Influence of culture linked gender and age on social competence of higher secondary school adolescents

MamataNayak

Department of Psychology, Mangalpur Women's College, Mangalpur, Jajpur, Odisha, India. Pin-755011.Tel: 9437605416.

ABSTRACT: The influence of different demographic variables such as gender, age and cultural settings (urban and rural) on social competence were examined among school adolescents during the most crucial and turning period of life. The participants in the study were 240 students randomly selected from ten higher secondary schools of Odisha, a South-Eastern region of India. The ages of the first year and second year students ranges from 15 to 18 years. In the study, social competent Questionnaires were used to measure social competence of the participants. Data were analysed by using descriptive statistics, multifactorial analysis of variance, post- hoc tests, correlational analysis and factor analysis. The results revealed that female adolescents have scored higher social competence average than male adolescents of the same age group and within the same cultural environment. The overall social competence average of girls (M=26.03) was found to be higher than that of boys (M=23.26). Moreover, 26.67% of adolescent girls have high level of social competence, while 19.17% of adolescent boys have high level of social competence. Older adolescents of second year class were found to have scored higher mean (M=25.60) than younger adolescents(M=23.68) of first year class in social competence test taking both urban and rural-base school adolescents into consideration. 26.67% of older adolescents have shown high level of social competence, while 19..17% of younger adolescents have shown high level of social competence. Irrespective of gender and age, a significant difference was found between the adolescents of urban and rural secondary schools in social competence test .Urban school adolescents scored overall higher social competence average (M=26.65) than their rural counterparts (M=22.64). In addition, 31.67% urban school adolescents exhibited high level of social competence, while only 14.17% of rural school adolescents exhibited high level social competence, which was accounted for the difference in cultural values, cultural beliefs and other related facilities.

KEY WORDS: Social competence, Adolescents, Higher Secondary School, Gender, Age, Urban, Rural.

I. INTRODUCTION

In the context of comparative study on social competence of adolescents of different sex, age and culture school is identified as an ideal place, where students get ample opportunities to develop their social skills through participation in a variety of social activities such as cultural functions, different competitions, drama, sports etc., and interactions with teachers and peers. The higher secondary school students aged 15-18 years pass through a crucial period of adolescence, which is a unique time in human development. It is a transitional period from childhood to adulthood, where children tend to get physical, emotional and social maturity (Mussen at al., 1900) Adolescence is clearly a time during which much changes occur and thus, it is regarded as a significant intervention point for behavioral change (O' Dunohue& Tolle, 2009). These changes occur in multiple dimensional levels. Adolescents begin to adjust and adapt to remarkable physical, emotional and social changes. Hence, adolescence is accepted as a challenging time, because during this period adolescents face with task of dealing with biological and psychosocial changes, such as shifts in relationship with family, friends, peer group, communities and the wider world (Coleman & Hagel, 2007; Seiffge-Knenke, 2009). Regarding the shifts in relationship it is observed that while passing from the childhood to adolescence the peer relationship become gradually important as compared to the parental relationship that is developed in childhood. If the previous close parental relationship is not sufficiently compensated by the peer group relationship, the feelings of loneliness, emptiness, boredom and unreality develop in adolescents. This may result in various social, emotional and behavioral problems in them. Consequently, they may be involved in various unusual and antisocial activities, such as interpersonal conflict and aggressive behavior (Dinkas, Kemp & Baum, 2009), drug addiction (Ellickson et al., 1992; Vega & Gil, 2005)), smoking and taking alcohol (Hoffman et al., 2001; Orlando et al., 2005), early sexual involvement (Armour & Haynie, 2007; Buhi & Goodson, 2007; Luder et al., 2011). As a result, academic achievement and perceptions of academic competence are adversely affected (Fredricks&Eccles, 2002; Ryan & Patrick, 2001).

