QUALITY STANDARD FOR YOUTH ENGAGEMENT

draft October 2019





Ontario Centre of Excellence for Child and Youth Mental Health

RECOMMENDED CITATION

Ontario Centre of Excellence for Child and Youth Mental Health (October 2019). Quality standard for youth engagement. Ottawa, ON. Available online: <u>https://www.cymh.ca/ye_standard</u>



TABLE OF CONTENTS

INTRODUCTION	4
What are quality standards?	5
About this quality standard	5
What is youth engagement?	5
Why do we need this quality standard?	7
What is the scope of this standard?	7
How was this standard developed?	7
QUALITY STATEMENTS	8
Accessibility	10
Authentic relationships	12
Co-development	14
Commitment	16
Communication	18
Diversity and inclusion	20
Ongoing learning	22
Research and evaluation	24
Safer spaces	26
SOURCES	28
APPENDICES	38
Appendix A: Youth engagement advisory group	38
Appendix B: Standard development process	39
Appendix C: Glossary	39



INTRODUCTION

Consistently delivering a seamless experience and strong outcomes — the care kids need, when they need it, how they need it — is key to helping children and youth in Ontario grow up with good mental health. The 2016 Annual Report of the Ontario Auditor General highlighted a range of opportunities to improve the child and youth mental health system.¹ Woven through the recommendations was a clear reminder that we must focus on the experience and needs of children, youth and families. And there is no one better to tell us what they need than children, youth and families themselves.

Evidence shows that meaningfully engaging youth and families in the child and youth mental health sector can have significant positive impacts on service experience and outcomes. With a voice and an active role in treatment planning and service delivery, Ontario's children, youth and families have their lived experience and context incorporated into their care. This leads to improved outcomes,² better relationships with healthcare professionals delivering care³, a stronger sense that needs are being met through services delivered and greater satisfaction with care. ^{5,6,7,8} When youth and families are engaged in their own care, they experience improved psychological well-being, behavioural functioning and quality of life,^{8,9} and services overall are more cost-effective.^{9, 10,11} Through engagement, youth experience positive changes to their personal identity and efficacy. They build better critical thinking skills, teamwork and commitment to community service¹² and develop enhanced leadership skills.¹³

Youth engagement and family engagement are essential drivers of excellence across all aspects of the system.¹⁴ Collectively, we are most efficient and effective when we work not just for children, youth and families, but with them, every step of the way.



About the Ontario Centre of Excellence for Child and Youth Mental Health

The Ontario Centre of Excellence for Child and Youth Mental Health (the Centre) works to channel the momentum for change in child and youth mental health into practical initiatives that will improve service access, experience and outcomes in every community. Together with our partners, we will set the standard for child and youth mental health services and stand up for an *evidence-informed* system that makes a real-life difference for people across Ontario.

What are quality standards?

Pursuing excellence demands that we define it. Together with youth, families, clinicians and researchers, the Ontario Centre of Excellence for Child and Youth Mental Health (the Centre) develops quality standards that support consistent and effective child and youth mental health services across Ontario.

Quality standards are essential to a system that is accountable and constantly improving. They are also central to ensuring that Ontario children, youth and families access and receive consistent high-quality mental health services wherever they are within the province.

Quality standards consist of several quality statements, or principles, that describe what high quality looks like, based on evidence.¹⁵ None of the statements stand alone. Rather, the statements work together to make up a cohesive quality standard. Evidence comes from many sources: the research literature, the experiences of youth and families and the perspectives of service providers. We recognize that much of this evidence and perspective comes from a Western-oriented worldview.

Quality standards include best practices that describe how high-quality services can happen.¹⁵ They also include indicators to show progress or the impact of these practices. Tools and resources are provided to guide implementation, evaluation and ongoing improvements in applying the quality standards.

Quality standards complement accreditation standards and clinical practice guidelines from professional bodies. Together, these standards and guidelines provide the way to have the best mental health outcomes for everyone involved in the child and youth mental health system.

For more information on quality standards for child and youth mental health, contact cymhstandards@cheo.on.ca.

About this quality standard

What is youth engagement?

In a broad sense, *youth engagement* is about the meaningful and sustained involvement of a young person in an activity focused outside the self. Full engagement consists of a cognitive component (involving beliefs, knowledge and thoughts), an affective component (involving feelings and emotions), and a behavioural component (involving one's behavior), also known as "head, heart and feet," as well as spirit.¹⁶ Youth engagement in child and youth mental health means empowering all young people as valuable partners in addressing and making decisions that affect them personally or that they believe to be important.¹⁷ Youth engagement happens on a continuum, from *youth* as passive recipients of services to engaging activities that recognize youth as equal partners in their care¹⁸ (see Figure 1).

Youth engagement is grounded in a set of guiding principles for working with young people, to ensure that engagement is authentic and meaningful. The principles include: valuing youth as community assets,¹⁹ committing to participatory leadership,²⁰ building authentic relationships, striving for health

many quality standards, was developed in a context and from an evidence base that largely reflects a Western worldview. We recognize the importance of continually engaging with diverse voices and ever-broadening our sources of knowledge as we support the implementation of this standard and refine it over time.

youth:

a developmental transition; a fluid notion depending on context rather than a fixed agegroup. Youth may be defined differently by funders, cultures, organizations, communities, and self.



equity,²¹ meeting youth where they are at,²² using a whole community approach²¹ and putting safety first.¹⁸

The Positive Youth Development (PYD) framework further grounds this standard and is at the core of youth engagement.^{23, 24, 25} PYD involves creating opportunities for youth to develop positive relationships and acquire the knowledge and skills they need to make successful transitions to adulthood. PYD is a whole community approach and focuses on resilience and on building the protective factors in a young person's environment to help them overcome adversity.

There is a continuum of youth engagement practices, a concept that is visually represented in an adapted version of Hart's Ladder²⁶ (see Figure 1). The star of youth engagement illustrates the continuum from highest forms of engagement at the peak of the star to lower forms of positive engagement at the bottom of the star. The negative forms of engagement do not surround the star but are listed separately below.

Why do we need this quality standard?

Much work has been done to advance youth engagement across the province such as the work of our Centre, The New Mentality, and the Centre of Excellence for Youth Engagement. Many of Ontario's community-based child and youth mental health agencies have implemented youth engagement practices in their communities.²⁷

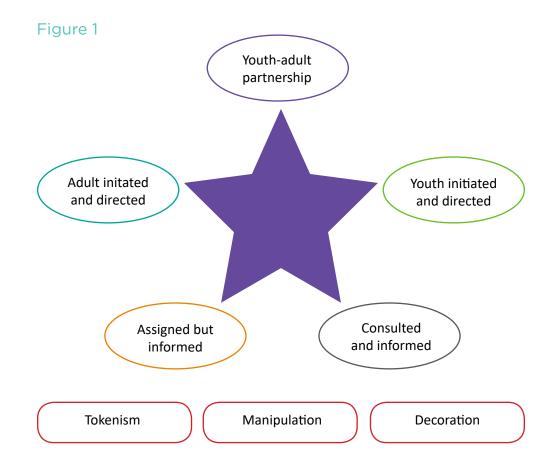


Figure 1: Star of youth engagement, adapted from Hart's Ladder of Youth Participation.²⁶

Tokenism, manipulation and decoration are negative forms of engagement and are especially detrimental in youth engagement. Still, there is considerable inconsistency between individual service providers, services, and agencies with how youth engagement is understood and practiced (or not practiced) in the child and youth mental health sector. There is still work to do to ensure that children, youth and families receive the best care and outcomes no matter where in the province they seek care.

Establishing a quality standard ensures consistent practices for youth engagement. It formalizes youth engagement practices and expectations for the system and validates the lived experience of youth who engage at the system-level. A quality standard also serves to provide a baseline of measurement across the province where one does not exist and challenges us as a sector to continue to improve.

What is the scope of this standard?

Youth engagement can occur along a continuum and across three levels.²⁸ Youth engagement at the level of personal care and health decisions is focused on the relationship between youth and healthcare professionals and improving health outcomes for children, youth and families. Engagement within an organization is focused on improving programs and services or improving organizational policies and governance. Engagement at the system level is focused on improvements beyond a single organization.

