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Introduction

Purpose of intervention: To make youth in the most common age range for psychosis onset aware of the symptoms of psychosis, that it's a treatable brain disorder and how to get effective evidence-based help.

Rationale Summary

Youth turn first to one another for help and information, so reaching entire school is a priority. Early psychosis intervention promotion expected to help youth identify and seek help for psychosis in self or friends more quickly if the student body find information memorable and engage with it positively. Delivered by high status youth professional music/ comedy performers, one posessing a past history of psychosis, reduces negative attitudes toward youth experiencing psychosis (or mental illness in general). Earlier identification, referral and treatment expected.

Question / Goal:

We wanted to see if providing this message in the form of a high-value music and comedy presentation by youth performers would increase self-identification, cohort identification and school identification of youth requiring early psychosis intervention and result in earlier intervention for those youth.

The program delivers a core early psychosis intervention message to secondary school students, with a target range of grade 10-12 in a large (300+ audience members) concert, brain science and comedy performance with interactive activities and prize-driven mini-quizes to keep kids focussed on the message.

Presents key early psychosis intervention messages in a concert that engages youth using youth performers and presenters, including one who has experienced psychosis.

Key Elements of the Intervention

High quality of performance / youth role models: The performers are all youthful professional entertainers with busy careers who provide a very high quality performance. The tour brings it's own sound technician and equipment as well to ensure high sound quality. Performance is free to schools and is for school-wide assemblies only (300+ audience members) to encourage a whole-school approach.

Performer with experience of psychosis: One of the musicians has experienced psychosis as a teen (secondary to depression) and is now well. He speaks of his experience.

Script focusses on core messages: What is psychosis, science about causation (stress-vulnerability model). empathy toward those experiencing it, prevalence, how to get evidence-based help.

Core message:

- 3% lifetime prevalence
- Treatable brain condition
- Requires medical attention
- Recovery is expected

Prizes to reinforce involvement in discussion, exercises and mini-quizzes (and evaluation).

Teacher-school information and knowledge follow up **test** to improve teacher's knowledge and confidence about how to identify and refer youth with psychosis.

Evaluation: knowlege test for audience and teacher contact post-presentation.

Prevalence: Who can tell me the answer to this math question - if

Environmental factors and protective factors: Performers are

Stress - Vulnerability Model of Psychosis: Balls correspond to

full, resulting in psychosis.

genetic risk plus environmental stressors added until brain box is

removed for protective factors until they drop the balls.

tossed balls corresponding to environmental factors or have balls

this school, how many will likely experience psychosis?

psychosis affects 3% of the population and there are 1200 students in

Methods

When: 2004-2012. Where: British Columbia, Canada - in secondary schools (grade 8-12) throughout the province. Materials: one sound technician. Post-concert student knowledge questionnaire (rewarded for participation by prize draw), post-concert teacher/ counsellor knowledge questionnaire Prizes. Web, twitter and facebook

Who: High-school age youth. ~20,000 youth audience members per year since 2007-08. Their teachers and school counsellors.

presence.

Scripted presentation blends music and comedy performance and brain science.

Core messages are emphasized both

in the presentation and on background Core messages are quizzed in a prize

draw rewarded evaluation questionnaire at end of performance (hear the message see the message, write the message)

secondary schools in BC and is designe for a seated assembly audience of 300 or more. The show is about 1 hour long, Music is interspersed with learning about psychosis, which are delivered

Informational Content: Prevalence, Stress-Vulnerability model of psychosis, triggers and resiliency factors, personal experience by band member with past experience of psychosis, empathy exercise where students model the experience of experiencing hallucinations and trying to function, need for medical intervention in psychosis, how to access help if you or a friend seems to be experiencing a brain issue.

given resources on psychosis, and information on how to spot and stop this brain

Evaluation methods and limitations

1) Student Evaluation: Students receive a contest ballot with a knowledge test

Limitations: Due to confidentiality constraints and multiple pathways to care, we are still looking for a way to track help-seeking behaviour more accurately, such as actual referrals from presented schools vs non-presented schools. We have to

