PERENNIAL PROBLEM:

What to do about Nurturing Human Development

CONTINUING PARENTING CONCERN:

Developing a Sense of Self in Parents and Children

RELATED CONCERN:

Interactive Relations between Parents and Children

DESIRED RESULTS:

Students will understand how behaviors and interactions between children and parents affect development.

LEARNER OUTCOMES: Students will:

1. Understand how socialization is an interactive process.
2. Examine the characteristic traits which are considered to be appropriate by society.
3. Investigate factors influencing the relations between children and parents.
4. Examine alternative approaches for assisting parents towards healthy development of their children.
5. Analyze the consequences of different styles of behavior and interactions of parents on children’s development.

SUPPORTING CONCEPTS:

A. The Socialization Process
B. Factors Affecting Parent-Child Relationships
   1. Birth Order
   2. Gender-Role (sex-role) Identity
   3. Temperament
   4. Attachment

BACKGROUND INFORMATION:

Socialization is the teaching process through which the beliefs, attitudes and behavioral expectations of a culture are transmitted to its children. Socialization involves learning the values, attitudes, knowledge, and skills deemed appropriate by society.

Socialization begins in infancy when babies first respond to their parents or other people by consistent and predictable ways that indicate recognition. An example of this would be when a 3-4 month old smiles in response to the parent interacting with him or her. This interaction is seen as a social dance between parent and child; interactions are occurring back and forth. Children socialize parents just as parents socialize children. In other words, each participant affects one another and there is mutual stimulation and reinforcement.

Erickson calls this concept “developmental interaction” and states that it conveys the notion that:

1. The parent-child relationship is neither one-sided nor a casual relationship.
2. Interaction throughout the child-rearing years between parents and children affects the healthy development of each (Bigner, 2006).

While parent-child relationships are mutually regulated by the parents and child, in infancy much of the relationship is driven by the parent. As the child gains self-control and self-regulation, the interactions are initiated by both on a more equal basis.

The parent-child relationship is affected by many factors that interplay continuously. Bigner (2006) categorized these into predisposing factors and situational factors.

Predisposing factors are variables that have an influence on parenting or child behavior before interaction takes place or they give rise to the inclination and/or tendencies to behave in a certain manner before the interaction. Examples of predisposing factors include:

- Social/class/backgrounds/values/belief systems
- Current fads in childrearing philosophies and techniques
- Peer pressure to conform to similar childrearing philosophies
- Past experience with children
- Goals of childrearing
- Expectations of appropriate behavior (child and adult) and standards of conduct
- Model presented by one's own parents
- Individual personality patterns
- Age and sex of parent and child
- Current developmental levels of parent and child
- Birth order of child

Situational factors also contribute to how parents and children react to one another. Situational factors are the variables that relate to current circumstances surrounding the interaction of parents and children. They may arise from either the internal or external environments of either individual. Situational factors include:

- Preceding events of the day
- Time of the day when interactions occur
- Time pressures and constraints
- Physical or health status
- Hormone and blood sugar levels
- Restrictions on interactions caused by:
  - Physical setting (public versus private)
  - Presence of observers
  - Family size
  - Living space (adequate versus restricted)
  - Level of family income (adequate versus inadequate)
- Access to parent by child (limited versus complete)

**Socially Acceptable Behavior:** Learning to behave in a socially acceptable way is part of the socialization process. Parents and other adults will teach children about the traditions of society. Within each society there will be different cultural expectations depending upon the family's values and background. Culture is revealed through music, art, clothing, and cooking, as well as how we treat each other in our work and play.

We pass on the value of acceptable behavior within a culture by modeling it in three main ways:

- Through example: Adults show children how to behave by how they treat those children and others.
Through talking: Adults use words to help children learn to respect differences as well as how to act in socially acceptable ways.

Through spiritual training: Adults instill the development of moral behavior in children, helping them to deal effectively with the moral dilemmas of life.

Transmitting values is hard work—the work of sustaining a civilization. Moral intelligence is the capacity to understand right from wrong; it means to have strong ethical convictions and to act on them so that one behaves in a right and honorable way. The process of gradually learning to base one’s behavior on a personal set of values and beliefs of right and wrong begins early in life and is the process of moral development. Parents have the primary responsibility of helping their children develop a moral sense that will guide their behavior.

As toddlers, children begin to learn the rules their parents and other caregivers set. At this age, though, they can’t understand the reasons behind the rules or the difference between right and wrong. They just know that some actions, such as hitting another person, make the adults unhappy with them. They learn to avoid such behavior because they don’t want to lose love and approval. They also can become confused when an adult is demonstrating the kinds of behavior, such as hitting, that caused unhappiness when they did it.

Between the ages of five and seven children gradually develop the beginning of conscience, that inner sense of right and wrong that leads people to behave in acceptable ways and causes them to feel guilt when behaving in an unacceptable manner. The rules learned in early childhood form the basis of the conscience in the early school years. Adults can assist the developmental process by using these guidelines:

- Consider the child’s age and abilities
- Consistently set a good example
- Remember that learning self-discipline and acceptable behavior is a lifelong task.
- Talk about mistakes in private to avoid humiliating the child.
- Continue to show unconditional love despite misbehaviors.

It is critical to remember that the American population changes greatly over time. The typical student or citizen can no longer be defined as being of white, European descent. The non-European population is growing rapidly, each bringing its own aspects of culture, traditions and behavior. These groups are not homogenous and within each group cultural variations exist.

Birth Order: One of the predisposing factors that influences the social development of children and is examined further during this unit is birth order in the family. Psychologists feel that the influence on birth order not only affects a person’s self-concept and personality development, but the relationship with family and peers. Parents, perhaps unconsciously, react toward children and treat them differently according to their order of birth. No one’s character of personality is fixed by the position in the family, but there appears to be undeniable patterns. Birth order is only one of the several potential influences on personality. Gender, health, parental attitudes, religion, social and economic status, and other factors also play a part (Solimini, 2004).

