Chapter 1

Introduction
Human development is the scientific study of the processes of orderly, cumulative, directional, age-related changes that humans experience as they progress through their life cycle (Santrock, 2007). It is a lifelong process and is central to our understanding of human nature. Recently, child development has been particularly investigated, thereby allowing people to realize and facilitate the transformations that occur from infancy through childhood through adolescence.

Childhood is a highly eventful and unique period of life involving growth and development that lays an important foundation for the adult years (Santrock, 2007). The healthy growth of a child is marked not only by development of the brain and nervous system and other obvious aspects of physical maturation but also by development in the linguistic, cognitive, social and relational, psychological and emotional, and moral and ethical domains (Maholmes, 2001). The aforementioned domains are intricately intertwined. Development in one domain influences and is influenced by development in other domains (Kostelnik et al., 1993).

Although development is a universal phenomenon, it proceeds at varying rates from child to child. Individual variation has at least two dimensions: the inevitable variability around the average or normative course of development and the uniqueness of each person as an individual (Sroufe et al., 1992). In addition to the inherent characteristics, development also occurs in and is influenced by multiple social and cultural contexts as propounded by Bronfenbrenner (1993), in his ecological model for understanding human development. He further states that children's development is best understood within the sociocultural context of the family, educational setting, community, and broader society. These various contexts are interrelated, and all have an impact on the developing child. Hinde (1995) advanced the notion that development needs to be considered from a multi-level perspective beginning with individual characteristics and progressing to the interaction, relationship and group levels of analysis and conjecture.
Consequently, a vast majority of contemporary psychologists, now, acknowledge that human development is shaped by a dynamic and continuous interaction between heredity and environment (Shonkoff & Phillips, 2000). For example, a child’s genetic makeup may predict healthy growth, but inadequate nutrition in the early years of life may keep this potential from being fulfilled. Or a severe disability, whether inherited or environmentally caused, may be ameliorated through systematic, appropriate intervention.

Reviewing the various research trends, the present investigation focuses on emotional development (e.g., subjective well being) and social development (e.g., social competence). Concurrent with the theoretical trends over the last three decades, that both inherent and environmental factors influences development, the study of children’s social competence and subjective well being requires that attention be paid to the child’s innate characteristics (temperament), and contextual factors surrounding the child (parenting style, parenting stress).

Temperament

Temperament is currently an active area of research with documented applicability to a variety of developmental and mental health outcomes such as peer interaction, psychopathology, school achievement and well being (Teglasi, 1998). Temperament research emphasizes a concern for a person’s individuality.

Temperament as a component of the individual’s cumulative tendency of perception, retention and organization, is the characteristic indicator of the individual’s propensity of responding to and using stimuli. It is n-dimensional.

In their pivotal research on temperament, the New York Longitudinal Study, Thomas and Chess (1977), proposed nine dimensions of temperament. They are activity level, adaptability, attention span and persistence, distractibility, approach/withdrawal, rhythmicity, quality of mood, threshold of responsiveness and intensity of reaction. They derived three-broad based profiles of dimensions that characterize children as:-
* **Easy** (40% of the *New York Longitudinal Study* sample): Even-tempered, easygoing, adaptable and predictable.

* **Slow To Warm Up** (15% of the *New York Longitudinal Study* sample): Inactive, moody, shy and cautious.

* **Difficult** (10% of the *New York Longitudinal Study* sample): Active, irregular, irritable, very intense, show negative reactions.

35% of the *New York Longitudinal Study* sample did not fit any of the categories, instead, showed unique blends of temperamental characteristics (Thomas & Chess, 1977).

In 1982, Thomas and Chess reconceptualized “difficult temperament” classification, suggesting that every child falls somewhere along a temperament continuum that ranges from easy to difficult, rather than falling into sharply demarcated categories (Blackwell, 2004).

Furthermore, they postulated the concept of “goodness of fit” which results when the properties of the environment, its expectations and demands are in accord with the organisms own capacities, characteristics, and style of behaving leading to optimal development in progressive direction. Conversely “poorness of fit” involves discrepancies and dissonance between environment opportunities and demands, and the capacities of the organism, so that distorted development and maladaptive functioning occur. However, later Thomas & Chess (1984) pointed out that “poorness of fit” does not necessarily lead to maladjustment.

