

***Integrating Mental Health, Substance Abuse & Trauma
Issues for Adolescent Girls***

*Presented by:
Colleen Clark, Ph. D*

*at the
The 20th Annual Governor's Statewide Prevention Conference
September 20, 2006*

This presentation combines current research and clinical practice to describe the impact of trauma on teen girls lives, how trauma interacts with substance abuse and mental health issues, gender differences and finishes with an in-depth discussion of evidence-based interventions for this at risk group of young women.

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Presented at
The 20th Annual Governor's Statewide
Prevention Conference
Colleen Clark, Ph. D

*Louis de la Parte Florida Mental Health Institute
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*Much of this presentation is based on
information compiled by Michelle
Levasseur, who is also the primary author
and developer of the Triad Girls' Group*

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**Integrating Mental Health,
Substance Abuse & Trauma Issues
for Adolescent Girls**

- The Need
- Considerations & Goals
- Model Interventions

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The impact of trauma

- Definitions
- Prevalence
- Clinical consequences
- Gender differences

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Definitions

- Trauma – Shock or severe distress from experiencing a disastrous event

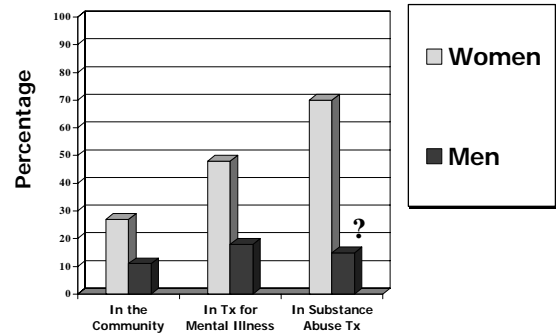
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For this discussion:

- Interpersonal abuse and violence
- Including primarily physical and sexual but may include emotional
- Experienced as an adult or a child
- May have occurred over time or been one incident and/ or time limited

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Prevalence of Childhood Sexual Abuse



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Adverse Childhood Events (ACE) Study

- Kaiser Permanente and the CDC
- Large-scale epidemiological study of the influence of stressful and traumatic childhood experiences
- Interviewed over 17,000 people
- Motivated by an obesity study

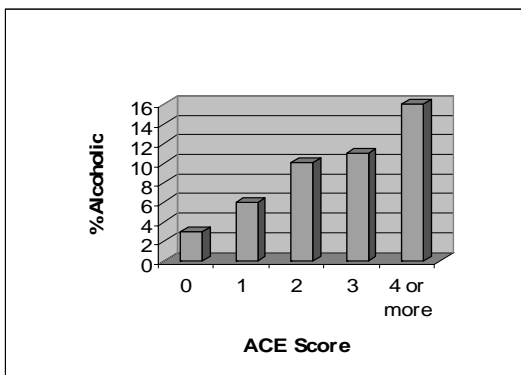
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ACE Study

Recurrent & severe physical abuse	11%
Recurrent & severe emotional abuse	11%
Contact sexual abuse	22%
Growing up in a household with:	
Alcoholic or drug-user	25%
Member being imprisoned	3%
Mentally ill, chronically depressed,	19%
or	
institutionalized member	12%
The mother being treated violently	12%
Both biological parents NOT present	22%

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ACE Score vs. Adult Alcoholism



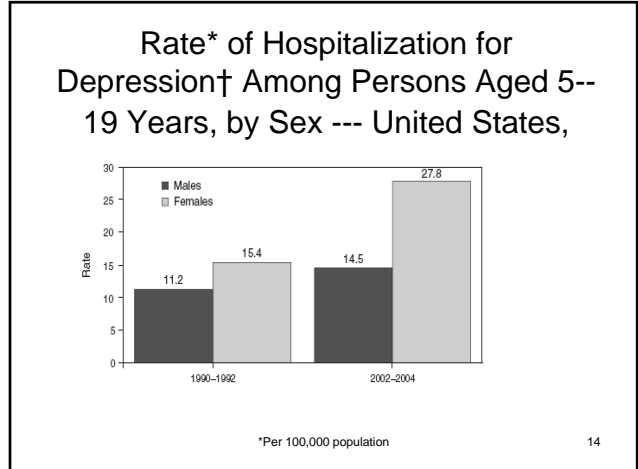
ACE Study

- Higher rates of self-injurious behaviors (addiction, overeating, smoking) associated with higher ACE's
- Such behaviors in long term lead to disease and disability
- In short term, may be effective in ameliorating the effects of childhood trauma
- Conclusion: childhood trauma must be addressed for both short term and long term reasons

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Significant odds ratios- compared to twins with no CSA (n=1411 twins) 72.7% Kendler et. al 2000

