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## Using Youth Voice to Inform Programs and Services Promoting Newcomers' Healthy Development

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A thesis submitted in partial fulfillment of the requirements for the Doctor of Education degree in Education

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## Abstract

Effective programs to support the healthy development and well-being of youth who have immigrated to Canada are needed. This integrated-article dissertation accentuated the perspectives of refugee and immigrant youth to identify considerations for programming and strategies to promote their healthy development. The first paper (Chapter Two) utilized focus groups to explore newcomer youths' experiences relocating to a new country and advice for other youth who have recently arrived in Canada. We identified five overarching themes across groups through thematic analysis: (1) moving to a new county is hard, (2) maintain a healthy mindset, (3) take an active role in the adjustment process, (4) stay true to who you are, and (5) you are not alone. Findings captured the hardships of adapting to a new country while also demonstrating participants' resilience, coping skills, and strategies to lead meaningful lives.

The second paper (Chapter Three) utilized youth voice to identify considerations for developing programming to support newcomer youths' relationships and well-being. We applied group concept mapping and identified six concepts as follows, in rank order of importance: create a space for sharing; discuss relational issues; teach strategies for adjusting to a new country; teach skills for wellness; have feel-good activities; and plan for diversity. Participants' lived experience and their own attendance in programming at newcomer-serving organizations provided a basis for them to brainstorm what types of activities, topics and skills they believe would be helpful for other newcomer youth, as well as considerations for facilitators implementing such programming.

Finally, the third paper (Chapter Four) evaluated the acceptability of an evidence-informed healthy relationships program with newcomer youth at three newcomer-serving agencies. Using a mixed-methods case study approach, the perspectives of youth participants, program facilitators, and agency administrators suggested the program is promising in terms of fit and acceptability. Stakeholders also identified how facilitators can tailor content and activities to be more accessible and culturally meaningful for immigrants and refugees. Taken together,

the findings from these papers highlight the perspectives of newcomer youth and advance understanding of how to support their adjustment and healthy development.

## Keywords

Newcomer Youth; Healthy Development; Relationships; Youth Voice; Program Development

## Summary for Lay Audience

Effective programs to support the healthy development and well-being of youth who have immigrated to Canada are needed. This research focused on the perspectives of immigrant and refugee youth to identify considerations for programming and strategies to promote their healthy development. The first paper (Chapter Two) utilized focus group discussions to explore youths' experiences relocating to a new country and advice for other youth who have recently arrived in Canada. We analyzed data and identified five main themes: (1) moving to a new country is hard, (2) maintain a healthy mindset, (3) take an active role in the adjustment process, (4) stay true to who you are, (5) and you are not alone. These findings captured the challenges of living in a new country while demonstrating youths' resilience, coping skills, and strategies to lead meaningful lives.

The second paper (Chapter Three) used youth voice to identify considerations for developing programming to support immigrant and refugee youths' relationships and well-being. Using group concept mapping, we identified six concepts: create a space for sharing; discuss relational issues; teach strategies for adjusting to a new country; teach skills for wellness; have feel-good activities; and plan for diversity. Participants' lived experience and their own attendance in programming at newcomer-serving organizations provided a basis for them to brainstorm what types of activities, topics, and skills they believe would be helpful for other newcomer youth, as well as considerations for facilitators leading programs.

Finally, the third paper (Chapter Four) evaluated an evidence-informed healthy relationships promotion and violence prevention program to determine if it is appropriate and useful for immigrant and refugee youth at three newcomer-serving agencies. Using a mixed-methods case study approach, the perspectives of youth participants, program facilitators, and agency administrators suggested the program is appropriate and has benefits for youth.

Recommendations were also provided for how to adapt content and activities to be more accessible and culturally meaningful for youth. The findings from these papers advance our understanding of how to support immigrant and refugees' adjustment and healthy development.

## Co-Authorship Statement

Alexandra Smith completed the following integrated-article dissertation in collaboration with coauthors. In all three manuscripts, the primary intellectual contributions were made by the Alexandra Smith who conducted literature reviews, recruited participants, collected, and transcribed data, led the analysis of data, and wrote the manuscripts. Dr. Claire Crooks provided research supervision and contributed to the study designs, data analysis and preparation for publication. Dr. Linda Baker critically reviewed the manuscripts, provided editorial assistance, and reviewed the coding process for Study 1.

Study 1 was published in 2022 in *Child and Adolescent Social Work Journal* (open access publishing agreement). Study 2 was published in 2022 in *Child and Youth Care Forum* (open access publishing agreement). Finally, study 3 was under peer review at the time of this submission. Full citations can be found in the footnotes at the beginning of each chapter and are additionally listed in the first author's curriculum vitae at the end of this document.

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# Table of Contents

Abstract.....	ii
Summary for Lay Audience.....	iv
Co-Authorship Statement.....	v
Acknowledgments.....	vi
Table of Contents.....	vii
List of Tables.....	xi
List of Figures.....	xii
List of Appendices.....	xiii
Chapter 1.....	1
1 Introduction.....	1
1.1 Researcher Positionality.....	3
1.2 Migration and Stressors.....	4
1.3 Mental Health Among Newcomer Youth.....	7
1.4 Risk Behaviour Among Newcomer Youth.....	9
1.5 Prevention and Promotion Programs for Newcomer Youth.....	11
1.6 The Importance of Active Youth Participation in Research.....	14
1.7 Summary.....	15
1.8 References.....	16
Chapter 2.....	31
2 “You Have to be Resilient”: A Qualitative Study Exploring Advice Newcomer Youth Have for Other Newcomer Youth.....	31
2.1.1 Newcomer Youth and Risks.....	31
2.1.2 Newcomer Youth and Resilience.....	32
2.1.3 Present Study.....	33
2.2 Methods.....	34

2.2.1	Participants.....	34
2.2.2	Procedure .....	34
2.2.3	Data Analysis .....	36
2.3	Results.....	37
2.3.1	Moving to a New Country is Hard.....	38
2.3.2	Maintain a Healthy Mindset.....	39
2.3.3	Take an Active Role in the Adjustment Process.....	40
2.3.4	Stay True to Who You Are .....	41
2.3.5	You Are Not Alone .....	43
2.4	Discussion.....	45
2.4.1	Implications.....	46
2.4.2	Limitations .....	48
2.4.3	Conclusion .....	49
2.5	References.....	50
	Chapter 3.....	57
3	Youth-identified Considerations for Programming to Support Newcomers’ Healthy Development: A Group Concept Mapping Study .....	57
3.1	Introduction.....	57
3.1.1	The Gap in Promotion and Prevention Programming for Newcomers.....	58
3.1.2	The Role of Relationships in Healthy Development .....	59
3.1.3	Newcomer Youth Voice in Research.....	59
3.1.4	Theoretical Framework.....	60
3.1.5	The Present Study .....	61
3.2	Method .....	62
3.2.1	Participants.....	63
3.2.2	Procedure .....	64



3.2.3	Data Analyses .....	66
3.3	Results.....	67
3.3.1	Create a Space for Sharing.....	67
3.3.2	Discuss Relational Issues .....	67
3.3.3	Teach Strategies for Adapting to a New Country .....	68
3.3.4	Teach Wellness Skills .....	70
3.3.5	Have Feel-Good Activities .....	70
3.3.6	Plan for Diversity .....	70
3.4	Discussion.....	71
3.4.1	Limitations .....	73
3.4.2	Conclusions and Implications .....	74
3.5	References.....	76
Chapter 4	.....	85
4	Acceptability of a Healthy Relationships Program with Newcomer Youth: A Comparative Case Study with Three Newcomer-serving Agencies .....	85
4.1	Introduction.....	85
4.1.1	Growing Population of Young Newcomers in Canada.....	85
4.1.2	Implementation Gap.....	86
4.1.3	Overview of the Healthy Relationships Plus-Enhanced Program .....	87
4.1.4	The Rationale for Implementing HRP-Enhanced at Newcomer-serving Agencies.....	88
4.1.5	Present Research .....	89
4.1.6	Theoretical Framework.....	90
4.2	Methods.....	91
4.2.1	Selection of Recruitment of Study Sites and Participants .....	91
4.2.2	Study Design and Data Collection .....	92
4.2.3	Measures and Data Sources .....	93

4.2.4	Data Analyses .....	96
4.3	Results.....	97
4.3.1	Description of Agencies Recruited and Implementation .....	97
4.3.2	Acceptability of HRP-Enhanced at Newcomer-serving Agencies .....	101
4.4	Discussion.....	112
4.4.1	Authentically Engaging Newcomer Youth.....	113
4.4.2	Implications.....	113
4.4.3	Limitations .....	116
4.4.4	Conclusion .....	117
4.5	References.....	118
Chapter 5	.....	126
5	Conclusion .....	126
5.1	Research Findings and Contributions .....	126
5.2	Overall Findings and Themes .....	128
5.2.1	Stress Among Newcomer Youth .....	128
5.2.2	Youth Accessing and Benefiting from Support .....	129
5.3	Future Directions for Research and Implications for Practice.....	130
5.4	Limitations .....	133
5.5	Personal Reflections.....	134
5.6	Final Thoughts .....	135
5.7	References.....	136
6	Appendices.....	140
	Curriculum Vitae .....	171

## List of Tables

Table 1 - Summary of Major Issues Facing Immigrant Children and Youth (Ngo & Schleifer, 2005) .....	6
Table 2 - Factors Related to Migration that Affect Mental Health. (Kirmayer et al., 2011)...	8
Table 3 - Demographic Characteristics of Focus Group Participants.....	35
Table 4 - Focus Group Information .....	36
Table 5 - Participant Demographics .....	63
Table 6 – Statements in Each Cluster, Bridging Indices, and Importance Ratings .....	69
Table 7 - Youth Participant Demographics .....	93
Table 8 - Program Delivery and Data collected at each Site .....	98
Table 9 - Facilitator Implementation Experiences.....	99

## List of Figures

Figure 1 - Schematic Illustration of the Group Concept Mapping (GCM) Process .....	62
Figure 2 - Youth Concept Map Displaying Six Clusters of Ideas for Programming.....	68
Figure 3 - Sources and Timing of Data Collection.....	95
Figure 4 - Thematic Map of HRP-Enhanced Acceptability with Newcomer Youth.....	102

## List of Appendices

Appendix A: Western University Ethics Approval .....	140
Appendix B: Focus Group Guide .....	146
Appendix C: GCM Samples and Codes .....	148
Appendix D: Session Tracking Sample .....	150
Appendix E: Attendance Tracking.....	151
Appendix F: Implementation Survey .....	153
Appendix G: Facilitator Guide.....	169
Appendix H: Youth Focus Group Guide .....	170

# Chapter 1

## 1 Introduction

Canada has long been a country of migration, with the immigration system supporting both population and economic growth and welcoming displaced individuals from across the globe. In 2021, the country welcomed over 405,000 permanent residents- the largest number of Canadian immigrants in a single year in history (Immigration, Refugees, and Citizenship Canada, 2022). Landed immigrants and permanent residents account for approximately 22% of Canada's population, and currently, two in five young people have immigrant backgrounds (Statistics Canada, 2017). Based on population projections, immigrants will continue to constitute an increasing proportion of the population to meet the country's demographic and labour needs and may represent up to 30% of the population by the year 2036. The term newcomer will be used throughout this dissertation as an inclusive category that describes immigrants and refugees who have been resettled in a country for five years or less.

Many newcomers successfully integrate and lead meaningful lives in Canada. However, migration stressors and acculturative processes can affect an individuals' well-being. There are unique factors associated with migrating as a youth that warrant the need for research aimed at supporting these young people. This stage of life has been characterized by significant biological, cognitive, and social changes, along with risk-taking (Arnett, 1995), increased conflict with parents (Laursen et al., 1998), and heightened negative emotion relative to childhood and adulthood (Larson & Richards, 1994). Young people aged 15-24 are more likely to experience mental illness than any other age group (Pearson et al., 2013). In recent years, the mental health of young refugees who may be struggling with distress and trauma symptoms has been a topic of concern as nearly 100,000 refugees resettled in Canada between January 2015 and March 2018 (Canadian Council for Refugees, 2016; The Child and Youth Refugee Research Coalition, 2018). High rates of traumas have been reported among refugee populations, including the loss of a loved one (79%), witnessing physical violence (60%), and enduring physical violence (30%; Sirin & Rogers-Sirin, 2015). Additionally, documented psychopathology rates tend to be substantially higher among refugees in comparison to the general population (Durà-Vilà et al., 2012; Lustig et al., 2003; Miller & Rasmussen, 2017).

An important objective of Canadian society is to foster the well-being of newcomers (Mental Health Commission of Canada, 2012). Settlement agencies have been identified as significant sources of information and social support for individuals and families who have recently immigrated to Canada (Campana, 2019). Services at these newcomer-serving organizations may include assistance with immigration paperwork, employment support, orientations to the community and various systems, language lessons, counselling, social networking opportunities, and assistance obtaining referrals to other community services, albeit services are not uniformly offered across Canada (Chadwick & Collins, 2015). For youth specifically, services can include support integrating into the education system, after-school services to learn life skills (e.g., cooking, assistance with seeking employment, social skills development), extra-curricular programs (e.g., art and dance), and opportunities to connect with other youth in a relaxed space. Despite how important these services may be to supporting the well-being and adjustment of recent newcomers, it has been estimated that approximately only 40% of newcomer families turn to settlement agencies for support, and particularly to locations where services are provided in their own languages (Campana, 2019). Word-of-mouth has been cited as the primary method for learning about the services available at these locations (Chadwick & Collins, 2015). Challenges related to insufficient funding, staff shortages, limited mandates, and gaps in partnerships can also impact the quality of services offered at newcomer-serving organizations (Stewart et al., 2008).

There is a need to develop an evidence base for the design and implementation of effective supports for newcomer youth to meet their unique needs. In particular, the need for more appropriate prevention and promotion programs has been established in the context of mental health and healthy development (Anisef & Kilbride, 2000; Eruyar et al., 2017; McKenzie et al., 2010). Furthermore, the literature is lacking with respect to viewing youth as the experts of their own lives and understanding newcomer perspectives on what is helpful for them. As such, research that incorporates the voice of newcomer youth is also warranted.

The research that comprises this dissertation accentuated the perspectives of refugee and immigrant youth attending newcomer-serving agencies to identify considerations for programming and strategies to promote their well-being and healthy development. In the first research paper (Chapter Two), we utilized focus groups to explore newcomers' youths'

experiences relocating to a new country and advice for other youth who have recently arrived in Canada. In the second research paper (Chapter Three), we captured youth voice through group concept mapping to identify considerations for developing programming to support newcomer youths' relationships and well-being. Finally, in the third research paper (Chapter Four), we evaluated the acceptability of an evidence-informed healthy relationships program with newcomer youth at three newcomer-serving agencies. Taken together, the findings from these research papers capture newcomer youths' hardships and resilience, and advance understanding of how to support their adjustment and healthy development based on their own lived experiences and perceptions regarding what would be helpful for them.

## 1.1 Researcher Positionality

I am aware that I bring my own experiences and values to this research. I identify as a white, heterosexual, cisgender female and I have resided in Canada my whole life. I grew up in a middle-class home and lived in a small town with predominately white residents and very few first-generation immigrants. In fact, I have no recollection of any children who immigrated to Canada and transitioned to my school throughout my K-12 years. Although I travelled to other parts of Canada and different countries, and was briefly immersed in different cultures throughout my childhood, it was not until starting university and beginning my clinical training that I began to see how much diversity exists in my own country and consider how I was different from other people.

I knew early on in my university experience that my clinical and research interests would be geared towards children and youth as I am passionate about supporting their healthy development. My interest in research with young newcomers specifically stemmed from a course examining psychology of individual differences during my master's degree. During this time, I was required to select a topic from a list provided and write an "Individual Differences" case study. In the spirit of my first clinical professor who selected presentation topics for each student based on our perceptions of which topics we had the least knowledge on, I decided to write my paper on immigrating to Canada as a refugee to increase my understanding of this experience. Part of the assignment required me to create a case study demonstrating how the refugee experience affected an individual and their family on a day-to-day basis. While writing this paper, I started to consider the significant stressors faced by individuals who are forced out of



their home and required to flee to another country. I also felt concerned about the well-being of refugees resettled in Canada after reading about the lack of supports to address their integration (e.g., lack of transition support for young newcomers in schools and waitlists for adult language courses in community settings), particularly given the recent influx of Syrians. This experience ultimately led to a discussion with my potential PhD research supervisor (now current supervisor) about programming supporting newcomer youth, and the opportunity to assist with a feasibility pilot evaluation of a school-based resilience program for newcomer youth in Toronto, Ontario prior to beginning my doctoral degree. This experience (i.e., knowledge gained from the STRONG training and research conducted with facilitators who worked with newcomer children and youth) taught me that while newcomers are a vulnerable population and experience stressors throughout their migration, they also possess a great deal of strength and benefit from connections and safe spaces to share their experiences.

Given that I would be a cultural outsider and lacked shared experience, I thought it would be extremely important to hear from newcomer youth themselves, and those who serve these youth, utilizing qualitative methods with a youth-centered approach to gather rich, detailed data. My hope in this research was to develop a deeper understanding of the ways in which newcomer youth experience immigration with a particular focus on their natural resilience and unique needs, and leverage their perceptions to identify strategies and considerations for programming to promote well-being. In chapter five, I will discuss my personal reflections from this research and clinical learnings further.

In the following section, I provide a brief overview of migration and stressors faced by newcomers. Following this, factors related to newcomers' well-being and mental health will be considered, along with findings related to the developmental period of adolescence and risk behaviours among young newcomers. Finally, I address the need of prevention and promotion programming as well as the importance of incorporating youth voice in the development of services that target their needs.

## 1.2 Migration and Stressors

Migration is thought to be an inherently stressful, non-normative life event requiring significant adaptation (Laosa, 1996; Levitt et al., 2005). As such, newcomers are considered a vulnerable

population in relation to mental health and well-being (George et al., 2015). Resettlement can be particularly stressful when accompanied by language barriers, family separation, alienation and isolation, racism and discrimination, and pre-migration trauma (Ngo & Schleifer, 2005).

Individual factors such as developmental period of life and language proficiency, along with contextual factors such as migration circumstances (i.e., ranging from economic opportunity to fear of being persecuted in one's home country), can influence a newcomer's adjustment to a new country (Levitt et al., 2005).

Immigrants and refugees often have significant situational differences in their migration trajectories and experiences. Immigrants may relocate willingly and are typically well-prepared for their departure and settlement in a new location; whereas refugees are forced out of their country, often come with few personal belongings and no documentation, and have few financial resources upon arrival (Christmas & Christmas, 2017). Their livelihood has been interrupted, they may have left family behind, and many experience traumatic life events (e.g., war, violence, death of a loved one, and torture) that may result in post-traumatic stress symptoms (McCarthy & Marks, 2010). This does not mean, however, that immigrants do not experience trauma. Although immigrant and refugee migration trajectories tend to differ, post-arrival stresses can be experienced by all newcomers who have resettled in a new country where they must adapt to a new society, navigate a new culture and language, and reconstruct their social networks.

In recent years, many newcomers to Canada have fit into an ethnic minority category (Statistics Canada, 2017). Newcomers in this category have reported more difficulty integrating into Canadian society and experience forms of discrimination (Smart, 2019). There is widespread unemployment among immigrants with training from different countries, in part due to discrimination occurring based on visible minority status (Esses et al., 2007). Yssaad and Fields (2018) found that like their caregivers, newcomer youth also experience higher unemployment rates (13.2%) than Canadian-born peers (11.4%) and the national unemployment rates (5.7%). Other research suggests that both visible minorities who are newcomers and recently arrived newcomers are at higher risk for persistent low income and, therefore at risk for living in poverty and having difficulty meeting their basic needs (Morissette & Zhang, 2001).

Table 1 - Summary of Major Issues Facing Immigrant Children and Youth (Ngo & Schleifer, 2005)

INDIVIDUAL ISSUES	SOCIAL SERVICES	HEALTH	EDUCATION	JUSTICE
	Cultural adjustment Social support and belonging Cultural identity Sexual identity Gender roles Internalized racism Employment	Nutrition Communicable diseases Sexual and reproductive health Chronic health conditions Mental health problems Pre-migration and migration trauma	Unfamiliarity with schooling in Canada Appropriate assessments ESL instruction Support in content classrooms Support for students with special needs Support for heritage languages	Transitions Criminal gangs and violence Substance abuse Prostitution Issues in youth justice process
HOME ENVIRONMENT	Basic needs Employment Language and adult literacy Family literacy Social networks and support Incongruent rates of acculturation Family violence Civic participation			
SCHOOL COMMUNITY ENVIRONMENT	Access to systemic, culturally competent support Parental involvement Belonging and participation in school activities Interaction with peers and school staff Racism and discrimination			
COMMUNITY ENVIRONMENT	Belonging and community participation Racism and discrimination Socioeconomic conditions Negative influences			

Although many young newcomers demonstrate resilience, and successfully adapt and integrate into Canadian society, a substantial number of these young people will face significant challenges (Ngo & Schleifer, 2005). In fact, Levitt and colleagues (2005) found that children reported more immigration stress than their parents, with the exception of parents reporting higher stress related to monetary worries. Islam and colleagues (2014) also found that migrating to Canada at a younger age was associated with greater mental health issues. Moreover, higher levels of stress compromise migration-related adjustment. Table 1 presents issues and stressors that newcomer children and youth may face across different domains and environments after resettlement. As shown, individual stressors are complex and can be experienced in a wide range of domains including social services, health, education, and justice. These issues and stressors are also interconnected and can arise within home, school, and community environments

### 1.3 Mental Health Among Newcomer Youth

Research on mental health among recent newcomers settling in Canada is limited and findings vary (Robert & Gilkinson, 2012). Studies have identified fewer mental health concerns among immigrants and reports of being healthier than Canadian-born counterparts upon resettlement (Beiser et al., 2002; Hyman, 2007; Lou & Beaujot, 2005; Vang et al., 2015; Xu & McDonald, 2010). This advantage, known as the *healthy immigrant effect*, presumably exists due to the selection processes for admission into Canada favouring healthy individuals.

However, research has also found that although fewer mental health concerns are present among immigrants upon arrival to Canada, over time, their mental health tends to deteriorate and resemble that of native-born Canadians, also known as the *transitional effect* (Ali, 2002; Lou & Beaujot, 2005; Stafford et al., 2011; Xu & McDonald, 2010). Other scholars have suggested that mental health and emotional outcomes of newcomers are worse than that of the native-born populations and call this the *morbidity-mortality hypothesis* (Khanlou, 2010). Recognizing that heterogeneity exists both across and within newcomer sub-groups, therefore producing diverse outcomes related to adjustment, mental health, and well-being, is an important consideration for interpreting research with newcomer populations (Robert & Gilkinson, 2012).

Newcomers may experience trauma or political violence prior to resettling in Canada. Refugee populations in particular tend to report greater stress levels overall and higher rates of psychopathology compared to non-refugee immigrants, including post-traumatic stress disorder, depression, and anxiety (Canadian Council for Refugees, 2016; Robert & Gilkinson, 2012). During stages of migration, these young people are more likely to experience psychological distress and impairment from incidents including separation from family members, destruction of their homes, direct or witnessed violence and war, persecution, fear of death, loss or disappearance of a family member, witnessing the death of others, and loss of livelihood (Durà-Vilà et al., 2012; Elbedour et al., 2007). Furthermore, refugees may reside in over-crowded camps for long periods with uncertainty regarding migration (McKeary & Newbold, 2010), and limited access to clean water, food, appropriate health care, and education (Murray, 2016).

Table 2 presents specific risk factors related to migration that can negatively affect the mental health of young people based on a literature review by Kirmayer et al., (2011). As shown,

societal and cultural factors postmigration, including a young newcomer’s ability to learn a new language, adjust to different cultural and educational environments, and whether an individual faces discrimination, can influence their mental health (Porter, & Haslam, 2005). Other factors associated with experiencing poorer mental health in Canada include length of residence, age and year of arrival, visible minority status, having poorer physical health, and living in a metro area (Xu & McDonald, 2010).

Table 2 - Factors Related to Migration that Affect Mental Health. (Kirmayer et al., 2011)

<b>Premigration</b>	<b>Migration</b>	<b>Postmigration</b>
Age and developmental stage at migration	Separation from caregiver	Stresses related to family’s adaption
Disruption of education	Exposure to violence	Difficulties with education in new language
Separation from extended family and peer networks	Exposure to harsh living conditions (e.g., refugee camps)	Acculturation (e.g., ethnic and religious identity; sex role conflict; intergeneration conflict within families)
	Poor nutrition	Discrimination and social exclusion (at school or with peers)
	Uncertainty about future	

*Note:* The factors listed within the table were replicated from the reference provided and represent commonly cited factors rather than an exhaustive list of factors.

Like risk factors, protective factors occur at individual, family, and larger systems levels. A newcomer youth’s social supports, resiliency and acquired coping skills can influence the degree to which they will experience mental health concerns (Drury & Williams, 2012; Fazel et al., 2012; Thabet, & Vostanis, 2015). Protective factors at the individual level include strong individual traits (i.e., optimism, adaptability, and self-esteem) and coping strategies in emotion

regulation, problem-solving, and cognitive restructuring (Howell et al., 2015). Additionally, parental mental wellness, family integrity and support, the school environment, living in safe neighborhoods with a high ethnic density, and peer and community support promote resilience in young newcomers at the family and systems levels (Rossiter et al., 2015; Xu & McDonald, 2010). In the home environment, high levels of parent-adolescent conflict have been found to be associated with lower self-esteem and internalizing problems, whereas strong, supportive family relationships are associated with higher self-esteem, and can mediate the influence of perceived discrimination (Smokowski & Bacallao, 2007). Positive relationships outside of the home (i.e., school and community) are also critical for learning and youth development, including identity formation and healthy behaviour (Osher et al., 2020).

## 1.4 Risk Behaviour Among Newcomer Youth

Scholars highlight adolescence as being a critical period for behaviour development and formation of identity (e.g., Salehi, 2010). Adolescence is also a period of heightened risk-taking as individuals are engaging in risk behaviours more frequently than in any other stage of life (Institute of Medicine & National Research Council, 2011). Adolescent risk behaviour, such as substance misuse and abuse, risky sexual behaviour, violence in peer and dating relationships, delinquency, and bullying, can impede healthy adolescent development and put young people more at risk for experiencing adversity (Jessor, 2016). As such, prevention of risk behaviour during adolescence is an important public health issue.

