

INCLUSIVE DIGITAL MENTAL HEALTH FOR YOUTH

Summary of a knowledge exchange event

November 6, 2023 @ Dalhousie University

About this event

This event was designed to support dialogue about equity, diversity and inclusion (EDI) in digital mental health research and services for youth.

Who attended?

Attendees had a range of experiences with mental health and addictions. They often had experience with multiple roles, bringing more than one perspective to the discussions. Several people also self-identified as belonging to equity-denied groups.



Winning pitch!

Tamar Gazit

Undergraduate student, Psychology

Paraprofessional coach- and telehealth delivered written exposure therapy for teen posttraumatic stress disorder

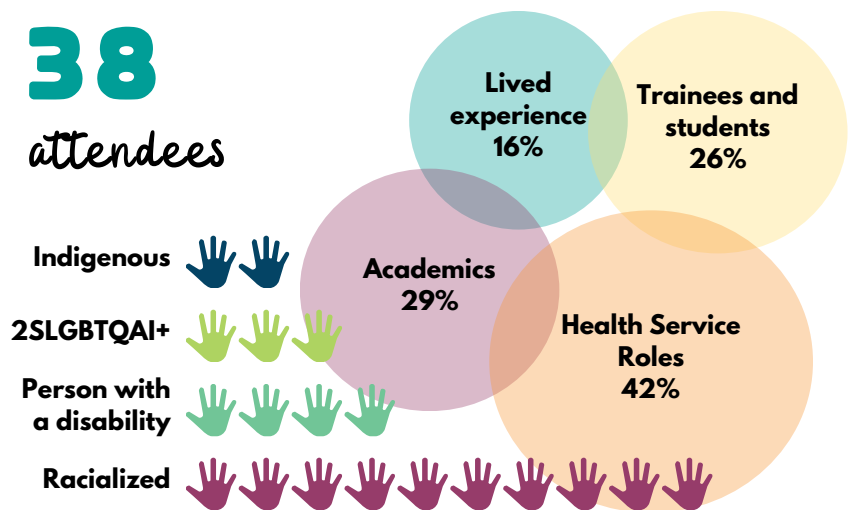
What we did, together

The highly-interactive three-hour event included:

- ✓ An Indigenous knowledge sharing experience
- ✓ A keynote address from Dr. Rebecca Pillai Riddell
- ✓ A trainee pitch competition
- ✓ Small and large group discussions
- ✓ A panel discussion

38

attendees



Trainee pitch event

Five trainees from Dalhousie University had one minute each to pitch their projects, highlighting EDI considerations. Attendees voted for their favourite pitch.

Runners up

Bilikis Banire, PhD Student, Computer Science
Personalized interventions for Attention Bias Modification Training

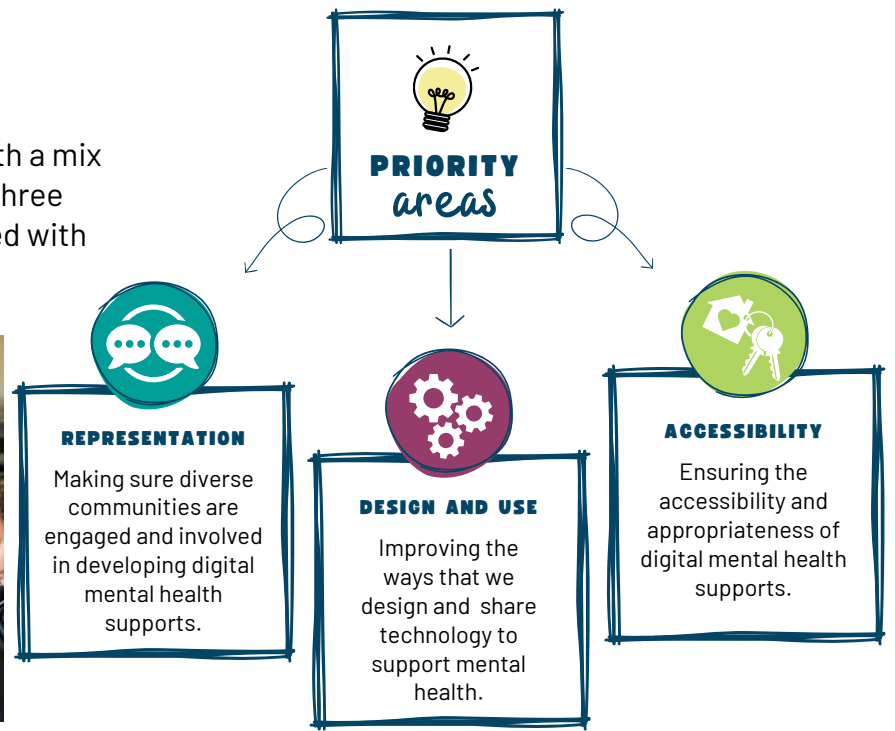
Mya Dockrill, PhD Student, Clinical Psychology
Impact of diversity on effectiveness of eHealth treatments for sleep difficulties in children




