



EVALUATION OF SOCIAL SKILL LEVELS OF THE HEARING-IMPAIRED FOOTBALL PLAYERS

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Abstract

Purpose: The aim of the present research was to evaluate social skill levels of the hearing-impaired football players in terms of various variables.

Methods: The football players (n: 142) of 9 football clubs (1st league: 4 teams, 2nd league: 5 teams) who were selected with random sampling method were included in the research. The ages of the players ranged from 18 to 33. The social skill levels of the research group were assessed in terms of "age, economic status and league category". As the data collection tools, Personal Information form and Social Skills Inventory developed by Riggio (1986) the Turkish adaptation of which was performed by G. Yüksel (1997) were used. For the statistical comparisons; "One-Way Anova" and "Independent-Samples T Test" test were used during the analysis the significance level was 0.05.

Results: As a result, it was found out that social skills of the football players with hearing-impairment were at a moderate level (229.82±26.34). Besides, it was noted that as age and income status increased, so did social skill levels. As for the league category, there was a significant difference in "emotional expressivity and social expressivity" subscales on behalf of the football players in the 1st league (P<0.05).

Conclusions: Every sport activity is primarily a social experience for the disabled people. Additionally, it affects every individual who is in its natural ambience in different levels and supports all kinds of the developments.

Keywords: Hearing-impaired, social skill, football

Introduction

It is known that even individuals who have no disability or health problem experience numerous problems during the process of socialization and development and are affected by these problems negatively (F. Akkok, 1991; H. Yavuzer, 2002).

The most important characteristic of human beings is to live together with others and to make social interactions. Skills used during social interaction enable people to communicate each other. People must collaborate with other people in order to continue their lives. As the result of these relations, socio cultural integration takes place among them (R. Gelles and A. Levine, 1991).

Social development is the whole process of relations established with other people from birth to adulthood and social characteristics such as interest in others, emotions, attitudes and behaviors about others (C. Binbasioğlu, 1995).

Socialization, considered as a way to organize social life, is defined as an integration and adaptation process as the result of mutual interaction of the individuals, too (F. Aksoy, 2000; S. Donmez, 1990; H. Yavuzer, 2000). In other words, socialization is the process through which one develops a behavior which is suitable for valid rules and value judgments in the society (C. Binbasioğlu, 1995). Socialization is not only associated with childhood period but also covers a period that continues during the individual's life (H. Yavuzer, 2000).

With socialization, individual learns how to behave in different settings, time and situations by

observing himself and other people.

For T. Sukerman (2000), individual should have social skills in order to continue his life in the society. These skills help individual become socially acceptable and enable him establish satisfactory interactions as a person (D.R. Knapczyk and P. Rhodes, 1996; L. Korinek and P.A. Popp, 1997).

K.L. Elksinin and N. Elksinin (2001) deals with social skills in three basic dimensions. These are interpersonal behaviors, peer acceptance and communication skills.

- 1. Interpersonal Behaviors:** covers such social relations as making friendship, presenting oneself, participation, asking for help-request, paying compliments, apologizing.
- 2. Peer Acceptance:** covers asking for and giving information, participation in an activity, understanding other people's emotions.
- 3. Communication Skills:** covers such skills as being a good listener, having a nice chat / conversation, continuing the chat / conversation and feedback.

Inability to express feelings and thoughts in a comfortable way; inability to make friendship; unsociability in relations with opposite sex; restrictions of social communication and interaction experienced in such settings as school, work place, family, -all of which are regarded as communication problems today- have made social scientists and psychologists deal with social skills over the past years (B. Tegin, 1990).

The hearing-impaired people have disadvantages in point of development of social skills

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due to the communication difficulties.

There may be problems in social lives of the individuals with hearing-impairment. Sometimes, drawbacks / disadvantages are noted in terms of social skills. It is suggested that one of the factors responsible for lack of social skills may be resulting from the drawbacks or delays in theory of mind (C.C. Peterson and M. Siegal, 1999; Howley M. and C. Howe, 2004).

