An examination of current social emotional curricula used in general education classrooms for children who are deaf or hard of hearing aged 3-5

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AN EXAMINATION OF CURRENT SOCIAL EMOTIONAL CURRICULA
USED IN GENERAL EDUCATION CLASSROOMS FOR CHILDREN
WHO ARE DEAF OR HARD OF HEARING AGED 3-5

by

Meghan I. Sauer

An Independent Study Project
submitted in partial fulfillment of the
requirements for the degree of:

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Approved by:
Mary Shortal, MA, Independent Study Advisor

Abstract: This paper reviews the current literature on the importance of explicitly teaching social emotional competency to young children who are deaf or hard of hearing. A survey was distributed to assess the current use of social emotional curricula in general education settings with children who are deaf or hard of hearing.
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**TABLE OF CONTENTS**

<table>
<thead>
<tr>
<th>Section</th>
<th>Page</th>
</tr>
</thead>
<tbody>
<tr>
<td>Acknowledgements</td>
<td>ii</td>
</tr>
<tr>
<td>Introduction</td>
<td>1</td>
</tr>
<tr>
<td>Effective Social Emotional Learning</td>
<td>5</td>
</tr>
<tr>
<td>Social Emotional Development and School Success</td>
<td>8</td>
</tr>
<tr>
<td>Social Emotional Curricula</td>
<td>11</td>
</tr>
<tr>
<td>Social Emotional Development and Students who are Deaf or Hard of Hearing</td>
<td>14</td>
</tr>
<tr>
<td>Survey</td>
<td>16</td>
</tr>
<tr>
<td> Method</td>
<td>16</td>
</tr>
<tr>
<td> Results</td>
<td>18</td>
</tr>
<tr>
<td> Discussion</td>
<td>19</td>
</tr>
<tr>
<td>PATHS: Promoting Alternative THinking Strategies</td>
<td>21</td>
</tr>
<tr>
<td>PATHS Curriculum</td>
<td>22</td>
</tr>
<tr>
<td>ABCD Model</td>
<td>25</td>
</tr>
<tr>
<td>PATHS Effectiveness</td>
<td>26</td>
</tr>
<tr>
<td>Conclusion</td>
<td>30</td>
</tr>
<tr>
<td>References</td>
<td>32</td>
</tr>
<tr>
<td>Appendix A</td>
<td>39</td>
</tr>
<tr>
<td>Appendix B</td>
<td>40</td>
</tr>
</tbody>
</table>
Introduction

The process of learning for young children has not only academic components, but social and emotional components as well. Students cannot learn alone but rather in alliance with their teachers, families, and peers (Zins, Weissberg, Wang, & Walberg, 2004). A child’s social emotional competency can either facilitate or inhibit his or her academic commitment, school dedication, and overall school success (Durlack, Weissberg, Dymnicki, & Schellinger, 2011). Because what we learn is influenced by our emotional processes, researchers have considered how to effectively address positive social emotional development in all students. Parents are not the only party responsible for fostering the development of an emotionally healthy child. While children’s emotional styles are influenced by their innate personalities as well as their parents’ use of emotion like warmth, control, and harshness in the home (Denham, 2006), schools play an important role in fostering both academic success and social and emotional success (Zins, Bloodworth, Weissberg, & Walberg, 2004). Furthermore, all systems that serve young children including health care, early childhood care, special education, early intervention, mental health care, and family services have the opportunity to offer interventions that address social emotional needs within the child (Powell & Dunlap, 2009). Social emotional competence and academic achievement are highly related, and an increasing amount of schools are focusing efforts on integrated and coordinated instruction in both areas to maximize students’ potential to succeed in school and life as evidenced by the current research (Zins & Elias, 2007).

When should we begin teaching social emotional skills? Research has shown that early experiences and relationships at both home and school impact how a child will learn social emotional competencies such as self-regulation, the ability to manage emotions, the ability to take another’s perspective, and the ability to develop close relationships (Joseph & Strain, 2003).
Research in a multitude of child development areas report that from birth to age five, all areas of
development proceed at a greater rate than at any other time in our lives. The National Research
Council and Institutes of Medicine (2000) determined that the elements of early intervention that
address social and emotional development are equally as important as those that address
language and cognitive development. Greenberg et al. (2003) asserts that school-based
prevention based on the coordination of social, emotional, and academic learning should be a
fundamental part of the curriculum beginning as early as preschool. National survey data found
that preschool teachers report that the most challenging behaviors they deal with are child
disruptive behaviors that result from underdeveloped social emotional skills. In contrast, socially
and emotionally well-developed children are school-ready, have good peer and teacher
relationships, take part in academic environment, are able to defeat challenging tasks, have
strong language development, listen to instructions, and are attentive (National Research Council
and Institutes of Medicine, 2000). Social emotional skills determine how a child will function
with peers and adults outside of the home as well as contribute to how a student meets the
demands of a classroom. Therefore, promotion of these skills must be developed during early
childhood. Early childhood education should focus on providing young children with the social
opportunities and school experiences they need to develop the abilities that we expect to see in
early school (Carlton & Winsler, 1999).

Neuroscience and developmental science research regarding children have also cited that
children’s earliest experiences in life prepares the child for how they will manage their feelings
and how they relate to others later (Raver & Knitze, 2002). Results of interventions have
suggested that emotional problems are identifiable early, can be changed, and can be reduced
over time. Children can develop the social emotional competency to use their words to talk
through their feelings of anger, frustration, or sadness, rather than act out behaviorally on those feelings (Raver, 2002).

As described by the Collaborative for Academic, Social, and Emotional Learning (CASEL), social emotional learning (SEL) is the process of acquiring and effectively applying the knowledge, attitudes, and skills necessary to recognize and manage emotions; developing care and concern for others; making responsible decisions; establishing positive relationships; and handling challenging situations capably. Social emotional learning can be defined as the process of acquiring 5 core competencies as established by CASEL. These include: self-awareness, self-management, social awareness, relationship skills, and responsible decision making. The development of these core competences will foster the development of better adjustment and academic performance in school by promoting positive social behaviors, less behavior problems, less emotional stress, and improved academic performance (Greenberg et al., 2003). There has been a growing awareness amongst teachers and policymakers alike about the promotion of social emotional competency (CASEL, 2003). Developing social emotional competency is imperative for success in school and later life due to SEL’s positive effects on academic life, physical health, and citizenship. Similarly, it reduces the risk of maladjustment, failed relationships, interpersonal violence, and unhappiness (Zins & Elias, 2007).

