Biologic Theory

Assessing adolescents from a comprehensive perspective requires understanding the roles of:

- Neurobiology
- Hormonal changes
- Growth spurts
- Stress and immune function
- Chronic illness
- Developmental psychopharmacology

Developmental Theory

- Theories of Freud, Erikson, Piaget, and Sullivan provide insight into the stages between adolescence and adulthood and the formation of a sense of identity.
- Understanding developmental theory helps the nurse identify deviations in adolescent growth and development and intervene appropriately.
Humanistic-Interactionist Theory

Seeing the client as a biopsychosocial being requires taking into account:

- Developmental stage
- Social, ethnic, and cultural factors
- Family influences
- Psychodynamic conflicts

Neurobiology/Biochemistry

- MRI and spectroscopy show that bipolar disorder in children and adolescents is similar to that in adults.
- There is a correlation between aggressiveness and brain levels of neurochemical changes.

Neurobiology/Biochemistry - continued

- Metabolic functions, neurobiological systems, and specific neuropeptides and hormones are as important as behavioral habits in abnormal body weight regulation.
Chronic Illness

- Risk factors for adolescent depression
  - Chronic illness
  - Learning disabilities
  - ADD/ADHD
  - Disruptive behavior disorders
  - Tic disorders
  - Eating disorders
  - Anxiety disorders
  - Schizophrenia
  - Obesity

Psychopharmacology

- Psychotropic medications: may have significant effects on the developing brain
- Developmental psychopharmacology (effects of psychotherapeutic medications on children and adolescents): priority area of Healthy People 2010.

Growth and Development

- Normal for children and adolescents to experience symptoms of:
  - Anxiety
  - Dysphoria
  - Oppositionality
Humanistic-Interactionism

- Promotes trust and demonstrates caring
- Achieves a comprehensive understanding of the client as a biopsychosocial being
- Takes into account developmental stage; social, ethnic, and cultural factors; family dynamics; and psychodynamic influences

YOUR ASSESSMENT APPROACH: Exploring the Meaning of an Adolescent’s Identified Problem or Behavior

- What meaning does this behavior or problem hold for the adolescent?
- What message is he or she conveying through this behavior?
- What impact does this problem have on the client in this developmental stage? Is it a causal or causal problem or behavior for the adolescent’s peer group?
- How have resulting changes, if any, affected the adolescent and his or her relationships with others?
- What goals does the client have for the immediate and distant future?
- What personal strengths does the adolescent have to help deal with this problem?
- What considerations have you and the client given to other developmental, familial, biologic, or sociocultural factors involved?

Interview with Ashley

Click here to view a video interview with Ashley, who suffers from spectrum disorders.
Roles and Functions of the Nurse

● Outpatient setting:
  – Schools
  – Community agencies
  – Social programs
  – Counselor/therapist

Roles and Functions of the Nurse - continued

● Inpatient setting:
  – Hospitals – staff nurse, consultant
  – Residential treatment facilities
  – Psychiatric settings
  – Milieu therapy

Box 27.1 Adolescent Behaviors in the School Setting That Call for Early Intervention

- Antisocial behaviors such as stealing, setting fires, bullying others
- Avoidance behavior
- Chronic illness
- Depression
- Disruptive classroom behavior
- Substance abuse
- Excessive daydreaming
- Hypochondriasis
- Learning difficulties
- Poor school performance or a dramatic shift in school performance
- Temper tantrums
Acting Out

- Behaviors range from antisocial, destructive acts to unconscious impulses.
- Expressed in action rather than in symbolic words or symptoms.
- Describes a re-creation of the client's life experiences, relationships with significant others, and unresolved conflicts.

Working with Acting-Out Adolescents

- Evaluate client's psychodynamics and psychopathology as well as one's own inner feelings and behavior.
- Identify transference and countertransference issues.
- Design interventions to maximize the resilience of clients acting out self-destructive life scripts.