Awards: Schizophrenia Society of Canada 2008 Programs / Initiatives of



"British Columbia Schizophrenia Society's ReachOut Psychosis is an integral partner, with the Fraser Early Psychosis Intervention Program's community education initiative for youth, to provide education on psychosis, decrease stigma and to increase help-seeking behavior. The ReachOut Tour has implemented the resources required to engage with this targeted age group, to deliver the knowledge in a way that youth best learn. The experiential, interactive and entertaining forum that the program delivers has proven to increase the knowledge and help-seeking of the audience group."

Karen Tee, Ph.d. R. Psych – Manager, Child Youth & Young Adult Mental Health and Addictions, Christina Krack, RPN, AEHHS(C) Clinical Nurse Educator, Fraser South EPI

in a fun and interactive way. One of the presenters experienced psychosis during high school and speaks about his experience. There are prize-driven mini quizzes throughout the show to include the audience in our show as much as

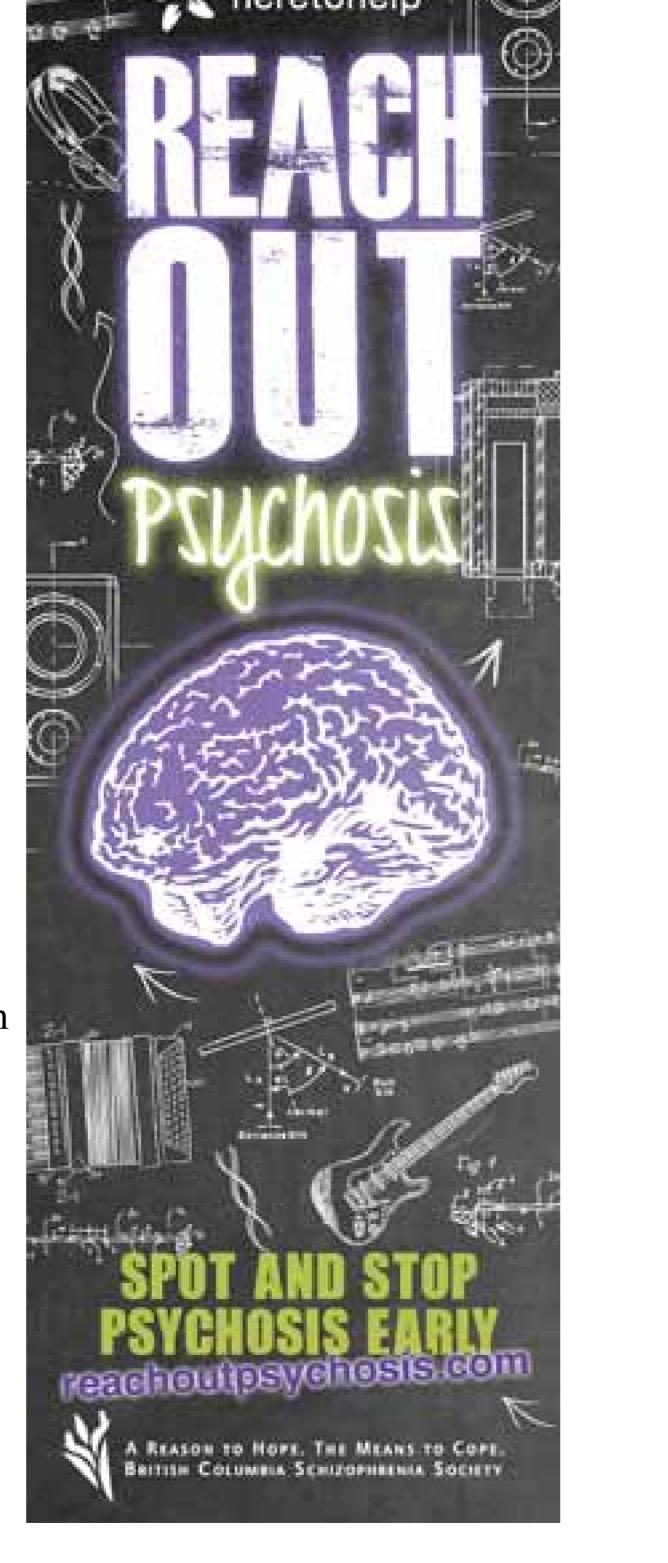
Information for Teachers: In addition to the school concert for youth, ReachOut also provides resources and information for teachers and parents. Teachers are

