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Personal Needs and Development across Lifespan

Health Management and Social Care (Secondary 4-6)



The purpose of this learning resources is to provide learning and teaching resources for teachers' reference. Schools are welcome to use the learning resources for teaching purposes on a non-profit making basis.

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Health Management and Social Care Booklets

The design of the HMSC curriculum rests on the notion of the interconnectedness of the various levels at which phenomena related to health and sickness, well-being and ill-being, and personal and community care are to be understood. The curriculum aims to enable students to explore all of these levels as well as the relationships between them. The different levels can be interpreted as the individual, the family, the peer group, the community, the institutional setting, society, the nation and the world.

This part includes 19 booklets of learning and teaching reference materials for teachers. The topics and information in these booklets are selected and organized based on the five essential questions from various levels mentioned in the curriculum design in Chapter 2 of the Health Management and Social Care (HMSC) Curriculum and Assessment (C&A) Guide (Secondary 4-6). The booklets facilitate teachers to develop an overall framework and identify the key concepts of the curriculum so that their students will be able to integrate and apply relevant knowledge as well as develop their analytical skills. Details are as follows:

Levels	Essential Questions	Booklets	
Individual, Family and Peer	What does health mean to you?	1	Personal Needs and Development across Lifespan
		2	Health and Well-being
	How can we stay healthy?	3	Physical Well-being – Healthy Body
		4	Mental Well-being – Healthy Mind
		5	Social Well-being – Inter-personal Relationship
Community	What does health mean to a community?	6	Healthy Community
		7	Caring Community
		8	Ecology and Health
		9	Building a Healthy City
Society	How can we build a healthy and caring society?	10	Health Care System
		11	Social Welfare System
		12	Medical and Social Care Professions
		13	Health and Social Care Policies
		14	Social Care in Action
Local and Global Societies	What are the local and global health and social issues?	15A	Health and Social Care Issue – Ageing Population
		15 B	Health and Social Care Issue – Discrimination
		15 C	Health and Social Care Issue – Domestic Violence
		15 D	Health and Social Care Issue – Addiction
		15 E	Health and Social Care Issue – Poverty

What does health mean to you ?

What does health mean to you? The answer is different to everyone. The meaning of health from the medical perspective may be different from those of the social scientists, psychologists, teachers, environmentalists, priests, writers, housewives, construction workers and students. Similarly, the health concept of the Chinese may be different from those of other ethnicities, nations and cultures.

Teachers may help students understand their personal needs and development through *Booklet 1 – Personal needs and development across lifespan*. They could facilitate students to explore the concepts of health and its importance from different perspectives and dimensions. In *Booklet 2 – Health and Well-being*, students can investigate what factors influence their own health so as to take on personal responsibilities in cultivating the conditions for personal development of oneself and others..

The topics of Health Management and Social Care Curriculum and Assessment Guide included in the Booklet 1 and 2 are listed in the following table:

Booklets		Topics in HMSC Curriculum and Assessment Guide
1	Personal needs and development across lifespan	<p><u>Compulsory part</u></p> <p>1B: Factors which influence personal development</p> <p>1C: Transitions and changes in the course of the lifespan</p>
2	Health and well-being	<p><u>Compulsory part</u></p> <p>1A: Biological, social, psychological, spiritual, ecological and cultural perspectives and dimensions</p> <p>1D: Factors affecting our health/illness experiences and personal and social well-being</p> <p>1E: The need for and the role of social care in the community and the private sphere across the lifespan</p>

1. Personal needs and development across lifespan

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Learning Targets

By using this booklet, we are expecting students to:

Values and attitudes

- Develop positive attitude towards changes, life events and adversities

Knowledge

- Recognize the lifespan perspectives on physical growth and development
- Identify the features of physical, intellectual, emotional and social development at different stages of life
- Understand the needs and care of people at various stages of life
- Explore how the family, peers, school education and the community influence personal health and development
- Identify and understand the positive factors and risk factors towards personal development
- Understand that transitions and changes across lifespan are inevitable
- Realize that real-life problems often have more than one solution

Skills

- Learn how to deal with life events that affect health and personal development

Key Questions

To achieve the above learning targets, teachers may use the following questions to enhance understanding:

- What are the important features of personal growth and development at various stages of life?
- What are the factors affecting personal growth and development?
- How do human relationships influence personal growth and development?
- How do life events influence personal growth and development?

1.1 Physical growth and development

Physical growth means changes in appearance, body shape and weight. Personal development means changes in one's skills, ability and emotion.

Physical growth is a process of maturation. Every individual has a unique set of genes. Genes are units of heredity information that affects biological characteristics like skin colour, iris colour, hair colour, visual acuity, hearing, coordination etc. Although everyone shares a similar physical growth pattern, their growth and development paces are different. Hence, every individual has a unique growing process.

The physical growth and development of an individual includes four aspects. They are: physical, intellectual, emotional and social aspects.

- Development in one's physical skills: gross motor skills (e.g. running) and fine motor skills (e.g. writing);
- Intellectual development: development of the ability to memorize, reason, analyse and make rational decisions, including language development and cognitive development;
- Emotional development: development of the ability to recognize and express emotions properly, including joy, anger, grief, fear and frustration as well as the development of the ability to cope with stress, worries and depression in daily life; and
- Social development: development of the ability to establish and maintain good relationships with others.

There are a number of life events affecting personal growth and development at different life stages. There are different classifications of life stages. For easy reference and discussion, lifespan is divided into five stages in this booklet. They are infancy, childhood, adolescence, adulthood and old age. At the beginning of each stage, there will be a brief explanation on the range of the age group at each stage.

A. Infancy

1. Physical growth

The World Health Organization (WHO) launched the Child Growth Standards¹ for infants and children up to the age of five. This booklet adopts the same standard advised by the WHO. In general, infancy refers to the period from newborn to 12

¹ WHO Child Growth Standard - <https://www.who.int/tools/child-growth-standards/standards/length-height-for-age>

month-old whereas early childhood refers to 1-5 years old.

Physical growth in the first year is marked by the significant growth in the brain, weight, height, bones, muscles etc. Nevertheless, each child will develop at his/her own pace and it is normal that there will be variations between individuals from a few weeks to months.

- **Length / Height**

Normally, babies grow 2.5cm every month during their first 6-month of life. Then most of them grow 1.2cm every month until 12 months old.

- **Weight**

Generally, an infant doubles his/her weight after several months. By the time a child is 1 year old, his/her weight is generally 3 times the weight at birth.

- **Senses**

The senses like hearing, sight, taste, smell and touch are developed early at the fetal stage of prenatal development. A normal and healthy newborn can see, smell, hear, touch, and taste. Newborns are sensitive to sound, and they learn to recognize and even discriminate the mother's voice soon after birth and they are sensitive to other sounds as well. However, visual acuity of the newborn is fairly poor. They can only focus on an object that is positioned within a short distance from them and can roughly see the shape of the object until they are 6 months old.

- **Head**

During the early years, in particular the first two years, there is significant growth in the size of the head of the babies. The head circumference is an important health indicator for babies. It tells whether the brain of the baby is developing normally. For example, a head that is larger than normal or the size is increasing faster than normal with symptoms like crying, vomiting and spasm etc. may be an indication of hydrocephalus or brain tumor. An exceptionally small head size or slow growth rate with poor motor and language skills compared with the same age group may indicate that the brain of the baby is not developing properly. If the baby does not receive timely and appropriate medical treatment, he/she may suffer from serious health damage.

Most children become slimmer when they reach 4 years old. Although the head is still large compared with the body, their body proportion is much more similar to that of an adult. The skull and brain have usually reached adult size by the time the child is

about 5 years old.

2. Physical skills

Generally, the upper part of the body grows faster than the other parts. A child is expected to learn to control his/her body and its movements. However, each child is unique in his/her growth and development. Social and environmental factors are of equal importance. Children would be expected to share similar development at the following **EXAMPLES** of the stages if they have enough interactions with others and good living and environmental conditions.

- By the end of the first month, bring hands within range of the mouth and eyes;
- By the end of the third month, lift head and chest when lying on his tummy and support his body with both forearms;
- By the end of the seventh month, sit with support of his / her hands or even free his / her arms for short while;
- By the end of twelve months, walk when hands held by adult or may take a few steps on his/ her own;
- By the end of third year, walk up and down stairs without any help;
- By the end of fourth year, stand on one foot momentarily.

More examples on child development are available on the website of Family Health Service Department of Health - <http://www.fhs.gov.hk>

3. Intellectual development

Intellectual development includes language development and cognitive development.

