



Features

Chroniques

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User-friendly approach lets hospital reach out to disaffected youth

Charlotte Gray

En bref

ALORS QUE LE PROBLÈME DU SUICIDE CHEZ LES ADOLESCENTS suscite de plus en plus d'inquiétude, une nouvelle façon d'aider les jeunes à faire face à des problèmes de santé mentale et autres se révèle populaire dans la région d'Ottawa. Le programme découle d'un sondage réalisé par un psychiatre et psychologue de l'Hôpital pour enfants de l'est de l'Ontario, qui a révélé un fait troublant : les jeunes font face à un risque élevé de maladie mentale.

The group of teenagers formed a rough circle and watched 2 facilitators in their mid-20s who sat in their midst. The mood: bored scepticism. All 10 participants had signed an agreement that anything said within the circle would not leave the room.

Some of the participants slumped morosely in their chairs. Several had already munched their way through the pizza and Fruitopia on offer. "So, what do you think of when you hear the words 'mental health?'" a facilitator asked. Dead silence. Then, slowly, most of the high school students started opening up and observations, emotions and problems tumbled out. When the 90 minutes were up they had discussed everything from suicide to their parents' use of drugs and alcohol.

One girl never said a word, and an observer might have assumed that she gained nothing from the experience. Yet she went away and, in the local newspaper, described the impact of a Youth Net focus group. "Maybe no one could give a magic solution to what was happening to anyone else's life, but it makes you feel better just knowing that someone wants to help and talking out loud sometimes makes things clearer in your own mind. . . . I was surprised how common some problems were and . . . I left the meeting not only with a deep new respect for my friends but also feeling better about myself."

Youth Net/Réseau Ado, a bilingual program developed at the Children's Hospital of Eastern Ontario (CHEO) in Ottawa, was designed to promote mental well-being and prevent mental illness in the young. The idea was sparked by a 1993 survey conducted by psychiatrist Dr. Simon Davidson and psychologist Dr. Ian Manion of CHEO.

The survey found that mental health problems pose a disturbingly high risk for Canadian youth. Moreover, young people have no faith in adult professionals and one-third of them prefer to bottle up their problems. If the others talk to anybody it is to friends, not school counsellors, psychologists or psychiatrists. Most of the survey respondents, who were aged 13 to 20, said only young people are trustworthy and able to relate to them.

"Faced with these results," explains Davidson, "we had a choice. We could either do some more research, which would probably sit on a shelf. Or we could enlist youth as part of the solution and find a way that they could use the strength of their own resources with the backing of youth-friendly professionals."

"Youth friendly" is a crucial term. At Youth Net it means "listening without judging," says coordinator Sarah Brandon. "Responding to what we are hearing. Respecting and valuing youth's experience."

Davidson and Manion's first step took was to organize 20 focus groups and ask all participants — using facilitators who were only a few years older — what they thought would be the best way to run a mental-health program for youth. The



200 participants provided 3 clear messages: the program should be run by youth for youth, facilitators should be young enough to remember their own adolescence but old enough to have some life experience, and any ideas followed to fruition should originate with youth.

Within months the 27-year-old Brandon, who has a background in youth health and human rights, had been hired and the program had a name. A provisional name — “Can Teens Can” — was dumped when the teenagers criticized it. Instead they came up with Youth Net/Réseau Ado themselves. Space was found in a portable office at CHEO, and Davidson and his colleagues decided to carry on with the group approach, which allowed the young people to pool their experiences and opinions. Brandon recruited some experienced facilitators in their mid-20s, and the Youth Net/Réseau Ado team set out to offer focus groups at high schools and drop-in centres.

Heavy going

It was heavy going. Some schools couldn't accept that no teachers or counsellors would be present, and youth-detention centres had no mandate for rehabilitation and did not always see the “fit.”

Gradually, Youth Net organizers broke down some of the barriers as it became evident participants would open up to each other in a way they never would for health care providers.

Davidson says there is a carefully developed framework behind the Youth Net approach. “We start with Emile Durkheim's theories of suicide and particularly his description of anomie — the loss of sense of belonging to the community — that suicidal people exhibit.”

Davidson sees the same loss of that sense of belonging among today's youth. “They face a much tougher world than we did — their expectations are much lower than ours were 20 or 30 years ago.”

In the 1990s, he speculates, anomie may underlie adolescent risk-taking behaviours, from drug use to suicide. He suggests there are positive reactions to Youth Net focus groups because they allow participants to “buy back in” and experience a sense of belonging. The focus-group model has spawned 3 support groups that meet regularly to discuss depression, another that deals with low self-esteem and a fifth that caters to street youth. They are run (under supervision) by graduate psychology students.

Over the past 3 years, Youth Net/Réseau Ado facilitators have conducted almost 400 focus groups in Eastern Ontario and Western Quebec, and seen close to 4000 young people. There is now a newsletter, Youth Fax, that discusses subjects like eating disorders, stress or homo-

phobia in street language. “I write what I wanted to read myself a couple of years ago,” says MoJo, one of the creators. “Useful and interesting stuff, but not a whole lot of fancy words and statistics.”

One summer issue dealt with the positive achievements of young people and the misconceptions surrounding them. “Just because we might wanna take some time to relax and just chill with some friends DOESN'T MEAN YOUTH TODAY ARE A BUNCH OF LAZY, GOOD-FOR-NOTHING SLOBS AND TROUBLE MAKERS!” it began. It then described some of these achievements. One 17-year-old boy with an “industrial appearance and 3 body piercings” was an incredible guitarist with a 90-plus average in school who was making up to \$80 an hour busking in Ottawa's Byward Market.

Youth Net's growth and the demand for its services poses a difficult challenge for organizers: How do they finance it? CHEO currently provides about \$60 000 a year, which is less than half the total budget, and is itself facing budget cuts. This means organizers must scrape together the rest of the funds they need. “Every 3 months we have a meeting to discuss fund-raising ideas because we're about to go under,” says Davidson. They lurch from grant to sponsorship to generous gift. A recent grant from the J.W. McConnell Family Foundation allowed Youth Net to develop a satellite program that may lead to its expansion across Canada. The program is relatively cheap, since the 15 facilitators earn only \$40 per session. “The cost per youth in our depression support groups is \$14 per session,” says Brandon. This is much cheaper than an appointment with a psychiatrist.

The dearth of child psychiatrists

The demand for Youth Net's services poses a different kind of challenge for professionals because Canada faces a shortage of adolescent psychiatrists. The Canadian Academy of Child Psychiatrists has about 360 members today, compared with 450 in 1981, when Davidson finished training.

However, Davidson and Manion are still struggling to absorb the damning lesson from their 1993 youth survey — that many young people wouldn't turn to health professionals even if they were in distress. “We didn't develop this program because of the shortage,” Davidson says, “but because the way that services have traditionally been offered is not acceptable to youth.

“Maybe those people who work in mental health should raise their level of youth-friendliness.”

For more information on Youth Net/Réseau Ado, contact brandon@cheo.on.ca. ?