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Therapy Interfering Behaviors

Poly-Victimization and Therapy-Interfering Behaviors in Adolescents Adjudicated for Sex Offenses

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In many United States jurisdictions, adolescents adjudicated for sexual offenses are mandated to receive psychological treatment for their illegal sexual behaviors. Empirical evidence provides support for the legal practice of mandated treatment, as adolescents who receive evidence-based interventions have lower rates of sexual recidivism compared to those who do not receive treatment. Successful treatment completion is often contingent, at least in part, upon the affective stability of the adolescent. One of the most prominent factors of affective stability in this population is childhood exposure to multiple types of victimization, or poly-victimization. Poly-victimization has been associated with disrupted affective regulatory processes, as well as engagement in maladaptive behaviors that interfere with sexual behavior treatment. Specifically, externalizing problems, posttraumatic stress, and suicidal ideation all can be conceptualized as therapy-interfering behaviors that stem from affective dysregulation in adolescents with sexual offending histories. Adolescents who display therapy-interfering behaviors during treatment have lower levels of therapeutic engagement than adolescents without these behaviors. Low engagement can compromise treatment completion, which can subsequently increase risk of sexual recidivism. Despite the implications that therapy-interfering behaviors have on sexual behavior treatment, little is known regarding the risk factors that contribute their manifestation during the treatment process. Given that externalizing problems, posttraumatic stress, and suicidal behavior likely signify pervasive affective dysregulation, it is possible that the experience of childhood poly-victimization may exacerbate the severity of these behaviors during treatment. More research is required, however, to determine the role of childhood poly-victimization in predicting therapy-interfering behaviors caused by affective dysregulation in adolescents with illegal sexual behavior.

The present study examines the role of poly-victimization exposure in predicting therapy-interfering behaviors in adolescents with illegal sexual behavior. Based on poly-victimization research, the increase in affective dysregulation that accompanies poly-victimization exposure may also correspond to an increase in the severity of therapy

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interfering behaviors. Therefore, it is hypothesized that lifetime poly-victimization will indirectly affect the manifestation of therapy-interfering behaviors, specifically externalizing problems, posttraumatic stress, and suicidal behavior, via affective dysregulation in adolescents enrolled in treatment for illegal sexual behaviors. Data for the present study are currently being collected from a 72-bed residential treatment program for adolescents adjudicated for sex offenses in a Southeastern state. Lifetime poly-victimization, measured using the total score from the Juvenile Victimization Questionnaire (JVQ; Hamby et al., 2004), is expected to directly predict affective dysregulation in participants, measured using the MACI Borderline Tendency Scale (Millon et al., 2006), as well as indirectly predict the severity of self-reported therapy-interfering behaviors at the beginning of treatment, measured using the MACI Externalizing Problems scale, MACI Suicidal Tendency scale, and UCLA-PTSD Reaction Index total symptom severity score (UCLA PTSD-RI; Steinberg et al., 2013) respectively. Implications for the assessment and treatment of adolescents who engage in illegal sexual behaviors will be discussed.

Learning Goals:

- Assess the relationship between poly-victimization and behaviors that interfere with treatment engagement, specifically externalizing problems, posttraumatic stress, and suicidal behavior, in adolescents with illegal sexual behavior.
- Identify variables that mediate the relationship between poly-victimization and therapy-interfering behaviors in adolescents with illegal sexual behavior.
- Provide assessment and treatment implications for clinicians and other helping professionals who provide mental health services to adolescents who engage in illegal sexual behavior.

Megan E. Harrelson, MS. Megan Harrelson is a doctoral candidate in the clinical psychology program at Auburn University. She received her B.A. in Psychology from Wake Forest University in 2014 and her M.S. in Clinical Psychology from Auburn University in 2016. Her current research interests focus on the impact of childhood victimization on long-term psychological adjustment and externalizing behavior problems in both clinical and nonclinical populations. She has also provided assessment and treatment services to youth who engage in problematic sexual behaviors across both residential and outpatient settings.

Barry Burkhart, PhD ABPP. Barry Burkhart received his B.S. in Psychology from Florida State University in 1970 and his Ph.D. in Clinical Psychology in 1974, also, from Florida State University. He completed his internship in Clinical Psychology at University of Southern California-Los Angeles County Medical Center. Currently, he is Professor, and former Chair of the Auburn University Department of Psychology, where he has been on faculty since 1974. He has broad research interests in assessment and treatment of problems resulting from violence and victimization. Since 1999, he has been the co-director and, currently is, director of the Accountability Based Sex Offender Program, a treatment program for adolescents with sexual behavior problems. This program has become nationally recognized

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as a model for the provision of services to juvenile offenders and as a model of a public partnership involving universities and a state agency. In all of these activities, he has engaged students from Auburn University in roles as volunteers, psychological interns, and researchers.

The Authentic Therapist

Nancy Falls, EdD, RP
Heather Barbour, BSC, R.S.W.

