SUPPORTING CAMPER WELL-BEING

Phase 1 Comprehensive Project Report

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H.E. BUTT FOUNDATION | american CAMP association®

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Introduction

Background

Mental, emotional, and social health among campers and camp staff is an increasingly prominent concern for camp leaders. We know that camps are rich contexts for supportive relationships, positive self-identity, and feelings of belonging; however, camp leaders report that campers and staff arrive at camp with mental, emotional, and social health (MESH) related needs that require additional training and support from camp staff. While there are resources for crisis intervention, there is a need to train staff to proactively foster mental, emotional, and social thriving such that crisis situations are prevented and minimized.

In August of 2021, the H.E. Butt Foundation (HEB) partnered with the American Camp Association (ACA) on the *Supporting Camper Well-Being* collaborative initiative (previously the *Mental, Emotional, and Social Thriving at Camp* project). Supported by HEB under the direction of ACA, the goal of the *Supporting Camper Well-Being* project is to identify and create strategies to foster mental, emotional, and social thriving at camp by:

1. Identifying existing resources and needs related to mental, emotional, and social thriving at camp (Phase 1), and
2. Designing a training approach and supporting materials for camp directors and frontline staff to foster mental, emotional, and social thriving among campers and staff (Phase 2).

Overview

The *Supporting Camper Well-Being* project is a multi-phased collaborative initiative. Phase. According to the initial project overview, Phase 1 would consist of the following stages:

Table 1 Supporting Camper Wellbeing *Project Phase 1 Stages*

Stage	Description of Stage
1	Convene an ad hoc sub-committee of ACA's Healthy Camps Committee to advise and direct the first phase of the project.
2	Operationalize *mental, emotional, and social thriving* and identify observable indicators and outcomes.
3	Scan the landscape for existing resources and approaches; identify opportunities and gaps.
4	Design survey of camp leaders to assess needs related to staff training, program design, and policy systems that foster mental, emotional, and social thriving at camp.
5	Synthesize the landscape scan and survey results to craft recommendations for a training approach and supporting materials to promote mental, emotional, and social thriving among campers and staff.
6	Report recommendations to H.E. Butt Foundation to inform collaborative preparation for Phase 2.

Accordingly, a committee meeting convened for Stage 1 on August 6, 2021 via Zoom. The committee included ACA research team members, HEB staff members, and field experts (e.g., camp directors, social workers, psychologists in private practice and/or affiliated with a summer camp). In August of 2021, the committee engaged in Stage 2, working to operationalize *mental, emotional, and social thriving*, and ultimately settled on the following definition to guide the remaining stages of Phase 1:

> *Mental health is the ability to demonstrate developmentally appropriate mental, emotional and social health responses to life, responses that guide the individual in both positive and negative situations and are culturally based on that person's world view.*

In addition, mental health is a dynamic state, one that adjusts to circumstances, including those associated with growth and development. Good mental health fosters resiliency within the individual, provides a sense of hope to the person, and allows the person to relate to others with unconditional positive regard.

Acknowledging children and youths dependency, their mental health is based on having a positive developmental relationship with their significant care-givers.

This definition was further adapted for use in public-facing project components as follows:

Wellbeing is defined as a person's physical, social, emotional, and/or spiritual health.

At camp, wellbeing is characterized by a campers' and staff members' ability to participate fully and in the ways they choose while feeling safe, supported, and engaged.

Stages 3 and 4 commenced in winter of 2021. Initial results from the Stage 3 Landscape Scan were presented to the committee in December of 2021, informing the December launch of the Stage 4 Needs Assessment Survey. Following this, an additional stage was added to Phase 1 involving in-person focus groups intended to supplement findings from Stages 3 and 4 and therefore better inform Stage 5. These focus groups took place on February 10, 2022 at ACA's National Conference in Portland, OR. Finally, the project committee convened on March 9-11, 2022 for Stage 5 at Laity Lodge outside of San Antonio, TX.

This report represents Stage 6 of Phase 1, and presents the final results from Stages 3-5 of Phase 1 of the *Supporting Camper Well-Being* project.

Executive Summary

Strategies for supporting youth and staff mental health and well-being are important for any youth-serving organization, including summer camps. Results from the Landscape Scan (Stage 3) reveal that there are numerous youth mental health and well-being resources already developed and readily available. However, practitioners responding to the Needs Assessment Survey (Stage 4) and involved in the Focus Groups articulated a clear need for additional mental health and well-being resources that cater to the unique context of summer camp.

Findings from Phase 1 also revealed an important distinction. Firstly, results from the Needs Assessment Survey and the Focus Groups revealed numerous targeted, topical concerns for staff training resources. Some examples include appropriate mental health language, how to listen and be present with campers, and effective de-escalation and debriefing techniques (both counselor-to-camper as well was counselor-to-counselor). Additionally, numerous structural considerations were stressed, including the cost of training resources, the length/time commitment of training resources, and the delivery method of training resources. Secondly, in working to synthesize results from Stages 3-4 at the H.E.B. Retreat (Stage 5), the project committee identified the need for strategies and resources to support camps seeking to shift their *overall camp culture* to be more conscientious of camper well-being.

Therefore, future resources designed to support mental health and well-being at camp will need to be multi-faceted and should frame supporting camper well-being as an ongoing and dynamic process. In particular, resources pertaining to staff training should be thorough in their measures of well-being, diverse in the content provided, and flexible and accessible in their delivery methods. Key barriers to consider when developing new staff training resources include time, cost, clarity of content, and ease of implementation. Key opportunities include pathways for engaging with mental health and well-being experts, the development of policies and protocols that support mental health readiness, and mechanism that help camps identify gaps in their present mental health and well-being training curriculum.

Landscape Audit

Overview

This section presents findings from the Landscape Audit conducted in the third stage of Phase 1 of the *Supporting Camper Well-Being* project. The purpose of this landscape audit was to identify current well-being resources, identify the gaps in current well-being resources, and develop recommendations for future well-being resources. While the organizations included span a wide assortment of both in-school and out-of-school time programs, organizations, agencies, and so on, many of the recommendations and suggestions remain relevant to the camp setting. The findings are divided into two main sections. The first section offers general recommendations for future programs and trainings aimed at supporting camper well-being. The second section provides detailed findings of resources designed to support youth well-being (arranged alphabetically by the providing organization).

General Recommendations

Measures

For the purposes of this landscape audit, well-being is defined as a person's mental, social, emotional, and physical health. At camp, well-being is characterized by a campers' ability to participate fully and in the ways they choose while feeling safe, supported, and engaged.

Mental

Mental well-being includes our psychological, social, and emotional well-being. It affects how we think, feel, and act, and helps determine how we handle stress, relate to others, and make healthy choices. Some examples of things that might affect a camper's mental well-being include depression, anxiety, and eating disorders.

Social

Social well-being may be defined as the ability to communicate, develop meaningful relationships with others, and maintain a support network that helps you overcome loneliness. An example of something that might affect a camper's social well-being is bullying or the prevalence of cliques at camp.

Emotional

Emotional well-being may be defined as the ability to produce positive emotions, moods, thoughts, and feelings, and adapt when confronted with adversity and stressful situations. Some examples of things that might affect a camper's emotional well-being at camp include homesickness, grief, and trauma.

Physical

Physical well-being is the direct result of lifestyle choices and our behaviors around sleep, diet, physical activity, hygiene, and relaxation that achieve or derail optimal functioning. Some examples of things that might affect a camper's physical well-being at camp include asthma, allergies, and diabetes.

Given the multifaced nature of well-being as a concept, measuring well-being is similarly complex. To fully capture the level of well-being at camp, be it staff or participant, we recommend either multidimensional resources that measure all

aspects of well-being (that is, mental, social, emotional, and physical well-being), or a menu of multiple measures that when combined cover all aspects of well-being.

Delivery Method

To meet the needs of different camps, we recommend a diversity of delivery methods. For example, while some camps still conduct staff training onsite prior to the campers' arrivals, others have moved to online training (both live and recorded). Future well-being resources should be adaptable to these diverse training settings. Other things to consider when designing future resources include: live and on-demand webinars, self-paced training and certification courses, individual versus group training settings, and downloadable materials (e.g., checklists, assessments, workbooks, toolkits, etc.).

Accessibility

Numerous youth well-being resources are already available, both for free and at a cost. In order to remain competitive with well-being resources presently available, we recommend freely accessible resources whenever possible. If the cost of resources needs to be offset (e.g., covering the wages of a trainer leading a live online group training), we recommend offering at a discount to members whenever possible.

Findings

Afterschool Alliance

Believing that afterschool programs are critical to children and families, Afterschool Alliance works to ensure that all children and families have access to affordable, quality afterschool programs. With a dedicated Health & Wellness section of their website, Afterschool Alliance acknowledges that, "Supporting health and wellness is an important aspect of out-of-school time (OST) programs, from providing access to nutritious foods and promoting healthy habits, to keeping students physically fit and supporting mental health" (Afterschool Alliance, 2021). The organization developed and operates from a positive health youth development framework (see Appendix B) that allows providers to view and address health issues holistically and in correlation to each other.

Regarding resources for practitioners, while Afterschool Alliance provides numerous informational resources, including research briefs, fact sheets, and informational webinars, the organization does not appear to offer any training resources for providers of afterschool programs. Their health and wellness webinars cover nutrition, physical and mental health, and include tools, tips, resources, and stories. Some examples of Afterschool Alliance webinars include, "Latest Strategies for Bringing Health & Wellness to OST," "Lights on Afterschool: Promoting Healthy Eating & Physical Activity," and "Supporting Grieving Children in Afterschool & Summer Learning Programs."

Alliance for a Healthier Generation

Healthier Generation works with schools, youth-serving organizations, and businesses to build healthier communities that support healthy kids. The alliance acknowledges out-of-school time programs as a critical space for the development of healthy habits, as well as social and emotional skills for both youth and their families.

After registering for a free account, practitioners can use their Action Center to: assess the health and wellness of their school, district, or out-of-school time program; use the Thriving Schools Integrated Assessment to identify opportunities to improve policies and practices that promote well-being for both youth and staff; utilize the RISE Index (presented in partnership with Kaiser Permanente); locate resources to help families; and access trainings on physical education and activity, employee wellness,

nutrition, social-emotional health and learning, policy, and more. Using the Training Center feature, users can filter trainings according to subject (e.g., employee wellness) or type (online class, event, curriculum, material, or video).

Healthier Generation also offers professional services such as capacity building support and technical assistance packages that can be tailored to cover topics ranging from social-emotional health to tobacco-free schools, as well as virtual or in-person professional learning opportunities including training-of-trainers and tailored professional development courses.

American Camp Association

As a leading authority in youth development, the American Camp Association (ACA) works to preserve, promote, and improve the camp experience. This includes a commitment to helping members and camps provide: camp communities committed to a safe, nurturing environment; caring, competent adult role models; healthy developmentally appropriate experiences; opportunities for leadership and personal growth; discovery, experiential education, and learning opportunities; and excellence and continuous self-improvement. In support of these commitments, ACA offers numerous resources, events, and professional development opportunities.

Using the resource library, users can search by keyword, topic, core competency, or type of resource, yielding results such as the "Mental Health Resources—Tips for Camps." There are also numerous events and online learning opportunities available for both members and non-members. Examples of some of these courses and webinars include "Critical Things Staff Need to Know about Bullying Prevention," "Mental Health Issues in Camp," and "Practicing and Teaching Mindfulness."

The ACA also lists Health & Wellness (and more specifically, Mental Health) as one of thirteen core competencies adults working with children need knowledge in to provide high quality, developmentally appropriate experiences. Finally, ACA compiled a Healthy Camp Toolbox focused on Mental, Emotional and Social Health (MESH) which includes pre-camp checklists, informational documents, assessment tools, mental health first aid support, and several other MESH-specific resources.

American Red Cross

The mission of the American Red Cross is to prevent and alleviate human suffering in the face of emergencies by mobilizing the power of volunteers and the

generosity of others. Designed specifically in response to challenges emerging as a result of the COVID-19 pandemic, their Psychological First Aid: Supporting Yourself and Others During COVID-19 course helps participants build resilience and learn to support themselves and others by reviewing basic principles of providing psychological first aid, including how to recognize and manage stress, as well as how to lend support to family members, friends and coworkers during and following the COVID-19 outbreak.

Association of Camp Nursing

As a leading voice in camp health, the mission of the Association of Camp Nursing is building healthier camp communities by supporting the practice of camp nursing. Through their Online Education Center, fee-based self-paced online courses are available, such as Physical Assessment at Camp and the 2021 CAN Symposium workshops (which included "Supporting Staff Mental Health: Five Overlooked Essentials"). ACN also offers webinars, which are free of charge for ACN members.

Child Care Technical Assistance Network

As part of the Administration for Children & Families, under the U.S. Department of Health & Human Services, the Child Care Technical Assistance Network (CCTAN) works with its partners to promote excellence through high-quality, practical resources and approaches designed to build early childhood program capacity and promote consistent practices across communities, states, territories, and Tribes. Particularly in response to the COVID-19 Pandemic, Social-Emotional Wellness is now listed as a primary topic among their resources. A few free webinars are made available, along with a Resource Guide for Developing Integrated Strategies to Support the Social and Emotional Wellness of Children. Topics include but are not limited to: social and emotional wellness initiative and delivery systems, the pyramid model for promoting social emotional competence in infants and young children, and examples of social and emotional development in state QRIS standards. CCTAN has also compiled a practice brief, Supporting and Promoting Mental Health in Out-of-School Time, which explores some of the current mental health needs of school-age children, their families, and the OST workforce.

The National Academies of Sciences, Engineering, and Medicine

The National Academies of Sciences, Engineering, and Medicine are private, nonprofit institutions that provide expert advice on some of the most pressing

challenges facing the nation and world and whose work helps shape policies, inform public opinion, and advance the pursuit of science, engineering, and medicine. In light of the ongoing global COVID-19 pandemic, NASEM created Tools for Supporting Emotional Wellbeing in Children and Youth to promote the mental and emotional wellbeing of children and youth during the COVID-19 crisis and beyond. The tools, based on cognitive behavioral therapy (CBT) aim to help reduce stress, anxiety and depression, and are intended for children and youth directly, as well as adults (including parents, teachers, and other caregivers) looking to help children and youth with stress, anxiety, and depression.

National Alliance for Children's Grief

The National Alliance for Children's Grief (NACG) is a nonprofit organization that raises the awareness about the needs of children and teens who are grieving and provides education and resources for anyone who supports them. Given that the issues surrounding childhood bereavement are often not addressed in academic programs and credentialing preparation, the NACG has made educating and training the vast children's health community representing a number of professions (i.e., social workers, counselors, physicians, etc.) a top priority. In support of these efforts, NACG has an abundant list of resources on their website, including toolkits, activity books and activity cards, fact sheets, and videos. They also offer various educational opportunities via monthly webinars and their annual symposium.

The National Center for School Mental Health

Housed at the University of Maryland's School of Medicine, the National Center for School Mental Health is technical assistance and training center with a focus on advancing research, training, policy, and practice in school mental health. Through their School Health Assessment and Performance Evaluation System (SHAPE System), numerous resources are available, including mental health quality assessments, research reports, screening measures, etc. all aimed at helping professionals improve school mental health programming and sustainability in schools.

