

Asian Resonance

Socio-Personal Factors and Social and Emotional Wellbeing of Children



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Abstract

The present study was conducted in Hisar district of Haryana state. The sample comprised of one thousand 6-10 years old 500 rural children (250 boys and 250 girls) and 500 urban children (250 boys and 250 girls) from Govt. primary schools. Two checklists were used to assess social and emotional wellbeing of children. Social-emotional wellbeing was assessed in school setting by class teachers. Results of the present study clearly indicate that majority of children were average in wellbeing status for social and emotional domains. However, as compared to social wellbeing (18.3%) greater number of children (26.8%) fell in below average category of emotional wellbeing level. Urban children were better in emotional wellbeing and rural children were better in social wellbeing. Socio-personal factors were positively and significantly correlated with social-emotional wellbeing of children.

Keywords : Social-Emotional Wellbeing Status, Socio-Personal Factors, Urban and Rural Children

Introduction

Social and emotional wellbeing refers to the way a person thinks and feels about themselves and others. It includes resilience and coping skills to be able to adapt and deal with daily challenges while leading a satisfactory life. Social and emotional wellbeing lays emphasis on the behavioural and emotional strengths of children, and how they respond to adversity (Denham et al. 2009; Humphrey et al. 2010).

Two of the important aspects of wellbeing are social and emotional wellbeing and refer to the achievement of expected developmental milestones and the establishment of effective coping skills, secure attachments, and positive social relationships. Psychological and emotional distress manifests in internalizing behaviours (such as anxiety and depression) and externalizing behaviours (such as aggressive, violent or disruptive behaviour), and has an impact on the child's successful learning at school.

The study of social and emotional wellbeing in childhood, as a holistic concept, is still in its early stages (Australian Institute of Health and Welfare, 2012). Keeping in view these facts the present study was planned to fill the gaps in the research related to social and emotional wellbeing of children.

Objective of the Study

The aim of the present study was to assess social and emotional wellbeing of 6 to 10 years old urban and rural children.

Review of Literature

The concept of wellbeing is used as a positive concept that covers developmental stages across the life span, including physical, cognitive, social and emotional developmental functions, and also having a subjective dimension, that is, satisfaction associated with fulfilling individual's potential (Pollard and Davidson, 2001). Wellbeing, with respect to quality of life, is a dynamic process, emerging from the way in which people interact with the world around them (Rees et al., 2010). Wellbeing is also related to different aspects of health. Carlisle et al. (2009) reported that in policy terms wellbeing has been used to focus attention on how governments can promote good mental and emotional health of children.

There is a growing body of evidence and expert opinion to suggest that a comprehensive and systematic approach to mental health and wellbeing in educational settings may be associated with improved behaviour, higher academic achievement and better health outcomes. Support for this approach comes from literature across a range of disciplines, including education, sociology, and psychology and health promotion. The benefits may persist beyond the years of schooling, to be reflected in more positive health and social outcomes in adulthood (Commonwealth of

Australia, 2009).

Researches indicate that childhood emotional problems and difficulties as predictors of adult outcomes. Goodman et al. (2011) conducted a longitudinal study to look at the adult outcomes, up to age 50, of emotionally maladjusted children in childhood and found that poor emotional health in childhood indeed casts a long shadow, much more than physical illness. The authors reported that there were significant adverse effects on income, wages, employment, social relationships during adult life.

In another recent study, Layard et al (2014) examined children cohort at ages 5, 10 and 16, in conjunction with various outcomes up to age 34. The results of the study revealed that the most powerful childhood predictor of adult life satisfaction was the child's emotional health.

In a recent study, Goodman et al. (2015) found that good social skills assessed by teachers when children were age 10 were predictors of life satisfaction and wellbeing and good health in adult life. Childhood emotional wellbeing (such as absence of internalising behaviours) at age 10, was found to be an important indicator relating to mental health and wellbeing in adult life.

Hypotheses

It was hypothesized that (i) urban and rural children will not differ significantly in their social and emotional wellbeing status; (ii) socio-personal variables will be positively correlated with social and emotional wellbeing status.

Methodology

Locale of the Study and Sample Selection

Study was conducted in Hisar district of Haryana state. From Hisar district, Hisar city was selected to represent urban area and from Hisar Block II a cluster of villages were selected at random to represent rural area. Five hundred children (250 girls and 250 boys) in the age group of 6-10 years from Govt Primary schools of Hisar city and 500 children (250 girls and 250 boys) in the same age group from Govt Primary schools of three villages were selected. Thus, for the present study, a total of 1000 children constituted the sample for assessment of social and emotional wellbeing status.

Measures and Method for Data Collection

A checklist was used to assess social and emotional behaviour of children. Two checklists, one for social behaviour and one for emotional behaviour of 6-10 years old children were prepared. These checklists were prepared from the existing literature keeping in mind developmental milestones of 6-10 year old children. In the beginning, for each domain 20 statements were prepared. These checklists were given to the Human Development experts for evaluation on a four point scale- most appropriate (4), appropriate (3), some-what appropriate (2) and not appropriate (1). On the basis of evaluation of the experts, 10 statements for social wellbeing domain and 10 statements for emotional wellbeing domain were

retained. Finally, there were 20 statements on a three point scale- not true (1), somewhat true (2) and certainly true (3). These checklists were pilot tested on 10 children (5 children from 6-8 years age group and 5 children from 8+-10 years age group) and were found suitable for the present research. In both the domains a child could score a minimum of 10 and a maximum of 30. In total socio-emotional wellbeing, a child could score a minimum of 20 and a maximum of 60.

