SNAP National Expansion in Canada: Important Learnings Along our SNAP Scaling Journey

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In Collaboration With our National Partner

PREVNet

SNAP® (Stop Now And Plan) established in 1985 is an evidence-based trauma informed gender specific model that teaches elementary school-aged children with disruptive behaviour problems, and their parents, how to stop and think before they act and make better choices “in the moment.”

Proven Impact
- Improves disruptive behaviour and increases self-control
- Sustainable Change
- Reduces Crime
- Cost Effective
- Culturally Responsive & Safe
- Building Healthy Communities

www.stopnowandplan.com

PLEASE REFER TO THE PRESENTATION/ORIGINAL DOCUMENTS WHEN REFERENCING.
Important Take Away/Learnings Along our Scaling Journey for the Past 20 Years

- THE WHY - Filling an identified ‘Gap’
- Belief in the Proven Product
- Relationships
- Venture Philanthropy Can & Does Work
- Common Goals & Competing Priorities
- Continue to Find New & Compelling Ways to Tell Your Story
- Importance of Keeping the Scientist-Practitioner Framework Alive & Active
- A Data System Plays a Critical Role

- Your Plan vs Reality
- Be Adaptable & Responsive
- Government Can Expedite Expansion Efforts
- Diversified Funding Models
- Regional Mobilization Strategy
- Community Specific Implementation Plan
- Change Management
- Keep investing in research/evaluation
- Your Team Are Driving the Change

PLEASE REFER TO THE PRESENTATION/ORIGINAL DOCUMENTS WHEN REFERENCING.
The Gap

In 1984 Canada raised the age of criminal responsibility from 7 to 12 years of age (under the Young Offenders Act now called the Youth Criminal Justice Act). This was a significant milestone and positive move by the Canadian government. However, it left an identified gap in children’s mental health services for this target group (children in the middle years aged 6-11 engaging in disruptive/antisocial behaviour). Given the Child Development Institutes’ expertise in servicing this population, it embarked on creating a program based on best practices identified in the scientific literature to meet the needs of these children and their families. On October 1, 1985, the Institute opened its doors to the SNAP (Stop Now And Plan) program.

Please see SNAP website: [www.stopnowandplan.com](http://www.stopnowandplan.com)  [https://childdevelop.ca/snap/](https://childdevelop.ca/snap/)
SNAP video’s: [https://www.youtube.com/user/StopNowAndPlan](https://www.youtube.com/user/StopNowAndPlan)

Belief In The Proven Product

![Belief In The Proven Product Diagram](image)

PLEASE REFER TO THE PRESENTATION/ORIGINAL DOCUMENTS WHEN REFERENCING.
SNAP Summary: Overall Treatment Outcomes

Externalizing Behaviours
- Aggression
- Rule-breaking
- Conduct problems
- Oppositional behavior

Internalizing Behaviours
- Depression
- Anxiety
- Police/Youth Justice

Self-Control
- Emotion Regulation
- Problem-solving

Executive Functioning
- Social Skills
- Success at School
- Pro-Social Communication

SNAP: Mechanisms of change contributing to behavioral and affective treatment outcomes

[Burke & Loeber, 2014, 2015; Augimeri, Walsh, Donato & Piquero, 2018]
SNAP Cost Benefit Analysis
(Farrington & Koegl, 2015; WSIPP, 2018)

- Average cost of SNAP = $4,641
- Average #crimes committed = 6.9
- Estimated reduction in crime = 18% (.2) - 33% (.4)
- Estimated total savings = $89,763 (.2) - $147,423 (.4) (effect size)

86% Likelihood that SNAP will produce benefits greater than costs and a benefit to cost ratio of $4.13 (WSIPP, 2018)

Social Return Per Dollar of Investment
(Farrington & Koegl, 2015)

Conviction Only
- Program Cost: $1.0
- Social Savings with 18% reduction in crime: $2.1
- Social Savings with 33% reduction in crime: $3.8

