

A study on the impact of parent-child relationship and socioeconomic status on problem behaviour among children

ABSTRACT

Aim: The aim of study was to examine whether there exists significant difference in problem behavior among children with the variation in socioeconomic status in the family and parent child relationship (mother-child and father-child relationship).

Study Design: A cross-sectional analytical study.

Place and Duration of Study: Data collected in group (maximum with 20 participants by maintaining necessary Covid protocols) at schools in Kolkata with special appointment and after taking consent from the school authority and the participants in November, 2021.

Methodology: 100 Bengali parents as participants from Kolkata with 30 to 45 years of age and having children within 10 years of age were included following necessary inclusion criteria. The tools used for the study were an information schedule, modified Kuppaswamy SES scale, the Child Behaviour Checklist and parent child relationship scale.

Results: Results revealed that the problem behavior in children differed significantly due to the variation in socioeconomic status of the family and parent child relationship (in terms of mother child and father child relationship). Thus, the impact of socioeconomic status and parent child relationship on problem behavior among children is significant ($P < .001$).

Conclusion: The present study concludes that there are significant impact of socioeconomic status and parent child relationship on problem behavior of the children. The present study has implications in emphasizing that socioeconomic status of the family and nature of parent child relationship play a pivotal role in generating internalizing and externalizing problem behaviors sometimes separately and sometimes together which gradually may turn into developing chronic psychological disturbances. Therefore, immediate measures should be taken to develop concern and to implement psychological intervention.

Keywords: Socioeconomic status, Mother Child relationship, Father Child relationship Problem behaviour.

1. INTRODUCTION

Socioeconomic status depicts individual's or family's economic and social position as in combination with the total measure of a person's work experience in relation to others, based on income, education, and occupation. More commonly socioeconomic status is indicated by the reflection of an economic difference in society as a whole [1].

Socioeconomic status may fall into one of the three areas or categories such as High SES, Middle SES, and Low SES which provide description of the individual or family in respect to the particular category where the person belongs to. In terms of the analysis of income, education, and occupation, the family or individual is placed into one of these three categories. In this regard a study may be highlighted as conducted by Marmot (2004) and according to this study low income and education have been shown to be strong predictors of a range of physical and mental health problems, including respiratory viruses, arthritis, coronary disease, and schizophrenia as their environmental conditions in their workplace, or they begin their work in unpleasant or embarrassing social situation [2]. In an earlier study by Hunt (1972) which highlighted another significant factor of S.E.S. such as education and showed that education gets back seated in poorer areas where only food and safety are priority and the author further showed that in United States youth audiences are particularly at risk for many health and social problems, such as unwanted pregnancies, drug abuse, and obesity [3].

Recently, there has been increasing interest from epidemiologists on the subject of economic inequality and its relation to the health of population. Studies indicated that there is a very robust positive correlation between socioeconomic status and health and their findings showed that one of the very common source of health inequality is socioeconomic status which resulted by influencing varieties of people of the socio-economic ladder, relating status to health. Children of the low socioeconomic status have been indicated to suffer from advanced illness because of the lack of treatment as their parents with a low socioeconomic status cannot afford many of the health care resources [4]. There is an association of Lower socioeconomic status to chronic stress, heart disease, ulcers, type 2 Diabetes, Rheumatoid Arthritis, certain types of cancer, and premature aging. Most interestingly many researchers indicated that socioeconomic status strongly influences health irrespective of economic resources and access to health care [5]. Shishehgar, Dolatian, Majd and Bakhtiary (2014) showed that there exists no significant relationship between SES and stress during pregnancy, while a significant relationship has been observed between husband's occupational status and pregnancy [6]. Shishehgar, Dolatian, Majd and Bakhtiary (2014) further indicated that there exists no significant relationship between income and mother's education and pregnancy stress [6].

