


## Chapter 8

# Social and Emotional Well-Being of Adolescents From Disadvantaged Backgrounds

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### ABSTRACT

*Well-being is an amorphous amalgamation of positive health, socioemotional competencies, and ethical sensibilities. The well-being of a child is influenced by social settings (family, peers, and community) as well as the supportive relationships experienced in educational settings. Therefore, the present study examines the social and emotional well-being (SEW) of adolescents from disadvantaged backgrounds. This study is quantitative in nature and employs a cross-sectional survey design. A self-administered SEW tool was used to assess the student's wellbeing. The findings of the study reveal that more than 45% of the adolescents had low or emerging wellbeing scores in all five dimensions measured. The study results emphasise the need for SEW interventions among adolescents from disadvantaged backgrounds. Responses from adolescents also suggest an urgent need to empower teachers and educate parents on the importance of non-academic skills in education, who can serve as social and emotional role models over time, empowering students to overcome adversity and thrive.*

### INTRODUCTION

Well-being is about feeling good and functioning effectively. The concept of “feeling good” involves the experience of positive emotions, trusting relationships, the development of one’s potential and a sense of purpose in life (Huppert, 2009,). It is a condition that allows young people to progress and thrive. Well-being is crucial for positive development in adolescents, which enables them to achieve positive outcomes

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### ***Emotional Well-Being of Adolescents From Disadvantaged Backgrounds***

in school, work, and life (Durlak et al., 2015; Srikala & Kishore, 2010). The concept of “well-being” has grown and extended to many different areas. The term “well-being” is often used interchangeably with words such as happiness, satisfaction, wellness, welfare, etc. A systematic review by Pollard and Lee (2003) found that well-being is not consistently defined, and the key dimensions commonly used were physical, psychological, cognitive, social and economic well-being. In the past few decades, scientific research literature has seen a shift in emphasis from health and disorders to well-being and positive mental health. This shift has led to a broadened definition of health, referred to as a “state of physical, social and mental well-being” (WHO, 1986). Since then, various initiatives have recommended that schools take responsibility for promoting adolescents’ social and emotional well-being.

Research studies have shown that the definitions of “well-being” vary in the literature and that the multidimensional nature of well-being is very well accepted. Of all the varying dimensions, the social and emotional dimensions of well-being are found to be the most widely studied, included and accepted. (CYPSC: Social and Emotional Learning, 2016; Kulkarni et al 2021). Social and Emotional Well-being (SEW) is considered the heart of “true well-being.” In general, it is the child’s ability to comprehend and control their emotions and behaviours, as well as their capacity to get along well with their peers. In simple terms, SEW is the ability to adapt to and deal with daily challenges while leading a fulfilling life. It also covers various aspects like better mental health, life satisfaction and social emotional skills, which are key to children’s development and play an important role in shaping a range of well-being outcomes (Kautz et al., 2014). Studies have shown an increase in social, emotional well-being and mental health problems among children and young people (Collishaw et al., 2004; Sunitha and Gururaj, 2014). Adolescents with low SEW are more likely to struggle at home, with peer groups, and at school, and are less likely to have positive social and emotional well-being (Noonan & Fairclough, 2018). Evidences demonstrate that relationships and experiences in the community in which adolescents reside have a substantial impact on their development, self-esteem, social adjustment and well-being (Barth et al. 2004; Singhal & Prakash, 2021).

Children from disadvantaged backgrounds have limited opportunities for growth and learning. They do not enjoy their childhood or have the same benefits as children from advantaged neighbourhoods. They may not always be as successful as the children from privileged communities, who have more avenues for learning and transform into productive and responsible citizens. Many of them drop out of school, leaving them with less knowledge, fewer skills, and lower life satisfaction (Inchley et al., 2018). This can reduce their chances of becoming productive members of society.

Numerous research studies have found that children from low-income families lag behind in many areas of well-being (Saith & Wazir, 2010). The root causes of this disadvantage are the challenges that adolescents face in their families, at school, and in the community. The parents of these children are not able to support them academically, nor are they able to provide the nourishment required for their cognitive, social and personal growth (Helms et al., 2021; Ratra D., Singh K. 2022). Growing up at the end of the socioeconomic ladder, these children lack any positive role models to enhance their self-worth, interpersonal skills, and future perspectives. These children are more likely to face stress and challenges in their homes, schools, and communities, which may have an impact on their overall well-being (Fraizer et al., 2015; Ray et al., 2022).

