

# Decades after a good-behavior program in grade school, adults report healthier, more successful lives

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What defines a "good life" in your 30s? The exact answer probably depends on the person, but most people could agree on some general themes: good physical and mental health, solid relationships, and a steady job or good education. Being financially responsible and involvement in your community or civic life also help make life better.

Now University of Washington researchers have found that that "good life" in adulthood can start in grade school, by teaching parents and teachers to build stronger bonds with their children, and to help children form greater attachments to family and school. In a study of more than 800 adults throughout their 30s—a group the researchers have followed since they were fifth-graders at Seattle elementary schools in 1985—the people who reported [better health](#) and [socioeconomic status](#) were, consistently, those whose parents and teachers had received lessons aimed at building stronger bonds with their children decades ago.

The researchers know of no other study of a program provided during [elementary school](#) that has followed participants for this long. Participants in the longitudinal study, known as the Seattle Social Development Project, have responded to surveys over the years about [health](#), lifestyle, even the parenting of their own kids. Such research requires participants who will stick with a study over a big stretch of their lives, and nearly 90% of them have done just that.

The latest study involved coming up with broad measures of health and functioning in adulthood, surveying participants on specific issues related to those measures, and comparing participants whose teachers and parents received the bonding interventions during elementary school with those who didn't.

"These early elementary-school interventions seek to make kids' current lives better both in and out of school," said Rick Kosterman, a principal investigator with the Social Development Research Group, part of the UW School of Social Work. "But can we actually get kids on a different life trajectory that lasts beyond elementary school? In fact, we found enduring effects, where they're having an overall better experience in adulthood."

The prevention curriculum, called Raising Healthy Children, was created by UW social work professors J. David Hawkins and Richard Catalano. The lessons, for use by parents and teachers, focused on enhancing children's opportunities for forming healthy bonds in grades 1 through 6 and providing them with social skills and reinforcements. Teachers and parents of children in some classrooms of the 18 participating Seattle elementary schools used the curriculum in the 1980s, while those in other classrooms did not have access to it.

Many of the concepts are teaching tools and parenting tips that are well-known today: reinforcing [positive behaviors](#); setting expectations for making responsible choices; and promoting positive social interaction at school through group projects and seating arrangements. Table groups in the classroom facilitate cooperation and learning from one another, for example, while at home, parents can "catch" their child being good and offer praise. With older children, parents can discuss issues such as smoking so that standards for healthy behavior are established before the teen years.

For the new follow-up study, published in late spring in *Prevention Science*, Kosterman devised a list of nine measurable aspects of life for people in their 30s: physical health; mental health; health maintenance behaviors (such as exercise and

sleep); low sex-risk behavior; low rates of substance abuse; friendships and relationships; socioeconomic status (income, education, homeownership); responsibility (employment, managing finances); and civic engagement. The team then used surveys and in-person physical evaluations to determine participants' health and successful functioning in adult life.

In a comprehensive test of effects that combined all nine indicators of a healthy and successful adult life, those from intervention classrooms when in elementary [school](#) reported significantly better outcomes than those from comparison classrooms through their 30s. Specific areas of significant improvement included fewer symptoms of [mental health](#) disorders, more engagement in health maintenance behaviors, and overall better health and socioeconomic success. On the remaining measures, the intervention group scored better on each one, though not as dramatically, compared with the control group.

It's hard to attribute results that manifest decades later directly to the curriculum, said Hawkins, a co-author on the new study. But the changed behaviors of their teachers and parents during the elementary grades likely had a snowball effect, leading to positive relationships and responsible decision-making in adulthood.

"We worked to build healthier relationships—we call it social bonding—between teachers and students, and parents and children. The larger question was, if we do all these things, will it turn into a prosocial, healthy lifestyle?" Hawkins said. "We didn't know we would see these results so much later in life."

In analyzing the data, researchers examined factors that tend to negatively affect health outcomes: whether a child grew up in poverty, was raised by a single parent, or born to a teenager. Participants who were born to a mother under age 20 were found to have a substantially lower quality of [life](#) on several of the measures, especially in the areas of socioeconomic status, physical health and substance abuse. The intervention effects the researchers found persisted even after controlling for these effects of being born to a teen mother.

"The most important thing we've learned is to provide opportunities for kids to have positive social involvement," Hawkins said. "Make sure your kids have the opportunity to engage with you as a parent. Play with them, hold them; don't just sit on your phone when you're with them."

"When kids feel bonded to you, they're less likely to violate your expectations. And you are likely to be setting them up to have better lives long into the future."

Kosterman and his team have applied for funding to conduct further research on the group, now in their mid-40s, in midlife. "More studies are needed that test childhood interventions and follow participants through the 30s and beyond," Kosterman added, "but we are encouraged that these findings suggest that lasting change for important outcomes is possible."

**More information:** Rick Kosterman et al, Effects of Social Development Intervention in Childhood on Adult Life at Ages 30 to 39, *Prevention Science* (2019). [DOI: 10.1007/s11121-019-01023-3](https://doi.org/10.1007/s11121-019-01023-3)

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