

BREAKING DOWN BARRIERS: BEST PRACTICES FOR DELIVERING SERVICES TO AT-RISK YOUTH DURING A PANDEMIC

Prepared by Tanner Neill | August 2020



Surrey Anti-Gang
Family Empowerment
Program

SUPPORTED BY:



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Executive Summary

The COVID-19 pandemic and the physical distancing measures enacted to prevent its spread have created potential barriers to service for programs which aim to serve vulnerable children and youth. The response to the pandemic has required each of the partner organizations under the Surrey Anti-Gang Family Empowerment (SAFE) Program to alter their approaches to meeting organizational objectives and find ways to protect vulnerable youth given these new operational constraints. This report conducts a review of academic literature, a media survey, and interviews with comparable service providers in other jurisdictions in order to identify and analyze best practices for tailoring programs which serve vulnerable children and youth to the emergency environment. It then takes stock of the current operational capacities of the SAFE Program, before offering recommendations with attention to effectiveness, equity, cost, and administrative burden.

Informed by the research on best practices, the recommendations put forward are: (1) Developing Rapid Implementation Plans; (2) Increasing Client Engagement; and (3) Providing or Reimbursing Necessary Technology. Furthermore, the report proposes additional considerations for the purpose of filling remaining gaps and ensuring effective service. These additional measures are: Increasing Social Media Presence; Promoting Self-Care for Professionals; Encouraging Collaboration and Flexibility Across Sectors; and Increasing Funding for the SAFE Program. It is clear from the research that the societal consequences of the response to COVID-19 will be borne disproportionately by children and youth, and especially those who are already vulnerable and at-risk of becoming involved in gang activity. As risk factors are exacerbated, the demand for the types of services offered by SAFE may continue to increase. It is imperative that SAFE is able to continue to meet this demand.

Introduction

The Surrey Anti-Gang Family Empowerment (SAFE) Program is an innovative, collaborative collection of programs designed to use early intervention strategies to help prevent youth gang violence. Funded by Public Safety Canada's Youth Gang Prevention Fund, programs delivered through SAFE aim to address push and pull factors related to involvement in gang activity, while also supporting parents and caregivers and delivering programs which provide cultural and gender specific support, increase community attachment, and build crucial life skills. At the heart of the program is the SAFE Centre, a collaborative space which allows partners to coordinate and deliver services. A key initiative is the Children and Youth At-Risk Table (CHART), which is a focal point for the delivery of SAFE programs and for collaboration between partners. Meeting weekly at the SAFE Centre, CHART allows partners to refer potential clients and tailor interventions to meet clients' specific needs using the full spectrum of services offered by CHART partner agencies.

The first case of community transmission of COVID-19 in British Columbia was confirmed on March 5, 2020; by March 17, a province-wide public health emergency had been declared. As the novel coronavirus is spread from person to person via droplets, physical distancing measures were enacted to slow the spread of the disease (Little, 2020). This forced the adjustment of services to remote delivery, and the SAFE Program was no different. As these measures necessitated the closure of the SAFE Centre, CHART meetings moved online. The City of Surrey's partner organizations responsible for public-facing SAFE Program delivery (Surrey School District, Simon Fraser University, DIVERSEcity Community Resources Society, Pacific Community Resources Society, Progressive Intercultural Community Services Society, Solid State Community Industries, Options Community Services Society, and the Royal Canadian Mounted Police) adapted their programs to these new constraints as well.

The COVID-19 pandemic can be seen as an opportunity to introduce innovative approaches to service that increase their effectiveness and make efficient use of available resources. As the implementation of Phase 4 in British Columbia's Response to COVID-19 is conditional on the global availability of a vaccine, service providers should be prepared for restrictions to continue for the foreseeable future.

Research Methods

A literature review was conducted to gain an understanding of the challenges in delivering services to at-risk youth in an emergency environment as well as examples of best practices to overcome these challenges. Academic literature and media sources were located using the Simon Fraser University library catalogue as well open source search engines.

