# STABILIZING HIGH-NEEDS YOUTH

Described below are strategies for helping stabilize high-needs youth in detention and residential treatment facilities. *Note:* Many of the interventions will also be relevant in other settings including homes and schools.

Common struggles of high-needs youth include:

- \*Chronic conflicts with family, peers, staff
- \*High frequency of self-destructive, selfinjurious behaviors
- \*High frequency of aggression towards people and property
- \*Poor emotional regulation

- \*Impulsive behaviors
- \*Impaired social skills
- \*Limited family support
- \*Limited coping skills
- \*High need for staff attention

#### 1) Mobilize STAFF SUPPORTS

Utilize a *collaborative, multi-provider approach* in which multiple staff are assigned to work with a high-needs youth.

Youth are assigned a Mental Health (MH) Professional AND other supportive staff, which may include Direct care staff; Teachers; and secondary MH professionals with expertise to meet youth's individualized needs (i.e., family therapy, trauma-informed work, sex offense-specific services, substance abuse services, psychological assessment, etc.).

### 2) Establish and Maintain POSITIVE RELATIONSHIPS with Youth & their Caregivers

- \*Show interest in youth- Spend time exploring youth's interests, talents, life goals.
- \*Maintain frequent contact with high-needs youth

<u>Mental Health Staff</u>: Instead of meeting with a youth for 1 time a week for an hour, break it up into shorter more frequent contacts (e.g., meet 3-4 times a week for 10-15 minutes each time)

<u>Direct Care Staff:</u> Check-in with youth each shift for at least a couple minutes

\*Make connections with youth's primary Caregiver(s)
(i.e., Place them in expert role; Give compliments; Explore their self-care; Collaborate; Empower; Be patient and understanding of their mistrust & guardedness)

## 3) REGULAR CHECK-INS when Youth are STABLE, POSITIVE, and PROSOCIAL

When youth are exhibiting stable behaviors make check-ins longer and more positively reinforcing (e.g., meeting off the unit, eating animal crackers). *NOTE:* If staff only interact when youth are out-of-control and incrisis, it can unintentionally reinforce instability and disruptive behaviors. Do not reinforce the 'squeaky wheel' phenomenon.

#### 4) POSITIVELY REINFORCE Youth for STABLE, POSITIVE, PROSOCIAL behaviors

Utilize Social Reinforcers (e.g., verbal praise; positive attention & time with stable, positive staff) and Activity Reinforcers (e.g., shooting baskets; computer time; playing musical instruments).

# 5) PROMOTE HOPE within Youth (and their Caregivers)

- \*Explore youth's Hopes/ Dreams/ Life goals. Emphasize Approach Goals, as opposed to avoidance goals.
- \*Educate about *Neuroplasticity* and how repeatedly practicing stable behaviors will help wire our brain in healthy ways.
- \*Educate about other reasons for optimism regarding our capacity to make positive life changes (e.g., brain's prefrontal maturation; low lifetime prevalence rate for delinquent behaviors; resilience outcomes; post-traumatic growth outcomes; low sexual re-offense recidivism rate). Refer to my Strengths-Based book (Powell, 2015, chapter 10) for details on these interventions that promote hope and self-efficacy.

### 6) Ensure that Youths' BASIC HUMAN NEEDS are being met

Physiological Needs: Ensure youth is eating and sleeping well

<u>Safety Needs</u>: Ensure youth is feeling physically and psychologically safe on the unit, in school, at home Social Needs: Ensure youth is getting regular support/acceptance from family, prosocial peers, and staff

# 7) Conduct a FUNCTIONAL BEHAVIOR ASSESSMENT of Problem Behaviors AND Positive Behaviors

The goal of a Functional Behavior Assessment (FBA) is to gather information about the 'function' (purpose) of a youth's identified behavior. Behaviors are often strengthened by either *getting something* (positive reinforcement; secondary gain) or *getting out of something* (negative reinforcement).

\*Gather information about the ABC's of the youth's identified behavior:

- A= Antecedents- what happens before
- B= **B**ehavior- what happens during
- C= Consequences- what happens after

\*Gather information regarding the What, When, Where, How, & Why of the youth's identified behavior:

Onset (When did the behavior first occur?)

Frequency (How often does the behavior occur?)

Time of Day/ Shift that the behavior occurs?

Level & Type of Activity when the behavior occurs? (e.g., when around peer groups vs. when alone)

<u>Presence or Absence of Certain staff</u> when the behavior occurs? (e.g., staffing patterns & characteristics)

<u>How do Others (staff, peers, family) Respond</u> to the behavior?

<u>Rejection or Acceptance from Peers</u> when behavior occurs?

What steps have previously been taken to address the behavior?

**NOTE:** An FBA should not only be conducted on a youth's *problem* behaviors but also their *positive*, *prosocial* behaviors. Explore the ABCs of a youth's positive and less disruptive behaviors.

## 8) Be SOLUTION-FOCUSED with Youth (and their Caregivers)

Ask questions about the exceptions to a youth's problems (e.g., incidents when a youth has effectively managed their aggression, self-injurious behaviors, or other struggles).

#### Questions to ask youth who are struggling with Aggression:

- \*Tell me about times you have managed your anger well (or when your anger has been less disruptive). How did you do it? What coping skills did you use to better manage your anger? What thoughts/ feelings/ behaviors/ situations helped you to manage your anger?
- \*Tell me about times when you have been kind to others?

#### Questions to ask youth who are struggling with Self-Injurious Behaviors:

- \*Tell me about times you have felt like inflicting harm onto yourself, but you did not do it. How did you stop yourself? What thoughts/ feelings/ behaviors/ situations helped you to not self-harm?
- \*Tell me about times when you have been kind to yourself (used good self-care)?

