Evidence Exchange Network
Mental Health and Addictions

Welcome!

MAPPING THE VOYAGE: THE SEARCH FOR EVIDENCE

Wednesday, July 8, 2015
1 to 2 pm

Your Host…

Jason Guriel
Supervisor, Evidence Exchange Network

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Mental Health and Addictions

Coming up…

Heather Bullock
PhD Candidate,
McMaster University

Karen Urbanoski
Scientist, Social and Epidemiological Research, Centre for Addiction and Mental Health (CAMH)

Talia Bronstein
Policy Analyst, Association of Ontario Midwives

Tatyana Krimus
Knowledge Broker,
EENet, CAMH

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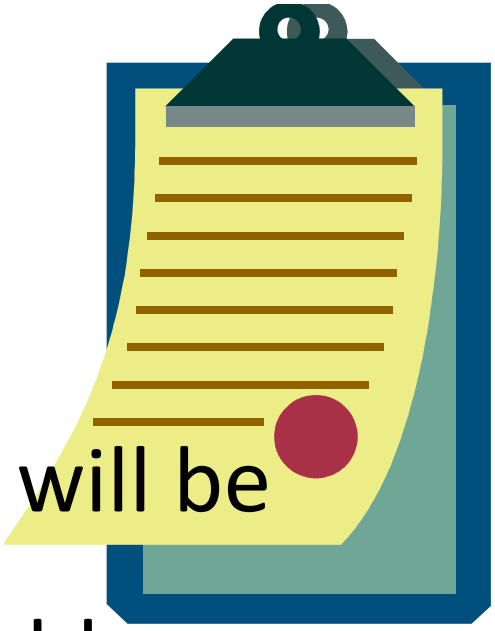
Recording Notice:



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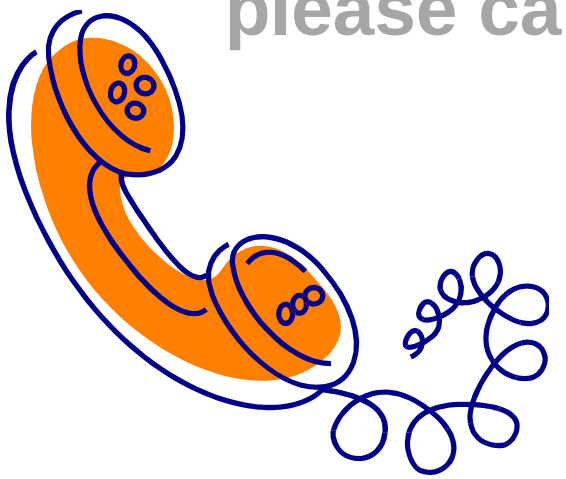

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Webinar Orientation

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Webinar Objectives

In this webinar you'll learn about the results of EENet's survey of stakeholder preferences.

Specifically, the presenters will:

- describe stakeholder preferences with respect to evidence sources
- depict the network of stakeholders for MHA in Ontario
- discuss the use of social network analysis as a tool to support evaluation of KT

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Agenda

1. EENet
2. Methods
3. Results
4. Evidence
5. Limitations
6. Lessons Learned
7. Q&A

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1. What is EENet?

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EENet's goals

- Make Ontario's mental health and addictions system more evidence-informed
- Bring diverse stakeholders together to share evidence
- Encourage the creation of evidence that responds to needs in the system
- Help people to make use of evidence

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EENet

- Brokers connections across stakeholders of the mental health and addictions system
- Partners with organizations and initiatives to facilitate the flow of relevant evidence using a “network of networks” approach
- Builds capacity in the system to access and use evidence

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Why Social Network Analysis?

1. To better understand how EENet works (or doesn't work) as a knowledge exchange vehicle
2. To understand what evidence sources are being used by different MHA stakeholders in Ontario
3. To analyze the placement and reach of MHA evidence sources and how stakeholders are connected via the evidence sources they consult
4. To place EENet within the broader context of evidence sources in Ontario

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2. Methods

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What is SNA?

- Set of methods used for mapping, measuring and analyzing the relationships between members of a network (e.g., people, groups, organizations)

- Used to understand how different members are working together, sharing resources, or communicating across a network

Source: Blanchet & James, 2011

Methods

- Online survey of stakeholders to elicit:
  - Descriptive data
  - Network data
- Purposive sampling, including anyone in Ontario working in mental health and addictions
- Participation invited via multiple communication channels

Methods (cont.)

From a list of 93 evidence sources, respondents identified:

- the sources they used in the past 12 months
- their top 5 sources in terms of usefulness
- their top 5 sources in terms of trustworthiness

