

Applying the CAMH Best Practice Guidelines for Mental Health Promotion Programs for Children and Youth in a Nutrition Context



- Please ask questions and share comments into the **Chat Box**
- For technical assistance, please chat with **NRC Host**
- **Webinar today will be recorded**





Monica Nunes, MPH, is a Research Analyst at CAMH Health Promotion Resource Centre. Previous to her role at CAMH, Monica provided coordination and research support to various community-based health promotion research projects that applied youth engagement approaches and knowledge mobilization strategies. Monica holds a Master's of Public Health from the University of Toronto where she completed a collaborative program in Health Promotion and Community Development.



Elke Sengmueller, B.A.Sc., RD completed her undergraduate degree at the University of Guelph and interned at the London Health Sciences Centre/Children's Hospital of Western Ontario. She is a Registered Dietitian and author with over 17 years of experience providing nutritional care in acute care, community and home based settings. She concurrently gained experience in the Mental Health field working in adolescent/adult eating disorder clinics and in inpatient psychiatric units, and she pioneered the application of dialectical behaviour therapy (DBT) skills in nutritional therapy for people with eating disorders and concurrent disorders while working at the Centre for Addiction and Mental Health in Toronto. She has presented numerous related workshops for Dietitians of Canada, and is a co-author of Promoting Mental Health through Healthy Eating and Nutritional Care: Role of Dietitians, Dietitians of Canada 2012. Elke also recently had an opportunity to combine dual interests in pediatrics and mental health as co-author of ASD: The Autism Spectrum Disorder Complete Health and Diet Guide, published in 2014. She currently works in private practice where she specializes in gastrointestinal issues and in helping children, adolescents and adults overcome problematic relationships with food/weight.

**Introduction to the Updated
*Best Practice Guidelines for Mental
Health Promotion Programs:
Children and Youth***

About the CAMH HPRC



camhPSSP
Provincial System
Support Program



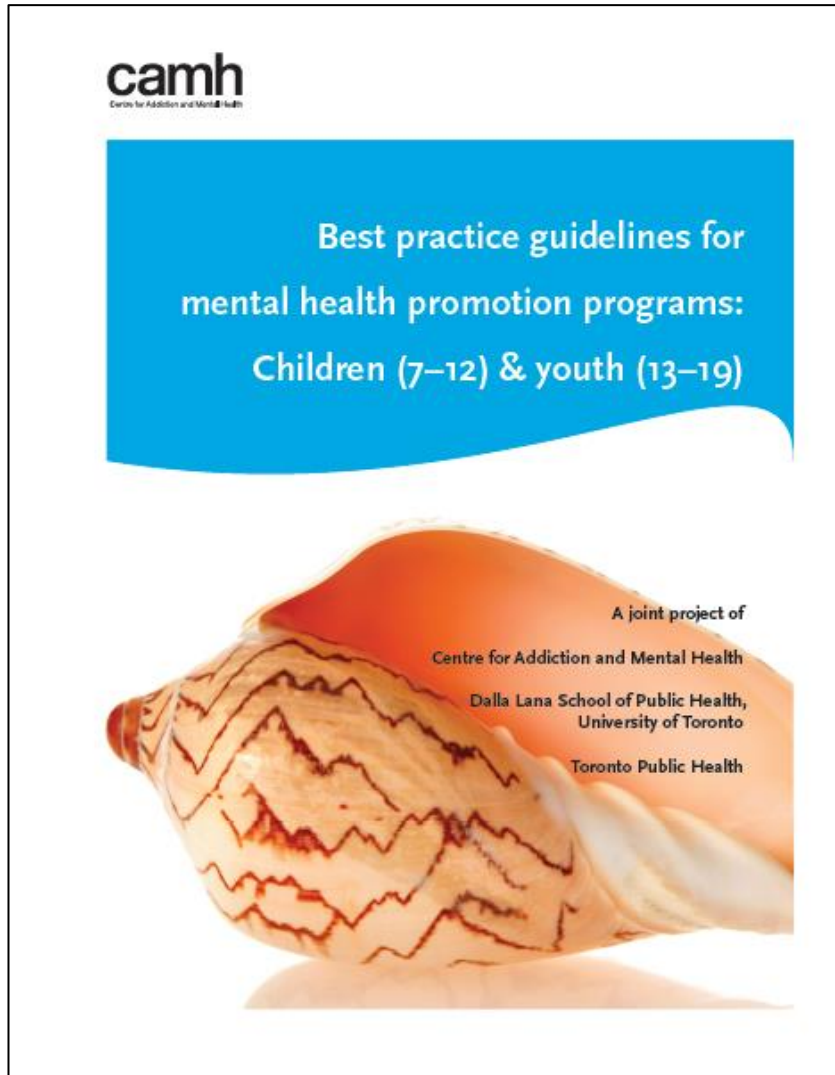
**Implementation and
Knowledge Exchange Team**