A report on health-related behaviours among youth in Canada and Europe suggested that approximately one in four youth did not use protection or a contraception method when having sexual intercourse, more than one in three youth drank alcohol, and almost one in seven smoked cigarettes and cannabis in a 30-day period (Inchley et al. 2020). Additionally, this report revealed that approximately one in ten youth reported being bullied at least two to three times and cyberbullied at least once over the past couple of months, while 15% of boys and 5% of girls reported physically fighting three or more times in a 12-month period.

In comparison to Canadian-born youth, newcomer youth are typically less likely to use illegal substances, drink heavily, and smoke cigarettes (Ali et al., 2004; Georgiades et al., 2006; Ru & Li, 2021). Similarly, another study found that first-generation immigrant youth reported lower

levels of substance use than second- and third-generation immigrant youth (Hamilton et al., 2014). However, research demonstrates that newcomer youth are still engaging in risky behaviour at concerning rates. For instance, one study found that 35 % of newcomer youth residing in Canada used substances (Chien et al., 2002). Hamilton and colleagues (2014) showed that 13.9% of first-generation youth used cannabis and 9.8% drank alcohol regularly. Duration residing in Canada has also been shown to be associated with substance use; higher rates of substance use is found among youth who have been resettled for longer (Ali et al., 2004).

There are various subgroups of newcomer youth who are at elevated risk for negative outcomes. For instance, newcomer youth affected by trauma are at risk for having poorer school attendance and academic achievement, as well as academic failure (Paxton et al., 2011; Porche et al. 2011). Furthermore, this group of young people are at greater risk for difficulty with peer relations, emotion regulation, and conduct problems (Durà-Vilà et al., 2012). Similarly, youth who experience violence during their pre-migration journey and in their familial relationships may be at risk of violence later in life (Rossiter & Rossiter, 2009; Timshel et al., 2017). Poorer language skills have been linked to high school dropout among newcomers in Canada (Corak, 2001).

Although newcomer youth are not typically involved in the criminal justice system at higher rates than Canadian born peers, newcomers and particularly boys who become marginalized during integration into Canadian society, may be at risk for involvement in crime and are thought to be more vulnerable to recruitment by gangs (Rossiter & Rossiter, 2009). Risk factors for engaging in criminal behaviour include poverty, having experienced trauma, intergenerational and family conflict, limited English, discrimination, and social isolation (Ngo & Schleifer, 2005). Newcomer youth are also commonly victims of peer aggression and violence for reasons related to race, clothing worn, religion, and accents (Chien et al., 2002).

Considering the intersection of immigration and adolescence, newcomer youth face challenges related to resettlement and acculturation, in addition to typical developmental issues of adolescence and potential risk behaviour (Berger, 2008). Moreover, young newcomers who are experiencing concerning health behaviours or issues related to their well-being are unlikely to seek out assistance (Bushell & Shields, 2018). Barriers for newcomers to access care include stigma, language differences, lack of transportation, and limited contact with the system of care

after resettlement (Marshall et al., 2016). Additionally, barriers exist for professionals providing resources and supports to newcomer youth due to difficulty understanding their needs, where to refer them when their needs are complex, and lack of knowledge regarding what services are inclusive and accessible (Ngo & Schleifer, 2005). Addressing the well-being of young newcomers is key to our nation's future success and a public health priority. It is imperative that high-quality, effective services are accessible to young newcomers to facilitate successful integration into Canadian communities and promote healthy development.

## 1.5 Prevention and Promotion Programs for Newcomer Youth

There is limited evidence regarding the implementation, evaluation, and effectiveness of programming to support newcomers' unique needs (Eruiyar et al., 2017; Herati & Meyer, 2020). The Centre for Addiction and Mental Health (CAMH) has called for development of more appropriate programs for young newcomers, particularly refugee youth, in the context of mental health and well-being (McKenzie et al., 2010), and the Public Health Agency of Canada has recognized the gap in evidence-based programming for dating violence among youth that is culturally safe (i.e., safe for everyone; Public Health Agency of Canada, 2017). Scholars have also emphasized the lack of culturally responsive programming to combat diverse youths' risk-taking behaviour (Anisef & Kilbride, 2000; Clauss-Ehlers et al., 2013; Shields & Lujan, 2018).

The limited Canadian literature evaluating programs aimed at supporting young refugees' well-being has been primarily deficit-focused (i.e., preventing and treating mental health illness that resulted from pre- and peri-migration traumatic experiences), and although research on programming that targets daily stressors and psychosocial challenges post-migration is growing, there continues to be gaps in our understanding of the post-migration process and support (Herati & Meyer, 2020). We need to develop and evaluate culturally responsive programming that considers both pre-migration trauma and daily stressors post-migration such as school integration, language barriers, peer and family relationships and responsibilities, and discrimination, with an overall aim of promoting well-being and healthy development.

Tyrer and Fazel (2014) found only 21 studies evaluating programming for refugee children and youth with outcomes related to mental health, and psychosocial development and functioning. Furthermore, only one study in the review fulfilled the requirements for a high-quality research



design and methodology, while six partially fulfilled criteria. Similarly, in a systematic review of programming intended to enhance mental health and/or social-emotional functioning of refugee students, Sullivan and Simonson (2016) underscored the lack of appropriate norms used in studies with refugee populations and speculated concern regarding validity and usefulness of obtained scores. Furthermore, while these intervention research studies might include measures of youth functioning and distress, youths' perspectives and preferences for programming are rarely considered, as noted in a scoping review of mental health interventions for newcomers in the Canadian context (Herati & Meyer, 2020).

Programs to support the healthy development of youth are typically viewed at three levels of delivery or tiers. For example, in Ontario's tiered system of support for mental health and well-being in schools (Ontario Ministry of Education, 2013), programming at the Tier 1 level takes a whole school approach emphasizing mental health promotion and support for all students (i.e., universal mental health promotion). At the Tier 2 level, programming occurs in a preventative format and is intended for vulnerable students who are at risk and may require strengthening of protective factors, skills and strategies to reduce risk factors (i.e., targeted prevention). Lastly, Tier 3 programming takes a more intensive approach to providing individualized intervention and assessment, along with pathways to community care if necessary. With respect to recent newcomers arriving to Ontario, the provincial implementation support team (i.e., School Mental Health Ontario) specifically promotes a whole-school approach in welcoming young people and their families to school environments and into classroom settings (School Mental Health Ontario, 2016). This Tier 1 approach includes efforts by all school staff and students and highlights educators' role in noticing and supporting signs of adjustment difficulties (i.e., ensuring pathways to specialized supports if needed). Culturally relevant approaches are needed at all levels to supporting newcomers' well-being given the number of newcomers entering Canada.

While prevention has been a central focus for newcomer programming in the context of mental health, inclusion of promotion activities to increase resilience is also critical. Scholars have argued that synthesizing mental health promotion and prevention approaches is optimal for assisting healthy youth development (O'Connell et al., 2009). Programming that combines these approaches ideally prevent or reduce undesired behaviours hindering healthy development, while

also building youth competence and well-being to achieve developmental milestones, foster confidence, and to be able to cope with adversity.

Adapting existing evidence-based programming of this nature to be accessible and culturally meaningful is one option for supporting newcomers' healthy development that would be quicker and less expensive than developing programs (National Research Council and Institute of Medicine, 2001; Okamoto et al., 2014). For instance, the positive youth development approach, which has a focus on promoting the presence of youth strengths, positive attributes, and competencies, is becoming a prominent model to enhance youth's healthy development and well-being that has been supported in the literature (see for example, Moore; 2017; Shek, & Yu, 2012). Programming with this approach can target multiple outcomes and could be ideal for newcomer youth given that these young people can have substantially different risk and protective factors (Levitt et al., 2005; Suárez-Orozco et al., 2010). Consistent with the positive youth development approach, are universal social and emotional learning (SEL) programs. A meta-analysis of SEL programs found that addressing protective factors by improving social and emotional skills, positive attitudes, and prosocial behaviours has long-term benefits to assist the overall well-being of youth and reduce risk behaviours including drug use, unsafe sexual behaviour, and conduct problems (Taylor et al., 2017). Of note was the positive outcomes identified for young people of diverse backgrounds in this review.

Similarly, relationship-based approaches that incorporate positive youth development and SEL components, along with skill-building activities and interactive discussion, have been shown to promote mental health and reduce risky behaviours with diverse groups of youth and vulnerable populations (Kerry, 2019; Lapointe & Crooks, 2018; Wolfe et al., 2009). These approaches stem from research that demonstrates that risk behaviours (i.e., substance misuse, violence, and unhealthy sexual behaviour) often co-exist, have the same risk factors, and tend to be present in the context of dating and peer relationships (Crooks, 2017; Wolfe et al., 2006). Moreover, mental health has been found to overlay these issues (e.g., Butler et al., 2019). Comprehensive prevention and promotion programs in this context are relatively new, but the adaption of such programming for newcomers could be a suitable fit.

## 1.6 The Importance of Active Youth Participation in Research

As researchers seek to understand newcomer youths' post-migration experiences and develop and/or adapt programming to meet their needs, it is important that young people themselves be a part of the process. In addition to producing relevant findings and knowledge for understanding youth adjustment following immigration, active participation in research could promote empowerment and be used to inform appropriate efforts targeting their adjustment and well-being (Bergnehr & Zetterqvist Nelson, 2015). As such, the importance of youth voice both in research and policy making for promoting their healthy development has been acknowledged (National Academies of Sciences, Engineering, and Medicine, 2020; Sprague Martinez et al., 2018).

Youth use their voice daily to make many choices about their health, learning, and relationships. Yet, they are not commonly given the opportunity in research to act as the experts of their world and discuss the central issues in their lives (Liegghio et al., 2010). This is particularly the case for marginalized and vulnerable youth, such as immigrants and refugees (Kanu, 2008; Knap, 2018). Youth voice in this context is especially important given that it is typically individuals from western countries producing services for non-western populations. Active youth participation in research has been lacking due to the dominant professionally driven, positivistic, biopsychosocial perspectives of mental health (Liegghio et al., 2010).

Incorporating the voice of newcomer youth in research is more than hearing their views and opinions. Research has found that problems can be improved when studies include those whose lives are being impacted by the problems being studied (Reich et al., 2015). Similarly, although the literature is lacking with regards to young newcomers' perspectives on program and service preferences, scholars have suggested that program outcomes could be improved by including youth voice in efforts to develop and evaluate prevention programming (Edwards et al., 2016; Checkoway & Richards-Schuster, 2004; Waterman et al., 2020). Newcomer youths' knowledge could influence change and contribute to the development of accessible and culturally relevant documents and services (Bader et al., 2007; Marshall & Begoray, 2019).

In alignment with honoring youth voice, it would also be meaningful to engage those who interact with young newcomers, such as their families, staff at schools and agencies serving

newcomers, and members of faith-based organizations. Individuals in these latter, more formal settings are usually an initial point of contact for this group of young people, and often come to know youth well (Chuang et al., 2011). As such, they can offer insight into the experiences of young newcomers in their first years of living in Canada. In sum, a community-based research approach that recognizes the importance of developing partnerships with community stakeholders as co-producers of knowledge would be ideal (Tebes et al., 2014).

## 1.7 Summary

Despite the growing number of newcomer youth in Canada and the daily stressors that can affect their well-being, research remains sparse on programming and support to promote their healthy development. Furthermore, there is a lack of research devoted to newcomer youths' voices and experiences as the experts of their world. This dissertation contributes to the existing body of literature by exploring the following: (1) newcomer youths' experiences and advice for other newcomer youth who have recently arrived in Canada; (2) newcomer youths' considerations for developing programming to support their relationships and well-being; and (3) acceptability of an evidence-informed healthy relationships program with immigrant and refugee youth at three newcomer-serving agencies.

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## Chapter 2

### 2 “You Have to be Resilient”: A Qualitative Study Exploring Advice Newcomer Youth Have for Other Newcomer Youth<sup>1</sup>

Immigration accounts for approximately two-thirds of the population growth in Canada. (Statistics Canada, 2017a). While the economic class of immigrants (i.e., those who have specific occupational skills and experience to support the needs in Canada’s labour market), makes up the greatest proportion of newcomers admitted into the country each year, the Canadian government notably increased the number of refugees to be resettled into the country. An influx of nearly 100,000 refugees resettled in Canada between January 2015 and March 2018, many of whom were under the age of 18 (Child and Youth Refugee Research Coalition, 2018). Global trends reveal that we are presently experiencing one of the largest humanitarian crises in history as the number of forcibly displaced persons worldwide has grown substantially, reaching 70.8 million by the end of 2018 (United Nations High Commissioner for Refugees, 2018). As part of Canada’s humanitarian commitment to resettle those most at risk, the country had plans to welcome over 30,000 refugees in 2020 (IRCC, 2020).

#### 2.1.1 Newcomer Youth and Risks

Despite the increasing population of young newcomers in Canadian communities, there is a lack of understanding and support from residents and professionals working with these youth, particularly for refugee youth, as these young people can face significant challenges related to emotional, linguistic, academic, and social functioning (Guo et al., 2019). There are unique factors associated with migrating as a youth that warrant the need for research addressing how to support these young people and their healthy development in a timely manner. Refugee and immigrant youth are required to adapt to new environments, navigate new culture and language,

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and reconstruct their social networks while moving through important developmental stages, during which many biological, cognitive, and psychosocial changes occur that can coincide with resettlement stress and impede well-being (e.g., puberty, identity formation; Juang et al., 2018). It is during this period of life that approximately half of mental illnesses surface, and these can have lasting impacts throughout the life course (World Health Organization, 2019). Although the physical and mental health of various newcomer populations tends to be superior to the native-born population upon arrival, a phenomenon known as the healthy immigrant effect, this advantage diminishes, and health tends to deteriorate with time spent in Canada (Beiser et al., 2002; Vang et al., 2017; Xu & McDonald, 2010). Some research has shown that immigrant youth in Canada report higher rates of psychological distress than Canadian-born peers (Hamilton et al., 2009). Furthermore, rates of post-traumatic stress disorder, depression, and anxiety are elevated in refugee populations (Derluyn & Broekaert, 2007). As such, there has been an increasing focus on the well-being of newcomer students in Ontario schools to assist with the resettlement process (School Mental Health-Assist, 2016).

Within a multi-level framework, there is a dynamic interaction of factors (e.g., demographic, social, cultural, and psychological) that operate at multiple levels (i.e., individual, family, community, and macro) and impact youth outcomes (see Mawani, 2014). Common stressors for an individual and within the family unit post-migration include but are not limited to loss of close relationships, loss of lifestyle, uncertainty about immigration status, change in socioeconomic status, change in cultural norms, and proficiency in the host country's language (Pickren, 2014). Difficulty making friends and adjusting to the school setting are frequently reported stressors faced by young newcomers in Canada (Guo et al., 2019). Factors such as socio-linguistic barriers, racism, bullying, and isolation can hinder their ability to form important relationships in schools and communities (Hadfield et al., 2017). Negative media portrayal and hostilities related to anti-immigration rhetoric, similar to that in the United States, are an ongoing challenge in Canada, especially concerning Islamophobia (Woodley et al., 2018).

### 2.1.2 Newcomer Youth and Resilience

There is a paucity of research examining how recent newcomer youth adjust and cope in Canada as research and support has been predominately deficit-focused (Mawani, 2014). There is a need to explore strengths-based approaches focusing on natural resilience to help empower newcomer

youth as they respond to stressors. Newcomer youth possess profound strength and resilience factors that help them adjust to new environments.

Resilience is complex and varies across culture and context (Liebenberg & Theron, 2015; Ungar, 2008). In the literature on young refugees, individual characteristics (such as internal locus of control, cognitive skills, and emotion regulation) and coping strategies (such as problem-solving and sense of agency, future, hope, and growth) have been suggested as protective factors contributing to resilience outcomes (Betancourt & Khan, 2008; Este & Van Ngo, 2011). In addition, factors operating at different levels of a youths' social ecology, including attachment with caregivers, family stability and caregiver mental health, reduction of linguistic barriers, social support, acceptance, and sense of belonging in community and school environments can promote resilience (Betancourt & Khan, 2008; Este & Van Ngo, 2011). Although the impact of migration on identity is not well understood, maintenance of cultural identity (e.g., speaking native language in the home, religious practices and pragmatic strategies such as dress and diet) also appears to be an important resource for resilience (Pickren, 2014). Further investigation related to how newcomer youth navigate through the process of adjustment is necessary, particularly from the perspectives of youth themselves.

### 2.1.3 Present Study

The importance of youth voice in research and policy making has been acknowledged, though young people often still feel ignored or dismissed when sharing their views about issues central to their lives (James, 2007; Shamrova & Cummings, 2017). Young people have received less attention than adults as experts of their own worlds, especially concerning participant experiences in research (Liegghio et al., 2010). This is especially true for marginalized and vulnerable populations. To address this gap, the primary purpose of this exploratory paper was to shed light on refugee and immigrant youths' expressed perspectives on advice and coping strategies to overcome the challenges they face after relocating to a new country. Newcomer youths' lived experiences can provide a richer understanding of adjustment in the Canadian context and may promote action in relation to larger issues (i.e., social; system-level). Engaging the voices of newcomer youth to share their advice for other newcomers may also promote empowerment and be used to inform efforts targeting their adjustment and well-being that is more responsive and culturally appropriate (Bergnehr & Zetterqvist Nelson, 2015).

Focus groups were selected because they are well-suited to provide insight into participants' thoughts and feelings (Stewart & Shamdasani, 2014). Interaction among participants in a focus group can generate collective insight from shared experiences and difference of opinions regarding relevant topics in their lives (Smithson, 2000). Additionally, focus groups have the potential to promote empowerment among marginalized groups as a result of the collective experience (i.e., discussion around relevant life issues and experiences with others from similar social position in terms of knowledge, language, and framework), and can reduce power differentials between the researcher and participants, potentially creating a less threatening environment to share their views (Bagnoli & Clark, 2010).

## 2.2 Methods

### 2.2.1 Participants

Four focus groups were conducted with 37 newcomer youth in Ontario communities during fall 2019. A purposive sampling strategy was used to recruit youth who met the following criteria: aged 14 to 24 years; identified as a refugee or immigrant; could speak English well enough to engage in back-and forth-conversation; and attended programming at newcomer-serving organizations. Table 3 displays demographic characteristics of the participants. Youth ranged from 14-22 in age ( $M= 17.1$ ;  $SD= 1.7$ ). More youth identified as female (65%), entered Canada as refugees (65%), and had resided in the country for less than four years ( $M= 2.89$ ;  $SD= 1.9$ ). The largest proportion of youth came from countries in the Middle East (73%). The study was approved by our University's Research Ethics Board (see appendix A).

### 2.2.2 Procedure

Participants were recruited through staff with whom they were familiar from two newcomer-serving organizations located in two medium-sized cities in Ontario. Focus groups were conducted at these organizations. The purpose of the study and the conditions for participation were discussed with youth prior to focus groups. Parental consent and youth assent were obtained for youth under 16 years of age; youth 16 years and older signed their own consent forms. Youth were also informed about the importance of privacy and agreed to keep all information shared in the focus groups and the identity of other participants confidential. Once informed consent was obtained, participants filled out a short demographic questionnaire.

Prior to each focus group, an icebreaker activity was utilized to build rapport and allow youth to become acquainted with other youth, the moderator, and the note taker. It appeared that many youth knew each other, likely through the programs offered at the organizations. The icebreaker activity involved a series of low-risk statements during which youth were asked to respond by standing up if the statement applied to them (e.g., I am the youngest person in my family; I like to dance). After that, an audio recorder was turned on and a semi-structured interview guide was utilized to gather information from youths’ perspectives about challenges related to their well-being and relationships, advice for other newcomer youth who recently arrived in Canada, and programs, activities, events, and people that have been helpful in Canada (see appendix B). A primary question, “What advice would you give to someone your age who is moving to Canada,” provided rich data for the present study, though applicable responses to other questions were included in the analysis. Focus groups were conducted in English by the first author and a note taker was present. Discussion ranged from 30 to 55 minutes across groups. Table 4 provides information pertaining to group make-up. Participants were compensated with a \$20 gift card.

Table 3 - Demographic Characteristics of Focus Group Participants

	(n = 37); count (%)
Age (years)	
14-15	4 (11)
16-17	20 (54)
18-19	10 (27)
20-22	3 (8)
Gender	
Female	24 (65)
Male	13 (35)
Status entering Canada	
Immigrant	13 (35)
Refugee	24 (65)
Ethnicity	
African	8 (22)
Latino	2 (5)
Middle Eastern	27 (73)
Time Residing in Canada	
Less than a year	4 (11)
1-2 years	8 (21)
3-4 years	21 (57)
More than 4 years	4 (11)



Table 4 - Focus Group Information

	Number of Participants	Gender	Ethnic Makeup
Focus Group 1	10	5 Male 5 Female	Primarily African (Congolese, Ethiopia, Namibia & Tanzania) 3 Middle Eastern
Focus Group 2	10	5 Male 5 Female	Middle Eastern (All from Syria)
Focus Group 3	8	All Female	Middle Eastern
Focus Group 4	9	3 Male 6 Female	Primarily Middle Eastern 2 Latino 1 African

### 2.2.3 Data Analysis

The first author transcribed interviews with Trint voice-to-text software. After the first author reviewed and revised the transcriptions based on the audio recordings, a research assistant examined the transcriptions against the audiotaped interviews. The transcriptions were edited slightly for clarity and by removing word repetitions to make the text more readable. Thematic analysis was conducted to identify patterns across the data and to provide a rich and in-depth description of the dataset (Braun & Clarke, 2006). Due to the exploratory nature of this study, an inductive approach (versus ‘theoretical’ thematic analysis) was utilized with a semantic and realist orientation. Themes were data-driven (i.e., did not fit into a pre-existing coding frame) and identified within explicit meanings of the data to remain close to participants’ meanings (Clarke et al., 2015).

The first author familiarized herself with the data, coded the data in relation to the research questions, organized the data into meaningful groups or themes, reviewed the themes, and produced names based on content within each theme (Braun & Clarke, 2006). Specifically, the first author read and re-read transcripts to become familiar with the data and made notes and reflections about content that stood out to her. Data was then coded line-by-line using an open-coding approach with the aim of summarizing participant responses into short statements in relation to the research questions. The first author organized codes into meaningful categories. In

this sense, themes and sub-themes were developed based on similar perspectives voiced by multiple participants. The second and third authors reviewed and discussed the first author's coding process and initial development of themes with examples from the data, and together the authors agreed on the final themes and their labels.

To increase trustworthiness in the data, the following criteria were employed: credibility, transferability, dependability, and confirmability (Shenton, 2004). Strategies used to increase confidence in credibility of the data were member checking, reflexivity, and peer debriefing (Anney, 2014). More specifically, the first author summarized the discussion at the conclusion of each focus group to allow participants the opportunity to confirm the accuracy and completeness of the summary, kept a field journal to log each step of the process as well as her reflections and reactions throughout, and presented the findings to the second and third author to receive additional perspectives. The first author additionally conducted site tours at four newcomer-serving organizations (including the two involved in this study) to better understand services provided and youth experiences, and she facilitated a healthy relationships program with a group of newcomer youth in a high school setting. This experience provided her with insight into newcomer youths' cultures and contexts and helps to bolster trust in the data.

A purposeful sample was selected to allow for transfer of the findings, while an audit trail was used to explain research decisions, activities, and observation notes and allow for transparency and increase dependability of the findings (Anney, 2014). To increase confirmability, the first author intentionally worked to be open and transparent in terms of her interpretations and impressions to ensure that findings were representative of the participants' narratives rather than her preconceived ideas and biases (Shenton, 2004).

## 2.3 Results

The five overarching themes found across groups reflected participants' experiences and advice for other newcomer youth who have recently arrived in Canada. The first theme acknowledged the challenges associated with moving to a new country. The second and third themes demonstrated how youth can take an active role in the adjustment process to overcome challenges and positively reframe their thinking. The fourth theme reflects perspectives that newcomer youth should stay true to who they are by being authentic and resisting societal

pressure to change. The final theme provided reassurance that youth are not alone and described how to receive support.

### 2.3.1 Moving to a New Country is Hard

The first theme relayed messages that participants recognized adjustment will be hard initially due to challenges navigating a new country combined with typical teenager struggles. A number of youth spoke of stressors that occurred before their move to Canada that they are still trying to cope with (i.e., hardships and losses back home, and difficulty letting go of the past). In this sense, participants validated the challenges that youth may encounter. One youth said:

I'm gonna say the first years will be hard. I know that, like they're going to cry, they're going to be lost. That's going to happen, like of course...I lost a lot. I cry a lot and even in school, I lost in school... And so the first year will be hard. (Focus group 2)

As this quote revealed, one specific reason why moving to Canada is hard related to “feeling lost” while adapting to new environments such as school systems and their community, as well as having to learn new language and rules in Western culture.

Many participants described feeling misunderstood and identified Canadians, teachers, friends, and even parents as individuals who did not understand them. For instance, a participant stated, “Your teacher doesn't know what you have been [through], or what's happened to you, or why you want to be alone, or why you are excited” (Focus group 2). This message was very important because participants commonly reported feeling as though they don't belong in Canada due to a lack of acceptance from members of the receiving society, racism, discrimination, and bullying:

Some people just say, “why did you come here? You can't talk English, you can't learn anything.” And then the other day I heard the man...“why did you come here, like all you people.” There was like, you know the Indian people, like he was talking about them. Like, “go back to your country.” (Focus group 4)

Youth described feeling “like you're not good enough” in comparison to native-born peers who understand the way things are and having difficulties making connections and trusting people

from the receiving country. These types of experiences, along with numerous acculturative stressors upon resettlement contribute to feelings of loneliness.

In addition to the challenges associated with being a newcomer, participants spoke about how they experience stress that is typical for any youth (e.g., pressure to do well in school), along with bullying and peer pressure in their social interactions, and exposure to risk behaviour (e.g., substance use). For instance, one youth explained:

Bullying is one of the biggest things that- and still not stopping until now and I feel like people around our age is the ones suffering the most because when you're in grade school, everyone's just playing. But high school is when everything happens and that's when we all can relate to each other. Everyone experienced it and went through it, I'm sure (Focus group 1)

In sum, these challenges demonstrate how moving to a new country is hard during this developmental period of life, particularly because of differences between their old country and new country, and feeling misunderstood. Despite challenges that newcomers experience, participants spoke of resilience and courage in ways that will be discussed in the following themes.