#### 9) Utilize BONUS RESPONSE-COST Interventions

The meaning of the three words in the term, 'bonus response-cost' helps to better understand this intervention. BONUS refers to the addition of a new activity/ privilege that is set up (bonus reinforcer). The term RESPONSE refers to the 'specified problem behavior', which when committed results in a COST (the loss of the 'bonus reinforcer').

Make sure the newly added activity/ privilege (bonus reinforcer) is *Personally Meaningful & Motivating* for the youth:

For a youth who likes computers = set up computer time

For a youth who likes basketball= set up time to shoot baskets

For a youth who likes music= set up time to listen to music or play a musical instrument

The 'bonus reinforcer' is pre-scheduled for specific days and the only thing that would cancel the activity is if the youth commits the 'specified problem behavior'. Youth are motivated to NOT 'act out', in order to keep (rather than earn) the 'bonus reinforcer'. For example, for a youth who likes basketball and is struggling with aggression problems, the 'bonus reinforcer' could be scheduled basketball time with their counselor every Tuesday and Friday. And the only thing the youth must do to keep the scheduled basketball time is to *not* assault anyone. If the youth does assault someone prior to the Tuesday or the Friday meeting, the counselor still checks-in with the youth but without the scheduled basketball activity, and for a shorter amount of time.

*Note*: Bonus Response-Cost interventions are <u>NOT</u> to be used in an "ALL OR NONE" fashion regarding contact with youth. When a youth commits the 'specified problem behavior', staff still maintain regular contact with the youth but without the prescheduled bonus reinforcer.

#### 10) Utilize LOGICAL CONSEQUENCES for Youths' Behaviors

Implement 'logical consequences' to help youth learn how their behaviors (both positive and negative) directly influence their environment and their life outcomes.

- **E.g.,** A youth who threatens to stab a peer with a pencil

  <u>Logical Consequence</u> = youth is restricted to only using crayons until their behavior stabilizes
- E.g., A youth who is chronically aggressive towards others
  - <u>Logical Consequence</u> = youth has restricted access to others in their community. Youth must meet with their BHS/counselor on the unit (rather than off the unit) until their behaviors are safe and stable
- **E.g.,** A youth who maintains safe, stable, prosocial behaviors
  - <u>Logical Consequence</u> = youth is provided more opportunities to participate in activities off the unit and interacting with others due to their safe, prosocial actions.

Have discussions with youth about the logical and natural consequences of our life choices. Explain that "One of the cool things about life, as we age into our teenage years and beyond, is that we all have the freedom to make choices for ourselves. And then we live with the logical and natural consequences of those choices". For example, a person can choose to burglarize homes or be physically violent towards others, but then they must accept the consequences of these actions, which likely will include legal charges, incarceration, poor relationships, and lost jobs. Conversely, a person can choose to lead a stable, prosocial life and benefit from different consequences that are likely to include personal freedom, positive relationships, and a more successful work life.

### 11) Utilize Successive Approximation (SHAPING)

Reinforce a youth's behaviors that are gradually moving closer to a desired behavior. We cannot expect youth to completely change overnight, so set up and positively reinforce youth's actions that are moving increasingly closer to the desired behavior.

For example, for youth struggling with aggression problems, reinforce behaviors that increasingly move closer to the target behavior (being respectful & kind toward others). That is, first positively reinforce youth when they exhibit *no physical assaults*. Then increase the expectation and reinforce youth when they not only refrain from physical assaults, but also exhibit *no verbal threats*...then *no cussing*...and then when they exhibit *respectful*, *kind behaviors*.

# 12) Utilize DISTRACTION and SELECTIVE ATTENDING to assist Youth who chronically 'Elicit Support through Crisis'

Youth who have been exposed to neglectful, abusive, and unstable childhood environments (i.e., inconsistent caregivers and/or multiple out-of-home placements) are at higher risk of acquiring a maladaptive 'chronic victim-stance' and learning to 'elicit support through crisis'. Providers must assist youth in working through their past adversity in a manner that includes a 'resilience mindset' and does not reinforce a crisis-oriented lifestyle.

Strategies for working with these youth include:

- \*Begin conversations with positive observations and/or compliments, to prime conversations in a positive direction
- \*Selectively attend to any content of a youth's communication that is positive
- \*Redirect conversations to positive topics in which youth have a personal interest
- \*Distract away from chronic victim-stance talk (change the subject)
- \*Shorten conversations when youth are communicating with a chronic victim-stance, deficit-based focus
- \*Have conversations about resilience research and how people who have been impacted by past adversity can cope in resilient ways

# 13) Help Youth (and their Caregivers) to be INFORMED CONSUMERS

- \*Help youth (and caregivers) to be 'their own best therapist'
- \*Be Collaborative
- \*Provide a Rationale/ Psychoeducation about the... what, when, where, how & why of youth services
- \*Discuss the benefits (short- and long-term benefits) for people who cope in stable, resilient, prosocial ways
- \*Educate about Protective Factors linked to Resilience. Utilize the RPFC (Resilience Protective Factor Checklist) to enhance youth and caregiver's knowledge about resilience (Powell, 2015, Chap 5 and p. 179-181; Powell et al, 2021).

Powell, K. M. (2015). A Strengths-Based Approach for Intervention with At-Risk Youth. Champaign, IL: Research Press.

Powell, K. M., Rahm-Knigge, R L. & Conner, B. T. (2021). Resilience protective factors checklist (RPFC): Buffering childhood adversity and promoting positive outcomes. *Psychological Reports*, 124(4), 1437-1461. doi.org/10.1177/0033294120950288