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**Mapping the adolescent landscape: an enriched
account of adolescence**

This thesis is submitted in partial fulfilment of the requirements for the degree of Doctor of Philosophy.

Submitted: September 2018

I declare the word length of this thesis is 79,411 and that this thesis does not exceed the permitted maximum word length.

I declare that the thesis is my own work, and has not been submitted in substantially the same form for the award of a higher degree elsewhere.

Signed:

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Dedications:

This thesis is dedicated to my long-suffering Mum and Dad who managed to parent me (and still do!) with love and a sense of humour. I also dedicate this work to my sons, Patrick, Daniel, and Charlie who have inspired me to think about what 'growing up' is, and without whom I would not have made this work.

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PhD Philosophy (Submitted: September 2018)

Abstract

The aim is to make a start on developing a comprehensive and integrated account of the adolescent transition, and to use this to articulate changes in adolescents' relationships with their parents, and with institutions and the state. The thesis builds on existing work on the adolescent transition to offer an enriched map of the adolescent landscape. I argue that extant accounts over-simplify what is a highly complex period. I develop a gradualist multi-sphere model based on the many spheres of activity that open up to adolescents during the adolescent transition. Each sphere is associative and involves a range of responsibilities, powers, and rights. Negotiation of each sphere requires various skills, capacities, and knowledge, some of which are sphere-specific, others which are useful across several spheres of activity. Relationships are of central importance to understanding changes in adolescent status. To develop the relevant skills and competences needed to participate in each sphere requires practise and experience, and successful negotiation of new spheres requires familiarisation. Parents can facilitate the right kind of familiarisation and practise within spheres by mediating children's relationships with institutions and organisations, but then must allow adolescents to negotiate these relationships when they are able to. Existing legislation reflects an underlying commitment to sphere-based gradualism. The sphere-model provides an integrated account of the adolescent transition that can make sense of gradual changes in status as adolescents mature at both an informal or social level, and at a more formal legislative level.

ABSTRACT	3
INTRODUCTION	6
METHODOLOGY	9
PART 1: THE PROBLEM OF ADOLESCENCE	13
CHAPTER 1: WHY ADOLESCENCE?	16
1.1 A PHILOSOPHICAL STARTING POINT	17
1.1a <i>A conception of adolescence</i>	20
1.2 WHAT IS ADOLESCENCE LIKE?	27
1.2a <i>Key themes</i>	31
Transition and ‘developmental tasks’	32
Changing relationships	36
Freedom and responsibility	42
IN SUMMARY	49
CHAPTER 2: USING CHILDREN’S RIGHTS AS A STARTING POINT	53
2.1 IDEAS ABOUT CHILDREN	53
2.1a <i>Parents and children</i>	55
2.2 CHILDREN’S RIGHTS: SOME APPROACHES AND SOME AGREEMENT	60
2.2a <i>Should children have rights?</i>	61
Alternatives to right-based approaches	65
2.2b <i>What are children’s rights like?</i>	68
2.3 TWO IMPORTANT CONSIDERATIONS FOR MOVING FORWARD	77
2.3a <i>Relevant capacities</i>	78
2.3b <i>Experience of agency</i>	81
IN SUMMARY	82
PART 2: ARTICULATING A SPHERE-BASED MODEL OF DEVELOPMENT	85
CHAPTER 3: A ‘SPHERE-MODEL’ OF DEVELOPMENT	88
3.1 WALZER’S ART OF SEPARATION AND ITS IMPLICATIONS FOR RIGHTS	89
3.2 THE SPHERE-MODEL AND ADOLESCENCE	95
3.2a <i>Mapping the normative shape of adolescence</i>	95
3.2b <i>What makes the sphere-model successful: a summary</i>	101
3.3 AGENCY ON THE SPHERE-MODEL	104
3.3a <i>An account of autonomy</i>	104
3.3b <i>A ‘Relational’ account of agency and the sphere-model</i>	110
IN SUMMARY	116
CHAPTER 4: MAKING SENSE OF GRADUALISM	118
4.1 A PRELIMINARY NOTE ON THE SHAPE OF ADOLESCENCE	120
4.2 REJECTING RIGHTS GRADUALISM	121
4.2a <i>A case study: privacy and trust</i>	124
Reasons to reject rights gradualism	127
Limitations and findings	133
4.3 SPHERE-BASED GRADUALISM	134
4.3a <i>Parametric development</i>	135
4.3b <i>Developing capacities</i>	138
4.3c <i>Changes in authority and responsibility</i>	139
4.4 FITTING RIGHTS BACK IN TO THE PICTURE	146
4.4a <i>Rights in relationships</i>	146
4.4b <i>Rights and agency</i>	148
IN SUMMARY	152
CHAPTER 5: TRANSITIONAL PATERNALISM: PARENTAL INVOLVEMENT IN ADOLESCENT LIVES	154
5.1 DEVELOPING AGENCY AND THE PROBLEM OF PATERNALISM	156
5.1a <i>Justifying paternalism</i>	157

5.1b <i>When paternalism is a problem</i>	160
5.2 TRANSITIONAL PATERNALISM AND THE SPHERE-MODEL	163
5.2a <i>Fostering agency using transitional paternalism</i>	165
5.2c <i>Adolescents as 'learner drivers'</i>	172
5.3 PARENTAL INVOLVEMENT AND CHANGING ROLES	177
5.3a <i>Offering 'real' choices</i>	179
5.3b <i>Balancing duties and sharing responsibilities</i>	182
5.3c <i>Respecting adolescents as agents</i>	187
IN SUMMARY	196
PART 3: APPLYING SPHERE-BASED GRADUALISM	198
CHAPTER 6: LEGISLATION, THE SPHERE-MODEL AND ADOLESCENT PARTICIPATION	201
6.1 LEGISLATION, STATE INTERESTS AND DUTIES	205
6.1a <i>Setting thresholds and dealing with individual variation</i>	207
6.2 LEGISLATING FOR GRADUALISM AND TRANSITIONAL PATERNALISM	214
6.3 USING TRANSITIONAL PATERNALISM IN THE MEDICAL SPHERE	222
6.3a <i>Adolescents in the medical sphere</i>	222
6.3b <i>'Granting liberty' and 'preserving life chances'</i>	225
6.3c <i>Medical decision-making: asymmetry in consent and refusal</i>	228
IN SUMMARY	235
CHAPTER 7: FOCUSING ON AGENCY TO SUPPORT TRANSITIONS INTO ADULthood	237
7.1 AGENCY, DISADVANTAGE, AND OPPORTUNITY.....	238
7.1a <i>The role of the state</i>	241
7.2 A CASE STUDY: FOCUSING ON AGENCY TO SUPPORT HEALTH	244
7.2a <i>Health disadvantage and agency</i>	245
7.2b <i>Using the education sphere to address inter-familial disadvantage</i>	252
Why not the domestic sphere?.....	253
Why choose education?	257
7.2c <i>Educating for transferable 'life skills'</i>	261
7.2d <i>Effective use of school and alternative approaches</i>	267
A school-based approach	267
Community-based initiatives	272
7.3 SUPPORTING ADOLESCENT TRANSITIONS: REFLECTING ON THE EVIDENCE	277
IN SUMMARY	280
CONCLUSION	282
BIBLIOGRAPHY.....	288

Introduction

The purpose of the thesis is to map the complex landscape of adolescence, to make a start on developing a comprehensive and integrated account of the adolescent transition. As things stand, there is interest in adolescence and some work has been done to begin building a map of the terrain.

First, there is existing literature that focuses, in the main, on children's rights. This is useful work, but it is incomplete and limited in its scope. Rights are certainly part of the picture. However, to extend the map metaphor, thinking about the adolescent transition primarily in terms of the acquisition of rights is to mark on the map only some of the key landmarks. There are many developmental features missing from this limited analysis and, in particular, a good deal of the detail that connects the key landmarks is absent.

Second, there has been useful work within particular areas, filling in specific parts of the map. These are, in particular, areas of ethical enquiry such as medical consent and criminal responsibility. In medical consent, for example, there has been a focus on adolescent autonomy. This has added detail in addition to rights. In criminal responsibility, the discussion is sometimes framed in terms of autonomy, but more likely is framed in terms of responsibility. Again, this work should not be rejected per se, but rather the question should be asked: how do we connect these spheres of activity up? How can we bring these areas of the map together to make sense of the adolescent landscape as a whole? During adolescence, movement into

new spheres increases and identifying what each sphere consists in and how they are connected to one another is important to mapping the adolescent landscape.

Third, much of what has been written to try and make sense of the connection between the various landmarks provided in terms of adolescent moral and legal rights is framed in terms of changes in competence or capacity. In order to acquire and exercise certain rights, the adolescent has to have a particular type and level of competence. Currently, the relationships that are depicted between capacities and rights are too simple to be illustrative of real-life adolescent transitions. In terms of our map metaphor, we could think of these as the roads that connect one landmark to another. However, there is so much variety between different adolescent experiences and within a single adolescent's experience of the different spheres of life that cannot be captured by simple interactions between having capacity and bearing rights. Transitions can be fast or slow, direct or indirect, incomplete, or lacking altogether, and this can vary between the different spheres or areas of a person's life. Furthermore, there are complex interactions between adolescents and others that mean that formal rights that adolescents acquire may be ineffective or not respected, depending on the type and quality of the relationships they have with family members, institutions and with organisations. Thinking about powers rather than rights is more illuminating, and less abstract, and takes into account the role that others play in making those powers effective. In fact, there are complex connections between powers, rights, responsibilities, autonomy, competence, relationships, epistemological considerations, and development that a comprehensive map of adolescence needs to document.

Outside philosophy, some disciplines are providing topographic detail that until now has not been given due attention by philosophy. There is relevant research in developmental psychology and sociology that is useful for filling out some of the details of the map. One of the key changes in the lives of adolescents is a change in the relationships that they have. There might be changes in the existing relationships that adolescents have, for example their relationships with parents and peers. Adolescents also have to forge new relationships, particularly with institutions and the state, as they mature. Other research tells us more about the kinds of activities that adolescents are engaged in and how they interact within their particular social conditions. Adolescents are dealing with issues of peer-pressure and fitting in, they are developing their own sense of identity, are more likely to interact on social media than adults, are exposed to more advertising and consume differently to both adults and children, are less likely to spend time in the parental home than their younger counterparts, and are facing a host of contemporary challenges, many of which they work out for themselves, without parents. These findings from outside philosophy are important considerations for developing a more accurate map of the adolescent landscape.

My intention is to enrich the existing map of adolescence to provide orientation for future research. I have split this work into three parts. Part one is dedicated to setting out the problem, identifying what the task involves, and outlining what the existing map consists in. Part two focuses on developing a theoretical framework based on multiple spheres of activity that is suitable for capturing the complexity of the adolescent transition and for analysing the changes in adolescent relationships. The work in part two is focused on changes in

interpersonal relationships, in particular between adolescents and their parents. Part three turns to the more impersonal relationships that adolescents have with institutions and the state. In many cases, there has been no prior relationship where institutions and the state are concerned, except when a prior relationship has been facilitated or mediated by parents. The sphere-model that I develop, and that gives shape to the map that I devise, underpins my analysis and provides an integrated framework for understanding adolescence.

Methodology

This is a work of applied philosophy; that is, I am applying philosophy to questions relating to adolescence. There are different ways of thinking about what applied philosophy is. In this definition, Archard focuses on influence and application:

[I]t seeks to address real and pressing contemporary matters that interest, concern, trouble, and puzzle non-philosophers (or ought to do so); and to manage this in a manner that combines philosophical rigor with argumentative reach beyond the confines of the academic subject.¹

This account captures what I see as the fundamental characteristics of both the object and methodology of this enquiry. I am doing philosophy in that I am looking to undertake a careful analysis of problems and concepts and construct clear arguments with conclusions that follow from premises. I hope that this philosophical

¹ Archard, D. (2017), 'The Methodology of Applied Philosophy' in Lippert-Rasmussen, K., Brownlee, K. & Coady, D. (eds.) *A Companion to Applied Philosophy*. Chichester, UK: John Wiley & Sons Ltd., pp.18-33. p.31.

enquiry casts some light on questions that have, until now, been in the domain of social scientists, psychologists, and neuroscientists. The work I present discusses the relationships that adolescents have with other individuals and the state, and the roles, rights and responsibilities that characterise those relationships. The result, therefore, might more specifically be categorised as a work of applied ethics, at least on the definition offered by Shelly Kagan, who defines applied ethics broadly enough to include applied political philosophy.²

I take it that I am also applying philosophy, at least to some degree, by ‘carefully identifying the relevant empirical facts of the matter and then feeding them into the relevant principles’.³ Kasper Lippert-Rasmussen writes:

To clarify non-philosophical debates by making philosophical assumptions underpinning those [public and quasi-public] debates explicit is to do empirically informed applied philosophy even if the aim is not so much to clarify philosophical questions as to oppose non-philosophical ones.⁴

Indeed, the type of puzzles that are of interest to this thesis are, by their nature, applicable to real life, and it seems sensible that such questions are informed by relevant facts. My work has, to some degree, an ‘essentially interdisciplinary nature.’⁵

I will be using empirical facts about biological and social development to help answer

² Kagan, S. (1998) *Normative Ethics*. Boulder, CO: Westview, pp.3-4. He writes that ‘political philosophy can legitimately be viewed ... as one (vitaly important) branch of applied ethics – one devoted to problems about the justification of the state, the use of power, and the merits of alternative forms of government.’

³ Lippert-Rasmussen, K. (2017) ‘The Nature of Applied Philosophy’ in Lippert-Rasmussen, K., Brownlee, K. & Coady, D. (eds.) *A Companion to Applied Philosophy*. Chichester, UK: John Wiley & Sons Ltd., pp.3-17. p.4.

⁴ *Ibid.*, p.14.

⁵ Stevenson, L. (1970) ‘Applied Philosophy. *Metaphilosophy*. Vol.1, no.3, pp. 258– 267.

philosophical questions about whether or not a perspicuous line can be drawn between the status of children and the status of adults, and questions about what exactly is owed to children and adolescents.

On the *empirical facts conception*, 'Philosophy is applied if, and only if, it is significantly informed by empirical evidence – in particular, that provided by empirical sciences.'⁶ The methodological importance of this evidence sets this type of applied work aside from non-applied philosophy. My exploration of development and adolescence is empirically informed and the important role that real-life context plays in the development of this thesis means it is consonant with, what might be termed, a 'bottom-up' model of enquiry, and contrasted to the so-called 'top-down' model of doing applied philosophy. On the top-down view, the implications of pre-established non-contingent principles are explored, with a view to establishing a position on a specific point of interest. Though this thesis engages with some of 'top-down' literature (on children's rights, for example), and is informed by pre-established ideas such as fairness, the top-down model is not useful in describing my methodology. Contrasting bottom-up models might be described in the following way:

the philosopher starts from a specific domain, or set of circumstances, or case; she acquires a proper and informed appreciation of it, and develops the relevant philosophical judgment, understanding, or evaluation.⁷

⁶ Lippert-Rasmussen (2017) p.12.

⁷ Archard (2017), p24.

Along these lines, I am concerned with how real-life experience and recent empirical research informs principles and accept that basic, non-contingent principles might be adapted, or rejected entirely, when we consider the implications of them in real life, though my own aims are not so lofty as to be revisionary in their scope.⁸ There is a lack of agreement about what counts as applied philosophy, what applied philosophy ought to be aimed at, and how to execute applied philosophy. Nevertheless, I am happy to categorise this work as applied philosophy in that my work includes all of the features that I have described above, to a greater or lesser degree, depending on the topic, section, evidence, and aim.

Specifically, my methodology falls under the heading of what Lucy Frith calls 'symbiotic empirical ethics'.⁹ Frith develops this practical research methodology to include findings from social science and practice in ethical thinking and debate. She writes, 'practice is important to help formulate and reformulate our ethical theories and to ensure that they are nuanced and appropriate for the problems they are supposed to address.'¹⁰ Frith's methodology consists in the following: 'setting out circumstances; specifying theories and principles; using ethical theory as a tool of analysis; theory building; and, finally, making normative judgements.'¹¹ She writes that this methodology,

⁸ See Archard, D. (2009) 'Applying Philosophy: A Response to O'Neill,' *Journal of Applied Philosophy*. Vol.26, no.3, pp.238-244. Archard states, 'Sometimes it is a question of uncovering and making precise common sense moral commitments; at other times the project may be a more revisionist one of displaying the inadequacy of orthodox moral theory.'

⁹ Frith, L. (2012) 'Symbiotic empirical ethics: a Practical Methodology,' *Bioethics*. Vol.26, no.4, pp.198-206.

¹⁰ *Ibid.*, p.199.

¹¹ *Ibid.*, p.201.

... concentrates on how data will be analysed, develops ethical theory and generates normative conclusions ... could be applied to any area of research to address a wide range of issues problems ... [and] can highlight new ethical problems and develop more nuanced moral norms and ethical theories to deal with the conflicts and issues that arise in practical settings.¹²

For Frith, 'The importance of the particular circumstances in which the ethical decision takes place are more fully recognized and the empirical contingencies of life are not seen as separate from the ethical enterprise.'¹³ She describes her approach as 'a practical methodology for integrating theory and practice that can be used in empirical studies, one that uses ethical theory both to explore the data and to draw normative conclusions.'¹⁴ As opposed to applying pre-established principles in a top-down fashion, Frith is interested in a kind of ethical naturalism, where ethical theory is based in experience.¹⁵ For these reasons my work fits with Frith's methodology.

Part 1: The problem of adolescence

The first part of this thesis is split into two chapters. Chapter one introduces the concept of adolescence. Adolescence is philosophically interesting and problematic, because it is both under-explored, and borders two more established areas of

¹² Ibid.

¹³ Ibid., p.199.

¹⁴ Ibid.

¹⁵ See Parker, M. (2009) 'Two concepts of Empirical ethics,' *Bioethics*. Vol.23, no.4, pp.202-213. Where Archard talks of 'top-down models', Frith prefers to adopt the language of 'philosophy from the outside in' which is opposed to what she is doing; that is, 'philosophy from the inside out'. See Frith (2012), p.200.

enquiry: childhood and adulthood. I present reasons for further exploring adolescence (and development more generally). First, there are many moral and political challenges facing adolescents, their families, and society in relation to adolescence. Though adolescence is becoming a more widely explored area in other disciplines, there is no comprehensive account within philosophy to offer a framework for dealing with these contemporary challenges. Second, adolescence is increasingly targeted by policy-makers, and there is considerable optimism that a positive impact can be had on individual lives if effective means for intervention are established. In chapter one, I also introduce themes that I will return to throughout the thesis, drawing on real-life experiences of adolescents, written fiction, and work from disciplines outside of philosophy, such as sociology, to illustrate the unique position that adolescents occupy. In particular, I focus on the adolescent experience within three subjects: transitions and developmental tasks, changing relationships, and freedom and responsibility.

Chapter two presents some of the philosophical literature on children and childhood, focussing in particular on the body of work relating to the scope and nature of children's rights. The purpose of this chapter is to use the existing literature as a starting point for my own enquiry into adolescence. The chapter divides the literature to address two broad questions: should children have rights? And, what are children's rights like? The responses to these questions point to some areas of general agreement among theorists: first, as children mature, they have interests in being able to make and act on their own plans, which might be described in terms of an expansion in agency interests, or in terms of increased rights to choose; second, this change is tied to changes in children's capacities as they mature

and, as children become more like adults, the rights or interests that children have also change.

I identify some key concerns to take forward when developing my own account of the transition. First, there is variation in the adolescent experience both between adolescents, and within the different areas of a single adolescent's life. This is because the transition is complex and because the capacities required to successfully transition in one area of life do not always transfer across to other areas of life. In fact, many skills and attitudes, and much knowledge, is specific to particular spheres of a person's life. A person may have the right skills and knowledge to consent to medical treatment, for example, but that does not mean she has the right skills and knowledge to buy a home or get a job. The range and nature of relevant capacities needs to be captured by a successful account of adolescence in order to accommodate variations in the adolescent experience. Second, to develop these various capacities often requires the right kind of experience and familiarity within the relevant context. Take medical decision-making, for example. For a person to properly understand the context and implications of her power and responsibility to choose for herself in this area, she must be familiar with the medical sphere in general, understand the role that her practitioner plays in relation to her, and the conventions and expectations of the institutions that are caring for her. She must also have the skills and attitudes to be able to reflect on her options, form an opinion and communicate that decision in light of the particular relationships and institutional arrangements with which she is faced. If she is not familiar with the medical sphere, or if she does not have the right kind of experience, she is 'thrown in the deep end' and less able to negotiate medical decision-making for herself.

Chapter 1: Why Adolescence?

The intention of this chapter is to frame the project of this thesis, which is to develop a convincing philosophical account of what is happening during real-life adolescence. I give reasons why adolescence is worth exploring philosophically, particularly in light of the challenge of defining what adolescence is – in terms of adolescents’ moral and political status, the attribution of rights and responsibilities, the provisions and protections afforded, or the limits of appropriate accountability – and the interesting puzzles this period of development generates for traditional approaches to the moral and political status of children. I recognise that individuals are not isolated entities but are embedded within their social and political environments. I am concerned with the culturally-specific social and political complexities of individual development in Western liberal contexts. Despite the lack of attention that philosophy has paid adolescence, it is an area of increasing interest within several other disciplines, and I draw on an inter-disciplinary body of literature in this chapter, and in the thesis as a whole. In this chapter, I use quotes to illustrate points and offer a sense of depth to the picture of adolescence that I present. These come from literature and transcripts of interviews with adolescents (that I have not conducted myself). It is important to stress that these narratives are illustrative rather than representative and are not to be taken as evidence as such. The discussion in this introductory chapter shows why an enquiry into adolescence is pertinent and timely. This introduction also identifies three of the main themes developed, and returned to, in different ways throughout: transition and developmental tasks, changing relationships, and freedom and responsibility.

1.1 A philosophical starting point

Adolescence, understood as the period of childhood that borders adulthood, is under-discussed in moral and political philosophy as a whole, despite being a dynamic and complex period of development that clearly raises some interesting puzzles for philosophy and ethics.¹ It proves problematic for questions about the attribution of rights and responsibilities, and subsequent legal implications.

Adolescents are discussed in applied ethics and bioethics, in particular in respect of questions regarding adolescent autonomy and decision-making with legal ramifications. However, existing discussion is self-contained. Academics interested in medical ethics tend not to be interested in questions about criminal responsibility, and those interested in criminal responsibility tend not to be interested in sexual

¹ These include, criminal responsibility, medical ethics, and various discussion about setting thresholds for rights and powers, for example the age for sexual consent. See, as examples of the tone of discussion about adolescence, Blustein, J. (1985) 'Adolescence and Criminal Responsibility,' *International Journal of Applied Philosophy*. Vol.2, no.4, pp1-17.; Sutton, A. (1997) 'Authority, autonomy, responsibility and authorisation: with specific reference to adolescent mental health practice,' *Journal of Medical Ethics*. Vol.23, no.1, pp.26-31.; Hartman, R.G. (2002) 'Coming of Age: Devising Legislation for Adolescent Medical Decision-Making,' *American Journal of Law and Medicine*. Vol.28, pp.409-53.; Steinberg, L. & Scott, E.S. (2003) 'Less Guilty by Reason of Adolescence: Developmental immaturity, diminished responsibility, and the juvenile death penalty,' *American psychologist*. Vol.58, no.12, pp.1009-1018; Campbell, A.T. (2005) 'Adolescent Decisional Autonomy in Research: Issues in Translating Research into Policy,' *The American Journal of Bioethics*. Vol.5, no.5, pp.78-80.; Ward, C.V. (2006) 'Punishing Children in the Criminal Law,' *Notre Dame Law Review*. Vol.82, no.1, pp.429-79.; Mutcherson, K.M. (2007) 'Minor discrepancies: Forging a Common Understanding of Adolescent Competence in Healthcare Decision-Making and Criminal Responsibility,' *Juvenile and Family Court Journal*. Vol.58, no.3, pp.1-29.; Navratil, J., et al. (2015) 'Involving Youth Voices in Research Protocol Reviews,' *The American Journal of Bioethics*. Vol.15, no.11, pp.33-34; Carpenter, B., et al. (2014) 'Harm, Responsibility, Age, and Consent,' *New Criminal Law Review*. Vol.17, no.1, pp.23-54.; Manson, N. (2015) 'Transitional Paternalism: How shared normative powers give rise to the asymmetry of adolescent consent and refusal,' *Bioethics*. Vol.29, no.2, pp.66-73.; Tucker, F. (2016) 'Developing Autonomy and Transitional Paternalism,' *Bioethics*. Vol.30, no.9, pp.759-766.; Brennan, S. & Epp, J. (2015) 'Children's Rights, Well Being, and Sexual Agency,' in Bagattini, A. & MacLeod, C. (eds.) *The Wellbeing of Children in Theory and Practice*. pp.227-246.

consent. Furthermore, ethical questions regarding less formal area of decision-making, within the family for example, are under-discussed. When adolescence has been the focus of enquiry it is within specific spheres rather than adolescence as a whole. We are lacking a comprehensive, 'joined-up' approach to thinking about adolescence as a whole. As far as I am aware, there is no philosophical account that attempts to say anything comprehensive about the social and political changes that take place in the lives of young people as they move from childhood to adulthood, or how these changes relate to developments in adolescent agency. This project requires saying something about the structure of adolescence, acknowledging the different spheres of adolescent life and how they fit together, which is my aim here. I am, however, not offering a complete picture because adolescence is just so complex.

There is a generally accepted view in the Western liberal philosophical tradition that describes the significant differences between how children should be treated and how adults should be treated. This might be summarised in the following way:

Adults can and should be permitted to make choices as to how they lead their lives.

By contrast, children cannot and should not be permitted to make such choices. Thus adults have fundamental liberty rights, whereas children, if they do have any rights, only have basic welfare rights.²

² Archard, D. (2014) 'Children, Adults, Autonomy and Well-being' in Alexander Bagattini, Colin Macleod (eds.) *The Nature of Children's Well-being: Theory and Practice*. p.3.

This is what David Archard terms ‘the basic view,’ and many philosophers have worked to fill out the details or nuance this account.³ At the heart of the basic view is a general consensus about the nature of childhood which, in turn, underpins how children are treated. Childhood is a period of a person’s life when they are in a state of vulnerability and dependence, deficient in the abilities and knowledge commonly associated with adulthood, and unable to make decisions for themselves, and when they must rely on others to make decisions that promote their interests. To treat someone as a child means, first and foremost, to take care of her. This may mean restricting the opportunity to make effective decisions and, with her welfare in mind, make choices on her behalf. Likewise, there is a general consensus about the nature of adulthood, which underpins how adults are treated. In adulthood a person is mature and has developed the characteristics required for her to control her own life. To treat someone as an adult means to allow them to make decisions for themselves, even when those decisions are ‘poor’ or when those decisions put their welfare at risk. In the background is the traditional liberal conception of the ‘adult’ as an independent, autonomous and rights bearing (male) citizen. The point is that, though children may have some (welfare) rights, such as the right to shelter or safety from harm, the adult is viewed as being capable of exercising control over her own life without assistance or interference. The basic view is not without opposition, and indeed the nature and scope of the differences between adults and children are subjects of much debate. Importantly, for the advancement of my thesis, it should be noted that the basic view tells us nothing about the relationship between childhood

³ Ibid.

and adulthood, in particular, the progression or transition or transformation, whichever it might be, from one state to another. In subsequent chapters I take up the problem of what it means to treat someone as an adolescent, as an individual who does not fit either position of 'child' or 'adult' (presumed stable on the basic view), and who might be approaching adulthood in some, but not all, ways and may even remain child-like in others, or who may be neither like a child nor an adult. I show here that adolescence is a distinctive period of development and theorising adolescence as 'childhood plus a bit' or 'adulthood minus a bit' does not offer a solution to the problem of how to deal with adolescence philosophically. Despite some general agreements about childhood and adulthood, there is no such conceptual agreement about adolescence and, despite a good deal of practical consensus on how adolescents ought to be treated, an overarching conceptual framework to tie these together is lacking.

1.1a A conception of adolescence

In his seminal work on childhood and the moral and political status of children, Archard argued that, though there has long been a concept of 'child' and 'childhood', *conceptions* of childhood change over time and place.⁴ He writes:

⁴ Archard borrows this terminology from John Rawls who argued for a conception of justice (as distinct from a concept of justice) in Rawls, J. (2005 [1971]) *A Theory of Justice*. Cambridge, Mass: Harvard University Press. He writes (2005 [1971], p.5), '...it seems natural to think of the concept of justice as distinct from the various conceptions of justice and as being specified by the role which these different sets of principles, these different conceptions, have in common.'

The *concept* of childhood requires that children be distinguishable from adults in respect of some unspecified set of attributes. A *conception* of childhood is a specification of those attributes. In simple terms to have a concept of “childhood” is to recognise that children differ interestingly from adults; to have a conception of childhood is to have a view of what those interesting differences are.⁵

The basic view describes the Western liberal *conception* of childhood and adulthood. In the modern Western world, we have a particular conception of childhood as a ‘separate stage of development with its own distinct challenges and needs’⁶ and this conception is not shared by other historically and geographically removed cultures. Sigal Ben-Porath describes this conception of childhood as a condition in which individuals have a particular social status

...evolved through the endorsement of laws and treaties protecting children from physical abuse, neglect, work at a young age, premature marriage and other previously unquestioned social norms.⁷

Furthermore, she argues that ‘[o]nly when consistent and reliable protection is ensured can childhood evolve from young age.’⁸ The kinds of legislation with which we are familiar in Western liberal societies demarcate childhood as a concept that is culturally specific and acknowledges the social conception and understanding of

⁵ Archard, D. (1993) *Children: rights and childhood*. London: Routledge, p.22.

⁶ Ben-Porath, S. (2003) ‘Autonomy and Vulnerability: On just relations between adults and children,’ *Journal of Philosophy of Education*. Vol.37, no.1, p.129.

⁷ Ben-Porath (2003), p.129.

⁸ *Ibid.*

youth and of what society desires to promote during this time. Legislation acts to protect children and aims to ensure survival in light of their specific vulnerabilities.

Ben-Porath writes,

Childhood emerges when young persons' responsibility to protect themselves is taken over by the state, using its powers to recognise, shape and respond to what it perceives as the fundamental traits of young people.⁹

Before exploring what it means to be treated as an adolescent, we might first ask something about the concept of adolescence. In Western liberal cultures we have concepts of 'adolescent' and 'adolescence' – this suggests that within these cultures there is some class of individuals that the concept is meant to pick out. We might ask whether adolescence is a 'natural kind', a pre-existing class of individuals waiting to be discovered and analysed, or a 'human kind' or 'social kind', a socially constructed classification imposed upon, or even to some extent inventing, that group of individuals.¹⁰ Furthermore, it is not clear what the liberal *conception* of adolescence is. The distinction between concept and conception underlines a relevant point of enquiry for this chapter: what are the interesting and relevant features that characterise adolescence?

Clearly there are incontestable facts about human development: that, over time, individuals will change and mature. The concept of adolescence, however, does

⁹ Ibid.

¹⁰ See Hacking, I. (1986) 'Making Up People,' in Heller, T. & Wellberry, D. (eds.) *Reconstructing Individualism*. Stanford, California: Stanford University Press. pp.222-236; Hacking, I. (1995) 'The Looping Effects of Human Kinds,' in Sperber, D. & Premack, A. (eds) *Causal Cognition*. Oxford: Clarendon Press. pp.351-394.

not simply allude the fact that children will develop into adults. By giving a label to a particular period of development, albeit unclear in its entry and exit points, the concept seems to demarcate one period out as sufficiently distinct from other periods of development. That said, there are other periods such as 'old age' or 'middle age' or 'infancy' that also mark out periods of development. The question thus arises whether 'adolescence' is a purely descriptive concept, responding to a clearly observable set of changes in development, or whether it is something that serves a range of other social, legal and bureaucratic purposes. That is, is adolescence a 'natural kind' or a 'human kind', and to what extent are our ideas about adolescence socially constructed? This question might be settled by looking at the nature of adolescence. If adolescence is a natural kind then there pre-exists 'a kind of person who came increasingly to be recognized by bureaucrats or by students of human nature'.¹¹ In some fields, adolescence is treated something like a natural kind; individuals in that group can be identified because they share particular characteristics that transcend social and temporal divides, such as biological traits. Loosely, adolescence is thought to begin around puberty, the biological indicator that persons are moving from one class to another.¹² Despite this, there is much disagreement between disciplines about the threshold and duration of adolescence, and apparently some confusion about what it actually *is*, which may indicate that adolescence is, in fact, a human or social kind; that is, 'a kind of person [that] came into being at the same time as the kind itself was being invented.'¹³ The concept of

¹¹ Hacking (1986), p.228.

¹² Patton G.C. & Viner, R. (2007) 'Pubertal transitions in health,' *Lancet*. Vol.369, no.9567, pp.1130-1139.

¹³ Hacking (1986), p.228.

adolescence is not new, though the label given to it has changed over (place and) time. The earliest references to the term 'adolescence' are found in texts from the end of the nineteenth century and the early twentieth century.¹⁴ The UN Convention on the Rights of the Child states that a person younger than 18 years is a child, unless the legal threshold of adulthood is attained at a younger age in any particular jurisdiction, and it does not distinguish the group 'adolescents'.¹⁵ The World Health Organisation, on the other hand, defines adolescents as 'young people between the ages of 10 and 19.'¹⁶ There are other terms that are used interchangeably with 'adolescent': 'Youth' was defined by the UN as describing people between the ages of 15 to 24 years;¹⁷ The term 'teenager', first used in the USA in the 1920s to describe people aged 13 to 19 years old, became widely used after World War 2;¹⁸ The term 'young people' is more loosely defined and roughly refers to those aged 10 to 24.¹⁹ In much research, this particular age range is often refined further: early adolescence, referring to those aged 10 to 14 years; late adolescence, referring to those aged 15 to 19 years; and, young adulthood, referring to those aged 20-24

¹⁴ G. Stanley Hall was the first to offer a psychological account of adolescence in the early twentieth century, describing some of the distinctive developmental complexities and challenges (see Hall, G.S. (1904) *Adolescence: Its Psychology and Its Relations to Physiology, Anthropology, Sociology, Sex, Crime, Religion and Education (Vol. II)*. New York: D. Appleton.). Prior to this, many writers referred to 'youth' and 'youths', and there are many notable literary examples exploring the challenging transition between childhood and adulthood, for example Voltaire (2003[1759]) *Candide*. Doylestown: Wildside Press.; Alcott, L.M. (1946[1868-9]) *Little women*. Boston: Little, Brown & Company.

¹⁵ Office of the United Nations High Commissioner for Human Rights (1989) *Convention on the rights of the child*. URL: <http://www.ohchr.org/EN/ProfessionalInterest/Pages/CRC.aspx>.

¹⁶ World Health Organisation (2018) 'Adolescent Health.' URL: http://www.who.int/topics/adolescent_health/en/

¹⁷ United Nations Department of Economic and Social Affairs (UNDESA) 'Definition of Youth.' URL: <http://www.un.org/esa/socdev/documents/youth/fact-sheets/youth-definition.pdf>.

¹⁸ Sawyer, S.M. et al (2012) 'Adolescence: A foundation for future health'. *The Lancet*. Vol. 379, no.9826, p.1632.

¹⁹ World Health Organization (2001) *The second decade: improving adolescent health and development*. Geneva: World Health Organization. URL: http://www.who.int/maternal_child_adolescent/documents/frh_adh_98_18/en/.

years.²⁰

Certainly, adolescence is a human kind if we are to use Hackings criteria for what constitutes a human kind.²¹ However, to argue that adolescence is such is to argue that it was not possible to identify a person as an adolescent before there were ideas about 'adolescence'. One feature common to the concept of adolescence across cultures is that adolescence is a transitional period between childhood and adulthood, the purpose of which is preparation for adult roles.²² The finer details are culturally variable, depending on conceptions of childhood and adulthood, and the kinds of developmental tasks that young people are expected to complete – or, to put this another way, the *nature* of the transition into adulthood – but there has clearly always been a developmental transition of sorts throughout all time. If adolescence is that transitional period, it is unintelligible to claim that adolescents did not exist before society talked about adolescence. How we understand the nature and 'purpose' of adolescence (if it can be described as having a purpose) is subject to social settings, conventions and particular social expectations. There is a social history underpinning contemporary ideas about adolescence, and there are also facts about psychological, social and physical development from young beings to older beings. Clearly, I am undecided whether adolescence is a natural kind or a

²⁰ Gore, F.M et al. (2011) 'Global burden of disease in young people aged 10–24 years: a systematic analysis,' *Lancet*. Vol.337, no.9783, pp.2093-2102.; Viner, R.M. et al. (2011) '50-year mortality trends in children and young people: a study of 50 low-income, middle-income, and high-income countries,' *Lancet*. Vol.377, no.9772, pp.1162-1174; Poulin, F. et al. (2012) 'The Role of Parents in Young Adolescents' Competence with Peers: An observational study of advice giving and intrusiveness,' *Merrill-Palmer Quarterly*. Vol.58, no.4, pp.437-462.

²¹ Hacking (1995), p.357. First, adolescence is a highly relevant kind. Second, it is peculiar to people. Third, we would like to have knowledge about adolescence. Finally, we have an inclination to attribute adolescent behaviour to people in the class of adolescent.

²² We may want to challenge this notion given that it is in danger of reducing adolescence to a period with only instrumental value.

social kind, and perhaps 'adolescence' and 'adolescent' are treated in different ways within different disciplines. There is reason to focus on the delineation question, partly for clarity, but the bulk of the thesis focuses on the various transitions, however they are defined. These are social (and legal) transitions that are framed using certain concepts, which draw certain boundaries, in certain ways, for particular reasons (all of which may be contingent). However, the fact that this period of development is given the label adolescence is not as important to my project as the real, substantive features of transitions into adulthood. The ethical and policy issues that arise in terms of adolescents' moral and political status, the attribution of rights and responsibilities, the provisions and protections afforded, or the limits of appropriate accountability, are ones that are framed within the very context where the concept of adolescence is used. The issues that concern my thesis are ones which are specific to *us* in our society, to *our* legal and social problems. The concepts of adolescent and adolescence are being used to capture particular features of the particular transitions that people go through in our society. Determining the ways in which 'adolescence' is a natural, human, social or other kind is a different task from that of working out what is best to do and what is best to think *within* such a framework.

The wider project of this thesis is to sketch an account of how adolescence fits into maturation as a whole, and to suggest how best to articulate developments and changes in adolescence. Though my intention is not to provide conceptual analysis of 'adolescence' or 'adolescent' as such, the account that I offer may be a starting point for such an enquiry. Putting the project of conceptual analysis aside, how might we explain the difficulty in conceptualising adolescence? First, the lack of

a clear conception of adolescence could be attributed to the (rapidly) changing nature of adolescence in Western liberal societies, and relatedly, the comparatively recent recognition and inclusion of adolescence in many fields of study. Whether or not this phenomenon *explains* the conceptual confusion about adolescence or the philosophical ‘gap’, the evidence does point to complexity of the facts about adolescence in this context. There are many factors that contribute to the transition between childhood and adulthood, and the relationship between psychological development and developments in moral and political status appears, at times, to be uneasy. When reading about adolescence in Western liberal societies, it is striking how often there appear to be mismatches or tensions between the formal *acquisition* of rights during adolescence and an individual’s *ability* to exercise those rights. As this thesis explores, we might put this down to failings in a person’s capacities, their resources, or with their support network or relationships. Importantly, this is indicative of the unavoidable influence that relationships with others (and an individual’s connections with institutions) have on a person’s concrete freedoms and opportunities, something that I explore in depth in this thesis.

1.2 What is adolescence like?

Development from childhood is a continuous trajectory and adolescence is a period of development. During development there are physical changes, and many of these entail changes in capacity. Children grow and become physically stronger – they are able to do things that they couldn’t do before. As babies, they first hold their heads

on their own, they roll over, they sit unaided, they crawl, pull themselves up on furniture, and then stand independently. After their first steps they grow in confidence and begin to run. At first, they can't jump, but in time they learn this skill. They watch older children and try to emulate their actions, often with frustration, as they are unable to achieve the results they would like to be capable of. As they mature, they are able to make more controlled movements, and can train their bodies to work harder and achieve more. Fine motor skills develop similarly, as children learn to write their name and express themselves through mark making, pictures, symbols, and words.

Cognitive development supports children's physical capabilities. However, it also enables children to understand the world, socialise, and communicate their feelings, ideas, and needs. One of the most influential theories of cognitive development is Jean Piaget's stage theory. According to Piaget's framework children move into different and recognisable stages of development in an age-related sequence, as they mature.²³ In our own real interactions with children, we see developments in children's conceptual understanding and communication, as they get older. We may also witness children experiencing periods of frustration when they are unable to communicate their feelings to others, though they may have a real sense of what their feelings are. As children's brains develop so do their capacities to acquire and process information, form stable preferences and beliefs, appreciate options and consequences and solve problems. When these cognitive

²³ Piaget, J. & Inhelder, B.; Parsons, A. & Milgram, S. (trans.) (1958) *The Growth of Logical Thinking from Childhood to Adolescence: An essay on the construction of formal operational structures*. London: Routledge.

capacities are lacking, other people who care for the child are able to make decisions for her on her behalf. Over time, as children are able to form consistent desires and act on them appropriately, parents and carers allow children to make choices for themselves. No doubt, in between there is the potential for frustration and conflict as children feel able to make their own decisions before others are prepared to allow them to do so.

Alongside the development of physical and cognitive capacities there are also complex social dimensions. These include changes in the moral and social status of individuals on their journey to adulthood; changes in how an individual is recognised and treated by others and, relatedly, changes in how much control she is afforded over her life. It is this kind of normative change that is of particular interest here, though there are obviously interrelations and connections to be uncovered between a child's physical, cognitive and social development and the normative changes that take place during the transition between childhood and adulthood.

Two things should be noted about the developments discussed so far. First of all, children develop physically, cognitively and socially at different rates. That said, individuals end up capable in different degrees in respect of different capacities. One person may be strong, fit and able to manage many physical demands, but lack the excellent social intelligence of their peers. The second thing to note is that proper development in any physical, cognitive or social sense does not occur in isolation. None of us are individuals in the sense that we are isolated. How we conceive of development, and the features and traits that develop, are resolutely social. To imagine that a child could grow into an adult without acknowledging her social context, the relationships and interactions she has with others, would be to accept

Hobbes' imagined state of nature where adults exist, 'emerged from the earth like mushrooms and grown up without any obligation to each other,'²⁴ fully matured adult individuals without partners, families, or relationships with any groups or institutions.

Likewise, when thinking about *the social and relational* development from childhood to adulthood, it is important to recognise that this transition may occur at different rates for different people. The relational nature of the change in an individual's moral status must also be given full recognition. When we talk about a change in moral status we are talking about what powers a person should have, what they ought to be responsible for, and how they ought to be treated by others, and these changes are inseparable from social status. These changes are necessarily relational as it is through interaction with others that the changes take place. Furthermore, the changes themselves are changes in relationships and changes in how people, who stand in particular role relations to one another, treat each other. As we mature, we are not only moving through a series of social interactions which define us as selves, and effect changes in our moral status – from necessary dependency to (different forms of) independency, and from one social network to another – but for us to actually have and implement a moral status, it requires that person not be not isolated from others.²⁵ It makes no sense to discuss a person's individual rights without an account of the implications of those rights for others;

²⁴ Hobbes, T.; Tuck, R. & Silverthorne, M. (eds. and trans.) (1998) *On the Citizen*. Cambridge: Cambridge University Press, p. 102.

²⁵ Critics of the liberal notion of the rational 'unencumbered' individual echo this thought. For example, Walzer, M. (1984) 'Liberalism and the Art of Separation,' *Political theory*. Vol.12, no.3, pp.315-330; p.326, writes, 'the ground is always social: persons-in-societies, not persons-by-themselves'.

who should respect that right, and what duties does that right confer on others?

Likewise, when we talk about responsibilities, we are talking about who is going to owe them and to whom, as well as what exactly they owe.

1.2a Key themes

The key themes that frame this thesis explore changes in powers, freedoms and expectations, the maturation of central capacities, what it means to be independent, and the factors that might facilitate or impede independence. The aim is make the case for why, despite the lack of attention to adolescence in philosophy, fuller discussion in this area is warranted.

First, there are a wide variety of challenges facing young people in modern society, many of which are not satisfactorily addressed in the ethical literature. Ethical writing on adolescence has tended towards questions that have a bearing on the law, such as the age of criminal responsibility, the age of consent (in both the medical and sexual contexts), employment law, and education. Though these issues have important practical and legal implications, there are many puzzles about what aspects of maturation are philosophically significant, the responses to which form the foundations of any plausible account of adolescence. Second, a general reason for focusing upon adolescence is that adolescence is increasingly considered an important period for intervention and policy. There is evidence that some behaviours established during adolescence endure into adulthood. Furthermore, adolescence is, for many, a time of increased risk. Adolescents are more likely to adopt behaviours

associated with alcohol, drugs, sex, and other risks such as dangerous driving. A more satisfactory conceptual foundation may offer insights that enable more effective intervention or policy design.²⁶

Transition and 'developmental tasks'

In general, adolescence is loosely defined as being from the onset of puberty to the time when a person takes on adult roles.²⁷ Unlike puberty, which is defined by a biological process, adolescence is a less precise construct that takes into account socio-cultural expectations. It is accepted that the biological processes initiated at puberty interact with the social context to affect an individual's emotional and social development.²⁸ For example, complex changes in the human brain during adolescence are affected by the socio-cultural and economic situation in which young people mature.²⁹

The developmental tasks that young people are expected to accomplish during adolescence, and the social expectations about when a person should assume adult roles vary across cultures and over time, as do the constraints on young

²⁶ I look at intervention and policy in chapter seven.

²⁷ On this see Spear, L. P. (2000) 'The adolescent brain and age-related behavioral manifestations,' *Neuroscience & Biobehavioral Reviews*. Vol.24, no.4, pp.417-463.; Dahl, R. E. (2004) 'Adolescent brain development: a period of vulnerabilities and opportunities,' Keynote address. *Annals of the New York Academy of Sciences*. Vol.1021, no.1, pp.1-22.

²⁸ Patton & Viner (2007); Gottlieb, G. (1976) 'The roles of experience in the development of behavior and the nervous system,' in Gottlieb, G. (ed.) *Neural and behavioral specificity: studies on the development of behavior and the nervous system*. New York: Academic Press.; Lerner, R.M. (1986) *Concepts and theories of human development*. (2nd edn.) New York: Random House.; Brooks-Gunn, J. & Warren, M.P. (1989) 'Biological and social contributions to negative affect in young adolescent girls,' *Child Development*. Vol.60, pp.40-55.

²⁹ Spear, L.P. (2004) 'Adolescent brain development and animal models,' *Annals of the New York Academy of Sciences*. Vol.1021, no.1, pp.23-26.

people's *ability* to adopt adult roles and become independent from their parents.³⁰

The adolescent transition period varies in different ways: it may be complex and fraught with difficulties for one individual, but seamless and easy for another; it may be complex in some respects, in some areas of a person's life, but less complex in others. Adolescence may, therefore, be a more or less complex transition, but there is evidence that, in Western liberal societies, the transition to adulthood is becoming longer, more complex and uncertain.³¹ Here, the developmental tasks that young people might accomplish are numerous and often multifaceted. Adolescents may be expected to become self-reliant in the face of financial and structural obstacles, adjust to new social dynamics and develop effective relationships with peers and adults within personal and professional spheres, as well as manage their responses to their developing physical, emotional and sexual maturity. During this time, young people must learn to make decisions for themselves and take control of their own lives while, at the same time, they explore their own sense of who they are, and experiment with ways of living.

In practice, young people acquire political and legal rights and responsibilities over the course of several years, and there appear to be, in some jurisdictions, contradictions in what a young person can and cannot do. For instance, in England, a 17-year-old can marry, drive a car on a public road, be convicted of a criminal offence, and leave the parental home, but they cannot vote in elections, and therefore have no say over the formulation of the laws to which they are subject and

³⁰ For an account of adolescence outside of contemporary Western liberal culture see Mead, M. (1953) *Growing up in New Guinea*. New York: Mentor Books.

³¹ Henderson, S. et al. (2009) *Inventing Adulthoods: a biographical approach to youth transitions*. London: Sage.

in which they have a clear interest. There may also be 'mismatches' between an individual's structural or legal status, as a holder of rights or responsibilities, and their ability to manage or discharge them. An 18-year-old is an 'adult' in many legal senses, however their capacity or desire to bear their adult status may be limited, perhaps for developmental reasons, due to lack of resources, or even because their rights or responsibilities are not recognised or respected by others. Equally, a young person below the legal age of majority may be frustrated, or, more strongly, be subjected to unjustifiable paternalism, if they meet the criteria for 'adulthood' judged by a standard of competence despite not being old enough to use particular powers under the law.

Hidden within a loose definition such as, 'from the onset of puberty to the time when a person takes on adult roles', is an incredibly dynamic sequence of changes, fraught with pitfalls, and the potential for failure, disappointment, and frustration. The claim that the transition into adulthood is becoming more convoluted is a generalisation. As well as cross-cultural differences in the transition, and the temporal differences within a culture, there is a whole variety of adolescent experiences within a cultural cross-section. One way to capture the span of experiences in the Western liberal context is to talk about 'fast-track' and 'slow track' transitions. There are not one or two fixed routes into adulthood, and it is important that my own analysis allows for this. Nevertheless, in Western liberal societies, the majority of young people *are* taking a slow track transition into adulthood, taking longer to achieve the developmental tasks expected in adolescence and remaining dependent on parents for longer. However, there are many young people for whom the transition into adulthood is becoming *shorter*. Fast track to adulthood is

characterised by premature bearing of responsibilities for oneself and others which might include heavy caring responsibilities, leaving school before or at the minimum age, and teenage parenting. As a result, there is a distinct polarisation between fast track and slow track transitions into adulthood corresponding with a social gradient, where young people who experience disadvantage are more likely to fast track to adulthood.³² I will repeatedly come back to the nature of transitions and, importantly, the thought that the transition to adulthood is not a 'one size fits all' model. There are many reasons why transitions vary, but an important factor for many young people is where they live; those in disadvantaged communities, having more barriers to access education and job opportunities, are more likely to fast track to adulthood. It takes social and financial capital to overcome these kinds of disadvantage, that many young people in this situation lack.³³ Even in spite of ability and motivation, a lack of resources, including finance, skills, time, or social capital, and stigmatisation can make it difficult, or impossible, to overcome barriers to accessing opportunities. 18-year-old Matthew, who, despite achieving three A*s and one A at A-level, was rejected by a top UK university because he decided not to 'drop [his] northern accent and sound a bit more southern,' describes how poverty has set him back:

Debt and money worries make people more subservient. Anxious all the time. Passive. Skint people don't go throwing themselves around the world going, "Look at me!" They don't have the time. Being poor is fucking time-consuming and from a

³² Jones, G. (2002) *The Youth Divide: Diverging paths to adulthood*. York, UK: The Joseph Rowntree Foundation.

³³ *Ibid.*, p.13.

really young age, you totally assimilate that sort of behaviour... I think kids from the poorest families start to lose that “anything is possible” shine from the age of nine.³⁴

We could think of these difficulties as barriers to independent, autonomous *agency*. Young people who have to take on responsibilities prematurely may lack the agency necessary to make appropriate choices for themselves and those they are responsible for. There is little said, within the philosophical literature, about the challenges that arise for adolescents in terms of their ability to negotiate an increasingly complex transition into adulthood, the conflicting pressures on them to be mature and responsible yet also remain dependent on parents for longer, or the kinds of challenges that are borne out of the responsibility to safeguard themselves in what appears to be an increasingly risky world of media and social-media, or an otherwise private and peer-led sphere of activity. The account I present is attentive to these challenges and to the complexity of adolescent life.

Changing relationships

Both slow track and fast track transitions can be problematic for young people, especially when there is a deficiency of parental, community, or structural support. Slow track transitions, characterised by remaining in education for longer, and being stuck in between dependence on – and independence from – parents, are

³⁴ Combi, C. (2015) *Generation Z: Their voices, their lives*. London: Windmill books; p.217.

problematic for those young people who lack (typically middle-class models of) parental support.³⁵ Whereas those young people who leave education earlier, risk unemployment or badly paid work,³⁶ and start family-making in their teens, are more likely to suffer social exclusion, lack of social capital, and premature loss of childhood.³⁷ These factors leave young people, in already difficult situations, isolated. Within philosophy and ethics there are questions to be asked about how, and by whom, children's lives are shaped and supported in adolescence, and the 'hows' and 'whys' of shared decision making in informal settings, outside of the institutional sphere. There exists some discussion of parental authority,³⁸ and the limits of parental authority in childhood, but little written on the changes that occur in respect of the parent-child relationship during adolescence.

Clearly it is important for young people to have support, or at least options for support, while they are dealing with so much change and uncertainty. The comments of one 16-year-old girl highlight the need for shared decision-making, or at the very least, someone to talk to:

Like you're going through that time, you don't know what you want to do, it's really indecisive, and it's like one big learning curve. And you obviously need people to bounce off and compare with, because you're never going to develop in this time if you don't interact with other people and see what's right and wrong, and sort things

³⁵ Jones, G. et al. (2004) "'Because it's Worth it?': Education beliefs among Young People and Their Parents in the United Kingdom', *Youth & Society*. Vol.36, no.2, pp.203-226.

³⁶ Bynner, J. et al. (2002) *Young people's changing routes to independence*. York, UK: Joseph Rowntree Foundation.

³⁷ Jones, G. (2009) *Youth*. Cambridge: Polity Press; pp.97-8.

³⁸ See section 2.1a.

out. And all the crap you get into, so you need someone to go and bitch to, or like cry to, or whatever.³⁹

For those young people who lack parental and/or social structures and support,⁴⁰ and for whom also feel the burden of self-realisation, adolescence can be an especially difficult time. These young people may be in the minority, but even those individuals whose parents can provide, and do not withhold, support are still at risk of becoming isolated from the support that they need because relationships between young people and their parents are changing at this time, and the parental role has to respond appropriately:

Listening. Listening is what's important. Because if you don't really have anyone to listen ... I think ... You get these kids that like, hide in their rooms, don't you? And I think that's mainly because their elders don't really listen to them.⁴¹

Clearly adolescence is a time when changes in relationships matter. The types of relationships that individuals have change during adolescence, as do the quality and nature of those relationships. Adolescents *need* guidance and support, and are still dependent on their parents, and wider community, in a distinctive way.

Furthermore, adolescents appear to have needs that are different to those of children and adults. Adolescents must respond to changes in the sense of self, a shift in dynamic between family groups and peer groups, and changes in the kinds of

³⁹ (16-year-old girl) in Coleman, J.C. (2011) *The Nature of Adolescence (Fourth ed.)*. New York: Routledge; p.13.

⁴⁰ Social structures and support might include, predominantly, school, but for the very vulnerable also include social services.

