Supporting Transition Resilience of Newcomer Groups (STRONG): An Evidence-Informed Intervention to Support Refugee and Immigrant Students

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STRONG

Background and Context
Newcomers to Canada

• Between December 2015 - March 2016, Canada welcomed more than 25,000 newcomers from Syria

• Ontario mobilized quickly to provide a range of settlement services, including language, education and mental health supports

• School Mental Health ASSIST, a provincial implementation support team, was asked to monitor and support the mental health needs of newcomer students
School Mental Health Supports

Monitoring Function
- School Mental Health Newcomer Resource Team
- Monthly “Newcomer Rounds”
- Cross-Ministry Planning Tables
- Briefings and Stakeholder Workshops

Support Function
- School Mental Health Newcomer Advisory Network
- Resource Development to address identified gaps (e.g., Infosheet, workshop materials, video)
- Access to on-line refugee mental health course through CAMH
- Special Interest Group series on Immigrant, Refugee, Ethnocultural and Racialized students
First Messages....

Good settlement leads to good mental health
Take a strengths-based approach
Know the signs of difficulty, and local pathways to care

Necessary but not sufficient...

- Students with refugee backgrounds were beginning to exhibit signs of trauma
- School Mental Health professionals requested specialized programming to support the unique needs of these students
- A partnership with the Center for School Mental Health was initiated
Context in
Toronto Catholic District School Board

• Nov. 2015- June 2016 : Preparing for a warm welcome of Syrian Families and students. Creation of "pop-up" classrooms. Building resources with SMH ASSIST, and reaching out to the community

• 2016-17 : Building our capacity with a Trauma Informed approach, development of itinerant "Newcomer MH Support Team". Began to notice students struggling

• Feb. 2017 : Reaching out to SMH ASSIST for a Tier 2 strategy to support those who are struggling... STRONG was hatched!
The arrival of Syrian newcomers in 2015 allowed us to rethink how we welcome students from around the world and prepare to support them should need arise.

Training focused on how to settle well was provided for: We Welcome the World staff and English language teachers. We also worked with these staff on personal resiliency.

Trauma informed care training was provided for front line mental health professionals.

An Arabic speaking Social Worker was hired to support schools with large numbers of Arabic speaking newcomers.
STRONG Background and Development
Partnership
“Schools provide an important opportunity to intervene with refugee children as a setting of utmost importance where they spend a great deal of time and encounter acculturative struggles. Placing interventions in school can help reduce stigma, and also provide an opportunity to intervene with the school setting itself, having an impact on its ecology. For example, affecting a school’s norms, policies, and attitudes with respect to immigrant and refugee children can help support individualized interventions for refugee children. “

“Schools could provide an ideal setting to implement interventions to address the mental health needs of refugee children... In disrupted environments, schools are often one of the earlier institutions to be introduced... Schools can facilitate early identification and provide interventions to maximise cognitive, emotional and social development.”

Multi-tiered system of supports for newcomer students

**WELcome**: School Staff and Student Peer Guidelines and Training for Welcoming and Supporting all Refugee Students (Tier 1)

**COpe**: Coping Skills Intervention for Students to Support Resilience when Transitioning to New School (Tier 2)

**MEnd**: Mental Health Intervention for Students Exhibiting Distress related to Refugee Experience and Transition (Tier 3)
WELCOME – WELcome (Tier 1)

- Policy and practice guidance and education for all school administrators, educators and peer students to ensure that all newcomers in school are welcomed and supported.

- Activities to engage, foster mutual interests, and promote friendship between Canadian and newcomer students (e.g., clubs of mutual interest)

- Education:
  - information about the refugee/newcomer experience, including the strengths and challenges they may bring to the school environment.
  - specific strategies administrators, educators and peer students can employ to make students feel welcomed, supported, and empowered to contribute to the school community.
Strategies for Welcoming Newcomer Students

Recommendations
1. Create Welcoming School Environments
2. Create Welcoming Classroom Environments
3. Notice Signs of Adjustment Difficulties
4. Support Newcomer Students with Signs of Adjustment Difficulty

