



FAMILY, FRIENDS AND COVID-19 – IMPACT ON YOUNG PEOPLE’S MENTAL HEALTH AND WELL-BEING

INFORMATION SHEET 1/5

ADOLESCENT DEVELOPMENT / THE ROLE OF FAMILY IN ADOLESCENT DEVELOPMENT

“Many of the problems currently facing young people have been in the making for the past two decades, without adequate recognition or response. The pace of change affecting young people is unprecedented. We must transform our health, education, family support, and legal systems to keep pace with these changes - the pandemic has revealed these pre-existing problems, which will impact our young people more severely than any other group. COVID-19 also creates an opportunity to take long-overdue action, action which must involve young people at all stages of the re-design of our communities.”

ADOLESCENT DEVELOPMENT:

UN definition of a child	WHO definition of young people between the ages of 10 and 24 years		
below the age of 18 years	early adolescence 10 to 14 years	late adolescence 15 to 19 years	young adulthood 20 to 24 years

Traditionally adolescence has been considered to begin with puberty and end with the adoption of adult roles such as financial self-sufficiency, marriage, and parenthood.

It is now understood that adolescence is a critical period of life for achieving potential: when the individual acquires the physical, cognitive, emotional, and social resources that are the foundations of their adult life. It is a critical time for the development of self-identity and moral standards.

Early adolescence is dominated by puberty and the effect of pubertal hormones on body shape, and sexual and brain development. Early adolescence is a time of re-modelling of brain reward systems, driving the need to engage socially, and to be risk-taking and impulsive. The dominant social influences are family and school.

Late adolescence is a time of maturation, when frontal lobe connectivity increases, improving self-regulation, social judgment, and decision-making abilities. The dominant social influences are media, peers, and school, whilst family influences lessen relative to outside social influences. There will be differences in values between the broader social influences and those within the family, and the differences can result in increased parent-adolescent conflict at home.

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THE ROLE OF FAMILY IN ADOLESCENT DEVELOPMENT:

There are many definitions of family, but herein we refer to a social unit consisting of one or more adults (usually parents) and the children they care for, whether they live together or not.

Although the centrality of the family in child development is well-established, the role of parents in adolescent development is less well understood, a research field considered to be a “striking knowledge gap” (Patton et al, Commission on adolescent health and well-being, Lancet, 2016, p.2432). Nevertheless, the available research strongly indicates family/parents have a major impact on adolescent development.

FINDINGS INCLUDE:

The family context of adolescents is predictive of later health and risk-taking behaviour (Resnick et al, 1997 JAMA, 278, 10, 823-832)

Family cohesion (e.g., the ability of family members to have fun together) during adolescence predicts later high levels of life-satisfaction, especially if family cohesion is combined with a bully-free school environment (Lietz et al, J Family Studies, 26, 3, 459-476)

Parenting practices and home atmosphere (e.g., parental coaching of emotional regulation, positive regard of adolescent, positive parenting, and negative emotional climate) during adolescence are major determinants of healthy adult emotional regulation and mental health (Morris et al, 2007, Soc Dev, 16, 2, 361-388; Morris et al, 2017, Child Dev Perspectives, 11, 4, 233-239)

Parenting style during adolescence predicts adolescent self-esteem (Mogonea & Mogonea, 2014, Procedia: Soc Behav Sciences, 127, 189-193)

The manner in which conflict between parents and adolescents is resolved, predicts later development of competencies in regulation of social relationships and emotional control (Branje, 2018, Child Dev Perspectives, 12, 3, 171-176)

Increasing the face-to-face time parents spend with their adolescent is a key beneficial ingredient in the highly effective community-based Icelandic Model of youth development, which was associated with a reduction in the prevalence of adolescent substance abuse from 42% to 5% (see below: Kristjansson et al, 2010, Prev Med, 51, 168-171)

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