

Developmental psych papere

Science



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The study of the psychological development in children has been an ongoing endeavor. Renowned theorist, Sigmund Freud developed a psychoanalytic stage of psychological development focusing on the psychosexual development of individuals. Erikson developed his own theory of development which pned over one's lifetime. Psychological development has stirred arguments in theory from biological theorists and environmental theorists as well.

Despite the uncompromised viewpoints from psychological, biological, and environmental theorists, children continue to be born, grow, and become adults without a definitive explanation to their development. There exists the lingering question as to why some children grow and develop serious psychological disorders and learning dysfunctions when compared to other children who are devoid of any dysfunction.

Background

At first view, Adam is a rambunctious typical 8 year old boy. It is noticeable that his attention p is compromised as he is unable to remain focused on one activity for any given length of time. His parents, Jason and Alexis, explained that Adam was born via Caesarean section after forty-two prolonged hours of labor. A second child was born, a girl, later the following year. At the age of 2, his parents noticed that he seemed too eager and full of energy. After a trip to the pediatrician, they were assured that this was typical behavior for a 2 year old boy.

Up to the age of 4, his parents became more distraught with their inability to control his behaviors. By this point, Adam was sleeping three hours per

night, had gotten outside the family home by picking a lock with a butter knife, was physically abusing his younger sister, had broken his collar bone jumping off a Little Tyke car, re-broken the collar bone in the doctor's office jumping off the exam table despite the doctor's efforts to catch him, and his parents were

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sleeping in shifts in order to keep up with his hyperactivity (personal communication, May 15, 2010). The family received reassurance from the pediatrician who indicated that it was a phase that Adam would soon outgrow. It is clear that both Jason and Alexis were debating whether or not Adam's behavior was an individual difference or an abnormal behavior, but one could also suggest the possibility of the issues with Adam being related to a nature versus nurture conflict (Berryman, et al, 2002)

Analysis

Diagnosis

When Adam was 6, his parents contacted a Child and Adolescent Psychiatrist after exhausting every other known resource and outlet, including school counselors and the family pediatrician. Adam was put through a series of developmental, biological, and psychological tests. The psychiatrist met with the parents two-weeks following the testing phase. It was determined that Adam was suffering from Attention Deficit Hyperactivity Disorder (ADHD) and Bipolar Disorder I. While Jason and Alexis admit that they were horrified by the diagnoses, they have stated that they were equally relieved to finally

have a name for what was wrong with their son (personal communication, May 15, 2010).

The Diagnostics and Statistics Manual for Mental Disorders, fourth edition, (DSM-IV-TR) defines ADHD as being a condition often present in children indicated by behaviors and mannerisms inconsistent with the child's developmental age (American Psychiatric Association, 1994). Specific symptoms include restlessness, driven mood, excessive talking, distractible, and an inability to remain focused. The American Psychiatric Association (APA) notes that learning disabilities are frequent with the diagnosis of ADHD (APA, 1994). The diagnosis of Bipolar

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Disorder I indicates that episodes of mania are or have existed in the patient. Bipolar Disorder is defined as severe mood swings associated with elated happiness, or mania, in contrast to extreme depression, or periods of sadness (APA, 1994).

Treatment

Treating both of these conditions in a child requires consistency and encouragement from the family. From a pharmacological standpoint, these conditions are being treated with Clonidine and Depekote. Family and cognitive therapies have been incorporated into the family's routine. Lab tests, blood work, are performed bi-weekly as the level of Depekote must be monitored so that it does not become toxic. In reference to Adam's learning disability, he is enrolled in special education classes in a public elementary

school. To date, Adam seems well adjusted and fully cooperative in taking his daily medications. Alexis indicated that his individual therapy has helped him to recognize periods where he has become too active, whereby Adam will indicate that he needs some alone time to calm down (personal communication, May 15, 2010).

Discussion

The prognosis for these types of conditions in children is uncertain. Years ago, a diagnosis of Bipolar Disorder in a child was unheard of, and it would seem to be more congruent with a Conduct Disorder. Times are changing as is developmental psychology. The origin of these conditions is not definite. Alexis wonders if there was oxygen deprivation during labor which may have contributed to Adam's disorders, but there is not a clear or concise medical opinion to assert this to fact (personal communication, May 15, 2010). There are still questions as to whether or not either of these conditions may be hereditary, despite the fact that neither

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Jason nor Alexis have any family members with either condition. With regard to the abnormal behavior exhibited by Adam; there exists a name for the psychological dysfunction. In relation to Adam as an individual, it is obvious that he does have specific differences than that of other children his own age. It is still a battle and argument to be had with regard to developmental psychologists and theorists.

Conclusion

Jason and Alexis continue to live and function with the knowledge that their son has been diagnosed with two disorders requiring constant monitoring and care. In lieu of these conditions, they still manage to do things as any other family does. They have a family in which one child has special needs. For them, these needs have become the norm, even though society views these obstacles as an intrusion and inconvenience. Developmental psychology is a study of the ways in which one goes from being a dependent infant to a self-sufficient adult. There are a variety of ways that each individual will accomplish such a task. There does not appear to be any one definition by which each person grows and develops thoughts, mental processes, or abilities. Each person simply grows by learning and adapting in order to survive. The field of developmental psychology has much work and research ahead of itself, but it has already made great strides with regard to how society has gotten where it is.