



Talking about anxiety stress-free
Introduction to the program

Expedition+ component

Specific intervention

June 2021



ACKNOWLEDGEMENT OF AUTHORS AND CONTRIBUTORS

The HORS-PISTE Expedition program (early intervention component), known as the HARDIS+ program in 2018-2019, is a production of the Centre RBC d'expertise universitaire en santé mentale ("Centre RBC" in the rest of the text), intended for children, adolescents, and young adults at Université de Sherbrooke (UdeS) (<https://sante-mentale-jeunesse.usherbrooke.ca>). This program is the product of the joint efforts of more than a hundred people from various fields of expertise. This section is dedicated to acknowledging the invaluable contribution made by each and every one of them.

THE DESIGNERS AND WRITERS

This program was initiated in 2017, by Robert Pauzé, former director of Centre RBC (until August 31, 2018).

Version 1.0 (2018-2019) was designed and written by Robert Pauzé (former director, Centre RBC), Joelle Lepage (coordinator, Centre RBC), Vanessa Gauthier (research professional, Centre RBC), Katia Mercier (psychologist, CIUSSS de l'Estrie-CHUS), Pasquale Roberge (professor, UdeS), Patrick Gosselin (professor, UdeS), and Isabelle Côté (psychoeducator, Collège Mont Notre-Dame). This version was produced under the coordination of Joelle Lepage (coordinator, Centre RBC) and Julie Lane (director, Centre RBC).

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STUDENT CONTRIBUTORS

Several students played a role in various stages of the project: Marie Pauzé (social work student), Catherine Chapdelaine-Viger (psychoeducation student), Marie-Christine Morin (kinesiology student), Alexis Thibault (health sciences student), Camille Otis-Hébert (social work student), and Valérie Bolduc (psychoeducation student).

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Prince (Commission scolaire des Chênes), Mylène Savard-Ménard (suicide prevention worker, Centre d'écoute et de prévention du suicide Drummond), Robert Pauzé (director, Centre RBC, until August 31, 2018), Sonia Trudel (Commission scolaire des Chênes), Stéphane Guilbert (principal, École secondaire Jeanne-Mance), Véronique Fournelle (executive assistant, Le Rendez-vous familial), Véronique Rodier (social worker, CIUSSS de Mauricie-Centre-du-Québec), Vincent Cabal (vice-principal, École secondaire Jeanne-Mance), Yannick Rivard (psychoeducator, École secondaire Jeanne-Mance).

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INTRODUCTION TO THE HORS-PISTE PROGRAM

The mental health of the general population is raising red flags in Quebec and all over the world, prompting us all to make mental health promotion a goal to work toward, for the well-being and development of individuals, communities, and nations (Mantoura *et al.*, 2017). Anxiety disorders are among the most common mental health disorders in young people (Costello *et al.*, 2011). In recent years, a number of innovations have been introduced across Quebec to prevent these disorders, although they are not systematically used or implemented (Piché *et al.*, 2017).



The HORS-PISTE program is hoping to make a difference in that sense, with its innovative approach to promoting mental health and preventing anxiety in schools, from preschool to post-secondary levels. Through the development of psychosocial competencies and the promotion of psychological well-being, this program fosters the development of a coherent continuum of interventions aimed at preventing anxiety disorders, from early childhood to adulthood.

This introduction to the program is intended for those of you who have agreed to facilitate the HORS-PISTE Exploration program (universal component). THANK YOU for joining us on this mission to improve the mental health of our young people. The purpose of this document is to help you understand the key principles of the HORS-PISTE program by addressing:

- A. The point of the program;
- B. The alignment of the program with ministry guidelines;
- C. The approach used to develop the program;
- D. The name of the program;
- E. The program's foundations;
- F. The fundamental approaches of the program;



It also aims to equip you for the Expedition+ component of the HORS-PISTE program by introducing you to:

- G. The objectives of the HORS-PISTE - Expédition+ program;
- H. The program's target audience;
- I. Aspects to consider in forming the groups;
- J. The support offered to the program facilitators;
- K. The program content;
- L. The preferred intervention strategies;
- M. The program's key elements;

To comply with Université de Sherbrooke's writing standards, gender-neutral writing is used as much as possible in the HORS-PISTE material. However, to lighten the text or to preserve the meaning of certain words, parentheses are used in some cases: summary sheets handed out to the students, parents, or school staff members, speaker's notes for use by the facilitators, PowerPoint presentations.

