
Understanding Adolescent Behavior Through a Trauma- Informed Lens

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Objectives

Refresh our memories about the importance of development.

Explore how we can see our clients more holistically.

Establish the importance of trauma-informed practices.

Reconsider the role addiction plays in the lives of our clients.

Consider putting together a puzzle.....

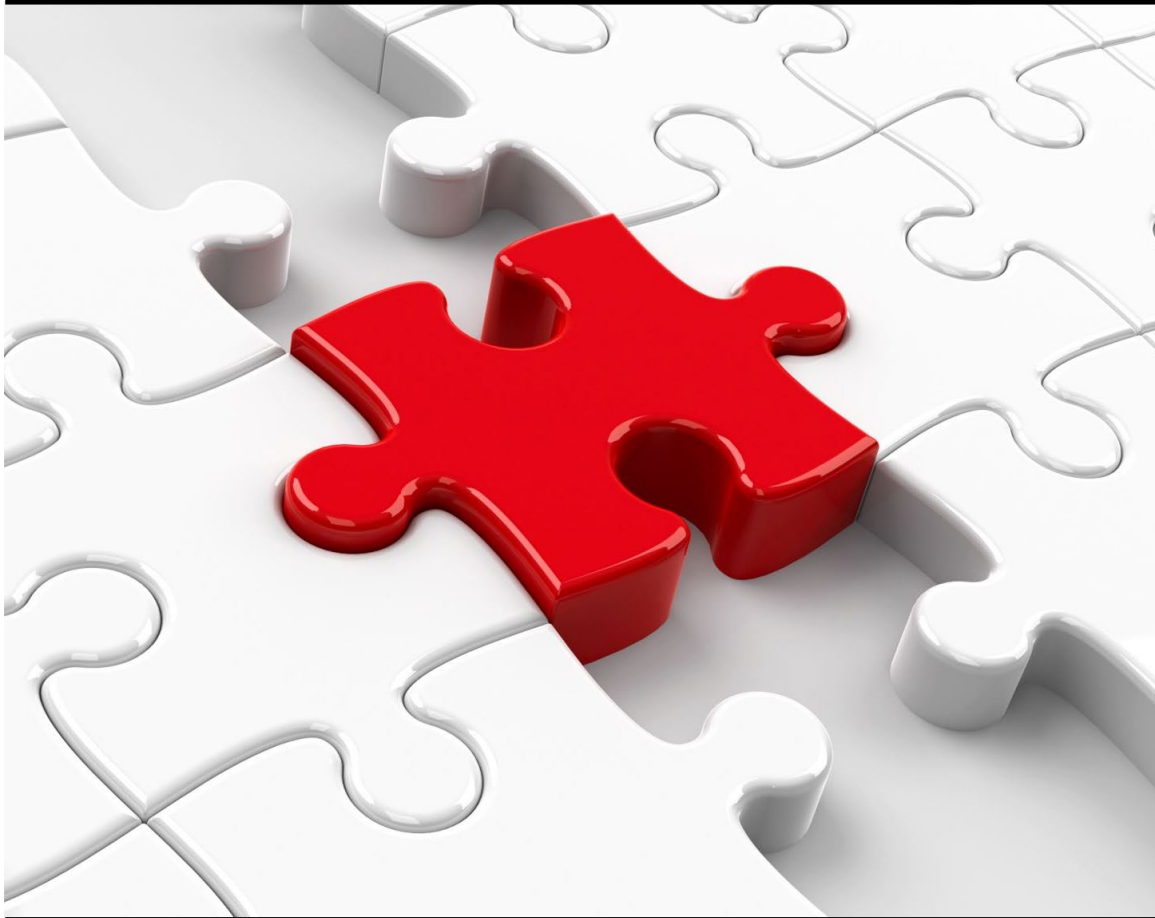
It comes in a box, revealing what the finished product is supposed to look like, but..

When opened, it is in unconnected pieces that appear to have nothing to do with one another, yet..

We need them ALL to complete the finished product.



Our clients & families are like puzzles.....



They arrive to us in many, sometimes erratic pieces that initially do not make any sense.

For us to serve them, it is essential that we learn about their lives, and try to understand their worldview.

The pieces

The border pieces to our client's puzzle include:

- Developmental level
- Social Determinants of Health
- Trauma History
- Attachments

The inside pieces include:

