

2014 Mikan Efficacy Study

Marriage and Family Health Services reviews the efficacy of its services annually. This year's study of our Mikan adolescent therapeutic day treatment program included data from 130 teenagers. The 130 adolescents came from our programs in Eau Claire, Chippewa Falls, Rice Lake, Hudson, and Marshfield.

Demographic Data:

Some of the demographics in this year's study include a mean age of 14.8 years. There were 70 males and 60 females. Of the 130 children, 46 live with their mother, 26 with both parents, and 22 with neither parents with the balance spread between father and other arrangements. The most common diagnoses at admission included Oppositional Defiant Disorder (41), Depressive Disorder (17), and Mood Disorder NOS (16). The most common secondary diagnoses were ADHD (30), Anxiety (25), and ODD (15). There were six children with a primary diagnosis of PTSD and two with PTSD as a secondary diagnosis.

The Mikan program goes beyond trauma sensitive services and includes formal trauma reprocessing therapy for its adolescent clients. Although highly prevalent, the level of trauma is less frequent when compared to prior years.

	TRAUMA
<i>Physical Abuse</i>	53
<i>Sexual Abuse</i>	36
<i>Severe Sexual</i>	24
<i>Neglect</i>	64
<i>Emotional Abuse</i>	72
<i>Parent in Jail</i>	11

This year's study was also significant in terms of self-harm behaviors. At admission or early in treatment the following data was gathered. Self-harm ideation and behavior remains one of the focal points of our work.

	SELF HARM
<i>Suicidal Ideation</i>	55
<i>Cutting/Mutilation</i>	51
<i>Suicidal Behavior</i>	16
<i>Eating Disorder</i>	6

Observations:

Having a trauma history remains correlated to traditional outpatient therapy treatment being less effective given the paucity of therapists trained in formal trauma reprocessing.

Many of the more severe trauma histories became revealed during treatment. It takes time for teens who have been traumatized to gain the level of trust to share their histories. This data also illustrates the infrequency of PTSD as a diagnosis even though a large number of the children had histories significant for trauma.

Program Efficacy Data:

To help measure treatment gains Marriage and Family Health Services/Mikan conducts several inventories at admission and discharge. The Mikan program continues to provide for dramatic improvement.

	ADMISSION	DISCHARGE	CHANGE
<i>Depression Inventory</i>	22.51	13.84	↓29.5%
<i>Anxiety Inventory</i>	17.08	9.95	↓41.7%
<i>Anger Inventory</i>	39.85	23.61	↓40.8%

The decrease in depressive/ symptomology equaled or exceeded the data commonly found through psychotropic medication and/or outpatient counseling services. The decrease in anxiety and anger symptoms exceeded expectations.

Parent/Guardian Observational Data:

Marriage and Family Health Services/Mikan believes that it is essential that the participating clients be able to demonstrate behavioral changes that others can acknowledge. Mikan goes beyond “I will try” to actualizing internal change into healthy behavioral change that the parents/guardians can recognize.

This year’s study includes comparative data from admission, discharge and 90 days post discharge. Although we could not gather complete data from all 130 participants 90 days post discharge we think sharing the data still has value. When reviewing this data please note that a score of “0” indicated no change or effort and “10” was a score of complete effort/change. What you have for your review are the average perceptions of the client’s parents/guardians.

	ADMISSION/INTAKE	DISCHARGE	90 DAYS
<i>Efforts in School</i>	4.29	7.43	7.01
<i>Alcohol/Drug use</i>	7.28	8.59	9.00*
<i>Understanding of AODA</i>	6.99	8.97	8.72
<i>Effort at Home</i>	4.24	6.87	7.53*
<i>Anger Management</i>	3.50	6.95	7.51*
<i>Communicative Skills</i>	4.09	6.67	7.02*
<i>Problem Solving</i>	4.19	7.31	7.49*
<i>Family Relaxation</i>	5.17	7.12	7.36*
<i>Responsibility</i>	2.98	6.92	7.32*
<i>Behavior</i>	4.03	6.88	7.65*
<i>Conscience/Empathy</i>	5.04	7.53	7.75*
<i>Ability to discuss tough issues</i>	4.77	7.49	7.26

