Principles and Practices of Child Care

Child Development

What is child development?

Child development is a process every child goes through. This process involves learning and mastering skills like sitting, walking, talking, skipping and tying shoes. Children learn these skills, called "developmental milestones", during predictable time periods.

Children develop skills in five main areas of development:

1. **Cognitive Development**: This is the child's ability to learn and solve problems. For example, this includes a two-month-old baby learning to explore the environment with hands or eyes or a five-year-old learning how to do simple math problems.

2. **Social and Emotional Development**: This is the child's ability to interact with others, including helping themselves and self-control. Examples of this type of development would include: a six-week-old baby smiling, a ten-month-old baby waving bye-bye, or a five-year-old boy knowing how to take turns in games at school.

3. **Speech and Language Development**: This is the child’s ability to both understand and use language. For example, this includes a 12-month-old baby saying his first words, a two-year-old naming parts of her body, or a five-year-old learning to say "feet" instead of "foots".

4. **Fine Motor Skill Development**: This is the child's ability to use small muscles, specifically their hands and fingers, to pick up small objects, hold a spoon, turn pages in a book, or use a crayon to draw.

5. **Gross Motor Skill Development**: This is the child's ability to use large muscles. For example, a six-month-old baby learns how to sit up with some support, a 12-month-old baby learns to pull up to a stand holding onto furniture, and a five-year-old learns to skip.

The National Center on Birth Defects and Developmental Disabilities has recently launched a campaign to promote child development. For more information on child development, visit the Act Early website:

http://www.cdc.gov/ncbddd/autism/actearly/

Childhood Development: First 6 Weeks

Newborns experience the world very differently from the way that we experience the world. Newborns are totally dependent on us for their basic needs. Fortunately, newborns have ways of communicating their needs to us. In the first six weeks, you
and your baby will learn a lot about each other. The give-and-take that occurs between you helps to create a bond, which will form the basis of your relationship together and will provide the foundation for your child to develop relationships with others. Pay close attention to your baby, because he is paying close attention to how well you treat him! Your baby begins to focus on a face and follows and object moved in an arc about 15cm above his/her face until straight ahead (www.dhs.vic.gov.au/everychildeverychance). When your baby sleeps, make sure he is lying on his back unless you doctor tells you otherwise.

Childhood Development: 3 to 6 Months

Your baby is becoming more social these days. Your baby will smile more often and begin to laugh. Your baby will enjoy playing simple games with you. In these games, you and your baby will take turns doing something that delights the other. Your baby learns that her actions can cause a reaction in her surrounds. As your baby gains better muscle control, she is able to really explore her world around her. When your baby is asleep, make sure he is lying on his back with nothing in the crib but a tightly fitted sheet around the mattress.

Childhood development: 6 to 9 Months

Your baby is really beginning to move his body into different positions. Don't expect her to stay in one place for too long. Your baby still enjoys playing with toys or things that are within her reach. Now you will watch as your baby develops new ways to move towards they toys or things that are out of her reach. This is a good time to make sure that your house is child safety-proofed! Your baby is likely to be weary of strangers, sits without support, and communicates with facial expressions, gestures, sounds or one or two words like “dada” and “mama”. Your baby expresses positive and negative emotions. Your baby should still sleep on her back as much as possible.

Childhood Development: 9 to 12 Months

You will notice that your baby is very curious and explores his surroundings. Everything interesting to your baby! He can now pick up those little things that he looked at before. It is really important to get down on your hands and knees and look around your home to make sure it is safe. Pick up small items your baby could put in his mouth and choke on. Shorten cords for blinds or draperies. Lock cabinets. Put safety plugs in electrical outlets. Your baby begins to soothe self when distressed and understands a lot more than he can say. Your baby pulls up to a standing position and gets into a sitting position. Your baby can pick up objects using thumb and forefinger in opposition (pincer) grasp. Your baby does not like to be separated from familiar people (www.dhs.vic.gov.au/everychildeverychance). Your baby should still go to sleep on his back but he now knows how to roll over and can turn himself over to make sure he can breathe. Items in addition to the baby and crib sheet should not be introduced into the crib.
Childhood Development: 1 to 2 Years

Learning to walk and talk is your child's biggest job in this year. Your child can drink from a cup. Your child says "no" a lot. Your child is beginning to develop a sense of individuality. Your child needs structure, routine and limits to manage intense emotions (www.dhs.vic.gov.au/everychildeverychance). Enjoy your child's development, and remember to make sure that your child is always supervised.

