General Psychology
Notes - Human Development

These are general notes designed to assist students who are regularly attending class and reading assigned material: they are supplemental rather than exhaustive and reflect general concepts.

I. Prenatal Development
A. Germinal Period - Conception to 2 weeks
   1. Creation of the zygote
   2. Continued cell division
   3. Implantation - attachment of the zygote to the uterine wall (10 days after conception)
      * Blastocyst - inner cells (embryo)
      * Trophoblast - outer layer (placenta/umbilical cord - life supports systems)
B. Embryonic Period - 2 to 8 weeks after conception
   1. Cell differentiation intensifies, support systems for cells form and organs appears
   2. Attached zygote becomes embryo
      * Endoderm (digestive/respiratory systems)
      * Mesoderm (circulatory system, bones, muscles, excretory system, reproduction system)
      * Ectoderm (nervous system sensory receptors, skin parts such as hair and nails)
C. Fetal Period - 8 weeks after conception until birth
   1. Fetal size increases and organs start functioning
   2. Reflexes appear and there is sexual differentiation
D. Miscarriage and Abortion
   1. Most occur within 1st trimester (chromosomal abnormalities)
   2. 15-20% pregnancies end in miscarriage
      * male fetuses more likely to miscarry
   3. Abortions legal in U.S. until end of 2nd semester
      * 1 abortion for every 2 births
      * Unwanted pregnancies stressful for woman regardless of how it is resolved
      * Psychological effects of abortion include relief and guilt (usually mild and disappears)
* Women with previous psychiatric problems more likely to experience adverse effects

II. Teratology and Hazards to Prenatal Development
A. Teratogen - any agent that causes birth defects
1. Environmental Hazards
   * Radiation (chromosomal abnormalities)
   * Pollutants & toxic wastes (lead, pesticides, carbon dioxide, mercury dangerous to fetus)
   * Drugs
     Thalidomide - prescribed in 1960's for morning sickness (deformed babies)
     Cocaine/heroin (addiction/withdrawal symptoms/neurological defects)
     Alcohol (fetal alcohol syndrome)
     Smoking (low birth weight, ADHD, premature births, SIDS)
     Marijuana, antibiotics, excessive vitamins, antihistamines, aspirin, diet pills harmful
2. Maternal diseases can cross the placenta barrier and cause birth defects
   - Rubella (German measles) - deafness
   - Syphilis - mental retardation, blindness and skin lesions
   - Genital Herpes - only if mother is active during delivery and baby comes in contact with sores; can cause blindness and other complications (1/3 die and 1/4 brain damage)
   - AIDS/HIV+
     .....1/3 babies born to HIV+ mothers become infected

III. Reflexes - Born with reflexes and skills necessary to sustain life (sucking, swallowing, Moro/startle reflex, grasping, rooting, Babinsky, stepping, looking, and perceptual abilities like seeing, hearing and smelling)

IV. Jean Piaget - Theory of Cognitive Development
A. **Schema** - organized unit of information
B. **Assimilation** - incorporate new information into their existing knowledge (schemata)
C. **Accommodation** - adjust to new information/modify existing schema
D. Stages of Cognitive Development
   1. **Sensorimotor** (Birth - 2) - thinking consists of coordinating sensory impressions with motor movement (reflexes)
      a. Example: touch the baby's cheek (sensory impression) activates the rooting reflex (motor movement).
      b. Six substages (beyond the scope of General Psychology).
c. Developmental Milestone: Object Permanence - the ability to understand that things exist outside of the baby’s immediate awareness.

2. **Preoperational** (2-7) - symbolic representation of world
   a. Most significant feature is symbolic representation: the ability to communicate their understanding of the world. Accomplished in 3 ways:
      * The use of language
      * Role Playing
      * Drawings
   b. Other important characteristics:
      * Egocentrism - the inability to understand another person's perspective. Believe that everyone understands the world as he or she does.
      * Animistic thinking - attribute life to inanimate objects (active imagination/imaginary friends)
      * Centration - tendency to only pay attention to salient (flashy) features of something. This explains why characters such as Barney and Big Bird are popular with preschool children.

3. **Concrete operational** (7-11) - perform mental tasks
   * Perform mental tasks such as reading, writing, spelling, and math.
   * Conversation: Ability to recognize that properties such as weight, volume, and monetary value remain the same despite changes in their appearance.

4. **Formal operational** (11-15+) - abstract thought & hypothetical problem solving
   1) Abstract Thought - Can think about thinking. Concepts such as love, justice, harmony can be understood.
   2) Hypothetical Reasoning - Can generate alternative solutions to problems
   3) Critical Thinking develops
   4) Dialectical Reasoning develops - ability to integrate multiple perspectives into problem solving.
   5) Adolescent Egocentrism
      * Personal fable/pseudostupidity - belief they they are invincible and nothing bad will happen to them. (Drink and Drive, Unsafe sex)
      * Imaginary audience - everyone is preoccupied with him or her
   6) Approximately 50% of the population does not make it into formal operational thought.

