

The Psychosocial Crisis of Toddlerhood

- Overview: Autonomy vs. Shame and Doubt
- Autonomy
- Shame and Doubt
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- Core Pathology: Compulsion

Autonomy vs. Shame and Doubt

Overview

Among the many changes of this stage, children:

- are more aware of their separateness
- experience a new level of self-consciousness, thus allowing them to realize they are the object of other peoples' affection, anger, encouragement, scorn, etc.
- become more aware of their own needs, wants and goals
- use language and fantasy to represent their inner world to others (communication)
- expand their purposeful, energetic exploration as their locomotor skills and self-control advance

One effect of these changes is **increased conflict!**

- Toddlers push all of the limits of courtesy, social norms and safety...
 - not because they want to offend others, but because they don't know any better--they don't understand what is expected of them, and their energy and enthusiasm for *autonomous action* are beyond their control.

Autonomy - the ability to behave independently and to perform actions on one's own

- Energy and persistence are the unique characteristics of growth that lead toward the development of autonomy.
- With the experience of autonomy, by the end of this stage children should have a strong foundation of self-confidence and delight in behaving independently.

Shame and Doubt - Shame and doubt stem from a pattern of failure at attempted tasks, or continual discouragement and criticism (from parents), or both.

- **Shame** - an intense emotion said to stem from two different kinds of experience: social ridicule/criticism, and internal conflict
 - shame that comes from social ridicule or criticism comes from social interactions in which you feel you have violated a valued social standard or you have been embarrassed or ridiculed for behaving in a stupid, thoughtless, or clumsy way.
 - Shame that comes from internal conflict occurs when children feel they have failed to live up to their own private idea of how they think they should behave (referred to as an *ego ideal*: a mental image of an ideal person).

Shame and Doubt - continued

Resolution:

- In favor of autonomy: will sometimes doubt they can succeed, and may still experience shame when they fail, but usually will feel competent and confident when trying many new activities.
- In favor of shame and doubt: will lead to avoidance of new activities. These children cling to what they already know, often creating **ritualistic behavior patterns** that they think will protect them from being shamed.

Central Process: Imitation

- Imitation is the central process through which toddlers learn new skills, with success at these new skills leading to feelings of competence.
- To be aware of regarding imitation:
 - begins during infancy, becomes more complex, continues throughout life
 - even though imitated behaviors come from another person, once successfully imitated, the action(s) belongs to the toddler and can be used for any purpose
 - as children grow older, they're more likely to imitate socially meaningful, valued behaviors (e.g., household tasks, caretaking behaviors)

Imitation: continued

- Successful imitation leads to feelings of social competence (especially when imitated behaviors are socially meaningful)
- children likely derive pleasure from perceiving themselves as similar to the important models in their lives
- children likely endear themselves to their caregivers by imitating those caregivers' behaviors

Prime Adaptive Ego Quality: Will

- **Will** - the capacity of the mind to **direct and control action**. The inner voice that focuses attention, encourages and urges you on, especially in the face of obstacles.

Core Pathology: Compulsion

- **Compulsions** are repetitive behaviors motivated by impulse or restrictions of the expression of impulse. Compulsions are nonspontaneous and unchanging.
 - Note that compulsions are closely tied to the kind of **ritualistic behaviors** that are common during toddlerhood (these provide order and control, allow for a sense of mastery in the face of the unknown, lead to a sense of security and comfort) but compulsions are carried out again and again and never adequately resolve the anxiety that motivates them.

- **Obsessions** are to thoughts what compulsions are to behavior--repetitive, with the goal of alleviating anxiety, though they don't!

Basically, persons who suffer from obsessions and compulsions have a damaged will in that their ability to willfully direct their thoughts and actions toward a goal is impaired.

- In fact, such persons often feel that their thoughts and actions are being controlled by a powerful force outside their voluntary control. They recognize that this stems from their own mind, but they don't feel that they have control (will) over it.
- OBVIOUSLY, compulsion is directly opposed to will (and in this case, will is damaged).

Parents as Socializing Agents

- Parents must teach their children what must be learned in order to become a well-functioning member of society. This involves **setting limits**, teaching right from wrong, and disciplining children. Just how this is accomplished will affect development during and beyond this stage.
 - Some guidelines: Discipline should be:
 - as immediate as possible
 - appropriately firm, but not overly so (parents should not overreact!)
 - **brief**- The toddler must know what was wrong and why, but beyond that, they must also know that they will not lose the parent's love and caring as a result of their behavior (remember that shame and doubt are not good!)
