



Mental Health Services Act (MHSA) – Innovation Project Brief #1

Project: Health Ambassador Program – Youth (HAP-Y)



Background – A comprehensive Community Program Planning (CPP) process in San Mateo County identified the **need to decrease stigma and build the capacity of communities to engage in improving access to mental health services.** The proposed HAP-Y project was identified as priority to address this need. The San Mateo County Mental Health and Substance Abuse Recovery Commission (MHSARC) held a public hearing on April 6, 2016 and the San Mateo County Board of Supervisors approved the HAP-Y project plan on May 24, 2016.

The Challenge – While the value of peer education and advocacy in health and wellness is well documented and studies have found that youth are “more likely to make changes if they believe the messenger faces their same concerns and issues,” research on youth peer education and community advocacy in mental health is scarce¹. A recent 2016 study was the first to look specifically at a school-based youth mental health peer education program and observed improvement in participants’ knowledge and stigma of seeking help.² This provides preliminary evidence and highlights the need for additional research on the effectiveness of youth peers making systematic changes in their communities, reducing stigma and in turn increasing access to mental health services. Evidence-based models for training designed for youth peer educators are limited. Internet searches and direct inquiries with similar programs, see attached listing, further supports the need to pilot this promising approach.

The original HAP (for adults) was developed by the Office of Diversity and Equity in BHRS, on January 2014. Participants complete a 12-week Parent Project® class and are encouraged to take 4 additional trainings to enhance their skills and knowledge about mental health. HAP graduates, including those with lived experience, are empowered to become leaders in their community and serve as a critical liaison to the County by doing outreach, speaking at panels and community events, teaching psycho-educational classes, etc. The idea for a youth focused HAP evolved from recognizing that **informed youth can take a proactive role in their communities, bring awareness, reduce stigma and change cultural beliefs and norms.**

The Proposed Project –The HAP-Y project will adapt, pilot and evaluate a psycho-educational process to train youth age 16-25 as ambassadors for mental health awareness, and will support the youth in their ambassador role following graduation. HAP-Y is a three year pilot project with an expected start date of September 1, 2016 and a total estimated cost of \$750,000. Key activities include:

1. Adapt the adult HAP model and process appropriate for the youth participants.
2. Provide psycho-educational courses (Wellness Recovery Action Plan®, Mental Health First Aid, Applied Suicide Intervention Skills Training, etc.) for participants, including youth with lived experience.
3. Establish opportunities for engagement (presentations, outreach, advisory roles etc.) post-graduation.
4. Provide ongoing groups for youth to process and troubleshoot outreach activities.
5. Conduct evaluation activities, pre and post-tests, participant surveys, and data analysis.

¹ Melissa D. Pinto-Foltz, M. Cynthia Logsdon, John A. Myers, Feasibility, acceptability, and initial efficacy of a knowledge-contact program to reduce mental illness stigma and improve mental health literacy in adolescents, *Social Science & Medicine*, Volume 72, Issue 12, June 2011, Pages 2011-2019.

² O’reilly, Aileen, James Barry, Marie-Louise Neary, Sabrina Lane, and Lynsey O’keeffe. "An Evaluation of Participation in a Schools- Based Youth Mental Health Peer Education Training Programme." *Advances in School Mental Health Promotion* (2016): 1-12.

HAP-Y has the potential of empowering youth, including youth with lived experience, increasing engagement in their communities and contributing to mental health workforce development. HAP-Y graduates can conduct outreach, speak at panels and events, teach psycho-educational classes, mentor and join committees, advisory groups, and/or commissions supported by adult allies. They are provided stipends for their participation.

Target Population – The HAP-Y program will recruit a minimum of 30 youth ages 16-25 to participate in the HAP-Y training process and graduate. At least 30% of graduates will be youth with Lived Experience. Youth will be recruited from diverse cultural backgrounds (White, Latino, African American, Filipino, Pacific Islander, Native American), gender identity and sexual orientation and geographic representation.

