

Concurrent Sessions – August 23

Innovations Promoting Child and Youth Mental Health

In these sessions, a number of initiatives that are now being scaled up to improve child and youth mental health in Atlantic Canada will be profiled. Each session will feature a 30-minute presentation followed by discussion of key questions with participants:

- *How does this innovation build upon and develop evidence?*
- *What policies exist or are needed to support and expand programs that promote child and youth mental health?*

Highlights of these discussions will be submitted to the Writing Room and will contribute to the Call to Action that will conclude the program of ASI 2017.

1. Taking SNAP (Stop Now And Plan) an evidence-based program to scale: Creating social impact

Dr. Leena Augimeri, Director, SNAP® Scientific & Program Development, Child Development Institute; co-presenters Nicola Slater and Marg Walsh

SNAP is an evidence-based family-focused multi-component therapeutic model designed to help children with serious disruptive behaviour problems, and their families, improve emotion regulation, self-control and problem-solving skills. In 1986, SNAP was developed to meet a gap in services for children 6-12 when Canadian federal legislation rose the age of criminal responsibility from 7 to 12. From the onset, the scientist-practitioner approach was an integral part of the model's development. Over two decades, SNAP has scaled up, as well as, scaled deeper to create fidelity frameworks and tools. Despite successful replications of 100+ sites - licenses, resources, and knowledge issues can limit the capacity for growth. In 2012, SNAP was selected by LEAP: Centre for Social Impact (Incubated by the Pecaut Centre) as their inaugural social innovation to pioneer the Venture Philanthropy model in Canada, to scale up effective social innovations to help create massive social change. LEAP and SNAP are engaged in a 5-year \$12 million National Expansion Project (NEP) that includes an infusion of business skills and planning, building capacity and fidelity, and sustainable growth across Canada. The goal is to reach 140 new sites across Canada, serving 20,000 high-risk children using a venture philanthropy model.

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

Stringent research has established SNAP as “the leading evidence-based program for aggressive children with serious, violent and chronic potential” (Howell, Lipsey and Wilson, 2014); and “outperforming treatment as usual” (Burke & Loeber, 2015) with “monetary benefits greatly exceeding costs and reducing crime by 33%” (Farrington & Koenig, 2015). The NEP will increase SNAP's reach from 5% to 47% of children/families in need; saving society over \$1 billion (e.g., mental health, health and criminal justice costs).

What will others learn from your project?

This presentation will highlight the successes and challenges of using a Venture Philanthropy model to implement a NEP that will enable SNAP to have a footprint in every province across Canada over the next 5 years. Participants will learn about the importance of using a comprehensive fidelity monitoring system, SNAP

Implementation Tool (SNAPiT; designed to track pre-implementation consultations, training, case management, professional development, and stakeholder involvement) to maintain the integrity of the model.

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

The Centre for Building Resilience through Anti-Violence Education (BRAVE) in Halifax, Nova Scotia has been identified as a lead SNAP Affiliate/Champion for the Atlantic region. SNAP HQ's works with SNAP Champions to develop capacity for implementing SNAP and enhance expertise/awareness within communities while building appropriate referral protocols. Challenges of sustaining evidence-base practice and adopting an innovative implementation framework while aligning with a venture philanthropy model will be discussed.

Main Presenter

Dr. Leena Augimeri

Director, SNAP® Scientific & Program Development, Child Development Institute

Director of SNAP® Scientific and Program Development at the Child Development Institute and Adjunct Professor at the University of Toronto. This scientist-practitioner's work over 30 years has focused on development, research, dissemination and implementation of SNAP, an evidence-based gender specific model, and a comprehensive crime prevention framework for young children with serious disruptive behaviour problems. She has authored numerous publications, conducted hundreds of presentations and keynote addresses and received several prestigious awards, including Prime Minister's Regional Social Innovation and Elizabeth Manson Award for exemplary contributions to the promotion of children's mental health.

