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**| RESEARCH ARTICLE**

## **The Effectiveness of a Guidance Program Based on Play Therapy in Improving Social Skills among Kindergarten Children in Jordan**

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**| ABSTRACT**

This study aimed to identify the effectiveness of a play-therapy-based guidance program in improving the social skills of kindergarten children in Jordan. The study employed a quasi-experimental design, and the sample consisted of (14) children from the Al-Rusaifa Basic Mixed School kindergarten. The children were randomly divided into two groups: an experimental group (n=7) that received a (11) session play-therapy-based guidance program, and a control group (n=7) that did not receive any guidance program. The results showed statistically significant differences between the mean ranks of the scores of the experimental and control groups on the social skills scale, favoring the experimental group. The results also showed no statistically significant differences between the post-test and follow-up scores of the experimental group on the social skills scale, indicating the continued effectiveness of the guidance program as measured by the follow-up assessment. The study concluded with a set of recommendations, the most important of which is training kindergarten teachers in play-therapy-based guidance programs due to their role in improving the social skills of kindergarten children.

**| KEYWORDS**

Counseling program, play therapy, Social Skills, kindergarten children.

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### **1. Introduction**

Kindergarten is a critical period for cognitive development, school readiness, academic achievement, language development, learning stimulation, as well as social and emotional development. It is also a period during which children experience their first school setting.

At this age, a child may not simply adapt to new rules and constraints and may experience behavioral and psychological problems (Berry et al., 2018). These may include emotional, behavioral, and social disorders, as well as difficulties in completing daily tasks. It has also been found that there are risks that can interfere with children's well-being and happiness (Waite & Creswell, 2015). Behavioral disorders often found in children include withdrawal from social situations, especially with peers (Bufferd, Dougherty & Olino, 2019). If children do not receive appropriate treatment, psychological and behavioral problems often persist into adulthood and are associated with a variety of negative long-term outcomes (Gordon-Hollingsworth et al., 2015).

Mollamohammadi & Yazdkhasti (2017) indicate that these problems can disrupt children's social skills, which can manifest as short- and long-term outcomes such as isolation from peers and poor educational performance. Furthermore, children who lack social skills are more likely to experience difficulty at school and face less peer acceptance (Tamagni, 2019). Social skills are a set of skills necessary for adapting to and dealing with various social situations, fostering healthy relationships, and influencing overall performance. Therefore, training in social skills—which forms the core of a child's future behavior—should begin from early childhood alongside the child's first interactions. Consequently, the kindergarten period is the best time to form these interactions, as the child begins social interaction with peers. These skills, which often aim to develop children's social and emotional abilities

and increase appropriate interaction with children, are accompanied by training contexts such as emotion management, empathy skills, problem-solving skills, and self-control (Welchons & McIntyre, 2017).

Clarke et al. (2015) indicate that empowering a child with effective social skills at this stage supports the achievement of positive life outcomes. This is confirmed by Urbina Garcia (2014), who states that these skills are important for children not only in personal life but also in academic life. Social skills are the set of competencies that allow children to initiate and maintain positive social relationships, contribute to peer acceptance, and deal effectively with the social environment (Sharma, Goswami & Gupta, 2016: 220). Nursanaa & Ady (2020) argue that poor social skills in children require the search for treatments as a form of prevention and intervention. Anderson (2020) emphasizes that the importance of treatments lies in the fact that kindergarten-aged children have developmental and emotional needs that differ from those of adults, and these needs are addressed specifically through play.

