Creating the Upside Down Organization:
Transforming Staff to Save Troubled Children

Presented at the 50th Anniversary Annual Meeting of the American Association of
Children’s Residential Centers Plenary Session November 3, 2006 by Andrew L. Ross, Ph.D.,
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The Problem
The first step in creating the upside down organization is realizing the need for it.
Since the 1950’s a great deal of creative energy has been expended on describing the
dynamics of behavior and developing personality theories to explain the behavior of the
emotionally disturbed and behavior disordered child. Numerous programs, therapies and
approaches have been developed over the past half century to harness this understanding
but the results have not been very impressive. We say this because over the past 50 years
suicide rates among children have increased 137%, and homicide rates among children
have risen by 133%. The current rate of serious, impairing disorders in children hovers
between 10% and 12%. Thirteen percent of children ages 9-17 have a diagnosed anxiety
disorder, another 6.2% have a mood disorder and 10.3% have a disruptive behavior
disorder (Commission on Risk: 76)

A growing body of research finds what those of us in group care already know, i.e.,
children entering out-of-home care are more disturbed than in the past. Group care’s
response has been to take these programs, therapies and approaches that have had
limited success, and that work best with children who reside in functional family
situations, and use them as the primary means to serve the most difficult children from
dysfunctional families. The result is often children being discharged from group care
programs that recently admitted them with the recommendation that these children need
a more intensive service or a locked facility.

There are many days when group care executives and their management staff are not
able to execute the effective service they articulate in their brochures because the
programs they operate lack consistency with their program philosophy and faithfulness
to their CEO’s vision for the organization. The root cause of this problem is the
conceptualization of it as having to do with difficult children when in reality it is an
organizational problem. What is needed to improve service effectiveness in group care
is an organizational philosophy and operating methodology that can assure staff
consistency and fidelity to the uniqueness of a child-serving organization’s identity,
mission, values, beliefs and philosophy of intervention.

The Solution
Such an organizational approach has been developed out of 20 years of evidence based
practice known as Transformation Education, also known as TranZed. TranZed is an
organizational philosophy and operating methodology designed to help CEOs achieve
their vision in a child-serving organization. It was conceived by asking the question of
those of us that provide group and out of home care “What business are we in?” The
answer is the transformation and growth business. We say this because our job in group
care is to accept referrals of behavior disordered children and return them in a way that
others can manage them and that their growth and development is no longer arrested. TranZed is rooted in theory bases associated with organization, anthropology, complexity, cognitive dissonance, neuroscience and experiential education. The primary tool TranZed uses to re-educate the behavior disordered child is to develop a culture as strong as the culture that created the child’s dysfunctional behavior. However to achieve this end one must first be able to do three things.

• Harness the power of culture.
• Design a child-serving organization in a brain compatible way.
• Get the organization’s employees to think and act in accord with the organization’s programmatic philosophy and the vision of its CEO.

Harnessing the Power of Culture
Group care has never really understood the concept of the milieu and neither did Fritz Redl. If one re-reads Redl’s paper “The Concept of the Therapeutic Milieu” it is obvious he did not understand how the milieu actually worked. He states:

I, for one, would want to explain loudly what I didn’t dare whisper at the start of my paper, or I would have scared you off too soon. I would like to find out not only what milieu is and how it operates, but also how we can describe it, how we influence it and by what actions (is it) created or molded. At the moment I am convinced of only one thing for sure- we all have quite a way to go to achieve either of those tasks. (Whitaker & Trieschman: 70)

So the key to developing a therapeutic milieu is understanding what culture is, how it is learned, how it is transmitted and its relationship to how the human brain operates. Once this understanding has been put forth we will share with the reader how to design a group care organization in accordance with this understanding to create more effective group care organizations and the outcomes that can be achieved from doing so.

What is the milieu?
When we speak of milieu we are really speaking of culture. Culture is the most powerful force available to group care organizations for transmitting pro-social values and transforming both the child’s and the staff’s mindset. Charles Case in his book *Culture the Human Plan* states that:

*Culture penetrates and shapes every human life, engulfs each person totally, overwhelmingly. Yet, people are seldom aware of its existence. They do not understand its effect upon their lives and their behavior. But they believe they act out of their own private independent volition, out of whims and fantasies and their own individuality. Culture has been misunderstood, confused with customs and traditions, folkways or mores; its significance has been concealed and its role in human live overshadowed by the emphasis on psychological process.* (Case: 16-17)

So in essence culture is an elemental force like gravity that cannot be seen, smelled, tasted, felt or heard, but its effect on us is profound and continuous. This is what makes it easy to overlook. Few of us think of gravity on a daily basis. We most often discuss it in terms of science and space. Yet, it is what provides the very air we breathe, holding our atmosphere to the surface of the earth. Gravity affects every aspect of our daily
living from why milk pours to how our hair behaves, yet we seldom give gravity a conscious thought. We accept it as a static condition rather than a dynamic force. So it is with culture.

Case goes on to define and describe culture as:

In a very fundamental sense, culture is the most human part of man’s existence. It encompasses those aspects of being that are learned, those regularities that are acquired, as things that are gained through association with other humans. It is the social heritage that has developed out of the biological responses in the life process. It is the web of relationships holding people together in various viable groups. It is the structure of predictability in the behavior of the members of society, which tells each person who he is and who other people are. It provides the techniques for dealing with life’s problems, and for directing the shape of one’s existence. . . . Culture . . . is a guiding system, a behavioral map, a grammar of behavior that leads one to places unsuspected, by paths unknown, and perhaps even against one’s will. It is constantly present working to shape behavior in its outward form.