camhHPRC
Health Promotion
Resource Centre

- Provide system support, capacity building, content expertise and access to information and research for Ontario health promotion and public health audiences related to:
 - **Mental health promotion**
 - **Substance misuse**
- Consult with CAMH colleagues from across the organization (clinical, research, etc.)
- Funding provided by the Health Promotion Division of MOHLTC

Best Practice Guidelines for Mental Health Promotion Programs: Children and Youth



Available:

- ✓ Online on CAMH HPRC's new website:
<https://www.porticonetwork.ca/web/camh-hprc/>

In the beginning...

- *Analysis of Best Practices in MHP Across the Life Span: Final Report for CAMH & Toronto Public Health (Willinsky, C. & Anderson, A., 2003)*
- Based on studies with high level of evidence
- Categorized by:
 - Life span groups
 - Specific populations



What is mental health?

“... A state of well-being in which the individual realizes his or her own abilities, can cope with the normal stresses of life, can work productively and fruitfully, and is able to make a contribution to his or her community.”

(Public Health Agency of Canada, 2006)



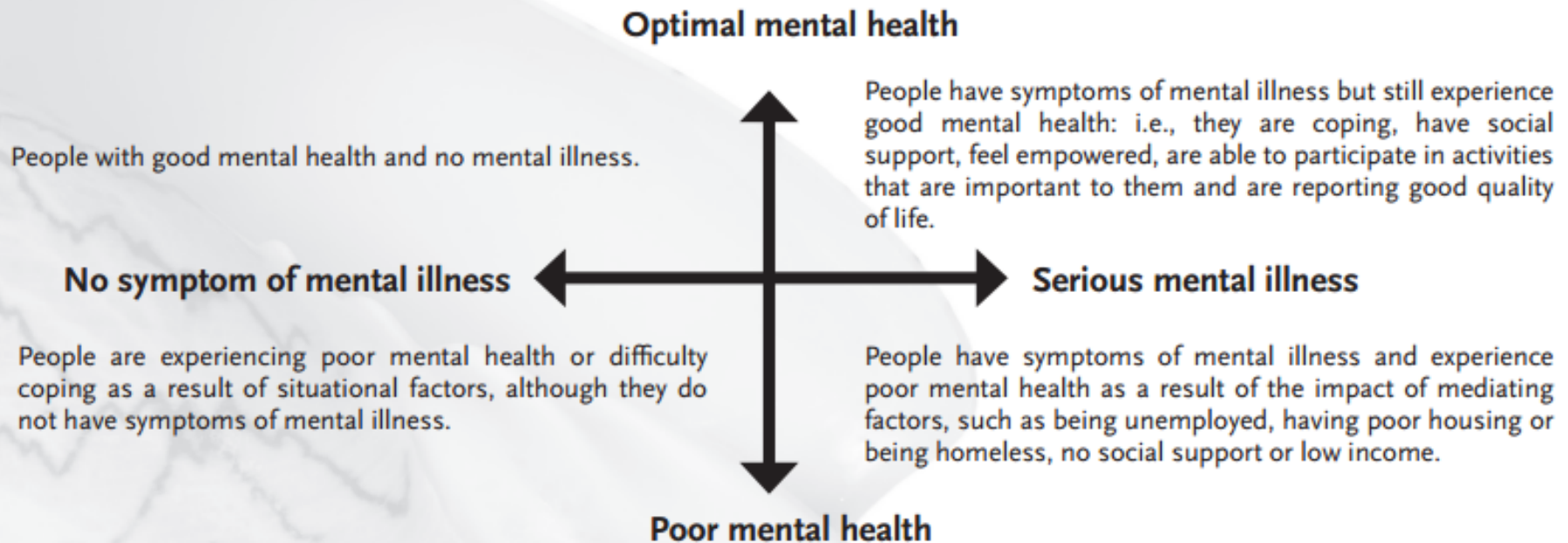
men-tal health

noun \ˈment-ēl \ ˈhelth

Mental health is a resource for living. **Mental health** is more than the absence of mental illness. **Mental health** is a positive concept. **Mental health** is our ability to manage life in ways that help us cope with stresses and reach our goals. **Mental health** is closely tied to physical health. **Mental health** is “the capacity of each and all of us to feel, think, act in ways that enhance our ability to enjoy life and deal with the challenges we face. It is a positive sense of emotional and spiritual well-being that respects the importance of culture, equity, social justice, interconnections and personal dignity.” **Mental health** can also be called “mental or emotional wellbeing,” “emotional health,” “flourishing,” or “mental wellness.” **Mental health** is a “state of well-being in which the individual realizes his or her own abilities, can cope with the normal stresses of life, can work productively and fruitfully, and is able to make a contribution to his or her community.” **Mental health** is distinct from, but related to, mental illness. **Mental health** is a component of overall health. There is no health without **mental health**.

