

## **Physical, Social and Emotional Development of Children**

Physical development is “the gradual process by which children develop the use and control of muscles”(Yvonne Nolan: BTEC National Early Years), thus the child is gaining a wider range of movements.

As a child begins life as a being with “little control of movement and progresses to one who can run, jump, laugh, sing, write with a pencil and control their own small and large muscles with growing confidence. This progression is physical development.” (Enfamil: article on physical development.)

Physical Development includes:

- Changes in motor behaviour - newborn babies display involuntary reflex actions. A fifteen-month-old child can increasingly voluntarily control their movements.
- Fine motor development involving movements of the hands and fingers – the early primitive grasp shown by babies as young as four weeks old develops into a very neat and co-ordinate grasp using the forefinger by five years of age.
- Changes in the sensory organs, such as the eyes – the development of eye muscles enables most babies to see clearly and over a much larger area than at birth.

Physical development is important for children’s overall development for three key reasons:

- It allows new learning to take place - a baby who learns to crawl can then start to move and explore their environment.
- It allows further development to take place – once a child has learnt one skill, they can then build on this skill.
- It affects children’s confidence and self-esteem – children who have learnt to ride a tricycle feel good about themselves, while older children who feel that they are no good at a certain activity may lack confidence.

As a baby’s physical development progresses, new skills are learnt, these enable the baby to become involved in more activities and to explore their immediate world. Further complex skills are learnt giving the baby/child increasing control of activities. With this success comes emotional development. “The baby/child gains self confidence through the control of their actions, thus promoting their self-esteem.” (Yvonne Nolan: BTEC National Early Years). As a child gains more mobility they are able to play with others, thereby promoting their social development. The development of gross and fine motor skills is important. Children become more independent, leading to the child to start dressing themselves i.e. putting on their coats.

There is increasing research to suggest that children’s physical development is important in order to help children’s literacy.

Physical development can be divided into two categories, gross or locomotive skills and fine motor skills, although some activities incorporate both types of skill.

Gross motor skills are the large movements, which the body makes. These large movements can be broken down into sections:

- Gross motor actions, which involve the use of the whole limb for example hopping on one leg or as a child, kicks a ball, which also involves co-ordination.
- Locomotive skills, which are movements, needed to travel e.g. crawling, walking, running and jumping. Running games also develop a child’s locomotive development, such as what’s the time Mr Wolf?

At the same time as a child’s gross motor movements are developing and occurring, so too are their fine motor skills. These movements involve the wrists, hands and finger movements. It is important that “these skills are promoted so that children can develop good manual skills in adult life involving the use of tools and implements.” (Penny Tassoni: Child Care and Education). These smaller movements can be broken down into two categories:

- Fine manipulative skills – these are small movements that are needed when children write, draw or put together a jigsaw puzzle. Fine manipulative activities often involve a little hand-eye co-ordination. Hand-eye co-ordination is actually a separate skill. A treasure basket, feely bag for example, requires fine manipulative skills but no hand-eye co-ordination.
- Fine motor skills- these are small movements using the whole hand and wrist such as twisting a doorknob or opening a jar.

Children need to gain in confidence before attempting some activities such as climbing or attempting to ride a bicycle. Adults therefore need to adopt a sensitive approach to encourage children to attempt such activities and avoid pressuring children.

There are many factors, which can affect a child’s physical development including:

- Poor environmental factors such as inadequate diet and poor living conditions resulting in poor health.
- Delayed maturation of through failure of the nervous system to develop properly.
- Lack of encouragement opportunities to practise skills by parents/carers.
- Heredity and genetic information passed on by the mother and father can affect child’s growth and physical development.

Poor diet can have serious effects on a child’s physical development, as “a child who is developing muscles requires an amazing amount of energy. Without the proper amount of nutrients, a child’s muscles may be weak and slow to develop.” (Penny Tassoni: Child Care and Education). If grasping, crawling, standing and walking are delayed, then other skills like writing and reading may be delayed, too. It is especially important that young children receive proper nutrition because so many changes are happening at once within their bodies. They need to be fed more often than adults so that they have enough nutrients to meet the demand of their fast growing bodies.