3. Results

Groups

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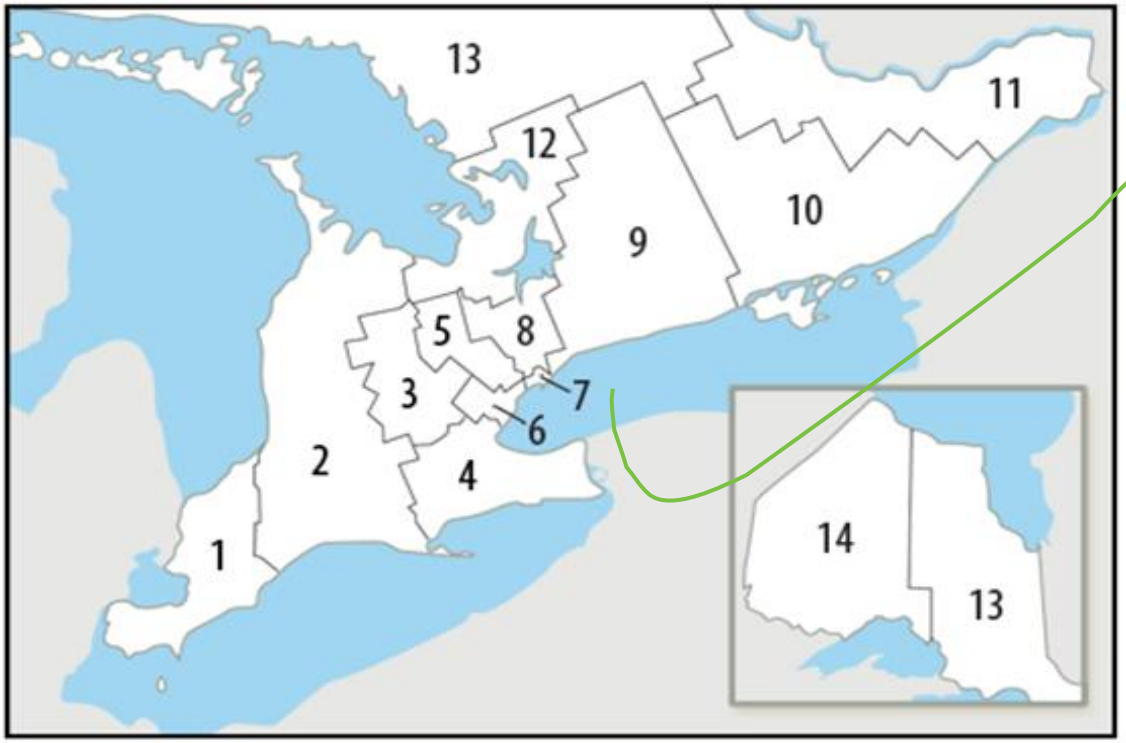
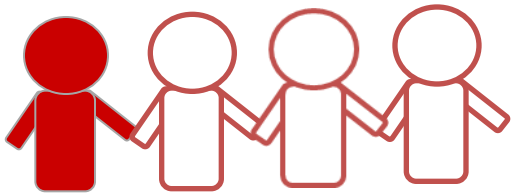
Region

1. Erie St. Clair
2. South West
3. Waterloo Wellington
4. Hamilton Niagara Haldimand Brant
5. Central West
6. Mississauga Halton
7. Toronto Central
8. Central
9. Central East
10. South East
11. Champlain
12. North Simcoe Muskoka
13. North East
14. North West





1 of 4 respondents were from Toronto Central

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4. Evidence

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Research +

Professional expertise +

The lived experience of people and families +

Cultural and traditional knowledge =

EVIDENCE

Adapted from: Kitson, et al. (1998). Enabling the implementation of evidence based practice: a conceptual framework.

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Reasons to seek evidence

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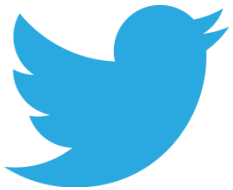


Enet connect


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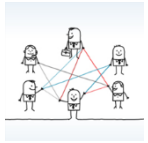
Top 10: Sources Used

1. camh Centre for Addiction and Mental Health	6.  Scholarly journals
2. Canadian Mental Health Association *Mental health for all*	7. Addictions & Mental Health Ontario | Dépendances & santé mentale d'Ontario
3.  Colleagues	8. Enet Evidence Exchange Network Mental Health and Addictions
4. Canadian Mental Health Association Ontario	9. Health Canada Santé Canada
5. Public Health Agency of Canada Canadian Best Practices Portal — Best Practice and Guideline databases	10. Ontario

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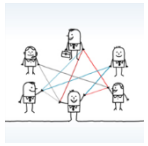
Top 10: Useful

1. camh Centre for Addiction and Mental Health	6. PubMed Scientific research journal databases
2.  Colleagues	7. EEnet Evidence Exchange Network Mental Health and Addictions
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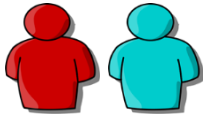
4. Public Health Agency of Canada Canadian Best Practices Portal Best Practice and Guideline databases	9.  Persons with lived experience
5. Canadian Mental Health Association *Mental health for all*	10. Canadian Mental Health Association Ontario

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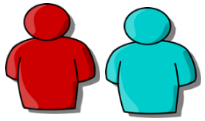
Top 10: Trustworthy

1. camh Centre for Addiction and Mental Health	6. Canadian Mental Health Association Ontario
2.  Scholarly journals	7. Canadian Centre on Substance Abuse Partnership. Knowledge. Change.
3. Canadian Mental Health Association *Mental health for all*	8.  Persons with lived experience
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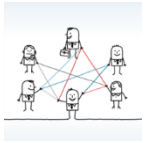
5.  Colleagues	10. Addictions & Mental Health Ontario | Dépendances & santé mentale d'Ontario

