Feb 4th, 2017

Kelty Mental Health Resource Centre
Mental Health Building #85
BC Children's Hospital
Room P3-302 - 4500 Oak Street
Vancouver, BC V6H 3N1

Re: Kelty Mental Health Resource Centre Youth Ambassador Program

To Whom It May Concern,

Transformative Growth Solutions is pleased to have received your request for a proposal to evaluate the Youth Ambassador Program and for the opportunity to work with the Kelty Mental Health Resource Centre. Our consulting team has demonstrated ability in both quantitative and qualitative methodologies, and we pride ourselves on using innovative approaches within a participatory evaluation strategy.

Enclosed are the following components as per your request:

- Overview of the Youth Ambassador Program
- Program logic model
- Evaluation objectives, approach, and methodologies
- Evaluation matrix
- Contribution analysis
- Credentialed Evaluator competencies for Canadian evaluation practice

We sincerely hope that this evaluation will be of use for the Kelty Mental Health Resource Centre, and we look forward to discussing the evaluation plan with you further. Thank you for the opportunity to grow together with this essential organization.

Sincerely,

Transformative Growth Solutions

Transformative Growth Solutions

Proposal to evaluate the Kelty Mental Health Resource Centre Youth Ambassador Program

Prepared for: Kelty Mental Health Resource Centre

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1.0 Program Background

1.1 Kelty Mental Health Resource Centre

Mental illness indirectly impacts all Canadians at some point in time through its effect on family members, friends or colleagues. The Kelty Mental Health Resource Centre (KMHRC) is a mental health literacy program that aims to support children and youth under 25 (as well as their family members) in British Columbia (BC) who are affected by mental illness, substance abuse and eating disorders. This is done by connecting these children, youth and families with resources and facilitating access to appropriate services. The program offers information and resources, help with system navigation, peer support, and is accessible through telephone, email or drop-in at the BC Children's Hospital.

1.2 Youth Ambassador Program

The Youth Ambassador Program is an initiative which began in 2013 through a partnership between BC Mental Health and Substance Use Services and the Youth in Residence, a youth support group at KMHRC. This initiative aims to engage youth in promoting mental health and wellness amongst friends, families, peers and in the community, to reduce stigma. The Youth Ambassador Program provides an opportunity for youth aged 17-25 in BC with or without lived experience of mental health challenges and with a passion for promoting mental health and well-being. Currently in its fifth year, over 100 youth have participated in the program as youth ambassadors. Those interested in being youth ambassadors are required to submit an application form and commit a minimum 10 hours to the program over the course of one year. Often, youth ambassadors sign up for a second year to mentor new youth ambassadors. Focus groups conducted throughout the program's development have improved the communication and engagement of youth ambassadors through the creation of a Facebook page, a mailing list, and a mentorship program where past ambassadors support new youth ambassadors.

As seen in the Logic Model (Figure 1), youth ambassador activities include planning, developing and delivering mental health promotion projects, providing feedback on KMHRC activities, promoting KMHRC to online, social media and physical communities, speaking at KMHRC events, writing blog posts for the KMHRC website, organizing their own activities and connecting with other like-minded youth ambassadors.

The objectives of the Youth Ambassador Program are to engage youth in promoting mental health and wellness in their communities, to reduce the stigma associated with mental health, to increase the dialogue among young people about early signs of mental illness, to raise awareness of available resources for youth mental health and mental health literacy, and to empower past ambassadors to mentor and support new ambassadors.

at the BC Children's Hospital.

2.0 Evaluation Purpose

The purpose of this evaluation is threefold: to determine the uptake and reach of the program, to determine the effect of the program on youth ambassadors, people engaged through the youth ambassadors, and the mental health system, and to determine the program's contribution to the longer term goal of reducing stigma associated with mental illness. The third aim will be addressed through a contribution analysis proposal developed as part of the evaluation proposal. As well, a logic model and evaluation matrix will be developed as a means of defining and measure the success of the program.