How culture is learned.
Culture must be learned from living, it is not learned through being consciously taught. It is commonly known that infants do not arrive in the world knowing the rules of a culture. All infants must learn the rules and meanings of their culture and shape their behavior accordingly. Learning one’s culture comes from the input received through the senses of taste, sight, hearing, smell and touch. However, approaching the senses as physical phenomena is like discussing radio channels without listening to the music. Of prime importance is not the mechanics or logistics by which music is transmitted from a radio station to our ear. What is of utmost importance is the effect of the sound on our emotions, our behavior, our understanding of the culture and our relationships.

Our senses are carriers of messages both individually and in combination. When drinking hot chocolate our senses integrate the experience: the sweet chocolate taste, the heat on our tongue, the feel of the cup, the warmth as we swallow, the smell that enhances the taste and the visual sight of chocolate liquid. Together these senses integrate in our brain with our current environment and past experiences and stimulate a sixth sense. This sixth sense, integration, is one of the most critical senses we have, especially in developing an understanding of cultural messages and nuance. Integration is the central sense we use to interpret context and symbolic meaning.

How culture is transmitted.
We might think of the means by which culture is communicated by comparing it with the transmission of television messages. We seldom stop to think that we are living in a sea of air and in a sea of energy waves. We are immersed in an atmosphere filled with TV signals being "broadcast.” While we cannot see, hear, taste, or touch them, we can detect and interpret them as video and audio through use of an antenna and a TV. Cultural messages, like broadcast television messages, are transmitted continuously and fill our environment.

When it comes to culture, we are all endowed with extraordinary fine antenna and
receivers. Our senses act as the antenna and our brain as the receiver. In the real world, we are subject to more than TV signals. We are continuously bombarded by numerous energy waves (heat, light, magnetic, electrical, etc.) acting upon us at the same time. Culture is made up of numerous forms of transmitted messages. Through our sixth sense, integration, we convert, integrate and decode the messages. Children have the most sensitive antenna, keenly receiving and interpreting the cultural messages we transmit.

We do not claim to have a complete understanding of all of the various cultural transmitters or messages, but we have developed a framework for understanding how such messages are transmitted. After many hours of intense discussion and years of organizational design and development, we have found the primary organizational transmitters to be: systems, people, physical environment and program/curriculum.

These organizational transmitters are comprised of nomemes. A nomeme is an anthropological term that means the smallest meaningful unit of cultural communication. In essence, they are the cultural equivalent to DNA, the code inherent in biology. However, nomemes are probably the most complex of all the codes, as they provide individuals in society general and detailed instructions for enacting concrete behavior.

For our purposes, we define the word nomemes to mean messages. These messages are enduring self-instructions that enable a person to behave and which give the individual’s activity consistency and group behavior its commonality. For example, an uncut apple pie sitting on a table at a dinner party at the home of a corporate executive sends the message each guest will be served a piece of pie. That same pie on a table at a residential cottage for economically and emotionally deprived behavior disordered boys sends a message of threat of deprivation, i.e., the other boys will get/take more than their share and everyone will not get pie.

This means that to create a therapeutic milieu CEOs of group care organizations must place the conscious design of culture at the center of their work rather than at its periphery. Saying this has profound implications for how CEO’s and their staff design and operate group care programs.

**Culture’s Relationship to the Brain**

Before we can continue our discussion about the milieu it is important to take a short detour to understand some basic facts about the brain. The brain is well connected to 40 quadrillion synaptic connections. Given that employees and children have brains; it is essential that group care organizations design their cultures to be brain compatible. This means the systems, physical environment, program, staff and outcomes need to be connected, i.e., aligned with the mission given the brain desires integration and connectivity.

The human brain seeks meaning. This is why many human beings believe bad or good luck comes in threes. For example, if it rains whenever you wash your car you assume
waking your car makes it rain even when you wash your car and it doesn’t rain. Most humans attribute meaning to hardship or to success. This is the brain seeking meaning. Therefore, it is important for the organization and its employees to think in context of the situation rather than be rule oriented. Likewise it is important to design the program around the needs of the child rather than require the child to fit the needs of the program. If management decisions are arbitrary and staff interventions are not delivered in context of the situation the decisions and interventions do not meet the brain’s need for meaning. Consequently, the effectiveness of the directive or the intervention is less potent.

The brain seeks challenge. When the program lacks challenge children are bored. Their response to the boredom is to engage in the activity they know best, that is, socially inappropriate and/or delinquent behavior, and/or aggressive play. When the brain is not challenged or challenged beyond its ability to meaningfully engage it has a tendency to day dream or “zone” out.

The brain learns through redundancy. Doing things over and over again correctly creates skill and doing them over and over again unsuccessfully creates dysfunction. Redundancy is best explained by a commercial aired by the National Football League. It states “Amateurs practice till they get it right. Professionals practice so they never do it wrong!” The brain learns through trial and error and repetition, so if group care just explains to staff and children rather than practices experientially what it wants them to learn it is not meeting the brain’s need for redundancy.

The brain seeks contrast. This is why we can take only so many hours in the museum or why we get bored during a lecture given with a monotone voice. The brain’s need for contrast can be met by an organization if it provides an experiential program and creates an environment and a program that is constantly changing to meet the staff and children’s need for variety. It needs to be a happening place.

When the staff or child’s brain is learning it is creating memories. To create a memory, the brain undergoes actual physical change. In its simplest sense, learning is the creation of stored memories that can be retrieved and applied in reaction to emotional or sensory stimulus. The physical changes occurring in the brain as these memories are manufactured provide important insight into the power of culture for establishing patterns of thinking.

