Introduction

Welcome to your case study!

Congratulations! You will follow the lifespan of baby girl Naomi Rowe. Try to use your best judgment, textbook, classmates, instructor, and supplementary resources to make the best decisions to help her grow.

This semester you will observe Naomi as she grows from infant to child to teen to adult. Who will she become in your care? Will you understand and agree with all decisions available within her circumstances? How will you feel about the tough decisions that forever shape her path in life?

Meet Naomi Rowe

Naomi is the first daughter of Alicia and Justin Rowe, a biracial couple who've been married for two years. Justin is Caucasian, and Naomi identifies as African American, although she, too, is
the child of an African American mother and Caucasian father. The Rowes are middle income. Justin is active duty with the army and attending college part time on tuition assistance, pursuing a degree in computer science. Alicia has taken some college classes, but with Naomi on the way, she has suspended her studies. Shortly before Naomi is born, Justin is deployed with his unit. He will be gone for two years, making Alicia a de facto single mother for this time. When he gets home, he’ll be granted 10 days of paternity leave.

Through this case study and your lifespan course you will be asked to consider decisions regarding Naomi’s physical, emotional, and cognitive growth and development from several perspectives: her mother Alicia’s, her father Justin’s, and her grandparents’ as well as those of her spouse, children, other family member, friends, teachers, doctors, and supervisors.

Now let’s get started.

1. Development and Its influences

Today you will practice the following:

1.1 Outline five principles of the lifespan developmental perspective.
1.2 Explain three theoretical controversies about human development.
1.3 Summarize five theoretical perspectives on human development.
1.4 Describe the methods and research designs used to study human development.

Alicia and Justin were happy to learn they’d be having their first child. Sometime after their first anniversary, they decided they wanted to start a family, and even though they knew Justin would likely be deployed before a baby would be born, they decided this was the time. Justin’s military status gives them TriCare insurance, which means Alicia and the baby will have excellent prenatal and perinatal care. Alicia won’t have to be worried about anything—well, almost anything. Not long after she was married, Alicia suffered the double blow of both her parents dying. It saddens her every time she
thinks about her parents not becoming grandparents and her baby not knowing half of her grandparents. But Justin’s parents live somewhat close by, and they are loving people. Alicia knows the baby won’t have a lack of grandparent attention.

2. Biological and Environmental Foundations

Today you will practice the following:

2.1 Discuss the genetic foundations of development.
2.2 Identify examples of genetic disorders and chromosomal abnormalities.
2.3 Discuss the choices available to prospective parents in having healthy children.
2.4 Describe the interaction of heredity and environment, including behavioral genetics and the epigenetic framework.

Alicia and Justin spend time decorating the second bedroom in their modest-but-comfortable apartment off base before Justin gets his orders to deploy. This gives him the opportunity to participate in as much of the pre-birth nesting as he can. They also spend hours recording Justin reading baby books and taking pictures to make into photo albums so that their baby will know the sound of Daddy’s voice and the look of Daddy’s face when he finally returns home.

Once Justin leaves, Alicia faces several long, lonely months of pregnancy without him. As her belly grows, she rocks in the chair they put in the nursery and talks to their developing daughter. “Oh, Naomi, it’s going to be so long before you meet your daddy. I wish he could be there when you’re born to hold you and see you take your first breath. He’s going to miss all of your first-firsts . . . rolling over, sitting up, first steps.” Alicia sheds a few tears at the thought.

Because the Rowes live modestly and Justin works for the army, they have good health care and access to excellent foods like fresh produce and free-range beef and chicken. Alicia can see her midwife whenever she wants to, and she doesn’t have to worry about having money for tests or prenatal medications. Her husband, however, is gone. Not only is he gone; he’s very gone and isn’t coming back for 24 months as well. Sometimes the loneliness is overwhelming. Sometimes the thought of having a child when she still feels like a child at 22 and raising that child for two years by herself feels overwhelming. There are days when Alicia wishes she didn’t have to go anywhere or see anyone. These and other biological and environmental factors may increase her prenatal stress levels. Biologically speaking,
this means that greater-than-ideal amounts of corticosteroids will pass the blood-brain barrier during her pregnancy with Naomi. If she’s depressed, Naomi may also experience an excess of serotonin production during her prenatal development. Either or both of these may have long-term consequences for her development across all domains.

3. Prenatal Development, Birth, and Newborn Experience

Today you will practice the following:

3.1 Describe the three periods of prenatal development that begin with conception.
3.2 Identify how exposure to teratogens can influence the prenatal environment.
3.3 Explain the process of childbirth.
3.4 Discuss the neonate’s physical capacities, including development in low-birth-weight infants.

