

PART - The Developmental Model

From the perspective of human development, violence can be seen as a function of age. Younger people are more likely to be "violent" than older people. They can be expected to express violence more frequently due to the physical maturation process. Further, social norms permit violent expression in children without drastic consequence.

The importance of this perspective lies in the frequently observed disparity between chronological and developmental age among persons with a history of impulsive and explosive behaviour. Their developmental level is almost invariably lower than would be appropriate for their chronological age in several key areas of functioning.

In the normal process of growth/maturing, children gradually develop their ability to stop their impulsive and violently explosive behaviour. This maturing process continues through adulthood, and the ability to stop explosive outbursts continues to develop until it is almost a habit. In developmentally "normal" persons, by middle age the habit is so strong that they begin to wonder what young people find to get so excited and explosive about. In fact, healthy elderly people may develop cautiousness and avoidance of risk taking in an effort to keep themselves safe.

The normal development of the ability to stop (inhibit) explosive outbursts can be shown by the following:

Pre-school age children: Children in this age group typically have little ability to control their explosive outbursts. They are easily provoked into hitting, kicking, throwing, scratching and biting over relatively simple issues such as sharing toys and territory, hearing the word "no", etc. Sometimes very young children are provoked by physical/environmental conditions such as being hungry or cold.

Early elementary age children: Children in this age group have usually developed enough control to be able to avoid biting other children or hitting them with objects during explosive outbursts. However, issues such as friendship/peer interactions, possessions, playground games and forming lines can cause impulsive pushing, shoving, hitting, etc. Sometimes violent expression is used to gain the attention of adults. Children in this age group who have hyperactive tendencies are likely to become more violent.

Late elementary age children: Children in this age group can usually delay their impulses to fight until they can find a time and place that prevents adult intervention. Since the delay often serves to defuse the issue, fighting is much less frequent than in the younger age groups. When they do fight they usually confine their assaults to the lower risk areas of the body such as the shoulders and ribs. In this age group, social conditioning results in a marked difference in ability to inhibit violent impulses between boys and girls, with girls showing higher ability. Fights at this age tend to revolve around issues of individual and family pride, friendship, cultural and ethnic heritage, "club" initiations and other forms of seeking peer group acceptance, name calling, etc.

Early adolescents: Children in this age group provoke adults intentionally, resulting in very high teacher turnover in the junior high grades. Children of this age often turn their attention from their peers to adults, attempting to influence adults, "drive them crazy", thwart authority and test their own abilities. Fighting among peers and between rival groups is not uncommon. Inexperience and poor judgement sometimes lead youth in this age group to pick a fight with someone who may hurt them badly, or to injure people they fight with more seriously than they planned.





Late adolescents: Young people in this age group are able to channel most of their violently destructive impulses into various sorts of competition, in either "legitimate" forms, such as sports, or in less legitimate forms, such as gang membership. Male-female relationships often provoke violent incidents (fighting over a girlfriend, making suicidal gestures over a lost love). Peer pressure may also prompt violence. The pressures of adolescent pregnancy and early parenthood often lead to child abuse. Long-term drug and alcohol abuse has begun to take a toll on this age group.

Young adults: People in this age group have developed their inhibitory ability to a point where they rarely express themselves impulsively or explosively outside of a small circle of family or friends. Isolated incidents of assault can be provoked in this group by professional sports events and bar behaviours. Drug and alcohol abuse make it difficult to inhibit violent behaviour. Most men convicted of rape and other violent crimes are in this age group, as are most parents (male and female) who are convicted of physically abusing their children.

Middle-aged adults: By middle age people rarely have physical fights. When their inhibitions break down it is often over domestic matters such as, adultery, damage or perceived threat to major lifetime acquisitions (homes, cars, etc.), property violations, job loss, alcoholism, etc.

Elderly adults: Healthy elderly people typically avoid situations that may lead to violence altogether. However, physical and mental impairments may produce the inability to inhibit impulsive violent expression. Issues of territory, space and loss of independence may provoke strong emotional responses.

Can you think of someone with whom you are currently working who demonstrates a difference between his/her chronological and developmental stage? **Do not use real names for confidentiality purposes**.

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How old is this person?
What does this person do that leads you to believe they are functioning at a lower developmental age?
At what stage in the Developmental Model is this individual acting?
Think about a time that you may have embarrassed yourself with your behaviour. Think about any time in your life, where you may have behaved in a way that did not match with your age.
source: Professional Assault Response Training (PART) program [©]

Safety Talk Discussion

Be Accountable: Choose safety - work safe - and go home injury free!