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Adaptation Toolkit: Co-creating a Local Resource with Caregivers Supporting a Young Person with Substance Use Disorder

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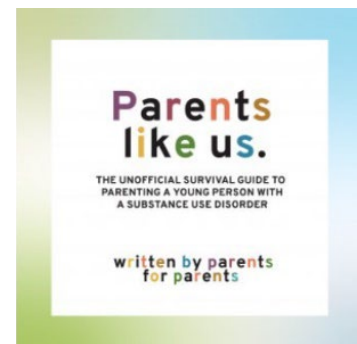


Introduction

Project Background

The challenge of navigating substance use treatment systems in Canada is well documented, with families having a significant impact on the success of loved ones' accessing services. In 2019–2020 and led by the Canadian Centre on Substance Use and Addiction in partnership with [Foundry BC](#) and [Alberta Health Services](#), the [Improving Treatment Together \(ITT\) project](#) held five workshops with families and caregivers of young people accessing treatment services in Alberta and British Columbia. The workshop findings demonstrated that families and caregivers are taking on the difficult role of case management for their young people. They reported having to navigate multiple and complex systems and often functioning as the direct line of communication between systems (Marchand et al., 2022).

Responding to the need for greater support for parents and caregivers of young people impacted by substance use, a group of parents and caregivers from Victoria, B.C., co-designed a local parent handbook with ITT project partners CCSA, Foundry Central Office and Foundry Victoria. The result was the [Parents Like Us: The Unofficial Survival Guide to Parenting a Young Person with a Substance Use Disorder](#).



Written from the parental voice, the handbook offers helpful substance use resources and information for those living in Victoria as they navigate substance use services and systems alongside their young person. It does this by:

- Recommending ways to foster resilience and prioritize parent and caregiver well-being,
- Sharing stories from parents and caregivers facing similar challenges to help foster community connection,
- Providing key evidence-based information and resources on substance use and addiction to inform navigation, and
- Providing a community-specific list of resources and services available in Victoria.

“This handbook is a starting point in the search for connection, understanding, support and resources.” *Parents Like Us*

Co-designing this handbook with the caregivers' voices as leads makes it stand out from other clinical or “top-down” resources that were created by professionals. Caregivers with living expertise offer information that is practical, trustworthy, authentic and reliable. Since its release in October 2021, the handbook has been shared widely across the Foundry network and Island Health in British Columbia.

Some aspects of the original handbook are specific to Victoria, especially the personal parent stories and the list of community resources at the end. However, there is a potential benefit for other communities to adapt the original handbook to meet their community's specific needs.

To spread the reach of this type of resource to other areas of Canada, CCSA partnered with Sault Ste. Marie Hospital to adapt this handbook for the needs of caregivers in their region. The following

