

## Theoretical Perspectives on Identification and Management of Emotional Disturbance among Pre-School Aged Children in Nigeria: Issues for Consideration

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### **Abstract**

*The paper assumes that the emotional development of young children is as important as their physical development and that lack of paying attention to the emotional distresses of little children can have grave consequences for society. The paper highlights some of the major theoretical perspectives on emotional development and emotional distress from early childhood, and reviews past and current research on the nature and causes of emotional disturbances of preschool children in view of the role of parents and their style of parenting. Despite the lack of research to address the emotional problems of preschool children in Nigeria, this paper points out probable obstacles to identification and management of emotional problems in preschool children and concludes with suggestions and recommendations that could help solve some of the problems especially at the family and community levels.*

### **1. Introduction**

It may seem as if the state of knowledge about emotional disturbances in early childhood is quite inconsistent as very little is known about preschool emotional problems coupled with poor agreement on classification, as well as the shortage of evidence about causes and treatment. The National Scientific Council on the Developing Child (2008), however, point out that the behaviours and characteristics associated with most mental health problems in early childhood years are often markedly different from those seen in older children and adults with psychological problems. There is also a wide range of individual differences among young children that makes it difficult to distinguish from variations of normal behaviour from persistent emotional or behavioural distress, or normal differences in maturation from developmental delays. In fact the field of infant mental health in Nigeria is a relatively new one and there seem to be very few well trained clinicians to promote infant mental health, prevention and intervention services.

Nevertheless, the search to understand and explain the emotional life of infants and toddlers, including the sources of their distresses and motivations has attracted the attention of investigators from diverse theoretical backgrounds such as psychoanalysis, Piagetian theory, social phenomenology, behaviourism, and so on, since the last century. Until now, the majority of explorations about emotional disturbances of early childhood have been approached from the developmental perspective and most of them are linked to the postulations of Sigmund Freud. These developmental theories, according to Ugochukwu (1989), help to point out appropriate and inappropriate behaviour as related to the individual's stage of development. It is against this background that this paper discusses some of the theoretical perspectives related to the identification and management of emotional disturbance among pre-school aged children in Nigeria.

## 2. The Freudian Perspective

Freud stressed the development of children in stages, with the first five years of life as the most important. His theory, which was the first, most influential and most provocative perspective of the emotional development of children stimulated research in two important directions: some researchers and theorists sought to confirm Freud's postulations because they were convinced with what he said, and others sought evidence to disprove his ideas. The important thing is that there is now better insight in understanding the emotional lives of human beings, especially from infancy.

Freud figured that the new born baby only comes into the world without an awareness of reality but when it first feels the pangs of hunger which leads to its first lesson on its encounter with the breast, it begins to develop attachment to its mother. These postulations were later confirmed by other investigators, such as Wolf (1966) who observed the sleeping and waking patterns of newborn babies and noticed patterns of distress shown by babies when there was hunger or some gastro-intestinal pain – which was only relieved by either a sucking, a belch, or bowel movement. Freud's guess was that some pain and frustration created some alertness in the baby, and Wolf showed some evidence that the relaxed baby whose emotional and bodily needs were met found the world interesting (Doyle, 1987).

Freud's theorization that emotional, social, psychic, and even physical development along with their problems happen in stages from infancy to adolescence and adulthood have been supported with evidence. For example, Breitenstein, Gross, Ordaz, Julian, Garney, and Ride (2007) found out that children's emotional and social difficulties in the first five years of life can have long term consequences because they can affect learning, school achievement, and peer relationships in later childhood. Similarly, Branner and Stephens (2006) suggest that emotions begin to develop in children earlier than other cognitive and behavioural functions, such as language and thought, particularly in the first three years of life; and are a key factor within the context of the earliest relationships that form the basis for all future development.

In learning to reach their goals or observing models, sometimes, a single failure or series of failures may devastate some children such that their performance on all subsequent problems falls apart (Dweck, 1975). Again, Freud put together complex accounts of emotional disturbances in children under the age of 5 arising from the crisis of gender identity and internalization of society's moral rules. Thus ambiguous messages from parents or significant others may likely result in confused identity (Kohlberg, 1966). It is important to note that Freud pointed to specific issues in early life that are central to personality development and emotional health. These issues, which are now the subjects of large bodies of research, point out that the process of adapting to reality is fraught with the pursuit of pleasure and the avoidance of pain, a principle also similar to 'reinforcement principle' from the systematic study of learning (Doyle, 1987).

