



# BUILDING THERAPEUTIC RELATIONSHIPS WITH ADOLESCENTS



# MY BACKGROUND

I owe my career trajectory to Dr Phil...yes that Dr Phil!

Through his show, I discovered a treatment center for adolescent girls in Guthrie. I reached out to them, and was immediately hired in 2007.

Spending time with the teens in the program was eye opening, humbling, and inspiring.

I came to realize what a true honor it is to work with these amazing humans.

When I left to attend graduate school, it was with the knowledge I would return as a clinician

I returned in 2013, and stayed until closure in 2016

After the closing, I tried several positions, none with adolescents

I had come to the decision I was leaving therapy unless I could work again with teens working to be in recovery

The next day I was called to interview at Teen Recovery Solutions, working with teens seeking recovery

Nine years later, working with teens remains my absolute favorite things to do.

- Over 20% of American teens will experience mental illness issues which lead to severe distress and negative impact on their lives
- This rate is higher than the rate of adult mental illness rates (18%) and much higher than the rate of severe mental illness in adults (4.8%)
- Many mental illnesses originate in adolescence, and even without a mental illness present, adolescents are more prone to experiencing severe stress which often comes with this stage of life
- Suicide is the second leading cause of death (behind unintentional injury) in adolescents ages 15-19

# ADOLESCENT DEVELOPMENT

- Adolescence is a time of turmoil and confusion for many teens
- Erikson stated the main conflict at this stage of development is identity vs role confusion
- Teens are trying to figure out SO MUCH about themselves, life, their beliefs, their future...
- It is normal at this stage teens are distancing themselves from their family of origin in an effort to determine their identity as an independent person
- Teens want to be seen as “grown” and capable of making their own path, their brain development is simply not there
- The prefrontal cortex is continuing to develop, leading to a struggle in certain functions such as impulse control, emotion regulation, and outcomes of choices
- It is critical to keep this in mind, especially when encountering a resistant teen

# ADOLESCENTS AND ENGAGING IN SERVICES

- The most typical outcome for a teen needing therapy is they never engage in therapy
- The adolescent population often falls into a “service gap” meaning even though many teens would greatly benefit from therapy, they do not engage
- Barriers include lack of knowledge related to what therapy is, families being unaware of what the teen is experiencing, lack of resources, and the main barrier... fear
- Teens fear being vulnerable with a total stranger, they fear being judged by the clinician, the clinician sharing confidential information with caregivers, and often have issues with what they perceive as authority figures
- Teens often will turn to informal sources for support, including friends and family members over those they perceive as having authority over them
- Teen are increasingly turning to AI for mental health support, or to social media. Both are rife with serious concerns.
- Teens often believe they are able to “handle it”, and see seeking outside help as giving up some of their autonomy and relying on someone else for their emotional well being

# OTHER FACTORS

- Gender-females are more likely to engage in therapy and be open with the clinician than males
- Sexual orientation: according to Fontaine and Hammond (1996), 40% of homosexual males who did go to therapy did not disclose their sexual orientation to the clinician
- Difference in the ethnicity of the client and the clinician. An example is African American clients report the highest level positive outcome with same-ethnicity clinicians (Cabral and Smith,2011)
- Cultural norms which do not support therapy
- Family dynamics
- Being mandated either legally or by family
- A teen “forced” to engage in therapy by family may believe the clinician is reporting back to family and be reluctant to be open or to engage, they may see the clinician as the “enemy” rather than a supportive person

# THEORETICAL FOUNDATION

- When faced with a disengaged or resistant teen, it can be helpful to return to theoretical perspectives
- Teens require three things to build a **therapeutic alliance and build trust: a sense of power, competence, and significance** (Jones, 1980)
- Power is the idea the teen sees themselves as making a difference in the greater world as well as in their closer relationships
- Competence is the teen's knowledge of the talent, skills, and abilities which support goal achievement
- Significance is the teen's feeling of belonging and being seen as an important participant in relationships
- Social Penetration Theory: individuals engage in building relationships through communication and exchanges of information. This process is reliant on situations, compatibility, and reward/cost dynamics (Taylor, 1968)
- Attachment Theory: children develop relationships with others based on their history of attachment with their caretakers. Understanding a teen's attachment style is an important tool to help in engagement
- System Based: adolescents are part of an integrated system beyond their primary attachments. Systems are significant in identity development and is critical to explore the relationship to the systems in the teen's life

