CHAPTER 9

Early Childhood—Social and Emotional Development

CHAPTER OUTLINE

I. Emotional development in early childhood

   Social and emotional development occur at a fast pace during the preschool years. One of the major developmental tasks for this age group is to learn to regulate and control their emotional displays in keeping with the social norms and values of their background culture.

   A. Expressing emotions

      Beyond two years of age, children begin to show more complex emotions, reflecting their growing understanding of social relationships.

      1. The emergence of self-conscious emotions
         Emotions such as guilt, envy, shame, and pride require self-understanding and understanding of others’ feelings. The expression of self-conscious emotions changes with age, as younger children show their feelings through physical actions, while older children are better able to manage their emotions.

      2. Talking about and understanding emotions
         As linguistic skills improve, children demonstrate their increased understanding of emotions. Children’s knowledge of emotions permits them to respond appropriately in many social situations such as how to react to the emotional expressions of peers; this knowledge has implications for their social development. Emotional development appears closely tied to advancing cognitive skills that allow children to think in more abstract and complex terms.

      3. Sex differences in emotions
         Some differences in emotional expression are reported for boys and girls. Observations of parents’ behavior suggest that sons and daughters are taught to behave differently with respect to emotional behavior. Mothers are more expressive with their daughters than with their sons, and parents in general encourage girls to show affection and maintain close emotional ties, whereas they instruct boys to control their emotions. These differences in socialization most likely account for many of the stereotypical differences in male and female emotional behavior.

   B. Regulating emotions

      A further developmental accomplishment is the increasing ability to regulate one’s emotions. Even infants display some capacity to control their own affective state, such as by rocking or looking away when emotionally aroused. Toddlers, too, use strategies to reduce their frustrations, and soon become more effective at using language to communicate their concerns and desires. Young children who have trouble regulating their emotions continue to show this difficulty in later childhood. Inability to regulate emotions also appears to be more prevalent among children who display conduct disorders. The socialization techniques that parents employ play an important role in how successfully the child comes to regulate his or her emotions.

   C. Attachment and development in early childhood

      We have already seen that the concept of attachment has been a key concept in emotional development in infancy. Secure attachments are related to positive developmental outcomes in both cognitive and social realms. Securely attached children have been found to be more socially competent, show more leadership, and less aggression than insecurely attached children. These children, particularly those showing an avoidant pattern, are found to display undesirable behaviors.
II. **Self and self-regulation during early childhood** In preschoolers self-concept consists of definitions involving *categorical self*, the classification of oneself in terms of easily observable categories such as sex and age. However, even young children do include comments about mood, feelings, and other psychological aspects. Other components of the self include the senses of individuality, stability, and reflection. A child’s sense of individuality and stability changes throughout childhood.

A. **Sense of agency** As children move to having some ability to be independent, they must learn to monitor and direct their own activities to achieve certain goals (*self-regulation*) and comply with the expectations of others (*self-control*). About this time, children also look to adults after completing a task as though to share their success or failures. Feedback provided to children plays an important role in the way the children respond to other challenging tasks. Eventually, parents demand that children acquire effortful control, or the ability to suppress undesirable responses for ones that are considered more acceptable.

B. **Developmental changes in self regulation and self control** Infants and very young children depend on caregivers to help regulate their behavior (co-regulation). Shortly before their second birthday, children can respond to parents’ verbal instructions on how and when to regulate their behavior. By two years of age, self-control is self-initiated and children can more efficiently inhibit themselves, as indicated by their performance on *delay-of-gratification* tasks.

C. **The influence of language and attention** Lev Vygotsky theorized that language plays a primary role in the regulation of behavior. The verbal requests of others are more effective in the early preschool years, but with development the child’s own private speech becomes effective in controlling behavior. Private speech is most likely to occur in situations that challenge the child. By the late preschool years, children begin to use strategies on their own for redirecting attention, such as distracting themselves or covering a desired object.