SOURCE: SMH-ASSIST Info-Sheet for Welcoming Syrian Newcomer Students & Families to School
Create Welcoming School Environments

- Take time to learn about newcomer’s experiences (e.g., educate yourself)
- Establish a school reception team to assist with orientation
- Dedicate ample time for intake interviews with parents/children to learn hopes, strengths, needs
- Post signs in common languages
- Adopt a learning stance and avoid making assumptions about a family’s prior experiences

SOURCE: SMH-ASSIST Info-Sheet for Welcoming Syrian Newcomer Students & Families to School
Create Welcoming Classrooms

- Greet students individually by name daily and with a smile
- Ensure classroom environment reflects the linguistic and cultural diversity of students.
- Build relaxation breaks into the day, particularly during transitions
- Share information with the class to help students understand and welcome newcomers
- Pair each newcomer with a peer helper to help with orientation and routines

SOURCE: SMH-ASSIST Info-Sheet for Welcoming Syrian Newcomer Students & Families to School
YOUTH VOICE: Things that can help

Provide guidance for Canadian-born students on refugee experience & how students can be welcoming

- Invite us to hang out and include us in activities
- Teach us to use the lockers
- Teach us the rules of sports.
- Be kind and encouraging, help us to speak up!
- Teach us about safety traveling in our neighborhoods and help with way-finding.
- Show us how to shop.
- Avoid and shut down racist jokes
- Help us understand how college and high school are different!
- Help us with translations.
- Help us out if we are in trouble.
- I want to be able to have fun; when I look down or upset make me laugh!

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WELCOME – COpe (Tier 2)

• Identifying and Building Upon Strengths and Supports
• Expressing and Regulating Emotions
• Engaging in Pleasurable Activities
• Maintaining Cultural Identity
Notice & Support Newcomer Students with Signs of Adjustment Difficulty

- Foster calm predictable environment
- Use a soothing tone in interactions with students
- Offer ways to manage emotions and behavior in the classroom (e.g., quiet spaces, relaxation)
- Model & help students understand problem-solving, conflict resolution
- Set limits and help students comply with requests

SOURCE: SMH-ASSIST Info-Sheet for Welcoming Syrian Newcomer Students & Families to School
WELCOME – MEnd (Tier 3)

• Normalizing Distress
• Cognitive Behavioral Intervention Components
  – Relaxation
  – Behavioral Activation
  – Cognitive Coping
  – Goal Setting
  – Exposure
  – Problem Solving
• Journey Narrative
What to do when students need more?
Multi-tiered system of supports for newcomer students

WELcome: School Staff and Student Peer Guidelines and Training for Welcoming and Supporting all Refugee Students (Tier 1)

COpe: Coping Skills Intervention for Students to Support Resilience when Transitioning to New School (Tier 2)

MEnd: Mental Health Intervention for Students Exhibiting Distress related to Refugee Experience and Transition (Tier 3)
Empirical Studies

• Several studies of refugee/newcomer experiences – strengths and challenges

• Very few empirical studies of school-based mental health supports and interventions for refugees
  – Those that do exist rely on cognitive-behavioral strategies to promote resilience and improved functioning

• Strong evidence-base for:
  – school-based trauma interventions (e.g., Cognitive Behavioral Intervention for Trauma in Schools [CBITS], Bounce Back)
  – school-based resilience interventions
Supporting Transition Resilience of Newcomer Groups

• Collaborative, iterative development process
• Based on empirical studies:
  – Trauma/Stress
  – Resilience
  – Positive Youth Development
  – Newcomer/refugee experience
• Designed for implementation in schools
Supporting Transition Resilience of Newcomer Groups

• Primary and Secondary interventions
  – 10 student group sessions
  – 1 individual Journey Narrative session
  – 1 parent group session
  – 1 teacher group session
Acknowledgements

Strengthening Transition Resilience of Newcomer Groups (STRONG) was co-developed and reviewed by several experts in the fields of education and mental health, with specific expertise in school mental health, adversity and trauma, refugee mental health, and resilience.

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REFUGEE AND NEWCOMER EXPERIENCES
Why a program for newcomer students?