⁴¹ (14-year-old boy) in Coleman (2011), p.99.

institutions and social settings that provide context to their lives. Peers become an important source of socialisation and value formation; children learn important attitudes, values, skills and information, unobtainable from adults.⁴² They exchange norms, learn about inclusion and exclusion, belonging, identity, and develop a sense of self and other. 15-year-old Thomas talks about his identity, and how his group of friends are different to other groups of adolescents:

We get called everything. EMO, goth, faggot, punk, grunger, metallor, gay, gaylord. We've had so much shit said to us. We've had things thrown at us. We nearly got jumped about three times in the last year by these fucking wanker hooligans. Ariane got put into hospital by these girls just because she was wearing the clothes she was and had some piercings. I hate putting labels on things. If anything I'd identify myself as a skater. That's my life. That and my friends. We might not be the cool crowd, but our crowd is wicked. There's none of the shit everyone else puts up with, with their friends. No comparing trainers or being called a fag, or a slut if you're a girl. We just like music and we like to skate.⁴³

As peers become more important, the kinds of dependency that adolescents have on their parents change. In many ways adolescents move away from socially and emotionally dependent relationships with parents, even though economic dependency may persist. As 15-year-old, Tom, comments, 'Parents should just stay out of their kids' business and rooms, pay the bills and give us the money we need. You ask any kid. That's what they really want.'⁴⁴ This comment clearly contradicts the

⁴² Johnson, D.W., and Johnson, R.T. (2004) 'Peer Influences,' in W. Craighead, W. & Nemeroff, C. (Eds.), *The Concise Corsini Encyclopedia of Psychology and Behavioral Science*. Hoboken, NJ: Wiley.

⁴³ Combi (2015), p.33.

⁴⁴ *Ibid.*, p.6.

sentiment about listening quoted previously, highlighting both the variation in the adolescent experience and the ambivalence adolescents feel towards parents, and towards the other adults and authorities in their lives.

Young people might begin to see their parents in a different light, realise their limitations or their burdens. On the one hand adolescence is time when parents and children become more distant, but at the same time, they become more like equals. In *The Perks of Being a Wallflower*, Charlie reflects on his parents in a way that acknowledges them as persons, not just as 'his parents':

My dad had glory days once. I've seen pictures of him when he was young. He was a very handsome man... My mother looks beautiful in old pictures... Sometimes, I look at my parents and wonder what happened to make them the way they are.⁴⁵

17-year-old, Mark, also articulates the change in how adolescents view their parents:

There was a time when I was little when I'd have been really jealous if my mum got a boyfriend and I think Mum didn't because of this, but now I'd really like her to. Kids find it impossible to see their parents as human beings with needs and I worry about her being lonely.⁴⁶

As adolescence approaches, parents might worry that, 'this sweet child of ours would turn into a sullen stranger who would criticize our taste, challenge our

⁴⁵ Chbosky, S. (2012) *The Perks of Being a Wallflower*. London: Simon & Schuster.; p.56.

⁴⁶ Combi (2015), p.7.

rules, and reject our values.⁴⁷ Young people picking up on this narrative, may well feel that adults have a negative view of them. Something like this was expressed by Anne Frank in her diary when she wrote:

Everyone thinks I am showing off when I talk, ridiculous when I'm silent, insolent when I answer cunning when I have a good idea, lazy when I'm tired, selfish if I eat one more bite than I should, stupid, cowardly, calculating, etc., etc.⁴⁸

Given the sense that there is a distance growing between them and their child, parents might feel anxious about their children's welfare, lack self-efficacy in the role of 'parent' or perceive themselves as obsolete. The narrative of loss is summarised in one help book for parents:

... no one prepared us for our feelings of loss

Loss of the old, close relationship. (Who is this hostile person living in my home)

Loss of confidence. (*Why is he acting this way? Is it something I've done ... or haven't done?*)

Loss of the satisfaction of being needed. (*"No, you don't have to come. My friends will go with me."*)

Loss of the sense of ourselves as all-powerful protectors who could keep our children safe from harm. (*It's past midnight. Where is she? What is she doing? Why isn't she home yet?*)

⁴⁷ Faber, A. & Mazlish, E. (2006) *How to talk so teens will listen and listen so teens will talk*. London: Piccadilly Press; p.xvi.

⁴⁸ Frank, A.; Frank, O.H. & Pressler, M. (eds.); Massotty, S. (trans.) (2007 [1977]) 'Saturday, 30 January 1943,' in *The Diary of a Young Girl: the definitive edition*. London: Penguin.

And even greater than our sense of loss was our fear. (*How do we get our kids through these difficult years? How do we get ourselves through?*)⁴⁹

Allowing an adolescent to have a life of their own obviously entails relational changes between parent and child, which, here, are described in terms of loss. In part, these changes are in the limits of how much involvement a parent can have in their child's life. In this thesis I explore what adolescence means for the parent child relationship, and how the parental role adapts to a young person's growing independence from their parents.

Freedom and responsibility

Adolescents are not isolated from others, and in many ways (legally, institutionally, or emotionally) are still dependent on their relationships with others. Adults have obligations to support, discipline, and care for adolescents, and these obligations may well mean making judgements about how and when to respect an adolescent's moral rights and let a young person take control of her own life. This might otherwise be expressed as a concern over apparent contradictions in the content (or scope) of the rights that young people have. Who can legitimately have authority to shape adolescent lives, and what are the limits of that authority? We might have good reasons for accepting some degree of paternalism towards children. Tamar Schapiro, for example has argued that we have good reasons that explain and justify our

⁴⁹ Faber & Mazlish (2006), p.xvi.

paternalistic attitudes toward children that are rooted in their not being agents in the full sense, but nevertheless beings with interests that ought to be promoted.⁵⁰ It might, on the other hand, be tempting to support young people's independence in the long run by always prioritising autonomy in cases of conflict. However, this approach faces application problems when it comes to difficult cases involving high risks for the adolescent, or disparities between features of development and other constructs relating to maturation.⁵¹ In ethics these issues are commonly discussed in relation to decision-making, in medical and sexual contexts. There is much discussion about how adolescents ought to be treated by practitioners and the courts when it comes to decisions about their health and well-being. In particular this debate is framed in terms of an adolescent's right to choose, which is seen as a question about competence.

First, there has been a good deal written on adolescents' right to consent to or refuse life-saving medical treatment, and mostly written for legal journals.⁵² There is, however, more limited discussion in bioethics journals.⁵³ In many jurisdictions there are clear rules about how minors ought to be treated, and thresholds for who should be considered a minor in these cases. In the UK for example, children under the age of 14 who are considered Gillick competent can consent to life-saving

⁵⁰ Schapiro, T. (2003) 'Childhood and Personhood', *Arizona Law Review*. Vol.45, no.3, pp.575–594.

⁵¹ See Lowe, N. & Juss, S. (1993) 'Medical Treatment – Pragmatism and the Search for Principle,' *Modern Law Review*. Vol.56, no.6, pp.856-72.; Freeman, M. (1997) *The Moral Status of Children: Essays on the Rights of the Child*. The Hague: Kluwer Law International; ch.15.

⁵² Hartman (2002); Rosato, J.L. (2002) 'Let's Get Real: Quilting a principled approach to adolescent empowerment in health care decision-making,' *DePaul Law Review*. Vol.51, pp.769-804.; Mutcherson, K.M. (2005) 'Whose Body is it Anyway? An updated model of healthcare decision-making rights for adolescents,' *Cornell Journal of Law and Public Policy*. Vol.14, pp.251-325.; Harvey, M.T. (2003) 'Adolescent Competency and the Refusal of Medical Treatment,' *Health Matrix*. Vol.13, pp.297-323.

⁵³ Manson (2015); Tucker (2016).

treatment but not refuse.⁵⁴ The issue of competency looms large in legal discussion of adolescent medical decision making, and the cases that involve adolescents close to majority, aged 17 and 10 months for example, present the most difficult cases. Some of the cases discussed also feature adolescents who are refusing medical treatment on religious grounds, such as Jehovah's Witnesses who refuse life-saving blood donation. Second, and relatedly, there is some discussion about an adolescent's right to consent to abortion.⁵⁵ Discussion focuses on who should make decisions in these cases (or be involved in making the decision),⁵⁶ as well as which decisions are most appropriate. Discussion of cases such as these have obvious legal implications. Sexual autonomy is also discussed.⁵⁷ This is often discussed in terms of the appropriate age for sexual consent.⁵⁸ Recently, in the UK context, there has been some discussion about lowering the age of sexual consent in Scotland. The debate about setting the threshold for sexual consent takes into account a child's right to choose for herself and recognises her as vulnerable to exploitation.

Some of the most involved discussion of adolescent responsibility is in relation to criminal responsibility and youth justice. There is little consensus across Western liberal societies about the age at which a child can be held criminally responsible (or even what it means to be criminally responsible). The minimum age of criminal responsibility ranges from (effectively) 0 up to eighteen. In some

⁵⁴ See *Gillick v West Norfolk & Wisbeck Area Health Authority* (1986).

⁵⁵ See, for example, Seymore, M.L. (2013) 'Sixteen and Pregnant: Minors' consent in abortion and adoption,' *The Yale Journal of Law and Feminism*. Vol.25, no.1, pp.99-158.

⁵⁶ Hill, B.J. (2012) 'Medical Decision Making by and on Behalf of Adolescents: Reconsidering first principles,' *Journal of Health Care Law and Policy*. Vol.15, pp.37-73.

⁵⁷ Brennan & Epp (2015).

⁵⁸ See for example, Carpenter et.al. (2014); Phipps, C.A. (2003) 'Misdirected Reform: On regulating consensual sexual activity between teenagers,' *Cornell Journal of Law and Public Policy*. Vol.12, pp.373-445.

jurisdictions concerns about young people's vulnerability and welfare mean that adolescents are not treated as though they are responsible in the way adults would be.⁵⁹ Concern for the future adults that young people will become may lead to welfare-based models of youth justice or, otherwise, strict and disciplinarian consequences for young people who break the law.⁶⁰

Tying the concept of responsibility to a person's 'evolving capacities', as a good deal of discussion about criminal responsibility does, raises several issues.⁶¹ First, which capacities are relevant and how should these capacities be measured, and thresholds set? Capacities that have been argued for include knowledge (of wrongfulness) and understanding (of criminality and its consequences).⁶² In some jurisdictions assessments of a child's cognitive, moral, emotional, psychological and social development of an accused child or adolescent is required. However, neurological evidence undermines the reliability of such assessments.⁶³ Second, it might be presumed that responsibility is gradually acquired as a person's capacities evolve. How can we make sense of partial responsibility, and who else is responsible when young people are not?⁶⁴ Third, what other factors might reasonably contribute

⁵⁹ See, for instance, Ryberg, J. (2014) 'Punishing Adolescents – On immaturity and diminished responsibility,' *Neuroethics*. Vol.7, no.3, pp.327-336.

⁶⁰ Campbell, T. (1992) 'The Rights of the Minor: As person, as child, as juvenile, as future adult,' *International Journal of Law and the Family*. Vol.6, no.1, pp.1-23. For a critique of the juvenile death penalty from developmental immaturity see Steinberg & Scott (2003).

⁶¹ Elliot, C. (2011) 'Criminal Responsibility and Children: A new defence required to acknowledge the absence of capacity and choice,' *The Journal of Criminal Law*. Vol.75, no.4, pp.289-308.

⁶² McDiarmid, C. (2013) 'An Age of Complexity: Children and Criminal Responsibility in Law,' *Youth Justice*. Vol.13, no.2, pp.145-160.

⁶³ Kramers-Olen, A.L. (2015) 'Neuroscience, moral development, criminal capacity, and the Child Justice Act: Justice or injustice?' *South African Journal of Psychology*. Vol.45, no.4, pp.466-479.

⁶⁴ See, for example, Difonzo, J.H. (2001) 'Parental Responsibility for Juvenile Crime,' *Oregon Law Review*. Vol.80, no.1, pp.1-108; Hay, M.E. (2009) 'Incremental Independence: Conforming the law to the process of adolescence,' *Wm. & Mary J. Women & L*. Vol.15, pp.663-684.

to a young person's ability to take responsibility for their actions, other than individual capacity?⁶⁵

Thinking about adolescent responsibility inevitably leads to many questions about what sort of rights young people should have, when they ought to acquire them, and what special obligations adolescents are owed from others as a result. Perhaps most interesting and important are the puzzles about which features of maturation are significant to a successful account of adolescence, the responses to which will form the foundations of any plausible account of adolescence. We want to know what freedoms are appropriate, what protections young people should be afforded, and how dilemmas that arise out of these conflicting concerns ought to be resolved.

Adolescents must cope with the challenges of sexual maturation, a partial independence (or, at least, living 'between two worlds'), risk negotiation, and taking on responsibilities. Although there are new responsibilities and expectations impressed upon young people during adolescence, for many there is a newfound desire for, sense of, and opportunities for, freedom. As one young person notes, freedom can mean more frivolity:

We've got less responsibility I'd say, than adults. Like they've been there and done stuff, like jobs, careers and stuff, but we've not done stuff yet, so it's like we're a bit freer, we haven't had to do that. So in a way they're more trapped, and we're a bit, not stupider, like easy-going, sillier, like not worrying so much about things. If we

⁶⁵ It has been argued that there are particular psychosocial factors that influence individual decision making in adolescence. Fried, C.S. (2001) 'Criminal Decision Making: The development of adolescent judgment, criminal responsibility, and culpability,' *Law and Human Behavior*. Vol.25, no.1, pp.45-61.

went and made a mistake it wouldn't mean that we'd lose a job, or not have money for a house or something. The worst that could happen is that you'd get kicked out of school, and then you go and do something else. It's like you're freer in a way to make mistakes and I suppose to take risks.⁶⁶

But freedom may also lead to problems for some young people. Risk-taking is often thought of as characteristic of adolescence, perhaps as part of their experimentation with ways of living, or as part of a rebellion against the establishment or dominant culture. Although adults remember adolescence as a time of rebellion, experiment, and risk-taking, many parents may worry that, in contemporary culture, there are different dangers and risks, perhaps exacerbated by the inaccessibility of the adolescent world by adults, and the more obvious contradictions in the messages that adolescents receive. Psychologically speaking, there is an asynchrony between drives, appetites and emotions and cognitive development that has been likened to starting an engine with an unskilled driver.⁶⁷ To put this another way, risk-taking is as a manifestation of a mismatch between freedom to act and capacity to choose well, or an inability to properly manage responsibility.

Adolescents often have increased self-consciousness, and concerns about 'fitting in' and 'finding oneself'. Lisa, who is 14 years old, expresses her anxiety about fitting in, and the difficulty that her parents' paternalism causes for her being accepted by her peers:

⁶⁶ (17-year-old boy) in Coleman (2011), p.10.

⁶⁷ For example, Dahl (2004).

It was OK at primary school. I had quite a lot of good friends, but it all changed when I went to secondary school. My parents say it is very important for young people to enjoy childhood and they think everyone is growing up too fast now. I look quite young for my age. I haven't started my period yet and I'm one of the last. But my mum makes it worse. She won't let me wear make-up or jewellery or trainers or any really nice clothes. She says it's "completely unnecessary" for me to have an iPhone, iPad or even a laptop. So I can't be on Facebook, Instagram, Ask FM, Snapchat. I can't even play Candy Crush Saga. Everyone at school is *obsessed* by it. Me and my brother aren't really allowed to watch TV, so we read a lot and do our school work very well. But I feel like I have nothing to talk to the other girls about. The boys don't notice me at all. This big boy the other day, maybe in Year 11, told me to "get the fuck back to nursery". I cried in the toilets because everyone in the corridor laughed at me.⁶⁸

A desire to make their own choices is one way that young people assert their independence, experiment with different identities, and 'try-on' adulthood. Whether or not adolescents are more likely to put themselves at risk, one thing is certain: adolescents want to take more control over certain aspects of their lives, and simultaneously may refuse (or be otherwise unable) to take control over other aspects. In this thesis I explore the conflict between adolescents' increasing capacity and desire to take control and parents' concerns for adolescents' welfare, and the multiple dimensions of powers and responsibilities, burdens and risks, across the areas of an adolescent's life.

⁶⁸ Combi (2015), pp.31-2.

In summary

Questions about how to treat adolescents are important. These kinds of questions are also particularly timely, and there is a case to widen the discussion beyond those areas typically discussed. In the media we hear about contemporary problems that we think of as being distinctively adolescent, such as gang-culture, experimental drug-use, 'sexting', revenge porn, internet grooming, eating disorders, cyber-bullying, and self-harming. We are told, for example, that mothers and fathers today '... [are] raising their kids in a culture that is meaner, ruder, cruder, more materialistic, more sexualised, more violent than ever before.'⁶⁹ Adolescents often make the news. At the time of writing recent headlines include 'Growing Pains,'⁷⁰ 'A Nation Stuck in Adolescence,'⁷¹ 'Send Naked Mole Rat Pictures Instead of Nudes Charity Urges Teenagers,'⁷² and 'Teenagers Sleep Quality and Mental Health at Risk Over Late-night Mobile Phone Use'⁷³.

How can adults support young people through, what is clearly a complex and sometimes difficult time, whilst respecting them as young people on the verge of adulthood? The development of an adolescent's ability to take authority over their own lives, their increased desire for independence from their parents, and the expectations that adults have of young people to take increased responsibility for

⁶⁹ Faber & Mazlish (2006), p.xvi.

⁷⁰ Munshi, N. & Hornby, L. (2017, May 15) 'Growing Pains,' *The Financial Times*. <https://ig.ft.com/special-reports/growing-pains/>.

⁷¹ VanderKam, L. (2017, May 15) 'A Nation Stuck in Adolescence,' *The Wall Street Journal*. <https://www.wsj.com/articles/a-nation-stuck-in-adolescence-1494889059>.

⁷² Mitchell, J. (2017, June 2) 'Send Naked Mole Rat Pictures Instead of Nudes, Charity Urges Teenagers' *Evening Standard*. <http://www.standard.co.uk/news/world/send-naked-mole-rat-pictures-instead-of-nudes-charity-urges-teenagers-a3555926.html>.

⁷³ Hunt, E. (2017, May 30) 'Teenagers Sleep Quality and Mental Health at Risk Over Late Night Mobile Phone Use,' *The Guardian*. <https://www.theguardian.com/lifeandstyle/2017/may/30/teenagers-sleep-quality-and-mental-health-at-risk-over-late-night-mobile-phone-use>.

themselves, commonly leads to difficulties between adults and their adolescents, and a closing down of channels of communication. Parents in particular often fear for the well-being or safety of their children as they enter this difficult stage of their lives. Understanding how adolescents come to have authority over their own lives and conversely, when adults can justifiably involve themselves with their children's lives (as well as the limits of their capacity to do so) will go some way to understanding how to best support adolescents (and make the most of the opportunities that adolescence offers).

Alongside the social awareness of the challenges facing adolescents, adolescence is increasingly considered an important period for intervention and for policy makers.⁷⁴ Developing a response to the question of how adolescents ought to be treated is therefore fundamental to supporting adolescents effectively and making the most of any opportunities that adolescence might offer, as well as solving the ethical dilemmas that arise out of legal questions. How adolescents ought to be treated is an urgent question that could have far-reaching impact on how future policy and legislation evolves.

The literature outside of philosophy, including sociology, psychology and anthropology, and adolescents' own words used in this chapter offer some useful insights into the nature of adolescence and begins to unpick some of the challenges that we face when describing the changes that occur during adolescence. First, the period of development between dependent childhood and 'independent' adulthood,

⁷⁴ Lerner, R.M. (1998) 'Adolescent Development: Challenges and opportunities for research, programs and policies,' *Annu. Rev. Psychol.* Vol.49, no.1, pp.413-46.; Sawyer et al. (2012); Resnick, M.D. et al. (2012) 'Seizing the opportunities of adolescent health,' *Lancet.* Vol.379, no.9826, pp.1564-1567.; Campbell (2005).

which we might refer to as adolescence, represents a highly complex and, sometimes, convoluted process. There are many developmental tasks that young people are expected to complete as they near adulthood and independence. Second, this process is fraught with risk and difficulty. Most notably, the success or failure of person's transition to independence is heavily reliant upon the relationships that individual has with others, and with the institutions and organisations that shape their lives. Third, during adolescence a person's *role* changes, as do their relationships to others. In adolescence a person is more likely to want to, or be able to, make decisions for themselves, but is also expected to take more responsibility for their own lives. These features describe elements that are characteristic of adolescence and also describe something of the social and political transition from childhood to adulthood. Building on this context, this thesis considers what it means to *treat* adolescents as adolescents.

As this chapter has shown, many important questions have been asked about adolescence which are focussed on areas that have legal implications, for example medical decision-making, youth justice, sexual consent. In particular, discussion in these areas tends towards making judgements about when to stop treating an individual as a child, and how to treat adolescents appropriately. Adolescence poses a problem in that there are norms that govern how children and adults ought to be treated, and, though it seems intuitive that adolescents should not be treated as either young children or adults, there is little consensus about their status. As I have described, there are challenges in theorising about adolescent status because adolescent trajectories vary from person to person, as does the adolescent experience. Furthermore, as I will explore in the following two chapters, existing

approaches are limited in their capacity to capture the nature of adolescence as a socio-relational transition. In this thesis I develop an account of development that draws on the conceptual methodology of 'spheres of activity' to overcome the difficulties that adolescence poses for philosophy. Thinking in terms of the spheres of adolescents' lives adds detail and complexity to an account of development, illustrating that the development from childhood to adulthood is not simply linear, but rather a multi-dimensional progression that encompasses all aspects of political and social life. Furthermore, because spheres of activity are inherently associative, my account recognises the central importance of changes in relationships and associations as children mature and near adulthood. These relational changes entail changes in the powers that children and adolescents have to act on their own accounts, and also changes in the responsibilities that they bear.

Chapter 2: Using children's rights as a starting point

The aim of this chapter is to engage with extant accounts within philosophy of children and look for any areas of agreement about the differences between children and adults, and the connection between childhood and adulthood. I take it that theorists broadly agree that: first, there is an expansion in agency interests (and relatedly, rights to choose, on some accounts); second, that this change is tied to children's developing capacities or competence. My intention is to use these areas of substantive agreement as a starting point from which to develop an account of adolescence. Before moving to my account in chapter three, I highlight the importance of three aspects of the transition from childhood to adulthood that are of central concern to an account of adolescence. Very briefly, these are: first, that there are different kinds of transitions and variation in the adolescent experience (as described section 1.2); second, that many relevant capacities that appear during the transition are specific to particular areas of an adult life, and that changes in these are not best captured by traditionally conceived broad categories of 'cognitive' and 'volitional' capacities; and third, that 'experience of agency', as Harry Brighouse puts it, is essential for children to develop the capacities to become competent agents.

2.1 Ideas about children

In early Modern philosophy, the moral status of children was given little consideration. Hobbes, for example, believed children had no liberty rights, only

duties of obedience to their parents.¹ In recent years, the moral and political status of children has been the focus of more extended philosophical enquiry. Since children entered philosophical discourse, the philosophy of childhood has become a domain of philosophy in its own right, and the moral, social and political status of children has become a topic of much debate. Children's rights theorists have discussed whether children as a group of individuals distinct from adults, can have particular types of rights, or whether they can have rights at all, as well as the content, scope and power of those rights. In this section, I highlight areas of broad agreement about the differences between children and adults, and the connection between childhood and adulthood. First, there is a general consensus that children are the legitimate subjects of paternalism (constrained by the interests of the child, *qua* child, and the interests of her future self), particularly within their relationships with parents or other guardians. Second, children are thought to be the kind of beings that will become independent rights-holders as they mature, even if young children cannot be rights-holders on some accounts. Furthermore, there is agreement that, as they mature, children become the kind of beings that have agency interests, and that can increasingly bear and exercise liberty rights, or rights that protect their choices, on some accounts. Third, there is a consensus that children are 'beings who initially lack capacities for autonomous self-direction but who can acquire these capacities as they mature.'² It is this idea about children that constrains parental paternalism, and many children's rights theorists see the

¹ Hobbes, T.; C.B. Macpherson (ed.) (1968 [1651]) *Leviathan*. London: Pelican.; part II, Chap 20, 4-9, pp.253-256.

² Archard, D. & Macleod, C.M. (2002) 'Introduction' in Archard, D. & Macleod, C.M. (eds.) *The Moral and Political Status of Children*. Oxford: Oxford University Press; p.6.

development of these capacities as relevant to whether or not children can correctly be described as rights-holders, and to the type and scope of those rights. Several theorists explicitly indicate that the appearance of relevant capacities is gradual and that children differ from adults by degree so that some children (adolescents) are more like adults than others (infants).³

2.1a Parents and children

The widely accepted ‘constrained paternalistic’ view of children and childhood is based on a conception of children as incomplete or proto-adults.⁴ On this view children are considered to gradually acquire the capacities and abilities of adults and are therefore, for a period of time, in a state of vulnerability and incompetence. This feature of childhood limits parental paternalism in that it should be exercised for the child’s own good and is only justified insofar as the child is unable to make choices for herself, until such a time that she is able to make choices for herself.⁵ The question of how much (and what sort of) influence parents ought to have on the lives of their children has led to an increasing body of work in philosophy and ethics

³ LaFollette, H. (1999) ‘Circumscribed autonomy: Children, care, and custody,’ In Narayan, U. & Bartkowiak, J.J. (Eds.) *Having and raising children: Unconventional families, hard choices, and the social good*. University Park, PA: Pennsylvania State University Press.; Brennan, S. (2002) ‘Children’s Choices or Children’s Interests: which do their rights protect?’ in Archard, D. & Macleod, C. (eds.) *The Moral and Political status of Children*. Oxford: Oxford University Press.; Brighouse, H. (2002) ‘What Rights (if any) do Children Have?’ in *The Moral and Political Status of Children: New Essays*, D. Archard and C. Macleod (eds.), Oxford: Oxford University Press: 31–52.

⁴ Archard & Macleod (2002), p.2.

⁵ One might note that this looks like soft paternalism, where paternalism is justified because of a lack of capacity.

on parental authority.⁶ The issue of who shapes the lives of children and young people, and when and how young people ought to have more say-so in the shaping of their own lives are central to the question of how adolescents should be treated. For this reason, questions about parental authority, and in particular the possible conflict between parental authority and children's autonomy (now, as well as their future capacity for autonomy), are pertinent to my thesis, and so it useful to say a little about parental authority here.

Parental authority might otherwise be understood in terms of parental rights to make choices on behalf of their children. The rights themselves make sense insofar as parents have particular obligations to their children. Jeffery Blustein, for instance, has argued for the 'priority thesis', on which parental rights to manage the lives of their children are only warranted, and are constrained by, the morally prior duty of care that parents have to their children.⁷ Parents are 'commonly thought to have special and particularly strong moral responsibilities to their children.'⁸ Parents stand in a special role relation to their child that means they owe things to that

⁶ Feinberg, J. (1980) 'A Child's Right to an Open Future', in *Whose Child? Parental Rights, Parental Authority and State Power*, W. Aiken and H. LaFollette, H., Totowa, NJ: Littlefield, Adams, and Co. 124–153. Ruddick, W. (1979), 'Parents and Life Prospects,' in O'Neill, O. & Ruddick, W. (eds.) *Having Children: Philosophical and Legal Reflections on Parenthood*. New York: Oxford University Press); Archard, D. (2003) *Children, Family and the State*. Aldershot: Ashgate; Crocker, L. (1979) 'Meddling with the Sexual Orientation of Children,' in O'Neill, O & Ruddick, W. (eds.) *Having Children: Philosophical and legal reflections on parenthood*. New York: Oxford University Press, pp.145-154; This work encompasses questions about the limits of parental authority and a child's right to an open future, and parental authority and state interference.

⁷ Blustein, J. (1982) *Parents and Children: The Ethics of the Family*. Oxford: Oxford University Press.

⁸ Macleod, C.M. (2011) 'Parental Responsibilities in an Unjust World,' in Archard, D. and Benatar, D. (eds.) *Procreation and Parenthood: the ethics of Bearing and Rearing Children*. Oxford: Clarendon Press.; p.128. I understand parental obligations to be the 'responsibilities of acting as a parent.' Archard, D. (2011) 'The Obligations and Responsibilities of Parenthood,' in Archard, D. and Benatar, D. (eds.) *Procreation and Parenthood: the ethics of Bearing and Rearing Children*. Oxford: Clarendon Press.; p.104. Note that Archard makes a distinction between the parental obligation that ensures someone parents the child, and the parental responsibilities of acting as a parent. There is much to say about what parental obligations consist in, and I put this to one side for now.

particular child that they don't owe to all children. Henry Sidgwick wrote that 'the parent, being the cause of the child's existing in a helpless condition, would be indirectly the cause of the suffering and death that would result if neglected.'⁹ Parents should act in an appropriate way to care for their children, or, in other words, promote their interests. Parental rights give parents the power to make decisions about how to raise their children as they see fit, in the way they believe their children's interests are best advanced.

The way parents (and others) shape the lives of children will have an impact on what sort of adult the child becomes in the long run, as well as on the child as a child. Limits on parental interference in the lives of their children might be justified by the degree to which a child is able to make decision for herself and by impact that parental interference has on the child's future self. Feinberg, for instance, argues that recognising this future-focussed right will alter the way that parents raise their children.¹⁰ In a similar vein, William Ruddick formulated his Prospect Provision Principle (PPP) which stated that,

A parent must foster life prospects which

1. jointly encompass the futures the parents and those they respect deem likely, and
2. individually, if realized, would be acceptable to both parent and child.¹¹

⁹ Sidgwick, H. (1982 [1874]), *The Methods of Ethics*. Chicago: University of Chicago Press, p.249. There are several theories of parenthood, of which 'causal theory' is one. If we accept that causation is the best account of how a person becomes a parent, there are questions to answer about how people become parents when the line of causation is less clear than coital reproduction, in cases such as gamete donation for example.

¹⁰ Feinberg, J. (1980).

¹¹Ruddick (1979), p.130.

That is to say, that recognising or, more strongly, *fostering* a child's autonomy (in balance with parents' aspirations) has an effect on when and in what way an adult shapes the life of a child. The fostering of a child's long-term autonomy as a justification for parental action also provides new reasons for parents to be involved in the decisions that a child faces, or to step back and allow more independence. In practical terms, one of the features of parenting is enabling one's child to become independent from you in the long run. In philosophical terms this may be understood as becoming autonomous, an agent, or a competent decision-maker.¹²

One way to understand parental rights (and obligations) is as stewardship rights. As Brennan and Noggle describe:

A stewardship right is a right someone has in virtue of being the steward-as opposed to an owner-of someone or something. This conception of parental rights explains both why children's rights take priority over most other considerations and why parents still have much freedom to raise their children.¹³

Parents should act in such a way as to look after their children as if on behalf of the children themselves, as guardians, not as if the parents have ownership rights over them. As the child matures and her interests and needs change, so do the kinds of

¹² Renowned paediatrician, D.W. Winnicott, described how parental authority interacts with a child's decision-making and, in fact, enhances decision-making over time.; Winnicott, D.W. (1993) *Talking to Parents*. Cambridge, Mass: Perseus Publishing. He described the three stages of saying "no". These start with the parents' need to assume full responsibility for the child's limits in her first year. In the second year, the parent teaches the child the word "no". Then, in the third year, turning it back to the child, the parent gives her verbal explanation, therefore enlarging her choice-making experience and her ability to incorporate the limits given by her parents into her own action.

¹³ Brennan, S., & Noggle, R. (1997) 'The moral status of children: Children's rights, parents' rights, and family justice,' *Social Theory and Practice*. Vol.23, no.1, pp.1-26; pp.11-12.

obligations that give rise to parental stewardship rights. As Elizabeth Brake writes, 'parental rights and obligations are attached to socially constructed institutional roles'¹⁴ and both the parental role and attached rights and obligations change as children get older and become more independent.

Not all parents do a good enough job of protecting their children's interests, and in cases of neglect and abuse the state can step in to ensure the safety of children. In real life, the quality and efficacy of support systems for families varies, and many children are let down by the services that are in place to protect them. However, in theoretical terms, in many jurisdictions, structures are in place that mean that parents are not free to treat their children in any way they like, and there are standards for what is considered acceptable parenting. In other words, the powers that parents have to make, and act on, decisions for their children, are shared with the state, a point that we will return to in our discussion of consent to medical treatment in chapter six. As they mature, children might have more influence in the decisions that shape their lives, until the parents have no influence at all. At this point older children, adolescents, share some decision-making powers with the state. We see this model in medical-decision making in the UK, and in legal cases such as custody cases. In such cases, parents stand as an intermediary between institutions and younger children. As children mature, they are more likely to be consulted directly by the institutions that shape their lives.¹⁵ We might think about

¹⁴ Brake, E. (2011) 'A Voluntarist Account of Parental Role Obligations' in Archard, D. and Benatar, D. (eds.) *Procreation and Parenthood: the ethics of Bearing and Rearing Children*. Oxford: Clarendon Press.; p.151.

¹⁵ On the question of how much weight to give a child's views see: Archard, D. & Skivenes, M. (2009) 'Balancing a Child's Best Interests and a Child's Views,' *International Journal of Children's Rights*. Vol.17, pp.1-21.; Brighthouse, H. (2003) 'How Should Children be Heard?' *Arizona Law Review*. Vol.45, pp.691-711.

these changes in terms of changes in the type of, or scope of, children's rights, and it to children's rights that I now turn.

2.2 Children's rights: some approaches and some agreement

The paternalist model points towards the kind of transition that an account of adolescence needs to capture. During the transition from childhood to adulthood an individual is able to take increasing control over her own life and she does so by making and acting on her own choices.¹⁶ In this section, I take a closer look at this idea within the children's rights literature.

In the English-speaking world, much philosophical discussion about childhood, and therefore any discussion of the transition from childhood to adulthood, is defined by the liberal account of adulthood, and understandably so, as this is the destination for most children and adolescents. On this view the adult is an independent, rights-bearing agent. Much contemporary moral, political, and legal discourse concerning adults has come to be conducted in terms of rights.¹⁷ The same is true of moral, political, and legal discourse concerning children. In what follows I explore some of the key claims that have been made in recent discussions about children's rights and how they might relate to the project of a philosophy of adolescence. What follows is not a comprehensive review of the children's rights

¹⁶ It could be argued that even the proprietary thesis about children points towards similar ideas of taking control of one's own life in adulthood, despite framing this change not in terms of capacity to choose or autonomous agency, but rather self-ownership.

¹⁷ Campbell, T. (2004) 'Series Preface,' in Freeman, M. (ed.) *Children's Rights (Vol.1)*. Aldershot: Ashgate; p.ix.

literature. Rather, the intention is to show that despite differing approaches to understanding children's rights, there are some shared ideas about the relationship between childhood and adulthood that are relevant to the advancement of my thesis. For orientation, I believe there is twofold agreement between theorists when it comes to the relationship between childhood and adulthood. First, as children mature, their rights change to protect their choices and liberty rights appear. On some accounts, the interests that children have increasingly include agency interests or interests to choose for oneself. I take it that the underlying agreement here is that there is an expansion in agency interests, which may lead to an expansion in rights to choose. Second, there is a general agreement that these changes track, or are allied to, changes in the child's capacities. I aim to show this by dividing the debate about children's rights into two parts. First, I look at the debate as to whether it is appropriate to think of children as rights-bearing. Second, I look at the discussion about what children's rights are like in terms of their nature, scope and content.

2.2a Should children have rights?

Broadly there are three responses to this question. First, children should have rights, and they should be the same as adult rights. Second, children should have rights, but they should not be the same as adult rights. Third, children should *not* have rights.

Some philosophers have argued that children should have equal rights to adults as part of a movement that is known as the Children's Liberation Movement.¹⁸ Supporters of this position have variously defended the view that children ought to have equal rights (to adults) if they should wish to make use of them,¹⁹ that children ought to have equal rights (to adults) 'unless relevant differences [between adults and children] can be demonstrated,'²⁰ and that though children should have equal rights (to adults), children's representatives (presumably parents or guardians) ought to choose for children as the children would choose if they were capable of choosing for themselves.²¹ On the face of it, theories calling for equal rights for children seem untenable, given the special position that children are in in terms of their vulnerability and their lack of experience. Nevertheless, the Children's Liberation Movement, at the very least, highlighted the importance of children's autonomy.

One of the very earliest contributors to the Children's Liberationist movement, psychiatrist Robert Ollendorf argued for the adolescent's right to self-determination.²² In his essay 'The Rights of Adolescents', Ollendorf describes that his project is to 'decide what the rights of adolescents are, or what the young person's

¹⁸ For variations on this position see Hart, H.L.A. (1973) 'Bentham on Legal Rights', in *Oxford Essays in Jurisprudence*, 2nd series, A. W. Simpson (ed.) Oxford: Clarendon Press, pp.171–201.; Farson, R. (1974) *Birthrights*. London: Collier Macmillan.; Holt, J.C. (1975) *Escape from Childhood: The Needs and Rights of Children*. Harmondsworth: Penguin.; Cohen, H. (1980) *Equal Rights for Children*, Totowa, NJ: Littlefield, Adams, and Co.

¹⁹ John Holt (1975, p.18) for instance, wrote: 'I propose that the rights, privileges, duties, responsibilities of adult citizens be made *available* to any young person, whatever their age, who wants to make use of them.'

²⁰ Cohen (1980) p.45, argued that 'the differences between adults and children, such as they are, have been way overstated by those who support the double standard. Children are presumed weak, passive, mindless, and unthinking; adults are presumed to be rational, highly motivated, and efficient. The picture is drawn too sharply, of course, and nobody pretends that there are not exceptions. The trouble, however, is that a decent account of equal rights for children cannot be based on the exceptions. If it is, we have only adjusted the double standard; we have not eliminated it.'

²¹ Hart (1973), p.184 n. 86.

²² Ollendorf, R. (1971) 'The Rights of Adolescents,' in Adams et al *Children's Rights: Toward the Liberation of the Child*. New York: Praeger; p.120.

role in society and in the family should be, and to understand the different forces that act upon the adolescent, some the forces of growth, others more hostile forces...'²³ The psychoanalytic and anthropological discussion is of its time, and of limited interest to my thesis. Ollendorf does however list several rights of the adolescent, which together call for the recognition of autonomy in adolescence, which I have already suggested becomes particularly important during this period of development. Among the rights he argues for is the adolescent's basic right to self-determination. This is the right of the adolescent to find her own way and determine for herself what she wants and does not want in all aspects of her life and learning, and leads to other derivative rights such as the adolescent's right to participation and her right to association. In later chapters, I go on to argue that both association and participation are key characteristics of development and are of central importance to changes in status as children mature.

Laura Purdy has opposed the child liberationist's view in her work *Against Equal Rights for Children*.²⁴ Broadly, her point is not that children do not or should not have rights, but rather that there are good reasons to think that children should

²³ Ibid. p.91

²⁴ Purdy, L.M. (1992) *In Their Best Interest? The Case Against Equal Rights for Children*, Ithaca and London: Cornell University Press. Purdy (1992, p.214-5) argues 'First, by severing the asymmetrical legal ties that now bind parents and children together, equal rights would weaken appropriate parental authority. Two critically important consequences could be expected to follow. One is that parents would be more reluctant to provide for their children the kinds of early training that now appears to be necessary for responsible and moral behaviour later. The other is that adolescents would be less likely to take their parents' guidance seriously. Both of these consequences could reasonably be expected to have detrimental effects not only on children's own well-being but on their ability to participate constructively in a good society... Second, equal rights would require abolition of compulsory schooling. While it is obvious that there is a good deal the matter with the schools at present, it doesn't follow that what is the matter could best be gotten rid of by undermining their authority in this way... Third, equal rights would propel many children into the workplace at an early age, where, without education, they would be prepared for only the most menial jobs. There they would be subject to the uncertainties of fluctuating demand and might survive only by exposing themselves to various hazards or underbidding other needy workers.'

not have *equal* rights to adults. Her argument is that a valuable adult life relies on having acquired a particular set of character traits. In order to acquire these traits, children should not be allowed to make their own choices as part of their being nurtured and supported (and disciplined) into adulthood. Giving equal (adult) rights to children is therefore bad for children, and for the adults that those children will become, because equal rights would limit how much influence adults could have on the child's life. This account is important as it acknowledges that a child's development needs to be nurtured and shaped. More strongly, because of the vulnerable and dependent position that children are in, their lives are unavoidably shaped by their relationships with other people, as well as the institutions and organisations that protect, support, and provide for them. We might assume that, on Purdy's account, as children begin to acquire the traits required for a valuable life, they require less input from adults, and therefore they should be allowed to make more decisions for themselves.

Among the theorists that endorse a 'choice' view of rights in general is James Griffin who has argued that since rights can only protect choices and children cannot choose for themselves, children can have no rights.²⁵ Griffin argues that since 'human' rights (which he distinguishes from legal rights) are best interpreted as 'protections of our human standing, our personhood' by which he intends human agency, it follows that those incapable of agency, such as young children, should not be accorded human rights.²⁶ This is a threshold account in that there is a minimum requirement for their having rights, in terms of capacity, and the only distinction that

²⁵ For example, Sumner, L.W. (1987) *The Moral Foundation of Rights*, Oxford: Clarendon Press.

²⁶ Griffin, J. (2002) 'Do Children Have Rights?' in *The Moral and Political Status of Children: New Essays*, D. Archard and C. Macleod (eds.), Oxford: Oxford University Press; p20.

matters is between agent and non-agent. On accounts such as Griffin's rights are tied to an individual's capacities, and rights are acquired when an individual can be properly described as having the capacities associated with agency. A potentially worrying implication of arguments such as Griffin's, is that those children who cannot properly be described as agents in the relevant sense, for instance infants, cannot be rights-bearers. However, accounts such as Griffin's do not deny that others have obligations to care and protect non-agents, only that the obligations that we have to care for and to protect or promote the welfare of these individuals are not connected to rights.

So, what common ground do these contrasting positions share? First, at the simplest level, all these theorists draw on or respond to the constrained paternalist model that I have described. Second, in each case, the rights that seem most relevant to the transition between childhood and adulthood are those associated with choice, control, or agency. Third, all these accounts recognise that there are changes that the child undergoes in terms of their capacities that entail changes in the status of the child; even the liberationists position does not preclude there being relevant differences that entail changes in who should make decisions for the child.

Alternatives to right-based approaches

Before moving on to outline various positions on what children's rights are like, I want to highlight that there are alternative approaches to considering the status of children. Onora O'Neill argues that the starting point for thinking about what we owe

to children should be a specification of our obligations to them.²⁷ For O’Neill there are obligations called perfect obligations, which might be owed either to all children or specified children. These obligations are perfect in that the content of the obligation is identified exactly, as is the subject to whom the obligation is owed. Adults also owe imperfect obligations to children. Imperfect obligations are those of caring for children to whom we do not, as particular role holders, have specific obligations. The important distinction is that perfect obligations correlate with rights, imperfect obligations do not. This means that, if rights are taken as the starting point for identifying children’s interests, imperfect obligations will not be captured. Furthermore, recognisable features of many adult-child relationships are left out of a rights-based framing, such as obligations to be kind, or involved in a child’s life.

Developing an alternative approach to thinking about children, based on an ethic of care, Barbara Arneil critiques the liberal construction of the child as a citizen in waiting, a ‘becoming’ rather than a being in their own right.²⁸ The idea that a child is ‘becoming’ captures the notion that children do not yet possess the attributes of reasoning and self-governance needed to qualify as a ‘being’ in the traditional liberal sense. She argues that since theories of children’s rights have grown out of this characterisation of children as liminal, or lacking, they ignore much of what is important about a child’s maturation. Arneil’s suggestion is that ethics of care and recognition of the relationships that exist between persons should be taken

²⁷ See O’Neill, O. (1988) ‘Children’s Rights and Children’s Lives’, *Ethics*. Vol.98, no.3, pp.445–463.; Steiner, H. (1998) ‘Working Rights’, in Kramer, M.H., Simmonds, N. & Steiner, H., *A Debate Over Rights: Philosophical Enquiries*. Oxford: Clarendon Press.; See also Arneil (2002) ‘Becoming versus Being: A Critical Analysis of the Child in Liberal Theory’, in *The Moral and Political Status of Children: New Essays*, D. Archard and C. Macleod (eds.), Oxford: Oxford University Press: 70-94.

²⁸ See Arneil (2002), pp71-5.

seriously, rather than being subsumed into the rights-based ethic of the public liberal male.²⁹ The focus on rational capacity during the transition from child to adult ignores 'the organic or multifaceted nature of maturation, and the care required beyond education to guide this process.'³⁰ Furthermore, on the traditional right-based account, the child is typified as 'unencumbered' and isolated from others' interests. Arneil's arguments therefore call for an account that brings more into play than just rights. More important, and more fitting, is an examination of the relationships that children have with others (and with institutions) alongside a more detailed analysis of the process of development from one sort of being to another. Rights-talk may well be consistent with Arneil's view, but I would suggest rights are very much secondary to other considerations. In the account I go on to develop in chapters three, four, and five, I take these other considerations seriously and offer more detailed analysis of the transition children undergo into adulthood.

There is a third, alternative, position that argues that the relational features of parent-child relationships and familial relationships in general entail particular features that just can't be captured by talk of rights or duties owed.³¹ Ferdinand Schoeman's starting point is that relational aspects of our moral experience have been ignored in favour of abstracted features of the relationships we hold, in particular individual autonomy. He argues that the categories that philosophers use,

²⁹ Ibid., p.74.

³⁰ Ibid., p.81.

³¹ Schoeman, F. (1980) 'Rights of Children, Rights of Parents, and the Moral Basis of the Family', *Ethics*. Vol.91, no.1, pp.6–19.; Schrag, F. (1980) 'Children: Their Rights and Needs', in W. Aiken & H. LaFollette, H. (eds.) *Whose Child? Parental Rights, Parental Authority and State Power*. Totowa, NJ: Littlefield, Adams, and Co.: 237–253.; Ruddick, W. (1999) 'Parenthood: Three Concepts and a Principle,' in *Morals, Marriage, and Parenthood*, L. D. Houlgate (ed.) Belmont, CA.: Wadsworth, pp.242-51.; Hoekema, D. (1990) 'Trust and Punishment in the Family', in Moffett, R.C.L., Grcic, J. & Bayles, M. D. (eds.) *Perspectives on the Family*. Lewiston, NY: Mellen Press.

such as rights, misrepresent the nature of our relationships, and cannot properly capture the intimacy and love between individuals. His claim is that intimacy, and not just the best interests of the child, is essential to properly characterising the parent-child relationship and provides the basis for parents' claims to raise their children in the context of the private family. The sense in which he uses the term 'intimate' uncovers a connectedness between persons that individual rights fails to capture. He writes, 'Not only have many ... abstract philosophical issues about rights been argued inconclusively, but for the most part we can do without talk about children's rights and can express ourselves instead in terms of the needs and welfare of (small) children and the duties of their parents.'³²

2.2b What are children's rights like?

We have already seen that, on choice theories of rights, attributing rights to children is problematic because rights are commonly grounded upon some conditions of agency or capacity that children lack.³³ In this section I look at two different positions, broadly conceived. First, I look at theories of children's rights that describe a change in the type of rights that children have as they mature. Second, I look at the

³² Schoeman (1980), p.7.

³³ Though the special position that children are in appears to most naturally fit the view that children's rights are interest rights, there have been attempts to defend the view that children can have choice rights. For instance, H.L.A. Hart, a defender of the will (or choice) theory of rights, argued that the will theory can be modified to accommodate children's rights by allowing children representatives (presumably parents or guardians) to make the choices that the children would choose, if they were capable of choosing for themselves. (Hart (1973), pp.171–201.) The representatives only choose on behalf of children when the children are themselves incapable of exercising their own choice. Of course, this starts to look less like children so actually have the rights because they don't make the choices.

position that, since rights only protect interests, the type of rights that children have do not change, but the interests that children have do.

The discussion about the nature of children's rights presumes the view that there are important differences between adults and children. Children are vulnerable in a way that adults are not, they lack certain skills and capacities that adults possess, and they are inexperienced decision-makers. Children may also lack other faculties that adults have in their majority, whether rationality, agency or some other construct relating to maturity or independence. This classification of children, as liminal beings in a state of deficiency, presumes a transition between the two states. Theorists of children's rights engaging with the relationship of childhood to adulthood must grapple with the difficult question of how best to express the relevant differences between adults and children, and how to account for the transition between the two different states.

Samantha Brennan and Robert Noggle offer a rights-based account that articulates the difference between children and adults.³⁴ Though adults and children should be given equal moral consideration, they should not be *treated* equally. On their account there are some rights held by adults that children cannot have. These are 'role-dependent' rights. They write:

A person's moral rights and duties typically depend on many other things in addition to her status as a person. Roles, for example, often confer moral status. ... Roles also

³⁴ Brennan & Noggle (1997).

sometimes confer rights: one's role as a student confers certain rights against her teachers, for instance.³⁵

The rights a person has are dependent on the role they fill, and a person can only have a role-dependent right if they can fill the associated role. Given this, children lack some of the rights that adults have because they are less mature, less capable, and lack the capacities necessary to fill the role associated with those rights. They write:

Consider the right to drive an automobile. ... It depends ... on a person's occupying a certain role, what we might call the role of "driver." Like other roles, the role of driver is a complex of rights and duties. And like other roles ... it requires certain qualifications consisting of skill, judgment, training, and so on. ... We do not deny this right to children simply because they are children, but because they lack the relevant abilities.³⁶

The change between childhood and adulthood on this account is a change in rights, but also a change in social role. The social relationship that a person has to others, and the possible roles that a person can hold, tracks their capacities and abilities as they mature. In Brennan and Noggle's example, the 'role' of driver entails a particular set of rights. Though, in this case, the rights look more like legal rights than moral

³⁵ Ibid. p.6.

³⁶ Ibid. p.8.

rights, we can substitute the driver role for the parental role. We can see that in the parental case, this role also entails a particular set of rights as well as responsibilities, and that in this case, are a mix of legal and moral rights and responsibilities.

Alongside these, the successful parent also needs to have certain skills, and be able to make particular judgements.

Another theorist who has tried to articulate both the change and differences between children's and adult's rights as well as the connection between them is Feinberg. He developed a complex account of rights that distinguished between rights belonging only to adults (A-rights), rights that are common to both adults and children (AC-rights), and rights that only children have (C-rights).³⁷ On his account C-rights are sometimes referred to as protection rights, which are distinct from welfare rights. This is because on Feinberg's account both A-rights and AC-rights include welfare rights. Within the class of C-rights are special 'rights-in-trust' which are a sub-class of rights which he describes as 'anticipatory autonomy rights'. These rights are surmised as the 'right to an open future,' and ensure that the child will be able to most effectively exercise her AC- and A-rights when she becomes an adult. On Feinberg's account, the type of rights that an individual has changes as she matures.

In a similar vein, in her work on the changing nature of individual rights between childhood and adulthood, Brennan endorses an account of rights reflecting gradual change, that we might call a *gradualist* account. According to Brennan, children change from the sort of beings whose rights protect their interests, to the sort of beings whose rights protect their choices as they mature.³⁸ She writes,

³⁷ Feinberg (1980).

³⁸ Brennan (2002), p.54.

'...rights first protect interests (in the case of the very young) and later protect choices (in the case of fully autonomous adults) and in the middle defend a mix of the two.'³⁹ In the background is the thought that, although many young children do not choose well for themselves as they have unstable long-term preferences, and it makes little sense for children's rights to protect their choices, this does not preclude the protection of children's *interests* by their rights. Brennan argues that children have interests though not the ability to protect those interests themselves. Importantly, Brennan argues that, over time, children become more able to make choices for themselves as they mature and are assumed to have more stable long-term preferences. Children, therefore will become, as adults, autonomous choosers.⁴⁰ In reality, children's ability to form preferences and their ability to make choices is only part of the story. A key change is that over time many of the choices that children make will be respected by others. One way that children's choices are restricted when they are young is to simply not offer a choice. The other way children's choices are restricted is by 'blocking' or overriding the choices. In this instance, a child might express a preference for a large bar of chocolate at breakfast time, but the parent can say 'No, that is a terrible way to start the day!' This highlights the social context of choices, and the importance of relationships to the *effectiveness* of a person's choices.

All of the accounts described so far articulate the change between childhood and adulthood in terms of a *change* in rights. Now I turn to accounts that argue for an interest theory of rights and that see both children's and adult's rights as

³⁹ See Brennan & Epp (2015); Brennan (2002).

⁴⁰ Brennan (2002), p.65.

protecting interests. What changes on these accounts as children near adulthood is not the *type* of rights that they have but rather the *scope* and *content* of those rights.

One general criticism of theories such as Brennan's is that it does not make sense to think about adult rights solely as protecting choices.⁴¹ One way to get around this might be to find a way to reconcile interest-protecting rights with choice-protecting rights. Neil MacCormick offers one such argument, which also results in a form of rights gradualism.⁴² MacCormick argues that all rights share the common foundation of protecting a person's interests, and, given this, rights will sometimes protect interests directly, and sometimes protect interests best by protecting choices. This is because people (adults) are best placed to know what their interests are, and therefore the choices they make will advance their interests. Children are, of course, excluded from this framework as they are not the best judges of their interests.⁴³ At some point, children's interests begin to be best protected by choice-protecting rights. This happens gradually over time as children become better judges of their own interests.⁴⁴

In fact, Brennan rejects MacCormick's argument on the grounds that it is false that (adult) people do promote their own interests best by choosing for themselves. She also rejects the claim that choice rights can be reconciled with interest rights because people have a desire to choose for themselves, and in some cases, make

⁴¹ I am not convinced this is a view that Brennan would endorse. Rather, I believe the framework she presents is designed to simplify the complexity of the transition, but this does not adequately represent the nature of adolescence.

⁴² Brennan (2002), p.63.

⁴³ MacCormick, N. (1982) *Legal Right and Social Democracy: Essays in Legal and Political Philosophy*. Oxford: Clarendon Press, p.165.

⁴⁴ 'Judging one's own interests' might not be the right way to get to the core of the liberal ideal. It is not that one is allowed discretion *because* one is in the best epistemic position. In the end, whether or not you are the best judge, it is *still* up to you.

their own mistakes. Rather, choosing for oneself is a good in itself, whether or not a person has a desire to choose for themselves. Her preferred justification for the gradualist account of rights is that children change from 'being the sort of being who has interests but not the ability to protect them oneself to becoming a fully-fledged autonomous chooser.'⁴⁵ We might worry that Brennan's characterisation of the adult as 'fully autonomous' is false, depending on how we understand autonomy. Suffice to say that our choices as adults are always constrained, limited, or framed by our relationships to other people, our environment, and the institutions and organisations with which we interact, albeit by degree and for different reasons than in the child case. Furthermore, there are certainly instances in adulthood where, though we are autonomous agents in the most reasonable sense, our rights do not protect the choices that we make, or otherwise protect our interests over and above our choices, for example when a person wants to be medically euthanised in the UK.

Harry Brighouse agrees with MacCormick that rights protect interests.

Brighouse argues that the interests of children are distinctive to the interests of adults, drawing on the work of Robert Goodin and Dianne Gibson. Goodin and Gibson respond to the charge against the choice theory of rights, that because children are not competent choosers they cannot be ascribed rights. They argue that an alternative model of rights, grounded in one having 'interests that are recognisable by others who are duly empowered ... to press those claims on one's behalf',⁴⁶ makes sense of ascribing children rights. Recognising an adult's rights will mean, at least in part, finding out about their preferences. But children 'to whom no

⁴⁵ Brennan (2002), p.65.

⁴⁶ Goodin, R.E., & Gibson, D. (1997) 'Rights, young and old,' *Oxford J. Legal Stud.* Vol.17, no.2, pp.185-203; p.188.

long-term preferences can reasonably be ascribed' have interests that make 'no reference to their contingent preferences.'⁴⁷ That is, we can recognise that children have interests in being protected, cared for, nourished, and raised. Building on this, Brighouse looks at the complex relationship between agency rights and welfare rights and develops an argument that welfare rights are valuable for the exercise of agency rights in that having our welfare interests guaranteed enables us to pursue our interests in agency. Furthermore, adults having agency rights to waive their welfare rights is important to their wellbeing. Brighouse writes:

It is better for [mature and competent persons], usually, to pursue an activity with which they identify than one which goes against the grain of their fundamental commitments, even when the latter is, in some sense, objectively better.⁴⁸

Ultimately, Brighouse is arguing that agency rights are grounded on a competence requirement. Moreover, agency rights matter for well-being because having a choice is an important part of feeling identified with an activity.⁴⁹ He goes on to argue that young children cannot be ascribed agency rights because children, by virtue of their immaturity and developmental stage, lack basic abilities to reason, self-knowledge, and access to resources. However, as they mature, children develop these abilities and, in fact, differ from adults by degree. He writes:

⁴⁷ Brighouse (2002), p.37.

