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Factors Influencing The Social-Emotional Development of Children And Adolescents: A Study Systematic Literature Review

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Abstract

Adolescence brings about significant changes that are intertwined in all domains of development, not only in the physical dimension but also in social-emotional development. This study aims to analyze the factors that influence the social-emotional development of children and adolescents. This study used a systematic literature review method. The analysis used Preferred Reporting Item for Systematic Review and Meta-Analytic (PRISMA) method. After scanning titles, abstracts, and inclusion criteria, 575 journals were analyzed. Some findings were excluded because they did not meet the criteria, so the number of journals included in the discussion totaled 38 articles. The results showed that factors influencing socio-emotional development were grouped into six factors, namely socioeconomic characteristics, mother-child interactions, risky behavior and device use, parental psychological conditions, attachment and parenting, and school learning programs. Suggestions that can be given are improving the psychological well-being of mothers, maintaining and increasing positive interactions between mothers and adolescents, parents having an attachment, and conducting positive parenting. Adolescents have the ability to recognize and manage emotions.

Keywords: child development, emotional, social, youth

Abstrak

Masa remaja membawa perubahan besar yang saling bertautan dalam semua ranah perkembangan, tidak hanya dalam dimensi fisik tetapi juga perkembangan sosial-emosional. Penelitian ini bertujuan untuk menganalisis faktor-faktor yang memengaruhi perkembangan sosial emosional anak dan remaja. Penelitian ini menggunakan metode systematic literature review. Analisis yang digunakan adalah metode Preferred Reporting Item for Systematic Review and Meta-Analytic (PRISMA). Setelah memindai judul, abstrak dan kriteria inklusi maka jurnal yang dianalisis berjumlah 575. Beberapa hasil temuan dikeluarkan karena tidak memenuhi kriteria, maka jumlah jurnal yang dimasukkan dalam pembahasan berjumlah 38 artikel. Hasil penelitian menunjukkan bahwa faktor-faktor yang memengaruhi perkembangan sosial emosional dikelompokkan menjadi enam faktor yaitu karakteristik sosial ekonomi, interaksi ibu anak, perilaku berisiko dan penggunaan gawai, kondisi psikologis orangtua, kelekatan dan pengasuhan, dan program pembelajaran sekolah. Saran yang dapat diberikan yaitu meningkatkan kesejahteraan psikologis ibu, menjaga dan meningkatkan interaksi positif antara ibu dan remaja, orangtua memiliki kelekatan dan melakukan pola asuh yang positif, remaja memiliki kemampuan mengenali dan mengelola emosi.

Kata kunci: emosional, perkembangan anak, sosial, remaja

Introduction

The results of the 2020 population census recorded that 23.1 million people in Indonesia are teenagers (15-19 years old). This number can benefit the nation if adolescents show positive potential. Otherwise, it becomes a disaster if the teenager shows negative behavior such as juvenile delinquency, which includes fighting, theft, deviant sexual levels, vandalism of public facilities, and drunk or taking illegal drugs (Sunarti et al., 2017). Vulnerable adolescents generally come from social pressures, such as a less supportive parenting environment (Puspitawati & Setioningsih, 2011).

Problems and behaviors of adolescent social deviance tend to increase over time. Problems such as pornography, bullying, brawls, and other antisocial behavior are still often found in adolescents in urban and rural areas (Situmorang et al., 2016). Deviant behavior occurs because they are unable to adjust and accept the circumstances they face (Mighfar, 2006). Data from the Indonesian Child Protection Commission (KPAI) shows that from 2011-2020, data on education-related cases totaled 5,246 cases. These cases include cases of brawls, bullying, and dropping out. In addition, children involved in pornography and cybercrime totaled 4,448 cases. Based on the KPAI complaint report, the number of victims and perpetrators of child rights violations reached 23,261 people, with the number of victims and perpetrators dominated by men (50.68%) with 6106 cases of children in conflict with the law.

Research by Sunarti Islamia, Rochimah, and Ulfa (2017) shows that adolescents have the potential for social threats. Adolescents also have various problems originating from home and school, which can also be a risk factor for adolescent resilience. Girls feel more frequent quarrels at home, while boys are more often punished by teachers at school. Furthermore, urban adolescents are more often involved in free sex, skipping school, and involved in alcohol, while adolescents in regencies are more often invited to consume drugs. Adolescence is closely related to social-emotional development; one of the characteristics of adolescence is the increase in emotions and the complexity of social relationships (Somerville, 2013; Bailen et al., 2019).

Based on the concept of social-emotional development as a process, while social-emotional maturity is an outcome. Social-emotional development is an umbrella term that describes an individual's range of interpersonal and intrapersonal skills. Social-emotional development includes understanding, regulating, and expressing emotions in an age and developmentally appropriate manner, as well as the ability to establish, maintain, and develop healthy relationships (Malti, 2011). Research on social-emotional development is influenced by Erik Erikson's psychosocial theory. The main task of adolescence is to solve the identity crisis vs identity confusion to become a unique adult with a complete understanding of self and the role of value in society (Erikson, 1963). During adolescence, social-emotional conditions are often challenging as emotions become uncontrollable and sometimes irrational (Hurlock, 2015).

