

# Issue Brief

January 2018

## **Why Becoming a Good Parent Begins in Infancy: How Relationship Skills Are Developed throughout the Life Course**

by Edward L. Schor, MD

### **Abstract**

Learning social skills is a cumulative, lifelong task, the consequences of which can influence subsequent generations. These skills, built on temperamental differences observable early in infancy, are manifest in all stages of life, and they can be taught and reinforced at all ages and in numerous social settings. Social skill acquisition is profoundly important in attaining personal satisfaction in relationships and achieving success in many spheres of life, including parenting.

Learning effective social skills is strongly influenced by the circumstances in which social development occurs. Professionals, who are uniquely positioned to observe and help shape relationship skills, have a special responsibility to be aware of those educational opportunities and of the context in which relationship education of parents, children and youth is occurring. Policymakers should be attentive to the profound effects of their decisions on human relations and how policies and consequent programs can affect cooperation, collaboration and trust within communities.

### **Relationships and Social Skills**

The availability and quality of personal relationships is one of the strongest determinants of physical and mental health.<sup>1</sup> One classic study found that having a good social network on which to depend is associated with significantly lower rates of mortality among adults.<sup>2</sup> A longitudinal study of children in Hawaii found that, all else being equal, children able to elicit and participate in supportive relationships were more likely to thrive over the life course.<sup>3</sup>

While to some extent having the social skills to form relationships is innate,<sup>4</sup> the ability can be taught and learned. Social skills are in part interpersonal skills such as getting along and cooperating with others, but they also are individual internal skills such as emotion

regulation and flexible problem-solving. Recent interest in the lifelong effects of adverse early experiences, most of which emanate from within children's families,<sup>5</sup> has unfortunately overshadowed the extensive research and importance of the profound and lasting effects of positive experiences. As one observer noted, "Personal relationships are the fertile soil from which all advancement, all success, all achievement in real life grows."<sup>6</sup>

Getting along with other people is a learned skill, the key elements of which are consistent throughout the life course.<sup>7</sup> The functional properties of establishing relationships, whether getting along with an infant, a preschooler, a classmate, a playmate, a friend, a significant other, a spouse, or a colleague, are essentially the same.<sup>8</sup> The opportunities to learn, practice, and apply social skills, though, change with the

developmental stage and the social situation. There is great potential to improve relationships and individual and social well-being by identifying the common skills and values that underlie each of these developmental stages and consciously reinforcing previously learned positive skills in the settings in which people live, learn and work.

Early interpersonal experiences are foundational; they influence early brain development and establish the scaffolding for future neurologic growth, and thus are especially important in shaping future behaviors and developmental outcomes,<sup>9</sup> mental health, and the capacity to form relationships. Attachment theory proposes that healthy development requires that infants and young children experience a warm, intimate and continuous relationship with his or her principle

