

*ADOLESCENT PSYCHOLOGY*

*AN OVERVIEW*

**By**

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## **DEDICATION**

To God, the author of my life. And to all adolescence who striving to mature into healthy adults.

## **ACKNOWLEDGEMENTS**

I acknowledge in no small measure, the following people, Mrs. Meg. Okoro, Chukwudi Menkiti and the wife, and Ijeoma Abanobi. They help to make the production of this book come to reality.

## **PREFACE**

This book is written to expose the students and teachers to important areas in adolescence. It is a text book for providing the readers and educational psychologists with a comprehensive and well articulated reference materials.

Adolescent psychology is an area of Child Developmental Psychology which constitutes a branch of a branch of Educational Psychology. Adolescent Psychology covers a variety of study areas and so sourcing relevant information for education students became a heavy task. However, I was guided by the contents set out for students in tertiary institutions to study.

Adolescent psychology is an overview of the volumes of information that are available for the study of adolescence. It is therefore not exhaustive. It contains the very essentials that are of paramount importance to students. The information provided by this book is sufficiently sufficient for one semester for students pursuing National Certificate in Education for undergraduate and post graduate students in tertiary institutions.

The book is produced in order to help teachers, nurses, educators, parents to understand the

adolescents, their behaviour, characteristics, challenges, problems, and concerns and to be able to empathetically help them to wade through this turbulent period.

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## **CHAPTER ONE**

### **CONCEPT DISCUSSION**

#### **ADOLESCENCE**

Adolescence derives from *adolescere* and when defined means “to grow into maturity”. This definition shows adolescence as a process rather than a stage or period. Process is more dynamic and also continuous. It goes on imperceptibly. It is a critical period of human development. Those who see it as a developmental approach attach specific stages or periods in order to define adolescence. These stages are pre-adolescence, middle adolescence and late adolescence. Pre-adolescence



an adult. The law indicates when one should drink alcohol, when and who to have driving license, when to marry etc. Socially, the girls particularly are allowed by their mothers to make up; sons or daughters are advised when to date or when to go steady, when to attend night parties; and the father allows the son to use his car, etc. By doing this, these sensitive areas are taken care of by parents. But sometimes, some adolescents may think that their parents are interfering and there may be problem. In Nigeria, how do parents handle the adolescent in relation to the above areas?

Adolescence is a critical period of human development that is manifested at the biological, psychological and social levels of integration (Nwachukwu, 1995). Biologically, its onset is signalled by the acceleration of physiological growth and the beginning of secondary physical development (secondary sex characteristics). At the psychological level, it is marked by acceleration of cognitive growth and personality formation. These two continue to change at a slower rate during adulthood. Socially, it is a period of intensified preparation for taking up adult role and it ends when the individual is accorded an adult prerogative. Time and nature of its termination differs greatly from society to society. Even though adolescence is defined in terms of the three levels above, it is to be noted that life is simultaneous and interactive. All the level manifest at the same time.



and slow at developing. Yet Claudius was married at 12 and a high priest at 13. This jump straight from childhood into adulthood is typical of classical cultures, and of the way of life in the middle ages and Renaissance as well. Aries (1962) notes that in the 1300s and 1400s, boys even five-year olds, went to school armed, and often had to take off their swords before they were allowed to attend classes.

Age was not a criterion in deciding what the individual should be taught, thus at Caen, France, in 1677, pupils in the primary grade ranged in age from nine to 17, and those in the highest grade ranged from 12 to 20 (Aries, 1962). Cultures were not age graded. For both those who went to school and those who did not, the age of seven was considered to be the age of adulthood in most of Western culture. After seven a person was legally responsible for his crimes, and could be hanged if the offence warranted it. After this age children went to work if they were of the working class, and all children were free to take part in all of the activities of adult society. Young children working in mines and mills in England and the United States in the 1800s must be viewed in this context. Even today, adolescence as a social phenomenon is often absent in entire cultures. Within hunting cultures, childhood ends by age eight, and within agrarian culture by age 10 to 12 (Landis, 1945). It is only in present-day industrial culture that the period we call adolescence is an extension of childhood dependency.



individual. That is why sometimes, he is branded an adult and sometimes a child.

In many cultures including Nigeria, the socio-economic background of families help either to accelerate or extend the period of adolescence. For instance in developed countries where upper and lower classes are operational, the lower class people accord adult role to an adolescent because he is expected to be helping the family by bringing home some money. This shows he or she is working to augment the family income. This condition is true in Nigeria, where in poor families an adolescent is pushed into menial jobs to help hold the already overstretched family income in place. He may be expected to start paying school fees for younger sibling(s). In wealthy families in America, England and France, the adolescent enjoys his adolescence which extends to the appropriate time which the law allows. In Nigeria, the extension is relatively abnormal. Even at 25 years and perhaps up to 30 years once the individual is not employed, no specific role is assigned to him. He does not earn money and so he remains in the parent's home, eating off them and he expects them to be taking care of him. While his counterpart that is employed is expected to play specific role which includes helping parents getting married and starting off his own family.

In various cultures, the transition from childhood to adolescence is clearly marked with puberty rites like teeth filing, fattening, tattooing, etc. These help to guide or guard the behaviour of an adolescent. He will know that he is expected to behave in consonance with his age and status, otherwise sanctions in form of derogative songs and ostracism by the group are meted out to him. Each culture provides experience specifically set as part of the training and expectations of the adolescent. The group that has attained the status of adolescence may have a dance, uniform and the members perform in the village square. People attend these ceremonies. Parents are always proud of their adolescent sons and daughters if they perform well in such occasions.

### **Rationale for Studying Adolescent Psychology**

Psychology is a behavioural science. It scientifically studies human behaviour. The study of human behaviour is done in order to understand behaviour, to predict behaviour and to control behaviour. An adolescent is a human being passing through a developmental phase from infancy and moving towards adulthood. His experiences are many and varied, sometimes favourable and at times traumatic.

The study will help the society, the parents, various governments and religious bodies and



even the adolescent himself to put adolescence in its proper perspective and so help the adolescent to understand himself, his rights, privileges, what is expected of him and how to conduct himself as an adolescent. To Ofordile (2002) it is good to study the adolescent “to understand him more and more and proffer recommendations on how best to nurture the adolescent patiently to maturity”. Pope Benedict XVI (2006) sees the need for understanding the adolescent and prays, “that young people who are searching for the sense of life may be understood, respected and accompanied with patience and love in their journey to maturity. Adolescence is studied

- (a) to understand their developmental characteristics and problems
- (b) to help them maintain good mental health
- (c) to adjust to the mental health maintained
- (d) to help them to direct their curiosity to the appropriate areas

When adolescents are nurtured patiently in the area of physical, social, moral, intellectual and emotional development, they will mature into confident individuals and be able to face the future confidently and the society will be better for it.

## **Perspectives and Conclusions about Adolescence**

The adolescent is blamed for everything that happens in a society ranging from increase in crime, violence, suicide, cultism and political upheaval to the breakdown of traditional, familial and religious values (Ofordile, 2002).

In 1994, John Paul II describes who an adolescent is and informs us that the youth is in search of answers to some basic questions with respect to the meaning of life and how he can concretely succeed in living this life. The Pope has touched on the primary issues of adolescence.

Many studies have been carried out in the area of adolescence and the results of the studies have thrown some light on their perception of who an adolescent is. Hall (1904) who carried out the first scientific study of adolescence came out with the result that it is a period of storm and stress as a result of accelerated growth caused by hormonal discharge into the blood. Mead's (1961) study proves that adolescence is relatively conflict-free and there is smooth transition from childhood to adulthood. Freud (1973), in his psychoanalytic study of adolescence, views the period as full of stress which is caused by the presence of hormones injected into the blood stream. The conflict between the id, ego and

superego may induce some stress in the adolescent too. Erikson (1963) shows that adolescence is a period of ego identity, when the individual is searching for self. If he succeeds he sees time in the correct perspective, has self esteem becomes a role experimenter, leader/followership seen correctly, and has sound ideological commitments.

Otto and Otto regard the period of adolescence as a period of storm and stress. Is this stress the characteristic of the adolescents or is it the condition of the environment – austerity measure or are they doing this because of what is internal in them, or do people condemn them for what is not their fault? The society should not always see the adolescent from the negative side and should not always blame them when things go wrong. The ever-changing system is responsible for the behaviour of the adolescent – films, TV programmes etc which result in their mode of dressing and behaviour.

Smith and Coleman observe that the youth develop their own culture from adult culture which they are forced to conform to. The youth culture controls their behaviour. Youth culture dominates youth behaviour in those areas most important to peer relation. It teaches and approves norms of sexual intimacy that are tabooed by adult norms.

Smith and Coleman identify two fundamental characteristics of the youth culture:

1. Solidarity (conformity)



## CHAPTER TWO

### **CULTURAL CONCEPTS OF ADOLESCENCE**

There are various theories that discuss the concepts of adolescence. These theories conceptualise adolescence from various perspectives ranging from cultural, periodisation, etc. Although these theories appear established, they may mislead people if certain in-built problems arising from conceptualisation are not taken into consideration.

1. To develop some conceptual tools has been slow and tedious because it is not easy to invent adequate means to show social reality in its totality. This is because people do not see things in their total concreteness, but only certain aspects of them, that is, those people can abstract with the use of cultural symbols. A renowned psychologist used this aphorism to describe how people see and abstract things: “first we look, then we name and only then do we see”. This is to say that people do not respond to stimuli but their definition of the stimuli.
2. What is regarded as knowledge and understanding depend on how these definitions are arrived at. If we look at the notion of relationism which states that truth is not necessarily fixed but premised on the historical and situational context in which it is found. Some cross-cultural studies have

shown how repeatedly our involvement and narrowed cultural frame of reference partly institutionalise our own distortions of the truth. Hall (1959) says “culture hides much more than it reveals, and strangely enough, what it hides, it hides most effectively from its own participants”. So when we describe any particular adolescent behaviour as “ambivalent”, it directs us towards psychoanalytic conception of adolescence.

3. What we see or choose not to see depends on the concepts available to us. These are packaged ready and they are available in many and varied forms. A set of concepts may direct us to recognise anti-establishment, the generation gap, and contradicting cultural values. Another set may call our attention to ambivalence, dependency, psycho-sexual conflicts, and resurging oedipal conflicts. Yet another may lead us to go searching for anomie in the social system, status deprivations and role confusions.

It would however be more realistic to find a better arrangement – that is a more realistic do-it-yourself kit made and tailored to the solution of or to account for the particular behaviour in question. This is what the professional should strive for – ability to find and apply the most workable combination of concepts made to solve a particular problem on hand. No matter how good the professional is he cannot work successfully with a

limited inventory of narrowly-focused concepts and theories. The richer therefore, the repertoire of conceptual tools used by the professional, the more likely it will be for him to discover the combination that will be successful for understanding and dealing with particular problems.

### **Social Concept of Adolescence Ann Sieg**

Social approach focuses on the social and cultural determinants which in a sense create the adolescent condition. In this view, social structure and culture join to induce adolescence which essentially is an experience of passing through an unstructured and ill-defined phase that lies between childhood and adulthood.

Two factors are responsible for the gap or void in the social structure:

1. a finely established division of labour with its complex technical status structure, and
2. the failure of the cultural system to provide worthwhile ideology which will give strong identity and purposeful feeling to the adolescent.

Because the adolescent cannot determine himself in the social structure it gives rise to the emotional instability and general turbulence (Roszak, 1968).

For May (1965), the developmental tasks to be achieved by the adolescent within the society's unstructured framework include;

1. efforts to come to terms with society by getting an education, job, starting a family;
2. to come to terms with oneself in developing an identity and individual talents, and
3. to come to terms with life as a whole by acquiring a moral code and general religious beliefs. Harvighurst (1952) listed well-known essential developmental tasks which more specifically pointed towards skills, knowledge and attitude which must be mastered by the growing adolescent to avoid maladjustment and social disapproval in future years.