Poverty plays an extraordinary part in a child’s development in many ways. Statistically, children from low-income households have a higher incidence rate of ill health and accidents while having a lower life expectancy and educational

achievements. The link between poverty, health and education has prompted the government to put funds into projects such as 'Surestart'.

The quality of care that babies and children receive can affect their development. Children need love, care and stimulation in order to grow and develop. Sometimes children who are not thriving are not receiving the quality of care that they need. Unhappy children may not feel like playing or eating and this does not grow and develop.

Providing a good environment for children must therefore be a priority for parents and early years practitioners, especially when they are being looked after for considerable periods of time.

A person's height is a good example of how inherited information might affect our growth. People who have parents and grandparents who are tall for their generation are more likely to be tall.

Scientists today are making significant breakthroughs in understanding the genetic makeup or 'blueprint' of the human body. This work is beginning to throw more light on why people may be more susceptible than others to certain diseases.

There are many medical conditions and diseases that children might inherit from their parents which can affect their growth and/or physical development. A good example is sickle cell anaemia, which is an inherited blood disease, which limits the oxygen-carrying capacity of the lungs.

Even before babies are born, health professionals are keeping track on their growth. This is done by using ultrasound scans, weighing the mother and also by feeling the abdomen of the mother. Measuring growth is important for many reasons. It acts as an "early warning system and may indicate an underlying difficulty with the health or development of the child." (Penny Tassoni: Child Care and Education).

After birth, the baby's continued growth is carefully monitored to check that normal healthy progress is maintained. It also highlights any faltering growth and ensures early identification and referral of children with developmental disorders and health problems. For example, one in 3000-5000 babies suffer from growth hormone insufficiency, often linked with other disorders.

The test undertaken, and their timing, may vary from one health authority to another. For instance, in some areas the baby's head circumference is measured shortly after birth. Health professionals in other areas prefer to do it two weeks later. This is to allow any distortion occurring during the birth process to have settled.

There are three measurements taken:

- Head circumference
- Weight
- Height

Head circumference is measured to "help direct two groups of disorders:

- Those characterised by large head – this is due to accumulation of spinal fluid, which can cause brain damage.
- Those characterised by a small head including microcephaly, which may arise from some abnormality of brain development in pregnancy, may be a sign of impaired brain growth." (Yvonne Nolan: BTEC National Early Years).

"'Normal' weight is seen by parents as a reassurance that all is well." (Yvonne Nolan: BTEC National Early Years). However, satisfactory weight gain does not rule out growth disorders. For instance, growth hormone deficiency may be linked with normal or increased weight gain.

Babies have temporary weight loss, which may be due to minor illnesses or family disturbances. Prolonged failure to gain weight or continuing weight loss gives a more reliable indication that there are serious concerns. Factors such as parental build and height have to be considered. "Faltering growth can only be used when there is evidence that the slow weight gain is abnormal for that baby." (Penny Tassoni: Child Care and Education).

A report on Child Health Surveillance casts doubt on the value of routinely measuring the length of newborn babies but recommends doing so at six to eight weeks in order to detect very short babies, such as those with severe endocrine disorders.

Efficient growth monitoring depends upon:

- Correct measurement technique
- Use of suitable growth charts
- Accurate transfer of measurements to the charts.

Children's growth is usually plotted on centile charts – nine centile charts first published in 1993 describe current growth more precisely. The centile charts can predict the adult height potential. There are separate charts for boys and girls, as boys are generally heavier and taller than girls. A child's height is plotted between two allocated lines, calculated by the health visitor.

When a child is born, parents are given a personal Child Health Record book, which contains charts on which the child's height, weight and head circumference are plotted and any advice offered by a health visitor.