Adolescents whose development process is in a conducive family environment tend to have mature social-emotional development (Yusuf, 2012). The relationship between children and parents as the closest figure in the family becomes a source of emotion for children and can form an emotional bond. This emotional bond is then called parental attachment. The importance of parental attachment is the first step for children to learn to interact and have emotional ties before a person establishes interactions with other people (Hermasanti, 2009). This shows that social-emotional development is influenced by

parent-child attachment. In adolescence, there is a change in attachment figures in children, from parents to peers. This shows that parents and adolescents play an important role in adolescent psychological adjustment (Kildare & Middlemiss, 2017). Furthermore, attachment in adolescents shifts from parental figures to other figures, such as peers (Hoeve et al., 2012). Peer interaction is a dynamic social relationship that involves the relationship between adolescents and peers, between peer groups, or adolescents and peer groups (Gillin in Soekanto, 2012). Adolescents spend more time with peers, so relationships with peers have an impact on social-emotional development during this period (Meuwese et al., 2016). The relationship between adolescents and peers in friendship allows adolescents to manage emotions, reduce anger, and make social adjustments. This suggests that social-emotional development is influenced by peer interactions (Von Salisch, 2001). In the digital era, adolescent relationships with peers are also established through the use of social media to gain trust and attachment with their peers (Rahmawati, 2014).

Several previous studies have also examined factors that influence socio-emotional development, namely socioeconomic characteristics (family status, child age, family size, family expenditure, gender, number of siblings, parental education, parental income, mother's working status, and economic pressure) (Hastuti et al., 2011; Wijirahayu et al., 2016; Wang et al., 2019; Fatimah et al., 2020; Rahmawati & Latifah, 2020; Wang, 2022). Maternal psychological condition (Watts et al., 2016; Folger et al., 2017; Prado et al., 2021; Santelices et al., 2021). Mother-child interaction (Bocknek et al., 2012; Marti et al., 2016; Rahmawati & Latifah, 2020). Parent-child attachment (You & Kim, 2016; Marheni, Made, & Susilawati, 2019). Parenting (Alfiasari et al., 2011; Schoppe-Sullivan, 2017; Ren & Xu, 2019). Risky behavior/aggressiveness (Martinson et al., 2016; Tsabedze et al., 2019). Online social networking (Tyagi & Meena, 2022). Based on these things, this study aims to analyze the factors that influence the social-emotional development of children and adolescents. This study is different from previous studies that analyzed certain variables on social-emotional development. This study focuses on the factors that influence the social-emotional development of adolescents analyzed based on previous studies. This study aims to analyze the factors that influence the social-emotional development of children and adolescents.

Methods

The method used was systematic literature review (SLR), which is a literature review method that identifies, evaluates, and interprets all findings on a research topic to answer predetermined research questions (Kitchenham & Charters, 2007). The literature search was limited to articles published in 2012-2022. The article search was conducted online using the search keywords "social-emotional development" and "social-emotional development" in the title and keywords in the research database at Sagepub, Google Scholar, Springer Link, Science Direct, Taylor and Francis Online, Willey, and ProQuest.

The analysis used was the Preferred Reporting Item for Systematic Review and Meta-Analytic (PRISMA) method. All articles that passed the selection were then reviewed and summarized based on references, country, respondents, research design, instruments/indicators, and research results. The research database search resulted in all keyword search results obtained 15,364 research articles, from Sagepub as many as 4,351 articles, Google Scholar as many as 1000 articles, SpringerLink as many as 782 articles,

ScienceDirect as many as 4,247 articles, Taylor and Francis Online as many as 3,918 articles, Willey as many as 916 articles and ProQuest as many as 150 articles. After scanning the titles, abstracts, and inclusion criteria, the number of journals analyzed was 575. Furthermore, some of the findings were excluded because they were literature reviews, journal indexes, book reviews, and articles that did not meet the criteria (not related). There were 53 articles, but based on the results of the analysis of Scopus-indexed journals (Q1-Q3) and sinta indexed journals (S1-S3), the total number of journals analyzed was 38 articles. The literature search is described in more detail in Figure 1.

