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Behavioral Inhibition, Social Withdrawal, and Parenting

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BEHAVIORAL INHIBITION, SOCIAL WITHDRAWAL, AND PARENTING

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BEHAVIORAL INHIBITION, SOCIAL WITHDRAWAL, AND PARENTING

The study of children's social and emotional development requires that attention be paid to such factors as dispositional/biological factors (e.g., temperament), familial interactions and relationships, social contexts (e.g., school, neighborhood), and culture. For example, Hinde (1995) has advanced the notion that development be considered from a multi-level perspective beginning with individual characteristics and progressing to the interaction, relationship, and group levels of analysis and conjecture. At the level of the individual child, developmental scientists have studied such constructs as temperament that might lead to problematic social or behavioral outcomes. One such intrapersonal characteristic is that of "difficult" temperament – a phenomenon typically comprising such factors as high activity level and anger proneness, or high emotional reactivity combined with poor regulatory control. Difficult temperament has been thought, by some, to be an early developmental precursor of an externalizing/undercontrolled behavior pattern (e.g., Bates, Bayles, Bennett, Ridge, & Brown, 1991; Rubin, Hastings, Chen, Stewart, & McNichol, 1998; Sanson, Oberklaid, Pedlow, & Prior, 1991). Another dispositional characteristic, behavioral inhibition, has been regarded as a precursor of an internalizing/overcontrolled behavior pattern (e.g., Fox, Rubin, Calkins, Marshall, Coplan, Porges, Long, & Stewart, 1995). The focus of this chapter is on behavioral inhibition and its conceptually related constructs and variants; most notably, social wariness, shyness, and social withdrawal.

For the most part, the study of behavioral inhibition, shyness, and social withdrawal has been dominated by literatures pertaining to putative biological origins. Somewhat in support of this biological perspective has been the consistent report that these phenomena are stable (Caspi & Silva, 1995; Kagan, Reznick, & Snidman, 1987, 1989; Rubin, Coplan, Fox, & Calkins, 1995;

Rubin et al., 1995) -- inhibited, shy or withdrawn children appear to remain so from one year to the next. In truth, the stability data reported thus far are rather imperfect. Children do change, and some more so than others. A significant question to ask, therefore, is “What are the factors that predict, or are associated with, both stability and change?”

It bears noting that little is known about the extent to which children’s interactions and relationships with others, especially parents, serve as causal or moderating agents in the development of behavioral inhibition, shyness and social withdrawal, and their collective correlates and consequences. The primary purpose of this chapter is to examine the ways in which parent-child relationships and parenting beliefs and behaviors may serve in the development, exacerbation or amelioration of inhibition, shyness, and withdrawal. A secondary purpose of this chapter is to explore child gender differences and cultural differences insofar as the relations between parenting and inhibition, shyness, and withdrawal are concerned. Before proceeding, however, it is necessary to address relevant definitional issues.

Defining Inhibition, Shyness, and Social Withdrawal

Defining the constructs of behavioral inhibition, shyness, and social withdrawal is an issue of significance because researchers and clinicians have often used these, and other terms interchangeably (e.g., social isolation, peer neglect), and thus inappropriately. Further, researchers have operationalized each of these constructs in different ways. For a thorough discussion of terminology, we refer the reader to Rubin and Asendorpf (1993). Briefly, in their attempt to bring clarity to this area of study, these authors referred to inhibition as the disposition to be wary and fearful when encountering novel (that is, unfamiliar) situations. More specifically, behavioral inhibition was regarded as a pattern of responding or behaving, possibly biologically based, such that when unfamiliar or challenging situations were encountered, the

child showed signs of anxiety, distress, or disorganization (e.g., Rubin, Hastings, Stewart, Henderson, & Chen, 1997). Shyness was referred to as inhibition in response to novel social situations. The consistent display of inhibited or shy behaviors and wary emotions in unfamiliar social or nonsocial situations has been viewed as a precursor to an overcontrolled behavior pattern. Social withdrawal referred to the consistent (across situations and over time) display of solitary behavior when encountering both familiar and/or unfamiliar peers. Social isolation had little to do with the behavioral expression of wariness; rather the term reflected the expression of solitary behavior that results from peer rejection. Simply put, social withdrawal was construed as isolating oneself from the peer group, whereas social isolation indicated rejection by the peer group.