Unique aspects of stress and trauma experienced by refugee children & families

- Multiple sources of trauma
  - Preflight
  - Flight
  - Resettlement
- Loss of choice and control
- Chronic and cumulative stressors
Refugee Crisis

~6.6 million people displaced from Syria with 4 million new refugees fleeing the country since 2011 -UNHCR Global Trend Data, 2015

51% of all refugees are children & 98,000 of these children were alone -UNHCR Global Trend Data, 2015

65.3 million forcibly displaced people worldwide
21.3 million Refugees
10 million Stateless people
107,100 Refugees resettled in 2015

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Resettlement is only available to the 1% of refugees considered most vulnerable. Decision of where to resettle is made by U.N. High Commission for Refugees, followed by the host country’s own agencies for vetting.

– Similar multi-agency vetting process for US and Canada

**Canada**
- Canada Border Services Agency
- Canadian Security Intelligence Service
- Royal Canadian Mounted Police
- Interpol

**United States**
- US Citizenship & Immigration Services
- National Counterterrorism Center
- FBI’s Terrorism Screening Center
- Department of Homeland Security
- State Department
Trauma Experience for Refugees

Unique aspects of refugee/immigrant trauma

- Multiple sources of trauma
  - Preflight
  - Flight
  - Resettlement
- Loss of choice and control
- Chronic and cumulative stressors

The degree to which individuals and families experience distress vary based on:

- Experiences before they arrived
- Experiences upon arrival
- Coping skills and resiliency
- Hope for the future
Resettlement Trauma
- Community violence
- Acculturation stress
- Financial hardship
- Isolation & discrimination
- Lack of access to resources
- Separation from family
- Survivor’s guilt
- Fear of deportation

Flight Trauma
- Violence
- Separation from family
- & community
- Mistreatment by authorities
- Hazardous travel, hunger, thirst
- Sexual assault

Pre-Flight Trauma
- Violence
- War, persecution
- Poverty & starvation
- Torture
- Physical illness & lack of medical care
- Forced labor
- Sexual assault
- Loss of loved ones
- Disrupted/limited access to education
Immigration Impact on Family Dynamics

• Parents & children often undergo separation during the flight to a new country

• Children acculturate & learn English faster than their adults

• Parent/caregiver exposure to trauma that impacts their parenting

• Possible shifts in family/gender roles
  – Father formerly may have been breadwinner and now is primary caretaker

• Parenting strategies (e.g., disciplinary strategies such as corporal punishment) common in country of origin may not be acceptable in Canada
Mental Health Disparities for Refugee Children

High prevalence of PTSD, depression, and suicide among resettled refugee children

• Substantial barriers for refugees to accessing mental health care
  – Language barriers
  – Primacy of meeting basic needs
  – Stigma
  – Lack of familiarity with mental health care
Avoiding a Deficit-Focused Response

People assume we are weak.

A lot of people feel sorry for us.

People pity us, and it makes it difficult when you start believing/internalizing that.

People think I’m afraid.
Resilience & Strength

• Positive capacity of people to cope with stress and life problems.

• Not everyone exposed to adverse experiences is traumatized

• We are hard-wired to learn through social reinforcement and relationships

• **Assets and resources to promote resilience:**
  - Strong bonds and connectedness with parents and caring adults
  - Positive experiences in the community (school, church, neighborhood)
  - Positive cultural identity
  - Personal qualities, coping resources, courage, leadership

I don’t speak English, but I speak 6 other languages.
MANUAL OVERVIEW
Sessions 1-5

• Session 1: My Inside Strengths and Outside Supports
• Session 2: Understanding the Stress Response
• Session 3: Normalizing Common Reactions to Stress and Identifying Feelings
• Session 4: Measuring and Managing Feelings
• Session 5: Using Helpful Thoughts
Sessions 6-10, Individual, Parent/Teacher

- Session 6: Steps to Success
- Session 7: Problem-Solving
- Session 8: Journey Narrative – Part I
- Session 9: Journey Narrative – Part 2
- Session 10: Graduation
- Individual Session (Journey Narrative Preparation)
- Individual Meeting with Parents/Caregivers
- Parent Session
- Teacher Session
MANUAL WALK-THROUGH
SESSION 1: My Inside Strengths and Outside Supports

Outline
A. Introduction and Warm-up Activity
B. “Mapping my Inside Strengths” Exercise
C. “Mapping my Outside Supports” Exercise
D. Deep Breathing Exercise
E. Assign Practice Activity

Objectives
1. Students will learn and practice the rules of confidentiality and program expectations/rules.
2. Students will be able to identify inside strengths and outside supports.
3. Students will learn a deep breathing relaxation exercise.