The oldest child often carries more responsibilities and has greater expectations from parents. “Almost all firstborns start out as only children. And whether it’s for a few years or a lifetime, having their parent’s undivided attention can be both a blessing and a curse for them” (Mlyniec, 2004). Some traits of an oldest child include: self-assured, goal-oriented, perfectionist, bossy, nurturing and determined. Anything a first-born child does is a big deal, simply because it’s a first for his or her family.
The middle child are very competitive and often seek attention by being adventurous, rebellious, or disruptive. Middle born children often find it sometimes hard to get along with adults and may have a tendency toward getting depressed. They are generally cheerful, easy going, relaxed, realistic, and diplomatic and may feel inferior or overlooked. A negative about this position is that middle-born children often feel in competition with older siblings.

The youngest child in the family is often described as easygoing, adventurous, crowd-pleasing, dependent and self-centered. Those last born in a family tend to be “babbied” by other siblings and parents. This may cause them to be more dependent and less mature. The baby of the family is adored and indulged yet they are seldom a parent’s central focus (Mlyniec, 2004). To gain the spotlight, they may attempt to entertain others by comedic relief or other means.

“Only” children are usually more mature, well organized, have higher self esteem, are self-confident and often do well in school. The upside only children develop is self assurance and determination. The downside is being the sole focus, which can lead to unrealistically high expectations. Only children tend to be comfortable around adults. It is important for parents to arrange play dates with other children to help their only children socialize with peers their own age.

The above characteristics can vary because of the sex of siblings, the number of children in the family, and attitudes of parents. The effects of birth order seem to be reduced with larger age gaps between children.

**Gender-Role Identity:** Another factor which influences the social development of children is how they interact with their parents in the process of developing their gender-role (sex-role) identity. That is, males are supposed to be “masculine” and females are supposed to be “feminine.” According to research, gender role is established at birth. Most parents perceive boy and girl babies differently. Even looking around at stores most baby clothes can either be found in blue for boys, or pink for girls. Baby girls are often described as cute, adorable, and are often held more by parents. Baby boys are described as strong, active, energetic, and treated more roughly. Gender-role identity is learned first from interacting with parents. Children tend to imitate others who resemble themselves more closely.

Around three years of age, when children begin realizing there are physical differences between boys and girls, they begin to learn gender roles, the behaviors that are expected of girls and boys (Herr, 2004). As children move through childhood and into adolescence, they are exposed to many factors which influence their attitudes and behaviors regarding gender roles. These attitudes and behaviors are generally learned first in the home and are then reinforced by the child’s peers, school experience, and television viewing. However, the strongest influence on gender role development seems to occur within the family setting, with parents passing on, both overtly and covertly, to their children their own beliefs about gender (Witt, 1997). With the proper role models, they learn to treat members of the opposite sex with respect.

A child’s beginning sense of self, or self concept, is a result of the multitude of ideas, attitudes, behaviors, and beliefs that he or she is exposed to. The information that surrounds the child and which the child internalizes comes to the child within the family arena through parent-child interactions, role modeling, reinforcement for desired behaviors, and parental approval or disapproval (Santrock, 1994). As children move into the larger world of friends and school, many of their ideas and beliefs are reinforced by those around them. A further reinforcement of acceptable and appropriate behavior is shown to children through the media, in particular, television. Through all these socialization agents, children learn gender stereotyped behavior. As children develop, these gender stereotypes become firmly entrenched beliefs and thus, are a part of the child’s self concept.
Parents encourage their sons and daughters to participate in sex-typed activities, including doll playing and engaging in housekeeping activities for girls and playing with trucks and engaging in sports activities for boys (Eccles, Jacobs, & Harold, 1990). Children's toy preferences have been found to be significantly related to parental sex-typing (Etaugh & Liss, 1992; Henshaw, Kelly, & Gratton, 1992; Paretti & Sydney, 1984).

**Temperament:** Just as every child has individual physical features—voice, smile, hair, the arch of an eyebrow—each has a different temperament, style of behavior or way of responding to people, objects, events, and other stimuli. Temperament should not be confused with personality. It is but one part of personality, which encompasses more dimensions, such as talent, intelligence, emotion, and sense of humor, as well as temperament. Temperament is the stylistic part of personality; it is the distinguishing flavor, style, or characteristic that makes one's personality unique. Temperament refers to the distinct, yet normal, behavioral patterns that we bring to various situations. It affects how we experience and respond to a multitude of environments (Carey, 1998).

Recent research has shown that temperament is largely inborn. Every baby comes equipped with a unique temperament. For each child, that temperament is normal. About half of a child’s temperament is inherited; the other half comes from a variety of physical and psychological factors in the child and in the environment. These factors include conditions during the mother’s pregnancy; such as her nutrition, drug use, or general health; the child’s physical health after birth, such as nutrition, medical complications as a newborn, abnormalities of the central nervous system, and exposure to toxins; and psychological influences of the family and other environments.

Temperament and its influence on both child and parent has been widely misunderstood. Many parents think that temperament can be molded with discipline, structure, rewards, and in some cases medication. They are trying to rewire the child’s circuitry. If parents do not understand the inborn nature of temperament, or if they read their child’s temperament incorrectly, they work against the child’s natural behavioral style. All children need discipline and structure along with demonstrated affection and occasional rewards. These parenting tools are most effective when they are used in concert with the normal predisposition and behavioral styles of children, that is, with their temperament.