Play is a universal language for all children. It is an enjoyable aspect of a child's life and a necessity that promotes emotional growth and development. Children express their fear, anger, and joy during play. It also reduces stress, tension, and anxiety, thereby enhancing their social skills (Pajapati & Samprasad, 2019). Šmelová & Stolinská (2021) affirm that kindergarten age is the age of play in a child's life. The preschool period is sometimes defined as the play age. Play is the dominant activity in this important period, providing inexhaustible opportunities and a source of new stimuli, interactions, and social contacts. Play also increases children's engagement and transforms the inflexible environment into a safe and comfortable place where children can play, fulfill dreams, and enhance their internal resources. It also helps them understand and confront negative emotions without resistance and express themselves through a safe and dynamic personal relationship with the teacher and peers. It is an attractive method for children to cooperate with the teacher to solve any emotional or behavioral problem (Momeni et al., 2015). This is confirmed by Mousavi & Safarzadeh (2016), who state that play therapy is a systematic approach based on therapeutic theory, which lays the foundations for children's learning processes and natural relationships. Furthermore, a study by Nursanaa & Ady (2020) indicates that play therapy can improve children's social skills and academic performance. This aligns with the findings of Ebrahimi, Aslipoor & Khosrojauid (2019), concluding that play therapy is one of the most effective methods for improving children's social skills.

Due to the detrimental effects on personal and social life resulting from poor social skills in children, it is essential to find appropriate interventions to reduce the symptoms of these problems and improve the personal and social functioning of these children. Therefore, the kindergarten teacher must intervene appropriately to avoid future problems, and timely treatment is necessary. Play can be considered an important tool for counseling interventions, as it allows children to reveal their own threatening experiences. It is a counseling approach for children to overcome obstacles in expressing their feelings and emotions (Mohammadinia et al., 2018). Play counseling is also a method through which a child can be freed from all environmental pressures and can balance his/her behaviors (Khodabakhsi, Falsafinejad, 2018). It is a constructive method for children due to their limited cognitive and linguistic skills and their interest in playing with toys. Additionally, it is an appropriate technique for children because they are still unable to disclose their feelings and thoughts directly; therefore, through play, they can express and share those harmful or threatening experiences. Children can connect internal thought with the external world through play and by controlling objects and environments (Manwaring, 2011).

Based on the above, it becomes evident that one of the most prominent issues facing children and reflecting on their psychosocial lives is poor social skills. Hence, this study aimed to investigate the possibility of improving kindergarten children's social skills by developing a counseling program based on play therapy.

## **2. Study Problem**

Through the researcher's work as a kindergarten teacher for (10) years, she observed that some children suffer from a low level of social skills and therefore need interventions. The positive trajectory of preschool children's psychosocial health depends on receiving adequate early support and access to treatment for their internal disorders. Penich (2021) confirms that very few of these children receive the psychosocial support they need. While effective intervention, strategies, and treatment programs exist, they are not frequently accessed by caregivers of children who need them due to their lack of understanding and awareness of the negative effects of poor social skills in early childhood.

Mollamohammadi & Yazdkhasti (2017) emphasize that finding effective ways to address poor social skills is essential to improve them for kindergarten children and reduce the long-term risks associated with deficits in early childhood. Among these methods are counseling programs based on play therapy, as recommended by the results of studies (Seyyedi Andi, Najafi & Rahimian Boogar, 2021; Zolrahim & Azmoudeh, 2020; Nursanaa & Ady, 2020; Swan, Kaff & Haas, 2019; Dousti, Pouyamanesh, Aghdam & Jafari, 2019). Consequently, the study problem lies in attempting to reveal the effectiveness of a counseling program based on play therapy in improving social skills among kindergarten children in Jordan, by answering the following main question: What is the effectiveness of a counseling program based on play therapy in improving social skills among kindergarten children in Jordan? Specifically, this study tested the validity of the following hypotheses:

**First Hypothesis:** There are statistically significant differences at the significance level ( $\alpha = 0.05$ ) between the mean rank scores on the social skills scale among members of the experimental and control groups attributable to the counseling program based on play therapy.

**Second Hypothesis:** There are statistically significant differences between the mean rank scores of the post-measurement and follow-up measurement on the social skills scale among members of the experimental group attributable to the continuity of the effect of the counseling program based on play therapy.

