SOCIAL COMPETENCE: IMPERATIVE FOR ADOLESCENTS

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ABSTRACT

One of the most important investigated areas of human social development is social competence, which is increasingly recognized as a fundamental source of school readiness. In schools, social competence is related to effective interaction, emotional health, peer acceptance, and capability as established, for learning motivation, school readiness and social adjustment. The purpose of this paper is to discuss the various behavioral problems and the outcomes on social life and school performance, Intervention and prevention strategies for healthy development of a child. Social development of youth is also related to future success there is an analysis of research evidence from the pedagogical perspective that being a socially competent behavior are well adjusted in society, peer and family. Socially competent children are found to be widely accepted in social groups and virtually don't have behavior problems. Behavioral problems of children in their social adjustment and social interaction skills are the result of insufficiency of social competence such as co-operation, empathy and conflict resolution skills. Review of literature helps us to understand a need for further research factors that's lead to social skill and social competence of a child and how to make a child socially compatible.

KEYWORDS: Psychosocial Problems, Social Competence, School Readiness, Social Life, Conflict Resolution, Emotional Health

INTRODUCTION

Adolescence is a period of transition: biological, psychological, social, economics. It is an exciting time of life. The various aspects of adolescence have different beginning and different endings for every individual. Every young person is a child in some way, an adolescent in other ways, and an adult in still others. Society's redefinition provokes a reconsideration of the young person's capabilities and social competencies. As the young person's treatment by society changes, so do relationships around the home, at school, and in the peer group. Changes in social status also permit the young person to enter new roles and engage in a new activity for that they have to be prepared for some social abilities.

THE CONCEPT OF SOCIAL COMPETENCE

As the social ability and interpersonal skill of an individual (Eisler, 1970) social competence have defined as effectively dealing with an 'individual environmental factors, or successfully meeting a personal-situation interaction'. Goldfriend and D'zurilla (1963) considered it as adequacy or effectiveness which an individual is proficient of to respond to the various complex situations that confront him. Social competence broadly consists of different social abilities, habits, skills, and knowledge (Argyle, 1999). According to Schneider (1993), social competence by strengthening one's interpersonal relationships allows one to engage in an appropriate social behavior, that's not hurtful to others.

Gresham and Reschly (1987) define social competence as social skills and adaptive behavior. Social skills consist of three sub-aspects: Task-related behaviors, self-related behavior, and interpersonal behaviors. Task-related behaviors-cover following instructions/directions, paying attention to warnings, fulfilling one's responsibilities, and working independently; self-related behaviors- cover ethical behavior, expressing one's own feelings, adopting positive attitudes toward one's own self and Interpersonal behaviors- deal with speaking skills, cooperative behaviors, accepting authority and play behaviors. Adaptive behaviors contain physical development, academic competences, self-governing functioning skills, and language development of children and young people (Gresham, 1988). Sergin and Givertz (2003) found that any insufficiency or disturbance in the process of acquiring skill may affect the outcome of social skills or social competence which may lead to anxiety, frustration, and isolation of the individual. Evidence confirms that the optimal use of social skills is necessary for the preservation of social, psychological and occupational well- being.

SOCIAL COMPETENCE AND BEHAVIOR PROBLEMS

Empirical studies indicate that social competence also leads to social gains but Social skill shortfalls are connected to many emotional and behavioral problems. The word psychosocial used to describe an aspect of development that is both psychological and social in nature. Psychosocial problems during adolescence typically distinguish among three categories of problems: substance abuse, internalizing, and externalizing (Achenbach&Edelbrock, 1987). Substance abuse is the maladaptive use of drugs, including legal drugs such as nicotine and alcohol; illegal such as marijuana, cocaine and prescriptions drugs such as stimulants and sedatives. Internalizing are those in which the young person's problems are turned inward and manifested in emotional and cognitive distress, such as depression, phobia, and anxiety. Externalizing are those in which the young person's problems are turned outwards and manifested in antisocial aggression, delinquency, and truancy. Some adolescents also have problems that do not fall in these categories such as academic problems (poor attention, low motivation, peer problems and poor social skills (Wangby, Bergman, & Magnusson, 1999). Another distribution of problem behavior includes 'troubled' behaviors (withdrawal and nervousness) 'troublesome' behaviors (acting out and conduct disorders) and issues of both under control (aggressive, inattention and impulsive) and over control (hamper and dependent) behaviors (Benson, 2009). This article focuses on Internalizing and externalizing problem behavior only and the related outcomes on an adolescent's social life and academics performance.

