

UNIT-2

PSYCHOLOGY AND DEVELOPMENT

OBJECTIVES:

After going through this unit carefully you will be able to:

1. Understand the Concept, difference between Growth and Development, Factors influencing development & Principles of growth and development
2. Understand the Piaget's Theory of cognitive development
3. Understand the Erickson's Theory of psycho-social development & Kohlberg's Theory of moral development

INTRODUCTION

In psychology, though, growth and maturation are a little different. Growth is the physical process of development, particularly the process of becoming physically larger. It is quantifiable, meaning that it can be measured, and it is mostly influenced by genetics. For example, the year that she was 11, Keisha got taller by two inches. This is an example of growth because it involves her getting physically taller and is quantifiable (two inches).\

On the other hand, maturation is the physical, intellectual, or emotional process of development. Maturation is often not quantifiable, and it too is mostly influenced by genetics. For example, as Keisha became older, her brain developed in a way that meant she was able to handle more complex tasks than she could before.

GROWTH AND DEVELOPMENT

Growth” and “development” always come in pairs. Psychology defines “growth” as “the physical change that a particular individual undergoes.” And psychology defines “development” as “the overall growth of humans throughout their lifespan.” Development includes the understanding of how and why people change in terms of physical growth, intellectual, emotional, social, and other aspects of human growth.

S.NO	GROWTH	DEVELOPMENT
1.	Growth mainly focuses on quantitative improvement while development is associated with both qualitative and quantitative improvement. For instance, growth is associated with measurable changes in weight and height.	On the other hand, development is identified when substantial changes in IQ are recorded in your child’s brain power. For instance, child’s IQ level is relatively low during childhood but can improve significantly into adulthood.

2.	Growth ends at maturation while development continues until an individual's demise. As a teacher or parent, it is important to note that growth ends at maturation. The child will experience various changes associated with growth between childhood and maturation at adolescence.	Development is a consistent process and continues throughout life. The child has the unique potential to absorb as much knowledge and skills to handle various life challenges into adulthood. Even at 50 years, they can exhibit advanced skills such as oratory and problem-solving skills based on their vast experience.
3	Growth is dependent on cellular changes. Growth begins at conception and progresses into adulthood. From conception, the child's body experiences massive changes based on changes in cellular growth. An increase in cellular size and number indicates that the child is undergoing growth.	While development is dependent on organizational transformation. Development is often witnessed at a home or school environment when the child experiences skillset changes. This simply means that any skills learnt such as reading or arithmetic are indicative of the child's development changes. The older they get, the more likely they are to understand complex skills associated with computation and reasoning.
4	Growth is associated with the progressive physical change from one stage to another. Differences in body size that are evident in clothing size changes reveal the growth changes experienced by the child.	On the other hand, development is the gradual transformation of behavioral and skill set changes. Development is usually characterized by behavioral and skillset changes. The child might outgrow certain childish behavior as they approach adolescence or acquire advanced writing, oratory and computation skills. These changes aren't out of the ordinary but only attest to the development changes experienced by the child.
5	Growth is external in nature. These features include increased body parts sizes such as hands, legs, ears, and much more. These changes usually manifest over time based on improved nutrition and general wellbeing.	Unlike growth, development is an internal process and isn't visible by the naked eye. Instead, it requires a comprehensive evaluation of the child's reasoning, creativity and innovation to ascertain their development status. This can be achieved by setting various tests designed to evaluate your child's IQ in relation with creativity and reasoning.
6	Growth dictates changes in physical appearance while development dictates change in the character of an individual. Growth is easily discernible based on changes in physical appearance. These	On the other hand, development pays much emphasis in the character changes of an individual. The child might have been naughty during their early age but over time, they are likely to transform

	changes manifest over time and include increased body size and voice intonation.	into a mature young adult. With each passing day, they outgrow certain habits that can only be traced back to character changes.
7	Growth takes place within a limited scope of time while development takes place within a vast scope of time. This means that growth spans from conception to adolescence depending on the child's growth rate. During this period, the child undergoes progressive body changes designed to transform them into adults.	Development isn't confined by time or age. The child can acquire a plethora of skills to handle various tasks and challenges regardless of their location or background. The best part about skill acquisition is that it can still happen beyond 35 year old if the determination and commitment exists.
8	Growth focuses on one aspect of the child's life. Naturally, growth is a size-oriented process from conception to adulthood	On the other hand, development is an all-inclusive process designed to analyze various aspects of the child's life. This usually stems from the need to evaluate their capacity to interact with their peers and adults in an effective way. While their interpersonal skills might be unpolished at a young age, the child is expected to make improvements based on their advanced critical thinking and reasoning skills as they get older.

Factors influencing development

the factors affecting a child's development, they have been grouped into four areas:

1. Environmental factors
2. Biological factors
3. Interpersonal relationships
4. Early environments and experiences (Shanker, 2008; Blair & Diamond, 2008)

I. Environmental Factors

Factor or condition	Child-level determinants	Family-level determinants	Community-level determinants	Society-level determinants
Housing	Does the child have space to play and explore?	Is there overcrowding?	Is there green space such as parks where children can play?	Is there evidence of community building when planning new

				developments?
	Is the child safe from injury or contaminants such as lead?	Are there any housing conditions contributing to ill health such as moisture and molds?	Is the community safe from crime and environmental pollution?	Is there housing support for low income families?
Income	Does the child have adequate clothing - e.g. snowsuit and boots in winter weather?	Is the family experiencing financial stress or a high debt load?	Are there low cost community programs for children and families?	Are social assistance programs and subsidies available and accessible to those in need?
	Does the child receive adequate nutrition? Fresh fruits and vegetables are more costly in Northern communities.	Is the family a single parent family or do they have to rely on one income?	Does the community provide secure access to food such as food banks?	Do programs exist that provide specific subsidies for food?
Employment	Does the child have quality child care, when parents are working?	Do families, especially single parents, have child care stress?	Does the community have high rates of employment?	Is there equality in income?
		Do families have meaningful and adequate employment?	Do families have to commute to access meaningful employment?	
Education	Does someone read and play with the child?	What level of education do family members have?	Is parental engagement in early education encouraged in the community?	Are programs in place to keep adolescents in school and improve their education?
	Does the child have access to books and toys that stimulate	Do families have practices and beliefs that	Are there options for adult and family education, including	

	literacy development?	encourage literacy development?	ESL classes?	
	Does the child attend quality early childhood education programs?	Do families have access to early childhood education programs?		Is early childhood education valued, and supported through policies and practice?