According to S.D. Antia, K.H. Kreimeyer and N. Eldredge (1993), peer interaction of the hearing-impaired people is at the minimum level due to the disabilities in the communication skills.

Although the individual with hearing impairment is directly affected by this disability, it turns out as a social fact because it also affects his family and his social environment. Hearing, language and speaking are basic components of communication and are interwoven with each other in the daily life. Any breakdown in this mechanism prevents learning language and speaking in a normal way and complicates the acquisition of the communication skills. Besides, it is emphasized that lack of social skills may lead to low academic success, too (F. Ogilvy, 1994).

People with hearing-impairments experience various problems in their interactions with other people, in their academic works, in their professional lives and in their emotional and behavioral areas during their lives. It is necessary for individuals with hearing-impairments to integrate with the society by increasing their social skill levels in order to solve these problems above (G. Anderson et al. 2000; S. Antia and K. Kreimeyer 1988).

Because sports are social activity that makes individuals participate dynamic social environments, it plays a key role in socialization of the individual. The individual try to find a place in the social environment through games and sports (E. Kılıçgil, 1998).

When it is considered that sports are mainly a collective activity in modern societies, individuals who are interested in sports establish social relations with different people through sportive activities. By saving the individual out of his small world; sports enable the individuals communicate with different people who have different beliefs, ideas in different settings and help them be affected by them and affect them. In this sense, it may be argued that sports play a key role in making new friendships, in strengthening these new friendships, in supporting social integration and especially in integrating the disabled individuals into the society (A. Yetim, 2005).

Sports improve physical, psychological and social development of the disabled people and facilitate their integration into the society (C.B. Eichsteadt and B.W. Lavay, 1995). Therefore, sports may be

considered as a tool to realize integration of the disabled individual into the society, to speed up this process and to contribute their socialization (J.M.Dunn and H. Fait, 1997).

In the past, sportive activities were seen as rehabilitation instrument for the disabled people. Today, it is understood that sports not only contribute to rehabilitation of the disabled individuals but also they affect their physical, cognitive, social and psychological developments positively and makes their adaptation to social lives much more easier (A. Gur, 2001).

Sports expand the social environment that disable person has and help them increase communicational skills (A. Gur, 2001). Besides, it is emphasized that sports are one of the easiest ways for the disabled people to communicate with the society (J. Banta, 2001, R. Vilhialmsson, 1992).

The studies conducted indicate that individuals with hearing-impairments experience insufficient social skills since their childhood (H. Avcioglu, 2001; S.P. Tuy, 1999; G. Cartledge et al. 1996; S. Antia et al. 1993; T. Sukerman, 2000).

The disabled individuals experience various difficulties in their educational lives, environments and professional lives due to the insufficient social skills. The social skills of the disabled people should be evaluated and improved so that they can be sufficient in their social interactions, be accepted and live independently.

In light of these explanations, the main aim of the present study was to investigate social skill levels of the footballers with hearing-impairment in terms of different variables (age, income level and league category).

Methodology

Research Group

The football players of 9 football clubs (The Hearing Disabled of Antalya Metropolitan Municipality, The Hearing Disabled of Konya, The Hearing Disabled of Sincan, The Hearing Disabled of Kırşehir, The Hearing Disabled of Keçiören, The Hearing Disabled of Karşıyaka, The Hearing Disabled of Yüreğir, The Hearing Disabled of Aydın, The Hearing Disabled of Kahramanmaraş Sports Club) (1st league: 4 teams, 2nd league: 5 teams) who were selected with random sampling method were included in the research (n=142). The ages of the players ranged from 18 to 33. The social skill levels of the research group were assessed in terms of "age, economic status and league category". Table 1 shows quantitative characteristics of the research group in terms of independent variables of the research.

