Child development stages

See also: Parenting and Family

Child development stages are the theoretical milestones of child development, some of which are asserted in nativist theories. This article discusses the most widely accepted developmental stages. There exists a wide variation in terms of what is considered "normal," caused by variation in genetic, cognitive, physical, family, cultural, nutritional, educational, and environmental factors. Many children reach some or most of these milestones at different times from the norm.

Holistic development sees the child in the round, as a whole person - physically, emotionally, intellectually, socially, morally, culturally and spiritually. Learning about child development involves studying patterns of growth and development, from which guidelines for 'normal' development are drawn up. Developmental norms are sometimes called milestones - they define the recognised pattern of development that children are expected to follow. Each child develops in a unique way; however, using norms helps in understanding these general patterns of development while recognising the wide variation between individuals. This page talks mostly about the linguistic development of a child.

1 Table of Milestones

2 Physical specifications

3 Milestones by age

3.1 1–4 months

Physical

- Head and chest circumference are nearly equal to the part of the abdomen.
- Head circumference increases approximately 2 cm per month until two months, then increases 1.5 cm per month until four months.
- Increases are an important indication of continued brain growth.
- Continues to breathe using abdominal muscles.
- Posterior fontanelle.
- Anterior fontanelle.
- Skin remains sensitive and easily irritated.
- Legs may appear slightly bowed.
- Cries with tears.
- Gums are red.
- Eyes begin moving together in unison (binocular vision).
- Responds to and thrives on warm, sensitive physical contact and care.
- Expresses discomfort, hunger or thirst.
- Has very poor vision. The infant has trouble focusing on objects and could barely make out images with its eyes.

Motor development

- Rooting and sucking reflexes are well developed.
- Swallowing reflex and tongue movements are immature; inability to move food to the back of the mouth.
- Grasp reflex.
- Landau reflex appears near the middle of this period; when baby is held in a prone (face down) position, the head is held upright and legs are fully extended.
- Grasps with entire hand; strength insufficient to hold items. Holds hands in an open or semi-open position.
- Movements are large and jerky.
- Raises head and upper body on arms when in a prone position.
- Turns head side to side when in a supine (face up) position; cannot hold head up and line with the body.
- Upper body parts are more active: clasps hands above face, waves arms about, reaches for objects.
- According to Sigmund Freud, the infant is in the oral fixation stage. The oral fixation stage is when the infant begins to root and suck.
3.2 4–8 months

Physical

- Head and chest circumferences are basically equal.
- Head circumference increases approximately 1 cm per month until six to seven months, then 0.5 cm per month; head circumference should continue to increase steadily, indicating healthy, ongoing brain growth.
- Posterior fontanelle closing or fully closed.
- Anterior fontanelle.
- Breathing is abdominal; respiration rate depending on activity; rate and patterns vary from infant to infant.
- Teeth may begin to appear, with upper and lower incisors coming in first. Gums may become red and swollen, accompanied by increased drooling, chewing, biting, and mouthing of objects.
- Legs may appear bowed; bowing gradually disappears as infant grows older.
- Fat rolls (“Baby Fat”) appear on thighs, upper arms and neck.
- True eye colour is established.

Motor development

- Reflexive behaviors are changing:
- Blinking reflex is well established
- Sucking reflex becomes voluntary
- Moro reflex disappears
- When lowered suddenly, infant throws out arms as a protective measure.
- Swallowing reflex appears and allows infant to move solid foods from front of mouth to the back for swallowing.
- Picks up objects using finger and thumb (pincer grip).
- Reaches for objects with both arms simultaneously; later reaches with one hand or the other.
- Transfers objects from one hand to the other; grasps object using entire hand (palmar grasp).
- Handles, shakes, and pounds objects; puts everything in mouth.
- Able to hold bottle.
- Sits alone without support, holding head erect, back straightened, and arms propped forward for support
- Pulls self into a crawling position by raising up on arms and drawing knees up beneath the body; rocks back and forth, but generally does not move forward.
- Lifts head when placed on back.
- Can roll over from back or stomach position.
- May accidentally begin scooting backwards when placed on stomach; soon will begin to crawl forward.
- Looks for fallen objects by 7 months
- Plays ‘peek-a-boo’ games
- Cannot understand “no” or “danger”

