Chapter 8: Psychosocial Development during the First Three Years

Prepared by
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From Papalia, Olds, and Feldman
Foundations of Psychosocial Development

• Emotions
• Temperament
Emotions

First Signs of Emotion

• Crying: communication of needs
  – Hunger (rhythmic)
  – Angry (forced air)
  – Pain (sudden, holding breath)
  – Frustration (2 – 3 drawn out cries)

• Don’t let baby cry long time

• Developmental approach: PREVENT distress
Emotions

• Smiling
  – Reflexive smile right after birth
  – Social smile 3\textsuperscript{rd} week
    • More frequent by 1 month

• Laughter
  – 4\textsuperscript{th} month
    • Exogenous
      – Someone tickles, laughter comes from the “outside”
    • Endogamous
      – Internal
<table>
<thead>
<tr>
<th>Approximate Age, Months</th>
<th>Characteristics</th>
</tr>
</thead>
<tbody>
<tr>
<td>0–3</td>
<td>Infants are open to stimulation. They begin to show interest and curiosity, and they smile readily at people.</td>
</tr>
<tr>
<td>3–6</td>
<td>Infants can anticipate what is about to happen and experience disappointment when it does not. They show this by becoming angry or acting warily. They smile, coo, and laugh often. This is a time of social awakening and early reciprocal exchanges between the baby and the caregiver.</td>
</tr>
<tr>
<td>6–9</td>
<td>Infants play “social games” and try to get responses from people. They “talk” to, touch, and cajole other babies to get them to respond. They express more differentiated emotions, showing joy, fear, anger, and surprise.</td>
</tr>
<tr>
<td>9–12</td>
<td>Infants are intensely preoccupied with their principal caregiver, may become afraid of strangers, and act subdued in new situations. By 1 year, they communicate emotions more clearly, showing moods, ambivalence, and gradations of feeling.</td>
</tr>
<tr>
<td>12–18</td>
<td>Toddlers explore their environment, using the people they are most attached to as a secure base. As they master the environment, they become more confident and more eager to assert themselves.</td>
</tr>
<tr>
<td>18–36</td>
<td>Toddlers sometimes become anxious because they now realize how much they are separating from their caregiver. They work out their awareness of their limitations in fantasy and in play and by identifying with adults.</td>
</tr>
</tbody>
</table>

Source: Adapted from Sroufe, 1979.
When Do Emotions Appear?

**Basic Emotions**

- Facial expressions are not the only or best way for an infant to tell us their emotional state
  - An infant can be fearful without showing a “fear face”
    - Can indicate by turning away or averting their gaze or an increase in heart rate
- Emotions unfold simple to complex
  - Soon after birth: contentment, interest, distress
    - Reflexive, physiological responses to sensory stimulation or internal processes
  - Next six months: joy, surprise, sadness, disgust, and finally anger and fear
    - Reactions to events that are meaningful for the infant
When Do Emotions Appear? (cont)

Emotions Involving the Self

• Two types of emotions:
  – Self-conscious emotions: 15 – 24 months
    • Embarrassment, empathy, envy
    • Arrives after self-awareness
  – Self-evaluating emotions: 3 years
    • Pride, guilt, shame
      – Guilt and shame are distinct emotions
        » Responses to wrongdoing
Empathy: Feeling What Others Feel

- Depends on social cognition
- Arises during second year
- Piaget believed egocentrism delays development of empathy
  - Other research suggests that social cognition begins much earlier
    - 9-month-olds reacted differently to a person who was unwilling to give them a toy than to a person who tried to give them a toy but accidentally dropped it
Differentiation of Emotions during the first 3 years

- **Contentment** → **Joy**
- **Interest** → **Surprise**
- **Distress** → **Sadness, disgust**
  → **Anger, fear**

**Consciousness, as in self-referential behavior**

- **Embarrassment***
- **Envy**
- **Empathy**

**Acquisition and retention of standards and rules**

- **Embarrassment***
- **Pride**
- **Shame**
- **Guilt**

**First 6 months**

**From 18 to 24 months**

**From 2½ to 3 years**
Brain Growth and Emotional Development

- Brain and emotional life is bidirectional
  - Emotional experiences affect the brain development
  - Emotional experiences can have long-lasting effects on the structure of the brain
Emotions (cont)

