

## SECTION ONE

# UNDERSTANDING YOUNG PEOPLE

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## 1.1 ADOLESCENCE – A DEVELOPMENTAL PERSPECTIVE

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**Understanding the developmental stages that young people move through in adolescence assists us to better understand the young people we work with, their behaviour and their needs. The developmental perspective helps us to determine:**

- **The young person's physical and psycho-social concerns**
- **The young person's cognitive abilities and their capacity for understanding choices, making decisions and giving informed consent**
- **Appropriate communication strategies, with questions, explanations and instructions tailored to the cognitive and psychological level of the young person**
- **Appropriate intervention for health promotion**

### ABOUT ADOLESCENCE

**Adolescence: the developmental period between childhood and adulthood – beginning with the changes associated with puberty and culminating in the acquisition of adult roles and responsibilities.**

Adolescence is a dynamic period of development characterised by rapid change in several areas:

- Physical – the onset of puberty (physical growth, development of secondary sexual characteristics and reproductive capability)
- Psychological – the development of autonomy, independent identity and value system
- Cognitive – moving from concrete to abstract thought
- Emotional – moodiness; shifting from self-centredness to empathy in relationships
- Social – peer group influences, formation of intimate relationships, decisions about future vocation

Adolescence is a biologically universal phenomenon; however, the concept of 'adolescence' is defined differently in different cultures. Cultural norms and life experiences (such as being a refugee) can affect both the timing of developmental milestones (e.g. puberty) and society's expectations of what is considered 'normal' in terms of the young person's response to these changes. The expectations, roles and duration of adolescence can vary

greatly between different cultures. In some cultures, the concept of adolescence as a stage does not even exist. Young people move from childhood to adulthood.

While adolescence can be a stressful period, most young people cope well with this developmental process and do not have any lasting problems (Strasburger et al. 2006).

Puberty involves the most rapid and dramatic physical changes that occur during the entire life span outside the womb (Bennett and Kang 2001). The average duration of puberty is about 3 years, but there is great variability in the time of onset, velocity of change and age of completion. Height velocity and weight velocity increase and peak during the growth spurt (early in girls, later in boys). Although there are many variations in normal pubertal development, the experience of going through puberty is commonly expressed as having a changing body that feels out of control.

### THE ADOLESCENT BRAIN

Adolescence is a time not only of enormous physical changes, but also in the structure and function of the brain. Other than the first three years of life, no other developmental stage is characterised by more dramatic changes (Steinberg 2011).

The changes in the adolescent brain have a major impact on cognitive, emotional and social development. They also have important implications for the onset of risk-taking behaviours and for the ways in which parents and service providers interact with young people and respond to risky behaviours.

In particular, the limbic system (which is the emotional, impulsive centre of the brain) experiences accelerated growth in early adolescence. The limbic system governs reward processing, appetite, sensation seeking and emotional impulsivity.

Meanwhile, the part of the brain responsible for making critical judgements, planning, controlling impulses, decision-making and regulating emotions (the pre-frontal cortex) is much slower to develop and is, in fact, still under construction until the mid-twenties (Steinberg 2008).

The effect of this mismatch in neurological development is that the teenage brain is 'wired' for impulsivity – generally, adolescents have fully ripe emotional impulsivity (limbic system) but limited inhibitory capacities (pre-frontal cortex).

A fundamental developmental task for the young person is to learn how to regulate and balance the drives and emotional impulses of the limbic system (the accelerator) with the executive control system (the brakes) (Sowell, Siegel and Siegel 2011). As

young people 'exercise' their brains by learning to better control impulses, regulate their emotions and engage the frontal brain, they are laying the neural foundations for stronger self-regulatory mechanisms (Siegel 2012).

As the pre-frontal cortex develops, the young person also acquires the capacity for more complex cognitive skills such as abstract thinking, future orientation, recognising consequences of behaviour, empathy and understanding other's viewpoints.

## THE IMPACT OF TRAUMA ON THE BRAIN

Many young people who experience mental health, substance use and other psychosocial problems have experienced complex trauma resulting from neglect, abuse, emotional deprivation and attachment disruption during their development.

Research has identified the adverse effects that early-onset trauma can have on the developing brain. Complex trauma triggers a shift from a 'learning' brain to a 'survival' brain and disrupts the neural integration necessary to respond flexibly to daily challenges (Cozolino 2002; Kezelman and Stavropoulos 2012).

In particular, trauma impairs the development of self-regulation mechanisms – the capacity to modulate emotions, manage impulse control and self-calm during times of stress, excitement and turmoil – thus making it even more difficult for the young person to pause and engage their frontal brain in weighing risks, rewards and consequences.

### FINDING OUT MORE...

Understanding the effect of trauma on the developing brain is important for anyone working with young people who have experienced abuse, neglect or other forms of trauma. Learn more in chapter 3.4 Trauma-informed practice.

## OTHER INFLUENCES ON THE DEVELOPING BRAIN

**The structure and functioning of the mind and brain are shaped by experiences, especially those involving emotional relationships**

(Cozolino 2002)

Recent research in neurobiology shows that interpersonal relationships directly impact and shape the development of the brain. Parents and other carers directly influence the development of the brain's circuitry through their interactions and relationships with young people (Siegel 2012).