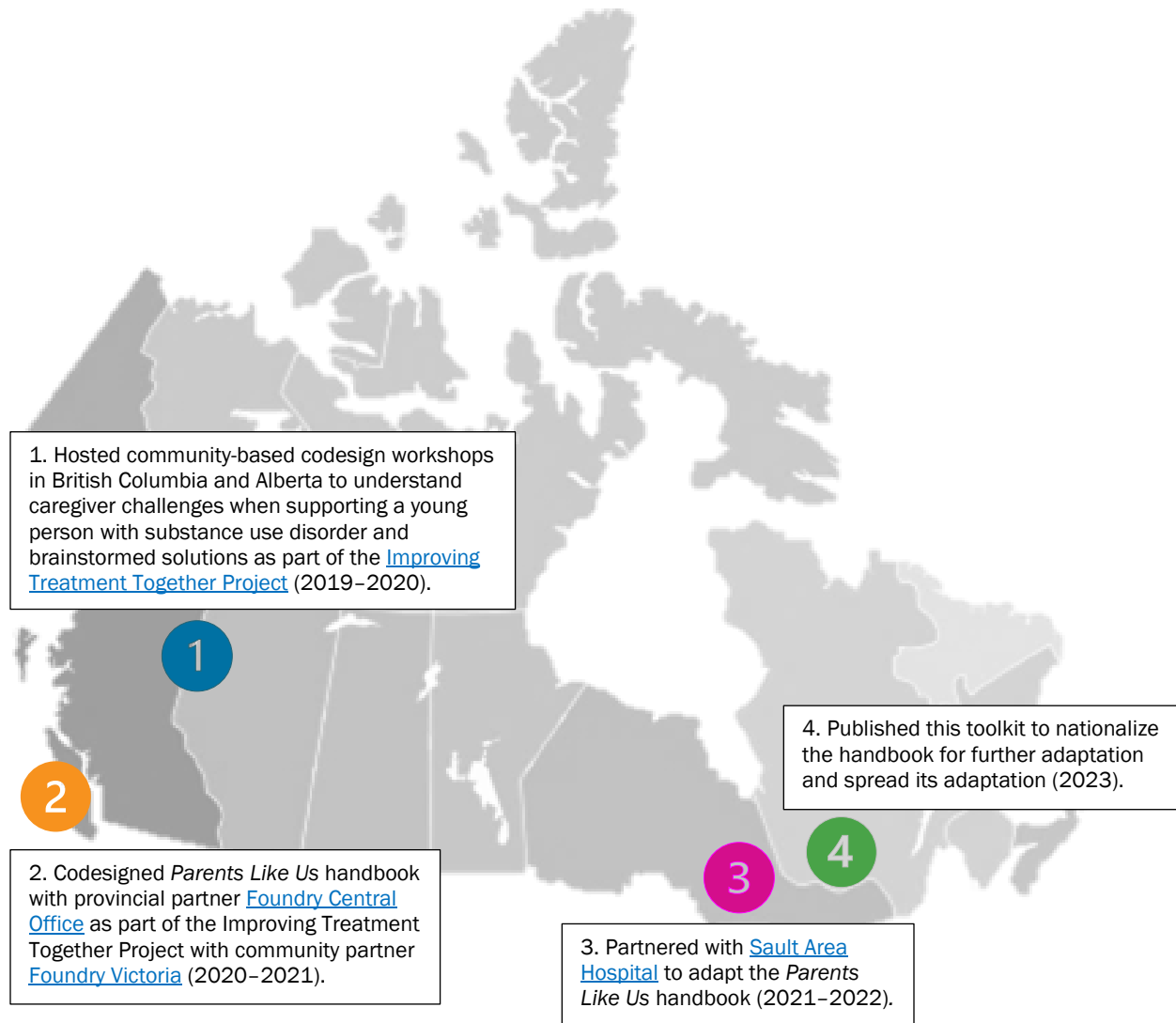


toolkit offers resources and considerations that can help communities adapt their own handbooks like Sault Ste. Marie.

Creation of the Toolkit

This toolkit is the culmination of experiences gained and lessons learned throughout our time working with caregivers in Western Canada and Ontario. Below is a summary of the activities that informed the creation of this toolkit and the recommendations and resources within it.

Figure 1. Summary of activities to create this adaptation toolkit





Intended Audiences

This toolkit is intended for professionals, caregivers and caregiver allies who want to create their own version of the *Parents Like Us* handbook in their communities with families and caregivers leading the process. The experiences and voices of parents and caregivers are paramount to this resource and any future versions. Any adaptation efforts must prioritize the leadership and inclusion of caregivers and parents in each step of the process. This toolkit will provide resources to assist with this process.

Terms and Language

Definition of Family

In this context, we borrow Centre for Addiction and Mental Health's (CAMH's) definition as follows:

the words “family,” “loved one” and “relative” describe people with strong emotional, psychological and/or economic commitments to one another. It can include those connected by biology, adoption, marriage/partnership, friendship or community/neighborhood. “Family,” “loved one” and “relative” are used as broad terms to describe anyone who has a significant relationship or role in the life of a person. (CAMH, 2022)

This includes families formed by choice who play a vital role in the lives of many LGBTQ2+ youth, where close relationships provide care, affirmation and a sense of belonging (Novoa, 2021). More information on chosen families is available on [the Vanier Institute of the Family website](#).

For the purposes of this document, we refer to “caregiver” to encompass the definition for family, loved one and relative above, including a parent or guardian supporting a young person with substance use disorder.

Language

Substance use is heavily stigmatized, with stigma being one of the biggest barriers to accessing supports and services for substance use. When working with people impacted by substance use, integrate person-first language into your practice. You can refer to [Overcoming Stigma Through Language: A Primer](#) (Canadian Centre on Substance Use and Addiction & Community Addictions Peer Support Association, 2019) for practical language tips to reduce the stigma around substance use and addiction.



Notes on Meaningful Engagement of Caregivers

We heard that what sets the *Parents Like Us* handbook apart from other resources for caregivers is that it is entirely driven, written, and produced by parents.

“This is excellent, I wish I had had this at the beginning of this terrible road. Especially appreciate that it is written from parental experience” Parent who reviewed the handbook

While engaging families requires commitment, a resource that is driven by the voices and needs of caregivers in your community is the goal. Caregivers are the experts in their experiences and have a wealth of first-hand knowledge about the system. Your role as facilitator or convenor is to provide a space to bring these experts together to share, learn and create helpful resources for others in their community. Check out this blog post, [Parents Like Us Have Something to Say – Foundry](#), by Chantal Brasslet, a family peer supporter at Foundry Victoria and implementation champion for the ITT Project about what it was like to lead the creation of the handbook.

Excellent resources on family engagement that can be accessed at:

- The [Ontario Family Caregivers' Advisory Network website and](#)
- [Knowledge Institute on Child and Youth Mental Health and Addiction](#), particularly the quality standards for family engagement web page.

Co-design as a Guiding Framework

The engagement process in Victoria and Sault Ste Marie were guided by an overarching framework of co-design. Applying co-design principles is an inclusive and meaningful approach that brings in the target population as subject matter experts in their lived experience. Including parents and caregivers in the adaptation process will help ensure the final product is effective, relevant and meets the needs in your community. Co-design is an iterative process, so it looks a little different each time in practice. For resources and tips on co-design methodology, read [Co-design: A Powerful Force for Creativity and Collaboration](#) and [Principles of Co-design](#)

Process, Not Product

In our professional lives, we are often asked about our outputs, results, timelines and project deliverables. This naturally makes us focus on results of our work. However, the experiences of storytelling in Foundry Victoria and the arts-based methods applied in Sault Ste. Marie how value is created in the process of bringing caregivers together to share experiences.

