

# Socioeconomic status and pupils' mental health: exploring the association and how to improve outcomes for those from lower socioeconomic status backgrounds

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## **Abstract**

Pupils from families with indicators of lower socioeconomic status (SES) are more likely to experience mental health difficulties than those from higher SES (Reiss, 2013). This paper explores the basis for this vulnerability by examining the current literature on risk and protective factors for pupils with lower SES indicators. Bronfenbrenner's Ecological Systems Theory (EST) is used to ensure all aspects of pupils' surrounding environments are considered, including direct influences such as school and family, but also the wider environment, for example government policies and wider cultural values. The effectiveness of targeted interventions in addressing different aspects of pupils' environments are also examined to consider how best to compensate for risk factors and improve outcomes.

Research suggests the association between SES and pupil well-being can be explained by mediators within all aspects of pupils' environments such as family factors, school, peers, community, and government policies. An understanding of the multidimensional impacts of SES on pupils' mental health is important for interventions as targeting only one aspect, such as school-based interventions, may be insufficient for long-term improvements to children's well-being. The Educational Psychologist's role in developing teachers' understanding of the effects of SES and bridging the gap between parents and schools to enable more holistic interventions is also discussed.

## **Introduction**

Mental health difficulties (MHD) are thought to affect 10-20 percent of children and young people (CYP; Kieling et al., 2011). When experienced during childhood or adolescence, MHD can lead to increased risk of negative life outcomes

such as enduring MHDs and unemployment (Copeland, Shanahan, Costello, and Angold, 2009; Egan, Daly, and Delaney, 2015; Kim-Cohen et al., 2003). As a result, improving CYPs' social, emotional, and mental health (SEMH) is a key governmental focus that has led to a green paper on 'Transforming children and young people's mental health provision' (DoH; DfE, 2017) and guidance on 'Mental Health and Behaviour in Schools' (DfE, 2015). One vulnerable group identified within this guidance is pupils with socioeconomic disadvantage. CYP with lower socioeconomic status (LSES) are up to three times more likely to experience MHD than those from higher socioeconomic status (HSES) (Reiss, 2013). The bases for the vulnerability of CYP from LSES backgrounds will be explored, including examining current research into how to improve outcomes and implications for the role of educational psychologists (EPs).

## **What is Socioeconomic Status (SES)?**

Socioeconomic status (SES) is commonly defined as a combination of education, income, and occupation (Baker, 2014) but can also include aspects such as neighbourhood. A proxy indicator of SES often used for school pupils is eligibility for free school meals (FSM), however this only considers one part of SES: income (Hobbs and Vignoles, 2007). The criteria used is important as all the systems surrounding CYP influence their experiences (Bronfenbrenner, 1986). Individuals with multiple indicators of LSES may therefore be at greater risk of poorer wellbeing than those with fewer indicators (e.g. low parental income but more affluent neighbourhood).

## **Examining risk and protective factors using Ecological Systems Theory**

One way of examining vulnerability to MHDs is through looking at risk and protective factors. Individuals with more risk factors than protective factors may be more susceptible to MHDs, however by increasing protective factors the balance can be swung towards resiliency (Werner, 2000). LSES is likely to effect CYP in multiple ways and could be broken down into a series of potential risk factors. This could be explored using Bronfenbrenner's (1986) Ecological Systems Theory (EST). EST describes the five systems surrounding a child (microsystem, mesosystem, exosystem, macrosystem and chronosystem) and how the interactions between them effect the individual. By examining how SES effects these systems, an understanding of risk and protective factors in each area can be established and research into the effectiveness of interventions at each level can be examined. This model has been chosen as opposed to Bronfenbrenner and Morris (2006)'s later model to allow for in depth reflection on the impact of SES on the systems surrounding a child, as opposed to individual child factors. Although it is acknowledged, as stated in the later model, the relationship between CYP and their environment is bi-directional and child fac-

tors (e.g. temperament) will also influence their environment and their overall well-being (Bronfenbrenner and Morris, 2006).

