

Chapter 7: Physical Development in Early Childhood

- Bladder and Bowel Control
 - Toilet training is best delayed until the months following turning 2
 - Can take from 3-12 months to potty train
 - Accidents and setbacks will be prominent, so patience is key
 - There are signs that the child is ready to begin training
 - Can identify signals from full bladder and rectum
 - Is bothered/feels distress by a wet or dirty diaper
 - Can control the involved muscles until reaching a toilet
 - Effective training techniques
 - Establishing regular toilet routines
 - Using gentle encouragement
 - Praising child for effort
- Growth in Early childhood
 - Growth of the body slows down
 - Shape becomes more streamlined
 - Center of gravity becomes the torso
 - Skeletal growth continues
 - New growth is more centered
 - In general, growth curve is
 - Rapid in infancy
 - Slow in early and middle childhood
 - Rapid again in adolescence
- Normative Growth Patterns
 - About 2.5 inches and gain around 6 pounds per year
 - Boys are typically taller and heavier
 - Smooth and continuous vs. episodic
 - Slow and steady
 - Stop and start pattern
 - Choppy, looks like stairs
 - Periods of growth range from 24 hours to a few days with periods of no growth in between
 - In early childhood, there are wider individual differences
- BMI
 - Method used to determine if the child is under or over weight
 - Normal is in the 50th percentile
 - Measured in kg/m^2
- Influences on Growth and Health of the Child
 - Heredity and Hormones
 - Genes control hormone production
 - Pituitary hormones
 - Growth Hormone (GH)
 - Synthetic growth hormone
 - Can be used if the child is not growing properly or falls behind

- Thyroid-stimulating hormone: directs thyroid to produce thyroxine for brain growth, which is necessary for GH to have full impact on body size development
- Emotional Wellbeing
 - Stress
 - Preschoolers in stressful homes (ex-abuse, neglect, parent conflict) experience more
 - Respiratory illness
 - Intestinal illness
 - Unintentional injuries
 - Physiological indicators
 - Cortisol
 - Higher levels during times of stress
 - Involved in temperament, attachment, and quality of child care
 - Attachment
 - Parental bonding
 - Affection
 - English and Romanian Adoptees Study (1990s)
 - Effects of early severe deprivation on orphans adopted into UK families
 - Psychological deprivation was greatest predictor of cognitive deficits
 - Children could catch up developmentally if adopted before 6 months old
 - If adopted between 6 months and 2 years, children made some developmental gains, but were still significantly delayed
- Physical Wellbeing
 - Physical abuse and neglect
 - Early maltreatment increases risks of later problems
 - Pollack studies of abused children
 - Sensitivity and perception
 - Children of abuse are more sensitive to anger cues and perceive anger in adults who are not actually angry; perceive anger in other situations
 - Neglected children
 - Emotional impairment
 - Inability to identify emotions
- Sleep
 - Important for continued growth
 - GH is released during sleep
 - Allows brain to recharge and rest
 - May help store memories
 - Changes in sleep
 - Multiple naps
 - 2 to 3 year-olds need up to 13 hours per day
 - 4 to 6 year-olds still need up to 11 hours per day

- Sleep problems are common in young children
 - Nightmares, night terrors, difficulty falling asleep and staying asleep
- Increasing Sleep
 - Establishing a regular bedtime
 - Enough to ensure the 10 to 11 hours that are necessary
 - Maintaining bedtime rituals
 - Special pajamas, book, toy
 - Not allowing TV or computer use
 - Responding consistently to resistance
 - Firm but gentle
- Childhood Mortality
 - Rates relatively low in the US, but high in developing countries
 - Although often due to very preventable and treatable infections
 - Underlying causes
 - Lack of immunizations
 - Malnutrition for children under 5
 - Ex- measles and polio are fatal for malnourished children
 - Poverty
- Diet and Nutrition
 - Compared to infants, young children are less hungry and require fewer calories
 - Decreased appetite because growth is slower
 - Picky eating
 - But can accept new food within 8 to 15 exposures
 - Danger of the “clean plate club”
 - Trains child not to listen to internal hunger cues
 - Children may overeat just to gain the reward of dessert
 - Possible change: “Full Plate Club” for kids who choose to fill their plate with healthy foods as opposed to other things
 - Obesity risk
 - Variety and healthy options
 - Using food as bribe, punishment, reward, entertainment
 - Eating role models
 - Don’t force the child to finish their food, even if everything is healthy on their plate
 - Appetite becomes unpredictable
 - Preference for familiar foods
 - Social environment influences food choices
 - Poverty
 - Children can be malnourished, underweight, and even have shorter body size
 - Imitation
 - Will imitate others whom they admire
- Malnutrition