Communicating with Adolescents

- Adolescents tend to act out feelings and conflicts rather than verbalize them.
- Adolescents have an unconventional language of their own.
- Adolescents, especially disturbed ones, may use profanity frequently.
Anger and Hostility

- Dealing with anger and hostility in adolescent clients will depend on:
  - How honest you are about your own anger and how well you handle it
  - Your knowledge and understanding of client’s experiences with anger
  - Limits imposed by the mental health agency

Testing Staff

- Testing behavior:
  - Normal adolescent behavior
  - Clients make limitless and absolute demands
- Intervention:
  - Setting consistent limits

Scapegoating Interventions

- Anticipate the behavior and try to avert it.
- Do not try to rescue the scapegoat.
- Ask group to focus on what is going on and acknowledge anxiety or other uncomfortable feeling preceding the incident.
- Help the scapegoat explore what function the role serves for him/her.
Intervening with Masturbation

- If the behavior is an indication of anxiety:
  - Ignore the gesture.
  - Explore the nature of the anxiety with client.
- If the gesture conveys contempt or hostility:
  - Comment on the client’s gesture.
  - Allow the client the opportunity to express feelings verbally.

Heterosexual Behavior

- Explore the situation:
  - May be a means of acting out other conflicts
  - May be a way of testing the nursing staff’s feelings and attitudes
- Interventions:
  - Reinforce appropriate behavior.
  - Enforce consequences for inappropriate behavior.

Homosexual Behavior

- Adolescent should be allowed to decide when and to whom to disclose sexual orientation.
- Nurse should provide emotional support for any teen dealing with sexual identity issues.
- If homosexual behavior is used to act out impotence or aggression, limits must be imposed. Provide other ways for client to work with anxiety.
Intervening into Substance Abuse

- Nurse’s self-awareness is important; avoid both anger and overidentifying with client.
- Be alert for behavioral changes associated with drug abuse.
- Interventions are determined to be effective or ineffective by use of subjective and objective behavioral criteria and goals nurse and client agree on.

Contracts

- Contracts provide clients with greater sense of control.
- Written contracts are more effective than verbal contracts.

Contracts - continued

- Form is less important than the way nurse and client jointly set goals and expectations, carry out the contract, renegotiate terms, and evaluate final outcome.
Renegotiating Contracts

- The contract is renegotiated at regular intervals.
- The need for renegotiation depends on goals, severity of symptoms, and degree of adherence with the agreement.

Personal Feelings/Attitudes

- Dealing with adolescent acting-out behaviors requires understanding one's own inner feelings and behavior.

Personal Feelings/Attitudes - continued

- To establish and maintain meaningful and productive relationships with adolescent clients: be honest about feelings, be aware of reactions, use good judgment in handling both.
Self Awareness: ANGER

- What kinds of things make me angry?
- How do I deal with my anger? Do I ignore or hide it, or do I show that I am angry?
- Do I sometimes use profanity or act out my feelings in a physical way?

Self Awareness: ANGER - continued

- What do I think about how I handle anger?
- How do I react to others when they are angry?

Self Awareness: MANIPULATION

- Is this client’s friendliness compromising the professional role boundaries between us?
- Do I feel compelled to respond in a personal rather than therapeutic way?
- Do I feel uncomfortable with the client’s flattering comments or probing questions?
Self Awareness: MANIPULATION - continued

- Do I tend to forget that this person is a client?
- Is the client encouraging me to keep secrets or "side" with the client against other staff?

Self Awareness: SEXUALITY

- How would I describe my adolescence related to my developing sexuality?
- What do I remember about the development and changes in my body?
- How did I feel about these changes?

Self Awareness: SEXUALITY - continued

- How would I describe my adolescent relationships with members of my own sex?
- How would I describe my adolescent relationships with members of the opposite sex?
Self Awareness: SEXUALITY - continued

- What events stand out when I recall my sexual experiences during adolescence?
- How have these past relationships, events, and feelings influenced me today?

Resources

  This site provides links to material about various child and adolescent mental health issues, including materials that can be downloaded, printed, and given to parents.

  This site provides resources for promoting mental health of children in the school setting.

Resources - continued

  This NIMH site provides links to information on a variety of mental health disorders affecting adolescents and children.

- http://www.pflag.org
  PFLAG promotes the health and well-being of gay, lesbian, bisexual, and transgender persons, their families, and friends through support, education, and advocacy.