



Association Between Children's Social Skills and Developmental Function of Family in Iran

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Abstract

Background: The family has an important role in shaping the children's behaviors. Today, along with social change, the family, as a major social institution, is also undergoing some significant changes. Social behaviors are learned in the family, and the behaviors of family members are considered as examples by children.

Objectives: This study aimed to determine the relationship between children's social skills and developmental function of the family in Iran.

Methods: A descriptive-analytical correlation study was conducted in Iran in 2018. The subjects included 309 primary school students in four districts of the city (north, south, east, and west). The data collection tools were a demographic questionnaire, the Developmental Family Functioning Assessment Scale (DFFAQ), and the Matson Evaluation of Social Skills with Youngsters (MESSY), which were completed by the researcher and children's mothers. SPSS 16 was used for statistical analysis. The chi-square test and Pearson's correlation coefficient were applied for data analysis. The P values of less than 0.05 were considered significant.

Results: The results showed that the developmental function of the family was at an intermediate level in 72.2% and a good level in 27.8% of the research units. The social skills of the children were at an intermediate level in 39.5% and a good level in 60.5% of the subjects. There was a significant positive correlation between children's social skills and developmental family function ($r = 0.2$, $P = 0.03$). The result of multiple regression analysis showed that care and regulation were better predictors of social skills in children ($\beta = 0.25$, $P = 0.001$), and 30% of the variance in social skills could be predicted by the function of the family.

Conclusions: It is suggested that parents, nurses, psychologists, and other health providers design appropriate interventions to promote the developmental functions of the family to improve the social skills of children.

Keywords: Social Skills, Developmental Function of Family, Students

1. Background

Early childhood has a significant role in children's personality development. Studies have shown that social personality formation and social skills acquisition are most prominent at school-aged children (1, 2).

Social skills are a complex set of skills that are vital to coping with tense situations and developing healthy relationships and can affect the overall function of a person (3). These skills are necessary for the initiation and maintenance of positive social intersections with others, including communication, problem-solving, and decision-making (4). Social skills deficits in early childhood are relatively stable over time and may have negative consequences, including internalizing disorders, externalizing disorders, and poor academic performance. These consequences may be the precursors of more severe prob-

lems later in life (4). In addition, impairments in social skills may be related to larger problems such as developmental disability, Attention-Deficit/Hyperactivity Disorder (ADHD), depression, anxiety, antisocial behavior, and social adjustment problems or serious psychosocial challenges in adulthood (5-8). Social skills are required to develop healthy relationships with others. A major reason for the less popularity of children is that they lack the necessary social skills to win others' hearts (9). Social isolation in childhood may have serious effects on mental health during adulthood; therefore, it is necessary to help families overcome this barrier (10, 11). Socialization includes things such as the ways children learn to interact with others, care for themselves, create boundaries for relationships with extended family, peers, or others, and act as citizens of the larger society (12).

The evidence shows that social behaviors are learned in

the family, and the behaviors of family members are considered as examples by children (4, 8, 11). The relationship between the child, parents, and other family members is a complex system in which people interact with one another; furthermore, this complex system also serves a basis for social relationships (8). At the moment, however, family functions have changed. When structural evolutions like industrialization and urbanization occur at a macro level, the families adapt themselves to macro-level changes at a micro-level (13).

To achieve optimal growth, a child needs a family environment with proper functioning (14). Family functioning means that family members delicately interact with one another. In this regard, Greenspan presented a developmental approach to family functioning, known as the "Developmental, Individual differences, Relationship-based model (DIR)". According to this theory, family members can develop healthily if they can take advantage of developmental capabilities, such as care and regulation, being attracted in human relations, mutual relations, common social problem-solving, creating representatives and ideas, logical thinking, and discipline, in a proper manner (15).