The Factors Affecting Internalizing and Externalizing Problem Behavior in Adolescents

Research shows that long-lasting delinquents come from disorganized families with hostile, inept, or neglectful parents who have mistreated their children and have failed to impart them proper standard of behavior or psychosocial foundation of self- control (McCord, 1996; Coughlin &Vuchinich, 1996; Laub& Sampson, 1995; Haapasalo& Tremblay, 1994; Miller, Cowan, Cowan, Hetherington, &Clingempeel, 1993). The family factors may bring about chronic delinquency because of genetic factors, environmental influences or both. Studies have shown that genetic influences on all types of antisocial behaviors, aggression are especially heritable (Deater-Deckard &Plomin, 1999; Rutter, 1997). And antisocial behavior in the child provokes further parental ineffectiveness and association with other antisocial children, aggressive children often get up in a vicious cycle (O' Connor, Deater-Deckard, Fulker, Rutter &Plomin, 1998; Bank, & Patterson, 1991). There is also considerable evidence that apart from family factors, there are individual characteristics that have significant potential delinquent youths from their peer at a relatively early age. First and important, children who become antisocial- those who engage in violence have histories of aggressive and antisocial behavior that

were identifiable as early as age 8 or 9 (Farrington & West, 1991; Hamalainen & Pulkkinen, 1996; Stattin& Magnusson, 1989). Second studies show that many children who become delinquents have problems in self- regulation; they are more impulsive, less able to control their anger, and more likely than their peer to suffer from hyperactivity or it is technically known as attention deficit (Colder &Stice, 1998; Farrington, 1989; Nagin& Tremblay, 1999). Third adolescents who become delinquent are more likely than their peers to score low in standardized tests of intelligence and to perform poorly in school (Farrington, 1989; Fergusson &Horwood, 1995). Finally, many aggressive adolescents have a history of poor relationships with a peer; the problem with peers is an especially strong predictor of antisocial behavior among boys (Agnew &Brezina, 1997; Stattin& Magnusson, 1994). The cognitive aspects of antisocial behavior indicate that especially aggressive teenage are likely to suffer from a tendency towards what has been called a hostile attritional bias (Dodge, Price, Bachorowski, & Newman, 1990; Lochman& Dodge, 1994). Internalizing problems are likely to result from interacting environmental conditions and individual predisposition, rather than a set of factors alone first depression is more common among adolescents from families characterized by high conflict and low cohesion, and it is higher among adolescents from a divorced home. Second, depression is more prevalent among adolescents who are unpopular or who have poor peer relationships. Third depressed adolescents report more chronic and acute stress than do non-depressed adolescents. These psychosocial factors may both contribute to and exacerbate the development of negative cognitive sets (Garber, Robinson, &Valentner, 1997). There is also evidence that academic difficulties are correlated with depression, especially among adolescents (Chan, 1997; Greenberger et al, 2000). Aggressiveness, hyperactivity, and intelligence are relatively stable traits over childhood, and there is a great deal of continuity in behavior problems in adulthood. Research that has followed an individual from childhood through adolescence and into adulthood find very high correlations between behavior problems at one point in time and antisocial behavior later in life (Farrington, 1991; Fergussion et al 1996a; Robins, et al 1985).

SOCIAL COMPETENCE AND SOCIAL LIFE

There is a correlation between low social competence and behavioral problems, Pope and Ward (1995) found that children who have lower social competence reported social anxiety and loneliness, whereas children with greater social competence have more relations with peers. Socially competent children are better able to be familiar with emotions in facial expressions (Leppanen&Hietanen, 2001; Wocadlo&Rieger, 2006). Children with high social competence are also more expected to have mutual closeness (Vaughen, Hogan, Kouzekanani, & Shapiro, 1990).

Linsey (2002) revealed that children who had at least one reciprocal friendship were rated as more socially competent and was more liked by their peers. Zsolnai (2002) discovered that highly developed and socially competent children have behavioral qualities of making a social network and perform a role as an active participant in these networks. Tariq and Masood (2011) investigated the relationship between parental promotion of peer relations, social competence and loneliness among adolescents and found a positive relationship between parental promotion of peer relations and social competence. Though loneliness was negatively related to both variable. Mcgaha and Fitzpatrick (2005) conduct a study to discover an association between loneliness and interpersonal competence. Loneliness was positively correlated with low levels of interpersonal competence. Henricsson (2006) emphasized a relationship between loneliness and low social competence. Socially competent individuals are accepted in social groups also. Children with the quality of cooperativeness, socially assertive, tolerate with diversity, helping behavior and friendly attitude demonstrate a higher

psychological resilience and are to be expected sound, in social and academic areas. There is a positive relationship between the absence of social competence and negative behaviors and problems in their social interaction skills (Vahedi, Farrokhi, &Farajian, 2012).

