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Developmental Psychology

Psychology

Life-span development, physical, psychosocial and cognitive development, psychological needs of different age groups, child psychology and vulnerable individuals.

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CHAPTER 04: DEVELOPMENTAL PSYCHOLOGY

1. Introduction

Developmental psychology is the branch of psychology that studies physical, cognitive, emotional, social and behavioural changes throughout the human lifespan, from conception to death.

It examines how heredity, environment, maturation, learning and social experiences influence human development.

2. Growth and Development

Growth: Quantitative changes in the physical size and structure of the body.

Development: Progressive changes in physical abilities, mental processes, emotional functioning and social behaviour.

Maturation: Biologically influenced progression towards functional maturity.

Growth	Development
Mainly quantitative	Quantitative and qualitative
Includes height and weight	Includes physical, cognitive and psychosocial abilities
Physical growth largely stabilizes after maturity	Continues throughout life
Measured through physical measurements	Assessed through developmental abilities and behaviour

3. Principles of Development

- Development is a continuous, lifelong process.
- Development generally follows recognizable patterns.
- The rate of development varies among individuals.
- Cephalocaudal development progresses from head towards feet.
- Proximodistal development progresses from the centre towards the extremities.
- Development generally progresses from simpler to more complex abilities.
- Different developmental domains are interrelated.
- Heredity and environment interact throughout development.
- Development includes both gains and losses.

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4. Domains of Development

Domain	Description
Physical	Growth, motor abilities and physiological maturation
Cognitive	Thinking, memory, language, intelligence and reasoning
Emotional	Expression and regulation of emotions
Social	Relationships, cooperation and social adjustment
Moral	Development of values and ethical reasoning
Psychosocial	Interaction between psychological development and social experiences

5. Factors Influencing Development

- Genetic inheritance
- Prenatal health
- Nutritional status
- Hormonal activity
- Physical health
- Family relationships
- Education
- Cultural environment
- Socioeconomic conditions
- Childhood experiences
- Social support

6. Stages of Life-Span Development

The following age ranges are approximate and may vary between developmental frameworks.

Stage	Approximate age
Prenatal period	Conception to birth
Neonatal period	Birth to 28 days
Infancy	Birth to 1 year
Toddlerhood	1-3 years
Preschool age	3-6 years
School age	6-12 years
Adolescence	10-19 years, according to WHO

Early adulthood	Approximately 20-40 years
Middle adulthood	Approximately 40-65 years
Older adulthood	Approximately 65 years and above

7. Prenatal Development

Prenatal development occurs between conception and birth.

Stages

1. 1. Germinal stage: First two weeks after fertilization; cell division and implantation occur.
2. 2. Embryonic stage: Third to eighth week after fertilization; formation of major organ systems.
3. 3. Fetal stage: Ninth week after fertilization until birth; growth and maturation of organ systems.

Factors Affecting Prenatal Development

- Maternal nutrition
- Genetic abnormalities
- Maternal infections
- Alcohol and tobacco exposure
- Certain medications and environmental toxins
- Maternal illnesses
- Access to antenatal care

Nursing Responsibilities

- Promote regular antenatal assessment.
- Educate regarding nutrition and prescribed supplements.
- Encourage avoidance of harmful substances.
- Provide emotional support.
- Identify maternal and fetal risk factors.

8. Infancy

Physical Development

- Rapid increase in height and weight.
- Development of head control and motor coordination.
- Gradual acquisition of sitting, crawling and standing abilities.

Cognitive Development

- Learning through sensory experiences and movement.
- Recognition of familiar people.

- Development of object permanence.
- Early language development.

Psychosocial Development

- Formation of attachment to caregivers.
- Development of trust and emotional security.
- Emerging stranger and separation anxiety.

Psychological Needs

- Affection
- Security
- Responsive caregiving
- Consistent attention
- Sensory stimulation

Nursing Care

Encourage caregiver presence, appropriate feeding, responsive caregiving, developmental stimulation and safe attachment.

9. Toddlerhood

Physical Development

- Improved walking and running.
- Increased independence in movement.
- Development of fine motor abilities.
- Gradual acquisition of toileting skills.

Cognitive Development

- Rapid vocabulary development.
- Beginning symbolic thinking.
- Exploration of the environment.

Psychosocial Development

- Desire for independence.
- Increasing autonomy.
- Possible temper tantrums.
- Emerging self-awareness.

Psychological Needs

- Independence
- Safe exploration
- Consistent boundaries
- Reassurance
- Parental affection

Nursing Care

Offer simple choices, maintain familiar routines, encourage safe play and avoid punitive responses to developmental behaviour.

10. Preschool Age

Physical Development

- Improved balance and coordination.
- Increasing fine motor control.
- Development of self-care abilities.

Cognitive Development

- Imaginative and symbolic thinking.
- Increased language skills.
- Early understanding of numbers and concepts.
- Egocentric thinking may remain prominent.

Psychosocial Development

- Development of initiative.
- Increased social play.
- Understanding of social rules.
- Possible fears of injury and separation.

