

A Psychological Understanding of Over Self-Regulation

A psychological definition of over regulation

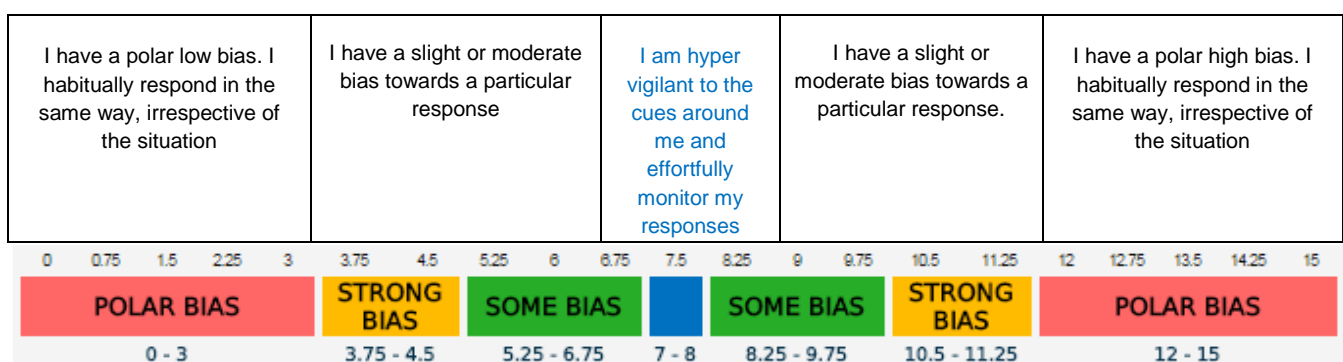
Over regulation can be defined as the effortful self-regulation of several factors at any one time. Should a high level of effortful self-regulation be sustained over a period of time, it may have a depleting effect on the individual. To explore the incipient risk associated with over regulation, it is important to recognise the cost involved in self-regulation, especially in children and adolescents.

Self-regulation is the ability to optimally adjust one's internal affective-social state and subsequent actions in response to a situation. It is the effortful, conscious, purposeful adjustment or inhibition of what might be automatic or unconscious to bring about an intended outcome (Hofer et al. 2010; Eisenberg et al. 2010). To consciously and purposefully recognise and inhibit an automatic bias and to choose to substitute another is indeed costly, especially if sustained over a period of time. Bauer and Baumeister use a helpful analogy, comparing self-regulation to a muscle which grows tired after exercise; an analogy central to the limited strength model of self-regulation. This model suggests that an individual has a limited capacity for self-regulation, which once exerted will cause depletion (Bauer, Isabelle, M., Baumeister, Roy, F.)

Self-regulation causes depletion because it is costly. Every act of purposeful self-regulation involves an act of deliberate choice. To consciously and effortfully choose an optimal response from a range of options demands a complex set of mental actions. It requires the brain to read the situation, identify and evaluate each possible choice and then to act upon it. Gollwitzer describes two mind sets to describe this action; firstly the deliberative mindset which explores, mentally rehearses and evaluates the possible options, and the implemental mindset which enables the individual to pursue the course of action (Gollwitzer 1999). Vohs et al found that effortful decision making led to subsequent decrements in self-regulation across a range of contexts and using a range of measures; these included less physical stamina, reduced persistence in the face of failure, increased procrastination, pain tolerance (Vohs et al. 2008)

Throughout every school day, children and adolescents find themselves in a range of changing contexts, engaging in various encounters and tasks. Each situation, task and encounter requires a response. What is significant is the effort involved in making that response. Many children, despite having a range of choices available to them, make a less effortful response; they do what they have always done, perhaps perpetuating a habitual bias e.g. always deferring to the person they are with, or always seeking to do something new or different rather than what is familiar. In addition, sometimes their response is guided by the priming signposts of the school culture e.g. going quiet as they walk into chapel, or engaging in partner talk when ordinarily they would prefer to spend time exploring their own internal thoughts.

Children who exhibit a high degree of self-regulation are those who effortfully and purposefully, if subconsciously, self-regulate as they move from situation to situation; they are reading the cues, considering and evaluating options and directing their responses towards an intended goal. Children who exert considerable self-regulation most of the time, in a range of situation could be described as highly self-monitoring.



Self-monitoring is a psychological term used by Snyder to describe an individual's ability to pay attention to a social situation in order to adjust their behaviour accordingly (Snyder 1974). To self-monitor is to be alert to the cues available, to mentally rehearse and evaluate the possible choices and then to implement that optimal response. A certain degree of self-monitoring is of course a critical component of self-regulation and is seminal to appropriate social competency and self-management (Eisenberg et al. 2000; Hubbard, Dearing 2004; Tangney et al. 2004; Trentacosta, C.J., & Shaw, D.S. 2009; Allan, Lonigan 2011), and perhaps a skill that even a socially competent adult with a high level of self-management draws upon in particular situations rather than all the time. It is also a skill which accrues as children mature (Reifman et al. 1989; Ickes et al. 2006; Bohlin, Hagekull 2009; Blair 2002; Blair, Razza 2007; Posner, Rothbart 2000). However, for a child or adolescent to exert a high level of self-monitoring over a sustained period is unusual.

Children and adolescents who are habitually hyper vigilant and effortfully responsive to the cues around them could be said to be over regulating. Over time, such effortful control is likely to result in a depletion of limited resources and may result in subsequent fluctuation of self-regulation (Vohs, Heatherton 2000; Vohs et al. 2008; Kopp 2009; Garcia 2010; Compas 2009; Muraven, Baumeister, Roy, F. 2000).