All Crimes
- Program Cost: $1.0
- Social Savings with 18% reduction in crime: $17.3
- Social Savings with 33% reduction in crime: $31.8

Sample Innovative Research: SNAP (Stop Now And Plan) EEG Brain Study
(Lewis, Granic, Woltering et al., 2008; Woltering, Granic, Lamm & Lewis, 2011)

- 71 children (aged 8-12 years) completed a self-regulation task
- pre- and post SNAP treatment (www.stopnowandplan.com)
- Children that improved after treatment showed normalised activity

86% Likelihood that SNAP will produce benefits greater than costs and a benefit to cost ratio of $4.13 (WSIPP, 2018)
SAMPLE - Gold Standard Evidence: SNAP outperforms standard treatment

Our research and intervention achievements have been acknowledged by leading scientists specializing in the prevention of child and adolescent delinquency

- 70 is the clinical cut off for the Child Behavior Checklist (CBCL), a standardized measure for assessing items including aggression, rule breaking, and conduct
- Children with a score of over 70 are reported to have greater challenges than 98% of children their age
- Change over time for SNAP versus Standard Service participants on primary measure of antisocial behavior, showing that SNAP outperforms treatment as usual

Source: Pittsburgh Study 3rd Party RCT Study Findings (Burke & Loeber, 2014); N=252 Boys
Effect Size (.31) between the two conditions (SNAP vs treatment as usual) on Externalizing from baseline to 15-months

Importance of Continually Building the Evidence

The scientist-practitioner model (as previously mentioned) is a framework that allows research and clinical practices to stay up-to-date. Building and weaving new knowledge using innovative techniques allows us to build a solid foundation to continue to create an evidence-based framework that works for children and families in all communities.
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For a sample of SNAP media and publications (including a SNAP Research Summary) – please see https://childdevelop.ca/snap/media-publications

Evidence-Based Implementation Evaluation Checklist: Scientist-Practitioner Model in Action
(Augimeri & Walsh, 2010; 2011, 2015)
SNAP HAS RECEIVED INTERNATIONAL RECOGNITION

SNAP was selected in 2012/13 by LEAP | Pecaut Centre for Social Impact from over 120 prospects across Canada as its inaugural portfolio charity. The Centre applies the discipline of private equity investing to select, support and scale charities with quantifiable social impact.

Over $3 million of pro-bono services has been invested in SNAP.

In 1986 after a successful pilot, SNAP was funded in Toronto by the Ontario government. More recently, under the Enhanced Youth Action Plan and Services for Black Children, Youth and Families, SNAP has been selected/funded as the middle years model for Ontario.

AWARDS & DESIGNATIONS

SNAP was endorsed by the federal government which provided start-up funding for a 100 communities in need over 5 years (2017 – 2022).

SNAP HAS RECEIVED INTERNATIONAL RECOGNITION

Belief In The Proven Product

SNAP didn’t happen overnight. As of October 1, 2019 it been a 34 year journey (1985 – 2019) engaging in service delivery, development, research/evaluation, knowledge dissemination and implementation using a scientist-practitioner framework. As noted in the previous slide, SNAP was built on the best available evidence from the scientific literature at the time of launching the program. We continue to use the empirical literature to determine program enhancements based on what the evidence is noting. Given we work within a scientist-practitioner framework, fidelity and outcome monitoring is essential. SNAP is build on five key theoretical orientations within a developmental framework, resulting in our 9 core principles. SNAP is an eco-systemic model and works with the target child, their family, their community, including their peers and school. We are committed to quality assurance and ongoing research and evaluation and submit SNAP for stringent evaluation by accredited sources – 3rd party external evaluators (e.g., Crime Solutions, National Gang Center, Public Safety Canada, Public Health Agency of Canada). We strongly believe that fidelity and outcome monitoring is critical to the success of SNAP. The best evidence is the impact on the family and the child engaged in SNAP. Evaluation and research is not static, it is an ongoing process to ensure the program is effective, cost effective and meeting the needs of the children, families and communities it serves. It is not good enough to simply say, we know it works – need to engage in stringent methodology to ensure it actually is effective.
Building relationships, networks and having a diverse groups of partners with varied expertise is essential to continue SNAP’s growth and sustainability. It was this enthusiastic belief in the “proven product – SNAP” that helped us build our relationships with others who also saw SNAP as a valuable children’s mental health and crime prevention model – that needed to scale - to help as many children and their families, as possible.