### 2.3.2 Maintain a Healthy Mindset

The second theme captured advice related to the importance of having the right mindset to stay strong and keep going when times are hard. Participants used phrases such as “have faith in yourself”, “don’t give up fast”, “try your best”, and “go for it” to encourage youth to persevere through challenges. A few participants also spoke about having patience when adjusting because learning takes time. Participants shared examples of how it can be easy to think negatively, but how youth should try to reframe such thinking to be more positive to keep a healthy mindset:

But what keeps me positive...My parents come here for me to study. Why am I always being negative to stuff...I try to think about something to let me reach my goal. Yeah, I think thinking is the most like [important] part that's let your brain [be] healthy or not healthy. (Focus group 3)

Similarly, participants recognized the benefits of reframing their experiences to be able to grow from the past and look to their future:

Yeah, we try to like to- like the thing that's happened, to not feel like- to be a positive thing in our future, not a negative thing. We learned from it. Not like just every single time I sit and think about it and start to cry...No, just live it a positive thing, not a negative. (Focus group 3)

Another youth provided a similar example, that included the concept of life in Canada being a fresh start, and opportunity to do things differently:

And if you had tried something in your country and it didn't work, you can try it here maybe. You try something different. If you stopped studying or I don't know how I say it- but if you stopped studying, maybe to work, maybe you came to here and then stopped work and continued your studying to make your life better. (Focus group 2)

Thus, maintaining a healthy mind to persevere by reframing thinking to find positives and looking to the future are ways in which participants suggested that newcomer youth could weather the challenges they face upon arrival in Canada.

### **2.3.3 Take an Active Role in the Adjustment Process**

This next theme illustrates some ways youth might actively navigate a new country. In other words, strategies for youth to embrace their move to a new country. As one participant speaking about cultural nuances said, “All the rules kind of change” (Focus group 2), and youth should try to be open to learning about their new country, asking questions, and building connections.

Participants suggested being willing to learn about Canada, its people, culture, and social rules. One participant suggested, “open your mind” to Canada and another said, “like be with other people...don't say no it's not good, this way not good. Try to understand other people, other culture” (Focus group 4). A number of youth stressed the importance of learning English. Youth associated understanding the language with adjustment and success, and acknowledged the barriers that poor language proficiency presents:

Speak your language. But we have to have a time where we speak English too. Cause I don't see it happen a lot. And I am not saying you shouldn't speak your language. Cause I also like speaking my language, but I want people to improve, how to speak you know. At the end of the day, they don't end up working because of their language barrier. (Focus group 1)

Taking an active role in the adjustment process also included asking questions and seeking help when unsure or confused as one participant suggested, “so, I think asking just so many questions would be the best. Yeah, and just to know about everything before you actually do any steps” (Focus group 3). Participant responses suggested there is a lot to learn in Canada that is different than their home country and youth should take steps to seek out information that can support their adjustment.

Lastly, some participants indicated that taking initiative to build connections with others will support youths' adjustment and well-being as one youth explained, “If you be social with people like that, I think it would be easier” (Focus group 3). Thus, participants felt that it is important to learn about the country (i.e., rules and the language), and that asking questions and interacting with Canadians were some ways youth can take an active role to make for a smoother transition.

### 2.3.4 Stay True to Who You Are

The next theme reflects participants' views that youth should stay true to who they are and who they want to become. In this sense, participants wanted youth to know that their background identity is valid and to have self-assurance as they form their identity in a new country. Two subthemes captured participants views about how to manage when faced with invalidating types of messages that suggest youth are not welcome and are “different”. These are: (1) resist the pressure to change, and (2) be authentic.

#### 2.3.4.1 Resist the Pressure to Change

Participants acknowledged that youth will experience pressure to change their identity (e.g., culture, religion, appearance) and behaviour. One example a participant shared suggested this pressure is often because of mainstream forces, but that they should resist the urge to change:

It could also be like you know we wear hijabs, bigger clothes, like long sleeves, stuff like that...and you kind of see the discrimination in some people that are wearing. You kind of feel like should I change too, should I like take it off. So, I hope like you find it in yourself to do your own stuff. To fit into your own style. Don't change your culture or religion just because it's being discriminated against. Fight for it instead. (Focus group 1)

Thinking about the future, one participant in the second focus group summed it up as, "If you have a dream and you came here to Canada, do your dream and don't let people go into your dream. Like your dream is to do this, do it." This subtheme intersects with the next subtheme, be authentic.

#### 2.3.4.2 Be Authentic

The perspectives reflected in this subtheme suggests that youth can be authentic and still find their way to fit into Canadian society. A narrative present among participants was that it is okay to be different. Participants mentioned that youth have different backgrounds and culture, but that they can still belong in a community where they live: "Just fit in, in a different way. Like you just don't have to fit into that way that they want you to. You can just fit in with the community in a different way" (Focus group 3). Participants also suggested that with time youth can "find the right people" to form relationships with. One participant from the second focus group shared, "Try and find people that like- they're the same kind as you. Yeah, try to find people that will treat you good, and like they will let you follow your dream and make your future like better."

Furthermore, the idea that youth ultimately decide who they want to be and make choices for themselves in Canada as a result of the laws that govern the country was presented by one participant who stated, "Like it's a free country. Do whatever you like, learn whatever you want. No one forces you to do this, or to go to that religion, or they don't accept you. Like it's good. Canada- it's multiple culture" (Focus group 4). Overall, participants' advice to other newcomer youth to stay true to who they are can be achieved by resisting the pressure to change their identity and accepting individual differences to live authentically.

## 2.3.5 You Are Not Alone

The final theme reflects participant views about how to address stressors they experience. Specifically, youth explained how talking to loved ones and visiting newcomer-serving organizations can help. Participants wanted youth to know that there are other youth who have been in the “same position” and experience the “same difficulties.” Therefore, newcomer youth do not need to be alone in their journey. Two subthemes provide suggestions and strategies to reduce isolation: (1) talking helps and (2) access support at newcomer-serving organizations.

### 2.3.5.1 Talking Helps

Participants discussed how talking to trusted individuals can help to address challenges they face. Some youth explained that simply talking about what youth feel with someone can relieve stress and help them to feel better: “Yeah, so you would talk and then you would feel better, and then you would feel like something just went away” (Focus group 3). Similarly, a youth from another focus group said, “So I think for me, what I like to do is I talk about it with someone, and it just feels like a hundred big things like lift out of my chest” (Focus group 1). Friends, parents, and extended family were noted as those whom youth typically approached to talk, although one participant explained that when others become aware of the struggles youth have, they may be able to assist youth in seeking out more formal support:

A lot of people, they came from a country who have war...so I think if we talk to them and be friends with them and then show them there is a lot of um, places they can go...and like talk [to] them and then that helps them... I think if we show them, and taught them about the centre or about the place, they can help them. (Focus group 2)

Youth also mentioned consequences of keeping feelings and struggles to oneself, including pain and its potential worsening: “Find somebody to always like, you know, to tell. Just don't keep things in because it's really painful when you just keep it in, so just find somebody” (Focus group 3). This strategy was perceived to help youth feel heard and reduce feelings of loneliness, and this intersected with the next subtheme.



### 2.3.5.2 Access Support at Newcomer-serving Organizations

In addition to talking to trusted individuals, participants spoke about the benefits of accessing support and resources at newcomer-serving organizations. These organizations were described as contributing to the development of social networks and being a place to receive social support. As a participant explained, programming at newcomer organizations brings people together of similar and different backgrounds and supports the development of connections with others:

Cause everyone that comes here is newcomers, right? So, it actually helps you to relate, “oh I'm not the only new person here with the language and with the culture.” So, I think these programs are the most helpful... In school, you know this culture is here and that culture is over there. There's that people, that people, they all like separated each other, and for us too, we couldn't even learn English, cause we all sit with our people... like there was no multiculturalism. But in this kind of places, there is the unity he was talking about. The multiculturalism. (Focus group 1)

Other youth spoke about organizations' efforts to provide a warm, friendly environment:

“They all try to make you like you feel like you're at home...Even like any newcomers comes here, they try to make them feel like welcome. Meet new friends, like they're very helpful in here.” (Focus group 4)

Newcomer organizations were mentioned as offering newcomer youth social support, through emotional, informational, and practical means. Some youth spoke about meeting supportive people who provided information and assistance overcoming barriers related to adjustment (e.g., settlement worker showing youth around the city), while others discussed how programming in these organizations can create a safe space where youth feel comfortable receiving support:

There was also that program after school for like - it's just like homework club. And also, if you don't want to do your homework, you can just like sit down and have a conversation and there's actually people to just talk to, practice your English and stuff, because you can't really find any new people in school to talk to in your daily life or something because you're just new to Canada. So, like you would just sit and read after school and talk or do our homework, help each other. (Focus group 3)

Overall, the final theme encouraged youth to seek out components of community resilience, to access and connect with supportive people and resources to reduce feelings of isolation.

## 2.4 Discussion

The present study explored newcomer youths' experiences and as well as their advice and perceptions of what would be helpful for recently arrived youth in Canada. Participants across groups discussed challenges previously identified in the Canadian literature such as lack of belonging due to racism and bullying, insufficient orientation to new systems (particularly school practices and norms), language barriers, and high levels of stress (Edge et al., 2014; Guo et al., 2019; Hadfield et al., 2017; Selimos & George, 2018). Participants' advice for recently arrived newcomer youth to promote adjustment and well-being amidst difficult circumstances adds to the relatively limited literature on resettlement experiences of young newcomers in Ontario in a way that prioritizes the views and experiences of young people. Participants provided recommendations that ranged from validation of challenges to encouraging messages and strategies.

Similar to past research, findings demonstrate that newcomer youth "feel lost" and experience a lack of belonging in Canada during their first years of resettlement (e.g., Guo et al., 2019). From youth perspectives, stressors such as lack of English proficiency, racism, and "new rules" can make youth feel worthless in comparison to Canadian-born peers and can contribute to lower self-esteem as found in past research (Edge et al., 2014). Despite efforts being implemented to welcome newcomers and support their well-being in Ontario schools (School Mental Health-Assist, 2016), examples of racism and discrimination that were shared by youth often occurred in school settings. This is consistent with previous literature suggesting that school systems are ill-equipped to support transition and address the mental health needs of newcomers as they enter Canadian schools (Ratković et al., 2017). Scholars in other Canadian provinces have found that a more thorough familiarization to school systems is needed for newcomer students, particularly refugee youth who may have experienced disrupted schooling (Li et al., 2017).

Participant recommendations aligned with factors linked with resilience and positive acculturation in previous literature including maintaining a connection with home culture and religion, receiving emotional support from family and friends, accessing community support at

newcomer agencies, reframing thinking to be more positive, and building language proficiency (Ontario Centre of Excellence for Child and Youth Mental Health, 2015; Pieloch et al., 2016; Pickren, 2014). Similarly, a sense of community and communal self, as well as reframing thoughts to promote hopefulness for the future were viewed as resilience factors from the perspectives of refugees in the United States coping with trauma and hardship in their lives (Goodman, 2004). Youth advice supported the notion that resilience factors extend beyond individual characteristics to one's family, school, community, and society (Pieloch et al., 2016). For instance, the benefits of programs at newcomer-serving organizations including having a safe place to develop relationships and a sense of community can promote resilience at the community level (Edge et al., 2014).

One unique finding was youths' advice to talk about their struggles and access support, with one participant even referencing formal mental health services. This was positive given that newcomers (especially those of a non-Caucasian descent) underuse formal supports (e.g., Boukpepsi et al., 2021; Kirmayer et al., 2007) and may be more likely to use distraction and suppression as ways to cope, which can be problematic in the long run (Goodman, 2004). The fact that many youth participants also discussed maintaining their home culture despite feeling pressure to change was an important finding as identity formation is prominent during this stage of life. Previous work has found that well-adjusted newcomer youth tend to have a strong ethnic identity and find balance in maintaining their home culture and adapting to the culture they are immersed in (d'Abreu et al., 2019; Costigan et al., 2010).

### 2.4.1 Implications

These findings have several implications for policy makers and professionals working with newcomer youth. From a social-ecological perspective it is acknowledged that resilience develops not only because of individual psychological processes, but also as a result of "social process that reside in relationships among people, systems and institutions at the level of families, neighborhoods, communities, and organizations, governments and transitional networks" (Kirmayer, 2014, p.vii). Youth identified challenges related to systemic problems outside of their control (e.g., racism and bullying) that make adjustment very stressful and cause them to feel like they don't belong in Canada; yet the manner in which youth spoke suggested

they feel the onus is on them to be resilient and thrive, rather than on the receiving society to support their well-being and relationships.

From a policy-making perspective, the larger context must be addressed to improve societal and institutional engagement and broader social inclusivity. Racism and discrimination are significant issues to combat given their negative impacts on mental health (Shakya et al., 2010) and psychosocial functioning (Oxman-Martinez et al., 2012). Although it is beyond the scope of this paper to set out precise policy and programming that should be implemented, insights from our study and the wider literature suggest that attending to the responses and perceptions that residents of a receiving society hold is critical in promoting diversity and understanding (Guo et al., 2019; Ratković et al., 2017). Educating Canadians and targeting their negative perceptions about immigration would be beneficial given the increasing rates of resettled young people in Canada who have newcomer backgrounds; projections suggest this could be true for up to 49 percent of children under the age of 15 by 2036 (Statistics Canada, 2017b).

The need for more resources and supports that will enhance transition and adaptation into new systems continues to be evident as found in past research (Ratković et al., 2017). As schools are often one of the first points of contact to support newcomer well-being, professionals in the Canadian education system would benefit from training on culture and needs of newcomers to be able to provide welcoming and supportive spaces. Moreover, partnerships between mental health providers, community agencies (i.e., settlement workers) and schools would be ideal as such collaboration can help support youth adjustment and development (Li et al., 2017; Ratković et al., 2017).

Advice offered by the youth participants could be used in settlement agencies, schools, and mental health settings. Most youth participants had been in Canada for several years and have experienced and overcome many of the challenges that recently arrived youth face. Thus, settlement workers, educators, and clinicians may consider sharing our findings with recently arrived newcomer youth. Doing so may contribute to a sense of resilience and help newcomer youth through the adjustment process by validating stressors experienced and feelings of isolation (and even preparing youth for these obstacles), but also by affirming that challenges can be overcome with time and support.

Our findings also revealed areas of focus to consider for programming with newcomer youth. For example, a focus on identity development and ethnic pride appears to be warranted as it can assist in the development of resiliency (d'Abreu et al., 2019). Findings additionally suggest that specific approaches to handling peer pressure would be useful to support newcomer youth well-being. As discussed by Christmas and Christmas (2017), pressure to “fit in” and be accepted by peers may put newcomer youth at greater risk for engagement in unhealthy behaviour (e.g., substance use, violence and aggression, and falling out of the school system). Methods for addressing bullying of newcomers should also be considered and built into school- and community-based programming. Finally, more school and community-based programs and activities that will facilitate socialization between newcomer youth and native-born peers to promote cross-cultural understanding and acceptance would be beneficial given that peer relationships and sense of belonging are important predictors of wellbeing (Crooks et al., 2021; Pieloch et al., 2016; Suárez-Orozco et al., 2009). For instance, peer mentoring programs that engage native-born peers and recently arrived youth at school could assist in creating a climate that is more supportive of newcomer youth (Birman & Morland, 2014).

Future research should seek out perspectives of youth who do not attend newcomer-serving organizations and youth who do not speak the host language (with the assistance of an interpreter or in their first language) to look at the extent to which challenges are magnified or changed as a result of limited ability to express oneself in the language of the host country. In future studies, it would also be important to explore if function of status (immigrant vs. refugee) results in different factors of resilience and advice recommended by youth, given the different challenges experienced by those who come through different pathways (MacKay & Tavares, 2005).

#### 2.4.2 Limitations

The findings in the present study may not be generalizable to other newcomer youth in other settings and regions of the country; findings are best understood in relation to the experiences of newcomer youth living in mid-sized cities in Ontario, Canada who attend newcomer-serving organizations. The sample is also skewed toward female refugee youth from countries in the Middle East and therefore, may not speak to newcomer youth more broadly, and male immigrant youth in particular. Some youth in the sample who were not as proficient in English appeared to have difficulty expressing themselves at times, possibly limiting the perspectives and ideas

shared, and even those youth who spoke more fluently may have been limited in their ability to express themselves fully at times. Finally, difference in experiences as a function of status (i.e., immigrant vs. refugee) were not examined.

### 2.4.3 Conclusion

Newcomer youth face many hardships when adapting to a new country that can affect their well-being and ability to develop meaningful and genuine relationships in their host country. Despite hardships, newcomer youth demonstrate resilience and develop coping skills and strategies to overcome challenges and lead meaningful lives. Findings align with previous literature, outlining major challenges experienced by newcomer youth, and contribute newcomers' advice and motivation to counteract these challenges. Participants acknowledged that the first years of resettlement are stressful and can feel isolating, but also encouraged youth to be brave, learn about Canada, reframe their thinking to be more positive, and access supports available to them. The necessity of addressing structural barriers and racism to support newcomer youths' well-being and social inclusion is indicated.

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## Chapter 3

### 3 Youth-identified Considerations for Programming to Support Newcomers' Healthy Development: A Group Concept Mapping Study<sup>2</sup>

#### 3.1 Introduction

The 21st century has been marked by an increase in international migration (United Nations, 2017), including a record high of forcibly displaced persons across the globe (United Nations High Commissioner for Refugees [UNHCR], 2019). As a result, populations in developed countries comprise higher proportions of immigrants and refugees. For example, immigration accounts for approximately two-thirds of the population growth in Canada (Statistics Canada, 2017). The country currently welcomes 250,000 to 300,000 newcomers as permanent residents each year, including around 30,000 refugees in 2020, and has plans to increase these numbers in the coming years (Immigration, Refugees, and Citizenship Canada [IRCC], 2019, 2020).

Throughout this paper, the term newcomer will be used to encompass and describe resettled immigrants and refugees.

Newcomer youth have been identified as having unique psychosocial needs as a result of stressors faced throughout the migration process, along with developmental tasks associated with this period of life (e.g., development of close friendships and identity formation; Berger, 2008; Brar-Josan & Yohani, 2019). Stressors during the pre-migration and transit phases can include family separation, traumatic exposure, and harsh living conditions; following resettlement, stressors such as language barriers, adjusting to a new culture and school system, navigating new social and peer norms, and feelings of rejection and isolation brought on by racism and discrimination may also be experienced (Birman & Morland, 2014; Kirmayer et al., 2011).

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Although newcomer youth demonstrate a great deal of strength and resilience, many experience academic, emotional, and behavioural difficulties, and tend to report lower levels of life satisfaction when compared to native-born peers (Betancourt et al., 2012; Stevens et al., 2015). Refugee youth in particular, are at risk for higher stress levels, post-traumatic stress disorder, and other related mental health difficulties (d'Abreu et al., 2019; Hadfield et al., 2017; Marshall et al., 2016). Navigating acculturative stressors and mental health issues during the developmental period of adolescence can create further challenges, possibly leading to or exacerbating engagement in risk behaviour such as falling out of the school system, substance use, and delinquency (Christmas & Christmas, 2017). Risk behaviour can impede healthy development and put youth at risk for experiencing further adversity (Jessor, 2016). The purpose of this research was to utilize youth voice to identify considerations for developing programming to support newcomer youths' healthy development. Here we explored the usefulness of Group Concept Mapping (GCM), a mixed methods approach, to determine activities, topics, and skills newcomer youth believe would be helpful, as well as broader considerations for newcomer programming.

### 3.1.1 The Gap in Promotion and Prevention Programming for Newcomers

There is a well-documented need for more responsive promotion and prevention programming for young newcomers, especially for refugee youth in the context of mental health and healthy development (Eruiyar et al., 2018; Fazel & Betancourt, 2018; Hansson et al., 2010; Hettich et al., 2020; Marshall et al., 2016). Of the small evidence base that exists, individual and group interventions that have most commonly been employed are creative expression (i.e., art, music, and drama) and cognitive behavioural principles, which aim to reduce trauma-related impairment and improve mental health and social-emotional functioning (Sullivan & Simonson, 2016; Tyrer & Fazel, 2014). Although positive impacts have been identified in the literature for these interventions, samples are typically small and findings tend to be unrepeated, making it difficult to draw concrete conclusions about the effectiveness and appropriateness. Furthermore, while these intervention research studies might include measures of youth functioning and distress, they rarely incorporate youths' perspectives and preferences. Additionally, barriers prevent youth from accessing these types of services (Valibhoy et al., 2017; Wood & Newbold, 2012). Even

less research has been devoted specifically to parenting and family interventions (see Fazel & Betancourt, 2018), as well as teacher-led (e.g., Gormez et al., 2017) and peer-based health promotion interventions (e.g., Im & Rosenberg, 2016), despite the benefits these types of supports could have in enhancing youths' mental health and healthy adjustment.

### 3.1.2 The Role of Relationships in Healthy Development

Positive relationships, especially those in the school and community settings, are essential to learning and youth development, including identity formation and healthy behaviour (Osher et al., 2020). Research has shown that positive and supportive relationships offer protective benefits for newcomer youth (i.e., successful adjustment, academic engagement, sense of belonging, emotional support, and a sense of safety) while also acting as a buffer against immigration stress and engagement in risk behaviour and mitigating the effects of school violence (Fazel & Betancourt, 2018; Sanchez et al., 2019; Suárez-Orozco et al., 2009). The importance of connectedness and development of social networks has also been highlighted in a recent review of psychosocial interventions for adolescent refugee youth (Hettich et al., 2020).

During the initial evaluation of a strengths-based resilience intervention in Ontario, social and emotional benefits related to the development of relationships, such as sense of belonging, feelings of safety, and increased comfort in discussing experiences related to relocating in Canada, were identified by youth (Crooks, Kubishyn et al., 2020). Additional research has revealed newcomer perceptions that social support promotes health, social integration, and support-seeking skills for coping (Stewart, 2014). Yet, in the context of migration where youth must reconstruct their social networks, challenges such as difficulty making friends with locals, bullying and racism, and a lack of social support appears to be a reality for many newcomer youth in Canada (Guo et al., 2019; Stewart, 2014). As such, support for developing positive relationships appears to be an important focus for promoting healthy development, along with strategies and policies aimed at reducing discrimination and other problematic actions targeting young newcomers.

### 3.1.3 Newcomer Youth Voice in Research

Not much is known regarding newcomers' perspectives on intervention preferences. Child and adolescent perspectives have infrequently been included in developing promotion and prevention



efforts due to expert-driven, positivistic, and biopsychosocial perspectives that underlie health and mental health research (Liegghio et al., 2010). However, scholars have suggested that including youth voice in development and evaluation could improve program outcomes (Checkoway & Richards-Schuster, 2004; Edwards et al., 2016; Waterman et al., 2020). Furthermore, research has shown that when target populations are involved in identifying problems that need to be addressed, outcomes are improved (Reich et al., 2015). There is currently very little literature capturing the voices of newcomer youth (Kanu, 2008; Knap, 2018). In order to effectively meet their needs, these youth must have a platform to voice their concerns and engage with those in power. Incorporating the voice of newcomer youth in shaping services that target their healthy development may assist in producing culturally-relevant materials and activities, and possibly minimize barriers to services (Bader et al., 2007; Marshall & Begoray, 2019).

### 3.1.4 Theoretical Framework

In line with participatory action research, recent positive youth development approaches have focused on youth empowerment (Jennings et al., 2006). This research is guided by an empowerment framework, engaging newcomer youth and centralizing their perspectives in order to shape services that support them. According to Zimmerman (2000), “empowerment theory connects individual well-being with the larger social and political environment and suggests that people need opportunities to become active in community decision making in order to improve their lives, organizations, and communities” (p. 5).

Research that engages youth can support empowerment-based outcomes for youth (Wagaman, 2015). Zimmerman (1995) summarizes three components related to empowerment outcomes: 1) intrapersonal; 2) interactional; and 3) behavioural. The intrapersonal component refers to beliefs about perceived control and self-efficacy to influence change and desired outcomes. The interactional component refers to one’s critical awareness of factors in their society and context that shape their life and understanding of the resources and behaviours needed to influence outcomes. The behavioural component refers to the actions an individual takes to make desired changes in their environment and adapt to change.

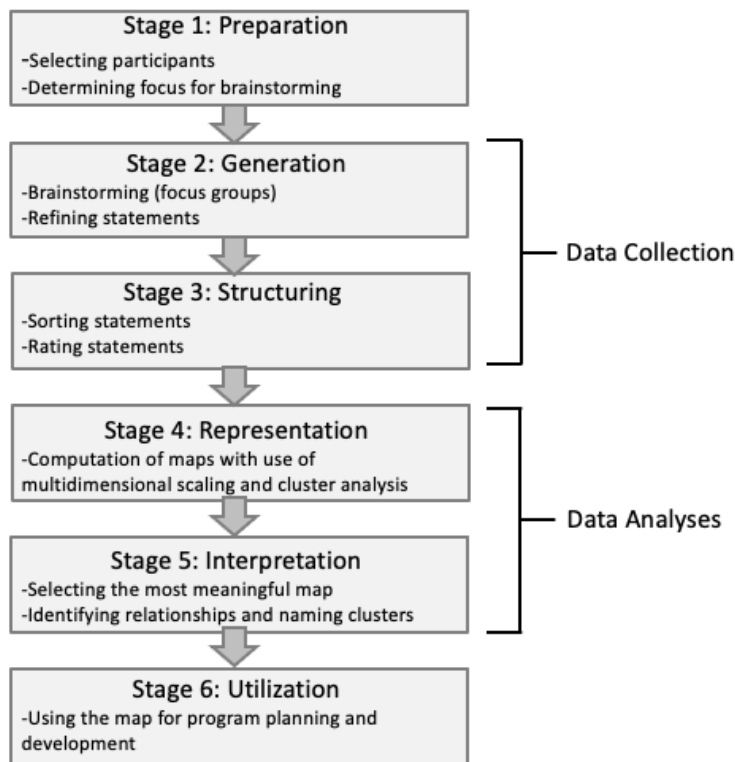
Empowerment theory guided our work in multiple ways. It prompted us to consider how we conduct research with newcomer youth in a manner that recognizes youth as being the experts of their lives, builds on their strengths and resilience, and aims to reduce power differences when possible. It also guided the research question for the current study. Newcomer youth were involved in an empowering process whereby we encouraged youths' problem-solving and leadership skills as they relate to managing and supporting well-being (i.e., sharing their knowledge and ideas for programming). Youths' competence, self-efficacy, self-esteem, and prosocial behaviour can be promoted when they are active contributors in research (Wong et al., 2010; Zimmerman, 1995).

