

## ADOLESCENT MENTAL HEALTH:

CREATING A PATHWAY FOR HEALTHY DEVELOPMENT

with Dr. Lisa Firestone

### IN THIS WEBINAR:

- Explore common mental health struggles faced by adolescents and teens
- Discuss key neuroscientific factors that impact the developing brain during adolescence
- Describe the role of attachment in influencing adolescent mental health
- Explain the concept of separation theory as it helps shape a young person's emerging sense of identity and self-esteem
- Illuminate exercises and techniques that can help adolescents make sense of their story, differentiate from negative influences, foster more self-compassion, and grow into their true selves



# PART 1 COMMON MENTAL HEALTH STRUGGLES IN ADOLESCENCE



PART 3
TOOLS & TECHNIQUES

# PART 2 DEVELOPMENTAL FACTORS



#### THREE APPROACHES:

NEUROBIOLOGICAL ATTACHMENT THEORY SEPARATION THEORY

## POLL#1

**ARE YOU:** 

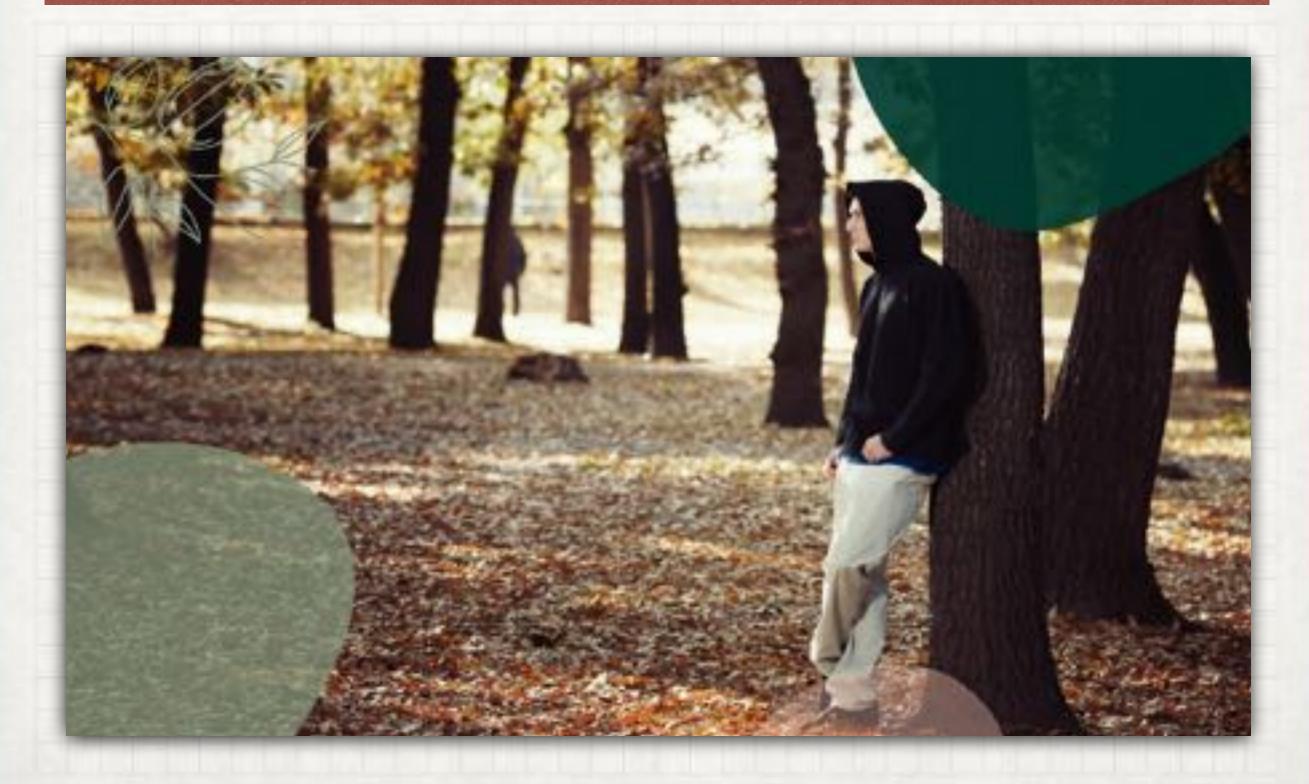
A parent of an adolescent?

A professional who works with adolescents?

An adolescent (12-24 years old)?

Other?

# PART 1 COMMON MENTAL HEALTH STRUGGLES IN ADOLESCENCE



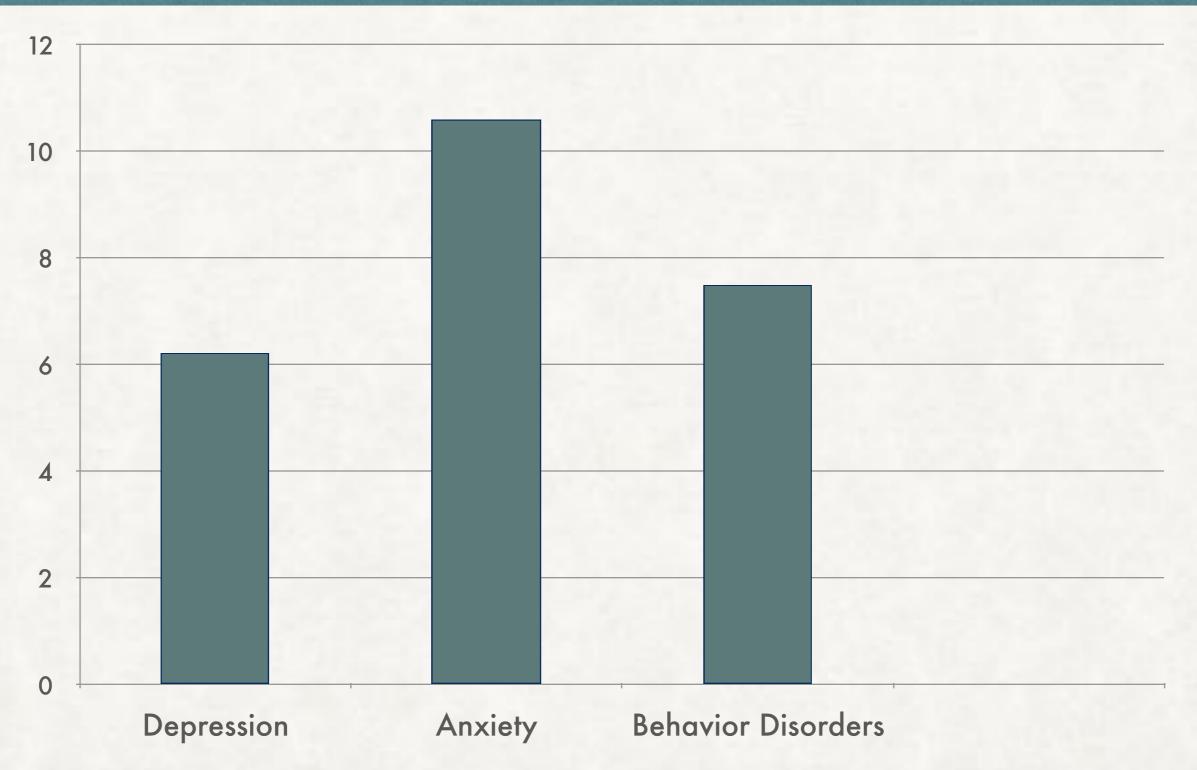
#### ADOLESCENT MENTAL HEALTH IN AMERICA

Approximately 20% of adolescents have a diagnosable mental health disorder. Many mental health disorders first present during adolescence.' The most common mental illnesses in adolescents are anxiety, mood, attention, and behavior disorders.



