

Developmental Stages

OBJECTIVES/RATIONALE

Developmental stages have specific behaviors appropriate and “normal” for that particular period in an individual’s life. Behavior is also affected by cultural and religious differences. The student will identify the stages of development and describe the behavior that characterizes each stage and individual differences of behavior due to culture, ethnicity, and religion.

TEKS 121.26 1C, 1D, 1E, 1F, 3B
121.2 1I, 1J

TAKS ELA 1, 4
Mathematics 1, 2, 9

KEY POINTS

POWERPOINT

- I. Human Development—From Infancy to Geriatrics
 - A. Development
 - 1. generally refers to successive changes in process of one’s natural growth
 - 2. occurs through maturation of physical and mental capacities and learning
 - B. Growth - Generally refers to changes in structure of size of a living organism
 - C. Human growth and development are ongoing processes beginning at birth ending at death
 - D. Individual needs must be met in every stage of growth and development - mental health workers need to be familiar with each developmental stage in order to provide competent and high quality healthcare
- II. Geriatrics
 - A. According to U.S. Government on Aging:
 - 1. there are approximately 29 million people aged 65 or older (that’s 12% of current population)
 - 2. by the year 2030, this number is expected to increase to 20%
 - B. physical and mental health of aged is a growing concern to medical community
- III. Life Stages
 - A. Infancy
 - 1. physical changes – height and weight (born weighing between 5 ½ to 10 pounds—generally double weight by 9 months)
 - 2. muscular and neurological motions – progress from uncoordinated movements of head and extremities to development of fine motor coordination
 - 3. teeth – generally born without teeth; usually develop by the 1st year
 - 4. vision – poor at birth (capable of focusing on objects 8 to 12 inches of face), but improves by 1 year to permit longer range of visual recognition and hand-eye coordination
 - 5. language – language of newborn is the cry; by one month, infant’s repertoire expands to include soft, throaty, and gurgling sounds
 - 6. feeding – hungry at irregular intervals; eats every 2 to 3 hours
 - 7. social being – responds to human voice and touch
 - B. Early Childhood (preschool/kindergarten years)
 - 1. One-year old
 - a. physical change from plump baby to leaner more muscular body of toddler
 - b. begins to walk and talk
 - c. ability for passive language (increasing ability to understand language)

- d. tentative sense of independence
 - e. determined explorer; constantly exploring by touching, holding climbing, and mouthing
- 2. Two-year old
 - a. begins to communicate verbally; most can tell their own name and names of common objects
 - b. can usually speak in 3 to 4 word sentences and carry on brief conversations
 - c. famous for negative behavior
 - 1) temper tantrums (most often out of frustration)
 - 2) say "NO" to everything
 - d. do not actively play with other children, rather enjoy playing side by side children their age
 - e. great imitators
- 3. Three-year old
 - a. more coordinated than the two-year old; climbs stairs with alternating feet and can stand briefly on one foot
 - b. vocabulary and pronunciation continue to expand
 - c. emotionally, three-year old loves parents and wants to be just like them
- 4. Four-year old
 - a. sentences more complex; speaks well enough for strangers to understand
 - b. imagination is vivid; line between what is real and imaginary often indistinct
 - c. develops fears (common fears include: fear of dark, fear of animals, and fear of death)
- 5. Five-year old
 - a. can hop on one foot and skip
 - b. can accurately copy figures such as triangle
 - c. continues to develop language skills
 - d. many begin to read
 - e. social with other children their age
- C. Late Childhood (preadolescence 6-12 years)
 - 1. physical development at a slow, but steady rate
 - 2. both large and small muscles are well-developed
 - 3. able to participate in physical activities that require complex motor skills and coordination
 - 4. visual acuity has matured to its best
 - 5. stage to learn morals and values
 - 6. progress from independent activities to group activities with members of same sex
 - 7. acceptance by peers is *very* important
 - 8. parental approval and reassurance are still basic needs
- D. Adolescence (begins around 12 or 13 and goes to 19 or 20 years)
 - 1. traumatic life stage for both child and any authoritative figure
 - 2. puberty occurs; physical changes occur rapidly during early years of this stage
 - 3. muscle coordination does not occur as quickly as physical changes; can make child clumsy and awkward
 - 4. stage where individuals learn to be accountable and accept responsibility for actions
 - 5. extremely concerned with appearance (their appearance and others)
 - 6. trying to establish self-identity
 - 7. feelings of uncertainty, inadequacy, and insecurity may surface
 - 8. confrontations with authority
- E. Young Adult (20-45 years)
 - 1. physical development complete and motor coordination is at its peak

