



Middle Childhood and Adolescent Development

Children go through many changes during the period of rapid developmental growth known as adolescence. This chart lists characteristics of the “typical” child during each developmental stage from middle childhood through early and middle adolescence. Late adolescence (ages 18–21) is not addressed.




Individual differences in maturation rates, temperaments, and adult and social influences mean that age is not a

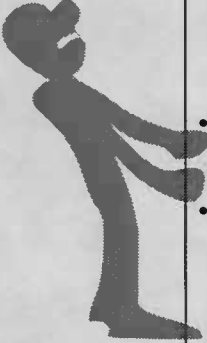
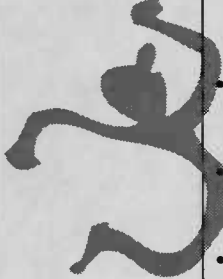
definitive indicator of where a particular child is along this developmental continuum. The age at which biological changes due to puberty begin varies from 9 to 14 for boys and 8 to 13 for girls in the U.S. Children’s progression through these stages is determined not only by biological growth and change, but also by adult expectations and societal contexts. The following chart lists typical characteristics of children’s development within three general stages.

Area of Development	Middle Childhood (ages 8–11)	Early Adolescence (ages 11–14)	Middle Adolescence (ages 15–18)
Physical Growth 	<ul style="list-style-type: none"> Period of uneven growth of bones, muscles, and organs can result in awkward appearance. Early onset of puberty can present difficulties for girls (see self-concept); for boys, it can result in adult expectations more appropriate for older boys. Since some adolescents begin puberty during middle childhood, children need access to information about sexuality and puberty prior to the middle-school years. 	<ul style="list-style-type: none"> Wide variation in onset of puberty and growth spurt, leading to earlier and later maturers. Appetite increases during growth spurts and decreases markedly between them. Increased need for sleep. Evident sexual development, voice changes, and increased body odor are common. 	<ul style="list-style-type: none"> Most youth have entered or completed puberty. Less variation in levels of growth and sexual development. Many youth have achieved their full adult height and other adult physical development milestones.
Cognitive Stage 	<ul style="list-style-type: none"> Logical thinking with limited ability to extend logic to abstract concepts; disdain for imaginative and illogical thinking of early childhood. Accumulation of much general knowledge. Gradual development of ability to apply learned concepts to new tasks. Frequent interest in learning life skills (cooking, fixing things, etc.) from adults at home and elsewhere. 	<ul style="list-style-type: none"> Individual variation between some children who are still focused on logic and others who are able to combine logical and abstract thinking. Some early adolescents can’t think ahead to consequences of their actions. Developing new thinking skills, such as thinking more about possibilities, thinking more abstractly, thinking more about the process of thinking itself, thinking in multiple dimensions, and seeing things as relative rather than absolute. Practicing new thinking skills through humor and by arguing with parents and others. Use of humor focused on satire, sarcasm, and sex (often irritating to adults). 	<ul style="list-style-type: none"> Major broadening of thinking abilities for many youth; are better able to think abstractly, follow a “what if” line of thought, and apply lessons learned in one situation to a different situation; tend to think a lot about the future, considering many possibilities and logical outcomes of possible events. Greater perspective-taking ability can result in increased empathy and concern for others, and new interest in societal issues for many.

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Area of Development	Middle Childhood (ages 8–11)	Early Adolescence (ages 11–14)	Middle Adolescence (ages 15–18)
Moral Development 	<ul style="list-style-type: none"> • Predominantly egocentric in thinking, although has developed a conscience. • Moves from thinking in terms of “What’s in it for me” fairness (e.g., if you did this for me, I would do that for you), to wanting to gain social approval and live up to the expectations of people close to them—“golden rule” morality (can take perspective of others, may place needs of others over own self-interest). • Moral thinking abilities not always reflected in children’s behaviors. 	<ul style="list-style-type: none"> • Continuing egocentrism. Often believes self to be invulnerable to negative events. • Increasing ability to take perspective of others into account with own perspective. • In addition to concern about gaining social approval, morals begin to be based on respect for the social order and agreements between people: “law and order” morality. • Begins to question social conventions and re-examine own values and moral/ethical principles, sometimes resulting in conflicts with parents. 	<ul style="list-style-type: none"> • Less egocentric with age. Increased emphasis on abstract values and moral principles. • Increased ability (for some) to take another’s perspective fully; can see the bigger societal picture and might value moral principles over laws: “principled” morality. • Different rates of cognitive and emotional development. For example, often advocates for specific values and violates them at the same time.
Self-concept 	<ul style="list-style-type: none"> • Influenced by relationships with family members, teachers, and increasingly by peers. • Often relatively low level of concern about physical appearance (especially boys), although this is influenced by peers as well as the media. • Many boys experience pressure to conform to “masculine” stereotype. • Girls’ body image declines sharply with puberty, especially with early onset. Early onset of puberty is also associated with lower self-control and emotional stability, especially for boys. 	<ul style="list-style-type: none"> • Self-image can be challenged by body changes during puberty and social comparisons. • Youth begin long-term process of establishing own identity separate from family. • With the onset of puberty, many girls experience pressure to conform to gender stereotypes, might show less interest in math and science. • With puberty, normal increases in girls’ body fat can impact body image and self-concept negatively for many. Both boys and girls might be concerned with skin problems, height, weight, and overall appearance. 	<ul style="list-style-type: none"> • Process of identity formation is intense. Experimentation with different roles: looks, sexuality, values, friendships, ethnicity, and especially occupations. • Some girls might experience obsessive dieting or eating disorders, especially those who have higher body fat, are chronically depressed, or who have highly conflicted family relationships. • Minority youths might explore several patterns of identity formation: <ul style="list-style-type: none"> — a strong ethnic identity — bi-cultural identity — inclusion into the majority culture — alienation from the majority culture
Psychological & Emotional Traits 	<ul style="list-style-type: none"> • Need to develop a sense of mastery and accomplishment. <ul style="list-style-type: none"> — Frequent interest in making plans and achieving goals. — Learning from parents and others to do, make, and fix things. • Tendency to be disorganized and forgetful. 	<ul style="list-style-type: none"> • Intense self-focus. <ul style="list-style-type: none"> — Worrying about what others think about them. — Increased desire for privacy and sensitivity about body. • Frequent mood swings with changes in activities and contexts. Too much time spent alone can contribute to moodiness. • Height of forgetfulness. 	<ul style="list-style-type: none"> • For some, increased ability to empathize with others; greater vulnerability to worrying, depression, and concern for others, especially among girls. • Many show an increase in responsible behaviors.

