

# Objectives

To become familiar with adolescent growth and development

To understand the phases and tasks of adolescence

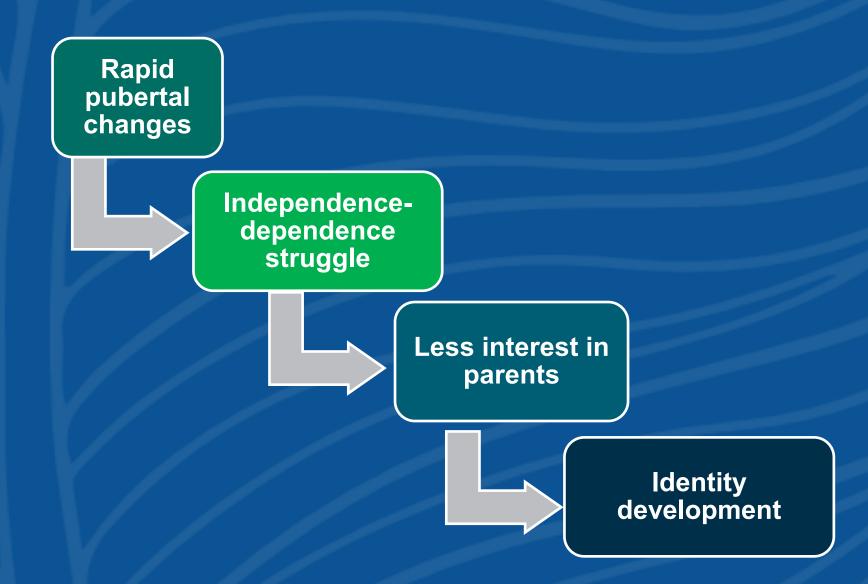
To understand reproductive health of adolescents and young adults (AYA) with disabilities

### Phases of Adolescence



Phases	Early	Middle	Late
Task			
Cognitive Development	Concrete thinking, egocentrism, impulsive behavior	Increased intellectual ability Abstract thinking	Advanced decision-making skills
Independence	Increased ability to express self through speech Less interest in parental activities	Peak of parental conflicts	Stronger personal identity Ability to delay gratification and solve problems Reacceptance of parental advice
<b>Body Image</b>	Preoccupation with self and pubertal changes	Focused on physical appearance to "fit in"	Completion of pubertal growth and development
Peers	Intense relationships with peers for support and connection - same gender	Peak of peer involvement Conformity with peer values	Peer group less important More time spent in sharing intimate relationships
Identity	Need for privacy "constantly onstage" Self-exploration, self-interest and fantasy Idealistic vocational goals	Increased scope of feelings, romantic relationship Feeling of omnipotence Risk-taking behavior Self-discovery Individuation	Practical, realistic, vocational goals Refinement of moral, sexual values Ability to compromise and to set limits Clearer sexual and gender identity

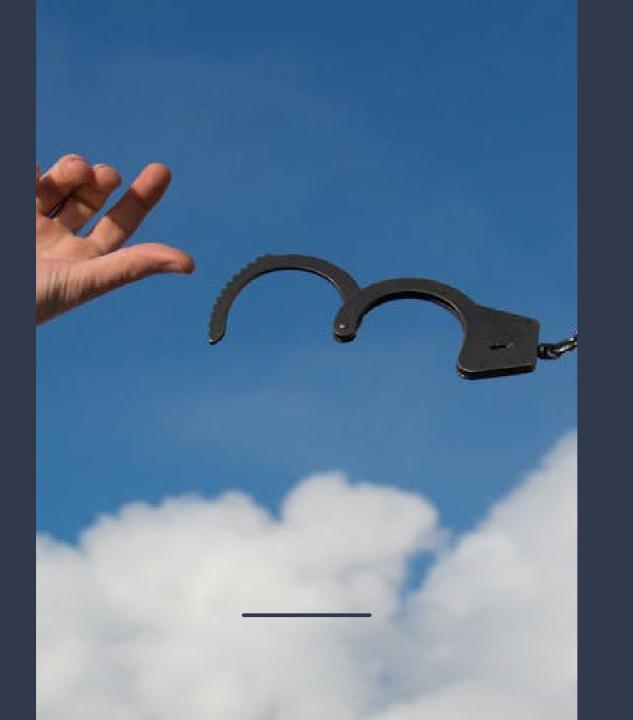
# Early Adolescence 10-13 yr





# Peer Group Focus

IMPORTANCE OF SAME-SEX PEER GROUPS



# STRUGGLE BETWEEN INDEPENDENCE AND DEPENDENCE

## Middle Adolescence 14-16 yr

Intense feelings, peer group values

### Independence:

- Less interest in parents/more peer time
  - More conflict in the home

### Peer group

 Dating activities, Extracurricular activities

### **Identity**

- More realistic
- Risk-taking behaviors

# **Bonding Dynamics**

# DECREASED INTEREST IN PARENTS





SEARCH FOR NEW SOCIAL BONDS

# Late Adolescence 17-21 yr

Identity established

Creativity and intellect better expressed

Less concern with body image

Less involved with peer/more serious relationship with one person



# **Body Image**

Adolescents often grapple with body image issues, focusing on self-perception and physical appearance. This preoccupation is intensified by social pressures, leading them to seek acceptance and comparison with peers more than ever.

