⁴⁸ Ibid., p.39.

⁴⁹ Ibid.

...competence and rationality are matters of degree: the idea is that there is a threshold of competence and rationality above which it is appropriate to grant these agency rights, but below which it is not. The existence of a threshold does not mean that what is at issue is not a matter of degree; it just makes it appropriate to treat someone above the threshold qualitatively differently than someone below it.⁵⁰

On Brighouse's account then, rights always protect interests, but over time, as children mature and their capacities change, the content of their interests change to increasingly include a contribution from their agency. In adulthood, a person's agency rights 'are vital because of their indirect contribution to well-being, rather than because choice is given intrinsic value of its own.'⁵¹ Brighouse makes several useful points on the difference between childhood and adulthood being a matter of degree, and I return to Brighouse's account in section 2.3.

The accounts that I have presented in this section have highlighted what I take to be some general consensus within the children's rights literature. First, the accounts have all recognised a particular kind of change that occurs for children as they mature. This is either cast in terms of the appearance of rights that protect choices or the appearance of interests in choosing for themselves. Those who defend a will/choice theory of rights say that rights appear as children become agents. Those who defend an interest theory of rights say that interests increasingly include agency interests as children mature into adults. Finally, those that defend a mix of choice and interest rights say that children change from the sort of beings whose rights protect interests to the sort of being whose rights protect choices. Second, the

⁵⁰ Ibid., p.45.

⁵¹ Ibid., p.39.

changes that these accounts articulate are allied to changes in children's capacities. The type, scope or content of an individual's rights tracks developments in relevant capacities. Because it is this general agreement that matters to the advancement of my thesis I can remain agnostic as to which account of children's rights is most plausible. These two substantive points of agreement in the literature are the starting point for the account of adolescence that I will present.

2.3 Two important considerations for moving forward

Rhonda Gay Hartman laments that, 'Inarticulate scrutiny perhaps best characterizes adolescence,' and comments that "'Adolescenthood,'" as a field of study, is absent from much of academic scholarship discussing "childhood and adulthood."⁵² Though it may be true that any focused study of adolescence is absent from much philosophical and ethical discourse, here I suggest some initial framing of the key issues that such a study might address by reflecting on existing discussion about childhood and children's rights.

I outline two concerns that arise out of accepting the two points of agreement central to properly characterising the transition between childhood and adulthood. As briefly mentioned in this chapter introduction, these are: that, given the complex and varying experiences adolescence provides, relevant capacities that appear during the transition are more complex and context specific than the broad

⁵² Hartman, R.G. (2000) 'Adolescent autonomy: Clarifying an ageless conundrum,' *Hastings Law Journal*. Vol.51, no.6, pp.1265-1362.; p.1271.

categories of 'cognitive' and 'volitional' capacities suggest; and that 'experience of agency' is essential for children to develop the capacities to become competent agents.

2.3a Relevant capacities

In much of the thinking about the transition between childhood and adulthood, the capacities that many philosophers emphasise could be broadly grouped into cognitive and volitional capacities and are often referred to as such. Within these broad categories we might include reasoning, rationality, self-knowledge, or decisional-competence. Children are thought to lack these capacities but develop them as they mature. Archard writes:

Children lack certain cognitive abilities – for example, to acquire and to process information in an ordered fashion, to form consistent and stable beliefs, and to appreciate the significance of options and their consequences. They also lack certain volitional abilities – for example, to form, retain and act in the light of consistent desires, and to make independent choices.⁵³

In chapter one I described that, in real life, transitions from childhood to adulthood are different, and that there are different kinds of differences. There are cross-cultural differences, differences across time within the same culture, differences between individuals, and differences within one person's transition,

⁵³ Archard (2003), p.11.

between the different areas of life. Some of this variation is due to the transition itself being complex and because the developmental tasks that children must achieve vary across cultures and time. However, a significant factor in the variation within a person's life, or between adolescents in the same culture, is the fact that different areas of life require different skills and knowledge, and these are acquired at different times. As Brighthouse puts it,

there are different areas of decision-making in our lives, and each individual achieves competence in different areas at different speeds... The rights to marry, to have sexual intercourse, to vote, to drink alcohol, to stand for office, and to drive an automobile are separate rights, the exercise of which require different skills and competences...⁵⁴

This idea is also alluded to by Brennan and Epp who say that ““semi-autonomy” indicates that a child is not fully competent, or is competent in some areas and not others.”⁵⁵

These observations show that thinking about the development of capacities in terms of the broad categories of ‘cognitive’ and ‘volitional’ does not provide the detail needed to capture the complexity of adolescent development. It is particularly important that an account accommodates this detail if the acquisition of the powers and responsibilities associated with agency are thought to track the development of capacities. Adding this dimension of variation to an account reflects the reality of how powers and responsibilities are acquired across the areas of an adolescent's life.

⁵⁴ Brighthouse (2002) pp.46-7.

⁵⁵ Brennan and Epp (2015), p.238.

For example, I may be competent to make decisions in respect of my education because I understand school life, have developed a set of values and goals in respect of my education, and have the skills and experience I need to form and communicate my decisions. But I may not be so competent in respect of another area, such as my medical care. Capacities might be practical skills, or even attitudes, that enable a person to participate in a particular sphere of life: communication skills, specific knowledge, planning and organisation skills, self-confidence, familiarity and experience of institutions. It could be argued that where rights are concerned, an individual should also be able to:

...understand what it is to be better or worse off, why that is significant, and what needs to be done or not done to make a difference in this regard. In other words ... rights-holders should be able to grasp the importance of the content of rights [and] understand how a right functions in protecting the content of the right.⁵⁶

In some cases, these competences transfer, such as managing money or driving a car, but many competences are necessarily context-specific and not transferable. In later chapters, I explore a range of both context-specific competences, and capacities that are transferable across the areas of life.

⁵⁶ Archard (2003), p.12.

2.3b Experience of agency

Several theorists describe ‘experience’ or ‘practice’ as the mechanism through which capacities and competence are developed. We might think of this idea being akin to a period of ‘training in adulthood’, a chance to have a go at doing the kind of things that adults do. In many cases, theorists focus in particular on choice. Brighthouse states that:

children cannot come to be competent agents without some experience of agency. They must have experience of choice before it makes sense for them to be seen as having the right to choice.⁵⁷

He goes on to say that this justifies:

an obligation on parents (and the agencies of the state) regularly to introduce children, as they age to situations in which they can make choices, and in which they are not fully protected from the consequences of their decisions.⁵⁸

Along similar lines, Brennan writes, ‘We want to teach our children to be good choosers and we do that, in part, by letting them try out the business of choosing.’⁵⁹ She draws upon Hugh LaFollette’s work on children’s autonomy. LaFollette writes that, ‘We must train our children to become autonomous, and that requires, among other things, that we treat them in some respects as if they already were

⁵⁷ Brighthouse (2002), p.46.

⁵⁸ Ibid.

⁵⁹ Brennan (2002), p.61.

autonomous.⁶⁰ LaFollette's argument is that letting children have a go at making some decisions supports their ability to make decisions for themselves.

I have already argued in 2.3a that competences and capacities needed for adulthood are not limited to general cognitive and volitional capacities, and relatedly, there is a good deal more to life than simply making choices. There is an intricate social and relational context to a person's ability to make and act out plans, of which the act of choosing is only a part. A useful period of practice must therefore include more than just experience of choosing. It must include familiarisation with the structures and institutions that shape areas of life, practice to develop and use the skills needed to negotiate relationships, and experience of using practical skills such as organisational and communication skills. In my account I make room for a wider range of relevant experience to enable children and adolescents the practice they need to be able to ultimately negotiate life independently.

In summary

In this chapter I have outlined some of the key claims within the philosophical literature on children's rights. I have identified some areas of agreement among theorists concerned with the scope and nature of children's rights and childhood. There is an understanding about the underlying importance of a change in interests as children mature, manifested as either the appearance of choice rights or agency interests. This is present in: will/choice theories (such as Griffin's) that assume

⁶⁰ LaFollette (1999), p.139.

children cannot have rights when they are very young but do acquire rights as they mature and the *scope* of their rights change accordingly; interest theories (such as Brighouse's) that take it that children do have rights even when they are very young and that there is a change in the *content* of those rights as children mature and their interests change; and in theories (such as Brennan's) that describe a change in the *nature* of children's rights as they mature, from rights that protect interests to rights that protect choices. It is also agreed that these changes track changes in relevant capacities as children mature.

Building on these areas of agreement, I have identified two key concerns that I will take into part two of this thesis to develop my own account of development and adolescence. First, given the complexity and variation in adolescence, there are many area-specific capacities that turn out to be relevant for the acquisition of rights and responsibilities in those areas. Treating the development of capacities as broadly grouped into cognitive and volitional capacities fails to capture the detail of these changes. Without this detail an account cannot illustrate or explain the complexity and variation of real-life adolescence. Second, several theorists agree that experience and practice are key to being able to develop these competences and capacities, and I take this as being a central feature of the adolescent experience.

The sphere-based model of development that I develop in chapter three accommodates both the range of activities that a person undertakes in the different areas of life and allows for the analysis of related capacities, competences, skills, and knowledge. Using this model as a foundation, I argue that gradual admission into new spheres is possible through the relationships and associations that adolescents

have with others, by facilitating periods of practice and experience needed to become competent in particular areas.

Part 2: Articulating a sphere-based model of development

Part one set out the problem with which this thesis deals. The existing map of the adolescent landscape is incomplete and too simple to accommodate real-life adolescence. Part two begins work to fill out the map and offer a more adequate account of the adolescent transition.

In the first instance, chapter three establishes a multi-sphere account of development, utilising Michael Walzer's conceptualisation of liberalism in terms of associative spheres of activity, each with their own freedoms, protections and restrictions. Given that individuals are socially embedded, autonomy is best understood in relational terms; it is the relationships we have that enable us to form ideas about what matters to us, and act on our plans and projects. That Walzer's spheres are built around the associations and relationships that we have with others makes spheres ideal for describing development in terms of our interactions with others. During adolescence, more and more spheres of activity open up to an individual and their movement into, out of and through spheres picks up pace. Developing an account of the spheres of activity that are most relevant and how they fit together offers a more realistic picture of the shape of adolescence. The sphere-model of development can also explain why it is that some adolescents are closer to adulthood in respect of some aspects of their lives, and not others. This variation cannot be accommodated by an account that does not consider the different areas of an adolescent's life.

It is evident from our real-life experiences that children mature into adults gradually and that adolescence is not a single-step transition, and chapter four

examines this. There have been rights theorists who have attempted to capture this gradualism. However, accounts that focus entirely on rights are inadequate. This is for three reasons which can be addressed by fleshing out the sphere-model. First, focussing only on rights misses out many relevant changes that occur during adolescence, for instance changes in responsibilities, powers, and relationships. Since spheres are each characterised by a particular set of relationships with other people and with institutions, themselves defined by powers, responsibilities, protections, and restrictions, the sphere-model can capture these dimensions of development. Second, rights gradualism comes up against a conceptual difficulty in that rights are binary; either you have a right or you do not, and it does not seem possible to have only a partial right. Given this, it is not clear how a person can acquire a right gradually. Thinking instead about the powers and duties that make abstract rights tangible, which is possible on the sphere-model, gives us more of a sense of what it actually means to acquire a right. Furthermore, since powers and responsibilities can be shared between individuals and can be acquired incrementally, thinking in these terms is a more plausible way of illustrating the gradual movement towards adulthood. Third, there are difficulties with implementing rights gradualism in practice. The rights gradualism that I focus on is constructed around a gradual shift in the *type* of rights that children have as they mature. This means that during adolescence rights protect a mixture of both interests and choices. The job of judging how these different rights should be balanced falls to parents, which is both an onerous and tricky task. Parents' ability to make such a judgement relies on particular epistemic conditions in respect of their adolescent children and their lives. These conditions may be especially unrealistic to

attain during adolescence, a time when young people are making decisions about who to include and who to exclude in respect of certain areas of their lives. Parents, in particular, may be excluded from those areas where their child is most at risk. The sphere-model cannot *avoid* this relational and epistemic change between parents and children. However, it can *accommodate* it and, because powers and responsibilities can be shared in many ways within relationships, relationships can adapt as children mature.

Building on this foundation, chapter five examines the interpersonal relationships that adolescents have with both parents and peers. The move from reliance on parents and the parental home and towards peers is a distinctive shift in the social life of adolescents. The level of involvement that parents can have in the life of their child changes. I explain this change in terms of transitional paternalism, which is itself a particular version of shared powers and responsibilities. Importantly, transitional paternalism is not simply a way of explaining how powers and responsibilities are shared, or a way of describing the gradual changes in authority and responsibility that occur during adolescence. Transitional paternalism actually facilitates gradual participation in spheres of activity, and through familiarisation and practise makes possible adolescents' ultimate adoption of the powers and responsibilities attached to each sphere. Powers and responsibilities can be shared in ways that do not achieve this end and may mean parents are either overly liberal or authoritarian. I describe how the parental role adapts to become more consultative in response to adolescents' ability to negotiate spheres of activity on their own terms.

Chapter 3: A 'sphere-model' of development

In this chapter I argue for what I have called a 'sphere-model' of development. The conceptual starting point for this model is Walzer's conception of liberalism as shaped by separate spheres of activity, each with their own freedoms, which formed the basis for his pluralist account of justice.¹ In the previous chapter, I highlighted that some theorists have pointed towards the complexity of the transition between childhood and adulthood and, as I have also argued in chapter one, there is *inter*-variation, as the transition varies between individuals, as well *intra*-variation, among the areas of an individual's life. Thinking about the separate spheres of activity in a person's life makes clearer the complexity of the changes in children's status as they near adulthood. The sphere-model is preferable to alternatives because it reflects and explains the structure of complex transitions. Furthermore, if we accept an account of autonomy that is true to social and relational reality, the only way to accommodate this is into a sphere-based account of liberalism, such as Walzer's. The previous chapter looked for areas of agreement within the literature on children's rights to form a basis for my own enquiry. I argued that there is a broad consensus

¹ See Walzer, M. (1983) *Spheres of Justice: a defence of pluralism and equality*. Oxford: Martin Robertson. On his account of justice, Walzer separates social activity into spheres, identifies the social good or goods within or relative to those spheres and argues that these goods ought to be distributed by principles resulting from the social meanings of those goods. So, for instance, there is a sphere of 'medical care', within which 'health' is distributed, based on the principle of 'need', where 'need' in this case reflects the social meaning of health. The characterisation of social and political life as made up of separate domains or spheres has informed the work of Elizabeth Anderson and others and has helped to provide answers to many different questions. See, for example, Anderson, E. (1990) 'The Ethical Limitations of the Market,' *Economics and Philosophy*. Vol.6, no.2, pp.179-205.; E. (1993) *Value in Ethics and Economics*. Cambridge, Mass.: Harvard Press.; Anderson, E. (2015) 'Equality and Freedom in the Workplace: Recovering Republican Insights,' *Social Philosophy and Policy*. Vol.31, no.2, pp.48-69.; Schoeman F.D. (1992) *Privacy and Social Freedom*. Cambridge: Cambridge University Press.; Williams, G. (2018) 'Discrimination and Obesity' in Lippit-Rasmussen, K. (ed.) *The Routledge Handbook of Ethics of Discrimination*. London: Routledge.

that, as children mature, their status as rights-holders changes, and these changes are indicative of an underlying shift in their agency interests. As I am using this general agreement as a starting point for developing my own account, there is a need to look more closely at agency interests and autonomy. Autonomous agency is best understood as relational, and the sphere-model of development coheres with this.

I go on to begin considering development and adolescence using my sphere-model. On this model, the movement from childhood to adulthood is less about changes in the individual as a rights-holder, and more about the complex changes in the relationships between the adolescent and her family, and the adolescent and institutions and organisations, within the spheres of her life. The transition is described in terms of a movement in and out of (through, and across) different spheres of activity, and the freedoms, restrictions, and responsibilities that come with each sphere. Changes in rights emerge as children move through the social and political landscape in this way.

3.1 Walzer's art of separation and its implications for rights

We often think of rights in non-contextual terms, as protecting freedoms, and/or interests, across the various forms of activity that make up our lives. On traditional liberal, individualistic accounts of rights, society is structured in such a way as to formalise relationships in particular settings, whether in terms of non-interference and freedoms to act, or in terms of the claims that can be made against others

through promises and contract. In this way, each person is separated from others, individual liberties are protected and enjoyed, and many associations or relationships with others freely undertaken. Walzer describes liberal society on this view as 'simply a collection of circles, held together by all the tangential connections and actual overlappings that their solitary inhabitants voluntarily establish.'² The view is overly individualistic and does not take into account that the person's freedoms and responsibilities are created by the affiliations that she takes up with other people within the structural framework of her society. As such it does not reflect the realities of social and political life, nor does the idea of a free-floating individual capture what it is like to actually be a person in a society. On the individualistic view the activities that a person undertakes in any social setting, for instance within a university, have nothing to do with the setting of the university itself, the relationship she has with the institution, or the particular conventions, regulations, provisions and protections that she is party to or that she enjoys as a result. Rather, her academic freedom within the university is mistakenly articulated as simply her right to study, to speak, or listen, as she pleases.³

Contrary to this view, Walzer has described how spheres of activity (each with their own freedoms, restrictions and responsibilities) give shape to liberalism.⁴ Ferdinand Schoeman writes that: 'We can begin to think about a sphere of life by identifying a sphere as defined by an associational tie.'⁵ and '[w]e see something as a sphere when we think that it organises our life or relationships in an intrinsically

² Walzer (1984), pp.323-4.

³ *ibid.* p.324.

⁴ See Walzer (1984).

⁵ Schoeman (1992), p.157.

valuable way.⁶ On Walzer's view, '[I]beralism is a world of walls, and each one creates a new liberty.'⁷ For example, we can think of the separation of church and state as such a wall – not one that imprisons, but rather creates rights to freedom in religious belief. This is not just a right against state interference in worship. It is a right to associate with others in the form of churches with different creeds and practices. Similarly, economic rights are not just freedoms to own or exchange or contract: a separate economic sphere is created when people are empowered to create business associations that are formally 'walled off' from the state, such as partnerships, corporations, cooperatives, and trade unions. As Schoeman writes, 'We exercise our freedom not by our indifference to others' goals and attitudes, but by belonging and participating in various associations.'⁸ Particular institutions associated with each sphere of activity give shape to the lives that people lead and the relationships that they form. Walzer's account therefore reflects the separation of different spheres of activity in the liberal state. In fact, he writes that the art of separation is 'a morally and politically necessary adaptation to the complexities of modern life.'⁹ For the purposes of my account, I am borrowing from Walzer this conceptualisation of social and political life as a set of spheres of activity.

As described in chapter two, changes in a person's moral status might be mapped with particular attention to the way an individual acquires rights, which are closely allied to changes in the cognitive and volitional capacities associated with

⁶ Ibid. p.168.

⁷ Walzer (1984), p.316.

⁸ Schoeman (1992), p.153.

⁹ Walzer (1984), p.319.

autonomy.¹⁰ However, thinking in terms of Walzer's spheres, what we often think of as adult 'independence' or 'autonomy' is better pictured in terms of a complex network of affiliations that empower a person to make choices and enjoy protections in many different areas of their life.¹¹ Within the sphere of education, for example, are formal institutions such as schools, colleges and universities. Alongside which other institutions and organisations, technologies and infrastructures also facilitate activity in this sphere, including the internet, workplaces, and public libraries. The relationship that a person has with these mean she is more, or less, able to enter or access, and negotiate, the sphere of education. What we might think of as her right to education is, therefore, more, or less, fulfilled depending on the type and quality of the relationships she has with the institutions within that sphere, and the various opportunities and protections and freedoms that she is assured. The person who is able to negotiate the sphere of education is aware of her opportunities, of the conventions and legislation that shape her relationship to the institutions and organisations that structure her educational activities. She has the competences needed to properly exercise her rights and manage her responsibilities, and she has a resultant degree of control over her life (within this specific sphere). The ability to negotiate the sphere of education is lost for her peer who is lacking the kind of

¹⁰ See for example, LaFollette (1999) Schapiro, T. (1999) 'What is a Child?' *Ethics*. Vol109, no.4, pp.715–738.; Brennan (2002); Schapiro (2003).

¹¹ This view is echoed by Williams, G. (2006) "'Infrastructures for Responsibility': The moral tasks of institutions,' *Journal of Applied Philosophy*. Vol.23, no.2, pp.207-221, p.210, who writes, '...normative liberal theory tends to overplay the significance of individual autonomy and thus — something less often noticed — to underplay the costs and dangers of normative disagreement. It is this, I believe, that makes it plausible to neglect the structuring power of social and economic, as well as political, institutions — a structuring that is essential if individual autonomy is to be meaningfully and responsibly realised. I believe that an emphasis upon the importance of our institutions still supports, in every respectable sense of the word, a liberal vision — but it will be a liberalism better grounded both in contemporary realities and in the enduring realities of our actual moral agency.'

familiarity, experience, and competence required. This view does not deny that individual rights are important, but rather presents a richer and more realistic representation of social life. We get a sense both of the cohesiveness of society, and also of the embeddedness of the individual within a social context. So, we can 'make sense of the lives individuals actually live, and the rights they actually enjoy, within the framework of on-going institutions.'¹² This contextualised conception the individual within the spheres of activity in society offers a useful tool to describe the complexities of contemporary life and offers a more convincing and comprehensive account of life in society.

On my sphere-model of development, the idea of social and political spheres allows for the variation in the transitions that people make from childhood to adulthood in 'modern, complex and, differentiated society'¹³. In particular, understanding development as being out of, into, and through spheres of activity reveals the multiplicity of associations that a person has with others and with the institutions and organisations that shape their life, shedding light on the relational complexities of development through adolescence and into adulthood. On this view, the expansion in agency characteristic of development, and highlighted in the children's rights literature, is explained by a person's increased familiarisation with, and participation in, these relational arrangements.

Relevant changes in status are not well captured unless we emphasise important features of adolescents' "normative landscape", other than rights. My

¹² Walzer (1984), p.324.

¹³ Ibid., p.321.

sphere-model of development does not treat individual rights as primary, but rather situates rights within complex forms of cooperation – the different spheres of life, such as work and family and civic association, with their various institutions and relationships, and the normative requirements that constitute these. Martha Minow points out that rights themselves are very often framed in terms of ‘protect[ing] autonomy rather than human relationships,’¹⁴ and one striking fact about childhood, at all its stages, is that the person has – among others – a right that other people care for and live with him or her, and neither any right nor any power to opt out of intimate association with others. This fact is striking because adults have no such rights and no such obligation. The relational aspect of rights is simply inescapable when we think about childhood and adolescence, and it is of central importance to keep the relational aspects of rights in view when we consider the transition from childhood to adulthood.

On traditional accounts, formal rights track gradual changes in the cognitive and volitional capacities required for many accounts of individual autonomy. On the sphere-model of development, rights emerge out of the complex network of affiliations that empower a person to make choices and enjoy protections in the different spheres of her life, making for a more intricate interpretation. The rights that we have are made ‘real’ by the affiliations and relationships that we have with other people and with the institutions and organisations that shape our lives; as Walzer writes, ‘persons-in-societies, not persons-by-themselves.’¹⁵ Rather than rights being merely abstract statuses (legal or moral), they are instantiated in complex

¹⁴ Minow, M. (1986) ‘Rights for the Next Generation: A feminist approach to children’s rights,’ *Harvard Women’s Law Journal*. Vo.9, pp.1-24, p.16.

¹⁵ Walzer (1984), p.326.

social situations and have practical relevance for how we live our lives.

3.2 The sphere-model and adolescence

In this section I use examples to describe how young people enter or leave spheres, each characterised by a distinctive set of freedoms, as well as responsibilities. The associations that we have with others, the relationships that we participate in, require that we owe certain responsibilities, and that other responsibilities are owed to us. Williams argues that the institutions that shape our lives '[open]... channels for participation, and [inculcate] the responsibility that is both morally and practically its necessary correlate.'¹⁶ Similarly, responsibilities are tied into the relationships we make with other persons, and from which we cannot opt out entirely.

Responsibilities will be different in different relationships across the various spheres of life because of the diverse roles we all adopt in different spheres, and correspondingly, the variations in the role-relations in which we stand to one another. Responsibilities, as well as freedoms and protections, are therefore distinctive to the spheres that young people enter and leave as they mature.

3.2a Mapping the normative shape of adolescence

Adolescence is a time when movement into, and out of, spheres of activity, picks up pace. Correspondingly there are very many changes in the relationships between the

¹⁶ Williams (2006), p.209.

young person, their parents, and the state. Spheres might be primarily social and relatively informal in the sense that there are few hard-and-fast parameters for the scope or type of freedoms and responsibilities that are entailed; consider, for example, many aspects of family life, or informal social relationships with peers. Or they might be more formal or institutional, and the freedoms and responsibilities characteristic of these spheres are expressed as well-defined rules or expectations. These spheres include school or work, medical decision-making, or civic and political participation. Perhaps not obviously, the informal relational aspect of development within the family has implications for how we explain and justify the changes in an adolescent's status in formal, legal and institutional settings.¹⁷ This is because changes in family life, parental authority, and trust relations between parents and children, have implications for how children and adolescents engage with legal and institutional spheres, what degree of power and responsibility they have within those spheres, as well as their capacity to understand the significance of those powers and responsibilities. As I will stress in this section and throughout the thesis, there can be tensions and difficulties as the same person – along with all the relationships and affiliations that are so important to her life and maturation – enters into new spheres or moves between them. For the teenager, learning to negotiate these tensions is a critical task; for parents and others, there are often hard decisions and hard facts about how far they can help or be involved.

¹⁷ Along these lines, Walzer (1984), p.324, writes 'I once wrote that we could understand a person's obligations by studying his or her biography, the history of his or her agreements and relationships. That is right, but only so long as one acknowledges that personal history is part of social history; biographies have contexts. The individual does not create the institutions that he or she joins; nor can he or she wholly shape the obligations he or she assumes. The individual lives within a world he or she did not make.'

The transition into a sphere is when a person must learn what freedoms and protections that sphere affords her, as well as how to manage the associated responsibilities. Consider, for example, an adolescent's movement through the sphere of education as she moves into secondary education. In the beginning, her activity within the sphere is restricted, enabled or indeed required, by the institution and by the policies and legislation that shape the aims and conduct of the school. These bodies have duties towards her and take control of her education on her behalf. She finds out about the expectations of studying in the school, and about the purpose of her activity. At first, she must study what she is told to study, whether she wants to or not; the decisions that are made about her education are out of her hands. Parents decide (within particular restrictions on the availability of provision) which school she attends, though laws dictate that she must attend, and parents decide whether or not she has access to supplementary materials or extra help at home. In school, though the curriculum is designed and legislated by the state, teachers decide how that curriculum is delivered, in what ways she will be challenged and what support she should be given. She has little or no control over her education, but over time she begins to take more control and can start to make choices about what she would like to study, and maybe even about *how* she would like to study. On entering secondary school, she is given limited responsibility – to get to school, to sit in class, to submit some homework, to revise for a test. Channels for participation in school open up as she matures, and she might be able to vote on what the class study, join a school council, start or join a school club or society. But as she gets older, she also bears more responsibility for her own education. She can elect what subjects to study and what projects to undertake, choose how much

additional time and effort to invest, and decisions about whether or not to continue with sports or musical instruments become her own, where previously they may have been under the jurisdiction of her parents. Accordingly, the adolescent acquires additional legal, social or institutional rights to make choices about her learning, albeit rights narrowly construed as a degree of say within a particular set of options, and responsibilities that accompany her education. Of course, she may still be required to wear uniform and it is very likely she must be at school when the bell goes for registration in the morning.

Using Walzer's notion of spheres to describe maturation and an expansion in agency in terms of the associations and relationships we have, means that at every stage of development the individual is thought of as a 'being', embedded within the social and relational context of her life. The first (and, for many, the only) sphere that young children access is the domestic sphere. Children's social and political activity is limited, and often mediated or facilitated, by their relationships with parents and family. Correspondingly, children's rights are also limited, at least in early childhood, and casting parents' obligations to care for their children in terms of stewardship rights, or the parental role as one of trustee or caretaker, fits well with this model. Rights that are about having control over one's own life are acquired gradually, and, as I describe in more detail in the following chapter, the sphere-model can make sense of this claim. In early childhood rights are constrained to the rights that protect children's relationships with others within limited spheres of activity. In the first instance the very young child is fully dependent on her parents and so the rights she has are those protecting the parent-dependent child relationship – rights to be protected, nurtured, and cared for, and no rights to opt out of this relationship. Over

time, as the child enters spheres beyond the family, she becomes less dependent on her parents and develops relationships with other people, institutions and organisations. As she gets older the child enters social spheres that are separate to the family sphere: primary school; the playground; a private – probably peer-led – sphere; secondary school; clubs or religious groups; part-time work; university. In each social sphere different expectations are placed upon her and, as well as acquiring rights and powers, she must learn about the responsibilities that she has to bear. She becomes an ‘independent’ agent by learning to negotiate the network of associations that enable her to make choices (and have certain securities) in the many different areas of her life.

Adolescents have to learn how to move across the various spheres of their lives and negotiate the tensions between them. Adolescents are likely to try on different ‘identities’ in different social settings, and this in part is about finding out about the features of the relationships that they have with others, as well as finding out about themselves and ways of life. In Harry Enfield’s well-observed *Kevin and Perry* sketches, Kevin and Perry both adopt the language, dress code, and swagger of their favourite band in their private peer interactions, both grunt rudely through their lank hair at their *own* parents, yet rediscover their impeccable manners on greeting *each other’s* Mum and Dad. As Williams writes, ‘...roles involve the *acceptance* of responsibility.... [and the] content of those responsibilities is largely ... defined by the role and the rules and the expectations associated with it.’¹⁸ Discovering, and learning to manage, new freedoms and responsibilities is

¹⁸ Williams (2006), p.210.

necessarily part of adolescence and trying on or testing out roles is part of this process.

At particular points (often age thresholds) formal spheres, sometimes defined by legal rules, open to the adolescent: a sphere of intimate or sexual activity, to which different legal (and some institutional) rules apply depending on age, which overlaps with a wider private sphere; admission into the youth justice system when she is charged with breaking the law; power to make decisions about her body, in cases of medical treatment as well as procedures such as piercing and tattooing. In each sphere she must develop, or otherwise negotiate, relationships with other people and the institutions and organisations that open up opportunities and set the terms of those opportunities, as well as impose the rules, requirements, and limits that will shape her activity within it. In many cases, it seems there is a transitional period on entering a new sphere of life. The movement into the sphere is itself gradual, rather than in one step, a feature that I explore in detail in chapters four and six.

The gradual transition between childhood and adulthood is a transition between dependence and independence (of a sort). The movement into and out spheres of activity during adolescence facilitates this transition by virtue of the particular relationships that characterise each sphere. During adolescence, and at other times in life, though to a lesser extent, powers and responsibilities are *shared* between the adolescent and others. In some cases, powers and responsibilities are shared with parents, particularly in those spheres which overlap with the family sphere. Consider, for example, how powers and responsibilities are shared when adolescents are making decisions for themselves about how they socialise, where

they go and what they do with friends. Parents might allow their children to make *some* decisions for themselves, but place restrictions on the options that are available. Parental resources facilitate children's movements, either financially or simply because children rely on their parents for transport. Parents may decide to say no to their children's request to stay out until midnight or walk to their friend's house across town. Of course, in these cases, children may not always respect their parents' wishes, and this may lead to confrontation or difficult or painful consequences. To share responsibility in a situation such as this means that parents are on hand to help pick up the pieces when things go wrong for their children, even in those cases where mistakes have been made *despite* the advice or requests of parents.

The sharing of powers and responsibilities can, in some cases, provide a protected space where young people can learn about the complications of changes in status and new social spheres – expectations, choices, consequences, rules, their own limitations as well as the limitations of others. In particular, when we realise that sharing powers and responsibilities within spheres of activity is an essential part of adolescent status, we can make sense of the co-decision making which is so characteristic of adolescence.

3.2b What makes the sphere-model successful: a summary

Using spheres to conceptualise development offers a more complete picture of the transition between childhood and adulthood. There are, I think, three reasons why this is the case.

First, development obviously does not happen in isolation, and neither is it the sole responsibility of parents. There is an important relational dimension to development and to a person's moral and social status that includes associations with the organisations and institutions that shape our activities. To properly describe the changes that occur between childhood and adulthood we need to pay attention to changes in relationships between individuals and between individuals and institutions and organisations. The sphere-model is a framework in which individuals are embedded within their social context. As individuals develop within a rapidly changing social and political landscape, changes in the spheres that they are able to access, and the relationships they have, are captured. Furthermore, the sphere-model accounts for the variations in how young people move from childhood to adulthood. For a variety of reasons, one person may be able to access or leave a sphere of activity prior to their peer or be better able to negotiate that sphere. Likewise, the sphere-model can capture the intra-variation, illustrating how a person's status can change in respect of one area of their lives, but not others.

Second, during adolescence there are changes in how and when young people exercise choice, and this is accompanied by the child's gradual encounter with, familiarity with, and competence in, social life and its various spheres. This fits with the general agreement within the children's rights literature that agency interests become more established during adolescence. Opportunities, options, and choices are always framed, or restricted, by the social and political context of our lives, even in adulthood. Contextual detail is provided by the sphere-model which allows us to consider the changes in the associations that adolescents have with

other individuals, and various institutions and organisations, and changes in adolescents' ability to access and negotiate new areas of life.

Third, many rights only make sense within the context of relationships and associations. Being attentive to how relationships change as a person moves through spheres of activity therefore gives rights-talk context, and concrete content. A multi-sphere model accounts for changes in how a person participates in the different spheres of life, and how they are able to take control of their lives in these areas. Spheres illustrate how the experiences that children and adolescents have expand into new areas of life as they mature and describe the new freedoms and responsibilities that they encounter along the way. Formal rights represent an abstract and, arguably, not fully convincing reframing of the actual freedoms and opportunities contained in each sphere. The sphere-model of development accurately reflects social reality and makes the connection between changes in relationships (both between people and people and institutions) and changes in whose say-so is effective, or changes in how viable opportunities are for a person. It is through the network of relationships and organisations that shape our lives that 'real' opportunities and options are presented, and likewise 'real' protections enjoyed. Formal rights to choose become actual powers, and a person's interests are actually protected by the relationships that person has with others who have correlative duties.

3.3 Agency on the sphere-model

The sphere-model illustrates that what we might conventionally think of as independence, and relatedly autonomy is actually better understood in terms of the complex network of relationships between a person and others, and the institutions and organisations that shape their lives. We have established that people are socially embedded, that being a person is being part of a society. Given this, the account of autonomy that makes most sense is relational, both in the sense that the exercise of autonomy requires other people, and in the sense that autonomy is developed within relationships as people mature. Ultimately, if we accept that autonomy is best understood as being relational, the sphere-model of development that I have described is the only way we can make sense of real-life development within complex social contexts.

3.3a An account of autonomy

Though there are several ways that the term autonomy is used, the core notion is self-rule, self-determination, or self-control. Respect for autonomy, that a person ought to be able to make decisions without the impediment of another, is one of the foundational principles of many ethical deliberations about interactions between persons. Autonomy on this view is often construed in negative terms as being free from interference. Autonomous agency as I understand it is a fuller concept, intended to capture the sense in which an individual is able to pursue projects and opportunities, to lead and take responsibility for her own life. She is responsible for

her life in the sense that her life is her own. She makes her own plans in light of what she values and the expectations or restrictions to which she is subject, is in control of how she pursues them within the constraints of her resources and the opportunities available. She makes her own decisions and stands by the consequences. This control includes the capacity to critically reflect on her own values and reasons, intentionally make her own choices, and act on her choices in line with her own will, and this requires a degree of practical competence to negotiate relationships. As such, autonomous agency as I understand it goes beyond the much narrower conception of autonomy as 'free from interference'.

The account of autonomy that I endorse here recognises that socio-relational context is fundamental to developing autonomy, as well as to actually acting autonomously. On the account that I present, autonomy is not a temporary state, or process that aims for consistency between a person's desires and motivations; it is her *capacity* to negotiate the network of affiliations in her life that frame, create, or restrict the opportunities that are open to her. This capacity enables a person to take control of her own life, take opportunities that are offered to her if she so chooses, and pursue her own projects and plans. It is perfectly plausible, when we characterise autonomy in this way, that a person is more, or less, autonomous in respect of one sphere of her life, than in others.

Some accounts of autonomy are procedural in the sense that there are content-neutral conditions upon which we can judge an agent's competency in autonomy. Purely procedural accounts of autonomy rely on the structure of

individual's motives,¹⁹ or on the processes by which their attitudes and motives are formed.²⁰ These conditions are independent of the specific *content* of the individual's attitudes or motives. Substantive accounts of autonomy, on the other hand, are supplemented by additional *non-neutral* conditions that, for example, govern the specific content, or act as constraints on the content, of the agent's preferences. If autonomy actually requires a person to be able to negotiate, and furthermore be considered by herself and others to be *able* to negotiate, a network of affiliations (and perhaps, more strongly a network of a particular *quality*) that empower a person to take control in the different spheres of her life, then autonomy has (weak) substantive elements.²¹ Autonomy of this kind could be classed as a *normative-competence* account. On normative competence accounts, a person's capacity for reasoning, critical reflection, and motivations must be connected in the *right sorts of ways* to what is valuable to them.²² An example of a normative competence is self-worth, which describes the agent's own sense of *worthiness* to act upon her own reasons, or sense in which she regards herself as *competent* to defend, or act on, her

¹⁹ For example, Frankfurt, H. (1971) 'Freedom of the Will and the Concept of a Person,' *The Journal of Philosophy*. Vol.68, no.1, pp.5-20.

²⁰ For example, Dworkin, G. (1988) *The Theory and Practice of Autonomy*. Cambridge: Cambridge University Press.; Christman, J.P. (1991) 'Autonomy and Personal History,' *Canadian Journal of Philosophy*. Vol.21, no.1, pp.1-24.

²¹ I borrow the term 'weak substantive' from Benson, P. (2005) 'Feminist intuitions and the normative substance of autonomy,' in Taylor, J. (ed.) *Personal autonomy: New essays on personal autonomy and its role in contemporary moral philosophy*. Cambridge: Cambridge University Press, who presents an account of autonomy that incorporates normative content by way of agents' attitudes to their own competency and worth. In contrast, a strong substantive account imposes direct normative restrictions on the content of agent's attitudes or values, as a condition of autonomy. That is, any strong substantive account requires that there be some things that an autonomous person *cannot* value without *compromising* their autonomy. Strong substantive accounts are at risk of conflating the power to take *ownership* of action, with the power to get things *right*, or the ability to hold attitudes that we *ought* to have (Benson 2005, p.132). Indeed, critiques of strong substantive accounts often warn of the risk of perfectionism creeping into autonomy; Westlund, A.C. (2009) 'Rethinking Relational autonomy,' *Hypatia*. Vol.24, No.4, pp.26-49, for an argument for autonomy that can be construed as relational without incorporating into it any troubling perfectionist ideals.

²² Here, I paraphrase Benson (2005), p.134.

values. Likewise, the idea of self-efficacy, or a person's sense that she is actually *able* to take control of her life – that her options are real *or* achievable – is a condition for autonomous agency that goes beyond procedural requirements without placing direct normative restrictions upon the content of agents' attitudes. This conception of autonomy can explain how a person who appears to be acting autonomously in the procedural sense might actually have their autonomy compromised, either by her own sense that she is not in control, or by others not recognising her capacity for autonomy. Autonomous agency is about more than endorsing one's desires, or being free from interference from others. In fact, a person's ability to take charge of their own life is compromised if they lack the *sense* that they have that ability,²³ or if they *actually* lack the socio-relational conditions that enable and empower the relevant kinds of control.

I have stated that, given that individuals are embedded in a social context, it makes sense to endorse a relational account of autonomy. Relational accounts recognise that a person's capacity to take charge of their life depends in part on the relationships they have, and that some conditions required to exercise autonomy are learned or *developed* through interactions and relationships with others. The sphere-model that I have described is a good fit with all these relational features.

Relational accounts of autonomy build on feminist critiques of 'traditional' conceptualisations of autonomy as overly individualistic and rationalistic. Feminist critiques include symbolic and metaphysical critiques. Symbolic critiques focus on the abstract character ideal of the 'autonomous man' that, it is argued, forms the

²³ I have in mind conditions such as self-efficacy, self-esteem, self-respect, self-awareness, self-worth, self-confidence and self-trust.

foundations of traditional moral theory and western culture, and has necessitated female dependency and subordination. At the heart of the ideal of autonomous man is the idea that human beings can lead their individual lives in isolation from others, with the goal of individuality and self-sufficiency.²⁴ Lorraine Code argues that, for this reason, there has been ‘a gradual alignment of *autonomy* with *individualism*.’²⁵ The purpose of Code’s critique is to redefine what it is to be autonomous, recognising that individuals only become *persons* within the context of society, and hence in relation to others. Related to this type of symbolic critique is the metaphysical criticism that it is a mistake to conceive persons as being atomistic separate beings. Annette Baier writes that:

Persons are essentially successors, heirs to other persons who formed and cared for them, and their personality is revealed both in their relations to others and in their response to their own recognized genesis.²⁶

It is both logically and empirically the case that persons cannot exist outside their social context. Accounts of personal autonomy, which assume a conception of personhood based on abstract individualism, should therefore be rejected.

The account of autonomy that I endorse recognises the conditions required to exercise autonomy are learned or *developed* through interactions and relationships with others. We need to have the right kinds of cognitive skills and

²⁴ Code, L. (1991) ‘Second Persons’ in *What Can She Know? Feminist Theory and the Construction of Knowledge*. Ithaca, N.Y.: Cornell University Press.

²⁵ Code (1991), p.78.

²⁶ Baier, A. (1985) ‘Cartesian Persons,’ in *Postures of the Mind: Essays on Mind and Morals*. Minneapolis: University of Minnesota Press.; p.85.

psychological or emotional dispositions to make decisions for ourselves. But, in addition, we also need to be making decisions in the right kind of social climate for our decisions to be autonomous, and within relationships that foster or support our autonomy. The particular associations that we have with others and with institutions open up opportunities that enable us to act on our desires or fulfil our ambitions. Likewise, those same associations may entail that our choices are framed in such a way that 'free' choices are not *real* choices, such that certain decisions require unjustifiable sacrifice or are otherwise unattainable. I stated above that a person's ability to exercise authority over their own life is also compromised if they lack the *sense* that they have that ability, if they feel they just do not have control. Self-efficacy is important for feeling empowered to pursue plans and projects. Our self-perceptions are fostered by the relationships we have, even though reflexive attitudes are different to *actually* lacking the socio-relational conditions that enable and empower the relevant kinds of control.

As this chapter has emphasised, we are not separable from our social context, and our activities are shaped by the relationships we have with other people and the structures within our society. Autonomy, on this socio-relational view is about how those structures and relationships shape our lives and the power they give to individuals to negotiate those relationships. Accepting this relational account of autonomy leads to accepting the sphere-model I have described as it captures exactly these concerns.

3.3b A 'Relational' account of agency and the sphere-model

The liberal agent is autonomous and rational. Autonomy is therefore central to agency, as understood within the liberal framework. As mentioned above, traditional accounts of rational autonomous agency are problematic because they rely on a conception of the person as individualised to the point of abstraction, isolated from their social context. Here I build on what I have said about autonomy, and draw on Elizabeth Anderson's account of rationality, to develop an account of agency that could be described as relational, or at the very least, an account of agency that recognises the individual as embedded in her socio-relational context, as would be consistent with the sphere-model. I examine what it might mean to take control of my life, which in part is about making my own decisions, as a socially embedded person. I draw here on Anderson's account of rationality and argue that being rational, being able to make assessments of my own desires, goals and values, and act on them, relies on particular socio-relational features.

Paul Benson worries that 'the role of critical reflection in the wills of agents whose autonomy is diminished could be largely the same as its role in the wills of those who enjoy greater autonomy.'²⁷ So, it is not the *act* of critically reflecting alone that should be paid attention, but the *process* of that reflection. A person who uses poor, or damaged, methods of reasoning or critical reflection may well endorse her desires and values, even though her autonomy is diminished. Furthermore, a person may endorse her desires in a way that makes it *seem* as if she is autonomous but be subject to external influences that compromise her agency. Consider for example the

²⁷ Benson, P. (1991) 'Autonomy and Oppressive Socialization,' *Social Theory and Practice*. Vol.17, No.3, pp.385-408.; p.385.

brain-washed cult member who endorses her decisions, but whose critical reflective processes have been damaged by the brainwashing. For this reason, we cannot rely on critical reflection alone. Benson argues that autonomy also requires that the agent be able to 'apprehend' the reasons for her action. This is what Benson calls, 'rational competence.'²⁸ Second, he argues that an agent must be able to act on decisions *she* makes based on competent reasoning about alternative courses of action. This is what Benson calls an agent's 'control.'²⁹ The idea that the agent should act on decisions that are *her own* might be seen to imply that the agent's control is never compatible with outside influences. However, this is not the case. An agent can consider other people's reasons, or alternative ways of life, without these external influences compromising her own control as it does in the brainwashing example. More strongly, it could be argued that by engaging with some external influences, the agent is *increasing* the conceptual richness available to her in order to make assessments of her actions, and is, therefore, more likely to be able to exercise autonomy (and be rationally competent) as a result. In this section I explore the thought that a person's socio-relational context, and her capacity to operate within this, is important to her agency. Agency is therefore a richer concept than just the capacity to act. Agency is her ability to act within her social, political, and environmental context, and this capacity may be inhibited or not by her familiarity with that context; her ability to negotiate relationships, understand conventions and

²⁸ Ibid., pp.400-404.

²⁹ Ibid., p.401 Benson worries that we could be obliged to enforce autonomy in others through violence. However, he argues that it is the notion of an agent's control that allays these fears. Ultimately, if an agent is *forced* to act in a way that is not regulated by her, she is no longer *in control* of her actions and is therefore no longer acting autonomously. Therefore, it makes no sense to talk of forcing someone to become more autonomous.

regulations, navigate complex institutional agendas, and do so in a way that allows her to pursue her own plans.

As described, the relational nature of autonomy recognises that the individual is socially embedded, and that the collection of skills and capabilities that are required for autonomy are not developed or exercised entirely in isolation from others; in fact, they are developed and exercised between persons and the institutional fabric of society and through social practices. Likewise, the reasoning processes associated with agency are often exercised by communicating with other socially located persons, not in isolation from other people or their social context.³⁰ We make appraisals of our own values and beliefs by engaging with background values and our social context³¹ and we reason through dialogue with other persons, or through comparison with other, or possible other, lives. Anderson argues that individuals need a 'space of reasons' where they share common ground, and where 'the considerations each party accepts as counting for or against attitudes and judgments overlap.'³² In this space, the reasons that people give direct them away from 'defects' in their reasoning such as 'inconsistency, ignorance, partiality, confusion, double standards, insensitivity, or pragmatic self-defeat.'³³ By this process, individuals can come to share a point of view that they can rationally endorse.

³⁰ This view is shared by, among others, Friedman, M. (2000) 'Feminism in Ethics: Conceptions of Autonomy,' in Fricker, M. & Hornsby, J. (eds.) (2000) *The Cambridge Companion to Feminism in Philosophy*. Cambridge: Cambridge University Press.; p.213

³¹ See for example Taylor, C. (1985) *Philosophical Papers I: Human agency and Language*. Cambridge: Cambridge University Press.; Taylor, C (1989) *Sources of the Self: The Making of the Modern Identity*. Cambridge, Mass: Harvard University Press.

³² Anderson (1993), p.93.

³³ *Ibid.*, p.94.

Anderson outlines critical strategies to enquire into the rational justifiability of a value, which detect and correct errors in our value judgments. I will not give a detailed exposition of these strategies here but rather highlight the relational or 'embedded' features of those strategies. First, there must be dialogue between individuals. Second, participants must be willing to recognise the possibility of a gap between their actual values and attitudes and those values and attitudes that are rational, thereby acknowledging differences between persons. Third, individuals must acknowledge the equal right of other individuals to offer their own suggestions and criticisms. Fourth, the exercise of discussion must allow for new considerations and for criticism of existing reasons, and there must be no bullying, or belittling of others. Fifth, participants in the dialogue must be consistent. Finally, participants 'are committed to making themselves mutually intelligible.'³⁴ These features all acknowledge the agent as part of a social, institutional fabric. To be embedded in dogmatic and bullying relationships is undermining of a person's autonomous agency precisely because the conditions and deliberative practices noted here are not met. Anderson's suggestions highlight the kinds of dispositions a person must adopt, and the conditions they must endorse, to be thought of as 'objective' in their scrutiny of their own reasons, plans or desires. Importantly, though her suggestions may not be definitive, the processes required for individual decision-making that Anderson describes do not happen in isolation from other people, even if that context is, most minimally, only the acknowledgement of shared practices and background norms.

³⁴ Ibid., p.93.

Empirically, we cannot detach ourselves from the various contingencies and experiences that make us who we are, and that shape our capacities and methods of reasoning, and these are not developed in isolation from others, or our wider social context. Furthermore, since, 'there is no 'view from nowhere' that persons can adopt,'³⁵ it is not logically possible for us to detach ourselves in this way. Anderson's account gives some sense of the *processes* of relational agency, how a person might critically reflect on and evaluate her values and desires in practice.³⁶ This process is not undertaken in isolation. However, the appraisals an agent makes as a result of the process are *her own*, and therefore the acknowledgement of other people's reasons and the external influence of social practices are not incompatible with – but rather *essential* to – agency. Furthermore, taken together with an account of autonomy with relational features, these accounts produce a view of the agent as embedded within her social context and highlight the importance of the connectedness of that person with the people around her, and with the institutions and organisations that shape her life. The sphere-model takes up and accommodates these insights into a richer conception of agency.

Agency on the sphere-model is more than just decision making, and the decision-making that occurs is an activity that takes place within social settings and between persons. Our individual decision-making happens within the context of our lives, between and among other persons, and against the backdrop of our

³⁵ Friedman (2000), p.213.

³⁶ See Elizabeth Anderson's 'rhetorical model' of rational choice. Anderson suggests that autonomous agents should regard themselves as having the authority to act on their own attitudes and not be trapped by social conventions, tradition or morality as it is perceived. Included in her account is the condition agents must regard themselves as 'self-originating sources' of claims. (Anderson, E. (2002) 'Should feminists reject rational choice theory?' in Antony, L.M. and Witt, C. (eds.) *A mind of one's own: Feminist essays on reason and objectivity*. London: Routledge; p.385). Thus, her conception of autonomy is indicative of self-confidence or self-trust.

experiences, expectations, and values. Rational agency is intertwined with social practices and the self in relationship to others. Agency on the sphere-model includes a dimension of autonomy (best cashed out as having relational and substantive elements as I described in section 3.3a) and includes an account of rationality with socio-relational features, perhaps not unlike those presented by Anderson. A person is embedded within her social context, and to make sense of what it means to be an agent in this context we need to account for her interactions with others.

Importantly, the account that I have sketched not only recognises a person as a social being, but also proposes that a person's network of affiliations and her navigation of the socio-relational context of her life *enhance* her 'agent' status. She is closer to being an autonomous agent if she has access to spheres of activity that enable her to see what might be intelligible or worthwhile goals, and if she can pursue her own plans. She is also more autonomous if she has constructive associations with the institutions and organisations that shape her life and provide her with choices that she can actually make as well as actual opportunities for action.

The relationships that she has with others also enable the kind of rationality that we might associate with this kind of autonomy. Her values are not formed in isolation from her socio-relational context, and neither are her decisions made as a singular and separated person. Rather, her decision-making processes, her capacity for critical reflection and her choices, are framed by her social and cultural context and, in reality, often made through dialogue with (or in comparison to) other persons. These features become important to describing how powers and responsibilities are shared between adolescents and others on the sphere-model. In particular, as I describe in chapters four and five, the role that parents (and others)

can have in the deliberative processes that children and adolescents undertake is one way that decision-making remains genuinely shared, even when the final ‘say-so’ falls to one or other party in co-decision making arrangements.

In summary

To summarise, this chapter has argued in favour of a complex socio-relational account of adolescence, or rather of development more generally conceived, which can tell us interesting things about the social, political, and moral status of the adolescent. The original account of development that I have proposed is an alternative to traditional rights-based accounts of the transition between childhood and adulthood. The account focuses on changes in authority and responsibility – from which rights emerge – within the different spheres of activity in a person’s life as she matures, rather than on the ascription of rights per se. In particular, I have used the sphere-model to introduce one of the distinctive features of adolescence, the co-decision making between adolescents and others. An individual’s choices are always framed or restricted by available options, both through her relationships and interactions with other people and by the institutions and organisations that shape her life. Likewise, responsibilities are framed or created by the network of affiliations we have with others. The socio-relational sphere-model that I have described here captures these features of development.

This chapter has explained why it makes sense to accept a relational account of autonomy and, relatedly, what relational agency might look like. We can see that

the sphere-model of development that I have developed is the only way to capture ideas about people as socially embedded and relational accounts of autonomous agency. The model can show how relationships enable gradual independence in respect of particular spheres. Consider, for example, a child's movement into the economic sphere. In this case, parents first manage money on behalf of the child, and may also open a savings account for relatives to pay money into. They may later give her some pocket money to spend on what she likes, encourage her to save the money in a piggy bank, or even in her savings account. Later, when she is 11 or 12, parents may open a current account with her, because at that time this still requires parental consent. Later still, when she is 16 she will be able to open other bank accounts without her parent's consent or even knowledge.

An important aspect of the sphere-model is that it can accommodate the complexity of adolescent transitions across the areas of life. The differentiation of development into separate spheres of activity makes for a more detailed picture of how children mature. This can explain how an adolescent might be more able to manage her life in one area but not yet be ready to do so across all areas of her life.

Chapter 4: Making sense of gradualism

Chapter three proposed that a sphere-model of development is apt for characterising the complexity of the transitions that adolescents undergo. Furthermore, the best way to make sense of autonomous agency in any ‘real-world’ sense is as having relational features, and the individual agent on this view is embedded within the social, political, and environmental context of her life; she is a person in society. Accepting this, the sphere-model is the only way to capture what is actually happening as children mature.

This chapter deals with gradualism, the idea that the transition to adulthood is gradual and this must be accommodated by an adequate account. One response is to try and capture gradualism using rights. Adolescents undeniably have rights and there are changes in those rights as she matures. Given the move towards the liberal ideal of adult agency, it is not surprising that changes as children mature are largely framed in terms of rights to make choices for oneself. Adolescents are at a stage where they are more able to make decisions for themselves, but are still dependent, in many fundamental ways, on the adults in their lives. Building on the existing literature included in chapter two, which dealt in the main with children’s rights, we might try to use a kind of rights gradualism, that illustrates how rights gradually change as children mature, to untangle issues arising out of the special position that adolescents are in. However, I argue that rights gradualism is problematic and should be rejected. Moreover, since we have established that changes in status are best thought of in terms of movement into spheres of activity, as opposed to the acquisition of rights per se, a sphere-based gradualist account is worth pursuing.