Gender differences do exist among adolescents based on their biological and psychological differences. Research on differences between males and females well-being has not yielded consistent outcomes (Matud et al., 2019; Verma et al., 2011). Some research studies demonstrated differences in well-being, although females reported experiencing positive and negative emotions with greater frequency and in-

### ***Emotional Well-Being of Adolescents From Disadvantaged Backgrounds***

tensity than males (Diner et al., 2014; Rao & Komala, 2017). Studies have shown differences between male and female in some well-being indicators, but such differences vary depending on factors such as culture, age, roles played and the environment (Li.R et al,2015). A study by Akter (2015) shows a significant difference in the well-being of male and female adolescents. Females scored lower in well-being indicators compared to men (Carmel 2007)

Based on this context, the present study examines the well-being of children from disadvantaged backgrounds. The study focuses on the SEW of adolescents studying in tribal and social welfare schools. The tribal welfare and social welfare residential schools aim to transform the lives of marginalised children by providing a congenial atmosphere in which they can excel academically and become morally and ethically strong adults. The children studying in these residential schools come from remote villages where they lack proper education and health facilities, poor infrastructure, limited access to technology and have a high risk of abuse, violence and crime (Narain, 2019). Despite several projects and programmes developed by the state and central governments for the benefit of the oppressed, children from disadvantaged backgrounds fall behind the general population in many areas. The diverse perspectives on education and varied beliefs among them could be one of the main reasons for their backwardness. All these can have an adverse effect on the well-being of young people. Though there are numerous studies assessing the well-being of students all over. Until recently, very limited studies have been conducted on the social and emotional well-being (SEW) of students, especially those from disadvantaged backgrounds.

The objective of the present study is to examine the SEW of students from disadvantaged backgrounds. The study is critical for two significant reasons. First, the study gives an understanding of the overall SEW of students. Second, the study examines the well-being of adolescents on five dimensions of well-being. The findings of the study will assist educators and school administrators in knowing the social and emotional competencies of students from disadvantaged backgrounds. The results will also support the planning and preparation of school-based well-being interventions for the students.

## **METHODOLOGY**

The present study used a cross-sectional survey design to examine the SEW of adolescents. The study involved 1097 students from 10 schools (tribal and social welfare). The schools were chosen based on consent, geographical proximity, and ease of access.

**Measurements:** A Social Emotional (SEW) tool prepared as part of the larger study was used to assess the well-being of adolescents. The tool is multi-dimensional and measures intrapersonal and interpersonal characteristics. The SEW scale draws upon the theories of positive psychology and ecological systems theory to suit the dimensions to a child's well-being. The five dimensions of SEW are personal, social, emotional, resilience and social support. The tool has an internal consistency of 0.86. It consists of 36 statements rated on a 4-point Likert scale. The tool has both positively and negatively worded items to minimise extreme response bias and acquiescence bias. The tool is also reverse-scored to overcome the problem of response bias in self-reported surveys. By adding up the scores for each statement, the overall score is determined, which is classified into different levels as low, emerging, developing, and highly developed for specific score ranges.

**Data Collection:** The data collection began after obtaining consent from the school authorities. The students were informed about the study's purpose and benefits. The participation of students was voluntary, and they were assured of confidentiality. Demographic profiles of the students were collected

### ***Emotional Well-Being of Adolescents From Disadvantaged Backgrounds***

along with the survey. Any questions about filling out the survey tool were answered. The questionnaire was filled out during school hours.

**Data analysis:** The data collected through the survey was coded and computed using SPSS. The dimensions of well-being as well as overall well-being were examined. An independent t test was computed to assess the well-being of adolescents based on gender.

**Ethical considerations:** The survey tool was translated into Telugu for easy understanding by students. No personal information, including name, mobile number, or correspondence address, was gathered as part of the survey and was purely voluntary.