“Alicia,” Justin’s mother says a few weeks before Naomi’s due date, “I have a treat for us today. Get dressed, and I’ll pick you up in an hour.” Alicia doesn’t want to go anywhere. Her back aches, and she misses Justin. His mother’s only being nice, and she doesn’t want to hurt her feelings. So, she gets dressed, brushes her teeth, and gets in the car when her mother-in-law Sarah arrives.

They spend a lovely day at the spa, where Alicia is treated to a special suite of services just for pregnant women. She even gets a pedicure. She can hardly see her toes anymore, but it feels great, and Sarah tells her the pink nail polish she picked out is perfect. After she’s home and alone again, she admits to herself that it was a good day, and she’s glad she went. She’s going to try to make a point to go out somewhere, even if it’s just to walk down the street once each day.

Naomi is born without complications at 38 weeks. She is healthy and scores highly on her one- and five-minute APGARS. This is due, in large part, to the excellent care Alicia took of herself during her pregnancy and the extras afforded to her from Justin’s job, like TriCare insurance and on-demand medical care.

Naomi will grow accustomed to the stories of her birth, stories told by her mom and by Grandma Sarah and Grandpa Joe. They all had their own versions, but they start and end the same. Mom called Grandma Sarah to say her back hurt so badly that she couldn’t sleep, and her grandparents took Mom to the hospital. In the end, only Mom and Grandma Sarah were in the room with the midwife when Naomi was born. Naomi loves this part because her mom says that three generations of strong Rowe women were in that room in the best way at that moment.
4. Physical Development in Infancy and Toddlerhood

Today you will practice the following:

4.1 Discuss growth and the role of nutrition in development during infancy and toddlerhood.
4.2 Summarize brain development during infancy and toddlerhood.
4.3 Compare infants’ early learning capacities for habituation, classical conditioning, operant conditioning, and imitation.
4.4 Describe infants’ developing sensory abilities.
4.5 Analyze the roles of maturation and contextual factors in infant and toddler motor development.

Naomi spends her first months at home alone with Alicia. She is a happy, easy baby. In the beginning weeks, Alicia is happy for the quiet. Her mother-in-law, Sarah, comes over every couple of days to give Alicia a break but not so often as to intrude, and the arrangement works well. However, after a few months pass, Alicia begins to experience postpartum depression. She becomes easily irritated, impatient with Naomi, and often resentful. She feels her bond with Naomi weakening, and even though she wants that to change, she feels powerless to make things better.

At Naomi’s one-year checkup, the pediatrician asks a series of routine questions about Naomi’s behavior and about her interactions with Alicia. Noting Alicia’s halfhearted responses, the pediatrician stops her and puts her hand on Alicia’s arm. “Alicia, what’s bothering you?”

With no warning, Alicia feels tears welling in her eyes. She nods, then shakes her head, and nods again. Patting Naomi’s knee, she says, “Everything’s fine. It’s all fine.”

“Doesn’t look fine,” the doctor says.

Alicia shakes her head. “Really it is. I’m sorry to be so much trouble. I’ve just been a little blue lately.”

“Sounds like postpartum depression to me,” the pediatrician tells her and, seeing Alicia’s confusion, adds, “the baby blues. Don’t worry. It’s very common. I’m going to ask that you call your midwife and make an appointment for this week. Can you do that?”

Alicia nods. “You think it will help?”

“I do.”

When Alicia leaves Naomi’s checkup—with a perfect report on Naomi—she feels lighter for the first time in months.
Despite Alicia’s struggle with postpartum depression, Naomi has an active and stimulating infancy. Sarah and Joe are involved in her life and buy her a number of educational toys. Alicia joins a Mommy and Me playgroup that has playdates twice each week. Being around other children offers Naomi the opportunity to learn new words and practice communicating with others. She’s outside so often that blue becomes her favorite color (because she loves the bigness of the sky so much), and she develops a fascination for how the natural world operates, like how flowers grow and why butterflies like flower gardens.

5. Cognitive Development in Infancy and Toddlerhood

Today you will practice the following:

5.1 Discuss the cognitive-developmental perspective on infant reasoning.
5.2 Describe the information processing system in infants.
5.3 Discuss individual differences in infant intelligence.
5.4 Summarize the patterns of language development during infancy and toddlerhood.

Most of the time, Alicia takes Naomi to story time at the library or to play with other children in the park, but sometimes Grandma Sarah takes her. Alicia likes it when Grandma Sarah takes her because she always gets ice cream for a treat on the way home. Mommy taking her is the very best, though, because she gets on the ground and plays with Naomi in the sandbox building sandcastles and making up stories when they play. Naomi’s favorite stories are the ones when Mommy starts by saying there’s a poor, trapped prince in the high tower of the castle, and Princess Naomi must ride on her valiant steed to rescue him. Naomi isn’t quite sure what a valiant steed is, but it sounds fun.