Childhood Development: 2 to 3 Years

Your child is now a toddler. Toddlers have high energy levels. They want to do things for themselves. Keep in mind that your child is experiencing all sorts of impulses but does not yet have control over them. Tantrums are common. Patience is important. Your child takes off clothing. Your child can build a tower of four or more cubes. Your child says 50 words or more and combines words (by about 25 months). Your child alternates between clinginess and independence. By 3 years old your child washes and dries hands, throws a ball overhand and helps with simple chores. Your child may be toilet trained by 3 years old. Starting to potty train a child before age 18 months is not in accordance with Colorado State Rules and Regulations.

Childhood Development: 3 to 5 Years

At this age, your child believes that everything revolves around her. She is the center of her world. Her world is full of magic. Her imagination is working all the time. She is also learning to be a good companion to other children her age. Preschool, day care or playgroup provides a great opportunity for your child to learn appropriate social skills. Your child knows her own name. Your child is asking a lot of questions. She needs adult help to negotiate conflict. Your child is starting to manage emotions. Your child cuts along the line with scissors/can draw people with at least four parts. She loves silly jokes and “rude” words. By age 5, your child’s conscience is starting to develop and your child weighs risks and actions.

Childhood Development: 5 to 7 Years

As your child begins school, each day becomes an adventure and a time of discovery. This period of childhood is the time each child begins to learn skills needed to become a self-sufficient person. Each child has his or her own personality, which influences each step of learning and development. Physically, this is also a time of tremendous growth. Your child will grow about 2-1/2 inches and 7 pounds each year during this time. Muscular strength, coordination and stamina increase, though your child may be somewhat clumsy at this time as his height and weight increase so rapidly. Your child may have mood swings. Your child is more likely to follow rules if he/she has contributed to them. He/she skills in listening and understanding may be more advanced than expression (www.dhs.vic.gov.au/everychildeverychance).

Childhood Development: 8 to 9 Years

At this stage, children develop a sense of accomplishment, which centers around the ability to learn and apply skills, deal with peers, competition, self-control, and greater
physical strength. He/she will develop and test values and beliefs, which guide present and future behaviors. Indicators related to developmental lag are excessive concerns about competition and performance, especially in school; extreme rebellion; teasing; whining; headaches; nervous stomach; ulcers; nervous tics; extreme procrastination; overdependence on caregivers for age-appropriate tasks; e.g., combing hair, going to the store, tying shoes, finding a restroom; social isolation; lack of friends and involvements; few interests; inappropriate relationships with "older" people, e.g., teenagers; stealing; pathological lying; bedwetting; fire-setting. **Note:** Although these tasks and indicators may be present during ages 7 to 12, each may be more observable at specific times. [http://www.dshs.wa.gov/ca/fosterparents/training/cdevguid/cdg10.htm](http://www.dshs.wa.gov/ca/fosterparents/training/cdevguid/cdg10.htm)

**Childhood Development: 10 to 11 Years**

At this stage, children to develop a sense of accomplishment, which centers around the ability to learn and apply skills, deal with peers, competition, self-control, and greater strength. He/she will develop and test values and beliefs, which guide present and future behaviors. Indicators Related to Developmental Lag are excessive concerns about competition and performance, especially in school; extreme rebellion; teasing; headaches; nervous stomach; ulcers; nervous tics; consistent procrastination; overdependence on caregivers for age-appropriate tasks; social isolation; lack of friends and involvements; few interests; inappropriate relationships with "older" people, e.g., teenagers; stealing; pathological lying; bedwetting; fire-setting. **Note:** Although these tasks and indicators may be present during ages 7 to 12, each may be more observable at specific times. [http://www.dshs.wa.gov/ca/fosterparents/training/cdevguid/cdg10.htm](http://www.dshs.wa.gov/ca/fosterparents/training/cdevguid/cdg10.htm)

