

Psychological  
theories of life span  
development  
psychology essay



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Development can be defined as systematic changes that occur in the individual between conception and death, or from womb to tomb. These depend on multiple factors. Life has been divided into number of stages.

**Prenatal period: conception to birth:** This stage included the time from conception to birth. Though the child has not come to the outside world but a life is there, the heart is beating and this is termed as prenatal period.

**Infancy: First two years of life:** This is the stage when the child learns the most. He or she is not going to the school but learns a lot from the family and other people around them. If this stage is enjoyable, the child will have a good chance to have a bright future.

**Preschool period: 2 to 5 or 6 years of life (toddler):** This age is crucial in learning as the child attends this part of his life in the school. Child's mind is like a white slate with the ability to imbibe many new things. So it is the responsibility of the parents and the teachers to judge their abilities and motivate them and guide them in to the right direction.

**Middle childhood: 6 to 12 years of age:** This is the stage before puberty, the mind is still young and innocent and not aware of the worldly matters. By the end of this stage, basic school education is normally complete in most cases.

**Adolescence: 12 to 20 years of age:** This stage is important as many significant changes happen in the body. This is the stage when puberty happens. Boys become more muscular, develop beard and their voice becomes hoarse. Girls develop a feminine figure and start menses. This stage can be confusing and the child might not fully understand that what is

happening. This stage needs lots of guidance and friendly help from the family, teachers and peers.

Early adulthood: 20 to 40 years: This is the stage when the career starts to grow. Man or the woman starts climbing up the ladder of success in the society. People tend to get married at this stage of their life, have children, buy a house and would like to settle down in their life. This is the youth and people feel lots of positive energy. This energy if utilised in the right direction would lead to a fruitful life and a stable relationship which further leads to a stable society

Middle adulthood: 40 to 60 years: At this stage of life, person starts to gain more experience and gets an opportunity to look back and learn from his or her mistakes. It is a stage when it is time to enjoy the happiness and luxuries because the hard work done in earlier life usually pays its rewards at this stage.

Late adulthood: 65 years and older: This could easily be compared to childhood again. In some cases, memory seems to fade away and the body doesn't feel the same energy. People, in some cases, retire from work. But is extremely important to keep as fit and healthy as possible. It is valuable to keep active during this stage of life.

Development is the main concept in nature. Many theories have been developed to understand these stages.

## **Continuity and Discontinuity**

We have to understand the concept that do humans change gradually with time. We have to understand the concept that do humans change gradually with time or is the change more abrupt and dramatic? One aspect of the continuity-discontinuity issue focuses on whether the changes people undergo over the life span are gradual or abrupt. Continuity theorists believe that changes occur gradually and not suddenly, in small steps, for example children gaining weight at school year after year while growing. In contrast, discontinuity theorists believe that these changes occur more like a series of stair steps, each of which elevates the individual to a new level of functioning. When an adolescent boy rapidly shoots up 6 inches in height, his voice becomes hoarse and he grows a beard, the change seems discontinuous.

The activity-passivity issue focuses on whether people play active role in their own development or passively develop by forces outside themselves.

Finally, developmental theorists often disagree on this concept-on the extent to which developmental changes are common to all humans (universal) or different from person to person (context specific).

Freud: Psychoanalytic Theory proposed that people are driven by motives and emotional conflicts of which they are not even aware and that they are shaped by any experiences they have had in their lives (Hall, 1954).

The main concept of this theory is that humans have basic biological urges or drives that must be satisfied. Freud believed that these needs or urges are present in human right from since they are born. Even a little infant will have <https://assignbuster.com/psychological-theories-of-life-span-development-psychology-essay/>

some need and urges which he wants to satisfy. These biological instincts are the source of the psychic energy that regulates human behaviour and that is channelled in new directions over the course of human development.

Freud strongly believed in motivation which happens without the knowledge of conscious mind-the power of instincts and other inner forces to influence behaviour without even knowing about it.

### **Erikson: Neo-Freudian Psychoanalytic Theory**

Erikson believed that humans everywhere experience eight major psychosocial stages, or conflicts, from the time they are born till the end of their life. In contrast to views shared by Freud, Erik Erikson placed more emphasis on social influences. He mainly focused on the potential for overcoming early problems and the whole life span. Parents, friends and other people around you can influence how these conflicts are resolved. So, family, friends and other near and dear ones have an important role to play.

The theories of both Freud and Erikson, though influential, are difficult to test. They just describe development but not very good at explaining it.

Once a famous scientist, Watson, said that give me a dozen children from different backgrounds and families. He claimed that he could turn them into doctors, lawyers or scientists or any profession he liked. He stated that it all depends on the education and the environment we provide to the children. So his main focus was on the environmental factors.

This bold statement-that nurture is everything and that nature, or genetic endowment, counts for nothing-was made by John B. Watson. He strongly believed that learning plays a significant role in human development. Nature has its role but nurturing is the major factor, according to his views.

