Understanding Adolescent Development Through Current Brain Research

Participant Guide
Learning Objectives

Based on knowledge gained about adolescent development and recent research in adolescent brain development, learners will:

• Apply information about adolescent brain development to typical behaviors exhibited by youth in restricted settings.
• Demonstrate knowledge of physical, social, sexual and cognitive domains of adolescent development through participation in small group activities/exercises.
• Identify appropriate staff behavior responses that provide positive developmental guidance in a restricted setting.
• Analyze case studies to determine developmental issues, facility issues and staff interaction issues that impact decision-making.
• Develop staff interaction strategies that mitigate the effects of trauma in the facility environment.
• Create an individual action plan, grounded in the developmental assets, that includes five behaviors staff can use to help youth become more developmentally competent.

How to Use the Participant Guide

In this Participant Guide for Understanding Adolescent Development through Current Brain Research, you will find materials needed to take notes on presentations and to participate fully in both group and individual activities.

You should keep this Participant Guide after the training session has concluded and use it as a reference and a resource as you return to your work. You may also be asked to discuss the content and the significance of this training with your supervisor and/or other staff members.
Expectations For Today’s Training

Use this space to record your expectations for today’s training.

- What do you hope to accomplish?
- What do you want to get out of the training to do your job more effectively?
Characteristics of Typical Adolescents

You may have kids, you have family members who are teens, and some of you have worked with teens. ALL of you have been teenagers.

What are the characteristics of typical adolescents? Not just kids that get in trouble, but your kids, your neighbors, your relatives. List as many as you can think of:
Note Taking Guide for Video One
Here are some terms from brain research that you may not be familiar with, that you will hear Dr. Erwin use in his talk.

Neurotransmitters and Receptors
Messages (signals) are typically carried between neurons by chemicals called neurotransmitters. The neurotransmitter attaches to a specialized site on the receiving neuron called a receptor. A neurotransmitter and its receptor operate like a “key and lock,” an exquisitely specific mechanism that ensures that each receptor will forward the appropriate message only after interacting with the right kind of neurotransmitter.

Synapse
Synapses are the relays over which neurons communicate with each other and are the basis of the working circuitry of the brain.

Dopamine
During adolescence there is an increase in the activity of the neural circuits using dopamine, a neurotransmitter central in creating our drive for reward. Starting in early adolescence and peaking midway through, this enhanced dopamine release causes adolescents to gravitate toward thrilling experiences and exhilarating sensations.

Amygdala
The amygdala, which is the emotion center of the brain, is immature in adolescents and not fully connected to the frontal lobe. Adolescents, then, may have a more difficult time interpreting their emotions, as well as the emotions of others.
Note Taking Guide for Video One (continued)

**Frontal cortex**
The frontal lobe or frontal cortex, the judgment center or CEO of the brain, allows the individual to contemplate and plan actions, to evaluate consequences of behaviors, to assess risk, and to think strategically. It is also the “inhibition center” of the brain, discouraging the individual from acting impulsively. The frontal lobe ultimately develops connections to many other areas of the brain, so that experiences and emotions are processed through the judgment center. The frontal lobe does not fully mature until approximately 23 – 25 years of age.

**Neurons (Nerve Cells)**
Each nerve cell in the brain sends and receives messages in the form of electrical and chemical signals. Up to 9-10 years of age, a young person’s brain experiences rapid growth of nerve cells, along with increased numbers of connections between nerves (synapses).

**How are dopamine and risk-taking related?**

**At what age does risk-taking behavior peak?**

**Most important concepts learned in this section:**
Phases of Adolescence

For this group activity you will be given a sheet of newsprint on which your group will create a drawing of an adolescent, as they might look during the Phase of Adolescence your group has been assigned. Then you will use Post-It Notes or index cards to write down the characteristics or descriptors that best define this Phase of Adolescence. Follow the instructions given and work with your group to complete the task. Then select a group member to present your assigned stage or phase to the total group.