Not only is social emotional development an important aspect to promote in typically developing children, but in children who are deaf or hard of hearing as well. Children who are deaf or hard of hearing are at risk of delay in areas of communication which plays a substantial role in social emotional development (Moeller, 2007). These children have an innate barrier to communication which can make social learning challenging. Though the literature is varied, many researchers suggest that children who are deaf or hard of hearing are also known to be at
greater risk of developing mental health and psychosocial maladjustment than their hearing peers (Gascon-Ramos, 2008). Therefore, research has been dedicated to the wellbeing of deaf children and the positive social emotional development of deaf children. Social emotional development is the key to the wellbeing of all children (WHO, 2003).

My Independent Study will examine the current social emotional curricula of preschool and kindergarten general education classrooms with children who are deaf or hard of hearing. I have chosen to explore the general education setting to see if children who are deaf or hard of hearing are being directly and explicitly taught crucial social emotional skills and competencies. I have also chosen to explore preschool and kindergarten classrooms due to the overwhelming research that states that the earlier implementation of social emotional learning the better. Social emotional development (SED) is important for all children for academic success and it is an important indicator for school readiness. SED is especially important for children who are deaf or hard of hearing because as previously mentioned, social emotional skills are often times delayed in such children. Raver (2002) has found that social emotional development and academic learning are more closely related than previously understood. Children with normal social emotional development have been shown to have better academic performance than those children who do not. Raver suggests that it is critical to train teachers to help children dealing with social emotional and behavioral problems.

Unfortunately, children who are deaf or hard of hearing have reduced mastery of social emotional competencies, making them an at risk population (Greenberg, 2006). A primary factor of this reduced mastery is a co-occurring delay in language development. Therefore, deafness itself limits incidental learning, or overhearing how others deal with strong emotions and how others conduct their relationships. Children who are deaf or hard of hearing have been shown to
have greater impulsivity, poorer emotional regulation, and less vocabulary that accompanies emotional language. Therefore, I was inspired to ask my first research question: Are general education teachers explicitly teaching social emotional skills to their students, including students who are deaf or hard of hearing? I planned to examine current curricula being used in schools as well as existing curricula to address such competencies. The findings from various clinical, prevention, and youth development studies have sparked the formation of many school-based interventions specifically designed to promote students’ SEL, but is this the case for the 3-5 year old population (Greenberg et al., 2003)?

One possible way to promote these competencies is a social emotional curriculum entitled PATHS: Promoting Alternative Thinking Strategies, developed by Mark Greenberg and Carol Kusche in 1993 (PATHS®, 2013). The goals of this curriculum are to teach children how to develop and maintain self-control, increase their awareness of and ability to communicate about feelings, and assist in conflict resolution by improving their problem-solving skills. While conducting a literature review of this curriculum, a second research question was developed: Is PATHS (Promoting Alternative Thinking Strategies) an effective social emotional curricula to be used with preschool and kindergarten aged children who are deaf or hard of hearing?

**Effective Social Emotional Learning**

Social emotional learning gives children the skills necessary to recognize feelings, manage their emotions, set goals, care and have concern for others, make responsible decisions, and maintain positive relationships that in turn promote positive social emotional development (Payton, Weissberg, Durlak, Dymnicki, Taylor, Schellinger, & Pachan 2008). In a classroom setting, these skills present themselves in beneficial ways to the child, other students, and the teacher. Such skills allow the child to calm themselves when angered or frustrated, initiate
friendships and resolve conflicts, make safe and moral decisions, and contribute to the classroom atmosphere. According to CASEL (2003), the most effective programs are ones that lead incidentally and directly to enhanced academic performance and other positive outcomes. Additionally, children develop intrinsic motivation when classroom themes align to their own needs and emotions (Elbertson et al., 2010). Effective social emotional learning begins with the teachers who are inarguably crucial to the implementation of social emotional intervention programs. As the primary implementers, teachers must fundamentally understand how to implement a program, know the specific competencies the program promotes, make their interactions with students as productive as possible, and improve the classroom environment in order for a program to be effective.

The five key competencies that are taught, practiced, and reinforced through SEL include self-awareness, social awareness, responsible decision making, self-management, and relationship skills (CASEL, 2003). Self-awareness encompasses the ability to identify and recognize one’s own emotions, feelings, interests, and values, recognize strengths in self and others, have a sense of self-efficacy, and self-confidence (CASEL, 2003; Payton et al., 2008). Social awareness encompasses the development of empathy, respect for others, perspective taking, and recognizing and appreciating individual and group similarities and differences. Responsible decision making encompasses the ability to evaluate and reflect, have personal and ethical responsibility, set prosocial goals (Denham & Brown, 2010), and contribute to the well-being of one’s school and community. Self-management includes impulse control, stress management, persistence, goal setting, motivation, and expressing emotions appropriately, or handling emotions in a productive way (Denham & Brown, 2010). Relationship skills include cooperation and communication (Zins & Elias, 2007), managing and resolving interpersonal
conflict, and seeking help when needed (Payton et al., 2008). Furthermore, relationship skills are
necessary to daily school life when students have to initiate and maintain conversations, cooperate,
listen, take turns, and practice friendship skills (Denham & Brown, 2010). The development of
these 5 competencies results in a shift from the child being controlled by external factors to
behaving as a result of their internalized beliefs and values and taking responsibility for their
own actions (Greenberg et al., 2003).