2. Scaling up Social Emotional Learning Curriculum in New Brunswick First Nations Communities

Co-presenters: Terri-Anne Larry, Teacher, Eel Ground First Nation School; Lorinda Ward, Metepenagiag First Nation; and Aleida Fox Kingsclear First Nation

PATHS® Program (Promoting Alternative Thinking Strategies) was implemented in 3 First Nations Band operated schools: Kingsclear, Metepenagiag, Natoaganeg during the 2016-17 school year. School-wide implementation is a 2 year process. The first year saw teachers trained (over 2 days) from Kindergarten to grade 2. PATHS Champions were selected and trained to support implementation in the classrooms and ongoing coach support occurred weekly. Lessons were taught in classrooms on average 2 times per week and parents were included in the implementation through information and activity sheets sent home with the children throughout the year. Apart from the lessons, Social Emotional teaching strategies were incorporated within core subject areas to support the students' acquisition of SEL skills. The program was offered due to schools and communities challenges with high levels of aggression, challenging behaviors in the classroom and overall general concern about mental health in First Nations communities as per the Truth and Reconciliation report recommendations. The changes/results: We will present anecdotal/testimonial video clips of the positive changes and lessons learned that have occurred over the course of this first year of implementation between students and teachers and parents. Data collection is on-going and we hope to provide preliminary findings during the conference presentation. Next steps: Full school roll-out and formalizing the acculturation components and beginning the affiliate training process for the Champions. As well, we will move forward to see this program as an important part of community mental health strategy.

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

PATHS® is an evidence based mental health promoting program for use in schools and communities, which has substantial research and world-wide use.

What will others learn from your project?

Implementation process, outcomes for children, benefits to staff, challenges of program implementation, academic implications and benefits to family and community.

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

PATHS® as been implemented world-wide in a variety of school and community settings. This is a pilot implementation of this program in New Brunswick in First Nations communities in a collaborative way. Challenges are that each community is unique with it's own language and culture (Maliseet & Mi'kmaq), which needs to be recognized and accommodated/considered during implementation and while conducting lessons. Social Emotional Learning is incorporated within existing curriculum and as a component of mental fitness within the provinces 10 year education plan and as previously mentioned TRC.

Main Presenter

Terri-Anne Larry
Teacher, Eel Ground First Nation School

Terri-Anne Larry is a Mi'kmak from the community of Natoaganeg First Nation, NB. She currently holds a bachelor of Arts in Native Studies and Anthropology from St. Thomas University and a Bachelor of Education with a concentration in Aboriginal Education and Literacy from UNB. She has been teaching for over 15 years in Natoaganeg and has been involved in a number of pilot projects/initiatives in her Education career. Prior to becoming a teacher, she was involved in a Literacy pilot project for a preschool in Alberta that focused on children with Speech difficulties (ex. Autistic & students with Selective mutism), and also a pilot Career Centre project with a local highschool and Friendship centre in Alberta. Since teaching in Natoaganeg, she has also been involved in a couple of pilot project/initiatives in her school. She has helped to implement the Read 180 program (a comprehensive Literacy program for grades 4-6) in the school and train teachers to teach the program. She has also implemented a School Wide Intervention program (SWI), a Literacy and Math initiative adopted from a school in a First Nations community in Quebec.

3. Together We Can!! - The Contribution of Pro-Social Role-Modeling and Peer Mentoring to the Development of Positive Social Skills in Young Females: a Longitudinal Study of Early Intervention Strategies

Stephanie Ruckstuhl, Researcher/ NBCC Instructor, New Brunswick Community College; Co-presenters: Dr. Chris Gilham, Dr. Kara Thompson

Historically, research has shown that adolescent girls have a high risk of poor self-image and self-esteem that leads to developmental deficits. These poor self-images are carried into adulthood. It is generally believed that there are many benefits to having a positive view of the self and the Pro-social skills that coincide with positive view of self.

