

DEVELOPMENT OF MALAYSIAN SOCIAL-EMOTIONAL COMPETENCY INVENTORY (MySECI) FOR PRESCHOOLERS

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Abstract

Social-emotional competencies have been established as important predictors in children's mental health, school readiness and academic success. Age and developmentally appropriate screening for preschool children is important for early detection of developmental delays and early intervention. The purpose of this study is to measure preschool children's social emotional competencies based on the Malaysian context using MySECI (Malaysia Social Emotional Inventory), a social emotional competency inventory specially developed to provide parents, teachers and professionals with a standardized, norm-referenced, reliable and valid instrument. A pool of 50 items were created for MySECI, representing eight clusters of social emotional competencies in children: self-awareness, social awareness, self-management, relationship management, attachment, communication, responsible decision making and pro-social skills. This pilot study involved two public Annex preschools in town of Johor Bahru purposely selected with 49 preschool children as respondents. Results showed that MySECI has high reliability index (Alpha Cronbach-Teachers .98 and Parents .95). Initial findings also showed that Teachers and Parents differ in their evaluation of their children's SEC according to age and gender. But for the age criteria, the mean difference is slightly wider in comparison to gender. Therefore, MySECI is relevant in predicting children's mental health, school readiness and academic achievement. Results from the study also showed that the inventory holds promise as a reliable and valid measure of social emotional competencies in young children for the Malaysian context.

Keywords: Social-emotional, Competence – Preschool – Inventory

Introduction

The development of social-emotional competence is an important foundation for young children to achieve success in schools and in later lives. New empirical research has provided a new perspective on the importance of social-emotional competence to school readiness (Carlton & Winsler, 1999). A number of researchers have shown that children who enter kindergarten with more positive profiles of social-emotional competence have not only more success in developing positive attitudes about school and successful early adjustment to school, but also improved grades and achievement (Zin, et. al., 2004, Greenberg, et. al., 2003).

Aristotle said, "Educating the mind without educating the heart is no education at all". We should take this idea very seriously as a child's social and emotional development has significant implications for current and later social functioning, as well as, educational, and employment success. If social-emotional competency is inculcated at a young age, children are more likely to settle well into school, behave appropriately, work cooperatively, confidently and independently. A child with poor social and emotional development is at risk of having poor relationships with peers, behavioural problems, underachievement in academics or developing physical and mental health problems. In a recent review of studies on socio-emotional competence, the development of children's social, emotional and behavioural skills have been linked to greater educational success, improvements in behaviour, increased inclusion, improved learning, greater social cohesion, and improvements in mental health (Weare and Gray 2003).

Currently, there are approximately 430,000 or 77% children younger than 6 years attending some form of early childhood program, either publicly run by the government authorities or privately run by companies or individuals (Malaysia Education Blueprint, 2013). Given the increasing awareness of the importance of social-emotional competence to adjustment during the preschool years and to success during the transition to formal schooling (Denham, 2006), there is an increasing need for measures of social competence that are brief, easy-to-use, and have utility in assessing the construct in preschoolers.

Currently, there is a lack of systematic assessment procedures and instruments for early detection of children with poor social-emotional competencies in Malaysia which hinders the possibility of early intervention and treatment to prevent future problems. The strategies used to detect delays in social-emotional competencies in the schools are intuitive, clinical and unsystematic. Further tests for serious cases are referred to a medical officer to diagnose and to decide whether to put the child to a remedial/special education program or to remain in the normal classroom. Presently, there is no specific instrument to assess children's social-emotional development recommended by the Education Ministry for schools that teachers can use to assess children SEC. Teachers need to understand children's development of social-emotional competence and aspects of the construct in order to provide information for interventions, targeting young children at risk for poor outcomes due to deficits in social competence or related behavioural problems (Brotman, Huang, & Gouley, 2007).

