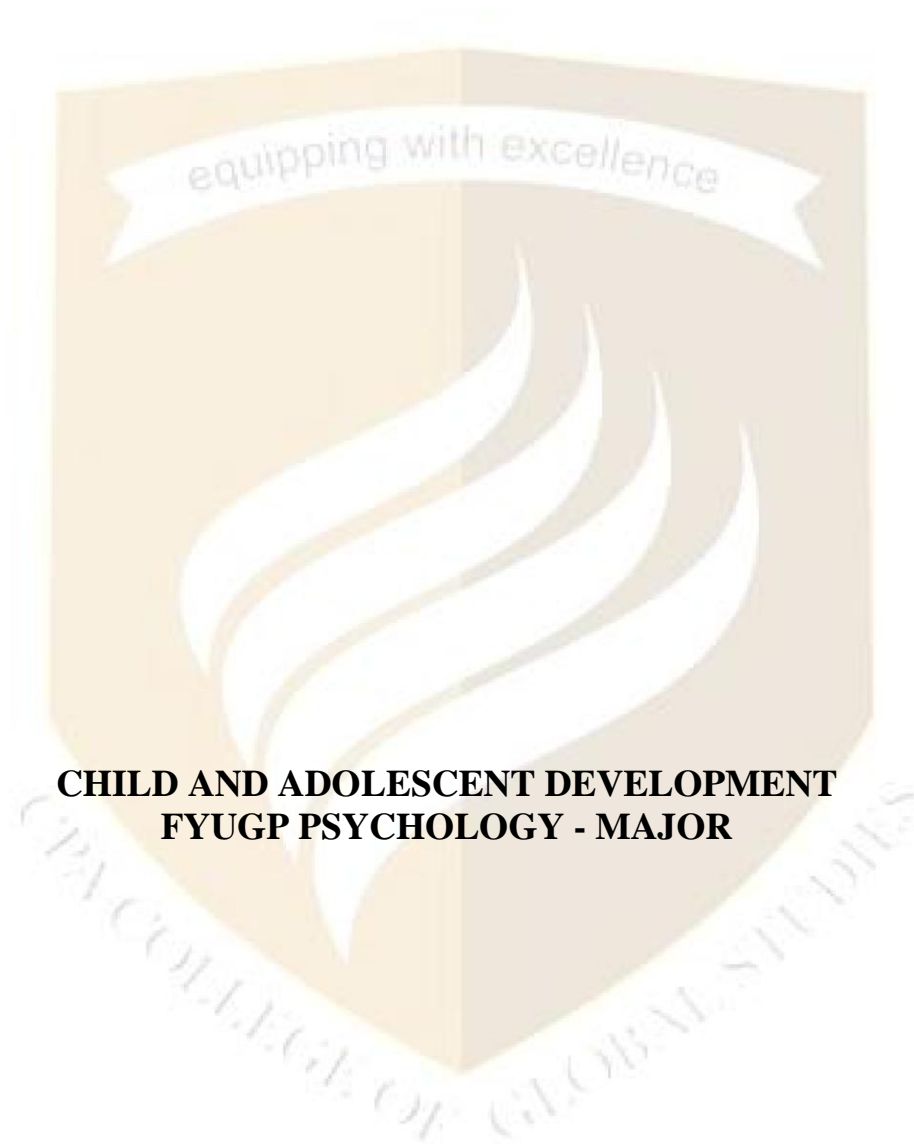


**CALICUT UNIVERSITY**

**FOURTH SEMESTER**

**FOUR-YEAR UNDER GRADUATE PROGRAMME (CU-FYUGP)**



**CHILD AND ADOLESCENT DEVELOPMENT  
FYUGP PSYCHOLOGY - MAJOR**

**PREPARED BY  
PREETHI T V  
DEPARTMENT OF PSYCHOLOGY**

## Group name: Child and adolescent development

Course code	PSY3CJ201				
Course title	Child and Adolescent Development				
Type of course	Major with Practicum				
Semester	IV				
Academic level	200 -299				
Course details	Credit	Lecture per week	Tutorial per week	Practical per week	Total hours
	4	3		2	75
Pre requisites	NIL.				
Course objectives					