on it asking simple questions about prevalence, how to identify if a friend or self might be experiencing psychosis, and who to go to for help. 2) Teacher / Counsellor Evaluation: The school contact for the program fills out a quality assurance and knowledge evaluation, which asks about signs of psychosis and referral pathways.

3) Follow up school evaluation: In 2010, a second level of evaluation (by questionnaire) asked schools to report increases in help seeking or teacher competence in identifying and referring youth with mental health issues. 4) Performer evaluation: The performer coordinator compiles statistics on attendance at the performance, and counts responses to a pre-presentation question to audience of who has heard of psychosis before today.

rely on reports from teacher contacts and students.

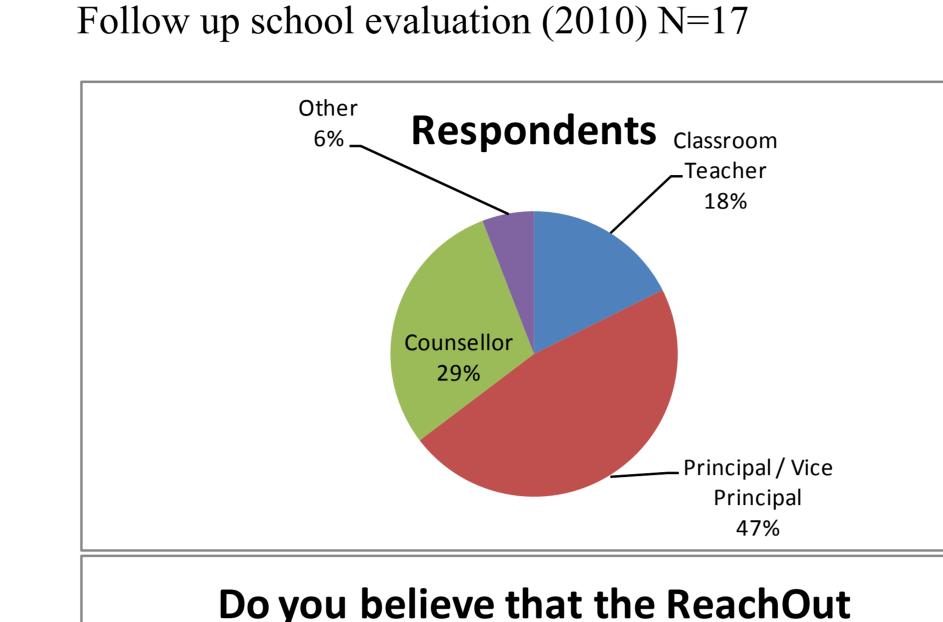
Excellence Award winner.