**Indicates parents/guardians noting continued healthy change 90 days after discharge. The data is indicative of clients who have internalized their healthy changes allowing them to continue to grow in many positive ways beyond their time in program.*

Longitudinal Impact:

This year's data is remarkable not only in terms of the parents/guardians being able to witness significant internal and behavioral growth/change but that those changes continued three months after discharge from Mikan. If a child is allowed to continue with one of the Marriage and Family Health Services therapists for outpatient follow-up services the data 90 days after discharge is enhanced. Unfortunately many clients are not allowed to continue with one of their Day Treatment Therapists offices due to HMO requirements or distance. However with all things considered, parents/guardians have been very pleased with Mikan's ability to help their child make significant emotional/behavioral changes in their home, school and family.

School Data:

Outside of an adolescent's home, the second environment that our teens spend the most time is the school. The school often observes concerns about the child and facilitates a referral for consideration for Mikan services. As such, noting behavioral change in school is valuable information. This year's study includes data at intake, discharge and 90 days post discharge. Please know that one of our six programs did not collect school data and that the 90 days post discharge data was limited to five of our programs as well. However, we believe the data has significant merit.

	ADMISSION/INTAKE Averages	DISCHARGE Averages	90 DAYS Averages
<i>Tardy</i>	6.53	2.34	3.52
<i>Unexcused Absence</i>	4.93	2.13	.12*
<i>Excused</i>	9.87	3.34	2.87*
<i>GPA</i>	1.91	2.72	2.73*
<i>In School Suspension</i>	1.57	.30	0*
<i>Out of School Suspension</i>	2.14	.17	0*
<i>Detention Periods</i>	2.61	1.56	.45*
<i>School Effort</i>	4.55	7.01	7.85*
<i>School Behavior</i>	4.00	7.30	8.42*

**Indicates that school staff noted continued improvement beyond discharge from Mikan.*

The Mikan children clearly demonstrated healthy changes in their school behavior. They were more likely to attend school, be on time, study/complete their homework, get into less trouble and demonstrate the changes that their primary teacher/advisor would observe.

Summary:

The amount of therapeutic change realized in both behavior and affect regulation were exceptional in this year's study. The decrease in anxiety (-41.7%) and depressive (-29.5%) symptomology exceeded our expectations. The decrease in depressive symptoms equaled those commonly found through the use of anti-depressants without the potential for negative side effects. The dramatic decrease in anxiety symptoms were achieved without the use of medication as well and are clearly something that the children can be proud of.

Anger is one of the more common moods associated with a referral to our services. The significant decrease in anger symptoms (-40.8%) is one of the largest decreases documented in our 20 year history of efficacy studies. These adolescents not only decreased the behavioral demonstration of anger but they reported improvement in their personal well-being. They have begun to feel pride in themselves.

Equally impressive is the realization that they were able to internalize their treatment gains without the use of medications. As such, we have noted through our longitudinal data that the teens are more likely to be resilient in the future. These changes will not be diminished by not taking medications. These changes are impressive and a significant compliment to the teens ability to be open to new ways of thinking/feeling/problem solving and then the courage to do something different.

What Makes Mikan effective:

-MFHS has fully licensed therapists provide/direct the therapeutic services received. Unlike many behaviorally based services, our therapists are with the clients each minute they are present.

-The adolescents receive their services from staff who have specific training in trauma reprocessing. MFHS goes beyond trauma sensitive services and includes effective treatment of trauma.

-MFHS/Mikan has 20 years of experience providing this level of care addressing the presenting symptomology and also the individual/family issues behind the behavior.

The 2014 Efficacy Study revealed some remarkable emotional/behavioral changes that the child/family/school can be very proud of. While many of the changes were significant, we also know that all of the teens will have challenges going forward. We believe that through the guidance of their family, school, and internalized change acquired through Mikan/MFHS your teen can meet those challenges successfully. All of us at MFHS appreciate your effort to have your child come to Mikan.

Thank you,

Marriage and Family Health Services