### 3. Significance of the Study

The theoretical importance of the study stems from the importance of early childhood, as early childhood interventions have lasting effects on learning, motivation, and improving social skills. Its importance also arises from the fact that providing supportive conditions for developing social skills in early childhood through play-based counseling programs is more effective and less costly than attempting to address the consequences of early adversity later on. Meanwhile, the applied importance of the study lies in developing a counseling program based on play therapy to improve social skills in kindergarten children, which may assist researchers in preparing field studies concerned with other problems. Furthermore, the study's expected results are anticipated to illuminate the path for counselors working with children in guiding them to improve social skills.

### 4. Operational Definitions

**Counseling Program:** Defined as "a practice aimed at helping individuals acquire and develop personal and social skills, improve adaptation to changing life demands, and enhance successful coping skills with the environment. It includes counseling sessions and uses various techniques, methods, tools, and means to achieve its goals" (Alzamil, 2021: 140).

**Operational Definition of Counseling Program:** A counseling program developed by the researcher based on play therapy. The play-based counseling program consisted of (11) counseling sessions, plus an additional session one month after the program's conclusion during which the follow-up measurement was applied only to the experimental group members by the researcher due to the specificity of the instrument and the examiner's expertise. It included a set of therapeutic methods and techniques derived from play. The program sessions were implemented over (6) weeks, at a rate of two sessions per week, with each session lasting (30) minutes.

**Play Therapy:** The "use of the therapeutic powers of play by professionals to help children face psychological and social difficulties and achieve optimal growth and development" (Chuyou-Campbell, 2019: P30).

**Operational Definition of Play Therapy:** A set of games designed to be used with kindergarten children in a safe and structured environment to improve their social skills.

**Social Skills:** "The ability to interact with other people in a social context in a socially acceptable, valuable, and beneficial way for others" (Mareta & Susanto, 2020: 346).

**Operational Definition of Social Skills:** The score obtained by kindergarten children on the social skills scale that was developed and used in this study.

### 5. Previous Studies

Tersi & Matsouka (2020) conducted a study aimed at identifying the effectiveness of playful play in improving preschool children's social skills at Marina Tersi School in Greece. The study used an experimental method. The study sample consisted of (40) children, randomly assigned to two groups: (20) children as an experimental group whose members were exposed to playful play for four weeks (two days per week), and (20) children as a control group that received no treatment. To achieve the study's objectives, a social skills scale was used. The results showed that playful play was effective in developing social skills in preschool children in the experimental group.

Ebrahimi, Aslipoor & Khosrojavid (2019) conducted a study aimed at identifying the effect of group play therapy on aggressive behaviors and social skills in preschool children in Lahijan City, Iran. The study used a quasi-experimental method. The study sample consisted of (24) children, randomly assigned to two groups: (12) children as an experimental group whose members were exposed to group play therapy for eight sessions of (45) minutes each (twice a week), and (12) children as a control group that received no treatment. To achieve the study's objectives, an aggression scale and a social skills scale were used. The results showed that group play therapy was significantly effective in reducing aggression and its components and in improving social skills in preschool children in the experimental group.

Ashori, Ghasemzadeh & Dallalzadeh (2019) conducted a study aimed at identifying the effect of play therapy based on the cognitive-behavioral model on social skills in preschool children with Attention Deficit Hyperactivity Disorder (ADHD) in Aran and Bidgol City, Iran. The study used a quasi-experimental method. The study sample consisted of (30) children, randomly assigned to two groups: (15) children as an experimental group whose members were exposed to play therapy for (12) sessions of (40) minutes each, and (15) children as a control group that received no treatment. To achieve the study's objectives, a social skills scale was used. The results showed that play therapy was effective in improving social skills in preschool children with ADHD in the experimental group.