The quality statements in this standard describe youth engagement at the system level (that is, beyond the delivery of care or improving programs) and at the highest level of the continuum (youth-adult partnerships). This quality standard is relevant to efforts that improve services involving many organizations in a community and efforts that improve the transition or coordination of services across different agencies or sectors.

Partners in youth engagement at the system level include (but are not limited to) other youth, families, service providers, child and youth mental health leaders, cross sectoral representatives from other areas (such as education, justice, social services. etc.), communities, community organizations and many others. This quality standard describes critical aspects of engagement and goes hand-in-hand with the quality standard on family engagement in child and youth mental health system planning.

How was this standard developed?

The Centre co-developed this youth engagement quality standard with an advisory group (see Appendix A) following a validated process (see Appendix B).¹⁵ We reviewed the literature for existing standards or guidelines on youth engagement at the system level. We then identified the key areas depicting youth engagement at the high end of the continuum and drafted quality statements. We consulted a diverse group of stakeholders across Ontario through surveys and focus groups to gather feedback and revise the quality statements.

We will be piloting this standard to assess implementation needs and develop resources to support implementation. We are also developing indicators so that system level initiatives can evaluate their efforts when implementing this standard.

This quality standard describes youth engagement at the system level, with the highest forms of engagement.

What do we mean by "system level"?

Ontario's child and youth mental healthcare system is made up of the many people and organizations that deliver mental health services to children and youth across the province and the networks and pathways that connect them.

The system also includes the governments and other institutions that provide the resources and structures that enable this care.

Youth engagement at the system level is focused on improvements affecting these networks, pathways, resources and structures rather than individual organizations.



QUALITY STATEMENTS

The quality standard for youth engagement in child and youth mental health system planning is comprised of nine quality statements.

None of these statements stands alone.

These statements intersect and work together to form high quality youth engagement. Those implementing the standard will need to pay active attention to all areas to ensure strong and sustainable youth engagement practices.

Each statement will be explained in greater detail in the following pages, including what it means for youth, for agencies and for system decision-makers. Read on to learn more about the background and rationale of each statement area and the best practices identified through existing literature and stakeholder consultation.

ACCESSIBILITY

Youth and partners work together to identify and address barriers to participation in youth engagement practices.

AUTHENTIC RELATIONSHIPS

Youth and partners share genuine, trusting and collaborative relationships in which youth expertise and experience is respected and valued.

CO-DEVELOPMENT

Youth jointly develop all projects, services and processes that impact or interest them.

COMMITMENT

All partners are committed to youth engagement and those in system leadership roles are accountable for embedding this commitment in system planning and improvement efforts.

YOUTH ENGAGEMENT

Empowering youth as valuable partners in child and youth mental health to address and make decisions that affect them personally and/or that they believe to be important

SAFER SPACES

Youth and partners co-create and regularly check-in to establish and maintain an environment in which everyone feels comfortable, embraced and able to speak freely.

RESEARCH & EVALUATION

Youth and partners jointly research, evaluate and make ongoing quality improvements to youth engagement practices and other relevant projects and processes.

ONGOING LEARNING

outh and partners understand the principles of youth engagement and seek opportunities to continually increase their knowledge and skills relating to youth engagement practices and other relevant areas.

COMMUNICATION

Communication between all partners is timely, clear, respectful and accessible.

DIVERSITY & INCLUSION

Youth engagement practices are inclusive; the diversity of engaged youth is valued and representative of the community served.



ACCESSIBILITY

Youth and partners work together to identify and address barriers to participation in youth engagement practices.

What this means for...



Youth

You can expect agencies and system decision-makers to provide many engagement opportunities in places, formats and environments that you are able to reach, understand and use (i.e. that are accessible to you).



Agencies

You actively work to identify and eliminate common barriers related to access and create an environment that enables equitable access to engagement opportunities.



System decision-makers

You identify and address barriers from the outset of all initiatives, incorporating accessibility into the design of all products, services and environments impacting youth engagement practices.

Background and rationale

The highest level of youth engagement involves addressing *barriers* to participation and creating opportunities for diverse youth to be able to engage effectively. Young people want to engage in activities that give them leadership and *decision-making* opportunities and build their sense of *competence* and *empowerment*. For successful youth engagement, system decision-makers need to create opportunities for genuine *partnership*, which means meeting youth where they are and actively working to create an environment that ensures *equitable* access.²⁹

Common barriers that prevent equitable access to engagement opportunities include geography, income-level, ability, timing and language.^{30,31,32} Some barriers could be specifically related to relationships between youth and adults, such as sense of trust, *transparency* and overcoming adult and youth stereotypes.^{30,33} There is an inherent and implied power imbalance between youth and adults that can be a barrier to partnership. This might include the perception that agendas are created and driven by adults and the potential for intimidation.^{30,34} Other

transparency:

an open flow of information and clarity about decisions. barriers may be related to the group structure or infrastructure, such as not having enough funding to ensure equal opportunities, staff and youth turnover, the complexity of the issues and inadequate youth representation.^{30,34,35,36}

Accessibility intersects with *diversity* and *inclusion*. Those who already experience stigma and marginalization may experience additional barriers to engagement. It is important to recognize this and actively explore ways to overcome those barriers. While the research literature is currently limited, some literature suggests that *adult allies*, increased cultural sensitivity and other approaches can incentivize engagement and ensure greater *accessibility* for diverse youth.^{33,37}

Best practices

- System partners understand, monitor and address the different types of barriers that prevent meaningful youth engagement.
- There are mechanisms to monitor and reduce barriers to youth engagement processes.

equitable:

fair; not unduly benefiting or hindering any particular person(s) or group(s). Note: Not the same thing as equal, as in even or balanced.

For example,

equitable access

may mean providing additional resources or supports for youth with certain barriers so they can access engagement opportunities as easily as youth who do not face those same barriers.⁴²

Definitions

accessibility: the design of products, devices, services or environments for people of differing needs (for example, newcomers with limited English or those with a disability).³⁸

barrier: a circumstance or obstacle that separates people from other people, places or things. Barriers come in many forms including attitudes, policies and programs, as well as physical, social, communication or transportation obstacles — and may even be unintentional.³⁸

competence: an individual's capacity and demonstrated ability to understand and appropriately and effectively do the tasks they could reasonably be expected to do based on their education and training.³⁹

empowerment: the process of enhancing the capacities or abilities of individuals to influence or make informed choices and to transform those choices into desired actions and outcomes.⁴⁰



AUTHENTIC RELATIONSHIPS

Youth and partners share genuine, trusting and collaborative relationships in which youth expertise and experience is respected and valued.

What this means for...



Youth

You are treated as an equal partner in engagement initiatives. Your expertise is valued, and you have a voice in decisions that impact you. You understand how decisions are being made and how your expertise is being used to guide them.



Agencies

You treat and value youth as equals partners. You formally define roles together and follow them, ensuring your organization's decision-making processes are transparent.



System decision-makers

You collaborate with youth when developing policies that impact them. You value their expertise and include their perspective. You are transparent, ensuring youth understand how decisions are being made and how their expertise is being integrated.

Background and rationale

Meaningful youth engagement is demonstrated through authentic, collaborative and respectful relationships⁴¹ in which youth are empowered "as valuable partners in addressing and making decisions about issues that affect them personally or that they believe to be important."¹⁷ There are a number of ways to engage youth at the organizational or system level, including youth advisory boards, positions for young people on governance boards, *partnerships* between youth-led groups and other stakeholders to drive policy change and employing young people as youth leaders and ongoing advisors in youth-serving organizations.^{13,43,44,45,46,47,48}

Youth also benefit from supportive adult relationships, so adults need to take the lead and be available to young people when they need to debrief their experience or ideas.^{49,50} Both adults and youth must also recognize the source of their power

and work hard to equalize any power imbalances whenever possible and communicate clearly where they cannot.⁵¹

Emerging research suggests that involving youth in organizational *decision making* can result in positive outcomes for youth^{52,53,54} and organizations.⁴¹ The literature also shows that partnerships with youth are more successful when youth have choices and options to be involved, roles and expectations are clearly set out, all partners have the time and are prepared to engage, the practice of collective mentoring or ongoing learning is observed and the environment reinforces these practices.⁵⁵

Adults and youth must recognize the source of their power and work hard to equalize any power imbalances whenever possible.

Best practices

- Youth and partners build and maintain mutually beneficial trust-based relationships that acknowledge power and position. This relationship is evident in all interactions.
- Partners make a concerted effort to ensure all decision-making processes are transparent to young people.