# BUILDING RAPPORT WITH ADOLESCENTS

- It is challenging for adults to be comfortable, open, and honest in therapy
- Teens often have additional challenges when entering therapy
- Often they feel ashamed, upset, unheard, and misunderstood by adults, so why would it be any different with you?
- They often have a deep fear of judgement
- Teens struggle with finding the words for the way they feel and what they are experiencing
- Your goal is to create a feeling of comfort, safety, and trust
- This can be a process with teens, requiring a great deal of patience in the clinician

# RAPPORT CONTINUED

- To truly connect to a teen, the most important tool is you
- Teens are looking for genuine, real connection and they sense insincerity quickly
- Simply showing genuine interest in who they are as a person can greatly enhance rapport
- Patience is key! It may take time to build the rapport and relationship necessary to foster the therapeutic alliance.
- Ask about their likes and dislikes, their social life, what they love/hate, music, media, etc...and be truly interested
- Look for similarities to connect over. Do you love the same movies? Talk about it!
- It is essential to create an environment of safe, non judgmental, and open communication
- Teens have a deep fear of shame, punishment, or other negative consequences
- Teens feel deep shame and disappointment in themselves when they perceive they have fallen short of the expectations of others
- Clinicians have the unique opportunity to be someone who has no expectations for the teen
- Rapport is the building block for the therapeutic alliance

# CHALLENGES AND BARRIERS TO TRUST

- Confidentiality is a very sticky issue with teens
- Teens are terrified of what you will tell their parents
- Parents are terrified of what you won't tell them
- This can be a delicate balance
- It is CRITICAL to insure both the teen and the parents fully comprehend what you will and will not disclose, what the law is, and what your ethical responsibility is related to disclosure
- Parents have been VERY angry when they learn their teen disclosed certain information to me and I did not inform the parent
- Teen have shared with me past experiences with clinicians who have broken confidentiality and thus their trust
- It is important to review confidentiality with both the teen and the parent on a regular basis

# BREAKING THROUGH RESISTANCE

- I struggle with the term “resistant” especially when it comes to working with teens
- In my experience a more accurate approach would be “fearful” as in my experience, this is what resistance is rooted in
- Being willing to get outside the box is often the most effective approach with a teen
- The first session is critical, teens make snap judgements and it is very difficult to reverse their opinion
- “This is a space for you, for you to tell me what is happening in your life and for me to learn how best to help you”
- Open ended questions are a fantastic way to get a teen talking, close ended questions also have a place, however especially in the initial sessions, open ended are best

# BREAKING THROUGH RESISTANCE

- Examples of open ended questions:
  - “Tell me about yourself”
  - “What is a day in your home like?”
  - “What are your favorite things about your friends?”
  - “How are you feeling right now?”
  - “How did the fight with your mom begin?”
  - “What might get in the way of you engaging in therapy?”
  - “What do you think another option might be?”
  - “What does that say about you?”

# BREAKING THROUGH RESISTANCE:

## Other Factors

- Be aware of your body language and non verbal communication. Keep facial expressions as neutral as possible and be mindful of you responses
- Remind them this is actually a pretty cool opportunity for them, that a few sessions is just a short period of time however it could positively impact them for years to come
- Active listening is critical
- Eliminate as many potential distractions as possible in the office, teens are hyper aware of when someone is not fully attuned to them and what they are saying
- Remind them to take their time, this is not a race and it is on their timeline

# INTERVENTIONS

- When crafting interventions designed to build rapport and alliance, it is important to consider each client's developmental status and needs,
- Effective interventions need to fit the client's cognitive, emotional, and social capacity
- Insure the interventions are strengths based, trauma informed, and developmentally and culturally appropriate
- Learn what has worked for them in the past and build on this
- Allow the teen to have a degree of input and control as teens feel empowered by choice
- Make sure the activity/intervention aligns with the goals that have been set
- It is also perfectly ok if the activity is simply something fun to foster the relationship

