

Programme : B. A

Subject : Psychology

Semester : 3

University : University of Mysore

AIMS AND OBJECTIVES

This Lesson will help understand the foundations of life span development which is fascinating and ever changing. After going through this Lesson, you will be able to:

1. To understand the different stages of life span
2. To understand the importance of theoretical explanation to understand human development
3. To identify different approaches to understand developmental changes
4. To understand and explain developmental patterns based on Sigmund Freud's theory

1. Periods of Development

Developmental psychologists often break down development according to various phases of life. Each of these periods of development represents a time when different milestones are typically achieved. People may face particular challenges at each point, and developmental psychologists can often help people who might be struggling with problems to get back on track.

- 1. Prenatal Stage (From Conception to Birth)**
- 2. Infancy and babyhood Stage (Birth- 18 or 24 months)**
- 3. Early Childhood (from end of the infancy to 5 or 6 years)**
- 4. Middle and Late childhood (6 Years to 10 or 12 Years)**

5. **Adolescence (10 to 12 years to 18 Or 20 years)**
6. **Early adulthood (early twenties to 28 or 20 to 40 years)**
7. **Middle Adulthood (An average 41 to 60 Years)**
8. **Late Adulthood (Above 60 years and till Death)**

1.1 Prenatal Development: Conception occurs and development begins. All of the major structures of the body are forming, and the health of the mother is of primary concern. Understanding nutrition, teratogens, or environmental factors that can lead to birth defects, and labor and delivery are primary concerns.

1.2 Infancy and Toddlerhood: The first two years of life are ones of dramatic growth and change. A newborn, with a keen sense of hearing but very poor vision, is transformed into a walking, talking toddler within a relatively short period of time. Caregivers are also transformed from someone who manages feeding and sleep schedules to a constantly moving guide and safety inspector for a mobile, energetic child.

1.3 Early Childhood: This period is also referred to as the preschool years and consists of the years which follow toddlerhood and precede formal schooling. As a two to six-year-old, the child is busy learning language, is gaining a sense of self and greater independence, and is beginning to learn the workings of the physical world.

1.4 Middle and Late Childhood: The ages of six to the onset of puberty comprise middle and late childhood, and much of what children experience at this age is connected to their involvement in the early grades of school. Now the world becomes one of learning and testing new academic skills and by assessing one's abilities and accomplishments by making comparisons between self and others.

1.5 Adolescence: Adolescence is a period of dramatic physical change marked by an overall growth spurt and sexual maturation, known as puberty. It is also a time of cognitive change as the adolescent begins to think of new possibilities and to consider abstract concepts such as love, fear, and freedom. Ironically, adolescents have a sense of invincibility that puts them at greater risk of dying from accidents or contracting sexually transmitted infections that can have lifelong consequences.

1.6 Emerging Adulthood: The period of emerging adulthood is a transitional time between the end of adolescence and before individuals acquire all the benchmarks of adulthood. Continued identity exploration and preparation for full independence from parents are demonstrated. Although at one's physiological peak, emerging adults are most at risk for involvement in violent crimes and substance abuse.

1.7 Early Adulthood: The twenties and thirties are identified as early adulthood. Intimate relationships, establishing families, and work are primary concerns at this stage of life.

1.8 Middle Adulthood: The forties through the mid-sixties is referred to as middle adulthood. This is a period in which aging becomes more noticeable and when many people are at their peak of productivity in love and work.

1.9 Late Adulthood: Late adulthood is sometimes subdivided into two categories: The young-old who are from 65-84 years and the oldest-old who are 85 years and older. One of the primary differences between these groups is that the young-old are still relatively healthy, productive, active, and the majority continue to live independently. With both age groups the risks of diseases such as, arteriosclerosis, cancer, and cerebral vascular disease increases substantially.

2. What is a theory?

Orderly set of ideas which describe, explain, and predict behavior.

- Why are theories important?

To give meaning to what we observe.

As a basis for action -- finding ways to improve the lives and education of children.

2.1 Psycho-analytical Theories

Beliefs focus on the formation of personality. According to this approach, children move through various stages, confronting conflicts between biological drives and social expectations.

