

Benchmark Essay: Addiction in Adolescence Assignment

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Introduction

Adolescence can be a critical time in development, as self-autonomy and the individual analyses of risk and reward advance. Often times, adolescents are motivated and reinforced by acceptance and fitting in. Looking to peer influence for guidance may lead to unhealthy habits, such as substance use and abuse, which can result in addiction. Adolescent addiction is a prevalent growing concern on the local and national level but has been proven to be impacted by resilience and spiritual development.

Addiction and Adolescence

During the adolescence developmental stage, engaging in various risky behaviors, such as substance use, is a critical issue. Patterned usage and abuse of substances can lead to addiction. Continued use of substances during this developmental stage can result in impairments of functional brain activity, deficits in intellectual development, and poses neurological risks (Wong et al., 2020). Risk factors leading to substance abuse can be heightened in adolescence and exist on the individual, familial, and community level (Nawi et al., 2021). Individual risk factors include significant negative growth exposure and comorbidity (Nawi et al., 2021). Family risk factors include neglect and authoritarian parents (El Kazdough et al., 2018). Community risk factors include peer drug use and drug availability (Nawi et al., 2021).

However, interventions exist that counteract the abuse of substances in this population. These include a personal desire to maintain good health, parental support, engagement in purposeful activities, and strong religious beliefs (El Kazdough et al., 2018). Adolescent resilience also has an impact, as higher resilience is correlated with self-efficiency in problem-solving and managing the expression of positive and negative emotions in healthy ways (Sagone et al., 2020).

Addiction and Spiritual Development

As previously noted, it has been found that healthy spiritual development may act as a protective factor against adolescent substance use and addiction. A lot of the time, the biblical principle of obedience is demonstrated in these situations. As a whole, the majority of religions devalue action that can result in destructive health effects (Nawi et al., 2021). Because substance abuse can easily result in harm, holding these beliefs may guard those in this age group from engagement with substances. Through developing a relationship with a higher power, individuals can create a safeguard to ground them. Integrating education about health and substance use with religious outlets can be an effective way to raise awareness of the risks of these activities (El Kazdough et al., 2018).

Local Coverage

The Tampa Bay region in Florida has suffered great losses due to adolescent drug use. In this area, it reported that 16% of students have had their first drink before thirteen years of age, 11% of students binge drink, 35% of students have obtained alcohol, and 38% of students smoke marijuana (Scott, 2022). The case of student Katie Golden, who died of a heroin overdose, is a prime example of tragedy resulting from substance use. It is reported that the Tampa Bay area is taking steps to mediate the growing issue. In Golden's case, her drug dealer has been charged first degree murder (Holton, 2020). Various viewpoints are considered, analyzed, and treated through varying types of intervention such as in school workshops, behavioral healthcare, and investments in school psychologists, counselors, social workers, and nurses (Scott, 2022).

Conclusion

At all levels, adolescent substance use and addiction are epidemics. Even though it's proven that engaging in substance use poses threats to normative development, the risky behavior

continues through generations. Both risk and protective factors exist on the individual, familial, community, and societal level. In the future, studies can examine why adolescents choose one peer leader over another, as it has been largely unexplored (Wong et al., 2020).

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Benchmark Essay: Trauma, Development, and Spirituality Assignment

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Introduction

The human life is full of experiences, many of which carry considerable influence on development and who we become. While positive experiences can inspire us, research mostly focuses on the effects of negative experiences. In particular, trauma and its consequences on the human psyche and physical condition are highlighted. Current research suggests that trauma can have detrimental effects on development, while resilience has opposing effects.

Trauma and Resilience

While trauma and resilience are different in definition, they are often mentioned jointly. To understand this relationship, understanding these concepts individually is imperative. According to the Substance Abuse and Mental Health Services Administration (SAMHSA), trauma is a result of an event that produces physical, emotional, or life-threatening harm and has ongoing negative effects on health and well-being. In children, trauma is closely related to adverse childhood experiences (ACEs). Resilience is related to the recovery process following these events. Resilience can be defined as the process of utilizing internal and external skills to adapt after being faced with trauma (Wong et al., 2020).