The National Council for Mental Wellbeing

The National Council for Mental Wellbeing is a membership organization that advocates for policies to ensure equitable access to high-quality services, builds the capacity of mental health and substance use treatment organizations, and promotes

greater understanding of mental wellbeing as a core component of comprehensive health and health care. Through their Mental Health First Aid program (with courses designed specifically for adults working with youth, and teens working with teens), participants learn to identify, understand, and response to signs and symptoms of mental health and substance use challenges.

YMCA

The YMCA is a leading nonprofit committed to strengthening individuals and communities across the country. Recently, several Mental Health Go Kits have been developed and made available on the Y-USA private portal, available to all YMCA staff members. This set of YMCA mental health resources, including videos and downloadable worksheets, is designed to help practitioners manage and develop certain competencies, such as resilience building, mental health conversations, trauma-informed responses, emotion regulation, and suicide prevention.

Youth Aware of Mental Health

Youth Aware of Mental Health (or YAM) is a school-based program designed to teach youth (aged 13 to 17) about mental health. As an evidence-based classroom program, students actively engage with the topic of mental health through role-play and student led discussions. Although the YAM program is facilitated by two trained adults, youth voice is a key part of the YAM experience and curriculum which invites young people to reflect on their emotions and consider different approaches when faced with life challenges or mental health concerns.

YouthPower

YouthPower is a non-governmental organization that seeks to create a society with positive values, in which young people are contributing to tolerance and interpersonal dialogue, promoting healthy lifestyles, gender equality, non-violence, and actively involved in social life and politics. Using a positive youth development approach, YouthPower seeks to improve the capacity of youth-led and youth-serving institutions and engage young people, their families and communities so that youth can reach their full potential. Their Integrating Mental Health and Psychosocial Support into Youth Programming toolkit provides strategies and tools for designing, implementing, and evaluating mental health and psychosocial support (MHPSS) programs and activities for youth in low- and middle-income countries (LMICSs) and

conflict-affected contexts. The toolkit provides helpful guidance, tips, and resources on where to start and how to program effectively, and aims to help practitioners in both development and humanitarian contexts:

1. Use clear terminology and definitions when working in the areas of youth and PHPSS
2. Be strategic and realistic about what to expect of MHPSS programming targeting youth.
3. Design better programs according to the principles of "what works" (what is supported by evidence) and "what might work" (promising activities with less rigorous evidence).
4. Understand the recommended qualifications for staff who manage activities that integrate MHPSS.
5. Apply examples of illustrative interventions and select appropriate expected outcomes and indicators for youth MHPSS programming.
6. Prepare an evaluation scope of work to analyze MHPSS activities or needs.

Conclusion

Strategies for supporting youth and staff well-being are vital for any youth-serving organization, including summer camps. Many of the organizations reviewed in this landscape audit demonstrated the need for *thoroughness*, *flexibility* and *diversity* when offering resources to support youth well-being. The more robust resources covered a variety of well-being measures and could be delivered to users in a variety of ways. While these resources remain helpful and relevant in the broader scope of youth well-being, additional resources that speak specifically to the summer camp context are still necessary. To complement present in-school, after-school, and out-of-school time resources, camp-specific resources should remain similarly thorough in their coverage of all aspects of youth-wellbeing, and flexible in the diversity of delivery methods and accessibility options, while addressing the specific context and needs of the camp setting.

Needs Assessment Survey

Overview

This section presents findings from the Needs Assessment Survey conducted in the fourth stage of Phase 1 of the *Supporting Camper Well-Being* project. The purpose of this survey was to assess needs related to staff training, program design, and policy systems that foster mental, emotional, and social thriving at camp. The findings are divided into three main sections: (1) camper wellbeing, (2) staff wellbeing, and (3) supports for camper and staff wellbeing.

Methods

Population

Survey participants were solicited via an anonymous link provided in the ACA Now email newsletter. A detailed breakdown of the sample profile may be found in Appendix C.

Online Survey

The 26-items survey was distributed via Qualtrics online survey software. The survey was launched on November 30, 2021. Due to a low initial response rate, the survey was promoted again and re-launched on January 18, 2022. To increase responses and decrease the cognitive load on respondents, the re-launched survey was shortened utilizing randomization logic for sections pertaining to current staff training, practices, and policies so that respondents only received one survey item chosen at random (and equally distributed among all survey respondents from all relevant survey items). Average time to completion was 4,486 minutes (survey settings enables participants to leave the survey and return at a later time to complete it); Median time to completion was 478.5 minutes. The survey was closed on February 11, 2022, and all responses (including partial responses) were recorded on February 14,2022.

Cleaning

Screening procedures were employed to clean the data prior to analyzing the data. Responses were removed if they responded to less than 10 percent of relevant items, resulting in 92 usable responses that were included in the analysis. Items were analyzed on a per-item basis, meaning the results for each survey item may represent a different number of responses. The number of responses analyzed for each item is indicated as *n=* throughout this section of the report.

Reporting

The following section reports the results of the survey responses provided by individuals. Results are not segmented in any way. A detailed breakdown of the sample profile may be found in Appendix C.

Summary of Findings

Overall, findings suggest that both camper and frontline staff overall, emotional, social, and spiritual well-being was worse compared to previous years. Physical well-being among both campers and frontline staff was generally reported to be either consistent with previous years or a little worse compared to previous years. Regarding well-being related diagnoses and/or behaviors among campers and frontline staff, a majority of respondents reported an increase in: diagnoses related to mental health disclosed in the camper pre-camp intake process; mental health issues manifesting among bother camps and frontline staff at camp; behaviors among both campers and frontline staff requiring staff interventions; and other interventions related to mental health needs (e.g., telehealth with at home mental health provider), personal care, additional time off, etc. among frontline staff.

Shifting to consider staff training, programs and practices, and policies, most respondents indicated that their camp presently supports camper and staff well-being via including topics related to camper and staff well-being in staff training, numerous programs and practices (for example, discussing topics related to camper and staff well-being during in-season staff meetings and observing/monitoring camper well-being), as well as policies related to what/how they ask about mental health on pre-camp health forms, policies related to how they address camper behavioral concerns at camp, and policies related to how they address staff behavioral concerns. Most respondents also indicated that while they do not currently engage a mental health professional to train staff (e.g., LCSW) or employ a mental health professional as a dedicated staff member (e.g., camper care coordinator), most respondents indicated that they have considered it. Similarly, more than half of respondents reported that although their camp did not currently have policies related to how they seek advice from mental health professionals nor policies related to how they work with parents/caregivers to ensure mental health readiness, their camp has considered it.

Looking at camps' general approaches to staff training, slightly more than half of the participants responding to this survey reported that they train their staff entirely on-site/in-person and slightly less than half reported that they train their staff using a combination of online and in-person training. No camps reported using primarily online training. Furthermore, most respondents indicated that their camps currently use scenarios and discussion as part of their frontline staff training. While only about

half of the participants responding to this survey indicated that their camp currently uses online training, structured curricula, and experts as part of their frontline staff training, most of the remaining survey respondents indicated that they would like to use these training modalities. Importantly, when provided with an open-ended response box to share would help them to include more training related to supporting camper well-being, the most common responses were time, professional training, and access to a network of experts.

Findings

To establish a baseline from which all respondents would consider camper and staff well-being, the following definition was provided at the start of the survey:

> ***Well-being*** *is defined as a person's* physical, social, emotional*, and/or* spiritual *health. At camp, well-being is characterized by a campers' and staff members' ability to participate fully and in the ways they choose while feeling safe, supported, and engaged.*

Camper Well-Being

To prime survey respondents to consider camper well-being, respondents were asked to write a few words describing what camper well-being looks like at their camp. Open ended text boxes were provided, and results were coded using an open coding scheme. The top three most commonly reported themes for each dimension of well-being were: basic needs, engaged, and active (physical well-being); happy, emotional self-regulation, and engaged (emotional well-being); and engaging with others, friends, and community (social well-being; see Table 2).

Participants were then asked to consider whether camper well-being was different in summer 2021 compared to previous summers. Overall, most respondents reported that overall, emotional, social, and spiritual well-being was worse (either a little worse or a lot worse) in 2021 compared to previous years (see Figure 1). Whereas 34% of respondents reported that physical well-being was worse (either a little worse or a lot worse) compared to previous years, 55% reported that there was no change in physical well-being among campers compared to previous years.

When asked about changes in well-being related diagnoses and/or behaviors among campers in 2021 compared to previous summers, a majority of respondents reported an increase (either a little or a lot) in diagnoses related to mental health disclosed in pre-camp intake process, mental health issues manifesting at camp, and behaviors requiring staff intervention (see Figure 2). More than half of respondents reported that there was no change compared to previous years in medications related to mental health, other interventions related to mental health needs (e.g., telehealth with at home mental health provider), and behaviors related to self-harm.

Table 2 Descriptions of Camper Well-Being (n=58)

Think about what camper well-being looks like when you are walking around camp—the things you see, hear and feel. Write a few words to describe what camper well-being looks like at your camp:			
Well-Being Dimension	**Code**	**Example Response**	**Count**
Physical	Basic Needs	"Hydrating, enough to eat, breaks on hot days (pool or shade), running/game play, sunscreen application"	14
	Engaged	"senses fully engaged"	13
	Active	"alert, pep in step, active participation"	10
	Safe	"kids are able to eat safely without worry, have a safe cabin, and someone looking our for them"	9
	Able to Participate	"walk, talk, eat on their own"	7
	Energized	"energetic, awake, participating, lots of movement"	4
Emotional	Happy	"positive talk, smiles, relaxed expressions, interacting with others"	21
	Emotional Self-Regulation	"able to regulate through the day, asks for help when needed, treats self and others with respect, engaged"	13
	Engaged	"active participation, positive attitude, can do attitude"	11
	Safe	"feeling safe to express the full range of their emotions—grief, joy, anger, frustration, happiness, etc.—while also allowing other campers the shared safety"	10
	Social Connection	"positive age-appropriate relationships with staff and campers	7
	Emotional Intelligence	"confidence, empathy, emotional intelligence"	7
	Staff Support	"staff trained to deal with a variety of situations and emotions"	4
Social	Engaging with Others	"campers engage with each other"	21
	Friends	"old and new friends, fostering healthy relationships"	17
	Community	"finding your people or your place at camp"	7
	Connection	"peer connections and healthy counselor relationships"	7
	Pro-Social Behavior	"eye contact with others, holding hands, hugs"; "collaboration, peace making"	6
	Able to Participate	"ability to socialize while dealing with mental or physical diagnoses"	5
	Safe	"feeling free to talk, go to, connect with, know other emotionally or physically, directly or indirectly"	5
	Communication	"communication"	4
	Conflict Resolution	"conflicts resolved positively"	3
	Social Support	"empathy sharing, looking out for each other"	3
	Engaged	"engaged"	3

Figure 1 Differences in Camper Well-Being Compared to Previous Summers (n=65)

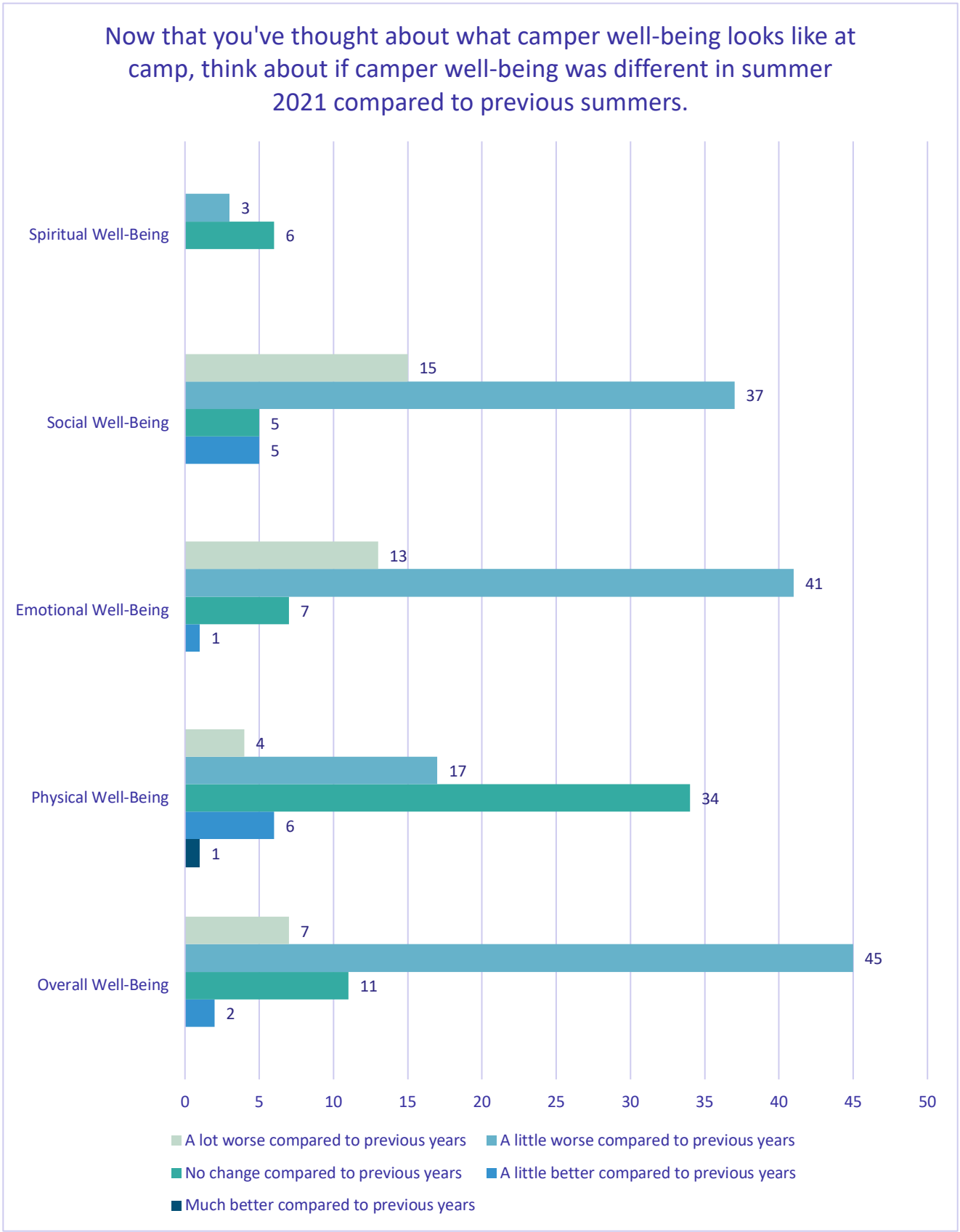
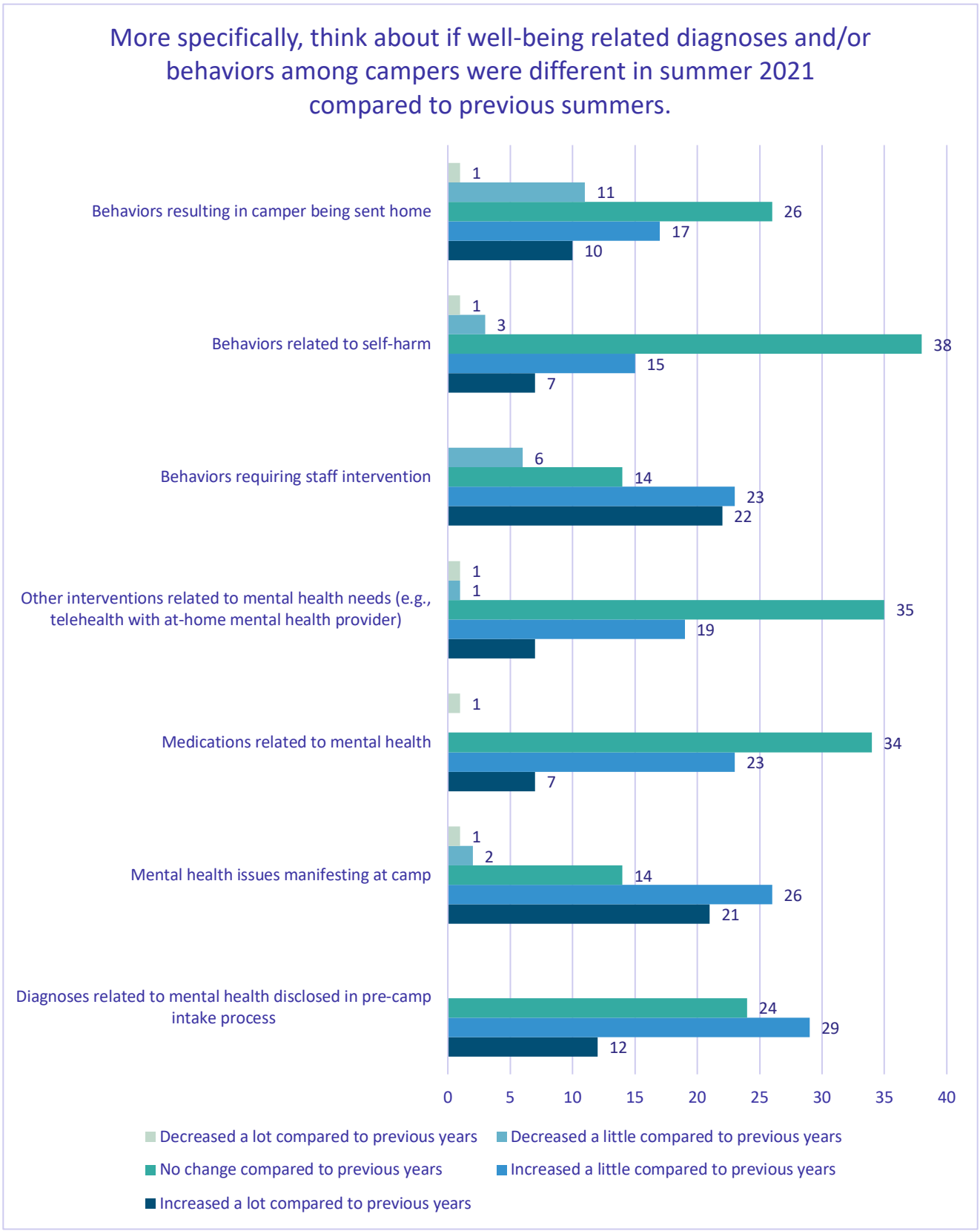


