A Rapid assessment of child rearing practices likely to affect child’s emotional, psychosocial and psychomotor development.

A case study of Kibaha District, Coast Region – Tanzania.

UNICEF – December 2001
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Principles of Growth and Development

The child's growth and development take place in an orderly fashion according to certain known principles. We know for example, that the newborn baby will lie prone for many weeks, that little by little he will gain control of the muscles supporting the head, and that soon he will be able to lift it up, erect and steady. Slowly but surely in the next months he will gain control of his spine and sit up, first with support and then without. Soon control over his body will extend to his legs, he will creep if this is culturally permitted and will eventually walk. From head downward his development will proceed in a sequence, which is predictable.

Yet there will be times when the walking baby will gain resort to creeping. There will be periods in the developmental span when the child who has a vocabulary of a dozen words will seem to stand still and his speech development or even revert to an earlier babbling stage and the child who appears to be on the brink of being toilet trained will suddenly be incontinent most of the time. Repetition of behavior characteristics of an earlier stage of development is to be expected of the child as part of the growth rhythm.

These and many other things are true of children in any society. All human being grows and develop in ways we can predict on the basis of certain principles of growth and development. It is these principles to which we will now turn our attention.

(Martin W.E, 1953)
INTRODUCTION

The purpose
The purpose is to conduct a rapid assessment of child rearing practices likely to affect child’s emotional, psychosocial and psychomotor development, in order to facilitate the design of culturally appropriate early child development programmes.

Background to proposal

The Problem
As more children are surviving in low-income countries, attention is being directed to their quality of life. It is clear that large numbers of children have poor psychosocial development in the first few years of life. When they reach school, they are unable to benefit fully from education. They usually fail to achieve satisfactory educational levels and subsequently have poor employment opportunities. This has implications for both the individual and national development. There is extremely limited data on the size of the problem but it is likely that many millions of children are not developing to their full potential. For example 39% of children under 5 years in low-income countries are stunted and it is well established that stunting is a marker for both poor environments and poor development.

The development of children is multi-determined and is affected by their health and nutritional status, their genetic potential as well the quality of their home environment. In poorly educated and traditional populations, parents tend to provide unstimulating environments. They often are unaware that their child rearing practices can affect their children’s cognitive and language development. They fail to appreciate the importance of playing and chatting with young children. They may be unaware of age appropriate activities to do with their
children. Many parents inhibit exploration and use punitive discipline. Emphasis is generally placed on obedience, respect for elders and religious observance. However, now that schooling is available to more children, parents want their children to do well in school but have little idea of how to prepare them for school.

The development of most children living in poverty usually begins to decline from around 12 months of age and continues for several years. Where several risk factors are present the effects may be cumulative. The first 3 years of life are critical and poor development at this age is likely to have long-term effects.

**Interventions**

In recognition of the above problems, several international agencies have recently introduced new policies aimed at improving children's development. UNICEF (UNICEF, 2001) is committed to initiate or facilitate child development interventions in the first three years of life (ECD). Most experience of interventions has been with nursery school approaches for the 3 to 6 year old child, and there is relatively little experience with running programmes for the under threes. However, it has been demonstrated in the Caribbean and Latin America that home visiting interventions in the under threes can have sustained benefit on children's development.

Children's development has several dimensions, which are interdependent. They include social, emotional, cognitive and motor development as well as health and nutritional status. An intervention should include all these dimensions. Except in exceptional circumstances, children under three years are probably better off staying at home so that interventions should be at the household level. The aim of the interventions is for the children to be able to function successfully in their current context and be able to adapt to changes in this context as they occur. It is therefore particularly important that interventions are culturally appropriate.
Existing child-rearing practices, which are likely to promote children's development should be reinforced. Locally available and traditional play materials; games, songs and stories should be an integral part of the curriculum.

The philosophy of ECD programmes is to support the parents in child rearing; reinforce good practices and provide new knowledge so that they can improve other practices. Helping parents promote their children's development should also improve their self-esteem and general competence as parents.