Our brains are predominately made of nerve cells called neurons. It is estimated the human brain contains tens of billions of neurons. These abundant neurons communicate with each other by releasing molecules known as neurotransmitters. Most learning occurs through neuron-to-neuron communication via the discharge and reception of neurotransmitters between neurons. A neurotransmitter is a chemical substance that is released from one neuron to another. The chemical carries information that creates emotions, i.e., fight, flight, attraction, etc. and sends messages to muscles, organs, and tissues which tell those parts of the body how to act. When a neuron is stimulated, it sends an electronic message out from the cell body and passes it on from
cell to cell in the brain. A circuit is formed from the connection of multiple neurons communicating the message. This is a memory circuit.

In addition to neurons, another type of cell found in the brain is the glial cell. Glial cells perform several important functions in support of the neurons. One of these functions is to form a layer of insulation around the axon (carries the cell's own neurotransmitters to other neurons), much like the insulation placed around an exposed pipe to keep it from freezing in the winter. This insulation around the axon is known as the myelin sheath. The myelin sheath thickens as the neural circuit is used to transport the same messages. The thickening of the myelin sheath is similar to the construction of a superhighway in that it both increases the speed and accuracy of the objects traveling across it. A circuit of neurons frequently carrying the same or similar messages will form a formidable superhighway with heavily insulated myelin sheaths to process impulses through the circuit with lightning speed and substantial power.

These "neural networks" are the foundational structures through which our brain processes new events or objects. The establishment of these neural networks literally changes the physical composition of our brains. Once established, these powerful networks combine to process all new information coming into the brain from the outside world by relating the new information to the memories or learning constructed in the neural networks.

Children have powerful neural networks that reflect their adaptation to their own culture. Since the chief concern of childhood is physical and emotional survival, children are particularly attentive to cultural messages and construct strong neural networks as they learn to navigate the values, expectations and behaviors modeled in the culture. Children's brains are hardwired to their culture; they have physically adapted by forming neural networks based on their perception and interpretation of the specific cultural demands placed on them. The deep entrenchment of the beliefs, values and behavior of their respective culture is as biological as it is psychological.

Neuroscience has uncovered an essential truth; the human brain is hardwired to seek connection with others and for understanding moral purpose and ultimate meaning. However, for that to happen we need a receptive social environment. The Hardwired to Connect study published in 2003 found that social environments matter. They can impact us at the cellular level to reduce genetically based risks and help to transform such risks into behavioral assets. They can also help substantially raise intelligence and measures of intelligence” (Hardwired to Connect 2003: 21) … “The new scientific findings indicate that “… (the) social environment can change the relationship between a specific gene and the behavior associated with the expression of that gene. Changes in social environment can thus change the transcription of our genetic material at the most basic cellular level.” (Hardwired to Connect: 19)

The study discusses how the brain is hardwired to connect to other people and to moral meaning. Meeting the brain's basic need for this connectedness is essential to health and
human flourishing. If child serving institutions are organizationally dysfunctional, (i.e., lack connectedness and meaningful experience) they will not meet the children’s need for connectedness and cannot effectively serve them. What is required for children, who do not get this need met in their family or school, is an organization that lives out the types of connectedness that the children have been deprived of experiencing.

What this means.

Behavior disordered children strongly hold their beliefs valid and their own view of reality as accurate. They have learned their mindset from the experience of living in their personal culture. They have established a mindset regarding reality and the principles used to manage it, and behave in accordance with those principles. The children are referred to group care because they have dysfunctional behavior. This dysfunctional behavior is very difficult to change because it has been practiced over and over again in the same way that we know $2 + 2 = 4$. It is so ingrained in us it is automatic. The biological reason for this is explained above, i.e., the myelin sheath, or the covering of fatty tissue over a brain circuit that insures the child will react from the culture of dysfunction because he or she has created learning circuits consistent with that culture, i.e., be oppositional, react aggressively.

Therefore, the milieu must be designed in such a way to create new learning circuits for pro-social ways of thinking and acting that are so powerful, i.e., heavily coated with myelin sheath, to assure the child has two ways of behaving. This is tantamount to learning a second language. When you speak two languages you can use either your native language or your second language based on the context of the situation you find yourself in. When this occurs the brain physically changes by increasing the number of learning circuits, i.e., neural connectors. By immersing children in a pro-social environment, the brain’s remarkable capacity to learn and adapt can result in substantial, long lasting and positive change.

Getting the Staff to Think and Act in Accord with Your Model and Vision

Over the past 50 years group care has placed an emphasis on therapy rather than using the milieu to acculturate the child. Consequently each group care organization is somewhere on a continuum from a dysfunctional milieu to a therapeutic one on any given day. The group care organizations that reside at the dysfunctional end of the continuum most days find it difficult to become a more therapeutic milieu. This is so because their leaders and the professional staff employed have created learning circuits that assure they operate from assumptions that are contrary to what is needed to establish and deploy a therapeutic milieu. In essence the managerial and professional staff are blocked by the same biology, that is the myelin sheath of fatty brain tissue covering circuits created by years of practice consistent with a medical or social control model. Therefore, their focus is on the child’s behavior rather than the connectedness, integration and meaningfulness of the culture created by the organization and its staff. The assumptions held by organizational leaders and professionals that block the formation of a change and growth oriented culture (therapeutic milieu) are listed below.
Assumption: The culture of group care is functional and therefore, healthier than the dysfunctional culture that created the social and emotional problems the child is experiencing. This is only partially true. The organizational culture in child-serving organizations and schools designed to serve emotionally disturbed children is an improvement over the dysfunctional culture the children come from, yet group care organizations still have many dysfunctional elements. The child often receives inconsistent messages from staff. If a group care organization experiences high staff turnover inconsistency is exacerbated resulting in policies and procedures not being carried out as designed. The group care organization’s philosophy may speak of caring and nurturance but the physical environment, systems, and staff mindsets espouse social control. This incongruity is more than problematic. It results in reinforcing the very cultural messages and mindset of dysfunction, power and control that brought the child to group care.

