

THEORISING AND CONCEPTUALIZING IN THE STUDY OF SOCIAL FACTORS INFLUENCING EARLY CHILDHOOD

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Abstract

The approach and methodology employed in scientific research are influenced by the underlying theories and concepts. In this study, we developed a research model based on a historiographical analysis of classical sociologists to provide a theoretical foundation for our investigation.

Keywords: *early childhood, social factors.*

The sociological method is based on fundamental sociological theories, such as structural functionalism by A. Comte (1798-1857), É. Durkheim (1858-1917), H. Spencer (1820-1903), T. Parsons (1902-1979). These theories define the following characteristics of sociological research: evidence-based, neutral, lack of personal preferences, the influence of various social structures in the life of persons. The definition and study of social factors as determining a simple phenomenon for more accurate scientific results, the analogy between forms of individual organism and the social one, social system and its functions, understanding socialization as a conservative process, which establishes the connection between the child and the social system "as a lifelong experience".

The universality of sociological research is demonstrated by the need for awareness and deeper analysis of social structures, their interaction and influence, and the ability to analyze social processes and phenomena. This provides an opportunity to conduct research in other interdisciplinary fields. In the mid-20th century, Margaret Mead, a sociologist and anthropologist, wrote that children and adults perceive life differently and could learn from each other. J. Habermas, a proponent of the rational society and communicative theory, emphasizes the rules of dialogue for effective communication between agents of socialization and young children. Scientific approaches are needed to create a supportive environment for the development of a healthy childhood. By examining the diversity of the social environment, which includes many social factors influencing early childhood, sociologists look for scientific evidence within the context of sociological research. Anthropologist Margaret Mead conducted research on ethnic groups, proposing a theory of socio-cultural exchange in communities, which places the determining factor in the development of young children in communities as social over biological. In 1924, Stuart Rice wrote that the relative importance of biological and purely social factors in the development of human society was a controversial issue. Biologists such as H. Parsley believed that the child represented a rigid set of inherited inclinations, while J. B. Watson and his supporters claimed that rearing, not nature, is responsible for what a child becomes. Despite the proponents of rigid heredity, Margaret Mead's supporters believed

that "the environment creates and destroys the individual physically and mentally," the conclusion that Margaret Mead arrived at in her anthropological research [8, p.85.] in the 1940s about the influence of the social environment on personal development.

Bass notes that children create a stratification structure similar to the world of adults, as they perceive it. Hence, children themselves participate in creating their environment by emulating adult agents and being active participants in their own socialization. This concept integrates structures and configurations, as well as processes, and takes into account value judgments, emotional schemas, action orientations, and developmental readiness of both children and adults as they are part of a group or collective interest culture. (Ulich and Hurrelmann, 1991)

Emile Durkheim (1922, 1950) was one of the first sociologists to develop the concept of socialization, viewing it as a process of development guided by adults for those who are not yet integrated into society. To analyze the main conceptual-theoretical approach in studying the social environment and the social factors that impact the healthy development of a child, this study will draw on the socialization theory and its various interpretations by social scientists throughout history. This theoretical basis includes Margaret Mead's explanation of the role of social factors in intergenerational relationships, highlighting the nature of sociality as a crucial factor.

H. Mead, who conducted pioneering analysis on the significance of the "other" in the development of personality and identity through social interactions, introduced a reflexive-interactive model of development (Hurrelmann, 1986). Later, J. Habermas connected these processes of identity development and awareness to a person's ability to reflexively transcend the self and turn the self into an object (Tillmann, 2001). This process of socialization necessitates that distancing and self-distancing are fundamental for young children to begin to perceive themselves as individuals with an individual identity. However, in the study of the interaction of young children with their social environment, they are separated into the concept of early childhood socialization, where their physical, mental, and social state is studied. In contrast, later childhood, such as adolescence, provides adult children with the opportunity to assert their individuality, while still interacting with

socialization agents. According to H. Mead, young children do not have the same degree of awareness of their interactions with the 'other' as older children. Despite this, adopting socialization theory for young children is theoretically justified in research, given that individualization takes place when adults consciously approach young children. However, it is important to note that young children are the most immature, dependent, and unprotected age group.

