

Adolescent Brain Development and Systems Implications

Heartland Juvenile Services Association
Annual Conference April, 2019

Are Juveniles Treated Like Little Adults In the Child Welfare and Justice System?

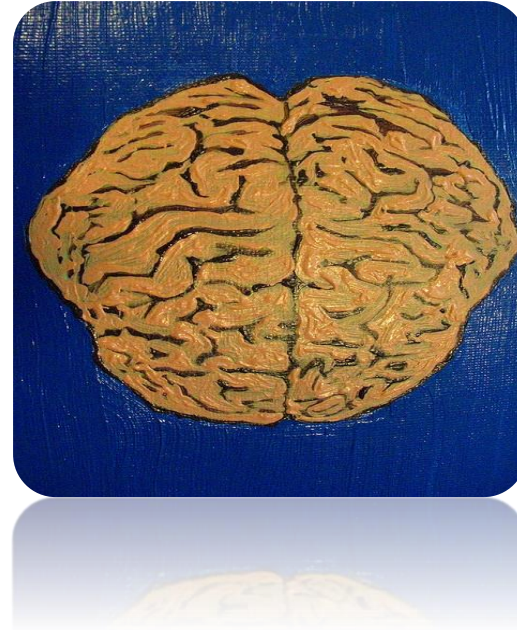


Behavioral Differences Juveniles & Adults

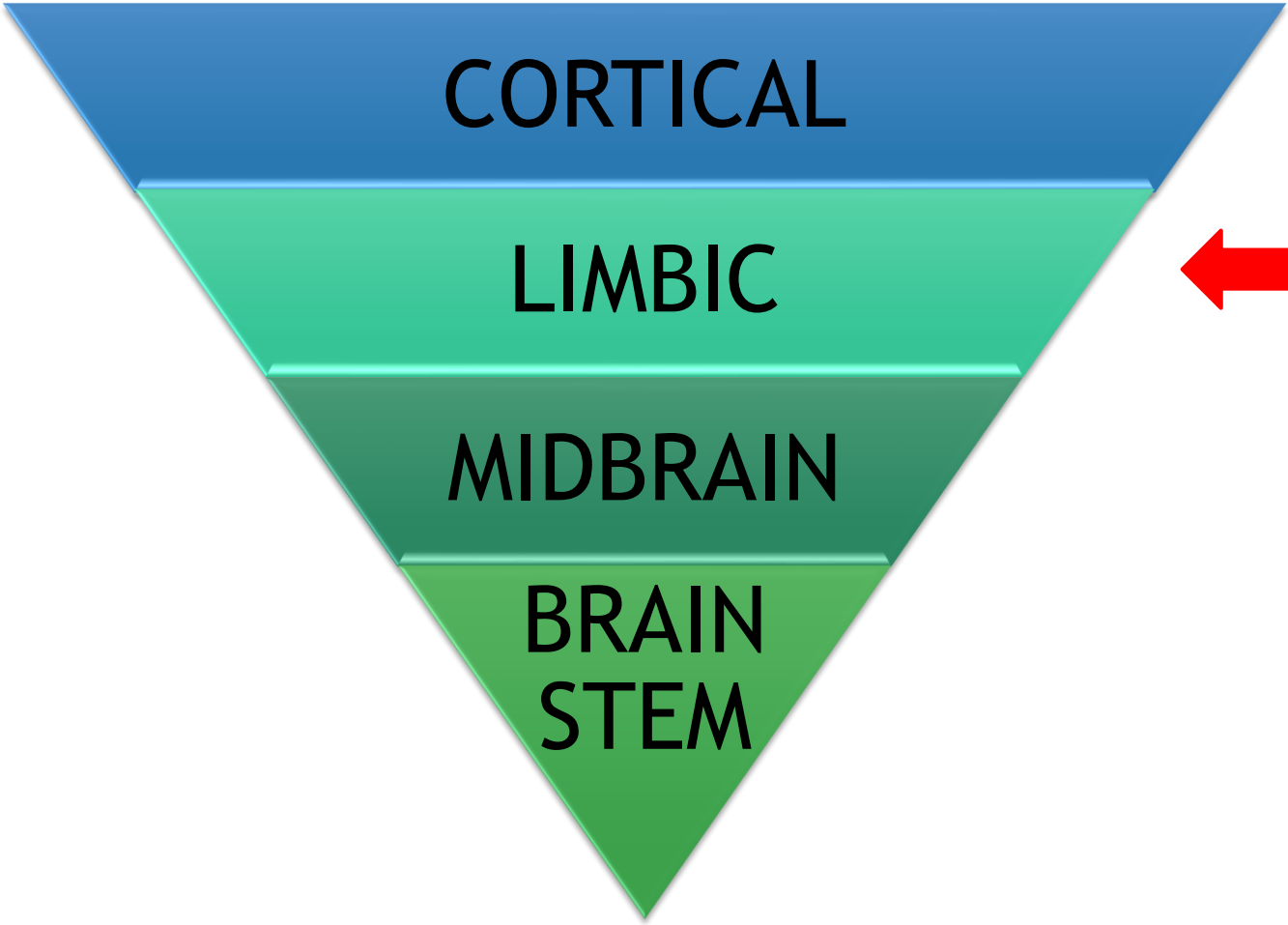
Juveniles	Adults
Impulsiveness	Self Control
Misread or misinterpret social cues	Think about others
Give in to peer pressure	Do not take risks
Engage in risky behaviors	Adults do not succumb
Moody	Regulated Moods
Unable to organize tasks	Goal Orientated

