TORONTO
Public Health

Youth Engagement Polices and Practices: Translating Knowledge Into Practice

6th National Community Health Nurses Conference, May 2012

Presented by:
Kerri Richards, Manager, Toronto Public Health
May Tao, Health Promotion Consultant, Toronto Public Health

Purpose

- To present process of developing an implementation plan to address three recommendations from RNAO Best Practice Guideline Report for Healthy Adolescent Development:

  1) *enhancing staff skill sets*
  2) *bolstering organizational readiness*
  3) *identifying areas of potential advocacy-policies and practices.*

TORONTO
Public Health

Background

- RNAO – Best Practice Spotlight Organization Candidate
- RNAO Nursing Best Practice Guideline Report: "Enhancing Healthy Adolescent Development" (2002).
- 3 Recommendations selected to apply to TPH:

  1) *enhancing staff skill sets*
  2) *bolstering organizational readiness*
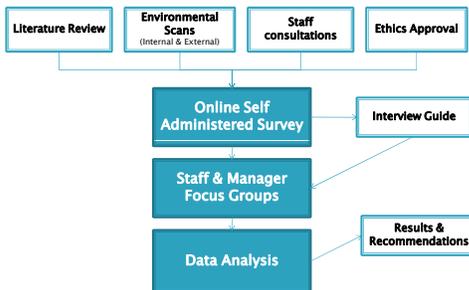 3) *identifying areas of potential advocacy-policies and practices.*

TORONTO
Public Health

Definition of Youth & Youth Engagement(YE)

➢ Youth : 11-24 years   (RNAO)

➢ Youth engagement(YE) - a recognized best practice which involves an approach to planning, implementing and evaluating programs that are youth-led and adult supported. (CEYE)

TORONTO Public Health

Methodology: Overall Process

Literature Review → Environmental Scans (Internal & External) → Staff consultations → Ethics Approval

Online Self Administered Survey → Interview Guide

Staff & Manager Focus Groups

Data Analysis → Results & Recommendations

TORONTO Public Health

Methodology : Survey

➢ Self–administered online survey tool

◦ Optional hard copy in sealed envelope
◦ Total Sample: N=350
◦ 219 staff completed survey
◦ Response Rate: 63%

TORONTO Public Health

Methodology: Focus Groups

▸ 6 (1.5hr) focus groups
  ◦ 4 Staff groups (N=55)
  ◦ 2 Manager groups (N=10)

▸ Moderator guides
▸ Appreciative Inquiry Approach
▸ Audio taped
▸ Transcribed verbatim

TORONTO
Public Health

Data Analysis

▸ **Survey : (Survey Monkey Software)**
  ◦ Simple frequencies
  ◦ Average ratings
  ◦ Cross tabs
  ◦ Content analysis (open ended questions)

▸ **Focus Groups**
  ◦ Constant comparative method to identify themes
  ◦ Line-by-line coding
  ◦ Multiple observers

TORONTO
Public Health

---

1. Background: Staff Description

▸ **Majority of respondents were from:**
  Healthy Living Directorate (66%)

  ◦ Majority were Public Health Nurses (62%)

  ◦ Other Public Health Staff –consultants, CHO's (24%)

  ◦ Directors, Assoc. Directors & Managers (13%)

TORONTO
Public Health

2. Current Practice at TPH

▸ Majority had more than one year of experience working with youth: 79%
  ◦ Staff with one to five years:31%

▸ The majority had worked with all three age groups early, mid and late adolescents(>60%)

▸ Half of the respondents had used both targeted and universal approaches with youth.

TORONTO
Public Health

---

2. Current Practices: Types of Youth & settings TPH Staff Work With

1. Mostly staff work with youth that are:
  • Vulnerable youth
  • New to Canada
  • Youth from racialized communities (59%)

2. Usual youth work settings:
  • Community
  • Priority Neighbourhoods
  • Schools (elementary, middle, high)

TORONTO
Public Health

---

2. Current Practice at TPH

▸ Top six strategies used by staff when working with youth:
  1. Empowerment/Skill Building (93%)
  2. Harm/Risk Reduction (79%)
  3. Partnerships (79%)
  4. Strengths-Based Practice/Resiliency (79%)
  5. Collaborating with Youth (77%)
  6. Narrative Solution Focused Approach (72%)

Rarely used strategies:
Policy/Advocacy, Mentoring/Coaching, Youth Consultation

TORONTO
Public Health

2. Current Practices: Challenges

▸ Staff identified challenges in many areas including:

◦ Knowledge about YE strategies
◦ Making Connections with communities
◦ Accessing resources
◦ Competing priorities
◦ Organizational support
◦ School Board policies
◦ Capacity for ongoing follow-up
◦ Dealing with youth and staff turnover
◦ Capacity to balance organizational accountability with the emerging needs of youth

TORONTO Public Health

---

2. Current Practices: Challenges and Solutions

1. **Communication & Connection** : Use Intranet/G-Drive, inter-directorate staff knowledge exchange, staff learning of the social media used by youth i.e. Face book

2. **Youth Led Activities**: youth to problem solve together, NSFA, determine incentives required, negotiate best time to meet, mode of communication i.e. Text messaging

