

Tuning in to Teens™

Our philosophy

We believe that emotions are central for communication and connection. They serve our wellbeing and have an important evolutionary role in optimising our outcomes in life. Research has begun to highlight that humans who are aware of their own and others' emotions and who use this important information in their lives have qualitatively different experiences to those who do not (Goleman, 1995). They have closer, more satisfying relationships, can manage the challenges of life, have better health and wellbeing, and are more likely to achieve their goals.

In many societies, however, it seems that people do not listen to their own and others' emotions; instead feelings are to be suppressed rather than expressed. In some cultures, for example, it is seen as desirable to 'keep it together' at a funeral—to be composed and not tearful or visibly upset. Our concern is that concealing or denying emotions can come at considerable cost.

Of course, people need to strike a balance between being attuned to their feelings and being able to safely express them, while also not being so overwhelmed by emotions that they significantly interfere with life. This balance is part of optimal emotional competence/intelligence.

As we will discuss, people's competencies with emotions are initially learned during the early years, and are refined and consolidated throughout adolescence, building on an innate emotional style based on differences of how we experience and express emotions. The direct and indirect messages that parents give their children about emotions at all stages in their development will have a significant impact on children's emotional intelligence.

Our goal in this program is to help parents better understand and manage their own emotions, thereby facilitating healthy emotional communication in the family where the teen can learn to understand and express emotions adaptively. It is important to foster in adolescents both an awareness of and understanding about emotions, and a capacity for using a variety of healthy emotion regulation strategies, including the capacity to 'sit with', control, express or magnify emotions. This helps to maximise their social, behavioural, learning, cognitive and physiological outcomes.

Parents play a very important role in teaching emotional skills to their adolescents, despite what many parents believe. This role—helping teens to understand and regulate their emotions—is referred to in our program (and beyond) as Emotion Coaching. We believe that all parents have the capacity to Emotion Coach.



Most parents use the core aspects of Emotion Coaching—being supportive, listening well and empathising—with their friends. Yet they might be less likely to respond in these ways with their teen, perhaps because it is easier to be an Emotion Coach when you are less invested in the outcome of the other person's actions. *Tuning in to Teens™* helps parents to draw on and extend skills that they already have, in part by highlighting the value of Emotion Coaching for themselves and their teen.

Although this program is about parents responding to their teen's emotions, the skills taught will also benefit parents' other relationships—with intimate partners, extended family, friends, colleagues and even those they briefly interact with in everyday life. The skills of Emotion Coaching are relationship skills: they enable us to connect with other people in meaningful ways.

Parents' own emotional wellbeing is fundamental to a safe, caring, supportive family environment. Adolescents learn many life skills through observation, and parents are important role models. It is essential to teach parents skills related to emotional self-care, and to assist them to manage the more difficult emotions they experience as parents. Many feel anxious about their children's adolescence, and can experience feelings of rejection as their teen asserts their independence. These feelings can be difficult for parents to manage. We endeavour to normalise these feelings and give parents the skills to minimise reactions that are destructive to the relationship. We also help parents to find ways to reconnect with their teen following difficult interactions.

Our starting points

In this section we provide some background reading for the delivery of our program, focussing on some key points you may wish to consider or convey to parents. We give an overview of some of the biological, psychological, and social changes that occur during this time, in order for you to help parents better understand their young persons' needs, capacities and challenges. In particular, we look at commonly asked questions about *Tuning in to Teens™*:

- What is happening in adolescence in terms of biological, cognitive, psychological and social, development?
- What is emotional competence/intelligence, and why are these skills important?
- What happens when teens do not develop these skills?
- How does emotional competence/intelligence develop?
- What influence do parents have on adolescents' emotional competence?
- What has been tried in terms of increasing emotional competence in adolescents?
- What is the *Tuning in to Teens™* program, and what are its benefits?

For greater detail on these issues, see the key resources listed under *Facilitator Resources and References* on p. 37 and the research cited below.

Adolescent development

Adolescence is a stage of life often viewed as a time of transition, where the young person moves from childhood to adulthood. For the adolescent it is accompanied by many changes related to their body, brain, thinking and social relationships. For a good reference see Steinberg (2015) from which much of the following material is drawn. Today, adolescence lasts longer than ever, with many 'teens' staying at home well into their twenties. While there is currently no agreement on the length of adolescence, the onset is typically viewed as occurring with the first signs of puberty, which starts between 9 and 12 years, with considerable variability in onset (Dahl, 2004). Across many species, studies that examine adolescent behaviours have shown unique 'characteristics' of this time, such as risk taking, peer orientation and moodiness. Until about 20 years ago, however, it was assumed that teenage behavior was almost entirely explained by hormonal changes in puberty and that the human brain was mature by early adolescence. Since then, more sophisticated measurement tools have enabled brain scans and experimental studies that have uncovered adolescence as another critical period where the brain continues to develop, and during which time important neurological changes 'wire' a young person to feel, think and behave in ways that facilitate extending away from their family and finding their feet in the world. We have also learned that this period of life is an opportune time to learn new skills, including the skills of emotional intelligence.

A series of 'developmental tasks' are recognised as normal during adolescence, and necessary for becoming an adult (Santrock, 2016). The expression of these varies from culture to culture, but common tasks include: accepting ones growing and changing body, achieving independence from parents, adjusting to sexual changes, preparing for and gaining employment, seeking intimate relationships, self-acceptance and developing a sense of identity. Alongside these tasks, adolescents will have needs for survival, power, belonging, freedom, and fun (Glasser, 1993) as well as protection/safety, competence/learning, autonomy and self-actualization (Maslow, 1962). In early adolescence, striving for independence can appear as outright rejection of and pushing away from parents. This commonly occurs when parents ask their teen to carry out tasks—that is, when they are being directive, and perceived by the adolescent to be impinging on their autonomy. Such conflicts tend to peak in frequency in early adolescence and in intensity by middle adolescence. Adolescents may express their 'difference' through their choice of music, clothes and friends and by developing their own interests and identity. Later on, study choices, career directions, work, and social activities become important for continued autonomy and identity development. The journey to independence can take many years, especially if post-school education delays the adolescent's financial independence. Achieving all of these 'tasks' simultaneously can be challenging and daunting, and may cause considerable anxiety for the young person.

