

ED2009

Tutorial 3

(25th April 2009)

Agenda

- How's the course going?
- General comments on TMA02
- Bowlby statement
- Disturbed Social Behaviour
- Bronfenbrenner's Ecological Model
- Resilience
- Anything else?

Bowlby Statement

- Key components
- Constituent phrases
- Ambiguity & possible meanings
- Research questions

“What is believed to be essential for mental health is that an infant and young child should experience a warm, intimate, and continuous relationship with his mother (or permanent mother-substitute – one person who steadily ‘mothers’ him) in which both find satisfaction and enjoyment.”

Bowlby Statement

Are these early childhood experiences 'critical' to normal development?

Can the effects of maternal deprivation be reversed in later childhood?

How do we decide if something is essential?

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Bowlby Statement

What aspects of development does this include?

- Language
- Intelligence
- Social
- Emotional

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Bowlby Statement

What are the qualities of a 'mothering' relationship?

Could a child be maternally deprived within a family, yet develop normally?

Could a child be mothered within an institution?

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Bowlby Statement

What does continuous mean?

- permanent, consistent or predictable?

When does separation become deprivation?

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Bowlby Statement

Is there anything special about 'mothers'?

Can others serve the same function?

"What is believed to be essential for mental health is that an infant and young child should experience a warm, intimate, and continuous relationship with his mother (or permanent mother-substitute – one person who steadily 'mothers' him) in which both find satisfaction and enjoyment."

Bowlby Statement

Is it always one person?

Can children have multiple mothers?

How many adults can children feel secure with?

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Bowlby Statement

Are the effects of separation due to the loss felt by the child or due to the loss felt by both the child and the parent, or both?

Do mothers need babies?

“What is believed to be essential for mental health is that an infant and young child should experience a warm, intimate, and continuous relationship with his mother (or permanent mother-substitute – one person who steadily ‘mothers’ him) in which both find satisfaction and enjoyment.”

Disturbed Social Development

Look at the three children (see handout) and answer the following questions:

- Which children show signs of disturbed behaviour?
- What do you think might be the cause of the disturbed behaviour?
- Which children do you think will have problems in later life, and why?

Disturbed Social Development

(Child One)

John is four years old. He is very lively, talkative and playful. His parents say he is 'cheeky' and encourage this. Whenever adults are around he tries to gain their attention; he often interrupts adult conversations and whines if he can't get his own way. His parents usually give in to him to keep the peace.

Disturbed Social Development

(Child Two)

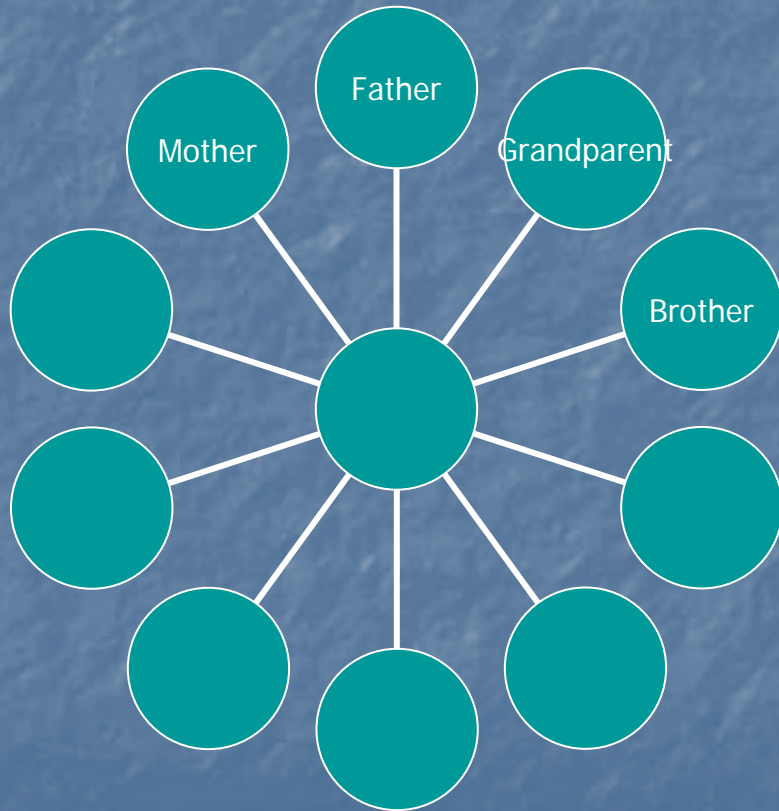
Jenny is seven years old. Her mother claims she is uncontrollable. At school she is first class student and doesn't demonstrate any disturbed behaviour. She fights with her ten year old sister frequently, who says she is very moody. She often has tantrums and can spend several hours in solemn silence if she doesn't get what she want. She wets the bed at least once a week.