Learning the basics of a spoken language is an important feature of intellectual development during infancy. Infants are usually able to say single words when they are one year old. When they are two, they are able to combine words and express their needs using the words they heard before. They develop their vocabulary, putting words into short sentences and learning a few new words each day. By the time a child is 5 or 6 years old, he/she can learn different expressions directly from adults.

Cognitive development refers to the way in which children develop thinking skills such as the ability to reason, match and use information to solve problems. Cognitive ability gradually improves as an infant grows. Babies who are less than eight months old will not search for a toy which has been hidden from view in front of them.

They do not know that the toy still exists. Instead, they think that the toy no longer exists at all. By the end of infancy, a child will learn that people and objects continue to exist in the world even when they cannot be seen.

How do preschool children learn and think? Their understanding of the world is still mainly based on what they see. Children aged 3-5 like to listen and tell the same story repeatedly. This is important to them as ‘repetition’ is a good learning process.

4. Emotional and social development

- **Attachment**

Attachment is the emotional connections developed between babies and their caregivers.

Attachment needs to develop between caregivers and babies. Babies signal their needs by crying, smiling or other attention seeking behaviours. If caregivers do not engage in the interaction when babies signal their needs, these signals will eventually disappear. However, if the caregivers, in their turn, enter into the interaction with their own repertoire of care giving behaviours, the caregivers and infants will be able to develop a mutual, interlocking pattern of attachment behaviours.

Basically, babies rely entirely on adults, usually parents or caregivers in the first 18 months. Generally, infants can recognize their parents’ or caregivers’ smell and voice about ten days after birth and recognize familiar faces when they are two months old. Babies signal their needs or seek attention by smiling, crying and babbling. Some 1-year-old babies express stranger anxiety when strangers are present and are reluctant to be separated from their main attachments even for a short period of time (separation anxiety).

If an attachment style has been established before 1 year old, the majority of babies will have a sense of security with their family members. Babies or children who are 14-24 months old will be depressed when being separated from their main attachment if they lack the sense of security. These are the ways babies express their attachment needs to parents or caregivers.

Developmental psychologists have studied the ways in which babies form early attachments, involving generally three types:

Secure attachment	<p>Caregivers: are sensitive to the child’s cues can respond quickly and appropriately.</p> <p>Babies: are keen on exploration with the caregivers and build up a</p>
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	sense of security with the caregivers.
Ambivalent attachment	Caregivers: demonstrate a low level of parental responsiveness and are inconsistently or unreliably available Babies: often lack the sense of security, and are anxious in the presence of the caregivers.
Avoidant attachment	Caregivers: reject or regularly withdraw contact with the babies Babies: show no interests in exploration, have no separation anxiety, and avoid contact with the caregivers when they return

On the whole, if babies are being withdrawn from contact with caregivers or could not receive prompt responsiveness from caregivers or are even being abused, they will not establish a good attachment. The quality of these attachments will shape a child's ability to form other relationships later in life. Fortunately, he/she could adapt to the society better if he/she could find a good companion during the development process.

- **Play**

Developmental psychologists suggest that children's play behaviour can provide parents with useful information about their cognitive development, which are divided into a few steps:

The first year	Babies' play mainly aims to satisfy their physical needs. Hence, most of the play focuses on the mouth. Babies then have stronger muscle and therefore increase in strength which enables them to have different movements. Sometimes they produce different sounds and enjoy themselves. At a later stage, babies spend most of their time exploring and manipulating objects, like shaking and moving toys along the floor as well as playing with caregivers.
The second year	Children usually imitate behaviors and activities of others, especially their parents'; they like to repeat others' behaviors. Most children like to play some other roles at this age. They may pretend to be the caregiver or different kinds of animals. Children at this age show great curiosity to their surroundings. They enjoy exploring the surroundings and raise different questions. They also imitate mannerisms and behaviors of adults and playmates. Some young children may imitate the behavior and speech of their caregivers directly.
The third year	Children's play behaviors at this age are mainly related to their families. They begin to take part in and enjoy role-playing games (Socio-dramatic play) like playing house but they often cannot distinguish between fantasy and reality. On the other hand, they like to collect tiny things that can be used for playing.

The fourth year	Children's play behaviors at this age are not only related to family matters, but also other themes such as shopping game, firefighting game etc. Aggressive behavior and rule-governed play are common at this stage.
The fifth year	Children engage in group games that require taking turns, following rules and playing cooperatively with companions most of the time. They usually enjoy role plays with their friends like pretending to be other people such as policemen, salesmen or customers. They are aware of the roles and characteristics of different occupations and they are fond of role plays.

B. Childhood

1. Physical Growth

Children grow steadily. Different parts of their bodies begin to change and strengthen. Some examples of major changes are as follows:

- **Rapid growth of metabolism**

Metabolism can be divided into two aspects: assimilation and alienation. Assimilation refers to the conversion of nutrients into fluid or solid substances of the body by the process of digestion and absorption as well as the storing as energy. Alienation refers to the breaking down of complex molecules, releasing energy and leaving simple molecules. School-age children are experiencing continuous physical growth and development, thus assimilation is greater than alienation. This implies that children should have sufficient intake of nutrients to meet their requirements of normal growth and development.

- **Steady physical growth – height and weight**

The pace of physical change of the human body is slower during childhood than it was in infancy. On average, children grow between 4-5 cm and gain about 2-3.5 Kg in weight each year during childhood until adolescence. At the early school age, boys and girls grow at a steady pace; but at a later stage, girls grow faster than boys.

- **Bones and muscles**

There is relatively less calcium and phosphorous found in the bones of the school-age children which make the bones not strong enough. Deformation of bones is more common than fractures among school-age children. Inappropriate sitting, standing and walking postures will affect an evolving musculoskeletal system. Muscle mass also increases with muscle strength at this stage. However, the development is not yet matured as adults. Hence, special attention must be paid to the load of exercise and

training to avoid strains on muscles and the skeletal system. Children at this stage are very active. Regular and appropriate exercises with healthy eating habits are beneficial to their growth in bones and muscles as well as their respiratory and cardiovascular systems.

- **Deciduous teeth**

Permanent teeth start to erupt when children are about 6 years old. The first permanent teeth to erupt are the 6-year molars. Then deciduous teeth are lost gradually and replaced by permanent teeth, usually in the same order in which they erupted. By the time a child is 12 or 13 years old, he/she should have 28 teeth to replace the 20 deciduous teeth that are lost.

A dental problem, primary caries, is the most common health problem in school-age children today. Children in this group should be aware of oral hygiene to avoid dental caries.

2. Development of physical skills

Examples of physical developmental skills in school-age children are:

- With the sense of balance, they have the confidence to run, climb, jump and even ride a tricycle or bicycle.
- With muscular changes and coordination, they are able to perform activities requiring greater motor skills such as playing sports and musical instruments.

3. Intellectual development

After entering primary schools, children start learning simple calculations. They are also able to use simple reasoning to figure out how things work and why things happen. Their reasoning ability is however still limited. They can work out logical problems only if concrete examples are given. Their judgment is essentially based on their own viewpoints.

Children are able to classify things of the same or similar nature. For example, they could classify real items of different colours and shapes into different categories. They are also able to classify complex and abstract items such as daily necessities with purpose at a later stage.

4. Emotional development

All children need some time to adjust to the changes in the environment. Starting school can be stressful. Children who have good emotional bonds with parents or

caregivers made better adjustments to acquaint themselves with other children and adults. Most children at this stage do not know how to explain their own feelings and emotions as their language and thinking abilities are not fully developed. Nurturing feelings of self-worth and self-esteem are important at this stage. Feeling of being valuable to friends and family is important to children. This will help children develop a greater sense of security.

5. Social development

Children's attachment needs to parents and caregivers is as strong as in infancy. Yet, they no longer cling to parents and caregivers. They learn to be more independent. The nature of the emotional attachments to parents and siblings within the family are vital for the child's personal development.

Examples of social developmental skills in school-age children are:

- By the age of 7, most children engage in same-sex friendship groups. Children like engaging in group games.
- By the age of 10, friendship groups among school children often share the similar attitudes and values. These groups influence the individual child's values, beliefs and behavior.

Cultural beliefs or practices may influence the way how a child develops and experiences friendships. For instance, a child from a culture that does not approve of playing with the opposite sex outside the family may hinder the development of the heterosexual relationships throughout life.