Overall, the onset of puberty and the changes during this developmental stage lead to many emotional challenges. Adolescents vary widely in how they cope with these challenges and this stage of development. They are especially likely to feel overwhelmed if several stressors or transitions occur at the same time (for example starting secondary school, menstruation, starting relationships). The changes also

mean that processing of information is slower when a teen is emotional. A teen is often less organized than an eight year old on days when they are feeling anxious or irritated! They may even struggle with correctly interpreting facial expressions (e.g., neutral facial expressions may be perceived as a negative facial expression).

Biological Development

Biological changes are the most obvious and visible to parents, who witness their child rapidly growing into a young adult. These changes begin with puberty, which is a continuum of events triggered by hormones causing significant changes to adolescents' physical appearance and sexuality. Typically, the onset of puberty follows weight increases and a growth spurt in height, after which maturation of the adrenal glands lead to increases in adrenal androgens stimulating sexual maturation, including the growth of pubic hair, breast growth in girls, and changes to boys' testicles and scrotum. This event is then followed by the activation of the hypothalamic-pituitary-gonadal axis which further stimulates sexual maturation, including penis growth and voice changes in boys and menarche in girls. Further growth spurts follow, with considerable variation for individuals as to when they occur. On average, puberty begins earlier today (12 years) than in past generations (15 years), with girls tending to enter puberty earlier than boys, at 10.5 and 12.5 years respectively. There are a number of factors proposed to have contributed to this shift, including better nutrition, artificial lighting, endocrine disruptors present in our food, as well as environment and social factors (see Steinberg, 2015).

The tremendous physical growth that happens during adolescence (the heart, for example, doubles in size), includes rapid growth periods that often occur in a relatively short time. Growing pains and extreme tiredness are common, with research highlighting that fatigue and somatic symptoms peak during early adolescence (Campo & Fritsch, 1994). With these changes occurring, adolescents can become concerned and sensitive about their weight and appearance, particularly if they feel 'different' because puberty has started earlier or later than their peers, or if they are aspiring to a particular body shape or height. For some, the first signs of puberty can be experienced as a shock and managing the practical aspects of menstruation can produce much anxiety in girls. Many teens become self-conscious, feel shame about the changes (physical, sexual, emotional) and require increased privacy.

It can be helpful to remind parents that the last time they witnessed similar growth in their children was between 0 and 3 years, when children were able to sleep a lot! Yet, in early adolescence, children usually do not sleep more. Indeed, despite reports of tiredness, adolescents often report having difficulty falling asleep in the evening. It is thought that this is because of changes to the circadian rhythm, leading to a shift in sleep patterns. More specifically, the production of melatonin (a hormone responsible for making us feel sleepy) is delayed in the evening—often only 'kicking in' around 10pm or later for some. In addition, melatonin may also 'hang around' longer in the morning for many teens, leading to struggles to get them out of bed. This shift, coupled with school requirements to get up early, no afternoon naps, blue light screen exposure from phones/screens (known to interfere with melatonin

production) and often emotionally challenging school days, can leave an adolescent feeling exhausted and can compromise their capacity to regulate emotions and result in poor attention and poor school performance. It also leads to adolescents accumulating a considerable 'sleep debt' during the week, which is then 'recovered' on weekends. Ideally, adolescents should have approximately 9 hours sleep for optimal functioning!

The brain is actively growing throughout adolescence, and is not fully mature until the young person is in their mid-to late twenties, with the middle pre-frontal cortex (responsible for self-regulation) one of the last regions to mature. Coinciding with the beginning of puberty, a rapid period of brain growth occurs around age 12 to 13, when lots of new neurons form thousands of new connections in the teen brain. This development occurs in a 'bottom up' way, starting in the limbic system (primarily responsible for emotions and memory) and finishing in the frontal lobes (responsible for rational thinking and impulse regulation). This period of growth is then followed by a period of 'pruning' of neurons and dendrites in the brain that are not being used, while those that are used and reinforced will be strengthened, facilitating processing speed. We know that this is an opportune time for learning new skills. However, it is also a time of vulnerability, as the brain is very sensitive to stress hormones which can negatively influence the pruning process (i.e., wire them up for survival in a 'dangerous world'). Thus, the brain specialises itself once more for the environment the teen is living in. The implication of the 'bottom up' development in the brain is that teens are more likely to process information (including emotional information) using their 'feelings about things' and 'gut instincts' whereas adults are able to simultaneously use their rational thinking brain (Steinberg, 2015).

Research has also highlighted that adolescents feel emotions at higher intensity during this time—almost like having grown new 'taste buds for emotions'. Coupled with not yet mature frontal lobes, this means that adolescents can easily be overwhelmed by intense emotion, during which time they are less able to think clearly and regulate impulses or strong emotions (Steinberg, 2015). If we think back to our own adolescence, we can probably remember how intense we felt about music, about our first crush, our first kiss, or an embarrassing situation. At the same time, all of us can probably remember times during our adolescence where we were feeling really upset or embarrassed, overwhelmed, or low, lethargic, unmotivated, tired, and uninterested.