KEY PRINCIPLES OF THE HORS-PISTE PROGRAM

A. What is the point of the HORS-PISTE program?

Anxiety disorders are among the most common mental health disorders in adolescence (Costello *et al.*, 2011). They appear during early childhood or adolescence, causing a range of functional difficulties that can worsen over the course of a lifetime (Piché *et al.*, 2017).

The prevalence of anxiety disorders in adolescents is cause for concern. Affecting more than 10% of young people, anxiety disorders are among the most common psychopathologies in children and adolescents (Dumas, 2013), and among those that sometimes appear in early childhood, although most often between middle childhood and middle adolescence (Dumas, 2013). In its latest survey, the Institut de la statistique du Québec (2016-2017) found that 17% of high school students say that they have been diagnosed with an anxiety disorder by a doctor or other healthcare professional. Finally, anxiety becomes more prevalent with age, with roughly 21% of adults experiencing an anxiety disorder during their lifetime (Dumas, 2013).

An anxiety disorder during adolescence has consequences that are both significant and far-reaching. In fact, anxiety affects a child's judgment (Tardif, 2008) and working memory (Cassady, 2010), and can cause learning difficulties (APA, 2013), ultimately leading to the child dropping out of school (Lapointe and Freiberg, 2007).

Anxiety can also cause low self-esteem, difficulties with social relationships (Charrette, 2012), depressive symptoms and suicidal ideation (APA, 2013; Dubé, 2009), eating disorders (Trudeau, 2006), and depression (Marcotte, 2013). Anxiety disorders can also precede—sometimes by several



years—the onset of a panic disorder, depressive disorder, alcohol, drug, or tobacco abuse, and a higher risk of contemplating suicide and committing suicide (Dumas, 2013).

The situation is becoming especially alarming given that most young people with anxiety suffer in silence, isolate themselves, and withdraw socially (Lambert-Samson, 2016). The situation is so dire that 70% of children and adolescents with an anxiety disorder have never received professional help (Bosquet and Egeland, 2006).

B. How does the HORS-PISTE program align with ministry guidelines?

The HORS-PISTE program is fully aligned with MSSS guidelines, including:

- The **2015-2020 Mental Health Action Plan**, because the HORS-PISTE program reinforces the continuum of services for young people (Measure 4), improves access mechanisms and service trajectories to meet the needs of young people (Measure 5), implements promotion and prevention measures in the school setting (Measure 9), and identifies and provides early support and intervention to vulnerable young people (Measure 14);
- The **new ÉKIP reference framework** to promote the health, well-being, and educational success of young people, because the HORS-PISTE program helps to develop the psychosocial competencies targeted by this reference framework as being critical to mental health promotion;
- The **Politique gouvernementale de prévention en santé**, because the HORS-PISTE program promotes the development of personal capacities from an early age (orientation 1) and promotes the strengthening of prevention actions in the health and social services system (orientation 4).

The HORS-PISTE program is aligned with the Ministère de l'Éducation et de l'Enseignement supérieur's *Québec Education Program* (QEP), because it plays a role in building up the focuses of development (self-knowledge and awareness of basic needs, awareness of the consequences of personal choices, active lifestyle and safe behaviour) and certain cross-curricular competencies (constructs identity, achieves potential, cooperates with others, uses creativity, communicates appropriately, solves problems, exercises critical judgment, uses information, uses information and communication technologies [ICT]).

C. What approach was used to develop the HORS-PISTE program?

The program was developed by Université de Sherbrooke's Centre RBC d'expertise universitaire en santé mentale for children, adolescents, and young adults. Its mission is to promote collaboration between disciplines and sectors and to pool community expertise in order to meet the needs of children, adolescents, and young adults with or at risk for mental health problems. The approach used to develop each of its projects, including the HORS-PISTE program, is shown in Figure 4.