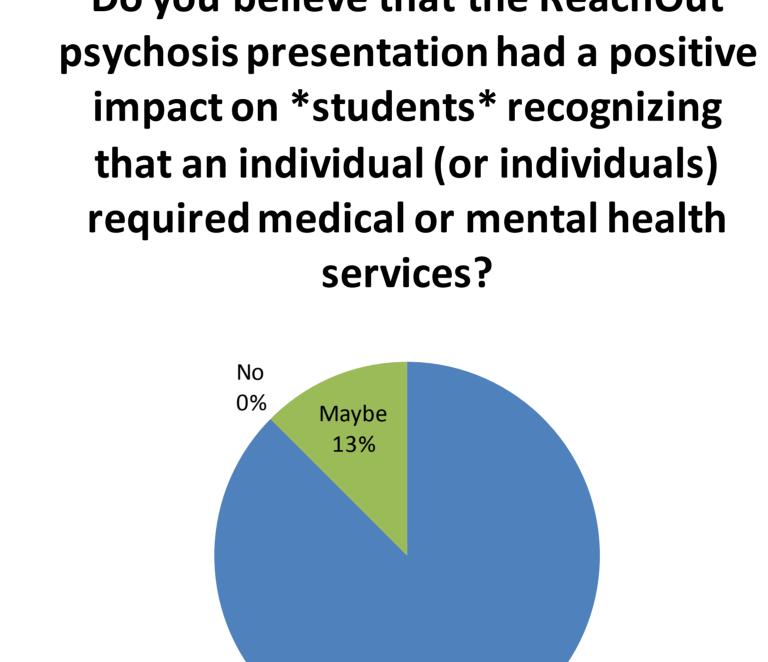


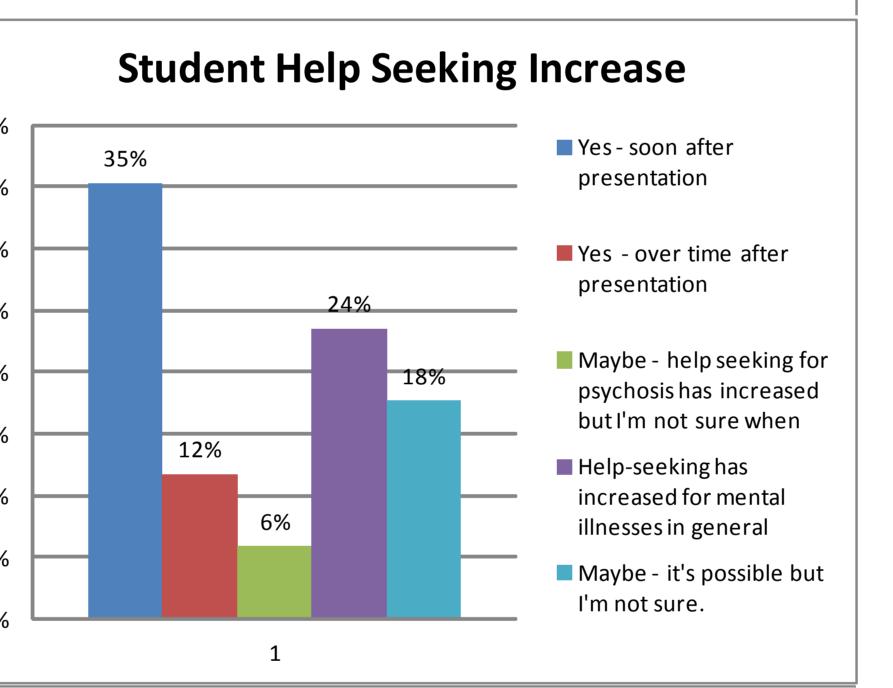
Results

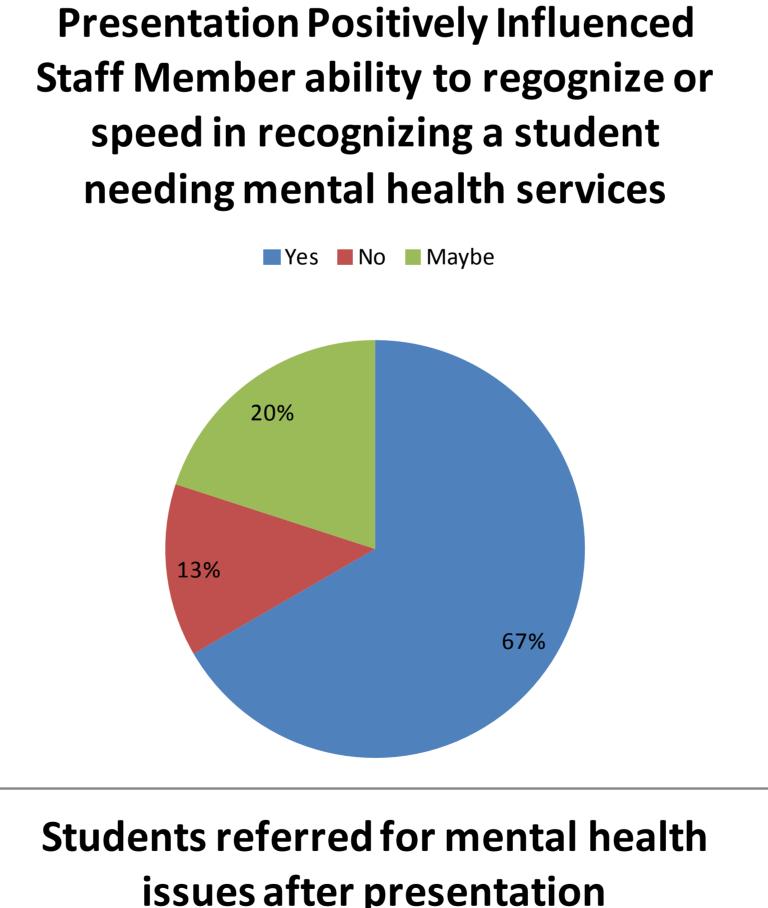