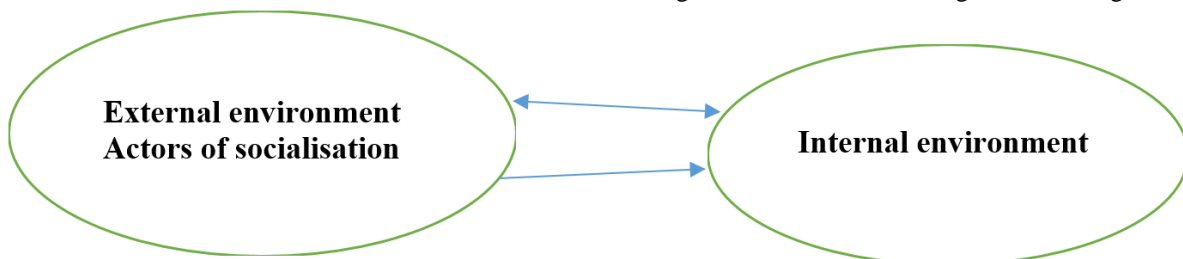
To recognize the active role of children in their socialization and consider them as social actors and culture producers, many childhood researchers have sought to 'rethink' the concept of socialization. Such authors as Plaisance, 2004; Sirota, 2005; Javeau, 2005; Mollo-Bouvier, Mayall, 2002 200 Setton, 2005, etc. have advocated that socialization is intertwined with theories of reproduction and maintenance of social relations and order, which involve the incorporation of values and norms of moral behavior towards oneself and others. Socialization processes include individual experiences, attitudes, knowledge, emotional structures, and cognitive abilities, as well as interactions, communication, and activities in the social environment.

In terms of the main idea of this scientific work, it is advisable to start from the classical theory of structural functionalism developed by T. Parsons. Accord-

ing to T. Parsons [11, p. 232.], the social system consists of individual actors interacting with each other in a physical and environmental situation. The social system interacts with the child's personality system, which includes physical, mental, and social well-being. The external social system involves actors in the socialization of early childhood, such as parents, caregivers, health workers, and other members of society who shape the child's external environment.

While adult socialization actors can shape a healthy early childhood through their proper attitude towards young children, the young child can also become a socialization agent for themselves through individualization, stimulating adult socialization agents from the external system to create a supportive environment for the child's personality system. However, it is essential to consider the peculiarity of immature early years in the development of the theory of correct socialization. Adult agents of socialization of young children need scientifically based knowledge, as children read and copy through individualization, making them actors for themselves.

The sociological research model involves the interplay of two systems: the external sociological system consisting of social factors and socialization agents that shape the environment and affect early childhood, and the internal system that encompasses the physical, psychological, and social well-being of children aged 0-5.



Based on the developed theory of proper socialization and the sociological research model used to study the external environment that influences early childhood and health as an indicator of well-being, it is crucial to focus on the structure of the external system itself, which is the object of this sociological study. The external system comprises multiple social factors shaped at various levels of social institutions that interact with children aged 0-5 and can have a significant impact on their health status, either positive or negative.

When exploring the theoretical and methodological aspects of the social factor and its impact on early childhood, it is crucial to distinguish the concept of a social fact introduced by É. Durkheim (1964), which refers to a social force or structure that exerts external coercion on the individual [p.31]. According to É. Durkheim, social facts are the social causes of events in society or in an individual's life. Although facts may be used to confirm concepts or conclusions, they are peripheral to science, serving only as examples or evidence. É. Durkheim argued that science should proceed from ideas to things, not vice versa [3, p.22].

What is the difference between a social fact and a social factor? The term "*social*" refers to something related to people's lives and their relationships in society,

or something that causes changes in productive relations in society. A *factor* is the driving force or cause of a process or phenomenon, while a *fact* is an actual event. É. Durkheim introduced the concept of a social fact, which is an externally coercive structure that acts on individuals [4, p.31]. According to him, social facts are the social causes of events in society or in the life of an individual. While facts may be used to confirm concepts or conclusions, they are peripheral and do not serve as the subject of scientific study. In contrast, the subject of scientific study goes from ideas to things, not from things to ideas [3, p.22]. Sociologists have different views on what contributes to research data and what factors influence social life. Thus, facts are the data obtained as a result of research, while factors are external forces that influence changes in macro- and micro-society.

