The Assessment of Psychological, Emotional, and Social Development Indicators in Middle Childhood

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Our charge in this chapter is to consider indicators of psychological, social, and emotional development in middle childhood. Middle childhood is the period from about age 5 or 6 to age 11 or 12. Over a century ago, Freud relegated middle childhood to the status of an uninteresting "latency" period between the psychosexual developments of the early years and the emergence of adult sexuality at puberty. In recent years, both scholars and policymakers have rekindled interest in middle childhood as a period in which children develop or fail to develop the foundations for adult competence, responsibility, and independence. That change is reflected in the editor’s decision to commission chapters for this volume that focus specifically on middle childhood—a change from the last volume on child indicators (Hauser, Brown, & Prosser, 1997), in which the age span was divided into early childhood and adolescence.

We begin with a discussion of the important developmental tasks or changes in middle childhood; then we present some basic assumptions that guided our selection of constructs. Next, we identify the seven constructs or domains that we believe comprise central features of psychological, emotional, and social development in middle childhood. Within each construct, we identify and evaluate current status indicators, including how these indicators are measured, and provide suggestions for future indicators in domains where they are especially lacking or underdeveloped. We end with a discussion of the domains
and indicators that are most underdeveloped and make recommendations for future assessment.

DEVELOPMENTAL TASKS OF MIDDLE CHILDHOOD

Many classic developmental theories define stages or qualitative changes in development, the most widely influential perhaps being Erikson's (1950) theory of psychosocial development. Erikson's theory described the crucial developmental task in middle childhood as developing a sense of industry—mastering the basic tools and skills needed for adult life in one's culture. The hazard during this period is a sense of inferiority if children's abilities and tools are inadequate or if they despair of becoming productive in ways that are valued in their society. Other developmentalists (e.g., Aber & Jones, 1997) have proposed the ability to regulate behavior and emotions, skills in negotiating conflicts and solving interpersonal problems, and a sense of competence in both social and academic domains as salient tasks in this age period. Using these ideas, we organize the tasks of middle childhood according to the four rubrics discussed below, keeping in mind the important role that the contexts to which children are exposed (e.g., schools, home environment) play in mastering these developmental tasks.

Self-Concept, Motivation, and Well-Being

The concepts of industry and inferiority are metaphors for positive and negative aspects of self-concept, motivation, and well-being. For most children, entry into formal schooling between ages 5 and 7 marks the beginning of new experiences of evaluation and comparison to others. In the subsequent years, children learn to evaluate themselves in ways that reflect the standards of the society around them, making judgments about whether they are fulfilling their own or others' expectations for competency. Although academic achievement is central for many children, feelings of competence can result from acquiring the fundamentals of many skills, including sports, playing musical instruments, visual arts, social and leadership skills, computer-based activities, and languages. Perceived competence composes part of a network of motivations and beliefs that include values for attainment of goals, an orientation to the future, attributions about the reasons for success and failure, and a sense of self-efficacy—all of which are positive indicators (Eccles, Wigfield, & Schiefele, 1997).

Children who fail to attain at least some of the competencies they and others consider important are vulnerable to low feelings of self-worth, high levels of anxiety (particularly about failure), and depression. Although there may be precursors of these aspects of psychological well-being in the preschool years, middle childhood is the period in which they are first manifested in ways that can be reliably observed and measured.

Self-Regulation

During middle childhood, children gain a great deal of independence, become increasingly involved in activities and relationships outside the home, and take on increasing responsibility for their actions. By the end of this age period, most children can be safely left alone without adult supervision. With increasing freedom, children need to develop skills in regulating their own behavior.

One often-ignored feature of increasing independence is children' control over their own environments. For example, parents have considerably less influence on children's use of television and computer games in middle childhood than in the preschool years (Bickham et al., 2003; Scarr & McCartney, 1983) argued that children actively influence their environments by "niche-building," that is, by choosing places, people, and activities. Bandura (1976) described a process of reciprocal determinism by which children choose settings; settings encourage children to practice particular behaviors; practice affects skills and preferences; and skills and preferences influence subsequent choices of environments. For example, a child who chooses to go to a recreation center on the weekends might be exposed to several different sporting activities. After practicing each sport, she may realize that she is most skillful and/or most enjoys playing basketball, and thus in turn joins the basketball team at her school. We argue, therefore, that children's time use and activities are indicators of child attributes as well as context.

Social Competence

Social competence includes skills at initiating and maintaining social interactions and at dealing with and resolving conflicts. Changes in social and moral reasoning in middle childhood form one basis for developing social skills. Social reasoning includes the ability to reflect on oneself, the accurate perception of others' intentions, thoughts, and feelings; and the ability to generate alternative ways of dealing with social situations. Because the United States is increasingly multicultural, competence in relating across cultures, languages, and ethnic groups is important for the well-being of individuals and of the larger society. Some years ago, Harrison, Wilson, Pine, Chan, and Buriel (1990) proposed that minority children needed to develop cognitive flexibility and skills at recognizing that different contexts require different behavior. We argue that such abilities are important for all children in a multicultural society.

Relationships

Most developmentalists agree that relationships with one or both parents form an early base for emotional well-being. Relationships are different from social skills. A child can be charming but have no close friends. Adult preoccupation with potential negative influences of peers
may lead to undervaluing the positive contribution of peer relationships to well-being. The failure to form friendships can portend more serious problems in adolescence and later life. Hence, it is important to measure children's friendships.

With those cautions, we also note that peer influences increase dramatically during middle childhood; conformity to peers reaches its peak around age 12 or 13. Children in middle childhood also spend increasing amounts of time with peers and friends. Hence, the values and behaviors of a child's peers are one important context and, at the same time, an indicator of the child's own values and behavior.

Last, children's relationships with adults outside their families become increasingly important during middle childhood. Children spend less time under their parents' supervision during this time and become increasingly under the supervision of-and form relationships with-other adults, such as teachers, coaches, church leaders, and activity instructors. These relationships are important to assess.

ASSUMPTIONS ABOUT THE GOALS OF DEVELOPMENT

The choice of indicators rests on assumptions about the goals we as a society hold for our children. What do we consider important? What do we want for our children now and in the future? In this section, we identify some of the assumptions guiding our selection, drawing on some of the criteria for indicators proposed by Moore (1997). We recommend that indicators should: include positive as well as negative outcomes; strike a balance between emphasizing the child's present well-being and future as an adult (well-becoming); recognize that social behavior is context specific, allowing for assessment in multiple contexts and from multiple informants; be appropriate for a multicultural population; and be comprehensive across several domains of development.

Balance of Positive and Negative Outcomes

Childhood indicators assess negative behavior more frequently than positive, in part because there is less agreement regarding the behavior and characteristics that make up positive development (Moore, 1997). However, the absence of problems does not necessarily mean that children are doing well. There is abundant evidence that negative attributes (e.g., aggressiveness) are not simply the opposite of positive attributes (e.g., skill at resolving conflicts). A child who is not causing trouble in school is not necessarily one who has friends or who feels a sense of competence and efficacy. Program and policy efforts designed to reduce negative outcomes are not necessarily those that are most effective for increasing positive outcomes (see Aber & Jones, 1997, for an extensive discussion of this issue). As we attempt to develop new indicators, we need to put special effort into identifying good and broadly accepted indices of positive developmental outcomes.