## **RESULTS OF THE STUDY**

### **Demographic Profile of the Participants**

The study involved 1095 participants from 10 schools, of which 5 were tribal welfare schools and the other 5 were social welfare schools. The study had 53% female and 47% male participants studying in grades 6 to 8, between the ages of 13-15 years. Most of the respondents (88%) were in the age group of 13–14 years.

*Table 1. Overall SEW (global score) of the students*

Status	Frequency	Percentage (%)
Low	285	26.0
Emerging	294	26.8
Developed	272	24.8
Highly Developed	244	22.2
Total	1095	100.0

Table 1 represents the overall SEW score of the students. Most of the students have a low (26%) and emerging (26.8%) SEW score, which collectively comes to 52.8%. Only 47% of students have a well-developed or highly developed sense of well-being. This highlights the need to focus the social and emotional skills sets of the students as more than half of the student's well-being is at risk.

*Table 2. Emotional well-being*

Status	Frequency	Percentage (%)
Low	284	25.9
Emerging	306	27.9
Developed	270	24.7
Highly Developed	235	21.5
Total	1095	100.0

**Emotional Well-Being of Adolescents From Disadvantaged Backgrounds**

Table 2 indicates the emotional well-being of the adolescents. The respondents have an overall emotional well-being score of 19.22 points. The majority of the students have scored emerging (27.3%) and low (24.9%) well-being levels, which indicate that the respondents have difficulties identifying or managing emotions, feelings and thoughts. The students were unable to use appropriate skills or strategies while experiencing negative emotions. This, in turn, can lead to stressful events at home, with peers and at school.

*Table 3. Social well-being*

Status	Frequency	Percentage
Low	288	26.3
Emerging	307	28.0
Developed	257	23.5
Highly Developed	243	22.2
Total	1095	100.0

Table 3 displays the social well-being status of the respondents. Social well-being is the maintenance of healthy and positive relationships with others and the absence of disruptive and challenging behaviours. The respondents have an overall average social well-being score of 35.9 points. 26.3% of respondents scored low and 28% have an emerging well-being status. These students find it difficult to interact with their peers or teachers in class, resolve conflicts, participate in classroom and school activities. Only a quarter (22.2%) of the respondents have a highly developed well-being status. This emphasises the need to encourage students to learn a variety of social skills along with academic skills.

*Table 4. Personal well-being*

Status	Frequency	Percentage
Low	336	30.7
Emerging	306	27.9
Developed	195	17.8
Highly Developed	258	23.6
Total	1095	100.0

Table 4 displays the personal well-being of adolescents. Most respondents (58.6%) have a low or emerging well-being score, indicating the importance of improving personal well-being skills. Less than half of the respondents have highly developed or developed Personal (belief in self and doing tasks independently) skills. The respondents have an overall average personal well-being score of 36.5 points. These students display very low self-confidence, lack belief in their ability to handle stressful situations and have very little knowledge of their own strengths and weaknesses. The students find it difficult to take decisions independently and often get their peers' or teachers' help.

**Emotional Well-Being of Adolescents From Disadvantaged Backgrounds***Table 5. Level of resilience among the students*

Status	Frequency	Percentage
Low	355	32.4
Emerging	300	27.4
Developed	301	27.5
Highly Developed	139	12.7
Total	1095	100.0

Table 5 displays the resilience status of adolescents. The overall resilience skills score is 18.59 points. 32.4% of respondents have a low resilience status. It is significant to note that when combining the emerging (27.4%) and low (32.4%) well-being status, around 60% of the respondents' resilience skill sets need to be improved. Only 12.7% of the respondents have a highly developed state, which indicates students need to work on building their resilience (e.g., to deal with failure, setbacks in life and cope with unexpected problems).

*Table 6. Social support status*

Status	Frequency	Percentage
Low	354	32.3
Emerging	280	25.6
Developed	317	28.9
Highly Developed	144	13.2
Total	1095	100.0

Table 6 displays the social support status of the respondents. 32.3% of the respondents have very low social support status, lower compared to other dimensions (social and emotional) of well-being measured. The respondents have an overall average social support skill of 21.3 points. The above table indicates that more than half of the respondents have either emerging or low well-being, the aggregate of which comes to 57.9%, which is an area that requires attention. Only 13.2% of the respondents have highly developed social skills, which emphasises the need to improve social support (e.g., seeking support from peers, teachers, siblings, a caring and supportive environment at school, etc).