Rights on their own fail to take account of the special contributions made by the relational changes that occur during development. Neither is it obvious how to make sense of gradually acquiring a right to choose; it seems that a person either chooses for themselves or they do not. Rights based accounts can say nothing about duties, but it is obvious that children and adolescents are also expected to take on more and more complex duties in different roles as they mature. To miss this out is to miss a major feature of development. Furthermore, as I will explore here, there are epistemic barriers to applying rights-based accounts in practice. In particular, in adolescence, as young people move away from parents and towards peers, they enter spheres of activity that are kept private from parents and others, and this means that those adults know less about their children's lives. We need a much more sophisticated variant of gradualism that recognises the complex changes in the relationship between parent and child (and their wider relationships and affiliations), and the impact these changes have for the way that parents can discharge obligations to their children. A more complex sphere-based gradualism can accommodate the increasing number of spheres of activity that are opening up to young people as well as the changes in the relationships that adolescents have with their parents and other people and with institutions and organisations, and changes in responsibilities and rights that are entailed. Ultimately, this discussion points towards the sharing of powers and responsibilities between adolescents and others in ways that enable gradual admission into new spheres of activity, enabling familiarisation with new spheres and supporting agency development, which I go on to discuss in depth in chapter five.

4.1 A preliminary note on the shape of adolescence

One might imagine that the transition from child to adult is linear. In fact, as alluded to in foregoing chapters, it is far more complicated than this. In respect of a specific area of an individual's life, it may well be the case that development is more-or-less linear. However, as described in chapter three, there are many spheres to a person's life. A person will develop in different ways and at different rates in respect of each sphere of activity.

Given this, it is more appropriate to think of the shape of individual development as something akin to a mixing desk in a recording studio, with many sliders or faders. Each one of these switches represents the status of the individual within a sphere of their life and each can be gradually turned from the 'off' position to the 'full' position, or from the 'full' position to the 'off' position. However, not all the sliders are moved in the same direction, at the same rate, or at the same time. Some of these sliders represent formal or institutional spheres in which a person operates, for example legal justice, schooling, or the world of work. Other sliders represent informal or social spheres, for example family life, or friendship groups and peers. In some spheres, such as schooling there may be both formal and/or legislative, and informal social aspects that may themselves develop at different rates.

4.2 Rejecting rights gradualism

The idea of rights gradualism presents a puzzle. Human development, and the acquisition of the capacities that are the supposed grounds for adult status, is gradual. Development might be described as scalar and is certainly continuous, as in the mixing desk 'slider' analogy above. During development it may be impossible to pinpoint when a person stops being a child and starts being an adult; there may be no fact of the matter. One way to try and get around that is to define stages within stages – infancy, early childhood, tweens or pre-adolescence, adolescence – but at every level, there are fuzzy boundaries or overlaps. Furthermore, the capacities and developmental tasks, characteristic of the different developmental stages, are gradually developed over time and achieved progressively. A child does not wake up one day with the capacity to critically reflect on her long-term preferences, nor does she become able to negotiate complex social relationships overnight. In contrast, rights – the tool used by many theorists working on the moral and political status of children – are neither scalar nor continuous. A person either has a right to x or she does not, and it is not obvious how we can 'turn on' a right over time. Hence it appears that rights cannot be acquired gradually, and so there is a problem with applying them in contexts where the conditions for their applicability gradually arise. This poses an obvious and fundamental puzzle about how to reconcile gradual human development with the acquisition of the kind of moral and social status associated with adulthood. A further, fundamental, problem with focussing only on rights is that any account of duties or responsibilities is missing from the picture of

development. Changes in responsibilities represent a significant aspect of how roles change as adolescents mature.

Despite the problems of using rights to frame the issue of gradualism, one response to the complexity of the gradual transition from childhood to adulthood, is rights gradualism. On the account put forward by Samantha Brennan, described in chapter two, rights protect interests in childhood and, later, in adulthood rights defend choices. In between, during the transition from childhood to adulthood, rights defend a mix of both interests and choices. Brennan and Epp have discussed the practical application of rights gradualism, the implications for the adult-child relationship, and for conceptions of parental rights as stewardship rights, putting explicit emphasis on the role that parents play in negotiating difficulties of 'the middle'.¹ They write that a parent's stewardship rights 'exist only insofar as the parent is indeed promoting the interests of the child'.² There are, therefore, important judgements to be made about exactly what the child's interests are and how to weigh these against risks, and how to settle rights-claims in cases when interests compete. The suggestion is that decisions about weighing a child's interests and autonomy should be made by parents, who must assess the best interests of their child, and the risk to their interests. Judgements about whether parental assessments are best serving the child's interests are then made by an appeal to '[c]ommunity standards, wider public debate, objective considerations about potential harms ... and the effect on other rights the child may have...'³ As Brennan

¹ Brennan and Noggle (1997).

² Ibid., p.13.

³ Ibid., p.10.

herself notes, adolescence presents more complex problems as the child becomes more competent and more able to choose for herself.

In the following sections I explore the rights gradualist response by examining the adolescent's emerging right to privacy within the context of the changing parent-child relationship during adolescence. As adolescents spend more time with peers and less time in the family home they become more involved in a sphere of life that is private so far as their parents are concerned. Because of this, parents do not always have the right kind of knowledge about their children's lives to make judgements about how best to balance their various duties towards them, which is problematic for Brennan's account. Furthermore, parents may be denied the decision-making power necessary to maximise both respect for their child's autonomy and their children's welfare. Failure to recognise these limitations can lead to parents becoming unjustifiably paternalistic, and to breakdowns in the parent-child relationship. Even without these considerations, there are reasons to be cautious about Brennan's ideas about the parental role during adolescence. The issue of having to decide what constitutes 'a mix of' interest and choice rights and how best to balance a child's interests against her developing capacity as an autonomous chooser would be an enormous burden on the parent and on the relationship between parent and child, even if the task were well framed in the first place. There is certainly more at play within in changing parent-child relationship than a combination of rights and an assessment of particular capacities and interests. Rather, in practice, powers to choose and responsibility for the consequences of those choices are shared between parents and their children, even from a very young age. The relationship between parent and child changes as children mature,

and so does the type of sharing that occurs between the parties. I return to these issues in chapters five and six and explain how changes in the structure of relationships and shared decision-making can give a better picture of parents' roles during their children's adolescence.

4.2a A case study: privacy and trust

When very young, a child has almost no privacy. As she matures, spends less time with her parents and more time with her peers, she enters a sphere of relationships that is relatively closed off to her parents. There are variations in what a young person wants to keep private, and who is precluded from that sphere at any particular time.⁴ The example of social media can make many of these changes clear and tangible. Through social media the adolescent might present a particular version of her life and allow only some 'friends' access to that information. There are other people in her life with whom she has no social media connection or relationship, and so they are denied access to this information for that reason. Other people, who may sometimes be allowed access to this area of her life, may be blocked from viewing particular content. She not only has control over what she shares and what she withholds, but also with whom she shares and who she blocks. Clearly, in this context, this young person has developing privacy interests, but these may not necessarily fit neatly with her privacy rights, or with how any privacy rights are respected by others – parents might be reluctant to recognise or respect their

⁴ What counts as private depends on who one is and where one is situated in relation to others.

children's privacy interests. In this case, they might attempt to connect with her on social media, or connect with those who have connections with her, log in to her account without her permission, or deny her access to the devices she needs to access it. In this section I take a closer look at privacy and the move into spheres away from parents arguing that the rights gradualist interpretation of changes in adolescent status is unsatisfactory. The rights gradualist might say that the child's right to privacy is gradually acquired over time, and not all in one lump, but it isn't clear what it means to gradually acquire this right, and furthermore this is a very complex acquisition that does not happen in isolation from others. By way of illustration, I present a sketch of the life of Zoe:

Zoe is 15. Her parents consider her to be a typical teenager. She works hard enough at school to achieve decent grades. She still comes with Mum and Dad to visit Gran on a Sunday, and from time to time she enjoys getting cosy on the sofa with the rest of the family to watch their favourite Saturday night TV programme. Though she doesn't seem to get into trouble, Mum and Dad expect that she is probably no angel when she is out with her friends. She doesn't have an 'attitude problem' but is far more distant from Mum and Dad than she once was. She doesn't spend a great deal of time with her parents anymore as she is often with her friends. She is allowed to see her friends in the evenings and at weekends as long as she has done her homework and she is back home by a given time. As far as Mum and Dad know, Zoe doesn't have a boyfriend and she hasn't had a sexual relationship yet, but they also know that there are several boys in Zoe's peer group with whom she spends a good deal of time. This isn't something that Zoe would ever talk to her parents about –

especially Dad – because it is way too embarrassing. Zoe would only ever talk about boys with her closest girl friends. Though Mum wants to make sure Zoe is safe and able to negotiate the challenges of first relationships responsibly, she is worried about bringing up the subject of sex. Mum hears the stories in the press about teenage promiscuity, sexting, revenge porn, and early pregnancy. She’s also heard from other parents that the way the school has dealt with sex education is less than ideal. She is unsure whether talking about sex will make Zoe feel self-conscious or put pressure on her and is worried that it could lead to a closing down of communication on the subject all together, putting even more distance between the two of them.

This description of Zoe is the basis for the following discussion. By exploring possible rights gradualist responses to the issues that that Zoe’s case raises, I present reasons why rights gradualism should be rejected. Out of this discussion arise some limitations of the parent-child relationship that may well impinge on any account describing changes in adolescence. Interestingly, these limitations constitute an important finding for this thesis. It is exactly those features of the changing parent-child relationship – the developing of spheres that we keep private from others, restricted access to one another’s information, and parent’s constraining of their adolescent’s decision-making in different ways – that are significant in individual development; adolescence is complex, challenging and puzzling for exactly these reasons.

Reasons to reject rights gradualism

Taking Brennan as a spokesperson for the rights-gradualist position,⁵ let us assume that 'rights first protect interests (in the case of the very young) and later protect choices (in the case of fully autonomous adults) and in the middle defend a mix of the two.'⁶ In the case of sexual agency, Brennan might argue that the teenager is at that stage where her rights 'defend a mix of the two'. Zoe therefore has rights that protect her interests and rights that protect her choices. Correspondingly, Zoe's mum wants to do her best to protect her daughter, but also to allow her to have a life of her own. Mum has competing concerns for Zoe which may be conflicts between concern for her welfare and concern for her autonomy, or might be conflicts between different *aspects* of Zoe's welfare, or indeed different aspects of her autonomy.

So, how does the rights gradualist suggest we tackle this difficulty? In an examination of children's rights and sexual agency Brennan and Epp explore responses to conflicts between both parental and children's rights and interests, as well as conflicts between children's own decisions and their 'best interests', that is their autonomy and welfare. First, I consider how Zoe's case might be a conflict of parental and children's rights and interests and discuss the rights gradualist response.

Teens, like Zoe, are likely to only openly share information about sexual or even peer relationships with their peers. Even parents who know *something* about their child's personal life will likely only have limited knowledge of the actual

⁵ Brennan (2002), p.54.

⁶ Brennan & Epp (2015), p.228.

situation. There are mismatches in who is actually *allowed* to have knowledge about this private sphere, and who is *obligated* to have (and respond to) knowledge about it. This matters for a parent's ability to protect their children's interests if things go wrong. In order for Mum to be able to effectively support Zoe, either to prevent the worst mistakes or to help sort them out, she must have the right kind of knowledge about Zoe's life. Zoe's parents therefore have, at least, an interest in knowing about Zoe's sexual decisions.

Zoe's parents may even have a moral *right* to know about Zoe's sexual decisions. We can at least imagine a case where Zoe ends up the victim of sexual exploitation through social media, in which case some might ask, 'Where were her parents? Why didn't they know?' If Zoe's mum and dad are liable to be regarded as 'culpable monitors' then perhaps they do have a right to know about Zoe's 'private' life, or a duty to relate to her in particular ways, such that ignorance would not arise.⁷ So, it is plausible to say that Zoe's case, as I have sketched it, does capture possible conflicts between parental and children's rights and interests.

In response, Brennan and Epp suggest that parental rights should be understood as stewardship rights. That is, given that children are in the position that they need to be cared for, someone ought to protect, care and advocate for them, and parents are responsible for doing this. They write:

As stewards, parents have a duty to further their children's development and promote their interests ... [and] a parent's stewardship rights exist only insofar as the parent is indeed promoting the interests of the child.⁸

⁷ This leaves open the question of whether Zoe has a duty to keep her parents 'in the know'.

⁸ *Ibid.*, p.237.

At this point we would need to decide exactly what the interests of the child are and how they ought to be promoted. For now, the important point to make is that if parents have stewardship *rights*, this is *because* they have stewardship *obligations*. This highlights the obvious connection between rights and duties, and the importance of recognising changes in duties as well as changes in rights to properly describe how relationships and roles change during the adolescent transition. As Brennan and Epp point out, the interests of the child will change as they mature, and so the obligations that parents have change accordingly. They write,

Things get more complicated when older children and teens become competent enough to be semi-autonomous. ... a child may have rights to make decisions for herself when she is able to do so. That is, she now becomes not only an object of adult concern but a fellow subject.⁹

But, this seems to oversimplify the moral facts. As we see in the case of Zoe's mum, the discharge of *any* stewardship obligations relies upon having the right kind of knowledge about Zoe's life. During adolescence, trust becomes more selective; we understand more about different spheres of life, relationships, and individuals' limitations, strengths and concerns. Furthermore, we become more uncertain about whom to trust, or more hesitant about trusting others, perhaps especially during adolescence. Mum may be 'in the know' in respect of some spheres of Zoe's life, for instance in relation to her education. Mum can make her own assessment about

⁹ Ibid., p.238.

Zoe's contribution and commitment to school, and she can decide to either support Zoe or leave her to it. However, Mum is not allowed into every sphere of Zoe's life in this way. For Mum to make any judgement on Zoe's 'competency', or for her to decide whether Zoe is 'an object of adult concern' or 'a fellow subject' is going to depend on Zoe disclosing the right kind of information about herself and her decisions, as well as a great deal of sensitivity and judgement on Mum's part. The discharge of parental stewardship obligations is therefore restricted by Zoe's having a sphere of her life that is private from Mum.

I now move on to further explore the worry that, rather than Zoe's case being a conflict between Mum's rights (or corresponding obligations) and Zoe's rights, it is actually a conflict between Zoe's own decisions and her 'best interests'; that is, a conflict between her autonomy and welfare. The rights gradualists appeal to a judgement of competence and also risk. They write:

[when] a child is not fully competent, parents ought to respect the competence she does have and consider her intended decisions but may violate them given sufficient risk to her other rights, interests, and abilities.¹⁰

I take 'competence' here to be referring to decisional competence. That is, the ability to comprehend, deliberate, decide and communicate decisions. Returning to Zoe's case, any judgement about her 'competency' relies, as we've seen, on specific knowledge about Zoe's life. In order to establish Zoe's capacity to understand and

¹⁰ Ibid.

weigh up possible outcomes, or decide and communicate her decisions, Mum would need to have the right kind of information about Zoe's decision-making.

Now this raises a question: why is Mum excluded? Well, there are spheres of Zoe's life that Mum excludes herself from, perhaps because she worries about interfering. Some laws and social institutions, because of particular powers and restrictions, may also exclude her. There are also spheres of Zoe's life that Zoe *herself* excludes Mum from. We might worry that the spheres from which Mum is excluded are those spheres where Zoe is most vulnerable. In these situations, it appears that Zoe's 'choice rights' are in direct conflict with her 'interest rights', and it is especially difficult to know which to give primacy to.

There are also worries here about how a parent ought to weigh up 'risk'. Mum might consider Zoe's situation risky only because Zoe deliberately excludes Mum, or because Mum excludes herself for fear of interfering. Imagine that Mum has watched a film about teenage life and read a series of newspaper articles about teenage promiscuity that have led her to panic about Zoe. In response, she decides to violate Zoe's privacy but is poorly informed about both the facts and about Zoe's own perception of her situation – after all, there are sometimes wide gaps between what is considered acceptable by teens and what is considered acceptable by their parents, perhaps because parents' perceptions of, and indeed knowledge of, risk are skewed by media reports. In this case, Mum is herself demonstrating a lack of decisional competence. Her capacity to comprehend may be inhibited by generational or cultural differences, and her capacity to deliberate, to make a judgement, or decide, may be clouded by her deep concern for her daughter, or misplaced panic about a perceived risk.

In this case, Mum has misjudged the risk for Zoe. She is afraid for her daughter because she is misinformed, and actually Zoe is not at risk. However, some situations faced by Zoe might truly become risky by the very fact that she faces them without her Mum or Dad (while others might become risky because of parental involvement). But how can Mum know this if she does not know that Zoe faces the situation at all? Zoe has to share some knowledge about her life for Mum to attempt any judgement on this. Again, we are left wondering how we might negotiate these particular epistemic barriers. Given this, it is not clear exactly which rights should be given primacy in these complex real-life, *relational* cases, or if it makes sense to talk about rights in the first instance at all. When we are considering privacy in particular, there are distinctive social epistemological transformations tied to relational changes, and changes in responsibilities, that the rights-gradualist cannot currently account for.

Zoe's case highlights the difficulty that we encounter when we try to make sense of the claim that during adolescence, rights 'defend a mix of' interests and choices. We have interests and choices that are worth protecting, in different degrees and in respect of different spheres of our lives, all our lives, so the claim that young people have both 'interest' rights and 'choice' rights doesn't seem particularly special. Moreover, we can't easily make sense of the claim as 'balancing choice rights and interest rights' in respect of a *specific* sphere of her life, for example her sexual agency. This leads to a potential conflict between her autonomy and her welfare (or indeed conflict between aspects of Zoe's welfare or aspects of her autonomy) because of the special position that adolescents are in, between dependence and independence.

The rights-gradualist position is therefore misleading. It is in danger of oversimplifying a much more complex transition. In the case of privacy, the very nature of the transition may obscure the sense of rights-talk at all because of the epistemological barriers that it puts between the rights-holding adolescent and the parent, who must decide to how best to balance and respect the adolescent's interests and/or rights. We have seen that rights-talk seems particularly incoherent when a judgement of competency, and a judgement of the actual situation faced, is required to decide which rights to give primacy to. This judgment requires access to restricted knowledge, and this difficulty is all the more likely given that adolescents are commonly distanced from their parents in various ways. Rights-talk fails to give due attention to the shifting relationships with peers and parents, and the important implications that this movement between dependency and independency (and back again) has for parents' ability to discharge their obligations. Once we consider duties we can see how complex the question of what it means to fulfil those duties – and respect rights – really is.

Limitations and findings

As adolescents begin to negotiate spheres of activity that they keep private from parents, parents' access to information about their children's lives is limited by these new relational parameters. This has a bearing on exactly how much a parent is able to support their child, be involved in her decisions, share responsibility for decision-making, or share responsibility for the consequences of decisions. These changes are

what make maturation so challenging and puzzling and may prove intractably problematic when attempting to develop a framework to understand the transition to adulthood. These changes also make applying rights-based account impractical. However, since these changes are changes in relationships, a sphere-based gradualism might get a step closer to capturing, and dealing with, these complexities than rights gradualism. Since the change in status, the expansion of agency, *is* the familiarisation with and negotiation of a new sphere of activity, the central shift is not in the appearance of rights; the parental role is not limited to balancing her rights against her child's or balancing her child's interest rights against her choice rights. Rather, the parental role is more focussed on facilitating knowledge and experience of spheres of activity and providing a safety net for adolescents when things go wrong. Ultimately though, there are unavoidable limits to the avenues open to parents for supporting their children (or for parental authority) due to relational changes and legislative restrictions, and the parental role must adapt, or be rolled back, accordingly.¹¹

4.3 Sphere-based gradualism

The discussion in previous sections highlights that important changes in authority, responsibility, and competence emerge as children mature. I propose that these changes can be accommodated by a sphere-based gradualism better than rights-based gradualism. These changes are not simply the emergence of rights, but rather

¹¹ I explore this in more detail in chapter five.

a series of socio-relational changes. Sphere-based gradualism has the potential to capture the detail of the shift in authority and responsibility better than rights do for this reason. Furthermore, sphere-based gradualism is a better fit for the realities of gradual competence development. I begin by briefly returning to the shape of the adolescence.

4.3a Parametric development

A linear, gradual view of development might be analogous to something like a dimmer light-switch that is turned up over time, from the 'off' position to the 'full' position. What has previously been said about the complexity of development should suffice to show that this picture is far too simple. An improved, but still unsatisfactory, picture is offered by Franklin Zimring. Zimring describes the legal world of adolescence as being akin to a series of binary boxes. When you reach a legal age of majority the box changes from 0 to 1, first you are a minor then you are an adult; much like flicking a light switch, the light is off and then is on. In legal terms this binary thinking serves a practical purpose in terms of decision-making but does have some costly consequences. Decisions about adolescents are often foregone conclusions because there is no room for flexibility or gradation, and when middle-ground is sought adolescents are at the mercy of 'undisciplined balancing' by authorities.¹² Despite these potential costs, Zimring argues that a binary system can

¹² Zimring, F.E. (2014) *The Changing Legal World of Adolescence*. New Orleans, Louisiana: Quid Pro Books; pp.72-3.

be responsive to real life development when there are a (sufficient) number of interrelated binary boxes. He writes:

The phases of childhood and adolescence provide one set of boxes. Decision-making contexts provide another set of boxes: living at home or on one's own, working or in school, custodial versus non-custodial parent. Over the course of adolescence, lights switch on – one, two, or ten at a time, like city lights at night. But years go by until they all light up and full adulthood in all its legal meanings has been conferred.¹³

This view seems to be consistent with some elements of rights-based thinking. However, the sphere-model can do a better job of conceptualising real-life changes than binary boxes. Returning to the mixing desk analogy, one of the things that becomes vivid on the sphere-model is that young people become 'adults' at different times in respect of different things such as criminal responsibility, the world of employment, sex, and the age at which a young person can consent to (or refuse) medical treatment, and they do so *gradually*. Each of these areas is a sphere of activity, and as a young person moves through adolescence, they move into and out these spheres of activity via their associations with others. In this sense, the multiple sphere-model captures how adolescents' status changes at different times in respect of the different areas of their lives and the relationships they have, over time.

The strength of the sphere-model is that it can accommodate changes outside legal decision-making contexts, for which binary thinking is not appropriate. Furthermore, it captures relationships as an essential feature of development,

¹³ Zimring (2014), p.73.

something that a binary model just cannot do. Aside from spheres that are formalised by laws, there are spheres of activity that young people move in and out of at an informal or social level that change the status of a young person within the family and other social settings. Consider, for example, the decisions they make about where to go and how to spend their time, what colour to dye their hair, what music they play, who is allowed in their bedroom (or other space) and when, or how to spend their money. Family life during adolescence involves movement into these areas of more independent decision-making gradually over time and parents necessarily take a step back as their child matures, but not at the same rate in respect of all these things. A parent might retain a *degree* of control over some decisions, for example, which friends can spend time in their child's room, or restrict certain activities in the adolescent's personal space, for example smoking. However, parents might choose to leave, or may be forced to leave (because of the limitations of the role they play in their child's life), many other decisions to their adolescent child. They may nevertheless be required to share responsibility for putting things right when their child makes mistakes or when things go wrong without anyone being at fault. A sphere-based gradualism certainly seems to be a more appropriate way of conceptualising these changes in informal social spheres. I give a detailed analysis of the shift in whose 'say-so' is most effective and how responsibilities are shared in chapter five, where I describe how a transitional paternalistic framework facilitates sphere-based gradualism. I also show how this framework might work at an informal level in chapter five where I look at changing parental relationships in adolescence. Furthermore, as I go onto argue in both chapters five and six, sphere-based gradualism with transitional paternalism has the benefit that it can explain

varying degree of ‘gradualism’ in formal legal spheres. The idea that development is more like a parametric mixing desk than a set of simple on-off light switches captures the reality of individual development.

4.3b Developing capacities

Chapter two identified the development of particular capacities as being relevant to changes in children’s agency and status as they mature. Capacities for agency might be categorised as cognitive and volitional capacities, for example decisional competence, and many theorists appeal to such capacities in their accounts. Additionally, some degree of understanding of the content and function of rights could be considered a competence condition for becoming a rights holder. What is important to note is that there are many different areas of activity, to which these competences might be turned. Each sphere of activity and area of decision requires a different application of these capacities, different knowledge of provisions and protections, of how rights, powers, responsibilities and restrictions impact on decision-making. We might say that some capacities or competences are *sphere-specific* whereas others are applicable across a range of spheres. Accepting this, it is possible that a person may have more developed competences in respect of one area of life than in others. This is one way to make sense of Brennan and Epp’s claim that, during adolescence, a child is ‘not fully competent or is competent in some areas of her life and not others.’¹⁴

¹⁴ Brennan and Epp (2015), p.238.

The sphere-model can accommodate this variation. As stated in chapter two, on many accounts, capacities are described as being developed through experience and practice. In many cases theorists focus on the capacity to make decisions, but this is to take too narrow a view of agency. In fact, the capacities developed through experience of new spheres include decision-making, but also include familiarisation with the structures that shape our values, restrict our plans, and enable our decisions. Agency is not just about being able to reflect on a set of choices, deliberate, and make known a decision. Rather, it is better understood in relational terms as described in chapter three, as being a capacity to negotiate the relationships and affiliations that shape the spheres of life.

4.3c Changes in authority and responsibility

As the example of privacy above shows, the adolescent space is characterised by changes in authority and responsibility, connected to increasing agency. Framing these changes in terms of traditional rights does not say enough about the relational changes that adolescents experience, and therefore misses out essential context for how those rights emerge. The sphere-model gives the conceptual framework necessary to capture that important relational dimension, the way that changes in relationships happen gradually as children mature and become more independent. Changes in who has authority and responsibility in particular contexts are key aspects of this gradual change.

There are clear changes in who is in control of the lives of children and young people as they mature. Parents (or carers) are in control of the lives of young children. They make many decisions for them on their behalf, and as a result simplify the lives of their children.¹⁵ As children mature, parents must allow them to make more decisions for themselves. This starts from early childhood, first in decision-making areas that are not risky, such as what to wear to a party. Later, children may be allowed to make decisions that are difficult or involve risk. This leads to unavoidable complications for young people, and adults now have a different job. That is, to support young people's *ability* to take control of their lives for themselves. There are many factors that may foster or hinder a young person's ability to make their life their own. These may be social, psychological, emotional, psychosocial, or financial. Consider that many young people lack financial independence. This kind of barrier may impede independence from the parental home, but it does not necessarily restrict movement out of or into spheres such as education or employment. The trajectory to adulthood is not universally hindered by particular barriers across all areas of life, though one person may be subject to many difficulties that hinder their independence in many ways. The sphere-model described in chapter three is consistent with a multiplicity of barriers to a person being able to take responsibility for her own life, look after herself, and relate to others on her own terms.

As well as changes in authority, there also are changes in who is responsible for making decisions, and also in who is responsible for the consequences of those

¹⁵ For Winnicott, the 'good enough mother' simplifies her child's early life. Winnicott, D.W. (2012) *Playing and reality*. London: Routledge.

decisions, particularly when things go wrong. We may not ask children to be responsible for caring for themselves or for making important decisions, but we do hold young children responsible for their actions, perhaps attacking a sibling for example, and we do attach consequences when mistakes like this are made. However, as children mature they are expected to bear increased responsibility for their decisions, both in terms of making decisions and in terms of bearing the consequences, though these two ways of being responsible come apart. For instance, an adolescent may have the say-so about how and when to spend their money and decide to go out with friends in town but miss the last bus home and have no more money for a taxi. When things go wrong, which in this case means being stranded, parents may well step in to help pick up the pieces.

During adolescence, adults, such as parents or teachers may have the *expectation* that adolescents can and should take responsibility for both making decisions and for the consequences of them as a result. However, increasingly adolescents have a life outside the home, and are consequentially less subject to direct monitoring and control, closing down opportunities for adults to be involved with their choices, as we saw in the case of Zoe. Adolescent demands for increased independence and authority over their own lives may mean that adolescents want more privacy, particularly in their relationships with peers, or that they *demand* increased authority outside of the jurisdiction of their parents. However, in these cases, the power to make decisions may not correspond to responsibility for the consequences of those decisions, inasmuch as parents are (or still feel they are) responsible for picking up the pieces.

Schapiro claims that we do not hold children responsible for their actions in the same way that we hold adults responsible. We have these different 'reactive attitudes'¹⁶ because actions are not *attributable* to children in the right way, because they are not yet agents. Schapiro classifies our reactive attitudes into two types: first, resentment and blame, and second, discipline and instruction. Adolescents find themselves in a distinctive half way house where we are willing to hold them responsible for some things but not others. At a time in young people's lives when they want to make decisions that they feel are their own and are negotiating the delicate challenges of fitting in with peers and social groups, adolescents are subject to many contradictory messages about how they should behave from peers, parents, the media, and school. The complex interaction of these influences, and the potential imbalance between an adolescent's ability to critically reflect on these influences, and their readiness to embrace them, complicates the question of when we should hold adolescents responsible for their actions, or the extent to which they should be able to govern their own conduct.

An unmistakable characteristic of adolescence is that it is a time when young people are 'finding themselves'. This means 'trying on' different identities, testing boundaries, and experimenting with different principles. Schapiro writes, '[b]y engaging in play, children ... "try on" selves to be and worlds to be in. This is because the only way a child can "have" a self is by trying one on.'¹⁷ Since children are not in a position to have their own 'self' as such, the provisional adoption of 'selves' allows children to develop their own principles and work their way out of childhood. This

¹⁶ I borrow this term from Schapiro (1999), p.717.

¹⁷ *Ibid.*, p.732

mirrors the sense in which adolescents are also adopting provisional selves in their new relationships and in new social contexts. That is to say, 'we think of adolescents as trying to carry out this search by identifying themselves in a rather intense but provisional way with peer groups, celebrities, political movements, athletic activities, lovers, and the like.'¹⁸ It is not clear that the values and reasons that adolescents adopt as their own – perhaps ambivalently or impulsively without a real understanding – can be said to be representative of their will in the right way for Schapiro to regard them constitutive of proper authorship of their actions. There may even be a concern that the values and reasons that adolescents are adopting *undermine* rather than *reflect* their agency.¹⁹ This might be because young people are ill equipped to negotiate the powerful messages that they receive through marketing and the media, and that is exacerbated by the prominence of consumer-culture, and the 'status' of particular branding that young people use to work out – and work their way into – new peer groups. This may give us some explanation for why our reactive attitudes towards adolescents are so complex, and why it is not always appropriate to hold adolescents responsible in the way that we do adults. Even though adults may increasingly expect adolescents to take responsibility for themselves and their actions, they often excuse their irresponsible behaviour or

¹⁸ Ibid., p.733

¹⁹ A rather tricky problem, beyond the scope of this thesis, is the problem of authenticity. Cuypers, S. E., & Haji, I. (2007) 'Authentic education and moral responsibility,' *Journal of applied philosophy*. Vol.24, no.1, pp78-94, p.78, state that in much of the literature, 'authenticity is exemplified by motivational elements, such as the agent's desires or values, when these elements are, in a manner to be explicated, 'truly the agent's own' and not foreign or alien.' This highlights the grave problem that, on this account, authenticity is incompatible with any form of socialisation since many forms of socialisation, such as the family and education, are characterised by the inculcation of motivational elements, for example values and beliefs. As such, authenticity becomes a problem for authorship throughout the life course and is not restricted to adolescence. The worry is that if authenticity – meaning the desires and values that motivate a person's decision are their own – is a condition for autonomous agency, becoming a 'chooser' is not sufficient.

mistakes. Parents may be inclined to blame the sources of socialisation – her peers, celebrities, or YouTube – for an adolescent’s decision. Responsibility for their actions is diminished because, whatever ‘self’ they are trying on, they are not yet properly ‘in’ a self, or themselves, as such.²⁰

This discussion highlights an ambiguity in how we understand responsibility. First, we can think about responsibility as accountability, that is, a person is culpable for their actions and should therefore be praised or blamed for them and, perhaps, left to bear the good and bad consequences of their actions alone. Thinking about individual responsibility in this way detracts from the vast and complex network of influences that are at play in the cultivation and rejection of various behaviours. It also takes for granted the ways in which consequences follow our actions. While some consequences are simply matters of physical or biological causation, social structures usually play a role in determining what consequences – be they risks or costs or benefits – attach to different options. Adolescents are subject to many conflicting pressures and inconsistent messages in their daily lives and are still learning about the likely consequences of different actions or behaviours. There are many influences in a young person’s life. Environmental, socioeconomic, and cultural factors will mean that they are more or less able to engage with alternatives, take control of their lives, or be fairly held accountable for their behaviours. Alternatively, we could think about responsibility in terms of being able to take charge or having the power to act. Taking responsibility in this sense is about acting on one’s own initiative, making choices and assuming control, and is associated with a sense of

²⁰ This also raises the question of whether we should extend this generosity to adults, but I put this to one side.

empowerment. Some young people are unable to meet the expectations of individual responsibility and may feel powerless to make changes to their lives or trapped by peer pressure. Choices, as they are presented to a person, may not be 'real' choices for her in the sense that a particular option is not feasible. There might be reasons such as a lack of ability or resources that mean taking up certain opportunities is just impossible. For these young people, discussions about personal choice may well be futile and actively alienating.

The detail of the changes in responsibility and authority can only be captured by an account of development that is responsive to the relationships that adolescents have with their parents, peers, and with the structures that shape their lives, such as the sphere-model. There is not a linear correlation of responsibility for making decisions with responsibility for the consequences of those decisions. The relationships that adolescents have with their parents mean that, in some cases, parents will be willing or will be required to step in to support their children or fix their problems. Furthermore, this is reflected at a legislative level as institutions allow adolescents partial responsibility for making decisions about their lives or enable them at least minimal participation in the decision-making process, such as in cases of medical decision-making. In a similar way, in the adolescent judicial process legislation is in place to extend a degree of leniency to minors who commit offences. In both formal and informal settings, socio-relational context is key to understanding changes in authority and responsibility, and the sphere-model provides this context. In the following chapter, I argue that within the sphere-model, a period of transitional paternalism, based on the sharing of powers and responsibilities, facilitates sphere-based gradualism and can explain the changes in authority and responsibility

described here.

4.4 Fitting rights back in to the picture

I may have rejected rights-gradualism in favour of a sphere-based gradualism, but clearly adolescents do have a range of rights, so this raises questions about the place of rights within the sphere-model. In this section, I take a look at how rights emerge out of changes in relationships. I also discuss how rights are connected to gradual changes in competence and agency as understood on the sphere-model.

4.4a Rights in relationships

As I have described in the preceding chapters, adolescence is a complex and dynamic time. This is the period in life when there are many, often dramatic, changes in a person's status, the claims they can make, the responsibilities they have to bear, how they relate to others and how others relate to them. During this time a person enters new spheres of life, is faced with new choices and new responsibilities, and has to negotiate relationships with individuals and organisations for the first time. Of course, spheres of activity open or close to us throughout life – think of a young child's first year at school and the changes this entails in the relationship that she has with her parents and others, for example – but the dynamism of adolescence means that we cannot ignore the movement into, out of, and across spheres as a key characteristic of development at that time. The account that I present, focusing on

this aspect of development, sheds a different light on the features of our individual rights, and gives content and important context to the idea of gradually acquiring rights.

Minow writes that the dependency of children on others, 'situates children outside the sphere of rights-bearing persons in a system that makes independence a premise for the grant of rights.'²¹ Minow offers a relational account of children's rights informed by 'three feminist concerns':

Appreciation of relationships, a commitment to a vision of the self forged in connection with - not just through separation from - others, and a preference for glimpses of complexity, contextual detail, and continuing conversation.²²

Minow's point is that rights are for people in relationships. Rights in relationships do not involve, '...individuals per se but the claims, responsibilities, and boundaries of particular human relationships.'²³ Thinking about rights in this way helps to answer questions about how to assign rights to children and adolescents. By extension, changes in relationships entail changes in how rights are assigned.

Changes in rights, then, emerge out of changes in relationships. Furthermore, rights to choose are framed by the associations we make with others and made into real decisional powers by the organisational and legislative structures that shape our activities and our lives. My right to choose whom I marry, for example, is framed, or

²¹ Minow (1986), p.18.

²² Ibid., p.15

²³ Minow, M. (1990) *Making all the difference: Inclusion, exclusion, and American law*. Ithaca: Cornell University Press; Minow, M., & Shanley, M. (1996). 'Relational Rights and Responsibilities: Revisioning the Family in Liberal Political Theory and Law.' *Hypatia*. Vol.11, no.1, pp.4-29.; p.19.

restricted, by my relationships with others, by my role within a cultural, religious, or family group, by the rules, conventions and expectations of that group, and also by the laws of the state around marriage. Likewise, as our relationships change so do our responsibilities to one another, and as I move into a new sphere of life new responsibilities to new (and existing) people in my life emerge. In the case of employment, for example, my role is defined by a set of duties (and rights), and I have responsibilities to my colleagues and employers, some of which are legal or formalised through contract, others are not. I must turn up for work on time, abide by a code of conduct, ensure I uphold the laws around data-protection, be a 'team player,' and get on with my colleagues. These examples illustrate how changes in rights and responsibilities fit into a sphere-based model of social relations. Rather than being taken as primary in our thinking about changes in a person's status, rights that emerge in adolescence fit into a more holistic socio-relational model of gradual development and a broader normative picture that includes commitments, duties and liabilities.

4.4b Rights and agency

As Michael Freeman states, 'the dominant conception of rights has presumed autonomy and a direct relationship between the individual and the state making rights for children even more problematic.'²⁴ There seems to be a link between rights

²⁴ Freeman, M. (2004) 'Introduction,' in Freeman, M. (ed.) *Children's Rights (Vol.1)*. Aldershot: Ashgate.; p.xxii.

and autonomy (and the capacities associated with autonomy), which may lead us to think that children cannot have rights on this basis. But adolescence poses a different, albeit related, puzzle where autonomous agency is concerned. Adolescents are moving closer to autonomous agency and as they do, rights to choose for themselves begin to appear. As such, autonomy and emerging agency are key concerns for anyone writing about adolescence and adolescent rights.²⁵ As we saw in chapter two, some rights theorists posit that rights track the capacities relevant to autonomous agency and are acquired gradually over a period in the run up to adulthood as those capacities develop. On my account, agency is perhaps best thought of as a person's ability to participate in different spheres, and so it is plausible that rights emerge as abilities for participation in different spheres are developed. Adolescence is a period that might be described as 'a term of years when those not yet adult are engaged in the process of becoming adult, a rich but often stressful period of trial and error', or as 'a period of semi-autonomy.'²⁶ Older children and adolescents must learn about the complexities of the associations that govern their lives, and how to be rights-bearers and duty-bearers. They will learn about these things gradually (through experience), and so the process of moving into (out of, and through) spheres, must also be gradual.

Given this, there are two recognisable problems for rights-talk in adolescence. First, there is the problem of attributing a threshold for any given right, and in connection to this, questions about how best to justify thresholds, and assess competence or autonomy. For instance, when ought a child's right to protection

²⁵ Hartman (2000).

²⁶ Zimring (2014), p.viii.

from harm give way to their right to make decisions for herself? Should this change be measured by the same marker in respect of all aspects of her life, and if not, how can we make sense of the variable changes in the different spheres of a young person's life? In practice this gives rise to many dilemmas, and the theoretical task is to show how and why these dilemmas arise. Second, for theories that tie rights acquisition to competency or self-determination, worries about balancing burgeoning autonomy against considerations for adolescent welfare are obviously central. These problems are centred on the need to reconcile any one individual's decisional competence with a 'mythical age of majority'.²⁷ In some cases it seems that, though adolescents mature gradually and become (competent) adult (agents) over time, they acquire many (legal) rights to choose for themselves at a single point in time. Furthermore, there are apparent contradictions internal to the rights-based framework as discussed at the beginning of this chapter. The challenge for rights theorists is to square gradual increases in capacity with rights acquisition, and to do so in a way that accurately reflects the nature of adolescence.

The other key concern when considering adolescence is the emergence of independence, or more specifically, the ability of a person to take responsibility for herself. One way to frame the real-world challenges of adolescence is to highlight disparities between the ascription of rights and responsibilities and the young person's ability to actually use or discharge them. That is, in real-life adolescence, there are barriers to being an adult, despite being formally accorded adult status (rights) in some areas of life. These might be obstacles that consist in a lack of

²⁷ Hartman (2000), p.1362.

resources, or not being heard or respected. Conversely, there may also be reasons why a young person may be unable, or reluctant, to take on a particular responsibility, or find it difficult to make important decisions for themselves. There may be difficulties in acquiring structural or legal adult status despite having adult competencies (or responsibilities), or psychological or developmental reasons why a young person is unable to take on certain responsibilities.

When we think about the tensions of adolescence in terms of a person becoming an autonomous agent within their social context, we see that there is more going on than a linear acquisition of individual rights and/or responsibilities, and indeed more than an increase in personal autonomy. In real-world terms, there appears to be an asynchrony between the acquisition of adult roles, or completing developmental tasks, and the ascription of adult legal status. There also appear to be discrepancies between the decision-making powers that young people have and their decision-making ability, or even their willingness to make decisions for themselves. Gill Jones comments that the contemporary phenomenon of ‘Kidults’ and ‘Twixters’, those young people stuck between dependence and independence, on the threshold of adulthood for extended periods, represent a ‘deviation from normative models of transition as linear, one-way, and relatively brief.’²⁸ Relatedly, the use of the term ‘adolescence’ as synonymous with ‘teens’ is conceptually confused and misleading. In reality, the transition, understood more holistically to take into account the social and relational realities of becoming an adult, is untidy

²⁸ Jones (2009), p.85.

and unclear, occurs over a much longer period of time, and is deeply impacted by the type of familial, community and structural support available to a person.

Developing agency – a factor underlying the move towards independence alongside social expectations and demands – depends on particular relational conditions in addition to personal autonomy; it requires both the *capacity* for agency (the psychological or cognitive capacities *and* the right social and structural conditions) and the *recognition* of your agency by others. These conditions may be in part about the person as an individual, but, very importantly, are also about how that person stands in relation to other people, their community and the state. In between childhood and adulthood, *these* transitions are more characteristic of adolescence than the linear acquisition of rights over time.

In summary

Development is gradual. Rights-based models are not apt for describing the complex landscape of adolescent development for three reasons. First, the focus on rights means that many other features of the change in status during adolescence are lost, for example any account of changes in responsibility or in social or relational context. Rights based models therefore present an incomplete map of the landscape. Second, existing rights-based gradualist accounts do not explain how rights themselves are acquired gradually. Conceptually speaking, gradually acquiring rights, that seem to be binary, is problematic. As a result, the gradualism seems to come not from gradually acquiring each right as such but rather from a supposed gradual shift

between types of rights. Finally, there are reasons to think that applying rights gradualism is problematic in practice. Parents have the burdensome job of balancing rights and interests when rights defend a mix of welfare and choices. Furthermore, this task requires parents to stand in a particular epistemic relation to their child which may not be possible given the nature of adolescence.

Although there is clearly a place for discussion of adolescent rights, rights-talk on its own is too limited to encompass the complexity of adolescence, or the important contribution made by a young person's relational and social context to their transition into adulthood. Given this, the project to develop a sphere-based gradualism in place of rights gradualism has clear benefits. I have argued that the sphere-model outlined in chapter three can accommodate a more nuanced gradualism focussed on changes in relationships, related changes in authority, powers, and responsibilities, and the rights and duties that emerge as a result. Incorporating powers and responsibilities into an account of adolescence makes better sense of gradualism because powers and responsibilities can be shared between people. Shared decision-making based on the sharing of powers and responsibilities is an important feature of adolescence. Sphere-based gradualism has the potential to capture the particular relational contributions made by parents and others to individual development better than rights can on their own, allow for extended transitions, and the characteristic oscillation between dependence and independence seen in real-life adolescence.

Chapter 5: Transitional Paternalism: Parental involvement in adolescent lives

In previous chapters I have presented the view that agency is understood as a person's capacity to take control of her life through the network of affiliations she has with other people and institutions in respect of the different spheres of her life. Children have to learn how to negotiate new relationships and affiliations, expectations, and responsibilities, as they enter into new and unfamiliar spheres of activity. In this sense, they are less able than adult agents to take control of their lives for themselves, at least initially. On this articulation, agency and the relevant capacities required for participation are developed *through* exposure to new spheres of activity and *practice* within those spheres.

In what follows I describe, justify, and explore transitional paternalism, a period when the paternalism that seems justified during childhood is rolled back in such a way that it *facilitates* the kind of participation and experience needed for adolescents to become familiar with new spheres of activity. An initial articulation of a version of transitional paternalism, applied within the very specific context of adolescent consent to life saving treatment, has been put forward by Neil Manson.¹ The broader and more detailed account of transitional paternalism that I defend is incorporated in important ways into the sphere-model that I have developed in previous chapters. This account of transitional paternalism is explained and justified by the duty that parents and others have towards children to enable relevant competence-building experience in new spheres. This experience is necessary so that

¹ Manson (2015).

children can serve their own agency interests in the long run and develop into bearers of responsibilities, including bearing the responsibility for leading their own lives. Transitional paternalism is therefore intrinsic to the process of familiarising adolescents with the relationships, expectations, opportunities, and responsibilities of new spheres of activity.

As the Zoe example in chapter four illustrated, there are limits to how far parents can be involved in their children's lives, and changes in what kind of parental behaviour is deemed to be appropriate, as their children mature. There is a clear imbalance of authority and status between adults and children, and the balance between the two shifts as children mature. There are different ways that parents can relate to their children, which may include degrees of control over both their children, and over their children's transition into adulthood. There is a continuum between what might be called a 'liberal' approach to parenting and an 'authoritarian' approach. The former may well leave adolescents without support or protection as they mature, whereas the latter seeks to maintain authority and exercise control in a comprehensively restrictive way, such that the adolescent is given little developmental leeway to participate in new spheres of activity. Adult authority over children's lives relies on adults being *able* to have the necessary control, and on a particular kind of interaction between adults and children. Here, I explore how far parents *can* be involved in the lives of their children without becoming authoritarian, and to what extent parents can retain a role in their children's lives without their involvement becoming unjustifiably paternalistic or authoritarian.

Within the continuum of parental involvement there are different reasons or motives for exerting a degree of control, some of which may be paternalistic, but

others not. A period of transitional paternalism – as I describe it, in terms of the sharing of powers and responsibilities – balances protection with the development of agency. Nevertheless, there are different ways of sharing powers and responsibilities; sharing powers and responsibilities does not protect against overly restrictive parenting. However, there are ways that powers and responsibilities can be shared that mean the parental role can adapt to developmental and relational changes in ways that reduce the potential for unjustified paternalism or authoritarianism. Parents can adopt a more consultative role, in response to the changes in their relationship with their adolescent child. In this role the parent has less share of the powers in the parent-child relationship, but perhaps retains a greater, or at any rate significant share of responsibilities. I explore what this might entail for both parents and their children in respect of retaining channels of communication between parents and adolescents, and also for parents who have to adapt to respecting adolescents as agents without being intrusive.

5.1 Developing agency and the problem of paternalism

The sphere-based gradualism introduced in chapter four provides a more differentiated model than rights-based gradualism. I now move on to explore in more detail how changes in authority, or powers, and responsibility, characteristic of adolescence, are tied to the social and relational changes captured by a sphere-based gradualism. I argue that this multi-faceted socio-relational change is what constitutes the rolling back of paternalism. Understanding the change in these terms

gives us parameters for thinking about how far parents should be involved (broadly speaking) in their children's lives. I set this discussion up against a general concern about parental involvement as children mature: parental involvement and intervention in childhood may be justified on paternalistic grounds. However, there is the potential for that same involvement or intervention to be inappropriate as children mature.

In this section I articulate what paternalism is in terms of the socio-relational account that I have so far presented. I look at when paternalism towards children is justified in terms of the sphere-model, and relatedly use the sphere-model to illuminate when paternalism becomes problematic.

5.1a Justifying paternalism

Traditionally, paternalism is thought of in terms of autonomy-limiting intervention into another person's life in order to further that person's other interests. This might mean making decisions on behalf of a person, limiting or framing their options in such a way so as to reduce possible risk or harm, or stopping a person from acting in ways that are risky or harmful to them. Paternalism, which is a restriction on autonomy grounded in beneficence, characterises adult-child relations and is a key part of parents discharging their duty of care. When children are small, though they express preferences, someone else makes decisions for them on their behalf. On the sphere-model, which considers the wider context to how choices are framed and decisions made, paternalism towards children is about structuring and mediating

children's environments and activities across the spheres of their lives. There are spheres which are just not accessible to children because they lack the skills and knowledge to participate in them safely, or at all. The social relationships that children have mean that many of their activities are mediated by adults or by various legislative restrictions, and these may constitute or involve paternalism. Beneficent intervention is justified when it facilitates children's participation in spheres of activity that they are unable to access without adult mediation and when this participation provides the right kind of practice and experience to develop the competences children need to develop to enable them to participate on their own account in the long run. At some point in the normal developmental story, the *justifiable* beneficence of parents towards their children raises a question about whether such beneficence is unduly paternalistic. To develop this line of argument I turn to the work of Schapiro.

For Schapiro, childhood is 'a liminal condition of emerging personhood'.² Children are unable to make decisions for themselves and, by an appeal to children's fundamental interests in becoming autonomous in the long run, Schapiro justifies paternalism. Rather than arguing that children are unable to make good choices, or do not make choices well – classic justifications of paternalism towards children – she argues that a child's lack of reason means she is unable to make her own choices, *whether good or bad*.³ The claim is that 'despite appearances to the contrary, there really is no will there, or rather, that the will that purports to be there is not intact or

² Schapiro (2003), p.588.

³ *Ibid.*, p.579.

well-constituted.⁴ Childhood is a 'liminal stage during which a person is still on the way to constituting herself as a source of activity in the normative sense.⁵ That is, children are not yet the sort of beings who can be the source of genuine choice. A choice is genuine when it is an agent's *own*, and it must be attributable to them in the relevant way; though a choice may be attributable to a person in the sense that they *produce* the action, it may not be attributable to them in the *normative* sense. The normative sense is 'to identify myself with it, in the sense of claiming representation by it and taking responsibility for it.'⁶ When an action is attributable to me in this normative sense, I recognise that I am the 'author' of that action. Paternalism towards another person is only justified when that person is unable to 'author' his or her own actions. According to Schapiro, adult authority is only preferable to children's own instincts insofar as it does a better job of protecting her interests. Considerations of *proficiency* in decision-making only appear most salient because considerations of *attributability* are already settled. My reason for including Schapiro's work is not because I want to draw on her argument in its entirety. Rather, I want to draw attention to an important supplementary condition for when adult paternalism is justified towards children. In summary, Schapiro argues that adult paternalism towards children is only justified if:

- 1) children are still on the way to constituting themselves as a source of activity in the normative sense.

⁴ Ibid., p.584. Schapiro claims that we tacitly appeal to this claim when we defend our paternalistic attitudes towards some adults, for example the mentally ill.

⁵ Ibid., p.589.

⁶ Ibid., p.586.

- 2) adults do a better job of protecting and promoting children's fundamental interests better than children's own instincts.

Schapiro supplements these conditions with the claim that, among their fundamental interests, children have a distinctive interest in *becoming self-governing*. Accordingly, adult authority can only be justified only when it protects and promotes children's interests better than children's own instincts, *and* when its goal is the promotion of the child becoming self-governing in the long-run, such that the actions she produces count as her own. Schapiro's depiction of adult-child relationships encompasses children's *developmental*-autonomy interests, and highlights the duty that adults have to help children become self-governing in the long run. This echoes my own view of paternalism articulated in terms of the sphere-model and gives additional support for my claim that a period of rolling back paternalism should occur as children become get closer to adulthood.

5.1b When paternalism is a problem

The standard liberal account of adulthood is clear, at least in outline. Adults are autonomous agents, insofar as they live within the limits of a collective governmental arrangement. Broadly speaking, an autonomous agent acts on reasons that are, in some significant sense, her own.⁷ Furthermore, if this is denied a person, then their dignity as a human being is compromised. To get in the way of someone acting on

⁷ For a survey of views on this matter see Christman, J.P (ed.) (1989) *The Inner Citadel: essays on individual autonomy*. New York: Oxford University Press. I am not going to take up this debate here as it is not relevant to my points.

her own will is at worst coercive and at best – when this kind of interference is believed to be for a person’s own good – paternalistic. The general worry for liberal gradualism is that, even though paternalism may be justified in early childhood because of worries about a child’s ability to choose well for herself, it is less clear that paternalism is justified in adolescence, as children begin exhibit a degree of rational competence in some domains that is akin to that of adults.

There is a real and profound tension between a young person’s developing agency and their dependency on others, as well as the kinds of paternalistic intervention that they are subject to from the adult world, both from the state and from adults closer to home, such as their parents and teachers. The tension is perhaps so striking in the context of parent-adolescent relationships for several reasons. First, in liberal societies, parents, wider society, and the state have an interest in raising children to be, as far as possible, autonomous agents. Second, as children mature, they appear to be less reliant on parents and more able to manage their own lives. Third, during adolescence, young people are often more disposed to air grievances about unwanted authority from others, from parents, school, and even wider social norms and expectations. Adolescents have left behind their early childhood, a time when they are the subjects of paternalistic attitudes and intervention, and nearing adulthood, which is defined by much less paternalistic conventions.

To restate, paternalism is justified on my socio-relational model when it facilitates children’s participation and does so insofar as it provides them with the practice and experience of new spheres that will enable their agency in the long run. It might take time and practice to become familiar with, and develop the skills to

manage, the network of affiliations and all the related expectations, opportunities, restrictions, and consequences, associated with new spheres. In the first instance, as described in chapter three, parents commonly facilitate and mediate a child's interaction in any given sphere and as such manage the complexities of that sphere of activity. In practical terms this means making decisions on the child's behalf. However, as stated in the introduction, the same parental involvement that fulfils these conditions and is justified in early childhood, may become unjustifiably paternalistic or unduly authoritarian in later childhood. For example, I might make the decision about what my 6-year-old son should wear to play out on a cold winter day, but it seems less appropriate to impose my authority on him when he is 16 years old. Instead, I might advise him to put on a warm coat, but nevertheless have to watch him leave the house in just a t-shirt, because once he considers himself able to make that decision and take responsibility for potentially getting cold, he will choose to listen to advice or disregard it as he sees fit. Examples such as this illustrate how areas of decision-making open up to children over time, and how parents (and others) are gradually pushed out of, or have to step back from, their role as the mediator of particular spheres and areas of decision-making. Paternalistic involvement in children's lives becomes problematic exactly when it is motivated to mediate children's and adolescents' participation in spheres of activity despite their existing ability to participate on their own account, and when this kind of mediation restricts participation in ways that limit children's activities, or the kind of experiences and practice required for agency development, and this might include mistake-making or learning through trial and error.

5.2 Transitional paternalism and the sphere-model

Transitional paternalism responds to the development of the child or adolescent. It captures a series of complex social and relational changes that enable young people to have more authority or control over their lives and which entail changes in responsibilities of various kinds. In this section, I use examples to illustrate how parental involvement is intrinsically tied to the way powers and responsibilities are shared within parent-child relationships. These examples show that, as powers and responsibilities that are shared between parents and children change as children mature, so does the type and scope of parental involvement.

