

Troubling the ‘troubled teen’ industry: Adult reflections on youth experiences of therapeutic boarding schools

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Abstract

In the United States, thousands of young people reside in private schools aimed at reforming ‘troubled teens’. These ‘troubled teens’ are young people who are considered to have emotional, behavioural and/or substance misuse problems. Therapeutic boarding schools are programmes that combine educational classes and group therapy in a self-contained residential facility that runs year-round. Case study interviews with former US-based therapeutic boarding school students demonstrate the role of sanism, adultism and epistemic injustice in constructing and regulating the ‘troubled teen’. The schools’ strict structure and surveillance culture could not override students will and their ability to find means to resist. The article’s central aim is to centre the perspectives of former students and critique social control of young people in therapeutic boarding schools.

Keywords

epistemic justice, Mad Studies, total institutions, troubled teens

Introduction

In the United States, there is a thriving industry to support and reform so-called ‘troubled teens’. ‘Troubled teens’ are young people who are labelled as having emotional, behavioural or substance misuse problems (Szalavitz, 2006). For the purposes of this article, I use the term ‘troubled teen’ to reflect a social phenomenon of labelling, rather than as an individualised pathological problem. The ‘troubled teen industry’ in the United States is composed of programmes that are marketed to treat these ‘troubled teens’. The industry includes therapeutic boarding schools, residential treatment centres (short-term intensive treatment in a specialist, clinical setting), wilderness programmes (short-term intervention that combines outdoor survival skills and therapy) and hybrid versions of these programmes (Haid and Donnelly, 2013). Many young people will attend more

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than one type of programme, such as going to a wilderness programme before progressing to a therapeutic boarding school (Reamer and Siegel, 2009).

I have defined therapeutic boarding schools as residential schools that combine educational classes with group therapy, typically in a private, self-contained facility that runs year-round. Young people may be sent to a therapeutic boarding school for a variety of reasons, some as a last resort intervention in a young person's life-threatening self-destructive behaviours, others due to transgressing parental expectations, such as having low grades, dressing in a subcultural style or having same-gender sexual attraction (Best Therapeutic Boarding Schools, 2019; Haid and Donnelly, 2013; Szalavitz, 2006). Often a combination of self-destructive behaviours and social transgressions contributes to a parent's decision to send their child to a troubled teen programme.

Young people are typically sent to these schools by their parents, with or without the young person's consent. While many therapeutic boarding schools admit pupils on a 'voluntarily' basis, those who refuse school enrolment risk being forced into a more restrictive environment, such as a wilderness programme. If a young person is thought to be at risk of running away or violently resisting entering a troubled teen programme, parents often hire 'transporters' to remove the young person from their home and forcibly transport them to a programme (Robbins, 2014; Szalavitz, 2006). 'Transporters' are paid by parents to remove a young person from their home and transport them to a treatment programme. A common practice is for one or two 'transporters' to enter a young person's home early in the morning, wake the young person, tell the young person to get dressed, force them into a car and drive them to a programme (Solomon, 2016). Young people taken by 'transporters' may or may not be informed of where they are being taken.

There are hundreds of therapeutic boarding schools currently in operation, although the exact number of schools and pupils is unknown due to inconsistencies in the definition of what a therapeutic boarding school is and a lack of regulatory oversight (Best Therapeutic Boarding Schools, 2017; National Association of Therapeutic Schools and Programs (NATSAP), 2019; US Government Accountability Office, 2008). There is currently no federal legislation that specifically pertains to therapeutic boarding schools or similar residential treatment programmes for young people in the United States (Federal Trade Commission, 2008). Regulation, oversight and accreditation of the schools are primarily at the state level and thus vary considerably across states (Higginbottom, 2015; US Government Accountability Office, 2008). There is a lack of accountability for therapeutic boarding schools where poor living conditions and harmful therapeutic practice have been reported (Chatfield, 2013; Whitehead et al., 2007). On rare occasions, therapeutic boarding schools have been shut down due to successful lawsuits filed by former students alleging abuse and human rights violations (Associated Press, 2017; Biscobing, 2016).