2.1 Logic Model and Theory of Change

The program logic model shown in Figure 2 illustrates the program's Theory of Change (Frechtling, 2007). It is the theoretical foundation of the program explaining how the program's inputs and activities lead to the intended outcomes and impacts, while identifying assumptions and potential risks underlying the causal links in the logic model.
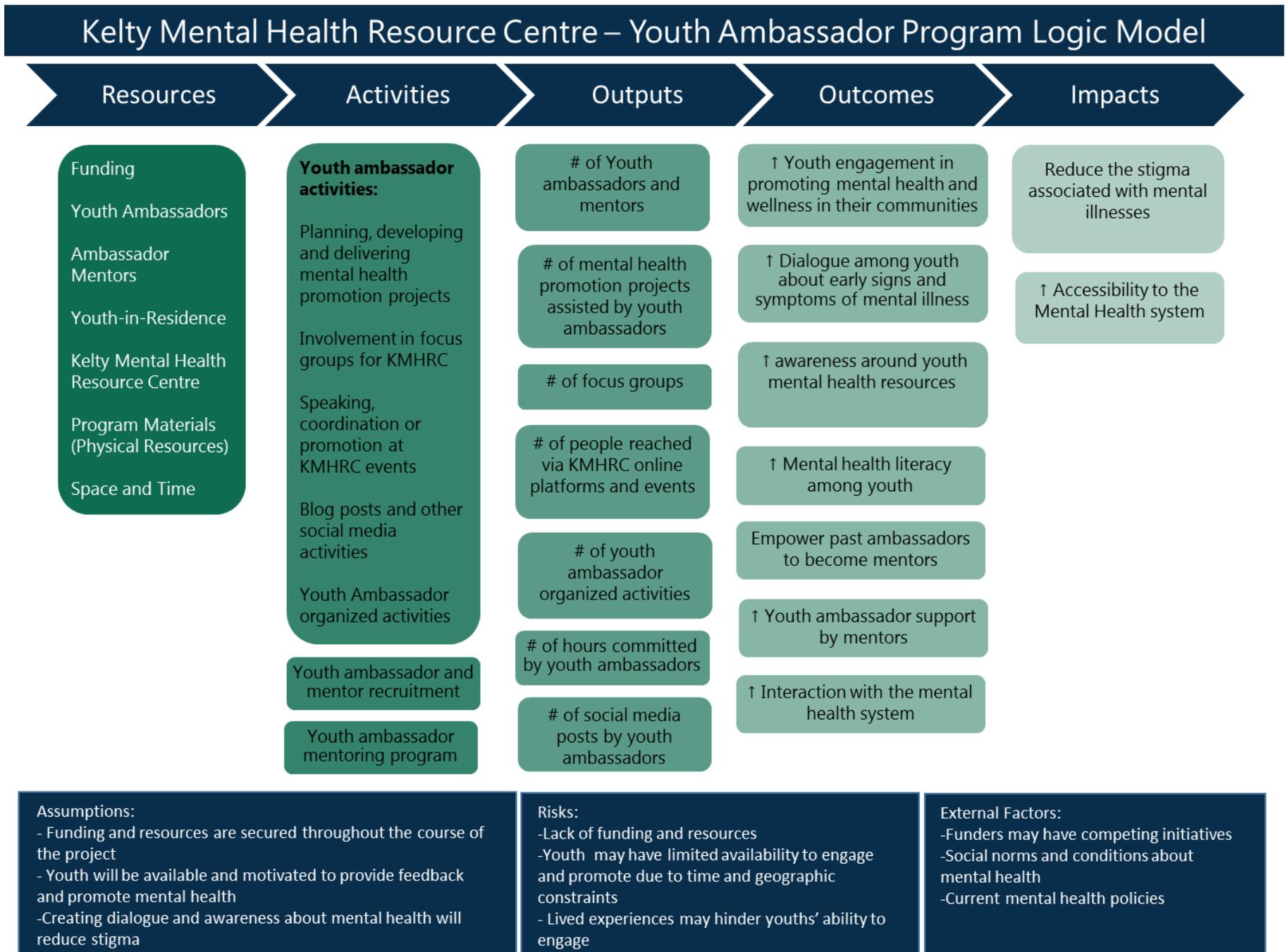
A long term goal of the Youth Ambassador Program is to reduce the stigma associated with mental illnesses and to increase accessibility to the mental health system. Mental illness stigma is seen as a barrier for accessing care and resources among youth. Assumptions are made in order to explain how the program resources eventually lead to the intended impact of the program. The main underlying assumption influencing whether the program outcomes can be achieved are that creating dialogue, and increasing awareness and education about mental health and illnesses will lead to reduced stigma among youth. By increasing mental health awareness, we assume that more people will access the KMHRC for resources and help with navigating the mental health system. This will contribute to the additional long term goal of increasing accessibility to the mental health system.