## **Module 1: Introduction to Developmental Psychology**

- Historical foundations.
- Lifespan perspective- characteristics of lifespan perspective.
- Nature of development- Biological, Cognitive, and Socioemotional Processes. Periods of Development. Developmental tasks of each stage. The Significance of Age. Developmental Issues.
- Theories of development (brief): Freud, behaviourist, social learning, Erikson, Ethological theory and Ecological theory.
- Role of heredity and environment: The nature nurture debate.
- Research in lifespan development: methods, designs and ethics (brief)

## **Module2: Physical growth and development from Prenatal period to adolescence.**

- Prenatal Development: Fertilization, Germinal Period, Embryonic Period, Fetal Period. Prenatal environmental influences- Teratogens, other maternal factors.
- Birth Process: Types, methods- Prenatal and perinatal diagnostic tests. Birth Complication and their effects.
- Physical and motor development: patterns of growth, the development of brain and body, need for sleep and nutrition. New born Reflexes, Gross and fine motor skills.
- Sensory and perceptual development: development of visual and other senses.
- Pubertal changes in boys and girls. The impact of pubertal events. Factors affecting physical development. Parent child relationships

## **Module 3: Cognitive development**

- Piaget's theory of Cognitive Development: Process of development, 4 stages- Sensory Motor, Preoperational, Concrete operational and Formal Operational stage.
- Vygotsky's Sociocultural Cognitive Theory
- Language development: Prelinguistic, Phonological, Semantic, Grammatical and Pragmatic development.
- Theories of language development
- Critical evaluation of cognitive development theories.

## **Module 4: Socio emotional development from infancy to adolescence**

- Temperament-Classifications
- Emotions-types of emotions. Emotional behaviour from infancy to adolescence.
- Development of self -Erikson, Marcia-Identity development. Gender identity, the role of peer group

and media.

- Process of Socialisation from infancy to adolescence.
- Development of attachment -Bowlby's and Ainsworth's theory, Factors affecting attachment.
- Moral development-theories: Piaget, Kohlberg.
- Role of family, parenting, play, peer relations friendship and media in socio emotional development

### **Books and References:**

Berk, L.E (2016). Exploring lifespan development. New Delhi: Pearson Education Pvt Ltd

Hurlock, E.B (1996). Developmental Psychology-A Life span Approach. New Delhi: Tata McGraw Hill Publishing Company

Papalia, D.E [et.al](#) (2004). Human Development (9th Ed). New Delhi: Tata McGraw Hill Publishing Company

Santrock, J.E (2011). Life span development (13th Ed) New Delhi: Tata McGraw Hill Publishing Company.



## 1. Historical Foundations

- Early ideas about child development.
- Children once viewed as miniature adults.
- Scientific study began in the 19th century.
- Major contributors: Charles Darwin, G. Stanley Hall, Sigmund Freud, Jean Piaget.
- Developmental psychology studies changes across the lifespan.

## 2. Lifespan Perspective

Characteristics of lifespan development:

- Lifelong – development occurs throughout life.
- Multidimensional – involves physical, cognitive and socio-emotional changes.
- Multidirectional – growth in some areas and decline in others.
- Plasticity – capacity for change.
- Contextual – influenced by historical, cultural and social context.
- Multidisciplinary – studied by psychology, sociology, anthropology etc.

## 3. Nature of Development

Three major processes:

Biological Processes:

- Physical changes in body and brain.
- Genetic inheritance.
- Hormonal changes.

Cognitive Processes

- Thinking, memory, reasoning, intelligence.
- Language development.

Socioemotional Processes

- Personality development.
- Emotions and relationships.
- Social skills and identity formation.

## 4. Periods of Development

- Prenatal period – conception to birth.
- Infancy – birth to 2 years.
- Early childhood – 2 to 6 years.
- Middle childhood – 6 to 11 years.
- Adolescence – 11 to 18 years.

## 5. Developmental Tasks of Each Stage

(Havighurst)

- Tasks expected to be achieved at specific stages.
- Successful completion leads to happiness and success.
- Failure leads to difficulty in later tasks.

Examples:

Infancy – walking, talking.

Childhood – learning social roles.

Adolescence – identity formation.