## Microsystem

The microsystem refers to the immediate environment in which the young person is located and those who have direct contact with them, such as the immediate family, school, peers, and community play area (Bronfenbrenner, 1986).

## Family

Parenting practices and styles are often first to be scrutinised when it comes to children's well-being (Hartas, 2014). Some research has suggested parents with indicators of HSES are more likely to show an authoritative parenting style (September, Rich, and Roman, 2016). This is often, although not universally, defined as 'warm, sensitive parenting with clear boundaries' which has been associated with positive outcomes for children, such as secure attachments and psychological well-being (Bibi et al., 2013; Doinita and Maria, 2015) as well as less positive outcomes, such as reduced emotional resiliency.

Parents with indicators of LSES showed higher rates of permissive parenting (September et al., 2016). This is characterised by low expectations and rules but high responsiveness and has been associated with poorer wellbeing in children such as anxiety and internalising problems (Rossman and Rea, 2005). Whilst this could provide one possible explanation for the link between SES and childhood well-being, the concept of parenting styles has been heavily criticised as being oversimplistic, with outcomes of parenting styles varying dependant on culture and context (Darling and Steinberg, 1993).

It is possible parental stress levels may be a greater influencer on parenting style than SES, with some findings indicating an association between LSES and harsh parenting only exists in the context of other stressors such as family conflict (Pereira, Negrão, Soares, and Mesman, 2015). Stress levels could also provide an explanation for the higher rates of permissive parenting found within September et al. (2016)'s study, as other stressors may detract from parents' focus on enforcing boundaries and rules for their children.

Another possible factor influencing CYP well-being at the family level may be family structure. FSM eligibility, which is often used as a proxy indicator for LSES in school pupils, is based on parental income meaning the majority of eligible pupils come from single parent families (Halse and Ledger, 2007). Many CYP classed as LSES within research may therefore also be from single parent families. CYP from single parent families have been suggested to experience poorer well-being for a range of reasons such as parental relationship quality, parental mental health, and lack of father involvement (Waldfoegel, Craigie, and Brooks-Gunn, 2010). Poorer well-being is not however a universal outcome for CYP from single parent families, with findings suggesting parental resources

(e.g. income) and stressors (e.g. housing stability) determine the well-being of single parents and their children (Amato, 2000).

Protective factors for parents with indicators of LSES include marital relationship support (Simons et al., 1992), wider social support (relating to the CYPs' exosystem; Green et al., 2007) and emotional intelligence (Ewing et al., 2019). These factors are all likely to improve parental well-being, again supporting the hypotheses that parental well-being and stress levels may act as a mediating factor between SES and child well-being.

One way in which parenting has traditionally been addressed is through parenting interventions such as Incredible Years (Reid, Webster-Stratton, and Beauchaine, 2001), Parent-Child Interaction Therapy (Eyberg and Bussing, 2011) and Triple P (Sanders, 2008). These programmes have consistently shown lower enrolment, higher drop-out rates, and lower parentally reported long term effectiveness for parents with LSES indicators (Leijten, Raaijmakers, de Castro, and Matthys, 2013; Winslow, Bonds, Wolchik, Sandler, and Braver, 2009). Critical examination of the association between SES and programme attendance highlights life circumstances may be creating barriers to course attendance and implementation of recommendations for those with LSES indicators, for example changing work hours, childcare, and difficulties with transport (Reid et al., 2001). However it is also suggested that these parenting interventions are designed based on 'middle class' parents and do not adequately account for SES differences such as time or resources to implement strategies (Zilberstein, 2016). All three parenting programmes suggest behavioural strategies involving rewards and punishments by removal of desired activities/items. Parents with LSES indicators may not be able to afford a range of rewards and may be reluctant to remove the limited privileges they are able to provide, explaining the low effectiveness of these programmes (Gilles, 2007). Alternatively, these parenting programmes may be ineffective as 'poor' parenting practices may not be a result of lack of knowledge or understanding of parenting, but as previously mentioned may be due to life stressors making parenting challenging (Pereira et al., 2015). This suggests that interventions considering the wider systemic factors causing stress for LSES families or focused on stress management and increasing parental support may be more effective.

