

# Boost

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# Declaration of interests

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**North East and  
North Cumbria**

Any work described today has been supported as part of my professional role in the UK National Health Service. I do not have any personal interests that could related to this work. This presentation reflects our collective learning and is shared with openness and integrity.

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# Always the right door

22<sup>nd</sup> May | Kathryn Grayling



**When a young person asks for help,  
how many people does it take to say  
yes?**





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**Why this  
matters...**





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# Samuel's Story



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To lead  
through  
learning.

It reminds us: Outcomes aren't  
delivered – they're co-created.  
Across actors.  
Over time. In relationships.



Instead, we cultivate continuous  
exploration – responding to context,  
learning from failure.





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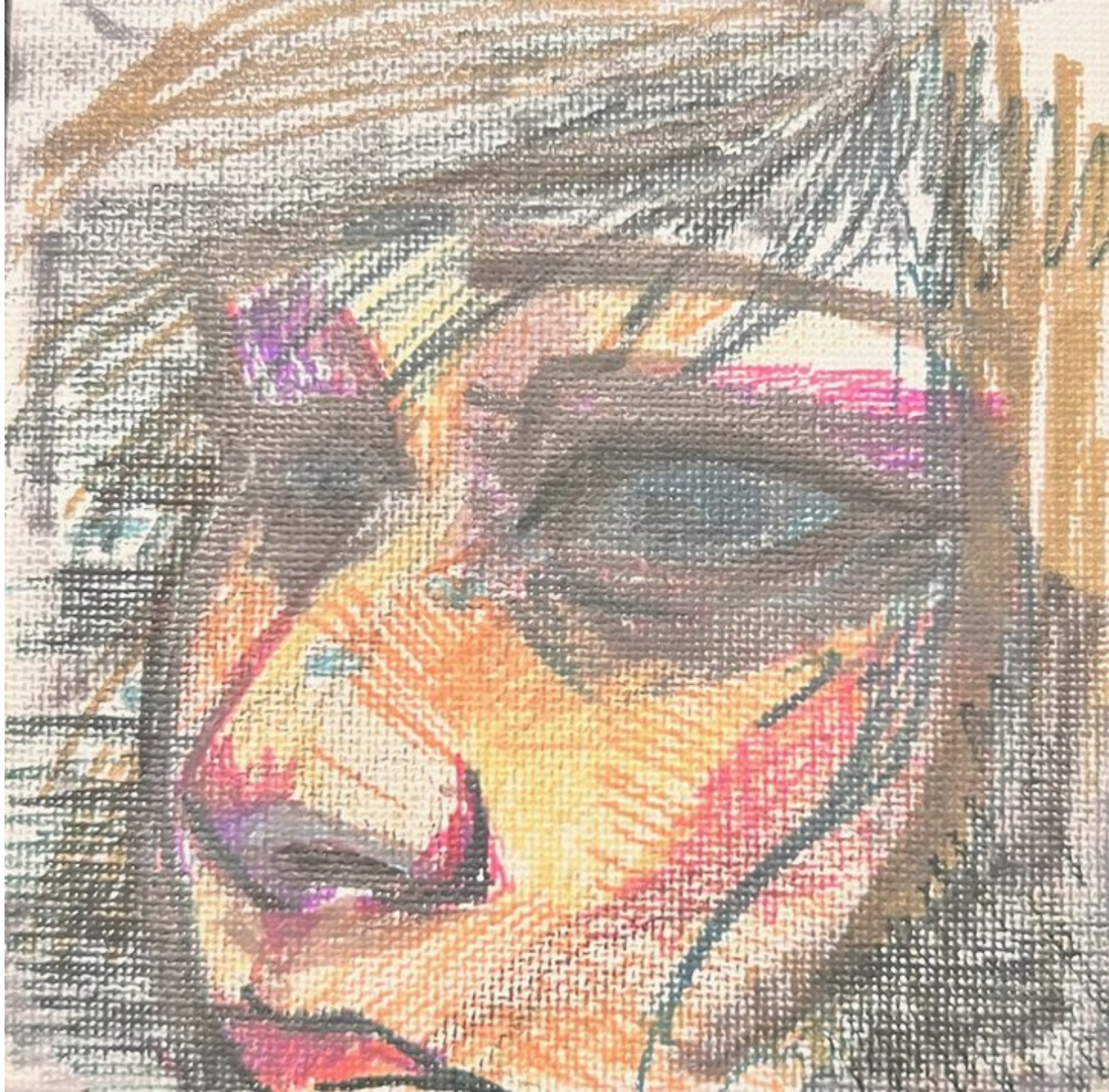
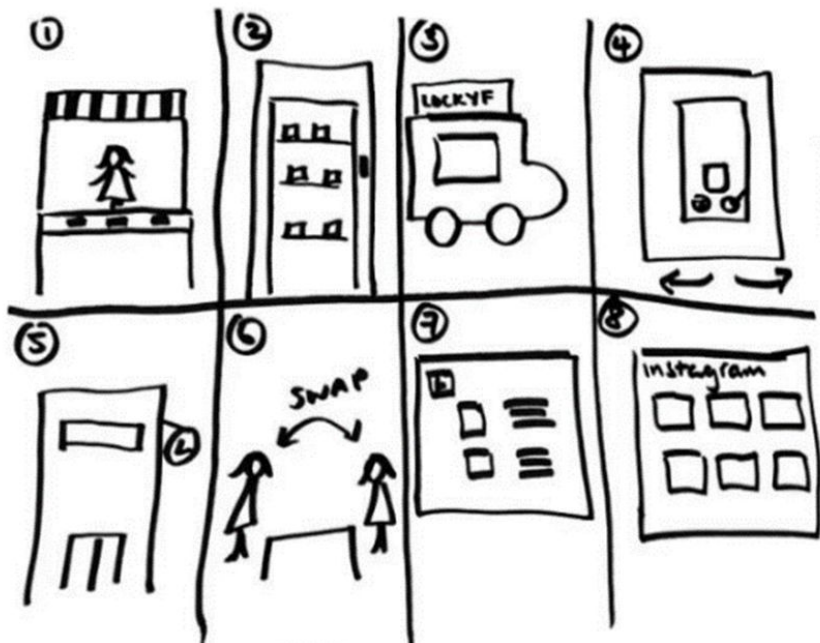




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## Always the Right Door: Children and Young People's Mental Health Summit





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Elevating lived  
experience

Deepening  
connectivity

Wrapping around  
strained services

## Learning - our engine for quality improvement...

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We are continuously learning - there is no standard for 'best practice' at all times and in all places. What works in every environment is the continuous process of learning and adaptation.



# Bring a brick, not a cathedral...



## A cathedral

A complete and fully formed idea that you are emotionally invested in and attached to.



## A brick

Create the space for each person to contribute (a brick).



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**“What helps you stay open to others’ experiences, especially when they challenge your own assumptions?”**

• Lived experience isn't just valuable – it's essential

• Learning communities can shift whole systems when we create space for trust and adaptation

• Outcomes emerge from how we relate, not just what we plan.



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- Learn
- Connect
- Lead
- Improve





# **virtual interventions and Community Connections for Indigenous Youth (VICCIY):**

***Exploring the metaverse of  
possibilities of using virtual  
reality to support mental  
health and well-being***

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*No conflicts of interest*









Addiction  
doesn't Kill the  
**ADDICT**  
It Kills the  
FAMILY KIDS N  
People who  
TRIED to help

*The disconnection from traditional territories through colonialism has resulted in a “spiritual homelessness”; its abyssal impact is continuing to be explored through attempts to measure the gargantuan scope of generations of pain and loss.*

(Gabriel, 2023, para. 4)

<https://www.pexels.com/photo/monochrome-photo-of-woman-3225796/>





## **Objectives :**

- To recognize the importance of partnerships when engaging in research with Indigenous communities.
- To examine the potential benefits of incorporating VR to enhance mental health care in rural and remote Indigenous communities.
- To consider potential ways of integrating culture and tradition within innovative approaches to mental health care.







## Outline

Outline the status of mental health supports

## Identify

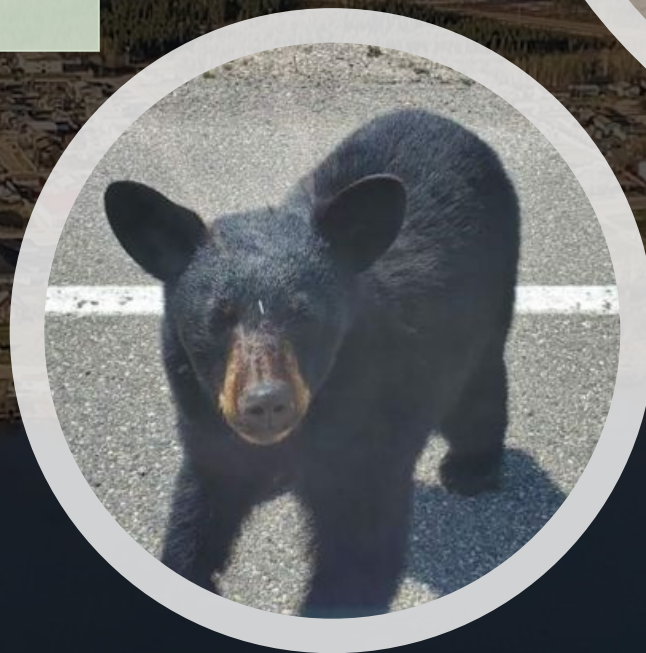
Identify services gaps through perspectives of community members

## Explore

Explore how VR can be used to either address the gaps or to enhance existing supports

## Develop

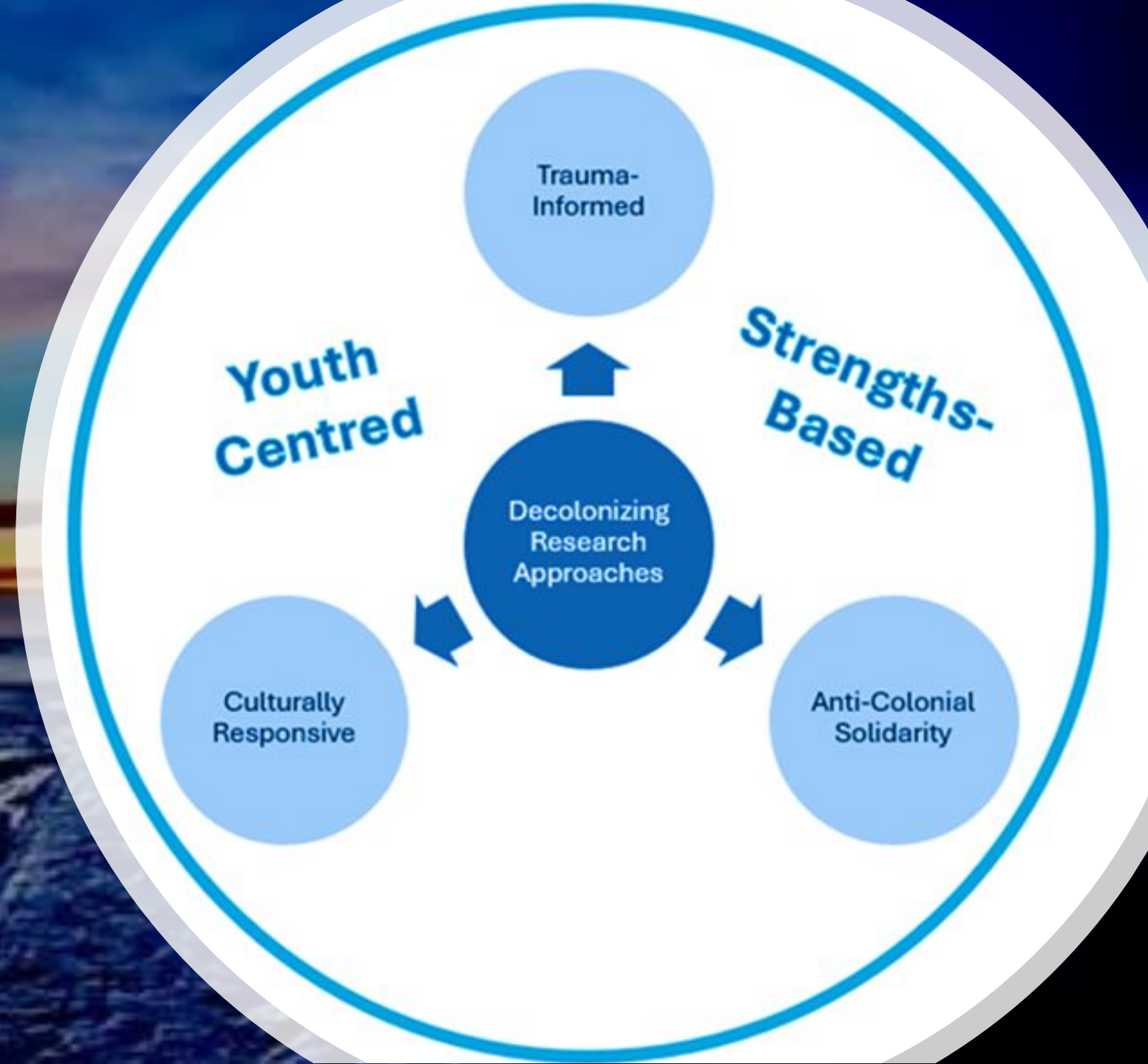
Develop culturally responsive mental health supports





*Decolonizing research involves liberating the “captive minds” of both the colonized and the colonizer from oppressive conditions that silence and marginalize the voices of the colonized.*

(Bell et al., 2017, p. 5)



*Part of the challenge of working in solidarity with Indigenous peoples is reorienting our approach away from avoidance of settler uncertainty or solidarity as a type of settler identity, and towards decolonization as a practice that includes nurturing a habit of discomfort.*

(Morris, 2017, p. 456)



People are very reluctant to go to the hospital and seek out those services from local people in town for fear that their confidentiality is going to be broken.

I've heard stories from students where they don't have, have never had a bedroom, you know, or don't even have a mattress. You know, they have a blanket and a pillow and that's the reality.

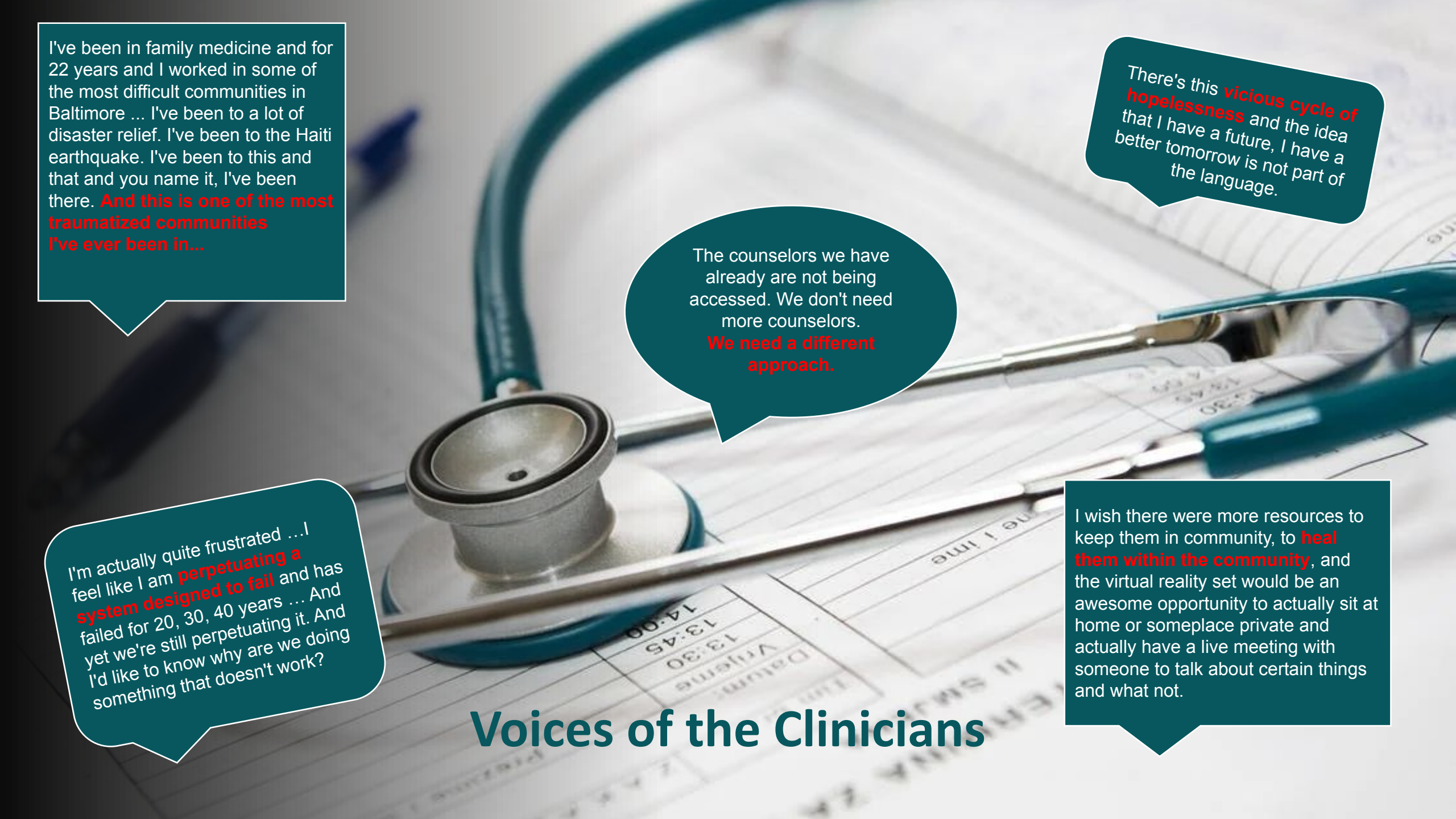
The community experiences such a high number of suicides that **"it's just like you're complacent to it"**.

A lot of students have said I don't want to go home [because] so and so is there. And there is that feeling of I don't want to go because of whether it's members or whether it's whatever's happening in that home, they aren't feeling comfortable or safe in that space.

Grief counseling for loss and trauma, anything that could assist with dealing with those would be a big deal because I know for us there is a feeling of not if, but when the next [traumatic] thing is going to happen within the community.

## Voices of the Teaching Staff





I've been in family medicine and for 22 years and I worked in some of the most difficult communities in Baltimore ... I've been to a lot of disaster relief. I've been to the Haiti earthquake. I've been to this and that and you name it, I've been there. **And this is one of the most traumatized communities I've ever been in...**

There's this **vicious cycle of hopelessness** and the idea that I have a future, I have a better tomorrow is not part of the language.

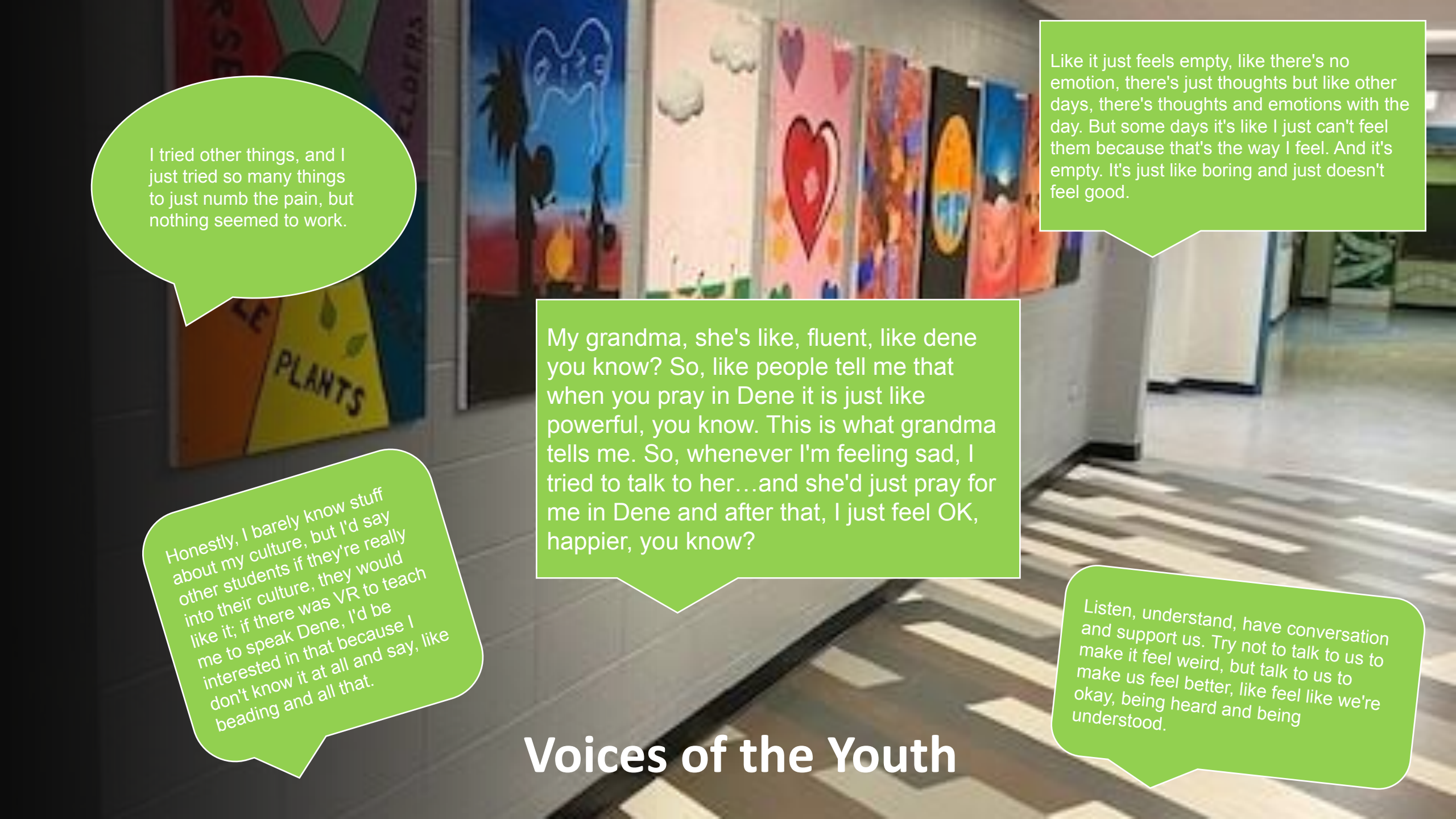
The counselors we have already are not being accessed. We don't need more counselors.  
**We need a different approach.**

I'm actually quite frustrated ... I feel like I am **perpetuating a system designed to fail** and has failed for 20, 30, 40 years ... And yet we're still perpetuating it. And I'd like to know why are we doing something that doesn't work?

I wish there were more resources to keep them in community, to **heal them within the community**, and the virtual reality set would be an awesome opportunity to actually sit at home or someplace private and actually have a live meeting with someone to talk about certain things and what not.

## Voices of the Clinicians



A hallway with colorful murals on the wall and a crosswalk on the floor. The murals include a palm tree, a heart, and a sun. The floor has a black and white striped crosswalk pattern.

I tried other things, and I just tried so many things to just numb the pain, but nothing seemed to work.

Like it just feels empty, like there's no emotion, there's just thoughts but like other days, there's thoughts and emotions with the day. But some days it's like I just can't feel them because that's the way I feel. And it's empty. It's just like boring and just doesn't feel good.

My grandma, she's like, fluent, like Dene you know? So, like people tell me that when you pray in Dene it is just like powerful, you know. This is what grandma tells me. So, whenever I'm feeling sad, I tried to talk to her...and she'd just pray for me in Dene and after that, I just feel OK, happier, you know?

Honestly, I barely know stuff about my culture, but I'd say other students if they're really into their culture, they would like it; if there was VR to teach me to speak Dene, I'd be interested in that because I don't know it at all and say, like beading and all that.

Listen, understand, have conversation and support us. Try not to talk to us to make it feel weird, but talk to us to make us feel better, like feel like we're okay, being heard and being understood.

## Voices of the Youth





Safety

Identity

Belonging

C  
O  
M  
M  
U  
N  
I  
T  
Y

Plan

Reflect

Observe

Act

Plan

Reflect

Observe

Act

Plan

Reflect

Progress

Continual





PROVINCIAL YOUTH SUMMIT











Trial Using Real-Time  
VR Platform to  
Provide Wellness  
Supports Virtually







## Exploring the Potential of a VR platform that offers:

- Interactive Social Platform
- Educational Content
- Role Model Sharing
- Synchronous Workshops
- Capturing communities and culture with 360 recordings
- Counseling and support groups



# ***The Possibilities are Endless***







## **Recap Objectives :**

- What is the importance of partnerships when engaging in research with Indigenous communities?
- What are the potential benefits of incorporating VR to enhance mental health care in rural and remote Indigenous communities?
- What are potential ways of integrating culture and tradition within innovative approaches to mental health care?





Mahsi cho

Kinanâskomitin

Pidamaya

Miigwech

Marsee

Thank You

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