Iran is in the transition from tradition to modernity in social and population aspects. Today, the family institution has undergone tremendous transformation along with social changes. Fertility and family system changes are inevitable consequences of the structural transformation of society. Families should, therefore, be aware of and evaluate their performance. But, there is insufficient evidence on the different dimensions of family functioning in Iran. Therefore, it is important to identify different functional aspects of the family and their relationships with children's social skills to enhance and promote public health.

2. Methods

A descriptive-analytical correlation study was conducted in Iran in 2018. The target population of the study was primary school students and their families. The sample size was calculated using the Cochran formula, with a 95% confidence level, 90% statistical power, and $r = 0.2$. Considering a 30% attrition rate, the sample size was 325 subjects.

After obtaining ethical clearance, 325 subjects were selected through random cluster sampling. The list of all primary schools in four districts of the city of Qazvin (north, south, east, and west) was obtained from the State Education Department, and two schools were randomly selected from each district. The subjects were then selected from the lists of students enrolled in the schools through

simple random sampling according to the inclusion criteria. After selecting the students, their parents were invited to attend a meeting at the school. The inclusion criteria were an age of 10 - 13 years, living with parents in a healthy family (being non-vulnerable), and willingness to participate in the study. The protocol and objectives of the study were explained to parents, and informed consent was obtained from them to interview their children. Then, the study instruments were completed by subjects, including a demographic questionnaire, the Developmental Family Functioning Assessment Scale (DFFAQ), which were completed by parents, and the Matson Evaluation of Social Skills with Youngsters (MESSY), which was completed by the researcher through interviews with children.

The demographic questionnaire was used to collect the data such as father's, mother's, and child's age, child's sex, parents' education level and occupation, and history of kindergarten.

The Developmental Family Functioning Assessment Scale (DFFAQ) was developed and validated by Aali et al. in 2014 (16). This scale contains 43 items in seven subscales, including care and regulation (six items), being attracted in human relations (six items), mutual relations (seven items), common social problem-solving (seven items), creating representatives and ideas (six items), logical thinking (five items), and discipline (six items). All items were assessed based on a four-point Likert scale (from 1 to 4), with higher scores indicating a weaker family function. Scores 43 - 86, 86 - 129, and 129 - 176 represented good, intermediate, and weak developmental functions, respectively. The face and content validity of the scale was assessed by a panel of experts. To examine the reliability of the scale, its internal consistency was measured by the Cronbach's alpha coefficient, which was 0.8 for the whole scale, 0.64 for care and regulation, 0.89 for being attracted in human relations, 0.65 for mutual relations, 0.77 for common social problem-solving, 0.65 for creating representatives and ideas, 0.8 for logical thinking, and 0.66 for discipline. Moreover, the test-retest reliability after a two-week interval was 0.79.

The Matson Evaluation of Social Skills with Youngsters (MESSY) was developed to measure the children's social skills by Matson et al. in 1983 (17, 18). This instrument has 62 items in four dimensions, including appropriate social skills (26 items), antisocial behaviors/aggressiveness (22 items), haughtiness/conceit (eight items), and loneliness/social anxiety (six items), answered on a five-point Likert scale. Scores 62 - 124, 124 - 186, 186 - 248, and 248 - 310 indicated weak, intermediate, good, and excellent social skills, respectively. The face and content validity of the instrument was assessed by a panel of 10 experts and faculty members. The internal consistency of the scale was

measured by Cronbach's alpha coefficient, which was 0.71. Moreover, the test-retest reliability after a two-week interval was 0.72.

SPSS 16 was used for statistical analysis. The chi-square test and independent *t*-test were applied to evaluate the distribution of qualitative nominal and quantitative continuous demographic variables, respectively. The Pearson correlation coefficient was applied to investigate the correlation between study variables. The P values of less than 0.05 were considered significant.

3. Results

In this study, 309 subjects completed the questionnaires. The response rate was 95%. Most of the participants were girls (54.4%), aged 11 years (50.8%), and had a history of kindergarten (75.1%) (Table 1). The results showed that the developmental function of 72.2% of the families was at an intermediate level, and social skills of 60.5% of the children were at a good level (Table 2).