II. Biological Factors

Factor or condition	Child-level determinants	Family-level determinants	Community-level determinants	Society-level determinants
Gender	Is the child a boy or a girl? Boys and girls tend to develop and learn differently (e.g. currently boys have lower levels of school readiness).	Is there evidence of gender stereotyping, or abuse in the family?	Are women and men from various cultures and backgrounds evident as community leaders?	Are women's rights, women's equality and children's rights protected?
General health	Was the child born with a healthy birth weight? Being born small or large for gestational age is linked to obesity and chronic disease.	How was the mother's preconception and prenatal health? Folic acid intake for 3 months prior to conception significantly reduces neural tube defects.	Is there access to health services in the community (e.g. medical, dental, vision, hearing, speech and language)?	Is there universal access to quality health and specialty services for children?
	Does the child have a medical condition?	Do family members have chronic conditions? Parents with disabilities or chronic disease	Is there community support for people with disabilities?	Is there adequate financial and program support for families with disabilities?

		may require added supports.		
Mental Health	Does the child have a warm and nurturing environment?	How is the mother's perinatal mental health? 1 in 5 mothers will suffer from depression, anxiety or another mood disorder during pregnancy or the first year after birth.	Are there programs to support mothers' mental health during pregnancy and postpartum?	Is there societal support to reduce social stigma of mental illness and provide perinatal mental health services?
	Does the child have consistent and responsive care-givers?	Do family members experience trauma, abuse or poor mental health?	Are there community supports such as shelters, respite care, programs and services that promote coping skills?	Is there societal support to reduce social stigma of abuse and provide services for victims of trauma and abuse and those experiencing mental illness?
Health practices	Does the child have a pattern for eating, sleeping and playing?	Does the family attend to nutrition, set consistent times for sleep and engage in active play?	Are there parenting classes that offer information on nutrition, sleeping and activity?	
	Is the child breastfed or receiving breast milk?	Does the family have information and support to make an informed choice to breastfeed?	Is there public, peer and professional support for breastfeeding women?	Is the practice of exclusive breastfeeding to 6 months and continued breastfeeding with complementary foods accepted and encouraged?

	Does the child take part in structured and unstructured physical activities for at least 60 minutes and up to several hours per day?	Are physical activity practices encouraged by family members?	Are community programs and spaces available to encourage physical activity year round?	Is free, active play and physical activity encouraged in pre-school and kindergarten curriculum?
	Are children introduced to consistent oral hygiene practices?	Are oral hygiene and dental health practices encouraged?	Are low cost dental programs available?	

III. Interpersonal Relationships

Relationships are particularly important as infants learn primarily through their relationship with others. Eye contact, smiles and imitation set the stage for more sustained communication and meaningful exchanges and engagement with parents and other caregivers, and a growing world of relationships (Field, 2007; Gerhardt, 2004; Greenspan & Shanker, 2004; Shanker, 2008).

Factor or condition	Child-level determinants	Family-level determinants	Community-level determinants	Society-level determinants
Attachment	Does the child show a secure attachment pattern to her primary caregiver?	Is the primary caregiver available and responsive to the child cues to assist her in developing a secure attachment?	Are programs available to promote attachment parenting?	Are primary caregivers given financial and instrumental support to develop a secure attachment with their child (e.g. self-employed mothers do not receive maternity benefits)?
Parenting styles	Does the child experience a consistent	Do parents provide a consistent	Are parenting programs available? Parents	Are the rights and responsibilities of parents recognized

	parenting style?	parenting style (e.g. authoritative, authoritarian, permissive or uninvolved)?	use their own parents as role models, but don't want to make the same mistakes as their parents.	in workplace and other policies?
Social networks	Does the child have relationships with other adults and children?	Does the family have extended family and/or social networks they belong to?	Are interest groups available that include the whole family (e.g. religious groups, cultural groups, activity groups)?	Is there societal support for the development of diverse interest groups that include the whole family?
	Does the child have friends and is there evidence of peer acceptance?	Is there evidence of acceptance of the family within the community or network?	Does the community foster a sense of belonging for all families regardless of cultural, sexual or religious orientation?	Is there evidence of support of human rights, and lack of discrimination?

IV. Early Environments and Experiences

These have already been mentioned in the examples given. The most important early environment for an infant is the primary caregiver. How the primary caregiver responds to the child shapes the early brain pathways and builds the foundation for future learning. Early experiences involve all senses through:

- Touch - e.g., skin-to-skin holding
- Smell - e.g., smell of mother's skin and breastmilk
- Taste - e.g., taste of breastmilk
- Sight - e.g., eye contact, gazing at face
- Hearing - e.g., hearing a familiar voice

A child needs experiences like these to develop his/her social, emotional, language, cognitive, and physical skills (Greenspan & Shanker, 2004; McCain, Mustard & Shanker, 2007; Shanker 2010). Over time these experiences become more and more complex until the child has reached the ability to think symbolically, build bridges between ideas, connect feelings and develop an understanding of how the world works. All this is done through continued reciprocal interactions with adults and peers (Greenspan & Shanker, 2004; Mandler, 2004).