Many researchers in their comparative studies of low and higher socioeconomic status indicated many factors which are associated to affect children from low socioeconomic status in comparison to the children of higher socioeconomic status such as less dialogue from parents, minimal amounts of book reading, and few instances of joint attention, the shared focus of the child and adult on the same object or event. On the other hand children of high socioeconomic families experience more child-directed speech, at 10 months, hear on average 400 more words than their low SES peers [7]. Language ability has also been observed to differ from high to low socioeconomic status [8]. Tandon, Zhou, Sallis, Cain, Frank and Saelens (2012) in their study indicated that though children of lower socioeconomic status have greater media access in their bedrooms but lesser access to play equipments as compared to the children of higher socioeconomic status which lead them to be in disadvantageous position compared to the higher income children [9]. Kraus & Keltner (2008) in their study indicated that fulfillment of needs of children with higher socioeconomic status lead to develop greater confidence and feelings of independence which finally lead them to be autonomous and enhance decision making abilities in different parts of their life [10].

The most significant and highly influenced factor by SES is the type of parenting style in family which parents adopt for their child. The tone and purpose of Verbal interactions between parent and child get shaped by the different parenting styles in the family. Clerk (2009) conducted a study which indicated that high socioeconomic parents tend to be more authoritative or permissive in which their approach to pose more open ended questions encourage speech growth of their children whereas more authoritarian parenting style adhered by low socioeconomic parents inhibits child responses and speech development as in these families conversation contain more imperatives and yes/no questions [11]. Such approach leaves the child to observe their family to be more hierarchical in which parent stands at the top of power structure that shapes verbal interaction and in such families questioning authority of the children gets discouraged depending on their lower rank and position [12]. On the contrary, children of high SES individuals enjoy high power positions as they are treated with equality which provide them more expressivity as they are encouraged to ask questions to the people around the world as well as they are also encouraged to create questions of their own. Whereas low SES children most of the times observe power disparity between parent and child that has high possibilities to bring detrimental results to the family [12]. In this regard a study may be highlighted which examined the mediation effect of parenting style and psychological sushi or quality on the relationship between socioeconomic status and problem behaviour. Results indicated significant effect of authoritative parenting and psychological sushi in mediating the relationship of socioeconomic status and problem behaviour [13].

Lack of expressivity in the family hampers growth of the children not only in the family but in the other institutions of the society as well as that may also lead to the development of internalizing and externalizing behavioural problems. Externalizing behaviour problems get expressed outwardly as aggression, impulsivity, coercion, and noncompliance. Whereas internalizing behaviour problems get expressed inwardly through inhibited style as withdrawn, lonely, depressed, and anxious. Though comorbidity may occur as children with aggression or other externalizing behaviour problems may

suffer from anxiety, depression and other health and social problems (such as physical fighting, body dysmorphism, self-harm) which require clinical intervention [14]. Tremblay (1999) in a study showed that high SES youths express lesser internalizing and externalizing problems, having limited social skills deficits and enjoy higher satisfaction in life [15]. Another interesting study by Wilkinson and Marmot (2003) who indicated that in middle- and upper-class family behavioural problems due to the differences in SES is mainly attributed psychosocially rather than deprivation or poverty [16]. Another interesting study by Reiss (2013) who showed variability in findings which had been obtained as low SES indicated stronger association with externalizing behavioural problems such as opposition defiant disorder or attention deficit hyperactivity disorder, than with internalizing disorders such as anxiety and depression. Author strongly emphasized the need of early childhood intervention to bring these children with greater possibilities in life [17]. Emphasizing parenting styles as another significant variable of the study had clearly been implicated as having greater association with problem behaviours. A correlational study showed strong association between these two variables as conducted by Alizadeh, Mansor, Abu Talib, Abdullah and Mansor (2010) on relationship between Parenting Style and Children's Behavior Problems. Results indicated that authoritarian parenting and permissive parenting were found to have strong positive relationship with internalizing and externalizing behaviour problems whereas authoritative parenting were found to have strong negative relationship with internalizing and externalizing behaviour problems [18]. An interesting and rare study conducted by Agnes, Eli and Benedicta (2020) who observed impact of parenting styles on problem behaviours in respect to both mother and father. Their study indicated that mothers' authoritative parenting has significant impact on child emotional problems, whereas fathers' authoritative and authoritarian parenting has significant impact on child behavioural problems. This study recommended that effective parenting may be achieved through parental teamwork [19]. Findings in somewhat different line had been obtained by a study conducted by Hosokawa and Katsura (2019) with similar variables and this study showed that authoritarian parenting impacted externalizing behaviour problems in both boys and girls whereas permissive parenting style impacted externalizing behaviour problems only in boys. As measures this study indicated that in early childhood parents should be provided with support regarding child rearing styles that may lead to reducing behaviour problems in school [20].

