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247 Seaside Drive  
Vancouver, BC  
Canada V6C 2Y9

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February 4, 2017

Kelty Mental Health Resource Centre  
BC Children's Hospital, Mental Health Building  
4500 Oak Street Street, Vancouver, BC

Dear Kelty Mental Health Resource Centre,

Wavelength Consulting is pleased to submit a response to your Request for Proposal (RFP) for the Youth Ambassador Program (YAP). Given your evaluation needs, we have recommended a process evaluation. In our proposal, we have included:

- an overview of the YAP,
- a description of our proposed evaluation questions and approach,
- a draft logic model and evaluation matrix,
- a description of our proposed methods for the 40 consulting days, and
- an overview of our contribution analysis plan and recommendations for further evaluation.

Wavelength Consulting is committed to producing evaluations that are useful and meaningful to our clients, while upholding the ethics and standards advocated by the Canadian Evaluation Society.

Thank you for giving us this opportunity to respond to your RFP. We look forward to receiving your feedback and discussing this proposal further in order to confirm our understanding of YAP. If you have any questions or concerns, please feel free to contact us at any time.

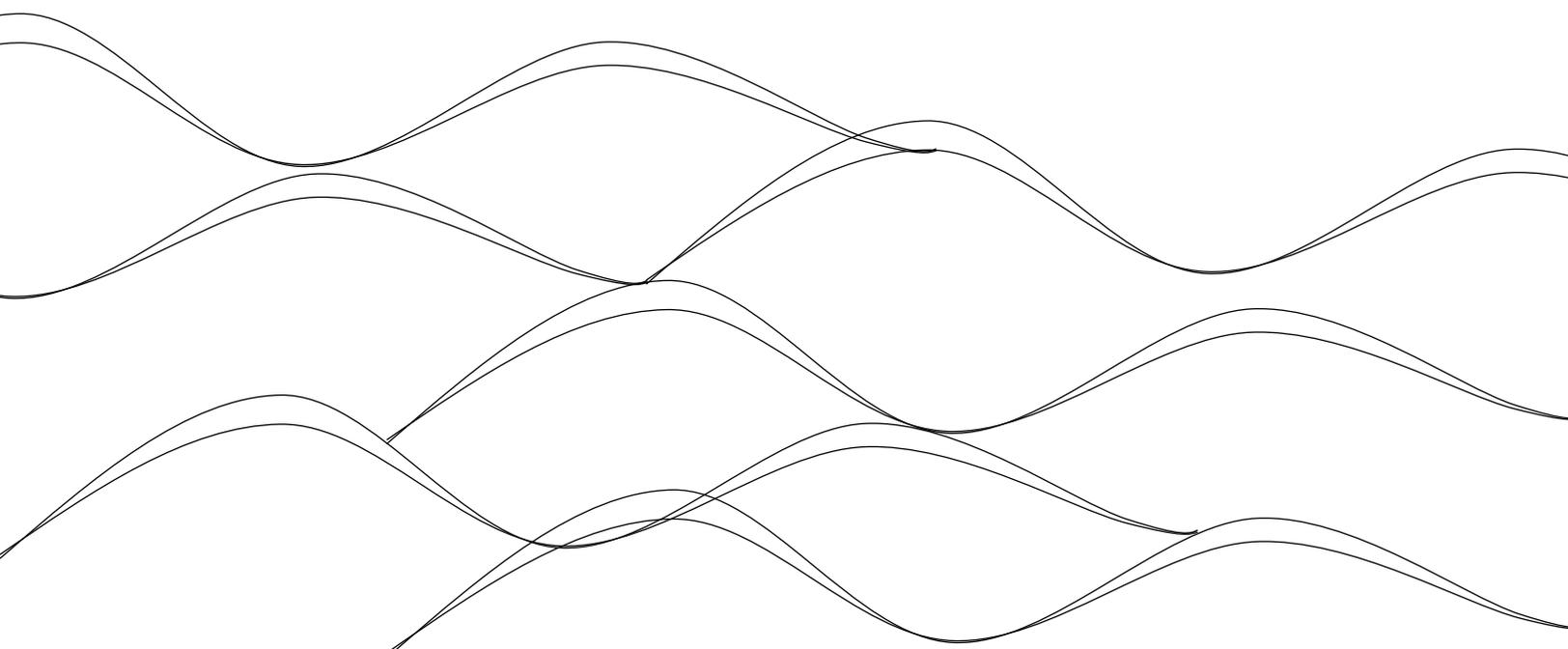
Sincerely,  
Wavelength Consulting

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

February 4, 2017

prepared for •  
Kelty Mental Health Resource Centre

prepared by •  
Wavelength Consulting



## 1.0 Program Overview

The Kelty Mental Health Resource Centre (KMHRC) of the British Columbia (BC) Children's Hospital provides a range of services, information, and tailor-made resources for clients to promote mental health and well-being. In order to target the youth population in BC, KMHRC offers the Youth Ambassador Program (YAP) with the aim of engaging youth aged 17 to 25 in promoting mental health and wellbeing among their friends, families, peers, and communities.

YAP started in January 2013 through KMHRC's partnership with BC Mental Health, Substance Use Services, and Youth in Residence. The program conducted a 5-month pilot and has had over 100 youth volunteers in the past 5 years. Youth ambassadors are given opportunities to develop and deliver a mental health promotion project, provide feedback to KMHRC management, join a focus group, promote KMHRC and speak at events, write a blog post for the website, and identify and organize their own activities in order to promote mental wellness in their communities and decrease the stigma associated with mental illness. While youth are only required to sign up for 1 year, many have continued on with YAP as mentors for other ambassadors.

