Adolescent Treatment and Recovery, Part 4:
Navigating Self and Other Regulation

Presented by Janys Murphy Rising, PhD, LMHC, SUDP

Adolescent Treatment and Recovery Specialty Online Training Series
Part 4
Navigating Self and Other Regulation in Adolescent Co-Occurring Treatment
Presented by:
Janys Murphy Rising, PhD, LMHC, SUDP

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Navigating Self and Other Regulation in Adolescent Co-Occurring Treatment.
Janys M. Murphy Rising PhD, LMHC, SUDP
NAADAC, Summer 2022
Adolescent Treatment and Recovery, Part 4: Navigating Self and Other Regulation

Objectives

- How can I be a resource to my adolescent client?
- How can I be a resource to the adolescent caregiver?
- How can I be a resource to myself as I work with an adolescent and their caregiver?
- Our adult minds support and shape adolescent development. Looking within can help build support.

Ego Identity vs. Role Confusion

- 12-18, later said 12 to end of life (Knight, 2017)
- Who am I & Where do I belong?
- An intense time of soul searching & self-examination
- Adolescents who successfully weather an identity crisis emerge as their own persons as people who have achieved a state of ego identity.
- Ego identity continues to develop throughout life.
- “Who are they... the puer and the puella (Shalit, 2011)?”

Adolescence and SUDS

- “Adolescents who identify with values of self-transcendence, openness to change, and self-promotion employ more adaptive decision-making strategies.” (Páez et. al, 2020).
- 75% of adolescents in treatment for substance use also have a co-occurring psychiatric disorder (Atkins, 2021).
- Common factors that are considered in treatment for adolescents include an emphasis on refusal skills, social skills and decision-making skills, as well as cooperation and involvement with peers, parents, and community members (Capuzzi & Stauffer, 2020).
- “To navigate this important developmental stage, adolescents often explore aspects of self and others in ways they previously did not.” (Capuzzi & Stauffer, 2020).
- Insecure attachment linked to depression and conduct disorder in adolescence (Atkins, 2021).
Reflection

• If you could travel back in time to speak to your adolescent self, what advice would you give to them?

Theory

• Dialectical Behavior Therapy (Validation)
• Multi-dimensional Family Therapy (Resolving parent-adolescent conflict)
• Motivational Interviewing (Meet the adolescent where they are at)
• Transactional Analysis (Study of social transactions between individuals)
• Interpersonal Neurobiology (human connections shape neural connections)

Interpersonal Neurobiology

• Brainstorm (Siegel, 2013)
• Interdependencies
• Development and recovery embedded in adult relationships that are resources
• The limbic nuclei will not develop normally without love and nurturance
• Parent behavior influence by past and current experiences
Brainstorm

• Understanding the important aspects of adolescence helps us create vitality now and throughout the lifespan (Siegel, 2013).
• The way that the brain grows in adolescence can help us make the most of the opportunities that this time in life affords us.
• Relationships at this stage in life shape our sense of identity, and when examined can create stronger connections for ourselves and others.
• These challenging times are best navigated by being present and receptive, which allows an inner knowing of our interpersonal experiences.
• When we explore our own projections and practice self-regulation, we role model this for adolescents and caregivers alike.

Brainstorm from birth to 30

• Pruning begins at 11-13 years of age
• The healthiest and most dangerous time of life
• Identity formation
• Conflict in parent to adolescent communication thought to be connected to difference in brain development- adolescence reads anger when there is none.

The Second Wave

• The vast majority of brain development occurs in two basic stages: growth spurts and pruning.
• “This is a process that we knew happened in the womb, maybe even in the first 18 months of life,” explains neuroscientist Dr. Jay Giedd at the National Institute of Mental Health.
• “But it was only when we started following the same children by scanning their brains at two-year intervals that we detected a second wave of overproduction.”
• This second wave – occurring roughly between ages 10 and 13 – is quickly followed by a process in which the brain prunes and organizes its neural pathways. “In many ways, it’s the most tumultuous time of brain development since coming out of the womb,” says Giedd.
• What does this mean for counselors working with adolescents?
Adolescent caregivers and SUDs

- Developmentally adaptive parenting considers age, maturity, and personality of adolescent, environment, and parental goals, parenting styles, culture.
- Counselors should identify parenting behaviors that are effective and support the parental development that is concurrent to adolescent development (Capuzzi & Stauffer, 2016).
- "Noted experts in adolescent development have long supported the notion that the developing adolescent needs to be considered in context— to include developmental and environmental considerations," (Capuzzi & Stauffer, 2016).
- Providing choice with caregiving gives adolescents a sense of control which is needed to help them individuate and provide autonomy.

Multidimensional Family Therapy

- Family members of substance using adolescents are also seriously impacted (Tremblay, 2012).
- Supportive parenting provides significant protective factor in reducing relapse.
- Family involved treatment is essential and increasingly common.
- MDFT focused on reducing adolescent-parent conflict (including conflicts in session).
- Family therapy has more immediate and long-term results.

Second Reflection

- It is hypothesized that this “pruning” occurs at 11 years of age for girls, & 12 for boys. What this means is that the brain begins to “specialize.”
- Think back to what you could do at this age. Jot down a few activities (reading, riding bikes, for example).
- In pairs, talk about these activities. Share if these are activities that you still do now. If so, why or why not? Do you think that you could just pick up this activity again, as in, specialize?
ACE Study: a Paradigm shift

Mechanisms by which Adverse Childhood Experiences influence health and well-being throughout life

Trauma and Substance Use Disorders

While some adolescent use chemicals to get high, trauma survivors use them to just get by.

“Go system”
Addiction treatment needs to meet their current level of development.
Ask “what happened.” Not “what is wrong?”

Transactional Analysis
Listen beyond the defensive reaction

Remember that you and the environment is embedded in their identity building

Use Mindsight (Siegel, 2013)

Teach adolescents how to surf their own emotional wave

Encourage prosocial behaviors linked to higher self-esteem, academic success, and relationship satisfaction.

Imagine their future self with them

Pay attention to your own presence

They read anger in faces where there is none

Know your own "triggers" and emotional state to respond rather than react

Be consistent

Predictable

Create routines and rituals

Teach RESILIENCE

The ability to recover from or adjust to change

Support mastery of skills

Support social and emotional connections - they are built to be collaborative to find connections with each other.

Build a relationship with the parent if possible
Invitation to Consider

- Find ways to take care of your own child, parent, and adolescent part so that you can be more present with your ability to respond and be in your adult part as consistently as possible with your patient (transactional analysis).
- Be aware of these internal states so that you can notice when they show up in the session, and how they either inform or impede the counseling milieu.
- Increase your own skills to be more in service of clients (DBT, Mindsight)
- Create rituals to support prior loss at this age and stage.

Questions?

Cost to Watch:
$25
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  By: John McAndrew, LADAC

- August 19th, 2022
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  By: Beck Gee-Cohen, MA, CADC-II and Jordan York, LCESW

- August 24th, 2022
  Sexual History in Personal Recovery
  By: John Paulson, ACSW, LCSW, MAC, LDAC and Veronica Huggins, PhD

- September 2nd, 2022
  Adolescent Treatment and Recovery, Part 6: Pitfalls on the Road to Excellence in Counseling Adolescents
  By: Robert Schwebel, PhD

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