- Behaviors
- Addictions
- Biological Influences
- Social Influences



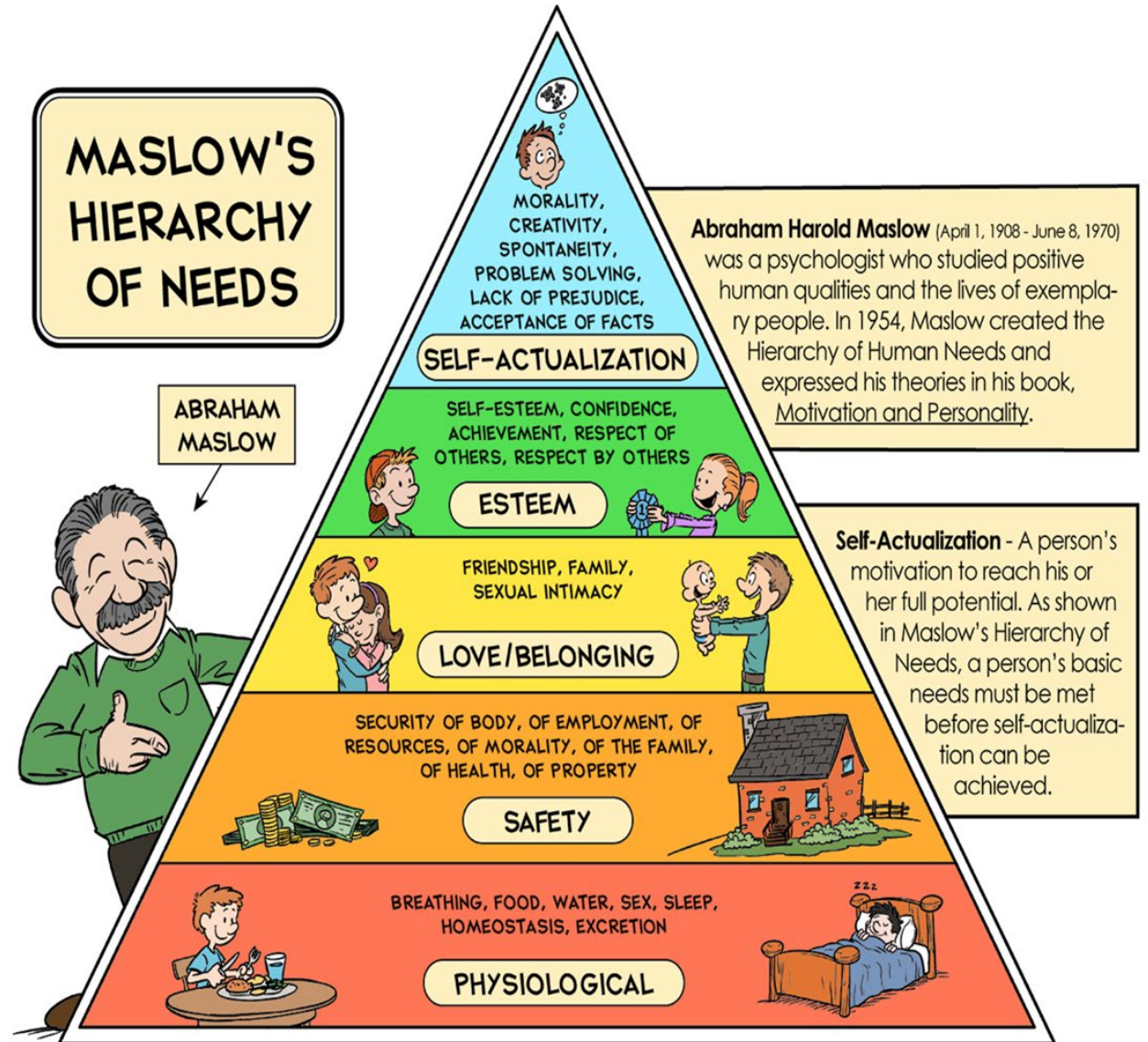
Let's bring this local

Think of a client that particularly frustrates you. Perhaps you have said the following about the client:

- *When will they learn?*
- *I'm tired of putting out fires (remember this for later)!*
- *What were they thinking?*
- *They keep making excuses.*
- *They don't care.*
- *I care more than them.*
- *Their desire to get high is more important than their freedom.*

*With this person in mind, consider try your best to apply the following content to their life and current situation.

Behavior Is The Result of Unmet Needs



Free Association

When you think of adolescent development, what comes to mind?

