

Adolescence: a time of storm and stress!

Beyond the Obvious changes associated with adolescence, the troubled road to adult life hides a complex mechanism triggering a quest for identity and re-definition of self. Here we look at few how's and why's

Most of us use the word adolescence as if the term applied to a fairly precise set of years, roughly the years from 12 to 20. In fact, the relevant age range is fairly blurred. It makes more sense to think of adolescence as the period that lies psychologically and culturally between childhood and adulthood. It is the period of transition in which the child changes physically, mentally and emotionally into an adult. The physical and emotional changes that are part of this transitional period are so striking, that the period of adolescence has acquired a reputation as being full of storm and stress. In this article we try to appreciate some of these main changes, in order to get a better understanding of adolescents' behaviour.

Changes occurring in body and mind

The main physical changes of adolescence are triggered by a complex set of hormonal changes, beginning at about age 8 or 9. Change in hormones, known as oestrogen and testosterone, are central to the process. Effects are seen in a rapid growth spurt in height and an increase in muscle mass and in fat. Boys add more muscle, and girls add more fat. In girls, mature sexuality is achieved in a set of changes beginning as early as age eight. Sexual maturity occurs later in boys, with growth spurt occurring a year or more after the start of genital changes.

Mental development may be central to many of the other changes we see in adolescence, including changes in self concept, the process of identity formation, and increases in the level of moral reasoning. Teenagers are typically more poised than before to think about their future, are more thoughtful, and more questioning. Such adolescent is much closer to significant life decisions and so is more aware of their complexity. But it could also reveal an underlying change in the kind of thinking. Such shift in thinking brings about the ability to move from the 'actual to the possible'. Systematic problem solving and logical thinking, are also gradually acquired at this stage.

Another important facet of adolescent thinking is the development of new levels of moral reasoning. Laurence Kohlberg (Bee, Helen L., 1998) proposed that at early adolescence, many are still in the phase of doing actions that are rewarded while avoiding others that are punished. Then at adolescence there is a gradual move to the next level, one moves to judgements based on rules and norms of a group to which the adolescent belongs. Such groups are the family, the peer group, a church or the nation.

In discussing mental development in adolescence one cannot leave out mentioning the impact of school experiences. Apart from the contribution to formal education, the school serves as a host for other important functions. It is an arena in which teenagers can practice new social skills, and the setting in which society attempts to shape young people's attitudes and behaviours preparing them for adult life. When it comes to academic performance, research shows that those who achieve, even despite poverty backgrounds, are those whose parents, have either high aspirations for them or have an authoritative type of parenting (one which creates a balanced environment of

understanding and firmness). On the other hand, in our work we see that dropouts, very often do not find such support at home. They get poor grades, are suspended from school or need to find work to support their families. A pattern of aggressive behaviour at school and early pregnancy don't help. Unfortunately those who drop out of school early find it more difficult to find a job.

Social development: relating to family and peers

When a child answers the question 'Who am I?' it usually describes itself in terms of its physical attributes. It would describe itself as, for example, tall, or dark. Appearance in preteen and early teen years was a very important dimension, but slowly it becomes less dominant. In late adolescence most teenagers think of themselves in terms of enduring traits, beliefs, personal philosophy, and moral standard. At the same time adolescents start to see themselves in terms of different roles they would have that is to say as a student, as a friend, as their parent's sons or daughters.

The issue of self-esteem in adolescents also shows interesting shifts during the teen age years. The overall trend is a steady rise. The average 19 to 20 year old has a more positive sense of his/her global self worth than at the beginning of adolescence.

In early adolescence, the relationship with parents interactions typically become somewhat more conflicting. Very often we get parents complaining that they cannot bear with the attitudes of their adolescents. Key researcher Laurence Steinberg (Bee, Helen L., 1998) and others suggest that conflict is healthy and necessary for the young person to become an individual in his own right, one who is different from his parents. The hormonal changes of puberty also have a hidden hand in what makes an adolescent confront his parents directly. Yet, while the conflicts are present, the underlying and strong emotional attachment to the parents remains. In fact a young person feels that his well-being is still more dependent on attachment with parents than on his attachment to peers.

