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Commentary on "The Impact of Family Stressors on the Social Development of Adolescents in Residential Facilities"

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This commentary is a response to the article, "The impact of family stressors on the social development of adolescents admitted to a residential treatment facility," which examines the important but relatively understudied relationship of family dynamics in the social development of high-risk teens in residential treatment facility (RTF) care.

The literature review is well-written. I agree with the author that a review of the relevant literature provides relatively little research on the role of family in teen development. I especially like her point that professionals have tended to blame parents for their children's behaviors. This study appropriately questions the assumptions that have been used to justify separation of family members from their high-risk teens in RTFs.

The methodology section is also generally well-written. In her study, the author focuses on the relationship between family stress and negative teen behaviors. The author probably should have stated that the study investigates the *association* (rather than the impact) of family risk factors

on the social development of adolescents (page 5), since causal relationships are not measured by the methodology. The author's research does support the conclusion that family stressors may be *associated* with social development of teens in RTF care.

The author acknowledges that there are "reciprocal linkages between parental and youth behavior" (page 17). In fact, we still know little about the *direction* of influence; the measured "negative behaviors" of the teens may themselves influence what the author is calling "family risk factors." There may well be complex interactions between overall family stress and the stress of a child placed in an RTF; certainly both parents and their children may worry about each other in such circumstances. Feelings and thoughts of failure, powerlessness, and frustration may haunt parents of such teens.

I support the author's call for a continuum of services for both teens and their families. I also support her call for a partnership between parents and professionals. Programs could hire professionals who are effective in working with both youth and their parents. A combination of individual, family, group, and family-group modalities might be offered to help parents and teens learn to communicate more effectively with each other. A group for parents, for example, might help them normalize their grief and pain, and empower them to continue supporting their children effectively. A group of parent-child pairs might give both adults and teens opportunities to offer help to each other.

In her implications section, the author recommends only child-focused cognitive behavioral programs (or CBT programs), without

providing any evidence that the currently popular CBT approaches are actually superior to other approaches in working with high-risk adolescents. Recent meta-reviews have suggested that no model is in fact superior with this population (Duncan, Miller, Wampold, & Hubble, 2009), but do suggest the importance of “common factors.” Practitioners could be encouraged to develop their expertise in theories and skills that both they and their clients can believe in, and to develop their ability to utilize the common factors of effective therapeutic relationship in helping teens and their families.

Finally, family stress and teen behavior may also be related to cultural and other community-level factors. These may include collectively held views of parenting, issues related to poverty, issues of oppression, and vocational opportunities for youth. From a social work (person-in-environment) perspective, such issues should also be considered when assessing and intervening with families and high-risk youth.

References

Duncan, B. L., Miller, S. D., Wampold, B. E., & Hubble, M. A. (Eds.). (2009). *The heart & soul of change: Delivering what works in therapy*. Washington, D.C.: American Psychological Association.