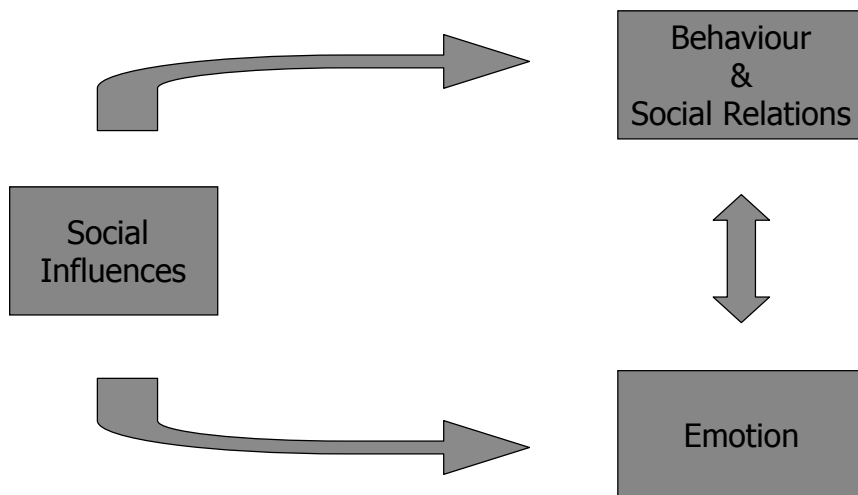


# Peer relations and socio-emotional functioning in schools: Connecting psychological research and educational practice

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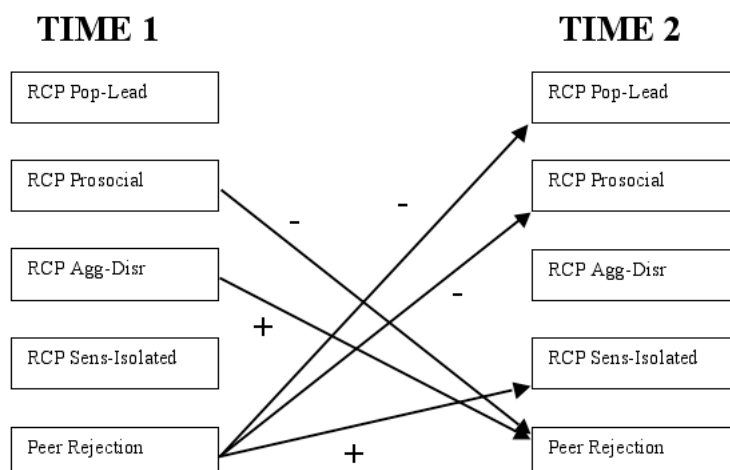


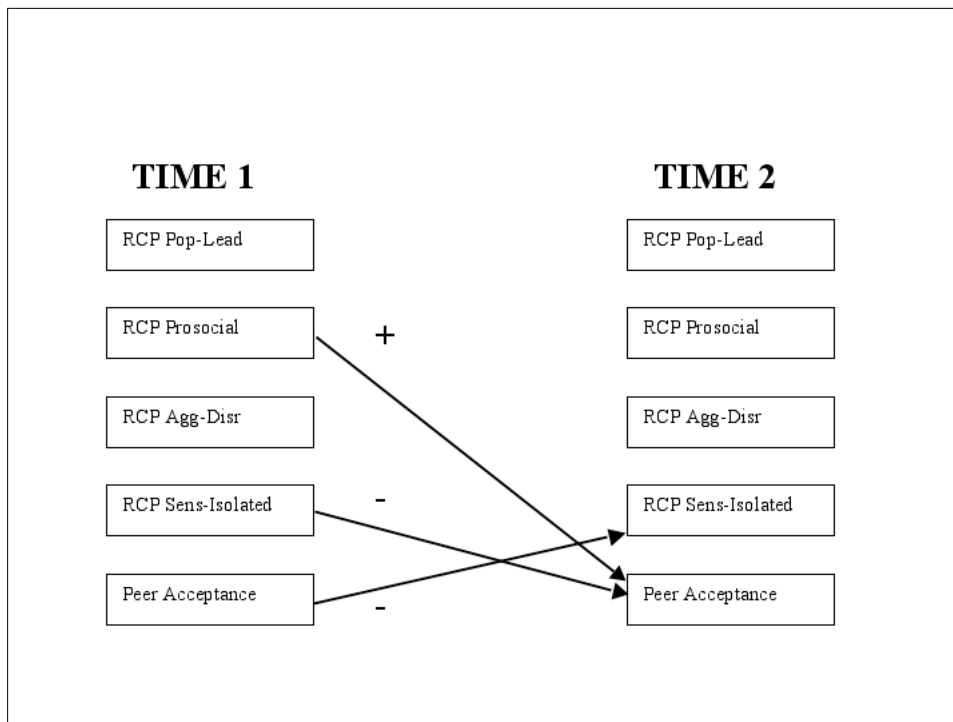
plus genetic influences too!

