



EFFECTIVENESS OF A CULTURALLY ADAPTED SOCIAL AND EMOTIONAL LEARNING CURRICULUM ON EMOTIONAL AFFECT AND EMOTION REGULATION AMONG INDIAN PRIMARY SCHOOL CHILDREN: A QUASI-EXPERIMENTAL STUDY

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ABSTRACT

Social and emotional learning (SEL) is increasingly acknowledged as a fundamental aspect of comprehensive child education, although culturally sensitive assessments among young children in India are still scarce. Programs created in different contexts might not directly apply to Indian classrooms unless their language, illustrations, teaching methods, and relational beliefs are relevant to the local context.

This research analyzed the shifts in emotional affect and emotion regulation from pre-intervention to post-intervention after implementing a culturally tailored, 20-session SEL program (SEED) for Indian elementary school students.

An one-group quasi-experimental approach was applied involving 80 Grade 4 students aged 8–9 years from English-medium schools affiliated with CBSE. The program was conducted over a period of five weeks in small groups. Positive and negative affect were measured using a brief version of the Positive and Negative Affect Schedule, while cognitive reappraisal and expressive suppression were evaluated with a child-friendly Emotion Regulation Questionnaire. Paired-sample *t* tests analyzed scores from pre-tests and post-tests. Cohen's *d* was used to derive standardized within-person effect sizes.

Initial findings showed an increase in positive affect following the intervention (*M* change = 4.58, 95% CI [3.46, 5.70], *t*(79) = 8.12, *p* < .001, *d*z = 0.91) and a decrease in negative affect (*M* change = -4.06, 95% CI [-5.24, -2.88], *t*(79) = -6.87, *p* < .001, *d*z = -0.77). Cognitive reappraisal rose (*M* change = 4.64, 95% CI [3.36, 5.92], *t*(79) = 7.24, *p* < .001, *d*z = 0.81), while expressive suppression declined (*M* change = -3.72, 95% CI [-4.97, -2.47], *t*(79) = -5.93, *p* < .001, *d*z = -0.66).

Involvement in the SEED curriculum was linked to positive shifts in emotional experience and strategies for regulating emotions. Nonetheless, the lack of a control group, dependence on children's self-reports, inadequate records of measure adjustments and intervention consistency, along with the tentative nature of the source data, hinder conclusive causal inferences. A preregistered, cluster-randomized assessment utilizing validated measures in the local language

1. INTRODUCTION

Schools are progressively anticipated to aid not just academic achievement but also the emotional and relational skills that enable children to engage, endure, collaborate, and manage daily difficulties. Social and emotional learning (SEL) is the organized enhancement of skills related to identifying emotions, regulating thoughts and behaviors, appreciating others' viewpoints, maintaining supportive connections, and making thoughtful choices (Collaborative for Academic, Social, and Emotional Learning [CASEL], 2020). These abilities are central to education. They affect the way children interact with learning, react to feedback, handle conflicts, ask for assistance, and bounce back from setbacks. A school setting that purposefully fosters these competencies can consequently enhance learning, mental well-being, classroom atmosphere, and long-term adaptation at the same time.

A considerable body of research supports the implementation of universal school-based social and emotional learning (SEL) programs. Meta-analytic evidence indicates that programs delivered with a high degree of implementation quality can improve students' social-emotional competencies, attitudes, conduct, psychological well-being, and academic achievement (Durlak et al., 2011). Subsequent follow-up research suggests that several of these gains may remain evident after the formal intervention has concluded. However, the strength and persistence of such outcomes differ according to the type of outcome assessed, participants' age, the quality of program implementation, and the methodological design of the study (Taylor et al., 2017). Evidence from early-childhood and primary-school contexts similarly demonstrates that universal, curriculum-based interventions can promote social competence and reduce emotional and behavioral difficulties, particularly



when their content is developmentally suitable and delivered with sufficient fidelity (Blewitt et al., 2018). Collectively, these findings indicate that social-emotional abilities can be developed through systematic instruction. Nevertheless, they should not be interpreted as evidence that all SEL curricula are equally effective across different cultural, educational, and institutional environments.

Middle childhood represents an especially important developmental stage for SEL intervention. From approximately 6 to 12 years of age, children form increasingly complex and differentiated understandings of themselves, become more attentive to the judgments of their peers, and face greater demands for cooperation, behavioral control, and independent problem-solving (Eccles, 1999). At the same time, their interpretation of emotional experiences becomes more sophisticated as their cognitive and interpersonal capacities expand. Children gradually acquire the ability to recognize simultaneous or mixed emotions, differentiate between privately experienced feelings and externally displayed emotions, and employ a wider range of strategies for modifying the intensity and duration of emotional reactions. These developmental advances make the primary-school period particularly suitable for teaching children to recognize and name emotions, express their needs appropriately, consider alternative explanations for events, and manage interpersonal challenges in constructive ways.

Within this developmental framework, emotional affect and emotion regulation are two particularly significant outcome areas. Positive affect includes emotional states such as enthusiasm, attentiveness, interest, vitality, and alertness, whereas negative affect encompasses feelings such as anxiety, irritation, fear, distress, and emotional upset (Watson et al., 1988). Although these dimensions are associated with one another, they should not be understood as opposite poles of a single emotional scale. For instance, children may simultaneously experience elevated positive and negative affect during situations that are both stimulating and demanding. Consequently, intervention studies benefit from assessing both dimensions. Increased positive affect may reflect stronger engagement, emotional energy, and interest, while lower negative affect may indicate reduced distress or a greater capacity to cope with challenging experiences.

Emotion regulation refers to the mechanisms through which individuals modify the emotions they experience, the situations in which those emotions emerge, and the ways in which emotional responses are communicated or displayed (Gross, 1998; Thompson, 1994). Among the most frequently investigated regulation strategies are cognitive reappraisal and expressive suppression. Cognitive reappraisal involves modifying one's interpretation of an emotionally significant event before the emotional reaction becomes fully established. This strategy is commonly associated with more constructive emotional adjustment and healthier interpersonal functioning. By contrast, expressive suppression involves restricting or concealing the visible expression of an emotional response that has already been activated. Although suppression may be useful in certain short-term social, protective, or safety-related circumstances, repeated dependence on this strategy can limit genuine communication without necessarily reducing the underlying emotional experience (Gross & John, 2003). Interventions that teach children to reinterpret difficult

situations, identify emotional states accurately, and express feelings in safe and appropriate ways may therefore encourage more adaptive forms of regulation while decreasing automatic emotional concealment.

