School-age children also learn rules and how to compete and cooperate with others. Giving children positive feedback, including in healthcare settings, is important. When children feel successful in tasks and relationships, they develop a sense of industry, mastery and self-assurance. Feelings of inadequacy and inferiority may develop if too much is expected of school-agers or if they believe they cannot measure up to the standards set by others. For example, comparing the quality of a task done by an 8 year old, such as washing a car, baking a cake or putting together a model, with that done by an adult or an older child, will typically result in a sense of inferiority in the school-ager.

School-age children do not like or deserve criticism, particularly when they’ve worked to the best of their abilities. Offering praise and teaching how to improve a task is helpful. For example, saying, “You did a good job washing the car. Let me show you how you can get the rest of these smudges off.” Without experiencing mastery, children may shun new activities or not finish tasks. Many believe that a person’s fundamental attitude towards work, their “work ethic”, is established during the school-age period.

GROWTH TRENDS

Physical growth continues to be slow, gradual and steady during the school-age period. Growth occurs at approximately the same rate as in the previous period of preschool. An average of 4 to 6 pounds per year is gained and the school-ager grows approximately 2” per year. The average 6 year old weighs 46 pounds and is about 45 inches tall. The average 12-year old child is approximately 59 inches tall, and weighs 88 pounds. School-agers appear taller and thinner, as skeletal lengthening occurs mainly in the legs.

DEVELOPMENTAL TRENDS

YOUNG SCHOOL-AGE CHILDREN often think of themselves more than others and remain egocentric until about age seven or eight. Dishonest behavior is not unusual during this time, including cheating, stealing and lying. Young school-agers increasingly gain control of their major muscles, both fine and gross motor. They test muscle strength and skills by skipping, running, hopping, and dancing. They also enjoy performing physical tricks, such as cartwheels and handstands, and can catch small balls. Most young school-age children have a good sense of balance and can stand on one foot and walk on a balance beam.

DEVELOPMENTAL TASKS OF THE SCHOOL-AGE PERIOD

If a sense of trust, autonomy and initiative have been established in earlier years, school-agers now struggle with mastery of the developmental task, industry vs. inferiority. School-age children are workers and producers. Needing achievement, they want to engage in tasks and activities they can carry through to completion.
OLDER SCHOOL-AGE CHILDREN are constantly active. Muscle control improves and by the end of this period, children become almost as coordinated as adults. Older school-age children have a strong need to feel accepted and worthwhile. They like to join groups, either organized or unorganized, often times based upon availability. Association with organized groups such as Scouts or sport teams, are common during this period, as well as with unorganized groups, such as secret clubs or cliques. The need to belong and be accepted is strong during the school-age period. For some children, being a victim of bullying may become apparent. Bullying will be discussed in an upcoming newsletter.

Older school-age children prefer to be with members of their own sex and often look up to adolescents. Older school-age children like competition and still look to adults for approval. However, they may show their ability to be increasingly independent by being disobedient and rebellious and using back-talk. They begin to take responsibility for their own actions. They also begin to develop a sense of humor and often enjoy jokes and riddles.

**IMPLICATIONS**

The school-age period, encompassing six years of a child’s life, is a diverse stage.

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**DEVELOPMENTAL MILESTONES**

**6 YEARS  First grade**
- Reads combinations of words
- First permanent teeth erupt
- Wants to be best or first, may cheat
- May show other dishonest behavior, such as lying or stealing
- Knows right from left; morning from night
- Loves “show and tell”
- Prints capital letters
- Likes to draw, color and print
- Centers life around school
- Obey three commands in a row
- Likes group games—tag, hide and seek, simple board and card games - Candyland®, Old Maid®, Go Fish®.

**7 YEARS  Second grade**
- Wiggles loose teeth—“ugly duckling”
- Can ride a bicycle
- Can count by 2’s, 5’s and 10’s
- May begin a sense of modesty
- Can be reasoned with
- Develops concept of time
- Enjoys teasing others
- Dishonesty continues

**8 YEARS  Third grade**
- Dresses self completely
- Considers money important
- Wants allowance or reward system
- Values best friends
- Has collections based on quality
- Likes making things
- Dishonesty may continue

**9 YEARS  Fourth grade**
- Typically rejects Santa Claus
- Begins hero worship - teacher, movie star, musical group
- Makes decisions easily and quickly
- Accepts blame for own actions
- Shows empathy and sympathy
- Enjoys group activities – secret clubs, sports, Scouts, dance, music.
- Likes more complicated board games chess, Monopoly®
- May like to read

**10 –12 YEARS  Fifth – Seventh grade**
- Describes abstract terms – truth, justice
- Likes to spend the night with a friend
- Uses telephone for practical purposes
- Girls may begin pubescent changes

There is certainly a vast developmental and growth difference between a 6 and a 12 year old. Consideration of developmental trends is essential to planning and providing age-appropriate care. School-age children’s development guides such things as age-appropriate communication, anticipatory guidance and play and diversional activities. For example, knowing that 6 year old’s life is centered around school, asking the child to talk about first grade, “Tell me what kind of things you’re doing in school” is helpful. Likewise, selecting a simple game for diversional play and praising them for success, “You’re good at this,” serves to meet the developmental task of this age-group, as well as their need to be “best”. There are endless possibilities for every age.

