Puberty

- Puberty: the hormonal and physical changes that contribute to sexual maturity and adult height
- Takes an average of five years and today is typically an early teenage change
  - Secular trend
  - Puberty Rite – “coming of age”
  - Menarche and Spermarche

The Secular Trend

- A century-long decline in the average age at which children reach puberty in the developed world (signaled by menarche)

The Hormonal Programmers

- Two Systems:
  - Adrenal androgens – produced by adrenal glands
    - Program aspects of puberty
    - Promote growth of hair; influence skin changes; program sexual desire.
  - Androgens begin secretion in middle childhood.
  - HPG Axis (Hypothalamic, Pituitary, Gonad)
    - Main hormonal system programming puberty
    - Hypothalamus triggers the pituitary to secrete its hormones, which, in turn, trigger the gonads to secrete their hormones, which produce major body changes.
The Hormonal Programmers

- Gonads (sex organs)
  - Testes
  - Ovaries
  - Adrenal androgens (testes and estrogen) found in both sexes
    - Program sexual desire and skin and bodily hair growth

Physical Changes

- Primary Sexual Characteristics
  - Changes that directly involve the organs of reproduction
    - Growth of uterus, maturation of the ovaries, onset of menarche
    - Growth of penis, testes, onset of spermarche

- Secondary Sexual Characteristics
  - Physical changes not directly involved in reproduction
    - Hair growth, voice changes, acne, breast development

- Growth Spurt
  - Dramatic increase in weight and height

Puberty Timetables: Individual Differences

- Influences
  - Genetics
  - Weight
  - Nutrition
  - Stress

Sequence of some major events of puberty
Predicting Girls' Chances of Early Puberty

**TABLE 1: Predicting a Girl's Chances of Early Puberty: Some Questions**

1. Did this girl's parents reach puberty early?
2. Is this girl African American?
3. Is this girl overweight? Did she gain weight rapidly during her first year of life?
4. Has this girl's family life been stressful and unhappy? Did she have an insecure attachment?

Feelings about Puberty

- Basic principle: Changes are exciting and frightening; reactions depend on social norms and reactions of individual family members.
- Breast development
  - Western Cultures = pride
    - Exception: girls who attempt to maintain pre-pubescent appearance (gymnastics, etc.)
  - Menstruation—girls have varying responses
  - Spernmarche—young men tend to be secretive

Maturing Early: Possible Problems for Girls

- Special risk of developing acting-out behaviors
  - Gravitate to older friends
  - Unprotected sex
  - Possible disconnect from school (poor grades)
- Risk of becoming anxious/depressed
  - Body dissatisfaction
  - Self-consciousness

Wrapping Up Puberty

- Environmental context will affect child's reaction to puberty.
- Especially for boys, communication can be improved.
- With early-maturing girls, take care to arrange the best body-environment fit.
Interventions: Minimizing Distress during Puberty

- For society—school environment important
  - Earlier introduction to sex education
  - Provide nurturing environment to set adolescents on right path.
- For parents
  - Be alert for “acting-out” behaviors in young teenage girls.
  - Communication important
    - Make an effort to communicate about pubertal changes with same-sex child.

Body Image Issues

- Susan Harter’s research
  - Feelings of competence in five domains relates to overall self-esteem.
    - Scholastic competence, behavioral conduct, athletic skills, peer likeability, appearance
  - For adolescents, contentment with one’s appearance outweighs any other category.

Thin Ideal: the desire to be “smaller” among average and underweight Irish girls (12–19)

Differing Body Concerns of Girls and Boys

- Peer pressure
- Teasing
- Dating
- Media
  - Presents unrealistic images (digitally altered)
  - Strong influence in promoting body dissatisfaction in both genders
Queen Latifa embodies the fact that bodies are beautiful at every size. Not only is she a role model for women of color, but for every woman in our culture.

Eating Disorders

- **Anorexia Nervosa**
  - Affects 1 in 1,000 teenagers (majority girls)
  - Self-starvation to being 85% or less of healthy body weight
    - Starvation can destroy body organs and cause death.
    - Medical emergencies require hospitalization (2/3 of ideal weight or less).
  - Menstruation ceases
  - Distorted body image

- **Bulimia Nervosa**
  - Characterized by at least biweekly cycles of binging and purging
    - In addition to forced vomiting, purging may include taking laxatives and/or diuretics, fasting, and excess exercise.
  - Major consequences
    - Mouth sores, loss of tooth enamel (gray teeth), esophageal ulcers, esophageal cancer
  - Prevalence is increasing

Risk Factors

- Strong hereditary component, especially in girls
- Temperamental tendency
  - to be anxious,
  - to have low self-efficacy,
  - to have a great need for approval,
  - and an inability to express legitimate needs.
Interventions

- Target at-risk girls prone to:
  - Depression and low self-worth
  - Subscribe to the “thin” ideal

- Focus on:
  - Elevating self-efficacy
  - Promoting true self-esteem
  - Demanding genuine effort
  - Encouraging autonomy (“It’s your choice.”)

Exploring Sexual Desire

- First sexual feelings programmed by adrenal androgens.
  - About age 10

- An interplay of nature/nurture heightens sex hormone levels
  - Nature (androgens)
  - Nurture
    - How we and others react to our body changes

With whom are teens having intercourse?

- 75% girls and 56% boys report first sex with steady partner
- 1 in 5 teens have sex outside of a committed relationship
- Research with Ohio teenagers engaging in non-committed sex:
  - For girls, having noncommitted sex with a number of partners is a risk factor for depression.
  - For boys, having sex with a number of partners promoted higher self-esteem (one study).
Sexual Double-Standard

- Cultural code that gives men greater sexual freedom than women
- Research shows that both boys and girls put their highest priority on intimacy.

Sexuality: Contemporary Trends

![Graph showing trends in sexual activity among teenagers](image)

**TABLE 6.3: Designing a Teenager-Friendly Sex Education Program: A Summary Table**

1. Know your group. Understand that sexual practices vary by SES, ethnicity, and family of origin. Then, tailor your interventions to your cultural group.
2. Be aware of peer influences—and try to foster a group norm of responsible sexuality. Bring home the message that even if your friends are having sex you can still remain a virgin. Stress that having an older boyfriend or girlfriend doesn’t mean you “need to” have sex.
3. Assess your group’s “media watching” practices and work to counter TV, Internet, or magazine images that celebrate random sex.
4. As every girl could benefit from interventions focused on increasing self-efficacy, build in the message that “you have control of your body.” It’s especially important to tell girls that often having sex outside of committed relationships is destined to produce low self-esteem.
5. Don’t neglect boys. Pay special attention to teaching boys to resist peer pressure to be “players.”
6. Bridge your program to provide information about contraception (rather than just stressing abstinence).
7. Go beyond providing information just about sex. Teach teens about handling relationships.

*This research-based advice now is illegal in some states.*