Trauma and Development

Trauma can have a significant impact throughout the lifespan. Exposure to trauma at an early age can lead to negative effects physically, socially, and emotionally. Trauma can manifest in young children in various ways including personality regression, withdrawal, poor grades, and self-harm (Wong et al., 2020). As one continues to age, the impacts of trauma may manifest into mental health conditions such as depression, deep fear, and post-traumatic stress disorder. Fear can leave people in a stagnant place, which can limit cognitive range, and can deepen a state of depression (Zhou et al., 2016). When cognitive range is hindered due to trauma exposure, this may

lead to developmental delays in a child. Other areas such as perceptions of trust and justice are affected, which can easily be the antecedent to many unhealthy behaviors in early adulthood (Zhou et al., 2016). Even into late adulthood, trauma can have an effect, with strong associations between ACEs and conditions such as ischemic heart disease, cancer, bronchitis, and emphysema (Hamby et al. 2021).

Resilience and Spirituality

While trauma has an inherent negative affect on development, resilience plays a significant role in countering these. Resilient characteristics, such as optimism and self-enhancement, can increase survivor self-esteem and highlight their growth (Zhou et al., 2016). Those who exhibit resilience after a traumatic event actually develop fewer adverse psychological outcomes compared to those who do not (Zhou et al., 2016).

Another protective factor against trauma is spiritual development, as it can ease effects of trauma. Spirituality offers intrinsic and extrinsic forms of social support, which are related to the biblical principles of faith and community (Brewer-Smyth & Koenig, 2014). It has also been found that individuals who are spiritual have lower cortisol responses, which is a protective factor against stress (Brewer-Smyth & Koenig, 2014). Spirituality has also been linked to greater forgiveness and less hostility, which results in greater subjective health profiles (Brewer-Smyth & Koenig, 2014). Mental health is also impacted, as spirituality is a protective barrier for suicide (Brewer-Smyth & Koenig, 2014).

Conclusion

In conclusion, it can be noted that trauma and resilience function inversely. Trauma hugely impacts childhood mental, emotional, physical, and cognitive development. While these effects can last into older adulthood if not appropriately treated, resilience and spirituality can play

supportive roles in healing. In the future, studies can investigate other variables- such as social support, forgiveness, and continuing spirituality- and their effects on childhood trauma through longitudinal studies (Brewer-Smyth & Koenig, 2014). Investigating these effects can help discover effective ways to treat trauma through the lifetime, fostering a better future.

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Benchmark Paper: Developmental Analysis Assignment

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Abstract

In this assignment, the author deeply analyzes her personal development throughout her lifespan in nine major sections- conception and prenatal development, infancy, toddlerhood, early school age, middle childhood, early adolescence, late adolescence, spiritual development, and current lifestyle and behavior. The sections are presented in that order, serving as a comprehensive overview. Significant events, key developmental years, developmental milestones, challenges faced, and resilience are all touched upon within the entirety of the text.

Keywords: human development, developmental milestones, reflection

Introduction

Human development has been a main focus of academic research for decades in various disciplines such as psychology, biology, and spirituality. Development is impacted by both positive and negative experiences, one's surroundings, the immediate and greater environmental contexts, biology and genomes, social class, etc. The list of factors impacting human development can go onward. Perhaps the most interesting part about human development is that it's an ongoing process that is both unique and individualized to each person. Developmental milestones are achieved at various ages, making the "normal" timeline for development a general statement. This paper will explore and break down my development as an individual, while assessing factors that influenced my behavior. Through each section, I will reflect on my successes and challenges.