Search terms were chosen to target four broad categories of programs and services in order to cover the spectrum of programs delivered by SAFE: drop-ins, youth hubs, and community centres; clinical counselling; parent, caregiver, and family support; and pro-social, educational, and life skills programs. The literature review was supplemented by three interviews with comparable service providers in other jurisdictions. Those interviewed included the manager of a walk-in youth centre which connects at-risk youth to necessary services; a school-based mental health provider; and a clinical counsellor from a multi-service, non-profit organization.

Internal SAFE documents were used to assess organizational responses to COVID-19. Statistics gathered internally over Year 2 of the SAFE program (April 1, 2019 – March 31, 2020) were used to assess organizational capacity prior to COVID-19 while CHART statistics from the first quarter of Year 3 (April 1, 2020 – June 30, 2020) were used to gain a cursory understanding of organizational capacity during the first full months of the pandemic.

I. Literature Review & Interviews

Drop-ins, Youth Hubs, Community Centres

In addition to potentially disrupting the delivery of social services and programs directed toward at-risk youth, the COVID-19 pandemic and the societal responses to it may also exacerbate the risk factors experienced by the targets of those programs. Physical distancing measures may lead to isolation from peers and support networks (Wong, Ming, Maslow, & Gifford, 2020), while economic stressors and family issues may be heightened due to these disruptions in people's lives (Gillis, 2020). The effects of these added risk factors may continue well after the pandemic, as the effects of stress, anxiety, and economic uncertainty persist (Fegert, Vitiello, Plener, & Clemens, 2020). Ecological systems theory and life course research demonstrate that youth lives are embedded in and shaped by historical events; thus, the developmental impact of the pandemic may be long-lasting (Ettekal & Agans, 2020). With regards to youth who are at risk of gang involvement or who are experiencing or exposed to violence, the mass closure of drop-in services, youth hubs, community centres, and the programs and activities associated with them is of particular concern. The pandemic gives organized crime the potential to fill gaps left by the absence of former programs and services. By taking the role of "community leaders", gangs can provide peer networks as well as financial and physical security (Pawelz, 2020). If youth lose access to safe and confidential programs which provide peer support, provide access to behavioural and other health services, and promote healthy relationships, the challenges faced by youth experiencing or exposed to violence may be heightened (Ragavan, Culyba, Muhammad, & Miller, 2020). With these issues in mind, responses to COVID-19 by youth service providers must be flexible and creative.

At the outset, maintaining connections with youth, whether through phone, email, or video platform, should be prioritized in order to share relevant information and confirm that services will continue to be offered. Services should then quickly be adapted to online service. In Toronto, city-funded

Zoom sessions were being offered twice a week, even as other local services were still transitioning their services online, in order to fill the gap, create an online community, and allow youth to engage with trusted adults and peers (Gillis, 2020). While it has been noted that youth without access to computers may be left out of some online programming, this presents an opportunity to either provide or reimburse clients for required technology. Food security has also been identified as a significant issue for at-risk youth and families during the pandemic, and centres like Toronto's Evergreen Centre for Street Youth have altered their food programs to provide takeaway and drop-off services (Gillis, 2020).

An interview with a walk-in based integrated youth service provider, which performs needs-based assessment upon intake and connects youth with counselling, health care services, education, and employment services, identified three successful strategies in adapting their service model to COVID-19: a full pivot to a helpline model; an increased social media presence; and a cell phone donation program. While not as effective as the walk-in model, the helpline model has allowed for continuity of service, while the increased social media presence – including gift package giveaways and advertisement – has been successful in increasing their audience, allowing them to gain traction with remote services and new online programming. A particularly innovative program has been the cell phone donation program, supported by donations from Bell, Rogers, and a local used phone donation drive, whereby phones were set up with SIM cards and phone plans, programmed with relevant contact numbers, and distributed through a network of youth service providers. Phone service and internet access have been identified as lifelines for at-risk youth, particularly for youth experiencing homelessness, and the distribution of cell phones to priority populations has been a priority.

Importantly, these adaptations and other approaches to service have been developed in partnership with a youth advisory council. Youth engagement may be a particularly important organizational tenet within the context of the coronavirus pandemic. While public health measures to prevent the spread of COVID-19 are necessary and result in short-term benefit, many of the lasting

effects – educational disruption, mental health issues, and effects on adolescent development – will be disproportionately felt by young people (Efuribe, Barre- Hemingway, Vaghefi, & Suleiman, 2020). Giving young people a voice and making them partners in programs and services of which they are the beneficiaries will help programs be more effective and create more buy-in from young people.