There are some available instruments of popular scales from the United States and United Kingdom used by researchers when carrying out their research in the schools such as DESSA, DECA and SCQ, etc. These instruments are specific to the cultures of their origin and does not take into account our local cultural factors. Thus, the evaluation of social-emotional development risks the biases of clinical appraisal or the biases of the

cultural differences embedded in instruments devised elsewhere (Aguiar, 2000). Culturally appropriate scales are necessary since the way parents relate to children, the amount of freedom allowed, the expectations they have, among other events differ from one culture to another. Consequently standards of social adjustment vary with the cultural norms by which they are judged (García-Coll & Magnuson, 1988). Appropriate assessment devices, therefore, must abide with cultural norms and this appears to be a very important factor in assessing the child's scholastic potential. Hence, the purpose of this pilot study was to do a feasibility test on Malaysia Social-Emotional Competency Inventory (MySECI), an instrument to provide parents, teachers and professionals with a standardized, norm-referenced, reliable and valid instrument which is easy to assess children's social-emotional competencies according to the Malaysian context. It is intended to detect developmental delays in social emotional competencies (SEC) for preschool children age 4 to 6 years old.

Social Emotional Competence (SEC)

Social emotional competence is a child's ability to experience, regulate and express emotions, to form close and secure interpersonal relationships with people around him/her, and to explore his or her environment and learn, all in the context of family, community, and culture. It is a complex term relating to various emotional literacy and prosocial skills which allows the child to function. According to Mayer & Ciarrochi (2006), SEC is "a combination of emotional intellect, social effectiveness, and, perhaps, emotional intelligence itself might be represented by the term socio-emotional effectiveness – 'an individual's capacity to navigate the social world in an effective manner, accomplishing his or her goals as needed.'"

In recent years, research has suggested that there is a strong link between young children's socio-emotional competence and their chances of early school success (Raver, 2002). Research has shown that a well-planned and well-implemented social-emotional programme can positively affect academic outcomes (Zins et. al., 2004).

Social-emotional learning (SEL) was first introduced in 1994 as a conceptual framework incorporating social and emotional learning in schools, and emotional competence listed as "identifying and labeling feelings, expressing feelings, assessing the intensity of feelings, managing feelings, delaying gratification, controlling impulses, and reducing stress." Under the organization CASEL (Collaborative to Advance Social and Emotional Learning). The concept of SEL was propelled into the popular culture in 1995 with a book by Daniel Goleman, "Emotional Intelligence: Why It Can Matter More Than IQ", in which he argued that character matters and, more significantly, the skills that build character can be taught.. (Goleman, 1995)

CASEL identified five interrelated sets of cognitive, affective and behavioral competencies as shown in Figure 1. The definitions of the five social-emotional competency clusters for students are:

Self-awareness is the ability to accurately recognize one's emotions and thoughts and their influence on one's behavior. It includes accurately assessing one's strengths, weaknesses and limitations, as well as possessing a well-grounded sense of confidence and optimism.

Self-management is the ability to regulate one's emotions, thoughts, and behaviors effectively in different situations one encounters. It includes managing tension and

stress, controlling one's impulses, motivating oneself, setting and working towards achieving one's personal and academic goals.

Social awareness is the ability to take the perspective of others, to empathize with others from diverse backgrounds and cultures, to understand social and ethical norms for the right behavior, to recognize family, school, and community resources and support.

Relationship skills is the ability to establish and maintain healthy and rewarding relationships with diverse individuals and groups. It includes interpersonal skill, interacting with others, listening actively, cooperating, resisting inappropriate social pressure, negotiating conflict constructively, and seeking and offering help when needed.

Responsible decision making is the ability to make constructive and respectful choices about one's personal behavior and social interactions based on consideration of ethical standards and norms, safety concerns, social norms, realistic evaluation of consequences of various actions, and the wellbeing of self and others.



Figure 1 - CASEL 5 SEC clusters

In order to make MySECI more relevant and developmentally appropriate to young children, all 5 of the above SEC clusters were included in the item selections and another 3 more clusters based on theories of child development were added. These 3 clusters were attachment, communication skills and prosocial skills which are important clusters of SEC which needed to be put into consideration since young children's needs and social-emotional development are different from those of older children and adults.