Furthermore, there is the assumption that the Youth Ambassador Program will create a safe space for youth to discuss their experiences with mental health and provide opportunities for youth to promote mental health in their communities. The long term impacts of youth engagement in the program is dependent on the assumption that youth will have the time to participate in the activities, and that resources are available throughout the program.

There are a number of risks that influence whether the program's outcomes and long-term impacts will be achieved. First, lack of funding, resources, and youth willingness to participate in the program could hinder whether program activities could be carried out. Furthermore, if youth have limited availability to participate in the activities due to time and geographic constraints, the ability to reach the community and promote awareness will be held back. Finally, the lived experiences of youth with mental health challenges may lead to the formation of negative relationships or may trigger adverse experiences.

There are also external factors that influence the program's ability to achieve their intended outcomes. For example, funders may have competing initiatives and sponsorships activities that influence the funding available to the program. Additionally, social norms and conditions about mental health among the community may influence whether mental health stigma can be reduced. Finally, current mental health policies could influence mental health system accessibility, funding and how activities are carried out.

Figure 2: Program Logic Model

Kelty Mental Health Resource Centre – Youth Ambassador Program Logic Model

Resources	Activities	Outputs	Outcomes	Impacts
Funding	**Youth ambassador activities:**	# of Youth ambassadors and mentors	↑ Youth engagement in promoting mental health and wellness in their communities	Reduce the stigma associated with mental illnesses
Youth Ambassadors	Planning, developing and delivering mental health promotion projects	# of mental health promotion projects assisted by youth ambassadors	↑ Dialogue among youth about early signs and symptoms of mental illness	↑ Accessibility to the Mental Health system
Ambassador Mentors	Involvement in focus groups for KMHRC	# of focus groups	↑ awareness around youth mental health resources	
Youth-in-Residence	Speaking, coordination or promotion at KMHRC events	# of people reached via KMHRC online platforms and events	↑ Mental health literacy among youth	
Kelty Mental Health Resource Centre	Blog posts and other social media activities	# of youth ambassador organized activities	Empower past ambassadors to become mentors	
Program Materials (Physical Resources)	Youth Ambassador organized activities	# of hours committed by youth ambassadors	↑ Youth ambassador support by mentors	
Space and Time	Youth ambassador and mentor recruitment	# of social media posts by youth ambassadors	↑ Interaction with the mental health system	
	Youth ambassador mentoring program			

Assumptions:
- Funding and resources are secured throughout the course of the project
- Youth will be available and motivated to provide feedback and promote mental health
- Creating dialogue and awareness about mental health will reduce stigma

Risks:
- Lack of funding and resources
- Youth may have limited availability to engage and promote due to time and geographic constraints
- Lived experiences may hinder youths' ability to engage

External Factors:
- Funders may have competing initiatives
- Social norms and conditions about mental health
- Current mental health policies

3.0 Evaluation Approach and Stakeholders

This program is fully implemented and stabilized. As such, we have proposed an outcome evaluation. An outcome evaluation focuses on whether a program is achieving its intended goals; it captures concepts like effectiveness, uptake, and reach of the program, making it appropriate for addressing the evaluation objectives specified by the Youth Ambassador Program steering committee (Harris, 2010). A contribution analysis will support the outcome evaluation in order to better capture the broader impact of the program as it relates to a theory of change, and to assess the cause and effect nature of the program on the measured outcomes (Mayne, 2008).