3.3 8–12 months

Physical

- Respiration rates vary with activity
- Environmental conditions, weather, activity, and clothing still affect variations in body temperature.
- Head and chest circumference remain equal.
- Anterior fontanelle begins to close.
- Continues to use abdominal muscles for breathing.
- More teeth appear, often in the order of two lower incisors then two upper incisors followed by four more incisors and two lower molars but some babies may still be waiting for their first.
- Arm and hands are more developed than feet and legs (cephalocaudal development); hands appear large in proportion to other body parts.
- Legs may continue to appear bowed.
- “Baby Fat” continues to appear on thighs, upper arms and neck.
- Feet appear flat as arch has not yet fully developed.
- Both eyes work in unison (true binocular coordination).
- Can see distant objects (4 to 6 m or 13 to 20 ft away) and points at them.

Motor development

- Reaches with one hand leading to grasp an offered object or toy.
- Manipulates objects, transferring them from one hand to the other.
3.4 Toddlers (12–24 months)

Physical

- Explores new objects by poking with one finger.
- Uses deliberate pincer grasp to pick up small objects, toys, and finger foods.
- Stacks objects; also places objects inside one another.
- Releases objects or toys by dropping or throwing; cannot intentionally put an object down.
- Beginning to pull self to a standing position.
- Beginning to stand alone, leaning on furniture for support; moves around obstacles by side-stepping.
- Has good balance when sitting; can shift positions without falling.
- Creeps on hands and knees; crawls up and down stairs.
- Walks with adult support, holding onto adult’s hand; may begin to walk alone.
- Watches people, objects, and activities in the immediate environment.
- Responds to hearing tests (voice localization); however, loses interest quickly and, therefore, may be difficult to test formally.

- Reaches for toys that are out of reach but visible
- Recognizes objects in reverse
- Drops thing intentionally and repeats and watches object
- Imitates activities like playing drum
- Begins to develop expressive rather than receptive language- child actually responding to what is said to them instead of only receiving and watching the interaction.10

Cognitive development

- Anterior fontanelle closing or fully closed, usually at the middle of this year.
- Chest circumference is larger than head circumference.
- Legs may still appear bowed.
- Toddler will begin to lose the “Baby Fat” once he/she begins walking.
- Body shape changes; takes on more adult-like appearance; still appears top-heavy; abdomen protrudes, back is swayed.

Motor development

- Crawl skillfully and quickly.
- Stands alone with feet spread apart, legs stiffened, and arms extended for support.
- Gets to feet unaided.
- Most children walk unassisted near the end of this period; falls often; not always able to maneuver around obstacles, such as furniture or toys.
- Uses furniture to lower self to floor; collapses backwards into a sitting position or falls forward on hands and then sits.
- Enjoys pushing or pulling toys while walking.
- Repeatedly picks up objects and throws them; direction becomes more deliberate.
- Attempts to run; has difficulty stopping and usually just drops to the floor.
- Crawls up stairs on all fours; goes down stairs in same position.
- Sits in a small chair.
- Carries toys from place to place.
- Enjoys crayons and markers for scribbling; uses whole-arm movement.
- Helps feed self; enjoys holding spoon (often upside down) and drinking from a glass or cup; not always accurate in getting utensils into mouth; frequent spills should be expected.
- Helps turn pages in book.
- Stacks two to six objects per day.

3.4 Toddlers (12–24 months)

Physical

- Weight is now approximately 3 times the child’s birth weight.
- Respiration rate varies with emotional state and activity.
- Rate of growth slows.
- Head size increases slowly; grows approximately 1.3 cm every six months; anterior fontanelle is nearly closed at eighteen months as bones of the skull thicken.

Cognitive development

- Enjoys object-hiding activities.
• Early in this period, the child always searches in the same location for a hidden object (if the child has watched the hiding of an object). Later, the child will search in several locations.