2. emotional maturation continues to develop
 3. usually learned to accept responsibility for actions and to accept criticism
 4. usually knows how to profit from errors
 5. socially progressed from peer groups to associates with similar ambitions and desires (regardless of age)
- F. Middle Adulthood (40-45 to 55 years)
1. physical changes begin to occur (hair begins to thin and gray; wrinkles appear, muscles may lose tone and strength, hearing and vision may decrease)
 2. main concerns: children, health, job security, aging parents, and fear of aging
 3. love and acceptance still major role in lives of these individuals
- G. Late Adulthood – fastest growing age bracket of society (55-60 and up)
1. physical deterioration (brittle bones, skin dry and wrinkled, poor coordination)
 2. some memory problems
 3. coping with retirement and forms of entertainment
 4. chronically concerned with health
 5. concerned with finances
 6. significant number of elderly become depressed; suicide rate is high
 7. needs of elderly same as other life stages—feeling of acceptance, love, self-esteem, and financial security
- IV. Individual Differences
- A. Cultural/Subcultural differences – value systems, body language, proxemics
 - B. Ethnic differences – skin tones, facial features, language
 - C. Religious differences – Protestant, Catholic, Jewish, Buddhists, Agnostic, Muslim, etc.
 - D. Physical differences – large/small, thin/fat, anomalies, disabilities
 - E. Personalities – inherent predisposition to be outgoing, shy, sensitive, creative, etc.

ACTIVITIES

- I. Complete the personality profile and discuss characteristics of the different personality types. Calculate percentage of different personalities types in the class.
- II. Participate in a group discussion: Why is it important as a mental health professional to recognize chronic lack of age-appropriate behavior in individuals? (See Activity Guidelines)
- III. Invite a small panel of senior citizens to speak about growing up during the 20th-century.

***Teacher Note** This activity was utilized with a general psych class—it was great! Our senior friends love to talk and they gave the students insight as to what is considered “normal” according to social beliefs and world events –Great Depression, WWII, Social revolution of the ‘60s, etc.) Ask senior friends if they would bring pictures from their youth. Students should prepare discussion questions ahead of time.*

MATERIALS NEEDED

Understanding Yourself and Others Personality Profile

Activity Guideline: Age-Appropriate Behavior

Mental Health and Mental Illness, Sixth Edition, Patricia D. Barry, ISBN 0-397-55473-7, (Chapter 9)

Study Guide for Human Development/Understanding the Patient

Key for worksheet

Video: *Gross Anatomy* (for enrichment activity)

ASSESSMENT

Member of a Team Rubric
Completion of Personality Profile

ACCOMMODATIONS

For reinforcement, the student will complete the Study Guide for Human Development/ Understanding the Patient.

For enrichment, the students will evaluate the video *Gross Anatomy* and describe the “color” personality of each person that made up the gross anatomy dissection group. Based on this video, the students will predict contributions that different personalities can bring to groups.

REFLECTIONS

Understanding Yourself and Others Personality Profile

There are no “right” or “wrong” answers. This questionnaire will help you to determine your preferred social style. The results will provide an insight into:

- new awareness about yourself & others
- solving conflicts with others
- leadership, teamwork, & relationship insight

CIRCLE ONE WORD OR PHRASE PER LINE THAT BEST DESCRIBES YOUR BEHAVIOR STYLE:

1. assertive	conforming	sensitive	trusting
2. spontaneous	checks with others	mentally visualize	analyze/investigate
3. involved	orderly	straight forward	like to explore
4. stubborn	dictatorial	rebellious	easily discouraged
5. demanding	manipulative	uncooperative	silent/quiet
6. connects/joins	idea person	resists change	in charge
7. cautious	kindhearted	harmony	active
8. caring	outspoken	consistent behavior	mild
9. convincing	aggressive	disciplined	possessive
10. daring	dreamer	obedient	participating
11. logical	satisfied	friendly	bold
12. “eager beaver”	imaginative	accurate/precise	popular
13. reserved	innovative/new ideas	forceful	optimistic
14. power	teamwork	individual	conservative
15. talkative	restless	attentive	modest
16. leader	counselor	designer	controller
17. methodical	workaholic	helpful	self-directed
18. industrious	detailed	mentally active	hopeful
19. task-oriented	people-oriented	idea-oriented	result-oriented
20. emotional	flexible	likes recognition	precise
21. irritable	rigid	resentful	easily threatened
22. indirect	frank	careful	exact
23. goal oriented		volunteers for jobs	
_____ competent & steady		schedule oriented	
24. excels in emergencies		thrives on compliments	
_____ dry sense of humor		avoids causing attention	
25. enjoys watching people		strong-willed, decisive	
_____ energy & enthusiasm		perfectionist, high standards	
26. makes friends cautiously		behaves or dresses in flashy way	
_____ very self-confident		persistent & thorough	
27. neat & tidy		looks good on surface	
_____ avoids conflicts		is usually right	

