

## 1. Details of Module and its structure

Module Detail	
Subject Name	Psychology
Course Name	Psychology 01 (Class XI, Semester - 1)
Module Name/Title	Adolescence, Adulthood and Old Age - Part 4
Module Id	key_10404
Pre-requisites	Understanding of various domains of development – biological, cognitive, socio-emotional
Objectives	After going through this lesson, the learners will be able to understand the following: <ul style="list-style-type: none"><li>• Identification of various stages of lifespan development</li><li>• Overview of Piaget’s theory of cognitive development</li><li>• To recognise the characteristics and concerns of development during adolescence, adulthood and old age</li></ul>
Keywords	Formal operational thinking, Hypothetical deductive thinking, Imaginary audience, Personal fable, Identity, Delinquency, Substance abuse, Anorexia Nervosa, Bulimia Nervosa, Adulthood, old age

## 2. Development Team

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### **Cognitive Developmental Changes in Adolescence:**

Adolescents' thought becomes more **abstract, logical, and idealistic**; they become more capable of examining their own thoughts, others' thoughts, and what others are thinking about them. Adolescents' developing ability to reason gives them a new level of cognitive and social awareness. Piaget believed that **formal operational thought** appears between the age of 11 and 15. During this stage adolescent thinking expands beyond actual concrete experiences and they begin to think more in abstract terms and reason about them. A formal operation thinker can make the logical inference that if  $A=B$  and  $B=C$ , then  $A=C$ , without needing to see the concrete elements.

In addition to being abstract, adolescent thought is also idealistic. Adolescents begin to think about ideal characteristics for themselves and others and compare themselves and others with these ideal standards. For example, they may think what an ideal parent is like and compare their parents with these ideal standards. This may at times make adolescents wonder which of the new-found ideal standards they should adopt. In contrast to trial and error approach used by children in earlier stages of development, adolescent thinking becomes more systematic in solving problems — they think of possible courses of action, why something is happening the way it is, and systematically seek solutions. Piaget called this type of logical thinking — **hypothetical deductive reasoning**.

Logical thought also influences the development of moral reasoning. Social rules are not considered as absolute standards and moral thinking shows some flexibility. The adolescent recognises alternative moral courses, explores options, and then decides on a personal moral code. For example, should I smoke as everyone I know does? Is it ethical to copy answers in the examinations? This also lends the possibility of adolescents not following society's norms if

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they conflict with personal code of ethics. For example, individuals at this age might participate in a protest march for a cause rather than adhere/conform to college norm.

Adolescents also develop a special kind of egocentrism. According to David Elkind, **imaginary audience and personal fable** are two components of adolescents' egocentrism. Imaginary audience is adolescent's belief that others are as preoccupied with them as they are about themselves. They imagine that people are always noticing them and are observing each and every behaviour of theirs. Imagine a boy who thinks that all will notice the ink spot on his shirt, or a girl with a pimple feels, all people would think how bad her skin is. It is this imaginary audience, which makes them extremely self-conscious. The personal fable is part of the adolescents' egocentrism that involves their sense of uniqueness.

Adolescents' sense of uniqueness makes them think that no one understands them or their feelings. For example, an adolescent girl thinks that none can sense the hurt that she feels because of being betrayed by a friend. It is quite common to hear the adolescent say to the parents; 'you don't understand me'. To retain their sense of personal uniqueness they may weave stories filled with fantasy around them to create a world that is away from reality. Personal fables are often part of adolescent diaries.

### **Socio-emotional Development**

**Forming an Identity:** You must have sought answers to questions such as : Who am I? Which subjects should I study? Do I believe in God? The answers to all these questions involve the quest to define one's sense of self or the search for **identity**.

*Identity is who you are and what your values, commitments and beliefs are.* The primary task of adolescents is to establish an identity separate from the parents. During adolescence a detachment process enables the individual to develop a personalised set of beliefs that are uniquely her or his own. In the process of achieving an identity the adolescent could experience conflict with parents and within herself or himself. Those adolescents who can cope with the conflicting identities develop a new sense of self. Adolescents who are not able to cope with this identity crisis are confused. This "identity confusion", according to Erikson, can lead to individuals isolating themselves from peers and family; or they may lose their identity in the crowd. Adolescents on one hand, may desire independence but may also be afraid of it and show a great deal of dependence on their parents. Rapid fluctuations between self-confidence and insecurity are typical of this stage. Adolescents may at one time complain of being "treated like a baby" whereas on other occasions they may seek comfort by depending on their parents.

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Seeking an identity involves searching for continuity and sameness in oneself, greater responsibility and trying to get a clear sense of who one is, i.e. an identity.

The formation of identity during adolescence is influenced by several factors. The cultural background, family and societal values, ethnic background, and socioeconomic status all prevail upon the adolescents' search for a place in society.

Family relationships become less important as the adolescent spends more time outside the home and develops a strong need for peer support and acceptance. Increased interactions with peers provide them with opportunities for refining their social skills and trying out different social behaviours. Peers and parents are dual forces having major influences on adolescents. At times conflicting situations with parents lead to increased identification with peers. But generally parents and peers serve complementary functions and fulfil different needs of the adolescents.

