

## **Struggling Teens Continuum of Care**

**We feel that it is important for parents to be aware of these programs and while they may be lengthy and expensive, they can truly save a young person's life and restore a family's well-being.**

### **Boarding school**

With respect to troubled teens we will often recommend boarding schools in cases where:

- The child is faced with a difficult home life (parents don't get along, blended families, or a divorce is on the horizon).
- The child has linked up with a new group of friends that are causing or encouraging risky and inappropriate behavior.
- The child lacks motivation, direction, and needs significant structure

As can be seen in the chart below, in a boarding environment the primary interest is education and college prep, NOT clinical or therapeutic treatment.

### **Wilderness Programs**

Often the first step in dealing with a family in crisis is placement of the child in a wilderness program where:

- The child is in need of an immediate withdrawal from his current environment. Here the child can quickly get a sense of a new way to see his world and that he has to face natural consequences for his actions.
- The child needs to be evaluated without drugs or alcohol in his system and away from any toxic home base relationships.
- The child can be looked at over time to let their true issues surface. This phase becomes the basis for the future treatment and placement plan. At this time, if appropriate educational and neurological psychological test help provide direction.
- The child can develop a high degree of self-confidence as they "earn" privileges in return for working on their issues and interacting with others-many programs offer certificates in Life Saving, Wilderness First Responder and First Aid.

Note in the chart below that wilderness programs emphasize the activity and therapeutic/diagnostic areas of treatment. It should be noted that the wilderness programs we recommend are NOT boot camps. However, depending on the child, the physical rigor required or the program we select may vary. Wilderness programs typically have a duration of six to eight weeks with placement into another longer term program a usual outcome.

### **Therapeutic or Emotional Growth Boarding Schools**

Many times a child may successfully complete a wilderness program and not be quite ready to return to the home area after completion of the program. Therapeutic or emotional growth boarding schools are a great alternative where:

- The child is in need of the structure and environment that will help keep them on a recovery track.
- The child's primary emphasis is preparing for college and learning the proper social constructs offered by the program's students, teachers, administrators and clinicians (milieu).
- The child can benefit from developing social skills and identifying and solving their issues in common with other students.

Note in the chart that the key factors for placement in the therapeutic/emotional growth schools are the educational and social aspects. A reasonable amount of clinical help can be found at most of these programs. Students typically stay nine to eighteen months in these programs and upon leaving either go on to college or a traditional boarding school.

### **RTCs-Residential Treatment Centers (Milieu)**

Some children have a number of issues plaguing them at the same time (co-morbidity). They may be abusing substances and having identity problems associated with adoption. They may have ADD/ADHD coupled with depression or another psychological problem. Often a milieu based RTC provides the proper setting for helping where:

- The child has an identifiable issue that can best be resolved through the use of the milieu by connecting that child with others that have a similar root problem.
- The child requires a high degree of structure with a formal rewards based program to earn rights, rewards and privileges and where inappropriate behavior has clearly defined consequences that are enforced.
- The child can benefit from the social aspects of the program and achieve personal growth through peer to peer interactions.
- The family can arrive at treatment goals and have clear, measured progress reported with regular frequency.

As the chart indicates this type of RTC - while the educational aspect is deemed important, the key emphasis is problem resolution through the milieu and clinical therapy (group and individual). Typical stays in an RTC are nine months to a year, where the next step may be an emotional growth or traditional boarding setting.

### **RTCs-Residential Treatment Centers (Clinical)**

Children with more serious psychological problems may require the necessity of placement in a clinically based RTC. Here the problems are a great deal more serious. A child may be entertaining thoughts of suicide, they may get physically abusive with peers or authority figures, they may exhibit blatant sexual promiscuity or they may pursue any high risk activity that comes to mind. A clinically based RTC provides treatment where:

- The child is in need of serious care and oversight to deal with a clearly defined destructive behavior.
- The child may have a confirmed diagnosis of a serious (organic) mental illness.
- The child requires significant psycho-pharmaceutical drug medication management.

Here it important to note that the education component of the program takes a backseat to the treatment of the stressors, symptoms and actions of the child. An intense regimen of clinical therapy is coupled with a high degree of structure and diligent oversight. These programs typically can last nine to eighteen months and follow on programs may be done in steps-first to a milieu based RTC then to a therapeutic boarding environment and finally to a traditional setting for college or boarding school.

**Acute Hospitalization**

This alternative is taken when the situation is dire. The child, for example, may have tried to take their own life, or may have continually overmedicated or abused substances to toxic levels, or may have actually attacked others with intent to harm. The situation is real time and admission to a hospital specializing in treatment of these disorders is potentially the only viable action to save the child’s life. These programs are necessary where:

- The child is a clear and imminent danger to themselves
- The child has made threats and acted upon them
- The child is continually abusing drugs or alcohol to the point toxic intake

The major goal of this intervention is to save the child’s life and get them clinically stable. Hospital stays range from one week to a month and depending on testing, stability and other factors the next program for the child may be to a clinical RTC or in some cases a mental health facility where their stays may be quite lengthy.

**Focus / Treatment Intensity for Schools and Programs to Support Struggling Teens**

School or Program	Education	Milieu	Activity and Recreation	Therapy and Counseling	Psychiatry
Boarding School	Very High	Moderate	High	Minimal to none	Minimal to none
Wilderness Programs	Low	Moderate	High to Very High	Moderate to High *	Low
Emotional Growth or Therapeutic Schools	Moderate High to High	High	Low Moderate	Low to Moderate	Low
Residential Treatment Centers (Milieu)	Low Moderate	High to Very High	Moderate to High	High	Low
Residential Treatment Centers (Clinical)	Low Moderate	Moderate	Moderate	Very High	Moderate
Acute Hospital Treatment	None	Minimal	Very Low	High	Very High