Greenberg et al. (2003) found several examples of social emotional learning outcomes
related to success in school and life which encompass student attitudes, behaviors, and
performance. Attitude outcomes resulting from positive social emotional learning include a
higher sense of self-efficacy, better sense of community (bonding), stronger commitment to
group values, more positive attitudes toward school and learning, improved ethical attitudes and
values, higher academic motivation and educational aspirations, greater trust and respect for
teachers, improved coping with school stressors, and increased understanding of consequences of
behavior (Frey, Nolen, Van Schoiack Edstrom, & Hirschstein, 2005).

Behavior outcomes resulting from positive social emotional learning include more
prosocial behavior, reductions in aggression, disruptions, and interpersonal violence, lower rate
of conduct problems, better conflict resolution skills, more classroom participation, higher
engagement, greater effort to achieve, more frequent reading outside of school, better transitions,
less drug, tobacco, and alcohol use and delinquent behavior, and more involvement in positive
group activities (Greenberg et al., 2003). Prosocial behavior in particular, as a result of social
emotional learning shows considerable stability from preschool to young adulthood suggesting
that early intervention might provide long-term benefits (Frey et al., 2005).
Lastly, performance outcomes resulting from positive social emotional learning include improved math, language arts, and social studies skills, increases in achievement over time (elementary to middle school), higher achievement test scores and no decreases in scores, more progress in phonological awareness, improved learning-to-learn skill, better problem solving and planning, and improved nonverbal reasoning (Zins et al., 2003).

**Social Emotional Development and School Success**

School readiness is typically defined as a quality that renders the child able to participate successfully in a regular public school curriculum which is the goal for most students who are deaf or hard of hearing. School readiness is comprised of two sets of abilities, behavior and attitude associated with learning and cooperating in a classroom, and skills associated with positive interactions with peers and teachers (Herndon, Bailey, Shewark, Denham, & Bassett, 2013). Children who demonstrate such abilities are found to be more accepted by peers and teachers and are given more instruction and positive feedback. All domains of development, including social emotional adjustment, are similarly significant contributors to a child’s school readiness (Bagdi & Vacca, 2006). A student’s true performance ability can only be measured when all domains are considered.

According to Raver (2002), “Children who are emotionally well-adjusted have a significantly greater chance of early school success while children who experience serious emotional difficulty face an increased risk of early school difficulty” (pg. 3). Teachers view students’ readiness to learn in relation to positive emotions, enthusiasm, and the ability to regulate emotions and behavior (Denham, 2006). Children who enter kindergarten with positive social emotional competence have more success in thinking positively about school and early adjustments as well as school achievement than those children who do not. The relationships
built between both peers and teachers are based on the child’s ability to regulate their emotions in a prosocial way and those relationships determine the child’s chances of doing well academically (Raver, 2003). As Congressman Tim Ryan (Ohio 13th District) has said, “Social and emotional competencies are not ‘soft skills’. They are fundamental and essential skills. They are the foundation for all the other skills. If we want a tolerant society, a compassionate society… we need to teach the skills that create that society – the social and emotional” (Bridgeland, Bruce, & Hariharan, 2013).

SEL has been referred to as ‘the missing piece’ by several researchers because it represents a part of education that links academic knowledge with a specific set of skills important to success in school, family, community, and the workplace later in life (Elias, 2006). Several of the five core competencies to SEL have a specific and direct link to academic success. The skills associated with self-awareness allow a child to develop a sense of their personal capabilities at school tasks. A child who is aware of their academic competence is more likely to engage in opportunities to further increase their skills which may pave the path for future accomplishments in school (Denham & Brown, 2010). The skills associated with self-management have been reported by kindergarten teachers to be the most essential for school readiness. Students who can maintain a positive emotional state remain more focused and engaged. As related to responsible decision making skills, Denham and Brown (2010) found that in an assessment of kindergarten children, the feelings and actions chosen by the students in response to a hypothetical problematic situation was related to the teachers’ later assessments of school adjustment and overall yearly progress. For example, a child who describes feelings of sadness in the face of teasing and still chooses to problem solve in a prosocial manner was rated as academically successful.
Based on an extensive review of the current research regarding social emotional development in preschool-aged children, Raver (2002) has made several suggestions to sustain their development. Such suggestions include targeting children prior to school entry in child care settings and preschools to develop their social emotional competencies and to consistently assess children’s emotional adjustment in early educational settings and continuing through their early years of school. Without intervention, evidence suggests that emotional difficulties may negatively affect early school performance (Raver & Knitze, 2002). However, with intervention, students are able to better regulate their emotions, attention, and behavior (Bridgeland et al., 2013). A reciprocal relationship exists between the way a student views themselves and school success. Therefore, to apply to a school setting, achievement in school is known to enhance self-esteem within a child and promote their social emotional development (Gascon-Ramos, 2008). SEL helps students become more self-aware and confident in their academic abilities while also helping them control stress, problem solve, and make responsible decisions. These attributes of SEL have been found to boost students’ learning abilities and in turn, their academic achievement.

With the aforementioned research contributed to the link between students’ emotions and academic performance, researchers then began asking, “How do we assist students to develop the social emotional competence needed to ensure that they come to school ready to learn?” (Raver, 2003). The number of children who are school ready can be increased by helping families and schools support the development of emotional understanding and prosocial behavior, or social emotional learning (Raver, 2002). As Margaret Spellings, U.S. Secretary of Education (2005-09) said, “The academic pieces and SEL have to be mutually reinforcing. High-quality teachers
understand this intuitively – but we need to integrate these far better than we are today” (Bridgeland et al., 2013).

**Social Emotional Curricula**

CASEL was developed in 1994 with the primary goal of “establishing high-quality, evidence-based SEL as an essential part of preschool through high school education” (Elbertson, Brackett, & Weissberg, 2010, pg. 1017). The National Research Council and Institute of Medicine (2000) considers that what our nation has done for our birth to five population and their social emotional development is not up to standards in achieving CASEL’s goal. The Council also stresses that scientists, policy makers, business and community leaders, health care practitioners, teachers, and parents must work together to identify and sustain practices that are effective, create new strategies to replace those that are not achieving their purposes, and consider new approaches as needed. Raver and Knitzte (2002) answered the National Research Council and Institute of Medicine by writing a policy paper regarding strategies to promote social emotional school readiness in three and four year old children. Within this paper, several suggestions for policymakers and researchers are made. First, policymakers should pay close attention to classroom-based strategies to promote social and emotional learning and consider interventions while recognizing the link between social emotional development and academic performance. Also, researchers should continue determining the effectiveness of various social emotional interventions and curricula in the classroom.

