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“Therapeutic 101” for School Admissions Officers

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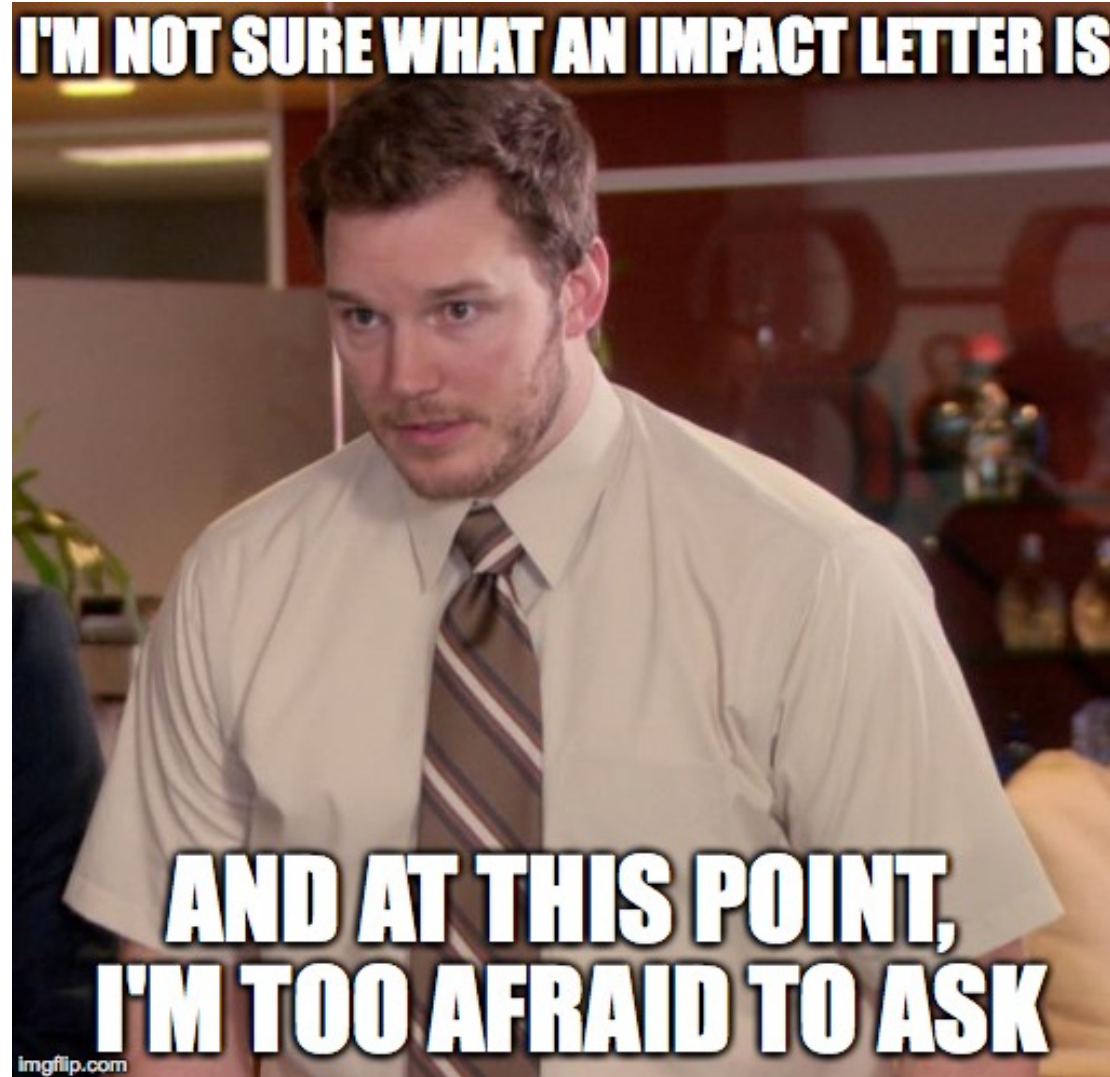


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▶ www.truenorthwilderness.com/handouts



The foreign language of therapeutic placement



Basic Glossary of Terms

▶ **Acute Local Hospitalization**

- ▶ Generally anywhere from 3 to 14 days
- ▶ Intended for stabilization, medication review, and safety, usually following a safety issue like suicidal ideation, threats, or attempt, or aggression within the home.
- ▶ Locked facility with almost full-time therapy
- ▶ Generally under the direction of a psychiatrist



