



CLIENTS Caregivers, Whole Family, Youth (all ages)

NUMBER 64 unduplicated youth/families

ETHNICITY African, Asian, African American, Immigrant, Latino, Native American, Caucasian

INCOME \$20,000- \$29,999 (average)

DIAGNOSES ADHD, Anxiety, Attachment Disorder, Autism, Depression, ODD, PTSD

"I don't want to leave."

"I've never been swimming in a lake before."

"We never get to have a weekend like that, a weekend where we don't have any responsibilities, where we can just be with each other."

"Oh, I didn't want to leave! And (my son) wants to go back again. The camp manager was great, he really bonded with (my son)"

I would never have been able to afford this for them. And their experience there was unforgettable in a very positive way."

Family Wellbeing Retreats

- These family retreats are an example of how RCCMHC families directly impact funding decisions and service delivery
- Family Services Committee members reported feeling empowered
- Families reported feeling a reduction in stress, anxiety, isolation
- Families reported feeling an increase in family togetherness and community support



GRACE

PROBLEM/CHALLENGE

Grace lives with her great-grandmother and her baby sister. While living with her mom, Grace was neglected and experienced physical abuse. So, Grace has some behavior challenges related to trauma, mental illness, and maternal drug use. Grace can be quite a handful! Sometimes, her great-grandmother feels like she can't keep up with Grace and her baby sister. And, because of her very limited income, her great-grandmother can't afford family vacations. She says she can't remember the last time she felt relaxed.

IMPACT/SUCCESS

The first thing that Grace's grandmother noticed was the sense of calm that settled over her family. Grace was able to participate in crafts, games, and wellness activities and her great-grandmother was able to rest. Grace's grandmother bonded with other caregivers as they shared stories and strategies. As Grace played in the sand by the lake, her great-grandmother noticed that many of Grace's negative behaviors seemed to have disappeared. She said that the fresh air and support from other caring adults was exactly what her family needed. She said that she and Grace would carry this happy memory for a long time.

INTERVENTION

RCCMHC staff told Grace's great-grandmother about the free Family Retreat being offered through MACMH and Camp Koronis.



Ramsey County Children's Mental Health Collaborative (RCCMHC) Funded Services

FUNDED AGENCY: MACMH's mission is to promote positive mental health for all infants, children, adolescents and their families. MACMH educates caregivers, professionals, and community members about mental health promotion, prevention and healthy development. MACMH's trainings present current, evidence based techniques that can be placed directly into practice. MACMH provides parents and caregivers with advocacy and education for skill enhancement and timely, appropriate delivery of services. Parents have opportunities for leadership training in order to effectively care for and advocate for their own children and act as mentors for other families in need of support.

FUNDED PROGRAM/SERVICE: Family Retreats (2)

STATEMENT OF NEED: The RCCMHC family service committee needs assessment survey indicated that families need opportunities for quality time with their children and a break from the stress of daily life/ raising a child with mental illness.

COLLABORATING AGENCIES: RCCMHC, Koronis Ministries Campground

PROGRAM/SERVICE DESCRIPTION: RCCMHC funds supported Koronis Ministries Campground to provide their facility, food, and camp activities while MACMH provided programming and coordination for families for 2 family retreats. The weekend retreats were a chance for families from the city to get away from dependence on technology which creates a loss of connection between parents and children in order to spend time together in nature doing non-tech activities. Research from Stanford University shows technology affects family communication negatively and that time in nature reduces anxiety and depression.

LENGTH OF GRANT TERM: 8/22/18-11/30/18

MACMH AWARD: \$5,485 **KORONIS AWARD:** \$16,000

DATA COLLECTION: We used observation as well as pre/post surveys as coordinated by RCCMHC staff to collect data on client outcomes. All adults and teens took the Short Warwick–Edinburgh Mental Well-being Scale immediately before the retreat and one week after. The average adult/teen (13+) score immediately before the retreat was 26.43, and the average adult score one week after the retreat was 27. The average change in score was 0.71. All youth ages 7-12 took the Students' Life Satisfaction Scale immediately before the retreat and one week after. The average child score (7-12) immediately before the retreat was 37, and the average child score one week after the retreat was 34. The average change in score was -2.9. I note that children were likely feeling a high degree of anticipation and joy looking forward to the retreat immediately before it began.

