



A case study: Bark and Cascade Academy

Empowering therapeutic independence
through real-world technology

Overview

Cascade Academy is a leading residential treatment program specializing in adolescent girls with anxiety and obsessive-compulsive disorder (OCD). Its clinical model is grounded in evidence-based care, trust, accountability, and the gradual development of independence.



As technology became increasingly central to adolescents' daily lives, Cascade was earlier than its peers in its willingness to explore ways to align digital access with its therapeutic philosophy without compromising safety, authenticity, or clinical insight. This approach enables Cascade to help its residents build resilience and independence in a world where digital access is a normal part of life, rather than removing the access and dealing with reintegration all at once.

Cascade partnered with Bark for several years, using the Bark monitoring app as part of its digital oversight approach. That early partnership helped establish a shared commitment to privacy-forward, safety-focused monitoring.

Reflecting on the partnership, Bekah Schuler, chief executive officer of Cascade Academy, shared,

“We have always strived to be responsive to the needs of our students and the needs of their families. Bark was a great partner in helping us allow connection between students and their families, while providing us the transparency and control that we need to deliver the best results.”

As Cascade continued evolving its treatment model over time, the limitations of app-based monitoring on iPhones became more pronounced. Through its adoption of Bark Phones, Cascade built on its existing foundation and extended digital monitoring in a way that better supported clinical visibility, operational efficiency, and real-world skill-building.

The challenge: iOS limitations, visibility gaps, and operational strain

Cascade's clinical team relies on validated self-reporting tools such as PHQ, GAD-7, and Y-BOCS to track emotional and behavioral progress. While essential to evidence-based care, self-reporting has inherent limitations. Students may unintentionally:

- Underreport risky thoughts or behaviors
- Present selectively when concerned about consequences
- Display a lack of awareness concerning emerging patterns

At the same time, Cascade's model emphasizes increasing autonomy. Residents gradually gain access to personal cell phones as part of their treatment journey. For several years, Cascade used the Bark app on student iPhones to support monitoring within this framework. However, Apple's iOS restrictions limited the app's ability to provide consistent, comprehensive visibility.

Due to these iOS limitations, the Bark app could not reliably detect the full range of digital behavior occurring on iPhones. This reduced clinicians' ability to observe real-world interactions, search behavior, and online communication patterns. It also increased staff workload, as teams spent significant time managing phones individually and responding to issues after they had already escalated rather than intervening earlier.

Restricted insight meant clinicians had limited visibility into how students interacted with peers, parents, social media, and external stressors. In addition, the program lacked a consistent baseline for comparing digital behavior before, during, and after treatment.

Cascade needed a solution that addressed iOS limitations directly while preserving trust, independence, and therapeutic authenticity.

The solution: Expanding a trusted partnership through Bark Phones

To overcome these challenges, Cascade expanded its long-standing Bark partnership by transitioning from app-based monitoring on iPhones to fully managed Bark Phones. Bark Phones allowed Cascade to maintain the values established during years of app-based monitoring while eliminating the visibility gaps created by iOS constraints.

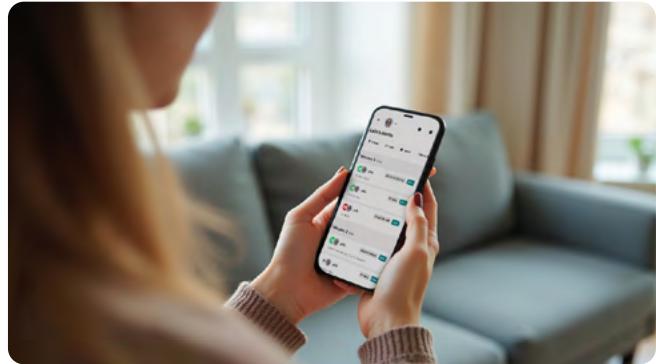
Key elements of the approach include digital access that allows students to use real platforms such as texting, browsing, and social media in

environments that mirror life after discharge. Phone privileges increase gradually, beginning with short and structured 30-minute sessions and expanding to extended or full-day use as students demonstrate responsibility and readiness. Bark Phones align with Cascade's open-campus and independence-based framework, allowing students to practice real-world decision-making within a controlled and supportive setting. Monitoring remains privacy-forward and focused exclusively on safety-related concerns.

Clinical and therapeutic benefits

Real-world behavior and earlier intervention

With Bark Phones, clinicians can gain authentic insight into students' digital behavior without the visibility gaps imposed by iOS app limitations. Alerts surface meaningful clinical signals such as search patterns, language cues, and online interactions that may indicate emerging risks, including body image concerns, peer conflict, or emotional distress.



Stronger family systems alignment

Improved visibility into real-world digital behavior has strengthened family systems work. In some cases, Bark insights revealed misalignment between how progress was being communicated to families and how students were actually engaging with technology.

Therapists use this information to foster shared understanding rather than focusing on misrepresentation. This transparency has improved communication, reduced misunderstandings, and helped prevent premature transitions or discharges.

Safety without invasive surveillance

Bark's monitoring philosophy aligns closely with Cascade's values. The system flags only safety-related categories such as self-harm, depression, bullying, and risky behavior while ignoring the vast majority of everyday interactions.

This approach reinforces trust, supports autonomy, and helps students experience monitoring as a tool for safety and growth rather than control.

Continuity of care beyond campus

Monitoring continues during home visits, giving clinicians insight, when needed, into whether students maintain progress outside the structured treatment environment. This continuity supports more accurate treatment planning and allows teams to adjust support proactively before discharge.

Impact, measurement, and early outcomes

Measuring the impact of technology in a therapeutic setting is complex. Cascade is currently initiating an alumni outcomes study to track long-term progress, treatment durability, and relapse prevention.

Early outcomes from Bark Phone adoption include improved visibility into student well-being, faster and more data-informed interventions, reduced operational strain on staff, and a more complete clinical picture when Bark data is combined with established tools. Consistent monitoring also enables clearer comparisons between pre-treatment and post-treatment digital behavior.



Conclusion: Transforming recovery and outcomes

Cascade Academy's partnership with Bark evolved over several years from app-based monitoring on iPhones to the adoption of Bark Phones. By directly addressing iOS limitations while preserving a privacy-forward and trust-based approach, Cascade has strengthened clinical insight, enhanced family engagement, and supported its mission to help students build independence and emotional resilience.

Together, Bark and Cascade Academy are demonstrating how long-term collaboration and thoughtful technology integration can elevate treatment outcomes and redefine digital wellness in modern adolescent care.

Email sales@bark.us to learn more or visit bark.us/learn/behavioral-health.