# ART BASED INTERVENTIONS

- Art is a huge part of the program I work in and we utilize art almost daily
- “Parallel play”, teens will be more open when working side by side over face to face, and when the clinician participates in the art project, oftentimes it opens communication
- Art based interventions provide a fun and meaningful way to express and process emotions they may struggle to verbalize, express their inner experiences, and understand who they are
- ART BASED IDEAS:
- Visual storyboard using mood collages, comic strips, or something showing timelines
- Sculpting-using clay, kinetic sand, etc focusing on the texture, feel, and shape of what they sculpt. Sculpting is great for grounding, awareness, and non verbal processing
- Meme creation: have the teen create their own memes expressing and reflecting their feelings or as representations of circumstances in their lives
- Painting to music: have the teen choose a song they want to paint to, observe brush strokes, force of application, colors chosen how expressions change etc,,, all solid starting point for open ended questions

# EXPRESSIVE THERAPIES

- Expressive therapies such as music, art, role playing and journaling are all beneficial ways for teens to explore perspectives and behaviors
- Role playing and metaphors allow a teen to explore different personas, beliefs, and responses to difficult situation and interactions
- Using metaphors can help a teen craft a story at a safe distance from the distressing event. It fosters creative thinking and problem solving with the guidance of the clinician
- Journaling and creative writing allow teens to process events at a pace they are comfortable with. You can easily find journals with prompts if they struggle with knowing what to write about. Digital journals are also effective, and may foster more use and engagement with teens
- Games! Teens LOVE playing simple games such a Jenga or Uno, both easily made into “therapy games” (I was making a Jenga game at work and one of the teens told me I could take anything and turn it into therapy. EXACTLY!)
- Thought-Feeling-Behavior Jenga-place prompts on blocks related to CBT, and as they pull share what is on the blocks
- Icebreaker Uno-I took an Uno game and printed and glued icebreaker questions to the cards, remember YOU will also be answering!
- Grounding walk-if safe and possible, walk outside while the clinician leads a mindfulness exercise focusing on present moment awareness noticing sights, sounds scents, textures, etc

# EXPRESSIVE THERAPIES

- Digital games can be used as icebreakers, rapport building, and basic connection.
- Digital art and photography is a great way to learn what is important to the teen, what they enjoy, and what they are interested in
- Meditation and grounding processes
- Music is a HUGE connector and tool with teens, music is central to their identities and values and is a valuable tool to gain better understanding of the teen. Ways to use music are:
- Encourage the teen to identify a song that reflects what is currently happening in their lives, listen together and review the lyrics, ask them to identify which lyrics are the most impactful and why
- Have the teen write their own song lyrics and share with you, exploring themes etc
- Music provides insight and can provide direction for the clinician as well
- If they play an instrument, have them bring it to session and allow them to show off a bit!

# ROLE PLAY

- Role play can be a very effective in working with resistant/fearful teens
- Benefits include: assessment opportunities and a look at how they are thinking and feeling, opportunity to practice skills, collaborative opportunities, applying learned skills to real life, practicing skills learned in therapy, anger management, and trigger identification and resolution
- Using the “empty chair” technique can be incredibly powerful
- Examples of role play:
  - “It is Monday morning, you go to class and before you can even sit down, your friend in class starts telling you once again how much they can’t stand their boyfriend and tells you all about the fight they just had, you are frustrated because nothing ever changes in the relationship. How do you express you need some time to settle in.”
  - “A friend is gossiping behind another friend’s back and you are not ok with it.”
  - “Your friend is not returning your texts or snapping you back, and you are worried they are mad at you.”
  - “You want to ask your mom to go to a show and you are nervous because it is located in another city,”
  - “You have been asked by a friend to do something you are uncomfortable with and do not know how to say no.”
  - “Your girlfriend/boyfriend has said something extremely hurtful to you, and you need to express this.”
- The therapist can observe, guide, and participate encouraging the use of skills learned in therapy

# STRENGTHS BASED APPROACH

- Adolescents often struggle with feelings of low self esteem
- Their inner self talk of many teens is very negative and dark
- Working to change that inner talk is crucial
- Low self esteem is connected to social disruptions, depression, and anxiety
- Additionally they are more likely to engage in risky behaviors such as early sexual activity and exploring substances
- Free tools such as the Clifton Strengths Assessment can be a great tool when a teen struggles with identifying their strengths
- Encourage the teen to share what they do well, what sets them apart from their peers, what they value about themselves...
- Consistently praise effort not outcome