Research conducted by the Girls Action Foundation showed that pro-social behaviour in young girls drops by 35 per cent in the five years between middle school and the end of high school (Girls Action Foundation, 2012). Researchers with the NBCC College and St Francis Xavier University along with active stakeholders: Anglophone South district School Board, Horizon Health Mental Health team, Antigonish Women's Resource Center and Sexual Assault Services Association, and CASM Group are working to reverse that trend through their SSHRC-sponsored development of and research on a pro-social role modeling and peer mentoring intervention program. The literature demonstrates success through implementing "girl-specific programs" (as identified through the Canadian Girls Action Foundation); programs designed specifically for girls can play a key protective role in their healthy social development. Using this model ensures that the activities are in keeping with pillars of Social and Emotional Learning (SEL), the project introduced workshop-based learning approaches, popular education, role modeling and peer mentoring.

The Team reached out to females in the beginning of grade 7 and are continuing to follow them through to grade 10 in Charlotte County, New Brunswick. The intervention was to create a safe place for young females to learn, share and build their pro-social skills, including self-esteem. The program anticipated to create an environment conducive to the following elements, marked as pillars in SEL: participatory (involving young females in program design and facilitation), empowerment (supporting young females to express themselves and take action), asset-based (build skills and focus on strengths), culturally relevant (respect for and integration of diversity), and community involved (engage community members through mentorship and other means). Approximately 48 NBCC students over 2 years have helped facilitate the peer-to-peer mentoring program.

The researchers are assessing the effectiveness of the program using both quantitative and qualitative methodology. Assessment tools include the Developmental Assets Survey (The Search Institute), group observations, focus group interviews, and photo voice. Concomitantly, participatory action research methodology will guide data collection with and from the participants. Participants will share their learning by choosing from a wide selection of response modalities including Digital Storytelling, social media, audio and video recording, and other arts-based responses such as creative journaling, craft-making, and painting, for example.

This research has a strong focus on the empowerment of girls in rural NB, by helping them to critically troubleshoot the everyday social media messages they receive, as well as interrupt the power imbalances they face within the traditional gender binary, for example. This issue is echoed throughout much of Atlantic Canada. With increased self-esteem and pro social skills, we hope this intervention will improve the lives of girls in schools, thereby increasing school success, and setting the foundations for success post K – 12 schooling. At the Summer Institute we plan to share our data from the information gathered in the first half of the 3 year SSHRC sponsored project, and our ever-evolving work plan, including the intervention program curriculum.

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

This project focuses on promoting prosocial skill development through participatory action research. We are exploring the foundation of developmental assets and using our early findings from the surveys and from our initial contact with the girls to provide relevant programming for subsequent curriculum. Girls have the opportunity for their voices to be heard by casting their vote to choose the content of groups.

What will others learn from your project?

Our specific focus is on self-esteem and pro-social skills. We developed a program with the girls using popular education based on Girls Action foundation activities which use pillars that coincide with SEL pillars. Our project presentation will focus on our methodology to date and our results after 1 1/2 years of program implementation. Using both qualitative and quantitative measures.

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

Our project demonstrates "scale up" of the innovation brought forth from both Girls Action Foundation and AWRCASASA. We used the curriculum from 'Amplify' a GAF resource and the program approach from AWRCASASA's Healthy Relationships for Youth (HRY) and aligned it with the NB comprehensive school health model to create a program based on popular education. The curriculum was prepared in consultation with local school district and child youth mental health services and was voted on by girls participating in the project. Two 6 week sessions will be delivered over 2 years in rural New Brunswick. We are currently preparing to run a pilot program in Nova Scotia to assess potential to replicate this approach.

Main Presenter

Stephanie Ruckstuhl
Researcher/Instructor, New Brunswick Community College

Ms. Stephanie Ruckstuhl is a registered nurse and faculty member of Practical Nursing and Allied Health programs at the New Brunswick Community College. She has over 23 years of experience working in the education and health care sectors. Stephanie holds a Bachelor of Arts degree in Child and Adolescent Psychology from St. Francis Xavier University and a nursing degree from the St. Lawrence College of Applied Arts and Technology. Stephanie has championed several grass roots community programs throughout her career leading to various research grant awards and recognition. Through her passion and hard work in bringing creative, new programming to her students and community, she was awarded Social Innovation funding from the Social Sciences and Humanities Research Council of Canada. This funding has allowed Stephanie to build the leadership and critical thinking skills of adolescent girls along with providing educators the necessary tools to build this into their curriculum. Stephanie's commitment to this initiative has fostered several new community and academic partnerships throughout Atlantic Canada.