Diagnosis	Any CSA	Nongenital CSA	Genital CSA	Intercourse
Major depression	1.93	1.75	1.75	3.14
GAD	1.89		1.59	2.94
Panic disorder	1.89			2.55
Bulimia				3.30
Alcohol depend.	2.80	2.42	2.39	4.01
Drug dependence	3.09	2.93	1.97	5.70
Disorders	2.58	1.61	2.04	5.47 ₁₃



The Need: Girls and Substance Abuse – National Prevalence Data

- Earlier initiation
- Increase marijuana use
- Narrowing of the gap with boys' drug use

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The Need: Girls and Substance Abuse –Florida Prevalence Data

- Ages 11 - 18
- 35.7% of males and 34.2% of females reported using any illicit drug in the past 30 days
- More girls than boys reported using alcohol only (15% vs. 13.2%)

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The Need: Substance Abuse, Violence and Emotional Problems

- Abused high school girls & those with symptoms of depression are twice as likely to drink or smoke frequently than non-abused or non-depressed girls
- Girls experience stronger physiological effects from drugs and alcohol than men or boys; often place themselves at increased risk for sexual assault (i.e., unwanted or forced sex).

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The Need: Substance Abuse, Violence and Emotional Problems

- Boys consume more alcohol than girls
- African American adolescent girls have the highest average number of problems per ounce of alcohol consumed
- Girls appear more vulnerable to their parents' role modeling of drug abuse

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The Need: Substance Abuse, Violence and Emotional Problems

- Rates of PTSD among adolescent with Substance Use Disorder – 11% - 47%
- Adolescent girls have higher rates of PTSD than boys

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The Need: Substance Abuse, Violence and Emotional Problems

- Among those surveyed, 13 percent of teenage girls, admit to being physically injured or hit and one in four report being pressured to perform oral sex or engage in intercourse, according to the survey by the private research group Teenage Research Unlimited.

Liz Claiborne Study – n = 300,000

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The Need: Juvenile Justice System

- In one study, more than half of the 2,300 adolescent substance abusers reported an arrest.
- Typically women in criminal justice system:
 - non-violent and gender-congruent criminal activity earlier in life such as prostitution and shoplifting.
 - Following an increased severity in drug abuse, their crimes tended to be more violent

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The Need: Juvenile Justice System

- Female juvenile offenders not becoming more violent.
- Rather, preliminary studies suggest, the response of the justice system has changed such that
 - girls' family conflicts are re-labeled as violent offenses,
 - police practices regarding arrests for domestic violence and aggressive behavior have changed

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The Need: Risky Behaviors

- Substance abuse is a risky behavior that intersects with many other risky behaviors such as unprotected sex
- Except for HIV/AIDS, adolescent girls have the highest rates of sexually transmitted diseases of any group of men or women

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The Need: Risky Behaviors

- AIDS is a significant problem. It was found to be the sixth leading cause of death among 15- to 24-year-olds, the third leading cause for black women in this age range, and three out of five cases of AIDS are among black girls
- Among the adult and adolescent females in the United States who do have AIDS, nearly 71% of the cases can be attributed to IV drug use and sexual contact with IV drug users

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The Need: Risky Behaviors

- Girls who become mothers before the age of 18 are more likely to drop out of school, remain at lower income levels, and get divorced.



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Research base

- No controlled studies of effective substance abuse treatment for adolescent girls
- In large scale SAMHSA study of prevention of substance had surprising findings

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Gender differences in substance abuse prevention



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Gender differences in substance abuse prevention

- Usual thinking: Programs that emphasize relational content using positive female role models and peer group connectedness are likely to be more successful for at-risk girls.
- 5-year study (Substance Abuse and Mental Health Services Administration, 2002) involving over 10,500 high-risk youth in 48 communities found that programs that focus on behavior related life skills are particularly important for sustaining positive effects for girls.
- For boys, participation in programs that emphasized interactivity with peers or adults was particularly important.