Reference:

Family health Service, Department of Health: <http://www.fhs.gov.hk>

C. Adolescence

1. Physical growth

Adolescence is generally signified by puberty. The related physical changes among youngsters are mainly caused by hormonal activities. The increase in growth rate in adolescence is known as the second growth spurt. Girls of 10 - 13 years old begin to show puberty signs while boys will begin at 12 - 14 years of age. The growth spurt in boys lasts 1 to 2 years longer than that of girls. This explains why men are generally stronger and taller than women.

As a result of increased hormone production, there is rapid growth of the skeletal and muscular systems, leading to changes in height, weights and body shapes among youngsters during adolescence. Physical changes of specific body features and the reproductive system indicate physical maturity of a youngster. Secondary sexual characteristics² of both males and females begin to grow (Please refer to Figure 1.19). For example, auxiliary hair and pubic hair appear. A teenage girl will also find her breasts grow more prominently. Menstruation begins and this indicates that she may be pregnant after sexual intercourse. For a teenage boy, his voice becomes deeper, his testis and penis will also grow to the size like adults. His reproductive organ will produce sperms and he may experience ejaculations.

Adolescents are very self-conscious and worry about how others think of them. Comparison arises between peers.

2. Intellectual development

Adolescents are imaginative and are more able to think about and understand abstract ideas such as morality. They show empathy and understanding that others could have different views and ideas. Yet they tend to believe strongly that their own ideas are much better than others. Piaget called this stage a formal operational stage. Formal logic helps people solve problems at work and in daily life. Although adolescents use



² Primary sexual characteristic refers to the sexual organs of both sexes. Females' sexual organs include: ovary, fallopian tube, uterus and vagina. Males' sexual organs include: testes, scrotum, penis, vas deferens and prostate gland.

reasoning like adults in analysing problems, there is room to improve their problem-solving and decision-making skills.

3. Emotional development

Adolescence is a time of high emotional tension due to the influence of physical and hormonal changes. A majority of adolescents may experience emotional instability resulting from adjustments to new patterns of behaviour and new social expectations. For example, adolescents feel happy when their romances go smoothly but frustrated immediately when things go wrong. When adolescents enter adulthood, they are expected to be much more mature and will be able to control their emotions in a socially acceptable manner. Due to the rapid physical growth and self-consciousness, sometimes they are emotionally unstable and easily aroused. Yet, some of them control their emotion well and express their feelings in a mature way.

4. Social development

When the adolescents become more independent, peers become more influential in shaping their social values, attitudes and behaviour than family members as they learn and develop social skills in peer groups. Adolescents start thinking about how they could fulfil the responsibility at work in late adolescence. When they try to play the roles as adults, it may cause conflicts between an adolescent and his / her family members. Family support is still important at this stage to help adolescents to build a strong sense of self, whereas they keep trying to develop the independence.

Concrete moral development and social responsibility gradually exist among adolescents. Actually, adolescents usually use others' standard for judgment and as the direction for moral development so as to be recognized by others.

D. Adulthood

Adulthood can be divided into early adulthood and middle adulthood. Early adulthood denotes an adult in the age range of 18 to 40 years old whereas middle adulthood denotes an adult in the age range of 40 to 55 or even 60 years old. The legal definition for an adult may differ in different places and countries. In many places including Hong Kong, individuals who reach 18 are considered as adults and are eligible for specific legal rights and responsibilities, for example, voting rights and freedom of marriage even without parent / guardian consent. However, in Germany, individuals who are 16 are already granted voting rights in district council elections whereas the legal age for an adult in Korea is 19 and 20 in Japan.

1. Physical growth

Adulthood is a stage at which an individual reaches physical maturity and it is

generally the longest stage in one's life. In early adulthood, there is little growth and growth signs cannot be as notably observed as in adolescence. In middle adulthood, physical changes in the body still take place e.g. wrinkles, menopause, etc. though these are not signs of growth.

- **Early adulthood**

Physically, the age range of 20 to 30 is the golden period of healthy individuals as their body mechanisms and conditions (e.g. physical power and strengths, brain and body coordination, reproductive organs) are the fittest in general. For adults who are 30 and beyond with an unbalanced diet and are lack of regular exercises, their body fat and muscle ratio will not be in proportion. They are more vulnerable to diet-related disorders. In the case of coronary heart disease, the arteries are narrowed or even blocked by accumulating fat in the form of cholesterol.

- **Middle adulthood**

By the age of 40, there are signs of decline of metabolism and deteriorating body functions. For example, wrinkles appear as the skin lacks collagen and becomes less elastic. For adults who are not keen to have regular exercises and involve mainly in sedentary work (e.g. just sitting in the office and work with a computer) all the time, they would have a gain in their weight and the body fat tends to be accumulated around their waists and hips. This is often known as 'central obesity' as the body contour shapes like 'saddlebags'. Together with a high cholesterol diet or unhealthy eating habits, these adults are more susceptible to chronic disorders like coronary heart disease. On the contrary, regular physical exercise and a healthy diet with sufficient quantities of a variety of fruits and vegetables could help adult individuals maintain good health and prevent chronic disorders and other illnesses.

Menopause are typical for women who are in the age range of 45 to 55 years old, It is the point in a woman's life when she has not had menstrual period. Common symptoms for menopause include irregular periods, vaginal dryness, hot flashes, trouble sleeping (insomnia), mood swings (for example: depression). Men may also experience a similar phenomenon like women's menopause known as Andropause. There are cases of 70 or 80 year-old men who can still become fathers despite the fact that their sperm activity in the testes is minimal.

2. Intellectual development

The intellectual development process is at the peak from early to middle adulthood. Older adults may take a longer time in working out logical problems but it may be compensated by their wisdom accumulated through plenty of experience. This wisdom helps them make better decisions.

3. Emotional development

To search for and establish an intimate and secure relationship is a common preoccupation in adulthood. Individuals in this age group typically choose life partners and begin families; they make decisions about childbearing. Having children often arouses their feelings of love, protectiveness and togetherness. Separation often creates severe emotional strain, stress and depression. The family relationship of childhood may influence their expectation on their partners and thus their family relationship at this stage.

4. Social development

Young adults establish their own social networks in early adulthood such as friends, colleagues and partners, amongst whom individuals typically choose life partners and develop into marriage and parenthood.



At the same time, individuals have to adapt to different roles and relationships, such as being a partner, parent and an employee. In order to earn a living, the long working hours and the great demand from job leave the adults struggling to make a balance between family and work.

Hence, some adults choose to get married later in their life or not to do so as the priority is given to personal development and careers.

E. Elderly

Life cycle is a process that takes place gradually. The boundary between adulthood and elder persons is often blurred and varies from person to person. Different cultures also have different definitions of elder persons. Some people think that being a grandfather or grandmother is a milestone of entering into elder persons, while others think that retirement is the milestone.

elderlyelder personselder personselder personsWHO proposed that people who are beyond 60 years of age could be considered as the elder persons. Individuals who are beyond 60 are eligible to apply for the Elder persons Persons Priority Scheme for public housing. As for social welfare services like the Senior Citizen Card Scheme and Old

Age Allowance, medical service like Elder persons Health Service, they are provided by the Hong Kong government for adults who are 65 years old and beyond. The normal retirement age of Hong Kong civil servants could be 55 or 60 depending on the type of pension scheme the staff has opted for. According to the new pension scheme, the retirement age for staff of disciplined services is 55 or 57. Elder persons Elder persons With technological advancements and improved health care, life expectancy is longer than before. The retirement age is thus extended in some places.

1. Physical changes

For the elder persons, there are physical changes to the body systems and signs of deterioration in terms of vision, hearing, smell and taste, eye-hand coordination and the like. The pace and response of elder persons people tend to be slower than youngsters.

The following are some examples:

- Wrinkles on the face with thin and discoloured skin
- Grey hair
- Teeth decay with chewing difficulties
- Hearing and eyesight problems
- Taste and smell receptors deteriorating
- Bones being easier to break and fracture, especially female
- Bending over
- Lower physical responses and decline of physical abilities
- Being harder for the body to keep warm



The rate and degree of physical decline differs from person to person. Some elder persons could be physically active and maintain healthy conditions for their five senses, bodies until their 80s or 90s. A balanced diet with extra iron, calcium and vitamins and regular physical exercises would be important for the elder persons to maintain health.

2. Intellectual development

Some elder persons may become less able at solving problems and coping with intellectual challenges due to their deteriorating health. However, the elder persons with good health often retain their mental abilities and are able to make sensible decisions and judgements.