Best practices identified

- Maintaining connections with clients
- Quickly pivoting to remote service
- Providing or reimbursing for required technology
- Increasing social media presence
- Providing meal programs
- Utilizing youth engagement

Clinical Counselling

Research suggests that the mental health risks associated with measures to prevent the spread of COVID-19 will disproportionately affect children and adolescents who are already disadvantaged and marginalized (Fegert et al., 2020). In addition, stressors presented by the pandemic may create an increase in demand for counselling services. Because of this, it is imperative that continuity of care is ensured for those children and youth already receiving clinical counselling services, that services continue be available for new clients, and that crisis intervention is made available at all times (Fegert et al., 2020).

Interviews with two clinicians – one from a school-based youth mental health service provider and another from a multi-service non-profit organization – illustrate some successes in overcoming the barriers to service that have arisen due to COVID-19, as well as some of the shortcomings thus far. Keeping in mind that most clients for both professionals are under the age of 12, engagement over platforms which allow video and text communication has been found to be effective, as has the addition

of games, activities, and the sharing of the counsellor's screen to engage the client (e.g. having the client complete a maze by giving verbal direction). In many instances, parents have become more involved in services, resulting in better follow-up with strategies taught and more open communication with the household as a whole. Undoubtedly, for some clients who have shown anxiety or hesitance during in-person services have been more comfortable with remote services and have been able to express themselves more openly. Finally, there has been an emphasis on flexibility on the part of the counsellor in responding to the needs of clients, an example of this being the option for the client to send messages outside of working hours.

This emphasis on flexibility does have a clear trade-off, with staff fatigue being a common theme. This is amplified by the medium of remote service; over video platforms, it is hard for client and provider alike to gauge body language and, as some interventions do not translate well, there is more need for effort and creativity on the part of the service provider. Some clinicians saw more success than others due to caseload composition and other work demands. This strain is also felt on the part of the client, as the amount of added screen time causes attention spans to wane and sessions to be shortened. Importantly, no-shows and missed communication have become more common, as it is fairly easy to skip an online meeting or ignore an email, making follow-up and engagement more difficult in some cases.

With regards to providing effective virtual care, the recommendations put forward by Ragavan et al in their paper "Supporting Adolescents and Youth Adults Exposed to or Experiencing Violence During the COVID-19 Pandemic" touch upon many of these concerns. They recommend:

- Ensuring confidentiality and safety during telehealth and virtual visits
- Integrating strength-based discussions and resource provision
- Finding innovative, community-based solutions; the example given here is the designation of intervention specialists as essential personnel in Los Angeles

- Promoting self- and community-care for professionals through the development of self-care plans, group support sessions, and flexible work schedules

Studies have shown that online care is feasible and can be effective (Fegert et al., 2020). However, interviewees stressed that virtual services remain a “second-tier option.” In order to maximize effectiveness, clinical counselling services should integrate these best practices.

Best practices identified

- Ensuring continuity of care
- Providing or reimbursing for required technology
- Emphasizing flexibility on the part of the provider
- Promoting self-care for professionals

Parent, Caregiver, and Family Support

The disruptions in daily life caused by the COVID-19 pandemic and the impact of stay-at-home orders can increase parenting stress, subsequently affecting the relationships between caregivers and children (Chung, Lanier, & Ju, 2020). Preliminary studies have indicated elevated rates of anxiety and depression and an elevated risk for posttraumatic stress symptoms, confusion, and anger (Riegler et al., 2020) among adults under stay-at-home orders. Worsened children’s behaviour and mood leads to increased parental stress, which may lead to an increase in traumatic events (Duraku, Jahiu, & Geci, 2020).