Alzena Ilie, PhD Student, Clinical Psychology
Addressing the sleep health of university students in Nova Scotia

Gloria Obuobi-Donker, PhD Candidate, Psychiatry
Text messaging program for patients accessing psychiatric care

Group discussions

Attendees were assigned to small groups, with a mix of perspectives. Through these discussions three priority areas were identified, each associated with interrelated challenges and actions.



Priority Areas	Challenges	Actions
	<ul style="list-style-type: none"> Digital mental health services perpetuating racism and white-colonial normativity Assumptions about “voice” during digital mental health community engagement Missing EDI measurement and evidence-base 	<ul style="list-style-type: none"> Create spaces and places to begin partnerships with equity-deserving communities Apply trauma informed lens to both health research AND tech development teams Create stronger policies around EDI that support accountability Ensure promotion is co-created and led by diverse youth Enact critical allyship* across research, policy and practice
	<ul style="list-style-type: none"> Lack of cultural humility in digital mental health research Lack of community-co-created and youth relevant digital mental health service promotion Disconnection and duplication of effort Digital design that is not culturally informed or youth-friendly Lag in getting tech out to the public Funding structures that reward already privileged teams 	<ul style="list-style-type: none"> Fund community innovators not just senior researchers Work together at local, regional, national and global levels.
	<ul style="list-style-type: none"> Unequal access to fundamental tools for participating in a digital society Tension between healthy online and offline lives Gatekeeping that disempowers diverse youth 	<ul style="list-style-type: none"> Build access to tech infrastructure for all Invest in supports for continuous digital skill upgrading at all levels

*Here, critical allyship means undertaking disruptive actions to redress entrenched colonial, systemic and structural inequities in youth digital health service, education, policy and research spaces.



Panel Discussion

The conversation focused on challenges, successes, and lessons learned about diversity in digital mental health services.

Take aways

- Working across and beyond disciplinary boundaries is necessary for equitable digital health solutions but it will take time to build new shared language.
- Leaders need to be curious! Don't shy away from learning about new or unfamiliar technologies and ways they might address inequities.
- Too often adult assumptions about what youth want guide digital health policy.
- Academia needs to combine technology development with mental health training.
- Value and integrate diverse knowledge, particularly non-Western ways of knowing, into digital mental health service design.



Sahil Chawla

Undergraduate student, Dalhousie University
Student Ambassador, Shiftkey Labs



Mya Dockrill

PhD student, Dalhousie University
DIVERT Mental Health Fellow



Dr. Jill Chorney

Advanced Practice Lead in Behaviour Change, IWK Health
Associate Professor, Dalhousie University



Dr. Rebecca Pillai Riddell

Professor, York University
Principal Investigator, DIVERT

Evaluation at a glance...

50%

of attendees completed the post-event survey

100%

connected with people they otherwise would not have met.

95%

have a greater understanding of research gaps.

90%

felt the event was highly relevant to their work, training and/or interests.

"The table grouping was like magic, providing me with insights into existing digital tools from various angles. This experience allowed me to uncover numerous research avenues that have the potential to enhance our understanding and advance digital tools for mental health to a new level."

- Attendee

What's next?

The experience hosting the event and the priority areas identified through these discussions will inform a series of similar events that DIVERT and partners are hosting across Canada in 2024. These collective efforts aim to nurture cross-sector collaboration, create training infrastructure, and connect industry and academic partners with communities.

Learn more: <https://mssu.ca/news/divert-ns/>

Event photos: Ryan Wilson, IWK Health

Publication date: April 2024

This event was supported by CIHR grants #42488 and #180215.

Co-hosted by:

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