The present study has been conducted because researches indicated that socioeconomic status as well as parent-child relationship based on the parenting styles play a very significant role in developing internalizing and externalizing problem behaviours among elder as well as younger family members that may result in developing behavioural disturbances. Disruptive family pattern develops with the emergence of the economic crisis in family which mostly results in developing other crisis which are necessary to be considered for psychosocial intervention [21]. The present study aims to measure overall problem behaviour in terms of internalizing and externalizing problem behaviour of the children with the variation in socioeconomic status and parent child relationship (mother-child and father-child relationship).

2. MATERIAL AND METHODS

2.1 Study Design: A cross sectional analytical study design

2.2 Hypotheses: Hypothesis1 states that there exists significant difference in problem behaviour among children with the variation in socioeconomic status.

Hypothesis2 states that there exists significant difference in problem behavior among children with the variation in parent child relationship (mother-child and father-child relationship).

2.3 The sampling technique: The purposive sampling technique has been used for the present study.

2.4 Sample: Sample were Bengali male and female with 30 to 45 years of age who reside in Kolkata and having children whose age are not more than 10 years. The total number of parents was 100 and it was ensured that these participants did not suffer from chronic physical and mental disturbances as well as parents who are either separated or divorced and presently are not staying with their children were not considered for the present study.

2.5 Data Collection Tools: The data collection tools which have been used for the present study were-

2.5.1 An information schedule

An information schedule was prepared containing the name, age, sex, educational qualification, marital status, occupation, number of family members, monthly family income, relationship with their spouse and child, present and past history of alcohol and drug addiction, mental and physical health and history of separation, problems their children are suffering from, whether their children have ever been treated etc.

2.5.2 Modified Kuppaswamy SES scale [22]

This scale was developed to measure the socioeconomic status of the urban population. This scale is widely used to measure the socioeconomic status of the family. According to this scale education and occupation of head of the family are considered whereas family income is considered in case of the variable income.

2.5.3 The Child Behaviour Checklist [23]

This scale identify problem behaviour in children, is a widely used caregiver report form in both research and clinical practice with youths [21]. CBCL (CBCL/6-18) with school age version provides instructions to the respondent who knows the child well (usually a parent or other close caregiver) regarding reporting on the child's problems. This scale takes about 15 to 20 minutes to complete. For scoring initially similar questions are grouped into a number of syndrome scale scores to produce a raw score for that syndrome. Then total score is obtained by the summation of syndrome scale scores. This test was used as it is simple as well as having adequate psychometric properties.

2.5.4 Parent Child Relationship Scale [24]

The parent child relationship scale was developed by Rao in 1989. This scale is used to measure the relationship between the parent and child. This scale was adapted from the revised Rao-Seigalman parent child relationship questionnaire. This scale consists of 100 items with 10 dimensions. Participants are asked to rate the statements on the basis of their perception about their relationship of father and mother on 5points scale ranging from 'Always' (5) to 'very rarely' (1). Scoring is done separately for father and mother on the basis of the summation of the weighted values of 5, 4,3,2,1 for each dimension to obtain 10 scores for father and 10 scores for mother. Finally these 10 scores of father and mother are added up to obtain the final total score separately for both father and mother. The total raw scores are converted into z-score to obtain the grade and level of parent child relationship. This scale was used in the present study as it is uncomplicated and also has good psychometric properties.

