

Concurrent Sessions – August 22

Exploring the Evidence - Presentations and Conversation

Five concurrent workshops will be offered in thematic areas to engage discussion on the growing body of evidence about the importance of promoting mental health for children and youth. Each session will feature three presenters, who will present their findings and implications for policy and/or practice. The presentations will be followed by general discussion on the question: *What are the implications for “upstream” policies and programs?*

Responses to the discussion questions will be submitted to the Writing Room and contribute to the Call to Action that will conclude the program of ASI 2017.

Session 2: Expanding Access to Youth Based Services and Programs

a. *Youth Journeys in Mental Health in Atlantic Canada*

Dr. Kate Tilleczek, Dr.Brandi L. Bell

Atlantic Canada Children’s Effective Service Strategies in Mental Health (ACCESS-MH) is a 5-year research study, funded by the Canadian Institutes of Health Research. It aims to deepen understanding of child/youth mental health in Atlantic Canada. Our team of researchers engaged children and youth, parents, and service providers (youth mental health and associated systems) across Atlantic Canada (PE, NS, NB, and NL) in in-depth interviews to learn more about the journeys young people take through the mental health care system. For this presentation, we will discuss what we learned from interviews with 46 children/youth aged 10-21 who identified with depression, anxiety, eating disorders, conduct disorders, or autism spectrum disorders. Our arts-based patient journeys approach provides a way to engage participants and give emphasis to these often long and complex stories of struggle; helping to understand issues such as service coordination, wait times, stigma, and spaces for families, schools, and mental health professionals to support youth’s journeys of recovery.

How does your project make a connection with the theme Promoting Child and Youth Mental Health: Moving Evidence to Action?

The ACCESS-MH project is centrally focused on child and youth mental health, addressing these central questions regarding the child/youth mental health system in Atlantic Canada: What services are being accessed? What journeys are being taken through the system? What are the barriers and facilitators to access and services? Which services are effective/ineffective and why? Can the system be better integrated, coordinated, and funded?

What will others learn from your project?

Participants will learn about how young people experience the mental health care system, including supports and challenges they encounter. Our findings suggest that family, peer, and community members play key roles in youth journeys and create communities of support for youth. However, even with these supports in place many youth continue to struggle. Navigation of this system is complex, and a detailed literacy of both overt and covert pathways to care is often necessary.

How does your project demonstrate evidence of promising collaborative practices, policies, research?

ACCESS-MH is a collaborative project across five Atlantic Canadian universities and with Principal Investigators representing a variety of disciplines. In interviews with children and youth, they told us of mental health care,

education, and other system practices that were at times collaborative but often still presented substantial barriers. Many young people suggested potential improvements to better support child/youth mental health in Atlantic Canada.

Main Presenter

Dr. Kate Tilleczek

Canada Research Chair & Director, Young Lives Research Lab, UPEI

I have been examining the lives and times of children and youth for over two decades. I am currently a SSHRC-funded Canada Research Chair (Young Lives in Global/Local Contexts) and Full Professor in the Faculty of Education and Arts (Sociology and Anthropology) and founder and director of the Young Lives Research Lab and Qualitative Research Lab (CFI-funded) at the University of Prince Edward Island.

Co-Presenter

Dr. Brandi L. Bell

Assistant Director, Young Lives Research Lab, UPEI

Brandi is Assistant Director of the Young Lives Research Lab at the University of Prince Edward Island. She is currently coordinating qualitative Patient Journeys research for the Atlantic Canada Children's Effective Service Strategies - Mental Health project (funded by CIHR) and is co-lead researcher for two projects evaluating the scale-up of Social and Emotional Learning in Atlantic Canada (Socially and Emotionally Aware Kids [SEAK] project, funded by PHAC, and SEL in First Nation Schools: Evaluating Scale-Up in New Brunswick, in collaboration with the First Nation Education Initiative Inc.). She holds a PhD in Communication Studies from Concordia University. After participating at ASI for the past two years, Brandi is excited to contribute to this year's symposium on Child and Youth Mental Health in Atlantic Canada.

b. ***ACCESS Open Minds New Brunswick/ ACCES Esprits ouverts Nouveau-Brunswick***

Candice Pollack, Isabelle Godin, Joanna Martin, Lise Richards

ACCESS Open Minds is a national research project in youth mental health co-funded by the Canadian Institute for Health Research and the Graham Boeckh Foundation. The project has twelve sites across Canada, with New Brunswick acting as the only site of provincial transformation. As a province-wide initiative, the New Brunswick site is also co-funded by the New Brunswick Health Research Foundation. The vision of the ACCESS Open Minds NB project is that youth (ages 11 to 25) who live with mental health challenges should be able to: GET CARE EARLIER GET CARE QUICKER GET BETTER CARE CONTINUE TO GET CARE AS THEY GROW INTO YOUNG ADULTS HAVE A VOICE IN THE KIND OF MENTAL HEALTH CARE THEY RECEIVE.

How does your project make a connection with the theme Promoting Child and Youth Mental Health: Moving Evidence to Action?