Participating in knowledge dissemination activities is extremely helpful in building a network of likeminded experts and professionals. There are many different ways one can increase their reach and build a supportive network such as participating in scientific and clinical conferences, forums and learning networks; publishing in peer reviewed journals; and hosting town hall meetings.

If we had to pinpoint one important development outside of having a proven product was finding your champion. The McConnell Foundation (especially Lyn Baptist who we refer to her as ‘SNAP’s Godmother’) was our first partner to believe in the potential of SNAP and invest in it.
In 2012, **LEAP| Pecaut Centre for Social Impact** selected SNAP as their inaugural innovation to work within a venture philanthropy framework to scale SNAP across Canada—to reach more children, families and communities. The goal—100 organizations, reaching approximately 140 communities and 14,000 children and their families. Saving Canada potentially millions in mental health, health and criminal justice costs.

In the spirit of David Pecaut that LEAP|Pecaut Centre for Social Impact is founded. He challenged us to embrace complexity and solve complex social problems to improve society and well-being. To strive for 

**“ELEVEN OUT OF 10”**
SNAP is scaling its impact across Canada through a Venture Philanthropy Model with LEAP: The Centre for Social Impact

Incubated by Pecaut Centre

Strategic Partners
- Government
- Corporations
- Foundations
- Private Investors
- Pecaut Centre

Founding Partners
- The J.W. McConnell Family Foundation
- The Krembil Foundation
- The T.R. Meighen Family Foundation
- The Honourable Margaret McCain

LEAP Private Sector Partners
- Founding Partners
- Government
- Corporations
- Foundations
- Private Investors
- Pecaut Centre

Goal: 5 Years 100 Sites (140 Communities) 14,000 Children

Saving Canada over $1 Billion Dollars

GOAL
Canadian leader in understanding and treating conduct problems and impacting ~20,000 high-risk children in Canada over next 5 years

MECHANISM
- Core SNAP Boys and Girls programs
- Increase number of sites
- Increase children per site
- Improve productivity
- HQ service offering
- Non-profit partnerships
- Children’s mental health
- Schools model to increase awareness and identify high risk children and fill pipeline
It really does take a village to strengthen the growth of SNAP. In 2012, LEAP|Pecaut Centre for Social Impact selected SNAP as their inaugural innovation to work within a venture philanthropy framework to reach more children & families in Canada. Bringing together government, businesses, foundations and individual donors, to support and sustain SNAP in order to create massive social change, in addition to create measurable impact - the venture philanthropy model works - with the collaboration of others.

**LEAP|Pecaut Centre for Social Impact’s Approach**

How do we work towards improving lives? We provide strategic and hands-on support to the highest impact social ventures. We unlock the expertise of our team & our private sector partners, to scale what works across Canada. WE SCALE WHAT WORKS. We support a portfolio of social ventures as they tackle some of the biggest problems in Canada and beyond.

For details on LEAP|Pecaut Centre for Social Impact please see: https://leap-pecautcentre.ca/
Continue to Find New and Compelling Ways To Tell The SNAP Story

To make sure that we keep people informed and excited about SNAP and our journey, we are constantly find new and compelling ways to tell the SNAP story. By providing the right information to potential SNAP affiliates, foundations, and donors, we continue to build excitement about expanding our reach to help more children and their families have access to evidence-based programs.
Importance of Keeping the Scientist-Practitioner Framework Alive and Active

