Morality from infancy to middle childhood
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Chapter 1

General introduction

The concept of morality (from the Latin *moralitas*, meaning manner, character, proper behavior) has intrigued philosophers and writers for centuries. This fascination for morality resulted not only in books and epistles, but also in theatrical plays. In the 15th and 16th century, morality plays were very popular in Europe. An example of a Dutch morality play from the late 15th century is *Elckerlijc*. The main character, *Elckerlijc (Everyman)*, is sent on a journey of discovery to learn a moral lesson. The lesson *Elckerlijc* learns is that from this world we cannot take with us anything we have received; we can only take what we have been given (Verbeek, 2006). Although there is a long history of *thinking and theorizing* about morality, actual *research* on morality or moral behavior only recently gained more interest, with a growing body of research from the end of the past century (Eisenberg, 1982).

Moral behavior, or behavior that conforms to an accepted standard of right and wrong, has its early beginnings in empathy, compliance, and prosocial behavior (Kochanska, 2002; Kochanska, Murray, & Coy, 1997; Van IJzendoorn, 1997). There are many definitions used for empathy, all slightly different. We consider empathy the recognizing and sharing of the emotional state of another person (Eisenberg & Fabes, 1998; Eisenberg, Spinrad, & Sadovsky, 2006; Hoffman, 1982). According to Hoffman (2000), the development of empathy starts from birth and develops in four stages. At the first stage, referred to as global empathy, the infant becomes aroused when it hears another person's crying. Because of the lack of a differentiated sense of self and others, the infant starts to cry in reflex. This behavior is visible in babies as young as one to three days old (Sagi & Hoffman, 1976; Simner, 1971). During the second year of life, the child starts to develop a self-other orientation, which leads to the second stage of empathic development, egoistic empathy. Although now children are aware that another person may be in distress, they cannot yet make a distinction between their own internal state and that of the other person. Children of this age tend to try to comfort victims in ways they would want to be comforted themselves. In the third stage of empathic development, empathy for another's feelings, children can distinguish between needs and feelings of the other person and of themselves. These role-taking capabilities emerge during the third year of life. The fourth and last stage of empathic development, empathy for another's life condition, requires the cognitive ability to form social concepts and classify people into groups. This can be seen in children from late childhood onwards (Hastings, Zahn-Waxler, & McShane, 2006).

Another aspect of moral behavior is compliance, especially committed compliance (Kochanska, 2002; Kochanska & Aksen, 1995; Kochanska, Aksen, & Koenig, 1995). Committed, wholehearted compliance reflects "the child's genuine eagerness to adopt

the caregivers agenda, accompanied by the feeling of internal obligation" (Kochanska & Aksen, 1995, p. 237). This form of compliance is distinct from situational compliance, when the child is only obedient because of the parent's sustained control. Research of Kochanska and colleagues (Kochanska & Aksen, 1995; Kochanska et al., 1995; Kochanska, Coy, & Murray, 2001; Kochanska, Tjebkes, & Forman, 1998) showed that the developmental pathways for situational and committed compliance differ, and that only committed compliance is associated with the child's internalization of rules.

Committed compliance can be measured in two situations; a situation in which a child is compliant to a request, and a situation in which a child is compliant to a prohibition (Van der Mark, Bakermans-Kranenburg, & Van IJzendoorn, 2002). Studies on the development of these capacities vary in their findings. Whereas Kochanska and colleagues found that children aged one to six find it more challenging to be compliant to parental requests than to parental prohibitions (Braungart-Rieker, Garwood, & Stifter, 1997; Kochanska, 2002; Kochanska & Aksen, 1995; Kochanska et al., 1995; Kochanska et al., 2001), Van der Mark, Bakermans-Kranenburg, et al. (2002) found the opposite in 18-months-old girls, with committed compliance to prohibitions being more difficult for the girls than compliance to parental requests, and no difference in committed compliance across the two settings at 24 months.