• Passes toy to other hand when offered a second object (referred to as “crossing the midline” — an important neurological development).

• Manages three to four objects by setting an object aside (on lap or floor) when presented with a new toy.

• Puts toys in mouth less often.

• Enjoys looking at picture books.

• Demonstrates understanding of functional relationships (objects that belong together): Puts spoon in bowl and then uses spoon as if eating; places teacup on saucer and sips from cup; tries to make doll stand up.

• Shows or offers toy to another person to look at.

• Names many everyday objects.

• Shows increasing understanding of spatial and form discrimination: puts all pegs in a pegboard; places three geometric shapes in large formboard or puzzle.

• Places several small items (blocks, clothespins, cereal pieces) in a container or bottle and then dumbs them out.

• Tries to make mechanical objects work after watching someone else do so.

• Responds with some facial movement, but cannot truly imitate facial expression.

• Most children with autism are diagnosed at this age.

**English Language**

• Produces considerable “jargon”: puts words and sounds together into speech-like (inflected) patterns.

• Holophrastic speech: uses one word to convey an entire thought; meaning depends on the inflection (“me” may be used to request more cookies or a desire to feed self). Later; produces two-word phrases to express a complete thought (telegraphic speech): “More cookie,” “Daddy bye-bye.”

• Follows simple directions, “Give Daddy the cup.”

• When asked, will point to familiar persons, animals, and toys.

• Identifies three body parts if someone names them: “Show me your nose (toe, ear).”

• Indicates a few desired objects and activities by name: “Bye-bye,” “cookie”; verbal request is often accompanied by an insistent gesture.

• Responds to simple questions with “yes” or “no” and appropriate head movement.

• Speech is 25 to 50 percent intelligible during this period.

• Locates familiar objects on request (if child knows location of objects).

• Acquires and uses five to fifty words; typically these are words that refer to animals, food, and toys.

• Uses gestures, such as pointing or pulling, to direct adult attention.

• Enjoys rhymes and songs; tries to join in.

• Seems aware of reciprocal (back and forth) aspects of conversational exchanges; some turn-taking in other kinds of vocal exchanges, such as making and imitating sounds.

**Social**

• Less wary of strangers.

• Helps pick up and put away toys.

• Plays alone.

• Enjoys being held and read to.

• Often imitates adult actions in play.

• Enjoys adult attention; likes to know that an adult is near; gives hugs and kisses.

• Recognizes self in mirror.

• Enjoys the companionship of other children, but does not play cooperatively.

• Begins to assert independence; often refuses to cooperate with daily routines that once were enjoyable; resists getting dressed, putting on shoes, eating, taking a bath; wants to try doing things without help.

• May have a tantrum when things go wrong or if overly tired or frustrated.

• Exceedingly curious about people and surroundings; needs to be watched carefully to prevent them from getting into unsafe situations.
3.5 Two-year-old

Physical

- Posture is more erect; abdomen still large and protruding, back swayed, because abdominal muscles are not yet fully developed.
- Respirations are slow and regular
- Body temperature continues to fluctuate with activity, emotional state, and environment.
- Brain reaches about 80 percent of its adult size.
- 16 baby teeth almost finished growing out

Motor development

- Can walk around obstacles and walk more erectly.
- Squats for long periods while playing.
- Climbs stairs unassisted (but not with alternating feet).
- Balances on one foot (for a few moments), jumps up and down, but may fall.
- Often achieves toilet training during this year (depending on child’s physical and neurological development) although accidents should still be expected; the child will indicate readiness for toilet training.
- Throws large ball underhand without losing balance. Holds small cup or tumbler in one hand. Unbuttons large buttons; unzips large zippers.
- Opens doors by turning doorknobs.
- Grasps large crayon with fist; scribbles.
- Climbs up on chair, turns, and sits down.
- Stacks four to six objects on top of one another.
- Uses feet to propel wheeled riding toys.

