A Parent’s Guide to Mental Health Treatment for Teens
2020: A Challenging Year for Adolescent Mental Health

The year 2020 did not go as anyone expected. To call our current situation fluid and dynamic would be accurate – but it would also be an understatement that does not quite capture the challenges we all still face in 2021.

We want to acknowledge that you, as the parents of a teenager or teenagers, are dealing with a set of circumstances you probably never expected and certainly could not have predicted at this time last year.

You may find yourself – and possibly your spouse, too – working from home while your teenager – or teenagers – attend online school. If you’re like most of us, spending a year at home almost every day with the whole family present the entire time is not what you’re accustomed to.

Let’s be honest: this scenario can cause significant stress for everyone in the family. For you, as a parent, for your kids, for everyone. You may worry about your continued employment. Your teenager may experience grief, loss, depression, anxiety, and sadness around a variety of things, such as a lack of in-person social contact with their friends, the absence of in-person extracurricular activities, and the delays, changes, and modifications to high school and club sports.

These stressors coming at all family members from all sides can lead to conflict. Siblings may argue, lash out at one another, or act out. They may develop behaviors you’ve never seen before. However, everyone tries to put on a brave face and deal with all this the best they can. While that’s admirable in most cases during this time, it can also lead to negative consequences.
Stress can cause an escalation of existing mental health issues or reveal dormant mental health issues. In teens, stress and isolation can lead to:

- Substance use
- Defiant or disruptive behavior
- Suicidal ideation
- Non-suicidal self-injury
- Anxiety
- Depression

Teenagers struggling with these issues may not want to say anything about them, because they know you’re already under enough stress. Or they may not have the emotional awareness to understand what’s going on with them, which means they can’t articulate their feelings to ask for help and support.

We’re concerned that the mental health needs of adolescents may be overlooked during this highly unusual and potentially traumatic time. We want you to know that mental health services – at all levels of care – are available during the coronavirus pandemic. If your teen shows signs or symptoms of a mental health, behavioral, or substance use disorder, they may reach a point when they need more intensive support than once-a-week outpatient therapy.

Rest assured that, even during this period of uncertainty, you can get them the treatment they need to manage their symptoms and rediscover their mental, emotional, and spiritual balance.

At Evolve, we’re committed to helping restore harmony to your family and home. We created this treatment guide to help you navigate the process of finding the best possible treatment option for your adolescent.
Treatment for Teens: Evaluating Your Options

The most common levels of care beyond outpatient treatment include detoxification (detox), residential treatment (RTC), partial hospitalization (PHP), intensive outpatient (IOP), wilderness programs, long-term treatment, and therapeutic boarding school.

Finding the treatment option that best meets the needs of your child and your family can be challenging. The following information aims to reduce confusion about the types of treatment available and offers a list of considerations to keep in mind when choosing the best program for your child.

**Detox**

Detoxification refers to the process of allowing substances of misuse and related toxins to clear the body so a teen diagnosed with an alcohol or substance use disorder can begin treatment with a clean slate. In some cases, detox must be medically monitored, and in others, detox must be both medically monitored and medication-assisted. If a professional assessment indicates a medical detox is a necessary first step before treatment begins – typically in cases involving opioid, benzodiazepine, or alcohol addiction – then it’s critical to select a program that offers medical detox in an appropriate setting with qualified staff. That’s the first step before participation in any program we describe below. During medically monitored and medication-assisted detox, medical staff are on-hand to address any emergencies that may occur, and to ensure the administration of appropriate medication to mitigate the physical symptoms of withdrawal.

**Outpatient**

In outpatient treatment, parents take teens to an office visit once or twice a week. This is a typical entry level of treatment for a teen who needs help with psychological or emotional issues, but whose issues do not significantly disrupt their ability to function in school and do not significantly impair their family or peer relationships.
Virtual Outpatient (Teletherapy)
Virtual outpatient programs are the same level of care as outpatient programs. The difference is that they occur via videoconference app, such as Skype, Zoom, FaceTime, or Google Hangouts, rather than in person. Teletherapy typically occurs once or twice a week, with the frequency determined after consultations between the family and therapist.

