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# PREVENTION OF RISKY BEHAVIOR IN PRESCHOOL AGE CHILDREN Vaska Zdravkova

Faculty of medical science, Goce Delcev University, Stip, Macedonia vaska.zdravkova@ugd.edu.mk

Abstract. In order to one day develop into responsible adults, full of potential, ready for quality education, employment, creating and strengthening friendships and emotional bonds and starting our own family, we go through early social, emotional and cognitive development, which created us foundations for our functioning and achievement in all areas of life. Our development is influenced by the environment, which consists of family, peers, educational institutions and community. They provide guidance and support, cultivating within us the capacity to withstand adversity, maintain strong mental health, and flourish. By fostering resilience and protective factors, they empower us to overcome challenges and avoid harmful influences that could impede our development and negatively impact the child's growth. These wrong ways manifest as behaviors (such as aggression, reticence, etc.) that express that something is wrong and that we need help. The role of adults and the community is to recognize these calls for help and intervene so that these pathways do not develop into bigger problems and prevent us from fully realizing ourselves as healthy and happy individuals. There are numerous reasons why children begin to adopt risky behavior patterns. The need for early detection of risk factors from the child's immediate environment, which may be the cause of risky behavior, becomes increasingly important, especially because children in whom risky behaviors are detected early are exposed to a risk that -will later be recognized as social incompetence. In order to prevent the occurrence of risky behaviors in children, it is necessary to act preventively. In this paper, the risky behaviors of children are defined, some of the risk factors that encourage risky behaviors are presented, and the importance of quality prevention is emphasized.

#### Key words: preschool children, child development, prevention strategies, safety

#### Introduction

Behavioral problems or disorders become more common in preschool age, with which educators must be well acquainted to be able to approach the child correctly. Although the term children's behavior disorders are often found in professional literature, for the purposes of this paper, the term children's behavior problems will be used because we are talking about children of preschool age whose behavioral deviations do not necessarily mean a disorder (Abd Rahim, M.H., et al. 2023). Every child is an explorer who explores the world around him with all his senses. Often his reactions are violent and unpredictable, which does not necessarily mean that he has a behavioral disorder. The child learns by imitating others. If a certain behavior is interesting to adults, it will reproduce it. If there is no timely reaction from the adults interacting with him, the child will accept this behavior as normal and appropriate (Bennett, N.; Blankenship, A. P. 2020). Then there is a behavioral disorder that develops according to the chronological age of the child. The number of children with behavioral problems is increasing every day. Adults (parents and educators) become powerless before the most frequent and different forms of children's outbursts (Chaturvedi S,

et. al. 2019). The inappropriate behavior of children manifests itself in all places: in the family, on the street, playground, park, store, restaurant, kindergarten. Adults are responsible for many socially unacceptable behaviors of children. They are the ones who are obliged to meet their basic needs, encourage and develop their social competence, self-confidence and self-esteem and thus train them to function successfully in society. Unfortunately, there are still many children who are neglected and who do not live in a warm and safe family and social environment (Kusev, P., et al. 2017).

The new, postmodern society imposes some new values and lifestyles on us. Families strive for a privileged position in society and the acquisition of as much material wealth as possible. Social values have completely changed: money, which was once only a means of survival and was at the bottom of the scale of social values, today rises to the very top. Basic human and spiritual values have been put in the background.

#### 1. Concept of risky behavior

Driven by their individual needs, people consciously choose behaviors that they perceive as optimal. Individuals exhibit diverse responses to their needs. Consequently, when seeking to fulfill these needs, some people may engage in behaviors that align with the criteria for conduct disorders. Which behavior we choose depends on many factors. It depends on our memories, the habits we acquired in childhood, genetic factors, etc. There is no definition that would say that this and that behavior is normal, but normality is determined according to what belongs to some average, which corresponds to some social standards. This normal behavior is what is determined as normal in a community, which means it depends on the culture in which the individual lives. Since the focus of this paper is the child, normal behavior is that which appears in most children at a certain age (Muppalla, S. K., et al 2023).

However, there are also unacceptable states or behaviors that deviate from normal behavior. Each of these behaviors has its own meaning and significance as a transitional form to a certain developmental stage, and there are numerous factors that caused these deviations. Each of us can manifest these behaviors at certain times in our lives. However, not all such behavior will be considered unacceptable. However, if these behaviors continue, then we are talking about behavioral disorders. In the literature, there are numerous definitions of conduct disorders, as well as numerous terms used in conjunction with the term conduct disorder. Some of the authors (Kusev, P., et al 2017; Quek, Y. H., et al. 2017; Chernyshov, P. V.; et. Al. 2016; Bagner, D. M., et. al. 2012). defined the term in their own way, where they listed some characteristics of those behaviors, while a generally accepted and comprehensive definition still does not exist. Each of these definitions tries to cover what behavioral disorders are, emphasizing the criteria according to which they are recognized (Hämäläinen,J. 2015).