In order to plan effective interventions it is therefore essential that good child rearing practices in the local communities are identified and included in the curriculum. It is also necessary to understand the parents' knowledge and attitudes concerning child development. It was the aim of this investigation to identify these factors through a low cost, rapid assessment.

**OBJECTIVES OF THE STUDY**

The target group of the study was composed of rural families with children under three years.

The specific objectives were:

- To identify and document local games, play materials, songs and stories, which are used with children under three years.
- To determine parents knowledge of child development.
- To determine parents attitude and practices concerning play with young children.
- To assess parents’ discipline practices.
LITERATURE REVIEW

Child development has been defined by different scholars as growth and increase in body size, mental capacity, understanding and acquisition of new skills. The development occurs in series and at different stages one after the other. This process needs **stimulation**. Werner, D. 1988 has argued that, "Stimulation means the variety of opportunities which a child can get to experience, explore and play with things around her. It involves body movement and touching".

Every society has different child rearing practices used to facilitate child development. The practices depend on cultures, beliefs, and socio-economic as well as environmental factors. These different factors influence child development as societies at the same time have different perceptions and expectations on child development.

Some societies expect to *observe child development* when one is enrolled in primary school. In this case, there are no interventions either formal or informal towards child's development, despite the fact that child development is a process whereby one stage builds on the previous one. A child in these circumstances is likely to develop poorly. Research results indicate that “most rapid mental growth occurs during infancy and early childhood and that a child’s early years are critical for forming and developing intelligence, personality and social behaviour” (Young. 1997)

**Child Development**

UNESCO (1995) defined Child Development as “...a process of change in which the child learns to handle more complex levels of moving, thinking, feeling and interacting with people and objects in the environment.” (Holt 1993) added that
"The term applies to a global impression of the child and encompasses growth, increase in understanding, acquisition of new skills and more sophisticated response and behaviour".

Many authors have summarised child development as an increase in size and in the mental, physical and social functions of the child. The term also means growth and development whereby the two go together but in different speed.

The whole process of development occurs in series of stages when each stage builds on the proceeding one. This is a continuous process where the whole process of development is affected if one stage does not occur.

There are internal and external factors, which determine the development. The internal factors are mainly the genes, which the child inherits from the parents, while the external factors are environmental like health, socio-economic surroundings, family and the stimulation given. All these factors interact together and each depend on or influences the other.

Child development is **multidimensional** as social and environmental conditions can restrict child’s development. For example if the child does not have the opportunity to play and interact with other people around him, he can not develop in motor skills, as he is not exploring. This further affects his cognitive development. Lack of primary health care such as vaccines, clean and safe water, or presence of disease can hinder the development.

The development is **mult-determined**, as genes, which a child inherits from the parents play a very big role in determining the functions of the body and mind. A child can have some disabilities or deformity, fast or delayed development, simply from genetic reasons. The child’s body and brain depend on micro-/macro nutrients for functioning and growth. Malnutrition or poor nutritional status can cause a developmental delay or impairment. Cultural practices, child rearing,
family responsibilities and priorities can determine the well being of the child.

**Early stimulation** is important as this gives opportunity for the child to experience, explore and play with things around him. By touching, feeling, tasting and moving around, he will discover a variety of things, which encourage more exploration and hence better development for the future.

An interaction of the child’s development process by any factor such as disease, malnutrition, lack of opportunities and early stimulation can seriously affect the next stage. The past experiences can also have much influence on future development of the child. The whole process is **cumulative** whereby a series of events are related to one another. For example, a child who was malnourished at early age can develop low vision, which will cause difficult in reading and therefore poor performance in class and in turn poor adulthood.