KMHRC has numerous stakeholders ranging from youth ambassadors; families, friends, and peers; the community at large, including those with and without previous mental health issues; BC Children's Hospital; KMHRC staff including Youth in Residence; KMHRC local and provincial partners such as Royal Bank of Canada; to the mental health system. Given the diverse interests and needs of the various stakeholder groups, we strongly recommend that representatives from each identified group sit at our Stakeholder Roundtable. This Roundtable will enable necessary input, discussions, and feedback from the stakeholders throughout the evaluation process.

## 2.0 Evaluation Design

Even though the YAP has not undergone any formal evaluation before, we are pleased to learn about the program's commitment to refining and improving its information and services. This commitment is evident to us through the KMHRC's collection of feedback through focus groups, its website, and the testimonials presented in the RFP.

### 2.1 Evaluation Approach

In response to the evaluation services required in the RFP, we recommend a **process evaluation** of the YAP. A process evaluation will focus on how all of the YAP's activities work together to achieve the initiative's mission. We think this is an appropriate choice, given that: a) the YAP has not undergone any formal evaluation before, and b) KMHRC's needs to define what program success means to them before measures can be introduced to determine the YAP's impact.

Additionally, we suggest taking a **utilization-focused approach** to this process evaluation to ensure that our evaluation questions and chosen methodology are understandable to the KMHRC's stakeholders. We want the KMHRC to take ownership of this evaluation so that it will be useful to the Centre's long-term planning and

development of the YAP. We have explained how we plan to engage all of KMHR's stakeholders in our evaluation in Section 5.0.

## 2.2 Evaluation Questions

We have identified 4 questions based on the YAP's aims and the RFP. The process and contribution questions are expanded upon in our evaluation matrix (Appendix B).

### Process Questions

1. What is the YAP's uptake and reach?
2. Given the current program's stage, what influence are the program's activities having on youth ambassadors, people engaged through the youth ambassadors, and the mental health system?

### Contribution Questions

3. To what extent do the draft logic model and evaluation matrix reflect KMHRC's mission and definition of success?
4. To what extent does the YAP contribute to KMHRC's long-term goal of reducing the stigma associated with mental illness?