**Childhood Development: 11 to 12 Years**

Your child develops and test values and beliefs, which guide present and future behaviors. He/she starts to come to terms with and accept the dramatic changes in the body (e.g., development of breasts, muscles; voice changes; pubic and facial hair). Indicators Related to Developmental Lag are excessive concerns about competition and performance, especially in school; extreme rebellion; teasing; whining; headaches; nervous stomach; ulcers; nervous tics; consistent procrastination; overdependence on caregivers for age-appropriate tasks; social isolation; lack of friends and involvements; few interests; inappropriate relationships with "older" people, e.g., teenagers; stealing; pathological lying; bedwetting; fire-setting. **Note:** Although these tasks and indicators may be present during ages 7 to 12, each may be more observable at specific times. [http://www.dshs.wa.gov/ca/fosterparents/training/cdevguid/cdg10.htm](http://www.dshs.wa.gov/ca/fosterparents/training/cdevguid/cdg10.htm)

**Childhood Development: 12 to 15 Years**

A youth creates own personal identity based upon the integration of values and a sense of self in relation to society, others, the opposite sex, the future, vocation, ideas, and the cosmos. Indicators Related to Developmental Lag are delays in physical and sexual development, depression, suicide attempts, sense of isolation, loneliness, impulsiveness, extreme rebellion, denial of feelings, poor hygiene, fantasy as an escape from problems, alcohol/drug abuse, anorexia nervosa, bulimia, obesity, sexual activity to provide missing nurturance, prostitution, stealing, pathological lying, psychosis, truancy, running away, pregnancy, juvenile delinquency. **Note:** Although these tasks and
indicators may be present during ages 12 to 19, each may be more observable at specific times.
http://www.dshs.wa.gov/ca/fosterparents/training/cdevguid/cdg10.htm

Childhood Development: 16 to 19 Years
Your youth creates own personal identity based upon the integration of values and a sense of self in relation to society, others, the opposite sex, the future, vocations, ideas, and the cosmos. To establish independence from the family. Indicators related to Developmental Lag are Depression, suicide attempts, sense of isolation, loneliness, impulsiveness, extreme rebellion, denial of feelings, poor hygiene, fantasy as an escape from problems, drug/alcohol abuse, anorexia, bulimia, obesity, sexual activity to provide missing nurturance, prostitution, stealing, pathological lying, psychosis, fire-setting, violent assault, running away, pregnancy, juvenile delinquency, cults, early marriages that are likely to fail, hatred and rejection of family. Note: Although these tasks and indicators may be present during ages 16 to 19, each may be more observable at specific times.

Childhood Development Ages 12-18 Years
In physical development, your youth will develop greater expertise/skills in sports. Your youth will see significant growth and body changes and start puberty, menstruation. Your youth will gain education will sexuality and contraception. In self-concept development, your youth can be pre-occupied with self and developing an identity based on gender and culture. In social-emotional development, your youth is gains empathy for others. His/her values and moral system becomes firmer and affect views and opinions. He/she may focus on the present and take significant risks. In Cognitive and creative development, your youth links logically, abstractly and solves problems thinking like an adult. He/she can appreciate others’ perspectives and see a problem or situation from different angles (www.dhs.vic.gov.au/everychildeverychance).

NOTE: For a more complete list of developmental milestones by age and how trauma impacts development, read the attached article: Child Development and Trauma.
Cultural Competence

Cultural competence is the capacity to work effectively with people from a variety of ethnic, cultural, political, economic, and religious backgrounds. It is being aware and respectful of the values, beliefs, traditions, customs, and parenting styles of those we serve, while understanding that there is often as wide a range of differences within groups (e.g., Native Americans) as between them. It is being aware of how our own culture influences how we view others.

Cultural competence comprises four components: (a) Awareness of one's own cultural worldview, (b) Attitude towards cultural differences, (c) Knowledge of different cultural practices and worldviews, and (d) Cross-cultural skills. Developing cultural competence results in an ability to understand, communicate with, and effectively interact with people across cultures.


To understand cultural competence, it is important to grasp the full meaning of the word "culture" first. According to Chamberlain (2005), culture represents "the values, norms, and traditions that affect how individuals of a particular group perceive, think, interact, behave, and make judgments about their world" (p. 197). Taylor (1996) defined culture as, "an integrated pattern of human behavior including thought, communication, ways of interacting, roles and relationships, and expected behaviors, beliefs, values, practices and customs." Nine-Curt (1984) qualified culture as, "The bearer of human wisdom that includes a wealth of human behaviors, beliefs, attitudes, values and experiences of immense worth. It also carries things that are offensive to a person's dignity and well-being, and certainly to others whose cultural framework is different."