Temperament traits are never completely fixed, and they are never completely changeable either. Although parents cannot change their child’s basic temperament, they can alter the way they respond to and manage it. The quality of a relationship depends, to a large extent, on the “goodness of fit” between parent and child (Chess, 1990). How compatible are their temperaments? “Goodness of fit” refers to how well the parent or caregiver adapts his or her expectations and behavior to the child’s temperament, abilities and other characteristics. Each child is unique, and each relationship between a child and a parent is unique. An understanding of temperamental differences can help everyone to work more responsively and effectively with individual children. Dealing with temperament is dealing with individual differences.

It is important to understand temperament for several reasons:

- Temperament profoundly affects the relationship between parent and child.
- Temperament may affect a child’s physical health, development, and behavior.
- Temperament influences adults’ functioning, both as parents and as individuals. (Carey, 1998)

**Attachment:** Early parent-child relationships mediate and influence a child’s development in profound and dramatic ways. Attachment theory can be used to understand the dynamic
interaction of the parent-child relationship and its power to affect healthy development in all areas – physical, social, emotional, intellectual, and moral. Mary Ainsworth, who has extensively researched the mother-child relationship, defines attachment as “an affectional tie that one person or animal forms between himself and another specific one – a tie that binds them together in space and endures overtime” (Atwool, p.1).

Attachment can be described as a built-in chain of reciprocal responses between a primary caregiver (which may or may not be the biological parent) and a child in reaction to each other. It is much like a dance with both primary caregiver and child the dance partners. The baby pouts, cries, smiles, makes eye contact, follows, holds onto, sits with the parent. In response, the primary caregiver takes care of the child’s needs – to get something specific (food, diaper, toy), to be close (cuddling), to get attention (talking, singing, touching). At a very basic level, these behaviors insure survival of the individual and species.

The brain of the infant is molded by the environment. Biology provides the building blocks of development, while environment is the architect. “Mothers are biologically primed to become the infant’s ‘environment’...hormones released at birth promote intense alertness in the infant, which allows her to respond to her mother’s initial touches and emotional overtures. Right after delivery a corresponding release of hormones in the mother creates feelings of well-being and openness to bonding with the infant. The infant’s first suckling at the breast stimulates the mother’s secretion of oxytocin, a hormone associated with caring and social interaction” (Davies, p.43).

Developmental psychologists regard the formation of a secure attachment with a primary caregiver during the first year of life as the most important developmental task of infancy. Erik Erickson identifies this first developmental task “trust vs. mistrust” stressing that attachment is essential to the development of trust, security, and later autonomy.

Bonding and attachment are terms that are often used interchangeably. However, the stages of infancy and toddlerhood are more accurately portrayed by distinguishing bonding from attachment. Bonding is the basic link of trust between infant and caregiver, usually the mother. Successful bonding results in an infant acquiring a basic trust in others as responsive, in the world as a benign place, and in self as able to communicate needs. As an infant approaches toddlerhood, she begins to encounter parental limits for the first time. This initiates a second bonding cycle and as a result of this cycle a child develops trust in adult authority and limits. These two bonding cycles form the foundation out of which attachment grows. While bonding is about trust, attachment is about affection. Attachment can be defined as a person-specific relationship that is dominated by affectionate interchanges.

“According to attachment theory, children develop expectations of self and others based on their early experiences with primary caregivers. Children’s self-images are formed in large part according to how acceptable they feel in the eyes of their attachment figures. Children with sensitive, responsive caregivers come to perceive themselves as accepted and valued, whereas children with unresponsive caregivers come to perceive themselves as unacceptable and unworthy of attention...Children with insecure attachments learn that their needs will not be met; the world is neither predictable or supportive...The capacity to care about another person, to imagine and understand how others think and feel, begins in these first early relationships. The experience of forming strong early connections with a caring adult lays the foundation for the capacity to form meaningful relationships with others, including peers and adult love relationships” (Greenspan & Benderly).

Factors that interfere with secure attachment need to be addressed for the well-being of individual children and society. Attachment is vital not only to life itself but also to the quality of that life.
TEACHER PREPARATION:

1. Reflect on your childhood and instances when your parents taught you “socially acceptable” ways to behave. What were some of the methods of discipline or communication they used to get you to cooperate? Did you feel guilty if you didn’t live up to their expectations? What techniques have you used with children in order to guide them to appropriate behavior?

2. Have the students in your class reflect on their childhood and recall how their parents instilled acceptable behavior in them, bringing out both negative and positive feelings.

3. Use current textbook and/or on-line resources for additional background material in this area. Students may do individual research on-line for the topics in this chapter.

Note: TM in the activities refers to transparency master and SM refers to student master.

DIRECTED ACTIVITIES:

Supporting Concept A: The Socialization Process

1. “Define Socialization”: On an index card have students write their definition of “socialization.” Have students exchange their cards with three or four other students to discuss and compare their definitions. As a class, make a composite list of statements gathered by each one. (Awareness of Context)

2. “Observing Social Situations”: Using the observation form (SM-1) have students observe young children with their parents. This could be in a park, in their neighborhood, in the mall, grocery store, or at home. Explain to students that an observation states only the facts as seen. If your students have not done observations before, provide some guidelines on the basics of doing a proper observation. Set a due date for the observation and explain that it will be used for a class discussion. Students should turn in the observation with the paragraph they have written.

Class discussion: In small groups have students create case studies of these observations.

- What are some other ways these situations could have been handled?
- How do you think the child would have responded to each alternative approach?
- What do you think are the best possible ways to handle each situation? (Awareness of Context, Alternative Approaches, Consequences of Action, Desired Results)

3. “Acceptable Behavior”: Divide the class into small groups and provide each group with newsprint or butcher paper and pens. Have them list as many traits of socially acceptable behavior as they can think of (politeness, consideration, loyalty, honesty, etc.).