Information is gained through:

- Growth monitoring
- Discussions with parents
- Physical examinations
- Observations.

The information gained may indicate further specialist monitoring of the child is needed. Many serious problems are found in the following ways:

- Neonatal and six to eight week examinations.
- Follow-up of infants and children who have suffered various forms of trauma or illness affecting the nervous system.

- Detection by parents and carers.
- Detection by midwives, early years practitioners and teachers, health visitors and general practitioners.
- Some defects are first suspected when the baby/child is being examined for other reasons.

Parents generally view their child as a unique individual but, nevertheless, are usually eager to compare their child to others. "Health professionals use both approaches in assessing and trying to understand children's state of physical and mental health and stages of development." (Yvonne Nolan: BTEC National Early Years).

Factors have been identified which enable children's progress to be compared. These factors are expected to be a normal level of development expected for a child according to their age and other factors, such as racial origin. For instance, children from Thailand are generally smaller than those from Western European countries. This is the nomothetic approach of assessment.

Allport saw theories personalities as being of two main kinds. Some psychologists have adopted an approach, which involves "studying each person in their own right, and looking at the individual ways that people's personalities operate." (Nicky Hayes and Sue Orrell: Psychology an Introduction). This is known as the idiographic approach. The idiographic approach to assessment involves children's individual progress, with their uniqueness being observed and considered. This approach may be adopted by specialist health professionals, such as a child psychiatrist. Children with emotional problems may be referred to a child psychiatrist who will assess the individual child's problems, stage of development and needs.

Freud was concerned with the preconscious and the unconscious mind, but a different set of different approaches to personality developed throughout the 1940s and 1950s. Freud's approach was idiographic one. Other psychologists began to focus their interests on how people could be grouped and compared with one another. This was the nomothetic approach to personality. These psychologists were very involved in the development of psychometric tests, which are used to measure psychological characteristics like intelligence, creativity or personality.

Emotional development is "the process of learning to control your emotions and having empathy and respect for others." (Microsoft Encarta 99: Emotional Development) For example, when one of the four-year-olds takes a toy from her friend, and offers her another toy in its place, that's emotional development.

Attachment is a "psychological bond between an infant and her or his primary care-giver, usually the mother." (Yvonne Nolan: BTEC National Early Years). Crying and smiling bring infants in contact with care-givers. This attachment provides a secure emotional base from which mature relationships develop. Research shows that inadequate attachment impedes social and emotional development throughout life. For example, when an "infant is subjected to maternal deprivation, and thus does not form a secure attachment, subsequent development can be impaired." (Yvonne Nolan: BTEC National Early Years). Attachment security is thus an important foundation for social and personality development arising from the baby's experience of early care. Sensitive, responsive care remains a continuing need throughout childhood.

Traumatic events such as physical abuse or malnutrition that occur during infancy are likely to affect development and behaviour in a negative way. Less extreme experiences are also influential, but their effects may be temporary and less apparent. All early experiences are known to influence attitudes towards the learning process, the child's concept of itself, and the ability to form and maintain social and emotional relationships in later life.

The work of John Bowlby has greatly influenced social care policy, childcare practices and research into early relationships. It was after World War II, he was asked to "investigate the effects on children's development of being brought up in orphanages. In 1951 his findings showed that meeting children's physical needs alone was not sufficient – children were being psychologically damaged because of the absence of their mothers." The term 'maternal deprivation' was used to describe this effect. He noticed an overwhelming trend – most of these children had suffered separation from their mothers and families.

The main features of Bowlby's theory were:

- Monotropy – Bowlby believed that babies need to form one attachment and that this relationship would be special and of more importance to the child than any other. He suggested that in most of these cases this relationship would be formed with the mother.
- Critical period – Bowlby was influenced by ethologists such as Lorenz and he believed too that humans would have a 'critical period'. He felt that babies needed to have developed their main attachment by the age of one year and that during a child's first four years, prolonged separation from this person would cause long-term psychological damage.
- Children need 'parenting' - Through his findings Bowlby found that meeting a child's physical needs is not enough for healthy growth and development. Children need to have a main attachment in their early lives that gives them consistent support.
- Children show distress when separated from main attachment – Bowlby outlined a pattern of distress that babies/children show when separated from their carers. This is often referred to as separation anxiety.