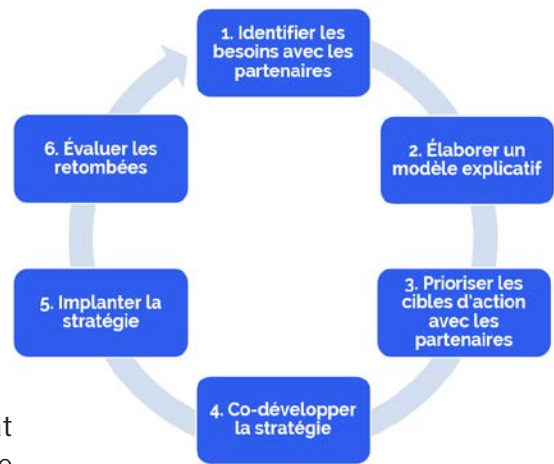


Figure 4. Approach used to develop the HORS-PISTE program

This approach is used to develop projects that correspond to identified needs and that are based on the scientific/experiential knowledge of the stakeholders involved in co-constructing projects and adapting them to their specific settings. It is also used to assess the implementation and outcomes of projects, which can then be adjusted on a continuous basis.

In addition to being based on good practices, the HORS-PISTE program was co-constructed by a number of people on various committees (see acknowledgements section). These committees are made up of parents, school administrators, representatives of community organizations, professionals and managers from the health and social services network (HSSN), school facilitators, teachers, students, researchers, university students, etc. In particular, the HORS-PISTE program encourages stakeholders from the education network and the HSSN to join forces to tackle anxiety disorders in young people.

D. Why HORS-PISTE as the program name?



“Leave the roads; take the trails,” Pythagoras said! HORS-PISTE represents the road less taken that we want the students to embark on—the trail that few skiers or hikers ever dare to follow. Taking the road less travelled means taking risks, trying new solutions, and thinking about things from a different angle. Despite the risks, this trail provides opportunities to discover new things, challenge the status quo, and explore personal strengths and limits.

The HORS-PISTE program draws its inspiration from this concept. The workshops encourage students to take risks and face their challenges. The workshops give them an opportunity to venture into uncharted territory, to test new ways of dealing with their challenges and problems, to recognize their strengths and limits, etc. With your valuable support as a facilitator, the workshops will help them explore new ways to approach life with confidence, compassion, and perseverance.

E. What are the foundations of the HORS-PISTE program?

Using an ecological approach, a concept map was developed based on a literature review (Fournier and Pauzé, 2016) of risk and protective factors associated with anxiety disorders in adolescence (Pauzé, 2017). The HORS-PISTE program was developed based on this concept map, with a view to addressing the determining factors. Although this map was designed based on literature about adolescence, it is still useful to understanding the preventive factors that need to be addressed as early as preschool. This concept map, comprised of several figures, illustrates (see Figure 1, which shows part of the map): 1) the main categories of associated risk factors; 2) the biological, temperamental, psychological, and cognitive risk factors associated with anxiety; 3) the associated social risk factors; and 4) the associated family risk factors.