## 3. Attachment Theory

There is no doubt that the perspective of the attachment theory draws on concepts from psychoanalysis, developmental psychology, information processing, ethology, and cybernetics (Ainsworth & Bowlby, 1991). It began with Bowlby's formulations (Bretherton, 1992) which revolutionized thinking about a child's tie to its mother and its disruption through separation, deprivation, and bereavement. Ainsworth's contribution to the theory included the area of innovative research methods of studying child emotional development, which are responsible for some of the new directions of research on child emotional and social development today.

As with many other theories in psychology, the attachment theory also went through refining processes in the face of continuous research and emerging evidence. The underlying hypotheses, however, remains that infants and newborn babies in the first few months of life develop attachment behaviours that are made up of component instinctual responses that have the function of binding the baby to the mother and the mother to the baby. These attachment behaviours (manifested in actions such as sucking, clinging, following, smiling, and crying) develop relatively independently and become increasingly integrated and focused on a mother figure during the first 6 months (Bretherton, 1992).

To further explain the intense attachment of infants and young children to a mother figure, Robertson and Bowlby (1952) identified three phases of separation response:

- Protest (related to separation anxiety)
- Despair (related to grief and mourning), and
- Denial or detachment (related to defense mechanisms, especially repression).

According to them, infants and children experience separation anxiety when a situation activates both escape and attachment behaviour but an attachment figure is not available. One key assumption and implication of the attachment theory is that the particular attachment style we learn as infants and young children typically stays with us throughout life

and affects our overall relationships with other people (Aronson, Wilson, Akert, & Fehr, 2004). Currently, the attachment theory and research are moving forward along several major directions, such as making impact on the emerging field of developmental psychopathology (Sroufe & Waters, 1976) with longitudinal attachment-based studies of families with depression, maltreatment and clinical interventions in families with low social support and behaviour-problem children (Bretherton, 1992).

#### **4. Erickson and Piaget's Perspectives**

Erickson (1950) and Piaget (1954) did not appear to have elucidated or explored the role of parents in their developmental stages and how they affect the emotional health of their children as Freud and the attachment theorists discussed – though they all point out that emotional and developmental problems in early childhood have their imprints on later life, such as in late childhood, adolescence, and even adulthood. Nevertheless, their perspectives have contributed in no small measure to the understanding of emotional disturbance amongst pre-school aged children generally.

#### **5. Risk Factors for Emotional Disturbances in Pre-Schoolers**

The causes of emotional disturbances in preschool children are likely to be multifaceted, and reflect the interplay between child and parent genetic factors, parenting styles, and the wider social and physical environments around the child. Some studies suggest quite high heritability for some preschool emotional disturbances (Eley, Bolton, O'Connor, Perrin, Smith, & Plomin, 2003). However, the risk factors appear similar to those of older children and maternal transmission of anxiety also seems to be an important factor, not only via genetic factors but also through processes such as modeling and an anxious parenting style (Luby, Heffelfinger, Mrakotsky, Brown, Hessler, & Wallis, 2003). Individual differences in children's temperament also have been linked to early emotional problems, most notably for children who are behaviourally inhibited (Hirschfield-Becker, Biederman, & Rosenbaum, 2004). This implies that temperament and child-parent factors contribute to anxiety and depression. It is also important to emphasize that children can develop mental problems at any age and no single factor places them at elevated risks.

#### **6. The Role of Parenting Styles**

Generally, research has shown that the parent-child relationships are critical to the socio-emotional development of the child. Different models of parental styles have been postulated to describe which types of parents may fit into. For instance, Denham, Mitchell-Copeland, Strandberg, Auerbach, and Blair (1997) proposed two types of parenting styles: coaches and dismissers.

- Coaches are parents that are aware of emotions (especially negative ones), talk about their children in differentiated manners, and assist their children in experiencing and regulating their emotions.
- Dismissers are parents that want to be helpful but ignore or deny their children's experience of emotions, distracting them from emotions which are "to be dealt with."

According to Denham et al., mothers who are coaches rather than dismissers have children who show greater emotional competence and understand emotions better. Generally, studies show that supportive, warm, caring, nurturing, emotional interactions with infants and young children are important for healthy growth and development while, on the other hand, unpleasant interactions with parents may evoke emotional distress in children. Past and current research also show that how children feel is as important as how they think, and how they are treated is as important as what they are taught (Melquist, 2009).

#### **7. Emotional Problems in Pre-School Children in Nigeria**

There is no doubt that children can be protected through the early identification of their emotional needs and having access to nurturing relationships with supportive and skilled caregivers as well as preventive mental health services. Good child mental health care provides both prevention and intervention. Early identification and treatment of mental health problems can improve children's well-being and can help prevent more serious difficulties in later life. However, despite the dearth of research on the issue of emotional disturbance of early childhood in Nigeria, the following reasons have been adduced to explain the failure of parents to identify and manage the emotional difficulties of their children on

time in Nigeria. These reasons may differ or vary from one region to another, but common obstacles can be identified.