With regard to social withdrawal in early childhood, several different forms of solitary behavior have been described, each of which may have unique psychological properties and meanings. These forms of socially withdrawn behaviors include solitary-passive, solitary-active, and reticent behaviors (Coplan, Rubin, Fox, Calkins, & Stewart, 1994; Rubin, 1982). The common denominator among these different types of solitude is that they occur when the child is among a group of children. Solitary-passive behavior involves object exploration and constructive activity while playing at a distance from others. Such behaviors appear to indicate a lack of motivation to either approach or avoid others, and seem not to be associated with psychological maladjustment in early childhood (Coplan & Rubin, 1998; Rubin, Coplan, Fox, & Calkins, 1995). Second, solitary-active behavior involves repeated sensorimotor actions with or without objects, and solitary dramatizing. Although infrequent, this behavior has been associated with impulsivity and aggression (Coplan et al., 1994). Third, reticence is characterized by the frequent production of onlooking and unoccupied behaviors. While reticent

preschoolers may desire peer interaction, thoughts of social approach elicit anxiety/ fear and cause the avoidance of interaction. Reticence has been related to overt indicators of anxiety (e.g., crying, automanipulatives), poor performance on cooperative group tasks, and an inability to regulate negative emotions (Coplan et al., 1994; Rubin et al., 1995). In summary, each of these types of solitude represent independent constellations of behaviors with different psychological meanings.

Importantly, the “meanings” of these forms of solitude change with age. Solitary-passive behavior, for instance, takes on an increasingly negative flavor. For example, Kennedy, Cheah, Rubin, and Fox (1999) recently reported that unsociable seven-year-old children tend to display both reticent and solitary-passive behaviors among peers. This finding is consonant with Asendorpf’s (1991, 1993) conjecture that, by middle childhood, categories of solitude in the peer group tend to come together to form a single cluster – social withdrawal. It is also the case that solitary-active behavior continues to decrease with age beyond the preschool years, becoming practically non-existent among normally functioning elementary school children (e.g., Rubin, Watson, & Jambor, 1978).

Attachment, Behavioral Inhibition, and Social Withdrawal

In examining the etiology of children’s behaviors and emotions, it has been common for researchers and clinicians to focus not only on temperament, but also on the quality of the child’s relationships with primary caregivers as possible explanatory starting points. Because of the centrality of the parent-child relationship in infancy and early childhood, numerous studies have been conducted on the quality of this relationship, and researchers have often relied on attachment theory as their underlying, conceptual guiding light.

Attachment theorists maintain that the primary relationship develops during the first year

of life, usually between the mother and the infant. Maternal sensitivity and responsiveness influence whether the relationship will be secure or insecure (Ainsworth, Blehar, Waters, & Wall, 1978). Researchers have shown that securely attached infants are likely to be well adjusted, socially competent, and successful at forming peer relationships in early and middle childhood (e.g., Egeland, Carlson, & Sroufe, 1993; Shulman, Elicker, & Sroufe, 1994; Sroufe, 1983), whereas insecurely attached children may be less successful at social developmental tasks (Booth, Rose-Krasnor, McKinnon, & Rubin, 1994; Booth, Rose-Krasnor, & Rubin, 1991; Renken, Egeland, Marvinney, Sroufe, & Mangelsdorf, 1989; Rose-Krasnor, Rubin, Booth & Coplan, 1996).

Rubin and colleagues (e.g., Rubin, LeMare & Lollis, 1990; Rubin & Mills, 1991) have proposed a developmental pathway in which those infants who are temperamentally reactive and who receive insensitive, unresponsive parenting (Kagan, Reznick, Clarke, Snidman, & Garcia-Coll, 1984) come to develop an insecure-ambivalent (“C”-type) attachment relationship with their primary caregivers (Goldberg, 1990). In novel settings these “C” babies maintain close proximity to the attachment figure (usually the mother). When the mother leaves the Strange Situation briefly, these infants become quite unsettled. Upon reunion with the mother, these infants show angry, resistant behaviors interspersed with proximity- or contact-seeking behaviors (e.g., Greenspan & Lieberman, 1988). It is argued further that this constellation of infant emotional hyperarousability and insecure attachment may lead the child to display inhibited/wary behaviors as a toddler. Further, insecure inhibited toddlers have been posited to be at risk for the development of social withdrawal in childhood (Rubin et al., 1990).

