



## CHAPTER 7

# MILESTONES AND STAGES OF PARENTS AND YOUNG CHILDREN

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Life tasks of early adulthood

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Transition to parenthood

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Changes in the couple's relationship

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The beginnings of parenthood

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Milestones of early childhood development

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Some crucial concerns of parents with babies and young children

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Summing up

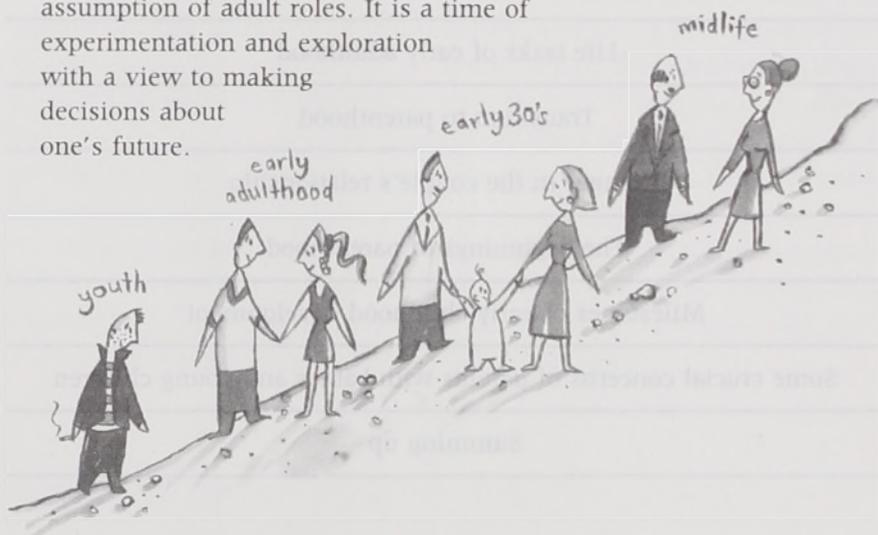
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## MILESTONES AND STAGES OF PARENTS AND YOUNG CHILDREN

**I**t is easier to identify the stages of childhood and adolescence than of adulthood. We easily recognise the crawling stage, the 'terrible twos', the idealism of the teenager. We may be less aware of the identity crisis of midlife.

In the past adulthood was simply divided into three broad stages: young, middle-aged and old. In recent decades these major stages have been broken down into finer phases, such as:

- **Youth:** This is the transition to adulthood. It may be brief or extended. It is the time between leaving school and the assumption of adult roles. It is a time of experimentation and exploration with a view to making decisions about one's future.



- **Early adulthood:** This falls somewhere in the twenties. It is characterised by entry into the adult world; the focus is on acquiring competence at roles at work and in the family, and making choices.
- **Early thirties:** This is a period of settling down and commitments are deepened. It has been referred to as the establishment stage, in which the focus is more inward and on the family and raising children.
- **Late thirties – early forties:** Also known as the midlife transition, it

may be a midlife crisis. In the work situation it often means becoming one's own person with ideas and a style of one's own. There may be some reality shock at finding oneself at the midpoint in life. Sometimes there is a gap between one's youthful dreams and their actual fulfilment. A crisis may be precipitated if existing roles and priorities are questioned and come under serious review.

- **Mid-forties – early fifties:** This tends to be a fairly stable period unless early retirement is considered or a major upheaval is caused by particular circumstances (Gerdes *et al*, 1988; Gould, 1978; Levinson, 1978).

These divisions are much more arbitrary than those of childhood because they are strongly influenced by family and work roles. Moreover, the cumulative experience of life will add to individual differences: one person may marry young, have several children before the age of 30, another may not marry at all; one person may be a farmer, another a teacher and so on. Despite all such differences certain general trends and sequences are sufficiently common to provide some kind of chart through adulthood.

There is a period of transition between each of the main life-stages. They may proceed gradually and smoothly, or be a time of crisis and upheaval. Pregnancy could be seen as the transition to parenthood, the midlife transition as the lead-in to middle age, retirement the transition to old age.

There may also be general conditions within a community which either hinder or promote progress through these stages. A dramatic improvement in one's standard of living, health or education will in all likelihood promote development. Poverty, war and unrest may seriously limit it. Nevertheless, the way in which circumstances are responded to varies enormously. What makes one person breaks another.

## **LIFE TASKS OF EARLY ADULTHOOD**

Many new life tasks confront the young adult. The period between 20 and 30 in particular is a time of tremendous learning as several new tasks may have to be mastered at the same time.

Tasks relating to the self include:

- becoming independent economically and psychologically, and assuming responsibility for one's future
- achieving a sense of identity, knowing who and what one is
- defining one's values and applying them to different life situations
- defining short- and long-term goals
- developing the capacity for long-term commitment

Tasks relating to work include:

- completing one's training, finding work and becoming established in an occupation
- establishing a pattern of recreation

Tasks concerning the family include:

- choosing a life partner
- learning to live with a marriage partner
- establishing a home
- becoming a parent and raising a child(ren)

Tasks relating to the community include:

- finding one's place in the community and becoming a part of it.

(Gerdes *et al.*, 1988)

This is a formidable list of tasks to have to accomplish, each one being complex in itself. Although preparation for them will have begun earlier, this is the time when they have to be dealt with in earnest. Sometimes these tasks are dealt with in succession, as when a woman first completes her training, becomes established in a career and then later, in her thirties, settles down to motherhood. Often these tasks have to be managed more or less simultaneously, making it a period of considerable challenge and, possibly, one of role overload.

Levinson (1978) found that young men tend to have an occupational 'dream' at this stage: one man's dream is to own a small business; another wants to be a missionary; one man's dream is to be an artist; another's is to be a doctor.

Women too have dreams about the future, but may be less single-minded in their pursuit of it. They may have to face the dilemma of choosing between career and family roles, or learning to combine them in various ways.

If some of the life tasks have already been mastered to some extent, parenthood and its many demands may be more easily met than if one is still at the beginning of learning about several new roles and tasks.

## **TRANSITION TO PARENTHOOD**

Few life events change one's lifestyle and interaction as a couple as much as becoming a parent does. During the months of pregnancy many changes have already occurred. Apart from the obvious physical changes of pregnancy, changes may already be planned and practical preparations made for the birth of the baby. Here, however, we are concerned mainly with the psychological preparation of the parents.

### **Parental readiness**

Reactions to the realisation that a baby is on its way may range from great joy to consternation. Many considerations and realities will play a part in determining these reactions. Is the baby wanted? Are the couple married? Are the parents able to cope financially with another mouth to feed? How will the mother's work role or schooling be affected?

