Psychosocial Stages During Infancy and Toddlerhood

<table>
<thead>
<tr>
<th>Age</th>
<th>Erikson’s Stage</th>
<th>Needed from Caregivers</th>
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<tr>
<td>First Year</td>
<td>Basic Trust versus Mistrust</td>
<td>Responsiveness</td>
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<tr>
<td>Second Year</td>
<td>Autonomy versus Shame and Doubt</td>
<td>• Suitable guidance</td>
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<td>• Reasonable choices</td>
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Understanding Emotions of Others

- **Emotional Contagion**
  - Early infancy
  - Tend to feel happy or sad when sense these emotions in others
- **Recognize Other’s Facial Expressions**
  - 4-5 months
  - Can match emotion in face with appropriate face of speaking person
- **Social Referencing**
  - Actively seek emotional information from a trusted person in an uncertain situation
  - By one year

First Appearance of Basic Emotions

- **Happiness**
  - Smile – from birth
  - Social smile – 6-10 weeks
  - Laugh – 3–4 months

- **Anger**
  - General distress – from birth
  - Anger – 4–6 months

- **Fear**
  - First fears – 2nd half of first year
  - Stranger Anxiety – 8–12 months

Social Referencing

- Relying on another person’s emotional reaction to appraise an uncertain situation
- Caregivers can use to teach children how to react
Self-Conscious Emotions

- Each involves injury to or enhancement of our sense of self
  - Shame
  - Embarrassment
  - Guilt
  - Envy
  - Pride

- Emerge middle of second year as sense of self emerges
- Need adult instruction about when to feel them
  - I.e. “Look at how far you can throw that ball!” and “You should feel ashamed for grabbing that toy!”

Emotional Self-Regulation

- Strategies we use to adjust our emotional state to a comfortable level of intensity so we can accomplish our goals
- Young infants rely on caregivers to soothe them
- Requires effortful control
- Self-regulation grows over first year, with brain development
- Caregivers contribute to child’s self-regulation style
  - by not helping babies regulate stressful experiences or
  - by giving lessons on socially appropriate ways of expressing feelings

Temperament

- Reactivity: Speed and intensity of
  - Emotional arousal
  - Attention
  - Motor activity
- Self-regulation: Strategies that modify reactivity

Temperament

- Stable individual differences in quality and intensity of emotional reaction, activity level, attention, and emotional self-regulation
- The temperament forms the foundation for adult personality
- Thomas and Chess NY longitudinal study in 1956
  - N=141 children followed from infancy into adulthood
- Temperament increases the chance a child will experience psychological problems or be protected from effects of a highly stressful home life
- Thomas and Chess (1977) found that parenting practices can modify emotional styles considerably
Structure of Temperament

- Easy child – 40% of sample
  - Quickly establish regular routines in infancy, generally cheerful, and adapts easily to new experiences
- Difficult child – 10% of sample
  - Irregular in daily routines, slow to accept new experiences, tends to react negatively and intensely
- Slow-to-warm-up child – 15% of sample
  - Inactive, shows mild, low-key reactions to environmental stimuli, is negative in mood, and adjusts slowly to new experiences
- Unclassified child – 35% of sample
  - Demonstrated unique blends of temperamental characteristics

Models of Temperament—Rothbart (UO) (2000)—Led to IBQ

1. Activity level
   - Level of gross motor activity
2. Soothability
   - Reduction of fussing, crying, and distress in response to caregiver's soothing
3. Attention span/persistence
   - Duration of orienting or interest
4. Fearful distress
   - Wariness and distress in response to intense or novel stimuli, including time to adjust to new situations
5. Irritable distress
   - Extent of fussing, crying, and distress when desires are frustrated
6. Positive affect
   - Frequency of expression of happiness and pleasure

Models of Temperament—Thomas and Chess (1977)

1. Activity level: Ratio of active periods to inactive periods
2. Rhythmicity: Regularity of body functions, such as sleep, wakefulness, hunger, and excretion
3. Distractibility: Degree to which stimulation from the environment alters behavior—e.g., whether crying stops when a toy is offered
4. Approach/withdrawal: Response to a new object, food, or person
5. Adaptability: Ease with which child adapts to changes in the environment, such as sleeping or eating in a new place
6. Attention span and persistence: Amount of time devoted to an activity, such as watching a mobile or playing with a toy
7. Intensity of reaction: Energy level of responses, such as laughing, crying, talking, or gross motor activity
8. Threshold of responsiveness: Intensity of stimulation required to evoke a response
9. Quality of mood: Amount of friendly, joyful behavior as opposed to unpleasant, unfriendly behavior

Biological Basis for Temperament (Kagan)

- Inhibited, Shy
  - React negatively, withdraw from new stimuli
  - High heart rates, stress hormones & stress symptoms
  - Higher right hemisphere frontal cortex activity
- Uninhibited, Sociable
  - React positively, approach new stimuli
  - Low heart rates, stress hormones & stress symptoms
  - Higher left hemisphere frontal cortex activity
Genetics and Environment in Temperament