Sources: https://www.nccp.org/publication/adolescent-mental-health-in-the-united-states-facts-for-policymakers/#:~:text=Facts%20about%20Adolescent%20Mental%20Health,episode%20before%20they%20reach%20adulthood. https://www.acog.org/clinical/clinical-guidance/committee-opinion/articles/2017/07/mental-health-disorders-in-adolescents

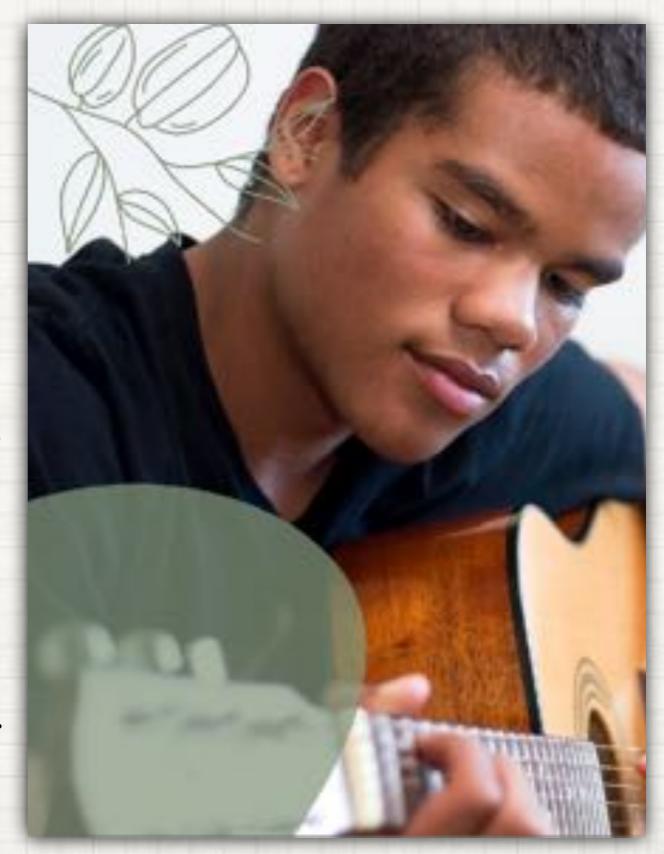
#### DEPRESSION, ANXIETY, BEHAVIOR DISORDERS (AGE 12-17)



Source: https://www.cdc.gov/childrensmentalhealth/data.html

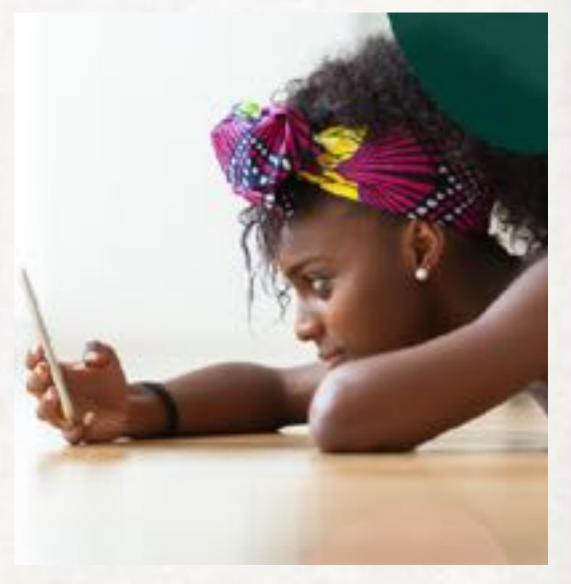
## ADOLESCENT MENTAL HEATH IN AMERICA

- 13% of youth (12-17) report suffering from at least one major depressive episode (MDE) in the past year.
- Number of youth experiencing MDE increased by 99,000 from last years' dataset.
- Depression in youth often co-occurs with other disorders like substance use, anxiety and disorderly behavior.



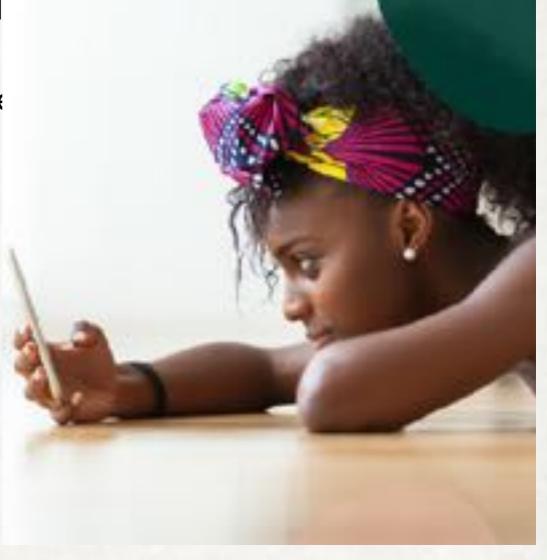
#### MENTAL HEALTH IN YOUTH DURING COVID-19

- •Throughout the pandemic, adolescents have experienced poor mental health outcomes.
- More than 25% of high school students reported worsened emotional and cognitive health.
- Only one-third felt they were able to cope with their sources of stress, which include strained mental health and peer relationships.
- The most frequently diagnosed mental health conditions in 2020 were depression, anxiety, and adjustment disorder.
- •Some evidence also shows that substance use disorders and overdoses among adolescents are increasing during the pandemic.



#### MENTAL HEALTH IN YOUTH DURING COVID-19

- Research suggests that lesbian, gay, bisexual transgender, and queer or questioning (LGBTQ) youth may be particularly vulnerable to negative mental health outcomes during the pandemic.
- Poor mental health outcomes resulting from the pandemic may disproportionately affect children of color.
- Parents of children attending school virtually were more likely to report their children experienced overall worsened mental or emotional health than parents of children attending school in-person (25% vs. 16%, respectively).



#### TEENS

Teenagers and college students have amplified energy, novelty, motivation, curiosity, and enthusiasm that make them hard to isolate at home. The hormonal changes that come with puberty collude with adolescent social dynamics to make them highly attuned to social status, peer group, and relationships. Teens may feel frustrated, nervous, disconnected, nostalgic, and bored because of social distancing during this pandemic.



