Human Development

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Human Development

Question 1. Using Physical and Cognitive Arguments, Explain how Adolescence and Emerging Adulthood Differ from Each Other

Although adolescence and emerging adulthood are the closely related stages of life, they differ from each other in several ways with regard to physical and cognitive developments. Adolescence refers to a phase of life between childhood and adulthood which spans within ten to eighteen years while emerging adulthood is a stage of life between adolescence and full-fledged adulthood (Arnett, 2012). Emerging adulthood usually begins at the age of eighteen after adolescence stops; and it ends at the onset of full-fledged adulthood in the late twenties or early thirties.

According to Piaget’s Theory of Cognitive Development (Wadsworth, 1971, p. 209), individual thoughts of adolescence start to take more an abstract form with a decrease in egocentric thoughts as a person enters an adolescence stage. Hence, the person starts to think and reason in a wider perspective. Although adolescence is characterized by rapid cognitive developments, many adolescents are less mature in comparison with emerging adults. The latter ones have stronger cognitive developments (Kerig, Schulz & Hauser, 2012). Many adolescents usually face difficulties dealing with social challenges such as peer pressure. However, emerging adults are able to solve the majority of social challenges they face because they have well-developed cognitive abilities and solid reasoning capabilities. Thus, they are able to make independent decisions unlike adolescents. Adolescence is characterized by numerous biological and physical changes in a body; for example, boys develop more body muscles and wider chests, while girls develop breasts and start their monthly periods (Santrock, 2010). On the other hand,
the emerging adulthood is characterized by little or no biological and physical changes in the body.

Adolescents are often involved in group relationships while emerging adults usually have long-lasting relationships. This is because they have developed deeper senses of intimacy. Relationships between emerging adults may also involve sexual connections and cohabitation. Sexual relations and cohabitation are rare among adolescents (Santrock, 2010). Emerging adulthood is also characterized by an increased worldview because of increased interactions and exposure mostly through education at colleges and universities. In contrast, many adolescents lack a worldview because the inadequate exposure and interactions. Many emerging adults are also able to accept responsibility for them. They are able to make independent decisions and usually struggle to attain their financial independence and other qualities attributed to adulthood. Emerging adults are also involved in reflective thinking which includes logical thinking. It becomes more prominent during adulthood. According to the Society for the Study of Emerging Adulthood (2013), emerging adulthood is characterized by a continuous evaluation of information and beliefs in the light of evidence and implications. Emerging adults also develop tacit knowledge which refers to an ability to exercise in self-management and control. In contrast, adolescents lack this kind of knowledge, cannot take responsibility for their deeds and are often guided by their parents or guardians.

Although adolescence and emerging adulthood differ, both stages are characterized by an identity exploration as adolescents and emerging adults struggle to discover their personal identities.

Question 2. Compare and Contrast Piaget’s Theory of Cognitive Development with Kohlberg’s Theory of Moral Development. How Do They Intersect with Each Other?
Piaget’s Theory of Cognitive Development (Wadsworth, 1971) stipulates that individuals develop knowledge through a gradual process which can be broken down into four major stages. These are such as: a sensory-motor stage, in which children acquire knowledge through sensory experiences and manipulating objects; a preoperational stage, in which children learn through a play and also struggle with logic, hence, taking points of view from other people. Also, there are two more stages as: a concrete operational stage, in which children begin to think logically, although their thinking may be very rigid; and a formal operational stage, in which the logic of children increases. They develop the ability to use deductive reasoning and understand abstract ideas. According to Piaget, cognitive development begins with the sensory-motor stage starting at birth and ending with the formal operational stage between adolescence and adulthood (Ginsburg & Opper, 2008). Piaget also has claimed that children are not less intelligent than adults but simply think differently (Rowland, 2012). According to Piaget, cognitive development involves some changes in cognitive processes and abilities (Wadsworth, 1971).