Educational neglect, behavioral and personality disorders, and criminal behavior are terms that were once used, while recently, the terms social behavior disorders and risky behavior are used together with the term conduct disorders (Ogundele, M.O. 2018).

# 2. Risk behavior in children of preschool age

Fast lifestyle, the desire to financially provide for the family, to acquire wealth left its mark on all of us. Some values that people once paid attention to are now on the back burner. Children today spend a lot of time in educational institutions, and less and less in the fresh air and in the company of their families. Children face numerous stressful events that disrupt their healthy development. These stressful events can cause risky behaviors that affect the further development of the child. Risky behavior can appear already in preschool age, but it can be prevented and prevent their further progression.

Children at risk have a set of behaviors, causes and consequences that for these children and youth mean the danger of negative events in the future, and these children are at risk of not developing into responsible individuals (Abd Rahim, M.H.; et al. 2023). It should be emphasized that each child is an individual for himself, especially in his own way, different from other children, and with that in mind each child will react differently in stressful

situations. Every child's behavior has its own meaning. Risky behaviors often emerge when a child's developmental stage creates expectations that surpass their current capabilities. This can occur naturally as a child grows and matures or when external pressures, such as parental demands, exceed the child's readiness to meet those expectations.

The unacceptable behavior will disappear when the child adapts to the demands through the onset of maturity or when these demands weaken. There is a wide range of risky behaviors manifested by children of preschool age. In this paper we will focus only on those that are mentioned in the literature as the most common, namely: reticence, defiance (disobedience), lying, aggressiveness, depression, hyperactivity (motor restlessness) and fearfulness (Chaturvedi, S., et al. 2019).

#### 1.1.Reticence

The emotional development of the child is exposed to different influences, such as genetic predispositions, psychological traits of parents, earliest traumas (physical and psychological), family relationships, cognitive processes and ways of learning behavior (Harrewijn, A., et. al. 2023). Reticence is a consequence of unmet needs for belonging and love. The experiences that a child experiences in childhood, in the family circle can influence the formation of reticence (Clarkson, T., et. al. 2019). The child's relationship with the family and the emotional lessons and reactions that the child learns while growing up in the family are important. Excessive protection of the child deprives the child of opportunities to choose something, solve problems and make decisions. (Jarcho, J. M., et al. 2016). The child withdraws into himself and does not want to take risks in communicating with his environment. The concept of reticence or a low level of interaction is considered a behavior that limits the number of opportunities in which the child could develop appropriate social skills and can lead to deeper social eticence, i.e. it can lead to loneliness characterized by a marked lack of social connections (Mondi, C.F., et al., 2021).

### 1.2. Defiance (disobedience)

The literature mentions defiant or disobedient behavior as the most common child behavior. After birth and during early development, the child's needs and desires are met. As the child grows, certain requirements are met, but there are more and more those that cannot be satisfied. The child then learns that there are certain limitations and must learn to be patient and sometimes to give up a certain desire (Aggarwal, A., & Marwaha, R. (2022). He begins to show his choices, takes the first steps towards discovering his own "I", and in accordance with this, defiant behavior appears. These are the first forms of childhood disobedience, which we all show in life, therefore they are inevitable, but also short-lived forms of disobedient behavior (Rodriguez, M. C., et.al. 2019). When such behavior manifests itself over a longer period of time in which the child's social functioning is impaired, then it is said to be a disorder. The child resists openly - not accepting the parent's request or passively - ignoring it (Abd Rahim, M. H., et. al. 2023). This behavior is characterized by stubbornness, resistance to orders, unwillingness to compromise, give in and negotiate with adults and peers. Similarly, defiant behavior can be intentional in the way a child tests the boundaries of parents, educators, or other people by ignoring orders, arguing, or not admitting blame for their own mistakes (Liu WW, et al. 2020).

# 1.3.Lying

The child shows lying as a form of behavior in the fourth and fifth year to achieve the desired goal, justification, to hide something, to avoid punishment, unwanted work, getting a reward and so on (Liu, X., et. al. 2022). He keeps silent, distorts the truth, adds partial truth, invents details of events and stories that do not exist. Behavior is formed under the influence of genes, social and economic factors and the relationship between parents and children (Low, P. H. X., et. al. 2024). Children's lying most often develops in environments of poor educational value, where lying was not corrected, there was no reaction to the child's lie, there was no positive educational impact, or whenever the child was directly referred to a "harmless" lie. Since the child's family is the primary factor in socialization, it is considered an important reason for this behavior (van Ditmarsch, H., et. al. 2020). To prevent such behavior, it is necessary to create an educational environment in which lying is unnecessary and superfluous. With the normal development of the child, which includes the development

of moral awareness, the acquisition of a sense of fairness and the desire to respect the rules and norms of behavior, such behavior would be prevented (Ogundele, M.O., 2018).