This is not to say that peer relationships do not become more significant at adolescence than at any earlier stage of development. Everyone knows how important peers are in adolescence. Perhaps, they are actually more important than they will ever be in life. The peer group in the adolescent's life is indeed a vehicle of transition from the protected life of the family to the independent life of adulthood.

Risks and alternatives

According to psychologist and researcher Jeffrey Arnet (Bee, Helen L., 1998), the changes in adolescence bring with them a heightened level of sensation seeking and recklessness. Males, especially, may be prone to take risks, which is why we hear of youngsters driving without a licence or speeding under the influence of alcohol. Teenagers may engage in sexual activity with multiple partners or have unprotected sex, which predictably leads to teenage pregnancy or sexually transmitted diseases. Typical risk-taking by adolescents of course includes smoking, alcohol and drug abuse.

Risk is unusually common in adolescents because it helps many teenagers to meet important psychological and social goals including peer acceptance or respect, establishing autonomy from parents and from other authority figures, coping with anxiety

or fear of failure, and affirming maturity. Researcher Richard Jessor (Bee, Helen L., 1998) argues that these are absolutely normal, central goals of adolescence. That is, it will be hard to convince an adolescent not to engage in risky behaviour, unless alternative ways of meeting these same goals are available or encouraged. Apart from formal education other such alternatives could be: a healthy exposure to peers, sports and out door activities, participation in arts, voluntary work and many other positive activities that offer a challenge to young persons.

When working with adolescents with behavioural problems, we see that those who are most likely to be at risk are those who enter adolescence with few social skills and no alternative ways of meeting their social and personal goals. Research shows that adolescents with reckless behaviour are likely to have had poor educational records, early rejection by peers, neglect at home, or some combination of these early problems. Very often individuals are drawn towards peers who share their patterns of behaviour and who perceive the world around them in similar ways.

At Adolescent Outreach Services we meet clients coming from different backgrounds, though all manifest some form of behavioural problems. Each and every client would require a personal care plan. After assessing thoroughly the situation presented by adolescent and family, we move in to engaging with the adolescent. In some cases apart from social work intervention, a psychologist or family therapist may be called on board for more intense therapeutic reasons. Research shows, that in order to see some positive changes, it is important to work closely with the family of the adolescent. Thus Appogg gives great importance to this aspect. Other clients' situations as mentioned above would require supporting them to enhance their skills, by seeking any further educational or vocational training, finding extra-curricular activities and job searching. All in all, the Agency's goal is to create along with the adolescents, achievable goals and assisting them to bring change in their life.

Adolescents often rope in parents and educators as they live through these choppy waters, even without them wanting to. For the latter, it is an overwhelming task to strike a balance between understanding an adolescent and exercising authority in the young person's best interest. Reading further into the subject can be of aid to parents and people working with adolescents. Parenting skills courses can also enhance the parents' abilities. In other situations seeking professional support can also be suggested.

Services and opportunities

Agenzija Appogg provides social work intervention through its Adolescent Outreach Service. This service works with adolescents who are experiencing emotional and behavioural problems. Persons requiring support may contact the Agency on call 24-hour Supportline 179 or 2295 9000, or visit the website www.appogg.gov.mt.

References:

- Bee, Helen L. (1998). Lifespan Development. (2nd edition) Chapters 11-12: New York:LongMan

Suggested Reading:

- Kaplan, Paul S. (2004). Adolescence. Boston: Houghton Mifflin

Norbert Cutajar
Co-Coordinator, Adolescent Outreach Services, Agenzija Appogg

**Agenzija Appogg and Agenzija Sedqa are part of the Foundation for Social
Welfare Services, which also incorporates Agenzija Sapport
(www.sapport.gov.mt).**