Many child-serving organizations are far from being as effective as they could be because they do not spend the time needed to connect the values and beliefs inherent in their mission statements to every aspect of the organization. Without an integrated approach, fragmentation, dysfunction and inefficiencies result. Management spends far too much of its time and resources resolving crises rather than providing the necessary organizational support that the staff needs to promote change and growth in the children they serve.

Assumption: The culture of an organization designed to serve emotionally disturbed children should focus on treatment. This assumption emanates from the understanding that the children are “at risk,” therefore vulnerable and in need of special instruction, medicine and counseling. It takes specialists to provide the special instruction (special education teachers), medicine (nurses and psychiatrists) and counseling (social workers, psychologists, occupational therapists). The organization is viewed as a container to hold these professionals and provide the supports they need to “fix” the child. This is not to imply that children in group care do not need the expertise of the aforementioned professions.

This focus is necessary but not sufficient. It does not account for the fact that the professional staff spends little time with emotionally disturbed children. The children spend most of their time in group care with untrained care givers who lack the experience and training to understand and effectively deal with the aggressive and challenging behavior children referred to group care present. These individuals often react to behavior in a way that is punitive and arbitrary. Instruction falters behind efforts to control behavior.

Therefore, the adults they need to pattern their thinking and behavior after are not consciously designing or presenting the culture needed for the children to experience it in a way that is connected to the development of new skills. Because of the lack of purposeful design of the culture and the quality of the experience, the children spend their time in activities that do not have the power to teach what the organization wants them to learn. In essence, it is like spending an hour a day learning how to swim; only the instructor is giving lectures on how to swim rather than trying to teach you while you
are in the water. The result is fewer students in the class will learn to swim from the didactic approach than could have learned from the experiential approach.

Creating an Organizational Culture Focused On Transformation
In order to create an organizational culture in group care focused on promoting change and growth in children, a CEO would need to take his/her organization and turn it Upside Down. What does it mean to turn an organization upside down you ask?

Design group care to carry out its business.
Every manager has heard the story of why railroads declined, i.e., they viewed themselves as being in the railroad business rather than the transportation business. This is, in fact, what is happening to group care organizations. They view themselves in the business of treating emotionally disturbed and delinquent children rather than in the transformation business.

An organization that believes it is in the business of treating emotionally disturbed children uses the organization as a container to hold the professions (i.e., social work, psychiatry, education, child care, etc.) that focus on changing the child. The idea behind the organization is that the organization hires professionals, provides them with the resources and facilities they need to foster change in children, and gets out of the way so that the professionals can do their jobs.

Changing behavior implies substituting one way of acting for another. The focus is on changing the child. This type of thinking is based on a medical or social control model. The assumption at the core of an organization designed in this way is that the child can be returned to healthy functioning. However, rehabilitation is not possible for children who have not experienced or learned how to function in a socially acceptable way. This stems from the fact that most children referred to group care were acculturated to function in a way that helped them survive, be successful in a dysfunctional environment or to cope with their mental illness.

In order to establish a successful therapeutic milieu (culture) the organization needs to be designed to dispense transformation not treatment or change. This is because transformation focuses on changing attitudes, beliefs and values, whereas, change replaces one behavior with another. This difference becomes readily apparent when one thinks about government. A benevolent dictator is a change over a malevolent one. However, a transformation comes about by replacing a dictator with representative democracy. All the political structures are different. The systems are replaced not changed. Group care has the same need for replacing its system thinking if it is ever to implement a therapeutic milieu and maximize its effectiveness.

Focus on transforming the organization and the staff not the children.
The transformation of the children is a byproduct of the transformation of the organization and the staff it employs. In order for an organization to design itself to dispense transformation it needs to align its beliefs, systems, program/curriculum and people so that it can create and sustain a culture that fosters transformation and is
The Pillars Under-girding Transformation Education

Pillar number 1: Beliefs.
One cannot create a therapeutic milieu without beliefs that foster transformation. Currently the foundational beliefs of most group care organizations are consistent with linear thinking of the industrial and scientific systems of which we are all products. To achieve life’s goal in this model one adheres to the belief that the shortest distance between two points is a straight line. This mindset results in a problem for staff as they adopt the unrealistic expectation that logic and simple solutions are all that is needed to transform the emotionally disturbed or delinquent child. The beliefs that are consistent with transformation are:

Life is a journey. Life is a journey of personal growth ascending from a focus on self to a focus on family, community and the world, in essence from selfishness to selflessness. This belief is consistent with how the human brain is hardwired, i.e., to seek and make connections with other people and to seek meaning. Therefore, the core belief of an organization with a therapeutic milieu is designed to create brain circuits that transform a child’s focus on oneself and place it on expressing commitment to community and a cause larger than one’s self.