Large number of research studies revealed various buffering and protective factors/ skills that reduce the probability of adolescent risk behavior. From the study of Paled &Moretti (2007) it is revealed that adolescents who frequently engage in different forms of aggressive behaviour need improvement in social relationship.Poor social skills and emotion deregulationare found to be primary contributors of adolescent psychological and behavioral problems (Compas, Jaser & Benson, 2009; Hughes &Gullon, 2010). Rubin & Rose-Krasonor (1986, 1992) studied on social-cognitive and social behavioral perspectives relating to interpersonal problem solving and Rubin, Booth-LaForceRose-Krasnor, & Mills, (1995) studied on social relationships and social skills and explored the importance of social competence in solving various interpersonal as well as social problems in life. Additionally, it is also reported that socially incompetent children are more likely to be aggressive to their peers because of this loneliness (Parker &Asher, 1993), and the childhood loneliness, however, can be mediated, in part, by learning social skills (Ditommaso, Brannen-McNulty, Ross, Burgess, 2003). Research has shown that highly developed, socially competent individuals have social networks and are active participants within this network (Zsolnai, 2002). In an assessment of social competence in adolescents, Dodge and Murphy (1984) emphasised on the usefulness of social competence in the life of young adolescents. In connection with the importance of social competence Shaffer (2005) stated that developing social competence as a child has been highly associated with positive outcomes later on in life (i.e. in adolescence and adult hood). Positive outcomes in life are important not just to the overall life satisfaction and happiness of the individual, but are also important to society as a whole. When children and adolescents fail to develop the skills necessary to interact with others in their environment, these deficit or excessive social behaviors can hinder academic success and thereby limiting post-secondary opportunities. Social deficits may negatively impact the development of self-esteem, mental health, and the overall happiness as an adult member of society. Thus, the role of social competence is found to be very important in this context of improving friendship and other social relationship so as to reduce the adverse effect of risky adolescent behavior.

II. SOCIAL COMPETENCE AND SUCCESS IN LIFE

Kohlberg & Mayer (1972) referred to skills-based models of social competence as "bag of virtues", while (Anderson &Messick, 1974) referred to these models as "Boy Scout" or "Sunday School" approaches. However, in 1973, a panel of child development experts met to explore the construct of 'Social Competence' with an intention to establish a clear crystalline operational definition of previously amorphous concept (Anderson &Messick, 1974). The committee was unable to offer an explicit definition of social competence even after a long discussion in details from Plato to Oliver Twist. Instead the panel of experts noted a dynamic nature of Social Competence and have proposed twenty-nine diverse represents (i.e. facets) of social competence ranging from specific skills (fine motor dexterity) to abstract concepts such as consolidation of identity and personal maintenance (Anderson &Messick, 1974). Even when the concept of social competence was not clearly understood, its pleasant contribution to various cultural settings, group situations and class-room settings, especially in middle class public educational organizations had been experienced. Its effectiveness was felt in adaptive functioning in harsh and deprived urban environments or chaotic family conditions (Ogbu, 1981).

Young children may learn to withdraw from human contact in the face of rejection or abuse (George & Main, 1979; Egeland&Sroufe, 1981), and this may indeed be an adaptive response in terms of survival. Less extent of withdrawal would be consistent with our criterion of social competence relating to adaptive behavior, social skills and peer acceptance. As research developed, different definitions and measurement techniques developed to suit these new findings. Therefore, Dodge (1985) rightly pointed out that there are nearly as many definitions of social competence as there are researchers in the field. Likewise, Ladd (2005) outlined centurylong academic history of research and also noted its numerous conceptualizations. Most of the researchers have suggested that social competence involves how effectively a person functions as an individual in dyadic relationship groups (Bukowski, Rubin & Parker, 2001). Social competence has been viewed as a multifaceted construct involving social assertion, frequency of interaction, positive self-concept, social cognitive skills, popularity with peers and the list goes on and on (Dadge, 1985). In other words, Social competence is regarded as a complex, multi-dimensional concept consisting of social, emotional, cognitive, behavioral and motivational skills needed for successful social adaptations. Social competence is also defined as "an ability to achieve personal goals in social interaction while simultaneously maintaining positive relationships with others over time and across settings" (Rubin & Rose-Krasnor, 1992). This definition implies that both individual and social goals are important aspects of social competence. Social Competence is defined as the ability to make use of environmental and personal resources to achieve a desired social outcome (Hussong et al., 2005). Moreover, Shaffer (2005) defined social skills in the same sense as the ability to communicate and interact with other members of society without undue conflict or disharmony. Denham et al. (2006) have identified cooperation, assertion, responsibility, empathy, and self-control as five main clusters of social skills.