Discuss the following questions:

- What does it mean to have socially acceptable behavior?
- What affects how children learn socially acceptable behavior?
- Why is socially acceptable behavior important to society?
- What are some ways parents can help children develop positive social characteristics?
Beside each acceptable trait on their list have them list contrasting traits which describe unacceptable behavior (i.e., politeness—rudeness). How do these unacceptable traits affect:

- Peer relationships?
- Family relationships?
- Society?

(Desired Results, Alternative Approaches, Consequences of Action)

Supporting Concept B: Factors Affecting Parent-Child Relationships

4. “Birth Order Inventory”: Reproduce copies of the “Birth Order Personality Inventory” (SM-2) for everyone in the class. Allow students time to complete the inventory during class. Discuss the results and have students think about the differences and similarities between their actual birth order and their psychological birth order based on the results of the birth order personality inventory.

5. “Birth Order Group Activity”: Focusing on birth order as one of the predisposing factors that affect the way parents and children interact instruct students to move to one of four places in the room that has been marked as “first,” “middle,” “last,” “only.” Let students know that they should go to the group that they feel indicates their birth order position in their family. Provide each group with large sheets of paper and pens and ask them to generate a list of 5-7 positive and negative things about being in that birth order. Have small groups share with the class.

Discuss the following questions:

- How many students think these characteristics “paint” a true picture of them?
- How many think they do not fit into the characteristics given?
- What are some reasons for not fitting that pattern? (Age differences of siblings, number of children in family, age of parents, parenting philosophies of parents, blended families, etc.)

Individual assignment: Assign students to write a one-page paper on “How my position in my family has affected my development.” Have them analyze how they think their parents, consciously or unconsciously, have contributed to the development of the traits they have acquired at this point in their lives.

(Awareness of Context)

6. “On-line Research”: Have students choose a partner, or assign partners, and instruct each partnership to use the computer lab to do research on birth order. Have the groups develop lists of traits they have identified from their research for first born child, middle child, youngest child and only children. Discuss the traits as a class.

7. “Gender Gifts”: Have students divide a sheet of paper into three columns. In the first column, list three gifts they might buy for a baby before the baby was born. In the second column list gifts they would buy if they knew the baby was a boy. In the third column list gifts they would buy if they knew the baby was a girl. Compare the lists with other classmates. Have students discuss the following questions:

- Why did they put the gifts in the column they did?
- Are there any items that are the same in all three lists? If so, what does that tell you about gender-role bias?
• What are some societal problems which have occurred because of gender-role bias and/or stereotyping?
• Is this true of all cultures?
  (Awareness of Context)

8. “William’s Doll”: Read the children’s book, Williams Doll, to the class. Use the following questions for discussion:

• How many of you agree with the father in the story?
• How many agree with the grandmother?
• Why do you think the boys in the story felt the way they did about William playing with dolls?
• Have you had similar experiences?
• Is it important for a child to develop sex appropriate gender-roles? Why or why not?
  (Alternative Approaches, Consequences of Action, Desired Results)

9. “TV Family Sitcoms”: Reproduce copies of “Television Families” (SM-3) for each student. Give the students the assignment of watching a program that is considered a family sitcom. Provide a timeline for the assignment and a due date. Use the assignment to discuss the effects of television on our attitudes regarding family roles and gender identity.
  (Awareness of Context)

10. “Temperament of Infants and Toddlers”: Write the following quote by Stella Chess, M.D., on the whiteboard:

“Right from the start babies are different. Each has his or her own way of showing feelings and responding to the world around him or her.”

Ask the class what they have observed from adults and/or children when they get angry? How do they let us know? What have you observed from adults or children when they are pleased? How do they let us know?

That is temperament! Provide an overview of temperament using “Temperaments of Infants and Toddlers” (SM-4).

Using “Nine Temperament Traits of Infants and Toddlers” (SM-5), divide the class into nine small groups and provide them with the materials to develop a poster illustrating one of the nine traits. Have each group present their poster to the class, discussing that trait, and then post them in the classroom.
  (Awareness of Context)

11. “Understanding Your Temperament”: Using “Your Temperament Assessment Scale” (SM-6) have students individually complete the scale. After completing this scale give each student a copy of the “Chart of Temperament Traits” (SM-7), and have them plot their temperament assessment rating in one color of ink or pencil on the chart.

With a different color ink or pencil have them assess the temperament of someone close to them with whom they sometimes have difficulty getting along. Analyze the differences and similarities that may cause difficulties in the relationship.

Using the “Temperament Assessment Scale for Children” (SM-8), have them assess the temperament of a child they know, a relative, a child they baby-sit, etc. Have them plot that assessment on their “Chart of Temperament Traits.” Analyze the difference or similarities that may make working with that child easier or more difficult.
- Discuss how they could care for this child in a more effective and supportive way. Refer to the nine temperament traits.
- Explain that there are some important points to remember about working with children of different temperaments, which are discussed on the handout, “Important Points to Remember about Temperaments” (SM-8). Ask students to choose one point of particular interest to explain in their own words and with their own examples. Allow two minutes for them to choose and think about their points. Have one student speak about each point. (Awareness of Context)

12. “Danny”: Introduce the topic of attachment by having students read the case study of Danny from the book, HIGH RISK; CHILDREN WITHOUT A CONSCIENCE, by Dr. Ken Magid and Carole A. McKelvey (1990), pages 51-59. Have students respond individually to the following:

- Something I thought was interesting was ............
- Something I never thought about was ............
- I am concerned ............
- One question I have is ............

Discuss their reactions.

Ask students the following, “How is the problem of unattached children a very serious threat to society?” (TM-1) Summarize the key ideas using “High Risk Children” (TM-2). (Awareness of Context, Consequences of Action)

13. “Video; Infancy: Early Relationships”: Have the class view the video (The Developing Child, Magna Systems, Inc.). They are to take notes on the essentials of caregiving and the concept of “Mutuality.” Discuss with the class.