There is now emerging support for temperament-“C” attachment status-inhibition -social withdrawal linkages. For example, Thompson, Connell, and Bridges (1988) reported that infant

proneness to fear predicted distress following maternal separation. Further, infants who are dispositionally reactive to mildly stressful, novel social events are more likely to be classified as insecurely attached “C” (anxious-resistant) babies than are their less reactive counterparts (Calkins & Fox, 1992; Fox & Calkins, 1993). Studies indicate that anxious-resistant (“C”) infants are more whiny, easily frustrated, and socially inhibited at age 2 than their secure (“B”) counterparts (Fox & Calkins, 1993; Matas, Arend, & Sroufe, 1978).

Support for both concurrent and predictive associations between insecure attachment, behavioral inhibition, and social withdrawal comes from more recent studies (e.g., Booth et al., 1994; Rubin, Booth, Rose-Krasnor, & Mills, 1995). Further, among clinical samples of mothers with anxiety disorders, Manassis and colleagues reported that 65% of children aged 18 to 59 months were behaviorally inhibited (using Kagan’s measures) and that 80% were insecurely attached (Strange Situation), although the authors did not distinguish between “A” (avoidant) babies and “C” babies (Manassis, Bradley, Goldberg, Hood, & Swinson, 1995).

The reluctance to explore and socially interact with others impedes the development of social competence (Rubin, Bukowski, & Parker, 1998). This appears to be a cost of a “C”-type attachment history (Renken, Egeland, Marvinney, Mangelsdorf, & Sroufe, 1989). Given that the social behaviors of preschoolers and toddlers who have an insecure “C”-type attachment history are thought to be guided largely by fear of rejection, it is unsurprising to find that when these insecurely attached children are observed in peer group settings, they appear to avoid rejection by demonstrating passive, adult-dependent behavior and withdrawal from social interaction (Renken et al., 1989). Indeed, anxious-resistant ‘C’ babies tend to be less socially skilled as toddlers and rated by their teachers as more dependent, helpless, tense, and fearful than their secure counterparts (Pastor, 1981). Lastly, ‘C’ babies lack confidence and assertiveness at age

four years (Erickson, Sroufe, & Egeland, 1985); then, at age seven years they are seen as passively withdrawn (Renken et al., 1989).

It bears noting that insecure attachment relationships are also predicted by maternal behavior. For example, mothers of insecurely attached 'C' babies are overinvolved and overcontrolling compared to mothers of securely attached babies (Erickson et al., 1985). This finding represents a natural segue to the extant literature on the associations between parenting and behavioral inhibition and social withdrawal.

Parenting Beliefs, Inhibition, and Social Withdrawal

Thus far, we have suggested that inhibition and social withdrawal may be a function of both dispositional and attachment relationship characteristics. It is also the case that these phenomena are associated with particular parenting styles (e.g., Hetherington & Martin, 1986; Parker, 1983). To begin with, parents' behaviors may be influenced by their beliefs about when it is that children typically come to demonstrate particular behaviors or ways of thinking; why children behave in the ways they do; and how they can influence growth or discourage maladaptive behavior (Bugental & Goodnow, 1998). In their developmental model, Rubin and colleagues suggest that parents' beliefs about how to socialize their children are determined, in part, by their children's dispositional characteristics (e.g., Rubin, Nelson, Hastings, & Asendorpf, 1999). Specifically, infant/ toddler inhibition is cited as representing a determinant of parenting beliefs and behaviors that, in turn, come to reinforce the development of socially withdrawn behaviors in children (e.g., Mills & Rubin, 1993; Rubin, Hymel, Mills, & Rose-Krasnor, 1991). Further, these authors proposed that early social fearfulness and inhibition would elicit parenting responses of an overprotective, overcontrolling nature (e.g., Rubin, Stewart, & Chen, 1995). Such parenting beliefs and behaviors would serve to reinforce social

fearfulness.

