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How young people are empowered to have greater control over their Mental Health

Date requested: 22nd January 2018
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SUMMARY/SYNTHESIS
Empowerment is as much about young people ‘finding themselves’ and being provided a safe and supportive environment where they can develop and grow as people as it is about plugging them into larger democratic or organisational frameworks (1)

Empowerment is not the same as simply being offered an opportunity to speak on your own or others’ behalves; empowerment is not simply a matter of being encouraged to ‘have your say’. Young people, especially those who have had difficult or challenging life events or conditions, require a mixture of support, encouragement, feedback and validation to become comfortable in their own capacity to take control of situations. (1)

Empowerment mediates the relationship between psychological processes and mental health, well-being, and recovery in young people. (4)

Kranke (25) identified 4 themes that enable a young person with a mental illness to become empowered:
1. Supportive family/friends
2. School success
3. Positive outlook
4. Involvement in treatment

In 2013, a systematic review found insufficient evidence for the impact of Youth Empowerment programmes (39)

In Sweden, a gender sensitive stress management intervention created a safe and exploratory space for gendered collective understanding and embodied empowerment further indicates the need to develop gender-sensitive interventions to reduce individualisation of health problems and instead encourage spaces for collective support, action, and change (40)

Art has been shown to be an empowering and engaging entity with numerous benefits to vulnerable populations, including the homeless persons and young adults.(45)

Empowerment is a process which leads to an enhanced sense of self-competency, community influence, and skills development (Perkins & Zimmerman, 1995). Youth support services can facilitate empowerment by providing services that enhance self-competency and functioning in multiple ways. Youth in foster care depend on the child welfare agencies caring for them for the provision of such services, which focus on enhancing their resilience (52) This paper goes on to list guidelines for youth empowerment in foster care.

Models and interventions used for Empowerment

COPE (Creating Opportunities for Personal Empowerment) is discussed in (17), (32), (38), (50)

The Empower Resilience intervention holds promise as an opportunity to reconsider the negative effects of the trauma of the past and build on strengths to develop a preferred future (21)

Empower U - Sixth graders are at a prime age to modify behaviors and beliefs regarding exercise, nutrition, body image, and smoking. Empower U was created to change knowledge, beliefs, and behaviors regarding these topics (36)

MasterMind: Empower Yourself With Mental Health. MasterMind provides students with a "toolbox for mental health" by creating a safe environment for discussion of mental health and emotionally charged topics, by increasing student knowledge of mental health issues, and by providing tools to develop and maintain mental health. (58)

MH:2K is a powerful new model for engaging young people in conversations about mental health in their local area. It empowers 14-25 year olds to:
• Identify the mental health issues that they see as most important;
• Engage their peers in discussing and exploring these topics;
• Work with key local decision-makers and researchers to make recommendations for change. (5)

The REbel peer education model appears to be effective at reducing eating disorder risk factors and increasing empowerment. Participants reported reductions in body checking and internalization of the thin ideal (2), (3)

SEYLE (Saving and Empowering Young Lives in Europe) study is discussed in (9), (22), (35), (43)

Youth Action Research for Prevention (YARP), a federally funded research and demonstration intervention, utilizes youth empowerment as the cornerstone of a multi-level intervention designed to reduce and/or delay onset of drug and sex risk, while increasing individual and collective efficacy and educational expectations (47)
How does mental health-informed youth work empower young people to make change happen? 2018. Ref Type: Internet Communication

Abstract: Young people are often impatient for change; this is as true in relation to services that support young people with mental health needs as it is in other areas. Many organisations talk about their vital work in empowering young people, but just how can this be translated into practical actions?

Right Here was a five-year national programme launched in 2009 by Paul Hamlyn Foundation and the Mental Health Foundation to explore new ways of working with young people to develop mental health and wellbeing activities. The programme funded four local partnerships – in Brighton and Hove, Fermanagh, the London Borough of Newham, and Sheffield – for five years to co-produce new mental health and wellbeing services and projects with young people. One of the objectives of the programme was to make it possible for young people to influence the shape, form and activities of each regional partnership and the landscape of young people’s service provision as a whole.


Abstract: Previously validated eating disorder (ED) prevention programs utilize either a targeted or universal approach. While both approaches have shown to be efficacious, implementing either style of program within a school setting remains a challenge. The current study describes an enhanced version of REbeL, a module based, continuous ED prevention program which utilizes a self-selection model of prevention in high school settings. The purpose of this study was to determine if an enhanced empowerment model of REbeL could increase feelings of empowerment and reduce eating disorder risk. We also aimed to assess the feasibility and acceptability of the intervention. High school peer-educators self-selected into the semi-manualized dissonance based intervention. Following feedback from a pilot trial, enhanced peer-led group activities, designed to critique the thin ideal and designed to empower macro changes in societal structures that emphasize the thin ideal, were added. The study (N=83) indicates that the program appears to be effective at reducing eating disorder risk factors and increasing empowerment. Participants reported reductions in body checking and internalization of the thin ideal.


Abstract: Dissonance-based eating disorder prevention leads to decreases in risk factors for these disorders. Although controlled trials have demonstrated that targeted, manualized programs reduce eating disorder risk, concerns regarding implementation and dissemination remain. A primary concern is the difficulty in adapting programs for a high school setting for populations at highest risk: adolescents. This paper describes the REbeL Peer Education model and assesses the initial pilot trials of the intervention. The program is novel in that it utilizes a voluntary, self-selection model that is sustainable in a high school setting, and focuses on empowerment and effective cognitive dissonance based prevention activities. High school peer-educators self-selected into the semi-manualized dissonance based intervention. Group activities were peer led, designed to critique the thin ideal, and designed to empower macro (school and larger community wide) changes in The pilot trial (N=47) assess the effectiveness and feasibility of the intervention. Results of the initial pilot study revealed preliminary support for the feasibility of the program, increases in feelings of empowerment, and decreases in eating disorder cognitions and behaviors with moderate to large effect sizes. Feedback from participants indicated that the intervention was enjoyable, educational, and empowering. This study is the first to adapt dissonance-based prevention models to a semi-manualized, peer-led, prevention program integrated into high school settings.
Youth value self-care for emotional health, but we need better understanding of how to help them look after their emotional health. Participatory research is relevant, since meaningful engagement with youth via participatory research enhances the validity and relevance of


Abstract: Objectives: There is consensus that empowerment is key to recovery from mental health problems, enabling a person to take charge of their life and make informed choices and decisions about their life. However, little is known about the mechanisms through which empowerment affects mental health in young people. The current study involved young people aged 16-29 years and examined empowerment as a potential mediator of the relationship between psychological factors (psychosocial, cognition, coping, and control) and mental health, well-being, and recovery from personal problems. Methods: A cross-sectional, Internet-based questionnaire study recruited 423 young people aged between 16 and 29 attending universities in England (n = 336) and Ireland (n = 87). Psychological factors, mental well-being, empowerment, and recovery from personal problems were measured using self-report measures. Results: Mediation analysis in both the single and one overarching mediator models revealed that empowerment mediates the relationship between psychological factors (psychosocial, self-efficacy, thinking style, coping, and control) and mental health, well-being, and recovery from general life problems. Conclusions: This study demonstrates the importance of empowerment, showing that it mediates the relationship between psychological processes and mental health, well-being, and recovery in young people. Clinical implications for working with young people within mental health services, and facilitating their empowerment are discussed. (PsycINFO Database Record (c) 2017 APA, all rights reserved) (Source: journal abstract)


Abstract: Reports on the findings and recommendations from a consultation with over 600 young people in Oldham, to gather their views on mental health and wellbeing. The project, carried out in partnership with Involve and Leaders Unlocked, used the MH:2K model to empower 14-25 year olds to identify the mental health issues they saw as most important, engage their peers in discussing these topics, and work with key local decision-makers and researchers to make recommendations for change. The information was collected by young citizen researchers at 42 Roadshow events, attended by 598 young people. The recommendations focus on improving the mental health and emotional wellbeing of young people in Oldham in five areas: families and relationships; environment and culture of schools; stigma; professional practice; and self-harm. The report also outlines six stages of the MH:2K’s model and summarises the impacts of the project on its participants, public sector decision-making, mental health research and public engagement practice. An evaluation report is also available


Abstract: Accessible summary What is known on this subject? Young people’s mental health is a concern to people around the world. Good emotional health promotes mental health and protects against mental illness, but we need to know more about how to help young people look after their emotional health. We are learning that research is better if the public are involved in it, including children and young people. Therefore, we need to listen carefully to what young people have to say. In this paper, we describe some research that involved young people from start to finish. We were asking what kind of emotional health support would be useful to them. What this paper adds to existing knowledge? We developed a useful way to involve young people in research so their voice can be heard. Young people like to use the Internet to find emotional health support and information, but need to know which web sites they can trust. What are the implications for practice? Our method of bringing young people together to tell us their views was successful. It is important to explore ways to help young people judge the quality of emotional health web sites. Introduction Youth mental health is a global concern. Emotional health promotes mental health and protects against mental illness. Youth value self-care for emotional health, but we need better understanding of how to help them look after their emotional health. Participatory research is relevant, since meaningful engagement with youth via participatory research enhances the validity and relevance of
research findings and supports young people's rights to involvement in decisions that concern them. Aim We aimed to develop a participatory approach for involving youth in research about their emotional health support preferences. Method Our team included a young expert-by-experience. We developed a qualitative, participatory research design. Eleven youth (16-18 years) participated in focus groups, followed immediately by a nominal group exercise in which they analysed the data, thus enhancing methodological rigour. Results This process highlighted youth perspectives on self-care strategies for emotional health. Discussion and implications for practice Our simple participatory research approach generated trustworthy and credible findings, which accurately reflect youth perspectives and are consistent with the literature, endorsing our method. Young people said that they want reassurances of quality and safety when accessing digital mental health resources. These findings can inform future development of youth-oriented digital mental health resources.