### **Learning theories:**

Watson focused on the role of classical conditioning in the learning of emotional responses; Skinner highlighted conditioning involving reinforcement and punishment; and Bandura's social cognitive theory emphasizes observational learning and self-efficacy.

### **Piaget: Cognitive Developmental Theory**

Stages of Cognitive Development:

Piaget proposed four major periods of cognitive development: the sensorimotor stage (birth to age 2), the preoperational stage (ages 2 to 7), the concrete operations stage (ages 7 to 11), and the formal operations stage (ages 11 to 12 or older). These stages form what Piaget called an invariant sequence.

Systems theories of development (some are called contextual theories, some systems theories or dynamic systems theories) generally claim that changes over the life span arise from the ongoing transactions between a changing organism and a changing world.

Systems theories view development as the product of on-going transactions between person and environment. Ethology asks how species-specific behaviors may have evolved. It all depends upon the interactions among

genes, brain activity, behaviour, and the environment. So, basically it depends on many factors.

Stage theorists such as Freud, Erikson, and Piaget form one broad group and have many ideas which are more or less common. They believe that biological, maturational forces within the individual are the main things which guide the development of an individual. But then there is another broad group which is formed by the learning theorists such as Watson, Skinner, and Bandura. They emphasize the role of environment more than the role of biology in development. Finally, systems theorists emphasize both biology and environment as inseparable components of a larger system. To draw a conclusion from both the views would be quite difficult. But it can be easily said that humans play an important active role in their development and also the environment plays a significant role in human development.

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## **TASK 2**

### **I. Analyse social and biological determinant of human behaviour (2: 1)**

#### **Biological Factors**

Children are born with a range of genetic makeups, neurological predispositions, and temperaments. During the past two decades, researchers have made significant advances in discovering the many biological and neurological factors that may play important roles in the development of antisocial and violent behavior. Researchers have continually emphasized that biological or neurological factors do not act in isolation. Neurobiological development is continually influenced by the psychosocial and physical environment across the life span. For example, it is becoming increasingly apparent to behavioral scientists that a lack of physical contact, verbal stimulation, and social responsiveness from parents and care givers can substantially alter the rate of intellectual, emotional, and social development in children (Dahlberg & Potter, 2001). Tremblay and Cote (2005) use the example of mothers who smoke during pregnancy as another environmental influence on the neurological and biological development of infants.

Developmental scientists have continually documented the strong association between a child's difficult temperament and the development of persistent antisocial behavior. According to the research literature, temperament is assumed to (1) have a constitutional or biological basis, (2) exist at birth and continue across the life span, and (3) be influenced by the psychosocial environment.



Over the past 30 years, more than 100 twin and adoption studies have examined the relationship between genes and aggression or violence (Perusse & Gendreau, 2005). Not surprisingly, most scientists have concluded that both genetic and environmental factors are important in the development of antisocial behaviour. Some scholars (e. g., Rhee & Waldman, 2002) have estimated that environment plays a significantly more important role in the development of antisocial behaviour than does genetics.

**Brain Chemistry:** The assumption by the scientific community is that low concentrations of dopamine in the frontal cortex may be linked to poor self-regulation and faulty executive functions. Another neurotransmitter that has been linked to poor impulse control and violent behavior is serotonin.

Basically, many individuals who act aggressively or violently toward others may have abnormally low levels of serotonin (Coscina, 1997; Lesch & Merschdorf, 2000; Loeber & Stouthamer-Loeber, 1998). Low levels of serotonin are also linked to depression and suicide (Pihl & Benkelfat, 2005).

Other neurotransmitters are believed to be associated with violence and antisocial behaviour, such as norepinephrine and GABA.

## **Social Factors**

Cigarette smoking, excessive alcohol consumption, other substance abuse, unhealthy dietary habits, sedentary lifestyles, and no adherence to effective medication regimens were among the health-compromising behaviours identified and targeted for modification or prevention with consequent benefit to the public health. The 1982 report recognized that “ both access to health care and regard for its advice are behaviourally influenced” (IOM,

1982: 25) and that “ the burden of illnesses and disabilities in the United States and the world is closely related to social, psychological, and behavioural aspects of the way of life of the population” (IOM, 1982: 49-50).

Poverty, relative deprivation and social exclusion have a major impact on health and premature death, and the chances of living in poverty are loaded heavily against some social groups. Absolute poverty – a lack of the basic material necessities of life – continues to exist, even in the richest countries of Europe. The unemployed, many ethnic minority groups, guest workers, disabled people, refugees and homeless people are at risk.

## **II. Evaluate the importance of social roles in the context of health and social care settings (2: 2)**

The biomedical model is defined as an approach to patient care in which only the biological and medical aspects of a patient’s illness are considered relevant information to be obtained. The model developed out of a prevalent misconception that one can focus on the disease entity without considering the person who has the disease (Cassell, 1991). Not included in this model are the patient’s psychological experience and social environment. These omitted factors can have a major impact on a patient’s susceptibility to illness and on illness outcome.

In contrast, the bio psychosocial model is a comprehensive approach to patient care in which all major aspects of a patient’s life are explored (biological, psychological, and social). When used, this approach enables us to provide more effective treatment.

