

Examination of social interactions by problem behaviours (13 years of longitudinal research)

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Abstract

In this study, social interaction situations of adolescents who were identified as having either high or low problem behaviours (LPB) were investigated. Previously, the Teacher Form of Social Skill Rating System scale was applied to 110 children when they were 6 years old. Accordingly, among these participants, there were 26 adolescents who were 19-year old and were available to become participants of this study. In this study, eight adolescents were interviewed in order to investigate their social interactions based on the previous examination of problem behaviours at the highest or lowest level. Results show that the degree of problem behaviours determined at the age of six was the determinant in the current social interactions of these participants. It was observed that children who were defined with high problem behaviours experienced social breaks, insecurities and problems, whereas those with LPB showed better developed social relationships, such as being successful in coping with problems and having the feelings of trust and competence.

Keywords: Problem behaviours, externalising, internalising, early childhood, early adulthood.

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1. Education, culture and intercultural encounters of individual potential

In terms of developmental stability, the existence of problem behaviours in early childhood plays an important role at an older age. Internalising and externalising behaviours are related to problem behaviours. Internalising behaviours are related to internal and over-controlled behaviours (Achenbach, 1991; Achenbach & Rescorla, 2000). Externalising behaviours include excessive anger, quarrels, disruptive behaviour and disobedience. There is a consensus among developmental psychologists that internalising behaviours are multifactorial and tend to stabilise over time once established (Haberstick, Schmitz, Young & Hewitt, 2005; Keiley, Bates, Dodge & Pettit, 2000; Madigan, Brumariu, Villani, Atkinson & Lyons-Ruth, 2016). However, there are also opinions that externalised problem behaviours show stability from early childhood to adolescence and young adulthood (Korhonen, Luoma, Salmelin, Siirtola & Puura, 2018). Many sources have found evidence that problem behaviours are transferred from generation to generation (Capaldi, Pears, Kerr, Owen & Kim, 2012; Hatoum, Rhee, Corley, Hewitt & Friedman, 2018). These sources are generally explained by genetic factors. It is suggested that genetic factors contribute to the stability of problem behaviours until early adolescence (Haberstick et al., 2005; Hatoum et al., 2018). Haberstick et al. (2005) reported that self-esteem might be important for the continuation and balance of social relationships. It has been reported that individuals with low self-esteem experienced repeated interpersonal rejections, whereas people with high self-esteem experienced interpersonal relationships that were subjectively successful (DeHart, Pelham & Tennen, 2006). Evidence has been obtained that self-esteem is associated with externalised problem behaviours (Park & Lee, 2016).

Even though problem behaviours might continue being stable with genetic factors, they might depend on the environmental factors also. For instance, a relationship with the mother is seen as an important source of problem behaviours. Securely attached children have a strong and positive relationship with their mothers. Children with low problem behaviour (LPB) often have a strong and positive maternal relationship. Those with high problem behaviours appear to have limited or weak-negative relationships (Climie & Mitchell, 2017).

Abraham and Kerns (2013) argue that the existence of a relationship between the child and the mother, regarding the use and control of emotions in social situations, is the determinant in problem behaviours. This model is formed by the relationship of an individual with the attachment figure (mainly mother; Abraham & Kerns, 2013). An individual's resistance to internal and external stress situations might be shaped and become stable according to this model. In accordance with the developmental process, children who reach the age of 5–7 might have a sense of responsibility to a large extent (Milner & Ochs, 1990). This age range is seen as a critical period for gaining a sense of responsibility (Blount & Schieffelin, 1992; Ochs & Izquierdo, 2009; Seymour, 1988).

Along with an increased sense of belonging, respect for others and awareness about social rules (Underwood & Rosen, 2011), the age range between 5 and 7 is also considered as a critical period for guiding children to be responsible (Seven, 2006). The establishment and maintenance of social relationships are important in developing social skills (Abdi, 2010; Matson, 2009; Montroy, Bowles, Skibbe & Foster, 2014). (Seven, 2006). Success in social skills greatly affects children's ability to establish and maintain relationships. However, there are many researches stating that social skills might differ by gender (Abdi, 2010; Seven, 2006; Seven, Alabay, Akcay & Baskurt, 2019). It is observed that gender differences play a role in establishing and maintaining a romantic and social relationship in early adulthood.

In the current literature, how problem behaviours determined in early childhood can affect social relationships in early adulthood was examined. In the literature, no longitudinal investigations on this issue were encountered. Therefore, this study aims to investigate the current social relationship status of young adolescents who were identified with either low and high problem behaviours at the age of 6.

In this framework, answers to the following questions were sought:

1. What were the previously determined attitudes of adolescents with low and high problem behaviours towards themselves?
2. What was the previously determined social relationship statuses of these adolescents with low and high problem behaviours based on their gender?

2. Method

2.1. Research model and tools

This research was designed as a 13-years longitudinal study at two different time points by applying two qualitative and quantitative methods.