As private schools, many therapeutic boarding schools currently charge fees that range from around US\$30,000–US\$100,000 annually, although some schools offer financial assistance (Parents Universal Resource Experts (P.U.R.E.), 2019; The Envoy Group, 2019). Therapeutic boarding schools thus have a reputation as interventions for wealthy families with power and privilege (Francis, 2012; Pfaffendorf, 2017). However, some schools advertise themselves as affordable, faith-based therapeutic boarding schools, although their total costs are rarely advertised so how 'affordable' these schools really are is unclear (Brush Creek Academy, 2017; Help Your Teen Now, 2019). The actual demographic spread of therapeutic boarding school students is unknown. Due to the absence of federal oversight, there is no national register of therapeutic boarding schools, their staff or students – therefore, there is no reliable data on which one can assert who the average student may be (Behar et al., 2007). With these limitations in existing data, it is unclear to what extent the type of students admitted and the type of treatment these students receive may have changed over time. Crucially, moreover, the long-term impacts of therapeutic boarding schools is unknown (Friedman et al., 2006).

Theoretical approach

Research about therapeutic boarding schools so far has largely centred practitioner knowledge as the source of expertise (Baber and Rainer, 2010; Haid and Donnelly, 2013; Slife, 2012). My research intends to disrupt practitioners as the central authority on, and gatekeepers of, public information on therapeutic boarding schools. The research has been undertaken through the lens of Mad Studies, an activist and academic approach that critiques the social construction and regulation of psychiatrised people (Diamond, 2013). This is not intended to deny or minimise the real distress experienced on an individual level. Rather, Mad Studies looks at such distress as embedded in its social context. Mad Studies has sought to reclaim 'Mad' from a derogatory term into a political identity and marker of pride (Menziés et al., 2013). Therefore, my use of Mad Studies does not imply that former therapeutic boarding school students are 'mad' in the traditional, derogatory sense of the term. Mad Studies envisions psychiatrisation as a form of oppression, and psychiatrised people as marginalised members of society (Gorman and LeFrançois, 2017).

From a Mad Studies perspective, this article seeks to critique therapeutic boarding schools as a form of social control by centring students and former students of therapeutic boarding schools as 'experts'. Service-user-led and survivor research – as practised in Mad Studies to actively shift the focus from practitioners to service users and survivors – involves 'the systematic investigation of issues of importance to survivors, from our perspectives and based on our experiences, leading to the generation of new, transferable knowledges' (Sweeney, 2016: 37). Staying with this epistemic approach, I chose to interview former therapeutic boarding school students – as a former therapeutic boarding school student myself – to redress power imbalances in what and how experiences of psychiatrisation are presented and narrativized (Faulkner, 2017). This article is inspired by Mad Studies' activist commitment to centring the voices of those who are seldom heard.

Method

The research has focused on adult reflections of past youth experience in therapeutic boarding schools. Any former student of a therapeutic boarding school based in the United States was eligible to participate as long as they were 18 years old or older and no longer enrolled in the school. The choice was made to conduct interviews with former students only, as interviewing students currently enrolled in the schools would have been of serious ethical concern. Access to current students would have been gatekept by staff, and students may have felt pressured by the schools to speak positively about the institutions. If abuse and serious malpractice was discussed in interviews then there would have been a duty to report such incidents, making the confidentiality of such interviews void. Furthermore, it was felt that psychological and physical distance from institutional life would provide important insight into how former students make meaning of their past experience and any long-term impacts of the schools.

Participation in research was voluntary and confidential. The research was designed to be multi-stage, and the first stage involved an online questionnaire to gather preliminary data. The questionnaire asked respondents for information about their background, the schools they went to, and an indication of how helpful, or unhelpful, they felt the therapeutic boarding school was for them. To promote the questionnaire, I posted links on social media, including Facebook, Twitter, LinkedIn and Reddit. I also made contact with several national organisations to request distribution within their networks, including the National Association of Therapeutic Schools and Programs (NATSAP) and the Alliance for the Safe, Therapeutic and Appropriate Use of Residential Treatment (ASTART). Links to the research were widely shared, with most respondents hearing about the research through re-posts on Facebook groups. Over 100 participants completed the questionnaire.