Blalock, Lindo & Ray (2019) conducted a study aimed at identifying the effect of individual and group child-centered play therapy on social-emotional competencies. The study used an experimental method. The study sample consisted of (56) children, randomly assigned to three groups: (18) children as a first experimental group, (18) children as a second experimental group whose members were exposed to play therapy for (16) sessions using individual and group play therapy methods, and (20) children as a control

group that received no treatment. To achieve the study's objectives, a social-emotional competencies scale was used. The results showed that play therapy was associated with significant gains in improving overall social-emotional competencies and in the constructs of self-regulation and social responsibility. Complementing the above, Mousavi & Safarzadeh (2016) conducted a study aimed at determining the effectiveness of group play therapy on insecure attachment and social skills in orphans in Ahvaz City, Iran. The study used an experimental method. The study sample consisted of (30) orphan children, randomly assigned to two groups: (15) orphans as an experimental group whose members were exposed to play therapy for (10) sessions, with post-test and follow-up conducted after two months only for the experimental group, and (15) orphans as a control group that received no treatment. To achieve the study's objectives, a secure attachment scale and a social skills scale were used. The results showed that group play therapy reduces insecure attachment and increases social skills during post-test and follow-up stages in the treatment group compared to the control group.

It is evident from the previous studies that all shared with the current study various variables and perspectives, particularly in their use of play therapy programs. The current study agreed with some of these studies in using the quasi-experimental method and the study sample. The current study benefited from previous studies addressing play therapy and social skills in terms of theoretical literature, study instrument, hypothesis formulation, use of appropriate statistical methods, and discussion of results. The current study is distinguished by its attempt to reveal the effectiveness of a counseling program based on play therapy in improving children's social skills. To the best of the researcher's knowledge, no study has addressed the current study's topic in Jordan, hence the need for this study.

## **6. Study Methodology:**

The quasi-experimental method was used due to its appropriateness for achieving the study's objectives.

### **6.1 Study Population and Sample:**

The study participants consisted of all children attending the kindergarten of Al-Rusaifah Basic Mixed School, totaling (56) male and female children during the second semester of the academic year 2025/2026, distributed across two classrooms according to the school administration's official statistics. To select the study sample, the social skills scale was applied to them. From these, (14) children were selected based on the lowest scores obtained on the social skills scale. The sample was then randomly divided equally into two groups: an experimental group of (7) children who were exposed to the counseling program based on play therapy, and a control group of (7) children without any counseling intervention.

### **6.2 Study Instrument**

#### **First: Social Skills Scale**

The Gresham & Elliot (1990) scale, as cited in Haroun (2011), was used. In its initial form, it consisted of (30) items measuring three dimensions: Cooperation (10 items), Assertion (10 items), and Self-Control (10 items).

#### **Validity of the Social Skills Scale**

To ensure content validity of the social skills scale, it was presented to (9) arbitrators from university professors specialized in psychological counseling to express their opinions regarding the clarity of the items, their relevance to the dimension, the importance of each item, the accuracy of wording and linguistic structure, suitability for the Jordanian environment, and suggestions for modification or deletion. The agreement of (8) or more arbitrators was adopted as an indicator for retaining an item. Based on the arbitrators' opinions, some items were modified and reworded, while no items were deleted.

Construct validity of the social skills scale was also verified by applying it to a pilot sample of (21) male and female children from the study population but outside the study sample. Pearson correlation coefficients were calculated between the scores of each item of the scale, the dimension to which it belongs, and the total score of the scale. The results of the correlation coefficients for the scale items showed statistically acceptable levels. The correlation coefficient values for the Cooperation domain items ranged between (0.52–0.84) with their domain, and between (0.47–0.82) with the total scale. For the Assertion domain, they ranged between (0.49–0.87) with their domain, and between (0.45–0.83) with the total scale. Regarding the Self-Control domain, the values ranged between (0.62–0.83) with their domain, and between (0.59–0.80) with the total scale, indicating an appropriate degree of internal consistency and construct validity for the scale items.