As such, we encourage you to consider the journey caregivers will be on when you bring them into a space together and why the family engagement process is to be prioritized over any resources that are created along the way.



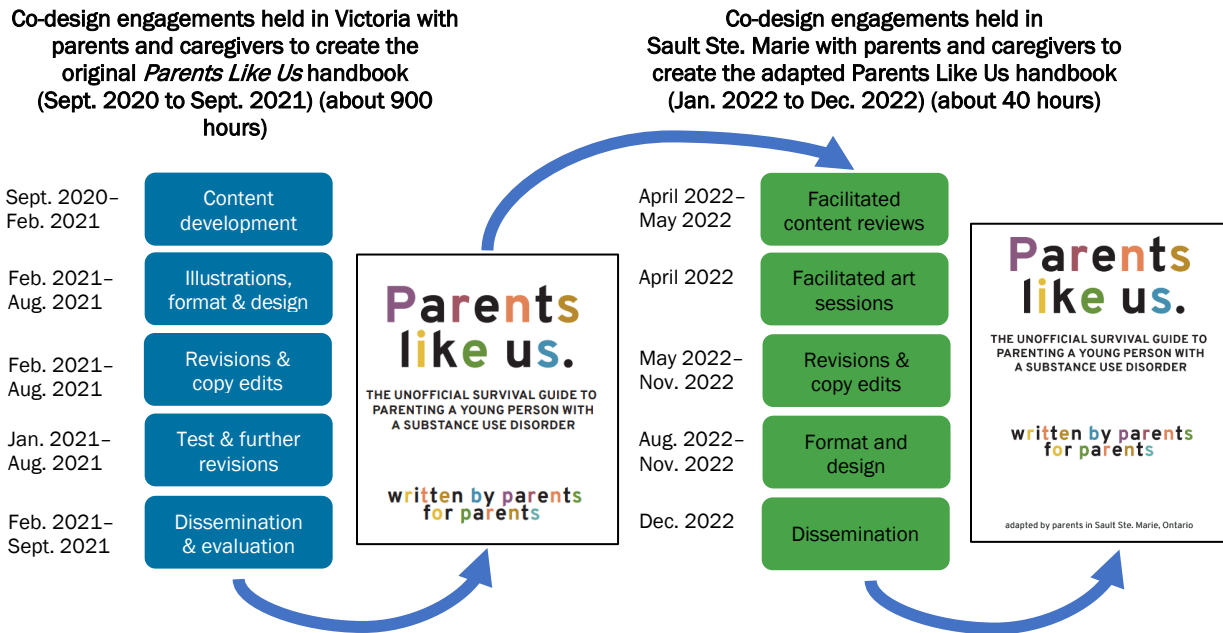
How to Adapt *Parents Like Us*

Learning from Sault Ste. Marie

To recommend a process for adapting *Parents Like Us*, we must draw from our experience supporting Sault Ste. Marie in their efforts to adapt the original handbook. Like many communities across Canada, Sault Ste. Marie did not have the resources or capacity to replicate the full co-design process used to create the original handbook. In addition, there was an urgent need for parent and caregiver support in the community. This required a new process to be developed, one that ensures meaningful engagement in the absence of conducting a full co-design initiative.

Below is a depiction of the process that Sault Ste. Marie took to adapt *Parents Like Us* and how this process differs from how the original handbook was created. You can view the final handbook by Sault Ste. Marie [here](#).

Figure 2. Comparison of co-design processes in Victoria and Sault Ste. Marie





The Adaptation Process

Based on what we learned supporting the Sault Ste. Marie adaptation, we created a step-by-step process for communities to adapt *Parents Like Us* to their own community needs. Below is a summary of the recommended adaptation process, followed by a description of each step. While every adaptation will look different, organizations should strive to take the following steps:

Figure 3. Process to adapt *Parents Like Us* in your community



Step 1: Identify Community Need for an Adapted Handbook

Before committing to any adaptation work, confirm that there is a need for an adapted handbook in your community. This can be done through key informant interviews or other types of consultations with parents, caregivers, service providers or any combination of these, or through community-level data. Consider partnering with communities that work directly with marginalized or equity deserving populations to help to determine the need.



Step 2: Identify Lead Organization and Secure Buy-in and Dedicated Resources (Staff, Budget, etc.), to Complete the Adaptation

Successful adaptation begins with the support and buy-in of the organization. Having a champion at the leadership table will help with budget and capacity to ensure the completion of the handbook. Beyond leadership buy-in, dedicated resources are needed to complete the adaptation. This includes a [project team](#) as well as a [dedicated budget \(see the appendix for a sample project team and a sample budget\)](#).



A Note on Compensation

Offering compensation is part of best practices for engaging people with lived and living experience. It is critical that funds are set aside to compensate parents, caregivers and community champions for their time. Estimates to compensate parents, caregivers and community champions should be built into the overall project budget. See BC Centre for Disease Control's [Peer Payment Standards For Short-Term Engagements: Created in Collaboration with Peers and Providers](#).



