7

Social Withdrawal in Childhood and Adolescence
Peer Relationships and Social Competence

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During the past three decades, the study of children's peer relationships and social skills has taken a prominent position in the fields of developmental and clinical psychology. This reflects, in part, a growing conviction that children who are socially skilled enjoy strong and positive relationships with their peers; in turn, those who are accepted by their peers and able to develop supportive friendships fare well in their social, emotional, and academic lives. It is also known that children who are socially unskilled often suffer from peer rejection and friendlessness that place them "at risk" for later socioemotional and academic difficulties (for relevant reviews, see Rubin, Bukowski, & Laursen, 2009). Why the latter group is at risk has not been well addressed from the perspective of a "grand theory" of peer interactions and relationships. Yet there is a good deal of consensus across diverse theoretical perspectives as to the many benefits of peer interactions and relationships in childhood and adolescence. In this chapter, we briefly review theories that suggest the significance of peer interactions and relationships for normal psychosocial adaptation. Thereafter, we review the empirical literature pertaining to one subgroup of children, many of whose members have been described as lacking in social competence and as having less than adequate relationships with their peers. Given the focus of this

edited volume, it should not be too surprising that this group comprises those who are socially anxious and withdrawn.

RELEVANT THEORY

Piaget (1932), in his earliest writings, portrayed children's relationships with peers, unlike their relationships with adults, as being relatively balanced, egalitarian, and as falling along a more or less horizontal plane of power assertion and dominance. It was within this egalitarian context that Piaget believed children could experience opportunities to examine conflicting ideas and explanations, to negotiate and discuss multiple perspectives, and to decide to compromise with or to reject the notions held by peers. From such interactions, Piaget argued that children came to develop the capacity for sensitive "perspective taking," or the ability to understand the thoughts, feelings, and literal viewpoints of others, which in turn was thought to form the basis for socially competent behavior, and the development of meaningful and rich social relationships (for a review, see Rubin, Bukowski, & Parker, 2006).

Mead (1934) was another early theorist who asserted the significance of social interaction for normal development. Like Piaget, Mead emphasized the importance of the development of perspective taking through peer interaction. With participation in organized, rule-governed activities with others, especially peers, children were thought to learn to consider and coordinate the perspectives of multiple others with respect to the self. Such perspective-taking experiences led to the conceptualization of the "generalized other," or the organized perspective of the social group, which in turn led to the emergence of an organized sense of self.

The classic *personality theory* of Sullivan (1953) has served as a guide for much current research concerning children's peer relationships and social skills. Like Piaget, Sullivan believed that the concepts of mutual respect, equality, and reciprocity developed from peer relationships. Sullivan, however, emphasized the significance of chumships or *best*-friendships, for the emergence of these concepts. For example, Sullivan believed that the *intimacy* of children's same-sex chumships during the juvenile years and beyond promoted psychological well-being and identity development, and contributed to later successes in romantic relationships. Sullivan's theory has proved influential in terms of the contemporary study of children's friendships and romantic relationships (e.g., Furman, Simon, Shaffer, & Bouchey, 2002), as well as the understanding of loneliness as a significant motivational force in development and adjustment (e.g., Asher & Paquette, 2003).

Learning and *social learning theory* have also stimulated current research on children's peer relationships and social skills. It was originally suggested,

and it is now known, that children learn about their social worlds, and how to behave within them, through direct peer tutelage, as well as by observing each other. In this regard, children punish or ignore non-normative social behavior and reward or reinforce positively those behaviors viewed as culturally appropriate and competent (e.g., see Chen & French, 2008, for a review).

In *ethological theory,* it is argued that there is a relation between biology and the ability to initiate, maintain, or disassemble social relationships. It is a central tenet of ethological theory that social behavior and organizational structure are limited by biological constraints, and that they serve an adaptive evolutionary function (Hawley, 2003; Hinde & Stevenson-Hinde, 1976). Taken together, these theories, and the data supportive of them, have led psychologists to conclude that peer interactions and relationships are important forces in the development of normal social relationships and social skills. But these theories are focused on the putative *benefits* of peer interactions and relationships. They "speak to" the development of competent behavioral styles and adaptive extrafamilial relationships. The theories offer little with regard to establishing how *insufficient* or *deficient* interactions and relationships can lead to maladaptive behavioral styles, or to nonexistent or dysfunctional extrafamilial relationships.

SOCIAL AND SOCIAL-COGNITIVE COMPETENCE

If peer interaction leads to the development of (1) social competence, (2) the understanding of the self in relation to others, (3) acceptance by the peer group, and (4) supportive friendships, it seems reasonable to think that children, who, for whatever reason, refrain from engaging in social interaction and avoid the company of their peers may be at risk for developmental difficulties in these areas. This premise "drives" much of the current research on social withdrawal. In the following section, we focus on the construct of social competence and examine the extant literature on the social cognitions, social behaviors, and social skills of socially withdrawn children and young adolescents.