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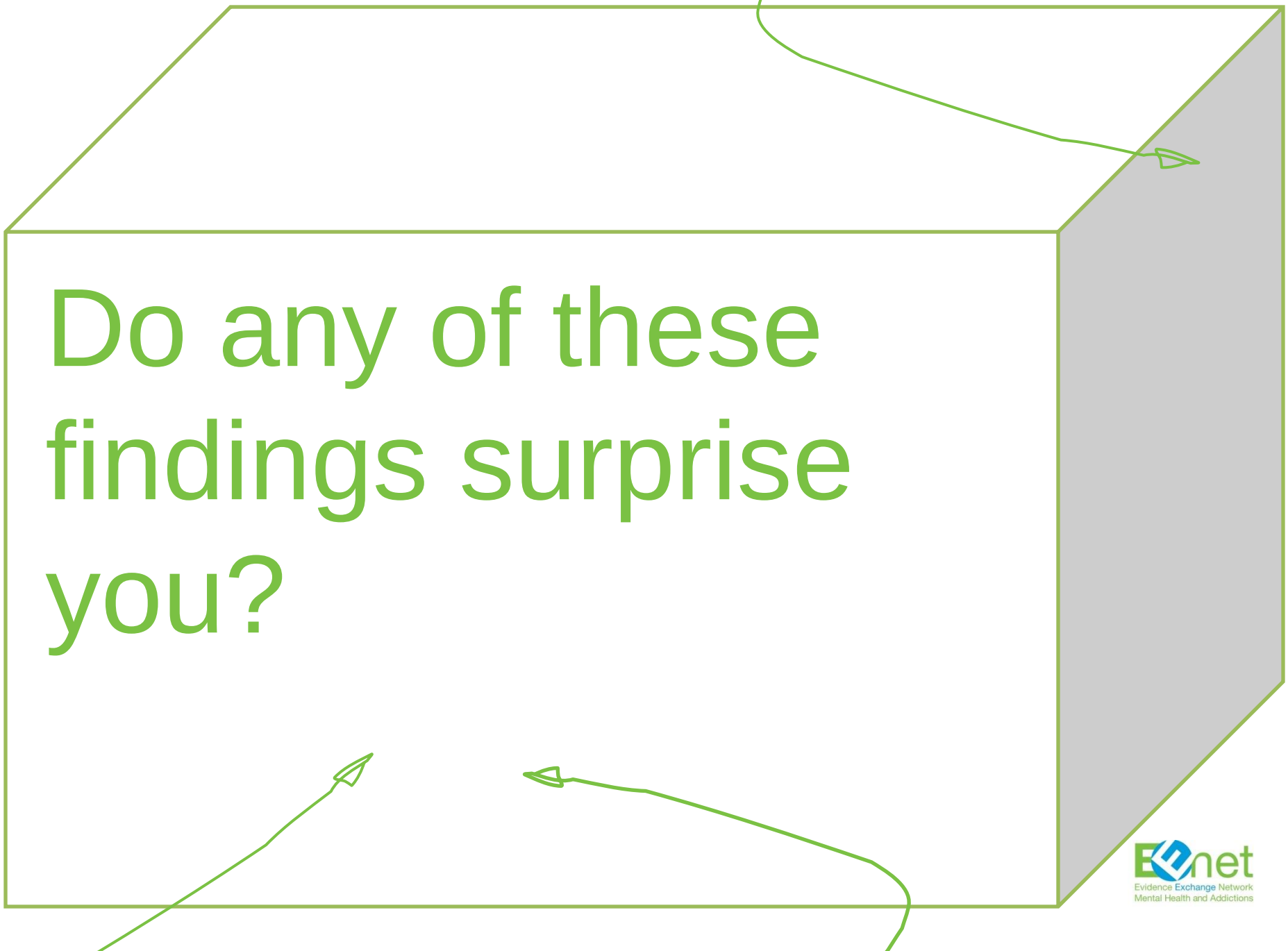

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Some observations

- Stakeholders use a variety of different evidence sources
- Scholarly journals are ranked as more trustworthy than useful and even less utilized – this highlights the value of knowledge translation
- Colleagues are ranked as more useful than trustworthy
- EENet is on the map!

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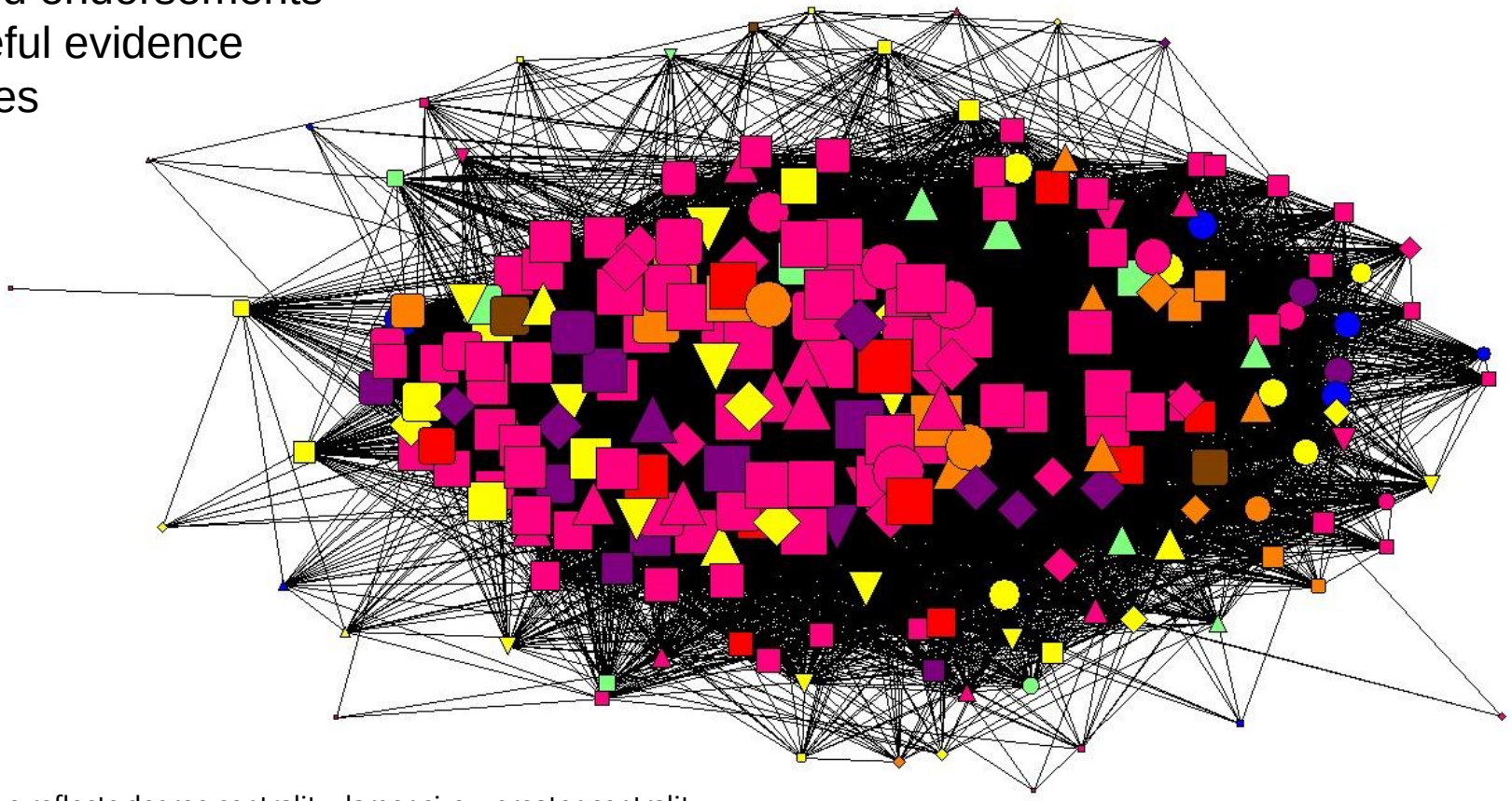
Stakeholders