- Four shifts in brain organization that correspond to changes in emotional processing
  - 0 – 3 months: differentiation of basic emotions as cerebral cortex becomes functional
  - 9 – 10 months: frontal lobes interact with the limbic system
    - Seat of emotional reactions
    - Hippocampus becomes larger and more adult-like
    - Connections between frontal cortex and hypothalamus and limbic system process sensory information
  - 12 – 24 months: self-awareness, self-conscious emotions
    - Better able to regulate emotions
    - May be related to myelination of frontal lobes
  - 3 years: hormonal changes in autonomic nervous system coincide with emergence of evaluative emotions, sympathetic system
Temperament

Definition: biologically based way of approaching and reacting to people and situations

• Not what you do but how you go about doing it (Thomas and Chess)

• Relatively consistent and enduring
  – The temperament you’re born with is the temperament you die with

• Inborn
Temperament (cont)

• *Studying Temperamental Patterns: The New York Longitudinal Study (Thomas and Chess)*

• 2/3 children fall into one of three categories
  – Easy: 40%
    • Generally happy, rhythmic in biological functioning, accept new experiences
  – Active/Feisty/Difficult: 10%
    • More irritable, harder to please, irregular in biological rhythms, more intense in expressing emotion
  – Slow-to-warm (anxious, shy): 15%
    • Slow to adapt to new people and situations
<table>
<thead>
<tr>
<th>Easy Child</th>
<th>Difficult Child</th>
<th>Slow-to-Warm-Up Child</th>
</tr>
</thead>
<tbody>
<tr>
<td>Has moods of mild to moderate intensity,</td>
<td>Displays intense and frequently negative</td>
<td>Has mildly intense reactions, both positive and</td>
</tr>
<tr>
<td>usually positive.</td>
<td>moods; cries often and loudly; also laughs loudly.</td>
<td>negative.</td>
</tr>
<tr>
<td>Responds well to novelty and change.</td>
<td>Responds poorly to novelty and change.</td>
<td>Responds slowly to novelty and change.</td>
</tr>
<tr>
<td>Quickly develops regular sleep and feeding</td>
<td>Sleeps and eats irregularly.</td>
<td>Sleeps and eats more regularly than the</td>
</tr>
<tr>
<td>schedules.</td>
<td></td>
<td>difficult child, less regularly than the easy</td>
</tr>
<tr>
<td>Takes to new foods easily.</td>
<td>Accepts new foods slowly.</td>
<td>child.</td>
</tr>
<tr>
<td>Smiles at strangers.</td>
<td>Is suspicious of strangers.</td>
<td>Shows mildly negative initial response to</td>
</tr>
<tr>
<td>Adapts easily to new situations.</td>
<td>Adapts slowly to new situations.</td>
<td>new stimuli (a first encounter with a new</td>
</tr>
<tr>
<td>Accepts most frustrations with little fuss.</td>
<td>Reacts to frustration with tantrums.</td>
<td>person, place, or situation).</td>
</tr>
<tr>
<td>Adapts quickly to new routines and rules of</td>
<td>Adjusts slowly to new routines.</td>
<td>Gradually develops liking for new stimuli after</td>
</tr>
<tr>
<td>new games.</td>
<td></td>
<td>repeated, unpressured exposures.</td>
</tr>
</tbody>
</table>

How is Temperament Measured?

- Questionnaire
- Short-form
- Parental self-report
- Nine characteristics
  - Activity level
  - Mood
  - Fear (approach/withdrawal)
  - Frustration
  - Soothability
  - Duration of orienting (distractibility and attention span)
  - Intensity of reaction
  - Biological rhythms
Temperament (cont.)

How Stable is Temperament?

• Largely inborn
• Probably hereditary
• Fairly stable
• Temperament at age 3 closely predicts personality at ages 18 and 21
• Not fully formed at birth
Temperament and Adjustment: Goodness of Fit

If caregiver/parent temperament doesn’t match with child’s temperament, it can be more challenging.

Shyness and Boldness: Influence of Biology and Culture

- Shyness and boldness continue throughout life.
- Children identified as inhibited (highly reactive) tended to be thin, narrow face, blue eyes.
- Children identified as uninhibited (low reactive) were taller, heavier, more often brown eyes.
- Genes that contribute to reactivity and timidity or bold behavior may influence body size and eye color.
- Experiences can moderate or accentuate early tendencies.
Developmental Issues in Infancy

- Developing Trust
- Developing Attachments
- Emotional Communication with Caregivers: Mutual Regulation
Developing Trust

- **Erikson: Trust versus Mistrust**
  - 0 – 18 months
  - Develop sense of reliability of people and objects
  - Develop a balance between trust and mistrust
  - If trust predominates, virtue: Hope!
  - How to develop trust?
    - Sensitive, responsive, consistent caregiving
    - Feeding when hungry
Developing Attachments