Peer related social competencies of preadolescents have been regarded as predictors of coping ability of adolescents and adults in adverse and stressful situation (Bangwell, Newcanb&Bukowski, 1998). The close relation between peer optimism and social competence has also been established (Deptula et al 2006). Further, Bullis, Walker & Sprague(2001) have explored that antisocial activities and risky behavior of children and adolescents can be reduced by developing social competence. In fact, social competence is the real foundation upon which the expectations for future interaction with others is built, and upon which individuals develop perceptions of their own behavior. Often, the concept of social competence encompasses certain additional constructs like social skills, social communication and interpersonal communication. Social competence is characterized by the potency dimensions of social measurements. As one of the components of the social behavior, it is acquired through social interaction and cultural interaction in different socio-cultural settings. The success of an individual in the society depends largely upon the extent to which he/she has acquired the richness and potency desirable for his/her self-actualisation growth and development. For a successful interpersonal interaction a high order social competence is an essential disposition of an individual. Thus, the social competence has been defined as the social ability and interpersonal skill of an individual in effectively meeting a person-situation interaction or successfully dealing with an individual environmental factor. One's social competence can be regarded as a direct measure of one's social success.

Social competence in School :The importance of learning of social competence in early secondary school to enhance the academic outcomes and improve mental health in the later on life among adolescents and adults have been established (Bond, Butler, Thomas, Carlin, Glover & Bowes, 2007). Hoglund and Leadbeater (2004) have predicted the effect of social environments such as family, school and classroom on social competence and emotional and behavioral problems. McNamara (2005) has suggested various practical methods for the improvement of social competence of students in school.

Social competence and Demographic variables : The impact of certain demographic variables such as gender, age and culture on social competence has also been critically reviewed in the literature.

III. IMPACT OF GENDER ON SOCIAL COMPETENCE

Most investigators who have studied individual differences in social competence have not addressed the issue of gender, age and culture. However, a number of research scholars have explored the existence of significant gender differences in social-cognitive functioning. For example, studies conducted with preschool children have indicated that there may be important gender differences in the ways in which children think about social problems and solve interpersonal conflicts (Miller, Danaher, & Forbes, 1986; Musun-Miller, 1993; Walker, Irving, &Berthelsen, 2002). The social goals chosen by children and the strategies that children select to achieve these goals are influenced by the information accessed from the social environment, and the skill of accurately determining another's social intentions seems to be highly correlated with social competence (Dodge & Feldman, 1990; Rubin & Krasnor, 1992). Those girls seem to be more competent overall in determining the intentions of others and in generating effective solutions to social problems (Putallaz, Hellstern, Shep- pard, Grimes, &Glodis, 1995). On the other hand, Charman, Ruffman, and Clements (2002) in another study reported the existence of weak gender differences. Subsequently, Walker (2005) conducted a studyamong 111 young children (48 boys and 63 girls) on peer-related social competence in terms of prosocial behavior, aggressive or disruptive behavior, and shy or withdrawn behavior. Results of Walker (2005), after controlling for age, significantly predicted more aggressive or disruptive behavior for boys and higher prosocial behavior for girls in peer-related social competence.

Impact of age on social competence: The age has been regarded as an important factor in the field of research in this area relating to the power of understanding of the relationship between the mental states of others and their actions. Much of the empirical research in this area has focused on age differences in predicting the performance. For example, classic tests of false belief have indicated that by about 4 years of age, typically developing children are able to make inferences about the beliefs and desires of other people, to use this information, and to interpret their behavior (Wellman, 1990, 1991; Wellman &Bartsch, 1994). These studies are clear indicative of the age dependence of social competence relating to the power of understanding and experiencing the importance of social relationship. Shiner (2000) in another study on childhood personality, an importance construct of social competence, reported that such skill changes with time/age and continues to late adolescence. Walker (2005) reported that older boys displayed more prosocial behavior than the younger boys. The significant difference between older and younger boys with respect to aggressive or disruptive behavior and shy or withdrawn behavior suggest that higher rate of aggressive or disruptive behavior may be adaptive (Walker, 2005).

Impact of culture on social competence: Culture has been defined as a dynamic phenomenon that surrounds us at all times, being constantly enacted or created by our interactions (Schein, 2004, p 1). In the context of cultural difference, Sternberg (2004) bluntly stated, "Behavior that in one cultural context is smart may be, in another cultural context, stupid" (p. 325). Thus, it is a matter of debate whether social competence is universal or culture-bound. From the study of literature it is revealed that research studies to explore the impact of gender, age and culture in the specific sense of urban and rural culture on social competence of school going adolescents is not far less developed but historically ignored. In view of these considerations, the present study explored the impact of culture linked gender and age differences on social competence of higher secondary school adolescents.

HYPOTHESES

- Significant gender differences exist in terms of social competence H1.
- H2. Significant difference exist between senior year) and higher secondary students in terms of social competence
- H3. Significant difference exists between students of urban and rural settings in terms of social competence.

