

Transitioning from childhood to adolescence



Fact Sheet

Puberty is a time of significant change physically, psychologically and emotionally for young people. It is a process triggered by hormones that has evolved over time to ensure reproductive and parenting success.

Brain and physical changes

The first stage of puberty involves the release of adrenal androgens into the body and begins at around 6-8 years, long before any physical changes are noticeable. The second stage of puberty is triggered by the release of gonadotropin-releasing hormones, which lead to the growth of testes and ovaries, and the production of sex steroids.

During the second stage of puberty, females develop breasts and pubic hair, undergo a growth spurt and start to menstruate. Males start producing testosterone and sperm; they develop hair on their face, chest, armpits and genitals; their voice breaks and they also experience a large growth spurt.

The second stage of puberty usually begins around 10-11 years for girls and 11-13 years for boys; however it is normal for this to vary by up to 5 years. Its onset is influenced by genetics, nutrition and social factors. The pubertal process is usually complete 2-4 years after physical changes begin to occur.

Social and emotional changes

Young people also undergo a number of social and emotional changes during puberty. These are associated with finding their own identity and learning to be an adult. Some social changes can include:

- Thinking about who they are and their place in the world;
- Becoming more independent and seeking more responsibility;
- Looking for new experiences, including those that involve risk-taking;

- Developing their own sense of values and morals; and
- Exploring their sexual identity and forming romantic relationships.

Some emotional changes during this time can include:

- Experiencing strong and intense feelings at times;
- Being more sensitive to the emotions of others;
- Being more self-conscious, in particular about physical appearance; and
- Thinking and acting as if no harm could come to them, i.e. as if they were 'bulletproof.'

Adolescence is changing

Adolescence is different for today's young people in that it lasts much longer than for previous generations. Prior to the early twentieth century, people experienced puberty later in their teenage years. They also became adults sooner by starting a family and beginning employment at a younger age (activities that traditionally mark the transition from adolescence to adulthood). Their adolescence was therefore much shorter.

By the mid-19th century, the age of puberty started to decline (possibly due to better nutrition) before stabilising at the current average in the 1960s. As a result, young people these days undergo puberty earlier than previous generations. The activities that signify the transition from adolescence to adulthood also occur much later. Young people tend to stay in education longer, thereby delaying their entrance to the workforce. They tend to live with their parents until they are older and continue participating in the risky behaviours associated with adolescence, e.g. drinking alcohol to excess and taking drugs. Many young people now also delay parenthood until their thirties.



Puberty and mental health

Puberty is often the time where many emotional and behavioural problems arise, including anxiety and depression, substance misuse and dependence, self-harm and eating disorders. This may be as a result of the physical, social and emotional changes young people undergo during puberty, and/or a response to something happening in their life.

While adolescents are known for their emotional ups and downs, research shows that only 5-15% of young people experience extreme emotional difficulties, become rebellious or have major conflicts with their parents. Therefore it is important not to dismiss a young person experiencing emotional or behavioural difficulties as a 'typical teenager.' It may be that there is something more significant occurring and that young person can benefit from additional support for their mental health and wellbeing.

If children and young people are supported in their wellbeing during this time, they are more likely to go on to experience positive physical and mental health as adults.

Early onset of puberty

Some children begin puberty much earlier than their peers, the cause of which is not yet well understood. However research does show that children who start puberty at an early age are at greater risk of experiencing emotional and behavioural difficulties in adolescence.

It was previously thought that younger children were less equipped to deal with the changes associated with puberty (because of their age and social and emotional skill level) and developed mental health difficulties as a result. While this may still be a factor, when examined more closely it appears that children who begin puberty earlier also tend to experience poorer mental health in early childhood.

It is now hypothesised that, instead of early puberty causing mental health difficulties, both early puberty and mental health difficulties are caused by stress and social and

emotional disadvantages in early childhood. Research is currently being undertaken to examine this relationship more closely.