Shared endorsements of useful evidence sources



Legend

- Node size reflects degree centrality: larger size = greater centrality
- Node shape reflects stakeholder group: researcher (circle), service provider (square), government/policy (up triangle), person with lived experience/family (rounded square), allied professional (down triangle), other (diamond)
- Node colour reflects sector: allied services (yellow), academic research (blue), health care (red), government (light green), not-for-profit/non-governmental organization (orange), private sector (brown), MHA services (bright pink), other (purple)

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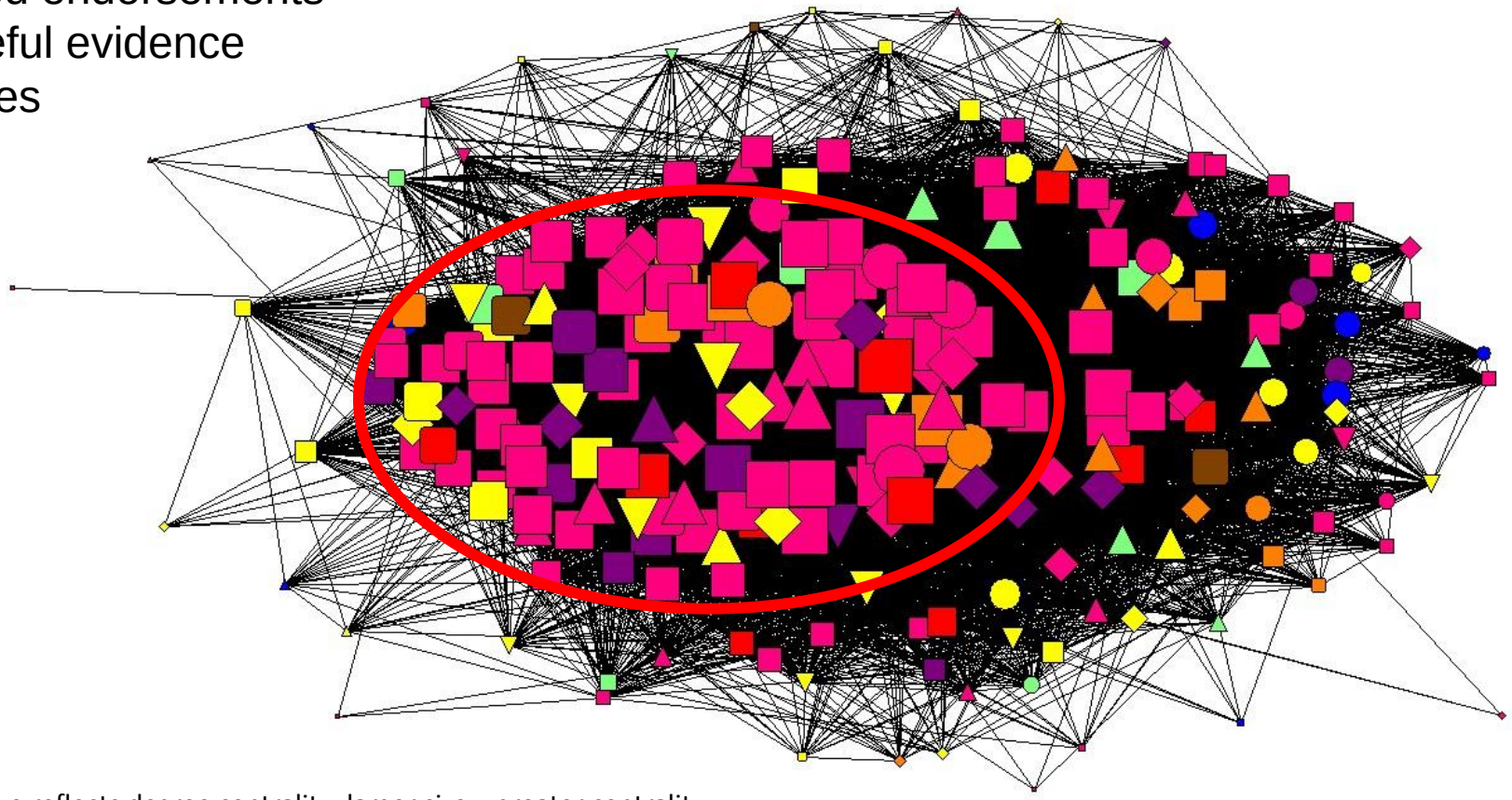