There have been many criticisms of Bowlby's work and it is clear to see that some of his work related to the time of writing, after World War II.

Bowlby argued that infants and parents are innately attuned to each other. Infants display what he called "signalling behaviours" such as smiling, laughing, and clinging to their caregivers. Signalling behaviours attract the caregiver's attention and bring them into close contact, and thus enhance the infant's chances for survival. In turn, "adults innately respond to an infant's signalling behaviours." Do you find yourself naturally drawn to babies? According to Bowlby, this is a "survival mechanism that's innate and enables our species to proliferate." (Teena Kamen: Psychology for Childhood Studies).

One of the major criticisms of Bowlby's early work was the role of the mother was overemphasised. At the time of writing, women were the traditional caregivers, and after the war the government were keen for women to return to their traditional roles within the home. Bowlby's later work did emphasise that babies could form an attachment with someone other than the mother.

Bowlby also place a lot of emphasis on the importance of one single attachment. Research by Schaffer and Emerson, 1964, has shown that as children get older, they can develop equally strong attachments to other figures such as their fathers and siblings.

Michael Rutter criticises Bowlby's 'maternal deprivation' as being too general. "Factors such as discord in the family that nature of separation and the quality of attachments made would all affect the outcome." (Yvonne Nolan: BTEC National Early Years). This is why some children are more adversely affected by earlier experiences than others. Also Michael Rutter disagrees with the term maternal deprivation as stated by Bowlby because "children experience deprivation in other ways not just through separation from their mothers; children can also experience maternal deprivation within the family setting even if the mother is actually present." (Teena Kamen: Psychology for Childhood Studies).

Bowlby himself recognised that the amount of time children spend with their mothers is not the crucial factor; it is the quality of time spent together not quantity. Quality is a key factor in children's other attachments. There is no evidence that quality day care has a detrimental affect on young children and it is unlikely that the young children will suffer because their mothers work.

There has been some research that has looked at the quality of babies' early attachments. It would seem that where babies and children are securely attached they are able to explore and develop their independence. Babies and children whose attachment is less secure seem to show clingy behaviour.

Psychologist, Mary Ainsworth elaborated Bowlby's ideas. She argued that all children develop an attachment to their parents, even children who are abused. While children of different parenting styles and environments all develop a bond to their parents, they differ in the security of attachment. Security refers to children's confidence in their caregiver, the belief that the caregiver will be available to meet their needs. Ainsworth's research shows that infants tend to develop secure attachments when their caregivers are compassionate, consistent, and warm.

The quality of attachments was looked at by Ainsworth who is considered alongside Bowlby to be a key figure in this area of psychology. Ainsworth and her colleagues in 1978 created a scenario by which babies' reactions to being left with a stranger and then reunited with their parents/carers was measured. This scenario is now widely used to study attachment behaviour.

The scenario is known as the 'strange situation' and is divided into eight parts with each part lasting three minutes. During the experiment, the baby has sometime by itself as well as with a stranger.

1. Parent and baby enter the room
2. Parent remains inactive; baby is free to explore the room.
3. Stranger joins the parent and infant.
4. Parent leaves the room
5. Parent returns. Settler baby and stranger leaves.
6. Baby is alone in the room
7. Stranger returns and interacts with the baby.
8. Parent returns again and the stranger leaves.

Ainsworth and her colleagues were particularly interested in the reactions of the baby to the parent when they left or returned and the way in which the parent interacted with the baby. From this Ainsworth and her colleagues categorised three types of behaviour.

