



# Research and Action for Teens (RAFT)

## **Please Note:**

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## **CIHR Emerging Team Grant (2009 – 2014)**

Mitigating risk and creating effective treatments:  
Improving services to children and youth with  
co-morbidities through discovery, collaboration,  
innovation, and integration

# RAFT: Investigators

## Principal Investigators

- Joe Beitchman
- Joanna Henderson
- Shelley McMain
- Brian Rush
- David Wolfe

## Co-Investigators

- Beth McCay (Ryerson)
- Gloria Chaim
- Amy Cheung
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- Tracey Skilling
- Angela Boak
- Bob Mann
- Sandra Cunning (Kinark)
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- Bruce Ballon
- Jane Fjeld (Youth Service Bureau of Ottawa)
- Leslie Atkinson (Ryerson)

# RAFT: Collaborators

- Deb Goodman (CAS)
- Bruce Leslie (CCAS)
- Myra Levy (East Metro Youth Services)
- Tony Pignatiello (HSC)
- Susan Quesnel
- Joanne Shenfeld
- Caroline O'Grady
- Approximately 20 community-based agency partners
- 40-member national advisory committee

# **Research and Action for Teens (RAFT)**

# RAFT: Project Overview

## Organizing Framework

- Children and adolescents who are vulnerable to later problematic substance use are often already receiving services in various service settings (children's mental health, child welfare, youth justice, special education, primary care)
- Similarly, high rates of psychiatric disorders are found in youth substance abuse settings
- Despite these high rates of co-morbidity, co-occurring issues often go unaddressed and unmitigated

# RAFT: Project Overview

## Organizing Framework

- There are a number of factors that likely contribute to this:
  - Lack of knowledge about the developmental trajectories, common factors, directionality & temporal relationships of Concurrent Disorders
  - Lack of appropriate CD screening and assessment tools
  - Lack of appropriate integrated interventions
  - Gaps in CD awareness and capacity in the various service systems, lack of service system integration

# RAFT: Sub-Projects

- ***Cohort Study.*** A three-year longitudinal cohort study with school-based and clinic-referred samples - aims to better understand early adolescent development and health and the development of substance use and MH concerns among some youth, by following the same individuals over time
- ***Screening and Diagnosis.*** Several screening tools for youth substance use and mental health concerns will be validated on school-based and clinic-referred samples from across Ontario.
- ***Treatment.*** We aim to examine the feasibility and preliminary effectiveness of an integrated treatment approach for youth with CD and, in addition, an intervention for families of youth with CD, offered in both a hospital and community settings.
- ***Knowledge Translation and Exchange (KT & E).*** We will identify and survey National stakeholders and collaborate with 4 demonstration sites in Ontario to support implementation of a common CD screening tool and process across agencies and sectors.

# Cohort Study

(and Screening & Diagnosis  
subproject)

# Cohort Study: Design

- Four-wave longitudinal study
- Clinic-based and school-based samples
- Grade 7's and 8's (target age 11-14)
- Followed annually to age 14-17

# Screening and diagnosis

- Survey includes mental health and substance use screening tools.
  - GAIN Short Screener and other substance use screens and mental health measures
  - Diagnostic interview in follow-up waves
  - Predictive and concurrent validity
  - Clinical and normative samples

# Research Objectives

- Trace **onset/development** of mental health, substance use concerns and concurrent disorders
- Track **unmet need** for services/service utilization

# School-based Sample

- Grade 7 and 8 classes
  - Target  $N = 500$  for final wave
  - Initial wave  $N > 700$  (attrition)
  - Four regions in Ontario

# Participating School Boards

- Toronto DSB
- Toronto CDSB
- Lakehead DSB
- Huron-Superior CDSB
- Avon Maitland DSB
- Durham DSB
- Durham CDSB

# Ontario Student Drug Use and Health Survey (OSDUHS)

- Population survey of Ontario students in grades 7 to 12
- Longest running ongoing school survey in Canada, and the second longest in North America. **1977 -**
- Cross-sectional **anonymous** survey conducted every two years.
- Goal: Identify trends in student drug use, mental health and risk behaviour.