Principles of Growth and Development

Human development involves change. This change occurs at various stages of development and the development pattern at each stage has predictable characteristics. You might have observed that development is a product of maturity and learning. Maturity is more or less automatic, unfolding biological potential. It is an irreversible sequence and entails biological changes. Such changes are relatively independent of environmental factors as long as environmental factors remain normal. There is a more or less permanent change in human behavior from the individual's experience in the environment. Learning occurs across the entire life span. It differs from maturity. However, learning depends on the process of maturing i.e. individual readiness (mental and physical) for certain activities.

There is a set of principles that characterizes the pattern and process of growth and development. These principles or characteristics describe typical development as a predictable and orderly process: that is, we can predict how most children will develop and that they will develop at the same rate and at about the same time as other children. Although there are individual differences in children's personalities, activity levels, and timing of developmental milestones, such as ages and stages, the principles and characteristics of development are universal patterns.

PRINCIPLES OF DEVELOPMENT

Development proceeds from the head downward. This is called the cephalocaudal principle (The cephalocaudal principle refers to the general pattern of physical and motoric development followed from infancy into toddlerhood and even early childhood whereby development follows a head-to-toe progression.). This principle describes the direction of growth and development. According to this principle, the child gains control of the head first, then the arms, and then the legs. Infants develop control of the head and face movements within the first two months after birth. In the next few months, they are able to lift themselves up by using their arms. By 6 to 12 months of age, infants start to gain leg control and may be able to crawl, stand, or walk. Coordination of arms always precedes coordination of legs.

Development proceeds from the center of the body outward. This is the principle of proximodistal development that also describes the direction of development. This means that the spinal cord develops before outer parts of the body. The child's arms develop before the hands and the hands and feet develop before the fingers and toes. Finger and toe muscles (used in fine motor dexterity) are the last to develop in physical development. Development depends on maturation and learning. Maturation refers to the sequential characteristic of biological growth and development. The biological changes occur in sequential order and give children new abilities. Changes in the brain and nervous system account largely for maturation. These changes in the brain and nervous system help children to improve in thinking (cognitive) and motor (physical) skills. Also, children must mature to a certain point before they can progress to new skills (Readiness).

For example, a four-month-old cannot use language because the infant's brain has not matured enough to allow the child to talk. By two years old, the brain has developed further and with help from others, the child will have the capacity to say and understand words. Also, a child can't write or draw until he has developed the motor control to hold a pencil or crayon. Maturational patterns are innate, that is, genetically programmed. The child's environment and the learning that occurs as a result of the child's experiences largely determine whether the child will reach optimal development. A stimulating environment and varied experiences allow a child to develop to his or her potential. Development proceeds from the simple (concrete) to the more complex. Children use their cognitive and language skills to reason and solve problems. For example, learning relationships between things (how things are similar), or classification, is an important ability in cognitive development. The cognitive process of learning how an apple and orange are alike begins with the most simplistic or concrete thought of describing the two. Seeing no relationship, a preschool child will describe the objects according to some property of the object, such as color. Such a response would be, "An apple is red (or green) and an orange is orange." The first level of thinking about how objects are alike is to give a description or functional relationship (both concrete thoughts) between the two objects. "An apple and orange are round" and "An apple and orange are alike because you eat them" are typical responses of three, four and five year olds. As children develop further in cognitive skills, they are able to understand a higher and more complex relationship between objects and things; that is, that an apple and orange exist in a class called fruit. The child cognitively is then capable of classification.

Growth and development is a continuous process. As a child develops, he or she adds to the skills already acquired and the new skills become the basis for further achievement and mastery of skills. Most children follow a similar pattern. Also, one stage of development lays the foundation for the next stage of development. For example, in motor development, there is a predictable sequence of developments that occur before walking. The infant lifts and turns the head before he or she can turn over. Infants can move their limbs (arms and legs) before grasping an object. Mastery of climbing stairs involves increasing skills from holding on to walking alone. By the age of four, most children can walk up and down stairs with alternating feet. As in maturation, in order for children to write or draw, they must have developed the manual (hand) control to hold a pencil and crayon.

Growth and development proceed from the general to specific. In motor development, the infant will be able to grasp an object with the whole hand before using only the thumb and forefinger. The infant's first motor movements are very generalized, undirected, and reflexive, waving arms or kicking before being able to reach or creep toward an object. Growth occurs from large muscle movements to more refined (smaller) muscle movements.

There are individual rates of growth and development. Each child is different and the rates at which individual children grow is different. Although the patterns and sequences for growth and development are usually the same for all children but the rates at which individual children reach

developmental stages will be different. Understanding this fact of individual differences in rates of development should cause us to be careful about using and relying on age and stage characteristics to describe or label children. There is a range of ages for any developmental task to take place. This dismisses the notion of the "average child"

Some children will walk at ten months while others walk a few months older at eighteen months of age. Some children are more active while others are more passive. This does not mean that the passive child will be less intelligent as an adult. There is no validity to comparing one child's progress with or against another child. Rates of development also are not uniform within an individual child. For example, a child's intellectual development may progress faster than his emotional or social development. An understanding of the principles of development helps us to plan appropriate activities and stimulating and enriching experiences for children, and provides a basis for understanding how to encourage and support young children's learning. These principles or characteristics describe typical development as a predictable and orderly process: that is, we can predict how most children will develop and that they will develop at the same rate and at about the same time as other children. Although there are individual differences in children's personalities, activity levels, and timing of developmental milestones, such as ages and stages, the principles and characteristics of development are universal patterns.

[Click on the link to open the hyperlink by right click of your mouse to watch the Video for Human Development](#)

[Click on the link to open the hyperlink by right click of your mouse to watch the Video for Principles of Growth & Development](#)

PIAGET'S THEORY OF COGNITIVE DEVELOPMENT

Piaget (1936) was the first psychologist to make a systematic study of cognitive development. His contributions include a stage theory of child cognitive development, detailed observational studies of cognition in children, and a series of simple but ingenious tests to reveal different cognitive abilities.