## Neighbourhood

The neighbourhood CYP live in can have a direct impact on them and is often related to their SES (Steptoe and Feldman, 2001). Characteristics frequently associated with LSES neighbourhoods, such as poor physical environment and low trust or cohesion, have been linked to childhood MHDs (Butler, Kowalkowski, Jones, and Raphael, 2012; Meltzer, Vostanis, Goodman, and Ford, 2007). Despite this, a CYP's neighbourhood can also be a protective factor, with high levels of social integration and cohesion acting as a buffer for childhood MHDs even in the context of low community SES (Wickrama and Bryant, 2003).

A longitudinal study found a neighbourhood renewal programme can lead to improvements in mental health (MH) (Egan et al., 2016) - the programme

encompassed interventions to improve the physical environment (e.g. housing and neighbourhood improvements) and social aspects of the neighbourhood (e.g. employment and antisocial behaviour). Although this research focused on adults and did not explicitly examine CYP, improved parental MH has been shown to positively impact on children's MH (Ahlqvist-Björkroth, Boukydis, Axelin, and Lehtonen, 2017; Coiro, Riley, Broitman, and Miranda, 2012), therefore it is postulated the neighbourhood renewal project may have also improved CYP well-being. As such, the correlation between factors and their specific impact in relation to mental health improvement requires further research. Given the intervention targeted a range of community factors including physical and social interventions it is not possible to establish if specific factors led to MH improvements or if all aspects were important to the outcomes.

## **Peers**

As children develop into adolescence they begin to seek autonomy from their parents and place greater value on their peers, meaning peer relationships are likely to be highly influential on CYPs' well-being (Rubin, Bukowski, and Parker, 2007). Friendships can be a difficulty for CYP with LSES as they may lack the economic resources to participate in activities and trends that peers are accessing, leading to fewer friends and greater social isolation (Elliott and Leonard, 2004; Hjalmarsson and Mood, 2015). This is then associated with poor MH (Matthews et al., 2016). Improving friendships for CYP with LSES may have a significant effect on well-being and act as a protective factor, as peer social status has been shown to possibly have a greater effect on well-being than family SES (Plenty and Mood, 2016). This indicates that it may not be necessary to intervene at the family level and that interventions focusing directly on improving CYPs' friendships, for example by providing free or low-cost social activities, could have a significant impact on well-being (Plenty and Mood, 2016).

## **School**

Schools could be useful for friendship interventions as they are one of the main places in which CYP form friendships and are also another key aspect of the microsystem. Attempts to reduce school based hierarchies and increase social inclusion may improve the well-being of CYP from LSES backgrounds (Plenty and Mood, 2016). Research has shown school based subjective social status to be more important to child well-being than subjective or objective SES (Sweeting and Hunt, 2014). School social status was determined by pupils' self-ratings on three aspects: peers (e.g. popularity, respect, etc.), scholastics (e.g. academic achievement) and sports (e.g. sportiness). These three aspects were all associated with well-being thus, friendship in and of itself is not more important to well-being. Attempts to create an inclusive environment within schools focusing on connectedness and equality, regardless of social capital have been found to improve pupils' well-being (Roffey, 2013). School hierarchies however may be a reflection of the wider education system and socio-political context;

thus, interventions may be more likely to be effective when implemented at this level as opposed to within individual schools (see exosystem section).