#### **Reliability of the Social Skills Scale**

To ensure the reliability of the social skills scale, the test-retest method and the internal consistency method using Cronbach's Alpha coefficient were employed. This was done by applying the scale to a pilot sample of (21) male and female children from the study population but outside the study sample. Table (1) shows the Cronbach's Alpha internal consistency coefficient values and the reliability coefficient values using the test-retest method for each domain of the study scale and the scale as a whole.

**Table (1):  
Reliability Coefficient using Test-Retest Method and Cronbach's Alpha Internal Consistency Coefficient Values for Each Dimension of the Social Skills Scale and the Scale as a Whole.**

<b>Dimension</b>	<b>Number of Items</b>	<b>Test-Retest Reliability Coefficient</b>	<b>Cronbach's Alpha Internal Consistency Coefficient</b>
Cooperation	10	0.87	0.88
Assertion	10	0.88	0.91
Self-Control	10	0.85	0.90
Total Scale	30	0.97	0.96

Table (1) shows that the reliability coefficient using the test-retest method and Cronbach's Alpha internal consistency coefficient for each dimension of the social skills scale and the scale as a whole were high, indicating that the scale possesses high reliability suitable for the study's purposes.

#### **Scoring of the Scale:**

The final form of the social skills scale consisted of (30) items distributed across three dimensions. Teachers responded to each item using a five-point Likert scale comprising five alternatives: Very Large Degree (5 points), Large Degree (4 points), Medium Degree (3 points), Low Degree (2 points), and Very Low Degree (1 point). The total score range on the scale is between (30-150). The higher the score, the greater the indication that children possess social skills.

#### **Second: The Counseling Program Based on Play Therapy:**

The researcher developed the counseling program according to the following procedures:

**Determining the General Objective of the Counseling Program:** To develop a counseling program based on play therapy to improve social skills among kindergarten children in Al-Rusaifah District.

**Target Group:** Children of the kindergarten at Al-Rusaifah Basic Mixed School.

**Sources of the Counseling Program Content:** The content of the counseling program was selected from the following sources:

- Review of theoretical literature and studies related to social skills in kindergarten children and play therapy, including: Berry et al. (2018); Dousti et al. (2019); Seyyedi Andi et al. (2021). Play therapy theories, such as Adlerian play therapy, were also reviewed to understand their concepts and techniques to rely upon in developing the counseling program.

**Counseling Program Sessions:** The counseling program consisted of (11) counseling sessions, plus a final session dedicated to applying the post-measurement to the experimental and control groups, and another session one month after the program's conclusion during which the follow-up measurement was applied only to the experimental group members.

**Duration of Counseling Program Sessions:** The program sessions were implemented by the researcher over approximately (6) weeks, at a rate of two sessions per week. Session duration ranged from (20) to (30) minutes, starting from Sunday, February 1, 2026, to Sunday, March 8, 2026, at the kindergarten of Al-Rusaifah Basic Mixed School. A session for the follow-up test was conducted with the experimental group only, one month after applying the post-test, on Wednesday, April 8, 2026.

**Validity of the Counseling Program:** To ensure content validity of the counseling program based on play therapy in improving children's social skills, it was presented to (5) arbitrators specialized in psychological counseling to express their opinions regarding the accuracy of the program's objectives, the adequacy of the number of sessions and the duration of each session, the adequacy and variety of activities, the accuracy of wording and linguistic structure, and to suggest any modifications they deemed appropriate. Based on the arbitrators' opinions, some modifications were made to the counseling program based on play therapy. Table (2) presents a summary of the counseling program sessions.