British Nursing Index; Hospital Premium Collection


Abstract: Introduction Young people with eating disorders are at risk of harm to their social, emotional and physical development and life chances. Although they can be reluctant to seek help, they may access social media for information, advice or support. The relationship between social media and youth well-being is an emotive subject, but not clearly understood. This qualitative study aimed to explore how young people used a youth-orientated, moderated, online, eating disorders discussion forum, run by an eating disorders charity. Methods We applied a netnographic approach involving downloading and thematically analysing over 400 messages posted August-November 2012. Results Data analysis generated five themes: Taking on the role of mentor; the online discussion forum as a safe space; Friendship within the online forum; Flexible help; and Peer support for recovery and relapse prevention. Forum moderation may have influenced the forum culture. Discussion Our findings are consistent with literature about youth preferences for mental health self-care support. A young person's decision to use this discussion forum can be construed as proactive self-care. A moderated online discussion forum can make a positive contribution to support for youth with eating disorders, countering negative media perceptions of online groups. Conclusion This study adds to knowledge about how young people access support via social media. Online discussion forums can be safe and acceptable spaces for youth to access help. Further research could provide insights into the impact of forum moderation.


Abstract: Approximately three quarters of all major mental disorders begin in adolescence. Finding ways to buffer against stress, access social support and connection and flexibly draw upon a range of coping mechanisms are vital strategies that young people can use to promote mental health and wellbeing and to navigate this turbulent life transition successfully. Within Australia, like other parts of the world such as the UK and the USA, it is a sad reality that when young people do become distressed they are not self-caring or supporting others effectively, and not seeking or receiving appropriate help. In order to respond proactively to this issue, a nurse-initiated mental health promotion program was developed. It is termed, iCARE, which stands for Creating Awareness, Resilience and Enhanced Mental Health. The aim of this paper is to discuss the underpinning educational theory that assists in developing in young people a sense of belonging, empathy, self-care and resilience, and why the strategies chosen to engage young people are likely to be effective.


Abstract: In this cross-sectional study, physical activity, sport participation and associations with well-being, anxiety and depressive symptoms were examined in a large representative
A school-based survey was completed by 11,110 adolescents from ten European countries who took part in the SEYLE (Saving and Empowering Young Lives in Europe) study. The questionnaire included items assessing physical activity, sport participation and validated instruments assessing well-being (WHO-5), depressive symptoms (BDI-II) and anxiety (SAS). Multi-level mixed effects linear regression was used to examine associations between physical activity/sport participation and mental health measures. A minority of the sample (17.9 % of boys and 10.7 % of girls; p < 0.0005) reported sufficient activity based on WHO guidelines (60 min + daily). The mean number of days of at least 60 min of moderate-to-vigorous activity in the past 2 weeks was 7.5 +/- 4.4 among boys and 5.9 days +/- 4.3 among girls. Frequency of activity was positively correlated with well-being and negatively correlated with both anxiety and depressive symptoms, up to a threshold of moderate frequency of activity. In a multi-level mixed effects model more frequent physical activity and participation in sport were both found to independently contribute to greater well-being and lower levels of anxiety and depressive symptoms in both sexes. Increasing activity levels and sports participation among the least active young people should be a target of community and school-based interventions to promote well-being. There does not appear to be an additional benefit to mental health associated with meeting the WHO-recommended levels of activity.


Abstract: Youth are considered to be a vulnerable segment of the population in terms of mental health. Youth engagement can be an important pathway to positive youth development as well as community development. The potential of youth engagement has not been fully harnessed in the field of mental health. The paper traces a brief outline of the development of an initiative called Youth Pro, meant to engage youth for the cause of building awareness about mental health, de-stigmatizing help seeking as well as enhancing peer support for mental health. The evolution of this initiative and the challenges encountered are documented. The feedback received from the participating youth suggest that youth pro has helped them not just in enhancing awareness about mental health issues but also in developing specific ideas about how to contribute to the cause of mental health promotion. It is a scalable model which merits examination in future research. (PsycINFO Database Record (c) 2017 APA, all rights reserved)


Abstract: In recent years, resilience has been lauded as a valuable, even necessary, facet of an effective veterinary practitioner. This study describes a mixed-methods research exploration of the impact of a self-care and mental well-being teaching intervention on the self-reported resilience of 105 first-year veterinary students enrolled at the School of Veterinary Medicine, University of Surrey, UK. Quantitative data were obtained through a questionnaire, the 10-item Connor-Davidson Resilience Scale (CD-RISC 10), which students completed before and after the teaching intervention. The median total score on the scale increased from 27 (IQR=25-30) to 29 (IQR=26-32) (p<.001), a medium effect size (r=-0.28). Student focus groups were held to allow qualitative data analysis of the students’ perspectives on the teaching intervention and on the topic of resilience in general. The results of this study suggest that appropriate training in resilience-building strategies can help veterinary students build greater awareness of resilience, and potentially support their development of a more resilient approach in their personal and professional lives. In this study, veterinary students felt that resilience training was a valuable addition to the veterinary curriculum, and that resilience likely plays an important role in achieving a successful veterinary career. The study also suggested that veterinary students utilize a variety of different resilience-building strategies, including drawing on past experiences, seeking help from support networks, and developing an ability to change their perspectives.

(12) Saelid GA, Nordahl HM. Rational emotive behaviour therapy in high schools to educate in mental health and empower youth health. A randomized controlled study of a brief

Abstract: Rational emotive behaviour therapy (REBT) is effective in reducing distress in several target groups. No other study has tested the mental health effects on adolescents in a high school setting while expanding a Cognitive Behaviour-based therapy, REBT, into the concept of mental health literacy. The format of the ABC model, which is an important element of REBT, functioned as a working manual in and between three sessions. This study tested whether knowledge and practical use of the ABC model increased self-esteem and hope, and reduced symptoms of anxiety and depression, and dysfunctional thinking. Sixty-two high school students with subclinical levels of anxiety and depression were randomly allocated into three groups; three individual REBT sessions, or three individual attentional placebo (ATP) sessions or no sessions (control). However, dysfunctional thinking, self-esteem and hope were not measured in the control group. Repeated measures with ANOVA and tests were conducted. Both REBT and ATP significantly reduced symptoms of anxiety and depression, but only REBT was significantly different from the control group at the six-month follow-up. Only REBT significantly reduced dysfunctional thinking, and both REBT and ATP significantly increased self-esteem and hope. REBT had both an immediate and a long-term effect. The findings show the potential positive effects of educating well-documented psychological techniques as ordinary education in school. Further research might contribute to decide whether or not to change the school system by enclosing mental health literacy classes for all students.


Abstract: Rationale: Resilience prevents the emergence of stress-related mental health problems among adolescents. Adolescents in tribal areas of India are more prone to develop such problems. Objectives: The primary objective was to determine the effect of combined life skills-based health empowerment intervention on the resilience of school-going adolescents in a tribal area. The secondary objectives were to determine the effect of the intervention on internal health locus of control and self-determination and to compare the effect of the intervention on resilience between non-tribal and tribal adolescents. Methods: We conducted this quasi-experimental study using a Solomon four-group design among 742 adolescents in two schools of Purulia, West Bengal, India. Students of the pretested group were examined for resilience using the Child Youth Resilience Measurement scale. A life skills education-based health empowerment intervention was administered among students of the experimental group. Post-test data on resilience, self-determination, internal health locus of control and pathological behaviour was obtained 3 months after the completion of intervention. A multi-level general linear mixed model was constructed to determine the effect of intervention on resilience. Results: Resilience was less among tribal adolescents at baseline. The intervention significantly improved resilience [β Adjusted = 11.19 (95% CI = 10.55, 11.83), with a greater increase for tribal adolescents [tribal-nontribal = 1.53 (95% CI = 0.03, 3.03)]. The intervention also significantly improved internal health locus of control (marginal mean increment 1.38 ± 0.05), self-determination (marginal mean increment 3.71 ± 0.09) and reduced pathological behavior β iour of the adolescents. Conclusion: Our study informed the current health policy that the existing life skills education-based programme should be reviewed and modified to include generic life skills, and the life skills education-based programme should be coupled with developmental interventions aimed at improving adult education and family climate for optimum effect on mental health and health behaviour of adolescents. (PsycINFO Database Record (c) 2017 APA, all rights reserved) (Source: journal abstract)