Like paternalism, a period of transitional paternalism is justified because a period of experience of agency is essential to developing as an agent. Since practice at participation in new spheres of activity is required to develop the competences necessary for negotiating that sphere, children have an interest in acquiring appropriate experience. Certain adults have a corresponding duty to promote this interest alongside children's other interests. This means that, in part, adults have a duty to familiarise young people with spheres of activity that are new to them, which will include some activities and practices that she is made to do (whether she wants to or not), and enable them to participate in those spheres, ultimately without parental interference. The intermediate step, between the time when a child's participation in the spheres of life is mediated by her parents to a time when she is able to participate in spheres without mediation, prepares young people to be able to take on increased powers and responsibilities in adulthood, and involves a

continuing commitment to intervene (including putting limits on what a child may do). This intermediate step is characterised by partial or controlled participation and is enabled by sharing powers and responsibilities in certain ways that allow a child to gain relevant experience and become acquainted with spheres and areas of decision-making without bearing full responsibility for her choices or actions. In respect of the different spheres of her life a child requires experience, and transitional paternalism can facilitate that while limiting potential pitfalls and risks. Without transitional paternalism and gradual assimilation (with a safety net), children would be 'dumped' into new and unfamiliar spheres at particular thresholds, without guidance or support, expected to bear consequences of decisions but without the resources (of all kinds) to do so.

The process of transitional paternalism is most obviously a shift in whose 'say so' is effective in the parent-child relationship – that is, a gradual shift in powers that reflects not just a right to decide but also the development of abilities to participate in joint decision-making and to engage with guidance and advice.⁸ This shift occurs via the sharing of powers to choose and describes a change in authority. Spheres involve shared powers at all stages of life, which is why the model fits so well with a relational conception of autonomy. Importantly, as a person moves into, out of, or between spheres, the ways that powers are shared between individuals and between individuals and institutions also change. In many cases, the change in power-sharing is gradual – powers can be shared in several ways. However, there are other, important changes happening alongside changes in how powers are shared

⁸ This feature of transitional paternalism is perhaps most obvious due to the dominance of discussion about choice-making in debates about adolescent autonomy.

and transferred between parent and child. Transitional paternalism also has built into it a shift in who is responsible for those decisions, and who will bear the costs and benefits that follow from them, because responsibilities as well as powers are shared between adolescents and other parties. Importantly, transitional paternalism is not only a way of explaining how powers and responsibilities are shared, or a way of describing what gradual changes in authority and responsibility look like. During adolescence, transitional paternalism *is* the gradual movement into new spheres and is what makes a sphere-based gradualism possible.

5.2a Fostering agency using transitional paternalism

A young person's experience of, and participation in, decision-making is fundamental to her understanding of the adult world. Exposing young people to the kind of decisions that they will have to make as they enter new spheres, and the relationships and structures that they will have to negotiate in order to access real opportunities and pursue their projects and plans is essential to supporting agency development. Adults can promote children's agency in the long run, in part by providing them with experience of making decisions. Along these lines, LaFollette argues that 'lack of practice making decisions'⁹ undermines autonomy. He writes:

As toddlers become [...] adolescents, they become increasingly able to assume responsibility and to make decisions about their own lives. We must nourish these

⁹ LaFollette (1999), p.148.

abilities if children are to become responsible, autonomous adults. That requires that we treat them as if they were already partially autonomous. [...] we must find ways to accommodate children's volitional and experiential deficiencies while respecting and cultivating their burgeoning autonomy.¹⁰

LaFollette recognises that children are deficient in the capacities that enable an individual to be autonomous, and in the experience of using them. However, he also recognises that we ought to support the *development* of these attributes.

On LaFollette's account, we should let children participate in important matters and allow them to express their views, varying the degree of participation that adults have in children's decision-making throughout their development. Other parties ought to participate in children's decision-making only as part of the developmental course, the end of which is the young person's capacity for independent decision-making.

Children's interest in becoming agents in the long run also has a bearing on how opportunities for children and adolescents should be shaped by adults and by institutions, and how options are presented or framed at different stages of development. Parents simplify the lives of children, and gradually help them to become familiar with 'adult' life by making some decisions on their behalf. In time, children increasingly participate in spheres and in decisions that affect their lives when it is appropriate for them to do so.¹¹ During the process of familiarisation,

¹⁰ Ibid., p.138.

¹¹ This reflects a view that Brennan has put forward in recent work. Brennan & Epp (2015), p.238 write, 'Certainly it is in a child's interest to learn how to exercise autonomy through competent decision making. Respecting and guiding her actual decisions will help her to learn this ability. Parents must balance this interest with the child's other interests, some of which might be endangered if she is allowed to make her own decisions.'

participation becomes increasingly complex and demanding. The 'rolling back' of paternalism that is characteristic as children mature, reflects that children and adolescents become more able to (and duty-bound to) negotiate the complexity of adulthood, and participate in multiple spheres of activity. At some point, the child becomes an adult, and unless obviously incompetent, must act on her own account; no-one else is duty-bound to help, nor has the right to intervene without her consent. Adults step back, or are forced to step back, from interfering with, or from mediating, young people's interactions in respect of different spheres of their lives.

As I now illustrate, the sharing of powers and responsibilities in transitional paternalism allows for the kind of variation advocated by LaFollette because powers and responsibilities can be shared in different ways. Consider the following example that draws a simple but clear picture of how relationships (in this case, the parent-child relationship) allow for a range of different framing and sharing arrangements. Out shopping in the supermarket, my young child expresses a preference for Cocopops and I say no.¹² I still consider myself in a better position to make the decisions about breakfast cereals while she is still so young. She doesn't understand about healthy diet, the importance of a good breakfast, or the various actors that are working to sell her the product: the marketers and designers that package the cereal, the supermarkets that put it at eye-level for trolley bound children, or the manufacturers that are producing highly processed sugary foods for children. I might make some effort to explain in simple terms why the Cocopops are a bad choice,

¹² For a period of time, when she is very young, there is no question about what I feed my child for breakfast. I choose what is most suitable (though I am constrained by factors such as affordability and availability) and I give her that. There will be times when she expresses a dislike for the food in her bowl, and I may try something different, but I put that scenario to one side.

perhaps just 'no, because they are bad for you' or 'no, because these ones are better'. As she gets a bit older, I start to acknowledge her input into decisions about breakfast cereal; as a result, powers and responsibilities begin to be shared. But powers and responsibilities can be shared in more than one way and each arrangement serves to frame options in a different way. I could decide to restrict her option set by offering a choice between Weetabix or Shredded Wheat, and not offer Cocopops at all. She can have whatever she chooses. Her choice is effective between two options, while I choose to keep the Cocopops option (literally) off the table. This kind of arrangement may serve to demonstrate to her what kinds of appropriate options are available or expose her to new alternatives. I bear responsibility for ensuring she has a healthy diet, and I might use this as a way to encourage her to try something new, or to choose something that is good for her but that she dislikes. Alternatively, I could offer her a choice of any cereal she likes (in terms of what options the supermarket presents), even though I reserve the right to overrule some choices (such as Cocopops) if I see fit. If she chooses a healthier cereal, that's no problem, her choice is effective, and the cereal can go in the trolley, perhaps along with some discussion about why it is a good choice. But, if she were to choose Cocopops, I could use it as an opportunity to discuss my reasons that I'd rather not let her have sugary cereal, that it is unhealthy, and perhaps try to reason that the packet is covered in colourful cartoons to try and win her over. I can also listen to her reasons, that she likes the monkey on the front of the box, that her friends all eat Cocopops for breakfast, that she has been really good at eating her vegetables this week. Ultimately, I might still override her choice, but I can choose to respect it in

the end after hearing her reasons. That flexibility is not open on the first sharing of powers where she isn't given the option of Cocopops.

Even though the cereal example might seem trivial or over-simplified, this sharing model is helpful for describing what is going on as children mature. As children mature the way that powers are shared between them and others changes in respect of different spheres of their life. In particular, this sharing model captures changes in dependence and independence (and duties that others have to support young people to become independent in the long-run), and it can work on a multi-sphere basis to encompass the variable transitions in respect of different spheres of a young person's life. Consider, for example, a trip to the doctor's surgery. When my daughter is young, I tell the doctor what is wrong on her behalf, but over time encourage her to speak for herself, or perhaps the doctor takes the lead and talks directly to her. Of course, I may need to interject if she leaves something out, or cannot provide a piece of information, perhaps that there is a family history of heart disease. In the end, when she is confident that she is able, I must let her go into the surgery on her own (or I may need to give her a nudge to 'go it alone' whether or not she wants to) and she must take responsibility for making sure she gives all the details and answers all the questions correctly. Transitional paternalism is therefore (in large part) the idea that parents or an institution might deliberately constrain the available options and/or attach particular consequences or terms to them. In practice, this model also helps to make sense of gradually acquiring individual rights and responsibilities over time.

As illustrated by the breakfast cereal example, the way activities and options are framed changes as children mature. Another way to think of this is in terms of

offering restricted access to particular spheres of activity. Parents mediate this access and continue to take responsibility for both the way children approach areas of decision-making, and parents take responsibility (or are held responsible, or at least bear many consequences) for the decisions their children make. In time, unrestricted access is afforded children and adolescents in respect of particular areas of decision-making. In some cases, parents (or other parties) retain power, often by virtue of legislation, to override young people's choices, but not always – particularly in informal contexts and when the choices children and adolescents are making for themselves are within spheres from which their parents are excluded.

Adolescents have increased *desire* to make their own decisions, whether or not adults offer them the opportunity to do so. Furthermore, as peers become increasingly important and influential, there are new 'social costs' associated with parental involvement. An example that illustrates changes in the jurisdiction of adults in the lives of young people is parental involvement in children's activities and in a child's social life. Initially, children's social relationships are facilitated almost entirely by parents, or other adults such as childcare providers, play workers etc. Children begin to choose who they socialise with at school and playgroup, though this will obviously be restricted by the particular provision and considerations of welfare and need: doors will be locked to stop children leaving the centre, toys will be provided that are age appropriate, 'educational' and safe, and outdoor spaces will be designed with safety in mind. In general, younger children's play may be restricted when at home. Perhaps the garden is considered a safer place to play, or the playground, accompanied by a parent. But as they grow up more freedom to choose when to play (maybe after homework is completed, or only while dinner is being

cooked), where to play unaccompanied (maybe at a neighbour's house, or in the street, but not at the park which a 10-minute walk away), and what to play (there may be rules about not playing with matches or staying off the road, or guidance about being careful with balls and sticks). This type of restriction seems appropriate for my 10-year-old, but when he is 16 he will more likely *tell* me when he is going out, whether I like it or not, and (I would hope) will also tell me where he is going and what he is doing. At that point, the hope might be that the earlier restrictions, rules and guidance have developed in him a sense of awareness, and familiarised him with expectations, risks and consequences so that he is better equipped to make these decisions. As in the Zoe example, parents may have concerns about which groups their child associates and what activities they are undertaking. Furthermore, this may be a matter that bears some degree of parental responsibility and that may be hard to negotiate.

At this point it is important to reiterate that there are different ways that parents can relate to their children that might be more, or less, restrictive or controlling. Too much involvement or influence may be unjustifiably paternalistic and may constitute overly-strict or authoritarian parenting. In the example just described, I might, by virtue of the financial or practical dependency my 16-year-old son has upon me, act in such a way so as to restrict his social activities if I have concerns about who he is seeing or what he is doing. I might refuse to take him out, loan him money, or use coercion to ensure he does not go out without my authorisation. This is an extreme example, but it illustrates how the relationship of dependency between maturing child and parent can admit unjustifiably restrictive behaviour on the part of parents. Whether parental involvement is unjustifiably

paternalistic depends in part on the child's success in navigating the particular sphere and on how safe or hospitable that sphere is for the child (and parent), which will depend, among other things, on factors such as a person's socio-economic status, race, ethnicity or gender.¹³

5.2c Adolescents as 'learner drivers'

As I have described in previous chapters, the relationships that young people have with others, and with institutions, change as they mature, and so do their freedoms and responsibilities. Importantly, powers to choose (and formal liberty rights) are framed or restricted in different ways in different contexts, as a consequence of relationships between individuals and institutions. One way to illustrate how powers and responsibility are shared during adolescence is to think about the adolescent as being a learner driver.¹⁴ Young people have a degree of real control over their lives. But just like the dual controls in the driving instructor's car, the power to make decisions is shared between young people and others.¹⁵ If this learner driver analogy holds, there are several parallels worth exploring.

First, just as driving lessons make us aware of the expectations of driving (the legal rules and regulations, the responsibilities of being in control of a vehicle, the

¹³ I take up discussion of these factors in chapter seven.

¹⁴ I have used this analogy elsewhere. See Tucker (2016). As an aside, 'driving' is not a sphere in its own right. Rather, driving is a skill that may be required for participation in spheres on her own terms depending on the social circumstances of the adolescent. For example, an adolescent living in a rural area may need to be able to drive to be able to travel to work independently (without relying on parents) and to have a social life that she is able access on her own terms.

¹⁵ Zimring has used a similar analogy in his treatment of adolescence, describing it as a 'learner's permit' period of life. See chapter seven in Zimring (2014), pp.63-70.

conventions of interactions with other drivers) so the process of transitional paternalism acts to make adolescents aware of the expectations of adulthood. Second, driving with dual controls enables learner drivers to have a degree of real control over the car. However, as they are *learning* to drive, they are vulnerable because they lack knowledge, confidence, experience, and skills. The instructor is there to take control when the learner makes mistakes or is unable to negotiate difficult situations. Likewise, the sharing of powers and responsibilities in transitional paternalism provides this kind of safety net for parents or others to step in when things go wrong in the life of a maturing child. Finally, learning to drive is a process, and a fundamental element of the process is *having a go* at driving. There are good reasons to let learner drivers have a go at taking the wheel, even if this means making mistakes, and ultimately that someone else might have to take over the controls if things do go wrong. Having the authority to make decisions for oneself, and taking responsibility for those decisions, sometimes means making mistakes and dealing with the consequences. In the context of transitional paternalism on the sphere-model, it might take time and practice to become familiar with, and develop the skills to manage, the affiliations and all the related expectations, opportunities, restrictions, and consequences as adolescents become more 'independent'.

When we include adolescents in decisions, we consider their current values and reasons and enable them to mature in ways that will allow them to make decisions on their own, and we give them invaluable experience of making decisions in practice, including exposure to the kinds of relationships, restrictions, responsibilities, consequences and opportunities that structure any particular area of decision-making. By recognising the adolescent as a deliberator, we acknowledge her

capacity for autonomous agency and provide the space to develop the skills, capacities, and experience required for agency. Sharing powers and responsibilities gives young people a chance to try out their choices and offers a space for reflection and a chance to discuss reasons for making particular decisions. It can provide a teaching and listening space and, as parents step back, and options become less restricted, the sharing of responsibilities also provides an added safety net if things go wrong, as I discuss in more depth in section 5.3a. Sharing powers and responsibilities provides a space to gradually learn about *using* rights and *having* responsibilities and experience of dealing with social and material consequences of actions. As Zimring writes:

The adolescent must be protected from the full burden of adult responsibilities, but pushed along by degrees toward the moral and legal accountability that we consider appropriate for adulthood.¹⁶

There is a worry that protection, of the sort offered by the dual control car analogy, compromises the autonomy of the person who is protected. This is because protection is often best served by stopping someone doing something that they would otherwise do. If my 16-year-old son wants to meet friends at the lake to swim and have a barbeque, but I know his friends have been involved in recreational drug use, I might well refuse to take him and ban him from going altogether for fear that drug taking near water could be especially dangerous. However, as Brennan and Epp

¹⁶ Ibid., p.67.

have argued, protection is not autonomy-compromising in all cases, and can be compatible with autonomy:

Recognizing that protection and autonomy are not strict opposites allows the claim that furthering a child's autonomy, while acknowledging her current competence to decide for herself, likely increases her ability to protect herself... increasing teen sexual agency will allow young people to feel in control of their choices and improve their ability to say no and protect their own rights.¹⁷

Brennan and Epp suggest that finding ways to engage young people to talk about sex openly, and move the emphasis away from abstinence and towards understanding what is at stake in sexual relations – different possibilities for entering into them more (or less) safely and pleurably, while taking into account the social consequences of sexual relations – will help young people to feel in control of their choices when they do start having sex. To put this another way, adults who recognise young people as sexual beings, and respect their desire for increased authority over their sexual decisions are better placed to foster openness about sex, support 'safe' sexual decision-making, and therefore help young people protect themselves. The alternative is that adolescents are left alone, without adequate support or guidance, and may make mistakes that last a lifetime. There is currently a pervasive and dangerous sexual double standard that affects all adolescents, but perhaps most particularly girls, and given the prevalence of internet sharing and social media young people need help to decide which voices to listen to. In this example,

¹⁷ Brennan & Epp (2015), p.242.

understanding the way young people move through the protected space of adolescence into a new sphere, and giving due weight to what is at stake for them during this time and the kinds of duties that are owed them by others, offers a way of explaining – and even dealing with – some of the relational challenges that adults and adolescents face.

Of course, we have not yet answered the question of when to allow children to participate in new spheres. Another way to frame this question is in terms of thresholds for choice or liberty rights. A focus on the threshold at which one can exercise certain rights or powers fails to acknowledge or give due recognition to, the need for a child to develop the competences needed for participation and the exercise of particular rights or powers. To ask at what age children should be left alone to make a decision for themselves is to ask the wrong question because of its focus on the point at which an adolescent acquires the new right, rather than on the developing capacities to do so. As Zimring writes:

To ask how old is old enough to date or drive is, in this view, to ask the wrong questions. Instead we must ask how old is old enough to learn to drive; to start a process, such as dating, that ends at competence if we're lucky; to invest, taking transitional risks, hoping that the result will be the right kind of adult.¹⁸

Ultimately, at the core of the learner driver analogy is the thought that adolescence is a process. Since adolescence (and maturation in general) is a process, any threshold is a marker for admission into the process and not a marker of

¹⁸ Zimring (2014), p.65.

accomplishment. A person, on reaching a particular point of admission into an area of decision-making will not yet be practiced at making that decision, or familiar with the decision-making context. Being allowed the right experience is key to the process of becoming an agent, and fundamental to developing relevant competences. The important point to make about transitional paternalism is that it provides a 'safe' period when decision-making can be made (in a variety of different sharing relationships with others) without developed competence and without the risk of full responsibility for the consequences of those decisions. Through this mechanism, children become familiar with decision-making contexts and processes and learn about options, how they are presented or accessed, as well as potential consequences, problem-solving and ultimately taking responsibility.

5.3 Parental involvement and changing roles

Parents can exert different degrees of, and kinds of, control over their children's lives and, as such, there is a question about the degree and kind of influence that is defensible. This chapter has established that paternalism, and indeed protection, might infringe on a person's autonomous agency. My arguments have indicated that, rather than being contrary to autonomy, paternalism (and protection) can be compatible with autonomy and, in some cases, even agency-enhancing. However, the lines we draw between care and protection, paternalism and authoritarianism, are not always clear. In particular, there is a worry that paternalistic intervention can cross over into restrictive or oppressive authoritarianism, and that the same action

may be judged both ways depending partly on different epistemic positions.¹⁹ As described, powers and responsibilities can be shared in various ways which ascribe more or less authority to either the parent or the child, but as yet I have not offered any means of deciding how powers and responsibilities should be shared as children mature so as to avoid overly restrictive versions of transitional paternalism.

So, what can parents do to avoid crossing over from justifiably paternalistic to restrictive or authoritarian? The simplest liberal response might be for parents to pursue the least restrictive alternative in situations where there is a conflict between autonomy and welfare. The least restrictive option is a concept used in law that captures the idea that any actions upon an individual's life should infringe on her liberty as little as possible and is used in questions relating to individuals who are considered to have reduced capacity in contexts such as juvenile justice and mental health practice.²⁰ However, if powers are only ever shared between parents and their children in the least restrictive way, it would seem that all powers lie with the child and no powers with the parent. This is to misunderstand how the least restrictive alternative should be pursued. The preferred course of action is the least restrictive that secures the needs of, and balances the important interests of, the individual and of wider society. In the context of the sphere-model this might mean allowing participation in activities or decisions that affect a child but only insofar as her wider needs, and the needs of others, are secured.

¹⁹ We saw an example of this in Zoe's case. Mum may have considered acting in what she thought to be a reasonable way in order to protect Zoe, but Zoe may well have thought the same act to be oppressive, intrusive or overbearing.

²⁰ See, for instance Department of Constitutional Affairs (2007) *Mental Capacity Act 2005: Code of Practice*. London: TSO.

For this kind of response to make any sense in real life cases, certain conditions have to be met. First, it would seem that the ‘goodness’ of participation turns on the *kinds* of experiences that are available to children. If children are being encouraged to enter new spheres (even gradually) the right kind of worthwhile and genuine options should be provided for them. Children who are burdened with too much too soon, for example those children with caring responsibilities, absent parents or chronic or acute illness, or children for whom no real options are present, such as those from low socio-economic backgrounds, are clearly not benefiting from participation. Second, given that this kind of approach is a gamble – risk is inherently tied to the process of participation in new areas of life – having a safety net in place is vital. This is why the sharing of various responsibilities between parent and child is necessary; in a broad sense, acting together or shared experience is both about safety and about educating. Finally, less restrictive forms of association between adults and children or adolescents may become more appropriate as children mature. In what follows I explore these in the context of the parent-child relationship.

5.3a Offering ‘real’ choices

We may not always want to limit adolescents’ options so as to preclude those choices that will be bad for them. Rather, we want to ensure that young people have worthwhile, and real, choices available to them and be prepared to approach mistakes with appropriate leniency and with constructive responses. ‘Real’ choices

are opportunities that do not entail burdensome sacrifices, and that have achievable ends in the sense that they are not merely formal freedoms to act in certain ways. This does not mean that young people should only be encouraged to pursue those goals that they can *certainly* achieve, and in fact part of adolescence is to have a go at things even when they are not necessarily achievable as this is how we learn about ourselves our values, goals and limitations.²¹ Rather, the kind of choices that are disadvantageous are the kinds of ‘choices’ that are presented as genuine options for young people, even though they may not be options for them at all.

On the one hand, there may be bogus choices – those choices that are not choices at all, that only *look like* choices, when in fact you have no choice in the matter. These choices are of the form: ‘would you like apple or a biscuit?’ ‘Apple please.’ ‘Great. Here is an apple,’ (when really there are no biscuits – there was only ever apples). In this case it feels as if the choice to have an apple was real, but it was not a ‘real’ choice at all because had that person chosen biscuits they would have been given an apple anyway.²² An example of this that we all face in early adolescence is the trip to the career advisor. There are potentially very many careers on offer, or even an infinite number of options with the tagline, ‘you can do anything you want to do’. Clearly, the range of supposed options in this choice is misleading, and ultimately the path that the adolescent can pursue is limited by her skills,

²¹ Consider, for example, running a marathon. It may well not be possible for my teenage daughter to run a marathon, even though she is determined to do so. It would, however, not be right, and could be potentially damaging to her self-esteem, and to our relationship, to tell her she will not succeed. Rather I might permit her to give it her best shot, even though she may not have the dedication to stick out the training, let alone the skill or fitness required to run 26 miles.

²² In chapter six I examine the objection that, on transitional paternalism, some choices appear to be bogus. I argue that, though the way some important decisions are framed appears to leave adolescents open to bogus choices, there are good reasons to frame some decisions in this way and that this framing does not always lead to the choice being ‘bogus’.

qualifications, family's resources and other kinds of non-financial support, confidence, tenacity, opportunities etc.

On the other hand, there may be choices that can only be made by some people if they are willing to make sacrifices that are unnecessarily burdensome. An example of this, explored in chapter seven, is the 'choice' to adopt a healthy lifestyle. Many barriers stand between people and the fulfilment of their desire to eat healthily or be more active, some of which are only overcome by making sacrifices in other areas of life. Unlike the careers advisor example, in this case it seems as if health is an option that is available to everyone; you may have to live in Boracay if you want to teach scuba diving or study tropical fish but being healthy does not appear to be constrained by these kinds of conditions. However, this is a misconception. For certain individuals, making 'healthy choices' is as unachievable as becoming a scuba diving instructor in Boracay is for others, at least unless they make choices that are difficult, worrying, or mean making sacrifices elsewhere. Perhaps the decision to travel to a supermarket where there is a wide selection of affordable fruit and vegetables means taking two buses and the cost of the ticket, the time this requires (perhaps after a shift at work and collecting the children from school), waiting for buses in the rain with children, and carrying shopping home alone, makes it so difficult to do that it is just not worth doing. That parents and organisations ought to offer 'real' choices to young people and enable them to be able to take up worthwhile opportunities, entails structural demands at the level of the state and community in order to support young people and adults in their roles as parents and teachers, a theme I explore further in chapter seven.

5.3b Balancing duties and sharing responsibilities

Many spheres of an adolescent's life are defined by relationships to adults or institutions that mean that she is dependent, or semi-dependent, in ways that adults are not. Adults (and institutions) who stand in certain relationships to adolescents owe duties to them that they do not owe adults. Among other duties (including basic duties to house and clothe and feed), some adults have a duty to enable young people to become independent in the long run, and that is the end goal of their particular role relations in respect of the various spheres of activity in an adolescent's life. Parents, and perhaps teachers, stand in these sorts of role-relations to young people. Transitional paternalism supports a child's agency by giving young people some control to varying degrees, providing a 'way in' to the network of associations that make real their formal rights, and by pushing them along incrementally towards taking responsibility for their own lives. Much of the 'guiding' that adults do in respect of young people is future-focussed.²³ Consider for example the guidance that young people receive about their education or career-paths, or their sexual behaviour. These aspects of young people's lives are valuable to them *now*, not just to the adults that they will become. Importantly, there is a sense that

²³ Questions about how we decide which adult roles young people are being prepared for, and what methods of guidance that we adopt, must be asked. At the heart of this is a worry about agency. Young people are reaching a time in their lives when they are forming clearer ideas about their values, and as such we should take steps to listen to what matters to them. When we are thinking about the kinds of lives we want our young people to lead, and the adult roles they might take on, we must help them achieve this with a sensitivity to what matters to them as they mature and support them in ways that respect their developing agency, avoiding interference that is unjustifiably paternalistic or disrespectful.

the guidance they receive ought to provide some kind of protection, and this is where a tricky balancing act is necessary; how to both protect and enable independence?

Some adults, such as parents, may have been balancing these duties since the child was very young. What is distinctive about adolescence is that there is a more concrete sense of 'the person' than in early childhood. She might start to form a commitment to a sense of who she is, a sense of her own values, goals, projects and preferences, and move away from previously central reliance on parents or carers and towards more independent negotiation of spheres of activity. This means that the way that duties towards young people are balanced, as well as the type of duties that are owed, must change as a child becomes an adolescent and as she nears adulthood. As we saw in the case of Zoe, the balancing of autonomy against welfare is burdensome and fraught with difficulties. Parents must promote their child's long-term autonomy interests but, 'must balance this interest with the child's other interests, some of which might be endangered if she is allowed to make her own decisions.'²⁴ Every child is different; she will develop differently, and have different life circumstances. Brennan seems (perhaps, unrealistically) optimistic that parents can make effective choices for their children. She describes how:

Parents can enjoy a more individualized and nuanced approach, such as allowing a child to choose wine with family meals at one age, and then supervised consumption of alcohol with friends at another, adjusting the rules to fit the child and the circumstances.²⁵

²⁴ Brennan & Epp (2015), p.238.

²⁵ Brennan (2002), pp.61-2.

But is it always possible for parents to 'enjoy' this approach? As the Zoe case illustrated, this kind of approach requires a particular role relation between parent and child and relies on particular epistemic conditions being fulfilled.

The Zoe example also showed that parents are sometimes considered culpable for their children's mistakes to some degree, and culpable or no, they often have to pick up the pieces when things go wrong. This puts parents in a special position of sharing a degree of responsibility for their child's decisions and mistakes. As a child develops, the parental duty to protect their child from harm must be balanced against the child's developing capacity to make her own decisions. Given what has been said about autonomy and paternalism, the conflict between these obligations is obvious. In some cases, there is a conflict between what is owed, or believed to be owed, to children, and the freedoms they have, or are believed to have. The added dimension in adolescence is that parents may have an instinctive desire to continue to discharge duties that may be perceived as smothering by their adolescent child, or the adolescent may act as if they have rights that they cannot yet responsibly manage. We might say then that the 'job' of the parent is to nurture and foster their child's independence, and there are better or worse ways to do this.

In the family there are no universal, clear and precise rules as to when shifts in a child's moral status should occur. Rules and judgments may vary between families, depending on the circumstances, preferences, and fears of the parents. This adds to the complexity of capturing the adolescent transition because relationships are so important to the quality of the transition. It apparently falls to the parent (and the child) to decide (or negotiate) the point at which they should have control over

aspects of their lives or be expected to take responsibility for making their own plans and the consequences of their actions.

Take for example property ownership. Parents allow children to 'own' property by way of several stages of 'proxy' ownership. Property rights provide a nice illustration insofar as they involve a cluster of different rights, powers and responsibilities, and in the case of children the adolescents there is a kind of 'staged' acquisition. The bundle of rights and responsibilities that come with owning property are not all acquired at once, and any rights and responsibilities that a child does acquire certainly do not apply to all property equally. The right to transfer, or dispose might be held by the parent, but the right to object to a peer's use is held by the child. Consider that I give my 4-year-old son a pencil case to take to school. His 'owning' of the pencil case comes with certain conditions: that he looks after it, and not damage it or give it away to one of his friends (which he could do if it were his own); he cannot treat it as if it is his own in all respects. In fact, he cannot give it away or damage it on the same terms as in 'proper' or 'full' ownership, because if he does I would have to replace it; it would be my responsibility to sort out these particular problems. The firm and restrictive stance that I take on his behaviour is justified for two reasons. First, it serves to teach him about owning property, what it would be like to have something of one's own to look after. For instance, he will learn about lending and borrowing if he allows his friend to use it in class but not take it home. Second, it protects him from the responsibilities that come with making mistakes. If the pencil case is dropped in a puddle or lost in the playground, he is not expected to replace it. However, over time children come to learn about taking responsibility for their property and may well make mistakes that parents are

no longer prepared to take responsibility for sorting out. The point I want to get across is that there are cases when transitional paternalistic action, partial parental control or authority can actually enable a child to be more responsible and independent in the long run.

That adults should let adolescents have a go at sorting out the consequences of their decisions when things go wrong, and only step in when really necessary, is an important part of what a 'least restrictive' alternative ought to be. A least restrictive alternative is one that takes into account factors like risk and the seriousness (and irreversibility) of consequences. I do not want my son to take his best hat to school, but despite my giving him a choice between other hats and reminding him that if he takes the best hat and loses it he will be upset and will not be able to replace it, he really wants to take the best hat. This is a low risk scenario, and the worst possible consequences are of little importance in the grand scheme of things so, after some discussion about looking after the hat and the consequences of losing the hat, I allow my son to take his favourite hat to school. When the hat is lost he is, of course, very upset. I could step in and buy him a new hat, or leave him to face the consequences of losing the hat and refuse to step in. Or losing the hat could present an opportunity for him to learn about having and bearing responsibility. There are several ways that I could react to this scenario which I might adopt sequentially in order to push him towards the kind of accountability that we expect of adults. The roles that adults adopt in relation to children, as parents and teachers, mean that they are in a position to nurture, educate and discipline children.²⁶ Schapiro is clear that within

²⁶ Discipline is one way that parents can guide the choices of children. However, discipline should serve only to make children aware of their own responsibilities and the freedoms that come with bearing those responsibilities, not as a tool of subjection or authority. (Schapiro (1999), p.736).

these roles, 'we must strive as far as possible to make [children] aware of their natural authority and power over themselves and of its proper exercise.'²⁷ By allowing young people the space to make choices independently they are also able to learn about making mistakes, which is an important part about learning to take responsibility to yourself. In the case of the lost hat, encouraging my son to look for the hat himself before I come into school to search the lost-property box myself, or perhaps even by requiring him to save up his pocket money to pay a contribution towards replacing the hat, will make him aware of his responsibilities and help to teach him about being accountable for his decisions. In terms of the learner-driver analogy, there are arenas that are much less dangerous or risky than driving, so the 'dual' driver, in line with the metaphor, can step out of the car at an earlier stage. The low risk 'hat' scenario provides such an example.

5.3c Respecting adolescents as agents

In this section I look more closely at changes in the roles of parents and children as new spheres open up to adolescents, at how the parent-child relationship changes and what these changes mean for parental involvement in children's lives. As I have described so far, adolescence is a complex time when adolescents must respond to many changes. Adolescents must cope with the challenges of a partial independence (or at least living 'between two worlds'), risk negotiation, and taking on responsibilities. A desire to make their own choices is one way that young people

²⁷ Schapiro (1999), p.736.

assert their independence, experiment with different identities, and ‘try-on’ adulthood. Young people get to a time in their lives when they want to leave behind their childhood, taking on new roles and responsibilities, and increasingly asserting rights and powers. As adolescents become more capable, parents become more like a sounding board for deliberations and a safety net for the consequences of poor decisions, participating in adolescents’ decisions in a way that respects their agency, and sharing responsibility with adolescents when things go wrong.

I suggested earlier in this chapter that, in order to pursue the least restrictive alternative when children’s interests conflict, children should be offered worthwhile and genuine opportunities, and in this regard social context (including socio-economic factors) is obviously important. I also suggested that adults should be prepared to step in and provide a safety net for adolescents if things go wrong. I have dealt with this in preceding sections and given examples of how this might happen in the parent child relationship as part of a transitional paternalistic framework. In this section, I will be examining the third suggestion I made in respect of the least restrictive alternative, which was that less restrictive forms of association between parents and children may become more appropriate as children mature.

Parents care for their children, nurture them, help them to grow and become adults. In fact, these responsibilities are shared with the state insofar as the state can enforce some of a child’s rights when parents or caregivers fail children, in abuse cases for instance. These parental or care-giving obligations legitimate particular powers on the part of parents. Or to put this connection more forcefully, parents have particular powers to interfere in their child’s life only insofar as they are

discharging their care-giving duties.²⁸ The role of the parent could therefore be characterised first and foremost as a caregiver, but the aim of this care is to ensure that the child will eventually be able to care for herself. Furthermore, insofar as parents are bearing the burdens of raising a child, the eventual independence of the child and the return of the parents' own independence *from* their child, is a good to the parents. Parents have a difficult responsibility, and a particular role to play, because they have to allow their child access to some spheres from which they will be excluded while also protecting their child, or at the least being available to help sort things out when things go wrong. It seems that parents have an impossible job. As Ruddick writes, parents

...are praised for being *attentive, responsive, patient, devoted*, and generally *responsible*. Likewise they are blamed for being deficient in these respects, as most teenage or drug-abusing parents are supposed to be. Or alternatively, parents are blamed for 'smothering' their children with too much attention or being too patient, hence too permissive or indulgent of their children's misconduct.²⁹

It is easy to see how complex the terrain of adolescence is for parents. As one self-help book for parents of teens writes:

It's not hard to understand why some react by getting tough – why they lay down the law, punish any transgression, however minor, and keep their teens on a short leash. We can also understand why others would give up, why they'd throw up their hands,

²⁸ As Gareth Matthews writes: '...parental authority is not based solely on the accident of biological relation, but also on the testable claim that [the child's] parent is carrying out her responsibility to him.' Matthews, G.B. (1996) *The Philosophy of Childhood*. Cambridge, Mass.: Harvard University Press; p.79.

²⁹ In Ruddick (1999), p.243.

look the other way, and hope for the best. Yet both of these approaches – “Do as I say” or “Do what you want” – cut off the possibility of communication.³⁰

Previously, I have argued that relational changes, manifest in changes in communication between parents and their children, lead to epistemic barriers that make it more difficult for parents to interfere (even constructively) in their children’s lives. There is an asymmetry in the knowledge that young children have of their parents and that parents have of their children. When children are very young, parents are aware of almost everything in their child’s life, even if they do not fully understand everything about their child. Children understand some things about their parents, but parents are likely to shield their children from much knowledge of the ‘adult world’ and of their ‘adult selves’. As the Zoe case illustrated, as children grow into adolescents, there is a change in how much parents *can* know about their children, and in the kinds of things that parents will let their children know about them. Alongside these changes are changes in the trust that exists between adolescents and their parents, and perhaps in the confidence that adolescence place in their parents’ abilities. Parents may increasingly be seen as fallible or incompetent, and adolescents increasingly perceived as distant. Despite changes in the relations between children and their parents, and unavoidable limits to parental authority as children mature, parents continue to have specific duties to care for their children. These may become more difficult, or even impossible, to discharge as children cultivate spheres of activity that not available to parents and become more ‘distant’ during adolescence.

³⁰ Faber & Mazlish (2006), pp.xvi-xvii.

So, what alternatives are there for parents? Even when parents are unable to control or protect their children by limiting their freedom, they can still be there to help their child pick up the pieces when things go wrong or offer advice and share deliberations when invited. In this way the parental role adapts in response to the maturing child. In what follows I will emphasise the role of communication in developing a role for parents when they cannot or should not act paternalistically towards their adolescent. Considerations of communication overlap but are distinct from the epistemic considerations outlined above. Communication is one way, but not the only way, that each party gets to know about the other.

Changes during adolescence mean that communication between parents and their children can become more strained or even absent, and this makes it difficult for parents to fulfil their obligations to protect their children by influencing or interfering in their lives. Jennifer Nedelsky writes:

If we ask ourselves what actually enables people to be autonomous, the answer is not isolation, but relationships – with parents, teachers, friends, loved ones – that provide the support and guidance necessary for the development and experience of autonomy.³¹

Support and guidance is evidently key to the project of parenting, perhaps more so as children become more agent-like and parental *control* is no longer appropriate.

Should an adolescent require assistance or advice, adults can be on hand, able, and

³¹ Nedelsky, J. (1989) 'Reconceiving autonomy: Sources, thoughts and possibilities,' *Yale JL & Feminism*. Vol.1, pp.7-36.; p.12.

willing to offer the support and guidance that they need.³² As children mature into adolescents, the role that adults play changes, from controller and protector to consultant or advice-giver. Adults ensure that they are maximising respect for an adolescent's agency by allowing them the flexibility to adhere to their advice or not.³³ Conversely, when adults are overbearing or controlling when they assist adolescents, they become intrusive and this restricts and undermines their autonomy.³⁴ Furthermore, adults are in danger of unjustified paternalism if they attempt to dominate an adolescent's authority in a domain in which they no longer have authority themselves.³⁵

In cases when adolescents and their parents disagree about under whose jurisdiction a certain domain falls, for instance peer relationships, and where parents attempt to assert control, this may cause adolescents to put emotional and social distance between themselves and their parents; perhaps by closing down those channels of communication, and by putting an end to asking parents for advice. As a self-help book for troubled parents suggests:

³² This feature satisfies the conditions stipulated by Howard Cohen, who represents the 'deep liberal' in Schapiro's exposition of paternalism. According to Schapiro (2003), p. 581, Cohen (1980) argues, 'that children need (and perhaps have a right to demand) special assistance from adults in making their choices. But this assistance is something which must be *offered* to children, not *imposed* upon them. ... Just as adults routinely employ legal and financial advisors to help them make such decisions, so, Cohen argues, children from a very young age should have the opportunity to rely on the advice of agents to help them make decisions that they would be incapable of making well on their own.'

³³ Poulin et al. 'The Role of Parents in Young Adolescents' Competence with Peers: An observational study of advice giving and intrusiveness,' *Merrill-Palmer Quarterly*. Vol.58, no.4, pp.437-462.; p.438

³⁴ *Ibid.*, p.438

³⁵ *Ibid.*, p.440, describe that one form of intrusiveness that has been the focus of much research is psychological control. They write, 'psychological control has been extensively studied and associations with maladjustment across adolescence have repeatedly been found.'

Why would any young person be open with a parent who is punitive? Why would he seek guidance from a parent who is permissive? Yet our teenagers' well-being – sometimes their very safety – lies in having access to the thoughts and values of their parents. Teenagers need to be able to express their doubts, confide their fears, and explore options with a grown-up who will listen to them nonjudgmentally and help them make responsible choices.³⁶

Parents, to a large extent, can only provide advice and guidance in this capacity if they are aware of the kinds of dilemmas and choices that adolescents are facing. Since adolescents are becoming more independent, parents are less present and have less observational knowledge about their children and the lives they lead. As a result, parents become increasingly reliant on their adolescent as a source of information about their lives.³⁷ Adults, who have the right kind of knowledge about an adolescent, are in a position to respond sensitively to her needs and demands.³⁸ For those for whom communication has broken down completely, the relationship between parent and child will suffer in many ways, and the adolescent child may have to navigate new spheres without appropriate parental support.

One way to think about the role adults may fulfil is as a consultant. A consultant is a person who provides expert advice and support to another person

³⁶ Faber & Mazlish (2006), p.xvii.

³⁷ Stattin, H., & Kerr, M. (2000) 'Parental monitoring: A reinterpretation,' *Child development*. Vol.71, no.4, pp.1072-1085.; Kerr, M., & Stattin, H. (2000) 'What parents know, how they know it, and several forms of adolescent adjustment: further support for a reinterpretation of monitoring,' *Developmental psychology*. Vol.36, no.3, pp.366-380.

³⁸ As noted in previous chapters, during adolescence, adults become more reliant on adolescents themselves as a source of information about their lives, further complicating adult-adolescent relationships. There is much at stake for adults who 'get it wrong', as channels of communication can be readily shut down by young people.

who lacks particular skills or knowledge. In professional fields, consultants are paid to give their opinion, but have no authority to act on their client's behalf as such. A parent can be a consultant, without becoming intrusive, by attempting to understand their child's problems and supporting them to work through their problems and to come to a solution that they can implement without adult interference. The parent in this situation has less share of the powers in the parent-child relationship, but perhaps retains a greater, or at any rate significant share of some of the responsibilities. This kind of 'consultancy' from parents is likely to support autonomy and shows respect for adolescents as agents. Depending on the parent and child, and on the social context, it may even be the case that 'adolescents may be more willing to discuss issues with parents when parents respond in ways that preserve the adolescents' autonomy.'³⁹ It seems that preservation of some kind of co-operative action on the part of adolescents and the adults in their lives is a necessary condition for adults to be able to act in ways that protect and promote adolescent interests. That is to say, without channels of communication that allow parents some knowledge about the dilemmas and choices that their adolescents are facing in closed domains, adults have no opportunity to support them. In these cases, there is a danger that parental influence can only be negative, for example attempted prohibitions. Of course, some parents would not feel able or be willing to adapt in this way depending on the particular situation of the parent(s) and child. Communication is all important, and when this has broken down completely there may be little scope for relational adaptation.

³⁹ Poulin et al. (2012), p.454.

If my points above are correct, adolescents have an instrumental interest in maintaining communication with parents. Of course, this relies on parents being able and willing to adopt the consultative role; some parents will meet this standard, but not all. By including their adults in this way, adolescents are giving them ‘permission’ to be involved in their lives in ways that that might otherwise be impermissible. This may be a key change to the framework of relationships that adults have with adolescents. It is no longer a paternalistic framework as in childhood, but neither is it the same framework that we have for treating adults as adults. In the adolescent case, welfare is still an important consideration. Furthermore, we do not always want to hold adolescents accountable for their actions. Despite this, it is imperative that we let them assume increasing authority over their own lives. Responding to an adolescent’s disclosures in ways that supports their increased desire for independence and respects them as agents is one way that parents can negotiate this delicate balancing act.⁴⁰

In the following chapter I examine how transitional paternalism, the sharing of powers and responsibilities between parents, children, and others including institutions, can explain the role that legislation plays in sphere-based gradualism.

⁴⁰ See Mashe, J.G. (2010) ‘Explanation of normative declines in parents’ knowledge about their adolescent children,’ *Journal of Adolescence*, Vol. 3, no.2, pp.271–284.

In summary

This chapter has focussed on changes in relationships that occur during adolescence, in particular the changing relationship between parents and children. Transitional paternalism, characterised by the sharing of powers and responsibilities between individuals, facilitates the kind of participation and competence-building experience needed for adolescents to become familiar with new spheres of activity. Here I have described how transitional paternalism is incorporated into the sphere-model described in chapter three. Transitional paternalism is intrinsic to the process development on the sphere-model.

There are different ways that powers and responsibilities can be shared. Some sharing arrangements lead to more liberal parenting styles, others to more authoritarian ones. The transitional paternalism that I have described balances protection with the promotion of agency. As the learner driver analogy illustrates, the sharing of powers and responsibilities can provide both a safety net to mitigate risk or to share responsibility for mistakes when things go wrong, as well as a space for trial and error and education. The way that powers and responsibilities are shared, and relatedly the parental role, should respond to the adolescents' ability to negotiate spheres of activity for themselves. In the consultative role, that I have described, parents have a smaller share of the powers in the parent-child relationship but retain a significant share of responsibilities. I have argued that communication becomes an increasingly significant factor in the success of parent-child relationship when parents adopt a consultative role. This is because parents are

only able to offer their skills and knowledge in response to information their adolescents provide, which is shared on their adolescent's own terms.

Part 3: Applying sphere-based gradualism

The shape of the adolescent transition is now more clearly mapped in terms of spheres of activity and relational changes. We have a richer account that more accurately reflects the complexity of real-life adolescence and also a more adequate account of how adolescents should be treated within their interpersonal relationships.

Part three takes a more applied approach to examining the sphere-model. Chapter five looked closely at the personal relationships that adolescents have with their parents and peers and how changes in those relationships fit with changes in adolescents' status as they mature. Here, I am addressing issues that arise out of the impersonal relationships that adolescents have with institutions and organisations. The changes that occur in this regard are equally as impactful on the lives of adolescents as changes within their domestic and social spheres. Many of the spheres that open up during adolescence have legal or legislative dimensions and, where parents have previously mediated legislative impact on children's lives, it falls to adolescents to begin to negotiate their own interactions with the institutions and organisations that shape their lives. A person's ability to navigate this landscape is key to them being able to pursue their own plans and projects on their own terms as adults.

Chapter six examines how legislation and, in particular legal thresholds for entry into new spheres during adolescence, can be compatible with the sphere-model developed in part two. The analysis uses examples of existing UK legislation and develops a defence of the complex legal landscape that currently characterises

our own liberal society. I uncover options for gradualism variously based on: a multiplicity of thresholds within spheres that facilitate practice and experience; the sharing of powers and responsibilities between adolescents and parents to enable parental discretion; the sharing of powers and responsibilities between adolescents and institutions that exclude parents; discretion in the way laws can be implemented that allows for a degree of individuation; and finally, some examples of stimulatory experiences that support the development of the competences required for participation in spheres that have a single fixed point of entry. In this chapter I make a more detailed examination of the sharing of powers and responsibilities within the medical sphere, and of adolescent medical consent which is a decision-making area where an asymmetry between consent and refusal arises. Transitional paternalism does explanatory work to show why it makes sense to allow adolescents to make decisions that affect them, even if their decisions are ultimately over-ruled in some cases.

Chapter seven turns to the role of the state in supporting adolescent transitions. All children need to learn how to become adults and how to negotiate different spheres of life; the particular environments and families of some children give them much less support and open far fewer opportunities to them. There is a role for the state in equalising the life chances of children, and I examine how far this might be achieved through the education of skills and attitudes that are useful across a range of spheres of activity. I use examples of existing school- and community-based policies and interventions that aim to develop in young people the abilities they need to critically reflect on their social environment, make plans and implement them, and on attitudes such as self-esteem and self-efficacy. The examples that I use

aim to develop these skills and attitudes to help improve health outcomes for adolescents, but, since these competences are transferable and not sphere-specific, it is plausible that this support could have wider-reaching impact on the lives of adolescents.

Chapter 6: Legislation, the sphere-model and adolescent participation

The table below, though not entirely comprehensive, highlights the complexity of the change in status as children mature. Majority is staggered between spheres and also within the activities that take place in those spheres. Though this arrangement may appear messy, the sphere-model illuminates why it makes sense to have so many stages or ‘moments’ of majority. The aim of this chapter is to use the sphere-model to uncover the gradualism that exists at a legislative level and explore how far this gradualism is consistent with, or even utilises, transitional paternalism described in the previous chapter.

Table 1: Thresholds for participation (UK)

Sphere	Activity	Age	Comments
Civic	Voting	16	Can register to vote
		18	
	Sexual consent	16	
	Marriage	16	+ parental consent
		18	- parental consent
	Armed forces	16	+ parental consent
		18	- parental consent
	Leave home	16	+ parental consent
		18	- parental consent
	Smoking	16	
	Drinking	5	With an adult in the home

		14	Can enter a pub, but not drink alcohol
		16	With an adult, can drink beer, wine, or cider with a restaurant meal
		18	
	Firearms	15	+ adult (21 years or over) supervision
		18	Can purchase or hire firearm
	Driving	15yrs 9mths	Can apply for provisional licence (moped)
		16yrs 9mths	Can apply for provisional licence (car)
		16	Can drive moped
		17	Can drive + adult licence holder (21 years or over) in car
		17+passed test	Can drive car unaccompanied
Economic	Open bank account	7	Savings account
		11	Current account (+ parental consent)
		16	Current account (- parental consent)
		18	Credit card/bank loan
	Pay tax	Under 18	Pay tax if earning over £18,200 per annum
		18	
Employment	Part-time work	13	Light work only. Below this requires special licence
		14	Workplace restrictions (e.g. no working in factories or on building sites)

			Working hours restrictions: 2hrs weekdays and Sundays, 5hrs Saturdays (term-time), 5hrs weekdays and Saturdays, 2hrs Sundays (school holidays) Cannot work before 7am or after 7pm.
		15,16	As above, but can work up to 7hrs Saturdays or during school holidays
	Full-time work	16	Can only work 8hrs a day, up to 40hrs a week. Can only work overnight shifts in exceptional circumstances. Must also stay in education/training until 18
		18	Employment rights and rules apply
Judicial system	Age of criminal responsibility	10	12 in Scotland
	Court/trial	10-17	Youth court (and special sentences)
		18	
	Prison	10-17	Secure centres (not adult prison)
		18-25	Prison for 18-25-year-olds
		26	Adult prison
Jury service	18		
Education	Statutory state stream	12	Move to secondary school
		14	Option to choose some subjects + core statutory subjects
		16	Option to drop statutory subjects
		16	Can leave secondary school
	Required to be in education/training	18	(at least part-time)

	Higher education	18	Option to enrol
Medical	Consent to treatment	Under 16	+ Gillick competence (- parental consent) - Gillick competence (+ parental consent)
		16	16- or 17-year-old: refusal can be overruled if it may lead to their death or severe permanent injury
	Contraception	Under 16	+ Gillick competence (- parental consent) - Gillick competence (+ parental consent)
		16	

In this chapter, I consider how the setting of thresholds can be consistent with the individual variation that exists between all adolescents. There are good reasons to have multiple thresholds across spheres as opposed to one single age of majority because some competences required for participation are sphere-specific and are not 'transferable' across or between spheres. My analysis highlights that gradualism is present at the legislative level in several guises, even when thresholds are subject to licencing or ability testing. First, there are examples of graduated or constrained participation, for example alcohol consumption; second, in some cases thresholds rely upon shared powers and responsibilities with parents that allow for parental discretion, for example, opening a bank account; third, some thresholds have built in shared powers and responsibilities with organisations or institutions and this acts in a similar way to parental discretion, for example medical consent for 16- and 17-year-olds; fourth, some thresholds embodied in the law may allow for some discretion in how they are implemented, for example in juvenile justice; and finally, despite some thresholds being single point entry, such as the voting age, there are

sometimes simulations built into social practices that prepare young people for this kind of participation. I argue that the sphere-model and transitional paternalism can do explanatory work and illuminate how legislation can facilitate essential gradualism and safe participation during adolescence, as outlined in a more abstract way in the previous chapters. I make a more detailed exploration of this in relation to the medical sphere and adolescent medical decision-making.

6.1 Legislation, state interests and duties

In the previous chapter, I stated that both parents and children have an interest in children becoming autonomous. Becoming independent is a good for the child and therefore a goal of parenting. Furthermore, insofar as parents are bearing the burdens of raising a child and achieving the eventual independence *of* the child, the return of the parents' own independence *from* their child, is a good to the parents. The state also has an interest in developing children's agency (as well as a duty to support parents who bear the burden of raising children) as it is good for the state if their citizens are equipped and able to manage their lives. The state should therefore act in ways that support adolescents in becoming independent.

However, as described in the previous chapter in relation to the parent-child relationship, supporting agency through participation is not always consistent with protecting the other interests of the child or of wider society, and, in this case, of the state. Widening adolescent participation in decisions, or otherwise enabling autonomy during adolescence is 'a gambling enterprise' and 'the stakes are high', for

the adolescent and for society, perhaps most obviously when the ‘mistakes’ that adolescents make are criminal.¹ We can readily think of situations when an adolescent having the power (or necessity) to make decisions for herself might put her at unnecessary risk of harm. Consider the following example which, though perhaps unrealistic, is illustrative of the risk of inexperience. Imagine giving a teen with no prior experience your car keys and allowing her to get in the car and drive. We would consider this highly reckless as her inexperience and lack of knowledge pose a risk to both herself and others. Though the act of offering the keys offers her the chance to learn for herself the dangers of driving, the limits of her capacity, and the workings of the vehicle, the stakes are indeed high. At the very minimum she risks getting lost, or your car may be damaged; at worst she risks her own and others’ physical injury. This example is analogous to many real-life situations that adolescents find themselves in, for example those with caring responsibilities. Adolescents in such positions are having to navigate the adult world for both themselves and on behalf of the person for whom they are caring. Often adolescents in this position have only limited support and sometimes are managing their responsibilities almost entirely alone. In some cases, constrained participation is not possible without significant risk and so some discretion is necessary. In the parental model of transitional paternalism, sharing powers and responsibilities facilitates a period of practice, providing genuine experience with the safety net, akin to the supervised learner driver. How can legislation of thresholds for participation be compatible with this idea, particularly when some spheres exclude the possibility of

¹ Zimring (2014), p.64.

parents providing discretion? And, how might state legislation safeguard vulnerable or disadvantaged young people and promote adolescents' agency in general whilst minimising risk?

6.1a Setting thresholds and dealing with individual variation

When thresholds are standardised for individuals across the board they are insensitive to individual difference. Fixed points of entry into spheres may be necessary for legal and legislative practicability but may not adequately reflect the individual variation between adolescents, nor the different kinds of decisions that adolescents face within a particular sphere. Brennan argues that 'some legal rules may need to be applied on the basis of coarse lines even if the moral facts are more complex.'² Though this may be the case, given that adolescents mature at different rates, from one another, and within the different areas of their lives, there are challenges with where to set thresholds and how to justify them.

As the table above illustrates, age is used as a legislative marker for participation in various activities as new spheres open up during adolescence. Given that we are not born with the competences necessary to negotiate the many spheres of social life, there has to be some way of determining when the rights, powers and responsibilities of adulthood apply. There are some general correlations between age and competence and is used in legislation for practical reasons to demarcate when adolescent participation is appropriate. Setting any rigid, 'arbitrary age of

² Brennan (2002), p.61.

competence'³ is not necessarily synonymous with an age of majority, though competence is at the core of many discussions about setting an age of majority. Competence is used as a standard for participation in two ways. First, an adolescent's individual competence might be measured as in Gillick competence type cases in the medical sphere, activities such as driving, and passing exams or training to progress in the educational or employment spheres. Second, there are background assumptions about development, that by a certain age, most people's developmental trajectory will mean they are competent *enough*. This standard of competence (presented in terms of age) then becomes the default against which a legal designation of *incapacity* would switch to the individual evaluation as in the previous examples (Gillick competence, driving test, or examinations).