During the study of the influence of social factors on the Moldovan electorate's activity, I. Mocanu. I. defined social factors as social variables that affect changes in population behavior [10, p.38]. B. Wolman's concept states that social factors are a manifestation of influence resulting from interpersonal relations, social organizations, social institutions, norms, and beliefs. N. Smelser notes that certain social factors, as variables,

influence specific behavioral patterns of people in society while explaining the cause-and-effect relationship of processes in society. Variables can take on different meanings, and simple social factors such as age and education can be considered universal in any sociological study for all population segments, or they can be specific to a particular age group, such as early childhood, as in the present study. Alanen 1994, James and Prout 1995, Geraldine Brady, Pam Lowe, and Sonja Olin consider children as a separate social group. According to the developed research model, the specific social factors in this interdisciplinary study are the social factors shaped by early childhood socialization actors, such as the behavioral or personal social factors of parents.

In the context of the developed theory on the proper socialization of young children and the formation of their health through the study of intergenerational interactions, Merton's theory of role conflict (1975) is relevant. Children belonging to different social groups, shaped by their families and social environments, experience varying levels of health, leading to determinants of social inequalities in health related to family background, education, and income. For this study, social factors are defined as the social variables that influence the level of early childhood health, which have both universality and specificity for this age group. Early childhood health status is also a variable that interacts with social factors in the external system. Therefore, the impact of social factors on children's health status results from the interaction of variables in two systems - the external environment system and the system of well-being of an individual aged 0-5. Children's health status is a dependent variable, while social factors are independent variables.

The study of social factors as an object of research has a significant impact on the nature of scientific research in the interdisciplinary field, particularly in maintaining the environment that prioritizes the health of early childhood. In the second half of the 20th century, the change in the structure of morbidity highlighted the study of lifestyle factors as determinants, shifting the focus from healthcare to prevention. Despite being a well-elaborated scientific category, public health remains understudied as a social phenomenon, although it is the object of study for many sciences. [22, p.1-3]. Sociologists are motivated to conduct research into the social environment that affects health as an indicator of well-being, given the universality of sociological methods, insufficiently studied social environment, and specific influence on health, as well as the interest in processes at micro- and macro-levels and the study of the behavior of socialization agents that shape the health of early childhood.

According to the World Health Organization (WHO), "child maltreatment or abuse encompasses physical or emotional maltreatment, sexual abuse, neglect or negligence that is likely to cause harm to a child's health. Emotional abuse refers to repeated or persistent exposure or rejection of a child by parents or other adults, resulting in disturbances in the child's emotional status, behavior and ability to socialize. The Developmental Health and Disease Origins (DOHaD) paradigm suggests that environmental factors to which

an individual is exposed throughout their life can leave an epigenetic mark in the genome, with early development being a crucial period when the epigenome is particularly sensitive to environmental influences. During this time, an individual builds up their health capital that allows them to respond more or less effectively to life's challenges. Research faces the challenge of decoding the modes of action and epigenetic mechanisms that result from environmental factors leading to increased susceptibility to disease or resistance. In terms of health, the challenge is to translate these scientific findings into action.

The question of a healthy lifestyle has gained importance as a social concept in many countries worldwide, whether they have already achieved a high cultural and economic standard or are still striving for it. A healthy lifestyle refers to the ability of a society, whether at an individual or social group level, to realize its full potential in promoting good health, ensuring social well-being, and maintaining the integrity of health. This involves achieving a balance between the level and quality of life and the effectiveness of social organizations. (WHO, 2015)

This research work adopts a paradoxical approach, combining two controversial concepts - socialization and generations - to address the problem among the age group being studied. On the one hand, socialization for young children is viewed as a violent and forced process, heavily influenced by the adult agents of socialization, cultural heritage, and household behavior, which can impact their physical, mental, and social health, as well as their ability to adapt to society. On the other hand, children are recognized as a separate social group, and therefore must be treated as individuals with their own feelings and opinions. The study's focus is on exploring the role of the agents that shape early childhood and its impact on health and well-being.