The SNAP Model uses a scientist-practitioner framework – where science informs practice and practice informs science. They really go hand-in-hand. Clinical and research work together to ensure the SNAP model is evidence-based for our clients. It’s a continuous mechanism loop -- need to continue to develop and implement the appropriate frameworks that ensures the balance between clinical and research – and implementation science. The scientist-practitioner SNAP framework helps to guarantee a strong impactful and cost-effective service/product.
A Data System Plays A Critical Role

In today’s world we know that technology plays a critical role when running an aggressive national expansion project. Technology increases accessibility between SNAP HQ and our Affiliate sites. It helps us understand key elements to achieve high fidelity ensuring effective services. To do this work, we created our own digital implementation tool, called SNAPIT (SNAP Implementation Tool) with support from SmartSimple, Ernst & Young (EY) and OnX Canada, to help assist clinical, research, and implementation teams effectively monitor, implement and sustain SNAP.

It's all about the DATA!
What is SNAPiT?

A cloud-based, fidelity monitoring tool designed to coordinate, support, and measure implementation and service delivery activities to enhance capacity to evaluate overall commitment and integration of the SNAP model within communities to promote sustainability.

SNAPiT Overview

Pre-Implementation
- Exploration/Readiness
  - Pre-implementation consultation
  - Site Assessment
  - Fit Assessment
  - Readiness Checklist
  - Community Stakeholder Support
  - Growth Management

Implementation
- Adoption/Support
  - SNAP Licensing
  - Training
  - Training/consultation evaluations
  - Integrity and fidelity monitoring
  - Consultations
  - Tracking hours/content
  - Training/consultation evaluations

Case Management

Treatment Planning/Impact
- Complete digital case/client files
- Real-time Risk/Need Assessment Support
- Treatment Planning/Review
- Ongoing treatment/service tracking and planning
- Evaluation Portal Access

Assessment/Evaluation
- Automatically schedules & scores measures data, including:
  - Standardized clinical measures: CBCL, TOPSE, SSIS, CR-P
  - Contains SNAP specific forms and tools – SIR, BISC, FIF, etc.

SNAPiT Video Portal
- Monitors fidelity adherence
- Secure video upload of treatment sessions
- Forms integrated directly with videos Online scoring
- Monitors the progress of LAS for fidelity rating for both the Site manager and the CDI Consultant
- Safe, secure, Canada-based servers

Please refer to the presentation/original documents when referencing.
Additional Components

**Fund Manager**
- Coordinate grant applications, manage fund raising
- Link stakeholders (funder, CDI, affiliate) to grant to allow stakeholder access to reports

**Budget Manager**
- Track, manage, distribute funds as they come in

**Community Team Manager**
- Track and coordinate community engagement
- Help identify potential community partners

**Staff Manager**
- Manage staff performance and professional development

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Privacy & Security

*SmartSimple* (SNAPiT platform) and *OnX Canada* adheres to industry leading compliance and audit standards to provide IT solutions that solve big challenges and achieve outstanding business results.

*CAFE* (SNAPiT VP platform) was designed to exceed current PHIPAA and Safe Harbour requirements in terms of transmission, encryption, disaster recovery and least privilege standards.
The Journey

Reality looks very different from what is planned.

Pre-Implementation takes time: We have learned that we need to avoid rushing the pre-implementation phase or key elements for successful replication of SNAP will be at risk.

We are finding that if we invest in pre-implementation activities at the beginning – it will help improve uptake and the implementation process.
Pre-Implementation

It takes time to assess and learn if we are a good fit for potential SNAP affiliate sites. Several assessments are conducted with each potential site to make sure we’re a good match. We consider their **fit**, **feasibility** and **readiness** before implementing a mental health evidence-based service such as SNAP for their community.