Intensive Outpatient
These programs are called Intensive Outpatient Programs – IOP for short. In IOP programs, adolescents attend treatment for a half-day, three to five days a week. This level of mental health treatment is appropriate for teens with mental health and/or substance use issues that are significant enough to disrupt day-to-day living but who can still live at home and/or go to school.

Partial Hospitalization
These programs are called Partial Hospitalization Programs – PHP for short. In PHP programs, adolescents attend treatment for a full day, five days a week. This level of treatment is appropriate for teens with mental health issues that are significant enough to disrupt day-to-day living. Teens in PHP programs typically do not go to school while receiving this level of care although most PHP programs have an academic component. Participants in PHP programs live at home, and do not live on-site.

Residential Treatment
These programs occur at Residential Treatment Centers – RTC for short. This level of treatment is appropriate for teens with mental health or substance use issues that are so severe they need 24/7 support and monitoring. Teens who attend an adolescent residential treatment center do not live at home and need an immersive level of care to manage their mental health or substance use issues.

In a residential program, teens receive more intensive therapy and psychiatric care than in IOP or PHP programs. These teens need time away from their current environment to concentrate on recovery and healing. Residential treatment allows for more time for one-on-one therapy, family therapy, and group therapy and peer support. Teens learn and practice coping skills, distress tolerance techniques, and relapse prevention strategies. They have time to practice what they learn and hone their skills with feedback from therapists, counselors, and peers. This prepares them for success when they finish treatment or step down to a less immersive level of care.

The length of stay in a residential treatment program – typically 30-60 days – is often covered by insurance plans that include behavioral health benefits. Insurance plans that include behavioral health benefits often do not cover programs of greater length than residential treatment programs, such as the long-term treatment programs, wilderness programs, and boarding schools we discuss below.

Psychiatric Hospitalization
Psychiatric hospitalization is appropriate for adolescents in crisis or whose symptoms are more acute than teens in residential treatment centers. Their risk of self-harm is the highest. Teens recommended for psychiatric hospitalization may have attempted suicide or experienced a drug overdose. Psychiatric hospitalization occurs in psychiatric units within general hospitals or in private psychiatric hospitals. Intake can be voluntary or involuntary, with care supervised by psychiatrists and delivered by group therapists and/or psychiatric nurses.

In general, psychiatric hospitalization involves the highest degree of monitoring of all levels of care. Movement and activity within the facility is tightly controlled, and doors to living quarters and other areas...
may be locked during predetermined times. While most residential treatment centers have “hands off” policies for dealing with teens in danger of harming themselves or others, the regulations in psychiatric hospitals typically allow staff to put “hands on” patients in crisis situations. In addition, psychiatric hospitalizations typically occur on recommendation of mental health professionals after a crisis situation. These voluntary stays last 3-10 days, depending on the reason for admission and the acuity (immediate seriousness) of the issue. Upon discharge from psychiatric hospitalization, the level of care most often recommended by clinicians is residential treatment.

**Long-Term Treatment**

Long-term treatment programs occur at residential treatment centers and often involve a higher level of monitoring than a teen receives in a typical residential program. Long-term treatment units are often locked, and staff usually have increased ability to contain a treatment-resistant teen. While residential treatment often lasts 30-60 days, long-term treatment may last three to six months or more. This level and length of care is appropriate for teens who have tried shorter term residential programs without success and need long-term intervention due to elopement risk, physical aggression that may require physical intervention, or profound mental health issues that require long-term medication stabilization.

**Wilderness Programs**

Wilderness programs occur in the outdoors and use challenge-type experiences in a wilderness setting to support teens who struggle with maladaptive behaviors. These programs typically last six weeks to two months. They combine individual and group therapy with wilderness-based adventure activities to treat teens with significant behavioral issues that remain unresolved after intensive outpatient or residential treatment programs. Licensing and accreditation for wilderness programs vary from state to state. Parents interested in these programs should look for evidence-based mental health or substance use treatment provided by counselors or therapists trained to support adolescents. Completion of a wilderness program is often a requirement before admission to an emotional growth or therapeutic boarding school.