Developmental Story

Conception and Prenatal Development

The first stage of development is the conception and prenatal phase. Often times, this stage of development is largely forgotten outside of academic conversation due to the fact that life has not begun in the outside world. However, it is known that life begins in the womb, and prenatal care and development are essential parts of life. This is where we, as humans, begin to grow. According to my mother, the process of successfully getting pregnant and carrying a child was relatively easy for her. She did not have any adverse experiences during the course of the pregnancy. My mother did mention that throughout her pregnancy, she regularly saw a midwife. Care that is led by a midwife shows comparable, sometimes even better, levels compared to obstetrics gynecologist (Tikkanen et al., 2020). Further evidence supports that majority of pregnant women are best cared for by midwives as long as they are within a system that has access to medical colleagues if necessary for specialized care (Kennedy et al., 2020).

Interestingly, once the duration of the pregnancy hit the typical forty-week mark, my mom did not go into labor. My mom did not go into labor until the forty-second week. It is often unsafe to carry a fetus past full term, as it poses risks to both the mother and the baby. In the case of my mother, though, there were no risks aside from her physical size. Given my mother's petite stature, I was born via a cesarean section. There were no complications, and I was born healthy. I weighed six pounds and thirteen ounces.

Infancy

Again, gaining more insight from my mother, my development as an infant was also on track. Luckily, my mother kept a very detailed baby book, which tracked numerous developmental milestone timelines for this period of my life. I was three months old when I rolled from my stomach to my backside. At three and a half months, I was able to hold a toy in my hands. This shows the development of my motor control. At four and a half months, I was able roll over from my back to my stomach. At six and a half months, I was able to sit up alone. Finally, I developed one of the key developmental milestones- crawling- at seven and a half months. At nine and a half months, I began to speak. My vocabulary included typical words for this age group, such as mama, dada, uh-oh, and doggy. My mother detailed that from a very early age, communication was very easy with me. Once I was able to recognize my parents, my surroundings, and make some cognitive connections, I was able to communicate what I wanted.

Speaking on emotional recognition and trust, I was extremely bonded with my mother. This is definitely due partly to the fact that I was breastfed. I developed a loving, dependent relationship. Relationship indicators such as a secure attachment style and strong maternal sensitivities are related to the act of breastfeeding (Peñacoba & Catala, 2019). My mother was able to perceive my developing signals as an infant in an appropriate and prompt way.

I find it important to note that it was during my infancy that my size relative to other “normal” babies became apparent. While I was successfully hitting key developmental milestones, my height and weight were always below the norm. As an infant I was anemic, but never severely sick. My case of anemia was mild and short lived, as I grew out of it as I aged. Put simply, I was always a smaller child in terms of size, but this had no effect on the development of my brain or bodily functions.

Toddlerhood

As I aged, I continued to accomplish key developmental milestones with ease. Right before my first birthday, I took my first steps independently. As I grew, I became more autonomous and functional on my own in some ways. By the time I was two years old, I was able to sing the ABC’s and recount the primary colors. By two and a half years old, I could identify several letters in the alphabet. By age three, I could identify almost the whole alphabet, identify shapes, and I was able to count to ten.

Similar to my infancy, I was advanced in in terms of developmental skills, but remained behind in terms of height and weight. At one year old, I weighted only fifteen pounds. At two years old, my weight increased to eighteen pounds. At age three, I weighed twenty-three pounds. For my particular size, I was on a healthy track of weight gain. Compared to other children though, I was significantly smaller. People often find this interesting, as I was carried prenatally past full term. Most people ask if I was born premature because of how tiny I was.

I also find it important to note that my younger brother was born when I was two years old. According to my mother, I copied everything she did, which is typical of this age. Because toddlers are great imitators, majority of the behavior learned is from external sources modeling behavior in some way. I was around my mother and father most often, so I followed in their steps. A toddler’s

creative thinking is linked to how they interact with the world (Hoicka, 2016). For example, because I saw my mother use a cloth in various ways- to wipe up a mess, create a cloth diaper, play peek-a-boo with my brother- I began interacting with the world in a more creative way. As I began to get older, I was more imaginative in playing and telling stories. For example, I started to play with baby dolls, and acted as though I was their mother. This models not only me imitating my mother's actions with my brother, but also that I became more innovative in the ways I entertained myself.