METHOD OF STUDY IV.

Participants: Participants were 240 higher secondary school students 120 from each of the gender groups equally drawn from Urban and rural settings. The age of participants ranges from 15 to 18 years. Participants were randomly selected from ten higher secondary schools of Odisha, a south-eastern region of India.

Instruments: Standardized questionnaires were used for collecting data from the participants to measure their emotional intelligence.

Procedure: Heads of the institutions were informed sufficiently earlier seeking permission, to conduct the tests/study. After obtaining permission the Participants (both 1st year and 2nd year students) were invited to a hall instructions were printed on the booklets containing the questionnaires: Booklets were provided to the students and instructions were read out by the investigator and doubts were cleared before the start of test. The size of the group varied from 15 to 35 participants. The test administration took about 2 hours duration.

V. RESULTS

Culture linked significant gender difference in social competence scores are presented in Table 1. Levels of overall social competence of adolescent boys and girls are computed in Table 2.The relationship between social competence and age difference linked to both urban and rural culture has been presented in Table 3, and levels of overall social competence of younger and older adolescents are presented in Table 4. Table 5 predicts the correlation between social competence and cultural settings (urban and rural). Levels of overall social competence of urban and rural adolescentsare presented in Table 6.

Variables	Gender	Number (N)	Mean (M)	Standard Deviation(SD)
Social Competence	Male	120	23.26	6.35
Social Competence	г 1	120	26.02	C 12

Table 1.Culture linked gender differences in social competence average

120

Females

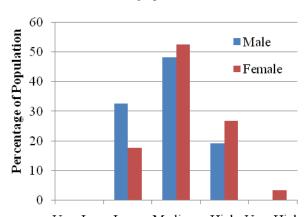
Results presented in Table 1 were computed from scores of 8 sets of group participants consisting of 30 each. Mean scores in social competence (M=26.03, SD=6.43) for 120 female participants were computed from mean social competence scores of 30 urban 1st year girls(M=27.40, SD=7.22), 30 urban 2nd year girls (M=29.17, SD=7.24), 30 rural 1st year girls (M=23.33, SD=5.54), and 30 rural 2nd year girls (M=24.20, SD=5.72). Further, mean scores in social competence (M=23.26, SD=6.35) for 120 male participants were computed from mean social competence scores of 30 urban 1st year boys(M=23.17, SD=6.19), 30 urban 2nd year boys (M=26.83, SD=6.80), 30 rural 1st year boys(M=20.83, SD=6.36), and 30 rural 2nd year boys(M=22.20, SD=6.01).

6.43

Score→	Very Low	Low (20%-39%)	Medium (40%-59%)	High (60%-79%)	Very High (80%- 100%)
Gender↓	(<20%)				
Male	0.00%	32.50%	48.33%	19.17%	0.00%
Female	0.00%	17 50%	52 50%	26.67%	3 33%

Table 2. Levels of overall social competence of adolescent boys and girls

Levels of overall social competence of adolescent boys and girls as computed in Table 2 are depicted in bar graph 1.



Very Low Low Medium High Very High Bar graph 1. Levels of Overall social competence of Adolescent Boys and Girls

Table 3.Culture linked age differences in social competence average

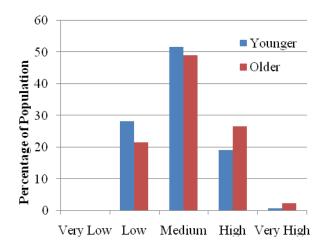
Variables	Age Group	Number (N)		Standard Deviation (SD)
Social	Younger (1 st year)	120	23.68	6.33
Competence	Older (2 nd year)	120	25.60	6.44

Similarly, results presented in Table 3 were computed from scores of 8 sets of group participants consisting of 30each. Mean scores in social competence (M=23.68, SD=6.33) for 120 younger adolescents were computed from mean social competence scores of 30 urban 1st year girls (M=27.40, SD=7.22), 30 urban 1st year boys (M=23.17, SD=6.19), 30 rural 1st year girls (M=23.33, SD=5.54), and 30 rural 1st year boys (M=20.83, SD=6.36). Further, mean scores in social competence (M=25.60, SD=6.44) for 120 older adolescents were computed from mean social competence scores of 30 urban 2nd year girls (M=29.17, SD=7.24), 30 urban 2nd year boys (M=26.83, SD=6.80),30 rural 2nd year girls (M=24.20, SD=5.72) and 30 rural 2nd year boys (M=22.20, SD=6.01).