Definitions

decision making: process of collecting information, establishing selection criteria, developing possible alternatives or options and evaluating the most appropriate option based on selection criteria.⁵⁶

partnership: collaborative relationship between two or more people. People or organizations in a partnership collaborate to advance their mutual interests. This involves sharing individual skills and resources, while working together towards a common goal.⁵⁷



CO-DEVELOPMENT

Youth jointly develop all activities and processes that impact or interest them.

What this means for...



Youth

Your expertise is valued, and you have the opportunity to co-develop where you wish alongside other partners, from projects and services to evaluations and system priorities.



Agencies

You regard youth as experts and provide opportunities and openings for them to partner where they wish to, ensuring that the co-development approach is woven into all work, and especially youth engagement processes.



System decision-makers

You model co-development, partnering with youth in the shared development of policies, system level priorities and funding and research decisions.

Background and rationale

Meaningful youth engagement is built on the premise of "nothing about us without us".⁵⁸ Youth should be active leaders in all initiatives and regarded as experts in informing decisions from the beginning, co-developing a shared understanding of problems, priorities and possibilities. The process of co-development enables youth and partners to reflect on their experiences, define a common purpose, share in decision making, work together to identify improvement priorities, implement changes and jointly reflect on achievements with a collective sense of accountability.⁵⁹

Youth can and should be involved in co-developing, implementing and evaluating improvements of specific mental health programs and services.^{60,61} At the organizational level, youth can help determine whether the existing programs meet their needs and identify possible improvements. At the system level, youth can help define and offer advice on how to address policy changes, propose the

introduction of new policies, provide input on funding decisions and implement new standards. $^{\rm 60,61}$

The level of engagement in the process of *co-development* may look and feel different depending on the setting and other factors.⁶⁰ It is essential to work with youth to match the right approach to the right situation at the right time.

Best practices

- Youth share in decision making around potential changes and improvements to program delivery and system level policy development.
- Youth have a mechanism for identifying system level issues and priorities and addressing them in *collaboration* with partners.

Youth should be regarded as experts in informing decisions from the beginning, codeveloping a shared understanding of the problems, priorities and possibilities.

Definitions

co-development: process of working collaboratively on a shared purpose; joint decision making; a commitment to action and collective accountability among all stakeholders.⁶²



COMMITMENT

All partners are committed to youth engagement and those in system leadership roles are accountable for embedding this commitment in system planning and improvement efforts.

What this means for...



Youth

You see that youth engagement is supported, especially by those in leadership positions, and you feel that your engagement is valued. You feel encouraged to engage at all levels.



Agencies

Youth engagement principles are built into organizational policies, processes and activities. Leaders exemplify their commitment in strategy and resource allocation.



System decision-makers

You treat youth engagement as essential, not optional. You plan and allocate funds in a way that ensures youth voice is integrated into the mental health system.

Background and rationale

Practicing meaningful engagement may mean a huge shift in the mindset and processes of an organization or community. Youth must know their involvement is valued and that their contributions are taken seriously and acted upon.⁵¹ This requires dedication and hard work as well as commitment to the vision of youth engagement and preparation to fully integrate the principles of youth engagement within an organization or community. Research studies show that the process of *commitment* needs to go through three stages. The first is awareness that engagement to be successful and, ultimately, the development of operating procedures to maintain the new ways of working.⁶³

Embedding processes for youth engagement throughout an organization and having leaders at all levels demonstrating support for youth engagement signals a strong commitment and helps make it an enduring practice.^{64,65} Those committed to youth engagement create an enabling environment by investing resources,

embedding engagement practices in policies and processes and otherwise encouraging a culture that fosters youth engagement.

In such an environment, youth are provided with a continuum of supports throughout the term of their engagement, including supports that might help develop young people's personal and professional capacity.⁵¹

Best practices

- Organizations and system level partners demonstrate commitment by ensuring targeted resources are available and provided to support and sustain youth engagement practices.
- There are explicit policies and procedures in place for recruiting youth and *adult allies*.

Those committed to youth engagement create an enabling environment by investing resources, embedding engagement practices... and otherwise encouraging a culture that fosters youth engagement.

Definitions

commitment: willingness to persist in a course of action; a sense of obligation to stay the course; the state or quality of being dedicated to a cause, activity, etc.⁶⁶

resources: the supply of money, materials, staff, physical facilities, attributes, capabilities and other available assets that can be used to support processes and activities.



COMMUNICATION

Communication between all partners is timely, transparent, respectful and accessible.

What this means for...



Youth

You are asked about your communication preferences and are able to communicate in your preferred format and style. Partners listen to what you have to say and communicate with you often.



Agencies

You ask about communication preferences and accommodate different formats and styles. You practice active listening and ensure clarity in your own communication.



System decision-makers

You communicate regularly and consistently. You make sure that complex information is presented in a way that everyone can understand. You follow best practices for communication in all you do, and you have mechanisms in place to ensure two-way or multi-way communication.

Background and rationale

Good *communication* is central to meaningful youth engagement practice. Good communication is not merely about providing information; rather, it is a multi-way process that requires all parties to be effective listeners.⁶⁷ Accordingly, using *active listening* skills is critical to support the development of rapport, respect and trust.⁶⁷

Working in *partnership* with youth also requires a keen awareness of the ways and places in which people of different age groups communicate. Though face-toface interactions are effective, digital platforms and *social media* are changing the way youth engage with others and express themselves.³⁵ Being aware of these differences and adapting to them can help organizations and system decisionmakers reach out to youth, improve communication and keep youth engaged.⁵¹ There are many benefits to using social media: it offers highly interactive platforms, the ability to share information quickly and unparalleled connectivity with youth. But it also comes with its share of risks, which do need to be attended to.

Regardless of the method, communication should start early and occur often throughout the engagement process. It should be deliberate, planned and clear, with a particular effort to give explanations and avoid jargon.⁶⁸

Communication should start early and occur often. It should be deliberate, planned and clear.

Best practices

• Multiple *accessible* methods are used to communicate with young people and among all partners.

Definitions

active listening: paying close attention to a conversational partner's words, repeating back key ideas and phrases from time to time to confirm one's understanding of what the person has said. Demonstrates respect for — though not necessarily agreement with — the other person's feelings and views.⁶⁹

communication: the exchange of thoughts, messages or information between people or among a group of people, using spoken languages, body language, tone of voice and gestures. Effective communication occurs when there is a shared understanding; in other words, the message that is received and understood is the same message that was sent.⁷⁰

social media: online communication channels dedicated to community-based input, interactions, content-sharing and collaboration.



DIVERSITY AND INCLUSION

Youth engagement practices are inclusive; the diversity of engaged youth is valued and representative of the communities served.

What this means for...



Youth

Your unique qualities, abilities and identities are embraced and valued in all engagement processes. Partners work to reduce or remove any obstacles affecting your engagement.



Agencies

You strive to meaningfully engage diverse youth. You acknowledge and work to address barriers to engagement by building strong organizational policies and practices that support diversity and *inclusion*.



System decision-makers

You lead the way by championing diversity and inclusion, addressing barriers to youth engagement and making a concerted effort to engage diverse youth in creating policies, ensuring their contributions are valued and recognized. This is particularly important when working with marginalized and underrepresented populations.

Background and rationale

Social determinants of health and other factors can influence a person's ability to access appropriate services or engagement opportunities within the child and youth mental health system. Meaningful youth engagement processes consider the *social, cultural and political barriers*²¹ that may block access or hamper opportunity and strive to address them.³² Partners also need to be aware of their own history, experiences and worldviews, and recognize how these might influence the way they engage and develop relationships with youth.⁷¹

Meaningful youth engagement has many benefits for youth, such as increasing their sense of community and overall resilience.⁷² The benefits of youth engagement increase significantly when those engaged represent the *diversity* of the community served—and therefore, those likely to benefit from the engagement process — because it ensures the most accurate representation of the range of youth experiences and perspectives in that community.⁵¹

social determinants of health:

the social, political, economic and environmental factors that can affect an individual's or group's health and wellbeing.²¹ Individual youth cannot be expected to represent the diverse views of the broader youth population, so it is important for partners to make deliberate efforts to engage diverse youth.