In a recent longitudinal study, Rubin et al. (1999) explored the relations between children's social fearfulness/ shyness at ages two and four years, and parents' beliefs in preferred rearing styles at these same two time points. Parental perceptions of child shyness/ social wariness at age 2 predicted both mothers' and fathers' expressed lack of encouragement of independence. Relatedly, toddlers observed to be inhibited at age 2 years have mothers who endorsed parenting styles pertaining to protection, a punishment orientation, and a lack of emphasis on independence training (Chen, Hastings, Rubin, Chen, Cen, & Stewart, 1998). Thus, at an early developmental stage, inhibited/shy children are exposed to attitudes or beliefs about parenting that may foster dependency.

In earlier work, Rubin and colleagues assessed the relations between maternal beliefs about children's development of social skills and their preschoolers' observed social behaviors among familiar others. Those preschoolers whose mothers indicated that the attainment of social skills was relatively unimportant were observed to cry more often when attempting to meet their social goals and to experience less success in their interpersonal negotiations (Rubin, Mills, & Rose-Krasnor, 1989). Further, the children of those mothers who believed that social skills emanated primarily from child temperament factors were less socially assertive and successful during their peer exchanges. Finally, mothers who indicated that they would use highly controlling strategies to socialize social skills (e.g., using coercion and strong commands) had children who were more likely to seek help from others and to use non-assertive social strategies to meet their own social goals. Their teachers also rated the children of these mothers as anxious, fearful, and withdrawn.

To gain a more precise picture of withdrawal, Rubin and Mills (1990) presented the

mothers of extremely anxious-withdrawn children (as identified by teacher and classmate ratings) with stories describing hypothetical incidents in which their own child consistently behaved in a socially withdrawn fashion among familiar others. Compared to mothers of non-anxious (“normal”) children, mothers of anxious-withdrawn children were more likely to suggest that they would use high control strategies (e.g., directives) and would be less likely to display low-power strategies (e.g., redirecting the child) and indirect-no response strategies (e.g., seeking information from others, arranging opportunities for peer interaction, not responding) in reaction to their children’s demonstration of socially withdrawn behavior. Also, these mothers were more likely to attribute the consistent display of social withdrawal to dispositional sources; and they expressed more anger, disappointment, embarrassment, and guilt about their children’s withdrawn behaviors than did mothers of “average” children.

The findings described above suggest that children who are socially anxious and withdrawn have mothers who may be overinvolved with, and overcontrolling of them. This pattern of parenting has previously been linked to internalizing difficulties in children (Parker, 1983). Indeed, preschool-age children of depressed mothers exhibit significantly more inhibited and anxious-withdrawn forms of play with both familiar and unfamiliar playmates than do children of non-depressed mothers (Kochanska, 1991; Rubin, Both, Zahn-Waxler, Cummings, & Wilkinson, 1991). Consequently, it may be that mothers of socially withdrawn preschoolers transmit their own internalizing problems to their children through overinvolved parenting. Such a parenting style may exacerbate the child’s sense of felt insecurity. Further, it may be that mothers of socially withdrawn children are highly sensitized to their children’s social and emotional characteristics; such sensitivity may provoke well-intended overcontrol and overinvolvement. This reaction to their child’s social behaviors may produce a mixture of

defensive reactions (e.g., downplaying the importance of social skills) and negative emotions.

Parenting Behaviors, Inhibition, and Social Withdrawal

Given that parental beliefs and cognitions influence parents' behaviors (Bugental & Goodnow, 1998), it may be that the socialization practices of parents whose children are inhibited or withdrawn differ from those of parents whose children are 'normal' and socially competent. Parents of socially wary/ fearful children may sense their children's difficulties and perceived helplessness; and then might try to support their children directly either by manipulating their child's behaviors in a power assertive, highly directive fashion (e.g., telling the child how to act or what to do) or by actually intervening and taking over for the child (e.g., intervening during peer disputes; inviting a potential playmate to the home). As noted above, the mothers of anxious/withdrawn children endorse the use of highly controlling behaviors to handle their children's social withdrawal in the peer group.