There are no tests which measure psychological readiness for parenthood as there are, for example, for school readiness. Moreover, the first reactions to knowing one is to become a parent are not necessarily predictive of later attitudes and behaviour. A first reaction of consternation may give way to an attitude of acceptance. This may happen quite dramatically, as when Tom, a young expectant father, saw his baby on the sonar screen for the first time. Tom remarked: 'Until I saw the little one on the screen, it was just an abstract idea, but here was this living, moving little being and it was part of me! It was mind boggling. Something happened to me. There and then I truly became a father.'

Not all attitudes change suddenly or dramatically, or even for the better. Unrealistic ideas about beautiful babies and glamorous, relaxed and smiling mothers, as seen in glossy magazines, may painfully give way to more realistic perceptions as weary and anxious parents cope with the realities of parenthood.

While some may face parenthood sooner than expected, others may

postpone it for as long as possible, such as some career women in demanding professions. This does not necessarily mean greater readiness for the demands of parenthood. An older person may have an established lifestyle which is not readily modified to incorporate a baby, nor can babies be programmed not to disturb a mother's or a father's lifestyle. Furthermore, the sheer physical stamina required for parenting may be waning at this time. On the other hand, late parenthood may benefit from greater psychological maturity, more developed coping skills, and a tried and tested marital team.

Sally's first child was born when she was barely eighteen. She had completed school very successfully but had not yet started further training when she found herself pregnant. Her husband, Ted, was twenty and just starting his studies at university, for which he had been awarded a substantial bursary. Ted had to change to part-time studies and find work to help support a wife and child. The young couple moved into the small home of his parents. Living was tough for all under these constrained economic conditions and in rather crowded conditions. After many difficult and often frustrating years, Ted and Sally were able to move to a small home of their own. Both agreed that unexpected parenthood had 'forced us to grow up fast'. Sally added somewhat wistfully: 'I wish we had had a little time to ourselves first. We really were too young for the responsibility.' Ted said: 'It was tough trying to study late at night after a day's work and then not being able to get away from a restless baby. I love our little fellow, but it would have been easier and probably more fun if we had been financially secure and more independent when he arrived.'

Ted and Sally's marriage had survived the stresses and strains of early, unplanned parenthood. Many do not. When asked what had helped them most, they agreed it had been their love for one another and Sally's impish sense of humour.

A different story is told by Sue, a marketing executive, who had her first child at the age of 38. 'I really wanted this baby but I was in for a reality shock. After Jenna's birth I spent the first few months eating all my words of wisdom so freely given to friends on how to rear children. This job of mother was tough! I vacillated between unbelievable joy and total despair. I found it difficult to accept that I had so little control over things and my emotions. I was so vulnerable.'

Somewhere between these two extremes of very young and 'old' parents, we find the majority of first-time parents. They are often in the stage of early adulthood, somewhere between 22 and their early thirties.

## **Factors promoting adjustment to parenthood**

The birth of the first child has often been seen as a crisis situation for the parents. Many researchers have focused on this stage and have brought the following to light. The transition to parenthood is generally easier:

- if the relationship between the parents is good
- if the husband is supportive
- if the baby is an 'easy' baby
- if the mother's health is good
- if the family's income is adequate
- if expectations of themselves as parents and of their child are fairly realistic
- if the marriage has been of two or more years' duration, that is, if the couple have established a lifestyle of togetherness
- if there has been some preparation for parenthood, either by bringing up younger siblings or attending courses on parenthood
- if adequate sources of practical support are available

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## **EXERCISE**

At this point the question might well be asked: Can parents be prepared for parenthood so that they become more effective parents? The first step in this connection is to honestly confront their motives and expectations. Consider the following questions:

- Is our relationship strong enough to cope with parenthood?
- Do I want a child for the right reasons?
- What could be wrong reasons for wanting a child?
- What changes will I have to make to my life to accommodate a child?
- Am I ready to make these changes?
- Who is going to take care of the child? What will father/mother do?
- What sources of support are available and how will they be used?

These questions should first be answered separately by each person, then compared and discussed together.

If you are already a family, consider the question:

- How has being a parent influenced our lifestyle?
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## Expectations and myths surrounding parenthood

**Our expectations** powerfully influence our reactions to situations. If a mother's expectations of parenthood are based on myths, such as that of the glamorous, contented, coping mother of a well-regulated, happy, glowing baby, she may be astonished, appalled and guilty to discover some negative attitudes in herself.

It was in reaction to the myth of blissful, fully satisfying motherhood that a new questioning self-awareness began to emerge. In the 1970s several books appeared which honestly told of the frustration, boredom, fatigue, uncertainties and disillusionment of many first-time mothers. These feelings had not readily been admitted before, because they were incompatible with the romanticised idea of motherhood. Such negative feelings do not generally eclipse those of joy, unfathomable love and tenderness, but the admission of their existence ushered in a new honesty about the mixed feelings which may accompany parenthood. Unrealistic expectations can lead to a sense of disappointment, but more realistic expectations foster acceptance and patience.



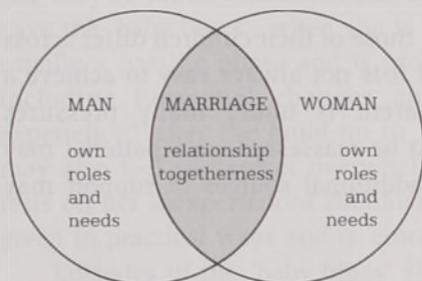
**Societal attitudes** can exert a powerful influence on expectations and behaviour. For example: 'To the Xhosa, procreation is an obligation and a divine directive' (Mwamwenda, 1989).

A popular myth is that there is a **maternal instinct** akin to that found in animals, who know instinctively how to rear their young. In humans the matter of childrearing is much more complex. While there is undoubtedly a strong quality of nurturance or latent motherliness in most women, this in itself does not ensure that she will know how to rear her child: most of this is learnt. However, if she believes that some hidden instinct will suddenly reveal all she needs to know, she will surely be disappointed. Moreover, if a husband believes that a maternal instinct will

immediately turn his wife into Supermom, then he will feel fully justified in leaving the child-rearing responsibility entirely to her! Yet fathers too have qualities required for parenting: they too can be nurturant, protective and guiding towards those in their care. Ideally, a child should be in the care of a parental team.

## CHANGES IN THE COUPLE'S RELATIONSHIP

Before the arrival of the first child a couple's relationship scenario could look something like this: they may spend a good deal of time together and also have considerable time for their own needs, roles and interests.

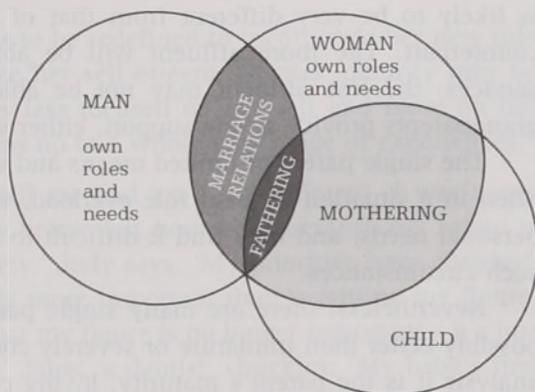


The arrival of a baby will change this pattern dramatically. Because a baby is completely helpless at birth it depends entirely on others for its wellbeing.

