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PARENTING OF ADOLESCENTS WITH DISORDERS DECIDING ON A NEW PATH

ABSTRACT. Bublil Granit, *Parenting of Adolescents with Disorders Deciding on a New Path* [Rodzicielstwo adolescentów z zaburzeniami – nowa ścieżka życia]. *Studia Edukacyjne* nr 54, 2019, Poznań 2019, pp. 325-333. Adam Mickiewicz University Press. ISSN 1233-6688. DOI: 10.14746/se.2019.54.19

The objective of the article is to present a group intervention program in the narrative approach with parents of adolescents who suffer from attention deficit hyperactivity disorder (ADHD). For this purpose, the article will review the characteristic difficulties of parents of adolescents who have ADHD, the principles of the narrative approach, and the contribution of the group in work in this approach. On this basis, the initial intervention program, which addresses unique components intended to answer the difficulties and content worlds of this population of parents, will be presented. This article will express the parents' strengths and the difficulties that they face and the group processes that influenced the change in the perceptions and behaviors of parents of adolescents with ADHD. These contents were learned from the pilot group of the research study. Five parents, primarily mothers, of children aged twelve to fourteen who suffer from ADHD participated in the group. The article will address one of the significant difficulties that arose in the encounters with the parents, the behavior of the adolescent who has ADHD regarding the religious identity and behavior appropriate for the values upon which he was educated. The contribution of the research study lies in that it offers parents support and ways of coping with the stress and emotional load that accompanies their coping with the adolescent who has ADHD.

Key words: ADHD, parenting, adolescents, intervention program, religious identity, narrative approach

Introduction

In modern society, the parents of adolescents are required to undergo most difficult tests of parenting. The family unit constitutes a social unit, and it faces many developmental tasks. The complexity of modern life and the moratorium of their children constitute sometimes an obstacle on the way to good parenting. The changes that the young people experience in the period

of adolescence do not pass over their status in the system of relationships in the family. One of the important developmental tasks of adolescence is the process of the separation from the parents. The adolescent attempts to reduce his dependence on his parents in different ways. He/She spends less time with his parents and invests more of his time in the peer group. Arguments and conflicts occur more frequently, especially between the mothers and the adolescents.¹ In many cases, the adolescent sees his parents' involvement as an attempt to control him and to deny him his freedom. He wants his parents to treat him like an adult and casts doubt on the legitimacy of the general rules and expectations of his parents from him.²

The adolescents' desire for autonomy symbolizes the change of the parents' role. A parent is required to cultivate for the adolescent a sensitive environment of acceptance and closeness, along with the setting of borders, supervision, and control. A parent who sees the stage of separation as a natural process in the child's development will release the control, will replace it with channels of communication and support, and will encourage him to be independent.³ Such an environment will allow the adolescent to develop a more realistic view of others and of himself and will succeed in functioning better with the developmental tasks facing him.⁴ The quality of the communication between the parent and the child already from infancy is important to the social emotional development over the course of life. The display of affection, the parents' involvement, and the use of positive reinforcements contribute to a strong sense of self-value, positive social relations, and few behavior problems.⁵

Parenting to adolescents with ADHD

In general, parenting is characterized as the need of people to leave a continuous testimony of their existence in the world. This may be weakened in the case of the parenting of a child with special needs, because of

¹ R. Plotnik, *To Grow Up Differently: The Emotional and Social World of Children with Learning and Attention Disabilities*, Holon 2008 (Hebrew).

² W.A. Collins, *A Power Primer*, *Psychological Bulletin*, 1999, 112, p. 155-159.

³ J.P. Allen, D. Land, *Attachment in Adolescence*, [In:] *Handbook of Attachment: Theory, Research and Clinical Application*, Eds. J. Cassidy, P.R. Shaver, New York 1999, p. 315-319.

⁴ B.K. Barber, E.L. Harmon, *Violating the self: Parental Psychological Control of Children and Adolescents*, [In:] *Intrusive Parenting: How Psychological Control Affect Children and Adolescents*, Ed. B. Barber, Washington American Psychological Association, 2002, p. 15-52.

