Chapter III

Conceptual Frame
Work of Social Competence
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CONCEPTUAL FRAMEWORK OF SOCIAL COMPETENCE

Social Competence is globally relevant to life. Educationists and psychologists are rapidly developing an increasingly clear understanding of the sorts of knowledge, understanding and skills which underlie social competence. These includes the ability to understand another’s point of view when different from one's own, knowledge of how to interpret other people’s emotional responses in favor of more carefully considered responses in social situations and the ability to adjust one's behavior to make it acceptable or rewarding to others.

Social Competence is popularly understood as “being able to get along with other people”. It involves the ability to establish, maintain and develop constructive social relationships with other people, in working contexts and in our own personal lives. Social competence is not a single attribute or ability which is present within individual to varying degrees, rather it is a constellation of knowledge, understanding, skills and emotional responses, all of which interact differently according to the situation the individual is in. Although the recently-coined notion of emotional intelligence is a useful one in many ways, like the more traditional notion of academic intelligence, it should not be taken to imply a simple, one-dimensional characteristic. As there are many quite different intellectual abilities, so there are many different aspects of social competence.

3.1 CONSTRUCTS OF SOCIAL COMPETENCE

Gullotta et.al (1990) has viewed three constructs of Social Competence

- Psychosocial Constructs
- Social Environmental Constructs
- Social Biological Constructs
Conceptual Framework of Social Competence

Psychosocial Constructs

Psychosocial Constructs of Social Competency are described on the basis of personal and interpersonal factors as follows:

(a) Personal Factors include:

- The changing physical body: The competency in developmental tasks related to changing physical body include changes that are biologically given, such as those in bone structure and timings of puberty, as well as the changing meaning given to physical constants, such as the color of skin and one’s biological gender. Other developmental tasks include the actions one can take with regard to completely handling one’s body needs, such as nutritional habits, activities related to physical fitness, the augmentation of one’s physique, and sleeping patterns to replenish energy.

- The developing cognitive structures: Cognitive structures refer to intelligence in the broadest sense, including learning specific pieces of information (both knowledge in the academic sense and “street smarts” in the pragmatic sense) and the development of logical processing and problem solving skills in general. It also includes the exercise of memory and one’s inner imaginative life.

- The expanding affective structures: Adolescence is the time of legendary urgency in sexual feelings as relevant hormones become active. Affective structures include the expansion of feelings for others beyond the egocentrism of earlier childhood and adolescence to the potential altruism of later childhood and adolescence.

- The Changing behavior repertoire: Growing physical strength and agility, combined with new social opportunities and obligations, mean that adolescents may express themselves in less than well-coordinated ways that are new to themselves and possibly surprising to the significant others.

(b) Interpersonal Factors

- Changing relationships within the family: Adolescence, as a transition period from childhood to adulthood, requires the change from child-parent relationship to young-parent relationships. This may not be as easy change for
either youth or the parents. This change has been conceptualized in many ways, such as in Ausubel’s desatellitization/resatelization in many ways, which emphasizes the systematic properties of relating –first belonging to the family system and then to a peer system, with all the requisite roles and rules.

- Changing relationships with the peers: The general trend is toward the increasing importance of peer relationship, which provides vital intimate feedback to the adolescent in times of rapid personal and social change. This trend has several streams that should be distinguished. First there is change from same-sex groupings mixed-sex groupings. Then there may be a change in pairing off, from the same-sex chum to the opposite-sex intimates.

- Social relationships: It includes changing relationships with socially significant others in the educational arena, changing relationship with socially significant others in the employment Arena and changing relationships with socially significant others in the Civic Arena.

- Intercultural changes: It incorporates the changing status of the adolescent in his or her culture and subculture, changing use of the mass media and changing physical world of the adolescents due to migration etc.

**Social Environmental Constructs**

The socio-cultural environment exerts a significant influence on the shaping of adolescents’ values, behaviors and competencies. Such changes are facilitated by a supportive environment within which an adolescent functions, namely family, church schools, alternative recreational centers and neighborhoods. This implies that those learnt social competencies will survive which have a chance of being practiced in the social environment, else they fade out or become redundant.