Keeping with the spirit of the Youth Ambassador Program, which uses a participatory peer-to-peer design, we propose to use a participatory approach in the present evaluation. A participatory approach ensures that the perspectives of stakeholders are considered in the evaluation design, safeguarding against oversights in appropriateness, inclusivity and reliability (Harris, 2010). Youth ambassadors, ambassador mentors, the KMHRC steering committee, and other stakeholders where appropriate (Figure 2) will be included in the management and implementation of the evaluation. For portions of the evaluation where there participation is not expected to introduce bias, they will assist in the design of the focus groups, surveys, social media approaches, and analysis of evaluation results.
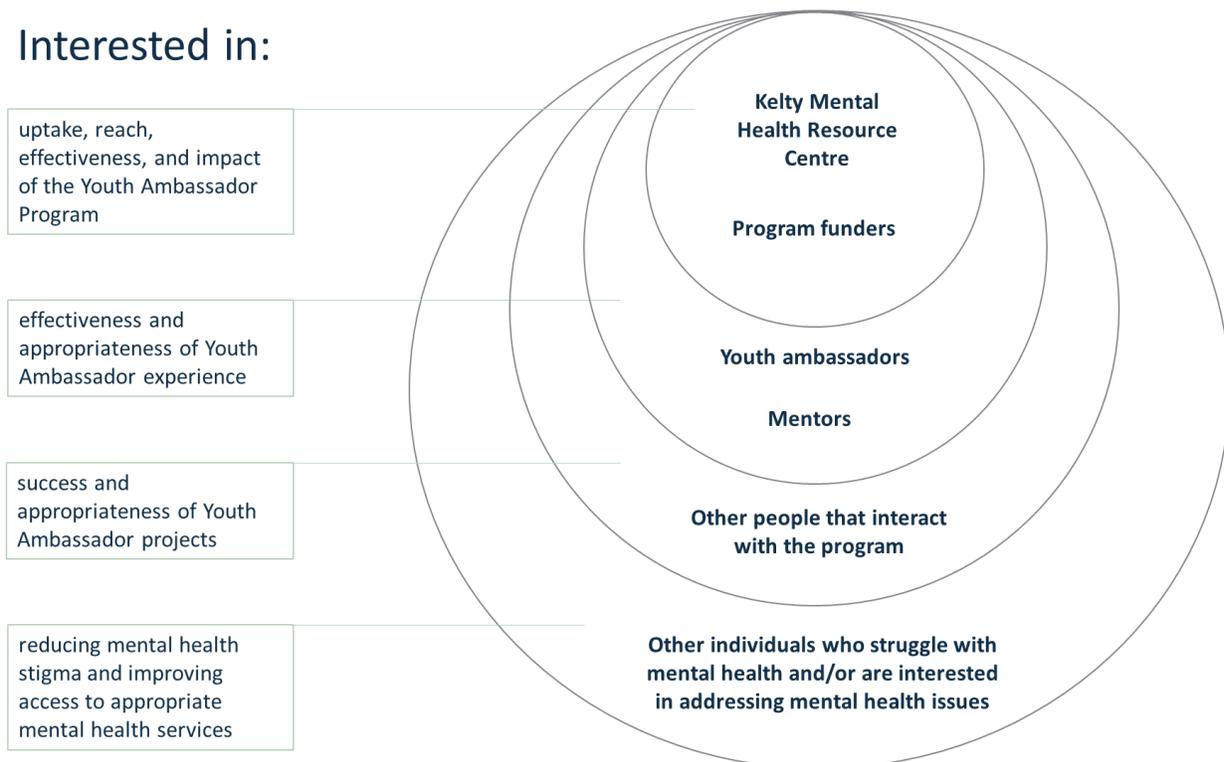
Interested in:

uptake, reach, effectiveness, and impact of the Youth Ambassador Program	**Kelty Mental Health Resource Centre** **Program funders**
effectiveness and appropriateness of Youth Ambassador experience	**Youth ambassadors** **Mentors**
success and appropriateness of Youth Ambassador projects	**Other people that interact with the program**
reducing mental health stigma and improving access to appropriate mental health services	**Other individuals who struggle with mental health and/or are interested in addressing mental health issues**

Figure 2: Stakeholders of the Youth Ambassador Program

4.0 Evaluation Methods

Data collection will consist of both qualitative and quantitative methods. In keeping with the participatory approach, youth ambassadors, ambassador mentors, and the KMHRC Steering Committee will be involved in both data collection and analysis.