# **Physical Changes**

Time of rapid growth and development physically and psychosocially

AYA with disabilities and peers have the same important health priorities

Sexual health is a priority in all adolescents along with mental health and primary care

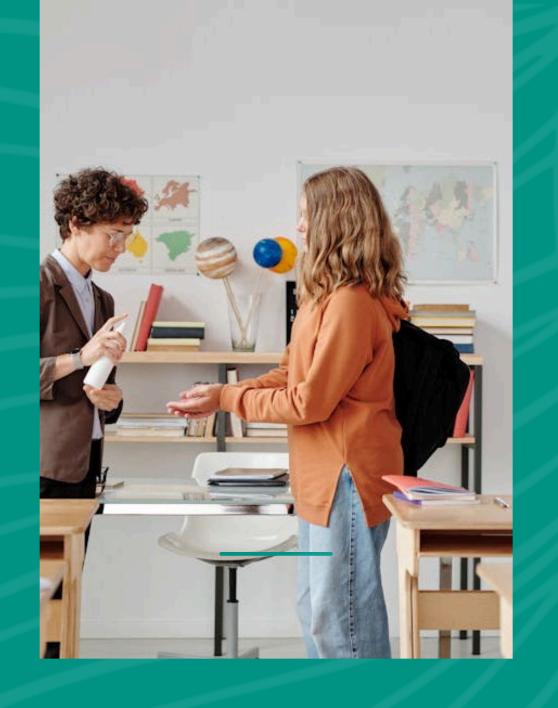
### Adolescent Health

### **HEALTH PRIORITIES**

Adolescents must prioritize their well-being, balancing sexual health, mental health, and primary care to ensure a healthy transition into adulthood.

#### **HEALTH CHALLENGES**

Adolescents with disabilities encounter unique reproductive health challenges, necessitating tailored support and resources for equitable care access.



# Piaget's Cognitive Development



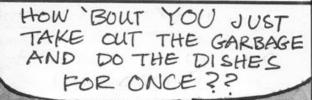
Logical reasoning only applied to objects that are real or can be seen



Individual can think logically about potential events or abstract ideas; advanced reasoning

### THE IDEALIST VS. THE PRAGMATIST

DUUDE, I HAVE SOOO MANY (DEAS THAT WOULD REVOLUTIONIZE LIFE ON EARTH AND BRING AWESOMENESS TO MANKIND.







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# Erikson's 8 Stages of Psychosocial Development

- Infant
- Toddler
- Pre-Schooler
- Grade-schooler
- Teenager
- Young Adult
- Middle-age Adult
- Older Adult



Proposed by Erik Erikson

# Identity vs. Role Confusion - Adolescence

Differentiation and becoming independent.

Begin to look at the future (comes with ability to think in the abstract).

Begin to form their own identity based upon the outcome of their explorations.

# Intimacy vs Isolation – Young Adulthood

Share ourselves more intimately with others.