### 3.1.5 The Present Study

The present study examined newcomer youths' collective insight about important considerations and programming topics related to healthy development, including well-being and relationships upon resettlement. It is positioned at the intersection of some existing literature about the importance of healthy relationships for newcomer youth, emerging literature on the effectiveness of group-based intervention, and a call to action about including youth voice in program planning. We utilized group concept mapping (GCM) because of its participatory nature (Kane & Trochim, 2007). Youth were given the opportunity to be directly involved in identifying specific supports (i.e., content and activities) they believe would be helpful, as well as broader considerations for newcomer programming based on their lived experiences. Participants sorted ideas into categories and rated each idea's importance, capturing their perspectives on the relationships between ideas and their importance. We intended to produce youth-generated ideas that can be used to inform future development and modification of programming to support newcomer youths' healthy development. We hypothesized that we would see some youth preferences emerge from group concept mapping that are already identified in the existing literature, such as problem-solving skills (e.g., how to resolve relational conflict), stress reduction strategies for daily life stressors (e.g., peer acceptance, bullying, and peer pressure), information to promote well-being (i.e., psychoeducation), and having a safe non-judgmental space to share (Parikh, 2019); however, the nature of group concept mapping is such that we did not have specific hypotheses about the number of concepts or exact elements.

## 3.2 Method

GCM is an integrative mixed methods approach that helps organize a group's ideas into a visual representation (Trochim, 1989). The qualitative component of this approach included focus groups for the purpose of generating ideas and unstructured sorting of the ideas. Following this, we applied rigorous quantitative analyses (i.e., multidimensional scaling and hierarchal cluster analysis) to the qualitative data using a group concept mapping software that produced a series of interrelated maps (Kane & Trochim, 2007). We believed GCM was well-suited for the aim of this research for several reasons. GCM provides insight into youths' thoughts and ideas, as well as their perceived importance of the generated ideas, and allows youth the opportunity to be the experts in interpreting the data to reduce the likelihood of researchers imposing their own biases (Burke et al., 2005; Dare & Nowicki, 2019; Kane & Trochim, 2007). This method is ideal for program development in the area of mental health and for marginalized groups, and it provides a rich understanding of group experiences (Burke et al., 2005; Trochim & Kane, 2005). The stages in this approach are outlined in figure 1 and discussed below in the context of the present study.



**Figure 1 - Schematic Illustration of the Group Concept Mapping (GCM) Process**

### 3.2.1 Participants

A purposive sample of adolescents and young adults (N = 49) attending programming at newcomer-serving organizations from two medium-sized Canadian cities participated in one or both of the activities for concept mapping. As it is not necessary to include only the initial participants from the generation stage in the structuring stage (Trochim & McLinden, 2017), the demographics for participants in each activity differed somewhat. Therefore, we describe samples further in the generation and structuring sub-sections. Overall, females who arrived with refugee status from Middle Eastern countries made up the largest group in both activities. The average time living in Canada was approximately three years and participants ranged from 14 to 22 years of age. Youth who could not speak English were excluded from the study. Table 5 shows participant demographic characteristics.

Table 5 - Participant Demographics

	Generation (Focus Groups; n = 37); count (%)	Structuring (Sorting/Rating; n = 26); Count (%)
Age (years)		
Mean (standard deviation)	17.1 (1.73)	16.8 (1.33)
Gender		
Female	24 (65)	15 (58)
Male	13 (35)	11 (42)
Status entering Canada*		
Immigrant	13 (35)	8 (31)
Refugee	24 (65)	15 (58)
Ethnicity		
Asian	-	1(4)
African	8 (22)	-
Latino	2 (5)	2 (8)
Middle Eastern	27 (73)	23 (88)
Time Residing in Canada (years)		
Mean (standard deviation)	2.89 (1.90)	2.92 (1.41)

\* Youth could choose *other* if they did not personally identify as being a refugee or immigrant (i.e., youth may be familiar with terms such as permanent resident and temporary resident rather than immigrant and refugee); however, these youth did not specify their status.

### 3.2.2 Procedure

**Step 1: Preparation.** The specific focus for conceptualization in the present study was, “What considerations do newcomer youth have for developing programming addressing relationships and well-being upon resettlement to meet their needs?” Administrators at the organizations recruited youth using a verbal recruitment script. Parental consent and youth assent were obtained for youth 16 years and under; youth 16 years and older signed a participant consent form. Our university's institutional review board reviewed and approved the study. All procedures were in accordance with the ethical standards of the institution. Additionally, we followed the mixed methods standards recommended by the APA task force (Levitt et al., 2018). Both authors have previous experience utilizing GCM and familiarized themselves with the procedure through a workshop and review of the literature.

**Step 2: Generation.** During the generation phase, the first author conducted four focus group discussions (three mixed-gender groups and one all-female group) at newcomer-serving organizations with 8-11 youth per session. A research assistant was also present to take notes. Youth responded to the focus prompt, “Pretend you were creating a program for people around your age to help them with things like their relationships, keeping a healthy mind, and being at a new school in a new country. What topics or types of information would be important for them to learn about?” Participants responded in an unstructured and free-flowing format and were occasionally prompted to clarify or further explain their answer. We used member-checking to ensure that the moderator’s understanding of the participants’ ideas and experiences was accurate. The first author introduced herself as a doctoral student prior to each discussion, briefly explained the purpose of the study, and facilitated an icebreaker activity to build rapport and allow youth to become acquainted with all who were present.

A total of 37 youth ranging from 14-22 years of age ( $M = 17.1$ ,  $SD = 1.7$ ) participated in the focus groups during fall 2019. More youth were female (65%), entered Canada as refugees (65%), and had resided in the country for several years ( $M = 2.89$ ,  $SD = 1.9$ ). The largest proportion of youth came from countries in the Middle East (73%), and within this group, youth primarily identified as Syrian (27%) and Arab (27%). Discussion ranged from 30 to 55 minutes

across the focus groups. The first author audio-recorded focus groups transcribed recordings using Trint, a voice-to-text software. She then reviewed and revised transcriptions for accuracy.

Following focus groups, the first author extracted responses that related to the focus prompt from transcripts. Using an iterative process, she then collated and cleaned extracted responses, and generated into individual statements. Specifically, responses were edited to be short and clear to allow for the essential meaning of the statements to be understandable for youth in subsequent steps, a process known as idea synthesis (Kane & Trochim, 2007). Additionally, she separated multiple ideas to ensure that one statement represented one idea, and then coded responses as unique, redundant, or not relevant; redundant statements were removed (see appendix C). The second author and an additional researcher with group concept mapping expertise reviewed the first author's codes, and suggested revisions and clarifications for nine statements to ensure that participants' main ideas were accurately depicted. We re-introduced four additional unique statements from the initial list of possible statements based on further discussion among authors and research colleagues. We identified a total of 40 unique statements and printed each on its own card to be sorted.

**Step 3: Structuring.** The first author returned to the same newcomer-serving organizations, approximately two months following the first focus group, to invite youth to participate in a sorting activity. Youth individually organized the 40 statements into thematically similar categories and used sticky notes to write labels for each of the piles they created. Youth then rated the importance of each statement to identify the most important responses using a 5-point Likert scale (1 = not at all important to 5 = very important). Given that the majority of youth spoke Arabic (23 of 26 youth), a research assistant, and in one instance a staff member, translated instructions to further facilitate understanding of the tasks. These individuals were also present during the session to translate statements into Arabic as needed.

A total of 26 youth ranging from 15-19 years of age participated ( $M = 16.8$ ,  $SD = 1.33$ ), including 12 youth who had not participated in the focus groups (see Table 5). Similar to the make-up of focus groups, more participants were female (58%), entered Canada as refugees (58%), and had resided in the country for several years ( $M = 2.9$ ,  $SD = 1.41$ ). Additionally, the largest proportion of youth came from countries in the Middle East (88%) and identified as

Syrian (46%) and Arab (23%). Participants were compensated with a \$20 gift card for each session they participated in (i.e., focus group and/or sorting session).

### 3.2.3 Data Analyses

**Step 4: Representation.** Data were analyzed using concept mapping (Trochim, 1989) with the software groupwisdom™. Data collected during the face-to-face sorting session were entered into the software. This approach applies multidimensional scaling and hierarchical cluster analysis to participants' qualitative data to produce cluster maps depicting the group's ideas in conceptual domains and their interrelationships (Burke et al., 2005, Johnsen et al., 2000). The multidimensional scaling procedure creates a two-dimensional data point map to represent the relationships among the generated statements. Specifically, a spatial coordinate was assigned to each generated statement, and the distance between the coordinates on the map denotes conceptual similarity among the statements (Kane & Trochim, 2007). Statements piled together most often appear closer to each other in two-dimensional space, while those piled together are less frequently further apart. A hierarchical cluster analysis was conducted to organize statements into clusters. Group concept mapping software uses a bottom-up algorithm, whereby each statement is initially viewed as a single cluster that are then merged into pairs of clusters to create different cluster solutions.

**Step 5: Interpretation.** The map produced in the current study resulted in a stress value of 0.253 after 10 iterations, suggesting good fit and internal representational validity for group concept mapping (Rosas & Kane, 2012). A bridging index from 0 to 1 was also produced for each item on the map to represent whether it was sorted with nearby items or with further away items. Items with lower values generally indicate that they were only sorted with items close by, while items with higher values indicate that they were sorted with items both nearby and further away.

As noted by Kane and Trochim (2007), there is no scientific way to select the optimal cluster solution. In our case, we examined solutions ranging from four clusters to nine clusters. We determined that the most meaningful map based on best conceptual fit and anticipated practical application of the results was a six-cluster map. This involved reviewing the contents within each cluster for conceptual similarity and contrasting them with responses in other clusters for

conceptual difference. We assigned labels to clusters based on a review of the content within each cluster and the “best fit” labels that the software generated from participants’ pile names. Consistent with guidelines produced by Waltz et al. (2015), we created labels that were action-oriented, short and simple, and thus both easy to remember and understandable to the layperson. Prior to finalizing labels, a group of six researchers with varying educational backgrounds provided feedback on content within clusters to add additional perspective and confirm the accuracy of the labels. The map and ratings of importance that emerged are described in detail in the following section.

### 3.3 Results

Figure 2 depicts the final six-cluster model and includes the following concepts: create a space for sharing; discuss relational issues; teach strategies for adjusting to a new country; teach wellness skills; have feel-good activities; and plan for diversity. See Table 6 for cluster contents, their bridging values, and importance ratings.

#### 3.3.1 Create a Space for Sharing

This concept contained only four statements and was viewed as the most important for developing programming with newcomer youth ( $M = 3.99$ ,  $SD = 0.41$ , bridging value = 0.26). The statements in this cluster suggest that youth believe it is valuable to have time where they can share their experiences and feelings and talk about how they are managing on a day-to-day basis. This cluster also contained the second highest-rated statement “Keep youth safe” ( $M = 4.50$ , bridging value = 0.29).

#### 3.3.2 Discuss Relational Issues

The concept rated as second most important included six statements ( $M = 3.98$ ,  $SD = 0.37$ , bridging value = 0.69). Statements highlighted having a discussion about essential topics and issues that newcomer youth can experience in social interactions and relationships (e.g., “talk about peer pressure,” “talk about relationships with friends and siblings”). Notably, within this cluster was the item rated as being the most important by youth, “Talk in English to help improve English skills” ( $M = 4.62$ , bridging value = 0.96), which was also found to be related to all other statements according to youth (i.e., high bridging value).



### 3.3.3 Teach Strategies for Adapting to a New Country

This cluster contained six statements addressing suggestions that youth have to help other newcomers learn about and adapt to Canada ( $M = 3.94$ ,  $SD = 0.27$ , bridging value = 0.25). Items were related to adjusting to a new culture (e.g., “teach youth to be patient when adjusting to a new country”), social norms (e.g., “teach youth about the social rules in Canada”), and fitting in (e.g., “teach youth how to fit into their community in their own way”).

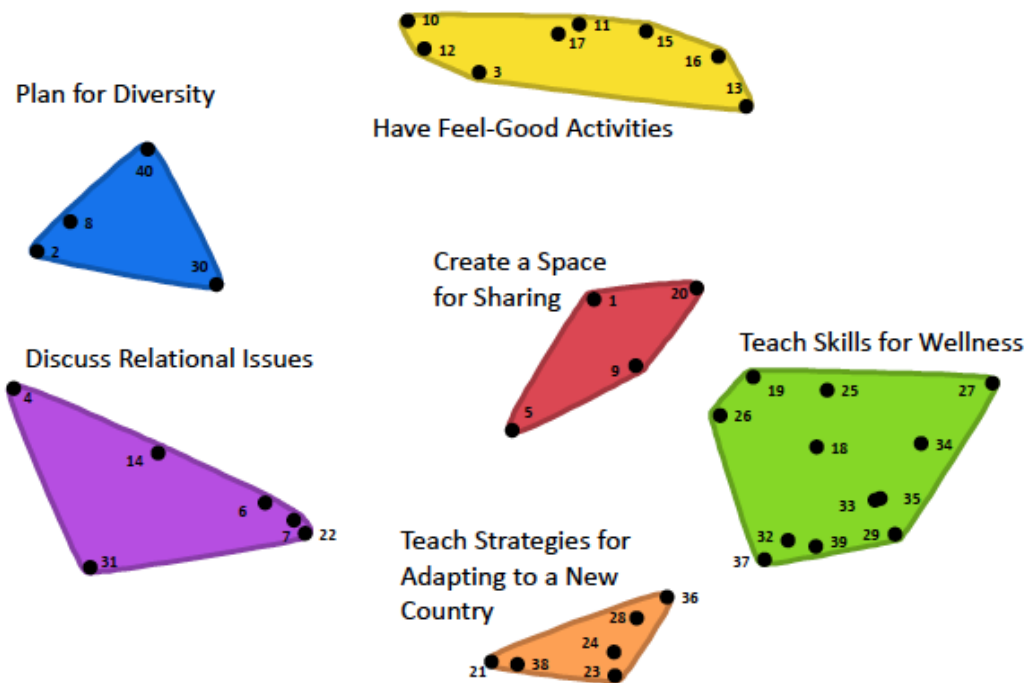


Figure 2 - Youth Concept Map Displaying Six Clusters of Ideas for Programming.

*Note.* Each point represents an individual idea. Clusters that are closer together on the map are similar in meaning, and larger clusters indicate broader concepts.

Table 6 – Statements in Each Cluster, Bridging Indices, and Importance Ratings

	Cluster	Bridging	Importance <sup>a</sup> <i>M (SD)</i>
	<b>Create a Space for Sharing</b>	<b>0.26</b>	<b>3.99 (0.41)</b>
1	Keep youth safe	0.29	4.50
20	Let youth talk about how they feel	0.34	4.12
5	Include time to talk about how youth are coping in their day-to-day lives	0.21	3.77
9	Include time to talk about what's happening in youth's daily lives	0.18	3.58
	<b>Discuss Relational Issues</b>	<b>0.69</b>	<b>3.98 (0.37)</b>
4	Talk in English to help improve English skills	0.96	4.62
7	Talk about bullying	0.48	4.08
31	Talk about rules in Canada related to school, work, and living	0.92	4.00
22	Talk about right and wrong ways to deal with trouble	0.49	3.96
14	Talk about relationships with friends and siblings	0.75	3.65
6	Talk about peer pressure	0.52	3.58
	<b>Teach Strategies for Adapting to a New Country</b>	<b>0.25</b>	<b>3.94 (0.27)</b>
23	Teach youth how to treat people with respect	0.24	4.32
21	Teach youth about social rules in Canada (how to talk to other people and how to be respectful of others' religions)	0.34	4.15
36	Teach youth to be patient when adjusting to a new country	0.18	4.04
38	Teach youth that Canada is a free country (you can make your own choices and it's okay to have a different religion or culture)	0.30	3.73
24	Teach youth how to make friends in Canada	0.22	3.72
28	Teach youth how they can fit into their community in their own way	0.21	3.65
	<b>Teach Skills for Wellness</b>	<b>0.18</b>	<b>3.85 (0.15)</b>
19	Tell youth where they can go when they have problems (where to go get help at school)	0.18	4.12
39	Teach youth how to deal with bullies	0.06	4.00
25	Provide support to youth who have been through difficult events	0.22	3.96
34	Teach youth about the importance of healthy eating and getting enough sleep	0.28	3.92
33	Teach youth how to relax when they feel stress (have a lot on their minds)	0.09	3.92
37	Teach youth coping skills to help with behaviour and feelings	0.10	3.88
35	Teach youth self-control	0.08	3.85
32	Teach youth to keep going when times are hard	0.00	3.85
26	Show youth who have been through difficult events where they can go to get help	0.16	3.72
29	Teach youth about healthy and unhealthy relationships	0.24	3.69
18	Teach youth how to manage their anger	0.10	3.65
27	Teach youth about healthy and unhealthy activities	0.62	3.62
	<b>Have Feel-Good Activities</b>	<b>0.43</b>	<b>3.68 (0.43)</b>
3	Include activities that youth enjoy	0.41	4.28
11	Have activities that are stress-free	0.29	4.04

Cluster		Bridging	Importance <sup>a</sup> <i>M (SD)</i>
10	Have activities that are fun	0.45	3.92
13	Add activities to help youth with stress	0.51	3.77
17	Have sports to reduce stress	0.43	3.72
12	Eat together as a social activity	0.43	3.46
15	Have dancing to reduce stress and feel good	0.38	3.23
16	Have yoga to reduce anger and stress	0.53	3.00
	<b>Plan for Diversity</b>	<b>0.87</b>	<b>3.64 (0.29)</b>
30	Have a space where youth can share their ideas and ask questions	0.69	3.92
40	Celebrate differences	1.00	3.85
2	Create a program where age does not matter	0.97	3.50
8	Focus on a different topic every session	0.81	3.31

<sup>a</sup> Statements are listed by most important in each cluster

### 3.3.4 Teach Wellness Skills

This cluster contained the largest number of statements (12) and had the lowest bridging index, which suggests the items within the cluster were often sorted together ( $M = 3.85$ ,  $SD = 0.15$ , bridging value = 0.18). A key theme in this cluster related to teaching healthy living skills, including the need for activities that will teach youth healthy ways to solve problems and minimize stress (e.g., “teach youth how to manage their anger”), as well as distinguishing between healthy and unhealthy relationships (e.g., “teach youth about healthy and unhealthy relationships”). This cluster was anchored by the statement “teach youth how to keep going when times are hard.”

### 3.3.5 Have Feel-Good Activities

This concept included eight statements and revealed newcomer youths’ beliefs that programming should include activities that are both enjoyable and fun, and that can help alleviate stress that youth may be experiencing (e.g., “Have dancing to reduce stress and feel good”). Overall, this concept was viewed by youth as being of lower importance for programming considerations in comparison to other concepts ( $M = 3.68$ ,  $SD = 0.43$ , bridging value = 0.43).

### 3.3.6 Plan for Diversity

The final concept contained only four statements and was viewed by youth as being least important overall ( $M = 3.64$ ,  $SD = 0.29$ , bridging value = 0.87). The high bridging index also

suggests less agreement among youth with respect to the statements within the cluster (i.e., items were often sorted with items in other clusters). Although the items within do vary, a theme present appears to be ways in which facilitators can support diversity (e.g., “celebrate differences,” and “focus on a different topic each week”). It is also possible that this cluster served as somewhat of a miscellaneous or other pile for youth as they sorted.

### 3.4 Discussion

This research aimed to utilize youth voice to produce a visual representation of considerations that can be used to inform future development of programming to meet the needs of newcomer youth. We chose group concept mapping given that it can provide insight into youths’ implicit views and knowledge, as well as their concerns (Dare & Nowicki, 2019). The resulting six-cluster concept map demonstrates ideas for programming to support newcomer youths’ well-being, relationships, adaptation to a new country, and diversity. These ideas included topics, activities, skills, and considerations for facilitators implementing such programming.

The findings converge with several areas of need depicted in the literature for newcomer youth. An area of significance identified by participants related to ensuring that programming creates a space for sharing. Such spaces allow youth the opportunity to speak about their feelings and experiences, and foster feelings of safety, which is consistent with the critical youth empowerment model (Jennings et al., 2006). Building trusting relationships by offering a safe space (Hettich et al., 2020), as well as a means of psychosocial support where young people can socialize and learn how to express themselves (Ager et al., 2013), have been identified as important components for interventions with refugee youth. Our findings suggest that key principles of trauma-informed practice proposed by scholars, are also viewed as necessary elements for programming from a youth standpoint (Arthur et al., 2013). These include emphasizing safety and trust by providing a comfortable space, privacy, and adequate time to build trusting relationships, and supporting collaboration by encouraging youth to ask questions and share ideas and feelings without fear of judgement.

With respect to promoting well-being, youth in the current study generated a number of wellness skills (i.e., action-oriented behaviours) related to managing stress and difficult events experienced, including the need to teach youth to keep going when times are hard, where they

can go to get help, and how to reduce stress. Recent research exploring adolescent preferences for mental health programming similarly found that strategies to mitigate stressors were an important topic (Parikh, 2019). Stressors associated with the migration process can result in negative mental health outcomes (George et al., 2015), and attending to stress and potential trauma symptoms has been a critical area of focus in programming for these young people (see Sullivan & Simonson, 2016; Tyrer & Fazel, 2014). Youth in the current study appeared to recognize the benefits of these efforts, possibly as a result of their own experiences in programming, along with the value of developing adaptive coping skills that can contribute to their psychological well-being. Although the participants' ideas related more to stress and problem reduction, scholars have also highlighted the importance of fostering resilience and promoting youth strengths through a positive youth development lens in the recent literature (Crooks, Smith et al., 2020).

Youth suggested feel-good activities based on their own experiences (as evidenced by the focus group transcripts from which the statements were pulled), including several physical activities (i.e., sports, yoga, and dance) for reducing stress. Youth in the current study recommended these activities as a source of enjoyment when offered in stress-free spaces. This finding is beneficial given that physical activities are already supported in the literature for their effectiveness. Along with physical health benefits, research has found that frequent involvement in physical activity is related to higher levels of self-esteem in young people, and involvement in sports can contribute to the development of social skills, relationships, and connectedness (Eime et al., 2013). Additionally, these activities can be utilized when youth have little language proficiency in the host country.

Given that newcomer youth may experience difficulties adjusting to social and peer norms in a new country, and are at greater risk for encountering bullying and experiencing feelings of isolation (Birman & Morland, 2014; Stevens et al., 2015), it is not surprising that participants in the current study recommended that newcomer youth receive assistance navigating their social world and relational issues (i.e., teaching youth the social rules in Canada and how to make friends, as well as addressing the issue of bullying). Preference for practical guidance and social problem solving in this manner is consistent with findings from Parikh (2019).

Our findings call for professionals serving newcomer youth to provide them with resources that can support and grow their social networks. Programming with this focus would be of value for youths' initial adjustment and may be very well-received if provided by an older newcomer role model from a youths' native culture who is further along in the acculturation process (Birman & Morland, 2014). Building connections with one's own ethnocultural community can also promote positive acculturation and contribute to the development of a "balanced" identity (Ontario Centre of Excellence for Child and Youth Mental Health, 2015). However, relational support should not be offered solely through direct intervention with newcomer youth; it also needs to be addressed at the systems level (e.g., creating more welcoming and inclusive spaces in the educational system by targeting educators and native-born peers; Kassan et al., 2019).

The idea rated as most important, "talk in English to help improve English skills," suggests that youth in the current study viewed language acquisition and fluency as a key area of focus that contributes to their well-being and interpersonal outcomes. Research has found proficiency of a host country's language to be a protective factor for newcomer youth, particularly with respect to their functioning within new social environments (d'Abreu et al., 2019), while the contrary can contribute to social stressors, including difficulties making friends, understanding lessons taught at school, and being bullied (Shakya et al., 2010). Although general guidance in the field promotes culturally-relevant services in the language that newcomers are most comfortable with, findings from a recent systematic review also support the notion that ecologically framed/culturally responsive services for newcomers should have a focus on increasing language proficiency (d'Abreu et al., 2019).

### 3.4.1 Limitations

The current study is not without limitations. Given that youth in the current sample were required to speak English, the perspectives of youth who may be at high risk for poor social adjustment due to their low English proficiency were missed; that being said, language challenges were still captured through youths' reflections on their struggles with learning the language when they initially arrived in Canada. Youth in the sample appeared to have difficulty expressing themselves fully at times, possibly limiting the perspectives and ideas shared. In some cases, participants assisted each other by offering translation. Literacy issues were also evident during the sorting process; three youth required translation of all statements, and other youth asked for

assistance interpreting various statements as needed, which could contribute to more superficial sorting. Statements using similar language, most notably those that began with “teach youth...” and “talk about...,” tended to be sorted together, suggesting that some youth may have sorted statements by wording similarity rather than meaning, although many of these items do share conceptual similarity. Difficulty interpreting statements may also help to explain the lack of fit of various items in clusters. One item in particular, “celebrate differences,” was remarked upon during sorting sessions by several youth who asked for clarification about its meaning. It is possible that youth who were unsure of the statement’s meaning sorted it randomly, or perhaps understood its meaning differently, which would explain the high bridging value (1.00).

In retrospect, our methodology would have benefited from having a small panel of youth review the statements before the sorting session occurred. In future work, it would be beneficial to have a more iterative approach that would involve youth in selecting the most appropriate cluster solution and allow for the opportunity to revise the placement of statements as a larger group (similar to the Delphi methodology). Although the methodology allowed for difference of opinions during the statement generation step, the analysis did not explore variability across participants. Finally, the size of the current sample does not allow for generalization to other newcomer populations.

### 3.4.2 Conclusions and Implications

The current study is unique in its use of participatory methodology, offering the perspectives of a population who rarely have the opportunity to provide input on topics and content to include in programming geared to address their well-being (Reich et al., 2015). In keeping with the three components related to empowerment outcomes (Zimmerman, 1995), we believe our group concept mapping approach was an empowering process that provided youth with the ability to demonstrate leadership and decision making to influence positive health outcomes. Youth spoke in a manner that suggested they believe they can achieve a good state of well-being (intrapersonal). Furthermore, the ideas shared demonstrated their awareness of the actions and resources available to promote well-being (interactional), and actions they have taken to support their well-being (behavioural component). This was evidenced by the lived experience of the participants and their own attendance in youth programming at newcomer organizations, which

assisted them in brainstorming what types of activities and content they believe would be helpful for other newcomer youth.

Participants produced an expansive list of ideas for programming and clear overarching concepts that contribute to a further understanding of newcomer youths' needs. Findings could be used to modify existing programming to be more relevant for newcomers, or to develop new supports.

The benefits of using youth voice in this respect may potentially lead to improved program outcomes related to mental well-being and healthy development (Edwards et al., 2016). The use of group concept mapping also adds rigour and credibility, with the added benefits of investigator triangulation for the statement generation process and development of cluster names.