Furthermore, the pandemic has highlighted inequalities in health, education, and economic opportunity through disproportionate harm to minorities and vulnerable populations (Endale, St. Jean, & Birman, 2020). This is true for mental health as well. Immigrant and refugee families in particular often prioritize economic survival and may be reluctant to seek mental health care (Endale et al., 2020). These realities must be considered in light of the COVID-19 pandemic and the societal responses to it, as economic insecurity may be exacerbated, resulting in less priority given to mental health care

services. It is important to mitigate the harm done by these inequalities when designing programs.

For all families, the efficacy of telehealth services for parenting skills intervention during the pandemic is supported by a pilot trial suggesting meaningful reductions in depression, parenting stress, and family dysfunction, as well as improvements in child behaviour with the use of remote counselling services (Riegler et al., 2020). By combining telehealth services and remote communication with the provision of financial and food assistance, the dissemination of relevant information, and collaboration and coordination with other service providers, service providers can maximize the effectiveness of programs which support families and caregivers.

Best practices identified

- Rapid identification and dissemination of accurate information
- Active outreach and regular check-ins
- Telehealth and online communication
- Providing financial and food assistance
- Collaboration and coordination with other service providers

Pro-social, Educational, Leadership/Mentorship, Life Skills

Youth out-of-school programs are one of the primary ways of promoting positive youth development, and the various pro-social, educational, leadership, and life skills activities that they offer produce positive externalities for society as well as the individuals they are targeted toward.

Maintaining these programs during the pandemic presents a host of challenges. Beyond the availability of technology required to administer remote services, many activities are not easily adaptable to physical distancing measures, as youth may lack the materials and space required to facilitate programs. It is important to identify skill-building activities which can be modified to remote delivery in order to maintain structure for participants.

With regards to leadership and mentorship initiatives, disruptions in youth-adult or mentor-

mentee relationships can be extremely detrimental (Ettekal & Agans, 2020). Again, consistency and proactively staying connected is important. The key to leadership activities is that they are directly relevant; therefore, it should be considered whether existing initiatives should be sustained or whether they should be pivoted toward new, pandemic-specific initiatives and leadership opportunities. This may provide an opportunity to engage new interests and skills among clients.

For skill-building activities, while there may be a tendency to be more lenient and relaxed while delivering activities remotely, it may be more beneficial to create environments of certainty and structure. This can be doubly important to combat “summer learning loss”, which may be exacerbated this year due to disruptions in the school year. While many skill-building activities are not directly transferrable to remote delivery, there is the opportunity to focus on new skills in the home. Virtual meetings are the “bread and butter” of these activities, as synchronous, real-time meetings offer the ability to stay connected and conduct the same activities together in “parallel play”, innovative examples being painting or baking (Ettekal & Agans, 2020).

Finally, the need for youth or client engagement is present here too. The pivoting of these programs to remote delivery presents an opportunity to engage families and youth by conducting needs-based assessments of clients. By identifying the needs and desires of youth, parents, and professionals, organizations can enhance existing programs and create new opportunities, especially ones which are conducive to a pandemic environment. Needs based assessments can be done online, utilize minimal resources, and can help sustain programs beyond the pandemic (Ettekal & Agans, 2020).

Best practices identified

- Adapt programs to realities of pandemic while remaining focused on organizational theory of change
- Prioritize staying connected
- Conduct needs-based assessments

II. SAFE Partner Responses to COVID-19 Pandemic

Surrey School District

Caregiver Education / Clinical Counselling

The Surrey School District provides educational sessions and clinical counselling for parents and caregivers of children and youth enrolled in school. Using workshops alongside individual and group counselling sessions with Registered Clinical Counsellors who work closely with School District staff, this program is aimed at assisting parents and caregivers in building healthy family relationships with children and youth who may be involved or at risk of becoming involved in gang activity. The program is delivered in various Surrey locations during and outside of school hours.

In the second half of Year 2, the Caregiver Education / Clinical Counselling program supported 45 parents and caregivers through CHART and in-house referrals – an increase of 32% from the first half – while delivering two 18-session workshops. With regards to CHART cases specifically, School District 36 has been the fourth most common lead agency for cases (16.2%), and the leading source for referrals (41.1%). The School District's role in providing referrals to CHART is an important aspect of its ability to continue to achieve its organizational mandate with regards to the SAFE program during the pandemic.

