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Psychosocial working conditions: An analysis of emotional symptoms and conduct problems amongst adolescent students

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ABSTRACT

This study explored how psychosocial features of the schoolwork environment are associated with students' mental health. Data was drawn from 3699 ninth grade (15 year-old) Swedish students participating in the Health Behaviour in School-Aged Children survey. Using Structural Equation Modelling, perceived school demands, decision control and social support from teachers, classmates and parents were examined in relation to students' emotional and conduct problems. Higher demands were associated with greater emotional symptoms and conduct problems. Although weaker social support predicted emotional symptoms and conduct problems, the relative influence of teachers, classmates and parents differed. Teacher support was more closely associated with conduct problems, particularly for girls, while classmate support was more strongly related to emotional symptoms. The findings indicate that while excessive school pressure is associated with poorer mental health, social support can assist in optimising adolescents' emotional health and adaptive behaviour, as well as shaping perceptions of demands.
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Introduction

Internalising and externalising problems during adolescence can impair academic achievement (McLeod & Fettes, 2009; McLeod, Uemura, & Rohrman, 2012) and have serious implications for students' future physical and mental health (Fergusson, Horwood, & Ridder, 2005; Kasen & Cohen, 2009). Despite these concerns, emotional and conduct problems amongst young people are prevalent (Mojtabai, 2006; Pastor, Reuben, & Duran, 2012), and rates have increased in recent decades (Lager, Berlin, Heimerson, & Danielsson, 2012). Poor psychological and behavioural adjustment are often related to stressors (Longest & Thoits, 2012; Thoits, 2010) and school is a commonly reported source of distress amongst adolescents (Children's Ombudsman, 2004:03, 2010:01).

While demands are a part of working life, studies on adults show that excessive stressful conditions can have detrimental effects on health and wellbeing. Stress arises when an individual perceives a lack of resources available to help manage

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challenges (Lazarus & Folkman, 1984). The Demand–Control–Support (DCS) model (Karasek, 1979; Karasek & Theorell, 1990) describes aspects of work conditions that can help explain links between stress and poor health. This model presents control over working conditions and social support from supervisors and colleagues as critical resources for coping with work demands. Demands generally refer to time pressures and workload, while control refers to an individual's degree of autonomy and decision authority over his or her work activities. Social support includes experiencing trust and affiliation (emotional support), as well as practical guidance to reach goals (instrumental support) (Karasek & Theorell, 1990). According to the DCS model, situations presenting high demands, low control and low support are likely to produce psychological strain, leading to ill health. High levels of control and social support are proposed to facilitate adaptive coping and also buffer the negative effects of excessive demands (Kaplan, Cassel, & Gore, 1977).

Although the DCS model was developed within an occupational setting, students' work situation shares many parallels with the adult work environment, such as deadlines, authority hierarchies and limited control over tasks and activities (Modin, Östberg, Toivanen, & Sundell, 2011). Although the spectrum of demands and decision control may be narrower for students than for employees, the health-related implications of these two dimensions need not necessarily be any less. Students report a considerable variation in the degree to which they receive practical help and emotional support from teachers, parents and other students (Brolin Låftman & Östberg, 2006; Hjern, Alfvén, & Östberg 2008). In regards to health benefits, these sources of social support may function in a similar way as supervisors and colleagues do for adult employees. Furthermore, adolescence is characterised by increased needs for autonomy, self- and relationship development (Eccles et al., 1993) and mismatches between these needs and the learning environment are likely stressors contributing to poor adjustment (Eccles & Midgley, 1989). In addition, Swedish students are covered by the Swedish Work Environment Act (Ministry of Labour, 1977: 1160; Swedish Work Environment Authority, 2007). This means that school principals, like employers, are obliged to provide a physical and psychosocial work environment in a way that promotes student wellbeing. Therefore, applying the DCS framework to adolescent mental health appears to be a fruitful approach to further understanding of how school-related stress may relate to emotional symptoms and conduct problems.

Empirical findings within the school setting

In line with expectations from the DCS model, experiencing excessive school pressure is positively associated with negative affect and psychosomatic complaints (Eriksson & Sellström, 2010; Gillander Gådin & Hammarström, 2003; Hjern et al., 2008; Natvig, Albrektsen, Anderssen & Qvarnstrøm, 1999). Although the model presents control (decision authority) as a key protective factor for coping with demands (work pressures), findings within the school context involving psychological symptoms (Gillander Gådin & Hammarström, 2003; Modin & Östberg, 2007), happiness (Natvig, Albrektsen, & Qvarnstrøm, 2003) and psychosomatic complaints (Natvig et al., 1999; Torsheim & Wold, 2001) have been inconsistent. Furthermore, a recent systematic review found limited evidence for the positive effects of student participation in class decision-making on health and externalising behaviours, such as fighting (Mager & Nowak, 2012).

Social support is especially relevant to adolescence as this is a period of development when relational needs become particularly salient (Baumeister & Leary, 1995; Connell & Wellborn, 1991; Ryan & Deci, 2000; Wentzel, 1998). The importance of social relations has also been emphasised within developmental and motivational theories, arguing that social support is a fundamental psychological need for adaptive coping and wellbeing (Baumeister & Leary, 1995; Bowlby, 1979; Connell & Wellborn, 1991; Ryan & Deci, 2000). During childhood parents are generally considered the main source of support, with the family environment being very important for both student achievement and health. Instrumental support (e.g. help with homework) from parents can be a particularly important resource for helping students cope with schoolwork. Moreover, due to their proximity to the school context, teachers are especially relevant and can readily act through both instrumental and emotional support (Danielsen, Samdal, Hetland, & Wold, 2009; Niemiec & Ryan, 2009). Perceptions of stronger parent and teacher support, involving caring and helpfulness are associated with lower psychological distress and psychosomatic symptoms, as well as less delinquency (Brolin Låftman & Östberg, 2006; Cattley, 2004; Fagg, Curtis, Stansfeld, & Congdon, 2006; Hjern et al., 2008; Murberg & Bru, 2009; Wang, 2009; Wang & Dishion, 2012). However, given the centrality of friendships to adolescence (Berndt, 1999), the role of peers should not be overlooked. While peer support is associated with academic outcomes, they are thought to play a key role in non-academic outcomes, particularly in emotion regulation (Martin, Marsh, McInerney, & Green, 2009; Wentzel, 1998). Similar to adults, lower peer support and acceptance is also associated with greater emotional problems, psychosomatic complaints and problem behaviour (Brolin Låftman & Östberg, 2006; Lopez & Dubois, 2005; Wang & Dishion, 2012).

There is some evidence to suggest that peer support is particularly relevant for emotional symptoms and teacher support for conduct problems, while parent support is important for both types of difficulties (Garnefski & Diekstra, 1996; Stewart & Suldo, 2011). Thus, although teachers are in close proximity to a major stressor (school demands), support from classmates, parents and teachers may have unique implications for different aspects of mental health. However, it is important to consider these associations within adolescents' work context by also addressing their perceptions of school demands and decision control. When multiple features of the psychosocial work environment are considered, school demands and peer relations have been shown to play a greater role in emotional difficulties (depression and anxiety) and psychosomatic symptoms than perceptions of decision control, teacher support or general social support (Gillander Gådin & Hammarström, 2003; Torsheim & Wold, 2001). However, a better understanding of the relative influence of decision control and social support, as well as their capacity to buffer against the negative consequences of stressful conditions is needed. Furthermore, as most research in