Service providers can also play a crucial role in assisting young people to learn skills for managing their emotional reactions and impulses by:

- Providing safety and stability through an ongoing trusting relationship
- Encouraging young people's use of critical judgement (i.e. by being 'the front part of the brain' for them)
- Helping them to identify, track and appropriately express their emotions
- Assisting them to develop self-calming skills for regulating limbic system arousal
- Teaching them to inhibit impulses ('apply the brakes') and develop greater capacity for reflection and weighing risks/consequences before acting.

During adolescence, a 'window of vulnerability' occurs when the disparity between the development of the limbic system (emotional impulses) and the pre-frontal cortex (regulatory mechanism) collide with an increase in risk-taking behaviour.

At this time, young people's decision-making tends to be driven more by the emotional and reward centres of the brain. This contrasts with adult decision-making, which tends to be more solidly based in the pre-frontal cortex and reflect more rational and measured processes (Steinberg 2008).

Consequently, young people find themselves in situations making emotional choices that are not always under volitional control. In these emotionally-charged contexts, the limbic system dominates the pre-frontal control system and they tend to revert to emotions and instinct (Yurgelun-Todd et al. 2002). This explains poor decisions and spur-of-the-moment behaviours such as unplanned sex, riding with a drunken driver, binge drinking, aggressive outbursts, and so on.

## ADOLESCENT DEVELOPMENTAL STAGES

There are three main stages of adolescent development – early, middle and late adolescence. However, the progression from one stage to another in terms of psychosocial development varies enormously from one young person to another.

Age does not define maturity in different areas of youth development: in any particular young person, physical, cognitive and psychological changes may be 'out of sync'. For example, an early developing, mature-looking girl may be physically developed but psychologically immature and emotionally vulnerable. This presents the potential risk of early initiation of sexual activity before she has developed the cognitive and psychological capacity to fully understand the potential consequences.

Adolescence is a journey towards maturity and independence. There are many psychosocial challenges that young people must negotiate along the path to adulthood. While the nature of these tasks, and the importance placed upon their achievement, can vary greatly between cultures, these tasks usually include:

- Achieving independence from parents and other adults
- Developing a realistic, stable, positive self-identity
- Forming a sexual identity
- Negotiating peer and intimate relationships
- Developing a realistic body image
- Forming their own moral/value system
- Acquiring skills for future economic independence

The main developmental concerns, cognitive changes and psychosocial issues for each stage are shown in Table 1.

**TABLE 1: ADOLESCENT DEVELOPMENTAL STAGES**

	Early (10 - 13 years)	Middle (14 - 17 years)	Late (17-21 years)
Central Question	“Am I normal?”	“Who am I?” “Where do I belong?”	“Where am I going?”
Major developmental issues	<ul style="list-style-type: none"> <li>• Coming to terms with puberty</li> <li>• Struggle for autonomy commences</li> <li>• Same sex peer relationships all-important</li> <li>• Mood swings</li> </ul>	<ul style="list-style-type: none"> <li>• New intellectual powers</li> <li>• New sexual drives</li> <li>• Experimentation and risk-taking</li> <li>• Relationships have self-centred quality</li> <li>• Need for peer group acceptance</li> <li>• Emergence of sexual identity</li> </ul>	<ul style="list-style-type: none"> <li>• Independence from parents</li> <li>• Realistic body image</li> <li>• Acceptance of sexual identity</li> <li>• Clear educational and vocational goals, own value system</li> <li>• Developing mutually caring and responsible relationships</li> </ul>
Main concerns	<ul style="list-style-type: none"> <li>• Anxieties about body shape and changes</li> <li>• Comparison with peers</li> </ul>	<ul style="list-style-type: none"> <li>• Tensions between family and young person over independence</li> <li>• Balancing demands of family and peers</li> <li>• Prone to fad behaviour and risk taking</li> <li>• Strong need for privacy</li> <li>• Maintaining ethnic identity while striving to fit in with dominant culture</li> </ul>	<ul style="list-style-type: none"> <li>• Self-responsibility</li> <li>• Achieving economic independence</li> <li>• Deciding on career/ vocation options</li> <li>• Developing intimate relationships</li> </ul>
Cognitive development	<ul style="list-style-type: none"> <li>• Still fairly concrete thinkers</li> <li>• Less able to understand subtlety</li> <li>• Daydreaming common</li> <li>• Difficulty identifying how their immediate behaviour impacts on the future</li> </ul>	<ul style="list-style-type: none"> <li>• Able to think more rationally</li> <li>• Concerned about individual freedom and rights</li> <li>• Able to accept more responsibility for consequences of own behaviour</li> <li>• Begins to take on greater responsibility within family as part of cultural identity</li> </ul>	<ul style="list-style-type: none"> <li>• Longer attention span</li> <li>• Ability to think more abstractly</li> <li>• More able to synthesise information and apply it to themselves</li> <li>• Able to think into the future and anticipate consequences of their actions</li> </ul>

## CHAPTER SUMMARY - WHAT TO REMEMBER

Adolescence is a period of change. While many of the physical changes are obvious, the adolescent brain is undergoing its most dramatic period of growth and development since early childhood.

These changes affect a young person's cognitive, emotional and social development. Understanding these changes helps us understand many of the behavioural changes that occur in adolescence too – such as the onset of risk-taking behaviours.

Many factors – including the experience of trauma – can have an effect on the way the brain develops and, in turn, on a young person's experience of adolescence.

## REFLECTION QUESTIONS

Is the developmental perspective a new way of thinking about adolescence for you?

How does your practice or service incorporate some of the concepts from this chapter in the way it works with or understands young people?

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