2.6 Procedure and Analysis: Data were collected in group (maximum with 20 participants by maintaining necessary Covid protocols) at the various schools in Kolkata with special appointment and after taking consent from the school authority and the participants. Data were analyzed separately for socioeconomic status scale and parent child relationship scale by using SPSS 23.

3. RESULTS AND DISCUSSION

The means and standard deviations of the study variables such as age, socioeconomic status, mother-child relationship, father-child relationship and problem behaviour are presented in Table 1.

Table 1: Mean and SD values for all the variables with 100 males (fathers) and 100 females (mothers)

Variable	Mean	Standard Deviation
Fathers' age	39	3.10
Mothers' age	37	2.74
Socioeconomic status	22.14	6.52
Mother-Child relationship	246.46	27.37
Father-Child relationship	235.89	29.03
Problem Behaviour	78.88	33.92

Results indicated that mean score of age is higher for father whereas mean score of parent-child relationship is higher for mother.

To understand how problem behavior in children varies with the variation in socioeconomic status of the family and parent child relationship, the formulated hypotheses were tested.

To test hypothesis 1 and 2, Analysis of Variance (one way) was conducted with problem behavior as dependent variable and socioeconomic status and parent child relationship as independent variable. The results are presented in Table 2 and 3 (df 2, 47), ($P < .001$).

Table 2: Results of ANOVA (one way) to determine the effect of socioeconomic status on problem behaviour

Independent variable	Levels	No. of families(N)	Dependent Variable	F
Socioeconomic status	Upper	32	Problem behavior	13.16**
	Upper middle + Lower middle	43		
	Upper lower	25		

***One way ANOVA**

Results reveal that problem behavior in children differed significantly due to the variation in socioeconomic status. Thus, the impact of socioeconomic status on problem behaviour among the children is significant ($P < .001$).

Therefore, hypothesis 1 was accepted.

Table 3: Results of ANOVA (one way) to determine the effect of parent-child relationship on problem behaviour

Independent variable	Levels	No. of individuals(N)	Dependent Variable	F
Mother-Child relationship	Above average relationship	38	Problem behavior	22.07**
	Average relationship	42		
	Below average relationship	20		
Father-Child relationship	Above average relationship	35	Problem behavior	21.14**
	Average relationship	40		
	Below average relationship	25		

***One way ANOVA**

Results reveal that problem behaviour in children differed significantly due to the variation in mother-child and father-child relationship. Thus, the impact of parent child relationship on problem behaviour among the children is significant ($P < .001$).

Thus hypothesis 2 was accepted.

The present study findings indicated that problem behaviour among children differ significantly with the variation in the socio-economic status of the family. Thus, socio-economic status resulted to significantly impact the problem behaviour of the children. The present study findings has been corroborated by an almost contemporary study by Bradley and Corwyn (2002) as the findings showed that socio-economic status of the parents had a significant effect on the well-being in terms of the family as well as neighborhood of the child [4]. Another very recent contemporary study conducted by McGrath and Elgar (2015) in which obtained results were also in the same line of the present study findings. This study examined the impacts of Socio-economic Status of Parents on Behavioural Problem of Children. Obtained results are in line with the present study findings because behavioural problems in children were found to be reinforced by their social contextual influences within the family, the school and the community [14]. To emphasis on implications on the basis of the present study findings another very recent study may be highlighted as conducted by Piotrowska, Stride, Croft and Rowe (2015) on the relationship between Socio-economic Status of the individuals and Anti-social Behaviour. Their study findings

revealed a strong association as results showed that lower socio-economic status of the individuals is highly associated with higher levels of anti-social behaviour [25].

On the basis of such findings suggestions need to be imparted to take necessary measures in terms of guidance and counselling which are required to begin essentially at the preschool level.