A sample of questionnaire participants were invited to the next stage of research: an interview in person, over the phone or via Skype. Selection for interview was based on geographical location, availability to interview, and if the participant reported a broadly 'positive' or 'negative' experience in the therapeutic boarding school. Furthermore, I purposely selected participants from marginalised and multiply marginalised backgrounds; this was based on their self-reported demographic information including gender identity, sexual orientation, race and ethnicity, religion, disability and family income bracket. Interviews were semi-structured and, on average, were between 1 and 2 hours long. The research was undertaken from an interpretive and qualitative approach that emphasises the importance of in-depth narratives (Riessman, 2008).

Sixteen interviews were conducted with former therapeutic boarding school students in the summer of 2018. The three case studies presented here were selected for this article due to several key similarities. All three participants interviewed attended a therapeutic boarding school as teenagers in the 2000s. They were all sent to the schools by their parents without the participants' full knowledge or consent. All three former students attended schools that are still in operation, although one of the schools has since changed its name. The case studies here narrate negative experiences within the schools, which correspond to the results from the preliminary questionnaire that showed around 90% of respondents reporting 'negative' or 'very negative' for the overall experience in their therapeutic boarding school. To ensure confidentiality, the names of participants and the schools they attended have been anonymised and geographic locations have been broadly described. Participants were sent excerpts from this article to ensure the article's accuracy and minor alterations were made to accommodate their requests.

Case studies

Jasmine

Jasmine identifies as a biracial Asian American bisexual woman. She was raised by wealthy Christian parents in a small town in the 'Bible Belt' of America. She described her early childhood as 'privileged' and 'idyllic'. However, as she grew older, and became interested in heavy metal and goth subculture, she felt increasingly out of place in her predominantly conservative environment. Fights with her father became increasingly common, 'sometimes he wouldn't like my clothes, or I hadn't done my homework or something, and it would just kind of escalate'. As the arguments became increasingly heated, her father would punch her, and she would hit back in self-defence. At around the age of 14, she started self-harming. The fighting with her father continued to escalate until one day Jasmine confronted her father with a knife, demanding that he stop hurting her. Following this, Jasmine was briefly placed in a psychiatric hospital. From the hospital, she was taken to a wilderness programme and afterwards was sent directly to a therapeutic boarding school.

Lukas

Lukas is a Latino gay, cisgender man who was adopted as an infant into a white middle-class family in a town in the North East. Lukas was a creative and artistic young person, and he describes his teenage years as 'rebellious'. He had difficulty fitting in: 'I'm Latino and I'm also gay and I think that those things have made it challenging, just like a hundred percent sort of blending into the culture here because it's, I think, set up for rich white straight people'. When he was 14, he went through a self-described 'punk phase' and started using drugs, partying, skipping classes, and his grades were in decline. His substance use escalated to the point where his parents enrolled him in a drug rehabilitation programme. To try to improve the situation, he changed from the town's public

school to a private boarding school that focused on the performing arts, but shortly afterwards Lukas relapsed. One early morning he was woken in his family home by two strangers, ‘transporters’ who took him to a wilderness programme. After finishing the wilderness programme, he was sent to a therapeutic boarding school.

Christina

Christina is a white heterosexual, cisgender woman who was raised in a low-income family in a large city in North East, United States. She says she has always been a friendly, bubbly person, ‘a good person, you know, I just struggled more as a teenager’. By the time Christina was 16 years old, she used drugs, drank alcohol, and had stopped going to school. She often did not return to the family home, instead stayed with an older boyfriend. Her family often did not know where she was or if she was safe. ‘My parents were looking for me and I was living at some guy’s house, and I thought I was cool, and I wasn’t going to school, and I thought I knew it all’. Christina’s parents called the police and the whole neighbourhood was alerted that she was missing. Christina was eventually found at the boyfriend’s home. Her parents handcuffed her to the staircase as they waited for ‘transporters’ to arrive. It was then that Christina was told that she was going to a boarding school.