Inevitably, there will be less time for the parents to spend together and on themselves. After the arrival of the first child the couple's interaction scenario may look more like this:

This scenario is fairly typical after the arrival of the first child. Note how the mother's time for herself has shrunk, as has the couple's time for togetherness as a couple.

Much of the mother's time is devoted to the baby but far less of the father's time. For various reasons the father's involvement may be limited. Sometimes this situation is forced by circumstances, such as the father's occupation which keeps him away from home for extended periods. Sometimes it is the choice of both partners. But it may



be the choice of only one of the parents and resented by the other.

Sometimes other child carers may take over much of the mother's role, substantially changing this scenario.

## **Balancing parents' and children's needs**

It takes some time for the scenario to be adapted to accommodate the new arrival, which may be associated with upheaval demanding much effort, patience and flexibility. After a few months a pattern is generally established, but as the family grows and children grow up so it will change again and again.

The primacy of parental needs and those of their children differ across the life stages of parent and child and it is not always easy to achieve a balance between them. When a parent is under many pressures simultaneously, priorities may have to be reassessed, role patterns may have to be temporarily changed and additional sources of support may have to be enlisted.

## **Single parents**

The sketches of the different scenarios demonstrate that a single parent will require strong sources of support in order to cope with several life roles simultaneously and adequately. The position of the affluent single parent is likely to be very different from that of a less affluent, or deprived counterpart. The more affluent will be able to pay for good support services; the less affluent may not be able to do so. In many cases grandparents provide strong support, either willingly or reluctantly.

The single parent of limited means and with little practical support is often in a situation of great role overload, with little time or energy for personal needs, and may find it difficult to be an effective parent under such circumstances.

Nevertheless, there are many single parents who do cope well and possibly better than immature or severely conflicted couples. In the final analysis it is the parent's maturity, loving concern and problem-solving ability which counts for more than marital status in determining parental effectiveness – be it as mother or as father.

## THE BEGINNINGS OF PARENTHOOD

Once conception has occurred, numerous physical changes take place in the mother-to-be. These are well known and not the focus of this book which is concerned with psychological reactions.

### Becoming a mother

A mother's immediate reaction after giving birth is mostly one of relief, joy, pride and happiness, especially if all is well with her and the child. She may be rather emotional and a few days after the baby's arrival may have the 'baby blues', when she is weepy for no apparent reason. This is usually a passing phase and is probably due to a combination of factors including hormonal changes and a sense of anticlimax so often experienced after the build-up to some special event. The new mother may also feel somewhat overwhelmed by the responsibility which now rests on her inexperienced shoulders. This is a time when the help she is given in practical ways and in emotional support is very important.

Episodes of the 'baby blues' should not be confused with post-natal depression. As the name implies, this is a much more serious condition. It is characterised by a sense of deep despair, acute anxiety, and a change in personality, as when a formerly competent person becomes overwhelmed by a sense of utter helplessness and may find it difficult to relate to the baby. The depression is out of all proportion to the actual situation. This condition may last for weeks and months and requires specialised medical and psychological treatment.

A woman's **identity** has to be redefined to incorporate her new role as mother. This may enhance her self-esteem. Greater maturity may be revealed in that she becomes less focused on her self and more on her child's needs and as she opens up to a whole new range of experiences.

Susan remarks: 'I am still me and yet I am different. I was never anxious about my safety before but now I am because my safety is now also my child's safety.' Judy says: 'My priorities have changed: my baby's weight gain is more important than regaining my figure, though I'm not saying that my figure is no longer important – it's just no longer all important.' Janet, a dentist, chuckles: 'My baby's first tooth was the greatest miracle I ever saw!'

A baby's arrival profoundly affects a mother's **lifestyle**. Her workload

is increased enormously, especially if she has little or no support. Her time allocation will change as she spends less time on some activities to cope with the demands of her child. Her sleep patterns will change especially for the first few months. Her freedom of movement is likely to be restricted and going shopping with a baby becomes quite a complicated procedure.

## **Becoming a father**

The father may also experience a wide spectrum of **emotions** which range from pride and joy to apprehension as he recognises his additional responsibilities. He too will lose some of his personal freedom unless he sees the baby's care as only the mother's responsibility. Some fathers may be uneasy with a small baby but can give much needed practical support in other ways. Other fathers may be particularly comfortable in handling babies and may be more relaxed about it than the mother.

The man's **identity** also changes to incorporate the new role of father. In fact the entire kinship system changes as brothers and sisters become uncles and aunts, and parents become grandparents, and he, as father, is suddenly part of the middle generation. Becoming a father can increase his self-esteem. One wife was amazed to see her husband, who had not seemed over-enthusiastic about parenthood, proudly wearing a T-shirt boldly proclaiming 'I'm a DAD'.

A father may change his roles and time allocation less than the mother. However, his attitude toward his roles may change and he may take his work more seriously than before, knowing he is now also a provider for his child.

## **And baby makes three!**

The arrival of a baby can cement or disrupt a couple's relationship: this will depend mainly on the relationship prior to the baby's arrival. If the wife tended to 'mother' the husband, she may now transfer her nurturing to the child, which could be experienced as a loss by him. For a time at least, the child is likely to become the mother's priority. Some husbands may feel deprived and may go through a period of mourning. Many husbands now develop a strong sense of responsibility for their growing family.

Both parents may be surprised by the reactions of their partners. Tom is amazed by his wife's endless patience with the baby, having known her as a fairly impatient person. She in turn cannot believe the way he brags about the baby.

Sometimes unrevealed shortcomings surface: an unwillingness to adapt to a new situation, a lack of patience, or a selfishness which was not revealed before when no great demands had been made on selflessness. Whatever form the change may take, it inevitably leads to changed perceptions and behaviour in the other spouse: disappointment, anger or resentment may surface.

The character of the home changes. Disorder may replace order. Nothing seems to happen as it used to any more as mealtimes and sleep patterns change and one wonders if one will ever find time to read a book again!

The wife may feel physically too tired and emotionally too drained to be interested in sex, while the husband may need to be reassured that the baby has not taken all his wife's affection. Nevertheless, after some time certain patterns do again develop as all members of the family begin to settle down.

It is very important for a couple to communicate and share their feelings, uncertainties and joys to avoid misunderstandings and to get to know each other as parents. This is the beginning of becoming a parental team.

## **Becoming a parenting team**

The idealised image of what parenthood entails may be rudely shattered when the realities of baby-care begin to be understood. Moreover, babies do not come with instruction manuals suited to the needs of a particular child.