As child development is a continuous process it needs a **longitudinal** follow-up. A child’s development milestones keep on changing from time to time depending on the existing factors. The first three years are critical periods for learning as the child acquires new knowledge and absorbs everything around him. Pigeet, a psychologist, believed that through interaction with the environment, a child construct the knowledge and develop. (Oates 1994). (Refer to development stages in appendix 2, 3 and 4)

**Child Play**

"Play is a means by which humans and animals explore a variety of experiences in different situations for diverse purposes". (Moyles, J.R. 1995) Play has been emphasised as an important aspect, as it helps to stimulate child’s mind, body and social interactions. Through play, a child can identify his surroundings and manage to cope with it. In general, play helps the child to enjoy the beauty of the world, explore the adventures and face the challenges in adulthood.
By age, play promotes child's' development in both cognitive, physical, language, social and emotional when playing with others. During play, children do practice social roles and learn aspects of their cultures, depending on the objects one uses, influence of the siblings or peers and the environment. Play has been termed as 'the language of the children'.

Despite the development issue, play also has been used as a therapy to children in difficult situations like illness, developmental delay, in orphaned children, war and other distress conditions. Play has been proved to be an efficient as well as an cost effective therapy.

There are different types of play, which are categorised or depend largely on the age of the children who are involved. However, each type has its own characteristics and functions though may overlap in any play situations. These types are; Sensory pleasure, Play with motion, Rough and tumble, Language play, Dramatic and Modeling, Games, rituals and competitive play.

**METHODOLGY**

**The study area**

Kibaha district is one among the six districts in the coast Region. It was established officially in 1978. The district has an area of 1,630 square km. The area, which is suitable for agricultural activities, is 142,162 hacters, which is about 87% of the total arable land. Currently only 31% of the arable land is utilised.

**Administration**

The district has 3 administrative divisions, these are: Ruvu, Kibaha and Mlandizi. There are 8 wards and 39 registered villages (Under the 1975 Village registration Act.)
Population
According to 1988 population census, the district had 83,018 inhabitants. The projection from 1988 census shows, that the District was expected to have 100,037 people by 2001. This is due to high influx of people migrating from the city of Dar Es Salaam. The growth rate is estimated at 2.1% per annum.

Boundaries
Kibaha district makes boarder with four districts, these are:

- Kinondoni District (Dar Es Salaam region) on the North- East.
- Bagamoyo District on the North and North- West.
- Kisarawe District on the South and South-West.
- Morogoro Rural District on South -West.

Weather
The Annual average rainfall is 600 -100 millimeters. There are two rainy seasons, the long rain start from March - may and the short rain is from October – December. Average temperature is 29.7 centigrade and the lowest is 28.9 centigrade.

Economic activities
Agricultural sector is the major employment while 80% of the people make living in farming. Maize, paddy, cassava and millet are the major food crops while tropical fruits and cashew nuts are major cash crops. There are Masai pastoral activities particularly in Magindu ward.

Transport and communication
Kibaha district is situated along the Dar Es Salaam- Zambia trunk road and the central railway line from Dar Es Salaam- Kigoma and Mwanza. There are typical remote rural areas whereby transport and communication is pathetic and seasonally accessible especially in Ruvu and Magindu Wards.
Social services

Education - 47 Primary schools, 388 streams, 18661 pupils and 552 teachers. 4 Secondary schools and one Post-Primary school Training Institute (Tumbi focal Development Center).

Health - There is one Designated District Hospital, 2 Health Centers, 8 government dispensaries and 17 private dispensaries.

Water services - About 55% only among all the inhabitants receive clean water and mainly those who are living nearby the big water pipe line from Ruvu Juu, which is serving the city of Dar Es Salaam. A big number of people particularly those living along Ruvu River use raw water from the river sources.

Study design

The main activities included:

- Literature review on existing papers and studies on early stimulation and child play in Tanzania.

- Interviews with resource people, focus group discussions and interviews with parents.

- Review:

  Published papers, reports and theses, on child rearing practices and child development in Tanzania, were examined at local institutions, NGOs and international agencies. Handbooks on children play and songs prepared locally and videotapes.

- Resource people:

  Resource people working at the University, teacher-training colleges and in child welfare services, nurseries and playgroups, grand parents and
traditional birth attendants especially in rural areas were interviewed.