The descriptive survey method, which is one of the quantitative general screening models, was applied to the participants when they were 6 years old. The data in this study were collected based on teacher's observation. The Teacher Form of Social Skill Rating System (SSRS-TF) developed by Gresham and Elliott (1990) and a demographic information form were used as data collection tools. A grounded theory multiple case study, which is one of the case studies from qualitative research (Yin, 2003), was applied to 8 of the adolescents at the age of 19 who were the participants of the previous study. A semi-structured interview form and information form were used as data collection tools. This research model was chosen to determine the social relationship statuses of the 19-year-old adolescents who were identified with low and high problem behaviours when they were 6 years old.

2.1.1. Teacher Form of Social Skill Rating System (SSRS-TF)

The SSRS-TF is a standard method that classifies the social behaviour of preschool, primary and secondary school students, developed by Gresham and Elliott (1990). The SSRS forms can be filled in 20 minutes. Validity and reliability studies of the scale were conducted by Gresham and Elliott (1990) for the standardisation of the scale. Accordingly, the average alpha reliability coefficient of different forms of SBDS is 0.90 for social skills and for test–retest correlation it is 0.85. The internal consistency of the scale was determined between 0.83 and 0.94. For the validity of the SSRS-TF, the consistency was evaluated by comparing the 'Social Behaviour Assessment', 'Child Behaviours Teacher Report Form' and 'Harter Teacher Rating Scale' scales. The results were found between 0.44 and 0.70 (Diperna & Volpe, 2005). The scale was translated to Turkish by Seven (2007).

2.2. Study group and process

Time 1 (2006).

A total of 110 children from four kindergartens in Mus Province Centre were selected by the simple random sampling method in 2006. The SSRS-TF was completed by 12 preschool teachers.

Time 2 (2019).

In the second time point of this research, the study group was determined based on the sampling criterion, which is one of the purposeful sampling methods used in qualitative research among children who had problem behaviours earlier. In the study group, out of 110 children whose problem behaviours were determined in 2006, 26 children with the highest problem behaviour score were reduced to 2 girls, 2 boys and with the lowest problem behaviour score were reduced to 2 girls and 2 boys. The participants were coded as: EK1 and EK2 (males, LPBs); EK3 and EK4 (males, high problem behaviours); KK1 and KK2 (females, LPBs); and KK3 and KK4 (females, high problem behaviours). The following criteria were taken as the basis in determining the sample of the study:

1. The implementation of the SSRS-TF scale of the participants in 2006.
2. The problem behaviour scores are either the highest or the lowest for boys and girls.
3. Participants are from a moderate socioeconomic status.

4. The participants were not given any support during the process.
5. Participants resided in Mus, Turkey, from the age of 6 to 19.

2.3. Data collection and analysis

In 2006, the SSRS-TF problem behaviours scale was applied to the teachers when the children were 6 years old. The teachers scored problem behaviours as a result of their 1-month observations. In the spring term of 2019, 26 of the 110 participants whose problem behaviour scores were determined in 2006 were contacted. Out of the 26 participants who were identified with the highest and lowest problem behaviour scores, 4 boys and 4 girls were interviewed. Data on social interactions in adolescents were collected through a semi-structured interview form. The interview was conducted with sound recording and the recordings were converted into transcripts. The expressions in the records were graded.

3. Findings

3.1. Participants with low and high problem behaviours attitudes towards themselves according to their gender

3.1.1. Self-esteem

It was seen that girls and boys with LPBs have a high self-esteem, whereas participants with high problem behaviours have a low self-esteem. For example, EK4 stated that he determined his behaviours based on the reactions of others by saying, 'They are somehow against me, I will be against them'. This indicates that he does not have a unique attitude. It was determined that boys and girls with LPB at the age of six had a high self-esteem at the age of 19, whereas children with high problem behaviours had a low self-esteem.

3.1.2. Coping with negative emotions

In coping with negative emotions, boys and girls with LPBs were found to be successful. It was seen that all of those with high problem behaviours failed in coping with negative emotions, excluding the case of KK1 who was partially successful in coping. All girls and boys with high problem levels considered themselves as unsuccessful in dealing with negative emotions. KK3 said that 'every time I do this to myself 'don't get angry at that moment, express your feelings', but I cannot do this every time'.

3.1.3. Taking responsibility

It was determined that girls and boys with LPBs did not take responsibility. Moreover, male participants with high problem behaviours did not take responsibility. It was seen that female participants becomes unhappy when they took responsibility. KK3 and KK4 considered taking responsibility as doing what their parents say. Therefore, girls with high problem behaviours regarded taking responsibility as a source of unhappiness.