Figure 2 Differences in Well-Being Related Diagnoses and/or Behaviors Among Campers Compared to Previous Summers (n=65)



Staff Well-Being

For the purposes of this survey, the following definition of *staff* was provided at the start of the survey:

> ***Staff*** *includes camp staff who work directly with campers on a regular basis and camp leaders who train and support frontline staff.*

To prime survey respondents to consider staff well-being, respondents were asked to write a few words describing what frontline staff well-being looks like at their camp. Open ended text boxes were provided, and results were coded using an open coding scheme. The top three most commonly reported themes for each dimension of well-being were: energized, rested, and basic needs (physical well-being); engaged, self-care, and emotional self-regulation (emotional well-being); and engaged, connection, and friends (social well-being; see Table 3).

Participants were then asked to consider whether frontline staff well-being was different in summer 2021 compared to previous summers. Similar to camper well-being, overall, most respondents reported that overall, emotional, social, and spiritual well-being was worse (either a little worse or a lot worse) in 2021 compared to previous years (see Figure 3). Continuing, whereas 40% of respondents reported that physical well-being was worse (either a little worse or a lot worse) compared to previous years, 52% reported that there was no change in physical well-being among frontline staff compared to previous years.

When asked about changes in well-being related diagnoses and/or behaviors among frontline staff in 2021 compared to previous summers, a majority of respondents reported an increase (either a little or a lot) in: undisclosed mental health issues manifesting at camp; other interventions related to mental health needs (e.g., telehealth with at home mental health provider), personal care, additional time off, etc; and behaviors requiring staff intervention (see Figure 4). More than half of respondents reported that there was no change compared to previous years in diagnoses related to mental health disclosed in pre-camp intake process, and medications related to mental health. A majority of respondents also reported no change compared to previous years in behaviors related to self-harm and behaviors resulting in frontline staff members being sent home.

Table 3 Descriptions of Frontline Staff Well-Being (n=33)

Think about what frontline staff well-being looks like when you are walking around camp—the things you see, hear, and feel. Write a few words to describe what frontline staff well-being looks like at your camp:			
Well-Being Dimension	**Code**	**Example Response**	**Count**
Physical	Energized	"energetic, awake/alert, bright affect"	16
	Rested	"rested"	11
	Basic Needs	"well-fed, hydrated"	10
	Engaged	"engaged with campers and other staff"	5
	Self-Regulation	"taking enough breaks to stay healthy, no sick call-outs"	2
	Safe	"safety"	2
	Physically Active	"physically active, healthy, fit"	2
Emotional	Engaged	"happy and engaged with campers"	10
	Self-Care	"getting enough sleep, talking to each other generatively (rather than griping), asking for support and help, talking to loved ones back home, taking breaks"	8
	Emotional Self-Regulation	"takes time for themselves to rest and recharge"	7
	Happy	"energized and in their happy place"	6
	Professional	"staff are ready to work and not bringing personal issues to work"	5
	Positive	"positivity, realistic intentions"	5
	Support	"they feel supported by the leadership team and ask questions"	3
	Resilient	"resilience during/after difficult situations"	2
	Emotional Intelligence	"self managing anxiety, self awareness, emotional intelligence, not ghosting, not quiting"	2
Social	Engaged	"engaging with campers and staff"	10
	Connection	"connections with campers"	10
	Friends	"friendships, positive rapport with coworkers and children"	8
	Community	"talking to others caring for all"	8
	Communication	"communicates needs and concerns"	7
	Off-Time	"after camp hang out times"	5
	Support	"supporting social development of campers"	3
	Happy	"they are happy and enjoying there time at camp with campers and staff"	3
	Atmosphere	"welcoming, friendly"	2

Figure 3 Differences in Frontline Staff Well-Being Compared to Previous Summers (n=52)

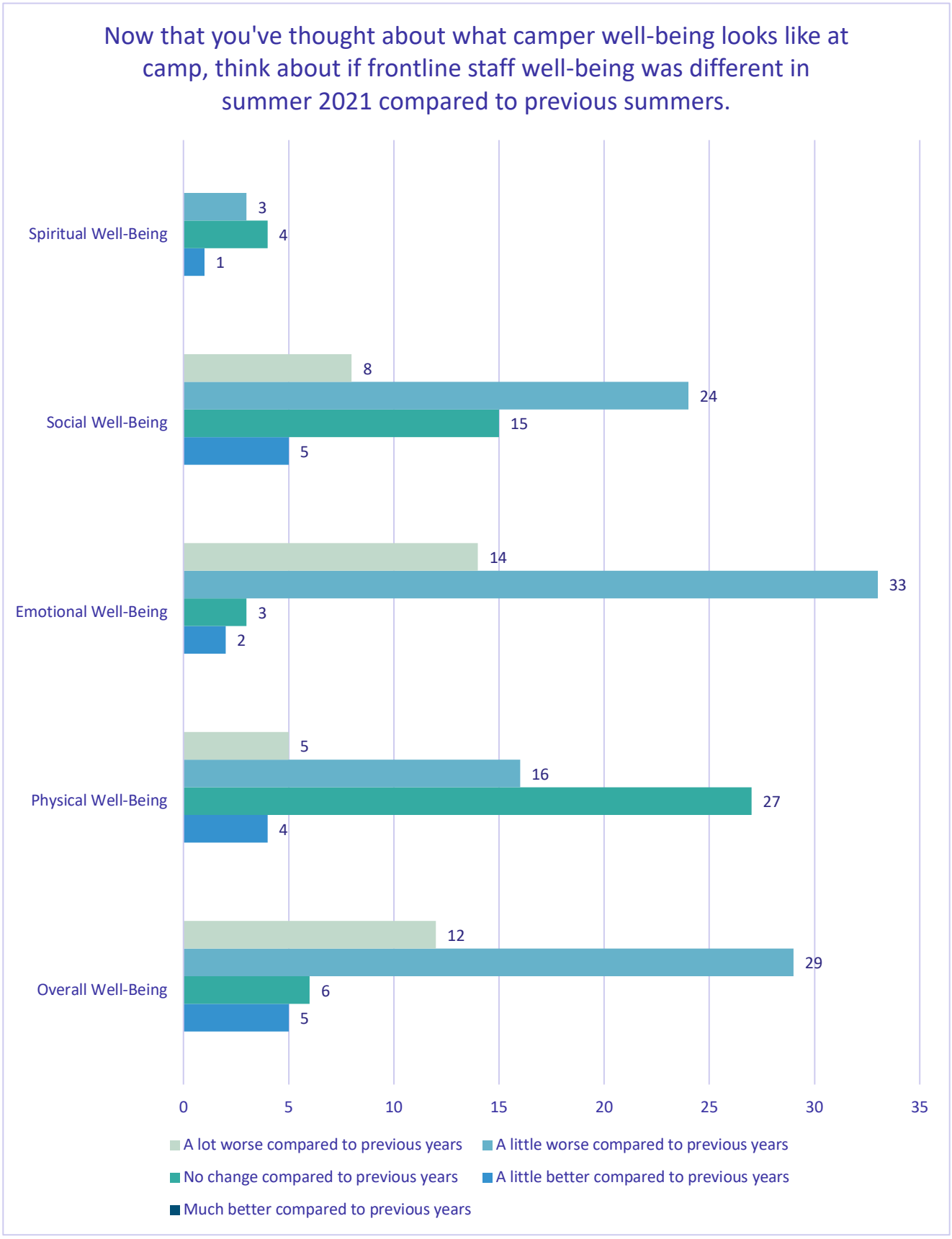
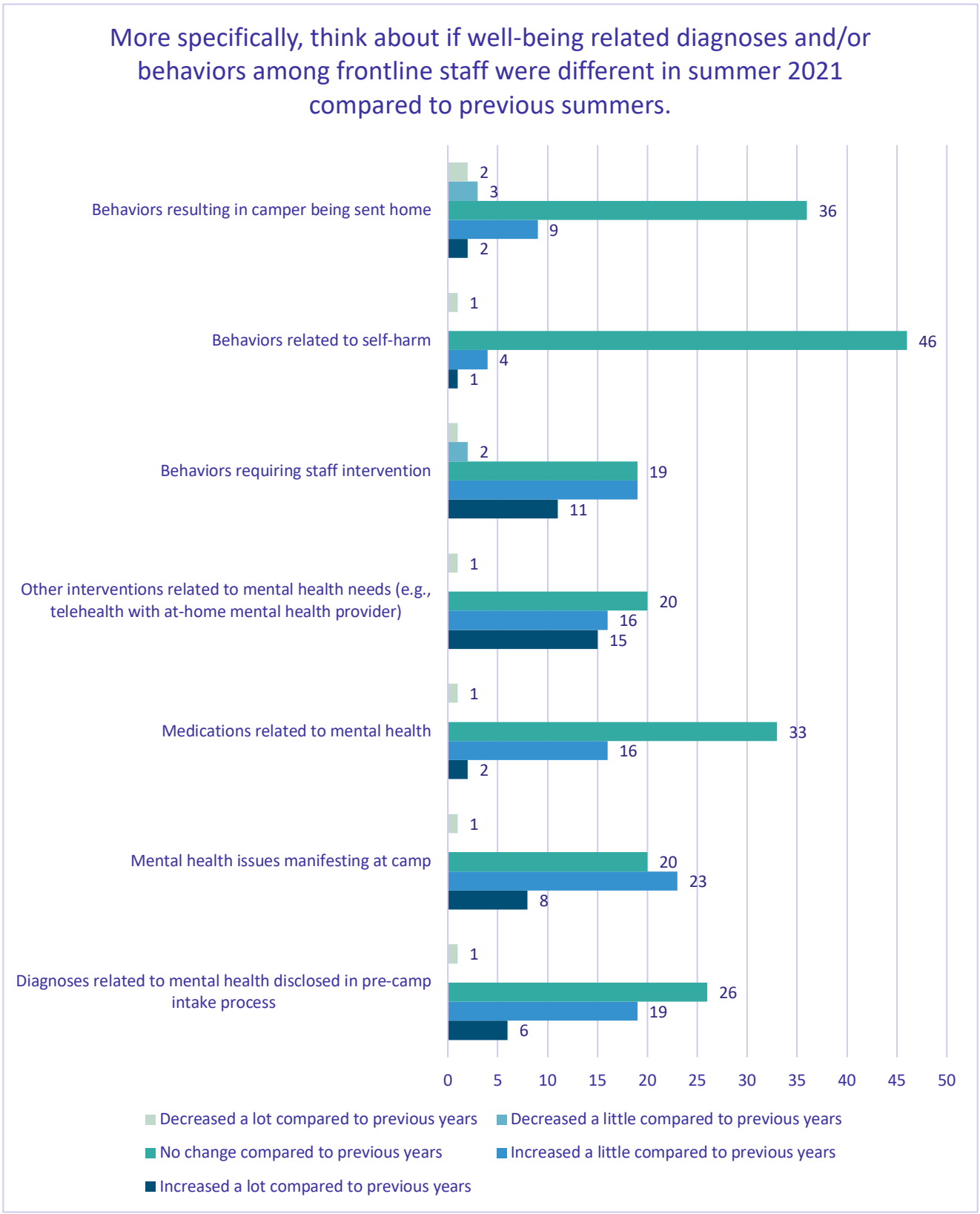


Figure 4 Differences in Well-Being Related Diagnoses and/or Behaviors Among Frontline Staff Compared to Previous Summers (n=52)



Supports for Camper & Frontline Staff Well-Being

For the purposes of this survey, the following definitions were provided at the start of the survey:

> ***Staff training*** *refers to what a camp does before, during, and after camp to prepare staff to support camper well-being.*
>
> ***Practices*** *refer to what happens at camp--schedule, activities, unstructured time, how staff interact with campers.*
>
> ***Policies*** *refer to rules and processes at a camp, like what happens during the camper registration process, how your camp addresses behavioral challenges, etc.*

When asked about the ways their camp supports camper/staff well-being through staff training, most respondents indicated including topics related to camper and staff well-being in staff training in 2021 (see Figure 5). Just over half of respondents indicated using existing curricula as part of staff training (e.g., mental health first aid). Regarding engaging a mental health professional to train staff (e.g., LCSW) and hiring a mental health professional as a dedicated staff member (e.g., camper care coordinator), most respondents indicated that they do not currently do this but have considered it.

