

Mental Health & Substance Abuse Treatment for Teens









Who We Treat

Adolescents 12 to 17 years old struggling with mental health, substance abuse and/or behavioral issues.

- Anxiety
- Depression
- Suicidality
- Psychosis

- Non-Suicidal Self-Injury (NSSI)
- Borderline Personality Disorder
- Substance Abuse
- Behavioral Disorders

Evolve's Programs

Our admissions team is skilled in helping families and providers determine what level of care is appropriate for each teen.

- Residential Treatment Center (RTC)
- Partial Hospitalization Program (PHP)
- Intensive Outpatient Program (IOP)



Our Therapeutic Approach

- Ø Dialectical Behavioral Therapy (DBT)
- Cognitive Behavioral Therapy (CBT)
- Group Therapy
 (Seeking Safety, Relapse Prevention, Anger Management...etc)
- Structural Family Therapy
- **Experiential Therapy**





Understanding Borderline Personality Disorder in Teens

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What is Borderline Personality Disorder?

Per the DSM-V¹:

A <u>pervasive pattern</u> of instability of interpersonal relationships, self-image, and affects, and marked impulsivity, beginning by early adulthood and present in a variety of contexts.

- Behavior must deviate significantly from what is normative for age and culture
- Behavior patterns endure across multiple contexts (school, home, with friends, etc.)
- Leads to significant impairment in functioning (no friends, frequently absent from school, etc.)



Possible Traits & Behaviors

- Frantic efforts to avoid real or imagined abandonment
 - Re-assurance seeking
 - Flooding someone with calls and texts

- A pattern of unstable and intense interpersonal relationships characterized by alternating between extremes of <u>idealizing</u> and <u>devaluing</u>
 - One day is gushing about their new best friend, the next day this friend is considered terrible
 - Frequent break-ups and blow-ups

Chronic feelings of emptiness



Possible Traits & Behaviors (Cont.)

- Persistently unstable sense of self
 - Changes their behavior, interests, and identity based on who they are hanging out with
 - Often "tries on" other mental illnesses
 - Cannot identify their own values
- Impulsivity in at least two areas that are potentially self-damaging
 - Sex, substance abuse, reckless driving, binging, etc.
 - Does not include impulsive self-harm or suicide attempts
- Recurrent suicidal behaviors, gestures, or threats, or self-mutilating behavior



Possible Traits & Behaviors (Cont.)

- Affective instability due to a marked reactivity of mood
 - Mood fluctuates quickly throughout the day
 - Intense episodes of sadness, irritability, or anxiety that last a few hours up to a few days
- Inappropriate, intense anger or difficulty controlling anger
 - Frequently loses temper, constantly angry, gets into fights

- Temporary, stress-related paranoia or severe dissociative symptoms
 - Fearing others are out to get them or hate them
 - Zoning out



What Causes BPD?

Interaction between biological and the environment²

High Emotion Sensitivity + Invalidating Environment → Perfect Storm

- High emotion sensitivity is often detected as early as infancy
- Caregivers may invalidate a child's sensitivity and intense emotional responses
 - Maltreatment or simple "poorness of fit"



Wait...Is This My Kid?

Many teens might display one or more of the traits and behaviors listed without having BPD. Some BPD traits and behaviors are normal teen behaviors, amplified.

Typical Teen Behavior	BPD Behavior
Occasional interpersonal difficulties	Constant blow-ups and break-ups
Sometimes feeling down or moody	Frequent and significant mood swings
Trying new things, self-discovery	No consistent interests or values
Occasionally getting angry and yelling at parents	Frequent/severe anger outbursts
Feeling touchy or sensitive at times	High emotion sensitivity/difficulty regulating emotions



What People Think It Means To Have BPD

- Manipulative
- Lying
- Always unpleasant to be around, unlikeable
- Too difficult to work with
- A "life sentence"
- Cannot be present in teens



The Realities of BPD

People with BPD have learned how to get needs met in ways that might cause other problems

"Lying" is not a diagnostic criteria for BPD

BPD can present itself in different ways. People with BPD can be highly empathic and care deeply about others.

DBT is an effective treatment for BPD and can significantly reduce "acting out" behaviors and keep people with BPD alive and out of the hospital

Research has shown that BPD traits and behaviors sometimes arise and stabilize in adolescence (more on this later)



Can You Diagnose Teens With BPD?

YES!

It is a long-standing misconception that BPD cannot be diagnosed prior to age 18. Many treatment providers are hesitant to diagnose BPD in teens because they believe it is not permitted, they are not trained to effectively assess for it, or they are not aware of the growing body of research that shows the validity in doing so.

