SECOND EDITION

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REVISE BTEC NATIONAL

Health and Social Care

REVISION GUIDE

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Pearson

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Health and Social Care

REVISION GUIDE

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Introduction

Which units should you revise?

This Revision Guide has been designed to support you in preparing for the externally assessed units of your course. Remember that you won't necessarily be studying all the units included here – it will depend on the qualification you are taking.

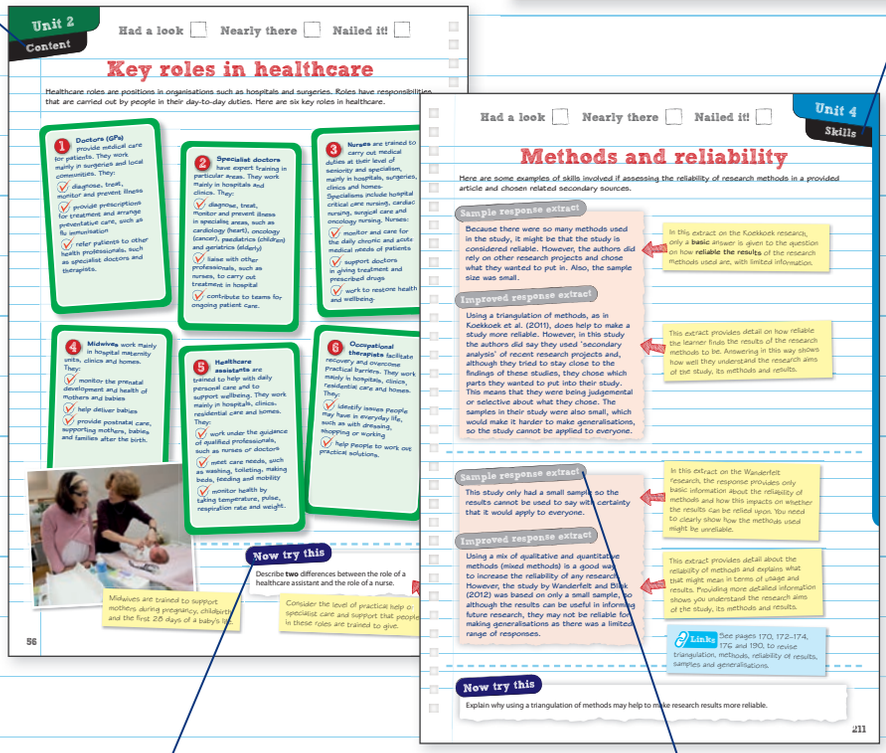
BTEC National Qualification	Externally assessed units
Certificate	1 Human Lifespan Development
For both: Extended Certificate Foundation Diploma	1 Human Lifespan Development 2 Working in Health and Social Care
Diploma	1 Human Lifespan Development 2 Working in Health and Social Care 4 Enquiries into Current Research in Health and Social Care
For both: Extended Diploma Extended Diploma (HS)	1 Human Lifespan Development 2 Working in Health and Social Care 3 Anatomy and Physiology for Health and Social Care 4 Enquiries into Current Research in Health and Social Care

Your Revision Guide

Each unit in this Revision Guide contains two types of pages, shown below.

Content **pages** help you revise the essential content you need to know for each unit.

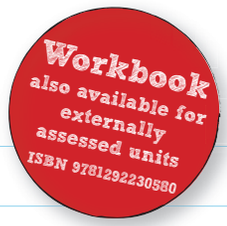
Skills **pages** help you prepare for your exam or assessed task. Skills pages have a coloured edge and are shaded in the table of contents.



Use the **Now try this** activities on every page to help you test your knowledge and practise the relevant skills.

Look out for the **sample response extracts** to revision questions or tasks on the skills pages. Post-its will explain their strengths and weaknesses.

Contents



Unit 1: Human Lifespan Development

Unit 2: Working in Health and Social Care

Unit 3: Anatomy and Physiology for Health and Social Care

Unit 4: Enquiries into Current Research in Health and Social Care

A small bit of small print

Pearson publishes Sample Assessment Material and the Specification on its website. This is the official content and this book should be used in conjunction with it. The questions in *Now try this* have been written to help you test your knowledge and skills. Remember: the real assessment may not look like this.

Principles of growth

Growth is sometimes referred to as physiological change. It describes an increase in length or height, weight and dimensions.

Measuring height

1. **Infants** grow rapidly and will reach roughly half their adult height by the age of two.
2. **Adolescents** (9 to 18 years) experience growth spurts (when height increases rapidly over a short period) during puberty.
3. Full height is reached by the start of early **adulthood** (19 to 45 years).

The four principles of growth

1. Growth rates are not constant.
2. Different parts of the body grow at different rates.
3. Growth rates vary between children.
4. The growth rate of boys is usually faster on average than that of girls, as men tend to be taller than women.

Head dimensions

Head circumference is measured at birth and at 6–8 weeks to identify any abnormality in brain or skull growth. Skull growth is faster in the first two years of life but continues into early adulthood.

Head circumference is measured across the forehead, just above the ears and at the midpoint of the back of the head.

Length or height?

- In the first two years, an infant's **length** is measured when lying down.
- From 2 years old their **height** is measured when standing.

Recording growth

Growth is an indicator of children's health and wellbeing.

Measurements are plotted on a growth chart. Centile lines represent the values of measurement from a large number of children to show 'norms' of growth in each age group.

- Growth charts give the length or height, weight and head dimensions expected at a particular age.
- Comparing children's growth against norms is important to identify signs of ill-health and development problems.
- Growth charts are different for boys and girls as their expected rate of growth varies.

Now try this

Baby Brad is 8 weeks old. He has been taken to the clinic to check that he is growing at the expected rate. A nurse checks his weight and will plot it on a chart. She is aware that infants triple their weight in their first year.

Identify **two** other measurements that the nurse will take.

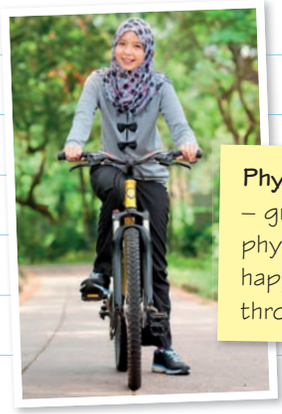
Had a look ☐ Nearly there ☐ Nailed it! ☐

Principles of development

Development describes the acquisition of skills and abilities through the life stages.

Areas of development

1



Physical development – growth and other physical changes that happen to our body throughout life.

2

Intellectual/cognitive development – the development of language, memory and thinking skills.

3

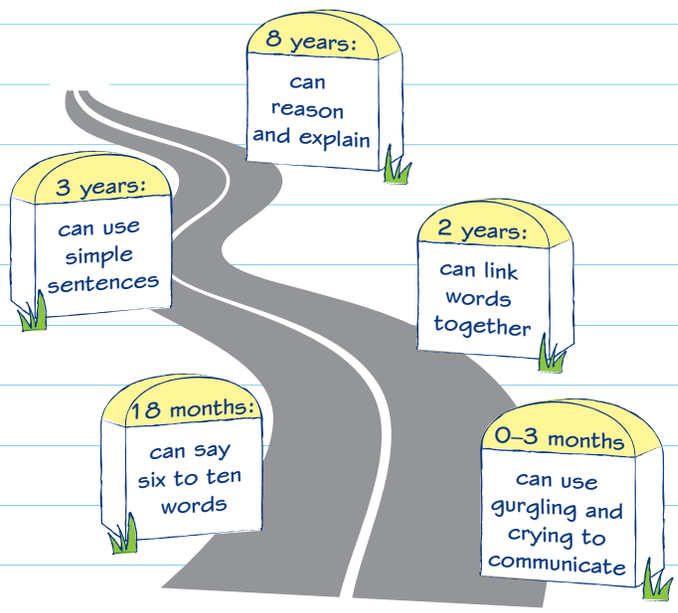
Emotional development – the ability to cope with feelings about ourselves and towards others.

