

## INTRODUCTION

The ACCESS program (Adolescent Curriculum for Communication and Effective Social Skills) is a companion volume and upward extension of the ACCEPTS program (A Curriculum for Children's Effective Peer and Teacher Skills). It is designed to improve the social competence levels of adolescent students in middle and high school settings. Four years of effort have been invested by the authors in development, trial testing, and revision of the ACCESS program.

As with ACCEPTS, the ACCESS program is designed for use with mildly and moderately handicapped students. Teachers of adolescent students in regular and special education settings are viewed as the primary consumers of the curriculum. However, the ACCESS curricular content is also appropriate for use by a range of related-services professionals working in school settings who are concerned with developing improved competence levels within communication and interpersonal skill domains. These professionals include speech therapists, school psychologists, social workers, school counselors, and mental health personnel.

ACCESS is based on principles of direct instruction and relies on competency-based and problem-solving approaches. Adolescent students exposed to ACCESS are expected to assume an active role in developing mastery of specific social skills and in applying those skills during their daily social interactions. The curriculum cognitively teaches mastery of social skills in three primary domains: (a) peer-related social skills, (b) adult-related social skills, and (c) self-related social skills. Peer-related social skills are further subdivided into social interaction skills and coping skills. These three skill domains support the critically important social-behavioral adjustments that adolescents are required to make within a range of school, community, employment, and post-school environments.

Peer-related social skills are instrumental in gaining access to peer-controlled social networks in which important socialization experiences occur and essential

social competencies (making and keeping friends, coping effectively with aggression, offering assistance, handling group pressures) are developed. The skills taught in this section of the curriculum are especially important in maintaining positive interpersonal relationships and developing social support networks. The skills focus on achieving effective social-behavioral adjustments with classmates in school and coworkers in employment settings. Adult-related social skills are designed to support effective social-behavioral adjustments to settings that are controlled primarily by adults (e.g., classrooms, employment sites, family settings). Skills important in this domain include making assistance needs known appropriately, disagreeing with adults in an acceptable manner, complying with adult requests and instructions, and developing good work habits. Much of school and postschool success can be attributed to mastery of these required adjustments. Self-related social skills, which assume great importance during adolescence and adulthood, are those skills that support personal competence in the management of daily life activities. Skills subsumed in this domain include assuming responsibility for one's behavior, being organized, coping with depression, using self-control, and so forth. Mastery of skills in these three domains is important for adolescents in general and is especially important for handicapped pupils who consistently experience problems in adjusting to both school and postschool environments.

The ACCESS program teaches 31 social skills distributed across the three social-behavioral adjustment domains described above and consists of three major curricular components. These components are (a) the teacher's manual, (b) student study guide, and (c) situational role play cards (Appendix H of this volume). These three components are used interactively during the instructional process and require substantial student involvement in the acquisition and application of ACCESS social skills. The teacher's manual is divided into four sections. Section I is devoted to background

information on the development and testing of the ACCESS program; Section II covers procedures for the screening, identification, placement, and evaluation of students who receive ACCESS instruction; Section III describes instructional procedures; and Section IV contains scripted social skills lessons for the 31 ACCESS social skills. The student study guide is a counterpart to the 31 scripted lessons in the teacher's manual. It is designed for use during instruction and includes a major portion of each lesson's instructional content. The situational role play cards provide skill-specific situations, which are used to test students' knowledge and application skills during instruction.

ACCESS contains the following elements:

- A placement test with accompanying normative data for decision making.
- A 10-step instructional procedure based on direct instruction principles.
- Guidelines for teaching the curricular content.
- Curricular components including a teacher's manual, student study guides, and situational role play cards.
- Scripted presentation formats.
- Procedures and guidelines for analyzing social situations and responding appropriately.
- Homework assignments to build in mastery of skills application
- Behavior management procedures for use in teaching the curriculum.

The ACCESS program contains two unique components that are especially important (a) in heightening adolescents' awareness of the subtle features of complex social skills, (b) in analyzing social situations to guide appropriate responding, and (c) in evaluating the social outcome of one's behavior. These components consist of critical skill features and the Triple A Strategy. Each is described briefly below.