- Research has shown that BPD pathology is as stable in adolescence as adulthood³
- Validated assessment tools can reliably identify BPD in teens4, along with other forms of screening



Diagnosing BPD in Teens

Per the DSM-V:

"For a personality disorder to be diagnosed in an individual younger than 18 years, the features must have been present for at least one year."

- Use of valid and reliable screening tools
- Clinical interview with teen and parents
- Presence of "internalizing" criteria (fear of abandonment, lack of sense of self, etc.)
- Assess impact on functioning in multiple areas



Why Diagnosis BPD in Teens?

Early Diagnosis → Early Intervention → Improved Outcomes

• Ability to focus on effective treatment

(Dialectical Behavior Therapy, Mentalization Based Therapy, etc.)

- Reduce stigma
- Increase validation through understanding and education



Diagnosis & Treatment

Dialectical Behavior Therapy

Gold standard, evidence-based treatment for BPD

www.behavioraltech.org

BPD Resource Center

www.nyp.org/bpdresourcecenter

National Education Alliance for BPD

www.borderlinepersonalitydisorder.org

Global Alliance on Prevention and Early Intervention for BPD

www.borderlinepersonalitydisorder.org/what-is-gap/



Dialectical Behavior Therapy at EvolveDBT-Informed and Comprehensive DBT Programs for Teens

DBT-Informed Programs

Evolve offers DBT-informed programming at all our locations and at all three levels of care (RTC, PHP and IOP).

Our DBT-informed programs provide a strong skills-training component, in conjunction with other evidence-based treatment modalities such as Cognitive Behavioral Therapy (CBT), Motivational Interviewing, and others. The combination of therapeutic approaches in each treatment plan depends on the specific needs of the teen in treatment.

Comprehensive DBT Program - Evolve Tarzana (Vanalden)

*Recommended for individuals with BPD

Evolve Vanalden is a fully adherent Comprehensive DBT program. This location uses DBT as the main therapeutic modality and incorporates the four essential components of DBT. These include skills training, milieu-based skills coaching, DBT individual and family therapy, and weekly consultation teams.

All staff members receive ongoing training in DBT techniques specific to the Comprehensive DBT model. Our staff are available 24/7 for teens to receive in-the-moment, face-to-face skills coaching whenever they need it.



Evolve Tarzana - Vanalden

Residential Treatment Center (RTC)

Evolve Vanalden, is a fully compliant Comprehensive DBT residential treatment center, designed for healing and growth. This location uses DBT as the main therapeutic modality and incorporates the four essential components of DBT. These include skills training, milieu-based skills coaching, DBT individual and family therapy, and weekly consultation teams.

Teens live onsite for an average of 30-60 days, receiving round-the-clock treatment, support, and supervision. We provide a safe, nurturing environment where our teens can develop practical coping skills, learn about themselves, have fun, and build enriching new relationships.

Evolve Vanalden specializes in treating teens who have difficulty regulating emotions, are engaging in high-risk or self-injurious behaviors, or are suffering from suicidal ideation. Many of our teens exhibit the traits associated with Borderline Personality Disorder, and other high-acuity mental health issues and co-occurring disorders.

Questions?

References

- 1. American Psychiatric Association. (2013). *Diagnostic and Statistical Manual of Mental Disorders*, 5th Edition: DSM-5 (5th ed.). American Psychiatric Publishing.
- 2. Linehan, M. (1993). Cognitive-Behavioral Treatment of Borderline Personality Disorder (1st ed.). The Guilford Press.
- 3. Sharp, C. (2019, March). Personality disorder in adolescents: Why should we care and what should we target? GAP Conference. Los Angeles; Clearview Treatment Programs.
- 4. Guilé, J. M., Boissel, L., Alaux-Cantin, S., & Garny de La Rivière, S. (2018). Borderline personality disorder in adolescents: prevalence, diagnosis, and treatment strategies. *Adolescent Health*, *Medicine and Therapeutics*, Volume 9, 199–210. https://doi.org/10.2147/ahmt.s156565

Resources for Teens & Families

Check out our blog: Parenting Tips & Advice

www.evolvetreatment.com/for-parents/parenting-tips

View or download digital versions of helpful guides

www.evolvetreatment.com/resources-parents

Events for parents, clinical professionals, and other community members

(recordings and slides available from previous events)

www.evolvetreatment.com/events



Join Evolve's Weekly Virtual Parent Support Group!

Register online at:

www.evolvetreatment.com/community-psg



Thank You!



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Join us for our next community workshop on June 30th

Topic: Reducing Stigma Around Discussing Suicide & Self-Harm Register now on our website!

www.evolvetreatment.com/june2021-community