Individual competence testing is not always appropriate or practical. Through the example of Zoe in chapter four, which illustrated the complexity of adolescence, I have already argued that, on a rights-based individualistic framing of development, there are complex and difficult problems with judging agency in terms of decisional competence or capacity, particularly in adolescence. On this view, when children reach a certain capacity or competence threshold they acquire rights (which ought to be respected) and responsibilities, for example to support oneself. Using competence on its own as a marker for admission into the adult world is problematic because applying such test to everyone could prove burdensome, and it is unclear

³ See Farson, R. (1979) 'The Children's Rights Movement,' in Empey, L.T. (ed.) *The Future of Childhood and Juvenile Justice*. Charlottesville: University Press of Virginia; p.55. Proponent of the children's liberation movement, Richard Farson argued that children ought to be afforded 'full civil rights... at birth, perhaps even a few months earlier' and that an 'arbitrary age of competence' should not be set. For Farson, the self-determination of adolescents is a first step towards the recognition of all children as fully autonomous.; also, Farson (1974).

how the attainment of such a standard should relate to the opening up of decisions across the spheres of a child's life.

It would be a mistake to think that having competence in one area of decision entails competence in another. It is because it is a mistake that we should be sceptical about alternative arrangements where thresholds are simplified across spheres or areas of decision – the fact that a 13-year-old can seek contraception or an abortion should have no bearing on whether or not we hold her criminally responsible or allow her to vote. Acknowledging that competences are sometimes sphere-specific is important for explaining how apparent inconsistencies arise. In legal contexts adolescents may be judged to be both competent and *incompetent* in respects of different aspects of the law. The same 15-year-old might well be presumed competent (to a degree) under the law in terms of their criminal responsibility but remain incompetent to refuse life-saving medical treatment for themselves. Inconsistencies arise in other cases within different medical contexts. Consider, for example, the 16-year-old mother who is presumed competent to make some decisions about her *child's* life, but perhaps not about her own. In this case, parenthood entails a change in the status of the individual, but it is a mistake to take this status change as synonymous with, or an indicator of, an increase in competence or maturity in general (and, in fact, premature parenthood may be indicative of the contrary).⁴ It may be true to say that the competence required may be different in these various contexts, or that the interests at stake in each case vary. Jennifer Rosato argues that important lessons from developmental psychology have led to a

⁴ Rosato (2002), p.777.

greater understanding in the field of juvenile criminal responsibility, including the favouring of an individualised approach to judging juveniles under the law, at least in theory. Despite this, she makes the point that these lessons are not necessarily transferable to the context of medical decision-making. These are two very different contexts with different risks, and different balances of interest, even though they both might require some degree of decisional competence. Rosato argues that the competence in each case differs. She writes:

To achieve adjudicative competence [the competence of a juvenile to stand trial], the minor must understand the trial process and be able to participate in his defense with his attorney. In addition, he must know "not only that [he] has certain rights, but also what a right is." The explicit rights recognition is not a prerequisite to being able to consent to or refuse medical treatment. Rather, a careful assessment of the risks/benefits of treatment is necessary, whether the treatment involves treating an infection with antibiotics or cancer with chemotherapy.⁵

This nicely illustrates how the context of each area of decision within different spheres is so important to understanding how and when an adolescent is able to participate in decisions that affect her life. As participation in each new sphere is required, and each area of decision is opened up to a young person, so they must become familiar with the expectations, restrictions, and relationships that together define what options are available to them and how plans and projects can be pursued.

⁵ Rosato (2002), p.789, quoting Grisso, T. (2000) 'What We Know About Youth's Capacity as Trial Defendants,' in Grisso, T and Schwartz R.G. (eds.) *Youth on Trial*. Chicago: University of Chicago Press; p.143.

The debate about how adolescents ought to be treated by practitioners and the courts when it comes to decisions about their health and well-being is framed in terms of an adolescent's right to choose and responsibility for their actions, which, in turn, are often seen in terms of competence. In many theoretical discussions about autonomy under the law, standard of competence is taken to be a good enough 'decider' for entry into, or exit out of, many spheres. For example, 'Gillick competence' in medical decision-making for minors and competence to consent throughout the medical sphere, competency to stand trial or give evidence in the judicial system, 'competency frameworks' in certain areas of employment, for example in the civil service, and testing of academic competence on leaving the educational sphere. However, assessments of competence to delineate admission into a sphere are often made alongside discretionary judgments on the part of parents, practitioners, or courts.

Zimring argues that, when considering adolescents under the law, better standards can be reached by using competence in conjunction with both age and discretion, than relying on competence alone. He uses examples to illustrate how this combination of tools is already used to allow adolescents into certain decision-making contexts.⁶ Consider driving. In the UK a 17-year-old can apply for a provisional licence and drive on many public roads as long as they are accompanied by a licence-holder aged 21 or older and display learner plates. But, a 17-year-old cannot get a full licence until they have passed a driving (competency) test. He argues that, in this case, parental discretion is also an element in reality because

⁶ Zimring (2014), pp.88-91.

parents are likely to be paying for lessons and/or a car. Also, he uses the example of how media content is legislated through certification. In the UK we know that media certified 'U' are suitable for all and 'PG' indicates that parents may want to check whether they think their child should watch. In this case, the parent is responsible for judging their child's competence and the film's suitability. In Zimring's words, 'The people at the movie theatre won't stop him from seeing it, but perhaps I [as parent] should.'⁷ For Zimring, despite its limitations, competence testing under the law makes sense when extending a privilege poses a risk to the individual and others and in cases 'when a special privilege is requested – for example, entering practice as a doctor, lawyer, or accountant.'⁸ Discretion, particularly parental discretion, on the other hand, should form an important part of regulatory systems unless there is a good reason to exclude it.⁹

Zimring also argues that:

Age-grading within adolescence is particularly appropriate when the capacity to test competence is weak and the consequences of mistakes threaten the individual or others in the community with substantial harm. In such cases, minimum ages may also be necessary to insure that kids grow up a bit before they risk making the *wrong* kind of mistakes.¹⁰

This is an interesting point, consistent with what I have argued about participation. I have focussed on examples of sphere-specific competences that require practice

⁷ Ibid., p.90.

⁸ Ibid.

⁹ Ibid.

¹⁰ Ibid., p.91.

within the relevant spheres.¹¹ These skills or attributes are not acquired magically upon reaching an age of majority. In fact, the irony of relying on sphere-specific competences as standards for participation is that, if one is restricted from participating in decisions until that age of majority (when competence is presumed) then one is excluded from opportunities to practice and develop competence. Participation *prior* to 'majority' is essential to develop the competence that majority assumes in individuals. So, a period of practice, when competence can be developed and is *not* assumed is the only appropriate approach. As in the parental model described in chapter five, this approach can involve inherent risks and so a safety net might be appropriate to protect children from either making the worst mistakes or protecting them from the worst consequences of their actions.

In what follows I explore how gradualism and transitional paternalism are, and can be, incorporated into legislation, using existing examples. The sphere-based frameworks I have developed illuminate how legislation allows some young people to participate in new spheres, or even make decisions about their lives for themselves, and also offers scope to exclude others. Transitional paternalism offers us a way of both justifying gradualism and a way of articulating how gradualism (and safety nets) are built into legislation.

¹¹ An open question is whether each sphere *needs* a preparatory or transitional phase involving practice. A central point to consider is whether the competences required for one sphere overlap with another sphere, or whether certain competences are transferable to other spheres. I take up this question in part in chapter seven, and suggest that, there are opportunities for interventions to capitalise on promoting 'transferable' competences, where they exist, in order to support adolescent development.

6.2 Legislating for gradualism and transitional paternalism

Throughout this thesis I have argued that participation and practice facilitate certain kinds of competence, including many that are central to leading an independent adult life. However, as I have also argued, being encouraged to participate when appropriate does not mean that adolescents should bear full responsibility for making decisions, nor be fully accountable for the consequences of those decisions. As we have seen in chapter five, transitional paternalism in the parent-child relationship can facilitate participation in new spheres without leaving adolescents to bear the full weight of decision-making responsibility, or with the entire burden of taking responsibility for themselves and their actions, or the responsibilities of taking care of themselves unaided. This allows adolescents to develop and practise sphere-specific competences, knowledge and skills, without having to take on too much risk.

Transitional paternalism in formal contexts looks different to the informal family context. In the family context, transitional paternalism is about responding to each adolescent's maturation and the restrictions and facilitations of the particular parent-child relationship, an objective that is shared with other models that respond to the parent-child relationship and aim to articulate the relational dimension of autonomy development, for example LaFollette's model of circumscribed autonomy.¹² Samantha Brennan worries that although models sensitive to changes in relationships may work well for parents because parents are able to adopt a nuanced

¹² LaFollette (1999). Note that my own account does not rely on features of a child's cognitive or volitional ability as a measure of their autonomy. Rather, as agency manifest through social and relational interaction, the capacity to negotiate those affiliations is what is at stake in deliberations about autonomy.

perspective, they cannot be so successful for ‘freedoms that require state-protection’.¹³ In the family context, the boundaries into spheres appear to be fuzzy – the idea that we can enter them gradually is not unreasonable given that parents and children, and the kinds of relationships that they have, can adapt to various changes in family life, the abilities of the child, and quality of the relationship.

This kind of individual adaptation is seemingly less easy at the legislative level because the boundaries into spheres tend to be implemented in terms of thresholds – legal points of entry into new realms of decision-making, the adoption of new responsibilities, or the acquisition of new rights. However, just as legislation has evolved in response to what society recognises as being unique to the period of childhood,¹⁴ so it has evolved in response to what society recognises as being unique to the period of adolescence, and importantly, what society perceives as worth promoting. During adolescence, young people’s challenges and needs change and the spheres of activity that are open to them reflect this. The spheres in which children can operate are restricted by cultural norms, meaning that they are protected from the adult world. Legislation may clarify or demarcate spheres of activity and areas of decision, and we can characterise stages of development in terms of which spheres of activity and areas of decision are open or closed to a person, and in terms of how the various actors relate to and interact with adolescents. Legislation also determines who is allowed access to spheres and when, and what sort of activities they may undertake there. Young people are given

¹³ S. Brennan (2002), p.61.

¹⁴ See chapter one.

constrained access to certain spheres and so gradualism can be achieved, and is achieved, in several ways within this framework.

First, a degree of gradualism is achieved by having multiple thresholds for majority, both across spheres and within them, as is illustrated in table 1 in the introduction to this chapter. In legal terms, Zimring argues that ‘transforming the single passage from minor to adult into a series of specific adulthoods, achieved over a period of years, best approximates the social and psychological growing process.’¹⁵ In short, the complexity of adolescence must be reflected in the legal transition from child to adult. As I have argued, it makes sense to have multiple thresholds across the various spheres of activity because different spheres require different competences which may be achieved at different times. In some cases, there are also multiple thresholds within spheres, for example within the legislation around alcohol consumption. Children are permitted to drink alcohol in the home under adult supervision from age 5. At 14 they can enter a pub but are not allowed to drink alcohol on the premises. At 16 they can drink wine, beer or cider with a meal, if they are with an adult. At 18 they can buy themselves alcohol and drink it on licenced premises (at the discretion of the licensee – a person can be refused alcohol). Multiple thresholds of this kind within an area of activity can offer constrained participation which can familiarise children with the activity, expectations, rules and risks.

Second, the thresholds around alcohol consumption also represent examples of thresholds that rely on the sharing of powers and responsibilities between

¹⁵ Zimring (2014), p.71.

children and parents, carers or other adults. After children are 5 years old, parents (perhaps in conjunction with children or adolescents) can make decisions for themselves about what age a child can consume alcohol in their home and how much they can have. At age 16, an adolescent can go to a pub or restaurant with her parents and have a glass of wine with a meal, if she wishes to and her parents agree. Of course, her parents may not agree, and, in this instance, they have the final say about whether she can have a glass of wine or not. This kind of arrangement allows for some parental discretion and this helps to accommodate individual variation between adolescents, despite fixed thresholds. Another example of this is the age at which a child can have their own bank account. A child can have a savings account from age 7. However, a child must wait until they are 11 years old to have a current account from which she can withdraw funds as well as into which she can deposit them. Furthermore, she has to have parental consent to open a current account until she is 16 years old; the decision to open a bank account might be shared between parent and child, but it is ultimately up to her parents whether or not they consent. When she is 16 years old, she can decide for herself (And has the power to open an account) entirely independently of her parents.

As described in the previous chapter parents mediate their children's participation in new spheres and the sharing of powers and responsibilities between parents and children enables children some constrained participation with genuine experience of new activities within spheres but with a safety net. The arrangements in the examples above extend this model into activities that are subject to legal restriction and regulation. Parental discretion is therefore an important aspect of enabling legislation to accommodate individual variation, but it is not the only way.

Powers and responsibilities can also be shared between adolescents and institutions or organisations and may even be shared between adolescents, institutions *and* parents. An example of this is activities within the educational sphere where decisions about where to study, what to study, and how to study may well be made by adolescents in collaboration with parents (who perhaps adopt the role of consultant discussed in the previous chapter), and with current and prospective schools or colleges. In the background there are legal expectations that the child or adolescent must be schooled and that some subject must be studied (until a particular age). The various responsibilities of getting through school, studying and passing exams, as well as the social and emotional challenges that come with it, are also shared between the adolescent and other parties, parents (and perhaps, peers) and teachers or pastoral support. Conventions, rules, and legislation formalise the change in how much control children have over their education, the level of their participation in decisions about what they are taught and how they are taught. However, there is an interrelationship between parents, children and institutions that facilitates the shift in jurisdiction from parents to their children. In formal contexts, conventions, rules and legislation provide pathways for young people to become independent from their parents and enable direct relationships for adolescents with institutions.

Another version of a sharing arrangement, and the third way gradualism is present in existing legislation, *excludes* parents, and powers and responsibilities are shared between adolescents and institutions. Entering employment is an example of this. Adolescents over 13 can make decisions about when to start work, where to work, and for how long, but their options are limited. Legislation is in place to restrict

adolescents' working hours, their place of work, and the type of work they can undertake. As such adolescents' choices about when and how to work are shaped (or restricted) by a degree of power being retained by others. Employers are responsible for ensuring that when they employ adolescents they do so legally and safely, and even when adolescents want to work more than they should, or in jobs they should not be doing by law, it is the employer who is ultimately culpable, not the adolescent. Adolescents are gradually admitted into the world of (full-time, adult) work by changes in legislation as they get older.

Fourth, discretion (and therefore individualisation) is achieved through the way legislation is implemented, for example within the justice system. Juvenile justice presents a particular set of problems for judges who have to decide how young people ought to be treated under the law. A child can be criminally responsible in the sense that she is *capable* of committing a crime, or in the sense that it is *appropriate* to expose her to the criminal justice system. The distinct issues here are: first, whether a child can know the difference between right and wrong; and second, at what point should a child be exposed to criminal prosecution and punishment. Recent developments in English law have moved towards considering the point at which it is appropriate to punish a child under the law. In England and Wales, the age of criminal responsibility is 10 years old, meaning that children under the age of 10 cannot be arrested or charged with a criminal offence. Children between the ages of 10 and 17 can be arrested and taken to court if they commit a criminal offence but are not treated as adults under the law. Both English and Scottish legislation attempt to employ strategies that balance consideration for welfare against young people's evolving capacities and their increasing responsibility.

The system in place in England sets a lower limit – an age at which a child has the capacity to commit a crime – and an upper limit – the age at which a child should be treated as an adult under the law. In between these limits, the young person is thought to be (to various degrees) responsible for their actions but is considered too young to be exposed to the full weight of the adult justice system. This is when judges are expected to use their discretion to decide to what degree a child should be subject to the justice system, whether court proceedings are most appropriate, and what type of consequences a child should bear.

There may be better ways of dealing with young people who break the law than by criminalising them and prosecuting them in the criminal court. The Scottish Children’s Hearing System is an example of a welfare-oriented system designed to acknowledge a young person’s responsibility and to protect young people’s distinctive interests. Welfare-oriented systems can be employed to protect young people’s distinctive interests. This is in line with the UN Convention on the Rights of the Child.¹⁶ But, this is also consistent with children being responsible for their actions, in the sense that they are aware that they have done something wrong. In fact, the European Network of Ombudspersons for Children (ENOC) states that, ‘children should be held “responsible” for their actions in line with the concept of evolving capacities’.¹⁷ Importantly, ENOC’s position ties the concept of responsibility

¹⁶ Office of the United Nations High Commissioner for Human Rights (1989). The CRC proposes a distinct justice system for juvenile offenders (Article 40), and which takes the best interests of the child to be the primary consideration in all actions concerning them (Article 3).

¹⁷ European Network of Ombudspersons for Children (ENOC) (2003) ‘Statement on Juvenile Justice: Europe’s Children’s Champions challenge governments to respect young offender’s rights,’ *ENOC Secretariat*. URL: <http://enoc.eu/wp-content/uploads/2015/01/ENOC-2003-Statement-on-Juvenile-Justice-.pdf>.

to a person's 'evolving capacities' and presumes that responsibility is gradually acquired as a person's capacities evolve.

Finally, despite some thresholds being single point entry, such as the voting age, there are sometimes experiences or 'simulations' built into social practices that prepare young people for these particular kinds of participation. In these cases, relationships that children have with parents, peers, the wider community, and with institutions prepare young people by giving them experience of activities without actual participation in new spheres. In the case of voting, a more democratic approach to family life, perhaps school elections, and family discussions about what is on the news may all contribute to preparation for the time when an individual has the opportunity to vote in an election. There may be similar preparations for activities such as driving or managing money. When a child starts to receive pocket money from parents, for example, they begin to learn about the value of money, saving and spending. Play may also make a considerable contribution, for example when children play shop or with toy cars. At this point it is worth highlighting that not all competences required for activities or areas of decision are sphere-specific. The skills and attitudes needed for some activities are 'transferable' across spheres. These might include, for example, reflexive attitudes such as self-confidence, and skills such as critical thinking, communication skills and planning and organisational skills. Some competences of this type might be needed for participation in spheres that are single point entry. I take up the question of how these competences can be supported by state policy and intervention in chapter seven.

6.3 Using transitional paternalism in the medical sphere

Our discussion so far suggests that transitional paternalism structures and shapes the legal landscape as it applies to adolescents. In this final section the aim is to focus in a more detailed way upon a particular example. The example of constrained participation in decision-making that I explore in more depth in this chapter is adolescent medical consent. In this case, the transitional paternalistic framework allows us to understand the complex landscape of the medical sphere, and the relationship that adolescents have with institutions in this case. Transitional paternalism in the medical sphere, as part of the wider sphere-based sharing of powers and responsibilities, can make sense of the apparently odd asymmetry between adolescent consent and refusal.

6.3a Adolescents in the medical sphere

‘Medicine’ counts as a sphere in its own right. It is separated from other spheres by a set of protections and provisions, and individuals (and the institutions and organisations that give structure to the sphere) adopt roles within the sphere that have attached to them particular rights and responsibilities. In adolescence a degree of paternalism remains because, within this sphere, some decisions are weighty and have risks attached to them, and certain decisions can mean the difference between

life and death. Furthermore, the values of both care and autonomy are taken very seriously within medicine and are often in conflict. Within the sphere as a whole, there is an imbalance between the specialised knowledge of practitioners and service-users. Even in adulthood there is an ideal of shared decision-making because of this imbalance of knowledge and skills and because of the risk of harm.

For adolescents, the standard expectation is that parents will be involved in shared decision-making, although there are legal thresholds in place that allow adolescents to make decisions without parental involvement if they wish to. If parents are absent, the ideal of shared decision-making must be preserved between adolescents and practitioners. In these cases, the child is able to make an informed decision 'independently', without parental input, though hopefully with guidance and information from doctors and other practitioners. Parental consent is not *required* when a child or adolescent under 16 is considered Gillick competent.¹⁸

There may be good reasons to exclude parents, and parental discretion, for example, parental involvement might jeopardise the privacy of the adolescent or may distort her values in ways that are detrimental to her sense of self and well-being. In her work on adolescent autonomy and the law, Rosato begins to separate out the different kinds of decision that the same adolescent might face within the medical context. Rosatto draws on the work of Hartman and Zimring and argues that autonomy ought to be maximised, especially in those cases that involve a patient's core values. In cases, such as whether or not to set a broken ankle, a patient's core values are not called into question and therefore the maximisation of autonomy is

¹⁸ Minors are 'Gillick competent' when they are considered to have 'enough understanding and intelligence to appreciate fully what is involved in their treatment' NHS 'Children and Young People: consent to treatment.' URL: <https://www.nhs.uk/conditions/consent-to-treatment/children/>

not such a central concern. However, when an adolescent seeks an abortion her core values are certainly a central concern, and may not fall in line with her parents' values, beliefs or desires. Rosato argues that:

...failure to respect adolescents' burgeoning autonomy is likely to cause harm to their personhood, especially when the health care decision involves the exercise of moral judgment. If adolescents cannot make these decisions for themselves, they may be forced to live a life that they have not chosen and certain future opportunities may be foreclosed to them permanently.¹⁹

Rosato allows for exceptional cases when autonomy should not be maximised, when there is a demonstrable 'compelling interest to deny decision-making authority.'²⁰ She has in mind here the state's 'strong interest in preserving life'²¹ and the interest would only be compelling when a refusal of treatment would put the adolescent's life at risk or cause permanent harm. I explore this scenario in more detail in section 6.3b.

The underlying thread through Rosato's work is that there ought to be measures in place to maximise participation and respect for autonomy because a participatory model encourages moral development, and competence in decision-making. This has obvious parallels with some of the philosophical work that I have drawn upon in this thesis, not least because Rosato's emphasis on participation as a

¹⁹ Rosato (2002), p.790.

²⁰ Ibid., p.799.

²¹ Ibid., p.800.

means to developing competence in decision-making is akin to involving adolescents in decisions as a means of 'training' for taking on adult roles. Rosato's work shows that questions about adolescent decision-making cannot be answered by 'a one size fits all' model. Rather, what is needed is an approach that addresses each area of decision-making in its own right, acknowledging that participation in decision-making is not going to be uniform across the board. Consent to a routine procedure is different to the decision to access contraception, and that is different again to consent to life-changing procedures.

6.3b 'Granting liberty' and 'preserving life chances'

State legislation continues to protect the interests of adolescents by ensuring that they remain within the legal protection of their parents or carers, or that 'safety-net' provision is made by the state, whilst allowing them opportunities to participate in spheres that were restricted during childhood, such as part-time employment.²²

Zimring writes:

We want kids to participate in decisions about their education, but not at the price of sacrificing long term opportunities to avoid short term burdens. Work experience in younger years is a valuable preparation for later work, but unskilled labor should not be permitted to shut out educational experience that provides basic skills and the

²² It should be noted that there is a tension between keeping children as far removed from adult life as possible whilst simultaneously pulling them into it through exposure to violence and sexualisation in the media and an over-emphasis on individual responsibility from a young age.; Bakan, J. (2011) *Childhood Under Siege: How big business ruthlessly targets children*. London: The Bodley Head.

opportunity for later mobility. Part-time work at the local fast food emporium is valuable experience, but a lifetime behind the French-fry counter is too high a price to pay for teenage freedom of choice.²³

Part of the task of legislators then, is to ensure, that within the spheres of activity that are open to children and adolescents, the choices they are offered are constructive and that options available to them promote, and do not hinder, their development towards independent adulthood. As a society we have a duty to ensure that there are valuable and worthwhile options open to adolescents that enable them to pursue their explorations into ways of living, make choices that represent their values, and make mistakes in a safe (or, as far as possible, inconsequential) way. In response to the risks of allowing greater participation in decision-making during adolescence we should ‘...seek a legal policy that preserves the life chances for those who make serious mistakes, as well as preserving choices for their more fortunate (and more virtuous) contemporaries.’²⁴ To extend the learner driver analogy, there are safer and more effective ways to teach a young person to drive than just to hand her the keys and leave her to it. The child has obvious interests around her wellbeing, but the state also has an interest in preserving the life of the child, protecting her wellbeing and ensuring that she grows into a valuable citizen with a fulfilling life. The state also has an interest regarding wider society, in part because the adolescent’s ‘experiments’ during development may pose burdens and

²³ Zimring (2014), p.65.

²⁴ Zimring (2014), p.64.

risks for others in society as well.

Granting liberty and preserving life chances is a key feature of transitional paternalism within legislative contexts. As we have seen, experiencing decision-making and understanding decision-making contexts are crucial to an adolescent developing the capacity to participate in social and civic life on her own terms.

Rosato writes:

During adolescence, the minor has a number of important tasks. Among the most important are development of one's identity and the skills and values necessary to become a productive citizen in a democratic society. The role of parents and the state should be to encourage independent decision-making during adolescence to help ensure that the minor will grow into a capable adult.²⁵

With this sentiment in mind, Zimring argues that, under the law, adolescents ought to be allowed to practice making some decisions, taking risks, and 'choosing the path of [their] lives in a free society'²⁶ before adulthood. To put it another way, he views 'the grant of liberty as an investment in development.'²⁷ On this view, adolescent choices should be respected when appropriate, but in a way that also reserves the possibility to override or restrict choices if necessary.

Granting the liberty to participate to children and adolescents means that some discretion can be granted on the basis of relevant judgements. Such judgements can only be made when a person is given the chance to exhibit their

²⁵ Rosato (2002), p.791

²⁶ Zimring (2014), p.63.

²⁷ Zimring (2014), p.37.

abilities and values. You are unlikely to employ me without an interview designed to give you a chance to get to know me, my motivations and my strengths and weaknesses. When powers and responsibilities are shared between adolescents and institutions, legislation facilitates or denies involvement of individual adolescents in different spheres. This means there is room for the discretion that makes individualisation of standardised thresholds possible, offering participation when appropriate and restricting it when the adolescent should be protected from being able to choose to undertake risks.

As described, in the legislative context, entry into spheres may be on a minimum-age basis. Age thresholds should be set with the least restrictive alternative principle in mind, as discussed and qualified in chapter five. A child's or adolescent's participation in a sphere is constrained by the level of control she has over her decisions within that sphere. Using versions of transitional paternalism, her access to certain decisions within that sphere might be restricted or allowed. In some cases, allowing her to participate in risky or unfamiliar decision-making contexts will give an opportunity to weigh up her views and reasons against others' views and reasons and in some cases, on a practical level, develop competences, as in the now familiar driving example.

6.3c Medical decision-making: asymmetry in consent and refusal

As shown in the table in the introduction to this chapter, in England, minors under the age of sixteen, who are considered Gillick competent, are able to consent to

medical treatment; additional consent by a person with parental responsibility is not necessary. An adolescent, aged sixteen or seventeen, is presumed capable to consent to medical treatment and has the right to refuse to consent to treatment. This apparently offers adolescents a legal power. However, in cases where a young person *refuses* medical treatment, and where their refusal entails a significant risk of death or severe permanent injury, a court can overrule their decision. As such, adolescents acquire a right to *consent* to medical treatment but, in some cases, their right to *refuse* medical treatment is not respected. To some this asymmetry appears to be incoherent, although attempts have been made to show that the puzzling asymmetry is coherent and justified.²⁸ It is this arrangement that I am interested in here.

One way that the asymmetry might be justified is in terms of competence. It has been argued that an asymmetry between consent and refusal arises in some cases because in cases where a patient refuses life-saving treatment the risk to their welfare is much higher. The argument is that, in these cases, we ought to demand a higher level of patient competence than we do for less-risky decisions. This is called a risk-related standard of competence.²⁹ Rosato wants to encourage autonomy in adolescent decision-makers, aiming for a doctrine that intends 'to respect and nurture the burgeoning autonomy rights of minors at the brink of adulthood while protecting them from harm where it is necessary.'³⁰ For Rosato, decisions about

²⁸ The debate around asymmetries between consent and refusal in the medical context more broadly has been discussed by Wilks, I. (1999) 'Asymmetrical Competence,' *Bioethics*. Vol.13, no.2, pp.154-159.; Cale, G. S. (1999) 'Risk-Related Standards of Competence: Continuing the Debate over Risk-related Standards of Competence', *Bioethics*. Vol.13, no.2, pp.131-148.; DeMarco, J.P. (2002) 'Competence and Paternalism,' *Bioethics*. Vol.16, no.3, pp.231-245.

²⁹ See for example, Wilks (1999).

³⁰ Rosato (2002), p.771

involving adolescents in medical decision-making should be made on grounds of autonomy, not competence. Indeed, there are good reasons to reject competence as a standard in the case of adolescent medical decision making.³¹

First, certainly in the adolescent case, we are concerned with *decisional* competence. That is, the adolescent's capacity to understand and thoughtfully weigh up reasons for and against any given decision, and then make known their decision. However, in order for a patient to consent to a treatment, they ought to have a good understanding of the treatment risks and outcomes in *both* the instance of consenting to and of refusing the treatment. Therefore, those who argue for a risk-related sliding scale of competence fail to appreciate that the level of decisional competence required to either consent to or refuse a treatment is symmetrical.³² Second, even if we have good paternalistic reasons to safeguard others from their own decisions based on their competence to *perform* an action, it does not follow that we should be concerned about their competence to *decide* to perform that act. For instance, we may be concerned about a tightrope walker's competence to walk a tightrope without a safety net and consequently wish her not to walk the tightrope.³³ However, it does not follow that we should be concerned about her competence to *decide* to walk the tightrope without a net. If we are going to appeal to competence in cases of medical decision-making, we need reasons for assessing a patient's decisional competence independent from any risk-related assessment. Third, in

³¹ Manson outlines these reasons in Manson (2015).

³² Culver, C.M. & Gert, B. (1990) 'The Inadequacy of Incompetence,' *The Milbank Quarterly*. Vol.68, no.4, pp.619-643.

³³ This example is developed from Wilks' example. Wilks, I. (1997) 'The Debate over Risk-related Standards of Competence,' *Bioethics*, Vol. 11, no.5, pp.413-426.

some cases where a person's decisional competence is assessed in terms of the risk of possible outcomes, we are not talking about a person's competence, but their lack of relevant *information*.³⁴ Consider Ian Wilks' example of the inexperienced investor who, he suggests, is competent to make safe investments, but not competent to make those investments that are considered to be more risky.³⁵ In this case it is not the investor's lack of competence that is problematic; it is her lack of relevant information about the investment that makes the investment risky.³⁶ We often make decisions when we are unsure of the outcomes, but 'taking a gamble' does not mean that we are not competent to make these decisions. Competence may not do enough to explain why this kind of asymmetry is justified in the adolescent case. However, as I will argue, transitional paternalism can explain more convincingly why the asymmetry is justified as part of a wider sharing of powers and responsibilities that characterises adolescent socio-relational development.

Manson has also justified the sharing of powers during adolescence in the medical case as an example of transitional paternalism. However, for Manson the asymmetry between consent and refusal is justified because this arrangement maximises adolescents' autonomy in the moment of decision.³⁷ On my own account,

³⁴ As argued in Manson (2015)

³⁵ Wilks (1997), p.421.

³⁶ See Checkland, D. (2001) 'On risk and decisional capacity,' *The Journal of medicine and philosophy*. Vol.26, no.1, pp.35-59.

³⁷ Manson draws on Suzanne Uniacke's analysis of what respect for autonomy involves. Uniacke makes the distinction between compliance respect and consideration respect. According to Uniacke's distinction, 'compliance respect requires that one carry out ... [a] person's wishes, *qua* her wishes, irrespective of one's own evaluation of them.' Uniacke, S. (2013) 'Respect for autonomy in medical ethics' in Archard, D. et al. (eds.) *Reading Onora O'Neill*. London: Routledge, pp.94-110.; Consideration respect is a weaker form of respect that consists in giving a person's wishes 'serious consideration, in taking them into account in coming to one's own decision based on a balance of reasons.' Manson argues that the constrained normative, or asymmetric, version maximises respect for the adolescent's autonomy because, in cases where the adolescent consents to treatment, her choice is respected. In those cases where the adolescent refuses treatment, her decision is still given *consideration* respect, even if her choice is overridden.

more than that, we have legitimate and important concerns that young people make choices that are good for them, as well as make choices well. Transitional paternalism, and the asymmetry it generates in this case, takes seriously developing autonomy *and* concern for an adolescent's welfare. Furthermore, as with any instance of transitional paternalism, the asymmetry in this case reflects a broader period of 'training' in (familiarisation with and experience of) decision-making, including knowledge of and practical experience of the various relationships, and institutions.³⁸ As I have argued, understanding the decision-making context is vital to negotiating the complexity of real-life, and making decisions that reflect and serve your own plans, projects and values. Only in this asymmetrical situation can young people to be involved in a set of important decisions from which they would otherwise be excluded, and participation of this sort is *central* to the cultivation of their agency. After all, the alternative is to restrict decisions about life-saving treatment so that the power to consent to them lies entirely with the state (or other party).

Through the asymmetry, adolescents are involved in all decisions insofar as they can consent or refuse treatment. However, this power is shared with medics and courts and when refusal of a clinical action puts an adolescent's welfare at risk, others hold the power to consent on her behalf. This is the 'coarse line' that is drawn in the formal medical context in response to the complex moral facts about adolescence. Nevertheless, in those occasional cases when an adolescent does refuse treatment, the courts and doctors must give the adolescent's opinion

³⁸ This is more in line with Rosato's claims that autonomy should be the main consideration in such cases. See Rosato (2002).

consideration. This may lead to her decision to refuse treatment being respected. Only this asymmetry-generating version of transitional paternalism considers young people's views in respect of *all* clinical actions, and this leaves open the possibility that coarse legislative lines might be fine-tuned in individual cases. At a time when there is great variation in young people's maturity, we need strategies for coping with this variation between children of the same age and adopting this apparently odd asymmetry generating approach gives some scope for discretion without parental involvement and allows for a degree of individualisation in the face of standardised thresholds.

The arguments that I have presented in defence of the asymmetric position, face the *prima facie* objection that the choice offered to adolescents is bogus, and represents the very antithesis of autonomy.³⁹ That is, the 'choice' offered to adolescents is not a real choice at all because only the 'right' decision will be respected by others.⁴⁰ As I have argued, far from being the antithesis of autonomy, the practice of transitional paternalism is autonomy promoting, even when it generates odd asymmetries.⁴¹ Returning to the analogy of the learner driver, it seems intuitively obvious that the learner driver is exercising a degree of real autonomy. If the analogy holds, then it follows that the adolescent participating in clinical decisions under the conditions of transitional paternalism is likewise exercising a degree of real autonomy. Furthermore, as I have already spelled out,

³⁹ This point has been raised in section 5.3a.

⁴⁰ Lawlor argues from the intuitive idea that to *offer* a choice without a commitment to respecting the answer unless it is the 'right' one seems to be a 'sham'. Lawlor, R. (2016) 'Ambiguities and Asymmetries in Consent and Refusal: Reply to Manson,' *Bioethics*. Vol.30, no.5, pp.353-357.

⁴¹ There are those that object to the asymmetry, for example, Harris, J. (2003) 'Consent and end of life decisions,' *Journal of medical ethics*. Vol.29, no.1, pp.10-15.

there are good reasons to let the learner try the tricky move, even knowing that the instructor will have to override them if it goes wrong. Likewise, there are good reasons to let young people have a go at making their own decisions, even though they might be overridden if they put themselves in danger.

As we have seen, the practice of including adolescents in important decisions that affect them, under conditions of transitional paternalism, supports young people's ability to lead their lives on their own account in the future, and more properly prepares them to take responsibility for their choices in the long run. The justification for presenting the adolescent with a choice, albeit provisionally and not conclusively, in this context is not to maximize their autonomy in the short-term, as it might be in other situations where we are presented with choices, but to support agency in the long run. We have also seen that this idea is supported in a number of places within the philosophical literature, and also by several legal theorists. Hartman argues, for instance, that presuming incapacity for all adolescents under the age of maturity (and so restricting them from participating in important decisions that affect their lives) harms adolescents and wider society because it stunts 'life-long development of decision-making ability.'⁴² Rather, participation in important decisions presents adolescents with the chance to consider meaningful alternatives, both opportunities for action and ways of thinking about what matters. In fact, participation in decisions, whether life-saving or not, has the potential to involve adolescents in meaningful processes of learning and reflection. Rosato argues that, '[a]llowing adolescents to make health care decisions is beneficial because it is likely

⁴² Hartman (2000), p.1269.

to improve their self-esteem and sense of control in the short-term, and make them better decision-makers and citizens in the long-term.’⁴³ Adolescents are able to ‘try out’ their reasoning and may even reconsider their values in light of other people’s reasons. In addition, this kind of participation may have a positive effect on adolescents’ sense of self-worth.

In summary

In this chapter I have used the sphere-model to uncover the gradualism that exists at a legislative level and explored how far this gradualism is consistent with, or even reflects an underlying commitment to, transitional paternalism.

There are good reasons to have multiple thresholds across spheres as opposed to one single age of majority because some competences required for participation are sphere-specific and are not transferable across or between spheres. Setting thresholds can be consistent with the individual variation that exists between all adolescents when there is room for discretion within legislation. Discretion can be achieved when powers and responsibilities are shared between adolescents and others, which might include parents, practitioners, institutions or organisations, or a combination of these actors. I have used existing examples to show how discretion (and therefore a degree of gradualism) can be achieved. I have paid closer attention to the relationships that adolescents have with others in the medical sphere to

⁴³ Rosato (2002), p.790.

illustrate the explanatory power of transitional paternalism. In contrast to the philosophical literature which, in the main, focuses on the acquisition of rights, it is arguable that extant legal, social and institutional arrangements already reflect something similar to my sphere-model, and the importance of pre-threshold transition periods of practice and experience.

Moving away from transitional paternalism in the context of medical decision-making, I go on to consider how wider policy aimed at adolescents can support agency development in chapter seven. In particular, I am interested in exploring how far reaching, transferable competences can be supported. I argue that policy can be developed to provide young people with some of the skills they need to develop their participation in social and civic life on their own terms and take control of their lives for themselves. I offer examples of existing health-focused, school- and community-based policies that focus not on behaviour change, but instead on supporting adolescent agency.

Chapter 7: Focusing on agency to support transitions into adulthood

Previous chapters have argued for a more coherent and defensible outline of the normative landscape of adolescence. As children become adolescents, they have an increased interest in making and acting on their own plans and making their own decisions.¹ Many theorists describe changes in adolescence in terms of changes in rights. I have argued, however, that the socio-relational complexity of adolescence is not best captured on rights-based accounts. Rights-based approaches fail to give due acknowledgement of relational changes that occur in adolescence, which are both gradual and numerous. Thinking in terms of the spheres of activity that open up to children as they mature is preferable because this reveals the important relational dimension in developing abilities and responsibilities and can make sense of gradualism. Sharing powers and responsibilities between adolescents and others allows for periods of safe experience, practice and experiment (or mistake making) and these experiences help develop competences.

During adolescence, the abilities a person needs to act on their own account, and take responsibility for their life, emerge and develop. All children need to learn how to become adults and how to negotiate different spheres of life; the particular environments and families of some children give them much less support and open far fewer opportunities to them. Social circumstances can hinder the emergence of abilities to act on one's own account and take responsibility for one's own life. In chapter one I introduced the idea of 'fast-track' transitions and described how these

¹ As seen in chapter two.

kind of transitions, associated with disadvantage of various kinds, can result in ‘fractured’ journeys into adulthood, premature acquisition of responsibilities and a lack of the right kind of skills and knowledge to negotiate the complexities of adulthood.

Competences may be sphere-specific and, so far, I have highlighted some instances of competences of these kinds. However, some skills and attitudes apply across spheres and are transferable between spheres. There is a role for the state in equalising the life chances of children, and here I examine how far this might be achieved through the education of skills and attitudes that are useful across a range of spheres of activity. Furthermore, states have an interest in ensuring that the transition out of adolescence leads to (mentally and physically) healthy individuals capable of leading their own lives and capable of contributing to, and benefitting from, a wide range of social relationships. In what follows, I present a case study regarding adolescents’ emerging abilities, how these can be hindered, and how more positive development during adolescence might be supported by different types of policy or intervention.

7.1 Agency, disadvantage, and opportunity

In this section I argue social circumstances can hinder emerging abilities during adolescence and, as a result, not all transitions through adolescence are the same, and not all are ‘successful’. Rather, some young people are thrown in the deep end

without due preparation, and lack the skills, attitudes and knowledge to be able to negotiate new associations and take responsibility for their own lives.

In the societies we are focusing upon both cultural norms, and the legislation that responds to them, reflect the Western liberal ideal that children should have an open future,² unburdened by employment, premature parenthood, economic worries and violence, and facilitated by access to education and security.³ Socio-economic inequality blocks the achievement of these ideals. Reliance on the relationships that children have with their parents (or guardians) might mean that transitions can be more, or less, successful and young people may, as a result, be less able to manage their lives for themselves on their own terms, depending on the circumstances of their family and wider community, and the quality of the relationships. In chapter one, I referred to fast track (and slow-track) transitions and described how fast-track transitions are associated with particular determinants and outcomes for young people. Those children who come from lower SES backgrounds are more likely to fast-track into adulthood and have fractured or incomplete transitions. They are more likely to suffer outcomes such as lower educational attainment, poor employment, lack of social capital, and lack of opportunities. In terms of the sphere-model, on which agency is understood in terms of a person's ability to negotiate the affiliations that enable her to take control of her life on her own terms, these outcomes go hand in hand with a lack of social power.

Disadvantage and a lack of opportunities are closely tied to a lack of agency and, as I

² See Feinberg (1980).

³ Liberal arguments for compulsory education often cite as justification the development of autonomy or a capacity for self-determination. The argument is that compulsory education is a paternalistic measure that is necessary to acquiring freedom from paternalism in the future.

argue here, there are good reasons for interventions that attempt to address disadvantage to focus on adolescents' emerging abilities, supporting more positive development.

When we talk about the disadvantage children and adolescents experience relative to their peers, we are talking about inter-familial and inter-community disadvantages and the question of how to address these is a question about social justice. The state has a role to play in dealing with social injustice and has the capacity to do so through its policies. Agency, and the skills and attitudes a person needs to pursue their own plans on their own terms within complex social and political contexts, is a particularly important consideration when thinking about the role that public policy plays in addressing disadvantage and equalising life opportunities for children and adolescents. This is because there is variation in the opportunities on offer to different individuals and variation in the types of barriers that people encounter accessing any opportunities. Furthermore, people in some groups encounter disproportionately severe barriers to other groups. Disadvantages may lead to a lack of some of the skills, capacities and affordances that are needed for a person to act on her own long-term interests and commitments, such as the ability to make plans and see them through.⁴ Disadvantages also cluster and compound, and there are multiple factors that can impact on the development of capacities for personal agency. These might be to do with socio-economic status, ethnicity, geographic location of the community, individual gender, age, or due to a lack of finance, skills, or time. In many cases these factors overlap, so a person who is

⁴ Wolff, J. & de-Shalit, A. (2007) *Disadvantage*. Oxford: Oxford University Press.; p.69, refer to what they call 'planning blight'.

in a lower socio-economic group may also lack skills or time and live in a community which itself lacks resources.

7.1a The role of the state

If an important feature of adolescent participation in new spheres is developing the competences needed for adult life, then this should be a concern when considering the state's duty to adolescents. Not all children benefit from the kind of familial background or environment that enables gradual admission into new spheres and the development of the competences needed for adulthood. The state cannot substitute for the parental role in its entirety when parents are unable to facilitate admission into new spheres. However, as I will argue, there are opportunities for state policy and intervention to support and aid development of the more general and transferable skills and attitudes that will support young people's transitions into adulthood. The state has a role to play in equalising the overall life chances of children and has the capacity, through interventions and policy, to address the kind of inter-familial injustice and disadvantage that lead to fast-track transitions and compound inequalities for young people as they take on adult roles and responsibilities. As well as acting in the role of *parens patriae* – the protective role that the state plays – the state has a related interest in securing the conditions of its own future existence. Since the state has an interest in its children becoming independent and able to look after their own interests, so the state has an interest in supporting adolescent transitions and ensuring that policies and legislation reflect

and respond to features that define adolescence.

Since many forms of disadvantage can be thought of in terms of a lack of agency, it is possible that the state could address disadvantage, in part, by supporting the development of certain competences, skills and attitudes that will help children and adolescents take control of their lives in the long run. This might mean developing young people's critical thinking skills, or cultivating their self-esteem, self-confidence and self-efficacy. Reflexive attitudes of this kind constitute young people's sense that they are *able* to make their own choices. This is particularly important, as there are many considerations of power at play in adolescents' interactions with the world around them. Commercial interests and the media, for instance, are powerful and influential. Furthermore, a young person's desire for group belonging can mean peer influence is very strong, even overbearing. Self-esteem and self-efficacy contribute to a person's perception of herself and her own *sense* of empowerment. There are also practical skills that adolescents need to learn in order to make sense of the new expectations and conventions within unfamiliar spheres of activity, and to be able to *act* on and form a good sense of what matters to them. It is important that young people develop the skills needed to set goals and make plans, as well as practical skills such as interpersonal and communication skills, so that they are able to achieve the things they set out to achieve.

As this thesis has described, it is plausible that many of the capacities, and internal and external factors, that contribute to a person's agency could be effectively supported during adolescence. Importantly, the usefulness of some of

these skills and attitudes is *far-reaching* and could carry through into many areas in the young person's life and on into adulthood, despite continued changes in the social and environmental context of adolescent life. Adolescents are expected to 'move on' and set up lives in different places, socialise with different people, and even to experiment with different ways of life, though these expectations are distributed differently among young people from different socio-economic backgrounds. Various socialising forces act as obstacles to development, and to young people's belief that they are able to achieve particular outcomes.

Adolescence is the time at which young people are naturally developing their capacity for self-direction, and it makes sense to work *with* adolescents increasing desire to act on their own account, rather than lecturing them into behaviour change. As described in chapter five, punitive interactions with adolescents may lead to a closing down of communication, and distancing between adolescents and parents. There may well be parallels between the parental relationship and the relationship between adolescents and state policy; we can at least foresee that dogmatic lecturing of adolescents may well fall on deaf ears. Rather, policy makers could *capitalise* on the developmental changes during adolescence and design strategies that aim to maximise each individual's potential to take control of their own lives. In light of the multitude of factors that potentially undermine adolescent agency, it is important that relevant agencies and institutions work together with young people, their families, schools and communities, to offer them real alternatives, and develop the reflexive attitudes and practical skills required to take up opportunities as they present themselves.

7.2 A case study: focussing on agency to support health

This case study is focussed on policies that aim to support adolescent health. In this section I describe how a person's health is impacted by all spheres of their life. Given this, equipping a person to negotiate a range of spheres could potentially be beneficial to a person's health. In particular, I am concerned with how policy can be developed to provide young people with the skills they need to access new spheres of activity on their own terms and look at examples of how this kind of support might be delivered in school or community settings.

The prevention of poor health outcomes motivates a range of interventions in adolescence. Population health policies are distinct from individual clinical treatment discussed in the previous chapter. Examples include policies that aim to impact on people's lifestyles for instance smoking cessation programmes, seatbelt compliance campaigns, and weight management campaigns, and policies that are focussed on disease management or mitigation, for example diabetes and heart disease. The health interventions that I am focussing on aim to improve adolescent health outcomes and have adopted approaches that develop the skills and attitudes needed to make decisions, deal with new people, and navigate the complex landscape of adolescence into adulthood, rather than focussing on behaviour change per se. As I show, there is indication that health outcomes (and developmental trajectories more generally) are improved as a result of this kind of support.

7.2a Health disadvantage and agency

One way that relative disadvantage between individuals and groups manifests is as differences in health outcomes. People in disadvantaged groups are more likely to have poor health outcomes than those in other groups. By reflecting on the barriers to healthier behaviours experienced by young people, I argue, first, that there is evidence that some disadvantage may contribute significantly to the psychosocial determinants of health and ultimately lead to a lack of agency. Second, I argue that in order to meaningfully frame a person's life outcomes in terms of personal choice, or individual responsibility, we have to recognise that certain skills and attitudes are central to a person's ability to act. Third, drawing on my arguments that adolescence is a time when a person's agency is developing significantly, I argue that interventions and policies should capitalise on this opportunity.

In modern western democracies we are living, on average, longer and healthier lives. However, better health is not distributed equally across the population. There are well-documented differences in health outcomes; it has long been known that some groups of people are healthier than others, and there is increasing action to tackle these inequalities.⁵ Health inequalities are seen at household, community, and national levels. We also know that unhealthy behaviours, such as unhealthy eating habits,⁶ physical inactivity, smoking, alcohol

⁵ The United Kingdom's Department of Health's figures on life expectancy show clear disparities in health outcomes. These figures tell us that even within one area of London there is up to a 15.2-year difference in life expectancy between individuals living in the highest SES ward and the lowest SES ward. This shows that where you live, even within one area of London can contribute significantly to your life expectancy (Department of Health (2004) *Choosing Health: making healthier choices easier* [Public Health White Paper]. London: Department of Health, p.10).; See also Wilkinson, R.G. & Pickett, K. (2010) *The Spirit Level: Why equality is better for everyone*. London: Penguin.

⁶ Centre for Diet and Activity Research (CEDAR) 'Food, Income and Education: Who eats more of what?' URL: <http://www.cedar.iph.cam.ac.uk/resources/evidence/food-income-education-graphic/>.

consumption, and exposures to health-limiting environmental factors are more common in lower socioeconomic groups, and that their effects seem to be more severe for members of those groups.⁷ Furthermore, in some parts of the UK for example, the difference in health between those at the top of the social scale and those at the bottom is widening.⁸ In addition to problems of physical health, mental health problems are more common in areas of deprivation.⁹ The prevalence and clustering of unhealthy behaviours among particular groups exacerbates health inequalities, although it does not fully explain their extent.

The immediate theoretical, as opposed to practical, question is why are there these differences in health outcomes? One way to answer this question is to highlight the primary contributions to poor health outcomes: causes such as poor diet, obesity, smoking, lack of exercise, poor hygiene, and substance abuse. However, the focus on the individual in this kind of analysis is problematic because it does not consider the social and environmental influences on individuals, nor the exposures to which they are subject. In fact, as I will argue, thinking about ‘the causes of causes’ is a much more fruitful way to frame this problem. This requires a focus on the *social determinants* of health – that is, the social factors that influence the health outcomes of individuals and communities. In 2010 the influential *Marmot*

⁷ See, for example, Woodward, M. et al. (2003) ‘Contribution of contemporaneous risk factors to social inequality in coronary heart disease and all causes mortality’ *Prev Med*. Vol. 36, no.5, pp.561-568.; Van Oort, F.V. et al. (2005) ‘Material, psychosocial, and behavioural factors in the explanation of educational inequalities in mortality in the Netherlands.’ *J Epidemiol Community Health*. Vol. 59, no. 3, pp.214-220.; Laaksonen, M. et al. (2008) ‘Health behaviours as explanations for educational level differences in cardiovascular and all-cause mortality: a follow up of 60,000 men and women over 23 years.’ *Eur J Public Health*. Vol. 18, no.1, pp.38-43; Schrijvers, C. et al. (1999) ‘Explaining educational differences in mortality: the role of behavioral and material factors’ *Am J public Health*. Vol.89, no.4, p535-540.; and, Peekanen, J. et al. (1995) ‘Social class, health behaviour, and mortality among men and women in eastern Finland.’ *BMJ*. Vol. 311, no.7005, pp.589-593.

⁸ Department of Health (2004), pp.10-11.

⁹ Wilkinson & Pickett (2010), pp.63-72.; Department of Health (2004), p.11.

Review was published in response to growing inequalities in health outcomes in the UK. The review claimed that the ‘link between social conditions and health is not a footnote to the ‘real’ concerns with health – health care and unhealthy behaviours – it should become the main focus.’¹⁰ Furthermore it argued that putting health inequalities right ‘is a matter of fairness and social justice.’¹¹ Despite the correlations between these various factors and health outcomes,¹² the evidence suggests that health inequalities are not best described as a straightforward linear association between affluence and good health. Instead, it turns out that inequalities in health outcomes are *relative*.¹³ That is to say, a person’s health is associated with her *comparative* status in a social hierarchy. This is what the *Marmot Review* calls the ‘social gradient of health’.¹⁴ The important point to note is that at each step down

¹⁰ Marmot (2010), p.3.

¹¹ Marmot (2010), p.15.

¹² It should be noted that there are questions around the causal relationship between health and what appear to be the social determinants of health. It should not necessarily be inferred from the correlation between low socioeconomic status, for instance, and poorer health that there is a causal link in the direction of lower social economic status *leads* to poorer health. Instead, it could be inferred that those people with poorer health tend to be less affluent because their health restricts their ability to access education and get good jobs, therefore reducing their social mobility. Although it is not within the scope of this report to discuss this at any length, it is important to recognise that these claims are still up for debate. However, much of the literature around the social determinants of health argues that the direction of causation is from the social determinant – lower socioeconomic status, in this case – to poorer health. See for example, Wilkinson R.G. & Marmot M. (2006) *Social Determinants of Health: The Solid Facts* (2nd edition). Copenhagen: World Health Organization, Regional Office for Europe.; and, Wilkinson & Pickett (2010), in particular pp. 190-6, who argue that, even though poor health may load the dice against climbing the social ladder and explain why more people at the bottom of the ladder have poorer health, this does not explain why more unequal societies have more health problems than less unequal societies (that are generally poorer). In fact, some of the richest societies in the world do worst in terms of health outcomes.

¹³ See also Wilkinson & Pickett (2010) who argue that the factor that underlies international and inter-state differences in health outcomes is income inequality. That is to say, more equal societies have overall greater life expectancy, less overweight children and adults, less use of illegal drugs and less cases of mental illness, not to mention greater social mobility and greater trust in others. See also Wilkinson & Marmot (2006); and Marmot, M. (2015) *The Health Gap: The challenge of an unequal world*. London: Bloomsbury.

¹⁴ Marmot (2010), p.15. This turn of phrase is also used in the Commission of the European Communities (2009) *Solidarity in Health: Reducing health inequalities in the EU*, Brussels: European Commission, URL: http://ec.europa.eu/health/ph_determinants/socio_economics/documents/com2009_en.pdf, p.3 which states, ‘Throughout the EU a social gradient in health status exists where people with lower

the social ladder, individual health outcomes get worse, so a middle status person is on average less healthy than a person with high social status, and a low status person is less healthy than a person with middling social status.¹⁵

The underlying factors that correspond to these variations in health outcomes could be socioeconomic, environmental, social or psychosocial. These determinants of health have, in turn, associations with dimensions such as education, occupation, income, gender, race and ethnicity.¹⁶ Distinct determinants of health are likely to be part of a much larger, and complex, web of interconnected influences. The social determinants of health cluster and compound one another, and this appears to be related to the kinds of health inequalities that we see in research. We might describe this as an *intersectionality* of disadvantage in respect of health. By intersectionality, I refer to the fact that social determinants of ill health tend to group together, exacerbating health inequality.¹⁷

A key finding of the literature on health inequalities is that there is a multiplicity of factors that contribute to health. Complex as the situation is, however, a consistent pattern emerges: that health outcomes are determined by relative position on the scale of social (dis)advantage. One way we can explain the social gradient of health is by identifying the barriers and drivers to health that different

education, a lower occupational class or lower income tend to die at a younger age and to have a higher prevalence of most types of health problems.'

¹⁵ This is what Marmot has called 'status syndrome' in his book of the same name. See, Marmot, M. (2004) *The Status Syndrome: How social standing affects our health and longevity*. New York: Henry Holt.

¹⁶ For example, although women in the EU live longer than men, they live more of their lives in ill health. Or consider that Roma have a life-expectancy approximately 10 years less than the general population, and that poor housing, social exclusion, stigmatisation and barriers to accessing health and other services are probably the main reasons for this disparity. (See the Commission of the European Communities (2009), p.3).