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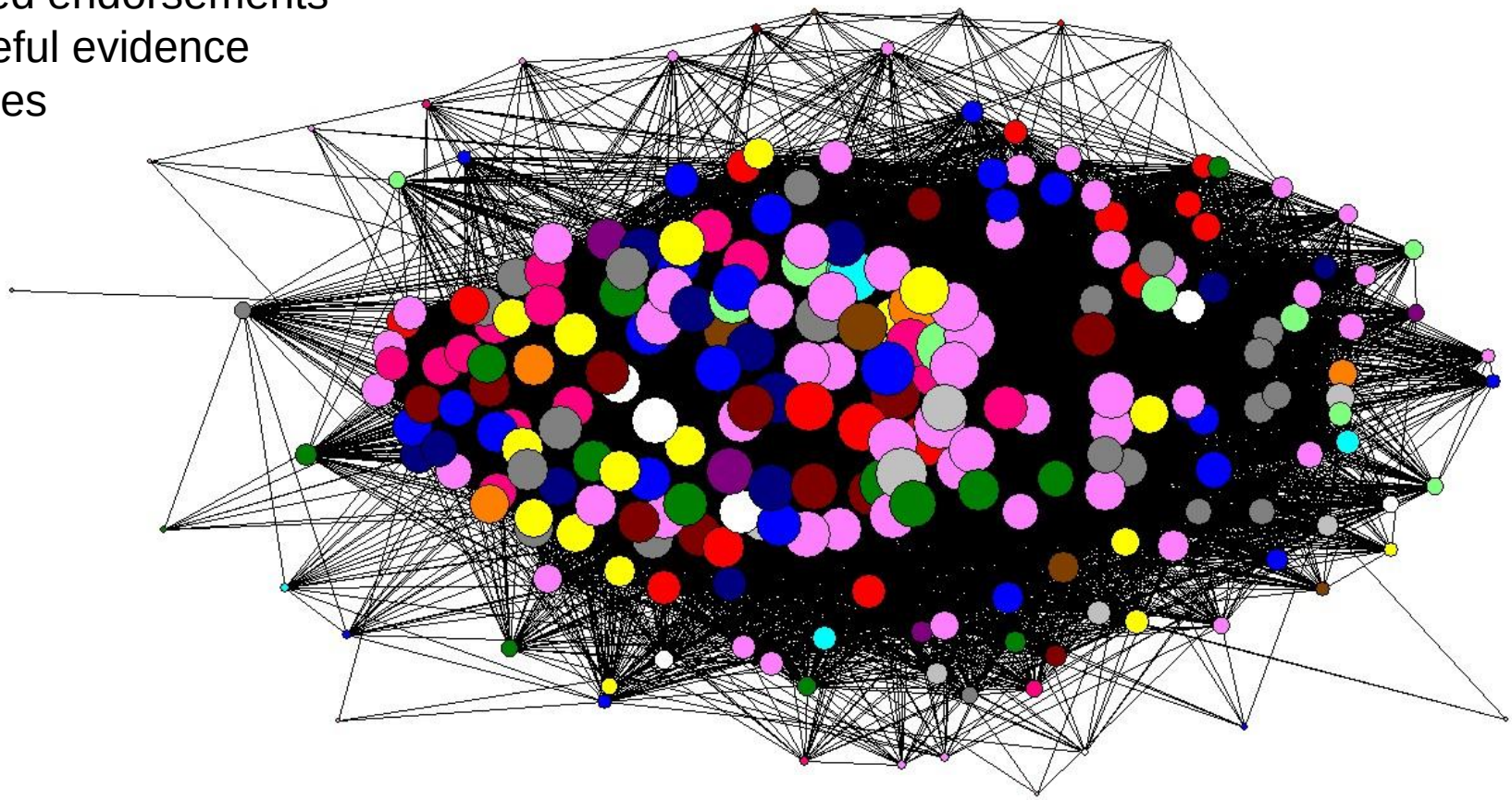