Secondary Evaluation: 6+ months post presentation follow up questionnaire

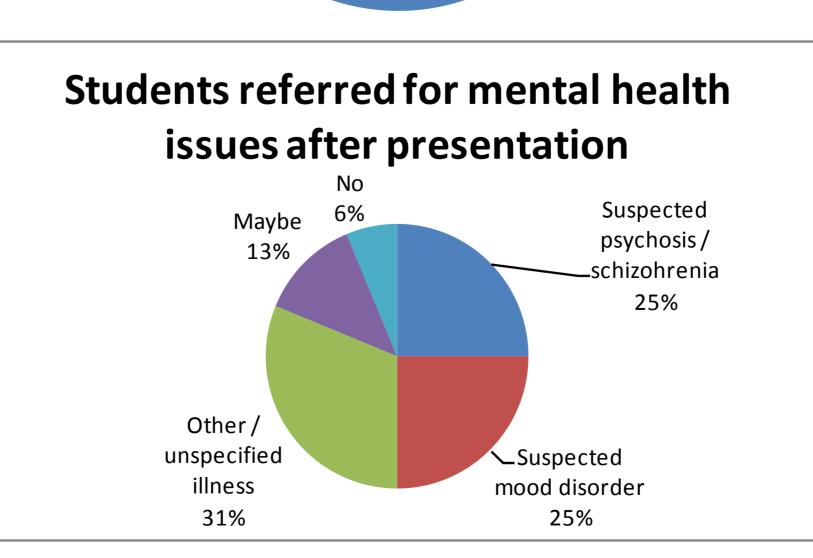
Early Psychosis Youth School Intervention - 'Edutainment'



