

## **Market Analysis for Developmental Teenage Programming at Five Counties Children's Centre**

Includes:

Final Report, Sample Interview Questions, Opening Email to Potential Participants, Consent Form

By: Amber Titterton & Julia Beggs

Completed for: Five Counties Children's Centre

Supervising Professor: Dr. Lisa Boucher

Trent Community Research Centre Project Coordinator: Brittany Finigan

Course Code: GESO 3821

Course Name: Doing Social Justice Research Making Social Change

Completion Date: April, 2023

Project ID: 5074



Suite 3.10, Trent University Student Centre

1600 West Bank Drive

Peterborough, ON K9L 0G2

Phone: [\(705\) 748-1093](tel:(705)748-1093)

Email: [trc@trentu.ca](mailto:trc@trentu.ca)

Website: [trentu.ca/trc](http://trentu.ca/trc)

## **Final Report**

### **Market Analysis for Developmental Teenage Programming at Five Counties Children's Centre**

April 2023

Department of Gender and Social Justice, Trent University

**Researchers:** Amber Titterton & Julia Beggs

**Research Supervisor:** Dr. Lisa Boucher

A Community-Based Research Project Completed in Collaboration with Five Counties  
Children's Centre, and Coordinated by the Trent Community Research Centre

## Table of Contents

Key Research Terms.....	3
Introduction.....	4
Methods.....	5
Findings.....	8
Literature Review.....	8
Focus Group.....	11
Limitations.....	13
Conclusion.....	15
References.....	17
Appendices.....	20
Appendix 1: Focus Group Question Guide .....	20
Appendix 2: Recruitment Postings.....	21
Appendix 3: Information and Consent Form.....	22
Appendix 4: Literature Review Template.....	24
Appendix 5: Media Presence.....	33
Appendix 6: Suggestions.....	35

### **Key Research Terms:**

***Disability:*** Defined as physical/intellectual or developmental differences that can contribute to the experience of “a complex combination of social and environmental barriers, as well as bio-social 'differences' ” (Cologon, 2016, n.p.).

***FCCC:*** Five Counties Children’s Centre.

***Adolescence:*** Defined as the transition of child to adult (teenager). The Government of Canada defines the population identified as teenagers as those within 13-17 years of age (2022).

***Autism:*** A developmental disability caused by differences in the brain and characterized by social impairments and deficits in communication skills/ maintaining relationships (Centres for Disease Control and Prevention, 2022).

## **Introduction**

This community-based research project was completed in collaboration with Five Counties Children’s Centre under the supervision of Doctor Lisa Boucher and the Trent Community Research Centre. Five Counties Children’s Centre is a not-for-profit organization that has five Centre locations including Peterborough, Lindsay, Cobourg, Haliburton County, and Minden. They provide support for “children with physical, communication and developmental needs. [They] work with children and adolescents, along with their families and our community to strengthen their abilities and promote their participation as active members of the community” (FCCC, 2023). They provide various services and programs in various areas of childhood development up until clients reach the age of 18, in which they are thus considered an adult. While they have provided programming specifically for teenagers in previous years, the center, as well as families of clients, have identified a current gap and/or lack of programming for teenagers with physical and/or developmental needs. As we found in the literature review, most programming for youth with developmental needs is done within younger years and then it is expected that this education will continue in school. Five Counties Children’s Centre identifies that different youth of different ages have different needs, and therefore the need for tailored programming does not end in childhood. Their main goal is to help youth gain independence and “build abilities for life” (FCCC, 2023). Thus, the main research question for the study was: what are the unmet teenage developmental needs of the clients of Five Counties Children’s Centre? Follow-up questions asked whether there is enough of a need to justify the development of new services, and how these services could be funded. One specific gap FCCC identified to researchers was the gap in sexual education for teens with developmental and physical needs. Topics include sexual activity, healthy relationships, puberty, gender identity, sexual health and

orientation. Additionally, this report concludes with suggestions of possible life skills, developmental programming, or events that FCCC could run, support, or direct clients to that would be beneficial based on findings from the data collected.

## **Methods**

This study methodology took a qualitative approach, conducting both focus groups and a literature review. Articles were chosen for the literature review through the reading of abstracts and connection to evaluations or needs identified for teenage developmental programming. Articles were eligible for inclusion if they were published within the last 10 years, included either important information on teenage programming and gaps for youth with disabilities/needs, or analyzed the benefits of specific programming implemented within the study framework. Articles include peer-reviewed sources, alongside government documents surrounding the topic.

We also conducted focus groups. There were two target populations, one being FCCC family/community and one being FCCC staff. Target samples varied 8-10 participants in each focus group, with each group not taking over an hour's time. Participant risk was minimal, and once the study was approved by the Trent University Research Ethics Board, recruitment took place. An ethics amendment was submitted for both groups in order to have them conducted online versus in person to improve accessibility for family participants and staff in various FCCC locations. Participation was voluntary, with no incentive to participate. Both focus groups conducted aimed to follow a semi-structured interview guide in hopes of generating conversation in an open-ended format (see appendix 1). Questions for both groups were created to meet the suggested five to eight questions in order to allow for conversation to occur and the moderators to prompt as they see fit (Kirby et al., 2017). Focus group questions for family members

reflected on their past experiences within FCCC, what gaps or programs they think may be fit for teenage clients as well as financial implications (see appendix 1). Questions for the staff focus group reflected on staff experiences with programming, gaps, and in what ways programming can be successfully delivered (see appendix 1). Participants provided informed consent online through email, by signing the consent form or replying with a statement indicating their consent (see appendix 3).

