

PREVENTIVE CARE RECOMMENDATIONS

ADOLESCENT AGES 11-18

ADOLESCENT PSYCHOSOCIAL DEVELOPMENT

	Early Adolescence (11 to 14 Years)	Middle Adolescence (15 to 17 Years)	Late Adolescence (18 to 21 Years)
Cognitive Development	Concrete Thinking: Present oriented; appreciate immediate reactions to behavior but little sense of later consequences	Early Abstract Thinking: Inductive/deductive reasoning; understands later consequences; very self-absorbed, introspective, lots of daydreaming and fantasies	Abstract Thinking: Adult ability to think abstractly; philosophical; intense idealism about love, religion, social problems
Social/Emotional Development	Identity Concerns: <ul style="list-style-type: none"> • Concrete sense of morality and rule driven • Preoccupation with physical image • Moody • Friendship with same-sex peers • Experimentation is a common phenomenon • Peer values do not replace parents • May begin to experiment with mood or mind-altering substances • May experiment/explore homosexual behavior • May experiment/explore heterosexual behavior 	<ul style="list-style-type: none"> • More comfortable with sexual identity. Gay youth at risk for depression and suicide ideation, also sadness • Moodiness continues • Identity centers on "Who Am I?" • Strives toward autonomy • Sensitive to social norms of peer group; conforms to perceived peer attitudes and behaviors • Identifies with group or clique • May develop relationship with single romantic partner • Limited capacity for emotional intimacy 	<ul style="list-style-type: none"> • Focuses on vocational and personal options • Uses life experience to generate options and temper decision making • Capacity for moral reasoning • Able to formulate ethical principals • Capacity for mature emotional intimacy in relationships • Adult sense of self
School-Vocation	<ul style="list-style-type: none"> • Adjustment to middle school • Need to be time efficient • May see decrease in scholastic performance as demands increase • Truancy may begin 	<ul style="list-style-type: none"> • Adjustment to senior high school • Academic decisions • Increased anxiety about academic performance, especially if college bound • Safety in school; students carry weapons, may experience fear of physical harm 	<ul style="list-style-type: none"> • Decisions on whether to go to college, join work world or enter military • Should be a time of choice and empowerment
Family	<ul style="list-style-type: none"> • Heightened need for privacy • Ambivalence about emotional independence • Opinionated • Challenges family rules, values, behaviors • Still need continued supervision and limit setting that promote increasing autonomy in decision making • Family members are important role models • Potential for sexual abuse increases as adolescent emerges sexually and begins to challenge behavior 	<ul style="list-style-type: none"> • Increased individuation and autonomy • Extremely opinionated and challenging • Increased family conflict, especially over issues of control • Spends less time with family • Peer groups take on greater importance • Parents may be frustrated; continued communication is important 	<ul style="list-style-type: none"> • Relationships more accepting and harmonious • More adult-to-adult interactions • Family feels sense of loss as adolescent independence increases or can experience freedom

American Medical Association, Guidelines for Adolescent Preventive Services, (GAPS) Clinical Evaluation and Management Handbook, 1995, pgs 54-55.