Starting with Brain Development

- ▶ From the bottom upwards
- ▶ From the inside outward
- ▶ Basic survival functions (breathing, heart rate) to more complex (abstract thought)



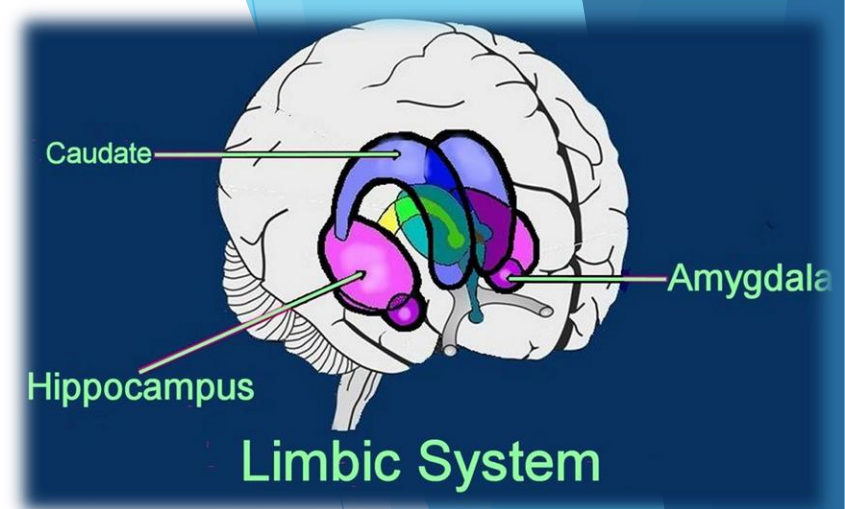
Brain Development



- Abstract Thought
- Concrete Thought
- Affiliation
- “Attachment”
- Sexual Behavior
- Emotional Reactivity
- Motor Regulation
- “Arousal”
- Appetite/Satiety
- Sleep
- Blood Pressure
- Heart Rate
- Body Temperature

Throughout Adolescence

- ▶ Cortex & frontal lobe still developing
- ▶ Behavior is primarily mediated by the limbic area
 - ▶ Emotionally reactive
 - ▶ Pleasure and thrill seeking
 - ▶ Experiment with risky behavior
 - ▶ Oriented to the ‘immediate’
 - ▶ Not consistently thinking of consequences or long-term implications



Why do we need Interventions with Juveniles in Child Welfare and Juvenile Justice?

- 20% of delinquent youth will have ongoing behavioral problems
- 6% of these will show severe behaviors and show a high recidivism rate
- 80% will simply grow out of it

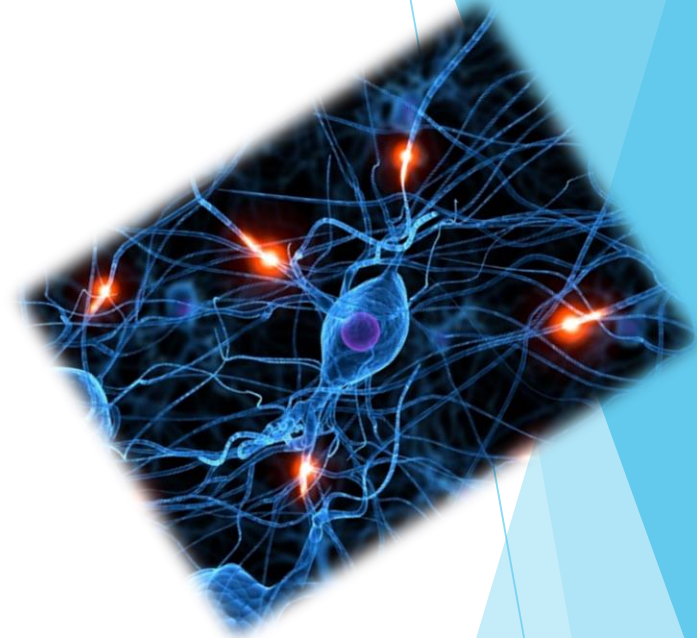
Surviving is
important.

Thriving
is
elegant.