When considering social factors as a social variable, it is important to view the health of the 0-5 age group as a social category, but it should also be acknowledged that the study of health levels should be viewed as a variable due to its changing characteristics. "As per sociological research, the focus is on identifying and measuring characteristic variations of a specific phenomenon and explaining them by the effects of another phenomenon. The first phenomenon is known as the dependent variable, and the second, which explains or causes the first, is called the independent variable. Sociologists formulate a hypothesis in advance about the relationship between the independent and dependent variables. In other words, the dependent variable is influenced by the independent variable.

It is essential to differentiate between the dependent and independent variables, as well as the subject and object in our study. Social factors can be considered an independent variable as they exist independently in the social world, whereas health is a dependent variable as it is influenced by several social factors. While health is the object of study, social factors are the subject, which can provide a basic understanding of the social processes affecting health and at the same time social factors can be part of the medical

work of health research. Sociological research is interested in examining how society influences health changes, particularly for children aged 0-5, either positively or negatively. By focusing on social factors as the object of study and health levels as the subject, we can gain insights into the significance and generalization of the social as a determinant factor in the sociology of children's health. Besides demographic and economic factors, psychological and behavioral factors also play a significant role.

Based on the developed classification of social factors, the social environment of early childhood comprises social institutions and the social factors within them. Each social factor has a specific impact on the health of children aged 0-5.

The study of the context of social institutions dates back to the theory of ethnomethodology, which was described by Maynard & Clayman in 1991. Ethnomethodology, developed by Garfinkel H. (1917-2011), regards the objectivity of social phenomena as a result of methodologically conscious actions of the participants themselves in the interactions on the level of social institutions [50, p.291]. Garfinkel argued that the organization of family, contractual relations, repressive measures, state and society are thus a simple development of ideas that we have about society, state, justice, etc. As a consequence, these and similar facts exist only in and through ideas, which are the source and, therefore, the true subject of sociology. However, Garfinkel notes that Spenser G. (1820-1903) eliminates this idea, but only in order to replace it with another one made along the same lines. Spenser does not consider the object of science to be mankind but societies [21, p.256-309]. He defines social factors as any simple phenomenon and gives scientific results by making analogies between forms of an individual organism and a social organism, analyzing social factors such as education in the family, rules of feeding, and daily regime that influence the healthy development of children [2, p.10-89]. Structural functionalists believe that social facts, phenomena, and factors are those processes that affect an object from the outside, whereas Garfinkel believed that there are ways for ordinary people to create a stable social world through their everyday expressions and actions [12, p.11-12].

Talcott Parsons (1902-1979), a supporter of structural functionalism in the American school, introduced the concept of the social system and its four functions: adaptation, goal achievement, integration, and latent function. As a sociologist, Parsons considered an individual from the perspective of such a system and placed special emphasis on socialization as a conservative process that establishes a bond between a child and the social system. He viewed socialization as a lifelong experience.

The socialization theory proposed by H. Mead (1863-1931) explains how a child finds his or her identity within the larger social system. Mead uses the example of play to illustrate this process, where a child takes on the role of an adult and learns a meaningful position by playing the role. In contrast to T. Parsons' theory where the child is a part of the socialization system, Mead presents socialization as a process of role-

playing where a child gradually becomes an adult. To better understand the unique characteristics of early childhood and its impact on development, health and social organization, it is important to examine the full range of social factors at every level of social institutions that shape the child's personality system. This can be achieved through the research model and theory of proper socialization, which is developed by analyzing both classical and contemporary theories of young children's development in society.

According to Mayall (1996), Alanen [1,p3-6.] (1994), James and Prout (1995), and Geraldine Brady, Pam Lowe, and Sonja Olin, children should be considered a separate social group, prompting the need to examine the influence of social factors on socialization agents from the perspective of role conflict theory (Merton, 1975). The context of the theory of role conflict suggests considering the role of social institutions that early childhood is confronted with, according to the developed classification. Garfinkel (1972) characterized social institutions, including medical ones (Ten Have, 1995), as everyday activities within institutions, and was interested in how people carry out their official tasks and how institutions are created in the process. Similarly, we are interested in how social institutions that shape early childhood wellbeing function and how the socialization process of children aged 0-5 years in relation to health conditions occurs. Traditional sociological research on institutional settings has focused on the structure of formal rules and procedures, but we seek to delve deeper into understanding the social factors involved in these institutions (Garfinkel, 1972; Ten Have, 1995).

