

YOUTH TIPS IN RESIDENTIAL LANGUAGE

YouthMOVE Massachusetts
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LANGUAGE RECOMMENDATIONS: PRO/CON

To improve services to youth that are in residential services and therapeutic settings – we suggest using the following language:

Negative words	Positive Change
Client	Youth, young adult
Code Blue	Medical support
Code Red	Emergency
Code 5 -A wall	Emergency / Runner
Community Service	Repair/ Fix a relationship
Check in/ Search	Check our items
Your Bad	This is rough
Restitution	Fix it or repair

Youth feel that residential settings need to remember the following:

- Home Visits help to be referred to as “Going Home”. When returning to school it should be looked at as “School Visits”.
- Youth should be able to have doctors out of the program setting if they choose to so they can feel normal & connected.
- Families need to be able to go into the residence, youth’s rooms, and have meals with their children on campus in the residence that they live in.
- Youth find it helpful to call their peers “FRIENDS”.
- Youth can receive hugs from staff to feel more comfortable if they choose.
- Siblings need to be able to visit with their sibling that is in residential. They suggest a comfortable place. Please no offices.
- Youth that have families with no transportation need help getting to their families and offer Skype.
- Youth that do not have biological families, or family involvement, need to have connections with adults that are role models and meaningful in their lives.
- Youth are allowed to make phone calls with no time limit, or time restriction.
- Youth need support when they are having challenges- Seclusion and Restraints are not the answer.
- Youth want positive supports while they cannot live at home. The use of language is important so youth can feel they can be met where they are.



“We all have wanted to be in “our” home. Residential can be a scary place for us to understand.” Youth Age12

Helpful hints when youth come into therapeutic, treatment, and/or residential care:

Listen to
US!

Intake:

- Youth need to know about the pros and the cons that can happen in the treatment.
- Youth need to be given a tour of what the residential “campus” and/or buildings look like.
- Youth suggest a Map and a book that is used to remind them.
- Youth feel scared, lonely and like they have done more things wrong than right.
- Youth feel “characterized” as a no one when having clothes in trash bags. Offer a luggage, or backpack.
- Youth need A LOT Of support when they arrive to new programs.
- Youth are in need of lots of visits from family as they enter care. Please do not keep important people out of our lives.
- Youth who do not feel comfortable with phones want support.
- Youth who have been in a lot of hospitals wonder if this is “going” to be the right PLACE! (Protect, Live, Accept, Care, and Education them!)

3-6 Months of Care:

- Youth want involvement in privileges, and programs.
- Youth want to go into the community to learn skills and be off the “campus” to feel normal.
- Youth want to be included in decision making.
- Youth want an option to get/or be familiar with staff and administrators.
- Youth want friends.
- Youth want family, siblings or meaningful people to continue to support them.
- Youth want a consistent therapist to work on challenges.
- Youth want to be included in medication choices, management and programs.

12 Months of Care or Longer:

- Ask the Youth where their voice is needed.
- Youth can be involved in interviewing staff, giving feedback at every level.
- Youth who have been in care believe that in 12 months youth need to be asked at least every 3 months on their feedback.