VOICES OF "PRIVILEGED" YOUTH: THE LIVED EXPERIENCES OF AFFLUENT, AT-RISK ADOLESCENTS IN RESIDENTIAL TREATMENT

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In memory of

T.E.B., W.A.M., and J.D.L.,

for inspiring and teaching me how to "dare to care" without reservation.

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Chapter I

INTRODUCTION

Researchers studying America's youth have documented the rising problems and risks for adolescents of this generation. In the past 25 years adolescent risk factors have dramatically increased (Behrens, 2006). Approximately one-third of public high school students fail to graduate (National Center for Higher Education Management Systems, 2006); illicit drug use, including prescription medications, is rampant (National Institute on Drug Abuse, 2012; Substance Abuse and Mental Health Services Administration, 2012); high percentages of youth are being diagnosed with emotional and behavioral disorders (Substance Abuse and Mental Health Services Administration, 2006); adolescent youth are being prescribed psychotropic medications at alarming rates (Brandeis University, 2006; Olfson et al., 2012); and disturbingly high percentages of youth engage in high-risk behaviors, such as carrying weapons, driving under the influence of alcohol and drugs, and attempting suicide (Centers for Disease Control and Prevention, 2013).

Mental Health Treatment for At-Risk Youth

High-risk adolescents can end up cycling through a chaotic maze of outpatient therapy, family therapy, drug rehab programs, and psychiatric hospitalizations—with each cycling through, feeling more and more demoralized and hopeless (McKinnon,

2008). Families of at-risk youth who consider residential treatment represent a uniquely difficult population, as they often have had a history of unsuccessful treatment in less restrictive options (Russell, 2007). They experience long-standing and challenging academic, legal, substance abuse, behavioral, emotional, and familial problems (Russell, 2007).

Though adolescents' mental and emotional needs have increased, families seeking intensive mental health services for high-risk youth are often met with lack of adequate options (Russell & Gillis, 2010). As a result of increased focus on managing care and containing costs for insurance companies, mental health systems have shifted towards crisis stabilization and medication management (Behrens, Santa, & Gass, 2010).

Oftentimes, adolescents with mental health crises are hospitalized for extended periods of time awaiting appropriate services (Russell & Gillis, 2010). An examination of healthcare services in four major U.S. cities showed that provider shortages and inadequate reimbursement rates were barriers to behavioral healthcare (McManus, 2003). The author stated: "severe shortages of mental health and substance abuse providers trained to care for adolescents were reported in all four cities" (McManus, 2003, p.16). The "continuum of care," which theoretically includes school-based mental health services, outpatient, inpatient, day treatment, and residential facilities, is often not available or accessible to families and youth in need.

For those who can and do seek help--it is often insufficient. For many high-risk adolescents, short-term treatment, including intensive outpatient therapy and psychiatric hospitalization, does little to remedy problems in the long-term (Russell, 2007). The increased demand coupled with the dearth of adequate mental health services for high-

risk adolescents has led to a rapid growth of private therapeutic programs (Russell & Gillis, 2010). Private therapeutic schools, residential treatment centers, and wilderness therapy programs have developed across the nation. While the total number of adolescents being served in these programs is unknown, estimates indicate as many as 375,000 may be seeking private residential treatment in approximately 1,500 known centers operating in North America (Russell & Gillis, 2010).

Though private therapeutic programs proliferate, many at-risk youth are placed in publically-funded programs, including residential treatment facilities, alternative schools, drug rehabilitation programs, and juvenile detention centers. Adolescents who attend private therapeutic programs typically come from families with financial resources to access them, typically the upper middle- to upper class (Behrens, 2006). The costs of these programs range from \$5,000 to \$10,000 per month; wilderness therapy programs cost, on average, \$500 per day with average stays of 6-10 weeks. In some cases medical insurance companies will cover a portion of the costs; however, more often the family will need to pay the entire bill.

Statement of the Problem

The need for comprehensive, clinically-sound therapeutic programs for at-risk adolescents is high. Researchers have stressed the need for studies focusing on the quality and effectiveness of such methods (e.g., Bettmann & Jasperson, 2009; Butler & McPherson, 2007). The National Association of Therapeutic Schools and Programs (NATSAP) has spearheaded a network of researchers to address the lack of solid research in this area, implementing multiple, large-scale, longitudinal studies of many private therapeutic programs (Behrens & Satterfield, 2006; Behrens, Santa, & Gass, 2010).

While these efforts are needed and promising, few of these studies take into account the thoughts and opinions of the primary consumers—the adolescents. Their perspectives are sorely needed to help shape programs, reduce drop-out rates, increase long-term effectiveness, and meet the core needs of this group. Many questions remain regarding the *process*, about which adolescents in treatment should have plenty to say. As Currie states, "what these adolescents have to say cuts to the heart of what is needed to improve the attractiveness and effectiveness of treatment for them" (2003, pp. 835). For private therapeutic programs, this means focusing on the specific needs of their clientele—affluent adolescents with a unique set of risk factors.

America's New "At-Risk" Youth

Introducing her book, *The Price of Privilege*, Madeline Levine (2006, p. 14), asks three questions:

Why are the most advantaged kids in this country running into unprecedented levels of mental illness and emotional distress?

Is there something about such factors as privilege, high levels of parental income, education, involvement, and expectations that can combine to have a toxic rather than the expected protective effect on children?

Why are children of privilege, in record numbers, having an extraordinarily difficult time completing the most fundamentally important task of adolescence—the development of autonomy and a healthy sense of self?

Levine draws from over a hundred studies on child development, anecdotal evidence, stories from clinicians and researchers, and her own experience working as a clinical psychologist for over 25 years with affluent children and adolescents, in an attempt to answer these questions. In fact, for the last decade, social scientists have only just begun to examine and document the disturbing trend in our American society: the rise of a

newly identified "at-risk" group. While a vast body of literature exists with regards to the emotional and behavioral problems of children in poverty, children from wealthy, financially secure homes have only more recently been identified as a unique group to be studied. Research has increasingly found that "upper-middle class youth, en route to the most prestigious universities and well-paying careers in America, are more likely to be more troubled than their middle-class counterparts" (Luthar, 2013, p. 1529). Researchers, led by Suniya Luthar of Columbia University's Teachers College, have found these adolescents "defy the stereotypes commonly associated with the term 'at-risk'...In spite of their economic and social advantages, they experience among the highest rates of depression, substance abuse, anxiety disorders, somatic complaints, and unhappiness of any group of children in this country...findings are new, consistent, and extremely disturbing" (Levine, 2006, p. 17).

Significance of Study

While there is a paucity of studies on at-risk youths' ideas, experiences, and perceptions with regard to the treatment they receive, we know even less about the experiences unique to affluent youth. To date, no research has sought to deeply understand the experiences of affluent youth utilizing mental health services in a residential setting. Given this population's higher-than-normal mental health risks (Luthar, Barkin, & Crossman, 2013) and their need for comprehensive mental health services, private therapeutic programs are likely to be utilized well into the future. Due to the variability in program quality, researchers must focus on questions of effectiveness, short- and long-term outcomes, and most importantly, adolescents' experiences. What difference do these programs make in the lives of affluent youth? How do they

experience "needing treatment" and growing up, during vital adolescent years, in a residential placement? What do *they* perceive works and does not? What unique needs might they have? What would they want professionals to know so we can best help them? An in-depth exploration of affluent, at-risk adolescents' perceptions of residential placement can provide a more complete answer to these questions.

Purpose of Study

The purpose of this study was to explore and understand the experiences of affluent, at-risk adolescents who needed long-term therapeutic residential treatment. Specifically, this study focused on individuals who, in their adolescence, successfully completed and graduated from a private, college-preparatory therapeutic boarding school. I was interested in gaining an in-depth, rich understanding of their journeys--in their own voices--which are not adequately represented in the literature. In Luthar's recent review and recommendations for research on affluent youth, she stated it is too early for researchers to "rush to traditional 'gold standards' of complex, multivariate statistical models" and that "adolescents' own reports must be at the center of this work; there must be concentrated focus on youths' phenomenological, subjective interpretations of their own realities" (Luthar et al., 2013, p. 19). Accordingly, this study utilized a qualitative approach, which was most fitting for these purposes because it allowed for an inductive, emergent design to unfold. I used a phenomenological framework, interviewing participants to gain a richer understanding of their own perspectives.

Research Question

The aim of this study was to understand the experience of therapeutic residential treatment from the youth's perspectives, particularly those from affluent backgrounds

who had attended and successfully graduated from a private therapeutic boarding school.

The guiding research question became:

What are the lived experiences of affluent, at-risk adolescents who attended a private therapeutic boarding school?

In addition to this central question, related areas of exploration included:

- How do they describe their experiences growing up and leading up to the time of therapeutic boarding school placement?
- How do they describe their experiences in therapeutic boarding school?
- How do they make sense of their experiences in therapeutic boarding school?
 What meaning does it have for them now?

Based on the review of the literature, I was particularly interested in how they described their experience with regard to their families, peers, communities, schools, and mental health services.

Definitions of Terms

To clarify the key constructs and terms used in this study, the following definitions are presented. These definitions have been chosen to reflect the prevailing understanding of the terms as used in the broader literature, and/or indicate how they have been used in this particular study.

Adolescent: Though definitions vary, for the purposes of this study I will refer to
adolescence as the life stage beginning at puberty and lasting until early
adulthood, typically between the ages of 10 and 21 years (Steinberg, 1996). The
participants in this study will have experienced the phenomenon of interest during
this time period, specifically during the mid- to late-adolescent period.

- Affluent: There is no agreed upon definition of affluence. For the purposes of this study and to be consistent with the majority of research in this area, the terms "affluent," "wealthy," and "socioeconomically privileged" will refer to those households and/or communities with median incomes greater than \$125,000 annually. The median income of American households was \$50,054 in 2011 (U.S. Census Bureau, 2011). In this study, affluence will be considered in the context of median family income, as well as parental education and occupation, more fully capturing the "culture of affluence," more generally described as educated, upwardly mobile, upper-middle class households.
- At-Risk/High-Risk: Consistent with research on risk and resilience, "at-risk" will be used to describe those who are statistically more likely to encounter certain problems compared to national normative samples given a particular set of variables. In this case, "at-risk adolescents" are those who are more vulnerable to emotional and behavioral problems than national norms.
- Therapeutic Boarding School (TBS): Also referred to as an "emotional growth boarding school," a therapeutic boarding school is a psychiatric residential setting with a stronger emphasis on academics and typically a longer length-of-stay than other residential settings such as psychiatric hospitals and residential treatment centers. Schools vary in average length-of-stay, types of students served, and treatment approach.
- <u>Twice-exceptional learner:</u> An individual who demonstrates a combination of high performance, ability, or potential in a gift or talent, with a disability that hinders the individual's ability to achieve to his or her fullest potential (Brody &

Mills, 1997, as cited in Kalbfleisch & Iguchi, 2008). A disability may be a learning disability as well as other disabilities including emotional and behavioral disorders.

Organization of Study

In this chapter, I provided the general framework of the study. I discussed the purpose of my study, the guiding research question, the significance of this research, and definitions of important constructs. In Chapter II, I provide an overview of the literature regarding normal adolescent development; unique risks for affluent youth; and residential treatment, including characteristics and experiences of adolescents in private therapeutic programs. In Chapter III, I describe the study's methodology in detail with an overview of the research paradigm, method, participants, instruments, and the procedures used to collect the data. I also provide a researcher positionality statement and detailed description of the data analysis method utilized in the study. In Chapter IV, I present the findings of the study, culminating in a combined "one voice" of the participants. Lastly, in Chapter V, I discuss these findings in the context of the literature, including implications for research and practice. I also review the study's limitations.

Chapter II

REVIEW OF THE LITERATURE

In this chapter, I review adolescent mental health in the context of typical adolescent development as conceptually addressed in the literature. I present a developmental framework for understanding adolescent psychological maladjustment or psychopathology, reviewing key lines of development. I then provide an overview of literature on affluence and its role in mental health, particularly amongst adolescent youth. Finally, I address the state of adolescent residential treatment in the U.S., paying particular attention to empirical research on private programs. The limited research on youth perspectives of residential treatment will be discussed, highlighting the importance of this study.

Adolescent Mental Health in a Developmental Context

Adolescence marks a time of transition, a key step on a developmental trajectory that stretches from birth to death. What happens during adolescence can be understood in light of what occurred in childhood, and can shed light--or cast a shadow--on the future adult years. It has oftentimes been considered a time of "crisis" by theorists, as adolescents deconstruct and reconstruct their identity, all the while balancing competing needs. Unfortunately, adolescence is often portrayed in a negative light—images of gang violence, school shootings, bullying, alcohol-related accidents, drug abuse, and suicides

often "make the headlines" in the popular media and even professional literature. Of course, adolescence is also a time of great potential, not only because of the adult years that lie ahead, but because of the neural plasticity and critical maturational window of the adolescent brain. Indeed, adolescence is the only time during an individual's life, aside from early childhood, that is ripe for impressive gains in development.

Though the second decade of life may no longer be looked upon as a period of "storm and stress" to be survived (Arnett, 1999), research suggests that the majority of mental and behavioral disorders have their beginnings in childhood and adolescence (Kessler, Burgland, Demler, Jin, & Walters, 2005; Leckman & Levanthal, 2008). Current statistics of adolescent mental health issues are alarming. Several studies show that adolescents are experiencing mental health problems at an unprecedented rate and intensity (Briggs, 2009; Leckman & Levanthal, 2008; Substance Abuse and Mental Health Services Administration, 2012). Understanding the best ways to facilitate psychological health and well-being among the adolescents of today will have farreaching effects on the adults of tomorrow.

To understand adolescent mental health issues one must be knowledgeable about the patterns of normal developmental change from birth to adulthood. Examining distortions in the developmental process can then be more accurately interpreted within this framework.

Typical Adolescent Development

Adolescence can be defined in terms related to physical and sexual maturity (i.e., puberty), social expectations (i.e., going to middle school or high school), or legal rights (i.e., being able to drive, vote, or enlist). It is a socially constructed phenomenon,

recognized as a distinct developmental phase by modern society; however, this was not always true. In the late eighteenth into the nineteenth century, the formal concept of adolescence began to be studied. G. Stanley Hall, an American psychologist, defined adolescence in his 1904 book entitled *Adolescence: Its Psychology and Its Relations to Physiology, Anthropology, Sociology, Sex, Crime, Religion and Education*. In the 21st century, there is some variation in the understanding of what adolescence is (and is not), not all reflective of the dominant themes that arose during earlier studies. For example, adolescence had long been viewed as time of "storm and stress," though this assumption has been challenged (Arnett, 1999).

It is generally accepted that adolescence spans the period of life between childhood and adulthood, taking place from approximately the ages of 10 to 21 years, roughly divided into early (10 to 13 years), middle (14 to 17 years), and late (18 to 21 years) adolescence (Steinberg, 1996). From a biological and physiological standpoint, the stage of adolescence is marked by increased physical growth, beginning of secondary sexual characteristics, and hormonal and emotional changes (Steinberg & Morris, 2001).

Adolescence has more often than not been understood in terms of overarching frameworks of dysfunction or maladaptation rather than an agreed upon general theory of normative adolescent development (Steinberg & Morris, 2001). This is likely due in part to earlier beliefs that adolescence was necessarily a time of stress and crisis. The focus on atypical development in adolescence has no doubt added to our current understanding of normal development. Indeed, the rise of developmental psychopathology and many longitudinal studies devoted to understanding dysfunction in adolescence (e.g., Farrington, 1995; Rutter, 1989) have played a critical role in more fully understanding

the normative trajectory of adolescence (Steinberg & Morris, 2001). Because adolescents are still growing and developing, it is important to think along "developmental lines" rather than adhering to a strict medical-model of diagnosis and treatment. Adolescents are still maturing in their thinking, sense of time, psychological separation, empathy, and ethical reasoning (McKinnon, 2008). While there are recognizable markers along the way, adolescents vary in the rate of developmental progress.

For the purposes of this study, predominant developmental theories and concepts will briefly be summarized. Particular emphasis will be on the contributions of Robert Kegan's "evolving self," which builds upon the classic developmental theories of Piaget, Erickson, Kohlberg, and others. While the enormous physical changes during adolescence cannot be underestimated, as they are accompanied by significant changes in hormone production, neurochemistry, and brain structure, this review will concentrate solely on psychosocial, cognitive, emotional, and moral development in adolescence.

Thinking along Developmental Lines

Several key theories of development and developmental stages have informed many who work with children and adolescents. Though there are many significant contributions to the field, the following list highlights foundational concepts in the developmental literature:

- Sigmund Freud's description of childhood psychosexual stages;
- Jean Piaget's description of cognitive stages in childhood;
- Margaret Mahler's description of separation and individuation in early childhood;
- Heinz Kohut's description of object relations, or the development of interpersonal relationships;

- Robert Kohlberg's description of moral reasoning development;
- Erik Erikson's description of psychosocial crises, which span the entire life span;
 and,
- Robert Kegan's synthesis of multiple developmental lines, describing the evolution of the self in five stages or "orders of mind."

A developmental line follows in chronological steps, in a particular sequence of stages that are linked and fixed (McKinnon, 2008). To summarize the key developmental lines that will be described further, I've included the following table (taken directly from McKinnon 2008, p. 90):

Table 1

Key Developmental Lines

Age	Life Stage	Thinking	Time	Empathy	Separateness	Ethics
0-18 mo.	Infant	Sensorimotor	Now	Self-Aware	No other/	None
				Only	Fused	
18 mo	Toddler	Magical	Magical	Self-	Puppet	Avoid
5 yrs			Future/Past	Preoccupied	[Magical]	Punishment
6-12 yrs	School	Concrete	Clocks &	Pseudo-	Puppet	Win
	Child	Logic	Calendars	Empathy	[Practical]	Rewards
				["Like me!"]		
13-18 yrs	Adolescent	Abstract	Pragmatic	True	Separate	Abstract &
			(Goals,	Empathy	Relationships	Social
			Plans)			

Psychological Development

Erik Erikson, a developmental psychologist and psychoanalyst, is best known for his mapping of eight sequential "psychosocial crises" of the human life span.

Complementing Erikson's developmental stages is Robert Kegan's contemporary constructive-developmental theory (1982). Kegan's theory focuses on the emergence of the self over the entire lifespan including adulthood. His work is instrumental in

understanding the processes leading up to adolescence, as well as the stages that can—but don't inevitably—evolve after adolescence. Kegan describes psychological growth as an on-going, dynamic process between the self's psychological capacities and environmental demands. Like cognitive development, psychological growth develops in complexity as people "embedded in their own subjective perspective," gain a more abstract appreciation for the perspectives, feelings, needs, and rights of others. This development is shaped by experiences in the environment. Kegan proposes five stages of mental complexity, or "orders of mind," which are qualitatively different from one another.

Table 2

Kegan's Orders of Mind

Typical Ages	Developmental Stage/ Order of Mind	Object: Content of one's knowing	Subject to: Structure of one's knowing	Underlying Structure of Meaning- Making
Toddler-6 yrs	1st Order:	One's reflexes	Impulses,	Single point
	Impulsive Mind		perceptions	
6 years-	2 nd Order:	Impulses,	One's needs,	Categories
Adolescence	Instrumental Mind	perceptions	interests, desires	
Post-	3 rd Order:	One's needs,	Interpersonal	Across
Adolescence	Socialized Mind	interests, desires	relationships,	Categories
			mutuality	
Variable, if	4 th Order:	Interpersonal	Self-authorship,	Systemic
achieved	Self-Authoring	relationships,	identity,	
	Mind	mutuality	ideology	
Typically	5 th Order:	Self-authorship,	The dialectic	System of
>40, if	Self-Transforming	identity,	between	systems
achieved	Mind	ideology	ideologies	

Erikson states that the most important psychosocial crisis of the adolescent period is centered on developing one's sense of identity or self. In Kegan's terms, it is developing into the second order, or "Instrumental Mind," and into the third order of mind, the "Socialized Mind," by the end of adolescence or early adulthood. Both theories highlight

the importance of interpersonal relationships in the development of the self. It is common for adolescents to "try on" various identities and roles during this time, as they experiment with different values, beliefs, and roles. The biological changes of puberty play an important role during psychosocial development as well, as adolescents experience increased awareness, and often times insecurities, surrounding their budding sexuality. Body image is a preoccupation of adolescents, and if not handled well, can lead to low self-esteem, poor body image, and disorders of eating and exercise. Adolescents can experience increased psychosocial stress if they experience premature, as well as delayed, sexual maturation. Peer influence—both approval and rejection—is a strong source of validation during this time, and adolescents are typically more self-conscious of their physical appearances and social behaviors.

In addition to physical changes, a psychological separation in terms of identity must occur during this phase—to individuate and separate. As a child grows up, the quality of understanding the "self-other" relationship—or *you* as separate from *me*—changes over time. Important development in relating the self to others also follows in developmental lines. Psychologists who have focused on object-relations, dependence, and attachment point to critical periods, as well as critical relationships, that have significant impact on the developing child (Kegan, 1982; Kohut, 1971, 1977; Mahler, Pine, & Bergman, 1975). In infancy, the self can be said to be *fused* with the other so that there is no psychological sense of separation between child and mother. As the baby grows to be a toddler, the mother is experienced as partially separate, as Kohut called it a "part-object." She is simply an extension of the child; a child expects that mother will

magically anticipate and meet his needs. This "self-ishness" is normal, from a developmental perspective, for a child of this age and stage.

By early adolescence, a shift towards recognizing the separateness between child and parent ("other") begins to happen. Adolescents and their parents often experience heightened conflict during this stage. Differentiating oneself from the family, deciding who one is and who one is not, is important as one grows and develops a unique identity. During this time, young adolescents begin to go to their peer group for the support and guidance they once sought from family. They also begin testing out new values and beliefs, perhaps challenging the values their parents sought to instill. Peer pressure is powerful during this time. Eventually, they will also need to differentiate themselves from the "group think" of their peer community, as much as they differentiate from their parents' values. Typically by late adolescence in a healthy adolescent, the individual has integrated aspects from their family of origin, conflict with family has decreased, and a strength of ego and identity has emerged within the peer group.

Finally, as adolescents become more emotionally mature and secure in who they are, they move into more intimate relationships, which often include romantic interests.

Older adolescents become capable of mutual, healthy, interdependent relationships with others, including other adults (e.g. teachers, bosses, co-workers, acquaintances, parents). They have learned that other people are not merely objects to be used, which is characteristic of toddlers and children. Mature adolescents recognize the separateness of beings, and therefore, develop true empathy. When adolescents have successfully navigated this stage, they are ready to move to the next stage of early adulthood. This naturally extends the psychosocial challenges in the realm of deep, intimate relationships.

These adolescents emerge with a sense of individuality and an understanding that they have unique value and worth to others and society. Adolescents who do not successfully navigate this stage become developmentally "stuck," posing an obstacle for developing healthy, intimate relationships in adulthood. These adolescents are characterized by immaturity, intolerance for differences in others, and unhealthy dependence on cliques or gangs for peer affiliation and external validation (Erikson, 1968; Thomas, 1996).

Cognitive Development

Jean Piaget (1896 - 1980), a developmental psychologist and the first to systematically study cognitive development, believed that children's cognitive abilities developed as a result of both biological maturation and environmental experience. He identified four progressive stages of cognitive development, which are outlined below; I've also included McKinnon and Kegan's terms (in italics).

Table 3

Piaget's Stages of Cognitive Development

Age Stage of Development		Key Feature	
0-2 years	Sensorimotor	Object Permanence	
2-7 years	2-7 years Preoperational		
	Magical [Protean Categories]		
7-11 years Concrete Operational		Conservation	
Concrete Logic [Durable Categories]			
11 years + Formal Operational		Abstract Reasoning	
	Abstract Logic [Cross-Categorical]		

Piaget believed these stages are universal though not rigidly held to any particular age (though the age ranges are typically given as a guideline). Piaget's theory states that mental structures, or schemas, change as a child's thinking capabilities mature. During the adolescent years, a child moves from *concrete operational* to *formal operational*

thought, or abstract thinking. Kegan referred to this ability as "cross-categorical" thinking, and McKinnon describes this stage as the "crown jewel of cognitive development" (2008, p. 66). In the early transition into adolescence, thinking is still characterized by concrete thinking, egocentrism, and impulsive behavior. By middle adolescence, most teenagers' abstract reasoning skills begin to develop, allowing them to hold in mind multiple ideas and perspectives at the same time. This newfound capability not only transforms adolescents' academic performance, but their social capacities as well.

Self-reflection or contemplative thought begins to emerge during this time.

Related to this is a developing sense of empathy and awareness of others as separate beings with their own unique thoughts, feelings, beliefs, values, and motivations. (I will review this in more detail later.) While these are largely positive changes, an adolescent's ability to see new and different abstract connections can also lead to uncertainties, self-doubt, and inadequacy as their once held beliefs and values are challenged. As they become more aware of others' perceptions, they may also be faced with feelings of guilt and shame regarding their own shortcomings.

Finally, adolescents can and do learn how to be less impulsive as they mature. However, the frontal lobe-- responsible for rational thinking and forethought--is not completely developed until the early to mid-20s. The frontal lobe is an important brain structure involved in executive functioning, including reasoning, planning, organizing, strategizing, working memory, and problem solving. Learning experiences in the environment are instrumental in developing these executive functioning skills in adolescents. One key aspect is the ability to conceptualize and plan accordingly with

relation to the past and the future. Having this future orientation is critical when adolescents need to set goals and make realistic plans to reach those goals (e.g., doing well in high school in order to attend college). Whereas toddlers engage in "magical" thinking and school-age children use concrete, logical thinking about time, adolescents begin to develop an increased capacity for thinking abstractly about time. For example, they can imagine adults having once been children; they can begin to conceptualize a future version of themselves, which can translate into practical "now" steps that will help them reach that future destination. This future orientation also allows for adolescents to begin anticipating the possible consequences for their actions (Inhelder & Piaget, 1958), which over time, helps them to become less impulsive in their decision-making.

Moral Development

Lastly, as children grow in their cognitive, emotional, and social capacities, so do they grow in their capacity for moral reasoning. Lawrence Kohlberg's six-stage theory of moral reasoning is the most widely used theory in research on moral development, despite criticism from several perspectives (e.g., Gilligan, 1982; Haidt, 2001). Kohlberg's theory states that at the youngest of ages, children operate at a *pre-conventional* level, basing moral decisions primarily on the avoidance of punishment. This way of reasoning reflects the concrete thinking and limited sense of time (i.e., "now" focus) characteristic of this stage. School-age children can begin to conceptualize time, at least concretely, so that they can begin to work towards earning rewards for good behavior. Simple positive reinforcement goes a long way with this age group. Many adolescents reach the *conventional* stage, which reflects living up to social norms and maintaining social order. As adolescents mature and begin to think more abstractly, they

have increased potential for higher levels of moral reasoning. In Kohlberg's theory, the highest level, the *post-conventional* stage, is based on abstract, universal ethics and principles. While adolescents who have fully developed abstract reasoning have the potential for reaching this stage, it is not inevitable that they all will.

Adolescents' moral development is based upon both their cognitive and psychological growth to that point. Abstract reasoning allows a higher level of complexity in moral reasoning, while psychological development towards a healthy, psychological separation and sense of self allows an adolescent to experience true empathy for others. For example, an individual may have strong abstract reasoning abilities and, therefore, can answer moral dilemmas showing a highly developed moral system. However, this same individual may or may not necessarily act in a way consistent with his or her reasoning abilities, particularly if the person is not as developed emotionally or socially.

In summary, adolescence is a time of great growth and development in multiple areas: physical, emotional, social, cognitive, and moral. These domains influence one another, and the environment plays an instrumental role in shaping an individual. While adolescence poses great opportunities for more complex thinking, understanding, feeling, and psychological maturity, each developmental skill is not necessarily attained by adulthood. However, in a healthy trajectory, a child will progress through adolescence having successfully developed a sense of self and a set of abilities to draw upon in adulthood.

The Role of Affluence in Mental Health

New research gives evidence to the rise in psychological and behavioral problems amongst affluent youth, typically occurring at the onset of adolescence (Luthar, 2013). Affluent adolescents must navigate the same developmental stages as other youth; however, they appear to be at greater risk for obstacles to healthy development due to certain ecological, cultural, familial, and individual processes.

Historically, developmental research focused primarily on white, middle-class children and families. In the 1950s, developmental scientists began to recognize that these findings could not necessarily be generalized to children who came from economically impoverished backgrounds. In the decades that followed, newly directed empirical research focused on the unique risks of this population (Huston, McLoyd, & Garcia Coll, 1994). Subsequently, we have seen significant advancement in the uncovering and understanding of the unique issues of children from low-income, or low socioeconomic status (SES), backgrounds.

This focus on low-income youth has broadened our understanding of developmental processes, in general, and has led to more ecologically-oriented frameworks, promoting changes in educational, psychological, socio-economic, and medical or health services-related approaches. Until more recently, however, few research studies had been conducted on the other extreme of the socioeconomic strata—youth of high SES or affluent backgrounds. The dearth of literature on affluent youth in psychological literature is most likely due to several assumptions including: 1) wealthy communities have lower incidences of mental health disorders; 2) wealth buffers individuals from psychological issues; 3) wealthy populations are characteristically

similar to those in the middle-class, and 4) wealthy communities, due to their abundant resources, are less deserving of research funding compared to low income "at-risk" populations (Bradley & Cornwyn, 2002; Luthar, 2003). A developing body of research has begun to challenge these assumptions, showing that youth growing up in affluent communities are not immune to psychological risks and may in fact, be more vulnerable to them.

Defining "Affluence"

Before reviewing the literature on this population, clarification of key terms is necessary. Affluence is a relative term, with no set definition or precise guidelines. However, it generally refers to the economically wealthy, as compared to a given reference group. The United States Department of Commerce's Bureau of the Census gives statistical data on the various economic groups in America. The upper class is typically defined as those in the top 1% with household incomes exceeding \$250,000 annually. Marketing corporations often categorize households with incomes exceeding \$75,000 as "mass affluent."

While the construct of "affluence" can be defined using multiple perspectives, this current review is based largely on definitions that have been used in the majority of research to date. Luthar and colleagues have collectively done the most work in this area, and so I turn first to the description of their samples:

Our samples have been from communities predominated by white collar, well-educated parents. They attend schools distinguished by rich academic curricula, high standardized test scores, and diverse extracurricular opportunities; as a group, they are bound for some of the most selective colleges and ultimately, among the most high status jobs. In these communities, parents' annual incomes are well over twice the national average, with median estimates of \$110,000-155,000. In our past reports, we have interchangeably referred to these samples as affluent, socioeconomically privileged, or of high SES—which, on average, they

clearly are—although within any given community, there are inevitably variations of family income (just as there are for children in poverty) (Luthar et al., 2013, p. 1).

From this standpoint, affluence, like poverty, is conceptualized more broadly than family income. Though it is one important indicator, it is not sufficient. In much of the literature on affluent youth, samples have focused on "upwardly mobile, upper-middle class communities" (Luthar et al., 2013), signifying a focus on a particular culture and set of values which may or may not be similar to those of middle-class and low-SES communities. For this reason, in addition to gathering data on family income, researchers have also collected data related to parent education and occupation, financial resources (including savings), average family income-to-needs, family situation, and self-identified social class (Hanson & Chen, 2007; Harrell, Huang, & Kepler, 2013; Lund & Dearing, 2012; Luthar et al., 2013).

While income is not the only factor to consider, for the purposes of this overview, it should be noted that most studies sampled youth who lived in communities or families with incomes well above the national average, typically over \$100,000 annually (which, depending on the year, was two to three times the national average). While this threshold is different from other more selective definitions of affluence (e.g., top 1% of the population), this definition captures middle to upper income households, characterized by "high-achieving, hardworking, and/or two-income families...without the seven-figure salaries" (Koplewica, Gurian, & Williams, 2009).

Defining "At-Risk"

The literature on risk and resilience offer a conceptualization of "at-risk" that is based on statistical probabilities that problems are more likely to occur in the presence of certain conditions (Luthar, Cicchetti, & Becker, 2000; Masten, 2001). That is, a particular

condition (e.g., poverty) does not predetermine difficulties, but makes youth more vulnerable. As will be reviewed in the following section, the growing body of research suggests that, while not all affluent youth are distressed, an unusually high proportion of them are experiencing psychological maladjustment when compared to national norms, including anxiety, depression, non-suicidal self-injury, delinquency, and substance abuse (Luthar, 2006; Luthar, Barkin, & Crossman, 2013; Luthar & Goldstein, 2008; Luthar & Latendresse, 2005; Racz, McMahon, & Luthar, 2011; Yates, Tracy, & Luthar, 2008). For this reason, this group of adolescents can be described as more vulnerable or "at-risk" for certain psychological and behavioral problems.

Psychological Maladjustment in Affluent Adolescents

The following discussion of the literature outlines studies conducted over the past 15 years. The research on affluent adolescents emerged largely as a result of unforeseen findings from investigations conducted by Luthar and her colleagues in the mid- to late-1990s. They were looking at social competence and psychopathology among adolescents, with a particular focus on resilience in youth in poverty (Luthar, 1997). In a study hoping to understand the impact of the ecology of urban poverty on behavioral nonconformity, a comparison group of youth from a highly affluent community in the northeastern United States was used (Luthar & D'Avanzo, 1999), which later caught the researchers' attention.

In this comparative study of almost 500 tenth graders in suburban and inner-city schools startling findings emerged concerning the youth from high-SES backgrounds. First, the suburban students reported significantly higher levels of anxiety symptoms and cigarette, alcohol, marijuana, and hard drug use, as well as marginally higher levels of

depressive symptoms as compared to inner-city students. In addition, the suburban girls reported clinically significant levels of depression at a rate three times that of national normative samples. That is, more than one in five, or 22%, reported depressive symptoms compared with 7% of the normative samples. In addition, rates of anxiety in both boys and girls were higher than normative samples (22% and 26%, versus 17% respectively). Finally, substance use was much higher in the suburban sample compared to normative samples. This was particularly true with regards to alcohol use among girls (72% versus 61% in normative samples) and illicit drug use among boys (59% versus 38% in normative samples) (Luthar & D'Avanzo, 1999). What's more, in the suburban group, substance use was significantly linked with indicators of self-reported maladjustment, whereas this was not found with the inner-city group. The researchers hypothesized that this trend may reflect a tendency for affluent adolescents to use substances to selfmedicate, i.e., to manage the symptoms of anxiety and depression they reported. Finally, with affluent boys only, there appeared to be a strong link between peer endorsement and substance use. This link between suburban boys' peer popularity and their substance use was found to be significant even after controlling for possible confounding variables.

This same group was followed through high school in order to examine the stability or continuity of problems. The findings from this study suggested that the incidence of problems generally increased over time, which goes against the oftentimes assumed stance of a "natural maturing out" of problem behaviors. Results, which were derived from 90% of the original sample, indicated an increase in the incidence of clinically significant symptoms of anxiety among girls (i.e., from 1 in 5 to almost 1 in 3 by the end of high school) and an increase in the incidence of heavy drinking (to

intoxication) and marijuana use with both girls and boys. Overall, results confirmed earlier findings that adolescents in wealthy suburban families reported higher levels of psychological distress and maladjustment, including substance use, when compared to national normative samples (Luthar & Latendresse, 2002).

This initial study raised an alarm, prompting several studies that followed. Luthar and Becker (2002) then examined developmental trends in a group of affluent, suburban 6th and 7th grade students. This cross-sectional study confirmed the earlier findings of elevated depressive and clinical significant anxiety symptoms, but only amongst the 7th grade girls. With regards to substance use, rates tripled in both genders between 6th and 7th grades. Similar to the earlier findings (Luthar & D'Avanzo, 1999), associations between internalized distress and substance use were found in this sample, bolstering the preliminary hypothesis of self-medication among affluent, suburban adolescents (Luthar & Becker, 2002). Researchers also focused on two major variables, achievement pressures and disconnection from parents, to examine possible antecedents of distress. Results showed that distress was most linked to maladaptive perfectionism (in all groups but particularly amongst girls), parent values (amongst 7th grade girls), lack of afterschool supervision (amongst 7th graders), and with closeness to both parents (amongst 6th grade boys and 7th grade girls). They found that substance use was strongly linked to maladaptive perfectionism and low closeness to mother (amongst 7th grade boys), and to lack of after-school and low closeness to mother (amongst 7th grade girls). Interestingly, perceived academic pressures from parents was not linked to actual academic success (a finding different from studies on low-income youth); however, it was significantly correlated to students' self-reported distress.

Subsequent studies over the past decade have replicated many of these findings. For example, Luthar and Goldstein (2008) found similar rates of high substance use in a different Northeast suburb school, when examining the importance of certain variablesperceived parental containment and commitment--in the use of substances amongst affluent 10th graders. Parental containment was defined as "beliefs that particular deviant behaviors would elicit stringent disciplinary repercussions from parents" (Luthar & Goldstein, 2008, p. 591). In addition to finding that this sample of teenagers believed their parents to be far more tolerant of their substance use than for other behaviors (e.g., stealing, academic problems, and rudeness), they found even less perceived parental containment in a subset of students engaging in much more than "experimental use" of substances. Other researchers have found similar results amongst high-SES, primarily Caucasian communities, including high rates of alcohol and marijuana use, and bingedrinking (Botticello, 2009; Patrick, Wightman, Schoeni, & Schulenberg, 2012; Reboussin, Preisser, Song, & Wolfson, 2010; Song et al. 2009). The Monitoring the Future Study has also found a strong correlation between SES and substance use by the end of high school, with upper-SES youth engaging in the highest usage of marijuana, inhalants, and tranquilizers (Johnston, O'Malley, & Bachman, 1998). Similar patterns with regards to alcohol use been shown at the college level as well (Hanson & Chen, 2007; Harrell, Huang, & Kepler, 2013), suggesting that these problems do not simply disappear once these adolescents leave home and attend college.

In addition to high rates of substance use, the growing literature has indicated marked externalizing or behavioral issues amongst affluent teenagers. In particular, elevated rule-breaking has been documented, particularly amongst boys. Luthar and

Ansary (2005) found similar rates of delinquency in two comparison groups: affluent, suburban and very low-SES, inner-city youth. While the rates of rule-breaking were similar, the form of rule-breaking differed, with inner-city youth participating in more behaviors related to self-defense (e.g., carrying a weapon), and affluent youth engaging in more "random" forms of rule-breaking (e.g., stealing from family and friends). In addition, Lund and Dearing (2012) examined whether family or neighborhood income predicted maladjustment and found that delinquency was high amongst boys living in affluent neighborhoods but not necessarily amongst those from affluent families.

The documented high rates of internalizing problems, such as anxiety, depression, self-harming behaviors, and somatic symptoms, has been shown in groups of both girls and boys from affluent backgrounds (Luthar & Barkin, 2012; Luthar & Becker, 2002; Luthar & Goldstein, 2008; Yates, Tracy, Luthar, 2008). Again, when Lund and Dearing (2012) looked at the impact of affluence at the neighborhood level, they found it to be associated with high anxiety and depression among girls. They did not, however, find a correlation between internalizing symptoms and income at the family-level of analysis.

These studies have not only documented the rates of maladjustment amongst affluent teens, but have examined multiple pathways, antecedents, and vulnerability factors. For example, researchers found that extra-curricular activities did not appear to have a negative effect on affluent students' adjustment problems, running contrary to commonly held assumptions that suburban adolescents are "overscheduled" (Luthar, Shoum, & Brown, 2006). In fact, they found perceived pressures from parents had a much greater impact on students' maladjustment--specifically, parental criticism, high achievement expectations, and putting a high value on getting ahead as opposed to

personal character (Luthar, Shoum, & Brown, 2006). Other vulnerability factors have pointed to key parent variables such as: parental containment and commitment with regards to substance use (Luthar & Goldstein, 2008); parental supervision and knowledge of their teens' activities (Luthar & Barkin, 2012; Luthar, Shoum, & Brown, 2006); parental criticism (Yates, Tracy, & Luthar, 2008); and low parental closeness (Luthar & Barkin, 2012; Yates, Tracy, & Luthar, 2008).

Finally, what happens to affluent youth after they graduate high school is under early investigation. While reports have shown high SES to be consistently linked to increased rates of drinking in college (Harrell, Huang, & Kepler, 2013; Wechsler, Dowdall, Davenport, & Castillo, 1995; Wechsler & Kuo, 2003; Wechsler & Nelson, 2008), other researchers have noted an increase in psychological maladjustment in college students. While not necessarily examining trends related to socioeconomic status, Marano's (2008) survey data and in-depth interviews showed that college counseling centers reported unprecedented rates of serious psychiatric issues in incoming students, including not only substance abuse problems, but unipolar and bipolar depression, anxiety, eating disorders, and non-suicidal self-injury. The report stated that student mental health is now considered "one of the top five critical issues on campuses" nationwide (Marano, 2008, p. 144). College counseling centers are finding that in many ways, they are unprepared with the heightened demands and intensity of needed services amongst college students of this generation.

Altogether, research on affluent youth has been conducted using several methodologically strong studies, with consistent use of multiple informants (self, teacher, and peer reports), multiple methods, psychometrically sound assessments, cross-sectional

and longitudinal designs, and person- and variable-centered analyses. Often times, these studies have followed cohorts of hundreds of students over the course of 3 or more years in high school. Many of the limitations have focused on the tendency toward crosssectional designs, the reliance on self-reports (though this is considered the best approach when working with adolescents), and attrition over long time periods resulting in missing data. Most of these studies have also looked at entire schools without collecting or examining within-group differences with regards to income level. Finally, much of the initial research was conducted on communities in Northeastern suburbs, mainly as a function of the researchers' geographical location and because educators and leaders in these communities reached out for assistance. More recently, Luthar's group examined areas outside the Northeastern region to include a Northwest suburb and East Coast city (Luthar & Barkin, 2012) to assess the generalizability of their findings. They found a disproportionately high incidence of maladjustment (e.g., substance use, internalizing and externalizing problems) across all three samples, but also found interesting differences in the types of maladjustment highlighted in each area. For example, the East coast samples showed heightened substance use while the Northwest sample showed more serious internalizing and externalizing symptoms.

To summarize, a growing body of literature has illuminated the degree and extent to which affluent youth are at heightened risk for psychological maladjustment, as compared to national norms and, in some cases, low income "at-risk" youth. These problems include high rates of substance use, delinquency, anxiety, depression, and self-harming behaviors. These findings have been shown across multiple geographical settings, and there is early evidence to suggest that these problems continue into college.

Etiology

The growing evidence on maladjustment amongst affluent youth begs the question, "Why does socioeconomic 'privilege' seem to be a psychological risk factor?" Researchers have explored this topic from various perspectives, including the ecological context, cultural values of materialism and individualism, community- and individual-level processes, generational differences, peer values, pressures to achieve, and parental behaviors (see Luthar et al., 2013, for a comprehensive review).

Ecological Factors. Several psychologists have examined the link between wealth and subjective well-being, finding a negative relationship (Buss, 2000; Diener, 2000; Myers, 2000b; Nesse & Williams, 1994). In the United States, though the adjusted income has more than doubled and material luxuries have increased over the last 50 years, subjective well-being has stayed relatively consistent (Diener, Diener, & Diener, 1995; Myers, 2000; Myers & Diener, 1995). This trend can be found in other nations as well, such as England, France, Japan, China, South Korea, and Singapore (Diener & Oishi, 2000). Higher rates of depressive disorders are found in countries that are more economically developed. Meyers (2000) wrote: "We are twice as rich and no happier. Meanwhile, the divorce rate doubled. Teen suicide tripled...Depression rates have soared, especially among teens and young adults...I call this conjunction of material prosperity and social recession the American paradox. The more people strive for extrinsic goals such as money, the more numerous their problems and the less robust their well-being" (p. 102).

The negative link between national economic wealth and feelings of happiness or well-being seem to be related to social comparison and pressures (Csikszentmihalyi,

1999; Myers, 2000). For example, people in poor countries, where basic needs are not always met, feel happier as a result of being relatively wealthier (Veenhoven, 1991), though these feelings diminish when comparisons are made to wealthy nations (Myers, 2000). In countries where basic needs are generally met, wealth and happiness do not seem to be highly correlated (Lykken & Tellegen, 1996; Myers, 2000), leading some to hypothesize that income is not a good predictor of happiness at the individual level while it may be so at the national level (Diener, Sandvik, Seidlitz, & Diener, 1993). Finally, a study of nearly 1,000 American teens found that their happiness was negatively associated with their parents' SES, including education and occupational status (Csikszentmihalyi & Schneider, 2000).

The Culture of "Affluenza." To further explain this phenomenon, researchers have focused on the role of culture, images in mass media, and the often accompanied social pressures, which can quickly lead to unrealistic expectations and frustration amongst individuals (Buss, 2000). Many have written about the risk of the "hedonic treadmill" (Brickman & Campbell, 1971; Diener, Lucas, & Scollon, 2006), which describes the repeating cycle of rapid habituation to new wealth. In addition, a culture that values materialism and supports this with mass advertising, contributes to what some writers have called the epidemic of "affluenza" or the culture of affluence (Luthar, 2003; Koplewicz, Gurian, & Williams, 2009). A culture of affluence and materialism teaches that wealth and goods bring happiness. A strong sense of individualism can also contribute to individuals' unhappiness as social units are not as stable. As cross-cultural researcher Triandis (1994) pointed out, people can float from one social group to another without being fully committed to any group. Schwartz (2000, p.85) also stated, "The

more we are allowed to be masters of our fates in one domain of life after another, the more we expect to be...In short, life is supposed to be perfect." When perfection isn't experienced, people in individualistic cultures are more apt to take the blame rather than look to external reasons for the failures. Seligman's (1975) work on learned helplessness and causal attribution help explain why this sort of cultural way of thinking can lead to increased rates of depression.

Individual-Level Processes. Luthar and colleagues (Luthar, 2003; Luthar & Latendresse, 2002) have written extensively on the factors that may lead to diminished well-being in affluent cultures, both at the level of the individual and the community. These "individual-level processes" include limited leisure time and heightened stress levels often associated with over-investment in personal and professional ambitions compared to other activities. The focus on extrinsic or external rewards, particularly that of acquiring more wealth and materials goods, as well as reaching for a high level of professional status, leaves little time and energy for developing intimacy in personal relationships. In fact, focusing on extrinsic rewards may actually leave individuals less sensitive to other typically-rewarding experiences. As Csikszentimihalyi stated, "...to the extent that most of one's psychic energy becomes invested in material goals, it is typical for sensitivity to other rewards to atrophy" (1999, p. 823, as cited in Luthar & Latendresse, 2002). Finally, individuals surrounded by wealth may also be more prone to envying the luxuries of others, leading to negative emotions about self and others. In summary, a general lack of balance in priorities results in many of the pitfalls of affluent cultures.

Community-Level Processes. Luthar (2003) also describes possible community-level factors that leave individuals vulnerable to psychological difficulties, particularly loneliness and isolation. For example, wealthy individuals can remain relatively anonymous in their day-to-day lives. They do not need to mutually depend on one another for support as do those who find themselves of more limited means. Connections and communication can often be kept on relatively superficial, polite levels of interaction. This social environment results in limited experiences of community and social connection on a deeper level, unless individuals proactively seek this out on their own. Wealthy people are also often immersed in competitive structures that, in fact, make it more difficult for mutual, trusting relationships to form. Finally, the physical design of many wealthy, suburban communities and neighborhoods may contribute to distance and isolation.

"Generation Me": Cohort Differences. In addition to ecological and cultural factors, much has been written about the unique attributes of the generation often referred to as the "Millennials" or "Generation Me," defined as those who were born sometime after 1980 and coming to age in the 1990s and 2000s (Twenge, 2006). Comparisons of survey data from this generation and previous generations show an increased value focused on financial and professional success, with accompanying diminished value in developing a meaningful life philosophy (Twenge, 2006). Reports of generational trends also include an increase in internalizing symptoms, cheating, narcissistic traits, and beliefs of external locus of control (Twenge, 2006). Growing up with quickly advancing technology and use of social media may create challenges for many of this generation to learn skills in developing and maintaining lasting, intimate relationships (Akhtar, 2011).

Lastly, there is some suggestion that parents of this generation tend to over-involve themselves in problem-solving for their children, leaving this generation feeling more anxious and less competent in dealing with day-to-day life problems, particularly as they leave home and go to college (Marano, 2008; Twenge, 2006).

The Role of Peer Pressure. In adolescence, peers play a strong role in transmitting values and norms. Certain peer values and norms have been shown to play a significant role in the development of at-risk behaviors among affluent youth, particularly those related to substance use, aggression, sexual behavior, and physical attractiveness. For example, a strong correlation between substance use and high peer status has been documented amongst middle-school and high-school boys in suburban settings, even after statistically controlling for multiple confounds (Becker & Luthar, 2007; Luthar & D'Avanzo, 1999). To a lesser degree, peer values and status are also correlated with girls' substance use. Substance use, to the point of inebriation, is seen as the norm (Mason & Spoth, 2011), not only in high school but increasingly so as these adolescents transition to college (Harrell, Huang, & Kepler, 2013; Marano, 2005). While experimentation with substances is common among all adolescents, the accessibility and degree to which affluent youth abuse substances is much higher than the norm (Hanson & Chen, 2007; Luthar & Barkin, 2012). Social aggression in girls and physical aggression in boys has also been linked to high peer status (LaFontana & Cillessen, 2002; Simmons, 2002), as has physical attractiveness (Becker & Luthar, 2007).