## 3.0 Logic Model Narrative

Mental health issues have become increasingly prevalent in Canada, as 20% of Canadians are expected to personally experience a mental illness in their lifetime (CMHA, 2016). The Canadian Mental Health Association describes mental illnesses as "the single most disabling group of disorders worldwide" among youth, with an estimated 10-20% affected (CMHA, 2016). Despite the high prevalence of mental health issues, stigma often prevents affected youth from speaking about their issues or seeking necessary help (CAMH, 2012). In order to help address this growing problem among youth, the KMHRC created the YAP to provide BC youth aged 17-25 with the opportunity to engage in promoting mental health and wellbeing among their families, peers and communities, and decrease the stigma associated with mental illness.

A program theory explains how, why, and under what conditions the program effects occur. While the YAP has not detailed a program theory, this is important to understanding why we expect the program activities to lead to changes in short-, intermediate-, and long-term outcomes. The logic model (Appendix A), is an illustration of this program theory, as it visually illustrates the connections between program inputs, activities, outputs, and outcomes. Based on our understanding of the program, YAP employs several program theories, including the Health-Promoting Self-Care System Model which asserts that "individuals are capable of developing the knowledge, attitudes, and skills necessary for deciding upon and performing health-promoting behaviours" (Raingruber, 2013). This is supported by evidence indicating that educational interventions focused on reducing stigma were effective in reducing personal stigma among individuals (Griffiths et al. 2014).

Program assumptions, risks, and external factors are important to program functioning and determine whether the theory will play out as expected. These have been noted in Appendix A.

## 4.0 Methodology

The evaluation plan will employ a mixed-methods approach, through the collection and analysis of qualitative and quantitative data. We suggest three methods: (1) a media analysis, (2) a document review, and (3) a mobile application. We also suggest two methods for further evaluation that are in line with the KMHRC's long-term goal of reducing stigma.

Our focus for this evaluation is to assess the YAP's uptake and reach through a participatory approach as well as assess the influence of the program's activities on youth ambassadors and people engaged. We will discuss these methods further with the Stakeholder Roundtable and ask for input. The evaluation matrix (Appendix B) outlines the methods and indicators that will be used to answer each evaluation question.

### 4.1 Media Analysis

We would like to commend KMHRC-YAP for creating a webpage and online resources that are inclusive to multiple languages and are informative. In addition, we would like to applaud its current evaluation effort of collecting information from users that visit their webpage. Given KMHRC-YAP's strong online presence, we propose that a comprehensive analysis of all its media content be held during the first 20 consulting days. The information gathered from these analyses will help us assess the YAP's efforts surrounding the uptake and reach of the program online.

First, we propose the use of *Google Analytics*, a free service offered by Google that generate statistics about a website's traffic and can track a variety of web-based content. Once a website is registered in *Google Analytics*, data is continuously collected and saved online in a password protected account. Information to be monitored for evaluation purposes includes: specific information being accessed, user navigation patterns, number of visitors, geographic reach, length of session, number of page views, number of pages per visit, and language settings on a user's computer. This information will help answer the following evaluation questions: which web pages are most valuable, where visitors come from, what they do on the site, which keywords resonate with users, time spent on the site, which pages retain visitors the longest, what search terms people use to find the site. This data will provide a deeper understanding of the website's usability and how it enables members to serve themselves.

Second, we would also like to analyze the YAP's social media. Social Media Analysis is the practice of gathering and analyzing data from blogs and social media websites. We have identified KMHRC's Twitter and Facebook Pages and noted them as highly active accounts (e.g. an average of 3 tweets per day). Social media continuously collects data and maintains records that contain information pertaining to topics, hashtags, and mentions. Additionally, it is our understanding that YAP maintains an active presence of blog posts. We propose to analyze all these social media records by conducting and analyzing the

written texts (i.e., messages/tweets/posts and the blogs) into themes using Nvivo 10. The information obtained from this analysis can be used to measure the kinds of topics being discussed and blogged about. This analysis will allow us to continue to answer questions about uptake and reach of the program, as well as to begin to understand the influence these social media activities have on ambassador youth, the people engaged with them, as well as the mental health system.