### 1.4.Aggression

Aggression is behavior intended to cause harm and injury to a person. This behavior is one of the most common behaviors faced by parents, educators and teachers. It develops in very early childhood (Liu, J., Lewis, G., & Evans, L. 2013). More specifically, already in the first year the child possesses the qualities necessary for aggressive behavior, and already at twelve months instrumental aggression (striving to achieve external goals) manifests itself (Koyama, E., et. al. 2024). Between the first and second year, malicious aggressive behavior manifests itself, at the age of four, instrumental aggression tends to take or steal toys, and at the age of six, aggression is aimed at attacking another person. There is normal (expected), hostile and inhibited (repressed) aggression. Aggressive behavior stems from the child's social environment, primarily from the family (Zografova Y, Dimitrova EE., 2023). All forms of behavior are learned by observing and imitating important people from one's environment. Also, the child's behavior is influenced by the media, so the child can imitate what he saw on television, which is not surprising today, given that aggression is an integral part of today's cartoons, but also of television programs in general. Parents or other people in the child's environment do not react to such behavior and thus children accept it as normal behavior (Malik, F., et al 2022).

### 1.5.Depression

Depression as an emotional disorder in preschool age occurs occasionally and for a short time. A depressed child is described as a sullen, shaky, listless, quiet, withdrawn, passive, tired, anxious, crying and worried child, who sleeps restlessly and constantly complains of pain (Tavormina, M.G.M.; Tavormina, R. 2022). Such behavior can appear under the influence of genes or under the influence of the environment, that is, parents, extended family, peers or any other person in the child's environment and the social conditions in which the family lives. Lack of love, attention to the child, rejection and neglect or psychological abuse are influences that can develop depression in a child (Kidokoro, T., et. al. 2022). The death of a parent or other close person and parental separation can also result in depression. The development of depression is influenced by mutual relationships in the family. Such relationships have poor communication, increased hostility, lack of joint activities, and strained sibling relationships. (Liu WW, et al. 2020).

# 1.6.Hyperactivity (motor restlessness)

The literature also mentions hyperactivity, that is, motor restlessness as a form of risky behavior in children. Motor restlessness occurs between the second and fourth year as a normal phenomenon during the child's development (Helle-Valle, A., et. al. 2015). But if these disorders last too long, even after the fifth or sixth year of life, they are a sign of a certain immaturity that manifests itself in other areas. The child's impulsiveness and short attention span are reflected in the child's acquisition of social skills, knowledge, making and maintaining friendships (Athanasiadou, A., et. al. 2020). The child has the ability to acquire all the skills he needs for daily functioning, but his impulsiveness and short attention span prevent him from doing so, so the child needs help. In order to diagnose hyperactivity at all, it must be reflected in three situations: at home, at school (kindergarten) and in a social context. The lack of structure in the child's environment, the observation of inappropriate behavior, the disorganization of life habits in one's own home, the inappropriate interaction between parents and children are factors that contribute to the lack of self-control in the child. Hyperactivity needs professional, psychological help accompanied by a professional, guided educational process that includes parents, educators (teachers) and social pedagogues (Addanki, S.S.; et. al 2023).

### 1.7.Fearfulness

Fear is the first emotion that develops in a child's life. Specifically, from the eighth month to the second year, the child is afraid of separation from the parent, from the second to the fourth year, the child is afraid of the dark and animals, from the fourth to the sixth year, the child is afraid of inexplicable sounds, and from the sixth year the child is more afraid of some real fears, like injuries and natural disasters. The appearance of fear is part of the child's development and is an expression of emotional disturbance if it is intense and long-lasting (Liu, R.; Bell, M. A. 2020).

A timid child feels helpless, sees danger in everything, does not find the energy to resist, is afraid to do something on his own, is afraid of unknown situations, people, showing his own knowledge, abilities or skills (Nimphy, C.A.; et. al. 2023). By avoiding certain situations, the child additionally loses from acquiring new skills and knowledge, does not take risks, does not explore and thus, because he lacks certain skills, he increasingly avoids unknown situations because he does not have the necessary experience for communication with the environment. In this way, the child is deprived of the necessary knowledge, skills and abilities and ultimately of his own achievement (Broeren, S.; et al. 2019). It can be a result of the parent's educational style, more precisely authoritative, where the parent sets high demands that the child is not up to and chooses intimidation as an educational method. When this behavior appears, it is necessary to gradually expose the child to situations, persons and objects that cause fear in him, and this is called desensitization. The absence of such access further causes phobias (such fear interferes with the functioning of the individual; going to the dentist, flying, social phobias, claustrophobia) and panic fear (intense fear of sudden danger) (Ogundele M.O. 2018).