The last facet of moral behavior studied in this thesis is prosocial behavior, which is defined as voluntary behavior intended to help others (Eisenberg & Fabes, 1998). This behavior is performed regardless of whether the action is beneficial, neutral in its impact, or costly to the donor. Following this line, prosocial behavior should not be confused with altruism, which is behavior that comes at some cost to the donor (Grusec, Davidov, & Lundell, 2002). In the literature pertaining to prosocial behavior, four types of behavior are distinguished; helping, sharing, comforting, and cooperation (Jackson & Tisak, 2001; Rose-Krasnor, 1997). Helping and sharing behaviors are defined as acts that benefit another person, with (in the case of sharing) or without (in the case of helping) the expectation of reciprocity (Bar-Tal, Raviv, & Goldberg, 1982). Helping includes acts such as picking up dropped objects in order to return them to the owner (Eisenberg & Miller, 1987). Sharing implies giving away something that one has received without any reason and not as a reward (Staub & Noerenberg, 1981). The third type of prosocial behavior, comforting, becomes apparent in actions intended to improve the feelings of another person, for example soothing someone who got hurt (Hastings, Zahn-Waxler, Robinson, Usher, & Bridges, 2000). The last type of prosocial behavior, cooperation, may involve participants working together in a game to improve their rewards (Marcus, Telleen, & Roke, 1979). Prosocial behavior increases from

infancy to adulthood, although there is variability in magnitude, depending on the type of prosocial behavior studied and the method of measurements used (Grusec et al., 2002).

These precursors of moral behavior develop within the family context, especially within the relationship between child and primary caregiver. Individual differences in emerging morality could be ascribed to two aspects of this parent-child relationship. The first is attachment security. According to attachment theory, all infants are predisposed to become attached to their primary caregiver (Bowlby, 1969). Attachment theory makes a distinction between securely and insecurely attached children. Children who are securely attached seek the attachment figure at times of distress and use the attachment figure as a secure base for exploration and play (Bowlby, 1973). These experiences of securely attached children with their primary caregivers form the basis for the children's internal working models, or cognitive representations, in which they see themselves as lovable, competent, and worthy of care. Children who are insecurely attached develop internal working models in which the primary caregiver is unavailable, perhaps even hurtful, and they see themselves as unlovable and unworthy of care (Bretherton & Munholland, 1999; Yunger, Corby, & Perry, 2006). These attachment behavior patterns and subsequent internal working models of children with secure or insecure attachments influence their development; secure attachment is associated with positive child development, whereas insecure attachment is associated with negative child development (e.g., Greenberg, 1999; Sroufe, Egeland, Carlson, & Collins, 2005).

The second aspect of the parent-child relationship that may account for individual differences in emerging morality is parental sensitivity. If the parent is sensitive and responsive to the emotional needs of the child, the parent provides the child with a template for his or her own manner of responding (Grusec, Davidov, & Lundell, 2002; Pines & Marrone, 2003; Van IJzendoorn, 1997). The sensitive parent reacts promptly and adequately to the child's signals, does not overstimulate nor underestimate the child, and notices when the child becomes distressed or bored (Ainsworth, Bell, & Stayton, 1974). Sensitivity can be expressed in physical interaction and in verbal interaction between parent and child. During physical interaction, the highly sensitive parent is able to see things from the child's point of view; the parent picks him up when he seems to wish it, and puts him down when he wants to explore. The parent does not restrict the child's movements by physical force, but engages his cooperation by diverting him (Ainsworth et al., 1974). During verbal interaction, the highly sensitive parent is emotionally supportive and continuously reinforces the child's success by

complimenting and encouraging him (Egeland, Erickson, Clemenhagen-Moon, Hiester, & Korfmacher, 1990). The parent uses arguments as the core of reasoning with the child, without authoritarian parenting.

In sum, the present thesis examines empathy, committed compliance, and prosocial behavior as precursors of moral behavior. Empathy and compliance have been the focus of many studies, but the early development of these constructs is not well documented. Studies that do describe the development over time cover a relatively small period or use questionnaires instead of observational measures to assess empathy or compliance (Gralinski & Kopp, 1993; Kochanska, DeVet, Goldman, Murray, & Putman, 1994; Van der Mark, Bakermans-Kranenburg, & Van IJzendoorn, 2002; Van der Mark, Van IJzendoorn, & Bakermans-Kranenburg, 2002). The roots of prosocial behavior are an understudied area so far because most studies examined only concurrent relations (Eisenberg & Fabes, 1998). These roots might be found in sensitive parenting. What is lacking in the literature to date is longitudinal studies to address these issues. This thesis contributes to the field of morality by presenting the results of a longitudinal study addressing the aforementioned aspects of moral development covering a period from infancy to middle childhood.