Another significant part of the study findings revealed that problem behaviour among children differ significantly with the variation in mother child and father child relationship. Thus, parent child relationship resulted to have significant impact on the problem behaviour of the children. There are also available study findings which are in the same line of the present study and findings of the one of such an interesting study may be highlighted where Agnes, Eli and Benedicta (2020) showed that mothers' authoritative parenting has significant impact on child emotional problems, whereas fathers' authoritative and authoritarian parenting has significant impact on child behavioural problems. In favour of the stronger parent child relationship in reducing problem behaviour were indicated by some Indian studies and one of such very recent study with relevant implications may be highlighted where Mohil, Neena, Bishnoi, Kaur, Neelam, Phougat and Sarin (2018) showed stronger significant negative relationship between parent child relationship and occurrence of problem behaviour in preschool children [26].

Discussing the present study findings in the light of some recent related studies, the present study appeals for an urgent need to develop school counselling setup to all the section of the society for sharing realistic and need based understanding regarding child development.

Though the present study has following constraints and limitations-

- 1) The generalizability of the study has been reduced due to relatively small sample size.
- 2) Study sample was not free from biasness because most of the study participants were from north Kolkata which restricted zone wise mapping for sample selection.
- 3) Tools used in the study were self report inventory that possibly included self reporting biases.
- 4) Parents of those children who are either separated or divorced and also do not stay with their children, were not included in the present study.

4. CONCLUSION

The present study concludes that there are significant impact of socioeconomic status and parent child relationship on problem behaviour among child.

The present study has implications in emphasizing that socioeconomic status of the family and nature of parent child relationship play a pivotal role in generating internalizing and externalizing problem behaviour sometimes separately and sometimes together which gradually may turn into developing chronic psychological disturbances. Therefore, in such circumstances necessary preventive measures are much more crucial than problem based curative measures. Therefore, it is mandatory to provide psychological guidance and counselling by the efficient, qualified and experienced psychologists even from the preschool level. Students and their parents should be provided sufficient scope to open up or explore their problems as well as feelings and must be guided with solution based approach. Parents should also be adequately guided regarding the child rearing practices based on their socioeconomic and psychosocial circumstances. There must also be scope of follow-up sessions where students and parents both can share their experiences after they have started to impart their understandings which have been developed out of all the previously attended sessions. Various relevant approaches which are realistic and need based can only bring positive changes in the individuals and largely in the society.

Consent

Consent was obtained from the school authority and all the study participants of the study.

Ethical approval

The study objectives, the option to withdraw from the study at any given anytime, privacy, and anonymity of the collected information were explained to the participants' prior inclusion and also obtained their consent. Confidentiality was ensured throughout all steps of the study.