Source: https://www.ncbi.nlm.nih.gov/pmc/articles/PMC7306970/

# PART 2 DEVELOPMENTAL FACTORS

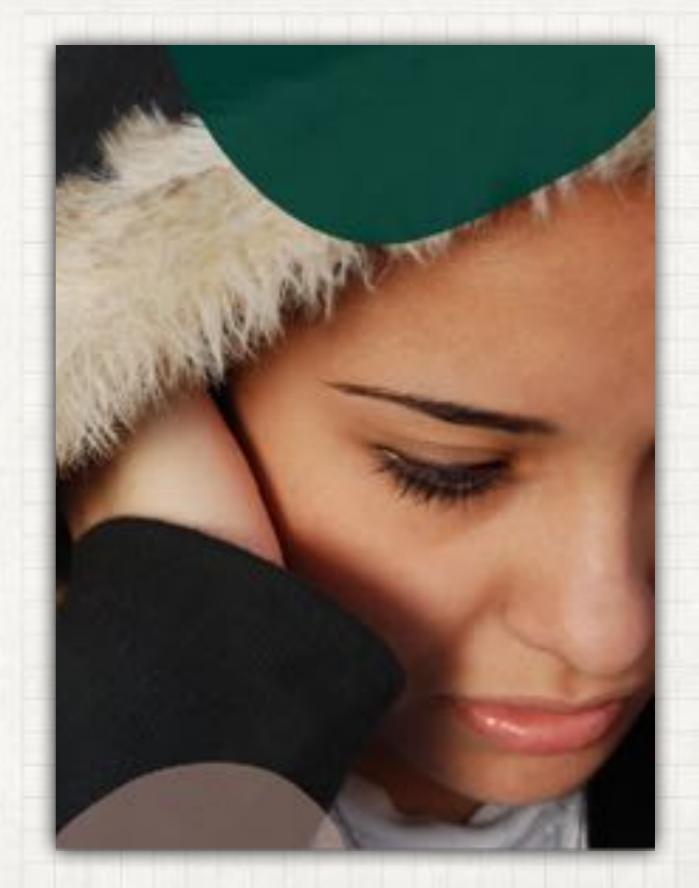


## THE ADOLESCENT BRAIN



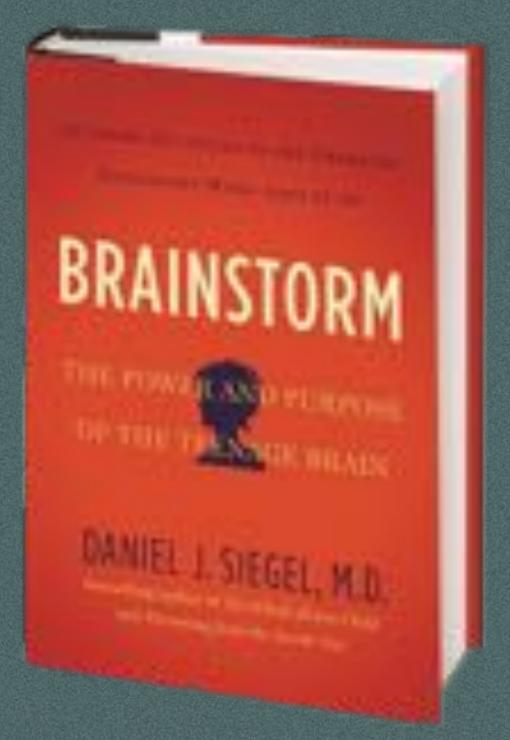
#### BRAIN RESTRUCTURING

- White matter growing faster than gray
- Pruning process during adolescence - highly specific and can be pronounced, resulting in a loss of close to 50% of the synaptic connections in some regions
- Myenilation production escalates notably during adolescence (25), thereby speeding information flow across distant regions and magnifying their impact



#### **BRAINSTORM**

The Power and Purpose of the Teenage Brain



http://drdansiegel.com/books/brainstorm/

#### BENEFITS AND CHALLENGES OF ADOLESCENCE

FROM BRAINSTORM THE POWER AND PURPOSE OF THE TEENAGE BRAIN

- 1. Novelty seeking
- 2. Social engagement
- 3. Increased emotional intensity
- 4. Creative exploration



#### ESSENCE OF ADOLESCENCE

FROM BRAINSTORM THE POWER AND PURPOSE OF THE TEENAGE BRAIN

E-motional
S-park
S-ocial
E-ngagement
N-ovelty
C-reative
E-xploration



## ATTACHMENT THEORY

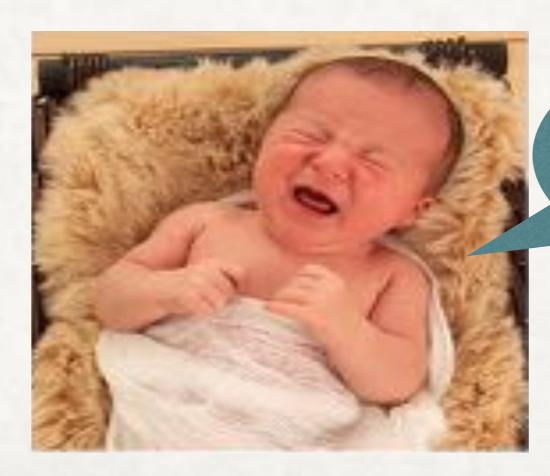


### WHAT IS ATTACHMENT THEORY?

- At the very beginning of our lives, we form attachments to our primary caretakers as a survival mechanism.
- Our attachment style forms as a result of the adaptations we made in infancy to get our needs met.
   Children make the best adaptations they can to their family.

#### WHAT IS ATTACHMENT THEORY?

- The attachment system is activated when we are distressed.
- The way our parents interact with us (particularly during times of distress) forms the basis of our attachment style.



Attachment system activating!

#### ATTACHMENT THEORY DISTILLED

Humans rely on attachment figures for:

- Protection (safe)
- Support (seen)
- Emotion regulation (soothed)



From: "Secure and Insecure Love: An Attachment Perspective" Phillip R. Shaver, Ph.D.

#### PATTERNS OF ATTACHMENT IN CHILDREN

#### **Attachment Style**

- Secure
- Insecure avoidant

#### **Parental Interactive Pattern**

- Emotionally available, perceptive, responsive
- Emotionally unavailable, imperceptive, unresponsive and rejecting





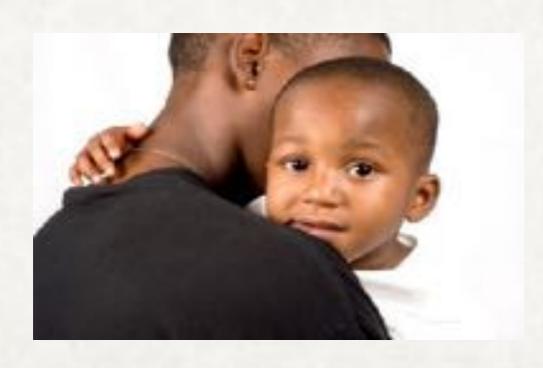
#### PATTERNS OF ATTACHMENT IN CHILDREN

#### **Attachment Style**

- Insecure anxious/ ambivalent
- Insecure disorganized

#### Parental Interactive Pattern

- Inconsistently available, perceptive and responsive and intrusive
  - Frightening, frightened, disorienting, alarming





## ATTACHMENT STATISTICS

#### **Attachment Styles:**

• Secure 55-65%

Ambivalent 5-15%

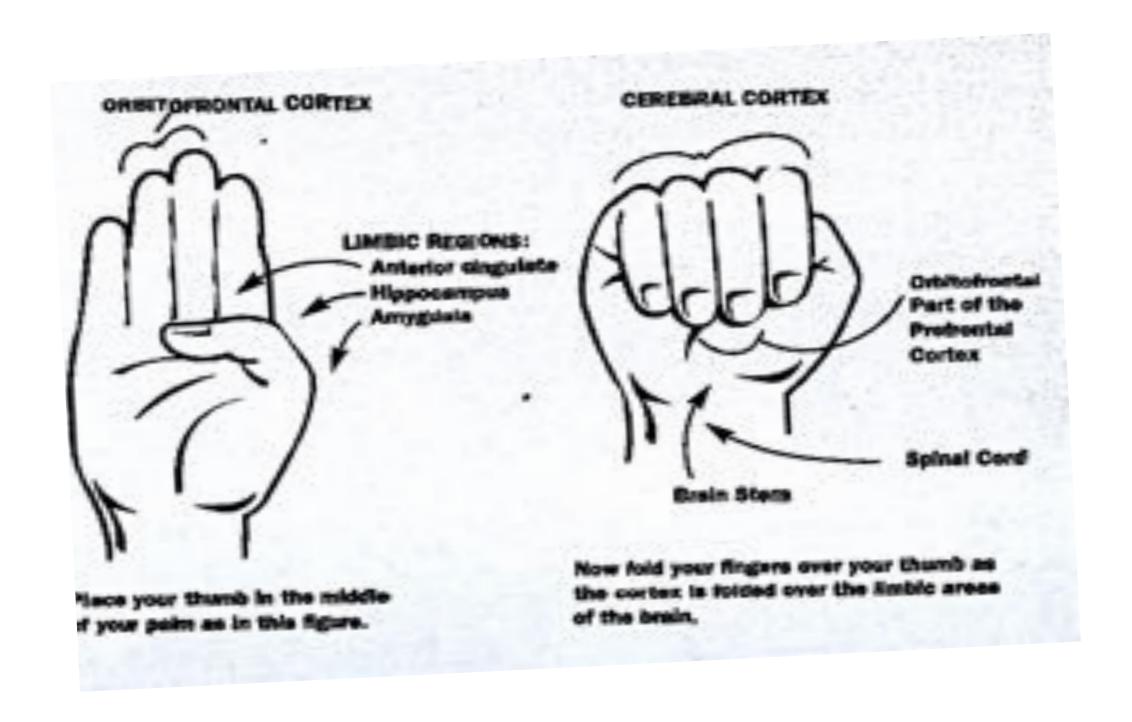
Avoidant 20-30%

#### **Disorganized Attachment**

- Low Risk Populations= 20-40% Disorganized
- High Risk Populations= 80% Disorganized