Apart from Thomas and Chess various other researchers too have proposed various dimension of temperament in their models. In the Indian setting, the studies of temperament have so far made use of the framework suggested by Thomas & Chess (Kapur, 1995). In their researches Malhotra (1986), found that this model was equally applicable on Indian population.

Temperamental differences influence a child’s development, life adjustment and broader areas of functioning in a number of important ways (Carey, 1998; Teglasi, 1998). Temperamental profiles could have an impact on
the responses the child evokes from person’s involved in socializing the child, his attachment with others and his social competence (Kochanska, 1998; Smart & Sanson, 2003). Several researchers have documented a positive correlation between certain temperament profiles and conduct disorders among both boys and girls of all age groups (Beauchaine, 2001; Caspi, 2000; Eisenberg, 2000). Hence, indicating that temperament lays a foundation for future behavioural problems.

Although a widely used tool for cultivating knowledge, the construct of temperament cannot be reviewed independently but must be reviewed in context with the individual’s abilities and motives as well as environmental influences (Blackwell, 2004), such as parenting style and parenting stress.

**Parenting Style**

The construct of parenting style is used to capture normal variations in parent’s attempts to control and socialize their children (Baumrind, 1991). Parenting style is defined as the distinctive patterns of child rearing behaviours culled across time and situation (Lamborn et al., 1991). Some psychologists (Darling & Stienberg, 1993) are of the view that parenting style is the climate in the family, a set of attitudes and values rather than a set of specific parenting practices or behaviour.

The most influential proposal about styles of child rearing has come from Baumrind (1991). She proposed various dimensions of parenting viz. a) warmth or nurturance; b) levels of expectation (maturity demands); c) clarity and consistency of rules (control); and d) communication between parent and child. She posited 3 specific combinations of these characteristics namely authoritative style, authoritarian style and permissive style. Authoritative style involves parenting that is warm, responsive, involved, yet unintrusive and in which parents set reasonable limits and expect appropriately mature behaviour. Authoritarian style refers to parenting that is harsh, unresponsive, rigid where parents tend to use power assertive methods of control. Permissive style is characterized by parenting that is lax, and in which parents exercise
inconsistent discipline and encourage children to express their impulses freely. Maccoby and Martin (1983) extended Baumrind’s typology and added the fourth parenting style of ‘neglecting’ or ‘uninvolved’.

Recently, Robinson et al. (2001) derived parenting dimensions from the afore given parenting styles and they are physical coercion, verbal hostility, punitive, connection, autonomy, regulation, indulgent, rejecting, neglecting and indifferent.

Certain parenting styles are conducive for the optimal development while others hamper the path of positive growth. Steinberg (1994) found that teenagers from authoritative families showed higher self reliance and social competence, better grades, fewer indications of psychological distress, and lower levels of school misconduct, drug use and delinquency. While teenagers from authoritarian families had low social competence, self-reliance, were more aggressive; and those from neglectful families were impulsive, antisocial and quite low on school achievement.

Parent-child interaction is not static but is dynamic in nature, meaning that influences in the family system flows both ways. The theories of temperament-environment bi-directionality (Buss & Plomin, 1994; Rothbart & Ahadi, 1998; Thomas & Chess, 1977) have depicted empirical links of temperament and environment assuming that such interactions may either strengthen or modify the basic temperamental patterns. Children’s temperament elicits responses from others in the environment in ways that strengthen their behaviour. They actively seek environments that are in harmony with their predispositions (also referred to as “niche-picking”; Teglasi, 1998).

A child’s temperament also affects both the ways parents feel about themselves and the way they function as parents, e.g., easy infants make their parents feel happy, competent and successful while difficult infants have been shown to influence their parents’ self-esteem, satisfaction as parents, marital harmony and mood (Carey, 1998).
**Parenting Stress**

Recently psychologists have focused their attention not only on the difficult child but also on the stress parent’s experience rearing them, hence, terming it as *parenting stress*. The construct of parenting stress encompasses the role of the parent, the associated externally imposed demands or pressures, and the level of stress related to it (Abidin, 1995). According to Crnic and Low (2002) parenting stress refers to negative feelings toward self and toward the child or children, and by definition, these negative feelings are directly attributed to the role and demands of parenthood. It highlights the extent to which the parent fails to experience the child as a source of positive reinforcement and perceives his or her parenting as unrewarding (Philips, 2004).

