

Parents Academy

Treating the Adult Adolescent

**Andrea G. Barthwell, MD, FASAM
CEO and Founder of Two Dreams**

**Adolescents and Young Adults:
A Paradigm Shift in Treatment**

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Disclosures

- No conflict of interest with this content
- Consultant: Braeburn Pharmaceuticals
- Director: Two Dreams



Objectives

- Describe path to use, abuse, and dependence
- Explain developmental tasks of adolescence
- Explore parenting for development
- Understand variables to use



Objectives, continued

- Minimize enabling feelings, beliefs and behaviors
- Encourage growth and responsibility
- Outline potential consequences of potential insults
- Create recovery plan

Major Forms of Drug Use

- Alcohol Use
- Cocaine Use
- Hallucinogen Use
- Heroin Use
- Inhalant Use
- Marijuana Use
- Methamphetamine Use
- Sedative-Hypnotics and Anxiolytics Use
- Nicotine Use



**STOP
Turn
Back**

**Community
Coalitions**

**SDFS
CSAP**



The Lure and the Trap

- Start to use drugs
- Pleasure experienced



Path to Addiction



- Innocent beginning
 - Minor effects
 - Pleasurable effects
 - Cannot “unlearn”
- Continued social use
 - Unpleasant effects diminish
 - Economic costs minimal
 - No interference with activities

Path to Addiction

- Line crossed
 - Consequences increase
 - Use to feel normal
 - Hard to connect experience to drugs
- Majority of students, no observable major consequences

