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When Private Industry Meets Public Policy: Navigating the Complexities of State and Federal Regulation Within the Troubled Teen Industry

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Introduction

Generally, parents¹ possess moral and ethical responsibilities while raising their children. Morally, parents are responsible for their children's general well-being. These responsibilities include providing basic needs such as food, shelter, and safety. As well as nurturing emotional and social development. Ethically, parents are responsible for promoting a sense of their children's autonomy while guiding them to be responsible members of society. Here, parents provide opportunities for educational and personal growth, while encouraging and modeling positive behaviors and decision-making. In some cases, parents may struggle to fulfill some or all of these responsibilities.

In these cases, parental challenges relating to moral and ethical responsibilities may place pressure on parents struggling to meet these expectations. Each child, being unique, presents challenges that parents may be unable, or unwilling to address. While it is important to recognize that individual family units may have varying thresholds related to adolescent and teenage developmental challenges, generally, they can be placed on a spectrum from limited to extremely disruptive behavior. In addition, the disruptive conduct can stem from behavioral, emotional, or even cognitive issues. As the disruptive behavior worsens and parental worry increases, parents' willingness to adopt extreme measures increases. Thus, parents may consider short- or long-term residential treatment programs to address their children's conduct.

Over the past five decades, a multibillion-dollar industry has formed, promising to help bring peace of mind to struggling parents and assist youths in overcoming their behavioral and emotional challenges.² While some treatment programs and facilities provide legitimate treatment

¹ In this paper, the term "parents" is meant to be a broad term encompassing biological parents, adoptive parents, legal guardians, and others who possess these moral, ethical, and legal obligations over their children.

² MAIA SZALAVITZ, *HELP AT ANY COST: HOW THE TROUBLED-TEEN INDUSTRY CONS PARENTS AND HURTS KIDS* (2006).

and have resulted in positive experiences for youths, others have been criticized for relying on outdated treatment methods, the use of unlicensed or under qualified employees, and abusive or coercive techniques.³ These problematic treatment programs and facilities prey on parents, offering hope and feeding into perceived behavioral and emotional issues, often pathologizing normal teenage behavior.⁴ In doing so, the problematic treatment programs and facilities convince parents that their children require specialized treatment. Ultimately, the children may never receive any specialized treatment, instead these problematic treatment programs and facilities implement a regime where children can be exposed to abusive and coercive conduct.⁵

Traditionally, the state retains the jurisdiction to regulate and investigate these treatment programs and facilities,⁶ with a few exceptions.⁷ However, private treatment programs and facilities that have been traditionally viewed as the sole responsibility of the state to regulate.⁸ In these situations, states have responded in one of several ways. First, there are states that have passed comprehensive legislation to regulate and address claims of abuse in residential treatment programs and facilities.⁹ Second, there are states have enacted lenient regulations which allow facilities to evade compliance with regulatory guidelines.¹⁰ Finally, there are states that fail to properly enforce their regulations due to a lack of will or adequate financial resources.¹¹ The

³ See “Ethical Considerations in the Treatment of Participants within the TTI” below.

⁴ Defining the Troubled Teen Industry - What Is It?, UNSILENCED, <https://www.unsilenced.org/the-industry/> (last visited Mar 22, 2023).

⁵ See “Ethical Considerations in the Treatment of Participants within the TTI” below.

⁶ U.S. Gov’t. Accountability Office, GAO-08-696T, Residential Facilities: State and Federal Oversight Gaps May Increase Risk to Youth Well-Being.

⁷ *Id.* (For example, treatment programs and facilities that receive Medicaid or Medicare funding must abide by certain regulations under federal law)

⁸ *Id.*

⁹ Restraint and Involuntary Seclusion, State S. 710, 81st Legis. Assemb., 2021 Sess. (Or. 2021).

¹⁰ Generally Revise Laws Related to Private Alternative Adolescent Programs Board, S. 267, 2019 Leg., 66th Sess. (Mont. 2019) (requiring inspections to take place once every three years.)

¹¹ Human Services Program Amendments, S. 127th State Leg., 2021 Sess. (Utah 2021); Cameron Evans, State Laws Aim to Regulate ‘Troubled Teen Industry,’ but Loopholes Remain, KFF Health News (Jan. 21, 2022), <https://kffhealthnews.org/news/article/state-laws-aim-to-regulate-troubled-teen-industry-but-loopholes-remain/> (oversight is often weak and enforcement of the new law has been lax.)

disparity in these state actions has prompted critics to advocate for comprehensive federal regulations to create a uniform standard across the TTI.¹²

Since the early 2000's, politicians, advocacy groups, and former participants heavily criticized the Troubled Teen Industry ("TTI").¹³ In 2008, these criticisms prompted the United States Government Accountability Office ("GAO") to investigate and release a report detailing their findings and problems relating to the TTI.¹⁴ The GAO investigated several facilities and observed that untrained staff members and ineffective management and operating practices contributed to the abuse and death of youths enrolled in the selected programs.¹⁵ Furthermore, the GAO noted several of the selected facilities engaged in deceptive marketing and questionable practices.¹⁶ Based on these observations, lawmakers have spent the last decade attempting to pass federal legislation for the TTI.¹⁷ To date, no federal legislation has been enacted.¹⁸

The GAO investigation of the TTI recognized a systemic issue that highlights the substantial limitations to the traditional state regulation. Under the current regulatory scheme, the state's traditional role in regulating this industry has created gaps in regulation and enforcement

¹² Sara Tiano, *Lawmakers Issue Warning to Troubled Teen Industry: Congress Will Act*, THE IMPRINT (Oct. 10, 2021), <https://imprintnews.org/top-stories/lawmakers-issue-warning-to-troubled-teen-industry-congress-will-act/59817>

¹³ MAIA SZALAVITZ, *HELP AT ANY COST: HOW THE TROUBLED-TEEN INDUSTRY CONS PARENTS AND HURTS KIDS* (2006).

¹⁴ U.S. Gov't. Accountability Office, GAO-08-713T, *Residential Programs: Selected Cases of Death, Abuse, and Deceptive Marketing* (2008)

¹⁵ *Id.*

¹⁶ *Id.*

¹⁷ *See* Providing for the consideration of the bill (H.R. 5876) to require certain standards and enforcement provisions to prevent child abuse and neglect in residential programs, and for other purposes: Report (to accompany H. Res. 1276), (2008); *See* Stop Child Abuse in Residential Programs for Teens Act of 2009, H.R. Res. 911, 111st Cong. (2009); *See* Stop Child Abuse in Residential Programs for Teens Act of 2011, H.R. Res. 3126, 112d Cong. (2011); *See* Stop Child Abuse in Residential Programs for Teens Act of 2013, H.R. Res. 1981, 113d Cong. (2013); *See* Stop Child Abuse in Residential Programs for Teens Act of 2015, H.R. Res. 3060, 114th Cong. (2015); *See* Stop Child Abuse in Residential Programs for Teens Act of 2017, H.R. Res. 3024, 115th Cong. (2017).

¹⁸ *Id.*

exposing participants to potential abuse. Federal regulation will aid in closing these gaps and providing states with a mandatory floor for comprehensive regulation.

The purpose of this paper is to provide a comprehensive analysis of the TTI, including the current regulatory scheme, a proposal for the adoption of federal legislation, and the Constitutional authority for federal regulatory intervention. Specifically, the analysis focuses on privately owned treatment programs and facilities where parents choose to place their children and finance the treatment personally. In this context, Federal Legislation is critical to addressing the shortcomings and challenges related to state regulation of the TTI.

First, federal legislation should create a bill of rights protecting the rights of youths that are placed within the TTI. The youth bill of rights will transcend state boundaries and apply to treatment programs and facilities regardless of their state residency. Next, federal legislation should provide concrete definitions for the treatment programs and facilities that are mandated to comply with licensing requirements. Third, federal legislation should create a federal oversight committee tasked with increasing the availability of data on treatment programs and facilities. Finally, federal legislation should create a stream of funding to allow the state licensing agencies the power to investigate and enforce regulations against facilities engaged in improper conduct. In some cases, licensing agencies lack adequate funding to ensure treatment programs and facilities are operating in accordance with agency guidelines. To combat this problem and promote consistency across the country, the federal government can provide specific congressional appropriations for this purpose. Overall, these federal policies would create a minimum level of regulatory standards that all states must adopt.

Part I of this paper offers an overview and understanding of the TTI, including a description of the industry and an exploration of the diverse range of facilities that comprise the TTI. Part II

of this paper examines the current regulatory framework of the TTI, as well as the issues and challenges that have emerged within the industry. Part III explores the Constitutional basis for the Federal Government's authority to regulate the TTI. Given that the TTI falls within a traditional area of state regulation, this section will seek to clarify the scope and extent of federal regulatory power in this context.

I. Background

A. What is the Troubled Teen Industry?

The TTI is an umbrella term encompassing several industries including educational consultants, third-party transportation services, and youth treatment programs and facilities.¹⁹ Together, they operate within a largely underregulated sphere within the United States.²⁰ The following sections provide background information related to each of these topics including how their interrelation.

1. Educational Consultants

Beginning with educational consultants, they are individuals, with a professional background in health services, who work with families to locate therapeutic programs or facilities for troubled teens.²¹ Generally, there are no educational requirements, certifications, or licensing requirements to become an educational consultant.²² Although not required, consultants may have

¹⁹ The “Troubled Teen” Industry, YOUTH RIGHTS, <https://www.youthrights.org/issues/medical-autonomy/the-troubled-teen-industry/> (last visited Mar 22, 2023) (In general, a behavioral interventionist works with individuals to address disruptive and negative behaviors and cultivate positive behaviors and actions.)