Focus on Present Versus Future Well-Being

In many policy discussions about children there is a tension between considering the child as a person in the present and the child as a nascent adult. Many indicators are selected because they predict to future adult poverty, unemployment, teen pregnancy, and crime. The well-being of a child at any age has value for its own sake, and indicators should be selected to reflect both current and future outcomes. It is important to gather information not only on children's characteristics but also on how they perceive their future. Children's own perceptions of their future can influence current behavior, motivation, and choices that have long-term consequences.

Social Behavior is Context Specific

Unlike cognitive skills, which are relatively stable across contexts and time, social behavior varies by the social context in which the child is observed. In a recent meta-analysis of longitudinal studies predicting early school adjustment, for example, social behavior observed in preschool or kindergarten was very modestly related to behavior in first or second grade (La Paro & Pianta, 2001). In the New Hope study, with a sample of over 600 children from low-income families, parents' and teachers' ratings of children's positive and problem behaviors (using the Social Rating Scale System; Gresham & Elliott, 1990) had an average correlation of about .20 (Bos et al., 1999). The reasons for low consistency across situations and time probably lie partly in measurement problems, but we believe they also indicate true variability across contexts. Children (and adults) can be socially skilled in some situations and inept in others, assertive in some contexts and obsequious in others.

Whatever the reasons for inconsistencies, it is clear that indicators of social and emotional development should include multiple respondents (e.g., parent, teacher, child, peer) and multiple contexts (e.g., school, home) in which children spend time. We stress the importance of including self-reports of children. In the New Hope study, children's responses on measures of well-being had very low correlations with reports of positive or negative behavior by parents or teachers. In many national surveys parents are the only source of information about children; such data have serious limitations.

Multiculturalism

The American population is becoming increasingly diverse, and that is especially true for children. The proportion of non-White children ages 5 to 14 has increased from approximately one quarter to one third since 1980 and is expected to reach one half by 2020 (U.S. Department of Commerce, Bureau of the Census, 1993, 1996). The 2000 census reflects fast-growing Hispanic and Asian populations. Cultural variations raise
fundamental questions about the generality and appropriateness of indicators, particularly in the domain of social and emotional development. Do different groups hold the same values about what is healthy and desirable? Even if the constructs are similar, the measures may have different meanings or different levels of validity for children from different cultural groups.

We need research to establish instances in which generalization is appropriate or in which patterns differ. For example, as non-Latinos reach adolescence, they report becoming less close to their parents, but Latino adolescents report greater closeness to parents (Lerner, 1998). Independence from parents may signify positive development for non-Latinos, but not for Latinos. In addition, much more work is needed to establish the extent to which other assets may need to be added for different cultural groups.

Biases in measurement represent another problem. Adults’ ratings of problem behavior and social skills reflect their own sets of values and expectations. Teachers, who are predominantly middle class and often White, may perceive behavior of children of color as defiant or aggressive because it does not match their concepts of appropriate behavior, and they may not recognize social skills that are outside their frame of reference (e.g., Harrison et al., 1990).

Thus, we need to take seriously ethnic diversity (both within and between ethnic groups) and devise assessments that tap into both commonalities and diversities, including what we consider healthy development and whether the meaning of healthy development is interpreted the same by various cultures.

Comprehensive Coverage

Children have different areas of strength and weakness, so indicators should span a wide array of outcomes and behaviors. We offer suggestions in the following section for outcomes that we consider particularly important to assess during middle childhood.

CURRENT SOURCES OF DATA COLLECTION OF MIDDLE CHILDHOOD INDICATORS

The following eight national surveys collect data on some aspect of the psychological, emotional, and social development of children in middle childhood: (a) the National Household Education Survey, (b) the National Longitudinal Study of Youth 1979, (c) the National Assessment of Educational Progress (NAEP), (d) the National Institute of Child Health and Human Development (NICHD) study of Early Child Care and Youth Development, (e) Progress of Canadian Children, (f) the Panel Study of Income Dynamics, (g) the Early Childhood Longitudinal Study—Kindergarten Cohort, and (e) the National Survey of America’s Families.

These surveys differ in the comprehensiveness of their assessment of indicators in middle childhood. For example, the National Longitudinal Study of Youth gathers only social development indicators from mothers about their children under the age of 10, thus missing out on the child’s self-report. The Early Childhood Longitudinal Study—Kindergarten Cohort, on the other hand, gathers a wide range of data on children’s social and emotional development, including children’s self-report as well as parental and teacher report. Of course, time and financial constraints often limit the amount and extent of information collected. At the end of this chapter, we provide some suggestions for alleviating these constraints.

Various regional surveys have also collected fairly comprehensive data on middle childhood indicators, such as the Project of Human Development in Chicago Neighborhoods, the Los Angeles Family and Neighborhood Study, the Childhood and Beyond Study (CAB), and the 3-Cities Study. The John D. and Catherine T. MacArthur Foundation’s Research Network on Successful Pathways Through Middle Childhood has resulted in several projects assessing indicators in middle childhood, including: the New Hope Project (see Brock, Doolittle, Fellerath, & Wiseman, 1997; http://www.mdrc.org/project_16_30.html), the MacArthur School Engagement Project (see http://childhood.isr.umich.edu/current/engage.html), the MacArthur School Transition Study (see http://childhood.isr.umich.edu/current/macar.html), the Children of Immigrants Project (see http://childhood.isr.umich.edu/current/children.html), and the California Childhood Project http://childhood.isr.umich.edu/current/calif.html).

These national and regional surveys use many of the same (or modified versions of) well-validated and standardized instruments shown in Table 5.1. More detailed information on these surveys, including constructs assessed and specific measures used, can be found in the Appendix. A valuable resource for information regarding child indicators is the Children, Youth, and Families at Risk Initiative and Evaluation Collaboration Project, National Outcomes Work Group for Children. Their website (http://www.ag.arizona.edu/fes/cyfnet/nowg) contains suggestions of outcomes and specific measures, some of which we touched on in this chapter.

IMPORTANT DEVELOPMENTAL DOMAINS IN MIDDLE CHILDHOOD

We consider the following seven domains as key to children’s social and emotional development in middle childhood: (a) motivation and goals for the future, (b) psychological well-being and distress, (c) activities and time use, (d) self-regulation and control, (e) social competence, (f) relationships with peers and adults, and (g) ability and attitudes concerning multiculturalism and diversity. These domains overlap with
<table>
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what others researchers consider to be important indicators of well-being in middle childhood (Benson, 1997; Lerner, 1998; Moore, Evans, Brooks-Gunn, & Roth, 2001). As stated earlier, approaches to the use of childhood indicators assesses negative behavior more frequently than positive behavior, mostly because there is little agreement regarding the behavior and characteristics that make up positive development (Moore, 1997). We will discuss what we consider, and what existing research suggests as being, indicators of healthy, positive development within each of these seven domains. Specific measures that we consider to be strong candidates for assessing constructs within these domains are presented in Table 5.1.

