

An Evaluation of an Assets-Based **Comprehensive Youth Pilot Project** (CYPP) in Four Ontario Elementary **Schools Presenters Brenda Juby, RN, BScN Robert Coughlin, MA Toronto Public Health** May 30, 2008



" If we think we are fragile and broken, we will live a fragile, broken life. If we believe we are strong and wise, we will live with enthusiasm and courage. The way we name ourselves colors the way we live. Who we are is in our own eyes. We must be careful how we name ourselves." **Wayne Muller**



What is the CYPP?

- Engages/mobilizes grades six to eight youth, listens to their views on their school strengths and concerns, involves them in planning action with adults on a school health committee.
- Focuses on enhancing individual and school resiliency and is underpinned by the principles of the (CSH) model.





Rationale for the CYPP

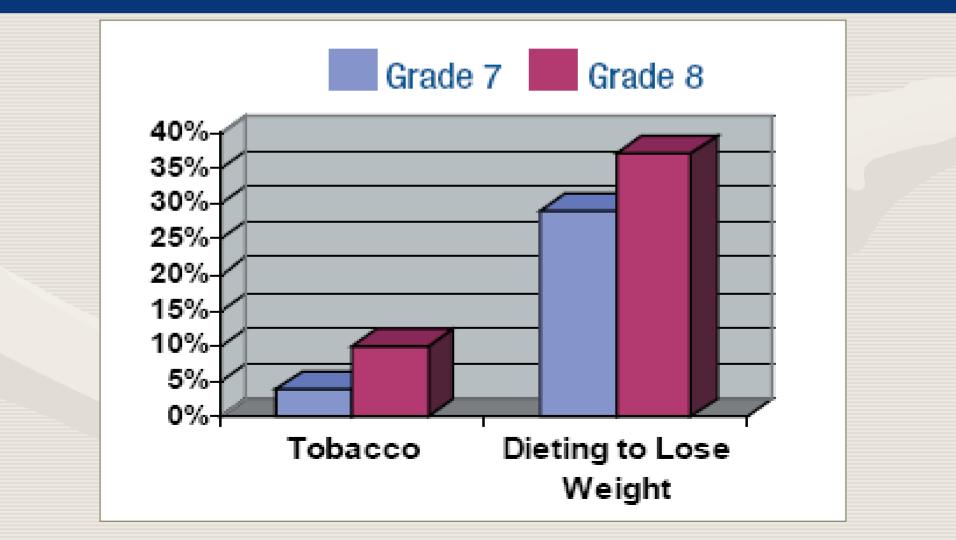
TPH wanted their youth service delivery:

- To be more evidence based
- Follow best practice
- To be more coordinated
- Use strategies that mitigate a range of risk taking behaviours

Risk-taking behaviours begin in adolescence

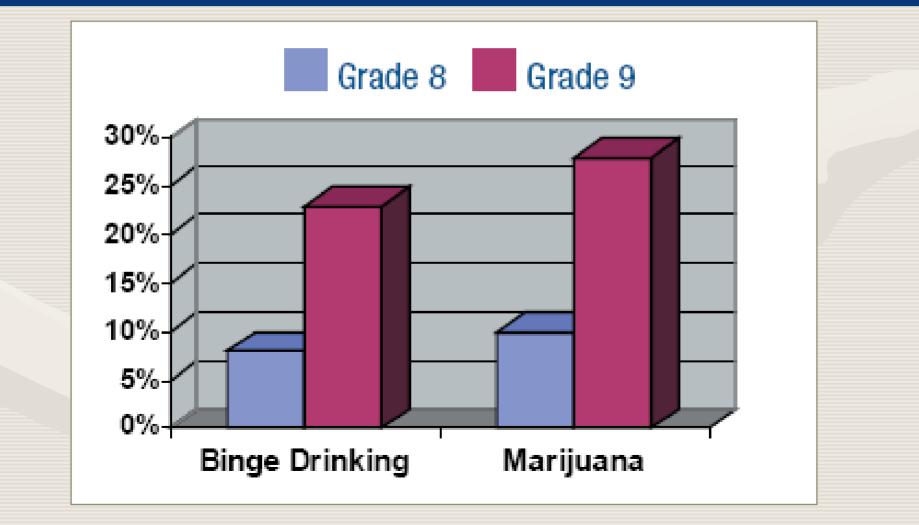


Adolescent Risk Taking Behaviours





Adolescent Risk Taking Behaviours (cont'd)





Key Principles Underlying the CYPP

City of Toronto Community Safety Plan identified four priority neighbourhoods

CYPP was implemented in two of the four neighbourhoods



- Delivered in Schools: Offers access to children, economically efficient, has credibility with parents and community
- Positive Youth Development and Youth Engagement: Focus on youth's assets (capacities, strengths, and developmental needs) and not solely on their deficits (risks, negative behaviours and problems) - what is strong not what is wrong!