In addition to the uneven brain growth, changes in mood and motivation are also thought to be related to lower baseline levels in dopamine and serotonin due to some important functional changes related to the processing of rewards that occurs during this time. During adolescence dopamine is less easily released for known things and more easily released for novel experiences. For example, if a young person has played netball all their life and loved it, it is common for a teen not to be excited by it any more—unless there are interesting peers to meet! Social interaction, or the anticipation of such interactions will release dopamine and motivate the teen to attend. When dopamine is released, however, for some teens the release can be a dysregulated release (i.e. too much dopamine is released which gives feelings of euphoria). Internet/computer games tend to release high levels of dopamine in teens (due to anticipated peer interactions and novelty seeking—new things are only ever

another click away!). When high release happens, it is usually followed by a slump. This can leave teens feel very unmotivated and grumpy after having been on the computer—not a great time for asking them to do homework or chores!

The reward centre of the brain (nucleus accumbens) is larger during adolescence—things that feel good, feel extra good! Adolescents love tasting sweet things too, and sweet perfumes! This is why they are more vulnerable to becoming addicted to anything that provides them with a hit of dopamine—such as screen time, drugs and alcohol. They will overvalue rewards (especially social rewards) and undervalue consequences, which has important implications for motivating teens to do things they find uninteresting! For most species, adolescence is characterised by greater reward seeking due to these functional changes. Parents need to recognise that for many adolescents, sensation seeking (enjoyment/thrill) is a normal, adaptive behaviour and helps the adolescent to explore the wider world and gain independence. Facilitating and encouraging appropriate opportunities (a first job, exciting physical activities or sport) may help to prevent teens from engaging in risky/antisocial behaviours to find enjoyment and thrill.

Cognitive Development

How adolescents think changes dramatically as they mature; they can think faster, evaluate their environment more critically, and contemplate increasingly complex issues (Santrock, 2016). They tend to be self-focused and believe themselves unique and invincible, although a rising awareness of others' views of them can lead to increased anxiety, embarrassment, self-directed hostility and shame. Elkind (1967) described adolescence as a period of egocentrism where the young person may have an 'imaginary audience' who are constantly either admiring or critical of them. They also often hold a 'personal fable' where they believe their own feelings are unique and special. Egocentrism passes as the young person has more real-life experiences as a young adult.

Cognitive changes occur due to the parallel changes in brain growth and functioning. Formal logical operational thought or the capacity to think about things in abstract ways is a significant change from childhood when the world is governed more in concrete terms of 'rules' and children have a black and white understanding of what is right or wrong. Adolescence allows greater capacity for considering the 'grey' in between. It enables adolescents to see issues from different perspectives which often intensifies emotional experience with this expanded complexity and awareness. Further, this capacity to think in abstract ways means that for many adolescents they become increasingly self-aware of their own thinking and emotional processes. Many come to realise that the world is not black and white. They often re-evaluate their personal morals, and question their parents' and society's values.

Identity Development

Adolescence is a crucial period of development when the young person engages in important identity development 'work' and explores the question of, "Who am I?" and "What will I become?" As adolescents are individuating, they simultaneously

seek immersion in thinking about who they are, while needing a 'secure base' in their family relationships and seeking connection with peers. Becoming one's own person is not an easy task, however, as it requires extending away from parents, often by pushing them away (e.g., rejecting parents' values or ideas) and refusing to comply. Many times, parents complain that their young person is egocentric, yet this self-focus is a necessary part of healthy identity development.

In early adolescence, where there are so many changes, the overarching question for adolescents is often 'Am I normal? Am I like the others?'. At this time, wanting to be the same and being allowed to do the same is something teens will strive for, often in very emotionally dramatic or demanding ways. Being accepted by peers and finding one's group is a key focus during pre- and early adolescence. It is often not until later in adolescence that they seek greater individuation and may value being unique or different, including enjoying developing their own style.

Erikson (1968) proposed that identity is formed in the context of interpersonal relationships and social institutions that either hinder or promote its development. Between 11 and 18 years, according to Erikson, adolescents enter the psychosocial stage of 'identity versus role confusion', which is characterized by increased striving for independence and experimentation with various roles and possible selves. During this time teens begin to establish their own beliefs and values about religion, sexuality, politics as well as making choices about their education and career. Erikson argued that adolescents can experience role confusion (not being sure of themselves and their place in society) as they strive to establish a stable sense of self. Reconciling seemingly contradictory aspects of the self (e.g., conflict between religion and sexual identification) is an important part of identity achievement.

Social Development

Adolescents become more peer oriented as they enter secondary school and will increasingly turn to their peers for emotional support. Fitting in with and being accepted by their peers becomes paramount. Being humiliated or embarrassed by adults in front of their peers (e.g., by a teacher or a parent) is incredibly painful, provoking strong avoidance (e.g. school refusal) or counter responses (e.g., by becoming the class clown or mocking the teacher/adult). Together with the increased striving for autonomy (including exploration of identity), there is a strong interest in social and romantic relationships external to the family (Blakemore & Mills, 2014; Collins, Welsh, & Furman, 2009). As adolescents show increased capacity for meaningful relationships, friendships are characterized by more intimacy and self-disclosure and include friendships with the opposite sex. Popularity with peers is related to differences in status, behavior and adjustment. Popular teens (who are mostly liked) and controversial teens (who are liked by some peers but disliked by others) have high status, more close friends, engage more frequently in activities with peers, disclose more of themselves to others, are involved more in extracurricular activities, and are well aware of their popularity (Brown & Larson, 2009). They report being less lonely than rejected teens (who are uniformly disliked and whose peers react to them in a negative manner) and neglected teens (who are neither liked nor disliked).

In addition to face-to-face interactions, many peer interactions take place on phones and in the virtual world, as peers use social media for social engagement, earning status and likeability, and planning events. Prior to the internet, adolescents would often roam outside of home, hanging out with friends and meeting potential love interests. Parents mostly knew very little about what teens got up to. Today, this roaming occurs also online, with increased possibilities for connecting with peers far away 24/7. Problematic internet use is more common in adolescent males than females and is often connected to online gaming sites. It is important to allow teens to have balance and encourage off-line peer interaction and peer-related activities (e.g., sport).