Gender as Risk. Girls face "double-standards" and increased risks with regards to substance use and physical attractiveness, as well as sexual behavior (Chase, 2008; Luthar et al., 2013; Khan, 2011). They also seem more at risk for managing multiple

expectations from adults—that is, succeeding in stereotypical masculine, competitive domains (e.g., sports, academics) while exhibiting stereotypically feminine (e.g., nurturing, cooperative) traits. As compared to boys, affluent girls report that their parents are stricter with regards to discipline (Luthar & Goldstein, 2008). Furthermore, girls seem more pressured to be "perfect," and as a result, may report more troubling symptoms (both internalizing and externalizing) than boys (Luthar, & Barkin, 2012).

In fact, adolescent girls likely pick up on these competing expectations from what they see modeled in the women around them—affluent, well-educated mothers, who also strive for "perfection" in both professional and personal domains. Douglas and Michaels (2004, p.325) wrote about well-educated mothers: "...to be, simultaneously, independent, achievement-oriented, successful, the equal to any man and yet appealing to men, selfless, accommodating, nurturing, the connective tissue that holds all families together, and of course, slim and beautiful. We really were supposed to become some hybrid between Mother Teresa, Donna Shalala, Martha Stewart, and Cindy Crawford" (as cited by Luthar, 2013). Women face immense struggles whether they choose to opt out of the workforce to raise children or whether they decide to juggle a career and the primary responsibility of child-rearing. Either path can be a challenge emotionally and professionally, even when a mother feels it has been her "choice" (Stone, 2007).

It is less clear what gender-specific risks are present for boys, but early research suggests that achievement, social dominance, sexual relationships, and attractiveness may be topics for exploration. In particular, wealth is often linked to social dominance. For developing adolescent boys, developing relationships, as well as a stable identity separate

from wealth and social status, may result in an impoverished sense of self and diminished capabilities for deep, intimate relationships with others (Luthar, 2013).

Pressures and Parents. In wealthy, well-educated families, schools, and communities, the pressure to excel academically is great. The value of education is linked to opportunities, wealth, and prestige, and so from a young age, this message is transmitted—not only by parents, but by coaches, teachers, and peers. For many wealthy adolescents, the expectations to achieve may feel daunting in light of their own parents' achievements and professional success. This "ceiling effect" renders a sense of helplessness or hopelessness that may be demotivating and lead to underachievement, depression, and anxiety. In addition, affluent adolescents report overly high expectations, parental criticism, and low parent connectedness as factors related to their distress (Luthar, Shoum, & Brown, 2006).

The range of parenting behaviors in high-SES families is just as varied as those of other socioeconomic backgrounds. Luthar and Latendresse (2005) compared perceptions of parenting of middle-school students from affluent communities with those from a low-income community and concluded:

Findings of this study strongly call into question stereotypes about whether youth in poverty are universally "disadvantaged" compared to those more affluent, or that upper SES youth are necessarily privileged in domains extending beyond material wealth...Findings also counter presumptions that there is a restricted range of generally "good" parenting in wealthy communities (or certainly more restricted than in urban ghettos). The data suggested that the range of perceived parenting adequacy is no more constrained among the very wealthy than the very poor; for in both settings, parenting indices explained comparable amounts of variation in children's maladjustment outcomes; self-reported, as well as based in teachers' opinions (p. 223).

While it appears that growing up in a culture of affluence, not necessarily having wealthy parents, is a risk factor (Lund & Dearing, 2012), certain "contextually salient" factors specific and unique to wealthy families have been outlined (Luthar, 2013).

Parental closeness, supervision, containment, and commitment have been examined in multiple studies of affluent youth (Luthar & Barkin, 2012; Luthar & Becker, 2002; Luthar & Goldstein, 2008). In one study, affluent youth did not report feeling closer to their parents than youth from very low-income, poverty-stricken backgrounds (Luthar & Latendresse, 2005b). This was true despite the fact that the affluent youth who participated in the study generally lived in two-parent households, as compared to their low-income peers who largely lived in single-parent, ethnic-minority households.

Lack of close monitoring and supervision of youth has been shown to be a strong predictor of maladjustment, specifically related to high substance use, delinquency, and internalizing symptoms in middle school (Luthar & Becker, 2002). Low *parental containment* has been strongly linked to substance use in affluent high school students. Those reporting the highest levels of use also reported expectations of inconsequential responses from their parents (Luthar & Barkin, 2012). Finally, Luthar and Becker (2002) found that *perceived parental commitment*, or the perception that parents prioritize their child over their careers and other interests, appears to be linked to adjustment variables, as does *perceived parental values* (e.g., achievement vs. integrity). Children who live in households where parents appear too preoccupied with their work, and/or parents who seem to value success over other character values, are more at risk for developing serious psychological adjustment problems.

To summarize, the risk factors for affluent youth can be understood within the larger ecological and cultural systems, with messages related to materialism, individualism, and the pursuit of happiness over other values—all of which can lead both adults and children down a pathway to emotional distress, unhappiness, and isolation. In addition, generational trends have been noted to include increased rates of narcissism, cheating, as well as high value put on financial success. Peer norms as they relate to substance use, delinquency, sexual promiscuity (amongst boys) and physical attractiveness (amongst girls) also play a large role in the development of affluent adolescents. The pressure to excel coupled with perceptions of high expectations and criticism from parents leave many affluent adolescents feeling anxious and depressed, and may also contribute to substance use to self-medicate. Finally, parental factors, such as closeness, containment, and commitment, are important variables to consider when examining risk and resilience in affluent youth.

Adolescent Residential Treatment in the United States

According to the U.S. Department of Health and Human Services (2008, as cited in Russell & Gillis, 2010), approximately 2.9 million youth received treatment for emotional or behavioral problems. It is estimated that 40% of these youth received school-based treatment, 25% were treated by a pediatrician or general medical practitioner, and 9% were treated by a professional using complimentary or alternative medicine. The remaining 700,000 youth received either outpatient or residential treatment.

Many high-risk adolescents are placed in residential treatment centers (RTCs) each year after failing to respond to less restrictive methods of intervention such as

outpatient psychotherapy, legal interventions, and attempts by parents and professionals to manage their out-of-control behavior (Frensch & Cameron, 2002; Russell, 2007). The primary presenting problems reported during placement are depression, substance abuse, chaotic behavior, low impulse control, violent tendencies, destructive behaviors, and difficult family relations (Whitaker, Archer & Hicks, 1998; Young & Gass, 2010).

Residential treatment programs have long been criticized and questioned for their necessity and effectiveness. Critics have raised questions whether children should be removed from their home environments (Burns et al. 1999; Hair 2005), given the high financial cost (Blanz & Schmidt 2000; Lyons et al. 1998; Lyons et al. 2001) and potential risk of harm (Barth, 2005). Supporters of residential programs recognize the benefits of such care. They advocate for increased regulation and legislation which monitors youth residential care, and overall protection of clients from harmful or abusive practices (Burns et al. 1999; Nunno, 2009; Overcamp-Martini & Nutton, 2009).

Residential treatment centers vary widely. For example, they can vary in definition (small group homes, large multi-home facilities, psychiatric level care), scope (specific problems vs. generalist), sponsors (private vs. government), and funding (private, insurance, government) (Frensch & Cameron, 2002). Treatment program variations in areas such as staff education and qualifications, organization, and client psychopathology influence outcome; yet these variables are not always taken into account when conducting research (Bettmann & Jasperson, 2009). In addition, the nature of treatment modalities has changed to include more family involvement (Leichtman, 2006). While some programs now focus heavily on repairing and restoring family relationships, other programs continue to focus primarily on the individual student and

his or her treatment goals (Frensch & Cameron, 2002). Similarly, some programs utilize an ecological approach, while others use a therapeutic community approach (Butler & McPherson, 2007).

The variety of clinical orientations of residential programs, and the lack of detailed descriptions of these programs in the body of research, poses an issue. Some scholars argue that research cannot measure treatment outcome without taking the treatment's therapeutic approach or theoretical orientation into consideration (Bettmann & Jasperson, 2009). These differences in program quality, therapeutic goals, orientations, and approaches make it challenging to interpret research outcomes and evaluate the effectiveness of these programs.

Though this body of literature is fraught with problems, some conclusions have been drawn. Studies indicate that most adolescents improve during residential treatment, with reviewers suggesting that about 60% to 80% adolescents improve (Curry, 1991; Curtis et al., 2001; Epstein, 2004; Hair, 2005; Wells, 1991). Certain factors have been found to predict outcome including age, intelligence, degree of pathology, stability of the discharge placement, aftercare participation, and the absence of externalizing behaviors (Connor, Miller, Cunninghan, & Melloni, 2002; Epstein, 2004; Gorske, Srebalus, Walls, 2003; Wells, 1991). Research indicates that "adolescent females with high IQ, less severe dysfunction, acute and late onset, better academic ability, absence of learning disorders, low levels of behavioral problems, and high levels of internalizing problems tend to have positive outcomes" (Behrens & Satterfield, 2006, p. 2).

In a comprehensive review of the outcome literature on residential and inpatient treatment, Bettmann and Jasperson conclude that "such treatment is effective for some

adolescents in some kinds of treatment, but [the research] leaves much yet unclear" (2009, p. 180). They state that the body of literature on residential and inpatient programs, which has focused on measuring behavioral changes (Lyons et al. 2001) and increases in adaptive social and familial functioning (Hooper et al., 2004; Larzelere et al., 2001), provides a response to critics who have questioned the necessity and effectiveness of these programs.

Private Residential Treatment Programs

It is estimated that there are approximately 1,500 known private residential treatment programs for adolescents currently operating in North America (Russell & Gillis, 2010). However, only in the past decade have there been concerted efforts made to document the effectiveness of such programs. Behrens (2006) discussed the findings of a longitudinal study of outcomes in private residential treatment centers, the first known large-scale study of its kind. The sample consisted of approximately 1,000 adolescents in nine private residential programs across the United States. The sample was equally male and female, predominantly white, and from middle to upper socioeconomic backgrounds. The majority of presenting problems included disruptive behavior, mood, and substance abuse problems. This study attempted to address many of the methodological concerns in the literature by using a large sample size, multi-centers, repeated and standardized measures, two informant groups, and a longitudinal research design.

This study found that both parents and students reported improved communication, family relationships, and compliance during the course of treatment. They also reported a significant decrease in presenting problems from admission to discharge. Overall, the study found that adolescents improved significantly in private

residential treatment. The researchers recommended several lines of future research including exploring the "trajectory of change" that occurs during treatment, examining the role of family involvement, and using process-focused studies to better understand program qualities that promote change.

In an article summarizing the evidence base for private therapeutic schools, residential programs, and wilderness therapy programs, Behrens, Santa, and Gass (2010) outlined five major research initiatives that are building the research support for private therapeutic programs. They state "these research initiatives are particularly ambitious: many use large samples, longitudinal designs, multiple research sites, multiple informants, and 'gold standard' outcome measures" (p.107).

The first initiative is led by the Outdoor Behavioral Healthcare Research

Cooperative (OBHRC), which is composed of wilderness therapy programs affiliated
with the National Association of Therapeutic Schools and Programs (NATSAP) and
based at the University of New Hampshire. NATSAP is the primary professional
association serving private therapeutic programs, including wilderness programs. In the
last decade, the research scientists of OBHRC have published over 100 research studies
on wilderness programs for youth, including two "foundational studies" which showed
statistically and clinically significant reductions of behavioral and emotional symptoms
of youth immediately following treatment in outdoor programs, as well as at one- and
two-year follow-ups (Russell, 2002, 2005). The youth had maintained or improved
following treatment in the outdoor program, based on parent and self-report on the Youth
Outcome Questionnaire (YOQ, Burlingame, Wells, & Lambert, 1995), a commonly used
measure of outcomes in mental health treatment of youth. These studies did not use

control groups, as in many cases is difficult to achieve with this population, and potential bias given the affiliation of the researchers with these programs cannot be overlooked.

Still, the findings are preliminary support for the therapeutic gains achieved through wilderness programming.

In a second initiative, nine NATSAP programs, all owned by Aspen Education Group, and nearly 1,000 youth and their parents who participated in these programs were studied for short and long-term effectiveness. Using standardized measures of psychosocial functioning (Achenbach, 2001), the results showed strong positive effects of treatment on internalizing and externalizing behaviors, as well as overall functioning. The results also showed improvements in academic functioning and family relationships.

These gains were maintained one year later (Behrens, 2007; Behrens & Satterfield, 2007). The results of these studies were remarkable, particularly in light of other evidence-based treatments. As Behrens points out, these studies showed that long-term maintenance of gains from private residential treatment were more favorable than those found with two highly acclaimed evidence-based treatments for youth (i.e., Multisystemic Therapy and Functional Family Therapy) (see Fonagy, Target, Cottrell, Phillips & Kurts, 2002; U.S. Department of Health and Human Services, 2001).

In a collaboration with the University of Arkansas, researchers conducted a program evaluation of Aspen Education Group's wilderness therapy programs (Dixon, Leen-Feldner, Ham, Feldner, Lewis, 2009; Lewis et al., 2007; Rogers, et al., 2007) and found evidence of the effectiveness of these programs, confirming Russell's earlier evaluations. Using a longitudinal design and the Treatment Outcome Package (TOP)

questionnaire (Krause, Seligman, & Jordan, 2005), the researchers found that wilderness therapy was associated with statistically significant improvements in overall functioning.

In the NATSAP Outcome Research project, researchers systemically collected data from more than 33 NATSAP programs to examine the status of participants at the beginning and conclusion of treatment and one-year following treatment. Using the Youth Outcome Questionnaire (Burlingame et al., 1995) and the Achenbach (Achenbach, 2001) assessments, Gass (2006) reported preliminary findings on over 1200 participants which showed strong program treatment effects and large statistically significant reductions in psychiatric and behavioral symptoms from admission to discharge. This data collection continues, but the preliminary evidence looks promising for these private therapeutic programs.

Finally, many other NATSAP programs have conducted individual research studies on their respective programs. For example, The Menninger Residential Treatment Program examined outcomes of 123 youth and parents and found reported declines in problems from admission to 3 months after completing the program. These treatment gains were maintained up to 12 months after discharge (Leichtman, Leichtman, Barber, & Neese, 2001). The Alpine Academy employed a control group design and found significant improvements in child behavior, parental effectiveness, and parent-child relationships (Lewis, 2005). These gains were maintained up to 3 months following discharge. In conjunction with researchers at Brown University and Connecticut College, Wediko Children's Services has participated in studies on adaptive and contextually based behavior for youth in residential treatment (Wright & Zakriski, 2003; Zakriski, Wright, & Parad, 2006; Zakriski, Wright, & Underwood, 2005). Researchers at Montana

Academy, another NATSAP program, have conducted multiple studies showing marked improvements in parents' ratings of their child's maturity over the course of treatment, with gains persisting at one year follow-up. In addition, they found that academic, psychiatric, and behavioral symptoms decreased, while parental warmth increased and negative parental control decreased. Lastly, Bettmann and colleagues have conducted several studies on attachment issues and how wilderness therapy programs can improve insecure attachment in youth (Bettmann, 2007; Bettmann, Demong, & Jasperson, 2008; Bettmann & Jasperson, 2008).

Characteristics of Adolescents in Private Therapeutic Programs

Only a few studies have sought to describe the representation of participants amongst private therapeutic programs. The most recent study by Young and Gass (2010) examined 275 participants across 10 different NASTSAP programs, represented by a wilderness/outdoor programs, therapeutic boarding schools, and residential treatment settings. Their overall findings were similar to previous studies which found that, on average, clients in private pay programs are white, male adolescents from upper-middle to upper-class families who can afford to pay for these services. They possess at least average school achievement and have no major legal issues.

For example, in Young and Gass's sample, 68% were male and 32% were female (2010). The average age was 16. Russell (2007) and Behrens and Satterfield (2007) both had predominantly male samples, 68% and 55% respectively. Behrens and Satterfield's (2007) sample reported a mean annual income of greater than \$100K. In Young and Gass's study (2010), 7% of the sample had an annual household income of less than \$50K, 22% between \$50-100K, and 71% over \$100K. Young and Gass's sample was

84% white, 7% Hispanic, 1% African American, 1% Asian, and 7% Other (2010). These results were, again, similar to Behrens and Satterfield's (2007) sample which was 87% Caucasian and to Russell's (2007) sample which was 81% Caucasian.

Young and Gass (2010) also found that most referrals for private-pay programs came from educational consultants (44%) and the internet (17%). Other referrals came from private clinical professionals (12%), previous clients (6.5%), previous program placement (5.7%), school district (2.3%), and other (12.5%). The majority of clients had some form of previous treatment: outpatient counseling (90%), psychiatric hospital setting (45%), and/or medication prescribed for "psychological or emotional problems" (79%). Again, these results confirmed what Russell (2007) and Behrens and Satterfield (2007) found in their samples.

The majority of clients and their parents reported that they were performing adequately in school, and only a minority was dealing with legal issues (36%). Approximately 70% were involved with either minor charges or no court charges at all. Eleven percent were on probation when they were admitted to the program. Behrens and Satterfield (2007) found that about 22% of their sample possessed some sort of legal record.

Consistent with previous reports, the majority of clients reported using alcohol and drugs. What was striking was the extremely high percentages of use, which were well above the national average estimated in 2008 by the SAMSHA (see Table 4):

Table 4
Substance Use by Clients in Private Therapeutic Programs

	Private-	National
	Pay	Average
	Program	
Used alcohol in the last month	55%	16%
Use marijuana	58%	7%
Use of other drugs	37%	5%
Heavy use of alcohol (6-30	25%	2.3%
times/month)		

While substance abuse was a common presenting problem, it was only one of many factors that led to seeking help. Most clients (77%) had three or more reasons for referral. The most common primary reason reported was Mood Disorder/Depression; the most common secondary reason was oppositional defiance/conduct disorders; and the most common tertiary reason was alcohol and substance abuse. Other reasons included attention issues, anxiety, trauma, learning disability, Asperger's/Autism spectrum, and "other." Behrens and Satterfield's sample showed 82% of the sample was referred for multiple reasons.

And finally, when looking at rates of abuse, Young and Gass (2010) found that 28% of girls and 9% of boys were reported to have either witnessed or experienced sexual abuse. Again, these are much higher rates than national estimates (1.2% of boys and girls), though the rates may even be higher given that many respondents in the Young and Gass study reported "I don't know" when answering questions about clients' abuse histories.

Adolescent Experiences of Residential Treatment

Research on residential treatment programs for adolescents have tended to be quantitative, outcome-based studies, as well as analyses of behavioral and clinical profiles (Connor, Doerfler, Toscano, Volungis, & Steingard, 2004; Curtis et al., 2001; Fox & Berrick, 2007; Hair, 2005; Hussey & Guo, 2002; Lyons, Terry, Martinovich, Peterson, & Bouska, 2001). Qualitative research on youth in out-of-home placements has generally reflected the perspectives of those in foster care (Fox & Berrick, 2007; Kufeldt, Armstrong, & Dorosh, 1995; Whiting & Lee, 2003; Wilson & Conroy, 1999) or the juvenile justice system (Abrams, 2006; Abrams & Aguilar, 2005), with very few studies examining the experiences of those in intensive mental health settings, such as residential treatment centers, inpatient hospital settings, and therapeutic boarding schools (Fox & Berrick, 2007; Polvere, 2011; Whiting & Lee, 2003).

To address this glaring gap in the literature, Polvere (2011) conducted a qualitative study using semi-structured interviews with 12 participants, ranging from 16 to 24 years of age. The participants were members of various youth forums in New York State which had been formed to advocate for the rights of youth in mental health placement. This group was diverse in gender as well as ethnicity and race. While socioeconomic status was not explicitly documented, participants shared that they grew up in low-socioeconomic conditions. Many of them had complex histories and had been in multiple out-of-home placements, including foster care, group homes, residential treatment centers, homeless shelters, assisted living apartments, psychiatric inpatient hospitals, juvenile detention, incarceration/prison, and drug rehabilitation centers. Four research questions guided the study: 1) How do youth describe experiences and conflicts

in restrictive and intensive mental health settings? 2) How do youth describe the psychosocial impact of being placed in restrictive and intensive settings? 3) How do youth describe the psychosocial impact of receiving a mental health diagnosis? 4) How do youth make sense of mental health diagnosis as a clinical practice? (Polvere, 2011, p. 323)

With the purpose of illuminating "critical youth perspectives on mental health placement," Polvere's research unearthed an important "counter narrative" to the more widely accepted "clinical master narrative" (Bamberg, 2004). This study documented several themes related to the negative experiences of youth in residential treatment (e.g., physical restraints, limited or poor counseling), transition and discharge planning (e.g., poor preparation), conflicts with direct care staff (e.g., power struggles with poorly trained staff, fear, frustration, and trauma), and conflicts with peers (e.g., fear of aggressive behaviors). Additionally, participants voiced their experiences of the social stigma and alienation resulting from receiving psychiatric diagnoses--typically, multiple and differing diagnoses over time--from professionals and being placed in restrictive mental health settings. Participants shared feelings of further alienation from being placed in a residential setting that did not proactively develop or support healthy relationships with friends and family outside of their placement setting. Participants also voiced skepticism regarding the validity of diagnostic labels and clinical approaches. Some positive themes, mainly the therapeutic value and relief after being diagnosed, also arose in some discussions. Most of these themes challenge the "unquestionably legitimate and authoritative" nature of the master clinical narrative (Adame & Leitner, 2008; Polvere, 2011, p. 336). Polvere (2011, p. 336) writes, "Due to the often narrow focus on

psychopathology, many clinically oriented perspectives neglect to consider the complex relationship between youth and institutional contexts, reflecting 'perspectives *on* youth' as opposed to 'critical perspectives *of* youth.'"

In summary, research on residential settings for adolescents has predominantly focused on empirical studies of treatment outcomes, with virtually no attention paid to the perspectives and experiences of youth who access these services. The one published study known to date (Polvere, 2011) surveyed participants from economically challenged backgrounds and found several themes related to negative experiences in a variety of restrictive, intensive mental health placements. Researchers in areas of developmental psychopathology and youth mental health services have articulated the need for more qualitative studies of adolescents' experiences to guide future treatment and service planning. Finally, researchers examining the effects and risk factors related to affluence, also strongly recommend more phenomenological studies aimed at understanding the perspectives and experiences of at-risk affluent youth.

Chapter III

METHODOLOGY

In the previous chapter, I placed the current study in the context of what we know about adolescent development, affluence, and adolescent residential psychiatric treatment. I discussed specific studies examining the links between affluence and psychological maladjustment in adolescents, as well as youth perspectives on residential treatment. In this chapter, I will provide an overview of the methodology used in this study, including the research question, design rationale, description of study participants, data collection procedures, and method of data analysis.

Research Question

The central question guiding this study was "What are the lived experiences of affluent, at-risk adolescents who attended a private therapeutic boarding school?" I sought to explore and understand the experiences of adolescents who grew up in affluent homes and communities and eventually attended a private therapeutic boarding school due to serious psychological, emotional, and/or behavioral issues. I was particularly interested in their perceptions of what led to them needing a residential program, the details of their experience while in the program, their perceptions of the process, and the meaning it has for them now. Specifically, the objective was to understand adolescents' experiences in residential treatment in their own voices, as they are largely unrepresented in the current literature.

Rationale for Qualitative Research Design

Qualitative research, and phenomenological inquiry in particular, is grounded in the lived experiences of people and is concerned with the meanings that people construct from their experiences (Marshall & Rossman, 2006). In contrast to logical-positivism, which uses quantitative and experimental methods to test hypotheses, qualitative approaches are designed to inductively and holistically understand human experience in natural and context-specific settings (Patton, 1990). The purpose of qualitative methods is not to generalize to the greater population, but to gain more significant meaning and understanding of a given topic or population.

Patton outlines ten major themes of qualitative inquiry (1990), all of which were central to this study's design:

- Naturalistic inquiry: I did not manipulate the research setting or participants, but took a "discovery-oriented" approach to uncover information from participants' perspectives in the context of their natural environment.
- 2. *Inductive analysis*: I immersed myself in the details and specifics of the data to discover important categories, dimensions, and interrelationships; I used open-ended questions to explore topics and stayed open to new avenues of topics as I went through the process.
- 3. *Holistic perspective:* I examined the experiences of adolescents in residential treatment as a whole, understanding the phenomenon as a complex system that is more than the sum of its parts.

- 4. *Qualitative data*: I collected a detailed, thick description of the experiences of these adolescents in order to gain a more nuanced understanding of their perceptions of residential treatment.
- 5. *Personal contact and insight*: I had direct contact with the participants and was close to the people and phenomenon under study. I also understand that my own personal experiences and insight are critical, and cannot be underestimated, in the understanding of this phenomenon.
- 6. *Dynamic, developmental perspective*: As the process unfolded, I understood the need to pay attention to this process and assume that change would be constant and ongoing.
- 7. *Unique case orientation*: I approached each participant as a case that is unique and worthy of being explored on its own. Based on the assumption that each individual's experience is special and to be respected, I thoroughly examined and sought to understand the true experiences of each person, using member-checking throughout the interview and data analysis phase to validate the data, analyses, and interpretations. I fully analyzed the individuals' experiences before proceeding to construct a composite description of the experience(s).
- 8. *Context sensitivity:* I understand that the findings of this study can only be fully understood in the context of this specific time and place, and the social, historical, and temporal contexts in which it is placed. I am aware of the limitations of generalizing beyond these boundaries.
- 9. *Empathic neutrality:* I approached this study with a belief and understanding that complete objectivity is impossible, rather I sought to be clear about my own biases

and approach the inquiry with a curious, open-minded attitude to truly understand the perceptions and experiences of others. By engaging in the process of epoche in the beginning and throughout the process, I attempted to keep aware and take a neutral nonjudgmental approach towards the content that was shared with me, rather than advancing any personal agenda.

10. *Design flexibility*: I stayed open to adapting the inquiry process as necessary, assuming that I as I proceeded, my understanding would deepen and/or situations may change. Accordingly, I was flexible in my approach of collecting data given the schedules and real life constraints of my participants' time. I combined interviews at times in order to simplify scheduling. I also offered interviews via Skype or other video-messaging programs, to more easily schedule and obtain final interviews with a few participants who were unable to participate in face-to-face interviews at that time.

The core essence of what it is like to participate in a residential therapeutic program, particularly as a young, privileged adolescent, was the primary focus of this study. Though some researchers have investigated the impact of affluence on the mental health of adolescents, and others have looked at the effectiveness of private therapeutic programs, virtually no studies have focused on the perspectives of affluent adolescents in private therapeutic programs. This study focused on this largely unstudied population, and therefore, it was highly suited for a qualitative design.

Purpose of the Research

Research exploring the experiences of youth in private residential programs is greatly needed. When reviewing the research on residential settings, as a whole, the voices of youth are largely unrepresented (e.g., Bettman & Jasperson, 2009; Curtis et al.,

2001; Fox & Berrick, 2007; Polvere, 2011). Meanwhile, private therapeutic programs continue to grow in number. The outcome-based research on these programs is steadily growing, though we still know little about the actual experiences of adolescents who are utilizing this form of treatment. Without this critical perspective, practitioners in this field are not able to apply research to the process of what happens.

Through this study, I hoped to discover what it meant to at-risk, affluent youth that they attended a residential therapeutic school during their adolescence. By exploring this topic with them, I hoped to understand the nuances of their experiences including the events leading up to admission, perceptions of the program itself, and how they feel about their experience after graduating from the program. The results of this study will provide an important "voice" in the bodies of research on private residential programs and affluent youth, will provide a foundation for future studies in this area, and will help practitioners gain a more complete understanding of this phenomenon.

Research Paradigm & Framework

The purpose of this study is to explore a shared experience from the perspective of those who have been through it, therefore, this study will be conducted according to the tenets and procedures of phenomenology. Phenomenology is a philosophical tradition that has been applied as a major social science perspective. Individuals such as German philosopher Edmund H. Husserl (1859-1938) and Alfred Schutz (1899-1959) have played an instrumental part in the development of phenomenology in the social sciences (Patton, 2002). Taylor and Bogdan contrast the phenomenological doctrine of *verstehen*, which means "understanding," to logical-positivism:

Two major theoretical perspectives have dominated the social science scene. The first, *positivism*, traces its origins in the social sciences to the

great theorists of the nineteenth and early twentieth centuries and especially to August Comte and Emile Durkheim. The positive seeks the *facts* or *causes* of social phenomena apart from the subjective states of individuals...The second theoretical perspective, which, following the lead of Deutsher, we will describe as *phenomenological*, has a long history in philosophy and sociology. The phenomenologist is committed to *understanding* the social phenomena from the actor's own perspective. He or she examines how the world is experienced. The important reality is what people perceive it to be. (Taylor and Bogdan, 1984:1-2, as cited in Patton, 1990).

Phenomenology is the study of individuals' shared meaning of experiences of a particular phenomenon, with a focus on understanding the nature and meaning of these experiences at an in-depth level. In phenomenological research, the researcher and participant work together to get at the "core essence" of an experience, or the "heart of the matter" (Tesch, 1994, p.147). Phenomenology describes shared experiences for the purpose of discerning underlying meanings and structures of the human consciousness to deepen our understanding of the phenomenon (Creswell, 1998). Seidman (2013, pp. 16-18) describes four phenomenological themes, all of which are assumed in the design of this proposed study:

- 1) the temporal and transitory nature of human experience,
- 2) subjective understanding,
- 3) lived experience as the foundation of "phenomena,"
- 4) emphasis on meaning and meaning in context.

Seidman notes that these four themes provide the rationale and logic for the structure, technique, and approach to analysis and interpretation that guides a study. Each decision made during the process should, ideally, reflect these fundamental principles of phenomenological design. Understanding why certain decisions are made and making

these choices thoughtfully will increase the quality of the design, and thus, the findings of the study (Seidman, 2013).

In addition to phenomenology, the conceptual framework of this study draws upon the bioecological model of human development and developmental psychopathology (Bronfenbrenner & Morris, 2006). Within this framework, development is understood as a dynamic interaction between an individual's unique, fundamental characteristics and his or her environment. Both proximal and distal environmental factors play a role, and as such, need to be addressed when conceptualizing an individual's development over time. Developmental psychopathology utilizes a life-span perspective, and integrates knowledge across disciplines such as epidemiology, genetics, neuroscience, psychology, sociology, psychiatry, and criminology, within a processoriented developmental framework (Cicchetti, 1993). This perspective also views psychopathology in light of the specific evolving capacities and limitations characteristic of different developmental stages (Sroufe & Rutter, 1984).

Research Design

Participants were asked to reflect on the phenomena of attending a private therapeutic boarding school during their adolescence and the meaning that experience has for them today. The aim was to understand this phenomenon purely and directly from the individual experiences of the participants, rather than from other sources of information. As such, I chose in-depth interviewing as my method of data collection. As Seidman (2013, p.9) states, "At the root of in-depth interviewing is an interest in understanding the lived experience of other people and the meaning they make of that experience...At the heart of interviewing research is an interest in other individuals' stories because they are

of worth." I believe that the stories of these adolescents are worth hearing and understanding. The therapeutic work that professionals do with adolescents needs to be informed by what adolescents say they need and what they perceive helps them the most, not simply by the latest outcome studies. I am genuinely interested, and have been interested, in the lives and stories of adolescents, and so this study and the interviewing design fits-- not only the research question--but this researcher.

Researcher Positionality: Researcher as the Instrument

The inquirer and the "object" of inquiry interact to influence one another, knower and known are inseparable.

-Lincoln & Guba (1985, p. 94)

I, as the researcher, served in many roles throughout the course of this study: as interviewer, interpreter, and analyzer, but also as the research instrument (Patton, 2002). As a human instrument, the researcher's assurance "...is to understand the world as it unfolds, be true to complexities and multiple perspectives as they emerge, and be balanced in reporting both confirmatory and disconfirming evidence with regard to any conclusions offered" (Patton, 2002, p.51). In qualitative research, rather than trying to control or remove all potential human error or bias, the researcher as the instrument of data collection must be self-reflective throughout all stages of research, as the results largely hinge on the credibility and experience of the researcher. Bias is assumed to exist, by our own very nature, and needs to be explored, reflected upon, and shared with the reader.

Many qualitative researchers (Patton, 2002; Ravitch & Riggan, 2012; Seidman, 2013) encourage the investigator to acknowledge personal biases and how those biases may affect the data collection and data analysis. This begins with personal reflection on

the topic of study, answering questions such as, "How did my desire begin? What is the context of my interest? How did I come to this interest? What is my stake in the inquiry, and what do I get out of pursuing my interest and learning about it?" (Seidman, 2013, p. 35). Seidman strongly recommends including an autobiographical section which explains the researcher's connection to their proposed research:

There is, therefore, an inherent paradox at the heart of the issue of what topics researchers choose to study. On the one hand, they must choose topics that engage their interest, their passion, and sustain their motivation for the labor-intensive work that interviewing research is. That usually means in some way or another they must be close to their topics. On the other hand, to be open to the process of listening and careful exploration that is crucial in an interviewing study, they must approach their research interests with a certain sense of naiveté, innocence, and absence of prejudgments (Moustakas, 1994, p.85).

Personal Autobiography & Reflections

In reflecting on my own life history, I can reconstruct the many experiences that led to my interest in understanding and working with troubled adolescents. I came from a working-class family, with parents who placed a high value on education but, given their own family and economic constraints, never graduated from college. My father was the oldest in his family and emigrated from the Philippines, joining the U.S. Navy in hopes of building a better life in America (he later brought his relatives to the U.S.). My mother, a bright and talented farm girl from rural Wisconsin, was forced to quit college when her father lost his job and could no longer afford her tuition. She subsequently joined the military to help pay for college and pursued a career as a journalist in the U.S. Navy. While stationed in Australia, she met my father, where they married. They moved back to the U.S., where they had four children. My parents did their best to put me and my siblings in the best public schools. Because I loved learning and was motivated to do well

in school, I surrounded myself with other ambitious and creative students from elementary school through high school.

Though my own family did not have a lot of money, we were able to move into a solidly middle-class neighborhood when I entered junior high school. My mother says she chose that neighborhood because it was in one of the premier, top-rated school districts in our state. I attended a school where a large majority of students came from extremely wealthy and well-educated families. Many people often referred to our school as the "private public school," for which I felt a mixture of disdain, embarrassment, and gratitude. We were known for our golf club and reputation for college placement, when other schools in the area were known for their football team. I transitioned from childhood to adulthood in this "bubble" of affluent life styles and values, which I later came to adopt, bit by bit, perhaps without even fully recognizing it. I would guess that it was as a result of being raised in this very culture that I, at the age of 15, initially played with the idea of becoming a psychologist one day and obtaining my Ph.D., a goal I don't believe I would have formed solely based on the guidance and upbringing of my parents.

As an adolescent, I felt out of place given the gap between my own family's economic situation and those around me, but I tried to find my niche and focus on my studies. I went through significant adolescent struggles when my parents separated after years of conflict, leaving my mother to raise four children on her own without a college degree. This had a direct impact on me as a young woman, driving me to pursue financial independence and autonomy and giving me even more reason to achieve in school and pursue a career. At the same time, I watched as many of my "privileged" peers struggled with a myriad of problems--underachievement, school drop-out, eating disorders, alcohol

and drug abuse, depression, anxiety, self-harm, and general self-destruction. Given my less than ideal adolescence, I wondered about and was saddened by the fact that my peers, who seemed to "have it all," were so unhappy and lost. At times, I caught a glimpse of what home life was like for some of them—the pros and cons--and so even in my teen years, I became an untrained observer and unofficial student of human behavior.

Perhaps, then, it should come as no surprise that a decade following my own adolescence, I began working with extremely bright, lost, affluent youth. I quickly learned these teens faced similar problems that I had seen in my generation, though perhaps more ubiquitous and challenging to treat in some cases. During my nearly 7 years working as a clinician in a therapeutic boarding school for affluent, bright, troubled teenagers, I have formed a strong belief that many of them want and need something different from "the norm." By this, I mean they feel a need to experience a change of culture, a change of perspective, a change of heart. I have watched and listened to countless students who have helped shape my views on "mental illness" as traditionally conceptualized, particularly with regards to children and adolescents. As a result, I have adopted a more developmental way of thinking about adolescent mental health and find it more useful in communicating hope and respect to the students with whom I work. I acknowledge that throughout this study I conceptualized the students' experiences within this developmental framework, and this was intentional. However, I also recognize that there are many other ways to conceptualize their experiences. The data I collected can be analyzed and interpreted through a different conceptual lens.

From the standpoint of credibility, I believe my 15 years of education, clinical training, and work experience with children and adolescents made me a solid candidate to

sensitively interview and obtain rich information for the purposes of this study. I knew that I needed to be clear about my boundaries and the ways in which I communicated and interacted with the participants, given my role as researcher and not as therapist. This is always important in research, but particularly so given my previous relationships and experiences with these adolescents.

What is My Role as Researcher?

To reiterate: my role in this study was *not* as clinician, therapist, mentor, or educator. As stated earlier, one of my roles as researcher was a research instrument. Lincoln and Guba (1985) outline general practices common to using the human form as the instrument: (1) collects responses and provides explanation; (2) interacts and alters the situation to best assess and guide the respondent's statements; (3) views data gathering in a holistic context; (4) builds upon the base of tacit knowledge; (5) theorizes about data and tests conceived theories; (6) provides a summary and clarification from respondents; and (7) provides an analysis of data that will contribute to an existing body of knowledge aimed to produce meaningful change (p. 145). I ensured that these practices were followed by having frequent and meaningful interactions with participants over time, by reviewing and reflecting on the data throughout the research process, and by checking in with participants as questions and themes emerge.

Similarly, Yin (2009, p. 69) lists commonly required skills for qualitative researchers:

- Able to ask good questions and interpret the answers,
- Able to be a good listener, being open-minded to other ideologies,

- Adaptive and flexible with the ability to view new situations as opportunities rather than threats,
- Have a firm grasp of the issues being studied,
- Unbiased by preconceived notions, including those derived from theory, in order to be sensitive and responsive to contradictory evidence.

In order to be an effective researcher, I realized the need to be open and curious *throughout* the study. I knew that it was of utmost importance to be actively engaged and interested in what each participant had to share if I wanted to create a rich, thick description. I also reviewed techniques and strategies to enhance the interviewing process, such as: listening more than speaking, following up without interrupting, keeping participants focused, exploring my hunches, and tolerating silence (Seidman, 2013). I deliberately introduced the interviews by asking participants to speak to me as if I did not know them, so as to minimize any assumptions they might make in sharing information with me.

I believe that my clinical training helped me in many ways. It felt natural to ask open-ended questions and remain genuinely inquisitive about the participants' points of view. I felt comfortable giving them time and space to reflect, allowing for periods of silence. I also believe I was able to sensitively interject, or wait for the right time, to ask follow up questions that unveiled more of what they were trying to convey. When I felt I needed more concrete examples, I asked for them. Finally, I believe that the nature and history of my relationships with the participants allowed for a greater degree of openness and safety, so that genuine exploration and curiosity was fostered.

Data Collection

Sampling Criteria

In qualitative research, there is no specific number of participants required for analysis, only that the data reach saturation. I used purposeful sampling to select a small group of participants based on the following criterion: (1) successfully completed a specified private therapeutic boarding school program; (2) graduated from the school within the last 2 years, and (3) was over the age of 18 at the time of the study. Because I had access to background data of students as well as my own past personal experience with them, I was well-equipped to choose students in a manner that allowed for maximum variation of initial presenting problems and histories. I used a matrix as a guide when choosing participants (see Appendix A) in order to capture a range of symptomatology and behavioral issues, reflecting the diversity of students who attend this private therapeutic boarding school.

Program Description

There are many private therapeutic boarding schools in the United States, with a range of services, clientele, therapeutic orientations, size, and overall quality. It is important to adequately describe the program that participants experienced in order to put their experiences into context. However, I will deliberately describe the program in such a way as to protect the anonymity of the participants in this study, removing any details that might reveal the identity of the school. For a comprehensive description of the therapeutic and academic components of the school, see Appendix B.

The Academy is a private, college-preparatory, therapeutic residential school located in a small town within a rural setting in the U.S. This small therapeutic program

serves approximately 25-35 students in grades 10 through 12. The size is deliberately kept small to ensure the atmosphere of the program remains intimate and family-like. The average student age range is between 15 and 19, with rare exceptions. While the minimum stay is 18 months, the average stay is closer to 2 years. All students matriculate and go on to college directly from the program; they are not discharged to other therapeutic programs or traditional high schools unless it is deemed clinically appropriate. Annual tuition at the time of this report was \$91,000.

Study Participants

I initially considered interviewing 3 to 4 individuals for the study. After developing the matrix I described earlier, I created a long list of potential participants and then narrowed my choices down to five Academy graduates. I contacted each of them by email; all five responded within 24 hours expressing interest in participation in the study. I decided to proceed interviewing all five individuals. Each participant completed the entire three-interview process. Table 5 presents the demographic information requested in the initial meeting; pseudonyms are those chosen by the participants.

Table 5

Participant Demographics

Name	Age Sex Race Parents' Education & Occupation				& Occupation	Estimated Income
				Mother	Father	
Nicole	20	F	Caucasian	Professional Commissioner	Professional Law Professor	\$125K-200K, \$200K+
Corey	19	M	Caucasian	College Degree Retired	Professional Vascular Surgeon	\$200K+
Zoe	19	F	Bi-racial	College Degree Real Estate	College Degree Business	Unsure
Jesse	18	M	Caucasian	College Degree Editor	College Degree Retired	\$125K-200K
Griswaldo	19	M	Caucasian	Professional Retired actress	Unanswered Inventor/Enginee	Unsure r

Following are brief descriptions of the participants and my encounters with them during the initial interview. I provide these now to give context for later data analyses and discussion of findings, in which I will describe participants more fully.

Participant 1: Nicole. I met with Nicole at her home, a four-story old, brick townhome in a highly desirable part of the city. We chose to meet there before she left the area to return to school, one of the most highly selective and top-ranked private liberal arts college on the East Coast. Her neighborhood street was lined with old brownstones, steps leading up to tall doorways with architectural details, and large, old trees creating a shady canopy over the entire length of the street. The street corners were marked by trendy coffee shops and markets. I heard the bark of a small dog when I rang the doorbell. Nicole answered the door looking relaxed and happy. She was home alone with the exception of her dog. She casually wore her shoulder-length brown hair down, still damp from a shower. She looked as pretty as I always remembered her being, wearing little to no make-up and modest attire. She was dressed in a light-weight white

sleeveless, collared shirt with casual summer pants. She was barefoot and looked very comfortable in her surroundings. Her big, brown eyes sparkled as she greeted me with a hug, both of us appreciating the opportunity to spend time together now that she had been away at college for a year. I stepped into a tastefully decorated home marked by high ceilings, hardwood floors, large open rooms, and beautifully decorated spaces with large pieces of modern art hanging on the walls. The furniture was a mix of modern, tailored pieces on the main floor, with tasteful antiques sprinkled throughout. She pointed out childhood and family photos on display, including her parents' wedding photos. As I walked through the open spaces, I noticed a stairwell leading upstairs as well as downstairs. Through the back windows, I could see a beautiful outdoor space marked by greenery, gardens, and ivy climbing up the brick walls of the neighboring buildings. I quickly remembered how she had once described to me a courtyard at her house—a favorite place of hers growing up.

She eventually walked us downstairs to the ground level which housed the kitchen and a more casual family room and dining area that opened up to the back terrace. She poured me a cup of tea, and after some chatting about where best to conduct the interview, she chose going outside to the back courtyard area. We found a shady corner out of the hot sun to conduct the interview. I was somewhat concerned about the background traffic noise of the city (which was mostly white noise), so we checked the recording level. When she first sat next to me, I noticed her arms and quickly thought to myself she looked strikingly thin. I reminded myself that I wasn't here to act as her counselor, but I noticed some concern rising in my mind based on previous discussions we had about her losing weight.

We started the first interview, and she spoke freely and openly about her life experiences. She looked relaxed and in a good mood, making frequent and normal eye contact. After the first interview, we took a 90 minute break for lunch, during which she enthusiastically shared about her life in college, the activities she was involved in, and the many successes she had already experienced—both academically and socially. We returned and completed the second interview indoors. The interview proceeded smoothly with the exception of a brief interruption when her father returned home from work and passed through the area to say hello. He left immediately and given the large size of the home, our privacy was unaffected for the remainder of the interview.

Participant 2: Corey. I visited Corey at his college, a highly selective private liberal arts college in the Northeast; I had never visited the campus prior to this meeting. I found it to be a beautiful, open campus with several old buildings and grassy lawns that overlooked a river. College was clearly in session; as I drove around looking for a parking space that afternoon, I saw many college students walking about and playing sports on the lawn. Corey met me at the student center, and we walked over to a building that was temporarily housing the library, as the library was undergoing construction. He was dressed in casual, somewhat preppy attire, with baggy jeans and a navy fleece over a shirt. As we walked and talked, I perceived that he seemed a bit distant, though he was certainly friendly and smiled throughout our conversation. He didn't seem as comfortable as I would have expected. I just took note of it and proceeded to ask him general questions about his transition to college. He was talkative, as he typically is, and responsive to my queries. He took me to a quiet classroom space. As I went over the informed consent form, he was quick to reassure me that he had read it over and was very

familiar with the IRB process. He seemed eager to rush over it, but I still did a general review and highlighted the most important parts.

As we settled into the first interview, he seemed to relax a bit more and open up. He became very talkative, and I realized I had to redirect him several times. He tended to talk more about his present life rather than his past, about which I was asking. We took a short break and walked over to the student center to get some water. After a little break, we came back to the same room to do the second interview. Again, he was very animated and talkative. At some point, as he was talking about his struggles with anxiety, he referenced being a bit anxious even at the beginning of our time together. I reflected back to my initial impressions upon first meeting him, and this seemed like a sensible explanation for my perceiving that he seemed distant and a bit guarded.

Overall, the interview went smoothly. He had a lot of specific stories to tell, and he did so in a very genuine, true-to-character form. As soon as I turned off the recording, he mentioned how grateful he was to the Academy. Then he said that maybe that should be on the recording but I told him that it was ok, that I'd make a note of it. I was actually quite surprised by how positive and grateful he seemed to be for his experience in the program. I recalled the majority of his stay at the school to be quite challenging for him. It was one reason I thought it might be useful to interview him, because from my perspective, he didn't have an "easy" stay.

Participant 3: Zoe. I met Zoe in a colleague's empty residence on the Upper West side of Manhattan. Zoe happened to be staying in the New York City area before heading off to the West Coast to begin her first year at a highly selective liberal arts college. The space was quiet, clean, uncluttered, and beautifully decorated. Perched high

on the top floor of the building, the apartment's wide, expansive views from the living room's walls of windows let in the bright sun light of the day; the sight of sailboats could be seen bobbing along the Hudson River. It was an ideal space for a long, private conversation.

Zoe arrived somewhat late for the interview. She was dressed casually but nicely, with a fashionable skirt and top appropriate for a summer day. She wore her long, dark hair straight and parted to one side, framing her face. Her natural beauty was accented with a small amount of make-up, which was noticeable because she had not worn any while at the school. She looked healthy and happy; not too thin, not overweight. It made me happy to see her looking so well.

In fact, compared to the first time I ever met Zoe, she was remarkably talkative, open, and relaxed as she shared her story. As is her customary style, she was articulate, focused, and clear in her communication. She was quite animated at points, using her hands and facial expressions to emphatically convey her point. Typically, she sat relaxed in the chair, legs crossed, smiling and seeming very interested in the interview process. We sat facing one another with the recorder between us. She talked almost without stopping, and I hardly had to ask probing questions to get her to continue. I decided, during the first interview, to be largely unstructured and just see where she took me. I, of course, had my set of questions, but her own story was so compelling, I didn't feel anxious that we weren't "covering" all of my questions.

We took a break for lunch in between the two interviews, during which she freely shared about some of her experiences since she had left the school. The first interview lasted nearly two hours, so I made a note to keep us more focused during the second

interview. I directed her a bit more during the second interview, which we kept to 90 minutes. At the end of the day, we walked out into the city where we said our last good-byes before she departed to fly out west to start college. I thanked her for being willing to give so much of her day to do the interview. She thanked me, saying it was a good opportunity for her to reflect on all that had happened during her time at the Academy.

Participant 4: Jesse. I met Jesse on his college campus, a small, very selective liberal arts college in the Northeast. School was just beginning, and he was there for the freshman orientation week. I was grateful that he chose to take time out of his busy schedule to participate in the interviews. He walked me to the library where we found a private study room that was available to us. The room was sparse with only a conference-sized table and chairs. It was noticeably warm and muggy given the heat of the day and the sun coming through the wall of windows.