## 6. Significance of Age

Age categories used to understand development:

- Chronological age – actual age in years.
- Biological age – physical development level.
- Psychological age – adaptive abilities and intelligence.
- Social age – social roles and expectations.

## 7. Developmental Issues

Key debates in developmental psychology:

- Nature vs Nurture – heredity vs environment.
- Continuity vs Discontinuity – gradual vs stage development.
- Stability vs Change – permanence vs change in traits.
- Early vs Later experiences – importance of early childhood.

## MODULE II: PHYSICAL GROWTH AND DEVELOPMENT

### 1. Prenatal Development

#### Fertilization

- Union of sperm and ovum forming zygote.

#### Germinal Period (0–2 weeks)

- Rapid cell division.
- Zygote travels to uterus.
- Embryonic Period (3–8 weeks)
- Formation of organs.
- Critical stage for development.

#### Fetal Period (2 months to birth)

- Growth and maturation of body systems.

- Movement and sensory development.

## 2. Prenatal Environmental Influences

**Teratogens:** Harmful agents affecting prenatal development.

Examples:

- Alcohol
- Drugs
- Smoking
- Radiation
- Infections

### Other Maternal Factors

- Nutrition
- Stress
- Age of mother
- Health conditions

## 3. Birth Process

Stages of labour:

Childbirth occurs in three stages of labour.

- The first stage (dilation) involves opening of the cervix due to uterine contractions.
- The second stage (expulsion) is when the baby moves through the birth canal and is delivered.
- The third stage (placental stage) occurs after birth when the placenta and umbilical cord are expelled from the uterus.

### Types of childbirth:

- Natural (vaginal) birth is the normal delivery of a baby through the birth canal without surgical intervention. It usually involves less medical procedures and faster recovery for the mother.
- Caesarean section (C-section) is a surgical method in which the baby is delivered through an incision in the mother's abdomen and uterus. It is used when vaginal delivery may cause risk to the mother or baby.
- Assisted childbirth involves medical tools such as forceps or vacuum extraction to help deliver the baby. It is used when labour becomes difficult or prolonged.

## 4. Prenatal and Perinatal Diagnostic Tests

### Ultrasound

Uses sound waves to produce images of the fetus.

Helps detect:

- Fetal growth
- Structural abnormalities

- Position of the baby

### **Amniocentesis**

A sample of amniotic fluid is taken from the uterus.

Detects:

- Chromosomal disorders
- Genetic diseases
- Neural tube defects

### **Chorionic Villus Sampling (CVS)**

- Small sample taken from placenta tissue.
- Used to identify genetic abnormalities early in pregnancy.

### **Maternal Blood Screening**

Blood tests used to detect risk of:

- Down syndrome
- Neural tube defects
- Other genetic conditions

### **5. Birth Complications**

Examples:

- Low birth weight
- Premature birth
- Oxygen deprivation
- Birth injuries

Effects:

- Developmental delays
- Health complications

### **6. Physical and Motor Development**

Patterns of Growth

- Cephalocaudal trend – head to toe.
- Proximodistal trend – centre to extremities.

Brain Development

- Rapid growth during infancy.
- Formation of neural connections.

### **7. Need for Sleep and Nutrition**

- Adequate sleep essential for growth.

- Balanced nutrition supports brain development.

## 8. Newborn Reflexes

- Newborn reflexes are automatic responses present at birth that help infants survive and adapt to their environment.
- These reflexes indicate the proper functioning of the nervous system. Examples include the rooting reflex (turning head toward touch), sucking reflex (automatic sucking for feeding), and grasping reflex (holding objects placed in the palm).
- Other reflexes include the Moro reflex (startle reflex) and Babinski reflex, which gradually disappear as the child develops.

## 9. Motor Skills

### Gross Motor Skills

- Walking
- Running
- Jumping

### Fine Motor Skills

- Grasping
- Writing
- Drawing

## 10. Sensory and Perceptual Development

- Sensory development refers to the development of the five senses: vision, hearing, smell, taste, and touch. At birth, touch and hearing are well developed, while vision improves gradually during infancy.
- Perceptual development is the ability to organize and interpret sensory information from the environment. Infants gradually learn to recognize faces, objects, and distances.
- Research such as the visual cliff experiment shows that depth perception begins to develop during early infancy.