Social Competence

Social competence may best be characterized as a "judgment call" based on an audience's view of an actor's skilled behavior repertoire (McFall, 1982). The consistent demonstration of friendly, cooperative, prosocial, successful, and socially acceptable behavior over time and across settings is likely to lead to the judgment of the actor as socially competent. Thus, the "socially competent child" is one whose behavior is judged positively by peers and

who is able to (1) become engaged in a peer group structure and participate in group-oriented activities; (2) become involved in satisfying relationships constructed upon balanced and reciprocal interactions; and (3) satisfy individual goals and needs, and develop accurate and productive means of understanding experiences with peers on both the group and dyadic levels (Rubin & Rose-Krasnor, 1992). Several common properties are shared in the aforementioned examples. First, there is reference to *effectiveness.* Second, there is the implication that the actor is able to guide the behaviors and contingent responses of others to meet his or her own needs or goals. Given these criteria, Rubin and Rose-Krasnor have defined "social competence" as the ability to achieve personal goals in social interaction, while simultaneously maintaining positive relationships with others over time and across situations. A significant feature of this definition is its implicit recognition of the importance of balancing personal desires against social consequences. This emphasis reflects the essential duality of self and other, placing the individual within a social and personal context.

Social Information Processing

Why are some children and young adolescents more socially competent than others? Rubin and Rose-Krasnor (1992) have suggested that when a child is faced with a social dilemma (e.g., how to make a new friend; how to join a play group; how to gain access to an attractive object), the following goal-oriented sequence applies: First, the child chooses a social goal. Second, he or she examines the social context; this involves interpreting relevant social cues. For example, who is in the room? Are they familiar to the child? Are they younger or older than the child? Are they perceived to be more dominant or submissive to the child? These social features are likely to influence the child's goal and strategy selection (Krasnor & Rubin, 1983). Third, the child accesses and selects strategies that aid in achieving the perceived social goal in the specific situation of concern. Fourth, the child enacts the strategy. Finally, the child evaluates the outcome of the strategy. Was the goal achieved? Did the strategy fail? If the initial strategy is unsuccessful, the child may repeat it, or he or she may select and enact a new strategy, or abandon the situation entirely.

Other relevant social cognitive models exist. For example, Crick and Dodge (1994) proposed a six-sequence model that involves (1) the encoding of social cues; (2) the interpretation of encoded cues; (3) the clarification of goals; (4) the accessing and generation of potential responses; (5) the evaluation and selection of responses; and (6) the enactment of the chosen response. Recently, Lemerise and Arsenio (2000) integrated *emotional* experiences into Crick and Dodge's social information-processing model. The inclusion of emotion into this model is important to the study of socially

withdrawn children, because it is likely that many withdrawn children react to negative social situations with fear and anxiety. These emotions, in turn, may influence the information that is attended to and the information that is recalled. And this mood-congruent information processing might reinforce withdrawn children's social schemas or "working models" that the social world is fear-inducing. Indeed, these emotional responses may explain, in part, why some children withdraw in social company.

Studies of Social Information Processing, Social Problem Solving, and Social Withdrawal

Rubin and colleagues have demonstrated that when socially withdrawn 5-year-olds are asked how they would go about obtaining an attractive object from another child, making a new friend, or obtaining help from another, they produce fewer alternative solutions, display more rigidity in generating alternative responses, and are more likely to suggest adult intervention to aid in the solution of hypothetical social problems compared to their more sociable agemates (e.g., Rubin, 1982; Rubin, Daniels-Beirness, & Bream, 1984). These findings are augmented by the discovery that social withdrawal in early childhood is associated with deficits in the ability to take the perspectives of others (LeMare & Rubin, 1987). Similar findings have been reported in a sample of anxious shy children ages 6–11 years (Banerjee & Henderson, 2001).

From a theoretical perspective, one may surmise that it is the lack of peer interaction that leads to such deficits in thinking about solving social problems and about others' thoughts, feelings, and perspectives. However, neither longitudinal nor experimental studies exist to address this issue of causality. And by mid- and late childhood, many socially withdrawn children do *not* have difficulty in proactively generating solutions to meet some social goals (e.g., object acquisition; making a new friend; seeking help from a peer) presented to them in hypothetical interpersonal dilemmas (Rubin, 1985). These findings may suggest that only minimal experiences in peer interaction or simply observing others solving their interpersonal dilemmas over time is required for the development of some adaptive ways of thinking about solutions to interpersonal problems.

But not all withdrawn children are able to generate positive and assertive social goals and strategies. And, as noted previously, it seems likely that such difficulties may be traced to socially withdrawn children's emotional *reactions* to problematic social situations that befall them and to the enactment phase of the social information-processing sequence (e.g., Stewart & Rubin, 1995). Indeed, researchers have speculated that social dilemmas may evoke emotionally dysregulated reactions in withdrawn children; their inability to regulate and overcome their wariness has been proposed to result

in an unassertive, submissive, if not avoidant, social problem-solving style and in less than successful outcomes following their attempts to make their ways through the social world. Recent research supports these speculations. For example, it has been reported that when confronted with a hypothetical event resulting in negative consequences, socially withdrawn 10-year-olds were more likely than their typical agemates to react with anger to the negative social event, and to suggest solving the dilemma through social avoidance (Burgess, Wojslawowicz, Rubin, Rose-Krasnor, & Booth-LaForce, 2006).