Not only does the nature of friendships change in adolescence, the nature of peer groups change as well. The importance of being in a group (or clique) increases dramatically. For younger adolescents' conformity to group norms is highly valued, and there is often antagonism toward those outside one's group. It is also important to belong to a popular group. These behaviours and outlooks tend to diminish markedly by late adolescence.

Relationships with peers provide teens with rich opportunities for learning cooperation, gaining support and developing interpersonal skills. Yet, perceived rejection by peers is incredibly painful, as their needs for connection and belonging are not met. These factors, coupled with self-other comparisons and heightened sensitivity to socio-cultural signals in the environment are inevitably linked to strong emotional experiences (Blakemore & Mills, 2014). When positive family relationships exist, parents continue to play a role in helping the young person navigate these challenges and can buffer the negative impact of poor peer relationships on mental health (Blakemore & Mills, 2014; Steinberg & Morris, 2001).

Emotional Development

Central to the focus of this program is adolescent emotional development. The following provides a more comprehensive review of the theory and research on this topic.

The ability to recognise, understand and regulate emotions is a set of skills that lies at the heart of human functioning, including our ability to form and maintain relationships, do well at school or work, and navigate the challenges of life. In the child development literature these skills are often referred to as 'emotional competence' (Campos, Mumme, Kermoian, & Campos, 1994; Saarni, 1999) or 'affective social competence' (Halberstadt, Denham, & Dunsmore, 2001). In the adult developmental and popular literature these skills have also been called 'emotional intelligence' (Salovey & Sluyter, 1997; Zeidner, Roberts, & Matthews, 2008).

In our program we refer to these skills as consisting of the ability to:

- identify and understand your own emotions and communicate with others about how you feel
- identify and understand other people's emotions and respond with empathy
- regulate your own emotions. Be in control of how and when you express

feelings, by regulating your own emotions (including controlling, expressing and modulating emotion) in a culturally and situationally appropriate manner

- use your emotional awareness to guide you when solving problems
- deal with frustration and be able to wait to get what you want/need
- keep distress from overwhelming your ability to think.

Research has found these emotional competencies are important for developing friendships, resolving conflict, learning (enabling young people to focus and concentrate), seeking support when needed, and achieving goals. They are also associated with fewer problems with depression, anxiety and behaviour problems (Plattner et al., 2007; Rieffe, Terwogt & Bosch, 2004; Schulz & Brown, 2003; Yap, Allen & Sheeber, 2007). Several researchers have suggested that they also provide the foundations for emotional intelligence as a child grows to adulthood (Goleman, 1995; Mayer & Salovey, 1997).

As teens move from early to mid-adolescence, research also indicates a decline in how happy adolescents report feeling (Rosenblum & Lewis, 2003). At the same time, the ability to mask emotions and adhere to social norms of acceptable ways to show emotions (often called display rules) becomes more developed, making it harder for parents to detect when their children are feeling sad or anxious. Many adolescents struggle to regulate difficult emotions such as sadness, fear and anger—especially when those emotions are more intense—and often have a limited repertoire of strategies for doing so. Many use suppression of emotion as a key strategy. Suppression of emotion is necessary and effective at times, but if used as the most common emotion regulation strategy is related to poorer emotional wellbeing (Rosenblum & Lewis, 2003). It is, therefore, important to help teens to build a wider repertoire of strategies to regulate emotions.

As adolescents acquire more complex, sophisticated reasoning, they realise that multiple emotions can be experienced simultaneously, and they can use a range of internal and contextual/situational information (past and future) to recognise or anticipate their own and others' emotions. They therefore attribute emotions to a wider range of sources (both real and imagined) and past, present and future events.

Emotions play a key role in the development of identity. As children and adolescents become better at connecting emotions with experience, they use their feelings to guide decisions and their understanding about what is important to them. In time, adolescents learn that their emotions are responses to situations and do not ultimately define who they are.

Although many emotional skills are acquired by middle childhood, these are consolidated, broadened and built on during adolescence. In particular, adolescents develop a wider range of strategies for independent emotion regulation. They can also access these skills faster because of increased maturity in the connections between the brain regions such as the frontal lobes and limbic system. For a good reference on adolescent brain development see Herrman (2005).

Stressful events during transitions, in peer relationships and in family life are unavoidable. However, research is increasingly showing that if children and adolescents have the capacity to understand, communicate and regulate their

emotions, they can respond to stresses in socially appropriate, flexible and adaptive ways. These skills enable them to express sadness, anger, disappointment, grief or loss, and jealousy and find ways to cope with these feelings, rather than suppressing them or reacting with aggression. Thus, emotional competence provides children and adolescents with the flexibility to respond to stressful life events in a resilient way.

What happens when adolescents do not develop these skills?

There is now substantial research to show that failure to develop emotional competence is related to a host of adverse outcomes. A number of longitudinal studies from around the world, including the Australian Temperament Project (Sanson, Smart, Prior & Oberklaid, 1993), have shown that negative emotionality and difficulties regulating emotions occur prior to the onset of behaviour problems and are important indicators of those children who are at risk for later problems.

Some of the findings from research with adolescents include:

- Lower emotion awareness and poorer emotion regulation are related to risk-taking behaviours (Cooper et al., 2006; Steinberg, 2015)
- Deficits in the ability to identify and analyse physical signals that stem from emotional arousal are related to somatic symptoms such as stomach aches and headaches (Rieffe et al., 2004; Terwogt, Rieffe, Miers, Jellesma & Tolland, 2006)
- Deficits in the ability to perceive, understand or manage emotions are related to behaviour problems (Plattner et al., 2007; Schulz & Brown, 2003)
- Poor emotional competence is related to increased likelihood of reacting with frustration and anger to problems, and being less likely to seek social support (Mavroveli, Petrides, Rieffe & Bakker, 2007)
- Deficits in identifying, understanding, and managing emotions have also been related to internalising disorders (e.g., anxiety and depression) (see Kehoe & Havighurst, 2018 for a review).