*Critical skill features* refers to a conceptual analysis of each ACCESS social skill, conducted by the authors, to identify the critical elements or components of the skill. In the authors' judgment, mastery of these critical features is essential to a complete understanding and correct application of social skills in general and especially those adolescent social skills included in the ACCESS program. As a rule, each social skill is subdivided into three to six critical features. For example, the skill of *offering assistance* consists of the following critical features: (a) Decide whether the person needs help, (b) lis-

ten to what the person needs, (c) decide whether you can help or whether you know someone who can, and (d) offer to help and follow through. Similarly, the skill of *joining in with others* consists of the following features: (a) Find a person or group you would like to join, (b) approach confidently, (c) watch and wait for a good time to join in, (d) decide on the best way to join in, and (e) join in. The critical features of each ACCESS social skill are taught separately in a predetermined sequence, and students are given opportunities to analyze social situations and to recognize the presence or absence of each feature. This approach is highly effective in increasing students' general social perceptiveness and in improving their ability to critically analyze social situations.

The *Triple A Strategy* refers to a standard procedure, taught to students exposed to the ACCESS program, for analyzing social situations, making choices, and adjusting one's behavior depending on the social outcomes or consequences of one's behavior. Triple A means *assess, amend, and act*. The ACCESS program teaches guidelines for the correct implementation of each of these three elements and then provides numerous opportunities for its integrated application. The Triple A Strategy is the first lesson taught in the ACCESS program. This strategy is then used throughout the remaining 30 lessons both as an instructional device and as a vehicle for facilitating the application of cognitively mastered social skills through homework assignments in daily activities. The Triple A Strategy has been one of the most consistently well-received components of the ACCESS program by both students and teachers and is an important factor underlying the high social validation ratings of the program by consumers.

Direct instruction principles incorporated into the ACCESS instructional procedures include (a) clear definitions and specifications of each social skill taught, (b) selection and presentation of both examples and non-examples of the correct application of skills, (c) the sequencing of skills in the curriculum so that increasing complexity is built into the student's skill repertoire as instruction progresses, (d) provision of numerous opportunities for practice and skill application in order to facilitate mastery, (e) use of systematic correction and reteaching procedures, and (f) use of multiple examples with common elements to teach the general case for the purpose of fostering generalization. Direct instruction has proven to be one of the most effective instruction methodologies yet developed for the cognitive teaching of academic content to both handicapped and nonhandicapped student populations (Becker, 1984; Engelmann & Carnine, 1982; Gersten & Maggs, 1982). Direct instruction is equally appropriate for teaching social skills curricular content and, when combined with opportunitie

for application through homework and behavior management procedures, produces powerful outcomes.

The ACCESS program was designed for maximal effectiveness in teaching social skills for improving the social competence levels of mildly handicapped and regular students in the adolescent age range. Schumaker, Pederson, Hazel, and Meyen (1983) published standards that should govern social skills curricula for mildly handicapped adolescent students and used these criteria to review existing social skills programs. They pose five important criteria that such curricula should address: (a) Does the curriculum promote social competence? (b) Does the curriculum accommodate the learning characteristics of the mildly handicapped? (c) Does the curriculum target the social skill deficits of the mildly handicapped population? (d) Does the curriculum provide training in situations as well as skills? and (e) Does the curriculum incorporate instructional methodologies found to be effective with the mildly handicapped? These criteria were used to guide the development, content selection, testing, and revision of the ACCESS program.

To benefit from instruction in the ACCESS program, students should have the following characteristics: (a) a fourth or fifth grade reading level, (b) ability to benefit instructionally from participation in situational role

plays and behavioral rehearsal procedures, (c) rudimentary language skills, and (d) a behavioral repertoire that allows for satisfactory academic engagement (attending, ability to follow directions, listening skills). As a general rule, these prerequisites would exclude severely handicapped students. The ACCESS program would have to be revised extensively for effective use with this population. The ACCESS program was designed for use with the broad range of handicapped students in school and is especially appropriate for learning disabled, mentally retarded, and behavior disordered students who have serious social skills deficits in both school and postschool environments (Gresham, 1981; L'Abate & Milan, 1985).

Although the ACCESS program can be taught successfully using one-to-one and large group instructional formats, the authors strongly recommend its use in small group instructional arrangements whenever possible. The ACCESS program was designed for use with small group teaching formats, because research indicates that such formats are most effective for teaching social behavior content (La Greca & Santogrossi, 1980). Depending on students' ability levels and amount of daily instruction devoted to the program, 2 to 4 months would normally be required to move a group of students through the program. Approximately one hour of daily instruction in the program is recommended.