Table 4. Levels of overall social competence of younger and older adolescents

Score→	Very Low (<20%)	Low (20%-39%)	Medium (40%-59%)	High (60%-79%)	Very High (80%- 100%)
Age Group↓					
Younger	0.00%	28.33%	51.67%	19.17%	0.83%
Older	0.00%	21.67%	49.17%	26.67%	2.50%

Levels of overall social competence of younger and older adolescents as computed in Table 4 are depicted in bar graph 2.



Bar graph 2. Levels of Overall social competence of younger and older adolescents

Table 5.Cultural differences in social competence average

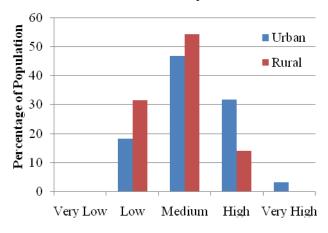
Variables		Cultural	Number	Mean	Standard
	variables	Setting	(N)	(M)	Deviation (SD)
	Social	Urban	120	120	120
C	Competence	Rural	26.65	26.65	26.65

Similarly, results presented in Table 5 were also computed from scores of 8 sets of group participants consisting of 30 each. The presented mean social competence score (M=26.65) for 120 urban students is the mean of the mean social competence scores of 1st year urban girls (M=27.40), 1st year urbanboys (M=23.17), 2nd year urban girls(M=29.17) and 2nd year urban boys (M=26.83). Further, the presented social competence mean score (M=22.64) for 120 rural students is the mean of the mean social competence scores of 1st year rural girls (M=23.33), 1st year rural boys (M=20.83), 2nd year rural girls (M=24.20) and 2nd year rural boys (M=22.20).

Table 6. Levels of social competence of urban and rural adolescents

Score→	Very Low (<20%)	Low (20%-39%)	Medium (40%-59%)	High (60%-79%)	Very High (80%- 100%)
Cultural Setting↓	(<20%)				
Urban	0.00%	18.33%	46.67%	31.67%	3.33%
Rural	0.00%	31.63%	54.17%	14.17%	0.00%

Levels of social competence of urban and rural adolescents as presented in Table 6 are depicted in bar graph 3.



Bar graph 3. Levels of social competence of urban and rural adolescents

VI. DISCUSSION

Social competence and gender difference: Table 1 shows that boys and girls are different in their social competence score average. Thus, significant gender differences exist in social competence in the present study, which is in agreement with first hypothesis and other earlier studies (Miller, Danaher, & Forbes, 1986; Musun-Miller, 1993; Walker, Irving, & Berthelsen, 2002). The findings of this study revealed that girls are more socially competent than boys of the same age group (younger 1st year group or older 2nd year group). Further, the gender differences are comparable within the same cultural environment (urban or rural). The urban girls scored higher social competence average (M=28.29) than urban boys (M=25.00) and rural girls also scored higher average (M=23.77) than rural boys (M=21.52) in social competence test. However, the higher score of urban boys (M=25.00) cannot be compared with the lower score of rural girls (M=23.77) in predicting the gender difference in social competence. Moreover, if the above results of urban and rural students are combined together, the overall mean score in social competence for female adolescents (M = 26.03) is found to be higher than their male counterparts (M = 23.26). This result of gender differences in social competence for higher secondary students is in consistent with the results of earlier studies of Putallaz, Hellstern, Sheppard, Grimes, &Glodis,(1995).Moreover, Table 2 presents a comparative study on levels of social competence of boys and girls. 26.67% of male adolescents have high level of social competence, while 19.17% of female adolescents have high level of social competence. In addition, 3.33% of girls have also very high level of social competence. The complete results of levels of social competence of adolescent boys and girls are depicted in bar graph 1. The female adolescents being more intuitive than male adolescents, the former exhibit higher level of social competence than later.

Social competence and age difference: A positive response is obtained for second hypotheses (H2). That means, a significant age difference exists in social competence in the present study. When mean social competence scores of boys and girls of urban and rural schools are compiled together, it is observed that older 2nd year students show higher social competence average (M = 25.60) than younger 1st year students (M=23.68). In the present study social competence is found to have a positive correlation with age as presented in Table 3. This result explored that, social competence increases with increase of age of higher secondary school students. In addition, Table 4 presents a comparative study on levels of social competence of younger and older adolescents. 26.67% of older adolescents have high level of, social competence, while 19.17% younger adolescents have high level of social competence. The complete results of the levels of social competence of younger and older adolescents are depicted in bar graph 2. The above difference in social competence may be accounted for the greater experience of older adolescents as compared to younger adolescents.