Use this page to take any notes that you will need for your presentation to the total group.
Descriptors for Phases of Adolescence

- Great variability between individuals
- Puberty completed
- Tremendous growth in height and weights
- Physical growth slows for girls and continues for boys
- Thinking about the meaning of life
- Worries about being normal
- Continued growth of capacity for abstract thought
- Greater capacity for setting goals
- Interest in moral reasoning
- Intense self-involvement
- Adjustments to changing body
- Distancing from parents
- Increased emotional stability
- Drive for independence
- Young women are fully developed
- Puberty begins
- Young men may continue to gain height and weight, muscle mass, body hair
- Ability to think ideas through
- Continued interest in moral reasoning
- Ability to delay gratification
- Examination of inner experiences
- Increased concern for others
- Increased concern for the future
- Firmer sense of identity
- Peer relationships remain important
- Social and cultural traditions regain some importance
- Increased independence and self-reliance
- Development of more serious relationships
- Driven to make friends and greater reliance on them
- Increased influence of peers
- Greater capacity for abstract thought
- Feelings of awkwardness
- Intellectual interests expand and are more important
- Present-oriented thinking: Mostly interested in the present; little thought to the future
- Feelings of love and passion/increasing sexual interest
- Deeper moral thinking
- Sense of identity
- Desire for independence
- More moody
- Testing limits and rules
- Growing sexual interest
Note Taking Guide for Video Two

Here are some terms from brain research that you may not be familiar with and that you will hear Dr. Erwin use in his talk.

Puberty and Sex hormones
Beginning as early as age eight in girls and two years later, on average, in boys—the hypothalamus (part of the brain) signals hormonal change that stimulates the pituitary gland. In turn, the pituitary releases hormones that stimulate the gonads and adrenals. From these glands come a flood of sex hormones—androgens and testosterone in the male, estrogen and progestin in the female—that regulates the growth and function of the sex organs. In the United States, the first sign of puberty occurs on average at age 11 in girls, with menstruation and fertility following about two years later. Boys lag behind by about two years.

Oxytocin
Oxytocin is a powerful hormone. It also acts as a neurotransmitter in the brain. Your brain releases oxytocin to strengthen relationships, in particular with peers, increase feelings of attachment and trust and decreases feelings of stress, fear and pain.

Harry Styles
Note Taking Guide for Video Two (continued)

What is the importance of peer relationships to adolescents?

How are peer relationships related to committing crimes in adolescence?

Most important concepts learned in this section:
Behaviors Related to Sexuality You May Encounter on the Job

“Sexuality is not just genital acts, it is who you are as a man or woman – your values, beliefs, appearance, how you carry yourself, what you believe about the other gender. Sexuality is a function of the total personality and is affected by biological, psychological, sociological, and spiritual variables.”

List as many examples as you can of behaviors that you have encountered on the job that are related to human sexuality. You do not need to focus on negative issues, just think about what you have observed and record it.
Guidelines for Dealing with Sexuality Issues in a Facility

1. Vulgarity

Although delinquent youth may express themselves using vulgar language, administration and staff should make every effort to eliminate such behavior. Regardless of the reason for the youth’s behavior, it should not be permitted in conversations with staff or in loud tones of voice to others. You have an obligation to help youth conform to acceptable standards of behavior so that they can more easily and successfully make the transition back into society. You also have an obligation to maintain professional standards.

You may encounter resistance from some staff members who tolerate such behavior and/or who participate in such behavior themselves. You have a right to object and they have an obligation to support you and/or desist from such behavior in your presence.

2. Supervising Showers

Specific procedures for supervising the showers of youth can differ somewhat from facility to facility. These differences arise because the showering facilities vary (from group showers to private stalls), the age and sophistication of youth differ, and the program on different living unit may necessitate modification in procedures (i.e., in some programs all youth must shower during a given time period; in others, youth can individually shower at almost any time of the day).