Supporters of ethnomethodology suggest that in addition to the internal forces that shape social institutions, there are also external forces that drive their emergence. In our study, the external force is the society's need for preschools and medical institutions that serve children aged 0-5. To understand the process of socialization during early childhood in modern society, it is important to examine how it occurs within this age group. Ethnomethodology theory has shown us that the emergence of social institutions is not only caused by internal forces but also by external factors such as societal needs. In addition, the family institution also influences the emergence of a child within the family, which demonstrates the impact of internal forces within the institution. The study of social factors and their effects, particularly on the health status of children aged 0-5, has led to the development of the concept of good socialization, which provides the scientific basis for this paper.

The study of social institutions and social factors explores how these institutions interact to shape early childhood. According to T. Parsons [11,p.232], there is an external system that includes certain subsystems, including the family institution, pre-school education institution, health care institution, and state institution. All of these institutions are relevant to the socialization of early childhood in the context of health formation, but it is important to consider whether they all have equal priority in the process. A social institution is a set

of norms that regulate a particular sphere of social relations, and the term originated from jurisprudence, as noted by A. I. Kravchenko. The author writes that the purpose of social institutions is to satisfy the most important vital needs of the collective, and distinguishes five main social institutions in society:

- The institution of family and marriage, which satisfies the need for reproduction of the family
- Political institutions, including the state, which satisfy the need for security and social order
- Economic institutions, which satisfy the need for subsistence
- Educational institutions, including science and culture, which satisfy the need for knowledge transfer, socialization of younger generations, and training
- The institution of religion, which satisfies the need to solve spiritual problems and find meaning in life.

It is important to acknowledge the significance of the institution of health care, as it is responsible for promoting and maintaining good health, as well as restoring it when necessary. As a social institution, it encompasses a vast social system with various statuses, roles, norms, sanctions, and organizations. It functions as an adaptive arrangement of society, created to meet its most important needs and is governed by a set of social norms.

In our research, we focus on studying the social factors and their impact on the health of children aged 0-5 years. Based on our classification of social factors, we have identified various social institutions that play a significant role in shaping children's health during this age period. It is important to note that each institution has specific social factors that can have either positive or negative effects. In sociology, an institution is a multifaceted term used to refer to established patterns of behavior that create a normative and restrictive order within which an individual can act. Our main objective is to identify the specific nature of the social factors, their degree of influence, and the reality of their impact on children's health. A. I. Kravchenko [7, p.37.] emphasizes that the functions of institutions, in other words, the set of tasks to be solved, goals to be achieved, and services to be provided, bring benefits to society. On the other hand, in any institution, there may be emerging risks that bring harm, which are referred to as dysfunctions. Therefore, the functions of social institutions strengthen society, while dysfunctions undermine it. By exploring and understanding the role of each institution in promoting the healthy development of children, we can determine the factors that contribute to positive health outcomes and those that may lead to negative outcomes.

At the start of their life, a child enters the first institution - the family. However, the child enters the family through the institution of health care. While the family institution is fundamental and lays down the foundation of the child's upbringing (e.g., full, incomplete, well-to-do, dysfunctional), the institution of pre-school education plays a role in secondary socialization and is an indicator of the primary socialization process of children in families in terms of good adaptation to kindergartens in the context of health.

The institutions of health and family are closely connected in their complex impact on a child's health, starting from the very beginning of their life. The family institution creates the initial environment where the child grows and develops, with its cultural and material values, and plays a significant role in the child's primary socialization, forming connections with other institutions. Depending on its cultural characteristics, behavioral norms, and composition, the family institution can have positive (functional) or negative (dysfunctional) effects. According to Article 12 of the Convention on the Rights of the Child, children have the right to express their opinions freely on all matters affecting them and expect that their views will be considered. In this context, it is essential to acknowledge and respect the child's perspective, including their health-related needs and concerns.

