

## PROMISING INNOVATIONS IN ONTARIO'S CHILDREN'S MENTAL HEALTH CENTRES

◆ Joanne Johnston ◆

Over half a million young people in Ontario between the ages of three and seventeen (approximately one in five) have a diagnosable mental health disorder, and more than 300,000 of these have more than one disorder that impairs their daily functioning (*Ontario Child Health Study, 1989*). The mental health issues of Ontario's children and youth are significant, yet funding for children's mental health services has seriously eroded for more than a decade.

Despite the challenges faced by the children's mental health system in our province, service providers are increasingly focused on delivering the best possible services using the most effective approaches available. Many children's mental health centres are implementing established evidence-based programs that research has shown to be effective. This trend toward evidence-based practices is an extremely important development. At the same time, the knowledge base about what works is still evolving, and the field of children's mental health also needs to seek new, innovative ways of tackling difficult issues.

Several children's mental health centres in the province have developed programs that are unique innovations, designed to address specific needs. The following three examples illustrate the capacity of resilient organizations to meet service challenges using creativity and innovation.

Led by Senator Michael Kirby, the Standing Senate Committee on Social Affairs, Science and Technology's May 2006 report, *Out of the Shadows at Last* established that the stigma attached to mental illness continues to be a major problem in Canada. The report spoke to the importance of changing public attitudes through public awareness and education. Change was the impetus behind the Talking about Mental Illness

(TAMI) program in Durham Region. Research had shown that only a small percentage of youth with a mental health issue actually went for help, so the Whitby Mental Health Centre (WMHC) set about to change those statistics. In 2002, building upon the work done by the Centre for Addiction and Mental Health, WMHC, in partnership with several other Durham agencies, created the Durham TAMI Coalition to educate high school students about the signs, the symptoms and the stigma surrounding mental illness.

Through its Adolescent Outpatient Department, the program is linked to schools in the region. It runs in schools for a week, giving the students all the resources and vocabulary associated with mental illness. The students also get a chance to hear and interact with three speakers living with mental illness. The program hinges on those speakers.

"The goal is not to make people more afraid of somebody with mental illness," says Art Mathews, manager of the adolescent and young adults program at WMHC. "But demystify it, get rid of the stigma and help people see that they're people."

The coalition of organizations, schools, and members of the community work with Whitby Mental Health Centre to increase awareness and compassion about mental illness and mental health issues through TAMI. The program has reached more than 2,600 students in 40 schools.

The Child Development Institute (CDI) in Toronto has developed a program that has not only won awards but also been implemented in other parts of Canada, as well as Europe, Scandinavia, the U.S. and New Zealand.

CDI's Centre for Children Committing Offences (CCCO) deals with families in conflict, with their children and with the law. CCCO employs "SNAP", a



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program that helps both children and parents interrupt problem-causing behaviours by getting them to think before they act. SNAP gives children and their families the tools to calm down and make positive choices in situations that could potentially create trouble or harm others.

"They learn to watch for signs such as their face getting red, their heart beating faster, their hands going into fists," says CCCO's director Leena Augimeri. "This signals that they need to stop. They do this by snapping their fingers and coming up with ways to calm their body down...taking deep breaths, counting to ten or even putting their hands in their pockets."

Although children with disruptive behaviours may be well known to police and others in the community, the system's response to them is not always consistent or well coordinated. To address this, CDI and CCCO have taken a leadership role in establishing a community protocol, bringing together police and fire services, child welfare workers, schools, children's mental health and other specialized agencies.

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For more information about SNAP, the community protocol, and research to date, visit CDI's website:  
[http://www.childdevelop.ca/public\\_html/research/research\\_ccco.html](http://www.childdevelop.ca/public_html/research/research_ccco.html).

Valerie Copping is the trauma treatment coordinator for Child and Adolescent Services at the Public Health Services for the City of Hamilton. Over the past ten years, she has developed the three-phase 21-session Intergenerational Trauma Treatment Model (ITTM), for children aged three to eighteen who have experienced at least one traumatic event. A crucial element of ITTM is the inclusion of a committed caregiver in the treatment process.

ITTM identifies five different pathways between caregivers and children, and diagrams are used to show children and their caregivers the way to the correct pathway.

How individuals interpret the relationship diagram ultimately challenges their belief systems.

"It's the goal of all treatment to correct faulty belief systems," Copping says. "Very, very few methods can tell you how they actually do it. That's the difference of our model. I can actually describe how we do it and train others on how to do it quickly, using diagrams."

Many children's mental health professionals have participated in ITTM, and the model is being used in several centres across the province. The results have been promising, and research on ITTM has begun (Copping et al, 2001).

*Joanne Johnston, MSW, RSW, is Director of Standards and Services at Children's Mental Health Ontario (CMHO). CMHO is a charitable, non-profit organization that works to promote, support and strengthen a sustainable system of mental health services for children, youth and their families. Visit [www.kidsmentalhealth.ca](http://www.kidsmentalhealth.ca) to learn more about CMHO.*



### OASW MENTORING PROGRAM

OASW will be offering its Mentoring Program again this year.

The main goal of the program is for mentors to demystify the professional job search process by providing information and advice about the profession or a particular field of practice. We are seeking mentors who enjoy their work and have some time to share their enthusiasm with a mentee. We are looking for mentees who are committed to following up with mentors and making good use of their time.

If you wish to participate in this program, visit the OASW website at [www.oasw.org](http://www.oasw.org), enter the Member Site, and then click on Students or on Benefits & Services, and then Mentoring. For further information on the Mentoring Relationship, Expectations and Responsibilities, please check our website. Or contact the Provincial Office at (416) 923-4848, fax: (416) 923-5279, or e-mail: [info@oasw.org](mailto:info@oasw.org).

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