Nursing Care

Use play, pictures, simple explanations and positive reinforcement. Reassure children that illness is not a punishment.

11. School-Age Children

Physical Development

- Steady physical growth.
- Improved strength and coordination.

Cognitive Development

- Increasing logical thinking about concrete situations.
- Improved memory and attention.
- Development of academic abilities.

Psychosocial Development

- Importance of achievement.
- Peer relationships.
- Development of competence and self-esteem.

Psychological Needs

- Recognition
- Achievement
- Friendship
- Encouragement
- Opportunities to develop skills

Nursing Care

Explain procedures, encourage participation in self-care and support educational continuity during hospitalization.

12. Adolescence

Adolescence is the transitional developmental period between childhood and adulthood.

Physical Changes

- Puberty
- Growth spurt
- Development of secondary sexual characteristics
- Reproductive maturation

Cognitive Changes

- Increasing abstract thinking.
- Development of reasoning and decision-making abilities.
- Increased awareness of future goals.

Psychosocial Changes

- Identity formation
- Increased independence
- Importance of peer relationships

- Body-image concerns
- Sexual and emotional development

Psychological Needs

- Privacy
- Acceptance
- Emotional support
- Autonomy
- Accurate sexuality education
- Guidance without unnecessary judgment

Nursing Care

Provide confidential, age-appropriate communication, promote healthy decision-making, assess emotional distress and respect emerging autonomy within applicable consent and safeguarding requirements.

13. Early Adulthood

Developmental Characteristics

- Career and educational development.
- Formation of intimate relationships.
- Increasing independence.
- Establishment of personal and professional goals.

Psychological Needs

- Intimacy
- Independence
- Social belonging
- Financial security
- Professional development

Nursing Care

Respect autonomous decision-making, provide health education and support adjustment to illness, relationships and occupational responsibilities.

14. Middle Adulthood

Developmental Characteristics

- Changing family and occupational responsibilities.
- Possible physiological changes associated with ageing.
- Menopause in women.

- Reassessment of personal goals.
- Contribution to family and society.

Psychological Needs

- Recognition
- Stability
- Meaningful work
- Family support
- Health maintenance

Nursing Care

Support preventive healthcare, chronic disease management, emotional adjustment and healthy lifestyle practices.

15. Older Adulthood

Physical Development

- Possible reduction in muscle strength and sensory function.
- Increased vulnerability to chronic diseases.
- Changes in mobility and physiological reserve.

Cognitive Development

- Processing speed may decrease.
- Accumulated knowledge may remain relatively well preserved.
- Dementia is not a normal or inevitable part of ageing.

Psychosocial Development

- Retirement adjustment.
- Changes in social roles.
- Experiences of bereavement.
- Reflection on life experiences.

Psychological Needs

- Dignity
- Independence
- Companionship
- Security
- Meaningful activities
- Emotional support

Nursing Care

Promote independence, assess cognition and sensory needs, prevent falls, encourage social participation and avoid age-based discrimination.

16. Erik Erikson's Psychosocial Development Theory

Erikson proposed eight stages of psychosocial development.

Stage	Psychosocial conflict	Positive developmental quality
Infancy	Trust vs mistrust	Hope
Toddlerhood	Autonomy vs shame and doubt	Will
Preschool	Initiative vs guilt	Purpose
School age	Industry vs inferiority	Competence
Adolescence	Identity vs role confusion	Fidelity
Early adulthood	Intimacy vs isolation	Love
Middle adulthood	Generativity vs stagnation	Care
Older adulthood	Integrity vs despair	Wisdom

These stages describe theoretical developmental challenges rather than mandatory outcomes.

17. Jean Piaget's Cognitive Development Theory

Stage	Approximate age	Characteristics
Sensorimotor	Birth-2 years	Learning through senses and actions; object permanence
Preoperational	2-7 years	Symbolic thinking, imagination and egocentrism
Concrete operational	7-11 years	Logical reasoning about concrete objects; conservation
Formal operational	12 years onward	Increasing ability for abstract and hypothetical reasoning

Important Piagetian Concepts

- Schema: Mental framework used to organize information.
- Assimilation: Incorporating new information into existing schemas.
- Accommodation: Modifying existing schemas to incorporate new information.
- Equilibration: Balancing assimilation and accommodation.
- Object permanence: Understanding that objects continue to exist when not visible.
- Conservation: Understanding that quantity remains unchanged despite changes in appearance.

18. Freud's Psychosexual Development Theory

Stage	Approximate age	Main theoretical focus
Oral	Birth-1 year	Mouth-related satisfaction
Anal	1-3 years	Bowel control
Phallic	3-6 years	Genital awareness
Latency	6 years-puberty	Social and intellectual development
Genital	Puberty onward	Mature sexuality and relationships

Freud's stages are historically important but are not strongly supported as a universal scientific explanation of personality development.

19. Kohlberg's Moral Development Theory

Level	Characteristics
Preconventional	Decisions influenced by punishment and personal reward
Conventional	Decisions influenced by social expectations, rules and duties
Postconventional	Decisions influenced by broader ethical principles and rights

The framework has cultural limitations and should not be used to judge a person's overall morality.