The metaphor that we feel most accurately reflects the reality of the life journey is the bumper car. In this model, we start with the initial intent of reaching the destination or goal. As you head for it via the straight-line method, another bumper car (increased mortgage rates) heads at you from the side. You collide, and like billiard balls, both bounce off each other and head in a new direction. Just about the time you get your bearings and readjust your course, another blow (you decide to
get married...again) blasts you off in a different direction. But what’s this? Just as you moved into position to shoot the gap, you were squeezed out and hit from behind! As you steered right and hit the accelerator you careened off the wall and bypassed the hopelessly jammed up cars that squeezed you out moments earlier. Finding your bearings, you are moving fast in the opposite direction from which you initially started but the scenery here isn’t so bad, and the ride is exhilarating. Let’s not go to the mountain top, let’s head for the shore!

The bumper car metaphor illustrates a dynamic and rapidly changing environment where you are neither entirely in control nor out of control. Control is not the central issue. Control is a concept arising from the linearity of the industrial age. When we ask for a definition of the zigzag in the sketch, invariably we get the response: “CHAOS!” Life is chaotic! We cannot predict when we are going to be bumped, nor can we, in many cases, do much about it. This is not to resign ourselves to fate, but rather to realize we always have control of how we respond to what life presents us. Our sense of reality shifts.

After determining that our journey appears chaotic, i.e., having the appearance of chaos (which is quite distinct from being in chaos) the next question is: “What is the factor which keeps it from being chaotic?” Let us examine this bumper car excursion. First, there is a goal. It is the goal of trying to move from being selfish to selfless, a goal focused on serving a cause larger than one’s self. Finding a moral direction means we must face the varied situations life presents us. How we exercise judgment and hone our values are the keys to personal, spiritual growth. The bumper car model illustrates the type of journey we take to maximize our personal growth and development. Inherent in this journey of transformation from selfish to selfless are four other beliefs.

*Chaos is the norm.* In organizations where life is a bumper car journey, the seemingly chaotic is the norm, not the exception. Life is supposed to be this way! How else could life be in an organization dedicated to promoting transformation and growth in emotionally disturbed children? The key is to embrace it, not fight it. It is the pain of living. Life is a happening, an evolving situation filled with emotions that range from agony to ecstasy. We are not separate from life but a sojourner in it.

*Shades of grey.* There are seldom situations in which there are only two alternatives with absolute moral clarity between them. If this were the case, life would indeed be simple as well as unchallenging. We would also be unable to produce moral and spiritual growth. It is precisely in the continuous effort of attempting to apply our values to the situations we face (choosing based on our analysis, living with the choice and then re-evaluating) that we refine and hone our moral sensibility and set of values. This is the essence of shades of gray. We are faced with thousands of possibilities and hundreds of choices every day that are neither black nor white, but gray.
Crisis is opportunity. Crisis is the stimulus that creates the need to make the decisions that lead to change and growth. Growth comes as children and staff struggle to master crises and solve problems. It is the positive force through which we develop wisdom. Good decisions come from experience. Experience comes from making bad decisions and being willing to learn from them!

Everything is connected. The ecology movement has helped us to understand that all life on this planet is interconnected in countless, profound and subtle ways. As we grow spiritually, we come to recognize that it is the stretching of the emotions that provides the depth. Without great sadness, there cannot be great joy. Without agony, there cannot be ecstasy. This is at the heart of holism and interconnection. It is seeing the relationships that bind them together. It is recognizing that everything is interconnected.

Pillar number 2: Systems.

To create a therapeutic milieu an organization’s systems must express beliefs consistent with its purpose, i.e., transformation. Systems are not simply designed to accomplish the organization’s production goals in the most effective and efficient manner. Systems themselves radiate the assumptions and beliefs of the culture. For example, life as a journey has many norms and few rules because there are shades of gray and behavior happens within a context. Therefore, a prescriptive approach to serving children is not consistent with this belief. We will provide a detailed explanation of a system that is designed to inculcate the aforementioned beliefs that foster a transformative culture in a group care organization, i.e., the culture card system. While the length of this paper does not permit us to describe all of the systems designed to communicate values we will briefly summarize several of them.

Culture Card System: The culture card system is an effective tool for ensuring there is a clear and consistent method for communicating the expectations for organizational and staff behavior that is integrated into the daily thoughts of staff. Printed on the culture card are the foundational beliefs, values, workplace expectations, problem solving process, organizational assumptions, and mission of the organization. Employees are expected to carry the culture card with them for ready reference.

A culture card meeting is held daily for no longer than 10 minutes. A manager discusses one of the principles on the card. This same principle is reviewed by all programs and departments so that every employee in the organization receives the same message daily. The manager presenting the message discusses how the principle is manifested in the organization and applied to an employee’s particular area of responsibility. Staff working in group care hold their culture card meetings at the time of each shift change, so they repeat the same culture card meeting three times per day.

Communication Systems: Our clothing, our hair, how and what we eat, how we walk, the dynamics of our meetings, and how our organizations solve problems speak volumes! It is important to evaluate all these factors for the messages they send in. These are the vehicles that alter the structure of a child’s mindset, and are the primary tools of
influence. Other primary communication systems that need to be aligned with transformational beliefs are nomenclature and the pattern and content of the speech and language used by staff and children. For example, the language is normalized through educational rather than medical or correctional jargon so intake becomes admission, placement - enrollment, discharge - graduation or commencement, AWOL - absent, therapeutic milieu - culture, children – students, and program - curriculum. Children and staff are expected to use proper English, to put endings on their words, and not to use slang. The staff are also expected to correct one another’s English and the content of their speech to send the messages of the importance of self discipline, quality work, high expectations for performance and civility in achieving success in the workforce and in life.