Understanding Yourself and Others Personality Profile
Score Sheet

1. red	green	blue	yellow
2. red	yellow	blue	green
3. yellow	green	red	red
4. green	red	yellow	blue
5. red	yellow	green	blue
6. yellow	blue	green	red
7. green	blue	yellow	red
8. yellow	red	green	blue
9. yellow	red	green	blue
10. red	blue	green	yellow
11. green	blue	yellow	red
12. red	blue	green	yellow
13. green	blue	red	yellow
14. red	yellow	blue	green
15. yellow	red	green	blue
16. red	yellow	blue	green
17. green	red	yellow	blue
18. red	green	blue	yellow
19. green	yellow	blue	red
20. blue	yellow	red	green
21. red	green	blue	yellow
22. yellow	red	blue	green
<hr/>			
23. red		yellow	
blue		green	
<hr/>			
24. red		yellow	
blue		green	
<hr/>			
25. blue		red	
yellow		green	
<hr/>			
26. blue		yellow	
red		green	
<hr/>			
27. green		yellow	
blue		red	
<hr/>			

Profile Totals:

RED _____ YELLOW _____ BLUE _____ GREEN _____

Description of four basic personality types:

- Red - task and result oriented
honest
likes recognition
can't sit still
doesn't like to be late
enjoys individual sports (gold, fishing, tennis, etc.)
car: expensive or showy (often sports car)
swing set: pays to have someone put it together
- Yellow - people oriented
expressive
friendly
loves to talk
extravagant
optimist
enjoys team sports (football, basketball, etc.)
car: large enough to carry friends around in (CRV, van)
swing set: come to my house for a party
- Green - detail oriented
Precise
controlled
thrifty
does thing right the first time
completes the job
car: practical (small recreation vehicle, economy)
swing set: remove from carton carefully in case it must be returned,
count pieces, reads instructions
- Blue - creatively oriented
sincere
loyal
caring
sensitive
understanding
open-minded
enjoys nature
car: jeep
swing set: design it and build it from scratch

Name _____

Date _____

Study Guide for: Human Needs/Understanding the Patient

1. Reference to changes in structure or size of a living organism (i.e. human) is called:

2. According to studies done by our government, _____ percent of the population are aged 65 years or older.
3. The life stage where puberty occurs is _____.
4. In this age group (age group), a significant number of people become depressed and there is a high suicide rate. _____
5. Changes that occur over time in the process of one's natural growth is referred to as
_____.
6. Infants usually **double** their weight by what age? _____
7. The life stage whereby visual acuity is at its best is during: _____.
8. At what age should one expect children to have trouble distinguishing between what is imaginary and what is real? _____
9. Physical development is complete by what life stage? _____
10. At which life stage are people most concerned with their health?

11. List four individual differences that health care professionals should be aware of when taking care of patients:
 - 1) _____
 - 2) _____
 - 3) _____
 - 4) _____
12. The age range for late childhood is from _____ years of age to _____ years old.
13. Newborn infants are able to see almost immediately after birth, but can only focus on objects within a range of: _____.
13. The "determined explorer" describes a child who is how old? _____
14. At this age, a child loves his/her parents and wants to be *just* like them. _____
15. Motor coordination is at its peak during the _____ life stage.
16. Middle adulthood begins at what age? _____
17. How frequently should one expect newborns to be hungry? _____

18. Children are famous for temper tantrums at this age: _____
19. Children learn their morals and values by this life stage: _____
20. The age at which children commonly develop fears is : _____
21. "Identity crisis" might be used to describe this stage: _____
22. By the time a child is five, he or she should be capable of what kind of physical activity?