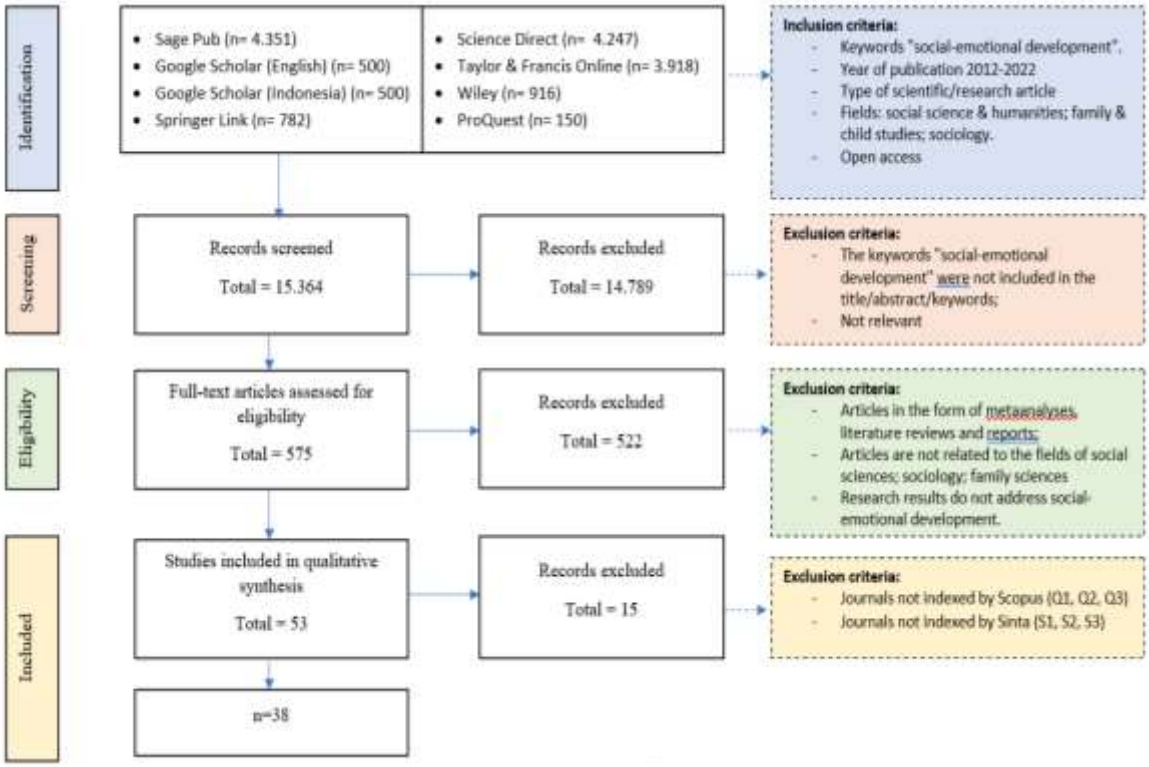

Figure 1. Flowchart PRISMA

Findings

Based on the analysis results from Scopus-indexed journals (Q1-Q3) and Sinta-indexed journals (S1-S3), the total number of journals analyzed was 40 articles. Research design. The research was conducted using a quantitative approach and cross-sectional study (Bocknek et al., 2012; Martí et al., 2016; Gower et al., 2014; Martinson et al., 2016; Rahmawati & Latifah, 2020; Indanah & Yullisetyaningrum, 2019; Wijirahayu et al., 2016; Fatimah et al., 2020; Larasati & Marheni, 2019; Alfiasari, Latifah & Wulandari, 2011; Nurtami & Supraptiningsih, 2015; Hastuti, Fiernanti & Guhardja, 2011; Marheni, Made & Susilawati, 2019; Ren & Xu, 2019; Wang, Victor, Wu & Perron, 2019; You & Kim, 2016; Dillmann, Sensoy, & Schwarzer, 2022; Tsabedze, Lawal, Maepa & Pila-Nemutandani, 2019; Simões & Matos, 2012; Watts, Oburu, Lah, Hunt & Rhodes, 2016). The following are the results of the analysis of selected articles in Table 1.

Table 1. Characteristics and main findings of the research results

No	Author & Journal Status	Country	Respondent	Research Design
1	Bocknek, E. L., Brophy-Herb, H. E., Fitzgerald, H., Burns-Jager, K., & Carolan, M. T. (Q1)	America	The number of respondents was 2,632 families.	Quantitative research. Cross-sectional study
2	Martí, M., Bonillo, A., Jané, M. C., Fisher, E. M., & Duch, H. (Q1)	America	Respondents consisted of 109 mother-child pairs.	Quantitative research. Cross-sectional study
3	Dillmann, J., Sensoy, Ö., & Schwarzer, G. (Q2)	Jerman	The final data consisted of 90 children aged 7-38 months.	Quantitative research. Cross-sectional study
4	You, S., & Kim, A. Y. (Q1)	Korea	This study involved 730 students who completed the survey.	Quantitative research. Cross-sectional study
5	L. Ren, W. Xu. 2019. (Q1)	China	A total of 515 families were recruited from 12 public preschools with children aged 3-6 years.	Quantitative research. Cross-sectional study
6	Tsabedze, W. F., Lawal, A. M., Maepa, M. P., & Pila-Nemutandani, R. G. (2019). (Q3)	Africa	This study involved high school-aged adolescents (N = 440).	Quantitative research. Cross-sectional study
7	Wang, M., Victor, B. G., Wu, S., & Perron, B. E. (Q2)	China	A total of 677 adolescents completed the survey	Quantitative research. Cross-sectional study
8	Watts, S. E., Oburu, P., Lah, S., Hunt, C. J., & Rhodes, P. (Q2)	Kenya	This study involved 81 mother-child pairs.	Quantitative research. Cross-sectional study
9	Gower, A.L., Shlafer, R.J., Polan, J., McRee, A., McMorris, B.J., Pettingell, S.L., & Sieving, R.E. (Q1)	America	a total of 253 girls (aged 13-17 years).	Quantitative research. Cross-sectional study
10	Martinson, L.E., Esposito-Smythers, C., & Blalock, D.V. (Q1)	America	Respondents were 59 couples (n= 118, adolescent and primary caregiver).	Quantitative research. Cross-sectional study
11	Rahmawati M., & Latifah M. (S2)	Indonesia	This study involved 122 randomly selected families with preschool-aged children.	Quantitative research. Cross-sectional study
12	Hastuti D., Fiernanti D. Y. I., & Guhardja S. (S2)	Indonesia	This study involved 300 randomly selected families.	Quantitative research. Cross-sectional study