Development

Impulsivity

Puberty

Weighing risk and
reward

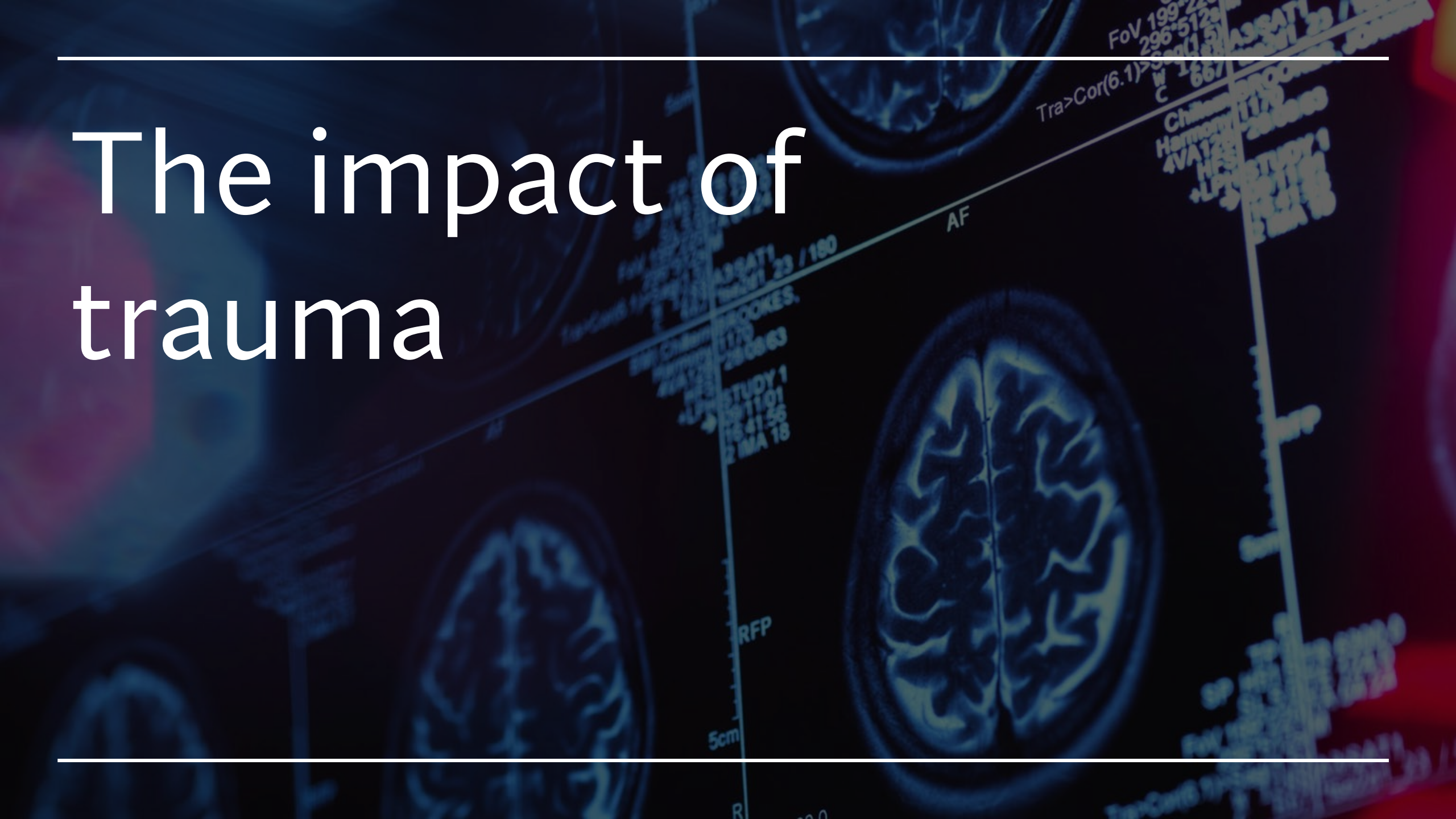
Short- and long-
term
consequences

Peer Influence

Risk seeking &
perception

Consider the role
of vulnerability
plays into
substance use

The impact of trauma



Where does Trauma fit into all of this?

Definition: Results from an event or series of events (complex trauma), or a set of circumstances that is experienced by an individual as physically or emotionally harmful or life-threatening and that has lasting adverse effects on the individual's functioning and mental, physical, social, emotional, or spiritual well-being. –Gabor Mate'

The 3 Es of Trauma

Events (The UCLA PTSD-Index Scale identifies 23 different possible events [victim, witness, or learn about])

Experience

Effects (short- & long-term)

*Trickett article....

The Adverse Childhood Experiences Study ([ACES], 1998) & the Philadelphia Study (2014)

1995-97

Published 1998

Kaiser Permanente

Obesity Clinic

50 % dropout rate

Success stories turn to relapse

17,337 adult (middle class) HMO
members surveyed

80% White

Almost 50% male

44% college educated

Health History

ACEs Questionnaire (10 questions)

ACES (1998)