Risky forms of behavior prevent children from functioning successfully in society. Children who do not develop at least minimal competence in social relationships, especially with peers, are at risk of manifesting as social incompetence later in life. Children who do not achieve an adequate level of social competence in early childhood, puberty, adolescence and adulthood may develop a negative attitude towards others, which is manifested in rigidity, selfishness, stereotyping, authoritarianism and in behaviors that are recognized as: juvenile delinquency, academic failure, behavioral disorders, etc. (Vahedi, S.; et al 2012).

# 2. Prevention of risky forms of behavior

The prevention of risky forms of behavior is a challenge for everyone: the family, the kindergarten and the local community. Prevention is considered a process that aims to "reduce the incidence and prevalence of conduct disorders and risky behavior in children and youth." When talking about children of preschool age, then prevention means investing in the quality of life of the child during his stay in kindergarten Cibáková, D., et al. 2021). The procedures by which it would be achieved include: encouraging knowledge, competences and skills, self-esteem and self-confidence, encouraging skills to deal with life situations, encouraging support systems in the environment of family, school, workplace and community, and encouraging a healthy environment in the community (Pina, A. A.; Gonzales, N. A. 2014).

# 2.1.Family

The family is the basic educational and social community. Its task is not limited only to the biological-reproductive or economic function, but is also a significant social category in which individuals satisfy their individual and collective needs: the need for love, care and security; the need for confidence and encouragement; a sense of belonging, receiving and giving. It establishes complex emotional-social relationships that have a significant impact on the subsequent overall life of each individual. The family has a great responsibility towards the child. It is the place where the child acquires the first knowledge, develops skills, adopts values and norms of behavior. Through family relationships, the child builds an image of himself, as well as of other people. The positive aspects that the child receives from his family will create the foundations for a healthy overall development of the child (Paclikova,K., et.al. 2019).

Today's fast-paced lifestyle leaves a mark on a child's development. There are many factors that can shake the family and the child's development (unemployment, broken family relations, illness, etc.). Parenting in such an atmosphere cannot be successful and high-quality, especially since no one tries to prepare future parents for such a responsible and hard work. Brinkman,S.A.; et. al. 2017). Unfortunately, the family environments in which children grow up are not always supportive and caring. Every day there are more and more families in which bad family relations, quarrels, conflicts and numerous other forms of violent behavior prevail. In such families, children are neglected, exposed to stress and violence and are therefore more prone to adopting and manifesting various forms of risky behavior (Wang, S. M., et. al 2024). Since parenting is a responsible and complex job, parents should acquire new knowledge and skills, change their behavior or continuously work on improving parenting. The positive aspects that a child receives from his family will create the foundations for a healthy overall development of the child (Siraj, I., et.al. 2023).

Therefore, in order for the child through the family to develop into a healthy and complete person, certain strategies are needed that will include support for parents, which will prepare them for parenthood. In addition to enabling the healthy development of the child, this would also prevent the occurrence of risky behaviors that would lead to some more serious disorders. Such strategies that would be implemented through programs include supporting families in their parenting role, strengthening the family, promoting child development, connecting the family to the wider community, and meeting the basic needs of the family. These programs will include parent training, children's social skills training, and academic assistance.

Alternatives to such programs would be parent training, parent education, support groups, and connecting families, educational institutions, and communities. Schools for parents are often visited by educators, teachers and teachers who are aware of their ignorance. These types of parenting programs are already being implemented in many countries such as Germany, Great Britain and Austria. Such educations are the only places where parents today can get answers to their questions about upbringing, relationships and communication, which contributes to the improvement of relations between parents and children, partnership relations of parents, but also relations in the immediate and wider social community (neighborhood, community, workplace) (Filipović, I. 2009).

#### 2.2.Kindergarten

Preschool age is an important part of children's development. Through its programs, it focuses on the development of the child's abilities, the awareness of the strengths, the strengthening of self-confidence and self-esteem, the development of the interests, the power and the initiative and the independence of the child. By creating a pleasant and positive atmosphere by satisfying children's needs and respecting children's individuality, organizing stimulating and creative activities and observing deviant behaviors, the educator encourages the positive development of the child and notices in time behaviors that can hinder this healthy development (Schell, A., et al. 2015). After the parents, the key person in the child's life is the educator. A professional and competent person who, during his work with children, creates incentives for the child's development in kindergarten, thereby satisfying his interest and need for learning. He especially recognizes the strengths and weaknesses of each child, respects their individual differences and, with this in mind, creates stimulation in the environment.