#### 4.2 Document Review

We commend the YAP on collecting data and feedback forms from Youth Ambassadors. We suggest a document review of the wide array of data collected from the program. These include Youth Ambassadors' (1) feedback provided to program coordinators and management on KMHRC resources, programs, and initiatives, (2) Kelty staff records of focus group discussions, (3) proposals for mental health promotion projects and other records by the Youth Ambassadors and (4) submitted application forms to become an ambassador. We would like to discuss other documentation that is available with the Stakeholder Roundtable and access these reports and documents (e.g. reports conducted after events and projects). We also noted that the RFP did not include information on the number of current staff, budget and sources of funding of the YAP, unidentified demographics about the Youth Ambassador's demographics and recruitment methods for the YAP. This information will be informative as to the number of people YAP is reaching and uptake as well as who is accessing these services.

We would also like to review the health promotion information that is provided by the KMHRC to service users to cross-validate the information provided by these handouts, DVDs and blogposts with the feedback that is received from Youth Ambassadors' feedback about these handouts.

*Analysis:* Analysis of qualitative data will be conducted by identifying themes and will be processed with *NVivo 11.0 (QSR International, Burlington, MA)*. The findings will be discussed with the Stakeholder Roundtable to ensure the report findings are specific and relevant. Analysis and interpretation of the quantitative data will be conducted using *Statistical Analysis Software (SAS) 9.4*.

#### 4.3 Evaluation Mobile Application

As a way to measure the influence the program activities are having on youth ambassadors, the people they are engaged with, and the mental health system, we propose that we use the fact that YAP is currently developing an app as part of one of their initiatives (RFP-footnote #2 pg. 5). We hope that using this initiative as an opportunity to gather feedback will save the program time and money. We propose to add a feedback button to the new app called: "YAP! - *talk to us*." This button will direct the user of the app to a short questionnaire, and which also allow the user to document their experience using their phone's camera. The information and pictures collected in this feature of the app should remain anonymous. We hope that by introducing the ability to



take pictures in the feedback, this will engage the target population and accommodate members of different literacy levels and language barriers. YAP! will be launched in September since the Youth Ambassador Program runs from September to May.

We suggest group-specific questionnaire accessed via a mobile app called YAP!. Once the app is downloaded, no identifiers will be asked from the individual. The questionnaire page will only ask to identify a person's role in the program as follows: "Kindly select the best fit answer: Are you a Past Youth Ambassador, Current Youth Ambassador, Youth engaged in an event, Family member, Community member or supporter, Program coordinator or Manager, or Other: \_\_Specify" The mobile app will address the influence that the program's activities on them. It will be specific to the user logging in, for example, if 'Youth engaged in an event' is selected, questionnaire questions may include "How many events have you attended in the past?" "What was the latest event?" "Do you feel that your knowledge changed about [the specific topic] after attending this event?"

YAP! will include a component where photos can be uploaded that are relevant to KMHRC-YAP. The photos will be used to collect information about the program's activities from the perspective of the Youth Ambassadors and those using the program. Photovoice is useful to empower vulnerable populations; individuals are directly involved in the evaluation by capturing their everyday experiences using pictures.

Existing focus group discussions with Youth Ambassadors can be utilized to discuss the issues addressed in the photos. Youth Ambassadors and users of the program will photograph their experience for 1 week, after which these will be discussed in one of the focus group setting.

## 5.0 Contribution Analysis and Recommendations for Further Evaluation

The RFP has outlined the KMHRC's desire to use **contribution analysis** to determine the YAP's contribution to their larger, long-term goal of reducing stigma associated with mental illness. We applaud KMHRC for wanting to verify the YAP's program theory outlined in Section 3.0. Contribution analysis will allow KMHRC to understand why any observed results have occurred, what role the YAP has played in this, and other contextual factors and alternate explanations that could explain the YAP's program theory. Contribution analysis is also an appropriate choice for the YAP, because any impact it has will likely be a result of the mix of information and services provided by KMHRC.