Regarding the ways their camp supports camper/staff well-being through programs and practices, most respondents responded "we did this in summer 2021" for all options provided (see Figure 6). In considering the ways their camp supports camper/staff well-being through policies, most respondents reported that in 2021, their camp had policies related to what/how they ask about mental health on pre-camp health forms, policies related to how they address camper behavioral concerns at camp, and policies related to how they address staff behavioral concerns. More than half of respondents reported that although their camp did not currently have policies related to how they seek advice from mental health professionals nor policies related to how they work with parents/caregivers to ensure mental health readiness, their camp has considered it (see Figure 7).

Looking at camps' general approaches to staff training, just over half (54%) of the participants responding to this survey reported that they train their staff entirely on-site/in-person (see Figure 8). Just under half (46%) of the participants responding to this survey reported that they train their staff using a combination of online and in-person training. No camps reported using primarily online training. Furthermore, most respondents indicated that their camps currently use scenarios (e.g., case

studies, role play, and “what would you do if” set ups) and discussion (e.g., open or structured conversation about topics related to camper well-being) as part of their frontline staff training (see Figure 9). And while only about half of the participants responding to this survey indicated that their camp currently uses online training (e.g., webinars, online courses), structured curricula (e.g., a structured series that might include activities, discussion questions, worksheet), and experts (e.g., recorded talks, virtual training, consultation) as part of their frontline staff training, most of the remaining survey respondents indicated that they would like to use these training modalities.

Finally, when asked to what extent camper well-being is a priority in their camp’s current approach to staff training, all respondents indicated camper wellbeing was at least a medium priority, if not a high or the highest priority in their approach to staff training (see Figure 10). When provided with an open-ended response box to share would help them to include more training related to supporting camper well-being, the most common responses were time, professional training, and access to a network of experts.

Figure 5 Camper/Staff Well-Being Training Supports (n=37)

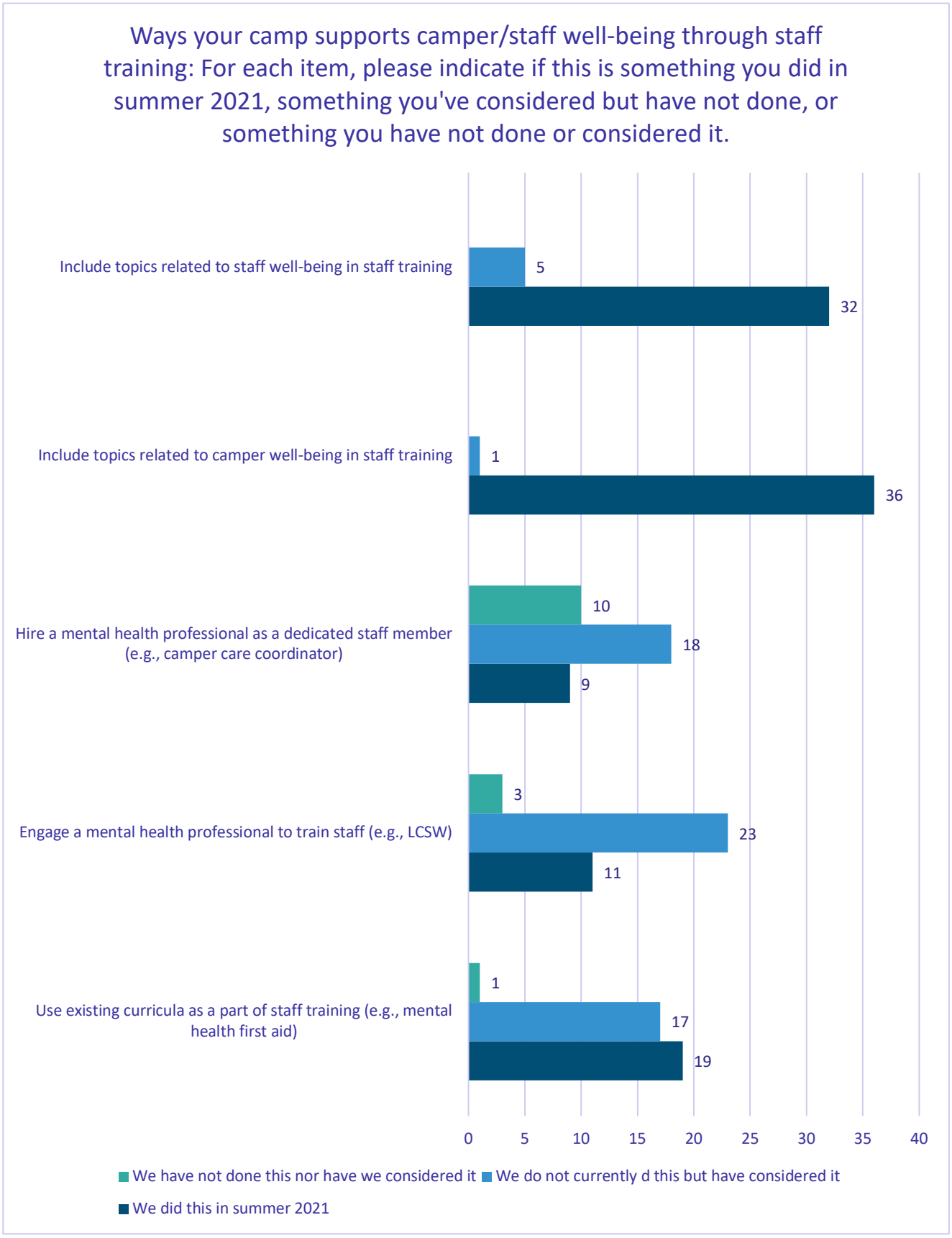


Figure 6 Camper/Staff Well-Being Program & Practice Supports (n=41)

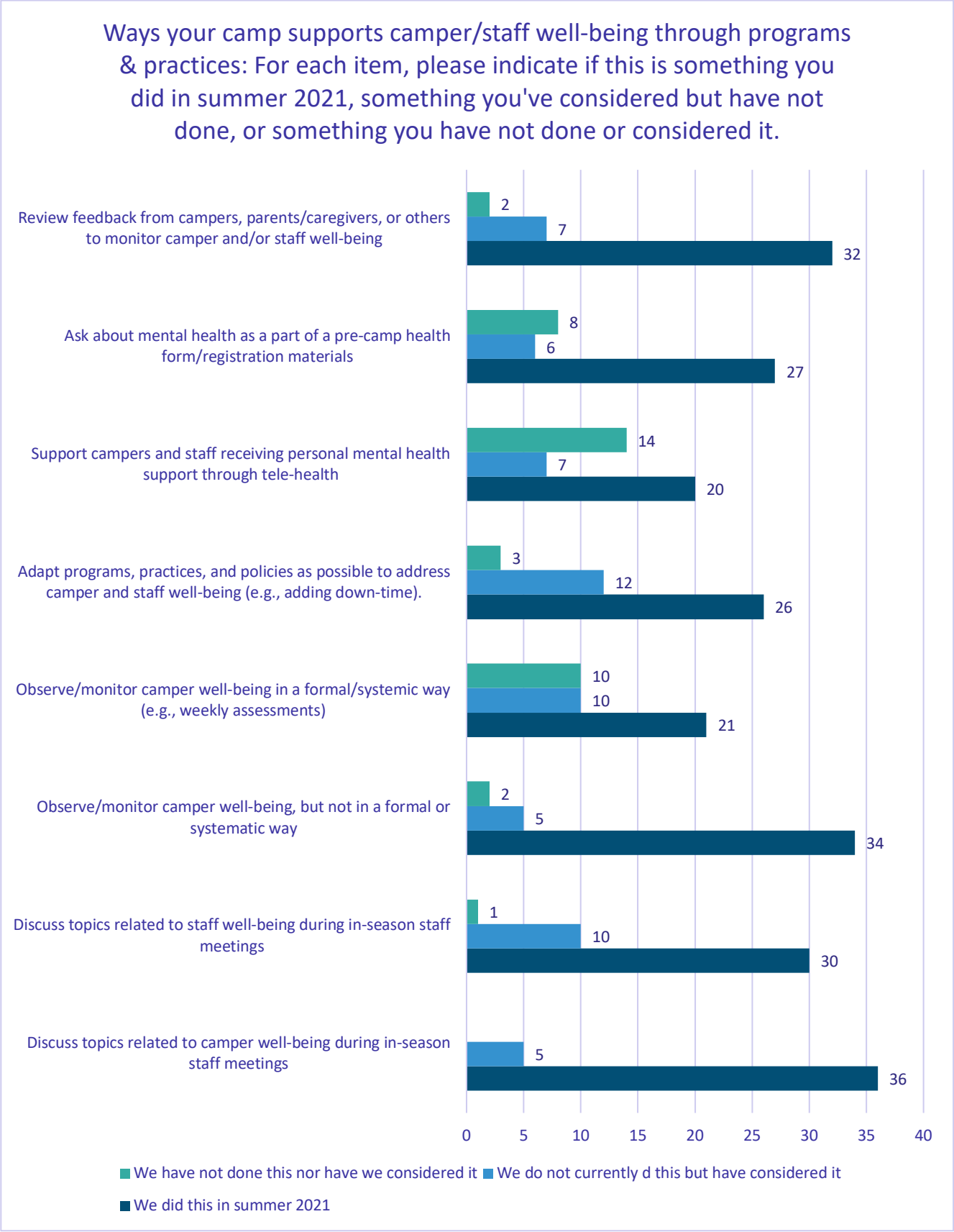


Figure 7 Camper/Staff Well-Being Policy Supports (n=40)

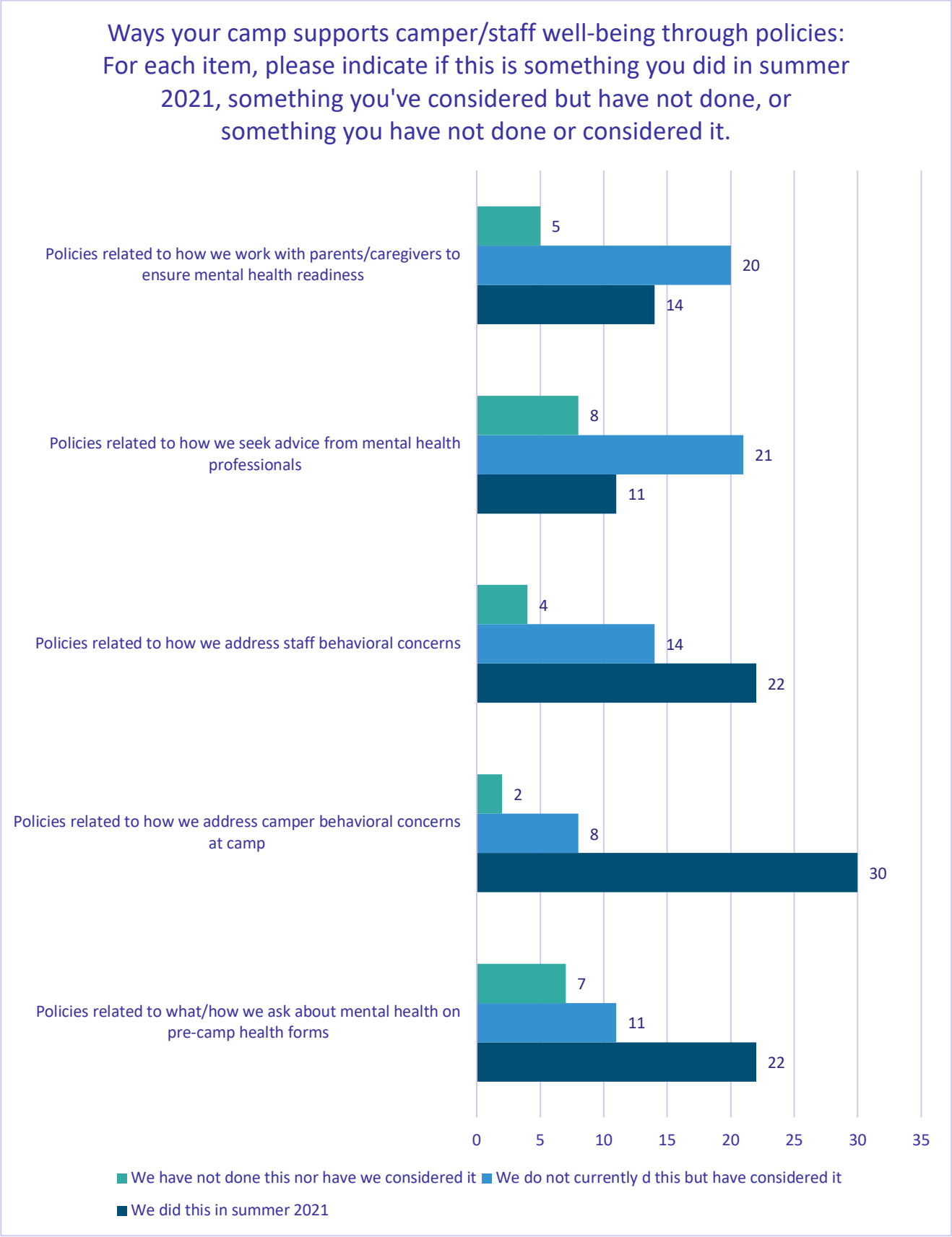


Figure 8 General Approach to Staff Training (n=46)