The importance of SEL also extends to the prevention of later mental-health difficulties. Competence in social and emotional functioning during childhood has been associated with subsequent educational achievement, behavioral adjustment, health, and general well-being, although these relationships are probabilistic and do not determine individual outcomes with certainty (Jones et al., 2015). By developing emotional awareness, self-management abilities, and interpersonal skills before difficulties become persistent, school-based SEL programs may enhance resilience and reduce the risk that ordinary developmental stressors progress into more serious psychological or functional problems. Universal implementation is particularly valuable because it enables children to receive support without first meeting diagnostic or clinical criteria. It also presents emotional learning as a routine component of education rather than as an intervention reserved only for children perceived as having individual deficits.

The cultural adaptation of SEL programs is a major factor influencing their comprehensibility, acceptability, and practical relevance. Although SEL competencies are frequently described as broadly applicable, emotional expression, interpretation, and regulation are strongly influenced by cultural values, social relationships, and community expectations. Cultural norms concerning respect for elders, responsibility toward family members, maintenance of social harmony, personal expression, classroom authority, and acceptable forms of disagreement may shape children's responses to SEL terminology and activities. In societies characterized by more collectivist orientations, emotional competence may involve preserving relationships and meeting social obligations in addition to developing personal awareness and independent expression (Kağıtçıbaşı, 2007). Therefore, a curriculum that treats direct emotional disclosure as universally appropriate may be inconsistent with local expectations unless it simultaneously promotes respectful, contextually appropriate, and relationally responsible communication.

Culturally responsive SEL does not involve rejecting common principles of child development. Instead, it requires careful consideration of how particular competencies are defined, whose perspectives and experiences are represented, which languages and examples are incorporated, and whether the method of delivery is suitable for the realities of local classrooms. Transformative perspectives on SEL further propose that emotional development occurs within wider social structures. From this standpoint, programs should address issues of identity, inclusion, belonging, fairness, and power rather than presenting emotional regulation exclusively as an individual responsibility (Jagers et al., 2019). These considerations are especially relevant in India because of the country's extensive cultural, linguistic, religious, regional, and socioeconomic diversity. As a result, a standardized national curriculum may be understood and experienced differently across communities, school systems, and languages of instruction.

India's National Education Policy 2020 gives considerable importance to holistic education, socio-emotional development, ethical judgment, communication skills, and



student well-being (Ministry of Education, Government of India, 2020). This policy framework provides institutional support for the expansion of SEL initiatives, while simultaneously highlighting several practical implementation challenges. Indian schools differ substantially in terms of class size, teacher training, academic workload, available resources, medium of instruction, and access to qualified mental-health professionals. Effective programs must therefore be practical enough to be incorporated into routine school schedules, structured sufficiently to promote reliable implementation, and adaptable enough to preserve cultural and contextual relevance. Despite growing policy interest, the empirical literature on SEL within Indian primary schools remains relatively underdeveloped, particularly with regard to interventions evaluated through standardized pre-test and post-test measures of affective experience and emotion-regulation strategies.

The SEED curriculum examined in the present investigation was developed as a structured and culturally responsive SEL intervention for Grade 4 students. According to the source dissertation, the program included activities aimed at strengthening self-awareness, interpersonal relationships, and emotion-regulation skills. Instructional methods included storytelling, role-playing, reflective drawing exercises, emotion-based charades, and facilitated group discussions. These participatory and reflective strategies are consistent with the sequenced, active, focused, and explicit principles commonly associated with effective SEL interventions. The program consisted of 20 sessions delivered over a five-week period, resulting in a comparatively intensive and concentrated intervention format.

The present evaluation examined two interconnected research questions. The first concerned whether children's emotional affect differed between the baseline assessment and the completion of the curriculum. The second investigated whether their reported use of cognitive reappraisal and expressive suppression changed during the same period. It was anticipated that participation in the program would be associated with higher levels of positive affect and cognitive reappraisal, together with lower levels of negative affect and expressive suppression. However, because the research employed a single-group pre-test and post-test design, the findings were intended primarily to assess changes within the participating group and to provide preliminary evidence. The design does not permit a definitive conclusion that the SEED curriculum was solely responsible for any changes observed.

2. METHODS

2.1 Study Design

A single-group quasi-experimental pre-test/post-test design was employed. Each participating child completed the designated outcome assessments before the commencement of the intervention, participated in the SEED curriculum, and completed the same assessments following the final intervention session. This design enables the measurement of changes occurring within individuals over time. However, it does not adequately exclude competing explanations such as natural maturation, historical events, repeated exposure to the assessment instruments, regression toward the mean,

participant expectations, or changes within the wider school environment. Accordingly, the investigation is presented as an initial evaluation of program effectiveness rather than as a controlled trial of intervention efficacy.

The manuscript was organized with reference to the reporting principles outlined in the Transparent Reporting of Evaluations with Nonrandomized Designs (TREND) statement (Des Jarlais et al., 2004). Nevertheless, several items recommended under TREND were unavailable in the original dissertation. These included the formal ethics approval number, exact dates of recruitment, the distribution of participants by sex, a detailed participant-level description of missing data, an a priori sample-size or power calculation, psychometric information relating to the adapted assessment tools, and a quantitative evaluation of intervention fidelity. Rather than estimating or fabricating these details, they are identified transparently as study limitations and as fields requiring completion by the authors.

2.2 Setting and Participants

The sample consisted of 80 Grade 4 students between 8 and 9 years of age. All participants attended English-medium schools affiliated with the Central Board of Secondary Education. The participating schools were situated in the vicinity of the researcher's academic institution in Guna, Madhya Pradesh, India. Although the dissertation indicates that children were recruited from two schools, the institutional names have been excluded from the manuscript to protect school confidentiality unless formal authorization for disclosure is obtained.

Participants were selected through purposive sampling because recruitment was determined by access to the schools, administrative approval, parental consent, and the practical feasibility of implementing the curriculum. To be eligible, children were required to be 8–9 years old, enrolled in Grade 4, attending school regularly, and supported by parental consent. Exclusion criteria included a diagnosed developmental condition or a special educational requirement demanding specialist intervention beyond the intended scope of the SEED curriculum. Children who were absent from more than two of the 20 intervention sessions were also excluded.

The source dissertation reports that both boys and girls participated in the study, but it does not specify the numerical distribution according to sex or gender. Information concerning socioeconomic circumstances, primary language spoken at home, caste or community background, and parents' educational attainment was also unavailable.