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## Chapter 4

### 4 Acceptability of a Healthy Relationships Program with Newcomer Youth: A Comparative Case Study with Three Newcomer-serving Agencies<sup>3</sup>

#### 4.1 Introduction

Youth in Canada experience violence in relationships and negative mental health at rates that warrant public health approaches to prevention, particularly as these health concerns predict challenges in adulthood (Leadbeater et al., 2017; Malla et al., 2018). There has been a growing emphasis on using evidence-based programs (EBP) that combine prevention and promotion strategies to promote healthy development (Mihalic & Elliott, 2015). These programs can benefit all youth, not just those exhibiting challenges, by taking a strength-based approach to build resilience while reducing the prevalence of challenges (e.g., Crooks et al., 2018). Extending these practices into diverse settings with vulnerable and marginalized groups is critical given that these groups tend to experience greater rates of violence and negative mental health outcomes. The focus of the current research was to explore the acceptability of an evidence-informed healthy relationships promotion and violence prevention program for newcomer youth at three newcomer-serving agencies.

##### 4.1.1 Growing Population of Young Newcomers in Canada

Canada is a country built on migration and multiculturalism. In addition to admitting a high proportion of immigrants into the country each year for economic development, Canada is among the developed countries committed to protecting those most at risk, having

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resettled the highest number of refugees in 2019 for a second year in a row (Immigration, Refugees, and Citizenship Canada, 2020). Currently, two in five young people have newcomer backgrounds in Canada (i.e., first or second-generation children), and projections suggest that children with newcomer backgrounds may represent almost 50 percent of the total population of children by 2036 (Statistics Canada, 2017).

Adversities and specific risk factors related to migration put newcomer youth, and particularly refugee youth, at risk for experiencing challenges that could impede healthy development and well-being (Kirmayer et al., 2011). These adversities include lack of basic needs being met, separation from and the loss of family members, exposure to violence, and extended periods of time living in refugee camps prior to resettlement (McKeary & Newbold, 2010; Durà-Vilà et al., 2012). Stressors may persist following the journey to a new country and young people can experience further separation from family and families, acculturation and intergenerational conflict, language barriers, and unwelcoming communities and schools (Kirmayer et al., 2011). Although these young people demonstrate an incredible amount of resilience, there is a need to provide specific support promoting the well-being and healthy development of many newcomer children and youth (Eruyar et al., 2018; Marshall et al., 2016). Linking young newcomers to supports is essential for positive adjustment, and newcomer-serving agencies are one of the first sites of support for these youth upon arrival to Canada.

#### 4.1.2 Implementation Gap

While there are social and emotional learning (SEL) approaches for promoting healthy development and reducing risky behaviour with evidence to support their effectiveness and efficacy, to date, few studies have specifically evaluated the development and implementation of EBP's in this context for young newcomers (Eruyar et al., 2018). Furthermore, implementation research to better understand and support successful community implementation (i.e., acceptable and sustainable) of programming for youth, particularly as it relates to adaptations of programs to other cultural, linguistic, and socioeconomic groups, remains relatively unexplored to date. Thus, not much is known about “what works” with newcomer populations and “how it works” in real-world settings such as newcomer-serving agencies.

Adapting existing EBP's to increase cultural relevancy and meet the unique needs for newcomer populations is one approach to expanding public health efforts to improve the healthy development of vulnerable and marginalized populations (O'Connell et al., 2009). In addition to having empirically-supported intervention principles, adapting EBP's is typically quicker and less expensive than developing programs from the ground up to bring to scale and to exert a public health effort (Okamoto et al., 2014). The growing literature suggests that delivering interventions with cultural adaptations can result in positive outcomes with ethnocultural groups (Barrera et al., 2013; Bernal et al., 2009).

There is a need to explore how to effectively adapt and implement programming in locations serving vulnerable and marginalized youth, such as newcomer-serving agencies, given the gaps in research and practice. Adoption of EBP's in social service settings often requires the formation of community-research partnerships and an infrastructure to support technical, logistical, financial, administrative, and evaluative needs associated with the program (O'Connell et al., 2009). As such, there has been a move towards co-creation research which involves external, university-based researchers collaborating with community-based practice sites to produce and share knowledge related to programming for child and youth mental health (Craig et al., 2021).

#### **4.1.3 Overview of the Healthy Relationships Plus-Enhanced Program**

The Healthy Relationships Plus-Enhanced (HRP-Enhanced) program is an evidence-informed approach developed to address both risk and protective factors in youth aged 14 to 21. This 16-session program occurs in small groups format and draws on core components from the Fourth R, an evidence-based curriculum delivered in schools (Wolfe et al., 2012; Wolfe et al., 2009). Through interactive learning and discussion, youth participating in the HRP-Enhanced program are taught skills and strategies to build healthy relationships, reduce risky behaviours, and enhance well-being (Crooks et al., 2018). An outline of all topics covered can be found elsewhere (Kerry, 2019). The program offers flexibility in where and how it is delivered, notably, having been successfully implemented in novel settings such as youth justice systems and child and youth protection organizations (e.g., Kerry, 2019; Houston, 2020). The program has also

been adapted for other youth groups including Lesbian, Gay, Bisexual, Trans, Two Spirit, Queer/Questioning (LGBT2Q+) youth (Lapointe, & Crooks, 2018).

#### 4.1.4 The Rationale for Implementing HRP-Enhanced at Newcomer-serving Agencies

Healthy relationships are essential to youth well-being and development. In the case of migration, a vital component for successful integrations is social connection, including relationships networks and social structures (Ager & Strang, 2008). The HRP-Enhanced has a focus on acquiring interpersonal skills with opportunities for skill-building through interactive role-playing that may assist recent newcomer youth in developing healthy relationships. Additionally, the program could assist these young people with navigating their social world in a new country and developing a sense of belonging. These benefits could be particularly important for prevention of risky behaviour given that newcomer youth may be vulnerable to peer pressure (Christmas & Christmas, 2017) and can experience violence during their pre-migration journey and in their familial relationships that might put them at risk of violence later in life (Rossiter & Rossiter, 2009; Timshel et al., 2017).

Although many existing programs for newcomers have predominantly been prevention-oriented or risk-focused, scholars have suggested that culturally-responsive programming should aim to promote resilience in addition to addressing risk among youth (Crooks, Smith et al., 2020). This view aligns with a positive youth development approach that emphasizes successful development as resulting from the presence of protective factors such as positive social connections rather than the absence of risk (Guerra & Bradshaw, 2008). The HRP-Enhanced includes sessions on mental health promotion and resiliency including opportunities to increase social and emotional competencies and develop healthy stress management and coping skills. Further, the program was tailored for vulnerable populations and takes a trauma-informed lens that may be particularly important for refugee youth who have experienced trauma and distress during their migration journey. Finally, the program was developed with Supported Literacy options (i.e., fewer reading and writing tasks), which increases the accessibility for newcomer youth who are learning or struggling with the official languages of Canada.

It was recognized that the HRP-Enhanced was not developed to meet all the complex integration needs of newcomer youth upon arrival to Canada, nor will this program address the ongoing systemic concerns around racism and oppression that exist; discussion of policies and programs addressing these matters are also extremely important to support the adjustment and well-being of newcomers and can be found elsewhere (e.g., Blower, 2020; Brar-Josan & Yohani, 2019; Korntheuer et al., 2017). Nonetheless, we believe the program's focus on universal vulnerabilities, as well as strengths and assets, targets important areas of need for newcomer youth and the program's flexibility lends itself to implementation in unique settings such as a newcomer-serving agency. Furthermore, delivering programming in a service setting that is trusted and accessed by newcomer youth and their families can increase program engagement (Murray et al., 2008).

#### 4.1.5 Present Research

It was anticipated that adaptations would be required to make the existing HRP-Enhanced program more culturally appropriate and meaningful for youth prior to carrying out any form of efficacy and effectiveness testing. Feasibility studies determine how relevant and beneficial an intervention is to a specific context and population, and whether further examination is warranted (Bowen et al., 2009). In other words, researchers can test a program on a smaller scale to determine “whether something can be done, should we proceed with it, and if so, how?” (Eldridge et al., 2016, pg. 8). Furthermore, assessing feasibility is useful when establishing community partnerships in circumstances where limited data exist on the topic, and with populations requiring unique considerations (Bowen et al., 2009).

Acceptability is a key area addressed by feasibility studies and can generally be defined as stakeholders' (i.e., facilitators, administrators, and youth participants) reactions to an intervention (Bowen et al., 2009). Assessing acceptability can involve exploring satisfaction, intent to continue use, perceived appropriateness, fit within an organizational context, and perceived positive or negative effects. Implementation outcomes related to acceptability can have implications for long-term success of implementation in the intended settings including adoption, penetration, and sustainability (Proctor et al., 2011).

This research was exploratory in nature as we chose a mixed-methods case study format to capture aspects of acceptability. Fàbregues and Feters (2019) outline key features of case studies including in-depth analysis of a particular case, whereby the study design allows for a naturalistic approach, often utilizing a variety of methods and data sources to capture the context in which a case being examined is embedded. Case studies have been previously used as an appropriate method for assessing acceptability in terms of evaluating programs and determining if further evaluation is warranted (e.g., Esquivel et al., 2021; Rajaraman et al., 2012). Thus, we chose a case study to assess acceptability in the context of real-world messiness where variability in community settings was a factor (vs. research conducted in controlled settings).

#### 4.1.6 Theoretical Framework

Our research was grounded in a perspectivism framework, recognizing the importance of contexts and developing partnerships with community stakeholders as co-producers of knowledge (Tebes et al., 2014). Our research team worked in close collaboration with agencies to learn about their implementation experiences, determine the acceptability of a healthy relationships program with the community of youth with whom they work, and how to make it more meaningful for their youth. Additionally, Sekhon and colleague's (2017) multi-construct theoretical framework guided our understanding of acceptability. This comprehensive framework was developed to assess acceptability for recipients and facilitators of healthcare interventions and can be used both prospectively and retrospectively. Acceptability in this framework is defined as "A multi-faceted construct that reflects the extent to which people delivering or receiving a healthcare intervention consider it to be appropriate, based on anticipated or experienced cognitive and emotional responses to the intervention" (Sekhon et al., 2007, p. 4).

For the purpose of this study, we selected four constructs of interest (out of seven) outlined in the framework of acceptability: affective attitudes, or how stakeholders feel about the program; ethicality, or the extent to which the program has good fit with stakeholders' value system; burden, in other words, the perceived amount of effort that is required to implement and participate in the program; and perceived effectiveness, which includes perceptions about whether the program is likely to achieve its purpose. These

constructs are believed to capture key dimensions of acceptability based on systematic reviews of the literature on acceptability (Sekhon et al., 2017).

## 4.2 Methods

### 4.2.1 Selection of Recruitment of Study Sites and Participants

Our research team contacted five newcomer-serving agencies in three cities in Canada to assess potential interest in the implementation of the HRP-Enhanced with youth at their sites. Our team had an existing relationship with one site and formed relationships with the remaining four sites. The first author and other members of the project team conducted site tours to four agencies to learn about the services and support available for newcomer youth and their families and met with staff working with youth. Our team provided a one-day training of the HRP-Enhanced for staff selected by each site and provided a manual to each participant that attended the training. Each agency proceeded in a manner that fit with their mandate and agenda. Consultation was offered to each site, but our team respected their autonomy to implement the program, leading to variability in terms of the group selection process and program delivery.

The current research examined acceptability at three of the five newcomer-serving agencies. The two sites that did not participate in research were unable to complete research; in one case this was due to concerns around a partnership agreement and the other was related to staff turnover (i.e., facilitators and administrators that were trained were no longer working at the site) and low attendance at existing youth programming. Of the three sites that participated in research, two were located in a mid-sized city in Ontario, and the other in a large city located in British Columbia. Although initial plans were to implement the program with youth in person, the COVID-19 pandemic led to all groups being adapted for online implementation. We provided funding to one agency, and another was funded independently to provide healthy relationships programming. The third agency implemented the program with their existing funding.

The HRP-Enhanced was facilitated with youth aged 11-20 who identified as immigrants or refugees. Overall, a total of seven facilitators and three administrators across community partner agencies provided their experiences and perspectives on the program.



Six of the facilitators and all administrators identified as female, while the other facilitator identified as male. Three facilitators indicated that they had not previously implemented structured programming like the HRP-Enhanced. Educational backgrounds were in the areas of social work, psychology, child and youth work, and sociology. Facilitators reported a range of 1 to 15 years of experience working with newcomer youth ( $M = 5.57$ ;  $SD = 5.06$ ) and all but one had immigrant backgrounds.

Of the 49 youth who participated in the program across the three sites, 24 youth were eligible to participate in research. One site did not permit youth focus groups. Of the eligible youth, 20 provided consent/assent (and parental consent in cases where youth were under 16 years old) to participate in research. Most youth participants (75%) identified as female. See table 7 for additional youth participant details. The study was reviewed and approved by Western University's Non-medical Research Ethics Board (see appendix A).

#### 4.2.2 Study Design and Data Collection

To structure our data collection and analyses, we utilized an embedded multiple case design, with the three agencies being the core units of analysis of the study, and facilitators, administrators, and youth identified as subunits embedded within the larger cases. This design allowed for within and between analyses (Yin, 2014). Utilizing the perspectivism framework and the multi-construct theoretical framework of acceptability, our findings focused on facilitator, administrator and youth experiences to produce knowledge on the HRP-Enhanced program in newcomer-serving agencies as their experiences are valuable for determining the fit and acceptability (Sekhon et al., 2017; Tebes et al., 2014). We used multiple sources of data to gain a comprehensive understanding of the implementation process and acceptability. We recognized at the outset that not all sites would be able to complete all measures, so we wanted to offer a range of options that might fit the logistics of the sites. Figure 3 presents the sources and timing of data collection methods that were utilized to help inform the case.

Table 7 - Youth Participant Demographics

	n = 20 Count (%)
Age (years)	
Mean (standard deviation)	16 (2.17)
Gender	
Female	15 (75)
Male	5 (25)
Status entering Canada	
Immigrant	6 (30)
Refugee	5 (25)
Other*	6 (30)
Unsure	2 (10)
Ethnicity	
Americas	1 (5)
African	4 (20)
Europe	2 (10)
Asia	13 (65)
Time Residing in Canada (years)	
Mean (standard deviation)	3.53 (1.54)

\*Five of the six youth identified as other indicated that they were international students; one did not specify.

#### 4.2.3 Measures and Data Sources

**Session Tracking Sheets.** Facilitators were asked complete a session tracking sheet following the delivery of each session. Session tracking sheets asked facilitators to report on activities completed, successes and challenges experienced during the session, as well as modifications to the session (see Appendix D). Examples of questions include: “Was there a specific section or activity that was problematic?” and “Were any modifications or changes made to the session?”

**Attendance/Engagement Tracking Sheets.** Facilitators completed de-identified attendance/engagement sheets (see Appendix E) following the delivery of each session to track attendance (i.e., how many sessions each youth received and program completion rate) and rate youths’ level of participation using a legend from 0-4 (0= Absent; 1= Did not participate; 2= Minimal participation; 3= Overall good participation; 4= Highly active participation).

**Research Team Meeting Notes.** Throughout the implementation period, bi-weekly team meetings were held by the research team. At these meetings, the team discussed partnerships and contact with partners. Additionally, any concerns that were flagged through communication with the sites were discussed and addressed where possible. For example, consultation was provided to a facilitator who shared some challenges related to meeting youth needs in sessions given the diverse make-up of the group (in terms of age, language, and background), and again later when concerns around online privacy surfaced. At another site, we made note of challenges related to implementation with youth under the recommended age range for the program. A review of these meeting notes was undertaken to inform the results and fill in missing pieces about the implementation process at each site.

**Implementation Survey.** Upon completion of the program, participating facilitators completed an online survey adopted from a feasibility evaluation of a program developed for young newcomers (Crooks, Hoover, et al., 2020). Facilitators rated their experience implementing the HRP-Enhanced program (see Appendix F). The survey included rating scales and open-ended questions addressing a wide range of topics including recruitment and consent, successes and challenges, modifications made, perceived benefits for youth and facilitators and basic demographic questions about the facilitators. Examples include “How did you identify and recruit youth to participate in the program?” and “Was there anything about the HRP Program that made it difficult to implement? Check all that apply.” The purpose of the survey was to understand facilitators’ view of the program and quantify relevant implementation factors.

**Facilitator/Administrator Focus Group.** Post-intervention, ten facilitators participated in four focus groups to further explore experiences implementing the program (see Appendix G). The focus group followed a semi-structured guide and inquired about implementation successes and challenges, perceived benefits for youth, and recommendations for changes to the program. The focus group included questions such as, “Overall, what were the biggest successes of the program in your setting?” and “What recommendations would you have to modify/change the program or the process to

meet the needs of newcomer youth?” Focus groups ranged in length from 66 to 108 minutes long. The purpose of these discussions was to gather more descriptive data as they related to acceptability and the implementation process. Participating facilitators completed a brief demographic questionnaire prior to focus groups.

**Youth Focus Groups.** Three focus groups were conducted with 18 youth following the HRP-Enhanced delivery (see Appendix H). Focus groups took a semi-structured format in which youth were specifically asked about what they liked/disliked, what they learned, any changes they’ve noticed from participating in the program, activities they thought were most helpful and which were challenging or unhelpful, and recommendations for modifications to the program. Focus groups ranged in length from 33 to 47 minutes. Participants were compensated with a \$20 gift card. Youth also completed a brief demographic questionnaire.

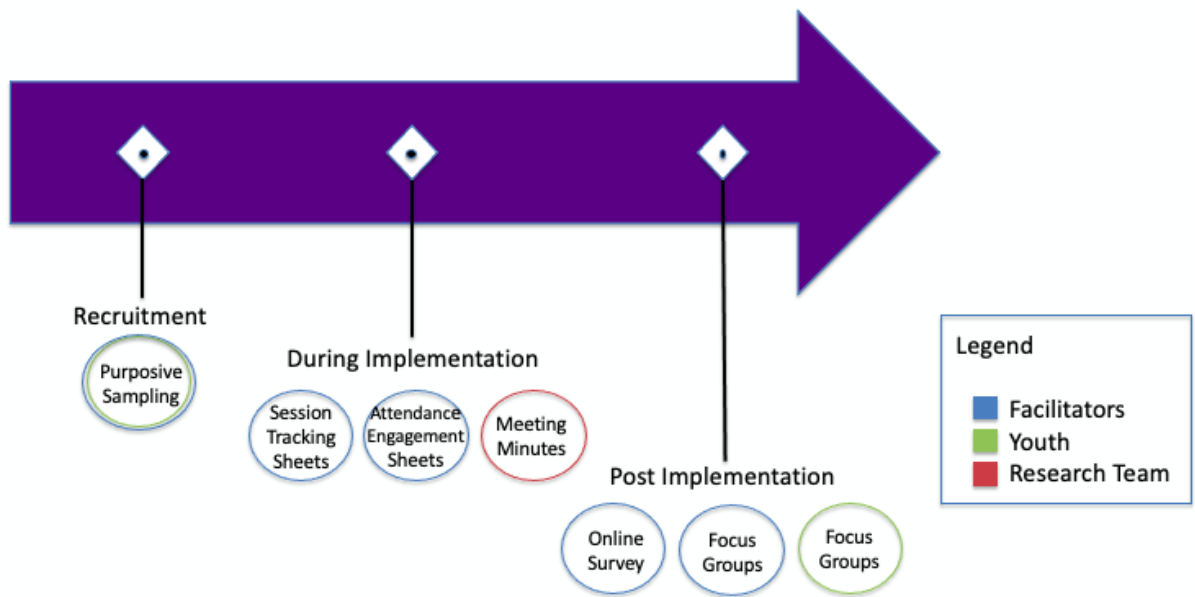


Figure 3 - Sources and Timing of Data Collection.

#### 4.2.4 Data Analyses

Audio recorded focus group interviews were transcribed using Trint voice-to-text software and reviewed and revised by the first author. Qualitative data, including focus groups and facilitator responses to open-ended questions on the session tracking sheets and implementation surveys, were analyzed using a blended analytical approach (i.e., combining deductive and inductive coding) to organize data into themes and understand how the program was experienced by stakeholders. A within-case analysis was conducted first (for sites B and C), followed by a cross-case analysis to generalize analytically across cases to produce themes.

The primary author created a provisional codebook utilizing the constructs from Sekhon and colleagues' (2017) theoretical framework of acceptability. Data were coded line by line using an open-ended coding process. Using the scissor-and-sort method, codes were then organized into meaningful categories and then classified into related constructs from the framework that lent themselves to a key assertion of acceptability (Saldaña, 2016). Theme names were produced based on constructs from the framework and content within each theme. Descriptive statistics were used to analyze the quantitative data collected from de-identified attendance/engagement sheets and implementation surveys.

##### 4.2.4.1 Trustworthiness

To ensure trustworthiness in the data, we implemented several checks that are widely accepted by researchers (Shenton, 2004). Data triangulation was achieved through the use of different research instruments (i.e., focus groups, implementation surveys, and tracking sheets) and different informants (i.e., youth, facilitators, and administrators) to support credibility of the data (Anney, 2014). A purposeful sample was used in this research and thick descriptions related to context of the study, participants, methods, and procedures were provided to allow for transfer of the findings (Anney, 2014). To help ensure dependability, members of our team reviewed the texts selected by the first author to illustrate the themes. Though these members did not directly assess coding reliability for the entire interview transcripts, the first author reviewed her process and interpretation of data with her supervisor to allow for deeper reflective analysis (Anney, 2014). Finally,

focus groups were audio-recorded to ensure that interpretations accurately represented the participants' responses.

## 4.3 Results

### 4.3.1 Description of Agencies Recruited and Implementation

As noted, the three sites implemented the HRP-Enhanced with newcomer youth based on their mandate and the context of each site. Additionally, research components depended on the interest, capacity, and logistics of each site. Table 8 presents information related to program delivery and data collected at each site. We begin with a description of each site before moving to the results of the thematic analysis. See Table 9 for a high-level overview of facilitators' implementation experiences, as well as context and differences between sites based on data from surveys and focus groups.

#### 4.3.1.1 Site A

Located in a medium sized city in Ontario, Site A is a large newcomer-serving agency with approximately 100 employees. This agency provides a wide range of services for newcomers of all ages to support integration, including employment assistance, language services, housing for families who have recently arrived in the city, and orienting families to the community and resources available. To support youth, services are provided to meet immediate needs and youth can also participate in after-school services to receive assistance with homework, attend classes and programs to learn life skills (e.g., cooking/baking), and connect with other youth in a relaxed space. A unique feature of this site is its offering of Settlement Workers in Schools (SWIS) programming to support children and youths' integration into the education system. Our team at CSMH contacted this site and they expressed interested in incorporating the HRP-Enhanced into existing programming (i.e., after school program and SWIS). Fourteen staff members were trained including one administrator.

Table 8 - Program Delivery and Data collected at each Site

Sites	Structure & Time Frame	# of youth enrolled (age range)	Number of Facilitators	Data collected
<b><u>Site A</u></b>				
Group 1	8 sessions 2 per week over one month 1 hour sessions	9 (14-20)	2	<ul style="list-style-type: none"> <li>• Session tracking</li> <li>• Youth attendance/engagement</li> <li>• Implementation survey</li> <li>• Facilitator focus group</li> <li>• Youth focus group</li> </ul>
<b><u>Site B</u></b>				
Group 1	10 sessions 1 daily for two weeks 1 ½ hours sessions	11 (11-14)	2	<ul style="list-style-type: none"> <li>• Session tracking</li> <li>• Implementation survey</li> <li>• Facilitator &amp; administrator focus group</li> </ul>
Group 2	10 sessions total 1 daily for two weeks 1 ½ hours sessions	14 (11-16)	2	<ul style="list-style-type: none"> <li>• Session tracking</li> <li>• Implementation survey</li> <li>• Facilitator &amp; administrator focus group</li> </ul>
<b><u>Site C</u></b>				
Group 1	16 sessions 1 biweekly for 7 months 1- 1½ hour(s) per session	7 (15-17)	3	<ul style="list-style-type: none"> <li>• Session tracking</li> <li>• Youth attendance/engagement</li> <li>• Implementation survey</li> <li>• Facilitator focus group</li> <li>• Youth focus group</li> </ul>
Group 2	14 sessions 1 biweekly for 5 months 1-1½ hour(s) per session	8 (15-19)	3	<ul style="list-style-type: none"> <li>• Session tracking</li> <li>• Youth attendance/engagement</li> <li>• Facilitator focus group</li> <li>• Youth focus group</li> </ul>

Table 9 - Facilitator Implementation Experiences

Characteristic	Site A	Site B	Site C
Recruitment	Referrals from SWIS workers	Community connections (through settlement workers) and administrator support	Community connections and word of mouth with youth assistance at schools
Existing youth relationships	No	No	Yes (between youth & leaders)
Group composition			
Culture/race	Diverse (various African and Asian backgrounds)	Group 1: Chinese immigrants Group 2: Somalian refugees	Middle Eastern (both groups)
Co-ed/gendered	Co-ed	Co-ed	Females only
Language	English/no use of interpreter	Primarily English/some use of interpreter (i.e., group leader)	Combination of English & Arabic
Challenges	<ul style="list-style-type: none"> <li>• Language differences</li> <li>• Age range/developmental appropriateness for younger youth</li> <li>• Time frames difficult to meet</li> <li>• Zoom technical challenges</li> </ul>	<ul style="list-style-type: none"> <li>• Balancing parent considerations while remaining inclusive to all</li> <li>• Facilitators found some topics hard to discuss with youth</li> <li>• Time frames difficult to meet</li> </ul>	<ul style="list-style-type: none"> <li>• Attendance (some youth missed a significant amount of sessions)</li> <li>• Transferring some activities to a virtual platform (e.g., role plays)</li> </ul>
Successes	<ul style="list-style-type: none"> <li>• Youth engagement and increased comfort sharing throughout program</li> <li>• Chat option on Zoom as an alternative to sharing verbally</li> </ul>	<ul style="list-style-type: none"> <li>• Youth attendance</li> <li>• Facilitator knowledge of youth community/backgrounds</li> <li>• Connections formed</li> <li>• Caregiver involvement</li> </ul>	<ul style="list-style-type: none"> <li>• Existing youth relationships promoted participation &amp; comfort</li> <li>• Regular youth check-ins during program and when program was re-scheduled</li> <li>• Youth insight into topics and shift in perspectives</li> </ul>



Adaptations*	Surface-structure	Surface-structure	Surface- and deep-structure
Combined sessions	Yes (due to time limits)	Yes (some)	Yes
Dropped content	Yes (due to time limits/to continue discussions)	Yes (time limits/to continue discussions, due to virtual implementation, and caregivers level of comfort)	Yes (time limits/to continue discussions)
Added content	No	No	Yes (supplementary cultural content, resources, & content from Cognitive-Behavioral Therapy and gender-based violence approaches)
Other	<ul style="list-style-type: none"> <li>Simplified language and provided more explanation for various (“westernized”) program concepts</li> </ul>	<ul style="list-style-type: none"> <li>Simplified language and provided more explanation for various program concepts</li> <li>Added caregiver workshop to align with HRP-Enhanced program</li> </ul>	<ul style="list-style-type: none"> <li>Adjusted order of content and how some topics were approached</li> <li>Adapted scenarios to be more culturally relevant for youth</li> </ul>

#### 4.3.1.2 Site B

Site B, located in British Columbia, is also a large settlement agency in Canada with over 300 employees throughout the province. Similar to site A, site B offers a wide range of services to newcomers of all ages. Youth programming focuses on adjusting to Canada, accessing community supports and resources, life skills classes, opportunities to connect with other youth, community participation opportunities, and one-to-one case management support. This agency also utilizes EBP's to support minority at-risk youth. Staff at Site B reached out to our team expressing interest in implementing the HRP-Enhanced because they had been funded to provide evidence-based violence prevention programming with newcomer youth and their families. In addition to supporting youth with the HRP-Enhanced, site B produced a caregiver workshop series that aligned with the youth sessions to support the family unit. They also conducted focus groups prior to implementation with newcomer parents to determine the needs of youth and their families as it related to relationships. Six staff members were trained for facilitation at this agency.