Evidence suggests that there are many ways in which schools can act as a protective factor for children with LSES. School based SEMH interventions have been found to lead to improved well-being and compensate to some extent for family SES (Bywater and Sharples, 2012; Taylor, Oberle, Durlak, and Weissberg, 2017). Factors such as student-staff relationships, high expectations, giving students agency, and social and emotional learning have shown effectiveness in improving SEMH in vulnerable pupils such as those with LSES (Roffey, 2016). Reviews suggest there are a wide range of approaches, both universal and targeted, that are effective in improving well-being (Bywater and Sharples, 2012). Further research within the UK is still necessary to build the evidence base for internationally developed programmes within British schools, and examine barriers to implementation, such as cost and fidelity. (Bywater and Sharples, 2012). This research will ensure programmes are effective and accessible within the UK context. Whole-school ethos has however been consistently found to be most important to improving well-being for all pupils including those with LSES, suggesting a broader approach is required alongside or separate to evidence-based programmes as ethos effects all aspects of school policy and teachers' practice (Bywater and Sharples, 2012; Roffey, 2016). For these interventions to be effective an understanding of organisational change may be necessary (Georgiades and Phillimore, 1975). Furthermore, many approaches used in schools may still have an emerging evidence base, especially for pupils with LSES, for example a current commonly used approach is Emotion Coaching (Gottman, Katz, and Hooven, 1996). Despite being widely implemented within some areas the evidence base for Emotion Coaching as a whole school approach in the UK is still emerging. Large scale, longitudinal research with control schools examining the effectiveness of the approach for different groups such as those with LSES is needed (Gus, Rose, Gilbert, and Kilby, 2017).

In summary, many factors within the microsystem are likely to play a role in mediating the link between SES and MH. However, there are also many possible interventions that can be put in place to increase protective factors such as improving peer friendships and school well-being interventions. Despite this, a literature review on resilience by Khanlou and Wray (2014) has argued that the power of interventions, situated in only one system such as a school (i.e. Microsystem) is likely to be limited. They suggest that for those with high risk in the social environment these approaches are not enough and propose a 'whole community' approach which is an integrated, multidimensional intervention including multiple aspects of the microsystem, therefore this relates to the mesosystem.

## Mesosystem

The mesosystem considers the interconnections within the microsystem such as the relationship between family and school or family and the community

(Bronfenbrenner, 1986).

## **Parental involvement**

Parental involvement with school (e.g. attending parents evenings and helping with homework) has been shown to have a positive effect on CYPs' MH (Wang and Sheikh-Khalil, 2014). Several studies have indicated that parents with LSES are likely to have less involvement in their child's education (Hill and Taylor, 2004; Jeter-Twilley, Legum, and Norton, 2007). This could be for multiple reasons such as time and resources or own experiences of education and perceived incompetence (Hornby and Lafaele, 2011). Similarly, parenting stress may mediate the link between LSES and lack of school engagement, therefore a broader affect or exposure to parental stress could be impacting on CYP well-being rather than parental involvement. Parental involvement itself could be affected by extrinsic factors outside of parental control therefore the relationship is not simple nor necessarily uni-directional. It is unclear which aspects of parental involvement are most important, for example whether amount/frequency of involvement is the most influential on CYP well-being or if other factors may play a greater role, such as quality of involvement, who initiates involvement (school versus parents), and parental attitudes towards the education system. Some research suggests that parents from LSES place less value on education (Chowdry, Crawford, and Goodman, 2011). This dissonance between school and family views could lead to confusion and uncertainty in CYP and so impact on their mental well-being. Although, this suggestion has been heavily criticised, with a large scale review finding parents from LSES to value education and have high aspirations for their children (Cummings et al., 2012). It has instead been argued that low involvement may be due to 'hard to reach' schools as opposed to 'hard to reach' parents, with school values being aligned to white, middle class parents leaving working class or ethnic minority parents feeling shut out (Crozier and Davies, 2007).

Despite this, when successful, working collaboratively with parents to increase involvement has been found to be effective at improving both well-being and educational outcomes for CYP from LSES backgrounds (Carter-Wall and Whitfield, 2012; Roffey, 2016). Carter-Wall and Whitfield (2012) identified a range of features that support successful interventions and reduced drop-out rates such as well-structured programmes with lots of support and using staff members from the same community. However, the authors also identified parents need to "put in the necessary time and effort" which may be difficult for LSES parents for a whole host of reasons such as working long or unusual hours, MHDs, or stress levels leading them to feel already 'at capacity' so unable to commit to such interventions.