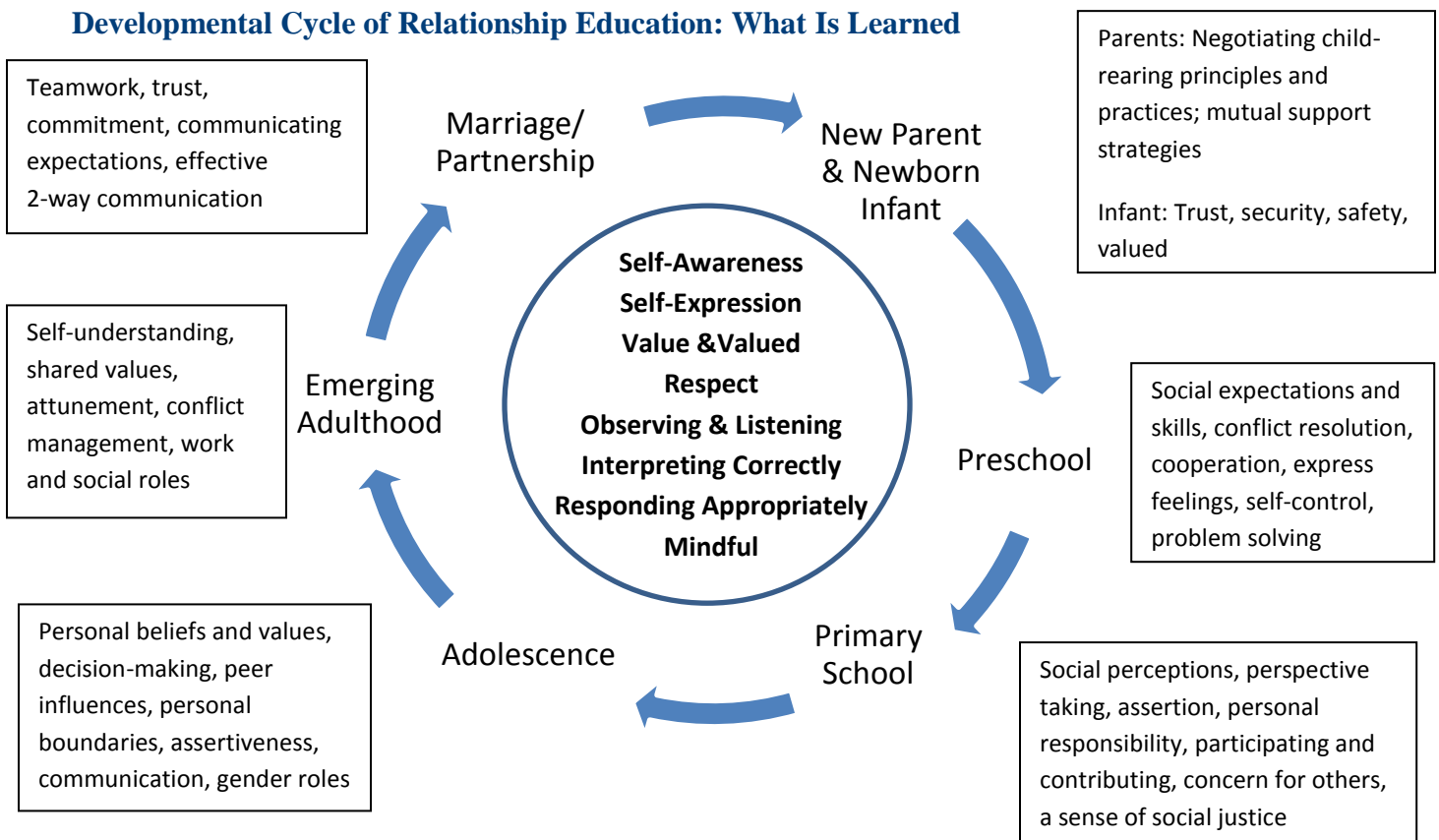
caregivers in which both find satisfaction and enjoyment.<sup>10,11</sup> Although attachment theory focuses on the critical importance of early childhood experiences, the processes of relationship skills development occurs throughout life, though with perhaps less robust effects over time.

### The Cycle of Good Parenting

Learning to be a parent begins in infancy and continues as a cyclical, multi-generational process (Figure 1). Infants learn from adults who have accumulated a lifetime of experiences that shape what and how they relate to and teach their children. Similar skills and values are common to each developmental stage, so there are numerous opportunities for them to be taught and reinforced

**Figure 1**

#### Developmental Cycle of Relationship Education: What Is Learned



## **Early Years: Trust and Attachment Relationships**

Ideally, the first relationships of life lead infants to feel safe and secure, to trust that their needs will be met, and to internalize the sense that they are valued while living in a largely undifferentiated, egocentric world. Over a period of months their relationships with their caregivers become more dualistic and mutually interactive. In the context of early parenting, it is clear that attentive, emotionally responsive, warm parenting, during which parents respond in a timely and appropriate way to their children's needs, is associated with positive developmental outcomes for children.<sup>12</sup> As a consequence, early relationships provide young children with a nascent ability to recognize others' moods, have confidence in early competencies, and begin to regulate their behaviors and emotions.

## **Preschool: Social Skills**

Early childhood educators approach their contribution to relationship education by helping children learn how to behave in social interactions, primarily with their peers. Children learn to recognize, understand, and communicate their needs and feelings, and those of other children. This social and emotional awareness facilitates being able to empathize, to understand someone else's feelings even when they feel differently from one's own. Through relationships children learn that there are social norms that can help regulate emotional and behavioral reactions, and which foster responsible decision-making, problem-solving, and developing and maintaining friendships.

## **Primary School: Developing Social Competence**

Parents continue to play a major role in relationship education of school-age children, but children's entry into the larger world, less controlled by their families, heightens the educational role of teachers, friends and other adults. It also raises the importance of personal responsibility for one's actions. Respect for others and for their rules is a central lesson in primary school that is rewarded by being respected, valued, and included. These rewards help foster self-esteem, self-awareness, and openness to others. The ability to hear and be heard helps establish and maintain friendships and to compare individual beliefs and values with those of others. Good evidence suggests that when families and schools are unable to provide the experiences necessary for sound social and emotional learning, a relationship with another caring adult can compensate.

