DEVELOPMENT

PSYCHOSOCIAL THEORY OF DEVELOPMENT

Erikson’s Theory

Stage 1 (birth - 1)
Trust vs. Mistrust

Physical Development

Infants’ psychological development depends on their biological development. To understand the emergence of motor skills and memory, we must understand the developing brain.

Developing Brain

The developing brain overproduces neurons, peaking at around 100 billion during early infancy. Neural connections are made stronger by experience. Little used connections are later pruned around 12 years of age.
Maturation

The development of the brain unfolds based on genetic instructions, causing various bodily and mental functions to occur in sequence—standing before walking, babbling before talking—this is called maturation.

Maturation sets the basic course of development, while experience adjusts it.

Motor Development

First, infants begin to roll over. Next, they sit unsupported, crawl, and finally walk. Experience has little effect on this sequence.

Maturation and Infant Memory

The earliest age of conscious memory is around 3½ years (Bauer, 2002). A 5-year-old has a sense of self and an increased long-term memory, thus organization of memory is different from 3-4 years.

Cognitive Development

Piaget believed that the driving force behind intellectual development is our biological development amidst experiences with the environment. Our cognitive development is shaped by the errors we make.

Schemas

Schemas are mental molds into which we pour our experiences.

Assimilation and Accommodation

The process of assimilation involves incorporating new experiences into our current understanding (schema). The process of adjusting a schema and modifying it is called accommodation.
Stranger Anxiety

Stranger anxiety is the fear of strangers that develops at around 8 months. This is the age at which infants form schemas for familiar faces and cannot assimilate a new face.

Stage 2
(1-3 years)
Autonomy vs. Shame and Doubt

Raising Children

Parenting

• Baumrind suggests that parents may be able to foster instrumental competence in children.

• Instrumental competence: Ability to manipulate the environment to achieve desired effects. These children are energetic and friendly, show self-reliance and independence, maturity in formation of goals, cooperation and self-assertion.

• This competence is developed via authoritative parenting.

Child-Rearing Practices

<table>
<thead>
<tr>
<th>Practice</th>
<th>Description</th>
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<tbody>
<tr>
<td>Authoritarian</td>
<td>Parents impose rules and expect obedience.</td>
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<tr>
<td>Permissive</td>
<td>Parents submit to children's demands.</td>
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<tr>
<td>Authoritative</td>
<td>Parents are demanding but responsive to their children.</td>
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Stage 3 (3-5 years)  
Initiative vs. Guilt

Stage 4 (5-12 years)  
Industry vs. Inferiority

Stage 5 (adolescence)  
Identity vs. Confusion

Physical Development  
Adolescence begins with puberty (sexual maturation). Puberty occurs earlier in females (11 years) than males (13 years). Thus height in females increases before males.

Brain Development  
Until puberty, neurons increase their connections. However, at adolescence, selective pruning of the neurons begins. Unused neuronal connections are lost to make other pathways more efficient.
Frontal Cortex

During adolescence, neurons in the frontal cortex grow myelin, which speeds up nerve conduction. The frontal cortex lags behind the limbic system’s development. Hormonal surges and the limbic system may explain occasional teen impulsiveness.

Cognitive Development

Adolescents’ ability to reason gives them a new level of social awareness. In particular, they may think about the following:

1. Their own thinking.
2. What others are thinking.
3. What others are thinking about them.
4. How ideals can be reached. They criticize society, parents, and even themselves.

Developing Reasoning Power

According to Piaget, adolescents can handle abstract problems, i.e., they can perform formal operations. Adolescents can judge good from evil, truth and justice, and think about God in deeper terms.

Developing Morality

Kohlberg (1981, 1984) sought to describe the development of moral reasoning by posing moral dilemmas to children and adolescents, such as “Should a person steal medicine to save a loved one’s life?” He found stages of moral development.

Moral Thinking

1. Preconventional Morality: Before age 9, children show morality to avoid punishment or gain reward.
2. Conventional Morality: By early adolescence, social rules and laws are upheld for their own sake.
3. Postconventional Morality: Affirms people’s agreed-upon rights or follows personally perceived ethical principles.

Parent and Peer Influence

Although teens become independent of their parents as they grow older, they nevertheless relate to their parents on a number of things, including religiosity and career choices. Peer approval and relationships are also very important.
Emerging Adulthood

Emerging adulthood spans ages 18-25. During this time, young adults may live with their parents and attend college or work. On average, emerging adults marry in their mid-twenties.