**Table (2):**

**General Procedural Plan for the Therapeutic Program Sessions.**

Session	Session Title	Main Objectives	Methods & Activities
<b>First Therapeutic Stage: Building the Counseling Relationship</b>			
1	Getting Acquainted & Building Trust (1/2/2026 - Sunday)	1. Mutual acquaintance between counselor and children. 2. Establishing an interaction relationship through fun. 3. Agreeing on program rules and regulations.	Ice-breaking, encouragement, active listening, free play.
2	I Can Take Responsibility (4/2/2026 - Wednesday)	1. Preparing a safe environment where group members share responsibility with the counselor.	Puzzle game, stop-and-go music movement game, attention game.
3	I Recognize My Feelings (8/2/2026 - Sunday)	1. Encouraging safe levels of self-disclosure to establish early individual participation. 2. Helping group members become aware of their feelings.	Tower building game, parachute games, "Draw Me" game, homework.
<b>Second Therapeutic Stage: Exploring the Client's Dynamics) Exploring Group Therapy for the Child's Lifestyle</b>			
4	I Can Be Independent (11/2/2026 - Wednesday)	1. Training group members in self-reliance skills. 2. Encouraging group members to work together, communicate, and be flexible.	Cave board game, rope game, little chef game.
5	Me & Us (Thinking Positively) (15/2/2026 - Sunday)	1. Encouraging group members to adopt a positive view of social situations (social interactions).	Clay play, horse race game, breath observation game.
6	I Do Not Fear New Situations (18/2/2026 - Wednesday)	1. Training group members to deal with new life situations positively.	Fashion designer game, magic tablecloth game.
<b>Third Therapeutic Stage: (Encouraging Client Understanding and Insight) Helping the Child Gain Understanding and Insight through Group Therapy</b>			
7	I Am Cooperative (22/2/2026 - Sunday)	1. Training group members to work within a team. 2. Encouraging group members to enhance verbal communication ability with peers and the counselor.	Little guide game, traffic policeman game.

Session	Session Title	Main Objectives	Methods & Activities
8	I See Myself and Others (25/2/2026 - Wednesday)	1. Helping group members perceive themselves and others. 2. Helping group members realize the necessity of helping others in difficult times and allowing others to help them.	Treasure box game, notes to/about self and others game, "I Carry This Load" game.
Fourth Therapeutic Stage: (Redirection and Learning) Helping the Therapeutic Group with Redirection and Re-education.			
9	I Possess the Ability (1/3/2026 - Sunday)	1. Helping group members realize the abilities they possess. 2. Helping group members learn self-control to aid relaxation.	Cup game, breath scale game, concrete hands game.
10	I Am Independent and Strong (4/3/2026 - Wednesday)	1. Increasing group members' awareness of their latent abilities. 2. Encouraging the continuation of independence, participation, and communication within the group.	Star visualization game, concrete hands game, focus scale/breath scale game.
11	I Feel Happy (Termination) (8/3/2026 - Sunday)	1. Helping group members terminate safely. 2. Encouraging group members to practice relaxation techniques.	Celebration game, focus scale/breath scale game, special place visualization game.

**7. Study Results and Discussion**

The Kolmogorov-Smirnov test was used to test the normality of the data distribution. Table (3) shows this.

**Table (3):  
Tests of Normality (Kolmogorov-Smirnov).**

	Statistic	Degrees of Freedom	Sig.
Scale Total	.8780	14	.021

Table (3) shows that the data did not follow a normal distribution, as the Kolmogorov-Smirnov test statistic value for the total scale was (0.878) and the significance level was (.021), which is less than (0.05). Pett (2015) indicates that when data does not follow a normal distribution, non-parametric tests should be used.

To verify the equivalence of the experimental and control groups on the dimensions of the social skills scale and the total score on the pre-test, the Mann-Whitney test was used. Table (4) shows this.

**Table (4):  
Results of the Mann-Whitney Test to Identify Significant Differences between the Experimental and Control Groups on the Social Skills Scale in the Pre-test.**

Dimension	Group	N	Mean Rank	Sum of Ranks	Mann-Whitney U	Z	Sig. Level
Cooperation	Experimental	7	8.07	56.50	20.500	-0.513	0.608

Dimension	Group	N	Mean Rank	Sum of Ranks	Mann-Whitney U	Z	Sig. Level
Assertion	Control	7	6.93	48.50	22.500	-	0.796
	Experimental	7	7.21	50.50			
Self-Control	Control	7	6.79	47.50	19.500	-	0.521
	Experimental	7	8.21	57.50			
Total Score	Control	7	7.21	50.50	22.500	-	0.798
	Experimental	7	7.79	54.50			

\*Statistically significant at ( $\alpha = 0.05$ )

Table (4) shows no statistically significant differences between the mean rank scores of the experimental group members and the control group members in the pre-test for the study sample's responses on the social skills scale dimensions and the scale as a whole. This indicates the equivalence of the experimental and control groups.