Step 3: Identify Parent or Caregiver Champion in the Community to Support the Adaptation

You will need to work closely with a champion from your community — a parent or caregiver of a young person with lived or living experience of substance use, who can relate to the parents in your engagements and help create a sense of purpose and community. Onboard a caregiver champion to help lead the discussions to ensure safety with caregivers. This champion will also ensure that the co-designed material is led with the parental voice. A [description of a caregiver champion](#) can be found in the appendix.



Step 4: Recruit and Partner with Parents and Caregivers from the Community

Consider recruiting and partnering with existing community groups and organizations that serve the parent and caregiver target population. For example, is there a community centre with a parent advisory group? Do you have a local chapter of [Moms Stop the Harms](#) or something similar? Go to where parents are already gathering or meeting. You may also consider having the parent champion to lead recruitment through their own channels.

Make conscious efforts to reflect the diversity of your community in your parent and caregiver engagements. One way to do this is by partnering with organizations that represent the diverse members in your community.

In recruitment messaging, ask parents what engagement method would work best for them (e.g., in person, virtual). Include information on the scope of the project, expectations, length of time and honoraria information.

Step 5: Co-host Adaptation Sessions with Parents and Caregivers from the Community

Adaptation sessions are used to identify what needs to be adjusted, added to, or removed from *Parents Like Us* to ensure it resonates with parents and caregivers in your community. This can include adding new themes or topics to the handbook, adjusting the images or adding stories from parents in your community. Any changes should be guided by the recommendations of parents and caregivers in your adaptation sessions.

Given the difficult nature of the discussions that may arise during the sessions, create a safe space for parents and caregivers to share their thoughts and perspectives. Facilitators should be proactive in managing conflict during these sessions. There are facilitation tools to help manage conflict, including the use of a [parking lot](#) to help set boundaries and [co-creating working agreements \(see appendix\)](#). Creating a safe space for parents and caregivers can include:



- Ensuring you are taking steps to maintain confidentiality and anonymity for parents, caregivers and the young people they are caring for. For example, asking members to:
 - Not use their young person’s real name (e.g., say “son,” “daughter” or “child” instead);
 - Use a pseudonym if they prefer; and
 - Not share someone else’s story outside of the group without permission.
- Ensuring all data collected with identifying information is stored securely.
- As much as possible, notes taken during facilitation sessions should be verbatim to ensure caregiver experiences are validated (i.e., do not paraphrase or edit).

The appendix includes sample [facilitation materials](#) from the three adaptation sessions CCSA hosted with parents and caregivers in Sault Ste. Marie. These materials can be used as a starting point to guide the adaptation sessions in your community. We encourage you to also consider integrating arts-based methods into your approach, such as art facilitation methods or storytelling.

A Note on Sharing Stories Safely

Telling stories is an effective and powerful way of sharing knowledge. However, you should consider a few things before families share their stories.

Storytelling often involves processing and sharing trauma, which has the potential to retraumatize the audience or the storyteller. This can include sharing experiences of abuse and violence, serious injury or death. As mentioned above, establish a group agreement in terms of how group members will care for each other and themselves in the space. Encouraging group members to practice self-care (i.e., taking breaks, sharing only what they want to share) is another important part of safety. There are experts in storytelling and trauma-informed care that could support your group in this process.

If you’re looking for resources on how to tell a story, this [handout by Jack.org](#) and [MHCC’s resource on sharing stories](#) contain some ideas to help you hone your storytelling, including starting with key learning you would like to convey in your story.

- To see examples of stories, there are several organizations that have created digital stories on personal experiences with opioid use. These include [The Opioid Chapters by the Ontario Drug Policy Research Network](#) and [Healthy Debate: Faces of Health Care](#), Health Canada’s [Audio Series on Opioids: In Plain Sight](#) and BC government’s [Behind the Numb3rs](#). Frayne has recently release an [online gallery](#) of youth and family engagement stories across a number of sectors from the arts, health and farming.
- Another method to consider is using arts-based approaches for participants to share their experiences. A collective of artists whose lives have been affected by overdose came together to display their works [online](#).

Step 6: Adjust the Handbook Based on What You Heard During Adaptation Sessions



The adaptation process will look different from community to community and will depend on the time, resources and stakeholders that have been engaged. After completing the three engagement sessions with the caregivers in Sault Ste. Marie, it was clear that there were various approaches to adapt the handbook – minimal, moderate and full adaptation. A table of [adaptation options](#) can be



found in the Appendix. The choice you make will depend on resources, budget, time, caregiver involvement, design, consensus and other factors. Sault Ste Marie selected option 2, moderate adaptation.

Step 7: Publish and Share (and Celebrate!) the Adapted Handbook

Once the adjustments have been made to the original handbook, it can be edited, translated (if needed in your community) and posted to the web. We heard from parents in Victoria and Sault Ste. Marie that they also appreciate having hard copies, so consider having printed copies available to complement the online version.

Before publishing the handbook, ensure you have properly acknowledged the original authors of *Parents Like Us*. We include suggested text in our [template package](#).

Set aside time to celebrate the success of the group. For example, provide dinner or a book launch party when the book is completed and ready to be shared.

Step 8: Evaluate the Adapted Handbook

Many times, project cycles end when the product is released to the public. However, build in time and resources to evaluate the success and impact of your adapted handbook after it has been released. A sample [evaluation survey](#) can be found in the appendix.