4

Social development – the ability to form friendships and relationships, and to learn to be independent.

Development milestones

The rate of development may vary between individuals but it follows the same sequence, with each stage called a milestone (developmental norm). The diagram shows language milestones up to 8 years.



Development is **observed** and cannot be measured in the same way as growth.

Links Look at page 3 to revise the sequence of physical development in infants.

Now try this

Henry is 4 years old and attends nursery. His key person is worried that his development is not progressing as well as expected for his age.

Outline the role of observation in understanding Henry's development.

Observation involves an assessment of children's abilities, learning and behaviour to ensure that children are making expected progress against milestones.

Gross motor skills, 0–8 years

Gross motor skills allow children to control the large muscles in their torso, arms, legs, hands and feet.

Infancy, 0–2 years

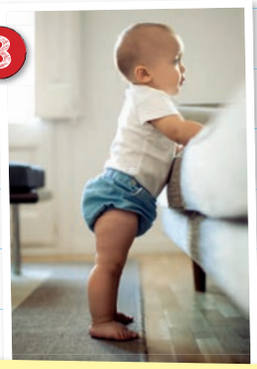
1

Infants develop their gross motor skills from the head down.

2

Around six months, infants gradually control muscles in their neck and back so they can roll, sit and crawl.

3

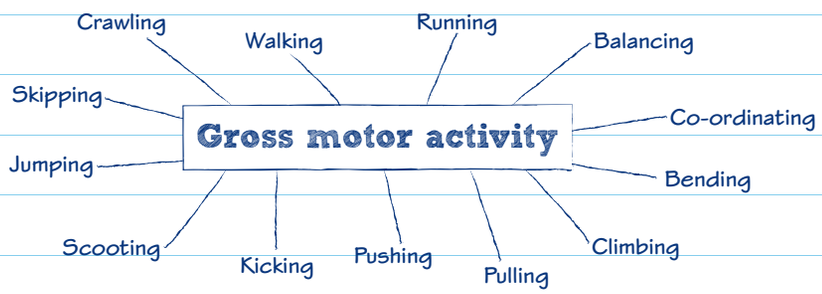


At around 11–13 months, the muscles in their legs develop so that they can stand, cruise and walk.

4

At 2 years, infants can climb onto low furniture and propel a sit-on toy, and at 2½ years they can kick a ball.

Using gross motor skills



Early childhood, 3–8 years

From about 3–4 years old they can balance and walk along a line. At about 5–8 years old they can balance on a low beam.

From about 3–4 years old they can run forwards and backwards. At about 5–8 years old they can skip with a rope.

Children continue to develop gross motor skills

From about 3 years old they can pedal and control a tricycle. By about 6 years old they can ride a bicycle.

From about 3–4 years old they can hop on one foot. At about 5–8 years old they can hop, skip and jump with confidence.

From about 3 years old they can throw a ball and by about 4 years old they can aim it. At about 5–8 years old they can accurately throw and catch a ball.

Now try this

Bobby is 5 months old. He has just started to roll over to his front from his back.

Identify **two** gross motor skills that Bobby is likely to acquire in the next three months.

Had a look ☐ Nearly there ☐ Nailed it! ☐

Fine motor skills, 0–8 years

Fine motor skills are important for controlling and coordinating the movement of the small muscles in the fingers and hands.

How fine motor skills develop

Newborn

This newborn is able to grasp an adult's finger. By 3 months he will hold a rattle for a short time and at 6 months he will grasp a toy and pass it to his other hand. At 12 months he will pick up small objects using a **pincer grasp**.

18 months

This 18-month-old can build with small blocks, use a spoon and make marks with crayons using a **palmar grasp**. At 2 years old she will pull on her shoes and control her crayon to draw circles and dots.

The development of the small muscles in the fingers and hands

3 years

This 3-year-old is developing a **tripod grasp**. He can use a fork and spoon, turn the pages of a book, and button and unbutton clothing. At 4 years old he will be able to thread small beads and colour in pictures.

This 5-year-old can control the muscles in her fingers to manipulate the construction block and use hand–eye coordination to fit the piece into the correct place. She writes her own name forming letters correctly and by the time she is 8 she will use joined-up writing.

5 years

Activities that support fine motor skills

Skill	Description	Activity
Gripping	Having the strength in fingers and hands to hold an object firmly.	Holding a rattle, tricycle handle or spoon.
Manipulation	Skilful movement of objects using fingers and hands, such as turning, twisting and passing objects from one hand to another.	Building with blocks, playing a musical instrument, playing with and placing farm animals or cars.
Hand–eye coordination	Control of eye movement at the same time as finger and hand movement.	Writing, sewing or completing jigsaw puzzles.

Now try this

Connor is 18 months old. His sister Amy is 3 years old. They are both meeting the expected milestones for their age.

Outline the differences in their fine motor skills.

Ensure that you make links between the children described in the case study and the developmental milestones expected at their age.

Physical development in adolescence

Adolescence is the life stage between 9 and 18 years old.

Puberty

During adolescence, young people experience a physical change called puberty. This takes place in girls around 11–13 years and in boys around 13–15 years.

Puberty starts when a hormone in the brain sends a signal to the pituitary gland, which releases hormones that stimulate the ovaries in girls and the testes in boys to produce sex hormones.

During this life stage a young person's height can increase rapidly over a short time – this is known as a growth spurt. In girls this happens around 11–13 years and in boys around 13–15 years.

The role of hormones in sexual development

In boys

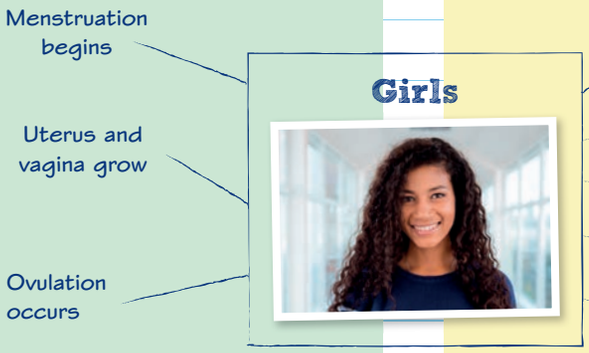
The hormone **testosterone** is produced by the testes. It stimulates growth of the penis and testes, pubic hair growth, the development of muscle and lowering of the voice.

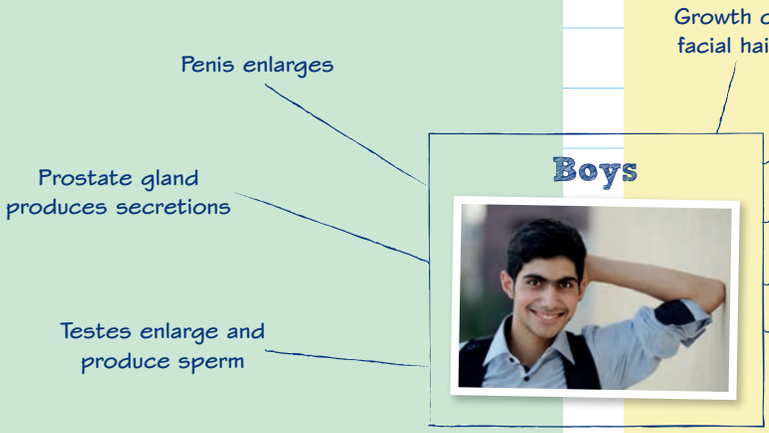
In girls

The hormones oestrogen and progesterone are produced by the ovaries. They stimulate growth of the breasts and reproductive system and help to regulate the menstrual cycle.