To carry out contribution analysis, we suggest that KMHRC establish a **Stakeholder Roundtable** of 12 members. These 12 members are to represent the following stakeholder groups: youth ambassadors with (n=2) and without mental health experience (n=2), ambassador mentors (n=2), Youth in Residence (n=3), KMHRC (n=1), The Kelty Patrick Dennehy Foundation (n=1), and RBC Children's Mental Health (n=1). During our proposed process evaluation they will meet in-person three times to engage in a discussion facilitated by a member of Wavelength Consulting. Their involvement is explained further in the table below where we present Mayne's (2001) six steps and our recommended steps for answering the two contribution questions in Section 2.0.

Contribution Analysis Step	Recommendation to KMHRC
1. Set out cause-effect issue to be addressed	<ul style="list-style-type: none"> <li>-Verify and refine the program theory described in Section 3.0 with Stakeholder Roundtable</li> <li>-Confirm Wavelength Consulting’s understanding of the YAP’s strengths and limitations</li> </ul>
2. Develop the postulated theory of change and risks to it including rival explanations	<ul style="list-style-type: none"> <li>-Verify and refine Wavelength Consulting’s draft logic model with the Stakeholder Roundtable by considering the links between each activity</li> <li>-Discuss identified external factors, assumptions, and risks in draft logic model</li> </ul>
3. Gather the existing evidence on the theory of change	<ul style="list-style-type: none"> <li>-Provide input on Wavelength Consulting’s proposed methodology and support their information needs when performing data collection and analysis activities</li> </ul>
4. Assemble and assess the contribution claim, and challenges to it	<ul style="list-style-type: none"> <li>-Review Wavelength Consulting’s findings and contribution story</li> <li>-Assess strengths and weaknesses in program logic that could be explained by other influencing factors</li> </ul>
5. Seek out additional evidence	<ul style="list-style-type: none"> <li>-Consider using methods such as Goal Attainment Scaling or Social Network Analysis (see Section 5.1)</li> </ul>
6. Revise and strengthen the contribution story	<ul style="list-style-type: none"> <li>-Continue reassessing program strengths and weaknesses by collecting feedback and improving program information and services</li> </ul>

### 5.1 Recommended Methods for Further Evaluation

A) Goal Attainment Scaling (GAS) to quantify the achievement of goals in terms of each individual participant. Goals are decided collaboratively with program staff where a range of possible outcomes will be chosen for each goal on a 5-point scale (-2 to +2), where 0 is the “expected level” of attainment over a period of time. Results can be used individually or aggregated to measure effectiveness of YAP.

B) Social Network Analysis to provide an insight into how YAP fosters connections between the participants, its services, and other partner agencies. Mapping a network involves identifying all the potential programs and services that participants can be directed to, and tracking how participants utilize the information. The visual representation of social networks will help the program understand the network data create strategies to inform and replicate the navigation of services.

### 6.0 Evaluation Timeline

Our evaluation timeline defines work parameters and plans to demonstrate that each step is feasible for the 40 days we have been given.

	1 (Days 1-7)	2 (Days 8-14)	3 (Days 15-21)	4 (Days 22-28)	5 (Days 29-35)	6 (Days 36-40)
<b>Stakeholder Roundtable Meetings</b>						
<b>Media Analysis</b>						
Review of website and social media accounts (data collection)						
Data analysis and synthesis						
<b>Document Review</b>						
Data collection						
Data analysis and synthesis						
<b>YAP! Smartphone Application</b>						
Create and pilot test smartphone app						
Disseminate app among various target groups						
Data analysis and synthesis						

## 7.0 Demonstrated Core Evaluation Competencies

We have demonstrated competencies for Canadian evaluation practice for each of the five domains outlined by the Canadian Evaluation Society. Reflective practice competencies are demonstrated in our evaluation proposal through our **commitment to respecting all stakeholders (1.3)** and efforts to include stakeholder input in the evaluation design. We have intentionally included youth with and without mental health experience in our Stakeholder Roundtable (Section 5.0) Technical Practice competencies are exemplified through the **framing of our evaluation questions (2.5)** in accordance with YAP's evaluation priorities and information needs (Sections 2.0, 4.0). Specifically, we have identified two process and two contribution questions. Finally, we have **proposed a program theory (2.2)** in Section 3.0 to aid in ascertaining impact for the contribution analysis (Section 5.0)