### *Family Focus Group*

For recruitment for the family focus group, Five Counties posted infographics to social media sites (Instagram, Facebook, FCCC ‘Five for Five Newsletter’) with researcher contact information to recruit participants via convenience sampling for the family group (see appendix 2). Eligibility criteria required participants to be over 18, and a family member of a client who has previously/currently used FCCC services. 20 participants emailed researchers expressing interest in the focus group, and consent forms were emailed to 14 participants. The target sample consisted of 8-10 participants in order to maintain a group where all have the chance to converse, and researchers to moderate. Eight people confirmed their attendance prior either through signing/emailing back the consent form, or responding with a statement and reconfirming their consent and participation within the group. Two participants attended but did not meet the eligibility criteria. Data collected from these respondents was not reported within our initial findings, but still provided useful information which will be included in the conclusion section.

### *Staff Focus Group*

The second group consisted of staff from the various locations and occupations at Five Counties Children's Centre. Interested staff were contacted via email by one of the FCCC contacts, and potential participants were sent consent forms or asked to respond with a statement to a member of the research team to confirm their attendance and consent. Twelve participants responded confirming their consent and attendance. The final sample consisted of 11 participants from all centre locations and occupations at FCCC (one could not attend day of). This focus group was conducted over Microsoft Teams, as staff were more familiar with this software. It is important to note that characteristics of participants in either group (occupation, gender, age, etc.) were not noted in an effort to maintain confidentiality. Both focus groups were audio recorded and transcribed verbatim, and we also saved contributions made in the chat boxes during the calls.

### **Findings**

#### **Literature Review- Refer to Appendix 4**

##### *Lack of Knowledge on Programming*

##### *Lacks/benefits highlighted in programs*

Multiple pieces of literature explored different programs or supports that are being used for teens with developmental or physical disabilities, and whether they are beneficial. This provides important background in acknowledging the overall gaps identified across studies, and provides examples of possible programs for consideration by FCCC. One gap highlighted both within literature and the staff focus group was life skills or transitional programming for these teens. For instance, Merz et al. (2020) identifies that the gap in transitional programming from

high school to adulthood is prominent for teens with intellectual/developmental needs, and that these are typically the various types of needs that therapists assist until children reach up to grade 3, at which point responsibility is positioned upon schools (Merz et al., 2020). Researchers studied notes taken by the occupational therapist over a 2-year span on 6 persons' files. Group activities led by an occupational therapist included physical activity, meal prep, fine motor skills, teamwork building, games, setting goals, etc. (Merz et al., 2020). The notes they analyzed suggested that the transitional programming was beneficial for most of the youth, improving skills such as motor skills, rule co-operation, listening and mentoring (Merz et al., 2020). Although the study provides evidence that group occupational therapy is beneficial, a limitation was that it was a small sample group, and the note-taking did not have generalized expectations for each entry, meaning every participant had different notes per session. Therefore, every participant had different notes, differing in quality or quantity of notes depending on the session/person writing the notes, potentially missing important information on progressions. As well, the center conducting the groups was a for-profit organization. However, an important limitation that arises in all areas surrounding programming is that each person experiences disability differently. Some may have more physical versus intellectual limitations. Therefore, it makes it challenging to develop generalized activities for such a diverse group with different needs. This gap is also expressed within an article by Kramer et al. (2018), which examined whether a mentor-mentee program could be maintained to help teens transition to adulthood, where both parties have an intellectual or developmental disability. The study found this program more beneficial as it allows one to understand another through similar standpoints in comparison to when the mentor is not a peer, or does not share an experience of disability. As mentioned above in the article by Merz et al., the theme emerges in generalizations of programming for

such a diverse population. Mentor-objective success varied depending on the mentor and their capacity to conduct the meetings with their mentee with/without a supervisor, script, or advance meetings with a supervisor (Kramer et al., 2018). While the Kramer et al. study found that the mentor/mentee program with both parties having an intellectual/developmental need had positive outcomes in terms of supporting objectives such as communication, homework completion, and social inclusion, there are challenges. In terms of having a supervisor, it may create higher costs to pay a wage for someone to sit in with mentors, alongside the mentor potentially requiring a wage as well. If the mentor is able to conduct the meeting themselves or the program was on a volunteer basis, this is a cost-effective option. It is then highlighted through these pieces of literature that considerations have to be made in terms of the spectrum of needs that each person may have when considering program implementation and whom it may benefit, and who it may be inaccessible/ or usable for. Nonetheless, both these pieces provide information on programs that have been researched and found to be beneficial.

### *Sexual Education/Sexuality*

Reviewing various literature highlighted important gaps within the area of sexual education for youth with developmental and intellectual needs (see appendix 4). Sexual education is a protective factor in various ways for youth. Comprehensive sexual education also focuses on healthy relationships, consent, sexual victimization, and much more. This education provides protective knowledge in various ways for adolescents. Youth with developmental and intellectual needs are at a higher risk of sexual victimization (Government of Ontario, 2021), but tend to not receive sexual education within the curriculum when they are allocated to a specific class setting for youth with special needs (Graff et al., 2018). Therefore, it is often up to the

parents' discretion, comfort level, and knowledge base in the extent or capacity in which the child receives sexual education, meaning in some cases, these youth are not getting this education (Graff et al., 2018). One gap identified in the literature are in the use of contraceptive methods (condoms, birth control, etc). The study "Contraceptive Use Among Adolescents With and Without Disabilities" studied contraceptive use and sexual activity among girls with/without disabilities by analyzing grade 11 surveys distributed in Oregon, US, over the years 2015-2017. They explain that girls with disabilities were more likely to have intercourse compared to those without disabilities (49.2% vs. 37.4%), and concerningly with fewer contraceptive methods compared to girls without disabilities (see appendices 4) (Senders and Horner-Johnson, 2022, p. 122). There is a common misconception that persons with disabilities/needs do not engage in sexual activity/desires, and because the same misconception is held about youth as a whole, this myth is more prominent for youth with disabilities (Graff et al., 2018).

