ENCYCLOPEDIA on Early Childhood Development

EMOTIONS

Emotional Development in Childhood

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Introduction and Subject

Theoretical Perspective

The theoretical perspective taken toward emotional development in childhood is a combination of functionalist theory and dynamical systems theory[1]: A child's encounters with an environment can be seen as dynamic transactions that involve multiple emotion-related components (e.g., expressive behaviour, physiological patterning, action tendencies, goals and motives, social and physical contexts, appraisals and experiential feeling) that change over time as the child matures and in response to changing environmental interactions. Emotional development reflects social experience, including the cultural context. Elsewhere I have argued that emotional development should be considered from a bio-ecological framework that regards human beings as dynamic systems embedded within a community context.[2] Table 1 summarizes noteworthy descriptive markers of emotional development in relation to social interaction.[3]

Table 1. Noteworthy Markers of Emotional Development in Relation to Social Interaction

Age Period	Regulation/Coping	Expressive Behavior	Relationship Building

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Infancy: 0 - 12 mos.	Self-soothing and learning to modulate reactivity. Regulation of attention in service of coordinated action. Reliance on caregivers for supportive “scaffolding” during stressful circumstances.	Behavior synchrony with others in some expressive channels. Increasing discrimination of others’ expressions. Increasing expressive responsiveness to stimuli under contingent control. Increasing coordination of expressive behaviors with emotion-eliciting circumstances.	Social games and turn-taking (e.g., “peek-a-boo”). Social referencing. Socially instrumental signal use (e.g., “fake” crying to get attention).
Toddlerhood: 12 mos.-2½ years	Emergence of self-awareness and consciousness of own emotional response. Irritability due to constraints and limits imposed on expanding autonomy and exploration needs.	Self-evaluation and self-consciousness evident in expressive behavior accompanying shame, pride, coyness. Increasing verbal comprehension and production of words for expressive behavior and affective states.	Anticipation of different feelings toward different people. Increasing discrimination of others’ emotions and their meaningfulness. Early forms of empathy and prosocial action.

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Preschool: 2-5 years	Symbolic access facilitates emotion regulation, but symbols can also provoke distress. Communication with others extends child's evaluation of and awareness of own feelings and of emotion-eliciting events.	Adoption of pretend expressive behavior in play and teasing. Pragmatic awareness that "false" facial expressions can mislead another about one's feelings.	Communication with others elaborates child's understanding of social transactions and expectations for comportment. Sympathetic and prosocial behavior toward peers. Increasing insight into others' emotions.
Early Elementary School: 5-7 years	Self-conscious emotions (e.g., embarrassment) are targeted for regulation. Seeking support from caregivers still prominent coping strategy, but increasing reliance on situational problem-solving evident.	Adoption of "cool emotional front" with peers.	Increasing coordination of social skills with one's own and others' emotions. Early understanding of consensually agreed upon emotion "scripts."

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Middle Childhood: 7-10 years	Problem-solving preferred coping strategy if control is at least moderate. Distancing strategies used if control is appraised as minimal.	Appreciation of norms for expressive behavior, whether genuine or dissembled. Use of expressive behavior to modulate relationship dynamics (e.g., smiling while reproaching a friend).	Awareness of multiple emotions toward the same person. Use of multiple time frames and unique personal information about another as aids in the development of close friendships.
Preadolescence: 10-13 years	Increasing accuracy in appraisal of realistic control in stressful circumstances. Capable of generating multiple solutions and differentiated strategies for dealing with stress.	Distinction made between genuine emotional expression with close friends and managed displays with others.	Increasing social sensitivity and awareness of emotion “scripts” in conjunction with social roles.
Adolescence: 13+ years	Awareness of one’s own emotion cycles (e.g., guilt about feeling angry) facilitates insightful coping. Increasing integration of moral character and personal philosophy in dealing with stress and subsequent decisions.	Skillful adoption of self-presentation strategies for impression management.	Awareness of mutual and reciprocal communication of emotions as affecting quality of relationship.

Note. From Saarni (2000, pp. 74-75). Copyright 2000 by Jossey-Bass. Reprinted by permission of the author.