The Convention highlights that the child's identity as a member of the family, community, and society is often disregarded due to age and immaturity. The socialization of children is unavoidable due to their immaturity and inexperience, but it is essential to recognize that faulty socialization can lead to stressful socialization of young children. Young children are highly sensitive to their surroundings and can quickly become aware of people, the world around them, and the routines of their lives, while also developing their individuality. They learn to express their feelings, thoughts, and desires in different ways. The Committee notes that "family" includes a range of structures and mechanisms that provide the young child with care, nurturance, and healthy development, such as the nuclear family, extended family, and other community-based organizations, provided they are consistent with the rights and best interests of the child. The child forms an enduring relationship with their parents or primary caregivers, which provides them with physical and emotional security, quality care, attention, and helps develop their personal identity and ways of behaving, as well as life skills and knowledge. Hence, parents and caregivers are the main channel through which young children exercise their rights [5, p.11]. The Convention stresses that both parents have common responsibilities for the upbringing and development of the child, with equal responsibility for the custody of the child (Article 18.1). The most significant situations that negatively affect young children include abandonment, deprivation of adequate parental care, growing up in severe material need or psychological distress, poor parental mental health, growing up in isolation from society, inadequate parental relations leading to conflict between parents or child abuse, and situations where children's relationship with their parents is severely interrupted (including through enforced separation).

The concept of the developmental niche was introduced by Charles Super and Sarah Harkness (see also Gardiner, Mutter & Kosmitzki, 1998), who conducted community-based research in Kenya. They defined the developmental niche as consisting of the everyday physical and social conditions, child-rearing and care practices, and the psychology of parents or caregivers. According to the authors, the family is the center of development, particularly during a child's early years, and

plays a crucial role in shaping the child's heredity and environment. In the context of our study on the influence of the social environment on children's health, it is essential to consider the impact of family habits, traditions, and patterns, which can shape health or disease at the biological level through primary socialization. The responsibility for direct child health care lies with the institution of health care, which involves observation, treatment and prevention. However, the traditional medical model fails to account for the psychological component of disease factors, leading to the dominance of the biopsychosocial model in contemporary science. According to I. M. Shishkova, the internal picture of health begins to form between 4-5 years of age, influenced by biographical factors such as gender, demographic indicators, and physical and personal development, family factors such as relationships with family and close relatives, and attitudes towards health, and extra-familial factors such as peers, school, teachers, and media.

Based on our study of the health of children aged 0-5 years, we believe that the child's perception of health and healthy lifestyle begins to form from intrauterine age and should be fully formed by the age of 5. Neglecting this critical period may result in improper socialization and disregard for the child's individuality at an early age. Shishkova I.M. [12,p.5.] notes that a child's internal picture of health is shaped by both external and internal factors, which can have long-lasting effects on their health. External or objective factors include social and economic living conditions and the level of state and societal development, while internal or subjective factors include personal characteristics, past experiences with illness, and current health status. When examining the role of preschool institutions in shaping the health of children aged 0-5, it is worth noting that research was conducted in Ufa, for example, on the influence of social factors during the societal transformation in the first decade of the 21st century. Children's socialization was negatively impacted by various social problems that emerged during this period, such as reduced coverage of children, poor quality of educational and recreational processes, social inequalities between mass and elite, urban and rural pre-schools, low staff qualifications, and extremely low salaries of the staff. Therefore, we emphasize that preschool institutions play a crucial role in educating, nurturing, and promoting the health of children aged 0-5 years. Particular attention should be paid to factors such as daily routine, physical activity, healthy food culture, and disease prevention.

Socializers, such as kindergarten teachers, play a crucial role in shaping children's development. They are responsible for the physical, educational, aesthetic, and social processes, second only to parents. As society increasingly recognizes children's health as a core value and resource for overall development, socialization is a continuous process that reflects the conscious or unconscious attitudes of adults towards the child's formation. It is therefore important to consider the extent to which socializers, including parents, health workers, and educators, have been properly socialized to ensure the health and safety of the child.

Conclusion

The development of a research model that examines the interaction between external social structures and the internal personality has led to the definition of the fundamental concept of appropriate socialization. This concept has formed the basis for the main conclusions drawn from the study's findings.