## **Adolescence: Relationships, Romance and Social Justice**

Maintaining or improving parent-child communication can be important as adolescents' relationships with one another and with the world around them become central to their day-to-day life. Youth are interested in information about healthy relationships, only some of which are romantic. Schools tend to approach relationship education through sex education with the goal of postponing sexual relations and reducing dating violence. Although learning about safe and respectful relationships, power dynamics, peer influence, and community values often is part of these programs, there is much that teens are left on their own to discover. Adolescents learn through relationships about their own personal

boundaries, beliefs and values, and hopefully how to communicate them in ways that fosters mutually satisfying outcomes.

### **Emerging Adulthood: Significant Others; Awareness of Thoughts, Beliefs, and Feelings**

The relationships of emerging adults are opportunities to consolidate a sense of personal identity and self-understanding while exploring life possibilities, including achieving intimacy. Key skills that are solidified during this phase of development center on personal maturity, gender roles, intentionality, communication and conflict management. Formal relationship education during this period of life tends to take the form of premarital education in personal life and sometimes team-building at work. Both emphasize communication and can increase satisfaction and prevent relationship dissolutions.<sup>13</sup>

### **Marriage/Partnership: Love and Support**

Historically, relationship education focused on strengthening and maintaining marriages. The keys to success echo those required for successful relationships earlier in the life cycle. Maintaining respectful, two-way communication and perspective-taking, trusting that a commitment exists, sharing values and goals, and resolving disagreements are not themes unique to adult partnerships but recur throughout life's relationships.<sup>14</sup>

### **Parenthood: Continuing the Cycle**

Transition to parenthood can be stressful and associated with declines in relationship satisfaction.<sup>15</sup> This developmental stage emphasizes not only the relationship skills required to co-parent, but also being able to foster a sense of security within the child. The teamwork of co-parenting requires agreeing on

and coordinating child-rearing principles and practices,<sup>16</sup> emotional self-management, conflict management, problem-solving and mutual support strategies. Good parenting requires taking time to be empathetic, warm, sensitive, and responsive not only to the child, but also to one another. The strongest familial predictor of later child emotional and behavioral problems is inter-parental discord. Child health care providers are uniquely positioned to inquire about the stresses parents are experiencing, to normalize them, and help them identify coping strategies.

### **Outside the Family: Social Determinants of Social Health**

It long has been noted that outside of the relatively small world of the family, peers, friends, and close institutions such as schools and religious congregations, there are formidable forces that can enhance or, alternatively, challenge relationships.<sup>17</sup> Social forces, such as social capital (i.e., shared goals, values, and an appreciation for interdependence), can create environments that support the development and maintenance of positive relationships. On the other hand, there are forces that can distress individuals and social groups, and thus interfere with normal development and achieving desirable outcomes. Those forces themselves generally represent a failure of social relationships on both an individual and macro level. Poor child outcomes are consistently associated with the maldistribution of economic and social resources that take the form of social isolation, poverty, lack of education, unemployment, residential instability, mental illness, substance abuse, crime, and numerous other social ills. The stresses, acute and chronic, that result from these detrimental social factors limit

individuals' ability to invest the time and energy, both physical and emotional, that it takes to be attentive to and appropriately responsive to others. Lacking the experience of good relationships and/or the supportive environment to develop them, a cycle of poor relationships, discord and conflict can result.

## Conclusion

For parents and children, relating to others is both a learning and an influencing process. Patterns of relating are established early, and though they have considerable plasticity, opportunities for change decrease as children age. Approaches to enhancing relationship skills are available for nearly every life stage, yet the commonality of their core content and their cyclical course has not been appreciated. Parenting skills, taught through parent-mediated interventions, are acknowledged to affect children's development and social skills, yet the association between spousal/partner relationships and parent-child relationships has not been highlighted apart from patterns of domestic violence.

Relationship skills gained from good parent-child relationships can be reinforced in the preschool years by focusing on feelings and social skills, in primary school by attending to personal responsibility and institutional rules, in adolescence through education about mutual

respect and personal boundaries, in young adulthood and premarital counseling by exploring personal values and promoting greater communication, in marriage/partnerships by learning respect and compromise, and completing the cycle by practicing responsive parenting.

Evidence suggests that during times of transition, which can involve changes in roles, relations, routines, responsibilities, and identities, individuals are particularly susceptible to interventions to change previous behaviors.<sup>18,19</sup> Becoming a parent is one such transition during which a variety of individuals, agencies, and professionals can help families establish a positive relationship trajectory. Behavior is a developmental characteristic, and change can be facilitated at any point in the life cycle. Greater awareness of the extent to which interpersonal behaviors are related over the life course can lead to more coherent approaches to relationship education and childrearing.