Growth of human beings involves specific stages of infancy, childhood, adolescence and adulthood which culminates into old age. There are various sub-divisions of these stages. These stages and their sub-divisions are generally accepted. Based on these stages, adolescence is bound to occur since it is included in one of the stages.

However, there are cultural perspectives about what adolescence is in terms of human development and what an individual is expected to achieve.

According to Ann Sieg, the stage of adolescence is not a stage that is necessary to human development, but is a mere cultural phenomenon, necessary perhaps to a culture but it is not found in all cultures.



There is much confusion as to who an adolescent is or what adolescence is. Because of the intense concern of the society about what the stage of adolescence is in response to the social, psychological problems that arise from it which disturbs the society, it is a better and more practical way to study adolescence from the point of view of its being a social problem. It has been generally regarded as a social problem rather than as a natural stage of physiological development.

Yet many definitions of adolescence relate to it as a stage of psychological development rather than a social problem. According to Sieg, none of the present definitions of adolescence does more than defining the boundaries of adolescence without explanation. They do not define adolescence in terms of behaviour which is presently causing confusion in the society and a great deal of research in the area. For this reason, Sieg suggests the following definition as the basis for a consistent approach to the study of adolescence.

Adolescence is the period of development in human beings that begins when an individual feels that adult privileges are due him which are not being accorded to him, and that ends when the full power and social status of the adult are accorded to the individual by the society.

This definition eliminates some characteristics, which were thought to be factors relating to the stage of adolescence:

1. relationship between adolescence and puberty which, though, two of them occur at the same time, puberty is not the cause of adolescence;
2. adolescent period is not a universal occurrence so it is expected that there are cultures where there are no occurrence of adolescent disturbances;
3. the age of the individual, though it can indicate, is not relevant

The above definition indicates that the presence of adolescence depends solely on the perception of the individual as to the rights he has and those he ought to have. These rights can be acquired in a number of areas – in the family, in a psychological sense, rights in the social sense, in a legal sense – (e.g., to vote and be voted for, driving a car). The limitation of the above definition is centred on the manner of behaviour which is the result of his perception of his society. Examples, the Irish male who does not achieve full status until 35 years or more. The Negro in the USA whether teenage or adult does not acquire full status except in his immediate sub-culture. The Manus male (Mead, 1935) does not indulge in adolescent behaviour until he is 18 years.

Certain societies have refused to fit themselves into definitions of adolescence.

- (a) Arapesh society in New Guinea – from 13 years after a short training, males are initiated into puberty rites and they get married to six or seven year old girls. From that period they have to solely fend for their wives until they are old enough (until menarche) to live permanently with their husbands. Here age as a factor (in definition is eliminated and so adolescence as a stage is non-existent). There are no adolescent problems.
- (b) Nyakyusa village (age-graded) where there is an extended period between puberty and adult status and there seems to be no adolescent problems. This results from the fact that the change from childhood to adulthood is not abrupt. The change is regulated and predictable. The adolescents live together according to age groups with full knowledge that at a particular time the adults will hand the government to them. This marks the attainment of adult status by the young men. Though the process of marriage takes a long time, they marry around twenty years.

In Manus society, puberty occurs with no visible upset because there is a kind of in-built relaxed atmosphere. Males get married at 18 years and at this point, they lose their freedom, autonomy and almost all rights until they become economically viable and independent to fend for



tend to exhibit these traits/characteristic of white juveniles. The whites do not resent the term 'old boy' which the Negro males hate to be called.

In a simple society, the direct relationship between the adolescent's frustration of need and his reaction toward this frustration is prominent. In a more complex society, the manifestation of the need frustration is not easily noticed. There are many major categories of manifestation.

1. It is the basic need to attain full power and recognised adult social status. But when these are delayed for a short period after puberty, the alternative – the symbols of power will suffice – for example, cars, money, sexual freedom etc, are the symbols in Western culture.
2. When there is no hope of ever having the full power or acceptance as an adult, the power- seekers among the adolescents may resign from society and create sub-cultures of their own that will give them power status at their level. Examples of such sub-cultures include the passive Negroes, the New York street gangs, the Hippies. These power seekers hide under the cloak of "lowering the rights serves the ego".
3. The third group lies in between the first group – those who accept symbols in lieu of full power and adult status and those who will resign from the society. This group comprises those who latently

possess those things valued by the society but are not able to have them and so show their contempt through attacking those same values in the society. This is a destructive group such as – the juvenile delinquents who are acting in defiance to the social rules and they are identified for their “disregard for people’s and public property, reckless living for the moment, paucity (small amount) of experience and emotional superficiality, lack of basic principles and lack of sense of responsibility” (Fyvel, 1961)

4. Through studies in the area of philosophy of social groups, a fourth group has emerged in opposition to social majority. The philosophy of the members of this group is, “I do not want society’s so-called valued things, not because I cannot have them but simply because they are valueless.

This last group maintains a certain calmness and it is not noticed that there is frustration in the adolescence. They see themselves as not being owed/ denied certain powers which they do not have, since their power is already partly possessed by virtue of the fact that they are in close community with those of similar age group who have similar beliefs. This group of young people may be approaching a condition that is characteristic of lack of adolescence.

### **Theoretical Regularities G.W. Goethal**

Goethal addressed himself on two differing issues. These he called “theoretical regularities”.

The first theoretical regularity is the regularity of differentiation. By this he means that in all societies there comes a time in the life cycle of the human being when he or she is recognised as no longer a child but not yet an adult. This differentiation occurs in varying ways. For instance, there are psychological and physiological changes during puberty. Biological changes in body structure move the adolescents away from childhood and the newness of these changes still keeps them from being in the world of adults. Some others (anthropologists) believe that these changes occur but they focus their attention on variables. When adults view these changes they accord the young ones a different status accomplished through the rite of passage. There is an initiation rite which is important because it is a rite of differentiation.

Concept of reciprocity – This connotes that both the parents and the young adolescent reciprocally agree that change has occurred and so the rite of initiation is arranged for the adolescents to go through. This rite will move the child into adolescence.

Regularity of authority. This is viewed not only from the issue of the old over the young, but about who has the authority and the question of who takes the initiative in the differentiation

process. Who is responsible for the contract of reciprocity? Is it the parents that will first welcome the young into the adult world or is it the adolescent who demands that admission? However, all societies have mechanisms for determining appropriate sex role, the acceptable sexual mores of those biologically mature but not yet economically responsible.

### **Patterns of Adolescent Experience**

These patterns are woven around differentiation and reciprocity and they are:

1. Geethal named the first one – adolescence by age grade. This is found in primitive and rural societies. In this first pattern the young are supervised through various schools and rituals until they are fit to be admitted into adult world. The training shows differentiation and admission shows reciprocity.
2. The second pattern dramatises a “particular moment” in an individual’s life as being the time he ceases to be a child and now begins to be an adult. It is a kind of initiation rite which symbolically plucks the young man from the world of women and plunges him into the world of men.
3. For this third pattern, Erikson has suggested the need for psychosocial moratorium as part of adolescent experience. This means a time when the young and their parents agree to a period



of non-commitment during which decisions about such matters as one's social role, one's occupation and one's friendships and intimacies can be approached without the tension both of them experience. For example, Mead has shown that the Samoan adolescent is permitted a time of freedom before the assumption of family responsibilities. Nyakyusa in Africa requires their adolescent to move away completely from adult world, formulate their own ideas about themselves and when they feel they can act like an adult return to the village.

Goethals is suggesting that certain universal problems have to be faced, for instance, the problems of differentiation, reciprocity and authority and that as these problems are faced one tends to become an adult by age grading, by initiation or by experience of moratorium.

## **CHAPTER THREE**

### **GROWTH AND DEVELOPMENT DURING ADOLESCENCE**

This chapter begins by going through the concepts that form the title of the chapter. We occasionally meet these concepts in our daily activities and make use of them. Though they can be applied to all areas of human endeavour, we shall however look at them from psychological standpoint.

#### ***Growth***

Living things grow. Growth refers to a quantitative increase in body dimensions. It implies a change in quantity and this results in increase in height, size and weight of the whole or any of the parts of the body. Growth means a general change in a person in relation to physical growth. It refers to becoming larger and heavier and indicates increases and changes that are additive and augmentative. It can be measured quantitatively in grammes and kilogrammes etc. The heart becomes bigger, the bones become longer, thicker and heavier. In general, the body grows by adding more grammes and circumference in weight and more metres in height.

According to the British Medical Directory in Nwachukwu (1995) growth is “the progressive development of a living being or part of an

organism from its earliest stage to maturity, including the attendant increase in size. The above medical definition offers certain information;

- a. that growth is progressive and involves series of changes which include differentiation of parts to perform various functions and alterations in the form of the body as a whole and in the individual organs and systems.
- b. that distinction has to be made between the growth of the body as a whole and individual parts; not all parts of the human body grow at the same rate or stop growing at the same time.
- c. growth is a continuous process which starts from conception and extending in certain sense, until the individual dies. This shows that growth does not cease when we attain maturity e.g. continued growth of our skin, hair and nails etc. From Nwachukwu (1995) growth is said to be multiplicative when component cells of a tissue or organ increase in number through division and it is auxetic when the cells increase in size.

### ***Development***

The term development means the gradual and orderly unfolding of the characteristics of the successive stages of growth. It is also a gradual growth and expansion process, which involves







Learning comes after genetic maturation. For instance toilet training does not exist at birth but the baby is trained in toileting at about the sixth month when the baby is genetically ripe or mature enough to learn that. A child's genetic or physiological elements should be allowed to mature before he is allowed to carry on any training or learning.

### **Readiness**

When an individual is developmentally ready or ripe, that is when he is ready to learn and it is also the teachable moment for the teacher. So if the teachable moment has not arrived there should be no need forcing the child, otherwise both the child and the teacher may encounter frustration in the attempt. Teachers should wait and make sure that there is readiness in children before they are allowed to learn. The teacher should wait for genetic maturation and utilize it for effective teaching and learning.

Growth, development and maturation are not compartmentalised. They occur simultaneously. Man grows and develops and development is characterised by gradual unfoldment of the successive stages of growth while maturation results from development.

### **Characteristics of Development During Adolescence**

Adolescence is a period of development between childhood and adulthood. It is a transitional





values, render assistance in times of need.

3. Crowds: groups of several cliques having the same interests, encourage loyalty, getting along with the members of the opposite sex. Nwachukwu (1995)

At this stage, the individual is in search of personal identity for he wants to be on his own. He no longer wants to seek identity from his parents but seeks after social independence. The adolescent is expected to have a different outlook from that of his middle childhood. The expectation of the significant people in his life like parents and other members of the family tend to encourage this independence by allowing them to exercise the independence which they were not allowed before. At this point, they are allowed to go out and probably may stay later than before. They can be allowed the use of the family car or to bring their friends home especially those of the opposite sex, since there is an amount of increased social privileges.

Both the parents and the adolescent express a feeling of ambivalence on the question of independence. Ambivalence on the part of parents is expressed when they wish their children to be independent and at the same time wishing they are not. As their children grow up, parents are growing older. In the course of time, the children will all leave and parents are left

alone and lonely in the house. Parents express joy and sadness when this reality is manifesting before them. This is the state of ambivalence, signifying parents wanting their children to grow up and at the same time wanting the opposite.

On the part of the adolescent, ambivalence manifests itself when he faces a state of uncertainty. He wants to become independent and at the same times wants to be dependent because he realises it is not easy to become an adult which may involve making his own difficult decisions unlike before when parents made decisions for him.