Science has struggled to measure it. Clients know it...the real deal... a genuine presence of an authentic person. Carl Rogers identified therapeutic connection as an essential component of success in treatment above any specific modality or theoretical framework (1961). Therapeutic presence is the foundation for creating a positive therapeutic relationship and for effective therapy (Geller, 2017). By attuning to ourselves, our body and brains become integrated which allow us to attune to our clients in a way that they feel heard, understood and accepted. This evokes a neurophysiological experience of connection and safety (Geller & Porges, 2014), which then allows our youth to stay present with their own feelings and experiences.

Therapeutic presence requires being attuned to ourselves and managing our own responses to the client while maintaining what is happening verbally and nonverbally within the client. It has been suggested in the research that repeated experiences of presence facilitates repair of attachment ruptures and promotes positive social engagements (Geller & Porges, 2014; Siegal, 2010; Allison & Rossouw, 2013).

Achieving and maintaining therapeutic presence is an essential skill for therapists, and never so much so as when working with clients who have been mandated to treatment. Working with youth who have engaged in sexually abusive behaviours is particularly challenging for many reasons: they are often mandated to treatment, their brains are in development, their reluctance in talking about the offenses, and the impact of being caught. So what does it take to work effectively with adolescents who engage in sexually harming behaviours?

This workshop will focus on developing specific skills and strategies to enhance therapeutic presence for those who work with adolescents who have engaged in sexually harming behaviours. Accompanying a youth on this relational journey is a long-term commitment, requiring a skillful ability and authenticity on the part of the therapist to create a space that allows a youth to explore past experiences, challenge beliefs, attitudes, and behaviours as they dare to change to become the person they want to be. We are better together in helping youth live the lives they choose when, we as helpers, maintain

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our attention and attunement to ourselves, to the youth, and to the relationship. Treatment interventions, assessment tools, and protocols are merely interventions lying on a shelf, and it is only within the therapeutic relationship that they begin to have value and can help to facilitate change. Therapists become the living reflection of who the youth wish to be in relationship, by modeling, challenging with compassion, and repairing relationship ruptures along the way.

The workshop will offer practical information and strategies for clinicians, probation officers, and interested professionals new to the field. Opportunities to discuss case examples and experiences will demonstrate that we are better together as professionals when we can share our wisdom, positive experiences, and mishaps along the way.

Learning Goals:

- To explore therapeutic presence and the creation of the relational frame
- To examine important ingredients to facilitate therapeutic alliance
- To explore how to manage your presence in the session
- To review factors that promote longevity in the field

Nancy Falls, EdD, RP is a registered psychotherapist in private practice with over 20 years experience. In addition to her private practice, Nancy is the manager of Training and Consultation at Radius Child and Youth Services. She has extensive experience conducting assessments and providing treatment to youth who sexually harm, children engaged in problematic sexual behaviours, and children and youth who have experienced child maltreatment, especially those who have been sexually victimized. Nancy also provides consultation and training to professionals in various sectors including children's mental health, hospital-based programs, child welfare, and education. She has presented both locally and internationally in the areas of trauma, sibling sexual abuse, and adolescents who have sexually offended.

Heather Barbour, BSC, RSW brings over thirty-three years of experience in working with children and their families, both in Mental Health as well as Family Service Agency settings. She has developed specialized clinical skills in the area of trauma assessment and treatment for preschool; latency aged children, as well as adolescents. She also provides sexualized behaviour assessment and treatment for children under the age of twelve, and risk assessment and treatment for adolescents who commit sexual offences.

Heather has presented both locally and internationally on topics ranging from sibling sexual abuse, concerning sexual behaviours in children, and adolescents who have committed sexual offenses. She has co-authored a guide book, *Let's Talk About Touching*, for clinicians working with children who have engaged in concerning sexual behaviours and a second guide book *Sexual Decision Making: Your Personal Code* for clinicians working

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with youth who have committed a sexual offense. She has also authored a therapeutic children's book, *Body Book Private Parts Have a Reason*.

References

Allison, K. L. & Rossouw, P. J. (2013). The therapeutic alliance: Exploring the concept of "safety" from a neuropsychotherapeutic perspective. *International Journal of Neuropsychotherapy*, 1, 21-29.

Geller, S. M. (2017). *A practical Guide to cultivating Therapeutic Presence*. Washington DC: American Psychological Association.

Geller, S. M. & Greenberg, L. S. (2012). *Therapeutic presence: A mindful approach to effective therapy*. Washington DC: American Psychological Association.

Geller, S. M. & Porges, S. W. (2014) Therapeutic presence: Neurophysiological mechanisms mediating feeling safe in therapeutic relationships. *Journal of Psychotherapy Integration*, 24, 178-192.

Gendlin, E. T. (1978). *Focusing*. New York, NY: Everest House.

Gendlin, E. T. (1996). *Focusing oriented psychotherapy: A manual of the experiential method*. New York NY: Guildford Press

Rogers, C. R. (1961). *On becoming a person*. Boston, MA: Houghton Mifflin.

Siegel, D. J. (2010). *The mindful therapist: A clinician's guide to mindsight and neural integration*. New York NY: W. W. Norton.

Siegel, D. J. ((2013). *Brainstorm: The purpose and power of the teenage brain*. New York, NY: Penguin.