Attachment

the bonding which is created when a child's experiences with the parents/primary caregivers that are reliable, predictable and accessible during their care in the past. The quality of attachment is determined by the child's willingness to engage and benefit from

social interactions. The basis for trust in relationships with others would develop from early attachments. This relationship builds the ability to form close relationships with others throughout their life (Denham et al., 2009). This is also stated in stage 1 of Erik Erikson's Psychosocial Theory. If an infant's physical and emotional needs are met in a consistent and caring way, he learns that his mother or caregiver can be counted on and he develops an attitude of trust in people. If his needs are not met, he may become fearful and learns not to trust the people around him. Thus, the infant must first form a trusting relationship with the parents/caregiver, otherwise a sense of mistrust will develop. According to Erikson, a positive resolution of a crisis (e.g., trust vs mistrust) results in a foundation for progress to the next stage. If the child has a secure attachment, it is more likely that s/he would be willing to interact with others outside the family. Secure attachment also favors exploratory behaviors, which would also increase the likelihood of social interactions. Ainsworth (1979), identified three different types of attachment: secure, ambivalent and avoidance) each of them leading to different types of behavior in the children. Waters et al. (1979) concluded that the quality of attachment would predict competence and acceptance in the peer group. Lieberman (1977) found that the social competence of the children was related to the quality of the attachment between mother and children, and the amount of experience that the child had had with peers. Liberman et al (1999) found that father availability was related to children having less conflict with their friends. Inconsistent or rejecting parents are more likely to create insecure attachments and this could have disastrous consequences for children's social relationships with peers (Cohn, 1990).

Communication skills

Reflect children's ability to properly interact with other children and adults using interpersonal skills. It is an important skill especially for young children with limit amount of vocabulary and find difficulty in verbalizing their emotions and thoughts which can be too abstract and overwhelming to them. Communication skills can be best evaluated in play settings where children establish and maintain friendships (Mendez, Fantuzzo, & Cicchetti, 2002). With age, their play patterns become more complex and sophisticated and interaction and communication form the basis for intricate play scenarios. Children with poor friendship skills are rejected by their peers and as a consequence lack the opportunity to develop their social skills (Gagnon & Nagle, 2004). These children are at risk for developing both internalizing and externalizing disorders (Brotman et al., 2005). Children's ability to maintain interactions in larger groups evolves with time. By 5-years old, children are able to participate in cooperative play where they exchange ideas over play scenarios, and even attribute roles to children involved (Wilburn, 2000). Cooperative play stems from children's understanding of reciprocity as the basis of building and maintaining friendships.

Prosocial skills

Include a wide range of voluntary actions, which are directed at other people's benefit (Krueger, Hicks, & McGrue, 2001). Behaviors under this category are sharing toys and other objects, turn-taking, giving and asking for help (Warnes, et al., 2005). Children low on prosocial behavior are rejected by their peers, are often aggressive and exhibit behaviors which put them at risk for externalizing disorders (Sebanc, 2003). Until the age of 5 most children need to be reminded to share, help or wait for their turn during a game but once these rules are internalized, most children tend to exhibit these behaviors without adult prompting (Strayer & Roberts, 2004) and also showing signs of lesser egocentricity.

Methodology

This pilot study employed a survey design to collect data. The total number of preschool children included in this study were N = 49 from two public preschools in the town of Johor Bahru. These 2 public preschools are annexed to a national type primary school catering for parents from the middle and lower income groups and were purposely selected because of the homogenous characteristics (close proximity and similarities of the school, teachers, parents and children profiles). For feasibility and pilot studies the sample size recommended is 30 as given by Lancaster, Dodd & Williamson (2004). The sample characteristics for each group are shown in Table 1.

Table 1 - Distribution of participants according to age group, gender and race

Age group		Number of participants	Gender		Race
5 years	6 years		Male	Female	Malays
17	32	49	18	31	

An initial pool of 40 items was generated based on theories of child development, SEC, Social-Emotional Learning (SEL) and emotional intelligence. MySECI was adopted and adapted from instruments used by US researchers; Devereux Student Strengths Assessment (DESSA), Ages and Stages Questionnaires: Social-Emotional (ASQ:SE), Strengths and Difficulties Questionnaire (SDQ) to make it more relevant to the Malaysian context. It was later increased to 50 items due to 3 more clusters of SEC added to the original 5 clusters in the inventory that requires a bigger pool of items. MySECI contains pool of 50 items representing eight clusters of SEC which are self-awareness, social awareness, self-management, relationship management, attachment, communication, pro-social skills and responsible decision making. These items were subjected to content validated by a group of 6 experts from various fields of developmental psychology, language and psychometrics, each holding at least a masters in their various fields and 3 with doctorates in Psychology as recommended by the Standards for Educational and Psychological Testing (American Educational Research Association, 1999). A four point Likert scale was used to check on the user's specific response (1-Never, 2-Rarely, 3-Occasionally, 4-Frequently). The final version of MySECI was able to be represented in all the clusters of SEC as shown in Table 2 but all the items were randomly placed in the inventory.