# Understanding the links between peer relations, behaviour, and emotion

- links apparent from the very beginning
  - e.g., Fantuzzo et al.'s Peer Play Inventory with 2-3-year-olds
    - interactive play
    - disruptive play
    - disconnected play
  - all significantly correlated with the SDQ difficulties subscales (Mathieson & Banerjee, 2008)

- behavioural reputation within the peer group?
- 24-month longitudinal study of 270 primary school children (Banerjee & Watling, submitted)





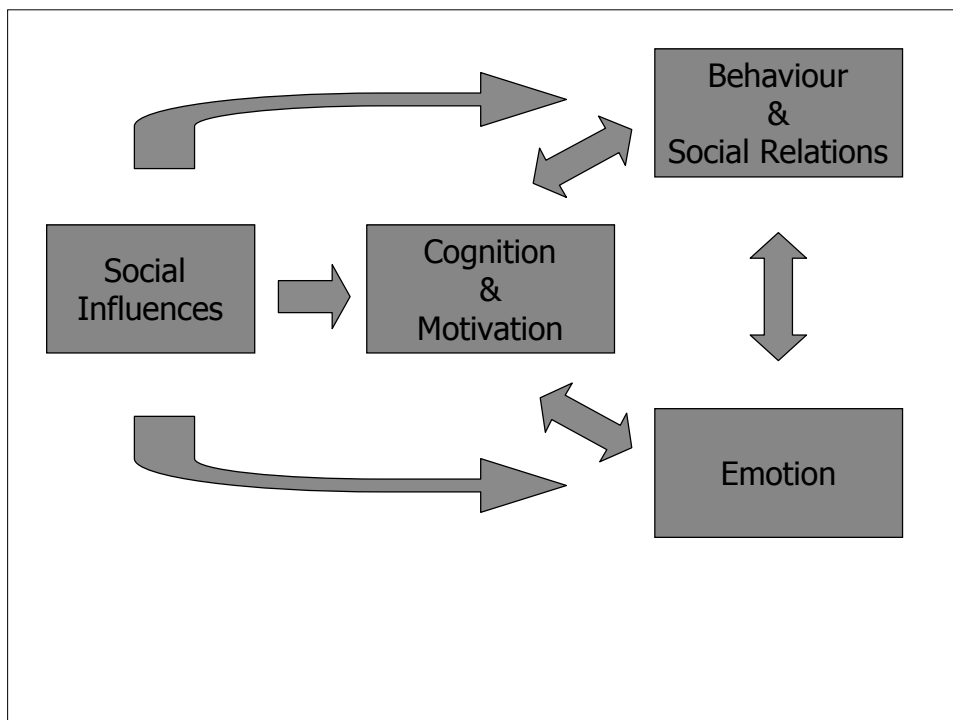
- similar links between peer relations and behaviour (both peer- and teacher-reported behaviour) in secondary schools too
  - e.g., study for Ofsted evaluation of Secondary SEBS pilot (2007)
- connections between peer rejection and emotional difficulties (e.g., depression, anxiety)
- many peer rejected children stay rejected over years of schooling
- possible long-term consequences

