

# Adolescents & Mental Health

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Developmental Stages & Issues

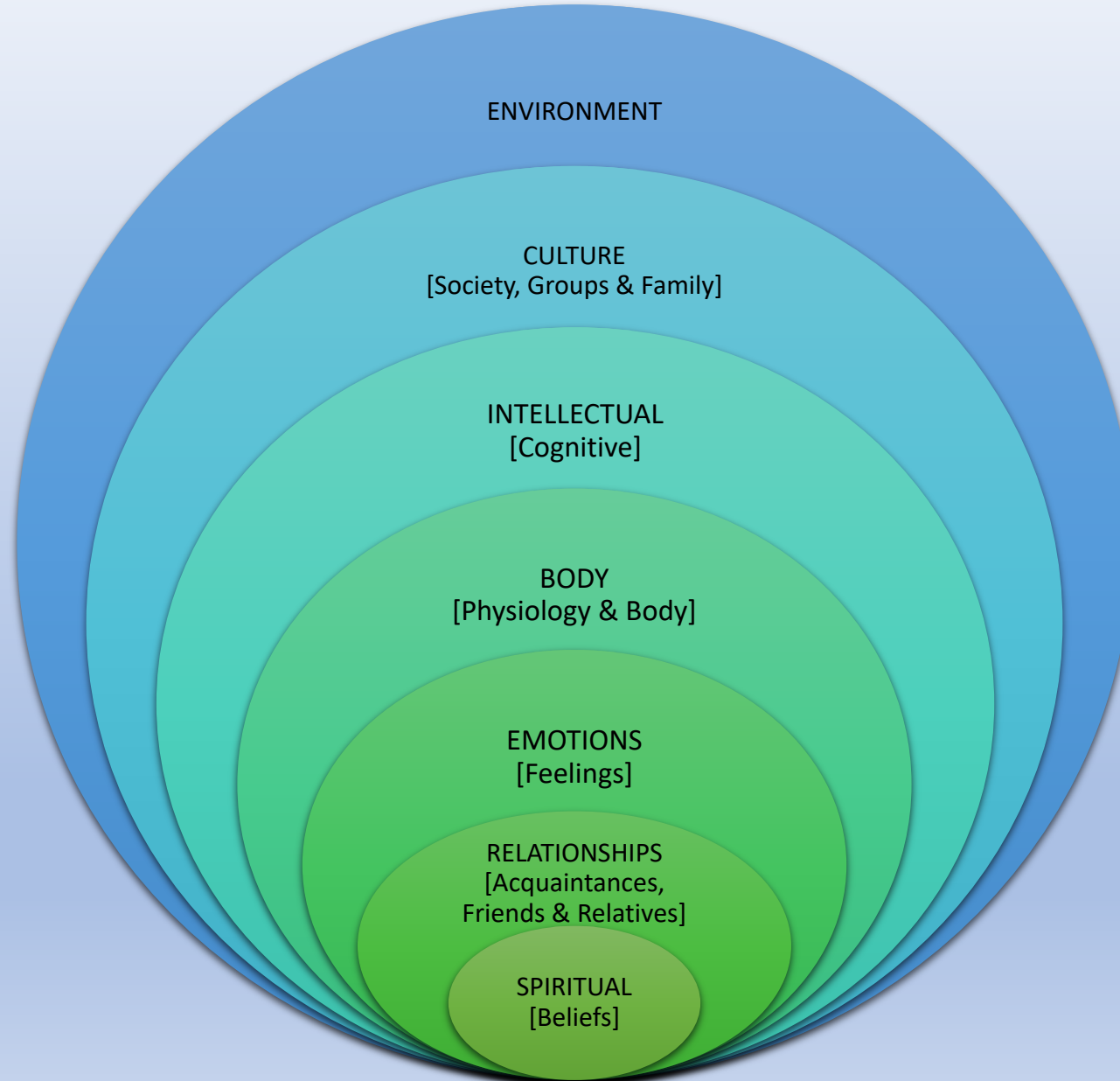
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## **Which of the following statements sound like your teenager ?**

- ❖ **Do we have anything to eat ?**
- ❖ **I want to go to Suzie's house after school ?**
- ❖ **Do I have to take out the trash this morning ?**
- ❖ **No, I am not coming to church with you this morning; it's too boring; no kids my age; etc.**
- ❖ **I have a soccer, volleyball... game this morning; can't come to church.**
- ❖ **Forty-five more days until I go for my driver's license permit.**
- ❖ **Bobby is taking me to the prom; can he take me home at midnight ?**
- ❖ **What's with this hair on my body ?**
- ❖ **Oh no, does this mean I became a woman ? (PC language: "she"; no, I want to be a "he")**
- ❖ **Leave me alone; I don't want to talk!!**
- ❖ **No one likes me at school; the kids are always making fun of me; I don't want to go anymore!**
- ❖ **You don't understand me!!**
- ❖ **You know, when I turn 18 I can make my own decisions!!**

