Answers

Chapter 7 Child Development

Recall activities

1. **a Fine** motor skills

**b Gross** motor skills

1. Examples could include:

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|  | **Key concept** | **Example of concept** |
| 1 | Innate attachment to one figure | A newborn baby instinctively cries and reaches out for its primary caregiver, typically the mother, seeking comfort, food and protection. Despite being able to interact with multiple people, the baby shows a clear preference for one figure, often the mother. |
| 2 | Maternal deprivation | A young child who is separated from their primary caregiver (e.g. the mother) for an extended period, such as being placed in a children’s home or foster care, may experience maternal deprivation. |
| 3 | Internal working model | A child who has experienced consistent and responsive caregiving develops a positive internal working model of relationships. This child expects others to be reliable and trustworthy, which influences their future interactions. |

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| **Males** *(any* ***three*** *from the following)* | **Females** *(any* ***three*** *from the following)* |
| Growth of facial and body hair | Breast development |
| Voice deepening | Onset of menstruation |
| Increase muscle mass and strength | Widening of hips |
| Pubic hair | Pubic hair |
| Height and weight gain | Underarm hair |
| Growth of testicles and penis | Body fat distribution |

1. **Four** examples from the following:

|  |  |
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| **Milestone** | **Age** |
| Begins to lift head while on stomach | **6 weeks** |
| Can lift chest and head when lying on stomach; begins to support upper body with arms | **3 months** |
| Rolls over from stomach to back and vice versa | **4–5 months** |
| Sits with support (e.g. using hands for balance or with the help of pillows) | **5–6 months** |
| Sits without support | **6–7 months** |
| Begins to crawl or scoot on belly | **7–8 months** |
| Pulls to a standing position while holding on to furniture | **8–9 months** |
| Cruises along furniture (walking while holding on to furniture) | **9–10 months** |
| Stands alone for a few seconds | **10–11 months** |
| Walks with one hand held or may take first independent steps | **11–12 months** |
| Walks independently | **12–15 months** |
| Begins to run; may walk up stairs with assistance | **15–18 months** |
| Squats to pick up a toy and stands back up without support | **18–21 months** |
| Runs more confidently; walks up and down stairs with hand held or railing support, placing both feet on each step | **21–24 months** |
| Kicks a ball forward; begins to jump with both feet off the ground; climbs on to and down from furniture without assistance | **24 months** |

1. **a** **A transition in a child’s or young person’s life is** a change or shift in their life that could involve moving from one stage or one set of circumstances to another, or a change in environment. Some transitions are expected and can be planned for, others happen suddenly and are unexpected.

**b** Examples of unexpected transitions could include:

* moving house or location
* illness
* change of employment
* change of family structure
* pregnancy

Short-answer exam-style practice questions

1. **B** – 6 months [1]
2. **C** – Putting on and fastening clothes [1]
3. **C** – Ainsworth [1]
4. **D** – Use of abstract thinking [1]
5. **Expressive language** is the ability to use vocabulary and sentences to express meaning. [1]
6. Responses could include **two** of the following:

* **Enhances vocabulary**: During circle time, children are exposed to new words and concepts through songs, stories and discussions. This repeated exposure helps expand their vocabulary and improves their understanding of different language structures. [2]
* **Promotes speaking and listening skills**: Circle time provides a structured environment where children take turns speaking and listening. This practice helps children learn to articulate their thoughts clearly, wait for their turn, and listen actively to others, which are crucial components of effective communication. [2]
* **Encourages social interaction**: Interacting with peers during circle time activities fosters social communication skills. Children learn to engage in conversations, ask and answer questions, and collaborate with others, which enhances their ability to use language in social contexts. [2]
* **Builds confidence in quiet children:** Circle time offers a safe and supportive environment for quieter children to express themselves. Through gentle encouragement and positive reinforcement, these children gain the confidence to participate and share their thoughts, helping them become more comfortable and proficient in using language. [2]
* **Supports emotional literacy:** Activities such as reading aloud, singing rhymes, and playing word games during circle time introduce children to the sounds and rhythms of language, which are foundational for later reading and writing skills. This early exposure to literacy concepts helps children understand the relationship between spoken and written language. [2]

**Accept other reasonable responses.**

1. **Expected transitions** refer to changes in a child's life that are anticipated and can be planned for in advance. [1] These transitions are typically predictable and often follow a natural progression of development or events. [1]

**Unexpected transitions** are changes that occur suddenly and without prior preparation or planning. [1] These transitions often arise unexpectedly due to unforeseen circumstances or events. Unlike expected transitions, which can be anticipated and prepared for, unexpected transitions can be disruptive and unsettling for children. [1]