Sanism, adultism and epistemic injustice

‘Troubled teens’ are constructed through the converging social marginalisations of those labelled psychologically or behaviourally ‘troubled’ and those considered to be young, that is, ‘teens’. In Mad Studies, ‘sanism’ is a term used to describe interpersonal discrimination as well as broader cultural, social and systematic subjugation of psychiatrised people (Perlin, 2013; Poole et al., 2012). Adultism refers to the social oppression of young people and children and the socio-cultural centring of adulthood (LeFrançois and Coppock, 2014). Adultism and sanism are part of broader processes that devalue the personhood of young psychiatrised people. Consequentially, ‘troubled teens’ are positioned as without legitimate insight into their own experiences and as lacking the capacity to determine their needs.

Epistemic injustice occurs when individuals and/or social groups have their credibility as producers of knowledge or knowers undermined or denied (Leblanc and Kinsella, 2016; Scrutton, 2017). Young people who are considered to be ‘troubled’ often have significantly transgressed social norms and expectations, and many have demonstrated destructive behaviours or expressed emotional distress. Adults, namely, parents and healthcare professionals, have the authority to decide which of teenagers’ social transgressions are psychiatrised and necessitate intervention (Elliston, 2007). This is not to minimise that many ‘troubled teens’ behaviours can be harmful and ought to raise concern, but rather to draw focus on the social context in which such behaviour occurs. Once psychiatrised, young people are routinely excluded from defining their own experiences and determining their best interests.

At first glance, many ‘troubled teens’ behaviours appear individually situated: a mental health problem internal to the individual. Yet, we know that emotional distress and psychiatrisation are social processes that are unequally distributed and responded to, depending on a multitude of factors including a person’s social strata (Esposito and Perez, 2014; Fernando, 2017). Experiences of oppression and adversity, such as economic inequality and interpersonal violence, contribute to the conditions which create emotional distress. Furthermore, how emotionality is labelled and responded to is deeply entrenched with neoliberal renditions of racism,

classism, ableism, heterocisgenderism, colonialism, as well as sanism and adultism more specifically (Kalathil and Jones, 2016; Morrow and Weisser, 2012).

Young people become ‘troubled’ through a process of psychiatrisation, as their emotional health collides with the expectations of the sanist–adultist world. Jasmine believes a major reason she was sent to a therapeutic boarding school was because she broke her silence on sexual abuse within the family when she was placed in a psychiatric ward:

I reported sexual abuse by a relative to the psychiatrist . . . at the time, my family was . . . they were shocked and humiliated by my testimony. They urged me to recant what I’d said and admit that I made it up. They suggested the incident was part of hallucinations . . . not long after this, I was placed on Abilify, the anti-psychotic medication. I believe this event, along with consultations with the educational consultant, weighed heavily on my parents’ decision to send me away.

The above quote exemplifies psychiatrisation of abuse victims/survivors that disrupt the social norms of family life by disclosing the abuse. Jasmine further described that she felt sent away to ‘save face’ and that the psychopharmaceuticals were used to placate her, what she described as a ‘pharmaceutical lobotomy’ (Burstow, 2015). She discussed that since her family had already been ‘othered’ due to being Asian in a wealthy, white-dominant Southern society, her family were very concerned with family appearances and ‘fitting in’ (Tam, 2014). Placing Jasmine in a therapeutic boarding school geographically distanced her from the family, hid her disclosure and preserved the family’s precarious sense of cultural belonging.

As sanism and adultism converge, psychiatrised young people often do not have the power to determine what, if any, interventions would be best for their wellbeing. For those labelled ‘troubled teens’, many are ‘transported’ to treatment facilities without their knowledge or consent, as was the case for Lukas:

I was literally woken up and it was probably very, very early morning and these two men were just like in my room, you know, they’re like ‘get your stuff and let’s go, we’re going’. And I was just sort of like, ‘what’s happening?’ And we got into this truck, which I remember had some sort of caging . . . that’s really scary, you know . . . It was definitely a shocking thing . . . I remember being very angry just ‘cause I felt, sort of, I felt betrayed. I felt . . . supremely disrespected . . . nobody asked me what I thought, and this is happening, and I don’t like it.