The role of the preschool institution, in addition to encouraging the healthy development of children with a stimulating and cheerful environment, is also to identify deviant behavior of children, that is, to identify risk factors that negatively affect children's development. Therefore, educators today are in a situation of constant learning, creating new knowledge, new skills, preparing activities for a stimulating environment and, finally, cooperation with parents and the community. With a professional educator, social and emotional problems and the risks of behavioral deviations can be reduced or eliminated. Today, preschools are places where more and more investments are made in programs that strengthen positive development, and preventive programs that include children and parents who are at risk, and finally professional development of educators and other professionals and such a way of working in preschool. institutions bring positive movements (Conroy, M. A., et al. 2018).

### 2.3.The local community

A community consists of people who live together in an area, socialize together, share problems and have common interests. The local community is central to the social and emotional development of children. People need companionship with other people and the emotional security that comes from a sense of belonging to a social group whose members also share ways of behaving (Simões, A., et al 2022). Therefore, the lack of a sense of belonging to the community can leave a deep mark on the social and emotional development of the child. This lack of belonging stems primarily from the family home where the foundations of attachment have not been laid. Due to the lack of emotional touch, attention and love, first from the mother and later from other family members, in the first three important years of a child's life, healthy attachment does not develop, which further affects relationships with peers and the community (Donald, K. A., et al 2019).

There are six dimensions of community development: social, economic, political and cultural development, environmental development and personal/spiritual development. These are the factors that ensure a normal life for every member of the community. Therefore, every member of the community must be provided with security (protection from negative influences such as theft and violence), economic security (through employment), adequate housing, health care and a warm family environment. It is important that every person can live normally and safely in his home, with health care and employment, all in order to satisfy basic life needs. Prevention from a community perspective involves changes in the conditions that can lead to the emergence of problems in the community that ultimately affect the quality of children's development. It would be a reduction in unemployment, a lack of quality activities that encourage communication between people and other situations that can cause individual problems for children and young people. This means that risk factors are reduced and the impact of protective factors is increased, which would reduce or eliminate the impact of risk factors. This would be increasing employment, activities that encourage communication between people in the community, support for parents, counseling parents through "parent training", courses for pregnant women and all those courses and trainings that enable parents to be informed and provide sufficiently good care for children, that is, good pre-school facilities. This creates a connection between community members, the connection of kindergartens, schools and individuals, who, acting positively, create a positive environment for the quality development of children (Stülb, K., et al. 2019).

# Conclusion

Children's development can be shaken by negative foundations and cause certain risky behaviors to appear. These are behaviors such as reticence, defiance, lying, aggressiveness, depression, hyperactivity and fearfulness. The reasons are primarily found in the family environment, which has not laid a positive foundation for the development of social and emotional development. Such children did not receive the necessary attention, love, positive example, healthy, positive and open communication full of support. The family also did not receive positive influences from communities whose role is to care for their members. By implementing preventive measures, we can significantly decrease or even eradicate these dangerous behaviors. Educational campaigns and awareness programs can help individuals understand the consequences of these risky actions and choose safer alternatives. Community-based initiatives can foster a sense of responsibility and support individuals in making healthier choice. Addressing underlying mental health issues can reduce the likelihood of engaging in risky behaviors.

Prevention includes employment, activities and training that prepare parents for parenting, and activities that connect members and care for each other. Kindergarten, a

cornerstone of a child's early development, should prioritize the professional growth of its educators and staff. By investing in continuous learning and training, these professionals can cultivate a nurturing and stimulating environment. Through creative activities and a positive atmosphere, kindergarten can foster a love of learning and equip children with the tools they need to explore and acquire new knowledge. A supportive and caring environment is essential for a child's well-being. When faced with challenges, children need emotional support and reassurance. To ensure a child's positive development, mental health, and resilience, it's crucial for the family, kindergarten, and local community to work together. By collaborating, these three key influences can create a protective environment that mitigates risk factors and helps children stay on a healthy developmental path.

Emphasizing the role of emotional support:

- Emotional support is a cornerstone of child development, providing a safe haven during challenging times and fostering resilience.
- By offering comfort and assistance, we can help children navigate difficulties with greater ease and confidence.

Focusing on the benefits of emotional support:

- Emotional support can alleviate stress, boost self-esteem, and promote healthy coping mechanisms.
- Children who receive emotional support are more likely to develop positive relationships, build trust, and achieve their full potential.

Highlighting the importance of emotional support in specific contexts:

- During times of transition, such as starting kindergarten or experiencing a family change, emotional support is especially crucial.
- When faced with adversity, such as bullying or academic struggles, children need a strong support system to help them overcome challenges.

Collaboration is essential for creating a supportive and nurturing environment for children.

• By working together, families, kindergartens, and communities can form a strong network of support.

Focusing on specific aspects of collaboration:

- Effective communication and shared goals are key to successful collaboration among families, kindergartens, and communities.
- Regular meetings, joint activities, and information sharing can strengthen partnerships and foster a sense of community.

Highlighting the benefits of collaboration:

- Collaboration can lead to improved outcomes for children, such as enhanced academic performance, social skills, and emotional well-being.
- When families, kindergartens, and communities work together, children feel valued, supported, and connected.