²⁰ *Id.*

²¹ Jason Long, INDEPENDENT THERAPEUTIC EDUCATIONAL CONSULTANTS EMBARK BEHAVIORAL HEALTH (2022), <https://www.embarkbh.com/therapeutic-educational%20consultants/#:~:text=What%20Is%20a%20%20Therapeutic%20%20Educational,troubled%20teen%20or%20young%20adult.> (last visited Mar 22, 2023).

²² See Defining the Troubled Teen Industry - What Is It?, *supra* note 4. *But See* Relating to Residential Care Referrals, State S. 749, 81st Legis. Assemb. (Or. 2021) (First and only State to enact legislation regulating educational consultants)

an extensive scope of educational and practical expertise in areas such as child and family psychology, education, addiction and substance abuse, or behavioral intervention.²³ Relying on their expertise, educational consultants match families with specific therapeutic programs or facilities based on the type of treatment to best address the child's needs.²⁴ Nevertheless, educational consultants are scrutinized for their roles in advising families of specific treatment programs and facilities.

However, allegations of misconduct by educational consultants are prevalent within the TTI.²⁵ First, educational consultants may have a conflict of interest or receive financial incentives to recommend specific programs.²⁶ These problematic educational consultants present themselves as neutral advisors, but in reality, they recommend the same treatment programs or facilities regardless of the individual.²⁷ Next, these problematic educational consultants take advantage of the family's vulnerability and unfamiliarity navigating the complex landscape of treatment programs and facilities.²⁸ Parents may be experiencing a mix of emotions including anger or frustration towards their child, disappointment in their ability to parent, and fear and uncertainty about their child's future.²⁹ Educational consultants can use this mix of emotions to offer seemingly simple solutions for complex problems, solutions which may not be in the best interest of the children or their families.³⁰ As a result, ensuring the objectivity of the educational consultant remains a challenge to the TTI.³¹

²³ Defining the Troubled Teen Industry - What Is It?, *supra* note 4

²⁴ *Id.*

²⁵ Younis, Yasmin L., "Institutionalized Child Abuse: The Troubled Teen Industry" (2021). *SLU Law Journal Online*. 74. <https://scholarship.law.slu.edu/lawjournalonline/74>

²⁶ Residential Programs: Selected Cases of Death, Abuse, and Deceptive Marketing, *supra* note 5.

²⁷ *Id.*

²⁸ Residential Programs: Selected Cases of Death, Abuse, and Deceptive Marketing, *supra* note 5.

²⁹ *Deceptive Marketing*, A START FOR TEENS, <http://astartforteens.org/deceptive-marketing> (last updated Oct. 10, 2012)

³⁰ *Id.*

³¹ Residential Programs: Selected Cases of Death, Abuse, and Deceptive Marketing, *supra* note 5.

2. Third-Party Transportation Services

Within the TTI, third-party transportation refers to the practice of hiring private companies or individuals to transport troubled youths to or from treatment programs and facilities.³² Parents may use third-party transportation when they are unable or unwilling to transport the child themselves, typically when the program or facility is located outside of the family's home state.³³ Statistics related to the use of third-party transportation services are sparse with estimates ranging from 0% to 83%, with mean and median scores around 53%.³⁴ Although the precise rate of usage is uncertain, reported accounts from participants have yielded a varied level of treatment regarding the use of these services.³⁵

In some cases, third-party transport companies rely on traumatizing practices including the use of physical and manual restraints, manipulative conduct, and even violence.³⁶ For example, several accounts have reported third-party service employees entering their bedrooms in the middle of the night, forcing them into a vehicle, and threatening the use of restraints if they resist.³⁷ In severe cases, individuals reported being attacked and physically restrained, equating the experience to kidnapping.³⁸ These tactics are commonly used when companies lack adequate employee vetting procedures, fail to provide adequate training or standard enforce a standard

³² Ira Robbins, *Article: Kidnapping Incorporated: The Unregulated Youth Transportation Industry and the Potential for Abuse*, 432 AM. CRIM. L. REV. 563, 567 (2014).

³³ *Id.*

³⁴ Michael Gass et al., *Involuntary Youth Transport (IYT) to Treatment Programs: Best Practices, Research, Ethics, and Future Directions*, 39 CHILD & ADOLESCENT SOC. WORK J. 291, 292 (2022)

³⁵ Ira Robbins, *supra* note 33.

³⁶ *Id.* at 571; *see also* Sent Away Podcast (“[Third-party transportation operates] that way by design. The reason why the industry uses this is because there's a fear that if a kid knows 'we're taking you away to a treatment program' — that they'll run away, that they'll fight back. And sometimes it can be violent because these kids don't know what's going on. They think they're being kidnapped.”)

³⁷ Olivia Stull, *An Exploratory Study on Adult Survivors of the Troubled Teen Industry's Therapeutic Boarding Schools and Wilderness Programs*, PROQUEST DISSERTATIONS & THESES GLOBAL 1, 59-61 (2020).

³⁸ *Id.* at 60 (It was essentially a kidnapping, I was fighting them, screaming, crying and threatened to be handcuffed after being thrown in and locked into the van and drove for 12 hours to an undisclosed location, for an undisclosed reason for an unknown amount of time.)

operating procedure.³⁹ Therefore, transport companies remain a threat to the safety of children as they are being transported from their parental custody to youth treatment programs and facilities.⁴⁰

3. Youth Treatment Programs and Facilities

Treatment programs and facilities refer to a range of public and private organizations that provide therapeutic programs and services to individuals who are experiencing challenges related to behavioral and emotional issues.⁴¹ Within these treatment programs and facilities exists a subset of youth treatment programs and facilities that provide behavioral and emotional services in a privatized system where state regulations range from limited to non-existent.⁴² Parents place their children into these treatment programs and facilities expecting them to receive a wide range of services, such as individual therapy, group therapy, treatment of substance use disorder, academic support, and even the development of basic life skills.⁴³

These youth treatment programs and facilities include wilderness therapy programs, therapeutic boarding schools, residential treatment centers, behavioral modification facilities, ranches, and boot camps.⁴⁴ The core of this paper centers around the regulation of this specific subset of youth treatment programs and facilities, and the following sections offer a more comprehensive examination of the programs and facilities that collectively form the TTI.

³⁹ Robbins, *supra* note 32 at 568.

⁴⁰ Robbins, *supra* note 32 at 567.

⁴¹ *Facility Types*, STATE OF NEW JERSEY DEPARTMENT OF HEALTH, <https://www.nj.gov/health/healthfacilities/about-us/facility-types/> (last updated Jan. 3, 2019)

⁴² Breaking Code Silence Organization and Policy Overview, BREAKING CODE SILENCE (2022), <https://www.breakingcodesilence.org/acca/policy-memo/> (last visited Mar 22, 2023).

⁴³ What is a Residential Treatment Center for Youth?, ALL KINDS OF THERAPY (2022), <https://www.allkindsoftherapy.com/blog/what-is-a-residential-treatment-center-for-youth> (last visited Mar 22, 2023).

⁴⁴ *Id.*

B. Types of TTI Treatment Programs and Facilities

The greatest challenge in regulating the TTI is the variability in how treatment programs and facilities are defined. Across state lines facilities providing identical services may be categorized as different treatment programs and have different levels of regulation.⁴⁵

Generally, there are several types of programs that offer various options for treating youths. These treatment programs and facilities can range from unconventional treatment programs to more traditional treatment programs.⁴⁶ Also, these programs and facilities have varying levels of restrictiveness for participants.⁴⁷ Often facilities and programs will operate in a tiered approach where students can enter into higher or lower tiered programs which may change as students' progress or regress.⁴⁸ In essence, this creates a system where program administrators can unduly influence parents to keep youths enrolled in a never ending cycle of treatment programs.

Since individual states are responsible for regulating the treatment programs and facilities that operate within their borders, each treatment program or facility may vary in structure, organization, and treatment, or there may be overlap.⁴⁹ Therefore, to fully understand the TTI a brief understanding of the structure and operation of each of the different treatment programs and facilities would be beneficial.⁵⁰

⁴⁵ Robert M. Friedman et al., *Unlicensed Residential Programs: The Next Challenge in Protecting Youth*, 76 AM. J. ORTHOPSYCHIATRY 295, 296 (2006)

⁴⁶ What is a Residential Treatment Center for Youth?, *supra* note 43.

⁴⁷ *Id.*

⁴⁸ *Id.*

⁴⁹ Robert M. Friedman et al., *supra* note 45

⁵⁰ The following sections provide a general overview of the different types of facilities that exist and their general structure, while these elements may be present in a number of treatment programs and facilities, there is no comprehensive definition and there may be variations at a state level and even on an individual level.

1. Boot Camps

Boot camps are short-term programs heavily influenced by military-style training and structure.⁵¹ Structurally, these programs are led by a drill sergeant who imposes fast paced and rigorous training to address youth behavioral and emotional challenges.⁵² In the process, the program strips the participants' sense of individuality as it requires them to wear a uniform and groups them into divisions with whom they sleep, eat, and train together.⁵³ The core components of these programs focus on physicality in a highly structured environment where participants are prevented from engaging in negative behavior.⁵⁴ Programs tout their zero-tolerance for disobedience or defiance and that any attempts to rebel are treated harshly so as to correct and prevent future efforts.⁵⁵ Notably lacking from boot camps is a primary focus on therapeutic programming to address any underlying behavioral or emotional challenges.⁵⁶ Boot Camps may last from several weeks to a few months.⁵⁷ In some cases, these programs serve as an intermediary while parents secure long-term placements for their child.⁵⁸

⁵¹ Josh Watson, BOOT CAMP FOR TEENS: IS THERE A MORE EFFECTIVE SOLUTION? ASPIRO WILDERNESS ADVENTURE THERAPY (2019), <https://aspiroadventure.com/blog/boot-camp-for-teens/#what-is-a-boot-camp-for-teens> (last visited Mar 22, 2023).