### References

- Canadian Mental Health Association (CMHA). (2016). Facts about mental health. Accessed on February 4, 2017.
- Centre for Addiction and Mental Health (CAMH). (2012). Stigma. Accessed on February 4, 2017.
- Griffiths, K., Carron-Arthur, B., Parsons, A., Reid, R. (2014). Effectiveness of programs for reducing the stigma associated with mental disorders. A meta-analysis of randomized control trials. *World Psychiatry*. 13: 161-175.
- Mayne, J. (2001). Addressing attribution through contribution analysis: using performance measures sensibly. *Canadian Journal of Program Evaluation*, 16(1), 1-24.
- Raingruber, B. (2013). Contemporary health promotion in nursing practice. Accessed on February 4, 2017. Available from: [http://samples.jbpub.com/9781449697211/28123\\_CH03\\_Pass2.pdf](http://samples.jbpub.com/9781449697211/28123_CH03_Pass2.pdf)



**Appendix A: Draft Logic Model for Youth Ambassador Program**

INPUTS	TARGET GROUP	ACTIVITIES	OUTPUTS	OUTCOMES		
				SHORT-TERM	INTERMEDIATE	LONG-TERM
<p>Program staff (i.e., managers, mentors, Youth in Residence)</p> <p>Community Partners (i.e., BC Mental Health, Substance Use Services, KMHRC Youth in Residence)</p> <p>Funding</p> <p>Online &amp; Physical Resources</p> <p>BC Children's Hospital infrastructure</p>	<p>Youth aged 17-25 participating in YAP</p>	<p><b>Info &amp; Resources:</b></p> <ul style="list-style-type: none"> <li>•Online and physical resources are provided to youth and families (e.g. brochures, handouts)</li> </ul> <p><b>Events/ Activities:</b></p> <ul style="list-style-type: none"> <li>•Development of mental health promotion projects</li> <li>•Focus groups for feedback</li> <li>•Youth write blog posts on KMHRC website</li> <li>•Speaking events to coordinate and promote KMHRC events</li> <li>•Youth-led activities</li> </ul> <p><b>Promotion/Marketing:</b></p> <ul style="list-style-type: none"> <li>•Promoting KMHRC &amp; partner organization events/resources in community (both physical &amp; online communities)</li> </ul> <p><b>Coordination:</b></p> <ul style="list-style-type: none"> <li>•Planning, developing &amp; delivering mental health promotion project</li> <li>•Providing feedback to program coordinators</li> </ul>	<p># of brochures/handouts/DVDS/toolkits provided</p> <p># of website visits</p> <p># of social media account followers</p> <p># of individuals accessing resources</p> <p># of promotion projects</p> <p># of focus groups conducted</p> <p># of blog posts written</p> <p># of speaking events conducted</p> <p># of youth-led activities</p> <p># of Tweets</p> <p># of Facebook likes</p> <p># of webpage views</p> <p># of brochures/information pamphlets printed (circulation)</p> <p># of promotional events organized</p> <p># of feedback discussions</p>	<ul style="list-style-type: none"> <li>•Awareness of online &amp; physical resources</li> <li>•Reach of YAP events/activities</li> <li>•Uptake of YAP events/activities among youth</li> <li>•Confidence in ability to speak publicly/coordinate &amp; promote events/ share ideas</li> <li>•Opportunities to share ideas and knowledge</li> <li>•Reach of YAP's events/activities (geographic, social)</li> <li>•Reach of YAP's mental health promotion project</li> </ul>	<ul style="list-style-type: none"> <li>•Knowledge involving mental health resources</li> <li>•Sense of community among youth</li> <li>•Ability to speak publicly/coordinate &amp; promote events/ share ideas</li> </ul>	<ul style="list-style-type: none"> <li>•Increased in mental health promotion projects formulated</li> <li>•Increased sense of support among youth</li> <li>•Empowerment of youth</li> <li>•Increased awareness of mental health among general public</li> </ul> <div style="border: 1px solid black; padding: 5px; margin-top: 10px;"> <p style="text-align: center;"><b>ULTIMATE OUTCOME</b></p> <p style="text-align: center;">↓ in stigma associated with mental health challenges ↑ Dialogue among youth and community around mental health</p> </div>