Template Request

Please complete the form below if you meet the above criteria and would like to receive a templated version of the handbook, including the modifiable text from *Parents Like Us* and design elements.

<https://www.ccsa.ca/adapt-parents-us-handbook-template-request-form>



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Appendix: Sample Materials and Tools

Sample Project Team

Role	Tasks
Project lead	Liaising with family or caregiver champion and caregivers; co-facilitating sessions with the caregiver; updating the caregiver feedback content; and sharing and championing the completed handbook in the community
Project co-ordinator (or similar)	Managing budget, processing honoraria, scheduling facilitation methods, and supporting vendor purchase orders and contracts
Family or caregiver champion	Assisting with connecting and recruiting caregivers in the community; leading group discussion and co-facilitation; reviewing content; championing the completed handbook in the community (see caregiver champion description below for a full description)

Sample Budget

Item	Unit
Honoraria	\$25–\$45/hour
Family champion salary (if not already embedded in the organization)	\$25–\$45/hour
Arts-based facilitator (i.e., storyteller expert or art therapist)	\$1,000–\$5,000
Graphic design* Varies widely depending on use of templated materials	\$0–\$4,000
Editor	\$60–\$124/hour
Translator (if required)	About 31 cents/word
Project team salaries	Highly variable
Printing	\$500–\$5,000

Notes. This is only a sample budget and will vary depending on the level of adaptation chosen and what the standard salaries and honoraria amounts at your organization. Total hours worked will depend highly on the adaptation level. In Victoria, upward of 900 hours were worked create the handbook. In Sault Ste Marie, about 40 hours were worked to create the adapted handbook.

Caregiver Champion Description

Rationale: Engaging local champions is a well-recognized strategy in implementation and quality improvement projects (Shortell et al., 2004). Champions are defined in the field of implementation science as “individuals who dedicate themselves to supporting, marketing, and driving through an implementation, overcoming indifference or resistance that the intervention may provoke in an organization” (Powell et al., 2015, Table 3, p. 9).



Characteristics: A review of the literature (Miech et al., 2018) on champions has identified more than 26 characteristics of effective champions, including having enthusiasm and energy to drive the implementation process, being a strong educator and having presentation skills and political acumen. Some of these qualities to consider in selecting champion(s) are:

- **Communication skills:** negotiating, advocating, communicating across organization and having strong educator and presentation skills;
- **Leadership skills:** having political acumen, leading teams and recruiting new team members, providing vocal, highly visible support and encouragement for the initiative, collaborating and engaging in team planning and goal setting;
- **Knowledge:** full understanding of both the initiative and the local context;
- **Technical skills:** collecting data, tracking progress and providing feedback;
- **Personal qualities:** being enthusiastic and energetic to drive the implementation process, maintaining a positive focus, believing in the initiative and committing to its successful implementation, and being personable, respected, credible and well-liked by peers;
- **Facilitation skills:** managing and leading a group of people through discussions to a successful decision, solution or conclusion, and creating an objective, non-judgmental, participatory and inclusive environment;
- **Roles and activities:** identifying and engaging local stakeholders (parents and caregivers) and gaining required leadership buy-in, leading facilitated adaptation sessions, supporting the plan for dissemination, attending project planning meetings and supporting local evaluation to determine what's working and opportunities for improvement.



Facilitation Materials

Key Facilitation Resources

- [Parents Like Us: The Unofficial Survival Guide to Parenting a Young Person with a Substance Use Disorder](#)
- [Land acknowledgement link](#)
- [Grounding exercises](#)
- [National crisis lines](#)
- Virtual collaboration tools:
 - [Google Jamboard](#)
 - [MURAL](#)
 - [Miro](#)
- [The Parking Lot Facilitation Tool – Nonprofit Stewardship](#)

Adaptation Session 1

Goal or goals of the session: The first session is an introductory session to learn about the project, meet the participants and explore at a high level how the content and approach of the original *Parents Like Us* handbook captures the experiences caregivers have had supporting a young person in their community. The themes generated from this discussion will inform future sessions.

Proposed duration: 1–1.5 hours

Sample agenda:

1. Welcome and introductions
2. Project purpose and parameters
3. Proposed timeline for sessions
4. Co-creating a working agreement
5. Group discussion: Generating themes for community handbook
6. How might a resource like a parent handbook support caregivers in your community?
7. Closing or wrap up