Substance Abuse: 27%

Parental Separation/Divorce: 23%

Mental Illness: 17%

Abused Mother: 13%

Criminal Behavior in Household: 6%

Psychological Abuse: 11%

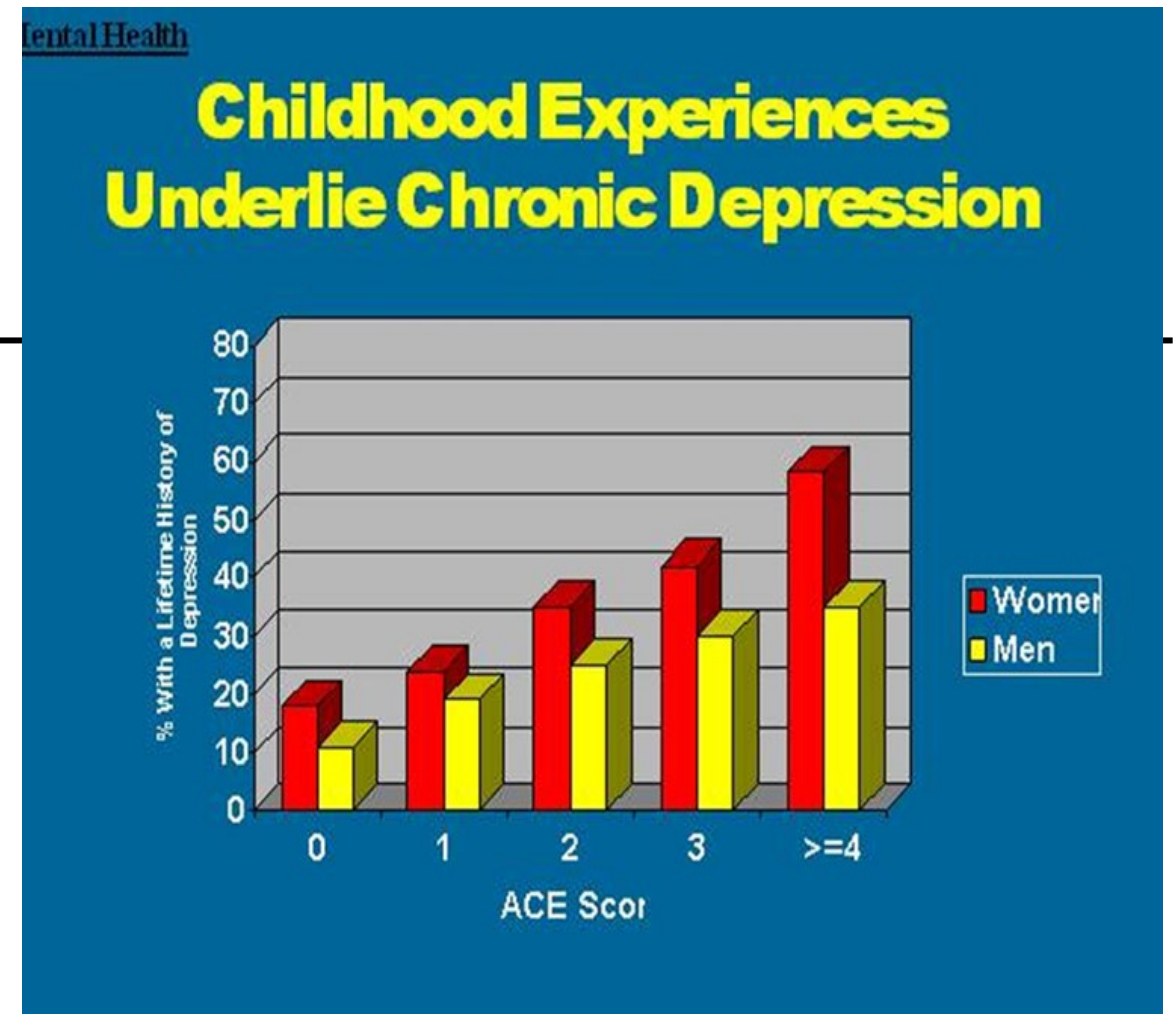
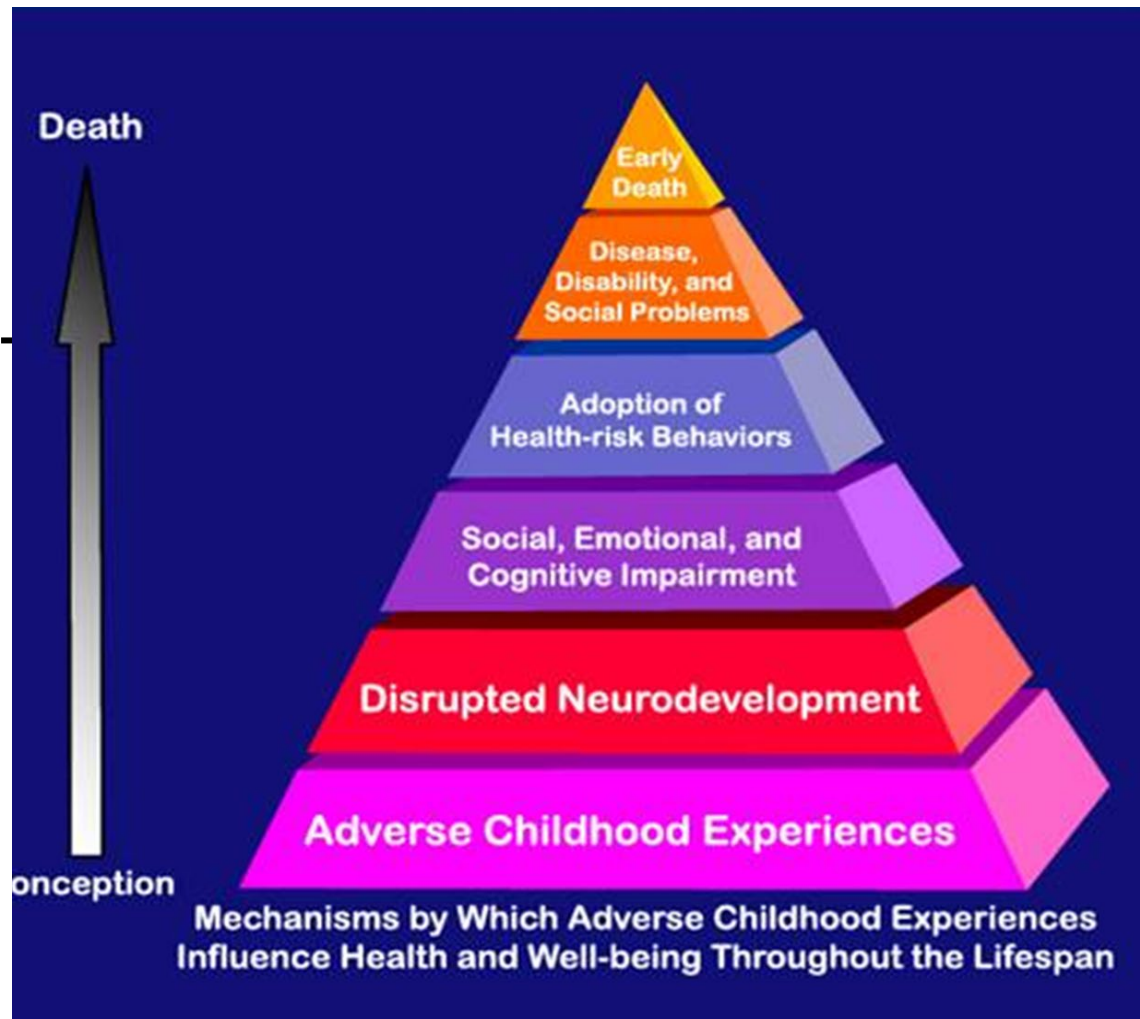
Physical Abuse: 28%