The dissertation did not report an a priori statistical power or sample-size calculation. A sample of 80 paired observations, assessed using a two-tailed alpha level of .05, would generally provide reasonable sensitivity for detecting moderate standardized changes within participants. Nevertheless, adequate statistical power cannot compensate for the methodological limitations of a design that does not control for time-related or external influences. The standardized effects presented in the subsequent analysis should therefore be interpreted as preliminary descriptive estimates that require confirmation through replication and more rigorous controlled research designs.



Table 1: Study characteristics and reporting status

Characteristic	Reported information	Submission status
Design	Single-group pre-test/post-test quasi-experiment	Complete
Sample	80 Grade 4 children, aged 8–9 years	Complete
Setting	English-medium CBSE-affiliated schools near Guna, Madhya Pradesh	Partially complete; confirm school number and dates
Recruitment	Purposive sampling with school permission and parental consent	Complete at summary level
Sex/gender distribution	Boys and girls participated	Insert counts and percentages
Ethics approval	Institutional approval stated	Insert committee name, approval number, and date
Intervention	20 sessions over five weeks; four sessions weekly	Complete at summary level
Fidelity	Researcher delivered all sessions	Insert attendance, adherence, and competence data
Missing data/attrition	Not reported separately	Verify participant flow and analytic sample
Data status	Chapter 4 labels results hypothetical	Mandatory verification before submission

Note: CBSE = Central Board of Secondary Education. Items marked for completion should be resolved from the study records before peer review.

2.3 Ethical Considerations

According to the source dissertation, institutional ethical clearance was secured before the commencement of data collection, and all procedures were designed to protect the rights, safety, and well-being of the participating children. Written informed consent was obtained from parents or legally authorized guardians, while the children provided verbal assent using language appropriate to their age and level of understanding. Participation was entirely voluntary, and children were permitted to discontinue their involvement at any stage without penalty or disadvantage. Before analysis, participant records were anonymized to protect confidentiality.

The final manuscript should report the complete name of the approving institutional ethics committee, the ethical approval reference number, the date on which approval was granted, and any relevant trial, study protocol, or registration details. These elements are necessary to ensure transparent reporting and independent verification of ethical oversight.

Because the participants were young children, the assessment process incorporated simplified verbal explanations and direct assistance from the researcher when required. Although such support may improve children's understanding of questionnaire items and study procedures, it may also increase the likelihood of expectancy effects or socially desirable responses. The final report should therefore clarify whether classroom teachers were present during data collection, whether the individual administering the assessments was also responsible for delivering the intervention, and what measures were taken to ensure privacy during questionnaire completion. It should also specify whether procedures for managing emotional distress, discomfort, or other adverse events were established before the study began.

2.4 Intervention: The SEED Curriculum

The SEED curriculum constituted the principal intervention evaluated in this study. It was presented as a culturally adapted social and emotional learning program

designed to strengthen self-awareness, interpersonal competence, emotional understanding, and emotion-regulation abilities among Indian primary-school children. The program comprised 20 sessions delivered across a five-week period, with four sessions conducted each week. Children participated in groups of approximately 10–15, a format intended to encourage interaction and active participation while remaining practical within the school setting.

All intervention sessions were facilitated by the principal researcher, who had received training in SEL implementation and had become familiar with the curriculum manual before delivery. The activities described in the dissertation included storytelling, role-play exercises, drawing-based reflection, emotion-focused charades, and structured group discussions. These methods integrated experiential learning, personal reflection, and peer engagement. Such strategies are consistent with the principle that social-emotional competencies are more effectively developed when children practise specific skills, receive feedback, and relate abstract emotional concepts to familiar, real-life situations.

Although the dissertation describes the SEED curriculum as culturally responsive, it does not provide a systematic account of the adaptation process. No formal adaptation framework, detailed session-by-session curriculum outline, or evidence of consultation with children, parents, teachers, or cultural specialists was reported. The final manuscript should therefore explain which elements of the original curriculum were modified, identify the source program from which the adaptations were derived, and specify the languages used during implementation. It should also describe how examples, stories, activities, and terminology were localized, whether cultural acceptability was assessed through pilot testing, and which intervention components were regarded as essential or open to modification. In the absence of such information, the cultural adaptation process cannot be independently replicated or adequately appraised.



Intervention fidelity was promoted procedurally through the use of a single trained facilitator and a structured curriculum manual. However, the dissertation did not report a quantitative adherence checklist, independent observer assessments, facilitator competence ratings, measures of participant engagement, or evaluations of the extent to which children received and understood the intended intervention content.

Attendance information beyond the stated exclusion criterion should also be presented. This should include the mean number of sessions attended, the observed attendance range, and the number or proportion of children who completed all 20 sessions. Such information is important because differences in intervention exposure may affect the magnitude and interpretation of the observed outcomes.

Table 2: Documented components of the SEED intervention

Component	Documented specification	Intended function	Information still required
Dose	20 sessions over five weeks; four sessions weekly	Repeated practice and consolidation	Session duration and total contact hours
Group format	Approximately 10–15 children	Peer learning, discussion, and manageable facilitation	Exact group allocation and consistency
Facilitator	Primary researcher trained in SEL delivery	Standardized delivery across groups	Training duration, supervision, and competence checks
Methods	Storytelling, role play, drawing reflection, emotional charades, guided discussion	Emotion recognition, perspective-taking, expression, reappraisal, and relationship practice	Session-level content and learning objectives
Cultural adaptation	Described as tailored to the Indian context	Increase relevance, comprehension, and acceptability	Adaptation framework, stakeholders, language, and pilot testing
Fidelity	Structured manual and single facilitator	Reduce delivery variation	Adherence checklist, attendance, observer ratings, and dose received

2.5 Outcome Measures

2.5.1 Positive and Negative Affect

Positive and negative affect were measured using a 10-item abbreviated version of the Positive and Negative Affect Schedule. The PANAS group of instruments was originally developed to assess two broad and relatively distinct dimensions of affective experience (Watson et al., 1988). Child-oriented adaptations have subsequently shown that positive and negative affect can also be assessed meaningfully among younger populations (Laurent et al., 1999). According to the source dissertation, the wording of the items was simplified to improve comprehension among children aged 8–9 years.

Before submission, the final manuscript should clearly identify the precise version of the instrument used. It should also report the response format, possible score range, reference period specified in the instructions, language of administration, procedures used to adapt or simplify the items, and internal-consistency estimates for both the pre-test and post-test assessments. These details are necessary because the term PANAS-SF is applied to several different abbreviated forms. Furthermore, a measure derived from an adult instrument cannot be assumed to demonstrate equivalent validity and reliability among young Indian children without evidence regarding item comprehension and measurement performance.

