

Playing it cool: Temperament, emotion regulation, and social behavior in preschoolers

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Abstract

The contributions of temperamental styles and emotional coping strategies to the development of preschoolers' social competence and behavior problems were investigated. The ability to cope with emotion was found to be more important than temperament alone in the development of prosocial behavior. Our results indicate that the use of passive coping strategies may play a significant role in the development of maladaptive behaviors in young children. Specifically, the use of passive coping strategies was found to moderate the relationship between temperament dimensions in predicting externalizing and internalizing maladaptive behaviors. When combined with extremely negative temperamental dispositions, just facing the problems was discovered to be beneficial for preschoolers, which encourages the use of preventative or interventional strategies in the classroom to develop constructive emotion regulation skills in young children.

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Introduction

A key task in early childhood is the development of social competence, learning how to manage social situations with individuals inside and outside of the family system, especially during interactions with peers. Social competence is important for children in that it predicts both social and academic outcomes, such as school readiness (Carlton & Winsler, 1999) and positive attitudes toward school, which can lead to higher achievement (Ladd, 1990; Ladd, Birch, & Buhs, 1999; Ladd, Kochenderfer, & Coleman, 1996). In the study of preschoolers' social competence, the emergence of emotion regulation is vital to the creation and maintenance of positive relationships with peers (Denham et al., 2003); children who thrive in social interactions with peers, particularly those who succeed in negative interactions, effectively regulate their own emotions and subsequent emotion-related behaviors (Denham, Blair, Schmidt, & DeMulder, 2002). Temperament also exerts a strong influence on emotional development during early childhood as “research is revealing the large extent to which the task of learning how to manage one’s emotions . . . is a different challenge for children with different temperaments. . .” (National Research Council and Institute of Medicine, 2000, p. 114).

Emotion regulation has been linked to numerous aspects of social functioning in preschoolers, including socially appropriate behavior, popularity with peers, adjustment, shyness, and sympathy (Eisenberg, Fabes, Guthrie, & Reiser, 2002). Emotion regulation accounts for complex processes beyond the simple expression of emotion; it accounts for how and why emotions direct or disrupt psychological processes, such as the ability to focus attention, promote problem solving, and support relationships (Cole, Martin, & Dennis, 2004). A growing research base lends support to the possibility of emotion regulation as a—perhaps *the*—critical component of emotional competence necessary for effective interactions with others in the most stressful situations. How children learn to cope with stressful, negative interactions includes not only dealing with their own feelings of distress and anger, but also with their reactivity to the negative emotions of others (Eisenberg & Fabes, 1992), which is vital to the development and maintenance of social relationships.

Cole, Michel, and O’Donnell-Teti (1994) take the position that individual variations in the characteristics of emotion regulation become qualities of an individual’s personality. It is understood that individual differences in emotion regulation are normal. However, these authors also point out that when certain basic patterns of emotion regulation compromise or interfere with emotional and social functioning, these patterns may contribute to or become symptoms of psychopathology. There are a number of consistent emotional dysregulatory characteristics associated with various clinical disorders, including inappropriate affect, anxiety, blunted or restricted affect, sustained sorrow, dejection or fear, mood swings, or the predominance of one emotion and the relative absence of another (Cole et al., 1994).

In terms of children’s everyday behavior that can begin a trajectory toward such clinical disorder, aggression is, for example, a maladaptive means of coping with one’s own and/or others’ anger that potentially can result in disastrous consequences. Although many children are oppositional and defiant during the preschool years, when such behaviors are frequent, intense, or persistent beyond the normal developmental course, they are

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