**MOTIVATION AND GOALS FOR THE FUTURE**

This is an area that is especially important to children in middle childhood, particularly because the decisions children make during this period affect their future outcomes, such as educational and occupational attainment. In the past, researchers have described early and middle childhood as a period of fantasy aspirations for career development, claiming that up to age 11, children aspire widely and impulsively to occupations and that it is only during the shift from adolescence to adulthood that there is a change from fantasy choices to realistic choices (Cosby, 1974; Ginzberg, 1952).

However, more recent research has shown that childhood plays a very important role in career development and that the process of occupational choice during childhood is more complex than previously theorized. Gottfredson (1981) argued that childhood is a period in which important career decisions are made, including the elimination of some career options—something that may obviously affect future career outcomes.

For the most part, children enter middle childhood with a very optimistic outlook on their abilities and future expectations (Eccles, 1999). However, research suggests there are dramatic declines in children's academic motivation, interests, values, and competence beliefs with the transition to junior high (see Eccles et al., 1997). This makes the identification of positive motivation indicators in middle childhood even more crucial, and it may be particularly important for certain groups, such as Latinos, who have much higher dropout rates than other ethnic groups.

In addition to educational and occupational goals, various other personal goals should be assessed in middle childhood. However, as Burnett and Meisells (2001) pointed out, there are no age-appropriate measures of goals for children in early elementary school. Existing measures usually begin assessments with children in fourth or fifth grade. This may be in part because there is an absence of research on the ability of younger children to report personal goals. In addition to needing more research investigating children's capacity to identify their goals, we suggest that more longitudinal studies be conducted to gain a better understanding of what positive indicators of motivation in middle childhood look like in relation to later successful outcomes (e.g., in academic and work domains) so that programs designed to promote positive development in particular areas can make adjustments accordingly.

We propose that being hopeful and having positive expectations regarding their personal future are important indicators for children in this domain. This includes having high academic and occupational motivation (aspirations, expectations, interests, and values); positive expectancies for future mental and physical health, including life expectancy; positive social goals (e.g., family, friendships, relationships); and prosocial and responsibility goals (e.g., to help others, be a productive citizen of society).

Both the Michigan Childhood Development Study (Eccles, Wigfield, Harold, & Blumenfeld, 1993) and the CAB assess children's self-concepts, expectations for successes, and achievement-related values and beliefs in various domains (e.g., math, reading, music, English, sports). The Children's Academic Intrinsic Motivation Inventory (Gottfried, 1985) is a widely used measure of children's motivation, as are Eccles's measures of children's self-concept of ability.

**PSYCHOLOGICAL WELL-BEING AND DISTRESS**

This is perhaps the most researched area with children of this age group. We consider positive indicators of middle childhood to encompass positive psychological well-being and low feelings of distress. We suggest the following as specific positive indicators within this domain: low anxiety, a positive self-image, a positive and realistic level of self-esteem, and a lack of depression.

Self-image and self-concept refer to one's ideas about his or her skills, personality, and other characteristics, whereas self-esteem is the part of self-concept or self-image that deals with one's feelings (i.e., positive or negative) about one's values and competence as a person (Berndt, 1997; Harter, 1985). Children develop their self-esteem and individuality during middle childhood, as they begin comparing themselves with peers. In the last decade, promoting children's self-esteem has become a high priority for educational and community programs because of research demonstrating links between positive self-esteem and the confidence and motivation necessary for other desirable outcomes, such as achievement and the ability to interact positively with other people. Children who do not perceive themselves as competent during middle childhood may be at risk for undesirable outcomes later in life, such as social isolation, anger, and depression (Cole, 1991; Parkhurst & Asher, 1992).

Harter (1982) stressed the importance of promoting a realistic sense of competence as a goal, rather than just increasing self-esteem or per-
ceived competence. Following from this, an important indicator in this domain that should be given more attention is children’s ability to self-identify their areas of strength, skills, and areas requiring improvement, instead of just assessing their competence in a few, preselected domains. It is important to assess children’s skills in a way that taps a comprehensive range of areas, because not all children possess competence in such specific domains. For example, many children may not feel competent in math or sports but instead feel good about their knowledge of science or their ability to paint, facilitate and lead activities with peers, or maintain friendships. Many current measures do assess children’s perceived competence in various domains (e.g., Eccles’s self-concept of ability scales), with sports, math, and English being among the most common. We suggest assessing an even wider variety of domains (e.g., computer skills, taking care of pets, listening skills, ability to make friends), with one method of measurement allowing children to self-identify their areas of strengths and weaknesses.

Of the most widely used and well-validated measures of self-concept are Harter’s (1982, 1984) measures, which are self-report and cover and variety of domains, and Marsh’s (1988) Self-Description Questionnaire, which contains eight self-concept scales, including the assessment of peer and parent relationships. Many consider the Self-Description Questionnaire-I (Marsh, 1990) to be the best measure of self-concept because of its multidimensionality and high validity with preadolescent children (Burnett & Meisells, 2001; Byrne, 1996).

The most widely used depression measures include the Center for Epidemiologic Studies Depression Scale (L. S. Radloff, 1977), the Self-Rating Scale of Depression (Birleson, 1981) and the Children’s Depression Inventory (Kovacs, 1985). It may be desirable for instance, in the interest of time-to gather information about children’s psychological well-being overall with one measure instead of administering separate scales of depression, self-concept, anxiety, and so on. There are a few such measures that tap multiple aspects of children’s psychological well-being, such as the Loneliness and Social Dissatisfaction Questionnaire (Asher, Hymel, & Renshaw, 1984; Asher & Wheeler, 1985; Cassidy & Asher, 1992), which assesses children’s feeling of social adequacy, loneliness, and perceptions of peer status.

**ACTIVITIES AND TIME USE**

There is a growing concern about children’s use of free time. Middle childhood is a period when children begin gaining a great deal of independence and become increasingly involved in activities (Canadian Council on Social Development, 2001). Participation in activities can have important effects on children’s social and academic development, although the outcomes are dependent on type of arrangement (e.g., structured, adult-supervised vs. unstructured, not adult supervised) and type of activity (e.g., sports vs. academic enrichment), as well as child’s socioeconomic status (e.g., how much family income is allocated or available for enrolling children in extracurricular activities, what activities does the neighborhood or community offer?).

We believe that children’s constructive use of time and participation in positive activities are indicators of healthy positive development in middle childhood, particularly in the attainment and development of skills. Structured, out-of-school activities often provide children with adult-supervised, constructive time use, aiding in the development of prosocial skills and reducing the likelihood of involvement in deviant behavior (Carnegie Corporation, 1992). On the other hand, children’s involvement in “self-care” time use may have different outcomes. Although some researchers have found that time spent in self-care is related to difficulties in behavior, such as lower social competence (Pettit et al., 1997; Pettit, Bates, Dodge, & Meece, 1999), externalizing behavior problems, and participation in deviant behavior (Posner & Vandell, 1999; Richardson et al., 1989; Steinberg, 1986; U.S. Department of Education and U.S. Department of Justice, 2000), others have found no overall differences in self-perceived social ability, behavior problems, or social adjustment (Galambos & Maggs, 1991; Lovko & Ullman, 1989; Rodman, Pratto, & Nelson, 1985).

