Teenagers Do Dumb Things, but There Are Ways to Limit Recklessness

Adolescence

By LISA DAMOUR  MARCH 8, 2017

By now parents are familiar with the worrisome finding that the thrill-seeking centers of the adolescent brain can readily outmatch the teenage brain’s emerging rational control systems.

I count myself among the adults who find this neurological account of adolescent recklessness to be both clarifying and confounding. It helpfully explains why really thoughtful teenagers sometimes do really dumb things. But experience tells us that some teenagers are much more impulsive than others, so it’s hard to imagine that all adolescents are equally at the mercy of their own gawky brains.

New research sheds light on the question of teenagers and self-control. A study of more than 5,000 adolescents and young adults from 11 countries across Africa, Asia, Europe and the Americas confirmed that adolescents worldwide have similarly risk-prone brains, but vary substantially in actual risk-taking.

Laurence Steinberg, the study’s lead author and a professor of psychology at Temple University, said that the findings, in the journal Developmental Science, suggest that “the context in which kids grow up must matter a great deal, and that adolescent recklessness isn’t the inevitable byproduct of the period’s biology.”
Dr. Steinberg and his colleagues demonstrated that sensation seeking — the yearning for excitement that can characterize adolescence — peaks around age 19 worldwide, and then declines with age. In contrast, self-regulation — the ability to quash an impulse — climbs in a gradual, linear trend until around ages 23 or 24, when it plateaus at adult levels. The fact that self-regulation lags behind sensation seeking helps explain consistent evidence that risk-taking spikes during the teenage years.

“But just because something is rooted in biology,” Dr. Steinberg notes, “doesn’t mean that it’s not malleable and that there’s nothing we can do about it.” As he adds, “even in China we are finding that adolescents are at a time of heightened sensation seeking, but they don’t engage in the high rates of drug use, unprotected sex and recklessness that we see in America and Western Europe.”

Adolescent risk-taking spans a stunning range across the globe. For example, only 2 percent of Indonesian teenagers report having tried alcohol in the last month, compared to roughly half of Argentine adolescents. Cultural mores and patterns of access to opportunities shape how teenagers push limits. Dr. Steinberg also suspects that the countries with the lowest rates of adolescent risk-taking “encourage self-control from a very early age and structure adolescence in a way that doesn’t give kids a lot of free, unstructured time to get into a lot of trouble.”

In contrast, Americans often celebrate adolescence as a spirited time of life when young people push boundaries, take chances and seek independence.

While many Americans see individual autonomy as a cherished aspect of our national identity, granting lots of freedom may not be the best way to keep teenagers safe. Graduated licensing laws in most states have effectively reduced the number of deaths and injuries in car crashes involving young drivers, and generally we see that the more supervision teenagers have, the less likely they are to come to harm.

For teenagers to find trouble, temptation must meet opportunity.

This argues for adults to regulate what teenagers do and to encourage them to look out for their own safety as well. In other work, Dr. Steinberg and the psychologist Margo Gardner demonstrated that adolescents are especially likely to
act recklessly when the rational centers of their brains come up against the kryptonite of socially or emotionally charged situations.

Even typically levelheaded teenagers can make foolish choices when they find themselves in unexpected situations: A sleepover at a friend’s house where someone has brought marijuana; a party where they discover that their ride home is no longer sober. Some parents may be reluctant to imagine their own children in dicey scenarios, but it can be helpful to talk them through a hypothetical dry run.

As Dr. Steinberg suggests, we should aim to “make the prudent behavior more automatic and less dependent on the teenager stepping back and thinking about it in the moment.”

Dr. Steinberg’s work demonstrates that teenagers sometimes make bad choices because their impulses override their controls. At other times, though, teenagers give real thought to their plans and still arrive at dangerous conclusions.

For example, a teenager without immediate access to a condom might weigh the chances of a pregnancy against the known benefits of having sex and decide to proceed without protection. An adult might conclude that it’s better to forgo intercourse than to risk an unwanted pregnancy.

Recently, Valerie Reyna, a professor of psychology at Cornell University and the psychologist Britain Mills of the University of Texas–Dallas found that adolescents can, indeed, be taught to think about their choices in basic and pragmatic ways. Dr. Reyna compared the effects of a standard sexual education program to one that additionally emphasized the crux of sexual choices by noting that “it only takes once” to contract a sexually transmitted infection and that, sooner or later, unprotected sex usually leads to pregnancy. Those teenagers who participated in the intervention highlighting the bottom line went on to take fewer sexual risks than teenagers in the standard program.

“Once you change how a person thinks about a decision,” says Dr. Reyna, “that’s a lasting change. It’s hard to undo an insight.”
All the same, Dr. Reyna notes that adolescents need frequent reminders of clear rules for decision-making — or bright lines — and adults who can help convey the same message in different ways. On some days in my own practice with adolescents I say, “Don’t focus on whether you could get caught — you probably won’t. Focus on whether you could get hurt.” On other days I point out that, “when the adults are around, we help to keep you safe. When we’re not around, staying safe is entirely your job.”

Dr. Steinberg agrees that, with teenagers, “sometimes you have to say the same thing six times before it works.” Frustrating as this may be, his close look at the psychological development of teenagers around the world reminds us to resist the temptation to “write adolescent risk-taking off as something we can’t do anything about.”

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