Social and Emotional Development Of

Young Child Deafblind Children

Children Aged 3 to 5

Young children aged 3 to 5 years are at the time of development. According to Hartshorne and Schmittel (2016), social development is the ability to male close, secure attachments during interactions. in deafblind children, the development is based on sensory parts like ears, touch, and vision (2016). In virtually every aspect of their world, they develop their knowledge base and competencies in social and emotional skills through hearing, touch, and vision.

The stage between 3 to 5 years constitutes psychosocial development, where it involves autonomy versus shame and doubt. A child is learning to be self-sufficient in a way such as self-regulating, toileting, feeding, and



dressing. At the age of 4 years, they enter the stage in psychosocial development, which constitutes initiative versus guilt. At this age, they learn to become more independent by broadening their skills through playing, fantasy, and exploration as well as making engagements, participation, and cooperation with peers.

However, if the child misses this developmental stage, they may tend to be fearful, socially excluded, lack interests in child activities and consequently become dependent.



Main Areas of Development

- Self-reliance: Deafblind children need
 to learn how to be free from a caregiver.
 They need to show ability and learning
 do somethings on their own.
- 2. Empathy: A child needs to identify with other people's experiences regardless of their condition. Even if they cannot hear, they can observe and see to identify with others.
- Emotional and social development: A
 child tries to manage their feelings
 towards self and others.

4. Sensory and motor development: Such activities like walking, kicking, drawing, and more are developed. By the age of 5 years, they know how to dress and undress and use most of their sensory and motors.



Red flags in social-emotional development

- i. Being dependent on the caregiver: A
 child fails to develop autonomy to do
 such things as undressing, toileting,
 or feeding.
- ii. Lack of social abilities: A child's inability to make friends and cannot cope during interactions. A socially incapable child keeps to him/herself and cannot play with children of the same age.
- iii. Sensory impairment: Although a child is deafblind, he/she should be able to use vision to see/read expressions or touch to feel. Lack of these should raise a red flag to the caregiver.





Role of the caregiver

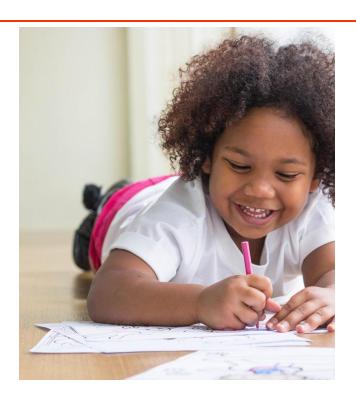
Therefore, it is the role of the caregiver to implement support secure attachment with the deafblind child at various levels at this stage, as shown below.

At the age of 3 years, the caregiver should:

- i. Create social and playful
 environment: A caregiver can initiate
 plays like football, running, hid, and
 seek to help the child become playful.

 It can also be done by buying him/her
 toys. Also, a child needs to be given a
 chance to play with other children.

 The plays build on their sensory
 relations with the environment.
- ii. Increase attachment: A deafblind child learns from the caregiver through secure and positive attachment. A caregiver needs to train on various sensory like use like ears and vision to read environments (Osofsky, 2009).
- iii. Encourage independence: A child needs to be trained on how to toilet, undress or dress, wash hands, and



more. Also, a child needs to learn how to feed him/herself.

At the age of 4 to 5 years, the caregiver should:

- i. Positive behavior support through attachment (Wittmer, 2011; Jolstead et al., 2017): A caregiver can reward a child for doing good and withdraw them for bad behavior. A child will learn to good those things that reward and hence improve on good behavior.
- ii. Foster emotional response: A
 caregiver can play with the child to
 help them experience and express
 their emotions. A child learns social
 roles and hence opportunity to
 develop social skills, expressing and
 coping with feelings, stress, and
 exercise control over their
 environment as well as making
 decisions.

References

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