Detailed facilitation instructions: Session 1

Agenda Item	Instructions
Welcome and land acknowledgment	To open the session, we recommend beginning with a land acknowledgment. Visit the land acknowledgement webpage to identify the land on which your community resides.
Introductions	<p>Hold space for those attending the session to introduce themselves by stating their name, pronouns and what brought them to the session.</p> <p>To respect the confidentiality and privacy of the group and for the privacy of their young person, allow participants the option to use initials, a pseudonym or just their first name to introduce themselves. If the meeting occurs in a virtual setting, offer flexibility by allowing participants to keep their cameras off.</p>
Grounding exercise	<p>A grounding exercise gives participants time to reflect and ground themselves in the moment before discussing the adaptation. Participants may be coming from work or other personal activities and carry the feelings and stress of the day. Taking time to ground participants can help encourage active participation in the session and increase the safety and comfort of participants.</p> <p>For sample exercises, see grounding exercises.</p>
Project background	<p>Introduce “Parents Like Us: The Unofficial Survival Guide to Parenting a Young Person with a Substance Use Disorder” including:</p> <ul style="list-style-type: none">• Its origins and the role of parents from Victoria, B.C., in its development.• The purpose and scope of the handbook and• The existing handbook contents
Purpose and parameters	<p>For the first session, describe the purpose, goals and expectations of the adaptation, including anticipated timelines for the project.</p> <p>Once complete, outline the goals and expectations of this first session.</p>
Disclosure and supports	<p>Given the focus of the sessions, caregivers will be talking about experiences and challenges related to navigating the substance use support system, which may be a sensitive topic for some. As a host, you are responsible for putting safety and support measures in place to increase participants’ comfort. Some ways to do this include:</p> <ul style="list-style-type: none">• Reminding participants that they can leave at any time and will still receive full compensation for their participation;• Allowing participants to keep their cameras off during virtual sessions;• Allowing participants to use pseudonyms, initials or a first name;• Providing participants with access to crisis supports and services, including toll free crisis lines available to them;



	<ul style="list-style-type: none">• Disclosing your intention to record sessions (if virtual), including the reason or reasons for the recording, where the recordings will be stored, who can access them and for how long; and• Co-creating a working agreement with participants (see below).
Working agreement	<p>A working agreement is a set of shared values developed by session participants to guide conduct and set expectations for participation. The purpose of the working agreement is to ensure that participants feel safe, valued and respected when sharing their experiences, and voicing their thoughts and perspectives before engaging in difficult conversations.</p> <p>Once co-created, the working agreement should be reviewed at the beginning of every session to remind participants of the shared values of the group and hold participants, including the host and moderator, accountable to the agreement.</p> <p>Here's a sample working agreement that was co-created during the first session with Sault Ste Marie:</p> <div data-bbox="451 884 1421 1476"><p>What do you need in order to feel safe to participate in this working group to achieve our objective?</p><ul style="list-style-type: none">No judgement re spelling!All questions are welcome. no bad Qs!What do I need to do to be presentDon't share outside of this groupRespect and listening ear to achieve our goalConfidentialityNo judgingChallenge the idea not the personGood will. Always something to learn, and listen to each other's storiesBe kind and appreciate everyone's opinionsSelf care after the sessionsListen, hear and see before anything elseTake care of yourselves (after tool).Stay open minded.</div>
Group discussion: Generating themes for community handbook	<p>Generate themes from the group using the following questions:</p> <ul style="list-style-type: none">• How might a resource like a parent handbook support caregivers in your community? (e.g., what content should be in the parent handbook)• If we were creating a handbook today in your community, what content (topics, themes, issues) would you include?<ul style="list-style-type: none">• Prompt – This could include information on things like harm reduction, caregiver resilience, signs of substance use disorder, etc.



	<ul style="list-style-type: none">• What do you wish you had known before navigating and accessing services in your community?• Do you think there are unique barriers or considerations for parents living in your community?
Closing activity	To close out the session, consider another grounding exercise with the group. Describe next steps, including timelines for the next session.

Adaptation Session #2

Goal or goals of the session: To compare the themes generated by caregivers during session 1 with the content in *Parents Like Us* and identify opportunities to fill gaps or adjust content to meet the unique needs of caregivers in your community.

Proposed duration: 2 hours

Sample agenda:

1. Land acknowledgment
2. Opening activity and group check-in
3. Review working agreement
4. Group discussion: How to adapt the Victoria parent handbook to meet the needs of caregivers in your community
 - i. Review of themes generated from session 1
 - ii. Compare and contrast themes from session 1 with themes (chapters) in *Parents Like Us*
5. Break
6. Continue group discussion: How to adapt the Victoria parent handbook to meet the needs of caregivers in your community
7. Closing activity



Detailed facilitation instructions: Session 2

Agenda Item	Instructions
Welcome and land acknowledgment	We recommend beginning with a land acknowledgment. Visit the land acknowledgement webpage to identify the land on which your community resides.
Grounding exercise	<p>A grounding exercise gives participants time to reflect and ground themselves in the moment before discussing the adaptation. Participants may be coming from work or other personal activities and carry the feelings and stress of the day. Taking time to ground participants can help encourage active participation in the session and increase the safety and comfort of participants.</p> <p>For sample exercises, see grounding exercises.</p>
Purpose and parameters	Describe goals and expectations of the second facilitation session.
Disclosure and supports	<p>Acknowledge the potentially difficult and distressing nature of the conversations that may occur during the session. Remind participants of the supports in place to increase comfort among participants, including:</p> <ul style="list-style-type: none">• Reminding participants that they can leave at any time and will still receive full compensation for their participation;• Allowing participants to keep their cameras off during virtual sessions;• Allowing participants to use pseudonyms, initials or a first name;• Providing participants with access to crisis supports and services, including toll free crisis lines; and• Disclosing your intention to record the session (if virtual), including the reason or reasons for the recording, where the recordings will be stored, who can access them and for how long.
Review of working agreement	Review the working agreement created during the first session to remind participants, moderator and host of the shared values of the group and expectations while participating.
Group discussion	<p>Begin by reviewing the themes generated by caregivers during the first session together.</p> <p>Using a table or another visual aid, compare these themes with the content and themes in <i>Parents Like Us</i>. Note any content or themes that may be missing or require adjustments to meet the unique needs of caregivers in your session.</p>
Closing activity	To close out the session, consider another grounding exercise with the group. Describe next steps, including timelines for the next session.