The risk of getting into dementia such as Alzheimer's disease increases in advancing age. There are different types of dementia: in general, they cause a range of disabilities such as loss of memory, difficulties in recognizing people, places and events.

Besides generic factors, unhealthy lifestyles such as heavy drinking and smoking will increase the risk of dementia.

3. Emotional development

Ageing is a continuous process of growth and adaptation, including personality development and the change of intellectual development. This is a learning and interacting process where experience could be accumulated from different aspects of life.

Retirement can create emotional impact on the elder persons. Some of them have a positive attitude towards retirement, spending more time with people and enjoying life. However, some of them lose their self-confidence and self-esteem. Sadly, some are stereotyped by others as useless or a burden of the family. The misconception of others has adverse effects on their emotion and self-esteem.

4. Social development

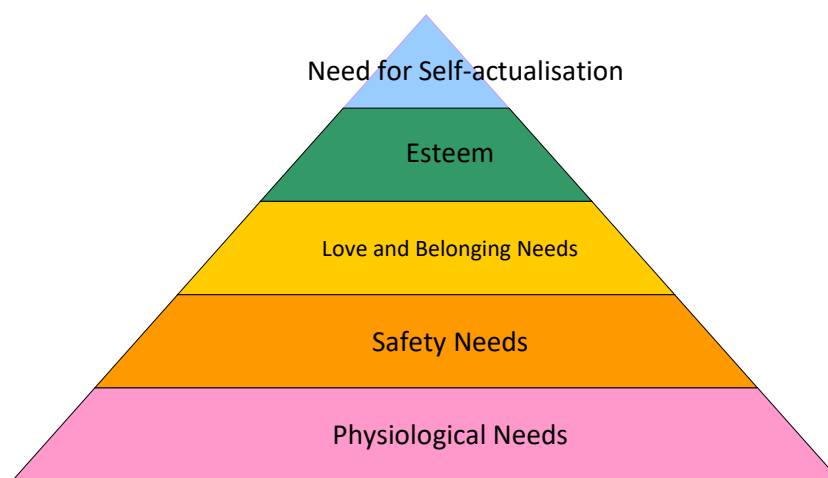
Some elder people spend most of their time on taking care of grandchildren and young members in the family. Retirement provides them an opportunity to establish new social relationships and expand their social network. However, some who are disabled or have poor health condition may not be able to maintain a healthy social life, resulting in social isolation.

1.2 Human needs

Physical growth, personal adaptation and development are different across the lifespan. Individuals have different needs at different stages of life. We should first learn what ‘needs’ means before our discussion on this topic.

A. Basic human needs

Abraham Maslow, the American psychologist, advocated a hierarchy signifying human needs. There are five levels of needs, namely: physiological needs at the very bottom level, safety needs at the second level, love / belongingness at the third level, esteem needs at the fourth level and self-actualisation at the top level.



Maslow's Hierarchy of Human Needs

Physiological Needs	Physiological needs include needs for food, water, air and shelter. They are essential for survival. Until physiological needs are met, no other need will be prominent. For example, one won't be interested in anything except food when he/she is hungry.
Safety Needs	Safety needs include the need for comfort, avoidance of pain, diseases and threats, no harms done to the body and life, the feeling of being secure and safe. Similar to physiological needs, this is the need that people will only focus on before achieving other needs.
Love and Belonging Needs³	Love and belongingness are human social needs. The sense of belonging and the feeling of being loved by others are contributing factors to forming / shaping the character / personality of

³ Or Love and Belongingness Needs

	individuals. This could also be a drive to individuals and help them to attain esteem needs in the next level.
Esteem Needs	Esteem needs are the need to feel better (or even superior) than other people in certain aspects, such as being valued by others, gaining respect from others. To satisfy esteem needs, an individual needs to have self-confidence and self-respect in the first instance.
Need for Self-actualisation	The goal of self-actualization needs is the realization of one's potential. An individual would strive to do the best and stretch his / own potential to the full for noble reasons (e.g. virtue, bravery) rather than for materials things (e.g. money, status) when other levels of their needs are fully satisfied. Self- actualized people are more open, considerate, tolerant and willing to accept different viewpoints. A person who has reached the state of self-realization accepts himself as well as others.

Maslow's hierarchy of needs suggests that people would first need to satisfy their basic physiological needs before they would seek to satisfy other levels of needs. For example, thirsty and hungry persons would look for something to eat and drink, refugees will look for some safe places for shelter before thinking of dating and marriage. People feel satisfied psychologically if they live comfortably, safely and enjoy a quality life with his / her loved ones and good friends.

B. Needs at different stages across lifespan

The following table lists some examples of specific needs and related care and services for different stages of individuals:

Life Stages	Specific Needs	Related Care and Services
Infancy	<ul style="list-style-type: none"> Regular checks of pace of physical growth and intellectual development by professionals to keep track of health conditions of the infant. Early identification, intervention and appropriate care will have a better chance of fixing the problem. 	<p><u>Health Assessment</u></p> <ul style="list-style-type: none"> A routine check up for newborns in maternal & child health centre usually includes the measurement of head circumference, height (the ratio is used to determine whether the growth is normal) and weight (this is used to determine whether the infant suffers from malnutrition or overweight). The

Life Stages	Specific Needs	Related Care and Services
		<p>measurement of an individual will be used to compare with the local or international standard. A comprehensive assessment or referral will be carried out if the difference is significant.</p>
	<ul style="list-style-type: none"> • Infants are more vulnerable to infection as their immune systems are not fully developed. Immunisation could help to protect infants from infectious diseases. 	<p><u>Immunisation</u></p> <ul style="list-style-type: none"> • Immunisation is the process whereby a person is made immune or resistant to an infectious disease, typically by the administration of a vaccine. • Newborns have low resistance to infectious diseases and the vaccines in the immunisation could help to stimulate the body's own immune system and protect babies against subsequent infections or diseases. Some vaccine boosters should be given at intervals to maintain immunity because the effects of some vaccines decrease with time. <p><u>Example of Services:</u></p> <ul style="list-style-type: none"> • Hong Kong Childhood Immunisation Programme • Influenza Vaccination Subsidy Scheme

Life Stages	Specific Needs	Related Care and Services
	<p><u>Safety</u></p> <ul style="list-style-type: none"> • Due to curiosity and explorative behavior, infants are prone to accidents especially when they learn to walk and explore the surroundings. Accidents are the leading cause for injury and death of children at this age. 	<ul style="list-style-type: none"> • Constant supervision is essential in both indoor and outdoor places as children, led by their curiosity, are incapable of recognizing danger and threats. <p><u>Example of Service:</u></p> <ul style="list-style-type: none"> • Social Welfare Department – Occasional Child Care Services
Childhood	<p><u>Nutrition</u></p> <ul style="list-style-type: none"> • Establishing good eating habits is necessary during childhood as this will impact a person across lifespan. • Special diets that are rich in protein and calcium are essential for rapid growth at this stage. 	<p>It is important to provide children with the appropriate amount of food from various categories in the food pyramid. Children particularly need food that allows muscle development and mineralisation of bones. <u>Example of Services:</u></p> <ul style="list-style-type: none"> • “eatSMART@.school.hk” campaign
Adolescence	<p><u>Emotional Health</u></p> <ul style="list-style-type: none"> • Comparatively, emotional needs are prominent at this stage. They are experiencing emotional ups and downs due to the influence of hormonal change. With stress, their emotion will be aroused. • As adolescents start with separation from family and become an individual, they explore and learn different values and develop self-concepts. The need for parental love, support and guidance conflicts with the desire for independence, and this creates what is known as ambivalent 	<ul style="list-style-type: none"> • Parents should allow and encourage adolescents to think independently and express their opinions, share their feelings and worries. • In order to seek for related treatments or services for helping the adolescents, parents may search information through hotlines or from the libraries, or seek professional advice. <p><u>Example of Services:</u></p> <ul style="list-style-type: none"> • Social Welfare Department and Hospital Authority: <i>Child & Adolescent Mental Health Community Support Project</i>