Sexual Abuse: 21%

Emotional Neglect: 15%

Physical Neglect: 10%

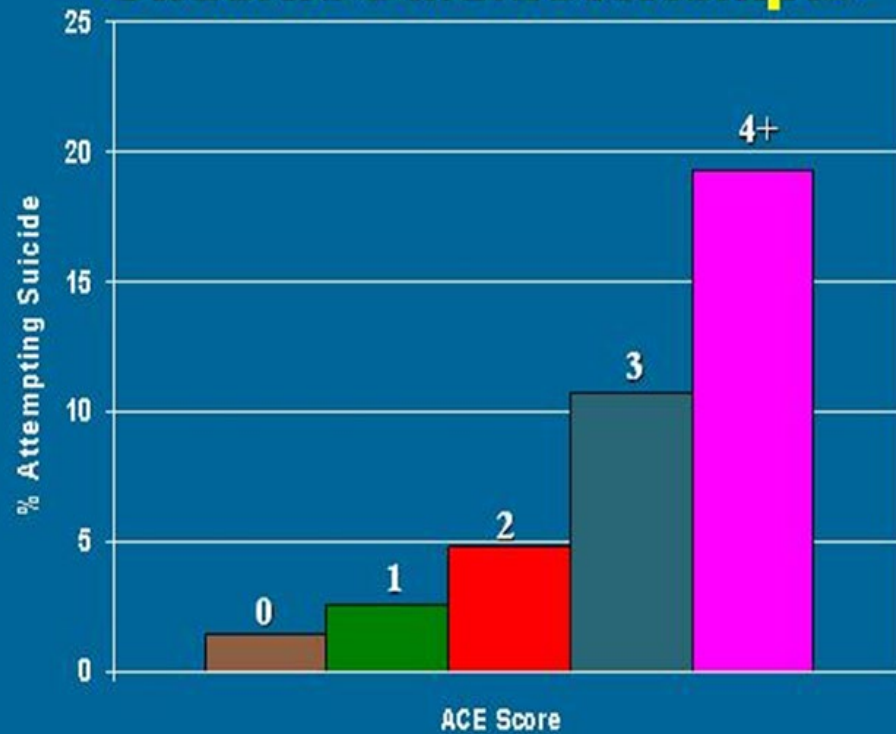
ACES (1998): Connection Time!



ACES (1998)

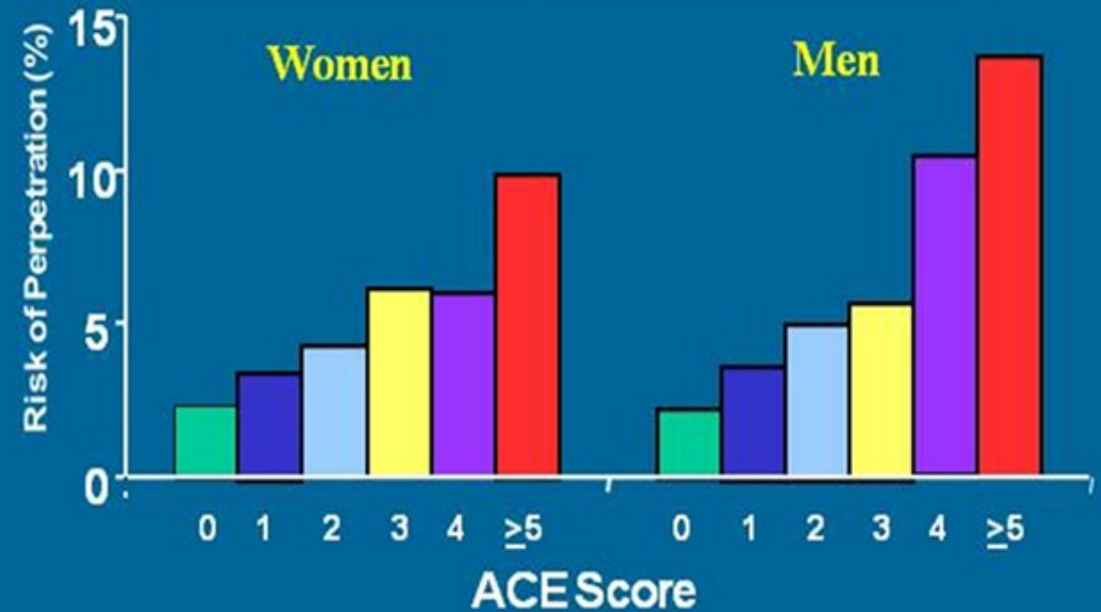
Mental Health

Childhood Experiences Underlie Suicide Attempts



Social Function

ACE Score and the Risk of *Perpetrating* Domestic Violence



The Philadelphia Study (2014)

Took the ACES to the urban environment (Rural communities)

Took SDoH into consideration

New Categories

- Bullying
- Foster Care
- Discrimination
- Neighborhood Safety
- Witnessing Violence

