

YCRA RESEARCH BRIEF:

OUTCOME EVALUATION OF ADOLESCENT OFFENDER PSYCHOSOCIAL DEVELOPMENT: A COMPARATIVE STUDY

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Summary: The purposes of this study were to (a) examine differences in psychosocial development of adolescent offenders in a residential treatment program between early adolescents and midadolescents and boys and girls and to (b) evaluate gains after 6 months of treatment as measured by the MPD. Findings indicate significant differences among groups and dramatic changes after at least 6 months of treatment.

Key Points in the literature Review:

- Psychosocial development is one of the three domains of development (along with biological and cognitive) and includes emotional, personality, gender, and social development and is influenced by the family, the community, the culture, and the larger society (Berger, 1994).
- An understanding of psychosocial development for adolescents, typically divided into three categories (early adolescents, 12-14), (mid-adolescence, 15-17), and (late adolescents, 18-22), is particularly important to counselors because it is probably the most challenging and complicated period of life (Berger, 1994), with early adolescence is considered the most volatile stage of adolescence (Vernon, 1993).
- Early and mid-adolescence includes key major psychosocial tasks; including acquiring a masculine or feminine gender role, developing appropriate peer relations, developing emotional independence from parents, preparing for a career, and achieving socially responsible behavior. Other characteristics of

mid-adolescence include experimentation with drinking alcohol, drugs, and sex, as well as identity seeking and striving for greater self efficacy (Vernon, 1993).

- Erikson's Theory, based on biographical and anthropological research studies, proposes that every individual experiences eight developmental stages during their life (i.e., trust vs. mistrust, autonomy vs. shame and doubt, initiative vs. guilt, industry vs. inferiority, identity vs. identity confusion, intimacy vs. isolation, generativity vs. stagnation, and ego integrity vs. despair) (Erikson, 1963, 1964, 1968, 1982).
- Research studies note that poor early psychosocial development predicts the presence of personality disorder symptoms later (Johnson, 1993).
- Female adolescents tend to blend intrapersonal development with interpersonal development significantly more than male adolescents (Lytle, Bakken, Romig, 1997).

Purpose of the Study: The purpose of this study was to investigate early and mid-adolescent and male and female adolescent offenders by (a) comparing psychosocial development using Eriksonian constructs and (b) evaluating gains after 6 months of residential, school-based and mental health treatment.

Methods: Data used in this study were collected from all adolescents who stayed at an adolescent residential school and mental health treatment facility in the rural Rocky Mountain Region of the United States for at least 6 months during a 1-year period.

Participants: The participants, ages 12-18, were court mandated for a variety of offenses ranging from running away to serious and violent crime (e.g., assault, sexual perpetration). 44% were girls and 56% were boys. The total sample of residents receiving initial psychosocial development testing over a 1 1/2 year period was 136 (56 [41%] early adolescents, 80 [59%] mid-adolescents); 90% were white (Euro-American), 5% were Hispanic, and 5% were Native American. The average age was 14.7 years (range 12-17 years). The average length of stay was between 6 and 10 months.

Instruments used: The Measure of Psychological Development was used to assess levels of

psychosocial development. The MPD is a self-report inventory based on Eriksonian constructs that assesses adolescent and adult personality development (Hawley, 1988).

Key Results:

Differences at Admission between Early and Mid-adolescents

- Consistent with the literature (Vernon, 1993), early adolescents indicated significantly more psychosocial distress than did mid-adolescents.
- Specific **areas of significantly more distress** (and less development) were in trust versus mistrust, identity versus identity confusion, intimacy versus isolation, generativity versus stagnation, and ego integrity versus despair.

Psychosocial Developmental **Changes** in Early and Mid-adolescents

Early Adolescents:

- Indicated significant change in total psychosocial development ($p=.05$, effect size [ES]=.43); specifically: trust vs. mistrust ($p=.05$, ES=.45), initiative versus guilt ($p=.01$, ES=.52), identity versus identity confusion ($p=.01$, ES=.52), and ego integrity vs. despair ($p=.05$, ES=.39).

Mid-adolescents:

- Indicated significant change after 6 months of treatment in total psychosocial development, as well as in **all eight** of the specific developmental areas ($p\leq.05$, ES Avg=.43).

Differences at Admission between Boys and Girls

- Boys and girls were very much alike in terms of overall psychosocial development at admission. The only areas of significant difference were that **boys indicated more distress** in intimacy versus isolation and generativity versus stagnation.

Psychosocial Developmental **Changes** in Boys and Girls

- Boys indicated significant change after 6 months in total psychosocial development and in **all**

specific developmental areas ($p\leq.05$, ES Avg=.39) except generativity versus stagnation.

- Girls also indicated significant change after 6 months of treatment in total psychosocial development ($p\leq.05$, ES Avg=.50) and in **all areas** except intimacy versus isolation.

Key Therapeutic Recommendations:

- Act as a parent surrogate not as a buddy; express interest and concern and set firm limits; help in practical matters, such as schoolwork, employment, and particularly socialization; and acknowledge similar problems you have encountered.
- Encourage youth involvement in active classroom instruction, emphasize interactive teaching and cooperative learning, use tutoring with the socially rejected youth, build social competency skills with adolescents in need, and provide resistance training.
- Identify positive behaviors, focus on specific deeds, use the language of encouragement, and focus on what the adolescent is good at and interested in.
- Create pro-social ways to help him or her express interests by using a sound career guidance process.
- Provide the client with a secure base to explore the various unhappy and painful life aspects, encouraging consideration of ways in which to engage in relationships with current significant family members, promote examination of each (family) relationship related to developing empathy for the other person's perceptions, support consideration of how current perceptions and expectations arise from childhood experiences and the internalized messages from others.
- Screen for depression within the 1st month of admission with those youth who present low ego integrity scores and high despair scores.
- Focus on teaching stress management; increasing inner directedness; buoy development of religious faith and church participation; and uncover genuine reasons to like, respect, and admire each youth—using genuine empathetic responses and affirmations.