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Developmental issues from APA guide (2002)

- Focus on positive, build strengths
- Help teens identify and practice strategies for dealing with sexually stressful interpersonal situations
- Help teens make better decisions to assist with their cognitive development
- Help teens search for self-identity by taking time to ask questions and listen without judgment to the answers

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Goals

- Primary goal: Substance abuse treatment
 - Emotional problems
 - Trauma/ abuse/ violence related issues
 - Gender specific – positive feelings about being a girl
 - Strengths - based

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Intervention models

- Triad Girls' Group
- Seeking Safety
- Trauma Recovery Empowerment Model (TREM) for girls

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Intervention models – common themes

- Safety
- Support
- Skills
- Strengths

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The development of this manual was funded primarily by a grant from the Children's Board of Hillsborough County 33

Models - Triad

- Based on the Triad Women's Group
- Modified to be appropriate for adolescents
- Focus on substance abuse treatment

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Models - Triad



- Developed with PACE, Center for Girls
- Development funded by the Children's Board of Hillsborough County



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Each session includes

- Introduction – tying in with week before
- Rationale
- Goals
- Questions and sample responses
- Exercises
- Handouts
- Closure

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Models - Triad

Part I: Mindfulness

Getting Comfortable With Yourself

Chapter 1: Empowerment—Building Safety

Chapter 2: Mind, Body, and Emotions

Chapter 3: How Mind and Emotions Work Together

Chapter 4: What It Means to Be a Female

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HANDOUT 1A: EXAMPLES OF FEELINGS



FRAZZLED



SHOCKED/SCARED



OVERWHELMED



EXCITED



HAPPY



EXHAUSTED

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My Safety Plan

- Possible Emergencies
- List of things to do
- List of not to do
- Phone numbers of those that can help

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Models - Triad

Part II: Interpersonal Effectiveness Skills

Having Healthy Relationships with Yourself and Others

Chapter 5: Assertive Communication

Chapter 6: Trust and Intimacy

Chapter 7: Boundaries

Chapter 8: Social Support

Chapter 9: Family

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Models - Triad

Part III: Emotional Regulation

Feeling Good

Chapter 10: Controlling Cravings and Urges

Chapter 11: Self-Esteem

Chapter 12: Self-Soothing

Chapter 13: Acceptance and Healing

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HANDOUT 8A: SOCIAL SUPPORT DIAGRAM



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Models - Triad

Part IV: Distress Tolerance

Staying Healthy in a Stressful World

Chapter 14: Problem Solving

Chapter 15: Dealing With Violence

Chapter 16: Grief and Loss

Chapter 17: Crisis Management

Chapter 18: Empowerment, Healing and Personal Growth

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Models - Triad

HANDOUT 1C: THE SEVEN RESILIENCIES

Insight: asking yourself tough questions and giving honest answers..

Independence: being your own person and making decisions for yourself that reflect your own personal values.

Relationships: connecting with people who matter; supporting each other's values and maintaining a balance between giving and taking, helping and being helped, and sharing and independence.

Initiative: facing challenges, taking action and solving problems, even when you lack confidence or don't know what will happen.

Creativity: using your imagination and trying something new.

Humor: finding something funny or positive about a situation even when you are sad.

Morality: doing the right thing even if it's not the easy or natural thing to do.

Adapted from "The Struggle To Be Strong: True Stories by Teens About Overcoming Tough Times" (Desetta & Wolin, 2000).J

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Models – Seeking Safety

- *Seeking Safety* is a present-focused therapy to help people attain safety from trauma/PTSD and substance abuse. Available as a book, with client handouts and guidance for clinicians.
- It has been conducted in group and individual format; for women, men, and mixed-gender; using all topics or fewer topics; in a variety of settings (outpatient, inpatient, residential); and for both substance abuse and dependence.

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Models – Seeking Safety

- Has also been used with people who have a trauma history, but do not meet criteria for PTSD.
- Begun in 1992, under grant funding from the National Institute on Drug Abuse. Developed by Lisa M. Najavits, PhD at Harvard Medical School/McLean Hospital.

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Models – Seeking Safety

Adaptations for adolescents

- Conveying material verbally if resist reading handouts
- Talking in displacement to evoke deeper feelings (What if this happened to a friend?)
- Providing sessions outside of topics
- Brief updates with parents with permission

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Models – Seeking Safety

For more information see:
seekingsafety.org

Has been extensively studied empirically; for results of preliminary study with adolescents:

Najavits LM, Gallop RJ, Weiss RD (under review). *Seeking Safety* therapy for adolescents with PTSD and substance abuse: A randomized controlled trial. (Email info@seekingsafety.org to obtain.)

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Models – G-TREM

Trauma Recovery and Empowerment Model Group Intervention for Adolescent Girls (G-TREM and G-TREM2)

- The Trauma Recovery and Empowerment Model group treatment intervention for women has been adapted to suit the struggles of teenagers. The leaders' manuals, G-TREM for ages 12-14 and G-TREM2 for ages 15-18, are 15 and 16 sessions in length respectively and include more experiential exercises than the adult women's model. The learning approaches and overall tone have also been modified to accommodate the learning style and the special concerns and interests of adolescent girls.

Information for ordering at:

http://www.communityconnectionsdc.org/trauma/g_trem.htm

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