Leadership and governance bodies must also be representative and support staff and stakeholders to understand and recognize diversity and strive for equity.⁷³ To be successful, diversity initiatives should use an *anti-oppressive approach to practice* (*AOP*)^{74,75} and there must be adequate resources, well-trained staff and accountability mechanisms in place.⁷³

Best practices

- All partners adopt an anti-oppressive practice (AOP) lens and actively use this approach to ensure diverse and inclusive processes.
- There are strategies in place to engage youth with diverse perspectives, skills and abilities, as well as different socio-demographic characteristics.

Definitions

anti-oppressive practice (AOP): approach that encourages diversity, prioritizes the needs and strengths of marginalized groups and works to transform structures that create inequalities.⁷⁵

culture: shared experiences of people, including their language, values, customs, beliefs, worldviews, ways of knowing, and ways of communicating. Culturally significant factors encompass, but are not limited to race/ethnicity, religion, social class, language, disability, sexual orientation, age and gender.⁷⁶

diversity: a broad term that refers to the variety of differences among people, often within the context of culture, education, organizations or workplaces.⁷⁷

equity: fairness; creating equal access and opportunities; achieved by removing barriers that prevent access to mental health care or engagement opportunities, particularly barriers related to gender, race, sexual orientation, income, education and many other identities.⁷⁸

inclusion: striving for equity and maintaining a culture where difference within the collective is embraced, respected, accepted and valued;⁷⁹ the process of improving the ability, opportunity, and dignity of participation for those disadvantaged on the basis of their identity.⁷⁷

cultural barriers:

obstacles, inconveniences and difficulties resulting from differences or misunderstanding of customs and cultural practices, including obligations towards family and notions of community, safety and gender.³²

political barriers:

legislative and institutional policies that may prevent access, opportunities, funding or other support for youth participation in organizational decision making.³²

social barriers:

constraints or inequalities imposed – because of socially-constructed hierarchies of social status (based on differences including gender, ethnicity, race, religion, health, socioeconomic status, etc.) — that prevent an individual from accessing resources or opportunities or otherwise advancing their own interests.³²



ONGOING LEARNING

Youth and partners understand the principles of youth engagement and seek opportunities to continually increase their knowledge and skills relating to youth engagement practices and other relevant areas.

What this means for...



Youth

You are given a range of opportunities (during times and in places and ways that make sense for you) to acquire the tools, knowledge and skills to be able to engage and partner effectively at the agency or system-level. The adults you work with are also prepared to engage effectively.



Agencies

You see youth as an asset and ensure your organization creates ongoing learning opportunities for both staff and the youth you partner with to build their knowledge and skills.



System decision-makers

You make sure all partners, including youth, know what skills and knowledge are needed to engage at the system level and you work towards building the necessary preparation into system-level processes.

Background and rationale

Excellent youth engagement includes learning and reflecting about one's own engagement, about other partners' perspectives and experiences, about the issue(s) at hand and about where and how improvements could be made.⁶⁰

All partners need to understand the principles and philosophy of youth engagement, have opportunities to increase their knowledge and skills and feel encouraged to do so.⁶¹ Organizations must build capacity and ensure that staff, youth and other engagement partners are prepared and supported to successfully work together. This means putting in place policies, procedures and other structures to ensure that youth and partners have the tools and *resources* needed for successful youth engagement.³⁵

Individual aptitude, competencies, motivations, interests and needs vary greatly among youth. Organizations must create a range of engagement options and support youth as they acquire the skills required to participate in governance structures. This includes strengthening and expanding training opportunities. Training and *learning opportunities* for youth may focus on specific competencies (such as program evaluation), specific content areas (such as the province's mental health priorities) or general skillsets (such as public speaking).⁶¹

Youth-adult partnerships are also extremely valuable to ongoing learning and skill development in young people.⁸⁰ Research has shown that strong, supportive relationships are important when youth are involved in collaborative work, especially as the work becomes more complex.^{81,82,83} To effectively support and facilitate effective youth engagement, partnering adults need to learn how to balance young peoples' need for autonomy and voice while providing enough guidance and emotional support.^{84,85} Their training may cover topics such as positive youth development and interacting with youth on a multi-generational project team.⁶¹

Organizations must build capacity and ensure that staff, youth and other engagement partners are prepared and supported to successfully work together.

Best practices

 All partners are well-prepared to participate in all activities and processes, including decision making. Namely, they are aware of, and knowledgeable about, youth engagement policies and practices and other relevant topics.

Definitions

learning opportunities: coaching, training or other learning events supporting the pursuit of knowledge and skills to achieve a goal; building on strengths among individuals, organizations and communities.⁶²

youth-adult partnership: an intentional relationship between young people and adults that relies on adults acknowledging and empowering the ability, perspectives, ideas and knowledge of young people throughout the relationship.⁸⁷



RESEARCH AND EVALUATION

Youth and partners jointly research, evaluate and make ongoing quality improvements to youth engagement practices and other relevant projects and processes.

What this means for...



Youth

You have the opportunity to develop relevant skills as an active partner in developing and carrying out research and evaluation activities. You feel empowered as an equal with a unique voice to contribute to improve processes in the child and youth mental health system and youth engagement itself.



Agencies

You have normalized co-evaluation in your practices and processes. You seek opportunities for youth to be engaged in research and evaluation activities and provide mentoring to help develop relevant skills.



System decision-makers

You regularly and frequently engage young people, working jointly to develop and carry out system-level research, evaluation and improvement efforts.

Background and rationale

The highest level of youth engagement involves youth as active partners in developing and carrying out all activities, including *research* and *evaluation*. This includes ongoing evaluation of youth engagement processes in general and their own engagement experience.

Engaging youth in research and evaluation has benefits for youth, agencies and the child and youth mental health system. Young people who share their experiences and expertise improve their ability to ask the right questions, use the best language, communicate intent, ensure youth-friendly evaluation tools are used and collect accurate information to help inform *decision making*.^{72,88,89} This results in decisions that are more useful and more effective for all stakeholders.

More importantly, involving youth in research and evaluation can equalize power imbalances between youth and adults, contribute to *positive youth development*,

promote the growth of youth governance and build youth-community relationships.^{41,72,88,90} When other partners act as mentors and allies, youth can practice and master research and evaluation skills, including creating logic models, collecting and analyzing data, thinking critically, writing reports and lending their unique perspectives to the overall research and evaluation processes.

Best practices

- Youth are provided with training opportunities on research and evaluation processes and methods.
- Youth are co-developers and co-evaluators of research and evaluation processes (e.g. design, implementation, analysis, dissemination and mobilization).

Involving youth in research and evaluation can equalize power imbalances between youth and adults, contribute to positive youth development, promote the growth of youth governance and build youthcommunity relationships.

Definitions

evaluation: systematic collection and analysis of information to understand whether a project, service or process is doing what it was intended to do and how well (or not) it is doing so.⁹⁰

quality improvement: systematic approach to making changes that lead to better patient [client] outcomes and stronger health system performance. This approach involves the application of Quality Improvement (QI) science, which provides a robust structure, tools and processes to assess and accelerate efforts for the testing, implementation and spread of QI practices.⁶⁰

research: process of creating new knowledge or the use of existing knowledge in a new and creative way to generate new concepts, methodologies and understandings. This includes synthesis and analysis of previous research to the extent that it leads to new and creative outcomes.⁹¹



SAFER SPACES

Youth and partners co-create and regularly check-in to establish and maintain an environment in which everyone feels comfortable, embraced and able to speak freely.

What this means for...



Youth

Your safety is a priority in all engagement processes. You co-create and maintain a welcoming environment and safer space for all partners.



Agencies

The safety of young people and staff members is a priority in all engagement processes. This is supported by relevant policies and procedures. All staff, especially leadership, work to ensure safer spaces.



System decision-makers

You model safer spaces in youth engagement processes, set system-wide expectations for what safer spaces look like and hold the sector responsible for meeting these.