He faces parental patterns of authority which may give pleasant, harmonious and encouraging experience or may not. If the parents are democratic in the exercise of authority in the home, they encourage the adolescent to take part in decision making in the home and is also allowed some level of freedom. If the parents are permissive ones, they give complete freedom to the adolescent to do what he wants to do, where and when to do it. He is in control of what to wear, where to go, when to go and when to come back. There is little or no supervision and control on the part of parents. But if the parents exercise autocratic control over the adolescent, he may revolt against his parents rigid attitudes towards them. Of these three, the best is the democratic pattern, but it is good to

use the other two when occasions call for them. It is better to use the democratic pattern but none can be used to the exclusion of others.

An adolescent wants to belong to his group and do things the way the members do. This longing to belong is the search for personal identity, search for the group which he can identify with. This is seen in their way of dressing, walking, playing music and other ways of doing different things. He now begins to take interest in the members of the opposite sex. This is known as heterosexual interest which comes up in later adolescence. This is natural because it is a demonstration of being grown up. Parents expect it to occur and if it does not, then something has gone wrong.

Social development of adolescents takes place in the context of all their relationships, particularly those with their peers and families. Key features of adolescent social development are summarized in Table 6.

**Table 6: Key Features of Adolescent Social Development**

<b>Social Group</b>	<b>Early Adolescence (Ages 9-13)</b>	<b>Middle Adolescence (ages 14-16)</b>	<b>Late Adolescence (ages 17-19)</b>
<b>Peers</b>	• Centre of social world shifts from	• Peer groups gradually give way to	• Serious intimate relationship

	<p>family to friends.</p> <ul style="list-style-type: none"> <li>• Peer group tends to be same-sex.</li> <li>• Strong desire to conform to and be accepted by a peer group.</li> </ul>	<p>one-on-one friendships and romances.</p> <ul style="list-style-type: none"> <li>• Peer group tends to be gender-mixed.</li> <li>• Dating begins.</li> <li>• Less conformity and more tolerance of individual differences</li> </ul>	<p>s begin to develop.</p>
<b>Family</b>	<ul style="list-style-type: none"> <li>• Increasing conflict between adolescents and their parents.</li> <li>• Family closeness most important protective factor against high-risk behaviour.</li> </ul>	<ul style="list-style-type: none"> <li>• Family influence in balance with peer influence.</li> </ul>	

One of the greatest social changes for adolescents is the new importance of their peers. This change allows them to gain independence from their families, to develop moral judgement and values, and to explore how they differ from their parents.

By middle adolescence, the intensity of involvement with a peer group gives way to more intimate friendships and romances.

The relationship between adolescents and their parents is changed by the adolescent's social development. However, the shift in the adolescent's social world from family to peers does not lessen the importance of the family in the adolescent's life.

The adolescents new desire for independence leads to increasing conflicts between adolescents and their parents. Minor conflicts and bickering are considered to be normal as teens and their parents adjust to their changing relationships.

The characteristics of an adolescent's community can also have a great impact on his or her social development. Communities include features such as:

- Neighbourhood socioeconomic status
- Support networks for families in low socioeconomic status neighbourhoods
- Schools
- Religious organizations
- The media
- People who live in the community

## **The Meaning and Evidence of Social Maturation**

Perhaps one of the most glaring features of social maturation is the ability to make and keep friends. To be effective in social relationship, the individual must acquire some social skills which would help him to deal with people beautifully with understanding. This means that each person has to be conscious of other people's interests, feelings, their growth and be supportive of other people's feelings and personal worth. In crucial situations, social maturation is evidenced by what is called poise, courtesy and a well controlled temper even under severe pressure or in a situation of emergency. The index of social maturity is loss of egocentricity. As the child matures, he loses self centredness and becomes nurturant – his interest focuses on other people's feelings and he begins to take their views.

## **Physical Development**

Adolescence ushers in a lot of changes in both sexes in relation to physical development. These changes are as a result of hormonal activity. Growth and change are noticed more this time than at any other period in people's life span.

## **Physical Changes in Adolescence**

It should be recognised that although adolescence is a period of rather rapid physical change, there is still a clearly discernible continuity between a given individual's physical development in childhood and his development in adolescence. Persons who are tall as children tend to be tall at adolescence and adulthood (Shuttle-Worth, 1939). Body types (ectomorph, mesomorph, endomorph) remain relatively constant over time (Sheldon, Stevens and Tucker, 1940). The pre-adolescent growth spurt is the first harbinger of the changes that occur in the individual during adolescence. Rapidity of growth results from complex interactions of various endocrine glands. The growth of genital organs with associated changes in glandular secretions, slows and ultimately halts growth. The individual undergoing the changes that lead from sexual immaturity to sexual maturity is said to be in the pubertal stage of development. It is extremely difficult to say exactly when a person has become sexually mature (has passed through the age of puberty) but a number of different indices are used. These are discussed below.

**General Indices of Development:** Each person, before becoming completely mature, is at a number of ages at any given moment in time. We usually think of our age as our chronological

age (CA), but the person who is chronologically 13 may be more or less than 13 according to a number of other measures. The person of CA 13 might have a mental age (MA) of 15 or, for that matter, of MA of 6 or 8 depending on what age group he is nearest in terms of intellectual functioning. In the same fashion, this 13-year old may be a number of different ages in terms of physical development. Some 13 year olds are almost fully adult in various kinds of physical development, while others are children who have not yet become pubescent. Probably the most frequently used index of physiological maturity is skeletal age. The number of bones present in the body (about 270 at birth, 250 at puberty, and 206 at adulthood) varies as bones form and later fuse together. While this change in absolute number goes on, individual bones change from cartilage and osteoblasts (areas within the incipient bone from which ossification proceeds) to bone. These changes in number of bones and in ossification of given bones are orderly and sequential, so that by determining where an individual is in this developmental sequence, his skeletal age is also determined.

If a 13 year old is skeletally 11 years and 1 month old, we know with a high degree of certainty that puberty will be quite late as compared with agemates and that growth in height will continue for a longer period of time.



Olson (1949) has proposed that we assess an individual's developmental status by making use of a number of ages – mental age, reading age, height age, weight age, dental age and skeletal age. He suggests that these ages usually run together (e.g. a person of CA 15 usually is about 15 years old on these other indices of age) but that a look at deviations across these various ages is of value.

**Sexual Indices of Development:** A number of different criteria exist for the determination of the sex or gender of any person. The different criteria for sexual identity described by Hampson and Hampson (1961) are: chromosomal sex, gonadal sex, hormonal sex, sex of internal organs, sex of external organs, assigned sex (sex of rearing), and psychological sex (gender role).

1. Chromosomal sex – Sex (gender) which results as a function of chromosomal combination. If the chromosomal sex is a male it is as a result of XY combination. But if the chromosomal sex is a female it is as a result of XX combination.
2. Gonadal Sex – has to do with the sexual organ that produces sperm in males or the sexual organ that produces ova (eggs) in female. In the male the organ is testes and in female it is the ovary.

3. Hormonal sex – the sex is assigned to an individual as a result of the kind of hormone discharged in the body and the behaviour arising there from. Thus a male may be assigned a female if he behaves as such because of female hormone discharged in his body system and vice-versa.
4. Psychological sex – gender role, that is, the person is either a male or a female. The sex role is assigned by the home, the community and the society, according to the gender of the individual.
5. Sex of internal organs – the nature of the internal sex organs of the individual may be either male sex organ or female sex organ. The organs are internal and so cannot be noticed. They may not correspond with the external ones.
6. Sex of external organs – the sex organs located externally in their appropriate positions. The organs are seen since they are located outside of the body. They may not be the same with the internal ones.
7. Assigned sex – sex assigned by the home and extending to the society. The individual is reared and socialised as such, a male may be assigned a female role and vice-versa.

**Sexual Changes in Girls:** A number of changes occur as sexual maturity is reached by girls. For example, breast development can be classified into one of a number of stages, ranging from the 'bud' – an enlargement and protrusion of the nipple, to the fully mature breast – and changes in amount and type of body hair can be chronologically ordered. However, the most frequently used measure of sexual maturity for girls is whether they have reached menarche, the age of first menstruation, or whether they have not. Differences in age of menarche within any one generation are large, and have considerable impact on the personality and social adjustment of those who are most deviant from the mean. Parents complain that dating, dancing, interest in the other sex, and the wearing of more mature clothing and of cosmetics is beginning earlier now than before.

**Sexual Changes in Boys:** There is no such single useful marker as menarche in the investigation of sexual maturity in males. The Crampton criteria (Crampton, 1908a, 1908b) most frequently are used to place males along a continuum of sexual development. These criteria have to do with the maturity of the pubic hairs and involve three major stages; unpigmented (prepubescent), pigmented but straight (pubescent) and pigmented and kinky (post-pubescent). There is no one-to-one

correspondence between stages of development according to the Crampton criteria and the ability to produce spermatozoa, so that the exact age at which the average male reaches sexual maturity cannot be stated with accuracy, because of differences in the area of maturation.

Physical changes in the adolescence are noticed as follows (Uba, 1982)

<b>Girls</b>	<b>Boys</b>
<p>Girls exhibit the following characteristics</p> <ul style="list-style-type: none"> <li>- depositing of fat on the hip</li> <li>- skin gets smooth, becomes more rounded and more beautiful</li> <li>- breast and the body size develop</li> <li>- the pelvis widens, gets rounded and beautiful contours peculiar to girls begin to show</li> <li>- hair begins to appear at the armpits, pubic region and sometimes on the hands and legs</li> </ul>	<p>Males show the following characteristics</p> <ul style="list-style-type: none"> <li>- appearance of pigmented hair in the armpit, pubic region, face and other areas</li> <li>- change in voice and elongation of limbs</li> <li>- appearance of Adam's apple</li> <li>- external genitals begin a period of rapid growth</li> <li>- average age of the onset of puberty is</li> </ul>

<ul style="list-style-type: none"> <li>- first menstruation “menarche” may appear</li> <li>- girls mature at 12.50 – 13.50</li> <li>- breasts start budding at puberty and fully mature between 18 and 19 years</li> <li>- primary sex characteristics have rapid growth – vagina, ovary, etc</li> <li>- girls achieve puberty at 13 years.</li> </ul>	<ul style="list-style-type: none"> <li>between 13-14 years</li> <li>- primary sex characteristics – penis and testes grow rapidly between 17-19 years</li> <li>- boys achieve puberty at 15 years</li> </ul>
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Primary sex characteristics are the organs (internal and external) which are responsible for reproduction. Secondary sex characteristics are those that distinguish male from female. These have no direct contribution toward reproduction. These include development of breasts, round shape for girls, broad shoulders for boys etc. Within both sexes there are variations in their rate of growth and development and from one individual to another. Girls mature sexually earlier on the average than boys.

Adolescent experiences a growth spurt, which involves rapid growth of bones and muscles. This

begins in girls around the ages of 9-12 and in boys around the ages of 11-14.

Sexual maturation (puberty) also begins at this time. During puberty, most adolescents will experience:

- Increase in height, weight and strength
- Oilier skin and some acne
- Increased sweating especially under arms
- Growth of pubic and underarm hair, and facial and chest hair in boys
- Systems of the body such as respiratory and circulatory systems acquire their full growth.
- Changes in body proportions.
- Masturbation and fantasies about sexual intimacy
- In boys, enlargement of testicles, erections, first ejaculation, wet dreams, deepening voice.
- In girls, breast budding, increased vaginal lubrication and the beginning of the menstrual cycle.
- In boys, the voice becomes deeper

The physical changes of early adolescence often lead to:

- **New responses from others**

In response to these physical changes, young adolescents begin to be treated in a new way by those around them. They may no longer be seen as just children, but as sexual beings to be protected – or targeted. They face society's

expectations for how young men and women “should behave.

