ABOUT ADELPHOI

Adelphoi is a non-profit organization founded in 1971, providing an extensive network of community-based programs and services to over 1,200 children, youth and families on a daily basis.

Our continuum of care enables us to successfully meet the needs of a broad scope of clients ages birth to twenty (male and female) including those classified as delinquent, dependent, mental health, and non-adjudicated youth.

Adelphoi benefits and services are available to all children without regard to race, color, sex, disability, age, or national origin.

FOR MORE INFORMATION

If you would like to learn more about Adelphoi Village’s Multisystemic Therapy, please contact:

Julianna Ohler, MST Supervisor
Phone: 724-882-3887
julianna.ohler@adelphoi.org
http://www.mstservices.com
www.adelphoi.org

MULTISYSTEMIC THERAPY

www.adelphoi.org
What is Multisystemic Therapy (MST)?

MST is the world’s leading evidence-based program for at-risk youth and families. Backed by more research than any other community-based program, and more than 500 teams around the globe, MST consistently provides positive results with youth and families. Adelphoi Village is the leading provider of MST services in the state of Pennsylvania, serving youth and families since 1999 in over 20 counties.

MST receives referrals on youth, between the ages of 12 and 17, who display serious antisocial behaviors and are at-risk of placement out of the home due to their behaviors: disrespect, disobedience, drug/alcohol problems, school truancy and behavior problems, running away, criminal activity, aggression.

MST treatment is intended to stabilize the living arrangement, promote reunification, or prevent and reduce the utilization of out-of-home therapeutic resources. The multisystemic approach addresses the many factors that are known to contribute to behavior problems across key settings, or systems, including the youth’s home, school, neighborhood and peer group; decreasing targeted risk factors and enhancing protective factors. The typical duration of treatment is 4-6 months.

Benefits of MST

On-call services are provided to the family by the primary therapist through the week and by the MST team on weekends. MST therapists only work with five to six families at a time. Adelphoi Village’s MST Program features elements of successful trials of MST that have been demonstrated to transport to diverse communities:

• A clearly defined and scientifically grounded treatment theory.
• High level of supervision, training, and clinical consultation, all conducted in accordance with MST specifications.
• Thorough, on-going assessment of each family’s strengths, needs, and barriers to progress.
• Individually designed treatment plans to address specific drivers of antisocial behavior.
• Monitoring of adherence through implementation of MST’s Quality Assurance protocols and focus on provider accountability.

Reduces long-term rate of crime, repeat negative behavior, rates of out-of-home placements and improves overall family functioning.

The average cost of MST treatment for a youth is thousands less than traditional hospital-based treatment or other out-of-home placements. Savings result not only from less expensive services, but from reduced future costs to the community due to successful treatment outcomes.

Intake Requirements

MST Services may begin under county funding (JPO, CYS, Behavioral Health). When MST is identified as recommended through a psychological or psychiatric evaluation and ISPT process, authorization is requested through the Managed Care Organization.

Determination of whether a youth is appropriate for MST requires a review of the relevant factors by the MST Supervisor, often in collaboration with their MST Consultant. Contact can be made to MST Supervisor prior to consideration or recommendation.

Exclusionary Criteria

• Youth living independently, or youth for whom a primary caregiver cannot be identified despite extensive efforts to locate all extended family, adult friends and other potential surrogate caregivers.
• Youth referred primarily due to concerns related to suicidal, homicidal, or psychotic behaviors.
• Youths whose psychiatric problems are the primary reason leading to referral, or who have severe and serious psychiatric problems.
• Juvenile sex offenders (sex offending in the absence of other delinquent or antisocial behavior).
• Youth with pervasive developmental delays.

Thus, while MST is appropriate for youth presenting primarily with behavioral problems that may have mild to moderate co-morbid psychiatric problems, youth whose psychiatric problems are the primary reason leading to referral, or who have severe and serious psychiatric problems, should be excluded from standard MST teams.

MST is recognized as a Blueprints for Healthy Youth Development Model Program.