# References

- Abd Rahim, M. H., Ibrahim, M. I., Ab Rahman, A., Yaacob, N. M., & Hashim, N. S. F. (2023). Emotional and Behavioural Problems among Preschool Children in Northeast Peninsular Malaysia: Parent Report Version. *Healthcare (Basel, Switzerland)*, *11*(13), 1828. https://doi.org/10.3390/healthcare11131828
- Addanki, S. S., Chandrasekaran, V., & Kandasamy, P. (2023). Attention Deficit Hyperactivity Disorder in Preschool Children: A Cross-Sectional Study of Clinical Profile and Comorbidity. *Indian journal of psychological medicine*, 45(3), 257–262. https://doi.org/10.1177/02537176221127642
- Aggarwal, A., & Marwaha, R. (2022). Oppositional Defiant Disorder. In *StatPearls*. StatPearls Publishing.
- Athanasiadou, A., Buitelaar, J.K., Brovedani, P. *et al.* Early motor signs of attention-deficit hyperactivity disorder: a systematic review. *Eur Child Adolesc Psychiatry* **29**, 903–916 (2020). https://doi.org/10.1007/s00787-019-01298-5

Zdravkova, V. (2024). PREVENTION OF RISKY BEHAVIOR IN PRESCHOOL AGE CHILDREN. Vospitanie- Journal of Educational Sciences Theory and Practice, Vol. 19, No. 1, 2024

- Bagner, D. M., Rodríguez, G. M., Blake, C. A., Linares, D., & Carter, A. S. (2012). Assessment of behavioral and emotional problems in infancy: a systematic review. *Clinical child and family psychology review*, 15(2), 113–128. https://doi.org/10.1007/s10567-012-0110-2
- Bennett, N., & Blankenship, A. P. (2020). Behavioral problems in children. In L. T. Benuto, F. R. Gonzalez, & J. Singer (Eds.), *Handbook of cultural factors in behavioral health: A guide for the helping professional* (pp. 419–430). Springer Nature Switzerland AG. https://doi.org/10.1007/978-3-030-32229-8\_29
- Brinkman, S. A., Hasan, A., Jung, H., Kinnell, A., Nakajima, N., & Pradhan, M. (2017). The role of preschool quality in promoting child development: evidence from rural Indonesia. European Early Childhood Education Research Journal, 25(4), 483-505. https://doi.org/10.1080/1350293X.2017.1331062
- Broeren, S., Hudson, J. L., & Rapee, R. M. (2019). Fear and anxiety in young children and their assessment. In R. DelCarmen-Wiggins & A. S. Carter (Eds.), The Oxford handbook of infant, toddler, and preschool mental health assessment (2nd ed., pp. 389–416). Oxford University Press. https://doi.org/10.1093/oxfordhb/9780199837182.013.17
- Chaturvedi S, Shrivastava N, Agrawal A, Shrivastava J. Prevalence of children at risk of behavioral problems among preschool children between the ages of 3 and 6 years. Indian J Child Health. 2019; 6 (12):658-661. Doi: 10.32677/IJCH.2019.v06.i12.005
- Chernyshov, P. V., Ho, R. C., Monti, F., Jirakova, A., Velitchko, S. S., Hercogova, J., & Neri, E. (2016). Gender Differences in Self-assessed Health-related Quality of Life in Children with Atopic Dermatitis. *The Journal of clinical and aesthetic dermatology*, 9(8), 19–24.
- Clarkson, T., Eaton, N. R., Nelson, E. E., Fox, N. A., Leibenluft, E., Pine, D. S., Heckelman, A. C., Sequeira, S. L., & Jarcho, J. M. (2019). Early childhood social reticence and neural response to peers in preadolescence predict social anxiety symptoms in midadolescence. *Depression and anxiety*, *36*(8), 676–689. https://doi.org/10.1002/da.22910
- Conroy, M. A., Sutherland, K. S., Algina, J., Werch, B., & Ladwig, C. (2018). Prevention and Treatment of Problem Behaviors in Young Children: Clinical Implications From a Randomized Controlled Trial of BEST in CLASS. *AERA Open*, *4*(1). https://doi.org/10.1177/2332858417750376
- D. Cibáková, T. Čech, T. Hormandlová (2021) THE EXPERIENCE OF IMPLEMENTATION OF PRIMARY PREVENTION OF RISK BEHAVIOUR IN NURSERY SCHOOLS, ICERI2021 Proceedings, pp. 5077-5084.
- Donald, K. A., Wedderburn, C. J., Barnett, W., Nhapi, R. T., Rehman, A. M., Stadler, J. A. M., Hoffman, N., Koen, N., Zar, H. J., & Stein, D. J. (2019). Risk and protective factors for child development: An observational South African birth cohort. PLoS medicine, 16(9), e1002920. <u>https://doi.org/10.1371/journal.pmed.1002920</u>
- Filipović, I. (2009).Uloga obitelji u prevenciji poremećaja u ponašanju. U: R.Galić i M.Koren Mrazović (Ur.), Prevencija poremećaja u ponašanju - stanje i perspektive. (str.23-27).
  Zagreb: Grad Zagreb : Povjerenstvo Vlade Republike Hrvatske za prevenciju poremećaja u ponašanju djece i mladeži i zaštitu djece s poremećajima u ponašanju.
- Hämäläinen, J. (2015). Defining Social Pedagogy: Historical, Theoretical and Practical Considerations. *The British Journal of Social Work*, *45*(3), 1022–1038. http://www.jstor.org/stable/43687882
- Harrewijn, A., Ruiz, S. G., Abend, R., Haller, S. P., Subar, A. R., Swetlitz, C., Valadez, E. A., Brotman, M. A., Chen, G., Chronis-Tuscano, A., Leibenluft, E., Bar-Haim, Y., Fox, N. A., & Pine, D. S. (2023). Development of Neural Mechanisms Underlying Threat Processing: Associations With Childhood Social Reticence and Adolescent Anxiety. *Biological psychiatry global open science*, *3*(4), 893–901. https://doi.org/10.1016/j.bpsgos.2023.01.008
- Helle-Valle, A., Binder, P. E., & Stige, B. (2015). Do we understand children's restlessness? Constructing ecologically valid understandings through reflexive