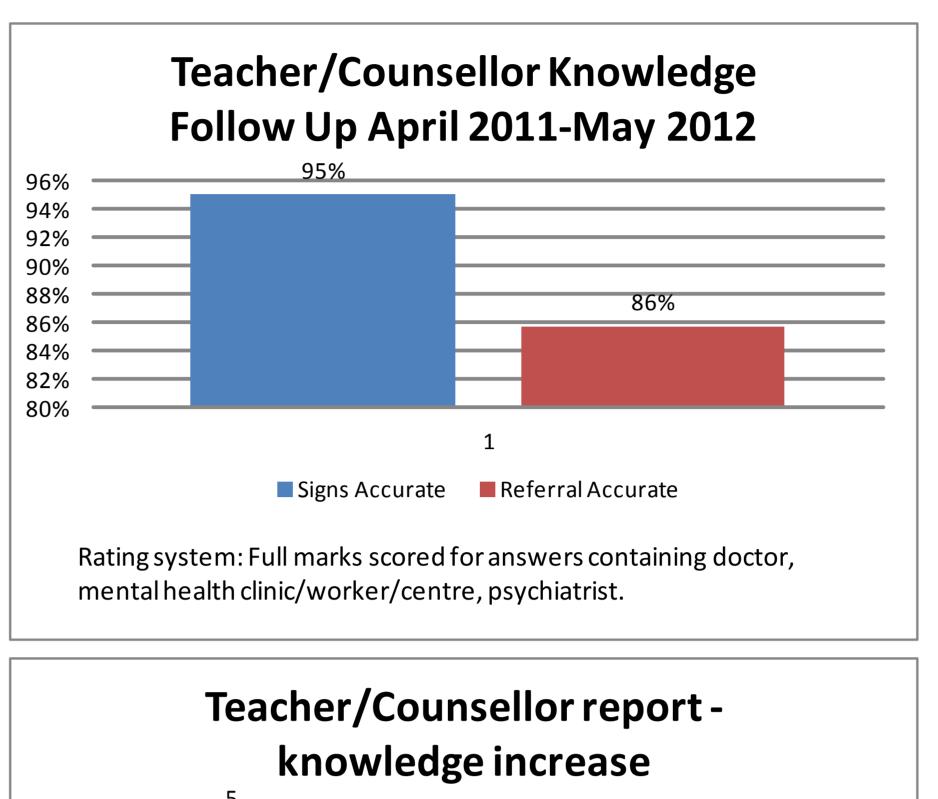




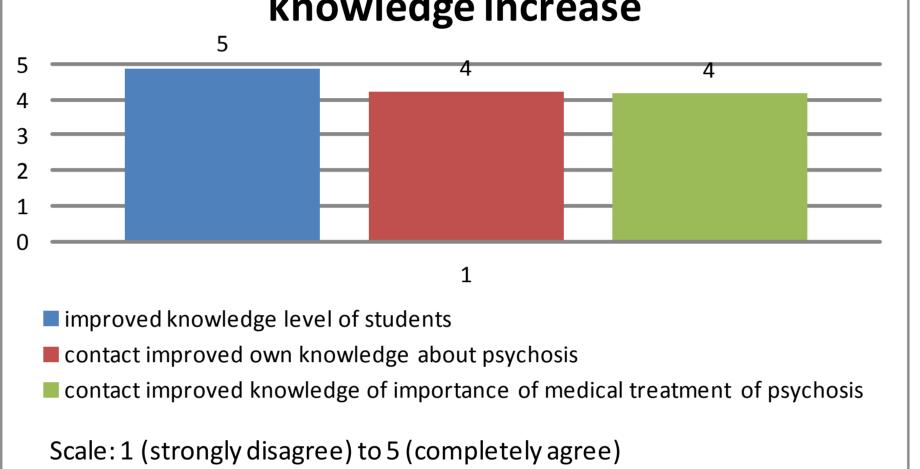




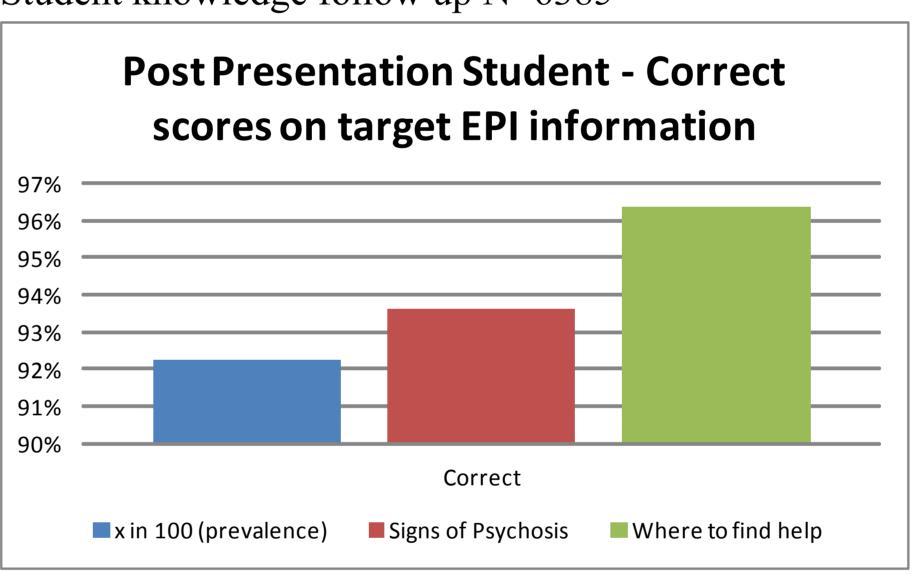
Immediately Post Show Evaluation: Teacher/Counsellor questionnaire Teacher Evaluation: N=180