Jesse was dressed casually as I had often seen him, his thin frame clad in a plaid flannel shirt, baggy jeans, and canvas sneakers. His light brown hair was tousled yet relatively short compared to how he normally wore it. He, like the others I interviewed, seemed happy to see me and genuinely interested in participating in the interview. He had previously mentioned in an email that he thought it actually might be quite useful for him to reflect on his experience now that he had graduated from the school. He had originally requested that we do one interview at this first meeting, but when I arrived, he had changed his mind and wanted to complete two interviews.

We sat facing one another for the interviews, which proceeded straightforwardly with no interruptions. Though the interview felt relaxed and comfortable, we stayed focused and finished within 90 minutes for each interview. We took a half-hour break

during which he had dinner in the dining hall, and I walked around the campus, reflecting on the first interview and preparing for the next.

Overall, Jesse appeared comfortable, calm, and forthcoming in his sharing of his experience. There was a lightness to his being, and much laughter was sprinkled throughout his stories. I did not read this as nervous laughter but rather a healthy, happy acceptance of who he was and who he is today. I know from past experience with him, he can often talk at length and with passion about his thoughts and feelings about the Academy. At his graduation ceremony, his speech had touched me with the expression of genuine care and feelings of endearment about the community. I knew what he shared with me in the interview was consistent with how he has felt about his experience. He voiced his thoughts and opinions with clarity and significant thoughtfulness.

Participant 5: Griswaldo. I met Griswaldo at his college campus, a selective Northeastern university highly ranked and regarded for its strong engineering program; it was my first visit and I was excited to see it. I met him at the library, and he quickly showed me to a very large conference room, set up with three large tables in a U-shape with chairs all around facing a large projection screen. The room was quite large, though for our purposes, private and quiet enough for the interview. We agreed to close the glass doors to give us a bit more privacy. Griswaldo had decided he wanted to do one interview, as he said he gets easily tired from talking for a long time. We completed the first interview in approximately 90 minutes.

Griswaldo was dressed in casual attire: jeans and a t-shirt. His brown hair was slightly disheveled, as is typical of him, and he walked with his distinctive slouched and heavy gait. While we talked, he made eye contact with me though it was broken at times.

Still, compared to when I first met him years ago, his eye contact and communication were enormously improved. He also used his hands to gesture or fidget while he spoke. As I had expected, he was somewhat more difficult to keep focused, compared to the other interviewees, and I found myself going into a familiar dynamic of leading and guiding him a bit more so we could stay on track. I noticed this about myself and wondered if I should let him direct the conversation more. I then decided that I did, indeed, need to keep us focused in order to complete the interview. However, I made sure that I tried to leave enough room to let him "go" where he wanted to go in the interview. It was a bit more delicate balance when interviewing him. He noted feeling more tired at certain points throughout the interview process.

Griswaldo did not seem to know much about his parents' occupational or socioeconomic background compared to other participants. He had some difficulty filling out
the questionnaire, and I encouraged him to do his best. In fact, throughout the interviews,
he often stated that he didn't know or couldn't quite remember. This was particularly true
of early childhood memories, but also true of his early experiences at the Academy.

Overall, aside from needing to help him stay focused, the interview went well. He was friendly, open, animated, and talkative, as he typically is in conversation. He seemed happy and very content with his experience so far at college. He walked me all the way back to my car and we talked along the way, agreeing to be in contact soon to set up the next interview.

Instrumentation

I created a semi-structured interview protocol for this study (see Appendix C). Semi-structured interviews provide a balance of structure and the opportunity for the

researcher to further pursue an area with the use of an outline of interview questions (Fossey et al., 2002). In-depth interviewing is best done over time with more than one interview so as to build rapport and trust and to explore both a participant's experience, in context, as well as its meaning. I followed Seidman's (2013) three-interview approach, in which each interview is approximately 90 minutes long and the spacing of interviews is between 3 days to one week. Using this "three-interview series" structure as my guide, I conducted the following interviews with each participant:

- Focused Life History. The first interview focused on participants' reconstructed early experiences up until the time they attended therapeutic boarding school.
- 2. <u>The Details of Experience</u>. The second interview asked participants to reconstruct the details of their experience in a therapeutic boarding school.
- 3. <u>Reflection on the Meaning</u>. The third and final interview asked participants to look at how the factors in their lives interacted to bring them to their present situation and to construct sense and meaning of their experience in therapeutic boarding school as they now understand it.

Using this method and a semi-structured protocol, I was able to cover general topics with all of the participants, as well as follow up on any unique content they offered during the interviews. When I developed the protocol, I included questions that covered broad areas of interest to me, including their experiences with other students, staff/faculty, and family members. I also wanted to understand their perception of the culture and values of the peer community during their stay. However, in keeping with the

exploratory nature of this study, I needed to remain flexible and open to any other elements of their experience that I had not considered.

In general, as I began interviewing the first few participants, it seemed that my protocol covered topics broadly enough to allow participants to speak more specifically about certain areas of significance for them. At one point, I wondered if I should have asked one to speak more directly about negative experiences during her stay, as my reflections on her answers made me concerned she was focusing too much on positive aspects. I then raised this concern with her and made a note to follow up on this specific question in the next interview, which we did. Additionally, in the third set of questions, I found that some participants had difficulty answering the question: "What meaning does it have for you now?" I had to find other ways of paraphrasing this question in a way that made more sense to them. In general, it seemed that it was a difficult question because their experiences, though technically in the past, still felt very "present" for many of them who had recently graduated.

The information gathered in the first interview provided me with clear descriptions in their own words of their life histories. I used this information later to inform my process of imaginative variation when I constructed the structural descriptions. The second interview, focusing on their experiences in the program, provided the majority of data used in creating the individual textural descriptions. In the third interview, I followed up on anything they had wanted to share since the last interview, asked questions about the meaning their experience had for them now, and then debriefed with them about their experiences participating in the interviews with me.

I told them that I would be in touch with them later to check in with them once the interviews had been transcribed.

In addition to the semi-structured interview protocol, I created a brief demographic questionnaire (see Appendix D), which participants filled out prior to the first interview. I was able to gather information regarding their current age, gender, and race, as well as their parents' highest level of education, occupation, and estimated family income. They also recorded a pseudonym that they chose on this demographic questionnaire.

Procedure

Recruitment. In accordance with University guidelines, I submitted my proposal to the Institutional Review Board at the University of Virginia after defending my dissertation proposal to my committee. I obtained written permission from the Academy's Head of School to obtain contact information of graduates from the program. I created three tiers of potential participants, categorized by presenting clinical problems and balanced to represent both genders, in the event that my initial request for participation did not result in any willing participants. Upon receiving IRB approval, I contacted five participants I had selected based on the specified criteria. I approached each student individually, by e-mail, to describe the study and request his or her participation (see Appendix E). I attached a copy of the Informed Consent (see Appendix F) form to the e-mail, which included a brief description of the study and participant responsibilities, for their review. I asked each individual to carefully read over the form and decide if he or she would be interested in participating. If they chose to do so, I requested that they sign and return the Informed Consent form before scheduling our first

interview. All five students that I contacted agreed to participate and returned signed copies of the informed consent form. I did not have to use the other "tiers" of potential participants from my matrix.

Epoche. As recommended by Moustakas (1994), I engaged in the process of epoche before I began interviewing participants for the study. I first reflected on my very early memories, thoughts, and feelings when I first learned about the Academy; my first impressions of the program, the founder, and the students during my initial visit and subsequent months working there; and my own process of adapting to a new and unusual therapeutic setting. After spending some time considering my personal views on the program itself, I reflected on my personal relationships, experiences, biases, and feelings towards the participants in this study. I realized that I held positive regard toward all of them, though I certainly had closer relationships with some rather than others. I took note that one challenge for me would be the change in role; that is, I'd be speaking with them as researcher, not counselor. I thought about the ways in which I might feel tempted to counsel them (or that they might even expect that of me in our meetings), and I made a personal note to be sure that I kept a friendly yet somewhat detached stance during the interviews. I also made sure that I clarified and articulated these differences to them before and throughout the interview process. By reflecting on my past experiences in the program and with the participants, I was able to create the psychological space needed to enter into the participants' experiences with a new and fresh outlook.

I engaged in epoche once more when I had completed transcribing the interviews and before I began analyzing the data. I spent some time reflecting again on my time with the participants and the early themes that I was starting to see. I realized that by that point

in time, I had been away from the Academy for approximately one year or more, and as I began to analyze the data, I felt a clear, distinct emotional distance from the school and my experiences there. I felt able to keep my prior experiences separate, which allowed me to look at the data with curiosity and a true sense of staying open to what I might find.

Interviews. Once I secured their agreement to participate, I coordinated with each participant to schedule dates and locations for the interviews at their preference and convenience. One participant requested to do the interviews at her home; the others chose neutral and private locations, typically in a private room in a library. I traveled to each location to meet with participants, with the farthest destinations being approximately 3 hours by car. Interviews were conducted privately for reasons of confidentiality and to maximize participants' sense of freedom of expression. I checked in with them consistently and frequently throughout all of the interviews to paraphrase what I thought I heard them communicate or to clarify a point in question. I tried to ensure that I made no assumptions about what they were saying by asking for clarification and by being direct with them about my not wanting to make assumptions. Throughout and immediately following interviews, I made notes regarding participants' nonverbal behaviors and other descriptions of my meetings with them.

At the beginning of each initial interview, I once again reviewed the information on the Informed Consent form with each participant. I reviewed the process of the study, including how I would protect confidentiality and answered any questions they might have had. I explained the purpose of recording the interviews. I informed them that I would be creating narratives or "stories" from the recordings, that their names would be replaced with pseudonyms on all materials, and that only their pseudonyms would appear

in the final report. I told them that all recordings will be destroyed when the study is complete. I also explained that participation in the study was completely voluntary and that they may stop the interviews or drop out of the study at any point.

Once I was sure they fully understood their participation in the study, I gathered basic demographic information using a brief questionnaire that included requests for information that would reflect family socioeconomic status (e.g., parents' highest level of education, occupation, and estimated household income). I also asked each participant to choose a pseudonym for use in data collection, analysis, and report writing. I separated the signed consent forms (with their signatures) from other materials that only used the pseudonym for identification. Given the small number of participants, it was easy for me to remember the pseudonym that each participant chose.

After gathering this information, I conducted the first interview. I asked the participants to speak with me as if I was not familiar with them and their stories. Most interviews averaged 90 minutes. One of the first interviews I conducted lasted 2 hours, and I readjusted my approach with the remaining interviews to keep them closer to 90 minutes. I allowed students to choose whether they completed one or two interviews in one meeting. I gave this option for a variety of reasons including simplifying scheduling needs and collecting as much face-to-face interview data as possible before participants left for college. All but one decided to do two interviews on the same day. One participant was flying across the country, and so we scheduled two of the three interviews quickly and conducted the last interview via Skype/internet. When participants chose to complete two interviews, we took a short break after the first interview, typically for a meal, and then resumed interviewing. For the participant who chose to do one interview

at a time, we set up the following interview one week after the initial interview was completed. I did not allow any participant to complete all three interviews on the same day. First, this would have made for too long of an interview session, as each interview lasted approximately 90 minutes. Second, I wanted to meet with each participant at least twice, with enough time between meetings to allow for any new thoughts or feelings they might have had as a result of the first interview(s).

The final (i.e., third) interviews were conducted approximately one week or more after the initial two interviews; these ranged between 30 and 60 minutes. The majority of these final interviews were conducted via the internet using Skype or another videomessaging program due to participants beginning college and having busier schedules, and/or being at a geographical distance that precluded driving for a face-to-face interview.

Each interview was audio-digitally recorded; I immediately transferred these digital recordings onto a computer in a password-protected file and deleted the originals from the recording device. I also used their pseudonyms on the files for my own use. I personally transcribed all recorded interview material to ensure confidentiality, and these transcriptions were kept in a password-protected computer file. I kept a fieldwork "notebook"—a file holding all transcripts, analytic notes and memos, as well as my reflective journaling. This notebook was also password-protected on a computer file, and any hard copies were kept in a locked file cabinet in my home office. Participant consent forms were kept in a file folder separate from transcriptions and other notes. I obtained verbal agreement from my peer reviewer and the chair of my dissertation committee to

keep any data that they viewed confidential. They did not have access to participants' names.

Throughout the process of transcribing, I made journal notes of potential themes or questions to consider when I entered the analysis phase. Upon completion of the transcription process, I sent copies of the verbatim transcripts to each of the participants for their review. I elicited responses from them via e-mail, including prompts for any changes or additions to what they had originally said in the interviews. None of the participants requested any changes, though one did request to see a draft of his story before my final report of findings. Later, after I had written brief profiles of their life histories, I again contacted the participants by e-mail to ask for their review for accuracy. I received specific feedback from three to make minor changes; one participant responded that no changes were needed. I did not hear back from the fifth participant.

Data Analysis

Only when I completed all transcriptions and member checks with each participant did I formally begin analyzing the data. I deliberately waited to begin analyzing the data so as to minimize "imposing on the generative process of the interviews what the interviewer might have thought he/she learned from the other participants" (Seidman, 2006, p. 113). Choosing the appropriate method of data analysis for a phenomenological study is an important step in aiming to reflect the true essence of the phenomenon. While I personally did not attend a therapeutic boarding school in my youth, I was deeply and intimately involved with this therapeutic boarding school for 7 years as both a clinician and an administrator. Given this background, I have many of my own personal experiences, opinions, feelings, and memories of the program. I also

attended an affluent high school community during my adolescent years and have been shaped by my experiences in that setting.

For these reasons, I used the modified Stevick-Colaizzi-Keen (S-C-K) method proposed by Moustakas (1994) to analyze the data. This method is intentionally designed to take into account the researcher's own personal experiences in the process of integrating the experiences of the fellow participants. As outlined in Moustakas (1994, p. 121), the general steps in the modified Stevick-Colaizzi-Keen method include:

- 1) Describing the individual's experience of the phenomenon;
- 2) Horizonalization; reducing and eliminating to determine the invariant constituents ("meaning units") of the individual's verbatim transcription of the experience;
- 3) Listing and clustering meaning units into themes;
- 4) Creating the individual textural description of the individual's experience;
- 5) Using imaginative variation, creating the individual structural description of the individual's experience;
- 6) Constructing a textural-structural description of the individual's experience;
- 7) Repeating the above steps for each participant involved in the study;
- 8) From the individual textural-structural descriptions, synthesizing and constructing a composite textural-structural description of the phenomenon which represents the entire group.

When I first began analyzing the data, I sent copies of several documents that showed my initial steps and analytic process--from the original transcript to invariant horizons and codes--to a professor on my committee with expertise in qualitative methodology. I also communicated with her throughout the analysis process to check in

on my thoughts about the data and address my questions. After this initial check and feedback from her to continue, I completed the remaining steps of the data analysis, focusing on one individual at a time before continuing to the next. I carefully organized my analytic notes, reflective memos, field notes, and transcription material in order for the data analysis process to be well documented and transparent for review. I then sent materials relevant to my analyses to two reviewers unaffiliated with the school or the participants: 1) a colleague with experience in qualitative research, and 2) my dissertation chair, whose background in clinical psychology assisted in confirming any clinical/therapeutic themes that I coded in the data.

I coded, categorized, and summarized the life histories of each participant, organizing important categories in a chart to examine similarities and differences amongst participants. I then wrote biographical sketches of each participant. After analyzing themes in their life histories, I shifted to analyzing the second and third interviews for each participant using the S-C-K method. I created individual textural descriptions with participants' verbatim statements. I then wrote individual structural descriptions, using their life histories as context for understanding their perspectives. I then combined these into individual textural-structural descriptions. Once this stage was completed, I developed an integrated, composite description based on the individual textural and structural descriptions. I will now more fully describe each step in the analysis process.

Horizonalization and Coding

In the initial process of horizonalization, I carefully and thoroughly read through each statement in the transcripts to determine the relevance of each statement as it related to the research question. I deleted statements that did not hold such relevance, such as single word responses to closed questions from me. I deleted my own statements if they were clarifying or summarizing statements. I also deleted statements that were unrelated or tangential to the topic at hand. Once I narrowed down the transcript to include relevant statements, I went through these statements once more to remove any repetitious or superfluous verbiage, creating a final list of "invariant horizons" from which I began to code for themes. By this point, I had read through each transcript a minimum of three times, and because I had also spent many hours transcribing the interviews, I felt completely immersed in the data.

Participant 1: Nicole. I read through the transcripts with no preconceived categories, labeling initial codes that emerged from the data. Examples included "Initial Reactions/Impressions" ("I really wanted to go to the Academy!" "It seemed really genuine and would be hard work—but also possible!"), "Peer Connection" ("Just opening up to other people my age and feeling them connect to me about those things, I just never felt that"), and "Confidentiality Issues" ("I never felt my privacy was breached").

After my first cycle of coding, I went through again and condensed these units into larger categories. For example, "Initial Impressions," "Initial Emotional Reactions" and "Motivation to Attend" were placed under the category "Transition into Program." A larger theme of "Turning Points" held the codes "Paradigm Shift," "Identity Shift," and "Impact of Relationships." Other larger themes that were developed included: "Process of Change," "Perceived Personal Changes," "Programmatic Factors," and "Transitioning Out of Program." I condensed or discarded codes that were redundant or better categorized by another code.

Participant 2: Corey. Once I had gone through the first phase of analysis with Nicole's data, I continued the same general process with Corey's interviews. I kept in mind the possible larger categories and themes that I had developed earlier; however, I allowed themes to emerge independent of what I had developed earlier. Again, I conducted several cycles of coding, reading transcripts multiple times and condensing codes into larger categories and themes. Initial codes included "Escape," "Perception of Peers," "Perception of Group," and "Authenticity of Program" which were later combined with other codes under "Immediate Reactions/Impressions." As I continued the process of categorizing, I generally found that categories matched up with those I had developed earlier. However, Corey's interviews included new information and perceptions, primarily because his reflections often included his prior experiences in therapeutic boarding schools. For example, codes such as "Feeling Trapped," "Diversity," and "Privacy Needs" were unique to Corey.

Participant 3: Zoe. Again, I began by reading the transcripts through multiple times, first for a general understanding and then for more detailed coding. I found that the emergent themes and meaning units were similar to those created for Nicole and Corey. However, Zoe's interview had unique codes that had not emerged in the first two participants' data. For example, "Expulsion," "Wilderness," and "Risk Taking" were new; they were eventually categorized under "Turning Points."

Participant 4: Jesse. With the larger themes more clear in my mind by this point, I read through Jesse's transcripts and coded the invariant horizons. As in earlier coding, I found that "Initial Impressions" ("It seemed a little scary to me;" "I was shocked") and "Difficulty Giving up Control" ("...that was a difficult thing to envision, just like giving

up control") could be gathered under the larger theme of "Transition into Program." As with the earlier coding, I found that while Jesse may have had some unique codes, they eventually fit into the larger meaning units and themes that I had already established.

Participant 5: Griswaldo. I followed the same pattern of coding for Griswaldo's transcripts, finding that he had a unique code that had not emerged in the other participants' data: "Negative Experience with Medication Taper" ("I mean, there were a couple points where I just couldn't sleep at night because I was getting off meds"). I ultimately included this in the category, "Transition into Program" but made sure to incorporate this specific element into the overall description. I also created codes related to "Loss of Friendship," "Choosing to Leave," "Positive Experience Leaving," all which ultimately fit under the broader categories that had been created earlier in the analysis phase, such as "Turning Points" and "Transitioning Out of Program."

As with all qualitative research, the data analysis was completed using an iterative, reflexive process; it did not proceed in quite as straight a line as may appear from this step-by-step description. In reality, categories were created, combined, altered, or reworded in a process of going through the data multiple times and sifting through potential meanings. For example, "Comparisons to Previous Approaches" was at one point its own larger category, but upon further reflection, I chose to include it as a smaller category "Unique Therapeutic Approach" under the broader theme of "Programmatic Elements/Structure." Likewise, a major category that emerged, "Significant Realizations," was eventually categorized under the larger theme of "Turning Points" along with other categories such as "Expulsion" and "Therapeutic Consequences."

Individual Textural Descriptions

Once thematic analysis was complete, I considered the code structure of each individual's interviews to describe the "what" of the experience, i.e., the textural description. This description captured the details of what the individual had experienced, along with the thoughts and feelings associated with the experience. I completed this process separately for each participant, making sure to take note of any analytical reflections that would be useful in creating the later structural description. I often paused and contemplated how much I was attending to the "what" versus the "how" during this phase, to ensure that I kept with the actual external details of what participants had shared with me, without putting additional meaning to it.

Individual Structural Descriptions

Once the individual textural descriptions were complete, I began the process of imaginative variation, which involved considering different perspectives, roles, and functions of the textural descriptions (Moustakas, 1994). This step focused on understanding the "how" of each individual's experience. I used my analytic memos and biographical information, including my reflections of my past personal experiences with the participants, to consider multiple aspects of the context in which each participant had experienced therapeutic boarding school. This included their early life histories, such as family, social, and school contexts; developmental, medical, and psychological issues; the events and context leading up to their placement in therapeutic boarding school; nonverbal behaviors noted in the interviews; and aspects of a participant's personality that would affect their perception of their experience. I created a chart that summarized much of this information for ease of reference. I frequently referred back to my notes, the

original interview, the invariant horizons, and the code structure throughout the analytic process. Using this process of imaginative variation, I constructed the structural textures resulting in the essential structures of the experience of therapeutic boarding school placement.

Individual Textural-Structural Descriptions

When the textural and structural descriptions were complete, I joined these descriptions together to create the individual textural-structural descriptions for each participant. Using a process that Moustakas called "intuitive integration" (1994, p. 100), I reviewed the initial textural descriptions several times and integrated the structural descriptions to produce the essential, invariant structure of the ultimate "essence" of the individual's experiences.

Composite Textural-Structural Description

Once the analyses and individual textural-structural descriptions were written for each participant, I reviewed the interview transcripts, the textural-structural descriptions, and my analytic notes once more. I searched for and underscored the aspects of the experience that appeared to be essential to the entire group. I also considered aspects that seemed unique to one or two participants and considered how or if to include these in the final composite description. I thoroughly reviewed the documents, checking notes and highlighted sections for review, until I felt satisfied that I had captured the essential elements of the experience. I then wrote the composite textural-structural description, which is the essential, invariant structure of the "essence" of the experience of therapeutic boarding school and represents the ultimate findings of the study.

Trustworthiness

Lincoln and Guba (1985) discuss the importance of establishing trustworthiness as part of the qualitative research evaluation process. Four criteria are used to establish trustworthiness: credibility, transferability, dependability, and confirmability. I will discuss each in turn in relation to this study.

Credibility

Similar to internal validity or the "truth value" of the findings, credibility establishes confidence in the findings. In this study, I sought to ensure the integrity of this study by capitalizing on the established, trusting relationships I had with the participants prior to this study. I also reflected on the "prolonged engagement" I had with the program and the participants while I worked at the school, and I included these thoughts in the process of epoche. Though time had elapsed and care was taken to establish a different working relationship with participants within the context of this study, a trusting rapport was easily established. In fact, when the interviews were completed, all of the participants commented that being asked to reflect on their experiences and share them with me was a positive, meaningful process for them. When asked if my previous role working in the school may have impacted the way they shared information in the interviews, they stated that they believed they could share more freely with me than a "stranger" given my background and general understanding. The trust and rapport I was able to establish with the participants gives credence to the validity of the responses I received.

To further address the "truth" of the findings, I utilized extensive member checking, giving the participants multiple opportunities to review and clarify their

statements. Lincoln and Guba (1985, p. 314) state that this is the "most crucial technique for establishing credibility." I asked for clarification throughout the interviews, making sure I fully understood what they were trying to convey in any given moment. After finishing and transcribing all the interviews, I sent copies of the complete transcript to each participant for their review and feedback. All participants responded and none made any changes. Finally, after constructing the life history profiles, I sent copies to each participant for review. I heard back from four participants, who commented that they were generally very accurate; however, three offered slight adjustments or clarifications, which I then incorporated into the final manuscript.

I took additional steps to build credibility into the final results. In presenting the steps in the data analysis process, I included verbatim text from the data to validate my reasoning and descriptions. I also kept reflexive and analytic memos so that an outside reader could trace my steps as I created the individual and composite descriptions. Finally, the three-series interview structure that I utilized lends itself to establishing internal validity and authenticity:

It places participants' comments in context. It encourages interviewing participants over the course of 1 to 3 weeks to account for idiosyncratic days and to check for internal consistency of what they say. Participant experiences are connected and comments of one participant are checked against those of others. This interview structure works to allow them to make sense to themselves as well as to the interviewer (Seidman, 2006, p. 24).

Overall, I attempted to address credibility in many ways and at various points in the study to maximize the trustworthiness of the findings.

Transferability

Parallel to, yet quite different from, the construct of external validity, transferability relates to the degree to which findings can be applied in other contexts. In

qualitative research, that cannot be met by using statistical confidence limits, but rather through the provision of "thick description." The onus is placed on the consumers of research to understand the limits of generalization, given the richness of the data that the researcher provides. In this study, I hope to provide adequate description of the framework, research question, methods, findings, and conclusions, so that the reader can fully understand the context in which to place these results. The participants in this study were very forthcoming and the questions I asked elicited rich, thick description which was incorporated into the individual descriptions. Finally, I will discuss implications for research and practice in chapter 5. Taking these steps allows the reader to make quality judgments about the transferability of the findings.

Dependability

Though multiple techniques to establish dependability—or reliability—have been discussed (Lincoln & Guba, 1985), I chose to provide an audit trail to establish the *process* of my research. Theoretically, providing an audit trail allows someone to replicate my study, step by step. To provide for this, I kept a research journal detailing a log of my actions, reflexive memos, epoche, analytic memos, and detailed steps in the data analysis phase. I also filed all raw data, including audiotaped recordings, written field notes, demographic questionnaires, and my handwritten notes taken during the interviews. All transcriptions and documents containing the horizonalization, coding cycles, and theming of the data have been kept for review. The individual textural, structural, textural-structural, and composite textural-structural are also available for review. By providing this information, I enable an outside evaluator to observe and analyze the process of my research.

Confirmability

To establish confirmability, or the degree to which the study's findings are shaped by the participants and not the researcher, I once again relied on providing an audit trail as described above. In this case, the audit trail serves to establish the *product* of my research. As Lincoln and Guba (1985, p. 318) state, the auditor "examines the product and attests that it is supported by data and is internally coherent so that the 'bottom line' may be accepted." As part of establishing confirmability beyond the audit trail, I worked with a colleague with skills in qualitative research but with no connection to this study, who served as my peer reviewer. We discussed the general framework and method of analysis prior to my starting the data analysis phase. After agreeing to keep what she observed confidential, I shared documents (using pseudonyms) containing the initial reduction of the interview data into invariant horizons, initial and subsequent codes/categories, and larger emerging themes as they developed. I also gave her access to the life history profile, category charts that I had created for myself during the analysis phase, as well as initial drafts of the individual descriptions so she could examine the links I made in the analytic process. We had multiple discussions during this phase, and she served as an objective reviewer throughout it, giving me feedback and suggestions for ways to proceed. I also sent similar documents to two committee members for their review to obtain both qualitative research and clinical psychology perspectives.

Research Ethics

I took several steps to ensure that ethical standards were followed throughout the research process. First, I submitted my research proposal to the university's Institutional Review Board for approval before formally beginning the study. The board reviewed my

research plan, ensuring that I had thoroughly considered the safety and confidentiality of the participants and their data. At this stage of the process, I was asked to retain official permission from the Head of the Academy to procure contact information of graduates of the program in order to request their participation in the study. I also altered my recruitment plan to ensure that I obtained signed informed consent forms from participants before meeting them in person, so as to minimize any potential pressure that they might feel to engage in the study. Once I met with them, I reviewed this form with them again in person in order to provide opportunity for questions. I received approval to proceed and agreed to abide by the terms and boundaries of plan.

Second, I took several measures to protect the confidentiality of the participants' identities, though I informed them that I could not guarantee complete confidentiality or anonymity due to the nature of the study. Because they were all over the age of 18, I contacted them directly by e-mail to briefly introduce them to the overall research plan and requirements, should they decide to participate. With the exception of the signed consent forms, all other hardcopy and electronic materials used only the pseudonym that they chose during our first meeting. I kept the signed consent forms locked in a separate file from the other forms and hardcopy materials. I deliberately deleted all traces of communication (both phone and e-mail) after making contact. I pledged to erase or destroy all identifying information at the conclusion of the study, and all remaining materials and data one year after the completion of the study. My peer reviewer verbally agreed to maintain confidentiality; I also did not provide her with any identifying information of the participants.

Finally, given the nature of the interview questions, I approached each participant sensitive to the possibility that difficult memories may arise during conversation. I carefully monitored each participant for potential discomfort or emotional distress. No participant voiced such feelings; in fact, to the contrary, they stated that it was beneficial for them to speak to me about their experiences.

Summary

In this chapter, I outlined the rational for using qualitative methodology for this study, including a review of the study's purpose and framework. I briefly reviewed the basic elements of phenomenology. I described the phenomenological research design in which in-depth interviewing was used to collect verbatim data from affluent adolescents regarding their experiences in a private therapeutic boarding school. Because of my role as the research instrument in this study, I described my personal and professional background that qualifies me to conduct this research. I then reviewed the several elements of the data collection process, including the sample characteristics, program description, participant demographics and initial sketches. Finally, I explained the procedures I used to collect the data as well as the rationale for using the modified Stevick-Colaizzi-Keen method of data analysis to analyze and interpret the transcribed interview material. Finally, I reviewed issues related to the trustworthiness of the findings and the ethical considerations that I took in conducting the study. In the next chapter, I will present the findings of the study.

CHAPTER IV

FINDINGS OF THE STUDY

In this chapter, I present the findings of the study as a result of analyzing the data as described in the last chapter. Specifically, I used the modified Stevick-Colaizzi-Kaam method (Moustakas, 1994) to analyze the verbatim transcripts of interviews with each participant. In accordance with the steps outlined by this method, I first analyzed each individual participant's set of interviews. In the last step, I created a synthesized narrative describing their experiences and the meaning it has for them. I will present the findings of the study in the same manner that I analyzed the data. First, I present a general overview of characteristics of the sample, followed by the detailed life histories of each participant. I then present the individual textural-structural descriptions for each participant. For the sake of brevity and so as not to be redundant, I have chosen to include only these integrated textural-structural descriptions rather than the separate individual textural and structural descriptions that were developed for each participant. Finally, I present the composite textural-structural description, the synthesis of individual descriptions. In this final descriptive narrative, the unified voice of all the participants will represent the ultimate findings to the study's research question: "What are the lived experiences of affluent, at-risk youth who attended a therapeutic boarding school?"

All names of individuals, programs, and schools that are referenced in the findings have been changed to protect confidentiality.

Overview of Participant Profiles

The participants in this study shared many similar characteristics, though their paths to the Academy varied. In reviewing their backgrounds, distinctive patterns were found including: 1) challenges in early childhood due to medical issues, developmental delays, family problems, and other significant trauma or loss; 2) personality characteristics, such as shyness or extreme emotional sensitivity, that affected relationships; 3) evidence of advanced cognitive abilities, as well as academic disabilities or weaknesses (in some cases); 4) family environments that supported intellectual development and emphasized academic achievement and success, 5) school environments that did not consistently acknowledge and actively support students' cognitive strengths and/or weaknesses, or emotional difficulties; 6) high school cultures characterized by distinctive wealth, very high expectations and pressures to succeed, and/or "party cultures," 7) emotional disconnection or extreme conflict with one or both parents (adolescence), 8) lack of closeness and/or notable conflict with sibling (adolescence); 9) pattern of negative peer relationships, including bullying, and 10) early engagement with mental health/psychiatric treatment.

In addition, all but one participant had two working parents throughout their childhoods. All but one participant attended private school for all or part of their education. Almost all participants had one sibling, with the exception of one who was raised primarily as an only child but eventually had a half-sibling during adolescence. Two participants, both whose parents had divorced and who incidentally were of two different cultures/ethnicities, mentioned challenges related to growing up in two households with distinctive cultural values, language, and/or geographical differences.

All but one participant spontaneously mentioned religion as having had a role in their development. All participants described struggling with significant anxiety and/or depression at some point during their adolescence; most described emotional and/or social difficulties from a young age. All but one reported suicidal ideation and/or gestures during adolescence; one reported suicidal ideation as young as age five. A chart presented in Appendix G organizes the data for each participant for ease of comparison and reference. In the life histories that will be presented, the reader will obtain a more detailed account of these issues and how they unfolded in each participant's life.

Life History Profiles

Participant 1: Nicole

Nicole was born three years after her brother, Michael. Both of her parents are highly educated with successful careers and significant leadership positions in law, higher education, policy-making, and government. She described her parents as hardworking, career-oriented people; their work was very much integrated into family life as she grew up. She was raised in a large city in the Northeast, where she attended prestigious, elite private schools from kindergarten through high school. Her K-8 education was in a single-sex academic environment, which she enjoyed and appreciated because she says it increased her confidence. She later attended the same private college-preparatory high school that her brother attended. When she was in 10^{th} grade, he left home to attend an Ivy League college.

Nicole recounted several positive early childhood experiences, including fond preschool memories and fun family activities and trips. However, she also experienced several challenging and traumatic events at a young age. She was diagnosed with a rare

disease and underwent specialized medical care at the age of 4. She recalled this experience as "scary" and unpleasant. In addition, she had pronounced speech impediments that required intervention. She reported significant bullying and teasing during her early years, given her difficulties communicating. These experiences made her fearful of speaking, particularly in front of her peers, which followed her into adolescence.

Growing up, Nicole felt closest to her mother, who she experienced to be more emotionally available and understanding of her emotions than her father or brother. She and her mother shared similar interests and activities, which they often did together. She described her father as emotionally distant and less approachable, as he often responded in ways that invalidated her emotional experiences. She shut down emotionally, and as she entered adolescence, they had an increasingly negative relationship. In addition, Nicole stated that she had a conflictual relationship with her older brother who had difficulty managing his anger. He was emotionally and verbally abusive towards her, and this escalated as she entered high school. She stated that while her parents were aware of this dynamic, she did not feel supported or protected by them.

Nicole also has clear memories of multiple deaths that occurred during her childhood. She lost her maternal grandmother, with whom she was very close, when she was 5. A few years later, at age 7, her maternal uncle died, likely from suicide (though she was unaware of this at the time), which took a devastating emotional toll on Nicole's mother. Because Nicole felt closest to her mother, she experienced her mother' grieving and subsequent emotional distancing as a type of emotional abandonment. She noted that this was a defining moment in her childhood. Nicole also remembers her great

grandmother and her first grade teacher, who reminded her of her grandmother, passing away not long after her grandmother had died. Later, in adolescence, Nicole lost a camp counselor who she admired and trusted. The camp counselor died suddenly and unexpectedly from a medical issue. Nicole felt both deep sadness and guilt surrounding that death. The cumulative effect of these losses, directly and indirectly through the changes in family dynamics, cannot be underestimated in understanding her development.

Nicole described herself as being a shy and emotionally sensitive child from early on in her life, so much so that it impacted her relationships with others. Her mother sought help from a therapist when Nicole was 3 years old because of her concerns about the intensity of Nicole's emotions and chronic sadness. Around the age of 9, Nicole began experiencing significant bouts of unrelenting sadness and depression. At age 10, she began cutting to deal with her emotions. Her self-harming behaviors expanded and became more serious over time; she began cutting, burning, restricting food, and hitting herself when faced with difficult situations. By age 13, she began to voice suicidal thoughts. At this point, she began outpatient therapy and was placed on an antidepressant. Throughout her later childhood and adolescence, her parents sought a variety of mental health services including individual outpatient therapy, family therapy, intensive outpatient therapy, and psychiatric medications. She was eventually taking up to eight different medications. With the exception of one therapist, Nicole reported generally negative impressions and experiences in psychotherapy. She said she did not trust that most of them genuinely cared about her. She also said that she never wanted to be on medication.

Despite Nicole's emotional challenges, she loved learning and was motivated to succeed in school. In her small, private school, she did not recall any special services offered except for occasionally grouped classes based on ability. She remembered being placed in some advanced classes, but also struggling with reading in her early years. Growing up in rigorous academic settings with high pressures to succeed, Nicole excelled as both a student and active leader in her school communities. She was particularly drawn to reading, writing, and literature; in high school, she was co-editor of the school literary magazine. Still, she reported feeling insecure and inferior to her brother, who displayed extremely high intelligence and exceptional academic achievement. Her family culture also placed a high value on intelligence and academic success, and she internalized these values to the point of being perfectionistic in her approach to academic tasks.

Nicole recalled having a few, close friends throughout her childhood and adolescence. She seemed to have friendly interactions with others, though not overly concerned or preoccupied with developing peer relationships. In fact, in adolescence, she stated that she deliberately hid important emotional struggles from her friends, out of fear that they would no longer like her if they knew the "real" Nicole. This pattern continued until she felt so depressed and in despair that she actively alienated and isolated herself from her peers.

Despite on-going therapy and medication, her struggles with depression, anxiety, and self-harming intensified in high school and reached a critical point during her junior year when she became actively suicidal, resulting in three psychiatric hospitalizations. Her first attempt occurred soon after the unexpected loss of her camp counselor, for which Nicole blamed herself. She recalled struggling with persistent hopelessness and

fear. After voicing suicidal thoughts to a teacher, she went home and overdosed on sleeping pills. She spent 1 to 2 weeks in an adolescent psychiatric ward. She briefly stopped self-harming, but then resumed the behavior more seriously about a month later. She once again voiced suicidal thoughts to her teacher, who informed Nicole's mother. She was placed in another psychiatric ward, this time for 2 to 3 weeks while her medications were adjusted. She reported feeling "betrayed" because her hospital stay was longer than she anticipated, which affected her responsibilities at school, which was one of the few things she still cared about and felt good about. She felt overwhelmed with the amount of school she had missed, and once she realized she would not be re-elected as the editor for the school magazine, she made a final, serious suicide attempt. One morning, she quietly walked out of her family's country house and into the back woods, where she jumped from a 55 ft. cliff. To the surprise of her parents and the paramedics, she survived the fall, sustaining serious damage to her pelvis, legs, and lungs. After weeks of painful recovery, she spent another two weeks in a psychiatric ward before being admitted to an adolescent inpatient residential treatment setting renowned for its effective use of Dialectical Behavior Therapy (DBT), a treatment validated for use with individuals diagnosed with Borderline Personality Disorder and/or traits. She recalled having symptoms of Posttraumatic Stress Disorder (PTSD), including difficulty sleeping and recurring nightmares of the fall, for which she was prescribed more medications. She spent three months in the inpatient program, and then with her parents' support, she researched and visited The Academy. She decided that she wanted to try a different approach to address her psychological issues.

Participant 2: Corev

Corey was born in the Northeast but was raised primarily in the Mid-west; he has a younger sister. His father is a vascular surgeon; his mother was an occupational therapist before choosing to stay home to raise Corey when he was born. Corey's early life was significant for medical issues, including a chronic digestive disease (GERD) and colic. He described himself as a "difficult baby," based on his parents' reports. When he was 4, his parents sought therapy and medication to help with his behavioral issues. He described himself as "sensitive" and "attention-seeking" with a penchant for drama and disruptive behaviors. He believes he was diagnosed with ADHD and prescribed stimulant medications throughout his childhood and adolescence.

Corey has very positive memories of his early childhood home. Though his father worked, Corey felt that he had adequate time with him. He felt closer to his mother growing up given the fact that she stayed home and spent more time with him. His relationship with his sister was friendly when they were young, though it grew more distant and conflicted as they both grew older. Corey described his family as "disjointed"—not the kind of close-knit family he sometimes imagined others had. His parents valued passion, hard work, and achievement, and tried to pass these values on to him. Corey had difficulty sticking with activities or interests; he often started and stopped before mastering a new skill.

Though Corey recalled happy times in early childhood, his late childhood years were difficult and painful. When he was in third grade, he recalled finding out that his family was moving to the mid-West, an experience that he described as "traumatic" because of the suddenness with which he was told and the later challenges he had making friends in his new community. He was the victim of frequent and severe bullying

throughout elementary school, which intensified in middle school and continued throughout his adolescence. He was highly motivated to make friends and be accepted into the "popular crowd," though this often backfired given his desperate striving that made him an easy target to those who would take advantage of him.

His family moved to an affluent, conservative neighborhood, where Corey spent the rest of his childhood. He attended the public school there. He recalled being a bright, curious child who didn't feel challenged in school. Though he was placed in some advanced classes, he did not recall receiving any specialized gifted education. A teacher recommended he transfer to a private school to better meet his academic need for challenge. His parents enrolled him in an all-boys private school. However, when he was in middle school, he started showing signs of academic underachievement and depression. He started to get into serious conflicts with his parents and did not have a group of friends. After trying outpatient therapy and various medications, his parents sent him to a therapeutic wilderness program for two months. From there, he transferred to an all-boys therapeutic middle school on the East coast, where he stayed for four months.

After completing this program, he returned to the all-boys private school for high school in his hometown. However, having felt academically ill-prepared in his therapeutic middle school, he entered high school taking basic classes. In 9th grade, he was tested and found eligible for an individualized education plan (IEP). He continued to underachieve, putting more energy into building and maintaining an active social life than his academic work. He struggled with anxiety, depression, and compulsive eating and computer usage to deal with feelings of isolation. He continued to see outpatient therapists and try various psychiatric medications. He said he often manipulated his

psychiatrists to prescribe certain medications or dosages based on his own internet research.

He described his high school setting as highly affluent and having a "party culture," which heavily influenced him. He began engaging in increasingly risky behaviors to gain popularity. In his junior year, he started to experiment with drugs and alcohol, deliberately trying to change his image to impress his peers. Conflicts with his parents escalated to include verbal aggression and oppositional, defiant behavior. His grades dropped precipitously. He began using illegal drugs regularly, along with his prescription medications, and would drive under the influence. One night, he crashed his friend's car, but his friend helped cover for him, reassuring him that it would all be taken care of. Corey recalled feeling on top of the world because he finally felt he had gained access to a popular group of friends. Shortly after this incident, to his absolute surprise, he was escorted to another therapeutic wilderness program where he eventually opened up to his therapist and parents about being gay. He was in wilderness for 16 weeks before transferring to a college preparatory therapeutic boarding school in the southeast, where he stayed for about a year before transferring to The Academy.

Participant 3: Zoe

Zoe was born in Taiwan to her father, an American business man, and her mother, a Chinese real estate agent. She has a brother who is 3 years younger. When she was 4 years old, her parents separated and she and her brother moved to Hawaii, where they were raised primarily by their mother with the support of her extended family. She grew up seeing her father a few times a year, for about a week at a time. Later, when she was

older, she and her brother spent summers with him in Taiwan, though she reportedly never developed a close relationship with him.

Zoe's early life was fraught with intense conflict in the home, as her parents' marriage was quite "rocky" and even abusive at times. She says her only memories of her parents involved them fighting, and later on, her mother would often speak about Zoe's father's abusive behavior which made Zoe fear and distrust him even more. Even after her parents divorced, she recalled intense hostility and conflict between them. She was always well aware of the underlying conflict between them, and often felt she had to take sides; later, she said she realized she could use this to her advantage, which she did. She stated that her father was an alcoholic, and his behavior was quite unpredictable when he drank. When he was sober, he seemed like a "good enough father," though in the rare times she had with him, he was typically too occupied with work to spend quality time with her. She shared traumatic memories of her later childhood and adolescence when she would be scared given his unsafe behavior, which included driving her and her brother when he was under the influence of alcohol. She also recalled instances of being in situations with her father and his friends, who were also intoxicated. In these moments, she feared something bad (e.g., sexual advances) might happen to her. While she did not report experiencing any sexual or physical abuse, she seemed quite frightened that at any point, this could have happened when she was living with her father. Zoe had a closer, albeit conflicted, relationship with her mother, who she described as extremely competitive, driven, athletic, and independent. Her mother worked very hard to financially support Zoe and her brother. By the time Zoe reached early adolescence, she

began getting into more conflicts and power struggles with her mother. These conflicts escalated in later adolescence, as will be described further.

Though Zoe was raised with traditional Christian values, such as kindness and charity to others, she was also immersed in a familial culture that emphasized outward success and achievement, particularly because many of her family members had worked their way up to the upper-middle class over several generations. As the first born child amongst her extended family on both paternal and maternal sides (i.e., cousins) and as one who showed great potential for success, her parents and relatives had extremely high expectations for her. As Zoe put it, it was not that she felt pressure to live up to a standard that everyone else had achieved (because most had not), but rather, she was expected to *set* the standard. She said, "I felt from many members of my family that I was going to do the things that no one else could do and that it was important to do so." These expectations were along the lines of getting into Harvard, going to graduate school, or potentially becoming a lawyer.

She also felt her mother and some family members placed a very high emphasis on physical appearance; Zoe's mother devoted a lot of energy to maintaining her own health and physical attractiveness. She also was raised in a Hawaiian culture that looked somewhat unfavorably upon Caucasians. Because Zoe's physical features looked more Caucasian than Asian, she often felt inferior and insecure. She wanted to look more like her family members and the other Asians around her, who were the majority in Hawaii. In addition, her negative feelings towards her Caucasian father also impacted her ability to accept the aspects of herself, including racial attributes that reminded her of him.

In the context of Zoe's unpredictable and unstable household, she quickly found school to be a welcomed respite and escape. She attended a very small private Christian school from kindergarten through eighth grade, interacting with the same small group of peers throughout her childhood and early adolescence. She said she loved reading and would spend much of her free time going to the library to check out large stacks of books. She was always a very good student--compliant, conscientious, and a quick learner, though she struggled with math. She responded well to the structure and predictability of the school day.

When it was time to go to high school, she applied to several private schools in a process she says was similar to applying to college. In her social circles, this was the typical path to take; the public school culture was very different and did not necessarily prioritize college. To her surprise and delight, she was accepted into every school to which she applied, a rarity. She was accepted into the most selective, prestigious college preparatory schools and chose to attend one that was famous not only for its academic program but also its athletic program. She eagerly transitioned from her small private school to a much larger school with a culture she described as "upper-middle class." The high school had a reputation for being full of snobby, "white, rich kids," though she reported that her experience there was more positive than the reputation might imply. There, she ran track and was a top athlete; she found herself to be particularly gifted at running and physically pushing herself to reach goals. She was also a high achiever, excelling in all Honors and AP classes, as well as an active leader in her school and community. She reported being very motivated to get into a top college—perhaps Ivy League—as that was a large part of the school and family culture's expectations. Perhaps it was no surprise that she was eventually accepted into her top choice college, a highly selective and prestigious liberal arts college on the West Coast.

Though Zoe was very successful in academics, she had more difficulty in the social world. She described herself as "very shy" from a young age. Her love of reading engaged her mind but also kept her in her own world, her "safe place" as she put it. She recalled "being mean" towards other children when she was younger. Because she went to school with the same peer group from K-8th grade, she said her negative social behaviors quickly repelled most of the other children in her class until she had no options for friends. When she reached adolescence, she felt socially awkward but was able to make a couple of friends in middle school. However, when she transitioned to the new high school, her shyness was again an obstacle to her making new friends and she found herself quite lonely again. Though she had teammates on her track team with whom she was friendly, she said it was not until her senior year of high school that she finally felt she had found "her group" that she could connect with in more natural ways outside of school.

Though Zoe recalled having intense fears when she was a young child, including being afraid to fall asleep at night or suddenly finding herself in "nothingness," it wasn't until the burgeoning of adolescence that more serious concerns arose. As her body began to change, she became more and more conscientious about her weight, even though she was never particularly heavy. In middle school, she and a few friends began focusing on what they ate and, later, exercise and burning calories. Zoe began to focus so much that she became obsessed and began getting into major conflicts with her mother, who at one point, suggested she had an eating disorder and needed help. Zoe refused to accept her

assessment, and she continued to restrict her eating and over-exercise as she transitioned into high school.

Once she became more heavily involved with running track in 10th grade, these issues and conflicts with her mother escalated. After a devastating, high-stakes track meet in which Zoe, though making her best time ever, did not place as high as one of her friends, she became passively suicidal and began compulsively exercising to an extreme. She felt that her mother judged her friend to be a better runner because of her naturally thin body type, and so Zoe set out to attain this through excessive exercising. Her daily routine eventually consisted of nothing else but going to school and exercising for hours. This continued into 11th grade, where the concerns became more grave and apparent. After doctors found that she had a rare stress fracture in her leg and a dangerously low heart rate, Zoe's parents became increasingly concerned and insisted that she see a nutritionist and therapist.

Zoe began a period of intensive outpatient therapy specifically designed to address eating disorders. She attended the groups but refused to participate, not wanting to admit that she had a problem. A big part of her refusal was due to the power struggle with her mother; she felt that if she admitted she had an eating disorder, that would make her mother "right," and she was too angry at her to let that happen. In the process, she also refused to take any psychiatric medications though these were recommended. During the summer before her senior year her parents were told to monitor her at all times.

Because they were forcing her to eat and restricting her exercise, she began to secretly purge. She quickly resorted to binging and purging as her primary method of controlling her weight.