However, there are certain general principles, which hold true in any institutional setting:

a) Ask your supervisor to explain the showering procedures before you supervise the process, e.g., where you should stand, how long youth shower, etc.

b) Showers are supervised to assure the physical safety of youth and staff – not to make sure the youth is following good hygiene.

c) When supervising, you are watching and listening for youth’s physical contact, assaultive behavior, horseplay, and sexual and/or combative verbal exchanges.

d) Avoid comments about a youth’s physique. They are always inappropriate and can be dangerous.

e) Sometimes a youth will attempt to hold a conversation with you while he/she is in the nude. Tell him/her to get dressed and talk to you later. Do not act embarrassed.
Fantasies

Youth frequently view men and women in stereotyped roles, developing fantasies about their relationship with you. Youth must be given a clear message that such fantasies are not reality. There are several ways to respond when these fantasies are communicated to you:

a) If he/she talks about wanting to date you, make your negative reaction firm and clear. Note it in the log and/or discuss with your supervisor. If the problem persists, the response must remain firmly negative.

b) Do not, under any circumstances, discuss your personal life with youth who may “test” you with probing questions, particularly when you are new on the unit.

c) Do not permit yourself to listen to explicit sexual fantasies verbalized by youth. If these comments appear to be a form of manipulation, action ranging from verbal reprimand to a behavior report may be necessary. Youth who appear to have an excessive problem in the verbalization of sexual fantasies may require an intensive counseling program. Report this behavior to your supervisor and the youth’s case manager.

3. Touching

Touching is a very human activity, which takes on great significance in an institutional setting. This is one of the most difficult areas in which to provide direction. Only touch youth when you can be certain that it will not be misinterpreted or considered a threat to youth. For these reasons, as a new staff you should be very cautious about touching until you are more familiar with residents and your program norms.

4. Compliments

Sincere compliments (as opposed to sexual remarks and whistles) can be handled one of two ways:

a) Inform the youth that although the sentiment is appreciated, you would rather he/she not make such personal remarks to you.

b) You can smile and say thank you. If you take this option, you must be careful not to give the impression of encouraging such comments or being flattered.

c) You can just say thank you.

5. Masturbation

If it is non-exhibitionary, for example, if you notice a youth masturbating under the covers during a count, it is best to ignore the behavior and move on. If the behavior is
exhibitionary, tell the youth to stop what he is doing. Do not act shocked or embarrassed, and do not ridicule the youth.

6. Sexual Activity
   Sexual activity is against the rules. Talk to your supervisor (before you ever witness such behavior) about your facility’s procedure in handling assaultive, forced and mutually agreed upon sexual encounters. Follow those procedures when an incident occurs.
   NOTE: Some behavior, such as walking with arms linked or around each other’s shoulders, may not indicate a sexual relationship. Do not jump to conclusions.

7. Love Letters
   Male and female staff may receive “love letters.” These may be romantic to sexually explicit in nature. If you do not take positive and immediate steps to stop the youth from sending you such letters, the youth, his/her peers and other staff may think that you welcome the letters and the sentiments contained within. Steps to be taken:
   a) Show the letter to your supervisor and inform him/her that the letter is unwelcome and unsolicited.
   b) If you do not work on the youth’s living unit, inform the supervisor of that unit that you received a “love letter” from the youth.
   c) Inform the youth that you do not wish to receive any more letters from him/her, that such letters are inappropriate and unwelcome, and that disciplinary action will result if it happens again. Be firm in your statements. Do not ridicule or humiliate the youth and discourage other staff who might do so.

8. Other Correspondence With Youth
   When youth are transferred to another institution or are released, they sometimes want to maintain contact with you by mail. Learn your facility’s policy regarding such correspondence. You should also be aware that youth might read more than is written into your letters and fantasize about your relationship.