Basic Glossary of Terms

▶ Inpatient Hospitalization

- ▶ Generally anywhere from 7 days to 6 weeks
- ▶ Tend to be private pay because the acute hospitalizations are only paid for by insurance for short stays.
- ▶ Intended for continued stabilization, medication review, and safety, as well as indicated therapeutic intervention
- ▶ Usually addressing a specific acute mental health issue like a severe mood or anxiety disorder, eating disorder, or substance abuse issue.
- ▶ Locked facility with almost full-time therapy
- ▶ Generally under the direction of a psychiatrist





Basic Glossary of Terms

▶ Rehab program

- ▶ Generally 30 to 90 days
- ▶ Intended for detox, stabilization, possible medication review, and safety. Most also include a variety of forms of therapy and groups including 12-step groups
- ▶ Usually addressing a specific addiction or addictive behavior (mostly substances, some for gaming)
- ▶ May be locked or open, may spend time in the community or not.
- ▶ Generally under the direction of a therapist





Basic Glossary of Terms

▶ Wilderness Therapy

- ▶ Generally anywhere from 56 to 100 days
- ▶ Intended for removal from environment by being outdoors and focus on therapeutic work while in a safe, supportive, challenging environment.
- ▶ Provides assessment of current therapeutic situation, initial intervention of therapeutic skills and behaviors, and transition to the next placement
- ▶ Staff-secure and removed from the community
- ▶ Generally under the direction of a therapist
- ▶ A high percentage graduate to other therapeutic programs, with some attending boarding or local schools







Basic Glossary of Terms

▶ Residential Treatment Center (RTC)

- ▶ Generally anywhere from 9 to 18 months
- ▶ May be a first step or may follow hospitalization, rehab or wilderness therapy
- ▶ Students attend school classes while also participating in about 15-18 hours per week of individual, group, experiential, and family therapies
- ▶ Focus is on intensive therapeutic intervention to help with mental health, emotional, and behavioral issues
- ▶ Staff-secure, with opportunities to be in the community and at home to practice skills.
- ▶ Many graduate to home or traditional schools, some to additional therapeutic placements





Basic Glossary of Terms

▶ **Therapeutic Boarding School (TBS)**

- ▶ Generally anywhere from 12 to 24 months
- ▶ Rarely a first step and generally follows hospitalization, rehab or wilderness therapy. Sometimes follows residential treatment
- ▶ Students attend school classes while also participating in about 10-15 hours per week of individual, group, experiential, and family therapies
- ▶ Focus is on therapeutic intervention in the context of school to help with mental health, emotional, and behavioral issues
- ▶ Staff-secure, with opportunities to be in the community and at home to practice skills.
- ▶ Many graduate to home or traditional schools, occasionally to additional therapeutic placements





Basic Glossary of Terms

▶ Phases/Stages/Levels

- ▶ Measures of progress in most programs.
- ▶ Help to break down goals into manageable pieces
- ▶ In some programs, there are specific privileges that come with progression. There is generally additional responsibility for leadership, etc.

▶ Home pass/Home visit

- ▶ In most residential programs, an opportunity for students to go home with specific rules and expectations to practice being in that environment
- ▶ Usually happens on higher levels, usually increasing in duration over multiple passes



Basic Glossary of Terms

▶ Family therapy

- ▶ Includes multiple members of the family (usually parents), often over the phone or video conference, and focuses on the family dynamics and issues. Sometimes includes in-person workshops

▶ Individual therapy

- ▶ Any time therapy is one on one between therapist and client

▶ Group therapy

- ▶ Includes multiple students with a therapist. Some groups are related to specific topics or issues, others related to a specific group of students

▶ Experiential therapy

- ▶ Therapies where students are engaged in doing something and drawing therapeutic implications from it. May include Art, Dance, Drama, Music, Recreational, Equine, Yoga, and others



Basic Glossary of Terms

▶ Impact letters

- ▶ Usually happens in the beginning of wilderness therapy. A letter from parents talking about the student's choices and their impact on the family, or indicating why parents chose this option

▶ Rescue letters

- ▶ Letters sent from students to their parents talking about how horrible it is and asking them to bring them home

▶ Accountability letters

- ▶ Letters that students write where they acknowledge what is going on for them and how it's impacting their own life and the lives of the people they love

▶ Other letters

- ▶ Different programs include different assignments around letter-writing—good to know what that looks like



Basic Glossary of Terms

▶ CBT

- ▶ Cognitive Behavior Therapy. Essentially looks at how faulty thinking and beliefs connect with emotions and behaviors.