<table>
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<tr>
<th>Genetic Influences</th>
<th>Environmental Influences</th>
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| - Responsible for about half of individual differences | - Nutrition  
| - Ethnic and sex differences | - Cultural caregiving styles—US vs. Japan  
|                           | - Boys & girls treated differently based on gender stereotypes  
|                           | - Parents emphasize sibling differences                                                  |
| Goodness-of-Fit          |                                                                                          |
| - Combines genetics and environment | - Creating child-rearing environments that recognize each child’s temperament while encouraging more adaptive functioning |

Attachment

- Attachment
  - Strong, affectional tie we have with special people in our lives that leads us to experience pleasure and joy when we interact with them and to be comforted by their nearness during times of stress
  - Discovered attachment doesn’t depend upon hunger satisfaction with Harlow’s 1950’s experiments with monkeys
    - Monkeys prefer terry cloth surrogate mother without food over wire-mesh surrogate with bottle
    - Harlow documentary: [http://www.violence.de/tv/rockabye.html](http://www.violence.de/tv/rockabye.html)

Attachment

- Preattachment phase (birth-6 weeks)
  - Infant grasping, smiling, crying, and gazing
  - Adult response encourages baby to try to keep adult nearby
  - Not yet attached because okay being left with unfamiliar adult
- Attachment-in-the-making phase (6 wks-6 mos)
  - Respond differently to familiar caregiver than a stranger
  - As infants learn that their behavior affects the behavior of those around, will develop trust—expectation that caregiver will respond when signaled
- Phase of clear-cut attachment (6-8 mos-18 mos-2 yrs)
  - Separation anxiety—upset when adult relied upon leaves
  - Use familiar caregiver as a secure base from which to explore and return for emotional support
- Formation of a reciprocal relationship (18 mos-2 yrs +)
  - Better understanding of language allows toddlers to understand factors that influence parent’s coming and going and able to predict their return

Ethological Theory of Attachment

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Measuring the Security of Attachment

- **Ainsworth’s “strange situation”**
  - Securely attached infants/toddlers should use parents as a secure base from which to explore an unfamiliar room and when parent leaves, unfamiliar adult should be less comforting than the parent
  - Secure – About 65% of North American infants
    - Infants use parent as a secure base from which to explore
    - Avoidant – About 20% of North American infants
      - Infants seem unresponsive to the parent when they are present
    - Resistant – About 10% of North American infants
      - Before separation, these infants often seek closeness to the parent and fail to explore
      - When parent returns, display angry, resistive behavior—sometimes hitting and pushing
      - May continue to cry after being picked up and not comforted easily
    - Disorganized-disoriented – About 5–10% of N.A. infants
      - This pattern reflects the most insecurity
      - At reunion, these infants show a variety of confused, contradictory behaviors,
      - May look away when held by parent or approach parent with flat affect
      - A few cry out after having calmed down

Factors that Affect Attachment Security (4)

3. **Infant characteristics**
   - These affect how easily the attachment is established
   - I.e. prematurity, birth complications, and newborn illnesses make caregiving more taxing
   - Many child attributes can lead to secure attachment if the caregiver sensitively adjusts their behavior to fit the baby’s needs

4. **Family circumstances**
   - Job loss, a failing marriage, financial difficulties, etc. can undermine attachment by interfering with the sensitivity of parental care or the babies’ sense of security by exposing them to angry adult interactions or unfavorable childcare arrangements
   - Parents bring to the family context a long history of attachment experiences, out of which they construct internal working models that they apply to the bonds established with their babies

Factors that Affect Attachment Security (4)

1. **Opportunity for attachment**
   - Institutionalized babies can have emotional difficulties because of being prevented from forming a bond with just one or a few adults
   - The first attachment bond can be much later when adopted resulting in being more likely to display emotional and social problems, including overly seeking adult attention and “over-friendliness” to unfamiliar adults and peers, and few friendships

2. **Quality of caregiving**
   - Interactional synchrony
     - “Emotional dance” between parent and baby by matching emotional states, especially positive ones

Self-Awareness: I-Self and Me-Self

**I-Self**
- Sense of self as agent
- Self as separate from surrounding world
- Can control own thoughts and actions
- As infants act on the environment, they notice different effects that help them sort out self from other people and objects
  - I.e. Infants kicking or batting at a mobile

**Me-Self**
- Sense of self as object of knowledge and evaluation
- Qualities that make self unique:
  - Physical characteristics
    - I.e. Baby’s with lipstick rubbed on nose look in mirror and rub off the lipstick—know that the image in the mirror is them and that’s not what they look like
  - Possessions
  - Attitudes, beliefs, personality
Self-Awareness

- Perspective taking and empathy develops
  - Ability to understand another’s emotional state and feel with that person or respond emotionally in a similar way

Self-Control

- Capacity to resist impulse to engage in a socially disapproved behavior
  - I.e. resist eating something told not to eat until adult said was okay (ABC News E! video/The Human Zoo “cakes”)
  - Emerges around 18 months
  - Improves through early childhood
  - Individual differences are lasting:
    - Gender
    - Sensitive caregiving
  - Essential for morality to develop

Effortful Control

- Effortful control
  - Inhibiting impulses
  - Managing negative emotions
  - Behaving acceptably
- Children need
  - Awareness of self as separate and autonomous
  - Confidence in directing own actions
  - Memory for instructions