## 11. Pubertal Changes

### Physical changes

- Hormonal changes
- Growth spurt
- Development of secondary sexual characteristics

### In Boys

- Voice deepening
- Facial hair
- Muscle growth

In Girls

- Breast development
- Menstruation
- Hip widening

## 12. Factors Affecting Physical Development

- Genetics
- Nutrition
- Health
- Physical activity
- Environment

## 13. Parent–Child Relationships

- Secure relationships support healthy development.
- Parenting styles influence physical and emotional wellbeing.

## MODULE III: COGNITIVE DEVELOPMENT

### 1. Piaget’s Theory of Cognitive Development

Development occurs through assimilation and accommodation.

Stages:

#### Sensorimotor Stage

- (0–2 years)
- Learning through senses and actions.
- Development of object permanence.

#### Preoperational Stage

- (2–7 years)
- Symbolic thinking develops.
- Egocentrism present.
- Lack of logical thinking.

#### Concrete Operational Stage

- (7–11 years)
- Logical thinking about concrete objects.
- Understanding conservation.

#### Formal Operational Stage

- (11+ years)
- Abstract thinking.

- Hypothetical reasoning.

## 2. Vygotsky's Sociocultural Cognitive Theory

- Cognitive development influenced by social interaction.
- Learning occurs through culture and language.

Key concepts:

- **Zone of Proximal Development (ZPD):** Gap between what child can do alone and with help.
- **More Knowledgeable Other (MKO):** Teacher, parent or peer guiding learning.
- **Scaffolding:** Temporary support for learning.

## 3. Language Development

- Language development refers to the process through which children learn to understand and use language for communication. It involves the development of sounds, vocabulary, grammar and the ability to use language in social contexts. Language development is influenced by biological maturation and social interaction.
- **Prelinguistic Stage:** This stage occurs before the use of actual words, usually during the first year of life. Infants communicate through crying, cooing and babbling. These vocalizations help babies practice sounds and interact with caregivers.
- **Phonological Development:** Phonological development refers to the learning of speech sounds and pronunciation. Infants gradually learn to recognize and produce the sounds of their native language. Babbling becomes more organized and begins to resemble real words.
- **Semantic Development:** Semantic development involves learning the meaning of words and expanding vocabulary. Children begin to associate words with objects, actions and ideas. Vocabulary grows rapidly during early childhood.
- **Grammatical (Syntactic) Development:** Grammatical development refers to the learning of rules for forming sentences. Young children initially use telegraphic speech, which includes only key words such as "want milk". With age, children learn more complex grammar and sentence structures.
- **Pragmatic Development:** Pragmatics refers to the social use of language in communication. Children learn how to take turns in conversation, adjust language according to the listener and follow social rules of communication. Pragmatic skills improve through interaction with family, peers and teachers.

## 4. Theories of Language Development

### Behaviourist Theory

- The behaviourist theory, proposed by B.F. Skinner, suggests that language is learned through imitation, reinforcement and conditioning.
- Children imitate the speech of adults and receive positive reinforcement when they use words correctly. Through repeated practice, language skills gradually develop.

### Nativist Theory

- The nativist theory was proposed by Noam Chomsky, who argued that humans have an innate ability to acquire language.
- He suggested the existence of a Language Acquisition Device (LAD), a biological mechanism that enables children to learn language easily.
- According to this theory, language development is largely biologically programmed.

### **Interactionist Theory**

- The interactionist theory emphasizes the interaction between biological factors and social environment.
- Language develops through communication between children and caregivers.
- Social interaction provides opportunities for children to practice and refine their language skills.

## **5. Critical Evaluation of Cognitive Theories**

### **Piaget Theory–**

#### **Strengths**

- Emphasized active learning.
- Introduced stages of cognitive development.

#### **Limitations**

- Underestimated children's abilities.
- Stages may not be rigid.

### **Vygotsky Theory–**

#### **Strengths**

- Importance of culture and social interaction.
- Role of language in thinking.

#### **Limitations**

- Less emphasis on biological factors.