⁵² *Id.*

⁵³ Boot Camps for Teens, A Failed Approach, TEEN BOOT CAMPS (2020), <https://teenbootcamps.org/boot-camps-for-troubled-teens/> (last visited Mar 22, 2023).

⁵⁴ *Id.*

⁵⁵ *Boot Camps vs. Military Schools for Your Troubled Teenager*, TEEN BOOT CAMPS, <https://teenbootcamps.org/boot-camps/boot-camps-vs-military-schools-for-your-troubled-teenager/#:~:text=Military%20school%20is%20generally%20a,for%20months%20at%20a%20time>. (last visited Apr. 9, 2023)

⁵⁶ *Boot Camp for Troubled Teens*, HELP YOUR TEEN NOW, <https://helpyourteennow.com/boot-camp-for-troubled-teens/> (last visited Apr. 9, 2023)

⁵⁷ *Id.*

⁵⁸ How Long Can I Expect My to Be at a Juvenile Boot Camp, TEEN BOOT CAMPS (2020), <https://teenbootcamps.org/boot-camps/how-long-can-i-expect-my-teenager-to-be-at-a-juvenile-boot-camp/> (last visited Mar 22, 2023).

2. Wilderness Therapy Programs

Wilderness therapy programs combine therapeutic elements with daily outdoor activities such as hiking, rock climbing, and camping.⁵⁹ Participants will spend extended periods of time in the wilderness or other natural settings, typically in small groups.⁶⁰ As a hybrid program, participants may attain benefits from both the therapeutic portion of the program and the daily outdoor activities.⁶¹ During this time, participants may develop independence, social responsibility, interpersonal and leadership skills.⁶² In addition, participants are treated with a range of therapeutic models including cognitive behavioral therapy, individual therapy, and group therapy.⁶³ During these sessions, participants may explore their thoughts, feelings, and behaviors with trained and licensed professionals.⁶⁴ Wilderness therapy programs serve as an introductory program to youth treatment with most short-term programs lasting between two and four months.⁶⁵ From here, youths may graduate the programs to return home or are placed into more restrictive programs.⁶⁶

3. Therapeutic Boarding School

While the definitions of therapeutic boarding schools (“TBS”) can vary from state to state or even facility to facility, generally they follow a similar structure.⁶⁷ Typically, TBS are

⁵⁹ Washington State Institute for Public Policy, *Wilderness Therapy Programs: A Systematic Review of Research 3* (June 2022)

⁶⁰ *Id.*

⁶¹ *Id.*

⁶² *Id.*

⁶³ *Id.*

⁶⁴ *Id.*

⁶⁵ Washington State Institute for Public Policy, *supra* note 46.

⁶⁶ What is a Residential Treatment Center for Youth?, ALL KINDS OF THERAPY (2022), <https://www.allkindsoftherapy.com/blog/what-is-a-residential-treatment-center-for-youth> (last visited Mar 22, 2023).

⁶⁷ Sarah Golightley, *Troubling the ‘Troubled Teen’ Industry: Adult Reflections on Youth Experiences of Therapeutic Boarding Schools*, 10 GLOBAL STUDIES OF CHILDHOOD 53–63 (2020).

residential facilities that combine an academic setting with a structured therapeutic environment.⁶⁸ At TBS, participants engage in typical educational study, much like a traditional boarding school.⁶⁹ In addition, students are provided a therapeutic curriculum to address their own emotional or behavioral challenges.⁷⁰ However, the predominant focus of therapeutic boarding schools is education where the intellectual and academic growth of the participant is a central focus with the availability of emotional, behavioral, familial, and social support.⁷¹ As such, while participants are under continuous supervision, they may not have twenty-four hour access to clinical specialists to address their emotional or behavioral challenges. In some situations, psychiatrists and other mental health specialists are contracted with a facility but not directly part of the TBS team.⁷² In light of TBS structure, participants are placed into these programs for extended periods of time, with placements ranging from twelve to twenty-four months.⁷³

4. Ranches

Ranches provide a combination of treatment techniques for youths dealing with behavioral or emotional challenges.⁷⁴ Primarily, ranches serve as a residential program where participants live for the duration of their treatment.⁷⁵ While living on the ranch, participants are assigned various duties to perform including caring for animals, property, or any other chores.⁷⁶ Additionally,

⁶⁸ *Id.*

⁶⁹ *Id.*

⁷⁰ The Difference Between a Therapeutic Boarding School (TBS) and a Residential Treatment Program (RTC)?, ALL KINDS OF THERAPY (2022), <https://www.allkindsoftherapy.com/blog/the-difference-between-a-therapeutic-boarding-school-tbs-and-a-residential-treatment->

⁷¹ *Id.*

⁷² The Difference Between a Therapeutic Boarding School (TBS) and a Residential Treatment Program (RTC)?, *supra* note 70.

⁷³ *Id.*

⁷⁴ U.S. Gov't. Accountability Office, GAO-08-713T, Residential Programs: Selected Cases of Death, Abuse, and Deceptive Marketing (2008)

⁷⁵ Turn About Ranch: Residential Treatment for Teens on a Working Ranch, Turn About Ranch, <https://www.turnaboutranch.com/residential-treatment-for-teens-on-a-working-ranch/> (last visited Mar 22, 2023).

⁷⁶ U.S. Gov't. Accountability Office, GAO-08-713T *supra* note 74.

participants engage in therapeutic programs including individual or group therapy sessions.⁷⁷ Finally, ranches include an academic component to ensure that participants do not fall behind their peers because of their behavioral or emotional treatment.⁷⁸ Ranches operate like therapeutic boarding schools, where participants are under some form of supervision during their treatment program, and may have students enrolled in the program for as long as 18 months.⁷⁹

5. Residential Treatment Centers

In comparison to TBS, Residential Treatment Centers (“RTCs”) place less of an emphasis on the academic development of the participant and instead focus largely on behavioral and emotional treatment.⁸⁰ Therefore, RTC’s offer services for youths whose emotional and/or behavioral conditions are described as more clinically complex, where their behavioral and/or emotional challenges are greatly impacting their everyday life.⁸¹ RTC’s offer frequent therapeutic sessions with a majority of participants having access to therapists on a daily basis.⁸² Furthermore, RTCs allow for licensed therapists to monitor participants in settings outside of the typical therapist office.⁸³ In light of the intensity of certain programs and the central focus on emotional or behavioral challenges, RTCs have varying lengths of treatment. The most restrictive and structured treatment is often short-term, two to four months, with participants transitioning to less restrictive programs for longer periods, four to twelve months.⁸⁴

⁷⁷ Turn About Ranch: Residential Treatment for Teens on a Working Ranch, *supra* note 62. (At this particular facility, therapy sessions are completed by professionals possessing a Masters of Clinical Social Work, Licensed Clinical Social Workers, and specialized training in various therapies)

⁷⁸ *Id.*

⁷⁹ U.S. Gov’t. Accountability Office, GAO-08-713T *supra* note 74.

⁸⁰ The Difference Between a Therapeutic Boarding School (TBS) and a Residential Treatment Program (RTC)?, *supra* note 70.

⁸¹ *Id.*

⁸² When to Choose Residential Treatment Over Other Treatment Programs, POLARIS TEEN CENTER (2019), <https://polaristeen.com/articles/benefits-of-residential-treatment/> (last visited Mar 22, 2023).

⁸³ *Id.*

⁸⁴ The Difference Between a Therapeutic Boarding School (TBS) and a Residential Treatment Program (RTC)?, *supra* note 70.

6. Conclusion

These treatment programs and facilities make-up a majority of the private residential programs available for parents seeking behavioral and emotional treatment for their children. These private treatment programs and facilities are not regulated on a federal level but instead are governed by a patchwork of state regulations.⁸⁵ The following section details the extent of state regulations on these treatment programs and facilities.

II. How is the Troubled Teen Industry Regulated?

The Constitution creates a framework of dual sovereignty, dividing power and authority between the federal government and the states.⁸⁶ Under this system, states have broad authority to enact legislation, while the federal government is limited to powers expressly enumerated in the Constitution.⁸⁷ Generally, traditional areas of state regulation refer to the various aspects of society that states have historically been responsible for regulating through their own legislation and local government oversight.⁸⁸ Some traditional areas of state regulation include education, health and safety regulations, and family law.⁸⁹ Without clear constitutional authority and necessity, the federal government may not intervene in such traditional areas.⁹⁰

⁸⁵ Cameron Evans, State Laws Aim to Regulate 'Troubled Teen Industry,' but Loopholes Remain, KAISER HEALTH NEWS (2022), <https://khn.org/news/article/state-laws-aim-to-regulate-troubled-teen-industry-but-loopholes-remain/#:~:text=Where%20It%20Hurts-,State%20Laws%20Aim%20to%20Regulate,Teen%20Industry%2C%20but%20Loopholes%20Remain&text=Five%20days%20after%20Utah%20Gov,of%20them%2C%20Provo%20Canyon%20School>. (last visited Mar 25, 2023).