- Attachment: reciprocal, enduring emotional tie between infant and caregiver
- Patterns of Attachment: (Ainsworth)
  - Secure attachment
  - Avoidant attachment
  - Ambivalent attachment
  - Disorganized-disoriented attachment
- Ainsworth used “Strange Situation” to determine attachment
  - Infant/toddler with mother
  - Stranger enters
  - Mother leaves
  - How child deals with stress of mother leaving
  - How child deals with re-entry of mother
Attachment

• Secure attachment
  – Most common: 60 – 75%
  – Cry or protest when mother leaves and greets her happily when she returns
  – Mother is secure base

• Insecure attachment
  – Avoidant: 15 – 25%
    • Rarely cries when mother leaves, avoids her on her return, angry, don’t reach out in time of need, dislike being held but dislike being put down even more
  – Ambivalent or resistant: 10 – 15%
    • Anxious before mother leaves, very upset when she leaves, when she returns seeks contact with her while kicking and squirming
    • Very little exploration and hard to comfort

• Patterns are universal, present in all cultures
Attachment (cont)

• Disorganized-disoriented attachment: 10% of low-risk infants, much higher in certain at-risk populations, such as premature children, autism, or Down syndrome
  – Least secure
  – Identified later by Main and Solomon
  – Lack cohesive strategy to deal with the stress of the Strange Situation
  – Show contradictory, repetitive, or misdirected behaviors
    • Seek closeness to stranger instead of mother
    • Greet mother brightly when she returns but turn away or approach without looking at her
  – Most likely to occur with mothers who are insensitive, intrusive, or abusive or have suffered unresolved loss
How Attachment is Established

• Secure attachment reflects trust
  – Babies who cry a lot but mothers soothe them are securely attached
  – Mothers tend to be sensitive and responsive
  – Mutual interaction, stimulation, positive attitude, warmth and acceptance, emotional support

• Insecure attachment reflects mistrust

• Disorganized: institutionalized infants and toddlers more than 65% from Bucharest, Romania, only 19% secure
Developing Attachments

Alternative Methods to Study Attachment

• Strange Situation is strange, artificial, and may not be valid

• Observer versions of Attachment Q-set (AQS) valid in measuring security
  – Cross-cultural validity
Developing Attachments

The Role of Temperament

- Findings vary
- Mother’s sensitivity and baby’s temperament influences attachment patterns
- Neurological or physiological conditions may underlie temperamental differences in attachment
  - Irritable infants more likely to be insecurely (avoidantly) attached
    - When mothers received home visits with instruction on soothing baby, more likely to have secure attachment
Developing Attachments

Stranger Anxiety and Separation Anxiety

- Stranger anxiety: 8 months, wariness of person they don’t know
- Separation anxiety: 8 months, distress when familiar caregiver leaves
- While both are typical, not universal
  - May be more related to child’s temperament
  - Separation anxiety may be more about sensitive caregiver
- Research underlines value of continuity and consistency in caregiving
- Bonds can be formed with multiple caregivers, as long as caregiving situation is stable (Margaret Mead)
Developing Attachments

*Long-Term Effects of Attachment*

- **Securely attached toddlers:**
  - Have larger, more varied vocabularies
  - More positive interactions with peers
  - More joyful
- **Insecurely attached toddlers:**
  - Show more fear, distress, and anger
Developing Attachments (cont)

Long-Term Effects of Attachment

• Securely attached:
  – Preschoolers (3 – 5 years)
    • More curious, competent, empathic, resilient, self-confident, get along better with peers, closer relationships with others, interact more positively with parents, teachers, better able to resolve conflicts, positive self-image
  – School-age
    • Communicative skills, cognitive engagement, mastery motivation by 8 years
  – Adolescence
    • Closest and most stable friendships
Developing Attachments

*Intergenerational Transmission of Attachment Patterns*

- Studies using the Adult Attachment Interview found that clarity, coherence, and consistency of the responses reliably predict the security with which the respondent’s child will be attached.
- Securely attached mother recognizes her baby’s attachment behaviors and responds encouragingly.
- Mothers who are preoccupied with their past attachment relationships tend to show anger and intrusiveness.
- Depressed mothers who dismiss memories of their childhood tend to be cold and unresponsive.
- Parents attachment history influences their perceptions of their baby’s temperament.
Emotional Communication with Caregivers: Mutual Regulation

