

HAEDSS

לקיחת אנמנזה מהמתבגר
והמודל הביופסיכוסוציאלי

ד"ר טל שניר מרפאת מתבגרים ב"דנה דואק"
המרכז הרפואי תל אביב

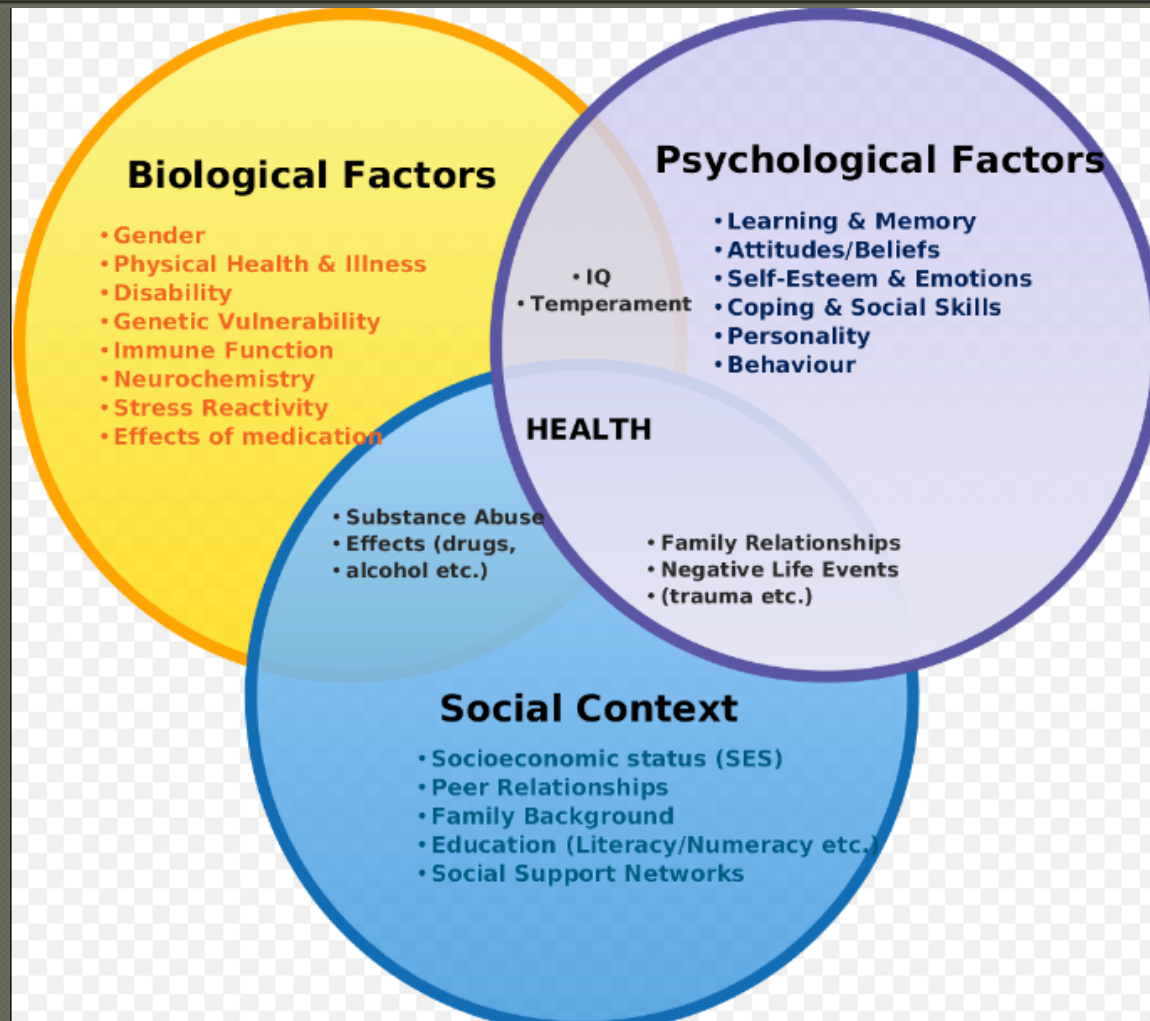
“Our world has reached a critical stage: our children no longer listen to their elders. The end of the world is not far ...”