**Social Biological Constructs**

As analyzed by Downs the biological development of a child in a given social setting determine the socio- biological aspects of social competency. Broad biological phenomenon includes the timing of the puberty, general hormonal changes, and genital/sexual developments- and specific issues- including physical attractiveness, menarche, asynchronous growth, and late/early maturity.
3.2 MODELS OF SOCIAL COMPETENCE

A. Greenspan’s model of social competence

According to Greenspan (1981a) social competence is that portion of an individual’s perceived effectiveness in interpersonal situations and social roles which is attributable to qualities of temperament, character, and social awareness

![Diagram of Greenspan’s Model of Social Competence]

There are three general approaches to understand the social competence

(1) Outcome oriented, (2) Skill oriented and (3) Content oriented approach.

(a) The outcome oriented approach concerns the individual’s ability to attain desired social objectives. With in this approach, a distinction is made between various related abilities, such as the ability to deal with the changing world, to interact effectively with the environment, to adequately respond to the complexity of living in a society, to learn alternative behavioral responses or courses of action to attain a given goal, and to accomplish the desired affects to one’s action. The various abilities will result in particular interpersonal outcome, such as popularity, success or failure in various social roles (e.g., as friend, lover, or parent), performance in school, and success or failure in dating and marriage. The outcome-oriented approach therefore is a practical approach that serves as indicator of the individual social status. This approach functions as an excellent indicator, or index of social, interpersonal problems. It does not, however, offer any insight into the causes of those problems.
Conceptual Framework of Social Competence

(b) The content-oriented approach, focuses upon behavioral traits that may contribute to socially successful outcomes. This strategy involves four global traits/categories or competencies: (1) physical health and growth, (2) cognitive ability (e.g., IQ), (3) educational achievements, and (4) motivational and emotional variables. On factorial basis character or temperament factors are identified as niceness-nastiness and social activity-passivity dimensions, reflection-impulsivity dimension and calmness-emotionality dimension.

(c) The skill-oriented approach refers to the individual’s social awareness. Social awareness is defined by the individual’s skills, abilities and processes to gain his or her objectives, for instance, and to master the social environment; it is the ability to engage effectively in complex interpersonal interactions and to use and understand people effectively that is social cognition. These are three different aspects:

1. social awareness (i.e., role taking and social inference)
2. social insight (i.e., social comprehension, psychological insight and moral judgment)
3. social communication (i.e., referential communication and social problem solving).

B. Dodge’s model for “assessing social competence”

According to Dodge (1985), the numerous definitions of social competence have two general features in common. The first concerns the child’s responsiveness to environmental stimuli, and the second concerns the emphasis on social effectiveness. Besides these commonalities more different facets or aspects of social interaction are often emphasized such as assertion, frequency of interaction and the child’s self concept and cognitive skills. Each facet represents a component of social interaction and is relevant for an understanding of social competence.
In Dodge’s scheme social behavior is placed in a social context. The social context may present the individual or child with a specific task: “Social behavior can [then] be conceptualized as occurring in response to specific tasks”. These tasks represent coherent amounts of information and may be very complex. The child is thought to approach such a task “with a set of prior experiences which help the child to cope with its complexity”. This set constitutes a filter that enables the child to selectively process information about the situation and among other components, consists of particular perceptual strategies, social goals, and the self concept. This filter, or set of prior experiences, is termed unconscious influences. The processing of the perceived or selected information passes through six sequential steps, including

1. encoding,
2. interpretation response search,
3. response evaluation,
4. enactment, and
5. self monitoring.

6. the implementation of the selected response—that is, the actual behavioral response (i.e., behavior displayed).

The behavioral response is thus evaluated by other social agents who are either participating in or observing the specific task. These judgments (i.e., evaluation by others) constitute the final aspects of social interactions.

C. Argyle information processing model

Argyle (1985) information processing model involves a “goal” or “motivation” the perception of the situation, its translation and the selection of a motor response.