Social-emotional wellbeing was assessed in school setting. Teachers were requested to observe and monitor the social and emotional behavior of children for a period of two weeks before assessment of children's social-emotional wellbeing status.

Results

Socio-Personal Profile of Urban and Rural School Children

The socio-personal profile of urban and rural children is presented in Table 1. As shown in table, in total sample, 50% children were boys and 50% were girls; 50% were in the age group of 6-8 years and the other 50% were in the age group of 8+-10 years. Forty six per cent urban and 68% rural children belonged to lower caste followed by middle (40% and 28% respectively) and high (14% and 4% respectively). Majority of children (52.1%) belonged to nuclear families and 47.9% children belonged to joint families.

Table1: Socio-Personal Profile of Urban and Rural Children

Personal variable	Urban (n=500)	Rural (n=500)	Total (n=1000)
Age group			
6-8 years	250(50.0)	250(50.0)	500 (50.0)
8+-10 years	250 (50.0)	250 (50.0)	500 (50.0)
Sex of child			
Boys	250 (50.0)	250(50.0)	500 (50.0)
Girls	250 (50.0)	250 (50.0)	500 (50.0)
Caste			
Low	230 (46.0)	340 (68.0)	570 (57.0)
Middle	200 (40.0)	140 (28.0)	340 (34.0)
High	70 (14.0)	20 (04.0)	90 (09.0)
Family type			
Nuclear	271 (54.2)	250 (50.0)	521 (52.1)
Joint	229 (45.8)	250 (50.0)	479 (47.9)
Note: Figures in parentheses indicate percentages			

Comparison of Social and Emotional Wellbeing Status of Urban and Rural Children

Means and standard deviations were computed for social and emotional wellbeing status of urban and rural children. Independent sample t-test was computed to examine group differences in social and emotional wellbeing status of urban and rural children. As depicted in Table 2, there were no significant differences in social, emotional and total social-emotional wellbeing status of urban and rural children. However, mean scores of urban children were greater for emotional wellbeing as compared to rural children and mean scores of rural children were greater for social wellbeing.

Table 2: Comparison of Social-Emotional Wellbeing of Urban and Rural Children

Wellbeing domains	Urban (n=500)		Rural (n=500)		t-values
	Mean	Std Deviation	Mean	Std Deviation	
Social wellbeing	20.15	3.67	20.23	3.60	0.34
Emotional wellbeing	19.27	3.57	19.12	3.25	0.68
Total wellbeing	39.42	6.73	39.34	6.30	0.21

It can be interpreted from these findings that urban and rural children were similar in social-emotional wellbeing status. The hypothesis that urban and rural children will not differ significantly in their social and emotional wellbeing status was accepted and confirmed true.

Social and Emotional Wellbeing Level of Children

Social and emotional wellbeing level of children was computed on the basis of obtained scores. Since on the basis of mean scores there were no differences in social and emotional wellbeing status of urban and rural children, therefore, three levels of wellbeing below average, average and above average were computed for the total sample of 1000 children.

As presented in Table 3, majority of children (60.7%) were average, 18.3% children were below average and 21% children were above average in social wellbeing. Majority of children (64.1%) were average in emotional wellbeing, 26.8% children were below average and only 9.1% children were above average. With regard to total wellbeing level, 68.4% children were average, 15.7% children were below average and 15.9% children were above average.

Table 3: Social and Emotional Wellbeing Level of Children

Wellbeing domains	Levels of wellbeing		
	Below average	Average	Above average
Social wellbeing	183 (18.3)	607 (60.7)	210 (21.0)
Emotional wellbeing	268 (26.8)	641 (64.1)	91 (9.1)
Total wellbeing	157 (15.7)	705 (68.4)	159 (15.9)

Note: Figures in parentheses represent percentages.

These results clearly indicate that majority of children were average in wellbeing status for social and emotional domains. However, emotional wellbeing of children was perceived as poor (below average) by class teachers for greater number of children, while reverse was true for social wellbeing.

Correlations between Social-Emotional Wellbeing and Socio-Personal Variables

Correlation coefficients were computed between social-emotional wellbeing scores and socio-personal variables including age of children, parental education and family income. Results are presented in Table 4. Table clearly depicts that there existed positive and significant correlations between social wellbeing and age ($r=.10^*$), family size ($r=.19^{***}$), family income ($r=.24^{**}$), fathers' and mothers' education ($r=.21^{**}$ and $.16^{**}$ respectively). Significant and positive correlations were found between emotional wellbeing and age ($r=.12^*$), family size ($r=.15^{**}$), family income ($r=.22^{**}$), fathers' education ($r=.13^{**}$) and mothers' education ($r=.10^*$). Finally, there existed positive and significant correlations between total wellbeing and age ($r=.12^{**}$), family size ($r=.19^{**}$), family income ($r=.26^{**}$), fathers' and mothers' education ($r=.19^{**}$ and $.15^{**}$ respectively).

