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With substance use and delinquency, MDFT has demonstrated efficacy in comparison to psychoeducational multifamily group intervention, peer group treatment, individual cognitive-behavioral therapy (CBT), and residential treatment (Liddle, 2010). Because MST is an empirically supported treatment, MST can be used in New York therapy for children and adolescents with severe antisocial behavior and their families and is used most often with youths who present with serious and chronic patterns of offending and are at high risk of out-of-home placement (Henggeler and Schaeffer, 2010). This is an especially important treatment modality in urban environments that psychologists in New York should know and utilize. MST has also shown to be effective for adolescents with substance abuse disorders and problem sexual behavior and can be used in therapy in New York to address these issues as well..

Recommendations for a new approach to treatment with high-risk adolescent females will be offered in light of these risk factors and the ability of different family therapy models to address these factors. This in-depth review will provide clinicians with a better understanding of how familial relationships may serve as protective and risk factors for early sexual debut and will provide recommendations for treatment of this population within a family systems framework that can be used by psychologists in New York. Throughout this project, the existing literature will be critically reviewed and recommendations for further research will be made.

The following chapter will present an overview of the historical perspectives and definitions of adolescence and adolescent development. It will then give an overview of healthy adolescent development with respect to biological and pubertal development, cognitive and brain development, adolescent-peer relationships, and parent-adolescent relationships. These areas will be reviewed with respect to their influence on adolescent psychosocial development. The existing literature on adolescent sexuality will then be reviewed, discussing both healthy and unhealthy development. This information will be especially useful for to those providing therapy in New York, especially those who work with adolescents.

The third chapter will review protective and risk factors related to risky sexual behaviors for psychologists in New York to be aware of. The chapter will then discuss parent-child relationship factors associated with problem behaviors such as parental monitoring, frequency and quality of parent-child communication, parental warmth, family connectedness, and family conflict. These aspects of parent-adolescent relationships that have been related to adolescent problem behaviors, such as monitoring, communication, and quality of relationship, will be further explored relative to risky sexual behavior in adolescent females, with an emphasis on sexual debut. When providing therapy in New York, this information can be useful.

The fourth chapter will present and examine the evidence-based family therapies of Functional Family Therapy, Multidimensional Family Therapy, and Multisystemic Family Therapy. For each modality, the theory and development will be reviewed, followed by a discussion of the empirical support for this modality. The possibility of implementing aspects of each modality's conceptualization and interventions with female early sexual debut will be introduced. Lastly, the ability of these different family therapy models to address the previously discussed family risk and protective factors will be examined.

The final chapter will review the areas covered and offer a summary of the conclusions from each chapter with a brief revisiting of the critiques of each of these areas. Finally, any remaining problems will be discussed and recommendations for future research directions will be made.

Written by Dr. Cortney Weissglass as part of Clinical Research Project submitted to the Faculty of the American School of Professional Psychology of Argosy University, Washington, DC Campus, in partial fulfillment of the requirements for the degree of Doctor of Psychology in Clinical Psychology. Dissertation chair: Ann Womack, PhD and Member: Jennifer McEwan, PhD. August, 2010.

For a full list of references, contact Dr. Weissglass.

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In September 2012, Dr. Cortney Weissglass will be offering a <u>New York therapy</u> as a licensed a <u>psychologist in New York</u>.

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