Table 1. Characteristics and main findings of the research results (continue)

No	Author & Journal Status	Country	Respondent	Research Design
14	Wijirahayu, A., Krisnatuti, D., & Muflikhati, I. (S2)	Indonesia	100 families	Quantitative research. Cross-sectional study
15	Fatimah R., Sunarti E., & Hastuti D. (S2)	Indonesia	the number of samples taken for this study was as many as 60 adolescent boys and 60 adolescent girls.	Quantitative research. Cross-sectional study
16	Marheni, A., Made, I. R., & Susilawati, L. K. P. A. (S3)	Indonesia	The participants in this study were 164 high school adolescents in Denpasar.	Quantitative research. Cross-sectional study
17	Alfiasari A., Latifah M., & Wulandari A. (S2)	Indonesia	This study involved 107 student respondents consisting of 55 male and 52 female first-year students.	Quantitative research. Cross-sectional study
18	Folger, A. T., Putnam, K. T., Putnam, F. W., Peugh, J. L., Eismann, E. A., Sa, T., Shapiro, R. A., Van Ginkel, J. B., & Ammerman, R. T. (Q1)	America	1172 mother-child pairs	A retrospective cohort
19	Huang, J., Kim, Y., & Sherraden, M. (Q1)	America	This study included 2704 caregivers of infants.	Quantitative research. Cross-sectional study
20	Berger, L. M., & McLanahan, S. S. (Q1)	America	4,897 children.	This study was a longitudinal study
21	Johnson S. D. (2014). (Q1)	America	One hundred twenty-eight parents participated.	Longitudinal study
22	Lee, J., & Schoppe- Sullivan, S.J. (Q1)		762 families.	Longitudinal study.
23	Hurtado-Mazeyra, A., Alejandro-Oviedo, O.M., Rojas-Zegarra, M.E., & Sánchez, A. (Q2)	Peru	This study involved 2052 families with children (aged 6-18 months).	Longitudinal study.
24	Shi, H., Zhao, C., Dou, Y., Duan, X., Yang, L., Du, Y., Huang, X., Wang, X., & Zhang, J. (Q1)	China	2,247 children aged 3-35 months.	Quantitative research. Cross-sectional study
25	Rohayati. (S3)	Indonesia	, a sample of 54 people was obtained.	Quantitative research. Cross-sectional study
26	Giang, T., & Huynh, V. (Q1)	Vietnam	In this study, seven adolescent boys and eight adolescent girls.	phenomenological approach
27	Prado, E. L., Sebayang, S. K., Adawiyah, S. R., Alcock, K. J., Ullman, M. T., Muadz, H., & Shankar, A. H. (Q1)	Indonesia	The study involved 359 families.	Quantitative research. Cross-sectional study
28	Tyagi T & Meena S. (Q3)	India	The sample size consisted of 505 females.	Quantitative research. Cross-sectional study

Table 1. Characteristics and main findings of the research results (continue)