Early School Age

This stage of development is where some of my earliest memories are rooted. The time period of preschool and kindergarten aged children is unique, as their physical, cognitive, emotional, and decision-making skills are growing quickly. According to my parents, I was no exception to this. Both of my parents described me as advanced for my age during this developmental period.

In terms of physical development, I was successfully acquiring fine motor skills and was becoming more physically active. It was at this stage my parents started introducing me to extra-curricular activities such as dance and T-ball. Like every other developmental stage prior to this, I was behind in my height and weight. However, for a child of my size, I gained a decent amount of healthy weight from year to year. At age four, I weighted twenty-eight pounds. At age five I weighted thirty-two pounds. At age six, I weighted thirty-four pounds. Again, I was always small compared to my peers, but I was always able to keep up. I was participating without issue in the activities I was registered for.

At this point in my life, I was attending preschool, which I truly believe helps in all realms of childhood development. The preschool setting offers the opportunity for social and cognitive development in unique ways. During this stage, the unique personalities of different individuals start to shine through. The development of character is related to the future development of worldviews,

beliefs, personal will, feelings, and acquisition of behavior (Turdimurodov, 2021). In preschool settings, children are challenged to overcome age-appropriate tasks in order to develop initiative, perseverance, independence, determination, and purposefulness (Turdimurodov, 2021). While I'm sure I was challenged in terms of capabilities, my parents reported me always successfully hitting developmental milestones with ease. My parents explained that I was mature for my age, yet still I enjoyed playing with kids in my age group. They also reported that I loved games and activities that stimulated my mind, such as puzzles and books.

My brother was a year old at the start of this developmental period, and I remember I used to love showing him toys, teaching him things, and acting like I was his mom. While egocentrism is a common personality trait in developing early school aged children, my parents often reported me doting on my little brother. My parents explained that I gave my brother everything he wanted, and almost never fought back when it went against my wishes.

Middle childhood

Moving through middle childhood, my development continued to progress normally. This developmental period extends from ages six to twelve and is a rather larger developmental window. From first to sixth grade, priorities change, you begin to develop a social ranking, find a group of friends, your interests begin to really shine, and your body begins to change.

Starting at the beginning of this developmental period, there are a few key events that occurred in my life. When I was about seven years old, my parents got divorced. I know this often has a negative impact on a child, but that was not the case for me. Because I was so young, I don't have memories of my parents being married. I quickly adapted to going back and forth between houses, between families, and splitting time. I feel as though my parents getting divorced brought

me closer to my brother, as we shared the experience. I was fortunate enough to have my brother next to me through it all- wherever I went, he followed.

In terms of physical development, the pattern did not change. I was always significantly smaller, but never sick or delayed. I remember my parents took me to the doctor to get my growth plates checked when I was seven or eight years old, but we were told there were no issues. I was just small. I was offered the choice to use human growth hormone, and my parents let me make the choice of whether or not that was something I wanted. Ultimately, I declined. The thought of giving myself a shot everyday scared me.

Continuing to move through this developmental stage, around age eight, I began creating my own self-identity. I had my specific group of friends, I had particular likes and dislikes, and I was heavily involved in an organized sport- cheerleading. This was a space where I could use my small stature to my advantage. For most of my cheer career, I was one of the youngest team members. Constantly being surrounded by older and more mature individuals influenced my social behavior.

Because of my small size and my heavy involvement in cheerleading, I was always told to expect my menstrual period around age sixteen. This was not the case, however, as I started menstruating at age twelve. In various sports, the rates of menstrual dysfunction vary, but Smith et al. (2022) reports fifty-two percent of competitive cheerleaders self-reporting menstrual dysfunction in some form. I was the first of my friends to go through puberty, and I remember it being awkward. My body was changing before everyone else's' and it was uncomfortable at times.