¹⁷ On intersectionality, see, for instance, Walby, S., Armstrong, J., & Strid, S. (2012) 'Intersectionality: multiple inequalities in social theory,' *Sociology*. Vol.46, no.2, pp. 224-240.

groups of people experience. Individuals might experience a variety of barriers to health. Some barriers may relate to individual capacities – for example, lack of skills or knowledge¹⁸. Other barriers such as time, money and work pressures, mean that choices become costly and require unreasonable compromises. Other barriers are less tangible; stigma, discrimination, peer pressure, or lack of self-efficacy undermine a person's self-worth, which in turn impacts on a person's sense of empowerment.¹⁹ It is plausible that barriers like these are linked to the psychosocial determinants of health. For example, a person who is subject to barriers of this kind might experience a kind of 'planning blight', that is, difficulty in being able to make plans for their lives, in both the short and long term.²⁰ In extreme cases, a person may find it difficult to plan even when it is rational for them to do so – what Jonathan Wolff and Avner de-Shalit call 'paralysis of the will' – because they feel (perhaps mistakenly) that they no longer have control over their life.²¹ Relatedly, inability to make plans may well feed into, or compound, further barriers, for example, lack of social capital, disempowerment, shame, and lack of self-efficacy. Together, these factors contribute to the capacities required for individual agency, a person's ability to form their own plans, act on their own values and interests, and take responsibility for their life.

However, strategies that stress personal choice, claiming 'only *you* can make changes to your behaviour', are in danger of putting too much emphasis on

¹⁸ See, Mullainathan, S. & Shafir, E. (2014) *Scarcity: the true cost of not having enough*. London: Penguin.

¹⁹ In addition to barriers there are exposures that negatively impact on health, to urban air pollution for instance, may be disproportionately experienced by disadvantaged groups.

²⁰ Wolff & de-Shalit (2007); p.69.

²¹ See Blacksher, E. (2002) 'On Being Poor and Feeling Poor: low socioeconomic status and the moral self,' *Theoretical Medicine and Bioethics*. Vol.23, no.6, pp.455-70.

individual responsibility. We need to be careful, when we are framing strategies in terms of individual responsibility, that we are *supporting* empowerment and enabling individuals to make changes, and not compounding possible feelings of helplessness.²² In light of what has been said about responsibility and adolescent agency, when we consider the freedom that a person has to make choices, we must think about both the opportunities that are presented to an individual, and their *ability* to actually take them up.²³ Policy might attempt to support adolescent health by offering young people increased opportunities for health, for example, facilities for sport and physical activity, increased access to healthy foods, or educational programmes focussing on healthy choices. However, evidence suggests that opportunities alone are not sufficient, and that these kinds of strategies will not support adolescent health effectively.²⁴ Adolescence is a period of transition and

²² Indeed, it has been suggested elsewhere that empowerment is *central* to the success of behaviour change interventions. See, for example, Naidoo, J. & Wills, J. (1994) *Health Promotion: foundations of practice*. London: Baillière Tindall; and, Nutbeam, D. (1998) 'Evaluating health promotion – progress, problems and solutions,' *Health Promotion International*. Vol.13, no.1, pp.27–43.

²³ This thought is loosely based on the 'capability approach', a theoretical framework first developed by Amartya Sen (see, for example, Sen, A. (1985) *Commodities and Capabilities*. New York: North-Holland; Sen, A. (1999) *Development as Freedom*. Oxford: Oxford University Press.), and later by Martha Nussbaum (See, for example, Nussbaum, M. (2003) 'Capabilities as Fundamental Entitlements: Sen and Social Justice' *Feminist Economics*. Vol. 9 no.2-3, pp. 33-59.) through which to evaluate (and plausibly improve on) social policy. Taking a capability approach to addressing equality means considering both the opportunities that are available to individuals to achieve the kinds of lives they value, and their capacity to actually take up those opportunities. A capabilities approach is well suited to thinking about the clustering of disadvantage because, although it is easy to think about disadvantage in terms of resource poverty, disadvantage is plural in nature, and resource redistribution cannot address those disadvantages that result from oppressive social structures, stigma or shame, and lack of social capital.

²⁴ The intervention literature reports 'limited evidence of effect found for education interventions on behaviour,' van Cauwenberghe, E.V., et al. (2010) 'Systematic Review: Effectiveness of school-based interventions in Europe to promote healthy nutrition in children and adolescents: systematic review of published and 'grey' literature,' *The British Journal of Nutrition*. Vol.103, no.6, pp.781-797.; p781. Also, 'no evidence of an effect' for education-only interventions to promote physical activity in adolescents (van Sluijs, E.M. et al. (2007) 'Effectiveness of interventions to promote physical activity in children and adolescents: systematic review of controlled trials,' *BMJ*. Vol.335, no.7622, p.703-707. Also, and 'inconclusive evidence' of an effect in environmental interventions to promote physical activity in adolescents (van Sluijs et al. (2007), p. 704). Systematic reviews also report that '[a]t the current level of evidence, choice architecture cannot be recommended as a strategy for changing food consumption behaviour' and that 'focus on choice architecture as a health promotion tool might

flux, and this period is likely to be followed by more radical changes during early adulthood. For this reason, interventions that focus entirely upon the environment and the options *currently* open to young people are unlikely to foster lasting positive changes in their lives.

Two questions then arise: First, what interventions and policy strategies can adolescents meaningfully make use of? Second, which interventions and policy strategies are likely to make a difference beyond the immediate context of adolescents' lives, which we know will change radically as they enter adulthood? Strategies must aim to have positive stable effects, and this means responding to adolescents' specific needs, taking account of their priorities, and identifying the features of adolescence that present opportunities for wider and more enduring impact. Finding ways to capitalise on adolescent development could make a significant difference to the long-term health outcomes of young people, and, potentially have a broader impact on their life opportunities.²⁵ Supporting

cause neglect of other population level interventions that are potentially more effective.' (Skov, L.R., et al. (2013) 'Choice architecture as a means to change eating behaviour in self-service settings: A systematic review,' *Obesity Review*. Vol.14, pp.187–196.; p. 195).

²⁵ There are two reasons why adolescents might deserve special attention when we are considering ways to reduce health inequalities and promote population health. First, adolescents are potentially very vulnerable to adopting undesirable health behaviours (van Cauwenberghe et al. (2010), p781). Furthermore, there is evidence that suggests the unhealthy behaviours adopted during adolescence – such as sedentary behaviours, tobacco and alcohol (mis)use, and poor dietary patterns – track into adulthood, and could therefore represent an opportunity to encourage positive changes to individual health (On this see for example Resnick et al. (2012); Kelder, S.H. et al. (1994) 'Longitudinal tracking of adolescent smoking, physical activity, and food choice behaviors,' *American Journal of Public Health*. Vol.84, no.7, pp.1121–1126.; Lien, N. et al. (2001) 'Stability in consumption of fruit, vegetables, and sugary foods in a cohort from age 14 to age 21,' *Preventative Medicine*. Vol.33, no.3, pp.217–226.; Lytle, P. et al. (2000) 'How do children's eating patterns and food choices change over time? Results from a cohort study,' *American Journal of Health Promotion*. Vol.14, no.4, pp.222 – 228.; and Catalano, R.F. et al. (2012) 'Worldwide Application of Prevention Science in Adolescent Health,' *The Lancet*. Vol.379, no.9826, pp.16533-1664.). Second, many of the risk (and protective) factors for health outcomes are shared by other problem behaviours and detrimental outcomes, such as school disengagement, academic failure, sexual precocity, and delinquency, and risk factors increase from childhood into adolescence (see, for example, Jessor, R. et al. (1995) 'Protective Factors in Adolescent Problem Behaviour: moderator effects and developmental change,' *Developmental Psychology*.

adolescent transitions by supporting adolescents' participation in new spheres and ultimately their ability to take on the rich and complex demands of adult roles and responsibilities, presents an opportunity to make these lasting, and transferable, changes.

To do this, it is important to consider the needs of adolescents, the barriers that they experience, and adolescents' own strengths. Policy must recognise that there is a web of factors across the spheres of life, many of which are distinctive to adolescence, that make up the developmental, social, and environmental context of young people's lives. These factors influence what matters to young people, the options that appear real and meaningful to them, and the barriers that they experience to taking up opportunities.

7.2b Using the education sphere to address inter-familial disadvantage

The case study that I present focuses on education- and community-based interventions. In this case, the educational sphere is being used as a means of addressing a shortfall in people's ability to navigate a range of different spheres and activities in ways that enable them to lead their own lives. Education may not be the obvious place to address the kind of inter-familial disadvantage that I have described in this chapter. However, I present reasons for thinking that the educational sphere – using schools and other forums and technologies within the educational sphere –

Vol.31, no.6, pp.923-33.; Sawyer et al. (2012); and, Catalano, R.F. et al. (2012)). Concentrating efforts on prevention is preferable to sinking resources into curing preventable diseases.

may be a more appropriate in adolescence than targeting the domestic sphere, where the parents or family as a whole may engaged in strategies for change, and where the family home is used as the key site for intervention.

Why not the domestic sphere?

In terms of health policy, the task is to develop strategies that support the health of all young people. In particular, institutions and organisations want to support the health of those young people whose current or future health is especially likely to suffer because of disadvantage. An important principle of fairness is that 'no one should be disadvantaged (or advantaged) in their pursuit of their life choices by factors that are beyond their control but are open to social influence and control.'²⁶ That is, it is unfair that the prince's life should go much better than the pauper's because he has had more opportunities, resources, and power than his counterpart. In this case, we can see why childhood, and crucially the family, is so fundamental to questions about fairness and social justice, and why childhood and adolescence may be particularly attractive to policy makers aiming to improve the life chances of those who are currently disadvantaged. However, as I will argue, there are good reasons for thinking that the family is not the most suitable site for interventions that are targeted at adolescents.

²⁶ Archard, D. (2006) 'The Moral and Political Status of Children,' *Public Policy Research*. Vol.13, no.1, pp.6-12, p.9.

The first reason that we should be cautious about targeting the family is that, even in the case of younger children, the resources and opportunities that are available to young people are often not under the control of their parents. In fact, parents' *ability* to parent is a result of the kinds of resources and opportunities they themselves have previously benefited from or been deprived of. We can readily think of examples when the choices a mother makes for her children are constrained by her own resources or the options that are open to her. Parents must make decisions about how to spend their money, and this might mean having to prioritise necessities, or mean that children miss out on some of the opportunities that their peers get. But there are less obvious burdens that parents face. For example, parents might be reluctant to let their children go out to play because they are worried about traffic, and the stories they hear on the news about crime and other risks. Some parents may themselves have the additional burden that they are subject to problems of stigma, mistrust and shame, as are their children.²⁷ In terms of health, and as outlined earlier in this chapter, the social determinants of health outcomes are complexly inter-connected, and the problem of health inequality extends well beyond the scope of health care policy or public health policy. In fact, health outcomes of parents and their children are affected by social policy, transport policy, employment policy, food policy, housing policy, town planning, and childcare policy

²⁷ There is also a substantial body of literature suggesting that social capital and social integration can be a protective factor in physical and psychological health. See, for example, Rosengren, A. et al. (1993) 'Stressful life events, social support, and mortality in men born in 1933,' *British Medical Journal*. Vol.307, no.6921 pp.1102–1105.; Achat H. et al. (1998) 'Social networks, stress and health-related quality of life,' *Quality of Life Research*. Vol.7, no.8, pp.735–750; Berkman, L.F. & Glass T.(2000) 'Social integration, social networks, social support, and health,' In: Berkman, L.F. & Kawachi, I. (Eds) *Social epidemiology*. New York: Oxford University Press, pp. 137–173.; Cohen, S. et al. (2000) 'Social relationships and health.' In: Cohen, S., Underwood, L. & B. Gottlieb (Eds) *Measuring and Intervening in Social Support*. New York: Oxford University Press, pp. 3–25.; Cohen, S. (2004) 'Social relationships and health,' *American Psychologist*. Vol.59, no.8, pp.676–694.

to name just some. Likewise, a person's health has an impact across all spheres of their life. Those with less power or fewer resources and opportunities have, by the same token, less ability to avert risks and pursue beneficial options. Although we might agree that parents bear a key responsibility for raising their children, the important question for public policy is what can be done to enable and support parents, and to help the children whose parents are less well-placed to raise them.

As well as the burdens that targeting families – asking families, and particularly parents, to take responsibility for making changes in their lives – might put upon parents, it is not clear that policies aimed at families will be effective for reaching adolescents in particular. I have in mind, for example, 'Change4Life' type campaigns that are designed to effect change in families with children in the home.²⁸ In this type of campaign parents are encouraged to make changes to the diet and activity-levels of all family members, but most particularly children, and children are encouraged to inform or motivate parents via bright characters, Disney characters, and, most recently in Change4Life material, *Star Wars*. Campaigns such as this are designed to be relevant to and communicate effectively with children and their families. In chapter one, I described the changes that adolescents undergo and the shift that takes place in the kinds of relationships that adolescents have, as peers become more influential and parents less so. There will be changes in school environments, and new social arrangements and codes to follow (or rebel against), for example the pressure to own branded goods and awareness of what is considered 'cool'.²⁹ These changes mean moving away from reliance on the family

²⁸ Change4Life website URL: <https://www.nhs.uk/change4life>.

²⁹ In a qualitative study about adolescents' experiences in a school canteen one girl stated, 'Oh, yeah! It's like... if they got something like unhealthy and then like you got something healthy they'd be like

and the home setting, towards peers, friend networks, or even gang membership. Adolescents spend less time in the home and have greater access to media and consumer culture and, therefore, adult authority is less impactful across the areas of an adolescent's life.³⁰ As established in chapter four, there are new limits to the extent that adults are able to involve themselves in young people's decisions, and narrower channels of communication open between adults and adolescents. It becomes harder for adults to collaborate or interfere in her decisions and activities, even though they may feel strong urges to protect her or steer her towards 'better' decisions. In other words, adolescents increasingly make their own decisions, *whether or not* their parents and teachers offer them the opportunity to do so.

Many adolescents will be trying out and adopting behaviours that differentiate them from their families. Often greater independence (from family and school) means greater exposure to powerful organisations and systems, such as the media. As described in chapters three and five, in childhood, adults, particularly parents, mediate children's participation in many spheres and, as such, act as gatekeepers to many sources of media marketing. As adolescents explore the world independently, they have to negotiate these persuasive and sometimes compelling influences, often with little media literacy.³¹

'you're a weirdo' and stuff. And they'd make fun of you,' and a boy stated 'But they'd rather go for the fatty food so they don't look like the odd one out... Because they might call you names for like taking healthy food.' See McEvoy, C.T. et al. (2014) 'Adolescents' views about a proposed rewards intervention to promote healthy food choice in secondary school canteens,' *Health Education Research*. Vol.29, no.5. pp.799-811.

³⁰ In respect of health, tweens and teens are less likely to eat in the home (See Hebestreit, A. et al. (2017) 'Dietary patterns of European children and their parents in association with home food environment: results from the I.Family Study,' *Nutrients*. Vol. 9, no. 2, pp.126-143. Furthermore, due to wide spread (self-) regulation restricting food advertising to children below 12 years, are more likely to be exposed to advertisements for food and beverages than children.

³¹ Adolescents may also feel that owning and consuming particular branded good becomes increasingly important and have the added pressure that many of their peers adopt or go along with

The way that adolescents participate in the domestic sphere with their parents changes, particularly for those adolescents who are most at risk of fast-track transitions who may not spend time in the family home. This limits the potential impact of interventions that focus on the family as a site of change. Those responsible for developing ways to support adolescents must be mindful of this network of developmental, social, and environmental factors if interventions are to effectively reach teens. Supporting positive changes in the developmental journeys that adolescents make, and taking steps to challenge some forms of disadvantage, means developing young people's appreciation of what it is to lead their own lives.

Why choose education?

The state can use various means to address disadvantage and inter-familial injustice, other than directly targeting families, perhaps most obviously education.³² All adolescents are required to be in education. This, however, does not mean that all adolescents *will* be engaged in education or equally active in that sphere. There may be degrees of engagement and participation within it. For those who are

consumerist norms. To complicate matters, the messages reaching young people are at best confusing and at worst plainly contradictory, often reflecting corporate interests, unrealistic ideals of personal beauty, and shallow emphasis on material goods and unattainable lifestyles. Consider, for example, Beyoncé's affiliation with Pepsi in 2013. She starred in the television advert and her face was on the can. Of course, she is thin and beautiful (and has great teeth!). The message that thin, beautiful, famous people endorse Pepsi is in conflict with the fact that sugar-sweetened beverages are very bad for your health. As mentioned, future health outcomes are likely to be very low on adolescents' list of priorities. However, they have increased desire for independence in matters that are likely to affect their health, and the cacophony of confused messages and new, often competing priorities clearly make it more difficult for teens to make choices that serve their interests and correspond to worthwhile values.

³² Archard (2003), pp.141-2.

disenfranchised or disengaged from traditional institutions, such as school and college, the collaboration of wider organisations and networks within the sphere may increase success. This might mean using less traditional avenues for education such as peer-to-peer engagement and broader community-based interventions, or using education-based interventions as part of a 'joined up' approach to policy making across several spheres of activity.

One challenge of effectively targeting young people is finding ways to communicate with adolescents, without appearing to be 'tokenistic', and ensuring that their views are given due weight. Involving adolescents in decisions that affect their lives is one way that adolescents can gain experience as new areas open up to them. This might be done by maximising participation in decision-making and by listening to or considering adolescents' views. In the context of policy, listening to children and adolescents may well be morally motivated, but it can also serve a practical purpose. We can find out what their particular needs are, and what barriers to opportunities they are experiencing, by listening to their experiences and to their ideas. Listening to individuals is a first, preliminary step towards increasing their empowerment and self-esteem, and recognises what actually matters to them.³³

Strategies to engage young people must encourage the exchange of information and sharing of ideas and ensure that those who are participating are heard and feel

³³ This is well recognised in the health promotion literature. As stated in Marmot M. (2010) *Fair Society, Healthy Lives: A Strategic Review of Inequalities in England*. London: University College London, p.15 'Effective local delivery requires effective participatory decision-making at local level. This can only happen by empowering individuals and local communities.' See also Wall, M. et al. (2009) 'Evaluation of community level interventions to address social and structural determinants of health: a cluster randomised controlled trial,' *BMC Public Health*. Vol.9, no.1, p.207-207, whose evaluation indicates that data collection from communities targeted by interventions were important in identifying drivers and barriers that led to the success (or failure) of interventions.

listened to.³⁴ When policies and interventions fail to do these things they fail the groups that they intend to target. An example of a policy initiative that attempts to listen to the needs of their target group is the Danish government's initiative, the National Council for Children. The National Council for Children intends to involve children and adolescents in decisions that affect them. The aim is to provide a communication bridge between young people and policy makers in the Danish parliament. The head of the research council has stated:

Many adolescents already have life experience that the professionals need to hear to develop changes, if only they would listen to them instead of thinking they, the professionals, are the experts. Very often these kids have some great suggestions...³⁵

In cases such as this, there is insight to be gained from paying particular attention to the social, developmental, and environmental context of adolescents' lives.

³⁴ See Bolam (2004); Public Health England (2014) 'Health inequalities: a toolkit to support local conversations.' URL: https://www.gov.uk/government/uploads/system/uploads/attachment_data/file/356982/National_Conversations_Report_19_Sept.pdf.

³⁵ Trine, N. (2014) 'Making Children and Adolescents Visible' URL: <http://www.euro.who.int/en/health-topics/Life-stages/child-and-adolescent-health/news/news/2014/10/making-children-and-adolescents-visible>.

The Council involves 2,000 young people in Denmark and facilitates work with at-risk children and adolescents to find out ways that they feel their lives could become safer and healthier. Such initiatives, that make it a priority to listen to children, correspond well with WHO Health 2020's mission to empower people and give them a chance to be involved in the policymaking process. World Health Organisation Regional Office for Europe (2013) 'Health 2020: a European policy framework and strategy for the 21st century'. URL: <http://www.euro.who.int/en/publications/abstracts/health-2020.-a-european-policy-framework-and-strategy-for-the-21st-century-2013>. Of course, it is difficult to discern whether a dialogue was struck up with the most relevant people, whose voices proved the loudest, and whose voices were lost or least listened to. But perhaps this is a move in the right direction. The WHO Health2020 framework considers society-wide engagement and on-going dialogue in the planning, development, and implementation of policy as central to its vision, and lists to 'Strengthen leadership and participatory governance for health' among its main aims, second only to 'Improving health for all and reducing the health divide' (p.3) The strategy to achieve this is pitched in the language of 'people-centred health systems', and 'empowered communities' (p.4).

There are several potential problems that must be overcome to communicate effectively with adolescents. First, some adolescents are likely to be sceptical about adult interference in their lives, or reluctant to collaborate with individuals or groups who are seen as 'uncool' or oppressive, perhaps more especially if they themselves come from disadvantaged backgrounds or oppressed groups. Second, discussions about 'the future' may be perceived as dull or unimportant to some young people. Third, there is the challenge of finding a suitable channel through which to connect with young people. Ultimately, we need to find ways of communicating with adolescents about what matters to them. The difficulty lies in the fact that the very young people we need to talk to are likely to be preoccupied with asserting their independence from adults and are communicating in ways that are deliberately distanced from the adult world. Also, in the case of health, many health effects, such as diabetes and tooth decay, or cancers and cardiovascular disease, are likely far off in the future. Only some health problems, such as sexually transmitted diseases, the effects of drugs use, and perhaps alcohol-related injuries may be in the consciousness of adolescents. Peer networks certainly appear to be highly influential for many young people,³⁶ and, in terms of health, there is evidence that employing existing peer networks to initiate health behaviour change may be effective, by, for example, training peer educators. Peer educators are supported to promote health behaviours within their community by sharing values, information and skills with others. Relationships of this kind could potentially provide opportunities for young people to share their concerns and difficulties. Social media is a central and

³⁶ Gwozdz, W. et al. (2015) 'Peer effects on obesity in a sample of European children,' *Economics & Human Biology*, Vol.18, pp.139-152.

important means of communication for many young people, so there might be ways that this can be effectively harnessed to get adolescents opinions on health.

However, the forms of social media which are in favour with young people are quick to change –Facebook, Twitter, Instagram, YouTube, and the blogosphere are all competing and shifting channels of communication – and using the ‘wrong’ platform could mean failure for an attempt to reach adolescents.

7.2c Educating for transferable ‘life skills’

On the sphere-based gradualist account of development that I have presented in this thesis, it is important for relevant agents and institutions to provide a safe arena for familiarisation and practice. Part of becoming an agent on this account is developing the skills and knowledge to be able to negotiate new spheres. In part, these can only be acquired through experience – certain sphere-specific competences are not best developed, or even developed at all, without direct experience. There are, however, certainly aspects of agency that, though developed through particular experiences, are transferable across the various spheres of a person's life. It may not be advisable to allow a child, judged competent to walk home alone from school, to drive herself into town in the family car; after all these two activities require different skills and knowledge. Nevertheless, certain reflexive and practical skills developed in one activity may help her develop further skills elsewhere. In this case, the self-confidence and self-awareness she develops walking home from school will be an important base on which to build when she learns to drive. Her knowledge of local

geography and her sense that she is part of a wider group of road and byway users, and of all the hazards that come with sharing that space, will also help her as she begins to drive a car for herself. This example is analogous to the situation across spheres of activity more broadly in that some of the skills and attitudes she picks up in one sphere will be transferable to other spheres. In her education, for example, she will develop in ways which will be beneficial to her as she leaves and enters the world of paid employment. Likewise, the social and communication skills she learns as a member of her family, school and wider community she will take forward into her adult life. In particular, in this analysis, I have in mind reflexive attitudes such as self-confidence, self-esteem, and self-efficacy, as well as practical skills in identifying and assessing reasons and values, communication skills, and the skills needed to make and implement plans and projects. In other words, the skills and attitudes that contribute to a person's sense that she is able to do the things she wants to do and is able to take the steps to see her plans and projects to fruition.

The following sections present some examples of policies designed to support the development of transferable skills and attitudes that might help adolescents – particularly those most disadvantaged and susceptible to fast-track transitions – to negotiate new spheres and activities and deal with the challenges of unfamiliar relationships and associations. In particular I look at school- and community-based strategies that support positive development in adolescence, by developing both practical skills and individual reflexive attitudes such as self-confidence and self-efficacy. For young people confronted with bureaucracy and powerful, sometimes oppressive, institutions, these kinds of skills and attitudes might be invaluable to being able to see through projects and plans on their own terms.

There are reasons to think that using schools as a platform for interventions might be a good idea because '[s]chools are a crucial social environment for children and adolescents'.³⁷ School-based interventions have the potential to reach almost all school-aged children, from a diverse range of socio-economic and cultural backgrounds. Although schools appear to have a good deal of potential, there are challenges that must be considered before deciding whether schools are suitable platforms for interventions.

First, schools already have one central task: education. Schools have been criticised for not implementing interventions consistently or with commitment. However, there may be several reasons why schools might struggle to meaningfully adopt additional agendas. There is already a huge burden on schools to incorporate additional considerations on top of their own fundamental educational purpose. Currently in the UK, for example, schools are expected to promote 'British Values', incorporate the 'Prevent' agenda, safe-guard children at risk, develop programmes in line with extra-curricular expectations, as well as teach the new, far more demanding, national curriculum. This raises the question of whether schools can realistically be expected to take responsibility for all these agendas and adopt them in a dedicated and effective way. Second, schools have limited resources, both in financial terms, and in terms of time, material resources and classroom space, and this is compounded in that those schools attended by worse-off children are more stretched in terms of resources and tasks than those in better off communities. In the UK, schools are finding it harder to get extra funds from governmental sources,

³⁷ van Cauwenberghe et al. (2010), p.782.

and are more and more reliant on external funding, and shifting resources to priority needs within schools.³⁸ Third, when we are considering the use of schools as a platform for intervention into the lives of *adolescents*, we have to also bear in mind the multiple factors that influence the behaviours of young people already discussed in this chapter. School is one of many environments in which children and adolescents interact. What reasons do we have for thinking that changes to the school environment would have any lasting impact on adolescents' lives away from the school environment? Importantly, adolescents may be less receptive to messages from school. As discussed, adolescents are more reliant on peers for cues about how to act and, on top of this, some adolescents may be inclined to shun the messages they are given by parents and schools, as part of a bid for independence. Given this worry, it is important to consider if there are alternatives to using schools, or if there are ways that we can develop strategies that capitalise on these developmental facts.

One way that intervention designers have attempted to address these challenges is to take a more holistic approach, using several channels to impact on the lives of young people in school. These approaches build on the thought that school ethos has an effect on both educational achievement and on disruptive behaviours, and that this may well have a knock-on effect on other aspects of

³⁸ Take for example the recent decision to provide free school meals in UK schools for all children in Reception and Key Stage 1. The UK government provided no additional funding to schools that lacked kitchen facilities, and failed to provide schools with enough funds to cover the extra meals that were required. Furthermore, by implementing this strategy, the government removed the incentive for families on low incomes (who were already eligible for free school meals) to apply for free school meals, the funding for which was channelled from the government to the school directly. This means that many schools actually have less funding for providing meals than before the change, yet have to provide a lot more free school meals.

children's lives, including the health outcomes of young people.³⁹ A well-known health-focussed example of this is the World Health Organisation's Health Promoting Schools framework. According to the WHO website, a health promoting school is one 'that constantly strengthens its capacity as a healthy setting for living, learning and working.'⁴⁰ This is a holistic framework that engages members of the school community at all levels, employing practices that provide opportunities for individual success, reward intentions, efforts and achievements, and aims to improve health in the WHO sense; that is, physical, social and mental well-being.⁴¹ The focus is on caring for oneself and others, taking control of one's life and making healthy decisions, improving prospects for a just and sustainable community,⁴² preventing factors that cause death, disability and disease, and influencing health-related behaviours.⁴³ This final focus on changing health behaviours is undertaken through a specific emphasis on knowledge, beliefs, skills, attitudes, values, and support.⁴⁴

³⁹ See Rutter, M. et al. (1979) *Fifteen Thousand Hours: Secondary Schools and Their Effects on Children*. London: Open Books.

⁴⁰ World Health Organisation (2018a) 'What is a Health Promoting School?' URL: http://www.who.int/school_youth_health/gshi/hps/en/.

⁴¹ Lister-Sharp, D. et al. (1999) 'Health promoting schools and health promotion in schools: two systematic reviews,' *Health Technology Assessment (Winchester, England)*. Vol.3, no.22, pp.1-207.; p.23.

⁴² More specifically, these include prospects for peace, shelter, education, food, income, a stable ecosystem, equity, social justice, sustainable development.

⁴³ This could be seen to echo the evidence that involvement in decision-making and in the design, governance and delivery of public services at a community-level enhances ownership and empowerment amongst engaged individuals and makes policy initiatives more accountable to users. See, Gillies, P. (1998) 'Effectiveness of alliances and partnerships for health promotion,' *Health Promotion International*. Vol.13, no.2, pp.99-120.; Rifkin, S. et al. (2000) *Participatory Approaches in Health Promotion and Planning: A literature review*. London School of Hygiene and Tropical Medicine.; Gustaffson, U. & Driver, S. (2005) 'Parents, power and public participation: Sure Start, an experiment in New Labour governance,' *Social Policy and Administration*. Vol.39, no.5 pp.528-543.; Wallerstein, N. (2006) 'What is the Evidence on Effectiveness of Empowerment to Improve Health?' *Health Evidence Network*, WHO, Europe. URL: http://www.euro.who.int/__data/assets/pdf_file/0010/74656/E88086.pdf.

⁴⁴ World Health Organisation (2018a).

The Health Promoting Schools framework recognises that health behaviours are not simply a matter of individual choice. Instead, it aims to improve health through a multi-faceted approach, which is supported by the development of vital personal and social skills. The WHO classification of life skills incorporates programmes that focus on decision making, problem solving, the development of self-awareness, self-esteem, self-efficacy, empathy, interpersonal skills, communication skills, critical thinking, creative thinking and coping with emotions.⁴⁵ These skills and attitudes are developed as part of an explicit curriculum alongside a supportive hidden curriculum, which includes the ethos and atmosphere of the school, its attitudes, expectations, and values. The Health Promoting Schools framework appears to offer an example of a strategy for promoting holistic positive youth development, with health promotion among its aims, while taking seriously considerations of agency. Despite challenges with delivering and evaluating the Health Promoting School framework,⁴⁶ there is now a consensus that the Health

⁴⁵ Lister-Sharp et al. (1999), p.6.

⁴⁶ Among the twelve criteria developed for schools working towards becoming Health Promoting Schools, the WHO primarily requires, 'Active promotion of the self-esteem of all pupils by demonstrating that everyone can make a contribution to the life of the school.' (Lister-Sharp (1999), p.7). This is alongside the provision of opportunities for healthy activities and healthy food choices, support networks, health advice and health knowledge, and the advancement of the health and well-being of staff and teachers. Schools need only focus on one of the twelve criteria in order to be recognised as a Health Promoting School. Given this, many schools that are not explicitly working towards recognition as a Health Promoting School may well count as one. This has made it difficult to identify which school ought to count as Health Promoting Schools. Alongside this, many schools do not move beyond a focus on personal skills and this has made it even more difficult to evaluate the effectiveness of the framework; Lynagh, M. et al. (1997) 'School health promotion programs over the past decade: A review of the smoking, alcohol and solar protection literature,' *Health Promotion International*. Vol.12, no.1, pp.43–60.; There have been difficulties in standardising and implementing this complex initiative. All the schools featured in an early review adopted different conceptions of the Health Promoting Schools framework, had various aims, and implemented these in distinctive ways. This, in addition to the looseness of the definition of what a Health Promoting School is, makes it exceedingly difficult to establish whether the framework is effective or not. Moving on from early difficulties in implementing the Health Promoting Schools model, steps have been taken to develop more coherent programmes for schools working within the Health Promoting Schools framework. There has been progress made in identifying the kinds of outputs that effective Health Promoting Schools should expect, and the kinds of long-term outcomes they might be able to achieve. For a

Promoting Schools framework can result in increased knowledge, positive changes to health behaviours in young people, and ‘can address many significant issues facing today’s children.’⁴⁷

7.2d Effective use of school and alternative approaches

This section looks at promising school-based and community-based strategies that support adolescents’ emerging abilities to form values and priorities, and judge, and act in accordance with, one’s own interests and priorities. I take a closer look at a school-based initiative that builds on the lessons learned from the Health Promoting Schools framework, and, given that there are reasons for being cautious about relying on schools as a site for successful intervention, I also consider examples of promising community-based strategies for supporting adolescent development, and an example of an intervention that attempted to combine school-based and community-based elements.

A school-based approach

There are examples of multi-dimensional school-based interventions that have targeted positive development during adolescence. This type of approach does not

thorough analysis of the evolving theory and practice of the Health Promoting Schools approach, see Clift, S. & Jensen, B.B. (eds.) (2005) *The Health Promoting School: International Advances in Theory, Evaluation and Practice*. Copenhagen: Danish University of Education Press.

⁴⁷ Macnab, A.J. et al. (2014) ‘Health promoting schools: consensus, strategies, and potential,’ *Health Education*, Vol. 114, no.3, pp.170-185.

operate across spheres, but rather uses various strategies within the school setting, for example, environmental changes, educational programmes, activities designed to encourage connectedness with others, and teaching skills for managing the complexities of near-adulthood. Consider, for example, the Gatehouse Project.⁴⁸ This was an Australian project that aimed to address the social context of school (security, communication and participation), and pupils' experiences of school, in order to improve students' sense of connection to their school, and in turn have a positive impact on their health and wellbeing. The Gatehouse Project did not have a standardised design, recognising that the aims of the projects would likely be reached in a variety of ways in different schools, within different communities. Instead, the project team worked with schools to adapt the key project intentions through a standardised design process. The design process included a) a survey of the school environment from the students' point of view, b) the creation of a school-based action team to manage the delivery of strategies and liaise with the project team and other professionals, and c) consultation with the Gatehouse Project team to steer the implementation of strategies. Although school-based, the project was designed to shift emphasis away from fragmented health-education programmes, or single-issue agenda, and toward a broader-based strategy, going beyond knowledge and skills-building, and encompassing a whole school approach. By listening to the students' own experiences of school life, each school developed targeted initiatives to improve the school-ethos, promote inclusion, and improve students' sense of connectedness or attachment to their school and the wider community.

⁴⁸ See, Patton, G. et al. (2003) 'Changing Schools, Changing Health? Design and implementation of the Gatehouse Project,' *Journal of Adolescent Health*. Vol.33, no.4, pp.231-239.

As the schools were able to address what they considered to be priority areas in relevant ways, the strategies that schools adopted varied from school to school. Some schools adopted mentoring and peer support systems, a pro-active stance on bullying, or reorganised classrooms to encourage collaborative engagement with peers. Strategies to increase participation and student involvement in decision-making included peer leadership strategies and student participation in rule-setting. Strategies to increase students' sense of being valued included new systems of reward and recognition in both academic and sporting achievements, increased opportunities for students to get involved in community projects, and displays and presentations of students' work to parents and the wider community. Schools were also able to utilise the existing curriculum to enhance behavioural, social and emotional competence and foster skills for critical and reflective thought. Study findings, across three waves of follow up, revealed a 3%-5% difference between intervention and control schools for any drinking, any and regular smoking, and friends' alcohol and tobacco use.⁴⁹

Another example of a project that aimed to combine efforts to support youth development is the Seattle Social Development Project.⁵⁰ This project used a school and family programme, and included teacher training in cooperative learning, and parent education and support. The project is a long-running longitudinal study that has followed 808 students, from 18 public elementary schools in high-crime areas of

⁴⁹ Bond, L. et al. (2004) 'The Gatehouse Project: can a multilevel school intervention affect emotional wellbeing and health-risk behaviours?' *Journal of Epidemiology and Community Health*. Vol.58, no.12, p.997 –1003.

⁵⁰ Hawkins, J.D. et al. (2005) 'Promoting positive adult functioning through social development intervention in childhood: long-term effects from the Seattle Social Development Project,' *Archives of Pediatrics and Adolescent Medicine Journal*. Vol.159, no.1, pp.25-31.

Seattle, since 1985.⁵¹ The project promoted social and emotional skill development from childhood and into adolescence by encouraging consistency in norms across different settings and contexts. This meant, for example, discouraging the use of alcohol and drugs. The project employed school-based strategies and community based-strategies, alongside parenting interventions designed to reduce conflict and promote stable and positive relationships in the home. School-based elements were employed to enhance participants' academic achievement, and (as in the Gatehouse Project above) develop students' attachment and sense of connectedness to school. Community-based elements of the project encouraged community efforts to improve public education and foster healthier neighbourhoods.

There are many evaluations of the project, focussing on various individual outcomes, including gang-membership, violence, and levels of sexually transmitted diseases.⁵² The project website reports 'direct effects of the intervention on childhood and adolescent problem behaviors, such as aggression, violence, drug use, delinquency, and school misbehavior in addition to risk and protective factors.'⁵³ Among other positive findings, one evaluation of the study reports '[b]road significant effects on functioning in school and work and on emotional and mental

⁵¹ Herrenkohl, T.I. et al. (2012) 'Risk versus Direct Protective Factors and Youth Violence: Seattle Social Development Project,' *American Journal of Preventive Medicine*. Vol.43, no.2, pp.S41-S56.; See also, Hawkins, J.D. et al. (1992) 'The Seattle Social Development Project: Effect of the first four years on protective and problem behaviors,' in McCord, J., Tremblay, R.E. (eds) *Preventing Antisocial Behavior: Interventions From Birth to Adolescence*. New York, New York: Guilford Press, pp.139-61; and, The Seattle Social Development Project website URL: <http://ssdp-tip.org/SSDP/index.html>.

⁵² Hill, K. et al. (2014) 'The Onset of STI Diagnosis through age 30: Results from the Seattle Social Development Intervention,' *Prevention Science*. Vol.15, no.1, pp.19-32.; Hill, K. et al. (1999) 'Childhood Risk Factors for Adolescent Gang-membership: results from the Seattle Social Development Project,' *Journal of research in crime and delinquency*. Vol.36, no.3, pp.300-322.

⁵³ School of Social Work, University of Washington & Social Development Research Group, 'The Seattle Social Development Project (SSDP).' URL: <http://www.ssdp-tip.org/SSDP/index.html>.

health,⁵⁴ describing it as an intervention that ‘strengthened teaching and parenting practices and taught children interpersonal skills during the elementary grades’ with ‘wide-ranging beneficial effects on functioning in early adulthood.’⁵⁵

These findings suggest that, despite the inherent difficulties in implementing and evaluating complex interventions, multi-level strategies that move away from health education may be effective in supporting better health in adolescence. It is also plausible that, since these kinds of interventions are likely to target risk-factors for other problem behaviours such as delinquency, there may be a wider-reaching impact for such interventions, at least while children are still in school. There is a further question whether positive effects persist when young people take steps later in their lives to be more independent across their lives and enter new unfamiliar spheres, some of which may be completely new to them, their parents, and even many members of their wider community, such as higher education or paid employment. It may be difficult to provide evidence of the impact of interventions into adolescents’ adult lives, but there are some reports of positive long-term effects from projects such as the Seattle Social Development Project. One paper states that 6 years after the intervention ended, effects included, ‘reductions in violent delinquency, heavy drinking, lifetime sexual intercourse, multiple sex partners, pregnancy or causing pregnancy, and school misbehaviour.’⁵⁶ It is not unreasonable

⁵⁴ Hawkins et al. (2005).

⁵⁵ Hawkins et al. (2005). See also, Kim, B.K.E. et al. (2016) ‘Examining Protective Factors Against Violence Among High-risk Youth: findings from the Seattle Social Development Project,’ *Journal of Criminal Justice*. Vol.45, pp.19-25.

⁵⁶ Hawkins, J.D. et al. (2001) ‘Long-Term Effects of the Seattle Social Development Intervention on School Bonding Trajectories.’ Vol.5, no.4, pp.225-36. p.225.

to suppose that skills and attitudes for managing the ups and downs of life could well have contributed to these effects.

Community-based initiatives

Taking into account people's abilities to manage their own lives and sense of being able to affect change is not new, at least not at a wider community level, for instance, strategies for community engagement.⁵⁷ Community engagement refers to 'community involvement in decision-making and in the design, governance and delivery of initiatives'.⁵⁸ There is evidence that community engagement strategies working with groups of adults have been successful in supporting agency, self-esteem, and health within communities. Take for example, 'time bank' projects,⁵⁹ such as the 'time2trade' project in Sandwell, Birmingham. Time banks are initiatives to share time and skills among participants by way of 'currency' exchange based on

⁵⁷ See for example, Cook D. (2002) 'Consultation for a change? Engaging users and communities in the policy process,' *Social Policy and Administration*. Vol.36, no.5, pp.516–531.; Clark, M.J. et al. (2003) 'Involving Communities in Community Assessment,' *Public Health Nursing*. Vol.20, no.6, pp.456-463.; Anderson, E. et al. (2006) 'Taking off the suit': engaging the community in primary health care decision-making,' *Health Expectations*. Vol.9, no.1, pp.70-80.; Department of Health (2006) *A Stronger Local Voice: A Framework for Creating a Stronger Local Voice in the Development of Health and Social Care Services*. London: Department of Health.; Department of Health (2006) *Our Health, Our Care, Our Say*. London: Department of Health.; Hogg, C.N.L. (2007) 'Patient and public involvement: what next for the NHS?' *Health Expectations*. Vol.10, pp.129-138.; Social Exclusion Unit (1999) 'Bringing People Together: A National Strategy for Neighbourhood Renewal,' HMSO, London.; Electoral Commission (2005) *Social Exclusion and Political Engagement. Research report*. London: The Electoral Commission.; Wallace, A. (2007) 'We have had nothing for so long that we don't know what to ask for': New Deal for Communities and the regeneration of socially excluded terrain,' *Social Policy and Society*. Vol.6, no.1, pp.1-12.; Commission on Social Determinants of Health (2008) *Closing the Gap in a Generation: Health Equity through Action on the Social Determinants of Health: Final report of the Commission on Social Determinants of Health*. Geneva: World Health Organisation.

⁵⁸ Attree, P. et al. (2011) 'The experience of community engagement for individuals: a rapid review of evidence,' *Health & social care in the community*. Vol.19, no.3, pp.250-260.; p.251.

⁵⁹ See, for example, Boyle, D. et al. (2006) 'Hidden work: Co-production by people outside paid employment,' *The New Economics Foundation and the Joseph Rowntree Foundation*, York. URL: <https://www.jrf.org.uk/sites/default/files/jrf/migrated/files/9781859354674.pdf>.

time, not money. Between 2002, when the 'time2trade' time bank was founded, and 2011, 34,100 hours had been traded.⁶⁰ A review of community engagement strategies, including the 'time2trade' project found that:

the majority of individuals who were actively involved... experienced positive benefits, in terms of physical and emotional health and well-being, self-confidence, self-esteem, social relationships and individual empowerment (defined as the feeling that they are being useful to others, feeling in control of events, being able to express ideas and having an awareness of individual rights).⁶¹

There are encouraging signs that adolescent health, and development more generally, may be improved by capacity-building, community-based interventions.⁶² Interventions of this kind do not target specific behaviours. Rather they use less traditional forums than schools for educating for skills and attitudes to support adolescent transitions. Such initiatives respond to the co-occurrence of problem behaviours in adolescents, including tobacco and alcohol use, sexually transmitted diseases, unwanted pregnancy, violence, school drop-out, mental-health disorders, and delinquency.⁶³ The factors that contribute to the risk of an individual developing these problem behaviours include: structural factors such as high unemployment, poor housing, unsafe communities; intermediate factors, for example family life, and

⁶⁰ Hine-Hughes, F., (2011). "Time2Trade" for the "time rich and cash poor" *Governance International*, Birmingham. URL: <http://www.govint.org/?id=473>.

⁶¹ Attree et al. (2011). It should be noted that not all participants experienced positive benefits, and in some cases community engagement 'may involve a process of negotiation between gains and losses and weighing the potential risks to well-being.' (p.257)

⁶² See, for instance, fn.71.

⁶³ Catalano et al. (2012).

peer influence; and, individual factors, which might be low self-esteem, or lack of self-efficacy.⁶⁴ An individual's risk for 'problem behaviours' – a term intended to cover behaviours that put a person, or others, in danger, or are likely to make a person's life go worse, for example anti-social behaviour, violence, dangerous driving, drug-taking, alcohol consumption, smoking, and sexual promiscuity – tends to increase during childhood and adolescence; after all, as children become more independent from parents they are not only more likely to be exposed to risk, but also feel more able to make judgements about being able to handle risk, due to physical and mental maturity. As the factors that reduce problem behaviours overlap with the factors that improve health, there has been a move to begin incorporating health promotion into the aims of preventative interventions targeted at adolescents at risk. Controlled trials have shown that preventative interventions 'can be efficacious and cost-effective at reducing adolescent problem behaviour and improving health.'⁶⁵

Positive youth development (PYD) is the term given to youth research and practice that focuses on young people's developmental potentials.⁶⁶ Though the positive youth development approach recognises that some young people do encounter problems, and that adolescence can be complicated, it focuses on the opportunities that this period of development offers, and the potential of youth.

⁶⁴ This understanding of how health fits within a web of factors for risk, poor outcomes, and problem behaviours that contribute to how well a person's life course goes reflects what Sheehan and Sheehan call 'the social reality of health'. See Sheehan, M., & Sheehan, P., (2002) 'Justice and the social reality of health: The case of Australia,' in Rhodes, R., Battin, M., & Silvers, A., (eds.) *Medicine and social justice: Essays on the distribution of health care*. New York, New York: Oxford University Press.; pp.169-182.

⁶⁵ Catalano et al. (2012), p.1654.

⁶⁶ Damon, W. (2004) 'What is positive youth development?' *Annals of the American Academy of Political and Social Science*. Vol.591, pp.13-24.; p.13.

Positive youth development models understand adolescents as embedded within their social and environmental context, take account of the complex web of social values and expectations, and consider an individual's access to opportunities and alternatives, recognising that adopting or rejecting particular life paths is not simply a matter of personal choice. The positive youth development approach develops what are known as the 'Five Cs': first, *Competence*, which describes an individual's positive perception of their own actions, and includes social competence, academic competence, cognitive competence, health competence and vocational competence; second, *Confidence*, which refers to an individual's sense of self-worth and self-efficacy; third, *Connection*, which describes the relationships that the individual has with her peers, family, and wider community; fourth, *Character*, which refers to the individual's values and their recognition and respect for other people's values and wider cultural norms; and lastly, *Caring*, which describes the development of a sense of empathy for others.⁶⁷ By building on these it is hoped that the young person will make positive contributions to self, their community, and wider society. PYD programmes work to improve young people's self-perceptions, and personal and social skills, in order to build resilience to risk, and offer them a sense that *they are able* to make positive changes to their lives (what I have previously referred to as a sense of empowerment or self-efficacy).⁶⁸

⁶⁷ Lerner, R. M. et al. (2005) 'Positive youth development, participation in community youth development programs, and community contributions of fifth grade adolescents: Findings from the first wave of The 4-H Study of Positive Youth Development,' *Journal of Early Adolescence*. Vol.25, no.1, pp.17-71.

⁶⁸ An example of a positive youth development approach is the 4-H Study. This longitudinal study collected data, through questionnaires, from over 4,500 adolescents across 34 states of America. Young people in the study were asked to voluntarily participate in 4-H clubs and 4-H after-school programmes, intended to promote positive youth development, and the 4-H youth were compared to youths who participated in other out of school programmes. The data gathered explored whether each adolescent could set positive goals, and take steps to achieve those goals, including

Despite having only preliminary indications of the effects of PYD programmes, and despite the challenges faced when attempting to replicate studies and identifying effective programme characteristics,⁶⁹ there is evidence that capacity-building strategies, such as PYD programmes, can have a positive effect on adolescents' lives. There are indications that they improve self-perceptions, boost self-esteem and self-efficacy, reduce problem behaviours, and develop capacity for more autonomous decision-making. It has been reported that PYD programmes, which address a range of supportive, protective, and risk, factors, could have a positive impact on multiple outcomes in a young person's life, given the commonality of those factors to multiple outcomes.⁷⁰ Young people who participated in the *Youth Action Health Board* programme, for instance, reported improved grades, improved motivation, an increased sense of being able to take responsibility for their individual health, improved confidence, increased self-esteem, a greater

compensating for any difficulties that could be barriers to her goals. In addition, data was collected about risk behaviour, as well mental health, and young people's projected contribution to their communities. Overall, 4-H participants showed higher scores of positive youth development and contribution, and lower levels of depression and risk behaviours. Lerner, R.M., Lerner, J.V. & Phelps, E. (2009) *Waves of the Future: The first five years of the 4H study of positive youth development*. pp.18-23. URL: <http://ase.tufts.edu/iaryd/documents/4HStudyWavesOfFuture.pdf>.

⁶⁹ There has been some encouraging impact of a positive youth development approach on specific adolescent health problems – for example smoking, sexual health, and diabetes. Lerner, R.M. et al. (2009) pp. 24-25 URL: <http://ase.tufts.edu/iaryd/documents/4HStudyWavesOfFuture.pdf>.; Atkiss, K. et al. (2011) 'Positive youth development: integration of the developmental assets theory and the socio-ecological model,' *American Journal of Health Education*. Vol.42, no.3, pp.171-180.; and Gavin, E.L. et al. (2010) 'A Review of Positive Youth Development Programs That Promote Adolescent Sexual and Reproductive Health,' *Journal of Adolescent Health*. Vol.46, no.3 pp.S75–S91.). A review of PYD programmes that promote adolescent sexual and reproductive health found the programmes under review to be promising (Gavin et al (2010)). Some programmes, however, were *not* successful, despite sharing characteristics with successful programmes. These findings are tentative and further work needs to be done to replicate results and increase confidence in the approach. As with any complex intervention, this presents many challenges, including disentangling the multiple factors that may contribute to the positive effect of these programmes

⁷⁰ Catalano, R.F. et al. (2002) 'Positive Youth Development in the United States: Research Findings on Evaluations of Positive Youth Development Programs,' *Prevention & Treatment*. Vol.5, no.1.; See also, Sawyer, et al. (2012) which states, 'Many interventions that prevent or reduce specific health-jeopardising behaviours also have a salutary effect on other behaviours by acting upon shared risk and protective factors.'

understanding of personal goals and life direction, and a belief in self-efficacy, among other positive outcomes.⁷¹

7.3 Supporting adolescent transitions: reflecting on the evidence

The different interventions and policies described in this chapter have aimed to offer adolescents support in developing skills and attitudes that will be useful across a range of spheres in their lives, and have done so by utilising institutions and settings within one sphere of activity. All children need support to be able to look after themselves as adults and take up the responsibilities of adulthood, but not all young people have the family relationships, and wider context that supports these developments. The sphere of education provides policy designers with access to a large number of adolescents that may be difficult to obtain through other spheres, such as the domestic sphere.

Reviews of adolescent health interventions often state that complex interventions that aim to change behaviour through multiple channels, maybe school-based, but involving families and the wider community, are more effective.⁷²

⁷¹ Atkiss (2011), pp.175-176. However, there is a general lack of evidence for the versatility or longevity of this effect and future research should be undertaken to measure the wider impact of PYD programmes on multiple outcomes.

⁷² There is evidence that multi-component interventions are more effective than interventions that focus specifically on education or environment (van Cauwenberghe et al. 2010, p.781) and that interventions that engaged the families of children and encouraged participation in behaviour change activities out of school and in their communities, as well as in school are more effective. See for example, van Cauwenberghe et al. (2010); Knai C., Pomerleau J., Lock K., McKee, M. (2006) 'Getting children to eat more fruit and vegetables: a systematic review,' *Preventative Medicine*. Vol.42, no.2, pp.85-95.; and, Blanchette, L. & Brug, J. (2005) 'Determinants of fruit and vegetable consumption among 6 – 12-year-old children and effective interventions to increase consumption,' *Journal of Human Nutrition and Dietetics*. Vol.18, no.6, pp.431-443.

This type of multi-faceted approach points towards the need for collaborative efforts by policy makers and local communities to tackle disadvantage, and support adolescent development, across the network of policy areas and actors that influence the lives of young people, including the educational sphere. An example of collaborative policy-making to support adolescent development is the Republic of Moldova's 'Healthy Generation Project'. This project responds to the rise in deaths from injuries and trauma, rates of sexually transmitted infections and HIV, early pregnancy, and mental health issues in young people aged 10-24. It is a multi-component response, of which healthcare provision is one element. The aim is to support healthy development during adolescence in order to prevent adolescents' experimentation with new behaviours from becoming too risky. This is achieved by providing 'youth-friendly' health services for adolescents, alongside school-based life-skills education programmes, with support from community stakeholders. This requires coordination between several sectors, such as health workers, social workers, teachers, and families. The project focuses on training individuals, such as nurses and peer educators to make the most of the school setting, and the wider community context, to help change unhealthy behaviours and protect young people from future risk factors. The thought is that increased health literacy, improved access to healthcare, and greater connectivity between the health sector, schools, and other organisations working with young people will support empowerment and help give young people more authority over their own lives.⁷³ It has realistic aims and appears to be attempting to employ existing frameworks to bring different actors

⁷³ See *Project "Healthy Generation" – Scaling up Youth-Friendly Health Services in Moldova*. URL: <https://www.eda.admin.ch/content/dam/countries/countries-content/moldova/en/Healthy-Generation-EN.pdf>.

together, including teenagers themselves. The project fosters 'bottom-up effort' and encourages self-motivated schools, youth workers, and health professionals to collaborate with one another to support adolescents in their local communities.⁷⁴

As well as an indication that multi-faceted approaches can have increased success, there are suggestions that those interventions and policies that have aimed at developing skills such as planning and communication skills, and attitudes such as self-confidence and self-efficacy, can lead to more positive transitions for adolescents most at risk. Studies have shown that including some kind of self-efficacy support, or self-esteem support element in an intervention can have a positive effect on intervention outcomes.⁷⁵ This success gives an indirect line of support for the claims made in earlier chapters about the importance of these agency-related skills and attitudes in development. Many of the interventions and policies I have looked at have had an explicit health behaviour focus and have therefore measured their success in terms of health outcomes. However, given earlier arguments that the kinds of competences and attitudes that many of these interventions and policies have focused on are central to autonomous agency, it is plausible that they could have a positive impact on adolescent transitions more broadly.

If there is a concern that the type of interventions that I have dealt with here target, in the main, the most disadvantaged children, this should not be seen as problem. It may not be methodologically sound to generalise from any success seen

⁷⁴ Carai, S., Bivol, S., Chandra-Mouli, V., (2015) 'Assessing youth-friendly-health-services and supporting planning in the Republic of Moldova,' *Reproductive health*, Vol.12, no.1, pp.98-109.

⁷⁵ See, for example, Lee, L. et al. (2012) 'The effect of an intervention combining self-efficacy theory and pedometers on promoting physical activity among adolescents,' *Journal of Clinical Nursing*. Vol.21, no.7-8, pp.914-922.; Dishman, R.K. et al. (2004). 'Self-efficacy partially mediates the effect of a school-based physical-activity intervention among adolescent girls,' *Preventive Medicine*. Vol.38, no.5, pp.628-636.

in lives of the most troubled adolescents to other, less worse off, young people. However, the aim of this chapter was to explore the role of the state in equalising the life chances of children, particularly in terms of the worst-off children's transitions into adulthood. That the focus should be on those adolescents most at risk of difficult or unsuccessful transitions is therefore pertinent. What I have presented here is indicative that there is potential for state policy, and interventions aimed at adolescents, to support adolescents in their transitions by enabling the kinds of skills and attitudes they will need in their early ventures into new spheres of life.