#### 4.3.1.3 Site C

Site C is located in a medium-sized city in Ontario and is devoted to supporting integration of families from Muslim communities and providing culturally-informed services. This agency has approximately 20 staff and focuses on developing EBP's to meet the needs of the individuals and families they serve. Our team had an existing relationship related to programming and research with this site prior to our contact about the HRP-Enhanced. The HRP-Enhanced program aligned well with several of the agency's core foci, including promotion of family safety, well-being, antiviolenace, and augmenting connections. Two staff members attended the initial training and two more attending a subsequent training.

### 4.3.2 Acceptability of HRP-Enhanced at Newcomer-serving Agencies

Our qualitative data analysis identified the following: three categories related to affective attitudes that indicated a positive, enjoyable experience; two categories related to the construct ethicality that suggest an appropriate fit for newcomer youths' needs overall

with some modifications; three categories related to the construct burden, representing both ease and effort to implement and participant in the HRP-Enhanced; and four categories related to perceived effectiveness that suggest benefits for youth recipients. A thematic map was developed to display the final overarching assertion, themes, and categories (See Figure 4).

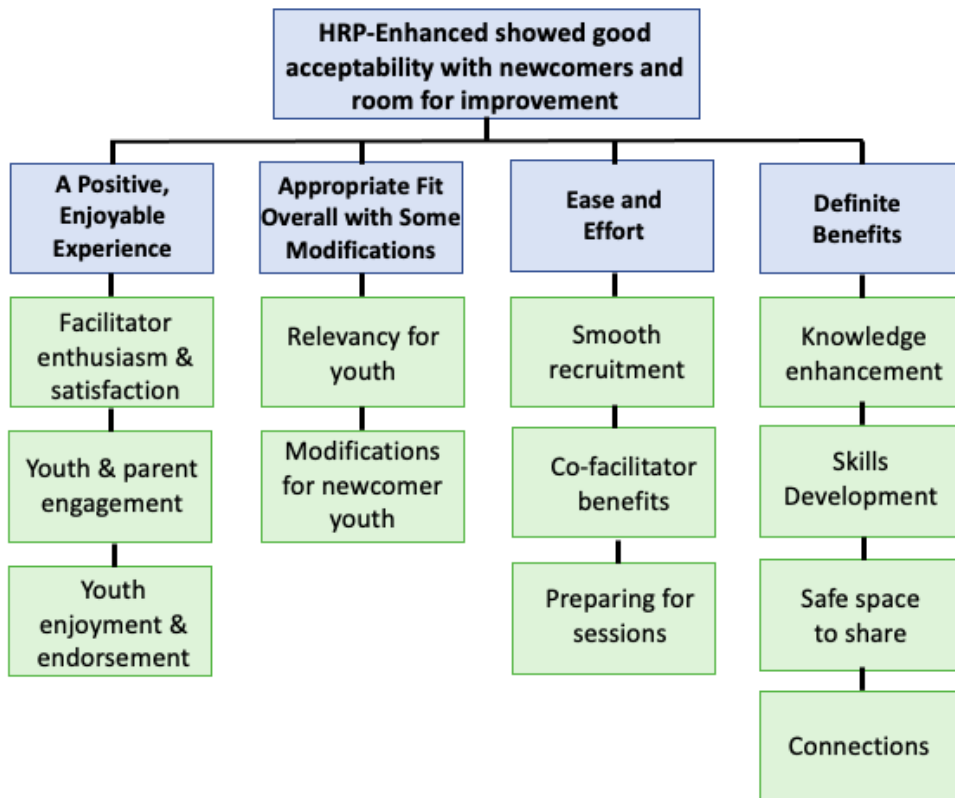


Figure 4 - Thematic Map of HRP-Enhanced Acceptability with Newcomer Youth

#### 4.3.2.1 Affective Attitudes: A Positive, Enjoyable Experience

Across sites, perceptions and feelings towards the HRP-Enhanced program were positive overall as evidenced by facilitator enthusiasm and satisfaction, perceptions of participant engagement, and youth-reported enjoyment and endorsement. Firstly, facilitators and administrators expressed enthusiasm and satisfaction with the program. Facilitator one from site B commented, “Well, I personally love the curriculum... There's so many things to learn from the curriculum.” Another facilitator who had previous experience

implementing the program said, “So [administrator] kind of asked me because she knows I really like this program and I'm the one who gets excited to kind of get it started whenever there are new batch of youths coming in” (Facilitator 1, site A). With respect to content and activities, facilitators liked being able to make connections to earlier topics and build on previous themes. These views were highlighted by facilitators at sites B and C where more content from the HRP-Enhanced was covered overall in comparison to site A where approximately only half of the program covered. Facilitators from all three sites liked observing youth learn and engage in critical thinking during sessions.

Another category supporting this theme related to facilitators’ perceptions of youth and parent engagement. During focus groups, facilitators discussed youths’ enjoyment and indicated youth were generally engaged with content and activities except for some instances where there was limited to no responses from youth. Instances when youth were not engaged often seemed to be related to shyness/lack of comfort, particularly near the beginning of the program, in co-ed groups (site A and B), and possibly due to language differences or lack of understanding (site A). Nevertheless, one facilitator said:

I mean, first, I think youth really did enjoy the program and I think they really enjoyed especially the games and activities. They seemed to really be engaged. It just kind of showed through their participation and engagement... and that's what also made it very successful.” (Facilitator 2, site A)

At two sites, facilitators also observed parent buy-in and engagement. At site B, an administrator shared, “...just seeing how engaged the parents and caregivers were and how interested they were in what their kids were learning was really positive. They really wanted to be involved and wanted to know what was going on in their kids' workshops as well” (Administrator 2). At this site, parents provided input on content to be included in sessions prior to implementation, while youth at site A helped to select the content to be covered in the program. Providing parents and youth with the opportunity to provide input likely contributed to their positive feelings towards the program.

Youth themselves expressed a high degree of enjoyment and endorsement with the program. When prompted to discuss the specific aspects of the programming they found

enjoyable, several youth commented that they liked all the topics, although particularly enjoyable topics included assertive communication, boundaries, managing stress, and handling peer pressure. With respect to activities, youth liked the informal structure (i.e., being able to “talk freely”), discussion and hearing other youths’ perspectives, having check-ins, and working through scenarios to be able to think critically and build skills. One youth shared the following:

So, I really like that- how they went into detail with this stuff. And they also focused on how you can manage this stuff in real life, like using the assertive communication skills or how to manage stress by jogging, running, doing yoga, reading books and so on and so forth. (Youth 1, site A)

When asked if they would recommend the program to other newcomer youth, participants who answered, indicated that they would:

It's a really good eye opener for youth, especially for the ones that are coming to Canada directly to high school or maybe even other teenagers. Maybe they haven't learned about this, or they have and haven't really taken it seriously, or nobody actually told them how important these things are. So, yeah, I would. (Youth 5, site A)

Survey data further supported the overall positive experiences with the HRP-Enhanced. Facilitators who completed the implementation survey rated implementation to be “very much” a positive experience and indicated that they would definitely implement the program again. They all also indicated they would recommend the HRP-Enhanced to colleagues and felt youth enjoyed the program “very much”. Facilitators’ ratings of youth engagement ranged from 2 to 4 at site A ( $M = 2.90$ ,  $SD = 0.16$ ), and 1 to 4 at site C (Group 1  $M = 3.66$ ,  $SD = 0.39$ ; Group 2  $M = 3.53$ ,  $SD = 0.47$ ). The mean ratings suggest participants were generally well-engaged throughout sessions. In sum, this theme suggests mostly positive feelings and views towards the HRP-Enhanced.

#### 4.3.2.2 Ethicality: An Appropriate Fit Overall with some Modifications

Focus group data suggested that the HRP-Enhanced was viewed as a good fit for youths' needs and values as most content was perceived to be relevant; however, some modifications were undertaken by facilitators to make the program more accessible for immigrants and refugees. Recommendations were also provided by all sites to make the program more meaningful for youth at newcomer-serving agencies.

When speaking about the relevancy of the HRP-Enhanced content for youth in general, one facilitator said:

...because they come across them in their everyday lives, but maybe don't have the space to really reflect or to talk or to think about how skills are related to friendships or communication. And so- and it's all everyday stuff for all of us. Sometimes even [Facilitator 2], [Facilitator 3], and I would reflect, I wish I had a program like this when I was younger. (Facilitator 1, site C)

At site A, a specific example was shared to portray how a youth participant was able to share content she learned to help a friend with a difficult experience:

I had a girl who was- when we were talking about the topic of dating violence and abuse, which is a very sensitive topic, and she even mentioned something about her friend and how her friend was maybe experiencing some of these things... she was talking to her friend about it. Maybe even mentioned about the content she has learned in the program, you know, which is really great. (Facilitator 2, site A)

At site B, facilitators explained that the HRP-Enhanced program was an appropriate fit for the agency and funder requirements. An administrator shared that the program and its purpose was introduced to families in the community prior to implementation, and the demand was evident. Through focus groups with youth and parents prior to the program, facilitators were able to ensure the program met their needs:

The emphasis on parents is that having run the focus groups before we started the workshop and having the parents input as well as youth input was important

because when we did a focus group with the Mandarin community, it came through very loud and clear that they wanted this...we learned the community needs and I think knowing that really helped us focus or get participants be really interested in what we had to deliver. (Administrator 1, site B)

That said, facilitators at this site found some topics difficult to discuss with youth and reported that youth required extra time to debrief sensitive content. In addition, some content was not covered due to parents' comfort level. These issues seemed to be primarily related to youths' younger ages (i.e., developmental appropriateness). The program is intended for older youth than were included in this particular group. One Facilitator at site A similarly expressed some concerns about the developmental appropriates for two of the younger youth in her group, though through implementation, she learned that these youth actually were familiar with some of the more sensitive content.

With respect to youth perspectives, recipients of the program shared that discussion topics related to their experiences as teenagers and believed the skills they learned will be useful to help them navigate social interactions. As one youth explained, "Yeah, because especially in high schools, so we get to see a lot of these discussions and fights. Sometimes we don't know how to respond and sometimes we need to be in the situation just to help" (Youth 2, site C, group 2). A number of youth believed the knowledge they gained was "good preparation" for what they might experience in the future, and commented on the diversity of topics. One youth said, "I personally like that they have a variety of topics. If there's one topic you don't really enjoy, you'll still like to a lot of them. So, there's a lot that really fit for me" (youth 2, site A).

Although much of the content was applicable to these youth, there were important considerations during implementation around how to make content more relevant for immigrants and refugees. One facilitator described content as "westernized" and indicated language differences sometimes acted as barriers for learning content. Facilitators described having to simplify content and explain terms further at times:

We had to simplify a lot of the stuff because I know- I remember one of them even asked, “what is dating violence?” Yeah. And so, I had to kind of on the spot explain what that means and what this looks like, you know, because I mean, it's a concept that we use in English and we know what it refers to. (Facilitator 2, site A)

Facilitators shared suggestions for adapting the program for newcomer youth including simplifying and reducing content or having more time for each session. One facilitator also discussed the importance of being linguistically accommodating by including modeling and visuals to assist with youth understanding:

So, we kind of have to show them what this looks like. So, I think that the modeling piece, had to be there. So, they kind of could then conceptually understand what we were asking them, because I think some of the activities were quite new to them, you know?...And then another thing I wanted to mention was having visuals... We kind of had to make it short and sweet. And if you had a visual, to show what we're trying to do or, you know, then they would respond to that faster. (Facilitator 2, site A)

Appropriateness was also enhanced at site C as facilitators adjusted and added culturally relevant content where possible to make the program more meaningful for their group of youth (e.g., adjusted North American names in scenarios to Middle Eastern names; added examples of relevant situations and videos from Middle East). They additionally offered Arabic interpretation throughout the program as all youth spoke Arabic and sometimes approached content differently. As a result, group leaders felt topics they covered from the HRP-Enhanced program seemed very comfortable for youth in their group (aged 15-19) to discuss and content was described as resonating with youth in contrast to some of the concerns expressed at sites A and B around language and developmental appropriateness. Thus, while much of the HRP-Enhanced was viewed as an appropriate fit for newcomer youth, some modifications to make the program more understandable and culturally appropriate for newcomer youth was warranted.



#### 4.3.2.3 Burden: Ease and Effort

This theme reflects perceptions related to effort required to implement and participate in the HRP-Enhanced program as well as factors that reduce this effort. Facilitators shared that recruitment was straightforward and having co-facilitators was beneficial. That said, planning for sessions required time and consideration, especially because the program needed to be adjusted for virtual implementation. The modifications made to support newcomer youth also required additional time and planning.

Firstly, with respect to ease, youth recruitment was perceived to be smooth in all three settings. Reasons for smooth recruitment included existing relationships with participants and their families, community connections, and engagement with settlement workers to help identify participants: “Settlement workers reached out to parents and then in return, parents passed on the information and then got to more know about it and then give a consent to it. So, it came along well is what I feel” (Facilitator 1, site A).

Another key finding related to ease was the presence of a co-facilitator. Co-facilitators can share the workload required to implement the program, monitor youth during sessions, and support each other:

...having [a] co-facilitator really did help because both of us could be cohosts if one drops out, the other would pick up or if, you know, for some reason, if I'm not able to check the chat box, then the other person can check the check box and kind of, you know, hold the questions as well... (Facilitator 1, site A)

Additionally, facilitators found that it was helpful if an adult with the same cultural background (and spoke the same first language as youth) was present, as evident at sites B and C. Facilitators at site B described how this appeared to increase comfort and promote connections between youth and facilitators, while at site C, doing so seemed to increase ease and understanding of content as mentioned in the youth focus groups:

Yeah. And some girls, they didn't know how to explain their ideas in Arabic, they explained in English, and the same in English. [If] they didn't know how to explain it in English, they explain in Arabic. Like if we speak Arabic, they

understand this. If we speak English, they understand us. (Youth 1, site C, group 1)

On the other hand, preparing for sessions took time given that the HRP-Enhanced was not developed specifically for newcomer populations or for online implementation and needed to be modified. All facilitators discussed the importance of taking time to prepare for sessions:

I would definitely say if it's one hour a workshop, you really need to have plenty of time before deciding which activity you're doing and reading each activity and preparing the handouts and everything. So, lots of preparation needed, especially if it's online. I think it's even when it's in person too, you need those handouts and everything ready. The key word, I would say is definitely preparing before the workshops. (Facilitator 1, site B)

Building on this finding, it was recommended that facilitators need to make an effort to know the youth and families they are working with to adjust content appropriately for newcomers. Effort was also required to modify content for online implementation and address challenges including technical issues (i.e., losing internet connection; microphone not working), difficulty reading reactions without cameras on and privacy concerns, lower attendance, and sessions taking longer than what might be expected in-person.

With respect to recipient perceptions, a couple of youth commented on language being challenging to understand at times. For example, one youth said, “For me personally, not everybody, because I don't know, like some words that are harder and uncommon, I might not understand it. Just me, probably not everybody” (Youth 2, site A). In this sense, despite youths’ enjoyment with the program and the convenience of joining virtually from home, it was challenging for some youth to participate in discussions at times due to language differences. Overall, this theme captured the perceived amount of ease and effort to implement and participate in the HRP-Enhanced at newcomer-serving agencies.

#### 4.3.2.4 Perceived Effectiveness: Definite Benefits

Facilitators who completed surveys indicated they felt the program was “very much” beneficial to youth. During the focus group discussions, facilitators discussed benefits for youth related to obtaining knowledge and learning relationship skills, as well as increased comfort to share in a safe space and develop connections. As one facilitator summarized:

Firstly, the group provided ... a point of connection for youth within the context of the pandemic. Second, I believe that participants were actively engaged in taking in new information and reflecting on skills. There were quite a few sessions where we asked participants if they learned something that they feel they can apply and often they indicated yes. This was true for understanding what boundaries are and why they are important, understanding what is and isn't a good apology, what is meant by assertive communication, and how to recognize healthy versus unhealthy relationships. (Site C, group 1 Implementation Survey)

Participants spoke of knowledge they gained, as well as how to apply learned skills in their relationships. For example, one youth participant responded, “I learn from relationship how the person- when to know if the relationship is good or not” (Youth 5, site C, group 2). Several youths expressed their belief that they are better equipped to manage relationships using the skills taught, including navigating difficult social interactions such as peer pressure, communicating effectively, and responding to stress. Another youth stated:

So in my life, I react fast. So, when I think about this situation, I need to think first, what is the best for me, because if something happens to me, I will be responsible for it. So, I think about the situation and after that, I will focus on how to deal with it. (Youth 4, site C, group 1)

In addition to knowledge enhancement and skills development, facilitators spoke of the safe space and comfort the group and facilitators provided, as well as how this promoted valuable discussion:

I think it definitely help[ed] them a lot. Just having those safe space[s] to talk about those conversations, because coming to new country, like they don't, you know- the trauma they have before and now- having that space to talk and share experiences. And you know, learn from each other. And I think it was very, very powerful. And if they-I believe that they left with something from this program, you know, they will remember that program. (Facilitator 3, site C)

Likewise, it was evident that connections were formed throughout the group processes both between youth and with facilitators. These relationships were noticed by facilitators, particularly at site B and C where facilitators spent more time with youth and seemed to have more knowledge about the youth who participated in their groups (via focus groups with families prior to program at site B and existing relationships at site C):

For me, I think they built a good relationship between the kids who joined the program and in just 10 days. At the beginning, they didn't really want to involve. But at the end of the sessions, they were really enjoying the activities and having new friendship. (Facilitator 2, Site B)

Youth also commented on the importance of the trust and cohesion built over the course of the program:

Yeah, you feel like you can trust them, they're like your sisters or like somewhere, you know, from long time, you just can trust them. You can say anything, like your feelings. It's hard (inaudible) to trust. Like I said, show your emotions and your true self. But with this group, you can just be who you really are. (Youth 3, site C, group 2)

In sum, this theme speaks to the perceived effectiveness of the HRP-Enhanced at these sites, and specifically the benefits related to learning relationship skills, critically thinking, sharing with others, and developing relationships through participation in the program.

## 4.4 Discussion

The purpose of this case study was to explore factors of acceptability for a healthy relationships program implemented with youth at newcomer-serving agencies. Findings suggested the need for healthy relationships programming with newcomer youth and indicated the HRP-Enhanced is promising in terms of fit and acceptability; however, it would be beneficial to tailor particular sections of the program content to be more culturally meaningful and more accessible for newcomer youth by modifying, adding, or substituting content and activities depending on the youth in the group and their needs. To some extent, the different successes and challenges at each site reflected site characteristics. For example, site A had the least experience implementing structured programming, and perhaps unsurprisingly, offered the fewest sessions. Site B had a mandate and funding to deeply engage families and were able to align that work to promote successful implementation of the HRP-Enhanced. Site C has a long history of implementing structured groups and gender-based violence prevention with youth and families from Muslim communities and were able to leverage their expertise and bilingualism to promote successful implementation.

At all sites, we observed surface-structure adaptations (i.e., modifications to curriculum language and images) throughout implementation as described by Okamoto and colleagues (2014). Stakeholder feedback suggested that surface-structure adaptations to the HRP-Enhanced might be sufficient for newcomer youth to feel connected with the curriculum content. This was a positive finding given that adapting programming is both less expensive and less time-consuming than developing an intervention for a particular group (Okamoto et al., 2014).

There were also some deep-structure adaptations, or more substantial changes, at site C to incorporate cultural teachings and to connect to the participants' values, norms, and lived experiences (e.g., what it means to be a girl in the Middle East; additional focus on gender equality). These adaptations were very well-received by the girls in both groups at this site and highlighted in youth focus groups. Findings reflect the importance of integrating culturally-relevant concepts into programming to most effectively promote well-being (Murray et al., 2010). The capacity for this site to go deeper into issues of

gender likely reflect the particular experience and expertise at this site, as their primary focus is on the prevention of gender-based violence. Furthermore, gendered groups were only offered at this site.

#### 4.4.1 Authentically Engaging Newcomer Youth

A significant benefit of implementation with youth at newcomer-serving organizations was facilitators' knowledge about the youth they serve. The value of their expertise in this sense was evident as staff at these agencies have years of working with newcomer youth, and many have their own newcomer background; the lived experiences of facilitators were perceived to promote understanding and the ability to relate and connect with participants in the program. Further, findings suggest in addition to learning social and emotional skills that support their well-being and healthy development, youth benefited from connections and the safe space built through the HRP-Enhanced. Social connections with peers and adults in the community are important for youth following resettlement to support successful integration (Ager & Strang, 2008).

#### 4.4.2 Implications

The results of this pilot, along with continued consultation through newcomer partnerships and best practices in the literature for newcomer programming, will be utilized to inform adaptations of a newcomer version of HRP. While a new curriculum does not appear to be warranted, the addition of supplemental materials with suggestions for implementation with newcomer youth would be valuable. This could include a document with considerations for working with newcomer youth and possible adaptations (i.e., modifications and substitutions) for various populations of newcomer youth.

Considerations will still need to be made by organizations for how to implement the program with the unique youth they serve, but program developers can work towards improving ease for planning and implementation. Given that some facilitators indicated they had not previously delivered programming like the HRP-Enhanced, consultation and materials to further increase facilitator knowledge and comfort level would be important. Developing materials to make it easier for facilitators to learn how to deliver programming, fostering a collaborative learning environment, and providing ongoing

consultation are a few strategies to enhance adaptation, implementation, and sustainability of a program (Powell et al., 2015). Further, organizations should consider selecting facilitators whose experience may complement the trauma-informed care that this program warrants.

Newcomer-serving organizations implementing the HRP-Enhanced should consider the community-based needs of the youth they serve and core cultural constructs (Okamoto et al., 2014). Additionally, organizations may consider parental engagement if it seems beneficial to the youth populations they serve. Having clear pathways to engage with parents and key members of the cultural community acted as a facilitator to successful implementation as demonstrated at site B. Furthermore, parents engagement seemed to promote youth attendance at site B. Pre-established connections with families in the communities they serve likely fostered trust which often is perceived to increase the likelihood of participation in community-based interventions (Tsai et al., 2021). Further, parental involvement in programming can enhance the program's impact on their child (Haine-Schlagel et al., 2012), and building on family strengths through family engagement can improve programming success and outcomes for newcomer youth (Murray et al., 2008; Weine et al., 2008).

Across sites, facilitator and administrator perceptions suggested that the program is most meaningful with newcomer youth when intentional recruitment occurs (i.e., “knowing who is in the room”; having clear eligibility requirements) and facilitators are flexible (i.e., prepared to make adaptations). Thus, facilitators may think about considerations for intentional recruitment, including group members' identities including background, ages, and gender, language proficiency, and migration journeys. For instance, paying attention to language is critical, not only to ensure the vocabulary makes sense to the youth from a cognitive capacity, but also in terms of their lived experience and culture as it seemed that westernized language limited ways for youth to engage at times. The use of visuals was also recommended to promote material accessibility which is consistent with other suggestions for newcomer programming (Crooks, Smith, et al., 2020). With respect to age, background, and lived experiences, an important consideration is that the HRP-Enhanced program was developed for mid to late teenagers (i.e., 14 years and older) who

may be engaging in risky behaviour. As such, some content did not fit with some of the needs of youth (e.g., substance use content was not relevant for younger youth who did not know what the term meant or have exposure to substances). Regarding participants' migration journey and developmental level, considerations around information processing are relevant for those youth who have experienced trauma (Steele & Malchiodi, 2012), while disruption in education throughout migration can also further delay learning. Facilitator flexibility is also important in this sense to accommodate youth's learning processes and to give youth agency to talk about content they are comfortable with. Furthermore, facilitators implementing the HRP-Enhanced with newcomer youth should be prepared to adapt manual content to be appropriate for participants' values and needs from a developmental, cultural and language proficiency standpoints.

The inclusion of youth feedback was a significant contribution of this study. Often youth feedback is not gathered during implementation research, yet, their feedback is critical as key stakeholders for which the program was developed for (Flores, 2007). Our use of youth focus groups is consistent with recommendations to involve youth in program development and evaluation (Edwards et al., 2016). Study designs that examine the effectiveness of programming through youth feedback can encourage reflective learning and be empowering for them (Zimmerman, 2000). It could also be beneficial to utilize other methods of obtaining youth feedback to supplement youth focus groups such as brief, directed or nondirected, audio-logs for recoding participant perspectives following each session.

Future research should continue to explore the implementation science behind programming for youth at newcomer-serving agencies as a greater understanding of these factors will improve programming within this context. In the present study, success was established through community-research partnerships as our team's knowledge of research methods was utilized and partners' knowledge of participants and implementation experiences in their settings was shared. Collaboration between community organizations and researchers is often important for effective delivery of



programming (Chambers & Azrin, 2013; O'Connell et al., 2009), and for producing and mobilizing knowledge for positive youth development (Craig et al., 2021).