(Knapp, 2001) Developmental theories identify the significance of social interactions in the lifetime development of human's relation. Social competence was found to have a significant impact on the development of children's social interaction in the future (Fabes, Gaertner& Popp, 2006; Rubin, Bukowski, & Parker 2006). Vahedi, Farrokhi, and Farajian (2012) examined the behavior problems and social competence specifically regarding the childhood period of (2 to 6) year's children and found that significant negative correlation. It means children having fewer behavior problems were found to have greater social skills and girls found more socially competent than boys. The fact behind that boys was more physical risk-taking, actively engaged in rough and tumble play and exhibit more aggression towards peers or age mates than girls. Ladd (2000) investigated that children who could not develop any social competence skills during the first six years of their lives are more possible to exhibit emotional and behavioral problems and become a socially incompatible person in adulthood.

Prosocialness, one of the behavioral dimensions of social competence, is described as a voluntary action intended to benefit the others (Schneider, 1993). Prosocial behavior reflects in helpfulness, sharing, cooperativeness, and conflict resolving, being empathetic with other, all these factors help to promote social networks contributing to academic outcomes. Altay and Gore (2012) explored the relationship between social competence and prosocial behavior of boys and girls, found that girls were more socially competent and show more prosocial behavior than boys. Girls behave more cooperatively with the peer; share their belongings with others than boys do, moreover boys show verbal and physical aggression to their peer. Moreover, a prosocial inclination restrains violence both directly and by engaging moral self-punishment for harmful conduct, (Bandura Barbaranelli, Caprara&Pastorelli, 1996). Caprara, Barbaranelli, Pastorelli, Bandura, and Zimbardo (2000) revealed prosocial and aggressive behaviors in early childhood were predictors of academic achievement and peer relations. Results show that prosocial behavior had a strong positive impact on later academic achievement and social preferences. But early aggression had no significant effect on both academic achievement and social preference. Displaying aggressive behaviors might further lead to the spoiling of peer relationships.

In addition to social skills and peer relationships, children's temperament also has an impact on children's social competence (Rubin, Bukowski, & Parker, 2006). Sanson, Hemphill, and Smart (2002) put in plain words temperament as individual differences in ones' behavioral approach that is apparent from early childhood. Temperamental characteristics of a child play an important task in building social competence and other social behaviors in children (Fabes, Gaertner& Popp, 2006). Children lacking in social ability show more behavioral problems, lower school success, and peer rejection, than those with sufficient social competence (Bierman, 2004; Chen & Jiang, 2002; Malti, 2006). Thus, it is clear from various researches that lower social competence leads to negative outcomes such as peer rejection, troubled peer relations, loneliness, and inadequate social behaviors internalization and externalization.

SOCIAL COMPETENCE AND SCHOOL PERFORMANCE

The enormous role of social competence in interactions and human relations accounts for making it educational purposeful for all students irrespective of the type of education and socio-economic background (Dam &Volman, 2007). Children are expected to gain social competence in addition to the academic knowledge they achieve when they go through

formal education (Rose-Krasnor, 1997). Chen, Huang, Chang, Wang, and Li (2010) explored the role of aggression in academic achievement and the development of social competence. Found that academic achievement and social competence contribute to the development of each other but not aggression. Children who display aggressive behavior rejected by the peer, have learning problems, as incompetent to be perceived by adults. Green, Forehand, Beck, and Vosk (1980) explored that children with high academic achievement were more liked by peers, viewed as less deviant, to be adaptive, less rejected, and engaged in positive social interaction with a peer than a student with low school achievement. The socially responsible behavior might be valued by scholastic outcomes. Moreover, intellectual and social are separate and concurrent outcomes that students achieve at school.

Zsolnai (2002) examined the social competence components such as dominance, cooperativeness, politeness, dynamism, scrupulousness, perseverance, openness, external-internal control attitude and attachment etc. that could affect academic achievement and learning motivation and found the strong correlation between academic achievement and social personality factor. Social competence is also related to the school system and the high and low learning outcome. Malik and Shujja (2013) explored the relationship between academic achievement and social competence. Findings indicate that academic achievement was overall low but the social competence of government school children was high than private schools children. Both girls and boys of high achiever's group had a significant difference in social competence with respect to low achievers' group.