How does emotional competence/intelligence develop?

Emotional competence develops throughout childhood and adolescence as the result of the interaction between an individual's innate emotional style (often called temperament), neurophysiology, cognitive development and socialisation (Morris, Silk, Steinberg, Myers & Robinson, 2007). The life experiences of children and adolescents can also shape the development of these skills.

Individual children and adolescents differ in their innate propensity to react to emotions in certain ways, and in their capacity for regulating emotions. It takes a lot for some young people to get emotional, while others are easily aroused. For some it can take a long time for the emotion to dampen so that they can move on. This propensity is thought to be in part due to temperament. A number of aspects of temperament affect emotional competence, including:

- approach/withdrawal—how the child/adolescent responds to new environments or people (often referred to as shyness)

- adaptability—how long a child/adolescent takes to adjust to change
- intensity of emotional response—calm versus intense emotionality
- mood style or emotional demeanour—such as a tendency to be very happy or very irritable
- attention abilities—the capacity to be focused on a task versus becoming frustrated easily and needing to change activities frequently
- sensitivity—the threshold of responsiveness: how easily a child/adolescent is disturbed by changes in their environment.

These aspects of temperament are believed to be genetically-based, but are also affected by experiences. Over time, they will alter according to socialisation (Sanson, Smart, Prior & Oberklaid, 1993).

Socialisation experiences include the way that parents interact with their child or adolescent; their experiences with siblings, carers and teachers; and the emotional experiences to which they are exposed. Some children require more input in order to become emotionally competent, especially if they have more 'negatively reactive' or 'withdrawn inhibited' temperaments (Denham et al., 2000). If these children are helped to learn effective emotion regulation strategies, however, they can over time reduce the intensity of their emotional reactions (Gottman, Katz & Hooven, 1997), lowering their risk of problematic outcomes.

Children and adolescents who experience more difficult emotions (such as irritability or fearfulness) and/or who have poorer innate capacity to regulate their emotions (perhaps due to naturally limited attention skills) often require greater help from their parents to learn about and regulate emotions. At the same time these emotional needs can make it harder for parents to be emotionally responsive. A child/adolescent's own emotional style can affect the way that their parent responds to them (Eisenberg, Cumberland & Spinrad, 1998). For example, research has found that parents have a greater propensity to be harsh about emotional expression with a child who is more negatively reactive. It can be useful to highlight to parents that some children/adolescents are more difficult to raise than others, and that this might be in part due to their temperament. For a good reference on adolescent emotional development, see Rosenblum and Lewis (2003).

What influence do parents have on adolescents' emotional competence?

The link between parent socialisation practices and children/adolescent's emotional competence is now well established (see for example Denham et al., 2000; Eisenberg et al., 1998; Gottman et al., 1997; Morris et al., 2007). While adolescents increasingly turn to their peers for emotional support (Underwood and Hurley, 1999), parents have been found to remain integral to adolescent emotional functioning (Barrera & Garrison-Jones, 1992; Stocker, Richmond, Rhoades & Kiang, 2007). Parents have been found to influence children and adolescent's emotional competence through:

- the model they provide for the expression and regulation of emotions

- their reactions to their children's emotions
- their discussion and 'coaching' about emotions with their children
- the emotional contexts in which they put (or allow) their children.

During the early years, children depend on parents to assist them to regulate their emotions. As they develop, and their parents teach them about emotions, children increasingly begin to understand and then regulate their own emotions. Some parenting styles have been found to be optimal in facilitating this process. Longitudinal research by Gottman and colleagues (1996, 1997) has provided one of the more detailed descriptions available of different parenting styles and how they affect children's emotion regulation and other aspects of development. They found that the way positive and negative emotions are managed and 'coached' by the parent was a crucial part of emotion socialisation. From detailed interviews, they found that all parents have a personal theory about emotions, called a 'Meta-emotion philosophy'. This philosophy, which is shaped by the parent's experiences in their family of origin and refined over their life, influences parents' beliefs and their responses to their own and others' emotions. For example, a parent who believes that anger is about loss of control, and who therefore suppresses or avoids angry emotions, might be unable to teach their child about anger and how to manage it, or about how to resolve conflict.

Gottman and colleagues found links between parents' Meta-emotion philosophy and parenting styles, and their children's abilities to regulate emotion. They concluded that children learn about ways of coping with emotions by watching their parents. Some parents may respond by coaching their adolescent in ways to self-soothe, inhibit negative emotions and focus attention (Gottman et al., 1997). Parents who supportively coached their child's emotional learning tended to display greater levels of warmth, were less critical of their child's emotions and behaviour, and were more likely to use teaching styles that supported and praised their child's attempts to resolve emotion-evoking situations. If parents were unable to tolerate their child's expression of emotions or to teach their child about their emotional experiences (which Gottman et al. termed 'emotional dismissing'), their children were found to have poorer emotion regulation skills.

The key aspects of Emotion Coaching identified by Gottman et al. were:

- being aware of children's emotions
- viewing children's displays of emotions as times for intimacy and teaching
- helping children to verbally label the emotions being experienced
- empathising and validating children's emotions
- helping children to solve problems (and setting limits where appropriate).

Other parenting styles that these researchers identified were:

- emotion dismissing—where the parent minimises or does not attend to emotions. The parent might still be warm and attentive to the child, but avoids talking about or allowing the child to express difficult emotions
- emotion disapproving—where the parent judges or is critical of the child's emotions when they express difficult or positive emotions

- permissive/laissez-faire—where the parent permits all emotions and their expression, but does not help the child to regulate their emotions or resolve problems that have led to them.