Background and rationale

A welcoming environment that provides physical and psychological safety is essential for meaningful youth engagement. Safety is especially important when sharing personal experiences and generally enhances young people's ability to learn and participate freely.⁹²

When it comes to safety, it is important to distinguish between a "place" and a "space". The place is the physical location, and the space is created by those who interact within it.⁵¹ A safe space is about the behaviours and interactions that create an open and accepting environment. It is a space where everyone feels respected and valued. In a *safer space*, people can express themselves honestly and authentically,⁹² and they can contribute actively without fear of being judged on account of their social identities such as religion, gender, sexuality, ability, etc.⁹³

Adults have a responsibility regarding their youth partners and must take every precaution to minimize the risk of harm, exploitation or any other negative consequence of their participation.⁹² Creating safer spaces for youth engagement

A safe space is about the behaviours and interactions that create an open and accepting environment... where everyone feels respected and valued. also requires a collaborative approach between youth and partners. Together, they build the understanding of the value of engagement, minimize risks and make sure spaces for engagement are youth-friendly.^{51,68,92}

This might include identifying the core values they want to define the space, setting group norms and expectations and putting in place a mutually-agreed upon anti-discrimination policy and process to resolve conflicts. Other tips include adopting a *trauma-informed* lens, offering clinical support, holding programming in safe environments and making sure that all partners — including youth — are well-informed about the policies and procedures surrounding workplace safety, *discrimination* and *harassment*.^{35,51,92}

Best practices

- Youth collaborate in efforts to ensure safer spaces, including minimizing risks and ensuring an accepting environment where all can feel valued and respected.
- There are mechanisms in place to ensure a physically and psychologically safe environment, including designated clinical and emotional support.

Definitions

discrimination: unfair treatment due to a person's identity, which includes race, ancestry, place of origin, color, ethnic origin, citizenship, creed, sex, sexual orientation, gender identity, gender expression, age, marital status, family status or disability including mental disorders.⁹⁴

harassment: any inappropriate conduct, comment, action or gesture by a person that adversely affects another person's psychological or physical well-being and that the person knows or ought reasonably to know would cause someone to be humiliated; behavior that intimidates or that constitutes a threat to the health of others.⁹⁵

safe space: a secure physical environment that is also free of personal, social and psychological harm; an environment in which everyone is encouraged to authentically express their views and explore their knowledge, behaviour, and attitudes without feeling defensive.⁹³

physical safety:

the absence of harm or injury that may be caused by a physical object or practices that include a physical object.⁹⁶

psychological safety:

the absence of harm and/or threat of harm to mental well-being.⁹⁶

trauma-informed approach:

an approach that understands the widespread impact of trauma, recognizes the signs and symptoms of trauma in partners and actively seeks to avoid re-traumatization by embedding key trauma principles into organizational culture and all relevant policies, procedures and practices.⁹⁷



SOURCES

- Office of the Auditor General of Ontario. (2016). Chapter 3: Child and youth mental health. <u>2016 Annual Report</u>. Toronto, ON: Queen's Printer for Ontario.
- 2. Burton, M., Cohen, A.K. & Jain-Aghi, S. (2014). Family partners improve early childhood mental health services. *Psychiatric Services*, 65(11), 1376. <u>https://doi.org/10.1176/appi.ps.651002</u>
- 3. Walker, J.S., Seibel, C.L. & Jackson, S. (2017). Increasing youths' participation in team-based treatment planning: The Achieve My Plan enhancement for wraparound. *Journal* of Child and Family Studies, 26(8), 2090-2100. <u>https://doi.</u> org/10.1007/s10826-017-0738-0
- Davis, C., Claudius, M., Palinkas, L., Wong, J. & Leslie, L. (2012). Putting families in the center: family perspectives on decision making and ADHD and implications for ADHD care. *Journal of Attention Disorders, 16*(8), 675-684. <u>https://doi.org/10.1177/1087054711413077</u>
- 5. Dempsey, I. & Keen, D. (2008). A review of processes and outcomes in family-centered services for children with a disability. *Topics in Early Childhood Special Education, 28*(1), 42-52. https://doi.org/10.1177/0271121408316699
- Koren, P. E., Paulson, R. I., Kinney, R.F., Yatchmenoff, D., Gordon, L. & Dechillo, N. (1997). Service coordination in children's mental health: An empirical study from the caregiver's perspective. *Journal of Emotional* & *Behavioral Disorders*, 5(3), 162-173. <u>https://doi.org/10.1177/106342669700500304</u>
- Law, M., Rosenbaum, P., King, G., King, S., Burke-Gaffney, J., Moning-Szkut, T. ... Teplicky, R. (2003). *Family-centred service* <u>sheet 3: How does family-centred service make a difference?</u> Hamilton, ON: CanChild Centre for Childhood Disability Research, McMaster University.
- Bellin, M. H., Osteen, P., Heffernan, C., Levy, J. M. & Snyder-Vogel, M. E. (2011). Parent and health care professional perspectives on family-centered care for children with special health care needs: Are we on the same page? *Health* and Social Work, 36(4), 281-290. <u>https://doi.org/10.1093/</u>

<u>hsw/36.4.281</u>

- 9. Centre for Addiction and Mental Health (CAMH). (2004). Putting family-centred care philosophy into practice. Report by the Community Research, Planning, and Evaluation Team. Toronto, ON: Author.
- 10. Institute for Patient and Family-Centered Care. (2009). <u>Advancing the practice of patient-and family-centered care in primary care: How to get started</u>. Bethesda, MD: Author.
- 11. MacKean, G., Spragins, W., L'Heureux, L., Popp, J., Wilkes, C. & Lipton, H. (2012). Advancing family-centered care in child and adolescent mental health: A critical review of the literature. *Healthcare Quarterly*, *15*(4), 64-75. <u>https://doi.org/10.12927/hcq.2013.22939</u>
- 12. Zeldin, S. (2004). Youth as agents of adult and community development: Mapping the processes and outcomes of youth engaged in organizational governance. *Applied Developmental Science*, 8(2), 75-90. <u>https://doi.org/10.1207/ s1532480xads0802_2</u>
- 13. Gyamfi, P., Keens-Douglas, A. & Medin, E. (2007). Youth and youth coordinators' perspectives on youth involvement in systems of care. *Journal of Behavioral Health Services & Research, 34*(4), 382-394. <u>https://doi.org/10.1007/s11414-007-9068-0</u>
- 14. Ontario Ministry of Children and Youth Services. (2015). <u>Community-based child</u> <u>and youth mental health program guidelines and requirements # 01: Core services</u> <u>and key processes</u>. Toronto: Government of Ontario.
- 15. Health Quality Ontario. (2016). *Quality standards: Process and methods guide.* Toronto, ON: Author.
- 16. Centre of Excellence for Youth Engagement. (2009). *Sharing the stories: Snapshot survey.* Toronto, ON: The Students Commission.
- 17. Dyer, C. & Pereira, N. (2011). *The art of youth engagement: Trainer guide.* Ottawa: Ontario Centre of Excellence for Child and Youth Mental Health.
- Pereira, N. (2007). <u>Ready... set... engage! Building effective youth-adult</u> partnerships for a stronger child and youth mental health system. Children's Mental Health Ontario and the Ontario Centre of Excellence for Child and Youth Mental Health.
- 19. Apathy is Boring. (2004). *The youth-friendly guide to intragenerational decision making partnerships.* Montreal: Author.

- 20. Bradley, D. & Schneider, H. (2004). <u>Participatory approaches: A facilitator's guide</u>. Kingston upon Thames, UK: Voluntary Service Overseas.
- 21. Mikkonen, J. & Raphael, D. (2010). <u>Social determinants of health: The Canadian</u> <u>facts</u>. Toronto, ON: York University School of Health Policy and Management.
- 22. Ure, J. (n.d.) <u>The youth engagement spectrum</u>. Halifax, NS: Hearwood Centre for Community Youth Development.
- Catalano, R. F., Berglund, M. L., Ryan, J. A., Lonczak, H. S. & Hawkins, J. D. (2004). Positive youth development in the United States: Research findings on evaluations of positive youth development programs. *Annals of the American Academy of Political and Social Science*, 591(1), 98-124. <u>https://doi.org/10.1177/0002716203260102</u>
- 24. Michelsen, E., Zaff, J. F. & Hair, E. C. (2002). *Civic engagement programs and youth development: A synthesis.* Washington, DC: Child Trends.
- 25. Walker, J. S. (2015). A theory of change for positive developmental approaches to improving outcomes among emerging adults with serious mental health conditions. *Journal of Behavioral Health Services & Research, 42*(2), 131-149. https://doi.org/10.1007/s11414-015-9455-x
- 26. Hart, R. A. (1997). Children's participation: The theory and practice of involving young citizens in community development and environmental care. London: Earthscan.
- 27. Peel Children's Centre. (2018). *The provincial landscape of evaluative practices for youth engagement*. Mississauga, ON: Author.
- 28. Carman, K. & Workman, T. (2017). Engaging patients and consumers in research evidence: Applying the conceptual model of patient and family engagement. *Patient Education and Counseling, 100*(1), 25-29. <u>https://doi.org/10.1016/j.pec.2016.07.009</u>
- 29. Mokwena, S. (2006). *Putting youth engagement into practice: A toolkit for action.* London, UK: The Commonwealth Secretariat.
- 30. Ho, V. (2014). <u>Youth engagement strategy: Getting involved in city planning</u>. Toronto, ON: City of Toronto.
- 31. Saito, R. (2006). Beyond access and supply: Youth-led strategies to captivate young people's interest in and demand for youth programs and opportunities. *New Directions for Student Leadership, 2006*(112), 57-74. <u>https://doi.org/10.1002/yd.193</u>