- **New Concern with physical appearance and body image**

Both adolescent boys and girls are known to spend hours concerned with their physical appearance. They want to “fit in” with their peers yet achieve their own unique style as well.

Many adolescents experience dissatisfaction with their changing bodies. Weight gain is a natural part of puberty, which can be distressing in a culture that glorifies being thin. In response, some adolescents begin to diet obsessively. About 20% of all females aged 12-18 engage in unhealthy dieting behaviours. Some of these adolescents develop eating disorders such as anorexia nervosa or bulimia.

Risk factors for girls developing eating disorders include:

- Low self-esteem
- Poor coping skills
- Childhood physical or sexual abuse
- Early sexual maturation
- Perfectionism (American Psychological Association, 2002)

### **Adolescence and Identity**

The growing and developing youths, faced with this physiological revolution within them, and with tangible adult tasks ahead of them, are now







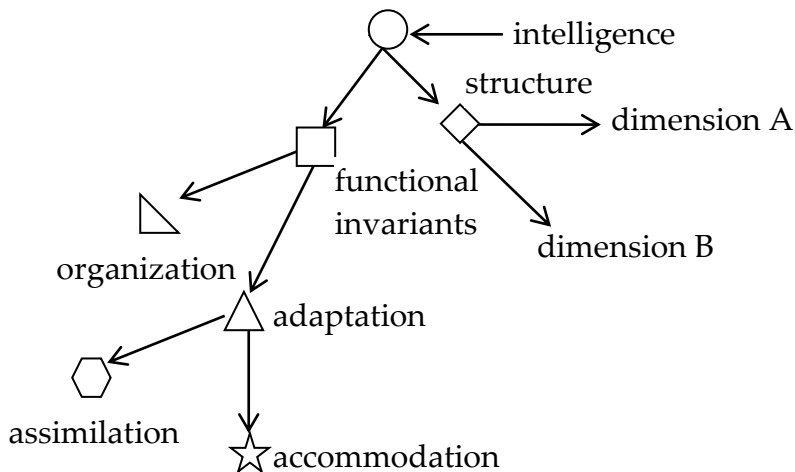


Piaget's Formal Operational Stage (11 years – 18-25 years).

According to Piaget (1972), the final and the highest stage is reached at about the age of eleven (at the onset of adolescence) and this stage is called the formal operational stage. His concept of formal operation refers to a mental process or the development of form or structure of thinking, e.g. complex logical reasoning that can take place entirely 'in the head'. He does not necessarily need concrete images to understand things and situations. At this stage, the individual can do abstract reasoning and draw logical conclusions. The fact that he abstracts makes it possible for him to do higher and more intricate functions and can also use concepts. For the first time, he invents systems of beliefs, he can speculate, idealise, make intense arguments about his own opinion, theorise about the world and events. He can hypothesise and generalise. Children between eleven and thirteen years are likely to engage in trial and error behaviour in solving problems. After this, they fully operate abstractly. At this stage formal thoughts he has acquired have begun to act on concrete operations to produce new structures, which are transformed. Piaget considers the development of formal thoughts or operations having principles or causal influence on the development of adolescent personality. To him structural transformation which occurs at this period is like a centre from which radiates various



changes with age. It can be seen as changes, which come with age in the way people reason, imagine, solve problems, and think. These changes occur in the cognitive structure symbolically shown below



### ***Cognitive structure (An Aspect of Intelligence)***

Structure has two dimensions – A logic and B social or affective in nature.

***Dimension A*** - logic mainly cognitive in nature – ability to reason beyond the immediate present. This dimension reveals the two cognitive skills earlier mentioned in formal operations eg. thinking about his future, his decisions for it etc.

***Dimension B*** – is of social (affective) interpersonal relationship of the individual e.g. attitude, discussion of important issues like politics;

bothering about what is happening at local and international levels.

From the above symbolic sketch, it is seen that intelligence has two dimensions (a) structures (b) functional invariants:

- (a) *Structures*: these are the organised aspects of the individual, which change with age. It is also viewed as organised aspect of intellectual activities, which change with age. Because they are organised, they are stable, coherent and therefore form a unit. Piaget conceptualised intelligence as occurring in stages, which correspond with qualitative changes of structures. It is therefore the structures that define the stages of Piaget's theory of intellectual development. These structures are not just there, they emerge in the course of development. This means that people do not inherit these structures. They develop with environmental experiences. One of the problems of the structures is the understanding of the structural changes. In structure, there are two dimensions of transformation—dimension A and dimension B. earlier discussed.
- (b) *Functional Invariants*: these are inherited and they remain the same throughout life. People share these processes in common. They are therefore not different from one person to another. The problem people have with functional invariants is understanding the

processes. These processes are subdivided into adaptation and organisation:

- i. Adaptation, according to Piaget is accord of thought with reality, that is, the response people make with the outside environment or when people re-establish equilibrium with the environment. So adaptation can be regarded as the action of equilibrium between assimilation and accommodation. It should therefore be seen as an equilibrium or balance between assimilation and accommodation. Thus intelligence is seen as a mental adaptation to new situations. One's degree of adaptation to one's environment is a measure of one's intelligence.

How does one adapt? This is done through two processes – assimilation and accommodation. When a person encounters a new situation and reacts to it as he has reacted to a similar situation in the past, the person is said to have assimilated that situation. It is regarded as the interpretation of a stimulus. When the person comes to adjust to such new situations or when he comes to terms with such new situations, he is said to have accommodated them.

Suppose we compare assimilation and accommodation with food which we eat. Assimilation occurs when the food is taken in by

the body or is assimilated in such a way that the food is not vomited. But when the food is used by the body in such a way that it helps to keep the body healthy, then this is accommodation. It is the past experiences or associations that help to determine assimilation and accommodation processes. For instance, when something happens to a person, a fly for instance, perches on him and he just looks at it and gives it its name and does not respond by killing it, then this is assimilation. But the moment he kills the fly as a result of experience or association, then that is accommodation. Assimilation involves the incorporation of new events into pre-existing cognitive structures. Accommodation means that existing structures change to accommodate new information. These two processes, assimilation-accommodation, enable the child to form schema. Equilibration involves the person striking a balance between himself and the environment, between assimilation and accommodation. For Piaget, equilibration is the major factor in explaining why some children advance more quickly in the development of logical intelligence than do others (Lavatelli: 1973)

In a new situation, the individual brings his past associations to bear on the new stimulus and he tries as much as possible to solve the problem. Immediately he gives the problem a name, then this is assimilation. This becomes part of the person's knowledge. What use does he want to make of the new situations? How does one adjust



to them? The process of adjustment is accommodation. By imitating what adults do, an individual has assimilated. When he starts reacting to these actions of adults to make them part of his repertoire of experience, he has accommodated.

- ii. Organisation, this is accord of thought with itself. How does thought accord with itself? This can be done when an individual relates one activity to the one in mind, so that it can reach a state of equilibrium or harmony. This means that organisation is state of the mind to relate one activity with the other so that these activities can be properly located within the mind, and that no confusion arises in the mastery of experience. The interaction of the structures and the functional invariants combine to affect the intelligence of an individual.

A dramatic shift in thinking from concrete to abstract gives adolescents a whole new set of mental tools. They are now able to analyze situations logically in terms of cause and effect. They can appreciate hypothetical situations. This gives them the ability to think about the future, evaluate alternatives, and set personal goals. They can engage in introspection and mature decision-making. As a result of their growing cognitive abilities, most developing adolescents will:



actions/behaviour, violations or character of responsible beings, ethical consideration

**Morality** – Stands for standards of human behaviour determined subjectively or objectively and based on what is considered ethically right or wrong.

### **Moral Development**

From pre-adolescent years, the individual develops the concept of what is wrong and what is right. Conformity is a must in order to be accepted by his peers. During adolescence he has achieved some values and mores in the areas of personal and social obligations and privileges in the context of those of others. At this period, he internalizes the orientation he has acquired and develops his own moral principles and values, to guide him. The value and cultures of the adolescent differ from those of the authority. They value justice.

### **Emotional Development**

People express various emotions in the form of alarm, despair, joy, pity, grief, fear, anger, love, hatred, sadness, happiness etc. This shows that emotion can be expressed either in a negative or positive sense. Emotion occurs when people are satisfied with or frustrated in the achievement of a need, desire, etc.

At this period, according to Nwachukwu (1995) the adolescent expresses love to another of the opposite sex. They now learn to transfer love



adolescent will approach this exploration in his or her own unique way.

Adolescents must also develop relationship skills that allow them to get along well with others and to make friends. The specific skills that they need to master as part of their emotional development include:

- Recognizing and managing emotions.
- Developing empathy.
- Learning to resolve conflict constructively.
- Developing a cooperative spirit.

The course of emotional development will be unique for each adolescent. Yet some tendencies are seen in specific groups of adolescents.

- **Gender Differences**

Boys and girls face different challenges in our culture and may have different emotional needs during adolescence. Girls tend to have lower self-esteem than boys (Bolognini, Plancherel, Bettschart & Halfon, 1996).

Some girls may need help learning to express anger and to be more assertive. In contrast, boys may need to learn to be more cooperative and that it's okay to express emotions other than anger (Pollack & Shuster),

- **Cultural Differences**

For many adolescents, this may be the first time they consciously recognize their ethnic identity. Ethnic identity includes the shared values, traditions and practices of a cultural group.

Feeling positive about one's ethnic identity is important to the self-esteem of an adolescent. This can be a difficult challenge for adolescents from minority cultures in the United States, given that they are often faced with negative stereotypes about their culture.

### **Values**

Value is the relative status of thing or person or the estimate on which it/he is held, its/his usefulness or importance. It is to consider of worth, or importance, to rate high, to esteem.

Whatever values that the growing child is meant to accept, he accepts without questioning but for a time. At adolescence and in quest for identity, the young person (adolescent) is squarely faced with the task of developing his own values which are to be personal to him. During this period he has to accomplish two tasks, he has to consolidate his pattern of self control more towards new values, the values he can call his own. There are reasons why the adolescent must achieve his own values.

- With increasing independence, he is no longer willing to accept values as given by

parents and significant others since reasons preferred for the values may no longer be accepted or swallowed just like that.

- As a result of his achievement of autonomy, there are bound to be friction areas bordering around attitudes and values. But sometimes as a result of search for independence, autonomy is delayed, the achievement of personal values is delayed since he is not financially independent from his parents.
- The third reason is as a result of increased intellectual development and wider experience.

The culture, as mediated by the parents and adults for the most part, conveys a set of values to each of its new members. Many of these values are not fully articulated and seldomly are verbalised by those adults holding them, yet they are conveyed in subtle and pervasive ways to the young persons. Whatever values are conveyed to the young person seems to be accepted without question for a time. In adolescence, however, perhaps as a part of the quest for identity, the young person faces squarely the task of developing a set of personal values. Adolescence is a decisive period for the fate of personal morality. The youngster must accomplish two major tasks- consolidate his pattern of internal controls and move toward new values.

- In the first case, the adolescent must learn to meet and live with heightened impulses. He

must find a balance between desire and constraint which will allow enough to each side.

- In the second case, the youngster must construct an individual moral philosophy, a system of values and moral conduct which, however tacit, is his own in the sense that it is not a simple copy of what he has been told to believe.