#### **Type A – anxious – avoidant**

Baby largely ignores parent and shows little signs of distress when parent leaves and the baby continues to play. The baby ignores or avoids the parent on their return and carries on playing. Baby dislikes being left alone, but can easily be comforted by the stranger.

#### **Type B – securely attached**

Baby plays while parent is present, and shows signs of distress when the parent leaves and play is reduced. The baby is easily comforted on return of the adult and carries on playing. Baby cries when left alone because the parent is not there, but can be partly comforted by the stranger. Reactions towards stranger and parent are different.

#### **Type C – anxious – resistant**

Baby is wary and explores less than the other types. Very distressed when parent leaves and actively resists stranger's attempts to comfort. Baby wants immediate contact with parent on return and baby is showing signs of frustration and anger.

From this experiment Ainsworth came to the conclusion that the quality of attachment depended on the parenting that the baby received. "Where parents were able to sense and predict their babies' needs and frustrations, the babies showed type B behaviour." (Yvonne Nolan: BTEC National Early Years).

Bowlby noted that there seemed to be a pattern to the way children reacted if they were separated from their main attachments. This pattern was often referred to as separation anxiety. Separation anxiety can clearly be seen in babies around seven months.

Close relationships with people are vital for a baby's personality and social growth. Even newborns seem to appreciate the importance of people. "They pay special attention to faces and voices, and social stimulation provokes greater interest and emotion than does interaction with objects." (Microsoft Encarta 99: Social Development).

The key to helping a baby form a secure attachment is being sensitive and responsive to her. This includes responding to her cries, caring for her physical needs (like food, warmth, safe conditions, etc.), but also meeting her social needs. Babies and children need more than physical care; they need love, cuddling, and snuggling. Caregivers who read and react appropriately to their baby's signals for social attention are more likely to foster strong attachment bonds.

Social relationships in infancy also influence the growth of self-awareness and self-understanding. A baby's awareness of the responses of other people contributes to a sense of individuality. In the second year, toddlers become capable of self-recognition in a mirror and begin to adopt others' evaluations of them when feeling proud or guilty. In these and other ways, close relationships help very young children begin to understand who they are.

One important aspect of social development is the development of children's moral or pro-social behaviour. The family's role is a vital part in this development. Some psychologists believe that the rules of what is right and what is wrong are learnt through reward, punishment and imitation.

Pro-social behaviour is the type that we tend to encourage in young children e.g. comforting another child or sharing equipment.

One of the most famous approaches to understanding moral development is a cognitive stage. This cognitive approach was put forward by Jean Piaget. Piaget used a clinical interview approach, asking children to explain who they were playing games and telling them stories. Piaget suggested that children's moral development was a three-stage process.

**Pre-moral** (0-4 years): children learn about right and wrong through their own actions and consider the results of adult around them.

**Moral realism** (four to seven years): children's moral development is greatly influenced by the adults in their lives. Their judgements very much depend on what they think the adult expectations would be.

**Moral relativism** (eight to eleven years): children preoccupied with justice and following rules. This means that children have developed a concept of fairness.

**Moral relativism** (eleven years +): children understand the concept of equity i.e. that treating people in exactly the same way may not result in fairness – a child who does not understand their homework may need more teacher's time than a child who does.

Aggression, "form of animal behaviour characterized by an assault or attack by one animal on another." (Microsoft: Encarta Encyclopaedia: 1999). Aggression can take two forms. One form of aggression is conflict between members of different species (interspecific aggression). It can include predatory aggression (food obtaining), defensive aggression, and aggression directed at competitors for resources such as food or water. Aggression of this sort typically does not involve emotions such as anger and can be regarded as a component of feeding and maintenance behaviour.

In many early years settings guns are banned but still children may go round waving ticks and pretending to shoot each other. This begs the question whether aggression is instinctive or whether it is learnt – the nature versus nurture debate.