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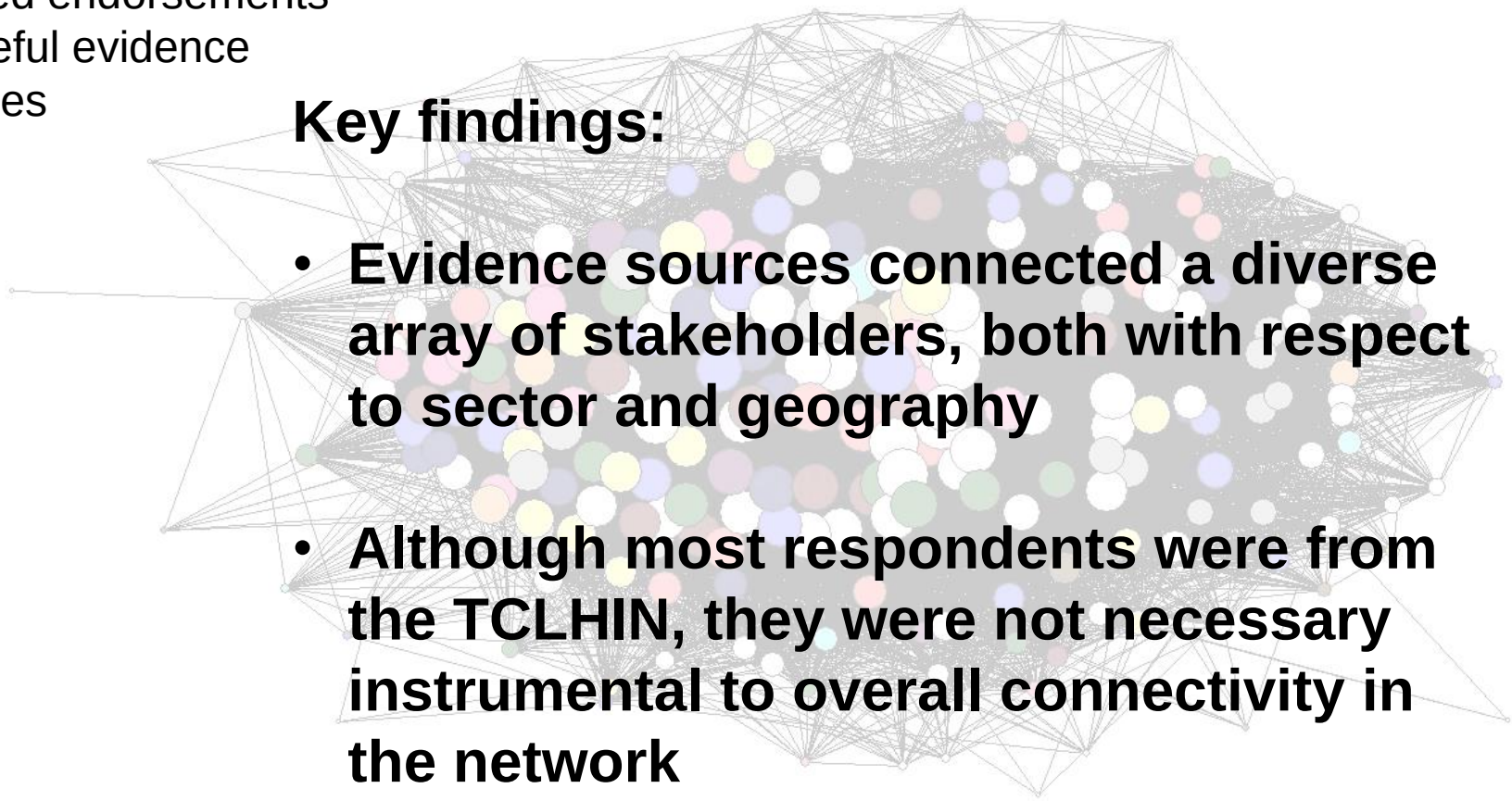

Key findings:

- **Evidence sources connected a diverse array of stakeholders, both with respect to sector and geography**
- **Although most respondents were from the TCLHIN, they were not necessary instrumental to overall connectivity in the network**

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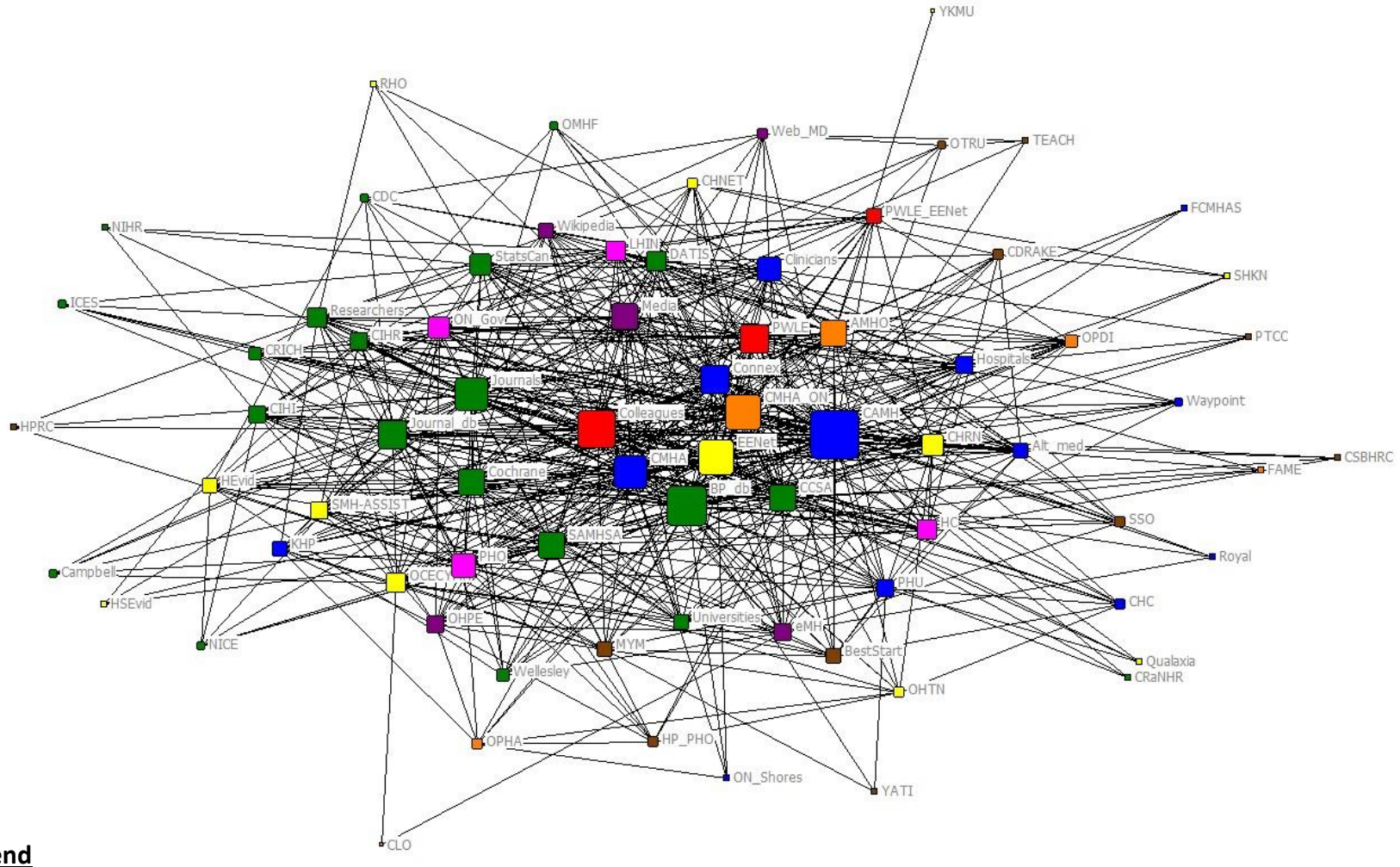
Useful evidence sources