(Konold, Jamison, Stanton-Chapman &Rimm-Kaufman, 2010; McClelland, Morrison & Holmes, 2000) Social competence is one of the significant psychosocial factors that affect the academic achievement of adolescents. The relation between academic achievement and social competence are investigated in both longitudinal studies (Konold, Jamison, Stanton-Chapman &Rimm-Kaufman, 2010; Magelinskaite, 2016). and cross-sectional studies (Malik &Shuja, 2013; Wentzel, 1991). Children who have social competency skill create a network of strong social support that is helpful in achieving higher academic results (Caprara, Barbaranelli, Patorelli, Bandura, &Zimbardo, 2000). Magelinskaite, Legkauskas, Kepalaité (2016) investigated the aspects of social functioning linked to academic achievement. Both learning-related social competence and interpersonal social competence were significantly associated with academic achievement. Children who have a higher score in interpersonal social competence were found more popular with among peers and have larger communication networks which provide social support when he/she facing problems related with learning or it might be strengthened efforts of keeping up with high achieving classmates. The close student-teacher relationship depends on open communication, effective, interaction, and warm feelings between child and teacher. Socially developed children were found have positive attitudes towards school learning and prone to create a close relationship with their class teacher which resulted in better school achievement and less school anxiety Bustin (2007). It is clear from various studies that social competence is an important aspect which is a prerequisite for academic achievement, healthy student-teacher relation, to get social support, social adjustment. Socially accountable behavior may also value educational outcomes.

PREVENTION AND INTERVENTION TO IMPROVE SOCIAL COMPETENCE

One of the essential attributes, of social skills is that they are acquired through learning (Argyle, 1999; Dowling, 2001; Webster Stratton, 2002). Moreover, children's social learning theory explains that it is influenced most by reinforcement, imitation, and modeling (Bandura, 1986). Caprara, Barbanelli, Pastorelli, Bandura, and Zimbardo (2000)

distinguished the importance of social development has for educational learning process also. Maladaptive and other hostility behaviors create socially alienating conditions and undermining academic pursuits that take away the aggressive child from academic successes. Ryan and Patrick (2001) when students believe they are motivated to know help classmates, interact with the teacher during lessons, their views are respected; when children perceive their teacher as supportive and understandable, they have a propensity for in more adaptive patterns of learning. For adolescents' social and emotional development' various ways have been found useful in promoting the adaptive functioning of individuals.

Different Approaches for the Development of Social Competencies in a School Setting Within Traditional Methods of Teaching Incorporating Social Development

There is a number of lesson plans available that combine with traditional direct instruction lesson format center on developing social competency. Huitt (2009, 2010) worked with the comprehensive approach recognized in the 'Brilliant Star framework' by practicing to develop lessons that integrate academic lessons with more holistic objectives with classroom teachers. Making friends and interaction with family members are the main focus of lessons' dealing while developing social competencies.

Developing Academic Lessons and Units that Make use of an Instructional Approach, A Focus on Developing Social Competence

To develop a 'method of instruction' is another approach that concentrates on increasing social competence with academic competence, through events of instruction. 4MAT system developed by McCarthy (2000) that deals with different learning styles and brain dominance of students include 'eight steps' of design (Huitt, 2009). Each lesson that focuses on four different types of learners: (1) Why? (2) What? (3) How? And (4) If? Is comprised of two instructional proceedings. The inventor makes use of a wide range of social interaction during the course of each lesson. Another remarkable example is 'Arts program' it reorganizing instruction that focuses on both developing more holistic competencies as well as academic learning. The Artful Learning (an integration of skills) Model developed by Leonard Bernstein, with a holistic vision of individual development similar to that of CASEL (Elias, & Arnold, 2006; Cohen, 2006; Zins, Weissberg, Wang, & Walberg, 2004).

Developing A Comprehensive Approach to Instructional Design

There are some programs that take a holistic objective of human development; these programs believe in developing lessons, units, and assessment of the development. Example Habits of Mind program' developed by (Costa, Kallick 2000, 2008; Costa, 2009) defined 16 habits of mind essential for adolescence period and childhood also. From which two relate to competencies in the social domain (think interdependently, reflect and communicate with accuracy and clarity) and three recounts to competencies in the affect/emotion domain (respond with awe and wonderment, empathy and listen with understanding, and find humor). Their method is similar to the SEL approach developed by CASEL (Zins, Weissberg, Wang, & Walberg, 2004; Cohen, 2006; Elias, & Arnold, 2006) and the character development program of (Narvaez 2006).