No	Author & Journal Status	Country	Respondent	Research Design
29	Nakamichi, K., Takahashi, M., Sunagami, F., & Iwata, M. (Q1)	Japan	Participants were 872 pairs of parents with 2-year-old children.	Quantitative research. Cross-sectional study
30	Hurd, N. M., & Sellers, R. M. (Q1)	America	259 black adolescents	Quantitative research. Cross-sectional study
31	Schonert-Reichl, K. A., Oberle, E., Lawlor, M. S., Abbott, D., Thomson, K., Oberlander, T. F., & Diamond, A. (Q1)	Canada	The study involved 100 children.	Quantitative research. Cross-sectional study
32	Baker, C.E. (Q1)	America	This study involved 5190 participants.	This study is a longitudinal study.
33	Sharif, M.Z., Truong, M., Alam, O., Dunn, K.M., Nelson, J.K., Kavanagh, A.M., Paradies, Y., & Priest, N. (Q1)	Australia	4664 public school students	This study is a longitudinal study.
34	Ji, P., DuBois, D., & Flay, B. (Q1)	America	This study involved 874 adolescents	This study is a longitudinal study.
35	Mahamud Magan, I., Patankar, K., & Ahmed, R. (Q1)	America	15 Rohingya refugees aged 12-17 years old	Qualitative study
36	Malhotra, N., Ayele, Z.E., Zheng, D., & Ben Amor, Y. (Q1)	Uganda	This study involved 280 children aged 12-17 years old.	Quantitative research. Cross-sectional study
37	Santelices, M.P., Tagle, F.P., & Immel, N. (Q2)	Chili	The study included 123 mother-child pairs.	Quantitative research. Cross-sectional study
39	Wang C. (Q2)	China	The study involved 366 children.	Quantitative research. Cross-sectional study
40	Shi, H., Wang, Y., Li, M., Tan, C., Zhao, C., Huang, X., Dou, Y., Duan, X., Du, Y., Wu, T., Wang, X., & Zhang, J. (Q1)	China	The study involved 811 children.	Quantitative research. Cross-sectional study

Research respondents. Research respondents in adolescent children (Tsabedze et al., 2019; Gower et al., 2014; Simões & Matos, 2012; Martinson et al., 2016; Fatimah et al., 2020; Larasati & Marheni, 2019; Marheni et al., 2019; Nurtami & Supraptiningsih, 2015; Alfiasari et al., 2011). School-age child research respondents (You & Kim, 2016; Wang et al., 2019). Preschool-age mother-child research respondents (Bocknek et al., 2012; Dillmann et al., 2022; Ren & Xu, 2019; Watts et al., 2016; Rahmawati & Latifah, 2020; Hastuti et al., 2011; Indanah & Yullisetyaningrum, 2019; Wijirahayu et al., 2016). School-age mother-child research respondents, teacher-student research respondents (Martí et al., 2016).

Place of research. Research conducted in America (Bocknek et al., 2012; Martí et al., 2016); (Gower et al., 2014; Martinson et al., 2016). Research conducted in Indonesia (Rahmawati & Latifah, 2020; Indanah & Yullisetyaningrum, 2019; Wijirahayu, Krisnatuti, & Muflikhati, 2016; Fatimah, Sunarti & Hastuti, 2020; Larasati & Marheni, 2019; Alfiasari, Latifah & Wulandari, 2011; Nurtami & Supraptiningsih, 2015; Hastuti, Fiernanti & Guhardja, 2011; Marheni, Made & Susilawati, 2019). Research conducted in China (Ren & Xu, 2019; Wang et al., 2019). Research conducted in Korea (You & Kim, 2016). Research conducted in Germany (Dillmann et al., 2022). Research conducted in Africa (Tsabedze et al., 2019). Research conducted in Portugal (Simões & Matos, 2012). Research conducted in Kenya (Watts et al., 2016).

Research instrument. Bayley's social-emotional questionnaire (Bocknek, Brophy-Herb, Fitzgerald, Burns-Jager & Carolan, 2012; Dillmann, Sensoy, & Schwarzer, 2022; Watts, Oburu, Lah, Hunt & Rhodes, 2016). Social Skills Improvement System Questionnaire-Parent Form [SSIS-PF] - (Gresham & Elliott, 2009); Social Skills Improvement System-Teacher Form [SSIS-TF] questionnaire - (Gresham & Elliott, 2009); Social Competence and Behavior Evaluation Questionnaire-Short Form [SCBE-30] - (LaFreniere & Dumas, 1996); Penn Interactive Peer Play Scale [PIPPS] questionnaire - (Fantuzzo & Hampton, 2000) (Martí, Bonillo, Jané, Fisher, & Duch, 2016). Behavioral and Emotion Rating Scale Questionnaire (BERS; Epstein, 2004) - (You & Kim 2016). Devereux Early Childhood Assessment Assessment Questionnaire (DECA; Lebuffe & Naglieri, 1999), - (Ren & Xu, 2019). Emotional Intelligence Questionnaire (Schutte & Colleagues, 1998; Tsabedze, Lawal, Maepa & Pila-Nemutandani, 2019). Chinese Positive Youth Development Scale (CPYDS) questionnaire (Shek, Siu, & Lee, 2007; Wang, Victor, Wu & Perron, 2019). Bar-On and Parker's (2000) Emotional Intelligence Inventory Questionnaire: Adolescent Version - (Gower, Shlafer, Polan, McRee, McMorris, Pettingell & Sieving, 2014; Martinson, Esposito-Smythers & Blalock, 2016).