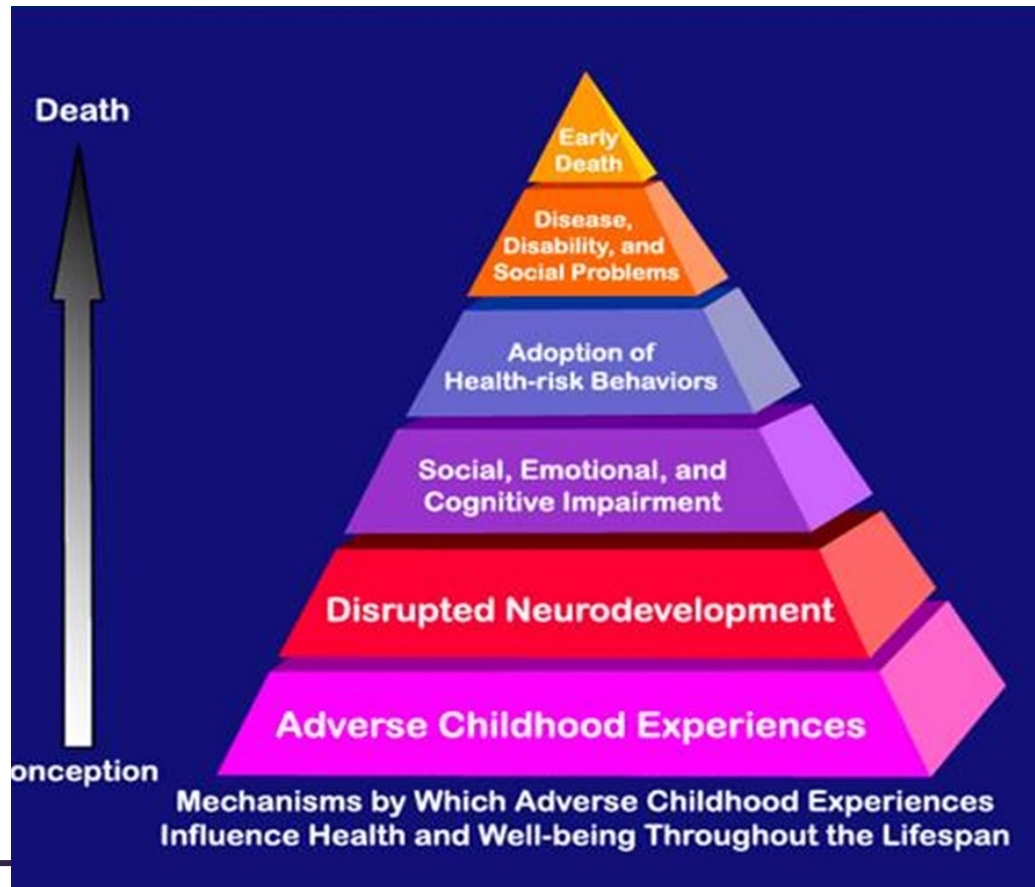
Racism and Health

- Racism is an expanded ACE and Social Determinate of Health.
 - Intergenerational impacts of trauma associated with discrimination.
 - Racism both structural and interpersonal are implicated in health inequities, disparities, and disease
-

Racism and Health

- Compared to White Americans, racial and ethnic minorities experience higher rates of:
 - Diabetes (link to depression)
 - Hypertension
 - Obesity (impact on all body systems & consider the lack of access to quality nutrition)
 - Asthma (hormones)
 - Heart Disease
 - COVID-19
 - Strong link to death by suicide (consider depression, SUD, & trauma)
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Remember.....



Black/African-Americans have a life expectancy four years lower than White Americans