Studies of Social Competence In Situ

In early observational research, Rubin and colleagues paired socially withdrawn and nonwithdrawn 4- and 5-year-olds with same-sex, same-age, nonwithdrawn play partners (e.g., Rubin & Borwick, 1984; Rubin et al., 1984) and coded their behaviors during free play. The data revealed that the distribution of children's goals, the means by which they attempted to meet these goals, and the success rates of these strategies varied between the two groups. Concerning *goals,* withdrawn children were more likely to attempt to gain their partners' attention and were less likely than their more sociable counterparts to attempt to gain access to objects or to elicit action. The attention-seeking goals, which comprised over 50% of the socially withdrawn children's goals, required that their targets simply glance momentarily at the requestor; object acquisition and elicit action goals required active compliance from the targets and, as such, could be considered more "costly" to the targets. Thus, the social goals of withdrawn children appeared to be "safer" or of lower "cost" to their play partners than those of their more sociable agemates. Given the high proportion of low-cost goals, one may have predicted that the requests of withdrawn children would have been more successful than those of the nonwithdrawn children. This was not the case. Success rates for withdrawn versus nonwithdrawn children were 54% and 65%, respectively.

Other between-groups differences were revealed for the total number of requests directed at targets (withdrawn children made fewer) and the proportion of direct requests (imperatives) produced (withdrawn children made fewer). Thus, withdrawn children were observed to be less sociable and less assertive than their nonwithdrawn agemates. Given that social interaction necessarily involves at least two partners, it is noteworthy that Rubin and colleagues found that the social goals, strategies, and outcomes for the play partners of the withdrawn and typical children varied by dyadic grouping. First, the goals of the partners of withdrawn children were more costly than those of the partners of nonwithdrawn children; second, the strategies directed to withdrawn children were more direct; third, the outcomes were

more successful. These data confirm the emerging picture of the withdrawn child as an unassertive, compliant youngster whom agemates view as easily influenced and manipulated.

In a follow-up developmental study of 7- and 9-year-olds, Stewart and Rubin (1995) found that socially withdrawn children displayed fewer social initiations, produced fewer socially assertive strategies, and were less successful in their attempts compared to their more sociable agemates. Significantly, their typical agemates experienced fewer failures in meeting their social goals with increasing age, but withdrawn children did not. Furthermore, the discrepancy in failure rates for "high-cost" social goals between the two target groups increased with increasing age. Finally, the withdrawn children were less likely than typical children to reinitiate a social problem-solving attempt subsequent to failure.

Further support for this picture of social incompetence and failure is drawn from subsequent studies of the peer management attempts of withdrawn versus nonwithdrawn children. For example, Rubin and colleagues have examined the role relationships of children playing dyadically or in peer quartets (Nelson, Rubin, & Fox, 2005; Rubin, 1985). Typically, in these investigations, socially withdrawn and nonwithdrawn children have been observed interacting with other nonwithdrawn agemates. And data in these studies were coded so as to allow an analysis of the peer management attempts of the children; in short, it was noted each time a child requested (verbally or nonverbally) his or her playmate to perform or not to perform a behavior. Observers also coded when the child asserted his or her own rights, thus attempting to influence the behavior of the partner. Finally, the success or failure of each behavior management attempt was coded.

In a first study of 7-year-olds, withdrawn children were less likely to attempt to manage the behaviors of their partners; furthermore, their attempts were proportionally less likely to result in success than those of nonwithdrawn children (Rubin, 1985). In a subsequent longitudinal investigation, Nelson et al. (2005) speculated that the consistent experience of *in situ* failure to obtain peer compliance may well be interpreted by children as representing personal failure in, and rejection by, the peer group. In support, these researchers found that socially reticent behavior during early childhood (age 4 years) was negatively associated with observed peer compliance; in turn, this lack of peer acceptance/compliance predicted negative self-perceptions of social competence at age 7 years.

From Peer Failure to Social Cognition

Attribution theory provides a conceptual framework for understanding the link between social-cognitive processes and experiences with peers. The basic premise of attribution theory is that individuals' attributions about

why events occur guide their behavior. Many researchers have applied attributional theory to the study of children's social behaviors. Goetz and Dweck (1980), for instance, explored the association between children's interpretations of an experience with peers (i.e., being rejected from joining a pen pal club) and their subsequent behavior. They found that children who attributed failure to be accepted into a pen pal club to *personal internal causes* were debilitated in later attempts to gain entry into the club.

With regard to social withdrawal, Rubin and Krasnor (1986) found that extremely withdrawn children tended to blame their social failures on personal, dispositional characteristics rather than on external events or circumstances. More recently, Wichmann, Coplan, and Daniels (2004) reported that when 9- to 13-year-old withdrawn children were presented with hypothetical social situations in which ambiguously caused negative events happened to them, they attributed the events to internal and stable "self-defeating" causes. Importantly, withdrawn children more than nonwithdrawn children in the Wichmann et al. study indicated that when faced with such negative situations, they were more familiar with failure experiences, and withdrawn children reported that a preferred strategy would be to withdraw and escape (see also Burgess et al., 2006). Moreover, researchers have found that when children have anxious expectations of peer rejection, they become increasingly withdrawn over time (London, Downey, Bonica, & Paltin, 2007).

Taken together, these findings suggest that if children interpret social experiences negatively, inappropriately, and inaccurately, they may prove to be their own worst enemies. A "negative feedback loop" may evolve, wherein the initially fearful and withdrawn child comes to believe that his or her social failures are internally based, and these self-blaming beliefs are reinforced by not only the expectation of peer rejection but also the experience of failed social initiatives and peer noncompliance (e.g., Rubin, Bowker, & Kennedy, 2009). When confronted by the "real-life" social world, withdrawn children may be less able than their nonwithdrawn peers to meet their social goals, due to their self-blaming and negative social-cognitive tendencies. This "negative feedback loop" may account for the consistent finding that in the middle and later years of childhood, socially withdrawn children develop increasingly negative self-perceptions, poor self-esteem, and feelings of loneliness (e.g., Boivin & Hymel, 1997; Boivin, Hymel, & Bukowski, 1995).