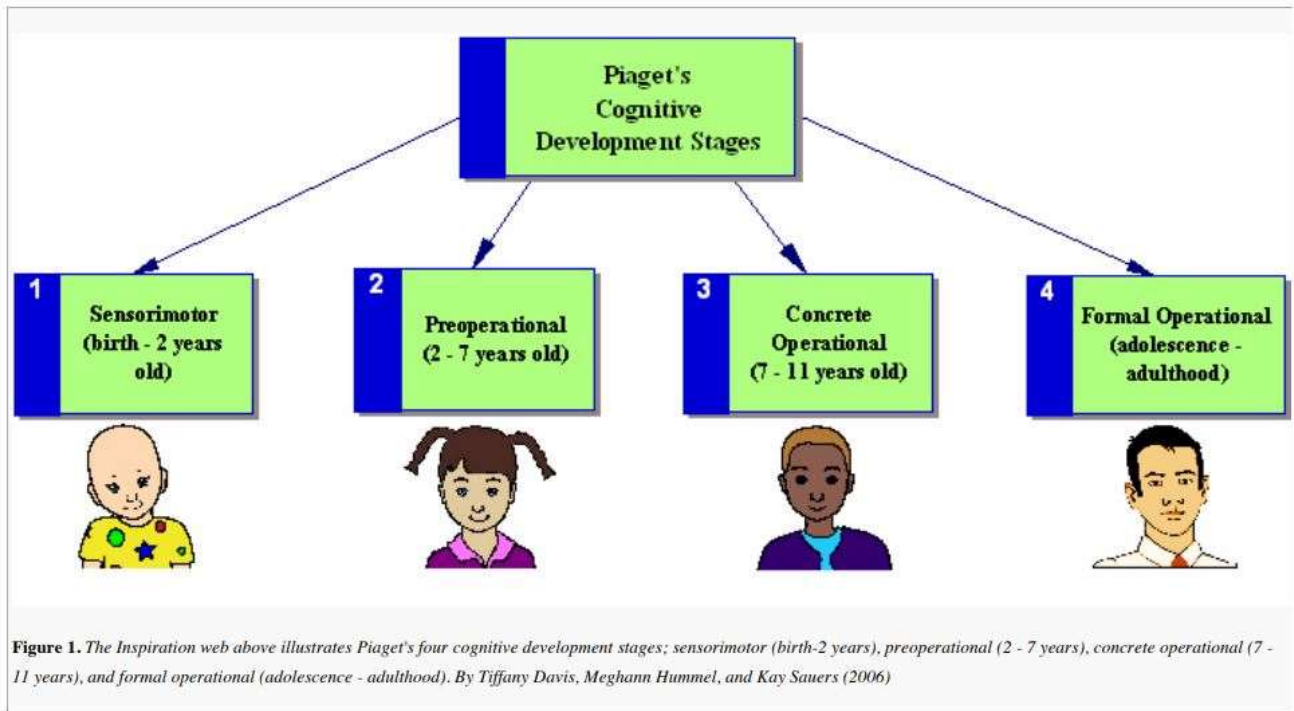
Piaget's theory of cognitive development explains how a child constructs a mental model of the world. He disagreed with the idea that intelligence was a fixed trait, and regarded cognitive development as a process which occurs due to biological maturation and interaction with the environment.

What Piaget wanted to do was not to measure how well children could count, spell or solve problems as a way of grading their I.Q. What he was more interested in was the way in which fundamental concepts like the very idea of number, time, quantity, causality, justice and so on emerged.

In studying the cognitive development of children and adolescents, Piaget identified four major stages: sensorimotor, preoperational, concrete operational and formal operational. Piaget believed all children pass through these phases to advance to the next level of cognitive development. In each stage, children demonstrate new intellectual abilities and increasingly complex understanding of the world. Stages cannot be "skipped"; intellectual development always follows this sequence. The ages at which children progress through the stages are averages--they vary with the environment and background of individual children. At any given time a child may exhibit behaviors characteristic of more than one stage.

Stages of Cognitive Development

The first stage, sensorimotor, begins at birth and lasts until 18 months-2 years of age. This stage involves the use of motor activity without the use of symbols. Knowledge is limited in this stage, because it is based on physical interactions and experiences. Infants cannot predict reaction, and therefore must constantly experiment and learn through trial and error. Such exploration might include shaking a rattle or putting objects in the mouth. As they become more mobile, infants' ability to develop cognitively increases. Early language development begins during this stage. Object permanence occurs at 7-9 months, demonstrating that memory is developing. Infants realize that an object exists after it can no longer be seen. The preoperational stage usually occurs during the period between toddlerhood (18-24months) and early childhood (7 years). During this stage children begin to use language; memory and imagination also develop. In the preoperational stage, children engage in make believe and can understand and express relationships between the past and the future. More complex concepts, such as cause and effect relationships, have not been learned. Intelligence is egocentric and intuitive, not logical.



The concrete operational stage typically develops between the ages of 7-11 years. Intellectual development in this stage is demonstrated through the use of logical and systematic manipulation of symbols, which are related to concrete objects. Thinking becomes less egocentric with increased awareness of external events, and involves concrete references.

The period from adolescence through adulthood is the formal operational stage. Adolescents and adults use symbols related to abstract concepts. Adolescents can think about multiple variables in systematic ways, can formulate hypotheses, and think about abstract relationships and concepts. Piaget believed that intellectual development was a lifelong process, but that when formal operational thought was attained, no new structures were needed. Intellectual development in adults involves developing more complex schema through the addition of knowledge.

