

## INTRODUCTION

### "PSYCHOLOGICAL DEVELOPMENT OF THE CHILD"

An understanding of the processes of growth and development has become indispensable for the study of human biology and behavior; the field is now a basic science in all clinical curricula. Advances in Knowledge during the last two centuries have revealed a striking orderliness and continuity in the immensely complicated, mysterious and beautiful transformations that occur from conception to old age, these advances provide clues to how we come to be the way we are (Metcalf, 1984).

Psychiatric disorders in childhood have to be looked at against the background of the normal process of development from helpless infant to independent adult. When assessing any child, his level of emotional and intellectual development and his social behaviour must be compared with the normal for his age (Barker, 1976).

The child is a growing organism, a developing personality. This is one of his outstanding characteristics. The words growth and development are defined by

Stuart & Prugh (1960) as follows :

Growth refers to those increases in the size of the body as a whole or of any of its dimension, parts or tissues which occur as part of the child's progress toward maturity.

Development refers to the many other changes occurring as part of progress toward adult maturity. They depend more largely upon experience and learning, but require developing capacities to adapt or to regulate body functions. These two aspects of development are referred to as maturation and adaptation. They are both operative to some degree in most if not all aspects of development, and it is well to be aware of both processes and their differing roles in specific attainments (Shirley, 1963).

In addition to physical growth and development, there are emotional development, intellectual, social and sexual development, all of which may be integrated into the more comprehensive concept of personality development (Shirley, 1963). Personality has been defined as the sum total of an individual's habitual or predictable behaviour, including verbal behaviour

(Forfare & Arneil, 1978). In this part we shall revise the important steps of psychological development of the child at Infantile, Toddler and School period.

(A) Infantile stage :

The development of intersensory integration is an active, but not an automatic process. The organism begins with its initial given capacities, and these capacities are differentiated and interrelated by exercise, so that higher order capabilities emerge (Eisenberg, 1981).

Two fundamental processes are at work : assimilation and accommodation. Assimilation is the process of using and incorporating stimulus aliments in the environment, just as the organism uses food. In assimilation, the organism takes in the new in terms of the familiar, and acts in the present as it did in the past. In the process of accommodation, the organism is modified by the novel-  
ties of the environment. Accommodation leads to a reor-  
ganization of the programs of the organism as it struggles to cope more effectively with the mismatch between its available action pattern and the new requirements of its

current environment (Flavell, 1963).

(1) Temperamental Development :

This is a person's style of life or habitual mode of behaviour (Forfar , 1978). It was found that there are many individual differences in automatic reactivity (Bridger, 1961). The infant is born with a slight bias for certain moods and reaction styles; due either to genetic or parenteral factors (Kagan, 1982). These differences persist allover the newborn period and extend up to two years (Thomas et al., 1984).

Rutter et al., (1964), stressed on the close relationship between the temperamental development, parental management, and the subsequent appearance of symptoms.

Eisenberg, (1981), stated that; the infant is an important actor in the family drama, one who , in part , determines its course. The behaviour of the infant serves to control the behaviour of his mother. The calm, smiling, predictable, good infant is a powerful reward for tender maternal care, while the nervous , irregular , irritable infant tires mother's patience. If mother's

Capacities for giving are marginal ; his traits may causes her to turn away from him, and thus; complicate his already inadequate beginning.

In an ongoing longitudinal study of children by Thomas et al., (1963) attributes of temperament were discovered which distinguished between children but remained relatively constant for each individual child, at least during the earliest years of life. These are level of activity or energy output (motility), intensity of response (emotional reaction), approach or withdrawal to new situation, predominant mode, adaptability, regularity of biological function (such as sleeping , eating , and elimination), threshold of sensitivity to stimuli, attention span / persistance and distractability.

## (2) Cognitive Development :

Gesell (1940) stated that the development is; a growing of a genetically determined sequence. In contrast to this theory. Piaget (1952); considered the development of intelligence is due to creative interaction between the organism and environment. This interaction manifests itself by; adaptive behaviour that makes the

individual deals with the environment. This coping behaviour leads to functional organization of the mind, which means that adaptive coping continuously reorganize the structure of the mind (Flavell, 1963).