Social competence and cultural difference: Further, another significant difference exists in social competence for urban and rural students (Hypotheses, H3). Results of Table 5 predicts that urban students exhibit higher level of social competence (M = 26.64)as compared to their rural counterparts (M = 22.64). More specifically, comparing the scores in social competence test of urban boys (M=28.29) and urban girls (M=25.00) with social competence scores of rural boys (M=23.77) and rural girls (M=21.52), it is explored that both urban boys and girls scored higher social competence average than their rural counterparts. Moreover, urban older adolescents are found have scored higher social competence average (M=28.00) than rural older adolescents (M = 26.40) and urban younger adolescents scored higher (M=25.29) than rural younger adolescents (M = 22.08) in social competence test. In addition, Table 6 presents a comparative study on levels of social competence of urban and rural adolescents. 31.67% of urban adolescents have high level of social competence, while only 14.17% of rural adolescents have high level of social competence. The complete results of the levels of social competence of urban and rural adolescents are depicted in bar graph 3.This higher level of social competence can be attributed to the greater chance of exposure of urban school adolescents to higher intellectual environments and more facilities in urban schools as compared to rural schools. The difference in social competence scores of urban and rural adolescents can also be accounted for the contrasting cultural values and beliefs.

VII. CONCLUSION AND SUGGESTIONS

Since two years of higher secondary school education is the most crucial period and turning point for adolescents in the context of academic career as well as professional career, utmost care should be taken to improve their social competence through special trainings or including social competence—in higher secondary school syllabus. More intensive research studies are needed to be carried out on social competence and emotional intelligence relating to stress management and mental health among higher secondary school adolescents in both rural and urban sectors. More specifically, additional care is to be taken from Government level for students of rural base schools to improve the levels of their social competence skills with a view to minimize the difference, which adversely affect the future life, career and perspectives of rural base students.

REFERENCES

- [1] Armour, S., & Haynie, D. (2007). Adolescent sexual debut and later delinquency. Journal of Youth and Adolescence, 36, 141–152.
- [2] Anderson, S., & Messick.S. (1974). Social competence in young children. Developmental Psychology. 10, 282-293
- [3] Bagwell, C.L., Newcomb, A.F., &Bukowski, W.M. (1998). Preadolescent friendship and peer rejection as predictors of adult adjustment. *Child Development*, 69(1), 140-153.
- [4] Bond, L., Butler, H., Thomas, L., Carlin, J., Glover, S., Bowes, G., et al. (2007). Social and school connectedness in early secondary school as predictors of late teenage substance use, mental health, and academic outcomes. *Journal of Adolescent Health*, 40, 357-373
- [5] Buhi, E. R., & Goodson, P. (2007). Predictors of adolescent sexual behavior and intention: A theory-guided systematic review. The Journal of Adolescent Health, 40, 4–21.
- [6] Bukowski, W., Rubin, K. H. & Parker, J. (2001).Social competence.In N. J. Smelser& P. B. Baltes (Eds.). International encyclopedia of Social and behavioural Sciences (pp. 14258-14264), Oxford, England: Elsevier.
- [7] Bullis, M., Walker, H.M, &Sprague, J.R. (2001). A promise unfulfilled: Social skills training with at-risk and antisocial children and youth. *Exceptionality*, 9(1), 67-90.
- [8] Charman, T., Ruffman, T., & Clements, W. (2002). Is there a gender difference in devel- opment? Social Development, 11, 1-10.
- [9] Coleman, J., & Hagell, A., (2007). Adolescence, risk and resilience: Against the odds. West Sussex: Wiley.
- [10] Compas, B. E., Jaser, S. S., & Benson, M. A. (2009). Coping and emotion regulation: Implications for understanding depression during adolescence. In S. Nolen-Hoeksema, H. M. Lori (Eds.), Handbook of depression in adolescents (pp. 419–440). New York: Routledge/Taylor & Francis.
- [11] Denham, A., Hatfield, S., Smethurst, N., Tan, E., &Tribe, C. (2006). The effects of social skills interventions in the primary school. *Educational Psychology in Practice*, 22(1),33-51
- [12] Deptula, D.P., Cohen, R., Phillipsen, L.C., &Ey, S. (2006). Expecting the best: The relation between peer optimism and social competence. *The Journal of Positive Psychology*, 1(3), 130-141.
- [13] Dinkes, R., Kemp, J., & Baum, K. (2009). Indicators of school crime and safety: 2008 (NCES 2009–022/NCJ 226343). Washington, DC: National Center for Education Statistics, Institute of Education Sciences, U.S. Department of Education and Bureau of Justice Statistics, Office of Justice Programs, U.S. Department of Justice.
- [14] DiTommaso, E., Brannen-McNulty, C., Ross, L., & Burgess, M. (2003). Attachment styles, social skills and loneliness in young adults. *Personality and Individual Differences*, 35,
 - 303-312.