Parenthood thus entails on-the-job training with a good deal of trial and error. Under these circumstances it certainly helps if parents function as a mutually supportive team. Such support may range from help with household matters like dishwashing or cooking by the husband to sympathetic encouragement.

Mark's refusal to hold the small baby was seen by Margaret as a sign of his lack of interest and caring. After a major row Mark blurted out: 'I'm scared to death to hold this little thing – you know how easily I

drop things.' Beginning to understand Mark's fear, Margaret propped him up on the bed and then gently laid the baby in his arms: here he felt secure holding the baby. It further eased the tension when Margaret admitted how unsure of herself she had felt when she first bathed the baby.

Earlier in this book knowledge was defined as one of the main pillars of parenting: knowledge of the sequences of development leads to more realistic expectations. It is hoped that a better grasp of a child's development will help the parent to share its wide-eyed wonder as it discovers the world around it.

## **MILESTONES OF EARLY CHILDHOOD DEVELOPMENT**

At birth the infant is totally dependent on others for its survival. Unlike little puppies or kittens, who soon after birth are able to wobble their way to their mother and find a teat, little humans are far less adept in their first contacts with the world. This should not lead us to assume that the infant is totally unaware and unresponsive to its environment. Already many mechanisms are functioning and ready to develop with astonishing speed. For example, at birth the baby's brain is about one quarter of its adult weight, at six months approximately one half, at two and a half years it is 75 per cent and by the age of five it has reached about 90 per cent of adult weight. However, it takes about ten years to reach half the height of adulthood.

The foregoing highlights some important characteristics of childhood development:

- different aspects of development proceed at their own pace; some faster than others
- development proceeds from the head downwards
- such development occurs by means of maturation, that is a natural process of the unfolding of human potential.

Such maturation cannot be hurried; it occurs according to its own pre-programmed sequence, although there are variations in the time at which certain motor skills are mastered: some children walk at ten months, others at sixteen months. But generally babies first sit, then crawl, then walk. It is well established by now that the early motor development of

black babies is ahead of that of all other ethnic groups, but the sequence in which different motor skills appear is the same (Mwamwenda, 1989).

Abnormal conditions such as severe illness, severe malnutrition or extreme restriction may impede the process of development. While parents cannot substantially alter the pace of development, they can create an environment in which development is fostered and exercised as it emerges.

## The competence of the newborn

The newborn is more competent than is generally supposed. At birth or shortly thereafter:

- The sucking reflex is ready and the infant sucks whatever is placed in its mouth.
- Coughing, blinking and yawning responses occur.
- Crying is the earliest form of communication and it is estimated that infants spend about 67 per cent of time crying. Most mothers soon learn to distinguish between different cries of discomfort, hunger and pain. A mother's or father's appropriate responsiveness to the baby's crying is important for the bonding between them.

**Vision:** What can a baby see and is it able to discriminate visually between different stimuli? Some highly ingenious research has shown that visual abilities develop early. For example, infants show definite preferences for certain shapes and focus more on some than on others. They begin by focusing on the human face and especially on the eyes. It

takes approximately six months for the baby to see the face as a whole and this forms the basis of the recognition of familiar faces, and the enthusiastic response to them. It also explains why at this stage a baby begins to show some fear of strangers – it now knows the difference!

Babies are stimulated visually in many ways, as when a mother looks at the infant at close range, smiles at it, talks to it, feeds and baths it. In this face-to-face caring activity we see the earliest interactions, which all form part of the bonding process.



A baby may also respond to colour early on and here I indulge in a grandmotherly reminiscence. When she was three weeks old, I was babysitting my granddaughter. The place was London and the weather was chill and humid. Nappies in various stages of dampness hung in bathroom, kitchen and were also draped around the cot for airing. I found myself with a baby lying in her cot niggling away in discontent. A routine check of nappies, burping and softly cooing to her, had no effect. I picked her up and carried her around and this she seemed to like. However, the telephone rang and baby was deposited on her parent's bed. I returned to the bedroom and found her wide awake, gazing around and quite content. Somewhat later I put her back into the cot – and the niggling started again. Again, I picked her up, placed her on the bed as I went to answer the doorbell and once again returned to a contented baby. Back in her cot the niggle started almost immediately. Intrigued by now I began to wonder what was wrong with the cot! Imagining myself lying there all I saw was a wall of white nappies. By contrast, on the bed, there was a cherry red blanket and a sheet in shades of blue sprinkled with white and yellow daisies. Now I began to experiment in earnest, moving baby from cot to bed and back again and always with the same results. Finally, I removed the nappies from the cot and instead draped some colourful material across the sides of the cot. The niggles stopped as she contentedly gazed at the material. Clearly the little one liked colour. Interestingly enough, as an adult she has become an artist with a feeling for the bold use of colour.

**Hearing and smell:** Hearing develops while the baby is still in the mother's womb. So, if you would like to encourage a taste for classical music you now know how early you can begin!

Infants are able to **smell** and distinguish between pleasant and unpleasant smells a few days after birth.

**Touch** is very important and babies like to be held, cuddled and caressed. For the infant, touching becomes an increasingly important means of examining the world. By six months the baby is actively exploring different textures, shapes and sizes of objects within its reach. It is also through touch that the baby gets to know its own body.

## Emotional and social development

Babies respond to loving care and mothers and fathers are encouraged to hold their babies as soon after birth as possible. Emotional bonding is

encouraged by this physical closeness. A caring relationship is built through the satisfaction of the baby's needs, but physical care is not enough – the child also senses the feeling behind the care. It is, for example, possible to see to a child's physical needs adequately in an automatic kind of way but the child also needs emotional warmth and tenderness if it is to thrive optimally and bond closely.



### POINT TO PONDER

'During the first six months, the baby has the rudiments of love language available ... There is the language of the embrace, the language of the eyes, the language of the smile, vocal communications of pleasure and distress. It is the essential vocabulary of love before we can speak of love' (Selma Fraiberg).

**Balance between dependence and independence:** An important task of parents is to strive for a balance between dependence and independence. The younger the child, the less developed its motor and other skills, the more help it requires. A two-year-old cannot tie shoe laces or make a bow: this only becomes possible after the age of five. Once a child is able to carry out a task on its own it should be encouraged to do so. Parents are too often inclined to perform a task long after a child has learnt to do it reasonably well because it is quicker and easier for them to do it. But if this is done all the time then they are actually depriving their child of the opportunity to learn a skill, become more independent and, especially, to gain self-confidence.



### POINT TO PONDER

The first five years of life are crucial for the development of a sense of trust, love and security which forms the basis of subsequent human relationships. It is also the time when the foundation is laid for self-reliance and independence in carrying out many simple tasks.