Literature highlights the need for sexual education for this population as they are engaging in sexual activity, but with less knowledge on the topic. The article by Graff et al., explores whether implementing the educational programming "Positive Choices" on sex and relationships, in a curriculum at a post-secondary education program for students with intellectual and developmental needs, is beneficial to students' understanding surrounding topics of sex, sexuality and relationships. The "Positive Choices" program focuses on "(1) relationships and self-awareness, (2) maturation, (3) the life cycle, (4) sexual health, and (5) being strong, staying safe" (Graff et al., 2018, p.178). The pre-post tests comparison of student participants suggested that all groups (excluding control group) benefited positively from the program in terms of knowledge surrounding the topics covered (Graff et al., 2018). Graff et al. (2018, p.180) agree that "healthy relationships, information on red flags in relationships, and gender-specific

health care were perceived as the most useful by the participants". As well, participants explained that they would prefer more information on different types of relationship abuse, relationships, menstruation, and care of a baby (Graff et al., 2018).

Literature both highlighted the gap in providing sexual education for youth with intellectual and developmental needs, as well as the misconceptions that lead to stigmatizing ideas of sexual activity of persons with disabilities. One solution, further discussed in the conclusion of this report, is utilizing *The Sexuality and Developmental Disability: a Guide for Parents*, which provides background information on teenagers with disabilities and vulnerabilities, and offers strategies to educate these youth (Government of Ontario, 2021). This guide provides information on the vulnerabilities and statistics surrounding youth with differing needs and on how parents can educate their children in these areas.

### ***Staff Focus Group Key Findings***

After the literature review, completing focus groups was the next step in this research to have people who are directly involved with FCCC (whether through a client or staff perspective depending on the group) identify areas for improvement and areas of strength within pre-existing teenage programming at the center. Furthermore, the focus groups were used as a tool to also hear general feedback and future suggestions. Some of the key findings and themes identified include noticeable gaps in transitional programming and stigma or discomfort with sex education, as well as an acknowledgement of a need to offer or direct to some form of sex education

#### ***Gaps in programming***

One key finding that was often mentioned in the focus group with FCCC staff was that there is a noticeable gap in programming for clients who are about to age out of FCCC. At FCCC, clientele typically can access services until they are adults (Five Counties Children's Centre, 2023). Once a client ages out of these services, they are transferred out of FCCC care. Staff identified that with this transition there aren't a lot of services for young adults and adults in the Peterborough area. One participant said the following; "... our clients sort of graduate from our services to transition to adult services that are next to non-existent for a lot of our clients. I think if we are really thinking about how we could address that [being the lack of transition programming], um, and our age mandate stands a bit in the way of that." The same participant went on to suggest that collaboration between FCCC and other organizations, like the health unit, may help ease the gap in programming experienced by young adults leaving FCCC. All participants seemed to be in agreement with this idea, nodding. Many staff also mentioned a transitional program offered in partnership with Fleming college previously which was quite successful; however, they also noted it was very resource-intensive.

Another gap in programming identified was a lack in social communication groups. The need for these programs was brought up by a participant who said the following; "...I think one of the things that's missing is some of the social communication groups. And it gets tricky because with FC once they get into grade one our programming specially is for articulation, so some of those kids on the spectrum and even just some of the kids in the ALS class, I feel like there is a big need for teaching social communication skills that I am not sure anyone is really doing.". Social communication skills are crucial for youth and teenagers to possess as it allows them to be able to communicate efficiently in everyday life.

### *Stigma around sex education*

Another theme addressed widely in the staff focus group was the stigma around sex education. This theme was present in several ways. Firstly, it was apparent that a lot of FCCC staff, although they believed it was important to address, expressed facing dilemmas about talking about sex, puberty, dating and other topics that are typically covered under sexual education curriculum to clients. One participant said the following; “we don’t wanna talk about it but we know that they are doing a lot of things”. Another staff participant, following the previous statement, said “Even in the adult world, a lot of people do it [referring to not talking about sex] to people with disabilities in the adult world and kind of gatekeep and keep that stuff away. It’s really a moral and ethical discussion and dilemma.” The terms moral and ethical dilemma continued to be brought up throughout the conversation as staff expressed their concerns about sexual education. For the majority of participants, there was discomfort expressed, both verbally and physically. However, all staff who participated seemed to circle back to the idea that the client’s best interest comes first, one participant demonstrated this saying the following; “...you know there is additional safety concerns and protection concerns for our children and clients and teens with different disabilities, just making sure that they are not being taken advantage of. Well, it’s not our role probably to be sure of that but making sure that that information and a good way to get that information so they are not being taken advantage of as well. I am not sure that we do that well. I am not sure that I do that well.”.

### **Limitations**

There were a few limitations to this study. The crucial limitation experienced involved the attendance of family focus groups. While confirmation and consent of the 8 potential

participants were obtained, only two attended, and one actively engaged. There can be a few explanations for this. People's schedules change. While we aimed to conduct the family group on a weekday evening online in order to accommodate typical work schedules and eliminate access time to travel to a location, things may arise and participants change their minds. One consideration is that some families may be the caregiver of their children with needs, and it may be harder to find privacy to attend the focus group. Some participants asked whether there was compensation for participating after providing informed consent as well. As FCCC staff had noted within the focus group, typically their families are of lower income. Therefore, their time is valuable, and this may have influenced attendance.

One barrier that was prominent occurred due to the delay of ethical approval. Due to the time constraints of the project, and ethics process, recruitment for the first two focus groups was delayed. It was not possible to add a third focus group. Within the family focus group, the other limitation occurred where the participant attending who responded to questions was found to not meet eligibility criteria within their answers (Possibly a client/former client/ or someone with experience with FCCC programming). The study was approved and meant to be conducted with families in connection to FCCC. While the data gathered from this group is still beneficial, it is a limitation and in future can be better addressed in ensuring participants meet eligibility criteria.