The relationships between children’s activity participation and social behavioral outcomes may differ for children according to family income levels. Studies have shown negative effects of self-care on children living in low-income neighborhoods (Pettit et al., 1999; Posner & Vandell, 1994), whereas the social development of children in middle-class communities does not differ according to the type of care (Steinberg, 1986; Vandell & Corasaniti, 1988). Positive effects of formal after-school arrangements on low-income children’s social conduct, such as social competence (Posner & Vandell, 1994) and lower levels of internalizing behavior problems (Marshall et al., 1997; Pettit et al., 1997), have been found. Moreover, youth who participate in activities that are structured or approved by adults have better school performance and less deviant behavior than do those who spend after-school time in unsupervised activities with peers. This difference is especially apparent for youth in low-income families and neighborhoods (Carnegie Corporation, 1994; Catalano, Berglund, Ryan, Lonczak, & Hawkins, 1999; Pettit, Bates, & Dodge, 1997). Thus, when deciding on what specific indicators we consider to be positive, it is important to keep in mind that it may differ according to socioeconomic status.

We suggest that leisure time use should be given special attention, because little is known about the contribution of different types of activities (and the circumstances surrounding them) to children’s behavior. Children today are less likely to be responsible for household chores than were children in the early part of the century, thus giving them more free time (Capella & Lerner, 1999). Moreover, because more par-
ents are working, children are spending increasing amounts of out-of-school time without adult supervision.

Indicators in this area should include both the amounts and types of activities in which children participate. Moreover, when gathering data on children's time use, it is very important to make distinctions between time of year (e.g., summer vs. school year) as well as time of week (weekday vs. weekend), because activities may vary considerably under these various circumstances. It is also important to collect information on the specific circumstances surrounding each activity, including who else was engaged in the activity with the child (e.g., friends, peers), and whether the child was being supervised by an adult. The New Hope and CAB projects gather these types of information in detail, assessing things such as the type of activity, frequency and duration of the activity, the presence or lack of supervision or company, and whether the activity occurred on a weekday or weekend.

Advances in technology (e.g., computers, video games, digital cable) have opened up a wider range of possible activities in which children may be engaged during their free time; thus, data on media usage—including television, computers, movies, and video games—should also be assessed. Last, there appears to be more interest in assessing children's participation in civic, community, prosocial, and leadership activities over the last two decades, although measures assessing participation in these activities are still underdeveloped.

SELF-REGULATION AND CONTROL

Central to the definition of self-regulation is the ability to manage/control one's impulses. This is an area that is underdeveloped with children in middle childhood.

We include self-regulation separate from social competence because a certain degree of self-regulation is necessary for children's development of more advanced social competence, such as the negotiation of conflicts and social problem solving, especially with peers (Aber & Jones, 1997). We believe the following to be important indicators of children's ability to self-regulate their behavior: hyperactivity and impulsivity; responsibility and independence; and leadership, contribution, and citizenship.

Responsibility and Independence

Responsibility and independence are related characteristics that are important to being successful adults, because they are requirements for managing one's day-to-day life and schedule, the completion of tasks in a timely manner, and the ability to admit and correct mistakes (Shaffer, 1999). The development of independence and responsibility is a process that begins in infancy and continues into adulthood. Independent and responsible children are more apt to be successful in school, careers, and social relationships (Dubow, Huesmann, & Eron, 1987; Shaffer, 1999).

Indicators of responsibility and independence are especially sensitive to age. The following are indicators that we feel are appropriate for children in middle childhood; some of them were guided by suggestions from the National Outcomes Work Group for Children: the ability to initiate and follow through on activities, accept responsibility for mistakes and actions, feed oneself and act appropriately during mealtime activities, dress oneself appropriately, attend to one's own personal hygiene needs, and take care of personal belongings.

Leadership, Contribution, and Citizenship

Studies of peer relationships have shown that the qualities children like in their peers include behaviors and skills related to contribution and citizenship, such as altruism, kindness, and helpfulness (Cartledge & Milburn, 1995; Dygdon, Conger, Conger, Wallanda, & Keane, 1980), whereas teachers cite desired qualities in their students such as cooperation, following rules, and basic self-help behavior (Milburn, 1972). We add the following two to this list of positive indicators: (a) participating in and volunteering for school-related tasks and (b) following established rules, guidelines, and limits in various contexts.

Related to this topic, and an area that is underdeveloped, are children's connections and contributions to larger society. Indicators of this domain should include both children's perceived and real measures of connections and contributions to society. We suggest the following three indicators: (a) children's sense of belonging to community and society; (b) involvement in school, neighborhood, community; and (c) a demonstrated interest in improving their community and society.

The U.S. Department of Education (National Center for Education Statistics) has established the following educational objective for our nation's children: "To be well educated means to possess skills and civic dispositions necessary for effective participation in government and society." This goal is thought to be accomplished through the development of civic competency, which includes civic knowledge (e.g., identifying and explaining meaning of citizenship), participatory skills (e.g., evaluating, taking, and defending positions), and civic dispositions (e.g., becoming an independent member of society and assuming the responsibilities of a citizen). The 1998 NAEP is the only national survey that gathers information on these indicators through the administration of both closed- and open-ended items.

SOCIAL COMPETENCE

The ability to interact effectively with others is an important skill for life success, particularly because it spans many aspects of one's life. Competence in social situations is demonstrated by many indicators, including the ability to cooperate with others; manage aggression; engage in co-
and demonstrate social problem-solving, social reasoning, and coping skills.

The development of social competence is ongoing. Children in middle childhood are constantly refining their social skills. Well-developed social skills help children prepare for successful interpersonal relationships, aid them in making healthy decisions, and sharpen their problem-solving skills (Jeffert, Benson, & Roehlkepartain, 1997), whereas deficits in interpersonal skills are often associated with later delinquency, substance abuse, school dropout, and poor self-concept (Bukowski & Hoza, 1989). Unfortunately, educators report that more and more children are entering kindergarten lacking adequate social skills and behavior controls (Marshall, Temple, Montes, & Russell, 1996).

Although there is a consensus that promoting children’s social competence is an important objective, measuring it reliably in children has been challenging. This is in part because many aspects of social competence involve subjective judgments and are context specific. Thus, multimethod assessments (including multiple informants) are highly recommended for assessing children’s social competence.

Social problem solving involves the strategies children use to evaluate social situations, identify their own and others’ feelings, develop solutions, and understand the consequences of these solutions, and make choices (Marshall et al., 1996). Coping skills are part of social problem solving. Because children often lack control over situations in which they may find themselves that they perceive as stressful, and the resources available vary considerably from situation to situation, when evaluating and measuring indicators of coping it is important to assess not only whether children’s efforts are successful but also what their repertoire of effort and strategies consist of. Thus, having both a range of strategies in one’s repertoire and the ability to use them flexibly when the situation deems necessary may be considered the most important indicators of children’s ability to be effective copers (Compas, 1987; Ryan-Wenger, 1992).