## Emotional vulnerability

Emotionally, the baby and pre-schooler have a certain vulnerability due to the following factors:

- the emotional intensity of the attachment to the mother, or father, or other major caretaker, and the fear when they go away, disapprove or reject the child
- a limited understanding of the world
- the enormous developmental and adjustment demands it has to face
- the frustrations others impose upon it: think of the many things a small child would like to do and is stopped from doing – often for its own safety
- the frustrations of many failures: think of all the things a child wants to do, sees older children and adults doing, and when it tries to also do them may not succeed at all. This point highlights the need to praise a child's efforts and successes and to set realistic goals.



In view of the above vulnerabilities it is not surprising that young children may have many fears, such as fear of the dark, being left alone, being chased by monsters and so on. They gradually learn to cope with them if parents:

- build the child's confidence in its own abilities to cope
- are patient and loving
- gradually help the child to confront the fearful situation, for example if the child is afraid of the sea, let it play on the sand, take it to small rock pools to get the feel of the water, take it by the hand to the edge of the surf but only as far as it will go, and so on
- give explanations about why something need not be feared as the child's understanding grows
- provide examples of how to deal with a particular fear
- do not ridicule a child's fears

Often a parent does not know the nature of a child's fear since the child may not be able to define it clearly – even for itself. Remember that a

vague understanding precedes the ability to clearly recognise and express ideas and emotions. Selma Fraiberg (1959), a child therapist, gives an example of the fear of a four-year-old boy which seemed inexplicable to his parents. At the age of four, this bright little boy refused to use the toilet, being reduced to sheer terror when expected to do so and continuing to soil his pants. The parents saw this as defiance and stubbornness. In their desperation they appealed to Selma Fraiberg for help.

Once Fraiberg had gained the trust of this little boy he told her he was frightened of the 'lobster' in the toilet. Puzzled at first she eventually came to realise that the child meant 'monster'. This monster lived in the toilet and was 'gonna eat him up!' Seen from this point of view the child's fear began to make sense. The monster which lived in the toilet made growling noises like a lion, Gr-r-rr (the flushing noise). Moreover, whatever was put in the toilet was eaten up – it disappeared! Quite logical really – and the fear concerning the toilet quite understandable when seen like this!

This example also aptly illustrates some of the features of early childhood thinking: what a child imagines seems real to it; and the distinction between living and non-living objects such as lions and toilets is not yet understood.

Many fears disappear after a while, perhaps because the child's level of understanding has increased, because it feels more secure or for reasons we do not know.

## The self-image

One's self-image is the way we perceive ourselves to be. A child's self-image develops gradually, based largely on the reactions, perceptions and comments of others. 'Johnnie is so naughty', 'Mary is such a loving child', 'Joy is so pretty', 'You are a spoilt brat'; such comments provide the child with cues about itself.

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### EXERCISE

- 1 Can you remember early experiences or remarks by others that helped to shape your self-image? Do you think they still influence your self-perception?

## 2 Would you repeat, modify or avoid such comments and reactions in regard to your own child?

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The feedback a child receives at first comes mainly through attention to its physical needs, such as feeding and bathing, and the love or rejection which accompany this. As the child grows older and interacts more with others so their reactions of pleasure, approval, acceptance or irritation are more clearly perceived by the child. Slowly some kind of self-image emerges, based largely on the responses from others.

Parents can promote the development of a realistic and positive self-image by:

- being realistic in their demands of a child so that there is a good likelihood of the child succeeding
- being realistic in their praise: sentiments expressed in words like 'You are the cleverest person in the world', 'No one is prettier than you' may be boosting to the self-image temporarily but may require painful reassessment at a later stage, especially if they are used all the time: an occasional over-enthusiastic response is a different matter
- giving a lot of encouragement by approval, hugging, smiling and other signs of appreciation
- being specific if admonishment or criticism is called for: 'It is not nice to hit your little sister' is a better response than 'You are a nasty boy'. In other words, focus on the specific behaviour, not the total person. (Refer back to the chapter on communication in this regard.)
- showing appreciation for responsible, kind or helpful behaviour.

### **Gender and self-image**

A child's perception of its gender: 'I'm a boy', 'I'm a girl' is an important aspect of his or her self-image. At first Tommy may think of himself as just 'Tommy', then as 'Mummy's little boy' then as 'Tommy Foster'. Somewhere between the ages of 3 and 4 he also recognises that he is a boy, not a girl, and begins to develop a sense of gender. Society has certain expectations of what is appropriate for boys and girls, for example, girls should play with dolls, and boys should be tough. Many stereotypes tell us

of the social expectations we hold for boys and girls: 'Boys don't cry', 'Girls should be gentle and kind.'

Such stereotypes largely reflect cultural values. They reflect the kind of behaviour which heralds what will later be expected of them as adults. Because adult roles have changed and become more flexible (we now have fathers who are primary parents, female engineers, etc), so the acceptable behaviour for boys and girls has also been broadened in range. Nonetheless, certain predispositions will incline boys in general to prefer some activities and girls others. This does not mean that boys and girls should not be given the chance to play with a wide range of toys (boys with dolls and girls with tractors), nor does it mean that they should be discouraged from their own preferences.

Three points should be remembered:

- One's perception of oneself as male or female is an important part of one's self-image.
- The child's awareness of gender (being a boy or girl) emerges at 3–4 years of age.
- The **father** plays a crucial role in this process for both boys and girls.

The importance of the father in this regard seems to be that he distinguishes more between what is acceptable behaviour for boys or girls respectively (refer back to chapter 6 the section on mothering and fathering).

## Personality development

Erik Erikson (1963) identified eight stages of psycho-social development, of which three fall into babyhood and the pre-school years. Each subsequent stage of development builds on the foundation of the previous one. Psycho-social development refers to inner psychological development and its interaction with certain cultural requirements.

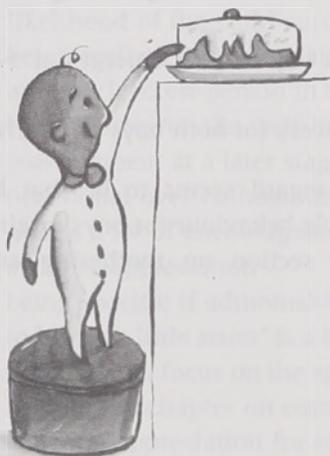
The first stage centres on the development of trust (0–2 years). As the child's needs for food, warmth and cleanliness are taken care of by a loving mother or other caregiver, so the foundation of **trust** is laid.

From the age of two the second stage is entered, when a child becomes more independent of others. This fosters a sense of **autonomy**. The 'terrible two's' are a sign of the child's budding sense of being an

independent person, testing its own will and emerging skills and reacting with temper tantrums when it is unable to control a situation. (Parents should avoid over-reacting to them. It is better to ignore them as far as possible.) If the development of a child's autonomy is not promoted, a sense of doubt about its abilities or even a sense of shame might develop.

Between three and six years a child learns to perform many tasks by itself. It is able to feed itself, throw and catch balls, to express itself in words, to name but a few of its skills. This leads to a sense of mastery which, in turn, encourages a child to use its **initiative**.