9. Wolf Whistles and Obscene Remarks
   If you know who did it, call the youth to you, indicate your displeasure (preferably out of earshot of other youth), and warn him/her of future consequences. Do not ignore such behavior. It only escalates. If you do not know who did it, or several persons were involved, there are several techniques, which can sometimes be effective:
a) Ask other staff member if they saw who did it. If they did, talk to that youth about his/her behavior out of the earshot of his/her peers.

b) Turn assertively to the group and ask, “Who said that?” Often the guilty parties will look visibly uncomfortable and/or others in the group will involuntarily turn and stare at the perpetrators. While this is not evidence for disciplinary action, you could talk to the youth individually and go over the rules with the youth.

c) If the group is small (six or less), you could communicate your displeasure to the entire group, review rules, and warn of future consequences.

d) If the group is large, you can talk about the issue with your supervisor and bring the issue up at large group meetings or ask that counselors in small group meetings discuss the issue.

e) When you are from another living unit, it is best to inform the staff on that living unit and have them handle the behavior. You should also inform the supervisor from that unit and document the incident (e.g., in a memo to your supervisor or in the log) so you have proof if it happens again.

Despite your best efforts to be an appropriate role model (through your behavior, dress, etc.), some youth will still act out sexually. In these situations, confront the behavior assertively, document the behavior, and report the behavior to your supervisor and the youth’s supervisor. Do not ignore the behavior, do not act embarrassed, shocked or angry, and do not promise confidentiality or try to deal with a youth’s inappropriate sexual behavior alone.
Guidelines for Answering Sexuality Questions

A. Questions Seeking Information

1. Be honest. If you don’t know the answer, say so. Tell the group you will find the answer and get back to them or provide resources so they can find the answer.

2. Answer questions age-appropriately. Pre and early adolescents need simpler, more concrete answers.

3. Don’t give too much unnecessary information. Try to give simple answers that avoid technical jargon.

4. If you aren’t sure what the young person is really asking, you might ask, “What have you heard about that?” or “Can you tell me what you already know about that?”

B. Value Laden Questions

1. Do not impose your own personal values.

2. Do endorse universal values (e.g., manipulation and abuse are wrong, taking responsibility for your own behavior and choices is good).

3. Discuss the range of values regarding a specific issue.

4. Even when students ask informational questions about value-laden issues, it is appropriate to discuss the value component.

5. Encourage students to discuss values with their parents.

6. If students bring up a value and only discuss one point of view, it is important for you to make sure other points of view are discussed.

C. Personal Questions

1. Do not answer personal questions. You and the juveniles have the right to privacy.

2. Never discuss your personal sexual behavior.
D. “Am I Normal” Questions

1. Try to recognize these questions. Sometimes they are disguised.

2. Discuss the range of normal and individual differences.

3. Use a reassuring and comforting tone.

4. Refer to books or other reference materials for more information.

7. Again, do not impose your own personal values.

E. Other Considerations

1. Be aware of your nonverbal communication. It can communicate distaste or disagreement.

2. It is OK to let students know that a question is a bit embarrassing. Let them know that you need a little time to think about the best way to answer it and that you will get back to them.

3. Allow students to ask questions in their own language. They may use slang that they don’t know the scientific words. If they use slang, make sure that you check out their meaning. When you answer their questions, use the scientific language.

4. Try not to let “shock value” questions shock you. That simply reinforces a student’s desire to embarrass you.

Adapted from Handbook on Adolescent Health, Produced by John Hopkins University in conjunction with Maryland Department of Health and Mental Hygiene and Juvenile Services Agency.
**Brief Scenarios: Addressing Issues**

1. You walk in and overhear a couple of residents talking. One of the guys is saying that he has noticed a sore on his penis. When they notice you they start laughing and change the subject. How do you feel? What do you say? What do you do?

2. A young woman has been in your facility about 3 months. She has a reputation as a troublemaker. She doesn't get along with many people but she relates fairly well to you. Today during your weekly mentoring session she tells you that she thinks she is pregnant. You notice a tear in the corner of her eye, although she appears pretty cool. How do you feel? What do you say? What do you do?