Adaptation Session #3

Goal or goals of the session: To update the service listing to reflect community supports and services recommended by caregivers in the third session and explore any remaining themes generated by caregivers during session 1 with what you were unable to cover in session 2 due to time constraints (optional).

Proposed duration: 2 hours

Sample agenda:

1. Land acknowledgment
2. Opening activity
3. Review working agreement
4. Group discussion: Compare and contrast any remaining themes from session 1 with themes (chapters) in *Parents Like Us*

Note: This is optional and only needed if there are themes leftover from session 2. If all themes were covered in session 2, move directly to group discussion on updating the service listing.

5. Break
6. Group discussion: Update service list
7. Next steps
8. Closing activity



Detailed facilitation instructions: Session #3

Agenda Item	Instructions
Welcome and land acknowledgment	We recommend beginning with a land acknowledgment. Visit the land acknowledgement webpage to identify the land on which your community resides
Grounding exercise	A grounding exercise gives participants time to reflect and ground themselves in the moment before discussing the adaptation. Participants may be coming from work or other personal activities and carry the feelings and stress of the day. Taking time to ground participants can help encourage active participation in the session and increase the safety and comfort of participants. For sample exercises, see grounding exercises .
Purpose and parameters	Describe the goals and expectations of the third adaptation session.
Disclosure and supports	Acknowledge the potentially difficult and distressing nature of the conversations that may occur during the session. Remind participants of the supports in place to increase safety and comfort among participants, including: <ul style="list-style-type: none">• Reminding participants that they can leave at any time and will still receive full compensation for their participation;• Allowing participants to keep their cameras off during virtual sessions;• Allowing participants to use pseudonyms, initials or a first name;• Providing participants with access to crisis supports and services, including toll free crisis lines; and• Disclosing your intention to record the session (if virtual), including the reason or reasons for the recording, where the recordings will be stored, who can access them and for how long.
Review of working agreement	Review the working agreement created during the first session to remind participants, moderator and host of the shared values of the group and expectations while participating.
Adaptation questions	Optional group discussion: If you were unable to complete the theme review during session 2, you may use the first half of session 3 to complete the review. Once the theme review is complete, use the second half of the session to update the service listing located at the end of <i>Parents Like Us</i> to reflect the services and supports available in your community.
Closing activity	To close out the session, consider another grounding exercise with the group. Describe next steps, including proposed timelines for completing the adaptation and expectations of the group in the future.



Adaptation Options for Sault Ste. Marie

Minimal Adaptation

Adaptation updates	Roles and resources	Considerations
<ol style="list-style-type: none"> 1. Rewrite Introduction to: <ol style="list-style-type: none"> a. Acknowledge the original authors and purpose of the handbook as stated in the Victoria parent handbook. b. Describe the adaptation process, including: <ol style="list-style-type: none"> i. The consultations, ii. Any facilitated art sessions and iii. The parents who participated. 2. Update service listing to reflect recommendations from parents in your community. 	<p>Role for project lead:</p> <ul style="list-style-type: none"> • Rewrite the Introduction. • Share adapted sections with parents for review and input. <p>Estimate of 2–3 working days to complete.</p>	<p>Considerations for minimal adaption:</p> <ul style="list-style-type: none"> • This approach allows for the quickest turnaround time for public release. • This approach requires a low level of engagement from parents. • The changes made at this level of adaption may not meet the exact needs of caregivers in the community • Parents that participated in the consultations may expect a greater level of adaption.

Moderate Adaptation

Adaptation updates	Roles and resources	Considerations
<ol style="list-style-type: none"> 1. Rewrite Introduction to: <ol style="list-style-type: none"> a. Acknowledge the original authors and purpose of the handbook as stated in the Victoria parent handbook. b. Describe the adaptation process, including: <ol style="list-style-type: none"> i. The consultations, ii. Any facilitated art sessions and iii. The parents who participated. 2. Work with caregivers to safely formulate stories, quotes or both to be included. 3. Update service listing to reflect recommendations from parents in Sault Ste. Marie. 	<p>Role for project lead:</p> <ul style="list-style-type: none"> • Rewrite the Introduction. • Collect stories from parents from the community. • Share adapted sections, quotes and stories with parents for review and input. • Review and provide input on the adapted design of handbook generated by CCSA graphic design team. <p>Estimate of 5–7* working days to complete.</p> <p><i>* This is an estimate of the number of working days for the project lead. Additional consultation with parents will extend the timeline.</i></p>	<p>Considerations for moderate adaption:</p> <ul style="list-style-type: none"> • This approach allows for a relatively quick turnaround time for public release. • This approach requires a moderate level of engagement from parents. • The changes made at this level of adaption may not meet the exact needs of parents in your community. • Parents that participated in the consultation may expect a greater level of adaption.