Learning and applying social skills can be enhanced or impeded by the environments in which children live and develop. Professionals, policymakers, family members, friends, and members of communities all can and do shape those environments. Greater attention to supporting the kinds of social interactions that improve relationships, as well as to those that adversely affects relationships and individuals' sense of safety and self-respect, can contribute to individual growth and a more equitable and just society.

*Edward L. Schor, MD, is senior vice president at the Lucile Packard Foundation for Children's Health*

## References

1. Umberson D, Montez JK. Social Relationships and Health: A flashpoint for health policy. *Journal of Health and Social Behavior*, 2010; 51(S):S54-S66
2. Berkman LF, Syme SL. Social networks, host resistance, and mortality: A nine-year follow-up study of Alameda County Residents. *Am J Epidemiol* (1979) 109 (2): 186-204.
3. Werner EE, Smith RS. *Overcoming the odds: High risk children from birth to adulthood*. Ithaca, Cornell University Press, 1992
4. Rutter M. Resilience: Some conceptual considerations. *Journal of Adolescent Health*, 1993; 14:626-631
5. Felitti V.J., Anda R.F., Nordenberg D., et al: Relationship of childhood abuse and household dysfunction too many of the leading causes of death in adults—the adverse childhood experiences (ACE) study. *Am J Prev Med* 1998; 14: pp. 245-258
6. Stein B. (Accessed at: <https://www.brainyquote.com/quotes/quotes/b/benstein390309.html>)
7. Durlak JA, Weissberg RP, Dymnicki AB, Taylor RD, Schellinger KB. The impact of enhancing students' social and emotional learning: as meta-analysis of school-based universal interventions. *Child Development*, 2011; 82(1):405-432
8. Reis HT, Collins WA, Berscheid E. The Relationship context of human behavior and development. *Psychological Bulletin*, 2000; 126(6):844-872
9. Jones DE, Greenberg M, Crowley M. Early social functioning and public health: The relationship between kindergarten social competence and future wellness. *AJPH*, 2015; 105(11):2283-2290.
10. Bowlby, J. Maternal care and mental health. *Bulletin of the World Health Organization*, 1951; 3(3):355-533
11. Ainsworth, MDS, Blehar MC, Waters E, Wall SN. *Patterns of attachment: A psychological study of the strange situation*, 1978. Hillsdale, NJ: Erlbaum
12. Gadsden VL, Ford M, Breiner H. Committee on Supporting the Parents of Young children. *Parenting Matters: Supporting Parents of Children Ages 0-8*. The National Academies Press, Washington, DC, 2016. P.70
13. Hawkins AJ, Blanchard VL, Baldwin SA, Fawcett EB. Does marriage and relationship education work? A meta-analytic study. *J Consult Clin Psychol*, 2008; 76(5):723-34
14. Charles P, Orthner D, Jones A, Mancini M. Poverty and couple relationships: Implications for welfare policy. *Marriage & Family Review*, 2006; 39:27-52

15. Cowan CP, Cowan PA. When partners become parents: The big life change for couples. New York: Basic Books. 2000
16. Feinberg ME. Coparenting and the transition to parenthood: A framework for prevention. *Clinical Child and Family Psychology Review*, 2002; 5:173-195
17. Urie Bronfenbrenner. (1979) *The Ecology of Human Development: Experiments by Nature and Design*. Cambridge, MA: Harvard University Press. ISBN 0-674-22457-4
18. Thompson RA. The legacy of early attachments. *Child Development*, 2000;71:145-152
19. Feinberg ME, Jones DE, Roettger ME, Solmeyer A, Hostetler ML. Long-term follow-up of a randomized trial of Family Foundations: Effects on children's emotional, behavioral, and school adjustment. *Journal of Family Psychology*, 2014; 28(6):821-831

ABOUT THE FOUNDATION: The Lucile Packard Foundation for Children's Health works in alignment with Lucile Packard Children's Hospital and the child health programs of Stanford University. The mission of the Foundation is to elevate the priority of children's health care through leadership and direct investment. The Foundation is a public charity, founded in 1997.

The Foundation encourages dissemination of its publications. A complete list of publications is available at <http://www.lpfch.org/publications>

CONTACT: The Lucile Packard Foundation for Children's Health, 400 Hamilton Avenue, Suite 340, Palo Alto, CA 94301  
[cshen@lpfch.org](mailto:cshen@lpfch.org) (650) 497-8365