Incorporating parental involvement into school well-being approaches may add to the effectiveness, although these interventions alone may not be enough to compensate for LSES and improve mental well-being for all children as many parents may experience a range of barriers to these interventions such as those previously mentioned (time, stress etc.) as well as other factors outlined below

in the exosystem section.

## **Exosystem**

The exosystem represents factors that do not directly interact with the young person but still have an influence on them (Bronfenbrenner, 1986).

### **Parents' workplace**

Parents with LSES indicators may be working long or inflexible hours due to financial strain and this has been shown to have a negative effect on the mental well-being of CYP (Li et al., 2014). This is mediated by factors such as poor parental MH, parenting practices, and parent-child interactions and involvement (Li et al., 2014). On the other hand, LSES parents may be experiencing unemployment. Whilst this could mean parents have more time to spend with their children, time spent job hunting and the negative effects of unemployment on parental MH may counterbalance the benefits (Strandh, Winefield, Nilsson, and Hammarström, 2014). The stress load and psychological impact of parents' work is also likely to impact on CYPs' well-being as it has again been shown to impact on parenting practices, with parents experiencing higher work stress being less engaged with their children and more prone to conflict at home (Heinrich, 2014).

### **Government policy and the education system**

Another significant yet indirect influence on CYP is the educational system and how government policy impacts on this (Clair, 2014). Within the UK, there is a considerable attainment gap in education with children from LSES backgrounds, on average, performing consistently poorer than HSES peers (Hutchinson, Bonetti, Crenna-Jennings, and Akhal, 2019). This attainment gap combined with high rates of child testing has been found to effect the well-being of LSES children by leading to demotivation, fear, and anxiety over 'inevitable failure' and a belief that they have no value to society (Archer, Halsall, and Hollingworth, 2007; Reay, 2006). It is suggested this 'failure' is a product of a 'fundamentally unequal' education system designed by and for the middle class which locates the cause of the problem within the LSES individuals themselves, as opposed to examining key issues around structure and social capital which may be leading to the underachievement and consequent effects on well-being (Perry and Francis, 2010). This may result in feelings of inadequacy and worthlessness for LSES pupils through the consistent focus on what they 'lack' (Reay, 2001). This could lead to learned helplessness which has been shown to be associated with depression (Zahn et al., 2015).

Current government initiatives to improve SEMH within schools, such as the guidance on 'Mental Health and Behaviour in Schools' (DfE, 2015), may provide a step in the right direction by promoting greater understanding of factors



affecting MH such as LSES. Despite this guidance many schools are still failing to acknowledge the potential impact of these risk factors on CYPs' behaviour, with zero tolerance behaviour policies continuing to be prevalent (Armstrong, 2018). Furthermore, other government initiatives to improve attainment by 'raising aspirations' could have further detrimental effects on CYPs' well-being through creating perceptions of LSES as resulting from lack of ambition (Francis and Hey, 2009). This then suggests poverty or LSES is a "cultural problem" due to individual choice and failure to grasp opportunities (McKie and Bauman, 2005). This could affect the cultures and beliefs of society (the macrosystem) creating a stigmatisation of this group which is associated with MHDs (Mak, Poon, Pun, and Cheung, 2007). It is argued that placing interventions onto an unequal system is going to have limited success and instead focus needs to be on looking at holistic approaches and 'innovative thinking' (Perry and Francis, 2010).

## **Macrosystem**

The macrosystem refers to beliefs and values surrounding the young person (Bronfenbrenner, 1986).