The study also had a media presence after we presented preliminary findings at the Trent Community Research Centre (TCRC) Celebration of Research. The presentation of the research poster received the Innovative Presentation: Poster Presentation award for communication and presentation skills (Trent, 2023) (see appendix 5). It was also printed on the first page of the Peterborough Examiner (see appendix 5). This is not a limitation, but something the research

team had to be aware of as participants from the staff focus group (and family group) may have known about it prior to, potentially influencing what was expected of them in terms of responses.

### **Conclusion and Recommendations**

When FCCC approached the Trent Community Research Centre, they identified a gap in programming for teenage clients at their center. Specifically, FCCC noted a gap in programs helping clientele develop life skills and learn about sexual education, both of which are crucial aspects to any adolescent, regardless of whether or not they have a disability of any sort. Upon completing our research, we identified that the gap in programming originally presented by FCCC was evident, along with other key gaps. These include a stigma around sexual education (both with teenagers who have disabilities and in general), a lack of programming for teenagers with disabilities, and a lack of bridge programming from youth to adult care programs. In our literature review, the studies provide useful information on programming that could be used. Similar programs could be implemented by the host organization, such as teaching parents how to educate their teens on this topic, as well as highlighting areas youth need support with understanding sexuality. In the family focus group, although there were limitations due to a lack of attendance, the theme of peer support was also highlighted. In the staff focus group, this theme also emerged. In addition, it is evident that the staff want to see better supports for their teenage clients, but expressed concerns about accessing resources. Overall, these themes all connect back to the need for further teenage program implementation at FCCC.

Moving forward, we encourage FCCC to conduct further research, perhaps with the teenage clients themselves, something that we did not have the capacity to do with our ethical restrictions. One limitation that we faced was compensation wanted for participating in the focus

groups. Although that was beyond our capacity for this project, providing a prize incentive might be a way to better engage participation with families and clients in a similar study. Prizes of interest would vary depending on whether the survey would be for teens or families.

In addition, we believe that FCCC should look into further collaborating with community groups in order to help minimize the strain of time and resources put on FCCC staff. Re-starting the collaboration with Fleming College programs that allowed youth to practice life skills could be one way to do this, even though it is very resource intensive as expressed by staff. With this in mind, smaller-scale life skills programming might also be a solution. In both focus groups, it was noted that it is important to match a client to their interests. So, if there were a few smaller, less resource-intensive programs available in collaboration with community partners, this might help reduce the strain on staff and also ensure that the programs still take place. Some specific suggestions for collaboration are included in Appendix 6.

In regards to sexual education, staff expressed during the focus group that it is not widely advertised that it is something they can help clients work through. We believe that if somewhere on the FCCC website it could list services or resources that help clients talk through sexuality, puberty or healthy relationships, perhaps more clients would be inclined to bring it up without hesitation as they know it is something they can talk about at the center. Another suggestion would be to implement peer mentoring or community partnered programs. For peer mentoring, adults who have been through similar programming could come into FCCC and facilitate conversations around topics like dating or sex education in a comfortable environment. This could be very relaxed, even implemented alongside refreshments or music. It would provide clients who do want to talk about sexual education topics a chance to do so in a safe environment with their peers and someone who can relate to them. For community partnered programs,

organizations like the Kawartha Sexual Assault Centre (KSAC) or Peterborough Health Unit could be brought in to facilitate a session on any particular topic in regards to the sexual education curriculum. The goal is not to make the conversation uncomfortable or stigmatized but rather to create an open opportunity for teenagers to ask questions that matter to them.

## References

- Centers for Disease Control and Prevention. (2022, December 9). *What is autism spectrum disorder?* Centers for Disease Control and Prevention. Retrieved February 2, 2023, from <https://www.cdc.gov/ncbddd/autism/facts.html>
- Choque Olsson, Flygare, O., Coco, C., Görling, A., Råde, A., Chen, Q., Lindstedt, K., Berggren, S., Serlachius, E., Jonsson, U., Tammimies, K., Kjellin, L., & Bölte, S. (2017). Social Skills Training for Children and Adolescents With Autism Spectrum Disorder: A Randomized Controlled Trial. *Journal of the American Academy of Child and Adolescent Psychiatry*, 56(7), 585–592. <https://doi.org/10.1016/j.jaac.2017.05.001>
- Cologon, K. (2016). “What is disability? It depends whose shoes you are wearing”: Parent understandings of the concept of disability. *Disability Studies Quarterly*, 36(1). <https://doi.org/10.18061/dsq.v36i1.4448>
- Government of Canada. (December 21, 2022). *A Child's Age and Stage of Development Make a Difference*. Government of Canada. <https://www.justice.gc.ca/eng/rp-pr/fl-lf/divorce/age/age2c.html>
- Graff, H., Moyher, R. E., Bair, J., Foster, C., Gorden, M. E., & Clem, J. (2018). Relationships and Sexuality: How is a Young Adult with an Intellectual Disability Supposed to Navigate? *Sexuality and Disability*, 36(2), 175–183. <https://doi.org/10.1007/s11195-017-9499-3>

Kirby, S., Greaves, L., & Reid, C. (2017). *Experience, research, social change : critical methods* (Third edition.). University of Toronto Press.