V. **Erik Erikson** - Psychological Development - 8 developmental tasks/crises
   1. **Trust** - vs. - **Mistrust** (first year)
      * trust requires feeling of physical comfort, safety, security, and affection
responsive and sensitive caregivers  

2. **Anatomy - vs. - Shame & Doubt (1-3)**  
   * discover a will of their own - independence and self trust  
   * if restrained too much or punished too harshly, develop a sense of shame & doubt  

3. **Initiative - vs. - Guilt (3-5)**  
   * developing more purposeful behavior/ability to take action  
   * need to be challenged, given responsibility and allowed to explore  

4. **Industry -vs. - Inferiority (6-12)**  
   * mastering knowledge, intellectual and social skills, special talents/gifts  

5. **Identity - vs. - Identity Confusion (adolescence)**  
   * active decision making regarding values/beliefs/vocation/sexuality/relationships  
   * involves introspection (self-reflection) and role experimentation  

6. **Intimacy - vs. - Isolation (Early Adulthood)**  
   * total sharing of self with another  

7. **Generativity - vs. - Stagnation (Middle Adulthood)**  
   * assist younger generation in developing and leading useful lives  

8. **Integrity - vs. - Despair (Late Adulthood)**  
   * retrospection is either positive (integrity) or negative (despair)  
   * embrace or fear death  

**VI. Moral Development**  

**A. Kohlberg**  

1. **Level 1 - Preconventional** - moral reasoning completely external  
   * stage 1 - Punishment/obedience - avoid punishment  
   * stage 2 - Individualism/Purpose - obtain reward  

2. **Level 2 - Conventional** - internal dictated by external  
   * stage 3 - Interpersonal norms - seek approval from others (value trust, caring, loyalty)  
   * stage 4 - Social System - follow the rules because they are the rules (law, duty, justice)  

3. **Level 3 - Postconventional** - completely internal and not based on other's standards  
   * stage 5 - Community rights -vs- individual rights - values and rights are relative, laws important but can be changed if violate liberty  
   * stage 6 - Universal ethical principles - follow conscience over law  

**B. Kohlberg's critics**  

1. Too much emphasis on moral thought and not on moral behavior. Moral reasons shelter for behavior.  
2. Individualistic and culture specific  
3. Carol Gilligan - Puts emphasis on justice perspective and neglects care perspective; accentuates difference between men and women  

**C. Altruism** - Unselfish interest in helping others begins to develop about the age of 4
VII. Families

A. Diana Baumrind’s Parenting Styles:

1. Authoritarian (Because I said so “My way or the highway”) - Restrictive, punitive, controlling, very demanding and providing very little affection and warmth. These children
   * tend to be ineffective in social interactions/socially incompetent
   * tend to harbor feelings of anxiety, resentment, anger
   * tend to have poor communication skills and are more aggressive
   * tend to have low self esteem

2. Permissive Indulgent (“Whatever you want honey”) - Highly involved with their children and provide warmth and affection but place few demands or controls on them. There are no limits and these children:
   * tend to lack self control and are self indulgent
   * have difficulty learning respect for others and have poor problem solving skills
   * are prone to temper tantrums and have difficulty maintaining friendships
   * often engage in high risk behavior (promiscuity, drugs, alcohol)

3. Permissive Neglectful (Parents are unable to answer the question “It 10:00 P.M. - Do you know where your child is?”) Very uninvolved in child’s life. Do not have demands/expectations and show little to no affection or warmth. These children:
   * tend to have low self-esteem and often suffer from depression
   * tend to show poor self-control and do not handle independence well
   * tend to feel apathetic and are not involved in school or extracurricular activities
   * often engage in high risk behavior to get parents’ attention including suicidal gestures
   * have difficulty making decisions and usually demonstrate poor problem solving skills

4. Authoritative/Autocratic - (“You know what you did was wrong. How could you have handled that situation differently?”) Encourage children to be independent but still place limits and controls on their actions. Extensive verbal give-and-take is allowed, and parents are warm and nurturing toward child.
   Authoritative parents:
   * tend to exercise flexibility and are willing to negotiate changes in rules as child matures
   * have high expectations but provide structure and guidance so child can meet parental demands/expectations
* provide positive reinforcement to increase desired behavior and increase self-esteem
* to decrease undesirable behavior, redirect misbehavior, use natural consequences and time-out extensively and punish minimally
* are actively involved in child's life by regularly attending extra-curricular activates, spending quality time with their child, and providing undivided attention when the child is talking with them (good eye contact especially important)
* model mutual respect and cooperation

Children raised by authoritative parents:
* tend to be socially competent, self-reliant, and socially responsible
* tend to have good problem solving and conflict resolution skills
* tend to be content, well adjusted, and get along well with others
* tend to have good self-esteem and internal locus of control

***Most common parenting style in the world***