Abstract: Mental health booklets may provide a low-cost means of promoting mental health self-management and help seeking in schools. The aim of the study was to assess the (a) use, (b) acceptability and (c) impact of booklets for students in primary (10-11 years) and secondary school (12-13 years) alone and in conjunction with funding for targeted mental health support. This was a 2 — 2 factorial cluster randomized controlled trial, in which 846
schools in England were randomly allocated to receive/not receive: (1) booklets for students containing information on mental health self-management and help seeking, and (2) funding for mental health support as part of a national mental health initiative. 14,690 students (8139 primary, 6551 secondary) provided self-report on mental health, quality of life (baseline and 1 year follow-up) and help seeking (follow-up). (a) Approximately, 40 % primary school students and 20 % secondary school students reported seeing the booklets. (b) Of these, 87 % of primary school students reported that the booklet was “very helpful” or “quite helpful” compared with 73 % in secondary school. (c) There was no detectable impact of booklets on mental health, quality of life or help seeking, either alone or in conjunction with additional funding through the national mental health initiative. Lack of discernable impact of booklets underscores the need for caution in adopting such an approach. However, it is feasible that the impact was obscured by low uptake or that booklets may be more effective when used in a targeted way. (PsycINFO Database Record (c) 2017 APA, all rights reserved) Number of references – 24

(15) Uzuncakmak T, Beser NGRP. The Effects of Self-care Education of Adolescents on the Power of Self-care. International Journal of Caring Sciences 2017; 10(3):1368-1373. Abstract: Adolescents experience some physical and mental changes at adolescence so that they may meet situations that threaten the health. Therefore it is important to support adolescents in terms of self-care. This study was conducted as a quasi-experimental experimental study in order to increase self-care power of the adolescents. The study was conducted at a primary school in the central province of Yozgat. Adolescents who had the ability to understand and to answer the questionnaire, who were considered as able to attend the 6 trainings and who accepted to participate in the research and whose parents accepted to participate, 30 adolescents were included in the study. As the data collection tools, Questionnaire Form for the Adolescents and Self-care Power Scale were used. For the data analyses; numbers, percentage distributions, Simple Paired t test, Mann Whitney U test, Wilcoxon t test were used. As a result of statistical analyses; self-care power scale score averages of all of the adolescents increased statistically after the trainings (p<0.05). However, these score averages were found to be higher among those whose parents showed democratic attitudes in adolescents, among those whose mothers graduated from secondary school, among those whose fathers graduated from high school and college, among those whose mothers belonged to 30-35 age group and among those whose fathers belonged to 34-40 age group. As a result of the study following subjects are suggested: school nurses should help adolescents to improve their self-care power, families should be supported by nurses on the subjects of adolescence and selfcare issues
Hospital Premium Collection

(16) Chen SP, Koller M, Krupa T, Stuart H. Contact in the Classroom: Developing a Program Model for Youth Mental Health Contact-Based Anti-stigma Education. Community mental health journal 2016; 52(3):281-293. Abstract: This study evaluated eighteen Canadian anti-stigma programs targeting high-school students. The purpose was to identify critical domains and develop a program model of contact-based interventions. Three steps were implemented. The first step involved collecting program information through twenty in-depth interviews with stakeholders and field observations of seven programs. The second step involved constructing critical ingredients into domains for conceptual clarity and component modeling. The third step involved validating the program model by stakeholders review and initial fidelity testing with program outcomes. A program model with an overarching theme “engaging contact reduces stigma” and three underlying constructs (speakers, message, and interaction) were developed. Within each construct three specific domains were identified to explain the concepts. Connection, engagement, and empowerment are critical domains of anti-stigma programs for the youth population. Findings from this study have built on the scientific knowledge about the change theory underpinning youth contact-based intervention

(17) Hoying J, Melnyk BM. COPE: A Pilot Study With Urban-Dwelling Minority Sixth-Grade Youth to Improve Physical Activity and Mental Health Outcomes. The Journal of school nursing : the official publication of the National Association of School Nurses 2016; 32(5):347-356. Abstract: Approximately one in three preadolescents (34%) is obese/overweight and one in four (25%) experience a mental health issue. Urban youth suffer from higher rates of these
problems, and at earlier ages than their peers. This study's purpose was to determine feasibility/acceptability and preliminary effects of the COPE (Creating Opportunities for Personal Empowerment) Healthy Lifestyles TEEN (Thinking, Emotion, Exercise, and Nutrition) intervention on physical activity (PA) and mental health outcomes of 11- to 13-year-olds. A one group pre- and posttest design was used in a Midwest urban middle school. Preadolescents (n = 31) who received COPE reported significant decreases in anxiety and increases in healthy lifestyle beliefs and PA. Further, preadolescents at baseline with elevated anxiety, depression, suicide risk, and below average self-concept who received COPE reported significant increases in self-concept and decreases in anxiety, depression, and suicidal ideation. The COPE program is a promising intervention that can improve physical and mental health outcomes.


Abstract: Objective: This study sought to test the feasibility of a web-based Acceptance and Commitment Training (ACT) prototype prevention program called ACT on College Life (ACT-CL). Method: A sample of 234 university students was randomized to either the ACT-CL website or a mental health education (MHE) website. Results: Findings indicated a lower level of user engagement and satisfaction ratings with the prototype of ACT-CL than the MHE website. There were no significant differences between conditions on outcome measures at post or follow-up. However, statistical trends suggested the MHE condition actually led to greater remission of severe symptoms than the ACT-CL condition among those with severe symptoms at baseline. There were no differences between conditions on ACT process of change measures. Changes in psychological flexibility were predictive of changes in mental health across conditions, but relations dissipated over time. Furthermore, greater engagement in some components of ACT-CL predicted improvements in psychological flexibility, though not on mental health outcomes. Conclusions: The effects of the ACT-CL program on mental health outcomes and ACT process measures were largely equivalent to those of an education website, although there was a lower level of program engagement with ACT-CL. Findings are discussed in the context of feasibility issues and lessons learned for program revisions.

(PsycINFO Database Record (c) 2017 APA, all rights reserved) (Source: journal abstract)


Abstract: The purpose of this study was to examine the impact of a positive youth development (PYD) substance prevention program, Youth to Youth (Y2Y) International. 760 youth completed pre- and post-surveys across three separate Y2Y Summer Conferences. 126 of these youth also completed a six-month post-conference survey. Overall, significant improvements from pre- to post-conference were found in relation to improved knowledge of alcohol, tobacco and other drug (ATOD) risks, attitudes toward use, self-efficacy, perceptions of leadership and future participation and involvement in the Y2Y program. The six-month follow-up assessment demonstrated that, in some cases perceptions continued to be more favorable. Findings from this study showcase the value of prevention programs such as Y2Y in supporting positive youth development.

(20) Ausikaitis AE. Empowering homeless youth in transitional living programs: A transformative mixed methods approach to understanding their transition to adulthood. *Dissertation Abstracts International: Section B: The Sciences and Engineering* 2015; 76(2).

Abstract: The purpose of this dissertation is to gain insight into the journeys of homeless youth residing in transitional living programs in the Chicago area. There are multiple factors that can lead youth to homelessness as well as various risks made greater by living on the street that can lead to negative life outcomes. There is a dearth of research on outcomes of youth in transitional living programs, particularly research that includes the perspectives of those receiving services. This researcher partnered with three transitional living sites that serve homeless youth ages 18 to 24. Utilizing both qualitative and quantitative methods, the researcher collected information about participant's backgrounds, educational levels, job status, mental health, goals and sense of community before and after six months of
participation in long-term transitional living programs. (PsycINFO Database Record (c) 2016 APA, all rights reserved)

Abstract: BACKGROUND: Adverse childhood experiences (ACEs) are correlated with risk behaviors of smoking, disordered eating, and alcohol and substance abuse. Such behaviors can lead to significant public health problems of chronic obstructive pulmonary disease, obesity, liver disease, and hypertension, yet some individuals do not appear to suffer negative consequences but rather bounce back. OBJECTIVE: To pilot the feasibility and potential efficacy of the Empower Resilience Intervention to build capacity by increasing resilience and health behaviors and decreasing symptoms and negative health behaviors with young adults in an educational setting who have had ACEs. DESIGN: A two-group pre-post repeated measures design to compare symptoms, health behaviors, and resilience and written participant responses. RESULTS: There was a statistically significant cohort by time interaction for physical activity in the intervention group. There was no significant change in risk behaviors or resilience score by cohort. Young adults in the intervention group reported building strengths, reframing resilience, and creating support connections. CONCLUSIONS: An increase in health behavior is theoretically consistent with this strengths-based intervention. Evaluating this intervention with a larger sample is important. Interrupting the ACE to illness trajectory is complex. This short-term empower resilience intervention, however, holds promise as an opportunity to reconsider the negative effects of the trauma of the past and build on strengths to develop a preferred future.

PT - Randomized Controlled Trial

Abstract: PURPOSE: To screen and clinically interview European adolescents reporting current suicidality (suicidal ideation and suicide attempt) and investigate attendance at the clinical interview. METHODS: The Saving and Empowering Young Lives in Europe (SEYLE) Project was carried out in 11 European countries. A baseline questionnaire was completed in school by 12,395 adolescents (mean age 14.9; SD 0.9). Those who screened positive for suicidality (attempting suicide and/or serious suicidal ideation or plans) in the past 2 weeks were invited to a clinical interview with a mental health professional. RESULTS: Of the 12,395 adolescents, 4.2 % (n = 516) screened positive for current suicidality. The prevalence ranged from 1.1 % in Hungary to 7.7 % in Israel (p < 0.001). 37.6 % (n = 194) of those who screened positive subsequently attended the clinical interview. Female students were more likely to attend for interview (42.0 % versus 30.6 %, p = 0.010). The attendance rate varied considerably across countries, from 5.7 % in Italy to 96.7 % in France (p < 0.001). Improved attendance was associated with using school as the only interview setting (Mean attendance rate, MAR = 88 vs. 31 %, p = 0.006) and arranging the interview within 1 week of contacting the student (MAR = 64 vs. 23 %, p = 0.013). The greater the travel time to interview, the lower the attendance rate (Pearson's r = -0.64, p = 0.034). Independent of the variation by country, at the individual level, adolescents with more depressive symptoms and a recent suicide attempt more often attended for interview. CONCLUSION: A high rate of current suicidality was found amongst European adolescents. However, the majority of these displayed limited help-seeking behaviour. Future studies should investigate ways of making screening programmes and other interventions more acceptable and accessible to young people, especially young males.

