

#### LEIGH HOUSE ADOLESCENT UNIT

'Riding the Storm of Adolescence'

## Understanding Adolescent Development through VdT MoCA



#### Aim of the Session

To explore how theories of normal adolescent development relate to the Model of Creative Ability Levels.



#### **Task**

- What do you remember about your adolescence?
- How would you describe it?

What were the things that influenced you (good and bad)?





#### MoCA tells us.....

- Human development is sequential
- Steps cannot be omitted
- Individual's have an innate drive to encounter and master
- Growth occurs when individuals are challenged



## Development is influenced by:

- Physical and psychological capacity
- Learned skills
- Life experiences
- Resources
- Opportunities



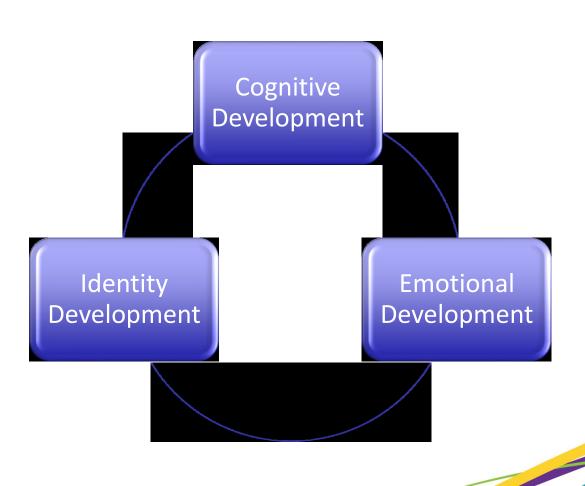
# Assessment within Adolescent Mental Health

- Task Assessment
- History:
  - Age and developmental stage
  - Level prior to onset of illness
  - Life experiences
  - Resources and opportunities





#### Normal Adolescent Development





### **Cognitive Development**

- Area of brain that seeks pleasure and reward is well developed
- Prefrontal cortex is maturing responsible for organizing, making judgments, controlling impulses
- Connections between different parts of the brain are increasing
- Impact of hormonal changes



#### **Piagetian Cognitive Development**

STAGE	AGE	DESCRIPTION
Sensorimotor	0 – 2	Understand the world in terms of sensory information.
Pre-operational	2 – 6	Can classify things into groups. Infer what others are thinking: theory of mind.
Concrete operational	6 – 12	Can use logic. Less egocentric. Tends to view things as 'black or white'
Formal operational	12 +	Most sophisticated stage of thinking and mainly governed by formal logic



## Formal Operational (12yrs +)

- Use logic and develop hypotheses to solve abstract problems
- Generate all possibilities from a specific situation
- Approach a problem in a systematic fashion
- Consider contrary to fact information
- Use combinatory logic



## **Cognitive Development & MoCA**

- Early Teens = Self-Presentation/Passive
  - Basic skills but still requiring support
- Mid Teens = Passive
  - Ability erratic/poor generalisation of skills
  - Awareness of a range of factors
  - Identify problems but initiative poor
- Late Teens = Imitative
  - Good organisational/work skills
  - Good judgment of situations
  - Aware of other's shortcomings



#### **Cognitive Development- Case Example**

- TD, Psychosis, low average cognitive ability, attends special school
- **€** Self pres
- **②**Aims:



## Identity

- ⇒3 primary components (Harter, 83)
  - Self-evaluation –judging self against others
  - Self-regulation ability to persist in goals
  - Self-knowledge knowledge about own strengths and weaknesses



## **Identity Development**

#### **Erikson (1969)**

- Adolescence "identity v role confusion"
  - **♦**Who am I?
  - Where do I belong?
  - ♦ Where am I going?
  - Anxiety
  - Difficulty making decisions and choosing roles
  - May over-identify with a 'hero' or ideal



## **Identity Development & MoCA**

- Early Teens = Self-Presentation/Passive
  - Dependent on carers
  - Developing likes/dislikes
- Mid Teens = Passive
  - Easily influenced by others
  - Ideals and morals are more evident
  - Self-evaluation is poor
- Late Teens = Imitative
  - Less dependent on carers
  - Some individuality evident
  - Improved self-evaluation



## Case Example

- SS, 17 years old, presenting after suicide attempt, with depression and emerging personality disorder
- Impact of mental health difficulties on Identity development



## **Emotional Development**

- Emotional regulation develops
- Social situations impact on emotional displays
- Increase prevalence of extreme emotions (Cohen, et al. 93).
- Learning emotions through reinforcement, modelling and labelling
- Development of complex emotions



### **Emotional Development & MoCA**

- Early Teens = Self-Presentation/Passive
  - Recognising feelings in others
  - Transient, superficial friendships
  - Occasional displays of aggression
- Mid Teens = Passive
  - Increased emotional repertoire
  - More control
- Late Teens = imitative
  - Manage emotions in a range of situations
  - Mature relationships
  - More complex social skills



## Case Example

- € AH, 12 years old, Anorexia nervosa
- Impact of eating disorder on emotional development:
  - Identification and expression of emotions
  - Difficulty coping with strong emotions



### Tasks of Normal Adolescence (Havighurst 1951)

- Adjusting to physical changes
- Independence from parents
- Personal value system
- Vocational goals
- Socially appropriate behaviour
- Stable peer relationships





# Advantages of Using MoCA within Adolescent Mental Heath

- Detter understanding of normal development in context of MH problems
- Clearer expectations of social norms
- Importance of 'just right challenge'



## **Lunch Club**



#### References

- Brodzinsky, D et al (1986) Lifespan Human Development (3e). Holt, Rinehart & Winston: NewYork.
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- Crouch, R; Alers, V. (2005) Occupational Therapy in Psychiatry and Mental Health (4e). Whurr: London.