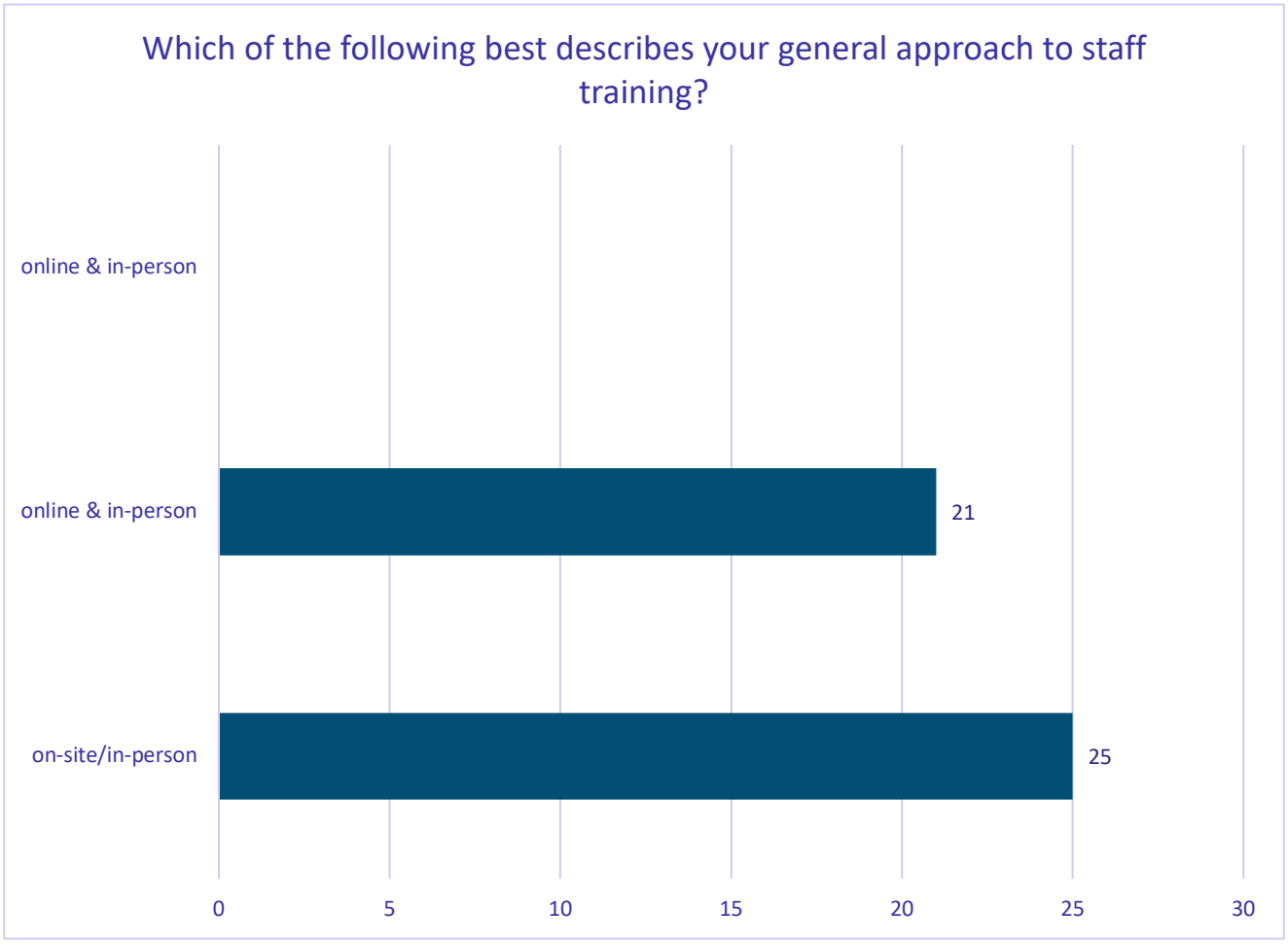


Figure 9 Current Frontline Staff Training Modalities (n=51)

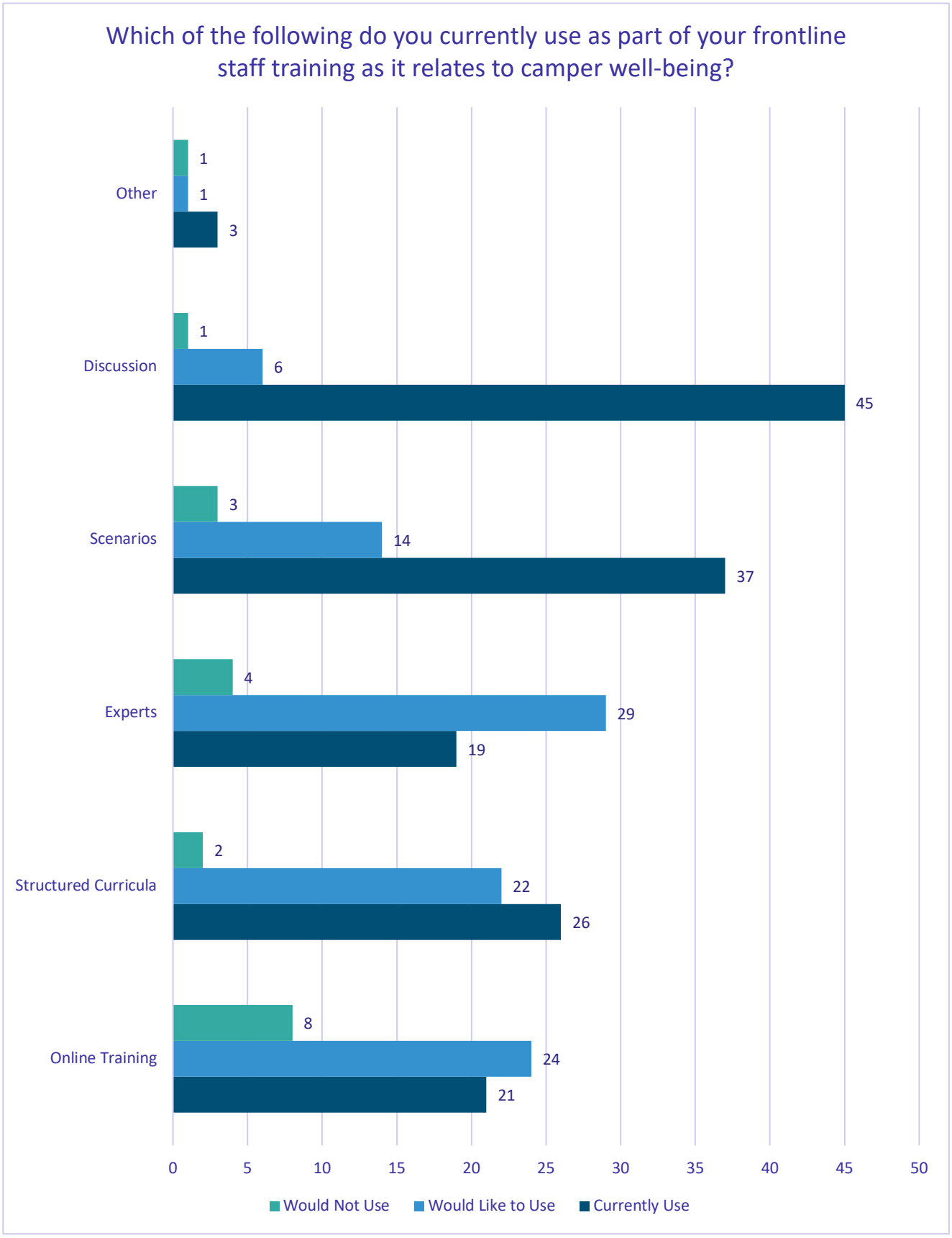
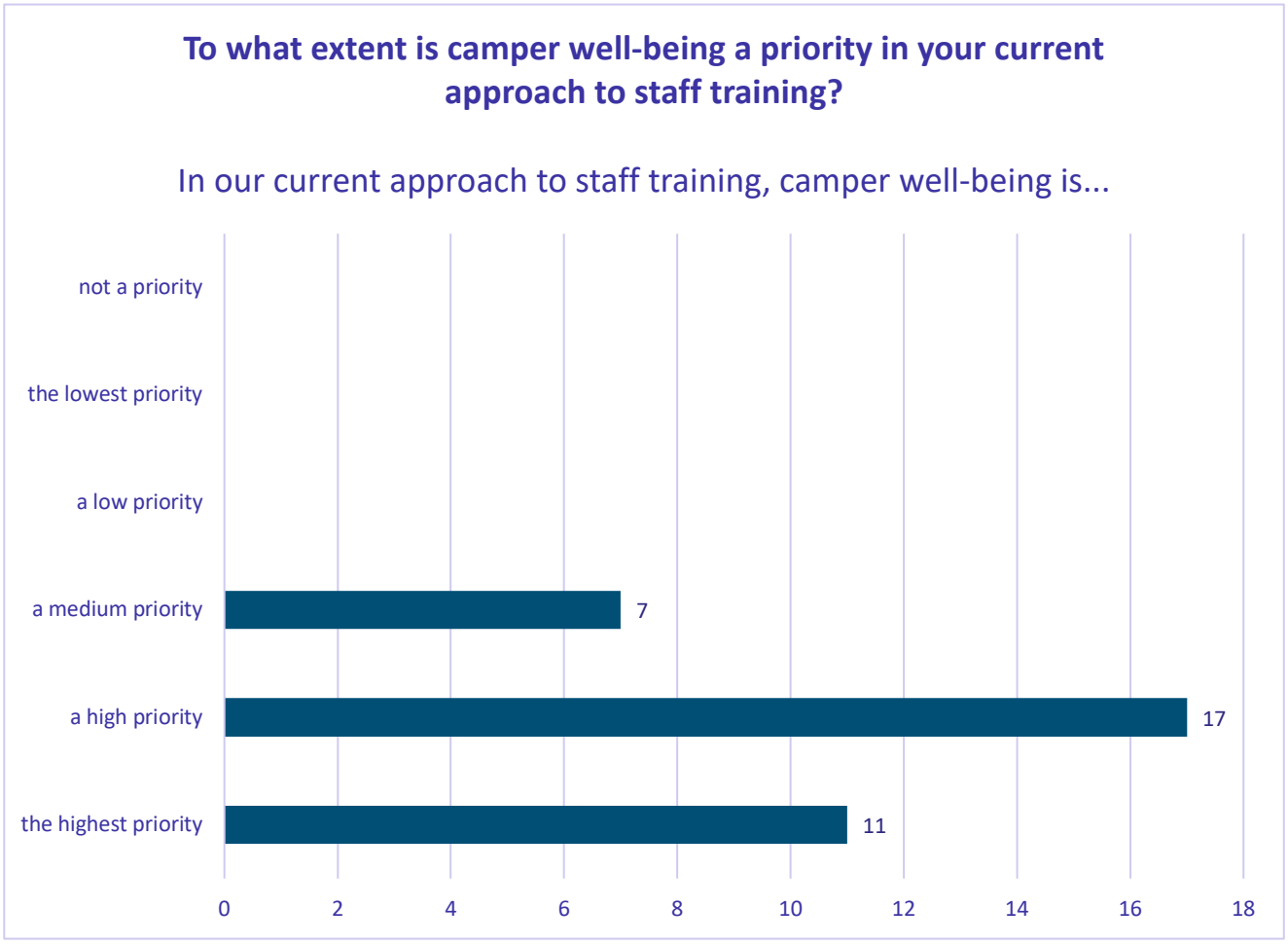


Figure 10 Current Prioritization of Camper Well-Being in Staff Training Approaches (n=35)



Conclusion

In general, findings from this needs assessment survey indicate that camper and frontline staff well-being was worse in 2021 compared to previous years, and there was an increase in numerous well-being related diagnoses and/or behaviors among both campers and frontline staff. This suggests a heightened need for strategies for supporting camper and frontline staff well-being. Based on respondents indication that their camps already include topics related to camper and staff well-being in staff training, numerous programs and practices that support camper and frontline staff well-being, as well as policies related to what/how they ask about mental health on pre-camp health forms, policies related to how they address camper behavioral concerns at camp, and policies related to how they address staff behavioral concerns, future resources aimed at supporting camper and frontline staff well-being will be less desirable in these areas.

Instead, future resources might consider how to help camps and camp practitioners support camper and frontline staff well-being via training and policies that they don't currently use but have considered. This includes resources for engaging a mental health professional to train staff (e.g., LCSW), hiring a mental health professional as a dedicated staff member (e.g., camper care coordinator), developing policies related to how they seek advice from mental health professionals, and developing policies related to how they work with parents/caregivers to ensure mental health readiness. Lastly, newly developed resources should utilize either a fully on-site/in person approach or a mixed in-person/online approach (as opposed to a fully online approach), along with a variety of scenarios, discussions, online training, structured curricula, and experts, as most survey respondents indicated that they either currently use these training modalities or would like to use these training modalities to support camper and frontline staff well-being.

Focus Groups

Overview

This section presents findings from the Focus Groups that were conducted to supplement findings from stages three and four of Phase 1 of the *Supporting Camper Well-Being* project. The purpose of these focus groups was to learn more about youth well-being within the context of camp, including opportunities and barriers regarding mental health and well-being training specifically within the summer camp setting. The findings are divided into two main sections: findings from the survey handouts distributed prior to the start of the focus groups, and findings from the discussions that took place during the focus groups.

Methods

Population

Focus group participants were recruited via an opt-in option at the end of the Needs Assessment Survey and via in-person announcements ACA's National Conference in Portland, OR. As an incentive for participation, $25 gift cards were offered to all individuals who completed a focus group session. A list of interested individuals was compiled and 22 participants were selected at random.

Focus Group Protocol

The focus groups took place on February 10, 2022 at ACA's National Conference in Portland, OR. Two simultaneous 45-minute in-person focus group sessions were conducted, each with one facilitator, one note taker, and 11 participants per focus group (resulting in 22 participants in total). Both focus groups were audio recorded with the participants' consent.

Upon arrival, to prime participants for the discussion, each individual was provided with a paper survey handout and was asked to respond to the questions on the front side with the understanding that the survey handout would be collected at the conclusion of the session. Participants were also encouraged to use the second side of the survey handout for notes throughout the focus group session. A copy of the survey handout distributed to participants may be found in Appendix D.

To begin the focus groups, each focus group facilitator shared the project committee's definition of well-being along with six ground rules that participants were asked to abide by throughout the session. Facilitators then moved through a series of warm-up questions followed by three scenarios that participants were asked to respond to and discuss. At the conclusion of the focus groups, upon receiving the completed survey handout, participants were compensated with $25 gift card for their time. A detailed focus group protocol may be found in Appendix E.

Data Analysis & Reporting

Survey handouts and focus group recordings were reviewed for emergent themes. The following section reports the results which are divided into two sections: survey handouts and focus group discussions.

Summary of Findings

Overall, focus group findings validate findings from the Needs Assessment Survey. In particular, focus group participants noted an increase in anxiety among campers, counselors, senior staff, and parents alike, along with other additional mental health and well-being concerns among campers and staff. Findings from the survey handouts also stressed the importance of mental health and well-being training that caters to frontline staff needs in addition to those focused on camper needs. Similarly, findings point to a need for support in handling not only camper mental health events but also staff mental health events. When asked if instructions or protocols that screen for mental health issues in campers and/or staff would be helpful, and if instructions or protocols regarding how to document incidents and who to contact when they occur would be helpful, all of the focus group participants responded "yes."

Key themes that emerged during the focus group discussions were the importance of cost, time, and flexibility in staff training. Cost was repeatedly cited as the number one barrier to utilizing outside resources for frontline staff training, and participants representing larger camps noted the incentive to keep training internal due to the number of staff their camps employ. Shifting to consider opportunities for new mental health and well-being training resources, participants repeatedly emphasized their desire to engage mental health experts throughout their staff training process, and expressed a need for support in identifying gaps specific to mental health and well-being in their current staff training.

Findings

Survey Handouts

The survey handouts presented to participants prior to the start of the focus group discussions were intended to serve as primers for the conversation rather than principal data sources. Still, numerous themes emerged. These themes are presented in Table 4 and Table 5. Importantly, participants highlighted the important of training that addresses not only counselor-camper interaction, but also counselor-counselor interactions, counselor-manager interactions, and various aspects of self-care. Findings also suggest a need for resources regarding the unique mental health and well-being needs of more diverse youth (e.g., youth under age 12; youth with disabilities; youth with diverse social identities), and which address how to recognize early signs of distress and what to do when a significant mental health event is happening.