Table 2 - Distribution of items according to 8 SEC clusters

Coding	SEC Cluster	Item No.	Total
SFA	Self-Awareness	Q1, Q6, Q20, Q22 & Q33	5
SOA	Social Awareness	Q4, Q7, Q8, Q24, Q27, Q39	6
SFM	Self-Management	Q3, Q11, Q13, Q23, Q31, Q40, Q48, Q49	8
RMT	Relationship Management	Q25, Q26, Q30, Q32, Q42, Q43, Q50	7
COM	Communication Skills	Q2, Q15, Q28, Q29, Q47	5
PRS	Prosocial Skills	Q10, Q14, Q16, Q18, Q35, Q38	6
ATM	Attachment	Q5, Q31, 41, 4Q4, Q46	5
RDM	Relationship Decision Making	Q9, Q12, Q17, Q19, Q21, Q36, Q37, Q45	8
Total Items			50

A group appointment was set with teachers and parents during the preschools' Open Day to give a brief explanation of the purposes and aims of the research, followed by a discussion on the clarity, relevance and wording of the inventory. They were then asked to fill the inventory and to hand in once they completed the task. The data collected were run using SPSS and analysed using descriptive statistics.

Results

Reliability is established through the data collected and analyzed using SPSS (Statistical Package for Social Sciences). The reliability coefficient (alpha Cronbach) r values ranged between .98 for Teachers and .95 for Parents. Differences between Teachers and Parents reliability indices showed a very small value of .03.

Table 3 and Table 4 show the analysis of mean of MySECI according to age and gender respectively.

Table 3 - Mean of MySECI on Age

Age	N	Teachers		Parents	
		Mean	Standard Deviation	Mean	Standard Deviation
5 years	17	2.98	.20	3.15	.34
6 years	32	3.36	.54	3.13	.43
Total	49	3.27	.51	3.13	.41

Table 4 - Mean of MySECI on Gender

Gender	N	Teachers		Parents	
		Mean	Standard Deviation	Mean	Standard Deviation
Male	18	3.16	.53	3.18	.40
Female	31	3.33	.49	3.11	.41
Total	49	3.27	.51	3.13	.41

Initial findings showed that Teachers and Parents differ in their evaluation of their children's SEC according to age and gender but for age, the mean differ is slightly larger compared to gender. Further research to be carried out on results of differences in age and gender.

Discussion & Recommendation

Initial findings showed that My-SECI is relevant in predicting children's mental health, school readiness and academic success through analyzing the results of their social emotional competencies. Results from the study also showed that the inventory holds promise as a reliable and valid measure of social emotional competencies in young children for the Malaysian context.

MySECI has a number of potential uses in practical situations. It was not designed as a diagnostic instrument in the sense of fitting medical settings but it can provide information that many practitioners in early childhood settings, schools and home or clinical environments may find useful as it is easy and quick to administer. Knowledge of the child's level of social-emotional development may aid parents, teachers and day-care personnel in understanding the child's behavior with other children or adults and also to find the ways to help them through shaping and early intervention. It also helps parents

and teachers in understanding children at risk for future adaptive and academic problems and to plan programs of intervention to prevent future behavioural problems in school or in later life.

However, there is a need to further evaluate this instrument, especially by further validation studies as this is only a feasibility study. Also, a shortcoming of this research is the fact that data on only one race was available but in future studies other races could be included, as well as different types of preschools using different medium of instruction and privately or publicly run. Future studies on MySECI can be made in another possible area of research on characteristics of the social-emotional development of the child at age five as a predictor of later development outcomes and to what extent preschool measurements of SEC made by teachers during the last year in preschool were predictive of the children's school performance in the Primary 1.

Conclusion

This is a first attempt to develop a screening instrument according to the Malaysian context to predict SEC and mental health problems in young children which may jeopardise their academic achievement and school readiness. A consistent longitudinal evaluation of young children is needed to prevent mental health problems and school maladjustment which may lead to more serious social problems in later years. It must be stated that the aim of screening is not simply labelling children as deficient in acquiring certain abilities, but rather promoting an early detection and intervention program to ensure children's wellbeing and success.

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