Research conducted during the past few decades indicates that social and emotional learning (SEL) programming is a very promising approach to reducing problem behaviors, promoting positive adjustment, and enhancing academic performance (Greenberg et al., 2003). Implementing explicit evidence-based SEL strategies and instructional approaches are linked to a
variety of positive outcomes for children, ranging from improved attitudes and behaviors to better academic performance. A number of studies have shown that students who receive SEL programming have achievement scores on average of 11 percentile points higher than students who do not (Durlack, Weissberg, Dymnicki, & Schellinger, 2011). Conversely, young students without developmentally appropriate emotional and social competencies have been found to participate less in the classroom, are less accepted by classmates and teachers, and teachers provide them with less instruction and positive feedback due to their behavior and social emotional skills (Raver & Knitze, 2002).

So why is it important to use an evaluated, evidence-based SEL curriculum? Current available SEL programs have fundamental elements based on an underlying theory of how desired student changes are achieved. Schools interested in employing an SEL program are often times urged to start by familiarizing themselves with a few such programs that already exist which can be conveniently found on the CASEL website. This will give them a better understanding of how these programs work and enable them to adapt such a program to meet the needs of their students and show their teachers the benefits of implementing such a program into daily routine. Using a well-designed and evaluated program is much less work for educators than creating their own program from pieces of existing programs (CASEL, 2003). Powell and Dunlap (2009) also created a great resource for professionals and parents alike to review the existing social emotional curricula and programs side by side. The curricula compared was chosen only if it promoted healthy social emotional development in young children with and without disabilities. Additionally, it only included interventions that are specifically intended to impact social emotional behavioral outcomes for children age birth to five, are manualized, and
have been evaluated in at least one study that reported social emotional behavioral outcomes and was published in a peer reviewed journal.

Izard et al., (2008) found in two separate studies that emotion-based prevention curricula increases social emotional skills and decreases maladaptive behavior. Emotion-based prevention increases young children’s ability to understand and regulate their emotions and reduce maladaptive behavior. In the first study, a control group Head Start program was compared to a Head Start program using an emotion-based prevention program. The program using emotion-based prevention produced greater increases in emotion knowledge and emotion regulation and decreases in negative emotion expressions, aggression, anxious/depressed behavior, and negative peer and adult interactions. Izard and colleagues went further to examine the effects of an emotion-based prevention curricula versus an established program targeting general problem solving skills, I Can Problem Solve. Again, emotion-based prevention produced increases in emotion knowledge, emotion regulation, positive emotion expression, and social competence.

Durlack et al., (2011) conducted a study investigating whether SEL programs can be incorporated into routine education curriculum and successfully delivered by staff during the regular school day. Results suggested that programs implemented by the classroom teacher were effective in increasing SEL skills, attitudes towards self and others, positive social behavior, and academic performance and decreased conduct problems and emotional distress. This was assessed by teacher ratings of student performance using Elliott and Gresham’s Social Skills Rating Scale, Child Behavior Checklist, Children’s Manifest Anxiety Scale, standardized achievement test scores, and student self-reports. Using modeling, role play, and group discussion, teachers can spend a relatively short amount of time per day to instruct students on
how to identify and label feelings, how to communicate with others about their emotions, and how to problem solve or remedy disputes with peers (Raver, 2003).

Payton et al., (2008) found after an extensive comprehensive review of the current research regarding social emotional curricula conducted during the school day that SEL programs significantly impact a wide range of outcomes across several domains of development both with students with existing emotional and behavioral problems and those without. Social emotional curricula can therefore provide benefits to children not identified as at risk by reducing classroom disruptions as well as supporting their healthy social emotional development (Frey et al., 2005). As mentioned previously, the average student in an SEL intervention program gained 11 to 17 percentile points on academic test scores compared to the average student in a controlled classroom. Other positive outcomes besides academic achievement included improved SEL skills, attitudes towards self and others, positive social behaviors, and reduced conduct problems and emotional distress.

**Social Emotional Development and Students who are Deaf or Hard of Hearing**

While researchers know that hearing loss in children affects social emotional development, there is no clear consensus regarding the prevalence rate (Dammeyer, 2010). Also, factors influencing social emotional development vary in the research. For example, some studies find educational placement affects social emotional difficulties (Keilmann, Limberger, & Mann, 2007), gender of the student, degree of hearing loss, age of identification and intervention, additional disabilities, and parental resources and stress have all been researched and associated with a higher prevalence of social emotional difficulty as well (Dammeyer, 2010). Ultimately, children with poorer language skills are more vulnerable to behavior problems (Domitrovich, Cortes, and Greenberg, 2007).
Regardless of the cause of delayed social emotional development, researchers in this field agree that it is prevalent in this population. Therefore, policymakers and educators alike must combat development delay in this area. From birth to age five, deaf or hard of hearing children are developing both linguistically and cognitively as well as making progress in their social, emotional, and regulatory capabilities (National Research Council and Institute of Medicine, 2000). These critical areas of early development are intertwined and necessitate focused attention to each.

Language development in children who are deaf or hard of hearing is often times delayed but can be promoted through early identification and early intervention (Yoshinaga-Itano, 2003). While language development is vital in learning to communicate, more and more research has been dedicated to exploring the effects of social emotional development on communication and function in deaf or hard of hearing children as well. Social emotional competency is highly related to language development. As language develops, social emotional skills are promoted because children have the ability to describe emotions and discuss ways to self-regulate or problem solve (Herndon et al., 2013). In a study by Yoshinaga-Itano (2003), 150 hearing impaired children were given the Meadow-Kendall Social Emotional Inventory Assessment. Those children who were rated to have strong language development also had strong personal social development, indicating a significant relationship between language and social emotional competency development. However, there is still much to be learned about how language, emotional, and behavioral skills work together in young children who are deaf or hard of hearing to support or impede their early school success (Raver & Knitze, 2002).