# Working with Schools

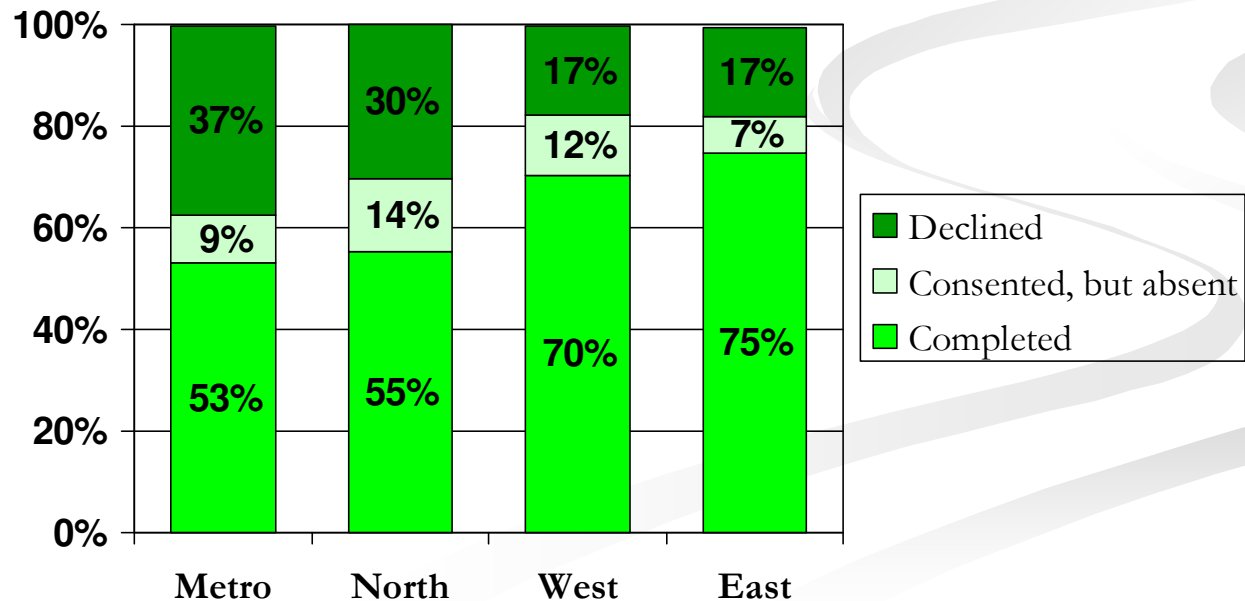
- Knowledge translation and exchange / compensation
  - Toolkits on mental health, substance use and concurrent disorders
  - Offered training - parent information nights and teacher training offered
  - Results of research

# School-based Study Response Rates

## ■ Overall

- 787 surveys were completed, 61% response rate
  - An additional 11% consented but were absent at the time of survey completion
  - 28% did not provide consent, or did not return the consent form

## ■ By Region



# Clinic-based Sample

- Children's Mental Health and Youth Addictions agencies
  - Target N = 500 for final wave
  - Initial wave N = 800 (attrition)
  - Four regions in Ontario

# Participating Clinical Sites

- **Breakaway Addictions – Toronto**
- **Hope Gray Bruce – Owen Sound**
- **Choices for Change – Stratford**
- **CAMH – Toronto**
- **CHEO - Ottawa**
- **Children’s Centre – Thunder Bay**
- **Cornwall Hospital – Cornwall**
- **Child and Parent Resource Institute – London**
- **Craigwood Youth Services – London**
- **Dufferin Child and Family Services – Orangeville**
- **East Metro Youth Services – Scarborough**
- **Hincks Dellcrest – Toronto**
- **Kinark – Markham**
- **Thunder Bay Counselling Centre – Thunder Bay**
- **Youthdale – Toronto**
- **Youth Services Bureau – Ottawa**
- **Vanier Children’s Services – London**

# Working with Agencies and Service Providers:

- Minimize Burden
  - Busy, often under-resourced
  - Agencies need to benefit from participation
- Flexibility in Processes
  - Common approach across agencies
  - Site-specific implementation
- Capacity Building
  - Clinical Training
  - Research Staff

# Analytic Strategy – Person-Centred

- Variable-centred approaches focus on the relations among variables (e.g., predictors and outcomes) across participants
- Person-centred approaches do not assume that the same processes apply to all individuals and examine particular combinations of difficulties/protective factors
- Latent Profile Analysis is a person-oriented group-based technique that reveals mutually exclusive clusters, or profiles, based on the ways members of a representative sample respond to a set of continuously distributed indicator variables

## Progress: Cohort Study

- Data collection for the school-based initial wave is complete
- Initial site visits have been conducted for 14 of the 17 agencies
- 10 of the 17 clinical sites have started collecting data
- Ethics protocol for wave 2 will be submitted to the Research Ethics Office this fall
- Wave 2 is expected to begin in February 2012