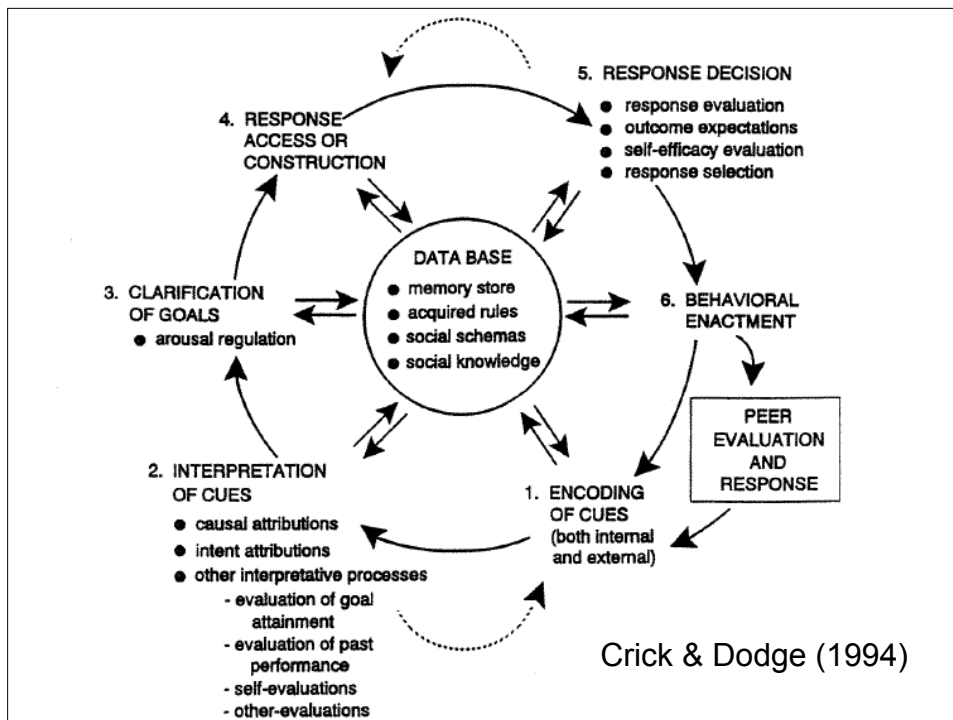
SO...

- tackle 'problem' behaviour (e.g., aggression, withdrawal)
- teach (or support learning of) prosocial behaviour
- address negative social influences if possible

... improving peer relations and reducing emotional problems

?





- beliefs about yourself
- beliefs about others (e.g., parents, peers, teachers)
  
- awareness of your own mental states
- understanding of other people's minds
  
- interpretations of events
- knowledge of:
  - problem-solving approaches
  - ways of coping with uncomfortable feelings
  - self-regulation strategies
  