2.5.2 Emotion Regulation

Emotion-regulation strategies were assessed using a version of the Emotion Regulation Questionnaire adapted for children. The original ERQ differentiates between cognitive reappraisal and expressive suppression as two distinct

regulatory strategies (Gross & John, 2003). The Emotion Regulation Questionnaire for Children and Adolescents contains developmentally simplified items and has provided evidence supporting a two-factor structure in younger samples (Gullone & Taffe, 2012). Higher scores on the cognitive reappraisal subscale represent more frequent efforts to reinterpret situations in ways that alter their emotional impact. In contrast, higher expressive suppression scores indicate a greater tendency to inhibit the external display of emotional responses.

The source dissertation does not specify how many questionnaire items were retained, the response categories provided to participants, the processes used for adaptation or translation, the possible score range for each subscale, the procedures applied to missing item responses, or the reliability coefficients obtained in the present sample. These details should be incorporated into the final manuscript. Given the age of the participants, the use of cognitive interviews or pilot testing focused on item comprehension would also strengthen confidence that the recorded responses reflect the intended emotion-regulation constructs rather than differences in reading ability, response acquiescence, or misunderstanding of questionnaire content.

2.6 Procedure

The investigation was conducted in three principal stages. During the preparatory phase, permission was obtained from the participating schools, written consent was secured from parents or legal guardians, and verbal assent was obtained from the children. Baseline assessments using the PANAS and



ERQ measures were subsequently administered in classroom settings, with simplified verbal guidance provided to support participant understanding.

During the intervention stage, the children completed 20 SEED curriculum sessions in small groups over a period of five weeks. Following completion of the final session, the same affect and emotion-regulation instruments were administered again to the participating children. All study records were anonymized before being stored and prepared for statistical analysis.

The available documentation does not specify the precise period between the final intervention session and the post-test assessment. It also does not indicate whether the

baseline and follow-up measures were administered at comparable times of day, whether outcome assessors were blinded to the study aims or assessment stage, or whether participants had access to their earlier responses. These procedural factors are potentially important because children's affective reports may be influenced by recent classroom experiences, daily events, or the conditions under which the measures are administered. In addition, the apparent involvement of the intervention facilitator in the assessment process may have introduced expectancy or response-bias effects. The final manuscript should therefore report these procedures explicitly so that the findings can be interpreted with appropriate caution.

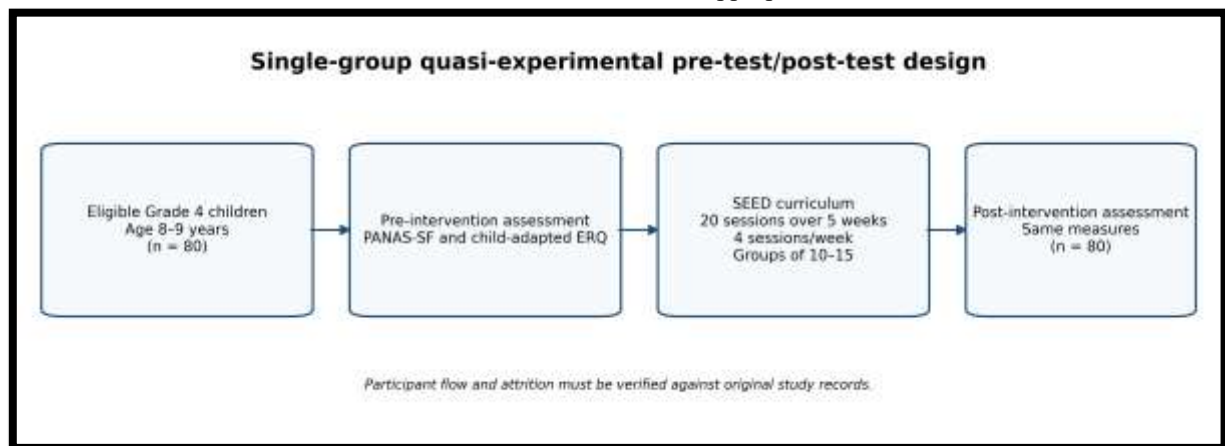


Figure 1: Study design and participant flow as documented in the source dissertation. Attrition and missing-data counts require verification from study records

2.7 Statistical Analysis

The source dissertation indicates that all statistical analyses were performed using SPSS. Descriptive statistics, including means and standard deviations, were calculated for each outcome at both the pre-test and post-test stages. Paired-samples *t* tests were then used to determine whether the average within-participant change differed significantly from zero. Statistical significance was evaluated using a two-tailed alpha level of .05. Exact probability values were unavailable because each of the four reported findings was presented only as $p < .001$.

For the present manuscript, change scores were calculated by subtracting the pre-test mean from the post-test mean. The standard error associated with each mean difference was reconstructed from the reported mean change and corresponding paired-samples *t* statistic. Ninety-five percent confidence intervals were estimated using the critical *t* value for 79 degrees of freedom. Cohen's $d_{\text{sub}z}$, an effect-size measure appropriate for paired observations, was calculated by dividing the *t* statistic by the square root of the paired sample size.

Under this coding procedure, positive values represent increases from baseline to post-intervention assessment, whereas negative values indicate decreases. Increases in positive affect and cognitive reappraisal were regarded as favorable outcomes. Conversely, decreases in negative affect and expressive suppression were interpreted as favorable changes.

The dissertation did not report any correction for multiple statistical comparisons. Because the four outcomes

represent related but theoretically distinct constructs and the study was exploratory in nature, the manuscript presents unadjusted significance tests alongside effect sizes and confidence intervals. However, statistically significant findings should not be interpreted as evidence that the intervention directly caused the observed changes.

A complete final analysis should also include an assessment of the distribution of change scores, checks for influential or extreme observations, a clear account of missing-data procedures, and estimates of internal consistency for each measure. Where the assumptions underlying the paired-samples *t* test are substantially violated, a sensitivity analysis using an appropriate nonparametric paired-sample test should also be reported.

3. RESULTS

3.1 Participant Flow and Baseline Description

The analytic sample was reported to include 80 Grade 4 children aged between 8 and 9 years. The dissertation states that both boys and girls were represented and that participants who missed more than two intervention sessions were excluded from the analysis. However, it does not report the number of children initially invited to participate, the number of parents or guardians who declined consent, the number of enrolled participants who withdrew, or whether all 80 children completed both assessments.

The findings presented below therefore assume that complete paired data were available for all 80 participants. This assumption is consistent with the reported test statistic degrees of freedom, $t(79)$, which imply 80 paired observations.