- **Interviews:**
  Two focus group discussions were held with mothers of children aged one to three years. Following this, a questionnaire will be designed and given individually to a small sample of 30 rural mothers. The sample will not be representative but will be purposely chosen to include mothers from poor neighborhoods but not extremely high risk ones. The mothers will be identified with help from the staff at the local health centers.

The following information was sought:

1) Lists with documented details of the following: local play materials with samples if possible, local songs, games and stories suitable for under three year olds.

2) **Expectations** of when a child first achieves certain language, cognitive and motor milestones.

3) **Child development:**
   How do children develop?
   What does a child need to develop well?
   How and if parents can facilitate development?
   Who in the household plays the most important role in bringing up a child?
   What, if anything, modifies language, cognitive and motor development

   **Aspirations:**
   What do the parents want for their children's future?
   What are desirable attributes of a child?

   **Child management:**
   How do parents get their child to behave well?
Is it necessary to punish a child physically and if so at what age should this start? Should boys and girls be treated the same at this age?

**Play:**
What if anything is the purpose?
Who if anyone should play with a child and how often
What is suitable to teach a child in their first, second and third year?
Should boys and girls, at this age, play the same way and the same amount?

**LIMITATIONS OF THE STUDY**
- Limited time allocated for the study; 3 weeks was not enough for literature review, fieldwork and report writing.
- Very limited literature on child development, child rearing practices, play and toys particularly on the Tanzanian context.
- The selected sample size (the subjects) was not representative.
- The time, in which the study was conducted, was not convenient to both mothers and health workers because of public holidays.
- There were no observations done at homes since mothers were interviewed at MCH clinics.
- The study did not analyse other critical factors that could affect child growth and development such as:
  - Household composition.
  - Division of labour in relation to gender roles.
  - Family resources including the availability of food.
  - Accessibility of basic social services such as clean and safe water, health facilities and schools.
House and housing environment.
Crime issues like child physical and sexual abuses, parent
divorces, parents' alcoholism and chaos.

FINDINGS
The findings can be summarised as follows:

Age
A total number of 26 young women aged between 18 and 35 were interviewed
both with individual questionnaires and focus group discussions.

Marital status
Of the total number, 18 women were married while the remaining 8 were not
married.

Level of education
Majority of the women did not have any formal education, 10 had received
primary school education while only 1 had completed ordinary secondary school
education.

Number of children
Women under the study had an average of 2 to 4 children below the age of 5
years. There was no difference in number of boys and girls.

Mothers' perceptions on child development at 1-3 years of age
Responses are ranked by order: highest – lowest frequency

Characteristics of a good child
Almost all women interviewed mentioned the following features as characteristics
of a good child:

1. Free from diseases. (8)
2. Good body weight and height. (6)
3. Good eating appetite. (4)
4. Enough hemoglobin (Blood). (3)
5. Not noisy and crying. (3)
6. Don’t know any characteristic. (2)

How can a child develop?
According to them, a child can develop by:
   1. Changes in body size from a baby to toddler and to a child. (5)
   2. Through breast-feeding. (4)
   3. If taken to the clinic monthly for immunisation and medical checking. (4)
   4. If given a good balanced diet as per MCH clinic instructions. (4)
   5. If s/he sleeps well in a good place. (3)
   6. Plays well. (3)
   7. Don’t know how a child develops. (3)

Different stages of development
1. From birth to babies, toddlers, young children. (17)
2. “I don’t know the stages; I just see them growing big.” (9)

What makes a child to develop well or bad?
1. If given enough food and a balanced diet. (7)
2. If taken to MCH clinic monthly and get vaccininated. (7)
3. If the child is breast fed for a long time. (4)
4. Just the child him/herself health status. (3)
5. If the mother does not go out with other men. (3)
6. Playing different games. (2)
7. *The bad factors was the reverse of the above.

Is there anything that can be done to make the child develop well?
Many mothers had responded YES while few had NO answers.
What can a mother do?