When they play The Princess Saves the Prince, Mommy does silly things. She makes Naomi run around the sandbox counting to funny numbers like 11 or 13 or she makes Naomi figure out a riddle like what letter comes between H and J in the alphabet. When Naomi can get the right answer, then she saves the prince! She’s a good rescuer. Other children at the park try to figure out Mommy’s riddles, too. Sometimes, they’re faster than she is (but Mommy always lets Princess Naomi do the rescuing anyway), but mostly Naomi figures out the answers first. Mommy says she’s clever. Naomi isn’t sure, but she thinks that word means she’s smart.
6. Socioemotional Development in Infancy and Toddlerhood

Today you will practice the following:

6.1 Summarize the psychosocial tasks of infancy and toddlerhood.
6.2 Describe emotional development in infancy and identify contextual and cultural influences on emotional development in infants and toddlers.
6.3 Identify the styles and stability of temperament, including the role of goodness of fit in infant development.
6.4 Describe how attachment develops in infancy and toddlerhood.
6.5 Differentiate the roles of self-concept, self-recognition, and self-control in infant development.

Alicia and Naomi have a difficult time during Alicia’s postpartum depression, and Naomi’s attachment process with her mother is interrupted. Thanks to the pediatrician’s intervention, Alicia is able to get help after only a few months, and she and Naomi get their relationship back on track. By the time she’s 18 months old, Naomi has biweekly playdates with her “friends,” usually at a public park or story time at the public library. Naomi prefers the park.

Just before her second birthday, her mother makes fish sticks and tater tots for dinner one night. Naomi has two fish sticks in her mouth and is singing her ABCs around them when the door to their apartment opens. Sometimes Grandma Sarah and Grandpa Joe come over for a surprise, and she turns around in her chair to wave to them. It isn’t her grandparents. In the doorway stands a man she doesn’t know. He looks sort of familiar, but she doesn’t know him. “Mommy!” she calls to Alicia, who’s in the bedroom folding clothes. “Mommy!”

Alicia calls back to her, “Coming. Just a minute, sweetheart!”
The man comes into the apartment and closes the door. “Naomi?”
Naomi isn’t certain about the man, but she nods and swallows her fish sticks. “Yes.”
“Naomi,” he says as he gets on his knees, “it’s Daddy.”
She climbs off her chair and walks over to him. He does look a little like the pictures in her room. She pokes at his arm and takes off his hat. Without his hat, he looks more like the picture. “Daddy?”
“Yes, it’s Daddy. Can I hug you?”
“Yes, Daddy.”
While Naomi gets her first hug from her daddy, who seems to be happy but is crying, Mommy comes back into the room. She yells, “Oh! Justin!” Daddy stands up, still holding Naomi, and hugs Mommy, too. “Why didn’t you tell me you were coming today?”
“I wanted to surprise my girls,” Daddy said.
Naomi pulls on his ear. “Want some fish sticks, Daddy?”
7. Physical and Cognitive Development in Early Childhood

Today you will practice the following:

7.1 Discuss physical development in early childhood.
7.2 Compare Piaget's cognitive-developmental and Vygotsky's sociocultural perspectives on cognitive development in early childhood.
7.3 Describe information-processing abilities during early childhood.
7.4 Summarize young children's advances in language development.
7.5 Contrast social learning and cognitive-developmental perspectives on moral development in early childhood.
7.6 Identify and explain approaches to early childhood education.

Naomi is so excited for preschool. Her father took her shopping for new tennis shoes, and her mother took her to visit the school where she would spend part of every day with her friends learning to read and write. She has a blue book bag with white stripes, and her mother is going to pack her lunches in a matching lunchbox. She’s going to have so much fun!

Alicia and Justin go to Naomi’s first parent–teacher conference together. The conference is student led, and Naomi goes through a folder of work she selected to show her parents while her teacher tells them how she’s doing in different tasks. She is especially proud when her teacher tells them how well she’s doing writing her ABCs. Naomi works hard at writing.

8. Socioemotional Development in Early Childhood

Today you will practice the following:

8.1 Discuss young children's emerging sense of initiative, self-concept, and self-esteem.
8.2 Summarize the development of emotional understanding, regulation, and behavior in early childhood.
8.3 Identify four parenting styles and their associations with child outcomes.
8.4 Compare biological, cognitive, and contextual theoretical explanations of gender role development.
8.5 Explain the function of play and the form it takes during early childhood.
Naomi sits at the table with her mother and father during the parent–teacher conference, while her teacher tells her parents that she has something called “good leadership potential.” Her teacher says she likes to help her friends in the class, and Naomi nods. This is true. Then her teacher says that sometimes Naomi can talk a little loudly or a little too much and not give other children a chance to speak in class. She frowns. She doesn’t think she does this. Mommy looks at her with a funny face. Naomi can tell she isn’t angry, but she isn’t happy either. She wonders if she’s still going to get ice cream on the way home.