Program Record Review: The evaluation team will use records from the Youth Ambassador Program and the KMHRC to quantitatively assess the uptake of the Youth Ambassador Program, as well as the effects on engagement of the community with the program and mental health system. This data will provide specific information on total numbers of: youth ambassadors and ambassador mentors recruited; hours volunteered by ambassadors; focus groups completed; events and activities planned and/or carried out by ambassadors; and visitors, calls or emails to the resource centre. Records on participation by community members at events will be included if available.

Online Engagement Analysis: The KMHRC has a large online presence, with an active Facebook page, Twitter account and Youtube Channel, in addition to a comprehensive and accessible website with mental health resources, toolkits, event listings, and blog posts about mental health. One goal of youth ambassadors is to promote engagement with these online resources and communities; therefore it is necessary to assess engagement and reach of these online communities. This can be achieved through quantitative analysis of analytics reports that are produced by each platform (for eg. Google produces monthly analytic reports for webpages while Facebook, Twitter, and YouTube produce individual reports). Reports indicate number of visitors, pages visited (and time spent per page), number of "likes" on social media (overall and per post), geographic locations of visitors, and trends of engagement over time. While overall trends in social media engagement since the program inception can be assessed, sub-analyses can also be conducted to determine whether specific campaigns, events, or promotions have influenced the trend of user engagement, as well as to see if the program is reaching all geographic areas of BC. This component of the evaluation will also include analysis of the pop-up survey on the KMHRC website.

Online Community Survey: A survey will be created in both paper and online format through FluidSurveys to assess the effect of the Youth Ambassador Program on the knowledge, awareness, and literacy of community members with regards to mental health issues and resources. Participants will be recruited to complete the survey from promotional events and other activities put on by the youth ambassadors. To increase accessibility, the survey can be completed in-person on paper at the event, or through an email link. This recruitment strategy (as opposed to promoting the survey for all persons engaged with the KMHRC website and social media accounts) will allow us to better identify that indicated changes in behaviours, beliefs, and knowledge were actually due to the youth ambassadors. Questions in the survey will assess through both open-ended and likert-scale questions whether interactions with the program and KMHRC increased participants': awareness of mental health resources, comfort surrounding accessing mental health resources, knowledge of mental illness, and understanding of stigma. While the survey will be anonymous, it will ask demographic questions (age, gender, etc.) to provide context for analysis.

"Social" Voice Campaign: A "social" voice campaign will be designed as a modified version of a photovoice qualitative methodology and will run throughout the first half of the evaluation period (allowing adequate time for analysis). Youth across BC will be invited to share their experiences with the program and KMHRC through the online media format of their choice (photos, poetry, status updates, memes, etc). Any youth can participate through using the hashtag "#keltytalks" on their social media posts, which will allow all posts using the hashtag to be collected for thematic analysis. This is an engaging and innovative method which is likely to be more appealing for a youth audience who feel they can better express ideas, feelings, and challenges through visual and social media.

Youth Ambassador Focus Groups: Focus groups will be held for the youth ambassadors to discuss the effect of the program on the youth ambassadors themselves. Discussions will be led by an evaluation team member, and will focus on open-ended questions such as "How are you equipped to talk to others about mental health?", "Have you been supported by the program in talking to others about mental health?", "How can the program better support your goals and learning with regards to mental health?". These open-ended questions will allow for positive, negative, and neutral responses, and the involvement of a facilitator from outside the program will encourage participants to provide honest answers. As indicated, the Youth Ambassador Program has completed focus groups as part of their programming previously; therefore we assume it is a known and acceptable method of engagement for the ambassadors.

Because talking about mental health openly can be challenging for some of the youth ambassadors, a Dotmocracy activity will be available during the focus group to allow youth to share their ideas about the program more discreetly. Blank idea rating sheets as seen on www.idearatingsheets.org will be available in the back of the room, or near the snack table ("Idea Rating Sheets," n.d.). There will be a broad overarching question posed to youth such as "How has the Youth Ambassador program impacted your growth and experience with mental health?". Youth will be able to write the responses on the idea rating sheets and post them on the wall for other youth to read. As youth read the various responses posted on the wall, they will have dot stickers that they use to indicate their level of agreeance to the response on 5-point Likert scale. This will allow evaluators to examine the general impact on the program on youth ambassadors as a group.