Apart from age, grade level, school type, and the inclusion of both boys and girls, no further demographic information was provided. As a result, it was not possible to examine whether baseline scores varied according to sex, participating school, socioeconomic background, or other relevant participant characteristics. The absence of this information also limits assessment of whether the sample adequately represents the wider cultural, linguistic, and socioeconomic diversity of Indian primary-school children.

3.2 Descriptive Outcomes

The provisional descriptive findings indicated that all four outcomes changed in the expected direction. Mean positive affect increased from 24.63 (SD = 3.87) at pre-test to 29.21 (SD

= 4.14) at post-test. In contrast, mean negative affect declined from 18.38 (SD = 4.02) to 14.32 (SD = 3.47).

A similar pattern was observed for emotion-regulation strategies. Mean cognitive reappraisal increased from 20.46 (SD = 4.33) before the intervention to 25.10 (SD = 3.98) following the intervention. Mean expressive suppression decreased from 22.31 (SD = 3.71) to 18.59 (SD = 3.92).

Although the direction of these changes was consistent with the study hypotheses, the possible score ranges and reliability estimates for the measures in the present sample were not reported. Consequently, the observed means should not be compared with clinical cut-off values, normative standards, or established severity categories.

Table 3: Pre-test and post-test descriptive statistics for provisional outcomes

Outcome	Instrument/domain	Pre-test M (SD)	Post-test M (SD)	Direction of favorable change
Positive affect	PANAS short form	24.63 (3.87)	29.21 (4.14)	Increase
Negative affect	PANAS short form	18.38 (4.02)	14.32 (3.47)	Decrease
Cognitive reappraisal	Child-adapted ERQ	20.46 (4.33)	25.10 (3.98)	Increase
Expressive suppression	Child-adapted ERQ	22.31 (3.71)	18.59 (3.92)	Decrease

Note: M = mean; SD = standard deviation; PANAS = Positive and Negative Affect Schedule; ERQ = Emotion Regulation Questionnaire. Values are provisional and require verification against original analysis output.

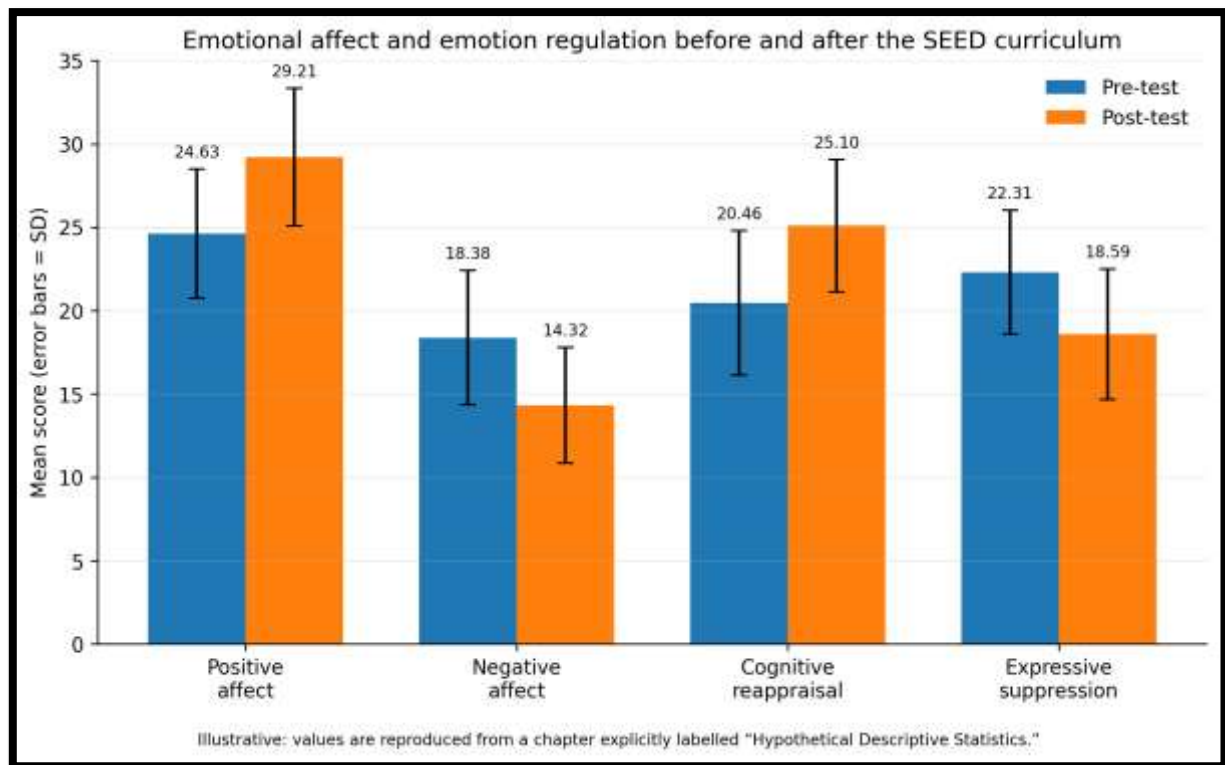


Figure 2: Provisional pre-test and post-test means with standard-deviation error bars. The four scales should not be compared as if they share identical score ranges.

3.3 Within-Person Change

Positive affect showed a mean increase of 4.58 points from pre-test to post-test, with a 95% confidence interval ranging from 3.46 to 5.70, $t(79) = 8.12$, $p < .001$. The corresponding standardized within-participant effect was large, Cohen's $d_{z} = 0.91$.

Negative affect declined by an average of 4.06 points, 95% CI $[-5.24, -2.88]$, $t(79) = -6.87$, $p < .001$. This represented a moderate-to-large standardized within-participant change, $d_{z} = -0.77$.

Cognitive reappraisal increased by 4.64 points between the two assessment occasions, 95% CI $[3.36, 5.92]$, $t(79) =$



7.24, $p < .001$. The standardized effect was large, $d_{\text{sub}z} = 0.81$.

Expressive suppression decreased by an average of 3.72 points, 95% CI [-4.97, -2.47], $t(79) = -5.93$, $p < .001$. The associated standardized change was moderate in magnitude, $d_{\text{sub}z} = -0.66$. The confidence intervals for all four outcomes excluded zero, indicating statistically reliable differences between the pre-test and post-test assessments.

Taken together, these findings demonstrate a consistent pattern of change across both affective experiences and emotion-regulation strategies. Positive affect and cognitive

reappraisal increased, whereas negative affect and expressive suppression decreased. Nevertheless, the magnitude of effects obtained from an uncontrolled pre-test/post-test design may reflect not only the influence of the intervention but also maturation, repeated testing, contemporaneous contextual events, participant expectations, and measurement-related factors. The reported effect sizes should therefore be interpreted as estimates of change within the study group rather than as unbiased estimates of the causal impact of the SEED curriculum.