## Thinking



Up to the age of about two, a child discovers the world by means of its motor skills, reaching, throwing, moving, and by its senses, looking, smelling, tasting. Gradually patterns emerge and connections between different happenings come to be linked, as when a hungry five-month-old stops crying at the sound of the milk formula being prepared; the sound of milk powder being beaten into water has come to be linked to the satisfaction of a basic need: food!

An advance on this is when a twelve-month-old actually tries to see what happens as a result of its own actions, for example by throwing a toy around and watching to see what happens to it. Between eighteen months and two years we see the beginnings of real thought as the child makes a plan to solve a problem, for example when it uses a stick to reach a toy beyond its grasp.

This brief outline is merely to indicate the progression from simple to more complex activities, recognising that even the simplest actions, like a baby shaking its rattle and trying to put it into its mouth, are part of a fascinating developmental sequence.

The desire to explore the world around it is a fundamental feature of

human development. It is also the basis of thought. However, the thinking of young children is different from that of adults in specific ways:

- A child acts before it thinks: it learns through doing and the consequences of such doing.
- The distinction between reality and fantasy is blurred in the first few years of life: what the child 'sees' in its imagination or dream is 'real' for it, so the monster it visualises **exists**. It is consequently more reassuring for a monster in the story to be chased away than to explain to a three-year-old that it does not actually exist! The reverse is also true: what is out of sight is out of mind. Hence the game of peek-a-boo is not just a game but also a way of learning that something can disappear and reappear and continue to exist even though not in view. This paves the way for mental pictures being formed in the mind of something not actually present: The little girl can visualise her teddy even if it is in the next room.
- Under the age of four children find it difficult to concentrate on more than one thing at a time and are unable to link different events with one another. Piaget, who did pioneering work on the intellectual development of children, suggests that they see things in a rather disconnected way, like seeing each picture separately in a slow motion movie but without grasping the sequence of events or the whole picture.
- The child under four has a very subjective view of the world and assumes that the way he or she sees the world is also the way it is seen by everyone else. Consequently, a child is unable to see viewpoints other than its own. For example, while in the car which has stopped at a red traffic light, it may well say that another driver moving in a different direction, for whom the traffic light is green, is 'naughty' for not also stopping. Piaget refers to this tendency as egocentric.
- Comparisons are not fully understood by pre-schoolers: although they may use the words 'bigger', 'smaller', and so on, they often do not clearly understand the comparison implied. Ella says: 'When I grow up I will be bigger.' Mummy replies: 'That's right.' Ella: 'Is granny your mummy?' Mummy: 'Yes, she's my mummy.' Ella: 'Is she older?' Mummy: 'Yes, of course.' Ella: 'Then why are you bigger?'
- The child believes what it sees. If milk is poured from a jug into three mugs, it cannot yet grasp that the amount of milk has not changed. Change in shape or appearance to it means change in substance or volume.

These are but a few characteristics of early thought. Gradually, as a result of maturation and learning, reasoning begins to change but much development still has to occur before thinking becomes more akin to that of adults.

## Language

Language is unique to humans and without it culture and civilisation as we know it would not exist. The development of language is a fundamental part of being human. Like most other development it begins early in rudimentary form and follows a certain sequence.

Crying is the baby's first form of communication. This is followed by practising sounds and building up a sound repertoire: ba-ba-ba, goo-goo, dadadada. Between the ages of one and two years the first words are put together: 'máma tata', 'dolly doodoo'. Finer distinctions are made only later. At first all men may be called 'dadda', which may cause amusement or consternation!

Mothers tend to talk '**motherese**' to babies and young children: they speak at a higher pitch, somewhat more loudly and slowly and use simple sentences. Most mothers seem to do this spontaneously.

What is known as **babytalk** is often initiated by the child's version of a word, as when 'Dorothy' becomes 'Dottie', a banana is a 'nana'. Gradually pronunciation improves, vocabulary increases and words are put together to form simple sentences.

Parents can be helpful by speaking to their child, and by putting actions into words: 'You are bathing dolly'; 'Car is in the garage', 'Daddy is cutting grass'. By naming things parents help to broaden vocabulary: looking at picture books is one way of doing this. Children's books deliberately limit the number of objects and use the same objects or people repeatedly, thus not overwhelming the child with too many images and words.

Everyday activities provide ample opportunity for teaching the names of things. During a walk in the garden flowers, grass, butterflies and trees can be pointed out and, later, different colours: green grass, yellow, red and blue flowers.

By the age of approximately four, a child reaches the '**why, what, how**' stage. Endless questions test a parent's patience, knowledge and ingenuity.

'Why doesn't the sun fall down?' 'Why can't baby drink beer?' Attempts may also be made by the child to provide its own explanations. 'The wind blew my daddy's hair away' was Maryanne's comment to a friend who wanted to know why her daddy had so little hair on his head.

Sometimes their questions are quite startling. Anna asks:

'Maggie, is there a different heaven for the Protties and the RCs and the Jews and all of them?' 'No, only one.'

'What's all the different churches and synigogs for then?' (quoted by Fynn, 1974).

The important point for parents to know is that they should respond at the child's level. Motherese is fine for babies, simple words and sentences are appropriate for two-year-olds, but babytalk is inappropriate for a four-year-old and an embarrassment for a schoolchild.

### **That awkward question: where do I come from?**

A new baby in a friend's family may lead Johnnie to ask **that** question: 'Where did the baby come from?' It might be interesting to hear what Johnnie's own theory about this is:

'Well, Johnnie, where do you think the baby came from?'

Replies may be: 'I dunno', or 'He was bought from the Hyperama', or 'Peter says his brother came from the hospital'. I suppose in the future one might get an answer like 'He came on the Internet.'

The point is that a child asking the question often already has some ideas on the subject which could provide a good starting point for a talk about the subject and perhaps suggest how much a child needs to know at this stage.

'You want to know where Baby Ian came from?'

'Yes, Peter says he came from the hospital.'

'Yes that's true, little Ian was born in the hospital.'

'Okay, I'm gonna go see the baby.'

Here the subject is closed by Johnnie himself. At this stage all he really wanted was confirmation that what his friend had said was true.

However, the conversation could have proceeded differently:

'Was the baby sick?'

'No, why do you think the baby was sick?'

'Because it was born in hospital.'

'Babies are born in hospital, because the baby is in mummy's tummy and the doctor has to take it out.'

'Does the doctor cut it out – does it hurt?'

At this point it may be sufficient to explain that babies are born through a special passage and that the doctor need not cut mummy open, though sometimes he may have to do this, like when the baby is too big for the passage. At this point one could ask: 'Is there anything else you want to know?' and if not, leave it at that unless Johnny is clearly not satisfied.