Abstract: The purpose of the study was to conduct a preliminary efficacy evaluation of the Better Futures model, which is focused on improving the postsecondary preparation and participation of youth in foster care with mental health challenges. Sixty-seven youth were
randomized to either a control group that received typical services or an intervention group, which involved participation in a Summer Institute, individual peer coaching, and mentoring workshops. Findings indicate significant gains for the intervention group on measures of postsecondary participation, postsecondary and transition preparation, hope, self-determination, and mental health empowerment, as compared to the control group. Youth in the intervention group also showed positive trends in the areas of mental health recovery, quality of life, and high school completion. Implications for future research and practice are discussed, while emphasizing the capacities of youth in foster care with mental health conditions to successfully prepare for and participate fully in high education.

Notes: [Full text available via Ebsco Psychology & Behavioural Sciences Database]


Abstract: Objective: To examine whether being an organizer in a community organizing program improves personal agency and self-reported mental health outcomes among low-income Pacific Island youth in Auckland, New Zealand. Method: Counties Manukau Health initiated a community organizing campaign led and run by Pacific Island youth. We used interviews, focus groups and pre- and post-campaign surveys to examine changes among 30 youths as a result of the campaign. Results: Ten youths completed both pre- and post-campaign surveys. Eleven youths participated in focus groups, and four in interviews. Overall, youths reported an increased sense of agency and improvements to their mental health. Conclusions: Community organizing has potential as a preventive approach to improving mental health and developing agency over health among disempowered populations. (PsycINFO Database Record (c) 2016 APA, all rights reserved) (Source: journal abstract)


Abstract: Objective: Self-stigma is a common phenomenon among adolescents suffering from psychiatric disorders; however, this important research area has received little attention. Furthermore, there is a lack of clarity in the current literature on what makes individuals more or less likely to experience self-stigma. The objectives of our article are to identify the external conditions that help promote empowerment and present a model that explicates the process of those adolescents who do not self-stigmatize. Methods: In this qualitative study, we examine the cases of three adolescents between the ages of 12-17 who were taking psychiatric medication. We gathered adolescents' experiences and perceptions of psychiatric treatment using the TeenSEMI, coded responses, utilized Atlas.ti software to connect and hyperlink the codes, and constructed individual narratives that ultimately elicited an empowerment process among the adolescents. Results: We identified themes that helped adolescents to buffer against self-stigma; and categorized the components of the empowerment process as: diminish, normalize and attribute. Conclusion and implications for practice: We compare our empowerment model with an adolescent self-stigma model and identify key differences that may mitigate the effects of self-stigma. Although there are limitations to the generalizability of the study, authors recommend interventions applicable to youths with mental illness, as well as family and peers. This study indicates positive outcomes among adolescents who adhere to and are engaged in treatment. (PsycINFO Database Record (c) 2016 APA, all rights reserved)


Abstract: This study aimed to identify self-care strategies and assess physical and psychosocial factors associated with premenstrual distress among high school students. A cross-sectional survey of 217 adolescent girls aged 15 to 18 years was conducted in October 2009. Most (84.3 percent) had at least one or more symptoms of premenstrual distress. Premenstrual distress interfered with normal school activity in 51.2 percent. Most participants (57.1 percent) did not perform any self-care strategies for premenstrual distress. A hierarchical multiple linear regression analysis was conducted. Comprehension of one’s own physical and mental states during premenstrual phases mediated the relationship between
neuroticism and premenstrual distress. Activity restrictions due to menstrual distress mediated the relationship between the family's understanding of one's behavior during premenstrual phases and premenstrual distress. Findings suggest that, even if girls have neuroticism, it will be important to teach them to address the comprehension of one's own physical and mental states so that perceptions of both premenstruation and menstruation become more positive. Findings also suggest that the family's understanding was associated with alleviation of premenstrual distress. This study suggests the need for education to help adolescent girls and their families manage premenstrual distress and increase awareness of the benefit of managing its associated symptoms. (PsycINFO Database Record (c) 2016 APA, all rights reserved)

Number of references - 35


Abstract: BACKGROUND: Men are at greater risk than women of dying by suicide. One in eight will experience depression—--a leading contributor to suicide—in their lifetime and men often delay seeking treatment. Previous research has focused on men's use of unhelpful coping strategies, with little emphasis on men's productive responses. The present study examines the positive strategies men use to prevent and manage depression. METHOD: A national online survey investigated Australian men's use of positive strategies, including 26 strategies specifically nominated by men in a previous qualitative study. Data were collected regarding frequency of use or openness to using untried strategies, depression risk, depression symptoms, demographic factors, and other strategies suggested by men. Multivariate regression analyses explored relationships between regular use of strategies and other variables. RESULTS: In total, 465 men aged between 18 and 74 years participated. The mean number of strategies used was 16.8 (SD 4.1) for preventing depression and 15.1 (SD 5.1) for management. The top five prevention strategies used regularly were eating healthily (54.2%), keeping busy (50.1%), exercising (44.9%), humour (41.1%) and helping others (35.7%). The top five strategies used for management were taking time out (35.7%), rewarding myself (35.1%), keeping busy (35.1%), exercising (33.3%) and spending time with a pet (32.7%). With untried strategies, a majority (58%) were open to maintaining a relationship with a mentor, and nearly half were open to using meditation, mindfulness or gratitude exercises, seeing a health professional, or setting goals. In multivariate analyses, lower depression risk as measured by the Male Depression Risk Scale was associated with regular use of self-care, achievement-based and cognitive strategies, while lower scores on the Patient Health Questionnaire-9 was associated with regular use of cognitive strategies. CONCLUSIONS: The results demonstrate that the men in the study currently use, and are open to using, a broad range of practical, social, emotional, cognitive and problem-solving strategies to maintain their mental health. This is significant for men in the community who may not be in contact with professional health services and would benefit from health messages promoting positive strategies as effective tools in the prevention and management of depression.


Abstract: The Royal society for Public Health is partnering with south London and Maudsley National Health service (NHS) Foundation Trust to work with three secondary schools across the United Kingdom to design a do-it-yourself (DIY) happiness game that aims to empower year 7 students with the know-how, confidence, and resilience to improve their wellbeing during that first stressful year at school.

Hospital Premium Collection

(29) How to commission better mental health and wellbeing services for young people

*Mental Health Foundation* 2014.

Abstract: This guide is one of a series designed to bring together learning from the five-year Right Here programme initiated by Paul Hamlyn Foundation and the Mental Health.
Abstract: PURPOSE To assess the preliminary effects of a new course entitled Freshman 5


Abstract: This article uses a Positive Youth Development framework to explore the experiences of six experiential youth co-researchers (YC) in the Youth Injection Prevention (YIP) participatory research project, and the parallel track process of empowerment and capacity building that developed. The YIP project was conducted in Metro Vancouver at the BC Centre for Disease Control and community organizations serving street-involved youth. A process evaluation was conducted to explore themes in the YCs experience in the project, as well as process strengths and challenges. Semistructured interviews with the YCs, researcher field notes, and team meeting and debrief session minutes were analyzed. The YIP project appears to have exerted a positive influence on the YCs. Positive self-identities, sense of purpose, reconceptualization of intellectual ability, new knowledge and skills, supportive relationships, finding a voice, and social and self-awareness were among the positive impacts. Process strengths included team-building activities, team check-in and checkout sessions, and professional networking opportunities. Process challenges included the time required to help YCs overcome personal barriers to participation. The YIP project demonstrates that participatory research with street-involved youth is a viable research option that contributes to positive youth development and empowerment.

Edge S, Newbold KB, McKeary M. Exploring socio-cultural factors that mediate, facilitate, & constrain the health and empowerment of refugee youth. Social Science & Medicine 2014; 117:34-41.

Abstract: Studies on youth health and well-being are predominantly quantitative and expert-driven with less attention given to how youth understand what it means to be healthy themselves and the role of socio-cultural factors in shaping this. Knowledge on the perceptions and experiences of refugee youth is particularly lacking and notable given their unique stressors related to migratory, settlement and integration experiences. We contribute a better understanding of how refugee youth themselves define and contextualize health, with particular emphasis given to socio-cultural factors that enable or constrain health promotion efforts and individual health agency. This research was undertaken at a downtown drop-in centre in Hamilton, Ontario, Canada that provided settlement and integration services to newcomer youth. We employ a grounded theory approach and draw upon participant observation, focus groups and in-depth interviews. Twenty-six youth (age 18-25 years), representing 12 different countries of origin participated. The youth defined health very broadly touching upon many typical determinants of health (e.g. education, income, etc.). Yet factors of most importance (as demonstrated by the frequency and urgency in which they were discussed by youth) included a sense of belonging, positive self-identity, emotional well-being, and sense of agency or self-determination. We conceptualize these as "mediating" factors given the youth argued they enabled or constrained their ability to cope with adversities related to other health determinant categories. The youth also discussed what we interpret as "facilitators" that encourage mediating factors to manifest positively (e.g. informal, non-biomedical settings and programs that nurture trust, break down access barriers, and promote a sense of community amongst peers, mentors, and health professionals). When creating health promotion strategies for refugee youth (and perhaps youth more generally) it is important to understand the factors that may mediate the magnitude of effects from various risks/stressors, in addition to those which facilitate health agency. (PsycINFO Database Record (c) 2016 APA, all rights reserved) (Source: journal abstract)


Abstract: PURPOSE To assess the preliminary effects of a new course entitled Freshman 5
to Thrive/COPE Healthy Lifestyles on the cognitive beliefs, knowledge, mental health outcomes, healthy lifestyle choices, physical activity, and retention of college freshmen.

