

Module VIII

Childhood and Adolescence

Mental Wellness in Children and Adolescents with Intellectual & Developmental Disabilities

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This module describes issues of typical childhood and adolescence development and details how they are relevant to youth with IDD.

Learning Objectives

- Describe issues around development for persons with IDD
- Describe the stages of typical development for younger children and adolescents
- Describe how disability effects self-image/self-esteem
- Describe the key milestones in sexuality and gender identity development
- Describe the impact of and support around various challenges of maturation

Issues of Development

- **There is a typical pathway or sequence of development in which certain cognitive, social, and emotional things are seen in each stage for typical people.**
- **Functioning and behavior are influenced by stages of development.**
- **Intellectual/developmental disabilities often change development due to difficulties in learning, different patterns of interaction, and lack of typical experiences, but most stages still occur (American Academy of Pediatrics, 2013b).**

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Typical Stages

Approximate ages

- Newborn (ages 0–1 month)
- Infant (ages 1 month – 1 year)
- Toddler (ages 1–3 years)
- Preschooler (ages 4–6years)
- School-aged child (ages 6–13 years)
- Adolescent (ages 13–20)



Characteristics of Typical Younger Children

- **Often significant issues with attachment and attachment disorders**
- **Typical developmental tasks related to delaying gratification, task completion, and development of a sense of identify**
- **Many problems related to impulsiveness and lack of empathy**



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Characteristics of Adolescence

Teen life is complex for all young people

- **Physically mature**
- **Sexually mature**
- **Emotionally mature**
 - **Desire independence**
 - **Sense of identity is built**
 - **Heightened focus on peers**
 - **Sexual awareness**



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Adolescence and Disability

An adolescent with an IDD experiences the same life complexities as other adolescents.

The presence of an IDD or physical disability can make learning and making sense of the world more complex.

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Self-image, Self-esteem

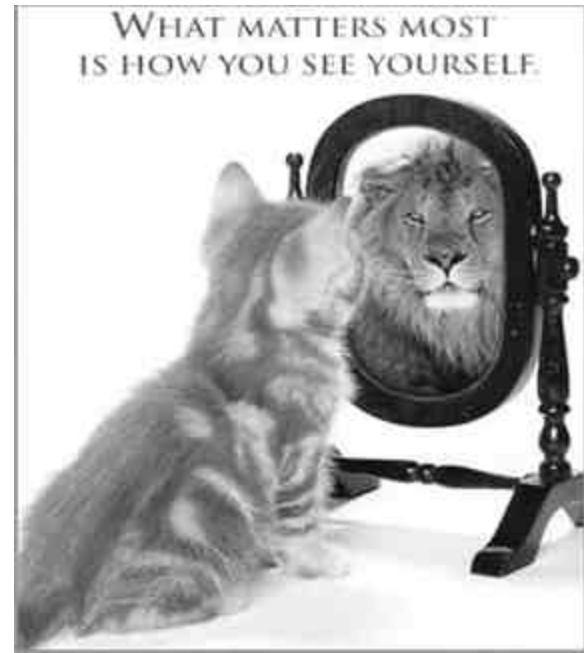
- **Central theme – discovering oneself**
 - **Creating a personality**
 - **Shaping a personal image of oneself (very self-conscious)**
 - **Concerned with outward appearance**
- **Often focus on the ways they fail to meet the ideal**
 - **This often results in low self-esteem and unhappiness**
- **Shapes how they feel that peers look at them**
- **Use what one's peers think to determine their self-image**
- **Try out roles and test these out through social interaction**

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Problems with Self-esteem

Often include:

- **Body image**
- **Weight problems**
- **Shyness**
- **Embarrassment**



And for somebody with IDD, awareness of disability.

Exercise

Please come up with 10 words that describe you; 10 things that make you who you are.

