

Research Results: Adolescents

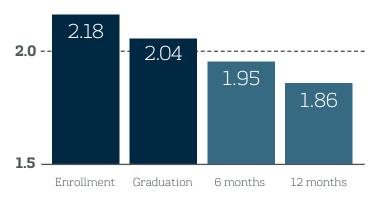
True North has dedicated resources specifically to conducting research, both internally and as part of a broader national study on the efficacy of Wilderness Therapy. All students and their parents or guardians are invited to complete questionnaires upon enrollment, graduation, 6 and 12 months post discharge. These data were collected using normed and valid, scientifically robust tools.

Based on the results of data gathered from adolescents and their parents, we see significant, objective improvement in a variety of areas.

Family functioning improves

A Family Assessment Device score of 2.00 or above indicates problematic family functioning. The higher the score, the more problematic the family member perceives the family's overall functioning.

True North's average FAD scores:



Students and parents see great benefit

92%

Parents surveyed at graduation report that their child's problems are better than when they entered the program.

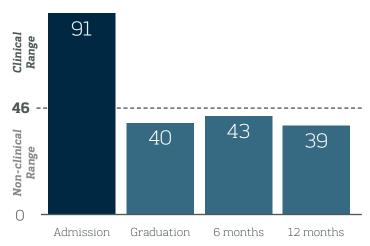
94%

Parents surveyed at graduation report satisfaction with the quality of treatment their child received at True North.

Mental health functioning improves

The Youth Outcome Questionnaire (Y-OQ 2.01*) is a well known, reliable scale completed by the parent/guardian and is a measure of treatment progress for adolescents receiving mental health intervention. It is designed to track actual change in functioning and to measure symptoms of distress across a variety of areas. **A score above 46** is considered the clinical range and a decrease in score is an improvement in mental health functioning.

True North's average Y-OQ 2.01 composite scores as of 4/24/2023:



Note: If the difference in the pre-to-post-treatment score is greater than 13, and the post-test score has crossed the threshold between a clinical and non-clinical range, the client is said to have demonstrated clinically significant change.









The overall shift in scores on the Y-OQ 2.01 reveal **significant clinical improvement** for students both during and after their experience at True North. Further examination of the individual items on the scale gives a more robust picture of some of the specific gains. Results indicate that the significant improvements noted upon completion of True North are maintained and consistent **12 months after graduation**. The following is a sampling of those results.

Symptoms of anxiety and depression are reduced

Parents reported their child does not participate in activities that were previously enjoyable:

Enrollment	56%
12 months	6%

Parents reported their child frequently or always seems anxious or nervous:

Enrollment	56%
12 months	14%

Parents reported their child frequently or always appears **sad or unhappy:**

Enrollment	59%
12 months	9%

Students exhibit and report increased self-confidence

Parents reported their child sometimes, frequently or always **appears happy with him or herself:**

Enrollment	43%
12 months	90%

Parents reported their child frequently or always **gets frustrated and gives up, or gets upset easily:**

Enrollment	63%
12 months	15%



Students show marked social and interpersonal improvement

Parents reported their child frequently or always wants to be alone more than other children of the same age:

Enrollment	50%
12 months	12%
Parents reported their child has negative distrustful attitude toward others:	
Enrollment	67%
12 months	23%

Students demonstrate improved cooperation and respect

Parents reported their child frequently or always argues or is verbally disrespectful:

Enrollment	54%
12 months	8%

Parents reported their child frequently or always **complains** about or challenges rules, expectations or responsibilities:

Enrollment	60%
12 months	13%

Executive Functioning improves

Parents reported their child frequently or always has **diffi- culty completing assignments or completes them carelessly:**

Enrollment		73%
12 months		21%

Parents reported their child frequently or always seems unable to get organized:

Enrollment	709	%
12 months	279	%

* Gary M. Burlingame Ph.D. and Michael J. Lambert, Ph.D.
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