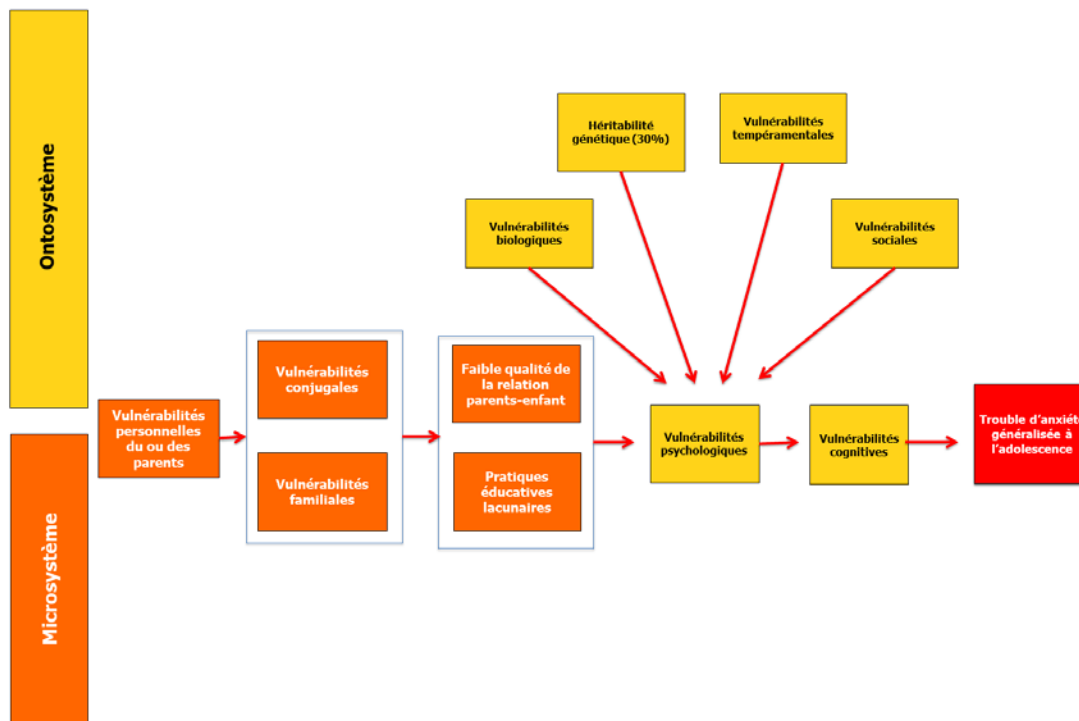


Figure 1. Main categories of risk factors associated with anxiety disorders in adolescence

This literature review also provided insight into the mechanics of anxiety disorders in adolescence (see Figure 2). The factors identified could be considered targets for prevention, early

intervention, and specialized intervention programs.

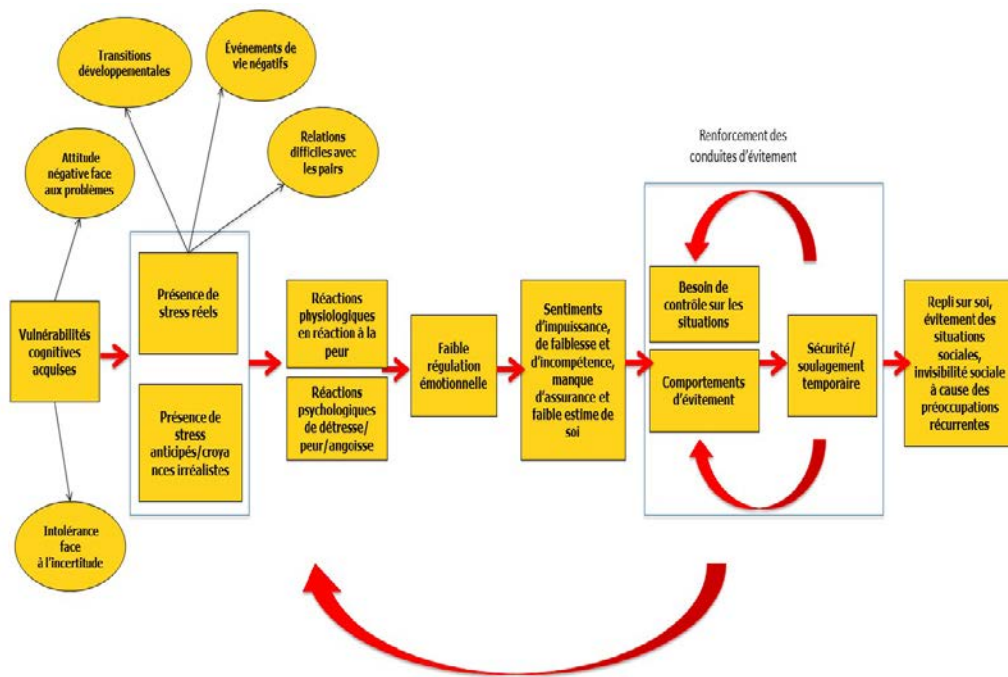


Figure 2. Mechanics of anxiety disorder in adolescence

Based on our literature reviews, we drew up the following profile of a young person: inhibited temperament, low level of emotion regulation capacity, insecure attachment style, low self-esteem, low level of social competence, negative attitude toward problems, intolerance of uncertainty, overprotective parenting practices, and exposure to anxiety-provoking stimuli. The major precipitating factors for these disorders include negative events, environmental stress, day-to-day and relationship problems, drug use, etc.

The Centre RBC also carried out a thorough review of evidence-based stress and anxiety prevention programs in adolescence (Houle, 2017). In addition to this review, a survey of programs for primary school students was also done. This review consisted in a critical survey of the school-based anxiety disorder prevention programs currently available for secondary and primary school students; it led to various findings:

- the programs that take a cognitive-behavioural approach generally address the greatest number of risk and protective factors and are shown to be the most effective;
- few programs are multi-modal and offer activities that relate to the student, their family, and the school;
- most of the programs are offered in group settings, during class hours, and almost all the programs identified incorporate breathing and relaxation techniques.