# WHOLE PERSON [Dynamic & Interactive]



## Generation names by age range

	<b>Born</b>	<b>Ages</b>
<b>Gen Z</b>	<b>1997 – 2012</b>	<b>10 – 25</b>
<b>Millennials</b>	<b>1981 – 1996</b>	<b>26 – 41</b>
<b>Gen X</b>	<b>1965 – 1980</b>	<b>42 – 57</b>
<b>Boomers II*</b>	<b>1955 – 1964</b>	<b>58 – 67</b>
<b>Boomers I*</b>	<b>1946 – 1954</b>	<b>68 – 76</b>
<b>Post War</b>	<b>1928 – 1945</b>	<b>77 – 94</b>
<b>WWII</b>	<b>1922 – 1927</b>	<b>95 – 100</b>

Generation names are based on when members of that generation become adults (18-21). <sup>1</sup>Beresford Research & Pew Research Center

## **COVID-19 AND BEYOND: SHAPING THE NEXT GENERATION**

1. Adolescents who represent the younger side of Gen Z were robbed of the capstone of their formative years. It created an atmosphere of uncertainty and anxiety among some teens, about the future and their place in it.
2. They watched as police violence and racial tensions reached breaking points. They saw angry mobs take over cities; deadly wildfires and other natural disasters destroy areas in certain states.
3. Throughout the pandemic, physical health needs of the most vulnerable often took priority over the mental health needs of others; but as the pandemic dragged on, health care providers began to focus on the long-term effects on youth and teens.
4. In 2020, suicide rates for all ages dropped by 5.6% from 2019---what is known as the “pulling together” effect where suicide rates tend to dip during shared experiences of catastrophe.
5. Late March 2020, trips to the ER for anything other than COVID-19 plummeted by 42% across all ages; while the non-COVID trips to the ER declined, trips for psychosocial issues actually increased by 69%. Children and teens experienced increases of about 24% and 31%, respectively. Further, troubling indications that suicide -related ER visits by girls were significantly higher than those of boys. Summer of 2020, visits for attempted suicide rose 26% among girls aged 12 to 17 years compared with 2019.

Stage with Age	Early Adolescence (ages 11-13 years)	Middle Adolescence (ages 14-15 years)	Late Adolescence (ages 16-18 years)
<b>Physical Growth</b>	<ul style="list-style-type: none"> <li>• <b>Puberty: Rapid growth period</b></li> <li>• <b>Secondary sexual characteristics begin to appear</b></li> </ul>	<ul style="list-style-type: none"> <li>• <b>Secondary sexual characteristics further develop</b></li> <li>• <b>95% of adult height reached</b></li> </ul>	<ul style="list-style-type: none"> <li>• <b>Physical maturity and reproductive growth levelling off and ending</b></li> </ul>
<b>Intellectual / Cognition</b>	<ul style="list-style-type: none"> <li>• <b>Concrete thought dominates “here and now”</b></li> <li>• <b>Cause and effect relationships are underdeveloped</b></li> <li>• <b>Stronger “ Self” than “Social awareness”</b></li> </ul>	<ul style="list-style-type: none"> <li>• <b>Growth in abstract thought</b></li> <li>• <b>Reverts to concrete thought under stress</b></li> <li>• <b>Cause and effect relationships are better understood</b></li> <li>• <b>Highly self-absorbed</b></li> </ul>	<ul style="list-style-type: none"> <li>• <b>Abstract thought established</b></li> <li>• <b>Future oriented; able to understand, plan and pursue long term goals</b></li> <li>• <b>Philosophical and idealistic</b></li> </ul>

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<b>Autonomy</b>	<ul style="list-style-type: none"> <li>• <b>Challenge the authority of family structure</b></li> <li>• <b>Lonely</b></li> <li>• <b>Wide mood swings</b></li> <li>• <b>Begins to reject childhood likings</b></li> <li>• <b>Argumentative and disobedient</b></li> </ul>	<ul style="list-style-type: none"> <li>• <b>Conflict with family predominates due to ambivalence about emerging independence</b></li> </ul>	<ul style="list-style-type: none"> <li>• <b>Emancipation: Vocational/ technical/college and/ or work</b></li> <li>• <b>-adult lifestyle</b></li> </ul>

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<b>Body Image</b>	<ul style="list-style-type: none"> <li>• <b>Preoccupied with physical changes and critical of appearance</b></li> <li>• <b>Anxiety about secondary sexual characteristics</b></li> <li>• <b>Peers are idealized as a standard for normal appearance (comparison of self with peers)</b></li> </ul>	<ul style="list-style-type: none"> <li>• <b>Less concern about physical changes but increased interest in personal attractiveness</b></li> <li>• <b>Excessive physical activity alternating with lethargy</b></li> </ul>	<ul style="list-style-type: none"> <li>• <b>Usually comfortable with body image</b></li> </ul>



