Troubled Teen Industry (TTI)

Institutional Placements: Creating Space for Youth Voice



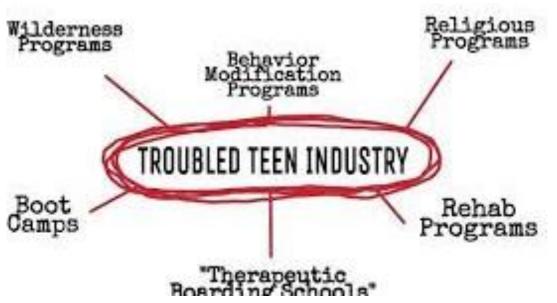
What is the Troubled Teen Industry?

 The TTI is an umbrella term for congregate care programs where young people are sent to live under the premise of receiving specialized care, treatment, behavioral modification or merely for housing/placement.

How do kids get sent?

- There are 4 major entry points into the TTI.
- 1. <u>Private Placement</u>: word of mouth, educational consultants, therapists, aggressive and predatory advertisement, church connections and marketing
- 2. <u>Foster Care placements</u>: Behavioral Rehabilitation Services (BRS), Qualified Residential Treatment Programs (QRTP), PRTS (Psychiatric Residential Treatment Services)
- 3. <u>Special Education Placements</u>: Judge Rotenberg Education Center, for example.
- 4. <u>Developmental Disability Services</u> referrals







Worth mentioning!!!

- The US has a LONG history of separating children from their parents dating back to the enslavement of people wherein their children were treated as property owned, and racist beliefs about enslaved families enforced the idea that some children didn't need to be with their families or were better off taken away.
- The US has a LONG history of taking indigenous children from their tribes and sending them to Indian Boarding Schools, or otherwise trying to assimilate them into white families and culture.
- The impacts of these systems linger strong in what is currently known as the Troubled Teen Industry.

How do you make kids go?

- Gooning: the act of staging a kidnapping, often in the middle of the night, at the direction/consent of the parents. "You can do this the easy way, or the hard way." Use of professional "transporters"
- Court-orders in family law cases, at the request of a parent, or courtorders in dependency cases.
- Often kids are transferred from program-to-program, such as from "Wilderness Therapy" to a "Boarding School"
- Sentencing kids to programs through delinquency proceedings, and failure to go or "comply" constitutes probation violations
- Deceptive campaigns that convince kids the programs are desirable, so they "go voluntarily"
- Referrals from therapists, educational consultants, and child welfare





Is this any kind of way to start a therapeutic relationship?



What kinds of bad things happen?

- From the start, these programs remove kids from their communities and families, eliminating natural supports and disrupting routine life and developmental milestones and normal teenage experiences.
- Programs very often start with strip-searches, and sometimes include forced gynecological examination and dehumanizing practices.
- Programs very often start with depravation of contact with family members or "black out periods" and often require youth "earn" their right to speak to family or friends by demonstrating compliance with harsh rules.

More problems:

- Youth are often co-housed with unsafe youth, and are subjected to peer-on-peer violence or sexually unwanted behaviors.
- Youth are often exposed to abusive staff, neglective staff, physical restraints, locked seclusion, unreasonable expectations of silence or compliance.
- Youth are often exposed to physical labor, such as digging or chopping, or carrying heavy things. Youth are forced to clean unsanitary biohazards, forced to do unpaid or underpaid manual labor such as landscaping.
- Youth are often forced to police their peers and participate in punishments.



Even more problems:

- Youth are not receiving appropriate educational opportunities. Often "school" is incredibly limited, often packet work, sometimes don't earn credit or are not appropriately accredited with legitimate bodies, ignore IEP's, lack any richness or depth or choice. Sometimes "school" is 1 hour per day, for example.
- Youth are not actually receiving the battery of services that the program advertises. For example, on site therapists are not actually available or qualified. Group therapy can include harmful attack therapy practices. Programs continue to provide conversion therapy under other names. Programs sell "EMDR" or other buzz words and don't actually do those practices with fidelity. Therapists are often unqualified or underqualified including graduate students and interns. Kids lack any choice in provider, methods, groups, or what treatment goals actually look like. Mental health fails to address home problems that contribute to the reasons the kids are not home.

Even more problems:

- Kids fail to make meaningful and enduring friendships. They often cannot know each other's last names, get contact information, or stay in touch after the program.
- Kids are forced into social dynamics that are unnatural or harmful, and are held responsible for policing each other's behavior under threat of their own success in the program. Sometimes kids are not allowed to communicate at all, until they "earn it" or ask permission to speak.
- Kids are housed 24/7 with kids that may be unsafe, traumatized, "annoying", scared, profoundly mentally unwell, actively suicidal, and watch each other get restrained, abused or neglected. They never get a break from each other.