Kramer, Ryan, C. T., Moore, R., & Schwartz, A. (2018). Feasibility of electronic peer mentoring for transition-age youth and young adults with intellectual and developmental disabilities: Project Teens making Environment and Activity Modifications. *Journal of Applied Research in Intellectual Disabilities*, 31(1), e118–e129.  
<https://doi.org/10.1111/jar.12346>

Merz, J., Nakasuji, B., & Mollo, K. S. (2020). Occupational Therapy Group Programming for Adolescents with Developmental and Learning Disabilities: A Retrospective Documentation Review. *The Open Journal of Occupational Therapy*, 8(3), 1–18.  
<https://doi.org/10.15453/2168-6408.1675>

*2023 project highlights*. 2023 Project Highlights - Community-Based Research - Trent University. (n.d.). Retrieved April 20, 2023, from  
<https://www.trentu.ca/community-based-research/2023-project-highlights>

Senders, M., & Horner-Johnson, W. (2022). Contraceptive Use Among Adolescents With and Without Disabilities. *Journal of Adolescent Health*, 70(1), 120–126.  
<https://doi.org/10.1016/j.jadohealth.2021.06.028>

Five Counties Children's Centre. (2023, April 3). Retrieved from  
<https://www.fivecounties.on.ca/who-we-are/>

## **Appendix 1**

### Focus Group Question Guide

*\*Designed to create conversation!*

#### **Community Questions**

- What has your experience been with FCCC programming?
- If you have had youth participate in programming for teens at FCCC, how would you describe their experience?
  - *\*based on response\** prompt for highlights or lacking areas.
- As FCCC Community, have you identified any areas where teenagers with special needs may need support or additional programming?
  - FCCC has identified through the community that there is a lack of sexual education and life skill programming for teens with special needs. What would you like to see implemented in terms of life skills and sexual education programming for teens?
- Would you be willing to contribute or pay a fee to have your teenager participate in this programming if created?
  - Would an additional cost be a barrier to participation for your teen/family?

#### **Staff Questions**

- Have you taken part in/facilitated any teenage programming at FCCC? If so, what benefits have you witnessed for both youth and family from this programming?
- Did you identify any gaps or limitations within the programming?
- One of the primary areas that FCCC teenage programming is looking to cover is life skills and sexual education. Are there any ways you would suggest that this can be accomplished? How has this been addressed already?
- What kinds of teenage programming would you like to see implemented at FCCC?
- Do you feel parents/guardians would pay a portion or fee for their teenagers participation in these programs if implemented?

## Appendix 2 Recruitment Postings

### Social Media Post in Five for Five Newsletter

#### Boosting Teen Programs Focus of New Initiative

Finding ways to fill gaps in teenage programming at Five Counties Children's Centre is the focus of a research partnership with Trent University.



The Centre is pleased to collaborate with the **Trent Community Research Centre** on the initiative. The partnership brings together the research needs of community groups like Five Counties with the research expertise of Trent faculty and students.

This specific research project aims to determine the unmet teenage development needs of Five Counties clients, and how potential gaps could be filled with enhanced programming. To delve into this issue, Trent students will use a literature analysis, as well as conduct focus groups with Five Counties staff and families, to examine how the Centre can better serve its teenaged clients. More details about the focus groups and research will be announced soon.

Five Counties provides children and youth with physical, communication and development needs from birth right through the end of high school.

For more than 25 years, the Trent Community Research Centre has facilitated research projects in the region, providing students the opportunity to support the direct needs of community organizations, while learning critical workplace-ready skills.

<https://myemail.constantcontact.com/Five-For-Five---March-2023---Important-Updates-from-Five-Counties-.html?soid=1131103007031&aid=yCG5vdr4SGQ>

#### Social Media Post for Family Recruitment

Five Counties Children's Centre · Follow  
March 19 · 🌐

We need your help! [Trent Community Research Centre](#) is holding a virtual Focus Group for anyone 18+ on March 29. Trent researchers are partnering with Five Counties to get feedback + offer ideas on how to fill gaps in our teen programs.

Want to be part of this focus group + conversation? Email:  
📧 Amber at [ambertitterton@trentu.ca](mailto:ambertitterton@trentu.ca)  
or  
📧 Julia at [juliabeggs@trentu.ca](mailto:juliabeggs@trentu.ca)  
[#Buildingabilitiesforlife](#)

**Have Your Say!**

**Join our focus group looking at ways we can fill gaps in our teen programs**

Trent Community Research Centre

Five Counties CHILDREN'S CENTRE

#BUILDINGABILITIESFORLIFE

WWW.FIVECOUNTIES.ON.CA

## Appendix 3



### Information and Consent Form

#### **Study Description/Purpose**

You are invited to participate in a research study which will explore the need for expanded teenage programming at Five Counties Children's Centre. This research is being done by student researchers Julia Beggs and Amber Titterton, working in collaboration with Five Counties Children's Centre as a part of an undergraduate community-based research project under the supervision of Dr. Lisa Boucher.

#### **Study Methods**

You are being asked to participate in an online focus group for this project. Focus groups are designed to facilitate group conversation with directed questions and allow researchers to gain important insight around the topic. The focus groups will be audio recorded and a note-taker will be present. The purpose of recording the focus group is to ensure that the focus group's discussion is recorded as accurately as possible. The audio recording will only be used to aid in transcribing the focus group. Participants can request that the interviewer pause the recording at any time. Any recordings will be deleted after the conclusion of the research.

#### **Confidentiality & Voluntary Participation**

Information gathered in this study will be shared publicly (ex. Research report & poster, presentation of findings); however, all participants will be given a pseudonym and other identifying information will not be used. The research team is committed to protecting your confidentiality to the best of our ability, but as in any group interview like a focus group, we cannot guarantee absolute confidentiality because there are multiple participants.

Your participation in the research is completely voluntary. You do not have to respond to any questions that you do not want to and you may discontinue your participation in the research at any time. Your withdrawal from the study will not affect your relationship with the research team or with Trent University.