- personal and social goals

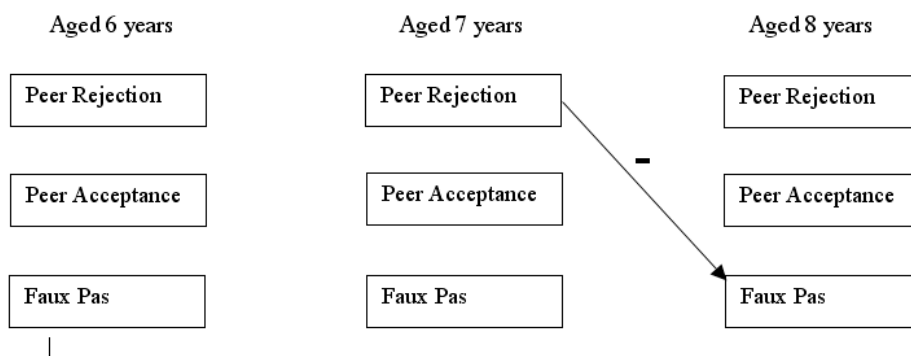
# Social understanding

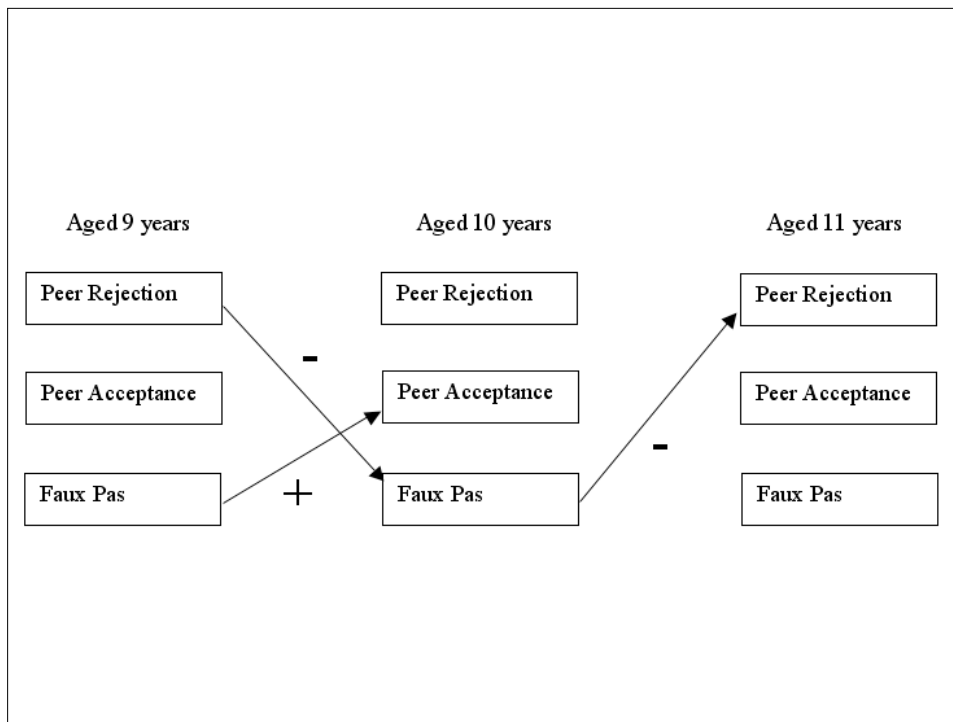
- e.g., faux pas task first developed in the context of work with high-functioning ASD children (O’Riordan et al., 1999)

- apply to typically-developing samples?



- longitudinal data from 210 children over three school years (Banerjee & Watling, in prep.)





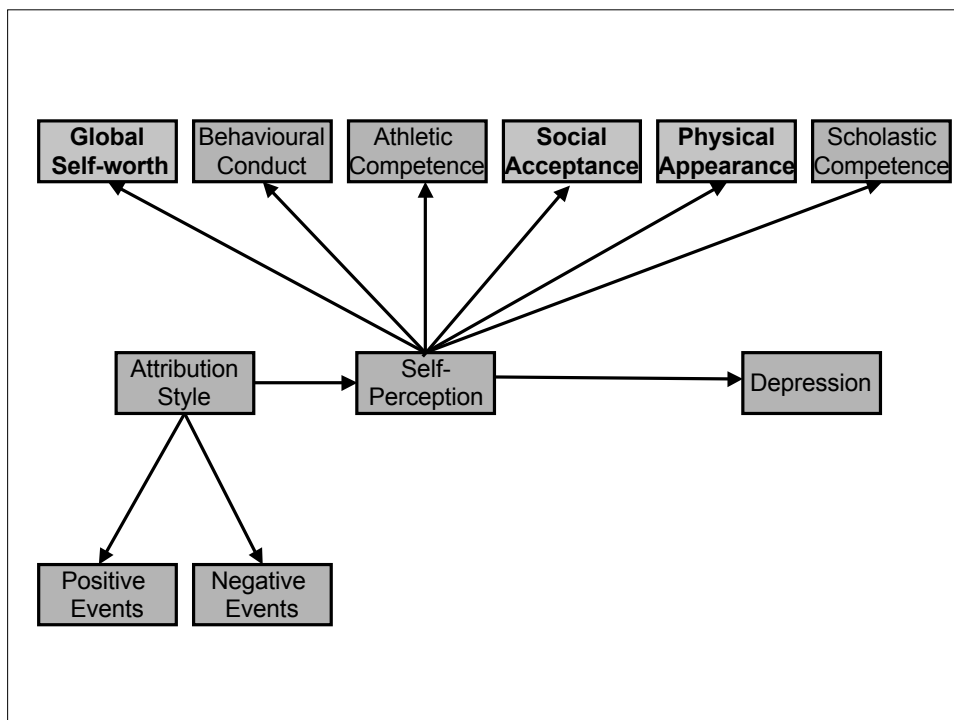
➤ SO....

