

Tiffany Onody

Analysis of Child Development - Infants and Toddlers

Introduction

Setting - House (kitchen area)

Day & Time - Thursday 2/20/2020 5'oclock pm

Location of Observation - Kitchen area - Preparing for dinner time

Physical Space - Rectangle table, two chairs, and "L" shaped bench around the table. The walls were a light nude shade, with two windows on one side of the wall. Each window had white blinds. The other ways contained kitchen storage cabinets (7), white stove, white refrigerator. The storage cabinets contained plates, cups, bowls, forks, spoons, knives, pots and pans, dry foods. The refrigerator contained foods such as, water, milk, dairy products, produce products, and freezer items. Above the stove was a shelf which held different spices.

People Present - One caregiver; one toddler; me (Tiffany Onody)

Description of Child - 2years 3 months., fair skin, boy, large almond shaped brown eyes, small nose, small ears, short faded blonde hair, chubby body structure, about 2 ft tall. Wearing a blue long sleeve shirt, on the sides of the sleeve had one navy blue stripe, light grey sweatpants, with white colored socks.

Observation -

On a Thursday evening, February 20th, 2020, it was a time of setting where the child was getting ready for dinner. Around 5'oclock in the evening, I observed Michael. Michael is two years and three months old. Michael had just gotten home from school at the time. Michael was in the kitchen area with his Caregiver. The Caregiver was preparing Michael's dinner while Michael was sitting at the table watching the television. The television was located in the next room of the kitchen. Michael was still wearing his school clothes. Michael had a blue long sleeve shirt. On the sides of this sleeve there was a navy blue stripe going around his arm. Michael had light grey sweatpants, with white colored socks on. Michael was sitting on the table in a criss

cross applesauce position. While waiting for Caregiver to prepare his dinner, he was eating a snack of chocolate chips cookies that were placed in his white bowl.

In the kitchen area, there was a table. This table was quite different from others you see. The table was against the wall with a “L” shape bench around the frame of the table. At the end of the table was one chair placed against the wall to give it more room in the kitchen area. On the table was a white children’s bowl with chocolate chip cookies inside. Aside from the white bowl was a plastic plate. Around the plastic plate was blue design wrapped around the outside of the plate. Michael was in the kitchen at the time with his caregiver. When observing Michael, Michael was in a criss cross applesauce position on the kitchen table. Michael was on top of the table sitting with one chocolate chip cookie in his hand, while the rest of the cookies were in the white bowl aside from him. Michael was focused on what was going on in the next room, which was the television. The television was on at the same time Michael was sitting on the table eating his cookies. Michael was eager to see the television, he kept moving his head from left or right, to get a better view. When moving his body, Michael happened to place his left foot on the bench. After the left foot was placed on the bench, Michael moved forward and placed his right foot on the bench. This gives Michael support on his legs to move off the table and onto the bench. Michael still had the cookie in his left hand while the white bowl was in his right hand. The bowl still had about 2 chocolate chip cookies left. As Michael was standing on the bench, he smiled at his caregiver, his eyes squinted very tight. His caregiver responded, “Michael I think you should sit down, dinner is almost ready.” The Caregiver then turned her back away from Michael for a good minute. As the caregiver reached for Michael’s dinner plate in the cabinet, she was tippy toeing with her right hand stretching to get the plate. After the Caregiver reached for the plate, she placed it down on top of the counter space. The caregiver then turned