Blaming the self for one's interpersonal difficulties, anxiously expecting peer rejection, experiencing failure in attempts to move successfully through the world of peers, and dealing with one's social problems through avoidance collectively can lead to a variety of negative outcomes, such as depression, low self-esteem, and increased withdrawal (e.g., Garnefski, Kraaij, &

van Etten, 2005; Reijntjes, Stegge, Terwogt, Kamphuis, & Telch, 2006). Thus, the aforementioned findings may help to explain longitudinal associations between childhood social withdrawal and adolescent internalizing problems (e.g., Bell-Dolan, Reaven, & Peterson, 1993; Boivin et al., 1995; Dill, Vernberg, & Fonagy, 2004; Hymel, Rubin, Rowden, & LeMare, 1990; NOlen-Hoeksema, Girgus, & Seligman, 1992; Rubin, Chen, Mcdougall, Bowker, & Mckinnon, 1995).

PEER ACCEPTANCE, REJECTION, EXCLUSION, AND VICTIMIZATION

Shy/withdrawn children were once believed to be, on average, sociometrically *neglected* by peers (neither much liked nor disliked; Coie & Kupersmidt, 1983; Dodge, 1983). More recent research widely indicates that shy/withdrawn children are, on average, more sociometrically *rejected* or actively disliked by peers than their nonwithdrawn agemates (Cillessen, van IJzendoorn, van Lieshout, & Hartup, 1992; Gazelle et al., 2005; Rubin, Chen, & Hymel, 1993). The discrepancy between earlier and later work is likely due, at least in part, to improvements in sociometric methodology (Terry, 2000) and an increased emphasis on examining not only different types of solitude (Rubin, Coplan, & Bowker, 2009), but also heterogeneity among shy/withdrawn children with regard to peer rejection (Gazelle, 2008).

Research on the peer relationships of shy/withdrawn children has examined not only peer rejection but also peer acceptance, exclusion, and victimization. The first two of these peer relations constructs—acceptance and rejection—are attitudinal variables. In other words, peer-reported acceptance (being well liked by peers) and rejection (being widely disliked by peers) indicate peers' preference (or lack thereof) for a child as a playmate or social partner, but do not indicate how peers actually treat or behave toward a child. In contrast, peer exclusion (being left out of peers' activities by being passively ignored or actively refused entry) and victimization (being mistreated by peers, including teasing, verbal put-downs, and physical harm) describe how a child is actually treated by peers. In many respects, the observational studies described in the previous section represent attempts to document acts of peer exclusion.

This distinction is important because, although peer attitudes and treatment are meaningfully correlated, and evidence suggests that attitudes contribute to exclusion and victimization, careful analyses reveal that these constructs play distinct roles in peer relations processes (Boivin, Hymel, & Hodges, 2001). Furthermore, it may be misleading to assume that the strength of the relation between anxious withdrawal and peer acceptance

or rejection necessarily indicates the extent of peer mistreatment of withdrawn children. For instance, evidence appears to support a stronger association between shyness/withdrawal and peer exclusion than between shyness/withdrawal and peer rejection (Gazelle & Ladd, 2003; for behavioral evidence of exclusion as documented earlier, see also Rubin, 1985; Stewart & Rubin, 1995). This is likely because factors such as peer perceptions of shy/withdrawn children as vulnerable or as easy targets for exclusion, also may contribute to exclusion, above and beyond the effects of rejection (Gazelle, 2008; Rubin, Coplan, et al., 2009). Indeed, many investigators have described socially withdrawn children as "whipping boys" (Olweus, 1993), "easy marks" (Rubin, Wojslawowicz, et al., 2006), physically weak (Hodges, Malone, & Perry, 1997), and anxiously vulnerable (Gazelle & Ladd, 2003).

Realizing the full impact of peer exclusion for withdrawn children requires that exclusion be conceptualized as not only an outcome of withdrawal but also a factor that may change the course of withdrawal itself, as well as withdrawn children's social and emotional adjustment more broadly. Gazelle and Ladd (2003) found that only those anxious withdrawn children who were excluded by peers in early grade school displayed greater stability in anxious solitude and elevated levels of depression over the course of middle childhood. Similarly, Gazelle and Rudolph (2004) have shown that over the course of fifth and sixth grade, high exclusion by peers led anxious solitary youth to maintain or exacerbate the extent of their social avoidance and depression, whereas the experience of low exclusion predicted increased social approach and less depression. These findings support a "diathesis-stress model," which posits that individual vulnerability or diathesis (anxious solitude) is activated when accompanied by interpersonal adversity (peer mistreatment).

There is empirical support for connections between anxious withdrawal and being the target of not only peer exclusion but also peer victimization (e.g., Erath, Flanagan, & Bierman, 2007; Hanish & Guerra, 2004; Kochenderfer-Ladd, 2003). At the same time, there is also support for the reverse direction of effect: Regular exposure to bullying may lead to increased fear of classmates and further withdrawal from peer interaction and school-related activities (Hoglund & Leadbetter, 2007). Importantly, recent studies using growth curve modeling found that the experience of both peer exclusion and victimization accounted for significantly greater stability or increases in the behavioral expression of anxious withdrawal from childhood through early adolescence (Gazelle & Ladd, 2003; Oh et al., 2008). Taken together, these investigations suggest a reciprocal, mutually exacerbating relation between social withdrawal (individual vulnerability) and peer mistreatment (interpersonal/environmental adversity).