3.2. Attitudes of the participants with low and high problem behaviours towards themselves

3.2.1. Relationship with mother

EK1, EK2 and KK1 who have LPBs reported that their relationship was positive. KK1, on the other hand, mentioned the limitation of his relationship with his mother. However, it was understood that the ones having a limited relationship (EK4, KK3) was from the group having higher problem behaviours. EK3 and KK4 had a weak negative relationship situation. It was determined that the relationships of children with LPBs with their mothers were associated with their strong relations with their mothers in adolescence.

3.2.2. Starting a social relationship

It was understood that all the participants with LPB found themselves as successful in starting a social relationship. However, among the participants with high problem behaviours, EK4 found himself as successful in starting a social relationship. EK3 regarded himself partially successful. The most important finding about establishing social relationships was that girls with high problem behaviour scores regarded themselves as unfit for starting social relationships.

3.2.3. Maintaining a social relationship

Males with LPB scores stated that they were successful in conducting social relationships. KK1 was one of the girls with a LPB score and KK3 was one of the girls with high problem behaviour score who stated that they failed in this regard. On the other hand, KK2, EK4 and KK4 were linked to others to maintain the relationship. For example, KK4 stated that 'if the person on the other side does not break the friendship, I will not continue to stop talking. If he cuts, I will stop talking.' EK4, on the other hand, said, 'They are somehow against me,' and associated his relationships with others' attitudes. EK4 had associated his relationship with the attitude of others.

4. Discussion

Self-esteem and coping skills of those with high problem behaviours were found to be low. Low self-esteem was seen as a sign of stress, depression and mental disorders. It was found that individuals with low self-esteem exhibited internalised problem behaviours. It was assumed that attachment theory, which continues with stability (Seven, 2010; Seven & Ogelman, 2012), for those with high problem behaviours and who are unable to cope with negative emotions had a low self-esteem. Indeed, according to Abraham and Kerns (2013), relationships with the attachment figure provide the child with a model for the use and control of emotions in social situations. The individual's internal and external stress situations and their resistance to problems are shaped according to this model (Abraham & Kerns, 2013).

It was determined that girls and boys with LPBs might take responsibility, whereas male participants with high problem behaviours did not take responsibility and female participants were unhappy when they took responsibility. Susan Wolf (2019) thinks that children with a problematic story exemplify irresponsibility. This study confirms this view. However, the fact that the girls with high-level problems expressed that they were unhappy despite taking responsibility may be due to the fact that the girls in a traditional Turkish family structure have more housework responsibilities than the boys. On the other hand, 6 years of age was seen as a critical age for gaining a sense of responsibility (Blount & Schieffelin, 1992; Ochs & Izquierdo, 2009; Seymour, 1988). Developing children's sense of belonging, gaining respect from others (Underwood & Rosen, 2011) and rising awareness about social rules were considered as important as gaining responsible behaviour.

The relationships of those with high problem behaviours with their mothers were mostly inadequate and negative. However, it was determined that a male participant who had high problem behaviours in establishing social relationships also saw himself as successful. Regarding the execution, it was determined that the girls with LPBs considered themselves unfit. Accordingly, girls regarded themselves as unsuccessful in starting the relationship. An important behavioural expression of social competence in early adulthood includes the successful development and maintenance of more intimate peer relationships (Iarocci & Gardiner, 2015). Children at high risk of rejection have difficulties in socialising, social strategy, and developing social skills (Rubin, Bukowski & Parker, 2006). It is known in the literature that girls have more intimate relationships than boys (Marshall, 2010). However, it is assumed that social skills acquired from early childhood affects the continuity of social relations, especially in early adulthood.

5. Conclusion

This research was carried out to determine how individuals perceive some of their feelings and relationships towards themselves in early adulthood, according to problem behaviours determined in early childhood. As a result, it has been determined that children with problem behaviours were at a significant risk in terms of their attitudes and relationships towards themselves in early adulthood.

It was found that high self-esteem, success of dealing with negative emotions, sense of responsibility, strong relationships with their mothers and their ability to establish and maintain social relationships were high at the age of 19 among girls and boys with LPB at the age of six. On the contrary, children with high problem behaviour were found to have low self-esteem, had inability to deal with negative emotions, avoided taking responsibility, had poor relationships with the mother, and established and maintained poor social relationships at the age of 19.

6. Recommendations

It is recommended that individuals with low social skill levels receive support with social skills education. Preschool education should be organised to support children's self-esteem. Teachers should plan appropriate activities to support children's self-esteem. Based on this research, it is concluded that the importance of gaining responsibility during the preschool period affects older ages. Therefore, appropriate responsibilities should be given to children during the preschool period at school, at home and among their peers. Thus, a sense of responsibility should be supported. On the other hand, maternal sensitivity programmes should be organised to improve the mother–child interaction during the preschool period. Beyond this qualitative research, longitudinal studies are needed to examine the future effects of younger problem behaviours with larger studies. However, it is assumed that reducing the problem behaviours with interventions in the educational environment, especially during the preschool and primary school period, will positively affect the individual's future quality of life.

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