Abidin (1995) developed a parenting stress model and proposed that the total stress experienced by a parent is a compilation of *specific child temperament characteristics, parental characteristics, and family situational variables*, which are all directly related to the role of being a parent. He postulated that certain children display qualities that make it difficult for parents to fulfill their parenting role. Temperament dimensions of a child like over-activity, distractibility, short attention span, avoidance, overreactions, frequent crying and unhappiness each contribute in producing parenting stress (Sidebotham, 2001). Furthermore, Abidin (1995) opined that sources of stress are related to parent’s functioning also. Presence of depression, deterioration of health, social isolation, lack of support from the spouse induces stress in a parent (Phillips, 2004). Parents, also, often experienced stress due to difficulties with sibling adjustment, sibling rivalry and competition for attention, lack of family cohesion, parent’s complaints of child disobedience, stubbornness, and pushing the limits (McGlone et al., 2002).

Parenting stress not only has a negative impact on the psychological well being of the parent, but also affects parent’s ability to practice good parenting skills which is particularly detrimental for the children’s well being (McGlone et
Al., 2002; Sidebotham, 2001). There is abundant empirical literature linking parenting stress (in particular, maternal stress) to a wide range of child adjustment difficulties (Crnic & Greenberg, 1990). Moreover, there is evidence to suggest that children of parents who are experiencing high levels of daily parenting stress may be more adversely affected than if a major life crisis had occurred in the family (Kliewer & Kung, 1998).

In order to thrive, children need caregivers who are consistent, caring, accepting, and tolerant (Barth, 2001; Lindsey, 2001). If parents are experiencing high stress, their ability to function as capable, consistent, and loving caregivers may be compromised, putting their children at risk for developing insecure attachments and behavior problems (Brown & Calder, 1999; McGlone et al., 2002). According to Abidin (1995), parenting stress is a potential barrier to effective parenting and can also lead to child abuse. It puts a child at risk for later developmental difficulties in cognitive, emotional and social domains (Zigler, 1992). Parenting stress creates an environment, which may sensitize children and have a deleterious effect on their social behaviour (Anthony et al., 2005), especially their social competence.

**Social Competence**

Social competence is the ability to act wisely in human relations (Thorndike, 1920). It has been described as “socially acceptable, learned ways of behaving that enable a person to interact effectively with other people” and refers to the individual’s repertoire of socially appropriate responses and behaviours (Gresham & Elliot, 1990). Some examples are sharing, helping, cooperating, initiating relationships, sensitively interacting with others and handling conflict situations well (Smart & Sanson, 2003). Psychologists Stewart-Brown and Edmunds (2003) construe social competence as behaviours, attitudes and understanding that support the development of good relationships; enable children and adults to be successful in tasks involving others.
Social competence is different from social desirability and social conformity (Stewart-Brown & Edmunds, 2003). It also doesn’t require an individual to be a “social butterfly”. The most important index to note is the quality rather than the quantity of the relationship (Katz & McClellan 1997). In their model of child and adolescent social competence, Gresham and Elliot (1990) proposed co-operation, assertion, self-control, responsibility and empathy as dimensions of social competence. Weare (2000) described the three key attributes of social competence as empathy, respect and genuineness.

A substantial amount of research has explored the antecedents, which promote the development of social competence in childhood. In the Australian Temperament Project, temperament dimensions of negative reactivity (volatility, intensity and moodiness); sociability (approach and withdrawal) and high levels of persistence, as well as high quality relationships with parents and peers were powerful predictors of social competence in late childhood (Prior et al., 2000). Gender too acts as a precursor of social competence. Young women were significantly higher than young men on all facets of social competence except self-control (Smart & Sanson, 2003).