What is being stressed here is that a simple question may not require a detailed scientific explanation. A parent talking about babies and their origin in a relaxed way in the form of question and answer is likely to set the scene for further talks about the subject with mum or dad, who can use such opportunities to get rid of wrong ideas and incorrect information. A fumbling anxious reply or discussion far beyond what was needed at that time will less likely encourage further such talks.

## Playing

In play a child exercises its emerging abilities and skills, expresses its emotions, mimics adult roles and acts out what it sees in reality or imagines. Whereas play for an adult means recreation and relaxation, for a child it means far more: it is an inherent part of development. Through play a child gets to know the world around it, and to try out and practise its skills.

Like all other development, play patterns tend to follow a certain sequence, as social play patterns demonstrate:



- First comes solitary play, typical of the toddler: Jonathan rushes up and down the lawn, stamps on the snails and kicks a ball but is not interacting with other children;
- This is followed by onlooker play, which is usual at two and three years:

children begin to observe the play of others and may sometimes try to imitate it;

- Next comes parallel play, usual for three-year-olds, when children play alongside one another, but there is little interaction between them. Sharing toys has yet to be learnt;
- Interactive play often only occurs at about the age of five when children become more interested in each other than in play itself;
- Co-operative play occurs mostly among five- and six-year-olds when there is some kind of organised play, when games begin to be understood, when ideas, fears, actions and toys begin to be shared.

Although this sequence of play is fairly constant, the time at which a certain kind of play emerges is more varied because environmental factors do play a part. An only child spending lonely hours in front of the television may have far less opportunity for the development of social play than the child in an extended family with numerous siblings and cousins around.

Many young children have vivid imaginations. They talk and play with imaginary animals, angels or playmates. Sometimes they express their fears in play-play. Little Pepe is afraid that a gangster may jump up from under his bed at night when it is dark. So, every night he puts a cushion under his bed for 'Tokkie', an imaginary lion, to sleep on. Pepe is firmly convinced that Tokkie will chase any gangsters away. Tokkie, we are told, is huge, has glowing green eyes and can run faster than a motor car.

One reason that play therapy is such an effective tool for dealing with children's problems is because children often express themselves better through action, play and drawings than through words. In play therapy the adult meets the child at its own level and way of expression.



### **POINT TO PONDER**

Play with your child and it will later be willing to work with you.

## Moral development

I can see some parents shaking their heads in disbelief at this heading.

For one thing, it sounds so Victorian, and for another, is it not rather premature to speak of moral development in the pre-schooler?

In answer to this question I pose another: If all other development has its foundation in the early years of development, albeit in rudimentary form, why should this not apply to moral development?

Moral development relates to the ability to distinguish between right and wrong. It includes honesty, goodness, self-control and the development of a conscience. A person's conscience also has an emotional component as it includes feelings of guilt and anxiety.

Morality relates to values, rules and standards about how people should behave toward others. This is a highly complex process which, like all other development, follows certain stages, generally only reaching maturity in adulthood.

However, the development of conscience does not happen by itself. There are two major requirements for the development of conscience to begin in childhood. First, the child's intellectual, language and social development must have progressed sufficiently for some understanding to be possible. The child has to learn what is acceptable behaviour, what is 'good' and what is considered 'bad'. Thus, in the beginning moral development rests upon control by others by means of reward and punishment which mainly take the form of approval or disapproval by the parents. A child learns to obey because this is what parents expect of it.



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### EXERCISE

How can you as parent promote the moral development of your child? Consider the part played by discipline in this regard.

Refer back to chapter 4 for a detailed discussion of discipline and control.

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It is only after the age of two that one can begin to speak of the gradual emergence of conscience. Between the ages of 3 and 5 years, the pre-

schooler is still focused on the self and most interested in its own needs and pleasure. Its behaviour is labelled as 'good' or 'bad' by others but its own judgement is still immature and it cannot judge its behaviour unless guided by others. By about 5–6 years a child begins to act in terms of standards that come from within itself, having internalised what it has been taught and no longer requiring so much policing of its actions by others. Simply put, the child has learnt to say 'no' to itself – a difficult thing to do which we as adults still struggle to master!

Two examples will show how the moral thinking of a child of four will differ from that of an eight-year-old. The first story concerns Betty. While her mother was away, four-year-old Betty climbed on a chair to get a cookie from a glass jar, knowing she was not supposed to do this. As she was climbing down from the chair she dropped the jar and it broke.

The second story is about Lara who was helping her mother set the table. She tripped as she was carrying a tray of glasses and five of them broke.

When a child of four was asked which child was naughtiest, the answer was that it was Lara because she broke more things than Betty. By contrast, an eight-year-old said Betty was naughtiest because she had done what she was not supposed to do but Lara was trying to be helpful. At four, the child focuses on the **amount** of damage done; at eight it considers the **intention** behind the action. These examples are a powerful reminder that morality involves complicated thinking and reasoning and has a long developmental path to follow. All the more reason to recognise the nature of its beginnings.

## POINT TO PONDER



*All I really need to know, I learned in kindergarten* is the title of a book by Robert Fulgham, who highlights seven basic rules of democratic living:

- 1 Share everything.
- 2 Play fair.
- 3 Don't hit people.
- 4 Put things back where you found them.
- 5 Clean up your own mess.
- 6 Don't take things that are not yours.
- 7 Say sorry when you hurt somebody.

## **The parent's role in fostering early development**

The parent's task is to provide the secure background in which a child feels safe to explore its environment, to provide stimulation to foster learning and to encourage optimal learning by interacting with the child. Most of all, a parent should enjoy witnessing the unfolding of the miracle of development.

## **SOME CRUCIAL CONCERNS OF PARENTS WITH BABIES AND YOUNG CHILDREN**

### **Should mothers of babies and young children work away from home?**

This question is often posed. Underlying it is a further question: does a baby need a mother's full-time attention?

Volumes have been written about this subject, and to this day there is considerable controversy surrounding this issue. There are those who argue that it is best for the child if the mother is almost constantly available to it. This view is closely linked to an emphasis on the bond between mother and child and to a prolonged period of breast-feeding. At the other end of the opinion spectrum we find the emphasis on quality time rather than the amount of time spent with child.

Here, it is stressed that the needs of both mothers and children need to be considered as well as the realities facing a particular family. A mother compelled to go out to work may have no choice in regard to how much time she is able to be with her child. Moreover, children and families differ and sweeping generalisations are best avoided. Nonetheless, it should be recognised that, as far as possible, certain conditions should be met to ensure the child's best possible development. In this regard the following merits careful consideration.

### **Quality versus quantity time**

There is the notion that the quality of the time a mother spends with her child is more important than the amount of time she spends with it.

This immediately raises the question: what is meant by 'quality' time? It should mean physical closeness and cuddling, emotional bonding and intellectual stimulation, fun and laughter. Now the mere presence of the mother does not ensure this: she may be physically present but psychologically absent or even neglectful. On the other hand, one does need to ask if a hurried hour a day crammed with all kinds of stimulation is adequate to provide quality interaction.