Affilliations: British Columbia Schizophrenia Society, HereToHelp, British Columbia Provincial Health Authority

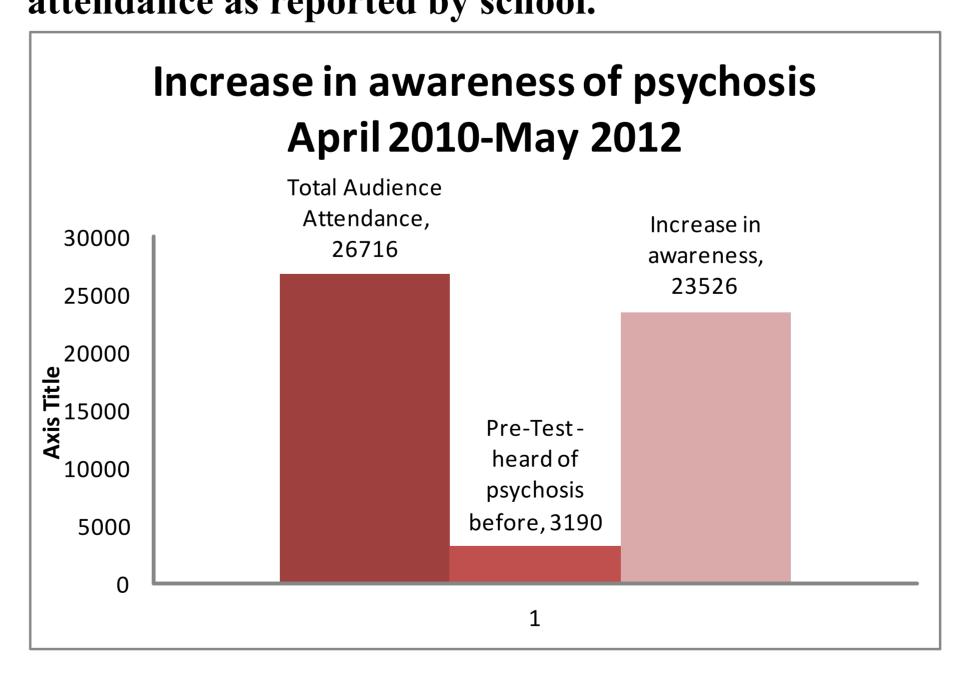


Secondary Student Post-Presentation Knowledge Test Student knowledge follow up N=6385



"I learned a lot and helped me better understand what to do if someone I know experiences it." - youth comment

Coordinator audience evaluation - pre-test of awareness of word psychosis compared to concert attendance as reported by school.



"They normalized mental illness and took away the stigma. It is more common than people think and they made that clear. With a member who experienced a mental illness in his teenage years, made it obvious this Wendy Johnston, Counsellor - John Oliver Secondary

Summary

Summary of Findings:

Raises Awareness:

The program raises awareness among 20,000 youth per year about psychosis as a brain condition that would benefit from early medical intervention. Only 3% of the audience had heard about psychosis at all prior to the presentation.