This literature review also identified the main targets of the prevention programs, based on the risk factors (see Figure 3). This review was completed with a survey of psychosocial competencies development programs. These reviews served as the basis for developing the program.

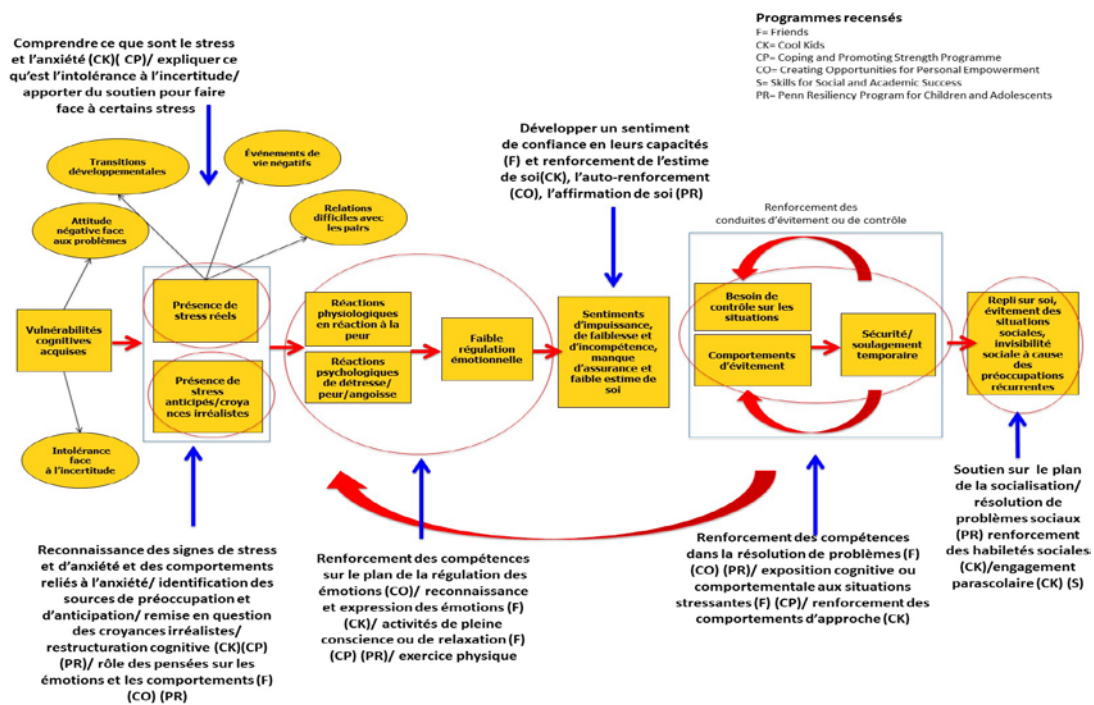


Figure 3. Main targets of the prevention programs surveyed

The Centre RBC also drew up a portrait of the population in order to better tailor the HORS-PISTE program to the reality of Quebec secondary school students. A total of 8,690 students, from secondary 1 to 5, and from 14 secondary schools across Quebec, participated in this extensive data collection exercise at two separate times, namely in winter 2018 and fall 2018. The data collection was used to draw up a portrait of secondary students in terms of their personal, family, social, and school characteristics. It also revealed some key highlights. Thus, up to 1) 45% of students report having difficulties related to hyperactivity, inattention, or emotions; 2) 29% of students say they are worried about being judged by others; 3) 26% of students say they have low self-esteem; 4) 23% of students report having symptoms related to social phobia; 5) 22% of students say they have symptoms related to generalized anxiety disorder, and 5) 38% of students say that anxiety has an impact on their school, social, daily, or family activities.

F. What approaches is the program based on?

The workshops of the HORS-PISTE program are based on the cognitive-behavioural therapy (CBT) approach. This approach has been proven effective in anxiety disorders, in terms of prevention and early intervention (Turgeon and Gosselin, 2015; Werner-Seidler *et al.*, 2017). Specifically, the program is based on third-wave CBT approaches, integrating a number of mindfulness activities (among others) and encouraging students to examine the relationship between their thoughts,

emotions, and behaviours. This approach is based on the interaction between these three elements. The techniques used in this approach help the students to realize that their fundamental beliefs and various cognitive processes form the basis of the automatic thoughts that then influence their emotions and actions (Beck, 2011). In concrete terms, the workshops of the HORS-PISTE program encourage the students to:

- realize that their thoughts are not necessarily an accurate reflection of reality. The students are encouraged to develop the habit of observing their thoughts, not immediately jumping to conclusions, and questioning their beliefs;
- de-dramatize the situation and place more emphasis on exploring their automatic thoughts and their beliefs, especially when they are wrong.