Possible causal factors of over regulation and associated incipient risk

There are many reasons why a child or adolescent may over regulate; identifying the possible causal factors is critical to recognising associated incipient risks and targeting support.

Some children may over regulate due to a high level of affective- social alertness; they may notice things that others do not; they may be particularly attuned to the subtleties of an interaction. As a consequence, having noticed and read the social cues, they may find themselves facing more choices than other peers; this may elicit a higher level of personal responsiveness as they seek to act favourably in each situation. Over time, this may lead to affective-social fatigue which may manifest as a depletion of energy, a lower immune system and increase of fatigue related conditions (Bauer, Isabelle, M., Baumeister, Roy, F.; Muraven, Baumeister, Roy, F. 2000; Vohs et al. 2005). In addition, these children may start to look for an outlet in order to compensate for the high level of self-control that they are exerting; such an outlet may not be healthy and may raise a child's risk of self-harm, disordered eating or substance abuse.

A high level of affective- social alertness and attunement may result in increased levels of affective-social literacy. A child may exhibit an unusual social competency for their age which is noticed, valued and reinforced through feedback. Such feedback whilst well intentioned, may be limiting, in that it may put burdensome pressure on the child to maintain such as highly self-regulated, self-monitoring posture. Furthermore, affirming feedback may prevent a child from taking important social risks which would promote a wider range of social competency skills and emotional resilience e.g. reflecting on and taking responsibility for an error of judgment, recovering after a setback or failure, experiencing and recovering from social exclusion. Without these important learning opportunities, a pupil may not develop the necessarily breadth of social competency and resilience to navigate throughout the inevitable struggle of early adulthood.

It is also important to recognise a group of children who may have a high level of self and social awareness, and subsequent self-regulation, but are not always benign in the way they use it. They are those children who we know are capable of manipulating a situation or 'playing' someone in order to bring about the preferred outcome. Their effortful, purposeful self-control enables them to exert considerable social control over those around them. They are likely to be very adept in knowing what to say, when to say it, and to whom. They may be those we know to be social chameleons, able to adapt to any situation (Dalton et al. 2010). Whilst this is certainly a skill that is cautiously advantageous to use on occasion, to use it habitually is to leave others feeling played, manipulated or perhaps commoditised, and for young children, may lead to an inflated view of social power and control which is not healthy.

Sadly, some children may have developed a hyper vigilance to affective-social cues in order to safeguard their own emotional or physical safety. Children who have been the victim of bullying may become adept at anticipating threat and directing their movements and behaviours accordingly. Children who have learnt to read the facial cues of an unpredictable other may have

done so in order to ensure their behaviour does not act as a trigger which may lead to volatility or harm (Maughan, Cicchetti 2002). Children who have experienced authoritarian, controlling, parenting rather than authoritative, stabilising parenting may have become attuned to reading those cues which would enable them to moderate or adjust their behavioural responses which appease or please and lessen the likelihood of a punitive adult reaction. For these children, such hyper vigilance may become an embedded habitual response, causing a growing adolescent to focus attention on reading the cues in order to safeguard themselves, diverting self-regulatory skills which are needed to perform other executive functions such as managing distraction, personal organisation, or exhibiting persistence

There may be some children who are effortfully seeking to self-regulate after a time of poor self-regulation; they may be exerting a great deal of effort in consciously making different choices to the ones they have made previously. They may be intentionally reading the cues around them so that they can minimise the chances of past behavioural choices and consequences being repeated. Such effortful self-monitoring, self-control and self-regulation cannot be taken for granted by adults; it will be costly. There may be situations where self-control is suddenly depleted, and there is a sudden fluctuation in behaviour (Martínez-Íñigo et al. 2013; Masten 2004). In addition, in order to self-regulated to this degree, an individual may begin to remove himself from situations where his self-regulation may be tested, e.g. choosing not to go to parties, or to avoid a certain behaviour altogether. Whilst such closing down of risk may be important in the short term, self-regulation is the ability to regulate choices, not to remove opportunity for choice; limiting exposure to perceived risk may result in a decreasing engagement in activities and interactions which may lead to increased isolation.

For children with HFU (high functioning autism), knowing how to notice and read cues is not instinctive; it is a learnt behaviour taught over time which has to be effortfully applied in social interaction (Bachevalier, Loveland 2006; Jahromi et al. 2013). Even when learnt, it will always be volitional and intentional; it will never be automated and instinctive. These children are over regulating in a way that other peers are not, and it will be important to recognise how tiring school must be as a consequence. Over the school day, they may become increasingly depleted of their limited resources, and may experience overload which triggers a seemingly adverse reaction to something seemingly insignificant.

Emerging data trends

We have identified a number of trends emerging in pupils with a bias of over regulation

- There a very few pupils with a bias of over regulation in the younger years, suggesting that over regulation demands a degree of self and social awareness and management which is less likely in younger pupils.
- There may be an emerging correlation between pupils who over regulate the factors of TOS, TOO and SC, yet have low SD, and socially manipulative behaviours.
- There are a higher number of girls than boys who over regulate.
- There is a significant risk of pupils who over regulate and a sudden, unexplained onset of social and emotional difficulty which does not appear to have a trigger.
- There are a significant number of high performing, heavily committed pupils who exhibit a pattern of over regulation.

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