Increases / Speeds Up Self-Identification:

Anecdotal evidence to support increases and speed in youth self identification and appropriate school referral to early intervention. Large percentage of schools report help seeking and referrals increase following the presentation.



Improves confidence of teachers in making early intervention referrals for youth with psychosis. - anecdotal support. (see quotes

Why does it matter? Early intervention in psychosis is associated with improved outcomes.

Comparable research? We know of no other programs similar to this one or other school based EPI awareness programs. Perspectives for future research? Improving quality of data for school follow-up (effect) surveys. Identifying other avenues to track effect of program on clinical referrals.

Quotes from Secondary (follow up) School Evaluation:

We have had 2 students access mental health and counselling regarding possible mood disorders or psychosis - both thanks largely due to awareness from the presentation

Two students came forward following the presentation and asked for help with regards to their mental health. They said real person talking made them willing to talk to me.

Lots of positive talk from the students for the next several days—students will only linger on a subject if it touches them. They talked about this presentation for several days following.

We have had 2 students (and their families) successfully seek support for psychosis

A few students have spoken to me about their issues and / or wanted more information regarding their peers

Increased awareness helps staff look more critically as student behaviours and possible behaviour changes that seem "out of the

Greatly influenced our counsellors, and their confidence in suggesting that students receive mental health and medical treatment

Our counsellors have found more information, and staff are more supportive of students whom we suspect may have a mental illness

Comments re referral of students to mental health services after presentation

'I have a MA in the History of Psychiatric Care – prior to your visit I had to deal with several very very serious cases of Schizophrenia with no local support other than one MCFD worker and the RCMP. Your presentation has been of considerable assistance in raising awareness so it wasn't just me "diagnosing" cases on the go—families and students have been more willing to

"I also believe by presenting this topic in a public forum we are sending a message to students that in our school it is safe to come forward if you have concerns about yourself or a friend. We are helping to tear down the stigma associated with mental illness."

"Several students also spoke to the presenters after the 'show' about drug induced psychosis—I am hoping that their talk was also a deterrent re: drug experimentation."

"We have had 2 students seek support for suspected psychosis, and several for suspected mood disorders"

"The ReachOut program has been very valuable to our students. The most poignant example I can give you is this: we have had a student that has been on counsellors and administrator's radar for her behaviour. The past several years have been challenging for her, and her family.

After sitting in on your presentation, and working with school and social workers, this student recognized symptoms of psychosis in her self, and we were able to provide detailed feedback to her health care professionals to support her diagnosis. We knew what to look for, and what to identify. She is currently receiving counselling, and will be receiving medical care. This was only able to happen due to her increased awareness of her symptoms and challenges. I strongly support this program coming to our schools, and look forward to a long relationship with your organization!"

Comments about help seeking behaviour increases

"ReachOut has done two presentations to our school. After the first presentation one student spoke at length to [the MC/Performer], concerned about his active imagination. This was followed up with a visit to our health centre and some discussion with his family and managed to alleviate some fears that he had. Coupled with a Grade 9 Health program on mental illness, a Grade 9 student also came forward last year with concerns about thoughts that he was having—after discussion with our Health Centre and his parents this young man received treatment for OCD which had been plaguing him since childhood-he had been dealing with this in silence up until this presentation. He has now gained valuable tools to cope with this illness. This year, the second presentation, a student came forward to a teacher following the presentation concerned that he may be experiencing psychosis. This student, in fact, had presented behaviours and thoughts that were concerning to teachers throughout the year, yet he was unable to recognize that he had a problem. He was followed up with our Health Centre, who saw his coming forward and recognizing his thoughts as psychosis as a real breakthrough."

The ReachOut Psychosis tour is instrumental in promoting factual education about psychosis, decreasing stigma and increasing help seeking behaviours of our youth. The tour delivers the latest international research based information about psychosis, in youthspecific language and in a fun and interactive way. Its invaluable! Christina (Nina) Krack, RPN, Clinical Nurse Educator, Fraser Health Region Early Psychosis Intervention Program