Mental health vs Mental Illness

FIGURE 1: An intersecting continua approach to mental health



Adapted from Canadian Institute for Health Information, 2009; Canadian Mental Health Association, 2009.

What is mental health promotion?

“The process of enhancing the capacity of individuals and communities to take control over their lives and improve their mental health. [MHP] uses strategies that foster supportive environments and individual resilience while showing respect for culture, equity, social justice, interconnections and personal dignity.”

(Joubert et al, 1996)



Risk factors



- Risk factors increase likelihood & burden of mental disease & arise from within individual, family, support networks, broader social & institutional environments (WHO 2004).
- Operate at multiple levels:
 - Individual
 - Family
 - Social and Institutional

Protective factors

- Protective factors buffer a person in times of adversity & moderate impact of stress – can be internal and/or external
- Operate at multiple levels (individual, family, societal)
- Presence of protective factors lowers risk of mental health problems (Resnick et al, 1997)



Most significant determinants of mental health (Keleher & Armstrong, 2006)

1. Social inclusion
2. Freedom from discrimination and violence
3. Access to economic resources

From theory to strategy

- Policies that create a supportive environment and address determinants of health are necessary
- AND we need to **intentionally** incorporate attitudes and strategies to reflect this in programs working with individuals & communities



Best Practice Guidelines for Mental Health Promotion: Children & Youth (2014)

Summary of guidelines

1. Address and modify risk and protective factors, including determinants of health, that indicate possible mental health concerns.
2. Intervene in multiple settings.
3. Focus on skill building, empowerment, self-efficacy and resilience.
4. Train non-professionals to establish caring and trusting relationships with children and youth.

10 best practice guidelines (cont'd)

5. Involve multiple stakeholders.
6. Help develop comprehensive support systems.
7. Adopt multiple interventions.
8. Address opportunities for organizational change, policy development and advocacy.
9. Demonstrate a long-term commitment to program planning, development and evaluation.
10. Ensure that information and services provided are culturally appropriate, equitable and holistic.