Additional indicators of positive coping and problem-solving skills with children in middle childhood are the ability to do the following: gather information, devise a plan of action, identify more than one solution for a problem, and possess the knowledge and acceptance of consequences of behavior. Indicators of more general social competence include the ability to appropriately express needs to other children and adults, interact appropriately with adults and other children, engage in productive group work, possess interaction and decision-making skills, have friends of a similar age, and be part of a social network (National Outcomes Work Group for Children).

Achenbach’s Child Behavior Checklist is the most commonly administered screening instrument for tracking emergence of behavior problems in children, and it is appropriate for children ages 4 through 18. It has been standardized on children in the United States and abroad. The Social Rating Scale System is also very commonly used and is especially good for comparing behavior in multiple settings because it has both a parent and teacher report (Grensham & Elliot, 1990).

RELATIONSHIPs WITH PEERS AND ADULTS

Middle childhood is a time when children become increasingly involved in relationships outside the home. It also is a time when outside influences take on greater importance in influencing what children do and the choices they make (Canadian Council on Social Development, 2001). Positive relationships are important to children’s social and emotional well-being, including relationships with parents, other family members (e.g., uncles, aunts, grandparents, siblings, cousins), other adults (e.g., teacher, coach, school counselor, family friend), peers, and friends. Although there are many widely used measures assessing parent-child relationships, there is a need for more measures of peer, sibling, teacher, and other adult relationships, particularly child self-report measures.

Parents

Compared with cognitive and academic outcomes, children’s social behavior and emotional well-being are more strongly related to the social and affective features of parents’ interactions with them, including the quality of discipline provided, and less strongly related to the cognitive environment. Children and youth who manifest positive social behavior and low levels of psychological distress perceive their relations with parents positively, and they tend to have mothers who are warm and who eschew harsh punishment (see McLoyd, 1998, for a review). Young people who engage in deviant and delinquent behavior also have parents who provide low levels of supervision, monitoring, and control (McLoyd, 1998; Sampson & Laub, 1994).

Other Adults and Family Members

Urie Bronfenbrenner, an important scholar and child advocate, asserts that every child needs one adult who thinks he or she is absolutely wonderful. Other family members or adults may serve as this person. Unfortunately, there are few measures of children’s perceptions of social support. Reid, Landesman, Treder, and Jaccard (1989) developed a scale that examines children’s (ages 6–12) perceptions of social support. This is the only measure for children of this age, and there is limited research on the validity of this measure. Gathering information on only parent-child relationships may yield an incomplete picture of important relationships in children’s lives.

Siblings

Over the last decade, research has shown that siblings play important roles in each other’s lives, both in early and middle childhood (Bryant,
aid in the promotion of coping skills and strategies, moral development, and positive self-esteem (Hartup & Stevens, 1999; Piaget, 1965). Familiarity and understanding of social norms, initiation and maintenance of social bonds, and defining and sharing leadership roles are all learned through peer relationships (Gottman & Parker, 1987).

A common measurement of peer relationships is asking children to nominate or rate their peers on various qualities. It is important to gather information on both the number and quality of friendships, as well as whether or not their friends are their same age, sex, and race. A measure used in the NICHD study ("Friends or Foes?") gathers sociometric ratings of children from their caregiver/teacher about their friends, including their friends’ age, ethnicity, and gender, and makes distinctions between playmates and close friends. The NICHD study also uses a questionnaire in which mothers report the age, sex, and ethnicity of their child’s playmates as well as the frequency and location of play, and harmony, balance, and conflict of play interaction (see http://www.nichd.nih.gov/od/secc/index.htm). Other studies that include measures of peer relationships and influence include the Progress of Canadian Children Study, the Los Angeles Family and Neighborhood Study, and the Profile of Student Life: Attitudes and Behaviors. More information on these studies can be found in the Appendix.

ABILITY AND ATTITUDES CONCERNING MULTICULTURALISM AND DIVERSITY

The United States is becoming more culturally diverse. In middle childhood, children develop the ability to take other people’s perspectives and to understand that others may have different viewpoints. Respect for cultural and individual differences are important indicators of children’s personal and social adjustment. This domain includes children’s responses to other people who may differ from them on both an individual and group level, such as gender, social class, immigration status, culture, ethnicity, or in other ways. Suggested indicators of children’s positive attitudes toward multiculturalism and diversity (i.e. cultural competence) include interacting with people different from them; recognizing and respecting similarities and differences between themselves and others; demonstrating respect and concern for others; acknowledging differences in culture, race, gender, socioeconomic status, ability, and family; participating in making school and community welcoming and inclusive of diversity; and demonstrating an awareness of and comfort with people different than them.

Existing measures in this domain are extremely limited. Measures used in the past to tap into this domain assess children’s empathy, such as Bryant’s (1982) Empathy in Children scale for children in Grades 1 through 8. However, as Berndt (1997) pointed out, children generally have more empathy toward people they perceive as similar to them.

Teachers

Relationships with teachers are important for many reasons. As Wigfield, Eccles, and Rodriguez (1998) pointed out, positive relationships with teachers are crucial to children’s motivation. For instance, children seek help from their teachers when they perceive the teachers as warm and supportive (Newman, 1994).

There are a few existing measures that tap into student–teacher relationships. The Patterns of Adaptive Learning Survey (Midgley et al., 1996) includes both a student and teacher form. The child report assesses children’s perceptions of the motivational and instructional techniques of their teacher, and teachers assess their own motivational and instructional techniques. However, this measure is not intended for students below fourth grade. The Health Behavior of School Aged–Children Survey includes a few items measuring student–teacher relationships, including children’s report of teacher support (see http://www.hbsc.org/publications/research_protocols.html).

The Teacher as Social Context (TASC) instrument (Belmont et al., 1992) assesses both teacher and student report of child–teacher interactions and measures both positive and negative outcomes. A short form is also available (TASC-Short Form). The Student–Teacher Relationship Scale, used in the NICHD Study of Early Child Care, measures teachers’ perceptions of the student–teacher relationship (see http://www.nichd.nih.gov/od/secc/index.htm).

Peers/Friendships

Relationships with peers are powerful indicators of both current and future adaptive functions (Coie, Lochman, Terry, & Hyman, 1992; Hymel, Rubin, Rowden, & Lemare, 1990). The influence of peers in engagement in positive and negative behavior is well documented, with close and best friends having the greatest influence (Berndt, 1996). Friendships

1982; Dunn & Kendrick, 1982; Dunn & Munn, 1986) as well as later in life (Cicirelli, 1982). Older siblings have been found to provide important support to younger siblings, often acting as a teacher and a caregiver (Daniels, Dunn, Furstenberg, & Plomin, 1985). Moreover, the influence of older siblings has been shown to be particularly important for certain ethnic groups (Henderson, 1997; Steinberg, Dornbusch, & Brown, 1992). For instance, in Latino families older siblings often serve as important mentors and role models because they may be more able than parents to assist with homework and demonstrate positive school behavior. Moreover, older siblings in Latino families often serve as important sources of emotional support and companionship because of the valuation of close family ties found in many Latino families (Cooper, Denner, & Lopez, 1999).
selves; thus, solely assessing empathy as a measure of children's attitudes toward diversity becomes problematic.