# STRENGTHS BASED INTERVENTION

- Tree of Life: (via worksheet or an art activity) the tree metaphor helps teens identify the roots which secure them, the branches of their skills and strengths, and their hopes and dreams in the leaves
- Ask the teens to write a story about a time they used their strengths and had a positive outcome, highlighting the positive actions and reinforcing which strengths helped the most
- Worksheets can be helpful, several options are on [therapistaid.com](http://therapistaid.com), including the Silver Linings exercise, Who am I, Three Good People, Gratitude, Strengths Use Plan, Best Possible Self, etc
- Have the teen write down their negative self thoughts they are bringing to the session that day, and change/reframe the list at the end of the session. Doing this consistently helps to identify their thought patterns, identify negative thoughts and practice replacing them with supportive thoughts
- Many teens feel they are a problem, a burden, unwelcome, and disliked
- Focusing on what they do well can totally shift their view of themselves and build positive self regard

# PSYCHOEDUCATION

- Teens LOVE to learn about themselves
- If a teen is initially reluctant to get deep, consider starting with psychoeducation
- Topics can be mental health, coping strategies and why they work, emotions, diagnosis. Medications, behavioral skills, therapeutic approaches, etc
- Using worksheets can also be helpful ([therapistaid.com](http://therapistaid.com) has several)
- Can easily weave CBT into psychoeducation by exploring the connection between thoughts, emotions, and behaviors
- Educate on trauma, how it impacts families and individuals, it's impact on behavior, and begin to explore coping skills (genogram)
- When you bring the teen into the “knowledge”, they feel included, more of a contributor, and less of a problem to be solved
- Benefits include building self awareness, feeling empowered to address issues, and building resilience

# FAMILY AND TEENS

- Whew. Here we goooooo!
- Bringing the family into sessions can be VERY tricky and requires a high level of finesse, boundaries, and maintaining control of the session
- It is, however, critical the family understands their teen is NOT the “problem”, it is a systemic issue and all involved will benefit from therapy
- Prepare the teen ahead of time. Make sure they know the topics to be discussed, and even role play with the teen especially if they have to tell them something unpleasant. Make it clear to the teen you are not on a “side” you are a neutral party.
- Discuss confidentiality with all prior to the session again stressing what you will and will not disclose
- The family is a system in which what one person in the family does impacts all members of the family

# FAMILY AND TEENS

- The relationships at home shape the relationships with the world at large
- The focus needs to be on improving communication, building trust, repairing hurts, practicing rigorous honesty, pattern identification, and building healthy communication skills
- Remind that the goal is to build a better foundation to increase understanding and learn to support one another
- For teens, the family and the home are where and who they spend the most time.
- If there is serious conflict with a parent, a sibling, or there are patterns present which compound anxiety and depression it is critical to address these patterns
- The goal is to understand connections, process communication issues, bring understanding to how the individual in the system impact the entire system, and how to bring family closer instead of pushing people away
- Interventions such as Functional Family Therapy are a solid framework to work from
- PITFALLS: Often family work can become heated and confrontational. It is critical to intervene before more damage can be done. In my work, the teen and I will develop and identify a word or signal the teen is becoming overwhelmed and needs a break, allowing you to know they need a break. While the teen is out of the office (I give them a time frame to return) you can work to deescalate the family if needed
- If family work is not proceeding well, or if the conflict is severe and negatively impacting the teen, place it on hold and revisit, encouraging the parents to engage in their own therapy can be helpful as well

# IN CONCLUSION

- Working with teens can be the most frustrating, maddening, delightful, edifying, joyful and fun experience
- Building rapport with a teen takes time, patience, compassion, and understanding
- Once you have their trust, treat it like the precious gift it is, and protecting the trust is critical
- Not every session has to be heavy, it is ok to laugh with your clients. It is ok to joke, to connect over PokemonGo, video games, jokes, music, current events, etc...
- Be comfortable with some level of self disclosure, teens are VERY curious about you! When the questions become too personal, I will respond with "Help me understand why it is important to know this about me."
- Continue to provide unconditional support and encouragement
- Honor the work, tell them "Thank you for showing up today, I know this is hard and you probably would rather be a lot of other places, but you chowed up and worked hard. Thank you. I see you."
- Remember to check in frequently " What things are we doing that you find to be most helpful? Least Helpful? What would you like to explore more? How can I make it easier for you to come here and talk with me?"
- Enjoy the honor and provide it is to sit with these incredible humans, and be prepared to learn as much fro them about yourself and they do from you about you themselves

Citations available by request [alankford@teenrecoveryolutions.com](mailto:alankford@teenrecoveryolutions.com)