



SNS COLLEGE OF NURSING SARAVANAMPATTI COIMBATORE-35

**SUBJECT:-PSYCHOLOGY
TOPIC:- CHILD PSYCHOLOGY**

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INTRODUCTION

- Sigmund Freud postulated that a child passes through five major progressive stages of psychosexual development namely: oral, anal, phallic, latency and genital. Each stage is characterized by certain developmental and behavior changes.





THE ORAL STAGE OF PSYCHOSEXUAL DEVELOPMENT (BIRTH TO 18 MONTHS)



- Oral stage of infancy is a critical period in personality formation. The centers of pleasurable body movements are the mouth, lips and tongue. He also experiences common problems associated with fixation as dependent personality with unnecessary demand for mothering, oral aggressive, and excessive oral behaviours.





ANAL STAGE (18 MONTHS TO 3 YEARS)



- This stage refers to the stage when the focus of pleasurable body zone shifts from mouth to anus, rectum and bladder.
- The child also resolves conflict between his need for parental love and his need for instinctual gratification through the development of life long attitudes toward cleanliness, submissiveness, orderliness, punctuality etc.





THE LATENCY STAGE (AGE OF 6 TO 12 YEARS)



- Children suppress most of their infantile sexual feelings or sexuality and become interested in games and sports. Further, the boys associate with their fellow boys and girls and engage themselves in learning skills and values etc.





GENITAL STAGE (12 TO 18YEARS)



- The focus of pleasurable activity shifts to the members of the opposite sex. Both boys and girls experience romantic and emotional feelings. At this stage, Sigmund Freud postulated that human behaviour is determined by id, ego and superego personality functions.



NURSE'S ROLE IN CHILD PSYCHOLOGY





PROMOTING GROWTH AND DEVELOPMENT

- Nurses should reassess developmental levels at intervals to evaluate.
- Age related play activities & activities that strengthen gross and fine motor development, sensory and cognitive development are encouraged.
- Choose appropriate toys that match the child's skills.



PROMOTING GROWTH AND DEVELOPMENT



- Collaborate with speech, physical and occupational therapist to improve speech, physical, cognitive and social abilities of a child.
- Special education should be provided to child and parents at each developmental level that meet the individual needs of child.





PROMOTING GROWTH AND DEVELOPMENT



- Discourage over protectiveness as it may impede the child's physical and psychosocial development
- Encourage stimulating activities appropriate to the child's developmental stage. Collaborate with the family members to develop a manageable plan of care that prevents discouragement and exhaustion.



PROMOTING GROWTH AND DEVELOPMENT



- Encourage families to allow children with special needs to participate in appropriate extracurricular activities according to their developmental level and physical limitations.





OPTIMIZING MOBILITY AND PREVENTING FURTHER DEFORMITY



- Encourage families to allow children with special needs to participate in appropriate extracurricular activities according to their developmental level and physical limitations.



OPTIMIZING MOBILITY AND PREVENTING FURTHER DEFORMITY

- Nurse should assess the type of auditory, motor, visual or intellectual deficit to aid in planning interventions appropriate for the child.
- Facilitate activities in using fine and gross motor skills e.g. holding a spoon or pencil
- Allow the child to perform activities at his/her own pace as the child may have difficulty in completing tasks by time compared to normal child.



OPTIMIZING MOBILITY AND PREVENTING FURTHER DEFORMITY



- Activities should be followed by a brief periods of rest to maintain energy of the child.
- Range of motion exercises are performed every 4-5 hours to promote movement and minimize the risk of contractures.
- If the child uses an orthotic device to build stability, educate the family about preventing the deformity.





PROMOTING PROPER NUTRITION



- Nurse should check the anthropometric measures of the child with special needs as they are used as a basis for caloric and nutrient requirements
- Promote breast feeding exclusively for 6 months
- Assess the infants sucking and swallowing ability
- Provide enteral feeding to the children who are unable to meet the nutritional requirements orally and educate the family regarding the same.





INCREASING FAMILY COPING

- Nurse should assess the family coping methods used and their effectiveness; family ability to cope with a child that needs long-term care and guidance.
- Encourage family members to express problem areas and explore solutions together to reduce anxiety and enhance understanding.
- Assist family members to identify healthy coping mechanisms they can use to find the solution appropriate for them.





EDUCATING THE CHILDREN AND PARENTS



- Nurse should educate the children about their strengths and competencies
- Parents should be educated that they should not compare the performance of their child with other siblings or other normal children.
- Impart information regarding condition of the child with special needs. Avoid giving misleading information or building false hopes in the parents.



EDUCATING THE CHILDREN AND PARENTS



- Help parents to develop right attitude towards their child
- Create awareness in parents regarding their role in training a child
- Educate parents about the different training programmes for children with special needs in the community.



CONCLUSION

- The study of developmental psychology is essential to **understanding how humans learn, mature and adapt.** Throughout their lives, humans go through various stages of development.



QUIZ TIME



- What Is Child Psychology?
- What Is Latency Period?
- Describe Nurse Role?



REFERENCES



- Coon, D (1988); Essential of psychology: Exploration and Application. West publishing, St. Paul
- Bastable, S. (2014): Nurse As Educator: Principles of Teaching and Learning For Nursing Practice. 3rd ed Jones and Bartlett Publishers, Sudbury.