Although there were drawbacks, this study additionally adds support for successful implementation of online programming. Zoom was used as a vehicle to meet youth where they were at during pandemic and connect them with others during an isolating time. The virtual implementation of HRP-Enhanced provided structured programming, increased social connections and the quality of relational interactions that had been disrupted by the pandemic (Courtney et al., 2020). This could be especially valuable for youth struggling with mental health issues as the pandemic has been reported as exacerbating symptoms. Additionally, for families without transportation or for those with demanding schedules, online implementation improved accessibility because there was no need for physical attendance.

Online implementation would allow for reaching youth across the country and possibly even youth in rural and remote areas. This could also enable drawing from across geographical jurisdictions resulting in a larger pool of youth participants that would allow for matching of facilitator language to participant language, as well as gendered groups, narrower developmental ages and stages of participants, and groups where participants share first language or cultural backgrounds. One drawback, however, may be losing the benefits associated with pre-existing relationships between facilitators and the youth and their families. The success of online implementation has also led to relevant opportunities related to virtual training and communities of practice. Over the past year, our team has offered virtual trainings of the HRP-Enhanced and monthly meetings for community of practice to support and build capacity in facilitators from organizations across Canada.

#### 4.4.3 Limitations

This study has several limitations. Firstly, the study design and descriptive nature of results limits the generalizability of findings. Although we began implementing the program with five newcomer-serving agencies, only three elected to participate in this evaluation. The scope of the case study is limited to the contexts at these three agencies and may not apply to other circumstances. Still, the present research adds to the sparse

literature on implementing and adopting programming to promote newcomers' healthy development and the study design seemed appropriate because of the limited control the researchers had over the implementation process. Times of data collection, as well as some methods and informants differed across some sites which limits the conclusions. For instance, no youth data was collected from site B, and thereby, the results only captured youths' experiences through the perspectives of facilitators and administrators. Although the first author followed steps to increase trust in the data, her biases still may have influenced the analysis.

#### 4.4.4 Conclusion

Relationships are a critical context within which youth develop, and although many programs may cover healthy relationship topics to some capacity, the HRP-Enhanced is an entire program focused on essential life skills related to relationships that allows unpacking through discussion and interactive learning. Stakeholder perspectives indicated the HRP-Enhanced is promising at newcomer-serving organizations and considerations were shared for future implementation to improve the meaningfulness of the program for immigrants and refugees. A strength of the study was the use of triangulated data, offering a more accurate and culturally sensitive approach when conducting research with participants from diverse backgrounds (Suárez-Orozco et al., 2010). This work also revealed the need to be intentional and incorporate the voices of stakeholders (i.e., facilitators, youth, and administrators) when considering how content can be augmented to be relevant for the youth these organizations serve to move towards closing the implementation gap.

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## Chapter 5

### 5 Conclusion

This integrated dissertation aimed to highlight the voices of young newcomers to identify considerations for programming and strategies to foster their natural resilience and well-being. In Chapter One, I provided a review of literature related to migration as a young newcomer, discussed the need for promotion and prevention programming to support youths' healthy development, and indicated the importance of incorporating youth voice in developing services that target their needs. Chapter Two presented research on newcomer youths' advice and coping strategies to overcome the challenges faced after relocating to a new country. In Chapter Three, research findings highlighted young newcomers' preferences for content and activities, and perceptions of what would be helpful for them in programming aimed at supporting their well-being and relationships. Chapter Four presented research exploring the acceptability of an evidence-informed healthy relationships program with newcomer youth at three newcomer-serving agencies, including how the program could be adapted to be more meaningful for young newcomers. In this final chapter, I will present an integrated summary of key findings, provide implications for research and practice, discuss limitations, and provide reflections regarding how this research has impacted my clinical work.

#### 5.1 Research Findings and Contributions

The studies in this dissertation contribute to the scarce literature on newcomer youths' well-being in Canada in a way that prioritizes their experiences and views. In chapter two, findings shed light on newcomer youths' experiences and their advice and perceptions of what would be helpful for recently arrived youth in Canada. The findings from this study confirmed the impact of stressors that have previously been reported in the literature while also contributing to our understanding of youths' natural resilience as they cope and adjust to a new country. Specifically, youth described how keeping a healthy mind while overcoming challenges meant reframing thinking to be positive and looking forward to the future, as well as accessing informal and formal supports. Participants discussed having a willingness to learn about Canada (i.e., social rules, laws,

and language) and ask questions when needed, while also remaining true to their own cultural background. Findings support the notion that a focus on identity development and cultural pride are important factors to support newcomer youths' well-being. Additionally, findings suggest that youth believe there are benefits of seeking out support. This speaks to the success of existing supports in their communities. Nonetheless, there remains a need for improvement of integration supports, particularly in the school system, as well as methods to address native-born Canadians' perceptions and understanding of newcomer experiences.

Chapter three similarly used youth voice in a novel way to identify considerations for developing programming to support newcomer youths' healthy development. Vulnerable and marginalized youth are often not involved in research in this regard (Kanu, 2008; Knap, 2018). Participants brainstormed a large list of ideas, and we produced a visual representation with six key areas that summarized their ideas. Youth demonstrated awareness of supports and resources, as well as actions to support their well-being. Regarding considerations from a facilitation standpoint, findings highlighted the need to create a safe space for sharing and planning for diversity. In terms of content and activities, participants indicated it would be beneficial to discuss relational issues and learn wellness skills and strategies for adjusting to a new country, while also participating in feel-good activities. A number of the ideas generated by youth align with scholars' recommendations for trauma-informed and stress-reduction approaches (Arthur et al., 2013; Parikh, 2019).

Chapter four presented the acceptability of an evidence-informed healthy relationships program with youth at three newcomer-serving agencies. We obtained perceptions from facilitators, administrators, and youth based on their experiences facilitating and participating in the HRP-Enhanced program. Findings suggested the program is promising at newcomer-serving agencies in terms of acceptability and fit (i.e., facilitators and youth recipients enjoyed the program and felt the content was relatable to youths' experiences). The youth reported obtaining knowledge, learning relationship skills, developing connections, and were able to utilize critical thinking in a safe space. While the program was viewed as a good fit for youth at newcomer-serving agencies,

participant perceptions suggested it would be beneficial to tailor particular content and activities to be more accessible and culturally meaningful for immigrants and refugees.

## 5.2 Overall Findings and Themes

### 5.2.1 Stress Among Newcomer Youth

All three studies demonstrated that there are significant stressors faced by newcomer youth. As evidenced in study one, youth experience migration stress related to feeling lost while adapting to new environments and learning new language, laws, and rules. Certainly, migration in and of itself is a stressful experience that most individuals will not encounter in their lifetime (Laosa, 1996; Levitt et al., 2005). Stressors related to feeling misunderstood due to attitudes and behaviors of native-born citizens in Canada (i.e., discrimination and racism) were also reported. These results are similar to findings in other research with young newcomers in Canada (Edge et al., 2014; Guo et al., 2019; Hadfield et al., 2017; Selimos & George, 2018). Additionally, combined with migration stress was the stress resulting from common experiences and social interactions during this developmental period, such as bullying, peer pressure, and uncertainty around identity.

While youth experiences of stress were not explicitly discussed in studies two and three, it was clear that stress is an important topic to address for these young people. Specifically, in study two, youth generated a number of ideas for programming indicating the need to provide skills and strategies for managing and reducing stress (e.g., how to relax when feeling stressed; how to keep going when times are hard; where to go to get help; dance, yoga, and sports to reduce stress) as well how to deal with various social interactions which cause stress (i.e., bullying; peer pressure; how to fit in). In study three, a number of youth participants identified stress management and mental health as important topics that they enjoyed in the HRP-Enhanced program.

Findings indicated the need to provide greater transition support in Ontario, and especially in schools. This is consistent with past research in the Canadian context that highlighted socio-psychological challenges faced by newcomers in Canadian schools and evidence that education systems are ill-equipped to address these students' needs

(Ratković et al., 2017). It would be valuable to provide education and support to Canadian residents who commonly interact with newcomers upon their arrival in schools (e.g., training and professional development for professionals working with newcomers and education for children at schools).

### 5.2.2 Youth Accessing and Benefiting from Support

Although research may be lacking on the evaluation of evidence-based programming and services for newcomer youth in the Canadian context, findings suggested newcomer youth who participated in this research have benefited from supports that currently exist in the communities where they reside. Study one demonstrated that youth recognized the benefits of both informal (i.e., talking about their feelings with friends and family; asking questions about Canada whenever possible) and formal supports (i.e., feelings of belonging in programming at newcomer agencies with other youth who are new to Canada; receiving help from a professional). Youth described programs at newcomer-serving agencies as being particularly helpful because youth can connect with other individuals with newcomer backgrounds at these times and learn relevant information for adjusting to Canada. These types of community support can promote resilience (Edge et al., 2014).

In study two, youth described their participation in activities through programming as being helpful and recommended these opportunities for other newcomer youth. For example, during the brainstorming stage in this research, one youth discussed how dancing reduces stress. This particular youth is involved a dance group at the newcomer-serving agency where the research was being carried out. Another youth discussed learning how to relax using breathing at a newcomer-serving agency. Study three demonstrated that youth enjoyed a healthy relationships program and experienced positive effects as a result of their participation (i.e., learned relationship skills, formed relationships with others in the group, obtained knowledge to support their healthy development and applied critical thinking).

Findings indicate that newcomer youth see the value of talking about difficult experiences and finding healthy strategies to cope. This is contrary to some research that

has found youth may use distraction and suppression, coping strategies that can be problematic in the long-term (Goodman, 2004). The desire to talk about their lives and difficult experiences, and even seek more formal treatment, could be a result of efforts to reduce stigma around mental health issues and mental health literacy programs (Wiens et al., 2020). While this research did not capture the voices of newcomer youth who are not attending newcomer-serving sites, it suggested that when youth are connected to these types of support, there are benefits. Continued efforts to reduce barriers to these services and support are needed. Additionally, more partnerships between community agencies and university research labs could be beneficial to explore existing supports and evaluate the effectiveness of these supports. Taken together with the first theme, findings suggest benefits of existing strategies and programs to promote the healthy development of young newcomers after resettlement, and at the same time, more comprehensive supports and their evaluation would be beneficial, particularly in school settings.

### 5.3 Future Directions for Research and Implications for Practice

It is critical to include young newcomers in planning and developing services that target their needs and promote resilience to ensure that services are culturally appropriate and relevant (Canadian Council for Refugees, 2016). While this research incorporated youth voice to obtain their perspectives and inform services, it would be beneficial to involve youth more actively in the research process as co-researchers. Ozer and Douglas (2015) outline key processes in youth participatory action research, including youth and adults sharing power and collaborating in an iterative process of research and action, training and applying research skills, engaging in advocacy discussion around how to create change, and building supportive networks with stakeholders. These structured opportunities can positively impact youth agency, leadership and communication skills, ethnic identity, sense of community, and social and academic competence, and can result in systems change and psychological empowerment (Anyon et al., 2018; Ozer, 2017). Moreover, it has been suggested that youth participatory action research could be suitable to promote skills development among diverse and oppressed youth (Anyon et al., 2018). Participatory research that incorporates visual tools (e.g., taking photographs to express

themselves) has been identified as particularly useful for research with young newcomers (Due et al., 2014).

Given the heterogeneity that exists both across and within newcomer sub-groups, future research should consider the multi-dimensional identities of young newcomers to increase our understanding of their experiences of stress, adjustment, and the programming needs as a function of various social locations. It would also be interesting to consider similarities and differences as it relates to youth who are connected to newcomer-serving agencies and those not connected as there is a large proportion of newcomers (estimated 30-50%) who are not accessing services during initial settlement (Campana, 2019). Research has found that social support such as that offered at newcomer-serving agencies is significantly associated with self-perceived mental health among newcomers (Chadwick & Collins, 2015), as well as smoother adjustment (Stewart et al., 2008). Some newcomers report reluctance to seek more formal supports due to their cultural beliefs and receive information and support solely from family and friends, however, perceived discrimination and racism, language difficulties, social isolation, and not knowing where to access support have also been cited as reasons newcomers may not seek out these services (Stewart et al., 2008). Seeking support can be particularly difficult for immigrants and refugees who are socially isolated and have limited family support because word-of-mouth is the primary method of newcomer-serving agencies generating newcomer clientele (Chadwick & Collins, 2015). Thus, some newcomers who are not connected with newcomer-serving agencies (or other types of formal supports) may have greater needs related to mental health and adjustment.

Given the positive youth outcomes associated with a healthy relationships program that were found in study three, another important direction for research will be to evaluate the HRP in other newcomer-serving agencies across Canada as well as to evaluate the HRP in other contexts (e.g., schools, faith-based organizations etc.) and with newcomers who do not receive support from settlement agencies to determine acceptability. Eventually, it would be valuable to employ an experimental design with a larger sample size to assess for causality between the program and youth outcomes. It would also be interesting to investigate more specific cultural adaptations for various newcomer populations and



assess outcomes. Program ideas generated by youth in study two could be incorporated and evaluated. As it was not always feasible to facilitate all 16 weeks of the programming as intended, it would also be beneficial to determine how much of the HRP program is needed to achieve positive youth outcomes at newcomer-serving agencies, as well as how to select the most appropriate content to cover with limited sessions. Applying and evaluating principles from implementation science could be useful in this sense. While implementation fidelity is important for successful translation of evidence-based programs into practice (Breitenstein et al., 2010), adherence is more difficult in real-world settings and often adaptation is required for various reasons (Cohen et al., 2008). In the context of the present research, facilitators in study three identified flexibility as an important attribute to have when implementing programming with newcomer youth in order to accommodate for the heterogeneity that exists in terms of youths' background and experiences, as well as their learning processes (i.e., language skills and developmental level). Additionally, organization circumstances resulted in program modification. Moreover, scholars have suggested that allowing for and encouraging flexibility in program delivery may enhance facilitator satisfaction, critical thinking regarding delivery of a program, and adherence (Forehand et al., 2010). Thus, exploring not only the outcomes, but the process of translating evidence-based research into practice is important as it relates to the balance of fidelity and flexibility (Cohen et al., 2008).

Regarding practice, more resources need to be allocated to support newcomer youth in managing stress and feeling good, and in turn, help promote their well-being and healthy development. Scholars have highlighted the importance of going beyond focusing solely on young newcomers' adjustment and individual competencies to consider the role of peers and adults in the larger context to promote the well-being of newcomer youth (Crooks et al., 2021). Positive relationships, for instance, are important to support newcomer youths' adjustment (Suárez-Orozco et al., 2009). Study one in the present research revealed youths' insight and knowledge, and their potential to serve as influential role models to younger newcomer peers. Engaging newcomer youth who have been residing in a country for several years in mentoring roles within their communities has been utilized in some mentoring programs (Karcher, 2013). It could also be beneficial

to set up more structured opportunities for peers of different cultures, including Canadian-born peers, to interact and share experiences with peers outside their culture as challenges making friends with these peers has been found in Canadian literature (e.g., Guo et al., 2019). The limited research on mentoring for young newcomers has been found to promote connectedness, peer relationships, and sense of belonging at schools (Karcher, 2013; Messiou & Azaola, 2018). In addition to focusing on peer influences, addressing systemic factors like bullying and racism, as well as the biases and attitudes of adults who implement programming with newcomer youth (e.g., settlement workers, teachers, and mental health clinicians), is needed to support newcomers' adjustment (Crooks et al., 2021).

## 5.4 Limitations

While the results of this integrated dissertation add to the limited literature utilizing newcomer youth voice to determine coping strategies and ideas for programming to support their well-being, the generalizability of these results may be limited. Sample sizes were small in each study and most of the youth who participated in this research identified as female refugees from Middle Eastern countries. Therefore, findings may not adequately represent the perspectives of newcomer youth more broadly speaking, and in particular, male immigrant youth and newcomer youth from different racial backgrounds. However, given the influx of Syrian refugees over the past several years, these demographics do seem to adequately mirror the racial make-up of recent newcomers to Canada (Statistics Canada, 2020). In addition, all youth who participated in this research were actively engaged with newcomer-serving agencies, and as such, findings may not reflect larger newcomer populations and specifically youth who were not able to overcome barriers to access support at these locations. Finally, it is important to consider limitations related to qualitative research. Although I followed steps to increase trustworthiness in the data, my biases, including my perceptions based on the literature I have read and my own interactions with refugees and immigrants, will have influenced the analyses. Moreover, it has been suggested that there are always aspects of ourselves that we are not aware of as we conduct research regardless of how reflective we might be (Holmes, 2020).

## 5.5 Personal Reflections

In Chapter 1, I shared that I lacked understanding and experience to support newcomers prior to starting university. Over the past several years, I have gained invaluable experience working directly with newcomer youth, their families, and professionals serving these youth in research and clinical practice. This research experience, and in particular, reviewing the literature and hearing youth perspectives firsthand during data collection, has provided me with a deeper understanding of stressors related to immigration, how recently arrived youth in Canada are coping and adjusting, and what supports are helpful post-migration. As a result, I feel more prepared and comfortable interacting with individuals who are different than me.

In addition to learning through data collection and reviewing findings, I also co-facilitated the HRP-enhanced program with a class of newcomers at a high school as well as the Supporting Transition Resilience with Newcomer Youth (STRONG) program on two separate occasions. These opportunities were both rewarding as I saw benefits for youth and growth in my clinical skills, and also challenging given factors like language barriers and the size of the group, and because I heard about examples of racism as well as emotional suffering post-migration. I believe I am now more aware of how to approach professional situations when language barriers are present (e.g., using visual resources when possible, patience, and allocating more time for various activities to make sure I understand a youth and they understand me, and how to access translation services) and how to structure group programming for newcomer youth (i.e., considering factors like cultural backgrounds, gender, language, and developmental level). I also have learned about various resources and other practical support options available to newcomer youth that I didn't know about prior to.

As I finish my PhD research, my clinical work with children, youth, and their families is just beginning. This research has taught me about the importance of self-awareness and self-reflection. I feel honoured to have gained first-hand knowledge from youth and hear different perspectives. Although I have highlighted the heterogeneity that exists in newcomer populations in this document, I have caught myself making assumptions about how certain youth feel, think, and behave before getting to know them or asking them

about their experiences at times. I see my self-awareness as a first step to addressing this issue while self-reflection has helped me to work from a stance of curiosity to understand the young people I work with. This research also prompted reflection of my own identity and influence. In two instances since starting this research, one of which was during data collection for this research, I've interacted with newcomer youth of an ethnic minority background and observed their comfort to share develop quicker with my non-white co-workers than it did with me. This has led me to reflect on how my identity as white Canadian and cultural outsider influences my interactions with newcomer youth of an ethnic minority status as it relates to trust, comfort, and sharing. I have put a greater focus on seeking out and attending workshops and trainings that incorporate anti-oppressive practice and strive to reduce power imbalances in my work. I continue to learn, unlearn, and relearn on a regular basis.

## 5.6 Final Thoughts

In conclusion, this integrated dissertation highlights newcomer youths' lived experiences and perspectives to produce considerations for programming and strategies to promote their well-being. There is a growing awareness in the literature about the benefits of youth voice in research, especially for vulnerable and marginalized youth. While adults conducting research may have knowledge about the research process, youth have knowledge outside of that scope; that is, their personal history, beliefs, and preferences. I will forever be grateful for this research experience because it has sensitized me to the immigrant and refugee experience and reminded me always to be open, curious, and willing to reflect. Further collaboration between adults and youth in research is necessary.

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# 6 Appendices

## Appendix A: Western University Ethics Approval



**Date:** 11 July 2019  
**To:** Dr. Claire Crooks  
**Project ID:** 114272  
**Study Title:** Developing of a healthy relationships program for newcomer youth  
**Short Title:** HRP for Newcomers  
**Application Type:** NMREB Initial Application  
**Review Type:** Delegated  
**Full Board Reporting Date:** 02/Aug/2019  
**Date Approval Issued:** 11/Jul/2019 11:07  
**REB Approval Expiry Date:** 11/Jul/2020

Dear Dr. Claire Crooks

The Western University Non-Medical Research Ethics Board (NMREB) has reviewed and approved the WREM application form for the above mentioned study, as of the date noted above. NMREB approval for this study remains valid until the expiry date noted above, conditional to timely submission and acceptance of NMREB Continuing Ethics Review.

This research study is to be conducted by the investigator noted above. All other required institutional approvals must also be obtained prior to the conduct of the study.

**Documents Approved:**

Document Name	Document Type	Document Date	Document Version
Administrator Interview Guide-V1 20190630	Interview Guide	30/Jul/2019	1
Administrator LOI: Consent_V2 20190710	Written Consent/Assent	10/Jul/2019	2
Attendance Tracking V1 20190630	Other Data Collection Instruments	30/Jul/2019	1
Facilitator Focus Group Guide-V1 20190630	Focus Group(s) Guide	30/Jul/2019	1
Facilitator LOI-Consent_V2 20190710	Written Consent/Assent	10/Jul/2019	2
Facilitator Training Feedback Survey-V1 20190630	Paper Survey	30/Jul/2019	1
FG Guardian LOI: Consent_V2 20190710	Written Consent/Assent	10/Jul/2019	2
FG Youth LOI: Assent_V2 20190710	Written Consent/Assent	10/Jul/2019	2
FG Youth LOI: Consent_V2 20190710	Written Consent/Assent	10/Jul/2019	2
FG-Verbal Recruitment Script-V1 20190630	Oral Script	30/Jul/2019	1
GCM Guardian LOI: Consent_V2 20190710	Written Consent/Assent	10/Jul/2019	2
GCM Youth LOI: Assent_V2 20190710	Written Consent/Assent	10/Jul/2019	2
GCM Youth LOI: Consent_V2 20190710	Written Consent/Assent	10/Jul/2019	2
GCM-Facilitator Verbal Recruitment Script-V1 20190630	Oral Script	30/Jul/2019	1
HRP Demographics for youth focus group_V2 20190710	Paper Survey	10/Jul/2019	2
HRP Demographics for youth GCM_V2 20190710	Paper Survey	10/Jul/2019	2
HRP GCM Procedures and protocol- V1 20190630	Other Data Collection Instruments	30/Jul/2019	1
HRP youth survey box for Focus Group-V1 20190630	Online Survey	30/Jul/2019	1

HRP youth survey box for GCM-V1 20190630	Online Survey	30/Jan/2019	1
HRP_Facilitator_Implementation_Survey_V1 20190630	Online Survey	30/Jan/2019	1
Session Tracking Sheets-V1 20190630	Other Data Collection Instruments	30/Jan/2019	1
Verbal Recruitment Script for Administrators and Facilitators	Oral Script	30/Jan/2019	1
Youth Focus Group Guide-V1 20190630	Focus Group(s) Guide	30/Jan/2019	1

No deviations from, or changes to the protocol should be initiated without prior written approval from the NMREB, except when necessary to eliminate immediate hazard(s) to study participants or when the change(s) involves only administrative or logistical aspects of the trial.

The Western University NMREB operates in compliance with the Tri-Council Policy Statement Ethical Conduct for Research Involving Humans (TCPS2), the Ontario Personal Health Information Protection Act (PHIPA, 2004), and the applicable laws and regulations of Ontario. Members of the NMREB who are named as Investigators in research studies do not participate in discussions related to, nor vote on such studies when they are presented to the REB. The NMREB is registered with the U.S. Department of Health & Human Services under the IRB registration number IRB 00000941.

Please do not hesitate to contact us if you have any questions.

Sincerely,

Katelyn Harris, Research Ethics Officer on behalf of Dr. Randal Graham, NMREB Chair

*Note: This correspondence includes an electronic signature (validation and approval via an online system that is compliant with all regulations).*



# Western Research

**Date:** 2 October 2019

**To:** Dr. Claire Crooks

**Project ID:** 114272

**Study Title:** Developing of a healthy relationships program for newcomer youth

**Application Type:** NMREB Amendment Form

**Review Type:** Delegated

**Full Board Reporting Date:** 01/Nov/2019

**Date Approval Issued:** 02/Oct/2019 16:51

**REB Approval Expiry Date:** 11/Jul/2020

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Dear Dr. Claire Crooks,

The Western University Non-Medical Research Ethics Board (NMREB) has reviewed and approved the WREM application form for the amendment to add study personnel and increase the number of focus groups, as of the date noted above.

REB members involved in the research project do not participate in the review, discussion or decision.

The Western University NMREB operates in compliance with the Tri-Council Policy Statement Ethical Conduct for Research Involving Humans (TCPS2), the Ontario Personal Health Information Protection Act (PHIPA, 2004), and the applicable laws and regulations of Ontario. Members of the NMREB who are named as Investigators in research studies do not participate in discussions related to, nor vote on such studies when they are presented to the REB. The NMREB is registered with the U.S. Department of Health & Human Services under the IRB registration number IRB 00000941.

Please do not hesitate to contact us if you have any questions.

Sincerely,

Katelyn Harris, Research Ethics Officer on behalf of Dr. Randal Graham, NMREB Chair

*Note: This correspondence includes an electronic signature (validation and approval via an online system that is compliant with all regulations).*



# Western Research

**Date:** 1 November 2019

**To:** Dr. Claire Crooks

**Project ID:** 114272

**Study Title:** Developing of a healthy relationships program for newcomer youth

**Application Type:** NMREB Amendment Form

**Review Type:** Delegated

**Full Board Reporting Date:** 06/Dec/2019

**Date Approval Issued:** 01/Nov/2019 11:00

**REB Approval Expiry Date:** 11/Jul/2020

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Dear Dr. Claire Crooks,

The Western University Non-Medical Research Ethics Board (NMREB) has reviewed and approved the WREM application form for the amendment, as of the date noted above.

**Documents Approved:**

Document Name	Document Type	Document Date	Document Version
HRP Implementation Survey-V2 20191026	Online Survey	26/Oct/2019	2

REB members involved in the research project do not participate in the review, discussion or decision.

The Western University NMREB operates in compliance with the Tri-Council Policy Statement Ethical Conduct for Research Involving Humans (TCPS2), the Ontario Personal Health Information Protection Act (PHIPA, 2004), and the applicable laws and regulations of Ontario. Members of the NMREB who are named as Investigators in research studies do not participate in discussions related to, nor vote on such studies when they are presented to the REB. The NMREB is registered with the U.S. Department of Health & Human Services under the IRB registration number IRB 00000941.

Please do not hesitate to contact us if you have any questions.

Sincerely,

Katelyn Harris, Research Ethics Officer on behalf of Dr. Randal Graham, NMREB Chair

*Note: This correspondence includes an electronic signature (validation and approval via an online system that is compliant with all regulations).*



# Western Research

Date: 8 April 2020

To: Dr. Claire Crooks

Project ID: 114272

Study Title: Developing of a healthy relationships program for newcomer youth

Application Type: NMREB Amendment Form

Review Type: Delegated

Full Board Reporting Date: May 1 2020

Date Approval Issued: 08/Apr/2020

REB Approval Expiry Date: 11/Jul/2020

Dear Dr. Claire Crooks,

The Western University Non-Medical Research Ethics Board (NMREB) has reviewed and approved the WREM application form for the amendment, as of the date noted above.