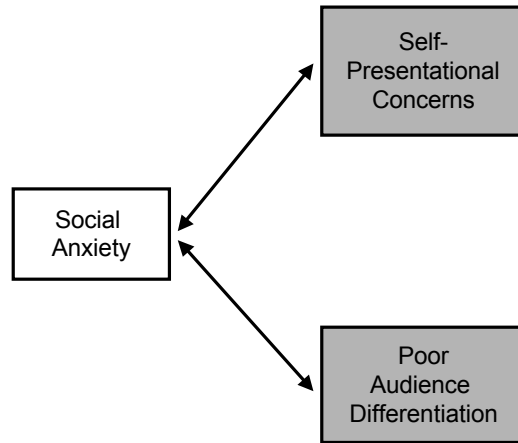
early peer rejection may inhibit development of social understanding

and impaired social understanding predicts subsequent rejection

# Depression and social anxiety

- peer-rejected children scored significantly higher on depression and social anxiety
- but we need to go deeper....





- in a sample of 196 8- to 9-year-olds
- pattern was still evident 12 months later  
(Banerjee & Watling, submitted)

➤ difficulties reinforced by interpretation biases:

- a tendency to catastrophise negative events
- and
- a tendency to discount positive events

(Vassilopoulos & Banerjee, 2008)

➤ differentiated links with coping strategies

e.g., study of 270 8- to 11-year-olds  
(Wright, Banerjee et al., in prep.)

- depressive symptoms associated with:
  - lower levels of distraction, problem-solving, and social support-seeking
  - higher levels of externalising
  
- social anxiety associated with:
  - higher levels of social support seeking and internalising
  - lower levels of externalising

## Attitudes towards aggression at school

➤ in a study of 260 8- to 11-year-olds:

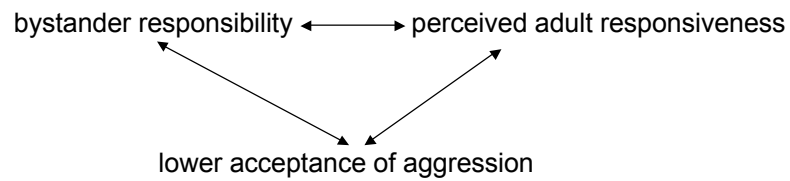
lower perceptions of adult responsiveness in school