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**Research Applied to Parenting: Encouraging children’s compliance.**

Even though preschoolers are beginning to exert signs of self-control, most parents still provide their children with supervision. Research findings suggest there is a link between child compliance and several characteristics of caregivers. In order to encourage the emergence of socially acceptable behaviors during childhood, parents should be supportive and emotionally available to children, justify the need for children to act in certain ways, offer a compromise, and emphasize competent behavior.

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III. **Moral development in early childhood** Moral development is the study of the process by which an individual comes to understand what society accepts as right and wrong.

A. **Development of conscience** seems to occur in the child’s third year. Conscience has two components: the ability to feel moral emotions such as guilt, and the tendency to follow rules even when adults are not watching. By three years old, children start offering apologies and distress if they think something is their fault. Factors leading to the development of conscience include the ability to recognize emotions in caregivers, and regulate their own emotions.

B. **Social learning theory and moral behavior** According to social learning theory, children acquire moral behavior in the same way they do any other behavior: through the processes of reinforcement and observational learning. Parents and others reward or punish the child’s behavior as well as provide models for the child to observe and imitate. Critics of social learning theory point out that this theory does not adequately consider the child’s thinking or reasoning about moral issues. Albert Bandura’s social cognitive theory has addressed the role of cognitive processes in the development of morality.

C. **Prosocial behavior** *Prosocial behavior* is any positive action performed to benefit others. *Altruism* is a specific prosocial behavior carried out to benefit others without expectations of reward. Even young infants demonstrate a rudimentary form of *empathy*, a response to the
feelings of others that includes sympathetic concern. By ten to fourteen months old, children display a wide range of empathic reactions to the distress of another. Between one and two years of age, children begin touching or patting the person in distress or seek to provide a comforting object such as a blanket or toy. Preschoolers are more varied in their empathic responses; they will help the victim, punish the agent of the child’s distress, protect the victim, and ask for adult help. Although some children show greater empathy with age, others may actually help or share less. Psychologists have found few reliable sex differences in the development of altruism. A consistent relationship between empathy and helping behavior is seen when nonverbal measures of empathy are used.

IV. Gender roles in early childhood Individuals within a given culture hold expectations and beliefs about the behaviors characteristic of males and females called gender stereotypes. The process by which children acquire the characteristics and behaviors prescribed for males and females is called gender-role development.

A. Gender stereotypes Although some differences in gender stereotypes are seen across cultures, many cross-cultural similarities exist. Men are often described in terms of instrumental characteristics such as assertiveness and independence, whereas women are described in terms of expressive characteristics associated with emotions and interactions with people. Eighteen-month-old infants show evidence of gender-role stereotypes, and knowledge continues to develop as children get older. Preschoolers knowledge about gender stereotypes include personality traits, occupations and appearance qualities that are associated with males and females.

B. Gender differences in behaviors Males and females are more alike than different; greater variability exists within the sexes than between them. However, some differences have been found, often starting in early childhood years.

1. Physical development Sex differences in physical attributes appear very early in life. Females are more physically mature at birth, and are less likely to be miscarried, die in infancy, or develop genetic diseases compared to males.

2. Cognition Early studies suggested that girls are more skilled than boys in verbal ability, but a recent meta-analysis detected no sex differences in verbal skills. Overall sex differences in math skills also failed to appear in a recent meta-analytical study. The cognitive skill in which sex differences still appear is mental rotation and spatial perception, where males outperform females.

3. Social behaviors Males are more aggressive than females, particularly preschoolers. This difference decreases as children get older. Under some circumstances, for example, when attempts to harm another include indirect or relational aggression, girls are found to be more aggressive than boys. To some degree, girls show a heightened sensitivity to emotions compared with boys. However, this may be due to socialization factors in that girls feel more comfortable expressing their emotions than boys.