⁸⁶ Congressional Research Service, Report LSB10787, Congressional Authority to Regulate Abortion (July 8, 2022).

⁸⁷ *Id.*

⁸⁸ *Id.*

⁸⁹ *Id.*

⁹⁰ *Id.*

Under the current regulatory scheme, private treatment programs fall under the traditional areas of state regulation.⁹¹ Currently, there are no federal oversight laws pertaining to private treatment facilities.⁹² Since 2008, efforts to pass comprehensive federal legislation have stalled.⁹³

Specifically, within the TTI, there are several regulatory areas that are traditionally under the domain of state law. First, TTI treatment programs and facilities intersect with various areas of family law. When parents enroll their children into these treatment programs or facilities, they provide express consent.⁹⁴ In extreme circumstances, parents may delegate their parental authority to these treatment programs or facilities.⁹⁵ It is well established that parents have strong rights in the upbringing of their children, and parents may delegate some of this authority to treatment programs and facilities.⁹⁶ Under these conditions, the youths are powerless as the facilities or treatment programs have legal decision-making power over the children's education, medical care, custody, and visitation.⁹⁷

Next, TTI treatment programs and facilities intersect with state health and safety regulations. Commonly, TTI treatment programs and facilities advertise various forms of medical intervention to treat participants, including different forms of therapies and psychopharmacology.^{98 99} Generally, every facility provides a basic level of treatment, however a range of treatment exists depending on the type of treatment program or facility.¹⁰⁰ These programs

⁹¹ *Id.*

⁹² *Id.*; see also U.S. Gov't. Accountability Office, GAO-08-696T, Residential Facilities: State and Federal Oversight Gaps May Increase Risk to Youth Well-Being (Federal Exceptions to for-profit programs that accept federal funds)

⁹³ Providing for the consideration of the bill, *supra* note 17.

⁹⁴ Yasmin L., Younis, *Institutionalized Child Abuse: The Troubled Teen Industry*, 74 SLU L. J. ONLINE 1, 4 (2021).

⁹⁵ *Id.*

⁹⁶ *Troxel v. Granville*, 530 U.S. 57 (2000)

⁹⁷ Younis, *supra* note 94.

⁹⁸ *Id.*

⁹⁹ *Psychopharmacology (Medication Management)*, COLUMBIA DOCTORS, <https://www.columbiadoctors.org/treatments-conditions/psychopharmacology-medication-management#:~:text=Psychopharmacology%20is%20the%20use%20of,licensed%20physician%20or%20nurse%20practitioner>. (last visited May 8, 2023) (the use of medication in treating mental health conditions.)

¹⁰⁰ Younis, *supra* note 94 at 2-3.

can range from limited therapy sessions to intensive behavioral modification programs.¹⁰¹ In the past, these private treatment programs and facilities were completely unregulated on a state level.¹⁰² While states regulated the practice of licensed professionals, such as doctors, therapists, and other clinical staff, these facilities did not garner the same level of scrutiny.¹⁰³ These treatment programs and facilities were categorized in such a way that then state's regulatory frameworks did not cover them.¹⁰⁴ Presently, several states have legislated to close this gap, but problems remain.¹⁰⁵

Lastly, there are some TTI treatment programs and facilities that offer educational components alongside treatment. These types of educational components are commonly found in long-term programs, where participants may remain for several months or even years.¹⁰⁶ For example, therapeutic boarding schools and ranches place a strong emphasis on educational components in addition to the therapeutic programming.¹⁰⁷

Given that the regulation of the TTI falls under these areas of traditional state regulation, federal authorities have been hesitant to intervene and have refrained from passing any regulations on this industry. While some states have comprehensive and successful regulatory policies for treatment programs and facilities, others lack adequate oversight and fail to protect program

¹⁰¹ Younis, *supra* note 94 at 2-3.

¹⁰² See Licensure and Regulation of Programs and Facilities, S. 107, 2005 State Leg. (Utah 2005) (Utah's first legislative effort to regulate the TTI). *But see* Jessica Miller, *Provo Canyon School's History of Abuse Accusations Spans Decades*, THE SALT LAKE TRIBUNE, <https://www.sltrib.com/news/2020/09/20/provo-canyon-schools/> (last updated Sept. 1, 2021) (Provo Canyon was first founded in 1971).

¹⁰³ *Id.*

¹⁰⁴ U.S. Gov't. Accountability Office, GAO-08-696T, Residential Facilities: State and Federal Oversight Gaps May Increase Risk to Youth Well-Being.

¹⁰⁵ Generally Revise Laws Related to Private Alternative Adolescent Programs Board, S. 267, 2019 Leg., 66th Sess. (Mont. 2019); Protection of Children, S. 557 & 560, 2019 Gen. Assemb., 101st Sess. (Mo. 2021); Relating to Children in Care, State S. 710, 81st Legis. Assemb., 2021 Sess. (Or. 2021); Human Services Program Amendments, S. 127, th State Leg., 2021 Sess. (Utah 2021).

¹⁰⁶ Younis, *supra* note 94 at 5.

¹⁰⁷ *Id.*

participants. The following sections discuss the areas where state regulation has failed to adequately address safety concerns.

A. Failures of State Regulation within the TTI

During early years of the TTI, multiple states failed to regulate facilities within the TTI.¹⁰⁸ In some cases, the facilities were unregulated because they identified themselves as programs that were exempt from reporting requirements, in other cases the states simply failed to take action.¹⁰⁹ For example, Utah's TTI popularity began to rise in the 1970s. However, the first form of any regulatory guidelines did not come for nearly thirty years, until the mid-2000s.¹¹⁰ Even then, facilities were simply required to apply for a license, pay a \$500 fee and submit to an annual and scheduled site visit.¹¹¹

A common problem within the state licensing boards is there is little to no consequences for facilities found to have been in violation of basic human rights violations.¹¹² In one instance, law enforcement officers, child welfare workers, and the office of licensing investigated a facility for abuse allegations.¹¹³ However, at the end of the investigation the facility was issued no penalties, their license remained in good standing and none of the staff members had even faced criminal charges for their actions.¹¹⁴ This lack of action is all too common in the TTI.¹¹⁵ In Utah,

¹⁰⁸ Licensure and Regulation of Programs and Facilities, *supra* note 102.

¹⁰⁹ Lenore Behar et. al., *Protecting Youth Placed in Unlicensed, Unregulated Residential "Treatment" Facilities*, FAMILY COURT REVIEW 399, 401 (2007).

¹¹⁰ Licensure and Regulation of Programs and Facilities, *supra* note 102.

¹¹¹ Sebastian Murdock, *She Ran from Island View for a Reason*, Huffington Post (Aug. 23, 2016), <https://testkitchen.huffingtonpost.com/island-view/#troubled-teen-industry/>

¹¹² Jessica Miller & Curtis Gilbert, *A Girl, Her Hands Zip Tied, Was Forced to Sit in a Horse Trough at a Utah 'Troubled-Teen' Center*, THE SALT LAKE TRIBUNE, <https://www.sltrib.com/news/2021/03/26/girl-her-hands-zip-tied/> (last updated Sept. 1, 2021)

¹¹³ *Id.*

¹¹⁴ *Id.*

¹¹⁵ Curtis Gilbert & Lauren Dake, *Youth Were Abused Here*, APM REPORTS (Sept. 28, 2020), <https://www.apmreports.org/story/2020/09/28/for-profit-sequel-facilities-children-abused>

the Office of Licensing had investigated multiple abuse violations over the years, yet over that five-year period not a single treatment program or facility had been shut down.¹¹⁶

One of the main reasons why states fail to act, even in light of blatant violations of basic human rights, is money. First, these treatment programs and facilities generate enormous amounts of income.¹¹⁷ For example, in 2015, Utah’s treatment programs and facilities generated \$423 million in GDP.¹¹⁸ These financial resources create leverage against stronger regulations.¹¹⁹ In addition, State licensing offices may lack the financial resources to inspect the facilities. In Montana, recent regulations only require facilities to be inspected once every three years.¹²⁰ This requirement is troubling considering the widespread allegations of abuse that are prevalent in TTI programs and facilities. This raises the issue of whether state licensing offices lack the manpower, or funds to adequately inspect facilities. In that case, instances of abuse and human rights violations may be more likely to continue undiscovered.

As a result of the lack of state scrutiny, problems have developed in the TTI, from abuse to the use of coercive treatment practices. The following section reviews the common problems associated with treatment programs and facilities within the TTI.

B. Ethical Considerations in the Treatment of Participants within the TTI

Within the TTI, participants have reported various instances of abuse ranging from minor to severe allegations while enrolled in certain treatment programs and facilities.¹²¹ These

¹¹⁶ Jessica Miller , *How Utah Became the Leading Place to Send the Nation’s Troubled Teens*, THE SALT LAKE TRIBUNE (Apr. 5, 2022), <https://www.sltrib.com/news/2022/04/05/how-utah-became-leading/>

¹¹⁷ Juliette Tennert, *Economic Impact of Utah’s Family Choice Behavioral Healthcare Interventions Industry*, 2016 KEM C. GARDNER POL’Y INST. U. UTAH

¹¹⁸ *Id.*

¹¹⁹ Sebastian Murdock, *supra* note 111.