cooperation. International journal of qualitative studies on health and well-being, 10, 29292. https://doi.org/10.3402/qhw.v10.29292

- Jarcho, J. M., Davis, M. M., Shechner, T., Degnan, K. A., Henderson, H. A., Stoddard, J., Fox, N. A., Leibenluft, E., Pine, D. S., & Nelson, E. E. (2016). Early-Childhood Social Reticence Predicts Brain Function in Preadolescent Youths During Distinct Forms of Peer Evaluation. *Psychological science*, *27*(6), 821–835. https://doi.org/10.1177/0956797616638319
- Kidokoro, T., Shikano, A., Tanaka, R., Tanabe, K., Imai, N., & Noi, S. (2022). Different Types of Screen Behavior and Depression in Children and Adolescents. *Frontiers in pediatrics*, 9, 822603. https://doi.org/10.3389/fped.2021.822603
- Koyama, E., Kant, T., Takata, A., Kennedy, J. L., & Zai, C. C. (2024). Genetics of child aggression, a systematic review. *Translational psychiatry*, *14*(1), 252. https://doi.org/10.1038/s41398-024-02870-7
- Kusev, P., Purser, H., Heilman, R., Cooke, A. J., Van Schaik, P., Baranova, V., Martin, R., & Ayton, P. (2017). Understanding Risky Behavior: The Influence of Cognitive, Emotional and Hormonal Factors on Decision-Making under Risk. *Frontiers in psychology*, 8, 102. https://doi.org/10.3389/fpsyg.2017.00102
- Liu WW, Wu XY, Tao SM, et al. [Emotional and behavioral problems associated with healthrisk behaviors in preschool children]. Zhonghua yu Fang yi xue za zhi [Chinese Journal of Preventive Medicine]. 2020 Nov;54(11):1255-1260. DOI: 10.3760/cma.j.cn112150-20200706-00975. PMID: 33147926
- Liu, J., Lewis, G., & Evans, L. (2013). Understanding aggressive behaviour across the lifespan. *Journal of psychiatric and mental health nursing*, *20*(2), 156–168. https://doi.org/10.1111/j.1365-2850.2012.01902.x
- Liu, R., & Bell, M. A. (2020). Fearful Temperament and the Risk for Child and Adolescent Anxiety: The Role of Attention Biases and Effortful Control. *Clinical child and family psychology review*, *23*(2), 205–228. https://doi.org/10.1007/s10567-019-00306-z
- Liu, X., Shang, S., Zanette, S., Zhang, Y., Sun, Q., & Sai, L. (2022). An experimental investigation of association between children's lying and behavior problems. *Frontiers in psychology*, *13*, 982012. https://doi.org/10.3389/fpsyg.2022.982012
- Low, P. H. X., Kyeong, Y., & Setoh, P. (2024). Parenting by lying and children's lying to parents: The moderating role of children's beliefs. *Journal of experimental child psychology*, 240, 105837. https://doi.org/10.1016/j.jecp.2023.105837
- Malik, F., & Marwaha, R. (2022). Developmental Stages of Social Emotional Development in Children. In *StatPearls*. StatPearls Publishing.
- Mondi, C.F., Giovanelli, A. & Reynolds, A.J. Fostering socio-emotional learning through early childhood intervention. *ICEP* 15, 6 (2021). https://doi.org/10.1186/s40723-021-00084-8
- Muppalla, S. K., Vuppalapati, S., Reddy Pulliahgaru, A., & Sreenivasulu, H. (2023). Effects of Excessive Screen Time on Child Development: An Updated Review and Strategies for Management. *Cureus*, 15(6), e40608. https://doi.org/10.7759/cureus.40608
- Nimphy, C.A., Venetikidi, M., Elzinga, B. et al. Parent to Offspring Fear Transmission via Modeling in Early Life: A Systematic Review and Meta-Analysis. Clin Child Fam Psychol Rev 26, 751–772 (2023). https://doi.org/10.1007/s10567-023-00448-1
- Ogundele M. O. (2018). Behavioural and emotional disorders in childhood: A brief overview for paediatricians. *World journal of clinical pediatrics*, 7(1), 9–26. https://doi.org/10.5409/wjcp.v7.i1.9
- Paclikova, K., Dankulincova Veselska, Z., Filakovska Bobakova, D., Palfiova, M., & Madarasova Geckova, A. (2019). What role do family composition and functioning play in emotional and behavioural problems among adolescent boys and girls?. *International journal of public health*, *64*(2), 209–217. https://doi.org/10.1007/s00038-018-1171-x
- Pina, A. A., & Gonzales, N. A. (2014). The role of theory and culture in child and adolescent prevention science: introduction to the special section. *Journal of clinical child and adolescent psychology : the official journal for the Society of Clinical Child and*