"What we want to achieve in our work with young people is to find and strengthen the positive and healthy elements, no matter how deeply they are hidden. We enthusiastically believe in the existence of those elements even in the seemingly worst of our adolescents".





Key Principles Underlying the CYPP (cont'd)

Delivered Using the Comprehensive School Health Model (CSH): CSH model is an integrated approach - strategies are instruction, services, supportive social environment and healthy physical environment.



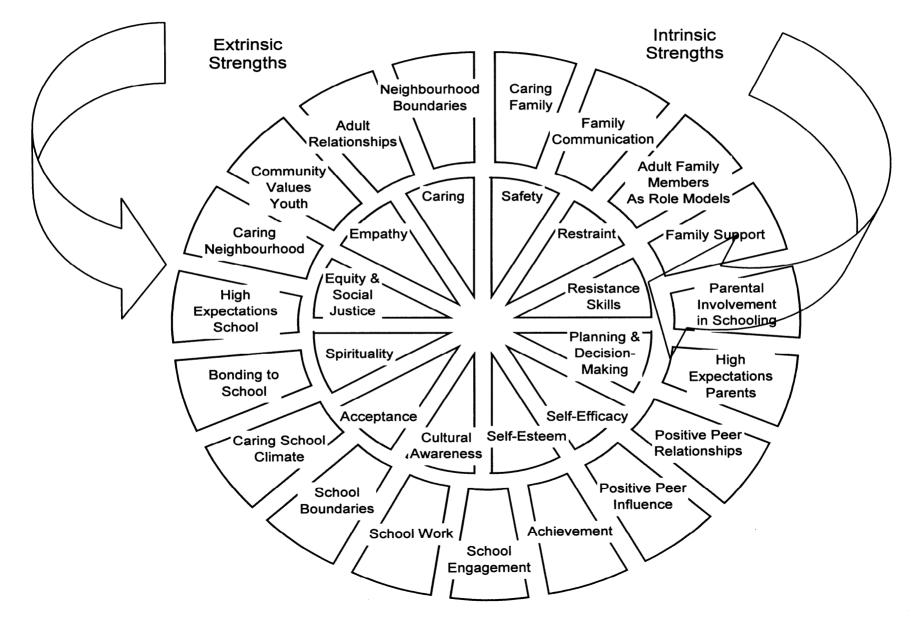
Key Principles Underlying the CYPP (cont'd)

Focus on Youth Resiliency

Most youth raised in extremely high-risk environments (poverty, alcoholism, drug abuse, physical and sexual abuse, and mental illness) succeed because of their resiliency.

Resilient youth possess both intrinsic and extrinsic strengths. The more strengths they possess the less likely they engage in risk taking behaviours.

Public Health Developmental Strengths





Project Development

In 2004 project presented to Toronto Catholic District School Board (TCDSB) and Toronto District School Board (TDSB) for approval. Both boards agreed to partner with TPH by the fall of 2004.

Project was implemented in three TCDSB and one TDSB intervention schools from Fall 2004 to Spring 2007.

Project also had three TCDSB comparison schools.

Definition Toronto Public Health

Project Time Line

2004/2005 School Year

January 2005

- Project start
- SHC's formed
- Teacher advisors recruited
- Health needs assessment

2005/2006 School Year			
September 2005	January 2006	June 2006	
Pre-testing	 Pre-test results Debrief results Interventions start 	 Teacher advisor focus groups Principal interviews SHC members focus groups 	



2006/2007 School Year			
September 2006	May 2007 June 2007		
PHN focus group Project coordinator interview	Interim report		Post-testing
		2008/200	9 School Yea

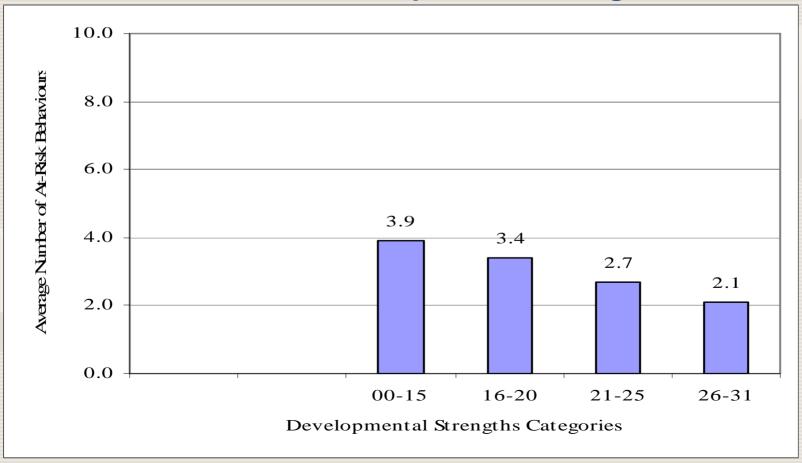
October 2008

- Post test results
- Debrief schools
- Final report (2009)