With increasing independence from parents, the adolescent can no longer accept ready-made values he has received from them. Reasons and explanations that may have been sufficient at one time are no longer adequate. The adolescent frequently discovers that his parents do not always “tell it like it is”. The adolescent’s careful observation of adults, parents, teachers, community and national leaders, reveals flaws where previously he saw none. The adolescent’s achievement of autonomy involves a certain amount of friction between him and his parents, and some of their frictions centre around attitudes and values. Thus, today’s college student many not be required to make certain decisions that an independent self-supporting 17 year old made 30 years ago. Secondly there appears to be an important sex difference into establishment of inner controls (Douvan and Adelson, 1966) ...“Moral development in girls moves from a rather passive, childlike acceptance of parental authority



to an identification with the point of view of that authority. The “transitional period of defiance seems characteristic of adolescent boys but not of girls. The adolescent’s increased intellectual development accounts also for his concern with values and beliefs. It permits him to deal with such abstractions as ‘truths’, ‘beauty’, ‘immortality’, ‘justice’ and ‘equality’. He develops a sense of perspective.

The adolescent’s intellectual capacity permits him to examine the basis for beliefs and attitudes, his changing status in relation to what adults require that he does. The adolescent’s wider and more diverse experiences, both social and intellectual, also prompt him to examine his own set of values. Exposure to values and beliefs different from, and at times in contradiction with those he has learned at home cause the adolescent to make comparisons, contrasts and evaluative judgment interactions and discussions with peers from different racial, religious and social class background and these frequently stimulate the kinds of researching questions to which adults have no answers. G. Stanley-Hall (1882) and his colleagues (e.g. Starbuck, 1889) believe that religious conversion was an almost necessary part of adolescence. This belief was supported by an examination of the records of itinerant evangelists, which showed a high frequency of adolescent conversions.

Rokeach (1968) has described a value system as a hierarchically arranged set of values in order

of importance. Consciously or otherwise, each individual establishes priorities in terms of those behaviours, attitudes and goals that are of importance and of significance to him. Racial attitudes are learned. The primary basis for this learning is the home. The prejudices of the parents reflect the particular ethnic, social-class and geographical group with which the adolescent identifies. Later, conformity to prevailing peer group attitudes influences specific attitudes held by the adolescent. While no sharp changes in racial attitudes are apparent throughout adolescence, there is evidence for some increase during adolescence in stereotyped thinking with regard to racial and religious groups (McNeil, 1960). That such attitudes remain relatively stable during this age period suggests that they are well established by late childhood or early adolescence.

Several implications for education can be drawn from the above discussion. Schools must attempt to provide the kinds of experiences for each child that will give him a feeling of self-worth and of self-acceptance, so that projection of blame and of negative characteristics will not be necessary. Secondly, schools can stimulate the kind of careful thinking that dispels irrational prejudice and restrictive stereotypes. Needless to say, the example set by the teacher is of great importance.

## **Behavioural Development**

All of the developmental changes that adolescents experience prepare them to experiment with new behaviours. This experimentation results in risk-taking, which is a normal part of adolescent development (Dryfoos, 1998, Hamburg, 1997; Roth & Brooks-Gunn, 2000). Engaging in risk-taking behaviour helps adolescents to:

- Shape their identities
- Try out their new decision-making skills.
- Develop realistic assessments of themselves
- Gain peer acceptance and respect, (Pronton, 1997; Jessor, 1991).

Unfortunately, some of the risks that adolescents pursue may pose a real threat to their health and well-being. These include motor vehicle accidents, pregnancy, alcohol and drug abuse, and cigarette smoking. Adolescents need guidance to channel the drive toward risk-taking behaviour into less dangerous and more constructive pursuits.

First, adults who work with adolescents must be able to talk with them about the process of decision-making regarding sex, drugs, alcohol and other safety concerns. The goal is to help the adolescent weigh the dangers and benefits of a particular situation, consider his or her own strengths and weaknesses that may affect decision-making, and then make the best decisions possible (Ponton, 1997).

Second, adults must be aware of positive pathways that teens might take to satisfy the need



## **CHAPTER FOUR**

### **ADOLESCENTS' CONCERNS PROBLEMS AND CHALLENGES**

#### **Conflict Areas Between Adolescents and Adults**

These are crucial areas where adults (parents) and adolescents have sharp disagreements. Somewhere along the line, some of the conflict areas may be resolved. These conflict areas include:

1. Censoring of youth culture
2. Dating
3. Use of dad's car
4. Self fulfilling prophesy
5. Conformity among the youth concerning their culture
6. Secrecy of adolescent culture
7. Over-indulgence
8. Making choices for them
9. Situation/type of home
10. Biological birth value
11. Rapid social change
12. Alienation and anomie
13. Conflict of status
14. Competition and conflict of authority
15. Accommodation – no one is to be treated with partiality (Maduka, 1982)

How do parents in Nigeria view the above conflict areas? Even though the conflict areas are

observed to be the situation in America, the experience in Nigeria shows that most of the conflict areas are applicable. They happen here too. The problem involved is that neither the adolescent nor the adult is ready most times to study the situation and see the need to understand and adjust.

### **Concerns of Adolescents**

#### **(a) Drug Abuse and Addiction**

Drug has a very ancient origin and is composed of any substance used in the composition of medicines when used under medical directive or prescription, it has healing power to the consumer, but when any drug is abused, it has the potency to change the psychic state of the abuser.

Abuse of drugs occurs when drugs are taken without the doctors prescription or when they are taken in excess. All kinds of drugs can be abused. These include the drugs prescribed by the doctor for the sick to get cured e.g. pain relieving drugs, malaria drugs, antibiotics. The sale and consumption of these hard drugs have formed part of the problem of adolescents. The effect of the abuse of these drugs can be noticed in their thought process, in the physical, emotional and social life of drug abusing adolescents.

Drug abuse constitutes a major public health, hazard and social disorganization, example, rampages, riot, demonstration and poor academic performance of students. It is noted that

indulging in drugs leads to termination of studies, accidents, child abuse crime, armed robbery and this sometimes makes an adolescent act in bizarre manner.

Drug addiction occurs when someone has a compulsive need for drugs and consistently seeks them out despite negative results. Without a doubt, drug addition will have a negative effect on the abuser his loved one's relationships, social life, work and health. These negative consequences include severe emotional pain which often cause the individual to delve deeper into his or her addiction, thus furthering the dangerous and devastating cycle of drug addiction.

Excessive use of these drugs damages the brain and liver and may eventually lead to death of the victim. Addiction be noted breeds criminality.

Psychological dependence on drugs causes boredom and depression. The drug according to Boraffka (1986) may have used originally in order to feel high for instance among university students.

It has been observed that those addicts (students) who indulge in secrete cults used hard drugs also. These drugs help to motivate them to engage in nefarious activities like raping, armed robbery, etc.

Major drugs currently in use include stimulants (methamphetamine), inhalants, cannabinoids, depressants, opioids and morphine derivatives, anabolic steroids, hallucinogens and prescription drugs.

Addiction is not something he can just drop at any time. The treatment is something to be taken seriously, slowly and systematically so that the adolescent can be led to recovery.

Whether his addiction started out as a way to impress his friends or feel more comfortable at a party, or if drugs are used as a way of coping with his past trauma and stressful experiences, psychotherapy and counselling can help him not only to his physical problems, but his entire body and spirit.

**(b) Riot**

A riot is a form of civil disorder characterized by disorganized groups lashing out in a sudden and intense rash of violence, vandalism or other crime. While individuals may attempt to lead or control a riot, riots are typically chaotic and exhibit herd behaviour.

Riots often occur in reaction to a perceived grievance or out of dissent. Historically, riots have occurred due to poor working or living conditions, government oppression, taxation or conflicts between races or religions.

Riots typically involve vandalism and the destruction of private and public property. The specific property to be targeted varies depending on the cause of the riot and the inclinations of those involved. Targets can include shops, cars, restaurants, state-owned institutions, and religious buildings. Students can be involved in these types of riot



## **Types of Riots**

### ***Hooliganism***

Hooliganism refers to unruly and destructive behaviour associated with sports fans, particularly supporters of professional football and university sports. Some sports rioters have become semi-professionals, travelling to the sites of likely riots.

### ***Police Riot***

A “police riot” is a term for the alleged wrongful, disproportionate, unlawful and illegitimate use of force by a group of police against a group of civilians. A police riot commonly describes a situation where police attack a group of peaceful civilians and/or provoke previously peaceful civilians into violence.

### ***Race Riot***

Race riot is a term describing a riot in which race or ethnicity is a key factor. This happens in countries where racial discrimination is practiced.

### ***Student Riot***

Student riots are riots precipitated by students, often in higher education, such as university. Student riots in the US, Western Europe and Nigeria in the 1960s and the 1970s were often political in nature, although student riots can occur as a result of peaceful demonstration oppressed by the authorities and after sporting events. Student may constitute an

active political force in a given country, and student riots may occur in the context of wider political or social grievances. The aftermath of student riot includes arson, murder, damaged or burnt cars, disruption of academic activities etc.

### ***Urban Riots***

Urban riots are those riots identified as taking place in the context of urban conditions associated with urban decay, such as discrimination, poverty, high unemployment, poor schools, poor healthcare, housing inadequacy and police brutality and bias. Urban riots are closely associated with race riots and police riots. In India, for instance, caste riots have tended to be limited to rural theatres while religious riots centred around urban agglomerations.

### ***Religious Riots***

Religious riots occur as a result of religious problems. They involve members of various religious groups especially where there are multi-religious denominations. In Nigeria, this happens especially in parts of Nigeria where there are various factions of Moslem and Christian denominations.

### ***Police Response***

Riots are typically dealt with by the police riot control, although methods differ from country to country. Tactics and weapons used can include attack dogs, water cannons, plastic bullets, rubber

bullets, pepper spray, flexible baton rounds, and snatch squads.

Rioters often make use of various tactics to counter the police, including gas masks (to protect against chemical weapons), projectiles such as rocks, bottles, firecrackers to scare away attack dogs, and the removal of police weapons (e.g. batons, shields). Rioting, particularly in economically-disadvantaged areas, is often accompanied by looting.

### **c. Robbery**

Robbery is the crime of seizing property through violence or intimidation. More precisely, at common law, robbery was defined as taking the property of another, with the intent to permanently deprive the person of that property, by means of force or fear; the precise definition of robbery varies between jurisdictions.

Common issues in differentiating robbery from simple theft is the degree of force required and when the force is applied. For example, in a purse grab the thief takes a purse off his victim's shoulder. The victim might not have noticed. Whether this is an example of robbery or theft is not clear. What if, in pulling the purse, the victim is pulled to the ground, but still does not have time to offer resistance? Or if the purse strap is cut by the thief with a knife? The answers to these questions will vary from jurisdiction to jurisdiction.

The element of force differentiates robbery from embezzlement, larceny, and other types of



in any case, depends on the influence of the society and the peer group.

At puberty, the gonadotropic hormone from the pituitary gland begins to excite the sexual organs to action. Psychologists believe that sexual development in adolescence is rooted in the biological development of the individual while sexual behaviour depends largely on societal constrictions and the level of cultural permissiveness determining the modes of sexual gratification and the forms of approved sexual appetites. Thus, while biological determinants may have strong influence on individuals' sexual behaviour, the agents of socialization consisting of the family, peers, religious institutions and even the mass media, have powerful repressive effects on sexual behaviour.

Sexual behaviour emanates from physiological drive to seek for pleasure and the release of tension but it is also an expression of social motive leading most often to permanent relationship. (Hilgard et al, 1971). The unlimited access of adolescents to phenographic films and love novels seem to excite their appetites for sex. Boys are more easily stimulated than girls. The development of heterosexual interest during adolescence is natural and the development of a satisfactory sexual relationship is a significant milestone in the emotional life of the adolescents. However, unwholesome or deviant sexual activity could have very harmful effects on the entire personality of the individual even for life. A

discussion on deviant sexual activity during adolescence is therefore considered apt in this chapter.