**Therapeutic Boarding Schools (TBS)**

Therapeutic boarding schools are boarding schools where teens live on-site and receive treatment for a mental health, substance use, or behavioral disorder while simultaneously pursuing an appropriate academic program. Also called Emotional Growth Schools (EGS), these programs typically work for teens who have attempted less intensive programs, such as outpatient, partial hospitalization, or residential, but need the additional support and time in treatment offered by half-year or year-long programs common to a TBS. While TBSs and EGSs always have licensing and accreditation as academic institutions, parents interested in these school for their teens should ensure the school offers evidence-based mental health or substance use treatment provided by counselors or therapists trained to support adolescents.
Finding the Right Treatment for Your Teen

We understand that finding the right treatment for your adolescent can be challenging. When doing your research, it’s vital to ensure any treatment center you consider has strong safety protocols in place to protect your child. Do your due diligence and ask as many questions as you can about the program. The following list serves as a helpful guide in knowing which issues to ask about, and why these issues matter.

**Licensing and Accreditation**

*Why does licensing and accreditation matter?*

Maintaining licensure and accreditation ensures the treatment center follows state regulation that set the standard for client safety. Licensing and regulations of teen treatment centers vary state by state. Accreditation provides a program with an additional seal of approval. CARF and The Joint Commission, the standard accrediting bodies for treatment centers, ensure that programs preserve clients’ rights, enforce robust safety protocols, and adhere to best clinical practices. These accrediting organizations routinely provide updates on the latest standards of care, offer information about common areas for improvement, and guide treatment centers’ quality improvement efforts. If a program has other sorts of accreditation, investigate what they are and how they are being monitored. Some accreditations are memberships more than oversight.

If a program offers information regarding academic accreditation, parents should inquire about clinical accreditation and state license requirements. For safety reasons, clinical oversight and accreditation are important in ensuring teens receive support and care that meets the highest standards, as determined by local, state, and federal regulations.

**Staff-to-Patient Ratio**

*Why does a good staff-to-patient ratio matter?*

A good staff-to-patient ratio means a high one: the more professional clinicians and staff on hand to support your child, the better their treatment will be. Too many teens + too few staff = a recipe for disaster. A strong residential treatment center that values patient safety will maintain a staff-to-patient ratio of at least 1:3. This enables treatment center staff to provide the supervision and individualized care teens need for successful treatment.
and recovery. It’s also important that the therapists at the center you choose have a manageable caseload. Therapists should carry a caseload of no more than three clients at any given time.

Staff Qualifications

Why does having a qualified staff matter?

Qualified staff are the foundation of an effective treatment center. Best practices for the treatment of adolescents are formalized and available in a variety of formats. Treatment center staff must be certified and licensed in their area of expertise. They must also have training specific to the population they treat. Staff at a treatment center for teenagers must have training and experience working with teenagers. For instance, at a treatment center for teens with severe emotional dysregulation issues, staff members should be trained in Dialectical Behavioral Therapy (DBT), an evidence-based treatment that has been proven effective as a modality for teens with severe emotional dysregulation.

Treatment centers must perform criminal background checks to ensure each staff member who supports your child has a clean, safe record. All staff members must pass a Live Scan background check, which clears them through the Department of Justice (DOJ), Federal Bureau of Investigation (FBI) and Child Abuse Central Index (CACI). When asked by parents, treatment centers should be able to quickly produce and verify staff certifications, any applicable licensure, and any background checks.

Emergency Policies

Why do emergency contingency plans and policies matter?

Crises don’t always occur during normal 9-to-5 business hours, which is why licensed staff should be on call 24/7/365. A treatment center that does not have licensed staff on call is not a high-quality treatment center. Residential treatment centers should also have protocols in place that match each level and type of crisis. A licensed clinician, psychiatrist, and/or nurse should be on call to address any situation that requires immediate intervention. If the teen has a life-threatening emergency, staff should be trained to implement appropriate protocols and involve the entire medical treatment team as soon as possible.

Monitoring Methods

Why do monitoring methods matter?