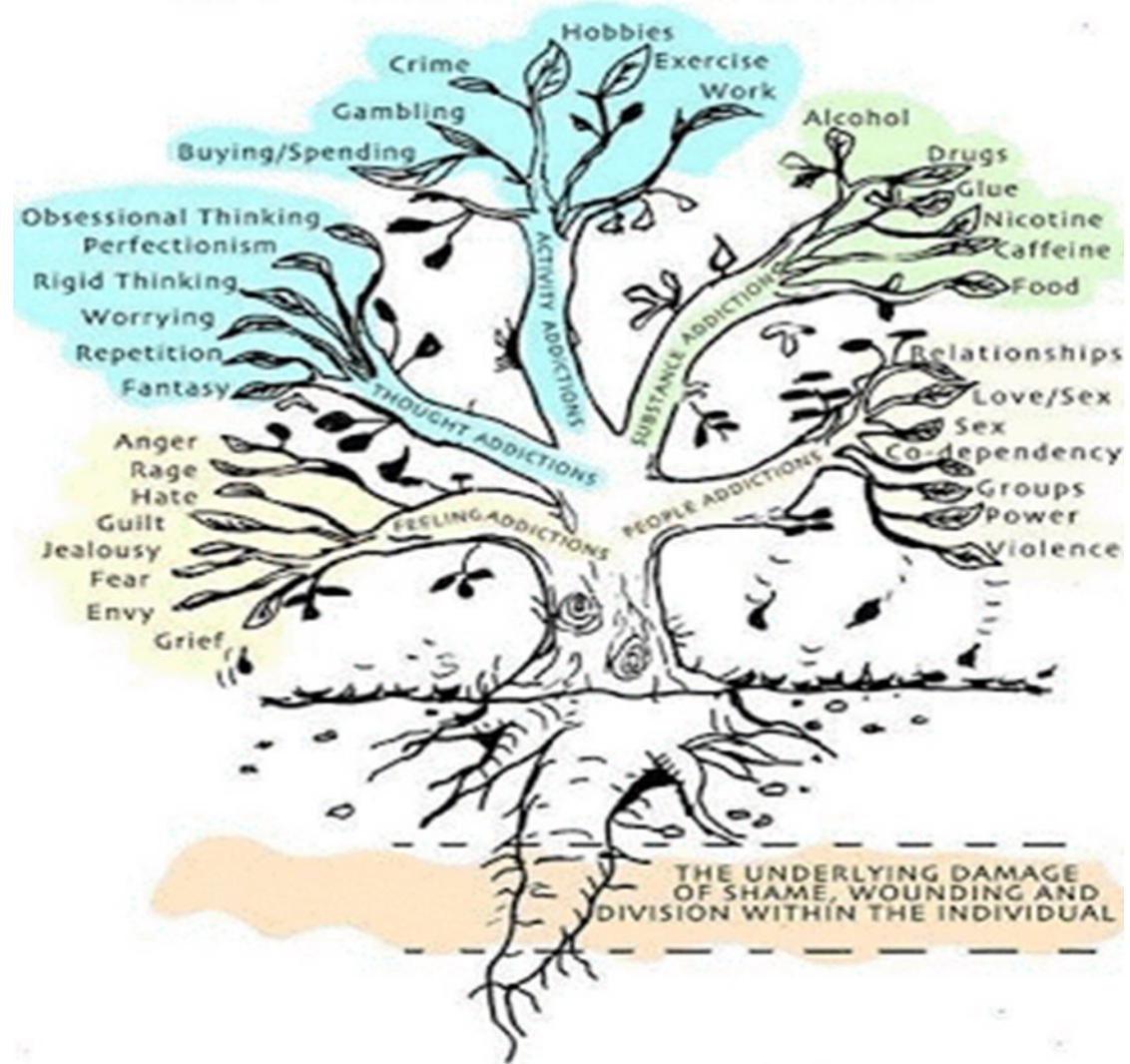
Addiction

Any repeated behavior, substance-related or not, in which a person feels compelled to persist, regardless of its negative impact on their life and the lives of others (Mate' 2010).

Addiction involves:

- Compulsive engagement with the behavior, a preoccupation with it;
- Impaired control over behavior;
- Persistence or relapse despite evidence of harm; and
- Dissatisfaction, irritability, or intense craving when the object is not immediately available

THE ADDICTION TREE



The Addiction Tree

- *Internal Family Systems Therapy sees addictions as the person's firefighters.*
- *Consider what they are trying to extinguish.....*

It's Complex! Addiction is not a single entity!

Addiction Kaleidoscope

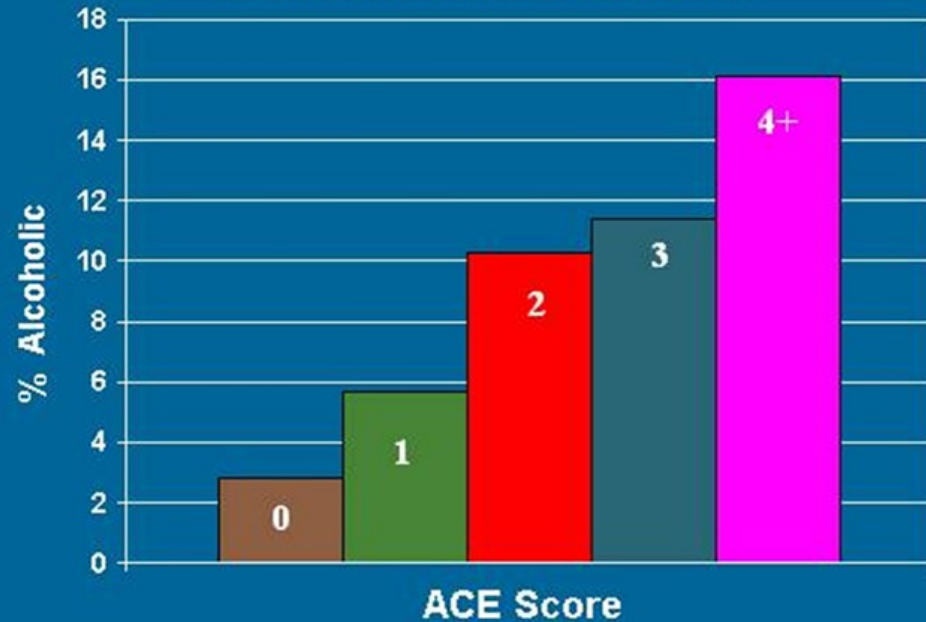
- Biological
- Neurological
- Psychological
- Medical
- Emotional
- Social
- Political
- Economic
- Spiritual



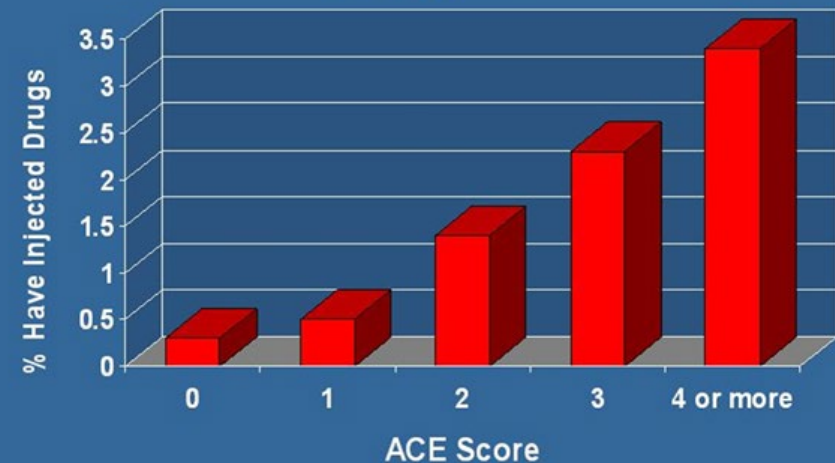
ACES & SUD/Addiction Connection

HealthRisks

Childhood Experiences vs. Adult Alcoholism



ACE Score and Intravenous Drug Use



N = 8,022 p<0.001

What could a recovery tree look like?