**Assumptions:**  
 (1) ↑ in the provision of online/physical resources will lead to ↑ awareness around resource availability; (2) An ↑ in the delivery of promotional initiatives will lead to ↑ in youth engagement.

**Risks:** Budgetary restraints may hinder the ability to deliver ambassador events, initiatives.  
**External Factors:** Geographic location of events may limit the ability of ambassadors residing elsewhere in B.C. to attend events.

## Appendix B: Evaluation Matrix for Kelty Mental Health Resource Centre's Youth Ambassador Program

Evaluation Questions	Indicators	Data Sources	Methods
<b>PROCESS</b>			
<b>1. What is the Youth Ambassador Program's uptake and reach?</b>			
1.1 What information is being accessed online? 1.2 How many people are accessing YAP's online content? 1.3 Who is accessing online content? 1.4 Where do online users come from? 1.5 What do online users do in the site? 1.6 Which key words resonate with online users? 1.7 Which pages retain online visitors the longest?	Navigation patterns Number of visitors Language settings on user's computer Geographic location of user (via IP address) Number of page views Number of pages per visit Time spent on pages	Website	Media analysis
1.8 What are users talking about in blogs and posts? 1.9 What are users writing about blogs and posts? 1.10 What content are users reacting to in social media?	Information pertaining to topics, hashtags and mentions Number of Tweets, Likes, Re-Tweets, Followers	Social media pages	Media analysis
1.11 What is the content of the information in the health promotion handouts?	Cross validation of information provided by program's resources	Handouts, DVDs, blog posts	Document review
<b>2. What influence are the program's activities having on youth ambassadors, people engaged through the youth ambassadors, and the mental health system?</b>			
2.1 What is the Youth Ambassadors' experience with the program? 2.2 What are the opinions of the people engaged in the program of the resources available? 2.3 How useful is the information that is provided to people engaged in the program?	Feedback from YAP to program coordinators Participant testimonials Number of mental health promotion projects organized Number of activities developed	Feedback forms Program records	Document review

2.4 What kind of activities are program users participating in?	Number of event invitations to partners Number of speeches at KMHRC events		
2.4 Are program users satisfied with the program activities? 2.5 Are program users aware of where to go for resources? 2.6 Are program users learning new skills in the areas of: leadership, planning, management, and social engagement?	Percentage of individuals reporting new skills learned and access to resources Satisfaction scores with the different activities Photos reflecting positive/negative experiences	App users	Evaluation mobile app: survey and photos
<b>CONTRIBUTION</b>			
<b>3. To what extent do the draft logic model and evaluation matrix reflect KMHRC's mission and definition of success?</b>			
3.1 Is our proposed logic model an accurate representation of the program? 3.2 Does the matrix reflect the program's evaluation priorities? 3.3 Do the various stakeholder have a similar understanding of the definition of program success?	Definitions of success Extent of agreement among stakeholders Achievement of consensus	Stakeholder opinions	Stakeholder Roundtable discussions
<b>4. To what extent does YAP contribute to KMHRC's long-term goal of reducing the stigma associated with mental illness?</b>			
4.1 To what extent do program activities contribute to decreased stigma regarding mental health issues? 4.2 To what extent do program users and the community feel supported in their mental health or personal wellness?	Refer to section 5.0	Triangulation of results from all methods proposed	Contribution analysis – All proposed methods (Section 4.0 & 5.0)