



Childhood peer status and the clustering of social, economic, and health-related circumstances in adulthood



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ABSTRACT

Within the school-class context, children attain a social position in the peer hierarchy to which varying amounts of status are attached. Studies have shown that peer status – i.e. the degree of acceptance and likeability among classmates – is associated with adult health. However, these studies have generally paid little attention to the fact that health problems are likely to coincide with other adverse circumstances within the individual. The overarching aim of the current study was therefore to examine the impact of childhood peer status on the clustering of social, economic, and health-related circumstances in adulthood. Using a 1953 cohort born in Stockholm, Sweden ($n = 14,294$), four outcome profiles in adulthood were identified by means of latent class analysis: ‘Average’, ‘Low education’, ‘Unemployment’, and ‘Social assistance reciprocity and mental health problems’. Multinomial regression analysis demonstrated that those with lower peer status had exceedingly higher risks of later ending up in the more adverse clusters. This association remained after adjusting for a variety of family-related and individual factors. We conclude that peer status constitutes a central aspect of children’s upbringing with important consequences for life chances.

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Introduction

The significance of circumstances in childhood for adult health is well-established (Galobardes, Lynch, & Davey Smith, 2004; Hagger-Johnson, Batty, Deary, & von Stumm, 2011). These circumstances commonly reflect the socioeconomic conditions of the family of origin such as parental social class, family income and housing conditions. Children who grow up under adverse socioeconomic resources are believed to experience a lack of resources that persists and even may accumulate over time, thereby giving rise to negative effects across the life course (DiPrete & Eirich, 2006; Holland et al., 2000). The resources transmitted to the child via the family are however not the only type that may influence the child’s future life chances. Drawing inspiration from the growing field of childhood sociology the present study highlights children ‘in the state of being’ rather than ‘adults in the making’, taking its starting-point in the specific social structures of childhood (Brannen & O’Brien, 1995). These structures typically emerge within the context of the school wherein children attain a social position apart

from their family. To these positions, varying amounts of peer status are attached. Past research has demonstrated influences of the child’s peer status in the school class on adult outcomes related to health (Almquist, 2009; Modin, Östberg, & Almquist, 2011), educational attainment, and unemployment (Almquist, Modin, & Östberg, 2010). While these studies have indeed recognised the importance of childhood-specific structures, they have not sufficiently addressed the fact that the adult outcomes which these structures are believed to shape may coexist within individuals (Brännström & Rojas, 2012; Bäckman & Nilsson, 2011; Fritzell, Gähler, & Nermo, 2007; Korpi, Nelson, & Stenberg, 2007). Using data from a cohort of more than 14,000 individuals born in 1953 in Stockholm, Sweden, the current study asks whether children’s peer status in the context of the classroom is associated with groupings of outcomes in adult life, in terms of education, labour market participation, economic hardship, and health. By adopting a person-centred approach (Swartout & Swartout, 2012), in which homogeneity in outcomes is not assumed, this study extends previous research into childhood circumstances and health-related outcomes in adulthood by targeting the outcome pattern as a whole. Since person-centred analyses identify outcome profiles which describe individuals rather than scores on variables, the conclusions reached in this study may also be more tailored for clinical and policy audiences.

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The concept of peer status

When analysing the influences of childhood circumstances (in terms of socioeconomic conditions) on adult outcomes, researchers have to deal with the fact that children do not have an occupation, education or income of their own. One common strategy has been to focus on the parents' socioeconomic position, assuming that the resources distributed at the macro-level of society affect the children's current and future life chances via their parents. Such studies have, for example, shown that children experiencing economic hardship and family poverty are more likely to be unemployed and poor as adults (Haveman & Wolfe, 1995; Wagmiller, Lennon, Kuang, Alberti, & Aber, 2006). Moreover, not only family income but also educational level and occupational class of the parents have been linked to children's subsequent risks of ill-health and mortality (Galobardes et al., 2004; Power, Manor, & Matthews, 1999; van de Mheen, Stronks, & Mackenbach, 1998). In sum, it stands clear that there are long-term consequences of parents' lack of resources for their children's outcomes as adults. It is however also evident that the factors mentioned above reflect an adult's perspective of what is important for children's life chances; a viewpoint that has been increasingly questioned.