Fights between Zoe and her parents escalated. As they tried harder to keep her safe, Zoe fought all attempts at their control. After one particularly intense argument with her father, he called the police and they took her to a psychiatric hospital where she stayed for a week. Zoe recalled being incredulous that she had been sent there, as she looked around and saw severely mentally ill people around her—she did not identify with being a patient. She said that even the psychiatric staff seemed curious about why a successful, smart girl like herself would be in the hospital. Her mother soon took her home, and Zoe agreed to participate in traditional outpatient therapy. Still, her secretive binging and purging continued. By March of her senior year, soon after hearing she had been accepted to college, Zoe was surprised to find that her parents had jointly orchestrated for her to be sent away to a therapeutic wilderness program. She was there for four months—much longer than a typical stay—and eventually came to interview at the Academy.

Participant 4: Jesse

Jesse was raised in a large, affluent suburb outside of New York City. His parents both worked throughout his childhood. His mother is currently an editor; his father is retired. He described his town as "very, very rich and liberal," with a heavy emphasis on outward success, appearances, and academic accomplishment. He has an older sister who he described as the "perfect child." She was a high-achiever growing up; she now attends an Ivy League school in the Northeast. In stark contrast to his sister's compliant nature, Jesse's description of his early years centered on his unusually strong-willed personality which caused difficulties in school, in his family, and eventually, with his peers.

Jesse's parents created a home environment in which ideas and opinions were highly valued. He recalled regular family dinners and engaging conversations about world events, politics, music, and other intellectual topics. Raised in a "pretty cultured" environment, Jesse's intellectual and artistic pursuits were heavily encouraged. His entire family was involved with music; his parents sung in the choir, his sister played the piano, and Jesse eventually took up the guitar. Jesse described his father as socially conservative; he placed a high value on church, God, and family. He cared a great deal about how the children did in school, but he equally valued how much care they put into the household responsibilities. Jesse said that his father valued doing humble, familycentered work. His father was also emotional and prone to angry outbursts; he would often become frustrated if Jesse did not take care of his household chores. His mother, in contrast, was the "logical authority" figure in the home; she was better able to manage her emotions even when she was upset. She placed a high value on school performance and achievement, tending to micro-manage Jesse in this area. Extended family played an important role in Jesse's life, and he remembered growing up with the expectation to spend time with his whole family. Though Jesse described what seemed like a generally positive home life, he said that he never felt a particular emotional closeness to his family or a sense of "family" that he often observed in his friends' families. As he grew up, he felt less and less of an emotional attachment to his family. He said that by the time he reached adolescence, he took his parents or granted.

Jesse described himself as one who had an early sense of injustice and a tendency toward rebellion against authority, particularly if he perceived adults as having arbitrary rules or behavior not worthy of his respect. He was highly verbal, opinionated, and

argumentative. He recalled using "logical language" as early as kindergarten to argue his point. He remembered being sent to the principal's office in his early years for his oppositional and noncompliant behavior. He said that his parents tended to reason or argue with him when he misbehaved; they rarely if ever established and applied consequences for his negative behavior. In the fifth grade, Jesse established that he was an atheist, a decision that was in stark conflict with his father who insisted upon regular church attendance. As he grew older, his arguments with his parents, particularly with his father, grew more intense. He became increasingly oppositional, disrespectful, and defiant as he entered his high school years. Over this time, he developed great animosity towards his father, and in high school, the verbal conflicts often times turned into physical conflicts.

Though Jesse exhibited outwardly opposition and defiant behavior in the home, his description of his experiences in school seemed less troubled, at least until he reached high school. He attended public school and remembered being in special, advanced classes in elementary school. He recalled being tested to participate in these classes, suggesting he may have been identified for gifted education; however, he wasn't certain if this was the case. He had particularly fond memories of a fifth grade teacher in one of these advanced classes who seemed to recognize, value, and encourage Jesse's strong voice and opinions in the classroom. Jesse would often argue against the status quo, and at least with this teacher, he was encouraged to do so. He also remembered this teacher as being critical in establishing Jesse's early interests in politics, history, and music.

In middle school, Jesse chose to attend a smaller, alternative middle school. This school was recommended by his fifth grade teacher because of its reputation for having

"very strong academics" and a more intimate school community. He recalled being very engaged in the academics during 6th and 7th grades. He had positive experiences in these first two years. In these early adolescent years, Jesse had a circle of friends in which he felt it was "totally acceptable" to be his "nerdy, crazy little self in its full capacity." He said he and his friends were all a big "goofy" and liked to argue. He was a charismatic leader within this group of bright students. He recognized being influential in both good and bad ways, and he quickly learned how much power he could have amongst his peers.

He began to lose interest in school during 8th grade when he perceived the quality of teaching to be poor and not intellectually stimulating. In this same year, he became curious about drugs and alcohol. He initiated drug-use among some of his friends. His grades declined, and he began to cut corners. Though he still appeared to do well externally, he began to take advantage of opportunities in which he could get by with academic dishonesty. By the end of middle school, he began to separate himself from his more positive, academically-oriented peers. He became the self-described "rebellious kid" though he was not as openly defiant at school as he was at home.

Jesse transitioned from his small middle school to the large high school in his district. He said this school had a very strong "party culture" as well as a "cut-throat, cruel environment." He described the students as having a "work hard, party hard" attitude, which included a "big weed smoking" culture mixed with the expectation of attending Ivy League colleges. As he put it, "we were all relatively privileged kids" in a culture that placed a high value on materialism, sexual conquests (particularly for boys), and drugs and partying. Jesse distanced himself from his "nerdy" group of middle-school friends and attempted to become a part of the more popular social circles. Jesse's

academic performance dropped even more as he became heavily involved with the party and music scene. He said by this point, he was "uninspired by academics." By 10th grade, he was cutting classes and doing less and less school work. He began smoking marijuana daily; he also dealt drugs. He became openly defiant with his parents and continued abusing drugs and alcohol, despite their attempts to control and manage his behavior.

Jesse recalled a moment during his 10th grade year when he experienced rejection by his peer group, an experience he described as "traumatic" because his peer group was the only thing that mattered to him at the time. He recognized that his argumentative and paranoid behavior likely pushed his friends away; however, this understanding didn't make the loss any less painful. He completely withdrew and ceased doing schoolwork, doing drugs in isolation. He eventually told his parents that he was depressed. He began seeing an outpatient therapist and was placed on an anti-depressant. He made a suicidal gesture, taking an overdose of his anti-depressants with vodka before going to school with hopes that he would gain his friends' attention and their emotional care. When this didn't have the effect he hoped for, he sank into despair. Eventually, with the support of his therapist, he dropped out of high school mid-way through 11th grade. He began taking classes at the community college. His parents did not approve of this route, and eventually they sent him to a therapeutic wilderness program where he remained for 2 ½ months before transferring to the Academy.

Participant 5: Griswaldo

Griswaldo is the only child born to his father, a creative inventor, engineer, and entrepreneur; and his mother, a successful actress. His parents amicably separated and divorced in his early childhood; he says he does not recall any conflict between them.

When Griswaldo was around 5 years old, his mother returned to her home in Russia, where she eventually remarried and had another child. Griswaldo remained in the U.S. with his father, spending his early childhood in a large Northeastern city. He spent his later childhood and early adolescent years in Russia. He moved to live with his mother, stepfather, and half-brother, where he attended a private school from 3rd through 8th grade. He returned to the U.S. for high school, once again living with his father. These transitions and the challenges it brought about will be further elaborated.

Griswaldo was born deaf; for the first two years of his life, he could not hear. Eventually, through medical procedures, he gained his hearing although the initial deafness delayed his speech development, as well as his social and emotional development. He recalled having difficulty modulating his voice and respecting others' space. He also described himself as being "obnoxious" and attention-seeking as a child, and this negatively affected his relationships with peers. He remembered being bullied quite frequently. These social problems continued throughout his childhood and adolescence, leaving him feeling quite lonely and isolated. Though he struggled with language and socialization, he was a very curious young boy who taught himself to read via his computer at the age of four (or perhaps earlier). He recalled spending a lot of time alone as an only child with a father who was frequently busy working. Griswaldo busied himself with watching TV, playing with his computer and chemistry set, reading books, and building things. He remembered being an extremely imaginative and creative child, who spent a lot fantasizing and creating his own little worlds.

While Griswaldo's parents were loving and well-intentioned, he didn't recall them playing an active role in parenting him. He spent very little time with his father who, as he put it, "let me do whatever I wanted." His mother, though affectionate, had a passive and somewhat disengaged parenting style; while his stepfather tried to be the disciplinarian. Griswaldo always had difficulty with his Russian stepfather, partially because of the very real language barrier that existed, but also because of his stepfather's domineering and aggressive style. Griswaldo described the home atmosphere in Russia as "poisonous" because he was always fighting with his stepfather. In general, Griswaldo reported that he did not have a strong connection to his parents; however, he tended to vacillate between feeling more attached to the parent he was not living with at any given time. He said perhaps this was because he idealized the absent parent in his mind.

Academically, Griswaldo attended public school in the U.S. for grades K-2, then switched to a private school in Russia for grades 3-8. He reported having a negative experience and attitude toward school as a child, saying he was a "terrible student from the beginning." He was diagnosed with dysgraphia, and because it physically hurt to write, he refused to do any work which required writing. He received speech therapy services for his speech development. He reported not being interested in school, though he very much enjoyed puzzles, building blocks, and reading encyclopedias as a child. In Russia, he said he struggled "all the time," and received regular tutoring though this was in itself challenging because it was not in his native language. Despite these academic struggles, compounded by the language and cultural challenges, he skipped a grade in middle school at the principal's recommendation given his high ability.

When he returned to the U.S., he interviewed and was accepted at a selective college-preparatory magnet school renowned for its inquiry-based education program and emphasis on the arts and technology. As the challenges at school increased, he began

avoiding school more and more, rushing home to the internet as his way of escape. He stopped doing homework and failed a few courses. His father hired a professional to help him with organization. Eventually, Griswaldo was referred for testing in the 9th grade, which reportedly revealed highly advanced reasoning abilities as well as achievement 3 years above grade level (in some subjects). He said he felt smart but knew he struggled academically; this discrepancy was confusing to him. He said he also lacked motivation, as he "didn't learn things I actually wanted to learn." After many years of struggling, he was finally placed on an IEP in high school, which allowed him to use a laptop, have special class periods for studying and organization, and take untimed tests. He believes he was diagnosed with ADHD at some point, for which he was placed on stimulant medication once again, for a short time in high school. He discontinued it due to adverse side effects. He said that he did not receive any specialized educational services in grade school because he was attending a private school in Russia and they had a "different approach." Finally, though testing and descriptions of advanced cognitive development at an early age is suggestive of high ability, Griswaldo reported that he did not receive any gifted education services.

In addition to on-going challenges in school, Griswaldo had a long history of social and emotional problems. At age 5, around the time he was being bullied and his mother left for Russia, Griswaldo recalled writing a suicidal note which his teacher found. It was at this time that he saw his first psychotherapist and was placed on a stimulant medication for hyperactivity and behavioral issues. He said he remembered also having one or two therapists in elementary school; he did not receive mental health services while in Russia. As a young boy, he frequently had thoughts of hurting himself

and others; he recalled feeling very angry at school due to the on-going bullying. In Russia, he continued having difficulty making friends, saying "people are cruel," but also recognizing that he came off as a "know-it-all" in classes, which pushed peers away.

By the time he returned to the U.S. and began high school, he felt "gloomy" and lacked confidence that he could succeed academically and socially in this new environment. He had felt like an outsider in Russia; and now he felt the same way in the U.S., having been away for so long. Feeling socially "lost," he became more and more anxious and depressed. In the 10th grade, he started actively researching suicide methods on the internet, and over the course of time, he made several suicidal gestures including overdosing and trying to hang himself with a belt. His father became aware of these problems, and in the 11th grade, Griswaldo was hospitalized at least three times, placed on a several different psychotropic medications, and at some point, diagnosed with Bipolar Disorder. He said that each time he was hospitalized he was given additional medications; at one point, he was on a total of eight. After several unsuccessful attempts to get him the help that he needed, his father sent him back to Moscow to be with his mother. However, this stay lasted only two months because Griswaldo made another suicide attempt while he was there and was promptly transferred back to the U.S. and placed in another psychiatric hospital. He then came to the Academy.

Individual Textural-Structural Descriptions

Now that the reader has an understanding of each participant's background, I present the individual descriptions of the participants' lived experiences in therapeutic boarding school. In presenting the "what" and "how" of their experiences, I attempt to capture the essence of the therapeutic boarding school experience using their verbatim

statements to support the findings. The structural elements of the descriptions have been created in the context of understanding their life histories.

Participant 1: Nicole

Entering In

Nicole's experience at the Academy tells the story of her transition from a childhood and adolescence fraught with multiple losses, trauma, depression, and social isolation, to a young adulthood built on hope, empowerment, connection, and a more secure psychological foundation. Her early experiences of getting bullied and teased for her speech impediment led to a gradual silencing of her voice. Her experiences in her family left her feeling unprotected, invalidated, and emotionally abandoned; over time, she lost confidence that her parents knew how to best help her. Her experiences with mental health professionals and more traditional treatment centers left her longing for something—or someone—different. She "hated" being on psychiatric medications, as she felt it only confirmed that there was something inherently, biologically wrong with her that could never change. It appeared that what she most longed for was authentic, caring relationships with others—for someone to "get" her. She had not learned how to effectively engage with her parents, her brother, friends, or most of the people who had tried to help her in the past. What she had learned to do was "cry for help" in the most subtle and not-so-subtle ways, only to feel frustrated, helpless, and angry with others, as well as guilty and angry at herself when nothing and no one could seem to "fix" her.

Nicole entered The Academy having spent a significant amount of time researching and considering her options after three months in an intensive residential treatment center following a serious suicide attempt. With her parents' guidance, and

after thoughtfully considering what kind of environment she thought might help her, she decided she wanted to attend The Academy:

I really wanted to go to The Academy. It was clear to me that I wasn't going home after that [residential treatment] program. I didn't even really want to go home. I had done that, and it had gotten worse every time.

Nicole gave three reasons why she was initially attracted to The Academy: the non-medical approach; the positive peer community; and the strong college-preparatory program. She said that:

...the biggest thing, appealing thing for me, at first, was no medication. And I was afraid that if I didn't get off medication then I'd pretty much be on it for the rest of my life, and I didn't want that. And then as I learned more about it, kind of everything about empowering the student and being in a very peer-based community and getting to live your life...in a way that felt way more real and natural than a lot of what the programs offered. ...And also another big appealing point for me was that most other programs don't have good academics, and even though I struggle with anxiety, I always cared about school and loved school, and wanted to be able to be in a school that would challenge and interest me and also give me opportunities for a good college. I think I looked up on the website and looked at the colleges that the students would go to... And I read about courses that sounded like things I'd want to take, and when I went on the websites of other schools, I didn't have the same experience. And they didn't really have kids going on to the very good colleges.

In addition to her research on the program, Nicole had the opportunity to attend the graduation ceremony where she heard the personal stories of the graduates, which she said was "a very inspiring experience." This had a significant positive impact on her, giving her hope that she, too, could turn her life around:

Each student will kind of give their pre-Academy story and experience there, and talk about what's changed and talk about their hopes for the future. And, I don't know, just hearing these people describe--like, in the early stories, things that sounded very similar to what I had experienced, and then just seeing how far they had come and how genuinely they seemed to love themselves and love what they had set up for their futures and love their current lives... I had never seen anything ... as genuine of a turn-around as that, and I really, really, really wanted that (laughs)... It seemed really genuine and would be hard work-- but also possible!

Upon entering the Academy, she was impressed yet intimidated by the peer-community. While a part of her was convinced she needed a setting like this in order to rebuild her life, she had to deal with her doubts and fears about the process:

The whole peer aspect was really scary for me, because at home I never talked. My friends were not the ones I talked to about what I struggled with... and so I was kind of terrified about the fact that...the only people I could be friends with were also the people who I needed to start working through all this really difficult stuff with and talking about things that I had been stuffing for years. But it also seemed like that was how you *could* make genuine friendships, and have people who actually cared about you and could help you. And so it was scary but also something I knew that I wanted.

In addition, she had to deal with the doubts and concerns of her parents and professionals, some of whom strongly recommended against her attending The Academy. Aside from concerns about her potentially being the only girl in the program at the time, they worried that the therapeutic program may not be an appropriate fit:

People were really worried about me coming to The Academy. The doctors at the program I had been at before did not think it was a good decision. ...And even [Academy staff] and everyone was concerned about that setting because I was--it wasn't only the medication piece, but also, just the way that The Academy is structured with peer confrontation and that level of openness and pointing out where people are falling short... I think people were afraid that given how sensitive I was, and kind of already self-hating, that I would just internalize all that as further reasons to not like myself, instead of taking it as helpful. And I think [my parents]...had the same hopes that I had about the school but also had a lot of fears. I think they thought that if it could work out, it would be great--but they were just worried that given all the different factors, it seemed like it might not be a good fit for me. That it wouldn't be a good place. But I guess they were just hopeful enough to give it a try...

Given the nature of her struggles and the multiple concerns about the appropriateness of fit, she did not gain immediate acceptance into the school. In fact, she was interviewed three times before being admitted, a much lengthier and more challenging interview process than most students undergo. Her perseverance and determination to convince herself and others that she was ready for the program was significant and proved to set the course for the rest of her stay.

The sense of hope and anxiety she had when she first considered attending the Academy is understandable. Even with the helplessness and despair she felt, a part of her hoped that a solution truly existed. She paid attention to the stories of others like her—the Academy graduates who had successfully managed to get past their troubled pasts and move on to brighter futures. Though she did not yet have full confidence that she would be successful and happy, the "evidence" she observed in others was convincing enough to give it a try. She thoughtfully considered what had not worked in the past and came to her own decision that the Academy was her best option. Even when the authority figures in her life voiced their concerns, she showed determination and motivation to do whatever she needed to do to get admitted—traits that, in the past, had resulted both in high academic achievements and life-threatening self-destruction.

Nicole entered The Academy with a set of coping strategies she had learned in her previous setting, which she said helped with her transition as she "wouldn't have been able to go straight from the psych ward." Even with these new coping skills, she found it challenging and "scary" to enter in and integrate into the small school, where she was expected to "open up" to her peers. The community size hovered around 20 to 25 students the entire time she was there, which she "liked because then you could really get to know everyone," but also had its challenges. In addition, she was the only girl in the program for a while, and one of only a few who still actively struggled with self-harming and suicidal thoughts. For some time, she felt isolated and very different from the other students in the program. She reflected on her insecurities during this early stage, along with her first positive experiences of connection with peers:

I had been so keeping everything in...I would just hold it all in. So one of the big things that staff at The Academy tried to get me to do at first was just open up about all the stuff I had been holding in-- With peers, yeah... with staff as well. But the biggest emphasis was with peers. (Pause) Which was something I loved about The Academy. I really liked how connected everyone seemed. It was also intimidating to try to break into that... because it did just seem like a very close, connected community and I wasn't quite sure, like-- at first, it definitely made me feel more lonely to kind of be living there but not really be in it yet... And so at first, I thought I wouldn't fit in...But then when I talked about what I felt that led me to cope the not-very-good-way that I coped, it was pretty much the same thing that they felt but just picked different ways of coping not very well. And realizing that and feeling that connection, and very genuine empathy that no therapist could ever have given me-- because they didn't have those experiences, and if they did, it wouldn't have been very professional (laughs) to talk about it! Just opening up to other people my age and feeling them connect to me about those things, I just never felt that before.

Nicole struggled with entry into the school not only because of her social anxiety and general lack of self-assurance, but also because she was the only girl in the program at the time. With her extensive experience of being in all-girls' schools and treatment settings, this was an entirely new dynamic—and certainly a challenging one for any girl to experience. In addition, the abusive relationship and feelings of inferiority she experienced with regard to her brother only heightened her feelings of intimidation around the intelligent, confident boys she encountered at the Academy.

Her fears could have easily prevented her from opening up to others, keeping her hidden and isolated, as had happened so many times before. However, with the structure and high expectations of the peer community, she eventually began to relate, share, and experience genuine connection with others her age. She found ways that she was similar to others, even when their surface characteristics seemed glaringly different. This feeling of true recognition and acceptance by her peers—something she both desperately longed for and feared throughout her adolescence—was a significant turning point for Nicole. Her ambivalence finally shifted to an awareness, based in experiential knowledge, that trusting, interpersonal connection was what she needed to regain hope, perspective, and a healthy sense of identity. What she didn't experience in her childhood, she began to experience in a caring community of actively engaged peers and adults. Her voice was beginning to be heard.

Certainly, one of the most important features about the school, in Nicole's mind, was the positive peer culture and the expectation that students help one another, rather than depending solely on a professional therapist for treatment. In fact, she pointed out that the language in the school reflected this: the clinicians were not referred to as therapists or "doctors;" students referred to all clinical and faculty by first name. The philosophy and structure of the program rested on students actively caring about one another and communicating in authentic ways. This approach was a significant departure from her previous experiences:

I think one of the biggest differences is just how The Academy structures it [communication with peers]. 'Cause like, at psych wards...They didn't always say this explicitly, but we weren't really supposed to talk to each other about like, the

things that were difficult for us. We were supposed to talk to the therapist about that, and then just like chat with the other kids there, which to me, felt unnatural and isolating. And what The Academy does, they pretty much say, you *have* to do this-- "Yes, you should talk to your"--they don't even call them therapists, they call them "primaries"—"Yes, you should talk to your primary, but the most important conversations that you have are going to be with your peers and that's where you need to put your focus."

Perhaps because she had negative experiences with peers from an early age, it was particularly important for Nicole to learn how to give voice to her thoughts and feelings in a safe, supportive community of peers. It is developmentally appropriate for adolescents to gravitate away from family and toward their peer group, and Nicole seemed to thrive when she had time and space away from her family. While this appeared to be objectively true, she later expressed having missed them and wished she could have spent more time with them while she was at the Academy. Of course, this was said upon later reflection, after which she had done considerable therapeutic work with each member of her family. The peer-based approach was evident in several aspects of the program. For example, while clinician-led therapeutic groups occurred three times a week, students held a one-hour group every evening in which no staff was present. She described this as a time "where they kind of all gather and process whatever's going on and check in with the community, and just talk about things. There's no staff in that. It's student-run." Additionally, the way students move through "levels" in the program is largely dependent on student evaluation and feedback. Finally, she described the seriousness of the expectation that peers be actively involved with one another: "peers are really encouraged to check in with each other...not even encouraged, it's kind of like a demand...that's the expectation."

In addition to the centrality of the peer-based model, the values and culture of the community stood out to Nicole as important elements of her experience in the program, evident from the beginning days of her stay. In addition to openness and honesty, she said, "Really pushing each other and working with each other to improve is, at least for me, one of the essential things about The Academy. And being caring but not being excusing." One of the "cornerstones" of the program, "compassionate confrontation" was both useful but challenging for Nicole to adapt to without feeling hurt at times, especially in the beginning of her stay. Some of her early challenges included "not really speaking up...and kind of being quiet and private....and I think at times, just sitting in my sadness." She recounted that she "definitely cried a lot at the beginning" and was "pretty lonely." Her peers would point out when she was "not really doing enough to push pass that, and try and connect more, and try and feel happier." While this process hurt, she recalled appreciating the fact that her friends cared enough to push her to do more to get out of negative emotional states.

Nicole talked at great length about the high expectations in the program and how that affected her. She reported high expectations in multiple areas: academics, therapeutic progress, peer and family relationships, as well as general pragmatic responsibilities, which occupied much of her time when she wasn't working on classwork, participating in therapeutic groups, or spending time talking with peers. She interpreted others' high expectations of her as meaning they truly cared about her and believed in her. In other programs, she had experienced different expectations, which seemed to reinforce a

passive approach. She said, "I was so used to... being held to the expectations of a patient or -- nobody really expected me to do all that much to change my situation. It kind of felt like I was just sitting around waiting around for some doctor to give me the final right combination of medications or whatever." She sensed that as long as she refrained from self-harming, others concluded she was doing well. This made her feel as if the doctors were primarily concerned about her physical safety. She stated:

But I still felt horrible about myself, and I still was miserable and didn't really want to be alive. And for them to say, "That's ok, you're doing the best you can, you're not hurting yourself''-- like, I didn't want to think that was the best I could do because that's not a very helpful reality to live.

In contrast, it gave her hope to think that "if people are holding me to these [high expectations], and pushing me to these, it's because they really believe I can achieve them and I really wanted to achieve them."

Nicole seemed to find the Academy's expectations a refreshing change from other traditional treatment approaches. Being held to the expectation that she would no longer self-harm presented her (and likely the school community) with an interesting dilemma. On the one hand, no one seemed to have held her to such a high expectation before; perhaps she appeared too sweet and fragile for anyone to confront or ask her to do anything that might feel too difficult. Could she really be trusted not to self-harm after jumping from a 50 ft. cliff, determined to die? On the other hand, people believing that she *could* refrain from self-harming if she just made the choice to do so, put the power and control back into her own hands. It was both a scary and seductive challenge—the challenge to take personal responsibility for her own life. No longer was it the job of her

others to ultimately keep her safe. While they would be there to support her when she needed them, she would need to learn to trust herself to do the right thing. Perhaps this challenge was what intrigued Nicole from the very beginning and gave her hope. It was a divergent path from a medical approach she had grown accustomed to; she no longer wanted to be diagnosed and prescribed "therapy" and medication to fix her problems. She longed to be just a normal, healthy teenage girl with close friends, an understanding family, and a bright future ahead of her.

This alternative approach led her to come to some important conclusions about herself. As she began the hard process of changing, she could take credit for the positive decisions she had made. Growing up in a high-pressured culture and family, where achievement seemed to overshadow other aspects of her development, she started to see how she could be valued for more than just her impressive intelligence, diligent work ethic, and stellar grades. The perfectionistic Nicole shared the dark and ugly sides about herself, the sides she wished didn't exist. If she didn't share them, her friends pointed them out to her, in hopes that she would recognize she needed to change. And change, she did. Though the sensitive little girl inside cried through much of the process, she also developed the strength and courage to continue moving forward. As she did, she saw a new version of Nicole emerge: a version that could accept the positive and negative aspects about herself, actively care for herself as much as she cared for others, and show both strength and vulnerability without feeling unworthy, ashamed, or guilty. This new version came about by deliberate choices on her part made within the context of a caring group of friends and mentors-- not by medications or the brilliant skill of a therapist.

The Process of Change and Turning Points

Nicole reported having significant realizations while in the program, which shifted her perspective or mindset. One of these realizations involved the concept of radical personal accountability and, as a result, the sense of empowerment.

For the first time, the solution was not that I was going to get medications that were going to help me or anything like that. The only solution was work that I, myself, was going to do, and that was really empowering and made me feel a lot more hopeful than I had felt in a long time because it really felt like things *could* change, and that for the first time, people weren't telling me that there was something wrong with me at my core-- but it was also scary because it was going to be hard to do...I didn't need medication to be better. There was nothing...physically wrong with me that I could not improve if I tried. There was just nothing other than myself and the circumstances I had been in that was holding me back from being a happy, fulfilled, successful individual.

This shift influenced her beliefs and behaviors from a helpless, hopeless mentality to a more powerful, positive, and hopeful one. She began believing that she could ultimately change her thoughts and behaviors, and in turn, change how she felt about herself, others, and her future. She described the difference it made, making these changes without medications and realizing she wasn't controlled by biology:

The main difference I felt was just, like, it felt good to know that I wasn't on medication for the first time in many years. It felt really good to be off of them. It's kind of like the same thing I was talking about with choice and empowerment. It sort of felt like when I was on medication, if things did start to go better, I

couldn't even take credit for that-- because I'm on medication, you know, that's what's going to change how I feel. But then when I wasn't on medication and feeling better, I was like--this is 100% because of me and certainly, because of the people who care about me and are supporting me-- but no sort of biological anything.

Nicole reflected on other ways she felt empowered during her stay. The program was relatively less restrictive than her previous settings. She described how this aspect of the program also empowered her to take better care of herself:

There's no lock down or anything. The program I was at before, where I ended up self-harming, there's supposedly 24 hours surveillance. At The Academy, there's nothing like that but-- I liked that when, at the end of the day, I hadn't self-harmed, I knew that that was my choice and I could give myself credit for that and it wasn't because someone was watching me all the time. It was because I had decided that that wasn't the way I wanted to live myself anymore and that to me, felt empowering, too. So it was a less restrictive setting which, I think a lot of people were worried about for me, but I think the lack of restriction empowered me enough that it actually kept me safer than when there were kind of more structures to keep me from hurting myself.

Still, the process of changing was not easy. She was tempted to go back to old ways of coping, including self-harming. She knew that if she engaged in those behaviors, she would be asked to leave and would be transitioned to a more restrictive setting. She said she was motivated by her desire not to "blow that chance" and lose the opportunity at The Academy. This helped her make healthy choices. However, her deeper

commitment lay in the vision she had for herself: "Ultimately, the life I envisioned for myself that I wanted was not one in which self-harm played a role. I wanted to feel better, and at times that helped me, you know feel better in the moment, but I knew it wasn't what was ultimately going to make me happy."

Whereas other students seemed to have had more dramatic turning points during their stays, Nicole said that her turning points were more gradual. For example, an important process for her was shifting into a leadership role where she could give to others:

When I started making the shift from the new kid who was relying a lot on others and just trying to make it there, to a leader of the community who could give back....I think that, for me, was the most important time because ... I realized that my experiences--even though they were painful and even though I wasn't proud of the choices I made, they gave me a lot that I could give to others. ...and all these things that I thought were so negative for so long, actually did have a positive side to them....and that was really important for me at The Academy, too.

Again, she described the general process of steps she took that gradually resulted in a more positive self-concept and sense of self-efficacy:

When I started feeling better and when I started making friends and when things started going well for me there, I could really credit myself because I could clearly see the series of choices I had made: like, I had gotten up in the morning, I hadn't self-harmed, I'd talked to my friends, I had built relationships. I had put hard work into that, and it was just-- there were those series of steps that I could look back on and feel proud of. And that was really nice for me, because for the

first time, I started feeling proud for the way I was living my life instead of, you know, feeling like I was this person that if people really got to know, they would hate and reject. I started to feel like I was a friend worth having.

A lot of Nicole's focus was on changing the way she thought and felt about herself, in the context of relationships with others. While much of this therapeutic work involved her peers, she described spending considerable amount of energy working on relationships with her family members. With support from her primary clinician and peers, she worked to establish a better, healthier relationship with her brother: "I was able to forgive him and we were able to move on from a lot of that stuff, and that was really wonderful. I have a much better relationship with him now and I don't feel those same feelings of inferiority." Similarly, she worked on improving the relationship she had with each of her parents. While in retrospect, she wishes she could have spent more time with them, she appreciated the weekly phone calls and visits during Parent Weekends, which occurred every six weeks. Later in her stay, she was able to visit home during school vacations. She acknowledged that her parents "received a lot of support as well, and they really changed, and they really worked hard...in the same way I worked hard. And I appreciated that a lot."

Once Nicole saw positive changes in herself, she realized she had a tremendous gift to give to others—the gift of her life experiences. One of the significant realizations she had during her time at the Academy was that her negative past could be turned to a positive if she could use it to benefit someone else in need. When she began "giving back" to others, she blossomed and became a leader in her own life, in addition to her community of peers. As she felt more secure in who she was, she could do the important

work of processing difficult issues with her family. Navigating this important adolescent task of separation and individuation, Nicole improved her relationship to each of her parents, seeing them realistically and forgiving them for letting her down in the past. Having learned to make trusting, mutual relationships with her peers, she had the skills to attempt renegotiating a healthier relationship with her brother based on mutual respect and care. These positive changes in her relationships in turn improved the relationship she had to herself. She began to see that she could have a positive impact on others; she was no longer hopeless and helpless.

On Academics

In addition to the therapeutic elements of the program, Nicole's experience was largely influenced by the academic program and the way it was integrated into the program as a whole. Nicole was a creative, ambitious young woman with high ability, evidenced by her long history of academic pursuits and high achievement in rigorous, selective, high-pressured private schools. Speaking to her, one was quickly impressed with her intelligence and maturity that placed her way beyond her years. For Nicole, a strong academic program wasn't just a nice addition to the therapeutic program; it was central to her feeling like she was fulfilling her potential and working towards a future, which for her, included going to a selective college. She recognized that because she thrived in rigorous academic settings, she would not have been satisfied with a therapeutic school that had a mediocre curriculum.

The school's reputation for having strong academics was, thus, an initial motivating factor for her, and in her experience, the academic program lived up to its reputation. However, beyond being challenged intellectually, she was surprised by the

various ways she was able to integrate her personal exploration and processing of life events into the curriculum. For example, she recalled how her English teacher often allowed students the option of writing "personal pieces," which she said were "really important" to her. These pieces helped her process painful memories, such as the death of her counselor and the suicide of a friend who had been in a previous treatment setting. The freedom to write and share about her personal life made her feel that she "didn't need to hide" who she was in the classroom. Moreover, she said it positively impacted class discussions: "I think they became a lot more rich [sic] because students could add very real experiences and very emotional analyses to what we were learning that...helped us personally, but also made the learning experience a better learning experience. So, it had both personal and academic benefits." In her previous school, she felt she had to compartmentalize her academic self and her "real self" outside of the classroom. As she described it, "you're supposed to be a student, not a whole person." At the Academy, "it was just nice to get to be a whole person."

It was as if the intellectual stimulation of the academics, combined with the personal, individualized attention she experienced in her classes, helped her integrate two important sides of herself: a highly intellectual side with a highly emotional side. As she expressed, being at the Academy helped her to feel like a "whole person" because she no longer felt the need to compartmentalize various aspects of herself. Unlike her father and brother, who seemed so capable of shutting off their emotions in exchange for highly rational and intellectual minds, Nicole always felt too emotionally sensitive and just not "smart enough" to feel totally accepted within the highly intellectualized culture of her family. At the Academy, however, she learned it was acceptable—even preferable! — to

be both an intellectual and social-emotional being. She could finally be her true self with teachers, peers, clinical staff, and even family. Everything happened under one roof, so to speak. Perhaps this is what she really meant when she said she finally felt "at home." She had come to a place of acceptance and comfort being in her own skin.

Nicole said that because classes were so small, the academics were highly individualized. While other students had been very poor students before entering the Academy, Nicole had largely managed to maintain high levels of academic success despite her emotional turmoil. At the Academy, she recognized that teachers placed appropriately high expectations on her academically. She said she was "given a lot of cool activities to go further with the work...doing extra and advanced work in the curriculum." She was also given opportunities to give back to peers, which she enjoyed doing. She was the Head of Tutoring and had various opportunities to be a teaching assistant.

Life Post-Academy

Leaving the Academy, Nicole related that she felt a mixture of hope and anxiety, just as she had when she entered. The difference this time was that she possessed the necessary skills and confidence to enter a new world—the college experience—and succeed. She was proud of the hard work she had accomplished while at the Academy, and empowered by the knowledge that she could tackle future challenges because of the evidence that she had already done so. Though she was confident, the transition was not without challenges. She first explained her understanding and the expectation of how she would live her life once she left the school:

One of the things that I really like about The Academy is that I feel like things are set up so things will keep improving afterwards. And that's not to say that everything's perfect when you leave, like, for me, it was a difficult transition to make... The idea isn't that you leave The Academy and you're fixed and you're done. The idea is that The Academy really helps you turn things around and helps you lay a foundation for a better future, but you're supposed to keep living your life in the ways that helped while you were there, and that if that all works out, things will continue to improve. It's not like this "I've achieved the program" and now whatever...it's just kind of this life-long thing of trying to live a good life, which I think--it's a good goal for everyone to have, but especially for those of us who lived negative lives and didn't really believe that we could live positive lives. Having that sort of experience--that really showed me that I *could*, and that if I kept working, it would keep getting better.

While she knew that the realistic expectation was she would continue to encounter challenges in life, she reported feeling somewhat surprised and discouraged when this actually happened. The realities of leaving her safe, structured "home" at the Academy left her feeling anxious and a bit out of control. Typical of many individuals leaving treatment settings, Nicole experienced some regression, resorting to excessive exercising as a way of trying to feel more in control. She became concerned that her relationship to exercising was becoming unhealthy. She sought the support she needed and felt good about the way she handled it, adding, "I think it definitely, while it was discouraging and all of that, I think it also gave me a degree of real world confidence that The Academy hadn't given me...So there are positives, too." In this "real world" experience, she

reached out for help, eventually made better decisions, and learned to deal with the anxiety of her new setting in healthier ways. This gave her even more confidence that what she had learned in therapeutic boarding school had transferred over into life outside of the Academy.

Making new friends and navigating the process of sharing her past with them was another challenge. She said she waited many months before opening up about her past, including her stay at The Academy. Although she felt scared and vulnerable, she reported getting positive reactions from the handful of close friends she trusted enough to disclose such sensitive information. While she made good friends in college and maintained her friendships from The Academy, she said she still struggled to find ways in which she could connect in deeper, more meaningful ways with others:

I think another something that was really great for me while I was at The Academy, was how many opportunities there were to do things that felt meaningful. And that felt like they gave me an opportunity to redefine negative aspects of my life. And this past year, one of the things I've had a hard time with, was not really feeling like I had very many of those opportunities, or not really knowing where to look for them.

She reflected on the ways that she believed she had changed as a result of her work at The Academy. She said she felt hopeful about her future, proud of what she had accomplished, empowered to learn from her mistakes and make changes as necessary, and confident that she could live a healthy and happy life. She had learned to forgive herself and care for herself in very tangible ways, including dealing with her anxiety in healthier ways. As she put it, she "changed a lot" but "didn't become a different person."

Instead, she said she became herself but also a "much more positive version of" herself. "I was kind of given a glimpse of the best version of me that I could be and told to strive for that for the two years that I was there. And that's kind of what I tried to do."

In her final reflections on the meaning of her experiences at The Academy, she shared how she finally felt "at home":

Current Meaning

It became a home to me. I hadn't really felt at home in my house, just because of like... (Pause) everything with all that I was hiding from everyone. And at The Academy, just because I was allowed to be myself, I really felt like I became so much more myself, and felt like I had so many strong relationships, it really did just start feeling like home. And... it was really important to have that for a while.

Nicole's gratitude was evident in all that she shared. She directly conveyed her feelings of gratitude for the opportunity she had at The Academy and for the friendships she formed there. Her experience still felt "present" in her life in college. She reported feeling very attached because of the stark difference in her life pre-Academy and post-Academy, but also perhaps because she still felt a sense of guilt about her past:

My experience at The Academy is definitely really important to me. And still feels like a big part of my life. I know some graduates leave and kind of feel happy to be done and wanting to just move on with life. But I think I feel...more attached to the time I spent in The Academy and my experience there... definitely...for me, it really meant a *lot* because I knew my life was falling apart before I went. I didn't really think...when I was at home, I never believed that I was going to graduate from high school just because I was convinced that I was

going to kill myself before that. So... not only graduating from high school but doing it in such a positive way that turned around every assumption that I had about what life was going to be like for me...and just instilled something that really means a lot. And I don't know, but it's been something I've thought about a lot in the past year because it is something I want to keep alive, but I also do want to be able to move on and live my life and not be chained by the past... I don't want to keep living like I'm needing to make up for something I did wrong in the past.

At this point in her life, Nicole sounded immensely happy and grateful for the experiences and positive changes that occurred during her time at the Academy. In addition to the importance of the deep and intimate peer relationships that she made, she expressed a sense of hopefulness and anticipation for her future that she had never had before. In fact, she never really believed she would live to experience life beyond adolescence. Because she not only survived her tragic fall, but found a way to transform her painful life experiences into a beautiful way of giving back to others, she seemed stronger, more resilient, and more grounded than most others her age. Her once soft and faltering voice was transformed into a clear, steady one—one that allowed her to advocate and speak on behalf of others in a variety of leadership roles. Sadly, one challenge for her remained finding a new community or venue in which she could continue to give back in meaningful ways as she did while she was at The Academy. Behind her smile, I could hear a lingering longing and ache for greater connection, purpose, and meaning echoed in her final words as she compared her life at college to the one she had at the Academy: "I think another something that was really great for

me...was how many opportunities there were to do things that felt meaningful. And that felt like they gave me an opportunity to redefine negative aspects of my life. ... I guess I'll find myself at times really wanting to connect to that side of myself, and express it in a meaningful way, and not feeling like I have as many opportunities as I did when I was at the Academy." It seemed as if she was looking for a new place to call home.

Participant 2: Corey

Entering In

Corey was admitted to the Academy half-way through what should have been his senior year, which effectively meant he added a post-grad year to his high school education. Having already attended two therapeutic boarding schools, he jumped at the opportunity and recommendation by his educational consultant to transfer to the Academy because he was told it would be a better academic fit for a bright, collegebound student like himself. While he initially cited academic reasons for the transfer, he later admitted to other struggles at the previous school that he was trying to escape. As he so aptly pointed out, it was his decision to come to the Academy:

I chose to come to the Academy. I was also 18. I turned 18 two days after I came to the Academy. So I could have left at any point. I mean legally, could have left and not...have the fear of the police being called because I was a run-away or something like that.

Even so, as he entered into the reality and challenges that would characterize his stay, he said that choosing to stay in this voluntary program did not always feel like a choice: "Yeah, it could be debated if I actually felt like there was that choice. I mean...it never actually felt like a choice in my mind."

Much of what he described of his first impressions seemed to be in stark contrast to the program he had just left. His frequent comparing and contrasting of the two schools reflected ambivalent feelings about his decision to transfer. He felt concerned about the small size of the school, which for him equated to a smaller social pool available for friendships. To make matters worse, these students initially seemed "really weird" to him, not the typical "mainstream" type he tended to gravitate towards.

I didn't really like everyone. I didn't like it. I kind of wanted to go back to Riverbrook, I think initially, too. But I was kind of excited, too. It was something new. I've always liked going into new environments in some ways, 'cause it's like a fresh start.

He expressed feeling intimidated and taken aback by the culture and atmosphere at the Academy, which seemed more "real" than the other programs he had experienced. As he explained, "students [at the Academy] were in line with staff" which was different from his prior experience. There was no "underground," though at first, he doubted that this could be true. At his prior school, he said many students snuck around the rules and got away with it. It both surprised and scared him that he was in a place where the students appeared to take their lives and the therapeutic work seriously; they seemed committed to following the rules of the program. He admitted that he had gotten away with "superficial" change in previous programs, and had he not come to the Academy, he may have continued to coast. At the Academy, he described his thoughts and feelings about seeing those who were emotionally honest and vulnerable:

[The Academy] was a very real place, very honest...place. Where people actually want to do work. And so that scared me. People weren't superficial, and I didn't

like that. I guess part of being in programs for a very long time gave me a cynicism about how honest people were being. So at the Academy, where people were incredibly honest, and I can like actually, intellectually see that people were being honest—there was always this part in my gut, that always was like, "Well, are they actually being honest?" Like, when certain people would cry...actually being, like, "Is he actually being honest?" Just because I had been so cynical of people crying at Riverbrook.

His initial therapeutic group was an emotionally intense experience, involving the expulsion of a girl who later returned to the school and became a close friend of his:

My first group was an expulsion group...and it was very incredibly intense and there was a lot of crying, and there was a lot of yelling and what not. So it was very intense for me...It was very scary. I was very scared. But you know, I was like, I can handle this. I was kind of on my..."I'm gonna like do this, I'm gonna woo them," kind of type thing.

Seeing students confront one another in group shocked Corey. He believed his peers were too harsh. He recalled a group that focused on a girl who had been engaging in self-harming behaviors, which were not allowed at the Academy:

She was purging and stuff like that. And everyone was like, "Dude, you can't do this." I was just like, oh, my gosh! Can somebody please be a little bit nicer to her in some ways? She's struggled with this like, 17 years of her life? How is she just gonna change it in just a few weeks?

These startling first impressions left an indelible mark on him. Corey was often anxious and guarded, worried that his peers would "attack" him in group. Even when he

intellectually understood the philosophy behind giving "caring confrontations," he said he was "never fully able to get out of the mindset that [he] was feeling attacked." He admitted that the anxiety also carried over from his behavior in his previous school, where he had broken rules and come clean, only to live in fear of accumulating "more guilt" at the Academy. As he put it, he was "very controlled" by fear for much of his stay, afraid of the consequences of his behavior.

I could *not* drink caffeine at the Academy. Because I would get so anxious...I would feel so guilty about something. I have a different mindset than other people, but I would feel guilty about random, small things...that I just shouldn't feel guilty about. That I didn't need to feel guilty about.

In addition to feeling anxious, Corey described feeling "trapped" and exhausted, in need of personal time and space. While he noted that he had much more freedom at the Academy than his previous therapeutic programs, he felt he had less freedom in other ways:

Well, at the Academy I felt more freedom than [previous programs] so I was very happy. I would go to town a lot, a lot, when I first got there. Because I just wanted to exercise that freedom. I went to CVS, I went to the library. All the time. To the point where the librarians knew my name.... Yes, I definitely had more freedom. But then, in a certain sense, I also had less freedom socially? I felt like...I felt like I was more trapped socially because there were less kids... there were also less girls there, too. And I guess, less people who I really felt like a drive to be friends with.

Despite having more freedom, he still struggled with feeling trapped in an environment with more structure and rules than he preferred. For example, he missed using social media and being able to take naps whenever he wanted. He felt like he "was in a bubble a lot of the time." He didn't like that he felt pressure to be with his peers all the time. He recognized that these feelings probably stemmed from his being in structured programs for much of his adolescence. He was just ready to move on and live a "normal life" in college. Still, he had enough perspective to stick it out because it helped him reach his ultimate goal:

For a long time, I felt very trapped. I pushed myself through. There were a lot of points where I just really wanted to leave. But what really got me through was wanting an actual life. Like, I knew if I left, only bad things would happen. Like I wouldn't be here [in college] right now, obviously, if I had left. And that's what I really wanted. I wanted a good college... so that was a lot of what drove me, at least initially, at the Academy.

He also realized that he needed the structure of a therapeutic program because he wasn't ready to make healthy choices on his own. Despite his understanding this, it still was painful to be away from home for so long:

I felt trapped but I needed everything that was happening at the Academy. It was beneficial that I felt trapped in some ways. But I guess not being able to leave and stuff like that... I didn't go home for two and a half years after being sent away.

The work he did at the Academy was emotionally intense, anxiety-provoking, and tiring. He deliberately took steps to "make free time" for himself. He knew he needed to relax and have time away from the Academy, both of which he was able to do towards the end

of his stay. Perhaps his overall experience could be summed up by the metaphor he offered:

I feel like the Academy for me, in a lot of ways, could be best summarized by a metaphor that I use about, just like feeling like I was in a pool...and swimming and just very exhausted. Very, very incredibly exhausted. And wanting to grasp onto the side, but not being able to until I was finally done. ...And so there was a lot of fear that I might drown, there was a lot of fear, just a lot--very much running on fear. A lot of it. And I don't think that's an experience that everybody faced at the Academy, and I very much think that it was something that I felt because I had been in therapeutic schools for so long and just wanting to, you know, be out and have freedom.

Programmatic Elements

While Corey described much of the negative feelings of being in the program, he also spoke positively about the programmatic elements that were important to him. First, he was struck by the "real-ness" and honesty within the community—and the fact that, from his perspective, the Academy was effective.

I touched on it earlier, but the level of honesty that everybody has, which has now been instilled upon me. And the actual work--like, the program works. It *actually* works. (Confidently) In a way that is actually helpful.

He also said that the program's focus on honesty, integrity, and high expectations had an impact on him:

Like, I could get by with a little quick thing at Riverbrook or somewhere like that.

Or like, let people in a little bit and that would get me by... or *feel* like it was

getting me by. It wasn't really. Everybody knew, I think the therapist knew, I think people actually knew, they just didn't know how to actually get it out of me. And I think at the Academy, they [staff] actually do know how to get it out of people. ...and then there's that [peers] as well, which is supportive of it.

He described the nuances he perceived in the expectations held at various programs, stating that at the Academy, he believed that high expectations were enforced:

More is expected from you at the Academy...than anywhere that I've ever been. You're expected to *do* (emphasis) all your responsibilities; you're expected to *do* (emphasis) everything. You're expected to be honest. Whereas at Riverbrook, yes, you're expected to do those things, but how much they're enforced, how much of a value system, and how much they're imposed is very different. ...Because there's always that fear of getting kicked out [at the Academy], where it's not that way at anywhere else that I was.

In addition, Corey commented on the role that the peer community played in reinforcing these expectations. In his mind, because students were aligned with staff, the students were trusted to play a large role in monitoring the community:

[The peer community] monitored the expectations. I feel like it somewhat came from staff in some ways, and then came upon the students. ... Everybody trusted -- I mean, people trusted staff there [at the Academy].

From his perspective, the approach at the Academy resulted in deeper, more lasting changes. Whereas he thought he made some behavioral changes in previous programs, he didn't think this was enough:

...I don't think people change in the same way that they do at the Academy at Riverbrook though. I don't think it's the same necessary changes that they need to make. Like, I changed at Forest Prep when I went there. I changed how I acted. In some ways. I changed how open I was. I mean, it wasn't positive changes, it was like, hiding more. It was like hiding behind laughter more. ...Like, had I stayed at Riverbrook, I would have kept doing superficial change and not actually looking at myself. Not actually instilling values upon myself. Just being like, this is like a game. Like, kind of viewing it more as a video game to beat rather than an actual thing to do.