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Risk-taking Behavior

- **All teenagers take risks as a normal part of growing up.**
- **Changes in the teen brain make risk-taking more likely**
 - **Time of great opportunity**
 - **Risks and problems as well**
- **Taking risks is a tool teens use to define and develop their identity**
- **Adolescents need to take risks**
 - **Healthy risk-taking can help prevent unhealthy risk-taking**
 - **Help create opportunities for healthy risks**

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Negative Risk-taking

- **Drinking**
- **Smoking**
- **Unsafe sex**
- **Drug use**
- **Disordered eating**
- **Stealing**
- **Gang activity**
- **Self-mutilation**



Healthy Risk-taking

- **Sports**
- **Developing artistic abilities**
- **Volunteer activities**
- **Travel**
- **Making new friends**
- **Hobbies**
- **Exploring community**



Exercise

- **Identify 2 things you do that are examples of healthy risk taking.**
- **Then think of one negative risk-taking thing you do, but don't write it down or share it.**

Supporting Risk Taking

All such activities contain the possibility of failure.

- **How can we help provide supports that include realistic goals?**
- **What skills do young people need to make good choices about taking risks?**
- **What are some challenges unique to younger individuals?**

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Sexuality

- **Key milestones of adolescent development**
 - **Attaining an adult body**
 - **Capable of reproducing**
 - **Intimate relationships**
 - **Complex emotions**
- **Individuals with disabilities may be hindered in this area of development**
 - **Functional limitations**
 - **Social isolation**
 - **Fewer social activities**
 - **Less likely to have intimate relationships**
 - **Lack of information on parenthood, birth control, and STDs**

Development of Sexuality

- **Children and adolescents with IDD, like all individuals, are sexual persons**
- **Most of their behaviors are “typical”**
- **The problem – often unable to distinguish between behaviors that are publicly and privately appropriate**
- **Attention to medical, functional, and behavioral issues may shift focus away from addressing sexuality**

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Supports

- **Avoid judgment and projection of personal values or discomfort**
- **Ensure the privacy of each child and adolescent**
- **Promote self-care and social independence among persons with disabilities**
- **Advocate for appropriate sexuality education**
- **Help provide knowledge and/or identify a source of information**
- **Lack of attention to issues of sexuality can lead to misinformation and problem behavior**

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Sex Education



Sex Education

- **Provided by someone with special expertise**
- **Children with disabilities have the right to the same education about sexuality as their peers**
- **May need modifications**
 - **Simplifying information**
 - **Using special teaching materials as needed**
 - **Anatomically correct dolls**
 - **Role playing**
 - **Frequently reviewing and reinforcing the material**
 - **IEPs/IHPs should include provision of sexuality education**

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Sex Education

- Remember this is developmental and questions are completely normal
 - Sexual thoughts or actions are not negative risk behaviors
- Parents/youth workers can help adolescents make safe and healthy choices regarding sexual behavior by:
 - Maintaining open lines of communication
 - Ensure access to appropriate information and resources
 - Adolescents with IDD need complete and accurate sex education so they can make informed decisions
- A team process
 - Planned and coordinated by support team
 - Parent input
 - Not just DSP



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Privacy

- **Teach which behaviors are acceptable only do when they are alone**
 - **Provide guidelines about when**
 - **Review expectations**
 - **Guidelines about where**
 - **Ensure the guidelines are followed**
- **Identify and recognize cues in the environment (a closed door)**
- **Social cues for public settings**
- **Create cues for alone time (a sign on the door)**

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Working Together

Empower young people to set limits

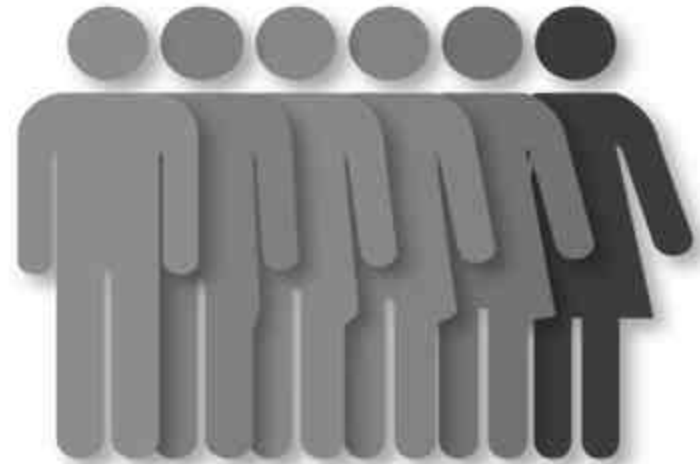
Assist lower-functioning individuals with achieving & maintaining privacy

When supervising or assisting with personal care:

- **Be considerate**
- **Ask permission**
- **Remember they still need privacy**
- **Seek to minimize discomfort**

Gender Identity Issues

- **In addition to physical development of sexual characteristics, exploration of sexual orientation**
 - **Refers to who one is emotionally and physically attracted**
 - **Heterosexuality**
 - **Homosexuality**
 - **Bisexuality**



Gender Identity Issues

Another important task is developing and maintaining intimate relationships

- **Physical**
- **Emotional**

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Peer Pressure

- **Peer pressure is one thing that all teens have in common.**
 - **Need for acceptance, approval, and belonging is vital during the teen years.**
 - **Teens who feel isolated or rejected are more likely to engage in risky behaviors to fit in with a group**
- **During adolescence, begin to spend a lot more time with their friends, and less time with their family**
 - **More susceptible to the influences of their peers**

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Peer Pressure(continued)

- **Pressure isn't always negative**
 - **Pressure into negative behaviors**
 - **Away from positive behaviors**
 - **Positive influences, such as doing well in school, having respect for others and avoiding taking negative risks**
- **Handling peer pressure depends largely on how adolescents feel about themselves**

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Bullying

- **Childhood bullies are more likely to become young adult criminals than are non-bullies. Bullied children may grow up with diminished self-confidence**
- **Physical aggression: hitting, kicking, pushing, choking, punching**
- **Verbal aggression: threatening, taunting, teasing, starting rumors, fostering fear, hate speech.**
- **Exclusion from activities**



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Bullying

- Done by someone with more power or social support to someone with less power or social support
- Often includes the abuser blaming the target for the abuse
- Often leads to the target blaming him or herself for the abuse.
- In most bullying situations, the target cannot stop the bullying by his or her own actions.



Exercise

- **How do you think the way bullying is portrayed in popular tv shows/movies can affect a young person with IDD?**
- **What happened and how did the bullying resolve?**

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Stop Bullying: What Doesn't Work

- 1. Denial: ("She would never do that;" "I'm sure he didn't mean to hurt you;" "Boys are just like that;" "Sticks and stones may break bones, but words will never harm")**
- 2. Telling the victim to solve the problem: ("Just make sure you're never alone with that kid;" " Say no;" "Stand up for yourself and hit back ;" "Wear less revealing clothes;" "Pretend it doesn't bother you")**
- 3. Broad-brush educational efforts alone: ("Soft is the heart of a child;" Sensitivity training; "Hands are for helping, not hurting")**

Stop Bullying – What Works

- **Consistent enforcement of effective consequences which are predictable, inevitable, immediate, and escalating.**
- **Monitoring to make sure that consequences and education are effective.**
- **Effective counseling for youth who bully after enforcement of consequences has generated some anxiety.**

Stop Bullying – What Works

(continued)

- **Effective support for targets, including protection from repeat victimization.**
- **Empowering bystanders to tell adults, support targets, and discourage unacceptable behavior.**

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Gangs

- **Gang violence has spread to communities throughout the world. In the US, these are the statistics:**
 - **More than 24,500 different youth gangs around the country,**
 - **More than 772,500 teens and young adult members**
- **Teens join gangs for a variety of reasons.**
 - **Seeking excitement**
 - **Looking for prestige**
 - **Protection**
 - **Make money**
 - **A sense of belonging**
- **Few teens are forced to join gangs; most can refuse to join without fear of retaliation**

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Steps to Conflict Resolution

- **Set the stage.** Agree to try to work together to find a solution peacefully, and establish ground rules (e.g., no name-calling, yelling, or interrupting).
- **Gather perspectives.** Each person describes his/her perspective. Listeners pay attention to what the others say they want, and why.
- **Find common interests.** Establish points everyone agrees on. Identify common interests, can be as simple as a shared need to save face.
- **Create options.** Brainstorm possible solutions: both people gain something, think win-win!
- **Evaluate options.** Each teen discusses feelings about solutions. Negotiate to reach a conclusion acceptable to both.
- **Create an agreement.** The teens explicitly state their agreement and may even want to write it down.