SECURE =
GOOD
ENOUGH

### The Brain in the Palm of Your Hand



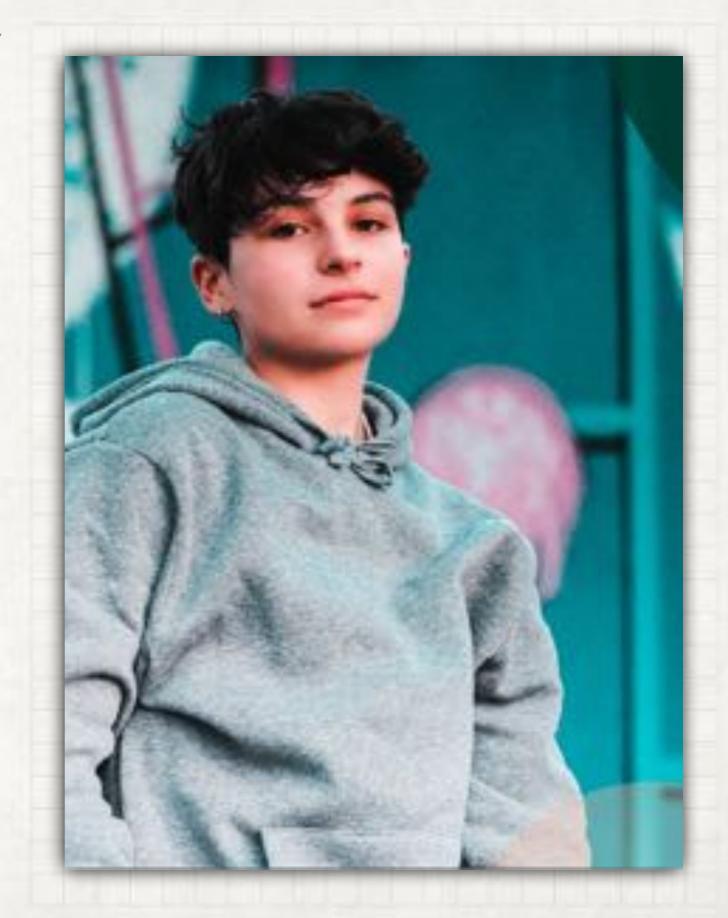
# 9 IMPORTANT FUNCTIONS OF THE PRE-FRONTAL CORTEX

- Body Regulation
- 2. Attunement
- 3. Emotional Balance
- 4. Response Flexibility
- 5. Empathy
- Self-Knowing Awareness (Insight)
- 7. Fear Modulation
- 8. Intuition
- 9. Morality



#### ATTACHMENT THEORY

- Insecurely attached late adolescents reported greater depression, anxiety, and worry than their securely attached counterparts.
- Evidence that parent attachment is one of the crucial determinants of psychological adjustment in adolescents, including global life satisfaction. In a study of adolescents in Grades 6 through 8, results showed statistically significant relationships among parent attachment, hope, and life satisfaction.



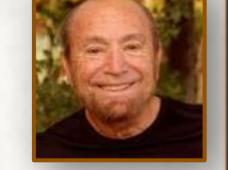
Sources: https://psycnet.apa.org/buy/2000-00028-003 https://onlinelibrary.wiley.com/doi/abs/10.1002/pits.21680

## SEPARATION THEORY

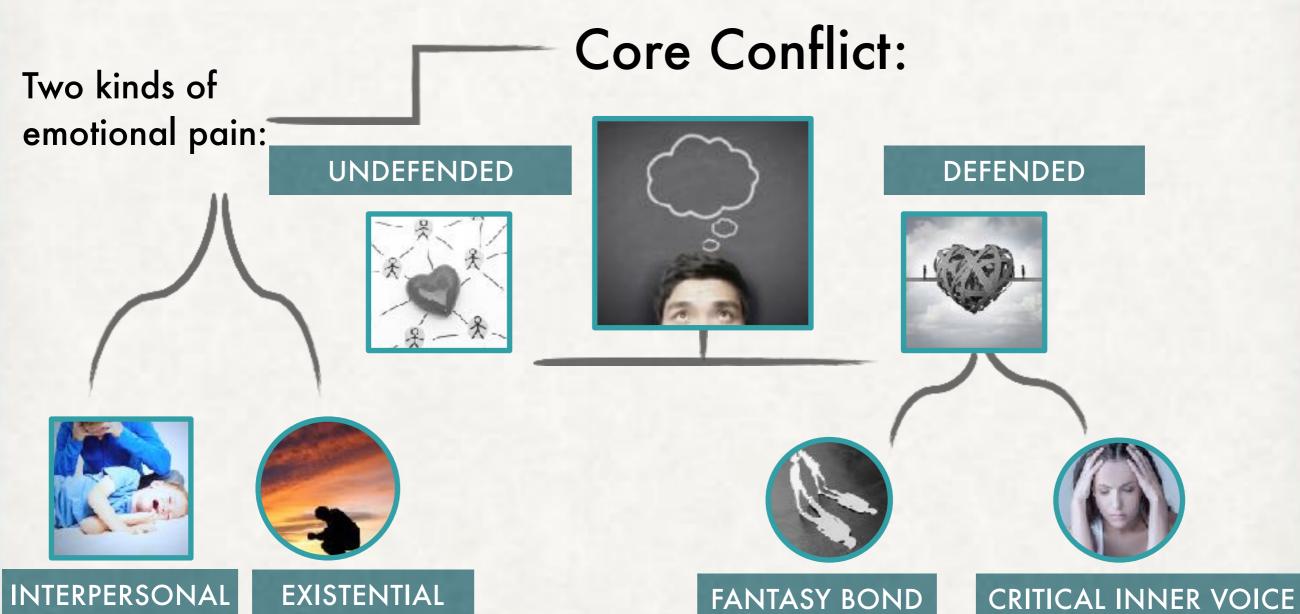


# Separation Theory

ROBERT W. FIRESTONE, PH.D.