- 32. D'Agostino, M. J. & Visser, A. (2010). Addressing and overcoming barriers to youth civic engagement. *International Public Management Review, 11*(3), 88-103. http://journals.sfu.ca/ipmr/index.php/ipmr/article/viewFile/89/89_
- 33. Perkins, D.F., Borden, L.M., Villarruel, F.A., Carlton-Hug, A., Stone, M.R. & Keith, J.G. (2007). Participation in structured youth programs: Why ethnic minority urban youth choose to participate or not to participate. *Youth and Society, 38*(4), 420-442. <u>https://doi.org/10.1177/0044118X06295051</u>
- 34. Camino, L. & Zeldin, S. (2002a). From periphery to center: Pathways for youth civic engagement in the day-today life of communities. *Applied Developmental Science*, 6(4), 213-220. <u>https://doi.org/10.1207/S1532480XADS0604_8</u>
- 35. United Nations International Children's Emergency Fund. (n.d.). <u>Adolescent and</u> <u>youth engagement strategic framework</u>. New York, NY: UNICEF.
- 36. Freeman, C., Henderson, P. & Kettle, J. (1999). *Planning with children for better communities: the challenge for professionals.* Bristol, UK: Policy Press.
- 37. Kinark Child and Family Services. (2017). Building capacity for stakeholder engagement in child and youth mental health services. Unpublished manuscript.
- 38. Accessibility Ontario. (n.d.). Definitions (web page). <u>https://accessontario.com/</u> <u>aoda/definitions/</u>
- 39. Kaslow, N. J. (2004). Competencies in professional psychology. American Psychologist, 59(8), 774-781. <u>http://dx.doi.org/10.1037/0003-066X.59.8.774</u>
- 40. Narayan, D. (2002). *Empowerment and poverty reduction: A sourcebook.* Washington, DC: World Bank.
- 41. Zeldin, S., McDaniel, A., Topitzes, D. & Calvert, H. (2000). <u>Youth in decision</u> <u>making: A study of the impact of youth on adults and organizations</u>. Chevy Case, MD: National 4-H Council.
- 42. Canadian Medical Association. (n.d.) Ensuring equitable access to care: Strategies for governments, health system planners and the medical profession. (CMA Position Statement). <u>https://legacy.cma.ca//Assets/assets-library/document/en/advocacy/PD14-04-e.pdf</u>
- 43. Checkoway, B., Allison, B. & Montoya, C. (2005). Youth participation in public policy at the municipal level. *Children and Youth Services Review, 27*(10), 1149-1162. <u>https://doi.org/10.1016/j.childyouth.2005.01.001</u>

- 44. Collins, M. E., Augsberger, A. & Gecker, W. (2016). Youth councils in municipal government: Examination of activities, impact and barriers. Children and Youth Services Review, 65, 140-147. <u>https://doi.org/10.1016/j.childyouth.2016.04.007</u>
- 45. Martin, S., Pittman, K., Ferber, T. & McMahon, A. (2007). *Building effective youth councils: A practical guide to engaging youth in policy making.* Washington, DC: The Forum for Youth Investment.
- 46. Luluquisen, M. & Pettis, L. (2014). Community engagement for policy and systems change. *Community Development, 45*(3), 252-262. <u>https://doi.org/10.1080/155753</u> 30.2014.905613
- 47. Collins, M. E. (2004). Enhancing services to youths leaving foster care: Analysis of recent legislation and its potential impact. *Children and Youth Services Review*, 26(11), 1051-1065. <u>https://doi.org/10.1016/j.childyouth.2004.08.005</u>
- 48. Havlicek, J., Lin, C. H. & Villalpando F. (2016). Web survey of foster youth advisory boards in the United States. *Children and Youth Services Review, 60*(1), 109-118. https://doi.org/10.1016/j.childyouth.2015.11.023
- Walker, J.S., Masselli, M. B., Blakeslee, J., Baird, C. & Rhoep, K. (2018). Development and testing of an assessment of youth/young adult voice in agency-level advising and decision making. *Children and Youth Services Review*, 94(11), 598-605. <u>https://doi.org/10.1016/j.childyouth.2018.08.040</u>
- 50. Richards-Schuster, K. & Timmermans, R. (2017). Conceptualizing the role of adults within youth-adult partnerships: An example from practice. *Children and Youth Services Review, 8*1(10), 284-292. <u>https://doi.org/10.1016/j.childyouth.2017.07.023</u>
- 51. British Columbia Ministry of Children and Family Development. (2013). <u>Youth</u> <u>Engagement Toolkit Evaluation Tool</u>. Victoria, BC: University of Victoria School of Child and Youth Care.
- 52. Akiva, T., Cortina, K. S. & Smith, C. (2014). Involving youth in program decision making: How common and what might it do for youth? *Journal of Youth and Adolescence, 43*(11), 1844-1860. <u>https://doi.org/10.1007/s10964-014-0183-y</u>
- 53. Gambone, M., Yu, H., Lewis-Charp, H. Sipe, C., Lacoe, J. (2004). <u>A Comparative</u> <u>Analysis of Community Youth Development Strategies</u>. College Park, MD: The Center for Information and Research on Civic Learning and Engagement (University of Maryland).
- 54. MacNeil, C. (2005). *Youth in governance brief.* Davis, CA: 4-H Youth Development Program (University of California).
- Zeldin, S. & Collura, J. (2010). <u>Being Y-AP Savvy: A primer on creating & sustaining</u> <u>youth-adult partnerships</u>. Madison, WI: Center for Nonprofits (University of Wisconsin-Madison).

32 Quality standard for youth engagement

- 56. British Columbia Ministry of Health. (2018). <u>Patient, family, caregiver and public</u> <u>engagement framework</u>. Victoria, BC: Government of British Columbia.
- 57. Murray., J. (2018). What is a partnership? How does it work? *The Balance Small Business* (online periodical). <u>https://www.thebalance.com/what-is-a-business-partnership-398402</u>
- 58. Chovil, N. (2009). <u>Engaging families in child and youth mental health: A review</u> of best, emerging, and promising practices. West Vancouver, BC: The F.O.R.C.E. Society for Kids' Mental Health.
- 59. Robert, G. (2013). Participatory action research: Using experience-based codesign (EBCD) to improve healthcare services. In S. Ziebland, J. Calabrese, A. Coulter & L. Locock (Eds.), *Understanding and using experiences of health and illness.* Oxford, UK: Oxford University Press.
- 60. Health Quality Ontario (HQO). (2017). <u>Ontario's patient engagement framework:</u> <u>Creating a strong culture of patient engagement to support high quality health</u> <u>care</u>. Toronto: Author.
- 61. French, M., Bhattacharya, S. & Olenik, C. (2014). <u>Youth engagement in</u> <u>development: Effective approaches and action-oriented recommendations for the</u> <u>field</u>. Washington DC: United States Agency for International Development.
- 62. Youth Wellness Hubs Ontario. (2017). Youth Wellness Hubs Ontario: A primer.
- 63. Head, B.W. (2011). Why not ask them? Mapping and promoting youth participation. *Children and Youth Services Review, 33*(4), 541-547. <u>https://doi.org/10.1016/j.childyouth.2010.05.015</u>
- 64. Chapman, A. (2017). <u>Meaningful Youth Engagement: Strengthening Prevention of</u> <u>Substance Use Disorders</u>. Boston, MA: Community Catalyst.
- 65. Libby, M., Rosen, M. & Sedonaen, M. (2005). Building youth-adult partnerships for community change: Lessons from the youth leadership institute. *Journal of Community Psychology*, 33(1), 111-120. <u>https://doi.org/10.1002/jcop.20037</u>
- 66. Cooper-Hakim, A. & Viswesvaran, C. (2005). The construct of work commitment: Testing an integrative framework. *Psychological Bulletin*, 131(2), 241-259. <u>https://doi.org/10.1037/0033-2909.131.2.241</u>
- 67. Her Majesty's Government. (2005). <u>Common Core of Skills and Knowledge for</u> <u>the Children's Workforce</u>. Nottingham, UK: Department for Education and Skills Publications.