Directly Teaching Social Skills

In order to prepare a learner to work effectively in cooperative groups, directly teach social skills. In Contra Costa County The Department of Education, California has provided lessons covering skills used in classrooms such as (being a part of a group discussion listening to others carefully, arguing respectfully and, expressing empathy), basic skills like (reading body language and introducing one's self), and interacting skill such as (agreements, completing) an outstanding means.

'Wings for Kids' another organization provides lessons that addressing social competence such as becoming socially aware, expressing emotions, coping with anger and stress (Huitt, & Dawson, 2011). Research has established that measures which have been found to increase social competence lead to a decrease in behavioral problems (Galindo, & Fuller, 2010). Helping behavior is greatly influenced by the child's intensity of empathy or Staub (1971) role- play, and role switching has an empathy-Boosting effect. Character education program: as part of healthy development students need to increase their social competence (Butts &Cruzeiro 2005). Social competence is an integral developmental element throughout childhood (Engels, Finkenauer, Dekovic&Meeus, 2001). To supplement or complement the developmental endeavor at home character education in school is pertinent because of the grouping of students, teachers and other personnel together in the classroom. This grouping would provide an opportunity for the learning and practice of social competence. Promoting students' social competence is a designated objective and established the merit of character education (Berkowitz & Bier, 2008; Miller, Kraus &Veltkamp, 2005). Recognizing the contribution of character education is helpful to meet an early adolescent need for strengthening social competence, (Miller, Kraus &Veltkamp, 2005; Cheung &Lee 2010) student who had engaged more seriously in the programme one year before would be more socially competent.

For the constructive development of the adolescent's emotional, social and moral competencies are considered necessary. Social and emotional competencies are related with (Chae& Lee, 2011; Willams&Galliber, 2006) psychological well-being, positive accommodative outcomes such as school, home and peer adjustment among the adolescents. Social and emotional development of adolescents can be improved through experience and sufficient training programme. Devassy and Raj (2012) conducted an experiment on the influence of (MBREBC) Mindfulness-Based Rational Emotive Behavioral Counseling on the social development of adolescents. The results suggest that the scores on peer social competence, social forethought, school competence, and compassion of the participants after the intervention were higher as compared to the scores before given the treatment. It was also found that the ability such as adequate expression, control of emotions, sufficient depth of feeling, ability to cope with the problem and emotional stability have increased after MBREBC counseling programme. Shnyrenkov and Romanova (2015) explored that immersed development of social competence is possible through a special education programme "Psychology of social interaction" this programme prepare the students for effective interpersonal and interaction in everyday life. Achievement of positive results in the formation of social competence among students allows us to introduce a more widespread approach in educational discipline among students. Thomas and Swamy (2015) conducted an experiment on holistic education and its impact on the social competence of undergraduate students and found that holistic education training intervention statistically significant impact on the social competence of the students. Pendry, Alexa, Annelise, Smith Stephanie and Roeter (2014) examined the effects of (EFL) 11-week equine facilitated learning program on adolescent's behavior and social competence and found that social competence of children's significantly increased after this training program Ateş (2016) examined the effect of

solution-focused brief group counseling upon adolescents perceived social competences and found levels of social competence significantly increased perceived social competence of teenagers.

Efforts are also made to prevent adolescents antisocial and depression since the strategy may be more effective than delivering treatment to individuals once they have become depressed Primary prevention approaches emphasize teaching all adolescents social competencies and skills that will help them cope with pressure (Weissberg, Caplan, & Harwood, 1991). And secondary approaches aim at adolescents who are believed to be at high risk of developing depression (Beardslee et al., 1992)

CONCLUSIONS

Developing social competence skills during preliminary phases, increase children success in collective environments at home and outside. More importantly, attaining social competence in early childhood may reduce the probability of these children showing emotional/behavioral alteration such as internalization and externalization behavioral problems, anxiety, aggression. School influence adolescents development through the formal academic curricula and exposure to teacher or peer who emphasize academic achievement motivation to learn, skill development, self – improvement, and attitudes towards responsibility. Socially competent students are more successful in adjustment at home, school, and community. Social development is playing a vital role in academic achievement also, if the children are delayed in social development they are more prone to take on behavior like aggression, peer rejection maladaptive behavior, this makes him/her detract from academic success.

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