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LIFESPAN DEVELOPMENT

CONTENTS

EMOTIONAL AND SOCIAL DEVELOPMENT DURING INFANCY

What you'll learn to do: explain emotional and social development during infancy



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Psychosocial development occurs as children form relationships, interact with others, and understand and manage their feelings. In emotional and social development, forming healthy attachments is very important and is the major social milestone of infancy. Attachment is a long-standing connection or bond with others. Developmental psychologists are interested in how infants reach this milestone. They ask such questions as: how do parent and infant attachment bonds form? How does neglect affect these bonds? What accounts for children's attachment differences?

Learning Outcomes

- Describe emotional development and self-awareness during infancy
- Contrast styles of attachment
- Describe temperament and the goodness-of-fit model
- Use Erikson's theory to characterize psychosocial development during infancy

Emotional Development and Attachment

Emotional Development

At birth, infants exhibit two emotional responses: attraction and withdrawal. They show

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they respond with smiles to those who engage their positive attention. Pleasure is expressed as laughter at 3 to 5 months of age, and displeasure becomes more specific to fear, sadness, or anger (usually triggered by frustration) between ages 6 and 8 months. Where anger is a healthy response to frustration, sadness, which appears in the first months as well, usually indicates withdrawal (Thiam et al., 2017). [\[1\]](#)

As reviewed above, infants progress from reactive pain and pleasure to complex patterns of socioemotional awareness, which is a transition from basic instincts to learned responses. Fear is not always focused on things and events; it can also involve social responses and relationships. The fear is often associated with the presence of strangers or the departure of significant others known respectively as **stranger wariness** and **separation anxiety**, which appear sometime between 6 and 15 months. And there is even some indication that infants may experience jealousy as young as 6 months of age (Hart & Carrington, 2002).

Stranger wariness actually indicates that brain development and increased cognitive abilities have taken place. As an infant's memory develops, they are able to separate the people that they know from the people that they do not. The same cognitive advances allow infants to respond positively to familiar people and recognize those that are not familiar. **Separation anxiety** also indicates cognitive advances and is universal across cultures. Due to the infant's increased cognitive skills, they are able to ask reasonable questions like "Where is my caregiver going?" "Why are they leaving?" or "Will they come back?" Separation anxiety usually begins around 7-8 months and peaks around 14 months, and then decreases. Both stranger wariness and separation anxiety represent important social progress because they not only reflect cognitive advances but also growing social and emotional bonds between infants and their caregivers.

As we will learn through the rest of this module, caregiving does matter in terms of infant emotional development and emotional regulation. **Emotional regulation** can be defined by two components: emotions as regulating and emotions as regulated. The first, "emotions as regulating," refers to changes that are elicited by activated emotions (e.g., a child's sadness eliciting a change in parent response). The second component is labeled "emotions as regulated," which refers to the process through which the activated emotion is itself changed by deliberate actions taken by the self (e.g., self-soothing, distraction) or others

reliance is labeled co-regulation, as parents and children both modify their reactions to the other based on the cues from the other. Caregivers use strategies such as distraction and sensory input (e.g., rocking, stroking) to regulate infants' emotions. Despite their reliance on caregivers to change the intensity, duration, and frequency of emotions, infants are capable of engaging in self-regulation strategies as young as 4 months old. At this age, infants intentionally avert their gaze from overstimulating stimuli. By 12 months, infants use their mobility in walking and crawling to intentionally approach or withdraw from stimuli.

Throughout toddlerhood, caregivers remain important for the emotional development and socialization of their children, through behaviors such as labeling their child's emotions, prompting thought about emotion (e.g., "why is the turtle sad?"), continuing to provide alternative activities/distractions, suggesting coping strategies, and modeling coping strategies. Caregivers who use such strategies and respond sensitively to children's emotions tend to have children who are more effective at emotion regulation, are less fearful and fussy, more likely to express positive emotions, easier to soothe, more engaged in environmental exploration, and have enhanced social skills in the toddler and preschool years.