- i. Relevant authorities, professionals, government, and, most especially, parents may not consider emotional difficulties among children as a high priority and there may be a lack of awareness of the huge impact that emotional difficulties have on children's lives, the society and economy.
- ii. There seem to be limited resources to equip parents, neonatal/antenatal, and pediatric services for emotional disturbance testing, assessment, evaluation, and so on. Lack of emotional care personnel and lack of professional training for/amongst health workers directly involved with parents and their young children is a hindrance to early identification and management.
- iii. Parents and other care providers for newborn babies and young children may not be aware of the benefits of emotional screening and early intervention, and so fail to understand that early intervention can make a difference to the whole of the child's life.
- iv. Nigerian parents may also fail to be aware of the rights of children with emotional disturbances, and are generally not empowered to advocate for them. The civil society on its own part tends to wait for the health care sector to take action when it could be a powerful force for societal change.
- v. There may also be a total lack or shortage of emotional care and support services to support identified children. There needs to be assessment programs that confirm and assess emotional problems, and child development needs to be supported by specialists such as child clinical psychologists, and so on.
- vi. Early identification and management of emotional disturbances of preschool children in Nigeria may suffer due to lack of preschool educational services for children who have persistent emotional problems – Nigeria and most developing countries do not offer special education programs until the primary school level.
- vii. There is also the problem of lack of referral and counter-referral network systems as a functional health network is as important as the service provision itself.
- viii. There is also a lack of supporting services to facilitate universal access and reach all the population, especially, but not limited to, high-risk groups.

## 8. The Way Forward

There may be several other obstacles to early identification and management of emotional disturbances among preschool children in Nigeria and what has been done is to focus on replicating or getting aid from foreign and developed countries – without national strategies and approved annual plan budgets, which consider the practical implications derived from implementation of the national strategies themselves. The experts on ground can take the lead to make this a reality considering the fact that there is need to increase awareness amongst parents and community members – parents and relations should play a crucial role in observing the child and how his/her emotional development is evolving. They and members of the community need to be made aware of the importance of early identification and intervention as is done for other problems such as hearing loss, etc. They can also advocate for management and intervention services.

Sometimes, the inexperience and uncertainty of parents (especially first-time parents) and those struggling with their own mental and emotional health issues, substance abuse, or other problems may stand in the way of early detection and management of the emotional problems of their children. Therefore, parent education, parent support and counseling programs should be encouraged to help parents who often feel unprepared or uncertain about being a parent. Appropriate referral services should be provided for parents who need help in handling stress, learning productive and effective parenting techniques, or dealing with their own mental health issues – because sometimes the best intervention strategy for young children with serious emotional problems may be to focus directly on the primary needs of their caregivers as suggested by the National Scientific Council on the Developing Child.

Community-based parenting programs have also been found to improve parenting skills and decrease behavioural problems without causing further problems for young children and their families. These kinds of programs aim at building on parents' strengths, promoting greater parenting skill and confidence, improve communication, and, ultimately, reduce mental health problems in young children as suggested by Breitenstein et al (2007).

Due to the realization that children (especially young children) can develop mental health problems, there is a greater need for screening services for early risks and symptoms. It will be very useful to establish the use of valid and reliable screening measures for both emotional and behavioural problems applicable to preschool children. Even though it may remain speculative to say that Nigerian parents of preschool children with emotional and behavioural problems do not often seek help for their children, whole communities may be screened, or at least there should be nation-wide campaigns to help increase participation in prevention and intervention programs for the future. There may also be

advocacy for policy change at the national level which may become the first step toward universal screening.

Ultimately, the dearth of research on the role of parents in the emotional life of young children in Nigeria calls for serious research and practical efforts to determine the prevalence of both emotional and behavioural problems in preschool aged children. Thus research must consider several factors, such as cultural, economic, environmental, and individual differences, considering the diverse nature of Nigeria. It is also important to investigate the nature and causes of mental health problems of preschool children peculiar to the Nigerian populations, as well as to delineate between genetic/biological and environmental factors such as parenting styles and attachment patterns.

## 9. Conclusion

This review has helped to point out, however, that there is a connection between a young child's early social-emotional experiences and mental health problems which requires that mental health services provided for young children should also assess and intervene, promote healthy relationships between children and their primary caregivers. Also important is the need for policy makers to pursue policy objectives that will focus on young children because early childhood mental development is as important as their physical development (and needs to be equally treated) which will have impact in later childhood, adolescence, and adulthood. Not doing so can be tantamount to great cost to society in the form of school drop-outs, employability, family stress and breakdown, high crime rate, and substance abuse.

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