

Dealing With Troubled Teens

By Daniel Blash

General statement and definition: Sexual Abuse

Dealing with sexual abuse and other issues of that nature requires the utmost care. Sadly, many of the young people in a given church will have experienced some sort of unwanted sexual advances. These 'issues' seem to lie dormant until the teen years when sex drives and sex related hormones start to coming to life. Experts estimate the one of every four (some research claims it to be one in every two) girls, and one in every seven boys, have been sexually abused. Generally a male family member or friend of the family perpetrates the abuse. Obviously, the young person leaves the experience with a host of mixed feelings. The end result, in many cases, is a young person who either becomes very promiscuous, or who has an aversion to males (male leadership). In



either case, the results can be devastating. When a child or young person is sexually abuse by a trusted source, it's like breaking their moral compass. Their sense of right and wrong is damaged, and their sexual tendencies began to develop before they are old/mature enough to know what to feel or how to react to what they are feeling. As a direct result recent research suggest that over 95% of those who claim to be lesbians also claim childhood sexual abuse.

There is a very good chance that the youth pastor will be the 'first' person who the teenaged sexual abuse victim has talked to about the abuse. This is a precious gift being placed in the hands of the youth pastor; it must be well handled! It would be wise to bring this issue to the church leadership as soon as possible.

Most common signs and symptoms:

- ◆ Depression
- ◆ Unhappiness without logical reason
- ◆ Lots of ups and downs
- ◆ Difficulty controlling or dealing with anger
- ◆ Difficulty sleeping
- ◆ Excessive anxiety
- ◆ Feelings of panic
- ◆ Compulsive behaviors (food, sex, drugs, etc.)
- ◆ Trouble maintaining a stable relationship (clings too quickly, wants all of the attention)
- ◆ Perfectionist
- ◆ Self-destructive behaviors
- ◆ Attempted suicide
- ◆ Feelings of worthlessness
- ◆ Difficulty trusting others
- ◆ Feels unlovable even by God

As you will notice, the symptoms of sexual abuse are scattered across the range of emotions. Many of those symptoms are also common to other diagnosis. Again, for that reason it's important not to jump to conclusions.

Note: The sexual abuse victim has built some protective walls around her heart. These walls keep her from being hurt again; unfortunately, they also keep her from establishing meaningful and lasting relationships. The walls that keep out man also keep out God. Wall generally include:

- ◆ Fear of getting in touch with the pain in the memory
- ◆ Fear of letting go of defense mechanism
- ◆ Holding on to anger and bitterness to protect themselves
- ◆ Intellectualism
- ◆ Demonic interference
- ◆ Unconfessed sins

As you will notice, the symptoms of sexual abuse are scattered across the range of emotions. Many of those symptoms are also common to other diagnosis. Again, for that reason it's important not to jump to conclusions.

Note: The sexual abuse victim has built some protective walls around her heart. These walls keep her from being hurt again; unfortunately, they also keep her from establishing meaningful and lasting relationships. The walls that keep out man also keep out God. Wall generally include:

- ◆ Fear of getting in touch with the pain in the memory
- ◆ Fear of letting go of defense mechanism
- ◆ Holding on to anger and bitterness to protect themselves
- ◆ Intellectualism
- ◆ Demonic interference
- ◆ Unconfessed sins



Suggested methods of helping (if the person is being currently abused, get them out of the abusive environment and away from the perpetrator!)

Help by getting them to:

- ◆ Stop blaming themselves for the abuse:
The abused person will usually blame himself or herself for the abuse. Work with them to understand the real source of responsibility.
- ◆ Make health choices for themselves.
The abused person will generally have a history of unhealthy choices.
- ◆ Identify those choices and help them to make better ones.
- ◆ Replace shame messages with new messages of truth.
- ◆ Help them understand what it means to be a new creature.
- ◆ Seek Christ honoring behavioral patterns.
Over time the abused person can string together a 'history' of good decisions. That will help her self-esteem
- ◆ Replace shame-identity with Christ-centered identity.
The abused person needs to learn to 'see' themselves through the eyes of Christ.
- ◆ Let go of controlling behaviors.
- ◆ Forgive the perpetrator of the abuse
- ◆ See therapy when necessary to work through conflict

Limitations: Sexual abuse almost always needs to be handled by a mental health professional. Most abuse victims carry the scares into their adult lives. The issues the come as a result of the abuse can be just as traumatic as the abuse itself.