20. Child Psychology

Child psychology studies the behaviour, emotions, cognition and development of children.

Major Areas

- Attachment
- Emotional development
- Language development
- Learning
- Play
- Socialization
- Behavioural adjustment

Types of Play

Type	Description
Solitary play	Playing independently
Parallel play	Playing alongside other children
Associative play	Sharing activities without fully coordinated goals

Cooperative play	Playing together towards shared goals
Therapeutic play	Structured play that facilitates expression and preparation for healthcare

Psychological Effects of Hospitalization

- Separation anxiety
- Fear of unfamiliar people
- Fear of pain and procedures
- Loss of control
- Regression
- Disturbed sleep
- Emotional withdrawal

Nursing Management

- Encourage caregiver involvement.
- Provide age-appropriate explanations.
- Use therapeutic play.
- Maintain familiar routines.
- Provide comfort and pain management.
- Encourage developmentally appropriate independence.

21. Psychology of Vulnerable Individuals

Vulnerability may arise from illness, disability, age, financial hardship, discrimination, violence or limited social support.

Vulnerable group	**Important psychological considerations**
Children	Security, protection and emotional support
Adolescents	Identity, privacy and acceptance
Women facing discrimination or violence	Safety, autonomy, dignity and access to support
Persons with disabilities	Accessibility, inclusion and independence
Older adults	Dignity, companionship and adjustment

Chronically ill patients	Coping, treatment burden and emotional support

Terminally ill patients	Comfort, meaning and psychosocial support
Survivors of abuse	Safety, trust and trauma-informed care

Role of the Nurse

- Assess individual physical and psychological needs.
- Provide accessible communication.
- Maintain privacy and dignity.
- Promote informed decision-making.
- Identify safeguarding concerns.
- Avoid discrimination.
- Facilitate appropriate referrals and rehabilitation.

22. Psychology of Death and Dying

Death and dying may involve fear, sadness, anticipatory grief and changes in family relationships.

Kubler-Ross Model

The model describes five possible responses:

1. 1. Denial
2. 2. Anger
3. 3. Bargaining
4. 4. Depression
5. 5. Acceptance

These responses are not universal, sequential or compulsory.

Nursing Responsibilities

- Provide compassionate communication.
- Respect cultural and spiritual preferences.
- Support symptom management.
- Preserve dignity and privacy.
- Encourage family involvement according to patient preferences.
- Provide bereavement support and appropriate referral.

23. Important Examination Questions

Long Answer Questions

1. 1. Explain physical, cognitive and psychosocial development across the lifespan.
2. 2. Describe Erikson's psychosocial development theory.

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3. 3. Explain Piaget's cognitive development theory.
4. 4. Discuss the psychological needs of different age groups.
5. 5. Explain the role of nurses in caring for vulnerable individuals.

Short Answer Questions

1. 1. Principles of growth and development.
2. 2. Stages of prenatal development.
3. 3. Psychological effects of hospitalization on children.
4. 4. Types of play.
5. 5. Adolescent psychological needs.
6. 6. Kohlberg's moral development theory.
7. 7. Psychological care of older adults.
8. 8. Psychology of death and dying.

24. Quick Revision

- Erikson: Eight psychosocial stages.
- Piaget: Four cognitive stages.
- Freud: Five psychosexual stages.
- Kohlberg: Three levels of moral development.
- Infancy: Trust and attachment.
- Toddlerhood: Autonomy.
- Preschool: Initiative.
- School age: Industry and competence.
- Adolescence: Identity formation.
- Early adulthood: Intimacy.
- Middle adulthood: Generativity.
- Older adulthood: Integrity.

Practice questions

Choose one best answer. The answer key and explanations follow the questions.

1. Cephalocaudal development progresses:

A. From feet toward the head
B. From the extremities toward the centre
C. From head toward feet
D. Only during adolescence

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2. Piaget's sensorimotor stage is approximately:

A. Birth to 2 years

B. 2 to 7 years

C. 7 to 11 years

D. 11 years onward

3. Development from the centre of the body toward the extremities is called:

A. Cephalocaudal

B. Proximodistal

C. Retrograde

D. Convergent

4. A preschool child believes that a painful procedure is punishment for being naughty. Which nursing response is most appropriate?

A. Give a detailed adult-level explanation of physiology

B. Confirm that the procedure is punishment

C. Ignore the belief because children do not remember explanations

D. Explain simply that the procedure is not punishment and use age-appropriate play

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Answer key and explanations

1. C - From head toward feet

Cephalocaudal development follows a head-to-foot direction.

2. A - Birth to 2 years

The source table places the sensorimotor stage at birth to approximately 2 years.

3. B - Proximodistal

Proximodistal development proceeds from the centre toward the extremities.

4. D - Explain simply that the procedure is not punishment and use age-appropriate play

Preschool children may use magical thinking. Clear reassurance and simple explanations with play support understanding without reinforcing guilt.

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