Lukas speaks of the sense of anger, disrespect and betrayal he felt when he was taken into treatment, a decision made by adults without consulting him. Parents can authorise ‘transporters’ to gain temporary legal custody over their children, therefore ‘transporters’ can legally remove young people against their will (Robbins, 2014). Young people forced into treatment by ‘transporters’ are, by design, denied the right to informed consent.

Even when ‘troubled teens’ are permitted input into their treatment, if their perspective diverges from that of the adults, the young person’s voice is often overridden. All three case study participants spoke of not being believed by school staff as well as parents because of the social stigma associated with being a psychiatrised young person. Staff would actively undermine the young person’s account, telling their parents, as well as other students and staff, that their accounts were irrational, manipulative or false. Christina tried to tell her parents about the poor conditions of her school, but was not believed:

It was very confusing cause like I’m thinking ‘why are my parents sending me here?’, like this place is crazy . . . I don’t know if they knew what was really going on or not . . . I would try to write to them and

tell them some things . . . but, you know, staff would just tell them we were manipulating and who were they supposed to believe?

Christina outlines in the quote above how, once enrolled in a therapeutic boarding school, her objections to school's treatment were not taken seriously. In this way, adult healthcare professionals can become gatekeepers of what is deemed true and reasonable. This system-wide epistemic injustice results in psychiatrised youth being refused control over their own narratives.

Resistance and reclamation

Therapeutic boarding schools function as 'total institutions', students at these schools are grouped as 'troubled teens' and live under the singular administrative authority of the school, where they have limited contact with the outside world, are not routinely allowed to leave school property and students reside in such schools for periods lasting several weeks to several years (Chatfield, 2018; Goffman, 1968). Therapeutic boarding school life is constructed around strict schedules, extensive rules and the reward/withholding of privileges. Therapeutic boarding schools are designed to re-socialise, to create a social environment that alters the mind-set and actions of individuals who live there. Yet, despite this stern institutional setting, young people find ways to resist.

Daily life in therapeutic boarding schools is devised into a set of rules, including if and who a student can talk to, what time a student wakes up and goes to sleep, what and when they can eat, as well as where and when they can enter various parts of the school campus. Students are constantly under surveillance by staff as well as fellow students, all of whom are required to report any breach of the rules. Rules and regulations can be so extensive that it may be difficult to avoid breaking them, especially as some rules can be arbitrary, inconsistently applied depending on interpersonal staff-student dynamics. In response, many students self-regulate their behaviour and conform out of fear of punishment (Scheff, 1984). Lukas discussed the rules and punishments he experienced in the therapeutic boarding school:

There was always [something] looming over you, all of these repercussions and punishments, and, you know, strict rules and . . . the consequences for everything. . . . Sleeping on a bed was privilege, one time [as a punishment] I was thrown into the hall on a mattress.

The excerpt above brings to the fore the chronic anxiety that Lukas experienced in the school, as he constantly feared punishment. When Lukas did break a rule, the punishment included tactics to publicly shame him, such as forcing him to sleep on a mattress in the hallway of his school. Strict rules and punishments would lead to many students deciding to 'keep their head down' and at least appear to be following the rules (Polvere, 2014).

Students found ways to subvert rules in ways that evaded detection. Therapeutic boarding schools create hierarchies of students, with 'upper level' students having more privileges than 'lower level' students. Students would be rewarded for good behaviour and following the rules by being progressed to higher privilege levels. Students would become competitive with each other, report fellow students' rule breaking and accuse peers of wrongdoing to divert attention from themselves. However, students also formed bonds with each other and together would find institutional workarounds. The therapeutic boarding school Christina went to did not permit students to exchange contact information, so Christina and her friends decided to develop a secret code between them. This code conveyed the information they would need to stay in touch outside of school. Christina explained,

I still keep in contact with them [my friends from school], which is a huge no, no. We weren't allowed to give each other phone numbers, addresses, nothing of that sorts. So, we found ways around it. See, the program taught me how to be really sneaky . . .