The present study

Our study started in 1996, when mothers and their firstborn female babies of fifteen months where recruited using town hall records[1]. One-hundred-and-thirty-one mothers and their daughters participated in the first wave of data collection, when the girls had a mean age of 18 months. When the girls were on average 24 months old, the second wave of data collection took place, involving 125 of the 131 (95%) mothers and their daughters. The results of these two waves of the study were presented in the thesis of Ingrid L. van der Mark (2001)[2]. In that thesis, the development of empathy and committed compliance, and their associations with parenting, attachment, and temperamental fearfulness were described. From 18 to 24 months, empathic concern towards the mother increased, whereas empathic concern for an unfamiliar person decreased. Disappointingly weak associations were found between empathic concern and antecedent and concurrent parenting. Empathic concern for the stranger's distress could be predicted from a more fearful temperament and less attachment security (Van der Mark, Van IJzendoorn, & Bakermans-Kranenburg, 2002). Committed compliance to prohibitions as well as to parental requests increased from 18 to 24 months. Committed compliance was associated with concurrent parenting (sensitivity and

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[1] We thank the participating families for their kind cooperation.
[2] We thank Ingrid L. van der Mark for collecting and coding the 18 and 24 month data.

parental discipline), attachment security and temperamental fearfulness. When controlling for concurrent parenting, attachment, and temperament, antecedent parenting did not predict later compliance (Van der Mark, Bakermans-Kranenburg, & Van IJzendoorn, 2002).

A third wave of data collection started when the girls had a mean age of 89 months. Data were collected for 94 mother-child dyads. The studies presented in the current thesis combine the data of all three waves of data collection, thus covering a period from infancy to middle childhood (see Figure 1.1).
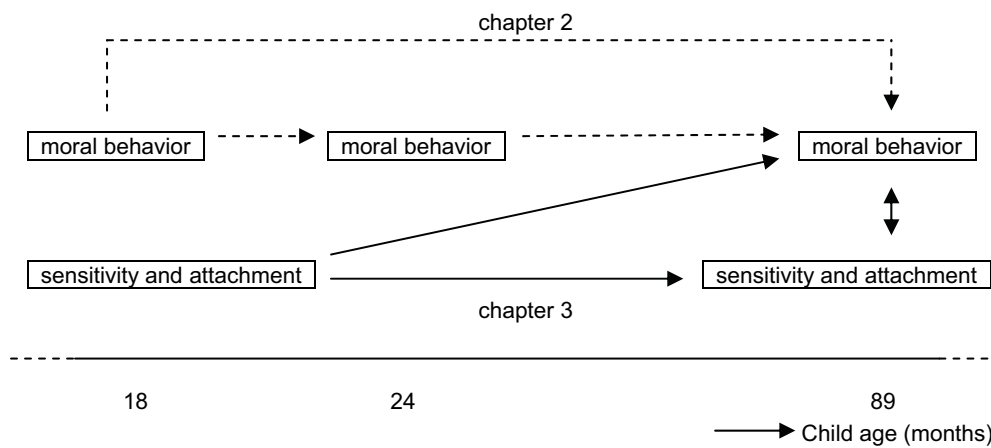

Figure 1.1 Design of the study

This longitudinal perspective has consequences for the measurements used for data collection. The constructs cannot be assessed with the same measures, but the measures need age-adequate adaptation to be reliable and valid. Assessing attachment security in middle childhood is, however, somewhat problematic. In attachment research, middle childhood is a relatively forgotten age group. Research to test the various facets of attachment theory has focused mainly on infancy, early childhood, adolescence, and adulthood. Attachment studies conducted in middle childhood cannot rely on standard measurement techniques that have been validated as well as measures used in other stages of development (Kerns, Schlegelmilch, Morgan, & Abraham, 2005). Because of the eminent importance of well validated

measures, this thesis also aims at contributing to the validation of a measure for attachment used in middle childhood.

Aims of the study

The general aim of this thesis is to describe the development of precursors of morality from infancy to middle childhood, and examine their relations to sensitive parenting. The study has three specific aims:

1. to describe the longitudinal development and stability of empathy and compliance from infancy to middle childhood, and their relations to prosocial behavior in middle childhood;
2. to investigate the role of antecedent and concurrent sensitivity and attachment security in prosocial, externalizing, and internalizing behavior in middle childhood;
3. to validate a measure for attachment representation in middle childhood.

Outline of the present thesis

In *Chapter 2* the longitudinal development and stability of empathy and compliance, and their relation to prosocial behavior are investigated. *Chapter 3* focuses on the role of antecedent and concurrent sensitivity and attachment security in prosocial, externalizing, and internalizing behavior in middle childhood. The validation of the Attachment Story Completion Task, a measure for attachment representations in middle childhood, is described in *Chapter 4*. Finally, in *Chapter 5*, the main findings of the studies are integrated and discussed.