DATA SOURCES
Measures included demographics, nutrition knowledge, healthy lifestyle beliefs, healthy lifestyle perceived difficulty, healthy lifestyle choices, Beck Youth Inventories-II (anxiety, depression, anxiety, and destructive behavior), step count via pedometer, and college retention.

CONCLUSIONS
The experimental COPE (Creating Opportunities for Personal Empowerment) group had greater intentions to live a healthy lifestyle ($p = .02$) versus the comparison group. COPE students also significantly increased their physical activity ($p = .003$) from baseline to postintervention and had a higher college retention rate than students who did not take the course. In addition, there was a significant decrease in depressive and anxiety symptoms in COPE students whose baseline scores were elevated.

IMPLICATIONS FOR PRACTICE
The Freshman 5 to Thrive Course is a promising intervention that can be used to enhance healthy lifestyle behaviors and improve mental health outcomes in college freshmen.

Notes: see page 5

Abstract: The present study evaluated a positive psychology school-based intervention aimed at enhancing mental health and empowering the entire educational staff and students at a large middle school in the center of Israel. 537 seventh- to ninth-grade students participated in a 1 year intervention program and were compared to 501 students in a demographically similar control school. In a 2-year longitudinal repeated measures design, the study assessed pre- to post-test modifications in psychological symptoms and distress and in targeted well-being factors that were promoted in the experimental but not in a wait list control condition. The findings showed significant decreases in general distress, anxiety and depression symptoms among the intervention participants, whereas symptoms in the control group increased significantly. In addition, the intervention strengthened self-esteem, self-efficacy and optimism, and reduced interpersonal sensitivity symptoms. These results demonstrate the potential benefits of evidence-based positive-psychology interventions for promoting school-children's mental health, and point to the crucial need to make education for well-being an integral part of the school curriculum.
Notes: [Full text available via Ebsco Psychology & Behavioural Sciences Database]

Abstract: Background
Mental health problems and risk behaviours among young people are of great public health concern. Consequently, within the VII Framework Programme, the European Commission funded the Saving and Empowering Young Lives in Europe (SEYLE) project. This Randomized Controlled Trial (RCT) was conducted in eleven European countries, with Sweden as the coordinating centre, and was designed to identify an effective way to promote mental health and reduce suicidality and risk taking behaviours among adolescents.
Objective
To describe the methodological and field procedures in the SEYLE RCT among adolescents, as well as to present the main characteristics of the recruited sample.
Methods
Analyses were conducted to determine: 1) representativeness of study sites compared to respective national data; 2) response rate of schools and pupils, drop-out rates from baseline to 3 and 12 month follow-up, 3) comparability of samples among the four Intervention Arms; 4) properties of the standard scales employed: Beck Depression Inventory, Second Edition (BDI-II), Zung Self-Rating Anxiety Scale (Z-SAS), Strengths and Difficulties Questionnaire (SDQ), World Health Organization Well-Being Scale (WHO-5).
Results
Participants at baseline comprised 12,395 adolescents (M/F: 5,529/6,799; mean
age=14.9±0.9) from Austria, Estonia, France, Germany, Hungary, Ireland, Israel, Italy, Romania, Slovenia and Spain. At the 3 and 12 months follow up, participation rates were 87.3% and 79.4%, respectively. Demographic characteristics of participating sites were found to be reasonably representative of their respective national population. Overall response rate of schools was 67.8%. All scales utilised in the study had good to very good internal reliability, as measured by Cronbach's alpha (BDI-II: 0.864; Z-SAS: 0.805; SDQ: 0.740; WHO-5: 0.799).

Conclusions

SEYLE achieved its objective of recruiting a large representative sample of adolescents within participating European countries. Analysis of SEYLE data will shed light on the effectiveness of important interventions aimed at improving adolescent mental health and well-being, reducing risk-taking and self-destructive behaviour and preventing suicidality.

(36) Dowdy S, Alvarado M, Atieno O, Barker S, Barrett S, Carlton A et al. Empower U: Effectiveness of an Adolescent Outreach and Prevention Program With Sixth-Grade Boys and Girls: A Pilot Study. Journal of Pediatric Nursing 2013; 28(1):77-84. Abstract: Sixth graders are at a prime age to modify behaviors and beliefs regarding exercise, nutrition, body image, and smoking. Empower U was created to change knowledge, beliefs, and behaviors regarding these topics. This pilot study utilized pre/post assessments of 58 sixth graders from a private middle school in the midsouth. Results showed a significant increase in self-esteem as well as in exercise and nutrition knowledge and beliefs at posttest and a significant increase in body image as well as in self-reported exercise and nutrition behaviors at the 1-month follow-up. Empower U provides nurses with an effective educational program that may be useful in positively impacting health behaviors.

(37) Grealish A, Tai S, Hunter A, Morrison AP. Qualitative exploration of empowerment from the perspective of young people with psychosis. Clinical Psychology & Psychotherapy 2013; 20(2):136-148. Abstract: Evidence suggests that empowerment is central to improving the effectiveness and quality of mental health care. Empowerment includes increased involvement, choice and access to health information for service users. Within the process of empowerment, individuals may better understand their health needs and accordingly improve their prognoses. Despite the widespread use of the term “empowerment” within mental health, there have been no studies examining how young people with psychosis understand and conceptualize the term empowerment or which factors are conductive to them developing a sense of empowerment. This study aims to qualitatively conceptualize empowerment from the perspective of young people aged 14-18 years experiencing psychosis. Individual interviews were conducted with nine young people with a diagnosis of a psychotic disorder regarding their understanding and experience of empowerment. The interviews were audiotaped, transcribed verbatim and analysed using interpretative phenomenological analysis. Results indicated that young people who have experienced psychosis conceptualized empowerment as being listened to, being understood, taking control and making decisions for themselves. Young people place high importance on experiencing personal empowerment in relation to being users of mental health services and regard being empowered as the most important factor for determining their own recovery. Results also revealed that young people view mental health workers as very variable in their ability and willingness to address and help facilitate empowerment. They also identified daily routine, structure and avoidance of inactivity as additional means of increasing empowerment. The implications for research and practice are discussed. (PsycINFO Database Record (c) 2016 APA, all rights reserved) (Source: journal abstract)

(38) Melnyk BM, Jacobson D, Kelly S, Belyea M, Shaibi G, Small L et al. Promoting healthy lifestyles in high school adolescents: a randomized controlled trial. American journal of preventive medicine 2013; 45(4):407-415. Abstract: BACKGROUND Although obesity and mental health disorders are two major public health problems in adolescents that affect academic performance, few rigorously designed experimental studies have been conducted in high schools. PURPOSE The goal of the study was to test the efficacy of the COPE (Creating Opportunities for Personal Empowerment) Healthy Lifestyles TEEN (Thinking, Emotions, Exercise, Nutrition) Program, versus an attention control program (Healthy Teens) on: healthy lifestyle behaviors, BMI, mental health, social skills, and academic performance of high school adolescents immediately after and at 6
months post-intervention. DESIGN A cluster RCT was conducted. Data were collected from January 2010 to May of 2012 and analyzed in 2012-2013. SETTING/PARTICIPANTS A total of 779 culturally diverse adolescents in the U.S. Southwest participated in the trial. INTERVENTION COPE was a cognitive-behavioral skills-building intervention with 20 minutes of physical activity integrated into a health course, taught by teachers once a week for 15 weeks. The attention control program was a 15-session, 15-week program that covered common health topics. MAIN OUTCOME MEASURES Primary outcomes assessed immediately after and 6 months post-intervention were healthy lifestyle behaviors and BMI. Secondary outcomes included mental health, alcohol and drug use, social skills, and academic performance. RESULTS Post-intervention, COPE teens had a greater number of steps per day (p=0.03) and a lower BMI (p=0.01) than did those in Healthy Teens, and higher average scores on all Social Skills Rating System subscales (p-values <0.05). Teens in the COPE group with extremely elevated depression scores at pre-intervention had significantly lower depression scores than the Healthy Teens group (p=0.02). Alcohol use was 12.96% in the COPE group and 19.94% in the Healthy Teens group (p=0.04). COPE teens had higher health course grades than did control teens. At 6 months post-intervention, COPE teens had a lower mean BMI than teens in Healthy Teens (COPE=24.72, Healthy Teens=25.05, adjusted M=0.34, 95% CI=−0.56, -0.11). The proportion of those overweight was significantly different from pre-intervention to 6-month follow-up (chi-square=4.69, p=0.03), with COPE decreasing the proportion of overweight teens, versus an increase in overweight in control adolescents. There also was a trend for COPE Teens to report less alcohol use at 6 months (p=0.06). CONCLUSIONS COPE can improve short- and more long-term outcomes in high school teens. TRIAL REGISTRATION This study is registered at www.clinicaltrials.gov NCT01704768

Abstract: Objectives: Assess the state of evidence regarding impacts of youth empowerment programs (YEPs) on adolescents’ (ages 10-19) self-efficacy and self-esteem, as well as other social, emotional, and behavioral outcomes. Method: Systematic searches of databases combined with an international outreach to identify experimental or quasi-experimental trials of community interventions that regularly involved youths in decision making. Results: Of the 8,789 citations identified, 3 studies met the inclusion criteria. None reported significant effects on the review's primary outcomes. Data from only two studies on self-efficacy could be meta-analyzed (combined N ¼ 167). Results found no significant intervention effect on self-efficacy (z ¼ 1.21; 95% confidence interval [CI]: [0.12, 0.49]). Significant effects were found for some secondary outcomes, but these were inconsistent across studies. Conclusions: The review reveals insufficient evidence of YEPs’ impacts. Further research is needed using well implemented models with clear theories of change, larger samples, and rigorous impact study designs complemented by mixed-methods process evaluation.

