Hello from the Stony Brook University Temperament Study! We hope this newsletter keeps you up-to-date on the progress of our study of children’s temperament, emotions, and their relationship to parents’ personalities. Please let us know what you would like to see in future newsletters. As a reminder, you can find all previous newsletters online at: www.sbutemperamentstudy.org.

**Progress Report**

We are pleased to announce that the Age 6 Assessment began in September! Over 50 families have already returned and started this new phase of the study. Of those families, two-thirds have completed the second laboratory visit and about half have returned the parent questionnaires and child saliva samples. We plan to continue following up with the remaining 500 families over the next two years.

**Study Components**

The Age 6 Assessment is very much like the Age 3 Assessment you already took part in, but requires less of parents’ time.

*Visit #1:* Child is videotaped playing with toys and games, and interacting with our research staff; Parent completes an interview about child’s emotional, social and behavioral development.

*Visit #2:* Parent and child are videotaped working on activities together; Child takes part in an assessment about brain activity (EEG).

*Questionnaires:* Parents complete questionnaires about child as well as their own personalities.

*Cortisol:* Parent collects saliva samples from child at home for study of relationship between temperament and cortisol, a hormone that is part of the body’s stress response system.

**A Reminder to Families: Questionnaires & Saliva Samples**

If you have already participated in the Age 6 Assessment, please complete and return the questionnaire packets and saliva samples as soon as possible in the self-addressed, stamped envelopes. If you have any questions, or need a new set of questionnaires or cortisol kit, please call Keri-Ann at (631) 632-4115. Thank you!

**Moving? New Phone? Questions/Concerns?**

We are looking forward to seeing you and your children again for the Age 6 Assessment!

If you have moved or changed your phone number, or have a question for our researchers, please call us at (631) 632-4115. You can also contact us via our email address, psychtemp@notes.cc.sunysb.edu.

Even if you have moved out of the New York area, we would still like to have you and your child participate in this phase of the study! Please contact us as soon as possible so we can determine how best to have you take part.
Social Withdrawal in Early Childhood

As part of an installment series, we plan to address issues regarding child development and temperament in each newsletter. Please contact us if you are interested in learning more about a particular topic.

Children differ considerably in the quality and quantity of their interactions with their peers. Some children are very interested in playing or interacting with other children. Others are more socially withdrawn.

Parents, teachers, and researchers have long been interested in social withdrawal in young children. Social withdrawal can mean different things for different children, and children can be socially withdrawn for different reasons.

Research by developmental psychologists suggests that there are several different types of social withdrawal in young children. Some children seem to be withdrawn because they are shy. These children want to play with others, but are hesitant to initiate social interactions or join in group play because they are anxious and fearful of rejection. Other children may be withdrawn because they enjoy solitary activities and feel less need to interact with other children.

Most research in this area has focused on the first type of social withdrawal - shyness. Shy children are wary and anxious in unfamiliar social situations, and situations in which they feel socially evaluated. They may hover on the outside of the group, looking on rather than joining in. Shyness may partly rooted in temperament, particularly a temperamental style referred to as “behavioral inhibition”.

Shyness is somewhat stable from early childhood through adolescence, although many shy children seem to “outgrow” their shyness as they get older. Some shy children experience problems with low self-esteem, loneliness, and anxiety as they grow older, although many others do not have adjustment difficulties. Shyness may be somewhat more problematic for boys than girls, perhaps because it is more inconsistent with expectations of male behavior than female behavior.

Several factors seem to influence whether shy children continue to be shy as they grow older. One factor is language ability, as having better verbal skills can contribute to more successful social interactions. A second factor may be parental overprotection. Shy children whose parents supportively encourage them to be more independent are less likely to be shy later. Finally, having a close friend can protect children against many of the negative effects of shyness.

There has been less research on the second type of social withdrawal – social disinterest. These children are withdrawn because they are content to keep their own company, and are less interested in interacting with others. Socially disinterested children spend less time talking and playing with peers, but will participate actively with other children if they find the activity appealing.

The implications of social disinterest for later development and adjustment are unclear. Some research has indicated that socially disinterested children have greater attention spans and lower levels of negative emotion. On the other hand, other researchers have suggested that at least some socially disinterested children may engage in solitary play because they feel uneasy interacting with others, and that this could potentially lead to a lag in developing social skills.

(Continued...)
More work is needed to trace the developmental pathways of different types of social withdrawal in childhood and adolescence, and to understand their effects on social, emotional, behavioral, and academic adjustment. This research will help parents, teachers, and mental health professionals determine whether intervention is warranted, and if so when and how to intervene.

To read more about research on social withdrawal in early childhood, see Robert J. Coplan and Mandana Armer’s (2007) article “A ‘multitude’ of solitude: a closer look at social withdrawal and nonsocial play in early childhood” in the journal Child Development Perspectives, volume 1, pages 26-32.

**Staff Notes**

We are very pleased to announce that both Jennie Park and Margaret Dyson began graduate school this fall. Jennie is in Philadelphia at Drexel University, and Margaret has started in the Psychology Department here at Stony Brook and will continue to work with the study (if your children keep a look-out, they might just see her around the lab!) Anna Miller and Flannery Murphy joined the staff in July as our new Temperament and EEG Lab Coordinators.

Also, Lea Dougherty, Brian McFarland, and Thomas Olino have moved on to do clinical internships at Yale University, University of Alabama, and University of Pittsburgh, respectively. We wish them the best of luck!

**Resources for Parents**

Finally, for questions or problems that may require professional attention, please contact your pediatrician or consider the following resources:

- SUNY Stony Brook, Department of Psychiatry 632-8850
- SUNY Stony Brook Psychological Center 632-7830
- Point of Woods Clinic, SUNY Stony Brook 634-7874
- Child & Family Psychological Services, Commack 543-0290
- Brookhaven Youth Bureau, Medford 451-8011
- Pederson Krag MHC, Smithtown 265-3311
- Family and Child Guidance, Deer Park 242-1366
- Family Service League, Huntington 427-3700

**We wish you a happy and safe holiday!  Thanks again!**

The Stony Brook Temperament Study