- 68. Government of South Australia. (2016). <u>Better together: A practical guide to</u> <u>effective engagement with young people</u>. Adelaide, Aus.: Government of South Australia.
- 69. Grinnell, R. (2018). Active Listening. Psych Central (online encyclopaedia). <u>https://psychcentral.com/encyclopedia/active-listening/</u>
- 70. Butterfoss, F. (2015). Coalitions and partnerships in community health. San Francisco, CA: Jossey-Bass.
- 71. Funchess, M., Spencer, S. & Niarhos, M. (2014). <u>The evolution: family-driven care as</u> <u>a practice. A practical guide on understanding family-driven practice on all levels</u>. Rockville, MD: National Federation of Families for Children's Mental Health.
- 72. London, J.K., Zimmerman, K. & Erbstein, N. (2003). Youth-led research and evaluation: Tools for youth, organizational and community development. *New Directions for Evaluation*, 2003(98), 33-45. <u>https://doi.org/10.1002/ev.83</u>
- 73. Lam, R. & Cipparrone, B. (2008). <u>Achieving cultural competence: A diversity toolkit</u> <u>for residential care settings</u>. Toronto, ON: Ontario Ministry of Children and Youth Services.
- 74. Larson, G. (2008). Anti-oppressive practice in mental health. *Journal of Progressive Human Services, 19*(1), 39-54. <u>https://www.tandfonline.com/doi/abs/10.1080/10428230802070223?journalCode=wphs20</u>
- 75. Wong, H. & Yee, J.Y. (2010). <u>An anti-oppression framework for child welfare in</u> <u>Ontario</u>. Toronto, ON: The Ontario Child Welfare Anti-Oppression Roundtable, Ontario Association of Children's Aid Societies (OACAS).
- 76. Khanlou, N. (2003). Mental health promotion education in multicultural settings. *Nurse Education Today, 23*(2), 96-103. <u>https://doi.org/10.1016/S0260-6917(02)00207-1</u>
- 77. Ontario Healthy Communities Coalition (2017). <u>Action for inclusion: A resource kit</u> for community conversations. Toronto, ON: Author.
- Ramey, L. H., Lawford, L. H., Rose-Krasnor, L., Freeman, J. & Lanctot, J. (2018). Engaging diverse Canadian youth in youth development programs: Program quality and community engagement. *Children and Youth Services Review*, 94(11), 20-26. <u>https://doi.org/10.1016/j.childyouth.2018.09.023</u>
- 79. Canadian Centre for Diversity and Inclusion. (n.d.). Diversity Defined. (Web page) <u>https://ccdi.ca/our-story/diversity-defined/</u>

- 80. Akiva, T. & Petrokubi, J. (2016). Growing with youth: A lifewide and lifelong perspective on youth-adult partnership in youth programs. *Children and Youth Services Review,* 69(10), 248-258. <u>https://doi.org/10.1016/j.childyouth.2016.08.019</u>
- Jones, K. R. & Perkins, D. F. (2006). Youth and adult perceptions of their relationships within community-based youth programs. *Youth & Society, 38*(1), 90-109. <u>https://doi.org/10.1177%2F0044118X06287860</u>
- McIntosh, H. & Youniss, J. (2010). Toward a political theory of political socialization of youth. In Sherrod, L.R., Torney-Purta, J. & Flanagan, C.A. (eds.) *Handbook of research on civic engagement in youth*, 23-41. <u>https://doi.org/10.1002/9780470767603.ch1</u>
- 83. Li, J. & Julian, M. M. (2012). Developmental relationships as the active ingredient: A unifying working hypothesis of "what works" across intervention settings. *American Journal of Orthopsychiatry*, 82(2), 157. <u>https://doi.org/10.1111/j.1939-0025.2012.01151.x</u>
- 84. Camino, L., & Zeldin, S. (2002b). Making the transition to community youth development: Emerging roles and competencies for organizations and youth workers. In Institute for Just Communities (Eds.), *Community youth development anthology.* Waltham, MA: Brandeis University.
- 85. Hogan, K. (2002). Pitfalls of community-based learning: How power dynamics limit adolescents' trajectories of growth and participation. *Teachers College Record*, 104(3), 586-624. <u>https://eric.ed.gov/?id=EJ649787</u>
- Osher, T. W., van Kammen, W. & Zaro, S. M. (2001). Family participation in evaluating systems of care: family, research, and service system perspectives. *Journal of Emotional and Behavioral Disorders*, 9(1), 63-71. <u>https://doi.org/10.1177/106342660100900107</u>
- 87. Fletcher, A. (2008). Youth/adult partnerships (web page). Freechild Insitute. <u>http://www.freechild.org/yapartnerships.htm</u>
- 88. Powers, J.L & Tiffany, J.S. (2006). Engaging youth in participatory research and evaluation. *Journal of Public Health Management and Practice, 12*, S79-87. <u>https://doi.org/10.1097/00124784-200611001-00015</u>
- 89. Goto, K., Pelletier, P., Pelto, G. & Tiffany, J. S. (2006). Unpublished observation cited in: Engaging youth in participatory research and evaluation. *Journal of Public Health Management Practice*, S79-S87. <u>https://doi.org/10.1097/00124784-200611001-00015</u>
- 90. Checkoway, B. & Richards-Schuster, K. (2003). Youth participation in community evaluation research. *American Journal of Evaluation, 24*(1), 21-33. <u>https://doi.org/10.1</u> <u>177%2F109821400302400103</u>

- 91. Australian Department of Education and Training. (2017). <u>2018 Higher education</u> <u>research data collection: Specifications for the collection of 2017 data</u>. Canberra, Aus.: Government of Australia Department of Education and Training._
- 92. Pan-Canadian Joint Consortium for School Health. (2018). <u>Youth engagement</u> toolkit, Module 4: Youth engagement in action: Qualities of youth engagement.
- 93. Ryujin, D. T., Collett, D. & Mulitalo, K. (2016). From safe to brave spaces: A component of social justice curriculum in physician assistant education. *Journal of Physician Assistant Education*, 27(2), 86–88. <u>https://doi.org/10.1097/JPA.0000000000000073</u>
- 94. Canadian Mental Health Association (n.d.). Stigma and discrimination (web page). https://ontario.cmha.ca/documents/stigma-and-discrimination/
- 95. Lippel, K. (2011). Law, public policy and mental health in the workplace. Healthcare Papers, 11, 20-37. <u>https://doi.org/10.12927/hcpap.2011.22408</u>
- 96. Your Experiences Matter. (n.d.). What is Physical Safety? (Web page). <u>http://</u> yourexperiencesmatter.com/learning/safe-spaces/physical-safety/what-isphysical-safety/
- 97. Substance Abuse and Mental Health Services Administration (SAMSHA). (2014). <u>SAMHSA's Concept of Trauma and Guidance for a Trauma-informed Approach</u>. Rockville, MD: Author.

Page intentionally left blank.