Table 1: Characteristics of the research group in terms of independent variables

Variables		f	%
Age groups	18-22 years of age	64	45
	23-27 years of age	51	36
	28 and older	27	19
Economic status	Low	32	23
	Medium	76	53
	High	34	34
League category	1 st league	65	46
	2 nd league	77	54

Research Model

The research is a descriptive study in screening model. When the literature was analyzed, it is seen that various techniques are used for evaluation of the social skills. These techniques are socio metric techniques, self assessment techniques, rating techniques, behavioral role playing techniques, observation and interview techniques (K.W. Merrell, 2003; K.W. Merrell and G.A. Gimpell 1998; T.J. Zirpoli and K.J. Melloy, 2000).

Self assessment technique was used in the study. Self assessment is a technique where the individual reports about himself. It is commonly used technique since application, answering and evaluation of the technique are easy (H. Bacanli, 1999). Individual evaluates his social behaviors using this technique and thus information about social self-perception of individual is obtained.

Data Collection Tools

Personal information form developed by the researchers and Social Skills Inventory (SSI) were used as the data collection tools. Social Skills Inventory-SSI was developed by Riggio in 1986 and revised for the modern version in 1989. Its Turkish adaptation was performed by G. Yuksel (1997). Social Skills Inventory-SSI is a small self-reports scale to measure basic social skills, containing 90 items. SSI is known as Self-Description Inventory in

the manual. SSI is developed for “personality” and “social psychology” researches (G. Yuksel, 1997).

It is a five-point Likert type scale and each subscale is consisted of 15 items and thus 90 items in total. Scoring of these items is obtained by reverse scoring. SSI assesses the social communication skills under six subscales at affective and social level and expressivity, sensitivity and control is associated with each level. Expressivity means individual’s ability to communicate with others where a sensitivity means individual’s ability to interpret the messages coming from others; as for control, it means individual’s ability to organize communicational process in various social cases (G. Yuksel, 1997).

There are six subscales as follows:

1. Emotional expressivity
2. Emotional sensitivity
3. Emotional control
4. Social expressivity
5. Social sensitivity
6. Social control

Analysis of the Data

For the statistical comparisons; “One-Way Anova” and “Independent-Samples T Test” test were used during the analysis and the significance level was 0.05.

Findings

Table 2: Mean Subscale Scores and Mean Total Scores of Social Skills of Hearing Impaired Footballers

	N	\bar{X}	S	Min.	Max.	Highest and lowest scores that can be obtained from the inventory
Emotional expressivity	142	34.38	5.73	21.00	58.00	15-75
Emotional sensitivity	142	42.13	6.42	25.00	71.00	15-75
Emotional control	142	35.88	4.60	23.00	61.00	15-75
Social expressivity	142	41.17	6.14	28.00	63.00	15-75
Social sensitivity	142	39.21	5.96	27.00	66.00	15-75
Social control	142	37.05	6.95	28.00	61.00	15-75
Social Skill Total	142	229.82	26.34	173.00	318.00	90-450

When we analyzed Table 2, it was seen that mean total score of social skills of Hearing Impaired Footballers was 229.82 ± 26.34 ; which indicated that mean scores of social skills of the research group were at moderate

level compared with the minimum and maximum scores that could be obtained from the scale, yet, it was near lower limit of moderate level.

Table3: Mean Scores of Social Skills of the Hearing Impaired Footballers in terms of age groups

