

MHSC108 Caring for Babies, Children and Adolescents

ECTS Value: 4 ECTS
Self-Study Hours: 48

Contact Hours: 20
Assessment Hours: 32

Overall Objectives and Outcomes

Childhood encompasses ages from birth to 18 with all ages requiring various needs to meet their development. The unit aims to provide educators with the skills and knowledge to support their students understand the needs of this very diverse group. Course participants will be expected to have comprehensive holistic knowledge, both theoretical and practical, of development. As well as be aware of the different type of support services that can be offered to families in need. The participants will also be able to discuss ethical and social issues with the students on this vast subject.

By the end of this module, the learner will be able to:

Competences

- a. Monitor milestones within the various age groups and raise concern and access support services when required
- b. Create play sessions that stimulate the various skills in babies and children. While creating discussion/interactive sessions for adolescents to express themselves and grow into autonomous adults.
- c. Differentiate between healthy lifestyle and non, as well as the pitfalls associated with an unhealthy one, including potential disease.
- d. Identify the different signs and potential concerns in adolescents relating to eating disorders, stress and mental health issues.
- e. Support and communicate effectively to babies, children and adolescents through knowledge and good practices.

Knowledge

- a. Outline the various areas of baby and child development; physical including gross and fine motor, social and emotional, intellectual and language.
- b. Identify needs in babies and child, including nutritional.
- c. Describe how theory relates to practice in the developments and needs of babies, children and adolescents.
- d. Identify how to approach delayed milestones and support available in all age groups.
- e. Describe signs and potential concerns for safeguarding in babies, children and adolescent.
- f. Identify signs and potential concerns relating to major medical concerns within the age groups.
- g. Describe how puberty effects adolescents in all aspects of development.
- h. Identify ways of making adolescents aware of their human rights and how to learn autonomy of decision making.
- i. Describe the needs of healthy lifestyles in adolescents and the pitfalls of an unhealthy lifestyle.
- j. Identify signs and potential areas of concern relating to eating disorders, stress and mental health issues.
- k. Describe how theory relates to practice on creative activities and its benefits when used with children and adolescents.
- l. Identify knowledge on care of babies, children and adolescent, and ability to assess when potential support is required.

Skills

Applying knowledge and understanding

The learner will be able to:

- a. Apply knowledge of caring for babies, children and adolescent including the various areas of development: physical, social and emotional, gross and fine motor and intellectual.
- b. Demonstrate knowledge of milestones and how to approach support if babies, children and adolescents show a delay in reaching them.
- c. Demonstrate knowledge on recognising signs and concern for safeguarding in babies and children.
- d. Demonstrate knowledge of potential signs of medical concerns in babies and children.
- e. Demonstrate knowledge on puberty and how it effects adolescents.
- f. Communicate effectively with each group.
- g. Plan creative activities to help in development and communication with children and adolescents.
- h. Demonstrate critical analysis on children and young people rights and how to support them in becoming autonomous individuals.
- i. Demonstrate the critical ability to assess the various cultural difference that might effect wellbeing that are present within our diverse society

Assessment Methods

This module will be assessed through: Portfolio and Assignment

Suggested Readings

Core Reading List

1. Bhutta, Z. A., Das, J. K., Rizvi, A., Gaffey, M. F., Walker, N., Horton, S., Webb, P., Lartey, A., & Black, R. E. (2013). Evidence-based interventions for improvement of maternal and child nutrition: what can be done and at what cost? *The Lancet*, 382(9890), 452–477. [https://doi.org/10.1016/s0140-6736\(13\)60996-4](https://doi.org/10.1016/s0140-6736(13)60996-4)
2. Black, M., Barnes, A., Baxter, S., Beynon, C., Clowes, M., Dallat, M., Davies, A. R., Furber, A., Goyder, E., Jeffery, C., Kritsotakis, E. I., & Strong, M. (2019). Learning across the UK: a review of public health systems and policy approaches to early child development since political devolution. *Journal of Public Health*, 42(2), 224–238. <https://doi.org/10.1093/pubmed/fdz012>
3. Chang, Y. J., Lehmann, A., Winter, L., & Finkbeiner, M. (2018). The Sustainable Child Development Index (SCDI) for Countries. *Sustainability*, 10(5), 1563. <https://doi.org/10.3390/su10051563>
4. Reynaert, D., Bouverne-de-Bie, M., & Vandeveld, S. (2009). A Review of Children's Rights Literature Since the Adoption of the United Nations Convention on the Rights of the Child. *Childhood*, 16(4), 518–534. <https://doi.org/10.1177/0907568209344270>
5. Stiles, J., & Jernigan, T. L. (2010). The Basics of Brain Development. *Neuropsychology Review*, 20(4), 327–348. <https://doi.org/10.1007/s11065-010-9148-4>

Suggested Reading List:

1. Brito, N. H., & Noble, K. G. (2014). Socioeconomic status and structural brain development. *Frontiers in Neuroscience*, 8, 1–8. <https://doi.org/10.3389/fnins.2014.00276>
2. Doré, I., Sabiston, C. M., Sylvestre, M. P., Brunet, J., O'Loughlin, J., Nader, P. A., Gallant, F., & Bélanger, M. (2019). Years Participating in Sports During Childhood Predicts Mental Health in

- Adolescence: A 5-Year Longitudinal Study. *Journal of Adolescent Health*, 64(6), 790–796. <https://doi.org/10.1016/j.jadohealth.2018.11.024>
3. Gillett-Swan, J. K., & Sargeant, J. (2019). Perils of perspective: Identifying adult confidence in the child's capacity, autonomy, power and agency (CAPA) in readiness for voice-inclusive practice. *Journal of Educational Change*, 20(3), 399–421. <https://doi.org/10.1007/s10833-019-09344-4>
 4. Huang, P., O'Keeffe, M., Elia, C., Karamanos, A., Goff, L. M., Maynard, M., Cruickshank, J. K., & Harding, S. (2019). Fruit and vegetable consumption and mental health across adolescence: evidence from a diverse urban British cohort study. *International Journal of Behavioral Nutrition and Physical Activity*, 16(1), 1–13. <https://doi.org/10.1186/s12966-019-0780-y>
 5. Phua, D. Y., Kee, M. Z., & Meaney, M. J. (2020). Positive Maternal Mental Health, Parenting, and Child Development. *Biological Psychiatry*, 87(4), 328–337. <https://doi.org/10.1016/j.biopsych.2019.09.028>
 6. Sigurdson, J. F., Undheim, A. M., Wallander, J. L., Lydersen, S., & Sund, A. M. (2015). The long-term effects of being bullied or a bully in adolescence on externalizing and internalizing mental health problems in adulthood. *Child and Adolescent Psychiatry and Mental Health*, 9(1), 1–14. <https://doi.org/10.1186/s13034-015-0075-2>

Video

[Dr. Allan Schore on attachment trauma and the effects of neglect and abuse on the brain - YouTube](#)