Primary sexual characteristics

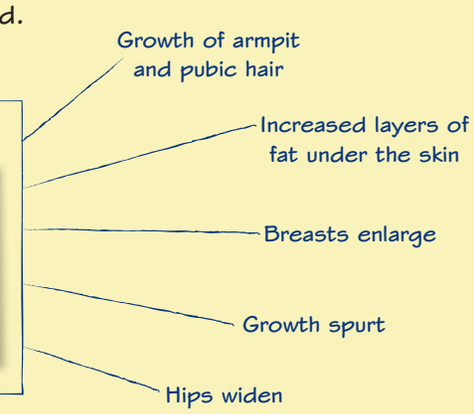
These are the processes that are related to the sex organs that are present at birth and mature when sex hormones are released.

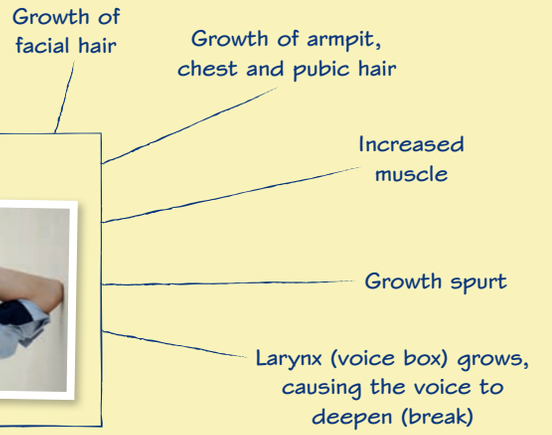




Secondary sexual characteristics

These are not necessary for reproduction. They develop when sex hormones are released.





Now try this

Explain the difference between primary and secondary sexual characteristics.

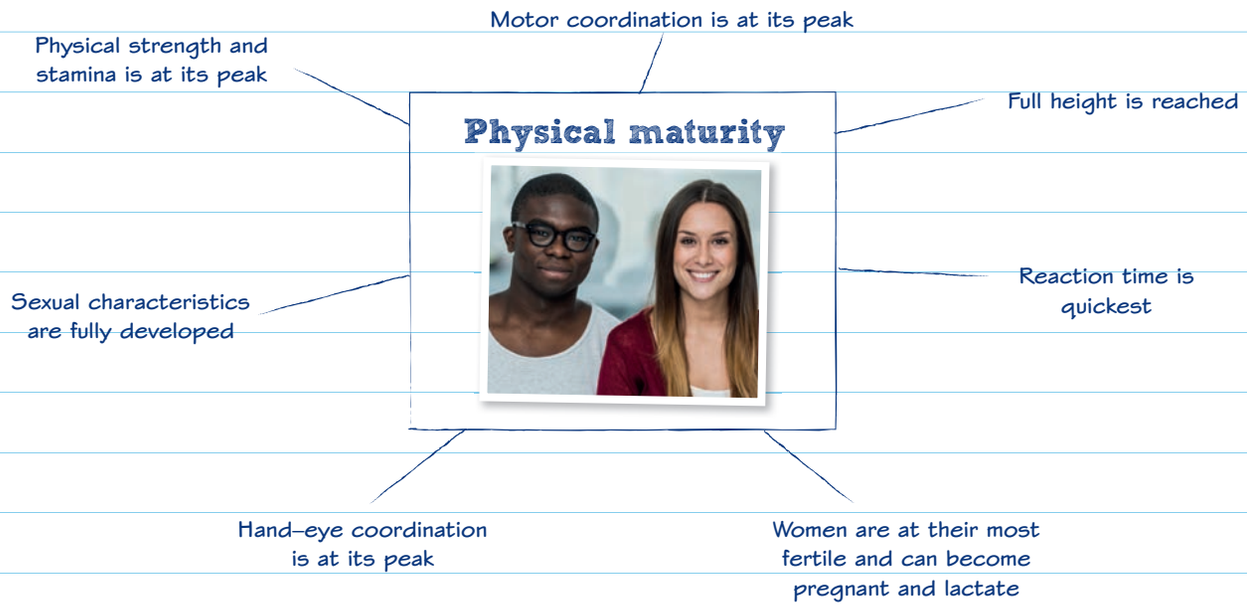
Had a look ☐ Nearly there ☐ Nailed it! ☐

Physical development in early adulthood

Early adulthood describes the life stage between 19 and 45 years of age.

Maturation

Individuals reach physical maturity (**maturation**) in early adulthood.



Fertility and perimenopause

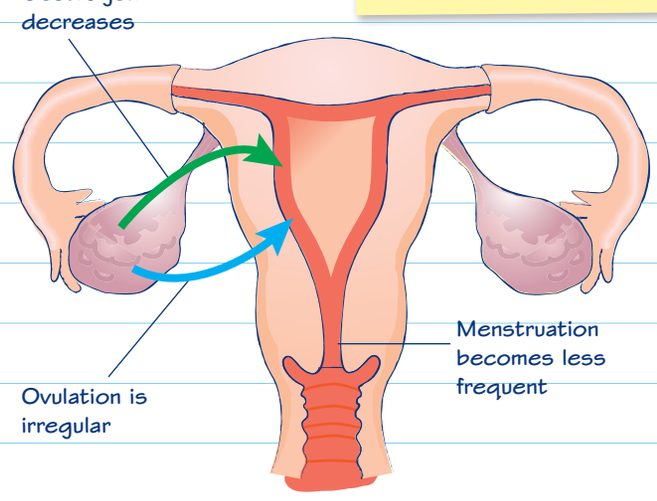
At the beginning of this life stage, women are at their most fertile. Around 40–45 years old they reach the end of their reproductive years. This period is called **perimenopause**.

During menopause, the reduction in oestrogen causes physical and emotional symptoms that include:

- hot flushes
- night sweats
- mood swings
- loss of libido
- vaginal dryness.

What happens during perimenopause?

The uterus and features of the perimenopause



Now try this

Most professional athletes will reach a career peak during the first part of early adulthood.

Explain why their success happens at this time, with reference to their physical stage of development.

Physical development in middle adulthood

Middle adulthood describes the life stage between 46 and 65 years of age.

Ageing

The ageing process mainly begins in middle adulthood

Signs of ageing include:

- greying hair
- loss of muscle tone, strength and stamina
- body shape may change with an increase in or loss of weight
- men begin to lose hair
- women are no longer fertile as menstruation ends
- loss of height.

Menopause

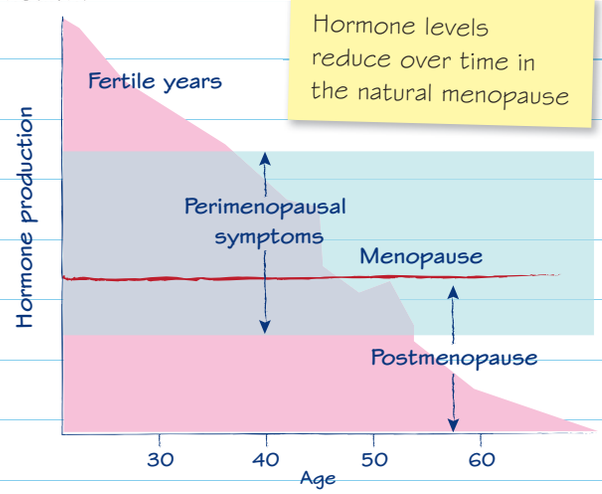
Menopause is a natural physiological change experienced by women during the middle adult life stage. It happens over several years with the gradual ending of menstruation.

The role of sex hormones in females

Oestrogen plays the most important role in female sexuality and regulates ovulation.

Progesterone is necessary for the implantation of fertilised eggs in the uterus, the maintenance of pregnancy and sexual health.

Hormone levels reduce over time in the natural menopause



The symptoms of menopause are the result of hormonal changes

A reduction in oestrogen causes:

- the ovaries to stop producing eggs
- thinning and shrinkage of the vagina.