The arousal of sex feelings is a common feature in the daily life of the adolescent especially after pubescence, due to congestion of blood which produces erection in boys and seductive behaviours in girls. In the cultural African society, the sex play could be in form of the boy bullying the girl, twisting her arm, snatching her scarf, or sometimes pinching her breast while the girl delights in 'screaming', giggling, pretentious cursing, hitting the boy on the back and attempting to run away. These are culturally accepted forms of sexual behaviours amongst unmarried youths. However, contemporary youths have been implicated in some forms of deviant sexual activities. These are masturbation, homosexuality and promiscuity.

### **Masturbation in Adolescence**

Grinder (1972), describes masturbation as "the genital stimulation and gratification of oneself". It is quite common among most adolescent boys and majority of female adolescents. There is an argument that frequent masturbation may lead to impotence and other destructive effects on the body and mind of the adolescent. Some however suggest that masturbation facilitates mental health and social adjustment.

Much as masturbation may guarantee safety from the unwanted consequences of indulgence in sexual intercourse, it is a deviant behaviour and so other ways of letting off sexual steam at this period should be adopted. These including taking part in sports, games, meeting and discussing with friends, doing some charity work, taking part in debating, music, social service and the activities of school clubs and religious organizations, scouting and girl guide etc.

### **Homosexuality in Adolescence**

A homosexual is a male person who seeks for sexual gratification from a partner of the same sex. Homosexual behaviour in adolescence may be considered as a transitory phenomenon in the young persons' march to emotional maturity. There is also a belief that some homosexual activity may be induced by situations in which adolescents have no access to members of the opposite sex. However, it becomes a deviant behaviour when the adolescent is obsessed by it and continuously indulge in homosexual activity.

Development of heterosexual interest during adolescence is natural and normal, therefore, any form of homosexual behaviour is frowned at by the society. The homosexual attracts social stigma and sanctions. The female homosexual (a lesbian) may exhibit passive interest in sexual relations which will affect her marriage, or she may assume masculine roles and become a sex invert.

Adolescents should be assisted to develop socially acceptable sexual behaviour.

### **Promiscuity in Adolescence**

Sexual perversion or promiscuity is the worst form of deviant sexual behaviour during adolescence. Jersild (1970), noted that promiscuity can arise as part of adjustment towards resolving anxiety generated by conflicts. Consequences of promiscuity could be grave and overwhelming for the adolescent and the implications could remain with the victims for life like predisposing the adolescents to infections of venereal diseases.

Anyakoha (1991), provides five adverse effects of undisciplined sexual indulgence on the female adolescents. They include loss of self-respect especially in the eyes of her home community, contraction of venereal diseases, the scourge of unwanted pregnancy, the malady of uncontrolled prostitution and the difficulty to adjust to sexual fidelity in marriage.

### **Sex Education for Adolescents**

Sex education is providing information or knowledge on sexual behaviour to people. This provision of knowledge will enable them make informed and responsible decisions about sexual behaviours at all stages of their lives. Ideally sex education should begin at birth and has training for marriage and mature living as a goal. Unfortunately most parents do not discuss



sexuality openly to the hearing of their children. If at all it is discussed, the information is so scanty and does not give the adolescents enough knowledge of physical, social, mental, emotional and psychological phase of human sexuality.

In sex education the adolescent is supposed to be provided with knowledge of the functions of different parts of the body especially the genital organs and their place in sexuality. They are also to be provided with information on the changes that take place in them beginning from puberty. The adolescent should be aware of the reasons for expressing certain sentiments and emotions towards the opposite sex - he is moving gradually from same sex relationship to heterosexual relationship. This is part of what prepares them for friendship and eventually choice of marriage partner.

Sexuality concerns the feelings and activities connected with a person's sexual desires. Adolescence is the period when gonadal hormones are produced. This rapid inflow of hormones produce sexual changes in the adolescents. These hormonal changes affect the body chemistry of the adolescents which at the same time produce sexual feelings, desires and the quest to experiment with sex. Most adolescents experiment with sex before they reach the age of 16 years. Some first timers begin even at the age of 12 years. Adolescents can have sex without any emotional feelings for the partner. They can have sex because

other peers are doing so, or because of monetary gains.

Human brain reaches its full development at about the age of 25 years. The adolescents therefore are not in a position to understand the full imports or consequences of their sexual behaviours since at the age of 17 years for instance, the brain cannot do enough logical thinking, or take logical decisions or arrive at logical conclusions. The illogical sexuality of the adolescent may land him into teenage pregnancy, contraction of sexually transmitted diseases (STDs) or venereal diseases (VDs) like gonorrhoea, syphilis, herpes human immune deficiency virus/acquired immune deficiency syndrome. HIV/AIDS

Sex education has to begin early in life so that the adolescent must have had enough knowledge about how to conduct their sexual behaviours in a healthy way.

Functions served by sexual behaviour. Sexual activity, and its many manifestations, serves as variety of purposes and meets a variety of needs for the adolescent. In line with their expressed concern for the feelings of others, the adolescents surveyed were opposed to using sex to exploit or manipulate others.

Sex education implies instruction about sex and related issues such as the sexual organs and their functions, the reproduction process, equality between sexes, hygiene during menstruation,

nocturnal emissions and the dangers of unwholesome sexual activities.

Shertzer and Stone have rightly observed that "sex is a powerful force" and its true meaning has to be revealed to adolescents to enable them make rational decisions based on self-control and personal codes of conduct. They have also noted that "teenagers seem to know enough to get into bed but not enough to stay out of trouble". Therefore, sex education is desired to replace ignorance, fear, secrecy and guilt with knowledge, understanding, openness and rationality.

Grinder (1972) maintains that contemporary adolescents in secondary schools have access to formal sex education but indirectly in their biology, home economics and social studies lessons. They also acquire substantial knowledge about sex and love-making from literature books, novels and films. It would therefore be naïve for adults to object to institutional sex education for adolescents in schools.

There is now a general disposition that adolescents need prescribed sex education to help make the hard decisions on whether to indulge in pre-marital sex or not. The questions bothering parents and educational policy-makers seem to revolve on what amount of sex information should be taught; who should do the teaching and how should it be delivered to the adolescents so as to ultimately influence the moral standards of the young persons in a civilized society.

Those who are opported to be handlers of sex education should exercise self-restraint in the amount of information dished out to adolescents. Sufficient details about the structure and functions of the sex organs, pregnancy and its traumatic experiences, marriage and parenthood should be exposed to the adolescents.

### **Sexually Transmitted Diseases (STDs)**

These are contagious diseases contracted through sexual intercourse or any of the intimate sexual contacts with one infected partner. Among STDs, which include gonorrhoea, syphilis, herpes genitalis (HG) human papillomavirus, Chlamydia, HIV/AIDs is the most dangerous.

a. AIDS is a preventable, manageable and non-contagious disease with no proven cure for now, caused by an obligate, immunophilic parasite commonly known as Human Immunodeficiency Virus (a retrovirus).

HIV infection occurs when a healthy person embraces risk behaviour (deliberately or in deliberately) that is, get in contact with bodily fluids, (blood & blood products, seminal/vaginal secretions and breast milk) which exposes him/her to HIV. The virus on entry will gradually and progressively destroy the person's natural defence/immune system against disease and infection by attaching to the T4-cels of the immune system, destroying cells by taking over the cell

replication machinery, and reprogramming it for its own multiplication.

As the HIV continues to multiply, a time will come when the person's body is no longer able to defend itself and other viruses, bacteria and parasites take advantage of this 'opportunity' to further weaken the body and cause various illnesses such as pneumonia, TB and oral thrush. This is why the infections and cancers seen in HIV-infected individuals are called 'opportunistic' and the accompanying signs and symptoms are commonly referred to as syndrome. At this time, the person is said to have AIDS.

A person who has AIDS therefore dies as a result of the opportunistic infections (OIs) and the time it takes from HIV infection to AIDS depends on the general health and nutritional status before and during the time of HIV infection.

b. Gonorrhoea is a STD which may produce discharge from the vagina that comes and goes. This sometimes makes the sufferer unaware of it. In men gonorrhoea causes burning and pain while passing urine and yellow discharge of pus from 2-7 days after infection.

c. Syphilis is another sexually transmitted disease which in both men and women causes a painless sore over the genitals. However in women it can occur inside the vagina and may go unnoticed. These ulcers usually appear 2-4 weeks after intercourse.



is younger, usually has fresh ideas about life and living, and follows modern trends in fashion, music, make up and more often than not exhibits some bizarre youthful exuberances. The parents are so many years older than their adolescent child. Because of this generation gap, ideas and actions of the adolescent are often opposed to those held by their parents. The adolescent looks on any opinion or idea or suggestion or advice given to him by his parents as archaic, old fashioned, outdated and he thinks that they should be consigned to the national archives. Since the adolescent has the notion that their parents are no longer current in so many things, they rarely uphold any of their corrections, advice or suggestions as worthwhile. The gap breeds frictions, sometimes very serious frictions that may result in deviant behaviour by the adolescent and the parents may develop high blood pressure. Sometime some adolescents understand and they try to manage the situation so that there will be mutual understand between parents and their adolescents.

2. Both father and son have to make some adjustment in the sexual sphere even though they may express different sentiments about it or have different expectations. Both of them may not see sex and sexuality (sexual behaviour) in the same sense. There are new trends in sexual matters which the father may not be aware of or understand or accept. At the same time any advice or admonition given to the son by the father





## **Examination Malpractice**

Education is a function of human persons who articulate policies and laws guiding education system in Nigeria. The aims and the objectives of these policymakers have been to improve the quality and quantity of educational experiences over the years. They have tried and are still trying (at federal, State and Local government levels) to achieve their aims and objectives which aim at qualitative and functional education for all Nigeria recipients. However the quality of effort they make and the level of sincerity and commitment exhibited by these policy makers will be left for educational evaluators to find out.

One of the greatest problems facing the adolescent as of today is examination malpractice. It is not necessarily a new phenomenon because even in the 1950s and 1960s some students have been caught copying from some one's answer script or giraffing or asking for answers from another student. It was far and between then and never posed a threat to the adolescent and to the education system at the time. The perpetrators were few and they exercised a great deal of fear and caution in that act.

Examination malpractice began to take an entirely new dimension at the end of the civil war in 1970. Today it has gone 'nuclear' and 'commercial'. Some unemployed and even employed individuals earn their living through examination malpractice. It has taken many and varied forms and shapes.

(a) Migration: Very few SSII students complete their SS III in their schools. They have invented 'migration' to a more remote inaccessible schools whose principals are ready to 'co-operate'. They migrate to the schools, register as old students for WAEC and NECO, pay heavy amount of money including gratification fee. During examinations, supervisors and invigilators are compensated so that the students will have the opportunity to do anything in the examination hall. Law enforcement officers or WAEC officials rarely go to such schools because of distance and deplorable road conditions.

- b. Mercenary process – where contract is given to somebody to
- i. write the examination in the hall
  - ii. to give question paper to the contractor outside to write for submission by the student at the end of the examination
  - iii. carrying of 'mgbo' 'bullet', 'omo kilikili' (write ups) by the students
- writing on the laps, handkerchiefs, palms, etc.
  - tying possible answers to a string held by the students to whom a sign will be given when the solutions are ready, to draw the strings and collect the answers;
  - the use of mobile phones, computers, direct leakage of questions in WAEC, NECO or principal's offices.

Other techniques include giraffing into another's answer script, asking questions, direct copying from another student through arrangement for a certain amount of money; 'ECOWAS' arrangement by co-operating student's, academic alliance between an intelligent male student and a dull female student etc. These forms of examination malpractice are also perpetrated in our tertiary institutions.