Recognition Systems: The core activity of the culture (therapeutic milieu) is to create and maintain a culture that promotes transformation and growth. One way of promoting this is to create recognition programs that highlight and recognize those who embody or display the organization's beliefs. Therefore, if the organization values expertise and skills, courage to challenge colleagues and peers, anticipation of behavior or opportunities, or professional and personal growth it needs to establish rewards to recognize staff members and children for exhibiting these behaviors. In this way group care sends the message of what it values to the children and its employees.

Staff Development System: At its core, staff development’s function in a transformative and growth producing culture (therapeutic milieu) is to minimize the time between an employee’s initial introduction to the culture and the employee’s positive contribution to that culture. Growth and transformation in the organization is fostered through the intentional creation of a pro-social culture, which bombards students with the values, life skills, and character traits necessary for success in life. This culture is created through an integration of the organizational beliefs, physical environment, the mindset of the employees, the design of the curriculum (program), and the operational systems. The staff creates, models, and maintains the cultural messages in each of these areas. Therefore, it is essential that the focus of the staff development program is aligned with the organization’s beliefs and staff are assessed to determine if they have both learned and can execute the content of training received.

Pillar number 3: Environment. All life on this planet is connected in profound and countless subtle ways. Culture is the most powerful force available to group care for transmitting pro-social values and transforming mindsets. A transformational culture (therapeutic milieu) results from conscious design and maintenance of the physical environment and how it is furnished, accessorized and landscaped. Winston Churchill once said that first we shape our buildings and thereafter they shape us! Prisons do an excellent job of matching their physical environment to their program philosophy. A prison says: you have lost your freedom and independence. We will control you. The physical aspects of the environment are consistent with the purpose of the facility. The design of the prison structure is so effective it even controls the staff. The guards are constantly reminded about the importance of security and control.
All environments have a message designed in them. Schools were designed to prepare workers for the Industrial Revolution. Subjects and curricula were designed to be taught in a sequence in a compartmentalized way. Desks were bolted to the floor in rows in an assembly line fashion. To standardize the classrooms, procedures dictated how many lumens would light the desktops. This was an assembly line design for education. It prepared the population to work in an industrial age. We are now in a global age, where the social, political, scientific, economic and business institutions are in a turbulent environment. Knowledge is exploding at an exponential rate. This requires organizations such as schools and other child-serving organizations to redesign the messages in their physical environments. The building design now must be in sync with the world our children live in. The message of the future is "connectedness." This message is the other end of the spectrum from assembly line or reductionistic thinking. Connectedness translates into visible connections between purposes and everyday learning experiences.

Many child-serving organizations continue to "dress" and design their organizations to send messages of a control and rule oriented approach to life. Just as our language, behaviors and practices radiate a powerful message, so does the physical environment. A therapeutic milieu that has the power to transform behavior expresses caring and promotes struggle. The physical environment promotes struggle when it sends a message that challenges, overwhelms or creates culture shock to the mindset of the child. This heightens awareness and interest. A challenging experience motivates learning and fosters retention of the learning. Imagine being faced with all that silverware and all those dishes, at a formal dinner and not knowing what to do. In a situation like this, the environment grabs your attention. You scan the table setting. You are motivated to learn and expand your level of sophistication.

The majority of children referred to child-serving organizations come from poverty backgrounds and live in a “black and white” world. Those more advantaged have the experience to see shades of gray. Problem solving ability and the capacity to see alternatives and gradients offers an advantage in today’s world. The ability to see more shades of gray, i.e., increased sensibility, is developed through everyday experiences with sophisticated environments. The more sophisticated, varied and challenging the environment, the greater the opportunity for learning.

When dealing with emotionally disturbed children from low income backgrounds, the organization needs to send messages to the child.

- “We have high expectations for you.”
- “You are a valued person.”
- “There are so many beautiful things in the environment that require you to exert control over your behavior.”
- “You can succeed and will be successful.”
• “We foster creative problem solving here.”

A more aesthetically appealing, challenging and interesting physical environment helps to make the child act in a less primitive way.

Pillar number 4: Curriculum.

A transformative and growth producing culture (therapeutic milieu) focuses on strengths not deficits, education not treatment. Consequently the program should be modeled after a private boarding school not a family or a hospital. Keep in mind families are there for you, whereas, when most staff leave group care they are never seen or heard from again. Group care is no family. We want to stimulate growth and direct change by presenting novel experiences for children to process. This is achieved through the use of a master curriculum comprised of eight focus areas. We use the word curriculum as opposed to program to convey the educational nature of the boarding school and its strength based, skill focused approach. As already mentioned this is done as a means of moving the staff away from a mindset that fits thinking and intervening within the context of medicine or corrections.

*Emphasize The Normal:* Children in group care are referred to as students, not residents; staff are faculty; child care workers are educators; clinical staff are student advisors and supervisors are educational coordinators. Consequently, the living units are viewed as dormitories, the activities as classes and students have requirements and electives. It is assumed that children learn through play, socialization and work experiences. Activities are considered as equivalent to math, science, history or language classes in an academic school. Therefore, activities in the curriculum are not withheld from a student for they are the vehicle that teach, socialize and expand perspectives; they are not viewed as rewards as they are in a medical or social control model.

The intensity of the cultural expectations creates enormous pressure on each student to develop a new mindset or worldview. This level of heightened interest derives from the activities of the boarding school environment and mentoring by an education directed staff. As the pressure on the student increases, the student will quite naturally react strongly, angrily and aggressively. This is a key indicator that he/she is struggling to understand and ultimately adopt a different mindset. After all, that is our purpose—growth and transformation.