Peer Leadership Program

Surrey School District also administers the Peer Leadership Program, providing high school students with the opportunity to mentor and build life skills for middle years youth in target communities with defined vulnerabilities. The program is aimed at fostering a sense of identity and purpose, building positive life skills through a variety of recreational and creative activities. The program is delivered during and outside of school hours, out of various schools in the Whalley and Newton neighbourhoods.

For the second half of Year 2, the Peer Leadership Program served 404 youth, an increase of 59% over the first half. Peer leaders are referred by School District staff, and those selected are presented with a variety of skill-development training opportunities. Peer leaders then plan and deliver a variety of lesson

plans to younger students, aimed at fostering a strong sense of identity and purpose.

Adaptations

As a province-wide state of emergency was declared on March 18 and schools were closed indefinitely, regular contact was made over the phone with students and families in their respective programs. A grab-and-go food program was initiated, with both pick-up and delivery. On April 23, a parent group offered through Zoom was initiated collaboratively with Simon Fraser University. This group provides clinical counselling based on attachment theory, but with an added focus on addressing caregiver anxiety over conflict with youth in light of the COVID-19 pandemic and leaving the home. The Surrey School District was also involved in the implementation of a South Asian parent group which launched May 5 through the Microsoft Teams platform alongside co-facilitators Progressive Intercultural Community Services Society, Pacific Community Resources Society, and Options Community Services Society. The Peer Leadership Program in particular saw youth working together to advocate for the continuation of the program despite COVID-19.

The School District has been able to provide laptops and tablets to those without in order to access remote services. Most recently, outreach has been conducted with vulnerable students in the form of driveway chats and outdoor walks, while schools have phased in the return of in-classroom learning beginning June 1. The number of CHART cases for which School District 36 has been the lead has decreased from 2.2 per month for Year 2 to 1.67 per month through the first quarter of Year 3, beginning April 1, 2020. However, as CHART cases have decreased overall, this represents a greater percentage of total cases (14.6% before, 27.8% since).

Characteristics: Collaboration and flexibility across sectors; providing necessary technology; meal programs; client engagement

DIVERSEcity / Simon Fraser University

SAFE Community Clinical Counselling

The SAFE Community Clinical Counselling program is delivered in partnership by Simon Fraser University and DIVERSEcity Community Resources Society. Incorporating one-on-one as well as group and family counselling sessions, the Clinical Counselling program is targeted toward children, youth, and families in the Surrey area who are at risk of gang involvement, and includes risk assessment, case management, and consultation. The program has a focus on South Asian and Arabic immigrant and refugee families, with services offered in the appropriate languages and cultural context. Services are primarily delivered at DIVERSEcity's Community Resources Community Campus.

DIVERSEcity's clinical counsellors supported 31 new individual clients and 49 families in the second half of Year 2, up from 25 individuals in the first half. As DIVERSEcity ramped up their services, they developed a group counselling option for parents. Issues commonly presented in counselling included interpersonal conflict within the family, youth involvement in gangs and drugs, concurrent disorders, and cultural and societal barriers and stigma. DIVERSEcity has taken the lead on three total CHART referrals.

During the second half of Year 2, SFU provided clinical counselling to 19 youth clients as well as two high-risk CHART referrals. These clients were seen by SFU counsellors 2-4 times per month, with most engaged in long-term counselling. SFU's Counselling Supervisor has been engaged in networking with other community agencies in an effort to identify gaps and promote collaboration. SFU has been the lead partner in five total CHART cases, three in 2019 and two in 2020.

Adaptations

In the immediate wake of social distancing measures, DIVERSEcity initiated phone check-ins with existing clients, transitioning to online and telephone services, while suspending new client referrals. Other organizational needs prevented DIVERSEcity staff from being on SAFE initiatives full-time. SFU

implemented phone and video conferencing with clients in order to provide clinical counselling services remotely, experiencing an influx of referrals partially due to reduced capacity at DIVERSEcity. Clients continued to be seen every second week unless services became more urgent. SFU worked alongside Surrey School District in developing and implementing the parent counselling group through Zoom, beginning April 23.