SNAP® Companion Manual for Aboriginal Communities: Starting your community’s journey with SNAP®. (2013) Toronto, ON: Patty Chambert and Child Development Institute. [Currently being revised]

To request copies please contact: snap@childdevelop.ca

Be Adaptable & Responsive

Every community is different and it is important to recognize the context and culture of the recipient community. Understanding available resources and cultural needs are critical factors within each community. To respond to these contextual differences, we have taken the initiative to work with experts to create culturally responsive and safe guides for implementing SNAP in Indigenous and Black and African/Carrabean Canadian Communities to ensure that the SNAP model is able to meet their needs from a culturally responsive, inclusive and safe lens.

To meet the needs of communities across Canada, we designed three service delivery approaches to accommodate the variable available resources and the needs of communities:
1. SNAP Clinical Full Continued Care Model;
2. SNAP Clinical Time-limited Model: and/or
3. SNAP for Schools Universal Model.

Being responsive to contextual differences ensures SNAP continues to grow wherever it is planted!
SNAP Model Programs

SNAP Boys / SNAP Girls
Clinical intervention for children (ages 6-11) with serious disruptive behaviour problems and their families.

SNAP for Schools
Universal targeting for all students to learn the SNAP strategy in a school setting reinforced by educators and peers.

SNAP Youth Leadership
A continued care model for identified high-risk youth (ages 12-18) to provide ongoing support & enhance SNAP skills through the transition from pre-adolescence to adolescence.

SNAP Youth Justice
SNAP programming for youth (ages 12+) involved in the youth justice system (custody, probation, community).

SNAP PROGRAM IMPLEMENTATION OPTIONS

1. SNAP Boys & SNAP Girls: Full - Continued Care Model (Clinical) Intervention
   • 13-weekly Concurrent SNAP Parent and Children’s groups
   • Other SNAP Components Based on Level of Risk/Need for as long as a family requires the service (up to age 18):
     – individual/family counselling, school support/advocacy and community outreach activities, serving both boys and girls; and SNAP Youth Leadership (for SNAP graduates)

2. SNAP Boys & SNAP Girls: Time Limited - Group Focused Model (Clinical) Intervention
   • 13-weekly Concurrent SNAP Parent and Children’s group
   • In addition to other SNAP components:
     – individual and/or family mentoring activities serving both boys/girls for a predetermined length of time.

3. SNAP in Schools (Universal) Prevention
   • 13-weekly SNAP classroom sessions are delivered by designated trained staff – these are typically from an outside organization and/or a member of the school support team.
     – SNAP Psycho-education Parent Workshops/materials can be offered.
SNAP CAN EFFECTIVELY FILL A NEED FOR HIGH-RISK MIDDLE YEARS CHILDREN...INCLUDING YOUTH

Example - Ontario has been proactive at fulfilling mental health service needs of targeted areas of concern (e.g., Enhanced Youth Action Plan, Services for Black Children, Youth and Families), but a service gap remains for middle years children, their families and communities.

SNAP addresses the continuum of mental health needs, including the most severe of disruptive behaviours (top 2%)

<table>
<thead>
<tr>
<th>Severity</th>
<th>Low (Universal)</th>
<th>Moderate</th>
<th>High/Very High</th>
<th>Very High</th>
</tr>
</thead>
<tbody>
<tr>
<td>Continuum of Needs</td>
<td>Level 1</td>
<td>Level 2</td>
<td>Level 3</td>
<td>Level 4</td>
</tr>
<tr>
<td></td>
<td>(SNAP for Schools)</td>
<td>(SNAP Clinical: Time Limited)</td>
<td>(SNAP Clinical: Time Limited or Continued Care)</td>
<td>(SNAP Clinical: Continued Care)</td>
</tr>
<tr>
<td>Middle years (6 to 11 years)</td>
<td></td>
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</tbody>
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Working together to improve the landscape of children and youth mental health.