[Click on the link to open the hyperlink by right click of your mouse to watch the Video for Piaget's Theory of cognitive development](#)

ERICKSON'S THEORY OF PSYCHO-SOCIAL DEVELOPMENT

Erik Erikson (1902–1994) was a stage theorist who took Freud's controversial theory of psychosexual development and modified it as a psychosocial theory. Erikson emphasized that the ego makes positive contributions to development by mastering attitudes, ideas, and skills at each stage of development. This mastery helps children grow into successful, contributing members of society. During each of Erikson's eight stages, there is a psychological conflict that must be

successfully overcome in order for a child to develop into a healthy, well-adjusted adult. Erikson also added to Freud's stages by discussing the cultural implications of development; certain cultures may need to resolve the stages in different ways based upon their cultural and survival needs.

1. Trust vs. Mistrust

From birth to 12 months of age, infants must learn that adults can be trusted. This occurs when adults meet a child's basic needs for survival. Infants are dependent upon their caregivers, so caregivers who are responsive and sensitive to their infant's needs help their baby to develop a sense of trust; their baby will see the world as a safe, predictable place. Unresponsive caregivers who do not meet their baby's needs can engender feelings of anxiety, fear, and mistrust; their baby may see the world as unpredictable. If infants are treated cruelly or their needs are not met appropriately, they will likely grow up with a sense of mistrust for people in the world.

2. Autonomy vs. Shame/Doubt

As toddlers (ages 1–3 years) begin to explore their world, they learn that they can control their actions and act on their environment to get results. They begin to show clear preferences for certain elements of the environment, such as food, toys, and clothing. A toddler's main task is to resolve the issue of autonomy vs. shame and doubt by working to establish independence. This is the "me do it" stage. For example, we might observe a budding sense of autonomy in a 2-year-old child who wants to choose her clothes and dress herself. Although her outfits might not be appropriate for the situation, her input in such basic decisions has an effect on her sense of independence. If denied the opportunity to act on her environment, she may begin to doubt her abilities, which could lead to low self-esteem and feelings of shame.

3. Initiative vs. Guilt

Once children reach the preschool stage (ages 3–6 years), they are capable of initiating activities and asserting control over their world through social interactions and play. According to Erikson, preschool children must resolve the task of initiative vs. guilt. By learning to plan and achieve goals while interacting with others, preschool children can master this task. Initiative, a sense of ambition and responsibility, occurs when parents allow a child to explore within limits and then support the child's choice. These children will develop self-confidence and feel a sense of purpose. Those who are unsuccessful at this stage—with their initiative misfiring or stifled by over-controlling parents—may develop feelings of guilt.

4. Industry vs. Inferiority

During the elementary school stage (ages 6–12), children face the task of industry vs. inferiority. Children begin to compare themselves with their peers to see how they

measure up. They either develop a sense of pride and accomplishment in their schoolwork, sports, social activities, and family life, or they feel inferior and inadequate because they feel that they don't measure up. If children do not learn to get along with others or have negative experiences at home or with peers, an inferiority complex might develop into adolescence and adulthood.

5. Identity vs. Role Confusion

In adolescence (ages 12–18), children face the task of identity vs. role confusion. According to Erikson, an adolescent's main task is developing a sense of self. Adolescents struggle with questions such as "Who am I?" and "What do I want to do with my life?" Along the way, most adolescents try on many different selves to see which ones fit; they explore various roles and ideas, set goals, and attempt to discover their "adult" selves. Adolescents who are successful at this stage have a strong sense of identity and are able to remain true to their beliefs and values in the face of problems and other people's perspectives. When adolescents are apathetic, do not make a conscious search for identity, or are pressured to conform to their parents' ideas for the future, they may develop a weak sense of self and experience role confusion. They will be unsure of their identity and confused about the future. Teenagers who struggle to adopt a positive role will likely struggle to "find" themselves as adults.

6. Intimacy vs. Isolation

People in early adulthood (20s through early 40s) are concerned with intimacy vs. isolation. After we have developed a sense of self in adolescence, we are ready to share our life with others. However, if other stages have not been successfully resolved, young adults may have trouble developing and maintaining successful relationships with others. Erikson said that we must have a strong sense of self before we can develop successful intimate relationships. Adults who do not develop a positive self-concept in adolescence may experience feelings of loneliness and emotional isolation.

7. Generativity vs. Stagnation

When people reach their 40s, they enter the time known as middle adulthood, which extends to the mid-60s. The social task of middle adulthood is generativity vs. stagnation. Generativity involves finding your life's work and contributing to the development of others through activities such as volunteering, mentoring, and raising children. During this stage, middle-aged adults begin contributing to the next generation, often through childbirth and caring for others; they also engage in meaningful and productive work which contributes positively to society. Those who do not master this task may experience stagnation and feel as though they are not leaving a mark on the world in a meaningful way; they may have little connection with others and little interest in productivity and self-improvement.

8. Integrity vs. Despair

From the mid-60s to the end of life, we are in the period of development known as late adulthood. Erikson's task at this stage is called integrity vs. despair. He said that people in late adulthood reflect on their lives and feel either a sense of satisfaction or a sense of failure. People who feel proud of their accomplishments feel a sense of integrity, and they can look back on their lives with few regrets. However, people who are not successful at this stage may feel as if their life has been wasted. They focus on what "would have," "should have," and "could have" been. They face the end of their lives with feelings of bitterness, depression, and despair.

A ninth stage was added by Erik Erikson's wife, Joan Erikson. It considers new challenges experienced with continued aging and incorporates aspects from all previous eight stages of psychosocial development.