Table 4 Staff Well-Being-Related Knowledge and Ability Gaps

What do you think your staff need to know or be able to do when it comes to supporting camper well-being that they currently don't know or do?	
How to:	Information regarding:
• Communicate one's own needs • Have appropriate conversation with campers about well-being • Prioritize support when other campers are fine • Demonstrate empathy in the midst of frustration • Recognize "red flags" and early signs of mental health crises/distress	• Specific mental health conditions • Active listening • Appropriate next steps • Self-care

Table 5 Staff Well-Being-Related Topic, Skill, and Scenario Confidence Gaps

What specific topics, skills, or scenarios would you like your staff to feel confident in handling that they don't currently?		
Topics	**Skills**	**Scenarios**
• Best practices in behavior management • Information about mental health in youth across social identities • Support and resources for youth under age 12 • Support and resources for youth with disabilities	• Providing calm, immediate interventions during crises • Facilitating conversating using appropriate mental health language • Identifying heightened emotions vs. mental health situations • Socializing with neurodivergent campers • Providing feedback to peers • Counselor-to-counselor conflict resolution • Managing self-care & modeling positive coping skills • Communicating needs to supervisors	• What to do when a significant mental health event is happening • Dealing with race issues • Dealing with anger outbursts • Helping campers "save face" and avoid judgment while still solving a problem

Focus Group Discussions

While results from the focus group discussions were extremely variable depending on each participant's camp's unique needs, several key findings emerged (detailed in Tables 6-8). Time and cost consistently emerged as two key potential barriers among all three training scenarios and preferences varied based on numerous factors (e.g., participants' camp size and/or specialization, number of staff employed, geographical location). Another emergent theme was the desire for engagement with content experts, either as facilitators leading trainings prior to the start of the summer camp season, or as as-needed points of contact throughout the duration of the summer camp season. Finally, numerous participants expressed the desire for some sort of rubric, checklist, or recommendation specific to mental health and well-being training for frontline staff to make sure they're not missing anything and are indeed "checking all the boxes."

Table 6 Scenario 1 Opportunities & Barriers

Scenario 1: Two-Layered Training
• This training takes place in person, on-site at your camp.
• It is a one-day training that lasts for four hours.
• The training takes a two-layered approach in which:
  • Frontline staff receive training in strategies for de-stigmatization, for creating an environment for mental wellness, and de-escalating situations related to camper well-being.
  • Higher-level staff with the capacity to respond with a deeper level of care receive more targeted training in managing more severe cases brought to them by frontline staff.
• It will cost $30 per person		

Opportunities	**Barriers**	**Additional Notes**

• Transferability (e.g., certification option similar to CPR or MHFA)
• Flexibility in training topics from year to year
• Great potential for camps with multiple sites
  • first layer = site-by-site depending on focus
  • second layer = same across all sites
	• Cost
	• Time commitment
		• Consider delivering frontline layer to higher-level staff as well (for content awareness)
		• Consider training option off-site (e.g., ACA national conference)
		• Preference for delivery via outside trainer/content expert

Table 7 Scenario 2 Opportunities & Barriers

Scenario 2: 15-Minute Tune-ups

- This training takes place in person, on-site at your camp.
- It includes:
  - One two-hour session comprised of basic well-being training during pre-camp staff training
  - Weekly 15-minute tune-ups focused on specific camper well-being topics (such as homesickness, eating disorders, and bullying). These tune-ups may be formatted either as:
    - More structured, topically driven in-service tune-ups that provide leaders a structure for more organic conversation around those topics, or
    - More experiential tune-ups that include tools to facilitate reflection and utilize role-playing based on scenarios that took place on site at camp during the week prior.
- It will cost $250 for the entire summer.

Opportunities	Barriers	Additional Notes
• Time more manageable • Cost more accessible	• Too short to cover content? • 15 minutes could get "lost in the shuffle" • Close to what camps are already doing so may be less likely to invest $	• How to adapt for 1-week camps • Consider mechanism to help camps identify which scenarios to select • Preference for *both* structured and topical tune-ups • Preference for delivery via outside trainer/content expert • Preference for scripts over roleplay • Need point of contact

Table 8 Scenario 3 Opportunities & Barriers

Scenario 3: Asynchronous/Synchronous Training • An online classroom with general readings, videos, questions, and quizzes will be provided to staff for review and completion prior to arrival on site. • Upon arrival at camp, staff receive a list of supplemental materials and engage in a one-hour in-person review to clarify camp protocols and processes. • It will cost $20 per person, plus a one-time $100 virtual set-up fee.		
Opportunities	Barriers	Additional Notes
• Opportunity to prime staff prior to arrival onsite • Good for international staff • Good for latecomers	• Concerns re: screen time & level of engagement with material • Due to serious nature of material, preference for in-person delivery • Cost • Accessibility	

Conclusion

Findings from the focus groups further emphasized the impactful role that time and cost play for camps' considerations of training opportunities for frontline staff. Findings also highlighted the desire for access to or engagement with content experts, as well as some sort of mechanism to help camps identify gaps in their present mental health and well-being training curriculum. Finally, participants expressed interest in different aspects of all three training scenarios depending on their camp's unique needs, again highlighting the importance of a flexible staff training resource that can adapt to camps of varying sizes, foci, and so on.

Based on the feedback from the focus group participants, future resources might consider an approach that combines all three proposed scenarios via a menu that allows camps to pick and choose training items and modalities based on their camp's unique needs. Furthermore, future training resources should be framed as an investment in the staff and as an opportunity for community building. Newly developed mental health and well-being training resources might also consider the transferability of said resources, and potential certification options akin to CPR certifications and Mental Health First Aid certifications that staff members can add to their personal repertoire/skillset.

H.E.B. Retreat March 9-11, 2022

Overview

In a culmination of Phase 1, the project committee together with additional key stakeholders convened for a three-day in-person working retreat to synthesize results from the landscape scan, needs assessment survey, and focus groups to craft recommendations for a training approach and supporting materials to promote mental, emotional, and social thriving among campers and staff, thus representing Stage 5 of Phase 1 of the *Supporting Camper Well-Being* project. The purpose of this retreat was:

1. To align organizational commitments to ensuring every camper thrives at camp;
2. To share understanding of current needs related to camper wellbeing; and
3. To outline a strategy for supporting camper well-being through staff training resources.

The retreat included four key working sessions: 1) What Do We Know?; 2) Putting It All Together; 3) a panel discussion with leaders from ACA, HEB, the Christian Camp & Conference Association (CCCA), and the Association of Camp Nursing (ACN); and 4) Action Planning. Prior to the retreat, participants were sent pre-meeting preparation materials including initial results from the Supporting Camper Wellbeing Landscape Scan, the Supporting Camper Wellbeing Needs Assessment Survey Report, and the Supporting Camper Wellbeing Focus Group Report. Numerous high-level themes emerged throughout the retreat, along with key takeaways, which are detailed in the sections that follow.

High-Level Themes

The first three working sessions focused on synthesizing (via collaborative discussion) learnings from all Phase 1 components, including the pre-meeting preparation materials as well as industry knowledge and trends shared by field experts on the project committee. Emergent themes we have identified from these sources and field experts include:

- The importance of appropriate and *accessible* language and terminologies.
- Acknowledging our own biases, including:
  - Identifying what lens we are operating from and how that informs our approach to supporting camper wellbeing.
  - Identifying what assumptions we're making about our campers/staff/etc.
- Distinguishing between mental health events and emotional events (and the difference between "I have depression" and "I'm feeling depressed.")
- Key skills for staff, such as:
  - How to *listen* and be *present* with campers.
  - De-escalation and debriefing techniques (both counselor-to-camper and counselor-to-counselor).
- General desires from practitioners, such as:
  - mental health support, frameworks, checklists, and protocols.
  - engagement with experts.
- Barriers, specifically: time, simplicity (i.e., ease of implementation), clarity of content, and cost.
- Needs around identifying missing voices and ensuring their involvement in the future of this work. For example:
  - Racial/ethnic diversity
  - Gender diversity
  - Income diversity
  - LGBTQ+
  - International staff
  - Anti-mental health advocates
  - Insurance representatives
  - Youth
    - Foster care youth
  - *Who else is missing?*

Key Takeaways

The retreat concluded with an Action Planning session that generated a number of ideas to be carried forward into Phase 2 of the *Supporting Camper Wellbeing* collaborative initiative. Key takeaways from this session fell into one of two categories: more targeted, topical considerations for staff training resources, or; strategies to support camps seeking to shift their overall camp culture to be more conscientious of camper wellbeing. Results from this session are presented in Table 9.

Table 9 Action Planning Meeting Notes

Training Topics	Shifting Camp Culture
• De-escalation & grounding • Uncovering biases • Immediate language • Empathy training • Healing-centered engagement • Science of Hope • Four Pillars of Well-Being • Types of energy • Anxiety, depression, ADHD, & eating disorders • Roleplay in staff training, and storytelling • What TO say, and what NOT to say • *Focus on practical, not philosophical*	• Culture of care • Accessible language • Schedules • Menus • Changing the standard of care • Readiness checklist • Administrative (and personal) bias against mental health • How to create space for wellness • Support & Wellbeing for ALL children

Appendix A:
Crosswalk of Resources

Table 10 Crosswalk of Resources for Supporting Youth Well-being

Organization	Resource	Description	Measures				Delivery Method	Accessibility
			Mental	Emotional	Social	Physical		
Afterschool Alliance	Afterschool Webinars	Learn from experts and fellow practitioners on the latest in afterschool, including program funding, research and analysis, practical guides, and how to's.	x	x	x	x	Recorded Webinars	Free to all
Alliance for a Healthier Generation	Action Center Resource Library	Take an assessment, create an action plan, and discover tools to create healthier school and out-of-school time environments.	x	x	x	x	Documents; Images; Videos; Web Pages; Trainings	Free after registering for free account
	Action Center Training Center	Featuring relevant and timely self-paced online classes, virtual instructor led events, and curriculum bundles at no cost to you, the Healthier Generation Training Center is the go-to resource for professionals, youth-serving organizations, businesses, and communities who want to learn how they can support the social, emotional, and physical health of youth. We draw on experts within Healthier Generation and those with extensive backgrounds in employee wellness, health education, nutrition, social emotional health, and other fields to offer the best virtual training available.	x	x	x	x	Online Classes; Events; Curriculum; Material; Video	Free after registering for free account
	Capacity Building Support and Technical Assistance	Equip your team to implement the Healthy Schools and Communities Program with a package of support and resources. Packages can be tailored to cover topics such as social-emotional health, healthy eating, physical activity and physical education, family engagement, tobacco-free schools, and food access. (See website for full list of package inclusions.)	x	x	x	x	Virtual Training, Proprietary Customizable Materials; Project Management Support; Data Reports; E-newsletters;	Capacity Building, $40,000/yr

	Professional Learning Opportunities	Healthier Generation offers professional development courses (training-of-trainers and/or tailored professional development) on a variety of health and wellness topics, delivered virtually by a member of our staff.	x	x	x	x	Virtual Training, Proprietary Customizable Materials; Project Management Support; Data Reports; E-newsletters;	Training-of-trainers, $5,000+ Professional Learning Opportunities, $1,100+
American Camp Association	Resource Library	A searchable database of camp-related resources, primarily in the form of articles and other written resources	x	x	x	x	Articles, blog posts, etc.	Free
	Online Courses & Webinars	Our online courses and webinars are ideal for program providers working in camps, after-school programs, parks and recreation programs, and other summer learning and out-of-school time settings.	x	x	x	x	Online Courses; Recorded Webinars	Fees vary (discounts available for ACA members)
	Healthy Camp Toolbox	Mental, Emotional & Social Health (MESH) - It's no surprise that camp programs, policies, and practices that compliment and/or address camper and staff MESH needs can improve the camp experience for everyone. And it's not a surprise that a camp program intentionally designed to complement MESH attributes helps build resiliency, self-esteem, and self-confidence for participants while minimizing challenges for camp professionals. How might a camp professional quickly identify conference sessions, articles, and tools that expand one's MESH toolkit? Simply look for the MESH icon. It'll draw your attention to elements that focus on this critical area.	x	x	x		Checklists, Assessments, Toolkits, Webinars, Online Courses	Fees vary (discounts available for ACA members)

American Red Cross	Psychological First Aid: Supporting Yourself and Others During COVID-19	The uncertainty associated with a global health crisis like COVID-19 challenges everyone's ability to cope. This course will help you to build resilience and support yourself and others through this crisis by reviewing basic principles of providing psychological first aid, including how to recognize and manage stress in yourself and in others and how to lend support to family members, friends and coworkers during and following the COVID-19 outbreak.	x	x			Online, work at your own pace	$20
Association of Camp Nursing	Online Education Courses	ACN is the leading voice in camp healthcare, with content provided online through these courses. Nursing contact hours are available for all courses. Available courses include Physical Assessment at Camp, and the CAN 2021 Symposium which included a workshop on staff mental health.	x			x	Online, self-paced	Fees vary (discounts available for CAN members)
Child Care Technical Assistance Network	Resource Guide for Developing Integrated Strategies to Support the Social and Emotional Wellness of Children	This Resource Guide highlights promising strategies and provides information about how some Child Care and Development Fund grantees have already leveraged partnerships and funding to support implementation success.		x	x		Resource Guide (PDF Document)	Free
	Supporting and Promoting Mental Health in Out-of-School Time	This practice brief explores some of the current mental health needs of school-age children, their families, and the OST workforce. In addition, this brief discusses the social and emotional constructs that promote resilience, as well as examples of mental health supports that states and local jurisdictions can consider for collaborative implementation.	x				Brief (PDF Document)	Free

National Academies of Sciences, Engineering and Medicine	Tools for Supporting Emotional Wellbeing in Children and Youth	These tools were created to teach skills that can help children and youth cope with some of the challenges associated with the COVID-19 pandemic, like: changes in their routines, breaks in continuity of learning, breaks in continuity of health care, missed significant life events, and lost security and safety.	x	x			Videos and PDFs	Free
National Alliance for Children's Grief	Resource Portal	Included in this resource portal are a number of informational documents, toolkits, activity books, activity cards, and videos aimed at helping professionals and families support grieving children.		x			PDF Documents	Free
The National Center for School Mental Health	SHAPE System	The School Health Assessment and Performance Evaluation (SHAPE) System is a public-access, web-based platform that offers schools, districts, and states/territories a workspace and targeted resources to support school mental health quality improvement. SHAPE was developed by the NCSMH in partnership with the field, to increase the quality and sustainability of comprehensive school mental health systems. SHAPE houses the National School Mental Health Census and the School Mental Health Quality Assessment (SMH-QA). These measures are designed for team completion at the school or district level to document the school mental health system components, assess the comprehensiveness of a SMH system, prioritize quality improvement efforts and track improvement over time.	x					Free access to SHAPE System registering for free account, some specific resources require additional fees

The National Council for Mental Wellbeing	Youth Mental Health First Aid	Youth Mental Health First Aid is designed to teach parents, family members, caregivers, teachers, school staff, peers, neighbors, health and human services workers, and other caring citizens how to help an adolescent (age 12-18) who is experiencing a mental health or addictions challenge or is in crisis. Youth Mental Health First Aid is primarily designed for adults who regularly interact with young people. The course introduces common mental health challenges for youth, reviews typical adolescent development, and teaches a 5-step action plan for how to help young people in both crisis and non-crisis situations. Topics covered include anxiety, depression, substance use, disorders in which psychosis may occur, disruptive behavior disorders (including AD/HD), and eating disorders.	x				In-person courses, blended courses with in-person instructor-led training, and blended courses with virtual instructor-led training	Cost varies from $0-$65
	Teen Mental Health First Aid	Teen Mental Health First Aid is a training program for teens in which they will learn the skills needed to have supportive conversations with friends and how to get help from a responsible and trusted adult.	x				In-person courses, blended courses with in-person instructor-led training, and blended courses with virtual instructor-led training	Cost varies from $0-$65
YMCA	Mental Health Go Kits	This set of YMCA mental health resources, including videos and downloadable worksheets, is designed to help practitioners manage and develop certain competencies, such as resilience building, mental health conversations, trauma-informed responses, emotion regulation, and suicide prevention.	x	x			Recorded Videos; PDF Worksheets	Available only to YMCA-affiliated practitioners

Youth Aware of Mental Health	YAM	Five one-hour classroom sessions take place over three weeks, during which mental health is explored through discussion and role-plays. Pedagogical materials (including slides, posters, and booklets) are provided for each participant to keep.	x	x			In person sessions led by two trained YAM adults	Fee unknown
YouthPower	Integrating Mental Health and Psychosocial Support Into Youth Programming: A Toolkit	This toolkit provides strategies and tools for designing, implementing, and evaluating mental health and psychosocial support (MHPSS) programs and activities for youth in low- and middle-income countries (LMICs) and conflict-affected contexts.	x				Toolkit (PDF Document)	Free

Appendix B:
Afterschool Alliance's
Positive Health
Youth Development Framework

Afterschool Alliance

Interrelated Approach to Comprehensive Health and Wellness in Afterschool

Although youth are generally healthy, the adolescent years are when we start to see the emergence of challenging health and social problems. Since the adolescent years tend to be when children go through substantial developmental transitions, youth are particularly sensitive to influences from their immediate environments. Their families, neighborhoods, school environments, and peers can either support or threaten young people's health and well-being. Societal norms, policies, and public perception such as media messages, historically unjust laws, and explicit and implicit bias, also play a part. These social and personal influences have been defined as risk and protective factors.