Developmental Timing of Peer Difficulties in Shy/Withdrawn Children

Evidence about the timing of the onset of peer relations difficulties in shy/withdrawn children has evolved in recent years. Early work suggested that shy/withdrawn children were not sociometrically rejected by their peers in early childhood but came to be rejected by middle childhood (Rubin, Chen, & Hymel, 1993). Researchers proposed that the occurrence of late-onset rejection may be due to developmental changes in peer perceptions of shyness/social withdrawal (Bukowski, 1990; Younger, Gentile, & Burgess, 1993; see also Crozier & Burnham, 1990). Specifically, it was proposed that shy/withdrawn behavior was not as salient to young children as other forms of behavior that deviate from the norm (e.g., aggression), because it is less concrete and less likely to affect them directly. More recently, however, researchers using different methodologies have found that young children are reliable informants of shyness/withdrawal (Coplan, Girardi, Findlay, & Frohlick, 2007), and that teachers report peer rejection and mistreatment of withdrawn children as early as preschool and kindergarten (Coplan, Prakash, O'Neil, & Armer, 2004; Coplan, Arbeau, & Armer, 2008; Gazelle & Ladd, 2003; Gazelle & Spangler, 2007; Hart et al., 2000). This latter research coincides with findings that the observed display of socially reticent and withdrawn behavior in early childhood is associated with not only peer exclusion but also sociometric rejection (e.g., Hart et al., 2000; Nelson et al., 2005). Similarly, shy/withdrawn behavior, as identified by teachers and child care providers, is concurrently and predictively related to peer rejection and exclusion in kindergarten and first grade (Gazelle & Ladd, 2003; Gazelle & Spangler, 2007). Although it is difficult to establish temporal precedence of shyness/withdrawal and peer difficulties in early elementary school, because they co-occur rapidly upon school entry (Gazelle & Ladd, 2003), some evidence indicates that early childhood shyness/withdrawal predicts subsequent peer difficulties in first grade (Gazelle & Spangler, 2007).

The co-occurrence of shyness/withdrawal and peer exclusion in the early years of elementary school appears to have important implications for children's psychological adjustment in middle childhood, especially when these two conditions endure over time. Early exclusion of shy/withdrawn children predicts sustained elevation in depressive symptoms over the course of middle childhood (Gazelle & Ladd, 2003). Furthermore, similar patterns occur in the early adolescent period (Gazelle & Rudolph, 2004). For example, when compared with their nonexcluded counterparts, excluded shy/withdrawn fifth and sixth graders demonstrated heightened self-reported depressive symptoms and teacher-rated helpless social behavior over the course of a year, whereas their nonexcluded shy/withdrawn counterparts demonstrated improvements in not only these indicators of maladjust-

ment but also in prosocial/approach-oriented social behavior (Gazelle & Rudolph, 2004). These patterns suggest that the co-occurrence of shyness/withdrawal and peer mistreatment constitutes a diathesis–stress process in which children who are characterized by the initial vulnerability or diathesis of social anxiety (e.g., being worried about how rhey will be treated by peers) develop more stable and persistent social and emotional problems when their worries are confirmed by stressful peer experiences (e.g., peer exclusion). However, in the absence of peer stress, these children appear better adjusted.

Heterogeneity among Shy/Withdrawn Children in Peer Relations, Emotion, and Behavior

In a departure from the traditional focus on average adjustment of withdrawn children, researchers have recently reported a great deal of diversity in the stability and longitudinal outcomes among socially withdrawn children (Gazelle & Ladd, 2003; Gazelle & Rudolph, 2004; Oh et al., 2008). Several individual factors may affect developmental trajectories for socially withdrawn children. One such factor is the sex of the child. Several studies have indicated that shy/withdrawn boys experience more peer adversity and emotional maladjustment than do girls (e.g., Coplan et al., 2004, 2008; Gazelle & Ladd, 2003; Morison & Masten, 1991). However, this appears to be a question of degree rather than the fundamental relation between shyness/withdrawal and risk for social and emotional difficulties. Shy/withdrawn girls are clearly at risk for peer rejection and victimization (e.g., Gazelle et al., 2005). Furthermore, patterns are dependent upon age and outcome of interest. For instance, in a sample of young adolescents, shy/withdrawn girls and boys were equally likely to be excluded, but exclusion in shy/withdrawn girls predicted earlier and more sustained elevation in self-reported depressive symptoms than it did for boys (Gazelle & Rudolph, 2004).

Another individual factor that may influence trajectories of social withdrawal and the experience of peer rejection and exclusion is the inability to regulate negative emotions. In their research on the stability and consequences of behavioral inhibition (a putative precursor of shy/anxious behavior; Rubin, Coplan, et al., 2009), Fox, Rubin, and colleagues have reported that behaviorally inhibited toddlers who demonstrate physiologically and behaviorally assessed emotion dysregulation are at higher risk for subsequent social reticence (and, as described earlier, for peer exclusion; Nelson et al., 2005) at 4 years than their more emotionally regulated agemates (e.g., Fox, Henderson, Rubin, Calkins, & Schmidt, 2001; Rubin, Burgess, & Hastings, 2002; see also Fox and Reeb-Sutherland, Chapter 5, this volume).