Adolescent disorders

- **Teens deal with related issues all the time; when it gets out of hand, then it's a disorder**
- **May manifest differently than with adults**
- **Common problems:**
 - **Eating disorders**
 - **Depression**
 - **Substance Abuse**

Eating Disorders

- **Anorexia nervosa:**

Intense fear of becoming obese, does not diminish as weight is lost

Disturbed body image – claims to 'feel fat' even when emaciated

Loss of at least 25 percent of original body weight

Refusal to maintain normal body weight

- **Bulimia –**

Recurrent episodes of binge-eating (rapidly consuming large amounts of food in a short time)

often followed by purging – vomiting or laxatives



Eating Disorders: Causes and Solutions

- **Causes**
 - Adolescent focus on body image
 - Cultural emphasis on appearances
 - Other unmet emotional needs
- **Response**
 - Requires formal treatment
 - May include: lectures, group therapy, assertiveness training, drug therapy, and nutritional counseling
- **Cautions**
 - Avoid arguing, you're not going to talk them out of it
 - Be careful to avoid criticism

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Early Onset of Mental Illness

- **Environmental stress does not cause mental illness, but can trigger onset.**
- **Biological events, chemical imbalance or disturbance requires psychiatric treatment.**
- **Untreatable mental illness places children at the risk of developing severe forms as adults, more reluctant to seek proper treatment.**
- **Poor functioning in school, development, social relationships, family life.**
- **Therapy can support, but is insufficient to treat, many severe illness driven symptoms and behaviors.**
- **Observation is key to Dx: intensity, frequency, impact.**

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Triggers for Emotional Crises

- Onset of illness (medical or mental)
- Birth of sibling
- Onset of puberty/adolescence
- Start or end of school
- Out of home placement
- Sex and dating issues
- Changes in staff & teacher relationships
- Surpassed by younger siblings or peers
- Inappropriate expectations of others
- Physical, sexual, or emotional abuse
- Illness/aging of parents
- Death of parent, caretaker, family member
- Loss of peer or roommate

Exercise

Consider wellness strategies you can use to support a young person with IDD who might experience one of the emotional crises listed on the previous slide. Discuss with the group.

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Child Adolescent Depression

- **Not just bad moods and occasional sadness**
- **Serious problem that impacts every aspect of a teen's life**
- **Requires treatment, can lead to:**
 - **Problems at home and school**
 - **Drug abuse**
 - **Poor adjustment and self-image**
 - **Negative identity**
 - **Homicide, violence, or suicide**

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Depression Signs and Symptoms

- **Sadness or hopelessness**
- **Irritability, anger, or hostility**
- **Tearfulness or frequent crying**
- **Withdrawal from friends and family**
- **Loss of interest in activities**
- **Changes in eating and sleeping habits**
- **Restlessness and agitation**
- **Feelings of worthlessness and guilt**

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Depression Signs and Symptoms

(Continued)

- **Lack of enthusiasm and motivation**
- **Fatigue or lack of energy**
- **Difficulty concentrating**
- **Thoughts of death or suicide**
- **Physical complaints (far more likely in youth than adults)**

Warning Signs, Teen Suicide

- **Talking or joking about committing suicide.**
- **Saying things like, “I’d be better off dead,” or “I wish I could disappear forever.”**
- **Speaking positively about death or romanticizing dying (“If I died, people might love me more”).**
- **Writing stories and poems about death or dying.**

Warning Signs, Teen Suicide (Continued)

- **Engaging in reckless behavior or having a lot of accidents resulting in injury.**
- **Giving away prized possessions.**
- **Saying goodbye to friends and family in dramatic ways.**
- **Seeking out weapons, pills, or other ways to kill themselves.**

Talking Tips for Depressed Teens

- **Offer support**
 - **Let them know you're there for them. Avoid asking lots of questions (teens don't like to feel patronized)**
 - **Make it clear that you're ready and willing to provide whatever support they need**
- **Be gentle but persistent**
 - **Don't give up if they shut you out**
 - **Talking about depression can be very tough for teens**
 - **Be respectful, show you are concerned and willing to listen**

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Talking Tips for Depressed Teens

(Continued)

- **Listen without lecturing**
 - **Resist criticizing or passing judgment; when they talk at least they are communicating**
 - **Avoid offering unsolicited advice**
- **Validate feelings**
 - **Don't try to talk them out of depression**
 - **Acknowledge the pain and sadness they are feeling**
 - **Make them feel like you take their emotions seriously**