A reduction in oestrogen:

- affects the hypothalamus in the brain, which regulates temperature, causing hot flushes and night sweats
- affects the health of hair, skin and nails
- may cause mood swings, as oestrogen regulates neurotransmitters that affect mood.

A reduction in oestrogen and progesterone:

- gradually stops menstruation
- impacts libido.

Now try this

Outline the role of oestrogen in menopause.

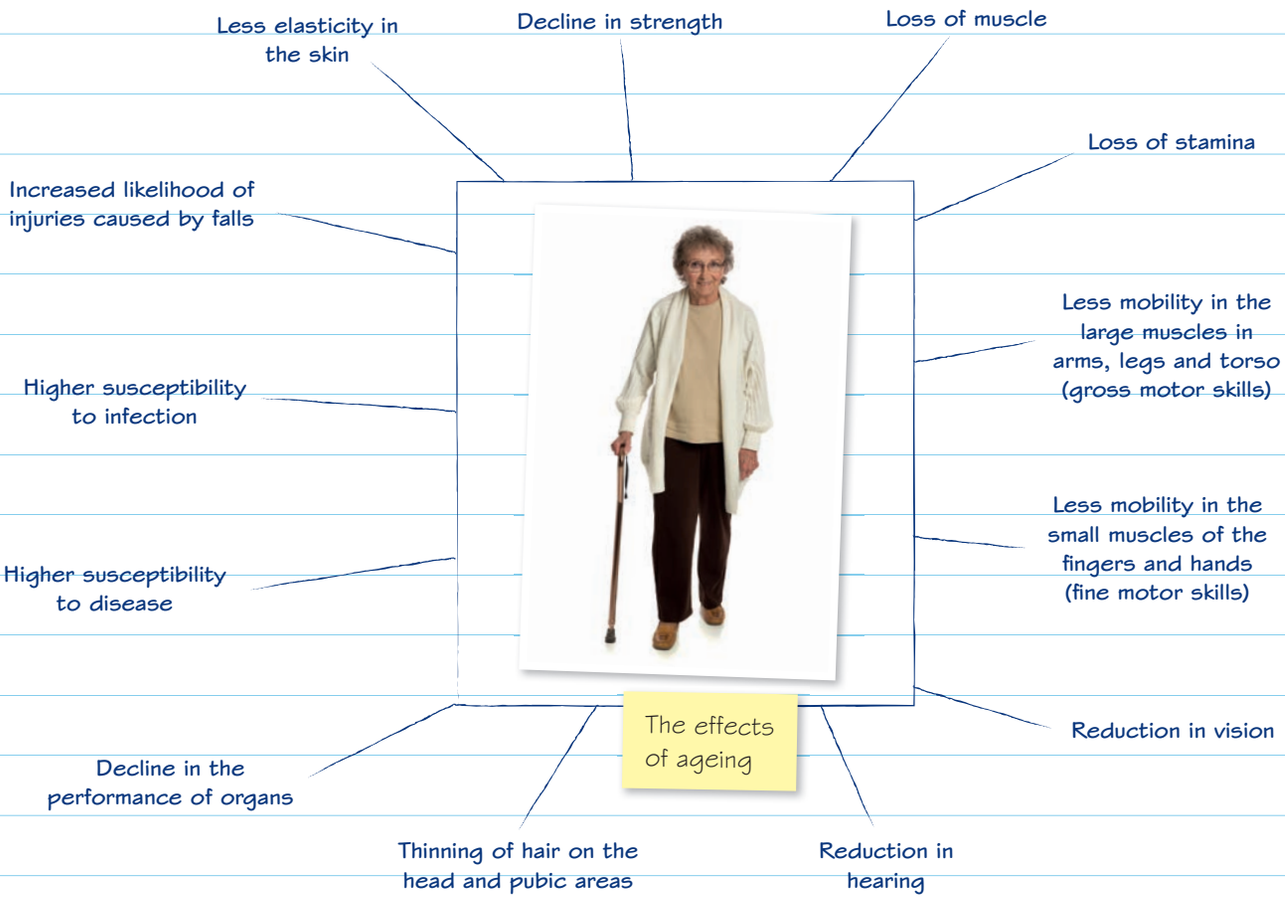
Had a look ☐ Nearly there ☐ Nailed it! ☐

Physical development in later adulthood

Later adulthood describes the life stage from 65 years old onwards.

The effects of ageing

The ageing process is the natural deterioration of the body.



The effects of ageing

Height loss

It is usual to start to lose height in middle adulthood, which continues into later life. By the age of 80 individuals may have lost as much as 5cm. This is caused by changes in posture and compression of the spinal discs and joints.

Intellectual ability

Ageing does not always impact on cognitive ability, but it can negatively affect how individuals process information, for example:

- memory
- recall
- speed of thinking.

Now try this

Peter is 69 years old. He is retired. He used to play football for a local team but now has to watch rather than taking part.

Identify **two** possible effects of Peter's life stage on his physical development.

Make sure you relate your answer to the facts given about Peter so that you identify the physical changes that prevent Peter from taking part in sport.

Intellectual development

Intellectual development is about how individuals organise ideas and make sense of the world around them.

Problem solving – needed to work things out and make predictions about what might happen

Moral development – needed for reasoning and making choices about how to act towards self and others

Types of intellectual development

Language development – essential to organise and express thoughts

Memory – essential for storing and recalling information

Abstract thought and creative thinking – essential for thinking and discussing things that can't be observed

Stages of life

Intellectual skills develop differently at different stages of life.

Intellectual development continues in early adulthood. By early adulthood individuals have gained knowledge, skills and experience. They use past experiences to make judgements. Thinking is logical and realistic. Individuals are able to think through problems and make decisions.

Infancy and early childhood → Early adulthood → Later adulthood

Neurones may also be known as neurons.

This is a time of rapid intellectual development. 90% of neurone (brain cell) connections are in place by the time children are 5 years old.

Individuals continue to learn new skills and knowledge into later adulthood. Intelligence does not change but short-term memory and thinking speed may decline.

Worked example

Alyssa is 26 years old. She has been a website designer for five years and is good at her job. She has just got a promotion and is managing a new team.

Outline features of Alyssa's intellectual development in relation to her ability to carry out her new job.

Sample response extract

Alyssa will have gained a great deal of knowledge about the job as she has been doing it for five years. She will also have gained skills and knowledge that she can apply to the new job. She will be able to think rationally about any problems using past experiences to help her make decisions and find solutions.

Intellectual milestones 0–8 years

- ✓ From birth – can use all their senses to help understand the world around them.
- ✓ At 3 years – can ask questions, count, recognise colours and sort objects.
- ✓ At 5 years – starting to read and write and draw in detail, can talk about the past and future.
- ✓ At 8 years – can think more deeply, reason, talk about abstract ideas and plan.

Now try this

Sami is 3 years old and has just started nursery. Sami is meeting the expected milestones in intellectual development. Sami loves to paint, play with sand and build towers with wooden blocks.

Identify **three** features of Sami's intellectual development in relation to the play activities at nursery.

Make sure you choose intellectual skills relevant to the context of Sami's play activities.