# Treatment Sub-project

# Treatment Sub-project

- To examine the feasibility and preliminary effectiveness of 2 treatment approaches for youth with CD at 3 sites in Ontario
- The interventions are as follows:
  - 3 sessions of individual motivational enhancement + 12 group sessions of Dialectical Behaviour Therapy skills
  - Skills training group (peer-led) for families (of youth not in treatment)

# Analytic Strategy

- Basic pre-post (mixed between and within subjects design), also look at moderators
- Same assessment measures as cohort study so latent profiles generated by cohort study will be used
- Likely profile membership for each participant will be estimated based on the equations for profiles developed in the cohort study
- Differences in treatment engagement, retention and outcomes will be examined which will allow to begin to address the ‘what works for whom’ question

# Progress: Treatment Study

- **Toronto (CAMH):**
  - therapist training is complete aside from ongoing supervision
  - ethics protocol submitted to Research Ethics Office
  - pilot group started during the summer
  - research recruitment expected to begin in the fall
  
- **Thunder Bay (Children's Centre):**
  - therapist training expected to start in Fall 2011
  - research recruitment expected to begin in January 2012
  - Research Assistant to be hired
  
- **Ottawa (Children's Hospital of Eastern Ontario):**
  - therapist training expected to start Spring 2012
  - research recruitment expected to begin in July 2012
  - Research Assistant to be hired

# KTE Sub-project

# Knowledge Translation & Exchange Sub-project

- This sub-project has 3 main components:
  - Identifying and surveying National stakeholders regarding CD services for children and adolescents
  - Collaborating with 4 communities in Ontario to support building of cross-sectoral networks and implementation of a common CD screening process & tool
  - Measure pre-post changes in CD capacity for capacity building initiatives

# Building Networks: Study Details

- Each network includes youth-serving agencies from across sectors including:
  - youth justice,
  - child welfare,
  - community health centres,
  - children's mental health,
  - youth additions, and
  - youth engagement/advocacy organizations
  
- We work collaboratively with the network and each agency to:
  - develop processes to embed the administration and clinical use of the GAIN-SS into existing processes;
  - to develop intra- and inter-agency decision-making protocols and resource lists to facilitate appropriate responses to information gathered using the screening tool;
  - to facilitate inter-agency referrals; and
  - to prepare a local report

# National Youth Screening Networks



Funded by: Health Canada,  
Drug Treatment Funding Program

# Drug Treatment Funding Program (DTEFP)

■ *Ontario Systems Projects*



# What is the DTFP?

## *Background*

Through consultations with provincial and territorial governments and non-governmental organizations, Health Canada developed the **Drug Treatment Funding Program (DTFP)** in 2008 as part of the Treatment Action Plan under the National Anti-Drug Strategy.

The DTFP is a federal contribution program designed to support provinces and territories in their efforts to strengthen evidence-informed substance abuse treatment **systems**; and address critical gaps in substance abuse treatment **services**, particularly for at-risk youth.

## *National/multi-jurisdictional projects*

In addition to the provincial and territorial projects being funded through the DTFP, three national/multi-jurisdictional projects have been funded:

- 1. Promoting Evidence-Based System Development**  
Canadian Centre on Substance Abuse
- 2. Enhancing Youth-Focused, Evidence-Informed Treatment Practices Through Cross-Sectoral Collaboration**  
National Youth Concurrent Disorders Capacity Building Team – CAMH, Ontario Core Project Working Group
- 3. Development of Needs-Based Planning Models for Substance Use Services and Supports in Canada**  
CAMH

# ■ Investment areas

The DTFP supports sustainable improvement in the quality and organization of substance abuse treatment systems through investments in the following areas:

■ IMPLEMENTATION  
OF EVIDENCE  
INFORMED  
PRACTICE

■ STRENGTHENING  
EVALUATION &  
PERFORMANCE  
MEASUREMENT

■ LINKAGE &  
EXCHANGE

# ■ Ontario Systems

## Projects

*Ontario Systems Projects by investment area*

Approximately \$6.78 million has been committed to fund twelve Ontario Systems Projects and a comprehensive independent evaluation, beginning April 1, 2011 and ending March 31, 2013.\*

\*Seven Service Level Projects have also been funded in the Province.