Key Informant Interviews: Key informant interviews will be conducted with the youth ambassadors to assess the effect of the program. Discussions will be led by an evaluation team member, and will focus on whether they feel as though their engagement in mental health activities and dialogue, and their mental health literacy has increased as a result of the program. The discussions may also reveal information about the level of support youth ambassadors receive from the program and from the mentorship of past youth ambassadors. In addition, key informant interviews with other stakeholders can be used to obtain measures of youth and community engagement such as attendance rates at promotion events if not available in the program records.

Data Analysis: Quantitative data will be analysed using R statistical software, while qualitative data will be thematically analysed using NVivo software. Selected youth ambassadors will be invited to assist with the thematic analysis of the "social" voice campaign, online discussion board, and focus groups; this will not only increase the participatory nature of this evaluation but

will also help increase the skills of the involved youth, creating a reciprocal environment of research.

Limitation: One limitation of the chosen methods used to assess community engagement with the program and mental health system (including the program record review, online engagement analysis, online survey, and photovoice) is that it may be difficult for users to discern changes in attitudes, knowledge, and actions that are due to activities and promotions from the Youth Ambassador Program directly, versus from a combination of promotion via the Youth Ambassador Program and other KMHRC activities. Because of this, increases in engagement and access to mental health services must be cautiously attributed to the Youth Ambassador Program.

Triangulation

We will triangulate qualitative data sources when possible. It should be noted that triangulation does not simply aim to find the exact same responses from different methodologies; rather, it recognizes the variability in data collection techniques and works to reconcile discrepancies, such that a more reliable and comprehensive picture of the recorded outcomes can be obtained (Patton, 1999). Some recommended opportunities for triangulation include: comparing responses obtained through different methods such as the key informant interviews and the focus groups, comparing what is said about the same topics over time such as on the "Social" Voice Campaign and comparing different data sources within the same method: surveys completed in person vs. surveys completed online.

Table 1: Evaluation Matrix

Evaluation Questions	Indicators	Data Sources	Methods
Uptake and Reach			
What is the uptake of the Youth Ambassador Program?	• Number of youth ambassadors recruited • Number of hours input by youth ambassadors	Program records	Program record review
What is the reach of the Youth Ambassador Program?	• Level of youth engagement through social media • Number of program events and promotion projects • Number of youth reached through program events and promotion projects	Social media records Program records Program records and stakeholders	Social media analytics Program record review Program record review and key informant interviews with program
Effect of the Program			
What is the effect of the Youth Ambassador Program on the youth ambassadors?	• Increase in engagement in mental health activities and dialogue amongst youth ambassadors* • Increase in mental health literacy amongst youth ambassadors*	Youth ambassadors	Focus groups Dotmocracy Key informant interviews
What is the effect of the Youth Ambassador Program on the people engaged through the youth ambassadors (community)?	• Increase in awareness of mental health amongst community* • Increase in engagement through social media amongst community* • Increase in mental health literacy amongst community*	People engaged through youth ambassadors (community)	Online survey "Social" voice campaign
What is the effect of the Youth Ambassador Program on the mental health system?	• Number of youth accessing the KMHRC • Increase in awareness of mental health services amongst youth*	Program records	Program record review Survey
Impact			
Does the Youth Ambassador Program reduce stigma associated with mental illness?	See contribution analysis		

*Based on a standards of acceptability, which are predermined benchmarks above which objectives will be considered met. Changes will be subjectively measured by relevant stakeholders.

5.0 Contribution Analysis

We will use a contribution analysis to improve causal inference of the program's success in terms of its intended impact of reducing mental health stigma. We assume that the Youth Ambassador program will have direct control of the theory of change outputs, and direct influence over changes in mental health stigma. Therefore, we propose a contribution analysis of direct influence, which gathers evidence that that we observed the direct influences that we anticipated based on our theory of change. A contribution analysis of direct influence will provide reasonably robust evidence that the program was influential in bringing about changes in mental health stigma, taking other factors into consideration, such as time and locational trends (Mayne, 2008).