Two recent studies suggest that highly emotional or emotionally dysregulated shy/withdrawn elementary school-age children are at greater risk for peer difficulties and for a pattern of more stable, if not increasing, shyness/withdrawal and internalizing problems (Bowker, Rubin, Rose-Krasnor, & Booth-LaForce, 2008; Booth-LaForce & Oxford, 2008). For example, Bowker and colleagues (2008) found that the expression of internalizing emotions moderated the initial and longitudinal associations between withdrawn behavior and peer exclusion. Withdrawn children who frequently displayed internalizing emotions were more likely than their well-regulated withdrawn counterparts to experience peer exclusion. Taken together, there appear to be emotional, perhaps dispositional characteristics that may help to explain variations in the extent to which withdrawn children experience peer exclusion.

Other recent work indicates that heterogeneity in peer treatment among withdrawn children is related to additional social behavior characteristics that co-occur with withdrawal. Gazelle (2008) identified several subgroups of shy/withdrawn children who differed significantly from one another in the extent to which they were agreeable, attention seeking, externalizing, or behaviorally normative. Members of these groups were identified by peers as frequently playing alone, engaging in onlooking behavior, and appearing shy and nervous around peers. Agreeable shy/withdrawn children were nonetheless perceived by peers as responsive to others' initiations and cooperative. Normative shy/withdrawn children were not perceived as displaying behaviors thar deviated from the norm (except for shyness/withdrawal). Attention-seeking shy/withdrawn children were perceived by peers as seeking attention from peers via annoying or immature (but not aggressive) behavior. Externalizing shy/withdrawn children were perceived to be aggressive (physically, verbally, and/or relationally) or hyperactive or distractible (many of these children also scored high on attention-seeking behaviors). Agreeable shy/withdrawn children demonstrated positive social adjustment, whereas normative, attention-seeking, and externalizing shy/withdrawn children demonstrated successively greater degrees of peer relations difficulties. Moreover, there were differences in the type of peer adversity experienced by different subgroups. For instance, attention-seeking shy/withdrawn children were observed to be the most ignored/excluded at recess, whereas externalizing shy/withdrawn children were the most victimized.

Summary

In this section, we have indicated that, in general, children and young adolescents who are shy and withdrawn are at risk for experiencing peer rejection, exclusion, and victimization. And it is known that the experience of peer rejection and exclusion is likely to have important implications for

their concurrent and future social and emotional development (Parker, Rubin, Erath, Wojslawowicz, & Buskirk, 2006; Rubin, Bukowski, et al., 2006). Socially withdrawn children who are mistreated by peers are at risk for subsequent consequences, such as loneliness, negative self-regard, rejection sensitivity, anxiety, and depression.

Nevertheless, a substantial number of socially withdrawn children do not experience peer rejection, exclusion, and victimization. A child × environment model of adjustment would suggest that when children who demonstrate social withdrawal (individual vulnerability) encounter peer exclusion and victimization (environmental stressors), they move further away from their peers and experience increased psychosocial difficulties (Gazelle & Ladd, 2003; Gazelle & Rudolph, 2004). Conversely, their withdrawn counterparts who do not encounter rejection and exclusion become less withdrawn over time and experience fewer adjustment problems (Oh et al., 2008).

Research is now required to explore the factors that may buffer shy, withdrawn children from experiencing rejection. Some of these factors include temperament, emotion dysregulation, multifaceted behavioral profiles, and the family environment. Chapters in this volume by Fox and Reeb-Sutherland (Chapter 5), Schmidt and Buss (Chapter 2), and Hastings, Nuselovici, Rubin, and Cheah (Chapter 6) explore these factors in depth.

FRIENDSHIP

Definitions, Functions, and Provisions

Friendships in childhood and early adolescence can perhaps best be thought of as reciprocal dyadic relationships, most often between same-age and same-sex individuals (Rubin, Bukowski, et al., 2006). The characterization of friendship as a *reciprocal* relationship means that *both* individuals must view each other as a friend. In contrast to parent–child relationships, "friendships" are considered *voluntary,* such that individuals choose to become involved in these relationships. This also means that friendships can "break up" or dissolve over time. Finally, friendships are characterized by *mutual* affection. Both individuals in a friendship should share an affection or liking for one another. Based on this definition, the assessment of friendship during any developmental period should involve two steps: (1) Individuals should first be asked to nominate or name their friends, and (2) only mutual friendship nominations should subsequently be considered (Parker et al., 2006; Rubin, Bukowski, et al., 2006).

Friendships in childhood serve to provide (1) support, self-esteem

enhancement, and positive self-evaluation; (2) emotional security; (3) affection and opportunities for intimate disclosure; and (4) instrumental and informational assistance. Friendships also (5) offer consensual validation of interests, hopes, and fears; (6) promote the growth of interpersonal sensitivity; and (7) offer prototypes for later romantic, marital, and parental relationships (Newcomb & Bagwell, 1995). In the last 30 years, the psychosocial benefits of having friends and being involved in friendships have been well-documented (e.g., Bagwell, Newcomb, & Bukowski, 1998; Ladd, Kochenderfer, & Coleman, 1996). For example, investigators have shown that children with friends report less psychological distress and higher self-esteem than do children without friends (e.g., Berndt & Keefe, 1995). Additionally, positive friendship quality has been associated with higher levels of global self-worth, more positive perceptions of social competence, and lower levels of internalizing problems (e.g., Rubin, Dwyer, Booth-LaForce, Burgess, & Rose-Krasnor, 2004; Fordham & Stevenson-Hinde, 1999; Keefe & Berndt, 1996). Given these putative benefits of friendship, it appears important to consider the friendship experiences of socially withdrawn children. Developmentally, friendships take on special significance during middle to late childhood, when friendships become more intimate and influential (e.g., Urberg, 1992; Sullivan, 1953). Accordingly, in the next section, our review focuses on the friendships of children during middle to late childhood and early adolescence.