*Emphasize Connectedness:* Another major tenet of the curriculum is that life reflects the connectedness of the Universe. The faculty offers the curriculum in an integrated way. Every activity has a social, spiritual, emotional, physical, aesthetic, vocational, intellectual or cultural dimension. When we plant a garden, there is a spiritual perspective, that is, the harvest and the life force that makes plants grow. The vocational aspect deals with a small scale agribusiness, the need for transportation, the types of jobs needed, and the commodities to be marketed. As we work the garden, there is an aesthetic perspective for our students to consider, organizing the rows and weeding around the vegetables.
**Emphasize Experience:** The curriculum is experientially based so it adheres to the principles put forth by the Association of Experiential Education. Experiential education is a philosophy and methodology in which educators purposefully engage with learners in direct experience and focused reflection in order to increase knowledge, develop skills and clarify values.

**Curriculum Components:** The primary components of the Master Curriculum consist of nine focus areas, which overlap with one another. These focus areas include: Spirituality, Wellness, Enrichment, Careers, Cultural Arts, Leisure and Recreation, Study Skills, Citizenship, and Life Skills. The goal and general content of each focus area is presented below. In reality, each focus area is a book in and of itself. Therefore, what follows is intended to provide a brief understanding of each component.

The Spiritual component is designed to foster connectedness to community and meaning, two primary needs of the brain. The vehicles used for this purpose are service learning, pets and plants, worship experience, values clarification, human sexuality and adventure based programming such as camping, ropes courses and spelunking.

The Wellness component emphasizes an integration of mind and body. It includes traditional therapies designed to enable the youth to work out their inner feelings. Wellness encourages, through example, the maintenance of health and the prevention of illness through stress and anger management, friendship development, physical fitness, nutrition and understanding of the normal growth and development process in individuals.

The Enrichment component emphasizes the maintenance of an appealing living environment and exposes students to the principles of housekeeping; interior design; presentation and preparation of food, and ideas for decorating and generating enthusiasm for the holidays, seasons and special occasions.

The Careers component provides students with the opportunity to explore the world of work and gain an understanding of the educational requirements and economic potential of various careers. There is also an emphasis on the work ethic, developing work skills and gaining an understanding of what is and is not quality work.

The Cultural Arts component emphasizes self-expression and gaining an appreciation for the customs and traditions of members of the global community. This is accomplished through drama, music, experiencing cultural traditions and art.

The Leisure and Recreation component provides students with a laboratory for testing out and experimenting with new ways of relating with peers, adults, and the
environment. Planning for these experiences is done within the context of creating opportunities for both individuals and groups. Individuals are provided various lessons unique to their talents and interests such as music, golf, acting, scouts and sports. Group activities provide opportunities for students to learn to plan activities, be involved in decision making, compromise, share their opinions, and to experience the results of their planning. Summer vacations and trips are utilized to help students broaden their view of their city, state, region and nation.

The Study Skills component supports the student’s educational program through employing the services of a special education teacher to assist students in developing study skills and to assess learning deficits and problems. The special education teacher uses the faculty on duty as teaching assistants to help students complete homework, practice academic skills and prepare for the content of the next day’s lessons.

The Citizenship Development component teaches healthy and appropriate dissent, the importance of civic duties and how to advocate for community change. Students learn how to run weekly house meetings using Robert’s Rules of Order, to properly advocate for their own interest and use conflict resolution skills to deal with problems between students and staff.

The Life Skills component teaches students the skills necessary to maintain their health, achieve social acceptance and self-reliance. This is achieved through good grooming and hygiene, understanding that one’s wardrobe is selected in accordance with one’s body type and coloring, the proper way to clean and care for rooms, windows, carpets, floors and vehicles, social graces, and independent living skills.

Assessment is a major component of the boarding school model. Therefore, each of the curriculum components has a rubric assigned to each of the activity courses in the nine curriculum areas to assess mastery. Faculty need to assess students regularly on their progress toward mastery in each area. For example, a rubric in the Spirituality Curriculum might focus on the activity course of Service Learning. Students would be required to demonstrate mastery by participation in a group service project, participation in an individual service project, and creation of a service project through which the group home and/or individual student benefited the community.

The rubrics provide both students and faculty with clear expectations for demonstrating competence in each curriculum area and students receive regular, feedback about their efforts and progress. Mastery of a particular course and ultimately an entire curriculum area provides a natural opportunity for celebrating success and accomplishment, increasing student self-esteem, confidence and motivation. In addition, the assessment provides referral workers, family members and courts with more objective information on the progress a student is making in the program and, more importantly, the specific, demonstrated skills the student has mastered while in the program. This kind of
“measure” of student progress augments anecdotal reports and recommendations typically offered to summarize student progress.

Pillar number 5: People.

In an organization that promotes change and growth the focus of the employees would be on maintaining a culture (therapeutic milieu) that fosters transformation and growth. This can only occur if the employees understand and adopt the beliefs, values, expectations, and assumptions that foster transformation and growth. The employees must work diligently to ensure these values, beliefs, expectations, and assumptions are expressed in the culture. The management must work diligently to assure these beliefs, values, expectations, and assumptions are aligned and integrated in the organization’s systems, physical environment, program and its employees. This occurs when each level of management adopts a mindset that is consistent with a change and growth oriented culture. In such a culture leadership is what matters, not management. Leadership implies change to a different state. Management implies maintaining an existing situation (Bennis and Nanus: 1985)

The way the building trade is organized is analogous to the way the roles of the staff operate in a change and growth oriented environment. The chief designer of the building is the architect. To be a good architect, one has to possess a vision of what is possible. Therefore the CEO of a group care organization plays a role akin to the principal architect by operating from a visionary sense of the future and conveys this through the planning and problem-solving process. The CEO serves as the cultural monitor and recognizes that the organizational culture is the primary determinant of social behavior. This is so because the CEO largely determines if the employees mindset is consistent with the organization’s values and beliefs by the ways he/she designs the organization’s systems, its physical environment, program and the expectations she/he establishes for how the staff are recognized, think, problem solve, dress, speak, name things and are trained. The executive management’s role is similar to that of a general contractor, i.e., they integrate the various departments with one another. The professional staff such as public relations coordinator, accountant, quality improvement coordinator, and support staff play the roles reminiscent of the skilled trades’ people and the labor pool.