Disturbed Social Development

(Child Three)

James is five years old. He is an only child and is very quiet. He can play alone for hours. He plays in silence, but his parents shrug their shoulders and say 'that's James for you'. His parents rarely play with him and they live on an estate where the only other children are teenagers. James has just started school and says he hates it. Getting him out of the house in the mornings is traumatic.

2 brothers – 7 & 10 years old

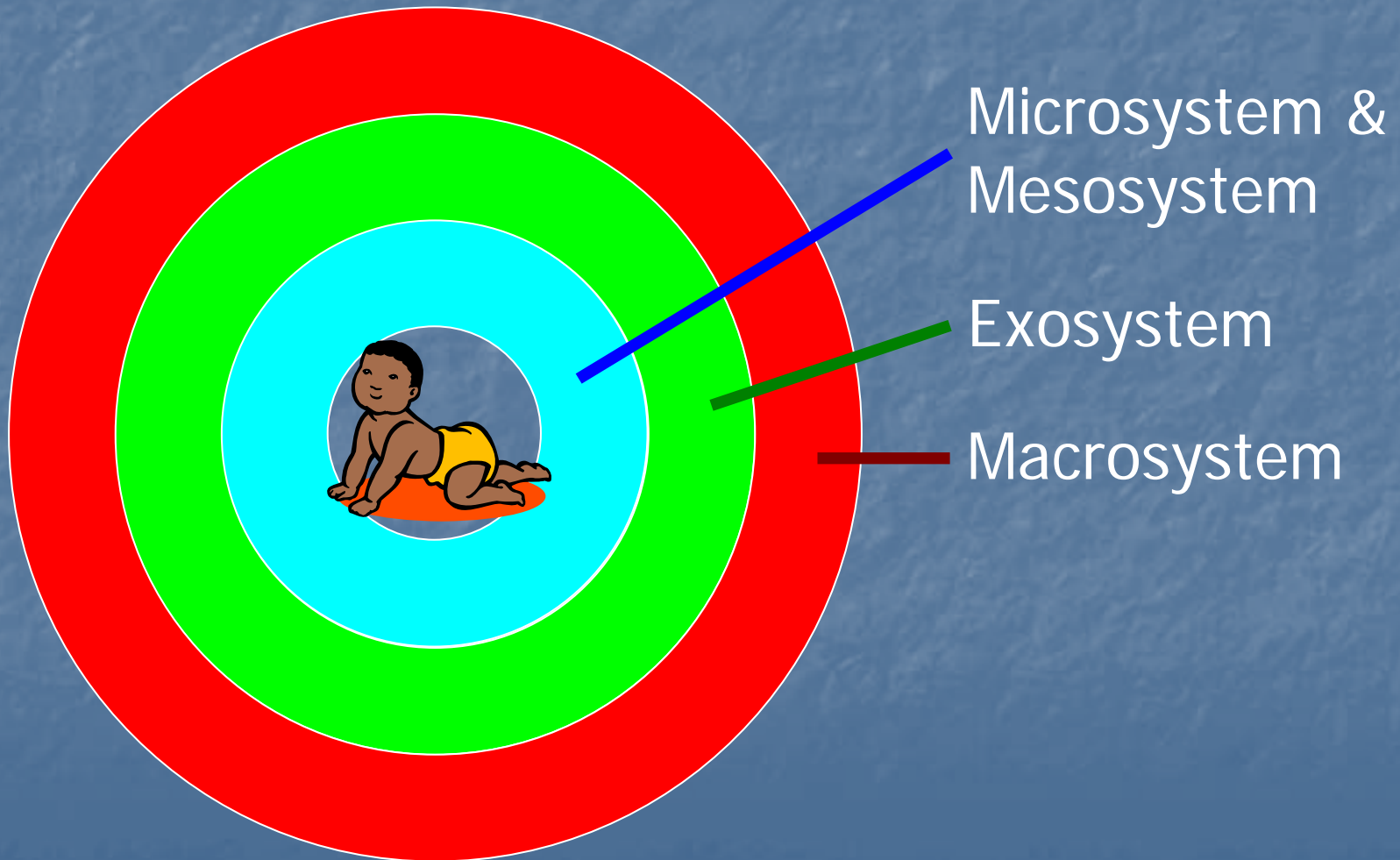


- Think of all the different groups of people, events, experiences, etc. that may have an affect on each of these children. Be general rather than specific.
- Identify the ones that are shared and the ones that belong to each individual.

2 brothers – 7 & 10 years old

- The 7 year old is very disruptive. Will not do as he is told and does what ever he likes.
- The 10 year old is very well behaved. Has always been good and has never been any trouble.
- Using the diagrams you've created, identify why they might have developed differently?

Bronfenbrenner's Ecological Model



Resilience

“Normal development under
difficult conditions”

(Fonagy *et al.*, 1994)

Resilience factors within the individual child

- What factors might be present in each of these age groups in order to increase the likeliness of resilience, e.g. a supportive family member
 - Infancy
 - Pre-school Years
 - Middle Childhood
 - Adolescence

Resilience in infancy

- Predictable temperamental characteristics which elicit positive responses from other people
- Active, affectionate, cuddly, good-natured, responsive, easy to deal with and have a capacity for self-expression
- Experienced a secure attachment and learned to trust in its availability
- A supportive family member
- A pronounced sense of autonomy and social orientation
- Alert, cheerful, responsive, self-confident and independent
- Advanced in communication, mobility and self-help skills
