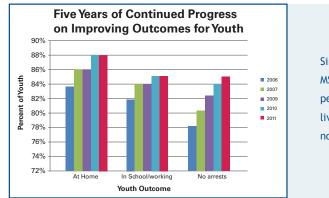


MST Progress Continues!

This report focuses on youth referred for standard MST from January 1 until December 31, 2011, who had an opportunity for a full course of treatment, e.g., cases were clinically closed*.

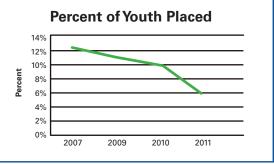
At Home	88%	*These results are based on the comprehensive
In School/ Working	85%	review of the 12,771 cases (88% of 14,500 cases referred for treatment) that were closed for clinical reasons (i.e., completed treatment, low
No Arrests	85%	engagement, or placed).

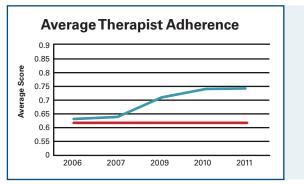
*Cases not included either refused services as indicated by their failure to have the first visit with a therapist (2.0%), were closed for administrative reasons (9.3%), or were not discharged by August 28, 2012 (0.7%).



Since 2005, when data reporting started, the MST community has shown progress in the percentage of youth at discharge who are living at home, in school or working, and have no arrests during treatment.

Over time, there has been a 51% decrease in the percent of youth placed during treatment. Considerable focus this year has been on developing new strategies to help underperforming teams.





Progress has also been made in the ability of therapists to implement MST with fidelity. The average therapist adherence score is .74, which is well over the target score of .61 that indicates adherent clinical practice.

The majority of youth were male (64%) with average age of 15.1 years. A diverse group of races and cultures was represented with most youth being identified as White (40%), Black (30%), or Hispanic (12%). A total of 15 languages were identified as caregiver's primary language. Referrals came from Juvenile Justice (45%), Social Services (25%), Mental Health (11%), Education (4%) and other sources (15%).





The data from the 12,771 cases that closed for clinical reasons were used to assess performance of standard MST programs* worldwide on the following key performance indicators, known as the MST Performance Dashboard. Of these cases, 19% (2,429) were served by international teams and 81% (10,342) received MST within the U.S.

ltem	Performance Indicator	Target	Overall Averages (SD)	Project Range (SD)***	
ULTIMATE OUTCOMES REVIEW					
1	Percent of youth living at home	90%	88.3% 63.0% - 100% (8.42)		
2	Percent of youth in school and/or working	90%	85.4% 54.3% - 100% (10.36)		
3	Percent of youth with no new arrests	90%	85.0% 50.5% - 100% (11.50)		
	THERAPIST ADHERENCE DAT	ГА			
4	Overall average adherence score**	0.61	.74	0.00 - 1.0 (.26)	
5	Percent of clients reporting adherence above threshold (> 0.61)**	80%	73.1%	24.6% - 100% (16.16)	
6	Percent of youth with at least one TAM-R interview	100%	90.5% 61.5% - 100% (9.66)		
CASE CLOSURE DATA					
7	Percent of youth completing treatment	85%	84.6% 54.7% - 100% (9.98)		
8	Percent of youth closed due to lack of engagement	<5%	5.7% 0% - 22.9% (5.73)		
9	Percent of youth placed during treatment	<10%	6.0%	0% - 29.7% (7.89)	
10	Average length of treatment in days	100-140	129.83	3 - 254.2 (41.47)	

* There were an additional 1,607 cases served by MST adaptation programs and closed for clinical reasons. See below for more details.

**Therapist adherence data were available on 11,559 youth.

***Key indicators were calculated by team. The Project Range represents scores within 3 standard deviations of the mean on these indicators achieved by teams with more than 15 cases.

Slow and Steady Growth

There was an overall growth rate last year of 3.8% in the number of MST teams operating in the world; however, growth internationally was 12%. This trend will likely continue next year with the implementation of a large expansion in the U.K. and in Chile. Another area of growth is in MST adaptations. These are variations in the clinical protocols that have been proven effective with other challenging clinical populations. See http://www.mstservices.com/MSTadaptations.pdf for more information.

NUMBER OF CLINICALLY CLOSED CASES SERVED BY MST AND ITS ADAPTATIONS

	MST	MST-SA	MST-PSB	MST-FIT	MST-CAN	MST-PSYCH	BLUESKY
Number of youth (%)		718 (5%)	695 (4.8%)	122 (.8%)	29 (.2%)	16 (.1%)	27 (.2%)

*MST-SA (MST for Substance Abuse); MST-PSB (MST-Problem Sexual Behavior); MST-FIT (MST-Family Integrated Transitions); MST-CAN (MST for Child Abuse and Neglect); MST-PSYCH (MST-Psychiatric Care); BlueSky (continuum of care with MST, Functional Family Therapy, and Multidimensional Treatment Foster Care).