REFERENCES

1. National Centre for Educational Statistics. Accessed: 31 March 2008. Available: <http://nces.ed.gov/programs/coe/glossary/s.asp>
2. Marmot M. The Status Syndrome: How Social Standing Affects Our Health and Longevity. 1st ed. New York: Owl Books; 2004.
3. Hunt JM. Early childhood education and social class. *Canadian Psychologist/Psychologie canadienne*. 1972;13(4):305-328. <https://doi.org/10.1037/h0082195>
4. Bradley R, Corwyn R. Socioeconomic Status and Child Development. *Annual review of Psychology*. 2002;53(1):371-399. <https://doi.org/10.1146/annurev.psych.53.100901.135233>
5. Wilkinson RG, Pickett K. *The Spirit Level: Why More Equal Societies Almost Always Do Better*. London: Allen Lane; 2009.
6. Shisheghar S, Dolatian M, Majd, HA, Bakhtiary M. Socioeconomic Status and Stress Rate during Pregnancy. *Global Journal of Health Science*. 2014;6(4):254–260. <https://doi.org/10.5539/gjhs.v6n4p254>
7. Betty H, Risley TR. *Meaningful Differences in the Everyday Experience of Young American Children*. Baltimore:Brookes Publishing; 1995.
8. Hackman DA, Farah MJ. Socioeconomic status and the developing brain. *Trends Cogn Sci*. 2009;13(2):65–73. <https://doi.org/10.1016/j.tics.2008.11.003>
9. Tandon PS, Zhou C, Sallis JF, Cain KL, Frank LD, Saelens BE. Home environment relationships with children's physical activity, sedentary time, and screen time by socioeconomic status. *Int J Behav Nutr Phys Act*. 2012;88(9). <https://doi.org/10.1186/1479-5868-9-88>
10. Kraus MW, Keltner D. Signs of Socioeconomic Status: A Thin-Slicing Approach. *Psychological Science*. 2008;20(1):99–106. <https://doi.org/10.1111/j.1467-9280.2008.02251>
11. Clark EV. *First Language Acquisition*. 2nd ed. New York : Cambridge University Press; 2009.
12. Kusserow A. De-Homogenizing American Individualism: Socializing Hard and Soft Individualism in Manhattan and Queens. *Ethos*. 1999;27(2):210–234. <https://doi.org/10.1525/eth.1999.27.2.210>
13. Luo S, Liu Y, Zhang D. Socioeconomic status and young children's problem behaviours – mediating effects of parenting style and psychological suzhi. *Early Child Development and Care*. 2019;191(1):148-158. 10.1080/03004430.2019.1608196.
14. McGrath PJ, Elgar F. Effects of Socio-Economic Status on Behavioral Problems. *International Encyclopaedia of the Social & Behavioral Sciences*. 2nd ed. Elsevier Ltd; 2015 <https://doi.org/10.1016/B978-0-08-097086-8.23052-3>
15. Tremblay RE. When children's social development fails. In: Keating DP, Hertz-man C, editors. *Developmental health and the wealth of nations: Social, biological, and educational dynamics* (pp. 55–71). New York: Guilford; 1999.
16. Wilkinson R, Marmot M. Psychosocial and material pathways in the relation between income and health: a response to Lynch. *British Medical Journal*. 2001;322(7296):1233–1236. <https://doi.org/10.1136/bmj.322.7296.1233>
17. Reiss F. Socioeconomic inequalities and mental health problems in children and adolescents: A systematic review. *Social Science & Medicine*. 2013;90(1):24-31. <https://doi.org/10.1016/j.socscimed.2013.04.026>
18. Alizadeh S, Mansor, Abu Talib M, Abdullah R, Mansor M. Relationship between Parenting Style and Children's Behavior Problems. *Asian Social Science*. 2010;12(7):195-200.
19. Agnes S, Eli P, Benedicta A. Parenting styles and their impacts on child problem behaviors. *Jurnal Psikologi*. 2020;19:269-285. <https://doi.org/10.14710/jp.19.3.269-285>
20. Hosokawa R, Katsura T. Role of Parenting Style in Children's Behavioral Problems through the Transition from Preschool to Elementary School According to Gender in Japan. *Int J Environ Res Public Health*. 2019;16(1):21. <https://doi.org/10.3390/ijerph16010021>
21. Conger RD, Conger KJ, Martin MJ. Socioeconomic Status, Family Processes, and Individual Development. *J Marriage Fam*. 2010;72(3):685–704. <https://doi.org/10.1111/j.1741-3737.2010.00725.x>
22. Modified Kuppuswamy Scale. Accessed: 2 Mar 2021. Available: <http://www.ihatepsm.com/blog/modified-kuppuswamy-scale>.
23. Achenbach TM, Rescorla LA. *Manual for the ASEBA Preschool forms and Profiles*. Burlington, VT: University of Vermont Department of Psychiatry; 2000.
24. Rao N. *Manual for Parent Child Relationship Scale (PCRS- RN)*. Agra: National Psychological Corporation; 1989.
25. Piotrowska P, Stride C, Croft S, Rowe, R. Socioeconomic status and antisocial behaviour among children and adolescents: A systematic review and meta-analysis. *Clinical Psychology Review*. 2015;35:47-55. <https://doi.org/10.1016/j.cpr.2014.11.003>
26. Mohil D, Neena, Bishnoi S, Kaur G, Neelam, Phougat J et al. To assess the parent child relationship and occurrence of behavioural problems among preschooler visiting to pediatric OPD. *The Pharma Innovation Journal*. 2018; 7(7):450-452.