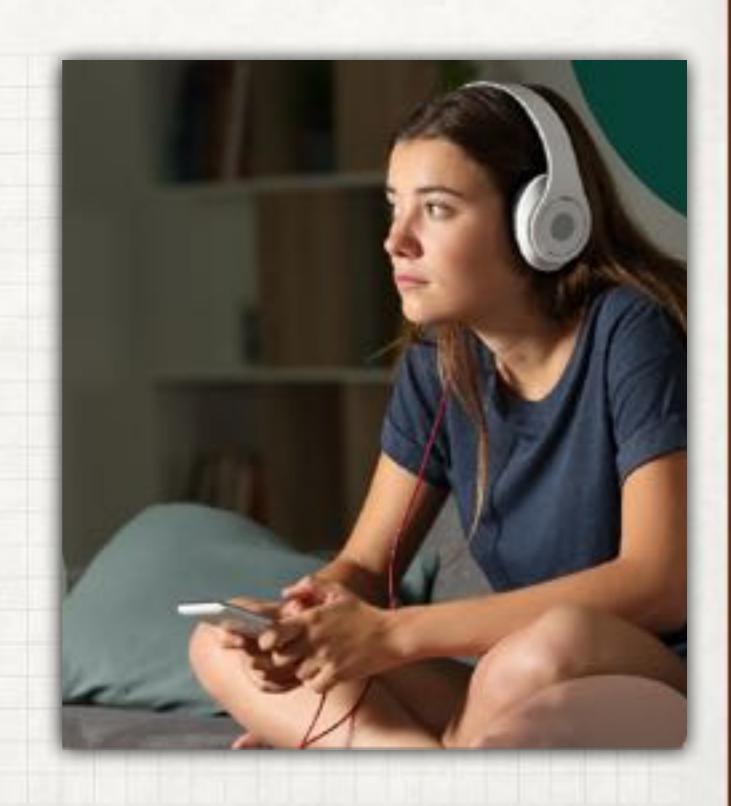


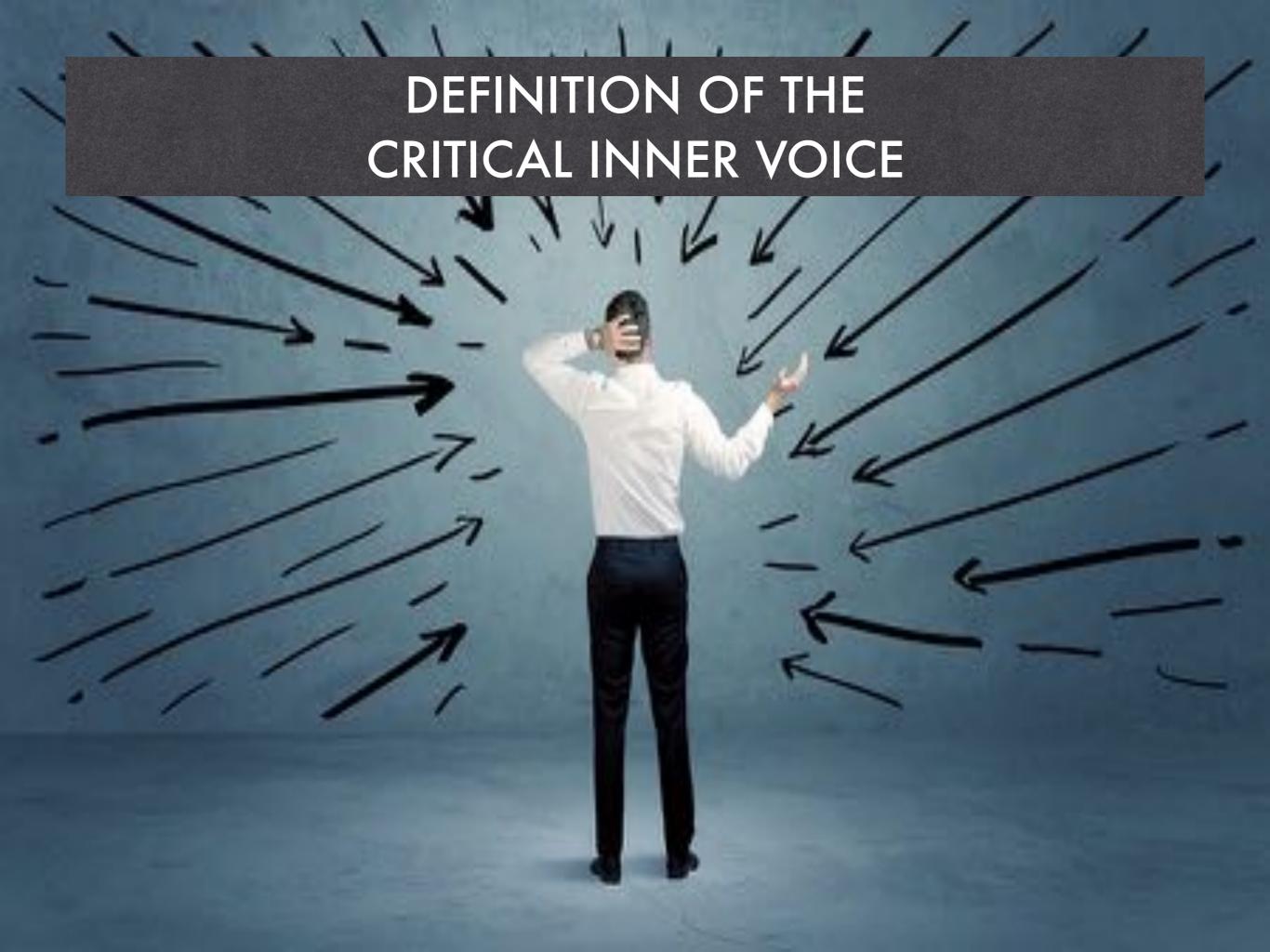
Integrates psychoanalytic and existential systems of thought



#### THE FANTASY BOND

- Illusion of connection originally formed with parent to help relieve early anxiety and emotional pain
- Process of self-parenting see and treat selves the way we were seen and treated by primary caretakers, both punishing and soothing ourselves
- Can lead to idealization of parent and demonization of self
- Extends to our adult relationships





# THE CRITICAL INNER VOICE REFERS TO A WELL-INTEGRATED PATTERN OF DESTRUCTIVE THOUGHTS TOWARD OURSELVES AND OTHERS.

The "voices" that make up this internalized dialogue are at the root of much of our dysfunctional behavior.

You can't do anything right!

You're so stupid!

You don't fit in.

You're so ugly!

Nobody likes you.

#### WHERE CRITICAL INNER VOICES COME FROM

As a defense, people identify with and internalize destructive attitudes from their parents, particularly in times of stress.

The times children are most scared are the times they most identify with their parents.



### WHY WE IDEALIZE OUR PARENTS

- Children may idealize their parents in order to feel safe.
- Instead, they turn on and feel bad about themselves.



#### DIVISION OF THE MIND

#### Parental Ambivalence

Parents both love and hate themselves and extend both reactions to their productions, i.e., their children.

Parental Nurturance Parental Rejection, Neglect, Hostility





## Parental Nurturance

## Self-System



- Unique make-up of the individual
- Identification with and incorporation of parent's positive attitudes and traits
- The effect of experience and education

#### PERSONAL ATTITUDES/GOALS/CONSCIENCE

Realistic, Positive Attitudes Toward Self

Realistic evaluation of talents, abilities, etc...with generally positive/compassionate attitude toward self and others

#### Goals

Needs, wants, search for meaning in life

**Moral Principles** 

#### **Behavior**

Ethical behavior toward self and others

Goal-directed Behavior

Acting with Integrity







#### PARENTAL REJECTION, NEGLECT, HOSTILITY

OTHER FACTORS: ACCIDENTS, ILLNESSES, DEATH ANXIETY

#### Anti-Self System



- The Fantasy Bond (core defense) is a self-parenting process made up of two elements: the helpless, needy child and the self-punishing, self-nurturing parent.
- The degree of defense is proportional to the amount of damage sustained.

# ANTI-SELF SYSTEM SELF-PUNISHING VOICE PROCESS

Voice	<b>Process</b>
-------	----------------

#### **Behaviors**

#### Source

Self-critical thoughts

Verbal self-attacks – a generally negative attitude toward yourself and others

Critical parental attitudes, projections and unreasonable expectations

Self-destructive thoughts

Addictive patterns and selfpunishing thoughts after indulging

Identification with parents' defenses

Suicidal thoughts

Jeopardizing actions like carelessness with one's body, physical self-harm and suicide

Parents' covert and overt aggression (identification with the aggressor)

# ANTI-SELF SYSTEM SELF-SOOTHING VOICE PROCESS

Voice Process	Behaviors	Source
Self-soothing attitudes	Inwardness, self-limiting or self- protective actions	Overprotection by parents, imitation of their defenses
Self-aggrandizing thoughts	Building up yourself verbally	Build up from your parents
Suspicious or paranoid thoughts toward others	Feeling alienated from others, acting destructive toward others	Parental attitudes, child abuse, feelings of being a victim
Self-sabotaging thoughts	Addictive patterns, thoughts that lure you to indulge	Imitation of parents' defenses
Violent thoughts	Aggressive actions and actual violence	Parental neglect, parents' overt aggression (identification with the aggressor)

People can change their present by feeling the full pain of their past and making sense of what happened to them.