1. **a** Include **two** of the following:

* **Consistency and reassurance**: Working together ensures that Daniel receives consistent messages and support from both home and nursery, providing him with a sense of security and reassurance during this potentially stressful transition. [1]
* **Individualised support**: Collaboration allows practitioners to gather specific information about Daniel’s needs, fears and coping mechanisms, enabling them to tailor their support and prepare appropriate strategies to help him feel more comfortable and less anxious about the upcoming hospital stay. [1]
* **Emotional support for both Danial and his mum**: Collaborating with Daniel’s mother allows practitioners to provide emotional support not only to Daniel but also to his mother, who may be feeling anxious about the forthcoming hospital visit. [1]
* **Consistent approach to managing anxiety**: Ensuring that practitioners and Daniel’s mother are on the same page regarding strategies for managing anxiety helps maintain consistency in how they support Daniel. By working together, they can coordinate efforts to create a calm and reassuring atmosphere for Daniel, minimising the impact of his mother’s anxiety on him. [1]

**Accept other reasonable responses.**

**b** Include **two** of the following:

* **Open communication:** Practitioners can maintain open lines of communication with Daniel’s mother to stay informed about the details of his hospital stay, share observations and discuss strategies for easing his anxiety. [1]
* **Role playing and storytelling:** Use role-playing games and age-appropriate stories about hospital visits to familiarise Daniel with what to expect. This can make the experience feel more predictable and less frightening. [1]
* **Comfort items:** Encourage Daniel to bring a favourite toy or blanket to the nursery and to the hospital, providing him with a sense of comfort and familiarity during the transition.
* **Visual aids and stories:** Utilise visual aids and social stories that explain the hospital experience in a simple, child-friendly way. These tools can help Daniel understand the process and feel more prepared for what will happen. [1]

**Accept other reasonable responses.**

1. **Biological factors** could include **two** of the following:

* Hearing, speech or language impairment [1]
* Age and stage of development [1]
* Cognitive abilities and difficulties [1]
* The child’s temperament and personality [1]
* Ear, nose and throat infections [1]

**Environmental factors** could include **two** of the following:

* Parental influence/role modelling [1]
* Bonding/attachments and relationships with others [1]
* Use of dummies [1]
* Early stimulation and engagement in talking [1]
* Language-rich environment [1]
* Home life and support [1]
* Other siblings speaking for the child [1]
* Bilingualism [1]