Children of immigrants and children of color face distinct challenges in their development. These challenges naturally make issues of identity particularly salient to these children; thus, it is important that we gain a better understanding of ethnic identity and its links to children's socio-emotional development. In the past, researchers have focused mostly on negative psychological effects of immigration on psychiatric and behavioral problems.

Fortunately, there has been a recent call to examine these issues in the last decade, in part as a response to the fast-growing number of various racial and ethnic minority groups, whose development and well-being will have important ramifications to the well-being of society as a whole. There have been several recent developments of studies designed to address these issues, such as the California Childhood Project and the Children of Immigrants Study. In fact, because of the lack of research and existing measures in this area, the first step of researchers in the Children of Immigrants Study was to pilot measures that were created to tap into constructs such as racial-ethnic identity and esteem and discrimination during middle childhood. They also adapted measures from other work, such as Deborah Johnson's (1996) Racial Stories and Perceived Racial Stress and Coping Apperception Test. Another existing measure in this area is the Ethnic Preference and Identity Measure (Johnson & Castillo, 1994), which assesses ethnic preference and salience. A modified version of this measure was used in the NICHD Study of Early Child Care and Youth Development (see http://secc.rti.org/).

RECOMMENDATIONS FOR THE FUTURE

The following five brief recommendations outline the areas that we feel need most improving in the coming decade.

1. In recognition that behavior is context specific, data should be gathered from multiple informants (including the child when possible) and across multiple contexts. A starting point for gathering data from multiple informants is to adapt items from existing measures (e.g., parent report of child's behavior) for use in other contexts or with other informants (e.g., teachers, grandparents, church minister, coaches). This relates to the next recommendation.

2. Modify existing measures. Aber and Jones (1997) discussed the difficulty of using labor- (and financially) intensive data gathering in national surveys. However, in recent years we have seen more and more modification of measures for the purpose of inclusion in national surveys. For example, Vandell and her colleagues modified the Center for Epidemiologic Studies Depression Scale (L. S. Radloff, 1977) for use in the NICHD Study of Early Childhood. The ethnic identity task used in the NICHD Study of Early Child Care and Youth Development (see http://secc.rti.org/display.cfm?t=fxi=FH13) was also a modification to the Ethnic Preference and Identity Measure (Johnson & Castillo, 1994). We suggest more research on the appropriateness of modifying existing measures/scales that are established with older children for use with children in middle childhood.

A suggestion for the alleviation of time constraints is to add or combine items from existing measures with similar formats. For instance, Burnett and Meisells (2001) recommend adding and adapting items from the TASC (Belmont et al., 1992) to the Self-Description Questionnaire-1 (Marsh, 1990). Doing this would not add much time to the administration of the measure, and the benefit would be the collection of information about various different people in children's lives. Last, using reduced versions of existing measures often saves time without jeopardizing the quality of information obtained. For example, the Chicago Neighborhood Study used a reduced version of the Child Behavior Checklist (Achenbach, 1991), as have many other regional and national surveys.

3. Create indicators applicable to different cultural groups. More work is especially needed on the role of constructs linked to cultural and ethnicity, including cultural knowledge, ethnic identities, coping skills for dealing with experiences of discrimination and racism, and management skills for living in an ethnically and culturally diverse world.

4. Extend assessments of middle childhood to community and local levels. We strongly suggest that more work be conducted that will assess children's well-being at the community level. A great example of this, accomplished with adolescents, is through the administration of the Profiles of Student Life: Attitudes and Behaviors survey. This survey was developed by the Search Institute and has been administered in over 1,000 communities since 1989. It is designed for youth in Grades 6 through 12; however, modifications could be made to assess children in middle childhood.

The questions used in the survey were culled primarily from national surveys. The primary goal of the Search Institute in the development and administration of this survey was to inform social action by providing communities with a common language, a unified and complete vision of positive youth development, and the means to identify and strengthen the developmental processes within their community. The survey is very comprehensive and includes multiple measures in many domains of youth development, including areas that we have identified in this chapter as being particularly underdeveloped in middle childhood, such as moral character, capacities to take responsibility for one's actions, planning ahead, and making choices. The survey is particularly strong in social development measures, including participation in various activities both in and out of school, volunteering in the community, capacity for empathy and
sensitivity, friendship skills, and respect for cultural diversity, all of which are domains that are fairly underdeveloped in middle childhood. The coverage in the social context domains is also comprehensive, including the assessment of supportive relationships in the family, as well as adults outside the family, in the school and in the community. Thus, the adaptation and implementation of this survey for use with children in middle childhood would be a great asset for measuring these important domains at the community level.

5. Develop and expand civic competency measures. The 1998 National Assessment of Educational Progress and the National Household Education Survey are the only national surveys that assess civic competency and knowledge. An easy way to gather data on children’s civic activity participation is to add questions to: existing measures of out of school time that assess children’s involvement in prosocial, civic, and community activities.

NOTES

1. The Appendix is not necessarily comprehensive.

APPENDIX

NATIONAL SURVEYS

1. National Household Education Survey (NHES)
   Ages: Four populations: (a) 3 and older not in kindergarten, (b) K-5, (c) 6-12, and (d) homeschooled.
   Social-emotional constructs assessed: The Parent and Family Involvement Component of the NHES focuses on children’s schooling, children’s homework and behavior, civic knowledge, and involvement and activities with children outside of school.
   Web site: http://nces.ed.gov/nhes/

2. National Longitudinal Study of Youth (NLSY) and Children of NLSY 79
   The NLSY is a nationally representative sample of men and women with an oversampling of Black, Hispanic, and economically disadvantaged White youth. Beginning in 1986, interviewers administered an extensive set of assessment instruments to the children of all the female respondents. These assessments include information about cognitive, socioemotional, and psychological aspects of the child’s development as well as about the quality of the home environment.

Ages: Begins with children ages 6 through 7 and tracks them through graduation to middle school.

Social-emotional constructs assessed: Achievement and ability, behavior problems, and home environment, child-parent interaction, friendships, religious attendance. The achievement and ability measures are drawn from assessments administered by the survey interviewer. The behavior problems and home environment measures are drawn from maternal reports.

Measures used: HOME, BPI, Harter Self-Perception Profile for Children.

Web site: http://nces.ed.gov/nhes/

   Ages: Grades 4, 8, and 12.
   Social-emotional constructs assessed: Civic competence.
   Web site: http://nces.ed.gov/nationsreportcard/

4. NICHD study of Early Child Care and Youth Development
   Ages: First visited at 1 month to first grade.
   Social-emotional constructs assessed: Social competence, behavior problems, psychological well-being, friendships, peer relationships, student-teacher relationships.

Measures used: Loneliness and Dissatisfaction Questionnaire, Depression (“My Feelings” i.e., modified Center for Epidemiologic Studies Depression Scale [L. S. Radloff, 1977]), Child Behavior Checklist (CBCL; Achenbach, xxx), Child Evaluation—Social Skills with Peers subscale, Friends or Foes, Playmate Questionnaire, Social Skills Rating System (Gresham & Elliott, 1990), Student–Teacher Relationship Scale, Teacher as Social Context (Belmont et al., 1992), Ethnic Preference and Identity Measure (Johnson & Castillo, 1994).