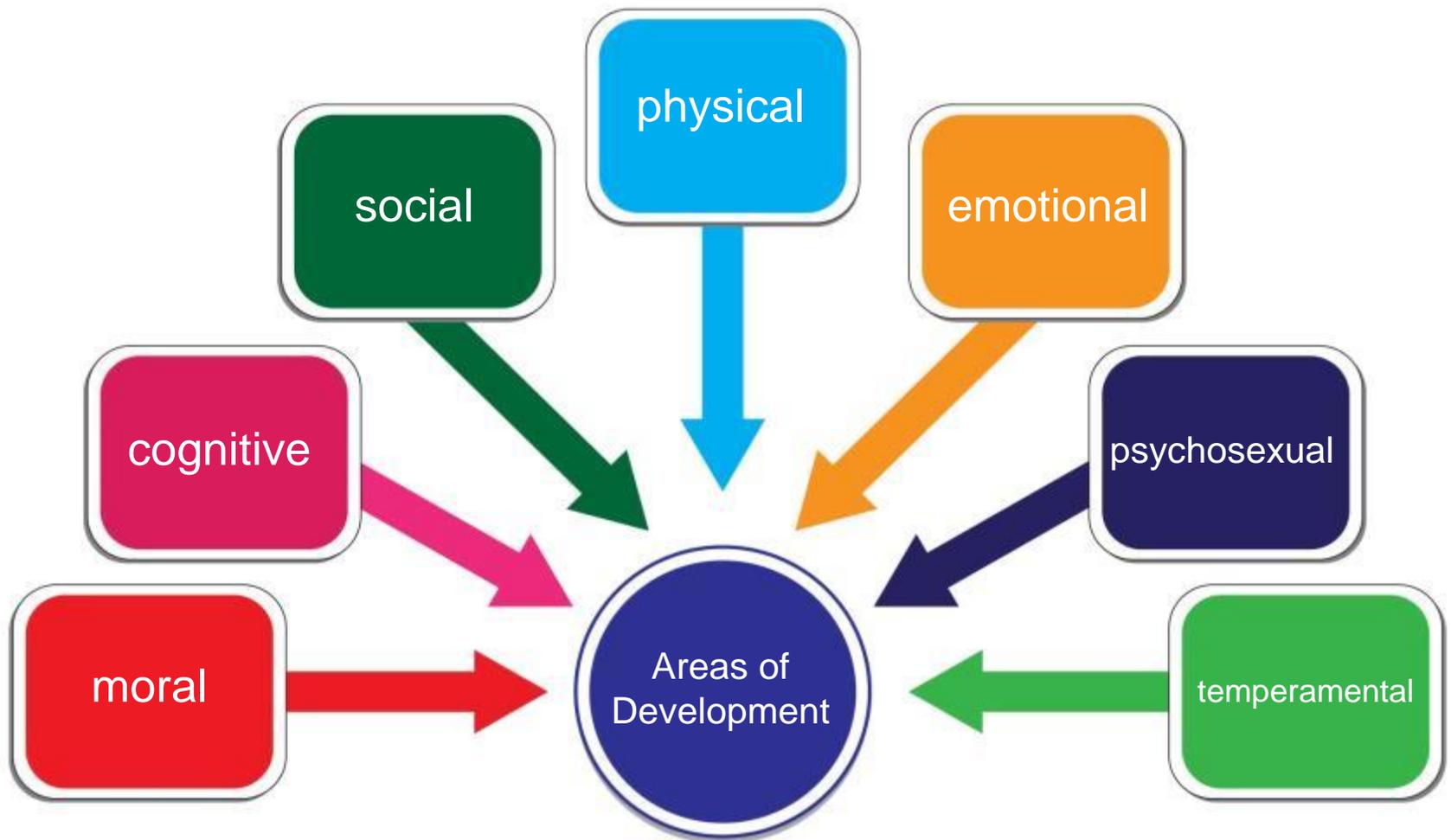


Why Use a Developmental Model?



- To assess
- To encourage and promote growth
- To understand

Seven Areas of Development





Four Tasks of Adolescence

- Seven areas translate into four major areas where major developmental tasks are defined as:



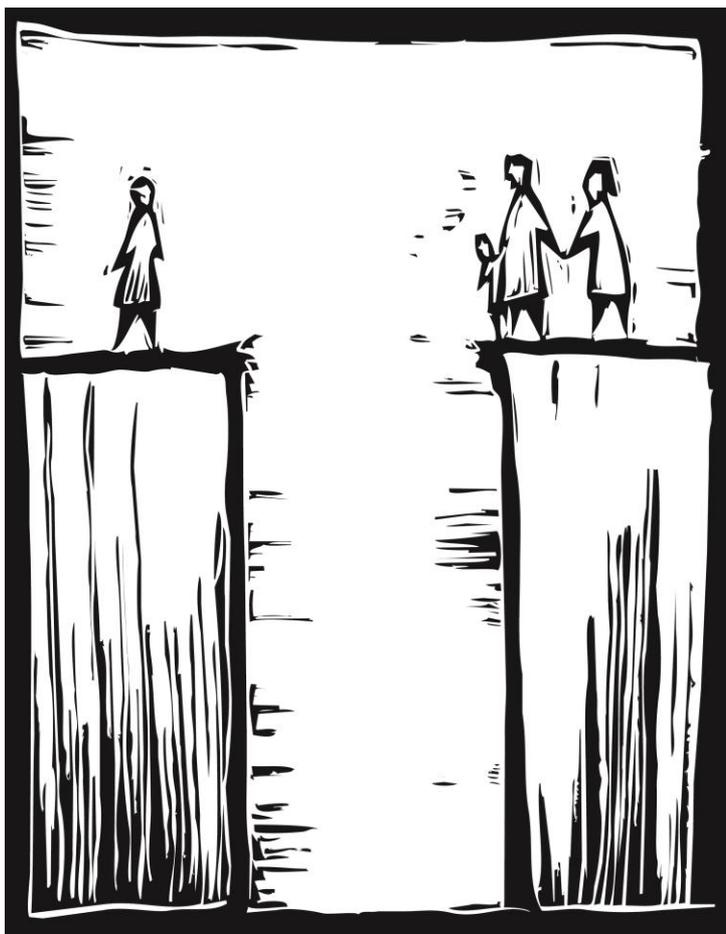
Goals of Development are Balanced by Preoccupations of Adolescence



- Sexual identity
 - Body image (fertility)
- Self identity
 - Friends
- Separation
 - Independence (family)
- Vocational selection
 - Value clarification (future)



Early Adolescence



- First efforts at separation
- Recognition of non-perfect parent and rebellion against them
- Strong identification with peers

Early, continued

- Abstract thinking
- Verbalization of values
- Mood swings
- Difficulty with impulse control
- Insecurity about body changes





Middle Adolescence



- Peak of rebellion
- Transition from parental to peer direction
- Increased sexual interest

Middle, continued

- Difficulty with postponement of gratification
- Increased cognitive abilities
- Values clarification





Late Adolescence



- Firmer identity
- Increased ability to express emotions
- Increased ability to postpone gratification

Late, continued

- Resolution of relationship with authority figure
- Increased emotional stability
- Increased self reliance



Why Use a Developmental Model?