#### **Storage of Data**

All information collected during the study will be securely stored. Any physical papers (i.e. written notes) will be securely stored in a locked file cabinet. All digital notes (i.e. transcripts) and the audio recording of the focus group will be password protected, security encrypted and stored on Trent University's One Drive. Files will only be accessed by the student researchers and the study supervisor. The recording will be deleted at the conclusion of the project (May 2023).

#### **Risks of Participation**

The risks to participating in this research are minimal, meaning that the likelihood of experiencing harm is no greater than that encountered in everyday life. However, there is a chance that you might experience difficult emotions during the focus group. Please remember that you do not have to answer any questions that you do not want to.

Additionally, as discussed above, while the research team is committed to protecting your confidentiality, absolute confidentiality cannot be guaranteed.

**Benefits of Participation**

Through participating in this study, you will have an opportunity to share your experiences with, and knowledge about, programming for youth/teenagers. Your participation in this study may also inform the development of future youth programming at Five Counties Children’s Centre.

**Ethics Approval**

This project has been approved by the Trent University Research Ethics Board. For further information, please contact Lisa Boucher at lisaboucher@trentu.ca or 705-748-1011 ext. 7603. You can also contact Jamie Muckle from the Office of Research and Innovation at jmuckle@trentu.ca or 705-748-1011 ext. 7896. If anything in this form is unclear, please let the research team know and we will be happy to answer your questions.

**Consent**

Please indicate your consent by initialing the appropriate boxes and signing below. Alternatively, you can reply by email to indicate that you have read the information/consent form, have had an opportunity to ask questions about the study, and consent to participate. You must be 18+ years to participate in this research and volunteer, work or have experience with programming and services at the participating organization.

I have read this consent form and have had an opportunity to talk about it with a member of the university research team. I understand that my participation in this study is voluntary, that I can withdraw at any time, and that this research has been approved by the Trent University Research Ethics Board. I freely consent to participate in this study.

I freely consent to participate in the focus group.

I freely consent to having the focus group audio recorded.

Participant signature: \_\_\_\_\_

Date: \_\_\_\_\_

Participant name (printed): \_\_\_\_\_

## Appendix 4

### Literature Review Template

*This table style has been reworked from Peri Ballantyne's course SOCI 3151 Practicing Social Justice Research at Trent University.*

<b>Study One</b>			
<p>Merz, J., Nakasuji, B., &amp; Mollo, K. S. (2020). Occupational Therapy Group Programming for Adolescents with Developmental and Learning Disabilities: A Retrospective Documentation Review. <i>The Open Journal of Occupational Therapy</i>, 8(3), 1–18. <a href="https://doi.org/10.15453/2168-6408.1675">https://doi.org/10.15453/2168-6408.1675</a></p>			
<p><b>Gaps in knowledge about the topic identified by the authors;</b></p> <p><b>Research question or statement of intent</b></p> <p>Gap in knowledge of the documentation methods in transitional therapy groups            Gap in transitional programming for teenage clients with learning/physical disabilities, for instance occupational therapists typically are only available for children up until grade 3.            Identifies need to assist children on transitions into adulthood as school only provides primary assistance</p> <p>Statement of intent: A retrospective documentation review of occupational therapy transition group programming was completed to identify themes and to assess fieldwork student documentation clarity. (p.1)</p>	<p><b>Study Methodology</b></p> <p><b>Method(s) used for data collection</b></p> <p><b>identify key concepts; dependent and independent variables - for survey or experimental design</b></p> <p>Retrospective analysis of qualitative methodology. Data was decoded to find overall themes researchers could use for findings.</p>	<p><b>Recruitment strategy</b></p> <p><b>Sample design</b></p> <p><b>Describe achieved sample (if appropriate, distinguish targeted from achieved sample)</b></p> <p>Convenience sampling was used.            Recruitment was through meeting eligibility criteria for researchers to use that person (unidentified) file notes.            Sample consisted of 6 overall persons files (3 male, 3 female), who participated in group programming for more than two years.            Achieved sample was 6 participants between 13-20 years of age (3 female 3 male), who were diagnosed with a learning/physical disability, if they did not have a diagnoses subjects were excluded. Total notes analyzed were 162</p>	<p><b><u>Key Finding(s): be specific – usually located in Findings or Results section, not the Discussion section!</u></b></p> <p><b>Do the findings relate back to the RQ or statement of intent?</b></p> <p>Established 5 themes            One theme was the challenge itself for some to participate in the transition program. Social behaviors, communication, fine motor skills, and hand strength created some challenges for participation in some aspects. Most had success and benefits from participating. Improved motor skills, rule listening, mentoring etc.</p> <p>Authors distinguish the need for a systematic method to creating notes to have it more general across the board on what is included in notes, as well as how it is hard to make generalizations form such a small sample.</p>

**Study Two**

Senders, M., & Horner-Johnson, W. (2022). Contraceptive Use Among Adolescents With and Without Disabilities.

Journal of Adolescent Health, 70(1), 120–126. <https://doi.org/10.1016/j.jadohealth.2021.06.028>