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<b>Peer Group</b>	<ul style="list-style-type: none"> <li>• <b>Intense friendship with same sex</b></li> <li>• <b>Contact with opposite sex in groups</b></li> </ul>	<ul style="list-style-type: none"> <li>• <b>Strong peer allegiances- fad behaviors'</b></li> <li>• <b>Sexual drives emerge; and adolescents begin to explore ability to date and attract a partner</b></li> </ul>	<ul style="list-style-type: none"> <li>• <b>Decisions /Values less influenced by peers</b></li> <li>• <b>Relates to individuals more than to peer group</b></li> <li>• <b>Selection of partner based on individual preference</b></li> </ul>

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<b>Identity Development</b>	<ul style="list-style-type: none"> <li>• <b>"Am I normal?"</b></li> <li>• <b>Day dreaming</b></li> <li>• <b>Vocational goals change frequently</b></li> <li>• <b>Begin to develop own value system</b></li> <li>• <b>Emerging sexual feelings and sexual exploration</b></li> <li>• <b>Imaginary audience</b></li> <li>• <b>Desire for privacy</b></li> <li>• <b>Magnify own problems: "no one understands"</b></li> </ul>	<ul style="list-style-type: none"> <li>• <b>Experimentation - Sex, drugs, friends, jobs, risk-taking behavior</b></li> </ul>	<ul style="list-style-type: none"> <li>• <b>Pursue realistic vocational goals or career employment</b></li> <li>• <b>Relates to family as adult</b></li> <li>• <b>Begin to distinguish their imaginations from real</b></li> <li>• <b>Establishment of sexual identity, sexual activity is more common</b></li> </ul>

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**Social/Behavioral**

- Searching for identity, influenced by gender, peer group, cultural background and family expectations
- Seeking more independence.

**Faith Development**

James Fowler, 1998

**Stage 3 – “Synthetic-Conventional” Faith (Ages 12 to Adult).** This stage is characterized by the identification of the adolescent/adult with a religious institution, belief system, or authority, and the growth of a personal religious or spiritual identity. This stage (and all subsequent stages) correspond to Piaget’s stage of formal operational thinking, thus making it possible for the adolescent or adult to perceive the divine as an abstract or formless manifestation.

## **Issues with Social Media**

### **TikTok\***

- 1. Recommended videos focusing on suicidal ideation; showing clips that demonstrate suicide or glorify suicidal behavior**
- 2. Grappling with an eating disorder and showing video clips of self-induced vomiting or strict diets**
- 3. Depression maybe confronted with dismissive or sarcastic comments from others**
- 4. Lurking sexual predators**
- 5. Bullying to dangerous “challenges”, i.e., swallowing laundry soap cubes, etc.**
- 6. Harmful to both girls (her) and boys (he) [them]**
- 7. Effects of TikTok: study shows that users take approximately 1 hour and 7 minutes to fall asleep after using the app and spend only 14% of their sleep cycle in REM---half the recommended amount**
- 8. #PainTok: suicide and self-harm are topics of conversation**

**\*Interview with Dr Alan Blotcky, clinical and forensic psychologist**

## Harvard Chang School of Public Health Research

Our research, which was recently published out of Harvard's Chan School of Public Health and co-authored by Ying Chen at the [Human Flourishing Program at Harvard](#), suggests that a religious upbringing can profoundly help adolescents navigate the challenges of these years. We also found that a religious upbringing contributes to a wide range of health and well-being outcomes later in life.

Our [study](#) used a large sample of over 5,000 adolescents, followed them up for more than eight years, and controlled for many other variables to try to isolate the effect of religious upbringing. We found that children who were raised in a religious or spiritual environment were subsequently better protected from the “big three” dangers of adolescence.

For example, those who attended religious services regularly were subsequently:

- 12% less likely to have high depressive symptoms
- 33% less likely to use illicit drugs

Those who prayed or meditated frequently were:

- 30% less likely to start having sex at a young age
- 40% less likely to subsequently have a sexually transmitted infection

## **Harvard Chang School of Public Health Research**

- Moreover, a religious upbringing also contributed towards to a number of positive outcomes as well, much greater happiness, more volunteering in the community, a greater sense of mission and purpose, and higher levels of forgiveness. For example, those who attended religious services were subsequently:
  - 18% more likely to report high levels of happiness
  - 87% more likely to have high levels of forgiveness. Moreover, a religious upbringing also contributed towards to a number of positive outcomes as well, such greater happiness.

Those who prayed or meditated frequently were subsequently:

- 38% more likely to volunteer in their community
- 47% more likely to have a high sense of mission and purpose

These are relatively large effects across a variety of health and well-being outcomes. Religious practice and prayer or meditation can be important resources for adolescents navigating the challenges of life.