Aegyptian priest 2000 Av. J.-C.

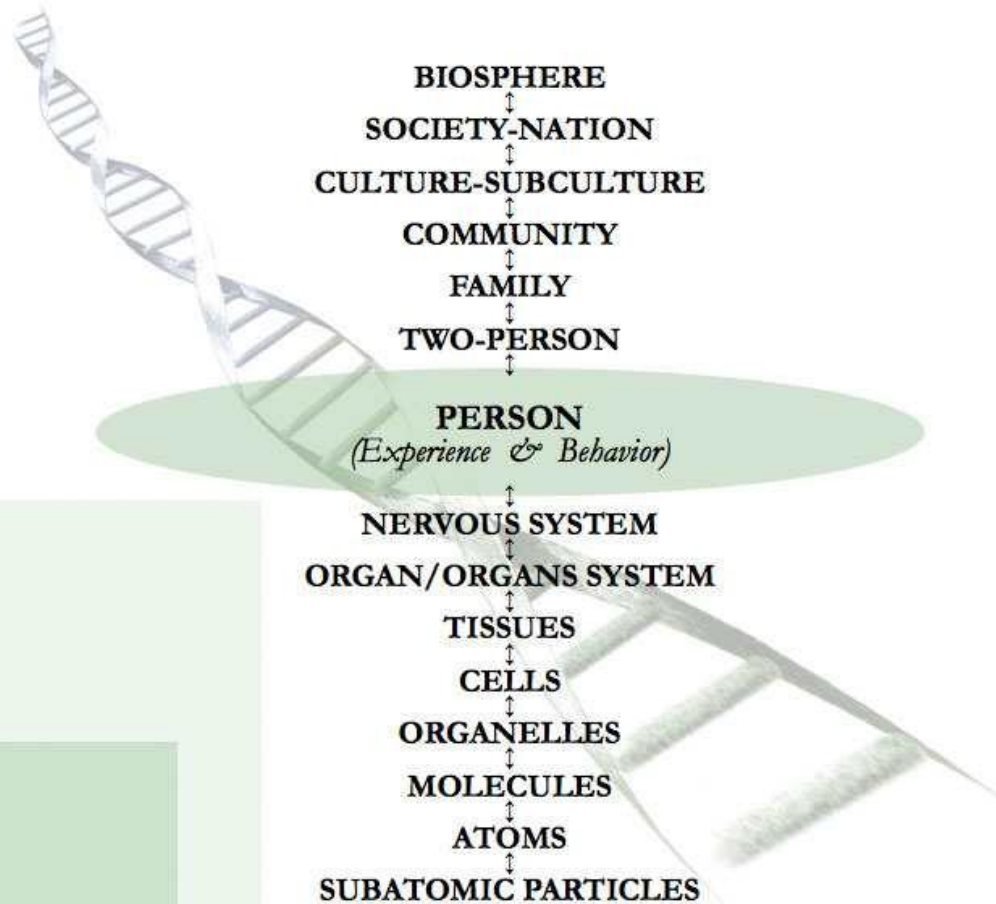
“The son feels he is equal to his father. He does not respect his parents anymore. What he wants is to be free. The pupils insult their teachers. And , as the height of this horrific situation, in the name of liberty and equality, sex

everywhere !”
Platon, the Republic

המודל הביופסיכוסוציאלי



HIERARCHY OF NATURAL SYSTEMS



Adolescent bio-psychosocial development

WHO/ CAH orientation program:

	Early Adolescence 10-13/14 yrs	Middle Adolescence 13-17 yrs	Late Adolescence 17-20 yrs
Biology	Puberty maturation Secondary sexual characteristics developed at end of period	Body composition develops towards adults characteristics Bio-chemical development Body shape	Adult body look and composition
Psychology	Abstract cognitive thinking accelerates. Hypotheses, analyses, fantasies and dreams Omnipotence and invulnerability Intense emotions	Still mainly driven by emotions Somewhat better time perspectives, a week or a month	Inhibitory brain areas growing. Able to resist some impulses and think ahead The future becomes real. Long term planning possible. Self criticism. Desperation and hopelessness common when reality dawns
Social arenas	Discussions, argumentation, particularly with parents. Revolting against parents, mainly verbally Peers more important	Who am I? Am I OK? Trying out different social groups often simultaneously Peers are main concern Dating and sex	Content of intimate relationship becomes important. Realistic vocational planning. Concern with outcome of chronic illness. Looks for support, information and advice in an adult way

2008-07-02

Summer school 2008 KBK

Stages of Adolescent Development

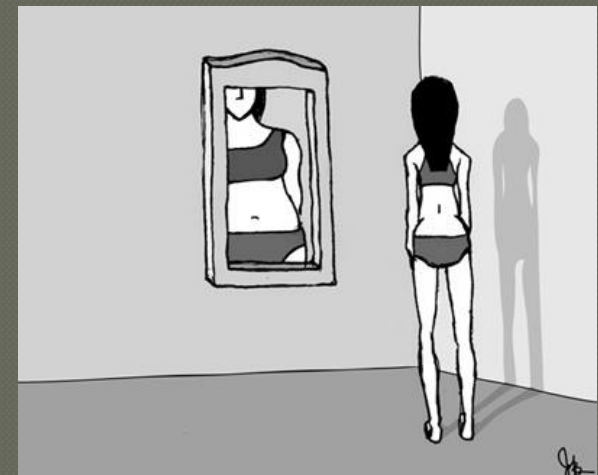
Stages of Adolescence	Physical Development	Cognitive Development	Social-Emotional Development
<p style="text-align: center;">Early Adolescence</p> <p style="text-align: center;">Approximately 11 – 13 years of age</p>	<ul style="list-style-type: none"> • Puberty: grow body hair, increase perspiration and oil production in hair and skin, Girls – breast and hip development, onset of menstruation Boys – growth in testicles and penis, wet dreams, deepening of voice • Tremendous physical growth: gain height and weight • Greater sexual interest 	<ul style="list-style-type: none"> • Growing capacity for abstract thought • Mostly interested in present with limited thought to the future • Intellectual interests expand and become more important • Deeper moral thinking 	<ul style="list-style-type: none"> • Struggle with sense of identity • Feel awkward about one's self and one's body; worry about being normal • Realize that parents are not perfect; increased conflict with parents • Increased influence of peer group • Desire for independence • Tendency to return to "childish" behavior, particularly when stressed • Moodiness • Rule- and limit-testing • Greater interest in privacy
<p style="text-align: center;">Middle Adolescence</p> <p style="text-align: center;">Approximately 14 – 18 years of age</p>	<ul style="list-style-type: none"> • Puberty is completed • Physical growth slows for girls, continues for boys 	<ul style="list-style-type: none"> • Continued growth of capacity for abstract thought • Greater capacity for setting goals • Interest in moral reasoning • Thinking about the meaning of life 	<ul style="list-style-type: none"> • Intense self-involvement, changing between high expectations and poor self-concept • Continued adjustment to changing body, worries about being normal • Tendency to distance selves from parents, continued drive for independence • Driven to make friends and greater reliance on them, popularity can be an important issue • Feelings of love and passion
<p style="text-align: center;">Late Adolescence</p> <p style="text-align: center;">Approximately 19 – 21 years of age</p>	<ul style="list-style-type: none"> • Young women, typically, are fully developed • Young men continue to gain height, weight, muscle mass, and body hair 	<ul style="list-style-type: none"> • Ability to think ideas through • Ability to delay gratification • Examination of inner experiences • Increased concern for future • Continued interest in moral reasoning 	<ul style="list-style-type: none"> • Firmer sense of identity • Increased emotional stability • Increased concern for others • Increased independence and self-reliance • Peer relationships remain important • Development of more serious relationships • Social and cultural traditions regain some of their importance