ACCESS OM NB takes global best practices in community-based youth mental healthcare and implements them in a diversity of NB communities. Learning from organizations like headspace and Jigsaw, ACCESS OM NB is bringing an experience of authentic, community-based care and support to young people through ACCESS Clinicians and Supporters who are trained to help identify and deliver the right supports, at the right time, and at the right intensity in a safe and engaging environment.

What will others learn from your project?

Participants will learn about the role community can play in developing engaging and culturally appropriate mental health care for young people. This presentation will highlight the three NB communities we work with, and the unique ways that they utilize ACCESS OM NB resources to provide mental health supports to the young people that need them.

How does your project demonstrate scale up of a tested innovation that promotes child and youth mental health in Atlantic Canada?

ACCESS OM NB is part of a national research initiative that is evaluating the impact that community-based mental health supports will have on youth mental health care. Each site is part of the fidelity and impact assessment being led by Dr. Ashok Malla to demonstrate whether the ACCESS model works in a diversity of different Canadian communities.

Presenters:

Candice Ashley Pollack, LL.B., B.C.L.

Manager of Stakeholder Engagement, ACCESS Open Minds NB

Candice Ashley Pollack is the Manager of Stakeholder Engagement for ACCESS Open Minds NB. She holds a Bachelor of Laws (LL.B.) and a Bachelor of Civil Law (B.C.L.) from McGill University, and was called to the New Brunswick Bar in 2016.

Isabelle Godin, RSW

ACCESS Clinician, Centre de bénévolat de la péninsule acadienne

Isabelle Godin is the ACCESS Clinician for the Acadian Peninsula. Isabelle is a registered social worker, and obtained her Bachelor of Social Work (BSW) at the Université de Moncton in 2007. Isabelle has been working in mental health for the last seven years, with a focus in child and adolescent services, adult services, mobile crisis, and pediatric psychiatry.

Joanna Martin
ACCESS Clinician, Elsipogtog First Nation

Joanna Martin is the ACCESS Clinician for Elsipogtog First Nations. She is currently working on completing her Masters of Science in Psychology with Southern California University. She has experience working in the helping field for over 20 years, and is fluent in English, French and Mi'kmaq.

Lise Richards, O.T.Reg. (NB)
Clinical Liaison/ACCESS Navigator, P.E.E.R. SJ

Lise Richards is the ACCESS Clinician for P.E.E.R. SJ. She is an occupational therapist who obtained her Bachelor of Health Sciences (Occupational Therapy) from the University of Ottawa many, many years ago (1996). The majority of her career has been dedicated to working with clients presenting mental health issues as well as with children and youth with developmental challenges.

c. ***Claymation Art Therapy in Early Phase Psychosis: a Pilot Study to explore feasibility, benefits and participants' perceptions***

Dr. Jean Hughes

This study explored the feasibility and benefits of a 13 week Claymation art therapy group intervention for young adults with early phase psychosis. The mixed methods study involved 13 young people (16-30 years) with early psychosis and pre-post (baseline and 3 months post intervention) data collection. Significant improvements (80% attendance rate) were observed post-intervention on all quantitative measures: global assessment of functioning, personal and social performance, scope of identity and hope ($p < 0.05$). Two major themes emerged from the qualitative analysis: (a) Valued Program Elements; and 2) Personal Empowerment and Well-being.

How does your project make a connection with the theme Promoting Child and Youth Mental Health: Moving Evidence to Action?

The youth participants noted in their interviews that the Claymation Art Therapy program promoted critical positive effects on their mental health: Personal Empowerment and Well-being – enhanced emotional well-being and self-discovery; positive self-concept; and engagement in meaningful activity post-intervention. Participants also described the critical program elements that fostered these positive personal effects: Valued Program Elements – created an engaging program; created safe space; created structured and supported challenge, built skills; provided opportunity for connection among people with lived experience; and film screening gave opportunity to be supported by friends and family. The next step is to find ways to make Claymation Art Therapy more available to youth with early psychosis.

What will others learn from your project?

Others might learn that it is important to consider and test diverse interventions to determine creative ways that have potential to assist youth with early psychosis in their recovery.

How does your project demonstrate evidence of promising collaborative practices, policies, research?

This pilot study identified intervention elements valued by participants and demonstrated that directed Claymation art therapy intervention is an engaging intervention with positive immediate effects and promising indicators on recovery domains.

Presenter

Jean Robinson Hughes RN, PhD

Full Professor, School of Nursing, Dalhousie University; Research Scientist, IWK Health Centre; Senior Research Scholar, Healthy Populations Institute (HPI); Past Senior Editor (2010-2015), Canadian Journal of Community Mental Health

My research and publications concentrate on marginalized populations (high inequalities, homeless, etc.) with a focus on mental health issues and are funded by a number of Federal, Provincial and foundation sources. My research employs multiple methods, at times large publically funded data bases, and is interdisciplinary, community-based and participatory in nature. My research also includes expertise from a range of disciplines and sectors and integrates diverse research designs to enable a holistic exploratory approach.

Other authors of this study:

- Zenovia Ursuliak MD, Ph. D, FRCPC; Psychiatrist - The Nova Scotia Early Psychosis Program; Assistant Professor, Faculty of Medicine, Dalhousie University
- Candice E. Crocker, PhD
- Amy MacKenzie MA, CCC, RCT-C
- Philip G. Tibbo, MD, FRCPC