9. Physical and Cognitive Development in Middle Childhood

Today you will practice the following:

9.1 Identify patterns of physical and motor development during middle childhood and common health issues facing school-age children.
9.2 Discuss school-age children’s capacities for reasoning and processing information.
9.3 Summarize views of intelligence, including the uses, correlates, and criticisms of intelligence tests.
9.4 Examine patterns of moral development during middle childhood.
9.5 Summarize language development during middle childhood.
9.6 Discuss children’s learning at school.

In elementary school, Naomi does well academically. She also shows a talent for soccer, and her father signs her up to play on the community rec team. She gets new cleats, her own ball, and a team jersey. She loves playing on a team with other girls and looks forward to her Wednesday afternoon practices and Saturday games. Her parents tell her that as long as she’s doing well in school, she can play as much soccer as she wants to. Pretty soon, Naomi’s playing in all her spare hours. Her mom has to chase her down in the park close to where they live most evenings just so she
can come home to eat and do her homework. “Girl, you and that ball’ll be the death of me,” Mommy scolds, but Naomi has the feeling that she isn’t really mad.

10. **Socioemotional Development in Middle Childhood**

Today you will practice the following:

10.1 Describe school-age children’s self-conceptions and motivation.

10.2 Examine the roles of friendship, peer acceptance, and peer victimization in school-age children’s adjustment.

10.3 Discuss family relationships in middle childhood and the influence of family structure on adjustment.

10.4 Analyze the role of resilience in promoting adjustment to adversity, including characteristics of children and contexts that promote resilience.

When Naomi is in the second grade, her father is deployed again. He has to go away sometimes but usually only for a month or so. Her mom explains that this is because she and Daddy decided it would be better if Naomi lived as much as she could in one place. So, she and Mommy don’t follow Daddy all the time when he goes different places in the United States (a place she’s learning about in school). But when he leaves for a long time a long way away, she knows because he takes her out for a special Daddy–Naomi dinner and explains why he’s going away and where he’ll be. He’s going to a base on the other side of the world in a country called Turkey. Naomi laughs and tells him that’s a silly name for a country. Daddy agrees. Then he explains how important Turkey is to a lot of different people from other countries right now, and she tries to understand. She feels bad for the children he tells her about, the ones living there in big tents and warehouses because they had to run away from their own houses in another country, but she’s not sure why other kids get to have Daddy before she does. That doesn’t seem fair at all.

“Will you send me pictures?”

“All the time, my little north star.”

She likes it when he calls her a “star,” because she feels special. “I wish you didn’t have to go, Daddy.”

“So does Mommy,” her mother says as she joins them in Naomi’s room, “but we’ll be all right. Won’t we, kiddo?”

“I know you’ll take care of each other, and I’ll be back before you know it,” Daddy says, but Naomi is pretty sure that last part isn’t true.
11. Physical and Cognitive Development in Late Childhood

Today you will practice the following:

11.1 Describe school-age children’s self-conceptions and motivation.
11.2 Examine the roles of friendship, peer acceptance, and peer victimization in school-age children’s adjustment.
11.3 Discuss family relationships in middle childhood and the influence of family structure on adjustment.
11.4 Analyze the role of resilience in promoting adjustment to adversity, including characteristics of children and contexts that promote resilience.

By the end of elementary school, Naomi is a star on her community league soccer team. She loves playing. Sometimes, when she’s alone on the field near her apartment and she’s practicing dribbling, she thinks about learning to play when she was little. She misses her dad and how they took that Saturday to pick out her cleats and a brand-new ball. She still practices with the same ball even though it’s just a little smaller than regulation. She calls it her lucky ball because her dad bought it for her. If she had her choice, she would go to school on the soccer field!

She likes school well enough, and she does great in most of her classes. She doesn’t do poorly in any of them. Mr. Cooper in her fifth grade science class likes her because she’s good at all that plant stuff like photosynthesis. Her mom tells her this is to be expected, that she always loved being outside and learning about nature when she was a little girl. She even keeps all of their house plants healthy and green. Her mom has a black thumb. She likes plants in the house but can’t keep them alive. Naomi seems to have a touch. She tries to show her mom how easy it is, but Alicia loses interest quickly and says, “Honey, you know that’s your thing. As long as I don’t have to throw them out dead, we’re doing great.” “We’re” not doing anything, Naomi thinks, but she doesn’t say it.