Project	Project Lead/Organization
<b>IMPLEMENTATION OF EVIDENCE INFORMED PRACTICE</b>	
Best Practice Assessment Procedures Project	Brian Rush, CAMH
Peer Support Services: Best Practices Project	Janis Cramp, Addictions Ontario
Trauma and Substance Abuse: Developing Best Practice Standards	Nancy Bradley, Jean Tweed Centre
<b>STRENGTHENING EVALUATION &amp; PERFORMANCE MEASUREMENT</b>	
Client Outcome Monitoring Project	Brian Rush, CAMH
Client Satisfaction Project	Brian Rush, CAMH
Assessment/Benchmark Addictions Treatment Costs Project	Brian Rush, CAMH
Youth Services System Review Project	Gloria Chaim & Joanna Henderson, CAMH
Addiction Treatment Data Elements and Provincial Service Categories Project	Claudio Rocca, DATIS, CAMH
Residential Support Services Evaluation Project	Janis Cramp, Addictions Ontario
Supportive Housing Evaluation Project	David Kelly, OFCMHAP
<b>LINKAGE &amp; EXCHANGE</b>	
Ontario Mental Health and Addiction Knowledge Exchange Network Project	Heather Bullock, CAMH
The "Making Gains" Project	David Kelly, OFCMHAP

# ■ Advisory structure for Ontario Systems Projects

## ■ *Overarching advisory structure*

### *structure*

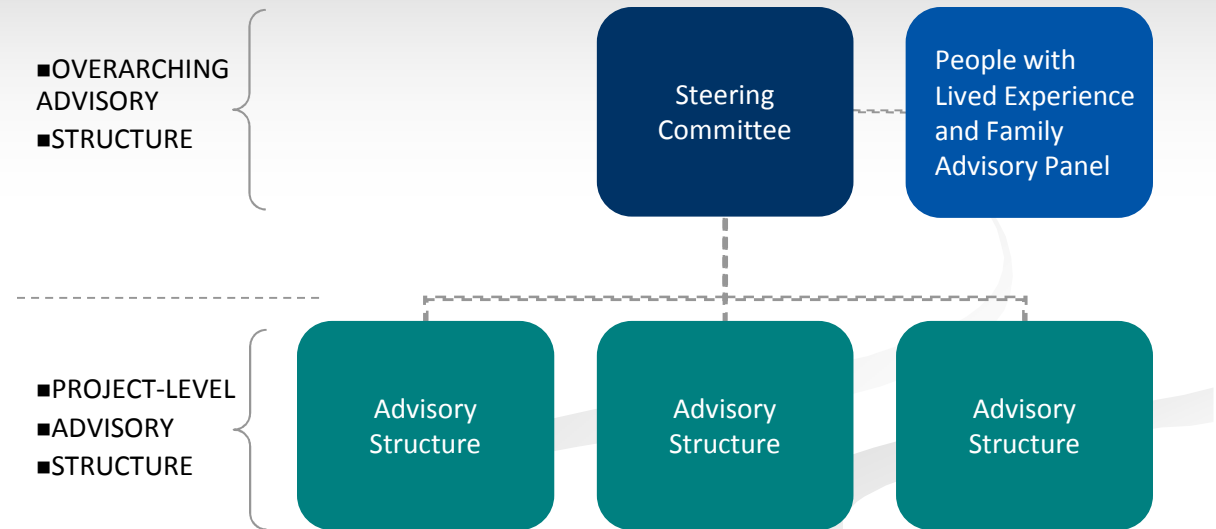
■ A steering committee composed of MOHLTC and project leads for DTFP-funded Ontario Systems Projects, together with an advisory panel of people with lived experience in addictions and family members\*, will provide insight and guidance for the suite of initiatives in Ontario.

## ■ *Project-level advisory structure*

### *structure*

■ Advisory structures will provide advice and support for individual projects or groups of projects.

■ \*Note: We consider 'family members' to include anyone that a person with lived experience considers to be family.



## Youth Services System Review Project

A review of the current continuum of addictions services available to youth, ages 12-24, in Ontario, identifying gaps and opportunities for collaboration and enhancement.

Project Leads: Gloria Chaim and  
Joanna Henderson



### ■ *How will this project benefit Ontario?*

■ This project will provide an overview of the landscape of addictions services available to youth across sectors and settings in Ontario; and insights and strategies for closing gaps and smoothing pathways to care.