The sequential layout of Erikson's Stages of Psychosocial Development might initially suggest that stage outcomes become fixed once the next stage is engaged. While there is a fixed sequence, resolution can be a life-long process, re-activated at various times depending on life events that affect the ego strength or maldeveloped belief pattern. Resolution is not required to move on to the next stage. Additionally, with advancement to a new stage, preceding stages are questioned and must be reintegrated. This is why his theory is sometimes referred to as an 'epigenetic principle.' Additional research suggests that the latter four stages are, to an extent, a repetition of previous stages. As an example, the stage of intimacy can be considered a combination of autonomy and trust. Thus, the developmental stages and formation of identity is an ever-evolving process, as opposed to a rigid concrete system.

[Click on the link to open the hyperlink by right click of your mouse to watch the Video for Erickson's Theory of Psycho-Social Development](#)

KOHLBERG'S THEORY OF MORAL DEVELOPMENT

Kohlberg's stages of moral development are planes of moral adequacy conceived by Lawrence Kohlberg to explain the development of moral reasoning. Created while studying psychology at the University of Chicago, the theory was inspired by the work of Jean Piaget and a fascination with children's reactions to moral dilemmas. He wrote his doctoral dissertation at the university in 1958, outlining what are now known as his stages of moral development.

This theory holds that moral reasoning, which is the basis for ethical behaviour, has six identifiable developmental stages. He followed the development of moral judgment beyond the ages originally studied by Piaget, who claimed that logic and morality develop through

constructive stages. Kohlberg expanded considerably on this groundwork, determining that the process of moral development was principally concerned with justice and that its development continued throughout the lifespan, even spawning dialogue of philosophical implications of his research.

Kohlberg used stories about moral dilemmas in his studies, and was interested in how people would justify their actions if they were put in a similar moral crux. He would then categorize and classify evoked responses into one of six distinct stages. These six stages were broken into three levels: pre-conventional, conventional and post-conventional. His theory is based on constructive developmental stages; each stage and level is more adequate at responding to moral dilemmas than the last.

One of Kohlberg's best known experiments is known as the Heinz Dilemma. In this experiment, Kohlberg presented a story about a man named Heinz:

Heinz's wife had a form rare cancer and was dying. A doctor told Heinz that a local chemist had invented a new drug that might save his wife. Heinz was very happy to hear this and went to talk to the chemist. When Heinz saw the price tag of the new drug, he was devastated because there was no way he could afford the drug. Heinz also knew that the price was ten times of the cost of the drug so the chemist was making a big buck from this drug.

Heinz tried his best to borrow money from his friends and family, but the money was still not enough. He went back to the chemist and begged the chemist to lower the price. The chemist refused to do that. Heinz knew that his wife would die without this new drug, so he broke into the chemist's office that night and stole the drug.

[Click on the link to open the hyperlink by right click of your mouse to watch the Video for Kohlberg's Heinz Dilemma](#)

After telling Heinz's story to children in various age groups, Kohlberg asked them what Heinz should do. Based on the children's responses, Kohlberg classified their moral reasoning into three levels, each of which contains two distinct substages:

I. Pre-Conventional

The pre-conventional level of moral reasoning is especially common in children, although adults can also exhibit this level of reasoning. Reasoners in the pre-conventional level judge the morality of an action by its direct consequences. The pre-conventional level consists of the first and second stages of moral development, and are purely concerned with the self in an egocentric manner.

- a. In stage one, individuals focus on the direct consequences that their actions will have for themselves. For example, an action is perceived as morally wrong if the

person who commits it gets punished. The worse the punishment for the act is, the more 'bad' the act is perceived to be. In addition, there is no recognition that others' points of view are any different from one's own view. This stage may be viewed as a kind of authoritarianism.

- b. Stage two espouses the what's in it for me position, right behaviour being defined by what is in one's own best interest. Stage two reasoning shows a limited interest in the needs of others, but only to a point where it might further one's own interests, such as you scratch my back, and I'll scratch yours. In stage two concern for others is not based on loyalty or intrinsic respect. Lacking a perspective of society in the pre-conventional level, this should not be confused with social contract (stage five), as all actions are performed to serve one's own needs or interests. For the stage two theorist, the perspective of the world is often seen as morally relative.

II. **Conventional**

The conventional level of moral reasoning is typical of adolescents and adults. Persons who reason in a conventional way judge the morality of actions by comparing these actions to societal views and expectations. The conventional level consists of the third and fourth stages of moral development.

- a. In Stage three, the self enters society by filling social roles. Individuals are receptive of approval or disapproval from other people as it reflects society's accordance with the perceived role. They try to be a good boy or good girl to live up to these expectations, having learned that there is inherent value in doing so. Stage three reasoning may judge the morality of an action by evaluating its consequences in terms of a person's relationships, which now begin to include things like respect, gratitude and the 'golden rule'. Desire to maintain rules and authority exists only to further support these stereotypical social roles. The intentions of actions play a more significant role in reasoning at this stage; 'they mean well.'
- b. In Stage four, it is important to obey laws, dictums and social conventions because of their importance in maintaining a functioning society. Moral reasoning in stage four is thus beyond the need for individual approval exhibited in stage three; society must learn to transcend individual needs. A central ideal or ideals often prescribe what is right and wrong, such as in the case of fundamentalism. If one person violates a law, perhaps everyone would - thus there is an obligation and a duty to uphold laws and rules. When someone does violate a law, it is morally wrong; culpability is thus a significant factor in this stage as it separates the bad domains from the good ones.

III. **Post-Conventional**

The post-conventional level, also known as the principled level, consists of stages five and six of moral development. Realization that individuals are separate entities from

society now becomes salient. One's own perspective should be viewed before the society's. It is due to this 'nature of self before others' that the post-conventional level, especially stage six, is sometimes mistaken for pre-conventional behaviors.

In Stage five, individuals are viewed as holding different opinions and values, and it is paramount that they be respected and honored impartially. Issues that are not regarded as relative like life and choice should never be withheld or inhibited. In fact, no single choice is correct or absolute – 'who are you to judge if they are or not'? Along a similar vein, laws are regarded as social contracts rather than rigid dictums. Those that do not promote general social welfare should be changed when necessary to meet the greatest good for the greatest number of people. This is attained through majority decision, and inevitably compromise. In this way democratic government is ostensibly based on stage five reasoning.