Cognitive

- Eye–hand movements better coordinated; can put objects together, take them apart; fit large pegs into pegboard.
- Begins to use objects for purposes other than intended (may push a block around as a boat).
- Does simple classification tasks based on single dimension (separates toy dinosaurs from toy cars).
- Seems fascinated by, or engrossed in, figuring out situations: where the tennis ball rolled, where the dog went, what caused a particular noise.
- Attends to self-selected activities for longer periods of time. Discovering cause and effect: squeezing the cat makes them scratch.
- Knows where familiar persons should be; notes their absence; finds a hidden object by looking in last hiding place first. (This is what Piaget termed object permanence, which usually occurs during the sensorimotor stage of Piaget’s childhood theory of cognitive development)
- Names familiar objects.
- Recognizes, expresses, and locates pain.
- Expected to use "magical thinking".
- Tells about objects and events not immediately present (this is both a cognitive and linguistic advance).
- Expresses more curiosity about the world.

English Language

- Enjoys participating while being read to.
- Realizes language is effective for getting desired responses.
- Uses fifty to three-hundred words; vocabulary continuously increasing.
- Has broken the linguistic code; in other words, much of a two-year-old’s talk has meaning to them.
- Receptive language is more developed than expressive language; most two-year olds understand significantly more than they can talk about.
- Utters three- and four-word statements; uses conventional word order to form more complete sentences.
- Refers to self as “me” or sometimes “I” rather than by name: “Me go bye-bye”; has no trouble verbalizing “mine.”
- Expresses negative statements by tacking on a negative word such as “no” or “not”: “Not more milk.”
- Uses some plurals.
- Some stammering and other dysfluencies are common.
- Speech is as much as 65 to 70 percent intelligible.
- Is able to verbalize needs.
- Asks a lot of questions.

Social and emotional
• Shows signs of empathy and caring: comforts another child if hurt or frightened; appears to sometimes be overly affectionate in offering hugs and kisses to children.

• Continues to use physical aggression if frustrated or angry (for some children, this is more exaggerated than for others); Physical aggression usually lessens as verbal skills improve.

• Temper tantrums likely to peak during this year; extremely difficult to reason with during a tantrum.

• Impatient; finds it difficult to wait or take turns.

• Enjoys “helping” with household chores; imitates everyday activities: may try to toilet train a stuffed animal, feed a doll.

• “Bossy” with parents and caregivers; orders them around, makes demands, expects immediate compliance from adults.

• Watches and imitates the play of other children, but seldom interacts directly; plays near others, often choosing similar toys and activities (parallel play); solitary play is often simple and repetitive.

• Offers toys to other children, but is usually possessive of playthings; still tends to hoard toys.

• Making choices is difficult; wants it both ways.

• Often defiant; shouting “no” becomes automatic.

• Ritualistic; wants everything “just so”; routines carried out exactly as before; belongings placed “where they belong.”

3.6 Three-year-old

Physical

• Growth is steady though slower than in first two years.

• Adult height can be predicted from measurements of height at three years of age; males are approximately 53% of their adult height and females, 57%.

• Legs grow faster than arms,

• Circumference of head and chest is equal; head size is in better proportion to the body.

• ”Baby fat” disappears as neck appears.

• Posture is more erect; abdomen no longer protrudes.

• Slightly knock-kneed.

• can jump from low step

• can stand up and walk around on tiptoes

• “baby” teeth stage over.

• Needs to consume approximately 6,300 kJ (1,500 calories) daily.

Motor development

• Walks up and down stairs unassisted, using alternating feet; may jump from bottom step, landing on both feet.

• Can momentarily balance on one foot.

• Can kick big ball-shaped objects.

• Needs minimal assistance eating.

• Jumps on the spot.

• Pedals a small tricycle.

• Throws a ball overhand; aim and distance are limited.

• Catches a large bounced ball with both arms extended.

• Enjoys swinging on a swing.

• Shows improved control of crayons or markers; uses vertical, horizontal and circular strokes.

• Holds crayon or marker between first two fingers and thumb (tripod grasp), not in a fist as earlier.

• Can turn pages of a book one at a time

• Enjoys building with blocks.

• Builds a tower of eight or more blocks.

• Enjoys playing with clay; pounds, rolls, and squeezes it.