Life Stages	Specific Needs	Related Care and Services
	<p>feelings.</p> <ul style="list-style-type: none"> Like adults, adolescents may experience mental health problems that interfere with their way of thinking, feeling and behavior. When leaving untreated, the problems may lead to school failure, family conflicts, drug abuse, violence and even suicide. 	
Adulthood	<p><u>Changes in body systems</u></p> <ul style="list-style-type: none"> Adulthood is the life stage at which human beings reach physical maturity and physical growth is completed. The onset of menopause will lead to physical decline. In early adulthood the human body reaches a state of being fully-grown. This is the phase in the life course when most people are at their physical peak such as their cardiac output. From early adulthood onwards towards maturation, the ageing process takes over such as the metabolism rate and energy output decline but fat ratio increase. The risk of chronic disorder increases in advancing age leading to cardiovascular diseases (Hypertension, Coronary Heart Disease) as well as Diabetes Mellitus. 	<ul style="list-style-type: none"> Research has shown that weight control, a healthy lifestyle and prevention of accidents help to promote wellness in the later years despite the gradual slowing down of the body's metabolic process. <p><u>Example of Services:</u></p> <p>There are some programmes for promoting health in adulthood, such as:</p> <ul style="list-style-type: none"> Men's Health Promotion Programme Cervical Screening Programme Eatsmart@restaurant.hk Campaign

Life Stages	Specific Needs	Related Care and Services
	<p><u>Mental Health</u></p> <ul style="list-style-type: none"> Goals at this stage include establishing and adjusting to new family roles, securing economic stability for the present and future, maintaining a positive self-image, and evaluating or redesigning career options. These goals can induce a great deal of stress on adults. 	<ul style="list-style-type: none"> Strategies in promoting mental wellness, appropriate stress management and social supporting network are essential. <p><u>Example of Services:</u></p> <ul style="list-style-type: none"> The Mental Health Association of Hong Kong Mental Health First Aid Course
<p>Elder persons</p>	<p><u>Prevention of Falls</u></p> <ul style="list-style-type: none"> Decline in auditory and visual acuity, gait changes, and problem of neurological disorder will increase the risk of falling. <p><u>Prevention of Injuries</u></p> <ul style="list-style-type: none"> Dryness and loss of elasticity make the elders' skin fragile and become more prone to injury. Healing of wounds is slow at this stage. 	<ul style="list-style-type: none"> Knowledge of home safety should be learnt at this stage, including getting up slowly, avoiding hot showers which may lead to dizziness. Environment with adequate lights, non-slippery floor, stable foot-step for climbing up, no obstacle in walking path, secured chair with arm-rests are essential. <p><u>Example of Services:</u></p> <ul style="list-style-type: none"> Social Welfare Department: Services for the Elderly Department of Health: Elderly Health Service

1.3 Theories of development

Psychologists have adopted different theories to explain the developmental change across lifespan. Every theory has its own strengths in explaining developmental changes at different stages throughout life.

A. Cognitive development

Psychologist – Jean Piaget suggests that cognitive development in childhood evolves in four stages. Operation refers to logical thinking and assimilation, applicable to environment adaptation and problem solving skills.

Approximate Ages	Stage	Features
0-2	Sensorimotor	The baby understands the world through his/her senses such as vision, hearing and touch, and motor actions such as sucking.
2-7	Preoperational	The child can use symbols both to think and communicate, is able to understand immediate situation and explain the reason of an action. He/she is self-centered. Use personification to understand and explain things.
7-11	Concrete operational	The child begins to think logically and becomes capable of solving problems. However, these abilities are confined to things that he/she could see in daily life. They could not think through imagination of things which they have not encountered before.
11-16	Formal operational	The child / teenager begins to manipulate ideas and think hypothetically. He/she can manage a variety of “what-if” questions, analysis and recall of things. They are able to manage abstract ideas and logical thinking as well.



B. Psychosexual development

Psychologist Sigmund Freud proposes a series of psychosexual stages. At each stage, the libido is centered on a different part of the body.

He divides the personal development into five stages.

Approximate Ages	Stage	Features
Birth to 12-18 months	Oral Stage	Mouth is the principal source of pleasure. The infants derive pleasure from sucking, biting and swallowing. It emphasizes on the satisfaction derived from oral activities.
12-18 months to 3 years	Anal Stage	Defecation ⁴ produces pleasure but with the onset of toilet training, children have to learn to postpone or delay the pleasure generated from defecation, i.e. capacity for self-control.
3 to 5-6 years	Phallic Stage	The focus of pleasure shifts to genitals. The basic conflict centres on the desire of the child for the parent of the opposite sex (the Oedipus Complex).
5-6 years to adolescence	Latency Stage	The sex instinct is dormant at this stage and is temporarily sublimated in school activities, hobbies and sports as well as developing the friendship with the peers with same sex.
Beyond adolescence (Beyond 13 years)	Genital Stage	The body is becoming physiologically mature. The adolescents must conform to societal sanctions and taboos that exist concerning sexual expression. The sexual desires suppressing for expression in the teenage years can be partially satisfied through the pursuit of socially acceptable substitutes and later, an intimate relationship with partner.

⁴ The term is given for the act of expelling feces from the digestive tract via the anus

C. Psychosocial development

Psychologist Erik Erikson proposed eight psychosocial stages in lifecycle which has different developmental tasks and crises. To achieve a healthy personality, an individual must successfully resolve a crisis at each of the eight stages of development. Each crisis is defined by a pair of opposing possibilities that provide opportunities to develop our basic strengths. Successful resolution of a crisis, i.e. the developmental task achieved, results in the emergence of the basic strengths. If the crisis is unresolved, i.e. the developmental task not achieved, it will hinder the development of later stages, and the subsequent development will be adversely affected. The development of the previous stage becomes the basis for the development of the next stage.

Approximate ages	Stage	Developmental task / Crisis	
		Successfully resolved	Unresolved
Birth to 1	Trust versus mistrust	If the caregivers respond appropriately to the baby's physical needs and provide affection, love and security, infants may develop a sense of trust.	If the caregivers are rejecting, inattentive or inconsistent in the care giving, the infants may develop mistrust and become suspicious, fearful and anxious.
1-3	Autonomy versus shame and doubt	Children are able to exercise some choice and to experience the power of their autonomous will that helps build self-confidence.	When the caregivers frustrate their children's attempts to exercise independence, e.g. in toilet training, the children may develop feelings of self-doubt and a sense of shame.
3-6	Initiative versus guilt	The children have a strong desire to take initiative in many activities. If the caregivers guide them with love and understanding, the children will acquire an awareness of what is permissible behaviour and what is not. The initiative can be channelled toward realistic and socially acceptable behaviours.	If the caregivers punish the children and otherwise inhibit the displays of initiative, the children may develop persistent guilt feelings that affect self-directed activities throughout their lives.

Approximate ages	Stage	Developmental task / Crisis	
		Successfully resolved	Unresolved
6 - puberty	Industry versus inferiority	The children learn industrious work and study habits as a means of getting praise and satisfaction from successfully completing a task.	If children are scolded, ridiculed or rejected, they are likely to develop feelings of inferiority and inadequacy.
Adolescence	Identity versus role confusion	Adolescents have a strong sense of self-identity and are equipped to face adulthood with certainty and confidence.	Adolescents exhibit a confusion of roles. They do not know who or what they are, where they belong, or where they want to go.
Early adulthood	Intimacy versus isolation	Adults have the feelings of caring and commitment and display the emotions openly. They can merge the identity with someone else' without losing it in the process.	Adults who are unable to develop intimacy and develop feeling of isolation when they avoid social contacts, reject other people, and even become aggressive toward them.
Middle adulthood	Generativity versus stagnation	Adults are actively involved in teaching and guiding the next generation.	Adults who cannot or will not find an outlet for generativity are overwhelmed by emotional difficulties such as stagnation, boredom.
Elderly	Integrity versus despair	Elder persons look back with a sense of fulfillment and satisfaction, believing that they have coped with life's victories and failures. They possess ego integrity.	Elder persons review their lives with a sense of frustration, angry about missed opportunities and regretful of mistakes that cannot be rectified, then they will feel despair.

D. Moral development

Psychologist Lawrence Kohlberg focuses on the thinking process in which people decide whether a behaviour is right or wrong, i.e. how one decides to respond to a moral dilemma, rather than what one decides or what one actually does. It consists of six stages and three general levels of moral development. The three levels are based on social conventions. Convention refers to social norms and judgment as behavioral expectations and cues within the society. The three moral levels represent the direction of development of moral reasoning, and each level contains roughly two stages, and the six stages of the three periods develop gradually in a sequential order.