Materials
- Mapping My Inside Strengths
- Mapping My Outside Supports
- My Deep Breathing Practice Activity

Each session begins with a title page that has an outline, objectives, and materials.
Session Components

Each session has section headers, explanation of activities, and guided scripts. Scripts are italicized and unspoken parts are in [block brackets].
Name Introduction¹, ²

**Name Game:** Introduce yourself again and have students introduce themselves to the group.

Before we go any further, I would like to get to know your names. I would like you to choose an activity you enjoy and add that to your name as you introduce yourself.

The facilitator should give an example. For example, if the facilitator's name is Molly they could say something like this:

For example, I am Molly and I am a good artist. Or, I am Molly and I am proud of my soccer playing.

¹ **TIP:** When students are introducing themselves, make sure to try to pronounce their name correctly. If you need clarification on the pronunciation, ask the student to repeat their name or ask them after the session.

² **TIP:** If a student cannot identify something they are good at or proud of, encourage them to think of something by saying "What would others say you are good at or is good about you?"
Mapping My Inside Strengths (example)

Using the words at listed at the bottom of the page as a guide, complete the phrases inside the figure.

One of the traits I am most proud of is... 

One thing I am good at is...-Being a good friend
As a student, I am... 
As a friend, I am...-a good listener
Around others, I am the one who is... cheerful

Patient  Good Listener  Funny  Loyal  Hardworking
Kind  Honest  Good Friend  Calm  Thoughtful
Good at a Sport  Athletic  Fun  Helpful  Caring
Generous  Brave  Confident  Cheerful  Polite
Problem-Solver  Sensitive  Smart  Curious  Enthusiastic
Take-Home Practice Activities

**Deep Breathing Practice Activity**

*Using the words in the boxes, practice deep breathing.*

Take a deep breath in... and a deep breath out. Deep breath in... deep breath out.

Now take even 8-10 OEF breaths. Put one hand on your stomach and one hand on your chest. Imagine you are getting ready to blow up a balloon. Breathe in and count 1-2-3 slowly. Now imagine you are blowing. Add the air out of a balloon. Count slowly... 1-2-3.

Repeat three times!

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**Deep Breathing Practice Activity**

Practice deep breathing 3 times in the next week. Use the table below to track your practice.

<table>
<thead>
<tr>
<th>Day of week</th>
<th>Where did you practice?</th>
<th>How did it go?</th>
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<tbody>
<tr>
<td>Monday</td>
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# Child Engagement and Functioning

<table>
<thead>
<tr>
<th>Child Name</th>
<th>Engagement Rating (1-5)</th>
<th>Practice Rating (1-3)</th>
<th>Clinical Rating (1-5)</th>
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<tbody>
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**Engagement Ratings:**

1. Refused to participate in the activities.
2. Did not contribute to discussions but went through the motions of activities. Child was co-operative but it was difficult to determine their level of understanding and insight due to minimal participation.
3. Minimal contributions to discussions, but contributions during activities were on topic.
4. Verbal contribution to discussions and participation in activities clearly showed an understanding of the topic.
5. Several notable contributions to the group discussion and participation in activities that showed an understanding of the topic. Child also showed personal insight, meaning they related the topic to their own life in some way.

**Practice Ratings:**

1. Did not complete / practice assigned activity.
2. Somewhat completed / practiced assigned activity.
3. Practiced / completed assigned activity.