Cultural competency is about developing skills. This includes improving your ability to control or change your own false beliefs, assumptions, and stereotypes; to think flexibly; to find sources of information about those who are different from you; and to recognize that your own thinking is not the only way.

http://www.practicenotes.org/vol4_no1/culturally_competent_practice.htm

Becoming More Culturally Competent

Cultural competence requires an open mind and heart and the willingness to accept the views of others. It may mean setting aside your own beliefs in order to better serve others. Generally, we need to lower our defenses, take risks, and practice behaviors that may be uncomfortable or unfamiliar. Remember that all people are alike in some ways and different in others. Everyone needs to eat, have clothes and shelter, to learn, to grow, and to experience meaning and purpose in their lives (Harper & Lantz, 1996).

Self-Awareness. The first step toward being more culturally competent is self-awareness. To understand and appreciate the culture of others, we must first understand and appreciate our own culture. You might ask yourself, where do I come
from? When did my ancestors migrate to this country? Why? Where did they first settle? What values do I have, and what culture or cultures do they come from?

**Educate Yourself.** There are several ways to learn about other cultures. First, find someone—a friend, neighbor, or colleague—who can serve as your "guide" to the culture. You can also study a culture by reading history, geography, poetry, biography, and fiction. In addition to reading or using a guide, you can participate in the daily routine of the culture you wish to learn about by celebrating their holidays, working on community projects, and attending worship. Finally, you can learn the language (Lynch, 1992).

**GRIEF IN DEVELOPMENTAL STAGES**

Children's experience of grief varies depending on the type of loss and the developmental stage of the child. Moving to a new town may precipitate a grief response that is mild and transient, while grief from loss of a parent threatens the foundation of the child's world. Young children express grief in vastly different ways from teens and adults. A child's grief is complicated because it is linear, circular, and developmental.

**The Stages of Children's Grief**

**Disorganization** - The initial expressions of grief in children range from regression, temper tantrums, denial, anger and exaggerated fears in younger children to physical symptoms, lack of concentration, and mood swings in older children. The disorganization of early grief is a true crisis for children, but parents and loved ones can help the child through this stage.

**Transition** - Feelings of hopelessness, helplessness, depression and despair follow the stress and chaotic behaviors of the disorganization stage. Many children will exhibit true depression. More common are symptoms of withdrawal, aggression, and giving up in school.

**Reorganization** - When painful feelings are expressed their emotional energy wanes, and detachment becomes possible. During this stage children have more energy and motivation for moving forward to a positive resolution of their grief. This is reflected in what other models would call the acceptance stage.

Though children's grief follows this progression, it is complicated by the circular nature of grief. If you've experienced grief in your life, you know this to be true. Just when you have moved forward in your resolution of grief, a reminder of the loss floods you with emotions that bring you right back to feelings of despair and great sorrow. Adults can recognize and understand what is happening with their emotions; children often cannot.
Parents must recognize the circular nature of grieving to help their child through difficult times during their development.

The final consideration in helping children live through grief is the developmental stage of the child. It’s important to note that a grieving child’s developmental stage may lag behind his chronological age. Regression is expected and developmental accomplishments take longer to achieve.

Learn how children at different developmental stages express grief and how you can help them at each stage:

**How Preschoolers Express Grief**
- Bedwetting
- Thumb sucking
- Clinging to adults
- Exaggerated fears
- Excessive crying
- Temper tantrums
- Regression
- Stubbornness

**Helping the Grieving Preschooler**
- Answer the child’s question honestly and simply; allow them to talk about the loss; help them share their fears and worries.
- Provide simple routines.
- Give the child affection and nurturing; attempt to connect with them.
- Provide more opportunities for play.
- Be patient with regressive behaviors such as thumb sucking.
- Provide opportunities for the expression of painful emotions through play, creative outlets, and talk. Teach them to recognize and name their full range of feelings.

**How Elementary School-Age Children Express Grief**
- School and learning problems
- Preoccupation with the loss and related worries; daydreaming; trouble paying attention
- Bedwetting; regression; developmental delays
- Eating and sleeping problems (overeating, refusing to eat, nightmares, sleepiness)
- Fighting, anger

**Helping the Grieving Elementary School-Age Child**
- Keep tasks simple. Explain things before they experience them - new neighborhood, school, church, family routines and changes.
• Provide a structured environment that is predictable and consistent; limit choices; introduce small, manageable choices over time.
• Contain acting out behavior; insist that children express their wants, needs, and feelings with words, not by acting out.
• Encourage them to let you know when they are worried or having a difficult time.