- To assess
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- To understand

Parenting



- Description
- Security v. Freedom
- Limits
 - Clear
 - Age Appropriate
 - Earned
 - Growth Oriented

Good Consequences

- Related
- Reasonable
- Timely
- Escalate
- Consistently applied
- Calmly applied



Bad Consequences



- **Revengeful**
- **Self-punishing**
- **Empty**
- **Shaming**

Why Kids Use: Contrasting Views



Parents

- School
- Parents
- Peers
- Pushers
- Media
- Police
- Role Models

Adolescents

- Feelings
- Fun
- Risk Taking
- Thrill Seeking
- Autonomy
- Experimentation
- New Identity



Variables to Experimentation

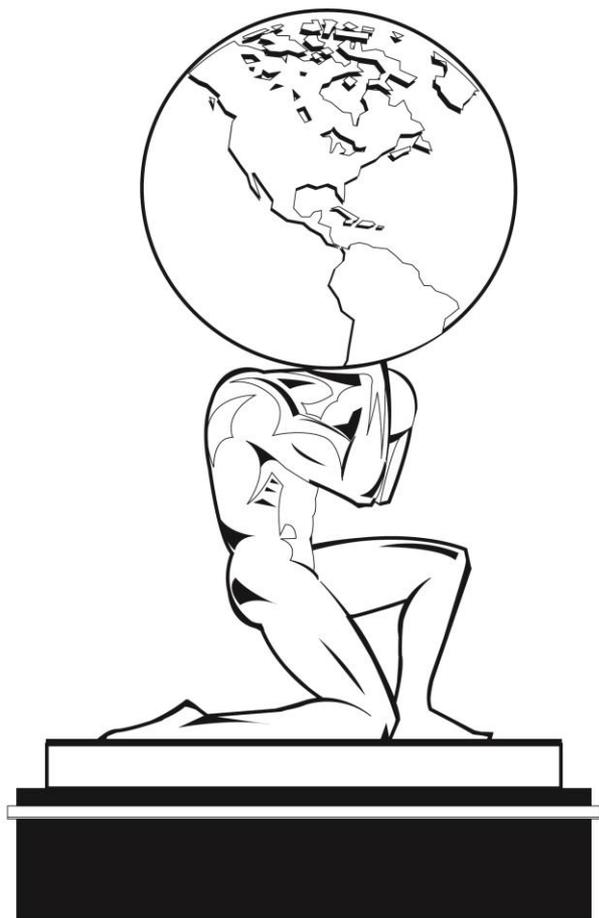
- Availability
- Access
- Perceived Risk
- Prior Use
- Peer Use
- Respect Norms

Enabling: Feelings

- Protective instinct
- Self-doubt
- Fear
- Performance anxiety
- Anger



Enabling: Beliefs



- Pressures are too great
- I am not relevant
- All kids do it
- I love, therefore, I trust



Enabling: Behaviors

- Keeping secrets
- Avoiding conflict
- Shielding from consequences
- Doing their work





Adolescents' Responsibilities

- Feelings
- Behaviors
- Performance
- Social life
- Outside life
- Future



Teaching Adolescents



- Modeling
- Reinforcement
- Consistency
- Encouraging
- Patience
- Allowing mistakes



Health
Consequences
Ahead

DEAD END
AHEAD

CAUTION

STOP

Consequences Early

- Ambivalence about separation
- Persistent anger
- Self harming behaviors
- Rebellious peers/subculture
- Doubts



Early, continued



- Frustration and isolation
- Inability to deal with the abstract
- Confusion
- Inability to learn from experiences

