		4th	3	0/30			
		5th	3	0/30			

According to information obtained from 1 table tests mean age of 10/40 and dispersion around this value is equal to 0/69921 is Minimum age of 9 years and maximum age of 11 years. And the control group with an average age of 10/10 and a standard deviation equal to 0/737 is The average grade for groups of 4 and a standard deviation equal to 0/788 , And in the control group this value for average class 3 and standard deviation IS of 0/875.

Table 2. Descriptive indicate rning sex

Variable		Experiment group		Control group	
		Abundance	precent	Abundance	precent
Gender	Son	4	40	5	50
	Girl	6	60	5	50

According to Table 2 in terms of gender variable in the experimental group 40% Son and 60 % The group are girls , and in the control group 50 % Son and 50 % It includes are the girls.

Table 3. The mean and standard deviation scores in the pretest-posttest

Variable	scores in the pretest-posttest			
	standard deviation		Mean	
	Control	Experiment	Control	Experiment
Appropriate social skills	0/47	0/47	34/83	42/91
Assertiveness inappropriate	0/37	0/37	32/13	25/06
Impulsive behavior	0/26	0/26	11/03	7/46
Arrogant behavior	0/19	0/19	11/44	8/25
Jealous behavior	0/24	0/24	9/87	7/07

	Age (6-9)	Standard deviation	Mean	Significant at the level of 0/01	
				UPPER	Downer
Jealous behavior	Experiment	0/198	8/252	8/652	7/875
	Control	0/198	11/448	11/849	11/048
Arrogant behavior	Experiment	0/240	7/074	7/560	6/588
	Control	0/240	9/876	10/362	9/390
Impulsive behavior	Experiment	0/264	7/469	8/004	6/234
	Control	0/264	11/031	11/566	10/496
Assertiveness inappropriate	Experiment	0/378	25/068	25/834	24/302
	Control	0/378	23/132	32/898	31/336
Appropriate social skills	Experiment	0/476	42/914	43/879	41/948
	Control	0/476	34/836	35/802	33/871

According to Table 3 we see that F obtained in the pre-test (for the treatment of jealous, arrogant and impulsive behavior and poor assertiveness and social skills appropriate) is greater than F table and level (0/01) and significant independent variable was also obtained F or the (experimental group) is larger than F table and effect of adjuvant (pre-test level of the dependent variable (0/01) is significant . since the group test scores also decreased in all 4 of the first and increase of social skills can be seen in the scores indicate the effectiveness of cognitive-behavioral play therapy is in the experimental group.

7. DISCUSSION AND CONCLUSION

The first hypothesis is that an increase appropriate social skills in the experimental group, the results indicated a significant difference between the two groups, since the average obtained for the experimental group compared to the control group can conclude that the game is cognitive behavior therapy to improve and the appropriate social skills in children has been tested and it confirmed the first hypothesis. That the results of the research, Rajabi 2013[22] , Cheraghi [23] , Jannatian (2008)[24], to research in 2007, is consistent. A group of children with AD who are impulsive behavior, which means they act before they think and usually do not think about the consequences of his decision were wrong. In most cases recognize that and other ways to check and this is where the work of the past have not worked and can not be done.

The second hypothesis here is to reduce impulsive behavior is trained group showed that the experimental group in the post-test will earn an average of less impulsive behavior and represents the impact of the conclusion of education has been received. The results of statistical significant difference between the two groups in impulsive behaviors confirms that these results with the results of research Hadian Far (2010) is aligned [25]. Other cases that were studied during this research the third factor, the behavior of children with attention deficit-hyperactivity inappropriate brave the results and analysis shows existence of significant and effective training in the experimental group. And Comparison of results for the two groups, the control test to confirm the third hypothesis.

The fourth hypothesis was evaluated and analyzed the often arrogant behavior is inappropriate in children with AD can be seen. This study sought to determine the effectiveness of cognitive-behavioral play therapy appropriate and whether significant differences between the experimental and control groups operating there or not? According to the survey results and the adjusted average of two times after the test, the hypothesis fourth confirmed case in this study was Danst.khryn is jealous behaviors in the fifth hypothesis is in the case the results obtained from the tests and reviews show that there is a significant difference between the average adjusted examined and the control group is jealous behaviors. And accordingly the fifth hypothesis is confirmed. According to the results and explanations above all the assumptions discussed in this study were approved and all significant difference between control and experimental groups confirmed. And this shows the effectiveness of cognitive-behavioral play therapy for children with AD - more active.

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