Best Practice Guidelines for Mental Health Promotion: Children & Youth (2014)

- Tools to help plan & implement
 - Expanded roster of exemplary programs

Fourth R: Aboriginal Perspective Program

Goals and objectives

- Fourth R initiatives use best practice approaches to target multiple forms of violence, including bullying, dating violence, peer violence, and group violence. By building healthy school environments we provide opportunities to engage students in developing healthy relationships and decision making to provide a solid foundation for their learning experience. Increasing youth relationship skills and targeting risk behaviour with a harm reduction approach empowers adolescents to make healthier decisions about relationships, substance use and sexual behaviour.

Description

The Fourth R operates in various locations across North America and Europe. This comprehensive school-based program involves students, teachers, parents and the community

Start date

Developed in 2001. Updated and evaluated in 2004–2006, 2007

Guideline 1: Enhance protective factors and reduce risk factors

Guideline 2: Intervene in multiple settings

Guideline 3: Focus on skill-building, empowerment, self-efficacy and resilience

Guideline 5: Involve multiple stakeholders

Guideline 6: Provide comprehensive support systems

Guideline 7: Adopt multiple interventions

Guideline 9: Commit to program planning, development and evaluation



Best Practice Guidelines for Mental Health Promotion: Children & Youth (2014)

- Tools to help plan & implement
 - Worksheet and completed sample

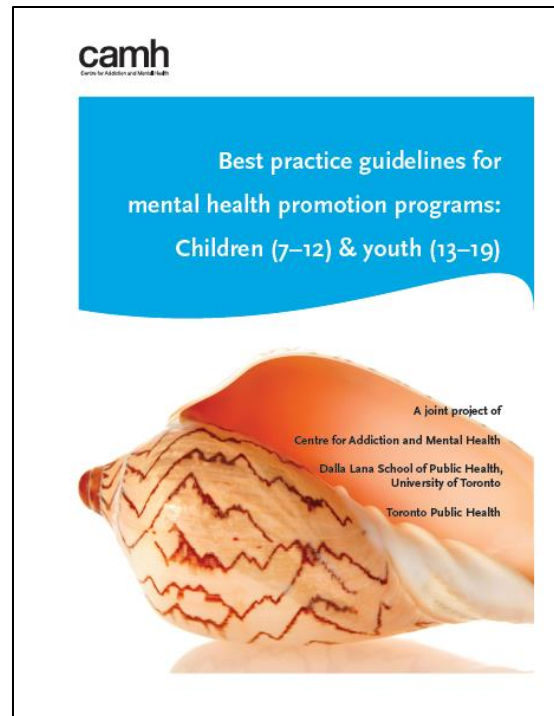
Questions based on the guidelines	Actions relating to the guidelines (Use as a checklist)	What has your initiative achieved so far?	What would you like your initiative to further achieve in the next year?	What specific action(s) do you plan to take to achieve this?	When do you hope to achieve this by?
1. Does your initiative address and modify risk and protective factors (including the determinants of health) that indicate possible mental health concerns, substance use or violence in children, youth and/or parents or caregivers by...	<input type="checkbox"/> ...identifying the population(s) of concern?				
	<input type="checkbox"/> ...identifying relevant protective factors, risk factors, and determinants of health?				
	<input type="checkbox"/> ...assessing which factors and health determinants can be modified and how?				
	<input type="checkbox"/> ...developing a plan to enhance protective factors, reduce risk factors, and influence the DOH relevant to the population(s) of concern				

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	<p>...identifying relevant protective factors, risk factors and determinants of health?</p>	<p>Several risk factors are being addressed through the combined interventions of the three partners. Risk factors being addressed include:</p> <ul style="list-style-type: none"> • poverty • lack of employment • chronic untreated medical conditions • anxiety and depression • social isolation. <p>Protective factors being addressed include:</p> <ul style="list-style-type: none"> • healthy lifestyles • personal and family resiliency • physical and mental health • parenting capacity • healthy family relationships • social and community supports • family's circumstances through greater access to employment training and supports. 	<p>Continue to address and modify risk and protective factors based on client need.</p>	<p>Focus primarily on addressing the mental health challenges facing youth in the IIF project.</p>	<p>Dec. 2015</p>