Individuals who are socially competent are able to elicit positive responses from others, interact effectively with peers and adults and are adept at forming close and supportive relations. On the other hand, individuals with low levels of such skills tend to be less adroit socially and may more often experience adjustment difficulties, are aggressive and show oppositional defiant behaviour (Smart & Sanson, 2003). A higher and better-developed social competence enables youngster to cope with and overcome adjustment difficulties and is an important contributor to the subjective well being of the child.

**Subjective Well Being**

Subjective well being has long been considered a central component of good life (Park, 2004). From an evolutionary perspective, subjective well being plays an adaptive role in human survival motivating the individual to engage in exploration and to build resources that enhance coping with life’s tragedies and
stresses (Diener, 2000). Subjective well being is very important for the optimal mental health of the individual.

According to Diener (2004), subjective well being is a multidimensional construct and refers to people’s evaluations of their lives – including cognitive judgments, such as life satisfaction; and affective evaluations (moods and emotions), such as positive and negative emotional feelings. It is a multidimensional construct that includes cognitive and affective components. Diener (2000) proposes that subjective well being consists of 3 components:

- Relatively high levels of **positive affect** (elation, contentment, pride, affection, happiness and ecstasy).
- Relatively low levels of **negative affect** (guilt, shame, anxiety, worry, stress, depression and envy) and
- The overall judgment that one’s life is a good one i.e. **life satisfaction**.

Diener (2004), later, bifurcated life satisfaction into:

- **Domain satisfaction** (work, family, leisure, health, finances, self & one’s group) and
- **Global life satisfaction** (satisfaction with current life, satisfaction with past, satisfaction with future, significant other’s views of one’s life and desire to change to change one’s life).

Subjective well being has considerable stability and cross situational consistency. Although individual’s immediate emotional reactions and appraisals may change in response to ongoing life events, long term subjective well being is likely to be consistent and stable yet there are reliable individual differences (Diener, 2004).

Subjective well being has several antecedents, but amongst them temperament’s contribution is considered very significant. Heady and Wearing (1999) proposed that temperament determines individual’s basic level of happiness - the **hedonic set point**. Life events can temporarily increase or decrease the level of happiness, but individuals usually return to their basic levels of happiness. Individuals adapt to life events rather quickly whether negative or positive (Suh et al., 1996). Temperament determines how sensitive
an individual is to different life events. Along these lines, Kagan (1994) hypothesized that biologically based emotional styles - *inhibited* or *uninhibited* - channels positive and negative affects. Nonetheless, environmental factors also contribute to individual differences in subjective well being. Research suggests that encouraging authoritative parenting and effective communication among family members and focusing on emotional and instrumental support are all ways to promote subjective well being among youth (Park, 2004).

Though important in itself subjective well being contributes to a variety of positive outcomes and works as a buffer against a variety of negative outcomes, including psychological disorders. Subjective well being serves not only as a key indicator of positive development but also as a broad enabling factor that promotes and maintains mental health.

**Conclusion**

The process of development is a process of change. Developmental transitions occur throughout the lifespan, but in childhood they are more frequent and involve profound psychological transitions (Shonkoff & Phillips, 2000). Recently children’s social and emotional development has received a lot of interest. The socio-emotional processes (e.g., social competence, subjective well being) involve changes in emotions, expressions of feelings and thoughts, changes in an individual's relationships with others, thus, paving a way for change in personality.

*Social competence* and *subjective well being* have been considered as central components of good life, signifying positive growth. They are influenced by a myriad of factors both dispositional (e.g., innate abilities, needs, inherent growth pattern, individual learning styles, temperament) and contextual (e.g., family, school, community).

Amidst all these factors, temperament and parenting the child receives have been accredited to have a lot of impact on socio-emotional development. In the past few decades, researchers have accumulated substantial literature
associating temperament and parenting with social competence and subjective well being (Bornstein, 2002; Sanson et al., 2004). Recently, researchers have also assessed the role of parenting stress on development (McGlone et al., 2002; Sidebotham, 2001), although, studies relating it to social competence and subjective well being are sparse especially in India.

In accord to these insights, the present investigation focuses on the role of temperament, parenting styles and parenting stress in social competence and subjective well being.