Even more problems:

- They miss milestones like getting a driving permit, getting a license, getting their first job, dating, going to school dances, playing sports, joining clubs, missing pop-culture moments and references, etc.
- They lose their individuality in clothing choices, and how they choose to present themselves in the world. Black youth often are neglected in their hair and skin care needs that differ from non-Black peers.
- Overrepresentation of BIPOC populations, especially Black and indigenous youth.
- Overrepresentation of LGBTQIA+ youth, and placements that do not align with gender

The biggest problem:



• The scariest issue in the TTI is the number of youth that die in these programs.















Where are these places?

- Everywhere, but especially states with low regulation and oversight such as **Utah**, Montana, Texas, Missouri...
- Intentionally built in rural communities where the employer becomes a major player in the local economy.
- Intentionally seek out-of-state youth.
- International placements: Jamaica, Costa Rica, Mexico (Casa by the Sea), and other countries to avoid accountability and oversight

Where can I learn more?

- Trapped in Treatment Podcast, and other podcasts
- Watch "The Program" on Netflix
- Watch "Hell Camp" on Netflix
- Watch "This Is Paris" Documentary on YouTube
- Read any number of books on the Troubled Teen Industry: Paris Hilton's Memoir, This Will Be Funny Later by Jenny Pentland, Stolen by Elizabeth Gilpin, I See You Survivor by Liz Ianelli, Help at Any Cost by Maia Szalavitz, The Dead Inside by Cyndy Etler, Troubled: The Failed Promise of America's Behavioral Treatment Programs by Kenneth Rosen and many more
- Listen to current and former foster youth and survivors, such as Think of Us.
- Read senate reports, such as: https://www.finance.senate.gov/imo/media/doc/rtf_report_warehouses_of_neglect.pdf

Hearing Youth Voices

- Think of Us- A foster and former foster youth lead organization based in Washington DC that does systems work and advocacy around the country.
 - Away from Home Report:
 - https://www.thinkofus.org/case-studies/away-from-home

Listen to survivors! Many survivors are coming forward and sharing their experiences. Be prepared to believe them.

Understand that "troubled youth" are incredibly vulnerable because their credibility is already at issue. Predators know this!

- CASA volunteers should make every effort to visit kids in the program. They should make space for children to have confidential conversations. This might look like taking a walk in the yard, for example.
- CASA volunteers should understand that phone calls are not usually confidential, or even available, and may cut into time the youth is allowed to call family members or their attorney. Do not rely on phone calls alone, and do not rely on reports generated by the facility in place of contact with the child. It may supplement it, but shouldn't replace it.
- CASA volunteers should understand that sometimes kids can't or won't share details of their circumstances with adults in their lives.
- Everyone should avoid "toxic positivity" when interacting with children in programs.

- Volunteers should understand that youth may not fully realize their circumstances are abusive or neglectful. Sometimes it takes years after care to realize that things weren't right.
- Volunteers should understand that what a program offers on paper does not always mean it is being provided in real life, or that the services provided are of the nature and quality one would expect. Ask very specific questions!!!
 - I see there is a school on site. How many hours of daily instruction is the child getting? Is the child doing packet work? Is there an IEP? How were special education needs identified? What specific medications is the child taking and to treat what diagnosis? Has this child gained/lost weight? How are they sleeping? How do they feel on this medication?

- Consider setting placement review hearings!
- Pay attention to time-lines and notice if progress is being made in accordance with expected outcomes. Is the program just holding the child without progress, or without an identified exit plan? Is the child being subjected to a cookie-cutter program or is it tailored to their individual needs?
- Ask the child questions at reviews about their experience, but understand they may be limited in what they can say or how honest they can be without consequences.
- Be prepared to believe kids when they express distress or share concerns, remembering that their credibility is already an issue going in. Do not let this be a reason to dismiss it.

- It's ok to acknowledge how hard it is to be away from home. Again, avoid toxic positivity.
- Remember that most kids in programs aren't there as punishment. Being a "hard kid" is not a reason to treat a child like a prisoner, but is a symptom of their trauma. Encouraging kids to behave without asking them what they need is a huge problem.
- Don't equate compliance with progress or healing. While it can be, sometimes kids have just figured out the best way to get out of a bad placement is to fake-it-till-you-make-it.
- Ensure aftercare planning is in the works from the beginning.

- Ask kids who they've seen from outside the facility.
- Ask kids if they've gotten a chance to leave the facility. What did they get to do? What happened to them when they returned? (Hint: some programs strip search kids after visits off campus)
- Ask kids who they wish they could see or talk to. Ask the caseworker if that can happen.
- Understand how to identify if a kid's treatment is dictated by insurance. Did the kid really benefit from the program, or did funding just run out? Is the kid ready to discharge, but the funding exists for a longer stay so we'll make them stay there?

Learn more so you can ask good questions:

- Research programs. Read online reviews. Look into their success rates, histories, restraint and seclusion reports, lawsuits. Don't just assume it's a good program because you've heard about it being used a lot.
- Visit programs often, not just once. Don't send courtesy workers on your behalf. Kids need to trust you.
- Learn what services were promised, what the child's treatment goals are, and ask detailed questions about how those needs are being addressed. Ask the kids if it's working.