In the first few years of life, the child’s daily environmental interactions are essential for developing a language system and social emotional skills (Gascon-Ramos, 2008). In both home
and school environments, the attitudes and behaviors of role models in the child’s life affect their intrapersonal and interpersonal relationships as well as the child’s social emotional adjustment and overall wellbeing (Keilmann et al., 2007). However, only a few studies focus on emotional aspects like quality of life or wellbeing in children who are deaf or hard of hearing.

Regardless of the lack of research specific to this area, it is clear that emotional skills are a prerequisite to the cognitive learning skills needed for education (Elbertson et al., 2010). “We know emotion is very important to the educative process because it drives attention, which drives learning and memory” (Elias et al., 1997) and emotions impact our perception, motivation, critical thinking, and behavior (Izard et al., 2008).

Survey Method

Participants

In order to assess the current use of social emotional curricula with mainstreamed deaf or hard of hearing 3-5 year olds, I sent a survey to preschool and kindergarten teachers in St. Louis and neighboring school districts.

Inclusion criteria:

- Preschool or Kindergarten teacher
- Teacher in general education
- Teacher with a deaf or hard of hearing student

Exclusion criteria:

- Special Education teachers
- Deaf Educators
- Substitute teachers
The survey was sent to the following 13 school districts: Brentwood, Clayton, Ferguson-Florissant, Francis Howell, Ladue, Lindbergh, Maplewood-Richmond Heights, Mehlville, Parkway, Pattonville, Rockwood, Saint Charles, and Wentzville. However, only four of these school districts had teachers who met the inclusion criteria. These districts were Francis Howell, Pattonville, Rockwood, and Wentzville.

Materials
The only material used to collect responses was a self-made questionnaire using www.surveymonkey.com. My survey was entitled “Social Emotional Curricula” and the questions are as follows.

1. What school district do you work for?
2. Do you teach preschool or kindergarten?
3. Does your school district implement a social emotional curriculum?
4. What is the name of the curriculum?
5. If there is no curriculum for social emotional development in your school district, do you implement any social emotional lessons or skills into your classroom? For example, do you teach about personal feelings, the feelings of others, empathy, or promote prosocial behavior?

Procedure
I obtained 479 public email addresses of preschool and kindergarten teachers from the previously mentioned school district’s web pages. The email sent was identical in content and it introduced myself and the purpose of my study as well as a link to the optional survey. It was clearly stated that the survey was not mandatory but participation would be appreciated. The email was sent on November 4, 2013. The email was sent again to the same group of 479
educators 2 weeks later on November 18, 2013 in hopes of catching the eye of those who may have dismissed the first email. After both rounds of emailing, I received responses from 53 participants. It is certain that no responses were counted twice due to the nature of www.surveymonkey.com. Of the 53 participants who responded, five met all inclusion criteria including having a deaf or hard of hearing child in their class. Three respondents were preschool teachers while the other two were kindergarten teachers. Two respondents work for the Francis Howell School District while the other three respondents were from Wentzville, Rockwood, and Pattonville.

Results

The purpose of this survey was to find out if children who are deaf or hard of hearing in general education preschool and kindergarten classrooms are receiving explicit and direct social emotional learning from their teachers. In order to assess the current state of social emotional learning in schools I sent a survey to teachers. The teachers’ responses are included in Appendix A. What was found is that none of the five surveyed teachers used an explicit social emotional curricula. However, four of the five teachers’ school districts do implement PBIS (Positive Behavioral Interventions and Supports) school-wide. PBIS was developed by the Office of Special Education Programs to give schools information and assistance for identifying, adapting, and sustaining school-wide disciplinary practices. While PBIS is a behavior management plan by nature, it does address and aim to increase some social emotional aspects which include but are not limited to poor peer relationships, coping skills, lack of responsibility, and behaviors related to the inability to regulate emotions such as aggression, anxiety, defiance, frustration, negativity, and sadness (OSEP Center, 2009). The last respondent from Rockwood School District reported
that no social emotional curriculum was enforced and no direct in-classroom lessons were taught to his or her students.

**Discussion**

The purpose of this survey was to examine if explicit social emotional competencies are being taught in general education environments. Unfortunately, the Rockwood School District reported no social emotional curriculum for its students. However, this teacher does describe her knowledge of the importance of explicitly teaching these skills by stating, “I try to implement social skills in every lesson I teach since we are getting so far away from focusing on those social skills now. We are focusing so much on academic skills now rather than taking time to teach important social emotional skills.” While a curricula is not implemented, the teacher does recognize the importance and incorporates her own techniques to introduce social emotional skills. However, the other four teachers reported that they use PBIS to implement behavioral management strategies. While PBIS is not a social emotional curriculum, it does address many overlapping skills as social emotional curricula. With PBIS, the administrators and staff who implement PBIS agree on defined behavioral expectations, teach the expectations to all students, agree on the same form of tangible reinforcement for desirable behaviors, and agree on how to respond to behavioral violations (Bradshaw, 2010). The ability to control your behaviors are interrelated to the social emotional competency of self-management (managing emotions, controlling behaviors). It was positive to find that four of the five teachers implement a program that encourages the development of some social emotional skills for their students.

Overall, none of the interviewed teachers with students who are deaf or hard of hearing implemented a social emotional curricula. Conversely, many other districts without deaf or hard of hearing students in their classrooms did implement either specific social emotional curricula,
or behavior management programs. These curricula are listed in Appendix B. As previously mentioned in the literature review, National survey data has determined that preschool teachers report that child disruptive behaviors are the most challenging they deal with and they result from undeveloped social emotional development. However, socially and emotionally well-developed children are school-ready, have good peer and teacher relationships, take part and are able to defeat challenging tasks, have good language development, listen to instructions, and are attentive (National Research Council and Institutes of Medicine, 2000). Early childhood education should focus on providing young children with the social opportunities and school experiences they need to develop the abilities that we expect to see in early school (Carlton & Winsler, 1999). Relatedly, social emotional competence and academic achievement are highly related and instruction is needed to maximize students’ potential to succeed in school (Zins & Elias, 2007). Based on the previous research, it is surprising to find that no schools implement a social emotional curricula.