C. Theories of gender-role development

1. Biological theories Biological theories focus on the interactions between behavior and chromosomal and hormonal influences. During initial sexual differentiation of the fetus, the XY configuration of chromosomes leads to the growth of the testes and the secretion of male hormones called androgens. The lack of a Y chromosome (XX pair) leads to the growth of female physical structures. The androgens also influence the organization of the structure of some areas of the central nervous system, which in turn may affect sex-typed behaviors such as aggression. However, whether levels of androgens and aggression are causally linked remains uncertain.
Atypical Development: Hormonal Disorders in Children

Both genetic males and females may be exposed to hormonal influences not typical for their sex. For example, the overproduction of adrenal steroids, a condition called congenital adrenal hyperplasia (CAH), may contribute to masculinization of genitalia in individuals who are genetically female and greater likelihood of rough-and-tumble play behavior than in females who do not have this condition. For individuals genetically male, a failure to be sensitive to androgens, a condition called androgen insensitivity syndrome (AI), may cause female-appearing genitalia and greater interest in female gender stereotypes. Although these studies suggest a role for biological factors in gender-stereotypic behavior, socialization practices may also account for some of the findings.

2. **Social learning theory** According to social learning theory, behavioral differences between the sexes result primarily from differential reinforcement and punishment of sex-typed behavior and imitation or modeling of these behaviors. Social learning theory has also incorporated the importance of attention, recognition, and motivation in explaining how sex roles are learned through modeling. Children are more likely to attend to, imitate, and display **sex-typical behavior** than **sex-atypical behavior**.

3. **Cognitive-developmental theories** Cognitive-developmental theories focus on the ways in which children understand gender roles in general and themselves as males or females in particular.
   
   In Kohlberg’s theory, gender development emerges as a result of cognitive development. An important cognitive milestone is **gender identity**, the knowledge that one is male or female, which emerges at about two to three years. At about age four, the child develops **gender stability**, the knowledge that gender does not change over time. The understanding that biological sex is not determined by external factors such as clothing, behaviors, or desires is called **gender constancy** and occurs at about seven years.

   **Gender schema** theory stresses the importance of gender identity and intrinsic motivations to display sex-typical behavior. Once children acquire gender identity, they actively construct gender schemas to organize information relevant to sex typing and their social world. Young children often distort information to conform to their beliefs about gender and may remember information discordant with those beliefs less effectively.

   Cognitive-developmental theories have been useful in explaining how children think about gender and particularly in explaining children’s distortion of information that is inconsistent with gender stereotypes. Children differ considerably in their acquisition of gender schematic behavior, perhaps in part as a result of the importance of gender to the community around them.

D. **The socialization of gender roles** Gender roles are assumed to be taught to children by others in their social environment, first parents and other family members and then peers and other people in their school experiences.

1. **The influence of parents** Parents provide their children with gender-role information in subtle ways, such as through sex-differentiated toys, and in more direct ways, such as by playing more aggressively with their sons than with their daughters. Parents also communicate gender-role information by delivering direct reinforcement for sex-typical behavior in their children and punishing sex-atypical behavior. However, the impact of parental factors on gender role development may be limited.

2. **Gender roles in nontraditional families** Studies of gender-role development in nontraditional families (for example, single-parent families and families with working mothers) suggest that children’s conceptions of gender roles in traditional and

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nontraditional families may differ. Children of employed mothers, for example, are more likely to have flexible conceptions of gender roles. Daughters of working mothers have higher achievement motivation and are more likely to display a blend of female-typed and male-typed personality traits. Children in families in which fathers play less stereotyped roles acquire less knowledge of gender stereotypes; adolescent girls appear to show some of the greatest benefits of growing up in homes with nontraditional fathers.

3. **The influence of peers** The peer group also has a major influence on children’s gender-role development. Toddlers’ play behavior differs as a function of whether a partner is male or female. In preschool and kindergarten, children consistently reward boys for sex-typical behavior but punish them for sex-atypical behavior. Girls are rewarded by their peers for sex-typical behavior but are not punished for sex-atypical behavior.

4. **Cross-gender behavior** Some children exhibit *cross-gender behavior*, that is, show characteristics more typical of the other sex. Children’s negative attitude toward cross-gender behavior, particularly in boys, increases with age. Cross-gender boys are more likely than cross-gender girls to become social isolates over time.