Abstract: BACKGROUND: Mental health problems among young people, and girls and young women in particular, are a well-known health problem. Such gendered mental health patterns are also seen in conjunction with stress-related problems, such as anxiety and depression and psychosomatic complaints. Thus, intervention models tailored to the health care situation experienced by young women within a gendered and sociocultural context are needed. This qualitative study aims to illuminate young women's experiences of participating in a body-based, gender-sensitive stress management group intervention by youth-friendly health services in northern Sweden. METHODS: A physiotherapeutic body-based, health-promoting, gender-sensitive stress management intervention was created by youth-friendly Swedish health services. The stress management courses (n = 7) consisted of eight sessions, each lasting about two hours, and were led by the physiotherapist at the youth centre. The content in the intervention had a gender-sensitive approach, combining reflective discussions; short general lectures on, for example, stress and pressures related to body ideals; and physiotherapeutic methods, including body awareness and relaxation. Follow-up interviews
were carried out with 32 young women (17-25 years of age) after they had completed the intervention. The data were analysed with qualitative content analysis. RESULTS: The overall results of our interview analysis suggest that the stress management course we evaluated facilitated ‘a space for gendered and embodied empowerment in a hectic life’, implying that it both contributed to a sense of individual growth and allowed participants to unburden themselves of stress problems within a trustful and supportive context. Participants’ narrated experiences of ‘finding a social oasis to challenge gendered expectations’, ‘being bodily empowered’, and ‘altering gendered positions and stance to life’ point to empowering processes of change that allowed them to cope with distress, despite sometimes continuously stressful life situations. This intervention also decreased stress-related symptoms such as anxiousness, restlessness, muscle tension, aches and pains, fatigue, and impaired sleep. CONCLUSIONS: The participants’ experiences of the intervention as a safe and exploratory space for gendered collective understanding and embodied empowerment further indicates the need to develop gender-sensitive interventions to reduce individualisation of health problems and instead encourage spaces for collective support, action, and change.

Abstract: Empowerment has become an influential concept and theoretical framework for social policy and practice. Still, relatively little is known about the roles that empowerment plays in the ecology of human development, particularly among young people. This article reports results of a study of psychological empowerment among young people, using data from 629 high school students (65.8% female; 96.5% non-white). Using a path analysis, we examined the role of perceived sociopolitical control—as an indicator of the intrapersonal component of psychological empowerment—as a mediator between ecological support systems and developmental outcomes. Findings confirmed that social support in family, peer, and school settings, and family cohesion positively predict self-esteem and perceived school importance, which, in turn, have protective effects on psychological symptoms, violent behaviors and substance use. Sociopolitical control was found to mediate the relationships between ecological supports and risk factors and developmental outcomes, leading to the conclusion that perceived efficacy in the sociopolitical domain, and youth empowerment, more generally, should be considered as core elements of the ecology of human development. Policy and practice aimed at promoting positive developmental outcomes and preventing risk behaviors should take their relationship to sociopolitical control into account.

Abstract: BACKGROUND: Despite the high prevalence of mental health concerns, few young adults access treatment. While much research has focused on understanding the barriers to service access, few studies have explored unbiased accounts of the experiences of young adults with mental health concerns. It is through hearing these experiences and gaining an in-depth understanding of what is being said by young adults that improvements can be made to interventions focused on increasing access to care. OBJECTIVE: To move beyond past research by using an innovative qualitative research method of analyzing the blogs of young adults (18-25 years of age) with mental health concerns to understand their experiences. METHODS: We used an enhanced Internet search vehicle, DEVONagent, to extract Internet blogs using primary keywords related to mental health. Blogs (N = 8) were selected based on age of authors (18-25 years), gender, relevance to mental health, and recency of the entries. Blogs excerpts were analyzed using a combination of grounded theory and consensual qualitative research methods. RESULTS: Two core categories emerged from the qualitative analysis of the bloggers accounts: I am powerless (intrapersonal) and I am utterly alone (interpersonal). Overall, the young adult bloggers expressed significant feelings of powerlessness as a result of their mental health concerns and simultaneously felt a profound sense of loneliness, alienation, and lack of connection with others. CONCLUSIONS: The present study suggests that one reason young adults do not seek care might be that they view the mental health system negatively and feel disconnected from these services. To decrease young adults’ sense of powerlessness and isolation, efforts should focus on creating and developing resources and services that allow young adults to feel connected and
empowered. Through an understanding of the experiences of young adults with mental health problems, and their experiences of and attitudes toward receiving care, we provide some recommendations for improving receptivity and knowledge of mental health care services.


Abstract: BACKGROUND: The Awareness program was designed as a part of the EU-funded Saving and Empowering Young Lives in Europe (SEYLE) intervention study to promote mental health of adolescents in 11 European countries by helping them to develop problem-solving skills and encouraging them to self-recognize the need for help as well as how to help peers in need. METHODS: For this descriptive study all coordinators of the SEYLE Awareness program answered an open-ended evaluation questionnaire at the end of the project implementation. Their answers were synthesized and analyzed and are presented here. RESULTS: The results show that the program cultivated peer understanding and support. Adolescents not only learned about mental health by participating in the Awareness program, but the majority of them also greatly enjoyed the experience. CONCLUSIONS: Recommendations for enhancing the successes of mental health awareness programs are presented. Help and cooperation from schools, teachers, local politicians and other stakeholders will lead to more efficacious future programs.

PT - Randomized Controlled Trial


Abstract: Adolescence is a dynamic period of growth and development. The term adolescents refer to individuals between the age of 10-19 years and are understood in different ways in different cultural contexts. In India adolescent comprise of 22.5 percent of total population and their number according to 2001 census is over 225 million and this number is growing with a definite possibility of making this country the youngest in the world in near future. This period need a special consideration because it is a period of increased risk taking and therefore susceptibility to behavioral problems at the time of puberty and new concerns about reproductive health. The present condition of adolescents clearly shows that our youths' quality of life has significantly deteriorated. Researches show that there is significant rise in the problems faced by the adolescents for example, serious emotional disturbances has increased (WHO, 2001), increased sexual activity, rise in AIDS cases in India and greater use of alcohol consumption has been found. Studies have found that one third of one half of adolescents struggle with low self esteem, especially in early adolescence (Harter, 1999; Hirsch and Dubois, 1991). The result of low self esteem can be temporary, but in serious cases can lead to various problems including depression, delinquency, self inflicted injuries, suicide and anorexia nervosa (Battle, 1990; Bhatti 1992). Life skills education approach is an interactive educational methodology that not only focuses on transmitting knowledge but also aims at shaping attitudes and developing interpersonal skills. The important goal of the life skills approach is to enhance young people's abilities to take responsibility for making healthier choices resisting negative pressures and avoiding risky behavior. Therefore Life skills are the building blocks of one's behavior and need to be learnt well/adequately to lead a healthy, meaningful and productive life. (PsycINFO Database Record (c) 2016 APA, all rights reserved) (Source: chapter)


Abstract: BACKGROUND: Art has been shown to be an empowering and engaging entity with numerous benefits to vulnerable populations, including the homeless persons and young adults. However, little is known how homeless young adults perceive the use of art as messages that can communicate the danger of initiating or continuing drug and alcohol use. OBJECTIVES: The purpose of this study was to solicit perspectives of homeless, drug-using young adults as to how art can be used to design messages for their peers about the danger of initiating or continuing drug and alcohol use. METHODS: Qualitative methodology via focus group discussions was utilized to engage 24 homeless young adults enrolled from a drop-in
site in Santa Monica, California. RESULTS: The findings revealed support for a myriad of delivery styles, including in-person communication, flyers, music, documentary film, and creative writing. The young adults also provided insight into the importance of the thematic framework of messages. Such themes ranged from empowering and hopeful messages to those designed to scare young homeless adults into not experimenting with drugs. CONCLUSION: The findings indicate that in addition to messages communicating the need to prevent or reduce drug and alcohol use, homeless young adults respond to messages that remind them of goals and dreams they once had for their future, and to content that is personal, real, and truthful. Our research indicates that messages that reinforce protective factors such as hope for the future and self-esteem may be as important to homeless young adults as information about the risks and consequences of drug use.