The mean and standard deviation of different subscales of the DFFAQ showed that being attracted in human relations (2.48 ± 0.27) had the highest mean score and creating representatives and ideas (1.87 ± 0.43) had the lowest mean score (Table 3).

There was a significant direct relationship between the developmental functions of the families and the social skills of the children ($r = 0.2, P = 0.03$) (Table 4). Moreover, among developmental functions, care and regulation had a significant positive correlation with social skills ($r = 0.2, P = 0.003$) (Table 5). The result of multiple regression analysis showed that the care and regulation dimension was a better predictor of social skills in children ($\beta = 0.25, P = 0.001$) (Table 6).

4. Discussion

The results showed that the developmental function of 72.2% of the families was at an intermediate level and social skills of 60.5% of the children were at a good level. In the present study, sharing ideas was at a favorable level in the evaluated families. In other words, they were in the fifth stage of the developmental function. The results of the studies conducted by Matejevic and Jovanovic (11) and Haydicky et al. (19) are in line with our findings.

Social skills facilitate coping with the social environment and agemates in children. In this context, coping means a child's ability to anticipate, internalize, and react to certain signs in a social context. Therefore, social skills are judged based on behaviors displayed by a person. The studies showed different levels of social skills in different

Table 1. Demographic Characteristics of School-Aged Children (N = 309)

Characteristics	No. (%)
Gender	
Female	168(54.4)
Male	141(45.6)
Child's age	
10	39 (12.6)
11	157 (50.8)
12	104 (33.7)
13	9 (2.9)
Mother's occupation	
Housewife	160 (51.8)
Employee	122 (39.5)
Worker	3 (1)
Others	24 (7.7)
Educational level of mothers	
Elementary education	8 (2.8)
Lower than diploma	21 (6.8)
Diploma	126 (40.7)
Bachelor's degree	127 (41.1)
More than a bachelor's degree	27 (8.6)
Mother's age	
< 30	12 (3.9)
30 - 40	145 (46.9)
41 - 50	135 (43.7)
> 50	17 (5.5)
Kindergarten history	
Yes	232 (75.1)
No	77 (24.9)
Father's occupation	
Unemployed	2 (0.6)
Employee	149 (48.4)
Non-employee	128 (41.6)
Educational level of father	
Elementary education	13 (4.2)
Lower than diploma	21 (6.8)
Diploma	120 (39)
Bachelor's degree	120 (39)
More than a bachelor's degree	34 (11)
Father's age	
< 30	0 (0)
30 - 40	75 (24.5)
41 - 50	174 (56.5)
> 50	60 (19.5)

societies, which could be due to factors such as facilities and equipment at their disposal (20, 21).

Our findings showed a significant positive correlation between children's social skills and developmental functions of the family. Moreover, the relationship between the children's social skills and the subscale of care and regulation was positive and significant ($r = 0.2$). In other

Table 2. Developmental Family Function Status and Social Skills of School-aged Children (N = 309)

Status	Developmental Family Function, No. (%)	Child's Social Skills, No. (%)
Weak	0 (0)	0 (0)
Intermediate	223 (72.2)	122 (39.5)
Good	86 (27.8)	187 (60.5)
Total	309 (100)	309 (100)

Table 3. The Scores of Developmental Family Function Dimensions and Social Skills of School-Aged Children (N = 309)

Dimension	Mean	SD	Min	Max
Care and regulation	2	0.37	1.33	3.33
Being attracted in human relations	2.48	0.27	1.33	3.37
Mutual relations	2.19	0.35	1	3.14
Common social problem-solving	2.04	0.28	1.29	3.14
Creating representatives and ideas	1.87	0.43	1	3
Logical thinking	2.36	0.33	1.2	3.8
Discipline	2.21	0.36	1.33	3.33
Social skills	3.07	0.23	2.36	3.7

Table 4. Correlation Between Developmental Family Function and Social Skills in School-Aged Children (N = 309)