Relationships leading toward longer term commitments

Establishing care within a relationship

# David Elkind – Pyschosocial

### **Adolescent Egocentrism**

Adolescents are overly concerned with their own thoughts and feelings

### **Imaginary Audience**

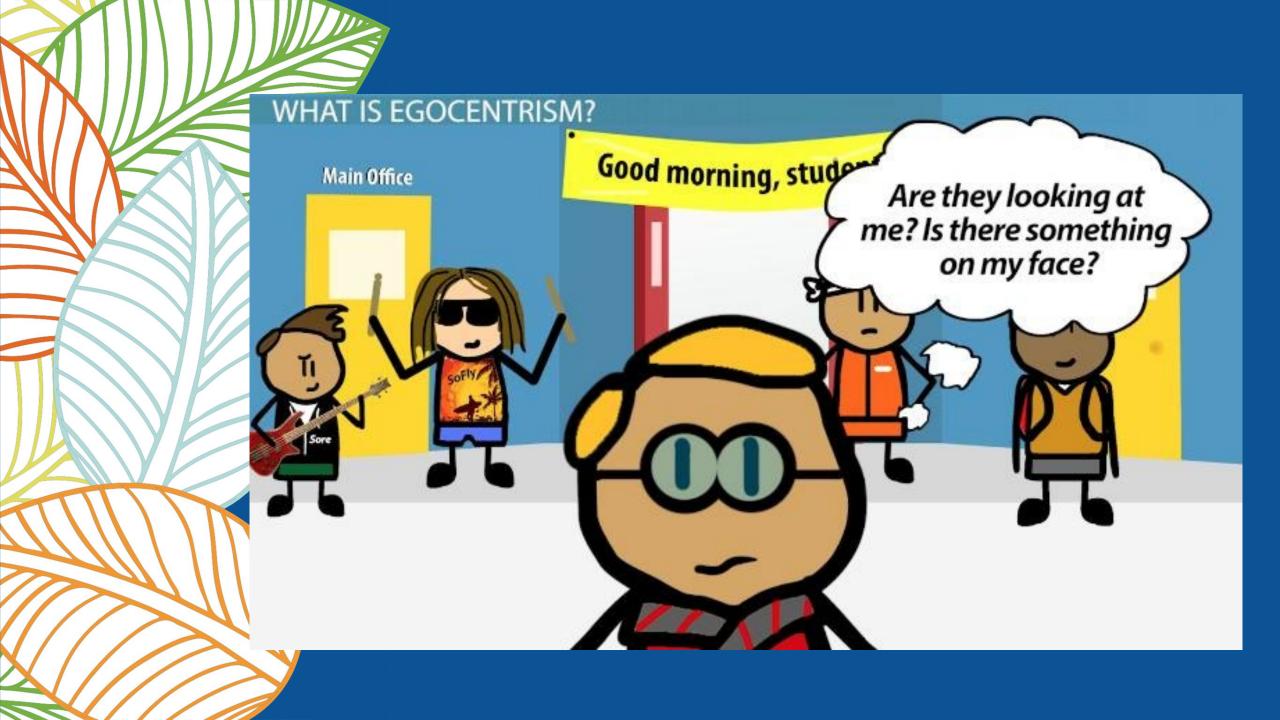
Adolescents believe that others are watching them constantly

### **Personal Fable**

Adolescents believe that their experiences and feelings are unique

### Illusion of Invulnerability

Adolescents think that misfortune happens only to others



Ideas about Sexual Behavior of Adolescent and Young Adult (AYA) with Disabilities

Restrict/ Innocent and prevent child-like sexual expression Relationships are inappropriate

### Sexual Behavior of AYA with disabilities

No difference

Ever having sex

Age of sexual debut

Sexual orientation

Pregnancy

Difference

Likelihood of sexual abuse

Likelihood of unhealthy relationship

### Factors that Increase Vulnerability to Abuse





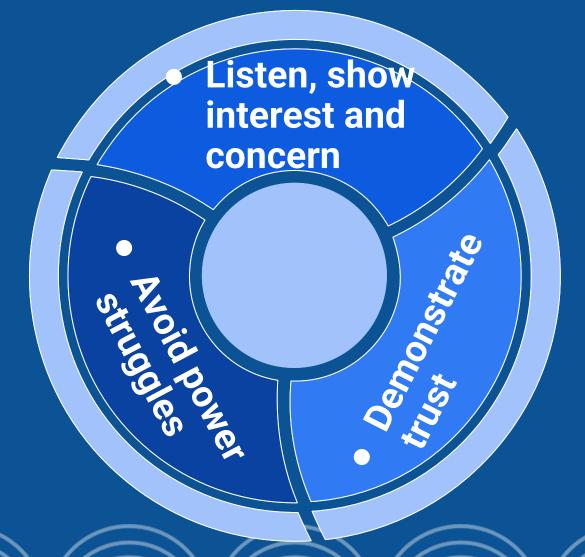


Belief that victim won't tell or won't be believed

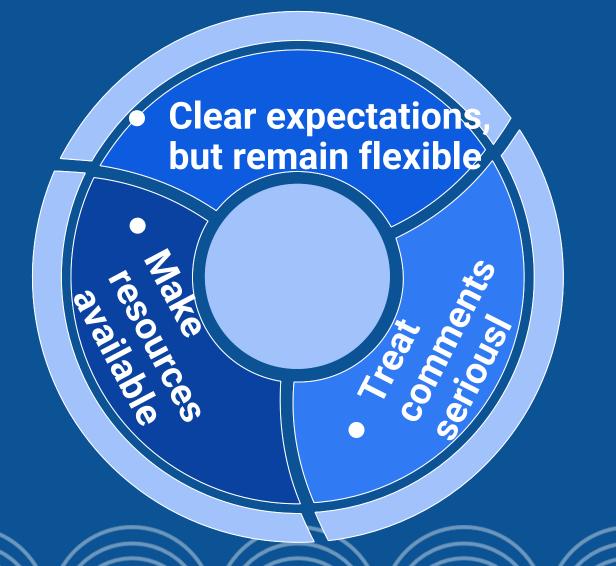
Intense desire
to be
accepted +
gullibility +
lack of
experience

Overprotection

# general recommendations



## general recommendations - continuued



### Conclusion

AYA with disabilities and peers have the same important health priorities while going through puberty and adolescence

Sexual health is a top health priority in all adolescents along with mental health and primary care