UNDERSERVED POPULATION: Mostly families of color living in poverty

PROPOSAL GOALS AND OBJECTIVES THAT WE MET: The Family Retreats were fantastic for families, allowing them quality time with time in nature away from technology. Families expressed great appreciation for the opportunity.

IMPACT AND OUTCOMES Families had the opportunity to experience time on a Minnesota lake with enriching camp activities, which most of the families had never been able to afford. The smiles and many thank you's told me that it made a difference.

STAFF NOTES: The two weekend retreats served 17 families- a total of 64 people. The first retreat had 55 people signed up and 21 people attended (38% attendance rate). We note that due to a short turnaround time between funding and camp approval and the first retreat, families were notified that they were selected for the retreat only 10 days prior to the retreat. The second retreat had 59 people signed up and 43 people attended (73% attendance rate)

Ramsey County Children's Mental Health Collaborative (RCCMHC) Funded Services

IMPACT AND OUTCOMES- how they relate to RCCMHC vision and goals

RCCMHC Vision: Ramsey County youth will have the strengths, skills, relationships, supports, and opportunities that they need to experience mental health and wellbeing. Recent research shows how too much isolated screen time and not enough time in nature creates isolation and a divide in generations in families. The outdoor camp activities gave families a chance to bond, relax, and enjoy the outdoors. Many doctors are now prescribing more time in nature and away from screens for children to function at the highest possible level of mental health.

Goal A: A Responsive Children's Mental Health Delivery System. The retreat was responsive to the parent's needs because the idea for a weekend retreat came from them directly.

Goal B: Health Equity. Most families served were families living in poverty. These families seldom have a chance to go to a lake for a weekend. This gave them an opportunity to participate in an activity that many other families do to reduce stress.

Goal C: Youth and Whole Family Wellbeing. Time in nature, mindfulness, and time to relax are very therapeutic for people with a trauma history.

LESSONS LEARNED: RCCMHC learns from the successes and challenges of our grantees. Lessons learned from today's funded programs will inform tomorrow's evidence-based, practice-informed and community-defined services and supports.

Why our program did (or, did not) achieve the desired results: Dan Zeigler and his staff (mostly family) were kind, welcoming, and understanding of children with mental health disorders. Their patience, delicious meals, and leadership were amazing. MACMH staff helped to provide families with someone to turn to when they were worried or upset, and to have alternative activities for down time. MACMH staff sometimes acted as peacemakers when there were disagreements between families.

RCCMHC should continue to support/fund this aspect of the program/service (and why): The entire retreat programming should continue to be funded. It provides families with an opportunity to bond and relax. It is very therapeutic.

We could try this differently next time: Now that we know types of issues that may arise, we can bring those types of concerns up at the orientation.

STAFF NOTES:

- RCCMHC staff played a large role in coordinating this LCTS-funded program- marketing, lottery and registration, developing an orientation, managing the wait list, responding to family questions/concerns, and managing family surveys and program evaluations.
- Camp Koronis staff reported that they heard no concerns from staff and that they would be interested in running a retreat like this again in the future. They noted that they are not aware of any other groups offering mental health retreats like this for at-risk families, and that they were happy to be a part of this innovative project.
- Camp Koronis staff suggested requiring a small deposit from families to reduce no-show rates. The deposit could even be returned to families at or after the camp. Families suggested having more mental health exercises integrated into the camp experience. Future orientations could include a reminder that families have different cultures and expectations, and that each family should be respectful of others.
- Need clear plan to manage rule-breaking or suspected rule-breaking such as drug/alcohol use and parents leaving camp/ unsupervised children.
- A more robust data collection timeframe would be one week prior to the retreat, immediately after the retreat, and one week following the retreat.