Variable	Social Skills	Developmental Family Function
Developmental family function	r = 0.2*	1
	P = 0.036	-

Table 5. Correlation Between Dimensions of Developmental Family Function Dimensions and Social Skills in School-Aged Children (N = 309)

Dimension	Social Skills	
	p	r
Care and regulation	0.003	0.2
Being attracted in human relations	0.72	-0.02
Mutual relations	0.16	0.078
Common social problem-solving	0.39	0.048
Creating representatives and ideas	0.38	0.049
Logical thinking	0.4	-0.047
Discipline	0.15	0.081

words, with an increase in regulated interactions, the social skills of the children improved, as well. The relationship between social skills and other subscales of the DF-FAQ was not significant. Li et al. conducted a descriptive-analytical study to investigate mother-child and teacher-child relationships and their effects on early social behaviors of only and non-only children using the urban-rural

Table 6. Regression Analysis of Developmental Family Function Dimensions and Social Skills in School-Aged Children (N = 309)^a

Dependent Variable/ Predictors	B	SD	β	t	P Value
Social skills					
Care and regulation	0.23	0.45	0.25	3.24	0.001*
Being attracted in human relations	0.05	0.68	0.19	0.41	0.35
Mutual relations	-0.02	0.55			
Common social problem-solving	-2.05	0.63	0.13	0.43	0.08
Creating representatives and ideas	0.08	0.65	0.06	0.75	0.42
Logical thinking	0.03	0.69	0.08	1.18	0.34
Discipline	0.075	0.23	0.12	1.23	0.61

^aR-square = 0.3, R = 0.5, P < 0.001

status as a moderator in China. The results showed that a close mother-child relationship was a strong predictor of the children's social skills. Moreover, a close mother-child relationship buffered rural only children's externalizing behavior problems (22). In another study investigating disciplinary behaviors, family functioning, locus of control, and self-esteem in students, a significant relationship was observed between family functioning and disciplinary behaviors while the relationship of the external locus of control and disciplinary behaviors was not significant (23). Hosokawa and Katsura suggest that destructive and constructive marital conflict may, directly and indirectly, influence children's social skills development through the mediation of parenting practices (3).

There is a significant positive correlation between the emotional atmosphere of the family and the development of social skills in children (20). The family members who have achieved these developmental capabilities consider one another's tolerance threshold and moderate the family environment according to the emotional needs of the members. In this regard, the focus is on calm and emotionally regulated interactions among family members to achieve these capabilities. Therefore, social growth, development of social relationships, quality of social interactions, social coping, and mental health depend on acquiring social skills (8, 21, 24).

A limitation of the study was that the researcher was a stranger to the children, and her presence affected their function. It is suggested that more objective methods be applied to assess children's social skills in future studies.

4.1. Conclusion

According to the results of the present study, there is a significant positive relationship between the children's social skills and care and regulation. Therefore, it is suggested that parents, nurses, psychologists, and other health providers design appropriate interventions to promote the developmental functions of the family, especially in the subscale of regulated interactions. Cooperation and collaboration of the parents are very important in enhancing the children's capability of coping with the surrounding cultural and social environment, which would eventually result in the development of their social skills. The parents play a crucial role in how their children cope with stressful situations and tensions, as well as reducing their behavioral problems.

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Footnotes

Authors' Contribution: SHP and FB planned the study and developed the research design. SHP planned the data analysis. SHP, NN, and FB were responsible for the data collection. FB wrote the first draft and SHP was responsible for revisions. All authors discussed and commented on draft versions and approved the final version.

Conflict of Interests: The authors declare that they have no competing interests.

Ethical Approval: The trial was approved by the Regional Committee at Tehran University of Medical Sciences (ethics code: IR.TUMS.FNM.REC.1396.3298).

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Informed Consent: Each participant signed a written informed consent form of voluntary participation with information about the study purposes and consequences, emphasizing the right to withdraw from the study.

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