Table 4: Correlation Coefficients between Social-Emotional Wellbeing and Socio-Personal Variables

Wellbeing domains	Age	Family size	Family income	Fathers' education	Mothers' education
Social wellbeing	.10*	.19***	.24**	.21**	.16**
Emotional wellbeing	.12**	.15**	.22*	.13**	.10*
Total wellbeing	.12**	.19**	.26**	.19**	.15**

Significant at * $p<.01$ and ** $p<.001$

These results clearly indicate that socio-personal variables were significantly and positively correlated with social and emotional wellbeing status. Hence, the hypothesis that social and emotional wellbeing status will be positively correlated with socio-personal variables was accepted.

Discussion

The present study was conducted with the aim to assess social and emotional wellbeing status of urban and rural children. It was hypothesized that

social-emotional wellbeing status of urban and rural children will not differ significantly. The first hypothesis was accepted, as there were no significant differences in socio-emotional wellbeing status of urban and rural children. However, results revealed that rural children were slightly better in social wellbeing, while urban children were slightly better in emotional wellbeing. The reason for better social wellbeing status of rural children could be that there is more open access to neighbourhood and families in rural areas and young

children spend more time playing with each other. Also, as compared to urban children, more number of rural children belonged to joint families. Joint family is a protective factor in social wellbeing of children. With societal changes more and more joint families are breaking and nuclear families are emerging. But, when family members are getting along well, then there are greater chances of joint family system resulting in larger family size with more number of persons in the family. When family members are getting along well, this in turn provides healthy environment for children and promotes their social wellbeing. These findings get support from Rees et al. (2010) reporting that young people who live in families that get along well together report higher levels of overall wellbeing than those living in families that do not get along well together.

On the other hand urban children were better in emotional wellbeing, the reason could be that as compared to urban children, majority of rural children belonged to lower caste. It is well known fact that caste system is powerful system that has significant impact on psychology of human beings in India. Persons belonging to lower castes are looked down by those who belong to middle and high castes. Thus, it could be the reason that urban children were better in emotional wellbeing and they were more resilient as compared to rural children. Zubrick et al. (2010) reported that there is strong evidence that systemic racism, a form of social exclusion, leads to reduced opportunities to access societal resources contributing to socioeconomic disadvantage. This social inequality results in the unequal distribution of, and access to, resources required for the development and social-emotional wellbeing of adults and children.

Another reason could be that it is difficult to separate the children's wellbeing from their parents' wellbeing. Children's emotional wellbeing may be affected by parents' emotional wellbeing. In rural areas lower income and lower caste families are living under deprived conditions making them more vulnerable to poor emotional wellbeing. In a report by Australian Institute of Health and Welfare (2012), it is mentioned that younger children are connected to family micro-system, and it is appropriate to measure their wellbeing with family indicators, or through their parents. In another study, Smith (2004) mentioned that parental mental health can set the 'emotional' climate for the family and is strongly associated with social and emotional wellbeing outcomes for children. It was also hypothesized that social-emotional wellbeing status of children will be positively correlated with socio-personal variables. This hypothesis was also accepted, as significant and positive correlations were obtained between socio-emotional wellbeing and socio-personal variables. That age was positively significantly correlated with social-emotional wellbeing of children, the reason could be developmental changes in children. As children grow older they come out of their family niche and enter the world of peer group. To get peer acceptance and approval children learn and obey social rules and develop emotional control. This leads

to social-emotional wellbeing. In a report on social and emotional wellbeing, Australian Institute of Health and Welfare (2012) also indicated that social and emotional wellbeing among children varies depending on a child's age, as children's level of development at a particular age will have a substantial impact on their social and emotional wellbeing at that time.

Family size, family income and parental education are protective factors in socio-emotional wellbeing. Although with greater number of persons in the family, per capita income decreases, but there is social and psychological support in joint and extended family system. That support is one of the protective factors in social and emotional wellbeing of the children. Family income and parental education are directly related to social and emotional wellbeing of children because more educated parents with greater income are able to protect children from hardship. Results of a recent study conducted by Fahey et al. (2012) showed strong patterns of association between poor socio-economic status, less maternal education and children's poor social-emotional wellbeing. These authors also reported children in larger families show a lower risk of poor social-emotional adjustment. In another study, Garvey (2008) also reported that socio-economic disadvantage is an indicator of poor social-emotional wellbeing.

Conclusion and suggestions

It can be concluded that there were no significant differences in social and emotional wellbeing status of urban and rural children. Socio-personal variables – age of children, family size, family income and parental education were strongly correlated with social and emotional wellbeing of children. Large family size, higher income and parental education are protective factors in social and emotional wellbeing. Hence, to promote and enhance the likelihood of children's positive wellbeing it is important to recognise and utilize protective factors not only at home but in educational setting also.

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