**Documents Approved:**

Document Name	Document Type	Document Date	Document Version
Email Recruitment Script for Administrators and Facilitators_V1 20200316	Recruitment Materials	16/Mar/2020	1
Facilitator LOI-Consent_V3-2020-03-16-clean	Written Consent/Assent	16/Mar/2020	3
FG Guardian LOI-Verbal Consent_V1 20200316	Verbal Consent/Assent	16/Mar/2020	1
Guardian Telephone Recruitment Script_V1 20200316	Recruitment Materials	16/Mar/2020	1
HRP Demographics for facilitators_V1 20200316	Paper Survey	16/Mar/2020	1
HRP Demographics for youth focus group_V3 20200316-clean	Paper Survey	16/Mar/2020	3
Study Procedures_20200316-clean	Protocol	16/Mar/2020	2

REB members involved in the research project do not participate in the review, discussion or decision.

The Western University NMREB operates in compliance with the Tri-Council Policy Statement Ethical Conduct for Research Involving Humans (TCPS2), the Ontario Personal Health Information Protection Act (PHIPA, 2004), and the applicable laws and regulations of Ontario. Members of the NMREB who are named as Investigators in research studies do not participate in discussions related to, nor vote on such studies when they are presented to the REB. The NMREB is registered with the U.S. Department of Health & Human Services under the IRB registration number IRB 00000941.

Please do not hesitate to contact us if you have any questions.

Sincerely,

Kelly Patterson, Research Ethics Officer on behalf of Dr. Randal Graham, NMREB Chair

*Note: This correspondence includes an electronic signature (validation and approval via an online system that is compliant with all regulations).*



# Western Research

Date: 10 June 2020

To: Dr. Claire Crooks

Project ID: 114272

Study Title: Developing of a healthy relationships program for newcomer youth

Application Type: NMREB Amendment Form

Review Type: Delegated

Full Board Reporting Date: 03/Jul/2020

Date Approval Issued: 10/Jun/2020 18:47

REB Approval Expiry Date: 11/Jul/2020

Dear Dr. Claire Crooks,

The Western University Non-Medical Research Ethics Board (NMREB) has reviewed and approved the WREM application form for the amendment, as of the date noted above.

**Documents Approved:**

Document Name	Document Type	Document Date	Document Version
Youth FG Email Recruitment Script_ 20200526	Recruitment Materials	26/May/2020	1
Email Recruitment Script for Administrators and Facilitators_ V2-20200526-clean	Recruitment Materials	26/May/2020	2
Study Procedures_20200610-clean	Protocol	10/Jun/2020	2
Facilitator LOI-Consent_V4-2020-06-10-clean	Written Consent/Assent	10/Jun/2020	4
FG Youth LOI-Assent_V3 20200610-clean	Written Consent/Assent	10/Jun/2020	3
FG Youth LOI-Consent_V3 20200610-clean	Written Consent/Assent	10/Jun/2020	3
FG Guardian LOI-Verbal Consent_V2 20200610-clean	Verbal Consent/Assent	10/Jun/2020	2

REB members involved in the research project do not participate in the review, discussion or decision.

The Western University NMREB operates in compliance with the Tri-Council Policy Statement Ethical Conduct for Research Involving Humans (TCPS2), the Ontario Personal Health Information Protection Act (PHIPA, 2004), and the applicable laws and regulations of Ontario. Members of the NMREB who are named as Investigators in research studies do not participate in discussions related to, nor vote on such studies when they are presented to the REB. The NMREB is registered with the U.S. Department of Health & Human Services under the IRB registration number IRB 00000941.

Please do not hesitate to contact us if you have any questions.

Sincerely,

Katelyn Harris, Research Ethics Officer on behalf of Dr. Randal Graham, NMREB Chair

*Note: This correspondence includes an electronic signature (validation and approval via an online system that is compliant with all regulations).*

## Appendix B: Focus Group Guide

**[Introductory script]** *“We are here today because we would like to better understand how to develop a program for people around your age that will be helpful for things like managing their relationships with friends, siblings, and parents, how to keep a healthy mind, and being at a new school in a new country. In other words we would like to better understand your experiences and thoughts to help us create a program because you know best about what it’s like to be your age and be living in a new country. To start, we are going to play a game that will help us get to know each other beyond our names. Let’s begin by forming and circle facing one another. I am going to read some sentences. If they apply to you, step into the middle of the circle. I will tell you when to step back into the outer circle. If the statement does not apply to you, stay standing in your spot outside of the circle.”*

- Statements: “I have a brother”, “I have a sister.” “I like to play or watch sports,” “My favorite meal is breakfast,” “My favorite class is math,” “I enjoy when it rains,” “I like to dance,” “I have a pet,” “I speak more than one language,” “I like to cook or bake,” “I am the youngest person in my family,” “I enjoy listening to hip hop music”

**(Note:** Rapport-building warm up activity exercise is meant to develop familiarity and comfort. The questions or prompts asked during this game will be basic and low-risk in that they will not prompt students to reveal very personal information. Activity can be done with chairs- sitting/standing if statement applies rather than circle)

**[Focus Group Script]** *“Now we will be having a conversation where I have some questions and you can answer them and respond to other students’ answers. This is called a focus group. You do not need to answer every question and there are no right or wrong answers. It is important that information shared in this focus group is kept confidential to respect others privacy. This means that your identity (i.e., your name, age) and any other person that you choose to talk about will be kept private, and we will only use the information that you provide for research purposes. Do you have any questions before we begin?”*

1. What advice would you give to someone your age who is moving to Canada?
2. Have you attended any programs or events that have been helpful for you with either your relationships, well-being, being at a new school, or being in a new country?
  - a. What was helpful about the program or events?
3. What challenges or difficulties have you or someone else you know around your age experienced related to relationships, whether it be with siblings, with parents, or with friends?
  - a. Possible follow-up if few responses: What challenges or difficulties do you think people around your age experience related to relationships?
4. What challenges or difficulties have you or someone else you know around your age experienced related to your well-being or staying healthy in your mind?
  - a. Possible follow-up if few responses: What challenges or difficulties do you think people around your age experience related to well-being or staying healthy in their minds?
5. Pretend you were creating a program for people around your age to help them with things like managing their relationships with friends, siblings, and parents, keeping a healthy mind, and being at a new school in a new country. What topics or types of information would be important for them to learn about?

#### Final Question

6. Is there anything you didn't get a chance to say that you would like to share or speak about?



## Appendix C: GCM Samples and Codes

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Samples of youth response prior to editing	Resulting unique statements
“... I want them to share their ideas they have, and to try stuff with others, ask them questions.”	<ul style="list-style-type: none"><li>• Have a space where youth can share their ideas and ask questions</li></ul>
“And we're teaching them about like you know, more about healthy relationships and unhealthy relationships.”	<ul style="list-style-type: none"><li>• Teach youth about healthy and unhealthy relationships</li></ul>
“I think one will be coping skills. Yeah, because a lot of people might not know how to cope with the behaviour, feelings, and all that stuff.”	<ul style="list-style-type: none"><li>• Teach youth coping skills to help with behaviour and feelings</li></ul>
“Or maybe talk about rules in Canada, the school, and everything. The work here. Everything in Canada because they are new, and they don't know about anything. That will be helpful.”	<ul style="list-style-type: none"><li>• Talk about rules in Canada related to school, work, and living</li></ul>
“Tell them about the like, the really important things, say like if they have a problem. In the event of a problem, where do they go? If they have a problem in the school, where do they go? And if it's about- and always let them talk what they feel.”	<ul style="list-style-type: none"><li>• Tell youth where they can go when they have problems (where to go get help at school) AND</li><li>• Let youth talk about how they feel</li></ul>

---

*Coding samples*

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Code	Description
Unique	<p>Any statement that is related to the focus prompt (i.e., considerations, topics, and types of information for programming).</p> <p>Example: Let youth talk about how they feel.</p>
Redundant	<p>Statements that repeat concepts already identified as unique. In the example below, the chosen statement was similar to the statement presented in the above table (i.e., Teach youth coping skills to help with behaviour and feelings)</p> <p>Example: Teach youth how to cope with different feelings they have.</p>
Not Relevant	<p>Responses that do not relate to the focus prompt. In the example below, a youth was explaining their reasoning for providing a topic suggestion. As such, the statement was not considered to be relevant.</p> <p>Example: “Yeah that's why. That was a challenge for me to be patient.”</p>

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## Appendix D: Session Tracking Sample



# HEALTHY RELATIONSHIPS PLUS ENHANCED PROGRAM

### SESSION INFORMATION

Please complete the following questions as you go through the program. These will be submitted at the end of the program.

#### Session #1 – Getting to Know You

Date of session: \_\_\_\_\_

Activity	(✓) If it was completed
Warm Up - Introductions	
Activity – Has Anyone ever...	
Activity – Getting To Know You	
Activity – Developing Guidelines for the Group	
Activity – Youth Voice – Discovering Concerns of Youth: Fishbone Activity and Numbered Heads	
Activity – Greatest Strength	
Cool Down – Exit Statement	

- 1) In general, was the time allotted for the session:
  - Too long
  - Just right
  - Too short
  
- 2) Was there a specific section or activity that was well-received? If so, please identify what section(s) and describe why you think it was well-received?
  
- 3) Was there a specific section or activity that was problematic? If so, please identify what section(s) and why it was problematic.
  
- 4) Were any modifications or changes made to the session (e.g., shortened session; combined sessions; changed an activity; changed language used)? If so, please explain what was modified/changed and why.
  
- 5) Please offer any other feedback or suggestions for improvement to the activities.

Version 1: 2019-06-30

**Appendix E: Attendance Tracking**

Youth name: \_\_\_\_\_

-----  
 \*\*\*Please tear of the top of page with youth name when submitting for research

Youth Age: \_\_\_\_\_

Youth Gender: \_\_\_\_\_

Youth Ethnicity: \_\_\_\_\_

Session #	Attendance (✓) If present		Participation Rating	Knowledge/ Understanding Rating	Facilitator Comments
1					
2					
3					
4					
5					
6					
7					
8					
9					
10					

11					
12					
13					
14					
15					
16					

**Legend**

Participation:

4 - Highly active participant; volunteers questions/comments regularly; positive contribution to group discussion; takes part in group activities; attitude towards program appeared to be positive

3 - Overall good participation; volunteers some questions/comments; generally contributes to group discussion in a positive manner; mostly takes part in group activities; attitude towards group appeared to be mostly positive

2 - Minimal participation; had to be prompted by facilitators, rarely takes part in group activities; youth displayed poor attitude towards program

1 - Did not participate; poor attitude

0 - Absent

Knowledge/Understanding:

4 – Young person demonstrates an understanding of topic and/or skills from the session

3 – Young person demonstrates some understanding of topic and/or skills from the session

2- Young person had some difficulty understanding topic and/or skills from the session

1 – Young person was unable to understand or learn topic and/or skills from the session

0 - Absent

Appendix F: Implementation Survey

Q81 What is the unique organization ID provided to you in the invitation email?

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**Q4 Part A: Group Characteristics and Format**

Q6 What was the gender composition of this group?

▼ Male and female participants (1) ... Female participants only (3)

Q7 Please comment on how gender composition influenced the group.

---

Q77 Overall, how would you describe the language spoken by students during the sessions

- No english was spoken/Everything was interpreted (1)
- Some English was spoken/Mostly used interpreter (2)
- Equal combination of English spoken and use of interpreter (3)
- English was primarily spoken/Some use of interpreter (4)
- English was spoken/No use of interpreter (5)

Q12 Was there anything about the composition of this particular group that had an impact on your ability to deliver the program as intended?

---

Q82 Did any youth in your group drop out of the program?

Yes (4)

No (5)

*Display This Question:*

*If Did any youth in your group drop out of the program? = Yes*

Q83 How many youth dropped out of the program?

*Display This Question:*

*If Did any youth in your group drop out of the program? = Yes*

Q84 Please explain any reasons that you are aware of for youth drop out (i.e., any external reasons or reasons related the program)

Q13 What was the delivery format for this group?

- Daily sessions (1)
- Weekly sessions (2)
- Weekly double sessions (3)
- Biweekly sessions (4)
- Monthly sessions (6)
- Half or full day sessions where students were removed from class (7)
- Other, please specify (5) \_\_\_\_\_

Q14 Did you have a co-facilitator for this group?

▼ Yes (1) ... No (2)

Q15 Please indicate how much of the skills practice components you completed in each session.

	Did not attempt (1)	Attempted but did not complete (2)	Completed (3)
Session 6: Active Listening (1)	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Session 10: Assertive Communication (2)	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Session 11: Apology (10)	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Session 12: Delay, Negotiation, Refusal (3)	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Session 13: Breaking Up (4)	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Session 15: Active Listening/Help Seeking (5)	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

**Q17 Part B: Identifying and Recruiting Participants**

Q18 How did you identify and recruit youth to participate in the program?

---

Q19 Were there any challenges with identifying and/or recruiting youth?

- Yes (1)
- No (2)

---

*Display This Question:*  
*If Were there any challenges with identifying and/or recruiting youth? = Yes*

Q20 Please explain the challenges you encountered

---



Q21 Were there any challenges obtaining guardian consent for participation?

- Yes (4)
  - No (5)
  - Consent not required (6)
- 

*Display This Question:*

*If Were there any challenges obtaining guardian consent for participation? = Yes*

Q76 Please explain the challenges you encountered

---

Q22 Do you have any advice or tips to share about successful youth recruitment?

---

---

**Q65 Part C: Logistics**

Q66 Where was the group held?

---

Q67 When was the group held?

---

Q68 Were there any challenges in finding a good time and space for the group?

- Yes (5)
  - No (6)
- 

*Display This Question:*

*If Were there any challenges in finding a good time and space for the group? = Yes*

Q69 Please describe the challenges you encountered in finding time and space for the group. \_\_\_\_\_

Q70 Do you have any advice or tips to share about scheduling?

---

Q78 Were there any challenges related to the use of an interpreter?

- Yes (1)
- No (2)
- Not applicable (4)

---

*Display This Question:*

*If Were there any challenges related to the use of an interpreter? = Yes*

Q79 Please explain the challenges you encountered.

---

Q80 Do you have any advice or tips about effective use of an interpreter

---

**Q23 Part D: Implementation Experience**

Q24 Overall Satisfaction with the Healthy Relationships Plus (HRP) Program:

	Not at all (1)	Not very much (2)	Neutral (3)	Somewhat (4)	Very much (5)
To what extent was implementing the HRP Program positive experience? (1)	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
To what extent would you recommend the HRP Program to other colleagues? (2)	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
To what extent do you feel the HRP Program was beneficial for your youth participants? (3)	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

Q25 Did you observe specific benefits or changes in youth as a result of the HRP Program? Please provide an example here.

---

Q26 Did you make any modifications to the HRP Program while you were implementing it?

▼ Yes (1) ... No (2)

*Skip To: Q30 If Did you make any modifications to the HRP Program while you were implementing it? = No*

Q28 What were your primary reasons for modifying the program? **Rank up to your top THREE reasons.**

	Number 1 reason (1)	Number 2 reason (2)	Number 3 reason (3)
<input checked="" type="checkbox"/> Adapted scenarios to fit a more rural/northern environment (1)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<input checked="" type="checkbox"/> Reduced or dropped activities to continue important discussions (2)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<input checked="" type="checkbox"/> Reduced or dropped activities because the group already knew each other well (3)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<input checked="" type="checkbox"/> Reduced or dropped activities to stay within time limits (4)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<input checked="" type="checkbox"/> Added supplementary resources (videos, speakers) to have more relevant and effective discussions (5)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<input checked="" type="checkbox"/> Modified activities due to group size (6)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<input checked="" type="checkbox"/> Modified activities to accommodate students' individual needs (7)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<input checked="" type="checkbox"/> Modified activities to fit needs and experiences of older/more mature youth (8)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Q29 Are there any other reasons you modified the program?

---

Q30 Was there anything about the HRP Program that made it difficult to implement?

Check all that apply.

- Time frames difficult to meet (1)
- External influences (disruptions, assemblies) (2)
- Youth did not respond well (3)
- Mismatch with local culture (4)
- Role plays difficult to carry out (5)
- I found some of the topics difficult to discuss with youth (6)
- I was uncomfortable discussing mental health or harm reduction with youth (7)
- Instructions for some activities unclear (8)
- Youth resisted role play exercises (9)
- Many youth were absent (10)
- Pressure or resistance from parents (11)
- Youth required extra time to debrief sensitive topics (12)
- Some activities triggered distress among some participants (13)
- Meeting space (15)
- Participant recruitment issues (16)
- Use of interpreter (14)
- Other, please specify (17) \_\_\_\_\_

Q31 Please complete the following.

	Not at all (1)	Not very much (2)	Neutral (3)	Somewhat (4)	Very much (5)
To what extent did the HRP program training prepare you to implement the program? (1)	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Would you be interested in learning about other Fourth R programs for possible implementation? (2)	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

Q32 Please complete the following.

	Definitely not (1)	Not likely (2)	Unsure (3)	Likely (4)	Definitely (5)
Do you plan to implement the HRP Program again? (1)	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Would you attend additional HRP Program trainings if you had the opportunity? (2)	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

Q33 If you do NOT plan to implement the HRP Program again, why not?

---

Q34 Thinking back to the HRP Program training, is there something specific you can think of that would have helped you feel more prepared to implement the program?

---

Q35 How long ago were you trained to deliver the HRP Program?

▼ I did not receive training (1) ... 5 or more years ago (5)

Q36 Did you access the HRP training modules or resources on the Fourth R website for online support?

▼ Yes (1) ... No (2)

Q37 What advice would you give someone implementing the HRP Program for the first time?

---

**Q38 Part E: Impact of the Healthy Relationships Plus Program**

Q39 In your opinion, to what extent did participants in the HRP Program...

	Not at all (1)	Not very much (2)	Neutral (3)	Somewhat (4)	Very much (5)
enjoy the program? (1)	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
participate in the group activities? (2)	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
learn how to identify healthy/unhealthy relationships? (3)	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
learn about the connections between relationships and substance use/addiction? (4)	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
learn about the connections between relationships and mental health? (5)	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
learn about the impacts of substance use and abuse? (6)	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
demonstrate understanding of personal boundaries and consent? (7)	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
develop healthy coping strategies? (8)	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
improve strategies for helping a friend with mental health challenges? (9)	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
demonstrate improved communication skills? (10)	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
demonstrate improved critical thinking and problem solving? (11)	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>



demonstrate awareness of outside influences on relationships (i.e. the media, gender stereotypes)? (12)	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
provide support to each other around difficult issues? (13)	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
demonstrate awareness of power and control in relationships and the early warning signs of dating violence? (14)	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
learn strategies for seeking help for themselves or a friend? (15)	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
learn strategies for keeping themselves safe in relationships? (18)	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
learn strategies to keep themselves safe if using substances? (19)	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

**Q40 Part F: School or Organization Involvement in the Healthy Relationships Plus Program**

Q41 Has your organization or school implemented other Fourth R programs in the past?

▼ Yes (1) ... No (2)

Q42 Please complete the following.

	Not at all (1)	Not very much (2)	Neutral (3)	Somewhat (4)	Very much (5)
How important is it to your school/ organization that you use evidence- based programs? (1)	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
How important is it to your provincial government/ ministries that you use evidence-based programs? (2)	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
To what extent are you able to choose the programs/ resources you will implement? (3)	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Are there additional supports in your school/organization for you to implement the HRP Program? (4)	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Did you receive support from an external consultant or other coordinator to implement the HRP Program? (5)	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
To what extent does the HRP Program match your school division or organization's priorities and objectives? (6)	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Is there an identified person at the school division or community level to support the program implementation? (7)	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Are there additional training opportunities at the school division or organization level on relationships, mental health, and substance use/abuse? (8)	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

Have you established new community partnerships as a result of the HRP Program? (9)

Do parents of youth in your program value the HRP Program? (10)

Q43 Are you aware of other evidence-based programs being used in your school or organization?

▼ Yes (1) ... No (2)

Q44 If you are aware of other evidence-based programs that are being used, please list those programs.

---

**Q45 Part G: Facilitator Characteristics**

Q46 Have you delivered structured group programming in the past (other than the HRP Program)?

▼ Yes (1) ... No (2)

Q47 If you have delivered a structured program in the past, please list the program(s).

---

Q48 What is your highest level of education achieved?

Secondary school diploma or equivalent (1)

Post-secondary certificate, diploma, or degree (2)

College, CEGEP, or other non-university certificate or diploma (3)

University certificate or diploma below the bachelor level (4)

University certificate, diploma, or degree at the bachelor level (5)

Master's degree (6)

Doctorate degree (7)

Other, please specify (8) \_\_\_\_\_

Q49 What is your area of education/experience?

Psychology (1)

Sociology (2)

Counselling (3)

Education (4)

Learning supports (5)

Social work (6)

Child and youth work (7)

Other, please specify (8) \_\_\_\_\_

Q50 For how many years have you been working with adolescents in a professional capacity?

▼ Less than 5 (1) ... 16 or more (4)

Q51 Are you:

▼ Male (1) ... Prefer not to say (3)

Q52 Please share any other comments about the Healthy Relationships Plus Program that you may have.

\_\_\_\_\_

## Appendix G: Facilitator Guide

[Introductory script]. Thank you for agreeing to participate in the focus group today. We're interested in collecting your experience and wisdom based on your involvement in this pilot. Typically, our findings from facilitator focus groups are used to make changes and adaptations to existing programming, so please share your honest feelings, positive or negative, that will help enhance the program. Please note that everything you say will be kept confidential and identifying information will not be used in any reports. Does anyone have any questions before we begin?

1. To begin, how did you organize the delivery of the HRP program (i.e., recruitment of youth, where and when was group held)?
2. Overall, what were the biggest successes of the program in your setting? (May follow up with: What went well either about the program or the process?)
3. What challenges did you encounter during the program? (May follow up with: What was difficult either about the program or the process?)
4. Have you noticed any changes in the youth as a result of participation in the HRP?

(May follow up with: Are there any specific examples that stands out in your mind that you would like to share? If you can think of a youth who did well in this group what does it look like?)

5. Did facilitating this group change the way you think about or view the needs of newcomer youth in any way?
6. What recommendations would you have to modify/change the program or the process to meet the needs of newcomer youth?
7. What advice would you give to someone implementing HRP with newcomer youth for the first time?

\*Summarize main points

8. Is my summary of our group's discussion accurate or have I missed any important points?

Final Question

9. Is there anything you didn't get a chance to say that you would like to share or speak about, or is there anything that we should have asked about and didn't?

## Appendix H: Youth Focus Group Guide

[Introductory script]. We are here today to better understand your experiences and thoughts about the HRP program that you recently attended. We will be having a conversation where I have some questions and you can answer them and respond to other students' answers. This is called a focus group. You do not need to answer every question and there are no right or wrong answers. It is important that information shared in this focus group is kept confidential to respect others privacy. This means that your identity (i.e., your name, age) and any other person that you choose to talk about will be kept private, and we will only use the information that you provide for research purposes. Do you have any questions before we begin?

1. What activities or topics did you like most in the HRP?  
Follow-up: Why did you like that activity or topic?
2. What activities or topics did you like least in the HRP?  
Follow up: Why did you not like that activity or topic?  
What could be done to improve that part of the program?
3. What did you learn from participating in the program (i.e., information, skills, strategies)?  
Follow-up: Is there anything you would have liked to learn more about that was not covered in the group?
4. Have you noticed any differences in your life as a result of taking part in the HRP program?  
Follow-up: If yes, what are these differences?
5. Was there anything that made it difficult for you to attend or participate in the program?
6. Would you recommend the HRP program to other teenagers who are new to Canada?  
Follow-up: If so, how would you describe your experience of taking part in the HRP to them?

\*Summarize main points

7. Is my summary of our group's discussion accurate or have I missed any important points?

Final Question

8. Is there anything you didn't get a chance to say that you would like to share or speak about?

# Curriculum Vitae

**Name:** Alexandra Smith

**Post-secondary Education and Degrees:** Ph.D., School & Applied Child Psychology  
Western University  
London, Ontario, Canada  
2018-Present

M.A., Applied Psychology  
Laurentian University  
Sudbury, Ontario, Canada  
2015-2018

Honours B.A., Psychology  
University of Windsor  
Windsor, Ontario, Canada  
2010-2014

**Honours and Awards:** Ontario Graduate Scholarship (OGS)  
2019-2021

Graduated “With Distinction” from University of Windsor  
2014

Deans Honour Roll  
2013-2014

University of Windsor Entrance Scholarship  
2010, 2014

**Related Work Experience** Internship – Psychological Services  
Greater Essex County District School Board (GECDSB)  
2021-Present

Group Facilitator – Healthy Relationships Plus Program  
2018-Present

Research Assistant – Centre for School Mental Health  
Western University  
2018-Present

Doctoral Student Clinician – Child & Youth Development Clinic  
Western University  
2020-2021



Psychometrist – Kaleidoscope Child and Family Care  
2020

Doctoral Student Clinician – GECDSB  
2019-2020

Doctoral Student Clinician – Mary J. Wright Research and  
Education Centre at Merrymount Family Support & Crisis Centre  
2018-2019

Student Clinician/Psychometrist – Cornerstone Family Care  
2017-2018

Teaching Assistant  
Laurentian University  
2016-2017

Research Assistant – Healthy Relationships Lab  
University of Windsor  
2012-2015

### **Publications:**

**Smith, A. C. G.,** & Crooks, C. V. (2022). *Acceptability of a healthy relationships program with newcomer youth: A comparative case study with three newcomer-serving agencies*. Manuscript submitted for publication.

**Smith, A. C. G.,** & Crooks, C. V. (2022). Youth-identified considerations for programming to support newcomers' healthy development: A group concept mapping study. *Child and Youth Care Forum*. <https://doi.org/10.1007/s10566-022-09695-9>

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Crooks, C. V., **Smith, A. C. G.,** Link, N., Orenstein, S., & Hoover, S. (2020). Psychosocial interventions in schools with newcomers: A structured conceptualization of system, design, and individual needs. *Children and Youth Services Review*, 104894. <https://doi.org/10.1016/j.childyouth.2020.104894>

Crooks, C. V., Hoover, S., **Smith, A. C. G.,** (2020). Feasibility trial of the school-based STRONG intervention to promote resilience among newcomer youth. *Psychology in the Schools*. <https://doi.org/10.1002/pits.22366>