3. **Collaboration with External Agencies** : i.e. school staff, youth workers and where appropriate using conflict resolution strategies

TORONTO Public Health

---

3. Staff Knowledge & Skill

Internal YE training identified by staff:
• Social marketing
• YE Workshops
• Narrative Solutions Focused Assessment
• New staff orientation training

TORONTO Public Health

3. Staff Knowledge & Skills:

Majority indicated that they have either a moderate or high level of knowledge working with youth in most areas except:

- Social Marketing & Health
- Communications skills (Face book, You tube)
- Policy Development

TORONTO Public Health

---

3. Staff Skills & Knowledge

‣ **Self-evaluation:** Majority of staff rated themselves as working well or very well with youth

‣ **"High Need" areas for staff learning**
  ◦ Tools for YE (36%)
  ◦ Practice/skill development/training (29%)
  ◦ Practice in Different Settings(28%)
  ◦ Content areas (eg. Theories/frameworks of YE)
  ◦ Value Clarification exercises (25%)

TORONTO Public Health

---

3. Staff skills & Knowledge:

Staff's preferred learning methods in order of preference:

- Interactive activities (66%)
- Feedback from youth, schools, public health professionals (62%)
- Small group discussions (61%)
- Working with a mentor (55%)
- Case studies(54%)
- Networking opportunities (53%)
- Large group presentation/lecture(51%)
- E-learning (37%)

TORONTO Public Health

4. Organizational Readiness - (Development of a YE Policy)

‣ **How often does your program involve youth in the following areas?**

◦ **Highest area–** Skill building (53%)

◦ **Lowest areas–** Planning, Implementation (e.g. training, leadership), Evaluation, Development of critical thinking skills, Committee membership

TORONTO Public Health

Where improvements in youth programs are needed?

‣ Outreach to marginalized youth
‣ Youth-centered/Youth-led approaches
‣ Youth involvement and participation
‣ Fostering of youth skills

Focus group participant:
" We want to reach kids who are harder to reach, who are least likely to become engaged and might make a radical resource decision."

TORONTO Public Health

---

4. Organizational Readiness: Six Levels of Youth Engagement by RNAO

‣ **Three levels of participation "rarely" practiced:**

1. Youth initiate and direct projects
2. Youth initiate projects and share decision making with adults
3. Youth participate in jointly initiated projects with shared decision-making.

TORONTO Public Health

5. Organizational Support & Advocacy: Meaningful Youth Participation

▸ **Areas where meaningful youth participation is working:**

o Having staff who are energetic, passionate & genuinely excited about working with youth (79%)
o Identifying & addressing common barriers to youth participation (e.g. transportation, youth-friendly schedules)
o Providing youth incentives (e.g. voluntary hours, stipends, honoraria) (50%)
o Supporting & advocating for youth-led activities with adults providing guidance & support (47%)

TORONTO Public Health

---

5. Organizational Supports/Advocacy

➢ The majority (80%) were not aware of any TPH Policies that facilitate YE
➢ The majority skipped the question of what Federal & Provincial policies are required to facilitate YE
➢ Most staff expressed:
 "*We need a provincial youth engagement strategy*"

TORONTO Public Health

Themes From Focus Groups

1. **Internal Communication Issues**
   "Providing quality service starts with our own internal communication….many voices move the organization forward."
2. **Internal and External Collaboration**
   "I think Toronto Public Health could be better at building relationships in for example community centers where youth are already going"
3. **Staff Skill Sets**
   " We need a way to connect and be aware of staff skill sets that are already available."

TORONTO Public Health

Themes From Focus Groups

4. **Administrative/Bureaucratic Supports**
   "…if you are going to work with youth it has to be where they want to meet not where you want to be."
5. **Resources**
   "Building relationships take time…it takes time to get to know people."
6. **Champion Model**
7. **Youth Capacity Building**
   "One way to prevent youth turnover may be to actually involve the youth at a younger age…"

TORONTO
Public Health

Data Limitations: Survey and Focus groups

‣ **Survey**

1. Convenience sampling: Selection Bias
2. Barriers to data collection– time commitment and timing issues
3. Self-reported survey

‣ **Focus groups**

1. Small sample size
2. Staff responses skewed due to group dynamic issues

TORONTO
Public Health

Recommendations:

1. Enhance Communication and Connection
2. Enhance Staff Skill Sets
3. Enhance Organizational Supports, Resources and Policies:

TORONTO
Public Health

Conclusions

‣ Recommendations were based on the gaps and needs identified in this study

‣ There is a wealth of knowledge, experience and passion among staff and managers about YE

‣ This research has identified where YE is working and where gaps exist for further follow up

Toronto Public Health

Implementation Results

‣ Developed implementation plan to address recommendations – including the development of:

a) a staff orientation guide on Youth Engagement Healthy Adolescent Development

b) a Youth Engagement Professional Development Evaluation Tool,

c) Philosophy and Guiding Principles for youth engagement for the organization

d) Central repository for YE information and e) coordinating mechanisms for internal and external YE work

Toronto Public Health

For Further Information

Contact:

Kerri Richards at

◦ krichar@toronto.ca or

◦ 416-338-8710

Toronto Public Health