Early Adolescence

Early adolescence was definitely the most critical period in my development thus far. During this time period, I faced challenges that shaped my current personality. While these challenges did not necessarily impact my physical or academic development, I definitely had to work on my social

and emotional development in a mindful and proactive way. In this phase of my life, I struggled with anxiety, especially in social contexts.

My struggle with anxiety started at age fourteen. My whole life I had always been a rule follower, and my friends started to push the boundaries in high school. I did not want to step into the world of drinking, drugs, and sex. Because of my reluctance to engage in illegal substances and activities that could get me in trouble, I started to feel disconnected with my friends. The group I had grown up with was suddenly changing, and the social norm was morphing into something I knew nothing about. In adolescence, one's perceived peer group sets the standard for what is acceptance and normal. The peer group is used as a reference to both identify and compare with (Vanden Abeele, 2014). In this developmental stage, it is common for individuals to attach concepts of self-worth, attitudes, and related behaviors to the opinions of peers (Vanden Abeele, 2014). This was definitely the case for me, and I felt as though I did not fit in completely. My anxiety had led to multiple panic attacks, fear, and withdrawal from the social scene.

In order to learn to combat the anxiety and related symptoms, I saw a therapist for about a year and a half. I was treated with cognitive behavioral therapy, which I learned was normative for this condition and for my age. I learned about the chain reaction of thoughts, emotions, and behaviors. By learning to interfere with the intrusive and anxious thoughts, I was able to interrupt the course of my bodily reactions. This took practice to fully comprehend and learn how to do, but I ultimately mastered the skill by age seventeen.

After I learned how to control my anxiety, I was able to live a fuller, more fun life. While I still had hiccups with my anxiety every now and then, I was fully capable to act in my best interest. By keeping myself occupied with cheerleading, my high school job, and academics, I was able to focus on the aspects of life that brought me joy. Through hard work, perseverance, and resilience, I

was able to find happiness in my social life and be more in tune with my emotions. I finished out this developmental stage by graduating high school and starting my college career at the University of South Florida.

Late Adolescence

The last stage of development thus far in my life is late adolescence, as I am only twenty-two years old. I am only partially through this developmental stage but have successfully overcome some key developmental challenges that are common within this phase. There are also challenges in my development that I am currently facing and trying to overcome.

Beginning with my college years, as it is a unique and critical time in this stage, I would say I did not have the common college experience. The first thing that set me apart from majority of my peers was that I was a division IA college athlete. The transition from high school to college already is a complex experience that affects many first-year students in various ways. The challenges of adjustment and the complexity of finding where you feel as though you belong are particularly difficult for special populations like student-athletes (Gayles & Baker, 2015). I was a part of the coed cheerleading team at the University of South Florida, and majority of my time was dedicated to this commitment. We practiced at least three times a week, had strength and conditioning on our days off, and cheered at all sporting events. During winter break, we were required to stay and practice twice a day, every day to prepare for nationals in January. While all of my other peers returned to our home state of Connecticut, I was at school practicing. For a while, I felt as though I was missing out. On top of cheer though, I was very serious about my academic success. I valued academic success over having a social life and building life experiences. This made the feeling that I was missing out even greater, as I frequently turned down social opportunities to finish work. Often times, the weight of pressure to perform at the top in academics and in athletics was stressful.