Box 1 outlines the general approach involved in a contribution analysis (Mayne, 2008). Detailed descriptions of steps 1-3 can be found in the theory of change figure and narrative (refer to section 2.1). The participatory nature of our evaluation approach will allow us to determine the extent to which the theory of change is contested by relevant stakeholders, and to ensure that

the program logic model and associated assumptions are appropriate and valid (Mayne, 2008). Triangulation of results from the initial evaluation methodologies (refer to section 4.0) will be an important step to inform the contribution story and its associated challenges (step 4).

Steps of a Contribution Analysis

Step 1: Set out the attribution problem to be addressed

Step 2: Develop a theory of change and risks to it

Step 3: Gather the existing evidence on the theory of change

Step 4: Assemble and assess the contribution story and challenges to it

Step 5: Seek out additional evidence

Step 6: Revise and strengthen the contribution story

Additional information on mental health stigma (step 5) will be gathered using Trendsmap (Trendsmap, n.d.). Trendsmap is an online real-time analytics tool for twitter content. Popular hashtags, users, and words can be observed on a map, and results can be filtered based on region. This tool will enable us to observe temporal trends in online mental health discussions in British Columbia (B.C.), where the program is delivered; it will also enable us to compare the trends we observe in B.C. to other regions. Using Trendsmap, we can track our hashtag #KeltyTalks, as well as other related hashtags, words, and users that may be relevant to the mental health discussion. We can also search for keywords using Boolean operators and gather other useful information such as the gender split of the content, whether the sentiment is positive or negative, and which tweets are most popular or influential. Because the method involves twitter users from the general population, we can assess changes in the general culture of mental health stigma; because the tool allows us to observe trends over time, we can better address causality by cross-referencing with the time and location of program initiatives. A new iteration of triangulation using the results from the initial evaluation methodologies, as well as

the social media analysis from Trendsmap will provide the necessary information to revise and strengthen the contribution story (step 6), and inform any necessary changes (step 4).

8.0 CES Evaluation Competencies

The following table includes a description of how our team has demonstrated Credentialed Evaluator competencies (Competencies for Canadian Evaluation Practice, 2010).

Competency	Evidence of Demonstration
Reflective Practice	
1.1 Applies professional evaluation standards	1) Apply the Canadian/US Joint Committee Program Evaluation Standards http://evaluationcanada.ca/program-evaluation-standards 2) Apply the five dimensions of the Standards; feasibility, propriety, utility, accuracy and meta evaluation 3) Recognize the Standards are illustrative and to be used with discernment as required in diverse contexts and propriety obligation
Technical Practice	
2.2 Specifies program theory	As the client has asked for information regarding how to define and measure success through the creation of a logic model, we are ensuring that we gain a complete understanding of the program through consultation with the client and relevant stakeholders before developing the evaluation proposal. This includes understanding the program objectives, components of the program and connections between components, the logical flow to the anticipated outcomes and the assumptions underlying the program. We have provided a program logic model and a written commentary in the evaluation proposal that will act as a living document that can be amended upon further consultation with the client and relevant stakeholders. We have also used the logic model as a guide to develop the evaluation proposal.
Interpersonal Practice	
5.8 Uses collaboration/partnering skills	Throughout the evaluation process, we will take a participatory approach and work closely with the client and stakeholders at all stages of the evaluation. We will encourage all stakeholders to work with us towards a common goal, value open and active haring of knowledge between all parties involved, appreciate the contribution of all parties, promote a shared understanding of the evaluation objectives and advance systems thinking and work towards mutual benefit among partners. We recognize that the youth ambassadors (in particular) currently play an important role in the on-going development and improvement of the program, and provide a unique perspective on the program, the effects of the program on the community and mental health issues in general.

9.0 Conclusions

The team at Transformative Growth Solutions has proposed an evaluation for Kelty Mental Health Resource Centre's Youth Ambassador Program which encompasses the Steering Committee's requested components. The evaluation approach and components have been thoughtfully considered in the context of this program.

10.0 References

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