Studies of identical and fraternal twins reared together and apart allow us to calculate the relative contributions of genetic and environmental variables to individual differences of intelligence in any particular culture. Cattell (1965) found that, heredity is thought to contribute about 80%, the environment 20%.

### (3) Emotional Development :

The part of personality concerned with feelings, attachments to other people, selfesteem, moral standards and aspirations, is the one most often involved in psychiatric disorders (Forfor & Arneil, 1978).

Parallel to the stages of cognitive development; are, stages of emotional development. It is related to regular; and hence; predictable events of care taker. When an affectional tie between infant and care taker develops; the infant's behaviour expands, as his acts

he learns to say "yes". Correspondingly; the infant knows what he doesn't want long before he is able to formulate what he does want. The negativism of the toddler is a vital stage of individuation.

The second and third years of life are a period of increasing social demands on the child. The clinical observation that toilet training can become a focus of struggle between mother and child, has led to the simplistic formulation that; toilet training itself is a critical event for character formation. Toilet training can be elevated to a central issue by a rigid, severe, and restricting mother, but it varies with the culture, and with the temperamental characteristics of mother and child. When toilet training problems are associated with clinical psychiatric disorders; it is not necessarily because of toilet training itself, but rather, because toilet training serves as an example of the general training practices of the family. That is, the mother who is overly severe in this area; is likely to be punitive and restrictive in others as well.

The child's ability to accommodate himself to social

demands; by the acquisition of self - control; can lead to pride in self, and strive for a new accomplishment. If the child feels shame of parents from his physiological functions, he will develop inhibited, fearful, and stereotyped but; if he rebels, he may remain stubborn and oppositional.

Parallel to the changing tasks for the child, are; changing tasks for his parents. The parental task at the toddler stage is a requirement; for strengthening the boundaries of acceptable behaviour, and encouragement of the progressive emancipation of the child. The child must be allowed to do for himself; in so far as he is able; but, he must be protected and assisted when the act is beyond his abilities.

In the fourth year of life, there is further augmentation of the child's capacities which; however; still run well behind his aspiration; he often undertakes things that he cannot complete successfully. He becomes capable of anticipation; as a basis for accepting the postponement of immediate gratification.

This period is characterised by flowering of



imagination as manifested by controlled fantasy and play. Play is an important psychological activity for the period. It is an expression of pleasure of exercising new executive capacities and acquiring mastery. It serves the function of releasing tension and energy. After stress it can provide emotional catharsis. But, perhaps, the most important of all are, the trial roles, assumed in dramatic play, that allow the child to try out the adult identities, he will one day have to understand.

Sexual identity is firmly stabilised at this period. The child exhibits active curiosity about anatomical sex. If this curiosity is recognized as healthy, and is met with honest and age-appropriate replies, he acquires a sense of the wonder of life, and become comfortable about his own role in it.

If the subject is taboo and his questions are rebuffed, he responds with shame and discomfort.

At this stage he is likely to struggle for the exclusive affection and attention of his parents. The struggle includes rivalry; both with his siblings and with one or another parent for the star role in the family.

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Although he is beginning to be able to share, he gives up only with difficulty. If the demands for exclusive possession of love objects are not effectively resolved, the result is likely to be jealous competitiveness in relations with peers and lovers. The fantasies aroused by the struggle, lead to fear of retaliation, and in displacement of fear onto external objects. These issues are important in elaborating the basis for conscience. In an equitable, loving family, the child elaborate a moral system of ethical rights freely contracted. The system contrasts with conscience, based on terror, with fear of retaliation, leads to ritualized and rigid moralism.

(C) School period :

When the child joins kindergarten and primary school, the formal demand and academic learning become the major determinant of further personality development. This give an importance to the curriculum selection, because it molds the child's image of himself as a capable and adequate person, or an inferior and feckless one (Kaplan & Sadock, 1985).