The role of teachers

There are a number of things teachers can do to support all children undergoing changes related to puberty, especially those who are developing early. Teachers can:

C - Create caring, supportive environments that promote learning and wellbeing

- Model sensitive and respectful behaviour toward diverse cultures and people;
- Encourage inclusion and acceptance of diversity, not only in cultural background or religion, but also in appearance, abilities and interests;
- Provide opportunities to participate in classroom, school or community activities or events to encourage a sense of connection and belonging;
- Provide a secure environment where children and young people feel physically safe; and
- Respond quickly and effectively to stop bullying, racism, stigma or harassment.

H - Help children and young people to develop social skills and learn to manage their emotions

- Develop strong relationships with children by learning about their strengths, interests and what is happening in their lives;
- Help children to develop prosocial values and behaviours, such as empathy, sharing, cooperation and helping other people;



- Give children the language and skills for dealing with strong or challenging feelings, like anger or frustration, in a positive way;
- Build a sense of competency by providing tasks that are seen as interesting, meaningful and achievable by children;
- Give children positive, as well as constructive, feedback; and
- Provide opportunities for children to demonstrate independence, while being available to help them problem-solve if needed.

I - Identify children, young people and families in need of additional support

- Monitor the mental health and wellbeing of all children in your class, particularly those at risk of experiencing mental health difficulties;
- Be aware of the signs of potential mental health difficulties, such as sudden changes in behaviour that last more than a couple of weeks; and
- Ask about children's feelings and experiences, use effective listening skills and positive verbal and non-verbal communication.

L - Link children, young people and families with information and support services

- Depending on the child's age, talk with the young person or their family about what you have observed and why this has concerned you;
- Recommend young people or families make contact with services that can provide them with additional support for their mental health, e.g. the school counsellor or their general practitioner; and

- Follow up with the young person or family a few weeks later to see how things are going, and to talk about how you can best support them or their child at school.

D - Develop broader organisational, school and community strategies to promote wellbeing

- Develop partnerships with parents, support services and professionals, and the community to actively promote and support the mental health needs of children and young people;
- Create policies or procedures relating to mental health and wellbeing, including those promoting positive wellbeing and providing early intervention for children experiencing difficulties; and
- Reflect on teaching practices that influence children's wellbeing and engage in professional development about mental health.

Sources and Links

Mensah, F. & Patton, G. (2013). Growing up too fast: early puberty and mental illness. *The Conversation*. Retrieved Nov 11, 2014, from: theconversation.com

Mundy, L. K., Simmons, J. G., Allen, N. B., Viner, R. M., Bayer, J. K., Olds, T., Williams, J., Olsson, C., Romaniuk, H., Mensah, F., Sawyer, S.M., Degenhardt, L., Alati, R., Wake, M., Jacka, F. & Patton, G. C. (2013). Study protocol: The Childhood to Adolescence Transition Study (CATS). *BMC Pediatrics*, 13(1), 160.

Murdoch Childrens Research Institute. (2013). The truth about CATS [film]. Retrieved Nov 11, 2014, from: www.mcri.edu.au/research/projects/childhood-adolescence-transition-study-cats/information-participants-and-faq



Sources and Links

Patton, G. & Sawyer, S.M. (2014). Healthy youth is key to a healthy life but Australia remains behind. *The Conversation*. Retrieved Nov 11, 2014, from: theconversation.com

Patton, G. C. & Viner, R. (2007). Pubertal transitions in health. *The Lancet*, 369(9567), 1130-1139.

Raising Children Network. (2014). Social and emotional changes in adolescence. Retrieved Nov 11, 2014, from: raisingchildren.net.au

Raising Children Network. (2014). Understanding puberty. Retrieved Nov 11, 2014, from: raisingchildren.net.au

Response Ability at Hunter Institute of Mental Health. (2001). *Risk and resilience: A teacher's guide to mental health*. Canberra, ACT: Australian Government Department of Health and Ageing.

Schonert-Reichl, K., Buote, D., Jaramillo, A., Foulkes, K., Rowcliffe, P., Calbick, J., & Cleathero, J. (2007). Middle childhood inside and out: The psychological and social world of children 9–12. *Rapport conjoint de l'Université de la Colombie-Britannique/United Way of Lower Mainland Report*, 15.