2.1.1 Sigmund Freud's Theory

Sigmund Freud (1856 to 1939) was the founding father of psychoanalysis, a method for treating mental illness and also a theory which explains human behavior.

He emphasized that a child's personality is formed by the ways which his parents managed his sexual and aggressive drives.

The Psychoanalytic Perspective

According to the psychoanalytic perspective, people move through a series of stages in which they confront conflicts between biological drives and social expectations. The way these conflicts are resolved determines the individual's ability to learn, to get along with others, and to cope with anxiety.

Freud, a Viennese physician, saw patients in his practice with a variety of nervous symptoms, such as hallucinations, fears, and paralyses that appeared to have no physical basis. Seeking a cure for these troubled adults, Freud found that their symptoms could be relieved by having patients talk freely about 'painful events of their childhoods. On the basis of adult remembrances, he examined the unconscious motivations of his patients and constructed his psychosexual theory,

which emphasized that how parents manage their child's sexual and aggressive drives in the first few years is crucial for healthy personality development.

Three Parts of the Personality:

In Freud's theory, three parts of the personality-id, ego, and superego-become integrated during five stages,.

The *id*- the largest portion of the mind, is the source of basic biological needs and desires.

The *ego*-the conscious, rational part of personality-emerges in early infancy to redirect the id's impulses so they are discharged on appropriate objects at acceptable times and places. For example, aided by the ego, the hungry baby of a few months of age stops crying when he sees his mother unfasten her clothing for breast-feeding. Between 3 and 6 years of age,

The *superego*- or conscience develops from interactions with parents, who insist that children conform to the values of society. Now the ego faces the increasingly complex task of reconciling the demands of the id, the external world, and conscience. For example, when the ego is tempted to gratify an id impulse by hitting a playmate to get an attractive toy, the superego may warn that such behavior is wrong. The ego must decide which of the two forces (id or superego) will win this inner struggle, or it must work out a compromise, such as asking for a turn with the toy. According to Freud, the relations established among the id, ego, and superego during the preschool years determine the individual's basic personality.

Psycho-sexual Development: Freud believed that during childhood, sexual impulses shift their focus from the oral to the anal to the genital regions of the body. In each stage of development, parents walk a fine line between permitting too much or too little gratification of their child's basic needs. If parents strike an

appropriate balance, then children grow into well-adjusted adults with the capacity for mature sexual behavior, investment in family life, and rearing of the next generation. Freud's psychosexual theory highlighted the importance of family relationships for children's development. It was the first theory to stress the role of early experience.

Stages	Duration	Erogenous zone
Oral Stage	Birth – 1 Year	Mouth
Anal Stage	1 – 3 year	Bowel and Bladder Control
Phallic Stage	3 – 6 year	Genitals
Latent	6 - Puberty	Libido inactive
Genital	Puberty – Death	Maturing Sexual interests

Oral Stage: The new ego directs the baby's sucking activities toward breast or bottle. If oral needs are not met appropriately, the individual may develop such habits as thumb sucking, fingernail biting, and pencil chewing in childhood and overeating and smoking in later Life.

Anal Stage: Toddlers and preschoolers enjoy holding and releasing urine and feces. Toilet training becomes a major issue between parent and child. If parents insist that children be trained before they are ready or make too few demands, conflicts about anal control may appear in the form of extreme orderliness and cleanliness or messiness and disorder.

Id impulses transfer to the genitals, and the child finds pleasure in genital stimulation.

Phallic Stage: Freud's *Oedipus conflict* for boys and *Electra conflict* for girls arise, and young children feel a sexual desire for the other sex parent. To avoid punishment, they give up this desire and, instead, adopt the same-sex parent's characteristics and values. As a result, the

superego is formed, and children feel guilty each time they violate its standards. The relations among id, ego, and superego established at this time determine the individual's basic personality.

Latent: Sexual instincts die down, and the superego develops further. The child acquires new social values from adults outside the family and from play with same-sex peers.

Genital: Puberty causes the sexual impulses of the phallic stage to reappear. If development has been successful during earlier stages, it leads to marriage, mature sexuality, and the birth and rearing of children.

Each stage produces frustration, conflict and anxiety. If not resolved properly, normal development interrupted, and a child may remain fixated or stuck, at a current stage.

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