her back towards Michael. Caregiver looking directly at Michael said “Michael it’s time to put the cookies away and eat dinner.” But Michael was still not ready for dinner. Michael then started to scream with laughter running back and front on the bench. The Caregiver then placed the dinner plate back on top of the counter to help relax Michael’s body. Michael was running back and forth to each end of the bench at the time. Caregiver responded, “You’re gonna fall and then cry Michael, so stop.” Michael was still laughing and smiling so hard. When smiling with his eyes squinted and front teeth showing, running back and forward. When running, Michael had dropped the white bowl onto the floor with the rest of the cookies that were in the bowl. The white bowl and the cookies had fallen on the floor. Michael stopped running on the bench, and had gotten off to see where his bowl had dropped. As Michael saw his cookies on the floor, he started to cry softly. Caregiver responded, Michael I told you to stop and now no more cookies, it’s dinner time. As Michael helped the Caregiver pick up the cookies, Michael was sitting with his feet folded underneath him. The Caregiver was holding the white bowl with her left hand, while Michael picked up each cookie off the ground. Caregiver was holding the white bowl and started to count “1,2,3,4,5,6,7,8,9” as soon as caregiver was about to say “10” Michael shouted “10” Michael then placed each cookie that was on the floor back into the white bowl which his Caregiver was holding. Caregiver then responded “good looking” as Michael smiled, showing his front teeth. Michael then pointed to his eyes and responded “good.” The caregiver responded “yes Michael, good looking.” After the cookies were finished getting picked up the Caregiver then placed the white bowl on top of the counter. Caregiver said “okay Michael off the floor, it’s time to eat. Michael then got off the floor and resumed back to the bench where he then sat on his bottom. Michael placed his right cheek laying in on top of the table, waiting for the caregiver. Caregiver looked over her shoulder responding “Michael you want to eat?” Michael then looked up at his Caregiver, then placed his right cheek back onto the table and

resumed watching the television in the next room. Caregiver then joined Michael and sat next to him. As the caregiver put the plate of food on top of the table, Michael responded “mhmm.” The plate of food was a children’s size plate, which had Michael’s dinner on it. Caregiver then told Michael “let’s eat.” The caregiver grabbed the spoon and tried giving it to Michael. The caregiver looked at Michael and said “do big boy.” But Michael kept pushing the spoon away. Caregiver responded “okay I will feed you then, open wide. As the caregiver placed food onto a spoon, Michael opened his mouth. The caregiver said, “Okay, the train is coming.” Michael then stuck his tongue out, which his teeth were biting to hold his tongue out. As Caregiver moved the spoon which had Michael’s dinner into his mouth. “Mhmm said Michael” As Michael took the first bite, Michael then raised his eyebrows which widened his eyes. Michael then had gotten up with food still inside his mouth. The caregiver responded, sit down you're gonna choke.” Michael then was standing on top of the bench as Caregiver was trying to make him sit. Caregiver then responded to Michael “sit down.” Michael then sat back down after the second caregiver told him too. Michael then pointed with his right hand, towards the food. Caregiver then took another spoon of food towards Michael’s mouth again. Michael had his tongue back out waiting for the next spoon full of food. Every spoon full of food Michael had, Michael’s cheek’s blow up. Michael then began to chew his mouth full of food, while looking for Caregiver to give the next spoon of food. The television was still on in the next room. Michael was still sitting at the table next to Caregiver as his eyes glanced over to the left side of him. As Caregiver went to give Michael another spoon of food, Michael was not paying attention this time to Caregiver. Michael had some food on his left side of the cheek. Michael then wiped his left side of his mouth with his left sleeve of his shirt. Michael’s food was left on the sleeve of his left side of his shirt. Michael was thrown off by the food that was wiped on to his sleeve of the shirt. Michael started to grab his Caregiver’s left arm very tight for attention. Michael started to make sounds that he

was unhappy about his sleeve being dirty. Michael's face started to turn red when he started to cry. When Michale grabbed the caregiver's arm, Caregiver responded " Michale you have to do nice, I'm only trying to help. Caregiver modelled on her arm, while patting her own arm lightly. Caregiver said Michael this is how you pat me if you needed something. Caregiver then rolled up his left side of his sleeve where the food was on telling Michael "it's okay." Michael was still unhappy, after Caregiver did that. Michael then got up off the bench and left the room crying, with tears down his round cheeks.

When observing Michael, a lot has stuck out to me. First of all, the location. The location was a kitchen setting. The kitchen had a lot of movements going on at the time between Michael and his Caregiver. The kitchen was a very tight and closed area. The kitchen had a lot going on within the 20 minutes from observing. The new insights I realized about Michael was, the amount of tolerance he has when it comes to dinner time. It was hard on the caregiver to help Michael with his needs due to the fact Michael is diagnosed with autism, and delayed with his speech. Michael always had to be reminded to "sit down" from his Caregiver. The connection between observing Michael and something I learned in ECE 110, was being focused. When observing a child you have to be very focused on the actions the child is doing every minute. A child's mood can change from just one little thing that upsets them. To better understand Michael's behavior, I took the liberty of recording and taking notes of Michael during the observation. This helped me look back at things I might have missed in order to give more accurate observation of Michael.