23. Children are often clumsy at this age due to muscle coordination not occurring as quickly as their body growth: _____
24. At what life stage will people associate with other individuals with life interests rather than peers just within their age bracket? _____
25. The main concerns of middle adulthood are: _____
_____.
26. Brittle bones and poor coordination describe this life stage: _____

MATCHING:

- | | |
|---|---------------------|
| A. infancy | D. adolescence |
| B. early childhood/presch. kindergarten | E. young adulthood |
| C. late childhood (preadolescence) | F. middle adulthood |
| | G. late adulthood |

- | | |
|--|--|
| _____ 1. acceptance by peers is very important | _____ 16. ability to understand language (passive language) |
| _____ 2. confrontations with authority | _____ 17. "NO" to everything! |
| _____ 3. age 65 & older | _____ 18. goes from plump baby to leaner toddler |
| _____ 4. great imitator | _____ 19. uncoordinated movements to fine motor coordination |
| _____ 5. accurately copies abstract signs & drawings | _____ 20. often feels insecure and inadequate |
| _____ 6 usually knows how to profit from errors | _____ 21. very concerned with finances |
| _____ 7. from 12 to 20 years old | _____ 22. speaks in 3 & 4 word sentences |
| _____ 8. begins to walk and talk | _____ 23. enjoys being with other children, but does not actively play with them |
| _____ 9. climbs stairs with alternating feet | |
| _____ 10. generally begins to read | |
| _____ 11. speaks well enough for strangers to understand | |
| _____ 12. problem life stage for both parent & child | |
| _____ 13. hair begins to thin & gray | |
| _____ 14. learns to accept responsibility for actions | |
| _____ 15. fastest growing age bracket | |

Key: Worksheet
Human Needs/Understanding the Patient

1. growth
2. 12%
3. adolescence
4. late adulthood
5. development
6. 9 months
7. late childhood
8. 4-year-old
9. young adulthood
10. late adulthood
11. (any four of the following) cultural or subcultural differences, ethnic differences, religious differences, physical differences, personalities
12. 6-12 years
13. 8 to 12 inches of face
14. 3-year-old
15. young adulthood
16. 40 years
17. every 2 to 3 hours
18. 2-years-old
19. late childhood
20. 4-years-old
21. adolescence
22. hop on one foot, copy geometric figures, continues language skills, begin to read, socialize with children their own age
23. adolescence
24. young adulthood
25. children, health, job security, aging parents, fear of aging
26. late adulthood

MATCHING:

- | | |
|-------|-------|
| 1. C | 19. A |
| 2. D | 20. D |
| 3. G | 21. G |
| 4. B | 22. B |
| 5. B | 23. B |
| 6. E | |
| 7. D | |
| 8. B | |
| 9. B | |
| 10. B | |
| 11. B | |
| 12. D | |
| 13. F | |
| 14. E | |
| 15. G | |
| 16. B | |
| 17. B | |
| 18. B | |

Activity Guidelines: Age-Appropriate Behavior

OBJECTIVE:

Identify the culture specific social ramifications of inappropriate age-related behavior.

GOAL:

Help students recognize that age-appropriate behavior is generally seen as normal and deviations from developmental stages often result in peer alienation and disapproval.

Part I:

- Group your students into teams of 4 or 5.
- Write the discussion question on the board:

Why is it important as a mental health professional to recognize chronic lack of age-appropriate behavior in individuals?

- Under the primary discussion topic, write down open-ended questions to encourage “brainstorming” and problem solving.
 - e.g.
 - Behavior that is not age-appropriate might demonstrate . . .
 - Individuals who “act-out” in juvenile ways are regarded as . . .
 - Children who seem too mature and/or intellectual for their age are regarded as . . .
- Have the different groups share their opinions and reiterate their statements for reinforcement.

Part II:

- Ask students if age-appropriate behavior for American children is cross-cultural. (African children, Asian children, etc.)
- Point out how value-paradigms define normal behavior. (i.e. Young unwed ladies during the 1950s who got pregnant put their child up for adoption, whereas nowadays, many unwed mothers keep their babies. It would have seemed inappropriate to keep a child born out of wedlock during the ‘50s.)
- Last—have the students explore the paradox of adolescent behavior. Explain to the students that this is the only developmental stage whereby it is “normal” for teens to act out in ways that are often not age-appropriate.
 - Have your students write down some of those ways
 - wanting to mimic adult behavior—driving freedom, drinking, smoking, sexual relationships, ignoring curfews, etc.
 - acting like a child—throwing tantrum
- Remind students that although inappropriate behavior and identity crises are commonly seen as the hallmark of adolescent behavior, that does not give them cart blanche to act out in class!