Co-Presenters

Dr. Chris Gilham PH.D
Assistant Professor, Department of Teacher Education, St. Francis Xavier University

Dr. Kara Thompson
Assistant Professor, Department of Psychology, St. Francis Xavier University

4. #MyDefinition: What We Learn When We Listen To Youth

Lee Thomas, President, DefineU Mental Health Programming Inc.

#MyDefinition is a poster campaign that started in 2014 at the University of New Brunswick (Fredericton) to promote conversations about mental health on the university campus. In the past 3 years the campaign has grown and spread to campuses across Canada, with over 100 unique individuals sharing their experience living with mental health issues and mental illnesses. #MyDefinition started as a stigma reduction effort, but has since grown to become a study in epistemology: when it comes to youth mental health, who is seen as an expert? And what does that expertise mean for the provision of services for youth with mental health issues?

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

#MyDefinition has been involved in promoting youth mental health since its inception, and in its new iteration as a knowledge-sharing project it embodies the idea of moving evidence to action -- we have helped to reduce stigma, but we know that that's just the first step. We have the evidence, now how do we make people listen and take the necessary next steps?

What will others learn from your project?

The #MyDefinition project teaches that youth with mental health issues are experts in their own experience. In the presentation, audience members will learn how to take that viewpoint and apply it to their own practices, as well as answer the question: what's next?

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

The #MyDefinition campaign was never designed to be scaled up; our plan was always to do one campaign and call it quits. But there was such a demonstrable need for our message throughout Canada, we adapted out of necessity and are now a very scalable project. In fact, the scalability is one of #MyDefinition's strengths, as the more stories that are told, the more diverse and dynamic the image of mental health becomes.

Presenter

Lee Thomas

President, DefineU Mental Health Programming Inc.

Lee is a speaker, writer, and advocate based in Fredericton, New Brunswick. As a young person growing up in northern Alberta, Lee struggled with (then-undiagnosed) bipolar disorder, ADHD, and an eating disorder. Once they sought help and began the process of recovery, they realized that many others were still struggling in silence. Lee decided to dedicate their life to eliminating the stigma surrounding mental health issues, and they now speak to groups of all ages and sizes about mental health, social justice, and LGBTQ issues.

5. Moving Evidence to Action: The Role of Inter-organizational Mentoring Relationships for Strengthening Community Based Child and Youth Mental Health Programs

Crystal Watson, Ph.D. Student, Dalhousie University/ Children and Youth in Challenging Contexts (CYCC) Network and Institute

The presentation would focus on the fact that marginalized youth prefer community-based services to formalized health care services (Ungar et al, 2013). While these organizations are prepared with providing front line services, seeking funding and completing other administrative components of the work tends to fall to the wayside. Thus, community organizations often need additional support to plan for funding applications or to complete evaluations and such. Our presentation will focus on how community based organizations may develop the skills needed to achieve these tasks through formalized mentoring relationships with larger youth oriented organizations. The plan is to present preliminary findings of an evaluation of a mentorship program initiated by the Children and Youth in Challenging Contexts (CYCC) Network and Institute and deliver a few recommendations.

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

This initiative is about the importance of groups working together to address the needs of youth. It is also about ensuring that groups develop communities of practice to stay informed of trends and initiatives they are doing and how they can support each other in achieving the goal of the health and well-being of young people.

What will others learn from your project?

Others will learn of the challenges as well as the opportunities of being a mentor to small and lower resourced organizations. They will also learn about the types of activities the mentors have been engaging in with mentees to further their causes.

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

This project brings to light an old practice (mentorship) to a new area (youth work). It will inform the work of the Network specifically enhancing the mentorship program. It will also support the work of the Hubs that collaborate with the CYCC Network. The outcomes of the evaluation will be shared with other youth based organizations who are formally and informally involved in mentoring relationships to further enhance current and future relationships.