Pre-Test Resiliency Findings

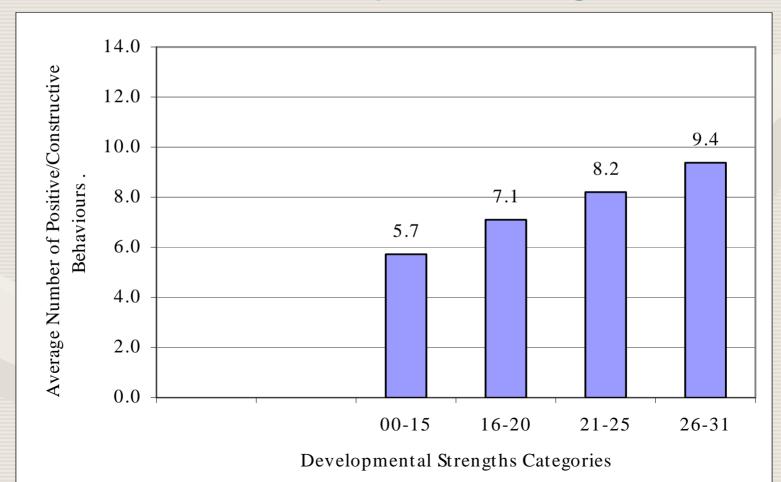
Average Number of Risk Taking Behaviours by Number of Developmental Strengths





Pre-Test Resiliency Findings (cont'd)

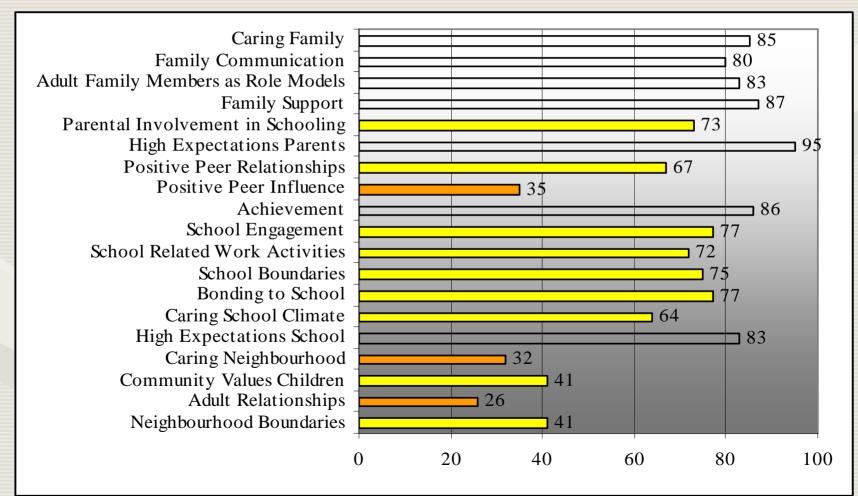
Average Number of Positive Behaviours by Number of Developmental Strengths





Pre-Test Resiliency Findings (cont'd)

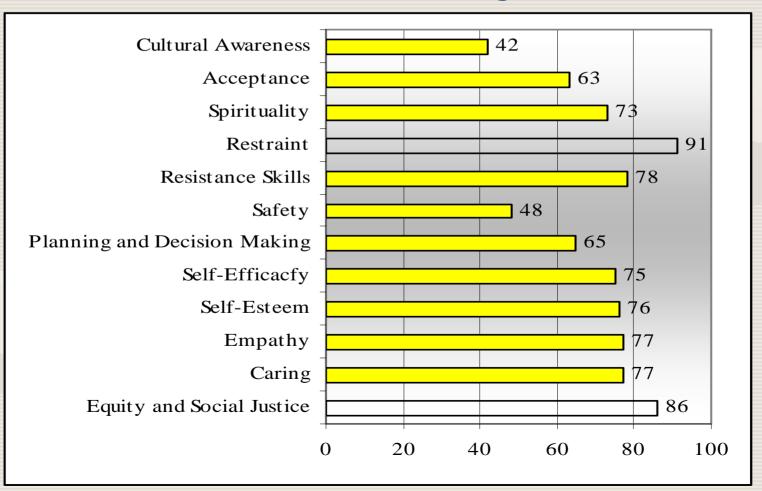
Percentage of Students Possessing Each Extrinsic Strength





Pre-Test Resiliency Findings (cont'd)

Percentage of Students Possessing Each Intrinsic Strength





Pre-Test Resiliency findings (cont'd)

Students reported a lack of a connection with their school, parents and community.

They wanted to have a mentoring relationship and be a mentor.