12. Socioemotional Development in Late Childhood

Today you will practice the following:

12.1 Summarize the processes by which self-concept, self-esteem, and identity change during adolescence.
12.2 Discuss the nature of parent–child relationships in adolescence.
12.3 Examine the developmental progression of peer relations in adolescence.
12.4 Analyze patterns of adolescent sexual activity including sexual orientation.
12.5 Identify common psychological and behavioral problems in adolescence.
“Will we always live here?” she asks her mom one night as they eat dinner. They’re having tomato soup and grilled cheese sandwiches. Her mom makes the best grilled cheese sandwiches in the world, and Naomi has a lot of friends whose moms have given her grilled cheese sandwiches. She considers herself something of an expert.

“What do you mean ‘here,’ Naomi?” Mom asks. “Do you mean in this town or in this apartment?”

“Either, I guess.”

“Well,” her mom says with a big sigh, “we’ll probably always live in the town or close by. Your grandparents are getting older, and it will be important to be close to them as they age. As for this apartment? I hope not. I wouldn’t want a house with all the upkeep by myself when your dad is gone, but maybe when he gets back, we’ll talk about moving to a bigger place.”

Naomi would like that. It’s hard to have sleepovers with more than one or two girls in their tiny apartment. If they’re loud at night, it bothers her mom, and sometimes she yells at Naomi to be quiet. Sometimes her mom yells at her to be quiet even when she’s alone and not making much noise. Naomi’s dad is on his third deployment in her life, and she’s figured out that Mom gets sad—like big sad—when he goes away for a long time. Mom calls it “depression,” and she takes special medicine to help her feel better. Her mom usually talks longer to notice her depression than Naomi does, though, and Naomi has to live with a few weeks of missed soccer games, extra yelling, and a lot of crying—a lot of crying. It scares her, but mostly it makes her feel nervous because she doesn’t want her mom to be so sad. She thinks she should be able to make her mom happy, but when she tries, she only seems to make it worse. That’s when her mom figures out she needs to see the doctor most of the time. Naomi’s always glad when that happens because then she doesn’t have to make up reasons why her mom isn’t at a game or why she forgot to send cupcakes for the class field trip or something else she didn’t do.

13. Physical and Cognitive Development in Adolescence

Today you will practice the following:

13.1 Evaluate the "storm and stress" perspective on adolescence in light of research evidence.
13.2 Summarize the physical changes that occur with puberty and the correlates of pubertal timing.
13.3 Discuss brain development during adolescence and its effect on behavior.
13.4 Identify ways in which thinking changes in adolescence and how these changes are reflected in adolescent decision-making and behavior.
13.5 Discuss moral development and influences on moral reasoning.
13.6 Describe the challenges that school transitions pose for adolescents and the role of parents in academic achievement.
Naomi stands with her foot on top of her lucky soccer ball, staring into the bleachers. She’s trying to practice, but there’s Bradley Carter again, sitting there all alone watching her. He is so annoying. Even if sometimes he does look a little cute, she’s busy trying to study or play her way into a college scholarship. It’s bad enough she’s a girl with the periods and the hormones and the pimples. She doesn’t need to add boys on top of all that.

Her parents seem to always be asking her if she likes someone—anyone. No, I don’t, she yells in her head, but she just shakes her head no. Bradley Carter’s face sometimes leaps into her mind then, but she pushes it right back out again. No, thank you. “It’s okay if you do,” her mom assures her, but her dad’s expression says otherwise. She keeps quiet and wonders if she might score more goals—or less!—if Bradley comes to one of her games.

14. Socioemotional Development in Adolescence

Today you will practice the following:

14.1 Summarize the processes by which self-concept, self-esteem, and identity change during adolescence.
14.2 Discuss the nature of parent-child relationships in adolescence.
14.3 Examine the developmental progression of peer relations in adolescence.
14.4 Analyze patterns of adolescent sexual activity, including sexual orientation.
14.5 Identify common psychological and behavioral problems in adolescence.

“Mom,” Naomi asks one night as they make dough for a homemade pizza, “when you were my age, did you have trouble with your friends?”

Her mom frowns but doesn’t look at her. Naomi sees her lips turn down before she asks, “What kind of trouble?”

“I always had so many friends in elementary school, even in middle school. But now . . .” She doesn’t finish the sentence, but her mom picks it up for her. She knows she will because her mom is like her, biracial. It shouldn’t, but it makes a difference.

“Oh, that. Well,” she says, kneading dough, “it’s normal for all kids to have fewer and fewer friends as they get older but to have those friends become more intimate, to be more important to your life—like Erica and Sydney are to you,” she adds.

Erica and Sydney are Naomi’s best friends. Sydney is white, but Erica’s also mixed. Her mom is black, and her dad is Japanese. She doesn’t know what she would do without them. They are the Three Musketeers. Sometimes, their parents call them the triplets.

“I guess.”

“What’s bothering you, Naomi?”