	Age groups	N	\bar{X}	S
Emotional expressivity	18-22 years of age	64	34.12	5.13
	23-27 years of age	51	34.09	6.39
	28 and older	27	35.56	5.76
Emotional sensitivity	18-22 years of age	64	41.98	6.07
	23-27 years of age	51	42.12	5.41
	28 and older	27	42.48	7.15
Emotional control	18-22 years of age	64	35.72	4.68
	23-27 years of age	51	36.13	4.28
	28 and older	27	35.78	5.14
Social expressivity	18-22 years of age	64	41.09	6.57
	23-27 years of age	51	41.27	5.17
	28 and older	27	41.18	5.66
Social sensitivity	18-22 years of age	64	38.96	5.29
	23-27 years of age	51	39.37	6.48
	28 and older	27	41.22	5.86
Social control	18-22 years of age	64	36.75	6.07
	23-27 years of age	51	36.84	7.21
	28 and older	27	38.14	6.35
Social Skill Total	18-22 years of age	64	228.51	26.81
	23-27 years of age	51	228.72	24.27
	28 and older	27	234.96	29.36

When we analyzed Table 3, it was seen that mean total scores of hearing impaired footballers increased in direct proportion to age in terms of age variable. And also, it was observed that mean scores

increased in some of the subscales (Emotional sensitivity, Social sensitivity, Social control) of the social skills as age advanced. Mean scores of other subscales were irregular.

Table 4: Comparison of the Social Skill Levels of the Hearing Impaired Footballers in terms of age groups

	Source of variation	Sum of Squares	df	Mean Square	F	p
Emotional expressivity	Between Groups	46.209	2	23.104	0.704	0.496
	Within Groups	4562.187	139	32.821		
	Total	4608.396	141			
Emotional sensitivity	Between Groups	4.750	2	2.375	0.065	0.938
	Within Groups	5113.819	139	36.790		
	Total	5118.568	141			
Emotional control	Between Groups	5.096	2	2.548	0.102	0.903
	Within Groups	3477.837	139	25.020		
	Total	3482.932	141			
Social expressivity	Between Groups	0.922	2	0.461	0.013	0.987
	Within Groups	4888.759	139	35.171		
	Total	4889.681	141			
Social sensitivity	Between Groups	147.142	2	73.571	2.121	0.124
	Within Groups	4820.648	139	34.681		
	Total	4967.790	141			
Social control	Between Groups	40.086	2	20.043	0.467	0.628
	Within Groups	5968.819	139	42.941		
	Total	6008.905	141			
Social Skill Total	Between Groups	884.860	2	442.430	0.633	0.532
	Within Groups	97146.789	139	698.898		
	Total	98031.649	141			

When we analyzed Table 4, the ANOVA test results showed that there was not any significant difference in total score and all of the subscale scores

of social skills of the hearing impaired footballers in terms of age groups ($P > 0.05$).

Table 5: Mean Scores of Social Skills of the Hearing Impaired Footballers in terms of income status

	Economic status	N	\bar{X}	S
Emotional expressivity	Low	32	34.12	6.13
	Medium	76	33.90	5.33
	High	34	35.67	6.61
Emotional sensitivity	Low	32	41.87	6.28
	Medium	76	41.94	6.70
	High	34	42.76	6.25
Emotional control	Low	32	35.46	4.26
	Medium	76	35.97	5.16
	High	34	36.05	4.94
Social expressivity	Low	32	40.78	5.39
	Medium	76	41.22	6.22
	High	34	41.45	5.71
Social sensitivity	Low	32	38.96	5.37
	Medium	76	38.35	6.71
	High	34	41.11	5.88
Social control	Low	32	36.65	6.11
	Medium	76	36.77	6.23
	High	34	38.02	7.15
Social Skill Total	Low	32	227.87	27.91
	Medium	76	228.18	28.97
	High	34	235.32	26.58

When we analyzed Table 5, it was seen that mean total social skill scores of the hearing impaired footballers increased in direct proportion to income level in terms of income variable. There was an increase in some of the mean scores of the subscales

(Emotional sensitivity, Emotional control, Social expressivity, Social control) of the social skill as the income level increased. Mean scores of other subscales were irregular.