Corey came into the Academy with many years' experience in previous therapeutic programs. His description of his Academy experience seemed tied, inexplicably, to his past experiences in programs and schools. In fact, even his decision to attend the Academy was expressed within the context of a different therapeutic school. Corey seemed to make sense of his long journey through therapeutic programs in a way that integrated various positive aspects and values into his own self-identity. His journey to "find himself" seemed to be facilitated, not by jumping from program to program, but in finally settling into one spot and pushing through when things got tough. In a sense, Corey described what might be termed a "Pinocchio experience," whereby he felt he became a "real boy" once he was in a program that encouraged, and perhaps insisted upon, authenticity. With a tendency toward anxiety that could be traced back to his early childhood, Corey's overall experience could be said to be reflect a general theme of anxiety, fear, and survival. In fact, it appeared that a sense of growth and deeper appreciation—apart from fear—could not be fully experienced until he left the program.

Corey's feeling of being "trapped" seemed to be a significant aspect of his experience. Certainly, an important factor in a teenager's maturation process is the recognition of limits and role of authority, two elements that seemed missing from his development before being sent away to therapeutic programs. Even his previous programs, which provided less "freedom" from his perspective, did not seem adequate in terms of containment of his behaviors or of others in the programs. This reality made him cynical of the therapeutic process, as he had seen many others (including himself) get away with breaking the rules. It was only once he was in a setting that provided the firm, consistent containment necessary that he both felt intimated and scared, and yet relieved by the "real-ness" and effectiveness of the program. In the same way teenagers both resist and respond well to parental limits, Corey seemed to continually resist--but respond to-the limits imposed by the program. He seemed to express a strong ambivalence about not wanting what he knew he needed; and yet he stayed long enough to finally accept and appreciate the boundaries he needed to develop into a mature young adult.

On Academics

Aside from the therapeutic program, Corey spoke at length about the academic program being a critical component of his overall experience. Corey had been an underachiever in the past, never having developed the "grit" that was necessary to push through obstacles and find his flow and enjoyment in academic tasks. Though quite advanced intellectually and curious from a young age, he seemed to have struggled with organization, time management, and study skills. His school performance didn't appear to reflect his potential. One might even label him as a "gifted underachiever" or twice-exceptional given his intellectual gifts and talents, as well as the diagnosis of ADHD and

potentially a learning disability. Corey didn't recall having had special services in school aside from some advanced classes in elementary school, so it seems unlikely that his gifts and/or his deficits were fully recognized by teachers. Certainly, his strengths may have been masked or overshadowed by his weaknesses or vice versa. For whatever reason, it wasn't until he reached high school, when the academic demands increased, that he was tested and provided an IEP. When he entered high school, he was placed in basic level classes. By the time he came to the Academy, he seemed to crave an intellectual community and atmosphere, though he was uncertain whether he could rise to the challenge.

Unlike his experiences in other therapeutic settings that seemed to lack the level of academic challenge he craved, Corey became inspired and motivated by the academic culture at the Academy. He expressed that it was hard work for him to keep up academically, but as he put it, the "academics were amazing."

It [the academic program] was very rigorous. And in some ways, that is amazing that it was so rigorous because it keeps you occupied. I think break weeks, in some way...when you're at the end, you just want school to start. Even though you're in that swimming pool, you feel--in the same way that the swimming pool applied therapeutically, it also felt like I was in an academic swimming pool just trying to grasp for the edge...But it really disciplined me. Like tow, I feel disciplined in the sense of--I have to do my homework. I have to do it, 'cause that's how you get good grades. And that's how you set up your life, because it actually matters.

The academic rigor was personally challenging, but he felt that it set him up to be successful in college. He believed that the Academy academically prepared him better than any other therapeutic or traditional high school, in his experience. Though the process was difficult, he decided not to give up, which gave way to experiencing joy and fulfillment in his academic pursuits:

...it wasn't like, a breeze the entire time. It was SO difficult. And I always--at points, I felt like I was drowning. But that's what really helped me. Honestly, feeling like I was drowning, feeling like that was happening, and then like--Corey, you can--. Cuz what would happen at home is, I'd feel like I was drowning. And then I'd just be like-- fuck this shit. And then not do anything more, and then letting it spiral and spiral and spiral. ...But now that I've experienced the drowning and experienced coming out of the drowning, and the feeling of like--this was a great move, and the sense of fulfillment and actually realizing you know, I really enjoy doing this.

He admitted that the academic work was quite challenging for him; he constantly felt like he was "drowning." However, within a positive peer culture, Corey persevered and found himself capable of new levels of success. He developed grit and a sense of self-efficacy. His experiences of mastery encouraged him even more to put effort into his work, which in turn, resulted in academic successes. Overall, the confidence and success he experienced at the Academy resulted in him feeling positively about himself in college, even as he compared himself to other successful students he encountered there.

He perceived the culture at the Academy to be strongly academic and intellectual in nature. He thought many of the other students valued having an "academic scholar"

image, perhaps modeling what they saw in the teachers who they admired. The names of colleges were heavily emphasized among many of his peers, as was "namedropping" of philosophers like Lacan and Zizek. Appearing and sounding intelligent was highly valued in the peer community.

I think part of it was like, this questioning the world around you, trying to be an academic scholar type thing. I think it was part of the culture when I was there.

While at times he seemed to poke fun at the overly-intellectual environment at the Academy, he also seemed to enjoy it in the sense that it was an extension of or reflected his own abilities. He could say that he, too, was a part of this community of incredibly smart and scholarly teenagers.

Though there was a focus on being highly intellectual, he also believed that hard work was emphasized over innate intelligence:

There is an intelligence threshold. But I think that, I think everybody to a certain extent is smart when they actually apply themselves... If somebody puts in effort, if somebody actually puts in effort, I actually believe they could get through the Academy. If they seek out every single help. If they do everything. They're literally putting their everything into it—[they can succeed].

While his ability and creativity seemed to be recognized at the Academy, it seemed much more that it was his hard work that was rewarded and emphasized. This resulted in him having a growth mindset (Dweck, 2006), as evidenced by his strong belief that anyone, within reason, could successfully get through the challenging academics at the Academy if he or she just worked hard enough and sought needed support needed. His own history and experiences certainly influenced this belief, as well as the

observations he had made of other students in the program. This growth mindset likely is a factor that makes him more resilient now that he is in college, as he stated that he knew if he failed on his career path to become a surgeon, it would not be the end of the world. He would just continue to work hard and stay flexible, making adjustments along the way as necessary.

On Peer Relationships

Corey described a long pattern of difficulties with peers. He could trace back these issues all the way back to early childhood, when the bullying began, and into high school, when it continued. He seemed to go to great lengths in adolescence to "get friends"—anyone who might find him worthy enough to spend time with him. At the height of this extreme desperation for social connection, Corey recalled feeling on "the top of the world" when he crashed his friend's Porsche and felt, in that moment, meaningful bonding and friendship. Even after attending multiple programs to help him in this domain (including the Academy), he seemed to still struggle with friendships, which was a disappointment. He also seemed to distance himself from feelings that potentially could threaten his self-esteem by explaining that the students at the Academy were "weird" and not really anyone he would want to be friends with, while at the same time seeming grateful for the "close friends" he made there.

Given his pattern of social difficulties, it was no surprise that one of his biggest struggles at the Academy involved making close friends. He expressed conflicting thoughts about his peer relationships, but it seemed that overall, he felt he had difficulty creating and maintaining trusting, intimate friendships.

I mean, I made friends and what not. But I didn't feel close--close in the way that other people felt, just because...it just never felt like the people that I would be friends with, in some ways.

However, he later expressed great affection for the school, which seemed tied to the meaningful relationships he made to individuals and the community:

I love the Academy. I love the Academy so much. And I mean, I made very close friends there. I talk to Beverly all the time... still, and I call the Academy every two days, basically. I call the Academy the most out of all the graduates. Just because I like, *love*, I love the feeling—

On Issues of Diversity

Corey mentioned that he thought the school would benefit from being more ethnically and socioeconomically diverse, as he reflected on some of his past schools and therapeutic programs which tended to be dominated by "rich, white" teenagers:

So it would just be nice to see... a more diverse population at the Academy. I mean, honestly, like in programs, the way I've experienced it--I've never met like, I mean maybe I've met, like, one African American or maybe two African Americans... And that's just the way that the demographics work. Just like, socioeconomically, it's very expensive to send kids away and what not.

He also discussed the importance of having a more diverse population in terms of gender and sexual identity, as most of his peers were heterosexual males. His own sexual identity issues impacted much of how he experienced aspects of the program. For example, he felt alienated in the boys' weekly therapeutic group (i.e, "Men's Group") which he said typically dealt with common relational issues that teenage boys have with

girls. Being the only gay student living and sharing living spaces sometimes felt awkward and challenging, particularly if he was attracted to someone. He also did not always feel comfortable talking about issues regarding his sexuality and/or identity, with either male or female peers, because of how it might be negatively viewed by students or staff. Finally, he said that he did not always feel that his peers or certain clinical staff adequately understood his feelings of vulnerability surrounding these issues; in fact, in some cases, he felt peers were intolerant. He commented that he did not think the Academy was an ideal environment for gay, lesbian, bisexual, or transgendered students. *Perceived Changes*

Corey was quick to describe they ways he felt he had changed while he was at the Academy. He thought many positive values that the school espoused, such as honesty, integrity, and genuine connection with people, played a significant role in his life now. He said that he talked to his parents honestly now, which he "wouldn't have done in the past." He also could see how he had a stronger work ethic in college, as well as academic integrity. Finally, he expressed how he now took:

...a more active role in my life. Rather than passively waiting for someone to try to take control. And I just have hope in my life. I mean, I feel like that's what everybody has at the end of the Academy, or most people. Is that they actually see an outcome to their life, rather than before, when they were like, I don't know what's going to happen. I'm just taking it day by day, more.

Corey's changes, as he described them, were centered on core issues of honesty, authenticity, integrity, personal responsibility, and autonomy. When one looks back at Corey's telling of his life story, certain traumatic losses and changes (e.g., moving away

from his childhood home), coupled with chronic bullying, one can see how Corey might have adapted to these difficulties by creating and hiding behind facades and various masks, that from his perception, would provide an easier road to peer acceptance. In essence, he had to unlearn these behaviors in order to experience mature, mutual relationships with others. Corey's ease in his early years of schooling did not provide him with enough opportunity to struggle, fail, and persist. In fact, Corey cited early on, that he gave up easily when tasks became too hard. His early diagnosis of ADHD may have also hampered the development of these skills if his environment did not effectively "push" for these skills to be learned. Only once Corey was faced with both an intellectually stimulating curriculum, a requisite for a bright student, along with a structure that encouraged and supported developing grit and perseverance, was he able to experience a new way of approaching difficult tasks. This seems to be true in obstacles outside of academics as well. Finally, Corey seemed to develop skills of self-direction and autonomy in a program that provided healthy distance from his parents, who seemed passionate and perhaps pressuring for him to take the lead. He also could see other peers his own age develop these skills, mature, and grow ready for the next challenge of launching into early adulthood.

Current Meaning

Upon reflecting on the meaning his experience at the Academy has in his life today, Corey expressed great gratitude and appreciation despite the challenges and struggles he faced while he was there. As he put it, he perceived those challenges had made him stronger, "in a better place:"

It's kind of like when you play baseball, and you have a doughnut on a bat, and you're swinging kind of hard, and you build up your muscles, and then you take the doughnut off and you're like--really hitting those homeruns at the end!

Because you don't have that doughnut on the bat anymore.

He shared that he didn't necessarily feel that his home was in his hometown, but that a part of him was certainly at the Academy. He expressed feeling happy where he is now in his life, and that his experiences in therapeutic boarding school is still "very present" in his everyday life. As he put it,

I would say that I push my friends in the same way that I pushed my friends there, I think now. I think...I try to seek out the same type of friendships that I tried to seek out there. I think my values are very much based off of what I learned there. So I think the Academy is a very big part of my life. ...I mean, I think the Academy really means to me, like, *who I am* [emphasis added].

Corey shared that since leaving the Academy, he gets scared about whether he'll meet his academic and career goals to be a surgeon, and he still gets insecure about his friendships. Still, he says he has learned not to give up, that he trusts himself not to give up (as he used to), and even if things don't go the way he wants them to, he'll stay flexible enough to move forward. He has also learned to make friendships based on more than popularity and other superficial qualities.

Perhaps he best expressed his sentiments in his last statements reflecting on the Academy and what it meant to him, now that he's had time living outside of the confines of a therapeutic boarding school:

Yeah. I am very grateful for my entire experience. I would not be the person I am today without that. ...I mean, I love the Academy. (Short pause) I don't know, it's weird. (Pause) I don't understand, because I feel like somebody could have looked at my stay and been like, "Why do you love the Academy? How could you have possibly loved the Academy?" Because I feel like someone could look at my stay and say that. But for some reason I just really do. And I don't think I ever...felt it that way at the Academy though. I don't think I felt this appreciation that I do now while I was at the Academy. ...but, I very much feel it now. I very much--I was always scared at the Academy. I was like, is this real? Is this real change? Like what happens if this isn't real? What happens if I slip? Like, what would happen? I just didn't know what was real and what wasn't. And what would change and what wouldn't. And sure enough, I feel like I've changed for the better. I mean, I feel very mature. I feel like a better person because of it.

Corey's appreciation and gratitude towards the experiences he had at the Academy seemed disconnected, and even confusing, for him given how unpleasant and challenging he perceived his experience to be. However, it seemed that with time and space from the program, finally obtaining the freedom that he had so long desired, gave him the opportunity to reflect differently on what had happened. In fact, he seemed to put a positive spin on it, by looking at the ways it genuinely strengthened him and improved his life, rather than focusing solely on the challenging aspects of it. Perhaps seeing real changes in himself and being convinced that these changes were not "superficial" ones as might have been the case in the past, resulted in a more positive assessment of his overall experience.

Participant 3: Zoe

Entering In

Zoe came to the Academy somewhat unexpectedly. She found out late into her wilderness stay that she would not be coming home but would transition to either a residential treatment center (RTC) or the Academy. Zoe said she refused to go to an RTC "because I just could not stand being in a lock-down facility," which she assumed would have been similar to her hospitalization experience. Her educational consultant informed her about the distinctiveness of the Academy, mainly the strength of its academics and the "seriousness" of the therapeutic program. She described the ways in which her first impressions fit with what she had been told about the program being "this place where people are just, really going to be really serious about just...improving from where you were before." She expressed feeling scared, bewildered, intimidated, and impressed by what she first experienced:

The beginning of my stay...I was pretty just all around really scared of everyone because you know, it just felt like they knew something that I didn't. Because they were in this place that was just so strange to me. I actually thought that there might be cameras or something around because I was like, how are all these people so honest? Like, why would they be?! I thought that people were really *strangely* honest. And that the expectation for me to be as honest as they were asking me was like---- I remember Joe copped to guilt in one of his night groups and ... I was like, Wow! Like, I would never say something like that to a group. And I was like, that is *really* intense! Wow! I really respected how honest he was being...Yeah, I was really impressed....I think I was also-- I was definitely

intimidated by, just the ratio, because there were so many guys and I felt very attached to Melissa, who was the only girl there for at least my first week or so...I was just really intimidated by the guys.

Aside from being shocked by the level of emotional intensity she observed in groups, she also was pleasantly surprised to see a lighter side to the peer community:

I think I kind of expected people to be really weird a little bit--because it was a therapeutic school. But I also went to Night Group and stuff. I was like, Wow-they're really funny! And I just liked everyone a lot after that.

She said that it felt "pretty chaotic" the summer she arrived, as many students were struggling, but that "people felt like...it was a very real thing to them...to be demoted or to really try to improve and to get their middle membership back and all that. It was taken very seriously... It was all just very serious...in terms that I didn't really understand." She said these impressions were very important for her as she learned to adapt to this new environment.

Zoe's initial motivation for voluntarily entering and remaining at the Academy was primarily fear about her future. She had already been admitted to her first-choice college, so unlike other students there, she was not motivated to attend the school in order to get into a good college. For her, the looming reality of her social and emotional future was what propelled her to move forward, as she described:

There's certainly a part of me that wanted to be at the Academy because, bottom line, I knew that I was miserable. I knew after wilderness that--it really was coming to terms at wilderness that things weren't just going to magically get better once I got to college. And that, you know, my insecurities are kind of the

same everywhere that I go. And going to college isn't really going to change how I feel 'cause it clearly hadn't changed. I mean that's why I wanted to be there. I don't know if I really thought that I *needed* to be there. I kind of went back and forth actually feeling like I needed to because, on the one hand, I had already gotten into college. That wasn't a factor for me like that was for many students....A large reason of why I decided to stay at the Academy, at least at the beginning, was just fear of what will I do otherwise. A lot of it was just not trusting my own ability to sort of put together a life for myself without some kind of structure there. And I think I really liked that about the Academy, it's very clear structure, and you leave with a community. You have a community there, a schedule every day. You know what you're going to do afterwards, and you know that you can come back afterwards.

Though Zoe voluntarily chose to attend the Academy, she had difficulty committing to the standards and expectations of the program, which included refraining from her previous unhealthy coping mechanisms (e.g., over-exercising, restricting, binging, purging). She was also expected to be open and honest with others. She was well aware of this when she was admitted to the program; however, she secretly continued to engage in many of these behaviors months into her stay. She reflected on the thoughts she had, even as she engaged in these behaviors:

Well, in my first week, I was still purging and not telling anyone about it, even though I knew I would have to tell somebody eventually. Because I knew I couldn't keep it hidden for that long, just like, emotionally... As much as it's easy for me to lie to my parents, I just knew it wouldn't be easy for me to lie to people

who I knew I wanted to be my friend. People who I intended to become friends with.

She said part of the difficulty stemmed from being one of very few students struggling with body image and disordered eating. She came into the program already reluctant to open up with people, but these unique challenges made her feel extremely embarrassed and ashamed. Because she did not choose to talk about the underlying feelings that were driving the behaviors, she was left to try to manage largely on her own, apart from the support of the community:

I guess in the community, the expectation is to be a part of the community. You're going to be honest and you're going to uphold certain rules, in order to be a part of this community that has to operate on a certain level of honesty and integrity.

And...Like, if you *aren't* following those rules, well, it's very easy to feel apart from everyone because it's like they don't know something about you. And...It's like a very big divider. If everybody is trying to do something, and you're not on the same page-- it's hard to describe but--! I... personally copped to guilt.

Eventually, she admitted that she had not been following the guidelines of the program. After multiple warnings, therapeutic process groups, and "second chances," she was found once again to be hiding these behaviors from others. This form of dishonesty was taken very seriously and she was asked to leave the program. Zoe recounted how crucial her early peer relationships were during this difficult time:

Yeah, well I got expelled because I was continuing to cop to guilt. Or feel guilty about sort of engaging in those eating disordered behaviors...and then telling

people about it, but then...sort of doing it over again. And there were times when I would cop to it, do it again, and then not tell anybody about it. And I got found out a few times, yeah, a few times... So I was still doing these behaviors, I wasn't really feeling like a part of the community. I wasn't really engaging in the way that someone is expected to, in the community. And you know, people were kind of frustrated with how to push me to grow because I wasn't really growing and that was apparent by the things that I would cop to that I was doing over and over again, and that were making me miserable. I was only close to really one or two people in the community. And those friendships meant like *sooo* much to me, and that's what really kept me there even though I so badly wanted to leave or give up or go home. I mean, it was really the closest I was beginning to feel with certain people in the community and the openness and just the care and the acceptance, you know that I had just been craving before the Academy.

Turning Points

Zoe was expelled six months into her stay; her parents sent her to a different wilderness program with the hope that she would eventually return to the Academy.

Before she left for wilderness, she was given a therapeutic consequence that involved an intensive time, apart from the community, of reflection and writing in an attempt to get more honest with herself and others. She said that this experience, along with the expulsion, was a major turning point:

In the week before I was expelled, I went through [a therapeutic consequence].

And it's fairly isolated. But that was a really, really important time for me because

I think...with the realization that [the community] could actually, just be *lost* to

me? It sort of really sunk in that...that I didn't believe that I could change in any place other than the Academy because of the circumstances of--this is a place where I really need to do it myself. I knew, deep down, that I couldn't actually make things better unless...I just--I don't know. I really needed to change something because it was still so tempting for me to do things like purging, and just SO tempting all the time for me to slip exactly back into what I was doing at home. I knew that being at a place like the Academy was so unique in that, it was the people who I cared about and who were holding me accountable, like my friends who were holding me accountable, which I wouldn't have anywhere else. And I just couldn't think of anything that would actually make me, like, stop. I couldn't think of anything.

Zoe participated in a wilderness program for six weeks, where she agreed to do some therapeutic work with her parents. She had been in a long battle with her parents and resisted engaging with them from the very beginning of her stay at the Academy. In fact, part of the reason she said she didn't fully engage with the program was because she felt that this equated to her parents "winning" the battle—something she couldn't let happen. After getting expelled, she started to work on the relationship with her parents and eventually, her perspective started to shift. She described this important turning point regarding her relationship with her parents:

I was still very angry at them. I mean, it was at a point where I just...sort of felt like, I just need to do whatever I can because it's just been such an exhausting road from getting sent to wilderness 'til now... I just need to do whatever I canto *try* to, to make this end, cuz I'm *SO* tired of feeling this way. And you know,

the relationship with my parents was like one really big thing that people had been telling me for so long, really needs to change. And I felt like, I guess, but I'm not really gonna make the effort to do that. And so, yeah, I mean--I didn't really have a real picture of what I wanted from the relationship with my parents, I just knew whatever has been going on hasn't really been helping me. And I knew very consciously that I was holding on to a lot of anger that was just making me very unhappy and I didn't want to hold onto that my entire life. And I wanted to be a person that's separate from my parents, and a lot of my relationship with them was doing whatever I could to make it clear that I wasn't going to let them win. And, you know, at some point in my stay I kind of realized that. And I don't know if I had all the willingness to even change it but I realized that, and I realized how pointless that is, how stupid, really-- It just dawned on me how unproductive that dynamic really is and how it affects my life, and how BIG of a part that it plays in my life. And how it needs to change eventually! And that was kind of my reasoning for doing what I did, at least the first steps.

Eventually, Zoe did return to the Academy, at which point she knew she needed to prove that she had learned from her mistakes and changed enough to be accepted back into the community. She immediately started speaking up in groups, voicing her opinions, and taking risks, which she had not really done consistently during her first six months. She knew she had a lot of work to do to gain people's trust, and this time, she was more motivated:

... I really wanted to feel a part of the community, which I didn't feel with such a huge motivation for in my first stay. In my second stay, I saw a path to becoming

a part of the community that was more accessible. It just became a lot more accessible to me, that I could really become friends with multiple people in the community and trust them and be accepted as part of the community....I think it was more understanding what being a part of the community meant. Because I think I always wanted to be a part of [the community], even from my first stay, because it just--it was such a supportive and honest place, unlike any other that I had seen before. And I knew that I had to stick it out at the Academy at that point.

Process of Change

Once Zoe was re-admitted, she committed to the hard work of changing the ways she related to herself, her peers, and adults—including her parents. Much of Zoe's therapeutic work was done in the context of sharing and opening up with peers, many of whom didn't seem to understand her struggles with body image and disordered eating. Zoe said it was hard to feel accepted after sharing aspects about herself that she deemed to be embarrassing or "gross," even though she felt her friends were genuinely trying to help her. Although this process was difficult, she thought it was important for her to be in a program that did not seem to operate from a step-by-step "manual," as she thought might be the case in more traditional programs for individuals with eating disorders. She frequently stated how important it was for someone like herself to have the freedom to work through her struggles without someone telling her exactly what to do:

I think one of the big differences between outpatient treatment and the Academy was like, in outpatient treatment they're like, "No, we know what's best for you. And you don't know what's best for you right now, so we're just gonna make you do this until you sort of understand why this is the best thing for you." And I think

for many people that works very well. ... in terms of specifically addressing things with food or exercise. That might have been much easier for me if I was in an outpatient place! If somebody just makes me do what exactly I'm supposed to do. And eventually, it would have been much easier. But at the Academy, it was like a lot of figuring that stuff out through other ways--ways other than the behaviors really. And other people not really understanding that. ... the most important parts of the Academy for me, is not having that [other approach]. And figuring that out on my own-- was very, *very* difficult but-... there were times when I was like, Wow--it might be much easier to be in an RTC right now. I kind of wish I was somewhere where I didn't have to think about all of this all the time. But yeah, no, that's the trade-off, really.

Zoe described her process of change as a more natural unfolding, saying, "And slowly over time, it [eating issues] just became less of a priority. And it wasn't intentional at all!" Though she was still attached to the thin body ideal from home, she said she decided to "put it off for now because it's just *not* going to be that way for a while." Over time, she focused on accepting herself, getting close to others, and understanding the feelings that seemed to drive the issues around her weight:

It just became easier and easier to live just the way that I was and became less of - like, disgustingly unacceptable thing to be at the weight that I was at. Yeah, just very, very slowly...but surely...weight just became less of something that was on my mind. And just became less and less of a tangible issue all the time. And other things just became more relevant. I think what I was *really* trying to express with just struggling with my weight was just things with... (Pause) Yeah, just a lot of

living out of fear and then feeling really guilty about the consequences of that.

Like for instance, feeling very lonely, feeling like people don't like me because of the way that I look, when it was really a lot about me being scared about what people think about me all the time, and being too scared to really take risks and put myself out there and really reach out to people. Which I'd blame on like, I'm fat and that's why people don't like me, they're judging me because I'm fat. But once I really started reaching out to people and taking more risks with people who I wasn't comfortable with, that just didn't become such a relevant thing.

Zoe admitted that she continued to struggle with these issues throughout her stay, even though food and exercise became relatively less important to her. She described her surprise that she could feel very happy with her life, even though she was not at her ideal weight:

It was still very difficult for me to feel...to just feel ok with my exercise and my eating and body image and everything. And that was a huge struggle for me my entire----for the rest of my stay, still. And it sort of became something that I dealt with by kind of deferring it, almost? Like, well, yeah--- this is just the ways things kinda are at the Academy...but everything's gonna be different when I leave.

That's kind of how I thought-- everything's gonna be different once I leave. But while I'm here like, whatever, I'll just kind of accept it how it is, and just work with it. And...in some ways it wasn't the best way to do it, because I kept having this expectation that all of the feelings that I had, kind of unhealthy feelings that I had about myself, would just kind of like change once I had the opportunity to be away from the Academy's restrictions. And I could do whatever I wanted, and

then I'd feel differently about my body and stuff. But I think ultimately, at least with that frame of thinking, I was able to just-- at the Academy-- just deal with not being happy with the way that I looked, and still live on in a way that I -- Like, I was *very* happy at some points at the Academy and also the heaviest that I've ever been in my life at the Academy. And that's not something that I ever expected to happen.

Aside from eating and body image issues, Zoe opened up about other aspects of herself that she had previously been too embarrassed or ashamed to admit. Through journaling and slowly trusting others with her genuine thoughts and feelings, she began to "really understand it" and realized that "having other perspectives is just such an important way to understand myself." Her peers were able to give her acceptance, feedback, and guidance, which allowed her to learn to trust others more in the process. This positive cycle encouraged her to share more of herself with others rather than keep things inside.

Zoe continued changing her relationship with her parents as well, building on the therapeutic momentum of the work she began in wilderness. As she described, she initially didn't want to "have anything to do with them" and her goal was primarily to have enough of a relationship to get financial support in college and "not really anything else." In the earlier part of her stay, she was "happy putting them at a distance" but later realized that she needed to work with them as much as possible to put the past behind her. She said that with the help of many professionals "speaking out on behalf" of her, she was able to make some progress in the way she communicated with her parents. Though communication is still a struggle, she said:

I think that ultimately, on both sides, everyone is committed to moving past the past-- I mean, letting go of the past and sort of working on what's here and what's right now. And just, we're all kind of on the same page about that. I think that's something that wouldn't have happened without the Academy.

Zoe's impressions and perceptions of the program seemed to change and evolve as she evolved and matured. In the initial stages, she was frightened by the level of honesty and intimacy she found in the peer community. Having grown up in a world where she found it hard to trust, she saw the program through the eyes of skepticism and sometimes, disbelief. It took a while for her to get a sure-footing in this new and strange environment, which seemed intriguingly different from her experience in intensive outpatient therapy. Was this place really different? Were these teenagers really that serious and committed to their futures? Even though a part of her was motivated by the deep friendships she observed amongst her peers, she was still very scare afraid of exposing all the parts of herself that she judged to be shameful and disgusting. She projected onto others what she believed about herself, which kept a big wall up between her and the rest of the community. She was intimidated by the expectations to be open with others and initially rejected doing this, particularly as she was one of few girls in the program and also one of very few who was struggling with behaviors related to eating and body image. How could anyone really understand what she was going through? Wasn't her pain different from everyone else's? Wanting to appear as a compliant and "good student," she tried hard to learn and follow the rules of the program, though she secretly broke many of these rules when no one was looking. Deep down inside, she

knew she would eventually have to be honest about this—to herself, as much as to her peers.

It seems that a major turning point for Zoe was getting expelled from the school, losing the prospect of great friendships in the process. Her initial six months seemed to be her way of "testing the waters" so to speak. She admitted later that she had only been partially committed—not sure if this program was really what she *needed*. By the time she came clean with all the ways she had not been following the guidelines of the program, she had started to trust a few people, and it was really these relationships that motivated her to be honest and fully commit to the process of change. Though she had to leave for six weeks, this time away helped her realize what she really wanted—and she was able to better separate from the battle with her parents to make the choice to return, of her own volition. She realized that opposing her parents often resulted in her hurting herself in the process (even if she wanted to hurt them) and left her feeling stuck in her life. Once she let go of her anger and bitterness, she paved a way forward to emotionally embrace and trust others in new experiences. She began to take emotional and academic risks. She began to steer her own boat. The stormy waters started to calm.

Zoe made it clear that the process of change didn't happen overnight. In fact, she perceived the uniqueness of the therapeutic program to be beneficial, yet quite challenging for someone like her, struggling with an eating disorder. As she pointed out, she was surrounded by her "drug of choice"—food—on a daily basis, unlike her peers who struggled with substance abuse issues. Her oppositional and defiant nature made it almost impossible for her to thrive in a more rigid, structured setting (as she believed RTCs to be); however, the freedom she had at the Academy sometimes felt like more

than she could handle on her own sometimes. She seemed ambivalent about the degree of self-control that was expected in the program, knowing it might be easier to have someone just tell her what to do! Still, she realized that as she focused on her friendships and building a life worth living, the issues surrounding her weight diminished relative to everything else. The struggle with her parents continued, but it seemed to become a "back-burner" problem. She prioritized learning how to have a healthy relationship to/with herself, something she did in the context of trusting, intimate friendships with others. In fact, as she allowed others to care about her—flaws and all—she came to a healthier acceptance and care about herself. What surprise when she realized she could be happy-- accepted, respected and liked by others-- even when the number on the scale didn't match her ideal.

Programmatic Elements

Zoe highlighted certain aspects of the program that impacted her the most, primarily the peer community; the uniqueness of the therapeutic approach; the program's structure, values, standards, and high expectations; the strong academic program; the integration of the academic, therapeutic, and residential programs; and the importance of staff working with parents.

While all of these elements seemed important, she repeatedly talked about the peer community, saying "it's just the biggest piece of it." She fondly described how central the community is because of how it works with peers "supporting each other and really wanting the other person to grow. It's just different and there's so much depth to it." She compared the Academy community to her experience with a peer group in wilderness:

They certainly wanted the best for other people, but--- I think it was mostly that they didn't know each other for as long...but at the Academy, it was just very impactful, even just seeing other people interact who were really close friends... and just knowing someone so well. It's very apparent at the Academy, in just their relationship. And I don't know, it's just very motivating. Like who doesn't want that? I--I certainly wanted that.

Again, the emphasis was on the fact that the community was really about the peer relationships, not staff—though they were certainly a part of the community. The fact that the community "worked" seemed to be built on the foundation of peers living together, caring for one another, and motivating change in each other:

Just like the way that the community works...Cuz it's a peer community. And you know, the therapists are certainly involved and they certainly direct things like where the community sort of, focuses, but you live with those people and those are the people that you interact with every day, you work with, and really open up to, and who like--those are your friends. And you know, that's--- ...it's like the closest connection that really *moves* you, are the people that you're connected to in that way. That's the only people that you have contact with. And when everyone kind of wants one sort of thing, one sort of idea, it's just-- like, fosters an environment that's extremely unique. ...I think the Academy in its approach is unique. ...The community is unlike anything that I had known before...

In addition to the strong emphasis on peers, Zoe described how the therapeutic approach at the Academy was different from her prior experiences:

I think in wilderness-- at least in my wilderness stay and my outpatient stay, there was more sort of emphasis on, you know, they addressed more a diagnosis.

Just...very specific to a person's struggle. Like in outpatient it was very much "eating disorder." You do eating disorder groups, you eat a certain portion of food. And my second wilderness, a lot of people were there for drug abuse or alcohol use, and they did a lot of AA. Yeah, I just think there's a lot of value at the Academy having to figure out in realistic ways, like away from sort of-guidelines, I guess. Like how to live as a good person. That's the focus. Not to stop purging, not to stop restricting. That's all a symptom of something else--- but really, like, how do you want to live as a person? And how are you gonna do that? I think that's very clear at the Academy.

Rather than focusing on symptoms and diagnoses, she described the Academy's approach as one that "more generally addresses insecurities," which she felt all students at the Academy could relate to regardless of their symptomatology. She perceived that this approach worked best for her, stating that it:

...is really realistic and an effective way. I mean, it's the most realistic and effective way that *I've* ever experienced in whatever therapeutic programs that I've been in. So it actually helped me to...change, I guess, really. But yeah, it's just very different.

Though Zoe appreciated this different approach, it was clear that she initially struggled with the standards and expectations of the program. In reflecting on this, she said that she believed the expectation for her to refrain from her past unhealthy behaviors was "fair" because:

I think one of the reasons I wanted to be at the Academy was that-- you know, you're going to be treated as a person that just kinda, got lost and--whatever your diagnosis is, isn't super relevant. Like, you're expected to take the same path as anybody else of just, picking things up back together, being honest, and just being a good person. 'Cause you know, I was really tired of being called "sick"--I really wanted that, and so the expectation that you just stop, like, that's fair in my mind, you know...like, just as much as anybody else is asked to STOP doing what they were doing before. But I think in practice, it was--it was a very different kind of challenge.

On Academics

Zoe described how the academic program at the Academy played a significant role during her stay, as it was "very much integrated into the atmosphere" of the school. Zoe, who had been a high achiever in her previous prep school, said she was both shocked, embarrassed, and humbled when she came to the Academy. She said the high academic standards and the bright peers she was surrounded by magnified the ways in which she had been able to coast in her other schools. At the Academy, she began the process of improving her study habits and quality of thinking, as she described:

For me, getting to The Academy I was a little bit-- I was somewhat embarrassed because I came from a pretty prestigious school and I was going to a pretty prestigious college. But I think my study habits were pretty-- I don't know! I got through school and did well because I really wanted to do well, and that was enough. But I don't know, just the in-between of like--I was just such a terrible procrastinator. Just a lot of the quality of my work was just sort of what I had to

do to get an A. At another school where there's plenty of kids to keep track of...it was relatively easy for me to at least be somewhere near the top. And then when I got to The Academy, I think...everything was just much more... thorough, comes to mind. You know? Writing papers was just a much deeper process than I had ever experienced before. I thought that I was really good at English. English had been my favorite subject for as long as I could remember, and I--you know, I even ended up getting the Junior Year English Award. I was one of quite a few--but still. It was something I was really proud of. When I got to The Academy, I was like--I do not know how to write a paper to those standards!! And so my first paper, I got a B, or a B plus or something like that, and-- you know, it just was--...that was just a very characteristic way of describing my academic experience there because it was just such a shock to me that there was SO much that I didn't know. And just like the quality, the quality of thinking, really-- and how integrated that is into the community and how people interact. Cuz people really care about school and what they're doing in school, and that just changes the relationship to your schoolwork so much. It just being a topic of conversation, you know?

She said that she felt insecure in her school abilities because it felt "deceptive" to be considered a good student even though she felt there "was a lot missing" from her school experiences prior to getting to the Academy. She entered the Academy feeling unconfident and needing to prove her intelligence in a community of "incredibly intelligent and even brilliant" peers. Only later did she realize she "couldn't really progress without just getting what I don't understand out of the way" so she could move

forward. She was expected to actively engage in discussions, as class participation was heavily emphasized, which forced her to practice putting her ideas out in the open and 'just sort of admitting, I'm not very good at this."

Zoe thought the "very high standard" could be set at the Academy because of the small community and class sizes averaging 4 to 5 students. At her previous high school, she said it was more difficult for teachers to enforce high standards and thus, there could be a wide range of grades in any given class, whereas at the Academy the range was "much tighter." She also perceived that teachers at the Academy were more accessible and devoted time to helping students individually make progress and continually improve. In addition to getting the support she needed, she said the small school community was "great for exploring" her interests as well as discovering new topics of interest. Overall, Zoe believed that her time at the Academy prepared her for college in many ways.

This academic development seemed critical in Zoe's process of maturing in thought and responsibility. The fakeness she felt, the "imposter syndrome" common among high-achieving, gifted women (Clance & Imes, 1978), seemed magnified once she was in a small, highly intellectual community. The path to feeling more "real" required her to be completely honest with herself and others; she had to admit when she didn't know something and deal with the feelings of embarrassment or low self-worth. Over time, though, she became more confident in her academic abilities and quality of thought, having proven it to herself in more than good grades. Once she applied herself and did well in very challenging circumstances, she felt a more authentic sense of success. The process of developing "grit" (Duckworth, Peterson, Matthews, & Kelly, 2007) and

academic integrity seems to have been just as important in the process of developing greater sense of autonomy and self-efficacy in achieving her goals.

Perceived Personal Changes

Zoe attributed many changes in herself and her relationships to her experiences at the Academy. She described generally having a more resilient and empowered attitude toward life, as well as a more balanced perspective on her negative feelings and thoughts. She pointed to healthier coping skills that she developed, which allowed her to stay free from the previous cycle of restricting, binging, and purging. The trust and security she found in caring relationships at the Academy set a foundation for expectation of similar friendships in college. In turn, these healthy friendships helped her gain a more compassionate and caring relationship to herself.

I just...have an entirely different way of approaching the way that I just live in. Not everything just sort of ends up in like, "Well, I hate myself." And it ends up sort of more in, "Well, I don't really like this, so what do I need to do? What do I admire? What do I want to be?" And that being a focus. And sometimes I feel really corny talking about this but I really do believe it! It's like, really, it comes down to that for me. Just the way that I see the world is something I can really DO something about, like *my* life, I can really DO something about it, rather than kind of just learning to deal with what I don't like about it. I mean, which is necessary, also, but I think what I was doing a lot of at home was just trying to survive under the misery. And yeah, just kind of a confidence that I can make my life what I want it to be. That's a big thing. ...I think the friendships are really

important thing that I've walked away from, that certainly contribute to that confidence.

Zoe articulated that she no longer allowed herself to be "controlled by fear," and rather felt "much more prepared to roll with the punches" in life. Her courage to engage in her life, even when she's feeling scared, made her feel more in control of her life. She said of her new attitude:

I feel like, you know, my life is really in my hands. And it's not my environment's fault, I mean, it's not up to what's around me. I mean, yeah. Like, if I'm depressed or whatever, -- It's not external causes that are sort of, responsible for my own happiness.

She felt she had more grit or a "stick-to-it-ness" that she did not previously have before coming to the Academy. This allowed her to persevere through tough times, when she might feel a range of negative emotions. Instead of avoiding or trying to escape circumstances, Zoe said she now knows she can push through to find ways to improve the bad situations, such as feeling lonely at college:

The commitment to doing something, and to just give everything I can to stick it through, has even come up in my first week of college. Just like feeling lonely and those types of feelings being...something very powerful for me, and... it could be very destructive. Feelings of loneliness are the kinds of things I can get really stuck up on. ... I went through a lot of that *at* The Academy and decided that I was gonna be there and push through it and find ways to make it better. Which I think, on a basic level, was something I just didn't really do at home. Like when there's a problem, for me personally, finding ways to make it better. I

just didn't really do that. I just stuffed it...And could only function on that level. I think that's a big change, personally. I think beyond that... even just the way of thinking at The Academy and just the way it's centered on—"Well, who do you want to be? Who are you gonna like put out into the world? And who do you want to draw toward that as a result?" And I think that's something that I didn't--it just wasn't something I considered before. I mean, I knew who I wanted to be in terms of--Ok, I want to be successful, I want to be someone that other people admire. I want to be better than this person, or better at this or that--you know, that sort of thing. But I think being at The Academy, it just, it changed... just the way that I think through making decisions. Yeah, I mean, just thinking realistically (laughs) because I don't think that I did that before I came to The Academy. It was just thinking on a very emotional level. Just like whatever would make me the most comfortable, even if it wasn't actually going to make me comfortable, whatever seemed to hold the most...sort of resolved whatever negative feeling I was going through.

Zoe noted that her relationships changed as well. While she admitted that she still struggled with communicating with her parents, she felt she made progress with them. As for relating to peers, she observed that she was "much more focused on being myself" and less scared of other people judging her in social interactions. While she described herself as a "very shy person," she now sees herself behaving in a much more outgoing way than prior to coming to the Academy. She said, "I feel much more liberated to…take more risks socially… Say hi to people who I don't think would have any reason to want

to speak to me, things like that. Like noticeably different from how I would be socially before I came to The Academy."

Life Post-Academy

In reflecting upon her Academy experience, Zoe expressed great gratitude saying "I'm very, very happy I did it" because "it was just kind of an accelerated process, I think. There's just a lot of very deliberate support for people to figure themselves out and it just inevitably makes a difference." She internalized many of the values of the program, which she came to see as important guideposts in her life. However, she also described the process of reconsidering her beliefs and opinions—or thinking for herself—now that she's had time away from the Academy. She thought this was incredibly important for students to do while at the school, but she said it was harder for her to see and understand the "gray areas" while she was a student. Now that she is in college, she said, "it's difficult but I have also found it to be very valuable in figuring out who I am away from The Academy. Which is like impossible—I don't know, it's like impossible to be successful out of The Academy without that."

In the process of change, Zoe made peace with her past and pushed through to hope for a better future. As she came to reflect on her experiences in the program, her initial feelings of fear and distrust changed to feelings of care, trust, and a healthy psychological separation. This transition seemed to mirror the developmental stages one goes through from childhood to early adulthood.. As she put it, her maturing process, going through the Academy, was "accelerated" compared to what most others experience growing up. So even though the change process doesn't happen overnight, in a sense, she has jumped ahead on a developmental trajectory toward maturity.

Though she felt well-equipped to meet the social, emotional, and academic demands of college life, Zoe described the transition from the Academy to her initial weeks at college as being "lonely" and difficult, particularly after leaving the safety and security of the Academy's tight-knit community. The reality of college and the challenges of finding peers she could relate to in the same way hit her in an unexpected way.

Yeah, transition. It's been really difficult for me. I've spoke[n] to many of my friends from The Academy in the last week and talked to them about feeling lonely, and feeling just sort of... like, missing people a lot. It's a weird feeling because I (pause) - yeah, it's like I wish I could just be back at The Academy but at the same time, I just know that that doesn't make any sense. And that I want to extend myself-- but yeah, transition's been difficult. It's funny because somebody else asked me the other day if my, if I thought my social abilities had changed because I had been in a small environment for two years. And my response was, "No, I don't think so. I think, it just--how close I feel to people, the way that I understand that is just different." Like my first week here, just not feeling that sort of ...what is it? Like a loyalty? I don't know... but just that, that trust... this person is going to be my friend--that's just not there. Sometimes that can feel just so devastating to me. Like, who is going to be MY friend here? I don't have that one solid person. And yeah, I've found that to be surprisingly, just very difficult. It was one of those things that I didn't realize was so present in my life until it wasn't really there anymore--physically at least.

For Zoe, the peer relationships—particularly her close friends—that were made during her stay clearly had a significant emotional impact on her. She frequently talked about what these relationships meant to her, and the role they played in motivating her to stay at the Academy and make the necessary changes to improve her life. She described why this was so, putting it in the context of her past and her thoughts about the future:

I think the friendships are a really important thing... Just having people who have really been with me through what has been like, thick and thin, for the last two years. You know, it just kind of gives me that feeling that these people are going to be around for a long, long time. And you know, that's having like another family. I think especially for me because I've had such a hard time with my own family dynamic, feeling like trust for those people in my life that I'm actually biologically related to, it--yeah, it's just felt very important for me at the Academy to just have a quality of trust and care for other people that I've lived with. ...It's just been very impactful on me really. And it's been, even when my family is just like, really (sighs) pisses me off basically, I have these other people in my life who really care-- for reasons that are real.

As she said, she didn't fully realize what she had until it was gone. While there was a sense of sadness, loneliness, and longing for the only real family she seemed to have ever known, she also seemed stronger and more confident in her ability to push through the difficulties she would inevitably experience in college. She could remind herself of the challenges she overcame while she was in the program and use this knowledge to propel her forward. It seemed that Zoe had been able to effectively "fill in the gaps" of a childhood that had not provided the kind of security and safety she needed.

From this newly founded secure base, she could go out into the world a capable, confident, and connected young woman.

Current Meaning

Finally, Zoe reflected on the meaning and importance the Academy had in her life. It was a significant experience that she reserved sharing with only a select few, but through the process of sharing, she came to make meaning of it for herself. She said she realized her perceptions and reflections of her experience even changed over time (even over the course of our multiple interviews), as she had more time and emotional distance from her experience. She seemed to reach more nuanced opinions about her experience with more psychological separation from the community's principles and rules. Though the challenges she faced during her stay were real and often arduous, she expressed affectionate and perhaps even protective feelings towards the school:

The thing is, it's a very special place. It's very much like a second home but it's something that I want to very selectively choose to share with the world because not everyone will understand it.

For Zoe, she held this "second home" very close to her, as it provided a sense of belonging and stability. She had lost a sense of family and security at a very young age. The chronic familial conflict and trauma she experienced growing up led to an adolescence fraught with deep-seeded fears about loss of control and power, insecurities, and a driven-ness to escape her pain. At the core of her pain was a distrust of and sense of betrayal by her parents—the adults who, ideally, would have been the very ones to provide her with a sense of emotional and psychological security. With a long history of exhausting and repelling her peers, she found herself in her own small world, not willing

to trust anyone. While a part of her desperately longed for a healthy adult to trust, she also pushed away any one who tried to help her, afraid to get close and get hurt in the process. Overtime, she also began to distrust herself; however, she was stuck with no other option, in her mind, than self-reliance. In a powerful cycle of trying to regulate her emotions through self-deprivation, and then later "nurturance," of herself with food, she became developmentally stuck. While she found solace in academic and athletic success, as well as controlling the number on the scale, she soon found herself trapped in a cage of her own making. She realized, despite her battle with her parents, that she needed structure and support to help her move forward in her life. When she finally found a safe place that allowed her to learn to trust herself and others, she found herself "at home" in her own body, in her relationships, and in a purpose bigger than herself.

Participant 4: Jesse

Entering In

Jesse was a strong-willed, very intelligent and argumentative teenager. It took his parents' firm action, placing him in a therapeutic wilderness program, for him to begin relinquishing power in the family dynamic. Jesse learned about the Academy from his parents while he was in the wilderness program. He said his parents "chose it" for him, which he resented at the time. It seems shocking, almost, that he agreed to go to the Academy, given his strong animosity towards his parents by that point and his very strong will. However, he admitted that "fundamentally, I don't think anything would have been different" had he returned home, so he agreed to go along with their plans. He

initially had a negative reaction to the Academy, preferring to go to a program with a shorter average length of stay:

I wanted to go to a school that was shorter and more conventional. Just like, bigger. More chance of an underground, maybe? ...I could tell that The Academy was...more unique. And the fact that it was smaller, and it seemed like kids were more invested--and the fact that it was longer. ...It was like--I just want to go to a place where I can stick it out for a year and kind of fight through it. It seemed more serious, but it was really the length that put me off.

Despite his reluctance, he interviewed and was accepted to the Academy. He recalled his early memories and impressions of the students, the community, and the general program. He expressed being intimidated, impressed, and hopeful by what he saw:

I was shocked by...the kids there--and the degree of confrontation there. And the way people were going about things. I was very intimidated. But...impressed, to a degree, as well. And when I said yes in my interview, for a moment thought, like, "Hey, maybe I can do this!" I started off, actually, with somewhat good intentions. Like, hey--I'll try this out. Maybe I can be like these kids. Maybe I can graduate from here.