Self-awareness

During the second year of life, children begin to recognize themselves as they gain a sense of the self as an object. The realization that one's body, mind, and activities are distinct from those of other people is known as **self-awareness** (Kopp, 2011).^[2] The most common technique used in research for testing self-awareness in infants is a mirror test known as the "Rouge Test." The rouge test works by applying a dot of rouge (colored makeup) on an infant's face and then placing them in front of the mirror. If the infant investigates the dot on their nose by touching it, they are thought to realize their own existence and have achieved self-awareness. A number of research studies have used this technique and shown self-awareness to develop between 15 and 24 months of age. Some researchers also take language such as "I, me, my, etc." as an indicator of self-awareness.

Cognitive psychologist Philippe Rochat (2003) described a more in-depth developmental path in acquiring self-awareness through various stages. He described self-awareness as

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Table 1. Stages of acquiring self-awareness

Stage	Description
Stage 1 – Differentiation (from birth)	Right from birth infants are able to differentiate the self from the non-self. A study using the infant rooting reflex found that infants rooted significantly less from self-stimulation, contrary to when the stimulation came from the experimenter.
Stage 2 – Situation (by 2 months)	In addition to differentiation, infants at this stage can also situate themselves in relation to a model. In one experiment infants were able to imitate tongue orientation from an adult model. Additionally, another sign of differentiation is when infants bring themselves into contact with objects by reaching for them.
Stage 3 – Identification (by 2 years)	At this stage, the more common definition of “self-awareness” comes into play, where infants can identify themselves in a mirror through the “rouge test” as well as begin to use language to refer to themselves.
Stage 4 – Permanence	This stage occurs after infancy when children are aware that their sense of self continues to exist across both time and space.
Stage 5 – Self-consciousness or meta-self-awareness	This also occurs after infancy. This is the final stage when children can see themselves in 3rd person, or how they are perceived by others.

Once a child has achieved **self-awareness**, the child is moving toward understanding social emotions such as guilt, shame or embarrassment, and pride, as well as sympathy and empathy. These will require an understanding of the mental state of others which is acquired around age 3 to 5 and will be explored in the next module (Berk, 2007).

Watch It

This video shows one study that demonstrates how toddlers become aware of their bodies around 18 months.

The Baby Human - Shopping Cart Study



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Researchers placed a dot of rouge (makeup) on babies' noses and then had them look into a mirror. On average, at what age did most babies touch their own noses when they saw their reflection?

3 months

10 months

18 months

9 months

Check Answer

Attachment

Psychosocial development occurs as children form relationships, interact with others, and understand and manage their feelings. In social and emotional development, forming healthy attachments is very important and is the major social milestone of infancy.

Attachment is a long-standing connection or bond with others. Developmental psychologists are interested in how infants reach this milestone. They ask such questions as: How do parent and infant attachment bonds form? How does neglect affect these bonds? What accounts for children's attachment differences?

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ments on monkeys. He separated newborn monkeys from their mothers. Each monkey was presented with two surrogate mothers. One surrogate mother was made out of wire mesh, and she could dispense milk. The other surrogate mother was softer and made from cloth: This monkey did not dispense milk. Research shows that the monkeys preferred the soft, cuddly cloth monkey, even though she did not provide any nourishment. The baby monkeys spent their time clinging to the cloth monkey and only went to the wire monkey when they needed to be feed. Prior to this study, the medical and scientific communities generally thought that babies become attached to the people who provide their nourishment. However, Harlow (1958) concluded that there was more to the mother-child bond than nourishment. Feelings of comfort and security are the critical components of maternal-infant bonding, which leads to healthy psychosocial development.

Watch It

Harlow's studies of monkeys were performed before modern ethics guidelines were in place, and today his experiments are widely considered to be unethical and even cruel. Watch this video to see actual footage of Harlow's monkey studies.

