**CONFERENCE ABSTRACT**

**Holistic Health and Adapted Services for Youth: A Photovoice to Document the Perspectives of Youth as part of an Evaluation of Aire Ouverte – Estrie (Quebec, Canada)**

22nd International Conference on Integrated Care, Odense, Denmark, 23-25 May 2022

Francois Lauzier-jobin¹, Julie Lane¹, Mélanie Gélinas², Lé Bernier¹, Katia Palamarevic¹, Laurie Choquette¹, Fanny Roy¹, Rosalie Simard-Jacques¹, Jessica Beaudry¹, Annick Maltais¹

1: Université De Sherbrooke, Canada  
2: CIUSSS de l’Estrie-CHUS

**Introduction:** Youth (12-25 years) is a critical period for mental, physical, sexual and social health. Half of mental health disorders occur before age 14 and 75% before age 24 [1]. This group is also the most likely to drink excessively, start smoking, and develop various risk behaviors. Despite the important prevalence of these issues, youth are less likely than other age groups to seek services [2]. Integrated services for youth represent a promising avenue for addressing these complex and interrelated issues.

**Objectives and Methods:** Inspired by international initiatives, Aire Ouverte (Open Space) sites aim to address the needs of youth (ages 12-25). These services are gradually being implemented across Quebec (Canada), including Aire Ouverte–Estrie. This implementation is supported and evaluated by a research team using a developmental and participatory approach [3]. As part of data collection, youth participated in a Photovoice project: a participatory action research method combining “photography and group work to provide people with the opportunity to record and reflect on their daily lives” [4, p.181].

**Results:** Personalized outreach to partners enabled the recruitment of youth (N=23) with diverse backgrounds to form two youth committees (minor and adult). They were trained in photography by a professional and 16 group meetings were held (with between 4 and 11 youths at a time). The groups were facilitated by practitioners, partners and members of the research team. The discussions detailed the youth’s view of their health, the factors that can affect it and the services that are appropriate for them.

The results will focus on the content of the discussions as well as the process. The Photovoice allowed the young participants to reflect on their experiences, express themselves, and connect with others. The youth were considered peer researchers in the project: they were compensated and took part in the different stages of the process (choice of themes, analysis, reporting, etc.).

**Conclusions:** The participants’ discourse shows ambivalence on different dimensions (e.g. the good and bad influence of social networks on their overall health). We recognize youth participation
as an essential condition for the creation of youth-oriented services. The Photovoice method is well adapted to facilitate this work.

**Implications:** The presentation will be made jointly by members of the research, intervention, and youth teams. The Photovoice has already provided information for deployment of the service Aire ouverte-Estrie and has resulted in youth-led dissemination projects. However, some barriers to full participation were encountered and need to be addressed.

**References**