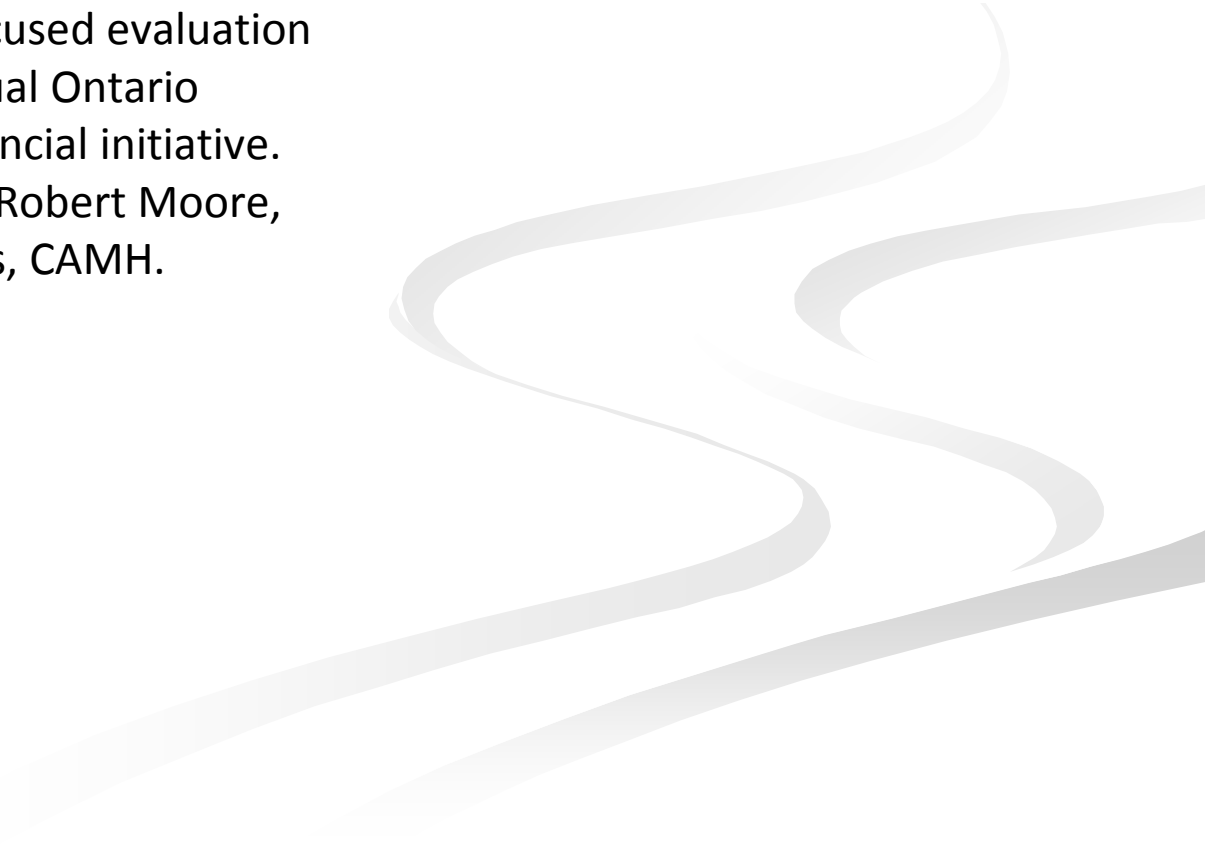
### ■ *How can you get involved?*

■ There are opportunities to participate in surveys, interviews and focus groups. For more information contact E.B.Brownlie at [eb\\_brownlie@camh.net](mailto:eb_brownlie@camh.net).

# Measuring success

## *Evaluation*

A comprehensive systems focused evaluation will be conducted for individual Ontario projects and the overall provincial initiative. The evaluation will be led by Robert Moore, Director of Provincial Services, CAMH.

A decorative graphic consisting of several overlapping, wavy, light gray lines that flow from the bottom left towards the right side of the slide, creating a sense of movement and depth.

# Knowledge exchange through a 'network of networks'

## *What is Evidence Exchange Network?*

Evidence Exchange Network (EENet; formerly OMHAKEN) aims to enhance the capacity of mental health and addictions researchers, consumers, families, providers, planners and policymakers to collaboratively engage in the production, communication and utilization of health services research and evaluation in Ontario.

The EENet Management and Resource Centre is located at the Health Systems and Health Equity Research Group at CAMH.

## *■ How will EENet support the DTFP in Ontario?*

■ EENet is the vehicle through which knowledge exchange will take place for the suite of initiatives receiving funding through the DTFP in Ontario.

■ EENet will leverage its network of networks and targeted knowledge translation and exchange products and tools to bring visibility to Ontario's DTFP-funded projects. EENet will also develop and maintain a web presence for DTFP initiatives in Ontario and support the individual communications needs of each project.

# Questions & Thank You!

## Contact Information:

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