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Substance Abuse

- **Experimenting**
 - Teens may try alcohol, cigarettes, inhalants, or other drugs one or more times, but not go any further
 - Usually do not have any problems as a result of substance use
- **Substance abuse**
 - Experimenting leads to regular or frequent use
 - Substance abuse results in problems at home (more arguments), at school (such as failing grades), or with the law
- **Substance dependence (addiction)**
 - Physical and/or psychological dependence
 - Use takes up a significant portion of the teen's activities,
 - Continues despite causing harm, and is difficult to stop.
 - An ongoing, and possibly fatal, disease.

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Health Care

- **Adolescents – facilitate a transition to more active role in healthy behavior, medication management, appointments**
- **Help young people to understand their disability or diagnosis and health concerns**
- **Identify reliable resources for further information**
- **Teach healthy lifestyle skills, promote wellness**
- **Empower them to be more involved in asking questions and making decisions**
- **Provide guidance in knowing how and when to acquire or decline further help and support**

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Community Safety

- **Who/What is dangerous?**
 - **Help identify potential danger & make decisions beforehand about safety and trust**
 - **Build awareness by reviewing everyday dangers often: fire safety, traffic, crime, internet threats, risk-taking behavior**
 - **Build confidence to act safely “in the moment”**
 - **Discuss potentially threatening situations**
 - **Practice or role play appropriate response**
 - **Review who/how to ask for help**

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Safety Tips

- **Teach the person to always let someone know where he/she is going and for how long**
- **Routines**
 - **Many children with IDD depend on routines**
 - **Avoid routines that others can predict to victimize the kids**
- **Talk about safety often**



Potential Victimization

- Appearance of safety doesn't mean there is no threat
- Grooming– *the establishment of trust through repeated interaction to increase access to a potential victim and decrease likelihood of discovery.*
- Awareness
 - Can children recognize they are being “set-up”?
 - Are parents/care providers able to tell when children don't see it?
 - What “Don't Talk to strangers” means

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Internet Safety

- **Keep the computer in a high-traffic area**
- **Establish limits for which online sites children may visit and for how long.**
- **Remember that Internet technology can be mobile, so make sure to monitor cell phones, gaming devices, and laptops.**
- **Surf the Internet with your children and let them show you what they like to do online.**
- **Ask questions about their interests and have them show you what they are searching.**
- **Bookmark/shortcuts to apps and safe websites for immediate access.**
- **Continually dialogue with children about online safety.**

Technology Safety

- **Know who young people are communicating with online.**
- **Note numbers of outgoing/ingoing calls with no contact information.**
- **Open a family/group/house e-mail account to share with younger children.**
- **Brainstorm screen names and e-mail addresses that do not contain information about gender, identity, or location, and avoid being suggestive.**

More Technology Safety

- Teach children never to open e-mails from unknown senders and to use settings to block messages from people they do not know.
- Be aware of other ways children may be going online—with cell phones, laptops, or from friends' homes or the library.
- Remind children that anything they send from their phones can be easily forwarded and shared.
- Familiarize yourself with popular acronyms at sites like www.netlingo.com and www.noslang.com/.

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Social Networking: Benefits

Gain social confidence: more secure in new situations, such as going to college, joining a sports team, and meeting new friends.

Learn about his or her diagnosis and health needs.

Find support in online communities – especially true for kids who have unique interests or feel isolated.

Make friends who are interested in the same thing or may be dealing with similar issues.

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Social Networking: More Benefits

Keeping in touch with family members that live far away by sharing updates, photos, videos, and messages.

Be Creative sharing ideas or poetry, blogging or journaling.

Increasing media literacy and expand vocabulary and communication skills.

Generates topics for discussion in “live” conversations and with peers in school and other offline settings.

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Supporting Young People to Develop Goals

Set realistic expectations – consider:

- Strengths, abilities, and interests**
- Opportunities, resources, and feasibility**

Be careful not to devalue someone's ambitions

Break larger goals into mini-goals or objectives

- See progress quickly**
- Even on a daily basis if needed.**

Establish incentives that are meaningful to the person

Be flexible: use setbacks as building blocks to modify goals or create new dreams (turn disappointment into opportunity)