¹²⁰ Generally Revise Laws Related to Private Alternative Adolescent Programs Board, S. 267, 2019 Leg., 66th Sess. (Mont. 2019)

¹²¹ Lenore Behar et. al., *Protecting Youth Placed in Unlicensed, Unregulated Residential “Treatment” Facilities*, FAMILY COURT REVIEW 399, 400 (2007).

allegations include violations to participants' basic human rights including inhumane conditions, degrading and unnecessary discipline, inappropriate and dangerous use of seclusion and restraint, medical and nutritional neglect, and contact restrictions between participants and their parents.¹²² In addition, participants have alleged certain treatment programs or facilities lacked adequate or even any therapeutic services.¹²³ For example, following reports of abuse, investigations have uncovered under or unqualified staff members employed in the treatment facilities.¹²⁴

In cases where treatment programs and facilities inadvertently or purposefully fail to adequately care for their participants, the treatment programs and facilities are profiting from the suffering of participants supposedly in their care.¹²⁵

1. Human Rights Violations

Politicians, advocacy groups, and former participants have criticized the TTI for instances of abuse and neglect within various treatment programs and facilities.¹²⁶ Structurally, treatment programs and facilities provide numerous opportunities for staff members to abuse participants.¹²⁷ For example, some treatment programs and facilities rely on point-based or level-based systems that force participants to earn basic privileges.¹²⁸ In such programs, participants are scored based on various aspects of the program, completing chores, schoolwork, participating in group activities, etc.¹²⁹ This score translates to a level designation which comes with certain privileges,

¹²² *Id.*

¹²³ *Id.*

¹²⁴ *Id.* see also Mich. Dep't of Health & Hum. Servs., Special Investigation Report for Lakeside, p. 6-7 (June 17, 2020) (staff members failing to respond in emergency relating to a participant) 2020)

¹²⁵ Lenore Behar et. al., *supra* note 121

¹²⁶ Catherine Kushan, *The Troubled Teen Industry: Commodifying Disability and Capitalizing on Fear*, 2017; See also U.S. Gov't. Accountability Office, GAO-08-713T, Residential Programs: Selected Cases of Death, Abuse, and Deceptive Marketing (2008) (Gregory D. Kutz presenting report of investigative findings related to TTI).

¹²⁷ Defining the Troubled Teen Industry - What Is It?, UNSILENCED, <https://www.unsilenced.org/the-industry/> (last visited Mar 22, 2023).

¹²⁸ *Id.*

¹²⁹ See Troubled Teens, REDDIT, https://www.reddit.com/r/troubledteens/comments/s5mklh/at_your_tti_were_you_on_a_point_based_system; see also Curtis Gilbert et al., *The Bad Place*, REVEAL NEWS (Nov.

like free time and communicating with parents.¹³⁰ The corrective nature of such programs centers on the resultant negative behavior instead of treating underlying mental health issues.¹³¹ Consequently, participants have endured various forms of abuse including food or sleep deprivation, isolation or solitary confinement, dangerous use of physical and mechanical restraint devices, restricted social isolation, and physical and sexual assault.¹³² Specific instances of abuse have been reported through media accounts, social media platforms, state investigations, and even through lawsuits.¹³³ These allegations against various facilities occur not only within the confines of a singular state or jurisdiction, but across multiple states.¹³⁴

a) Physical Abuse

In 2021, the National Disability Rights Network published a report concerning the treatment of youths placed in for-profit residential facilities.¹³⁵ The TTI is predominantly composed of private for-profit residential treatment programs and facilities.¹³⁶ The report detailed specific instances of physical, sexual, and emotional abuse, improper use of restraint and seclusion, overuse or misuse of psychiatric medication, cruel behavioral management techniques, and poor facility conditions.¹³⁷ In some cases, treatment programs and facilities were shut down due to abuse

21, 2020), <https://revealnews.org/podcast/the-bad-place/> (“Titan was a status Lakeside Academy gave to kids who behaved well. Many Sequel programs have a system like that. Students who stay in line get rewards, things like later bed times, more freedom to roam campus and phone calls home”)

¹³⁰ *Id.*

¹³¹ Defining the Troubled Teen Industry, *supra* note 127.

¹³² *Id.*

¹³³ Troubled Teens, REDDIT, <https://www.reddit.com/r/troubledteens/wiki/index/active-programs/>; *J.P. v. Sequel Tsi of Ala., LLC*, No. 3:22-cv-00190-CWB, 2023 U.S. Dist. LEXIS 45348 (M.D. Ala. Mar. 17, 2023); Tyler Kingkade & Hannah Rappleye, *The Brief Life of Cornelius Frederick*, NBC NEWS (July 23, 2020), <https://www.nbcnews.com/news/us-news/brief-life-cornelius-frederick-warning-signs-missed-teen-s-fatal-n1234660> Big Lawsuits and some news articles.

¹³⁴ *Desperation Without Dignity: Conditions of Children Placed in for Profit Residential Facilities*, 2021 NAT’L DISABILITY RTS. NETWORK 1, 5.

¹³⁵ *Id.*

¹³⁶ Defining the Troubled Teen Industry, *supra* note 127.

¹³⁷ *Desperation Without Dignity*, *supra* note 134 at 24-51.

allegations.¹³⁸ However, in other cases, treatment programs and facilities have remained open in light of repeated reports of abuse and state investigations.¹³⁹

Participants' allegations of physical abuse are common in treatment programs and facilities, employed as a punishment or control tactic.¹⁴⁰ In some situations staff members may be attempting to restrain a participant whereas other times the physical violence is more direct and unrelated to a staff protocol.¹⁴¹ Worse, injuries sustained by participants may go unreported for several days or even weeks.¹⁴² In one case, a student suffered an orbital bone fracture while being restrained, however the student was not taken to the hospital for four days.¹⁴³ Following this incident a complaint was filed and the state issued a plan of corrective action, which was resolved three months later.¹⁴⁴ Over the past 2 years, several complaints were substantiated and corrective action plans implemented, however the facility remained open.¹⁴⁵

¹³⁸ *Desperation Without Dignity*, *supra* note 134 (Clarinda Academy closed following reports of abuse from staff members); Tyler Kingkade, *Wyoming Ranch for Troubled Teens Closes Following Abuse Allegations*, NBC NEWS (Oct. 6, 2022), <https://www.nbcnews.com/news/us-news/trinity-teen-solutions-wyoming-ranch-closes-abuse-allegations-rcna50762> (Trinity Teen Solutions closed following reports of physical abuse and forced labor).

¹³⁹ Jessica Miller & Curtis Gilbert, *A Girl, Her Hands Zip Tied, Was Forced to Sit in a Horse Trough at a Utah 'Troubled-Teen' Center*, THE SALT LAKE TRIBUNE, <https://www.sltrib.com/news/2021/03/26/girl-her-hands-zip-tied/> (last updated Sept. 1, 2021) (State investigation corroborated abuse and implemented corrective action plan); Jessica Miller, *Provo Canyon School's History of Abuse Accusations Spans Decades*, THE SALT LAKE TRIBUNE, <https://www.sltrib.com/news/2020/09/20/provo-canyon-schools/> (last updated Sept. 1, 2021) (Provo Canyon School has remained operational for nearly 50 years — despite multiple lawsuits. . .state threats to pull its license, and public accounts of abuse.)

¹⁴⁰ *Desperation Without Dignity*, *supra* note 134 at 25.

¹⁴¹ *Compare Treatment Facility Being Investigated After Staff Member Accused of Brutal Assault*, LIVE 5 NEWS, <https://www.live5news.com/2022/03/04/treatment-facility-being-investigated-after-staff-member-accused-brutally-assaulting-9-year-old-boy/> (last updated Mar. 5, 2022) (where staff member struck a child in the face, lifted him up and pinned him against a wall before dropping him to the ground) with Kat Stromquist et al., *Arkansas Psychiatric Site Sanctioned over Its Care*, ARKANSAS DEMOCRAT GAZETTE (June 27, 2021), <https://www.arkansasonline.com/news/2021/jun/27/arkansas-psychiatric-site-sanctioned-over-its-care/> (where numerous reports of patients suffering broken bones from physical restraints).

¹⁴² *Policy Memo*, BREAKING CODE SILENCE, <https://www.breakingcodesilence.org/acca/policy-memo/> (last visited May 8, 2023)

¹⁴³ *Id.*

¹⁴⁴ *Jackson Springs Treatment Center Statement of Deficiencies and Plan of Correction*, NORTH CAROLINA DEPARTMENT OF HEALTH AND HUMAN SERVICES (June 23, 2020), <https://info.ncdhs.gov/dhsr/mhlc/sods/2020/20200706-080669.pdf>

¹⁴⁵ *Id.*

Furthermore, reports have uncovered that physical abuse is not limited to the staff, other members enrolled in the treatment program engage in physical attacks on fellow members.¹⁴⁶ In some cases, these incidents may be hidden from staff members, in other cases the staff members condone the member on member violence.¹⁴⁷ At a Utah boarding school, and under the direction of the school owner, a student was verbally abused, punched, kicked, and slapped by the other students.¹⁴⁸ Reports did not indicate whether corrective action had been taken against the treatment program.¹⁴⁹

b) Physical Restraint

Relatedly, treatment programs and facilities employ various methods of restraint to subdue participants.¹⁵⁰ Under 42 CFR § 483.352, the federal government defines three main forms of restraint: mechanical, personal, or medicated.

A mechanical restraint is defined as “any device attached or adjacent to the resident’s body that [they] cannot easily remove that restricts freedom of movement or normal access to [their] body.”¹⁵¹ Participants have reported instances where treatment programs and facilities misuse mechanical restraints.¹⁵² For example, at a Utah treatment facility police discovered a young girl held in a horse trough with her hands zipped tied.¹⁵³ According to state records, the facility had utilized this method of restraint for three years as a form of “therapeutic discipline.”¹⁵⁴ Utah’s Department of Human Services required the treatment facility to develop a corrective action plan,

¹⁴⁶ *Desperation Without Dignity, supra* note 134 at 25.