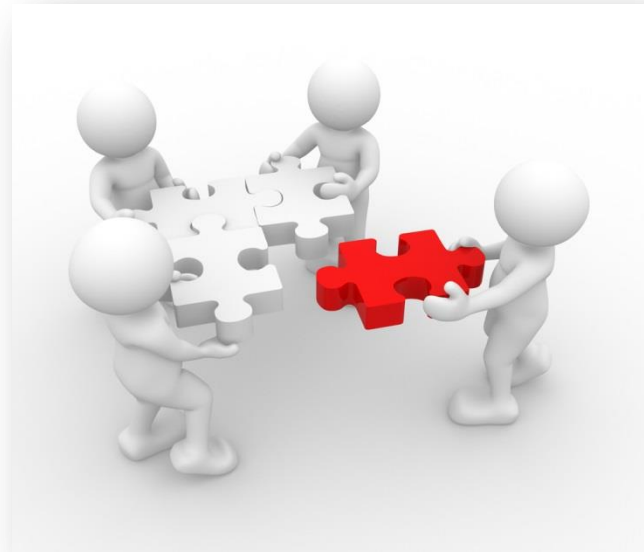
BPGS FOR MENTAL HEALTH PROMOTION: CHILDREN AND YOUTH

NUTRITIONAL APPLICATIONS

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MENTAL HEALTH PROMOTION & NUTRITION...

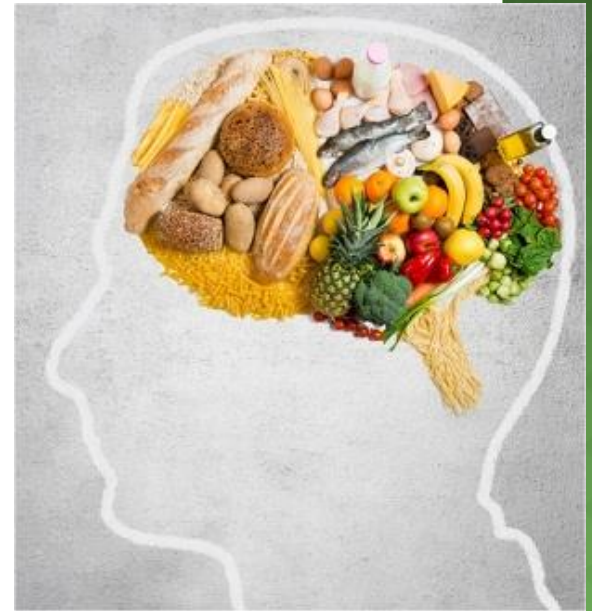


IS THERE A LINK?

DIET AND MENTAL HEALTH

- ◉ Links between nutrients (micro and macro) and brain functioning
- ◉ Complex interactions between the environment and our nervous system (From neurotransmitter, anti-oxidant, glucose metabolism, to stress and food insecurity)

Davison, et al. 2012 DC Role Paper



Mental health promotion emphasizes two key concepts:

POWER and **RESILIENCE**

POWER: “a person’s, group’s or community’s sense of control over their life and the ability to be resilient” (Joubert & Raeburn, 1998).

RESILIENCE: “the ability to manage or cope with significant adversity or stress in ways that are not only effective, but may result in an increased ability to respond to future adversity” (Health Canada 2000 p. 8)



RESILIENCE

- Influenced by **Risk Factors** and **Protective Factors**
- Can be enhanced by strengthening coping skills, reducing risks, and improving protective factors

“A person’s level of PROTECTIVE factors-regardless of the # of RISK factors-has been shown to lower the level of risk”