The "Risk and resilience in adolescence survey" (Simões et al. et al., 2009; Simões & Matos, 2012). The Social-Emotional Assessment/ Evaluation Measure (SEAM) questionnaire (Squires et al., 2014) - (Rahmawati & Latifah, 2020). Vineland Social Maturity Scale questionnaire (Hastuti et al., 2011). Pediatric Symptom Checklist-17 (PSC) Questionnaire (Indanah & Yullisetyaningrum, 2019). Ages and Stages Questionnaires: Social-Emotional (ASQ: S.E.) developed by Squires et al. (2002) and Wijirahayu et al. (2016). Social Skill Inventory questionnaire developed by Riggio (1986) and Fatimah et al. (2020). Social Skills Scale from Caldarella & Martel's theory (Larasati & Marheni, 2019); Nurtami & Supraptiningsih, 2015; Marheni, Made & Susilawati, 2019). A social intelligence questionnaire was developed by Goleman (2007) and Alfiasari, Latifah, and Wulandari (2011).

Socioeconomic Characteristics

Age, family size & mother's education, child age and family size have a positive effect on children's socio-emotional development but mother's education has a negative effect on children's socio-emotional development (Rahmawati & Latifah, 2020); Material difficulty, There is a negative relationship between material difficulty and children's socio-emotional development (Huang, Kim, & Sherraden 2017); Family income, parent relationship status (Berger & McLanahan 2015); Family literacy, Causes of stress in the social environment, including religious discrimination, impact on adolescent health and development especially social-emotional adjustment and sleep behaviour (Baker 2013);

Mother's education, child's age, family expenditure (Hastuti, Fiernanti & Guhardja 2011); Mother's education, mother's working status, child development status (Wijirahayu, Krisnatuti, Muflikhati 2016); Gender, family size, education, income, family type (Indanah & Yullisetyaningrum 2019); Confucianism (belief) (Giang & Huynh 2022); Maternal abandonment (Shi et al. 2021); Migrant parents (Shi et al. 2020); Child age, physical activity (Wang 2022); Child age, economic pressure (Fatimah, Sunarti & Hatuti 2020); Intact family (Wang, Victor, Wu & Perron 2019).

Mother-Child Interaction

Mother and child interaction increased mother-child interaction can improve children's social-emotional development (Rahmawati & Latifah, 2020). Maternal absence mediated by mother-child interaction, maternal absence psychologically has a significant effect on children's social-emotional development (Bockneck et al., 2012). Positive mother-child interaction, positive mother-child interaction, promotes the development of social-emotional competence (Marti et al., 2016). Mother and adolescent interactions have a direct positive effect on adolescent social-emotional development (Fatimah et al., 2020).

Risky Behavior and Gadget Use

With positive self-perception and the ability to manage emotions, adolescents who are able to manage and make good use of their own emotions are less likely to engage in verbal aggression (Tsabedze et al., 2019). Aggression behavior and physical violence, Social-emotional intelligence, and stress management skills may protect adolescent girls (including those who are victims of violence) from engaging in aggressive behavior and physical violence (Gower et al., 2014). Eating disorders adolescents who lack the ability to effectively recognize, express, and manage negative emotions that arise in the context of the home environment are at greater risk of developing eating disorders. Thus, strengthening adolescents' social-emotional coping skills can help protect adolescents from eating disorders (Martinson. Esposito & Blalock, 2016). Online social networking Excessive online social networking can reduce mental health and emotional intelligence (Tyagi & Meena, 2022).

Psychological Condition of Parents

Exposure to maternal interpersonal trauma, Exposure to maternal interpersonal trauma can negatively impact children's social-emotional development (Folger et al., 2017); Family aggression, Children's Exposure to family aggression on social-emotional competence can be reduced by positive conflict resolution experiences (Jhonson, 2015); Maternal psychological well-being, Poor maternal psychological well-being is associated with lower social-emotional development. Maternal psychological distress and maternal parenting experiences predict child social-emotional development (Watts et al., 2016). Parental stress: Higher parental stress is associated with lower child social-emotional behavior (Dillman et al., 2022; Sharif et al., 2021). Maternal depression: Prevention of maternal depression can improve a child's cognitive and social-emotional development from childhood to pre-adolescence (Prado et al., 2021; Santelices et al., 2021).

Attachment and Parenting

Parent and peer attachment had an indirect effect on aggression behavior through self-control among boys. As for girls, parental attachment was found to have direct and

indirect effects on aggression behavior through empathy and self-control (You & Kim, 2016); Child and parent attachment. There is a positive relationship between child-parent attachment and adolescent social skills (Marheni, Made & Susilawati, 2019). Authoritative and authoritarian parenting: Authoritative parenting perceived by adolescents will increase social intelligence and self-esteem. In contrast, authoritarian parenting perceived by adolescents decreases social intelligence, self-esteem, and academic achievement (Alfiasari et al., 2011). Father's positive involvement in psychosocial stimulation, Psychosocial stimulation is the factor most associated with children's social-emotional development (Hastuti et al., 2011). Quality of co-parenting (Ren & Xu, 2019). Maternal sensitivity and play opportunities: Maternal sensitivity and opportunities to play and explore with children influence cognitive development and social-emotional competence (Hurtado et al., 2022). Positive father involvement may be a protective factor for children's social-emotional development (Lee & Schoppe-Sullivan, 2017).