#### Consequences on the adolescent

1. poor self image as perceived by the culprits
2. objective anxiety for the act objectively took place
3. the adolescent is always reminded of his bad behaviour by his conscience
4. others may look down on him
5. his result may be regarded as fake by others
6. may have problem going far in academics unless he continues with examination malpractice
7. he may not be proud of his own certificate(s)
8. he may be caught and sent on detention

#### **Possible solutions**

The following may serve as solution

1. enacting and strictly enforcing laws against examination malpractice e.g. migration, sale of question papers etc
2. enlightenment campaign on the need for hand word







between early and late males are still discernible in adulthood, but are reversed in at least some areas. Differences are far less marked in the case of girls, and vary between traits and between studies. Only slight differences may be discerned in early adulthood between early-and late-maturing females.

### **Anorexia Nervosa Concerning Parents**

Anorexia Nervosa is a strange illness. It usually occurs more in teenage girls than boys or adult women and men. It is strange because people with anorexia are obsessed with being thin. They lose a lot of weight and are terrified of gaining weight. They believe they are fat even though they are very thin. Anorexia nervosa isn't just a problem with food or weight. It also attempts to use food and weight to deal with emotional problems.

There is a difference between anorexia and bulimia. People with anorexia nervosa starve themselves, avoid high calorie foods and exercise constantly. People with bulimia eat huge amounts of food, but they throw up soon after eating, or take laxatives or diuretics (water pills) to keep from gaining weight. People with bulimia don't usually lose as much weight as people with anorexia.

The reason some people get anorexia is not known. People with anorexia may believe they would be happier and more successful if they were thin. They want everything in their lives to be perfect. People who have this disorder are usually

good students. They are involved in many school and community activities. They blame themselves if they do not get perfect grades, or if other things in life are not perfect.

The most important thing that family and friends can do to help a person with anorexia is to love them. People with anorexia feel safe, secure and comfortable with their disorder. Their biggest fear is gaining weight, and gaining weight is seen as loss of control. They may deny they have a problem. People with anorexia nervosa will beg and lie to avoid eating and gaining weight, which is like giving up the illness. Rapid physical growth and development in adolescence constitute the unique background for development of eating disorder at this stage of life. Self esteem problems intensify in many normal young women in the process of doubling their body weight, increasing the percentage of body fat, gaining about 4 centimetre in heights, developing breasts and acquiring other features of the mature female body, as well as experiencing menarche. Given that this development occurs within a 6-8 year period, the rapidity of change contributes to the difficulty of the task of acceptance.

The intensity of physical growth and development also accounts for the vulnerability of any adolescent to long-term consequences if they experience semi-starvation.

Teenagers with severe eating disorders fail in varying degrees to accomplish other psychosocial developmental tasks of adolescence. The most









a challenging climate for the young person and for those trying to help the youngster manage the difficulties associated with leaving childhood for a new stage of life. Counsellors implement various practical strategies to help middle school students move toward self understanding. These strategies include such activities as maintaining daily journals, group counselling, and developmental classroom programmes that offer young people opportunities for self exploration.

## **2. *The Challenges of Family Relationships***

As young people begin to seek their own identities, they face the challenge of leaving behind much of their early dependence on home and family. Parents and family members, however, should continue to provide structure and support during the difficult moments adolescents face in growing away from complement dependence on home. The so-called traditional family, however, has virtually disappeared. Divorced, single-parent homes, and step-families, counsellors need to be prepared to help youngsters and their parents understand one another and to work together in making the difficult choices that occur during adolescence.

## **3. *The Challenges of Peer Pressure and Drug Abuse***

Early adolescence is a time of experimentation with new behaviours and of reliance on peers for guidance and direction. This

combination can have devastating effects on young people's lives if it results in experimentation with alcohol and other drugs. Young people who begin to use alcohol and other mind altering substances during their middle school years may be especially prone to the problem of addiction later in adolescence and into adulthood (Welte & Barnes, 1985).

Most middle schools are not prepared to offer adequate prevention programmes to help youngsters challenge the social pressure to experiment with drugs. In fact, the current status of drug education in schools throughout the United States is ambiguous at best. Theory-based prevention programs that have been tested offer hope that drug abuse prevention programs will improve.

Assertiveness training programmes, for example, that are designed to help adolescents resist peer pressure, seem to offer middle school counsellors intriguing ideas for programme development. In addition, cognitive-development programmes that are intended to raise the psychological maturity of youngsters and improve their decision-making offer considerable hope for counseling programmes during adolescence.

Counsellors must understand the relationship between peer pressure and substance abuse and develop counselling strategies that are designed to help young adolescents deal with the pressures to use drugs.

### **The Challenges of Stressful Lives**

Students in schools that is the adolescents frequently complain about the stress they experience in their everyday lives (Elkind, 1990). Typical adolescent complaints include “Everyone is watching me to make mistakes” and “I never have any time for myself”. Adults sometimes have a tendency to discount what adolescents say, believing that most of the stress youngsters experience will pass as maturation occurs. Lack of empathy on the part of adults may leave adolescents feeling misunderstood and alienated.

School counsellors must implement programmes that help young adolescents deal with many stressful circumstances. Desensitization programs that help in overcoming undue fears and relaxation programs that attempt to relieve stress may help young adolescents develop confidence and hope for the future.

### **The Challenge of Sexual Maturation**

Physical maturation, and particularly sexual maturation, has significant effects on self concept and social relationships during the middle school years. Most young adolescents dwell on how to make themselves more attractive and acceptable to their peers. One of the many difficult challenges for middle school counsellors is to attend to the concerns of adolescents about physical maturation and sexuality.

Much has been written about adolescent sexuality, in particular, about topics such as friendship, sexual identity, and adolescent pregnancy. Middle school counsellors must implement programmes that take into account the impact of physical and sexual maturation on students' lives.

Counsellors should especially work to prepare adolescents to meet the challenging issues surrounding contraception and teen pregnancy (Smith, Nenny, & McGill, 1986).

### **The Challenge of Academics**

The society is becoming increasingly aware of the need for schools to promote academic excellence. Individuals in the business community and elsewhere complain that young people do not have the basic academic skills necessary for economic success in a competitive world. Governmental and private commissions have noted the high dropout rate in schools and the generally poor record of public schools in promoting academic excellence. Councillors can contribute to schools' efforts at improving academic achievement among young teenagers (Gerler, Drew, & Mohr, 1990). These days middle schoolers often have considerable freedom. Many are latchkey children who may choose what to do when they arrive home from a day at school. more often than not they choose leisure, neglecting their academic responsibilities. Middle school counsellors should

collaborate with teachers to implement programs that help youngsters develop a reasonable “work ethic”.

They can play an important role in helping young people see themselves as capable students who have the potential to realise academic success. Counsellors should take the lead in transforming low achieving and disruptive adolescents into model students.

### **The Challenge of Career Exploration**

In the search for identity, young adolescents struggle not only with the question of “Who am I?” but also with the question “Who will I become?” The latter question is often answered in terms of future occupation. Adolescents face an ever-changing world of work, a fact that is often neglected by overburdened middle school counsellors, who have many opportunities to promote career development and career exploration among young people.

It is especially important for young adolescents to learn the skills that will eventually help them achieve gainful employment. These skills include how to write a resume, how to fill out a job application, and how to interview effectively for a job. Middle school counsellors must be especially attentive to the special needs of exceptional students in the area of career exploration.





## CHAPTER FIVE

### EDUCATION OF ADOLESCENTS WITH SPECIAL NEEDS

Let us look into the meaning of the concepts which have been used to describe various areas of special needs.

**Impairment** – this is any deviation from the normal which results from any defective function, structure, organization or development in any part of the body. An impairment becomes a liability when it prevents the individual from functioning in a particular situation.

**Handicap** – this is the disadvantage imposed on the individual as he functions in his own environment. For instance, if a young girl has partial sightedness, this is an impairment. But if this partial sightedness is corrected by the use of glasses, she is not handicapped. But if the impairment cannot be corrected, then the person is handicapped. This means that there is an obstacle placed in or around that individual that makes him not to perform certain tasks.

**Disability** – in this situation there is something wrong with the individual physiologically. The individual is not able-bodied and so not physically able and fit to perform normal locomotive function that an able bodied young person can perform.

**Exceptionality** is designated to individuals children or adolescents of school age who have

educational or behavioural characteristics manifested either as significant learning asset or liability (disability). These individuals are either gifted or mentally retarded. They are therefore exceptional positively or negatively. A very intelligent adolescent is exceptional positively and a mentally retarded adolescent is exceptional negatively.

**Categories** of children and adolescents with Special Needs

These include children who have:-

1. Visual impairment
2. Hearing impairment
3. Learning disability
4. Behaviour disorder
5. Physical challenge
6. Giftedness (Highly talented)
7. Mental retardation

Adolescents who are found in any of the categories above have the right to education in Nigeria. The 1999 Nigerian constitution stipulates this very clearly. So the home and the government have the obligation to make provision for them to have access to school and be provided with relevant facilities for them to get educated. This is one of the rights that cannot be denied any child whose level of needs is within educable range. We now look at these areas of need one by one.

1. **Visual Impairment:** This has two aspects
  - (a) the partially sighted

(b) the totally blind. The partially sighted are those whose sense of sight is not completely lost. They can read and see with aids. The blind are those in whom the sense of sight is completely lost. They cannot see at all. They are not found in normal schools but in special education centres. Those who are partially sighted can be helped by the teacher in the following ways.

- providing them seats in front where they can see the chalkboard clearly.
- teacher has to write prints, and also provide large print materials.
- providing optical low-vision devices
- referrals can be done when necessary.

**2. Hearing Impairment:** Like visual impairment, hearing impairment has two dimensions

(a) the hard of hearing (these are partially deaf). The deaf do not hear at all no matter the degree of amplification. The deaf have been defined as those in whom the sense of hearing is non-functioning for the ordinary purpose of life even when amplification is used. The partially deaf are those in whom the sense of hearing is not completely lost; they can hear with or without amplification. The deaf has other sub-groups depending on the time of the onset of deafness

i. the deafened are those who are probably born with normal hearing but either lost it pre-lingually (before one



these tendencies. Teachers should advise and help students that are hard of hearing for better academic, social and emotional well being

- help them to function as independently as possible
- provide the learner with all the details of what is to be learnt in written form – notes, diagrams, models

**Physically disabled adolescents:** These are adolescent with physical disabilities and health impairments. Physical disability is defined as a condition that interferes with the individual's ability to use his/her body. It may be caused by malformation or abnormality of body parts or by ill- health conditions that result in restrictions of normal movement. This condition may result from accidents, birth trauma from environment or birth defects. Health impairment on the other hand is a condition that involves the internal organs and the blood which requires on going medical care. In physical handicap, movement or locomotion is difficult or non existent without wheelchair.

How to help physically handicapped students

- the teacher should advise the school authority to create pathways which are easier to use by students on wheelchair
- provide ramps with slopes at building entrances

- provide wide doors for easy passage of wheelchair
- classroom spaces between rows should be wide enough to allow for passage of wheel chair
- they should never, never be placed at the back of the class.
- Encourage learners to accept their body with no feeling of inferiority or shame.

Mental retardation of sub-average intelligence functioning which originates during developmental period and is associated with in maladaptive behaviour. It is a chronic condition. The lowest level that can be trained in a normal school is the mental retardation of 50-70.

The teacher can do the following inorder to help students with mental retardation.

- graduate their academic work from simple to complex and the plan should not be in complicated form
- use of drills and repetition for retention in the memory of learnt materials.
- make the learners rehearse if they do not understand.
- teach from known to the unknown and start every operation with very simple tasks
- arrange learning tasks into smaller groups and make sure that the steps are taught one at a time

- learners that have mental retardation should be given more than sufficient time to perform
- motivate and reinforce whenever responses made are positive even when the task is simple
- use of individualized academic programmes for them
- provide continuous and immediate feedback
- the home and school environment should be enriched.