▶ DBT

- ▶ Dialectical Behavior Therapy. Specific tools and skills for managing emotions, regulating behavior, and developing interpersonal effectiveness through mindfulness

▶ EMDR

- ▶ A specific form of therapy generally used with trauma to help relieve the intense emotions related to it



Basic Glossary of Terms

▶ **Mood Disorders**

- ▶ Mental Health issues related to mood. Includes depression and bipolar disorders

▶ **Anxiety Disorders**

- ▶ Mental Health issues related to anxiety. Includes Generalized Anxiety Disorder (GAD) and Obsessive-Compulsive Disorder (OCD)

▶ **Personality Disorders**

- ▶ Not usually diagnosed in teens, you may see features of personality disorders, which are more pervasive and entrenched than other kinds of mental health disorders. Most common would be narcissistic, borderline, histrionic, and schizoid.

▶ **Spectrum Disorders**

- ▶ Generally considered to be more cognitively based than emotionally based, they impact social communication, learning, processing, and behavior.



Basic Glossary of Terms

- ▶ **Executive Function, ADHD, LD, NVLD, Processing issues**
 - ▶ Common issues to see in testing—probably more familiarity with these
- ▶ **Oppositional Defiant Disorder (ODD)**
 - ▶ Refers to students who struggle with authority, especially with parents but sometimes with others as well, and frequently violate rules and boundaries
- ▶ **Self-harm**
 - ▶ Refers to intentional harm to self through scratching, cutting, burning, banging, etc. Is typically related to other mental health issues like depression, anxiety, trauma, and self-esteem
- ▶ **Sexual acting-out**
 - ▶ May refer to sexualized online behavior or to having sexual contact with multiple partners and/or in unsafe situations



Basic Glossary of Terms

▶ Eating Disorders

- ▶ Anorexia: A pattern of limiting caloric intake so that the body doesn't get enough nourishment
- ▶ Bulimia: A binge-purge pattern that includes high caloric intake followed by purging through vomiting, laxatives, or over-exercising
- ▶ Binge Eating Disorder: A pattern of taking in large amounts of calories in short amounts of time

▶ Substance Use Disorders

- ▶ Abuse: Use of substances that gets in the way of functioning but doesn't meet criteria for addiction
- ▶ Addiction: Use of substances that is impeding function, is compulsive in nature, and involves withdrawal symptoms when halted



Basic Glossary of Terms

▶ Suicidal Ideation

- ▶ Involves thinking or talking about suicide as a way to escape or manage difficult emotions

▶ Suicide Attempts

- ▶ Refers to students who have made an attempt on their life

▶ Emotional Reactivity

- ▶ Refers to students who become emotionally dysregulated (can look like a tantrum, shutting down, excessive crying, etc), typically in reaction to some kind of trigger

▶ Trauma

- ▶ Refers to any incident or incidents in the student's past that have been traumatic (could include divorce of parents, abuse, bullying, sexual trauma, accidents, death of loved one, etc)



Our students



▶ Henry



- ▶ Bright student, academically capable
- ▶ Chose to go to boarding school for a better school environment and options
- ▶ Athletic but sometimes unmotivated to participate in sports at school
- ▶ Socially savvy, lots of friends
- ▶ Kicked out of boarding school because of a drug or alcohol infraction on a three strike policy—got caught for the third time with marijuana in the dorm



Our students



▶ Cassie



- ▶ Bright student, academically capable
- ▶ Has always been an anxious perfectionist, and has become so scared to fail that she doesn't engage in doing her work
- ▶ Struggles with depression because she feels bad about the "failure" she has experienced in school
- ▶ Grades are ok but she's not happy and not doing her best
- ▶ Tends to isolate a bit socially because of the anxiety, but does have some good friends



Our students

▶ Ben



- ▶ Average student who was pretty engaged in school and in extracurriculars all through elementary and middle school
- ▶ Parents went through a very difficult divorce just as he was entering high school
- ▶ He shut down and quit participating, has been struggling in school and isolating from friends.
- ▶ He's smoked a little pot to try to feel better



Our students



▶ Kaitlyn

- ▶ Adopted at age 2 from a foreign orphanage
- ▶ Has always been really social and active as a child
- ▶ Really struggling with identity, which shows up as
 - ▶ Sexual acting out (multiple partners)
 - ▶ Sending inappropriate texts/snapchats/posts
 - ▶ Drinking with friends on weekends
 - ▶ Fighting with parents
 - ▶ Lying and making up stories about herself