Table 4: Paired-sample tests, confidence intervals, and standardized within-person changes

Outcome	Mean change	95% CI	t	df	p	Cohen's dz
Positive affect	4.58	[3.46, 5.70]	8.12	79	< .001	0.91
Negative affect	-4.06	[-5.24, -2.88]	-6.87	79	< .001	-0.77
Cognitive reappraisal	4.64	[3.36, 5.92]	7.24	79	< .001	0.81
Expressive suppression	-3.72	[-4.97, -2.47]	-5.93	79	< .001	-0.66

Note. Mean change = post-test minus pre-test. Confidence intervals and Cohen's dz were reconstructed from the means, t statistics, and $n = 80$ reported in the dissertation; they were not independently generated from participant-level data.

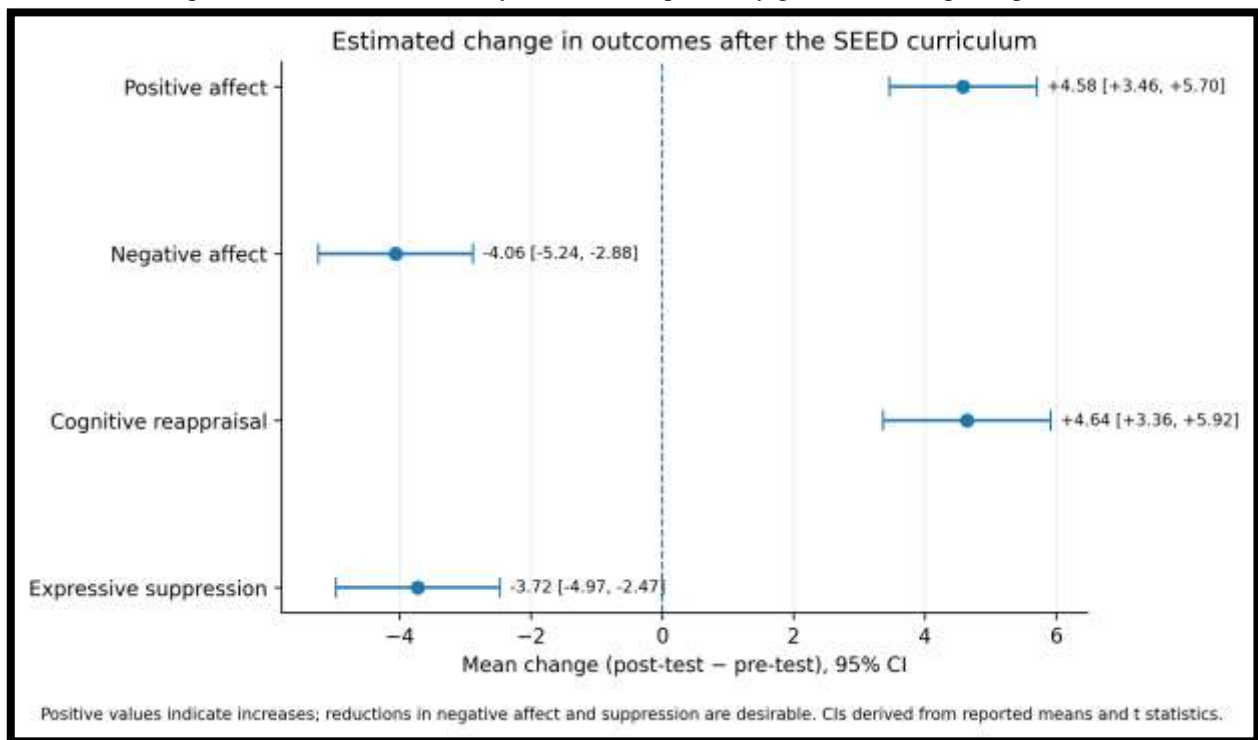


Figure 3. Provisional mean change (post-test minus pre-test) with reconstructed 95% confidence intervals. Positive values denote increases; negative values denote decreases.

3.4 Summary of Findings

The provisional findings demonstrated a consistent pattern that corresponded with the study hypotheses. Following completion of the SEED curriculum, participants reported higher levels of positive affect, lower levels of negative affect, greater use of cognitive reappraisal, and reduced reliance on expressive suppression. The standardized changes from pre-test to post-test ranged from moderate to large in magnitude. Although these findings provide a rationale for further investigation of the curriculum, they do not independently

demonstrate effectiveness relative to ordinary developmental change, routine schooling, expectancy effects, or participation in an alternative intervention.

4. DISCUSSION

4.1 Principal Findings

The present study investigated changes in affective experience and emotion-regulation strategies following participation in a culturally adapted social and emotional learning curriculum delivered to Indian Grade 4 children. The



program comprised 20 sessions conducted over five weeks. Across all four provisional outcomes, the direction of change was consistent with the stated hypotheses. Positive affect and cognitive reappraisal increased, whereas negative affect and expressive suppression declined. Standardized effect sizes reconstructed from the reported paired-samples *t* statistics ranged from moderate to large.

Considered collectively, these findings suggest that participation in the curriculum was followed by a more favorable pattern of self-reported emotional functioning. They also indicate a possible shift toward greater use of cognitive reappraisal, which is commonly regarded as a comparatively adaptive emotion-regulation strategy.

The results are generally consistent with the broader evidence concerning school-based SEL. Universal programs implemented in educational settings have been associated with improvements in social-emotional competencies and reductions in emotional distress, particularly when they are systematically organized, actively delivered, and implemented with sufficient quality (Durlak et al., 2011). Evidence from longer-term follow-up studies further indicates that some benefits may continue after program completion, although their persistence varies according to the intervention, outcome, and implementation context (Taylor et al., 2017).

The present study tentatively extends this pattern to an Indian primary-school setting. Nevertheless, its contribution should be regarded as preliminary because no comparison group was included and several important methodological and reporting details remain incomplete.

4.2 Changes in Positive and Negative Affect

The observed increase in positive affect may indicate improvements in emotional engagement, optimism, perceived competence, or enjoyment associated with participation in the intervention. Activities such as storytelling, role play, reflective drawing, and group discussion may provide children with opportunities to recognize personal strengths, receive affirmation from peers, and experience successful participation in structured tasks.