![Figure No. 3 Argyle’s information processing model](image)

3.3 DEFINING SOCIAL COMPETENCE

It is generally agreed that social competence is domain specific and developmental. Yet defining social competence is not an easy task “no consensual definition exists. Definitions vary according to their usefulness to differing theories and approaches. Typically definitions falls into two main category: Global, generalized definitions and definitions which consider specific components and skills (competences) which serve as indicators of social competence. Definitions also differ according to a focus on either internal processes and behaviors or external outcomes. The effectiveness of social behavior can be determined within the context of a particular social environment including communities, peer groups, families and cultures (Oppenheimer, 1988), so both individual behaviors and social outcomes are important considerations in defining socially competent behavior.
The following indicators can be considered component elements of social competence:

- Effective communication in various social relationships
- Social problem solving and decision making ability
- Constructive resolution of conflicts
- Effective use of basic social skills, e.g. starting a conversation
- Accurate identification and understanding of the social cues/rules present in one’s social environment
- Self control and self monitoring of one’s behavior and how it impacts others’ perception of self efficacy
- A belief in the capacity of influence one’s social environment
- Respect for individual difference based on gender and ethnicity
- Ability to solicit and utilize social support
- Effective coping ability
- Future-orientation, e.g. sitting and working towards goals
- Sincere interests in the well being of others shown through socially responsible behavior
- Empathy and perspective-taking ability
- Ability to initiate and maintain relationships
- Maintaining an attachment to school
- Ability to distinguish between positive and negative peer influences

A major determinant of social behavior and adjustment is the “way in which one reason about other people and about social situations” (Pelligrini, 1985). Social competence defined by social effectiveness is related to cognitive competencies such as problem solving and social–cognitive competencies.

Gresham (1986) distinguishes between social competence and social skills. According to him, social competence is an evaluative term based on judgments that a person has performed adequately,” While social skills are “specific social behaviors that an individual exhibit to perform competently on a task”.

44
The most general definitions of social competence refer to adaptive functioning in which environmental and personal resources are used to achieve desirable developmental outcomes within interpersonal contexts (Water & Sroufe, 1983). Individuals who develop these capabilities often possess sound judgments to benefit themselves and others in social situations. Any general definition of social competence must also consider the impact of the person on the social environment as well as the influence of the social contexts on the individual (Dodge, et.al. 1986). Hence there is a strong case for including teaching of social competence to school students.

Among general definitions, Zigler and Ticket's (1978) proposal that social competence is determined by the extent to which societal expectations have been met and whether or not information is provided about the level of self-actualized experience. Other Commentators such as Foote and Cottrell (1955) describe interpersonal competence as the ability versus the inability to engage in normal human interaction. In the similar vein, White (1959) defines competence as the organism's capacity to interact effectively with its environment. Finally, Waters and Sroufe (1983) describe competent individuals as those who make use of environmental and personal resources to achieve good developmental outcomes.

According to atomistic approach social skills such as knowing how and when to shake hands and follow directions in various interpersonal settings (Burns & Farina, 1984) are primary indicators of social competence. Perhaps the best definitional approach, however, recognizes that social competence is composed of many distinct components requiring a combination of general and specific strategies.

According to Gullota et al. major components of social competence consist of (a) internal or cognitive processes, (b) a balance between sociability and individuality, and (c) social skills with references to peer relationships. Internal or cognitive capacities serve as underlying bases for social skills that assist adolescents in establishing and maintaining positive interpersonal relationships. Specifically such capacities include positive self esteem, internal locus of control, social perspective
taking, and interpersonal problem solving. Positive self esteem functions as a basis for socially adaptive behavior by providing adolescents with sufficient self-confidence to engage in and expand their social relationships. An internal locus of control encourages self-initiative and the development of leadership qualities in interpersonal setting. Social perspective taking (i.e., social role taking and empathy) encourages adolescents to understand and become sensitive to the feelings, intensions, and the abilities of others. Closely associated with this is moral development. Prosocial responsiveness of this kind promotes an awareness of others needs, an understanding of the impact of one’s actions on others, and a willingness to accommodate one’s behavior accordingly. Finally social adaptation also requires the development of interpersonal problem solving skills. Socially competent person is more capable of being sensitive to interpersonal problem situations, generating alternative solutions, planning for the attainment of interpersonal goals, weighing consequences in terms of their effectiveness and social acceptability and perceiving cause and effect relationship in interpersonal events.

The second major component of social competence is paradoxical but necessary balance between the individuality (and autonomy) and sociability (or togetherness). These seemingly contradictory aspects of human experience are actually complementary functions that contribute to interpersonal competence during all phases of life course. Adolescents who are socially adaptive know themselves well enough to act independently while affiliating with and accommodating their behavior to the needs of others.