If you’re considering a residential treatment center for your teen, it’s likely they need 24/7 supervision. That’s why line-of-sight and line-of-hearing policies are vital: these policies ensure all teens are within sight and hearing of staff at all times. At all times. This includes at night and during off-site excursions. Surveillance cameras, an important tool that protects the safety of clients and staff, indicate a treatment center that offers a high quality of care. Facilities should be equipped with overnight monitoring systems to ensure staff conduct routine bed-checks.

It’s also important to ask whether a facility is locked or unlocked, especially if your teen has a history of treatment-resistant behaviors. Licensing and regulations for locked vs. unlocked facilities differ state to state. If a facility is unlocked, protocols should be in place in the event a teen decides to leave the facility before official discharge.
Access to Potentially Dangerous Objects

Why does restricting access to specific objects matter?

If your teen engages in non-suicidal self-injury or suicidal ideation, this is important. During treatment, a teen should not have access to any objects they might use to harm themselves. Therefore, sharp objects such as knives, scissors, and razors should be kept under lock and key. They should be closely monitored when taken out for use, and protocols should exist for accounting for all objects when they’re returned to their appropriate place. Safety-conscious treatment center staff understand that clients can be resourceful and should monitor even potentially dangerous objects to mitigate any possible risk. Potentially dangerous objects might include office supplies, toiletries, decorative objects, and cleaning supplies. Staff should conduct safety checks and sharps counts regularly. All cabinets, bathrooms, offices, gym facilities, and bedrooms should be locked when not in use. When you take a tour of the facility, check to see if these areas are locked. If they aren’t, that means the safety protocols either don’t exist or aren’t followed. In both cases, this is a serious red flag that indicates the treatment center has problems with their safety protocols and/or practices.

Behavior Modification Strategies

Why do the behavior modification strategies a treatment center uses matter?

Parents should be aware of, and comfortable with, the types of behavior modification strategies that will be utilized as a part of their child’s treatment plan. For example, a level system reinforces positive behavior with privileges and opportunities. Drawing from principles of behaviorism, level systems increase the likelihood that desirable, effective behaviors occur more frequently. Privilege loss is seen as an opportunity for teens to understand why a behavior was ineffective. When privilege loss occurs, teens receive coaching from staff to learn how they can react more effectively in the future. A level system can help a patient buy into treatment and motivate them to change.

If the patient experiences emotional distress and displays maladaptive, dysregulated behavior, staff should be trained in Nonviolent Crisis Prevention Intervention (CPI). Staff members should be able to de-escalate a crisis and coach a patient in using appropriate behavioral skills to cope effectively with their emotions.

An important question to ask is: If nonviolent de-escalation techniques do not work, are staff permitted to physically intervene? In other words, is this program a hands-on or hands-off facility? Physical restraint can lead to abuse and/or physical harm when administered incorrectly. Physical intervention or restraint should only be employed by staff with accredited CPI training, and only in programs that have the correct licensing. Policies regulating hands-on and hands-off facilities vary by state.

Contact with Others

Why does this matter?

While in residential treatment, teens should focus on healing. Outside interaction (visits, letters, and phone calls) should be limited to a select group of appropriate individuals approved in advance by parents and the treatment team. At the same time, parents/guardians should ensure that they’ll be able to receive regular updates from the treatment team regarding their child’s
progress. Teens should also be able to speak to their parents on a regular basis.

Your Family, Your Choice
When you begin exploring residential treatment options for your child, you’ll have a lot of things on your mind: insurance coverage, treatment modalities, location, facility quality, length of stay, and logistical issues. But in the midst of all these important questions, remember to research and confirm the safety protocols each treatment center employs. Ask as many questions as you can. If treatment center staff show any reluctance to discuss an issue or answer a question, it may be a red flag. The admissions counselors you speak to should be able to put your mind at ease by discussing rules and policies freely, and they should know most details without consulting a manual or policy book. A high-quality treatment program trains their admissions staff for just this reason: they’re the first contact in the organization, and should be able to speak easily on any topic related to the support and treatment of your teen.