- Mutual regulation
  - Synchrony of interactions with caregiver
  - Appropriate and sensitive responses
  - Infant sends signals that influences caregivers response
  - Caregiver reads baby’s signals accurately and responds appropriately
  - Dr. Brazelton: Dance of reciprocity, a beautiful “waltz”
  - Helps babies learn to read others’ behavior and develop expectations
  - Helps babies to perceive emotions expressed and adjust their own behavior
Measuring Mutual Regulation: The “Still Face” Paradigm

Click on Video A and Video B

Notice the children’s reactions when their mothers become “depressed” and their lack of response when she “returns”
Social Referencing

• Affective sharing
• Ability to seek out emotional information to guide behavior
• Understanding how to act in a confusing or unfamiliar situation by seeking out another person’s perception of it
  – Babies use when encountering a new person or toy
    • They gauge their reaction by their caregiver’s expressions and vocalizations
• Plays a role in development of self-conscious emotions, sense of self, and socialization
Developmental Issues in Toddlerhood

- The Emerging Sense of Self
- Developing Autonomy
- Moral Development: Socialization & Internalization
The Emerging Sense of Self

- Self-concept: what I know about myself, my image of myself
  - I am 5’1”, blonde, girl
- Self-esteem is how I feel about being a girl, etc.
- Self-awareness emerges 18 – 24 months
Emerging Sense of Self: The Rouge Test

18 months

24 months
Emerging Sense of Self
Developing Autonomy

• Erikson: Autonomy versus Shame and Doubt
  – 18 – 36 months
  – Develop sense of autonomy, being in control
  – Develop a balance between autonomy and shame and/or doubt
    • Unlimited freedom is not safe or healthy
    • Too much shame and doubt is paralyzing
  – If autonomy predominates, virtue: Will!
  – How to develop autonomy?
    • Toilet training

• Negativism: “NO!” around 2 years, peaks at 3.5 – 4 years, declines by 6 years
Moral Development: Socialization & Internalization

• Socialization: learning the rules of society, habits for the culture, skills, values, and motives that make them responsible, productive members of society
  – Begins with compliance with parental expectations
  – Child must internalize the standards, not just comply
    • Obedience is the simple, choice is the complex
Developing Self-Regulation

• Control of one’s behavior to conform to a caregiver’s expectations or request
  – Even when the caregiver is not present

• Foundation of socialization

• Links all domains of development
  – Cognitive awareness is not sufficient
    • Child must restrain self that requires emotional control

• To control one’s behavior, child must be able to regulate their attentional processes and modulate negative emotions
  – Self-conscious and self-evaluative emotions emerge: empathy, shame, guilt
Origins of Conscience: Committed Compliance

- Conscience involves emotional discomfort about doing something wrong and the ability to refrain from doing it.
- Conscience involves willingness to do the right thing because it is right.
- Inhibitory control – conscious control of impulses that emerges in toddlerhood – contributes to conscience.
- Situational compliance: needs prompting and depends on parental control.
- Committed compliance: complies without reminders or lapses in performance.
  - More likely to be girls.
  - Increases with age.
Moral Development: Socialization & Internalization (cont.)

- **Factors in the Success of Socialization**
  - How parents go about socializing
  - Child’s temperament
  - Quality of parent-child relationship
  - Security of attachment
  - Observational learning from parents’ behavior
  - Mutual responsiveness of parent and child
  - Socioeconomic factors
  - Cultural factors

- **Committed compliance and conscience development:**
  - Secure attachment
  - Warm, mutually responsive parent-child relationship
Moral Development: Socialization & Internalization (cont.)

- Moral emotions: guilt, empathy
- Moral conduct: how one acts when faced with strong temptation to break rules
- Moral cognition: how one comprehends moral dilemmas
- Constructive conflict helps children develop moral understanding by enabling them to see another perspective or point of view
  - Conflict that involves negotiation
  - Conflict that involves reasoning
  - Conflict that involves resolution
- Receptive cooperation goes beyond committed compliance
  - Child becomes active partner in socialization
How Different Are Baby Boys and Girls?