On the other hand, Kohlberg’s Theory of Moral Development (Bergling, 1981) concerns moral reasoning. It deals with choosing to do what is right and avoiding what is wrong. Kohlberg has theorized that moral reasoning is based on the individual’s perspectives and cannot be generalized or universal for all people (Bergling, 1981). Kohlberg’s theory deals with moral reasoning which is a basis for moral behavior; while Piaget’s theory concerns cognitive development or acquisition of knowledge. Kohlberg’s theory of moral development is a modification and extension of Piaget’s theory. The theory divides the moral development into six stages. At the same time, Piaget’s theory divides the moral development into two steps. According to Gibbs (2003), Kohlberg has expanded Piaget’s theory by asserting that moral development is based on moral dilemmas and how individuals assess them. On the other hand,
Piaget has theorized that moral development depends on how an individual thinks about justice. For example, children would follow rules in order to avoid punishment. Moreover, Kohlberg has considered moral development as a continuous process that goes on through a lifespan of any individual, while Piaget’s theory has presumed that moral development finishes at early adulthood when the individual is approximately twenty years. Thus, such a person becomes fully capable of hypothetical reasoning. According to Gibbs (2003), biological maturation plays an important role during cognitive development as presumed by Piaget. As for Kohlberg, he did not take in consideration biological maturation during moral reasoning. It is also worth noting that Kohlberg’s theory failed to explain a relation between moral reasoning and moral behavior (Bergling, 1981). This is because of a big difference that exists between knowing what should be done and the actual actions of individuals.

In both theories, the environment is substantial effective on the behavior and thinking of an individual. For example, in Kohlberg’s theory, some concerns for the society define moral behaviors of individuals, while in Piaget’s theory, interactions with the environment enables children to develop knowledge through experiences.

**Question 3. Explain how Baumrind’s Theory Can Be Used to Stave Off Some of the Problems of Adolescence, Including Teenage Pregnancy, Juvenile Delinquency, and Substance Abuse**

Today, good parenting is a major challenge for many parents. Consequently, various parenting styles and theories have been developed to help people overcome challenges faced during parenting. A good example of such theories is Baumrind’s Theory of Parenting Styles (Hale, 2008). According to Hale (2008), Baumrind has theorized that parents can deploy different parenting styles which would have different impacts on how kids function socially,
emotionally and cognitively. Baumrind’s parenting styles include authoritarian, authoritative, permissive and uninvolved parenting (Hale, 2008; Karen & Learning Seed Company, 2009). These parenting styles have different impacts on the behavioral development of children. Hence, they can be used to stave off some of the problems such as teenage pregnancy, juvenile delinquency and substance abuse faced by most adolescents.

In my opinion, the most suitable parenting styles that can be used to thwart problems of adolescence are authoritarian, authoritative and permissive parenting styles. For instance, a parent would use an authoritative parenting technique to develop rules for adolescents that would protect them from juvenile delinquency and substance abuse. Authoritative parenting is an style which produces a socially responsible and independent person with the high self-esteem and self-respect. Thus, it helps in minimizing engagement in social vices. An authoritarian parenting style would also enable a parent to set strict rules to prevent a child from engagement in unwanted activities such as premarital sex and drug abuse. Thus, it would help in minimizing problems associated with adolescence. However, Krause and Dailey (2009) warn that an authoritarian parenting style should be used with a great caution because it may compel the child to become rebellious and defiant. Similarly, a permissive parenting would allow a parent to discuss with her daughter some biological and physiological changes that occur in her body during adolescence. As a consequence, the daughter would develop a deeper understanding about adolescence. As a result, she will comprehend how to avoid engaging in sexual relations ending with the teenage pregnancy. A permissive parenting style also enables parents to be responsive to the needs of a child. Thus, it enables parents to understand the needs of their children during adolescence and advise them accordingly to overcome problems associated with adolescence. Barber (1998) also agrees that permissive parenting is suitable for assisting adolescents to overcome some of the
problems they face during adolescence. This is related to the fact that parents are generally nurturing and show a big concern for the well-being of their children. Thus, they could advise, guide and counsel them about such challenges of adolescence as teenage pregnancy and drug abuse.

In contrast, neglectful parenting is not suitable for raising children because the parent is neither concerned about the children nor supports them. If the parent adapts a neglectful parenting style, there are high chances that the child would be involved in drug abuse, juvenile delinquency and other social vices because of the lack of advice, guidance and emotional support from the parent. The child would also grow up as a reckless person with fewer concerns and less care about others.