Stage 6
(young adulthood)
Intimacy vs. Isolation

Your 20s

- Men have already passed their sexual peak.
- Hair has its thickest diameter and the hairline remains intact (usually).
- After age 25, height may begin decreasing.
- For many of us, the 20s are the time when we become concerned with establishing our path in life.

Your 30s

- Women reach their sexual peak.
- Heart muscle begins to thicken.
- Hearing begins to decline (it peaked at age 10).
- Skin begins losing its elasticity; frown & smile lines begin to appear.
- Vertebral disks begin moving closer together eventually resulting in slumping.

Your 30s (cont.)

- Age-30 transition: Levinson’s term for the ages from 28-33, which are characterized by reassessment of the goals and values of the 20s. (I’m teaching because of this!).
- Have you made some “false starts” in life? What were they? What did you decide to change?

Stage 7
(middle adulthood)
Generativity vs. Stagnation
The 40s

• Men are about 10-20 pounds heavier and 1/8 of an inch shorter than they were in their 20s.

• The immune system is becoming less effective.

• Hair may be graying and balding may begin.

• May need glasses for vision problems.

40s (cont.)

• Mid-Life Transition: Levinson’s term of the ages from 40-45, which are characterized by a shift in psychological perspective from viewing ourselves in terms of years lived to viewing ourselves in terms of the years we have left.

• Men mourn the passing of their own youth and begin to adjust to the specter of old age and the finality of death. Women tend to go through this 5 years earlier.

Sexual Changes

<table>
<thead>
<tr>
<th>TABLE 14.2 Changes in Sexual Response Connected With Aging</th>
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</thead>
<tbody>
<tr>
<td>Changes That Occur in Women</td>
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<tr>
<td>Less interest in sex</td>
</tr>
<tr>
<td>Less blood flow to the genitals</td>
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<tr>
<td>Less vaginal lubrication</td>
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<tr>
<td>Loss of elasticity in vaginal walls</td>
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<tr>
<td>Breast volume decreases</td>
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<tr>
<td>Less intense orgasms</td>
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The 50s

• Wrinkles become more visible as skin begins to loosen and sag.

• Females typically reach the end of the reproductive cycle.

• Nails grow more slowly.

• Sense of taste becomes less acute.

• Muscles and other tissues begin to deteriorate and metabolism begins to decrease (leading to increase in body fat).

• A man’s speaking voice may rise from C to E-flat as vocal chords stiffen and vibrate at a higher frequency.

• The 40s-50s tend to be our most productive stage of life.

Late Adulthood
Stage 8
(late adulthood to death)
Integrity vs. Despair

60s, 70s and 80s
- Life spans are increasing, but will see these effects:
  - The skin continues to wrinkle and changes color.
  - Bones become more brittle.
  - At 60, a person is ¾ inch shorter than in youth.
  - The capacity of the lungs has decreased by half.
  - Nose, ears and earlobes are longer by ¼ to ½ inch.
  - Only 36% of the taste buds remain active.

Are they happy?
- The majority of people in their 70s report being satisfied with their lives (Margoshes, 1995).
- Happiness is closely tied to social support.

Will I lose my memory?

Aging and Memory
Recognition memory does not decline with age, and material that is meaningful is recalled better than meaningless material. The same is true for prospective memory (remember to ...).

Aging and Memory
Recognizing people and places is not as difficult as recalling names for older adults.
Aging and Intelligence

Longitudinal studies suggest that intelligence remains relative as we age. It is believed today that fluid intelligence (ability to reason speedily) declines with age, but crystalline intelligence (accumulated knowledge and skills) does not.

Seattle Longitudinal Study (1994)

- Factors that contribute to intellectual functioning:
  - 1. General health: People in good health tend to retain higher levels of intellectual functioning into late adulthood.
  - 2. Socioeconomic Status: People with high SES tend to maintain intellectual functioning more adequately than those with low SES.
  - 3. Stimulating Activities: Cultural events, travel, extensive reading, etc.
  - 4. Marriage to a spouse with a high level of intellectual functioning.
  - 5. Openness to new experience: Being open to the challenges of life helps keep us young!

Aging and Other Abilities

A number of cognitive abilities decline with age. However, vocabulary and general knowledge increase with age.