For example: John is aged 9 years. He lives with his unemployed father and alcoholic stepmother. He has diabetes that is well controlled in hospital but poorly controlled at home. His school attendance is poor. He was admitted to hospital in a diabetic coma and found to have an MRSA (methicillin-resistant staphylococcus aureus) infection at his main injection site. He is quiet and compliant.

John's type of problem is not uncommon and serves to highlight the importance of interprofessional and inter-agency working. A few days in hospital treating his infection and controlling his diabetes will save his life but will not promote John's long-term health. Establishing links between school and home and supporting John and his parents under the joint guidance of the doctor, school nurse, psychologist or mental health nurse, and social worker could make a real difference to his future health.

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## **(I). Explore the application of psychological theories to individual experiencing stress and behaviour disturbances in health and social care (3: 1. 3: 2)**

Stress can be defined as a condition that happens when any person or certain environment makes the person to believe there is a discrepancy, which can either be real or perceived.

Success and failure in previous transactions would determine the amount of stress perceived. Knowledge about human thought and behaviour has emerged thanks to various psychology theories. These psychological theories can be applied to the cases of individuals experiencing stress.

### **Behavioural Theories:**

Behavioural psychology, also known as behaviourism, is a theory which emphasises that all behaviours are acquired through conditioning. Today, behavioural methods are widely used. People who are feeling stressed can condition themselves and acquired new behaviours. This could be an essential tool in alleviation of stress.

### **Cognitive Theories:**

Cognitive theories of psychology mainly deal with motivation, solving queries, making decisions and thinking. If individuals could solve problems, motivate themselves and make appropriate decisions, this could have a significant impact on reducing the amount of stress.

### **Developmental Theories:**

Human growth and development along with learning is the main focus in these theories. If the thought process can be modified, these theories can

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be of real help. They help with the growth of human mind and assist learning. These are the goals to be achieved while dealing with individuals facing problems of stress.

### **Humanist Theories:**

Humanistic psychology theories began to become widely used in the 50s. While earlier theories often focused on psychological problems and abnormal behaviour, humanist theories instead focussed on the basic good nature of people. These theories could easily be applied to people facing significant stress.

### **Personality Theories:**

People around us are always assessed by us. How people behave and why people behave in a certain manner is an interesting study. Personality psychology deals with people individually as everybody is different. Some of the best known theories in psychology are devoted to the subject of personality.

### **Social Psychology Theories:**

Social behaviour can be understood easily using these social psychology theories. Social theories are generally cantered on specific social phenomena, including group behaviour, prosocial behaviour, social influence, love and much more.

## **Learning Theories:**

Learning theories help us to learn that how people learn and acquire knowledge. This involves dealing with many disciplines like education and other areas.

### **(ii) How do psychological theories enhance understanding of relationships in health and social care?**

Psychological theories help us to improve our understanding of relationships. It is a study of human behaviour and the processes of mind. It tries to answer why we do certain things and how we do them.

Health psychology is interested in factors that influence the initiation, continuation, cessation and modification of behaviours that impact on health and health outcomes. To this end psychological theories propose hypotheses to explain and predict behaviour, while models (which are derived from theories) detail the processes and stages of how the behaviour under observation is enacted. In addition to observable behaviours the health beliefs held by individuals and the impact these beliefs have on their health-related behaviours are investigated. Finally, health psychology is interested in finding effective strategies to help people to overcome resistance to change their behaviour and prevent relapse.

Psychological theories and models of health behaviour attempt to explain or predict an individual's engagement in behaviours that influence the risk for illness or injury and the maintenance of health. In the main, psychological theories of health behaviour fall into two broad categories:

behaviourist/learning theories and cognitive theories. Behaviourist/learning

approaches include operant conditioning, classical conditioning and modelling or imitation. Cognitive approaches include the health belief model and the transtheoretical model of behavioural change. The theory of planned behaviours introduces social influences to a cognitive model as does the health action process approach.

**(iii) Critically evaluate how psychological theories influence health improvement, behaviour change and care strategies (3: 4. 3: 5)**

These theories can influence in the following manner:

- appreciate how people's understandings and needs vary, so that we can try to ensure that the individualized care we provide is both appropriate and optimal;
- gain a better understanding of communication processes so that we can identify ways of improving the relationship and work more effectively;
- identify factors that affect how people cope with such situations as acute and chronic illness, pain and loss, and the demands of everyday life, so that we can help them, and ourselves, to cope better and reduce the risks of stress-related illness;
- inform us about factors that influence people's lifestyles and what motivates certain health-related behaviours such as smoking, dietary change and exercise;
- apply interventions to enhance health and well-being, and help people to change or modify their lifestyles.

Cognitive theories mainly deals with information being processed and attributes like memory, solving problems and ability to reason. It focusses on mental plans and thoughts which influence behaviour. Psychological theories uses different approach. Biological, psychological and social approaches are linked together and this aims to understand the relationship between them. These theories can be used to study specific illnesses like heart problems, cancers or diabetes.