### **Culture and beliefs**

Within LSES families in the UK there is a huge cultural diversity with large numbers of white British families but also many ethnic minority families (Department for Work and Pensions, 2018), therefore it is important to consider the impact culture and beliefs may have on CYP with LSES. Culture and beliefs affect many aspects of family functioning such as parenting practices, emotional expression, and views around MH (Jimenez, Bartels, Cardenas, Dhaliwal, and Alegría, 2012; Keller et al., 2004; Porter and Samovar, 1996). Statistics around MHDs also differ between ethnic groups meaning it is important to consider culture when examining the impact of SES (McManus, Bebbington, Jenkins, and Brugha, 2016). Research has indicated differences in outcomes for different LSES ethnic groups, for example within white British pupils FSM eligibility has a stronger association with low attainment than for other ethnic groups (Kerr and West, 2010). Despite this, within some research SES and ethnicity are confounded meaning it is hard to separate the effects of SES from cultural differences. This makes identifying the risk and protective factors for each group challenging (Hill, 2006). Additionally, ethnic minority LSES families may experience other difficulties associated with being in a minority group that also impact on CYPs' well-being irrespective of SES. More research is necessary to examine the mediating factors of SES and MHDs within these groups in order to develop effective interventions.

## Chronosystem

The chronosystem examines change over time and how any changes may impact on the CYPs environment (Bronfenbrenner, 1986).

## SES change

The point in a child's life and duration of time for which the family shows indicators of LSES may impact on all previously mentioned factors. In terms of parental factors such as parenting practices and involvement, these interactions have been found to have a greater impact on child well-being for older children compared to toddlers, despite theories that parenting interactions may be more important during younger years when there are fewer other influences such as peers and schools (Rothbaum and Weisz, 1994). This was theorised to be due to the more reciprocal nature of interactions during later childhood, therefore LSES may have a more negative effect for older children. As desire to fit in with trends and socialise with peers outside of school is highest in adolescence, financial difficulties associated with LSES may also have the greatest impact during adolescence (Rubin et al., 2007). For other aspects such as school it may be that by adolescence pupils have already achieved their 'social status' so a 'fall' in SES may have less impact than in early years. Other factors within the education system deemed to be difficult for LSES pupils, such as the language used (Bernstein, 2003), may relate to language exposure and parental education and so a 'fall' in SES in later childhood may have less effect on well-being associated with academic difficulties. More longitudinal research is needed in this area as much of the research uses static measures of SES, such as FSM eligibility or current parental occupation, so cannot examine historical effects of SES (Hobbs and Vignoles, 2007).

## Conclusion

In summary, there are multiple possible mediators at all levels of the EST that could explain the association between SES and CYP well-being such as family factors, school, peers, community, and government policies. The ways in which SES may affect child MH are complex and works across systems. An understanding of this is important for interventions as targeting just one area within the microsystem, without wider understanding and consideration of the multiple effects of SES, may be insufficient for generating long-term improvements to CYPs' well-being. Much of the current research however is correlational, meaning it is not possible to determine causality and gain a good understanding of which factors are important to the MH of CYP from LSES backgrounds. Further research is also needed into the impact of culture and beliefs on the relationship between SES and MH so that differences can be effectively addressed within interventions.

Of particular salience within the literature is the role of schools in improving

well-being, yet some research has argued this may be of limited effectiveness for those at high risk, and wider interventions located within the mesosystem are necessary (Khanlou and Wray, 2014). Furthermore, some would argue within the current unequal education system individual school interventions may be ineffective without a holistic overview of the wider education system (Perry and Francis, 2010). Implications for EP practice may include supporting with staff members' understanding of the potential impact of SES on well-being as well as trying to change narratives around poor parenting and low parental aspirations. Consequently, this may improve parental involvement. EPs can also support by helping to bridge the gap between parents and schools as well as looking at what schools can do to make involvement more accessible to all parents. Examining school ethos and behaviour policies may be beneficial to consider what messages LSES pupils are unintentionally receiving through the hidden curriculum. EPs may also be able to provide training and support with implementing evidenced-based SEMH interventions and further research into how schools can incorporate parental involvement into whole school approaches. Work in this area would help begin to draw together aspects within the microsystem to produce broader interventions.

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