Positive affect may also facilitate exploration, cognitive flexibility, and constructive problem-solving, thereby supporting continued engagement with newly introduced emotional-regulation skills. However, the measures used in the study assessed self-reported affect at only two time points. They therefore do not identify the specific psychological or instructional mechanisms responsible for the observed changes.

The decline in negative affect is also compatible with the possibility that children acquired additional language and strategies for managing emotional distress. Learning to recognize emotional signals, view feelings as understandable experiences, seek assistance, and generate alternative interpretations may reduce the intensity or duration of distress in everyday school situations.

Nevertheless, negative affect can be influenced by temporary circumstances, including recent classroom experiences, tiredness, time of day, interpersonal conflict, and perceptions regarding expected responses. In the absence of an active comparison group and repeated outcome assessments, it is not possible to determine the extent to which the reduction resulted from the curriculum rather than short-term contextual variation.

Scores for positive and negative affect should not be interpreted as indicators of clinical diagnosis. A reduction in negative affect does not establish that a child is free from anxiety, depression, trauma-related difficulties, or behavioral concerns. Similarly, an increase in positive affect does not necessarily indicate stable or enduring psychological well-being.

Future evaluations should combine affect measures with validated indicators of psychological symptoms, daily functioning, and school adjustment. At the same time, researchers should avoid interpreting normal variations in children's emotional experiences through an unnecessarily medicalized framework.

4.3 Changes in Cognitive Reappraisal and Expressive Suppression

Cognitive reappraisal demonstrated one of the largest standardized pre-test/post-test changes. This strategy is conceptually compatible with many SEL activities because children are encouraged to pause before responding, consider alternative viewpoints, and reinterpret difficult situations in less emotionally disruptive ways.

Role-playing activities and facilitated group discussions may be particularly beneficial for developing reappraisal. These methods allow interpersonal problems to be represented externally, enable children to compare different perspectives, and make a range of possible responses visible. Developmental improvements in cognitive flexibility and perspective-taking during middle childhood may also increase children's ability to use reappraisal intentionally.

Expressive suppression declined following completion of the curriculum. This change may indicate that participants became more willing to identify, label, and communicate their emotions rather than automatically concealing them. Within a supportive classroom environment, guided practice can demonstrate that feelings may be expressed in ways that are both safe and respectful.

However, expressive suppression should not be regarded as universally maladaptive. Children may regulate outward emotional expression to maintain privacy, prevent escalation, demonstrate respect, or respond appropriately to situational expectations. A culturally responsive interpretation should therefore differentiate between rigid or habitual suppression and flexible regulation of emotional expression. The objective of SEL should not be unrestricted emotional disclosure, but the development of a wider and more contextually appropriate range of emotional responses.

The simultaneous increase in cognitive reappraisal and reduction in expressive suppression is theoretically consistent. Nonetheless, caution is required when interpreting self-report data obtained from children aged 8–9 years. Participants may have learned which emotional language and responses were emphasized during the curriculum and subsequently selected questionnaire answers that appeared socially desirable.

Future investigations should incorporate direct behavioral measures, reports collected in everyday contexts, teacher assessments, and parent observations. Such methods would help determine whether changes in questionnaire responses correspond with children's actual regulation of emotion in daily situations.



4.4 Cultural Adaptation and Contextual Relevance

The study's attention to cultural adaptation is important because SEL is communicated through language, narratives, relationships, and expectations concerning socially appropriate behavior. Indian classrooms are culturally diverse rather than uniform. Nevertheless, many children may experience strong social expectations relating to family responsibility, respect for elders, educational achievement, and preservation of group harmony.

Intervention activities that recognize interpersonal obligations and relational responsibilities may therefore be more meaningful than materials based exclusively on personal preference, individual autonomy, or direct assertive expression. Similarly, examples derived from familiar family and school experiences may reduce cognitive demands and help children connect abstract emotional concepts with everyday life.

The term culturally adapted, however, should not be used as a broad indicator of intervention quality without supporting documentation. A rigorous adaptation process requires transparent reporting of the original program, the objectives of adaptation, stakeholder participation, language choices, retained core components, modified activities, and evidence regarding acceptability.

The source dissertation does not provide this degree of detail. Future research should apply a recognized cultural-adaptation framework, involve children and teachers in collaborative design, document all modifications prospectively, and assess whether adapted materials produce better comprehension, engagement, or outcomes than direct translation.

Cultural responsiveness must also recognize the substantial diversity that exists within India. English-medium schools affiliated with the Central Board of Secondary Education represent only one component of the national education system. Children attending government schools, rural institutions, tribal-community schools, vernacular-medium schools, and schools serving different religious or socioeconomic populations may experience different stressors, patterns of communication, and barriers to implementation.

Future replication should therefore include variation in geographic location, school sector, language of instruction, and community background. The present sample should not be treated as representative of all Indian primary-school children.

4.5 Educational Implications

The preliminary findings provide support for the continued development and evaluation of structured SEL programs within primary education. The SEED curriculum's use of small-group, activity-oriented teaching may be particularly suitable for younger children, who often benefit from concrete demonstrations, guided participation, and repeated opportunities to practise new skills.

Schools seeking to introduce SEL should allocate sufficient time for continued rehearsal, incorporate emotional terminology across different academic subjects, and provide teachers with structured scripts, relevant examples, and instructional coaching. Isolated awareness sessions are unlikely to create the same learning conditions as a sequenced and sustained curriculum.

Teacher preparation will probably be a central factor in determining whether the intervention can be implemented at

scale. In the present study, the program was delivered by a researcher who had received training and was familiar with the curriculum. This arrangement may differ substantially from implementation under ordinary classroom conditions.

Teachers require more than a written manual. They may also need support in facilitating emotionally sensitive conversations, responding appropriately to children's distress, avoiding judgmental or moralizing responses, and modifying activities without altering essential intervention principles. Implementation studies should therefore assess feasibility, acceptability, workload, adherence, teacher competence, and teacher well-being alongside student outcomes.

SEL should also form part of a broader whole-school framework rather than transferring complete responsibility for coping and adjustment to individual children. Emotional skills alone cannot overcome unsafe school environments, bullying, discriminatory practices, excessive academic demands, or inadequate mental-health services.

Curriculum-based SEL is most justifiable when accompanied by a supportive school climate, clear safeguarding systems, family participation, inclusive disciplinary practices, and access to specialist services for children who require more intensive support.

4.6 Clinical and Preventive Mental-Health Implications

For school psychologists and counselors, universal SEL may serve as the foundational level of a multi-tiered prevention system. It may strengthen children's emotional vocabulary, normalize appropriate help-seeking, and establish shared classroom practices that facilitate the delivery of more targeted interventions.