were related to

higher depression AND higher aggression

even after controlling for loneliness

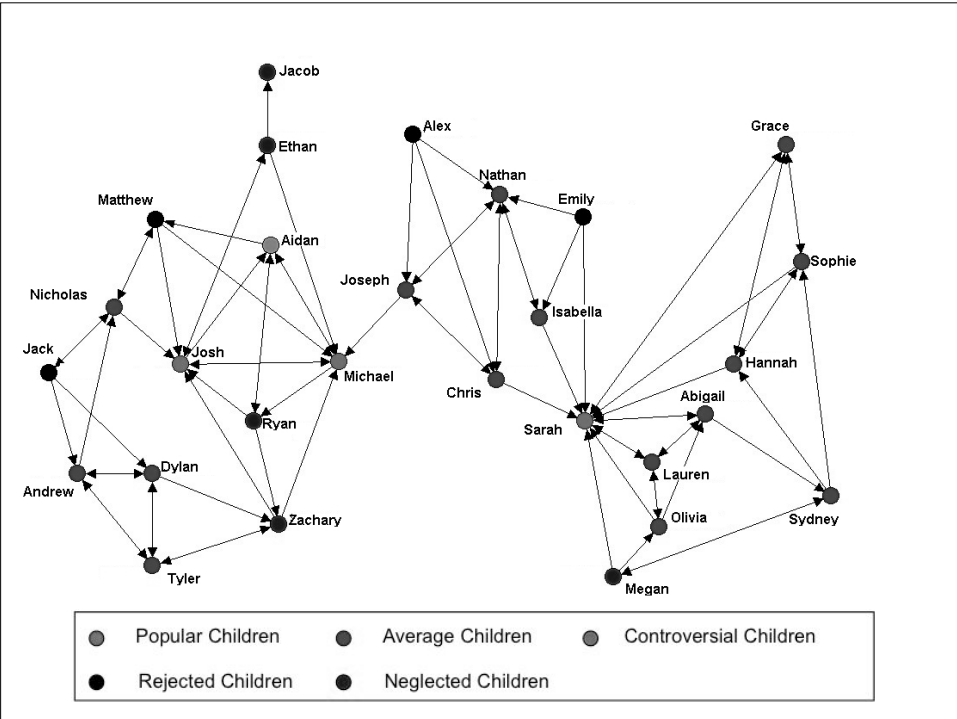
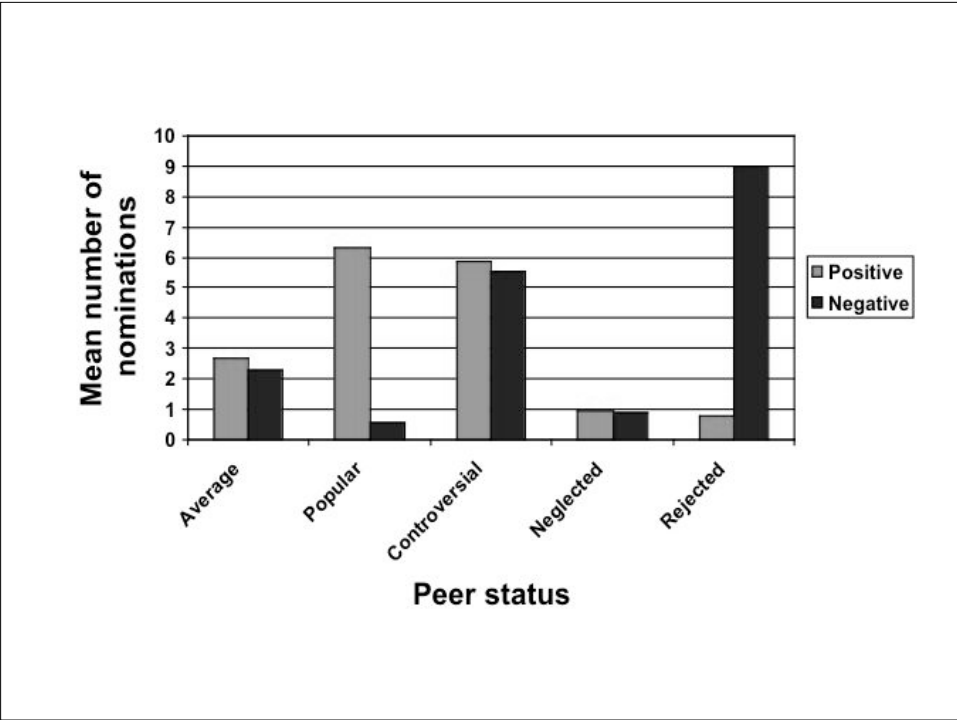
- and in secondary school too...



- and global self-worth was significantly correlated with perceived adult responsiveness

## Some implications ...

- There's more to this than meets the eye...
- Using multiple informants to access different perspectives on social behaviour and relationships



- Not just addressing emotional needs or training behavioural skills
- Understanding the cognitive and motivational underpinnings
- Not necessarily through specific research tools, but through discussion, stories, drama etc.

➤ e.g., talking about hypothetical stories can provide access to:

- emotion vocabulary
- attributional patterns
- mental-state understanding
- goals/motivators
- concerns/anxieties
- problem-solving strategies
- coping repertoire

etc.



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- allows genuinely *targeted* intervention, at school, group, and individual levels
- providing opportunities for pupils to learn from each other
- engaging parents as partners
  - cf. increasing recognition of role of parents in CBT work for children with anxiety