References:

1. Alanen, L. (2014). Editorial: theorizing childhood. *Childhood*, 21(1), 3-6.
2. Bass, L. (2010). Childhood sociology in society/current sociology. *Current Sociology*, 58(2), 335-350. doi: 10.1177/0011392109355982
3. Geraldine Brady, Pam Lowe and Sonja Olin Lauritzen. Connecting a sociology of childhood perspective with the study of child health, illness and well-being: introduction. *Sociology of Health & Illness* Vol. 37 No. 2 2015 ISSN 0141-9889, p.173-183
4. Durkheim, É. (1964). *The rules of sociological method*. The Free Press.
5. European Commission. (1996). *The state of health in the European Community*. Luxembourg.
6. Francisco Bolaños Jimenez, Hélène Jammes, Anne Gabory. (2016). The new paradigm of the developmental origin of health and diseases (DOHaD)--Epi-genetics and environment: evidence and missing links. *médecine/sciences*, 32(1), 27-34. doi: 10.1051/medsci/20163201006
7. Kravchenko, A. I. (2012). The concept of social institution. *Social Sciences and Modernity*, 4, 51-62.
8. Freeman, D. (1983). Margaret Mead and Samoa: The making and unmaking of an anthropological myth. / Australian National University Press, Canberra, 1983- ISBN 070811274-379 p.
9. Mayall B., Towards a sociology of child health. *Sociology of Health & Illness*. Vol.20 № 3, 1998 ISSN 0141- 9889, p.269-288.
10. Mocanu, I. (2013). Rolul factorilor sociali în sporirea activismului electoral baza materialelor din Republica Moldova [The role of social factors in increasing electoral activism based on materials from the Republic of Moldova] (Doctoral thesis). Chisinau.
11. New World Encyclopedia. (n.d.). Talcott Parsons (1902-1979). Retrieved April 29, 2023, from [https://www.newworldencyclopedia.org/entry/T._Parsons_\(1902-1979\)WHO_European_Region//Regional_office_in_Europe/Denmark,-2020,31p.EURO:2020-504-40239-53897](https://www.newworldencyclopedia.org/entry/T._Parsons_(1902-1979)WHO_European_Region//Regional_office_in_Europe/Denmark,-2020,31p.EURO:2020-504-40239-53897)
12. Shishkova. The influence of family factors on the formation an internal field of child's health./ DOI:10.23888/humj20183563-574/<https://cyberleninka.ru/article/n/vliyanie-semeynyh-faktorov-na-formirovanie-vnutrenney-kartiny-zdorovya-rebenka/viewer>.
13. WHO. (2012). Framework on early childhood development. https://www.who.int/maternal_child_adolescent/documents/ecd_framework/en/

14. Antonova, O. V. (2006). Role of preschool institutions in socializing children in the conditions of society transformation. [Abstract]. Ufa. https://static.freereferats.ru/_avtoreferats/01003301615.pdf
15. WHO. (2018). The state of child and adolescent health in Europe. <https://apps.who.int/iris/bitstream/handle/10665/260798/9789289053039-eng.pdf;jsessionid=8707128AB3D3A2483B6B2F6C23EF6D16?sequence=1>
16. Марцинковская, Т.Д. (Ed.). (2010). Концепции социализации индивидуализации современной психологии [Concepts of socialization and individualization in modern psychology]. М.; Обнинск: ИГ–СОЦИН.
17. Кравченко, А.И. (1999). Основы социологии [Basics of sociology]: Учебное пособие для студентов средних учебных заведений. 3-е изд. - Екатеринбург: Деловая книга, М.: Раритет.
18. Миронов, Н.В., Бударина, И.Ю., & Миронова, Н.И. (2013). Профилактика психосоматических заболеваний у детей – позиция педиатра [Prevention of psychosomatic disorders in children - a pediatrician's position]. Вестник медицинского института РЕАВИЗ № 1. УДК 616.
19. Ритцер, Дж. (2002). Современные социологические теории [Contemporary sociological theories]. 5-е изд. -СПб.: Питер.
20. Спенсер, Г. (1898). Сочинения. Основания социологии. С-Петербург.
21. Шишкова, И.М. (2018). Влияние семейных факторов на формирование внутренней картины здоровья ребенка [The influence of family factors on the formation of a child's internal health picture]. Humanities Journal, 35(63), 574-584. doi: 10.23888/humj20183563-574. Available at: <https://cyberleninka.ru/article/n/vliyanie-semeynyh-faktorov-na-formirovanie-vn>