“I guess I feel sort of . . .” She struggles for the right word. “Clan-less. When I try to hang out with the white kids, like when I’m just with Sydney, they want me to act ‘whiter,’ whatever
that is, and when I’m with Erica and the black kids, they want me to act ‘blacker.’ I don’t want to be one or the other. I want to be both.”

Her mom nods. “I understand. You know, I’m biracial just like you, but when I’m asked what my race is, I say African American.”

“I didn’t understand that before, but I’m starting to.”

“At some point, it was just easier to be one or the other.”

Naomi hugs her mom’s waist, covering them both in flour. “Do you ever feel like you turned you back on your white heritage?”

“Pretty much every day.”

Naomi struggles to be true to both sides of her family, especially because her only living grandparents are white, and her only black living relative is her mom. It’s hard, but she feels like she manages most of the time. Her parents help her by making sure she has opportunities to explore her history—both sides of it. As graduation approaches, so does Bradley Carter, who among other wonderful things, is also of mixed race and really gets her. She wishes she’d known that sooner.

Bradley attends all of Naomi’s soccer games. He takes her out to dinner or the movies but only one night each week, which is what she tells him she has time for. He hangs out with her parents for family game night. She pokes at him a lot, trying to find the flaw. He doesn’t even pressure her to have sex, and everyone she knows is having sex. Eventually, she starts to wonder if something’s wrong with her.

“Don’t you think I’m pretty?” she asks him.

“I think you’re gorgeous.”

“Then I think we should do it.”

Bradley squeezes her hand, but he also laughs. “I think we can manage a way to be a little more romantic than that. But, Nae, you’re leaving for college in a few months. Are you sure you want to do this? Like now and with me?”

She is sure.

15. Physical and Cognitive Development in Emerging/Early Adulthood

Today you will practice the following:

15.1 Describe the features and characteristics of emerging and early adulthood.

15.2 Summarize the physical developments of emerging and early adulthood.

15.3 Analyze physical and sexual health issues in emerging and early adulthood.

15.4 Compare postformal reasoning, pragmatic thought, and cognitive-affective complexity.

15.5 Explain how attending college influences young adults’ development, and identify challenges faced by first-generation and nontraditional students.

15.6 Discuss vocational choice and the transition to work.
Naomi’s parents drive her to college with a tiny U-Haul attached to the back of their SUV. She’s nervous, excited, and just a little scared. She and Erica are going to room together. That’s a lucky break for her because she thought the university would make her room with one of the other soccer players—not that she isn’t looking forward to being good friends with the team. She is. It just feels safe somehow living with one of her two best friends. Plus, Erica knows Naomi’s personal weaknesses. She’ll keep her on track so she doesn’t screw up and lose her soccer scholarship.

After unloading all her boxes and setting up a lot of her things, she looks around her dorm room, terrified. Her dad asks what’s wrong, and she tells him she’s scared. When he tells her she’ll be fine, she asks, “How do you know?”

“If you’ll let me get a little meta for a minute, I’ll show you.” He takes a picture out of his wallet and hands it to her. In the picture, he’s standing in a desert somewhere in the Middle East wearing army fatigues and holding another picture. It’s the three of them, her parents and her, when she was first born. Her dad is holding her. He’s holding the picture in one hand, making the sign for “I love you” with the other hand, and smiling big. “That’s how I know.”

“Okay, Dad. I’ll do my best.”

“That’s all anyone can do.”

16. Socioemotional Development in Emerging/Early Adulthood

Today you will practice the following:

16.1 Summarize psychosocial development in emerging and early adulthood.

16.2 Discuss influences on friendship and mate selection and interactions in emerging and early adulthood.

16.3 Analyze the diverse romantic situations that may characterize emerging and early adulthood, including singlehood, cohabitation, marriage, and divorce.

16.4 Compare the experiences of young adults as stepparents, never-married parents, and same-sex parents.

Her dad takes a trip to the dumpster to throw away packing trash, while Naomi and her mom unpack some clothes. When he returns, they hear him enter the room with a booming, “Guess who I found wandering around outside?”

Naomi assumes it’s Erica, and she’s glad that her best friend will be with her when her parents leave.

“Surprise,” Bradley says softly from the doorway, and despite herself, Naomi is overjoyed at seeing him. She gives him a hug and a quick kiss before asking him why he’s there. “Turns out they had room for me after all,” he tells her, referring to his previous status on the university’s wait list.
“Wait!” she yells. “You’re going here?”
“I am.”
“That’s great!”

Naomi knows she’s supposed to go to college and experience new things—and she will—but taking her best friend and her sort of boyfriend can’t be all bad. With Bradley’s arm around her, she wonders how soon she can get rid of her parents.