• May begin to show hand dominance.

• Carries a container of liquid, such as a cup of milk or bowl of water, without much spilling; pours liquid from pitcher into another container.

• Manipulates large buttons and zippers on clothing.

• Washes and dries hands; brushes own teeth, but not thoroughly.

• Usually achieves complete bladder control during this time.

Cognitive development

• Listens attentively to age-appropriate stories.

• Makes relevant comments during stories, especially those that relate to home and family events.
3.7 Four-year-old

Physical development

- Likes to look at books and may pretend to “read” to others or explain pictures.
- Enjoys stories with riddles, guessing, and “suspense.”
- Speech is understandable most of the time.
- Produces expanded noun phrases: “big, brown dog.”
- Produces verbs with “ing” endings; uses “-s” to indicate more than one; often puts “-s” on already pluralized forms: geese, mice.
- Indicates negatives by inserting “no” or “not” before a simple noun or verb phrase: “Not baby.”
- Answers “What are you doing?”, “What is this?”, and “Where?” questions dealing with familiar objects and events.

- Head circumference is usually not measured after age three.
- Requires approximately 1,700 calories daily.
- Hearing acuity can be assessed by child’s correct usage of sounds and language, and also by the child’s appropriate responses to questions and instructions.

Motor development

- Walks a straight line (tape or chalk line on the floor).
- Hops on one foot.
- Pedals and steers a wheeled toy with confidence; turns corners, avoids obstacles and oncoming traffic.
- Climbs ladders, trees, playground equipment.
- Jumps over objects 12 to 15 cm (5 to 6 in) high; lands with both feet together.
- Runs, starts, stops, and moves around obstacles with ease.
- Throws a ball overhand; distance and aim improving.
- Builds a tower with ten or more blocks.
- Forms shapes and objects out of clay: cookies, snakes, simple animals.
- Reproduces some shapes and letters.
- Holds a crayon or marker using a tripod grasp.

Cognitive

- Can recognize that certain words sound similar
- Names eighteen to twenty uppercase letters. Writes several letters and sometimes their name.
- A few children are beginning to read simple books, such as alphabet books with only a few words per page and many pictures.
- Likes stories about how things grow and how things operate.
- Delights in wordplay, creating silly language.
- Understands the concepts of “tallest,” “biggest,” “same,” and “more”; selects the picture that has the “most houses” or the “biggest dogs.”
- Rote counts to 20 or more.
- Understands the sequence of daily events: “When we get up in the morning, we get dressed, have breakfast, brush our teeth, and go to school.”
- When looking at pictures, can recognize and identify missing puzzle parts (of person, car, animal).
- Very good storytellers.
- Counts 1 to 7 objects out loud, but not always in order
- follows two to three step directions given individually or in a group
- may put the “ed” on the end of words such as “I goed outside and I played.”

English Language

- Uses the prepositions “on,” “in,” and “under.”
- Uses possessives consistently: “hers,” “theirs,” “baby’s.”
- Produces elaborate sentence structures: “The cat ran under the house before I could see what color it was.”
• Speech is almost entirely intelligible.
• Begins to use the past tense of verbs correctly: “Mommy closed the door,” “Daddy went to work.”
• Refers to activities, events, objects, and people that are not present.
• Changes tone of voice and sentence structure to adapt to listener’s level of understanding: To baby brother, “Milk gone?” To Mother, “Did the baby drink all of his milk?”
• States first and last name, gender, siblings’ names, and sometimes own telephone number.
• Answers appropriately when asked what to do if tired, cold, or hungry. Recites and sings simple songs like mangoes and rhymes.