Characteristics: Collaboration and flexibility; client outreach; provision of relevant information

Pacific Community Resources Society (PCRS)

Female Youth Gang Intervention

Delivered by Pacific Community Resources Society, the Female Youth Gang Intervention Program provides intensive, individualized trauma and relationship-based support for young women and girls aged 12-19 who are in unhealthy relationships, exhibit negative behaviours, or are at risk of becoming involved in gang activity. Participants are engaged through one-on-one client sessions, and drop-in nights are available at the Pacific Community Resources Society's Central City Youth Hub, where young women and girls are able to access clean clothes, dinner, toiletries, haircuts, and sexual health appointments. The program further engages clients through activities and educational workshops. The second half of Year 2 saw the Female Youth Gang Intervention program take the lead on 24 CHART cases, a total of 34 for the entire year.

South Asian Family Strengthening Team

Delivered in partnership between Pacific Community Resources Society and Options Community Services Society, the South Asian Family Strengthening Team is a culturally supportive, family-oriented outreach-based program delivered to parents, caregivers, and families of youth identified as at-risk for gang involvement or currently affiliated with gangs, with a focus on immigrant and refugee families. Individual plans are developed for participants and delivered in the home, with referrals to other agencies as needed.

The Pacific Community Resources Society was the second most common lead agency for clients referred by CHART during Year 2 (32 cases, 17.8%), and the source of the fourth most referrals (15 cases, 7.6%). The leading risk factors for individuals referred to PCRS are Parenting/Supervision, Involvement in Gang Lifestyles, and Family/Peer Relationships. PCRS was the lead on 2.75 CHART cases per month for Year 2; this has dropped to 0.33 per month, or 5% of total CHART cases, through the first quarter of Year 3.

Adaptations

The Pacific Community Resources Society's youth centre closed in March due to physical distancing measures, while outreach programs were put on hold until March 30 and staff were re-deployed to other programs. Clients were engaged with online activities and the sharing of relevant resources. The Female Youth Gang Intervention program coordinated food hampers offering approximately 5,000 free meals to needy clients over the summer months. By the end of May, one-on-one outreach resumed while practicing social distancing. PCRS' South Asian Family Strengthening Team representative delivered the Club Utopia virtual parents group as well as co-facilitated the virtual South Asian parents group alongside Surrey School District, PICS, and Options.

Characteristics: Client engagement and sharing of resources; meal program; collaboration across sectors; one-on-one outreach

Options Community Services Society (OCS)

High Risk Youth Justice Program

The High Risk Youth Justice Program provides educational support, workshops, and one-on-one mentorship to youth on probation or who are required to delivery community service hours, bringing together community service agencies, probation services, and other agencies to deliver life skills training and support. Delivered in and out of school time at multiple locations, the program also provides referrals to other programs and services. During the second half of Year 2, the program

supported 120 youths compared to 84 during the first half, while Options was the most common lead agency for CHART cases (31.8%) and the third highest source of CHART referrals for Year 2.

South Asian Family Strengthening Team

Delivered in partnership between Options Community Services Society and Pacific Community Resources Society, the South Asian Family Strengthening Team is a culturally supportive, family-oriented outreach-based program delivered to parents, caregivers, and families of youth identified as at-risk for gang involvement or currently affiliated with gangs, with a focus on immigrant and refugee families. Individual plans are developed for participants and delivered in the home, with referrals to other agencies as needed.

Adaptations

Options Community Services Society suspended in-person services in light of social distancing measures, monitoring risk remotely and contacting clients through phone and email. The Services to Access Recreation and Resources (STARR) program, a group-based out-of-school program aimed at facilitating recreational and leadership activities, quickly pivoted to running online workshops through Zoom, soon followed by the Mind Over Emotion and LifeSkills programs. These programs have continued to function over the course of the pandemic, and more recently curbside visits with clients have resumed. Options has also provided gift cards and supplies to families in need, and partnered with School District 36, PCRS, and PICS in delivering the remote South Asian parent group. While CHART cases for which Options is the lead decreased from 4.75 per month during Year 2 to 2.3 per month since April 1, this actually accounts for a greater share of overall cases than it previously had (31.8% vs 38.9%).

