

Childhood Development

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N308 Nursing of the Childrearing Family

### Childhood Development

The child that I observed was a 4 year old boy. However, he was just a two months from his 5 year birthday. For this comparison I utilized the normal ranges of a five year old. This age group is within the age range that is commonly described as the preschool period. In this case I observed the son of a maternal cousin. I'm familiar with this child and the familiarity between the two of us allowed me to spend particular attention to him. I was able to observe him in his home, and then shortly after spent a few hours at the local park where my observations continued further. I was able to spend a total of 5 hours with this particular child, at which roughly 3.5 hours were spent actually observing him for the purpose of this assignment. His nickname, that which I frequently refer to him as is "monkey butt." He has a brother that is one year older than him, which possesses a fairly polar opposite personality.

### Growth and Development

The child was 44 inches tall and weighed 42 pounds during my observation. Besides a few accidents occasionally, the parents report that he uses the rest room by himself and no longer wears diapers. He was very talkative in the car on the way to the local park, and formed sentences almost adult like. There were a few instances where he would have to pause, where it seemed like he was thinking about what he was saying, or he would skip on a word a few times.

He was able to pick up a beetle with his thumb and finger. The child has a general laid back nature and when he gets hurt he laughs. For example, when throwing the baseball around he caught the ball, but the glove subsequently hit him in the face, which he then continued to laugh, but during so was saying "OW." His parents mentioned that he is constantly playing in the creek in the back yard, and engages in outside activities when he plays outside.

For evaluating the normals in preschool development I found the delays of four and five year olds. According to some of the norms that Kyle (2009) identified, this child is making a smooth transition into his fifth year. According to Kyle (2009) some delays that were identified that I paid particular attention to were the inability of the child to separate from parent without major protest, is extremely aggressive, extremely fearful or timid, or unusually passive, is easily distracted, rarely engages in fantasy play, cannot use plurals or past tense (p.137).

These are just a few that I was mainly concerned with, but the child did not exhibit any of the concerns that were listed for four or five year olds. The child's absence of abnormal developmental issues allows for the belief that he is developing adequately for his age. Kyle (2009), expressed that, "A preschool child with one or more of these concerns should be referred for further developmental evaluation" (p.137).

#### Behavioral Development

Erikson describes children within the age range of 3 to 6 years, as being in the Initiative vs. Guilt stage. The norms listed for this stage are of the following: Likes to please parents, begins to plan activities, makes up games, initiates activities with others, acts out roles of other people, develops sexual identity, develops conscience, may take frustration out on siblings, feels remorse when makes wrong choice of behaves badly (Kyle, 2009, p.131).

Piaget describes children within the 4 to 7 age bracket as being in the Preoperational stage: Intuitive phase. The norms listed for this stage are of the following: Is able to classify and relate objects, has initiative though processes, tolerates others' differences but doesn't understand them, is very curious about facts, knows acceptable culture rules, has a more realistic sense of causality, may begin to question parents' values (Kyle, 2009, p. 131).

Kohlberg describes children within the 2 to 7 age bracket as Punishment-obedience orientation, and notes preconventional morality. The norms for this stage is labeled as determines good vs. bad dependent on associated punishment, and is noted that children may learn inappropriate behavior at this stage if parental intervention does not occur (Kyle, 2009, p. 131).

During the car drive to the park, he showed enthusiasm in deciding which game to play when we got to the park. Part of the time he wanted to pretend to be Brian Wilson, which is a particular baseball player that we both favor. At the park, he initiated a different game, in which he wanted to practice catching pop-flies, and I was responsible for progressively throwing the ball higher. On the drive back home, I asked him how things were at school and at home. During this time he spoke about his frustrations with his brother and his father. His parents mentioned that he behaves much better during Sunday school, and if he misbehaves, has no problem associating their verbal corrections with his past actions that they are referring to.

When I specifically asked him to complete a few things on the Denver II, he was more than happy to be an overachiever. When I asked him to define the seven words provided on the back of the paper, he did so without a problem. He was able to also define a car, knife, and a telephone. Part of this comes up when he is with me, because I always encourage him to increase expectations that society places on him.

He enjoys telling me about his adventures, and loves the encouragement I give him, so he usually usually enjoys trying to please me. His father is exceptionally difficult with him, and much easier on his older brother, so he is still exhibiting rebellious activities towards his father, but not his mother. The father talked about the general pattern that the two of them have, and

generally the mother handle the discipline with this particular child. The father exhibits much less patience with the younger child than his first born.

This pattern has developed a sense of obedience with this particular child, but also impatience in his ability to deal with his father. Often the child exhibited rebellion towards the father's requests. Normal activities would be executed appropriately, but if the father tasked the child with something out of the ordinary (i.e., helping the older brother pick up toys that this child was not playing with) he would object most of the time. This may build resentment between the younger child and the older child.

#### Common Occurrences

According to the American Academy of Pediatrics (AAP) (2011), a few common childhood illnesses are otitis media and sinusitis. These are caused by *Moraxella catarrhalis*, which is also responsible for other common childhood illnesses. In cases where the child has an compromised immune system, bronchitis and pneumonia are of concern. This bacterial infection is usually treated amoxicillin clavulanate, however other antibiotics have been used as well.

The Center for Disease Control and Prevention (2013) has labeled four immunizations as being required for children that are 4 through 6 years old. If all immunizations have been given to the child accordingly based on the national scheduling, then the four immunizations required are diphtheria, tetanus, and acellular pertussis (Dtap), inactivated poliovirus (IPV), measles, mumps, and rubella (MMR), and varicella (Var). At this time the child should have been receiving the annual influenza vaccination, and unless it is contraindicated with that child specifically, should continue to do so.(p.4).

The following nutritional needs should be met during the preschool years. Iron and calcium are essential minerals that are of direct concern during these particular growing years. Adequate ranges for calcium are 500 to 800 mg, and 10 mg for iron. It was also noted that 19mg of dietary fiber should be included in the diet of this age range. Average daily calorie expenditure requires about 85 kcal/kg of the child's body weight. It was also noted that calcium blocks iron absorption, and excess amount of calcium may lead to iron deficiency (Kyle, 2009, p. 146).

### Motor Skills

Gross motor skills are exemplified when he made balancing on each foot for 6 seconds a competition with what the paper said on the Denver II. He was able to make the requirement on each foot, and we recorded a high of 10 seconds on the left foot, and 12 seconds on the right foot. He was able to walk heel-to-toe on the baseline for about five feet.

Fine motor skills were discussed with his mother. He helps her cut coupons on Sunday morning before church. He was able to draw a scene where he included a man's nose, and was able to draw circles for muscles on this figure too. When I bought him a cheeseburger happy meal at McDonald's, he was able to eat in the car without making a significant mess, and picked a small fry from between his legs with his fingers after he dropped it.

## References

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- Kyle, T. (2009). *The Essentials of pediatric nursing*. 2<sup>nd</sup> ed. Philadelphia, PA: Lippincott, Williams, & Wilkins