The ethological perspective considers whether aggression is an inborn instinct. One of the most famous ethologists was Konrad Lorenz who believed that "the fighting instinct in animals has parallels with aggression in humans." (Yvonne Nolan: BTEC National Early Years). He noted that fighting is often ritualised in animals. Through this ritual aggression, animals avoid killing each other. According to Lorenz, humans have inherited the 'warrior' instinct, but no longer ritualise aggression because they have developed weapons. Lorenz also suggested that aggression in animals and humans and is spontaneous as if the aggression has built up inside and needs to show itself.

There are many criticisms of Lorenz's theory, for example, when Lorenz states that "Aggression is learnt behaviour." He did not consider that learning played a part in aggressive behaviour. Studies have, however, shown a correlation between learning and aggression. Also that "Aggression is inevitable." (Sandy Green: BTEC National Early Years). His idea that aggression builds up inside and needs an outlet has been criticised by other ethologists and biologists who suggest that aggression in animals is show as a result of environmental factors i.e. if food is plentiful, territorial fights might not be needed.

Another theory by Berkowitz suggests that aggression is caused by nurturing. This theory builds on the frustration, aggression hypothesis, but looks carefully at why aggression is not automatically show when people become frustrated. This theory suggested that although frustration causes anger, it might not necessarily cause aggression. Experiments carried out by Berkowitz in 1966,1967, and 1993 suggested that in order for aggression to be shown there needs to be some other triggers. Triggers used in the experiments were weapons being available and seeing violent films. The aggressive cue theory would therefore explain why sometimes we can cope in some situations when we are angry, whereas in similar situations we might show some types of aggressive behaviour.

There are many ways in which you could manage unwanted behaviour for example, by reinforcing good, positive behaviour, which is not aggressive, e.g. praising a child who helps another child. Aggressive behaviour should be calmly stopped and the child should be warned, and punished if it is continuous behaviour, not letting a child participate in an activity. Providing children with role model who is not aggressive. This is important for nursery staff to always provide an example of no-aggressive, clam warm behaviour towards children. Children will respect this and often copy an adult's behaviour. It would be a good idea to show an aggressive child to experience the emotions of the victims, through role-play so the child understands how he is affecting other children. By removing aggressive toys for example, some playgroups and nurseries have a policy that there are no toy guns for children to use. Encouraging children to think about and discuss aggressive behaviour and what it could do to someone and what the consequences might be on a child who is aggressive. On work placement I know that the school have a policy about fighting and guns and do not promote fighting or violence towards anyone. The children's behaviour seems to improve but it is not to say children are not subjected to viewing violence at their own home.

Play is very good for diverting aggressive instincts and behaviour, by using a hammer to nail pieces of wood together to make a boat is preferable to using a hammer to hurt someone and destroy property.

Stereotyping has negative effects on children's self-concept. These include, social, cultural racial and gender stereotyping. Currently the government is arguing that social background should not be considered an excuse for poor educational achievement. In the past, children from poorer environments were expected to achieve less. It was common for them to follow in their parents' footsteps.

A stereotype is defined as a "standardised image or conception of a type of person" (The Collins Concise Dictionary: stereotype). For example, a stereotype of an obese person might be that they are lazy or greedy.

Stereotypes can make us think that we know a group of people and this may change our attitude towards someone who belongs to a certain stereotyped group. Once we meet people from these groups, we often realise that our thoughts about them were not accurate. This is why it is important for early years practitioners to introduce activities and visits from many different people to show children the falsehood of stereotypes.

Children are aware of their gender identity. Research has shown that "by the age of 2½ years, children think girls prefer to play with dolls and engage in domestic activities with mum, while boys prefer to play with cars or construction toys and helping dad." (Teena Kamen: Psychology for Childhood Studies).

Gender stereotyping is especially damaging to children's social development and their personality as it damages their self-image and identity of girls because it can lessen their confidence and lower their self-esteem. Boys too can be limited by gender stereotypes by being forced to behave tough or less caring ways in order to conform and by accepted by others. This can be overcome by early years practitioners providing role-play opportunities including dressing-up clothes, which allow children to explore different roles. Also avoiding books and games, which demonstrate gender stereotypes.