Table 6: Comparison of the Social Skill Levels of the Hearing Impaired Footballers in terms of income level

	Source of variation	Sum of Squares	df	Mean Square	F	p
Emotional expressivity	Between Groups	76.247	2	38.123	1.119	0.330
	Within Groups	4,737.391	139	34.082		
	Total	4,813.637	141			
Emotional sensitivity	Between Groups	18.389	2	9.194	0.217	0.805
	Within Groups	5,878.403	139	42.291		
	Total	5,896.792	141			
Emotional control	Between Groups	7.238	2	3.619	0.137	0.872
	Within Groups	3,659.934	139	26.330		
	Total	3,667.173	141			
Social expressivity	Between Groups	7.718	2	3.859	0.110	0.896
	Within Groups	4,878.180	139	35.095		
	Total	4,885.898	141			
Social sensitivity	Between Groups	180.409	2	90.205	2.317	0.102
	Within Groups	5,411.707	139	38.933		
	Total	5,592.116	141			
Social control	Between Groups	43.060	2	21.530	0.520	0.596
	Within Groups	5,755.305	139	41.405		
	Total	5,798.366	141			
Social Skill Total	Between Groups	1,354.590	2	677.295	0.853	0.428
	Within Groups	110,406.960	139	794.295		
	Total	111,761.549	141			

When we analyzed Table 6, Anova test results showed that there was not any significant difference in total score and all of the subscale scores of social skills

of the hearing impaired footballers in terms of income level ($P > 0.05$).

Table 7: Comparison of the Social Skill Levels of the Hearing Impaired Footballers in terms of league where they played

	League category	N	\bar{X}	S	sd	t	p
Emotional expressivity	1 st league	65	35.44	5.36	140	2.003	0.047*
	2 nd league	77	33.48	6.16			
Emotional sensitivity	1 st league	65	42.93	5.93	140	1.377	0.170
	2 nd league	77	41.44	6.81			
Emotional control	1 st league	65	36.38	4.47	140	1.184	0.238
	2 nd league	77	35.45	4.82			
Social expressivity	1 st league	65	42.21	5.84	140	2.039	0.043*
	2 nd league	77	40.29	5.37			
Social sensitivity	1 st league	65	39.89	6.12	140	1.249	0.213
	2 nd league	77	38.63	5.87			
Social control	1 st league	65	37.84	6.68	140	1.229	0.221
	2 nd league	77	36.38	7.35			
Social Skill Total	1 st league	65	234.41	26.20	140	1.883	0.061
	2 nd league	77	225.94	27.11			

When we analyzed Table 7, independent t test results showed that as far as league category variable was concerned there was a significant difference on behalf of the footballers of the 1st league in terms of the subscales of “Emotional expressivity, Social expressivity” ($p < 0.05$). Besides, mean scores of other subscales and mean total scores of social skills of the footballers who played in the 1st league were found to be higher than those of the players of the 2nd league but there was not a significant difference ($p > 0.05$).

Discussions and conclusions

One of the basic findings of the research was that mean total social skill score was 229.82 ± 26.34 ; which indicated that mean scores of social skills of the research group were at moderate level compared with the minimum and maximum scores that could be obtained from the scale, yet, it was near lower limit of moderate level.

The study of H. Kirimoglu, L. Ilhan and H.S. Caglayan (2011) in which the physically disabled people - another disability group- who played wheelchair basketball were investigated in terms of social skill levels reported that mean total social skill score of the research group was 285.15 ± 18.439 ; which demonstrated that sports players with physical disability had higher (better) social skill characteristics compared to the footballers who had hearing impairments but no functional movement restrictions.

Comparison of these two groups of the disabled players has demonstrated how important communicational sufficiency is in terms of the development the social levels of the social skill of the individuals.

Loss of hearing leads to insufficient ability to speak and emotional and social problems at various levels (M.C. Girgin, 2003). However, negative attitudes and different prejudices adopted by the individuals who have no hearing impairments against the people with hearing impairments make the communication with these people harder (M. Nikolarazi and M. Makri, 2005).