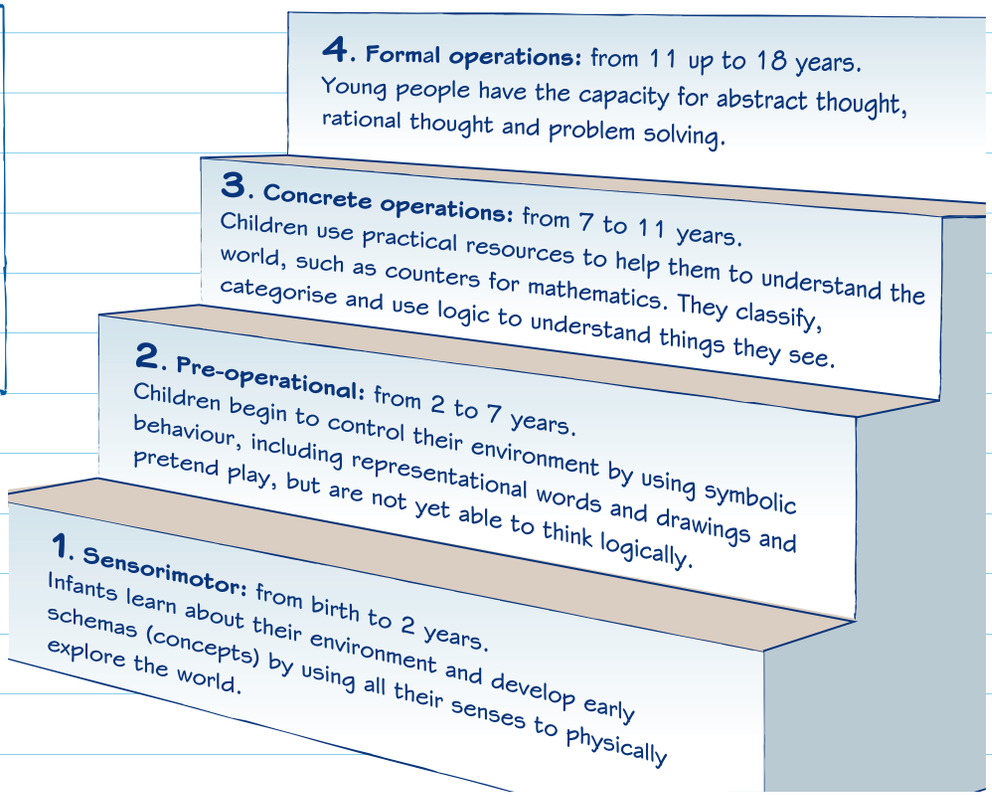
Had a look ☐ Nearly there ☐ Nailed it! ☐

Stages of cognitive development – Piaget

Piaget believed that children pass through distinct developmental stages in sequence. He thought that children should be allowed to discover things for themselves through spontaneous play.

Criticisms of Piaget's stages

Some critics believe that Piaget underestimated children's development and that with support they can move more quickly to the next stage of development.



Piaget's development stages

Piaget's schematic development theory

This theory explains how children use their experiences to **construct** their understanding of the world around them.

Assimilation: the child constructs an understanding or concept (schema).	The child has developed a schema about sand.
Equilibrium: the child's experience fits with their schema.	The child's experience in the nursery sandpit fits with their schema.
Disequilibrium: a new experience disturbs the child's schema.	Water is added to the sandpit. The sand behaves differently, which upsets the child's schema.
Accommodation: the child's understanding (schema) changes to take account of the new experience.	The child changes their schema to accommodate their new experience of sand. They develop a new schema.

Now try this

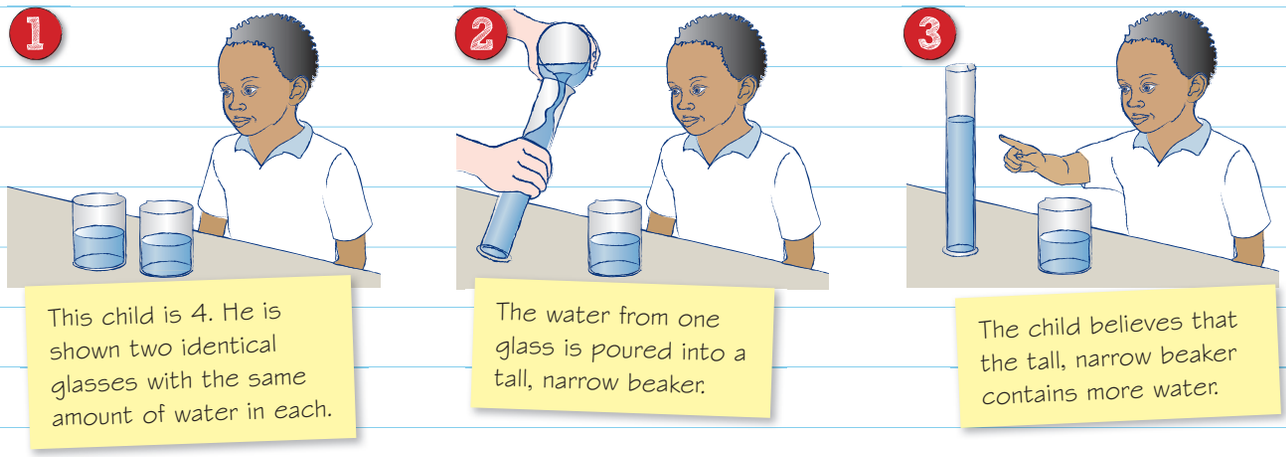
Explain, giving an example, what Piaget means by 'schema'.

Piaget – how children think

Piaget believed that children think differently from adults.

Conservation

Piaget carried out tests to show the stage when children begin to reason and think logically.



Piaget's test shows that:

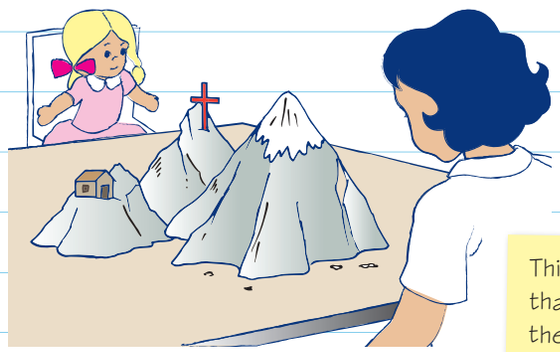
- Children under 7 years old cannot conserve because they cannot think about more than one aspect of a situation at one time.
- By the operational stage at 7 years old, children can think logically so understand that the quantity of water stays the same when poured into a differently shaped container.

Conservation

Conservation refers to children's understanding that the amount remains the same even when the container's shape has changed. Piaget also used tests using solids, weight and number.

Egocentrism

Piaget believed that, until children are 7 years old, they only see things from their own perspective (point of view). He used his Swiss mountain test to prove his theory of **egocentrism**.



This child is under 7. The test showed that children of this age cannot describe the mountain from the doll's perspective.

Criticisms of Piaget

- Piaget sometimes underestimated children's rate of development.
- With support, children can develop more advanced concepts.
- Children can be given experiences that help them to move through the stages at a faster rate.
- Some children can see things from the perspective of others before the age of 7.

Now try this

Nathan, aged 3 years, enjoys playing outdoors on the wheeled toys but gets frustrated when he has to wait his turn for a tricycle.

With reference to Piaget's theory:

1 explain why Nathan might find it difficult to wait for his turn

2 describe when he will start to see things from other children's perspectives.

Had a look ☐ Nearly there ☐ Nailed it! ☐

Language development

Language development involves communication through articulation (speech) and receptive speech (understanding).

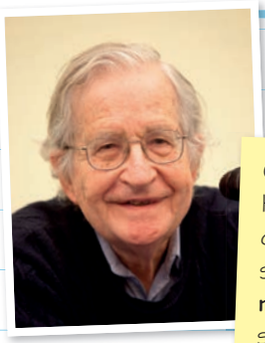
Stages of language development

Infancy	0–3 months	✓ Makes mouth movements in response to parent. ✓ Cries to ask for food or comfort.
	6–12 months	✓ Understands some words, such as 'byebye'. ✓ Makes sounds such as 'gaga'.
	18 months	✓ Can say between six and ten words. ✓ Can follow simple instructions.
Early childhood	2–3 years	✓ Links words together, for example 'me car'. ✓ Vocabulary increasing to approximately 200 words at 2½ years.
	3–5 years	✓ Uses simple sentences. ✓ Asks questions. ✓ May use incorrect forms of words, for example 'I good'.
	8 years	✓ Speaks in complex sentences. ✓ Can reason and explain.
Adolescence	9–19 years	✓ Developing vocabulary. ✓ Uses language to explore abstract ideas.