- More advanced in social play than vulnerable toddlers
- Developed a coping pattern that combines autonomy with an ability to ask for support when needed

Resilience in pre-school years

- Have well-developed communication and problem solving skills which the child is able to put to good use
- Are sociable but also independent

Resilience in middle childhood

- Well liked by peers and adults
- Reflective rather than impulsive in thinking style
- Feel they can influence their environments positively
- Able to use flexible coping strategies, including humour
- Adept at recruiting surrogate parents, even if not blood relatives
- Resilient *boys* are emotionally expressive, socially perceptive and nurturant
- Resilient *girls* are autonomous and independent
- Resilient *children* display flexible coping strategies which promote mastery over adversity rather than reactions in a rigidly sex-stereotyped manner
- Overall, *girls* are generally more resilient to stress and trauma than boys.

Resilience in adolescence

- More responsible and achievement oriented
- Prefer structure in their lives & have internalised a positive set of values
- Have a more positive self-concept
- More appreciative, gentle, nurturing and socially perceptive than their more vulnerable peers
- Pronounced social maturity and a stronger sense of responsibility
- Belief in their own capacity to control their fate
- By pre-school stage were healthily autonomous, able to enlist support
- Have repeated successful experiences of overcoming stressful situations (often with support of others)
- A sense of self-efficacy and confidence
- Select what they need from their environment and make good use of it
- Change or restructure a situation
- Are optimistic and hopeful.

Other Resilience factors

- Within the family
- Within the household
- Faith
- Friends
- School
- Parent-Child Relationship
- Vulnerability

Finally

- Any thing else