School Learning Activities and Programs, Pandemic Covid-19

The COVID-19 pandemic and online schools, perceived challenges are the unavailability of personal space to do schoolwork, difficulty adjusting to online schools due to limited computer use, and feelings of boredom and sadness, which have an impact on the emotional and mental health conditions of adolescents (Mahamud et al., 2022). Child-focused teaching attitudes and child-centered teaching attitudes in classrooms contribute significantly to children's social-emotional skills, resulting in low problem behavior (Nakamichi et al., 2022). Social-emotional social-emotional learning curriculum has an effect on girls' social-emotional development, followed by increased self-esteem, responsible decision-making (Malhotra et al., 2021); Mentoring (Hurd & Sellers, 2013); Mentoring, Natural mentoring through mentoring by natural mentors (adults who are caring and supportive of adolescents, such as relatives, neighbors, coaches or community members) can improve adolescents' social-emotional development and have a positive impact on academics (Hurd & Sellers, 2013); Mindfulness attention training programs, mindfulness attention training programs for children combined with optimism, gratitude and doing good to others not only improve cognitive development but also improve children's social-emotional development and well-being (Schonert-Reichl, 2015).

Discussion

Based on the results of the literature review analysis, it is known that research designs related to social-emotional development are cross-sectional study design, longitudinal study design, and retrospective study design. Research respondents related to social-emotional development are adolescents, women aged 19-35 years, school-age children, mothers with preschool children, fathers with preschool children, and mothers and teachers with school-age children. Furthermore, the place of research related to social-emotional development is America, Indonesia, China, Korea, Africa, Kenya, Peru, Vietnam, India, Uganda, Chile, Australia, Japan, and Canada. The results of the literature review show that socio-emotional development is influenced by socioeconomic characteristics, parental psychological conditions, mother-child interactions, attachment and parenting, risky behavior (aggressiveness), online social networking, the COVID-19 pandemic, activities, and learning programs at school. Socioeconomic characteristics

affect children's socio-emotional development. Matters related to children's socio-emotional development include family status, child age, family size, family expenditure, gender, number of siblings, parental education, parental income, mother's working status, and economic pressure. Children from two-parent families have higher social-emotional development (Wang et al., 2019; Indanah & Yullisetyaningrum, 2019; Rahmawati & Latifah, 2020; Fatimah et al., 2020; Hastuti et al., 2011; Wang, 2022). Other results also show that increasing maternal education and parent-child attachment will have an effect on improving the social-emotional development of preschool-age children. Children of non-working mothers have higher social-emotional development than children of working mothers. Children of normal growth status have higher social-emotional development than children with growth disorder risk status (Wijirahayu et al., 2016). There is a negative relationship between material hardship and children's social-emotional development (Huang et al., 2017). Family income, the quality of parental relationships, and the quality of parenting across family types can influence social-emotional development (Berger & McLanahan, 2015).

Children of migrant parents have a higher risk of social-emotional problems than others (Shi et al., 2020). Furthermore, Confucianism (beliefs) has a positive impact on the social and emotional health of adolescents in Vietnam. Confucianism has become an educational ideology in Vietnam, blending its philosophy with other religious and spiritual doctrines (Giang & Huynh, 2022). Increasing family literacy engagement, such as fathers and mothers participating in book reading, can have positive benefits for children's cognitive development and social-emotional skills (Baker, 2013). Children left behind by parental separation are at high risk of social-emotional problems. Results showed that children who were abandoned by their mothers had significant social-emotional developmental problems (Shi et al., 2021). Exposure to maternal interpersonal trauma can negatively impact children's social-emotional development (Folger et al., 2017). Children's Exposure to family aggression on social-emotional competence can be reduced by positive conflict resolution experiences (Jhonshon, 2015). Prevention of maternal depression can improve children's cognitive and socio-emotional development from childhood to pre-adolescence (Prado et al., 2021). According to Watts et al. (2016), poor maternal psychological well-being is associated with lower social-emotional development. Maternal psychological distress and maternal parenting experiences predict children's social-emotional development. According to Dillmann, Sensoy, and Schwarzer (2022), Santelices et al. (2021), and Sharif et al. (2021), higher parental stress is associated with lower child social-emotional behavior.

Social-emotional development is influenced by mother-child interactions. Increased positive mother-child interactions can encourage and improve children's social-emotional development. The results of research by Bocknek et al. (2012) showed that psychological mother absence has a significant effect on children's social-emotional development, which is mediated by mother-child interaction. According to Martí et al. (2016), positive mother-child interactions promote the development of social-emotional competence. However, poverty and psychosocial risk factors have a negative impact on mother-child interactions. Research by Rahmawati and Latifah (2020) states that increasing mother-child interaction can improve children's social-emotional development. According to Fatimah, Sunarti, and Hastuti (2020), mother-adolescent interaction has a direct positive effect on adolescent social-emotional development.