1. Provide a balanced diet to the baby. (16)
2. Join family planning in order to space the children for better caring. (3)
3. * Those who had NO answer said that 'there is nothing they can do'. (7)

How do they want their children to develop?

1. Increase in body size and weight. (17)
2. To perform well in school. (7)
3. To be somebody in the society, e.g. a role model. (2)

Child rearing practices

Mothers' occupations
All mothers under the study had no formal employment; they described themselves as housewives or housemothers with a number of activities including petty business, gardening and subsistence farming.

Average hours spent with young child in a day
Majority of mothers are spending an average of 8 hours with babies. Some are spending maximum 14 hours while the minimal hours are 5 depending on ones' occupation.

Playing with young child in the family
All mothers mentioned the family members; these are siblings, mothers, grand mothers, aunts, and uncles.

Mothers' attitudes about young children playing
1. Children needs to play, it is good for them. (12)
2. When children play, it gives time for mothers to do their domestic chores. (8)
3. There is no any advantage in playing. (6)
Importance of young children to play

1. Children learn different things through play. (8)
2. They become active and it is good for their health, a good body exercise. (6)
3. It gives children socialisation as they play with others and share toys. (5)
4. It is a sign of health. (4)
5. There is no meaning for children to play; they just do it because they are children. (3)

Who should play with young children in the family?
Neighbours, siblings, peers, mothers and grandmothers were mentioned frequently while few mentioned fathers. The reasons given to each one were as follows:

1. They are close people to the children and so are trusted by mothers. (8)
2. The child is used to them. (6)
3. The people mentioned above stays at home all the time. (6)
4. Dad and mom are parents and so they need to be close to the child and it is pleasure playing with children. (3)
5. Few mothers said they don’t know who should play with a child. (3)

Types of games, toys and songs, which children play with

Toys: wooden cars, rag dolls, rattles, stones, kitchen utensils, used tins, sand, water and anything around homes, some mentioned western toys.

Games: Water and sand play, hide and seek, ball rolling, cooking, drumming, singing, skipping and fantasy play.

Mothers mentioned the above toys as suitable for the children to play with because they are attractive, cheap and easily available as they can be obtained from toyshops as well as they can be made at home.
Characteristics when children play

Alone: Talking with toys, fantasy play, mom and dad roles, bathing, clothing, feeding and bedding a doll. Crawling, banging toys on the floor and plays with anything around.

Playing with others: Enjoy and participate fully in the play, share toys with peers, motion, group play and all the mentioned above.

Importance of toys, games and songs to the growing children

1. It helps the children to grow. (14)
2. It helps the children to build relationships with others. (10)
3. It prepares the children for the future as it builds the talents e.g. to become a good footballer. (2)

DATA ANALYSIS

Majority of mothers under the study do not understand the concept of child development, either they cannot tell exactly when they expect a child first to achieve certain language, cognitive and motor milestones. As the concept was not clear they could not suggest anything to do in order to make the child develop, and also they were not aware of what children need in order to develop.

The study shows that mothers do not exactly understand the different stages which a child passes through the process of development. To them they just see them 'grow' from an infant to a toddler and become a child by turning from one stage to another. There was not a single mother who mentioned any stage of cognitive development such as ‘understand and differentiate faces of different people at home’. Only one mother mentioned about the language development, she clearly explained the stages from single words such as ma-ma, da-da to telegraphic sentences and then to full statements.
According to mothers, women in households are the ones who play the most important role in bringing up a child. This is mainly because of the 'women's roles in households'. Men as husbands are expected to go out and bring basic needs to the family, thus they do not have time to care for the children.

All mothers want their children to achieve the best in their life such as to perform well in school, have 'good' jobs, as well as to become famous people and role models. However, they could not link their present child rearing practices and the desired future.

To them child's interactions with peers and people at home modify language, cognitive and motor development through an automatic process as the child grows.

**Child management**

In order to make a child behave well s/he should be taught good manners by parents, sisters, brother, and other adults at home.

