

## Fact sheet: Considerations in Working with Adolescents and Emerging Adults (Ages 15-22)

### Background/Developmental Milestones

Adolescents and young adults (AYAs) (aged 15 to 22) are in a developmental period marked by change and exploration. This includes reaching physical maturity as they simultaneously seek to define their unique identity. Throughout this period, AYAs typically seek and establish significant independence from their family of origin, engage in more extensive and influential relationships with peers, and develop increased interest in sexuality and romantic relationships. As AYAs take on these myriad concurrent changes, their self-esteem can be especially vulnerable to external factors. In particular, AYAs' subjective evaluation of self-worth is increasingly tied to self-perceived approval and acceptance within both close friendships and larger peer groups, as well as to self-perceived competence in academic and/or athletic endeavors (Konstam, 2015). Similarly, AYAs will often find themselves trying new things (e.g., hobbies, clothing styles, risk behaviors) and taking on new and more substantial responsibilities (e.g., leaving home, enrolling in college, starting a job) in their efforts to establish a greater sense of autonomy while also establishing their role in the adult world.

### Clinical Implications and Needs

While AYAs are building on their autonomy and necessarily being exposed to the stressors of adulthood, they are often simultaneously working through residual childhood stressors such as separating from their families, managing increasing academic/occupational demands, and managing peer and romantic relationships. As a result, it is important to be mindful of the difficulties typically associated with transitioning to young adulthood. Potential areas to consider include risk behaviors (e.g. substance use, self-injurious behavior, access to weapons, suicidality, sexual activity), adherence difficulties, possible concerns regarding fertility changes or loss secondary to medical treatments, and intimate partner violence. Additionally, state laws and guidelines regarding age of consent are another important consideration about which to remain informed.

Particularly among AYAs with chronic illness, it is important to recognize they may be required to manage treatments that were previously managed for them. Separately, common milestones, such as going to college and starting careers, may come at different times or look differently for these individuals compared to peers. Additionally, when considering the degree of risk associated with specific behaviors, it is important to remember a behavior considered to be of moderate risk for a healthy individual may in fact be considered one of high risk for AYAs with a chronic illness, as it could result in more adverse effects.

### Evidence-based Interventions and Assessment

Commonly used treatment modalities, such as Motivational Interviewing, Acceptance and Commitment Therapy and Dialectical Behavior Therapy, have been modified for use with AYAs (see Resources for relevant manuals). Additionally, some research suggests that skills training and solution focused interventions are likely to be most effective with these individuals (Sansom-Daly et al., 2012).

A non-exhaustive list of measures commonly used to assess AYAs is provided below:

Assessment	Age(s)	Domain
Adolescent Health Review	12+	Exercise, nutrition, unhealthy weight control, family, school, emotional distress, suicidality, violence, sexual activity, substance use, physical/sexual abuse
BASC-2(BASC-3 is the updated version and still appropriate for this age range)	12-21 & 18-25	Anxiety, attention, school, depression, hyperactivity, interpersonal, locus of control, family, self-esteem, sensation seeking, somatization
HEADSS	12-25	Home, education, employment, substance use, sexuality, suicide, depression, safety, anxiety, psychosis, eating, mania
Multidimensional Adolescent Assessment Scale	10-21	Depression, self-esteem, family, friends, school, aggression, suicide, disturbing thoughts, substance use, memory loss
Rapid Assessment for Adolescent Preventive Services	11-20	Eating/weight, physical activity, unintentional injury, substance use, sexual health, depression, self-harm, adult support

### Cultural Factors to Consider

For AYAs, culture can become especially salient as they go through the process of developing a singular, consolidated sense of identity and ultimately refine their sense of self in relation to constructs such as race and/or ethnicity. Although culture encompasses numerous dimensions and, in turn, impacts human experience in innumerable ways, certain cultural factors are consistently identified by AYAs as being especially relevant in the identity formation process. One such dimension is social class, which has a specific impact on the trajectory, experience, and presentation of certain typical milestones of early adulthood (Konstam, 2015) such as the pursuit of higher education. Additionally, cultural norms exist regarding personal independence and autonomy. Variations in cultural and social expectations often play a defining role in how adolescents negotiate the balance between maintaining the familial connection and establishing independence. For those faced with a significant chasm between the expectations of their family's culture and those of the culture in which they are growing up, establishing a secure sense of self can be especially challenging.

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### Resources

- [National Adolescent and Young Adult Health Information Center](#)
- [Adolescent and Young Adult Health CoIIN Resource Repository](#)
- [American Academy of Child and Adolescent Psychiatry: Moving into Adolescent Resource Center](#)
- [Health Care Alliance for Response to Adolescent Depression](#)
- [DBT Skills Manual for Adolescents](#)
- [ACT Workbook for Teens](#)
- [MI Book for AYAs](#)

### References

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