These three parenting styles were found to be associated with poorer outcomes in children.

Since Gottman's original publications about these ideas, a number of studies have found important links between Emotion Coaching and children and adolescents' emotional competence and behaviour (Lagacé-Séguin & d'Entremont, 2006; Morris et al., 2007; Ramsden & Hubbard, 2002; Schwartz, Thigpen & Montgomery, 2006; Sheeber, Stocker, Richmond, Rhoades & Kiang, 2000; Shipman et al., 2007). In a longitudinal study, Denham et al., (2000) found that supportive and coaching-style parenting had the greatest benefits for children who had higher levels of negative reactivity and behaviour difficulties at a young age. Over time, this parenting style helped to reduce the intensity of negative reactivity, thereby reducing the children's risk for social and behavioural problems. The way that parents respond to children's emotions, therefore, seems to act as a crucial mediator or determinant of children's outcomes, especially for children at greater risk of problematic development.

Some of the key findings on the relations between parent emotion socialisation and adolescent functioning include:

- Adolescents whose parents used Emotion Coaching had less difficulties in regulating anger than those who used other parenting styles such as emotion dismissing (Yap, Allen, Leve & Katz, 2008).
- Parental acceptance of emotions was found to be an important factor in positively contributing to children's emotion regulation (Kehoe & Galligan, 2007; Yap, Schwartz, Byrne, Simmons & Allen, 2010).
- Adolescents whose parents responded to their positive emotions in an invalidating or dampening manner were found to use less functional emotion regulation strategies (Yap, Allen & Ladouceur, 2008).
- Parents use of emotion disapproving or dismissing parenting has been linked to adolescent antisocial behaviour, anxiety and depression (Lunkenheimer, Shields & Cortina, 2007; Shortt, Stoolmiller, Smith-Shine, Eddy & Sheeber, 2010; Stocker et al., 2007; Yap et al., 2010).

Traditionally, parenting researchers have focused on parents' warmth, teaching style and punishment/disciplinary approach as the main ways in which parenting influences children's development. However, these aspects of parenting have not been found to be related to children's emotional competence (Eisenberg et al., 2001; Gottman, Fainsilber-Katz & Hooven, 1996; Thompson, 2000). This has meant that that behaviourally focused parent programs—which target parental warmth, teaching style and punishment—do not directly affect children's emotional competence. To date, the more emotion-focused aspects of parenting (such as Emotion Coaching) are only just beginning to be applied in mainstream parent education. This might in part be because the evidence linking emotion-focused aspects of parenting, children's emotional competence and children's social and behavioural functioning has been relatively recent. As a result, some developmental

and prevention researchers are emphasising the need to address these aspects of parenting in interventions (Coie & Dodge, 1998; Gottman et al., 1997; Thompson, 1994; Webster-Stratton, Reid & Hammond, 2004).

Which programs have looked at adolescents' emotional competence?

Emotional competence is an increasing focus within school curricula. It is estimated that only half of children's academic success is due to intelligence, with the rest determined by their social and emotional abilities (Liff, 2003). Teachers report that children's school readiness and receptivity to learning is determined by their capacity for positive emotional expressiveness, their enthusiasm, and their ability to regulate emotions and behaviours (Denham, 2006).

As a result of such findings, there are a growing number of classroom interventions aimed at teaching children emotional competence. In North America (but not yet Australia) there are national initiatives to prioritise emotional competence in the education curriculum (www.casel.org), including the PATHS program for preschool and school-aged children (Promoting Alternative THinking Strategies, Greenberg, Kusche, Cook & Quamma, 1995), the Incredible Years Dinosaur Social Skills and Problem Solving Child Training Program (Webster-Stratton, Reid & Hammond, 2004), The Roots of Empathy (Schonert-Reichl, Smith & Zaidman-Zait, 2012), and Izard's Emotion Centred Program (Izard, Trentacosta, King & Mostow, 2004). These programs promote children's emotional literacy, empathy, communication skills, anger management and interpersonal problem solving. Their outcomes are highly promising, and they have been found to improve children's behaviour and social skills.

Until recently, however, there have been no published reports of parent-delivered programs to develop children's emotional competencies during the pre-adolescent or adolescent stage of development. Most programs for parents of teens focus on problem-solving, communication, monitoring and responding to behaviour, rather than on emotional connection. *Tuning in to Teens™* was developed in order to fill this gap in the evidence-based literature of parenting programs.

In particular, the program focuses on parents':

- Meta-emotion philosophies (their beliefs and responses to their own and others' emotions)
- awareness of emotion and emotional wellbeing (with the aim of improving the family emotion climate)
- attitudes and reactions to emotions in themselves and their teen
- skills in Emotion Coaching.

Introducing *Tuning in to Teens*TM

What is the program and what are its benefits?

*Tuning in to Teens*TM draws on this research base to support parents as their children begin to experience the changes of adolescence, including big changes in their:

- bodies (puberty)
- brains (new growth)
- thinking (expanding complexity)
- emotions (greater emotional lability), and
- personalities (at a time in which they are establishing their own unique identity).

The program is based on our *Tuning in to Kids*[®] program, and draws on the work of eminent researchers and practitioners working in the area of adults' and children's emotions (Denham, 1998; Faber & Mazlish, 1980, 2000; Ginott, 1965; Gottman et al., 1997; Greenberg et al., 1995; Izard, Mostow, Trentacosta & Campbell, 2002; Linehan, 1993; Safran & Greenberg, 1991). The program also focuses on developing supportive, emotionally responsive parenting—characteristics that are also central in a secure attachment relationship (Ainsworth, Blehar, Waters & Wall, 1978; Bowlby, 1969; Laible & Thompson, 1998).