The Friendships of Socially Withdrawn Children and Young Adolescents

Most children have at least one mutual "good" or "best" friend. For example, Parker and Asher (1993) reported that approximately 78% of children in the third, fourth, and fifth grades had at least one mutual friendship (as determined by mutual nominations of "friend"), and 55% had a mutual *best* friendship (as determined by mutual nominations of "very best" friend). Once friendships are formed, the majority of children's friendships are maintained or stable for at least 1 school year (Cillessen, Jiang, West, & Laszkowski, 2005). And children's friendships become increasingly stable with age. Berndt and Hoyle (1985), for instance, found that 50% of 5-year-olds' friendships were stable for 1 school year, compared to a 75% stability rate for 10-year-olds' friendships.

Friendship Prevalence and Social Withdrawal

Because friendship involvement has been positively associated with social competence (Buhrmester, 1990; Gest, Graham-Bermann, & Hartup,

2001), it might be expected that many socially withdrawn children are unable to form friendships. Yet this is not the case; instead, it has been shown that the majority of socially withdrawn children have at least one stable, mutual best friendship (Rubin et al., 2006). This appears to be true in both early (e.g., Ladd & Burgess, 1999) and middle to late childhood (e.g., Rubin, Wojslawowicz, et al., 2006; Schneider, 1999). For example, Rubin, Wojslawowicz, et al. (2006) found that approximately 65% of socially withdrawn 10-year-olds had a mutual best friendship, and approximately 70% of these best friendships were maintained across the academic year; these friendship involvement and stability percentages were nearly identical to those of nonwithdrawn 10-year-olds. Despite little difficulty forming at least *one* friendship, however, it is the case that anxious withdrawal has been found to predict negatively the *number* of mutual friendships during middle childhood (Pedersen, Vitaro, Barker, & Borge, 2007).

Friendship Homophily and Social Withdrawal

What might explain socially withdrawn children's apparent ease in forming a best friendship? It is known that children are initially attracted to those who are similar to them with regard to observable characteristics (race, sex) and behavioral preferences (e.g., Rubin, Lynch, Coplan, Rose-Krasnor, & Booth, 1994). And like factors associated with interpersonal attraction, "surface" characteristics, such as sex, race, and ethnicity (Aboud & Mendelson, 1996), and behaviors such as prosocial behavior, and aggressive and risk-taking behaviors (e.g., Popp, Laursen, Kerr, Stattin, & Burk, 2008; Vitaro, Tremblay, Kerr, Pagani, & Bukowski, 1997) are associated with friendship formation and maintenance.

Importantly, "friendship homophily" applies to shy and socially withdrawn behavior, as well as to internalizing distress (Haselager, Hartup, van Lieshout, & Riksen-Walraven, 1998; Hogue & Sternberg, 1995). Rubin, Wojslawowicz, et al. (2006) reported that both socially withdrawn children and their mutual best friends are more victimized than nonwithdrawn children and their mutual best friends during late childhood. Since many children may actively select similar peers as their friends, it may be that similarity in psychosocial difficulties helps to draw socially withdrawn children into friendships despite their lack of social skills. Of course, not all withdrawn children form friendships with similarly withdrawn and victimized children (e.g., Guroglu, van Lieshout, Haselager, & Scholte, 2007). Yet very little attention has been paid to the significance of variability in the charac-

teristics of socially withdrawn children's friends (for one notable exception, see Oh et al., 2008, described below).

Friendship Quality and Social Withdrawal

It is well-known that children who are socially competent are likely to become involved in friendships of positive relationship quality (e.g., Cillessen et al., 2005). Thus, it may not be too surprising that the friendships of socially withdrawn children appear to be relatively poor in relationship quality (Rubin, Wojslawowicz, et al., 2006; Schneider, 1999). In one study, withdrawn young adolescents rated their best friendships as lacking in helpfulness, guidance, and intimate disclosure; the best friends of these withdrawn young adolescents rated their friendships as involving less fun, help, and guidance than did the best friends of nonwithdrawn young adolescents (Rubin, Wojslawowicz, et al., 2006). Results from an observational study of withdrawn fifth graders and their mutual friends indicated that withdrawn children tend to be relatively restricted in verbal communication with their friends (Schneider, 1999). Due to their experiences with interpersonal failure and their social anxieties, it may be that socially withdrawn children fail to engage in the *mutual* "give and take" that is necessary for positive friendship experiences. Support for this notion is drawn from a recent study of socially withdrawn and anxious young adolescents' conceptions of their friendships (Schneider & Tessier, 2007). Socially withdrawn young adolescents were more likely than nonwithdrawn young adolescents to discuss their *own* needs when thinking about their friendships, and were more likely to cite their friendships as a source of help (Schneider & Tessier, 2007). Alternatively, Rubin, Wojslawowicz, et al. (2006) have argued that a "misery loves company" scenario may exist for socially withdrawn children and their best friends. The similarities between socially withdrawn children and their best friends may draw them together, but the friendships may be characterized by mutual misery and anxiety, and ineffective coping.

