

|                         |  |
|-------------------------|--|
| 1. Record Nr.           | UNINA9910813440703321  |
| Autore                  | Slivinske Johanna  |
| Titolo                  | Therapeutic storytelling for adolescents and young adults // Johanna Slivinske, Lee Slivinske  |
| Pubbl/distr/stampa      | Oxford, [England] ; ; New York, New York : , : Oxford University Press, , 2014<br>©2014  |
| ISBN                    | 0-19-933519-2<br>0-19-933518-4   |
| Descrizione fisica      | 1 online resource (450 p.)   |
| Disciplina              | 618.92/89165   |
| Soggetti                | Narrative therapy<br>Child psychotherapy<br>Family psychotherapy   |
| Lingua di pubblicazione | Inglese  |
| Formato                 | Materiale a stampa   |
| Livello bibliografico   | Monografia   |
| Note generali           | Description based upon print version of record.  |
| Nota di bibliografia    | Includes bibliographical references and indexes.   |
| Nota di contenuto       | Cover; Title Page; Copyright Page; Dedication; Contents; Foreword; Preface; Acknowledgments; Introduction; 1. Instructional Guidelines and Strategies; 2. Conceptual Framework and Evidence-Based Practice; 3. Principles and Processes of Storytelling with Teens and Young Adults; 4. Developmental Issues of Adolescence and Young Adulthood; 5. The Strengths Approach to Storytelling with Adolescents and Young Adults; 6. Social Adjustment and Peer Acceptance; 7. Sexuality; 8. Abuse, Sexual Assault, and Exploitation; 9. Parents; 10. Relationships; 11. Eating Issues; 12. Emotions; 13. Dating Violence<br>14. Substance Abuse15. Trauma; 16. Military Issues and International Violence; 17. Death; 18. Strengths; 19. Community Violence and Gangs; 20. Independence; 21. Cultural and Religious Issues; 22. Job Loss and Poverty; 23. Illness and Disability; 24. School Issues; 25. General Activities for All Practice Areas; References; Glossary; Author Index; Subject Index |
| Sommario/riassunto      | Adolescents are often an overlooked clinical population. Among school-based practitioners, there is a natural inclination to focus the delivery of mental health services, assessment measures, and  |

intervention plans on younger children, and there is a strong research base to support these programs. On the other hand, the waiting rooms of most practitioners in private practice are filled with young and middle-age adults, couples, or families with young children. Because most therapists do not specialize in working with teens, who might make up only a small portion of their overall caseload, ther

---