Full Adaptation

Adaptation updates	Roles and resources	Considerations
<ol style="list-style-type: none"> 1. Rewrite Introduction <ol style="list-style-type: none"> a. Acknowledge the original authors and purpose of the guide as stated in the Victoria parent handbook. b. Describe the adaptation process, including: <ol style="list-style-type: none"> i. The consultations, ii. Any facilitated art sessions and iii. The parents who participated. 2. Rewrite any sections as required in collaboration with caregivers. 3. Work with caregivers to safely formulate stories, quotes or to be included. 4. Update service listing to reflect recommendations from parents. 5. Redesign the handbook. 	<p>Role for project lead:</p> <ul style="list-style-type: none"> • Rewrite the Introduction. • Rewrite any chapters in collaboration with parents. • Collect stories, quotes or both from parents in Sault Ste. Marie to share adapted sections, stories and quotes with parents for review and input. • Review and provide input on the adapted design of handbook generated by the CCSA graphic design team. <p>Estimate of 10-12* working days to complete the adaptation.</p> <p><i>* This is an estimate of the number of working days for the project lead. Additional consultation with parents will likely extend the timeline.</i></p>	<p>Considerations for full adaption:</p> <ul style="list-style-type: none"> • This approach requires the most time to prepare for public release. • This level of adaption requires a high level of engagement from parents. • Telling stories is an effective and powerful way to share knowledge. However, this should be done in a mindful way to ensure safety of audience and storyteller.

*Note – these are estimated times only. Hours worked may vary, depending on availability of parents and coordination of schedules



Sample Evaluation Surveys

Post-release Survey

This handbook was adapted by [insert community organization] from *Parents Like Us* with input from parents in [community]. As part of the evaluation, we are looking for feedback from those who have used the handbook to help us understand whether it is a useful resource. This survey will remain open until [close date].

This survey will take about 3–5 minutes and is voluntary. Please note that your responses will be anonymous, and they will be combined with responses from other participants. The summarized data may be used for feedback purposes, future publications, conferences, communications, fund development and other knowledge mobilization activities. Direct quotes may also be used for these purposes with any personal information excluded. No personally identifying information (including names, locations, ages, etc.) will ever be included in any of the data that is shared.

Experiences with Substance Use and Providing Support

1. What best describes your role in relation to your interest in [Handbook name] (choose one)?
Note: Your responses to these questions will not be linked to any identifiable information and will be anonymous.

- Youth
- Parent or caregiver of a youth
- Service provider working with youth who regularly use non-prescribed substances (e.g., fentanyl, heroin, amphetamines, alcohol)
- Friend of family member of a youth
- Health administrator, leader or policy maker working with youth or youth services
- Researcher working with youth or youth service outcomes
- Other, please specify: _____

2. Have you regularly used non-prescribed substances (e.g., fentanyl, heroin, amphetamines, alcohol) in the past 12-months?

- Yes
- No
- Prefer not to answer

3. Has the young person you support regularly used non-prescribed substances (e.g., fentanyl, heroin, amphetamines, alcohol) in the past 12-months?

- Yes
- No
- Prefer not to answer



Handbook Feedback

Please rate how strongly you agree or disagree with each of the following statements.

1. I found the [handbook name] useful.

- Strongly disagree
- Disagree
- Neither agree nor disagree
- Agree
- Strongly agree
- Does not apply

2. I would recommend this [handbook name] to [target stakeholder group].

- Strongly disagree
- Disagree
- Neither agree nor disagree
- Agree
- Strongly agree
- Does not apply

3. I found the [handbook name] increased by understanding of [target knowledge].

- Strongly disagree
- Disagree
- Neither agree nor disagree
- Agree
- Strongly agree
- Does not apply

4. I found the [handbook name] increased by awareness of [target knowledge].

- Strongly disagree
- Disagree
- Neither agree nor disagree
- Agree
- Strongly agree
- Does not apply

5. Overall, I am satisfied with [handbook name].

- Strongly disagree
- Disagree
- Neither agree nor disagree
- Agree
- Strongly agree
- Does not apply



6. Do you have any additional comments or suggestions before completing the survey?

- Yes (Please describe in the space below):

- No, I do not have anything else to add

Demographics:

1. In which province or territory do you reside (choose one)?

- British Columbia
- Alberta
- Saskatchewan
- Manitoba
- Ontario
- Quebec
- New Brunswick
- Nova Scotia
- Prince Edward Island
- Newfoundland & Labrador
- Yukon
- Northwest Territories
- Nunavut

2. In which city do you reside? (Please specify): _____

3. What is your age (in years)? _____

4. What is your gender (check all that apply)?

- Woman
- Man
- Non-binary
- Two-spirit
- Trans woman
- Trans man
- Questioning
- Prefer not to answer
- I don't identify with any of these options, I identify as:



6. Which of the following do you identify with (check all that apply)?

- White (e.g., European descent)
- Black (e.g., African descent)
- Indigenous (e.g., First Nation, Métis or Inuit descent)
- Latin American (e.g., Mexican, South American or Central American descent)
- East Asian (e.g., Chinese, Korean, Japanese or Taiwanese descent)
- South Asian (e.g., Indian, Pakistani or Sri Lankan descent)
- Southeast Asian (e.g., Vietnamese, Cambodian, Laotian or Thai descent)
- West Asian (e.g., Iranian, Iraqi, Turkish, Saudi or Afghan descent)
- Not listed, please specify: _____
- Prefer not to answer

End of Block: Demographic