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Harlow's Studies on Dependency in Monkeys



Building on the work of Harlow and others, John Bowlby developed the concept of attachment theory. He defined attachment as the affectional bond or tie that an infant forms with the mother (Bowlby, 1969). He believed that an infant must form this bond with a primary caregiver in order to have normal social and emotional development. In addition, Bowlby proposed that this attachment bond is very powerful and continues throughout life. He used the concept of a secure base to define a healthy attachment between parent and child (1988). A **secure base** is a parental presence that gives children a sense of safety as they explore their surroundings. Bowlby said that two things are needed for a healthy attachment: The caregiver must be responsive to the child's physical, social, and emotional needs; and the caregiver and child must engage in mutually enjoyable interactions (Bowlby, 1969).

While Bowlby thought attachment was an all-or-nothing process, Mary Ainsworth's

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Situation, the mother (or primary caregiver) and the infant (age 12-18 months) are placed in a room together. There are toys in the room, and the caregiver and child spend some time alone in the room. After the child has had time to explore their surroundings, a stranger enters the room. The mother then leaves her baby with the stranger. After a few minutes, she returns to comfort her child.



Figure 1. Mutually enjoyable interactions promote the mother-infant bond. (credit: Peter Shanks)

Based on how the toddlers responded to the separation and reunion, Ainsworth identified three types of parent-child attachments: secure, avoidant, and resistant (Ainsworth & Bell, 1970). A fourth style, known as disorganized attachment, was later described (Main & Solomon, 1990).

The most common type of attachment—also considered the healthiest—is called **secure attachment**. In this type of attachment, the toddler prefers their parent over a stranger. The attachment figure is used as a secure base to explore the environment and is sought out in times of stress. Securely attached children were distressed when their caregivers left the room in the Strange Situation experiment, but when their caregivers returned, the securely attached children were happy to see them. Securely attached children have caregivers who are sensitive and responsive to their needs.



Figure 2. In secure attachment, the parent provides a secure base for the

With **avoidant attachment**, the child is unresponsive to the parent, does not use the parent as a secure base, and does not care if the parent leaves. The toddler reacts to the parent the same way they react to a stranger. When the parent does return, the child is slow to show a positive reaction. Ainsworth theorized that these children were most likely to have a caregiver who was insensitive and inattentive to their needs (Ainsworth, Bell, & Bell, 1970).

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show clingy behavior, but then they reject the attachment figure's attempts to interact with them (Ainsworth & Bell, 1970). These children do not explore the toys in the room, appearing too fearful. During separation in the Strange Situation, they become extremely disturbed and angry with the parent. When the parent returns, the children are difficult to comfort. Resistant attachment is thought to be the result of the caregivers' inconsistent level of response to their child.

Finally, children with **disorganized attachment** behaved oddly in the Strange Situation. They freeze, run around the room in an erratic manner, or try to run away when the caregiver returns (Main & Solomon, 1990). This type of attachment is seen most often in kids who have been abused or severely neglected. Research has shown that abuse disrupts a child's ability to regulate their emotions.

While Ainsworth's research has found support in subsequent studies, it has also met criticism. Some researchers have pointed out that a child's **temperament** (which we discuss next) may have a strong influence on attachment (Gervai, 2009; Harris, 2009), and others have noted that attachment varies from culture to culture, a factor that was not accounted for in Ainsworth's research (Rothbaum, Weisz, Pott, Miyake, & Morelli, 2000; van Ijzendoorn & Sagi-Schwartz, 2008).

Watch It

Watch this video to better understand Mary Ainsworth's research and to see examples of how she conducted the experiment.

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The Strange Situation | Mary Ainsworth, 1969 | Developmental Psyc...



Attachment styles vary in the amount of security and closeness felt in the relationship and they can change with new experiences. The type of attachment fostered in parenting styles varies by culture as well. For example, German parents value independence and Japanese mothers are typically by their children's sides. As a result, the rate of insecure-avoidant attachments is higher in Germany and insecure-resistant attachments are higher in Japan. These differences reflect cultural variation rather than true insecurity, however (van Ijzendoorn and Sagi, 1999). Keep in mind that methods for measuring attachment styles have been based on a model that reflects middle-class, US values and interpretation. Newer methods for assessing attachment styles involve using a Q-sort technique in which a large number of behaviors are recorded on cards and the observer sorts the cards in a way that reflects the type of behavior that occurs within the situation.

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