In Summary

In this chapter I have suggested that there is some evidence that capacity-building community interventions, and some school-based interventions with community links, can be effective in fostering positive youth development, and support factors protective against risk, and promote health, among other positive outcomes. I have suggested that strategies that aim to change adolescent behaviour require support of the skills and attitudes underpinning adolescents' emerging abilities to take responsibility for their own lives. Strategies that take agency seriously and focus on the developmental course of adolescence, rather than on making specific environmental changes or focussing on changing particular behaviours, can have a host of positive outcomes for young people, particularly those at risk. Equipping young people with the transferable skills they need to solve problems, make difficult

choices, and negotiate the challenging environments that impact on their lives now, could potentially leave them with long-lasting protective factors against future risk. As indicated, broad-based interventions that improve self-esteem or self-efficacy appear to have a positive effect on participants beyond health gains. Moreover, as argued, it makes good sense to aim for this, since adolescents, perhaps more than any other group in society, can expect considerable changes to occur in their lives and social contexts within a few years.

Conclusion

The purpose of the thesis was to map the complex landscape of adolescence, to make a start on developing a comprehensive and integrated account of the adolescent transition. Each chapter has focussed on a specific aspect or area of adolescence that matters to properly depict real-life adolescence.

The starting point for the framework that has been developed was the extant rights-based literature on the transition between childhood and adulthood. It has been argued that there are reasons to explore alternatives to rights-based approaches. There is more to the adolescent transition than a straightforward acquisition of rights and rights-based accounts do not take account of changes in duties or increased responsibilities, nor do they do not take into account the special contribution made by relational changes that occur during the adolescent transition.

We now have a clearer sense of the shape of the adolescent landscape. I have mapped this in terms on the spheres of activity that structure life in liberal societies. This socio-relational account is based on the sharing of powers and responsibilities between adolescents and others; both parents and other people, and institutions and organisations. The sharing of powers and responsibilities occurs throughout all stages of life, though this sharing is very minimal in early childhood, and takes a rather different form for competent adults than in adolescence, insofar as there are no parents or schools duty-bound to guide an adult. Adolescence is an interesting time because the sharing of powers and responsibilities facilitates a period of learning in preparation for adulthood, and this constitutes a handover of powers and responsibilities from parents to their now near-adult children. The sharing of powers

and responsibilities and the transfer of authority during adolescence is what I have called transitional paternalism.

The sphere-model describes how individuals *gradually* move into and through spheres of activity as they mature. The model is indicative that neither childhood nor adulthood are stable or entirely discrete conditions as some of the literature appears to suggest. The sharing of powers between adolescents and other parties means that adolescents have the opportunity to gradually gain valuable experience in new areas of life. The sharing of responsibilities means that this experience comes without having to be fully responsible for either the decisions adolescents make, or the consequences of their actions. The sphere-based gradualism that so well reflects the landscape of adolescence is not just apt to capture changes in personal relationships during adolescence, there is already a tacit recognition of the kinds of complexity, and the kinds of relational changes, that the sphere model articulates. To illustrate how the sphere-model applies in practice, we focussed more closely on the medical sphere, where a distinctive sharing of powers and responsibilities is in play. Transitional paternalism is able to explain and justify the apparently odd asymmetry between adolescent consent and refusal, whilst preserving the ideal of shared decision-making.

The account that I have developed captures the variation in adolescent transitions and reflects the complexity of real-life society. Many adolescents will have to prematurely bear responsibilities, which can be burdensome or restrict their options, for example: young carers, children who have been in care, young people who have prematurely left the parental home, dropped out of school, or ended up being involved in criminal gang culture. Other adolescents have relationships that

leave them without the right kind of experiences to help them learn about the adult world. These relationships could be described as authoritarian (in the case of parents, at least) as they restrict the freedoms of adolescents in order to retain powers. Powers remain with parents or others for longer than necessary, and neither may responsibilities be shared, leading to limited opportunities for adolescents to gain experience of new spheres of activity or practice bearing the consequences of their actions. Adolescents in this position may be kept 'as children' for longer and be left unprepared for adulthood. It has been argued that adolescents should be treated in such a way that they are afforded experience and given opportunities that afford them familiarity with new spheres of life, so that they can learn about bearing responsibilities, and practice using powers in adulthood. The arguments I have put forward suggest that we can draw upon the role of *consultant* to give us an idea of what a "good" parent-child relationship in (later) adolescence should be.

All children need to eventually be able to negotiate the complexities of adult life. However, the relationships that adolescents have turn out to be fundamentally important to the adolescent transition. When relationships, institutions and environments enable adolescents to have the right kind of experience without too much risk, they are given what they need to learn to manage the rights and responsibilities that come with adulthood. When adolescents do not have relationships that support adequate sharing of powers and responsibilities, they end up being forced to make decisions for themselves without the right kind of experience and without familiarity with the wider social context of those choices, and in the face of serious or potentially disastrous consequences that they are ill-equipped to appreciate, never mind deal with. The state has a role to play in

supporting transitions into adulthood when the relationships and wider context of adolescents' lives fail to give them adequate opportunities to develop the competences they will need in later life. These include, but are not limited to, practical skills, such as planning and communication skills, and attitudes, such as self-efficacy, that enable a person to make and enact plans.

This thesis has set out to address a range of normative philosophical problems and concerns, but there remain unanswered questions. There are three areas of questioning that remain unaddressed and which would benefit from further research.

First, there are philosophical questions about adolescence which we identified in the very first chapter of the thesis, and which I put to one side from the very beginning. There is a classificatory question about what falls under the concept of 'adolescent'. However, the concern of this thesis has been about giving a better account of the normative aspects of that period of transition, rather than precisely identifying the exact boundaries of that period of transition.

Second, there are philosophical questions that further 'fill out' the account that I have presented, and to which I have paid less attention to during my argument and analysis. These questions might include the question of adolescent obligations towards parents and others, and the way that adolescents ought to act as part of the transitional paternalistic framework. I have looked at the role of parents in facilitating development and the balancing of duties towards adolescents that results. I have said less about the obligations that maturation puts upon adolescents themselves, within their relationships, but have been concerned with frameworks that enable adolescents to learn what their emerging responsibilities consist in. It

may be reasonable to assume that adolescents have certain kinds of prudential obligations to communicate effectively with parents to ensure smooth transitions. These obligations would be in addition to the sphere-based responsibilities that adolescents acquire as they mature. Other questions that would help to fill out the account presented in this thesis would focus on other spheres of activity. I have said more about some spheres than others and adding further analysis about what happens in under-examined spheres and how they fit together will improve the map of adolescence further.

Finally, there are applied philosophical questions that come out of my account as a whole. First, questions about the application of the sphere-model and transitional paternalism, perhaps in relation to criminal justice, medical ethics, and the ethics of sexual consent. Second, not only are there further topics *within* the philosophy of adolescence, there are applications of the sphere-based model to areas of life other than adolescence, for example, old age and end of life care. I have argued that, as children mature, the range of spheres and the scope of their activity within them increases. The sharing of powers and responsibilities facilitates this opening up of adult life. It is plausible to think that towards the end of life, spheres begin to close off again and, as a person is less able to manage powers and responsibilities alone, they come to share these with others. However, the justification for this kind of sharing is unlikely to be the same as in the adolescent case given the many significant disanalogies between the entry into adult life and the path from it, and it would be interesting to dedicate further research to this kind of analysis.

The thesis opened by outlining the complexity of real-life adolescence and highlighted that, though a start has been made by existing literature, the depiction of adolescence within philosophy is incomplete, fairly limited in its scope and is not entirely unproblematic. I have started the process of developing a more adequate multi-sphere account, addressing some of the problems and puzzles that adolescence presents. The gradualist sphere-model of development, that I have developed and applied to a limited range of sub-topics, provides a novel framework that can be used to do further work in the philosophy of adolescence.

Bibliography

- Achat H., Kawachi I., Levine S., Berkey, C., Coakley, E. & Colditz, G. (1998) 'Social networks, stress and health-related quality of life,' *Quality of Life Research*. Vol.7, no.8, pp.735–750.
- Alcott, L.M. (1946[1868-9]) *Little women*. Boston: Little, Brown & Company.
- Anderson, E. (1990) 'The Ethical Limitations of the Market,' *Economics and Philosophy*. Vol.6, no.2, pp.179-205.
- Anderson, E. (1993) *Value in Ethics and Economics*. Cambridge, Mass.: Harvard Press.
- Anderson, E. (2002) 'Should feminists reject rational choice theory?' in Antony, L.M. and Witt, C. (eds.) *A mind of one's own: Feminist essays on reason and objectivity*. London: Routledge.
- Anderson, E. (2015) 'Equality and Freedom in the Workplace: Recovering Republican Insights,' *Social Philosophy and Policy*. Vol.31, no.2, pp.48-69.
- Anderson E., Shepherd M. & Salisbury C. (2006) 'Taking off the suit': engaging the community in primary health care decision-making,' *Health Expectations*. Vol.9, no.1, pp.70-80.
- Archard, D. (1993) *Children: rights and childhood*. London: Routledge.
- Archard, D. (2003) *Children, Family and the State*. Aldershot: Ashgate.
- Archard, D. (2006) 'The Moral and Political Status of Children,' *Public Policy Research*. Vol.13, no.1, pp.6-12.
- See Archard, D. (2009) 'Applying Philosophy: A Response to O'Neill,' *Journal of Applied Philosophy*. Vol.26, no.3, pp.238-244
- Archard, D. (2011) 'The Obligations and Responsibilities of Parenthood,' in Archard, D. and Benatar, D. (eds.) *Procreation and Parenthood: the ethics of Bearing and Rearing Children*. Oxford: Clarendon Press.
- Archard, D. (2014) 'Children, Adults, Autonomy and Well-being' in Alexander Bagattini, Colin Macleod (eds) *The Nature of Children's Well-being: Theory and Practice*.

- Archard, D. (2017), 'The Methodology of Applied Philosophy' in Lippert-Rasmussen, K., Brownlee, K. & Coady, D. (eds.) *A Companion to Applied Philosophy*. Chichester, UK: John Wiley & Sons Ltd., pp.18-33.
- Archard, D. & Macleod, C.M. (2002) *The Moral and Political Status of Children*. Oxford: Oxford University Press.
- Archard, D. & Skivenes, M. (2009) 'Balancing a Child's Best Interests and a Child's Views,' *International Journal of Children's Rights*. Vol.17, pp.1-21.
- Arneil (2002) 'Becoming versus Being: A Critical Analysis of the Child in Liberal Theory', in *The Moral and Political Status of Children: New Essays*, D. Archard and C. Macleod (eds.), Oxford: Oxford University Press.
- Atkiss, K., Moyer, M., Desai, M. & Roland, M. (2011) 'Positive youth development: integration of the developmental assets theory and the socio-ecological model,' *American Journal of Health Education*. Vol.42, no.3, pp.171-180.
- Attree, P., French, B., Milton, B., Povall, S., Whitehead, M., & Popay, J. (2011) 'The experience of community engagement for individuals: a rapid review of evidence,' *Health & social care in the community*. Vol.19, no.3, pp.250-260.
- Baier, A. (1985) 'Cartesian Persons,' in *Postures of the Mind: Essays on Mind and Morals*. Minneapolis: University of Minnesota Press.
- Bakan, J. (2011) *Childhood Under Siege: How big business ruthlessly targets children*. London: The Bodley Head.
- Ben-Porath, S. (2003) 'Autonomy and Vulnerability: On just relations between adults and children,' *Journal of Philosophy of Education*. Vol.37, no.1, pp.127-145.
- Benson, P. (1991) 'Autonomy and Oppressive Socialization,' *Social Theory and Practice*. Vol.17, No.3, pp.385-408.
- Benson, P. (2005) 'Feminist intuitions and the normative substance of autonomy,' in Taylor, J. (ed.) *Personal autonomy: New essays on personal autonomy and its role in contemporary moral philosophy*. Cambridge: Cambridge University Press.
- Berkman, L.F. & Glass T.(2000) 'Social integration, social networks, social support, and health,' In: Berkman, L.F. & Kawachi, I. (Eds) *Social epidemiology*. New York: Oxford University Press.

- Blacksher, E. (2002) 'On Being Poor and Feeling Poor: low socioeconomic status and the moral self,' *Theoretical Medicine and Bioethics*. Vol.23, no.6, pp.455-70.
- Blanchette, L. & Brug, J. (2005) 'Determinants of fruit and vegetable consumption among 6 – 12-year-old children and effective interventions to increase consumption,' *Journal of Human Nutrition and Dietetics*. Vol.18, no.6, pp.431-443.
- Blustein, J. (1982) *Parents and Children: The Ethics of the Family*. Oxford: Oxford University Press.
- Blustein, J. (1985) 'Adolescence and Criminal Responsibility,' *International Journal of Applied Philosophy*. Vol.2, no.4, pp1-17.
- Bolam (2004) and 'Health inequalities: a toolkit to support local conversations,' National Conversation on Health Inequalities: Report of event held on 25 June 2014, Mary Ward House, Tavistock Place, London URL: https://www.gov.uk/government/uploads/system/uploads/attachment_data/file/356982/National_Conversations_Report_19_Sept.pdf.
- Bond, L., Patton, G., Glover, S., Carlin, J.B., Butler, H., Thomas, L. & Bowes, G., (2004) 'The Gatehouse Project: can a multilevel school intervention affect emotional wellbeing and health-risk behaviours?' *Journal of Epidemiology and Community Health*. Vol.58, no.12, p.997 –1003.
- Boyle, D., Clark, S. & Burns, S. (2006) 'Hidden work: Co-production by people outside paid employment,' *The New Economics Foundation and the Joseph Rowntree Foundation*, York. URL: <https://www.jrf.org.uk/sites/default/files/jrf/migrated/files/9781859354674.pdf>.
- Brake, E. (2011) 'A Voluntarist Account of Parental Role Obligations' in Archard, D. and Benatar, D. (eds.) *Procreation and Parenthood: the ethics of Bearing and Rearing Children*. Oxford: Clarendon Press.
- Brennan, S. (2002) 'Children's Choices or Children's Interests: which do their rights protect?' in Archard, D. & Macleod, C. (eds.) *The Moral and Political status of Children*. Oxford: Oxford University Press.
- Brennan, S. & Epp, J. (2015) 'Children's Rights, Well Being, and Sexual Agency,' in Bagattini, A. & MacLeod, C. (eds.) *The Wellbeing of Children in Theory and Practice*. pp.227-246.
- Brennan, S. & Noggle, R. (1997) 'The moral status of children: Children's rights, parents' rights, and family justice,' *Social Theory and Practice*. Vol.23, no.1, pp.1-26.

- Brighouse, H. (2002) 'What Rights (if any) do Children Have?' in *The Moral and Political Status of Children: New Essays*, D. Archard and C. Macleod (eds.), Oxford: Oxford University Press.
- Brighouse, H. (2003) 'How Should Children be Heard?' *Arizona Law Review*. Vol.45, pp.691-711.
- Brooks-Gunn, J. & Warren, M.P. (1989) 'Biological and social contributions to negative affect in young adolescent girls,' *Child Development*. Vol.60, pp.40–55.
- Bynner, J., Elias, P., McKnight, A., Pan, H., & Pierre, G. (2002) *Young people's changing routes to independence*. York, UK: Joseph Rowntree Foundation.
- Cale, G. S. (1999) 'Risk-Related Standards of Competence: Continuing the Debate over Risk-related Standards of Competence,' *Bioethics*. Vol.13, no.2, pp.131-148.
- Campbell, A.T. (2005) 'Adolescent Decisional Autonomy in Research: Issues in Translating Research into Policy,' *The American Journal of Bioethics*. Vol.5, no.5, pp.78-80.
- Campbell, T. (1992) 'The Rights of the Minor: As person, as child, as juvenile, as future adult,' *International Journal of Law and the Family*. Vol.6, no.1, pp.1-23.
- Campbell, T. (2004) 'Series Preface,' in Freeman, M. (ed.) *Children's Rights (Vol.1)*. Aldershot: Ashgate.
- Carai, S., Bivol, S. & Chandra-Mouli, V. (2015) 'Assessing youth-friendly-health-services and supporting planning in the Republic of Moldova,' *Reproductive health*, Vol.12, no.1, pp.98-109.
- Carpenter, B., O'Brien, E., Hayes, S. & Death, J. (2014) 'Harm, Responsibility, Age, and Consent,' *New Criminal Law Review*. Vol.17, no.1, pp.23-54.
- Catalano, R.F., Berglund, M., Ryan, J., Lonczak, H., Hawkins, J., & Seligman & Martin E. P. (2002) 'Positive Youth Development in the United States: Research Findings on Evaluations of Positive Youth Development Programs,' *Prevention & Treatment*. Vol.5, no.1.
- Catalano, R.F., Fagan, A.A., Gavin, L.E., Greenberg, M.T., Irwin Jr., C.E., Ross, D.A. & Shek, D.T.L., (2012) 'Worldwide Application of Prevention Science in Adolescent Health,' *The Lancet*. Vol.379, no.9826, pp.16533-1664.
- van Cauwenberghe, E.V., Maes, L., Spittaels, H., van Lenthe, F.J., Brug, J., Oppert, JM. & De Bourdeaudhuij, I. (2010) 'Systematic Review: Effectiveness of school-based interventions in Europe to promote healthy nutrition in children and adolescents: systematic review of published and 'grey' literature,' *The British Journal of Nutrition*. Vol.103, no.6, pp.781-797.

- Centre for Diet and Activity Research (CEDAR) 'Food, Income and Education: Who eats more of what?'
 URL: <http://www.cedar.iph.cam.ac.uk/resources/evidence/food-income-education-graphic/>.
- Change4Life website URL: https://www.nhs.uk/change4life_
- Chbosky, S. (2012) *The Perks of Being a Wallflower*. London: Simon & Schuster.
- Christman, J.P. (ed.) (1989) *The Inner Citadel: essays on individual autonomy*. New York: Oxford University Press.
- Christman, J.P. (1991) 'Autonomy and Personal History,' *Canadian Journal of Philosophy*. Vol.21, no.1, pp.1–24.
- Clark, M.J., Cary, S., Diemert, G., Ceballos, R., Sifuentes, M., Atteberry, I., Vue, F. & Trieu, S. (2003) 'Involving Communities in Community Assessment,' *Public Health Nursing*. Vol.20, no.6, pp.456-463.
- Clift, S. & Jensen, B.B. (eds.) (2005) *The Health Promoting School: International Advances in Theory, Evaluation and Practice*. Copenhagen: Danish University of Education Press.
- Code, L. (1991) 'Second Persons' in *What Can She Know? Feminist Theory and the Construction of Knowledge*. Ithaca, N.Y.: Cornell University Press.
- Cohen, H. (1980) *Equal Rights for Children*. Totowa, NJ: Littlefield, Adams, and Co.
- Cohen, S. (2004) 'Social relationships and health,' *American Psychologist*. Vol.59, no.8, pp.676–694.
- Cohen, S., Gottlieb, B. & Underwood, L. (2000) 'Social relationships and health.' In: Cohen, S., Underwood, L. & B. Gottlieb (Eds) *Measuring and Intervening in Social Support*. New York: Oxford University Press.
- Coleman, J.C. (2011) *The Nature of Adolescence (Fourth ed.)*. New York: Routledge.
- Combi, C. (2015) *Generation Z: Their voices, their lives*. London: Windmill books.
- Commission of the European Communities (2009) *Solidarity in Health: Reducing health inequalities in the EU*, Brussels: European Commission, URL:
http://ec.europa.eu/health/ph_determinants/socio_economics/documents/com2009_en.pdf
 ÷
- Commission on Social Determinants of Health (2008) *Closing the Gap in a Generation: Health Equity through Action on the Social Determinants of Health: Final report of the Commission on Social Determinants of Health*. Geneva: World Health Organisation.

- Cook D. (2002) 'Consultation for a change? Engaging users and communities in the policy process,' *Social Policy and Administration*. Vol.36, no.5, pp.516–531.
- Crocker, L. (1979) 'Meddling with the Sexual Orientation of Children,' in O'Neill, O & Ruddick, W. (eds.) *Having Children: Philosophical and legal reflections on parenthood*. New York: Oxford University Press.
- Culver, C.M. & Gert, B. (1990) 'The Inadequacy of Incompetence,' *The Milbank Quarterly*. Vol.68, no.4, pp.619-643.
- Cuypers, S. E., & Haji, I. (2007) 'Authentic education and moral responsibility,' *Journal of applied philosophy*. Vol.24, no.1, pp78-94.
- Dahl, R. E. (2004) 'Adolescent brain development: a period of vulnerabilities and opportunities,' Keynote address. *Annals of the New York Academy of Sciences*. Vol.1021, no.1, pp.1-22.
- Damon, W. (2004) 'What is positive youth development?' *Annals of the American Academy of Political and Social Science*. Vol.591, pp.13-24.
- DeMarco, J.P. (2002) 'Competence and Paternalism,' *Bioethics*. Vol.16, no.3, pp.231-245.
- Department of Constitutional Affairs (2007) *Mental Capacity Act 2005: Code of Practice*. London: TSO.
- Department of Health (2004) *Choosing Health: making healthier choices easier* [Public Health White Paper]. London: Department of Health.
- Department of Health (2006) *A Stronger Local Voice: A Framework for Creating a Stronger Local Voice in the Development of Health and Social Care Services*. London: Department of Health.
- Department of Health (2006) *Our Health, Our Care, Our Say*. London: Department of Health.
- Difonzo, J.H. (2001) 'Parental Responsibility for Juvenile Crime,' *Oregon Law Review*. Vol.80, no.1. pp.1-108.
- Dishman, R.K., Motl, R.W., Saunders, R., Felton, G., Ward, D.S., Dowda, M. & Pate, R.R. (2004). 'Self-efficacy partially mediates the effect of a school-based physical-activity intervention among adolescent girls,' *Preventive Medicine*. Vol.38, no.5, pp.628-636.
- Dworkin, G. (1988) *The Theory and Practice of Autonomy*. Cambridge: Cambridge University Press.
- Electoral Commission (2005) *Social Exclusion and Political Engagement. Research report*. London: The Electoral Commission.

- Elliot, C. (2011) 'Criminal Responsibility and Children: A new defence required to acknowledge the absence of capacity and choice,' *The Journal of Criminal Law*. Vol.75, no.4, pp.289-308.
- European Network of Ombudspersons for Children (ENOC) (2003) 'Statement on Juvenile Justice: Europe's Children's Champions challenge governments to respect young offender's rights,' *ENOC Secretariat*. URL: <http://enoc.eu/wp-content/uploads/2015/01/ENOC-2003-Statement-on-Juvenile-Justice-.pdf>.
- Faber, A. & Mazlish, E. (2006) *How to talk so teens will listen and listen so teens will talk*. London: Piccadilly Press.
- Farson, R. (1974) *Birthrights*. London: Collier Macmillan.
- Farson, R. (1979) 'The Children's Rights Movement,' in Empey, L.T. (ed.) *The Future of Childhood and Juvenile Justice*. Charlottesville: University Press of Virginia.
- Feinberg, J. (1980) 'A Child's Right to an Open Future,' in *Whose Child? Parental Rights, Parental Authority and State Power*, W. Aiken and H. LaFollette, H., Totowa, NJ: Littlefield, Adams, and Co. 124–153.
- Frank, A. (2007 [1977]) 'Saturday, 30 January 1943,' in *The Diary of a Young Girl: the definitive edition*. (Edited by Frank, O.H. and Pressler, M., translated by Massotty, S.). London: Penguin.
- Frankfurt, H. (1971) 'Freedom of the Will and the Concept of a Person,' *The Journal of Philosophy*. Vol.68, No.1, pp.5-20.
- Freeman, M. (1997) *The Moral Status of Children: Essays on the Rights of the Child*. The Hague: Kluwer Law International.
- Freeman, M. (2004) 'Introduction,' in Freeman, M. (ed.) *Children's Rights (Vol.1)*. Aldershot: Ashgate.
- Fried, C.S. (2001) 'Criminal Decision Making: The development of adolescent judgment, criminal responsibility, and culpability,' *Law and Human Behavior*. Vol.25, no.1, pp.45-61.
- Friedman, M. (2000) 'Feminism in Ethics: Conceptions of Autonomy,' in Fricker, M. & Hornsby, J. (eds.) (2000) *The Cambridge Companion to Feminism in Philosophy*. Cambridge: Cambridge University Press.
- Frith, L. (2012) 'Symbiotic empirical ethics: a Practical Methodology,' *Bioethics*. Vol.26, no.4, pp.198-206.

- Gavin, E.L., Catalano, R.F., David-Ferdon, C., Gloppen, K.M. & Markham, C.M. (2010) 'A Review of Positive Youth Development Programs That Promote Adolescent Sexual and Reproductive Health,' *Journal of Adolescent Health*. Vol.46, no.3, pp.575–591.
- Gillies, P. (1998) 'Effectiveness of alliances and partnerships for health promotion,' *Health Promotion International*. Vol.13, no.2, pp.99-120.
- Goodin, R.E., & Gibson, D. (1997) 'Rights, young and old,' *Oxford J. Legal Stud*. Vol.17, no.2, pp.185-203.
- Gore, F.M., Bloem, P.J., Patton, G.C., Ferguson, J., Joseph, V., Coffey, C., Sawyer, S.M. & Mathers, C.D. (2011) 'Global burden of disease in young people aged 10–24 years: a systematic analysis,' *Lancet*. Vol.337, no.9783, pp.2093-2102.
- Gottlieb, G. (1976) 'The roles of experience in the development of behavior and the nervous system,' in Gottlieb, G. (ed.) *Neural and behavioral specificity: studies on the development of behavior and the nervous system*. New York: Academic Press.
- Griffin, J. (2002) 'Do Children Have Rights?' in *The Moral and Political Status of Children: New Essays*. D. Archard and C. Macleod (eds.). Oxford: Oxford University Press.
- Gustaffson, U. & Driver, S. (2005) 'Parents, power and public participation: Sure Start, an experiment in New Labour governance,' *Social Policy and Administration*. Vol.39, no.5, pp.528–543.
- Gwozdz, W., Sousa-Poza, A. Reisch, L. A., Bammann, K., Eiben, G., Kourides, Y., Kovacs, E., Lauria, F., Konstabel, K., Santaliestra-Pasias, A. M., Vyncke, K. & Pigeot, I. (2015) 'Peer effects on obesity in a sample of European children,' *Economics & Human Biology*. Vol.18, 139-152.
- Hall, G.S. (1904) *Adolescence: Its Psychology and Its Relations to Physiology, Anthropology, Sociology, Sex, Crime, Religion and Education (Vol. II)*. New York: D. Appleton.
- Harris, J. (2003) 'Consent and end of life decisions,' *Journal of medical ethics*. Vol.29, no.1, pp.10-15.
- Hart, H.L.A. (1973) 'Bentham on Legal Rights', in *Oxford Essays in Jurisprudence*, 2nd series, A. W. Simpson (ed.) Oxford: Clarendon Press.
- Hartman, R.G. (2000) 'Adolescent autonomy: Clarifying an ageless conundrum,' *Hastings Law Journal*. Vol.51, no.6, pp.1265-1362.
- Hartman, R.G. (2002) 'Coming of Age: Devising Legislation for Adolescent Medical Decision-Making,' *American Journal of Law and Medicine*. Vol.28, pp.409-53.

- Harvey, M.T. (2003) 'Adolescent Competency and the Refusal of Medical Treatment,' *Health Matrix*. Vol.13, pp.297-323.
- Hawkins, J.D., Catalano, R., Morrison, D., O'Donnell, J., Abbott, R. & Day, L., (1992) 'The Seattle Social Development Project: Effect of the first four years on protective and problem behaviors,' in McCord, J., Tremblay, R.E. (eds) *Preventing Antisocial Behavior: Interventions From Birth to Adolescence*. New York, New York: Guilford Press.
- Hawkins, J.D., Guo, J., Hill, K.G., Battin-Pearson, S. & Abbott, R.D. (2001) 'Long-Term Effects of the Seattle Social Development Intervention on School Bonding Trajectories.' Vol.5, no.4, pp.225-36. p.225.
- Hawkins, J.D., Kosterman, R., Catalano, R.F., Hill, K.G. & Abbott, R.D. (2005) 'Promoting positive adult functioning through social development intervention in childhood: long-term effects from the Seattle Social Development Project,' *Archives of Pediatrics and Adolescent Medicine Journal*. Vol.159, no.1, pp.25-31.
- Hay, M.E. (2009) 'Incremental Independence: Conforming the law to the process of adolescence,' *Wm. & Mary J. Women & L*. Vol.15, pp.663-684.
- Hebestreit, A., Intemann, T., Siani, A., de Henauw, S., Eiben, G., Kourides, Y.A., Kovacs, E., Moreno, L.A., Veidebaum, T., Krogh, V., Pala, V., Bogl, L.H., Hunsberger, M., Börnhorst, C. & Pigeot, I. (2017) 'Dietary patterns of European children and their parents in association with home food environment: results from the I.Family Study,' *Nutrients*. Vol. 9, no. 2, pp.126-143.
- Henderson, S., Holland, J., McGrellis, S., Sharpe, S. & Thomson, R. (2009) *Inventing Adulthood: a biographical approach to youth transitions*. London: Sage.
- Herrenkohl, T.I., Lee, J. & Hawkins, D.J., (2012) 'Risk versus Direct Protective Factors and Youth Violence: Seattle Social Development Project,' *American Journal of Preventive Medicine*. Vol.43, no.2, pp.S41-S56.
- Hill, B.J. (2012) 'Medical Decision Making by and on Behalf of Adolescents: Reconsidering first principles,' *Journal of Health Care Law and Policy*. Vol.15, pp.37-73.
- Hill, K., Bailey, J., Hawkins, J., Catalano, R., Kosterman, R., Oesterle, S. & Abbott, R., (2014) 'The Onset of STI Diagnosis through age 30: Results from the Seattle Social Development Intervention,' *Prevention Science*. Vol.15, no.1, pp.19-32.

- Hill, K., Howell, J., Hawkins, J. & Battin-Pearson, S., (1999) 'Childhood Risk Factors for Adolescent Gang-membership: results from the Seattle Social Development Project,' *Journal of research in crime and delinquency*. Vol.36, no.3, pp.300-322.
- Hine-Hughes, F. (2011). "Time2Trade" for the "time rich and cash poor" *Governance International*, Birmingham. URL: <http://www.govint.org/?id=473>.
- Hobbes, T.; C.B. Macpherson (ed.) (1968 [1651]) *Leviathan*. London: Pelican.
- Hobbes, T.; Tuck, R. & Silverthorne, M. (eds. and trans.) (1998) *On the Citizen*. Cambridge: Cambridge University Press.
- Hoekema, D. (1990) 'Trust and Punishment in the Family', in Moffett, R.C L., Grcic, J. & Bayles, M. D. (eds.) *Perspectives on the Family*. Lewiston, NY: Mellen Press.
- Hogg, C.N.L. (2007) 'Patient and public involvement: what next for the NHS?' *Health Expectations*. Vol.10, pp.129-138.
- Holt, J.C. (1975) *Escape from Childhood: The Needs and Rights of Children*. Harmondsworth: Penguin.
- Hunt, E. (2017, May 30) 'Teenagers Sleep Quality and Mental Health at Risk Over Late Night Mobile Phone Use,' *The Guardian*.
<https://www.theguardian.com/lifeandstyle/2017/may/30/teenagers-sleep-quality-and-mental-health-at-risk-over-late-night-mobile-phone-use>.
- Jessor, R., Van Den Bos, J., Vanderryn, J., Costa, F.M. & Turbin, M.S. (1995) 'Protective Factors in Adolescent Problem Behaviour: moderator effects and developmental change,' *Developmental Psychology*. Vol.31, no.6, pp.923-33.
- Johnson, D.W. & Johnson, R.T. (2004) 'Peer influences,' in W. Craighead, W. & Nemeroff, C. (Eds.), *The Concise Corsini Encyclopedia of Psychology and Behavioral Science*. Hoboken, NJ: Wiley.
- Jones, G. (2002) *The Youth Divide: Diverging paths to adulthood*. York, UK: The Joseph Rowntree Foundation.
- Jones, G. (2009) *Youth*. Cambridge: Polity Press.
- Jones, G., O'Sullivan, A. & Rouse, J. (2004) "'Because it's Worth it?": Education beliefs among Young People and Their Parents in the United Kingdom', *Youth & Society*. Vol.36, no.2, pp.203-226.
- Kagan, S. (1998) *Normative Ethics*. Boulder, CO: Westview.

- Kelder, S.H., Perry, C.L., Klepp, K.I. & Lytle, L.L. (1994) 'Longitudinal tracking of adolescent smoking, physical activity, and food choice behaviors,' *American Journal of Public Health*. Vol.84, no.7, pp.1121–1126.
- Kerr, M. & Stattin, H. (2000) 'What parents know, how they know it, and several forms of adolescent adjustment: further support for a reinterpretation of monitoring,' *Developmental psychology*. Vol.36, no.3, pp.366-380.
- Kim, B.K.E., Gilman, A.B., Hill, K.G. & Hawkins, J.D. (2016) 'Examining Protective Factors Against Violence Among High-risk Youth: findings from the Seattle Social Development Project,' *Journal of Criminal Justice*. Vol.45, pp.19-25.
- Knai C., Pomerleau J., Lock K. & McKee, M. (2006) 'Getting children to eat more fruit and vegetables: a systematic review,' *Preventative Medicine*. Vol.42, no.2, pp.85-95.
- Kramers-Olen, A.L. (2015) 'Neuroscience, moral development, criminal capacity, and the Child Justice Act: Justice or injustice?' *South African Journal of Psychology*. Vol.45. no.4, pp.466-479.
- Laaksonen, M., Talala, K., Martelin, T., Rahkonen, O., Roos, E., Helakorpi, S., Laatikainen, T. & Prattala, R. (2008) 'Health behaviours as explanations for educational level differences in cardiovascular and all-cause mortality: a follow up of 60,000 men and women over 23 years.' *Eur J Public Health*. Vol. 18, no.1, pp.38-43.
- LaFollette, H. (1999) 'Circumscribed autonomy: Children, care, and custody,' In Narayan, U. & Bartkowiak, J.J. (Eds.) *Having and raising children: Unconventional families, hard choices, and the social good*. University Park, PA: Pennsylvania State University Press.
- Lawlor, R. (2016) 'Ambiguities and Asymmetries in Consent and Refusal: Reply to Manson,' *Bioethics*. Vol.30, no.5, pp.353-357.
- Lee, L., Kuo, Y., Fanaw, D., Perng, S. & Juang, I. (2012) 'The effect of an intervention combining self-efficacy theory and pedometers on promoting physical activity among adolescents,' *Journal of Clinical Nursing*. Vol.21, no.7-8, pp.914-922.
- Lerner, R.M. (1986) *Concepts and theories of human development*. (2nd edn.) New York: Random House.
- Lerner, R.M. (1998) 'Adolescent Development: Challenges and opportunities for research, programs and policies,' *Annu. Rev. Psychol*. Vol.49, no.1, pp.413-46.

- Lerner, R. M., Lerner, J. V., Almerigi, J., Theokas, C., Phelps, E., Gestsdóttir, S., Naudeau, S., Jelic'ic', H., Alberts, A. E., Ma, L., Smith, L. M., Bobek, D. L., Richman-Raphael, D., Simpson, I., Christiansen, E. D. & von Eye, A. (2005) 'Positive youth development, participation in community youth development programs, and community contributions of fifth grade adolescents: Findings from the first wave of The 4-H Study of Positive Youth Development,' *Journal of Early Adolescence*. Vol.25, no.1, pp.17-71.
- Lerner, R.M., Lerner, J.V. & Phelps, E. (2009) *Waves of the Future: The first five years of the 4H study of positive youth development*. URL: <http://ase.tufts.edu/iaryd/documents/4HStudyWavesOfFuture.pdf>.
- Lien, N., Lytle, L.A. & Klepp K.I. (2001) 'Stability in consumption of fruit, vegetables, and sugary foods in a cohort from age 14 to age 21,' *Preventative Medicine*. Vol.33, no.3, pp.217–226.
- Lippert-Rasmussen, K. (2017) 'The Nature of Applied Philosophy' in Lippert-Rasmussen, K., Brownlee, K. & Coady, D. (eds.) *A Companion to Applied Philosophy*. Chichester, UK: John Wiley & Sons Ltd.
- Lister-Sharp, D., Chapman, S., Stewart-Brown, S. & Sowden, A. (1999) 'Health promoting schools and health promotion in schools: two systematic reviews,' *Health Technology Assessment (Winchester, England)*. Vol.3, no.22, pp.1-207.; p.23.
- Lowe, N. & Juss, S. (1993) 'Medical Treatment – Pragmatism and the Search for Principle,' *Modern Law Review*. Vol.56, no.6, pp.856-72.
- Lynagh, M., Schofield, M.J. & Sanson-Fisher, R.W. (1997) 'School health promotion programs over the past decade: A review of the smoking, alcohol and solar protection literature,' *Health Promotion International*. Vol.12, no.1, pp.43–60.
- Lytle, P., Seifert, S., Greenstein, J. & McGovern, P. (2000) 'How do children's eating patterns and food choices change over time? Results from a cohort study,' *American Journal of Health Promotion*. Vol.14, no.4, pp.222 – 228.
- MacCormick, N. (1982) *Legal Right and Social Democracy: Essays in Legal and Political Philosophy*. Oxford: Clarendon Press, p.165.

- Macleod, C.M. (2011) 'Parental Responsibilities in an Unjust World,' in Archard, D. and Benatar, D. (eds.) *Procreation and Parenthood: the ethics of Bearing and Rearing Children*. Oxford: Clarendon Press.
- Macnab, A.J., Gagnon, F.A. & Stewart, D. (2014) 'Health promoting schools: consensus, strategies, and potential,' *Health Education*, Vol. 114, no.3, pp.170-185.
- Manson, N. (2015) 'Transitional Paternalism: How shared normative powers give rise to the asymmetry of adolescent consent and refusal,' *Bioethics*. Vol.29, no.2, pp.66-73.
- Marmot, M. (2004) *The Status Syndrome: How social standing affects our health and longevity*. New York: Henry Holt.
- Marmot, M. (2010) *Fair Society, Healthy Lives: A Strategic Review of Inequalities in England*. London: University College London.
- Marmot, M. (2015) *The Health Gap: The challenge of an unequal world*. London: Bloomsbury.
- Mashe, J.G. (2010) 'Explanation of normative declines in parents' knowledge about their adolescent children,' *Journal of Adolescence*, Vol. 3, no.2, pp.271–284.
- Matthews, G.B. (1996) *The Philosophy of Childhood*. Cambridge, Mass.: Harvard University Press.
- McDiarmid, C. (2013) 'An Age of Complexity: Children and Criminal Responsibility in Law,' *Youth Justice*. Vol.13, no.2, pp.145-160.
- McEvoy, C.T., Lawton, J., Kee, F. Young, I.S., Woodside, J.V., McBratney, J. & McKinley, M.C., (2014) 'Adolescents' views about a proposed rewards intervention to promote healthy food choice in secondary school canteens,' *Health Education Research*. Vol.29, no.5. pp.799-811.
- Mead, M. (1953) *Growing up in New Guinea*. N.Y.: Mentor Books.
- Minow, M. (1986) 'Rights for the Next Generation: A feminist approach to children's rights,' *Harvard Women's Law Journal*. Vo.9, pp.1-24.
- Minow, M. (1990) *Making all the difference: Inclusion, exclusion, and American law*. Ithaca: Cornell University Press.
- Minow, M. & Shanley, M. (1996). 'Relational Rights and Responsibilities: Revisioning the Family in Liberal Political Theory and Law.' *Hypatia*. Vol.11, no.1, pp.4-29.

- Mitchell, J. (2017, June 2) 'Send Naked Mole Rat Pictures Instead of Nudes, Charity Urges Teenagers' *Evening Standard*. <http://www.standard.co.uk/news/world/send-naked-mole-rat-pictures-instead-of-nudes-charity-urges-teenagers-a3555926.html>.
- Mullainathan, S. & Shafir, E. (2014) *Scarcity: the true cost of not having enough*. London: Penguin.
- Munshi, N. & Hornby, L. (2017, May 15) 'Growing Pains,' *The Financial Times*.
<https://ig.ft.com/special-reports/growing-pains/>.
- Mutcherson, K.M. (2005) 'Whose Body is it Anyway? An updated model of healthcare decision-making rights for adolescents,' *Cornell Journal of Law and Public Policy*. Vol.14, pp.251-325.
- Mutcherson, K.M. (2007) 'Minor discrepancies: Forging a Common Understanding of Adolescent Competence in Healthcare Decision-Making and Criminal Responsibility,' *Juvenile and Family Court Journal*. Vol.58, no.3, pp.1-29.
- Naidoo, J. & Wills, J. (1994) *Health Promotion: foundations of practice*. London: Baillière Tindall.
- Navratil, J., McCauley, H.L., Marmol, M., Barone, J. & Miller, E. (2015) 'Involving Youth Voices in Research Protocol Reviews,' *The American Journal of Bioethics*. Vol.15, no.11, pp.33-34.
- Nedelsky, J. (1989) 'Reconceiving autonomy: Sources, thoughts and possibilities,' *Yale JL & Feminism*. Vol.1, pp.7-36.
- NHS 'Children and Young People: consent to treatment.' URL:
<https://www.nhs.uk/conditions/consent-to-treatment/children/>
- Nussbaum, M. (2003) 'Capabilities as Fundamental Entitlements: Sen and Social Justice' *Feminist Economics*. Vol. 9 no.2-3, pp. 33-59.
- Nutbeam, D. (1998) 'Evaluating health promotion – progress, problems and solutions,' *Health Promotion International*. Vol.13, no.1, pp.27–43.
- Office of the United Nations High Commissioner for Human Rights (1989) *Convention on the rights of the child*. URL: <http://www.ohchr.org/EN/ProfessionalInterest/Pages/CRC.aspx>.
- Ollendorf, R. (1971) 'The Rights of Adolescents,' in Adams et al *Children's Rights: Toward the Liberation of the Child*. New York: Praeger.
- O'Neill, O. (1988) 'Children's Rights and Children's Lives,' *Ethics*. Vol.98, no.3, pp.445–463.

- van Oort, F.V., van Lenthe, F.J. & Mackenbach, J.P. (2005) 'Material, psychosocial, and behavioural factors in the explanation of educational inequalities in mortality in the Netherlands.' *J Epidemiol Community Health*. Vol. 59, no. 3, pp.214-220.
- Parker, M. (2009) 'Two concepts of Empirical ethics,' *Bioethics*. Vol.23, no.4, pp.202-213.
- Patton, G., Bond, L., Butler, H. & Glover, S., (2003) 'Changing Schools, Changing Health? Design and implementation of the Gatehouse Project,' *Journal of Adolescent Health*. Vol.33, no.4, pp.231-239.
- Patton, G.C. & Viner, R. (2007) 'Pubertal transitions in health,' *Lancet*. Vol.369, no.9567, pp.1130-1139.
- Peekananen, J., Tuomilehto, J., Uutela, A., Vartianinen, E. & Nissinen, A. (1995) 'Social class, health behaviour, and mortality among men and women in eastern Finland.' *BMJ*. Vol. 311, no.7005, pp.589-593.
- Phipps, C.A. (2003) 'Misdirected Reform: On regulating consensual sexual activity between teenagers,' *Cornell Journal of Law and Public Policy*. Vol.12, pp.373-445.
- Piaget, J. & Inhelder, B.; Parsons, A. & Milgram, S. (trans.) (1958) *The Growth of Logical Thinking from Childhood to Adolescence: An essay on the construction of formal operational structures*. London: Routledge.
- Poulin, F., Nadeau, K. & Scaramella, L.V. (2012) 'The Role of Parents in Young Adolescents' Competence with Peers: An observational study of advice giving and intrusiveness,' *Merrill-Palmer Quarterly*. Vol.58, no.4, pp.437-462.
- Public Health England (2014) 'Health inequalities: a toolkit to support local conversations,' URL: https://www.gov.uk/government/uploads/system/uploads/attachment_data/file/356982/National_Conversations_Report_19_Sept.pdf.
- Purdy, L.M. (1992) *In Their Best Interest? The Case Against Equal Rights for Children*, Ithaca and London: Cornell University Press.
- Rawls, J. (2005 [1971]) *A Theory of Justice*. Cambridge, Mass: Harvard University Press.
- Resnick, M.D., Catalano, R.F., Sawyer, S.M., Viner, R. & Patton, G.C. (2012) 'Seizing the opportunities of adolescent health,' *Lancet*. Vol.379, no.9826, pp.1564-1567.

- Rifkin, S., Lewando-Hundt, G. & Draper, A. (2000) *Participatory approaches in health promotion and health planning: A literature review*. London School of Hygiene and Tropical Medicine.
- Robinson, J.H. (1990) 'Adolescence, Choice, and Punishment,' *Notre Dame J.L. Ethics and Pub. Pol'y*. Vol.5, no.2, pp.257-265.
- Rosato, J.L. (2002) 'Let's Get Real: Quilting a principled approach to adolescent empowerment in health care decision-making,' *DePaul Law Review*. Vol.51, pp.769-804.
- Rosengren, A., Orth-Gomer, K., Wedel, H. & Wilhelmsen, L. (1993) 'Stressful life events, social support, and mortality in men born in 1933,' *British Medical Journal*. Vol.307, no.6921 pp.1102–1105.
- Ruddick, W. (1979), 'Parents and Life Prospects,' in O'Neill, O. & Ruddick, W. (eds.) *Having Children: Philosophical and Legal Reflections on Parenthood*. New York: Oxford University Press.
- Ruddick, W. (1999) 'Parenthood: Three Concepts and a Principle,' in *Morals, Marriage, and Parenthood*, L. D. Houlgate (ed.) Belmont, CA.: Wadsworth.
- Rutter, M., Maughan, B., Mortimore, P., Ouston, J. & Smith, A. (1979) *Fifteen Thousand Hours: Secondary Schools and Their Effects on Children*. London: Open Books.
- Ryberg, J. (2014) 'Punishing Adolescents – On immaturity and diminished responsibility,' *Neuroethics*. Vol.7, no.3, pp.327-336.
- Sawyer, S.M., Afifi, R.A., Bearinger, L.H. Blakemore, S.J., Dick, B., Ezeh, A.C. & Patton, G.C. (2012) 'Adolescence: A foundation for future health'. *The Lancet*. Vol. 379, no.9826, pp.1630-1640.
- Schapiro, T. (1999) 'What is a Child?' *Ethics*. Vol.109, no.4, pp.715–738.
- Schapiro, T. (2003) 'Childhood and Personhood', *Arizona Law Review*. Vol.45, no.3, pp.575–594.
- Schoeman, F. (1980) 'Rights of Children, Rights of Parents, and the Moral Basis of the Family', *Ethics*. Vol.91, no.1, pp.6–19.
- Schoeman, F.D. (1992) *Privacy and Social Freedom*. Cambridge: Cambridge University Press.
- School of Social Work, University of Washington & Social Development Research Group, 'The Seattle Social Development Project (SSDP).' URL: <http://www.ssdp-tip.org/SSDP/index.html>.
- Schrag, F. (1980) 'Children: Their Rights and Needs', in *Whose Child? Parental Rights, Parental Authority and State Power*, W. Aiken and H. LaFollette, H., Totowa, NJ: Littlefield, Adams, and Co.

- Schrijvers, C., Stronks, K., Mheen, H. & Mackenbach, J.P. (1999) 'Explaining educational differences in mortality: the role of behavioral and material factors' *Am J public Health*. Vol.89, no.4, p535-540.
- Seattle Social Development Project website URL: <http://ssdp-tip.org/SSDP/index.html>.
- Sen, A. (1985) *Commodities and Capabilities*. New York: North-Holland.
- Sen, A. (1999) *Development as Freedom*. Oxford: Oxford University Press.
- Seymore, M.L. (2013) 'Sixteen and Pregnant: Minors' consent in abortion and adoption,' *The Yale Journal of Law and Feminism*. Vol.25, no.1, pp.99-158.
- Sheehan, M., & Sheehan, P. (2002) 'Justice and the social reality of health: The case of Australia,' in Rhodes, R., Battin, M. & Silvers, A., (eds.) *Medicine and social justice: Essays on the distribution of health care*. New York, New York: Oxford University Press.
- Sidgwick, H. (1982 [1874]), *The Methods of Ethics*. Chicago: University of Chicago Press.
- Skov, L.R., Lourenço, S., Hansen, G.L., Mikkelsen, B.E. & Schofield, C. (2013) 'Choice architecture as a means to change eating behaviour in self-service settings: A systematic review,' *Obesity Review*. Vol.14, pp.187–196.
- van Sluijs, E.M., McMinn, A.M. & Griffin, S.J. (2007) 'Effectiveness of interventions to promote physical activity in children and adolescents: systematic review of controlled trials,' *BMJ*. Vol.335, no.7622, pp.703-707.
- Social Exclusion Unit (1999) 'Bringing People Together: A National Strategy for Neighbourhood Renewal,' HMSO, London.
- Spear, L.P. (2000) 'The adolescent brain and age-related behavioral manifestations,' *Neuroscience & Biobehavioral Reviews*. Vol.24, no.4, pp.417-463.
- Spear, L.P. (2004) 'Adolescent brain development and animal models,' *Annals of the New York Academy of Sciences*. Vol.1021, no.1, pp.23-26.
- Stattin, H. & Kerr, M. (2000) 'Parental monitoring: A reinterpretation,' *Child development*. Vol.71, no.4, pp.1072-1085.
- Steinberg, L. & Scott, E.S. (2003) 'Less Guilty by Reason of Adolescence: Developmental immaturity, diminished responsibility, and the juvenile death penalty,' *American psychologist*. Vol.58, no.12, pp.1009-1018.

- Steiner, H. (1998) 'Working Rights', in Kramer, M.H., Simmonds, N. & Steiner, H., *A Debate Over Rights: Philosophical Enquiries*. Oxford: Clarendon Press.
- Stevenson, L. (1970) 'Applied Philosophy. *Metaphilosophy*. Vol.1, no.3, pp. 258– 267
- Sumner, L.W. (1987) *The Moral Foundation of Rights*, Oxford: Clarendon Press.
- Sutton, A. (1997) 'Authority, autonomy, responsibility and authorisation: with specific reference to adolescent mental health practice,' *Journal of Medical Ethics*. Vol.23, no.1, pp.26-31.
- Swiss Agency for Development and Cooperation, *Project "Healthy Generation" – Scaling up Youth-Friendly Health Services in Moldova*. URL:
<https://www.eda.admin.ch/content/dam/countries/countries-content/moldova/en/Healthy-Generation-EN.pdf>.
- Taylor, C. (1985) *Philosophical Papers I: Human agency and Language*. Cambridge: Cambridge University Press.
- Taylor, C (1989) *Sources of the Self: The Making of the Modern Identity*. Cambridge, Mass: Harvard University Press.
- Trine, N. (2014) 'Making Children and Adolescents Visible' URL: <http://www.euro.who.int/en/health-topics/Life-stages/child-and-adolescent-health/news/news/2014/10/making-children-and-adolescents-visible>.
- Tucker, F. (2016) 'Developing autonomy and transitional paternalism,' *Bioethics*. Vol.30, no.9, pp.759-766.
- Uniacke, S. (2013) 'Respect for autonomy in medical ethics' in Archard, D., Deveau, M., Manson, N. & Weinstock, D. (eds) *Reading Onora O'Neill*. London: Routledge, pp.94-110.
- United Nations Department of Economic and Social Affairs (UNDESA) 'Definition of Youth.' URL: <http://www.un.org/esa/socdev/documents/youth/fact-sheets/youth-definition.pdf> .
- VanderKam, L. (2017, May 15) 'A Nation Stuck in Adolescence,' *The Wall Street Journal*.
<https://www.wsj.com/articles/a-nation-stuck-in-adolescence-1494889059>.
- Viner, R.M., Coffey, C., Mathers, C., Bloem, P., Costello, A., Santelli, J. & Patton, G.C. (2011) '50-year mortality trends in children and young people: a study of 50 low-income, middle-income, and high-income countries,' *Lancet*. Vol.377, no.9772, pp.1162-1174.
- Voltaire (2003 [1759]) *Candide*. Doylestown: Wildside Press.

- Walby, S., Armstrong, J., & Strid, S. (2012) 'Intersectionality: multiple inequalities in social theory,' *Sociology*. Vol.46, no.2, pp. 224-240.
- Wall, M., Hayes, R., Moore, D., Petticrew, M., Clow, A., Schmidt, E., Draper, A., Lock, K., Lynch, R. & Renton, A. (2009) 'Evaluation of community level interventions to address social and structural determinants of health: a cluster randomised controlled trial,' *BMC Public Health*. Vol.9, no.1. p.207-207.
- Wallace, A. (2007) "We have had nothing for so long that we don't know what to ask for': New Deal for Communities and the regeneration of socially excluded terrain,' *Social Policy and Society*. Vol.6, no.1, pp.1-12.
- Wallerstein, N. (2006) 'What is the Evidence on Effectiveness of Empowerment to Improve Health?' *Health Evidence Network*, WHO, Europe. URL: http://www.euro.who.int/__data/assets/pdf_file/0010/74656/E88086.pdf.
- Walzer, M. (1983) *Spheres of Justice: a defence of pluralism and equality*. Oxford: Martin Robertson
- Walzer, M. (1984) 'Liberalism and the Art of Separation,' *Political theory*. Vol.12, no.3, pp.315-330.
- Ward, C.V. (2006) 'Punishing Children in the Criminal Law,' *Notre Dame Law Review*. Vol.82, no.1, pp.429-479.
- Westlund, A.C. (2009) 'Rethinking Relational autonomy,' *Hypatia*. Vol.24, No.4, pp.26-49.
- Wilkinson, R.G. & Marmot M. (2006) *Social Determinants of Health: The Solid Facts* (2nd edition). Copenhagen: World Health Organization, Regional Office for Europe.
- Wilkinson, R.G. & Pickett, K. (2010) *The Spirit Level: Why equality is better for everyone*. London: Penguin.
- Wilks, I. (1997) 'The Debate over Risk-related Standards of Competence,' *Bioethics*, Vol. 11, no.5, pp.413-426.
- Wilks, I. (1999) 'Asymmetrical Competence,' *Bioethics*. Vol.13, no.2, pp.154-159.
- Williams, G. (2006) "'Infrastructures for Responsibility": The moral tasks of institutions,' *Journal of Applied Philosophy*. Vol.23, no.2, pp.207-221.
- Williams, G. (2018) 'Discrimination and Obesity' in Lippit-Rasmussen, K. (ed.) *The Routledge Handbook of Ethics of Discrimination*. London: Routledge.
- Winnicott, D.W. (1993) *Talking to Parents*. Cambridge, Mass: Perseus Publishing.

- Winnicott, D.W. (2012) *Playing and reality*. London: Routledge.
- Wolff, J. & de-Shalit, A. (2007) *Disadvantage*. Oxford: Oxford University Press.
- Woodward, M., Oliphant, J., Lowe, G. & Tunstall-Pedoe, H. (2003) 'Contribution of contemporaneous risk factors to social inequality in coronary heart disease and all causes mortality' *Prev Med*. Vol. 36, no.5, pp.561-568.
- World Health Organization (2001) *The second decade: improving adolescent health and development*. Geneva: World Health Organization. URL:
http://www.who.int/maternal_child_adolescent/documents/frh_adh_98_18/en/.
- World Health Organization (2018) 'Adolescent Health.' URL:
http://www.who.int/topics/adolescent_health/en/.
- World Health Organization (2018a) 'What is a Health Promoting School?' URL:
http://www.who.int/school_youth_health/gshi/hps/en/.
- World Health Organisation Regional Office for Europe (2013) 'Health 2020: a European policy framework and strategy for the 21st century'. URL:
<http://www.euro.who.int/en/publications/abstracts/health-2020.-a-european-policy-framework-and-strategy-for-the-21st-century-2013>.
- Zimring, F.E. (2014) *The Changing Legal World of Adolescence*. New Orleans, Louisiana: Quid Pro Books.