<p><b>Gaps in knowledge about the topic identified by the authors;</b></p> <p><b>Research question or statement of intent</b></p> <p>There is little research on use of contraceptive methods with adolescent girls with disabilities. more so studies are conducted generally on women childbearing age, meaning the entire age gap of childbearing time versus adolescence specifically.</p> <p>Statement of Intent: The purpose of this study is to better understand patterns of contraceptive use among adolescent girls with and without disabilities at risk for unplanned pregnancy</p>	<p><b>Study Methodology</b></p> <p><b>Method(s) used for data collection</b></p> <p><b>identify key concepts; dependent and independent variables - for survey or experimental design</b></p> <p>Quantitative cross-sectional study through surveys administered to grade 11 students in Oregon from 2015-2017.</p> <p>Data weighed on a multiple stage sample design, was identified as a non-human subject research.</p>	<p><b>Recruitment strategy</b></p> <p><b>Sample design</b></p> <p><b>Describe achieved sample (if appropriate, distinguish targeted from achieved sample)</b></p> <p>The achieved sample consisted of 11th grade students in years survey administered in 2015 and 2017.</p> <p>3681 students included total, had to be a girl, who has had sex with a male, and identifies with a disability.</p>	<p><b><u>Key Finding(s): be specific – usually located in Findings or Results section, not the Discussion section!</u></b></p> <p><b><u>Do the findings relate back to the RQ or statement of intent?</u></b></p> <p>Girls with disabilities were more likely to report having had intercourse compared to girls without a disability (49.2% vs. 37.4%, respectively, <math>p &lt; .0001</math>). (p.122)</p> <p>Girls with disabilities were less likely to report using OCPs (32.8% vs. 36.6%) or condoms (51.9% vs. 59.7%) and more likely to report using no contraceptive method (7.9%vs. 4.9%) compared to girls without a disability (p.122)</p> <p>Girls with disabilities were less likely than those without disabilities to use a moderately effective method (OCPs, Depo-Provera, patch, or ring; 42.2% vs. 46.7%).</p> <p>Girls with disabilities were more likely to report withdrawal as their only method at last intercourse (6.3%vs.4.0%) and less likely to use more than one method (33.9% vs. 41.0%). (p. 122)</p> <p>Statement of Intent is supported as they found information on contraceptive use among female adolescents with disabilities.</p>
---	--	--	--

**Study Three**

Kramer, Ryan, C. T., Moore, R., & Schwartz, A. (2018). Feasibility of electronic peer mentoring for transition-age youth and young adults with intellectual and developmental disabilities: Project Teens making Environment and Activity Modifications. *Journal of Applied Research in Intellectual Disabilities*, 31(1), e118–e129.

<https://doi.org/10.1111/jar.12346>

<p><b>Gaps in knowledge about the topic identified by the authors;</b></p> <p><b>Research question or statement of intent</b></p> <p>Calls in literature for greater inclusion of underserved populations in mentoring interventions. Gaps in knowledge on the effect of a mentoring program where the mentor has a learning/physical disability alike the mentee. Due to this not existing as much, there is limited understanding on how to design and implement this peer mentoring program with this population.</p> <p>Statement and RQ’s          “The purpose of this study was to examine the feasibility of the electronic peer-mentoring component of Project Teens making Environment and Activity Modifications (TEAM), a problem-solving intervention for transition-age youth with I/DD” (p.e119)          Examine gaps in literature of peer mentoring program descriptions for mentees and mentors with I/DD. (1) Are transition-age youth with I/DD able to participate in Project TEAM’s electronic peer</p>	<p><b>Study Methodology</b></p> <p><b>Method(s) used for data collection</b></p> <p><b>identify key concepts; dependent and independent variables - for survey or experimental design</b></p> <p>Project TEAM consisted of 16 group sessions guided by manualized curriculum.</p> <p>Qualitative study (quasi because of coding methods)          Audio recordings of the meetings.</p> <p>Mentors had meetings prior to (mentee meetings) to know the weeks topics</p>	<p><b>Recruitment strategy</b></p> <p><b>Sample design</b></p> <p><b>Describe achieved sample (if appropriate, distinguish targeted from achieved sample)</b></p> <p>Two locations, 42 peer mentoring dyads across 7 cohorts.</p> <p>291 peer mentoring calls (over span of 12 weeks)</p> <p>Mentors received an initial two hour training session and then weekly calls from weeks 1-5 on the call topic to discuss with their mentee, and then biweekly for remainder.</p> <p>6 participants were excluded, five did not attend the first call, and one was removed for safety concerns.</p>	<p><b><u>Key Finding(s): be specific – usually located in Findings or Results section, not the Discussion section!</u></b></p> <p><b>Do the findings relate back to the RQ or statement of intent?</b></p> <p>Transition age youth with I/DD are able to participate in Project TEAM’s electronic peer mentoring program. Attendance rate was 87% across calls, with a 94% high engagement rate. Rates of engagement were higher with objectives to complete.</p> <p>Peer mentors with I/DD needed a supervisor present in 30 of the 42 mentor dyads. Some were able to conduct them alone, while others needed assistance in conducting the sessions. Mentors were able to navigate meetings on various platforms (video chat, phone call etc.). They also were found to use a script 74% of the time. Direct support was used 33% of the time, and when using supports, mentors were more likely to achieve objectives.</p> <p>Peer mentors with I/DD were able to achieve the majority of</p>
--	---	--	--

<p>mentoring? (2) Can peer mentors with I/DD achieve Project TEAM's electronic peer-mentoring objectives? (3) What supports and resources are needed to implement and manage Project TEAM's electronic peer mentoring?</p>			<p>objectives (87%). They were able to use different platforms as discussed above and helped mentees hit objectives. Mentor objectives included discussion on</p> <ul style="list-style-type: none"><li>- Telling the mentee who is calling</li><li>- Sharing interests on weekly topic</li><li>- Mentees goals</li><li>- New material</li><li>- Homework reminder and question time</li></ul>
--	--	--	--

## Study Four

Graff, H., Moyher, R. E., Bair, J., Foster, C., Gorden, M. E., & Clem, J. (2018). Relationships and Sexuality: How is a Young Adult with an Intellectual Disability Supposed to Navigate? *Sexuality and Disability*, 36(2), 175–183.