Adolescent Psychology, American Psychological Association, Division 53, 43(3), 397–399. https://doi.org/10.1080/15374416.2014.888668

- Quek, Y. H., Tam, W. W. S., Zhang, M. W. B., & Ho, R. C. M. (2017). Exploring the association between childhood and adolescent obesity and depression: a metaanalysis. Obesity reviews: an official journal of the International Association for the Study of Obesity, 18(7), 742–754. https://doi.org/10.1111/obr.12535
- Rodriguez, M. C., Wade, T. J., Veldhuizen, S., Missiuna, C., Timmons, B., & Cairney, J. (2019). Emotional and Behavioral Problems in 4- and 5-Year Old Children With and Without Motor Delays. *Frontiers in pediatrics*, 7, 474. https://doi.org/10.3389/fped.2019.00474
- Schell, A., Albers, L., von Kries, R., Hillenbrand, C., & Hennemann, T. (2015). Preventing Behavioral Disorders via Supporting Social and Emotional Competence at Preschool Age. *Deutsches* Arzteblatt international, 112(39), 647–654. https://doi.org/10.3238/arztebl.2015.0647
- Simões, A., Lopes, S., Dos Anjos Dixe, M., & Fernandes, J. B. (2022). Family Risk Factors That Jeopardize Child Development: Scoping Review. Journal of personalized medicine, 12(4), 562. <u>https://doi.org/10.3390/jpm12040562</u>
- Siraj, I., Melhuish, E., Howard, S. J., Neilsen-Hewett, C., Kingston, D., De Rosnay, M., Huang, R., Gardiner, J., & Luu, B. (2023). Improving quality of teaching and child development: A randomised controlled trial of the leadership for learning intervention in preschools. *Frontiers in psychology*, *13*, 1092284. https://doi.org/10.3389/fpsyg.2022.109 2284
- Stülb, K., Messerli-Bürgy, N., Kakebeeke, T.H. *et al.* Prevalence and Predictors of Behavioral Problems in Healthy Swiss Preschool Children Over a One Year Period. *Child Psychiatry Hum Dev* 50, 439–448 (2019). https://doi.org/10.1007/s10578-018-0849-x
- Tavormina, M. G. M., & Tavormina, R. (2022). Depression in Early Childhood. *Psychiatria Danubina*, *34*(Suppl 8), 64–70.
- Vahedi, S., Farrokhi, F., & Farajian, F. (2012). Social competence and behavior problems in preschool children. *Iranian journal of psychiatry*, *7*(3), 126–134.
- van Ditmarsch, H., Hendriks, P., & Verbrugge, R. (2020). Editors' Review and Introduction: Lying in Logic, Language, and Cognition. *Topics in cognitive science*, *12*(2), 466–484. https://doi.org/10.1111/tops.12492
- Wang, S. M., Yan, S. Q., Xie, F. F., Cai, Z. L., Gao, G. P., Weng, T. T., & Tao, F. B. (2024). Association of preschool children behavior and emotional problems with the parenting behavior of both parents. *World journal of clinical cases*, 12(6), 1084–1093. <u>https://doi.org/10.12998/wjcc.v12.i6.1084</u>
- Zografova Y, Dimitrova EE. The Role of Family and Media Environment on Aggressive Behaviour in Bulgarian Schools. *Societies*. 2023; 13(10):222. https://doi.org/10.3390/soc13100222