Resiliency findings identified problems but also a good foundation on which to build students' strengths.



Examples of Strategies Created by Youth

Strategies

Results

Modified school's outdoor playground

Reduced conflict and fighting

Piloted youth mentoring program for younger youth in the school

Positive peer influence & mentorship

Used outside agency to deliver 12 session leadership workshop to 10 Grade 7 students

Increased leadership skills

Developed pilot program where teachers offered extra-curricular classes (i.e., yoga, chess)

Increased student/teacher engagement



Examples of Strategies Created by Youth (cont'd)

Strategies

Results

SHC students academically mentored younger students

Increased positive peer relationships

Grade 8 SHC members planned and implemented a three-day, two-night leadership training for Grade 7s at Camp Olympia

Increased planning and decision making skills

SHC students participated in a lunchtime leadership program with senior students from neighbouring high school



Increased community relations



Evaluation Questions

- What impact did the project have on the students in the school, the parents of students, the teachers, the health curriculum of the school, the culture of the school and the visibility of health in the schools?
- What factors have affected the delivery of the Comprehensive School Health model?
- What factors have affected the delivery of the principles for effective youth health promotion?





 To repeat...at the end of 2005/2006 school year: focus groups convened with:
 SHC students in intervention schools
 TPH school liaison nurses

- Interviews with intervention school principals, teacher advisors and project coordinator
- Evaluation also used findings from pre-test focus groups





Results presented in four areas:
Resiliency
School Health Committees
Participating schools
Toronto Public Health



Findings/Conclusions/ Recommendations

Resiliency Findings

In schools that implemented mentoring programs, there was an increase in mentees' positive behaviour and self-esteem.





Resiliency Recommendations

- TPH needs to promote and facilitate relationship building and mentoring to increase the assets of a school community.
- Other community resources (e.g., City of Toronto One on One Mentoring, Big Brothers/Big Sisters, Girls and Boys Club, etc.) should be included in development of school's yearly health plan.



School Health Committee Findings

- Students on school health committees increased their self-esteem, leadership and communication skills.
 - Students on school health committees learned that once they were given a voice that was heard, they were able to make substantial change in



to make substantial change in their school.



School Health Committee Recommendations

- Develop criteria for selection of students considering unique nature of each school. (mix of grades/ages, developmental stages, type of student and gender)
- Assess student skill in working on a team ability to develop and implement action plans. SHC need support resources.



Participating Schools Findings

- Buy-in and support were central to success of the project.
- Some schools were more receptive to implementing a strength-based approach than others.
- Schools did not always understand the nature of the project and their roles in delivery.



Participating Schools Findings (cont'd)

- Much time required to form committee, engage youth, establish mentoring relationships and plan and implement strategies. Thus, it also took time to see the project's impacts.
- Consistent lack of parental involvement and support, yet youth reported they would have benefited from involvement. Strategies need to be developed to engage parents more fully.



Participating Schools Recommendations

Need the following in place for maximum impact.

Administration and staff...

- are receptive to strength-based approach.
- support school health committee
- support teacher acting as liaison to school health committee.
- Staff need to be educated (if necessary) and supported in principles of effective youth engagement.



TPH Recommendations

- TPH develop methods to assess degree school is ready to implement strength-based approach.
- Liaison PHNs share the following with key school staff at beginning of each school year:
 - structure of the project;
 - type of plan to be delivered;
 - core elements of the project that need to be in the plan;
 - key stakeholders; and
 - a contract between TPH and the principal is part of the project



TPH Recommendations (cont'd)

TPH develop specific criteria for selection of teacher advisor, better descriptions of the roles and responsibilities of all key players, including teachers, students, principals, parents, and community agencies.



Implications for Nursing Practice in School Settings

- Promote and facilitate relationship building and mentoring.
- Develop methods to assess degree a school is ready to implement strength-based approach.





Implications for Nursing Practice in School Settings (cont'd)

Need to enhance skills in the following areas: ➤ Integrating strength based approach into day-today practice with schools

How to positively engage an organization

Using tools, resources and education to better help schools deal with the complex issues they face (e.g., gangs, poverty)



Implications for Nursing Practice in School Settings (cont'd)

Need to enhance skills in the following areas:

- High risk situations in schools (e.g., violence in the school, lock down)
- Applying the principles of effective youth engagement in a strength-based context.
- Facilitation, working with at-risk youth and community partnership identification and development



- "I have seen reduced behavioural problems at my school because of this project - especially due to the mentoring that was being done with the younger students. I've had fewer visits to my office for behavioural problems and I'm sure that students were dealing with problems on their own with their mentor in the playground rather than seeing me. When the mentoring stopped, there was an increase in the number of students sent to my office."
 - **Elementary School Vice-Principal**



Thank you very much... Any questions?