Over the past three decades, there have been changes in how children and childhood are regarded in sociological research. Focus has shifted from the view of children as bystanders in their own development and childhood as simply a path towards adulthood to children as actively shaping their own reality and childhood as a sociologically interesting social phenomenon (Prout & James, 2005). A key notion within childhood sociology is that children participate in social worlds which are (relatively) autonomous and irreducible from adult society. Thus, already here it stands clear that the family may not be the only context of importance for children's life chances. In line with advocates of childhood sociology, we argue that a more child-oriented perspective on childhood precursors of adult outcomes should include the recognition of arenas alternative to the family. Here, the strongest contender is school; in childhood, no daily activity occupies as much of a child's time as attending school and no single place does the child spend greater amounts of awakening time in as that of the classroom. Within the context of the school class, children are more or less forced to interact with their classmates. Corsaro (1992) has suggested that the continuous social interaction between peers results in a unique peer culture. Parallel to the development of a peer culture is the process of differentiation through which a social hierarchy emerges over time (Corsaro & Eder, 1990).

The social hierarchy of the classroom, as it constitutes a unique feature of childhood, is the main focus of this article. A considerable amount of research has considered children's positions within the class hierarchy and the varying degree of peer status attached to these positions (for an overview, see Almquist, 2011a). The concept of peer status reflects the degree to which the child is accepted and liked by its peers. Peer status is commonly established through a so-called sociometric test, where children are asked to nominate a number of classmates whom they prefer in different respects. The more nominations a particular child receives, the higher his or her peer status position is assumed to be (Stütz, 1985). Studies have shown that individuals in high status positions are generally seen as helpful, friendly and considerate; academically and socially competent; cooperative; and follow rules (Cillessen & Mayeux, 2007; Kupersmidt, Coie, & Dodge, 1990; Newcomb, Bukowski, & Pattee, 1993). On the other hand, those with low peer status tend to be more aggressive and disruptive; violate rules; bully and fight; or are shy, withdrawn and lack prosocial skills (Coie, Dodge, & Coppotelli, 1982; Ladd & Oden, 1979; Ollendick, Weist, Borden, & Greene, 1992; Prinstein & Cillessen, 2003). However, it should be

underlined that the individual's attainment of peer status is not only dependent upon personality and behaviours but is partly also a result of the structural features of the specific school class and the various group processes that it contains.

Long-term influences of peer status

Besides its influences on child outcomes, several studies have established long-term consequences of childhood peer status. For example, one study by Almquist et al. (2010) shows that lower peer status is linked to a decreased chance of reaching higher levels of education (in terms of transition to both upper secondary school and to tertiary education) and increased risks of adult unemployment. Other studies have focused on health outcomes in adulthood, demonstrating a link between low peer status and a wide range of diseases such as mental health problems (Almquist, 2009; Modin et al., 2011). Important here to note is that these associations remain strong even after adjusting for socioeconomic position of the parents. Thus, peer status seems to reflect a type of childhood circumstances that has consequences for children's future life chances, over and above the influences of family-related conditions.

To study the effects of peer status on single outcomes is important because it renders possibilities to also examine specific mechanisms in closer detail: cognitive skills and scholastic abilities may be more important mechanisms to take into consideration in the association between peer status and educational attainment whereas health-related factors such as smoking and alcohol consumption probably are more important mediators in the link between peer status and later cardiovascular disease. However, adverse outcomes in adult life may go hand in hand. For instance, one study by Fritzell et al. (2007) has shown that health problems, economic hardship and weak labour market integration are strongly correlated. It could thus be the case that a small group of individuals have a general susceptibility toward a wide range of adversities and thereby make up for a large proportion of the associations across studies. If so, it may be misleading to study health-related outcomes isolated from other living conditions. One way of dealing with this is to instead examine the clustering of living conditions. Here, some parallels may be drawn to the person-centred approach which originates from the field of developmental psychology (Bergman & Trost, 2006; Eye & Bogat, 2006). This approach puts emphasis on the fact that it is the outcome pattern as a whole that carries the information rather than the parts regarded separately. In the present study we will therefore investigate the potential influences of childhood peer status on the grouping of various outcomes in adult life. In a way, this approach also surpasses some important problems with reversed causality. It is well-established that links exist between social conditions, economic factors and health, but the causal direction of these associations is generally difficult to disentangle: for example, poor health may both result in and be a result of low income (Halleröd & Bask, 2008). The focussing on clustering means that no *a priori* assumption about the causal direction between these types of living conditions needs to be made.

A resource perspective

We have not yet addressed the pathways linking childhood circumstances to adult outcomes. One hypothesis that has been put forward in research focussing on family-related conditions (in a broad sense) as childhood precursors of future life chances, maintains that the individual's access to resources determines the level of opportunity at various stages across the life course. A lack of resources at one stage may result in scarce resources at the next

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