Cognitive Development - In the observation Michael gave a hard time when it came to listening. He's use of running back and forward is considered cause and effect. Michael did get

told by the caregiver many times to stop running. Michael had the cookies in his hand when running, which led to the cookies falling on the floor. The caregiver did help Michael pick the cookies off from the floor while counting. The caregiver counted to nine, which led Michael to finish off counting by shouting "ten." The skill being used is numeracy which led to showing Michael his ability to say the number 10 after 9.

The article "Infant Toddler Cognitive Development, An Introduction" adapted from the Department of Defense Child Development Virtual Lab School at The Ohio State University (1986). This article speaks of the learning foundations of revolving around the growth of the brain. Foundation stages act on language, imagination, independence and counterfactual thinking.

Language Development - In the observation Michael used hand gestures to point to objects. Language development is a child's verbal and non verbal communication skills. In my observation I did list that Michael is diagnosed with autism, and delayed with his speech. Therefore Michael did use actions to communicate with his caregiver. The actions being used were pointing to certain things in the room, as well as forcing his feelings out on the caregiver. Michael did get frustrated towards the end, which led him to grab his caregiver's arm tight. Michael's use of his hands symbolize "Modelling language." Modelling language shows his ability to use his hand gestures for his needs.

The article Communication, An Introduction; Bernstein, D. K., & Levey, S. (2002). Language Development: A review. In D. K. Bernstein & E. Tiegerman-Farber (Eds.), *Language and Communication Disorders in Children* (5th ed., pp. 27-94). Boston: Allyn & Bacon speaks about how verbal and non verbal communication associates with situations. Being that in my

observation there was a lot of non verbal communication, a child can get frustrated and take his or her feelings out in the wrong way.

Social & Emotional Development - In the observation Michael used his sleeve to wipe his mouth. Michael didn't realize that food was on his sleeve therefore Michael grabbed the caregiver's arm. Grabbing the caregivers arm is considered one of the temperaments.

Temperament describes the way a person approaches and reacts to the world. Temperament 2 results in a child being active, fussy, feisty - children can be fussy, irregular in feeding sleeping habits, fearful of new people and situations. Michael did get fussy towards the end of dinner, because he was dirty.

The article Promoting Young Children's Social and Emotional Health: Twardosz, S. 2005.

"Expressing Warmth and Affection to Children." Center on the Social and Emotional Foundations for Early Learning. What Works Briefs. <http://csefel.vanderbilt.edu/briefs/wwb20.pdf> speaks about an understanding and visual ideal of what happens during a child's earliest years of learning. Social emotions affect a lot on who we are and what we surround ourselves with. Social emotional influences on our behavior and actions.

Motor Development (gross and fine) -

In the observation Michael used his both hands to pick up the cookies off from the floor. His use of picking up the cookies is considered picking up small objects. Michael picking up the cookies is an example of fine motor skills. Michael had the ability to pick up small objects with his hand and transfer it back to the bowl.

The article Developing Fine Motor Skills: Adolph, K.E. 2008. "Motor/Physical Development: Locomotion." In Encyclopedia of Infant and Early Childhood Development , 359-73. San Diego, CA: Academic Press speaks about the four stages of fine motor development. The four stages of fine motor development set the stages for early childhood. Early childhood is the most

intensive period for the development of physical skills. Young children need to participate in a variety of developmentally appropriate activities intentionally designed to promote fine motor control. Fine motor skills are difficult for preschoolers to master, because the skills depend on muscular control, patience, judgment, and brain coordination.

Self - Help (activities of daily living) - When observing Michael, self - help was happening. Michael at the time was eating dinner, while the caregiver was feeding him. Michael did show his likes and dislikes when it came to eating the food. Everytime caregiver gave him another spoon full of food, Michael responded with "mhhh." I was aware Michael is 2 years old and is able to eat on his own, but at the time observing, Michael was focused on the tv that was on in the other room. Michael did show his likes towards the food as well as chewing his food side to side and up and down.

The article Culturally Appropriate Positive Guidance With Young Children: Avgitidou, S. 2001. "Peer Culture and Friendship Relationships as Contexts for the Development of Young Children's Prosocial Behaviour." International Journal of Early Years Education 9 (2): 145-52 speaks about Encouraging young children's self-care practices and self help skills in order to foster independence. Us as caregivers/guardians want our children to become more independent when it comes to daily activities.