**Question 4. Using the Theories of Erikson, Marcia, and Ginsberg, Explain how an Adolescent and an Emerging Adult Can Be Guided toward Selecting a Suitable Career**

Career choice is one of the major decisions that individuals make in their life. Today, many adolescents and emerging adults struggle with tough decisions of making good career choices for their future. However, they can be accompanied with the appropriate assistance based on the theories of Erikson, Marcia and Ginsberg.

Based on Erikson’s Theory of Psychosocial Development (Hoare, 2001), adolescents can be guided toward selecting a suitable career by helping them understand their real identities and roles in the future. They should be assisted in understanding who they are and where their lives are headed to. They should also be guided on how to establish some boundaries for themselves. For instance, what roles they would play as adults in the future. Adolescents should also be encouraged to develop independence and the sense of self which are vital for selecting suitable careers. According to Hoare (2001), Erikson has claimed that adolescents who complete the
Identity vs. Confusion stage successfully would be able to make independent decisions and have a greater sense of self-control. Thus, they can choose their own career paths.

Adolescents and emerging adults can also be advised on how to make the right career choices using Eli Ginsberg’s Theory of Career Development (Osipow, 1983). The Career Development Theory stipulates that making a career choice is an irrevocable process which consists of three major phases. They are such as: Fantasy, Tentative and Realistic. For example, at the Realistic stage, an adolescent would become specific about his occupations of interest based on personal values, interests and capabilities (Osipow, 1983). At this stage, adolescents should be guided on exploring the variety of career choices based on their interests. They should also be assisted while selecting appropriate trainings that match their occupation of interest. Adolescents and emerging adults should also be guided on establishing alternative career paths before settling on the optimal positions that satisfy the most.

Similarly, James Marcia’s Theory of Identity Status (Salkind, 2011) is also useful when helping adolescents and emerging adults to make right choices. Marcia’s Theory of Identity Status is an extension of Erikson’s theory (Salkind, 2011). According to Marcia, an individual develops the sense of identity based on choices and commitments done in the life related to personal and social traits (Salkind, 2011). Adolescents and young adults should be guided through identity confusions. This stage is characterized by the lack of sense to make choices and unwillingness to make commitments. Moreover, they should be guided during an Identity Disclosure phase (Salkind, 2011) when they want to commit to certain roles, values or goals for the future. For example, a parent would assist an adolescent in choosing a suitable career by telling him what is expected from him (Sharf, 2009). Adolescents and emerging adults also require more guidance at the Identity Moratorium phase (Sharf, 2009). This is characterized by a
crisis in making choices and commitments. This is the phase at which they need most guidance on career paths so that they can make right decisions.

**Question 5. Using the Theories of Erikson, Neugarten, Sternberg, and Berscheid and Walster, Describe the Ingredients of a Successful Marriage.**

There are certain elements or ingredients that determine whether a marriage would be successful or not. Some of these components include intimacy, an ability to satisfy sexual desires, commitment, fidelity or faithfulness, caring, involvement into activities together and equity. They all can be explained using the theories of Erikson, Neugarten, Sternberg, Berscheid and Walster.

Intimacy between spouses is a key to the success of any marriage. Blieszer and Bedford (2012) also affirm that spouses must develop the adequate intimacy for their marriage to be successful. They must be friendly to each other as stipulated by Erikson in his Theory of Psychological Development (Hoare, 2001). Intimacy is achieved when the spouses reveal their personal identity. According to Erikson, most adults tend to remain intimate as opposed to remaining in isolation upon the attainment of a personal identity (Hoare, 2001). Erikson has further asserted that attainment of personal identity enables married people to meet the expectations of their partners (Hoare, 2001). Mark (2011) also agrees that intimacy is the most important aspect of love among adults. Fidelity is also an important component of success in marriages. Erikson has described fidelity as the ability to remain loyal despite the imperfections, incompleteness and inconsistencies (Hoare, 2001). Thus, married people should accept the imperfections of their spouses in order to make their marriages successful. Erickson has also suggested that caring is important among middle adults. It is also essential for happiness for the one’s life. Thus, caring is an element that makes marriages be successful. Similarly, an ability to
satisfy sexual desires of a partner is central to successful marriages. As stipulated by Ellen Berscheid and Walster, the most important ingredient of a romantic relationship between adults is the sexual desire (Mark, 2011). Hence, the ability of partners to satisfy their sexual desires makes a marriage successful. Robert Sternberg has also emphasized that intimacy and commitment are the key characteristics of affectionate love. This brings partners together into a relationship (Mark, 2011).