Resnick et al., as cited in CDHCA, 2000



The 3 Goals of Mental Health Promotion

1) Increase RESILIENCE and promote PROTECTIVE FACTORS	2) Decrease RISK FACTORS	3) Reduce INEQUITIES, which are often based on:
increasing skills (coping, life skills etc.)	sense of helplessness	gender
enhancing self-esteem (i.e. body image, gender, ethnicity)	social exclusion (peers can have positive or negative impacts)	age
strengthening social supports/attachment	depression/anxiety/stress and distress	poverty
improving Quality of life and feelings of satisfaction	substance misuse	race/ethnicity/culture
balancing: emotional, spiritual, physical, social, psychological health		disability (mental/physical)
		geographic location

SAMPLE HEALTHY EATING APPLICATIONS

All Ages

- cooking classes with family/peers; communal meals; breakfast clubs; school/community gardens or greenhouses
- Show and Tell – bring in a food/dish unique to one’s culture);
- Food-related Science Fairs at schools--plant growth, agriculture, food processing, food safety, blind taste tests to identify different foods;
- lessons on table manners;
- field trips to farmers/urban markets to introduce cultural and seasonal foods (i.e. Kensington Market); class picnic in the park
- field trip to local working animal and vegetable farms/orchards (i.e. Holland Marsh), Ontario Food Terminal or the Royal Agricultural Winter Fair to learn about food chain/distribution process;
- exploration of cultural &/or religious food traditions; community projects/advocacy (i.e. Thorncliffe Tandoori oven)

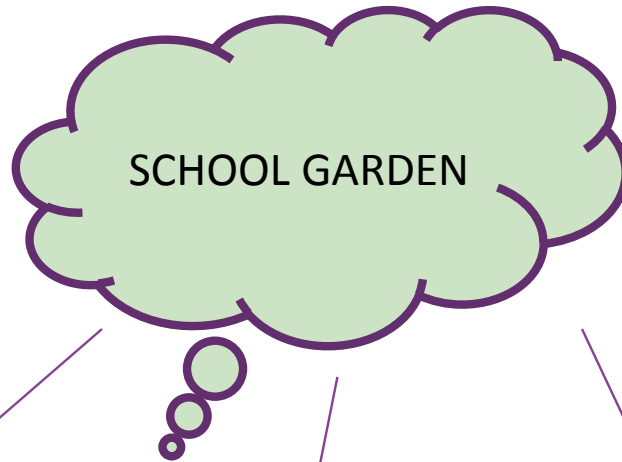
Youth

- volunteer hours credits: community food distribution centres, soup kitchens
- request speakers/tour food banks (i.e. North York Harvest, Yonge St. Mission)
- attend Food Fairs (i.e. Harbourfront’s Annual Vegetarian Food Fair in Sept.)

THE 10 GUIDELINES & HEALTHY EATING

Summary of guidelines

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2. Intervene in multiple settings.
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4. Train non-professionals to establish caring and trusting relationships with children and youth.
5. Involve multiple stakeholders.
6. Help develop comprehensive support systems.
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9. Demonstrate a long-term commitment to program planning, development and evaluation.
10. Ensure that information and services provided are culturally appropriate, equitable and holistic.



Guideline #1

- ✓ Target population
- Positive school climate / attachment
- ✓ Positive life event
- ✓ Social inclusion
- ✓ Freedom from discrimination

Guideline #3

- ✓ Skill building (academic, practical, social)
- ✓ Self-efficacy
- ✓ Problem-solving
- ✓ Emotion regulation
- ✓ Respectful treatment

Guideline # 10

- ✓ Culturally relevant
- ✓ Equitable access across diverse groups



Using the Mental Health Promotion Planning Worksheet

Questions based on the guidelines	Actions relating to the guidelines (Use as a checklist)	What has your initiative achieved so far?	What would you like your initiative to further achieve in the next year?	What specific action(s) do you plan to take to achieve this?	When do you hope to achieve this by?
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Thank you!



—
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Questions?



Resource Giveaway!

- ✓ CAMH HPRC will provide a print copy to the first 50 Ontario service providers attending today's webinar who email us

- ✓ Contact:
hprcresources@camh.ca