Another critical part of my development during this stage was career expansion. After graduating from USF, I began working full-time within the child protective investigations division. During my classroom training period, I excelled. I received the outstanding achievement award at my class graduation, scored the highest grade on my state examination, and was chosen to lead my class in the role of class president. While I knew I was making a difference in this career, it was not what I was passionate about. I am still relatively young, and I knew I wanted to go back and pursue a master's degree soon in the future. Due to the lack of a solid schedule, little support from the agency, high caseload, and the overall nature of working in such a high-stakes job, I experienced burnout very quick. When I expressed that I had gotten into Liberty University online, I was essentially given an ultimatum- my degree or the job. I was told that due to the nature of my line of work, I could not be successful in both. Ultimately, I ended up quitting my child protective investigations job to pursue my education. This decision definitely was not an easy one, as I felt like I was letting myself down. I had to learn the important lesson of going after what I want with resilience.

The last important piece of my current development is the formation of meaningful and intimate relationships. In my early adolescence, and even the beginning years of late adolescence, I invested in partners who did not reciprocate the level of effort I did. I often felt as though I was settling. While my past relationships are not something I envy, I feel as though they taught me an important lesson on my self-worth. After being a part of toxic relationships and struggling to become the best version of myself, I discovered what I was capable of enduring. While it was not easy to leave those relationships in the past, I became stronger and set my standards higher. After much prayer, waiting, and spending time to work on myself, I met my now fiancé. During this period of

my life, I learned what a healthy relationship looks like and to be accepting of the fact that I deserve one.

Spiritual Development

One area that is often not mentioned is spiritual development, as it does not play a role in everyone's lives. For me however, my faith shaped a large part of who I am today. I grew up in the church community, so faith was never a foreign idea to me. From a young age, I was introduced to believing in something bigger than myself. Growing up, I was involved in youth groups and volunteering at the church. As I got older, I started to teach kids ministry and help out in various places during and after services. While I've had a constant belief throughout my life, my biggest growth period was during my college years. Because I was alone, I was able to finally find my own ground in my faith and take bold steps individually. My growing faith and love for Christ led me to many of the things I treasure in my life- my fiancé, my friends, and my education. Growing in my personal faith gave me the courage to apply to Liberty University. Embarking on this educational journey also challenges me to connect my faith to various subjects and take part in deeper reflections. Including the concept of spiritual development as an educational goal can liven the existing dry state of curriculum through sparking creativity, new thought patterns, imagination, wonder, and enlargement of an emotion (Moulin-Stožek, 2020).

Current Lifestyle and Behavior

Through the duration of this assignment, my development has been detailed from the beginning of my life up until the present day. Currently, there are several lifestyle behaviors that may influence my aging process. I take both my mental and physical health very seriously, so I always aim to take positive and preventive measures. The first application of this belief is physical exercise. I aim to exercise six days a week. I often try to engage in different workouts to train

different parts of my body and keep myself interested. I also try to go on a nature walk daily. While this moves my body, it also allows me to get more in tune with my thoughts and with nature. This ties in with my other practices that exercise my mind and my mental health. I am additament about taking time for myself through reading, journaling, and podcasts. By taking the time to invest in learning and expressing gratitude, I am bettering my future self.

While I try to keep myself healthy, there are also habits that do not benefit my future health, including my eating habits and frequent use of technology. While I do not consider my diet to be detrimental overall, I know I can eat healthier to help boost my body naturally. I tend to eat sweets and sugar, and this could affect my health once I am no longer able to move my body easily and freely at an older age. As for my use of technology, I have been trying to combat this issue by finding more hobbies outdoors and with other people. Both of these issues end up with me becoming stagnant in my physical and cognitive movement. Because I am mindful of these now, I am able to combat and actively prevent myself from aging in a negative way.

Conclusion

Overall, I have had a relatively normative development. Fortunately, I have not experienced any major occurrences that altered the direction of my life or impeded my development. While I faced challenges in different stages of my development, I was always able to find ways to demonstrate resiliency and overcome them. My development is unique to me, and I treasure being able to look back on my life thus far and see how each developmental stage impacted who I am. My physical, emotional, and spiritual well-being have all been influenced through exposure to my environment and the people around me. While it is known that these are leading factors in development, further study can explore why we choose to follow the lifestyle of certain people, but not others.

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