Abstract: Objective: The purpose of this analysis was to evaluate the outcomes of two statewide initiatives in Vermont and Minnesota, in which self-management of mental illness was taught by peers to people in mental health recovery using Wellness Recovery Action Planning (WRAP). Methods: Pre-post comparisons were made of reports from 381 participants (147 in Vermont and 234 in Minnesota) on a survey instrument that assessed three dimensions of self-management: 1) attitudes, such as hope for recovery and responsibility for one’s own wellness; 2) knowledge, regarding topics such as early warning signs of decompensation and symptom triggers; and 3) skills, such as identification of a social support network and use of wellness tools. Results: Significant positive changes in self-management attitudes, skills and behaviors were observed on 76% of items completed by Vermont participants (13 of 17 survey items), and 85% of items completed by Minnesota participants (11 of 13 items). In both states, participants reported significant increases in: 1) their hopefulness for their own recovery; 2) awareness of their own early warning signs of decompensation; 3) use of wellness tools in their daily routine; 4) awareness of their own symptom triggers; 5) having a crisis plan in place; 6) having a plan for dealing with symptoms; 7) having a social support system; and 8) ability to take responsibility for their own wellness. Conclusions: Given the rapid growth of this intervention in the U.S. and internationally, these results contribute to the evidence base for peer-led services, and suggest that more rigorous investigations are warranted in the future. (PsycINFO Database Record (c) 2016 APA, all rights reserved)

Number of references - 21


Abstract: Youth Action Research for Prevention (YARP), a federally funded research and demonstration intervention, utilizes youth empowerment as the cornerstone of a multi-level intervention designed to reduce and/or delay onset of drug and sex risk, while increasing individual and collective efficacy and educational expectations. The intervention, located in Hartford Connecticut, served 114 African-Caribbean and Latino high school youth in a community education setting and a matched comparison group of 202 youth from 2001 to 2004. The strategy used in YARP begins with individuals, forges group identity and cohesion, trains youth as a group to use research to understand their community better (formative community ethnography), and then engages them in using the research for social action at multiple levels in community settings (policy, school-based, parental etc.) Engagement in community activism has, in turn, an effect on individual and collective efficacy and individual behavioral change. This approach is unique insofar as it differs from multilevel interventions that create approaches to attack multiple levels simultaneously. We describe the YARP intervention and employ qualitative and quantitative data from the quasi-experimental evaluation study design to assess the way in which the YARP approach empowered individual youth and groups of youth (youth networks) to engage in social action in their schools, communities and at the policy level, which in turn affected their attitudes and

Abstract: Medical students experience various stresses and many poor health behaviours. Previous studies consistently show that student wellbeing is at its lowest pre-exam. Little core-curriculum is traditionally dedicated to providing self-care skills for medical students. This paper describes the development, implementation and outcomes of the Health Enhancement Program (HEP) at Monash University. It comprises mindfulness and ESSENCE lifestyle programs, is experientially-based, and integrates with biomedical sciences, clinical skills and assessment. This study measured the program’s impact on medical student psychological distress and quality of life. A cohort study performed on the 2006 first-year intake measured effects of the HEP on various markers of wellbeing. Instruments used were the depression, anxiety and hostility subscales of the Symptom Checklist-90-R incorporating the Global Severity Index (GSI) and the WHO Quality of Life (WHOQOL) questionnaire. Pre-course data (T1) was gathered mid-semester and postcourse data (T2) corresponded with pre-exam week. To examine differences between T1 and T2 repeated measures ANOVA was used for the GSI and two separate repeated measures MANOVAs were used to examine changes in the subscales of the SCL-90-R and the WHOQOL-BREF. Follow-up t-tests were conducted to examine differences between individual subscales. A total of 148 of an eligible 270 students returned data at T1 and T2 giving a response rate of 55%. 90.5% of students reported personally applying the mindfulness practices. Improved student wellbeing was noted on all measures and reached statistical significance for the depression (mean T1 = 0.91, T2 = 0.78; p = 0.01) and hostility (0.62, 0.49; 0.03) subscales and the GSI (0.73, 0.64; 0.02) of the SCL-90, but not the anxiety subscale (0.62, 0.54; 0.11). Statistically significant results were also found for the psychological domain (62.42, 65.62; p < 0.001) but not the physical domain (69.11, 70.90; p = 0.07) of the WHOQOL. This study is the first to demonstrate an overall improvement in medical student wellbeing during the pre-exam period suggesting that the common decline in wellbeing is avoidable. Although the findings of this study indicate the potential for improving student wellbeing at the same time as meeting important learning objectives, the limitations in study design due to the current duration of follow-up and lack of a control group means that the data should be interpreted with caution. Future research should be directed at determining the contribution of individual program components, long-term outcomes, and impacts on future attitudes and clinical practice. (PsycINFO Database Record (c) 2016 APA, all rights reserved) (Source: journal abstract)

Number of references - 34


Abstract: Objective: Peer-to-Peer, sponsored by the National Alliance on Mental Illness (NAMI), is a structured, experiential, self-empowerment, relapse prevention and wellness program led by trained peer mentors for people with mental illnesses. The authors conducted the first empirical evaluation of the program by using a pre-post survey design. Methods: Approximately 550 participants who were enrolled in Peer-to-Peer during the data collection period (2005-2006) were invited to complete a brief, anonymous survey before participating in the program and immediately after. Results: Analyses of responses from 138 participants indicated that they gained significant benefits, especially in areas central to the Peer-to-Peer curriculum - specifically, knowledge and management of their illness, feelings of being less powerless and more confident, connection with others, and completion of an advance directive. Qualitative analysis of responses to an open-ended postintervention question supported the quantitative findings. Conclusions: Peer-to-Peer is a promising self-help modality that warrants additional evaluation with more rigorous methodology. (PsycINFO Database Record (c) 2016 APA, all rights reserved) Conference title - NAMI national convention

Number of references - 7

Abstract: BACKGROUND Obesity and mental health disorders are 2 major public health problems in American adolescents, with prevalence even higher in Hispanic teens. Despite the rapidly increasing incidence and adverse health outcomes associated with overweight and mental health problems, very few intervention studies have been conducted with adolescents to improve both their healthy lifestyles and mental health outcomes. Even fewer studies have been conducted with Hispanic youth. The purpose of this study was to evaluate the preliminary efficacy of the COPE (Creating Opportunities for Personal Empowerment) Healthy Lifestyles TEEN (Thinking, Emotions, Exercise, and Nutrition) program, a manualized educational and cognitive behavioral skills-building program, on Hispanic adolescents' healthy lifestyle choices as well as mental and physical health outcomes.

METHODS A cluster randomized controlled pilot study was conducted with 19 Hispanic adolescents enrolled in 2 health classes in a southwestern high school. One class received COPE and the other received an attention control program.

RESULTS Adolescents in the COPE program increased their healthy lifestyle choices and reported a decrease in depressive and anxiety symptoms from baseline to postintervention follow-up. A subset of 7 overweight adolescents in the COPE program had a decrease in triglycerides and an increase in high-density lipoproteins. In addition, these overweight adolescents reported increases in healthy lifestyle beliefs and nutrition knowledge along with a decrease in depressive symptoms.

CONCLUSION The COPE TEEN program is a promising school-based strategy for improving both physical and mental health outcomes in adolescents.


Abstract: Empowerment of youth, particularly in urban settings, is critical to addressing issues of social injustice. Programs that support the development of empowerment, or action taken by an individual to facilitate his or her own ability to act in the face of oppression, have demonstrated great promise in dimensions such as creating stronger group bonding and improved mental health and school performance (Bemak, 2005; Bemak, Chi-Ying, & Siroskey-Sabdo, 2005; Wallerstein, 2006). Yet, there are challenges inherent to implementing, supporting, and sustaining empowerment programs in many school settings given the hierarchical structure and contextual norms of these environments (Yowell & Gordon, 1996). This article reviews the Teen Empowerment program and offers strategies for consultants as they support programs and encourage socially just practices in the school setting. The use of Participatory Action Research methods, and its application to creating positive social change and the empowerment of community members, is also reviewed.

Notes: [Full text available via Ebsco Psychology & Behavioural Sciences Database]


Abstract: This paper, the second in a series of two guideline papers emerging from the 2007 Best Practices for Mental Health in Child Welfare Consensus Conference, provides an overview of the key issues related to parent support and youth empowerment in child welfare and presents consensus guidelines in these important areas. The paper also discusses some of the implications these guidelines have for the child welfare field.

Notes: [Full text available via Ebsco Psychology & Behavioural Sciences Database]


Abstract: OBJECTIVE: To create a mass media campaign that endeavours to a) denormalize tobacco use among youth aged 12-18, b) empower youth to stay tobacco product free, and c) increase awareness of the dangers of tobacco use, while using positive messaging.

PARTICIPANTS: Target age group was youth between the ages of 12 and 18 years.

SETTING: The mass media campaign was developed, implemented, and evaluated within the city of Calgary.

INTERVENTION: The mass media campaign consisted of posters for schools and other venues frequented by youth (e.g., community centres, libraries, fitness centres, restaurants, movie theatres), posters for transit (e.g., bus shelters, LRT shelters, back of bus)
print advertisements, television/radio public service announcements, an interactive community website for youth, a media launch event, promotional items, and organizational efforts to cross-promote the campaign. The creative concept was based on intercept interviews, focus group testing, and other research conducted by the campaign's creative team and youth volunteers in order to identify the key elements of this campaign.