Mindfulness is the central theme of several of the workshops. Mindfulness is “the awareness that arises from paying attention, on purpose, in the present moment and non-judgmentally” (Kabat-Zinn, 2014). More precisely, living mindfully means being aware and fully present for the various moments of one’s life. There are many benefits to a mindfulness practice: better communication, more highly developed senses, better stress and emotional management, more conducive learning conditions, quality relationships (Keng, Smoski and Robins, 2011).



HORS-PISTE - EXPEDITION+ PROGRAM

As you know, adolescence comes with a number of developmental challenges. Adolescents go through a number of physical, psychological, family, and social changes. This stage of life is characterized by a succession of changes that can spark concerns, stress, and anxiety for both adolescents and their parents. For all these reasons, adolescence is an opportune and crucial time to learn how to deal with uncertainty, especially since it corresponds to the time when anxiety disorders begin to develop (Claes, 2005).

G. What are the objectives of the HORS-PISTE - EXPEDITION+ program?

This program aims, on one hand, to help adolescents develop the competencies needed to deal with the anxiety-provoking situations they face and, on the other hand, to equip their parents with the means to promote the development of these new competencies. In developing these competencies, the HORS-PISTE - Expedition+ program is designed to prevent the emergence of an anxiety disorder in students with certain risk factors.

Specifically, the student will find out how to expand their comfort zone by learning to:

- Recognize their sensations
- Reformulate their thoughts into helpful ones
- Manage their emotions to better cope with them
- Adopt new behaviours: Take action!
- Adopt healthy lifestyle habits
- Use stress management strategies
- Nurture and properly use their social network
- Draw on their strengths to help other group members progress



The parent will have the opportunity to:

- Understand anxiety and recognize its effects on their child
- Develop tools to help their child expand their comfort zone
- Recognize and deal with their own emotions
- Adopt new behaviours to reduce accommodation
- Discuss their experiences and draw on their strengths to help other group members progress

H. Who is the program for?

The HORS-PISTE - Expedition+ program is for adolescents who are waiting for or receiving psychosocial services from the CIUSSS, and who are having difficulty dealing with anxiety-provoking

situations; it is also designed for parents. Group training can raise a number of clinical questions, including which students should be invited to participate in the group sessions or about possible contraindications. Our experience to date has not allowed us to establish clear contraindications. However, a student with several concurrent problems may need additional individual meetings to deal with various issues that are not addressed in the workshops. Or the mindfulness activities may need to be adapted for a student who suffers from panic attacks. It's also important to know that group sessions will trigger a certain amount of fear in most students with anxiety, causing them to be reluctant from the outset. They may even be quite resistant to the idea of participating in the group sessions. However, experience has shown that forming a bond of trust with the facilitator (especially during the preparatory meeting), and then with the other students in the group, helps them to slowly feel more comfortable with the group, which leads to positive outcomes. The initial reluctance should not be an obstacle to them feeling like a part of the group, as long as they are willing.

I. What things need to be considered when forming the groups?

Based on experience, here's some information that could help you when forming the groups. Ideally, it's recommended to have a mix of students with different types of anxiety. Based on what we've observed so far, young people need to be around others they can relate to, but they also benefit from spending time with peers who are different from themselves. So, when forming a group, the best strategy is to strike a balance between these two aspects. For example, you should avoid forming a group made up entirely of students with social anxiety; they are often shy, which will make it difficult to get them actively involved in the discussions. Given the differences in experience and maturity levels, it's also important to even out the age groups as much as possible. If the eligible students are between the ages of 12 and 17, we recommend forming two groups: one for students aged 12-14 and another for students aged 15-17.

J. What support is offered to the program facilitators?

An HORS-PISTE website was created for quick and easy access to all the program materials (<https://sante-mentale-jeunesse.usherbrooke.ca/hors-piste/>). Among other things, you will find the facilitation guide, the handy parent and student guides, the PowerPoint presentations for classroom use, the worksheets, etc.