¹⁴⁷ *Id.* at 27

¹⁴⁸ U.S. Gov’t. Accountability Office, GAO-08-713T, Residential Programs: Selected Cases of Death, Abuse, and Deceptive Marketing (2008)

¹⁴⁹ *Id.*

¹⁵⁰ *Desperation Without Dignity, supra* note 134 at 30.

¹⁵¹ 42 CFR § 483.352

¹⁵² *Desperation Without Dignity, supra* note 134 at 29-32.

¹⁵³ Jessica Miller & Curtis Gilbert, *supra* note 139.

¹⁵⁴ *Id.*

however no plan was made available to the public.¹⁵⁵ A press statement released on the treatment facility's website indicated the particular employee was disciplined but, no criminal charges were made.¹⁵⁶ Interestingly, the facility claims to have self-reported the violation as against their own policies, yet it had been used for three years.¹⁵⁷

A personal restraint is defined as “the application of physical force without the use of any device, for the purposes of restraining the free movement of a resident's body.”¹⁵⁸ In some cases, treatment programs and facilities use of personal restraint can result in death.¹⁵⁹ At a for-profit treatment academy, several staff members were charged with murder for their participation in a failed attempt to restrain a teenager.¹⁶⁰ Two staff members sat on the chest of the teenager, while a third staff member witnessed the event but failed to intervene.¹⁶¹ The staff members engaged in this manner of restraint following the teenager's outburst and throwing of a sandwich.¹⁶²

A medicated restraint involves the use of any drug administered to manage a resident's behavior in a way that reduces the safety risk to the residents or others, has a temporary effect of restricting the resident's freedom of movement, and is not a standard treatment for the resident's medical or psychiatric condition.¹⁶³ In some facilities, the staff creates pseudonyms to refer to

¹⁵⁵ *See Our Response to Press*, HAVENWOOD ACADEMY (June 29, 2022), <https://www.havenwoodacademy.org/about-us/our-response/>

¹⁵⁶ *Id.*

¹⁵⁷ *Id.*

¹⁵⁸ 42 CFR § 483.352

¹⁵⁹ *Desperation Without Dignity*, *supra* note 134 at 29-32.

¹⁶⁰ Anthony Sylvester & Katie Sergent, *Former Workers Enter Plea in Lakeside Academy Teen's Death*, NEWS CHANNEL 3 (Mar. 16, 2023), <https://wwmt.com/news/local/michael-mosley-zachary-solis-lakeside-academy-cornelius-fredericks-death-2020-sandwich-restraint-manslaughter-homicide-crime-kalamazoo-county-west-michigan> (Two staff members accepted a plea, pleading no contest and accepting a deal for involuntary manslaughter).

¹⁶¹ *Id.*

¹⁶² *Id.*

¹⁶³ 42 CFR § 483.352

various practices engaged in by the staff members.¹⁶⁴ For example, a Utah treatment facility refers to sedatives to calm down participants as “booty juice” and in one case administered the sedative to a participant over seventeen times in a three-month period.¹⁶⁵ The troubling nature of this discovery is two-fold. First, staff member's use of the term "booty juice," which is highly inappropriate, raises concerns about their attitudes towards participant safety and well-being.¹⁶⁶ Further, the staff members demonstrated a significant dependence on these types of treatment methods, despite the participants' short duration of stay in the program.¹⁶⁷

c) Emotional Abuse

Within the TTI, emotional abuse is extremely harmful where children and teenagers are susceptible to verbal abuse and threats. Numerous reports have been made by children reporting instances of verbal abuse, threats, and intimidation from staff members.¹⁶⁸ Participants report that staff members refer to them in a derogatory manner, commenting on their weight, physical appearance, and intelligence.¹⁶⁹ The lack of concern for participants is apparent by reports of staff member behavior when participants were undergoing moments of immediate psychiatric distress.¹⁷⁰ In one instance, a staff member reportedly told a participant they should “try again” following a failed suicide attempt.¹⁷¹ Egregious instances of emotional abuse can take many forms. For example, as mentioned above, staff members can actively target participants overtly criticizing

¹⁶⁴ Valerie Edwards, *Provo Canyon Uses Sedative Dubbed Booty Juice to Sedate Teens*, DAILY MAIL (Feb. 4, 2021), <https://www.dailymail.co.uk/news/article-9225529/Provo-Canyon-School-uses-sedative-dubbed-booty-juice-sedate-teens.html>

¹⁶⁵ *Id.*

¹⁶⁶ *Id.*

¹⁶⁷ *Id.*

¹⁶⁸ *Desperation Without Dignity*, *supra* note 134 at 28.

¹⁶⁹ Nancy Buckner et al., *Letter to State Re: Sequel Facility*, ALABAMA DISABILITIES ADVOCACY PROGRAM, https://adap.ua.edu/uploads/5/7/8/9/57892141/letter_to_state_re_sequel.pdf (July 6, 2020) (Staff have called residents “f*king fat,” “f*king ugly,” “b*ch,” “stupid,” “slow” (meaning mentally), “emotionally unstable,” and “ignorant.”)

¹⁷⁰ *Id.*

¹⁷¹ *Id.*

or attacking them.¹⁷² However, in other cases, staff member use of seclusion may result in emotional harm to participants.¹⁷³

Seclusion refers to the involuntary confinement of a student alone in a room or area from which the student is physically prevented from leaving.¹⁷⁴ Limited circumstances exist where seclusion is deemed necessary or suitable by medical personnel.¹⁷⁵ For example, where a participant may pose a threat to themselves or others.¹⁷⁶ Unfortunately, these extreme treatment techniques may be subject to abuse where staff members using seclusion as a form of punishment for misbehaving participants.¹⁷⁷ Former participants and staff members report instances where blatant misuses of seclusion occur.¹⁷⁸ For example, former participants allege staff use of extended periods in solitary confinement ranging from days to weeks.¹⁷⁹ On the other side, former staff members corroborate instances where staff ignored facility rules and policies regarding seclusion.¹⁸⁰

d) Sexual Abuse and Misconduct

The vulnerability of adolescents and teenagers in treatment programs and facilities has led to instances of sexual misconduct.¹⁸¹ As reported by some participants, sexual misconduct and abuse can be committed by both staff members and fellow participants.¹⁸² While there have been several isolated instances of sexual misconduct and abuse, there are also recurring issues that

¹⁷² Nancy Buckner et al, *supra* note 169.

¹⁷³ *Restraints and Seclusion*, NATIONAL ALLIANCE ON MENTAL ILLNESS, <https://www.nami.org/Advocacy/Policy-Priorities/Stopping-Harmful-Practices/Restraints-and-Seclusion-Schools> (last visited May 8, 2023)

¹⁷⁴ *Restraint and Seclusion of Students with Disabilities*, DEPARTMENT OF EDUCATION, <https://www2.ed.gov/about/offices/list/ocr/letters/colleague-201612-504-restraint-seclusion-ps.pdf> (Dec. 28, 2016)

¹⁷⁵ Alexander Stockton, *Can You Punish a Child's Mental Health Problems Away?*, NEW YORK TIMES (Oct. 11, 2022), <https://www.nytimes.com/interactive/2022/10/11/opinion/teen-mental-health-care.html>

¹⁷⁶ *Id.*

¹⁷⁷ *Id.*

¹⁷⁸ *Id.*

¹⁷⁹ *Id.*

¹⁸⁰ *Id.*

¹⁸¹ *Desperation Without Dignity*, *supra* note 134 at 26.

¹⁸² *Id.* at 25-26

suggest a systemic problem.¹⁸³ In a study published in 2020, researchers found that out of approximately 30 individuals placed in TTI programs and facilities, nearly half witnessed or experienced some form of sexual abuse.¹⁸⁴ Furthermore in a report by American Public Media Reports, since 2010, there have been at least twenty documented cases where government investigations concluded that staff members at various Sequel Treatment Programs across the U.S. engaged in sexual or romantic relationships with residents.¹⁸⁵ Therefore, not only are there isolated instances of sexual misconduct but specific programs have numerous documented cases relating to sexual exploitation.¹⁸⁶

Overall, treatment programs and facilities experience widespread instances of human rights violations.¹⁸⁷ The abuse of the vulnerable participants within the TTI creates environments within purported treatment facilities where individuals are traumatized.¹⁸⁸ Presently, data is limited and the true extent of human rights violations remains unclear, however, individual stories continue to make headlines detailing violations within the TTI.¹⁸⁹

2. Misrepresentation in the TTI

The TTI preys on the vulnerability and desire of parents who are seeking assistance to fix problems they perceive as wrong with their children.¹⁹⁰ The TTI distorts common teenage

¹⁸³ *Desperation Without Dignity*, *supra* note 134 at 25-26.; see Paighen Harkins, *Hillcrest Nurse Tech Arrested on Allegations of Raping Patient*, TULSA WORLD (Dec. 30, 2016), https://tulsaworld.com/news/local/crime-and-courts/hillcrest-nurse-tech-arrested-on-allegations-of-raping-patient/article_39512612-d0d6-5d5e-b93e-1be9446ed40b.html (surveillance cameras caught an employee raping a female student); see also Jessica Miller, *Staffer at Utah Youth Hospital Accused of Forcing Sex on 12-Year-Old Former Patient*, THE SALT LAKE TRIBUNE (Feb. 6, 2020), <https://www.sltrib.com/news/2020/02/06/staffer-utah-youth/> (staff member charged with first-degree sodomy and second degree felony for enticing a minor for abusing a child at the facility)

¹⁸⁴ Olivia Stull, *supra* 37 at 190.