Recently, researchers have shown that parental influence and control do maintain and exacerbate child inhibition and social withdrawal. For example, Rubin, Hastings, Stewart, Henderson, and Chen (1997) observed toddlers interacting with unfamiliar peers and adults in a variety of novel situations in a laboratory; and they found that the toddlers who were the most inhibited across contexts were rated by their mothers as being of wary/shy temperament. Further, these mothers were observed to display overly solicitous behaviors (i.e., intrusively controlling, unresponsive, physically affectionate) during free-play, snack-time, and clean-up sessions. When interacting with their inhibited toddlers, then, mothers were highly affectionate and shielding of them when it was neither appropriate nor sensitive to be this way.

In a related longitudinal study, Park, Belsky, Putnam, and Crnic (1997) conducted naturalistic home observations of parents with their male infants and toddlers, and later assessed

boys' inhibition at age 3. They found that the parents of inhibited boys were high on sensitivity and positive affect but low on intrusiveness; moreover, parents were actually accepting of their child's inhibition or trouble coping with anxiety. It is difficult to compare these findings with those of the Rubin et al. (1997) study. The one constant is that inhibited children do not benefit from a high amount of affection under certain conditions; and it is argued that this particular mode of parenting may reinforce fearful, wary behavior, especially if provided during situations when the demonstration of warmth is inappropriate. The contradictory finding of Park et al. (1997) that parents were not intrusive could be explained in light of three factors. First, parenting behaviors were assessed prior to the observation of child inhibition, as opposed to concurrently; this may suggest that parents of inhibited children are actually not overcontrolling in the earliest stage of development, and it is only when they recognize their child's wariness / fearfulness (or it becomes more obvious as their child approaches the toddler and preschool years) that they try to "fix" or change it. Second, Park et al. assessed parents' behaviors in a natural setting with familiar people (i.e., home environment), whereas Rubin et al. assessed parent-child interactions in an unfamiliar laboratory setting with unfamiliar people. Third, Park et al. did not analyze whether parents behaved differently under free play versus demand situations.

Exploring parental behaviors with respect to the related construct of social reticence, Rubin, Cheah, and Fox (under review) reported that mothers whose preschoolers frequently displayed reticent behavior among unfamiliar peers were more likely than mothers whose children rarely displayed social reticence to use control statements and highly controlling behaviors during a mother-child free play session. This finding strengthens the contention that children who tend to avoid social interaction have mothers who provide guidance and directives

in an otherwise relaxing situation. Directiveness during goal-oriented tasks may be expected of parents (e.g., Kuczynski & Kochanska, 1995), but controlling the child's behavior in a pleasant, non-stressful free play environment is unnecessary; at the very least, such maternal behavior precludes the child from freely exploring the environment. The use of a highly directive parenting style during free-play could suggest that the parent attempts to protect the child from stress or harm when neither is objectively present.

In a related study, Henderson and Rubin (1997) explored whether emotion regulatory processes, as measured physiologically, interacted with parental behavior to predict preschoolers' socially reticent behavior among peers. These researchers began with the premise that vagal tone, a marker of the tonic level of functioning of the parasympathetic nervous system (Porges, 1991), should be associated with the display of social behavior in the peer group. Specifically, children with low vagal tone have been found to be more inhibited in the presence of an adult stranger at age two years (Fox, 1989; Rubin et al., 1997), and more reticent among peers at age four years (Fox & Field, 1989). Having examined a possible connection between child physiology, child behaviors, and particular parenting styles, Henderson and Rubin (1997) reported that, for preschoolers who showed low resting vagal tone, observed and reported maternal directive and critical behavior was associated with child reticent, wary and anxious behaviors among peers. For children with high resting vagal tone, such maternal direction and criticism was not associated with behavioral reticence.