Legend

- Node size reflects degree centrality: larger size = greater centrality
- Node colour reflects source type: government (pink), individuals (red), membership organizations or associations (orange), KE/KT (yellow), research (green), Resource Centres (brown), service providers (blue), web-based resources (purple)

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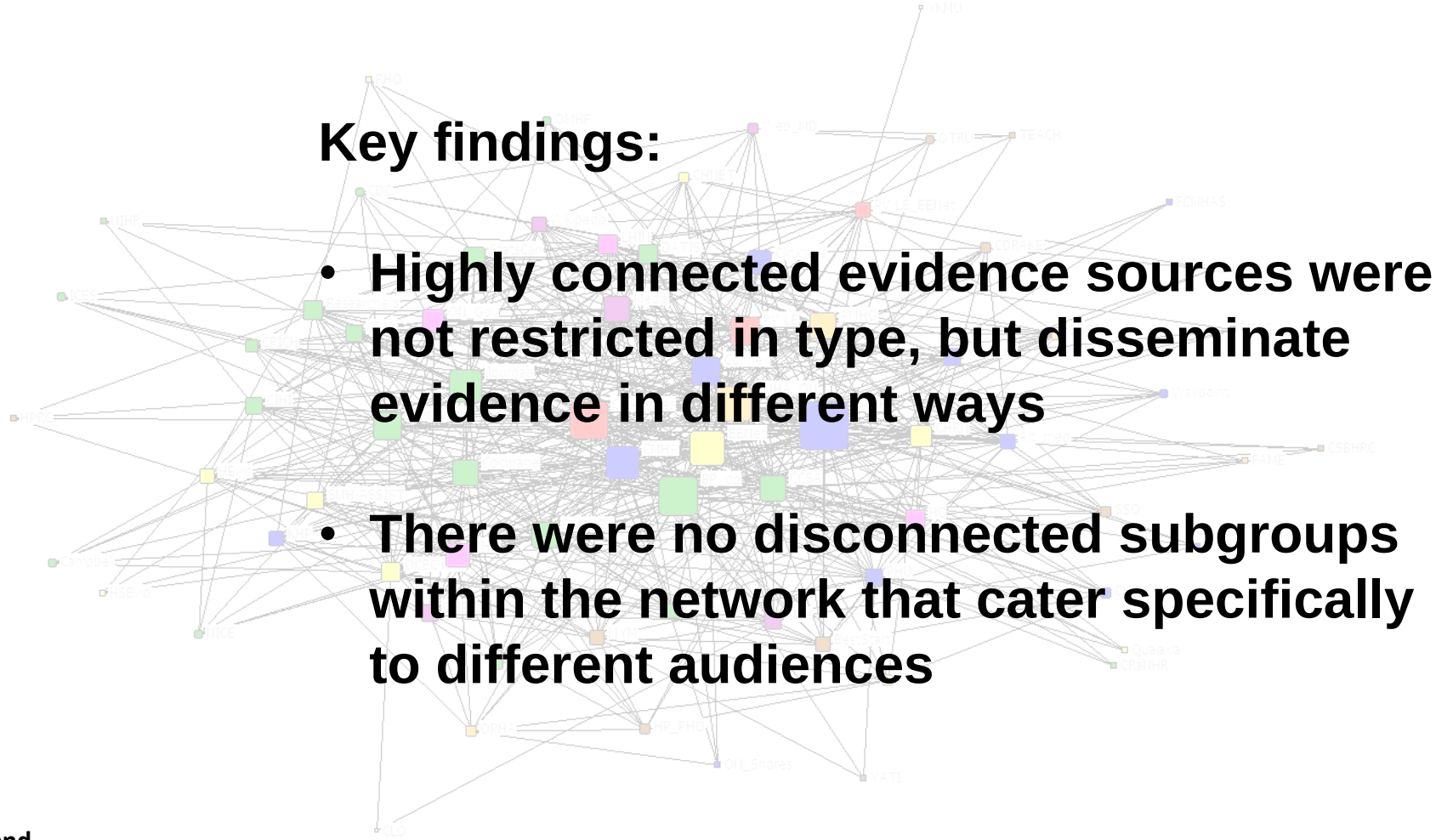
Useful evidence sources