Recent Research Results

Sources of Emotion Competence

There is a general consensus that the development of emotion competence depends upon both the child's temperament and social-emotional experiences.[4,5] Infants may differ in their behavioural dispositions (i.e., their temperaments).[6] For example, some infants may be more irritable than others. However, if parents are able to rise to the challenge and provide sensitive caregiving, a secure attachment relationship will develop. Sensitive caregiving is thought to principally involve being able to accurately discern the infant's communicative signals and respond by meeting his or her needs. Yet, it is important to acknowledge that even the most sensitive parents may not always be successful in alleviating their infant's distress. Perfect parenting is not required for a secure attachment relationship. Furthermore, even if the relationship between infant and caregiver is problematic, a secure attachment relationship may develop later in childhood if parenting quality improves. Securely attached children show more positive and less negative affect than less secure (or insecure) and are better able to regulate their emotions.[7]

Emotion regulation is an important aspect of the child's emotional competence.[8] During infancy, emotion regulation lies chiefly in the hands of the infant's caregivers. Sensitive caregivers are able to discern early signs of distress on the part of the infant and act to mitigate such distress by removing its source and/or by providing comfort to the infant. For example, parents may simultaneously feed and gently rock a baby who is crying due to hunger. If the infant is crying due to overarousal (e.g., being taken to a noisy family gathering), parents may take the baby to a quiet room.

Socialization of Emotion Competence

For toddlers and younger children, several caregiver socialization strategies have been identified that promote the development of the child's ability to optimally cope with their emotional distress.[9] Several of these involve adults' contingent responses to the child's expression of emotion. Supportive responses include: (a) acknowledging the child's emotion and treating it as a legitimate reaction to a distressing event, (b) helping the child feel better (e.g., by providing comfort), and (c) helping the child actively cope with the source of their distress (e.g., learn how to rectify a distressing situation or avoid a stressor). For example, if a child shows fear when approached by a friendly but large and overly enthusiastic dog, a supportive parent might say "That dog does look scary but he's just excited to see you" and ask the dog's owner to hold the

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dog while the child and parent approach it together. Nonsupportive responses would include: (a) minimizing, dismissing, or devaluing the child's fear, (b) punishing or threatening punishment, and (c) immoderate distress by the parent. For example, a nonsupportive parent might react in the same scenario by saying "Don't be a baby," threaten to force the child to pet the dog, and/or become excessively distressed by the child's distress. These supportive and nonsupportive strategies may be employed by both parents and other caregivers. Supportive contingent responses have been linked to better social-emotional adjustment by younger children while nonsupportive responses have been linked to higher levels of problematic child behaviour. However, these generalizations must be qualified to acknowledge that the impact of caregiver socialization behaviours on the child may differ due to a variety of factors. These include the child's temperament and age. For example, highly inhibited children may be less responsive to parental suggestions about how to respond to potential threats (e.g., whether to approach a dog). Parental behaviours that support emotion competence in younger children may backfire when applied to older children or generalized across a wider range of contexts.[10] For example, encouraging children to freely admit their distress may be desirable in the context of interactions between younger children and their parents but such open expression may be problematic in the context of social interactions between older children and their peers (e.g., may be perceived as "babyish" and lead to peer rejection).

Beyond their contingent responding to children's emotion, other caregiver behaviours have been identified that influence the development of greater or lesser emotion competence. These include observational learning on the part of the child and explicit instruction on the part of the caregiver.[11] By observing how adults respond to emotionally challenging situations, children may develop their own repertoire of responses. For example, children who observe adults in their environment to respond with anger to a wide range of potential anger elicitors may themselves develop such a tendency.[12] Furthermore, once children reach an appropriate level of cognitive and language development, caregivers may explicitly discuss appropriate and inappropriate ways of responding to interpersonal threat and other elicitors of negative emotions.

Conclusions

Strengths in the area of emotional competence may help children and adolescents cope effectively in particular circumstances, while also promoting characteristics associated with positive developmental outcomes, including feelings of self-efficacy, prosocial behaviour and supportive relationships with family and peers. Furthermore, emotional competence serves as a

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protective factor that diminishes the impact of a range of risk factors. Research has isolated individual attributes that may exert a protective influence, several of which reflect core elements of emotional competence, including skills related to reading interpersonal cues, solving problems, executing goal-oriented behaviour in interpersonal situations, and considering behavioural options from both an instrumental and an affective standpoint.

ACKNOWLEDGEMENT

Although Carolyn Saarni unfortunately passed away in 2015, the emotion competence perspective she developed during her lifetime continues to provide a valuable framework for thinking and research on emotional development. Thus, this entry retains the framework Saarni presented in the previous edition of this encyclopedia while adding a brief review of recent research relevant to that framework.

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