Level	Moral reasoning	Stages	Decision-making
Pre-conventional	Rules imposed by authority are conformed to in order to avoid punishment or receive rewards. They concentrate on personal benefits and satisfying his/her own needs.	Stage 1 Punishment-obedience orientation	<ul style="list-style-type: none"> Determined by consequences - obey in order to avoid punishment.
		Stage 2 Instrumental-relativist orientation	<ul style="list-style-type: none"> Determined by consequences - focuses on receiving rewards or satisfying personal needs
Conventional	Rules or norms of a group to which the individual belongs become the basis of moral judgments. Individuals support the rules that are set by parents, peers, and the government in order to win their approval or to maintain social order..	Stage 3 Interpersonal-concordance orientation	<ul style="list-style-type: none"> Determined by social approval - wants to maintain or win the affection and approval of others by being a "good boy / girl."
		Stage 4 Authority and social order-maintaining orientation	<ul style="list-style-type: none"> Determined by social rules and laws - believes that rules and laws maintain social order that is worth preserving.

Post-Conventional	An individual moves beyond the perspective of his or her own society and makes choices based on abstract principles and values that apply to all situations and societies.	Stage5 Social-contract legalistic orientation	<ul style="list-style-type: none"> • Determined by individual rights - right action is a matter of personal values and opinions with the possibility of changing the law in terms of rational considerations of social utility.
		Stage 6 Universal ethical principle orientation	<ul style="list-style-type: none"> • Determined by one's self-chosen ethical principles of conscience. These are universal principles of justice, of the reciprocity and equality of the human rights, and of respect for the dignity of human beings.

1.4 Self-concept and interpersonal relationships

Educationalists and psychologists continue to explore the rationale of the difference in growth and personal development among the same age group. It is believed that self-concept and interpersonal relationships are the two major areas across the growing process.

A. Self-concept

It is widely accepted that self-concept plays an important role in growth and personal development. Self-concepts can be divided into three dimensions:

- *Self-image* – how one perceives and understands oneself. This may be affected by family and cultural background.
- *Ideal self* – a person that one would like to be. This may be influenced by the media, parents, teachers and peers.
- *Self-esteem* – how one feels and judges oneself. This can be affected by several factors such as comparison of self-image and the ideal self, judgments or comments about oneself and his/her social identity by others.

It is believed that the perception of self is not innate but is formed in a process of communications with others. Hence, the perception of self is developed through the interaction with others.

An American sociologist Charles Horton Cooley suggests the concept of looking-glass self. He thinks that the capacity of reflection on one's own behavior is limited and there is a problem of objectivity. Hence, other people's views build, change and maintain our self-image. It is through interaction that we arrive at how we see ourselves and how others see us. According to Cooley, the looking-glass self involves three steps:

- Imagine how others see us
- Perceive how others criticize us
- How we feel towards the criticism by others

A significant other is any person who has great importance to an individual's life or well-being. Self-image can be greatly affected by the significant other. For example, adolescents like to please others whom he/she can rely on. A significant other can be parents, teachers, neighbors or celebrities; his/her behavior, values, roles and actions become the standard of reference for one's growth.

B. Interpersonal relationships

Interpersonal relationship can be the source of happiness, which affects one's self-esteem in a positive way. On the contrary, it can create emotional upheaval and pain, which affect one's self-esteem in a negative way.

There are different kinds of interpersonal relationships in one's life, namely, parent-child relationship, sibling relationship, friendship, courtship and working relationship. Relationships are constantly changing in different stages of life. For example, parent-child relationship is very close in infancy and early childhood as children have strong needs for parents' affection. People engage in a sibling relationship with the presence of siblings. Adolescents need to establish autonomy and independence from parents due to the needs of intellectual, social and emotional development. It is likely that this involves shifting the focus of social relationship and emotional attachment from parents to peers. Moreover, the quality of interpersonal relationship also strongly affects the self-concept of an adolescent.

	Good relationships can produce:	Poor relationships can produce:
Infancy	<ul style="list-style-type: none"> • Secure attachment between the infant and parents • A rich learning environment • A safe living environment which meets a child's emotional needs 	<ul style="list-style-type: none"> • A failure to establish a secure attachment bond with infants • Infants are being neglected and rejected
Childhood	<ul style="list-style-type: none"> • Parents who can cope with stressful behavior of children • Friendships with other children • Being independent • Being confident • Being able to deal with things 	<ul style="list-style-type: none"> • A stressful situation at home • Inconsistent approaches to teach their children • Parents who are emotionally unstable and depressed • Isolation from other children • No sense of belonging • Feeling of inferiority
Adolescence	<ul style="list-style-type: none"> • Independent but still need the support of the family • Good social network and a sense of belonging • Fostering hopes for the future in a positive environment 	<ul style="list-style-type: none"> • Conflicts and arguments with parents • Being depressed and rejected with weak social network • Weak sense of identity • Feeling life is not worth living
Adulthood	<ul style="list-style-type: none"> • Support and help from friends and family • A secure and intimate relationship • Able to manage and balance the pressures among work, partner and family • A feeling of being secured and safe with support from others 	<ul style="list-style-type: none"> • Feelings of loneliness, isolation, rejection and without the sense of belonging • No social protection from stress • Low self-esteem
Elderly	<ul style="list-style-type: none"> • Emotional support from friends, partner and family • Being able to control his/her life • Meaning of life 	<ul style="list-style-type: none"> • Lack of social support and friends • Isolation • No meaning of life

1.5 Factors influencing self-concept and interpersonal relationship

Everyone has to use his/her inborn talent and abilities to learn life skills, communicate with others and control one's emotion in different stages of life; leading to developing positive attitude and values and adapting to society's circumstances such as new life, sickness, ageing, death and some unexpected events like natural disasters.

The physical and mental development of oneself, including self-concept and interpersonal relationship, are influenced by people, such as relatives and peers, things or environment, such as social network, family background, culture, religion, education etc. around him/her. Hence, each person has a unique way of growth, development and experience.

The following is the discussion on how self-concept and interpersonal relationship are influenced by family, education, peer groups and community.

A. Family

Socialisation is the lifelong process of acquiring values, skills and behaviours expected of individuals as a member of a particular society / community.. It plays an important role in how attitudes, beliefs and values are developed and personalities are formed and shaped.

There are three different types of socialising agents:

- *Primary Socialising Agents – family, with parents, siblings and relatives*
- *Secondary Socialising Agents – friends or peers outside home*
- *Tertiary Socialising Agents – other formal groups in the society*

Through socialisation, people understand their roles and others' expectations on them in the culture they grow up.

Family is a social group linked by consanguinity or marriage. As a socializing agent, family has a distinct role to develop one's identity, self-esteem, resilience and affection. It is a gradual process reflecting on how family interaction allows family members to develop their identity and realize how their unique characteristics are linked to those of others. Self-esteem is first built by parental approval and acceptance. The family is expected to provide nurture – love, care and attention to each of the members. In fact, a family offers unconditional acceptance, love and emotional support for the members. These unconditional acceptance, love and emotional support are valuable conditions for health and development, especially during infancy and childhood as the needs for security and attachment are important at such stages.

Family nurturing characterized by a high level of mutual trust, affection and warmth provides a positive climate to promote children's empathy for others, good interpersonal and communication skills. On the contrary, children who grow up in a family characterized by high levels of distress report more unpleasant physical symptoms. Frequent quarrelling and fighting at home is found to be linked with unpleasant physical symptoms and have chronic and adverse effects on childhood, adolescence and young adulthood.

B. Education

Schooling is a major milestone for personal development. Schools act as another socializing agent apart from the family. The idea of self-concept is strongly influenced by experiences at school, which will influence the concepts of attractiveness, popularity, ability and intelligence. From kindergarten to tertiary education, the experiences learnt may affect the beliefs that have been formed during primary socialisation.

Education influences us because:

- People usually compare with the same age group. People hope to involve in social activities. Being accepted by others, one increases his/her confidence and positive feelings about others. If one is being ignored or isolated, he/she may feel he/she is not valuable at all.
- The results of assignments and examinations, either academic or non-academic, have great impact on how we think about ourselves. When one is aware of his/her strength, he/she will be motivated and spend more time on it in order to achieve better results. However, when one perceives oneself as inferior, he/she will give up easily.
- Theories and values that we have learnt from school enable us to understand life. For example, socialisation, self-concept and quality of living help us develop attitude towards life and interpersonal relationships.

How parenting styles affect the self-concept among adolescents

Most parents will not decide beforehand which type of parent they want to be unless they make a conscious decision to raise their children in a different way as their own parents did. Though there are different kinds of parenting styles, the majority of parents are willing to provide great care to their children and give them the best. The following is a discussion on parenting styles. As teachers and schools are socializing agents, which influence the physical and mental development of adolescents, these topics will be combined for discussion in this booklet.