Consequences, Middle



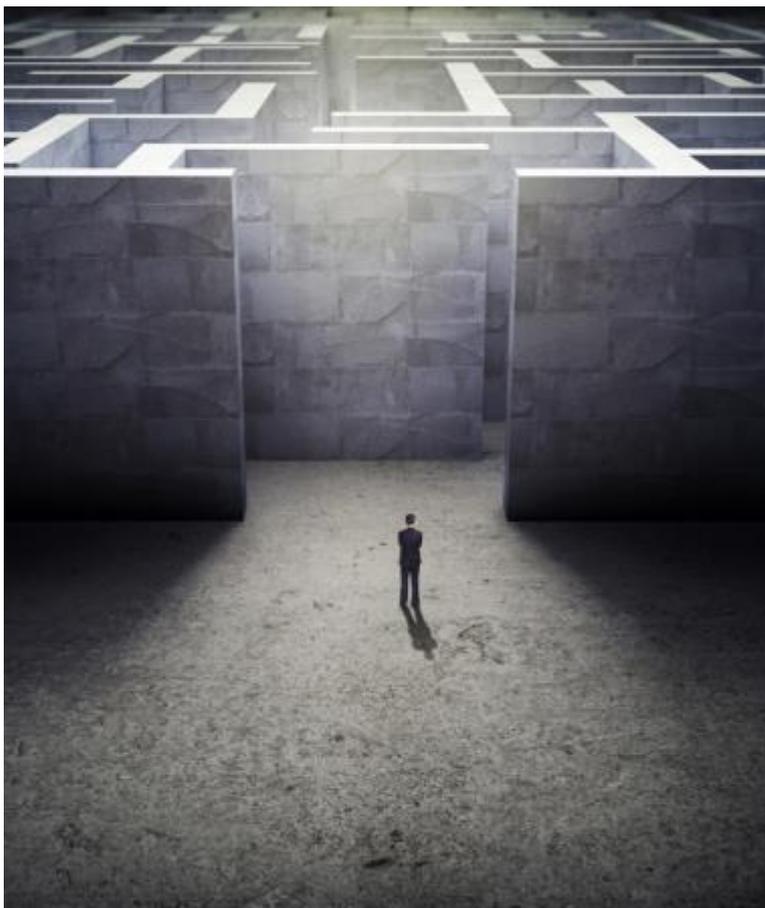
- Struggles with parents
- Self involvement
- Peer approval seeking
- Active sexual fantasy life

Middle, continued

- Inability to postpone gratification
- Unable to abstract
- Poorly defined moral values
- Inability to use wisdom and to evaluate situations according to one's values



Consequences, Late



- Minor adult disturbances
 - Unresolved relationship and identity issues
 - Expression stunted
 - Unable to postpone gratification
 - Persistent emotional instability
 - Personal responsibility lags
 - Ability to make choices confused

Late, continued

- Mood swings
- Difficulty in defining vocational goals
- Deficits in formulation of moral, religious, and sexual values



Denial as a barrier

- Simple
- Minimizing
- Blaming others
- Rationalizing
- Hostility

Layers of Denial

- Arguing the evidence
- Minimizing the facts
- Denial of responsibility

Function of denial

- ego defense mechanism(s) which ward(s) off discomfort caused by repeated emotional injuries, results in poor treatment outcome and is a major obstacle in diagnosis

Signs, symptoms and risks

- early v. late
- biomedical
- psychological
- sociological

Interview

- assess for use the consequences
- assess for consequences then use

ASAM PPC- the biomedical

- AIW
 - use and withdrawal
- BM
 - acute and chronic
- EB
 - feelings and behaviors

ASAM PPC- the clinical

- TAR
 - insight and compliance
- RP
 - skills and symptoms
- RE
 - support and structure

If not motivated

- apply Prochaska and DiClemente's "Stages of Change"
- Precontemplation
- Contemplation
- Preparation
- Action
- Maintenance
- Relapse

Precontemplation

- Not considering change
- determine why this has come up
- acknowledge thoughts, fears, concerns, and prior efforts
- explore previous experiences
- explore advantages of quitting