MAYA ANGELOU

Experience Shapes Development

- ▶ Brain wires itself (create connections between neurons) based on its experience of the environment
- ▶ Causes a unique brain to develop created specifically in response to the environment
- ▶ Form templates to interpret experiences



Recognizing the Impact of Trauma

- ▶ Trauma - Overwhelming event(s) results in helplessness, powerlessness and loss of safety (physical and psychological)
- ▶ Complex Trauma - exposure to ongoing traumatic experiences and the wide-ranging impact of that exposure

Impact of Trauma

- ▶ When a young person has experienced significant trauma
 - ▶ Impacts all areas of development
 - ▶ Impulsive and difficulty regulating emotions
 - ▶ Poor view of self
 - ▶ Interpersonal connections, trust, & relationships are affected



Brain Activation

- Incoming experience is compared to existing templates of past experience
- Human default setting is suspicion
- If familiar, known as safe
stress system not activated
- If unfamiliar, unknown or known as unsafe
increasing activation



Why does Activation matter?



Terror

Fear

Alarm

Alert

Calm

- ▶ Activation states affect the ability to learn
- ▶ High levels of activation affect perception
- ▶ High levels of activation cut off relationships
- ▶ Many young people live in heightened states of activation

In Summary

- ▶ Brains are developing throughout adolescence
- ▶ Youth are ‘primed’ for many types of learning
- ▶ Trauma negatively impacts the developmental process
- ▶ Practitioners interactions rewire the brain and help in overcoming traumatic experiences

Criminogenic Risk-Need Domains

- ▶ Criminal History
- ▶ Education/Employment
- ▶ Family/Marital
- ▶ Leisure/Recreation
- ▶ Companions
- ▶ Drug/Alcohol
- ▶ Pro-Criminal Attitude
- ▶ Anti-Social Thinking

Family Relationships

Risk Factors

- ▶ Inadequate supervision
- ▶ Difficulty in controlling behavior
- ▶ Inappropriate discipline
- ▶ Inconsistent parenting
- ▶ Poor relations

Interventions

- ▶ Teaching Parenting Skills
- ▶ Knowledge of Positive Youth Development
- ▶ Coping Skills
- ▶ Implement Consistent Discipline
- ▶ Improved parental coping skills
- ▶ Professional Support/Intervention
 - ▶ MST - BT Ecological Model - FFT

Education/Employment

Risk Factors

- ▶ Disruptive classroom behavior
- ▶ Disruptive behavior on school property
- ▶ Low achievement
- ▶ Problems with peers/teachers
- ▶ Truancy
- ▶ Unemployed/not seeking employment

Interventions

- ▶ IEP Individual Education Plan
- ▶ Vocational rehab
- ▶ Tutoring
- ▶ Tracker Programs
- ▶ Mentor
- ▶ GED
- ▶ Employment Readiness

Peers

Risk Factors

- ▶ Delinquent friends
- ▶ Delinquent acquaintances
- ▶ No/few positive friends
- ▶ No/few positive acquaintances

Interventions

- ▶ Community activities
- ▶ School activities
- ▶ Mentoring
- ▶ Positive Peer Support Meetings
- ▶ Strengths/Sparks
- ▶ Role Modeling
- ▶ Teach Social Skills

Leisure and Recreation

Risk Factors

- ▶ Limited organized activities
- ▶ Could make better use of time
- ▶ No personal interests

Interventions

- ▶ Pro-social activity
- ▶ Finding a job
- ▶ Joining a club
- ▶ Connect to strengths/sparks

What works?

Ineffective	Effective
Talk therapy	Action Orientated
Non directive	Directive
Target non criminal risks factors	Target Major Risk Factors
Explore childhood and unconscious	Skill based
Medical Model	Structured Curriculum

Evidence Based Practices

- ▶ Assess a person's risk and needs
- ▶ Enhance their motivation
- ▶ Target Interventions specific to the person
- ▶ Train staff
- ▶ Increase positive reinforcement for good behavior
- ▶ Setup ongoing support systems for individuals in their own community
- ▶ Evaluate and determine if what you are doing is working
- ▶ Talk with staff about what is or is not working and make changes when needed

EBP Programs and Interventions that work

- ▶ Cognitive Behavioral Therapy (CBT)
- ▶ Aggression Replacement Therapy (ART)
- ▶ Trauma Informed Care (TIC)
- ▶ Moral Reconciliation Therapy (MRT)
- ▶ Why Try?
- ▶ Homebuilders
- ▶ MST- FFT - BT Ecological Model

Watch for traps...

- ▶ Antisocial behaviors and attitudes
- ▶ Laughing or agreeing
- ▶ Friend
- ▶ Talking negatively
- ▶ Professional Boundaries

Conclusions

- Youth are impulsive
- Brains are not developed
- Identify via Assessments
 - Risk
 - Needs
 - Interventions

Thank you

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