

Adapting a self-stigma reduction intervention by youth, for youth: Narrative Enhancement and Cognitive Therapy

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Background

- The co-design of youth mental health interventions, by and for youth, helps ensure that the intervention is fit for young people.
- We are preparing to trial a youth adaptation of a manualized self-stigma reduction intervention with young people with bipolar disorders, called Narrative Enhancement and Cognitive Therapy (NECT)¹, previously used primarily with adults with psychotic disorders.
- We used a youth-led adaptation process to prepare the intervention².

The Adaptation Team

- One **youth adaptation lead**: ≈20h/week, 5 months (salaried)
- One **engagement coordinator**: ≈ 2-4 h/week (salaried)
- Five-member **youth advisory group**: bi-weekly meetings, 4 months (hourly honoraria).
- One advisory group member: 2 days/week for one month.
- Supported by the scientist lead

Adaptations Made

Wording

- Enhanced the recovery-oriented, youth friendly language throughout
- Renamed the intervention to *Discovering our best selves: Narrative enhancement and cognitive therapy*

Diagnostic adaptation

- Adapted to bipolar spectrum disorders by revising any mention of 'psychosis' and adding examples specific to bipolar spectrum disorders.
- Replaced lived experience quotes with their own

Design

- Created their own youth-friendly, engaging graphic design

Peer support role

- Approved of adding peer co-facilitation to the intervention, an adaptation suggested by the researchers.
- Identified the role peer support workers would play in each session

Goal-setting module

- Agreed with the researchers' idea of adding a goal-setting module
- Developed the new module

EDI & SGBA+

EDI: Youth with lived experience are typically not included in intervention development. Their leadership on this project supports health equity.

SGBA+: Our youth team included various genders and sexes. The subsequent trial will use SGBA+ to understand sex and gender effects.

Conclusions

This pragmatic case example shows how youth can make important, relevant adaptations to an evidence-based intervention.

Youth-led adaptations are hypothesized to make the new intervention youth friendly and trial ready.

¹Yanos, P. T., Roe, D., & Lysaker, P. H. (2011). Narrative enhancement and cognitive therapy: a new group-based treatment for internalized stigma among persons with severe mental illness. *Int J Group Psychother*, 61(4), 577-595.

²Hawke, L.D., Bennett, R., Sheikhan, N.Y., Yanos, P. (in press). Lived experience adaptation of a psychosocial intervention for young adults with bipolar spectrum disorders: Process description and adaptation outcomes. *Early Interv Psychiatr*.