Characteristics: Rapid pivot to remote service delivery; financial assistance; collaboration across sectors

Progressive Intercultural Community Services Society (PICS)

Intercultural Family Intervention Program

Delivered by the Progressive Intercultural Community Services Society, the Intercultural Family

Intervention Program provides outreach services to the homes of families with at-risk youth, including in-home and after-hours counselling, applying culturally sensitive and language-specific services. Outreach workers meet with families and undertake a needs assessment, with referrals to existing programs and services. The program assists youth clients in transition to adulthood through counselling, one-on-one support, life skills training, and after-hours accessibility and support. The program supported 22 clients during the first half of Year 2, which increased to 26 clients over the second half, while taking the lead on four CHART cases and supporting 20.

Adaptations

As provincial physical distancing measures went into effect, the Progressive Intercultural Community Services Society contacted all current cases to communicate that in-person contact would be suspended. Clients were engaged through phone and video calls, with employees having flexible hours based on client needs. Families were assisted with the provision of groceries and toiletries, while seniors were supported by volunteer check-ins and grocery and medication drop-offs. PICS was involved in the remote South Asian parent group alongside Surrey School District, Options Community Services Society, and Pacific Community Resources Society. The Youth Employment program was offered online, which allowed for an uncapped number of attendees, and outreach in the form of curbside visits was made available.

Characteristics: Client engagement; provider flexibility; provision of supplies; collaboration across sectors; increased number of attendees for some existing programs

Solid State Community Industries

Youth Hub for Co-operative Enterprise

The Youth Hub for Co-operative Enterprise is an innovative program that supports youth from immigrant or refugee families in starting their own worker-owned, democratically run co-operative

enterprises. Enhancements to the program have enabled it to include youth with higher risk, including those currently engaged with police or correctional systems, while developing a mentor network where new mentors support the development of additional cohorts. The program is located at the Newton Youth Resource Centre. The Youth Hub served 72 youth in the second half of Year 2, up 22% compared with the first half. The program was able to increase the number of cohorts from three to six over the course of Year 2, while supporting three CHART cases. Six cohorts remained in operation at the end of the period, with new mentors supporting the development of additional cohorts.

Adaptations

Solid State staff initially met with each individual co-operative over Zoom and distributed laptops to those without access with support from Surrey School District. In addition to regular check-ins, families were supported with grocery gift cards and translation services, and Solid State has hosted a number of online events. Seven cohorts are now currently running, and meetings have resumed outdoors.

Characteristics: Remote outreach; providing necessary technology; provision of resources and services

Royal Canadian Mounted Police (RCMP)

Family & Youth Resource Support Team

The Family and Youth Resource Support Team (FYRST) is a program which makes interventions with youth who show early signs of criminal and gang involvement. The program encourages youth attachment to their community by identifying recreational opportunities and building connections. Teams composed of a police officer and an outreach worker can visit children and parents at home, school or the community to perform an assessment of client needs. Family outreach and parental support is another key aspect of FYRST, with the RCMP Parent Helpline giving regular access to resources, police information, and intervention services for Surrey parents and caregivers.

RCMP FYRST made 57 home and in-school visits during the first half of Year 2, supporting 39 youths; this increased to 143 home visits, 101 in-school visits, and 22 off-site visits in support for 50 youths over the second half of Year 2, which largely corresponds with the school year. The RCMP has been the fourth most common lead agency on CHART cases (7.8%) and plays an important role in referrals to CHART, being the source of 26.2% of cases.

Adaptations

The Family and Youth Resource Support Team began supporting youth and families with outreach via phone and email as counsellors worked from home in light of physical distancing measures. This model of outreach from home has remained the primary method of service. A resource manual was prepared to outline services available for clients. An increase in use of the RCMP Parent Helpline has also been observed.