שלבים בגיל ההתבגרות

Stage	Stage of thinking	Main tasks	Behavior
Early (11-14 years old)	Concrete, operational; limited abstract abilities; high emotional component; imaginary thinking; sense of omnipotence; egocentric	Biological changes of puberty; body image: "Am I normal?"	Competing motivations usurp higher-order thinking skills; require increased adult guidance; may treat parents/adults with disdain; increased need for privacy (Ill teens may revert to childlike behavior)
Middle (15-17 years old)	Abstract thinking develops; broader perspective but still egocentric; more discriminating decision making; increased creativity	Sexuality, autonomy, and gender identity; peer relationships; exploration; physical attractiveness	Prefers friends to family; unique subculture of appearance and communication style; increased ability to plan for future, with concordant increase in risk behaviors (Ill teens may revert to early adolescent behavior, experience depression)
Late (18-22 years old)	Abstract/critical thinking resembling adult abilities; introspection; level of cognitive thought varies with training and practice	Consolidation of identity, individuality, intimacy, and autonomy; direct entry into workforce (vs college) hastens process	Relationships are mutual; skepticism develops; enjoys critical examination and debate; personality composite of experiences (Ill teens may have decreased self-esteem associated with compromised body integrity; independence and gender role are threatened)

מאפייני תחלואה ותמותה בגיל

ההתבגרות:



מה אומר החוק:

- עד לקביעת הסדר חקיקתי בעניין זה, אנו נזקקים לאנלוגיה מסעיף 6 לחוק הכשרות המשפטית הקובע כי "פעולה משפטית של קטין שדרכם של קטינים בגילו לעשות כמוה... אינה ניתנת לביטול... אף שנעשתה שלא בהסכמת נציגו, אלא אם היה בה משום נזק של ממש לקטין או לרכושו.

● "סעיף זה מכשיר פעולות משפטיות של קטינים, אשר המציאות מלמדת שדרכם של קטינים לבצען בגפם.

● דא עקא, שהסעיף קובע מפורשות, כי החריג לכלל אינו חל, אם היה בפעולה משום "נזק של ממש לקטין", והרי טיפול רפואי עלול לגרום בפוטנציה נזק לקטין.

המתבגר

עמרי
בן 13

אנו שמחים להזמין אתכם לחגיגת
בד המצווה של עמרי
האירוע יתקיים ביום ו'
ב"ג תשרי תשע"ח
5/10/07
בשעה 12:00
ב"זילה נוד"ח חתוב מגשימים (מע"ב מפה)
מומלץ להצטייד בבגדי ים.
העליזה לתודה ותקיים ביום טוב,
ב"ד תשרי תשע"ח, 5/10/07
בשעה 8:30 בבית הנסות
בד"ח בדולא 46, תנונית "ל", תל אביב.
נשמח לראותכם
עמרי, קורל, הילה ושי הלפרין



רוצה
לצאת איתי
לדייט הלילה?

לחץ כאן



- צעיר : 10-14 חשיבה קונקרטיית תלות בהורים.
- ביניים : 14-17 חשיבה יותר מופשטת, התנהגות סיכון, החלטות בקשר למצבו הבריאותי הנכחי.
- מאוחרת : 17-20 השלכות לעתיד.

סודיות



CONFIDENTIAL

הכנה לראיון

- סודיות רפואית.
- יש להוציא את ההורים מהחדר בשלב מוקדם.
- מערכת ערכים/ אמונה.
- השערות.



הראיון



- הצג את עצמך.
- הסבר והצהרה על סודיות רפואית.
- שאלות פתוחות מותאמות לגיל ולהבנה.