1. Loeber, Farrington, & Petechuk, 2003

Diversified Funding Models

SNAP Youth Justice

In 2012 a SNAP Youth Justice Model was developed and piloted in Ontario. The aim was to build a seamless system between custody, probation and community. Target age is youth 12 – 18.
Diversified Funding Models

There can be varying different funding models to fund the implementation of SNAP services in communities or regions/countries. For example, in Canada, with the support of our leading partner, LEAP|Pecaut Centre for Social Impact we are testing and using a new and innovative funding framework --venture philanthropy for our SNAP national expansion. In Ontario, provincial government has endorsed and selected SNAP as a middle years model program under the Enhanced Youth Action Plan – Middle Years Strategy and under the Services for Black Children, Youth and Families (formerly the Black Youth Action Plan), funding SNAP implementations and service delivery for various communities primarily serving marginalized families and communities. In Florida, under the lead organization Florida Network and in partnership with the Florida Department of Juvenile Justice they partake in the central funder model where funders give the Florida Network of Youth and Family Services the money in which they distribute to licensed SNAP affiliate sites.

Government Can Expedite Expansion Efforts
A SNAP regional mobilization strategy is necessary as it visualizes how we can bring SNAP to as many communities as possible. The key to this strategy is having a regional champion who helps build awareness in the region, assists with outreach and engagement and to communicate with regional stakeholders in critical areas like child welfare, children’s mental health and all levels of government. With this framework, communications between regional stakeholders, the regional champion, and regional mobilization group flow smoother and freer with this model.
SNAP Regional/Community Mobilization Working Group

PURPOSE:
- To build awareness in the region
- To assist with outreach & engagement
- To focus on local & regional government
- To engage regional influencers in critical areas

PURPOSE:
- To facilitate introductions and open doors for SNAP expansion team
- To liaise with, and support, community teams
- To assist with finding local sources of funding for affiliates

Regional Champion/Consultant (Paid)

Government (all levels)  Children’s Mental Health  Local media  Child Welfare  Community stakeholders (police chiefs, school board directors)  Community Foundations/other affiliate funders

SNAP Regional/Community Mobilization Working Group

Community Specific Implementation Plan

Community Implementation Plans are useful to help visualize the communities’ involvement and identifying key stakeholders.

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SNAP Community Implementation Plan
Partnering to Help Children and Families
(Augimeri, L.K., Pepler, D., Walsh, M., & Kivlenieks, M., 2018)

SNAP Headquarters (HQ)
Child Development Institute, Toronto, ON

SNAP Licensed Affiliates
• Local children’s mental health organization
• Non-profit Community-based organization
*Typically leading the community plan in partnership with SNAP HQ
"Community champion"

Local school board involvement
• School Boards
• Schools
• School Educators
*SNAP strategy taught to all students (universal application – social emotional learning)

SNAP Regional Mobilization Working Group

Community Team
(policing, children’s mental health centres, schools, non-profit community based orgs, child welfare, other)

Students who need additional mental health supports are referred to a licensed SNAP Affiliate within the community.

Change Management

Communication  Plan  Improve

Measure  Execute

Team  Engage

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Change is constant and as a result often disruptive and scary but necessary. In order to grow and adapt to different situations, we have to be willing and be prepared to change, adjust, pilot test, and re-test to ensure we are effectively addressing the various challenges that come our way. Change Management is a strategy that guides, monitors and track our efforts to address the needed alterations— from deploying IT systems, adaptable licensing contracts, variable service delivery options, and measuring impact in innovative and creative methods.

Change is inevitable – if we are doing are jobs. We have to be dynamic and not static especially when thinking about complex issues/problems.

Your Team Are Driving The Change
Your Team Are Driving The Change

Finding the right people to champion an expansion project is crucial. Creating time to find the right person that can do the work, isn’t afraid of change, and fits within our team to help grow our organization is often a challenge in a fast paced innovation and when one is embedded within a service delivery organization. Having internal supports to facilitate this work is key and needed.

Surround yourself with awesome mentors and leaders.

GOOD ENOUGH…. IS NO LONGER ENOUGH!

Especially when it comes to the well-being and safety of our children, families and communities

Dr. Leena Augimeri
The following publications - lists the key content of lessons learned during the 33+ year journey of Stop Now And Plan which the content can be drawn from: