Juliana Tobon: Advancing Knowledge of Continuity of Care and Determinants of Student Mental Health

What you need to know
Juliana’s research areas include continuity of care in the children’s mental health system and determinants of student mental health. For her PhD, she developed the Continuity of Care in Children’s Mental Health (C3MH) measure, which assesses the experiences of parents and youth in the children’s mental health system.

She is now working on the 2014 Ontario Child Health Study (OCHS), an epidemiological study of child mental health and functioning in the province of Ontario. Juliana is developing the student mental health survey component of the 2014 OCHS, which will identify characteristics of families, neighbourhoods, and schools that affect student mental health.

About Juliana
Juliana is a Postdoctoral Fellow at the Offord Centre for Child Studies at McMaster University in Hamilton, Ontario, where she is working on the 2014 Ontario Child Health Study, a provincial epidemiological study of child mental health and functioning. She also works with children and families as a clinical psychologist, focused primarily on mood and anxiety disorders. She completed her Master’s degree and PhD in Clinical Psychology at Western University, under the supervision of Dr. Graham J. Reid, studying patterns of service use and continuity of care in children’s mental health in Ontario.

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What is Juliana’s Research About?

Continuity of Care in Children’s Mental Health

Juliana has a keen interest in system-level issues in the area of children’s mental health, especially service access and unmet need. While completing her Master’s degree, she became deeply interested in understanding more about the concept of ‘continuity of care’ and how it played out in Ontario’s children’s mental health system.

Although continuity of care was presented in the academic literature as a key feature of quality health care, a measure didn’t exist that specifically examined whether parents and children experienced the children’s mental health care system as continuous or fragmented. So, Juliana decided to develop such a measure for her PhD. She developed this measure, called Continuity of Care in Children’s Mental Health (or C3MH), through two studies.

Study 1: Stakeholder interviews

In the first study, Juliana conducted 36 interviews with stakeholders in Ontario’s children’s mental health system, including parents of children who had received mental health services, youth who had received mental health services, and service providers. The goal of these interviews was to find out what they saw as the important features of continuity of care. This study was funded through the Children’s Health Research Institute in London, Ontario.

According to Juliana, three key findings of these interviews have important implications for clinicians in the children’s mental health system.

1. Creating a Link Between Services

Juliana found that it was important for families that services were bridged. This means that parents should be told about any upcoming changes in service provision, and families should be linked personally with the next service so that the process is as seamless as possible.

2. Flexibility in Service Provision

Juliana also found that flexibility in service provision is an important feature of continuity of care.

“Ensuring flexibility in the application of agency policy while maintaining commitment to the family emerged as a very important theme across the interviews,” explains Juliana.

“A lot of families talked about the importance of connecting with the provider, and parents really did sense when a provider was going above and beyond the call of duty,” she says.

“Service providers also talked about the importance of flexibility wherever possible to allow them to best meet the family’s needs,” she says. “For example, the agency’s policy might say they only treat children up to the age of 16, but in some cases they would make exceptions if it made sense for that family and that situation.”

3. Information Sharing

Another key finding was the importance of sharing information among all stakeholders.
“Good informational continuity – by sharing information with parents, within an agency, and also between agencies and sectors – was viewed as critical, so that families did not have to repeat their stories over and over again,” says Juliana.

Study 2: Developing a measure of continuity of care
The second part of Juliana’s PhD research involved developing and validating the Continuity of Care in Children’s Mental Health (C3MH) measure. Juliana, along with her supervisor Dr. Reid and Dr. Richard D. Goffin from the Department of Psychology at Western University, used the interview findings to create a series of questions that seemed to best reflect the elements of continuity of care. They tested these questions with 364 parents of youth (aged 4 to 18) and 57 youth (aged 14 to 18) across 13 children’s mental health agencies in Ontario. From this research, they developed two versions of the measure – a parent version (C3MH – Parent, or C3MH-P) and a youth version (C3MH – Youth, or C3MH-Y). Funding for this work was provided by the Canadian Institutes for Health Research.

For Juliana, a key contribution of her work is having a way of evaluating the results of initiatives aimed at improving continuity of care.

“It’s so important to have a well-validated measure of continuity of care in children’s mental health and to move forward with it to examine system changes,” she says. Juliana is hopeful that the C3MH can help measure system changes resulting from initiatives like the Systems Improvement through Service Collaboratives project.

“For example, as the Service Collaboratives evolve, it might be possible to look at continuity of care in terms of how it changes over time in communities with a Service Collaborative, or how it is different in communities that have a Service Collaborative compared to those communities that don’t.”

Determinants of Student Mental Health
Juliana joined the Offord Centre for Child Studies at McMaster University as a Postdoctoral Fellow in September 2013, and is now a member of the 2014 Ontario Child Health Study (OCHS) research team. This study is a follow-up to the original OCHS, the first and only general population study of child mental health in Ontario, conducted in 1983.

The 2014 OCHS will update knowledge of child mental health need in the province. It involves three parts that are being carried out by Statistics Canada: (1) 10,530 in-home interviews with parents and youth, completed in randomly selected homes across the province; (2) 6,500 elementary teacher questionnaires; and (3) 240 school mental health questionnaires, being completed by students, teachers and principals.

Juliana is developing the student mental health survey component of the 2014 OCHS, which will identify characteristics of families, neighbourhoods, and schools that reduce the risk for children’s mental health problems.

“The contextual factors that contribute to children’s mental health are really important. When we look at
children, we know that they live and are involved in and affected by multiple systems, but it’s not often that we’re able to get good measurement of all those factors to see how they play into both mental health needs but also resilience,” explains Juliana.

“So, for example, even if a child is living in poverty and is experiencing a lot of risk factors for developing mental health issues, we know that a lot of children don’t develop these kinds of issues, and that’s because of other factors in their life that play a protective role. I’m interested in being able to tease all of those things apart through the 2014 OCHS,” she says.

What’s next for Juliana?
Beyond her Postdoctoral Fellowship, Juliana wants to continue researching continuity of care and determinants of student mental health. She hopes to test the youth version of the C3MH with a larger sample. She would also like to test the C3MH measure in other parts of Canada or the U.S. and to develop the measure in other languages, such as French. Juliana is interested in using the data from the 2014 OCHS to answer a range of research questions about the factors affecting child and adolescent mental health. She looks forward to balancing a research career with ongoing clinical practice, working with youth and families to help them reach their highest mental health potential.

Project Title: 2014 Ontario Child Health Study – Determinants of Student Mental Health and Achievement

Project Supervisors: Dr. Michael Boyle and Dr. Kathy Georgiades

For more information about Juliana’s work, please contact her at tobonji@mcmaster.ca or click on the following links:

www.continuitystudy.uwo.ca

Measure Profile: Continuity of Care in Children's Mental Health (C3MH)

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