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Infusing Wellness Opportunities into Integrated Youth Services in Canada

Dr. Krista Glowacki (Canada), Ms. Jennifer Affolder (Canada), Ms.Brooke Macnab (Canada), Ms. Alayna Ewert (Canada), Mr. Matthew Wenger (Canada), Dr. Karen Tee (Canada), Dr. Skye Barbic (Canada)

Introduction

Amidst a global pandemic, it is vital now more than ever to intervene with appropriate health services and health promotion strategies for young people with mental health and substance use (MHSU) concerns. Physical activity has been recommended as an important strategy to reduce the increased MHSU challenges in young people brought on by the pandemic and as a valuable health promotion tool. In response to this and an internal identified need for programming, Foundry in British Columbia (BC), Canada, has integrated leisure and recreational activities (referred to as Wellness Programs) within its integrated youth services (IYS) for young people ages 12-24.

Objectives

The purpose of this study is to (1) describe how Wellness Programs were implemented into IYS in BC, Canada, and (2) provide an overview of what the Wellness Programs are and who has accessed them since program inception over a two-year period.

Approach/Methods

A multidisciplinary growing team has formed at Foundry Central Office, the leadership and standards team for Foundry, to support implementation and evaluation of Wellness Programs. A phased approach was used to implement programs across nine Foundry centres from August 2019-September 2021. Programs are tracked through Foundry's centralized data platform called "Toolbox," and the programs continue to grow and expand as new Foundry centres open.

Results

The programs are customized to each Foundry centre location, complement other health services offered, and aim to target wellness in five domains: physical, mental/emotional, social, spiritual, and cognitive/intellectual. Over the two-year period, a total of 384 different programs were offered and covered a range of different recreational activities. Examples include Bob Ross Paint Night, Book Club, Dungeons and Dragons, Hiking, Yoga, and Community Cooking. A total of 355 unique youth accessed programs. The majority identified as young girls/women (58.2%), with an additional 22.6% identifying as gender diverse and 19.2% as young men/boys. The average age of attendees was 19 years, with most users between the ages of 19-24 (43.6%) and range <12 to >24 years.

Conclusion

This study provides insight into the development and implementation of leisure and recreational activities for young people within IYS to complement traditional health services. This phased approach can be used to guide implementation of similar programs within international IYS to be used for health promotion and intervention. Our team has collected qualitative data (interviews and focus groups) for quality assurance and will be analyzing these data to better understand youth and program staff experiences and program impact.