⁵ R.M. Gray, L. Steinberg, *Unpacking Authoritative Parenting: Reassessing a Multidimensional Construct*, *Journal of Marriage and the Family*, 1999, 61(3), p. 574-587.

the gap created between the expectations of the “ideal child” and the disappointing and disillusioning reality.⁶ Some of the research works on this topic.⁷ focused on the negative aspects of the experience and found that the existence of a child with special needs in the family may cause high levels of parental stress, influence the family’s self-esteem, harm the sense of parenting efficacy, and so on. The behavior of children with ADHD is frequently characterized by responses of impulsiveness, fits of anger, and excessive movement. This behavior causes the parents to accumulate over the years serious emotional loads, anger, frustration, and disappointment. Parents of these children report strong feelings of guilt, shame, anxiety, and confusion, primarily following negative behavioral situations concomitant with their child’s ADHD.⁸ Among most adolescents with ADHD, the symptoms continue to exist at different levels. A main problem among adolescents with ADHD is the problem of regulation that exists in any event as a difficulty among adolescents but becomes stronger when the adolescent has attention disorder, primarily the type with hyperactivity/impulsivity or excessive rebelliousness. Research studies report that parents of adolescents who have ADHD have more conflicts with their children than do parents of adolescents who do not have ADHD.⁹ Parents of adolescents who have ADHD describe typical behaviors that characterize the difficulties: physical and verbal aggression, passive resistance, self-destruction, lack of emotional and social maturity, learning difficulties, isolation, and rejection.¹⁰

Another difficulty that is expressed in adolescence is the difficulty with the belief-religious identity. The uniqueness of every religious group is expressed in ceremonies, beliefs, and emotional involvement. It creates group identification and continues to be built from it.¹¹ The truths of religion become a personal part of the individual and a component in his religious identity.

⁶ R. Plotnik, *To Grow Up Differently: The Emotional and Social World of Children with Learning..*

⁷ M.F. Hanline, *Transitions and critical events in the family life cycle: Implications for providing support to families of children with disabilities*, *Psychology in the Schools*, 1991, 28(1), p. 53-9; G.E. Mallow, G.A. Bechtel, *Chronic sorrow: The experience of parents with children who are developmentally disabled*, *Journal of Psychosocial Nursing and Mental Health Services*, 1999, 137(7), p. 31-5.

⁸ S. Young, J. Myanathi Amarasinghe, *Practitioner review: Non-pharmacological treatments for ADHD: A lifespan approach*, *Journal of Child Psychology and Psychiatry*, 2010, 51(2), p. 116-33.

⁹ R. Barkley, *To Control ADHD: The Complete and Authorized Guide to the Understanding of Attention Deficit Hyperactivity Disorder*, (Transl. by: L. Bareket), Tel Aviv 2003 (Hebrew).

¹⁰ K. Khosrow, M. Yoosefi Looyeh, *Narrative intervention: A school-based counseling strategy for students with attention-deficit/hyperactivity disorder*, *Intervention in School and Clinic*, 2013, 48, 5, p. 307-312.

¹¹ H. Mol, *Introduction*, [In:] *Identity and Religion*, Ed. H. Mol, London 1978.

Hallahmi¹² differentiates between religious identity, which constitutes a “social label” and “religious belief”, which constitutes a main element in the perception of the identity. Examination of the religious identity by the adolescent and behaviors not like the accepted norms are perceived by the parents and the teachers as negative and as expressing a sense of parenting failure. One of the ways of coping with the difficulties of coping with an adolescent who has ADHD is the use of the group resource.¹³

Group therapy by narrative approach

The work in the group is performed according to the narrative approach, an approach that sees the person to be an active creature in his world, who addresses the environment through constant processes of interpretation using innate mechanisms, with which he builds schema of meaning for the world in which he lives. These interpretations are the narratives that comprise his outlook and direct his behavior.¹⁴ The narrative approach is a culturally-sensitive approach that emphasizes leading social norms in the community in which the participants live. The narrative is obtained by two dimensions: the personal dimension and the social dimension. The personal dimension represents the person’s innerness, and the social dimension derives from the cultural and value-based perception in the participant’s environment. The social dimension has considerable influence on the personal dimension.¹⁵

The narrative approach has several main principles: the principle of meaning, the principle of multiple stories, the principle of social construction, the principle of the formative language, the principle of equality and cooperation, and the principle of the DNA.¹⁶ In group therapy in the narrative approach, the group can become a community that grants recognition and provides support and shared ways of coping. The encounter with these layers’ acts in favor of the creation and renewal of the experience and of patterns of behavior and coping. It enables the person to change the automatic interpretation of situations.¹⁷ This conversation on different levels of processes of communication represents both the shared narrative and the

¹² B. Beit Hallahmi, *Prolegomena to the Psychological Sunday of Religion*, Lcwisburg PA 1989.