## **MODULE IV: SOCIO-EMOTIONAL DEVELOPMENT**

### **1. Temperament**

- Temperament refers to the inborn, biologically based patterns of emotional and behavioral responses.
- It is present from birth, relatively stable, and forms the foundation of personality.

#### **Thomas and Chess Classification**

##### **a) Easy Child**

- Regular routines
- Positive mood
- Easily adaptable
- Low intensity reactions

Example: Adjusts easily to school and new situations.

##### **b) Difficult Child**

- Irregular routines
- Negative mood
- High emotional intensity
- Poor adaptability

Example: Cries often, resists change.

### c) Slow-to-Warm-Up Child

- Low activity level
- Withdrawn initially
- Gradual adaptation

Example: Takes time to feel comfortable in new settings.

## 2. Emotions

### Types of emotions:

#### 1. Basic / Primary Emotions

- These are inborn and universal.
- They appear in infancy and help the baby communicate needs before language.
- These happen naturally from birth. Baby doesn't think — just reacts.
- Example: Interest- Baby looks carefully at a moving fan, Joy-Smiles when mother talks, Anger-Cries when toy is taken away, Sadness-Cries when mother leaves, Fear-Holds mother when stranger comes.

#### 2. Self-conscious/Secondary emotion

- Emotions that happen when a child becomes aware of self and thinks what others feel about them.
- Age of appearance: Around 18–24 months (after child recognizes self in mirror).
- Why they occur: Child compares behaviour with social rules — good or bad.
- Examples: Shame (hides after mistake), Guilt (says sorry), Pride (shows achievement), Embarrassment (shy in front of guests), Jealousy (when attention goes to sibling).

## 2. Emotional Development

- Infants show basic emotions.
- Emotional regulation improves with age.
- Adolescents experience intense emotions.

## 3. Development of Self

Erikson's Psychosocial Theory

Stages relevant to childhood:

### 1. Trust vs Mistrust

(0–1 year): Infant learns whether caregivers are reliable. Successful resolution → Sense of trust and security.

Failure → Fear and insecurity.

## 2. Autonomy vs Shame and Doubt

(1–3 years): Child develops independence (toilet training, walking). Encouragement → Confidence. Over-criticism → Shame and self-doubt.

## 3. Initiative vs Guilt

(3–6 years): Child takes initiative in play and activities. Support → Sense of purpose. Discouragement → Guilt.

## 4. Industry vs Inferiority

(6–12 years): School-age children compare themselves with peers. Success → Competence and self-confidence. Failure → Inferiority feelings.

## 5. Identity vs Role Confusion

(Adolescence – Most Important Stage): During adolescence, individuals ask: Who am I? What career should I choose? What are my beliefs and values?

## 4. Marcia's Identity Development

Four identity statuses:

- James Marcia expanded Erikson's concept of identity development and proposed four identity statuses based on the presence or absence of exploration and commitment. These statuses describe how adolescents form their sense of self.
- **Identity Diffusion:** Individuals have not explored different identity options and have not made commitments about their goals, beliefs or career. They may feel uncertain about their future and lack a clear sense of direction.
- **Foreclosure:** In foreclosure, individuals commit to an identity without exploring alternatives. Often they adopt values and goals chosen by parents or society without questioning them.
- **Moratorium:** This stage involves active exploration of different identities and roles, but no firm commitment yet. Adolescents may experience confusion while trying to decide their beliefs, career choices or values.
- **Identity Achievement:** Individuals reach identity achievement after exploring different options and making firm commitments. They develop a clear sense of personal identity and life goals.

## 5. Gender Identity

- Gender identity refers to an individual's awareness and understanding of being male or female. It usually develops during early childhood as children begin to identify with gender roles.
- Gender identity is influenced by biological factors (genetics and hormones), social influences (family and peers), and cultural expectations. Society teaches children appropriate behaviours associated with each gender.

## 6. Role of Peer Group and Media

- Peer Group: Peer groups play an important role in social and emotional development, especially during childhood and adolescence. Interaction with peers helps children learn cooperation, sharing, leadership

and conflict resolution. Peers also influence behaviour, attitudes, and self-esteem, as children often seek acceptance and approval from their friends.