Summarize the key ideas by discussing the transparency, “The ABCs of Attachment” (TM-3). (Awareness of Context, Consequences of Action, Desired Results)

RESOURCES:


Mlyniec, V. *First, Last or In-Between*. *Parents*, October 2004: 133-135.


Solimini, C. *Oldest, Middle or In-Between*. *Family Circle*: July 2004: 30-32.


**Videos:**

Flexible, Fearful, or Feisty: The Different Temperaments of Infants and Toddlers. (1998) Bureau of Publications, Sales Unit, California Department of Education, P.O. Box 271, Sacramento, CA. 95812-0271. (May be available from your local Child Care Resource and Referral Agency.)
Observing Social Situations

Observer: ___________________________  Date: ________________________
Child’s Name and Age: _____________________________________________
Setting: _____________________________________________________________
Start Time: __________   End Time: __________

You will need to find a place that you can observe young children interacting with their parents (examples: park, shopping center, grocery store). The observation needs to last between 10 and 15 minutes. It is important that while observing you only write down the facts of what you see. Do not write your own personal opinions or ideas on what is going on.

Incident: (FACTS only—no opinions)

Interpretation:

1. What kinds of social experiences were happening?

2. In what ways were the parents interacting with the child?

3. How was the child acting? How was the parent acting and reacting to the child?

After observing, write a paragraph on whether you think that the parents and children were interacting in a positive way or a negative way? Why? You may use your own judgments and personal opinions while answering this question.
Birth Order Personality Inventory
Identifying Your Psychological Birth Order

There are five personalities according to birth order. Your personality may or may not correspond to your actual place in the family. The following inventory allows you to determine your psychological birth order personality.

Instructions: Choose the answer which most nearly fits of the four options given. When finished, enter your scores on the form at the end of the inventory. Do the calculations to identify your psychological birth order.

1 = never, 2 = sometimes, 3 = often, 4 = always

1. Do you have to organize before you can do something? _____
2. Do you want to impress others? _____
3. Do you try to avoid feeling inadequate? _____
4. Do you feel life was unfair as a child? _____
5. Do you like difficult challenges? _____
6. Do you make “to do” lists? _____
7. Do you say “I don’t know”? _____
8. Do you pay attention to details? _____
9. Do you avoid doing things that scare you? _____
10. Do you distrust people? _____
11. Do you operate from a schedule in your mind? _____
12. Are you careful to not offend others? _____
13. Do you suppress feelings? _____
14. Do you try to act like nothing bothers you? _____
15. Do you try to prove how mature you are? _____
16. Do you think with your feelings? _____
17. Do you rehearse what you will say? _____
18. Do you look for what is wrong with things? _____
19. Is it important for you to be strong? _____
20. Do you feel like you are not wanted? _____
21. Do you feel bad when others feel bad? _____
22. Do you feel guilty? _____
23. Do you say “I would appreciate it if you would . . .”? _____
24. Do you relate well to victims? _____
25. Do you resent being asked for favors? _____
26. Do you interrupt when others are talking? _____
27. Do you rehash past encounters? _____
28. Do you say “That’s not necessary”? _____
29. Do you jump to conclusions? _____
30. Do you try to avoid being trapped? _____
31. Do you worry about family and friends? _____
32. Do you think people should get what they deserve? _____
33. Do you like giving constructive criticism? _____
34. Do you compare things? _____
35. Do you feel left out? _____
36. Do you wish for time at home alone? _____
37. Do you try to impress other people rather than just doing your own things? _____
38. Do you focus on details when there is no need to do so? _____
39. Are you afraid people can put you down whenever they want? _____
40. Do you hate being blamed? _____
41. Do you dislike being interrupted? _____
42. Are you nice to people rather than honest? _____
43. Do you dislike deadlines? _____
44. Do you say “no problem!”? _____
45. Do you feel no one understands you? _____
46. Do you feel you can’t do what you want? _____
47. Do you have trouble expressing love? _____
48. Are you overwhelmed by emotion? _____
49. Do you like to help others? _____
50. Do you analyze things from all sides? _____
51. Are you afraid of appearing spoiled? _____
52. Is it difficult for you to accept love? _____
53. Do you prefer projects to goals? _____
54. Do you feel hurt when your idea is rejected? _____
55. Do you try to avoid answering questions for fear of being trapped? _____
56. Do you feel weighted down? _____
57. Do you fear people will be hard on you? _____
58. Do you give praise indirectly? _____
59. Do you keep busy to keep from being bored? _____
60. Do you feel like no one listens? _____
61. Do you do small projects first? _____
62. Do you feel compelled to agree? _____
63. Do you feel like nothing is good enough? _____
64. Do you get angry when told to do things? _____
65. Do you try to control your anger? _____
66. Do you get upset when people come over without telling you? _____
67. Do you hunt for what you want? _____
68. Does it make you angry when someone accuses you of being nasty? _____
69. Do you share your ideas with others because you want to please them? _____
70. Do you hate laziness? _____
71. Does life feel like all work and no play? _____
72. Do you compromise? _____
73. Are you a peacemaker? _____
74. Do you hate being cornered? _____
75. Do you get angry when others do nothing? _____
Coding Instructions: Enter the number from each answer:

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Totals:

A: _____ Only Child
B: _____ First Born (Oldest)
C: _____ Second Born (Middle)
D: _____ Third Born (Middle)
E: _____ Fourth Born (Youngest)

Your highest score indicates your psychological birth order. Your next highest two scores indicate secondary birth order characteristics.
Television Families

Name of Program Watched: _________________________________________________________________

Time of Day for Program: ________________________________________________________________

Describe the plot for the program:

Analyze the program using the following questions:

1. Did the men and women play traditional roles in the show? Describe why you think these roles are traditional or not.

2. Who was the dominate person in the family?

3. Was anyone playing a non-traditional role?

4. Do you think the family you saw was realistic? Why or why not?

5. Do you think young children and teenagers use these characters as role models?

6. What are some consequences if they do?
Temperaments of Infants and Toddlers

Right from the start, babies are different. Each has a unique style of showing feelings and responding to the world. These differences, clearly visible in the first few months of life, are expressed in many ways. They can be uncovered by the parent or caregiver who pays attention to:

- How active the infant is in body movements
- How regular or irregular she or he is sleeping, feeding, and having bowel movements
- How easily the infant accepts a new food, person, or place
- How long it takes the infant to adjust to a change in schedule or surroundings
- Whether the infant’s mood is mainly cheerful, neutral, or fussy
- How sensitive she or he is to loud noises, bright lights, rough clothing, a wet or soiled diaper
- How intensely the infant expresses her or his feeling and reactions
- Whether or not the infant can be easily distracted from an activity in which she or he is engrossed in
- How long the infant persists in attending to any single activity

Such traits make up a child’s individual temperament. Being alert to these temperamental differences and understanding how they require different caregiving approaches are crucial to nurturing children’s healthy emotional growth.
NINE TEMPERAMENT TRAITS OF INFANTS AND TODDLERS

1. **Activity Level**: Amount of movement and bodily activity.
   
   **High Activity**
   The child who is highly active prefers games and play with a lot of movement, kicks and splashes in the bath, likes to run around, gets restless and distressed if made to sit quietly in one spot for long periods of time. Give a child with this level of activity opportunities for active play. If the group is engaged in some quiet activity, let this type of child move around from time to time.
   
   **Low Activity**
   The child with low activity prefers quiet games and can sit calmly looking at picture books or coloring for long periods of time. Because this child moves slowly, she or he is sometimes teased as a slowpoke. You should expect that it will take a child with this level of activity extra time to get things done, such as dressing or moving from one place to another.

2. **Biological Rhythms**: Regularity or irregularity of such functions as sleep-wake cycle, hunger, and bowel elimination.
   
   **Regularity**
   The regular child sleeps through the night, takes a regular nap, eats about the same amount from day to day, and has a bowel movement about the same time each day. This child presents no problem with feeding or sleeping schedules and is usually easily toilet trained.
   
   **Irregularity**
   In contrast to the regular child, this one varies in sleep habits and hunger patterns, and she or he may wake up several times at night. The irregular child’s big meal may be lunch one day and dinner the next, and their bowel movements are unpredictable. You should accept this child’s irregular nap and feeding schedules. The child can be trained to sleep through the night if not picked up every time she or he cries. Toilet training will usually take longer and may not succeed until the child learns to be consciously aware of the internal sensation that signals a bowel movement.

3. **Approach/Withdrawal**: How the child responds to a new situation or other stimulus.
   
   **Approach**
   The approacher responds positively to a new food by swallowing it, reaches for a new toy, smiles at strangers, and when first joining a playgroup, plunges right in. Such a child presents few problems to the parent or caregiver, except when this responsiveness is combined with a high level of activity. The approacher may run impulsively to climb a new high rock or jungle gym that she or he cannot really manage or try to explore a potentially dangerous object.
   
   **Withdrawal**
   Typically cautious about exploring new objects, the withdrawer is likely to push away a new top or to spit out new food the first few times. Around strangers or when first taken to a new place, this child may fuss or cry and strain to get away. You should be patient with these initial negative reactions. Pressuring the child to make an immediate positive adjustment only increases their discomfort and makes it harder for the child to accept new people and things. Instead, small repeated exposure to the unfamiliar lets the child gradually overcome their early reluctance.
4. **Adaptability:** How quickly or slowly the child adapts to a change in routine or overcomes an initial negative response.

**High Adaptability**
The quickly adaptive child adjusts easily to the family’s move to a new home or a visit to a strange place. This child accepts new food that was first rejected after only a few trials, and this child is agreeable to changes in mealtimes and sleeping schedules. Such a child does not usually present problems to a caregiver. Occasionally, the youngster may give in too early to unreasonable requests for change, such as a playmate changing the rules in the middle of a game. The quickly adaptive child may benefit by encouragement to “stick to your guns.”

**Low Adaptability**
By contrast, the slowly adaptive child takes a long time to adapt to change or to accept something new she or he originally rejected. Such a child is sometimes misjudged as stubborn or willfully uncooperative. A more accurate term would be cautious. Your approach should be the same as for the withdrawing child – being patient, giving the child a number of exposures to the change, and encouraging the child when she or he begins to show signs of adjusting. Pressure to make such a child adapt very quickly will only boomerang and have the opposite effect.

5. **Quality of Mood:** The amount of pleasant, cheerful, and openly friendly behavior (positive mood) as contrasted with fussing, crying, and openly showing unfriendliness (negative mood).

**Positive Mood**
Smiling and laughing often, the child whose mood is positive is easily pleased and shows it openly. Fussing and crying are infrequent. This positive mood usually causes positive responses in adults, who find it easy to care for such children.

**Negative Mood**
The child whose mood is negative tends to fuss or complain a lot, even at trivial discomforts, and cry before going to sleep. The child may show little or no open expression of pleasure, even at games or other events that please, but rather will have a deadpan expression. You should be sure to spot such a child. While not ignoring the child’s fussing or complaining, respond cheerfully to her or him. You may find to your surprise that, although the child gives no outward evidence of pleasure at some special event, such as an expedition to the zoo, the child will later report it to her or his parents or friends as an exciting, happy event.

6. **Intensity of Reactions:** The energy level of mood expression, whether it is positive or negative.