### How Pre-Teens and Early Adolescents Express Grief

• Physical symptoms (headaches, stomachaches, sleeping and eating disorders, hypochondria) Wide mood swings
• Able to verbally expresses emotions
• Feelings of helplessness and hopelessness
• Increase in risk-taking and self-destructive behaviors
• Anger; aggression; fighting; oppositional behavior
• Withdrawal from adults
• Depression; sadness
• Lack of concentration and attention
• Identity confusion; testing limits

### Helping the Grieving Pre-Teen and Early Adolescent

• Accept that they will experience mood swings and physical symptoms.
• Encourage them to honestly recognize their painful feelings and find positive outlets in physical and creative activities.
• Listen for the feelings behind their words and actions and respond with empathy.
• Be truthful and factual in explaining the loss.
• Help them develop and maintain their sense of identity.
• Allow preteens to make choices that are not harmful. Encourage safe expressions and experiences of beginning independence.

### Ways to Help a Child's Grieving- Foster, Adopted or Biological

When They Are Grieving Losses  
By Carrie Craft, About.com Guide

There is no one way to help a grieving child. Many foster and adoptive parents need to be ready with a bunch of different tools to help. Here are a few that may help as you parent a child that is grieving.

1. **Offer Healthy Distractions** - Involve the child in activities like dance, sports, or clubs.

2. **Work on Their Lifebooks** - Help the child work on her life books. An excellent way to open up healthy communication about their family and the losses they have endured.
3. **Listen When the Child Does Talk** - Try to listen more than speak if the child does decide to talk about birth family and their feelings about what has happened. Assign feelings when appropriate such as, 'Sounds like you are disappointed' or 'Sounds like you miss your mom' and 'I bet you were scared.' These statements open up more communication, help the child understand what has happened, and doesn't pass judgment on what the child has shared.

4. **Let them Write it or Draw it Out** - Give the child a journal. Help him get started with these questions. If the child is too young for writing, encourage the child to draw his feelings.

5. **Create a Place for Special Memories** - Make a memory quilt or memory boxes to hold treasures from home. Remember, that what is a 'treasure' to the child may look like a piece of trash to you. Maybe that candy bar wrapper came from the last gift given to the child from birth mom or dad.

6. **Offer Lots of Support** - The child will need support before and after family visitation. Prepare yourself and know that the child may act out with different grieving behaviors. Start a tradition of doing something after visitation if possible like getting ice cream, going for a walk, or taking a drive. This gives the child time to talk about the visit and relax.

7. **Find a Good Therapist** - A therapist that understands foster care and adoptive issues is the best option if possible. If the child's grief turns into depression it may be time to find professional help. Warning signs of depression may include:

- The child loses interest in daily activities and interests.
- Inability to sleep and loss of appetite.
- Acting much younger than chronological age for an extended period of time.
- Sharp drop in school performance.
Principles & Practices of Child Care
1 hour

1. What is child development?

__________________________________________________________________________

2. Name the 5 areas of development:
   a. ________________________________________________________________
   b. ________________________________________________________________
   c. ________________________________________________________________
   d. ________________________________________________________________
   e. ________________________________________________________________

3. How can I help my foster child meet these developmental milestones?

   ________________________________________________________________
   ________________________________________________________________
   ________________________________________________________________

4. After reading this article on child development, two things I will do differently to care for my child are:
   a. ________________________________________________________________
   b. ________________________________________________________________

5. What is Cultural Competence?

   ________________________________________________________________
   ________________________________________________________________
   ________________________________________________________________
   ________________________________________________________________

6. Define Culture:

   ________________________________________________________________
   ________________________________________________________________
   ________________________________________________________________
   ________________________________________________________________

7. What is the first step in being culturally competent? _________________________
8. List one way you will become culturally competent with at least one youth in your home:
______________________________________________________________________

9. Names the 3 stages of children’s grief
   a. _____________________________________________________________________
   b. _____________________________________________________________________
   c. _____________________________________________________________________

10. Name 5 ways you can help children grieve.
    a. _____________________________________________________________________
    b. _____________________________________________________________________
    c. _____________________________________________________________________
    d. _____________________________________________________________________
    e. _____________________________________________________________________

11. What did you learn from this section?
    _______________________________________________________________________
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Secondary Foster Parent Signature                                Date