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## EXERCISE

- 1 How would you describe quality time spent with your child?
- 2 Could this be part of the general interaction with your child or do you need to set aside specific times for it?
- 3 It should also be considered what is crucial for the little child. Might it not be the availability of the mother when the child needs her, **now** not later?

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Patty and Daniel were a young couple struggling to make ends meet. Both had full-time jobs. Their children, aged two and three, spent the day at a pre-school centre and were fetched by their parents late in the afternoon. Homecoming was a nightmare. Both children whiningly wanted their parents' attention and needed to be bathed and fed. Patty still had to prepare supper. Tears, irritation, frustration – chaos reigned. Patty and Daniel became impatient with the children and each other. Finally, after a nasty quarrel they sat down and really talked the matter through: how tired they were, angry with themselves and one another and feeling guilty about not coping as parents.

Together they found a solution. On coming home they first sat down, each with a child on their lap, cuddled them, told them they loved them and all had some cool drinks and cookies. Bathtime and dinner could wait. With everyone feeling more loved and relaxed a traumatic homecoming changed to a time of happy togetherness. Somehow, this feeling was carried over to bathing and feeding, which proceeded much more smoothly.

Patty and Daniel's approach tells us that simple, caring actions can produce remarkable results.

## **CHILDCARE IN THE ABSENCE OF THE MOTHER**

Approximately 40 per cent of the labour force in South Africa consists of married women, many of whom are mothers. A large number of single parents are also employed. What then happens to their children when they are at work? Whatever the kind of childcare provided, be it at a crèche, by a family member, a domestic worker, or whoever, certain conditions should be met.

The following questions should be asked when assessing possible places of care for a child:

- Concerning the child's physical wellbeing, are there adequate facilities with regard to space and activity? Concerning health, how clean and hygienic is the place, and what nutrition is offered? Is there scope for activities of different kinds, and for rest?
- Is the caretaker(s) able to relate lovingly to children and understand their developmental needs? How, and how much, do they interact with children; what kind of behaviour do they encourage; how do they deal with problems? Ideally, the ratio should be one adult per three babies. However, this ratio is seldom found. Older children requiring less total care can be cared for in bigger groups.
- How permanent are the caretakers? Children may suffer 'stranger anxiety' when with unfamiliar people, and more so if the surroundings are also strange to them. It is therefore important to have continuity with regard to caretakers and to gradually familiarise children with new surroundings, for example by the mother staying with her child for a while at the place of care until it has become more familiar with it.
- How is the child's sensory and intellectual development being stimulated? Children do not necessarily need sophisticated toys: colourful boxes, blocks, lids, pots and pans, plastic containers and simple toys can all be fascinating. Most fascinating of all are sand, water and clay.
- Do the caretakers have similar ways of dealing with children as you do? While some variation is to be expected, major inconsistencies are confusing for a child.

## POINT TO PONDER



In the extended family there may be 'multiple mothering' when several members of the family share the care of an infant. This is in contrast to the nuclear family view notion that the child needs to bond with one particular person, the mother, for optimum development to occur. There is no evidence to suggest that loving care by several 'mothers' is not as good. Moreover, grandmothers, fathers or stepparents may have all the qualities of good caretakers and loving child-rearers.

From approximately the age of two and a half to four years a child may enjoy being in a small playgroup whereas from the age of four it may cope comfortably in bigger groups, as in nursery schools. However, one should always allow for individual variation. Some children are shy; others are outgoing and sociable.

### The employed mother

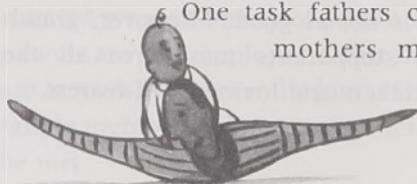
There are a number of conditions which enable a mother to combine several roles (homemaker, wife, mother, employee) more comfortably. If any of these conditions are not met she may experience severe strain.

- Good health and stamina: combining several roles is physically demanding and exhausting.
- An effective support and childcare system. Much stress can be anticipated if these are not in place: a sick child, overtime at work then become major crises.
- An 'easy', healthy child.
- A mother whose own separation anxiety is not too high. Some mothers experience considerably more anxiety when separated from their children than others.
- Flexible working hours are helpful as they offer the opportunity to deal with family crises, such as visits to doctors.

Some husbands are better parents than their wives. Fortunately we live in flexible times where it is more acceptable, if not usual, for fathers to

be the primary caregivers either because they are custodial single parents or because there is a role reversal in the family, and circumstances make this an equitable arrangement. For example, Carla works full-time as an executive secretary and her husband Norman is a freelance artist/designer working from home. He accepts the major responsibility for the children.

In general, fathers are more involved in play with children than mothers. So they are often the parent having most fun with the children.



One task fathers could undertake would be to involve mothers more in family fun. Overburdened mothers may feel that the care of their pre-schooler is all chores and no play. Yet children and families can be a rich source of fun and time should

be set aside for this bearing the following in mind:

- Focus on the joy of the activity rather than on level of performance.
- Choose the things **you** enjoy doing and involve the child in it; children love imitating parents, be they fishing, baking or painting.
- Get down to the child's level – let the dormant child in you surface for a while
- Turn a chore into a game: a bath can be such fun; make it a race to see who can pick up the largest number of toys fastest; record the time it takes a child to run around the house while you sit with a stopwatch, sipping a drink.

## SUMMING UP

Although far from comprehensive, early childhood development has been dealt with in some detail. It is during this period that the foundation for subsequent development is laid and it is thus vitally important that it be as sturdy as possible. Seeing the world through the eyes of the child should be helpful in identifying with the child, thus avoiding the mistakes we tend to make when we see the child as a miniature adult. It is not. It is not only smaller but uniquely different.

Parenting a baby and pre-schooler is demanding and hard work at a time when parents themselves may be busy facing the demands of their own development. It is no easy task to strike a balance between the

developmental needs of parent and child and some questions relating directly to this are addressed.

One question which perturbs some parents, especially those who may not have been able to provide the best conditions for their children because of difficult circumstances is: 'Will my child ever be able to overcome early negative conditions?' Such conditions may range from lengthy hospitalisation of mother or child, an accident, deprivation due to poverty, or emotional rejection. The current opinion of experts is more optimistic than in the past. It may be possible to counteract some of the early damage bearing in mind that there are some remarkably resilient children. But it will demand extra attention to all aspects of development, great love and patience as the pace of development is likely to be slower, for example distrust may have to be overcome before trust can emerge.

In the case of severe trauma or abuse professional help should be sought. This should also be considered if problems persist despite your best and continuing efforts to deal with them. Consult a psychologist or child therapist, or social worker with special training in the field of family relations and child development.