Web site: http://secc.rti.org/

5. Progress of Canadian Children
   Ages: School-aged.
   Social-emotional constructs assessed: Social Engagement (family, peer, community, and societal relationships), Socioemotional States (anxiety, hyperactivity, emotional disorders, indirect aggression, inattention), Civic Vitality, Skill Development (sports, lessons, community groups, activities, summer camp, computer, video, chores), Prosocial Behavior.

6. Early Childhood Longitudinal Study—Kindergarten Cohort

Longitudinal study of children in 1998-99 kindergarten class, the first national data available on children in public and private kindergarten.

Ages: Kindergarten.

Social-emotional constructs assessed: Social and emotional development that contributes to social competence, including social skills (cooperation, assertion, responsibility, and self-control) and problem behaviors (impulsive reactions, verbal and physical aggression).

Web site: http://nces.ed.gov/ecls/


Ages: 18 and under.

Social-emotional constructs assessed: Children's social and positive development (participation in training programs and recreational activities—teams, clubs, scouts), religious problems, and behavior problems.

Measures used: Behavior Problem Index.

Web site: http://newfederalism.urban.org/tnsaf/methodology.html

8. Panel Study of Income Dynamics: Child Development Supplement (PSID-CDS)

Ages: 0-12 years.

Social-emotional constructs assessed: Cognitive, behavioral, and health status of children assessed by mother, a second caregiver, an absent parent, the teacher, the school administrator, and the child. Parental and caregiver time with children, other ways children spend their time out of school time, and teacher-reported time use. Assessment of other resources, including learning environment in the home, teacher and administrator reports of school resources, and decennial-census-based measurement of neighborhood resources.

Measures used: See http://psidonline.isr.umich.edu/CDS/quescdetable.html.umich.edu/src/child-development/instruments.html for a full list of measures.

Web site: http://psidonline.isr.umich.edu/CDS

9. Project of Human Development in Chicago Neighborhoods

Ages: Begins with nine different age groups, from prenatal to age 18, and follows them for 8 years.

Social-emotional constructs assessed: Antisocial behavior, emotional factors/mental health, school factors, social network, personality/attitudes/personal identity, use of time/activities.

Measures used: CBCL (Achenbach, 1991), "Jobs and Routine Activities" measure


10. New Hope Project (24- and 60-month surveys)

New Hope is a antipoverty demonstration program operating in two neighborhoods in Milwaukee, Wisconsin. The New Hope program makes a simple offer to participating households: If there is a household member working full time, the program will assure that household income rises above the poverty line and that household members have access to child care and medical services. As such, it represents a work-based alternative to welfare and a new way to address the income needs of the working poor. Eligibility for the program is restricted to households in the two neighborhoods with income below 150% of the poverty line and that includes an adult who is willing to work full time (i.e. 30 hours/week).

Ages: 3-12 years at 24-month assessment.

Social-emotional constructs assessed: Anxiety (Revised Child Manifest Anxiety Scale), depression, social competence/behavior, academic motivation and achievement, occupational aspirations and expectations, social problem-solving skills, activity participation, friendships, delinquent behavior, parent-child relationships.

Measures used: Loneliness and Dissatisfaction Questionnaire, Response Decision Instrument, Perceived Competence Scale for Children.

Web site: http://www.mdrc.org/project_8_30.html

11. Los Angeles Family and Neighborhood Study

Ages: 3 through 17.

Social-emotional constructs assessed: Neighborhood, family, and peer effects on children's development.

Measures used: CBCL (Achenbach, 1991), modified HOME.

Web site: http://www.lasurvey.rand.org/
12. 3 Cities Study

This study focuses on the effects of welfare reform on children’s and adolescent’s well-being, including health, cognitive development, school achievement, and emotional and behavioral development. Sites include San Antonio, Boston, and Chicago.

Ages: Two cohorts: birth to age 4, and 10 through 14.

Social-emotional constructs assessed: Social, emotional, and behavioral development and well-being.

Measures used: New Chance Positive Behaviors Scale, CBCL (Achenbach, 1991), Brief Symptom Inventory (BSI-18) using the ACASI, Behavior Problem Index.

Web site: http://www.bgsu.edu/organizations/cfdr/about/pdf/Lein_Summary.pdf

13. Childhood and Beyond

Ages: Grades K-4.

Social-emotional constructs assessed: The development of self and task beliefs within and across domains; the role of these beliefs in shaping children’s behavioral choices across the domains; the antecedents of parents’ and teachers’ beliefs about their children in each of these domains; and the impact of parenting and teaching styles and of teacher and parent beliefs, values, and perceptions on children’s developing self-and task beliefs.

Measures used: Objective measures of the children’s competence in math, language arts, and sport/physical skill were obtained. Subjective indicators of the children’s competence were obtained from teacher and parent ratings. Detailed information about the school and home social and material context were obtained from parents, children, and teachers.

Web site: http://www.rcgd.isr.umich.edu/cab/home.htm

14. MacArthur School Engagement Project

Ages: First- and third-graders.

Social-emotional constructs assessed: Based on Blumenfeld’s model of school engagement, three aspects of school engagement were assessed: (a) affective (e.g., how much children like school), (b) behavioral (e.g., whether children pay attention to the teacher during class), and (c) intellectual (e.g., whether children are actively involved in learning).

Measures used: 22 Likert-type questions followed by 20 open-ended questions. Examples of open-ended questions are “What do you like about school?” and “When your homework is hard, what do you do?”

Web site: http://childhood.isr.umich.edu/current/engage.html

15. MacArthur School Transition Study

Ages: Kindergarten through fifth-graders in Los Angeles, Pittsburgh, PA, and Vermont.

Social-emotional constructs assessed: Effect of age of entry into kindergarten on academic and social outcomes through third grade, young children’s feelings about school, effect of instruction on motivation, young children’s social competence and relationships with teachers, effects of instruction on student engagement, and parents’ beliefs about their role in children’s education.

Measures used: Direct assessments of children’s math and literacy skills; direct assessments of children’s perceptions of their academic competence and their feelings about school; a teacher questionnaire describing aspects of the classroom and curriculum; a teacher questionnaire rating each child on a variety of skills and dispositions, their perceptions and experiences with the child’s family, and the school culture; a principal questionnaire on school resources, services, and links to the community, and ratings of the school culture; a school data form on the student population and organization of the school; a summary of information in each child’s school record; a direct observation of a math, reading, and writing lesson during a typical school day; and a telephone interview with the child’s primary caregiver.

Web site: http://childhood.isr.umich.edu/current/macar.html

16. Children of Immigrants Project

This study focuses on the normative processes and experiences of adjustment and acculturation and the more subjective socioemotional aspects of growing up as the child of an immigrant in the United States.

Ages: 6-12 years.

Social-emotional constructs assessed: The development of ethnic identity, The development of ethnic esteem, The experience of racism and discrimination, Engagement with institutions.