Though he had these early moments of hope, he also found the "really serious conversations" between peers to be "kind of scary." He felt vulnerable, as if he would "disintegrate" if he stayed and had to reveal his "worst inner demons." In particular, he was afraid of the culture of confrontation:

I felt sort of weak entering it, and afraid of how it would make me feel. And I was afraid of having to be confronted, and I was afraid of having to confront myself as well. And that's how I felt in the beginning.

Given his previous peer rejection—an experience he labeled as "traumatic"—he seemed to have serious doubts about his ability to participate in the social world. Also, despite his somewhat tough, rebellious façade, he admitted to feeling "weak" internally and emotionally. In a culture where students were honest—sometimes painfully so-- with one another, he feared he might not be able to withstand an atmosphere of evaluation and feedback.

At first, he experienced the school community as a harsh system, designed to judge and control his behavior. As he had done in his previous school, he rebelled and broke rules in a way that did not get much attention—at least, at first:

Initially in the beginning stages...I felt like I had to...keep quiet all my inner... like, the fact that I didn't really like the place, the fact that I wanted to be home, the fact that I thought the rules were stupid and so I just broke them quietly.

It's unsurprising that he behaved exactly as one might expect him to—he quietly and covertly subverted the system. For Jesse, he saw the world in terms of "me vs. them," and this approach followed him straight through the Academy doors. Eventually, within the first month, the extent of his rule-breaking was discovered, and he was faced with the decision to leave the Academy or change his attitude to find reasons for why he wanted to stay:

I had snuck out into the town and used the internet, and I contacted old friends and tried to look at other potential therapeutic boarding schools... The thing is, I

didn't know what would happen if I left, but I knew that [the Head of School] was saying, "If you leave, you're not coming back." I didn't know if that was true or not. I didn't know what anything would be like had I left.

It wasn't until his behavior had been discovered and consequences were given, that he began to more seriously consider his actions and the long-term ramifications of leaving the program. In the context of him growing up with parents who tended not to provide consequences for his misbehavior, this also marked a significantly different experience for Jesse. He considered his options, and not being sure of what the ramifications might be if he left, he decided to stick it out:

So I was thinking, you know--there could potentially be a better school to go to with a shorter period of time. *OR* it could be much worse, and I could just live in total regret. And...so I kinda, I just stayed at The Academy because it was like, you know what? I know there are some good things here, and that right now, I'll just have to deal with it. And maybe if I do really well for a year, then maybe I can leave, you know? I'll just stick it out for now. Because I just didn't want to have---have my actions end up...worsening my situation by making me just have to be away from home longer.

He said that he learned a critical lesson at this point of his stay: "I'm not in control of my situation and...The Academy is here to stay. It's my reality as of this moment so I just have to do it." It was hard for him to surrender control, and he missed being home. But as he listened to other students, he learned that he needed to have a "learner's mindset" and not be so quick to believe he had all the answers. As he reflected on the early part of his stay, "I feel like in order to start [the program], you need to give up a lot and in many

ways, you just need to...kind of let yourself fall apart a little bit. And...you have to be really anxious (laughs), almost, when you're first in because you need to come to the assumption that you just don't know and you need to learn." He was able to let his guard down and "submit" himself into the trusting hands of friends. It was through this trusting relationship that he was able to gain a different perspective on his behavior—how he was pushing people away, why he should care about school, etc. In this structured system, he experienced the natural consequences of his behavior, received feedback and support to change his behavior, and felt natural rewards (i.e., friendship, care) when he made positive changes.

Process of Change

Jesse initially displayed behavior typical of an "immature" adolescent, that being, magical thinking about time, puppet relationships, and lack of true empathy. In the course of his experience at the Academy, it seemed clear that a type of "therapeutic alliance" was developed through his trust and care of the peer community. In this way, the therapeutic relationship wasn't between Jesse and a therapist, but between him and his friends. Over time, as he made friends, his perception of the program changed.

While he acknowledged the role of clinical staff and parents, the adults definitely took a back-stage role. For an oppositional, anti-authority individual like Jesse, it is understandable why he would gravitate towards peers. In this adolescent stage, it is also developmentally expected that he would do so; however, in Jesse's case, it seems even more pronounced. Jesse was so motivated to make friends that a peer-based community seemed like the best therapeutic approach, perhaps the most effective at helping him change his behavior. He realized how his behavior impacted others, which was a

significant lesson and motivated him to become more thoughtful of others. He frequently emphasized the motivating role of peers and friends in his process of change:

I think that the stuff that caused the most change...were more just like the friendships and seeing how I impacted people. ...I think that developing a connection, and that ultimately what made me realize--that what was so great about The Academy-- was the fact that somebody would be upset at you one day but still be there for you the other day. And that element of friendship was like, totally key. Because it showed that this wasn't just an authoritative force that was just trying to tell you how fucked up you were. These were people who cared, and these were people you're living with them all the time and you see your direct impact on them. And...being able to realize that my actions had that type of impact was very powerful...for me.

He came to find that, not only could he withstand the appraisals and constructive criticism, but he experienced it in terms of deep care. His revelation that others were not out to destroy him but to help him, helped turn the tide.

Jesse described how he gained the momentum to want to improve things in his life. Early, concrete successes gave way to hope and optimism about his future, which in turn, motivated him to continue working the program, receiving feedback and guidance from others.

I think it came from like, initially positive results that came from "doing [the program]" and attempting to invest in things like school and friendships which were a very tangible path presented to you. Like, this is the right way to go about things. I started to experience small little benefits of that. I got an A on a Western

Civ paper, and I was like, "Wow--that's really satisfying. I can do school. I can do this. I could get another A." And starting to develop friendships which felt good. Having friends felt nice and that made me realize, yeah, this is a good way to live. And so I just started to experience small, little... I just started to feel a little better by just kinda passively doing what [the community] told me to do.

With time and effort, Jesse developed a more solid sense of self-worth. In a community where he felt cared about, he realized that his initial impression of the community being a detached, controlling "authoritative force" was not entirely accurate. He described this important realization and turning point, which occurred about 4 months into his stay:

...it got somewhat better. And then eventually, I just started to feel pretty good about myself. Like, it was clear that my life -- my life at The Academy was improving in some ways, and I ultimately realized just like, this could be a really good thing. I could gain a lot from this. And I realized that what they were doing-- what was special about The Academy, they weren't saying, like, "Submit." I realized that it wasn't the impression that I got earlier on where it was just all about negating yourself and negating your will, and just kind of submitting, following the rules and stuff. But I realized that—Wait, the point of The Academy isn't following rules. Like, that's not the thing that helps. The thing that helps is the ways that I'm starting to feel good here and my successes here. And I just realized that I started to-- I was always really interested in Nietzsche just throughout my life, and at home, I was always interested in him because he critiqued the idea of morality of being this kind of---foolish kind of construct that

people blindly sort of followed, and the fact that we need, the individual needs to set his own ways. And that at home kind of gave me an excuse to be like-- Yeah! Fuck doing what my parents tell me, I'm gonna do what I want! But what I realized what he was really talking about was being *excellent*... And I was starting to feel good, like-- Excellent! And I realized that that's what it was about. And you could argue that in that way, there's a sort of "Nietzsche-an" quality at The Academy, in the way that The Academy values *strong* people. People who are just like-- they speak their minds, they have integrity, they're great at life. And I started to realize that I could feel really good about my life, and that feeling could be even more genuine if I copped to all the rule-breaking that I did, and started to do The Academy fully... and that was a big moment in my The Academy stay was ...kind of *renouncing* my dishonesty, and committing to doing The Academy, to going through the process...in a fully honest manner.

He elaborated that this major shift in perspective was really the result of "starting to feel a sense of success" in making friends and getting good grades. Though he admitted that confrontations from his peers and other external consequences certainly played a role in helping him change, he realized that improving his life was ultimately up to him. His life was in his control.

...what The Academy makes you realize is that YOU are the person that fixes things, you know. And that, yeah, we'll kick your ass but we're not going to *make* you do things and *make* you feel good. It's something you kind of realize for yourself. And it took me about 4 months to really start realizing that, and to really start going through the place in an honest, serious manner. It was just like...I

threw all of my chips in. I'm in! I'm doing this. Like...that was definitely the most pivotal moment, I would say.

Programmatic Elements

When Jesse shared thoughts about those aspects of the program he found most significant to his experience, he emphasized the community of peers, his close friendships, and the academics. For him, these were the exact areas of difficulty that resulted in him being sent to a therapeutic school. As he told his life story, he perceived his early life to be positive in these regards; he had friends and did well in school. However, once he reached adolescence, when the challenges and demands of his social and academic worlds increased, he began to struggle. His once charismatic, powerful personality deteriorated into insecure, paranoia as he tried desperately to find popularity in a culture that highly prized a superficial, "partying" life style. His academic ability and creativity was lost in a curriculum that he found to be unchallenging and poorly taught. He was unconvinced that schoolwork was worth his time and energy.

Particularly for Jesse, learning how to relate to peers in a mature, healthy way was crucial to his development:

Yeah, the social atmosphere. For me, developing a presence there was important because it was difficult for me to have presence, and making friendships was important because it was difficult for me to sustain friendships. I was sort of used to losing friends or having bad relationships. And so for me, those were very tangible places where I could improve and push myself.

Jesse described a full daily schedule that required purposeful time spent with peers, in addition to the multiple hours of community responsibilities and homework that

were required. Particularly as a newer member of the community, intentionally developing relationships was an expectation.

A [typical] day's just like-- you have a list of things that you need to do and you need to organize them. And there are certain things that are fixed in place and other things that you need to fix around them. But you wake up no later than 7:30 (laughs) and then you know, you have certain things you need to do. You have certain responsibilities that you need to plan around homework, and also, you need to...a good part of your day is other people. Like, making sure you have a meal with somebody that day and that you have...usually like there's like a sort of pressure. Or like, it didn't become a pressure later, but at least when you're a younger member, there's a pressure-- like, "OK, I need to have appointments with people. I need to be social."

As he put it, "your relationship to the rest of the community... was just as important as responsibilities and homework. They all had an equal" importance. He said he would often keep the domains of "friendship, responsibilities, school" in his mind, and would reflectively ask himself, "What did I do today that was beneficial to these areas? Where did I mess up?" He described the environment as one that valued "spending your day well" and "making good use of your time." In contrast to how he perceived the pressures of regular high school to be, he said of the Academy:

It's like the same pressure that you put on yourself for success in high school, except that it's success for the purposes of internal satisfaction rather than how you look. So, I think that at the Academy, there's a pressure to make sure that the things you're doing are meaningful and helping you out and helping you grow.

And for me, the best ways that I could grow were through just working hard in school and...my relationship to other people.

He explained that though the pressure to do well was initially felt externally, it eventually developed into an internalized system of values for himself:

Initially when you're first at The Academy, a lot of it is just the pressure of the environment but I would say that over time...that just becomes a part of your own way of thinking. And I still think about-- I still think in that way of doing things that are important to me. For example, when I do schoolwork nowadays and I don't take it seriously or it feels silly-- I feel bad about it. So, eventually, that kind of external pressure to... live a very meaningful life and kind of endow the things you do with meaning... really sticks with you.

When asked how the external pressure was manifested, he replied:

Like your friends asking you about your day. When somebody asks you about your day, they're actually really interested in how your day was! (Laughs) There's like this pressure to have a good day. There's like an atmosphere of self-evaluation, which is big there. People talk about themselves and their lives, and talking about their lives translates to realizations that sort of translate to action...which translates to growth (laughs) and change.

An aspect of living well included "looking for ways to contribute and ways to add to the community." Jesses pensively shared that he became motivated to give back because of the care he had received from the community. Though at times it was not always easy to feel cared about by his peers, he noted how different his experience was at the Academy compared to the way he felt in his large, public high school:

But at the end of the day, I mean, people were talking to me WAY more than anybody in the hallway at high school would be inclined to be. I mean--you live together! Like, the fact that people SPOKE to me and asked me how I was doing-that's like a--that's a powerful thing! Because people--unless you're friends with somebody at high school, nobody gives a shit, you know? But if you're at The Academy, there's a basic care and respect that you need for everybody because you're a community. And you feel that way more than you do at high school. You're like-- You're there, you definitely matter.

Jesse also commented on the integration of schoolwork with his "personal life," suggesting that for the first time, he began to integrate the intellectual, emotional, and social parts of himself. When considering his upbringing, which seemed focused on the development of his intellect, less emphasis may have been placed on emotional vulnerability or attachment. When he was at the Academy, both his intellectual and emotional needs were deemed important and worthy of his attention. He became more "whole" in the process. In a way, his peer community became his family, and he realized that how he treated and lived with his peers could not be separated from the rest of his daily life. He had to face the real consequences of his behavior:

A big element is also that you're just, you're living and breathing in the same space. When I was at home, there was a big divide between my private, domestic life and my social life. So, having those two become one in the same at The Academy was really....important. Because all of a sudden, it's like your relationship to people at The Academy is like your relationship to a family

member. And you need to do this cleaning team together, and you're all going to night group. And...You're in the same space.

When Jesse reflected on how this therapeutic experience compared to his past experiences in treatment, he emphasized the role of motivation. He pointed out that for many adolescents, like himself, going to see an outpatient therapist could only really "work" if you were motivated to participate; however, at the Academy, he said the role of his peers was a much greater motivator even when he wasn't particularly convinced he needed to change:

With outpatient therapy-- in order for it to work, you need to actually want to be there. Whereas with The Academy you can start off not wanting to be there, and it can eventually start to work. And perhaps the same could apply to outpatient therapy, but there's no pressure-- it's not like your friends are gonna be like, hey! You should take advantage of your therapist! (Laughs) So, I'd say that out--Seeing a therapist was a waste of time for me because I just didn't care.

Like many other students at the Academy, Jesse was tapered off his antidepressant. He said at first, he was a little scared and unsure of how he would feel, but he was also open to the idea that perhaps staying on the medications wasn't the ultimate solution to him feeling better:

And, I mean, I guess I was kinda afraid but I was open to it because I knew at the end of the-- What I realized was they kind of made me apathetic to things. And that...to put it in a very Academy-esque way, when I got on Zoloft at home, I did start to feel better but...it probably wasn't a good thing that I started to feel better because nothing changed externally in my life. Things still kinda sucked. I still

didn't have school, I didn't have friends, I barely had a family...um, but, I just felt a bit more ok with that. Like, I could get past it, like, whatever. And so I'd say-like, if you're going to get on anti-depressants, the same way like if you're going to see an outpatient therapist, you.... you need to actually have intentions of changing and growing. And if you don't-- if you don't care, then it's not really going to impact your life in a positive way except maybe-- make you feel -- I guess it does make you feel a little bit better, but it doesn't change anything realistically in your life.

He said that the he "could barely tell" the difference when he stopped taking the medication, saying it was hard to

...distinguish whether I felt sad because I was getting off the meds, or if I was sad because I had just got sent away and...I was already feeling very emotional just arriving at the Academy.

While Jesse acknowledged that for some people, talking to their primary therapist played a "big role" in their stay, he believed that at the Academy, "you can fully experience [the program] without ever meeting with your primary that much." Certainly for Jesse, the relationship with his therapist seemed to be less important to his overall experience. Aside from individual therapy, he said clinical staff played a significant role in shaping the culture and values of the community; when problems arose, they were addressed by staff in group. And though the role of friendship was clearly paramount from his perspective, he clarified that it was not "the number of friends" that was important, but rather it was about having meaningful, authentic relationships that pushed one towards personal growth. Because the Academy was a therapeutic school, Jesse was

quick to point out that it was really all about "changing your relationship to yourself and feeling better about yourself." And for Jesse, feeling better about himself seemed to boil down to being able to make and sustain friendships. He spoke with great emotion about why this was, for him, the "single most important thing":

To me, the relationships with your peers is-- I would say that is the most important relationship at The Academy. I saw the adults as assets and people who could help you, but I saw the friendships with my peers as key-- because these are my equals, they're my peers. And this is my world, this is the world I live in, and it's important to feel good amongst these people, who kind of comprise--who kind of make up my life. There's-- the support and love for each other at The Academy is like... one of the most miraculous elements about it. And just that--the atmosphere of support and really earnest care for others was like... (Pause) THE most important thing and I think is the most important thing for the school to succeed, is to just like-- the idea that you're your brother's and sisters' keeper. And it's just... It's socially probably one of the most safe [sic] places. I mean, people will...people do talk about other people and things like that, and get pissed off-- but because they, they're a part of your community, you have to deal with it. And so often that comes out in the form of confrontation or trying to get past your differences. I remember especially towards the end of my The Academy stay, I realized I couldn't confront somebody every time they pissed me off, but there were some people, I just kinda had to silently have to get past that I wasn't a fan of them and still act respectfully. I realized that it was important, even though I don't like this person, I need to be respectful, and they're a part of my greater

community here at The Academy, and I care about the community, thus I'm going to be respectful towards this person.

When Jesse came to the Academy, he entered a distinctly different culture from the one he had experienced back home—one in which doing well in school was considered "cool," and one in which partying was replaced with deep, genuine connection. He found a place where he could once again enjoy being his "nerdy" self and find acceptance amongst his peers.

The Role of Academics

Jesse made it clear that academics played the other major role in his stay. He clearly woke up to learning when he was placed in an environment that seemed to challenge, interest, and support him. Though he had a sense that he could have done well in his previous school had he chosen to, he recognized that the classes at the Academy were quite challenging and required more than just a better attitude; a certain level of intelligence combined with motivation and hard work was necessary to succeed. While he believed he was smart, he admitted that he had always struggled with many of the general skills of strong students. He was disorganized, procrastinated, and cut corners when he could get away with it. While undiagnosed, Jesse's profile was characteristic of a student with deficits in executive functioning. He did not report receiving any special services in school; it is likely that his advanced intellectual ability masked some of these problems until the higher expectations of middle and high school. The combination of his academic gifts and talents, combined with these deficits, suggests that he may be a "twice-exceptional" student that was never identified as such. At the Academy, the small classes and individualized attention made it more difficult for him to continue in his poor

study habits. He eventually began to put forth more effort and get the support he needed, experiencing small successes in school which motivated him further. Jesse's overall schooling experience suggests the importance of academic fit, particularly for students with exceptional strengths and weaknesses.

Jesse described his experience of learning at the Academy as "meaningful," and that alone seemed to provide an environment conducive to his thriving academically. He also found the structure—such as the mandatory study hall—and the culture to be positive influences on him. He said that faculty and clinical staff played a large role in sustaining a school culture where high academic standards were the norm. Perhaps even more motivating was the positive peer pressure he felt. As with other aspects of the program, the peer component was most compelling for him: "I think having other students that cared about school was key."

The fact that everybody was studying and the fact that people were like, Yeah, school's a big part of our life here. You need to engage it. I think if schoolwork was really popular at home and if people judged you for how well you did your schoolwork, I probably would have been a better student at home. (Laughs)

He thought the courses at the Academy were "much harder but much more meaningful" than those at his previous school, stating that "the main difference was that the classes were much smaller and you got a lot more attention and a lot more personal focus. And also there's an atmosphere that—everybody's doing schoolwork and people are finding their schoolwork meaningful so that's part of the culture as well." He made it clear that at the Academy, being heavily invested in schoolwork and learning was "foundational" to the school's culture.

Overall, he found his experience in this therapeutic academic setting to be different than his experiences back home, particularly in defining success:

The main difference is that—one, the way that success was defined. At the Academy, there's a much more flexible definition of success... People don't so much value what you're doing but the way that-- (pause) the way that you lead your life directly leads to a sense of satisfaction and strength. And so at The Academy, it's less about what you do to feel successful, it's about feeling good about yourself and feeling proud while...at home... if I told my friends I was getting A's, I'm sure they'd be like-- oh, wow, that's really cool, dude. And I'm sure they'd even be happy. But there are still all these other standards of like, you know, being socially strong, having lots of friends, and you know-- getting with a lot of girls, being funny...

Finally, Jesse said that it was important to him to have the academic and therapeutic aspects of the program integrated:

I think it was really cool to have...school be a part of my personal life and to--I think being able to, in the same way they push you to grow and get meaning in other parts of your life, being able to care about school and to find a lot of meaning in it was just phenomenal. And I think that element was a BIG factor in...in my being there. ... The academics seemed to be good because of the school and just the way they approached everything. So I just liked how academics were just meshed with every other part of your life. Sometimes, in a way, people speak about academics at The Academy, they sort of try to separate it. You got

therapeutic stuff and school stuff. But for me, it was as important to--finding purpose in my schoolwork as it was to have good friendships.

It was also critical to him that the academic program was, in his mind, high quality. Otherwise, he would have had difficulty staying engaged and motivated. He said it was "very important" for him to be academically and intellectually stimulated by his teachers and classes.

...the fact that the academics were so good at The Academy (laughs) -- if they were bad, it would have been a lot harder to be there.

On Family

Jesse found that family—his parents as well as others' parents—played a less significant role in his experience. In fact, he felt he was able to grow and change because he had distance from his parents and could focus on other aspects of his life. Though he felt that his relationship with his parents had improved over time, he acknowledged that he didn't pay much attention to the relationship while he was at the Academy because he believed most of the issues had been resolved once they were no longer in constant conflict. The distance seemed to mask whatever communication problems there had previously been.

I think I got closer to my parents and I was able to speak openly and honestly with them. But distance was totally necessary in order to foster that. And I think... my relationship with my parents will never be the way it would be if I was living at home with them, you know? I think by sending me to The Academy, my parents in a way had to accept that, "We're not going to...be traditional parents anymore." I think I just had so much shit with my parents at home... and that stuff got mixed

in with my own problems. So what's nice at The Academy, you just kind of deal with your own problems and then you eventually deal with stuff with your parents.

When he reflected on what he thought about his relationship with his parents and what would be most beneficial at this stage of life, he said:

I do need space from my parents. I think that just at the place I'm at in my life, I'm still understanding myself and I'm still trying to develop myself and build my own space within the world-- and it's, it's tough because my relationship with my folks isn't .. the best relationship---I mean, we both love each other, we can talk and hang out. But...there's still a lot of little conflicts that can come up. But I think... that it's going to take time for me to kind of become an adult and figure myself out before I can turn back and really be able to feel the value of family a little more. Because I think I still....don't have as strong of a relationship to my family as I would like.

Finally, he talked about the general role parents played at the Academy. The parent community, which existed parallel to the student community, gathered to meet at the school every six weeks. He felt that sometimes parents tried to participate too much in the life of the student community. He said fondly of them:

I felt like, you know, parents are great. Parent Weekend is a lot of fun but—I always had this thought like--You know, you guys aren't the community. I mean, you're an important part and we love you guys and you are a part of the Academy community in a way, but at the end of the day, the students are my family. And so

(laughs) I liked parents, but-- there were few parents who I really connected with on a deep level.

Leaving the Academy

Jesse described the anticipation and challenge of re-entering society, so to speak, perceiving it to be more difficult than the typical transition from high school to college:

I think...in your last few months at The Academy, realizing that you're leaving and what that means is really...What was weird with my personal experience....realizing that I was going back to my old town which I hadn't thought of in a really long time, and I hadn't reached out to too many people, and it was weird for me to realize that I'm entering society again. I've kinda of been out of society for two years and that's a really crazy thing. It's certainly...it's tough specifically because it's different from regular high school. Like regular high school kind of floats right into college, you know, it's a pretty clear, linear path. But what's stranger about The Academy, as far as placing it in terms of my life, is that it was like being out of regular society for two years, and so it makesit's much more harder [sic] to integrate into the current experience.

Jesse's transition out of the Academy was also emotionally hard because he felt some of his classmates lost the sense of meaning and commitment to values that he identified with the Academy. He seemed saddened by this reality:

I just realized there's certain--you can't have all of The Academy but you wish you could have all of The Academy when you leave, in the sense that... (Pause) you just wish there were certain things. You wish that everything could have the same meaning as it does while you're there. But to see that people lose that sense

of meaning and intensity can be really disappointing, but for me...it was...it was important...

For Jesse, he held his Academy experience dear and he shared how he wanted to keep the meaning alive in his present life by maintaining a relationship to the school in whatever ways made sense to him:

I think I just realized...that I need to find ways to keep, to revitalize and give life to the lessons that I had here, because if I ...if I lose a connection to that place or I don't find ways to keep that going, then that...it's just going to be difficult to remember that stuff because the lessons you learn at the Academy are so wrapped up in that place. That-- I think leaving the Academy, that's like a big...Just thinking about my relationship to the school and the way you take your lessons with you...That's become the most...that's the most recent chapter, I think.

Perceived Changes

Jesse attributed multiple changes in himself to the work he did at the Academy. Mostly, he described changes in the way he thought about others, his future, and life's challenges. For example, he believed he was more thoughtful and considerate of other people, and he placed a different kind of value on meaningful friendships.

...I think just the importance of friendship...and also distinguishing-- making sure I keep in mind what real friendship is--and you know, why I need it and what I get out of it. Because I think prior to The Academy, a lot of my friendship seemed like a kind of social necessity. Almost kind of like, armor, something that helped carry you through high school. And I thought about friendship a lot just in terms of power, I would say. But...I think, as far as how I think of friendship nowadays,

I'm much more inclined to consider the value of my friendship with somebody *AS* that person and think of them as a person, and why do I like that person? And not just--Oh, another person who could become a part of my friends.

As he elaborated, he talked about the way his "moral awareness" had been developed, and how this impacted his decisions and behavior:

I'd say that perhaps prior to The Academy, I couldn't say that I was particularly thoughtful or really-- I didn't really think on too much of a principled level when it came to-- let's say somebody who I don't like, for example. I really wouldn't have any concern for them... or tend to be particularly respectful. But now, I can kind of accept that those people exist but I'm not going to--I don't know-- Yeah, thoughtfulness! (Laughs) ...Just caring more actively about how I'm affecting people. Because you know, it's not like prior to The Academy, I just had a reckless attitude. But I would say that when I look back at situations where I was--(pauses). I think I was more quick to justify the way I treated people, and was more quick to just affirm, Yeah-No, I wasn't wrong about that! So I guess I'm a little more thoughtful and considerate about those moral situations.

In addition to being more thoughtful about other people, he said he also more thoughtful in general. He had a more realistic sense of time, long-term planning, and goal-setting. He approached his future differently, recognizing that his choices and behavior influence outcomes.

... just thinking more in the long term ... I'd say a big lesson that you actually just take away, is just learning how to think and not acting recklessly. Not acting in

the heat of the moment, but you know--being able to understand what's going to work out best for you in the long run. ... I can plan life a little better.

In addition to thinking ahead to the future, he learned to work hard and persevere to reach his goals, and that it was worth his continued effort:

When you're at The Academy, you're very goal-oriented. Like, I want to get these things done. So let's say you're thinking about this week. What do I want to get done this week? ...they kind of become a part of how you think about things. I guess what I mean about fight is just-- it's difficult to do anything you want to do. It's difficult to do things in general. It's the idea of--if this is something that you want, then you should work really hard to get the most out of it and not settling.

And finally, Jesse described having a more resilient and mature way of seeing and dealing with obstacles in life, incorporating a balance of accepting what he cannot change while working to change what he can:

I thinkone big [change] would be dealing with life's blows in a much more rational manner. I think kind of accepting that, that there's going to be a lot of messiness and that the world is not going to match up to my ideals. And that I can't demand that everybody match up to what I think is right, but rather that I just-- you know, I need to work with people and work with conditions in my life in order to make the best of them. So, almost a sense of compromise and humility. ...I think that anything that didn't fully back up what I wanted, or align with what I wanted to do, I would just shove to the side. It's almost like trying to pick and choose your life, rather than just accepting the whole package for what it is. That's certainly a big one.

...And I'm still aware that there are still certain conditions that I can't change but I think when I consider my life, I know that—— Yeah, I do know that I'm able to, to just make change, or to like, that there's no— Like for example, sometimes people say about a semester, "Wow, I really got myself off on the wrong foot. Now this semester needs to end. And then I can do it over at the next starting point." And I guess now, I recognize that there can be a starting point at any point—for the most part.

His attitude had changed from being "fatalistic" to being confident that he could overcome life's obstacles, even turning negative experiences into positive ones:

...in just the way I think, I'm always thinking in the grander scheme of things, so I guess that's how the whole long-term element kind of works. For example, when I'm having a difficult time or I feel lonely, I'm --I can in some ways, rationalize it a little better by saying, "Hey, this is life" you know? And...so some degree of looking at that type of adversity that I can experience as having almost a productive potential. Like when I-- I just know that struggles can...that I can turn...like, turn them around or even use them for good things. Like--you know, the way that musicians are able to turn pain into music.

Overall, Jesse felt that his experience at the Academy helped him both academically and personally; he was able to get his life back on a trajectory that was successful and satisfying. He found direction, motivation, and a sense of self-efficacy in his schoolwork. But perhaps most importantly, he felt empowered and confident in leading his life:

[The Academy] helped me...just on an academic and personal level, just figure my life out and get it to a better place. Getting into college is one really clear way of conveying that to people. Because they're like, "Ah, yeah, college!" That's a very clear and solid kind of benefit. And...I would say that it...helped, just helped me to develop a more solid relationship with myself and my life. I feel more in control of it.

Current Meaning

Jesse clearly identified how he internalized the values of the Academy into his current life, saying that "it played a very big part in shaping who I am, and what I care about." He expressed the importance of him being able to hold on to these values, to incorporate them in natural ways as he progressed through his life outside of the Academy, and to continue to make meaning of his experience through sharing and talking about his memories so that he could "hold onto those lessons." He said it was important that what he learned there "to kind of flow into" his "newer life."

Specifically, Jesse pointed to "care," "integrity," and being "real" as being some of the essential lessons that he took away from his stay at the Academy:

Just like-- care. Being able to express care in all facets of your life. I think integrity and when I say integrity, I think about the literal meaning of wholeness and the idea that I'm not just going through the motions in my life. The need for my actions and my life to have meaning, and to feel satisfying. That's a big lesson. And just, yeah, for things to be real. And it's weird because there are some things outside of The Academy, you just can't fully embrace, you know--some

things are kinda arbitrary and silly. And you just kinda feel like, ok, this stuff kinda sucks but I need to remember what's important.

He expressed how important it was for him not to detach or compartmentalize his two years at the Academy from the rest of his life, seeing it not as some "isolated experience" but rather as a "moral compass" that he can consult with as time goes on.

It's more of an internal feeling of this-- yeah, it's like an internal [Academy], you know? And it-- there's an element of just wanting to sustain a relationship to that experience. (Pause). You could think that well, you can keep the lessons but throw away the experience or not think about the school. But...I don't really think you can depersonalize things like that. It's just-- it was a really good two years of my life, so I try to remember it and learn from it.

What seemed noteworthy in Jesse's description is the absence of discussion about his previous drug use. He did share that he made "sobriety commitments" at the end of his stay, which meant he was choosing to refrain from using substances. Rather than focus on his substance abuse issues per se, which seemed to be symptoms of an underlying problem, he spoke much more about values, character, and moral awareness. These seemed to be the major take-away lessons for Jesse. He described how he had internalized many of the values at the Academy—such as honesty, integrity, and personal responsibility—and this provided the lens through which he viewed his life. It was apparent that Jesse recognized the role he played in his own life-- his choices, his behaviors, his attitudes. He downplayed the role of medicine or even therapy in his process of changing, emphasizing instead hard work, good relationships, and a sense of internal success.

Most strikingly, Jesse sounded satisfied, positive, secure, hopeful, and optimistic when he talked about his life. His gratitude and care for the school, his friends, and the overall experience at the Academy was evident in the way he affectionately and emotionally spoke about it. It was understandable that for someone who found "family" in this community of friends, leaving to go to college was emotionally challenging. He seemed to be struggling with finding a way to stay connected to the meaning of his experience, wanting to stay in close contact with the school even though he recognized that he would be less familiar with the student community as time passed. Still, he seemed determined and committed to keeping this positive experience alive in his heart.

Jesse expressed how he wanted to give back to the school community, because as he said:

At least for now, it's a pretty active way to understand myself. ... And the students there are very much a part of your school experience... so it almost feels like one in the same. They *are* the school to you, in some ways.

Participant 5: Griswaldo

Entering In

Griswaldo entered the Academy with a long history of feeling socially isolated and alienated from others, including his own parents. Even from his earliest years, being born deaf meant he could not hear and understand what was going on in the social world. His attempts to communicate were stifled during the critical window of language development. Compounding this sense of disconnectedness with the world, Griswaldo's family life was disconnected. He "lost" his mother when he was about five years old, after his parents separated and she moved back to Russia. Though his mother was alive, his relationship with her throughout his life seemed to be unpredictable, unsatisfying, and

perhaps somewhat confusing. She could be overly affectionate, almost smothering at times, and yet absent or passively present in regular day-to-day living. By the time he was an adolescent, she seemed to be a distant memory—an important character from his past, but not someone he actively engaged with as a son in the present. On the other hand, he harbored a lot of anger and bitterness towards his stepfather and these feelings lingered as he entered adolescence. Fortunately, Griswaldo seemed to recall his parents' divorce as amicable and without conflict, so in that way, his parents' separation may have not been an on-going emotional challenge as it is in other situations. However, the reality of living with an eccentric, creative, and pre-occupied single parent for his early years, and then again during his middle and late adolescence, seemed to come with its own emotional challenges for Griswaldo.

One might say that by the time Griswaldo initially entered the doors of the Academy, he was not only disconnected from others, but from his own thoughts and feelings. He had spent years keeping himself preoccupied with various activities (e.g., computers, reading, etc.) in his isolation. Over time, he no longer knew what to do with the pain of being alone, and so he turned to dramatic, suicidal gestures as a way to both escape and engage others. This approach eventually seemed to work. His parents were alerted to his problems and had to act, in tandem, to help find a solution.

Griswaldo passively followed his father's guidance to interview at the Academy.

After being through a series of psychiatric hospitalizations, Griswaldo was taking six or seven different medications which likely had an impact on his level of clarity and decision-making. Griswaldo was a bit foggy in recalling his early memories at the school, but he said his father's desires played an important role in his initial agreement to attend:

My dad basically told me that he was looking at a couple schools. I didn't really think about it very much. I just separated myself enough from my situation that, whether I went to the Academy or anywhere, I didn't really feel it. I didn't feel like it was going to be significant. I wasn't really thinking about it. So going to the Academy didn't feel like a serious thing to me. It just felt like--it just happened to happen, type of thing. So, my dad was there [at the interview] and he really wanted me to go to the Academy. And for some reason, I felt like I had to go there in order to...otherwise, I would just really disappoint him. And that mattered to me so I did-- I said things and did things which would get me in.

Griswaldo admitted that he did not necessarily have his own personal reasons for wanting to attend, other than pleasing his father. He was "really nervous" during the interview, and shocked when he was eventually accepted. His initial impressions seemed to be generally positive but included a heavy dose of disbelief.

I thought it was a nice place. I mean, I didn't know if it was for me but— I knew it was serious. Although I would have doubts in my mind. A lot of times I would go through my head and be like—they can't be like, *seee—riously* like that. They can't be *that* strict. They can't be following all the rules like *that*. I had a feeling that there was some sort of facade or—I don't know. It was just really strange to me…why people would follow all the rules and then be really mad at each other if they broke a small rule. It didn't make sense to me…If the adults weren't around… I was thinking that maybe if I were closer to the community, then I'd see it more for what it really is. I don't know, that was just the kind of thinking went on in my head.

He expressed his skepticism, wondering if the entire community was "an underground," with him being the only one not in the know. He just "didn't trust it." His social anxieties and doubts about his ability to join a group of peers also impacted how he viewed this community-based program:

The community at the time was pretty small and very tight-knit. So, it was hard for me to feel like I could become part of it. But that was kind of my issue for a long time. I felt like I couldn't be a part of groups of friends, or stuff like that, or a community. And that was just a stronger version of that because I just saw how close everyone was.

When asked what gave him the impression of such closeness within the community, he said he observed:

... how open everybody was with each other. I don't know--It's kind of subtle, actually. You kind of notice it in the body language and how familiar everyone is with each other. Like they know everything (laughs) about each other! And I didn't really know that much about them.

In contrast, in the early part of his stay, he said he was "basically pretty isolated" and "didn't make many friends, or any friends, there." He recognized that old habits of trying to get attention, such as being "pretty loud and obnoxious," pushed peers away and just made him feel more isolated.

In addition to these social challenges, Griswaldo experienced other difficulties in his first few months. He said he "wasted a lot of time" and did not do his academic work or communal responsibilities to the standards that were expected. His procrastination and poor work habits eventually caused problems with teachers and peers. He noted that

during these early months he was also tapering off his medications with the assistance of a psychiatrist. He said there were some times when he "just couldn't sleep at night" because of the physical effects of weaning off the medications. Overall, he said this was "pretty unpleasant" although he added that being *on* the medications had also been unpleasant "in a numbing way." He eventually adapted, but this experience seemed to cast a negative light on his early part of his stay.

Unfortunately, Griswaldo's "learned helplessness" that he developed back home did not seem to fare well in the environment and culture at the Academy. For a beginning student at the Academy, a passive approach to life didn't lead to success. Of course, Griswaldo didn't know any other way to engage with life. He identified as a "mental patient" in many ways, feeling a sense of relief and safety whenever he was admitted to a psychiatric hospital. Taking medications was an easier way to deal with his problems than tackling the underlying issues. Even though his dramatic cries for help certainly caught the attention of his parents, acting out didn't seem to work as well in this new community. His peers were less tolerant of such behavior and directly told him so. It wasn't until he finally got honest with himself and found the courage to voice what he really wanted, that he started down the real path of change.

The Process of Change and Turning Points

Griswaldo described a significant turning point, when he chose to leave the Academy after 3 months because he found it too painful to stay. After voicing his wish to no longer stay, the Head of School asked him to leave. He was shocked at this response and the realization that he really did not have to stay because the program was entirely voluntary:

The way I decided to leave was kind of weird because I was kind of like... I just went up to [the Head of School]. Or in group, I just said, "I don't really want to be [here]." And I was finally really honest. Yeah, I had a lot of trouble being honest with myself and with other people... about what I wanted. So I was finally pretty honest for the time...saying that...I just don't want to be here anymore. [Head of School] was like, ok, fine, you're expelled. And I didn't believe I would just get expelled like that, but I got expelled. Because I didn't--it's a voluntary program. I mean, if you don't want to be here if you don't see a reason for why you want to be here--It was really real to me. It was just a very surreal experience because...I didn't know that I could just do that. Just leave, basically. At the time, I wanted to go live in the woods by myself and stuff like that. Like, not be around people because... well, basically, because I just didn't want to see how people were (laugh) so close to each other. It wasn't a pleasant feeling that I couldn't do that. I really felt that I couldn't do that, I didn't try. Or maybe I tried and I just didn't know how.

For Griswaldo, the peer-based program magnified his difficulties; it was very difficult and scary to begin making friends. Having been alone for so long in his life, without any experiences of lasting, trusting friendships, must have made the prospect of entering into a community quite terrifying. He was not confident that he would be able to overcome his social anxieties and learn new skills. He left the Academy and went to a therapeutic wilderness program, where he said he had some positive experiences of success. This impacted his attitude, making him more confident and hopeful, and he later returned to interview at the Academy for a second opportunity. This time, he took a more

active, empowered role to make the decision for himself. However, at his second interview, he said, "I felt like I was expected to know what I wanted my future to be...

And to commit to it...more than I was really committed to it or understanding of it."

After this turning point, Griswaldo began the hard work of changing and creating a better life for himself. Making friends was perhaps the most challenging yet rewarding experience. At first, his new, improved attitude coming out of wilderness seemed to have a positive effect on how others related to him:

People approached me a lot better, but I think that's because I had a different attitude. And I approached other people differently. Yeah, actually that was really nice because I started talking to ["Joe"] more, and yeah, I really started growing when I started making friends. I had kind of a pleasant first couple of months there. Just getting to work. I started doing maintenance...and that was good. I was just kind of happy, you know?

After this initial period, he really began to focus on developing friendships. The process of getting close to people involved shedding a lot of his fears and gaining trust with a select few. He talked about how he long felt paranoid and insecure in his relationships, suggesting an insecure attachment style. He both wanted relationships, desperately at times, and yet because of his own anxiety, pushed his friends away. In these early friendships, he was able to work through his insecurities and feeling of low self-worth:

I became a lot more friendship-oriented which was very difficult for me because that meant that I was more exposed and vulnerable to people. And I wasn't that close to people yet. Or, I wasn't used to that. I would feel hurt a lot. I used to get very, very paranoid about people's intentions. I think that's a lot of what separated me from people. When I tried to be friends with people, I would kind of force myself into that space, and maybe in my head, I would still feel like people didn't like me or wanted to get away from me or something like that. And that just led me to feel like a burden to other people and to my friends. That was really hard. The closer I got to someone, the more painful it felt. Whenever I read into some sort of body language or something like that, and then I would compare their relationships with other people...and that was awful. And that wasn't good.

Another significant realization and turning point came when Griswaldo's close friends graduated and left the Academy. He regretted the ways in which he had behaved in one relationship, in particular, and as he reflected on his mistakes, he made a conscious decision to do things differently:

I just wanted to make the most out of my friendships while we were at The Academy but didn't know what that meant or what that was. Didn't know what I wanted. But when they left, I was like--Well, I just completely destroyed that friendship because I was so paranoid...and needy...and I don't know, just pretty irresponsible as a friend. So I just made a very, very deliberate decision to be a responsible friend. And that's really all it took. It was kind of a simple statement to myself but it was a really strong one. Just like--Being consistent. Being ok with hurt. Accepting... I think trying to be reliable and a good resource for other people, rather than trying to find something *from* other people.

He clearly recalled this significant moment and how his realization positively influenced his behavior, in addition to his attitude:

I remember just sitting down...I was like, Well, that was a complete failure (laughing). And then I felt really refreshed and (pause)...and I was like, Well, I'm just gonna do things--I'm just not gonna repeat these mistakes ever again. And so, yeah, that worked out really well. A lot of new people came in and I got close to many, *many* of them. And then people really respected me for just, what I did and who I *was* and I don't know. I just emitted a lot of positive energy, I guess. I mean, that's what I wanted to do. And you know, I got closer to a lot of my friends in the same class. It was just...I just feel like I had to change an attitude.

He said this attitude change was "very quick," almost like a switch that suddenly had been flipped after years of painful failures and setbacks in the social world. He recalled that soon after he had this realization about friendship, he went on a home visit with a very different outlook:

Initially, I didn't want to go home because I felt like-- I'm just really depressed or something. But then I went home and went home with open eyes and open arms. And whatever happens, happens. And I think that was one of the first times that I used that kind of phrase or attitude or outlook in such a positive way rather than an apathetic way. To whatever happens in the future, I'll just work with it. But I'll do it actively rather than taking it in and...You know. I want to make the most out of it rather than just experience it passively.

It wasn't until he felt the real pain and loss of his most treasured relationship, perhaps recapitulating the loss of his mother in his early childhood that he made a conscious decision to relate to people differently. This shift seems to have been a powerful experience for him, for it brought about real change that had resulted in him

finally breaking through his fears and insecurities so that he could be a stable, secure friend to others.

Griswaldo had another significant turning point in his stay. It became clear to him that he would not successfully make it through the program if he continued to consistently fail meeting the expectations of the program. He described a sense of urgency that he needed to change and do things differently. He described this process as clear and simple as making a decision and crossing a "threshold:"

For me, if I'd stayed the way I was at The Academy, I wouldn't have survived...and just realizing that...I think was very important for me to change that. Because I knew what was at stake and it wasn't just about me. I mean, some of my dad's friends were paying--helping to pay for The Academy and stuff like that. I mean, it's not just financial but I had people who cared about me...and people I really cared about and I didn't want to sacrifice that. Anyway, I just felt like, well, I didn't have very much to lose. The next thing that I could lose is the Academy... I kind of changed. Really quickly. Out of instinct. Out of survival, in a way. As well as other things, but I, I just felt there was no other way. I just had to do it. I wasn't enthusiastic but I was like, I don't want to stay in that place. So, I had to cross a certain threshold. Like some people never cross that threshold so they kind of stay in that place for a long time, because their experience is more diluted. Right? I mean, different people have different thresholds, maybe? At this point, I had two very clear paths. It was either to change or not change...and suffer the consequences of that. But yeah, it was acute enough to come to that point and...for me to see it that way.

These significant shifts in perspective seemed to positively impact his outlook not only on friendships, but on his life in general. It was as if they provided a sense of clarity and a surge of positive energy about his future. This positivity affected his behaviors, which resulted in him finally creating a special place for himself within his peer community—a challenge that had eluded him his entire life:

I felt like I was a very important part of it [the community]. I felt really close to--I mean, a lot of people in my class didn't have many friends in the current senior class, but I do. And you know, I still feel a part of it. ... I have a lot of friends there who I still miss. But yeah, that's the thing--I used to be really afraid of missing people. I mean, I don't like missing people still, but somehow I kinda like it. I don't know. It somehow reminds me of the fact that I do-- like, I've had these great experiences. Like, kinda lucky to do that.

While making friends and becoming a part of the community was a primary focus, Griswaldo also took important steps towards leading a more disciplined life, which included developing a better work ethic and attitude towards school work. He knew that in order to succeed at a college preparatory school, and eventually in college, he would need to change. For Griswaldo, the culture and expectations within the peer culture had a positive influence on him:

I struggled academically. I mean not as bad as it used to be, I got a lot better. And honestly the social component was like--a really good motivator to do well in school. I mean, it was like a fear-based motivator...

He also said that, though he "hated routines," he found that he had to learn to create more structure in his life in order to get all of his school work and other

responsibilities completed. In this way, he learned how being more disciplined had a positive outcome.

In addition, he worked on his relationships with his parents, though he felt that having physical and psychological distance from them was important for his healthy development. Interestingly, he didn't describe the connection with his parents as important in the broader picture. One might consider this a predictable response given his relatively low level of attachment to them, particularly to his mother. In addition, at this stage of adolescence, it's developmentally appropriate that connecting with his peers would be more motivating and satisfying. He did express feelings of care towards his parents, so it seems that some of the previous issues he may have had with them had been worked through to some extent.

It was great just being away from my family (laughs). Yeah, I mean I love my parents a lot but... we just can't live with each other. But that's like pretty much the situation with a lot of people who come to The Academy. But yeah, with my parents, it's just hard to live with them.

Overall, he described his process of change as slow and arduous. It wasn't until his final year in the program that he began to see and be encouraged by inward and outward successes.

It actually took a really long time [to change] because--I had a little successes with school and stuff, but...not very much in the beginning. That would be about when I felt really successful... Like two years. Yeah, I was really slow.

Programmatic Elements

Griswaldo highlighted particular aspects of the program that he thought were significant and distinctly different from his previous therapeutic experiences in several ways:

Psych hospitals, they were like, you know, they're just places where you kind of --it's like treatment. The Academy didn't feel like treatment. It just felt more like a life-style type of thing. And it made sense given that...you have to stay at The Academy for so much longer than at the psych hospital, unless there's something seriously wrong. But it's just a different kind of thing.

Another difference was the role students played in shaping and creating the therapeutic program:

Students are part of the community and they kind of help form it, whereas in a psych hospital, people just kind of come in with their kind of...things to share and... like, that's good but there's no consistency. And it makes sense given that people don't stay there for very long. And also the focus is on trusting psychologists enough to follow a certain treatment or something like that. That kind of happens at the Academy except that you're free not to trust staff there and follow your own regime, as long as you're being respectful and as long as you're contributing to the community. He also thought the small size of the program allowed him to be "more focused" and less distracted. The cultural values and expectations within the community played a role in his experience. For example, honesty, integrity, and student empowerment were elements that made the program more meaningful, albeit more difficult, than other programs.

Well, it is very values-centric. Like, honesty is...very important. And complete honesty. And it makes sense because in a way, you're kind of debugging your life. You're trying to make sure you are as transparent as possible, so you can keep yourself accountable but also, so other people can keep you accountable.

Finally, he said the transition out of the Academy was different from his experience leaving the psychiatric hospitals:

I think psych hospitals can be good for some situations. But...with psych hospitals, it feels like you need to do a lot of follow up to keep, to change something for a long time. I mean, with the Academy, too, but you have a lot more momentum coming out of the Academy, because you have all these friends and you still have some sort of-- you have an attachment to the Academy.

Yeah it's more meaningful. A more meaningful experience. But also a very

...Yeah, it's more meaningful. A more meaningful experience. But also a very difficult one.

Aside from those specific differences from his experiences in psychiatric hospitals, Griswaldo believed that the most central, and perhaps unique, aspects of his experience at the Academy were the peer community, friendships, the role of confrontation, and self-improvement:

I guess the first thing that comes to mind is the community there, or my friendships there. Because the Academy has many parts, and I think that's what makes it really...work together. Just being in a close community...and having friends there was a very big part of my experience there. It's the kind of warmth that I haven't seen outside of the Academy yet...in such a mature atmosphere. What sticks out to me at the Academy is the amount of confrontation there is

there, and also the emphasis on self-confrontation. And that's a thing that I definitely take with me here [in college], just being more comfortable saying my opinion and saying what I think. ...Because at the end of the day, I think that a lot of what I learned at the Academy was also about self-improvement and treating my life as a project that I can always work on. ...Focus on self-improvement, on growth. You know, it's more integrated [at the Academy]. Whereas high school is more about...I mean, it's also about social life but...you're more on your own there. It depends on who you are whether you make use of it or not.