Christina and her friends would write fake book chapter titles to signify street names and numbers so they could be in contact once outside the school. Students found ways to act creatively as a means of resistance to bypass institutional scrutiny (Mills, 2014).

When young people felt unable to break the rules due to fear, students learned to resist in mind-set. Students would fake compliance as a means to subvert institutional expectations and expediate their release (Mills, 2014; Polvere, 2014). Jasmine described having 'good behaviour, despite inward dissent'. Similarly, Christina recalled,

I didn't work the program when I first got there because I'm like 'what the heck is this?' but then eventually you realise you've either got to fake it till you make it, you got to do something or you're not getting out.

The former students learned how to resist the strict environment without detection. Students would tell therapists what they thought they wanted to hear, dress and act according to expectations, carry out chores and follow the rules to progress through the programme, all while maintaining a subversive mind-set.

At times, students would choose to overtly break school rules and endure the consequences. Christina recalled seeing two female students kiss each other in private and when the students were caught they were punished by having everyday privileges revoked. Jasmine recalled a fellow student who refused to conform to the gendered expectations of the school:

[The therapeutic boarding school staff] gave her feminine clothes to wear. She refused them and so they let, they finally like let it go and let her wear like neutral, gender neutral clothes, like t-shirts and sweatpants.

As the quote from Jasmine demonstrates, non-normative gender expressions were actively discouraged at her school (LeFrançois, 2013; McCormick et al., 2017). The schools remove markers of social identity, especially if this identity is seen as socially undesirable. This encourages students to adapt to the norms of institutional life and develop a new identity. However, the schools were not always successful in achieving this. As an openly gay student, Lukas was a target for homophobic bullying from staff, but this homophobia did not shift his self-identity. Students were able to find ways to resist in their external behaviour and by holding on to their internal sense of self.

All three former students remain in touch with other students they met at school – and some of these connections have turned into lifelong friendships. Many former students have reconnected through online school 'survivor' groups. In the groups, students bonded over the extreme circumstances they endured together. They support each other and also collectively engage in making fun of the institutions that they once feared. Christina felt that former students could understand her experiences in ways that those who had not been there never could. She described her boarding school friends as 'like my soul sisters, one hundred percent, they're my bestest friends'. Friendships and community helped former students to affirm each other's experiences and craft collective narratives of what the therapeutic boarding school experience was like. Some former student groups have organised public awareness campaigns, written news articles, filed joint action lawsuits against the schools and lobbied the government to enforce industry reform (World Wide Association of Specialty Programs (WWASP) Survivors, 2019). Community support and awareness raising has formed a powerful means of disrupting the industry-sanctioned 'troubled teen' narrative.

While former students found ways to resist and survive in the schools, there are aspects of their experience with which they still struggle. Jasmine, Lukas and Christina continue to show the

effects of trauma from their time in therapeutic boarding schools. Among them, they reported chronic anxiety, ongoing nightmares about the schools, feelings of anger towards family members, struggling to make friends and trust people, and a need for ongoing counselling. Adjusting to life after leaving the schools was a long process for them academically, financially, socially and emotionally. Identifying the hardships they endured was an important part of their healing. Time and space away from the schools allowed them to redefine their experiences on their own terms. Years after leaving the therapeutic boarding schools, they have been in a process of reclaiming their stories (Costa et al., 2012). In interviews, the former students discussed wanting to participate in this research project as a way of getting stories like theirs known to the wider public.

Conclusion

Young people who have been psychiatrised and labelled as ‘troubled teens’ have socially transgressed sanist–adultist expectations of behaviour and emotionality. Epistemic injustice enacted on ‘troubled teens’ has troubling consequences for many young people who are placed in therapeutic boarding schools. Therapeutic boarding schools are facilities that are designed to control and minimise deviance among young people in their care. Former students recalled ways in which they resisted institutional constraints through faking compliance, subverting regulations and overt rule breaking. Many former students have contacted each other and built communities where they can share their experiences. These former students should be the key determiners of how we speak about the experience of ‘troubled teens’ in therapeutic boarding schools.


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