In Stage six, moral reasoning is based on abstract reasoning using universal ethical principles. Laws are valid only insofar as they are grounded in justice, and that a commitment to justice carries with it an obligation to disobey unjust laws. Rights are unnecessary as social contracts are not essential for deontic moral action. Decisions are met categorically in an absolute way rather than hypothetically in a conditional way (see Immanuel Kant's 'categorical imperative'). This can be done by imagining what one would do being in anyone's shoes, who imagined what anyone would do thinking the same (see John Rawls's 'veil of ignorance'). The resulting consensus is the action taken. In this way action is never a means but always an end in itself; one acts because it is right, and not because it is instrumental, expected, legal or previously agreed upon. While Kohlberg insisted that stage six exists, he had difficulty finding participants who consistently used it. It appears that people rarely if ever reach stage six of Kohlberg's model.

In his empirical studies of persons across their life-span, Kohlberg came to notice that some people evidently had undergone moral stage regression. He was faced with the option of either conceding that moral regression could occur, or revise his theory. Kohlberg chose the latter, postulating the existence of sub-stages wherein the emerging stage has not yet been adequately integrated into the personality. In particular Kohlberg noted of a stage 4½ or 4+, which is a transition from stage four to stage five, sharing characteristics of both. In this stage the individual has become disaffected with the arbitrary nature of law and order reasoning. Culpability is frequently turned from being defined by society to having society itself be culpable. This stage is often mistaken for the moral relativism of stage two as the individual considers society's conflicting interests with their own choices relatively and morally wrong. Kohlberg noted that this was often seen in students entering college.

Kohlberg further speculated that a seventh stage may exist (Transcendental Morality or Morality of Cosmic Orientation) which would link religion with moral reasoning (see James W. Fowler's stages of faith development). However, because of Kohlberg's trouble providing empirical

evidence for even a sixth stage, he emphasized that most of his conjecture towards a seventh stage was theoretical.

[Click on the link to open the hyperlink by right click of your mouse to watch the Video for Kohlberg's Theory of Moral Development](#)

SUMMARY

To conclude we can say that growth and development are terms that refer to dynamic processes that begin at conception. Human growth is the progressive increase in physical size of a child whereas; human development is progressive acquisition of various skills and abilities. The process of growth and development is predictable and it follows a sequence. Both processes go hand in hand, are interrelated and none occurs apart from the other but the rates at which it occurs might be different. Erikson proposed that we are motivated by the need to achieve competence in certain areas of our lives. According to psychosocial theory, we experience eight stages of development over our lifespan, from infancy through late adulthood. At each stage there is a crisis or task that we need to resolve. Successful completion of each developmental task results in a sense of competence and a healthy personality. Failure to master these tasks leads to feelings of inadequacy. Also, Lawrence Kohlberg expanded on the earlier work of cognitive theorist Jean Piaget to explain the moral development of children, which he believed follows a series of stages. Kohlberg defined three levels of moral development: pre-conventional, conventional, and post-conventional. Each level has two distinct stages.

SELF ASSESSMENT

- 1) Karan is 9 years old. He hit his brother while they were playing a game and his brother started crying. His mom asked him why hitting his brother is wrong, and he told her that it's wrong because he knows that "people aren't supposed to hit other people." Karan is most likely in which of Kohlberg's stages of moral development?**

ANSWER: Karan is in the conventional stage of Kohlberg's stages of moral development as in the conventional stage of moral development, right vs. wrong is based upon societal conventions and expectations. Since Karan stated something that is a social convention, rather than a personal ethical belief, he is demonstrating features of the conventional stage of development.

- 2) What are common themes in cognitive and human development?**

ANSWER: As human development can be defined as a scientific field that concerns itself with the examination of various changes that occur throughout human life. In general, there are three domains of development studied in this field: cognitive domain, socio-emotional domain, and physical domain.

In the study of human development, one common theme is the role of nurture and nature in development. While it has been fiercely debated in the past, currently the general consensus is that both nurture and nature play an equally important role in human development. Another common theme is the quality of human development. There are some aspects of development that can be considered as quantitative development since they do not involve the emergence of a new function, but only the expansion of an existing function (e.g., greater memory capacity). There are also some aspects of development that can be considered as qualitative development (e.g., the emergence of theory-of-mind).

3) What activities aid cognitive development?

ANSWER: There are four different groups of activities that promote cognitive development in early learners. Cognitive development, or brain development, in the preschool years is incredibly important for early learners as they proceed from grade to grade.

a. Working memory

Memory games like go fish or “Concentration” help to develop neuron connections in early learners’ brains and also serve to increase working memory. Additionally, memory games naturally lend themselves to quiet concentration in early learners, which assists in the development of focus and increased attention span.

b) Sorting and classifying

Sorting and classifying is one of the first activities early learners participate in that assists them in developing comparison and contrast skills essential for grade school. Sorting and classifying is particularly important at the early learning stage because it may be one of the last opportunities children have to develop oral skills in comparison and contrast prior to learning to write fluently. Inspiration Laboratories (<http://inspirationlaboratories.com/ideas-to-practice-classification-for-kids/>) has some great (and easy!) sorting and classifying activities that can take place at home in addition to your child’s early learning center. They even include letter sorting activities!

c) Sequencing and ordering

Sequencing and ordering are essential cognitive skills for early learners (and something that even college students struggle with!), as they are skills that are needed in both the real world and in school. Sequencing and ordering is probably the first concentrated exposure that early learners have to transition words like “first,” “second,” “then,” and “last.” Children can participate in story sequencing with pictures, or guessing games with well-known stories like fairy tales.

d) Pretend or imaginary play

Pretend or imaginary play (sometimes known as symbolic play), is essential for early learners' cognitive development of imagination, curiosity, and problem-solving skills. Additionally, imaginary play assists early learners in developing focus and concentration skills through working with material and thoughts that they are interested in. Many adults find it difficult to fully participate in imaginary play with early learners, but there are plenty of great resources available.