A third major component of social competence, the social skills of adolescents in reference to peers, refers to the application of previously specified interpersonal resources in a successful manner with age mates. Such an approach focuses on the behavioral repertoire that adolescents acquire for adaptation and acceptance beyond family boundaries in reference to peers.
Schafer and Edgerton (1983) propose a conceptual model of academic competence, social adjustment and psychosocial development that integrates social and emotional behavior, motivation, approaches to learning, and cognition.

Reschly and Gresham (1981) suggests that social competence is comprised of both adaptive behavior i.e. independent functioning skills, physical development, academic competencies and language development) and social skills i.e. interpersonal behavior, self-related behaviors, and task related behaviors).

Social competence has also been examined in relation to outcomes (success in social roles), and to behavioral traits that are thought to be predictive of positive social behavior (Greenspan & Granfield 1992).

In fact, most definitions of social competence are considerably more circumscribed. Typically, these definitions incorporate social skills, attainment of social goals, maintenance of interpersonal relationships, and ability to make appropriate social judgments and act accordingly.

Social competence will have cultural limitations. Societies and ethnic groups may vary widely in the extent to which specific aspects of social competence are valued and encouraged in the young (Baumrind, 1978).

Social Competence is development in nature to the extent that behavior considered adaptive during early adolescence may change dramatically in meaning by late adolescence (Healy & Stewart, 1984).

Social competence is best determined within the context of specific interpersonal situations (Goldfried et. al., 1976).

Gender role expectations continue to prescribe that some aspects of social competence differ for males and females (Baumrind & Giligan, 1982). Studies continue to demonstrate that gender differences occur on several dimensions of social competence, including autonomy, conformity, connectedness, achievement, self esteem, and peer relationships (Baumrind et al., 1980)
According to Peter S. Dobrowolski, social competency is inhibited by a complex series of factors which vary from individual to individual: these problems are characterized by a lack of linguistic sophistication, a lack of ability to accurately interpret nonverbal social cues such as body language, and the inability to understand jokes and sarcasm especially if slight vocal changes result in more than one meaning.

Anderson and Messich (1976) reported 29 competencies encompassing all areas of development, prominent among these are:

1. Differential self concept & consolidation as identity.
2. Concept of self as an initiating and controlling agent.
3. Habits of personal maintenance and care.
5. Differentiation of feelings and appreciation of their manifestations and implications.
7. Positive and affectionate personal relationships.
8. Role perception and appreciation.
9. Appropriate regulation of anti social behavior.
10. Morality and prosocial tendencies.
11. Curiosity and exploratory behavior.
12. Control of attention.
13. Perceptual skills.

Timothy A. Cavell Texas viewed social competence as a multilevel construct made up of social adjustment, social performance and social skills.
Carter Bayton in Life magazine, 1991 has given following social competencies for success in life

- Respect for self & others (empathy, compassion)
- Self discipline and responsibility
- Self-confidence and courage
- Desire to cooperate and contribute
- Communication and problem solving skills
- Motivation to learn
- Perceptions of capability
- Honesty
- Sense of humor
- Happy, healthy self-esteem, flexible, resilient, curious

Hence the dimensions of social competence sorted from the examination of all the definitions for the present study are Personal Competence, Interpersonal competence and Communication Skills.

1. Personal Social Competence

On the personal level of adolescent’s social competence, a positive self image would seem to be a salient attribute. Moreover, that self-image would likely correlate highly with other measures of the self esteem, including self concept, self consciousness, and self esteem. Also a socially competent person would likely to exhibit a host of positive personality attributes. Socially competent adolescent would posses a reasonable awareness of the physical self, including body awareness and satisfaction with physical features including weight and height. Hence this dimension includes self-efficacy and self-control.

2. Interpersonal social competence

The socially competent persons would seem to posses good relationships with peers, family members, and the school system. Social competence is the range of
Conceptual Framework of Social Competence

interpersonal skills that help youth integrate feelings, thinking, and actions in order to achieve specific social and interpersonal goals (Caplan et al., 1992; Weissberg, Caplan & Sivo, 1989). These skills include encoding relevant social cues; accurately interpreting those social cues; generating effective solutions to interpersonal problems; realistically anticipating consequences and potential obstacles to one's actions; and translating social decisions into effective behavior (Elias et al., 1994).

3. Communication Skills

The socially competent person would seem to possess effective communication in various social contexts.