Table 112-5 HEADS/SF/FIRST

Home. Space, privacy, frequent geographic moves, neighborhood.
Education/School. Frequent school changes, repetition of a grade/ in each subject, teachers' reports, vocational goals, after-school educational clubs (language, speech, math, etc.), learning disabilities
Abuse. Physical, sexual, emotional, verbal abuse; parental discipline
Drugs. Tobacco, alcohol, marijuana, inhalants, "club drugs," "rave" parties, others. Drug of choice, age at initiation, frequency, mode of intake, rituals, alone or with peers, quit methods, and number of attempts
Safety. Seat belts, helmets, sports safety measures, hazardous activities, driving while intoxicated
Sexuality/Sexual Identity. Reproductive health (use of contraceptives, presence of sexually transmitted infections, feelings, pregnancy)
Family and Friends. Family: Family constellation, genogram, single/ married/separated/divorced/blended family, family occupations and shifts; history of addiction in 1st- and 2nd-degree relatives, parental attitude toward alcohol and drugs, parental rules; chronically ill physically or mentally challenged parent. Friends: peer cliques and configuration ("preppies," "jocks," "nerds," "computer geeks," cheerleaders), gang or cult affiliation
Image. Height and weight perceptions, body musculature and physique, appearance (including dress, jewelry, tattoos, body piercing as fashion trends or other statement)
Recreation. Sleep, exercise, organized or unstructured sports, recreational activities (television, video games, computer games, Internet and chat rooms, church or community youth group activities [e.g., Boy/Girl Scouts; Big Brother/Sister groups, campus groups]). How many hours per day, days per week involved?
Spirituality and Connectedness. Use HOPE* or FICA ¹ acronym; adherence, rituals, occult practices, community service or involvement
Threats and Violence. Self-harm or harm to others, running away, cruelty to animals, guns, fights, arrests, stealing, fire setting, fights in school

Home





E-Education

משרה התייעך, בית הספר התיכון "ע" ירושלים

תעודת בגרות

הבגרות: 2010
 סיסטם: את חוק לימודיו: בבית הספר בשנת הלימודים (1980)
 כותב הש"ו: במסגרת צדף מקצועות
 עמדות: כתיבת של משרה התייעך והתבונן במקצועות דלהן
 והשיגה את הנושם האלה.

היקף	חל לימוד	הקצנה
8..... 310	4	תג"ך וספרות
8..... 310	2	הנעה עברית
10..... 11150	5	אנגלית
10..... 11150	3	ערבית
10..... 11150	5	מחשבים
7..... 310	1	אורחות
8..... 310	2	הולדת עם ישראל