Language Acquisition Device (LAD)

Noam Chomsky proposed the LAD as the hypothetical part of the human mind that allows infants to acquire and produce language. He suggested that humans:

- are born with a structure in their brain that enables them to acquire language
- have a critical period for first language development in the first years of life
- all follow the same pattern of language development
- have an innate understanding of the structure of language (called **universal grammar**) that is the basis for all languages (subject, verb, object).



Chomsky's LAD theory helps to explain how children develop language skills. It is based on **nativist theory**, which suggests that individuals are pre-programmed to develop in a certain way.

Criticisms of Chomsky

1. Lack of scientific evidence of innate understanding of structure of language.
2. The rate of language development is affected by the degree of interactions with others.
3. Does not take into account that a language acquisition support system is required.
4. Chomsky put emphasis on grammar in sentence development rather than meanings.

Now try this

Saira is 3 years old. Explain **two** possible features of language development that help to explain how Saira has instinctively acquired language at her life stage, according to Chomsky.

Link the identified skills to how Saira might use them.

Theories of attachment

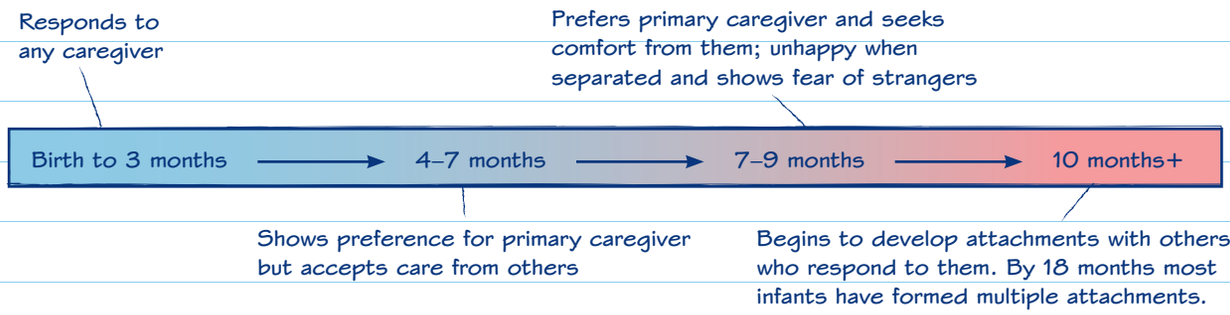
Attachment is the emotional bond that is formed between infants and young children and their main caregiver.

Bowlby's theory of attachment

Infants are biologically pre-programmed to form attachments

- Attachment to the primary caregiver is essential.
- In their early months, infants form one primary attachment.
- A disruption to attachment has a negative impact on development.
- Infancy is a critical period for developing attachments.
- Attachment to the primary caregiver is a model for future attachments.

Schaffer and Emerson's stages of attachment



Ainsworth's Strange Situation Classification (SSC)

Mary Ainsworth classified attachments into three main types, based on a study of children's reactions when parted from a parent.

Types of attachment	Secure	Insecure / avoidant	Insecure / resistant
Parenting style	In tune with the child and their emotions	Unavailable to child / rejects them	Inconsistent in meeting the child's needs
Infants' behaviour	Will show distress when primary caregiver leaves, and greets them when they return; seeks comfort from caregiver when upset; happy with strangers when caregiver is present	Does not show distress when primary caregiver leaves; continues to explore the environment; may go to a stranger for comfort	Shows distress when primary caregiver leaves but resists contact on their return; shows anxiety and insecurity

Disrupted attachment

Disrupted attachment may cause...

- Anxiety
- Difficulty in forming relationships
- Learning disorders
- Delinquency
- Depressive disorders

Now try this

Ruby is 1 month old. She lives with her mother but is sometimes looked after by her grandmother. Ruby's mum intends to return to work in a few months, so Ruby will go to a nursery.

Use Schaffer and Emerson's stages of attachment and Bowlby's theory to produce a flow chart to show how Ruby's attachment will develop during the infancy stage.

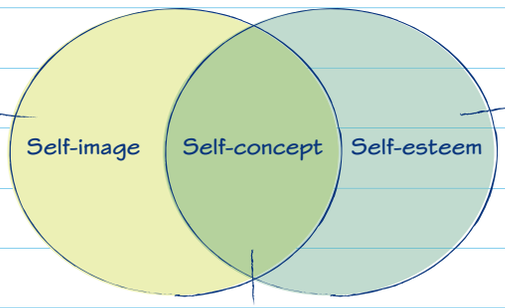
Had a look ☐ Nearly there ☐ Nailed it! ☐

Emotional development – self-concept

Self-concept is an individual's evaluation of their own self-worth.

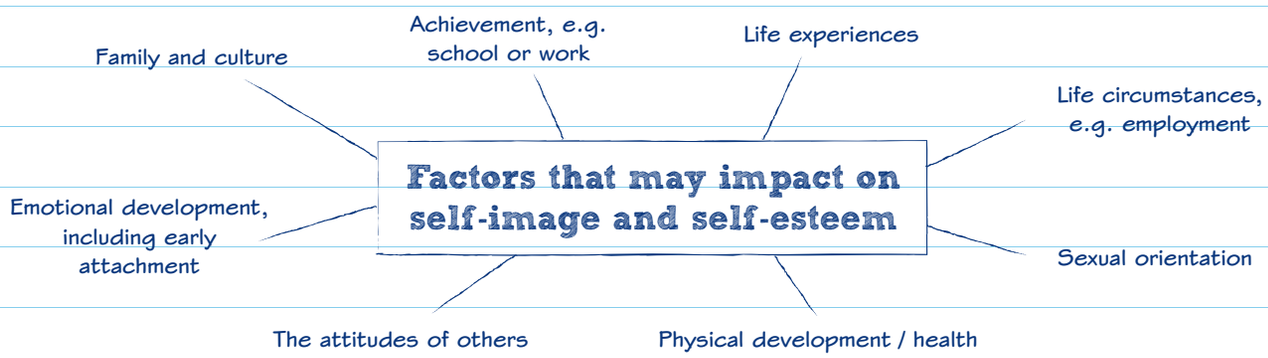
The difference between self-image, self-concept and self-esteem

How individuals view themselves, influenced by how they are perceived by others. For example, a slim person might perceive themselves as overweight.



How individuals value and feel about the knowledge they have of themselves. One person might think, 'I can't do it, I'm not good enough, people don't like me'. Another person might think, 'I can, I'm special, I'm clever, friends like me.'

The combination of self-image and self-esteem



Self-image and self-esteem

Positive self-image		Negative self-image	
👍	Feels happy about personal appearance and abilities	👎	Feels unattractive or less intelligent than others
👍	Receives good feedback from others about appearance and abilities	👎	Receives negative comments from others about appearance or abilities
👍	Compares self favourably with others	👎	Compares self negatively against 'perfect' images in magazines/on TV

High self-esteem		Low self-esteem	
👍	Feels confident	👎	Feels worthless
👍	Willing to try new things	👎	Less likely to try new things
👍	Copes well under pressure	👎	Less likely to cope well in new or difficult situations

A person's self-esteem is not constant and may change from time to time depending on an individual's circumstances.

Now try this

Carly is 13 years old. She has not yet reached puberty, but her two best friends have. They are both much taller than her, have started to develop breasts and are menstruating. Carly is receiving comments about her lack of development on social media.

How might Carly's experience affect her self-image?

Think about how Carly might compare her appearance with her friends and how she may be affected by others' comments.

Stages of play

The stages of play are closely linked with stages of social development and language.

Play in infancy and early childhood

- All children play.
- Infants start to play when they are just a few months old.
- Play promotes physical, intellectual, emotional and social development.