Social development

• Outgoing; friendly; overly enthusiastic at times.
• Moods change rapidly and unpredictably; laughing one minute, crying the next; may throw tantrum over minor frustrations (a block structure that will not balance); sulk over being left out.
• Imaginary playmates or companions are common; holds conversations and shares strong emotions with this invisible friend.
• Boasts, exaggerates, and “bends” the truth with made-up stories or claims of boldness; tests the limits with “bathroom” talk.
• Cooperates with others; participates in group activities.
• Shows pride in accomplishments; seeks frequent adult approval.
• Often appears selfish; not always able to take turns or to understand taking turns under some conditions; tattles on other children.
• Insists on trying to do things independently, but may get so frustrated as to verge on tantrums when problems arise: paint that drips, paper airplane that will not fold right.
• Enjoys role-playing and make-believe activities.
• Relies (most of the time) on verbal rather than Physical aggression; may yell angrily rather than hit to make a point; threatens: “You can’t come to my birthday party”
• Name-calling and taunting are often used as ways of excluding other children.
• Establishes close relationships with playmates; beginning to have “best” friends.

3.8 Five-year-old

Physical

• Head size is approximately that of an adult’s.
• May begin to lose “baby” (deciduous) teeth.
• Body is adult-like in proportion.
• Requires approximately 7,500 J (1,800 calories) daily
• Visual tracking and binocular vision are well developed.

Motor development

• Walks backwards, toe to heel.
• Walks unassisted up and down stairs, alternating feet.
• May learn to turn somersaults (should be taught the right way in order to avoid injury).
• Can touch toes without flexing knees.
• Walks a balance beam.
• Learns to skip using alternative feet.
• Catches a ball thrown from 1 m (3.3 ft) away.
• Rides a tricycle or wheeled toy with speed and skillful steering; some children learning to ride bicycles, usually with training wheels.
• Jumps or hops forward ten times in a row without falling.
• Balances on either foot with good control for ten seconds.
• Builds three-dimensional structures with small cubes by copying from a picture or model.
• Reproduces many shapes and letters: square, triangle, A, I, O, U, C, H, L, T.
• Demonstrates fair control of pencil or marker; may begin to color within the lines.
• Cuts on the line with scissors (not perfectly).
• Hand dominance is fairly well established
• Often has an imaginary friend

Cognitive

• Forms rectangle from two triangular cuts.
• Builds steps with set of small blocks.
• Understands concept of same shape, same size.

• Sorts objects on the basis of two dimensions, such as color and form.

• Sorts a variety of objects so that all things in the group have a single common feature (classification skill: all are food items or boats or animals).

• Understands the concepts of smallest and shortest; places objects in order from shortest to tallest, smallest to largest.

• Identifies objects with specified serial position: first, second, last.

• Rote counts to 20 and above; many children count to 100.

• Recognizes numerals from 1 to 10.

• Understands the concept of less than: “Which bowl has less water?”

• Understands the terms dark, light, and early: “I got up early, before anyone else. It was still dark.”

• Relates clock time to daily schedule: “Time to turn on TV when the little hand points to 5.”

• Some children can tell time on the hour: five o’clock, two o’clock.

• Knows what a calendar is for.

• Recognizes and identifies coins; beginning to count and save money.

• Many children know the alphabet and names of upper- and lowercase letters.

• Understands the concept of half; can say how many pieces an object has when it’s been cut in half.


• Eager to learn new things. Curious and inquisitive.

**Social development**

• Enjoys and often has one or two focus friendships.

• Plays cooperatively (can lapse), is generous, takes turns, shares toys.

• Participates in group play and shared activities with other children; suggests imaginative and elaborate play ideas.

• Shows affection and caring towards others especially those “below” them or in pain.

• Generally subservient to parent or caregiver requests.

• Needs comfort and reassurance from adults but is less open to comfort.

• Has better self-control over swings of emotions.

• Likes entertaining people and making them laugh.

• Boasts about accomplishments.

• Often has an imaginary friend.

**English Language development**

• Vocabulary of 1,500 words plus.

• Tells a familiar story while looking at pictures in a book.

• Defines simple words by function: a ball is to bounce; a bed is to sleep in.

• Identifies and names four to eight colours.

• Recognizes the humor in simple jokes; makes up jokes and riddles.

• Produces sentences with five to seven words; much longer sentences are not unusual.

• States the name of own city or town, birthday, and parents’ names.

• Answers telephone appropriately; calls person to phone or takes a brief message

• Speech is almost entirely grammatically correct.