According to You and Kim (2016), parental and peer attachment have indirect effects on aggression behavior through self-control among boys. As for girls, parental

attachment was found to have direct and indirect effects on aggressive behavior through empathy and self-control. The results of Marheni, Made, and Susilawati's research (2019) show that parental care affects children's social-emotional development; if parenting is positive, the child's social-emotional development will be optimal, and vice versa if the quality of parenting is low will interfere with the child's social, emotional development. Ren and Xu's research (2019) shows that the quality of shared parenting has a positive effect on children's social-emotional development mediated by the consistency of children's routines. The results of research by Alfiasari, Latifah, and Wulandari (2011) show that authoritative parenting perceived by adolescents will increase social intelligence and self-esteem. In contrast, authoritarian parenting perceived by adolescents decreases social intelligence, self-esteem, and academic achievement.

Positive father involvement can be a protective factor for children's social-emotional development (Lee & Schoppe-Sullivan, 2017). Maternal sensitivity and opportunities to play and explore with children influence cognitive development and social-emotional competence (Hurtado-Mazeyra et al., 2022). There is a relationship between parenting, interaction with peers, and health status in children's social-emotional development, and there is no relationship between the number of children and children's social-emotional development (Rohayati, 2016). According to Hastuti, Fiernanti, and Guhardja (2011), psychosocial stimulation is the factor most associated with children's social-emotional development. According to Tsabedze Lawal, Maepa, and Pila-Nemutandani (2019), adolescents with positive emotional self-perception report lower levels of verbal, physical, and emotional aggression. Adolescents who are able to manage and utilize their own emotions well are less likely to engage in verbal aggression. According to Gower et al. (2014), social-emotional intelligence and stress management skills can protect adolescent girls (including those who are victims of violence) from committing aggression and physical violence. The results of research by Martinson, Esposito-Smythers, and Blalock (2016) showed that adolescents who lack the ability to effectively recognize, express, and manage negative emotions that arise in the context of the home environment are at greater risk of developing eating disorders. Thus, strengthening adolescents' social-emotional coping skills may help protect adolescents from eating disorders. Furthermore, there is a significant relationship between online social networking, mental health, and emotional intelligence. Excessive online social networking can reduce mental health and emotional intelligence (Tyagi & Meena, 2022).

Results showed that child-centered teaching attitudes in classrooms significantly contributed to children's social-emotional skills, resulting in low problem behaviors (Nakamichi et al., 2022). Research shows that a social-emotional learning curriculum has an effect on girls' social-emotional development, followed by increased self-esteem and responsible decision-making (Malhotra et al., 2021). Natural mentoring by natural mentors (adults who are caring and supportive of adolescents, such as relatives, neighbors, coaches, or community members) can improve adolescents' social-emotional development and have a positive impact on academics (Hurd & Sellers, 2013). Research results show that mindfulness attention training programs improve children's social-emotional development and well-being (Schonert-Reichl et al., 2015). The results showed that the COVID-19 pandemic had a major impact on the academic, social, and emotional well-being of Rohingya refugee children, impacting the emotional and mental health conditions of adolescents (Mahamud et al. (2022). The limitation of this research is that it only focuses on the results of previous research.

Conclusion and Recommendation

Conclusion

Based on the results of the literature review analysis, it is known that research designs related to social-emotional development are cross-sectional study design, longitudinal study design, and retrospective study design. Research respondents related to social-emotional development are adolescents, women aged 19-35 years, school-age children, mothers with preschool children, fathers with preschool children, and mothers and teachers with school-age children. Furthermore, the place of research related to social-emotional development is America, Indonesia, China, Korea, Africa, Kenya, Peru, Vietnam, India, Uganda, Chile, Australia, Japan, and Canada. The results of the literature review show that socio-emotional development is influenced by socioeconomic characteristics, parental psychological conditions, mother-child interactions, attachment and parenting, risky behavior (aggressiveness), online social networking, the COVID-19 pandemic, activities, and learning programs at school.

Recommendation

Based on the research findings, the suggestions that can be given are, first, the importance of improving the psychological well-being of mothers because mothers who experience psychological stress will interfere with the social-emotional development of their children and vice versa. Psychologically healthy mothers can help children's social emotional development. Second, it is important to maintain and increase positive interactions between mothers and adolescents because maternal warmth and affection can improve adolescent social-emotional development. Third, parents should have attachment and conduct positive parenting, including the father's parenting involvement; if parenting is positive, children's social development will be optimal. Fourth, it is important for adolescents to have the ability to recognize and manage emotions in order to avoid risky behavior. Fifth, government agencies or NGOs can provide training and seminars for parents to stimulate adolescent social-emotional development and positive parenting for adolescents. Finally, the importance of further research conducted both quantitatively and qualitatively to analyze the factors that influence social-emotional development.

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