**Results Related to the First Hypothesis:** There are statistically significant differences at the significance level ( $\alpha = 0.05$ ) between the mean rank scores of the experimental and control group members on the post-test social skills scale attributable to the counseling program based on play therapy.

To examine the significance of statistical differences between the experimental and control groups, the non-parametric Mann-Whitney test was used to clarify the significance and direction of differences between the mean rank scores of the experimental group and the mean rank scores of the control group in the post-test on the social skills scale dimensions and the scale as a whole. Table (5) shows this.

**Table (5):**

**Results of the Mann-Whitney Test for Significant Differences between the Experimental and Control Groups on the Social Skills Scale Dimensions and Total Score in the Post-test.**

Dimension	Group	N	Mean Rank	Sum of Ranks	Mann-Whitney U	Z	Sig. Level
Cooperation	Control	7	4.43	31.00	3.000	-2.765	0.006*
	Experimental	7	10.57	74.00			
Assertion	Experimental	7	10.86	76.00	1.000	-3.029	0.002*

Dimension	Group	N	Mean Rank	Sum of Ranks	Mann-Whitney U	Z	Sig. Level
	Control	7	4.14	29.00			
Self-Control	Experimental	7	10.79	75.50	1.500	-2.942	0.003*
	Control	7	4.21	29.50			
Total Score	Experimental	7	11.00	77.00	0.000	-3.134	0.002*
	Control	7	4.00	28.00			

\*Statistically significant at ( $\alpha = 0.05$ )

Table (5) shows statistically significant differences in the Mann-Whitney test results between the mean rank scores of the experimental group members and the control group members in the post-test for the study sample's responses on the social skills scale dimensions and the scale as a whole, in favor of the experimental group members.

The effect of the counseling program based on play therapy in improving social skills for children in the experimental group could be attributed to the use of games directed at children who lack social skills, suffer from peer acceptance issues, have limited ability to understand and empathize with others, and use fewer positive solutions in solving social problems. This may have helped improve their social skills. This result may also be attributed to the fact that the counseling program sessions focused on teaching children social skills through playing with objects such as blocks and pieces, which perhaps worked to change children's behavior and make them more self-confident. This aligns with the recommendation of Ebrahimi, Aslipoor & Khosrojavid (2019) that teaching children, especially in kindergarten, should be accompanied by games so that the child can participate in various school educational programs with high motivation.

This result may also be due to the activities in the play therapy-based counseling program helping children confront painful emotional problems such as isolation, providing them with a safe environment for the flow of their emotions, enjoying a sense of self and others, and changing inconsistent behaviors. Perhaps these play therapy-based activities helped them experience their abilities, assert themselves, participate with and trust others. Furthermore, the play therapy techniques used in this study focused on creating a background for social interactions and friendships among experimental group members. In this way, these children perhaps achieved a sense of empathy and trust in others, and feelings of unfavorable distrust gradually faded, replaced by a sense of confidence, self-belief, participation in social situations, and establishing relationships with others as an opportunity for personal development and self-esteem enhancement rather than perceiving it as a threat. This aligns with Sørli, Hagen & Nordahl (2021), who indicated that children's social skills, in general, are refined through social interactions and feedback from the environment in various situations. It also agrees with Ugarte Paz et al. (2021), who stated that one of the strategies used to develop social skills in kindergarten children is games, because they allow them to consistently practice their responsibility, participate in teamwork, and communicate.