**Accept other reasonable responses.**

Long-answer exam-style practice questions

1. Response could include the following:

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| --- | --- |
| **Answer** | **Guidance** |
| **Understanding of language acquisition from 6 weeks to 12 months.**   * **6 weeks**: Babies begin to coo and make gurgling sounds. They start to recognise and respond to their caregivers’ voices, and they may smile or show excitement when they hear familiar voices. * **3 months**: Infants start to babble, producing sounds like ‘ba’, ‘ma’, and ‘da’. They begin to mimic the tone and rhythm of adult speech, even though they are not yet forming actual words. * **6 months**: Babies begin to understand basic words like ‘no’ and ‘bye-bye’. They start to string sounds together, making more complex babbling noises, and they can respond to their names. * **9 to 12 months**: Infants might say their first words, such as ‘mama’ or ‘dada’. They can understand simple commands and often use gestures to communicate.   **Relevant strategies could include any of the following:**   * 6 weeks: * **Responsive interaction**: Respond to cooing and gurgling with gentle talk and smiles to encourage more vocalisation. * **Facial expressions and eye contact**: Use exaggerated facial expressions and maintain eye contact to engage the baby and reinforce their attempts at communication. * **Calm, soothing voice**: Speak in a calm, soothing voice to provide comfort and help the baby associate sounds with positive emotions. * 3 months: * **Interactive play**: Engage in simple interactive games like peek-a-boo that involve turn-taking and encourage vocal responses. * **Descriptive talk**: Describe your actions and the baby’s actions during daily routines, using simple language and repetition. * **Musical interaction**: Introduce songs and rhymes to expose the baby to different sounds and rhythms. * 9 months: * **Babbling conversations**: Imitate the baby’s babbling and add new sounds, creating a back-and-forth exchange that mimics conversation. * **Name recognition**: Frequently use the baby's name in speech to help them recognise and respond to it. * **Reading picture books**: Show colourful picture books and describe the images, encouraging the baby to point and make sounds in response. * 12 months: * **Simple commands and questions**: Give simple commands (e.g., ‘wave bye-bye’) and ask questions that prompt a response, encouraging verbal and non-verbal communication. * **Expand vocabulary**: Introduce new words during play and daily routines, using clear and simple language. For example, name objects and actions repeatedly. * **Interactive storytime**: Encourage the baby to point at pictures in books and try to say the names of objects, enhancing their vocabulary and comprehension.   **Theoretical perspective: Vygotsky’s Sociocultural theory:**  Emphasises the importance of social interaction and adult scaffolding in language development.  Caregivers play a crucial role in guiding and supporting children's language learning through meaningful interactions and verbal scaffolding.  Vygotsky introduced the concept of the ZPD, which is the difference between what a child can do independently and what they can do with help from a more knowledgeable other (MKO). Layla’s role is to provide scaffolding within the ZPD to support babies’ language development.  Vygotsky believed that language develops primarily through social interactions. Layla should create a rich language environment where babies have ample opportunities to engage in meaningful interactions with her and other caregivers.  Language is seen as a cultural tool that helps children communicate and think. By exposing babies to language through books, songs and conversations, Layla is helping them acquire this essential tool for cognitive development. | **10–12 marks (Level 4)**: Discussion is comprehensive and relevant, showing balanced justifications for understanding early language development.  All links have been accurately made between a theoretical perspective on language development and the role of the adult.  The response demonstrates extensive depth of understanding of a range of strategies to support language development.  **7–9 marks (Level 3)**: Discussion generally effective and mostly relevant to theory and effective practice.  Most links have been made the role of the adult.  Generally clear and mostly accurate.  The response demonstrates some depth of knowledge with few omissions made.  **4–6 marks (Level 2)**: Discussion somewhat effective and has some relevance.  Brief understanding demonstrated of the need for an adult to support language.  The response is basic and shows limited depth of knowledge with omissions or inaccuracies made.  Not all elements have been covered.  **1–3 marks (Level 1)**: Discussion is limited and demonstrates little relevance to the scenario.  The response shows superficial depth of understanding and omissions have been made.  **0 marks**: No relevant content.    Up to 3 extra marks would be given for QWC for:   * The response is clearly expressed and well structured. * Wide range of technical vocabulary used appropriately to fit the response. * Rules of grammar are used effectively. |

**Accept other reasonable responses.**

1. Response could include the following:

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| --- | --- |
| **Answer** | **Guidance** |
| **Key concepts of attachment theory:**   * Bowlby’s attachment theory emphasises the fundamental role of secure attachments in shaping a child's emotional, social, and cognitive development. * Secure base: caregiver as a reliable foundation for exploration; caregiver provides comfort and protection during distress; child’s desire to remain close to caregiver for security.   **Maternal separation and attachment theory:**   * Bowlby’s research on maternal separation identifies three stages of separation anxiety: protest, despair and detachment. * Practitioners can support emotional wellbeing by providing nurturing care, maintaining consistency and offering comfort during distress. * To support the emotional wellbeing of babies experiencing maternal separation, practitioners can implement strategies informed by Bowlby’s theory: * Providing a nurturing and responsive caregiving environment, maintaining consistency in routines and offering comfort and reassurance during times of distress. * Facilitate opportunities for children to develop secure attachments with other caregivers or peers, helping to limit the effects of separation anxiety.   **Reasoned judgements on influence on practice today:**   * Bowlby’s work emphasises the importance of building secure attachments in early childhood settings. * Practitioners integrate Bowlby’s insights to create nurturing environments that promote emotional resilience and social competence in children. | **10–12 marks (Level 4)**: Discussion is comprehensive and relevant, showing balanced justifications of Bowlby’s theory and separation anxiety. All links have been accurately made between theory and current practice.  The response demonstrates extensive depth of understanding of attachment theory.  **7–9 marks (Level 3)**: Discussion generally effective and mostly relevant on attachment theory.  Most links have been made to current practice. Links are generally clear and mostly accurate. The response demonstrates some depth of knowledge with few omissions made.  **4–6 marks (Level 2)**: Discussion somewhat effective and has some relevance. Some links made to theory and practice. Brief understanding demonstrated of attachment theory.  The response is basic and shows limited depth of knowledge with omissions or inaccuracies made.  Not all elements have been covered.  **1–3 marks (Level 1)**: Discussion is limited and demonstrates little relevance to the scenario.  Vague links have been made attachment theory.  The response shows superficial depth of understanding and omissions have been made.  **0 marks**: No relevant content.    Up to 3 extra marks would be given for QWC for:   * The response is clearly expressed and well structured. * Wide range of technical vocabulary used appropriately to fit the response. * Rules of grammar are used effectively. |

**Accept other reasonable responses.**