Examining parents' behaviors toward anxious-withdrawn children (ages 2 ½ to 6 years), LaFreniere and Dumas (1992) found that mothers were poor reciprocators of their own child's displays of positive behavior and positive affect. In addition, these mothers responded aversively to their child's negative behavior and negative affect. Such non-contingent

responding to their children's positive behavior accompanied by punishment of negative behavior could hinder a child's development of self-worth and felt security.

Bolstering these results in an older age group, Mills and Rubin (1998) observed that, relative to mothers of normal children, mothers of extremely anxious-withdrawn children (aged 5 to 9 years) directed significantly more behavior control statements to their children. Further, mothers of anxious-withdrawn children used more psychological control statements, defined as devaluation statements or non-responsiveness to the child. Such parenting practices may also be accompanied by expressions of criticism and disapproval, and this negativity may attack the child's sense of self-worth.

In summary, the studies reviewed above provide support for our contention that once an inhibited behavioral style is established, parents may sense the child's anxieties and insecurities, and seek to help the child's mastery of the environment through authoritarian direction, protection, and oversolicitousness (e.g., solving the child's interpersonal and intrapersonal problems for him/her). These findings support the notion that inhibited/ wary or shy children have parents who are reluctant to let them explore novel situations. Importantly, parental overcontrol may be a response to children's early displays of behavioral inhibition. Thus, parents may sense their children's anxiety/ distress and choose to constrain independent action rather than subjecting their children to possible psychological or physical risk. An unfortunate consequence of constraining children and providing unnecessary assistance is that their opportunities to develop self-regulatory abilities, learn social skills, and build self-confidence are also limited.

The literature on childhood social withdrawal has focused primarily on its "main effects" – those dispositional and parenting characteristics that uniquely explain significant percentages

of variance. There have been few studies in which are examined the independent and interactive contributions of temperament and parenting in predicting withdrawn behavior. Cheah, Rubin, and Fox (1999) recently explored the influence of parenting and temperament at preschool age on the display of social solitude in middle childhood. Also considered in this longitudinal study was the notion that the context in which parenting behaviors occur has a direct bearing on “outcomes”. For example, the appropriateness of highly controlling parental behavior, whether positive or negative, may depend on the task environment. Therefore, in this study the researchers examined the display of parenting behaviors during both an unstructured activity (free play) and a structured situation that required parental control (a teaching task).

Among Cheah et al.’s findings were that reticence at age four years significantly predicted reticent, socially anxious behaviors at age seven years. Thus, it seems that the phenomenon of social reticence is a stable characteristic. Further, mothers' displays of highly controlling and oversolicitous behaviors during a free-play session at child age four years uniquely predicted behavioral reticence at age seven years over and above the initial level of reticence at age four years. Again, it appears as if those mothers of reticent children who are overcontrolling and overinvolved (when it is unnecessary) exacerbate child reticence. Notably, this study reveals that such parenting behaviors make a ‘contribution’ to reticence beyond the contribution of child temperament.

Gender Differences, Shyness, and Parenting

Researchers have indicated that the long-term outcomes of shyness or socially withdrawn behavior may differ for boys and girls. Specifically, it has been argued that boys’ shyness and social withdrawal may be accompanied by greater psychological “costs” than that of girls (Caspi, Elder, & Bem, 1988; Engfer, 1993; Rubin, Chen, & Hymel, 1993). This being the case, it seems

appropriate to examine the parenting characteristics associated with shyness and withdrawal in boys versus girls.

To begin with, the quality of the parent-child attachment relationship has been associated with the display of shyness for boys but not girls. Insecurely attached ('C' status) boys, but not girls, are more likely than their secure counterparts to display passive-withdrawn behaviors in early and mid-childhood (Renken et al., 1989). Among toddler and preschool-age children, Stevenson-Hinde (1989) and Engfer (1993) reported that the parents of inhibited and shy girls (but not boys) were warm, responsive, and sensitive. A subsequent study found a higher proportion of positive mother-child interactions for moderately shy girls compared to moderately shy boys (Stevenson-Hinde & Glover, 1996). In contrast, Stevenson-Hinde and Glover (1996) also found that mothers interacted more positively with extremely shy boys than they did with extremely shy girls. Thus, any sex differences obtained seemed to depend on the level of shyness or inhibition among girls and boys. Whether the authors' index of "positive interaction" could reflect aspects of oversolicitous parenting is a consideration given the Rubin et al. (1997) report that inappropriate and intrusive displays of warmth are associated with socially wary, inhibited behaviors.