¹⁸⁵ Curtis Gilbert & Lauren Dake, *Youth Were Abused Here*, APM REPORTS (Sept. 28, 2020), <https://www.apmreports.org/story/2020/09/28/for-profit-sequel-facilities-children-abused>

¹⁸⁶ *Id.*

¹⁸⁷ *Desperation Without Dignity*, *supra* note 134 at 24.

¹⁸⁸ *Desperation Without Dignity*, *supra* note 134 at 24.

¹⁸⁹ Olivia Stull, *An Exploratory Study on Adult Survivors of the Troubled Teen Industry's Therapeutic Boarding Schools and Wilderness Programs*, U. KAN. 1, 15.

¹⁹⁰ Catherine Kushan, *supra* note 126.

problems and demonizes them into severe problems that must be addressed.¹⁹¹ The TTI fear mongers parents into believing that their child's behavior necessitates intervention.¹⁹² For example, when parents contact treatment programs and facilities for guidance, personnel may demonize certain common teenage behaviors such as mood swings or outbursts, talking back, disinterestedness in completing school work or attending family activities, disruptive behavior, lack of motivation, and being argumentative.¹⁹³ However, many of these perceived issues are merely natural behaviors of children developing in their adolescence and do not require the extreme intervention of TTI treatment programs and facilities.¹⁹⁴ As a result, parents place their children into treatment programs and facilities based on this misguided process.¹⁹⁵

In some cases, parents have children with legitimate behavioral or emotional concerns and/or a formal diagnosis. There, parents may seek to send their child to a specialized residential treatment program or facility where the needs are the child are best served. However, some facilities may purport to provide treatment they are not qualified or equipped to administer.¹⁹⁶ In these cases, children may suffer harm from the lack of promised treatment.

In situations where parents are experiencing a disconnect with their children they may turn to the internet for assistance. In doing so, they will uncover a variety of programs offering their assistance to treat their children's problems.¹⁹⁷ These websites pose as resources for parents.¹⁹⁸

¹⁹¹ Catherine Kushan, *supra* note 126.

¹⁹² *Deceptive Marketing*, A START FOR TEENS (Oct. 2011), <http://astartforteens.org/assets/files/ASTART-Deceptive-Marketing-Oct-2011.pdf> (Parents decision to place children did so while experiencing powerful emotions: frustration and anger, fear and uncertainty about child's life and future; exhaustion after long months or years of struggle, and longing for the drama and fear to end.)

¹⁹³ *Is My Child a Troubled Teen?*, TROUBLED TEENS, <https://troubledteens.com/assessment-test/> (last updated Apr. 30, 2021)

¹⁹⁴ *Challenging Behaviors - Teenagers*, THE ROYAL CHILDREN'S HOSPITAL MELBOURNE (Oct. 2018), https://www.rch.org.au/kidsinfo/fact_sheets/Challenging_behaviour_teenagers/

¹⁹⁵ *Id.*

¹⁹⁶ See Appendix A, *Better Business Bureau of Utah – Havenwood Arbitration*

¹⁹⁷ Catherine Kushan, *supra* note 126.

¹⁹⁸ *Id.*

However, they are nothing more than advertisements selling expensive and likely unnecessary treatment programs to unsuspecting parents.¹⁹⁹ These websites pathologize common teenage problems, lulling parents into a false sense of comfort in sending their children to these programs.²⁰⁰ A handful of programs offer questionnaires for parents to gauge their child’s behavior to confirm or dispel their beliefs.²⁰¹ While these questionnaires appear to be a non-biased resource, they often are biased.²⁰² For example, responding “rarely” to all 25 questions of the quiz yields a result that the teen is in the moderate risk category.²⁰³ Furthermore, “adolescents in this category are exhibiting several behaviors that are disturbing to parents and are in need of help”.²⁰⁴ These misrepresentations used to enroll participants remains unchecked by state regulatory agencies, allowing these treatment programs and facilities to funnel in participants within the state and even across the country.

The TTI’s disregard for human rights has resulted in a system in which treatment programs and facilities profit off vulnerable families, providing inadequate care and subjecting their children to abusive practices. Over the past 60 years, states maintained dominant regulatory authority to oversee these treatment programs and facilities, however instances of human rights violations continue to emerge. The following section discusses the need for federal regulations and the federal government’s authority to regulate the TTI.

¹⁹⁹ *Id.*

²⁰⁰ *Id.*

²⁰¹ *Is My Child a Troubled Teen?*, TROUBLED TEENS, <https://troubledteens.com/assessment-test/> (last updated Apr. 30, 2021); *Troubled Teen Questionnaire*, MY TROUBLED TEEN, <https://www.mytroubledteen.com/f/Identify>; *Quiz: Is Wilderness Program Right for Your Child*, TEEN BOOT CAMPS, <https://teenbootcamps.org/quiz-does-your-teenager-need-help/> (last updated June 3, 2021) ; *Quizzes for Parents*, TURN ABOUT RANCH, <https://www.turnaboutranch.com/parent-quizzes/> (last updated Jan. 25, 2021)

²⁰² *Id.*

²⁰³ *Id.*

²⁰⁴ *Id.*

III. How the Federal Government Should Regulate the TTI and How the Commerce Clause can Empower Congress to Act.

A. How the Federal Government Can Regulate the TTI.

Presently, the biggest challenge within the TTI is the patchwork of state regulation. Since treatment programs and facilities are regulated on a state-by-state basis, treatment programs and facilities are treated differently. For example, Montana only requires treatment programs and facilities to be inspected once every three years, whereas Utah performs inspections at a minimum once every year.²⁰⁵ The differences between state regulatory agencies and licensing requirements can be stark. This creates a system where corporations are free to forum shop to find a state that has not adopted stringent laws pertaining to private treatment programs and facilities.²⁰⁶

To combat this, the Federal Government should develop a comprehensive and uniform set of regulations and guidelines for all states to adopt regarding the regulation of the TTI. This will ensure that all states are operating under the same set of regulations. Included in these regulations should be a Bill of Rights for Youths placed into these programs, where certain basic rights should be afforded. For example, the right to have their essential needs met, and to be free from abusive, coercive, humiliating and/or traumatizing environments. Recognition of a Bill of Rights and a mandatory floor for regulations will allow for a sharp contrast between treatment programs and facilities that are beneficial versus programs that are harmful.

Next, the Federal Government should develop concrete definitions for the various treatment programs across the U.S. A challenge prevalent in the state-by-state approach has been

²⁰⁵ *Compare* Generally Revise Laws Related to Private Alternative Adolescent Programs Board, S. 267, 2019 Leg., 66th Sess. (Mont. 2019) *with* Human Services Program Amendments, S. 127th State Leg., 2021 Sess. (Utah 2021).

²⁰⁶ Heather Mooney , Activists, State Authorities and Lawsuits Filed by Survivors Are Putting Pressure on the ‘Troubled Teens’ Industry to Change Its Ways, *The Conversation* (Mar. 26, 2021) <https://theconversation.com/activists-state-authorities-and-lawsuits-filed-by-survivors-are-putting-pressure-on-the-troubled-teens-industry-to-change-its-ways-156096> (Concerns over Montana Treatment Programs and Facilities moving to Idaho).

the use of different names to escape licensing requirements. If the federal government creates standard definitions for these programs that transcend state boundaries, treatment programs and facilities will be less likely to escape regulation.

Third, the Federal Government should create an oversight committee to require mandated reporting to a central governmental for treatment programs and facilities. For example, Utah's legislation requires facilities to report all "critical incidents" to the licensing board for investigation.²⁰⁷ Furthermore, Utah is creating an online database to make the investigation of complaints more transparent²⁰⁸ These resources would be beneficial in all states as a majority of children placed in these facilities are out-of-state residents, whose access to licensing agencies may be limited. A general oversight committee could compile all of the data in one place, which would aid in analyzing trends in treatment across the U.S.

Lastly, the Federal Government should create a stream of funding to assist local licensing committees that may not have the resources to inspect treatment programs and facilities or enforce policy violations. While having a strong regulatory framework is critical, if there is not agency to enforce such policies then federal efforts will be for nothing. If the federal government creates a stream of funding for the states, agencies will be in a better position to address instances of abuse.

The following section addresses the federal government's constitutional authority to implement these regulatory policies.

²⁰⁷ Human Services Program Amendments, S. 127th State Leg., 2021 Sess. (Utah 2021) (Critical Incidents can range from participants suffering an injury to the use of physical restraint or seclusion).

²⁰⁸ Annie Knox & Daniella Rivera, Teen Treatment: Advice for Parents Seeking Residential Treatment Options, Ksl Tv (Mar. 24, 2022), <https://ksltv.com/487892/teen-treatment-advice-for-parents-seeking-residential-treatment-options/>

B. What is the Constitutional Authority for the Federal Government to Regulate the Troubled Teen Industry?

Under the United States Constitution, the Federal Government is granted enumerated powers to create laws and policies to govern the nation.²⁰⁹ While these enumerated powers from grant the Federal Government their authority to regulate, they serve as a limitation restricting the Federal Government from regulating all conceivable functions of government.²¹⁰ Under the Tenth Amendment to the Constitution, the remainder of the governing responsibilities are placed onto the States to legislate based on the specific needs and desires of the state population.²¹¹ For the past 60 years, the TTI's regulation has been the responsibility of the states.²¹²

In Part II, the inadequacy of state regulation has been detailed. As the TTI grows and more instances of abuse emerge, politicians, advocacy groups, and former participants have called upon the Federal Government to intervene. However, to do so, the regulated conduct must fall within one of the categories of enumerated powers of the Federal Government.