For four years, Naomi is single-minded. She plays hard on the field, contributing to her team’s success but never trying to outdo her teammates. She wins the annual Best Team Player award all four years and scores the winning goal for the state championship in her junior year. She loves almost every minute. In class, she’s just as devoted. Majoring in botany, she works hard to finish her degree a semester early, near the end of which she applies to and is accepted in the university’s master’s program. She’s almost able to complete this degree by the end of her soccer eligibility. Her parents gladly pay for her last year of school. After graduation, she takes a job working for the state’s agricultural department.

She and Bradley have a tumultuous relationship. He’s focused on his own studies in the history department, but he tries to make all of Naomi’s home games and most of her closer road games. However, they both get busy, and by sophomore year, Naomi asks for a break from their relationship. Bradley agrees, and she wonders if he already has his eye on someone else. She does. For almost a year, they date other people—in her case, several other people. Naomi decides by junior year as she nears the completion of her first degree, that she’s had enough looking around. She calls Bradley and asks him if he wants to get coffee one Saturday morning. When he agrees, she goes prepared to grovel, but so does he. They laugh and agree that they both needed to grow up before they could settle down, and they’re ready to do that now.

17. **Physical and Cognitive Development in Middle Adulthood**

Today you will practice the following:

17.1 Summarize age-related physical changes during middle adulthood.
17.2 Discuss common health conditions and illnesses and the roles of stress and hardiness on health during middle adulthood.
17.3 Contrast the findings of cross-sectional and longitudinal studies of crystallized and fluid intelligence over adulthood.
17.4 Analyze changes in cognitive capacities during middle adulthood, including attention, memory, processing speed, and expertise.
After working for several years in the Department of Agriculture, Naomi resigns her position to begin a start-up small business. She decides to open a company that will produce organic fertilizer and pest retardant for the agricultural industry. It’s a leap of faith in herself, but she feels like this is the time and she has the skills to make it work. She’s never failed at much to speak of, but if this doesn’t work out, at least she tried.

18. Socioemotional Development in Middle Adulthood

Today you will practice the following:

18.1 Summarize the theories and research on psychosocial development during middle adulthood.
18.2 Describe the changes that occur in self-concept, identity, and personality during middle adulthood.
18.3 Analyze relationships in middle adulthood, including friend, spousal, parent–child, and grandparent relationships.
18.4 Discuss influences on job satisfaction and retirement planning during middle adulthood.

Just when Naomi decides to start her business, she accepts Bradley’s marriage proposal. They’ve had a standing date—every six months—when he asks, and she always tells him she loves only him and to come back in six months. He always does, and this time, she says yes. Her dad is thrilled because she and Bradley have been living together since college. Now at least they won’t be “living in sin.” Bradley jokes and accuses her of saying yes right when she’s ready to make a risky financial move. She looks at him and says, “But of course,” causing both of them to laugh so hard they cry.

Bradley, who got a teaching certificate while finishing his history degree, teaches at the local high school, and Naomi structures her day around his to maximize their time together. She knows how lucky they are. She knows how lucky she is having her parents and her grandparents as role models for how to have a healthy relationship. When Bradley surprises her with flowers and chocolate cake—her favorite—one night and asks her, “So . . . want to make a baby,” she nods and says, “Let’s do it.” She gives birth to Claire 15 months later and Robert 24 months after that. Since Naomi is 35 when Robert is born, she and Bradley decide two is the right number for them, and Naomi has a tubal ligation after delivering their son.

As the children grow, so does Naomi’s business. She works hard, and she works long hours, often gathering the children from school and taking them to the office with her until Bradley finishes at the high school and picks them up. One day, Robert sees Naomi’s lucky soccer ball sitting on the bookshelf where she always keeps it in her office and asks her what it is. She tells him it’s her lucky
soccer ball. Then she gives it to him to play with. Although both children take turns kicking and trying to dribble, it’s clear from the beginning that Robert has a natural talent. When Bradley walks in and sees their children playing, he says to Naomi, “Like mother, like son. And so it begins.” And so it begins as Naomi gets Robert signed up for rec league soccer and volunteers to coach his team.

Bradley and Naomi’s is a strong and openly affectionate marriage that supports them through the loss of Naomi’s grandparents and, later, Naomi’s mother. Alicia had been quietly ailing for some time, and during her last winter she caught the flu and never recovered. Naomi misses her mother terribly, but she thinks about her childhood and coping with her mother’s depression. She doesn’t want that for her own children and works through her grief with Bradley and a local support group. She finds it helpful, too, that her dad spends more time with them now, eating dinner two or three nights each week at the house they bought across town. Seeing her dad so much keeps her connected to her mom in positive, not sad, ways.

19. Physical and Cognitive Development in Late Adulthood

Today you will practice the following:

19.1 Discuss age-related changes in brain and body systems in late adulthood, and identify ways that older adults may compensate for changes.