**Clinical Ratings:**

1. Demonstrating signs of distress
2. Appears flat or sad but not overly distressed
3. Neutral affect
4. Some positive affect
5. Positive affect and signs of optimism / hopefulness

- Child Names
- Engagement Ratings
- Practice Ratings
- Clinical Ratings
Materials for Every Session

- List of expectations
- Feeling Thermometer
- Thoughts-Feelings-Actions (T-F-A) Triangle
STRONG Evaluation
Evaluation Purpose

- **Assessed feasibility:**
  - Acceptability
  - Implementation
  - Practicality/Integration
  - Adaption
  - Perceived impact

- Documented broader lessons learned
Training Feedback

• N=16
• Knowledge and self-efficacy significantly increased
• 94% felt prepared to implement STRONG

Valuable aspects:
• Specific aspects (i.e. activities, trainers, etc.)
• General program/materials
• Narrative/Role play
• Knowledge/learning skills
• Networking
• Confidence

Implementation concerns:
• Timeline
• Support
• Finding participants
• Language barriers
• Materials
Implementation Challenges

• Time frames difficult to meet

• External influences

• Students’ understanding of concepts
Impacts: Connecting Youth to Each Other

“...the networking and the support they were giving to each other, and connections even though they had been in some of the same classes, like- but they came to be friends and when they come in they’d say oh so and so has a test, he's texting us, he's going to come later. Like they were making those connections at the side...”

- Secondary Clinician
Impacts: Connecting Youth to Clinicians

“And then for me, I didn't realize the impact we were having on them in terms of our relationship with them and theirs with ours, until they started to say certain things and you know invite us to come over to their home and I was like oh like they are feeling connected to us as well because I was watching it happen amongst them but I hadn't really realized the impact that we were also having.” – Secondary clinician
“I think one of the things, she did really start I think to talk about accessing outside support, she really did begin to really guidance from this teacher and that teacher, and this club, and not the recreational ones, but like the mountain club.” – Secondary clinician
Impacts: New Skills

“The idea of relaxation, I think that really was the number one strategy that they continuously used and found it very helpful. They practiced with their families. That was really great...” - Secondary clinician
“I think sharing their journeys, individually and then with the group was really impactful. They all spoke about that...”

– Secondary clinician
Impacts: More Positive Self-Concept

“So I think it kind of gave them some insight into their journey and what a challenge it was. But look I survived this, and how brave they are in terms of being able to manage all of the challenges that they've had because they've had a lot of challenges in their journey.” -Secondary clinician
Impacts: Better Overall Functioning

“One of my students, I noticed from when she first came here...she kind of- she just physically looked sad, and down, and then throughout the group and towards the end, she really shared that this never happened in Chicago or even back home...And she said I was- I’ve been to so many different places. I wasn’t expecting to make connections. I wasn’t expecting people to care about me. I wasn’t expecting any of this... So even just her well-being and her mindset from day one to the end of school was a complete shift and there was hope for her.” - Secondary clinician
Benefits for Clinicians

• Professional benefits:
  – Improved confidence to help clients develop and process personal narratives
  – Improved confidence to use CBT strategies
  – Learned new strategies to support stressed or traumatized children and youth
  – Getting to know students more intimately
  – Pairing up with a colleague

• Personal benefits:
  – Connecting with newcomer communities and learning about their cultures
  – Hearing student’s migration stories
  – Learning about newcomers’ resilience
Challenges and Successes on the Ground!
Barriers: Maureen & Patricia

• Timing of the training was late in the school year causing challenges for clinicians and families.
• Clinicians identified that large group sizes (more than 6) was difficult to navigate.
• Translation of the resources and interpreter services were a bit tricky and can be costly to manage.
• Although there were bumps in the road there were no firm barriers. The determination to provide service for these students allowed us to overcome them.
Successes: Maureen & Patricia

• Students and parents welcomed the opportunity for support at school, they were surprised that this help was available.
• Students made friends and engaged in extra curricular activities that they would not have otherwise.
• Clinicians were pleased to learn a new skill and implement it with a new population.
• School staff recognized that STRONG was not a simple social skills group. This was deeper work for a deeper reason.
Future Directions

• Clear need for a resilience-focused program for newcomer students

• STRONG program was an excellent fit

• Larger pilot with adjustments to manual

Full reports available on Centre for School Mental Health (CSMH) – Western University website:
https://www.csmh.uwo.ca/research/strong.html
Questions