In this case, the Federal Government would have the authority to regulate the TTI through Article I, Section 8, Clause 3 of the U.S. Constitution, the Commerce Clause. Under the Commerce Clause, the Federal Government has the power to regulate commerce among the several states.²¹³ In doing so, the Federal Government may regulate the channels of commerce, the instrumentalities of commerce, and any action that substantially affects interstate commerce.²¹⁴

²⁰⁹ *United States v. Lopez*, 514 U.S. 549, 551 (1995)

²¹⁰ *Id.*

²¹¹ *Lopez*, 514 U.S. at 551

²¹² Cathy Krebs, *Five Facts About the Troubled Teen Industry*, AMERICAN BAR ASSOCIATION (Oct. 22, 2021), <https://www.americanbar.org/groups/litigation/committees/childrens-rights/practice/2021/5-facts-about-the-troubled-teen-industry/>

²¹³ U.S. CONST. art. 1, § 8, cl. 3

²¹⁴ *Lopez*, 514 U.S. at 551

In *United State v. Lopez*, the Supreme Court set forth the modern test to determine whether a federal regulation may be upheld through Congress's commerce clause power.²¹⁵ In *Lopez*, the court noted that Congress's Commerce Clause power allows federal regulation of three broad categories of activity.²¹⁶

First, Congress can regulate the channels of interstate commerce.²¹⁷ The channels of interstate commerce include any means of transport such as highways, railroads, waterways, or airspace.²¹⁸ In addition, the channels of interstate commerce include the particular goods that are being moved through these channels.²¹⁹

Second, Congress can regulate the instrumentalities, persons, or things in interstate commerce.²²⁰ The instrumentalities refer to airplanes, trucks, trains, boats, or other vehicles used within interstate commerce.²²¹ Whereas persons or things may be the persons or objects being transported by the instrumentalities.²²²

Lastly, Congress can regulate activities that substantially affect interstate commerce.²²³ This category is the broadest, with the Court weighing several factors to determine the validity of federal legislation.²²⁴ The Court may consider whether the activity is economic in nature, whether the statute contains an express jurisdictional element, whether there are express congressional findings related to the regulated activities effect on interstate commerce, and the link between the regulated activity and interstate commerce.²²⁵

²¹⁵ *Lopez*, 514 U.S. at 551

²¹⁶ *Id.* at 558.

²¹⁷ *Id.*

²¹⁸ *Id.*

²¹⁹ *Id.*

²²⁰ *Id.*

²²¹ *Lopez*, 514 U.S. at 558

²²² *Id.*

²²³ *Id.*

²²⁴ *Id.*

²²⁵ *Id.* at 561-62.

In the case of the TTI, a court would likely review the regulation under the last prong, whether the TTI has a substantial affect on interstate commerce and weigh several of the factors in making their determination. Here, it would be best to compare the potential regulations to cases the court has previously considered.

Beginning with *Lopez*, the Court grappled with Congress's passage of the Gun Free School Zone Act of 1990.²²⁶ There, the Court rejected the Government's argument that gun violence in schools had a substantial impact on general economic conditions.²²⁷ The Court was concerned that the relationship between the regulated activity and a substantial effect on interstate commerce was too attenuated.²²⁸ In addition to the regulation of purely local, non-economic activity, the government failed to include a jurisdictional element or sufficient congressional findings to link the conduct to interstate commerce.²²⁹

In contrast, Federal regulations of the TTI would likely be found to have a substantial impact on general economic conditions. First, unlike *Lopez*, where the government attempted to argue that the gun regulations would curb gun violence and ultimately positively impact economic conditions, here the connection between the regulation of the industry and the economic conditions are more direct.²³⁰ The TTI is a multi-billion-dollar industry that profits off the services that it provides.²³¹ Estimations place the average profits of treatment programs and facilities around \$1.2 billion per year.²³² Therefore, any federal regulation relating to the TTI is a regulation of an economic activity.

²²⁶ *Lopez*, 514 U.S. at 551

²²⁷ *Id.* at 567.

²²⁸ *Id.* at 561

²²⁹ *Id.*

²³⁰ *Lopez*, 514 U.S. at 567.

²³¹ *The "Troubled Teen" Industry*, NATIONAL YOUTH RIGHTS ASSOCIATION (Oct. 26, 2019), <https://www.youthrights.org/issues/medical-autonomy/the-troubled-teen-industry/#:~:text=In%20more%20extreme%20cases%2C%20young,a%20year%20while%20doing%20it.>

²³² *Id.*

Additionally, an important factor in an analysis of the applicability of the Commerce Clause is the market of the TTI across the U.S.²³³ In 2016, Juliette Tennert of the University of Utah conducted a study of the TTI in Utah.²³⁴ Tennert’s research compiled the economic impact of the TTI facilities.²³⁵ Tennert discovered that over 90% of the revenue generated by the TTI within Utah was a result of out-of-state clientele.²³⁶ Tennert was able to compile economic data from over fifty-nine of the seventy-two TTI facilities operating in Utah, which accounted for \$269 million dollars in earning for the year.²³⁷ Therefore, while these treatment programs and facilities may operate within a single state, the effects reach across the U.S.

Furthermore, in *Lopez*, the government failed to provide express congressional findings of the effect of gun possession in school zones and interstate commerce.²³⁸ Unlike *Lopez*, the government has conducted several hearings and developed several reports related to the TTI. In 2008, the United States Government Accountability Office released a report detailing their findings of abuse, deceptive marketing, and questionable practices within the TTI.²³⁹ In addition, the government experienced first-hand accounts of facilities engaging in deceptive practices to enroll participants.²⁴⁰ The government uncovered cases of child abuse and neglect within facilities.²⁴¹ In the end, the government concluded that there were gaps in the current regulatory system that could be addressed by greater federal oversight.²⁴² In pursuing federal regulations, the

²³³ *Lopez*, 514 U.S. at 558.

²³⁴ Juliette Tennert, *Economic Impact of Utah’s Family Choice Behavioral Healthcare Interventions Industry*, 2016 KEM C. GARDNER POL’Y INST. U. UTAH

²³⁵ *Id.*

²³⁶ *Id.*

²³⁷ *Id.*

²³⁸ *Lopez*, 514 U.S. at 562.

²³⁹ U.S. Gov’t. Accountability Office, GAO-08-713T, Residential Programs: Selected Cases of Death, Abuse, and Deceptive Marketing (2008).

²⁴⁰ *Id.*

²⁴¹ *Id.*

²⁴² U.S. Gov’t. Accountability Office, GAO-08-696T, Residential Facilities: State and Federal Oversight Gaps May Increase Risk to Youth Well-Being.

government can continue to compile data relying on their own investigations, and private research to support their position that the TTI has a substantial impact on interstate commerce, and avoid the pitfalls of previous failed regulatory policies.

Based on these considerations, the Federal Government likely has the authority, through the Commerce Clause, to regulate the TTI. Within the TTI, treatment programs and facilities are engaged in economic activities which reach outside their home state to market and encourage families to enroll their children in potentially unnecessary and abusive treatment. The Federal Government can bolster its current reports to further establish the impact of the TTI on interstate commerce to ensure their policies and regulations will satisfy judicial scrutiny.

Conclusion

The patchwork of state regulation is inadequate to address the growing concerns related to the TTI. For years, participants of the TTI have complained and raised concerns about its abusive tactics and misrepresentations that have caused them harm. Outlined above are ways in which the federal government can address these concerns through the passage of comprehensive legislation. The intervention of the federal government is necessary, while the TTI operates in an area that has been the traditional responsibility of the states, it is apparent that this issue transcends state boundaries.

In conclusion, the Federal Government's regulation of the TTI is necessary to ensure the safety and well-being of vulnerable youth and families, and to prevent further instances of exploitation and abuse. Relying on the Commerce Clause, the Federal Government can establish and enforce minimum standards of care and accountability. These standards will aid in ensuring children receive the help and support needed to overcome challenges in a healthy and safe environment.

Appendix A



Better Business Bureau of Utah, Inc.

5673 S. Redwood Rd • Salt Lake City • UT • 84123
(801) 892-6009 • Toll free in Utah (800) 456-3907 • Fax (801) 892-6002
www.bbb.org • info@utah.bbb.org • complaints@utah.bbb.org

ARBITRATION DECISION

Date: August 14, 2018

Arbitrator: Ann Nevers

Consumer: Michael and Natalie Gebhart
Business: Havenwood Academy Inc
Case ID: 12587121

Having heard the claims and considered the evidence as it relates to the dispute between the parties named above, the decision of the undersigned Arbitrator(s) is as follows:

Havenwood facility needs to remove the following information from its website, welcome letter, and other advertising and informational materials no later than 5 p.m. September 25, 2018.

- Claims of clinical expertise in the areas of RAD, post-traumatic stress disorder, dysthymia, attention deficit hyperactivity disorder and autism spectrum disorder,
 - Claims of experience or expertise with eating disorders, statements that make it appear to be in compliance with state audits, and information that Celesta Lyman is the registered dietician for Havenwood,
 - Curriculum claims of focused teaching, academic field trips, guest speakers, and a structured learning environment. Claims that students will re-enter a regular school and be on track.
 - General program claims of recreation in nearby national parks, hiking, and regular gym classes.
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