

Working with Youth and Families: A Relational Approach October 24, 2019

Presented By: Dr. Kathy Bailey, Professor, School of Criminal Justice, Grand Valley State University

Entitlement theory holds that so-called maladaptive behavior makes sense in the context of a juvenile's life experience. Youth with behavioral difficulties are now abiding by the rules of living learned from their life experiences. It follows that in order to change behavior youth must experience new possibilities and develop a new set of relational interactions in order to change existing, limited beliefs. A "Relationship Model" of treatment has proven highly effective in providing corrective experiences for youth. The core of this treatment is for providers to help youth call into question some of the youth's long-standing beliefs, challenging youths to have better insight into themselves and move towards healthier relating.

Relationships are the matrix of life, with the most important relationships being those with one's family. A child's experiences move the child towards what he or she can expect from the world—positive or negative—and develops a child's set of rules about living in the world with self and others. How a youth is received and held as a small child builds a set of inner rules about what is acceptable *and possible* and what is not. It follows that how clinicians <u>treat</u> the youth and people that they work with conveys messages to them about their beliefs; that those beliefs are true, or possibly not true.

At the core of trauma-informed treatment is the need for clinicians to build strong therapeutic relationships. The following are also elements of treatment:

- Psychoeducation about normal responses to trauma
- Family support or conjoint therapy
- Emotional expression and regulation skills
- Anxiety management and relaxation skills
- Cognitive processing/reframing

Entitlement refers to an individual's sense of deserving various objects, such as food, clothing, and money, and deserving emotional, physical, and intellectual experiences, including attention, affection, services, education, power, efficacy, and time. People that have healthy entitlement are those whose own entitlement needs have been met and internalized. Development of healthy entitlement begins at an early age, by responsive parents that convey the message that for the child's early life, the child is the most important. Healthy entitlement appears in an individual's personality and behavior in the following manner:

- A regard for and interest in self and others
- An ability to be aware of and consider one's own needs and feelings along with those of others
- Flexibility in giving and receiving, an ability to choose to defer to another's need or preference at times, but also be able to stand for one's own need or preference at times



- A healthy self-appreciation and the expectations of decent treatment and non-exploitation from others
- A reasonable sense of one's own value, abilities, competence, and accomplishments
- A sense of personal efficacy and power that permits recognition and appreciation of others' value and abilities
- The ability to assess and recognize one's own and others' responsibility for mistakes or problems
- The expectation of hope for quality-of-life needs and experiences

Under-entitlement can result from abuse and neglect, but also from experiencing "conditional" love from parents. The child responds by having a "good self", one that is acceptable to others, and a "bad self", one that is unacceptable to others. Combined, the two "selves" result in a "false self". This false self is a compromise solution to try to ensure a place in relationship with others. The child lives, and grows, by the learned rules that assure the approval of or safety with the parent(s). The good self maintains with the rule of living "I must be", while the bad self maintains by the rule of living "I must not be". The resultant belief for the child is they will only be loved (protected, cared for, valued) if pretending to be someone else, so they will hide who they really are and act the part that they must in order to receive love and acceptance. The child comes to believe that their true self does not count in relationships.

Rules of living for the under-entitled youths are early like those of adult co-dependents:

- My place in life is to care for others, not myself. My needs are not important
- If I do something just for myself, I am being selfish
- If I assert myself, I am being mean
- Others won't love me if I don't do something for them. To be good is to sacrifice
- I must make sure that others are not angry or upset
- I am unwilling to ask for help or to voice complaints to others for poor or inconsistent treatment
- Seeking or receiving valued objects or experiences is selfish

Any discussion of under-entitlement must include examination of "over-entitlement". Researchers believe over-entitlement is a defense layer for under-entitlement. The child grows to believe that *others* must not be considered in relationships. The nexus linking over-entitlement as a defensive layer for under-entitlement follows the same dynamic; the same "good" and "bad" self develops, resulting in a "false self" with attitudes and behaviors that present as:

- A pervasive pattern of grandiosity, need for admiration, and lack of empathy
- Inflated judgments of their own accomplishments and an implicit underestimation of the contributions of others
- The belief that they are superior, special, or unique, and the expectation that others recognize this
- A lack of sensitivity to the wants and needs that results in an intentional or unwitting exploitation of others and lack of reciprocal interest in others with whom they relate
- An unreasonable expectation of favorable treatment



- An expectation that they be catered to and resultant furious reactions when this does not happen
- A belief that the world is a hostile place so the person must get what they can, however they can get it
- The attitude that no one cares for them and takes care of them, so they don't need to care for anyone or take care of anyone
- Abandon others first, since I will be abandoned, and don't have feelings, or if I do, do not show them

Pervasive over-entitlement can be episodic, and can be further specified by type, including narcissistic, avoidant, sociopathic, and socialized. It should be noted that entitlement is not a fixed state. For example, under-entitled people may shift to an over-entitled relationship with vulnerable others, but underneath all entitlement disorders—over or under—is the belief that "I do not count".

When treating entitlement disorders, the goal is to correct the entitlement imbalance and its related dysfunctional working models as demonstrated by the youth's attitudes, beliefs about him/herself and relationships, and behaviors. The main premise of treatment is to identify replicating experiences—ones that confirm old working models and their related rules of living—and create corrective experiences that disconfirm the old, limiting beliefs. Convey to the youth that the youth does matter until this belief is internalized into a sense of self-worth and more balanced entitlement. For the under-entitled, the person must have the experience of being deeply cared for. This can mean that for a time, the individual must be over-entitled. Do this by:

- Being responsive to the person's needs
- Being emotionally available
- Listen to them
- Take them seriously when they speak
- Acknowledge their feelings
- Look for their "true self" and call it out
- Encourage them and offer emotional support
- Remind them of their worth and rights
- Challenge them to stand up for themselves, and to treat *themselves* with respect
- Celebrate their gifts and talents
- Align yourself with their feelings of hurt or anger if the treatment they receive from others is (or was) unjust
- Help them bear their fear and guilt for doing good things for themselves

Treatment of over-entitlement has two stages. The first is to boundary the individual's over-entitled behavior, with the aim of drawing out the under-entitlement that underlies it. Action steps for that include:

- Call the person out to be in a relationship, to regard the "us" instead of just the "me"
- Share responsibility with others for expenses, chores of living, and the like



- Take responsibility for their problems instead of projecting them onto others or avoiding them
- Experience giving to others, and having that giving received by others
- Be accountable for injuries to others and make amends
- Take responsibility for creating happiness for oneself, instead of expecting others to provide it
- Learn to consider others' feelings (empathy)
- Being considered capable of doing these things and being *expected* to do them

The second stage of treatment for over-entitlement is to treat the under-entitlement (as described above) once under-entitlement has emerged. If the under-entitled layer is left without treatment, the chances are great that this person will again return to over-entitled defense mechanisms.