Key findings:

- **Highly connected evidence sources were not restricted in type, but disseminate evidence in different ways**
- **There were no disconnected subgroups within the network that cater specifically to different audiences**

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- Node colour reflects source type: government (pink), individuals (red), membership organizations or associations (orange), KE/KT (yellow), research (green), Resource Centres (brown), service providers (blue), web-based resources (purple)

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5. Limitations

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Limitations

- Duplicates
- Evidence source categorization
- Sample and selection bias
- Missing relevant evidence sources
- English

6. Lessons Learned

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Lessons Learned

For EENet…

- Taking stock of results for current EENet initiatives – are we reaching the right people through the right sources?
- Allows us to pose new questions - we are “on the map” but not at the centre of it. Do we want to be?
- How can we leverage other evidence sources in Ontario to broaden the reach of EENet activities & resources?

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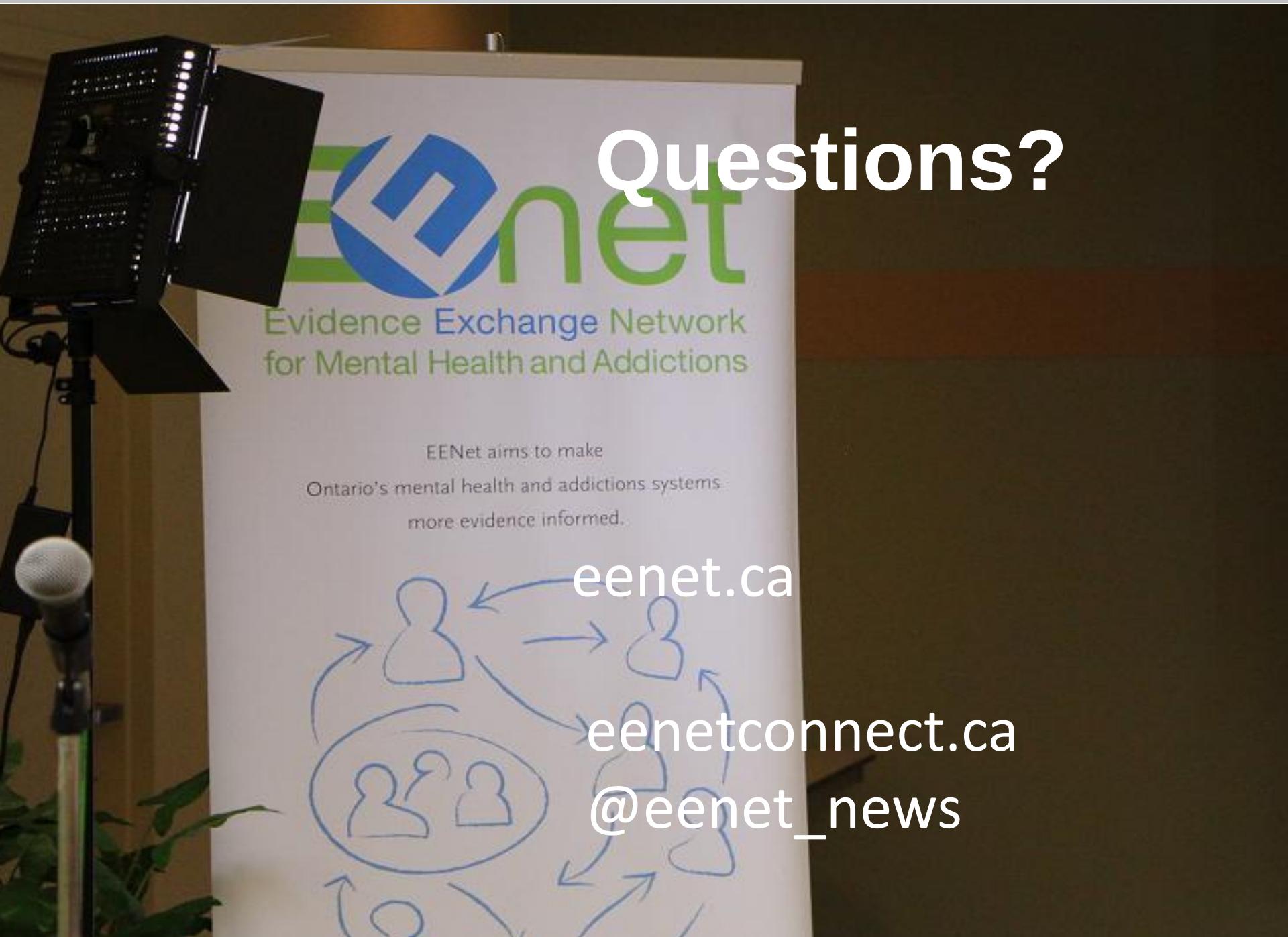
Lessons Learned

Broader implications…

- Unique application of SNA: considering the connections between nodes as “evidence” and the nodes themselves “evidence sources”
- SNA can be used to inform KE/KT efforts – how are systems connected with respect to evidence? What sources to they value? For what purpose? Do certain sources play particular roles in the network (e.g. “structural bridges”)? How do the evidence connections change over time?

Questions?



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