

SOCIAL-EMOTIONAL COMPETENCE OF CHILDREN

PROTECTIVE & PROMOTIVE FACTORS

Early childhood is a period of both great opportunity and vulnerability. Early childhood experiences set the stage for later health, well-being and learning. In the past, most of the focus was on building young children's academic skills in an effort to ensure they were prepared for school. However, in recent years a growing body of research has demonstrated the strong link between young children's social-emotional competence and their cognitive development, language skills, mental health and school success. The dimensions of social-emotional competence in early childhood include:

- **self-esteem** - good feelings about oneself
- **self-confidence** - being open to new challenges and willing to explore new environments
- **self-efficacy** - believing that one is capable of performing an action
- **self-regulation/self-control** - following rules, controlling impulses, acting appropriately based on the context
- **personal agency** - planning and carrying out purposeful actions
- **executive functioning** - staying focused on a task and avoiding distractions
- **patience** - learning to wait
- **persistence** - willingness to try again when first attempts are not successful
- **conflict resolution** - resolving disagreements in a peaceful way
- **communication skills** - understanding and expressing a range of positive and negative emotions
- **empathy** - understanding and responding to the emotions and rights of others
- **social skills** - making friends and getting along with others
- **morality** - learning a sense of right and wrong

These dimensions of social-emotional competence do not evolve naturally. The course of social-emotional development—whether healthy or unhealthy—depends on the quality of nurturing attachment and stimulation that a child experiences. Numerous research studies show that a relationship with a consistent, caring and attuned adult who actively promotes the

development of these dimensions is essential for healthy social-emotional outcomes in young children. Actively promoting social-emotional competence includes activities such as:

- Creating an environment in which children feel safe to express their emotions
- Being emotionally responsive to children and modeling empathy
- Setting clear expectations and limits (e.g., "People in our family don't hurt each other.")
- Separating emotions from actions (e.g., "It's okay to be angry, but we don't hit someone when we are angry.")
- Encouraging and reinforcing social skills such as greeting others and taking turns
- Creating opportunities for children to solve problems (e.g., "What do you think you should do if another child calls you a bad name?")

Children who have experiences such as these are able to recognize their and others' emotions, take the perspective of others and use their emerging cognitive skills to think about appropriate and inappropriate ways of acting. Conversely, research shows children who do not have adults in their lives who actively promote social-emotional competence may not be able to feel remorse or show empathy and may lack secure attachments, have limited language and cognitive skills and have a difficult time interacting effectively with their peers. Evidence shows, however, that early and appropriate interventions that focus on social-emotional development can help to mitigate the effects of negative experiences in ways that lead to improved cognitive and social-emotional outcomes.



SOCIAL AND EMOTIONAL COMPETENCE OF CHILDREN: ACTION SHEET

Your role as a caseworker

It is important to increase caregivers' awareness of the importance of early relationships and of their role in nurturing their child's social-emotional development by:

- Providing concrete tips and resources to caregivers to help them build their skills
- Staying attuned to trauma and how it impacts the child's relationships with significant adults and, as they grow, with peers
- Connecting the family to resources that can help support the child's social-emotional development—these might be simple (such as classes like Second Step, or books and games that help children to name or recognize their emotions) or more intensive (such as mental health counseling)
- Providing families with support in dealing with children's attachment issues and/or challenging behaviors
- Taking time to explain and discuss children's behavior with caregivers when they are "acting out" due to trauma

Questions to ask

- How is the emotional relationship between you and your child?
- How do you express love and affection to your child?
- How do you help your child express his or her emotions?
- In what situations are your child's emotions hard for you to deal with?

What to look for

- Do the caregivers know how to encourage social-emotional development and apply a range of age-appropriate disciplinary strategies?
- Does the caregiver create an environment in which the child feels safe to express emotions?
- Is the caregiver emotionally responsive to the child?
- Does the caregiver model empathy?
- Does the caregiver set clear expectations and limits (e.g., "People in our family don't hurt each other")?
- Does the caregiver separate emotions from actions (e.g., "It's okay to be angry, but we don't hit someone when we are angry")?
- Does the caregiver encourage and reinforce social skills such as greeting others and taking turns?
- Does the caregiver create opportunities for children to solve problems? (e.g., "What do you think you should do if another child calls you a bad name?")?

Activities to do with parents

- Have the parent sketch out (or write out) an interaction with their child. Begin with an experience that typically makes the child happy, sad, frustrated or angry. Then have the parent illustrate or describe what the child does when he or she feels those emotions, how the parent responds and how the child responds. Identify and talk through positive or negative patterns in the interaction.
- Ask the parent to think of an adult who they loved as a child. What was it about the relationship with that adult that made it so important? Ask them what elements of that relationship they can replicate in their relationship with their child(ren).