**Emotional Well-Being of Adolescents From Disadvantaged Backgrounds***Table 7. Gender and well-being status*

Well-being Dimensions	Gender	Mean	Std. Deviation	P Value
Emotional Well-being	Male	19.03	2.905	.030
	Female	19.41	2.793	
Resilience	Male	18.68	2.684	.291
	Female	18.50	2.848	
Social Support	Male	21.01	2.972	.000
	Female	21.70	2.832	
Social Well-being	Male	35.43	4.378	.000
	Female	36.54	4.600	
Personal Well-being	Male	36.71	4.168	.150
	Female	36.34	4.339	
SEW Global Score	Male	130.87	10.444	.014
	Female	132.49	11.296	

Table 7 shows the gender and well-being scores of the respondents. The female respondents have a higher overall average SEW (132.49) when compared to the male respondents (130.97). The dimension-wise well-being score shows that female participants have a higher score in the three dimensions (social support, social and emotional) of well-being.

The statistical tests (independent sample t-test) show a statistically significant difference in overall well-being (significance at the 0.00 level). The results also show a statistically significant difference in three dimensions of well-being (social, emotional, and social support skills) among male and female adolescents. There is no statistically significant difference between male and female respondents in the resilience and personal well-being dimensions.

## DISCUSSION

This study aimed to explore the overall SEW of school going adolescents from disadvantaged backgrounds. The study further investigated well-being based on five dimensions: social, emotional, social support, resilience and personal well-being. Results revealed that more than half of adolescents had low emotional well-being and were unable to recognise or manage their emotions appropriately at school or with peers. Earlier studies have shown that school climate and environmental influences (family, community, etc.) can have an impact on adolescents' emotional well-being, resulting in conflicts, bullying, abuse, and a lack of interest in school activities (Haynie et al., 2001). This can negatively affect an individual's adult life and may lead to low participation in social and work-related activities in the future (Drydakis, 2014).

The study results showed that the majority of students found it difficult to participate in classroom-related activities and maintain positive relationships with teachers and peers (low social well-being and social support skills). The study also emphasised the importance of providing a caring and supportive environment that encourages adolescents to seek and provide support in times of need. Similar studies

### ***Emotional Well-Being of Adolescents From Disadvantaged Backgrounds***

have shown that an individual's healthy functioning and development can be affected if adolescents are unable to get along well with others and form relationships (Burt et al., 2008).

Nearly 60% (Table 5) of the students found it difficult to deal with failure, setbacks in life, and finding solutions to challenging situations. Similar studies show that enhancing resilience skills can help young people recover from difficult circumstances and prevent the onset of mental health issues (Stempleman et al., 2009; Rudwan & Alhashimia, 2018). Schools, families, and communities all play an important role in helping adolescents overcome adversity (Nourian et al., 2016; Panahi, 2015).

Responses on personal well-being showed that 58.6% (Table 4) of the adolescents had low or emerging scores, indicating the need to improve personal skills (belief in oneself, doing things independently, etc.). This was consistent with previous research, which found that disadvantaged adolescents exhibited lower motivation, belief in themselves, and autonomy skills during the educational journey (Cosgun Geyik, 2016; Aarepattamannil et al., 2011).

The study also tried to examine the gender influence on adolescents' SEW. The present study showed a significant difference in the well-being scores of male and female students. This is consistent with earlier findings (Pullikal, 2020; Hasan, 2019). Likewise, significant differences were observed in other dimensions of well-being, such as social, emotional and social support status, where female respondents had higher scores. This difference in emotional and social well-being can be due to diverse roles and emotional expressions among male and female members. This may be one of the reasons why, despite adversity, female respondents were able to seek assistance and perform better in terms of social support skills (Prabhu & Shekhar, 2017).