# PART 3 TOOLS AND TECHNIQUES

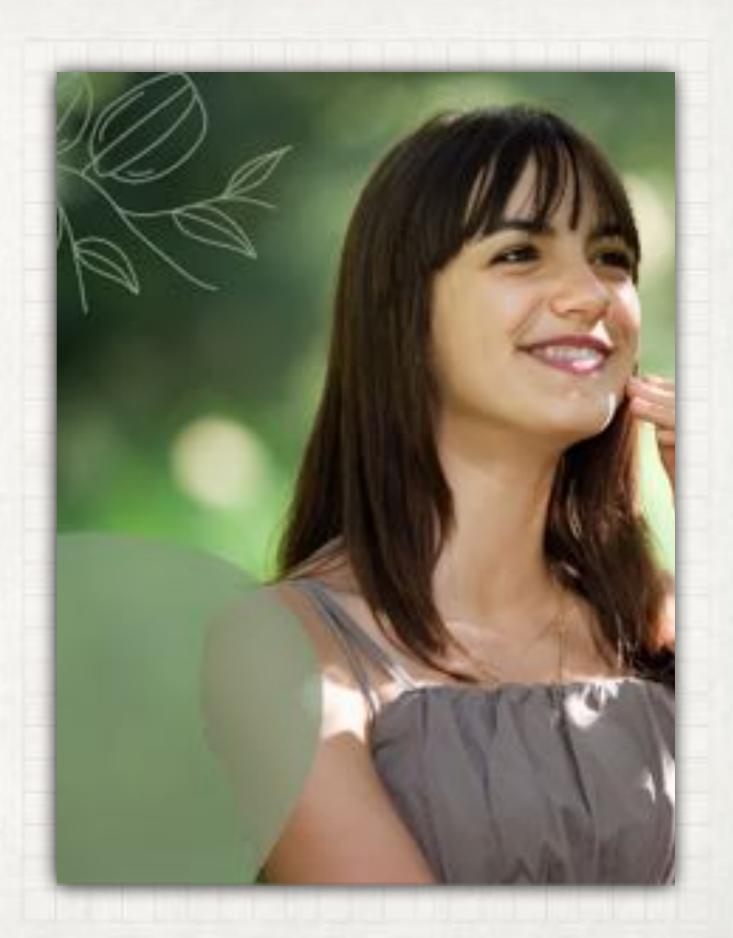


# THE ADOLESCENT BRAIN



## INTEGRATION

Enhance emotional regulation skills - Skills for tolerating and sitting with emotions



# MINDSIGHT

Insight
Empathy
Integration



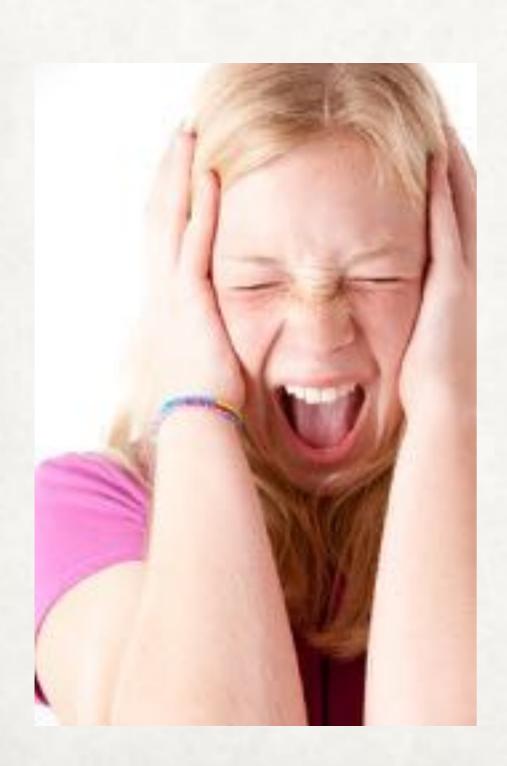
## SIFTING THE MIND



# S-ensing l-mages F-eelings T-houghts



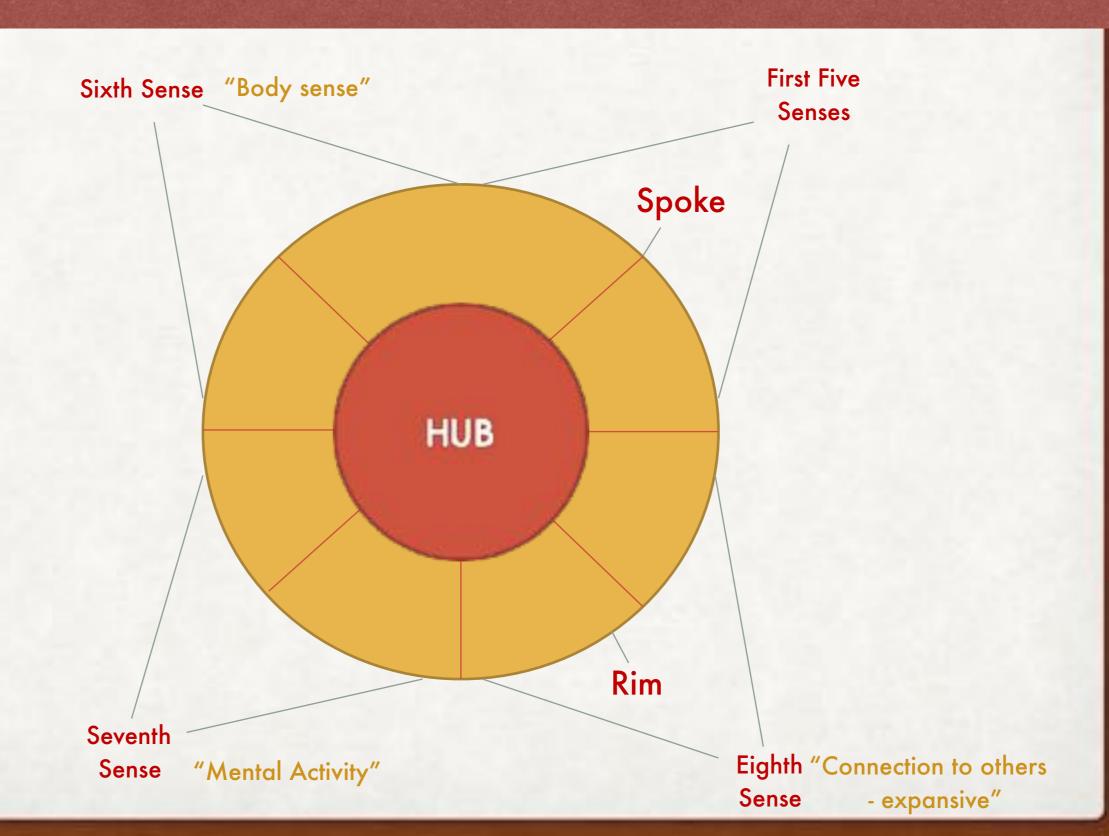
# "NAME IT TO TAME IT"

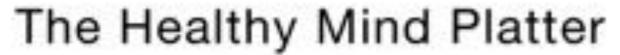


I feel pressured.



#### THE ELABORATED WHEEL OF AWARENESS







The Healthy Mind Platter, for Optimal Brain Matter

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# ATTACHMENT THEORY



#### **BACKGROUND**

- What is (was) it like growing up in your family?
- Who is (was) in your family?

#### **RELATIONSHIPS**

- Do (did) you get along well with your parents and others in your family
- How have your relationships in your family changed over time?

#### **SEPARATION**

Can you remember your first time being separated from your parents?

#### DISCIPLINE

What ways do (did) your parents respond to your behaviors to teach your behave?

#### **FEAR AND THREAT**

Have you ever felt threatened by your parents?

#### **LOSS**

· Has anyone significant in your life died?

#### **EMOTIONAL COMMUNICATION**

 How do (did ) your parents communicate with you when you are (were happy and excited?

#### SAFE HARBOR

•Are (were) there relationships you can(could) turn to or places you can (could) rely on to help you feel comforted at difficult times?

#### **LAUNCHING PAD**

•How do (did) your parents support your explorations away from them or outside your home?

#### **NOW**

What does your relationship look like now with your parents?

#### **FUTURE**

What would you wish for yourself in your future relationships?

## COHERENT NARRATIVE

#### Encourage adolescents to:

- Talk about traumatic events or loss
- Ask questions

#### Talking helps develop:

- Emotional vocabulary
- Shared understanding
- Resolved versus unresolved trauma



# SEPARATION THEORY



#### LACK OF DIFFERENTIATION

Repeat - Copy the traits of our parents

React - Engage in rebellious, reactive, or compensating behaviors in response to parents' traits

Recreate - Engage in behaviors that recreate the emotional climate of our childhood environment.