APPENDICES

Appendix A: Youth engagement advisory group

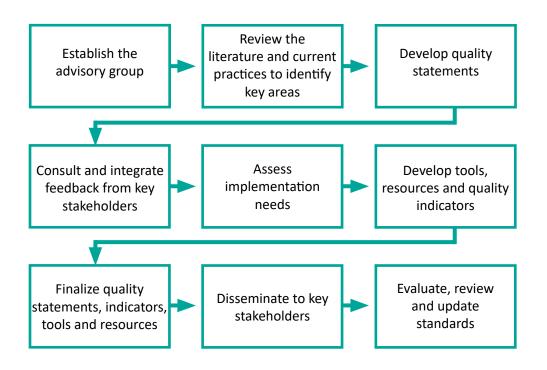
- Caralyn Quan, Program Manager, The New Mentality
- Christine Brook, Program Director, Children's Mental Health of Leeds and Grenville
- Gagandeep Virdi, Youth
- Karen Ingebrigtson, CEO, Firefly
- Linda Rose-Krasnor, Professor, Brock University
- Muna Mohamed, Youth
- Natasha McBreaty, Associate Executive Director, Crossroads Children's Mental Health Centre

Centre staff acknowledgements

- Brooke Eboule, Communications Specialist
- Cameron Jette, Youth Advisor
- Chrissi Galanakis, Senior Data Analyst
- Evangeline Danseco, Performance Measurement Coach
- Huma Muhammadi, Research Assistant
- Jana Kokourek, Manager, Engagement and standards
- Julie Breau, Quality Improvement Specialist
- Kamill Santafe, Youth Advisor
- Kristina Rohde, Quality Improvement Specialist
- Marta Krygier-Bartz, Research Assistant
- MaryAnn Notarianni, Director, Special Projects and Operations
- Shruti Patel, Program Associate
- Tracey MacLaurin, Project Coordinator

Appendix B: Standard development process

To develop this quality standard, the Centre adapted the process from Health Quality Ontario's Quality Standards process and methods guide.¹⁵ The major steps are outlined below.



Appendix C: Glossary

accessibility: the design of products, devices, services or environments for people of differing needs (for example, newcomers with limited English or those with a disability).

accessible: activities (including communication and processes), products (such as devices) and environments that are designed to be easy to understand, use, participate or access, especially for people who face physical, social, cultural or political barriers.

active listening: paying close attention to a conversational partner's words, repeating back key ideas and phrases from time to time to confirm one's understanding of what the person has said. Demonstrates respect for — though not necessarily agreement with — the other person's feelings and views.

adult ally: a trusted adult that supports, advocates for and works collaboratively with youth; one who provides nonjudgmental guidance, structure and safety for youth.

anti-oppressive practice (aop): approach that encourages diversity, prioritizes the needs and strengths of marginalized groups and works to transform structures that create inequalities.

authentic relationships: relationships uilt on respect and trust that involve an equal power balance between youth and adults who work as a collective to achieve common goals.

barrier: a circumstance or obstacle that separates people from other people, places or things. Barriers come in many forms — including attitudes, policies and programs, as well as physical, social, communication or transportation obstacles — and may even be unintentional.

co-development: process of working collaboratively on a shared purpose; joint decision making; a commitment to action and collective accountability among all stakeholders.

commitment: willingness to persist in a course of action, often owing to a sense of obligation to stay the course; the state or quality of being dedicated to a cause, activity, etc.

communication: the exchange of thoughts, messages or information between people or among a group of people, using spoken languages, body language, tone of voice and gestures. Effective communication occurs when there is a shared understanding; in other words, the message that is received and understood is the same message that was sent.

competence: an individual's capacity and demonstrated ability to understand and appropriately and effectively do the tasks they could reasonably be expected to do based on their education and training.

cultural barriers: obstacles, inconveniences and difficulties resulting from differences or misunderstanding of customs and cultural practices, including obligations towards family and notions of community, safety and gender.

culture: shared experiences of people, including their language, values, customs, beliefs, worldviews, ways of knowing, and ways of communicating. Culturally significant factors encompass, but are not limited to race/ethnicity, religion, social class, language, disability, sexual orientation, age and gender.

decision making: process of collecting information, establishing selection criteria, developing possible alternatives or options and evaluating the most appropriate option based on selection criteria.

discrimination: unfair treatment due to a person's identity, which includes race, ancestry, place of origin, color, ethnic origin, citizenship, creed, sex, sexual orientation, gender identity, gender expression, age, marital status, family status or disability including mental disorders.

diversity: a broad term that refers to the variety of differences among people, often within the context of culture, education, organizations or workplaces.

empowerment: the process of enhancing the capacities or abilities of individuals to influence or make informed choices and to transform those choices into desired actions and outcomes.

equitable: fair; not unduly benefiting or hindering any particular person(s) or group(s). Note: Not the same thing as equal, as in even or balanced.

equity: fairness; creating equal access and opportunities; achieved by removing barriers that prevent access to mental health care or engagement opportunities, particularly barriers related to gender, race, sexual orientation, income, education and many other identities.

evaluation: systematic collection and analysis of information to understand whether a project, service or process is doing what it was intended to do and how well (or not) it is doing so.

evidence-informed: practices and decision-making processes that 1) recognize clinical and practitioner knowledge and expertise and the lived experience of children, youth and families as evidence, alongside academic or research evidence and 2) systematically search, select, appraise and use all the best available evidence to deliver measurable benefits.

harassment: any inappropriate conduct, comment, action or gesture by a person that adversely affects another person's psychological or physical well-being and that the person knows or ought reasonably to know would cause someone to be humiliated; behavior that intimidates or that constitutes a threat to the health of others.

inclusion: striving for equity and maintaining a culture where difference within the collective is embraced, respected, accepted and valued; the process of improving the ability, opportunity, and dignity of participation for those disadvantaged on the basis of their identity.

learning opportunities: coaching, training or other learning events supporting the pursuit of knowledge and skills to achieve a goal; building on strengths among individuals, organizations and communities.

partnership: collaborative relationship between two or more people. People or organizations in a partnership collaborate to advance their mutual interests. A partnership involves sharing individual skills and resources, while working together towards a common goal.

physical safety: the absence of harm or injury that may be caused by a physical object or practices that include a physical object.

political barriers: legislative and institutional policies that may prevent access, opportunities, funding or other support for youth participation in organizational decision making.

positive youth development (PYD): a strength-based approach focused on supporting youth to thrive in adolescence and successfully transition to adulthood. Positive youth development initiatives include elemtns such as social connection, living skills, social inclusion, health and physical literacy, citizenship and contribution, academic success and employability, etc.

psychological safety: the absence of harm and/or threat of harm to mental wellbeing.

quality improvement: systematic approach to making changes that lead to better patient [client] outcomes and stronger health system performance. This approach involves the application of Quality Improvement (QI) science, which provides a robust structure, tools and processes to assess and accelerate efforts for the testing, implementation and spread of QI practices.

research: process of creating new knowledge or the use of existing knowledge in a new and creative way to generate new concepts, methodologies and understandings. This includes synthesis and analysis of previous research to the extent that it leads to new and creative outcomes. **resources:** the supply of money, materials, staff, physical facilities, attributes, capabilities and other available assets that can be used to support processes and activities.

safe space: a secure physical environment that is also free of personal, social and psychological harm; an environment in which everyone is encouraged to authentically express their views and explore their knowledge, behaviour, and attitudes without feeling defensive.

social barriers: constraints or inequalities imposed — because of socially-constructed hierarchies of social status (based on differences including gender, ethnicity, race, religion, health, socioeconomic status, etc.) — that prevent an individual from accessing resources or opportunities or otherwise advancing their own interests.

social determinants of health: the social, political, economic and environmental factors that can affect an individual's or group's health and wellbeing.

social media: online communication channels dedicated to community-based input, interactions, content-sharing and collaboration.

tokenism: the practice of making only a symbolic effort; trivial engagement of underrepresented groups.

transparency: an open flow of information, and clarity about decisions.

trauma-informed approach: an approach that understands the widespread impact of trauma, recognizes the signs and symptoms of trauma in partners and actively seeks to avoid re-traumatization by embedding key trauma principles into organizational culture and all relevant policies, procedures and practices.

youth: a period of developmental transition; a fluid notion depending on context rather than a fixed age-group. Youth may be defined differently by funders, organizations, cultures, communities, and self.

youth-adult partnership: an intentional relationship between young people and adults that relies on adults acknowledging and empowering the ability, perspectives, ideas and knowledge of young people throughout the relationship.

youth engagement: empowering youth as valuable partners in child and youth mental health to address and make decisions that affect them personally or that they believe to be important.



ONTARIO CENTRE OF EXCELLENCE FOR CHILD AND YOUTH MENTAL HEALTH

695 INDUSTRIAL AVE., OTTAWA, ON K1G 0Z1 613-737-2297 | CENTRE@CHEO.ON.CA

WWW.EXCELLENCEFORCHILDANDYOUTH.CA