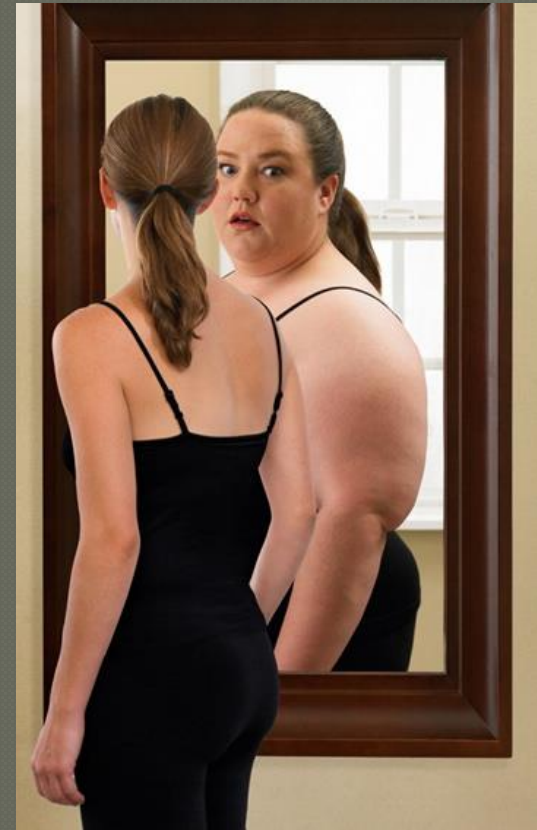


WhatsApp

D- Drugs

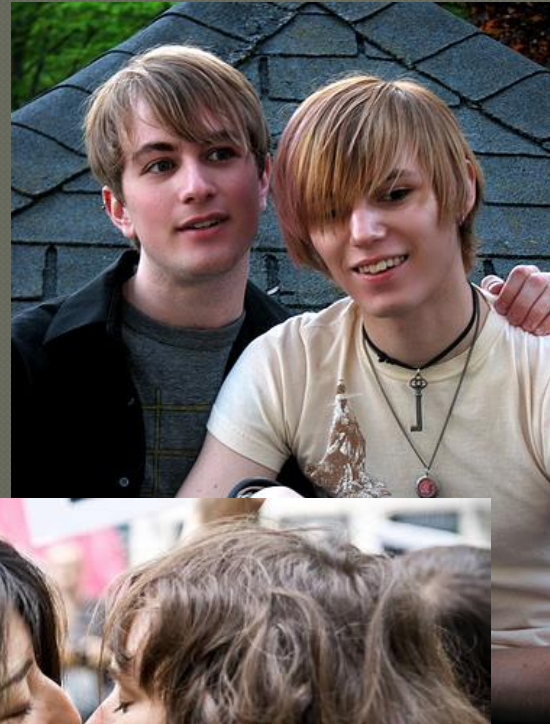


Body Image

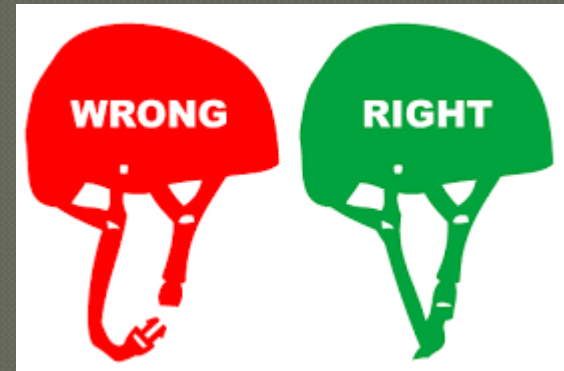




S- Sex



Safety





SUICIDE

It's the only way out.

יכום

סיכום הראיון

● המתבגר מסכם במילים שלו.

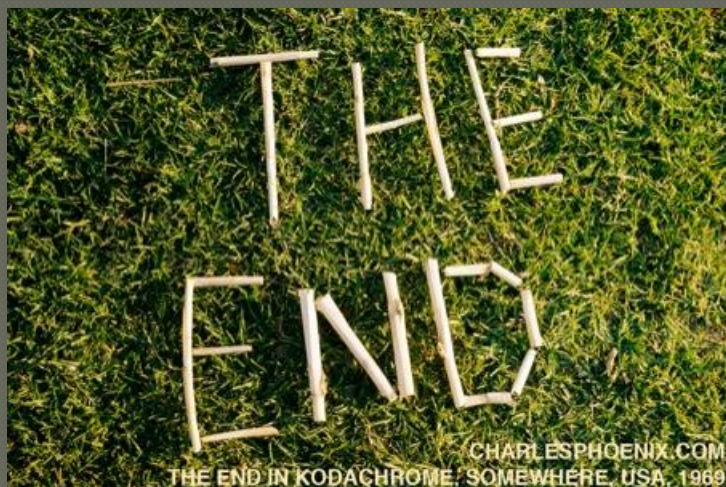
● יש לשאול במי בוטחים עם מי מרגישים נוח לשתף?

● האם יש בעיות נוספות?

● סיכום שלך לגבי נושאים בעיתיים.

● יש להדגיש נקודות חיוביות ואם הכול בסדר לציין.

● לספק מקורות אינפורמציה.



דרי טל שניר

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