T151

- [16] Dodge, K. A. (1985). Facets of Social interaction and the assessment of Social Competence in children. In B. Schneider K. H., Rubin & J. R edingham, (Eds.), Children's peer relations: Issues in assessment and intervention. 3-22. New York: Springer – Verlag.
- [17] Dodge, K. A., & Feldman, E. (1990). Issues in social cognition and sociometric status. In S. R. Asher & J. D. Coie (Eds.), Peer rejection in childhood (pp. 119–155). Cambridge, England: Cambridge University Press.
- [18] Dodge., K. A., & Murphy, R. R. (1984). The assessment of Social competence in adolescents. Advances in Child Behavioral Analysis & Therapy. 3, 61-96.
- [19] Egeland, B., & Sroufe, L. A. (1981). Attachment and early maltreatment. Child Development. 52, 44-52.
- [20] Ellickson, P.L., Hays, R.D., & Bell, R.M. (1992). Stepping through the drug use sequence: Longitudinal scalogram analysis of initiation and regular use. Journal of Abnormal Psychology, 101, 441-451.
- [21] Fredricks, J. A., &Eccles, J. S. (2002). Children's competence and value beliefs from childhood through ado-lescence. Developmental Psychology, 38, 519–533.
- [22] Hoffman, J.H., Welte J.W., & Barnes, G.M. (2001).Co-occurrence of alcohol and cigarette use among adolescents. Addictive Behaviors, 26, 63-78.
- [23] George, C. & Main, M. (1979). Social interactions of young abused children :Approach, avoidance and aggression. Child Development. 50, 306-318.
- [24] Hoglund, W.L., &Leadbeater, B.J. (2004).The effects of family, school, and classroom ecologies on changes in children's social competence and emotional and behavioral problems in first grade. *Developmental Psychology*, 40(4), 533-544.
- [25] Hughes, E. K., &Gullone, E. (2010).Parent emotion socialisation practices and their associations with personality and emotion regulation. Personality and Individual Differences,
- [26] Hussong, A.M., Fitzgerald, H.E., Zucker, R.A., Wong, M.M., &Puttler, L.I. (2005). Social competence in children of alcoholic parents over time. *Developmental Psychology*, 41(5), 747-759.
- [27] Kohlberg, L., & Mayer, R. (1972). Development as the aim of education. Havard Educational Review, 42, 449-496.
- [28] Ladd, G. W. (2005). Children's peer relations and social competence. A century of progress. New Haven, C. T: Yale University Press
- [29] Luder, M.-T., Pittet, I., Berchtold, A., Akré, C., Michaud, P.-A., &Surís, J. C. (2011). Associations between online pornography and sexual behavior among adolescents: Myth or reality? Archives of Sexual Behavior, 40, 1027–1035.
- [30] McNamara, K. (2005). Best practices in promotion of social competence in the schools. *BestPractices in School Psychology IV*, 911-928.
- [31] Miller, P. M., Danaher, D. L., & Forbes, D. (1986). Sex-related strategies for coping with interpersonal conflict in children aged five and seven. Developmental Psychology, 22, 543–548.
- [32] Musun-Miller, L. (1993). Social acceptance and social problem solving in preschool children. Journal of Applied Developmental Psychology, *14*, 59–70.
- [33] Mussen, P.H., Conger, J.J., Kagan, J. & Huston, A.C. (1990). Child Development and Personality, VII Edition, Harper and Row Publishers, New York.
- [34] O'Donohue, W., & Tolle, L. W. (2009). Behavioral approaches to chronic disease in adolescence: A guide to integrative care. New York: Springer.
- [35] Ogbu, J. U. (1981). Origin of human competence: A cultural-ecological perspective. Child Development. 52, 413-429.
- [36] Orlando, M., Tucker, J.S., &Ellickson, P.L. (2005). Concurrent use of alcohol and cigarettes from adolescence to young adulthood: An examination of developmental trajectories and outcomes. Substance Use and Misuse, 40,1051-1069.
- [37] Parker, J.G. &Asher, S.R. (1993). Friendship and friendship quality in middle childhood: Links with peer group acceptance and feelings of loneliness and social dissatisfaction. *Developmental Psychology*, 29(4), 611-621.
- [38] Peled, M., &Moretti, M. M. (2007). Rumination on anger and sadness in adolescence: fuelling of fury and deepening of despair. Journal of Clinical Child and Adolescent Psychology, 36(1), 66–75.