The fact that the program was voluntary was significant, particularly because he chose to leave and then decided to return. He also saw how important it was to the rest of the community to have students who truly wanted to be there, remarking that "I guess it's harmful to the community to have people who don't want to be there...for a particularly long time." The highly structured schedule and routine was important for him as well. Because he had so little free time, he was forced to become more thoughtful, diligent, and efficient in planning and using his time; these were all difficult for him to do before coming to the Academy. Finally, he thought it noteworthy that there was a high degree of trust between students and staff, or an "alignment" between them rather than an "us vs. them" culture. This created a particular environment conducive to students taking more ownership in the process and not rebelling or undermining the therapeutic process.

On Academics

The other major aspect of Griswaldo's Academy experience seemed to be tied to the academic struggles and successes he had there. He acknowledged that he had had a poor attitude towards school for most of his life, finding it uninteresting and, perhaps because of his difficulties in school, unworthy of his time and effort. While there's no way of knowing definitively, Griswaldo's history and characteristics seem suggestive of a twice-exceptional identification. In this case, Griswaldo's advanced ideas, extreme curiosity and imagination, and wide range of interests (outside of school) was mixed with poor performance, lack of organization and study skills, and difficulty with written expression. He reported being diagnosed with dysgraphia, attention-deficit hyperactivity disorder, depression and anxiety, and later, bipolar disorder. Of course, his early deafness could have also caused auditory processing issues. It seems that his giftedness was not always acknowledged, though perhaps it was when he was in Russia and was given the opportunity to skip a grade. In the U.S., it wasn't until he was having serious problems in school that he was tested and placed on an IEP. Even then, it appears that while his disability was recognized, his giftedness was not.

For Griswaldo, his academic struggle—and eventual successes—were fundamental to his overall growth at the Academy. By Griswaldo's description, he seemed to awaken to the joys of learning in school once he entered into an academic environment that appropriately challenged him while also giving him the support he so badly needed. Because students were expected to stay aware and help each other in all areas of life, including academics, Griswaldo could not hide his academic struggles and shortcomings. This was both challenging and beneficial, as he was someone who was very motivated by his peers:

Sometimes I would struggle with school, and it feels really bad to struggle with school at the Academy because it has such a social component to it. And when your grades are read out loud and they're not good, you're like 'Shit, I fucked up.'

And you kind of feel like other people look at you the same way. It's probably not exactly like this, in reality, but-- that's how I felt.

Fortunately, he was also able to get the support he needed in order to improve, and felt that there were more than enough resources for him to succeed in his classes:

I got a lot of help although I think compared to a lot of people, I think I did a lot on my own than others. It's really strange but I--I also had a lot of trouble asking for help when I needed it. Eventually that changed. ... The teachers really cared about how you were doing in class, and they would tell you your grade or what they thought you needed work on. Even though I had all these resources, and I used some of them, I didn't use all of them so... for me, it was more than...enough.

He described the importance of the academic program in terms of broadening his intellectual pursuits and passions. He found his classes and teachers to be both stimulating and challenging, helping him stay interested and motivated in school. His peers' interests also had a great influence on him in this regard:

I mean, it [academics] was hard. There were points when I started enjoying it.

Because academics at the Academy were very stimulating, particularly the

English and philosophy classes. They were *so* good. Honestly, before that, I didn't
do any (pause) any work relating to philosophy or literature or anything like that.

I was like, well, I like math. I'm not good at math but I like math. I like science.

Yeah. So that's what I'm going to specify in, and that's what's going to get me
ahead somehow because I'm good at it. But...reading, I've read a lot and...I just
love, I just have a much broader spectrum of knowledge and understanding and
ways of seeing things. And honestly-- I'm probably more of an art and literature

than I am a computer/math person. ...it was a nice discovery. I don't think it was innate. I think it was developed, too. Actually a lot of my friends were into art and into literature and philosophy. And so I was inspired by a lot of them. I was curious, I was really curious.

Being in a community of like-minded, highly capable and inquisitive peers, seemed to play a major role in Griswaldo's academic pursuits and passions, as well as his changed attitude towards school. He seemed to have developed a self-awareness of his interests, academic strengths, as well as his weaknesses. In addition, he found that the way academics were closely integrated with the therapeutic program provided him ways to grow both cognitively and emotionally, as a whole person.

The English classes and philosophy classes—I felt they really contributed to my growth as a human being. Yeah. (Pause) Somehow, spending a lot of time alone writing a paper and reading a book and...I don't know if math really fits into that very much, but in some ways it does because when you do math, you do hard work. You think about things and you know, it uses your brain. Yeah, I feel like overall, especially with the humanities, I've become a lot better of a person. I feel like a lot of therapy went through my academics almost as much as was talking to people and dealing with things.

Lastly, he discussed the preparation for college and the application process, in which he received a lot of support from faculty and staff. In a culture that highly emphasized college, he began to have hope and belief that he, too, could eventually attend a great college despite his previous academic struggles. He described how the emphasis on going to a high-quality college permeated the school:

That was pretty much built into the culture in a way. I mean, it was mentioned so many times, and people talk about it so much. It was just kind of strange. ...Like people were excited to go to college so it made sense...it's just that.... Like, sometimes I would be kind of excited hearing about other people going to college because then I was like--well, I could do that, too.

He said that there was "definitely a lot of emphasis on the name of the college."

The entire atmosphere of the school focused on students getting into a college that would help them fulfill their potential. When asked how it would have affected him if the school culture put less of a priority on college, he said:

If people didn't care about college as much-- Yeah...Then I wouldn't really care about it. I mean...Yeah, at the Academy, both teachers and staff and students were about that...so it was pretty intense (laughs). Yeah, it is part of the culture.

Leaving the Academy

Griswaldo described the experience of leaving the Academy as positive in many ways. He felt that he had internalized many of the values and attitudes that he had learned, so that preparing to leave did not seem like an unsettling transition for him. He talked about the way that he saw his leaving as just another point in his path and process of growing up:

There was a point at The Academy towards the end, where I just didn't believe in saying good-bye so I just didn't say good-bye. And actually, that was a really fine way of... I feel good about the way I left because I didn't leave as if-- "OH, it's one more week! Oh no!!!" I just did things the way I always did things. In a really good way. Like, I wasn't in a regime anymore, I was just doing my thing. So I

didn't feel the need to prepare for anything and actually, that *REALLY* helped with going home and transitioning.

Towards the end of his stay, he devoted more time and energy to personal hobbies. For example, he discussed many fun activities and projects that he enjoyed:

I would build things. I built a bridge once... and I made a "fail system"- And then... mowed on the drive-mower which I loved driving... I built an antenna.

Overall, the way Griswaldo experienced his transition out of the Academy seemed secure, happy, and stable.

Walt and I worked on, you know, the—[school-intranet], network thing.

Perceived Changes

Griswaldo thoughtfully reflected on the ways in which he believed he had changed, which might be summed up as "My approach to life has changed." His work ethic improved. The way he thought about his actions and consequences changed.

I just feel like I think about things, like, with more consideration. I think differently. And I consider my actions more than before I went to The Academy. And that was a result of being at The Academy and... undergoing the process there.

His relationships with peers certainly improved, as did his relationships with his parents. He felt more competent and confident in his social skills. He also trusted others more and was less paranoid and insecure.

I'm more honest with myself and with other people. I'm not thinking of things to say that would please other people or you know-- I don't feel as much of a tactical game. I realize that the more I am myself, like the more people-- I mean, they

might not like me, but you know, I don't really let that bother me very much. I'm a lot more... like, I've always been pretty intuitive with how I should speak to people? But-- and their body language...like, before The Academy, I didn't really take that into account or hold that much weight to it--and I do that a lot more now because of that...yeah, I do connect to a lot more people. Yeah, just a lot of things honestly, that I can attribute to my experience there.

He felt he interacted with girls, in particular, in healthier and more honest ways.

His experiences creating platonic friendships with girls at the Academy (because romantic relationships were not allowed) helped him respect and value girls as more than sexual or romantic objects. He admitted that this had been a challenge for him earlier in his life.

I think that the way that I talk to girls now is very different than before The Academy. And that's definitely because of The Academy, having to...form good friendships with girls. And that's something a lot of people don't really do outside of The Academy (smiling). But yeah, I think that also changed a lot--self-honesty.

He had a greater sense of security, in general, and found himself more open to taking risks. He learned how to be more honest with himself and others, and took a more proactive, empowered approach to decision-making. He adopted a "can-do" attitude and learned to persevere even when things were difficult. He gave an example of how he was "re-learning to be rigorous" with his schoolwork in college, which he found to be "pretty difficult." However, he seemed to approach this challenge with a more optimistic and hopeful attitude:

At least the attitude I have with it is-- I've done it before, and I've been a good student before...So...you know, I can do it again. I just have to keep at it. So I think that attitude-- the attitude piece is really--...I'm just more open to new experiences because of that, or because of my experiences at The Academy because I had to take a lot of risks.

Finally, he had more positive feelings and thoughts about himself; he learned to value himself in the process of feeling accepted and valued by others.

From a developmental perspective, Griswaldo seemed to make impressive gains in terms of his sense of time, empathy, relationships with others, and moral reasoning. One can trace the trajectory from his early magical and unrealistic thinking about time to the more mature, thoughtful planning for his future. He came into the Academy being primarily concerned about his own needs, with little awareness or understanding of the feelings and needs of others. He entered into friendships with a neediness that often pushed away his more mature peers. He progressed through a stage of pseudo-empathy, where he tried desperately to be liked. Only through the challenges in his friendships did he eventually come to experience true empathy and separateness in relationship to others. Finally, while he entered the Academy with a very concrete way of thinking about the "rightness" of his behavior—mainly, avoiding punishment—he came to have a much more developed and nuanced sense of ethics. He had successfully developed a fully functioning moral compass.

Current Meaning

In contemplating his experiences at the Academy, Griswaldo seemed to blend those memories seamlessly into his current life experiences. He stated that his experience

at the Academy wasn't "that different from just, by itself, my experience now." He felt that the peer community and relationships, as well as the hard work he put into personal growth, were the most meaningful and significant aspects for him. He said that he continues to learn from his mistakes, moving on and not getting stuck. Rather, he described his philosophy and outlook on life, in terms of what he learned at the Academy, believing that self-improvement was a "life-long project."

His internal satisfaction about the person he had become was the lasting sense that he brought into college life and early adulthood. He felt good about the work he did to change his life, and he felt hopeful about his future:

I mean, it's nice [being an Academy honors graduate] but what matters is what I do with it afterwards...what I'm doing now. I guess, the work I put into who I was at the Academy and who I am now means a lot to me. But the label...doesn't really strike anything. I mean, even though I was more-- early on, more attracted to the label than I am now or I was towards the end of my stay. ... I mean, for me, it's the work behind it. And I'm proud of that. ... Yeah, it's a very self-satisfying. Like, it's more isolated or solitary than... you know, it's just that I know in myself that--I know who I am and I've done these things, and there are things that I did that I'm not or I wasn't very proud of, but I learned from that and I know how to move on from these things, just in my life in general.

Griswaldo's primary experiences at the Academy seemed to center around connection: connection to himself, connection to others, and connection to the world of ideas. As he slowly made these connections, he became more and more whole. For Griswaldo, he made meaning of his experience by taking a good look at who he had

become—who he is today—despite life's challenges and obstacles, and having a deep sense of satisfaction that he had accomplished great things.

Composite Textural-Structural Description:

The Essence of the Experience in Therapeutic Boarding School for Nicole, Griswaldo, Zoe, Jesse, and Corey

The following composite description answers the research question guiding this study: "What are the lived experiences of affluent at-risk adolescents who attended a private therapeutic boarding school?" It is a narrative representing the voices of all the participants, thus it is written in first person plural. Because I have never experienced therapeutic boarding school as an adolescent or student, I as the researcher am not included in this perspective:

Our experience at the Academy is inextricably tied to our life stories.

We all entered the Academy with different stories, but our emotional pain—our losses, trauma, disappointments, fears, failures, anger, loneliness—brought us together under one big roof. Some of us had intact families; some of us experienced family conflict and divorce. We grew up in educated, affluent homes and neighborhoods. Our parents held good jobs, which kept them busy; some of them were extremely successful and preoccupied with their careers. Most of us attended private schools, some of the most highly reputed in the nation, for part or all of our schooling. Some of us loved school; others hated it. We had varying success with ours peers growing up, but largely, we never quite found a way to connect to them the way we wanted to. We considered ourselves to be sensitive and sometimes extremely shy. Even those of us who were more outgoing had difficulties figuring out how to navigate the social scene. Many of us experienced

bullying at an early age, and in some cases, this lasted a long time. In our adolescence, some of us tried desperately to join the popular crowd, while the rest of us gave up trying to connect at all. Regardless of what we tried, we felt alone.

If we're honest, we are a pretty smart, creative, and perhaps unconventional bunch. Some might say we're nerdy, quirky, or even brilliant. While some of us entered the Academy as classic perfectionists and high-achievers, others of us might have been more accurately labeled as gifted underachievers. Our intellectual gifts were at times our greatest strengths, and in other ways, our liabilities. We were curious and imaginative, read a lot, and thought about complex ideas at a young age. Most of us found school to be a breeze, particularly when we were younger. We did well academically without having to put forth much effort. Sometimes our cognitive abilities were more developed than our emotional or social capabilities; this caused problems for us. We were fortunate if we had a teacher or school setting that recognized and encouraged our gifts and talents, but this was not often the case for a variety of reasons. By the time we entered middle and high school, things got a lot harder. The pressure to perform increased and this was stressful, particularly for us perfectionists. Some of us had actually struggled in school for a while; our academic performance never quite measured up to what we (or the adults in our life) thought we *should* have been capable of. This was certainly confusing and discouraging. We needed extra support in school, but we often never received it until we were well into high school. By that time, we already felt demoralized and unmotivated in school. Our parents and teachers were at their wits' end because they believed we had the potential to succeed in school. We didn't necessarily believe it anymore.

All of us ventured down a winding path of mental health treatment, sometimes starting as early as kindergarten. We met with an array of counselors, psychiatrists, and family therapists. Most of these professionals never seemed to really connect with us; of course, we weren't really interested in connecting with them. How could they ever understand what we were going through? We admit that we sometimes manipulated and lied to our therapists or simply wasted time talking about anything but the most important issues. Many of us were placed on psychiatric medications, though we were not always welcoming of this. We tried to self-medicate using alcohol, drugs, food, computers, cutting, or even compulsive work or exercise. None of these methods alleviated our pain in the long-term, but they certainly seemed to work for us in the short-term. Over time, as our pain became almost intolerable, all of us thought about—or even attempted—the "ultimate escape." Some of us made multiple suicidal gestures or attempts. We may have not necessarily wanted to end our lives, but we did want to feel better. And we desperately wanted someone to notice our pain—our parents, our friends, our teachers anyone! Our drastic attempts to escape our pain or connect with others landed us in emergency rooms, psychiatric hospitals, outpatient treatment, residential treatment centers, and therapeutic wilderness programs. We entered into a whole new world of "mental health treatment." It was strange and oftentimes frustrating. Some of us were incredulous. We didn't want to identify as mental patients. We didn't want another label, diagnosis, or medication. We just wanted to be healthy, happy teenagers—whatever that meant. We wanted to figure out how we could become that but we had no clue where to begin.

We were not full prepared for the rollercoaster ride that awaited us.

For many of us, going to a therapeutic boarding school came as a big surprise—we weren't going back home?! Our parents often did the research and found the Academy, thinking it would be the best setting for troubled, smart kids like us. While some of us felt like it was ultimately our decision, others of us felt like we had no real choice in the matter. Our parents were deciding what was best for us, and we reluctantly or sometimes quite passively agreed to give it a try. Though we were not always fully sold on the idea, we harbored a bit of hope that perhaps *this* could be the solution to our problems. From what we knew of it, this was an alternative school for teenagers just like us. They had turned their lives around, and apparently we could, too, if we put in the hard work. Would we succeed? Could we dare hope?

At first, the Academy was scary and intimidating, but we were also impressed by what we saw. It was a small, tight-knit community of bright, thoughtful teenagers; we wondered how we'd ever manage to become a part of it. Especially after being in other treatment settings, everyone here seemed "weird" and "strangely honest." We were shocked and a bit skeptical. Why were they so open and transparent with one another?! We couldn't believe there was no underground. The students seemed to genuinely respect and trust the staff. Why was everyone actually following the rules, even when the adults weren't looking? How did this peculiar place work?! We had never experienced anything quite like it.

Everyone seemed really serious about their lives. The therapeutic groups were intense. We heard students talking to one another and giving each other feedback with sometimes bold honesty. People were just so direct with one another. Sometimes we thought the "caring confrontations" the students gave to one another were too harsh or the

expectations too demanding. This was quite different from what we were used to back home or even in other treatment settings. We felt too sensitive, too weak and emotionally fragile to deal with the "realness" of it all. However, a part of us longed for and welcomed this authenticity. It was somewhat of a relief to be in a community where the masks could come off and you could be your true self. The question was—how would we gain the courage to do that? We wanted to figure out what everyone here seemed to know, but we were scared and unsure how to proceed.

The initial stage was challenging and often painful as we learned new ways.

Entering into this community was as hard as we thought it might be. We felt isolated during the early days of our stay. Though we were expected to engage with our peers, we were often too scared. Sometimes, it felt like a pressure to be social. We wanted to keep to ourselves! It was hard to connect with other people. We were anxious and self-conscious. We felt different and set apart for a variety of reasons: I'm the only girl; I'm the only homosexual; I'm the only one with an eating disorder. We didn't feel like anyone could understand us so we didn't really try, at least in the beginning. At times, we felt "trapped" in a bubble and just wanted our freedom. We missed the comforts and familiarity of home, even if that also meant loneliness and misery. At the same time, we were relieved to have distance from our parents. We needed that space. For those of us who seriously considered leaving, we realized that home wasn't an option anymore. Our parents stood firm.

Many of us were tapering off psychiatric medications. For some of us, this felt like a major victory; for others, it was unpleasant or unremarkable at best. The standards in the program were high. We were expected to make better choices than we had in the

past. This was easier said than done. We started receiving consequences—both natural and contrived—when our behavior didn't meet the program's standards. For some of us, this was a big change from how things were handled back home. For those of us not yet fully committed to the process, we broke major rules which, in some cases, meant we had to leave the school for a period of time.

Our experience consisted of gradual steps towards change, as well as perspectiveshifting turning points and sudden realizations.

Gradually, we became more familiar with the program, the routines, and expectations. We got to know our peers better and began to make budding friendships. For many of us, we experienced empathy and genuine connection with others our age for the first time in our lives. It felt better sharing with them than a therapist—our peers really understood and could relate to us! We liked and trusted clinical staff, but they weren't the key relationships for most of us. The most motivating change agents were our fellow peers. They confronted us, but they actively cared about us. Even though this sometimes felt painful or uncomfortable, we often started to feel happier. We were finally noticed. We finally mattered to someone. We realized we had an impact on others, for better or worse. In comradery, we pushed forward toward personal growth. It was a long, arduous process of making healthy choices every day. We learned personal accountability and responsibility to the greater community. We learned what it meant to be honest and have integrity. We began to develop discipline and a work ethic. We began to trust the process and the people. We began to grow in self-worth.

These lessons took time to learn. For most of us, the building of our new lives was gradual—sometimes painfully slow-- and consisted of small steps and successes, as well

as challenges and failures. Typically, we quickly changed once we encountered situations that shifted our perspectives or attitudes. Failure. Loss. Natural consequences. Realizing our role in it all. These situations were often painful, but crucial for us to take steps forward. Some of us experienced more defining moments which came with a "sense of urgency;" we needed to "cross a threshold." Some of us had major shifts in our thinking when we began to give back to others and saw how we could have a positive, meaningful impact. Some of us truly had to leave and return before we could take ownership of our lives. Once we discovered our own reasons for wanting to be there, we made much better use of the program and the support of the community.

Our parents were definitely involved in the process, and most of them engaged in their own therapeutic work alongside of us. However, our relationships with our parents often became back-burner issues, at least in the beginning. We needed the time and space to focus on our own lives and figure ourselves out. Whatever conflict or long-standing issues we had had with our parents certainly needed to be worked out, and we eventually did this with the help of clinical staff. But at the end of the day, what mattered most to us was how solid and secure we felt in the community of our peers.

The most important element of our entire experience was being a part of a caring peer community.

One might even say that the peer community was the experience. Though there were certainly other aspects of the program that stood out to us, nothing compared to the friendships and meaningful connections we made. It was by far "the biggest piece" in our minds. We had never experienced or seen anything like it before. It almost felt "miraculous," just how caring and supportive it was. We felt safe. Our hearts opened. The

fact that the community remained small—no larger than 25 or so—made a difference to us. We couldn't get lost in the crowd even if we tried.

Our peers were our equals. For the most part, we eventually felt like we fit in—even when we looked very different from one another on the surface. We had struggled with different things—drug use, anger, depression, anxiety, food, perfectionism—but when we sat down to talk about our feelings, we realized we had a lot more in common than we had once thought. We were all smart and working towards college, despite whatever had happened in our old schools. In this culture, it was "cool" to be smart and do well in classes. In fact, when we felt we weren't doing well in school, we were often motivated by the social pressure to take our schoolwork more seriously.

We were entrusted by staff to take care of our community, and that we did with great pride. We actively engaged with one another in and out of classes, groups, cleaning teams—all the time! When we had any free time, we were spending it with peers. We enforced the standards and rules of the program and held each other accountable. We felt trusted by staff, and in turn, we trusted and respected the guidelines and rules they set for the program. We took ownership of our community and "home," which even meant cleaning, mowing the lawn, and making meals together. We functioned very much like a big family, with "older members" helping to guide the "younger" ones. In fact, for all of us, the community *became* our family—it was like a "second home."

We appreciated the way this therapeutic approach was different from our previous treatment settings.

There were aspects of the program that we found preferable to treatment approaches we had experienced in the past. In fact, this didn't even feel like treatment so

much as a "life-style." It was certainly unique, "unlike anything else" we had encountered. Here, we were treated like individuals—not patients, diagnoses, or labels. We didn't even work with "therapists" in the traditional sense. We were off our medications. Our minds were clear. We started to feel more and more like normal teenagers. We started to feel respected.

It was a voluntary program, and at various points, we each came to own our decision about being there. We *could* leave and some of us did—or at least, considered it. Though we certainly had less freedom than we did at home, we also knew we had more freedom than we would have at other residential settings. We didn't have adults constantly looking over our shoulders, monitoring our every move. There was just a different culture and atmosphere of trust. We were expected and trusted to make good choices. We were expected and trusted to be honest. This freedom was both empowering and liberating, and yet also more challenging. The expectations were high, but so were the stakes. If we couldn't find a way to manage the freedom, we wouldn't be able to stay. We couldn't stay passive, dishonest, or destructive here. We had to find a way to make it work for us.

The approach was person-centered and individualized. This didn't feel like a step-by-step manual on "how to fix your life." It wasn't like some of the other programs we had been in where the professionals just told you what to do next--where *they* were the experts. No, this was different. Our peers helped us to help ourselves. It was more organic and natural; it felt more real and genuine. It felt like friends helping one another through life. We were simply growing up together.

The academic program was a fundamental aspect of our experience and was woven into our personal lives.

As much as this was a therapeutic setting, we never lost sight that this was a college-preparatory school—and a demanding, challenging one at that. The entire culture buzzed with talk of top colleges, working hard, and pursuing your passions. It was a highly intellectual, scholarly kind of place, which at least in the beginning, felt intimidating for some of us. Some of us welcomed it. The academics were "stimulating" and "amazing"—much better than what most of us had experienced in our previous schools. Some of us were shocked and even embarrassed when we realized how difficult these classes were—we had been straight-A students in our old schools and hardly had to work at it! Others of us struggled to keep up. We felt like we were "drowning." Our teachers really challenged us to think more deeply and to be more "thorough" in the learning process. It was definitely difficult but very satisfying once we started to experience success. Some of us got discouraged, but we pushed through. It helped that class sizes were small—on average 4 to 5 students—because learning could be individualized. Our strengths and our weaknesses were more easily recognized in this context. Our teachers were accessible and supportive, as were our peers. Our strengths were encouraged; our weaknesses, bolstered.

The reality of it was—we had to work really hard. There was no way around it.

We had the structure of a mandatory study hall to keep us on track. We regularly checked in with our peer tutors. We learned to plan, focus, and meet long-term academic goals.

We often had opportunities to pursue specific areas of interest, either in classes or independent studies, and this fanned the flames of our motivation and passion. We were

also inspired by teachers and our peers to develop new interests and passions—going beyond what we tended to think we liked or were good at. We experienced success and confidence in our abilities, and it felt great! By the time it came to apply to colleges, we felt supported and well-prepared.

Perhaps most importantly, we really valued the way the academics were integrated with the rest of our lives in the program. Teachers saw us more than just students in their classrooms. We felt comfortable sharing more personal aspects of ourselves that we would have never shared in our old school environments. We were given unique opportunities to write personal pieces that were emotionally healing for us. We also felt that our moral, social, and emotional development was valued as much as our intellectual development. We did not feel like we had to compartmentalize different parts of ourselves as we had back home. In fact, everything we engaged in—school, responsibilities, friendships, therapeutic work—happened in the same setting. We were the same person as we transitioned from one thing to the next. Somehow in that process, we felt like we became an integrated, "whole person."

We felt a combination of different emotions when it came time to leave.

We were filled with hope, anxiety, excitement, and optimism about our futures. We had internalized the values and lessons of our experiences. We felt empowered to live our lives well, and we had acquired the tools to do so. We all knew that we had come a long way, but we also realized we had a long road ahead of us. Our process of self-improvement—or perhaps, just growing up--would not end simply because we left the school. For some of us, leaving felt like a relatively seamless transition, just another step along the process of growing up and we experienced it positively. For most of us, though,

it was a bit scary, difficult, and surprising at times. We had been in a bubble for two years, and now we were re-entering society. We grappled with the unknown: What would it be like? Would our friendships stand the test of time and distance? Who would we become our new friends? Were the changes we made real and lasting? How would we respond if we failed?

For most of us, our confidence was boosted once we left and encountered real-world challenges. With more time and experience in the "outside world," we came to trust ourselves and our ability to handle difficulties. Though life could be hard, we recalled all the obstacles we had already overcome and knew that we could courageously meet the demands of this next stage of life. And while we welcomed the experience of college, a part of us really missed the community we had grown to love.

We believe we were transformed and made "whole" in the process.

When we reflect on our experiences in therapeutic boarding school, we see how much we have changed. We may articulate it in different ways, but we all feel like better versions of ourselves. We didn't have to give up who we were in the process—in fact, we feel like we've *gained* our true selves in many ways. We like who we have become.

We are proud to say that we value honesty and integrity. We take personal accountability for our actions. We are confident in our abilities and passionate about our interests. Where we had once felt despair, we are hopeful and optimistic. We are no longer passive, but active, involved participants in our own lives. We truly believe that our future—our choices, our successes and failures—rests in our own hands. We are certainly not limited by our pasts, and we know that no one else is responsible for our happiness. We feel empowered and courageous, though we are humbled by the

knowledge of our past mistakes. We are more self-aware and we've learned to accept ourselves—flaws and all. We feel remarkably more resilient—able to "roll with the punches" of life. We have developed grit. We've persevered through a lot already, and so we have no doubt that we can sustain our efforts towards our goals, despite whatever challenges may come our way. We've adopted a growth mindset; though we believe we're smart, we know that effort and persistence are the real keys to our success. Our strong work ethic and academic achievement is a testament to that. We're now much more responsible than we once were, and we can realistically plan ahead. We no longer just live for the moment, but consider our futures carefully. We've been accepted into great colleges—some of us weren't sure we'd ever make it this far! We've changed a lot, and while we had a tremendous amount of support in the process, we can confidently take credit for the good choices we made that got us where we are today.

But in our eyes, the most meaningful and significant changes involved relationship and connection. We learned how to make and sustain mutual relationships with respect, honesty, and transparency. We learned what it means to be a good friend. We learned that caring is more than just a feeling; it's an action. In the process of connecting with others, we also learned how critical it is to stay connected with our own thoughts and feelings. We're more mindful of that now. The development of healthier coping skills or a heightened moral awareness really came about as by-products of our relationships to ourselves, to our friends and families, and to the larger world around us.

Finally, our perspective of ourselves has changed, and in that shift, our perspective on our life stories has changed. We've turned the negatives into positives. We look back on our troubled youth and see that it can help others. We set sail from the

harbor of our childhood, through the storminess of our adolescence, and are headed into the steadier, deeper waters of early adulthood.

Our experiences in therapeutic boarding school are an integral part of who we are today.

We are so grateful for our experience, despite how difficult and painful it may have been at times. It shaped and molded us. We carry it into our present lives; in some ways, it still *feels* very present to us. As one of us put it, the experience *is* "who I am" today. More than any accolades or honors we may have received upon graduating, it is the deep sense of personal satisfaction that holds the most meaning for us. The experience was so meaningful, in fact, that we really want to keep it "alive"—we want to stay connected to it somehow. We ask ourselves—how will we do that and still move forward in our lives? How do we take everything we have gained and give it back to others? We feel a strong emotional attachment to the community and our experience. We developed family-like ties that, run deep and wide. In many ways, our experience provided us connection, purpose, and meaning in life like we've not experienced before or since. We hold out hope that we will, in our own unique ways, stay connected to the essence of our experience. For we once felt very lost in the world, but we found a home to call our own.

Chapter V

DISCUSSION

In the previous chapter, I presented the findings of this study, which culminated in the collective voice of the participants. The composite textural-structural description captured the essential textures and structures of their experiences in a private therapeutic boarding school. In this chapter, I will discuss these findings in the context of a developmental framework. I will examine important themes as they relate to the current understanding in the fields of development, mental health treatment, and education. I will also discuss aspects of the participants' life histories in light of current research on affluent youth. Finally, I will review the limitations of this study and discuss the implications for practice and research.

The focus of this research was on the subjective, lived experiences of affluent, atrisk adolescents who graduated from a private, college-preparatory therapeutic boarding school. I was curious how they experienced the process of being placed in a residential treatment setting in light of their life histories and family backgrounds. I was also interested in hearing their perspectives on the entire process of being "in treatment," particularly how they experienced their relationships, academics, and the therapeutic aspects of the program. Finally, I hoped to hear what they found to be most salient to their experience and what meaning this experience had for them today. The primary focus of this study did not change as the research process unfolded. The participants had plenty

to share about their experiences and appeared eager to reflect on its meaning for them. Because I was able to frequently check in and clarify information throughout the interviews, as well as at various points throughout the data analysis phase, I believe the findings are an accurate representation of participants' thoughts, feelings, and perceptions.

The Therapeutic Boarding School Experience:

Key Developmental Tasks and Themes

The participants may have been similar in terms of their socioeconomic status, but each was unique in terms of symptomatology and pathway to therapeutic boarding school. One thing they shared was their extensive experiences in traditional "mental health treatment," which in their cases, were not ultimately successful in providing long-term relief from their suffering. From a developmental perspective, one might view their histories and describe them as having been "developmentally stuck." That is, their psychological development had been halted for one reason or another. Reviewing their life stories, several factors emerged—at the individual and environmental level—that might explain the resulting serious psychological maladjustment. From a bioecological developmental framework, individual factors (e.g., high emotionality, advanced intellectual capabilities) dynamically interacted with environmental factors (e.g., family systems, cultural values, school environments), each shaping one another over time. From this perspective, then, the goal is not to isolate any single cause of the problems, but to understand the rich, complex unfolding and dynamically changing process.

In the same way, the participants shared several elements of their experience in therapeutic boarding school, all of which likely interacted with one another to produce the overall changes they reported. The goal of this study was not to prove that change occurred, but rather to understand the adolescents' perspectives on how their processes unfolded and how they made sense of their experiences growing up in a therapeutic residential setting during their middle to late adolescent years. Their descriptions of their process of change mapped onto several areas of development: social, emotional, moral, and cognitive and/or academic. Identity development, a key developmental task in adolescence, was an overarching theme in all of their experiences. The participants' final reflections on their lives, as they are currently being experienced, suggests that they encountered important developmental tasks during their therapeutic school experience, and in fact, have resumed movement on the developmental trajectory.

Overcoming Developmental Obstacles

Participants' presenting problems can be conceptualized using a developmental framework or as "developmental arrests" along key developmental lines. Several aspects of participants' behavior were indicative of such immature or arrested development. For example, many participants entered the Academy with a "magical sense" of time and thinking, disconnecting themselves from the reality of working hard in the present to achieve future goals. These underdeveloped skills interfered primarily in the realm of academics, particularly as they entered into adolescence and these skills became necessary to succeed. While many of them held on to a dream of going to college, only Zoe and Nicole demonstrated the ability to link and sustain certain behaviors to meet future goals. In a more practical sense, Jesse, Corey, and Griswaldo voiced needing support at the Academy to learn how to self-regulate: to plan and manage their time well,

break up large tasks into smaller ones, and work consistently towards a future goal. As they experienced small successes, they gain motivation and confidence to continue.

Participants' abstract thinking also developed and broadened over time, to include thinking about the feelings, thoughts, and perspectives of others. They also spoke about a culture in the school that encouraged self-reflection--another trademark of mature, adolescent development. This on-going process of thinking about their own actions, feelings, and thoughts, in light of those of others, brought about a tremendous change in maturity in their cognitive development. In addition, several participants commented on the depth or "thoroughness" of thinking that was required in their classes. Again, this "push" for maturity in cognitive development was a critical aspect of their experience and growth.

Another major developmental line was in the area of relationships. Most participants in this study described having very troubled and immature ways of relating to others when they first arrived at the Academy. They needed to learn true empathy and how to have healthy, separate relationships. Most arrived at the Academy quite self-preoccupied, and they viewed peers and friends as "objects" to gain or use for their own benefit, as extensions of themselves. Their relationships with their parents could be said to have been the same. For example, Zoe admitted she wanted to "use" her parents for financial support in college but wanted no other relationship with them. Through the development of friendships, feedback from peers, and psychological space from parents, they matured in the way they perceived relationships. This in turn changed how they related to others. Sometimes, these lessons were quite painful. As Griswaldo described, he initially felt great social anxiety and low self-worth in his relationships, clinging to

friends in sometimes suffocating ways. Through the process of developing socially and emotionally, and experiencing natural consequences for his behavior (e.g., damaging his friendship), he eventually shifted his perspective and attitude towards friendships. He spoke about a clarifying moment when he recognized where he had gone wrong, and how he needed to change in order to have more mature, mutually beneficial relationships. Likewise, Nicole mentioned a salient memory of experiencing true empathy from her peers for the first time in her life. This was a critical shift for her, as she began to internalize and develop empathy for herself. This prompted social and emotional development for her as well.

For most of them, the process of differentiation—or psychological separation from their parents—was challenging but necessary in order to mature with respect to having healthy, empathic relationships and a solid sense of identity. Zoe seemed to have the most challenging experience with regards to her parents, whom she had been battling for years. She described the critical realization which altered her thinking and motivation for working on her relationship with her parents. This healthier separation from her parents, in turn, gave her the psychological space and energy to develop healthier, more mature peer relationships. Eventually, Zoe was able to learn to trust others and see herself as a separate being, not the puppet of someone else (or vice versa). These healthy psychological boundaries in parent and peer relationships strengthened and reinforced one another. All of the participants felt that they had greatly matured in the way they related to others. Most, if not all, participants spoke at great length about the ways in which they had a clearer sense of who they were in the world. Some also commented that

the Academy helped them become who they are—suggesting the development of identity through the process of changing and growing.

Finally, several of the participants spoke about the role of moral or ethical development in their experiences at the Academy. Perhaps the best case in point was Jesse's description of his early pattern of "breaking rules," which he was able to get away with for a long time without many natural consequences. Dishonesty and lack of respect for others had become more than a bad habit; it was a lifestyle. His experiences at the Academy reflected a moral transformation from fear-based motivation to one that was centered on trust, connection, and more abstract principles. For example, he described how his behavior was largely motivated by the avoidance of punishment when he first arrived. He continued to break rules and lie about it, until he finally had an important realization that shifted his mindset. Once he felt connected enough to his friends and his community, he began to feel a sense of care and accountability to them. At that critical moment he said he "threw in all his chips" and from that point on, his "moral compass" and behavior was rooted in a deeper appreciation for the rights of others and a broader understanding of ethical principles.

Overarching Themes

In addition to the developmental themes that arose from analysis, several broader themes emerged from their descriptions of their experiences at the Academy. Primarily, the participants' descriptions highlighted the importance of the following:

- 1) Agency and sense of control;
- 2) Peer relationships and positive peer community,
- 3) Specific elements of the therapeutic program,

- 4) "Goodness of fit" in academics,
- 5) The development of non-cognitive abilities and attitudes, and
- 6) A sense of connection, purpose, and meaning.

Agency and Sense of Control

All of the participants spoke about agency or sense of control that they experienced over time. This finding is consistent with developmental literature on the importance of developing autonomy in adolescence, as well as previous research that highlights agency as a feature central to adolescents' experiences in mental health treatment (Block, Gjesfjeld, & Greeno, 2013; Hauser, 1999; Henriksen, 2014). The need for agency seemed critical to their experiences from the very beginning. For example, Griswaldo, Jesse, and Zoe clearly stated that they did not feel in control when they first interviewed at the Academy. They somewhat reluctantly or passively agreed to attend. In contrast, both Nicole and Corey had personal reasons for why they wanted to attend; they did not feel forced into it by their parents. Perhaps unsurprisingly, Nicole and Corey had a greater sense of commitment and intrinsic motivation for staying compared to Griswaldo, Jesse, and Zoe. These three participants described different situations, but ultimately they had similar results: they either chose to leave, were asked to leave, or seriously contemplated leaving. All three eventually re-committed to being students at the Academy, but only once they came to their own personal reasons for being there.

Overtime, given the structure of the therapeutic approach that gave participants a great deal more autonomy than they had experienced in other therapeutic settings, their sense of control over their lives seemed to grow. A strong sense of agency has been linked to more positive long-term outcomes for youth who have been placed in

residential psychiatric settings (Hauser, 1999). Participants in this study described how they developed more agency, a sense of control in their day-to-day lives, and self-efficacy in specific areas. For example, Nicole spoke about how shedding a "mental patient identity" helped her feel more hopeful about her future and ability to live a happy, healthy life. Jesse shared how he came to see that his thoughts and actions had more impact on his mood than his previous experiences taking psychiatric medications. Corey and Griswaldo shared stories of how they began to feel successful in academics when they were able to link their effort and attitude to positive results.

In the end, all participants reflected on the ways in which they felt "in control" of their lives. Their perspectives on their futures indicated that they perceived life as having continued hardships and obstacles, but that they felt equipped to handle them. Many of them also spoke about the degree to which "real-world" experiences after they left the Academy increased their sense of agency and autonomy even more.

Peer Relationships: The Positive Peer Community

The participants in this study made it clear that connecting with the peer community was the most significant factor in their experience. While a focus on peers would be expected during the adolescent stage of development, the degree to which this theme was emphasized by participants was striking. Others have found similarly remarkable results amongst adolescents in treatment settings (Hauser, 1999; Moses, 2011). Contexts in which peers support and share with one another provide the normalization of experiences that can be comforting for adolescents who find themselves needing psychiatric treatment (Moses, 2011). In fact, adolescents who participated in brief psychiatric hospitalization (i.e., 1 week average length of stay), voiced that group

therapy with their peers was experienced as more helpful than individual or family therapy (Moses, 2011). In this study, participants spent most of their non-academic time with their peers—whether it was in group therapy or one-on-one time talking or participating in activities. Many described the expectation to open up to peers, which at first, was anxiety-provoking. However, for all the participants, their peers seemed to be the major motivator. The power of their peers' opinions, thoughts, feelings, and shared experiences propelled participants in their own quests for change. Once participants began to make friends with even a few other students, this increased their motivation and sense of community, that these participants voiced experiencing their lives most fully.

Many of the participants had troubled relationships with their parents. No doubt, this factor may have been a large contributor to them needing residential treatment in the first place. In their process of differentiation from their parents, the participants spoke of how they came to create a "second family" or "home" within the therapeutic community of peers. They no longer felt obligated to their parents; rather they were more motivated by the sense of responsibility and obligation to one another. Even as it pertained to adult staff at the Academy, participants made it known that these supportive adult relationships were helpful and important, but not more so than their peer relationships. In this sense, the "positive peer pressure" that was utilized in a peer-based program seemed to effectively draw upon these adolescents' natural desires for acceptance and belonging. In fact, this sense of acceptance from the peer community may have actively guarded against fears of stigmatization and alienation, which has been found to be a critical factor

for adolescents receiving mental health treatment (Block, Gjesfjeld, & Greeno, 2013; Moses, 2011; Polvere, 2011).

It may be that for this group of adolescents, relationships and community were particularly important on their road to success and well-being. All the participants in this study shared histories of troubled peer relationships, some beginning with intense and traumatic bullying in early childhood. In addition, they all grew up in affluent communities which have been posited to be particularly individualistic, lacking in interdependent relationships and a sense of community found in less privileged neighborhoods (Luthar, 2003). For affluent adolescents who had little to no sense of belonging to something "greater" (e.g., family, community), living in a tight-knit peer community seemed to be a key ingredient for developing a more mature perspective, greater empathy, sense of self-worth, sense of purpose, and stronger connection to others.

Specific Programmatic Elements

The participants all shared specific elements of this particular therapeutic program that they described as being more effective or beneficial than their previous experiences in treatment. Interestingly, these themes in programmatic elements were in stark contrast to those found in previous studies on residential programs for adolescents. For example, issues related to physical restraints, limited therapeutic interventions, lack of discharge planning, conflicts with direct staff and peers, and stigma and alienation have been found to be negative experiences and perceptions of adolescents in residential mental health settings (Polvere, 2011). The participants' responses in this study are noteworthy in light of this because their descriptions and perceptions of this particular therapeutic program

seemed to be quite different in nature to the experiences described by adolescents in other kinds of residential treatment programs.

First, many of the participants appreciated or acknowledged that the Academy did not feel like "treatment." One person called it more of a "lifestyle." It seemed that the non-traditional approach was less stigmatizing than many of their previous psychotherapeutic experiences. Nicole, in particular, did not want to accept a diagnosis or label that seemed like a self-fulfilling prophecy, limiting her from ever moving forward. Zoe had not liked what she perceived as a "manualized approach" to eating disorders. She didn't like feeling controlled by others or being directed to do what she needed to do. This need for autonomy in working with adolescents has been documented elsewhere (Henriksen, 2014). Griswaldo actually admitted that early on, he felt it was much easier to be a patient in a mental hospital. It was a "relief" and an escape from the world that seemed overwhelming to him. Nothing was expected of him there. Jesse liked that he didn't need to feel institutionalized or forced to see a therapist, when what he really thought was helpful was talking to his friends. Corey, who had the most previous experience in other therapeutic boarding schools, said that the Academy was the most "serious" and effective place he had even experienced.

Another aspect of this program seemed to be the voluntary nature of it and the accompanying freedom participants felt they had relative to more restrictive settings. Other studies of adolescents in residential placements have reported a host of negative experiences and perceptions, including: excessive rigidity, restrictions, power struggles with staff—in some cases, verbal and physical abuse—and confinement or seclusion (Kaplan, Busner, & Chibnall, 2001; Moses, 2011; Polvere, 2011). These themes did not

emerge in this study, though one participant shared how he felt like he was "trapped" in a bubble after being in therapeutic placements for several years of his life. Though some participants doubted that the Academy was truly voluntary (e.g., they initially felt coerced by parents), over time they came to realize it for themselves. For Griswaldo, he was shocked to learn that he could simply leave the program if he didn't want to be there. His choice to do so (and later, to return) had an impact on his sense of agency and control in his own life. When he returned, he had a greater commitment to the work he was doing there. For Zoe and Corey, both over the age of 18, their sense of "choosing" to be there and doing a post-graduate year also impacted their therapeutic process and persevering when things were difficult. While not all therapeutic programs can be "voluntary" in this sense, it is noteworthy that this aspect made an important difference to participants.

Another unique aspect of the program was the deliberate minimization of adult supervision and/or control, and the empowerment of peers to self-monitor and regulate their community. Participants discussed how staff's expressed trust in the community was both challenging (to meet at times) but also liberating and very unique. Nicole contrasted her previous experiences in residential treatment centers with 24/7 supervision (where one of her peers successfully committed suicide), and said that she actually felt safer at the Academy when more responsibility was put on her to keep herself safe. This is a risky line, surely, and other participants admitted to how they managed to "break the rules" when staff or peers weren't looking. Still, these participants remarked that the overall atmosphere of trust and respect between staff and students created fewer problems, not more. For example, Corey and Griswaldo were both surprised and somewhat skeptical when they didn't find an "underground," something they expected in treatment settings.

All of the participants commented on how initially confused and shocked they were at the level of honesty they observed amongst the community members. As participants became more invested in the community, they became leaders who helped regulate and ensure other community members were making healthy and safe choices. They felt a sense of ownership in the integrity of the program.

They all spoke about the role of high expectations—both therapeutically and academically--and that what they learned was that others believed they were capable of achieving these expectations. Even when it was difficult, peers (and presumably staff) supported, encouraged, and confronted them to help them persevere through the challenges and what may have seemed impossible.

Academic Program: "Goodness of Fit"

Participants strongly emphasized the role of the academic program in their overall experience. The Academy states that it is designed to meet the needs of high ability students, and for this group of participants, the reputation of the academic program certainly played a role in their (or their parents') decision to attend. These students were self-described advanced learners as children, and they all reported that having challenging and meaningful academics was important to them.

In general, it seemed that students found the academics to be a "good fit" for them, given their intellectual capacities and, in some cases, their academic weaknesses. They all described the teachers and classes to be high quality, extremely challenging, and stimulating. Considering that many of them had attended highly reputable high schools, their positive perceptions of the academic program was particularly noteworthy. They said that the individualized nature of classes provided the right balance of challenge and

support, including opportunities to study topics of interest in-depth or to pursue novel interests in independent studies. The school culture and structure within the program seemed to help those who struggled with self-regulation. Over time, they learned to be more self-directed in their learning process, but only after they learned the skills needed to stay on task, manage their time, stay organized, and manage internal and external distractions.

Almost all of the participants shared how meaningful and significant it was to integrate academics into the rest of their lives. For many of them, school had become a "separate" part of who they were, but at the Academy, it became a central source of pride, meaning, and a place where they could be their "whole selves." Perhaps for highly able (or affluent) adolescents, it is particularly important for them to integrate the intellectual, social, and emotional aspects of themselves. The pressure they may have felt as children to academically succeed may have had detrimental effects on their overall psychological development (Miller, 1981).

Though it was not a focus of this study, it seems noteworthy that many of these participants exhibited characteristics of students of both high intellectual ability and one or more neurocognitive or learning disabilities, also known as "twice exceptional" students. In particular, all three participants who were underachieving in school prior to coming to the Academy—Griswaldo, Jesse, and Corey—fit this profile. Of course, there is no way of knowing for certain given that these diagnoses could not be validated; however, it may have implications for future research.

Non-Cognitive Abilities

There is a growing body of literature linking academic and long-term success to several non-cognitive factors—strategies, attitudes, and behaviors—including academic behaviors, academic perseverance, academic mindsets, learning strategies, and social skills (Farrington, et al., 2012). In this study, participants described distinctive shifts in attitudes, thinking, and behaviors that suggested the development of skills in a variety of these non-cognitive areas including (but not limited to): resilience, motivation, coping, grit, self-control, self-regulation, growth mindset, self-efficacy, self-worth and prosocial behaviors. Many of these constructs are interrelated, and the goal of this discussion is not to provide an exhaustive overview (see Farrington, et al., 2012, for a comprehensive review). However, based on the participants' repetitive refrains, focusing on the development of these skills impacted them in significant and positive ways.

Understanding the processes in which this occurred for this at-risk population would be useful for future research to explore.

Connection, Purpose, and Meaning

Baumeister (1991) suggested that life can make sense when four needs—purpose, value, efficacy, and self-worth—are met. In reflecting on the meaning of their experiences, these adolescents certainly spoke to these four areas. In their individual ways, each found a sense of connection, purpose and meaning. For all of them, connecting to themselves, their families, and their peers provided them opportunities for greater self-awareness, identity formation, and care for others. Being an active, respected member of the community gave them a sense of purpose and meaning, as they focused on living for more than themselves. Giving back—in the form of practical work, relational

support, or serving as a role model—gave them a great sense of meaning and purpose. In fact, several of them seemed to lament the reality that it was challenging to find opportunities in the "real-world" that matched the depth of meaningful experiences they had at the Academy. These existential themes of meaning and purpose spontaneously emerged in discussions with participants and should be noted for consideration in conceptualizing the needs of affluent, at-risk adolescents' treatment.