Varying stages of play

The stages of play may vary between children. All children will pass through these stages. Stages are influenced by children's language and intellectual development. Initially children play alone, then alongside other children, and eventually share and co-operate during play.

Stages of play in infancy and early childhood

0–2 years, **solo play**: this infant is engrossed in his own play.

Children play alone with toys such as rattles, shakers and balls. They may be aware that other infants are present but do not attempt to play with them.

2–3 years, **parallel play**: these children are playing next to each other but are involved in their own play.

Children are aware of other children. They may copy each other but they do not interact.

Stages of play

3 years and over, **co-operative play**: these children are sharing, talking and playing together.

Children share ideas and resources in the same activity. They interact and agree roles to develop their play towards a shared goal.

Language and play

Refer to the stages of language development and Chomsky's Language Acquisition Device (LAD) theory on page 12 to remind yourself that:

- ✓ play is important for children to develop their vocabulary
- ✓ children need language to be able to communicate and negotiate during co-operative play.

Symbols and play

Refer to Piaget's stages on page 10 to remind yourself of how children learn.

- ✓ Infants use all their senses to find out about the world around them (heuristic play).
- ✓ Children in the pre-operational stage (2 to 7) learn best through exploratory play. The provision of natural materials indoors and outdoors encourages curiosity and exploratory learning.

Now try this

Eli is 20 months old. Identify suitable toys and resources that could be provided to encourage parallel play alongside his brother Kian, aged 3 years.

Had a look ☐ Nearly there ☐ Nailed it! ☐

Friendships and relationships

Friendships and relationships are essential for healthy human development.

Building friendships

Building friendships involves learning to value others and developing skills to interact with individuals and groups.

Close friendships 	• From around 3 years old, children start to develop special friendships. • These make individuals feel secure and confident. • They also promote independence and self-esteem.
Friendships with a wider group of friends 	• As children widen their circle of friends, they become more confident and independent. • Adolescents are greatly influenced by the views of their friends, which may affect their self-image. • Wider friendships continue to be important in adulthood for positive emotional and social development.

Relationship breakdowns

A breakdown in relationships can have a negative impact on social and emotional development and health.

Developing relationships

Relationships involve developing skills to interact with others in different situations.

Formal relationships develop between non-related individuals such as colleagues or teacher and pupil. Positive formal relationships are important for good self-esteem and self-image.

Intimate relationships may begin in adolescence and continue, and new ones form throughout life. Close intimate relationships result in greater contentment, emotional security and positive self-image.

Relationships

Informal relationships are built between individuals and family or significant people. They start with attachments in infancy. Strong informal relationships promote contentment and the confidence to deal with life events. They help to build other informal, formal and intimate relationships throughout life.

Healthy relationships

Healthy relationships may result in:

- acceptance
- trust
- compromise
- respect
- responsibility
- honesty.

Unhealthy relationships

Unhealthy relationships may result in:

- stress
- isolation
- distrust
- blame
- low self-esteem
- insecurity.

Now try this

Saeed is 4 years old and has just started school. He has a best friend called Nathan.

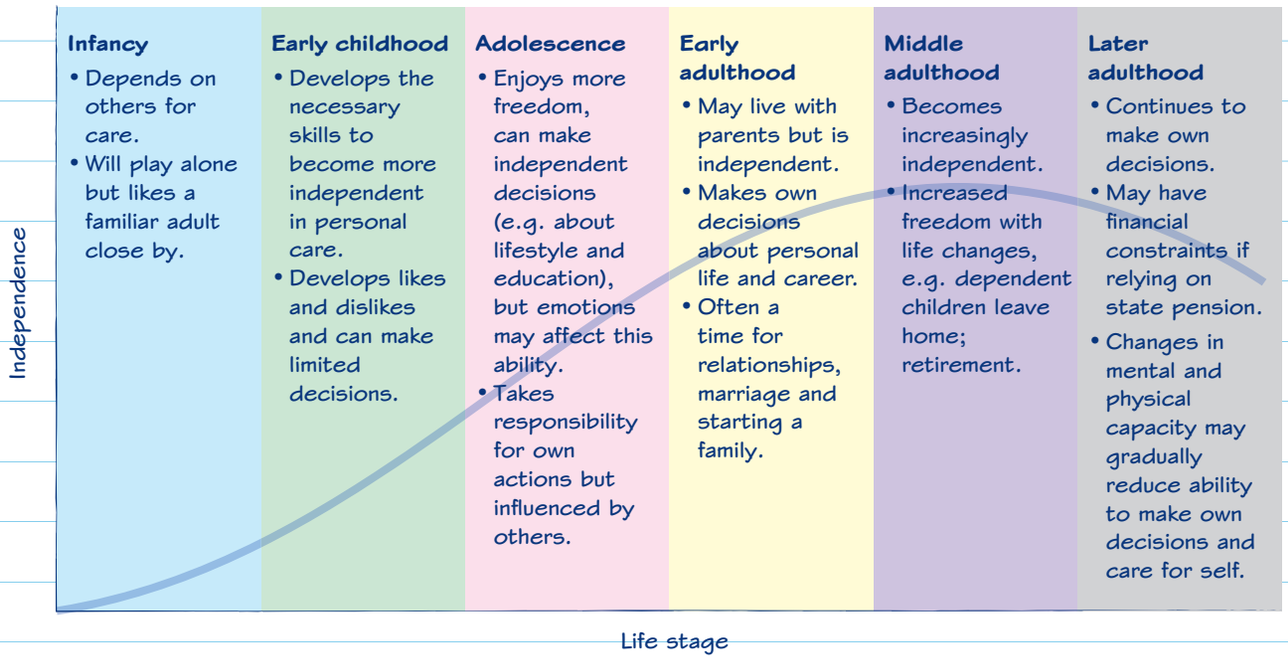
Explain the possible effects of building friendships on Saeed's social and emotional development.

Information on page 15 will help you with this answer.

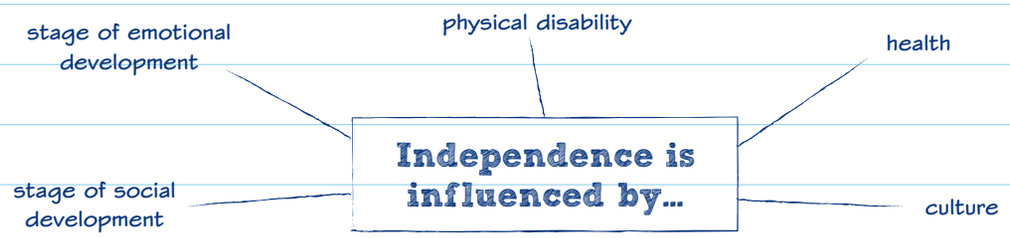
Social development and independence

Independence involves doing things for oneself and making decisions without relying on others. It is closely linked to social and emotional development.

The development of independence through the life stages



Levels of independence follow a pattern but vary between individuals



Peer pressure

Peer pressure describes a person or group influencing an individual to change their behaviour, values or beliefs so they conform to, and become socially accepted by, a peer group. Adolescents may pressurise others to follow their lead on school rules, home rules and lifestyle.

Negative and positive behaviours

Possible negative behaviours due to peer pressure:

- smoking, using alcohol and drugs
- truancy
- bullying
- vandalising
- stealing
- disrespect

Possible positive behaviours due to peer pressure:

- taking part in sport
- studying
- befriending
- respecting others
- learning a new skill
- eating healthy foods
- keeping safe if taking part in sex

Now try this

Identify **three** features of social development in adolescence.

Use the information on this page and page 16 to help you.