- [39] Putallaz, M., Hellstern, L., Sheppard, B. L., Grimes, C. L., &Glodis, K. A. (1995). Con flict, social competence, and gender: Maternal and peer contexts. Early Education and Development, 6, 433–447.
- [40] Rubin, K. H. & Krasonor, L. R. (1986). Social-Cognitive and Social behavioral perspectives on problem solving. In M. Perlmutter (Ed.), Cognitive perspectives on children's social and behavioral development. The Minesota Symposia on Child Psychology (Vol. 18, pp. 1-68). Hillsdale, N J: Erlbaum.
- [41] Rubin, K. H., Booth-LaForce C., Rose-Krasnor, L & Mills, R. S. L. (1995). Social relationships and social skills: A conceptual and empirical analysis. In S. Shulman (Ed.), close relationships and socioemotionaldevelopment (pp. 63-95). Norwood, NJ: Ablex Publishing.
- [42] Rubin, K. H., Bukowki, W., & Parker, J. (2006). Peer interactions, relationships and groups. In N. Eisenberg (Ed.), Handbook of Child Psychology: Social, emotional, and personality development (6thedn. Pp. 571-645) New York: Wiley.
- [43] Rubin, K. H., Wojslawowicz, J. C., Rose-Krasnor, L., Booth-LaForce, C., and Burgess, K. B. (2006). The friendships of socially shy/withdrawn children: prevalence, stability and relationship quality. Journal of Abnormal Child Psychology. 34, 139-153.
- [44] Rubin, K. H. & Rose-Krasnor, L. (1992).Interpersonal problem solving.In V. B. Van Hassett& M. Hersen (Eds.), Handbook of social development (pp. 283-323). New York: Plenum Press.
- [45] Ryan, A. M., & Patrick, H. (2001). The classroom social environment and changes in adolescents' motivation and engagement during middle school. American Educational Research Journal, 38, 437–460.
- [46] Schein, E. (2004). Organisational Culture and Leadership (3rd Ed.), San. Francisco: Jossy-Boss.
- [47] Seiffge-Krenke, I. (2009). Changes in stress perception and coping during adolescence: The role of situational and personal factors. Child Development, 80, 259–279.
- [48] Shaffer, D.R. (2005). Social and personality development (5th ed.). Belmont, CA: Wadsworth Publications.
- [49] Shiner, R. (2000). Linking childhood personality with adaptation: Evidence for continuity and change across time into late adolescence. *Journal of Personality and Social Psychology*, 78(2), 310-325.
- [50] Sternberg, R.J. (2004). Culture and Intllence. Maerican Psychologist, 59 (5), 325-338.
- [51] Vega, W.A., & Gil, A.G. (2005). Revisiting drug progression: Long-range effects of early tobacco use. Addiction, 100, 1358-1369.
- [52] Walker, S. (2005) .Gender differences in the relationship between young children's peer-related social competence and individual differences in theory of mind. The Journal of Genetic Psychology, 166 (3), 297-312
- [53] Walker, S., Irving, K., &Berthelsen, D. (2002). Gender influences on preschool children's social problem-solving strategies. The Journal of Genetic Psychology, *163*, 197–209.
- [54] Wellman, H. M.(1990). The child's theory of mind. Cambridge MA: MIT Press
- [55] Wellman, H. M. (1991). From desires to beliefs: Acquisition of a theory of mind. In A. Whiten (Ed), Natural theories of mind. Oxford: Basil Blackwell.
- [56] Wellman, H. M., &Bartsch, K. (1994). Before belief: Children's early psychological the- ory. In C. Lewis & P. Mitchell (Eds.), Children's early understanding of mind: Origins and development(pp. 331–354). Hove, England: Erlbaum.
- [57] Zsolnai, A. (2002). Relationship between children's social competence, learning motivation and school achievement. Educational Psychology, 22(3), 317-329.