OUTCOMES: A total of 149 students completed both a baseline and follow-up survey to evaluate the marketing activities of the campaign. A total of 27 youth participated in prototype testing to compare this positive-messaging campaign with negative-toned tobacco reduction campaigns. Six stakeholders/partners participated in stakeholder interviews to assess their thoughts and learnings regarding the campaign process. CONCLUSION: The evaluation respondents viewed the campaign positively and showed strong recall of the messaging.

PT - Evaluation Studies

[Full text available with NHS OpenAthens]


Abstract: Health promotion professionals are increasingly encouraged to implement evidence-based programs in health departments, communities, and schools. Yet translating evidence-based research into practice is challenging, especially for complex initiatives that emphasize environmental strategies to create community change. The purpose of this article is to provide health promotion practitioners with a method to evaluate the community change process and document successful applications of environmental strategies. The community change chronicle method uses a five-step process: first, develop a logic model; second, select outcomes of interest; third, review programmatic data for these outcomes; fourth, collect and analyze relevant materials; and, fifth, disseminate stories. From 2001 to 2003, the authors validated the use of a youth empowerment model and developed eight community change chronicles that documented the creation of tobacco-free schools policies (n = 2), voluntary policies to reduce secondhand smoke in youth hangouts (n = 3), and policy and program changes in diverse communities (n = 3).


Abstract: This article describes an innovative drug prevention pilot in which developing a substance abuse video served as a vehicle for teaching youth healthy attitudes and behaviors. Seven 10 to 12-year-old African Americans from a public housing development participated in 10 weekly sessions focusing on video skills and substance abuse. Based on the principles of capacity building and cognitive dissonance theory, the children learned about substance abuse in their community and movie-making, which they used to create an antidrug video. Six activities were identified as critical to the program's success: family involvement, community engagement, adapting drug education content to fit community characteristics, using the camcorder as a central vehicle for learning, community field assignments, and evaluation-based learning.


Abstract: Evaluation research pertaining to the development of assessment instruments that fully capture the facets of empowerment prevention perspectives among youth are sparse. With funding from the American Legacy Foundation, the University of New Mexico Center for Health Promotion and Disease Prevention, in partnership with the New Mexico State Department of Health, developed a measure of individual empowerment. Drawing from the various bodies of literature in adolescent development, substance abuse prevention, and program/coalition building, a questionnaire was developed to capture facets of individual empowerment as it pertains to tobacco prevention efforts among youth within New Mexico. Utilizing a sample of 112 youth participants, principal axis factor analysis with Varimax rotation revealed four valid sub-scales entitled active participation, empowerment efficacy, external organizational involvement, and participant satisfaction. Internal consistency reliabilities were satisfactory with Cronbach's alpha ranging from .78 to .84. Regression mediation analysis revealed that active participation mediated the relationship of...
empowerment efficacy and self-esteem. Challenges associated with conceptualizing and assessing empowerment among youth are discussed.

Abstract: The pathways and processes through which empowering community settings influence their members, the surrounding community and the larger society are examined. To generate the proposed pathways and processes, a broad range of studies of community settings were reviewed, in the domains of adult well-being, positive youth development, locality development, and social change. A set of organizational characteristics and associated processes leading to member empowerment across domains were identified, as well as three pathways through which empowering settings in each domain contribute to community betterment and positive social change. The paper concludes with an examination of the ways that community psychology and allied disciplines can help increase the number and range of empowering settings, and enhance the community and societal impact of existing ones. (PsycINFO Database Record (c) 2016 APA, all rights reserved) (Source: journal abstract)

Abstract: BACKGROUND Teachers need classroom-based programs to develop and support mental health fitness in adolescents because this age group faces significant challenges to their mental health. There is a paucity of such ready-made programs. This article describes the development and proposed implementation of a low-cost, effective, adaptable, 6-week, classroom-based workshop entitled MasterMind: Empower Yourself With Mental Health. MasterMind provides students with a "toolbox for mental health" by creating a safe environment for discussion of mental health and emotionally charged topics, by increasing student knowledge of mental health issues, and by providing tools to develop and maintain mental health. Instructional materials address topics identified through needs assessments. The program combines instruction and written exercises with "peer-teaching-peer" group activities, individual assignments, and open discussion. Specific methods are included to allow students to ask questions anonymously and to build each other's self-esteem.METHODS MasterMind was implemented as a pilot program to a Seattle, WA, middle school class of 30 students and addressed self-esteem, media literacy, school resources, relationships, emotions, stress and ways to de-stress, and future goals.RESULTS The students' enthusiasm and participation increased throughout the program, and they gave high satisfaction ratings to the topics covered. Additionally, the host teacher continued selected program activities after MasterMind was completed.CONCLUSIONS MasterMind educates all students in a class, not just those with identified emotional problems, and can potentially identify children with mental health needs not already evident. The pilot program implementation of MasterMind shows that such programs have potential for providing adolescents with tools to optimize mental health
Notes: [Full text available with NHS OpenAthens]

Abstract: This paper considers the positioning within British social care research of young disengaged people who are 'invisible' to formal support services. Using a recently completed research project as illustration and focusing primarily on mental health and well-being, it raises questions regarding the practical and ethical implications of engaging such young people to actively participate in research and other decision-making endeavours. The authors aimed to engage and empower young people aged between 17 and 21 years (who were not in employment, education or training) by enlisting them as co-researchers, with youth-friendly technology (mobile phones, video cameras, and MSN messaging) and involve them in decisions relating to each stage as the research progressed. Separate roles were adopted in the process: Carol provided consultation and project oversight, Joy worked as the primary researcher with the key support agency and the young researchers. Throughout the research project we questioned the practical and ethical implications of 'involving' the young people as co-researchers. The fact that the young people were paid for each element of their
involvement in the project, the use of 'inducements' and the 'training' of these young people to be co-researchers, felt exploitative rather than empowering. However, a small number of the young people continued with the project and, resisting the suggestions and aspirations of the researchers, made their own decisions and set their own agendas. In addition, one of the young men experienced a marked increase in social engagement and improved well-being.


Abstract: Youth violence in the United States has emerged as a major concern for communities, policymakers and community researchers. This paper reports on the efforts of a child mental health clinic to build a community consensus around addressing violence that affects youth and all members of the community. We describe and give case examples regarding our approach to acquiring the perspectives of the community, particularly that of youth, discuss key themes and implications that emerged from our work, and offer preliminary recommendations for designing a youth violence prevention initiative in a disenfranchised community. (PsycINFO Database Record (c) 2016 APA, all rights reserved) (Source: journal abstract)

(61) Steiner-Adair C, Sjostrom L. Full of ourselves: A wellness program to advance girl power, health, and leadership. *Full of ourselves: A wellness program to advance girl power, health, and leadership* 2006.

Abstract: Over the last few years, it has become increasingly clear that America's children struggle far too often and far too early with disordered eating and eating disorders. Anorexia, bulimia, and obesity are all on the increase. Eating disorders rank as one of the most common chronic psychiatric illnesses among young women, and their prevalence among teenage and preteen girls is growing. On the other end of the spectrum, childhood obesity has reached troubling proportions. This serious scenario makes evident the need for large-scale health education and eating disorders prevention efforts. It is imperative that we invest in effective ways to equip children-and the adults who can potentially make a significant difference in their lives-with tools to resist cultural directives toward body preoccupation, overeating, and disordered eating behaviors. Welcome to Full of Ourselves (FOO), our clear-cut response to this need! FOO is an upbeat educational program that aims to sustain girls in their mental, physical, and social health and to decrease their vulnerability to the development of body preoccupation and eating disorders. As a primary prevention program, FOO targets a general (healthy) population of girls; no one need be at risk for an eating disorder to participate. FOO has been successfully implemented by schools, after-school programs, town libraries, summer camps, churches, and synagogues. All that's needed is a supportive community and one or two committed women to facilitate weekly program sessions. Girls are growing up in a popular culture and an economy that continue to send them the message that what they look like is more important than who they are. In some communities, being the "prettiest" girl means being the thinnest; in others, being the curviest; and in others, being the most "buff." While the ideal image may vary, what remains sadly consistent is just how many girls refer to their bodies as the ultimate measure of their worth: Many girls literally weigh their self-esteem. This focus on bodies as a primary source of identity predisposes girls to disordered thinking and to disordered eating, which can escalate into a full-blown eating disorder and serious health problems. Disordered eating also disrupts learning; when a girl diets, skips meals, or subsists mainly on junk food, she's not getting the nourishment she needs to think and to perform at her best. This curriculum aims to give girls an entirely different lens through which to see, know, and value themselves. The focus remains throughout, as indicated in the subtitle, on power, health, and leadership. (PsycINFO Database Record (c) 2016 APA, a

**Databases searched:** British Nursing Index, CINAHL, Cochrane, Ebsco Psychology & Behavioural Science, Hospital Premium, Medline, NICE Evidence, PsycInfo, Social Care Online, Google Advanced & Google Scholar
Search terms: EMPOWERMENT / SELF-CARE SKILLS / MENTAL HEALTH / WELL BEING / exp.MENTAL DISORDERS/pc

("young people" OR "young person*" OR youth* OR adolescen* OR teen* OR "young adult*" OR "young men" OR "young women").ti,ab

(Empower* OR “self care” OR “car* for themselves” OR “look* after themselves” ).ti, ab

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