Life Histories in the Context of Affluence

The participants in this study shared their life stories in great detail. The primary research question of this study was not necessarily focused on their upbringing, but I was curious how this group of adolescents perceived their experiences with family, community, school, and other mental health professionals prior to being placed in a residential setting. I also wondered if factors related to affluence, as suggested in the current literature, might have played a role in their psychological maladjustment. Understanding their later problematic behavior in the context of their overall development was an important aspect of this research.

While I did not specifically ask participants about the role of affluence in their development, I did ask questions to elicit information about their family environments, cultural values and expectations, and school experiences. Their responses provided rich data and portrayed thorough pictures of how their childhoods were experienced. I will discuss the similarities and differences among participants' experiences and relate these to the literature on affluence.

Participants reported a wide range of information about their families that, when combined, indicate that they grew up in what many researchers would define as

"affluent," or characterized by "high-achieving, hardworking, and/or two-income families... without the seven-figure salaries (Koplewica, Gurian, & Williams, 2009). Participants completed a demographic questionnaire that included questions about their parents' education, occupations, and estimated household income. Though many participants did not feel able to accurately estimate their household income, most indicated it was in the range of \$125,000-200,000 or \$200,000 and greater, which is well above the median U.S. household income of \$50,054 (U.S. Census Bureau, 2011). All of the participants described having parents who were well-educated, skilled, and successful in their occupations. With the exception of Corey's mother who chose to retire from her career in occupational therapy to raise children, all parents worked for the majority or entirety of their children's lives. Participants' parents were employed in a variety of fields, including medicine, law, engineering, acting, and business. Finally, a few participants spontaneously self-reported that they had grown up in "upper-middle class" homes and communities.

Research on affluent adolescents has indicated a strong link between several parental factors and maladjustment. These include lack of close monitoring and supervision (Luthar & Barkin, 2012; Luthar, Shoum, & Brown, 2006); low parental containment and perceived parental commitment (Luthar & Goldstein, 2008), perceived parental values (Luthar & Barkin, 2012; Luthar & Becker, 2002); parental criticism (Yates, Tracy, & Luthar, 2008); and low parental closeness (Luthar & Barkin, 2012; Yates, Tracy, & Luthar, 2008). All of the participants described characteristics of one or both of their parents that reflect these categories, as will be discussed below.

Parents and Work

One example is related to the finding that children who perceive their parents to be too preoccupied with work are more at risk for developing serious psychological problems (Luthar & Becker, 2002). In this study, participants often perceived that their parents had been overly preoccupied with their work. This resulted in participants being physically alone or in the care of others for large portions of their childhood, feeling emotionally distant or detached from parents, or angry and resentful of the amount of time parents devoted to work. Most reported that their parents' work was very time and energy consuming, and this affected home life. For example, Nicole recalled how much her parents' careers were part of her parents' conversations, particularly because they worked at the same university. She also spent a lot of time at their workplace and recalled growing up surrounded by other faculty members and their children. She shared a poignant memory of how she once voiced to her parents her wish that they would pick her up from preschool like her friend's mother always did. This was upsetting to her parents. She also remembered having nannies and babysitters who provided her with afterschool supervision and activities she enjoyed.

In contrast, Corey felt that his father did not work "too much" but described a childhood in which his father did not seem to be emotionally present or engaged in his life, compared to his mother's role. Griswaldo stated that his father was involved in his work so much that he had very little time to spend with him, leaving Griswaldo feeling very alone and isolated. While Jesse didn't seem to indicate that his parents were unavailable in his childhood, it was clear that it became more challenging for them to supervise him as he entered adolescence, as they were both working full-time jobs. For

Jesse in particular, this lack of close monitoring and ability to supervise him resulted in him having more freedom to get involved in delinquent activities in middle school and beyond. Zoe clearly stated that she perceived her father to be more interested in his work and other personal interests than with his children, even when his time with them was already extremely limited.

Family Structure and Perceived Family Closeness

Another important factor linked to psychological maladjustment in affluent youth is parental closeness (Luthar & Barkin, 2012; Yates, Tracy, & Luthar, 2008). For a variety of reasons, participants in this study described varying levels of felt closeness to their parents. Family structure sometimes made a difference. Three of the five participants had intact families; however, Griswaldo and Zoe experienced separation and divorce in their early childhoods. Both lived apart from at least one parent for a significant amount of time. Griswaldo was the only participant who spent much of his youth as an only child. His half-brother was born when he was an adolescent and then he moved back to the U.S. shortly after. The other four participants had only one sibling. Interestingly, none of them reported feelings of emotional closeness with their siblings. Jesse described a generally friendly relationship with his older sister, who he viewed as the "golden child" in the family. Zoe had a particularly troubled and abusive relationship with her older brother. Both Jesse and Zoe perceived their older siblings as extremely intelligent and academically successful; indeed, both of their siblings went on to attend Ivy League universities. Zoe and Corey both had siblings a few years younger; those relationships seemed distant as best. Though there has not been much research in the

impact of sibling relationships in affluent families, these findings reflect a general disconnectedness within the family structure.

Most participants described feeling "disconnected" or detached from family or at least one parent. For Zoe and Griswaldo, they grew up with one parent physically and emotionally absent from their lives due to living in a different country. Most described their homes as emotionally disengaged or distant, though they often described a home environment rich in intellectual stimulation. Jesse and Corey described not feeling particularly "connected" or emotionally attached to family throughout childhood, indicating low parental closeness. Similarly, Griswaldo's description of his childhood and adolescence sounded almost emotionally impoverished given that he seemed to have little parental presence; neither his mother nor his father appeared to be consistently involved for much of his youth. Zoe, in contrast, seemed to have an emotionally enmeshed relationship with her mother. The relationship became increasingly tumultuous as she entered adolescence. She experienced her father as distant and disengaged for most of her life, until perhaps the year prior to being sent away. Nicole also reported having extremely different, and ultimately unhealthy, relationships with her mother and father as she was growing up.

Perceived Parental Containment, Commitment, and Values

All the participants touched on various factors that have also been linked to psychological maladjustment in affluent youth, such as the perception of parents' ability to contain their adolescent's behavior, parents' commitment to their emotional well-being, and parents' values. For example, Jesse reported low levels of *perceived parental containment*, particularly as he entered adolescence. Jesse's expectations of

inconsequential responses from his parents is linked to high levels of substance use among affluent high school students (Luthar & Becker, 2002; Luthar & Goldstein, 2008). With the exception of Corey, the other participants did not seem to struggle with substance abuse, and so the issue of parental containment may not have played as large a role in their development. However, many of the participants indicated a sense that their parents prioritized their careers and other interests over their children, reflecting low *perceived parental commitment*.

All of the participants expressed, to varying degrees, that they felt their parents emphasized, and therefore valued, achievement and success over other elements of their identities. These *perceived parental values* have also been linked to adjustment variables (Luthar & Becker, 2002; Luthar, Shoum, & Brown, 2006). In particular, parental criticism and pressure to excel academically can be damaging, and many participants voiced how they felt when they did not meet their parents' explicit or implicit expectations. In some cases, the parental pressure manifested in "micro-managing" of schoolwork, with an intense focus on achievement—so much so that it would result in conflict. In a few cases, underlying processing or learning difficulties may have hindered participants' achievement in school, and parents tried to compensate by managing or supporting their children's weaknesses (e.g., executive dysfunction). It may have been even more difficult if these academic weaknesses went unrecognized in the school environment.

Sometimes parents seemed vocal about their expectations and values—whether it was about finding an area of passion, having a certain body type, or getting into a particular school—and these pressures mounted as the participants grew older.

Additionally, an overall expectation that one would succeed academically was made known in less explicit ways—there was simply a general culture of success and high expectations in the home. Their parents placed a high value on their own occupational success, and believed in their children's gifts and potential. Parents exposed their children to travel and the world of ideas, politics, medicine, art, music, and engineering. Siblings, particularly if they were high achievers, also added to the sense of academic pressure. The participants seemed to deal with these pressures in different ways. Nicole and Zoe both tried to overachieve to meet these pressures, internalizing their parents' expectations and criticisms. Jesse, Griswaldo, and Corey seemed to brush off the expectations over time, eventually becoming careless and apathetic about their lives. Jesse recalled consciously choosing to pursue music with his band, rather than try to compete in school. Jesse, Zoe, and Corey also described chronic parental conflict that escalated over time, perhaps as they tried to "fight against" these pressures.

Cultural and Peer Values and Norms

Research indicates that the values and norms of affluent communities and cultures may have as much, if not more, influence on youth than parents' actual level of wealth (Lund & Dearing, 2012). All of the participants described growing up in affluent neighborhoods and communities where school achievement, hard work, and external success was highly valued. Most of the participants grew up in the Northeast, a culture rich in intellectual heritage and academic institutional elitism. Zoe and Griswaldo grew up with parents of different ethnicities and exposure to two different cultures, and they had to navigate the differences in cultural values, languages, social and school environments. None reported having concerns about their family's financial resources; in

fact, most of them attended private schools for all or part of their schooling. Some said they just never really had to think about money, though they were well aware that some people had less than they did. Corey recalled deliberately using his family's wealth to try to make friends. Many of them went to school with other middle to upper-middle class students. Many of them experienced tremendous academic pressure to excel, as well as social pressure to fit in and be considered popular. They described their high school settings, in particular, as high-pressured places, some with extreme "party cultures" where drugs, alcohol, and promiscuity were the norm. Whether it was the pressure to succeed academically or socially, all of the participants in this study succumbed to these pressures which had devastating consequences. In fact, these pressures seemed to begin as early as middle school, if not earlier. Finally, most of them described their school communities as predominantly white, educated, and rich.

While one cannot make any causal correlations in this type of study, it is noteworthy that the factors that have previously been linked to psychological maladjustment in affluent youth were described by the participants in this study.

Limitations of Study

This study has several limitations. While I deliberately took many measures to minimize my personal assumptions and biases on the data, I cannot completely be removed from the process. Given the role of the researcher as the instrument, I was the means by which the data was collected and analyzed. This is an inherent limitation in this type of research. In this particular study, my prior experiences with the school and participants raise concerns for potentially magnified biases. To address these concerns, as suggested by Moustakas (1994), I engaged in the process of epoche before data collection

and again before analysis. I frequently clarified and checked with the participants to ensure the accuracy of the data collection and analyses. I did this consistently throughout the interviews, when I finished transcribing their interviews, and again during the analysis and interpretation phase. Most of the participants responded to my later follow-up emails in which I asked them to review and correct information from their transcripts and life history profiles. A few responded with specific clarifications or corrections, which I then incorporated into the final results. However, one did not respond, which is another limitation of this study. Finally, I engaged in a peer review process with a colleague who had no prior experience with the school and who had qualitative research experience. We spoke regularly to discuss my process of analysis, beginning as soon as I finished transcribing the interviews. She reviewed my data analysis and interpretation, giving feedback or asking questions to clarify my thinking as necessary.

Because this study was based on subjective perspectives and retrospective accounts, it may be limited by potential "hindsight bias" or a particular focus on only the elements that I asked about and/or analyzed. Given that the analysis included only the themes that emerged from the perspectives of the participants, other possible factors of importance may be overlooked. However, because the goal of this study was to understand the perspectives of adolescents, one must interpret the data in that light. It would not be appropriate, for example, to make overarching conclusions about "best practices" in therapeutic settings for adolescents based on these findings. However, the results of this study may certainly inform our understanding of what helps *some* adolescents in *some* residential therapeutic settings.

Finally, this study focused on a select few who successfully graduated from the same therapeutic boarding school. While they differed in many respects, they also may have shared certain characteristics or traits that might account for their enrollment and eventual successful completion of this particular therapeutic program. For example, one cannot say if students who do not complete the therapeutic program differ in some fundamental way. This cannot be known from the design of this study, nor can the findings be generalized.

Implications for Future Research

The findings of this study address a gap in the literature by giving voice to a small group of affluent, at-risk adolescents who experienced a therapeutic boarding school setting. The purpose of this study was exploratory. Future studies on more representative samples could examine the ways adolescent perspectives might differ based on, for example, presenting problems, age, ethnicity or race, or intellectual capacities. Additionally, examination across different therapeutic residential school settings would provide a better understanding of how specific elements of any given therapeutic approach are experienced by adolescents. Research should also explore the perspectives of those who do not remain in these types of programs. Adolescents who do not stay in a program long enough to graduate may have very different experiences and reflections that would yield beneficial data about what works for whom and why. The perspectives of parents, teachers, and clinicians would give a comprehensive account when combined with youth reports. And finally, studies that explore affluent, at-risk adolescents' perspectives while they are currently in a therapeutic program might provide different or more detailed insights than those obtained in retrospective designs.

This study's results also unexpectedly raise topics for further consideration amongst this specific population. For example, issues related to undiagnosed or misdiagnosed twice-exceptional students and "goodness of fit" in programming for this population are topics that emerged in some form or another amongst this group. While one cannot necessarily assume that the majority of affluent, at-risk adolescents are intellectually advanced, there may be some correlation to parents' level of education, occupation, or even academic settings in affluent communities. This should be examined and better understood, as gifted adolescents have unique social and emotional needs that may be overlooked in affluent families, schools, and communities. These topics have generally been difficult to study, largely because it is difficult to identify and locate individuals who fit these profiles. These students often cannot be adequately researched due to lack of proper identification and/or diagnosis, dropping out of school, or being transferred to other alternative school settings. Also, as was portrayed in the stories of this study's participants, gifted behaviors can dwindle or even disappear over time when high ability students are unmotivated or not properly supported in their academic or home environments. In private therapeutic school settings, researchers may potentially have more access to this unique population.

Finally, the findings related to the development of non-cognitive abilities may be of interest to those studying risk and resiliency in adolescents, particularly at-risk adolescents. In this case, adolescents with serious psychiatric histories were able to develop these skills and thrive as a result. Private therapeutic school settings, therefore, may provide unique opportunities for studying how these skills can be developed in cases

of youth at extreme risk, and may provide an interesting point of comparison to other groups of adolescents at risk for similar types of problems.

Implications for Practice

Both educators and mental health professionals, particularly those working with adolescents in residential schools, can use these findings to inform their practice. First and foremost, clinical staff working with adolescents in treatment settings should not overlook the power and importance of the peer group; in fact, they should capitalize on it. (In some cases, this approach may not be beneficial. I cannot speak to this as the study only involved students who were successful in a peer-based program.) In this study, the "loudest" message from the participants was regarding their great need for and appreciation of being part of a truly supportive, connected peer community. While professionals working with adolescents most likely understand the motivational power of peer groups, it is sometimes a more difficult step to put this knowledge into practice. For example, it can be challenging to know how to empower and trust adolescents particularly those who have a history of emotional and behavioral problems—to effectively self-monitor, support, and regulate one another in therapeutic settings. However, adults need to find a balance that supports, guides, and influences adolescents without being overly authoritarian or infantilizing. This will, of course, depend on the specific population and type of treatment setting, but the principle remains.

In addition, clinicians can support adolescents to engage with peers, teach interpersonal skills and role play social scenarios, help them deal with social anxiety, and encourage direct, respectful, and honest communication amongst peers. Clinicians in residential settings can capitalize on group dynamics to reinforce new skills, rather than

relying primarily on individual therapy. Finally, those working with this population would be wise to view their roles as coaches or advisors. Participants in this study acknowledged the role of clinicians specifically when it came to dealing with difficult family relationships. Having an advocate when navigating challenging relationships with other adults (e.g., parents) can be of critical importance during this developmental stage.

The use of labels and diagnoses should be used with care with this population.

Adolescence is a time of identity development, and labels can do irreparable harm to the development of a healthy identity if not approached in a constructive way. The adolescents in this study described how they internalized psychiatric labels in negative ways and had a hard time seeing themselves as anything but "sick" or "damaged." This had detrimental effects on their sense of self-worth, sense of hope, and their motivation to change. It may be hard to know how to handle this at times, but parents, teachers, and clinicians should be sensitive to how children and adolescents receive and make sense of this information. Particularly in the case of psychiatric diagnoses in children and adolescents, it may be beneficial for adults to maintain and communicate a "growth mindset" or developmental perspective with regards to emotional and behavioral problems. Participants in this study shared that others' beliefs in them gave them hope that they could change. Having realistic yet high expectations may have a positive effect on other adolescents who are struggling in similar ways.

Participants spoke at length about the role choice and agency played in their process of change. For clinicians or others involved in assessing an adolescent's readiness for a therapeutic setting or school, it is advisable to use specific techniques that enhance the sense of choice, such as motivational interviewing or assessments of "stages"

of change." In the long run, adolescents who feel a sense of control or ownership in the decision-making process may be more committed and thus, make better progress, particularly in the early stages. Having a sense of agency allows for a greater likelihood that they will experience more successes, an important motivational ingredient in the overall process of change.

Therapeutic schools come in all forms, with different guiding philosophies and treatment orientations. In this study, participants made it clear that "non-clinical" components of the program were just as important as the therapeutic elements (i.e., group and individual therapy). For example, an integrated and high-quality academic program was important to these students, and in fact, served as a significant vehicle for working on their therapeutic goals. Non-cognitive abilities were fostered, in addition to clinical symptoms being diminished. Developing connection, purpose, and meaning were attended to throughout their residential stays as overarching therapeutic themes—not simply "add-ons" to a behavioral program. These elements are often omitted in the literature on troubled adolescents in residential treatment. Perhaps professionals and parents become so consumed with "putting out the fires," that they miss some of these looming questions and desires in an adolescent's mind and heart. This study suggests that professionals working with adolescents with serious emotional and behavioral issues should balance focusing on the positives, strengths, and dreams of adolescents, as well as trying to mitigate the negatives.

Finally, schools and professionals serving affluent youth should consider the ways they meet the social, emotional, and individual academic needs of their students, across all age ranges. Are children driven to academic success at the expense of their emotional

and social development? Do they feel they are only worth their GPA and SAT scores? Or the college to which they are accepted? Participants in this study shared how intense academic pressure—sometimes as early as grade school—left them struggling with perfectionism, anxiety, depression, or substances (to escape the pressure). This may be particularly true for gifted and/or twice-exceptional students, who may be struggling with unique social-emotional issues on top of the intense academic pressures. In this study, participants noted difficulties and curricular misalignments stemming as early as elementary school, with burgeoning problems arising in middle and high school.

Adequate training of staff that serve these populations is important as identification and service in high school may be "too little, too late" for many adolescents. Finally, teachers—as well as clinicians--can ameliorate some of this academic pressure by attending to the "whole child." Participants in this study were particularly impacted by teachers who encouraged emotional and social growth within the classroom setting, or who showed genuine interest in them as "whole individuals"—not simply scholars.

Conclusions

In this study, I sought to explore, using a phenomenological approach, the lived experiences of affluent, at-risk youth who had graduated from a private therapeutic boarding school. The life histories of these participants were discussed in the context of their growing up in affluent homes and communities; the findings supported prior research that found correlations between psychological maladjustment and various individual and community factors. With regards to their actual experiences in therapeutic boarding school, the findings were consistent with other major findings, though there is scant literature on the perspectives of adolescents in these types of residential treatment

settings. In particular, themes related to the importance of peers and a sense of agency and autonomy emerged as key findings, as they have in other research. These themes are also consistent within a developmental understanding of adolescent needs. Many of the themes, however, did not reflect dominant themes in literature based on adolescents in different treatment settings or from lower socioeconomic backgrounds. This could be for due to clear differences in actual experiences, quality of programs, or perceptions amongst adolescents of less social and economic means. Finally, other key themes emerged concerning the importance of strong academics, the development of noncognitive factors, and the role of life purpose and meaning. These findings highlight the importance of clinical and educational practices that will enhance the experiences of atrisk adolescents receiving treatment in therapeutic residential boarding schools.

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Appendix A

Participant Background Matrix

	Name 1	Name 2	Name 3	Name 4
Academic Underachievement				
School Refusal/Avoidance				
Academic Perfectionism				
Depression/Anxiety Symptoms				
Conduct/Anti-social Behaviors				
Substance Abuse				
Sexual Acting-Out				
Self-Harming Behaviors				
Eating Disorder Behaviors				
Suicidal Ideation/Attempts				
Legal Problems				
Family Relationship Problems				

Appendix B

Comprehensive Description of The Academy

Student Profile

Academy students are characterized by impressive potential, despite mediocre academic records and standardized test scores that accompany more than 90% of students when they arrive (Bratter, Sinsheimer, Kaufman, & Alter, 2007). In fact, many students arrive functioning one or more grades below their chronological age. Because of the impact that poor motivation, substance abuse, and other emotional problems can have on the testing and educational performance, admission is not based primarily on psychological reports and academic records, though these documents are reviewed. Rather, the decision to admit a student is based upon parent and teacher input, a detailed history obtained during the intake, and the student's attitude during the interview process. Students who suffer from organic brain damage, lower than average intelligence, and/or psychosis are not considered viable candidates.

Most students at the Academy have stolen, cheated, lied, betrayed, and manipulated those around them, particularly adults (including their therapists). They have not responded to traditional psychotherapeutic and educational approaches. Prior to admission, 33% of the students have been hospitalized or attended drug and alcohol treatment programs for one month, 75% have been treated by mental health specialists, and 50% arrive taking psychotropic medications (Bratter, Sinsheimer, Kaufman, & Alter, 2007). Students come with various DSM-IV diagnoses, such as: bipolar disorder, major depressive disorder, anxiety disorders, oppositional defiant disorder, conduct disorder,

attention-deficit/hyperactivity disorder, personality disorders, and various substance use disorders (Bratter et al., 2007; Bratter, Bratter, Coiner, Kaufman, & Steiner, 2006).

Therapeutic Philosophy

The Academy's therapeutic philosophy is founded on the concept of responsible concern, drawn from Alcoholics Anonymous (AA) and the self-help residential exaddict-run therapeutic communities of the 1960s and 1970s, as described by Bratter, Collabolleta, Fossbender, Pennacchia, and Rubel (1985). The therapeutic community (TC) approach is based on the notion that individuals grow best in the context of a therapeutic and caring community. The Academy relies on the power of positive peer pressure to stimulate students' actualization toward academic and therapeutic goals, shifting the roles for teachers and therapists to those of consultant-advisors. Hence, the traditional therapeutic dyad becomes a triad: the peer, the student, and the therapist.

This method seems particularly useful for adolescents, who are developmentally more attuned to peers than parents and authority figures. At the Academy, students are expected to help one another, rather than to rely solely on a therapist to "fix" them. By using this approach, students are empowered to take authorship, responsibility, and control of their personal growth, while at the same time, challenging and helping others to grow. The main goal, then, is to use the power of positive peer pressure to reverse counterproductive habits and cognitions. Because adolescents are developmentally more likely to listen to and be influenced by peers, this approach is believed to be more effective than traditional talk therapy or even the standard behavioral management approaches often found in residential treatment settings. In addition, the Academy operates from the philosophy that medication, psychiatric diagnoses, and treating

individuals like mental patients only serve to reinforce students' external locus of control, leaving room to place blame elsewhere. Diagnoses and psychotropic medications are not used in the school; students who arrive on medications are tapered off of them over time with the consultation of a psychiatrist. Instead, Academy students are empowered when they are challenged to take responsibility for their actions.

The school's therapeutic philosophy is also founded on the belief that these students have engaged in various self-defeating and self-destructive behaviors as a way to escape painful lives. A structured environment, caring community, and positive peer culture are programmatic elements intended to help students face their problems more effectively and make life-affirming choices. Through high expectations, students are shown respect and belief in their ability to reach their potential. Underlying emotions are the focus of treatment, rather than symptoms or merely behaviors. Students' sense of hope, meaning, and self-respect are rekindled within a community that challenges them, believes in them, and cares about them.

Bratter, Sinsheimer, Kaufman, and Alter (2007) stated that the therapeutic goal of the Academy is "to nurture the psychological, moral, and spiritual growth of students by creating the conditions conducive to the restoration of self-respect and integrity" (p. 73). The Academy seeks to promote core values such as respect for self and others, honesty, integrity, responsibility, and care for others. This is accomplished through the use of a "caring confrontational approach" with expectations for improved behavior. Peers help each other by providing feedback and encouraging the change of immature, irresponsible, and self-destructive behaviors to healthier, more mature behaviors. Bratter, Bratter, Radda, and Steiner (1993) stated that the members in a caring community help each other

become responsible and productive. Bratter et al. (2006) wrote, "Confrontation helps students unlearn destructive behavior patterns while learning how to help and be helped, how to trust and be trusted, how to respect and be respected, and how to love and be loved" (p.13).

Therapeutic Program

The Academy is a voluntary program. Given that parents cannot convince staff to accept a student, a prospective student must give enough reasons during the initial interview to show motivation and capability to do the work—both academically and therapeutically. At any point during the program, a student can choose to leave. How that students' parents choose to respond is between the student, their family, and their educational consultant.

The primary therapeutic modality is group therapy, though individual and family therapy is also viewed as instrumental to the change process. Each student chooses a primary therapist and meets as frequently as needed. Students actively participate in three two-hour groups per week, led by clinical staff. Once a week, students attend a one-hour single-sex group to discuss gender-specific issues with a therapist. In addition, they participate nightly in a one-hour self-help group; no staff is present in this group.

Family involvement is an important and expected component of a student's stay. Family members must renegotiate their relationship with the student and with each other. The student must learn how to navigate the process of individuation, while at the same time, repairing and building relationships within the family. In order to accomplish these goals, families attend at least eight Family Weekends per year, during which they participate in multiple groups designed to help parents bond and support one another,

discuss special role-related issues (e.g., Mothers/Fathers/Siblings groups), and work on changing dysfunctional and dishonest communication patterns. In addition to these weekends, family therapy sessions are conducted as needed, either via telephone conference calls or, if possible, in traditional face-to-face meetings.

Transitional Support

Seniors prepare for life after the Academy by participating in a year-long weekly senior group, developed to maximize the probability of success. The "senior experience" is divided into five sequential components: a) bonding with classmates to build a support network after graduation; b) coping with pressures of confronting peers to improve themselves, thus encouraging the internalization of proactive values; c) becoming moral leaders and responsible role models; d) training juniors to assume positive leadership roles and saying good-bye to them; and e) gaining the courage of convictions to resist unhealthy behaviors and activities at college. In June, graduating students leave for the summer, though still stay in contact with the Academy. Graduation is held in August, giving the students one more chance to return to the Academy before heading off to college. Seniors return to the school one week prior to graduation and participate in daily process groups, reflecting on the challenges and successes of the summer and working towards closure of their Academy experience.

Educational Approach

The academic mission of the Academy is to provide individualized intensive instruction to inspire alienated adolescents who possess superior innate intellectual potential to use, rather than continue to abuse, their talents (Bratter, Bratter, Bratter, Maxym, & Steiner, 1997). Many must remediate educational deficiencies before

accelerating academically. Teachers at the Academy are flexible in their approach, assessing students' academic needs and providing additional support and/or challenge as deemed appropriate. They work closely with clinical staff to understand therapeutic challenges and incorporate this into their teaching. Because of the small classes, teachers intimately know their students and often take a very active role in their lives.

One of the primary academic objectives of the Academy is to prepare students academically for admission to colleges of quality and to convince those colleges to admit Academy graduates. However, students know that they need to work hard, both academically and therapeutically, in order to gain the strong advocacy that the school provides for college admissions. They know that they need to become "moral leaders" in order to prove their readiness to be a positive presence on a college campus. For students who do not meet their therapeutic goals, an academic diploma is given, which is differentiated from the "honors diploma" with which most students are granted at graduation.

Dewey (1899) proclaimed that education is experience; it is growth. Dewey (1902) identified three kinds of growth that encompass learning—intellectual, emotional, and moral. Based on that philosophy, the Academy seeks to view education as more than just preparation for college; however, fulfilling one's potential is deemed a critical part of growth. For bright teenagers, applying their intelligence in a college setting is indeed seen as a therapeutic goal. (In fact, if a teenager really has no desire to ever attend college, they are not appropriate for the Academy.)

Program Structure

The school is structured to empower students and hold them responsible for and to their community. This is an important aspect of the therapeutic approach. Thus, students are divided into teams to take care of the general management and running of the school. The Kitchen Team is responsible for planning meals, ordering food and supplies, keeping inventory, preparing and cooking lunch and dinner, and cleaning after meals. The Maintenance Team is involved in the general care of the building and grounds, including mowing several acres of grass, shoveling snow, fixing minor repairs, watering plants, and building the two large bonfires used at graduation and New Year's Eve. The Business Team organizes and runs the central work station, including answering phones, delivering mail and messages, managing the computer system, and so forth. Finally, every student is responsible for keeping his or her personal living space clean, as well as cleaning a specified area of the Castle on a regular basis. Each team is led by one or two students, and is supervised by the Dean of Students.

In addition to the running of the "house," students are directly involved in setting and maintaining the general rules of the program. While staff sets the "cardinal rules" (e.g., no violence or threats of violence, no drugs or alcohol, no sex or romantic relationships), the students decide and agree upon more detailed guidelines, with approval from staff. Students also run nightly groups and meetings, without clinical staff present, to encourage bonding, sharing, and empowering them to address their therapeutic and community needs as they see fit.

Students work therapeutically within a kind of level system, though the implementation of this system is, again, determined less by staff than it is by students.

For example, a new student enters as a "Prospective" with few responsibilities and less freedom than students who have been voted into the community as a "Younger Member." As a Prospective, the student is expected to acclimate to the community, get to know people, open up to others, and decide whether or not the program is a good fit. At this point, the student is not fully trusted so another student needs to be "aware" of a Prospective to prevent problem behaviors (i.e., breaking "cardinal rules" regarding drugs, sex, and violence). For example, a Prospective needs another student to listen to their conversations with other Prospective or Younger Members, as well as phone calls to their family. They are not allowed to use the Internet, and any mail they receive must go through staff. A Younger Member is viewed to be an active and accepted member of the community, but still needs to be carefully watched by more experienced students to prevent unsafe or unacceptable behavior.

When the student has been deemed by staff and other students to have earned a sufficient level of trust and respect within the community, the student is voted in as a "Middle Member," which offers a greater degree of responsibility (e.g., they move into the helper role) as well as freedom (e.g., they can freely speak to any student). Finally, when a student has been successfully working academically and therapeutically for some time, he or she can submit a request to be voted in as an "Older Member," which holds a great level of responsibility but also the most freedom. For example, an Older Member can go into town alone, use the Internet without supervision, and can visit home without an accompanying student. Most students do not achieve older membership until senior year; some students graduate with only middle membership. The final membership level,

rarely attained, is referred to as "Guru" membership and carries with it the highest level of respect and responsibility within the community.

Summary

The Academy attempts to create a structured, positive peer culture in which adolescents can begin to question, create, and solidify healthy identities with the guidance of their peers, experienced teachers and clinical staff. The school's aims may be exceptionally high, and yet the Academy community believes and is fully committed to supporting individuals to achieve their potentials.

Appendix C

Semi-Structured Interview Protocol

The following interview protocol serves as a general guide for the interview, with bolded questions indicating important topics to cover. The sub-questions will not necessarily be asked of every participant but will be used as a guide to ensure that each major question is adequately explored. Participant responses will primarily determine the order of questions.

Orientation to the Interview:

- What do you recall about the purpose of our meeting today?
- Is there anything else you need to know about this interview before we get started?
- Review of informed consent, confidentiality and right to withdraw from study.
- Consent to audiotape.
- Before we get started, remember when I promised that I would keep your name confidential? One way to do that is to have a code name I can use when I'm writing. Please put that code name on this paper and write your answers to the questions written here [refers to Demographic Questionnaire]. You can skip questions you don't want to answer.

Introduction: As you know, I'm a graduate student doing a research project that involves learning what it's like for adolescents who went to a therapeutic boarding school. Please respond to these questions as if I'm not familiar with you at all; don't assume I will know something unless you explicitly tell me. You can skip any questions you don't want to answer, and if at any time you want to stop the interview, just say so. Remember, there aren't any right or wrong answers, I'm just curious about your own thoughts, feelings, and experiences.

[Use only as a guide. Follow the direction of the participant. BE CURIOUS and don't assume.]

Interview 1: Focused Life History

1. What was your life like up until you enrolled at a TBS?

- a. Tell me about significant early life experiences.
- b. What event(s) or circumstance(s) had the most impact on you growing up? Why?

2. What were your experiences with family?

- a. Quality of time spent with each parent?
- b. Quantity of time spent with parents?
- c. Did both parents work?
- d. Parent values? (achievement vs. character)
- e. Family atmosphere?
- f. How would you describe your home?
- g. How would you describe your parents' philosophy/practice of parenting?

3. What were your experiences with peers like?

- a. Significant memories/friendships
- b. Quality/quantity of relationships
- c. Significant difficulties or trauma

4. What were your experiences with the community/neighborhood in which you grew up?

5. What were your experiences in school?

- a. What did you like/dislike about school?
- b. Were there specific educational successes and/or mistakes that stand out?
- c. Did you receive "special services" (e.g., special ed, gifted ed, counseling)? When?
- d. What was your experience of these services?

6. What were your experiences with mental health professionals/treatment?

(e.g., school counselors, psychologists, psychiatrists, treatment settings, medication).

- a. What did you find helpful/unhelpful about these approaches?
- b. How did you perceive or interpret being diagnosed (if you were)?
- c. Why do you think you weren't responsive to more traditional services?

7. What events or circumstances led you to attend a TBS?

- a. Describe how you were placed or chose to attend TBS.
- b. What factors led to you attending this particular TBS over other options?
- **c.** What was this process/experience like for you?

Interview 2: Experience of attending therapeutic boarding school

Introduction: Last time we met, you told me about your earlier life experiences, particularly at home, in your community, and in school. Was there anything else that you wanted to share with me about that time in your life before we go on to the next phase of the interview? [Allow for any additional information to be shared.] Ok, now I'm going to ask you questions about your actual experience at the school.

1. What was your experience at the TBS? (Feelings? Bodily reactions? Thoughts?)

2. What was it like to be a TBS student:

- a. Academic experience
- b. Therapeutic experience
- c. Residential/community experience
- 3. What was a typical day like? Reconstruct a typical day at the TBS as you remember it.

4. What was significant about your stay at the TBS?

- a. Significant "turning points" during your stay?.
- b. Unique aspects of the program that stand out?
- c. Significant people in the program that stand out?
- d. Particularly positive experiences? Negative experiences?
- e. Particular aspects of the physical building or geographical location?
- f. Other special memories? Traditions?

5. How would you describe the TBS community/culture when you were a student?

- a. Size
- b. Values
- c. Atmosphere

6. What were your relationships like during your TBS experience?

- a. Peers
- b. Close friends
- c. Faculty/Clinicians/House parents
- d. Family/Other families

- e. Others in the immediate or larger community?
- 7. How did your TBS experience compare with previous settings?
 - a. Academic settings?
 - b. Mental health treatment?
 - c. Other similar kinds of therapeutic programs?
- 8. What challenges did you face and how did you respond?
- 9. What would you tell someone about this program if you were trying to capture the essence of it?

Interview 3: Meaning Making of TBS Experience

Introduction: During our last two interviews, you shared your experiences growing up and attending a TBS. In this final meeting, I'd like you to reflect on the meaning it had for you. I will also give you the opportunity to clarify anything about the earlier interviews and to review the transcript up until this point.

- 1. Now that you have talked about how you got to a TBS, and what is was like for you to be at a TBS, what does that experience mean for you? How do you make sense of your present life in the context of that experience?
- 2. What does it mean to you to be a TBS graduate?
- 3. What changes do you associate with your experience in a TBS?
- 4. Is there anything you would like to clarify? Change? Delete?
- 5. "Here's what I have found...does this sound accurate to your experience and meaning of ?"
- 6. What was it like to talk about this with me?
- 7. Was there anything you would want me to know that I didn't ask you?

Appendix D

Brief Demographic Questionnaire

Age:	Gender: Male Female
Pseudonym	
Please chec	the category that best describes your race:
Amer	can Indian or Alaska Native
Asian	
Black	or African American
Native	Hawaiian or Other Pacific Islander
White	
Bi-rac	al/Multi-racial
Other	(specify):
What is the	highest degree your <u>mother</u> earned?
High s	chool diploma or equivalency (GED)
Assoc	ate degree (junior college)
Bache	or's degree
Maste	r's degree
Docto	
	sional (MD, JD, DDS, etc.)
Other	
None	of the above (less than high school)
What is you	r mother's occupation/job title?
What is the	highest degree your <u>father</u> earned?
High s	chool diploma or equivalency (GED)
Assoc	ate degree (junior college)
Bache	or's degree
Maste	r's degree
Docto	
	sional (MD, JD, DDS, etc.)
Other	
	of the above (less than high school)
•	r father's occupation/job title?
	ese categories best describes or estimates your total combined family income
	nan \$50,000
	00 through \$74,999
	00 through \$99,999
	000 through \$125,000
	000 through \$200,000
\$200	000 and greater

Appendix E

Participant Recruitment E-mail Letter

Hi, [Name]

As you know, I am currently completing my Ph.D. in Clinical Psychology at the University of Virginia. As part of this process, I am conducting a phenomenological study using qualitative methods to understand the experiences of adolescents who attended and graduated from [School]. I am hoping to interview three to six graduates to ask them to tell the story of their lives before attending [School] as well as share their experiences while they were at the school. Specifically, I plan to meet with each participants three times for approximately 60-90 minutes each interview; ideally, this would occur during the next month. I am curious how graduates perceive the academic, therapeutic, and social aspects of their stay. After conducting all of the interviews, I will analyze each participant's responses and develop an individual description—or "narrative"—of the experience. I will then combine these individual descriptions into one composite description, reflective of the group. All participants' identities will be concealed throughout this process.

In considering potential participants, I thought you would be able to give a unique perspective given your specific background and experiences. If you think you may be interested in participating, please review the attached documents which provide a full description of the study and what you would be expected to do. You can e-mail me or call me to set up a time for further discussion of what is involved, and I can answer any questions you might have. If at that point, you would still like to participate, I will ask you to sign and return the Informed Consent Form before we schedule the first interview. I want to be clear that you in no way required to participate in this study. If you choose to do so, but later change your mind, you may withdraw from the study and all collected data will be destroyed.

Thank you for considering participating in my study! I look forward to hearing from you. Sincerely,

Andrea Esperat Lein

University of Virginia

Appendix F

Informed Consent Agreement

Please read this consent agreement carefully before you decide to participate in the study.

Purpose of the research study: The purpose of the study is to better understand the experiences of adolescents who attended a private therapeutic boarding school. By exploring this with you, I hope to find out what it was like for you and how you feel you have been impacted because of the experience.

What you will do in the study: As part of my study, you will be asked to participate in three audio-recorded individual interviews. Each interview will be scheduled at a time and place convenient for you. The first interview will focus on your early life experiences, particularly the events that led up to your placement in a therapeutic boarding school (TBS). You will also fill out a brief demographic questionnaire. The second interview will focus on your recollections of your TBS stay; thoughts and feelings about the academic, social, and therapeutic experiences; and thoughts about how you have changed since attending a TBS. During the third interview, I will ask you to reflect on the meaning your TBS experience has for you now. During the third time we meet, you will be able to read important parts of the transcript of the first two interviews and make corrections or clarifications as necessary. This will also be a time for you to say anything you thought of since the earlier interviews or add to statements you made at that time. I must audiotape the interviews so that I can look at the exact words you used in the interview and add them to notes about how you acted, looked, or sounded in response to questions. I can then use this in my analysis. This is the only purpose of the audiotape. In order to keep your identity private, you will choose a fake name to be used on the transcript instead of your real name. I will have to make a list of each interviewee's real name and fake name so that I can keep them straight, but I will keep a hard copy of this list as well as the signed informed consent forms in a locked file cabinet separate from the interviews. I will destroy the list immediately after the study is finished and all copies of the interviews (electronic and paper) as well as the signed informed consent forms three years after the study is finished. In this way, I will ensure that only you and I will know who you are or that you met with me. You can choose to skip any question that makes you feel uncomfortable and you can stop participating in the interviews at any time.

Time required: The study will require a total of 3 to 4 hours of your time. The first two interviews will take between 1 and 1.5 hours, and the third interview will be shorter, between 30-45 minutes. At the beginning of the first interview, you will fill out a brief demographic sheet, which will take approximately 5 minutes. These are estimations, however, and the amount of time will depend on the length of your answers.

Risks: There are minimal risks to participating in this study. Because I will be asking questions about your experiences while attending a therapeutic school, there is the possibility that you may feel upset while we talk and possibly afterward. I am a trained clinician, and though I will not work with you as a clinician during the interviews, I can help you deal with some of those feelings in order to be able to go on with the interview. I will also "check in" with you at the end

of each interview, regardless of whether it seems as though you were upset, to determine whether you would like to talk to someone about any feelings that came up. Finally, while I will take precautions to protect your identity and the identity of the school, I cannot guarantee that an individual reading the final results will not be able to deduce your identity, particularly if they are somehow affiliated with the school.

Benefits: If you participate in this study, there won't be any direct benefit to you. The study may help me better understand what this kind of experience is like for teenagers/young adults your age, which may in turn lead others to be able to help others like you in more useful ways.

Confidentiality: The information that you give in the study will be handled confidentially. However, because of the nature of the data, I cannot guarantee your data will be confidential and it may be possible that others will know what you have reported. I will take the following steps to minimize the likelihood that others will be able to identify you. You will be assigned a code name, which is the fake name you will choose during the first interview. The list connecting your name to this code name will be kept in a locked file. When the study is completed and the data have been analyzed, this list will be destroyed. Your name will not be used in any report. All copies of the interviews (electronic and paper) as well as the signed informed consent forms will be destroyed one year after the study is finished. In this way, I will ensure that only you and I will know who are or that you met with me. When I write up my research study, I will use your fake name as the only means of identification. I will report demographic information, like your race, sex, and age, but I will not report anything else that will identify you, including the name of the town or the school you attend. The content of your interviews will also remain confidential, which means I cannot share them with your parent/guardian or others at the school. I need to be able to assure you of privacy so that you can feel safe to say anything you need to say in response to my questions. You are free to share anything you want to about the interviews with others, but I will not be able to discuss them. There are some exceptions to this rule, however. If you discuss currently wanting to hurt yourself or someone else, or say someone else is threatening or currently doing harm to you, I will have to report it. These exceptions are required by law and are meant to keep everyone involved safe.

Voluntary participation: Your participation in the study is completely voluntary.

Right to withdraw from the study: You have the right to withdraw from the study at any time without penalty. You may decide to stop at any point in the interviews, and you have the right to decide to stop being included at any time after the interviews are completed. The recording of your interview will be destroyed should you decide withdraw.

How to withdraw from the study: If you want to withdraw from the study, you just have to tell me to stop the interview. There is no penalty for withdrawing at any time. If you withdraw from the study, all data collected from you and identifying information, including audiotapes and copies of the interviews, will be destroyed immediately. If you would like to withdraw after your materials have been submitted, please contact Andrea E. Lein (see contact information below).

Payment: You will receive no payment for participating in the study.

If you have questions about the study, contact:

Andrea E. Lein, Primary Researcher, Clinical & School Psychology Program, Department of Human Services, Curry School of Education, University of Virginia P.O. Box 400267 Charlottesville, VA 22904 Telephone: 413-441-8005 Email: ae2f@virginia.edu

Dr. Ronald Reeve, Faculty Advisor, Clinical & School Psychology Program Department of Human Services Curry School of Education University of Virginia P.O. Box 400267 Charlottesville, VA 22904 Telephone: 434-924-0790 Email: rer5r@virginia.edu

If you have questions about your rights in the study, contact:

Tonya R. Moon, Ph.D.

Chair, Institutional Review Board for the Social and Behavioral Sciences

One Morton Dr Suite 500

University of Virginia, P.O. Box 800392

Charlottesville, VA 22908-0392 Telephone: (434) 924-5999 Email: <u>irbsbshelp@virginia.edu</u>

Website: www.virginia.edu/vpr/irb/sbs

Agreement:	
l agree to participate in the research study described above.	
Signature:	Date:

You will receive a copy of this form for your records.

Appendix G

Participant Life History Data

	Nicole	Corey	Zoe	Jesse	Griswaldo
Early Memories	Positive	Positive	Negative	Positive	Negative
Early Medical	Rare disease(4); speech impediment	Medical issues (baby): GERT, colicky	None reported	None reported	Medical Issues (baby): born deaf, tubes placed
Early Treatment	Speech therapy; M sought therapy (4)	Therapy/meds (age 4)	None reported	None reported	Speech; Therapy, meds (age 5), suicidal
Personality Style	Shy, sensitive, anxious, dysphoric, intense, perfectionist, hard worker, intellectual, gentle/mild, leader	Sensitive, dramatic, attention- seeking, anxious, fluid sense of self, follower, social, dependent, histrionic	Very shy, sensitive, fearful, controlling, powerful, competitive, perfectionist, diligent, independent	Strong-willed, logical, opinionated, rebellious, curious, unconventional , leader, intellectual	Sensitive, creative, attention-seeking, curious, undisciplined, dependent, playful, disorganized
Trauma & Loss	Multiple deaths, medical issues, bullying; M- distance (age 12)	Family move (3 rd gr) Severe bullying Sent away (age 12)	Parents' conflict; divorce, F's substance abuse/unsafe behavior	Peer rejection (10 th gr)	Parents' separation/M' s move; Bullying, isolation; conflict stepf.
Parents	Married Both parents worked; highly successful in jobs Enmeshed- M; Distant-F	Married F worked; M at home Close-M; distant- F	Separated/Divo rced(4) Both worked; Enmeshed-M, F-distant, distrust of both parents	Married Both parents worked M-more logical F- emotional/tem per	Divorced; M- Russia; F-U.S.; Both worked; Absent or unpredictable parenting
Siblings	Older B; negative, abusive relationship	Younger S; emotionally distant, conflict later	Younger B; emotionally distant	Older S; positive; seen as "perfect child"	Only Child Later half-bro. born

	Nicole	Corey	Zoe	Jesse	Griswaldo
Family Dynamic	Fond early memories; focused on achievement, intelligence, work	Disjointed, emotionally disconnected; valued passion, achievement, hard work	Highly conflictual; valued achievement, success, competition	Fond memories; disconnected; valued achievement, responsibility, family	Impoverished family environment; disconnected; no sense of values/atmosp here
Religion	Jewish culture important	Jewish culture important	Christian, major influence	Christian (family); Atheist (self)	None reported
Community & Culture	Affluent, success and achievement- oriented	Conservative, affluent, success/ achievement	Hawaiian; affluent, success /achievement	Affluent, cultured, success/ achievement	US/Russia cultures; success/ achievement
Peers	Early bullying; a few close friends growing up; not emotionally close to friends in h.s.	Bullying through h.s.; highly influenced; motivated to make friends; drug/party peer group in h.s.	Angry/mean to peers (young age); difficulty making friends; socially isolated; peer group in late h.s.	Charismatic/infl uential steady peer group growing up; sought popularity; drug/party peer group in h.s.	Early bullying, through adolescence; difficulty making friends; socially isolated, outcast
Supports/ Mentors	Camp counselor, h.s. teacher, therapist	Elem. Teacher, therapist	n/a	5 th gr teacher	n/a
Type(s) of schools	Private, All- girls, strong academic reputation	Public & Private, All- boys; strong reputation; Therapeutic m.s.	Private Christian K-8; Private h.s., strong academic reputation	Public; alternative m.s.; strong h.s. program; community college	Public & private; public magnet h.s. strong academic reputation
Attitude towards School	Hardworking student; high achiever, motivated, perfectionist	Unchallenged, Underachiever, unmotivated,	Hardworking, high achieving, highly motivated, perfectionist	More engaged early on; later- underachiever, unmotivated, apathetic	Anxious, avoidant, unmotivated, underachiever

	Nicole	Corey	Zoe	Jesse	Griswaldo
Cognitive Strengths	Some advanced classes early on; learned quickly, easily; did well in highly rigorous curriculum	Early reader, quick learner, teacher rec. private school for more academic challenge	Love of reading and school; Advanced classes; learned quickly, easily	Advanced classes in elementary school; alternative, rigorous middle school	Taught self to read early; early computer programming; intellectual curiosity; skipped 6 th grade
Cognitive Weakness	Trouble reading early on	Disorganized, impulsive, had difficulty staying on task, executive functioning	Struggled with math from young age; placed in "low" math class	Problems with executive functioning: disorganization, poor time management	Dysgraphia, executive functioning: disorganized, time management; poor at rote memorization
Special Education Services	None; perhaps more support with reading early on	None early; acceleration; IEP after 9 th grade	None offered; advanced classes	Special advanced classes in elem.; none m.s., none h.s.	None early; grade skipping in m.s., IEP after 9 th grade
High School Culture	"stress" culture/high academic pressures to succeed	"Party culture"; extreme wealth, drugs and alcohol the norm	High academic expectations, college prep, "white rich kids"	"Party culture"; affluent, pressure to succeed	High academic expectations
Mental Health Services	Therapy, meds thru adolescence, multiple hospitalizatio ns: suicidal attempts, self-harming	Early therapy, meds- thru adolescence, wilderness/ther apeutic middle school program	Outpt Therapy 10-11 th Psych hospital, intensive outpatient treatment (ED)	Ind. Therapy, anti-depressant (h.s.); no hospitalization after suicide attempt	Therapy/meds early; again in h.s., multiple hospitalization s: suicidal gestures