\* Neither complying nor rebelling are differentiated postures.



#### FOUR STEPS OF DIFFERENTIATION

**Step 1:** Break with internalized thought processes, i.e., critical, hostile attitudes toward self and others

**Step 2:** Separate from negative personality traits assimilated from one's parents

**Step 3:** Relinquish patterns of defense formed as an adaptation to painful events in one's childhood

Step 4: Develop one's own values, ideals, and beliefs rather than automatically accepting those one has grown up with



#### CHALLENGE YOUR CRITICAL INNER VOICE

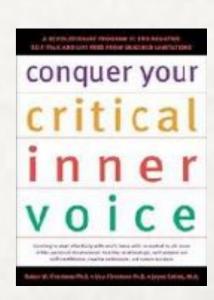
1. Notice what triggers these thoughts.

2. Verbalize them in the second person.

3. Think about the source.

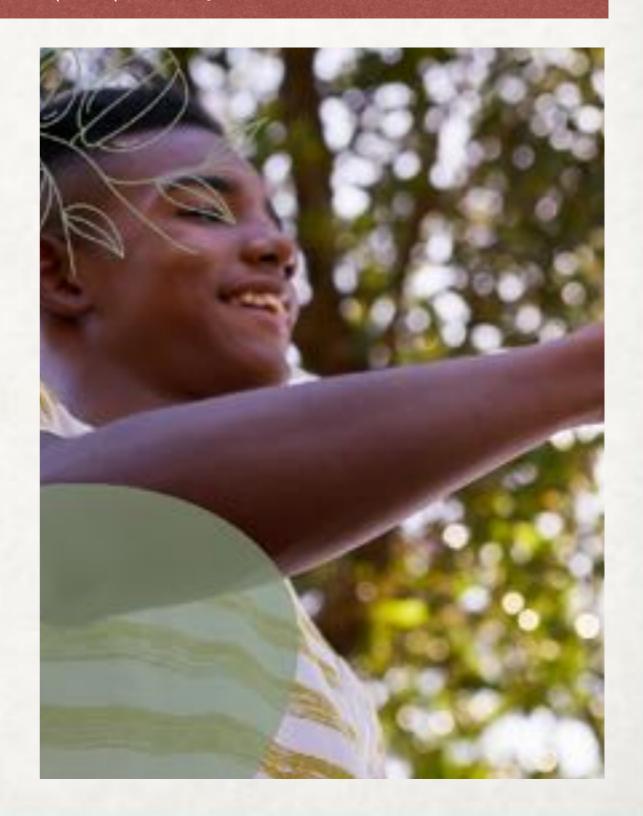
 Respond from a compassionate, realistic point of view.

Take actions that go against your voices.



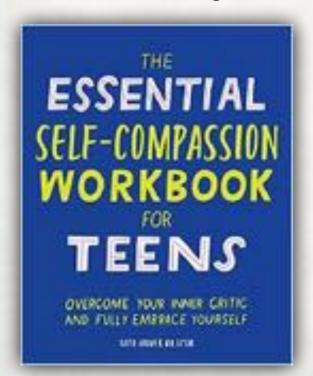
# PRACTICE SELF-COMPASSION DR. KRISTIN NEFF:

- Self-kindness vs. selfjudgment
- 2. Common humanity vs. isolation
- 3. Mindfulness vs. Overidentification with thoughts



#### SELF-COMPASSION

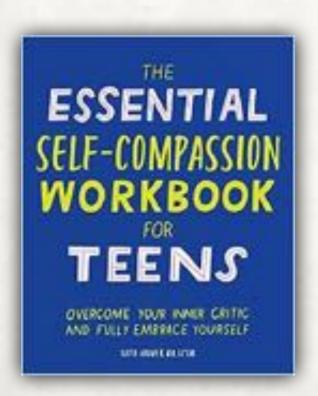
- Common humanity. Teens come to understand that they are not alone. That what they are experiencing—feelings of insecurity, exclusion, or sadness, for example—is common to all teens (even though it may not seem that way). That there are actually biological reasons—changes happening in the brain—that make them feel the way they do. Teens learn that it isn't their fault, and there's nothing wrong with them.
- Mindfulness. When teens feel as if they're about to burst from all the emotions mounting up inside, we teach them to bring attention to their feet, and just notice what the bottoms of their feet feel like. As their mind wanders, we guide them to bring their attention back.
- **Self-kindness.** We invite teens to put their hands over their heart, stroke their cheek, or give themselves a hug, which actually can elicit certain hormones—oxytocin and opiates—that make them feel better. We remind them that what they are going through right now is hard—that, by definition, being a teen means dealing with a lot. We encourage them to take a moment to say some kind words or do something nice for themselves.



Source: https://greatergood.berkeley.edu/article/item/how\_to\_help\_teens\_become\_more\_self\_compassionate

### SELF-COMPASSION

 In pilot studies, teens who have taken the class "Making Friends with Yourself: A Mindful Self-Compassion Program for Teens (MFY)" showed improvements in mental health, in particular, they became less depressed, less stressed, and less anxious.



Source: <a href="https://greatergood.berkeley.edu/article/item/how\_to\_help\_teens\_become\_more\_self\_compassionate">https://greatergood.berkeley.edu/article/item/how\_to\_help\_teens\_become\_more\_self\_compassionate</a>

#### INTERPERSONAL NEUROBIOLOGY

C urious

O pen

A ccepting

L oving









# TECHNIQUES FOR PARENTS, COUNSELORS, AND INFLUENTIAL FIGURES



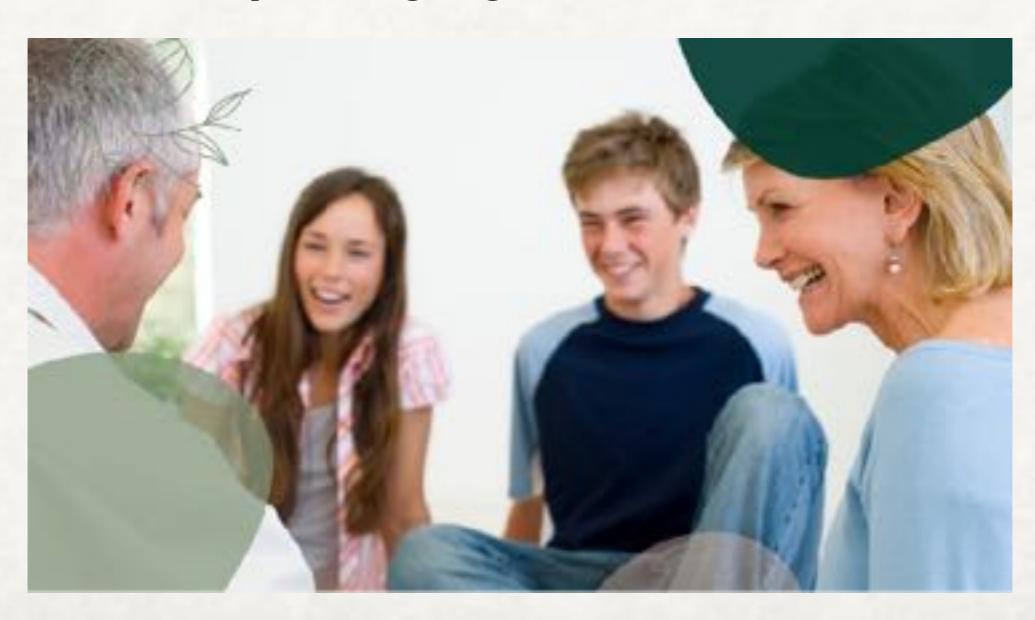
# WHAT TEENS NEED FROM ADULTS IN THEIR LIVES

- Attunement
- Availability/ Being there
- Presence
- Quality time
- Empathy



## EARNED SECURE ATTACHMENT

Help kids develop more earned secure attachment by hanging in there.