3. A young man in the program loves bragging about his sexual exploits. According to him, he has plenty of sex with both men and women. How do you feel about this? How would you start a conversation about the possible consequences of his behavior, as well as ways that he can protect himself and his partners? What do say? What do you do?

4. You are a youth care worker and in the middle of a group discussion, the subject of homosexuality comes up. One student raises his hand and asks, “Exactly what do two women do together when they have sex?” How do you feel? What do you say? Answer as you would in the discussion. What else would you do?

5. In a group home setting, you are sitting around talking informally with a small group of teens. One of them brings up a news story about AIDS shown on TV last night. After a brief discussion, one says, “I don't have to worry about AIDS. I know that people I mess with are OK. They are real clean.” How do you feel about what he said? What would you say? What do you do?

6. One of the residents that you have a good relationship with is going to be released to the community next week. She is 16 and the two of you have talked about her problems with her stepfather. He has had intercourse with her and she feels nervous about going home. How do you feel? What do you say? What do you do?

7. During a counseling session with a youth you are discussing his upcoming release to the community. In the midst of the conversation, he asks about birth control – what is the best kind? How do you feel? What do you say? What do you do?

8. It is after bedtime for all the youth. As you do your regular room checks you look in on a youth. You see him/her on top of the bed, masturbating. How do you feel? What do you say? What do you do?
Note Taking Guide for Video Three

Here are some terms from brain research that you may not be familiar with, that you will hear Dr. Erwin use in his talk.

Executive function
Executive function refers to a set of mental skills that are coordinated in the frontal lobe. It includes the ability to manage time and attention, switch focus, plan and organize, curb inappropriate speech or behavior and integrate past experience with presentation.

Gray Matter and White Matter
Gray matter is made up of the cell bodies of neurons, the nerve fibers that project from them, and support cells. White matter is a fatty substance called myelin.

Synaptic Pruning
One of the features of the brain's growth in early life is that there is an early blooming of synapses—the connections between brain cells or neurons—followed by pruning as the brain matures. Synapses "exercised" by experience survive and are strengthened, while others are pruned away. This synaptic pruning, as it is called, causes the brain's cortex, the outer layer of gray matter where we do much of our conscious and complicated thinking, to become thinner but more efficient.

Myelination
Through the process of myelination, the axons of neurons become gradually more insulated with a fatty substance called myelin (the brain's white matter), eventually boosting the axons' transmission speed up to a hundred times.
Note Taking Guide for Video Three (continued)

How is the adolescent brain functioning at age 16 different from an adult?

Can facility staff have a significant impact on adolescent brain development?

Most important concepts learned in this section:
Some Ways to Facilitate Positive Development

Use this page to list some of the actions we have discussed in class that provide positive developmental structure for young people.
Staff Behaviors that Facilitate Positive Adolescent Development

Modeling
Demonstrate appropriate interaction with staff of both sexes. BE PATIENT.

Provide corrective experiences such as role-playing skills and new behaviors. Use music for relaxation and reward. Model the behavior you want to see. These corrective experiences activate several areas of the brain including frontal cortex, and create new memories and behavioral options.

Model corrective thinking by correcting false assumptions and reframing negative thinking, thoughts such as “I am bad, stupid, sick, or damaged”. Provide experiences in which youth practice “reading” facial expressions and “social” situations.

Set Realistic Expectations
Apply consequences clearly and consistently. Report behavior accurately, not your subjective perceptions or assumptions about the behavior.

Provide safety and security. Provide an understanding of persistent fear and hyper vigilance. Help the youth develop a state of “attentive calm”. A calm person uses the prefrontal cortex and can engage in abstract thinking but an anxious person uses the limbic system and focuses on non-verbal information and survival.

Explain and demonstrate “hot/cold” cognition. During stressful, emotional, or threatening situations “problem solving” information in the cortex is not easily accessed; youth need to practice cold cognition and concrete ways to access information and skills.