General statement and definition: Depression

Depression: Depression comes in many shapes and sizes. It can be as simple as a mild case of the blues that lingers longer than normal, or a severe episode that totally debilitates the depressed person. In addition to the varying degrees of severity, one must also consider the Spiritual and physical aspects of depression. Because there are so many variables to consider, and because most people only know the most obvious signs of depression and are not aware of similar diagnoses, the diagnosis of depression is often an incorrect diagnoses. Mental Health professionals are trained to 'rule out' a variety of other potential diagnoses before assigning the diagnosis of depression. For example: Dysthymia, Bipolar I, Bipolar II, Cyclothymia, and a variety of mood disorders **ALL** have symptoms of depression.

Again, since there are so many forms and degrees of severity with depression, it is vital to uncover the source of the depression before offering advice. As a rule of thumb, the following treatments are appropriate for dealing with depression:

- ◆ Physical cause (hormones, etc.): treated by a medical doctor
- ◆ Emotional (past issues, low self-esteem, etc.): treated by a mental health Professional
- ◆ Mental/Cognitive (thinking problems, poor decision making skills): treated by a mental health professional
- ◆ Environmental (ie. Home life): treated by a social worker, etc.
- ◆ Spiritual: treated by the church

Most common signs and symptoms:

- ◆ Low energy
- ◆ Difficulty sleeping or sleeping all the time
- ◆ No desire to be involved in activities
- ◆ Aches and pains
- ◆ Loss of appetite
- ◆ Sad (tearfulness)
- ◆ Despairing and hopeless
- ◆ Irritable
- ◆ Withdrawn
- ◆ Mental anguish
- ◆ Low self-worth
- ◆ Pessimistic about the future
- ◆ Self-destructive (everyone would be better off if I were not around)



Suggested methods of helping

1. Get the person to commit to the following:



- ◆ To Complete recovery
- ◆ To Praying first about everything
- ◆ To an intimate relationship with God (James 4:7, Rom. 8:16, Phil. 4:7)
- ◆ Yourself as a child of GodYour body to God
- ◆ Yourself to renewing of your mind
- ◆ Yourself to good behavior
- ◆ Yourself to meaningful relationships
- ◆ Yourself to overcome every loss

2. Build a network of support around the person, but don't let them 'infect' the others. The network or team should be made up of people who are solid in the faith and who will not be easily drawn into depression themselves.

3. Maintain firm but fair standards of behavior for the depressed person. Depression can be debilitating, but in most cases it's not. You should not drop your level of expectation just because the person is depressed. Many times action can be the escape key for depression. The depressed person must be proactive!

4. Put them to work! They should be trying to help themselves at least as much as you are trying to help them. Hold them accountable to be faithful to church and other church related activities.

Limitations:

Know your limits. When dealing with depression always use care and caution. At the first hint of self-harm or the harm of others get professional help. Everyone is different, and not every intervention will work in every case. Avoid dealing with tough cases of depression alone. Instead build a referral network for yourself. The network should include at least one mental health professional. Finally, the most dangerous period of depression is when the person is 'coming out' of depression. That's the time when most suicides occur. So, keep a close eye on the depressed person until they have achieved full recovery.

General statement and definition: Homosexuality

There's not much written about the abnormal behavior of homosexuality, mainly because so many in 'main stream' society have accepted it as 'normal' behavior. However, that was not always the case, and it's certainly not the case within the framework of the church. Homosexuality is a sin, but more than that it is a lifestyle that opens the door to a whole host of mental health problems. When dealing with a youth who is struggling with his or her sexuality it is important to keep things in a right perspective. A thirteen year old boy who is experiencing homosexual feeling for the first time in his life has lived twelve years without those feelings. So, in the big picture, you're dealing with a very young (one year old) problem. Remember that! Those thoughts and feelings are generally not well founded and with a little patience and (appropriate) male guidance, the youth will generally pass through that