Based on Neugarten’s Activity Theory (Sannino, Daniels & Gutierrez, 2009), a successful marriage is also characterized by the increased involvement and participation in activities, pursuits and relationships between the spouses as they grow older. Old people should stay active and maintain social interactions in order to achieve the optimal aging which is a key ingredient for successful marriages. On the other hand, if the couple disengages, their relationships become strained and their marriages are likely to fail (Sannino, Daniels & Gutierrez, 2009). A continued activity also increases the life satisfaction which is important for successful marriages. Last but not least, the equity is a major ingredient of successful marriages. It involves a fair distribution of resources within interpersonal relationships. According to Walster’s Theory of Equity, couples gain the relational satisfaction if resources are distributed equitably amongst them (Kaptelinin & Nardi, 2012). Hence, this leads them to being successful. Walster’s Theory of Equity is based on a fair treatment of other people (Kaptelinin & Nardi, 2012).

Question 6. Discuss Primary and Secondary Aging, as They Occur during Middle Adulthood and Late Adulthood, and Explain how These Changes Can Be Ameliorated

Over the last two decades, there have been increasing concerns about aging. People have been asking questions and expressing opposing viewpoints about aging, its underlying causes
and how to deal with it. A continued debate on aging has resulted in the coining of two new terms: primary aging and secondary aging. Primary aging refers to a process by which the body deteriorates gradually throughout a lifespan. Newman and Cauley (2012) define primary aging as a progressive loss of a body function as a result of advancement in age. Primary aging is also called biological aging. Primary aging is genetic (Newman & Cauley, 2012). It is inevitable and results from the accumulation of wastes and biochemical damages in the body. Primary aging usually results to the slowed body movements, impaired vision, the loss of a hearing ability, a reduced ability of the body to adapt, control and manage stress as well as the decreased resistance to infections because of declined immunity. There are no known ways of preventing primary aging. However, such measures as seeking medical attention can be taken to control its impacts. For example, an old person may purchase the auditory assistance devices to lessen the hearing loss resulting due to primary aging.

On the other hand, secondary aging refers to a process by which the body deteriorates as a result of infections due to diseases and poor health practices such as the lack of exercises, eating fatty or oily foods as well as malnutrition. Secondary aging results from some environmental influences such as the exposure to toxic chemicals, behavioral factors, i.e. drug abuse, and physiological factors, such as stress. Secondary aging results from self-damage processes and can be prevented through the use of medications to cure illnesses and making lifestyle choices safer and healthier (Hennezel, 2012). The effects of secondary aging are controllable or reversible. For example, an individual should eat balanced diets, exercise regularly, avoid smoking and excessive consumption of alcohol as well as avoid stressful conditions. The individual should also seek the medical attention while being sick in order to prevent secondary aging. Pfeiffer (2013) also emphasizes that appropriate measures such as
eating balanced diets should be taken to prevent secondary aging and maintain the healthy and functional capacity. Moody and Sasser (2012) also elaborate of primary aging resulting from biological processes, while secondary aging results from physiological processes.

**Question 7. Using Fowler’s Theory, Explain how Religious Development Occurs across the Lifespan**

A process of religious development across the lifespan of an individual can be illustrated suing Fowler’s Theory of Stages of Faith Development (Fowler, 2007). The Professor James Fowler of the Candler School of Theory has presumed that the religious development across the lifespan of an individual can be divided into six major stages (Fowler, 2007). When a child is born, the child has primal or undifferentiated faith characterized by learning of safety of the surrounding which includes the sense of warmth, safety and security against the sense of hurt, neglect and abuse. Consistent nurture enables the child to develop the sense of trust and safety about the world and divine (Fowler, 2007). On the contrary, the child develops the sense of distrust with the universe and divine if he encounters negative experiences due to the lack of nurture.

The first stage of religious or faith development is the acquisition of intuitive-projective faith which is characterized by psychological exposure to the unconscious (Fowler, 2007; Fowler, Nipkow, & Schweitzer, 1991). The child learns religion by imitations and through experiences, stories, images and from other people he comes into contact with.