After conducting the survey, several limitations did come to the surface that should be considered. Perhaps the main limitation of this survey was the amount of responses received. The first inevitable limitation pertaining to this is that only teachers who have students who are deaf or hard of hearing could respond. Because there is no avenue for me to find the teachers with these students, I had to survey all teachers in the surrounding area. Unfortunately, there is no way to know how many teachers have students who are deaf or hard of hearing. While a survey only taking into account five teachers’ experiences is not comprehensive, the findings from the five teachers were very telling. Further research should focus on providing education about the effectiveness of these programs to administrators who can enact and carry out the process of implementation. Due to the findings in my survey, I would also suggest that future research
should focus on both outreach and providing schools with instruction on how to implement more explicit curricula for social emotional development. Due to the lack of knowledge in the surrounding area regarding explicit curricula, I have reviewed and suggested a specific curricula.

**PATHS: Promoting Alternative Thinking Strategies**

A preventative program that specifically targets social emotional development of children is PATHS (Providing Alternative Thinking Strategies). Not only is the program well known and used in typically developing and specialized classrooms, it is comprehensive and is the highest-rated curriculum for promoting social and emotional competencies (Hintermair, 2007). PATHS was developed by Drs. Mark T. Greenberg and Carol Kusche beginning in 1993. Since then, they have been pioneering research on its impact in schools (National Deaf Children's Society, 1999). PATHS was originally developed for use in special education classrooms as well as preschool and kindergarten classrooms, and has since been adapted to general education settings. Furthermore, Preschool PATHS was recently developed to target ages 3-5 specifically (Kam, Greenberg, & Kusche, 2004). As quoted by developer Mark T. Greenberg:

One of the most important skills children need to have for school readiness is getting along with friends and being able to pay attention in the classroom. When you can get along with others and pay attention well, you are going to be a good learner. In fact, social emotional skills are one of the best predictors of which children will stay in school and which will drop out. We know this because the parts of the brain that are related to emotion regulation and to thinking skills are intimately related and they develop together. So the more children can calm down, regulate their emotions, and get along with others, the more they are able to use their cognitive skills to attend and learn.

- Dr. Mark Greenberg, developer of the PATHS® program
PATHS meets CASEL (Collaborative for Academic and Social Emotional Learning) guidelines and has been effective in various school systems. It emphasizes conflict resolution, stopping to think before you act, and managing and expressing emotions effectively. It is designed to promote social and emotional competence in students and to reduce aggression and behavior problems while enhancing classroom productivity and the overall quality of the learning environment (Elbertson et al., 2010). In addition to meeting CASEL guidelines, the PATHS program can help students meet Common Core State Standards for English Language Arts and has received the highest possible rating from Blueprints for Healthy Youth Development (Center for the Study and Prevention of Violence, University of Colorado). The PATHS program is one of only eight programs to receive this recognition and over 1,100 programs have been reviewed to date. In addition, the PATHS program is the only social and emotional learning curriculum to achieve this rating. PATHS has also accumulated several other noteworthy recognitions including being rated as a Model Program with perfect scores from the following agencies: SAMHSA's National Registry of Evidence-based Programs and Practices, Centers for Disease Control and Prevention, U.S. Department of Justice/U.S. Department of Health and Human Services, and U.S. Surgeon General's Report on Youth Violence (PATHS®, 2013).

**PATHS Curriculum**

Preschool PATHS focuses on the goals of self-esteem, self-control, understanding and recognition of emotions, understanding of social relationships, and interpersonal problem solving skills, and promotes the use of these skills in social interactions (National Deaf Children's Society, 1999). The PATHS Preschool/Kindergarten program specifically addresses the following educational objectives:
1. To increase children's self-control

2. To increase children's ability to get along with others by improving friendship skills (sharing, caring, and other social skills)

3. To enhance children's self-esteem, self-confidence, and ability to give and receive compliments

4. To increase children's understanding and communication of the vocabulary of emotions

5. To help children recognize and understand how one's behavior affects others

6. To increase children's understanding and use of logical reasoning and problem-solving vocabulary

7. To improve children's knowledge of, and skill in, the steps of social problem solving (PATHS®, 2013).

Preschool PATHS begins by establishing classroom rules and routines and introducing a daily compliment activity which increases the level of warm support and predictable social order in the classroom. The program includes 3 main units: The Self-Control Unit, Feelings and Relationships Unit, and the Interpersonal Cognitive Problem-Solving Unit. Lessons in the Self-Control unit teach children a strategy for emotion regulation (“doing turtle”). The strategy is based upon a story about a young turtle who runs into lots of problems at school and with friends because he doesn’t stop to think. With the help of a wiser turtle, he learns how to use self-control which makes school more enjoyable and friends want to be around him (The PATHS Curriculum, 2012). Children are shown how they can calm down when they are upset or overly excited; they can stop their behavior, go into their shell (hug themselves), take a deep breath to calm down, and state the problem and how they feel. This explicit behavioral sequence is modeled and reinforced extensively as teachers intervene
when children are provoked by a disagreement or frustration, and support them in using self-calming (“turtle”) and social problem-solving strategies to work out a plan. “Doing turtle” is unique because it provides a system for generalization throughout the day.

Lessons and activities in the Feelings and Relationships Unit illustrate different feelings with photos, stories, discussions, and role plays, which combined with teacher “emotion coaching,” enhances children’s abilities to recognize and label their own feelings and those of others. It also teaches that all feelings are okay to have while behaviors can sometimes be okay to have and sometimes not okay to have (The PATHS Curriculum, 2012). These activities could foster the development of executive function skills by promoting the development of perspective taking and empathy and fostering the understanding of self-awareness (Bierman, Nix, Greenberg, Blair, & Domitrovich, 2008). Friendship lessons provide explicit instruction, modeling, discussion, and practice in the skills and rewards of social exchange (helping, sharing, taking turns).