- **Media:** Media such as television, internet, and social media influence children's attitudes, beliefs, and behaviour patterns. It can shape their understanding of gender roles, social norms and lifestyles. While media can provide educational information, excessive exposure may lead to negative influences such as aggression or unrealistic expectations.

## **7. Process of Socialisation**

- Socialisation is the lifelong process through which individuals learn the values, norms, behaviours and roles of society.
- It helps individuals become effective members of society.
- Through socialisation, children learn language, social rules, cultural traditions and appropriate behaviour.

## **Major Agents of Socialisation**

- **Family:** The family is the primary agent of socialisation and teaches basic values, beliefs and behaviour patterns. School Schools help children learn discipline, social rules, cooperation and academic skills. Peers Peers influence attitudes, interests and social behaviour.
- **Media:** Media exposes children to different ideas, lifestyles and cultural values. Culture Cultural traditions and customs shape the beliefs and behaviour of individuals.

## **8. Development of Attachment**

- Attachment refers to the strong emotional bond between an infant and the caregiver. It plays an important role in the child's emotional security and social development.
- **Bowlby's Attachment Theory** John Bowlby proposed that attachment is biologically programmed and helps ensure the survival of the infant. According to him, early attachment experiences influence later emotional and social relationships.
- **Ainsworth's Attachment Types** Mary Ainsworth identified different patterns of attachment through the Strange Situation experiment.
- **Secure Attachment** Infants feel safe and confident with the caregiver and become distressed when separated but easily comforted when the caregiver returns.
- **Avoidant Attachment** Infants show little distress when the caregiver leaves and avoid contact when the caregiver returns.
- **Resistant (Ambivalent) Attachment** Infants become very upset when the caregiver leaves and show mixed reactions when the caregiver returns.
- **Disorganized Attachment** Infants show confused or inconsistent behaviour, often due to stressful or neglectful caregiving.

## **9. Factors Affecting Attachment**

Several factors influence the formation and quality of attachment between the child and caregiver.

- **Parenting Style:** Warm and responsive parenting promotes secure attachment, while harsh or neglectful parenting may lead to insecure attachment. Caregiver Sensitivity Caregivers who respond quickly and appropriately to the baby's needs help build strong emotional bonds.
- **Child Temperament:** A child's natural temperament, such as being calm or irritable, may influence how attachment develops.
- **Consistency of Care:** Stable and consistent caregiving strengthens attachment, while frequent changes in caregivers may weaken it.

## 10. Moral Development

- Moral development refers to the development of a person's sense of right and wrong and their ability to follow ethical principles.

### Piaget's Theory

Piaget proposed two stages of moral development in children.

- **Heteronomous Morality:** Found in younger children who believe rules are fixed and must be obeyed without question. They judge behaviour based on consequences rather than intentions.
- **Autonomous Morality:** Older children understand that rules are created by people and can be changed. They begin to judge behaviour based on intentions and fairness.

### Kohlberg's Theory

Kohlberg expanded Piaget's theory and proposed three levels of moral development.

- **Pre-conventional Level:** Moral decisions are based on avoiding punishment and gaining rewards.
- **Conventional Level:** Individuals follow social rules and laws to gain approval and maintain social order.
- **Post-conventional Level:** Moral reasoning is based on personal principles and universal ethical values.

## 11. Role of Family, Parenting, Play and Media

**Family:** The family is the first and most important socializing agent in a child's life. It provides emotional support, guidance and helps shape personality.

### Parenting Styles (Baumrind):

- **Authoritative:** Warm and supportive but maintains clear rules and expectations. This style promotes independence and self-confidence.
- **Authoritarian:** Strict and controlling with little warmth. Children may become obedient but less socially confident.
- **Permissive:** Very lenient with few rules or expectations. Children may show lack of discipline and self-control.
- **Neglectful:** Parents provide little involvement or guidance. This may lead to emotional and behavioural problems.

**Play**

Play supports physical, cognitive and social development. It helps children develop creativity, imagination and problem-solving skills.

**Friendship and Peer Relations**

Friendships provide emotional support and companionship. Peer interaction helps develop cooperation, empathy and communication skills.

**Media**

Media influences children's attitudes, behaviour and social values. It can provide educational content but excessive exposure may also lead to negative effects.