This same organizational structure is replicated throughout the programmatic component of the organization. The executive manager responsible for the programs plays the role of general contractor and integrator of the program services. The middle management staff has the responsibility for integrating and coordinating the work at the growth planning (treatment) team level. They also serve as construction site supervisors to help manage the everyday problems that arise and serve as quality control experts. The professional staff serve as representatives of the various trades and the direct care staff and support staff serve as the labor pool, who are responsible for carrying out assignments given to them by the trades’ people and the work site supervisors.
Outcomes

The results of turning one’s organization upside down indicate the power of a milieu approach. On a year by year basis, the road to complete implementation is not a consistent upward trend in success. In 2002, this concept of the therapeutic milieu was successfully implemented in our group home program. It had been a very rule oriented, rigid place for children before the changes. The results were dramatic.

Direct care staff turnover dropped from 188% in 2001 to 86.4% in 2002; to 24% in 2003 to; to 13.8% in 2004 and to 29% in 2005.

A visible indicator of the impact of having a transformational growth oriented culture (therapeutic milieu) is the decline of property destruction of the physical plant. In 2001 maintenance and repair costs were $101,881 and in 2002 they dropped to $43,447. In 2003 they dropped to $29,002 in 2004 they were reduced to $10,500 and in 2005 they fell to $2,500.

Another indicator used to determine the impact of the therapeutic milieu was the cost of staff recruitment. In 2001 it was $33,800 and was $4,800 in 2002. In 2003 staff recruitment remained stable at $4,858 but was reduced to $2,347 in 2004 and returned to the levels of expense in “02” and “03”, i.e., $4,500 in 2005.

During these years occupancy increased from 89.8% in 2001 to 91.25% in 2002, to 100% in 2003 and went down to 94% in 2004, figure not available for 2005 due to lost data.

Total cost savings and revenue generation due to increased occupancy for a 16 bed operation (not including management time, opportunity time, workers compensation claims and time spent dealing with community problems and licensing) for 2004 revenue over 2001 revenue was $345,456 for the 3 year period. (Figure does not include data from 2005 due to aforementioned lost data.) This increase does not include any per diem increase due to any increase in rates.

We should also mention that prior to the implementation of a transformational culture (therapeutic milieu) it took weeks and sometimes months to fill a staff position. This resulted in the remaining direct care staff working a great deal of overtime hours with no time off. Now, we have a pool of workers willing to work if someone quits, is terminated, is ill or on vacation.

However, the true achievement of any group care program is how many children were returned to a less restrictive environment. In 2002, 7 out of 11 boys (64%) who were discharged moved to a less restrictive environment, with 3 of those 7 returning to their biological families and 4 to less intensively staffed group home settings. In 2003, 9 out of 10 (90%) boys discharged returned to a less restrictive environment. Three were reunited
with biological families 2 to less intensively staffed group homes, 4 to independent living, and 1 to a higher level of care. In 2004, 15 out of 15 boys discharged were returned to a less restrictive environment. Four were reunited with biological families, 10 to a less intensively staffed group home and 1 to independent living. In 2005, our director of group living retired and was replaced by a bad hire. This severely impacted the deployment of the milieu program resulting in 4 out of 10 students being returned to a less restrictive environment.

These results were achieved for any student who remained in the program for 9 months or longer and all students referred were acting out, challenging, aggressive, emotionally disturbed youth ages 13 to 18. Furthermore, these results were replicated in the three nonpublic day schools we operate that combined serve over 300 seriously emotionally disturbed students per year. Over the course of 9 years return to public school for stays of 30 months or more were 59% or 37% higher than the national average of 43% for return to public school for students diagnosed as emotionally disturbed.

**Summary**

Group care has been operating with the erroneous assumptions that the focus of group care should be on individuals rather than the organization and that the concept of the therapeutic milieu is understood by its practitioners. These assumptions have minimized the effectiveness of group care, resulted in inefficient use of resources and a great deal of management time focused on dealing with organizational dysfunction. The understanding of what the therapeutic milieu is, i.e., culture, and how it is transmitted has major implications for how group care organizations are designed and operated. It requires them to align the components of their organizations - their beliefs, systems, physical environment, curriculum (program) and the mindset of their employees, to be congruent with their business, i.e., transformation and child growth and development.

This will require group care organizations be turned upside down so that the focus of the transformation effort is not on transforming the behavior of the children it is on transforming the behavior and the mindset of the organization and the staff. By doing this CEOs and their management staff can improve their service outcomes, significantly decrease the time they spend reacting to crisis caused by organizational dysfunction, increase revenue, increase service effectiveness, foster organizational growth and create a flexible mindset in employees that permits the organization to readily adapt to turbulent economic and political environments and best practices. For an in depth discussion and practical suggestions on how to redesign group care organizations to be transformational the reader is referred to the book *The Upside Down Organization: Transforming staff to save the children.* This can be obtained by going to [www.tranzed.org](http://www.tranzed.org) or from [www.amazon.com](http://www.amazon.com).

**Bibliography**