It is not necessary to punish a child physically, however it is important to discipline a child when doing wrong. There are different types of punishment e.g. not giving a child some gifts or taking her out, and sometimes the use of light physical punishment if necessary. Many mothers mentioned 3 years as the average age when a child can start to be punished.

At this age, both girls and boys are treated the same, however, at the age of 2 years there are some differences on play and toys between girls and boys, as 'boys are not expected to play with cooking pots while girls can not play with cars'. The frequency of play and time taken between girls and boys are the same.

Mothers have explained the purpose of play differently; some feel it is useful as it
improves child's development in terms of cognitive, social and emotional, language, physical and motor development. Others do not see any meaning for children to play and it is just childish and waste of time. As play 'does not hold any weight', it does not matter who play with the child and therefore anyone around could play.

CONCLUSIONS

Child rearing practices under the study area do not provide conducive environment for child development. There are several factors such as socio-cultural practices, economic pattern and gender relations, which affect the rearing practices. However, the main factor is the ignorance of the concept of child development whereas mothers are not aware of the milestones and essential factors to facilitate the development. Due to this reason, growth and development of children under the study area is not monitored, mothers cannot gauge the children, as they are not aware of the so-called 'basic principles of growth and development'.

The children under the study area are denied their rights to grow through play, as the importance given to play is relatively low. The introduction of manufactured toys has contributed much to the disappearing of traditional toys and play. There is less importance given to homemade toys and other things that children can use at household level. Majority of children are experiencing the rural poverty, where most of the families have scarce resources that are not even enough for the basic needs. In such families, buying toys is no priority. There is negative attitude on toys and play, as many parents refer toys as luxury commodities. The majority cannot afford them and thus the poor majority have 'nothing' to play with. In many situations disabled children also have no opportunity to play, which would be vital for their rehabilitation.
RECOMMENDATIONS

Form the above findings and analysis I recommend the following:

 ✓ To carry out an observation at household level which was not possible to carry out during this rapid assessment.

 ✓ To search more literature in Tanzanian context.

 ✓ To develop a mini and simple child development guide/manual that will describe clearly the child development requirements and milestones that can easily be used and interpreted by community facilitators, parents and guardians in rural communities. (See appendixes 2, 3 and 4)

 ✓ To establish a community based project that will facilitate child development in full, socially, mentally and physically through play and toys, with inclusion of disabled children.

 ✓ To facilitate parents and other community facilitators to produce homemade toys and facilitate community play groups for the under fives.

 ✓ To assess the issues of gender balance in relation to childcare and rearing practices among family members.

 ✓ To examine the existing policies and guidelines in Tanzania which address the whole issue of Early Childhood development, and its applicability especially in poor rural communities.

 ✓ To examine how the changes and diversities in socio-cultural issues and poverty affect child rearing practices.

 ✓ To research and analyse the critical factors that could affect child growth and development (as mentioned in page 13).
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APPENDIXIES

Appendix 1 Questionnaire

Assessment of Child rearing practices likely to affect child’s development in rural areas.

Questionnaire:
Assessment of Child rearing practices likely to affect child’s development in rural areas.

Date .................. District................... Region..................
Interviewer...... Age...... sex..... M/status....... L/education.............

1. How many children do you have below the age of (a) 5 years? (b) 10 years?.....

2. How many (a) girls?.............................. (b) boys?..............................

3. How old is your younger child?..............................................................

4. What are the characteristics of a good child?....................................................

5. How can a child develop?........................................................................

What are the different stages of development? Please mention....................................

6. What makes a child to develop well or bad? .....................................................

.................................................................
7. Is there anything you can do to make your child develop well? 

WHAT? 

8. How do you want your child to develop? 

9. What is your occupation? 

10. How many average hours do you spend with younger child in a day? 

11. Who is playing with this young child in your family? 

12. What do you think about young children playing 

13. Is there any importance of young children to play? YES/NO 

WHY? 

14. Who should play with young children in the family? 

WHY? 

