



The risks for adolescents of negatively biased self-evaluations of social competence: The mediating role of social support



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This study conducted among 544 adolescents ($M = 15.1$ years, $SD = .82$) examined whether perceived social support from parents and peers mediated the relationship between biased self-evaluations of social competence and internalizing problems. The results showed negative links between bias in self-evaluation and depressive symptoms, social anxiety and social avoidance. Bias in self-evaluation of social competence was more strongly related to perceived peer support than perceived parental support. Gender differences were observed in the mediating role of social support. Among boys, parental support was a partial mediator only of the link between bias in self-evaluation and depressive symptoms. While perceived peer support was a partial mediator of the links between bias in self-evaluation and depressive symptoms, social anxiety and social avoidance in girls, this was the case only for social avoidance in boys. These findings suggest that girls may show vulnerability to peer emotional support at an earlier age than boys.

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Some people seek solitude and feel good when they are alone. For others, solitude leads to anxiety and a deep sense of isolation. In 1953, psychiatrist Harry Stack Sullivan proposed that adolescents who are unable to create a place for themselves in the peer group develop feelings of inferiority and psychological distress. Sixty years later, this premise still appears to be valid, having been confirmed by numerous studies: social adjustment problems are associated with psychological distress, expressed through suicidal behavior, delinquency, anxiety problems and depressive symptoms (Bukowski, Burhmester & Underwood, 2011). Many authors now agree that social integration problems stem partly from a self-perception of social incompetence, particularly, a perception that one is unable to form relationships with others (Bukowski et al., 2011). Feeling connected to others and feeling that we matter to significant others is a fundamental human need (Deci & Ryan, 1985). Our study investigated the role of perceived social support from parents and peers in the link between biased self-evaluations of social competence and psychosocial adjustment problems.

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Bias in self-evaluation of social competence and related outcomes

Perception of one's own social competence derives from subjective self-evaluation of one's abilities and resources needed to deal with the various relational situations in which one may engage, and ultimately, to be accepted by others (Bandura, 1986). This self-perception develops through social experiences. According to Bandura (1997), the tendency of adolescents to seek out friends who share their values and interests is a desirable behavior that fosters the development of a positive perception of their own social competence. On the other hand, unsatisfactory social relations can negatively affect their self-perception of social competence and lower their motivation to engage in social interactions (Ladd & Crick, 1989).

Given the subjective nature of self-perceptions of social competence, these perceptions are not always accurate. They can be biased, either negatively or positively. For example, studies have shown that, relative to their peer group's appraisal of them, some youths negatively assess the degree to which they are accepted by their peers (Brendgen, Vitaro, Turgeon, & Poulin, 2002; Brendgen, Vitaro, Turgeon, Poulin, & Wanner, 2004; Cillessen & Bellmore, 1999, 2004; Larouche, Galand, & Bouffard, 2008). Adolescents who feel that they are not well accepted and appreciated by others, despite evidence to the contrary, experience several negative outcomes related to social functioning and psychological well-being. Numerous studies have shown that a negative perception of social acceptance, whether biased or not, is associated with negative attitudes and adaptive problems such as shyness, social avoidance, low self-confidence, depressive symptoms and aggressive and conduct problems over time (Bergeron et al., 2007; Brown, von Bank, & Steinberg, 2008; Caprara, Steca, Cervone, & Artisticco, 2003; Cole, Martin, Peeke, Seroczynski, & Hoffman, 1998; Hoffman, Cole, Martin, Tram & Seroczynski, 2000; Kistner, David-Ferdon, Repper, & Joiner, 2006; Lee, Hankin, & Mermelstein, 2010; McElhaney, Antonishak, & Allen, 2008; McGrath & Repetti, 2002; Whitton, Larson, & Hauser, 2008).

According to Brendgen et al. (2004) and others (e.g. Furman, 1996), these attitudes and behaviors are unfavorable to healthy social relations and contribute to maintaining and even increasing initial problems in this area. For example, children who expect to be rejected may develop high sensitivity and negative responsiveness to any cues indicating even a small risk of rejection (Downey, Lebolt, Rincon, & Freitas, 1998) and thus choose to avoid peer relationships (Kaplan & Lin, 2000; Owens, 1994; Scheff, Retzinger, & Ryan, 1989). In doing so, youths impede their social relations and thereby miss opportunities to develop social skills and benefit from the social support that derives from positive social interactions (Bandura, 1986; 1997; Rubin, Bukowski, & Parker, 2006).

Social support and related outcomes

Several studies have shown significant associations between depression and low social support (Bergeron et al., 2007; Harter, 1999; Macek & JezekMasaryk, 2002; McDonald, Bowker, Rubin, Laursen, & Duchene, 2010; Rubin et al., 2004; Tiedemann, 2000; Scholte, van Lieshout, & van Aken, 2001; Silverthorn & Crombie, 2002; Wentzel & McNamara, 1999). During adolescence, there are several potential sources of social support: youths are responsive to support from parents, teachers, siblings and peers such as classmates and close friends. Harter (1999) proposed that peer support and parental support are the most important during adolescence. Several studies have supported this idea. Youths who perceive that their parents are available and supportive report fewer depressive symptoms and violent behaviors than youths who are unsure of their parents' support (Marcotte, Marcotte, & Bouffard, 2002; Sheeber, Hops, Alpert, Davis, & Andrews, 1997; Silverthorn & Crombie, 2002; Werner & Silbereisen, 2003). Moreover, fewer internalizing problems have been linked to the availability of social support from peers (Field, Diego, & Sanders, 2001; Gauze, Bukowski, Aquan-Asse & Sippola, 1996; MacPhee & Andrews, 2006; Rueger, Malecki, & Demaray, 2010; Segrin & Rynes, 2009). Other studies have shown that support from close friends may protect against social integration problems and victimization (Hodges, Boivin, Vitaro, & Bukowski, 1999; Kerr, Preuss, & King, 2006; Rubin et al., 2004; Wojslawowicz Bowker, Rubin, Burgess, Booth-LaForce & Rose-Krasnor, 2006).

Some authors have observed that parents and peers are potentially two independent sources of social support (Harter, 1999; Wentzel, 1998). For example, Kamboukos, Alvarez, Totura, Santa Lucia, Gesten and Gadd (2002) showed that both parental and peer support independently predicted youths' self-perceptions. While perceived support from peers was the strongest predictor of social, athletic, physical and scholastic competence, parental support was the strongest predictor of youths' global self-esteem and behavior conduct. According to these authors, healthy self-perceptions of competence appear to stem from positive interactions with both parents and peers, two relatively distinct sources of support. For other authors (Helsen, Vollebergh, & Meeus, 2000; Van Beest & Baerveldt, 1999), parental support and peer support are complementary and have additive effects on youths' well-being and social functioning. Lee et al. (2010) proposed that social support may also act as a mediator between youths' social skills and self-perceptions, on the one hand, and adjustment outcomes, on the other hand.

Mediating role of social support

According to Harter (1999), the protective role of social support from parents and peers may vary according to the importance they assign to different domains of life. As the school domain is more highly valued by parents than by peers, parental support would have a stronger protective effect against internalizing problems for youths who have difficulties in this domain. Conversely, as the domain of social acceptance and relationships is more valued by youths than by parents, peer support would have a stronger protective effect against internalizing problems for youths who experience difficulties in this

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