Evolve Treatment Centers, accredited by CARF and The Joint Commission, utilizes the highest level of safety protocols for teens. We maintain strict line-of-sight policies, state-of-the-art monitoring technology, and the highest staff-to-patient ratios available. Evolve offers a full continuum of care for adolescents 12 to 17 years old. To learn more about Evolve’s mental health and substance abuse programs, please call (855) 609-1461.
Questions to Ask When Choosing a Rehab Center for Your Teen

Below, we include a list of questions to ask the admissions counselor of any treatment center you consider for your adolescent.

Clinical Questions

- Do you treat primary mental health issues, primary substance abuse, or are you a dual diagnosis treatment center?
  - If it’s a drug rehab center, does your program provide medical detox?
- How often will my teen see their therapist individually? How long is each session?
- How many clients does each therapist have on their caseload?
- Is there a board-certified child and adolescent psychiatrist on staff?
  - If so, how often will my teen meet with him/her?
- Which primary modalities do you use?
- What are your therapists’ credentials?
- How do you incorporate the family in treatment?
  - Do you offer family therapy? If so, how many sessions a week?
  - Which family members are encouraged to participate in family therapy?
  - How do you conduct family therapy if we are not local?
- Which experiential therapies do you offer?
- When my teen is ready to discharge, what happens next?
  - Do you help with aftercare? If so, how?
Safety Questions

You must be direct when it comes to asking about safety. Being entrusted to the care of adolescents is an enormous responsibility that no treatment center should take lightly. If you have a treatment-resistant or unwilling teen, or a teen with self-harming or suicidal tendencies, it’s vital to ask about the following safety policies and protocols.

- What is the staff-to-client ratio?
- Are licensed staff on call 24/7?
- How do you monitor the teens?
  - Are teens within staff’s line-of-sight and line-of-hearing at all times?
  - Are teens monitored by awake overnight staff? If so, how often do the staff members conduct bed checks, and how is this ensured?
- Do you use surveillance cameras?
- Are all staff required to pass Live Scan background checks?
- Is your facility locked or unlocked?
  - What protocols do you implement if a teen tries to run away?
- Do you do drug testing? If so, how frequently?
- How do you maintain safety during off-site excursions?
  - Are all staff certified in CPR, First Aid, and Water Safety?
- How close are you to emergency services in the event of a medical emergency?
- For my depressed/suicidal teen, how do you ensure that the house is free of all potentially dangerous objects?
  - Are all potentially dangerous objects under lock and key?
  - Are rooms locked at all times when they are not in use?
  - Do you conduct room checks, contraband checks, and sharps counts regularly?
- What behavior modification strategies will you use with my child?
  - Do you use physical restraint? If so, what circumstances will lead to staff using physical restraint?
  - If you do not utilize restraint, how do you handle an escalating teen who may become a danger to themselves or others?
  - If you have a motivational level system, how does it work?
Specific Questions for Wilderness Programs and Therapeutic Boarding Schools

Wilderness Programs:

Wilderness programs operate under a different set of guidelines than most adolescent treatment centers. To ensure a wilderness program is appropriate for a teen who needs evidence-based treatment for mental health or substance use issues, parents should read the Licensing and Accreditation, Staff-Patient Ratio, Staff Qualifications, Monitoring Methods, and Behavior Modification sections that appear before these question sets.

When talking with a representative from wilderness program, ask questions such as:

- Is your program fully licensed and accredited to provide mental health and substance use treatment services?
- Since location – the wilderness – introduces a new level of safety issues, it’s crucial to ask additional safety questions such as:
  - What are your wilderness-specific safety protocols?
  - What happens in the case of a non-psychiatric medical emergency?
  - What are your emergency medical evacuation plans?
  - Are staff trained in Wilderness First Aid?
  - Are staff Wilderness First Responder Certified (WFR) or Wilderness EMT Certified (Wilderness Emergency Medical Technician)?
  - How do you make sure the kids have everything they need to be safe in the outdoors?
  - Are basic needs restricted while in the wilderness?
  - How are meals handled and prepared?
  - How is water distribution handled, to ensure teens are always safely hydrated?
  - How far do kids hike?
  - How do you ensure kids are safe from extreme temperatures, weather conditions, and wildlife?
- Are staff trained and certified mental health or addiction counselors/therapists?
- Does your program include on-call psychiatrists or psychiatric nurses?
- Are staff trained to manage behavioral or psychiatric emergencies in the wilderness?
- How much evidence-based individual psychiatric care will my teen receive?
- Ask all treatment questions from the Clinical Questions section above.
- What are your behavior modification strategies?
- Ask all behavior modification questions from the Safety Questions section above.
Therapeutic Boarding Schools:

Therapeutic boarding schools – like wilderness programs – operate under a different set of guidelines than most adolescent treatment centers. To ensure a program is appropriate for a teen who needs evidence-based treatment for mental health or substance use issues, parents should read the Licensing and Accreditation, Staff-Patient Ratio, Staff Qualifications, Monitoring Methods, and Behavior Modification sections that appear before these question sets.

When talking to a TBS, begin with questions such as:

- Is your program fully licensed and accredited to provide mental health and substance use treatment services?
- What academic curriculum do you use? Is it internet/computer based?
- How many students are in a class?
- Do you have certified/licensed teachers, and are the academics accredited?
- Do you award high school diplomas or offer credits that can be transferred to other schools?
- Do you offer help with learning disabilities or special education?
- Ask all the questions from the Clinical and Safety question sets above.
General Questions
In addition to the Clinical and Safety questions above, you should ask a treatment center representative all the following questions:

- Is your program fully licensed and/or accredited?
- What is the average length of stay at your program?
- Do you have nursing on-site? If so, how many hours per day?
- Which insurance plans do you accept, and how does coverage work?
- What happens if my insurance company stops covering the residential level of care, but my child is not ready to be discharged?
- Can we take a tour of the facility if we wish to beforehand?
- What are the rules about visitation and contact with others?
- Will I be allowed to take my teen out for certain appointments (i.e. doctor)?
- How will you handle my teen’s schoolwork?
- Can you provide me with a packing and contraband list?
- What are your policies surrounding personal electronics and internet usage?
- Will my teen be sharing a room?
- Does your program welcome LGBTQ+ teens?
- Does your program incorporate religion into treatment?
- Can you accommodate my teen’s specific diet/allergies?

We advise keeping these lists with you when you visit a treatment center or talk to the admissions or clinical team on the phone. Take all the time you need and ask every question you want to ask. Don’t rush or allow yourself to be rushed: the decision you make is worth the time you take.

Be Thorough, Be Diligent, and Trust Your Instincts
During your conversation with the admissions team, you should be comfortable with the answers you receive. Always trust yourself. If something feels off, ask questions until the matter is settled to your satisfaction. Clinicians and staff at a high-quality program will be upfront, direct, and transparent about every aspect of their staff, program, and facilities. Clinicians and staff should be ready and willing to discuss all their policies freely and openly. If they seem vague or uninformed about any aspect of their program, that’s a red flag. Remember to ask follow-up questions if something seems unclear, you don’t understand the answer, or the policy you’re asking about seems incomplete or inadequate. Clarify every detail until you’re one hundred percent comfortable. The more informed you are about the program, the easier it will be to make a decision on which treatment center will be the best fit for your teen.
Evolve offers a full continuum of care, including Intensive Outpatient (IOP), Partial Hospitalization (PHP), and Residential Treatment Centers (RTC). Our locations in Northern and Southern California provide the highest caliber of evidence-based treatment for teens, 12 to 17 years old, who struggle with mental health, substance abuse, and/or behavioral issues.

Evolve programs include:

- Psychiatric Support
- Individual Therapy
- Group Therapy
- Family Therapy
- Experiential Therapy
- Academic Support

Evolve Treatment Centers maintains the highest level of safety protocols for teens. We utilize strict line-of-sight policies, state-of-the-art monitoring technology, and maintain a 3:1 patient-staff ratio. Staff includes psychiatrists, nurses, and licensed counselors and therapists. Teens receive individual therapy three times a week and daily group counseling. Families participate in our family program twice a week. Treatment is offered in comfortable, well-appointed homes with a maximum of six beds. All our homes are located within easy reach of nature-based outdoor activities. At each treatment location, we create a home-like atmosphere of inclusion and acceptance, ideal for healing, learning, and growth.

To learn more about mental health and substance use programs at Evolve, please call (855) 609-1461.