The central idea behind *Tuning in to Teens*TM is that adolescents develop their capacity to think about emotional experiences and regulate their responses when their parents attend to difficult emotions of low to moderate intensity, and when they support, soothe and help their teen to learn about and regulate emotions.

Our approach is similar to cognitive behavioural therapies that focus on emotions (such as Hayes, Follette & Linehan, 2004), in which the therapist helps a person to identify, tolerate and accept emotions rather than change their perceptions (cognitions) or responses to events (behaviours). These approaches are founded on the idea that cognitions and behaviours can change once emotion lessens in intensity. Indeed, we have found that many problems are resolved when a young person experiences validation and emotional understanding by close others.

Theoretical model

Figure 1 illustrates the model of what the *Tuning in to Teens*TM program aims to do. In particular, the program focuses on parents':

- Meta-emotion philosophies, including their beliefs about, and attitudes and reactions to emotions in themselves and their teen, and
- awareness, understanding and regulation of emotion and overall emotional wellbeing (with the aim of improving the family emotion climate), and
- skills in Emotion Coaching.



We expect that these aspects of parenting will have a positive effect on adolescents' emotional competence, as well as improving their behaviour, social skills, academic functioning and health. The social and cultural context within which families live will also influence parents' and teenagers' ways of expressing and regulating emotions¹, as will intrinsic factors such as temperament (see p. 13-14).

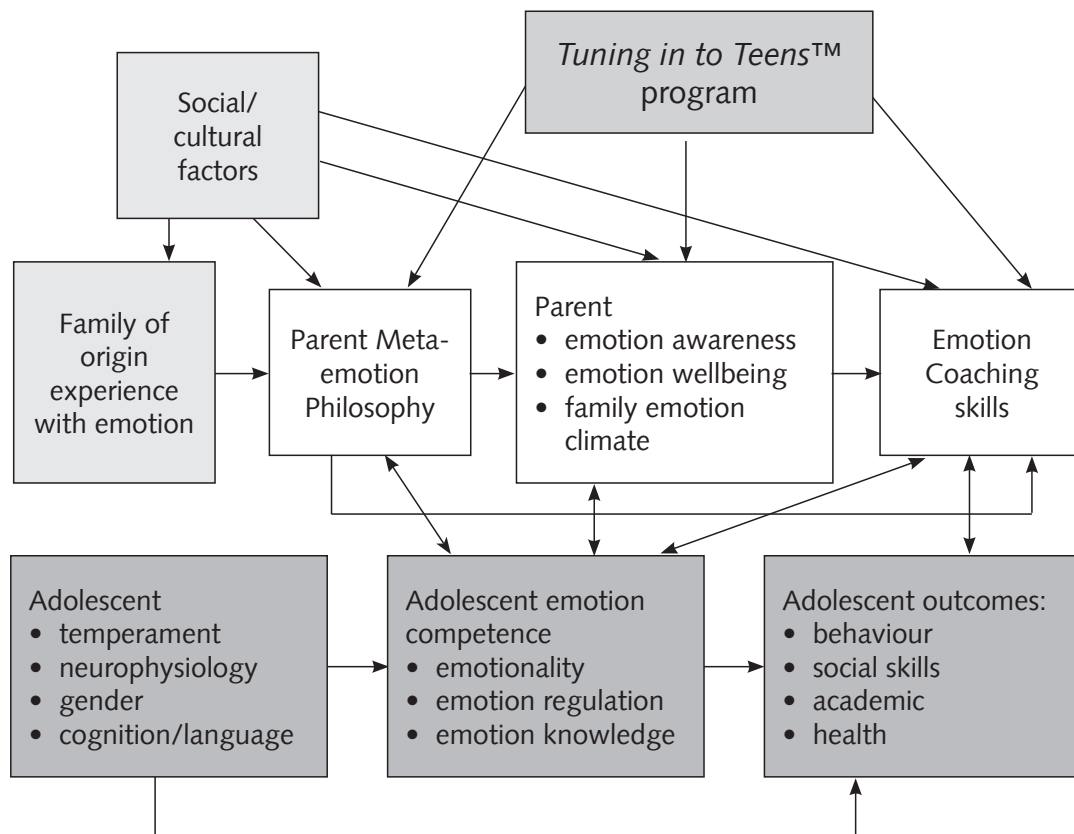


Figure 1: *Tuning in to Teens™* theoretical model

Research evaluations of *Tuning in to Teens™*

A number of studies of the *Tuning in to Teens™* program have been undertaken by our team and other researchers. Following an initial pilot study in 2007, we have conducted two randomised controlled trials of the program with pre-adolescents and early adolescents. For detail about these outcomes see Kehoe, Havighurst & Harley, 2014; Kehoe, Havighurst & Harley, 2015; Havighurst, Kehoe & Harley, 2015. Additional studies are taking place in New Jersey, USA with adoptive/kinship carers, and in Hamburg and Giessen, Germany in a community trial.

Our first evaluation trial of *Tuning in to Teens™* was conducted at Mindful: Centre for Training and Research in Developmental Health in the Department of Psychiatry

¹ Facilitators might wish to consider the role of social and cultural factors when delivering the program in their community. It may be useful to consider which forms of expression and beliefs about emotions that may be relevant for particular social or cultural groups.

at the University of Melbourne in collaboration with ParentsLink at MacKillop Family Services. The study evaluated *Tuning in to Teens*™ with a community sample of 225 pre-adolescents in Grade 6 aged 10 to 13 years (51.6% girls) and their parents/primary caregivers (Kehoe et al., 2014; Kehoe et al., 2015; Havighurst et al., 2015). This age group was targeted with the aim of preventing difficulties that often emerge with the transition to secondary school. Families were from a range of socio-economic backgrounds, mostly with middle levels of education and income.