Even from a very young age children are aware of racial differences and racial prejudices. Young children are influenced by images, ideas and attributes which create prejudice and lead to discrimination. Research shows that by the age of 3 years old children can differentiate between skin colours. Research also shows that by the age of 5 years, many white children believe that black people are inferior; while many black children believe that they are viewed with less respect than white people. It is important that in early years settings adults promote children's positive attitudes towards themselves, other people and cultures.

Adults working with young children must not have stereotyped views about children's potential or have low expectations from a particular ethnic or culture groups. Many ethnic minority families have a strong commitment to education and their children's academic progress.

Cultural and racial stereotypes can also have a negative effect. Often people from foreign backgrounds are not fully valued for their abilities. There are a high percentage of young people from ethnic minorities in low status jobs. This may be for a variety of reasons including cultural and racial stereotyping. This could cause children to think less of themselves, meaning if a child is expected to behave badly the child will do so. This can affect how the child develops mentally, as the child will behave how they are expected to and not disappoint the adults expectations, and therefore might achieve less in their education because of this.

Play is very important in promoting physical, social and emotional development. There are many ways in which this can be done, through various activities etc.

Professor Kathy Sylva is clear in her view of the value of play "... it is one of the activities most significant to the child's development." Many other psychologists support Sylva's view:

1. Erikson in 1950 stressed the importance of children using play to help deal with life experiences, which the child tries to repeat. The child also tries to organise its personal world in relation to the real world.
2. Hutt and Bhavnani's research in 1972 found that children who assessed as being low in exploratory play when they were pre-schoolers tended to be low in curiosity and to experience problems in social adjustment. Children judged to be active explorers were likely to score high on tests of creativity and show evidence of being independent and curious.
3. Connolly and Doyle in 1984 found that the amount of fantasy play were linked to social competence.

Researchers stress the importance of the emotional atmosphere around children during play. This appears to be important than a vast array of toys. Parents can play an important role in enhancing their child's experiences. Cohen in 1993 suggested "parents can encourage imaginative play by accepting and respecting their children when playing with them." (Sandy Green: BTEC National Early Years). They give children confidence to explore the world around them and try out new roles.

Imaginative play is also referred to as pretend play can be very good in promoting a child's physical, social and emotional development. It particularly stimulates language but also the body and how the child moves and acts with the people around them.

Imaginative play is very good for the development of fine manipulative movements, such as hand-eye co-ordination e.g. pretending to pour drinks from a kettle to a cup. It develops gross motor skills e.g. pretending to go shopping by getting on a tricycle.

Imaginative play also enhances social and emotional development. It helps develop the understanding of gender and social roles. Children as part of trying to make sense of their world and their role in it. It helps develop and explore friendships between children. Pretend play helps promote enjoyment and freedom e.g. they create their world, and children can feel released from the world and adults.

Activities such as using puppets can help children express their emotions and needs without being aggressive or attention seeking. From placement I have observed this with one child who seemed to be very shy and quiet and unable to communicate, and she was able to express her feelings through role-play but also through stories and puppets. It is important to remember to choose stories where central characters express their emotions and also look for ways of helping children talk about things that make them happy, sad, angry or jealous.

Role-play, dance and drama are used to help children express their emotions and their thoughts about the world. Children can show self-expression when moving to music. Children enjoy having space and music to move to, this why children can interpret their feelings through their dancing and body language and also let of steam at the same time. Through observing a dance lesson during my work placement dance seems to be the place where children are able to let off steam and just dance and act out their emotions and feelings. Dancing to music and doing actions seems to relax the children and calm them down from what may have been a hard working day. The children seem to enjoy dancing to the music and doing what may seem bizarre actions and pretending to be something different helps also take their mind off any problems or worries which they might have.