¹³ D. Spiegel, C. Classen, *Group Therapy for Cancer Patients*, New York 2000.

¹⁴ M. White, *Maps of Narrative Practice*, New York - London 2007.

¹⁵ H. Kadosh, *The Group as a Story - The Analytical Magic of the Narrative*. *Mikbatz (Assemblage)*, The Israeli Journal for Guidance and Group Therapy, 2010, 15(1), (Hebrew).

¹⁶ G. Freedman, G. Combas, *Narrative Therapy: The Social Construction of Preferred Realities*, New York - London 1996.

¹⁷ H. Kadosh, *The Group as a Story*.

social-cultural narrative through the unconscious experiences that are conveyed in communication beyond words.

The intervention program existed in a group of parents and not in personal counseling through the understanding and belief that the group can serve for the parents as a source for identification and reciprocal learning. Group therapy is specifically important to help adolescence with ADHD coping with the emotional stress that derives from the coping with the child who suffers from ADHD. The assumption was that the parents cope with similar problems and the group can constitute a group of belonging in which the parents can feel comfortable and share problems and anxieties. In addition, the group constitutes a source of objective information that explains the attention disorder and its implication on the adolescent. In the intervention group for parents of adolescent children who have ADHD, the difficulties in the coping alongside the strengths of the parents and adolescents were expressed. Often the parents' religious identity was central in the group conversation. The mothers in the sessions spoke of the child's difficulty with keeping the religious commandments as a part of the religious affiliation of the family and the tension created around the expectation that the child uphold the values of the family and keep the religious commandments).

In the adolescent's search for the ego identity at this age,¹⁸ there is also the search for a faith and religious identity. The parents' feeling of disappointment with the adolescent harms the sense of security and acceptance that the adolescent needs at this age.¹⁹ The group work enables the parents to examine the dimensions of influence of the difficulty of the adolescents with ADHD and to develop skills for the realization of their functional potential as parents. The group work served as a power against the powerlessness and sense of despair in that it enabled the parents to share with others their problems and to use the resources shared by all. Hence, the mothers felt that they could converse without feeling that they are judged for this, and they had the opportunity to cope with issues that trouble them, while placing emphasis on a supportive system. Through the instructor and the participants, the mothers could cultivate their family narrative through the discovery of the adolescent's strengths and their strengths as outlining a way and educating for an ideological-faith-based identity and enabling their adolescent child to research and discover the truths and values in which he believes. During the discussion in the group, the understanding was reached about the role of the parents, and the family enabled a process of the building of the adolescents' identity when the focus of the control is

¹⁸ E.H. Erikson, *Identity, Youth, and Crisis*, Tel Aviv 1987 (Hebrew).

¹⁹ B.K. Barber, E.L. Harmon, *Violating the self: Parental Psychological Control of Children*, p. 15-52.

internal and not external. The understanding was built that the interactions inside the family have great importance in the process of the creation of the identity of the adolescents who grow up in it.²⁰

In the work of the group, we used therapeutic means suggested by Yalom (1995), forces that motivate the processes in the group and gave the mothers the opportunity to undergo a positive and remedial experience. The mothers in the first stages of the group raised questions and problems on the topics that worry them and shared with one another the information related to the topic and advice learned from their experience. This stage is important since it breathes hope in the participants and contributes to the feeling of universality, the feeling that they are not the only ones with the difficulty contributes to the sense of relief.²¹ Mothers knew to exhibit empathy with the difficulty of the mother, while finding points of light in the child's behavior so as to cause the parents to feel pride instead of disappointment, an emotion that accompanies parents of children with ADHD. The research literature show that the social support that consists of practical help, information, and emotional support helps include the feeling of disappointment and failure experienced by many parents of children with learning disabilities, including ADHD.²²