**Need of the study**

Social competence and subjective well being are important indicators of positive development as they help promote and maintain mental health. A substantial amount of research exploring their antecedents has determined an array of individual, familial, peer and social factors which work together to promote the development of social competence and subjective well being.

At the level of the individual child, developmental scientists have investigated constructs such as temperament and have found associations between temperament and social competence as well as subjective well being. It has been found that more sociable, outgoing children; and children with good control of their emotions and attention tended to be more socially competent later on (Smart & Sanson, 2003). Temperament, is, also, believed to exert a causal role in predisposing some individuals to experience higher subjective well being and others to experience lower subjective well being (Eddington & Schuman, 2004).

Additionally environmental variables, too, play a fundamental role in child development by influencing and shaping the innate tendencies with which children come into the world (Sameroff & MacKenzie, 2003; Wachs, 2006). Amongst them high quality parent-child relationships, parenting style, parenting stress have emerged as important precursors suggesting that
contextual factors play a crucial role in acquisition and development of social competence and subjective well being (Park, 2004; Smart & Sanson, 2003).

Within the context of parent-child relationships, parenting style directly as well as indirectly influences children’s social development in a variety of ways by guiding the development of socially skilled behaviour patterns within the context of family life, and by arranging peer experience and fostering friendships which enhance children’s social competence (Smart & Sanson, 2003). Similarly, parenting style has an impact on subjective well being too. Kerr and Statton (2000) found that children who felt controlled by their parents exhibited relatively high levels of depressed mood. Authoritative parenting style has been found to be positively correlated with high levels of subjective well being (Suldo & Huebner, 2004).

In addition to parenting style, other characteristics of parent-child relationships, for instance, parenting stress may also have an impact on development. Parenting may be negatively affected when parents experience high levels of stress as parenting stressors appear to have the power to disrupt parenting practices (Crnic & Low, 2002). It may lead parents to be overwhelmed and distracted, make them less consistent sources of structure and emotional support for children, affects their behavioral responses to child negativity in the home and general parenting quality decline. This, in turn, may adversely affect children’s social and emotional development, increases the likelihood of behavior problems that may activate a cycle of negative parent–child interactions and place additional stress on parents (Webster-Stratton, 1990).

Several studies have specifically demonstrated links between parenting stress and child developmental outcome and social competence. In their research, Tan and Rey (2005) found a positive correlation between negative affect among children and their mother’s high parenting stress. Anthony et al. (2005) found a negative correlation between parenting stress and social competence.

Hence based on these views, theorists have postulated that for the optimal development of the child, there should be consonance between temperament and parenting (Buss & Plomin, 1984; Thomas & Chess, 1991).
Assenting with these views, investigations of multiplicative interactions between child temperament, parenting styles and parenting stress have become increasingly prevalent (Putnam et al., 2002). A simultaneous surge has been discerned, in the studies of social competence and subjective well being too, illustrating the prominence of these constructs in today’s world.

In India, however, psychologists have only recently turned their attention to the conceptualization and measurement of social competence and subjective well being. Consequently, research exploring these constructs is sparse.

In the recent years, however, a few researchers have appraised these constructs. Shweta and Sokhey (2005) found that certain personality dimensions like agreeableness, extraversion and neuroticism have an impact on one’s subjective well being. In a study of university students, they found that agreeableness and extraversion were positively correlated; while neuroticism was negatively correlated with subjective well being. Mathur (2007) found that children, who display high levels of social skills, typically enjoy parent child relationships characterized by positive, agreeable interactions, acceptance and sensitive behavioural exchanges.

Although, these studies highlight the concomitants of social competence and subjective well being, more researches are needed to accentuate the importance of these constructs. Also, the research on subjective well being of children and adolescents has lagged behind, as most the studies examining subjective well being have generally comprised largely adult samples (Huebner et al., 2000; Shweta & Sokhey, 2005).

Acquiescent to the recent research trends, their results and viewing the paucity of research; the present investigation endeavours to assess the relationship of temperament, parenting styles and parenting stress with social competence and subjective well being and to determine their relative contribution on social competence and subjective well being amongst children.