The study design involved randomisation of 120 schools into two groups: 'intervention', in which parents received the six-session *Tuning in to Teens*™ group program, and control, in which parents received a series of questionnaires as part of a study of development over time (but did not receive the intervention). Using a control group enabled us to evaluate the impact of *Tuning in to Teens*™ relative to the way children might naturally develop at this age. Baseline data was collected during children's final year of primary school and then mid-year the following year, during first year of secondary school. Differences were measured using parent and pre-adolescent reports on questionnaires.

A common challenge for parenting programs with older children and adolescents is that participants are often hard to recruit and difficult to retain. We were pleased to find that for both of our trials we have had high level of parent engagement, indicated by our intervention parents mostly attending four or more sessions (preadolescent trial: 83%; adolescent trial 86.6%).

Our findings in both trials were that in comparison to control participants who reported no changes, parents who received the *Tuning in to Teens*™ program improved in their ability to respond to the young person's emotions by decreasing dismissive or critical responses. For our pre-adolescent trial, intervention parents reported significant improvements in their own emotion awareness and regulation, and reporting having reduced impulse control difficulties and internalising problems (anxiety and depressive symptoms).

Intervention parents and young people in our pre-adolescent trial reported significant reductions in family conflict. On the Strength and Difficulties Questionnaire (Goodman, 2002) we found that pre-adolescents of parents participating in the program experienced significant reductions in behaviour problems, as reported by both parents and pre-adolescents. For our adolescent trial, we found that parents of both groups reported reductions in behaviour problems suggesting that all parents noticed children's behaviour improving across this developmental period.

We also found that parents of pre-adolescents participating in the program and their children reported significant reductions in pre-adolescent anxiety measured using the SCAS: Spence Children's Anxiety Scale (Spence, 1998). Parents reported reductions in pre-adolescents' depressive symptoms and somatic symptoms.

Qualitative evaluation

Twelve parents from the intervention group also chose to be interviewed before and after attending the program. These interviews aimed to give us greater understanding about how parents were affected by participation in the program, particularly focusing on changes in their Meta-emotion philosophy and comfort with their own and their child's emotions, and in their relationship with their child. The interviews explored the impact of the skills taught in the program and subsequent changes reported by the parents, as well as their views on the content and experience of being in the group. The first interviews were held one to two weeks before the group commenced, and the second three to eight weeks after the group ended (depending on school holidays).

Outcomes reported by parents included increased awareness, acceptance and understanding of emotion in themselves and their pre-adolescent, and a new capacity to discuss emotional issues with them. Their ability to show empathy and see things from the young person's perspective was particularly evident. They reported being more able to sit with and tolerate strong emotions, less likely to hide their feelings, and better able to model positive emotion regulation skills to their child such as 'building in a pause' or 'stepping back' when situations became heated. They reported decreased conflict between themselves and their child, and calmer households. All parents described improvements in their relationships with their child, and particularly mentioned feeling closer and more connected to them, and greater satisfaction and confidence in their parenting role.

Parents also reported that the program activities and information were instrumental in facilitating positive changes for them and their family, particularly those that assisted in developing their emotional awareness, empathy, management of strong emotions and 'mindfulness', their ability to relax or to respond 'in the moment'. Parents identified important factors in enhancing their learning, including being in a safe and accepting learning environment, having their experience validated and normalised, and having access to experienced and empathic facilitators.

These findings were consistent with and complemented the findings of the larger quantitative trial.

We actively solicited parent feedback at varying points in the program. Participants reported that they found the program very useful for relating not only to their child, but also to other members of their family, their friends, colleagues, and people they interact with in their lives. They also reported finding the program's concepts very logical and simple to understand, but that Emotion Coaching skills were more difficult to put into practice.

The quotes below provide an indication of the range of experiences of program participants.

- 'I felt like we were growing apart, but now he has come back to me.'
- 'I found it hard to love my child before the program, and now I feel love again.'
- 'I now notice (emotion), because I look for it.'
- 'I was more easily able to stay connected with my 12-year-old during a very stressful time.'

- 'I felt closer to my children when I used Emotional Coaching. My family felt more calm.'
- 'I have been more aware of my behaviour and my child's emotions and have tried not to be dismissive of emotions but to be accepting and validating. My daughter appears to be more open with her emotions, telling me what is bothering her.'
- 'I felt I was more calm and able to handle any situation that may come about. Before this course I had no idea how to handle emotions correctly.'
- 'The explosive situations seem to have decreased. I am able to identify underlying causes and this has definitely helped.'
- 'I am so much more aware, and therefore able to connect with my daughter.'
- 'Less anxiety, sleeping better, easier relationship with my son.'
- 'Less arguments and I don't 'punish' anymore—I feel there is no need as we work through issues before it gets to that.'
- 'Many, many changes! Between siblings (including 18-month-old talking about 'happy' and 'sad'). Between my husband and me, and amazing bonds happening between me and my son.'
- 'More willing/conscious to stop and listen to my child and think about how they are feeling.'
- 'My son was curious about what I had learnt and we shared our new knowledge in a positive way, which created better understanding between the two of us.'
- 'Definitely noticed changes, I am more in tune with my child's emotions.'
- 'My child really wanted to share their emotions when I made the first step.'
- 'I am more aware of not jumping too early into problem solving and I guess this has reinforced a move to more independence with my child. I will 'sit with' rather than give the answer.'

In program evaluations, participants regularly said that they wanted the program to be longer. Many reported finding the strategies easy to understand but difficult to put into practice. Parents found it easier to reduce disapproving parenting than to implement Emotion Coaching responses. Some liked the group discussion; others wanted more information. Some people disliked the role-plays; others said these were helpful but difficult. Parents differed widely in what they liked and disliked, but overall there was very strong endorsement of the program's benefits.