Given the magnitude of health and wellness challenges that youth are facing, it can be hard for afterschool providers to confidently feel they are adequately supporting each pressing health issue. To that end, we have developed a Positive Health Youth Development Framework that will help providers shift their approach from addressing each health issue separately to providing a holistic approach grounded in positive youth practice they most often already have in place.

*Please note any health issue can be added as a [bubble].
Customize the health challenges based on your state, community and program needs

The Positive Youth Development Framework is based on the Shared Risk and Protective Factors Diagram from SAMSHA. The framework illustrates:

1. Each health problem has its own risk factors. Each risk factor tends to be positively correlated to another health problem's risk factors and negatively correlated to another health problem's protective factors — meaning the higher the number of risk factors presenting, the greater likelihoodthat a health problem (or multiple health problems) will develop.

2. Each health problem has its own protective factors. Each protective factor tend to be negatively correlatedto another health problem's risk factors and positively correlated to another health problem's protective factors— meaning the higher number of protective factors presenting, the greater likelihood that multiple health problems will not develop.

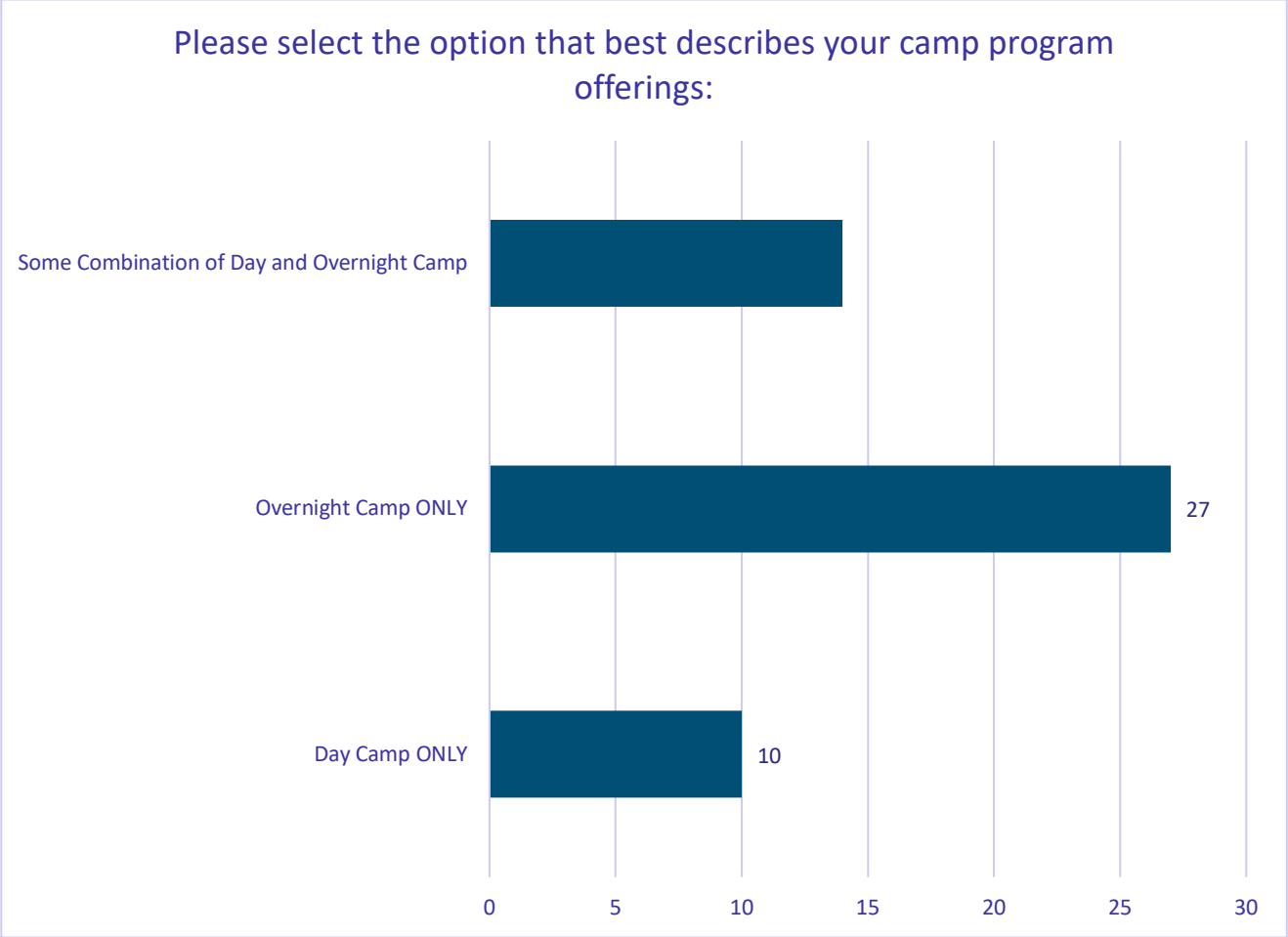
3. The intentional identification of shared risk and protective factors for many common health challenges can guide the development of appropriate program practices and interventions to defend against a broad spectrum of related health problems.

Using an integrated approach to prevention that addresses the spectrum of health problems youth face will help providers to not feel so overwhelmed by emerging health issues, address health challenges most appropriate to the communities they serve and support youth in a holistic manner. Identification of risk and protective factors should be program-specific and prioritized by those health challenges that most impact youth in your program and your community. Afterschool providers should consider key risk and protective factors when designing, implementing and evaluating program practice and activities.

Appendix C:
Needs Assessment Sample Profile

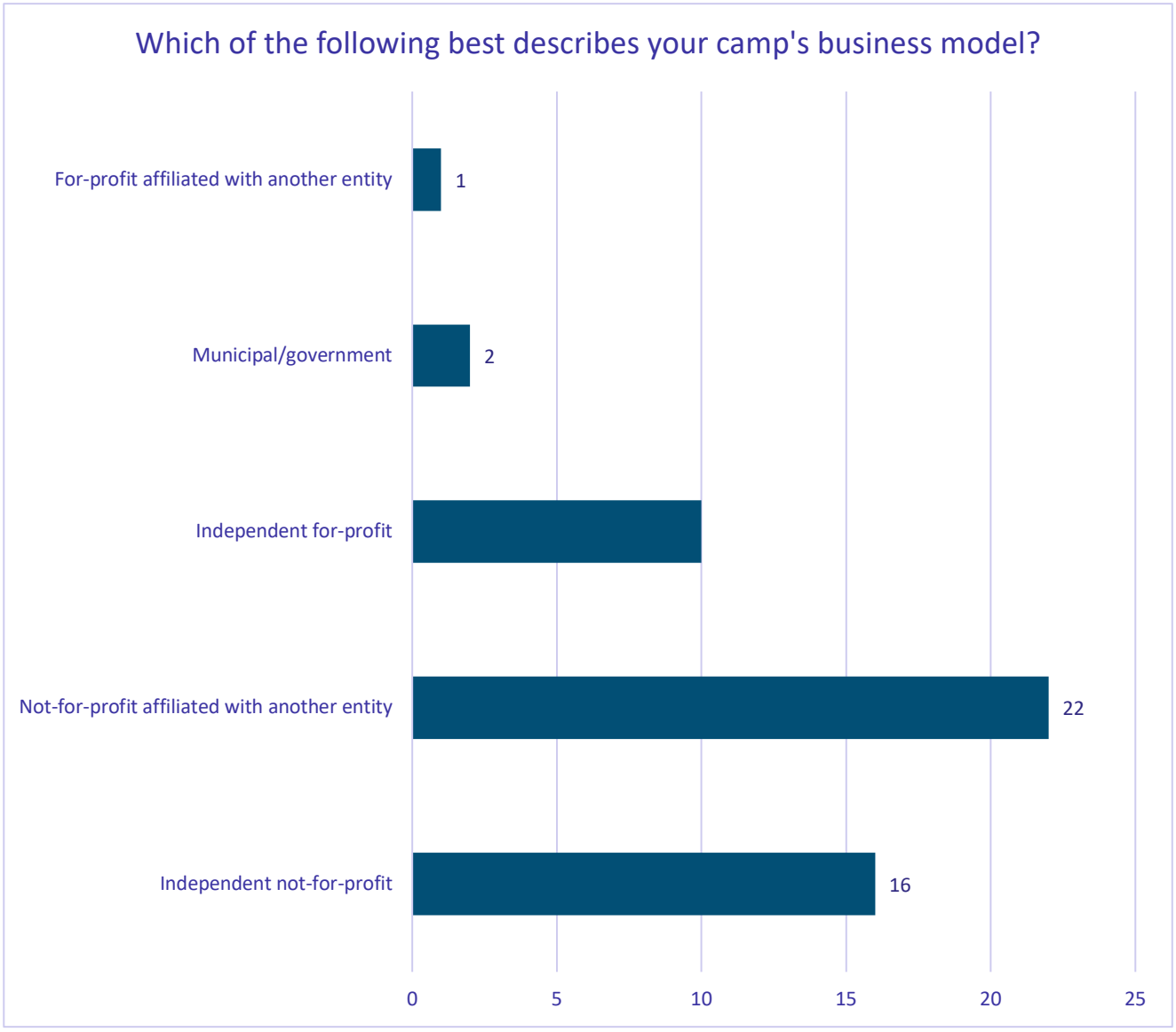
Program Offerings

Figure 11 Needs Assessment Survey Sample Profile by Camp Program Offerings (n=51)



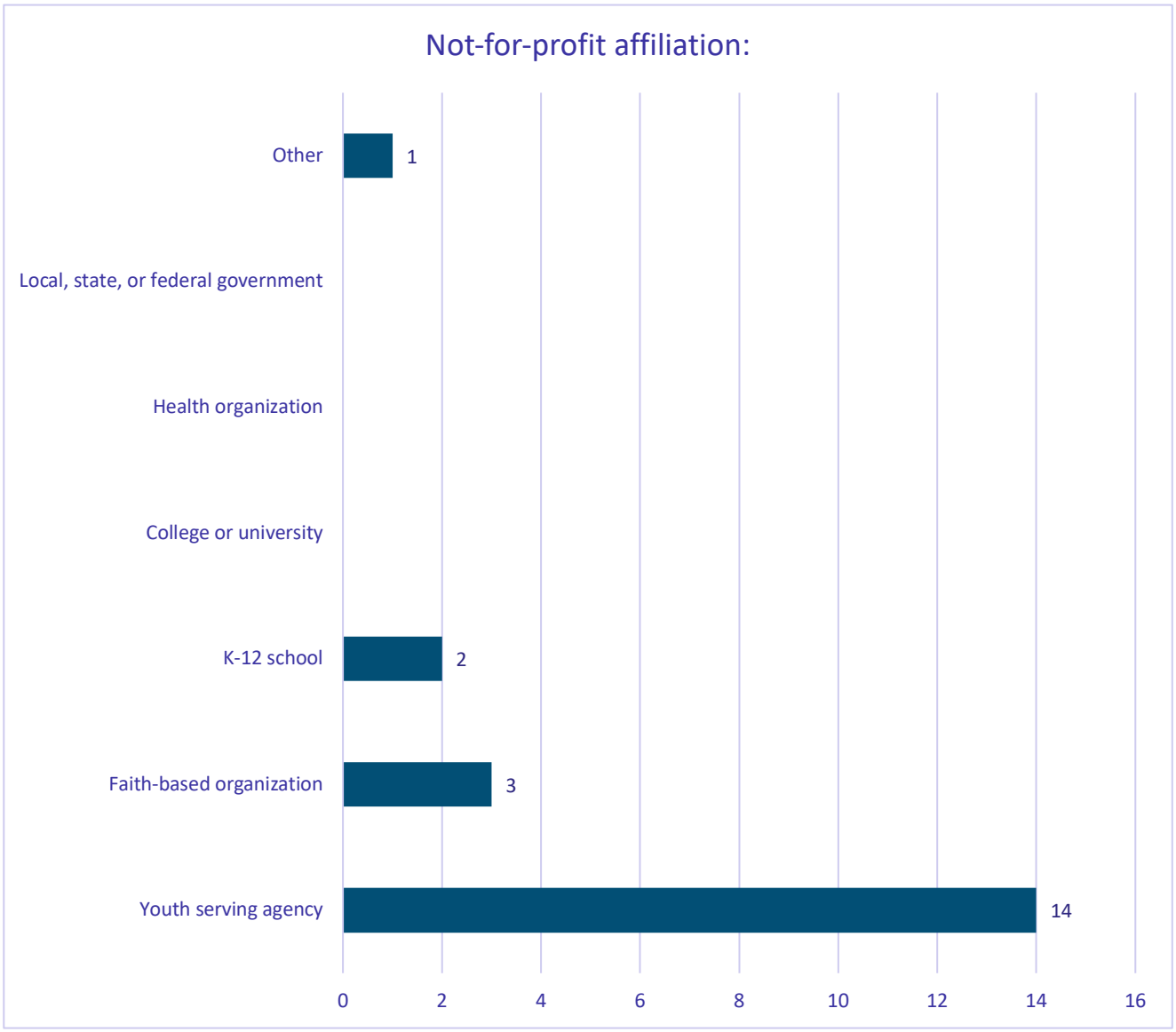
Business Model

Figure 12 Needs Assessment Survey Sample Profile by Camp Business Model (n=51)