You will also receive a half-day of basic training before the workshops begin. The goal of this training is to clarify the content of the HORS-PISTE - Expedition+ program, but above all to prepare you to lead the workshops by presenting the concept of mutual support, the stages of group development, and the role of the facilitator, while exploring different scenarios. Offered by the CISSS de la Montérégie-Centre implementation team, this training will also introduce you to mindfulness.

Throughout the HORS-PISTE - Expedition+ program, a support person from the CISSS de la Montérégie-Centre implementation team will be available for one-on-one consultations, as needed.

K. What does the program consist of?

The HORS-PISTE - Expedition+ program is a specific intervention program that includes the following:

- A 60-minute parent-child preparatory meeting

- Ten weekly 90-minute workshops for students (approximately eight students per group)
- Five bi-weekly 90-minute group workshops for parents
- One 60-minute parent-child review meeting

The implementation of the HORS-PISTE program within the CIUSSS sometimes requires adding ad hoc individual or family meetings during the rollout. In fact, additional issues may arise during the process that cannot be addressed in the group intervention. Some students may also need to take what they learned in the HORS-PISTE program one step further in a group setting. The facilitator therefore needs to exercise clinical judgment in determining which additional measures are needed to adequately meet the students' needs. While participating in the HORS-PISTE program is enough to allow many students to cope better with their anxiety, some may need extended follow-up after the program ends.

L. What intervention strategies are used in the workshops?

This program is based on group interventions. The mutual support provided in group interventions is key to allowing the students to develop their competencies for dealing with anxiety-provoking situations. Steinberg (2008) defines mutual support as a therapeutic mode accessible in all group interventions. Mutual support occurs when people share their knowledge and help one another. This is a fundamental aspect of the group process. As a facilitator, it's important to encourage mutual support.

Turcotte and Lindsay's (2008) stages of development are helpful to understanding the phases that the group goes through and the facilitator's role during these stages. Once again, these stages of development based on a therapeutic model allow for a better understanding of any group process. These concepts are covered in more detail during the training.

In summary, one of your main roles is to reassure the students and their parents and to create a relationship of trust, a key pillar of the process. This trust will act as a foundation for the possible mutual support that will develop between the participants. At that point, you can gradually step back into more of a facilitator role, allowing the students and their parents to be open and honest about their experiences.

Other important roles include drawing out this experience and encouraging them to tap into it, along with their strengths and perceptions of themselves and others. To some extent, their experiences are the raw ingredients of the workshops. The workshop discussions and your observations of the HORS-PISTE activities will help you to better understand the issues experienced by each student, put the content into perspective, and help them understand and assimilate it.

Continue to emphasize the concept of baby steps as you celebrate all the changes and efforts, even the smallest ones, made by the student. Other important intervention strategies include making the student feel good about themselves and boosting their confidence in their ability to face anxiety-provoking situations. You also need to be able to encourage the student to step outside of their comfort zone and challenge them to take action.

M. What are the program's key elements?

This guide outlines the content of the parent-child preparatory meeting, the ten group workshops

for students, the five group workshops for parents, and the parent-child review meeting.

It seemed only natural to us to include a section for parents. In fact, parents should not only be involved in the intervention but also receive support themselves (Turgeon and Gosselin, 2015; Yap *et al.*, 2014). Many programs for children and adolescents with anxiety include a section for parents. Research has shown a significant increase in positive impacts when the parents are involved (Barrett *et al.*, 1996).

As you read through this guide, you'll notice that each group workshop in the HORS-PISTE - Expedition+ program generally contains the following elements:

- Specific workshop objectives
- The material and preparation needed to lead the workshop
- A mindfulness activity
- A review activity
- Group activities aimed at achieving the specific objectives
- A recommended challenge or observation for the week ahead

Three of the ten group meetings for students will involve an exposure experience. These activities, called HORS-PISTE activities, will take place during weeks 3, 6, and 9. An agenda for these meetings can be found in each of these workshops. If your classroom setting allows, it's possible (and recommended) to add HORS-PISTE activities to the 10-week program. The group exposure experience will help to solidify what the students learned during the program. Some programs for students with anxiety are even based exclusively on exposure. Including a greater number of exposure periods helps to break down the barriers that students encounter in spontaneous exposure situations.