Provide Information and Skills
Discuss a range of values. Refrain from judging. Avoid labeling. Listen for feelings. Recognize positive behaviors. Provide rational, logical structure. Provide a safe, predictable, consistent environment that helps to reduce anxiety.

Help youth see all sides of issues. Provide guidance and room to grow. Be honest and straightforward. Be knowledgeable. Know your limitations. Use simple language. Speak in terms of the known to the unknown. Respect each individual’s privacy.

Give youth information to help youth understand how their brains develop; how brain function impacts behavior; and processes for healthy brain development.
Be aware of your own adolescence and use it to connect with youth. Be genuine. Remember, the juveniles are observing your behavior for cues to appropriate norms. Avoid formalized role behavior to assert authority. Find something positive to begin with. Avoid power struggles. Avoid immediate reactions, don't personalize behavior and stay emotionally neutral. Summarize the positives of the interactions.
Case Study Discussion

Read the Case Study assigned to you and discuss it, answering the following questions.

Based on the information in the case study, what kind of behaviors would you expect from this juvenile?

What are some positive characteristics or behaviors displayed by this juvenile?

How would you describe the primary challenges presented by working with this juvenile in a restricted setting?

Looking back at the information presented earlier about adolescent development, what are three developmental issues that this juvenile may be dealing with?

What are three ways that you as a staff member working with this juvenile can create positive developmental support within the restricted environment? Include both formal and informal ways that you can facilitate positive development.
Positive Youth Development

Notes:
Another important concept in the field of work with adolescents is the perspective of positive youth development. This approach to understanding adolescence emphasizes the possibility of change and the idea that youths are resources to be developed rather than potential problems to be managed. This strengths-based perspective relies on the belief that if youth have mutually beneficial relationships with the people and institutions of their social world, then they will be able to create a life of positive contributions to their families, communities, society, and their own lives. It argues that change occurs most powerfully in the context of mutually influential relationships between an adolescent and his biology, psychology, family, culture, community, environment, and historical context.

This perspective focuses on the Five C’s of PYD: competence, confidence, character, connection, and caring. PYD interventions include positive and sustained adult–youth relationships, activities that promote skill building in youth, and opportunities for adolescents to participate in and lead community-based activities. You can read more about Positive Youth Development in the Desktop Guide and by participating in the PYD training module.
40 Developmental Assets for Adolescents

Search Institute has identified the following building blocks of healthy development—known as Developmental Assets—that help young children grow up healthy, caring, and responsible.

For more information on the assets and the research behind them, see the Developmental Assets research page.

EXTERNAL ASSETS

SUPPORT

1. **Family Support** | Family life provides high levels of love and support.
2. **Positive Family Communication** | Young person and her or his parent(s) communicate positively, and young person is willing to seek advice and counsel from parents.
3. **Other Adult Relationships** | Young person receives support from three or more nonparent adults.
4. **Caring Neighborhood** | Young person experiences caring neighbors.
5. **Caring School Climate** | School provides a caring, encouraging environment.
6. **Parent Involvement in Schooling** | Parent(s) are actively involved in helping the child succeed in school.

EMPOWERMENT

7. **Community Values Youth** | Young person perceives that adults in the community value youth.
8. **Youth as Resources** | Young people are given useful roles in the community.
9. **Service to Others** | Young person serves in the community one hour or more per week.
10. **Safety** | Young person feels safe at home, school, and in the neighborhood.

**BOUNDARIES AND EXPECTATIONS**

11. **Family Boundaries** | Family has clear rules and consequences and monitors the young person’s whereabouts.
12. **School Boundaries** | School provides clear rules and consequences.
13. **Neighborhood Boundaries** | Neighbors take responsibility for monitoring young people’s behavior.
14. **Adult Role Models** | Parent(s) and other adults model positive, responsible behavior.
15. **Positive Peer Influence** | Young person’s best friends model responsible behavior.
16. **High Expectations** | Both parent(s) and teachers encourage the young person to do well.