An American developmental psychologist Baumrind suggests a three-fold classification of parenting, describing how parents fulfill the needs of children during nurturing and teaching. Later, some psychologists and researchers further divide the classification. They propose two dimensions: parental demand and parental responsiveness, which is also called parental control and parental warmth.

The two-dimension system is divided into the vertical part and horizontal part. There are four areas, that is, four types of parenting styles, namely, Authoritarian (High Demand, Low Response), Authoritative (High Demand, High Response), Permissive (Low Demand, High Response) and Neglecting (Low Demand, Low Response).

High	Authoritarian	Authoritative
Low	Neglecting	Permissive
Demand Response	Low	High

- **Authoritarian** – high levels of demand and control but relatively low levels of warmth and communication. Parents focus on obedience and status-orientation. Children are expected to obey without explanation. Children are grown up in an orderly environment with a clear set of regulations. All of their daily activities are monitored. Reciprocal verbal dialogue is discouraged. Children may show high self-expectation and work hard continuously but could not enjoy life. Some children have difficulty in adapting to the environment, as they are overly dependent on parents. Some are poor in expressing themselves due to being overly obedient. People from authoritarian families have more negative self-concepts and a stronger sense of inferiority.

- **Authoritative** – high levels of both control and acceptance – setting clear regulations but also responding to the child’s individual needs. Parents are assertive but not intrusive or restrictive. Their disciplinary methods are supportive rather than punitive. Children are taught to be socially responsible, self-regulated as well as cooperative. Research states that children reared in such families typically show better logical thinking, are achievement oriented and cope better with demands of school. The parent-child relationships are better. Their style of teaching is active, democratic, interactive, higher level control as well as warmth. Authoritative pattern is associated with most of the positive outcomes that are advantageous to the physical and mental development of children and adolescence.
- **Permissive** – parents are responsive but with relatively low levels of control. This is different from the traditional type of parenting . Parents are lenient. Children are not taught to be mature. They adjust to the environment freely and avoid confrontation. Children growing up with indulgent or permissive parents are more self-centered and not able to finish work under supervision. However, some children who are reared in such families are easily satisfied. They are able to explore the surroundings and improve their thinking skills as well as observation.
- **Neglecting** – parents are neither demanding nor responsive. This type of parenting is not common. Regulations are not established and children are not monitored. Parents are not supportive and even actively reject and neglect their responsibilities of rearing children. Since a sense of security is important among children, this type of parenting has adverse effect on the child’s sense of security. Some parents do not listen to their children or neglect their hygiene. Some show no response to things that their children are interested in. Some even leave their children alone at home when they engage in other social activities. Irrespective of the degree of neglecting, this type of parenting has adverse effect on children’s emotional development. This eventually influences the dietary habit, sleeping pattern, dressing and other daily habits. Research states that children’s physical and intellectual development will be hindered if they cannot obtain parents’ support and protection. Youngsters from neglecting families are not concerned about their own growth and development. They are less competent with their peers and easily give up so that they are unable to enjoy the sense of achievement after finishing a task.

C. Peer groups

Peer is important in the socialisation process. Peer group is a collection of people who share common characteristics or background. Adolescents learn different roles and

identify with the norms and values of the group. For example, people whose ages are similar, usually belong to a peer group. Adolescents are sensitive about fitting in the peer group. They are under substantial pressure for them to appear, act or behave in peer-approved ways.

Peer groups allow an individual to express their ideas and understand others. Research states that peer support could bolster emotional stability and needs, which is also associated with a lower level of depression; whereas people without peer support are prone to feeling depressed.

D. Community influence

Everyone lives in a different community. Community refers to a system with physical, geographical, personal and social network. People are influenced by others and the surroundings in the community. Interactions between people and their environment provide a dynamic force that creates the community characteristics which in turn influence the personal growth of people in the community.

The environment affects the intellectual, social and emotional development on a person. For example, Tin Shui Wai, a new town located in the northwestern part of the New Territories, is relatively a remote area. The majority of residents are far away from their relatives and this eventually affects the affective attachments and social bonds of their family members and friends. It is believed that if social bonds and care are encouraged in the community, the sense of belonging to the community, social network and personal mental health will be positively developed among individuals.

In the modern society, the concept of care is changing. The concept of prevention has been enforced to promote personal growth and development. Health and social care services that are provided by the community is a mean to enhance personal health development. The aim of these services is to enable residents to choose the health and social care services according to their own needs and eventually promote their personal development.

E. Society as a whole

With technological advancement, the mass media have become a dominant socializing agent. They include television, movies, the Internet, newspapers, magazines and advertisements. Information is easily passed through the media. Different modes of media can have different ways to reach different types of audiences. Thus, the mass media have a significant role in promoting views and disseminating information. It is

also a powerful platform for sharing ideas as well as serving as a local and international mouthpiece for many organisations. They can be used to promote personal development to:

- Raise public awareness, e.g. providing information about healthy lifestyles; and
- Create a climate of opinion sharing conducive to policy change and implementation.

The mass media, especially television, which provides many symbols, information and models for people to construct their concept of social reality, can influence one's values, thinking and attitude. Hence, when people constantly seek information from the mass media, they are more likely to learn socially desirable behaviors.

1.6 Effects of life events on personal development

Life events refer to life experiences or events that have positive or negative effects on personal development. These events can be anticipated or unanticipated. It may be positive or negative. People have different life events throughout their life cycle. For example, education, work and retirement are experiences that are anticipated, whereas accidents and illnesses that lead to disable or death are said to be unanticipated life events. Irrespective of whether the life events are anticipated or not, people should learn and prepare themselves to cope with different changes.

A. Anticipated life events throughout life

The term “anticipate” refers to an individual who has the ability to control and manage the changes. For example, if an individual perceives his/her life as boring, he/she may want to change the existing status such as relationships, working environment or going on a trip. These may be ways of releasing tension, getting ready for the new challenge and creating excitement and motivation. Some anticipated life events are unavoidable throughout one’s life cycle:

1. Childhood and adolescence : Education

Going to school is one of the predictable life events for all children. Schooling is a great change in children’s life during childhood. It means a child is moving from the parents’ support to a wider social setting – the school. Pre-school children may receive education from playgroups, nurseries or kindergartens. However, the settings are quite different from primary school in terms of demand, duration at school and student-teacher ratio. Hence, the majority of children experience stress and are frightened when they enroll for primary education.

Transition in the educational environment is a life challenge, such as when children are promoted to secondary education. Not only do adolescents need to adapt to the social and environmental changes, they also have to adapt to the different academic requirements during the transition. For example, stress may come from the change of medium of instruction (Chinese to English) in the interface between primary to secondary education.

Moreover, since the society is constantly changing, there are many factors in school that affect the growth among children and adolescents. For example, peer pressure, the culture of competition, the desire to be different, the lure for taking risks and the adaptation to new schools will produce stress and challenge to children and adolescents.

2. Adulthood : work –starting/ transfer/ promotion/ resign

Starting work is a key milestone in one’s life. It represents the transition from adolescent to adulthood and a person has to be responsible and independent. Most adults work, and working makes possible personal, social, cultural and financial survival. In terms of personal development, a person has to fulfill different requirements once he/she starts working. Thus, he/she has to acquire different skills such as time management and communication skills. Hence, starting work is an important life event in one’s lifespan.

Different working roles will affect a person’s sense of identity. In the society, people often judge a person on his/her nature of work, position and salary. Achievements can enhance one’s value, creativity and respect by others. On the other hand, work can be stimulating and challenging but also boring. Hence, being transferred, promoted, resigned or retired are considered as critical milestones in the working cycle as well as life events of an adult.

3. Elderly : retirement

Work allows people to develop their own identity, self-esteem as well as financial rewards. Some people who are in late adulthood continue to work and postpone retirement, which is regarded as discontinuation of one’s working role and which will cause a change in lifelong habits. Some people develop a sense of self-worth from work. Although they may have thought of having more leisure time when they were young, they may find retirement less appealing as the time approaches. Even with preparation and planning, retirement is an evolving process with different responses in different phases. These include:

Phases	Response
Remote phase	It involves a period of denial in which the individual has prepared little for the process.
Near phase	A person starts planning.
Honey-moon period	A time of euphoria, people try to do all the activities that they have not done in the past.
A sense of disenchantment	Sometimes it occurs as reality sets in, and individuals may strive to come to terms with their expectations.

