Adolescence is a period of transition from childhood to adulthood. It includes many physical, cognitive, and psychosocial changes. We first explore physical development.  
  
  
Puberty is a period of rapid physical growth and sexual maturation that occurs during adolescence.   
These changes begin somewhere between ages 8 and 14.   
Girls begin puberty at around 10 years of age. Boys begin about a year and a half later.  
These changes take around 3 to 4 years for completion.  
  
  
Adolescents experience an overall physical growth spurt.  
The growth proceeds from the extremities toward the torso. This is referred to as distal-proximal development. In other words, you may see the hands grow, then the arms, and finally the torso.  
The overall physical growth spurt means increases of about 10-11 inches in height and 50 to 75 pounds in weight.  
The head begins to grow sometime after the feet have gone through their period of growth. Growth of the head is preceded by growth of the ears, nose, and lips, however.  
As the torso grows, so does the internal organs. The heart and lungs experience dramatic growth during this period.  
Sweat, odor, and oil glands become more active. Teenagers in the United States spend a lot of money on deodorants and acne medications as a result.  
  
  
The brain also undergoes dramatic change during adolescence.   
The prefrontal cortex, located behind the forehead, is a part of the brain that helps with judgment, planning, and strategizing. This grows in early adolescence.   
The cerebellum also grows during adolescence.   
Watch the film assigned in this lesson, Inside the Teenage Brain, for more detail.  
  
Sexual maturation is another change we undergo during adolescence.   
Changes are divided into two categories: primary sex characteristics are changes in the reproductive organs.   
For males, primary characteristics include growth of the testes, penis, scrotum, and the first ejaculation of semen or spermarche. This occurs between 11-15 years of age.  
  
  
Secondary characteristics are those not directly linked to reproduction but changes that signal that a male is becoming sexually mature.  
Shoulders become broader, the areola or area around the nipples become larger. There is some temporary breast development due to hormonal changes in many boys, typically around 14 years of age.  
The voice becomes lower as the larynx grows.  
Hair becomes more coarse and darker.  
And hair in the pubic area, under the arms, and on the face develops.  
  
  
In females, primary characteristics include growth of the uterus and the first menstrual period or menarche.  
Stress and higher percentage of body fat can bring menstruation at younger ages.  
  
Many of the secondary characteristics are the same for boys and girls.  
Breast development begins at around age 10 and full development takes several years.  
Hips broaden and legs get larger.  
The voice becomes lower as the larynx grows, just as it does in males. Although, it is often less noticeable in females.  
Hair becomes darker and coarser.  
Pubic and underarm hair develops as well.  
  
There is currently a lot of attention placed on physical appearance in the United States. This can be difficult for teens. Most teens just want to fit in with their peers and those who do not may feel uncomfortable.  
Teens that are overweight or obese may be ridiculed or teased.  
Physical changes may be easier for boys than girls because while boys are moving toward the cultural ideal of getting larger, girls are moving away from the cultural ideal of remaining thin.  
Early maturing females may feel uncomfortable with puberty, particularly because they may be thought of as much older than they are and may be thought of sexually active and mature, even though they are not.  
Late maturing females may feel that others do not respect them as having grown up.  
Early maturing males may be popular in school and thought of as more mature than they are. They may also be recruited into gangs or for other violent activity because of their physique if they live in neighborhoods or communities where this type of activity occurs.  
Late maturing males may overcompensate for their slight build by trying to act as if they are older than they are.  
  
  
The growth spurt is accompanied by a need for more calories.  
Most teens in the United States take in enough calories, but do not eat healthy foods. High fat, sugar, and salty foods combined with a sedentary life style leave many teens struggling with being overweight or obese. Such teens experience health risks such as sleep apnea, high blood pressure, and type II diabetes.  
  
Teens may also experience eating disorders. Teenage girls are especially vulnerable to eating disorders in cultures obsessed with thinness.  
Anorexia nervosa is overall starvation that is life threatening. A person with anorexia sees fat where there is none and may become obsessed with thinness, excessive dieting, and exercise.   
Anorexia is difficult to treat but can lead to cardiac arrest.  
  
  
Bulimia is another eating disorder in which a person eats in binging episodes and then purges through self-induced vomiting or using laxatives or enemas.  
Repeated exposure of the teeth to corrosive stomach acid can break down the enamel. Blood blisters may develop on the roof of the mouth, the index finger may become discolored, and the esophagus damaged by repeatedly vomiting.  
  
With adolescence comes a potential escalation in situations of abuse. Physical abuse becomes more violent as a parent has altercations with a much bigger child in adolescence.  
Sexual abuse increases with puberty and the impact of such abuse can include feeling stigmatized, having a distorted sense of sexuality, feeling powerless, and distrust.  
The myth of mutuality is the myth that the victim of sexual abuse is somehow responsible for its occurrence. This myth makes it very difficult for a person who has been sexually abused to overcome the negative feelings associated with the abuse. Recognizing that this is a myth is an important step toward healing.  
  
  
A majority of youth become sexually active in their late teens.  
The use of contraception has increased and teen pregnancy rates, though still high, have decreased.  
Most teens engage in sexual activity with a steady partner.  
  