**NUTRITION AND DENTAL HEALTH**

When children enter school, they spend more time away from home. Less supervision typically affects choices, including those related to food. Parents do not commonly know what their children eat away from home. A child may take lunch to school, but it may be thrown away, traded or sold. Or, lunch money may be provided, only to have it spent on candy, sodas or other empty calories. This is a often a challenge when dietary restrictions are necessary, such as with school-age children who have diabetes. Also, because of the influence of television and other forms of mass media, school-agers are commonly tempted by “junk food.” This influence, combined with the tendency toward sedentary activities, such as watching television and playing video games, makes obesity a prevalent health problem in this age-group. Diet-related dental problems may also develop.

The first permanent (secondary) teeth erupt early in the school-age period, usually beginning with the 6-year molars. The roots of the primary (baby, deciduous) teeth are gradually absorbed, so that when they are shed the crown of the permanent tooth remains. The 20 primary teeth gradually are shed during middle childhood and replaced with 32 permanent teeth, excluding the wisdom teeth, during the school-age and early adolescent period. Most children do not possess the fine motor skills necessary to brush and floss their teeth properly until approximately second grade. Even children under 10 years old are likely to need parental assistance. For school-age children with mixed primary and secondary dentition, a toothbrush with soft nylon bristles and an overall length of about six inches is commonly recommended.

**Middle childhood is an opportunity for children to become productive and increasingly independent.** School-agers are typically very inquisitive and interested in their health and what involves them directly.
1. Which of the following most accurately describes school-age children?
   a. Explorers
   b. Workers
   c. Magical thinkers
   d. Imitators

2. When Shanna, 7 years old, visits her grandmother in Florida, she has been collecting seashells. She is decorating them and making a necklace. Shanna is striving for a sense of:
   a. trust.
   b. autonomy.
   c. industry.
   d. initiative.

3. Two school-agers, Molly, 8 years old, and Sam, 11 years old, each are working with a model kit of a bird. When you look at their progress, you appropriately say:
   a. “Molly, that hardly looks like the picture on the box!”
   b. “Sam, will you please give Molly some help. You’re good at this.”
   c. “Take your time, Molly, so yours looks more like Sam’s.”
   d. “You both are doing a great job. Are you having fun?”

4. Which of the following does NOT typically describe a young school-ager? They:
   a. are almost as coordinated as an adult.
   b. can stand on one foot.
   c. enjoy doing physical tricks.
   d. may show dishonest behavior.

5. Which of the following probably has the LEAST influence on school-ager’s nutrition?
   a. television and other mass media
   b. parents and teachers
   c. increased time spent away from home
   d. the temptation of “junk food”
POPULATION/AGE-SPECIFIC EDUCATION POST TEST

GROWING UP WITH US... Caring For Children

HEALTH PROMOTION OF SCHOOL-AGE CHILDREN

6. Mrs. Bray says, “I thought this year when she started school Mandy would be brushing her teeth by herself. It’s such a struggle.” You respond:

   a. “Don’t worry about it until her permanent teeth are all in.”
   b. “Children typically need assistance brushing their teeth until about 10 years of age.”
   c. “I know, I have the same problem. Just take her to the dentist every month or so.”
   d. “If she doesn’t have any dental caries there really isn’t a problem at this age.”

7. Mrs. Bray asks you what would be an appropriate birthday gift for Mandy on her upcoming 6th birthday. You suggest:

   a. a television and personal phone for her room.
   b. a drawing set or a simple board game.
   c. a chess set or a picture of her favorite rock singer for her school locker.
   d. a tricycle or a classic novel.

8. Mrs. Bray says, “When we play simple card games with Mandy at home, she’ll keep handling the cards until she finds the card she wants.” You realize:

   a. at this age Mandy needs to be best and may cheat to win.
   b. Mandy obviously has no discipline at home.
   c. she is too old to play this card game.
   d. Mandy has a behavioral problem.

9. 10 year old, Jimmy, is having a laceration treated. Which of the following would be appropriate diversion when talking to Jimmy during the procedure?

   a. “I bet you’ll be the best patient I’ve had today.”
   b. “After you tell me a joke, I’ll tell you one.”
   c. “Can you count by 2’s?”
   d. “Tell me about your girlfriend.”

10. Because school-agers are dependent on their parents, directing health teaching toward their parents, rather than school-age children, is most appropriate.

   a. True
   b. False