Phases	Response
Reorientation phase	Individuals must re-establish goals and change their lifestyles.
Stability phase	This involves adjustments to reality.
Terminate phase	The person resumes work or becomes ill or disabled.

(Source: Polan, E.U., & Taylor, D. R. (2003). Journey across the lifespan: Human development and health promotion. Philadelphia: F.A. Davis Company)

B. Unanticipated life events throughout life

Some life events are unanticipated. For example, accidents, being laid off, illnesses and breaking up in relationships are categorized as unanticipated life events. All these events may imply loss that influence one's health and growth.

Grief – is a response to loss. This includes loss of a person, relationship, job, pet or anything which is important to their daily living. Persons who have lost a child, husband, wife or partner may find it particularly difficult to cope with the painful process of grief.

The process of grief often goes through different stages, such as :

- **Shock and disbelief** — “it must be someone else, it is not true.” A person might feel numb, shocked and locked into a state of isolated disbelief.
- **Denial** — the bereaved person behaves in an unreal way. They live as though the person has not died or as if they did not lose their jobs. This stage may last for a few hours or days.
- **Despair** — there is a growing awareness of what has happened. The person is filled with longing to know the reasons. There may be feelings of depression, guilt and anxiety, which are mingled with despair. A sense of unfulfilled dreams adds to the feelings of despair. During this stage, an individual needs care and support, including listening and allowing the person to express their anger and feelings of deep pain.
- **Acceptance** — the person begins to pick up the aspects of life and learns to live with the loss he/she has suffered.

It is important to remember that the timescale between each stage will depend on the loss and the circumstances of that loss.

1. Illnesses leading to disabilities

Illnesses leading to disabilities such as chronic illnesses - Diabetes Mellitus and Nephrosis are critical life events for individuals and their families. Chronic illnesses affect not only long-term goals and the individuals' and families' planning, but also daily decisions and activities. For example, some families of chronically ill patients relocate closer to the medical services. Although it is beneficial for the patient, such a change often comes at considerable financial, personal, and emotional expenses. Therefore, it is a life event that needs external support from outside the families.

2. Separation and reunion

Separation induces stress to individuals. For example, a child who is separated from parents or caregivers may result in separation anxiety, showing anger, grief, negative emotion and even revenge. For adults, separation also induces social trauma especially when the separation results from a divorce. One of the major effects of a divorce is the change of relationships between parents and their children. Whether the child could adapt to this incident depends on the parent-child relationship.

Reunion has different meanings. One of them is the issuance of one-way permits of mainland residents for entry into Hong Kong. This family reunion is regarded as the starting point of a long process of readjustment as reunion has much to do with adaptation to the environment and roles. Family members in Hong Kong need adjustment to a new member and this may create changes in economic condition, daily arrangement and communication. Newcomers also have to adapt to a different culture and daily habits. This new family relationship may create pressure to parties concerned.

3. Bereavement

Death is a natural part of the life cycle. The death of a relative, or even a pet, can be traumatic to people of all ages. Death of a family member may result in stress on an individual, especially about an unexpected death. Many people may have feelings of disbelief, anger, and even guilt. Some of them have to face difficulties and challenges arising from changes of financial, personal, and emotional support. Therefore, grief support is very important to those experiencing death of a loved one.

Five stages of grief (Kübler-Ross) for death and dying

- Denial
- Anger
- Bargaining
- Depression
- Acceptance

1.7 Responses to life events across lifespan

Challenging life events, such as injury, breaking up in relationships or even changing of living environment, are inevitably accompanied by distressed emotions and grief. These may affect one's belief and worldview, causing a significant cognitive turmoil and emotional distress. Changes are inevitable across lifespan. The most important thing is how to deal with life events by reducing negative effects on the health of an individual, family and the community.

A. Coping and Resilience

Coping is the way in which individuals learn to live with changes occurring in their daily life. These changes can be predictable or unpredictable. Change can bring happiness or sadness to an individual. People develop different strategies in order to cope with change. These help them to understand themselves as they experience difficult and painful situations. Coping strategies include:

- Identifying the reactions, thoughts and feelings that the change is bringing;
- Being aware that change has happened and something that can be done to support that change; and
- Coming to terms with life after the change.

Therefore, it is important to restore some degree of cognitive balance and increase the coping ability through resilience and positive thinking.

Resilience refers to adapting to adversity. This helps to offset the adverse effects created by problems. A person who has resilience can harness inner strengths and rebound more quickly from a setback or challenge and learn from the experience.

B. Positive thinking

Positive thinking is one of the essences in helping one to withstand troubles and problems, making correct decisions, and overcoming obstacles during life event crises.

Barrie Hopson suggests seven stages in building up positive thinking:

Stages	Response and Coping
Immobilisation	Being unable to cope and perhaps suffering from a denial that anything needs to change. A person might feel frozen and unable to respond to the
Minimisation	Denying the extent of any change and instead pretending that nothing has to be done. It is a temporary retreat period from reality. Retreating from reality gives the individual time to cope with the change.
Depression	Becoming aware of the need for change, he/she may experience depression. Major changes may threaten a person's self-esteem and such a person may not be able to cope with (mentally). A person may attempt to withdraw into depression as a response to the need for change.
Letting go	Accepting the need for change and letting go of the attempts to deny or minimize the need for change.
Testing	Trying out new behaviors and experimenting with new lifestyles.
Search for meaning	Attempting to make sense of what has happened.
Internalisation	Internalizing a new lifestyle and perhaps a new self-concept. The person can now feel secure and safe again as he/she has gone through the process of adapting to change.

People with a positive attitude towards different life events are considered mature. They generally enjoy life more and can overcome pain and adversity. The followings are examples of positive and negative thinking towards the anticipated and unanticipated life events:

Anticipated life events	Examples of Positive Thinking	Examples of Negative Thinking
Birth of a sibling	<ul style="list-style-type: none"> ▪ Have a new company and emotional attachment ▪ Learn new role 	<ul style="list-style-type: none"> ▪ Loss attention from parents
Starting school	<ul style="list-style-type: none"> ▪ Learn to make new friends 	<ul style="list-style-type: none"> ▪ Loss of support from parents
Moving house	<ul style="list-style-type: none"> ▪ Feeling of being able to control and change the environment 	<ul style="list-style-type: none"> ▪ Loss of old home ▪ Overwhelmed by work and changes ▪ Being out of control
Getting a job	<ul style="list-style-type: none"> ▪ Improving self-image ▪ Having income ▪ Acquiring new things 	<ul style="list-style-type: none"> ▪ Loss of previous lifestyle and routine ▪ Lots of uncertainty ▪ Pressure due to new requirement of work and time ▪ Difficult to adapt and establish new relationships
Leaving home	<ul style="list-style-type: none"> ▪ Independence ▪ Getting control of personal environment 	<ul style="list-style-type: none"> ▪ Loss of family support
Marriage	<ul style="list-style-type: none"> ▪ Emotional attachment and intimacy 	<ul style="list-style-type: none"> ▪ Loss of independence ▪ Threatened by intimacy and sharing possession
Retirement	<ul style="list-style-type: none"> ▪ Disengaging from work ▪ Controlling one's own life ▪ New leisure activities and lifestyle 	<ul style="list-style-type: none"> ▪ Loss of working role, self-concept, self-esteem, routine, colleagues and targets ▪ Loss of contact with colleagues ▪ Difficult to establish new lifestyle
Ageing	<ul style="list-style-type: none"> ▪ Learning a new style to adapt to physical change 	<ul style="list-style-type: none"> ▪ Loss of ability ▪ Grief and unable to accept the new lifestyle that one doesn't want

Unanticipated life events	Examples of Positive Thinking	Examples of Negative Thinking
Redundancy	<ul style="list-style-type: none"> ▪ Learning to adapt to changes in income and lifestyle 	<ul style="list-style-type: none"> ▪ Loss of income and existing lifestyle
Serious injury	<ul style="list-style-type: none"> ▪ How to adapt to physical changes 	<ul style="list-style-type: none"> ▪ Loss of physical health, self-esteem and self-image ▪ Uncertainty about the future
Divorce	<ul style="list-style-type: none"> ▪ How to cope with new lifestyle 	<ul style="list-style-type: none"> ▪ Loss of the relationship ▪ Resentment – being hurt ▪ Guilt feeling
Bereavement	<ul style="list-style-type: none"> ▪ Adapting to a new lifestyle as a single person 	<ul style="list-style-type: none"> ▪ Loss of relationship ▪ Grief and failure to adapt to an unwanted lifestyle

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