The second stage is the development of the mythic-literal faith which is characterized by strong beliefs in justice and reciprocity of the universe (Fowler et al., 1991). Religious development at this stage is based on beliefs acquired from literal interpretations. The development of the mythic-literal faith occurs mostly among school children.
At the third stage, an individual develops synthetic-conventional faith which is characterized by conformity to religious authority and the development of personal identity (Galloway, 2011). Religious beliefs of the person start to extend beyond the family. The individual would ignore anything that conflicts with his beliefs because of the fear of a threat from inconsistencies (Galloway, 2011). This stage occurs between adolescence and early childhood.

The fourth stage involves the development of individuate-reflective faith and occurs between the mid-twenties and late thirties. This stage is characterized by angst and struggles (Kao, 2011). At this stage, an individual takes responsibility for his religious values, beliefs, feelings, actions and thoughts. The person also becomes increasingly aware about conflicts with his religious beliefs or thoughts.

The fifth stage involves the development of conjunctive faith in which an individual acknowledges the paradox and transcendence relating to reality of the universe (Fowler, 2007). At this stage, the individual resolves conflicts from previous stages through a multifaceted understanding of a multidimensional and interdependent truth that cannot be easily understood or explained.

Lastly, the sixth stage involves the development of universalizing faith which is characterized by treating and caring for other people with compassion and fairness. This stage is also called the stage of enlightenment (Fowler, 2007). Individuals who have developed universalizing faith often view other people as from a universal community; hence, they should be treated with universal principles of love and justice (Fowler et al., 1991; Kao, 2011). The person presumes a world inclusive of all people. According to Fowler (2007), very few people reach a universalizing stage.
Question 8. Imagine that You Are a Hospice Volunteer and Are Helping Terminally Ill Patients and Their Families. Use the Theories of Nagy and Kubler-Ross to Help You Better Understand Their Circumstances

The ability to understand the circumstances of terminally ill patients and their families is critical for successful interventions. A good understanding of circumstances can be attained using the theories of Nagy and Kubler-Ross (Vasiliauskas, 2007; Kubler-Ross & Kessler, 2007). These two theories would help me nurture a change and development for a patient. The theories would help me initiate the change in relation to systems of interaction between the patient and his family.

Nagy has developed a contextual approach to the family therapy which integrates individual psychology, interpersonal, existential, systematic and intergenerational dimensions of an individual and family life as well as development (Vasiliauskas, 2007). Using Nagy’s theory, I would ensure that I carefully study the patient and his life context and review destructive patterns in their families that would jeopardize a treatment process. Nagy’s theory would help me determine such facts as a genetic input, an ethnic and cultural background of the patient and family, hence, facilitate a deeper understanding of their circumstances. I would also use a range of counseling techniques to study the family history of the patient to gain a deeper understanding of his background and illness. I would review the beliefs and values of the patient so that I could establish the most appropriate approaches to use during the treatment process. Similarly, I would use the relations ethics’ principle of Nagy’s theory (Vasiliauskas, 2007) to provide the adequate care to patients. As Ivan Nagy presumes, family therapy involves caring, connection to a patient, fairness and accountability (Vasiliauskas, 2007). Nagy has also theorized that involving the family is fundamental to a therapy treatment process and would greatly benefit any patient
(Vasiliauskas, 2007). I would also use Kubler-Ross’ Theory of Five Stages of Grief (Konigsberg, 2011; Coenen, 2012; Kubler-Ross & Kessler, 2007) to understand the emotional state of the patient. For example, I would recognize when the patient is angry or depressed because of his/her illness. Moreover, I would use Kubler-Ross’ theory to encourage the patient to accept his/her status without much depression or anger. The Theory of Five Stages of Grief would also enable me understand the reactions of the patient and his family towards the illness, hence, advise them accordingly. For example, this could discourage the patient asking himself/herself questions such as “why me?” or blaming others for his health status. It would also enable me help the patients come into reality with the health conditions without a denial by remaining detached and nonjudgmental about the experiences. Last but not least, I would accept a principle of Kubler-Ross’ theory to encourage the family to develop a positive attitude towards any outcome with regard to the health of the patient.
References