Characteristics: Remote outreach; resource manual; increase in use of Parent Helpline

III. Recommendations

Develop Rapid Implementation Plans

As indicated in the literature, continuity of care and the maintenance of connections with clients are crucial for mitigating the negative effects of the pandemic. This is true of services across the spectrum of the SAFE program, from the ever-present need for crisis intervention in clinical counselling programs to the necessity of preventing disruptions to the peer and support networks provided by other services. These would vary by organization, but common characteristics would be: an identification of which services can be delivered remotely; a workflow to outline the process of transitioning to remote service with clear roles and responsibilities; making this plan available to clients in advance; and, in the event that there is a delay in service, have regular remote conferencing sessions available to fill this gap and allow client engagement. As each program under SAFE has expanded over Year 2, the demand for these programs is evidently growing, and this demand will persist or grow with societal measures designed to prevent the spread of COVID-19.

While not all programs are conducive to remote service, by implementing those that are with as little delay as possible, this option can help maximize their effectiveness. It should be noted that this option alone does not address equity concerns such as access to technology, having safe and confidential space, and level of comfort with remote service. In terms of cost and administrative burden, there is the need for some organizational effort; however, this is relatively minimal and may save resources in the event of a return to stricter physical distancing measures.

Increase Client Engagement

The disruption to service caused by COVID-19 presents an opportunity to use client engagement to tailor programs to clients' changing needs, both during the pandemic and in the future. For youth and adolescents in particular, many of the detrimental effects of the societal response to COVID-19 – from effects on mental health to disruptions to education and development – will affect them

disproportionately, and giving them more of a voice in programs and services of which they are the beneficiaries will help programs be more effective and create more buy-in. Depending on organizational need, this engagement can take three different forms with each successive option requiring more organizational resources: 1) a client satisfaction survey delivered online, gauging satisfaction with services provided thus far and recommendations for the future; 2) a more intensive needs-based assessment of each client; 3) or the development of youth councils, with whom all approaches to service would be developed in partnership, possibly with payment through honoraria to encourage participation. In addition to increasing the effectiveness of service, client engagement can be a way to address equity concerns by identifying which client needs are not being met.

Provide Necessary Technology for Those in Need

The availability of the technology required to access services remotely has been identified as a major barrier to service and the foremost obstacle to ensuring the service can be provided equitably. In addition to laptops required for remote conferencing, cell phone and internet service can be lifelines for at-risk youth. Soliciting donations from businesses and from the community at large – whether financially or in the form of used laptops and phones – can be low-cost ways of acquiring and distributing the necessary technology to those in need. Another option is to offer reimbursement to clients for purchases of required hardware or software. Attention should be paid to confidentiality in clearing all prior information from used phones or laptops, which can then be pre-programmed with relevant contacts or information.

Additional Considerations

- *Increase Social Media Presence*

The use of social media to advertise or to deliver new or adapted services has been effective in allowing these services to gain traction among current and prospective clients during the COVID-19 pandemic. In general, the sharing of relevant information regarding the pandemic and available services

is a noted need across the spectrum of clients served.

- *Promote Self-Care for Professionals*

There is an increased risk of employee stress or burnout as professionals creatively and flexibly adapt services to the emergency environment. Self-care for professionals should be emphasized under these conditions. This can take the form of the development of self-care plans or the implementation of flexible schedules. While much of the focus on the detrimental effects of COVID-19 has rightfully been on the recipients of programs and services, professionals are also experiencing major disruptions to their lives and should be supported.

- *Collaboration and Flexibility of Roles Across Sectors*

Importantly, many of the successes in overcoming barriers to service were found in collaboration between multiple partners. Whether through the development of new programs, the provision of necessary technology or emergency financial assistance, or the pivot to providing services not previously offered, a major strength of the SAFE Program is the collaboration between partners and this has been evident throughout the COVID-19 pandemic. This collaboration and flexibility should continue to be encouraged in order to fill identified gaps in service.

- *Increase Funding*

The data collected by the SAFE program over the course of Year 2 makes clear that each partner is expanding their services, and the number of clients supported is on the rise. The demand for these programs will not decrease due to COVID-19; if anything, the added stressors and disruptions to people's lives will create conditions which can increase demand for many of the programs offered by SAFE. In addition, the adaptations each program has made and will continue to make due to the COVID-19 pandemic have created added burdens on each partner. In order to continue to offer effective service under increased demand and to adequately accommodate the needs of clients under the pandemic, additional funding for the SAFE Program should be sought.

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