• Uses “would” and “could” appropriately.

• Uses past tense of irregular verbs consistently: “went,” “caught,” “swam.”

• Uses past-tense inflection (-ed) appropriately to mark regular verbs: “jumped,” “rained,” “washed.”

**Physical**

• Weight gains reflect significant increases in muscle mass.

• Heart rate and respiratory rates are close to adults.

• Body may appear lanky as through period of rapid growth.

• Baby teeth beginning to be replaced by permanent ones, starting with the two lower front teeth

• 20/20 eyesight; if below 20/40 should see a professional.
• The most common vision problem during middle childhood is myopia, or nearsightedness. (Berk, 2007).

• Uses 6,700 J to 7,100 J (1,600 to 1,700 calories) a day.

**Motor development**

• Gains greater control over large and fine motor skills; movements are more precise and deliberate, though some clumsiness persists.

• Enjoys vigorous running, jumping, climbing, and throwing etc.

• Has trouble staying still.

• Span of attention increases; works at tasks for longer periods of time.

• Can concentrate effort but not always consistently.

• Understands time (today, tomorrow, yesterday) and simple motion (some things go faster than others).

• Recognizes seasons and major activities done at certain times.

• Has fun with problem solving and sorting activities like stacking, puzzles and mazes

• Enjoys the challenge of puzzles, counting and sorting activities, paper-and-pencil mazes, and games that involve matching letters and words with pictures.

• Recognizes some words by sight; attempts to sound out words

• In some cases the child may be reading well.

• Functioning which facilitates learning to ride a bicycle, swim, swing a bat, or kick a ball.

• Enjoys making things.

• Reverses or confuses certain letters: b/d, p/g, g/q, t/f.

• Able to trace objects.

• Folds and cuts paper into simple shapes.

• Can tie laces, string (like shoes).

**English Language**

• Can identify right and left hands fairly consistently.

• Holds onto positive beliefs involving the unexplainable (magic or fantasy)

• Arrives at some understanding about death and dying; expresses fear that parents may die.

• Talks a lot.

• Loves telling jokes and riddles; often, the humor is far from subtle.

• Experiments with slang and profanity and finds it funny.

• Enthusiastic and inquisitive about surroundings and everyday events.

• Able to carry on adult-like conversations; asks many questions.

• Learns 5 to 10 words a day; vocabulary of 10,000–14,000.

• Uses appropriate verb tenses, word order, and sentence structure.

**Social and emotional**

• Uses language rather than tantrums or physical aggression to express displeasure: “That’s mine! Give it back, you dummy.”

• Talks self through steps required in simple problem-solving situations (though the “logic” may be unclear to adults).

• Has mood swings towards primary caregiver depending on the day

• Friendship with parent is less depended on but still needs closeness and nurturing.

• Anxious to please; needs and seeks adult approval, reassurance, and praise; may complain excessively about minor hurts to gain more attention.

• Often can’t view the world from another’s point of view

• Self-perceived failure can make the child easily disappointed and frustrated.

• Can’t handle things not going their own way

• Does not understand ethical behavior or moral standards especially when doing things that have not been given rules

• Understands when he or she has been thought to be “bad”; values are based on others’ enforced values.

• May be increasingly fearful of the unknown like things in the dark, noises, and animals.
4 See also

- Attachment in children
- Attachment theory
- Behavioral cusp
- Child development
- Developmental differences in solitary facial expressions
- Early childhood
- Early childhood education
- Infant vision
- Sign language in infants and toddlers
- The Connected Baby (documentary film)

5 References


[5] Early Development. Texas School for the Blind and Visually Impaired, tsbvi.edu


[16] Child development. Early Years Matters, Bury, UK (last accessed 12 March)


6 Further reading


7 External links

- CDC’s “Learn the Signs. Act Early” campaign – Information for parents on early childhood development and developmental disabilities
- Developmental Milestones, National Dissemination Center for Children with Disabilities, NICHCY
- YourChild: Developmental Milestones, University of Michigan Health System
8 Text and image sources, contributors, and licenses

8.1 Text


8.2 Images


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