Clinical Skills



Developmentally Informed Approaches

Remember that adolescents rely on the support of adults, but also acknowledge striving for autonomy

Emphasize adolescent learning styles, using energetic and fun activities while preserving therapeutic content

Management of disruptive behavior is expected and essential, balancing limits and looseness

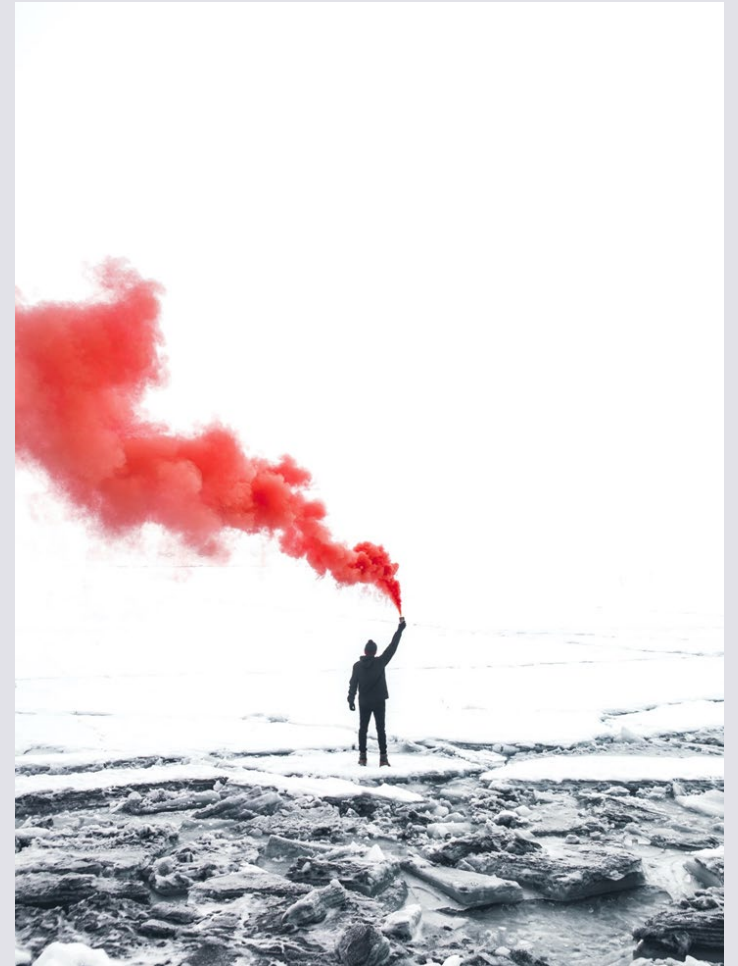
Acknowledge normative attraction of thrill-seeking, risk, deviance

Prioritize rewards and praise

Emphasize prosocial alternatives to drug use

Weave a safety net of supports families (or surrogates), but expect disdain

Relationship, relationship, relationship....



How we arrive matters!

No matter the evidence-based practice, it starts and ends with the relationship

Please consider...

Delivery and Language Matters

Current

Alternative

Reasoning

Clients,
patients,
offenders

- The people in our program
- The youth we work with
- Participants

More inclusive, less stigmatizing

Alex is an addict

- Alex is a person with a substance use disorder
- Alex is in recovery

Reduces stigma and shame. Put the person first
Avoid defining the person by their disease

REFRAMING NEGATIVE BEHAVIORS IN A MORE SOLUTION-FOCUSED MANNER

Mathew is
manipulative

- Mathew is trying really hard to get his needs met
- Mathew may need to work on more effective ways of getting his needs met

- Take the blame out of the statement
- Recognize that the person is trying to get a need met the best way they know how

Kyle is
non-compliant

- Kyle is choosing not to...
- Kyle would rather...
- Kyle is looking for other options

Describe what it looks like uniquely to that individual – that information is more useful than a generalization

Mary is
resistant to
treatment

- Mary chooses not to...
- Mary prefers not to...
- Mary is unsure about...

Avoid defining the person by the behavior
Remove the blame from the statement

Jennifer is in
denial

- Jennifer is ambivalent about...
- Jennifer hasn't internalized the seriousness of...
- Jennifer doesn't fully understand...

Remove the blame and the stigma from the statement

Strength-Based Statements

- Can you talk to me about other people in your life that have been in this situation...
 - How has this helped you and how has it hurt you?
 - What is your understanding about the concerns we have for you...
 - How might you know it is time to make a change?
 - What is your best guess about what it would be like to trust yourself again?
 - Change is a hard process and I look forward to walking with you on this journey.
-

Discussion Opportunity

What questions or comments might you have?

THANK YOU!!!