In a recent study, Rubin, Cheah, and Fox (under review) found that preschool age boys whose mothers perceived them to be unable to regulate their emotions were less reticent among peers if their mothers were appropriately controlling in a structured situation that required parental guidance and support (e.g., a teaching task); for emotionally dysregulated boys whose mothers offered little support and guidance, the demonstration of reticent behavior in the peer group appeared to be exacerbated. In contrast, relations between maternal guidance and emotion dysregulation were not found for preschool girls. These findings raise the possibility that when

mothers provide guidance and support in an appropriate context, they are more likely to have an influence on their sons' social anxieties than on their daughters'. Importantly, however, these researchers reported that the use of maternal control during situations in which such behavior could be construed as intrusive and inappropriate (e.g., during free play) was associated with both boys' and girls' reticence in the peer group.

MacDonald and Parke (1984) reported that the parents of socially withdrawn preschoolers were less spontaneous, playful, and affectively positive during parent-child play than were the parents of more sociable children. During father-son interactions, they found that boys perceived by teachers as socially withdrawn, hesitant with peers, and as spectators during social activities had fathers who were highly directive and less engaging and physically playful. The findings were less clear-cut for socially withdrawn daughters.

In summary, the empirical literature suggests that inhibited/ withdrawn boys might experience different socialization histories than girls. Not only is it important to examine whether parents treat shy/ withdrawn boys differently than girls, but also whether boys respond differently than girls to parental behaviors. Noteworthy are the above described studies suggesting that mothers' and fathers' behaviors are differentially associated with boys', but not girls', displays of social reticence. The one constant among boys and girls, however, is that highly controlling parenting during situations where such control is unnecessary is associated with the display of social reticence.

Parenting and Culture

The studies described thus far were completed in North America and Northwestern Europe. Yet, there are reasons to believe that the psychological "meanings" of inhibited/shy behavior varies from culture-to-culture (e.g., Chen, Rubin, & Li, 1995). This being the case, it

would seem important to study whether the parenting correlates and associations found with inhibition/shyness/withdrawal in North American and Northwest European cultures are different when studied in other venues. On a broader scale, it would also make a good deal of sense to study whether the etiologies of behavioral problems are similar from one culture to another.

Cultural values play an enormous role in determining the meanings of behavioral adaptation and normalcy. For example, the relative adaptive nature of shyness and social withdrawal appears to vary between Western individualistic cultures and Eastern collectivistic cultures. In the former, shy and withdrawn behavior is regarded as maladaptive, reflecting social incompetence, wariness, and anxiety. Thus, it is unsurprising that some North American and Northwestern European parents encourage their children to be assertive and independent in challenging situations. Children are generally socialized to be increasingly assertive and self-reliant rather than reserved and inhibited.

In contrast, achieving and maintaining social order and interpersonal harmony are the primary concerns of both traditional and contemporary collectivistic Chinese societies. Shyness and behavioral inhibition are positively evaluated in Chinese culture because these behaviors are considered to reflect social maturity and understanding (e.g., Chen et al., 1995; Ho, 1987; King & Bond, 1985). Consequently, it has been found that shy and inhibited behaviors are valued and encouraged by teachers and peers in Chinese cultures (Chen, Rubin, & Sun, 1992; Chen et al., 1995).

As one might expect, parental beliefs and behaviors are guided by general cultural norms and value systems (Bornstein, 1991). Thus, in a recent study by Chen et al. (1998), information on child-rearing attitudes and beliefs was obtained from Chinese and Canadian mothers. Consistent with previous reports (e.g., Kagan, Kearsley, & Zelazo, 1978), Chinese toddlers were

observed to be significantly more inhibited than their Canadian counterparts. Given the Western notion that inhibition/ shyness reflects incompetence, wariness and immaturity, North American mothers reported being more protective, controlling, less encouraging of achievement, and less accepting of their inhibited toddlers. Conversely, the direction of the associations between toddler inhibition and parental attitudes was opposite in the Chinese sample: child inhibition was positively associated with acceptance and encouragement of achievement, and negatively associated with parental control. These results illustrate the notion that behavioral inhibition is a culturally bound construct.