Children who require additional assistance can subsequently be identified through persistent distress, functional impairment, concerns expressed by teachers or family members, and the use of validated screening instruments. Identification should not be based solely on ordinary short-term emotional fluctuations.

The current results should not be presented as evidence that the intervention is an effective treatment for mental disorders. The curriculum was educational rather than clinical, the participants were not identified as a clinical population, and the assessed outcomes represented broad dimensions of affect and emotion regulation.

The clinical relevance of the findings is therefore limited to prevention, early support, and collaboration between educational and mental-health professionals. Future studies could investigate whether universal SEL improves the appropriateness of referrals, reduces stigma associated with emotional support, or strengthens children's responses to indicated or targeted interventions.

4.7 Strengths

The study possesses several notable strengths. It examines an age group and educational context that remain comparatively underrepresented in the SEL literature. It also evaluates a structured program consisting of multiple sessions rather than a brief or isolated workshop.

The assessment included both emotional experience and specific emotion-regulation strategies. In addition, the same children completed assessments before and after the intervention, allowing changes within individual participants to



be estimated. The curriculum employed active and developmentally appropriate learning methods and was delivered consistently by a single facilitator.

The revised manuscript further strengthens interpretability by presenting confidence intervals and standardized within-participant effect sizes rather than relying exclusively on probability values. It also distinguishes clearly between observed pre-test/post-test change and evidence of causal effectiveness.

Furthermore, the manuscript explicitly identifies missing information and reporting limitations that must be addressed before submission. Such transparency is necessary because polished academic presentation cannot compensate for unverified numerical results, incomplete procedures, or unavailable methodological details.

4.8 Limitations

1. The absence of a control or comparison group constitutes the most significant methodological limitation. Changes may have resulted partly from maturation, school-related events, repeated exposure to the measures, participant expectations, facilitator attention, or regression toward the mean. A controlled research design is required to estimate what might have occurred in the absence of the curriculum.
2. The source dissertation explicitly describes the reported descriptive statistics as hypothetical. Neither the participant-level dataset nor the original SPSS output was available during manuscript preparation. All numerical values must therefore be checked against the original records, and any inconsistencies must be corrected before journal submission or public dissemination.
3. All outcomes were based on children's self-reports. Young participants may experience difficulty understanding abstract questions, sustaining attention, or distinguishing their usual behavior from responses they believe are preferred. The possible involvement of the same researcher in both intervention delivery and assessment may also have increased demand characteristics and socially desirable responding.
4. The adaptation of the measurement instruments was inadequately documented. Information was unavailable regarding the exact PANAS short form, the ERQ items retained, response options, language of administration, comprehension testing, possible score ranges, and reliability estimates. Developmental mismatch or measurement error may therefore have influenced both the observed means and the calculated change scores.
5. The participants were selected purposively from English-medium CBSE-affiliated schools within a single geographic area. Demographic information was limited, and the findings cannot be generalized confidently to the cultural, linguistic, socioeconomic, and institutional diversity of Indian primary education.
6. Neither attendance nor intervention fidelity was quantitatively assessed. The use of a structured manual and a single facilitator may have improved procedural consistency, but it does not demonstrate that every curriculum component was delivered as intended or experienced similarly across participating groups.

7. The evaluation included only an immediate post-intervention assessment. The persistence of the observed changes is therefore unknown. Initial enthusiasm may decline after the structured sessions conclude, while some competencies may require additional time and continued practice before measurable changes emerge.
8. Four related outcomes were assessed without a clearly documented approach to multiple comparisons. The distributional assumptions underlying the paired-samples *t* tests were also not reported. Although all reported probability values were small, robust statistical methods or nonparametric sensitivity analyses would provide a stronger assessment of the findings.

4.9 Directions for Future Research

The next stage of evaluation should employ a preregistered cluster-randomized controlled design. Schools or classrooms could be allocated to the SEED curriculum, an active comparison intervention, or usual educational practice. Cluster-level randomization would reduce the risk of intervention contamination between children while allowing curriculum-specific changes to be estimated.

Future studies should prospectively document baseline comparability, randomization procedures, allocation concealment where applicable, assessor blinding, participant attrition, and deviations from the registered protocol.

Assessment should include multiple sources of evidence. Child self-reports should be supplemented with teacher and parent ratings, systematic classroom observation, and, where feasible, short behavioral tasks. Measurement instruments should undergo formal cultural and linguistic adaptation involving forward translation, specialist review, cognitive interviews, pilot testing, and psychometric evaluation.

Researchers should also examine whether the instruments operate equivalently across language groups, sexes, school sectors, and geographic regions before interpreting subgroup differences.

Implementation-related outcomes should receive attention equal to that given to effectiveness outcomes. Future reports should document session length, participant attendance, facilitator preparation, adherence to the manual, child engagement, cultural acceptability, adverse events, and program cost.

Mediation analyses could investigate whether improvements in emotional knowledge or cognitive reappraisal account for changes in affective outcomes. Moderation analyses could examine whether intervention effects differ according to initial distress, school climate, sex, or socioeconomic circumstances. Such analyses require adequate statistical power and should be defined before data collection.

Follow-up assessments at three, six, and twelve months would help determine whether the observed changes are maintained and whether additional or booster sessions are necessary. Broader outcomes, including academic engagement, school attendance, peer relationships, disciplinary incidents, help-seeking behavior, and mental-health symptoms, could provide a more comprehensive understanding of the intervention's educational and preventive relevance.

Qualitative interviews with children, teachers, and parents would also be valuable. These accounts could clarify



which activities are viewed as useful, uncomfortable, culturally meaningful, or difficult to implement under ordinary school conditions.

5. CONCLUSION

This preliminary single-group evaluation identified favorable changes between pre-test and post-test in positive affect, negative affect, cognitive reappraisal, and expressive suppression after Indian Grade 4 children completed a culturally adapted 20-session SEL curriculum. The overall pattern was theoretically consistent and broadly compatible with evidence indicating that structured and active SEL interventions may support children's emotional development.

Nevertheless, the results should be interpreted as an initial indication rather than definitive evidence of program effectiveness. The absence of a comparison group, incomplete documentation of cultural adaptation and measurement procedures, limited demographic information, exclusive reliance on self-report, lack of fidelity data, and provisional status of the numerical results substantially restrict the conclusions that can be drawn.

Verification of the original dataset and statistical output is essential before publication. Subject to such verification, the study may provide a useful basis for a culturally transparent, adequately powered, and controlled evaluation of the SEED curriculum across diverse Indian educational settings.

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