Vocational commitment is another factor influencing adolescent identity formation. The question "What are you going to be when you grow up?", requires the ability to think about the future and to be able to set realistic and achievable goals. In some cultures freedom is given to the young people to choose an occupation, whereas in certain other cultures the option of making this choice is not given to the children. Here parents' decision is likely to be accepted by the children. What has been your experience while making a choice in the selection of subjects? Career counselling in schools offers information regarding appraisal of the students for various courses and jobs and provides guidance in making a decision about career choices.

### **SOME MAJOR CONCERNS:**

As adults when we reflect on our adolescent years and recall the conflicts, uncertainties, occasional loneliness, group pressures, we feel it was definitely a vulnerable period. During adolescence peer influence, new gained freedom, unresolved problems may create difficulties for many of you. Conforming to peer pressure can be both positive and negative.

Adolescents are often confronted with decisions regarding smoking, drugs, alcohol, and breaking parental rules, etc. These decisions are taken without much regard to the effect they can have. Adolescents may face periods of uncertainty, loneliness, self-doubt, anxiety, and concern about themselves and their future, they are also likely to experience excitement, joy, and feelings of competence as they overcome the developmental challenges. You will now read about some of the major challenges faced by adolescents like delinquency, substance abuse, and eating disorders.

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## **Delinquency**

Delinquency refers to a variety of behaviours, ranging from socially unacceptable behaviour, legal offences, to criminal acts. Examples include truancy, running away from home, stealing or burglary or acts of vandalism. Adolescents with delinquency and behavioural problems tend to have a negative self-identity, decreased trust, and low level of achievement. Delinquency is often associated with low parental support, inappropriate discipline, and family discord.

Often adolescents from communities characterised by poverty, unemployment, and having feelings of alienation from the middle class perform antisocial acts to gain attention and to be popular with their peers. However, most delinquent children do not remain delinquent forever. Change in their peer group, becoming more aware of their social responsibilities and developing feelings of self-worth, imitating positive behaviour of the role models, breaking negative attitudes, and overcoming poor self-concept help in reduction of delinquent behaviour.

## **Substance Abuse:**

Adolescent years are especially vulnerable to smoking, alcohol and drug abuse. Some adolescents take recourse to smoking and drugs as a way of coping with stress. This can interfere with the development of coping skills and responsible decision making.

The reasons for smoking and drug use could be peer pressure and the adolescents' need to be accepted by the group, or desire to act more like adults, or feel a need to escape the pressure of school work or social activities. The addictive powers of nicotine make it difficult to stop smoking. It has been found that adolescents who are more vulnerable to drugs, alcohol, and nicotine use, are impulsive, aggressive, anxious, depressive, and unpredictable, have low self-esteem, and low expectation for achievement. Peer pressure and the need to be with their peer group make the adolescent either go along with their demands to experiment with drugs, alcohol, and smoking or be ridiculed. Drug use if continued long enough can lead to physiological dependency, i.e. addiction to drugs, alcohol or nicotine may seriously jeopardise the rest of the adolescents' lives. Substance abuse results in significant adverse effects – failure to meet expectations at school, home and social relationships; engaging in risky behaviors; deteriorating health; cognitive inefficiency and economic problems.

Positive relationships with parents, peers, siblings, and adults play an important role in preventing drug abuse. In India, a successful anti-drug programme is the Society for Theatre in Education Programme in New Delhi. It uses street performances to entertain people between 13 to 25 years of age while teaching them how to say no to drugs. The United Nations

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International Drug Control Programme (UNDCP) has chosen the programme as an example to be adopted by other nongovernmental organisations in the region.

### **Eating Disorders**

Adolescents' obsession with self, living in fantasy world and peer comparisons lead to certain conditions where they become obsessed with their own bodies. **Anorexia nervosa** is an eating disorder that involves relentless pursuit of thinness through starvation. An anorexic person will have intense fear of gaining weight coupled with refusal to maintain adequate nutrition, usually associated with a distorted perception of body image. It is quite common to see adolescents eliminate certain foods from their diets or to eat slimming foods only. The media also projects thinness, as the most desirable image and copying such fashionable image of thinness leads to anorexia nervosa. **Bulimia nervosa** is another form of an eating disorder in which the individual follows a binge-and-purge eating pattern. The bulimic goes on an eating binge, then purges by self-induced vomiting or using a laxative at times alternating it with fasting. Anorexia nervosa and bulimia are primarily female disorders more common in urban families.

### **ADULTHOOD**

An adult is generally defined as someone who is responsible, mature, self-supporting, and well integrated into society. There is a variation in developing these attributes, which suggests that there is a shift in timing when an individual becomes an adult or assumes adult roles. Some people take up jobs along with their college studies or may get married and not pursue their studies. Others may continue to live with their parents even after getting married and being financially independent.

The assumption of adult roles is directed by an individual's social context. The best time for some of the most important life events (i.e. marriage, job, having children) might be quite different in different cultures but within a culture there is similarity in the course of adult development.