**Learning Disability:** This is a disorder of imperfection to listen to think, to use language or to work out mathematical problems, to do spelling or dictation. Studies have shown that between 15-20 or 15-30 percent learners have learning disability and this is quite significant. Most of those who have learning disability are of average or above average, intelligence quotient and they are classified into mid, sever or profound. They are not easily detected in schools or in the class. Nomination and identification are very necessary and can be done through

- spelling/dictation – focusing attention on the child through constant spelling/writing and constant supervision of what the person has written
- helping him in building up his vocabulary
- propping the student as he reads or to perform mathematical function











- considering the use of behaviour modification as an intervention approach
- appealing to the adolescent's good nature implying there is still some innate goodness in him that can serve as a tool for helping him
- showing love, respect and making him understand that he still has self worth
- use of juvenile court in case the delinquent is caught and handed over to the police. After the determination of his case, he can be sent to
  - approved school for the delinquent
  - borstal home where he can be working and schooling under expert supervision
  - remand home where he is kept and cared for until he becomes normal
  - opening up youth custody
  - making use of 'fit' persons who are those persons that are psychologically balanced and who are experts in handling delinquent individuals and who have facilities to take on the task
  - referring them to psychotherapists for clinical consultations
  - providing guidance and counseling services in schools
  - giving strokes of cain, sever beating, expulsion from school, sending to jail or prison are negative in nature even though they are use to motivate adolescents to



## CHAPTER SIX

### **THEORIES FOR COUNSELLING THE ADOLESCENT**

#### **Psychoanalytic View point**

Psychoanalytic theory holds a great promise as a tool of guide in the hand of a counsellor in his bid to understand his client's feelings and problems. The experiences elicited by the counsellor's client can be interpreted through the knowledge of this view point. By means of the construct of id, ego and super-ego and their relative functions in personality dynamics and behaviour production, the counsellor can easily understand which of his clients is suffering from the excesses of the id system or that of the super ego.

From the knowledge gained on the construct of defence mechanism, the counsellor is in a position to understand different ways a patient can use to distort reality, evade realism, and to deceive himself. This vantage position of the counsellor will put him in the position to predict a way-out.

#### ***Defence Mechanism***

Defence mechanisms or adjustive mechanisms are the means which the ego uses to adjust to the social environment. Ego defence mechanisms as they are also called help the individual to cope with anxiety (which is a state of

uncomfortable tension which an individual is forced to reduce) and defend the wounded ego. This anxiety develops out of a conflict between the id, ego, and the superego over the control of available psychic energy. It warns the ego of an impending danger and appropriate action must be taken immediately otherwise the ego may be overthrown. When the ego cannot control the anxiety in a rational manner, it then looks for other unreliable means known as ego defence mechanisms. When defence mechanisms dominate individuals, they set up obstacles that do not allow for rational solution of problems. On the other hand, sometimes they aid people to do satisfactory adjustment as they learn more realistic ways of problem solving. When the mechanisms are no longer needed they are allowed to fade as people eventually learn how to face their problems realistically and rationally. The defence mechanisms as postulated by Freud are as follows:

*Repression* means that we push dangerous or unpleasant thoughts, experiences or impulses out of the conscious into the unconscious. It is also seen as an unconscious stifling of thoughts, wishes, memories or ideas that may be threatening or damaging to the ego or that are in general likely to produce anxiety. If the need to deny the thoughts, experiences or impulses is mild, people simply suppress them, that is, they are taken out of the conscious into the pre-conscious where they remain just below the threshold of awareness. The threshold of awareness is the boundary between



the conscious and the unconscious. *Repression* is therefore the conscious act of trying to forget something unpleasant.

*Compensation* is covering up ones weaknesses by emphasizing some desirable traits or making up for inadequacies in one area while manifesting seriously the other area. This shows when an individual replaces one means of expressing a motive by some other less direct means. But in this case one is replacing it with one more desired by society. Examples include, if an individual cannot achieve a task in one way, he may want to achieve it in another way. The white people and their love of dogs – shifting of their love from man to animal and this is valid in their culture. People excel in sports sometimes because they cannot make up academically.

*Identification*: You see people identifying with somebody who excel in one thing or another – children identify with teachers or prominent people like Chike Obi, Shehu Shagari, Zik or people in some other ways admired by the society. In order to come to terms with his personality he assumes the personality of the person he identifies with. This is an unconscious back-tracking either in memory or behaviour. At times children identify with parents, with their siblings. In identification there is admiration and they want to identify with the person they admire. In identification, people will acquire such mannerisms and experiences that will contribute to their total personality development.

*Regression:* occurs when an individual uses behaviour more characteristic of an earlier age. For example; crying – an adult is not expected to cry. Regression involves a less mature behaviour or responses mainly at a lower level.

*Sublimation* occurs when an original desire is not fulfilled. Sublimation is the redirection of ones activities into similar activities. This is very much like compensation. For instance, students who want to be doctors and fail may sublimate their enthusiasm by other paramedical fields; nursing or physiotherapy, etc.

*Projection:* when there is a tendency to project ones faults or wishes into others. You have a fault and may deny yourself that fault and assume it is another person who has it. In this case personality is trying to come to terms with itself by projecting an individual's faults to other people, that is, seeing his faults in other people and so assumes it is those people that are responsible for the ills of the society.

*Rationalisation:* This is called sour grape syndrome. It is a mechanism of finding false or half-truth explanation for behaviour. It enables a person to shift the responsibility of his failure to other people. It begins very early in life. For instance, a child who fails an examination may shift the reason for his failure on the teacher's inability to teach well, or that the teacher hates him.





whenever he succeeds. The entire efforts to change illogical thinking to logical one must be gradual bearing in mind that it is easy to destroy but difficult to build.

### **Behavioural Counselling View Point**

In any counselling process, a warm, encouraging and empathic relationship is very necessary for any meaningful work to be embarked upon. For effective behavioural counselling to take place certain procedure should be followed and they include:

1. The counselor does everything within his reach so as to find out the reason for wanting help. He encourages the client to talk while he shows signs that he is following. He smiles and nods and shows signs of being very interested in what the client is saying. He shows emphatic understanding. In defining the problems, the counsellor should be of great help to the client. He should lead him to define the problem in a specific behavioural terms.
1. After the identification of the problem, the counselor helps his client to translate the problems into counseling goals which must be expressed in specific behavioural terms.

The three criteria which the goals must satisfy and they are:

- (i) The goal must be a goal desired by the client



In all counseling endeavour, it is very necessary that the counsellor and the counsellee should be relaxed. The muscular tension in the body should be eliminated as a way of reducing anxiety. It is necessary to note that in a football match, a player that is not relaxed, that is tensed up in most cases if given the opportunity to take a penalty kick will shoot out of target. The same thing applies in a counseling situation. The client may not be in the position to relate his problems properly so as to enable the counsellor know how best to render help. Likewise, the counsellor who is not relaxed may apply a wrong techniques in trying to solve a problem. Relaxation is used mostly in conjunction with systematic desensitization.

### ***Systematic Desensitization***

Systematic desensitization is the breaking down of neurotic anxiety response habit step by step. This is a process of adaptation where the stimulus is presented very weakly and then gradually increased until the student can handle it without anxiety. It must be a gradual affair so as to make the client be familiar with what may have caused 'a fearful situation'. The situation is organized in order of hierarchy with the least anxiety-provoking item coming first and the most intensely anxiety-provoking item coming last. This will help the client to get through the anxiety.

### ***Reinforcement***







needed appropriate condition which will enable the individual to follow the right direction.

There must be unconditional positive regard for your client. Each individual desires to be loved, respected and to experience admiration from others. This need, according to, Rogers is pervasive, persistent and reciprocal.

Another technique used by Rogerians is concreteness. This has to do with being 'specific', obtaining details, getting clarification of facts and feelings. This technique will help the counsellor to understand the counsellee better.

Note that the client-centred counsellor believing that the good in his client will emerge if given a chance, will refrain from prescribing any solution neither will he dish out any decision for his client. His main function is to create a conducive environment for the client to solve his own problem.

### **Suggestions for Regenerating the Image of the Adolescent**

1. To look at the adolescent as a person who is fully engaged in the process of clarifying and developing his identity. They need to be helped in this direction, to explore new ideas, concepts, and changes in order to achieve self actualisation.
2. The adolescent symbolise the human potential actively committed to self realisation. He knows that he has the potentials to shoot to whatever level and





- Dalh, R. (2004)** The Secret of Teen Brain Line. June 17 Vol. 163 #23.
- Douvan E. and Adelson, J (1966)** The Adolescent Experience. New York: Wiley.
- Edelman, G. (2004)** The Secret of Teen Brain. *Time* June 7, Vol. 163 #23.
- Ellis A. (1962)** Reason and Emotion in Psychotherapy. New York: Lyle and Stuart.
- Erikson, E.H. (1963)** *Childhood and Society* (2<sup>nd</sup> Ed) New York: Norton.
- Erikson, E.H. (1968)** *Identity: Youth and Crises*. New York Norton.
- Freud S (1973)** The History of the Psychoanalytic Movement, New York: Collier Book.
- Froke Consulting (2009)** Training of Teacher Educators on the Teaching of Primary Education Studies at Asaba 26<sup>th</sup> – 30<sup>th</sup> January.
- Fyvel (1961) in Allisi, A. (1988)** Concepts of Addesey
- Giedd, Jay (2004)** What Makes Teens Tick. The Secret of Teen Brain. *Time*: June, 7 Vol. 163 # 23.

**Goethals, G.W. (1975)** Adolescence Variation on a Theme in Havihurst and Dreyer: Youth 74<sup>th</sup> Year Book of NSSE. Chicago: University of Chicago Press 46-60.

**Grinder, E.R. (1972)** Adolescence. New York: John Wiley and Sons.

**Hall, G.S. (1892)** The Contents of Children's Mind. *Pedagogical Summary*, 139-273.

**Hall, G.S. (1904)** *Adolescence*. New York: D Appleton.

**Hampson, J.L and Hampson, J.C. (1961)** The Ontogenesis of Sexual Behaviour in Young, W.C. (ED) *Sex and Internal Secretions* Vol. 2 Baltimore: John Hopkins University Press pp 1401-1432.

**Harvighust, R. (1952)** *Developmental Tasks and Education*. New York: Longmans, Green.

**Hillgard, ER Atkinson, R.C. and Atkison, R.L.** Introduction to Psychology, New York: Harcourt Brace Jovonovich Inc.

**Jersild, T.A. (1963)** The Psychology of Adolescent. New York: Mac Millan Pub. Coy.

**John Paul II (1994)** *Crossing the Threshold of Hope* New York: Alfred, A. Knopf.

**Maduka, J.A (1982)** Adolescent Psychology. An Unpublished Lecture Notes. University of Nigeria Nsukka.

**Maslow A.H. (1943)** A Theory of Human Motivation *Psychological Review*. 50, 370-396.

**Maslow, A.H. (1951)** *Motivation and Personality*. 2<sup>nd</sup> Ed. New York: Viking.

**Matsuyama (1973) in Biehler (1981)**

**May, J.B. (1965) Allisi, A (1988)** *Concepts of Adolescence*

**Mead, M. (1961)** *Coming of Age in Samoa* Harmondsworth: Penguin Books.

**Offordile, C. (2000)** The Adolescence: An Exposition. *Journal of Education*. Vol. 2 #1

**Oslon, W.C. (1949)** *Child Development*. Boston: Heath.

**Orji, A.S. and Anakwenze, U. (1998)** *Adolescent Psychology* Bodija – Ibadan: De Eyo Publishers.

**Piaget J. (1972)** Intellectual Evolution from Adolescence to Adulthood. *Human Development*. Vol. 15 pp 1-12.





**Yurgelum – Todd, D (2004)** What Makes Teens Tick. The Secret of Teen Brain. *Time*. June, 7. Col. 163 # 23.