In addition to studying East-West similarities or differences in parenting and inhibition, a few researchers have compared Northern and Southern cultures. Schneider, Attili, Vermigli, and Younger (1997) presented middle class mothers of seven-year-olds in Canada and Italy with hypothetical scenarios depicting children being socially withdrawn. The mothers were asked to indicate why they thought children might act in a withdrawn manner, how they would feel if their child displayed this behavior, and what socialization strategies they would use. The researchers hypothesized that Italian families' strong connection with the extended family would reduce the need for emotional investment in relationships outside the family; hence, these parents would regard peer relationships for their children as unnecessary, or as less important, compared to North Americans (Young & Ferguson, 1981). The authors therefore predicted that Italian parents would regard social withdrawal as less bothersome than would parents in the North American culture. Indeed, Schneider et al. (1997) found that English-Canadian mothers indicated stronger negative reactions to withdrawal than did Italian mothers.

Furthermore, the Italian data showed gender differences with mothers indicating less power assertion in response to girls' withdrawal compared with boys' withdrawal; but there was

no similar gender difference in the Canadian sample. These results support the authors' hypothesis that gender roles are likely more distinct in the Italian sample than in the Canadian sample. Italian mothers might find social withdrawal by girls (who are expected to assume domestic roles that require less assertiveness with peers) to be less troublesome than parents in the English-Canadian culture with less defined gender roles. It is difficult to interpret the lack of child gender differences with respect to Canadian parents in this study. But, it is important to note that the sample of parents was a normative one; thus, it was unlike prior research (Rubin & Mills, 1990) in which parents of inhibited or withdrawn children were studied. Moreover, where gender differences have been reported, the dependent measure was derived from observations of parental behaviors and not from questionnaires about parental beliefs.

The cross-cultural studies presented raise questions about the universality and generalizability of the findings reported by the predominantly North American studies on the relations between parenting and inhibition or social withdrawal. It seems important to be aware that, across different cultures, parental beliefs and behaviors are likely to be associated with child behaviors and outcomes in uniquely meaningful ways. Finally, we require longitudinal designs with interactional models concerning parenting and child inhibition or social withdrawal within the context of culture.

Conclusion

In conclusion, factors such as child temperament, the parent-child attachment relationship, and parenting beliefs and behaviors play a significant role in the development, maintenance, and amelioration of socially reticent or withdrawn behavior in children. Whilst some infants and toddlers may be physiologically prone to display socially fearful behavior, parents do have a role to play in the development of childhood inhibition and withdrawal and

their associated liabilities. It is the case, however, that parental beliefs and behaviors may vary depending on child gender, situational demands/ conditions, and culture. North American parents who perceive their infants/ toddlers to be socially wary lean toward an overcontrolling, overprotective parenting style when their children reach preschool age. This tendency may serve to maintain or exacerbate the inherent wariness in their children. In turn, the maintenance of a withdrawn profile may lead to negative outcomes such as peer rejection, loneliness, and negative self-regard during the mid-to-late childhood and early adolescent years (Boivin, Hymel, & Bukowski, 1995; Ollendick, Greene, Weist, & Oswald, 1990; Rubin, 1993). In other cultures, however, the continuing developmental associations between parent and child behaviors may yield different adjustment profiles.

Given that both inhibited child temperament and particular parenting beliefs and behaviors predict the display of reticent, socially withdrawn behavior in childhood, it would appear appropriate to question whether the conspiracy between inhibited, shy temperament and oversolicitous/ overcontrolling/ insensitive parenting collectively predict later social and psychological difficulty (e.g., internalizing problems). With context and culture in mind, more prospective longitudinal studies and innovative methodologies are required to answer important questions about predictions from inhibited temperament and parent-child relationship variables to specific psychosocial and behavioral outcomes. It is evident from the following table that few data exist on these fronts.

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