The findings of the current study are consistent with the results of Tersi & Matsouka (2020), Ebrahimi, Aslipoor & Khosrojavid (2019), Ashori, Ghasemzadeh & Dallalzadeh (2019), and Mousavi & Safarzadeh (2016), whose results indicated that play therapy was effective in improving social skills among kindergarten children.

**Results Related to the Second Hypothesis:** There are statistically significant differences between the mean rank scores of the post-measurement and follow-up measurement on the social skills scale among members of the experimental group attributable to the continuity of the effect of the counseling program based on play therapy.

To examine the significance of statistical differences between the post-test and follow-up applications for the experimental group members, the Wilcoxon test, a non-parametric test suitable for detecting differences between post-test and follow-up applications, was used. Table (6) shows this.

**Table (6):**

**Results of the Wilcoxon Test to Examine Differences between Post-test and Follow-up Applications for Experimental Group Members on the Social Skills Scale.**

Dimension	Measurement	Rank Distribution	N	Mean Rank	Sum of Ranks	Z Value	Sig. Level
Cooperation	Post-test / Follow-up	Negative	3	3.00	9.00	-0.845	0.398
		Positive	4	4.75	19.00		
		Ties	0				
Self-Control	Post-test / Follow-up	Negative	4	4.00	16.00	-1.156	0.248
		Positive	2	2.50	5.00		
		Ties	1				
Assertion	Post-test / Follow-up	Negative	4	2.50	10.00	-0.108	0.914
		Positive	2	5.50	11.00		
		Ties	1				
Total Score	Post-test / Follow-up	Negative	2	3.00	6.00	-0.954	0.340
		Positive	4	3.75	15.00		
		Ties	1				

\*Statistically significant at ( $\alpha = 0.05$ )

Table (6) shows no statistically significant differences in the Wilcoxon test results between the mean rank scores of the experimental group members in the post-test and follow-up measurements on the social skills scale dimensions and the scale as a whole, one month after applying the counseling program.

This result indicates that the counseling program based on play therapy developed for this study demonstrated its effect in enabling children in the experimental group to retain the counseling gains in mobilizing social skills and interactions built on instilling a spirit of work and cooperation among children and building trust, which were achieved in the post-test, and the continued improvement of their social skills. This aligns with Zengin et al. (2021), who indicated that counseling gains from play therapy-based programs work to instill a spirit of work and cooperation among children in the long term. This result may also be attributed to the nature of the counseling relationship between the children participating in the program, which was based on freedom of emotional expression and trust-building. The counselor appreciated and respected the privacy of childhood and the importance of granting trust, confidentiality, and freedom for children to express their thoughts and feelings within a positive

relationship governed by the ethics of counseling and psychotherapy. This contributed to the success of the counseling program in enabling children to sustain improvement in their social skills.

This result may also be due to the characteristics of working in counseling groups, such as emotional catharsis, interpersonal learning, and imitative behavior. This perhaps facilitated effective coping with disturbing situations and life stressors in children. The counselor observed this during the implementation of the program sessions. This might have helped children reconsider the meaning of their previous experiences and encounters with social situations, providing them with counseling methods to deal with social situations, which perhaps worked to maintain the children's sustained improvement in social skills. This result may also be attributed to the children's commitment to attending counseling sessions on time and cooperating with the counselor through active participation in the various program activities, which perhaps contributed to their feeling of the importance of these counseling activities and helped them improve their social skills.

The findings of this study are consistent with the results of Mousavi & Safarzadeh (2016), whose results showed the continued effectiveness of play therapy in improving social skills in the follow-up measurement within the play therapy group.

### **8.Recommendations**

The researcher based on the results of the study recommends the following :

- Pay attention to focusing on play therapy activities due to their importance and effectiveness with children.
- Activate meetings and training courses on how to use play techniques in improving children's social skills.
- Train kindergarten teachers on play therapy programs as they require a specialist and expert in the field.
- Conduct further studies investigating play therapy with other samples.

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