Lastly, the Interpersonal Cognitive Problem-Solving Unit is the final piece which is best developed after the preceding units have been completed in order to more competently learn problem-solving skills. Visual reminders are in each PATHS classroom in the form of a stoplight: red (stop), yellow (get ready), and green (go). This unit focuses on ‘stopping’ to think about what is happening and identifying the problem and feeling, ‘getting ready’ to decide on possible solutions and deciding on the best solution, ‘going’ by trying the plan, and finally evaluating the outcome (The PATHS Curriculum, 2012). These cognitive and behavioral experiences should enhance a child’s executive control capacities, by supporting the control of emotion and behavior (Greenberg, 2006).
The program’s lessons and activities highlight writing, reading, telling stories, singing, drawing, science and math concepts, as well as helping students build the critical cognitive skills necessary for school readiness and academic success. The core of the PATHS curriculum is its emotional component that emphasizes affective awareness of oneself and of others. Even though behavior modification is part of the program, its emphasis is less on traditional modification but on strengthening the child’s ability to self-regulate their behavior (Domitrovich, Cortes, & Greenberg, 2007).

**ABCD Model**

PATHS utilizes the Affective-Behavioral-Cognitive Dynamic (ABCD) model of development which places importance on the developmental integration of affect, behavior, and cognitive understanding as they relate to social and emotional competence (Domitrovich et al., 2007). The ABCD model focuses on how cognition, affect, language, and behavior become integrated in the developing child. Students who learn about affect (A) know how to recognize and regulate their own feelings, others feelings, and how to communicate about them. Students whose behavior (B) is positively reinforced know how to use self-control strategies which helps with classroom behavior management and have good relationship skills. Lastly, students who utilize their cognitive (C) or thinking skills can recognize problem and come up with solutions through conflict resolution.

A fundamental concept is that as youth mature, emotional development precedes most forms of cognitive development. More specifically, young children experience emotions and react to them before they can verbalize their experiences. In early childhood, social and emotional development can mold other ways of thinking and must be integrated with cognitive and linguistic abilities, which are much slower to develop. When a child reaches elementary age,
further integration occurs among affect, behavior, and cognition/language through maturation of their prefrontal brain. These processes of brain maturation are important in achieving socially competent action and healthy relationships (Greenberg, 2006). Again, because emotional development precedes cognition development, emotion or affect is an important precursor to other ways of thinking and so must be integrated with a child’s cognitive and linguistic development. Providing the preventative social emotional competencies to further integrate affect, behavior, and cognition will in turn lead to healthier social emotional development (Kam et al., 2004).

**PATHS Effectiveness**

The Channing Bete Company, PATHS’ publisher, states that “in rigorous clinical studies, the PATHS program has been shown to: reduce teachers' reports of students exhibiting aggressive behavior by 32%, increase teachers' reports of students exhibiting self-control by 36%, increase students' vocabulary for emotions by 68%, increase students' scores on cognitive skills tests by 20%, significantly improve students' ability to tolerate frustration plus their ability and willingness to use effective conflict-resolution strategies, reduce behavior problems, such as aggression at school (for both regular and special-needs students), significantly decrease conduct problems and the percentage of aggressive/violent solutions to social problems, reduce depression and sadness among special-needs students, significantly increase teachers' reports of improved behavior in the classroom, and significantly increase teachers' reports of improved academic engagement”.

Greenberg (2006) tested the PATHS curriculum in a randomized control study of 318 second and third grade students. Those teachers in the intervention group received a three day training workshop as well as coaching from a PATHS trainer weekly regarding curriculum
implementation. The lessons were taught three times a week and teachers also taught
generalization of PATHS skills in order to support students in a natural environment. Students
were pretested, post tested, and assessed at follow-up one year after the curriculum ended.
Assessments were collected by teacher report of internalizing and externalizing behavioral
problems using the Child Behavioral Checklist, inhibitory control was assessed using the Stroop
Test, and verbal fluency was assessed using the Verbal Fluency Subtest of the McCarthy Scales
of Children Abilities. Results indicated that there were significant differences at posttest showing
greater improvements in both inhibitory control and verbal fluency in the intervention children.

A study by Domitrovich et al. (2007) reports outcomes from a clinical trial evaluating
PATHS for preschool-age children in Head Start, including 20 classrooms in Pennsylvania. The
Preschool PATHS program is a modified version of the PATHS program for ages three to five.
Over a nine month period, the ten teachers in the intervention classrooms implemented PATHS.
Child assessments and both teacher and parent reports of child behavior were collected at the
beginning and end of the school year. These assessments included Recognition of Emotion
Concepts subtest from the Kusche Emotional Inventory to assess receptive emotion vocabulary,
the Assessment of Children’s Emotions Scales to assess expressive emotional knowledge, the
Denham Puppet Interview to assess affective perspective-taking skills, the Day/Night task to
assess inhibitory control in which children are instructed to say ‘day’ when they see a night card
and ‘night’ when they see a day card, the Attention Sustained subtest from the Leiter-Revised
Assessment Battery to assess visual-spatial memory and attention, the problem-solving portion
of the Challenging Situations Task to assess behavioral responses to common social problems, a
teacher-report of child using the Preschool and Kindergarten Behavior Scales to assess social
skills like social interaction, social cooperation, and social independence, and a parent-report of
child using the Head Start Competence Scale to assess the child’s social and emotional skills that reflect interpersonal relationships and emotion regulation. The lessons were incorporated into “circle time” and were divided into the following thematic units: compliments, basic and advanced feelings, self-control strategies (“Turtle Technique”), and problem solving.