The adolescents exhibited low personal skills (self-efficacy and autonomy). No significant difference was reported in the self-efficacy of male and female students, which was in agreement with earlier studies (Hariharan & Nagalingam, 2019). As far as resilience skills are considered, some research studies showed moderate resilience (Prabhu & Shekhar, 2016) while a few others showed significant gender differences (Saranya & Deb, 2016). However, the current study found no significant differences in resilience skills among male and female students. Extreme adversity can be one of the reasons why both male and female students are equally resilient.

The study findings thus indicate an immediate need to enhance the SEW of adolescents. Numerous research studies on school-based universal social and emotional interventions have yielded positive outcomes and prosocial behaviours, leading to a decrease in problem behaviours (bullying prevention, self-control development and conflict resolution) among school-aged students (Durlak et al., 2011; Sklad et al., 2012; Taylor et al., 2017). At the same time, research studies have highlighted the influence of the environment (by peers, family and society) as a defining factor of well-being (Sawyer et al., 2012). According to studies from India and the West, the demographic factors and sociocultural background from which an individual comes, play an important role in their well-being (Diener et al., 2003; Ratra & Singh, 2022).

Therefore, the findings of the current study emphasise the need for SEW interventions that specifically address the needs of adolescents from disadvantaged backgrounds. As these students come from an environment with a varied set of beliefs and cultural practises, a contextualised intervention would be more apt to help the children grasp concepts, enjoy learning and enhance their well-being. In addition to this, the study recommends solutions at two more levels: teachers and parents. Most of the parents of these children have no or only elementary education, so there is a need to orient them on the importance of social and emotional skills along with academic skills. This, in turn, can promote a supportive and caring environment at home, which will motivate students to learn. This can further strengthen parents



### ***Emotional Well-Being of Adolescents From Disadvantaged Backgrounds***

roles as pillars of support for their children. Given the magnitude of the issue, the study entails the need to build the capacity of teachers with the necessary knowledge and social and emotional skills that will help them take care of their own wellness and that of their students. This will also help teachers act as mentors, enabling young people to thrive.

## **LIMITATIONS**

The SEW among adolescents was assessed using a self-reported measure in this quantitative survey. The data collection for this study was limited to adolescents only. Future studies should look into collecting data from other informants (teachers and parents), which would provide a more reliable and comprehensive picture of well-being. The researcher selected the schools based on consent obtained from authorities and geographical proximity. Therefore, it is advisable to use more systematic sampling for future studies. As the primary goal of this study was to assess the SEW of adolescents from disadvantaged backgrounds, the researchers encourage future research studies on SEW interventions and their impact on adolescents.

## **CONCLUSION**

Despite limitations, this paper aimed to reflect on the SEW of adolescents growing up in adversity, subjected to poverty, deprivation and social exclusion. The findings of this study highlight the need for schools to prioritise developing the social and emotional competencies of adolescents along with their academic skills. Responses from students also suggest an immediate need to empower teachers and educate parents on the importance of non-cognitive skills in today's world. This can help teachers and parents act as social and emotional role models in school and at home which, over time, empower students to overcome adversity and engage in active learning. A caring and supportive family, good-quality education, empowered teachers and a supportive environment are great assets for well-being, which will provide adolescents with the resources, enrichment, and opportunities they need to grow, learn and thrive.

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**Emotional Well-Being of Adolescents From Disadvantaged Backgrounds**

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**Emotional Well-Being of Adolescents From Disadvantaged Backgrounds**

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**Emotional Well-Being of Adolescents From Disadvantaged Backgrounds**

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### ***Emotional Well-Being of Adolescents From Disadvantaged Backgrounds***

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## **KEY TERMS AND DEFINITIONS**

**Emotional Well-Being:** The ability to successfully handle life's stresses and adapt to change and difficult times.

**Personal well-Being:** The ability to evaluate their own lives for positive functioning.

**Resilience:** The ability to persist, adapt, and bounce back from adverse life events.

**Social and Emotional Well-being:** The ability to recognize and manage emotions and to form social connections and relationships with the world around us.

**Social Support:** Individuals perceived social and psychological support from significant others.

**Social Well-Being:** The ability to develop and maintain positive interactions with other people.