4) Why did Lawrence Kohlberg present children with the Heinz dilemma?

ANSWER: To assess the children's moral development Lawrence Kohlberg presented the children with the Heinz dilemma. Lawrence Kohlberg is arguably the most influential psychologist in the field of moral development, particularly in children. He posits that humans can fall into three different stages of morality: pre-conventional, conventional, and post-conventional morality. He used paradigms like the Heinz dilemma to assess children's responses, and determine which level of morality they possess.

5) Which are the important characteristics of development?

ANSWER: The following are the important characteristics of development-

- a) **Development is a continuous process:** The process of growth and development continues from the moment of conception until the individual reaches maturity. It takes place at a slow but regular pace rather than by leaps and bounds. Development of both physical and mental traits continues gradually until these traits reach their maximum growth.
- b) **Development follows a pattern :** Development occurs in an orderly manner and follows a certain sequence. Thus, infancy, early childhood, later childhood, adolescence and maturity is the sequence of development in the human beings.
- c) **Development proceeds from general to specific responses:** The responses or the reactions of a child are of general nature to start with. He reacts to the situations and external stimuli with the whole of his body. Gradually, he learns to have specific responses. This is not only true of his physical responses only, but also of his intellectual and emotional responses. The responses of a child which are of general nature first, gradually become more and more specific. This is a sign of development and maturation.
- d) **Different aspects of growth develop at different rates:** Though development is a continuous process, yet the rate of growth is not uniform. Thus, there are periods of accelerated growth and period of decelerated growth. During the first three years of infancy, the rate of growth is rapid, then, the rate of growth slows down, which is again accelerated at the adolescent stage. Similarly, neither all parts of the body grow at the same rate, nor do all aspects of mental growth progress equally. Thus, they reach maturity at different times.

- e) **Most traits are correlated in development:** Generally, it has been observed that the child, whose intellectual development is above average, is also superior in so many other aspects, e.g. health, sociability and special aptitudes. Similarly, this mental development is intimately related to his physical growth.
- f) **Development is a product of interaction of the organism and environment:** Neither heredity alone, nor the mere environment possible for the development of an individual. Both are responsible for human growth and development though, it is not possible to indicate exactly in what proportion heredity and environment contribute to the development of an individual.
- g) **There are wide individual differences in growth pattern:** Individuals differ from each other in their pattern and rate of growth. There is definite evidence to show that differences in physical structure are le marked than the differences in intellectual capacity. Similarly, it has seen found out that personality differences are far more marked to neither physical or intellectual differences. The individual differences are caused by differences in hereditary endowment and environment influences. This has also been established that individual differences in rates of development remain constant. For ample, a child who is slow in learning is early childhood will remain so throughout. A bright child will be so from his early childhood.
- h) **Growth is both quantitative and qualitative:** As the child grows physically, he also develops regarding the qualitative aspects of his personality. That means, as the child grows in age, his mental and emotional functions also develop. Thus these two aspects are inseparable.
- i) **Development is predictable:** The rate of development of each child is fairly constant, that is, a slow learner will ever remain so, and a superior child is so from the very beginning. Thus, it is possible to predict at an early age the range within which the mature development of the child is likely to fall; though the prediction cannot be made accurately.
- j) **Development is affected by many factors:** Human growth and development is a very complex phenomenon. It is affected by a number of factors. These factors are intelligence physical health, nutrition, glands of internal secretion, position in the family, social status in the family, social status of the family and general environment at different stages in varying degrees.

MULTIPLE CHOICE QUESTIONS

- 1) **Which of the following is Erikson's stage for middle adulthood?**
 - a) generativity versus stagnation
 - b) intimacy versus isolation
 - c) autonomy versus shame
 - d) integrity versus despair

ANSWER: b

2) The environmental conditions that influence development are called:

- a) ethology
- b) ecological systems
- c) socio-cultural
- d) nurture

ANSWER: d

3) Which developmental theory was based on how children learn by observing and imitating others' behavior?

- a) Classical
- b) Operant conditioning
- c) Psychosocial
- d) Social learning theory

ANSWER: d

4) Piaget's theory of cognitive development began with his study of:

- a) rhesus monkeys
- b) mollusks
- c) children
- d) dogs

ANSWER: b

5) Which researcher believed that children adjust their understanding as they learn about the world?

- a) Vygotsky
- b) Skinner
- c) Piaget
- d) Bandura

ANSWER: c

6) According to Erikson's psychosocial theory:

- a) competent parents protect their children from developmental crises
- b) crises occur when the ego faces overwhelming anxiety
- c) early developmental crisis is one source of later mental health difficulties
- d) all development involves crises

ANSWER: a

7) Piaget's theory of cognitive development is essentially about:

- a. the influence of the social world on the growing child
- b. the development of the ability to think
- c. therapeutic procedures to correct incorrect cognitions
- d. problems in sensory-motor development

ANSWER: b

8) Piaget reasoned that before the individual can organize and interpret experience, they must first:

- a. represent it mentally
- b. create schemas
- c. receive appropriate tuition
- d. intellectualize it

ANSWER: a

9) The cognitive stage in which abstract thought emerges is:

- a. preoperational
- b. sensorimotor
- c. concrete operational
- d. formal operational

ANSWER: d

10) Which of the following is not characteristic of physical development in early adulthood?

- a. Reaching the peak of physical performance
- b. Notice of the decline in physical performance
- c. Large changes in the sensory systems
- d. Increase in the body's fatty tissue

ANSWER: c

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