The topic shared by group members and the difficulties with which they cope constituted a unifying force for the group. The group transformed the unique problem of each one of the group members to the universal difficulty. This understanding enables significant relief for the individual.²³ The members of the group created an encouraging and supporting environment, without judgment or criticism. This environment enabled mothers in the group to open their hearts and to share their everyday distresses regarding their children with ADHD. Parents of learning disabled children feel sometimes feelings of guilt or difficult emotions towards the children. These feelings contribute to the sense of loneliness. In the group a supportive and empathetic atmosphere developed, and in it group treatment interactions were created. When there is a legitimacy to express every emotion, it is possible to address the negative emotions repressed because of the shame. Thus, the participants in the group learn to research themselves in intra-personal investigation and are given the power to plan and to perform the required change. The possibility given to the mothers in the group that displays empathy and acceptance of their emotions enabled them to conduct

²⁰ B. Even Chen, *The Influence of Life Events, Family Role, Perception of Self-Ability, and Ego Identity on the Suicidal Tendencies of Adolescents*, Bar Ilan University, 1993 (Hebrew).

²¹ I.D. Yalom, *Theory and Practice of Group Psychotherapy* (4th Ed.), New York 1995.

²² E. Gilat, *Processes of Intervention in Counseling Groups for Parents of Children with Learning Disabilities*, Study and Research in the Training of Teachers, 2006, 10, p. 19-47, (Hebrew).

²³ I. Yalom, M. Leszcz, *Group Therapy – Theory and Practice*, Jerusalem 2006 (Hebrew).

an intra-personal investigation and to establish a change in their behavior at home. This process is accompanied by the group in involvement that is expressed in the providing of constructive feedback. When the participant receives feedback for his actions, feelings, thoughts, or difficulties, he becomes aware of the influence of his behavior on others.²⁴

During the group conversation and the mother's story, it was possible to learn about the son different facts that were left out of the mother's dominant story that was connected primarily to the narrative of the leaving of the religion and the reduced reference to the studies. Traits such as diligence and devotion in his workplace in the leisure hours, the times he displayed caring about his parents' desire in contrast to his desire, the relationship he has with his siblings, etc. During the meetings and the mothers' feedback, they directed their viewpoint to the positive part in the son's behavior from the understanding that this is also a part of the education for values upon which they worked in the cultivation of the child. The mother's ability to learn to recognize herself through the feedback and the reflection of the group members enables observation of the situation from different and new outlooks and increases the ability and the desire to make a change. In a later meeting, she said that she had a number of less charged encounters with her son and that she is succeeding in seeing also herself in a slightly positive light. There is the understanding that a change requires a process and things are not solved with a wave of a magic wand, however the mothers in the group felt empowerment and hope and the beginning of the path.²⁵

Insights into the Continuation of the Work

There are several main insights regarding this intervention. At the beginning of the meetings, the parents came with the need to receive a sure program for success and as the instructor I had to avoid giving advice that could cause judgment and decision of right/wrong in the coping with the difficulties. In addition, every way of coping of the parents relies on the forces innate in him and on the complexity of the relationship he experiences. Every person in the group comes with a different level of complexity and with different ways of coping. Another insight is the importance of developing the discourse in the group so that every participant contributes and benefits. Other insights relates to group instructors. They need to allow all members in the group to tell

²⁴ J. Trotzer, *The Counselor and the Group-Integrating Theory, Training and Practice*, Philadelphia 1999.

²⁵ RA. Neimeyer, *An appraisal of constructivist psychotherapies*, *Journal of Consulting and Clinical Psychology*, 1993, 61(2), p. 221.

their story and to give advice and offer suggestions from their experience. The instructors should guide the discussion so as to increase its depth, provide information and didactic suggestions and to preserve the line of conversation on the topic without sliding into additional topics. Finally, at the end of every session, there is room to tell about what we will talk about the next time and to ask a question for thinking towards the next meeting.

Summary

From my work in this counseling group, I learned that it is very important to create opportunities for the meeting of parents who cope with similar problems. The work in the group contributes to them as individuals and as the group and enables them to cope and feel better with themselves as parents and as people. The group constitutes a resource of value in the work with parents who are dealing in the family with an adolescent who has ADHD. The involvement with other people in similar situations facilitates the reduction of the feeling of loneliness, empowers them, and gives them hope.

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