# ATTACHMENT BASED FAMILY THERAPY

Attachment-based family therapy (ABFT) for depressed adolescents focuses on repairing the relational fabric between adolescents and their parents by facilitating conversations about past family traumas or ongoing interactional conflicts that have damaged trust. The model is characterized by five distinct, yet interrelated, treatment tasks:

- (1) Relational reframe
- (2) Alliance building with the adolescent and then
- (3) with the parent
- (4) Repairing attachment
- (5) Competency building

# ATTACHMENT BASED FAMILY THERAPY

- ABFT demonstrated significantly greater rates of change on self-reported suicidal ideation at post-treatment evaluation, and benefits were maintained at follow-up, with a strong overall effect size (ES = 0.97).
- Significantly more patients in ABFT met criteria for clinical recovery on suicidal ideation post-treatment (87%; 95% confidence interval [CI] = 74.6–99.6) than patients in EUC (51.7%; 95% CI = 32.4–54.32).
- Patterns of depressive symptoms over time were similar, as were results for a subsample of adolescents with diagnosed depression. Retention in ABFT was higher than in EUC (mean = 9.7 versus 2.9).

# HOW TO PROMOTE SECURE ATTACHMENT IN CHILDREN\*

#### Parents should strive to be:

#### **Emotionally Available**

Slow down and be present. Make sure to be 100% emotionally present some of the time (emphasizing quality over quantity).

#### **Perceptive**

Try to observe and understand how a child feels. Rather than projecting onto the child, learn them.

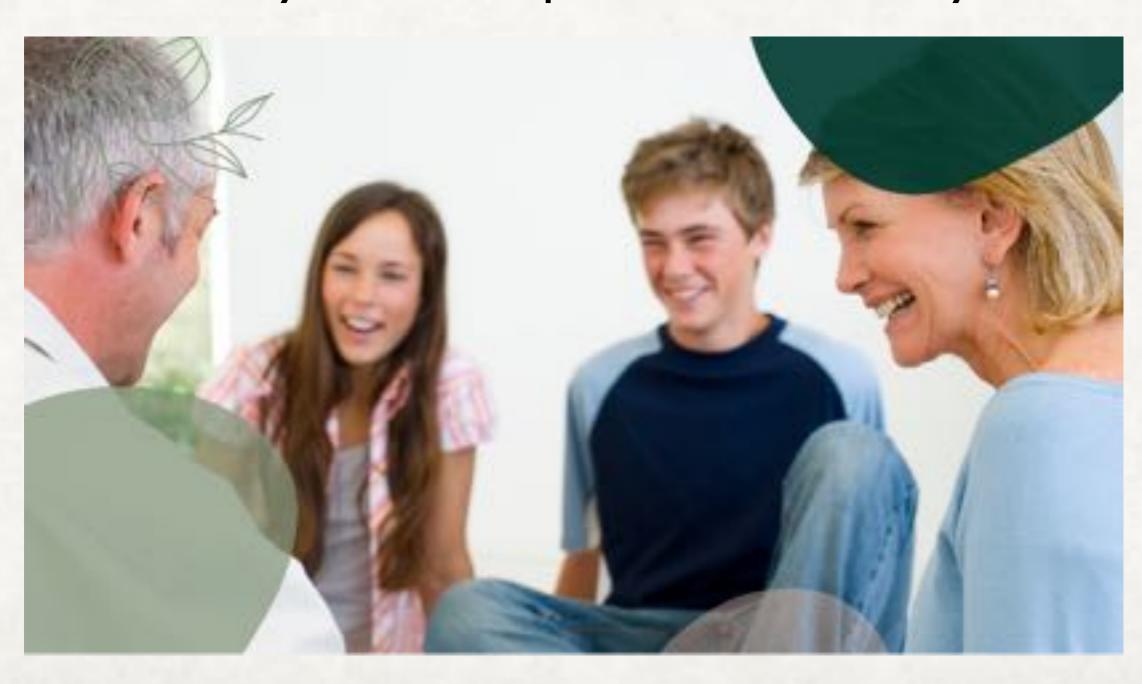
#### Responsive

Offer children a contingent response.



#### SECURE ATTACHMENT IN PARENTS

Parents need to resolve any unresolved trauma in their own life, so they can develop more inner security.

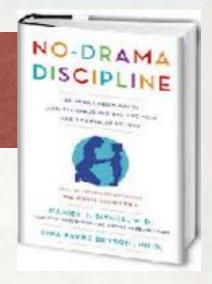


#### RAISING SELF-DISCLOSING CHILDREN

You can increase the likelihood you'll have a self-disclosing adolescent by establishing in childhood the message, 'There's nothing you could do, there's nothing you could feel, there's nothing that could happen to you, that if you told me about it, I would stop loving you.'

- James Garbarino, Ph.D.

## RUPTURE AND REPAIR

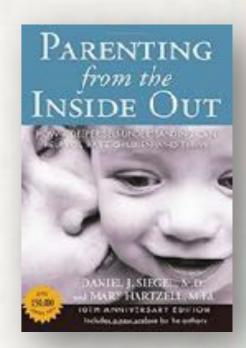






#### INITIATING REPAIR

FROM PARENTING FROM THE INSIDE OUT

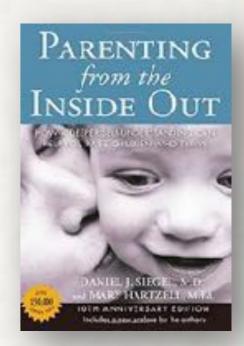


## The goal is to make a coherent story:

- Do not interrogate.
- Do not invalidate their experience.
- Listen to their experience before you share your own.
- Be open with them about your experience, what you felt, etc.
- Reflect back their experience.
- Explain meltdowns to them people temporarily "lose their minds."

### INITIATING REPAIR

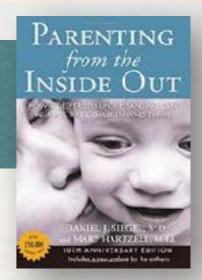
FROM PARENTING FROM THE INSIDE OUT



## The goal is to make a coherent story:

- Be open and non-defensive, encourage them to express their point of view.
- Get on the same physical level and make eye contact.
- Make a non-intrusive, empathetic attempt at the repair process.
- Be neutral, not blaming or judging.

#### TALKING ABOUT FEELINGS



Emotional relating requires a mindful awareness of our own internal state as well as being open to understanding and respecting our child's state of mind.

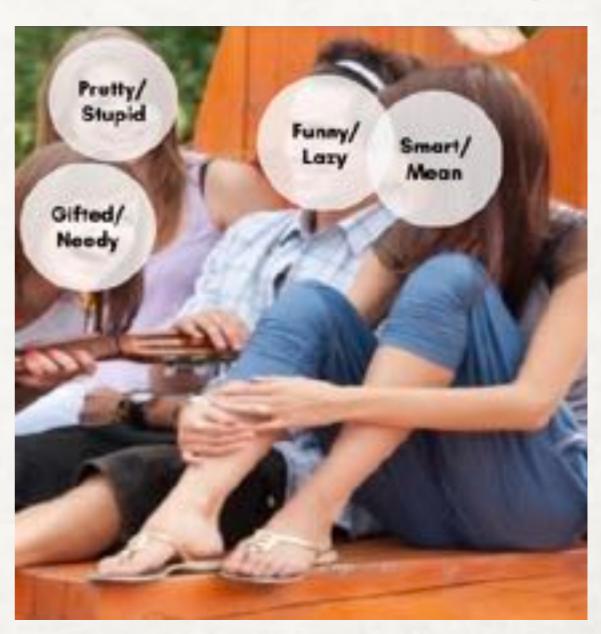


- Parenting from the Inside Out

### SEEING OUR KIDS CLEARLY

#### Our goal, as parents, should be to see our kids clearly.

- Acknowledge that your child is their own unique person, and they are separate from you.
- Recognize your child's strengths and weaknesses without being critical of them or building them up.



# THANKS!

# Any questions? Contact:

Glendon@Glendon.org

800-663-5281

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