  
In the United States, the decline in teenagers using tobacco has stopped.   
Over-the-counter medications are still cause for concern as many teens use these for recreation.  
Marijuana is now the most commonly used drug. It has surpassed smoking tobacco. The perceived risk of marijuana use has been declining.  
  
  
Some drugs are considered gateway drugs which means that the use of these drugs can often lead to use of stronger drugs.  
Drug use often interferes with healthy nutrition and sleep so important for teens.  
And many dangerous decisions can be made while under the influence. Examples include engaging in risky sexual behavior or driving while high or intoxicated.   
  
  
Let’s turn our attention to some global concerns about youth.   
Youth make up 30 percent of the population in some developing countries.  
We’ve seen an increase in the amount of schooling children receive. But often the quality of instruction is poor and teachers and educational materials are hard to obtain. Drought, war, and other circumstances often disrupt schooling.  
The number of youth participating in the labor force has decreased in many parts of the world. This allows children to participate in formal education.  
  
HIV/AIDS is the leading cause of death in sub-Saharan Africa. This is due to low condom use and widespread coercive sex.  
Tobacco use has been increasing in developing countries.   
And child brides or marriage to girls under 18 has decreased.  
These are just a few concerns about youth in the developing world.  
  
Let’s explore cognitive development in adolescence.   
  
Piaget believed that many adolescents reach formal operational thought.  
This is marked by the ability to think abstractly or to use systems of abstract thought or logic more readily.  
An adolescent may now be able to understand symbolic meanings such as those found in religion.  
Adolescents may also thing about “what if” situations or hypothetical situations more easily.  
And the adolescent may become conscious of their thoughts and enjoy the game of thinking or introspection.  
  
Psychologist David Elkind offers some insights into the unique qualities of adolescent thought.  
  
  
Adolescent egocentrism is the feeling a teenager may have that no one can understand what they are going through.   
A consoling adult may be told, “You don’t understand! Nobody understands!”  
  
  
The imaginary audience refers to the feeling of self-consciousness that many adolescents feel.  
Even when alone, the teenager may be imagining how others would see them.  
Those who feel particularly uneasy or awkward may try to make the discomfort by being sarcastic or by posturing in public.  
  
  
The personal fable is the notion that fame and fortune lie ahead.  
This belief comes as the adolescent is able to see possibilities, but not yet understand probabilities.   
I had a student once who raised her hand during our class discussion of the personal fable. I called on her and she said, “Oh my gosh! I did this! I kept a list of all of my teacher’s names so that I could personally thank them when I became famous!”   
  
What was your personal fable? You may have given up on it once you found out how unlikely it was.  
  
  
The invincibility fable is the mistaken idea that one is indestructible.   
Teenagers may think they may never get hurt when engaging in risky behavior.  
Look for examples of the invincibility fable in the film you view for this lesson.   
  
  
In youth, conformity is emphasized. Many young teenagers, especially, pressure one another to act, speak, dress, and think alike.  
  
  
Formal operational thought can be accompanied by the ability to see possibilities never before considered.   
Youth are often idealistic as a result.   
However, what is possible is not the same as what is likely.   
  
  
Some current concerns in education in the United States include reducing the rate of students who drop out of school before completing their high school diplomas, the impersonal nature of large, bureaucratic high schools, and the issue of where to group students by age in school. Should sixth graders be included in elementary school or should they be part of a junior high? Should ninth graders be at the top of their school in a junior high or should they attend school with seniors?   
What would be the advantages and disadvantages of each?  
  
  
We now turn our attention to relationships and psychosocial development in adolescence.  
  
The beginning of our modern idea of adolescence as a time of storm and stress can be traced to G. Stanley Hall.  
Hall wrote a 3 volume work documenting the lives of youth in 1909. As people relocated to large industrial cities in the U. S., youth became more visible and gained the attention of social workers and others concerned with development.  
Hall believed that the storm and stress of adolescence is created by the biological changes associated with puberty.  
But for many teens, adolescence is not a period of storm and stress. It seems to be a more stressful time for those who are also experiencing other stressors, perhaps at school or at home.  
Consider your adolescence. Would you like to return to that period in your life? Why or why not?  
  
  
Anna Freud wrote about adolescence and saw it as a period of temporary disruption as the id, ego, and superego are out of balance.  
Hopefully, the overactive id is brought under control by the ego or through the use of reason and by being realistic.   
The later years of adolescence are less volatile than early adolescence.  
  
  
Erikson believed that the primary concern of adolescence is that of establishing identity.   
The teen struggles with the question, “Who am I?” Who am I physically, sexually, socially, vocationally, spiritually, academically, and so on?   
Hopefully, the teen postpones making any decisions that will lock him or her in prematurely. The teen needs to wait or go through a period of exploration, called a psychosocial moratorium, before making any long term decisions.  
Foreclosure occurs when others take that decision-making away from the teen. Having a criminal record or becoming a parent are examples of foreclosure.  
The teen that goes through adolescence without establishing an identity may be apathetic about the future. This is referred to as identity confusion.   
  
  
Here is a list of what some teens reported that they wanted from their parents.   
They wanted reasonable freedoms and privileges.  
The wanted their parents to show faith in the decisions they made.  
They wanted their parents to approve of them as people; not that they had to like everything the teen did or said.  
They wanted their parents to be willing to listen to them.  
The wanted their parents to show concern for them and to support them in their interests.