Had a look ☐ Nearly there ☐ Nailed it! ☐

Maturation theory

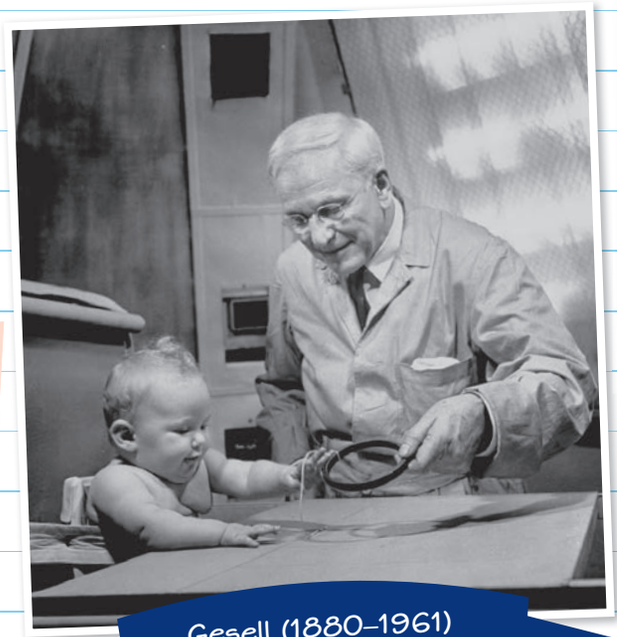
Gesell's theory helps to explain how biological maturation (the process of maturing) is related to overall development.

Gesell's maturation theory

Gesell based his theory on his belief that:

- development is genetically determined from birth – a biological process
- children follow the same orderly sequence in their development
- the pace of development may vary depending on physical and intellectual development.

'The child's personality is a product of slow gradual growth. His nervous system matures by stages and natural sequences.'



Gesell (1880–1961)

Gesell was a psychologist and paediatrician. He was a pioneer in child development and remains influential in our understanding of child development.

Gessell observed the behaviours of many children, from which he determined averages or 'norms' which he called milestones of development. His milestones describe children's physical, social and emotional development.

Gesell was the first person to use observation of children to understand their development.

Positive and negative views of Gesell's theory

👍 He determined typical norms of development that are still used today.

👍 He used advanced methodology in observations of behaviour of large numbers of children.

👎 He did not consider the influence of individual or cultural differences in children.

👎 He believed that the 'norms' of development he described were desirable.

Now try this

Outline how Gesell's milestones can help early years practitioners support and promote children's development.

Social learning theory

Social learning theory suggests that the way children behave is an interaction between personal and environmental factors.

Bandura's theory

Social learning theory is based on a belief that learning happens through observing, imitating and modelling the behaviours of others.

1. **Attention:** learning takes place when a child focuses their attention on a person who 'models' the behaviour. Children are more likely to imitate the behaviour of someone they identify with or admire.
2. **Retention:** what the child has observed is retained in their memory to be used when an opportunity occurs.
3. **Reproduction:** what has been learned is reproduced or imitated. It may be rehearsed in the child's mind first and then imitated later when there is an opportunity.
4. **Motivation:** children feel motivated because they anticipate intrinsic or extrinsic rewards (vicarious reinforcement). Children will be motivated to repeat or stop the behaviour, depending on intrinsic or extrinsic reinforcement.

The four principles of social learning

Reinforcement

Behaviour may be repeated or resisted – this is reinforcement and may be positive or negative.

Positive reinforcement: the behaviour is repeated because of personal satisfaction (intrinsic reinforcement) or rewards (extrinsic reinforcement).

Negative reinforcement: the behaviour is not repeated to avoid an adverse experience such as lack of satisfaction or being told off.

Vicarious reinforcement:

- Children may be motivated because they see that the person or 'model' they observe is getting satisfaction or positive feedback.
- Children may resist imitating the action because the model receives negative feedback from their action.

Remember: negative reinforcement is not the same as punishment.

Bobo doll experiment

Children were shown adults being aggressive or non-aggressive towards the Bobo doll. The aggressive adults were either rewarded, reprimanded or had no consequence for their behaviour. The experiment was designed by Bandura to show that:

- ✓ children would copy the aggressive behaviour of another person
- ✓ the outcome for the adult impacted on the likelihood of children copying the behaviour.

The result

- ✓ Children learned aggressive behaviour through observation.
- ✓ Children were more likely to imitate an adult who was rewarded for aggressive behaviour than one who was reprimanded.

Now try this

Use an observation of your own to explain Bandura's principles of learning.

Observe a child watching and imitating an adult's actions, for example using a computer or a telephone, or digging in the garden.

Had a look ☐ Nearly there ☐ Nailed it! ☐

Nature versus nurture

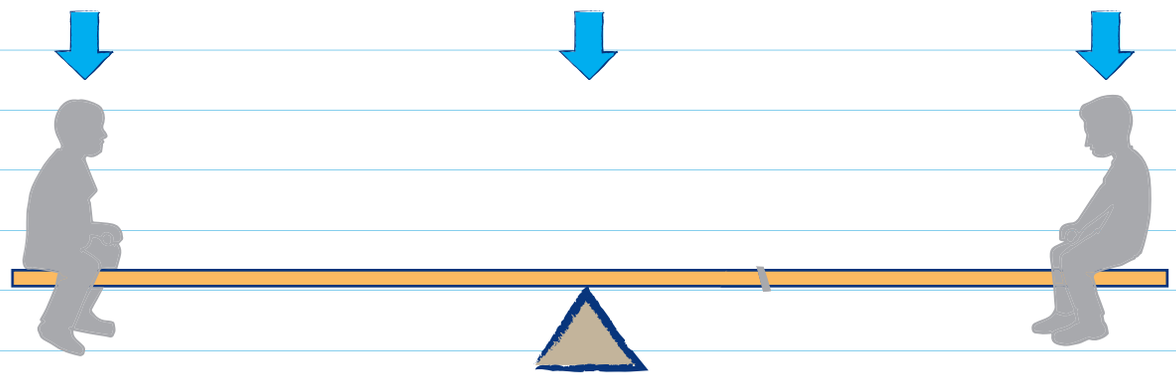
It is widely accepted that both nature and nurture play a role in human development.

Nature versus nurture debate

Nature (nativism): the influence of innate/inherited features on development. Based on the assumption that children are genetically pre-programmed. They have inherited skills, abilities and behaviours from their parents.

Nature and nurture: Piaget accepted that children develop in a predestined way (stages of cognitive development), but believed experiences help them to develop new concepts.

Nurture (empiricism or behaviourism): the influence of the environment and nurturing. Based on the assumption that characteristics are acquired and can be shaped through experiences.



Nature

Nurture

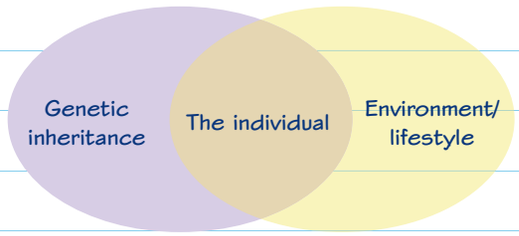
Look again at nativist theories, such as Gesell's maturation theory on page 18, Bowlby's attachment theory on page 13 and Chomsky's theory of Language Acquisition Device (LAD) on page 12.

Look again at Piaget's theories on page 10.

Look again at behaviourist theories, such as Bandura's social learning theory on page 19.

Genetic predisposition

An individual's **genetic predisposition** (nature) can be triggered by their environment and life experiences (nurture).



Stress–diathesis model

This explains how both nature and nurture play a part in the development of psychological disorders.

Nature — **Diathesis:** a predisposition or vulnerability to mental disorders due to an abnormality of the brain or neurotransmitters (genetic / biological factors)

Nurture — **Stresses:** traumatic events in a person's life, e.g. relationships, abuse, culture (environmental factors)

→ **Psychological disorders**

Now try this

Outline **one** theory that is based on a nature (nativist) approach and **one** theory that is based on a nurture (behaviourist) approach.

Links Look at pages 12, 13, 18 and 19 to remind yourself of the theories.