Contemplation

- considering change, but ambivalent
- explore advantages and disadvantages
- discuss goals
- investigate reasons for wanting change
- evaluate barriers to success and resistance to change

Barriers

- ignorance
- personal choice
- denial
- defiance
- fear of failure
- fear of success

Preparation

- wants to change, has made some efforts, has had some successes
- support motivation
- select strategies
- structure plan with patient
- provide detoxification
- encourage commitment to action
- give clear message about necessity to quit

Action

- has had extended periods of abstinence
- seek commitment to a specific behavioral change
- focus on identifying relapse triggers and strategies
- support progress
- explore relationship to chemical
- provide treatment within discipline

Maintenance

- stable abstinence
- identify relapse triggers and specific countermeasures
- help patient identify self-defeating behaviors
- explore personal growth
- monitor health

Relapse

- starts using after period of abstinence
- reduce feelings of shame
- identify barriers to success
- thoroughly explore relapse triggers and events around relapse
- move back to preparation
- Involvement

Developmental Model for Assessing Participation

- Involvement
- Abstinence
- Respectful
- Accountable
- Engaging Family/ Support

Involvement

■ I

- attending minimal number of sessions
- working with treatment provider to develop list of meaningful goals

Involvement con't

- II

- discussing consequences of drug use in sessions

- III

- discussing personal issues in group
- identifying interpersonal issues which may block progress in treatment

Abstinence

■ I

- urine toxicology negative
- no use

■ II

- avoiding behaviors which increase risk of use

■ III

- not seeking prescription drugs

Respectful

- |
 - knowledge of code of ethics
 - no violent behavior
 - soliciting support
 - offering support

Respectful con't

■ II

- behaviors consistent with code of ethics
- identifying behaviors which stimulate interpersonal conflict

■ III

- no attempts to manipulate or lie

Accountable

■ I

- signs treatment contract
- articulates expectations of treatment

■ II

- identify consequences of drug use
- identifies how behavior in treatment impacts others
- identifies how behavior contributes to interpersonal conflict outside of treatment

Accountable con't

- III

- identify obstacles to progress in treatment
- responsibility for promoting the treatment alliance

Encouraging Involvement

■ I

- working with treatment personnel to identify people important to success

■ II

- demonstrating to immediate household contacts a desire to have them involved in treatment
- demonstrate knowledge of enabling behaviors

Encouragement con't

- III

- reduction in number and frequency of enabling behaviors

Treatment

■ Phases

- Coming In
- Looking In
- Looking Out
- Mature Recovery

Coming In

- Stop Use

Looking In

- Recognize a Problem Exists
- Commit to Recovery
- Assess Life Problems

Looking Out

- Manage Craving
- Manage Relationships
- Reintegrate

Mature Recovery

- Abstinent
- Free of All Drugs
- Well-learned Habits of Avoiding Dangers
- Ample Social Networks
- Solid Intimate Relationships

Mature Recovery (con't)

- Healthy Recreation and Relaxation
- Employment and Career Development
- Philosophy of Life
- Key Activities or Interests
- Acceptance of the Past

Model Treatment Programs

- Bio-behavioral assessment
- Detoxification considerations
- Counseling
- Medical treatment
- Psychiatric care
- Referral to wrap around services
- Long term follow-up





Resources

- ASAM website for PPC (<http://www.asam.org/publications/patient-placement-criteria/ppc-2r>)
- NIDA (<http://drugabuse.gov/>)
- Two Dreams (<http://www.twodreams.com>)
- Dr. AGB (<https://twitter.com/dragb>)
- Dr. AGB Goes to Back Rehab (<http://drbarthwell.wordpress.com/>)
- The Challenge in Higher Education: Confronting and Reducing Substance Abuse on Campus (https://www.ncjrs.gov/ondcppubs/publications/pdf/challenge_higher_e_d.pdf/)
- Teenage Drug Use Checklist (<http://timetoact.drugfree.org/know-get-focused.html>)
- Parents Toll-Free Helpline (<http://timetogethelp.drugfree.org/learn/helpline>)



Thank You!

Questions?