Our students



▶ Jacob

- ▶ Decent student, doesn't work hard but things come naturally so he still succeeds in school
- ▶ Would prefer to spend all of his time on a device, gaming, watching youtube, or on social media
- ▶ Doesn't have a lot of in person friends—most social connection is happening online
- ▶ Isolates from family and gets anxious and angry when limits are imposed on devices



Our students



▶ Matt



- ▶ Very bright student, especially in math and science, about which he is slightly obsessive
- ▶ Has been diagnosed on the autism spectrum, very high functioning
- ▶ Has a big split in his IQ between verbal comprehension and processing speed
- ▶ Engaged in school, desperate for friends, but socially awkward which leads to poor decision-making
- ▶ Lacks executive functioning skills including organization, time management, and basic self-care



Our students



▶ Ellie

- ▶ Totally unmotivated, failing in school and not engaging in outside activities
- ▶ Very resistant to any boundaries from parents, sneaking out and defying the rules
- ▶ Has started getting into trouble for ditching classes and has been picked up by the cops for using drugs



Questions to ask about the program (could ask admissions/outreach person)

- ▶ Basic understanding of the goals of the program— what does someone have to accomplish to graduate (this relates to individual goals, levels, general expectations, etc.)
- ▶ What is the average length of stay (for comparison)?
- ▶ How much involvement do parents have?
- ▶ What type of academics do they do? How much time do they spend on academics outside of class?



Questions to ask about the program (could ask admissions/outreach person)

- ▶ What is the level of independence when someone graduates?
 - ▶ How much supervision have they had?
 - ▶ How much structure have they had?
 - ▶ How much therapy have they been having?
 - ▶ How much freedom do they have (i.e. leaving campus, being unsupervised, etc)?
 - ▶ How much access do they have to parents and siblings? Friends?
 - ▶ How much access do they have to technology?
 - ▶ Have they been on home passes? How long? How supervised?
 - ▶ How much responsibility do they have?



Questions to ask about the student (generally for the student therapist)

- ▶ Student profile
 - ▶ What did they look like when they first arrived?
 - ▶ How have they progressed?
 - ▶ What do they look like on their worst day?
 - ▶ How do they bounce back from that?
 - ▶ What kind of therapy do they need? School counselor versus individual therapist?



Questions to ask about the student (generally for the student therapist)

- ▶ Student motivation
 - ▶ How much do they know about boarding school?
 - ▶ How invested are they in going?
 - ▶ How long did it take to settle in and accept the process at the current program?
 - ▶ How engaged are they in their own care/work?
 - ▶ How much coaching do they require for self-care?
 - ▶ How much initiative do they take on getting things done? How much prompting is required)?
 - ▶ What sports/activities are they interested in?



Questions to ask about the student (For the student therapist or consultant)

- ▶ Student behavior
 - ▶ What is their level of compliance?
 - ▶ What kinds of support and structure do you think they need to be successful?
 - ▶ What makes you feel they are ready for this step?
 - ▶ Where do you think they might struggle?
 - ▶ How well do they ask for help when needed?



Questions to ask about the student (generally for the student therapist)

- ▶ Student social interaction
 - ▶ How have they managed their peer interactions?
 - ▶ How do you expect them to do with a new peer community?
 - ▶ How do you expect them to do with opposite gender peers?
 - ▶ What has their group milieu been like? Who do they seem to get along best with?



Questions to ask about the student (for consultant or student therapist)

- ▶ Student family
 - ▶ How involved have parents been?
 - ▶ How responsive are parents when the program reaches out?
 - ▶ How supportive have parents been of recommendations from the program and consultant?
 - ▶ What special circumstances are important to understand? (Divorce, step-parents, death, family history)



Potential Red Flags

- ▶ Parents are hesitant about a release and don't want you to talk to a specific person (the consultant may have some insight about this)
- ▶ Parents are trying to micromanage what gets shared
- ▶ The student has not graduated from the previous program
- ▶ The family is going against recommendations from a program or consultant



Managing logistics

- ▶ When it comes to interviews, tours, and applications, understanding the limitations in terms of timing and access for the students and families is important
- ▶ What are your limitations and boundaries?
- ▶ If you can make exceptions in your traditional process, what does that look like?
- ▶ Who on your campus needs to talk to the program? To whom? Before or after acceptance?



Setting up expectations for students and parents

- ▶ It helps to know how much communication parents have had so you can set them up for appropriate expectations
- ▶ Make sure to be very clear about structure, supervision, and access to therapy so there are no surprises
- ▶ Make sure that students and families are very clear on boundaries and expectations for their continued success at the school





Thank you for coming!

Please fill out your surveys

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