Results suggest that the children who received intervention had higher emotion knowledge skills and were rated as more socially competent compared to the control group of peers. Both teachers and parents reported significant improvement in the children’s social emotional competence. More specifically, teacher and parents reported the children who received intervention displayed higher levels of social interaction, emotion regulation, and social skills with peers. Preschool PATHS is one of few classroom-based social emotional curricula to have been evaluated with children only under the age of five (Izard, 2008) and its findings indicate that children’s social and emotional competence can be increased through direct instruction during the preschool age (Domitrovich et al., 2007). In addition, findings suggest that Preschool PATHS is effective with a broad range of students including students with language delays. Domitrovich et al. (2007) suggests that the combination of a social emotional curriculum like PATHS and language intervention would lead to a positive impact on children’s ability to use language to mediate problem situations, self-regulate, and communicate effectively with peers.

Little research has been dedicated to the effectiveness of PATHS in special education in the 3-5 year age range, however, Kam et al. (2004) examined the effectiveness of PATHS on school-age children in special education. Compared to students in general education settings, children with special needs deal with frustrations related to their learning difficulties. They also engage in more problematic behaviors that may hinder their relationships with teachers as well as peers. As the need grows in general education, the need for evidence-based social emotional
interventions in special education settings grows as well. In Kam’s et al. (2004) study, 133 students in special education were divided into a control and intervention group. The students were assessed prior to implementation, post intervention, and for two years after intervention. Assessments used included the Kusche Affective Interview to assess receptive and expressive examples of personal experience with different emotions, the Social Problem-Solving Interview to assess social problem-solving skills by depicting three hypothetical social situations, the Children’s Depression Inventory for child self-report of depression, the Child Behavior Checklist for teacher rating of problem behavior, and the Teacher-Child Rating Scale for teacher rating of social competence.

As Kam and colleagues (2004) hypothesized, the children in special education exhibited higher baseline levels of undesirable behaviors, higher levels of depression, and lower levels of emotional understanding and social problem-solving skills. After intervention and the years following, PATHS had a positive impact on behavior and lowered depression levels in students. The implementation of PATHS also led to immediate improvement of the knowledge of both comfortable and uncomfortable feelings. Students were more likely to recognize feelings in others and provide solutions that were non-confrontational, displaying self-control skills post-intervention.

PATHS Feasibility

The cost of PATHS is another area schools need to consider. Evidence shows that effective SEL programs can provide a good return for their costs; that is, the value of their benefits exceeds their costs. Examples of demonstrated benefits include improved educational outcomes (e.g., test scores, graduation rates), reduced crime, lowered substance abuse, and decreased teen suicide attempts. The PATHS Preschool/Kindergarten Classroom Module costs
$799.00 and the modules decrease in price as the grade level increases. As with other areas of education, SEL programs must be examined carefully before being adopted (Zins & Elias, 2007).

Conclusion

The purpose of this study was tri-fold: to examine the importance of teaching social emotional learning competencies to children who are deaf or hard of hearing, to survey local schools to see the current social emotional curricula implementation, and to recommend a specific curriculum, Promoting Alternative THinking Strategies (PATHS). From birth to age five, all areas of development proceed at a greater rate than at any other time in our lives so the elements of early intervention that address social and emotional development are equally as important as those that address language and cognitive development. Furthermore, children who are deaf or hard of hearing are at risk of delay in areas of communication including social emotional development. These children have an innate barrier to communication which can make social learning challenging. Deafness limits incidental learning, or overhearing how others deal with strong emotions and how others conduct their relationships. However, promising results of interventions have suggested that emotional problems are identifiable early, can be changed, and can be reduced over time. School-based prevention centered on the coordination of social, emotional, and academic learning should be a fundamental part of the curriculum beginning as early as preschool.

My survey revealed that none of the respondents utilize a social emotional curriculum but four out of five implement Positive Behavioral Intervention Support. While PBIS is a behavior modification program, it does include some social emotional targets which is promising. After discovering the importance of social emotional development and the lack of social emotional curricula implementation in the St. Louis area, my next challenge was to find a curriculum to
propose for implementation. As PATHS developer Mark T. Greenberg said, “The parts of the brain that are related to emotion regulation and to thinking skills are intimately related and they develop together. So the more children can calm down, regulate their emotions, and get along with others, the more they are able to use their cognitive skills to attend and learn.”
References


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http://dx.doi.org/10.1017/S0954579408000175


doi: 10.1177/10634266040120020101


# APPENDIX A

<table>
<thead>
<tr>
<th>School District</th>
<th>Educational Level</th>
<th>Number of Deaf Children</th>
<th>Social Emotional Curriculum?</th>
<th>Name</th>
<th>Lessons?</th>
</tr>
</thead>
<tbody>
<tr>
<td>Wentzville</td>
<td>Preschool</td>
<td>1</td>
<td>Yes</td>
<td>PBIS</td>
<td></td>
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<tr>
<td>Francis Howell</td>
<td>Preschool</td>
<td>1</td>
<td>Yes</td>
<td>PBIS</td>
<td></td>
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<tr>
<td>Francis Howell</td>
<td>Preschool</td>
<td>2</td>
<td>Yes</td>
<td>PBIS</td>
<td>Monthly guidance lessons from building counselor about character education.</td>
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<tr>
<td>Pattonville</td>
<td>Kindergarten</td>
<td>1</td>
<td>Yes</td>
<td>PBIS</td>
<td>Several books about feelings and discuss being respectful of others.</td>
</tr>
<tr>
<td>Rockwood</td>
<td>Kindergarten</td>
<td>1</td>
<td>No</td>
<td></td>
<td>I try to implement social skills in every lesson I teach since we are getting so far away from focusing on those social skills now. We are focusing so much on academic skills now rather than taking time to teach important social/emotional skills.</td>
</tr>
</tbody>
</table>
APPENDIX B

Social Emotional Curricula Used in Saint Louis School Districts

- Kelsey and Kelso - Conflict Management Program
  
  http://kelsoschoice.com/the-program/about-kelsos-choice/

- Project Construct
  
  http://www.projectconstruct.org/index.html

- PBIS - Positive Behavioral Interventions and Supports
  
  http://www.pbis.org/

- Leader in Me – 7 Habits of Happy Kids
  
  http://www.theleaderinme.org/the-7-habits-for-kids

- Character Plus
  
  https://www.characterplus.org/

- Second Step
  