Despite the fact that withdrawn children tend to form friendships with similarly withdrawn and victimized children, and that their friendships are relatively poor in relationship quality, some evidence suggests that their friendships do contribute positively to their adjustment and psychological well-being. For example, in one study, socially withdrawn children with a mutual best friendship were perceived by peers as more sociable and popular than socially withdrawn children without a mutual best friendship (Rubin, Wojslawowicz, et al., 2006). Moreover, in a study of how socially withdrawn children interpret hypothetical negative social scenarios involving unfamiliar peers and good friends, Burgess and colleagues (2006) found

that socially withdrawn children's tendencies to blame themselves for their social difficulties were diminished when scenarios involved a good friend. And results from a recent study indicate that the presence of a high-quality friendship protects socially withdrawn children from developing internalizing problems during adolescence (Bowker & Rubin, 2008). Taken together, these results suggest that the presence of friendships, particularly those that are of high quality, provide socially withdrawn children with positive social experiences that may in turn improve their standing within the larger peer group and help to alleviate their social anxieties.

The absence of friendship, the presence of unstable friendships, and having a withdrawn friend have been identified as friendship "risk" factors for socially withdrawn children. For instance, Oh et al. (2008) identified three distinct social withdrawal growth trajectories across a 4-year period (fifth through eighth grade): (1) low stable withdrawal, (2) increasing withdrawal, and (3) decreasing withdrawal. A number of friendship factors predicted initial class membership and/or growth within each class. For example, the absence of a mutual friendship and the presence of unstable best friendships further exacerbated social withdrawal for children in the increasing withdrawal trajectory. Furthermore, children with socially withdrawn friends at the start of the study (fall of the fifth-grade school year) showed higher levels of initial social withdrawal, and having a socially withdrawn friend after the transition from elementary school into middle school (fall of the sixth-grade school year) appeared to increase children's social withdrawal over time.

Summary

Most socially withdrawn children are involved in at least one best friendship. But recent research has shown that these friendships are with others who share the salient characteristics of the socially withdrawn child; that is, the best friends are often withdrawn themselves and likewise experience victimization in the peer group. Furthermore, although research suggests that a high-quality friendship may help socially withdrawn children, many of the friendships of withdrawn children in the middle to late childhood and early adolescence appear qualitatively impoverished relative to those of their non-withdrawn agemates. Taken together, the friendships of socially withdrawn children do not augur well for them, unless those friendships happen to be with nonwithdrawn, nonexcluded, socially supportive individuals (e.g., Oh et al., 2008). How socially anxious and withdrawn children can make themselves attractive to socially competent, kind, and generous peers is certainly a question worth asking in future years. And in keeping with the position that not all socially withdrawn children are at risk for peer rejection, exclusion, and negative internalizing outcomes, researchers would do well to

examine the concomitants and consequences of socially withdrawn children who demonstrate greater or lesser friendship skills.

SUMMARY, CONCLUSIONS, AND FUTURE DIRECTIONS

In this chapter, we have examined the peer relationships and friendships of socially withdrawn children. By and large, it has been reported that many socially withdrawn children experience peer rejection and exclusion, as well as victimization. This alone should place socially withdrawn children at risk for negative psychosocial outcomes. However, recent research has also shown that the friendships of socially withdrawn children may contribute significantly to their risk status.

Importantly, there has emerged evidence that the developmental course of social withdrawal from early childhood through the adolescent period may best be described as demonstrating the "principle of multifinality," which suggests that similar initial conditions may lead to dissimilar outcomes. As Rubin and colleagues have surmised in their developing conceptual model of the precursors and outcomes of social withdrawal (e.g., Rubin, Coplan, et al., 2009), factors that may prove influential in plotting varying trajectories include biology and genetics (e.g., Calkins, Fox, & Marshall, 1996; Hariri et al., 2002), parenting and parent–child relationship experiences (e.g., Rubin et al., 2002), and contextual factors (school, neighborhood, culture; e.g., Chang, 2003; Chen, Cen, Li, & He, 2005; Gazelle, 2006; Schneider, Richard, Younger, & Freeman, 2000). In these regards, a comprehensive model of the development of shyness/withdrawal must consider many seemingly independent factors and the dynamic ways in which they interact to create a variety of developmental outcomes. This being the case, progress in the next decade of research on the peer relations of shy/withdrawn children and adolescents requires addressing the dynamic interaction of multiple levels of both individuals and their environments.

And, finally, in keeping with the view that varying factors may be responsible for the negative outcomes experienced by some socially anxious and withdrawn children, it seems timely to suggest that attention be paid to developing prevention and intervention programs. Thus far, the intervention literature has proved slim indeed (see Mychailyszyn, Cohen, Edmunds, Crawley, and Kendall [Chapter 14] and Rapee [Chapter 13], this volume); the prevention literature is practically nonexistent. Clearly, those children who demonstrate early signs of anxious withdrawn behavior (behavioral inhibition during the toddler period; social reticence in early childhood) deserve to evoke the attention of those who develop programs of prevention and intervention.

ACKNOWLEDGMENTS

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