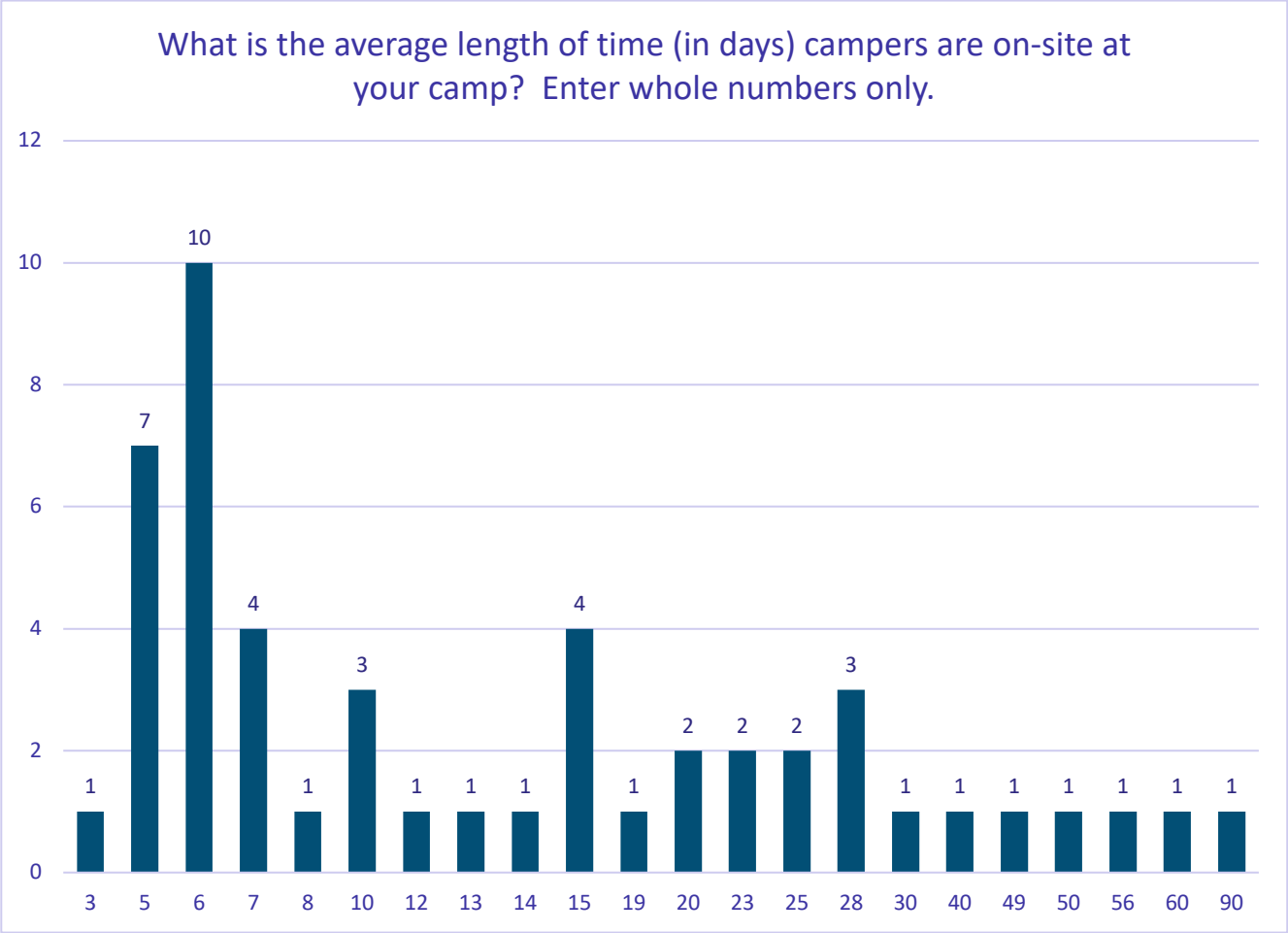
Not-For-Profit Affiliation

Figure 13 Needs Assessment Survey Sample Profile by Camp Business Model, Not-For-Profit Affiliation (n=20)



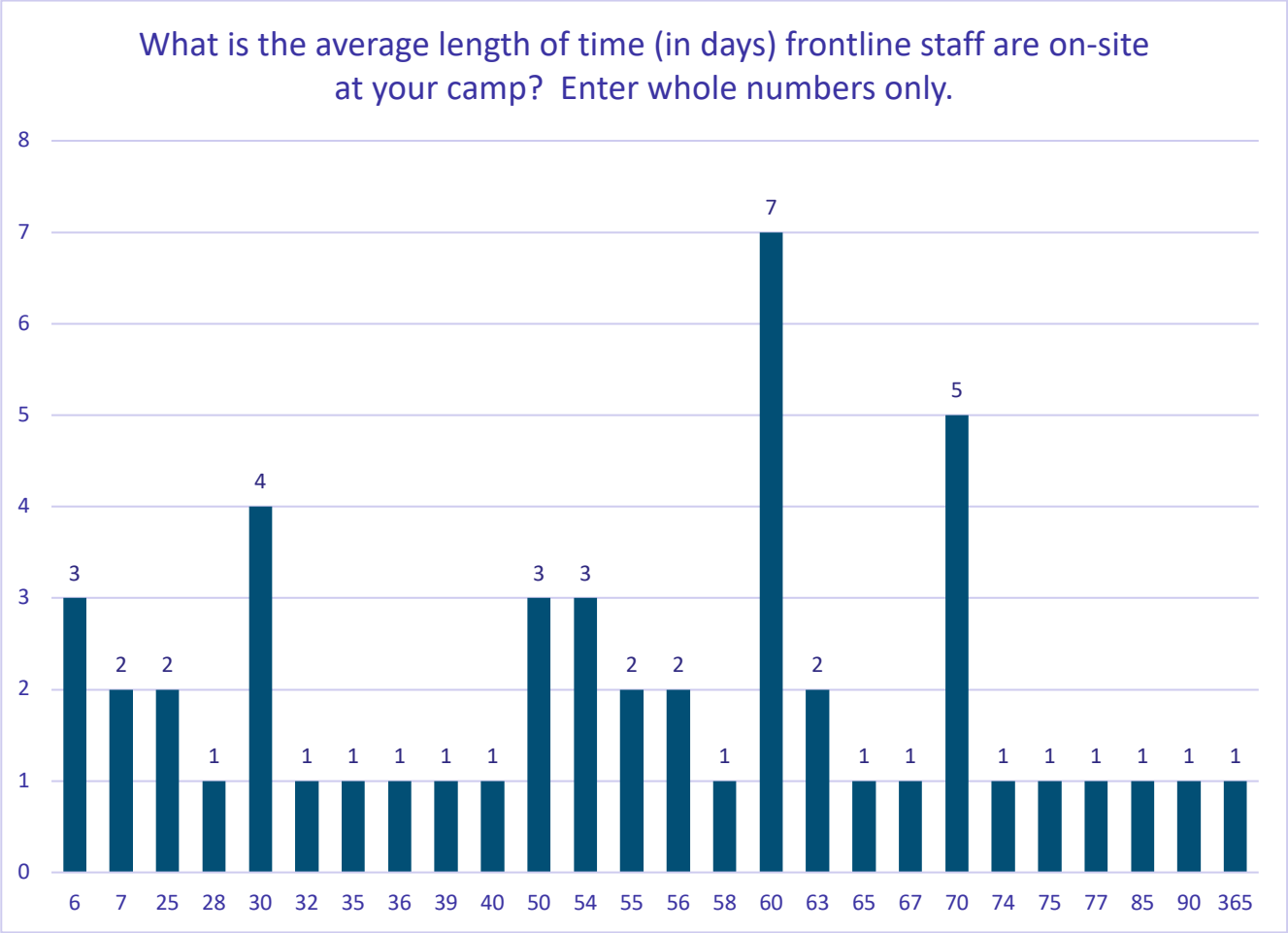
Average Length of Time Campers Are On-Site

Figure 14 Needs Assessment Survey Sample Profile by Average Length of Time Campers Are On-Site (n=50)



Average Length of Time Frontline Staff Are On-Site

Figure 15 Needs Assessment Survey Sample Profile by Average Length of Time Frontline Staff Are On-Site (n=50)



Appendix D:
Focus Group Survey Handout

Supporting Camper Wellbeing Focus Group Survey Handout

1. **What do you think your staff need to know or be able to do when it comes to supporting camper wellbeing that they currently don't know or do?**

2. **What specific topics, skills, or scenarios would you like your staff to feel confident in handling that they don't currently?**

3. **Do you need help developing skills for conversations with staff you support (e.g., what to say when a staff member is breaking down emotionally in the moment)?**

4. **Would instructions or protocols that screen for mental health issues in campers and/or staff be helpful to you?**

5. **Would instructions or protocols regarding how to document incidents and who to contact when they occur be helpful to you?**

6. **Would you like better *general* knowledge training on mental health for your frontline staff, or more *specific* training on steps frontline staff can take when supporting a camper through an emotionally challenging moment?**

7. **Would you like to give frontline staff better training in self-care?**

Wellbeing: a person's physical, social, emotional, and/or spiritual health.

At camp, wellbeing is characterized by a campers' and staff members' ability to participate fully and in the ways they choose while feeling safe, supported, and engaged.

Warm-Up

1. What were some of your struggles this summer regarding camper and staff wellbeing?

2. What tools are you currently using that have been successful (or not successful) to train college-aged frontline staff in how to manage wellbeing at camp?

Scenarios

1. Two-Layered Training

2. 15-Minute Training Tune-ups

3. Asynchronous/Synchronous Training

Thank you for joining us today! Please leave this handout with a facilitator.

Appendix E:
Focus Group Protocol

Supporting Camper Wellbeing Focus Group Protocol

Pre-show

1. Welcome

Come on in and take a seat. Go ahead and start filling out the front side of the survey handout.

Introduction (5 minutes)

1. Introduce People

Welcome everyone! My name is _____ and I will be the moderator for today's Supporting Camper Wellbeing focus group. _____ is also with us, and they will be taking notes throughout today's session.

2. Introduce Purpose/Intention/Goal of Focus Group

The purpose of this focus group is to learn more about youth wellbeing within the context of camp. All of you have been asked to participate because you are camp professionals who have demonstrated an interest in supporting and improving camper wellbeing. It is our hope that your experiences and opinions will help us learn more about wellbeing in the camp setting, and particularly, opportunities and barriers regarding wellbeing training within the camp setting. After the conclusion of this focus group, the information discussed will be synthesized by ACA's research team before being shared anonymously with the H.E. Butt Foundation and associated project leaders. They will then take that anonymous focus group information and use it to help design camp-specific wellbeing training tools and curricula. Your personal information will not be connected to the results of this focus group.

For the purposes of this focus group, **wellbeing is defined as a person's physical, social, emotional, and/or spiritual health. At camp, wellbeing is characterized by a campers' and staff members' ability to participate fully and in the ways they choose while feeling safe, supported, and engaged.**

3. Ground Rules

1. **Confidentiality:** Please respect the confidentiality of your peers. The moderators will only be sharing the information anonymously with relevant project leaders. If you

choose to share any examples from your own camp, please avoid using any identifying details such as full names of individuals.

2. **One Speaker at a Time:** Only one person should speak at a time in order to make sure that we can all hear what everyone is saying. We are also audio recording these focus groups, so ensuring only one person is speaking at any given time will really help our research team out when they review the recordings later on.
3. **Use Respectful Language:** Mental health and wellbeing can be a sensitive topic. In order to facilitate an open discussion, please avoid any statements or words that may be offensive to other members of the group.
4. **Open Discussion:** This is a time for everyone to feel free to express their opinions and viewpoints. You will not be asked to reach consensus on the topics discussed. There are no right or wrong answers.
5. **Participation is Important:** It is important that everyone's voice is shared and heard in order to make this the most productive focus group possible. Please speak up if you have something to add to the conversation!
6. **Time Limits:** We have a lot to talk about in a short amount of time, so I might have to cut people off or change topics in order to manage our time appropriately.

Warm-Up (8 minutes)

Before we get started, I have a couple of questions I'd like you to think about. Feel free to jot down any thoughts or ideas that come to mind on the back side of your survey handout.

First, I'd like for you to think about the state of wellbeing at your camp this summer.
Examples could go here.

Now, think about what tools your camp used that were successful, or unsuccessful, in helping frontline staff manage wellbeing at your camp. Once you've collected your thoughts, please turn to the person next to you and share those tools with your partner.

Scenarios (30 minutes, 10 minutes each)

Great, thanks for sharing those experiences. Now we want to present you with three different training scenarios in order to get your feedback. Things to think about while listening to these scenarios include:

1. How likely is your camp to engage in this training?
2. Who from your camp would participate in and/or facilitate this training?
3. Would your camp be willing to spend the specified amount of time on this training?
4. Could your camp afford this training?

5. What barriers can you identify that would make this training challenging for your camp to utilize?

6. Two-Layered Training

The first scenario I'd like for you to consider is what we're calling the Two-Layered Training:

1. This training takes place in-person, on-site at your camp.
2. It is a one-day training that lasts for four hours.
3. The training takes a two-layered approach in which:
    1. Frontline staff receive training in strategies for de-stigmatization, for creating an environment for mental wellness, and de-escalating situations related to camper wellbeing.
    2. Higher-level staff with the capacity to respond with a deeper level of care receive more targeted training in managing more severe cases brought to them by frontline staff.
4. It will cost $30 per person.

Keep in mind that the second layer described as "higher-level" staff may vary from camp to camp (for example, camp directors, senior counselors, healthcare professionals on site, or even clergy), and so camps will need to consider and designate who their care team is.

Based on this scenario, in addition to the questions listed above…

1. Who would make up the care team at your camp?
2. Who would participate in the first layer of training?
3. Who would participate in the second layer of training?

4. 15-Minute Training Tune-ups

The second scenario I'd like for you to consider is what we're calling 15-Minute Training Tune-ups:

5. This training takes place in-person, on-site at your camp.
6. It includes:
    1. One two-hour session comprised of basic wellbeing training during pre-camp staff training
    2. Weekly 15-minute tune-ups focused on specific camper wellbeing topics (such as homesickness, eating disorders, and bullying). These tune-ups may be formatted either as:
        1. More structured, topically driven in-service tune-ups that provide leaders a structure for more organic conversation around those topics, or
        2. More experiential tune-ups that include tools to facilitate reflection and utilize role-playing based on scenarios that took place on site at camp during the week prior.
7. It will cost $300 total for the entire summer.

Based on this scenario, in addition to the questions listed above…

8. Who would lead these tune-ups at your camp?

9. How and where would they happen?
10. Would you choose the structured tune-up or the reflective tune-up?

11. Asynchronous/Synchronous Training

The final scenario I'd like for you to consider is a combination of asynchronous and synchronous training:

1. An online classroom with general readings, videos, questions, and quizzes will be provided to staff for review and completion prior to arrival on site.
2. Upon arrival at camp, staff receive a list of supplemental materials and engage in a one-hour in-person review to clarify camp protocols and processes.
3. It will cost $20 per person, plus a one-time $100 virtual set-up fee.

Based on this scenario, in addition to the questions listed above…

4. What information or content would you want staff to review prior to arrival, and what would you want to save for in-person reviews?
5. Who would lead the in-person review at your camp?
6. Would your in-person review take place in one-on-one sessions or group sessions?
7. When and where would they happen?

Conclusion (2 minutes)

1. Thank you!

Thank you for participating in today's Supporting Camper Wellbeing focus group. As a reminder, we'll be sharing the information learned during this session with our team in order to develop new training tools that support wellbeing specifically within the camp context. If you think of any additional thoughts or comments that you would like to share, please contact Ty at twycoff@acacamps.org.