The Innovation – **MHSA Innovative Project Category:**

Makes a change to an existing mental health practice that has not yet been demonstrated to be effective.

Primary Purpose: Increase access to mental health services.

1. The HAP psycho-educational process is innovative, collaborative and client focused and has **not been evaluated** to understand its full impact.
2. The current process for graduating HAP adults and the program will **need to be adapted** for a youth audience.
3. There is **limited research** demonstrating the effectiveness of youth ambassadors in making systemic changes, decreasing stigma and increasing access to mental health services.



Evaluation – **Learning Goal #1:** Is the HAP psycho-educational process for training Health Ambassadors an effective method for building youth capacity and engagement in reducing stigma in their communities?

- Positive changes in pre/post questionnaires for youth ambassadors.
- Positive mental health perceptions, knowledge and awareness from community participants of youth ambassador-led outreach, presentations, efforts, etc.

Learning Goal #2: Are youth ambassadors effective in increasing access to mental health services for other youth, families and their communities?

- Positive perceptions with regards to accessing mental health services from community participants in youth ambassador-led outreach, presentations, efforts, etc.
 - Increased knowledge and awareness of how and where to access services
1. All youth ambassadors will receive a pre/post survey. Additionally, youth ambassadors with Lived Experience will receive a pre/post focused on their wellness and recovery.
 2. Data will be collected on referrals made to show increased access to services.
 3. Community participants in youth ambassador-led outreach, presentation, etc. will receive pre/post surveys to measure perceptions as it relates to stigma and accessing mental health services.

StarVista was selected through a Request for Proposal (RFP) to implement and manage the HAP-Y project, including the administration, participant recruitment and data collection aspects of the evaluation plan. A separate RFP process will be conducted to select a qualified evaluator to develop a thorough evaluation, analysis and reporting. The evaluation plan will include meaningful and diverse youth and stakeholder participation through the MHSA Steering Committee, which will also be the primary venue for vetting next steps and decisions related to continuation of the project.

Attachment – List of similar youth peer education/advocacy programs

Program Name and Website	Year Established	Location	Target Population	Method(s) of Engagement
<p>Youth Mental Wellness Ambassadors</p> <p>http://www.somervillema.gov/calendar/youth-mental-wellness-ambassador-launch</p>	2015	Somerville, MA	16-25 years old	<p>The Center for Teen Empowerment Inc. (TE) and the City of Somerville's Health and Human Services Department partner to launch the Youth Mental Wellness Ambassador Program. Youth Mental Wellness Ambassadors, ages 16-24 years old, will implement city wide discussion workshops and events addressing mental health and wellness among youth in Somerville. In partnership with youth serving agencies, schools, and housing, Ambassadors will shift attitudes about mental health, and change cultural beliefs and norms. By providing more youth lead safe spaces to discuss and learn, this program will support the city's commitment to decrease the stigmatization around mental health. - See more at: http://www.somervillema.gov/calendar/youth-mental-wellness-ambassador-launch#sthash.n9hXCf2V.dpuf</p>
<p>Mental Health Ambassadors</p> <p>http://www.sjsu.edu/counseling/Training_Program/Peer_Prevention_Programs/Mental_Health_Ambassadors/</p>	2007	San Jose State University	SJSU students	<p>The MHAs are similar to Peer Counselors in having positive attitudes toward mental health, good communication skills, and skills and knowledge to help students to be healthy and successful. However, MHAs are different from Peer Counselors in:</p> <ul style="list-style-type: none"> • Primary goal: MHAs' primary goal is making systematic change -- changing the culture and attitudes as well as reducing the stigma related to mental health issues for SJSU students and community. Peer counselors primary goal is to provide support to their peers and produce individual changes. • Main activities: MHAs are encouraged to create and engage in diverse programs and activities to help them to achieve their mission (e.g., presentation, tabling, designing handouts, participating in student organization meetings, talking to professors), while peer counselors mainly provide individual peer counseling.