Web site: http://www.childhood.isr.umich.edu/current/children.html

17. California Childhoods Project

Examines how the daily contexts of children’s lives influence their experiences and pathways of development in three California communities that vary in social class and ethnic composition and in processes of racialization and histories of immigration.

Ages: Elementary school.

Measures used: Perceived Racial Stress and Coping Apperception Test (Johnson, 1996)

Web site: http://childhood.isr.umich.edu/current/calif.html
OTHER RESOURCES


The National Outcome Work Group for includes individuals affiliated with Cooperative Extension’s Children, Youth and Families At Risk Initiative, and specifically with the State Strengthening projects. Provides information regarding suggested outcomes components and suggested indicators/instruments.

Social-emotional constructs assessed: Personal and Social Adjustment (four components): (a) copes effectively with personal challenges, frustrations, and stressors; (b) possesses a good self-image; (c) gets along with other people; and (d) respects cultural and individual differences; Academic and Functional Literacy (two components): (a) demonstrates competence in communication and (b) demonstrates competence in problem solving; Contribution and Citizenship; Responsibility and Independence.


19. Profile of Student Life: Attitudes and Behaviors
Age: Grades 6-12.

Social-emotional constructs assessed: The survey focuses on four categories of adolescent experiences (outlined in more detail below): (a) developmental assets, (b) thriving indicators, (c) deficits, and (d) risk behaviors and high-risk behavior patterns.

Developmental Assets. The developmental assets represent the positive relationships, opportunities, skills, and values that promote the positive development of all children and adolescents. The developmental assets are grouped into 20 external assets (i.e., health-promoting features of the environment) and 20 internal assets (i.e., a youth’s own commitments, values, and competencies). The 20 external assets are grouped into the four categories of (a) support, (b) empowerment, (c) boundaries and expectations, and (d) constructive use of time. The 20 internal assets are grouped into the four categories of (a) commitment to learning, (b) positive values, (c) social competencies, and (d) positive identity.

The 40 developmental assets (listed by the eight external and internal categories) are as follows:


Empowerment: Community Values Youth, Youth as Resources, Service to Others, Safety.


Constructive Use of Time: Creative Activities, Youth Programs, Religious Community, Time at Home.

Commitment to Learning: Achievement Motivation, School Engagement, Homework, Bonding to School, Reading for Pleasure.


Social Competencies: Planning and Decision Making, Interpersonal Competence, Cultural Competence, Resistance Skills, Peaceful Conflict Resolution.


Thriving Indicators. Healthy development also includes life-enhancing attitudes and behaviors, which in the A&S survey are called Thriving Indicators. The eight indicators examined include (a) succeeds in school, (b) helps others, (c) values diversity, (d) maintains good health, (e) exhibits leadership, (f) resists danger, (g) delays gratification, and (h) overcomes adversity. Each of these eight indicators is measured by one survey question.

Web site: http://www.search-institute.org/surveys/abPolicy.html

REFERENCES


KEY INDICATORS OF CHILD AND YOUTH WELL-BEING

Completing the Picture

Edited by

Brett V. Brown
may lead to undervaluing the positive contribution of peer relationships to well-being. The failure to form friendships can portend more serious problems in adolescence and later life. Hence, it is important to measure children’s friendships.

With those cautions, we also note that peer influences increase dramatically during middle childhood; conformity to peers reaches its peak around age 12 or 13. Children in middle childhood also spend increasing amounts of time with peers and friends. Hence, the values and behaviors of a child’s peers are one important context and, at the same time, an indicator of the child’s own values and behavior.

Last, children’s relationships with adults outside their families become increasingly important during middle childhood. Children spend less time under their parents’ supervision during this time and become increasingly under the supervision of and form relationships with other adults, such as teachers, coaches, church leaders, and activity instructors. These relationships are important to assess.

ASSUMPTIONS ABOUT THE GOALS OF DEVELOPMENT

The choice of indicators rests on assumptions about the goals we as a society hold for our children. What do we consider important? What do we want for our children now and in the future? In this section, we identify some of the assumptions guiding our selection, drawing on some of the criteria for indicators proposed by Moore (1997). We recommend that indicators should: include positive as well as negative outcomes; strike a balance between emphasizing the child’s present well-being and future as an adult (well-becoming); recognize that social behavior is context specific, allowing for assessment in multiple contexts and from multiple informants; be appropriate for a multicultural population; and be comprehensive across several domains of development.

Balance of Positive and Negative Outcomes

Childhood indicators assess negative behavior more frequently than positive, in part because there is less agreement regarding the behavior and characteristics that make up positive development (Moore, 1997). However, the absence of problems does not necessarily mean that children are doing well. There is abundant evidence that negative attributes (e.g., aggressiveness) are not simply the opposite of positive attributes (e.g., skill at resolving conflicts). A child who is not causing trouble in school is not necessarily one who has friends or who feels a sense of competence and efficacy. Program and policy efforts designed to reduce negative outcomes are not necessarily those that are most effective for increasing positive outcomes (see Aber & Jones, 1997, for an extensive discussion of this issue). As we attempt to develop new indicators, we need to put special effort into identifying good and broadly accepted indices of positive developmental outcomes.

Focus on Present Versus Future Well-Being

In many policy discussions about children there is a tension between considering the child as a person in the present and the child as a nascent adult. Many indicators are selected because they predict to future adult poverty, unemployment, teen pregnancy, and crime. The well-being of a child at any age has value for its own sake, and indicators should be selected to reflect both current and future outcomes. It is important to gather information not only on children’s characteristics but also on how they perceive their future. Children’s own perceptions of their future can influence current behavior, motivation, and choices that have long-term consequences.

Social Behavior is Context Specific

Unlike cognitive skills, which are relatively stable across contexts and time, social behavior varies by the social context in which the child is observed. In a recent meta-analysis of longitudinal studies predicting early school adjustment, for example, social behavior observed in preschool or kindergarten was very modestly related to behavior in first or second grade (La Paro & Pianta, 2001). In the New Hope study, with a sample of over 600 children from low-income families, parents’ and teachers’ ratings of children’s positive and problem behaviors (using the Social Rating Scale System; Gresham & Elliott, 1990) had an average correlation of about .20 (Bos et al., 1999). The reasons for low consistency across situations and time probably lie partly in measurement problems, but we believe they also indicate true variability across contexts. Children (and adults) can be socially skilled in some situations and inept in others, assertive in some contexts and obsequious in others.

Whatever the reasons for inconsistencies, it is clear that indicators of social and emotional development should include multiple respondents (e.g., parent, teacher, child, peer) and multiple contexts (e.g., school, home) in which children spend time. We stress the importance of including self-reports of children. In the New Hope study, children’s responses on measures of well-being had very low correlations with reports of positive or negative behavior by parents or teachers. In many national surveys parents are the only source of information about children; such data have serious limitations.

Multiculturalism

The American population is becoming increasingly diverse, and that is especially true for children. The proportion of non-White children ages 5 to 14 has increased from approximately one quarter to one third since 1980 and is expected to reach one half by 2020 (U.S. Department of Commerce, Bureau of the Census, 1993, 1996). The 2000 census reflects fast-growing Hispanic and Asian populations. Cultural variations raise