**Low Intensity**
The low intensity child expresses both pleasure and discomfort in a low-key way. If happy, this child may smile or say quietly that she or he is pleased; if upset, the child may whine a little or fuss but not loudly. It is easy to misjudge and miss what is going on inside the child if you take the mild reactions as evidence that she or he is not really displeased or upset. Remember that mild expressions may mask strong emotions. Pay careful attention to such expressions, and take seriously the feeling behind them.

**High Intensity**
By contrast, the high-intensity child expresses her or his feelings with great intensity. When happy, this child bubbles and light; when upset, she or he cries loudly and may even have a tantrum. In this case, you have an opposite task, to evaluate objectively whether the issue is important or trivial and not be guided only by the intense reactions of the child.
7. **Sensitivity Threshold:** How sensitive the child is to potentially irritating stimuli.

**Low Threshold**
The child with a low threshold may be easily upset by loud noises, bright lights, a wet or soiled diaper, or sudden changes in temperature. This child may not be able to tolerate tight socks or clothing with rough textures. You should be aware of and attend to those reactions but not try to change them.

**High Threshold**
The child with a high threshold is not bothered by the same kind of stimuli as the child with a low threshold. You should check regularly to see if the infant has a wet or soiled diaper to avoid diaper rash. Otherwise, this child may be content to suffer the diaper irritation because the child’s high threshold keeps her or him from feeling irritated and uncomfortable.

8. **Distractibility:** How easily the child can be distracted from an activity like feeding or playing by some unexpected stimulus – the ringing of a telephone or someone entering the room.

**High Distractibility**
The highly distractible child may start and look up at the sound of a door closing softly. As one parent put it, half the solid food feeding went into the child’s ear because she constantly turned her head at small noises or glimpses of movement. In the early childhood period, the tendency can be an asset to the caregiver. The child who is fussing at being dressed or is poking at an electric outlet can be easily distracted by showing her or him a toy or other attractive object. In older childhood, however, when persistent concentration on a task like homework is welcomed; high distractibility may not be such a desirable trait.

**Low Distractibility**
The child who is not easily distracted tends to stick to an activity despite other noises, conversations, and people around her or him. This is desirable at certain times, such as feeding or dressing, when the child’s full attention makes her or him cooperative. But low distractibility creates a problem if the child is intent on trying to reach a hot stove and will not be easily diverted; the child may have to be removed from the situation.

9. **Persistence/Attention Span:** Two closely related traits, with persistence referring to how long a child will stay with a difficult activity without giving up, and attention span referring to how long the child will concentrate before her or his interest shifts.

**High Persistence**
The highly persistent child with a long attention span will continue to be absorbed in what she or he is doing for long periods of time. In the early childhood years, the highly persistent child is often easy to manage because once absorbed in an activity, the child does not demand your attention. However, the child may get upset and even have a tantrum if she or he is forced to quit in the middle of an activity, for example, bedtime, mealtime, or departure time. In such cases, you should warn the child in advance if time is limited, or you may decide to prevent the child from starting an activity that will have to be ended abruptly. The highly persistent child may also keep badgering to get something she or he wants, even after a firm refusal.

**Low Persistence**
The child with low persistence and a short attention span will not stick with a task that is difficult or requires a long period of concentration. If the bead does not go on the string right away, or if the peg does not slip into the hole after a few pokes, the child will give up and move onto something else. This child presents few caregiving problems in the early stages of childhood. Later, however, a short attention span and lack of persistence make learning at school and home difficult.
YOUR TEMPERAMENT ASSESSMENT SCALE

By answering the following questions for yourself, you can increase your understanding of your own temperament.

1. **Activity Level**: How much do you need to move around during the day? Can you sit through a long class without wiggling?
   
   Activity Level  
   
   Active | 1 | 3 | 5 | Quiet

2. **Regularity**: How regular are you in your eating, sleeping, and elimination habits?

   Regularity  
   
   Regular | 1 | 3 | 5 | Irregular

3. **Adaptability**: How quickly do you adapt to a change in schedule or routine, a new place or food?

   Adaptability  
   
   Adapt Quickly | 1 | 3 | 5 | Slow to Adapt

4. **Approach/Withdrawal**: How do you react the first time to new people, places, activities or tools?

   Approach/Withdrawal  
   
   Initial approach | 1 | 3 | 5 | Initial Withdrawal

5. **Physical Sensitivity**: How aware are you of slight differences in noise level, temperature or touch?

   Physical Sensitivity  
   
   Not Sensitive | 1 | 3 | 5 | Very Sensitive

6. **Intensity of Reaction**: How strong are your reactions?

   Intensity of Reaction  
   
   High Intensity | 1 | 3 | 5 | Mild Reaction

7. **Distractibility**: Are you easily distracted?

   Distractibility  
   
   Very Distractible | 1 | 3 | 5 | Not Distractible

8. **Positive or Negative Mood**: How much of the time do you show pleasant, joyful behavior compared with unpleasant or grouchy moods?

   Positive or Negative Mood  
   
   Positive Mood | 1 | 3 | 5 | Negative Mood

9. **Persistence**: How long will you continue with a difficult task?

   Persistence  
   
   Long Attention Span | 1 | 3 | 5 | Short Attention Span
<table>
<thead>
<tr>
<th>Activity Level</th>
<th>Biological Rhythms</th>
<th>Adaptability</th>
<th>Approach/Withdraw</th>
<th>Sensitivity</th>
<th>Intensity Of Reaction</th>
<th>Distractibility</th>
<th>Quality Mood</th>
<th>Persistence</th>
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</thead>
<tbody>
<tr>
<td>High Activity</td>
<td>Regularity</td>
<td>Adapts Quickly</td>
<td>Approaches</td>
<td>Low Sensitivity</td>
<td>High Intensity</td>
<td>High Distractibility</td>
<td>Positive Mood</td>
<td>High Persistence</td>
</tr>
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</table>

Chart developed by Janet Poole, Faculty, Program for Infant/Toddler Caregivers
### The Temperament Assessment Scale for Children

By answering the following questions for a child you can increase your understanding of individual temperaments.