In early adulthood, two major tasks are, exploring the possibilities for adult living and developing a stable life structure. The twenties represent the novice phase of adult development. Gradually, a transition from dependence to independence should occur. This could be marked by an image of the kind of life the young person wants, especially in terms of marriage and a career.

**Career and Work:** Earning a living, choosing an occupation, and developing a career are important themes for people in their twenties and thirties. Entering work life is a challenging

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event in anyone's life. There are apprehensions regarding different adjustments, proving one's competence, performance, dealing with competition, and coping with expectations both of the employers and oneself. It is also the beginning of new roles and responsibilities. Developing and evaluating a career becomes an important task of adulthood.

**Marriage, Parenthood, and Family:** The adjustments that young adults have to make when entering a marriage relate to knowing the other person if not known earlier, coping with each other's likes, dislikes, tastes, and choices. If both the partners are working, adjustments are required regarding sharing and performing roles and responsibilities at home.

In addition to getting married, becoming a parent can be a difficult and stressful transition in young adults, even though it is usually accompanied by the feeling of love for the baby. How adults experience parenting is affected by different situations such as the number of children in the family, the availability of social support, and the happiness or unhappiness of the married couple.

Death of a spouse or divorce creates a family structure in which a single parent either the mother or the father has to take up the responsibility of the children. In recent times, women are increasingly seeking employment outside the home thus creating another type of family in which both parents work. The stressors when both parents are working are quite the same as of a single working parent, namely, taking care of children, their schoolwork, illness, and coping with workload at home and in the office, etc. Despite the stresses associated with parenting, it provides a unique opportunity for growth and satisfaction and is perceived as a way of establishing concern and guiding the next generation.

**Physical changes** during middle age are caused by maturational changes in the body. Though individuals may vary in the rate at which these changes occur, almost all middle aged people notice gradual deterioration in some aspects of their physical functioning such as decline in vision, sensitivity to glare, hearing loss and changes in physical appearance (e.g., wrinkles, grey hair or thinning of hair, weight gain). Do cognitive abilities change during adulthood? It is believed that some cognitive abilities decline with age while others do not. Decline in memory is more in tasks involving long-term memory than short-term memory. For example, a middle-aged person can remember the telephone number immediately after s/he has heard it but may not remember it so efficiently after a few days. Memory tends to show greater decline, while

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wisdom may improve with age. Remember that individual differences exist in intelligence at every age and as not all children are exceptional, neither do all adults show wisdom.

### **OLD AGE**

Just when “old age” begins, is not easy to determine. Traditionally, the age of retirement was linked to old age. Now that people are living longer, age of retiring from work is changing, and the cut-off point for the definition of “old age” is moving upward. Some of the challenges, which the aged have to cope with include retirement, widowhood, illness, or death in the family. The image of old age is changing in certain ways. Now there are people who have crossed seventy years of age or so and are quite active, energetic, and creative. They are competent and are therefore, valued by society in many walks of life. In particular, we have aged people in politics, literature, business, art and science. The myth of old age as an incapacitating and therefore, frightening phase of life is changing.

Of course, the experience of old age also depends on the socio-economic conditions, availability of health care, attitude of people, expectations of society and the available support system. Work is most important during early adult years, then family becomes most important and beyond that health becomes the most important issue in the person’s life. Clearly, successful ageing for much of our adult life focuses on how effective we are at work, how loving our relationships are in our family, how good our friendships are, how healthy we are, and how cognitively fit we are.

Retirement from active vocational life is quite significant. Some people perceive retirement as a negative change. They consider it as a separation from an important source of satisfaction and self-esteem. Others view it as a shift in life with more time to pursue their own interests. It is seen that older adults who show openness to new experiences, more striving and achievement oriented behaviour prefer to keep busy and are better adjusted.

Older adults also need to adjust to changes in the family structure and new roles (grand parenting) that have to be learnt. Children usually are busy in their careers and families and may set up independent homes. Older adults may depend on their children for financial support and to overcome their loneliness (after children have moved out). This might trigger-off feelings of hopelessness and depression in some people. In old age feeling of loss of energy, and dwindling of health and financial assets, lead to insecurity and dependency. The elderly tend to look towards others to lean on and to care for them. Indian culture favours dependency



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of elderly on their children, for old age needs caring. In fact, parents in most oriental cultures rear their children with the fond hope that they will care for them during old age. It is important to give the elderly a sense of security and belonging, a feeling that people care for them (especially in the time of crisis), and to remember that we all have to grow old one day. Although death is more likely to occur in late adulthood, death can come at any point in development. The deaths, especially of children and younger adults, are often perceived to be more tragic than those of others. In children and younger adults, death is more likely to occur because of accidents but in older adults it is more likely to occur because of chronic disease. The death of a spouse is usually seen as the most difficult loss. Those left behind after the death of their partner suffer deep grief, cope with loneliness, depression, financial loss and are also at risk of many health related problems.

During such times, support from children, grandchildren, and friends can help the individual cope with the loss of spouse.