**CONSTRUCTIVE USE OF TIME**

17. **Creative Activities** | Young person spends three or more hours per week in lessons or practice in music, theater, or other arts.
18. **Youth Programs** | Young person spends three or more hours per week in sports, clubs, or organizations at school and/or in community organizations.
19. **Religious Community** | Young person spends one hour or more per week in activities in a religious institution.
20. **Time at Home** | Young person is out with friends "with nothing special to do" two or fewer nights per week.
INTERNAL ASSETS

COMMITMENT TO LEARNING

21. **Achievement Motivation** | Young person is motivated to do well in school.
22. **School Engagement** | Young person is actively engaged in learning.
23. **Homework** | Young person reports doing at least one hour of homework every school day.
24. **Bonding to School** | Young person cares about her or his school.
25. **Reading for Pleasure** | Young person reads for pleasure three or more hours per week.

POSITIVE VALUES

26. **Caring** | Young Person places high value on helping other people.
27. **Equality and Social Justice** | Young person places high value on promoting equality and reducing hunger and poverty.
28. **Integrity** | Young person acts on convictions and stands up for her or his beliefs.
29. **Honesty** | Young person "tells the truth even when it is not easy."
30. **Responsibility** | Young person accepts and takes personal responsibility.
31. **Restraint** | Young person believes it is important not to be sexually active or to use alcohol or other drugs.

SOCIAL COMPETENCI ES

32. **Planning and Decision Making** | Young person knows how to plan ahead and make choices.
33. **Interpersonal Competence** | Young person has empathy,
sensitivity, and friendship skills.
34. **Cultural Competence** | Young person has knowledge of and comfort with people of different cultural/racial/ethnic backgrounds.
35. **Resistance Skills** | Young person can resist negative peer pressure and dangerous situations.
36. **Peaceful Conflict Resolution** | Young person seeks to resolve conflict nonviolently.

### POSITIVE IDENTITY

37. **Personal Power** | Young person feels he or she has control over "things that happen to me."
38. **Self-Esteem** | Young person reports having a high self-esteem.
39. **Sense of Purpose** | Young person reports that, "my life has a purpose."
40. **Positive View of Personal Future** | Young person is optimistic about her or his personal future.

This list is an educational tool. It is not intended to be nor is it appropriate as a scientific measure of the developmental assets of individuals. Copyright © 1997, 2007 by Search Institute. All rights reserved. This chart may be reproduced for educational, noncommercial use only (with this copyright line). No other use is permitted without prior permission from Search Institute, 615 First Avenue N.E., Suite 125, Minneapolis, MN 55413; 800-888-7828. See Search Institute's Permissions Guidelines and Request Form. The following are registered trademarks of Search Institute: Search Institute®, Developmental Assets® and Healthy Communities • Healthy Youth®.
Five Developmental Assets:
Action Plan for Positive Youth Development

What will you do?

How will you do it?

Who will you get to help you?

When will you start?

What will you do next?
From the Desktop Guide

“It is a vital task of staff in confinement facilities to obtain a deeper understanding of adolescent development. Even typical adolescent behaviors such as pushing limits, taking risks, and exerting independence can be very hard to manage and contain. These behaviors will—and should, for the sake of development—continue in the context of confinement facilities. It is the role of the adults in these facilities to have and maintain the broader perspective, to interpret behavior and shape in a very positive way the youth under their supervision and care.”

Resource List

The following were used as sources of information for this training:

ACT for Youth Center for Excellence. Toolkit: Adolescent Development Overview

http://www.actforyouth.net/health_sexuality/adolescence/toolkit/overview.cfm


http://www.pbs.org/wgbh/pages/frontline/shows/teenbrain/

Quinn, Rick. Adolescent Development Lesson Plan, Juvenile Corrections Careworker Curriculum. CRPD. URL: http://njda.msu.edu


For additional resource information or as a refresher, The Office of Adolescent Health of the US Department of Health and Human Services provides The Adolescent Development E-Learning Module free of charge to the public.