Cartledge et al. (1996) emphasize the necessity to strengthen social skills of the people with hearing impairments in order to increase the interaction. Sports, recreation and pastime activities have a key role in social integration. Socialization and social interaction may be improved by the participation in various activities. Participation in physical activities affects social development and the ability to establish social relations of the individuals positively (R. Vilhjalmsson, 1992).

Some studies pointed out a positive relation between age and social skills (J.L. Matson et al. 1986; S.P. Tuy, 1999). It was found out that mean total social skill scores of the footballers with hearing impairments, who made up our research group, was in direct proportion to age.

Mean scores of some subscales of the social skills (Emotional sensitivity, Social sensitivity, Social control) were associated with an increase as the age advanced. Mean scores of other subscales were found to be irregular. Besides, it was concluded that the difference that occurred in total score and scores of all of the subscales of the social skill in terms of age groups was not considered as significant ($p > 0.05$).

H. Avcioglu (2001) states that intervention programs should be designed and implemented at an early age so that social skills of the people with hearing impairments can be improved.



The increased level of social skills at the later ages may be related to sportive age, too. In other words, it may also be concluded that the level of the social skills of the adult sports players who do sports regularly for years and benefit social dynamics of the sports may be higher than that of the young sports players who have just started the sports depending on the time spent doing sports.

E. Charlson et al. (1992) points out that - in addition to the present feeling of loneliness- hearing disability may make social adaptation problems of the children who belong to 13-18 age group insoluble. M. Suarez (2000) emphasizes that programs that will strengthen social skill levels should be designed and implemented so that areas where people with hearing impairments are insufficient can be developed after the social skill levels have been determined.

Every kind of sportive activity is a social experience and usually includes emotions. An individual who participates in sportive activities finds opportunities to express his emotions using games and movements. That movement ability of human who moves by his nature and thus communicates through movement should be shaped by a rich physical education program and sportive organizations may facilitate healthy interpersonal relations and may enable these relations continue (H. Araci, 1999). When it is considered that sports contribute social skill levels of the individuals a lot, individuals' socialization should be realized at an early age and physical education and the sportive activities need be done habitually; it is necessary that sports and socialization should be dealt with at the same ages. Different games and sports are the mirrors of the society because what is necessary for socialization process in a society exists in many games and sports.

The study of D.J. McMahon (1998) produced the importance of recreational activities for the disabled individuals in terms of integration with society and environment, making friendship and formation of social acceptance.

It was found out that social skill levels of the footballers with hearing impairment increased in direct proportion to income levels according to income variable. It was seen that some subscales (Emotional sensitivity, Emotional control, Social expressivity, Social control) of social skills increased as income level increased. Mean scores of other subscales were irregular. The differences between the groups were found to be insignificant ($p > 0.05$).

Another independent variable of the research was league category. It was noted that there was a significant difference on behalf of the footballers who played in the 1st league in terms of subscales of "Emotional expressivity, Social expressivity" in relation to league category ($p < 0.05$). Besides, mean total score of the social skills and mean scores of the other subscales of the social skills of the footballers who played in the 1st league were higher than those who

played in the 2nd league but there was not a significant difference ($p > 0.05$).

In the study of F. Arslan et al. (2006) conducted with the students who studied at the School of Physical Education and Sports, it was concluded that students who played sports at amateur and professional level were more extroverted than those who did not actively play sports and that students who played sports at professional level were more extroverted than those who played sports at amateur level. F. Ozturk and K.S. Sahin (2007) determined that mean scores of emotional expressivity and mean scores of social control of elite players were significantly higher than those who were not elite players. These findings concurred with ours.

As a result, it was found out that social skills of the football players with hearing-impairment were at a moderate level (229.82 ± 26.34). Besides, it was noted that as age and income status increased, so did social skill levels. As for the league category, there was a significant difference in "emotional expressivity and social expressivity" subscales on behalf of the football players in the 1st league.

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