1. **Activity Level:** How much does the child wiggle and move around when being read to, sitting at a table, or playing alone?

<table>
<thead>
<tr>
<th>Active</th>
<th>1</th>
<th>3</th>
<th>5</th>
<th>Quiet</th>
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</table>

2. **Regularity:** Is the child regular about eating, sleeping times, amount of sleep needed, and bowel movements?

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<tr>
<th>Regular</th>
<th>1</th>
<th>3</th>
<th>5</th>
<th>Irregular</th>
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</thead>
</table>

3. **Adaptability:** How quickly does the child adapt to changes in schedule or routine? How quickly does the child adapt to new foods or places?

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<tr>
<th>Adapt Quickly</th>
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<th>3</th>
<th>5</th>
<th>Slow to adapt</th>
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</table>

4. **Approach-Withdrawal:** How does the child usually react the first time to new people, new foods, new toys, and new activities?

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<th>Initial Approach</th>
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<th>5</th>
<th>Initial Withdrawal</th>
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</table>

5. **Physical Sensitivity:** How aware is the child of slight noises, slight differences in temperature, differences in taste, and differences in clothing?

<table>
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<tr>
<th>Not Sensitive</th>
<th>1</th>
<th>3</th>
<th>5</th>
<th>Very Sensitive</th>
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</table>

6. **Intensity of Reaction:** How strong or violent are the child’s reactions? Does the child laugh and cry energetically, or do they just smile and fuss mildly?

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<tr>
<th>High Intensity</th>
<th>1</th>
<th>3</th>
<th>5</th>
<th>Mild Reaction</th>
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</table>

7. **Distractibility:** Is the child easily distracted, or does she or he ignore distractions? Will the child continue to work or play when other noises or children are present?

<table>
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<tr>
<th>Very Distractible</th>
<th>1</th>
<th>3</th>
<th>5</th>
<th>Not Distractible</th>
</tr>
</thead>
</table>

8. **Positive or Negative Mood:** How much of the time does the child show pleasant, joyful behavior compared with unpleasant crying and fussing behavior?

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<thead>
<tr>
<th>Positive Mood</th>
<th>1</th>
<th>3</th>
<th>5</th>
<th>Negative Mood</th>
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</table>

9. **Persistence:** How long does the child continue with one activity? Does the child usually continue if it is difficult?

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<th>Long Attention Span</th>
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<th>3</th>
<th>5</th>
<th>Short Attention Span</th>
</tr>
</thead>
</table>

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Chapter 6, Parenthood Education Curriculum:
Developing a Sense of Self in Parents and Children: Interactive Relations Between Parents and Children
**IMPORTANT POINTS TO REMEMBER ABOUT TEMPERAMENTS**

1. **Differences in temperament, even at the extremes, are differences in the normal range of behavior.** The key is to understand how a particular trait influences the child’s behavior and to find the best way of handling it.

2. **A feisty or fearful child can be helped to learn to handle potentially distressing situations gradually,** by a supportive caregiver or parent who understands and accepts the child’s temperament issues. Protecting children from these difficult situations denies them valuable opportunities to master social expectations and develop confidence and self worth.

3. **Do not blame the child or the parents** for a child’s troublesome temperament trait. The child is not being deliberately troublesome, nor does the child have that temperament trait because of anything the parents have done. However, the parents may not understand their child’s temperament and may be applying child-rearing practices that do not fit the child’s temperament needs.

4. **The best way of relating to the child’s temperament can play a big role in the child’s emotional development.** The response the child gets from adults contributes to the self-image she or he develops.

5. **Any temperament trait can be an asset or a liability** to a child’s development, depending on whether the caregivers recognize what type of approach is best suited to that child.
How is the problem of unattached children a very serious threat to society?

“The results of such trauma are not pretty, and they last a life time. They may last many life times. They warp the fabric of society. It is absolutely essential that those of us with an understanding of these complicated issues raise a united call for effective intervention by society. This is not a problem that needs more study. It is a problem that needs action now.”

(Cline, 1979)
High Risk Children

- What happens, right or wrong, in the critical first two years of a baby’s life will imprint that child as an adult.
- A complex set of events must occur in infancy to assure a future of trust and love.
- If proper bonding and subsequent attachment does not occur, the child will develop mistrust and a deep-seated rage.
- This could result in a child without a conscience.
- Not all unattached children grow up to be criminals, but most suffer some form of psychological damage.
- Some psychologists argue that the most important long-term result of the failure to form an affectional bond is the “inability to establish and maintain deep and significant interpersonal relations”.

(Karr-Morse, Robin & Wiley, Meredith, Ghosts from the Nursery: Tracing the Roots of Violence)
The ABCs of Attachment

- Active and engaged care is essential for children’s brain maturation and for social, emotional, and intellectual development.

- Emotional signals, such as crying and smiling, serve as the language of the baby. Babies whose mothers are responsive to crying during the early months tend to cry less in the last months of the first year. Instead, they rely more on facial expressions, gestures, and vocalization to communicate their intentions and wishes to mother.

- For the infant and the young child, the warm, responsive care – rocking, touching, holding, singing, talking, smiling, and playing are essential for both cognitive and emotional development.

- It can’t just be any adult who helps a child develop emotional competence. Children need consistent, nurturing relationships with the same caregivers. These are the people who are relied on as a secure haven in times of distress and as a secure base from which to explore.

- Cognitive development and behavior control theory suggest that early relationship experiences around attachment issues lay the foundation for interaction with adults that influences subsequent adaptation in school contexts.

- Strong, secure attachment to a nurturing caregiver has a protective biological function against adverse effects of later stress and trauma.