Area of Development	Middle Childhood (ages 8–11)	Early Adolescence (ages 11–14)	Middle Adolescence (ages 15–18)
Relationship to Parents & Other Adults 	<ul style="list-style-type: none"> • Tends to be closely attached to parental figures. • Parents commonly make most decisions affecting child, with child involvement in decisions increasing with age. • Most frequent conflicts over sibling quarrels and forgetfulness with respect to chores, schoolwork, and messiness, especially of child's bedroom. • Parental listening skills become increasingly important. • Parent-child communication patterns can change with puberty. Many adolescents report that (a) they can't talk with parents about issues related to sexuality, and (b) they don't get needed information in sex education courses at school. 	<ul style="list-style-type: none"> • Changes in own and parental expectations alter previous patterns of relationships with parents, often resulting in greater conflict. • Greater focus on peer friendships as youth develops an identity outside of the role of a child in a family. • Often rebuffs physical affection (but still needs it). • Increased interest in making own decisions; benefits from increased opportunities to make own decisions within scope of current abilities. • Youth objects more often to parental limitations (but still needs some), resulting in conflict. • New thinking abilities are practiced in increased use of humor and arguments (or "talking back") with parents/other adults, which may result in conflicts. • Parental listening skills and nurturing continue to be important. 	<ul style="list-style-type: none"> • Conflict with parents often decreases with age. <ul style="list-style-type: none"> — Improved ability to see parents as individuals and take their perspectives into account. — Most maintain good relationship with parents. • Greater interest in taking on "adult-type" responsibilities (own checking account, doing own laundry, buying own clothes, cooking meals, making repairs, etc.). • Commonly makes most of own decisions, preparing for eventual separation from family. • Needs balance between time spent with adults and with peers. • Continues to benefit from some parental limits and monitoring, while often objecting to them. • Common conflicts over money, curfews, chores, appearance, and activities with peers.
Peer Relationships 	<ul style="list-style-type: none"> • Friendships often with same-gender peers, usually based on proximity, common interests/hobbies, or other perceived commonalities. • Girls usually have fewer, but emotionally closer, friends than boys. • Formation of exclusive "clubs" and shifting peer alliances common. • Media influences and popular culture increasingly impact children's peer activities and relationships. 	<ul style="list-style-type: none"> • Changes due to puberty and peer reactions commonly alter peer relationships. • Friendships still begin with perceived commonalities, but increasingly involve sharing of values and personal confidences. • Might develop cliques of three to six friends (usually same gender), providing greater sense of security. Antisocial cliques can increase antisocial behaviors. • Romantic crushes common, and some dating begins. 	<ul style="list-style-type: none"> • Peers help youth explore and develop own identity. • Cross-gender friendships become more common. • Antisocial peer groups can increase antisocial behaviors. • Close friendships help youth with process of developing an individual identity separate from that of a child in a family.

Resources

- Ames, L.B., F.L. Ilg, and S.M. Baker. 1988. *Your Ten- to Fourteen-year-old*. New York: Delacorte Press.
- Brooks, J.B. 1999. *The Process of Parenting*. Mountain View, CA: Mayfield Publishing Company.
- Cole, M. and S.R. Cole. 1996. *The Development of Children*. New York: W.H. Freeman and Company.
- Steinberg, L. 1993. *Adolescence*. New York: McGraw-Hill, Inc.

For Further Reading

- Canada, G. 1998. *Reaching Up for Manhood: Transforming the Lives of Boys in America*. Boston: Beacon Press.
- Elkind, D. 1997. *All Grown Up & No Place to Go: Teenagers in Crisis*. Reading, MA: Addison-Wesley Publishing.
- Pipher, M. 1999. *Reviving Ophelia: Saving the Selves of Adolescent Girls*. Westminister, MD: Ballantine Publishing Group.

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