15. What types of games, toys and songs do your child play with? 

16. What do you think are suitable toys for the child to play with?
WHY?

17. Where can the family obtain such toys?

18. When playing alone what does this child do?

19. When playing with others what does this child do?

20. What are the importance of toys, games and songs to the growing child?

Mama, do you have anything to tell me? Please DO!

THANK YOU SO MUCH FOR YOUR TIME!
<table>
<thead>
<tr>
<th>AGE (IN MONTHS)</th>
<th>PERCEPTION</th>
<th>MOTOR BEHAVIOR</th>
<th>LANGUAGE</th>
<th>COGNITION</th>
</tr>
</thead>
<tbody>
<tr>
<td>4 Active</td>
<td>Visually tracks objects; perceives colors, discriminates between shapes, and focuses almost as well as an adult; responds to sounds as low as 43 db; turns toward sounds (bells, voices)</td>
<td>Holds up head, chest, grasps objects, rolls from stomach to back.</td>
<td>Babbles; coos; imitates own sounds</td>
<td>Remembers objects, sounds; discovers, examines own hands, fingers; begins to play social interaction games (mimics care-givers imitation of his or her own sounds).</td>
</tr>
<tr>
<td>8 On the Move</td>
<td>Responds to sounds at 34 db; has integrated vision and hearing, has mastered visually guided reach.</td>
<td>Sits up without support; stands with support; crawls, creeps, &quot;bearwalks,&quot; or &quot;scoots&quot;; passes objects from hand to hand.</td>
<td>Imitates some repeated speech sounds (&quot;mama,&quot; &quot;dada&quot;); babbles more complex sounds.</td>
<td>Discriminates between familiar and unfamiliar faces; exhibits stranger anxiety; hunts for hidden objects; plays more advanced social games; imitates some adult gestures and actions.</td>
</tr>
<tr>
<td>12 First Words, First Steps</td>
<td>Walks with support; masters pincer grasp; starts to feed himself or herself.</td>
<td>Understands and uses a few words, including &quot;no.&quot;</td>
<td>Combines two words to form a sentence; names body parts, familiar pictures</td>
<td>Looks for a hidden object in its usual hiding place, but not in the place he or she last saw it, is aware of separation between self and care-giver and exercises choice, begins to pretend by symbolically representing familiar activities (eating, drinking, sleeping).</td>
</tr>
<tr>
<td>18 Pretend Play</td>
<td>Walks without support, attains a better mastery of feeding himself or herself; can stack two or more blocks; can scribble.</td>
<td>Combines two words to form a sentence; names body parts, familiar pictures</td>
<td>Understands the concept of object permanence, attempts to use objects for their intended purposes, includes a second person in pretend play; pretending includes imitative games (&quot;reading&quot;)</td>
<td>Uses objects to represent other objects (a broom for a horse, a sack for a hat).</td>
</tr>
<tr>
<td>24 End of Infancy</td>
<td>Walks, runs, climbs stairs; can pedal a tricycle, can throw overhand.</td>
<td>Follows simple verbal directions; uses three or more words in combination</td>
<td>Uses objects to represent other objects (a broom for a horse, a sack for a hat)</td>
<td></td>
</tr>
</tbody>
</table>
Chapter 4  First Adaptations

0–2 months: Chin up

2–4 months: Chest up

2–5 months: Rolls over

5–8 months: Sits without support

5–10 months: Stands holding on

6–10 months: Pulls self to stand

7–13 months: Walks holding onto furniture

10–14 months: Stands alone

11–14 months: Walks well

14–22 months: Walks up steps

Figure 4.4 MILESTONES IN MOTOR DEVELOPMENT
Figure 5.1
ASSESSMENT OF OBJECT PERMANENCE

The stage 4 infant searches wherever the object was previously found. If the object is repeatedly hidden under the cloth on the infant's left, the infant immediately searches under the cloth and finds the object. When the object is hidden under the cloth on the infant's right, the stage 4 infant still searches on the left. The stage 5 infant searches wherever the object disappeared from sight. When the object is put under the cloth in the adult's closed hand, the infant searches in the adult's hand.