• Gender Differences in Infants and Toddlers
• How Parents Shape Gender Differences
Gender Differences in Infants & Toddlers

• Measurable differences in babies are few
  – Boys:
    • Longer, heavier, slightly stronger
    • More vulnerable from conception on
    • At birth, brains 10% larger
      – Continues into adulthood
    • Play more aggressively beginning at 17 months
  – Girls:
    • Less reactive to stress
    • More likely to survive infancy
  – Same
    • Achieve motor milestones at same time
    • Between 2 – 3 years use more words pertaining to their own gender
How Parents Shape Gender Differences

• Parents tend to think boys and girls are more different than they actually are

• Mothers consistently have higher expectations for their sons’ success in crawling
  – Talk more to daughters, more supportive to daughters

• Fathers treat boys and girls more differently than mothers do
  – Talk more to sons, play more roughly with sons, show more sensitivity to daughters
    • Not all fathers in all cultures do roughhouse play with children
      – Culturally influenced

• Parents promote gender-typing
  – Children learn behavior appropriate for their culture
Contact with Other Children

- Siblings
- Sociability with Nonsiblings
Siblings

The Arrival of a New Baby

• Variation in children’s adjustment to new baby
• Mother acts differently toward older child initially
  – Play less
  – Be less sensitive to interests of older child
  – Give more orders
  – Have more confrontations
  – Use physical punishment
  – Initiate fewer conversations and games
• Enhances older child’s language
siblings: How siblings interact

- Sibling relationships play a distinct role in socialization
  - Resolving conflicts

- Sibling rivalry may be present
  - Secure attachment results in less rivalry and more harmony

- Affection is present

- Constructive conflict develops
  - Recognition of other’s needs, wishes and point of view
  - Learn how to fight, disagree, and compromise in a safe, stable relationship
Sociability with Nonsiblings

- Interest as infants
- Toddlers imitate each other
- Imitation leads to verbal communication
- Some children are more sociable than others
Children of Working Parents

- Effects of Maternal Employment
- Early Child Care
Effects of Maternal Employment

- 52.9% mothers with infants work
- 57.5% of mothers with toddlers work
- Negative effects on cognitive development at 15 – 36 months when mothers worked 30+ hours a week
  - Maternal sensitivity, high-quality home environment, and high-quality child care lessened effect but did not eliminate negative effects
- Children from low-income families benefit academically
Early Child Care

• 50% of infants 9 months old are in nonparental child care
  – More than ½ are in child care more than 30 hours a week

• 60% of preschool-aged children in child care
  – 60% of these children are in organized day care centers
  – 35% in relative’s care (usually grandparent)

• Affordability and quality of care are pressing issues
  – Especially low-income families and parents of children with disabilities
  – Most child care facilities don’t meet all recommended guidelines for quality care

• Most important element in quality care is caregiver
  – Stimulating interactions with responsive, consistent adults is crucial for development
Table 8-5  Checklist for Choosing a Good Child Care Facility

- Is the facility licensed? Does it meet minimum state standards for health, fire, and safety? (Many centers and home care facilities are not licensed or regulated.)
- Is the facility clean and safe? Does it have adequate indoor and outdoor space?
- Does the facility have small groups, a high adult-to-child ratio, and a stable, competent, highly involved staff?
- Are caregivers trained in child development?
- Are caregivers warm, affectionate, accepting, responsive, and sensitive? Are they authoritative but not too restrictive and neither too controlling nor merely custodial?
- Does the program promote good health habits?
- Does it provide a balance between structured activities and free play? Are activities age appropriate?
- Do the children have access to educational toys and materials, which stimulate mastery of cognitive and communicative skills at a child’s own pace?
- Does the program nurture self-confidence, curiosity, creativity, and self-discipline?
- Does it encourage children to ask questions, solve problems, express feelings and opinions, and make decisions?
- Does it foster self-esteem, respect for others, and social skills?
- Does it help parents improve their child-rearing skills?
- Does it promote cooperation with public and private schools and the community?

The NICHD Study: Isolating Child Care Effects

- Parental characteristics are the single best predictor of child care quality

- Child’s temperament impacts child care
  - Shy children experience greater stress
  - Boys are more vulnerable to stress in child care

- Children in center care have stronger cognitive and language skills at 2 and 3 years
  - But poorer social skills and more behavior problems

- Type, amount and quality of care influences specific aspects of development
  - More time spent in child care associated with stress

- Quality: low child-staff ratios, small group sized, trained, sensitive, responsive caregivers, positive interactions
Impact on Disadvantaged Children

• Children from low-income families or stressful homes especially benefit from high-quality care
  – Supplies cognitive simulation and emotional support
• The more time away from parents, greater risk of problem behavior
  – Does not harm poor children’s development unless care is low quality
  – Problem: children from low-income families tend to be placed in lower-cost and lower-quality care than children from more affluent families
  – Problem: vast majority of children eligible for federal child care subsidies don’t receive services
When you are content to be simply yourself and don’t compare or compete, everybody will respect you.

Lao-Tzu