19.2 Identify risk and protective factors for health in late adulthood.

19.3 Summarize common dementias, including characteristics, risk and protective factors, and treatment.

19.4 Analyze patterns of cognitive change in late adulthood.

Naomi makes time to visit the doctor every year, a leftover habit from being an athlete, she tells herself. General checkup, PAP smear, mammogram—every year, she expects good results but is glad to get them anyway. She has children—who seem prepared to give her grandchildren at any moment—and a husband and a growing business. What she doesn’t have is time to get seriously ill. The doctor always tells her the same thing; she’s in remarkable health for someone her age, which Naomi chalks up to all the years on the field.

After one checkup, she receives a callback that something looks suspicious on her mammogram and the doctor would like to do a needle biopsy. She tells Bradley but not Claire and Robert, who will only worry needlessly. She’ll tell them when there’s something to tell them. Bradley goes with her to the biopsy, which hurts far more than she’s told it will, and afterward they have a quiet lunch at their favorite restaurant. Naomi wonders if they should’ve chosen someplace they like less in case the news is bad so they don’t taint this one. When the
office calls two days later, she and Bradley are relieved to hear that the shadow on the mammogram was just a shadow, and Naomi has nothing to worry about.

Naomi continues running three to five miles each day well into her 60s and even in her 70s walks more than two miles each day. When asked about her vitality, she winks at Bradley and says, “He keeps me young.” She annoys herself if she happens to forget an appointment or where she placed her glasses. When she worries and asks the doctor, she dismisses Naomi’s concern. “You’re fine. Forgetting your keys is a natural part of aging. Forgetting what they’re for is troubling. You’re the healthiest octogenarian I’ve ever seen, Naomi.”

20. Socioemotional Development in Late Adulthood

Today you will practice the following:

20.1 Examine the contributions of self-concept, personality, and religiosity to older adults’ well-being.

20.2 Identify social contexts in which older adults live and their influence on development.

20.3 Summarize features of older adults’ relationships with friends, spouses, children, and grandchildren, and identify how these relationships affect older adults’ functioning.

20.4 Discuss influences on the timing of retirement and adaptation to retirement.

Just about the time Naomi is ready to retire, her dad Justin agrees to come and live with her and Bradley. Naomi is relieved. She worries about her dad all alone. Plus, having Dad around will give Bradley someone to talk to when she isn’t around. How to retire is another matter. Robert coaches the soccer team at the same high school Bradley retired from, and Claire . . . well, Claire could manage the business, with her degrees in biology and geology, but would she? Naomi thinks maybe she should just sell.

“Mom, don’t be ridiculous,” Claire tells her over lunch one day. “Of course, I’ll help out. How much help do you want?”

“Do you want it?” Naomi asks her. “The business?”

“Want like—”

“Do you want to be the CEO?”

“I . . . Yes.”
Claire is never indecisive, like Naomi herself. Good, Naomi thinks, Claire can run the business instead of running her, Naomi. She knows that both children will be there when they really need them.

21. Experience With Death and Dying

Today you will practice the following:

21.1 Identify ways in which death has been defined and end-of-life issues that may arise.
21.2 Contrast children’s, adolescents’, and adults’ understanding of death.
21.3 Discuss the physical and emotional process of dying as it is experienced over the lifespan.
21.4 Summarize typical grief reactions to the loss of loved ones and the influence of development on bereavement.

Justin and Bradley pass away within a year of one another, giving Naomi two large blows. Her dad dies of a heart attack, and Bradley has a stroke while on a run with her one morning. She does everything she can to save him, but it’s hopeless. The children and her three grandchildren circle around her to support her grieving, but Naomi never really recovers. Whether isolation or broken heart or simple age, she passes away in her sleep from undetermined but natural causes at the age of 84.

CASE DISCUSSION QUESTIONS

1. Naomi’s mother, Alicia, struggles with periodic depression when her husband, Naomi’s father, Justin, is deployed with the army. How does Alicia’s ongoing depression affect Naomi’s development across any and all domains (biological, cognitive, and socioemotional)? Be specific.

2. In early childhood, Justin takes Naomi shopping for supplies and signs her up for rec league soccer, a small act that will impact the rest of her life and one of her children’s. Create a map of how Naomi’s life is impacted across any and all domains (biological, cognitive, and socioemotional) because she began playing soccer and was an exceptional player.

3. Naomi’s childhood love of flowers and other plants she saw outdoors leads her to a degree in botany, a job with the Department of Agriculture, and eventually her own brand. What childhood experiences across any and all domains (biological, cognitive, and socioemotional) help explain her choices and her drive?

4. Naomi’s entire life occurs over many decades that are, loosely, contemporary. Cars, telephones, televisions, and so on exist, but era-specific technology isn’t presented (e.g., cell phones, space shuttles, or artificial intelligence). Would Naomi’s life have been different if she were born in a specific period, earlier or later? If so, how? Be specific.