<https://doi.org/10.1007/s11195-017-9499-3>

<p><b>Gaps in knowledge about the topic identified by the authors;</b></p> <p><b>Research question or statement of intent</b></p> <p>Sex ed curriculums are not often provided to youth with intellectual/developmental needs, therefore their education depends on the parent's comfort level in educating on the topic. Highlights how sex education varies youth to youth. There are current myths that youth with needs do not partake or have sexual desires, so there is a gap in regulated education.</p> <p>Statement of intent: Evaluate sexual education programming and its impact for youth with developmental/physical needs. Specific questions:</p> <p>“1. Will there be a significant difference between pretest and post-test for the experimental group in knowledge gained in the area of sex education?</p> <p>2. What thoughts will the participants of the intervention group have regarding the usefulness of this curriculum and topic on their personal lives?” (p.177).</p>	<p><b>Study Methodology</b></p> <p><b>Method(s) used for data collection</b></p> <p><b>identify key concepts; dependent and independent variables - for survey or experimental design</b></p> <p>This study took a mixed method approach with both qualitative and quantitative methods. The study used a comprehensive transition program and included 3 intervention groups where students with IDD (intellectual and developmental disabilities) were taught positive choices in relation to sexual education. Researchers conducted pre- and post-tests with students who taught the program. Sexual education knowledge was the main point within the testing.</p>	<p><b>Recruitment strategy</b></p> <p><b>Sample design</b></p> <p><b>Describe achieved sample (if appropriate, distinguish targeted from achieved sample)</b></p> <p>Recruitment was purposive sampling. The setting was an “inclusive postsecondary program for students with IDD at an urban east coast university over the course of 3 years” (p.177). The first group consisted of first year students within the human growth and development class (HGD) with the new program within the curriculum. The control group consisted of students past first year, who took the HGD course but did not experience the program, and finally the second and third group consisted of first year students.</p> <p>In looking at all three groups, the achieved sample consisted of 41 students, with a mean age of 20, being 51% males 48% females with 71% having intellectual disabilities, and 29% having autism spectrum disorder (p.178).</p>	<p><b><u>Key Finding(s): be specific – usually located in Findings or Results section, not the Discussion section!</u></b></p> <p><b>Do the findings relate back to the RQ or statement of intent?</b></p> <p>The paired t sample test suggests the positive choice program positively affected the sexual education knowledge for participants. Participants ranked topics in their post-test questionnaire on usefulness of information. They found chapters on “healthy relationships, information on red flags in relationships, and gender specific health care were perceived as the most useful by the participants” (p.180). Participants did request they wanted more information in general on abuse, care of a baby, menstruation, and relationships (180). They also identified that they would use these topics in discussions outside of class (birth control, relationship red flags).</p>
---	---	--	---

**Study Six**

Choque Olsson, Flygare, O., Coco, C., Görling, A., Råde, A., Chen, Q., Lindstedt, K., Berggren, S., Serlachius, E., Jonsson, U., Tammimies, K., Kjellin, L., & Bölte, S. (2017). Social Skills Training for Children and Adolescents With Autism Spectrum Disorder: A Randomized Controlled Trial. *Journal of the American Academy of Child and Adolescent Psychiatry*, 56(7), 585–592. <https://doi.org/10.1016/j.jaac.2017.05.001>

<p><b>Gaps in knowledge about the topic identified by the authors;</b></p> <p><b>Research question or statement of intent</b></p> <p>The purpose of this study was to study the effectiveness of social skills group training (SSGT) on participants who have diagnosed autism disorder in comparison to traditional approaches.</p>	<p><b>Study Methodology</b></p> <p><b>Method(s) used for data collection</b></p> <p><b>identify key concepts; dependent and independent variables - for survey or experimental design</b></p> <p>12 week long randomized controlled study with 296 participants (88 F, 208 M) who all had ASD without any intellectual disabilities.</p>	<p><b>Recruitment strategy</b></p> <p><b>Sample design</b></p> <p><b>Describe achieved sample (if appropriate, distinguish targeted from achieved sample)</b></p> <p>Conducted between 13 psychiatry outpatient units in Sweden, with both adults and children.</p>	<p><b><u>Key Finding(s): be specific – usually located in Findings or Results section, not the Discussion section!</u></b></p> <p><b>Do the findings relate back to the RQ or statement of intent</b></p> <p>Study participants had an easier time learning through social skills group training (SSGT).</p>
--	--	---	--

**Study Six**

Merz, Nakasuji, B., & Mollo, K. (2021). Preparation for the Future: The Impact of OT Programming on Adolescents With Developmental and Learning Disabilities. *The American Journal of Occupational Therapy*, 75(S2), 7512520397–7512520397p1. <https://doi.org/10.5014/ajot.2021.75S2-RP397>

<p><b>Gaps in knowledge about the topic identified by the authors;</b></p> <p><b>Research question or statement of intent</b></p> <p>There is an identified gap in research on programming for youth with developmental disabilities that extends beyond high school. In an attempt to bridge the gap, OT therapists brought group sessions to a high school to teach occupation based life skills.</p>	<p><b>Study Methodology</b></p> <p><b>Method(s) used for data collection</b></p> <p><b>identify key concepts; dependent and independent variables - for survey or experimental design</b></p> <p>Qualitative analysis of 162 progress notes after group OT sessions for four years.</p>	<p><b>Recruitment strategy</b></p> <p><b>Sample design</b></p> <p><b>Describe achieved sample (if appropriate, distinguish targeted from achieved sample)</b></p> <p>Randomized recruitment of high school students with developmental disabilities.</p>	<p><b><u>Key Finding(s): be specific – usually located in Findings or Results section, not the Discussion section!</u></b></p> <p><b>Do the findings relate back to the RQ or statement of intent?</b></p> <p>46% unemployment rate among adults with disabilities (without OT intervention)</p> <p>41% of adults with learning disabilities don't graduate from their college programs (without OT intervention)</p> <p>Further evaluation is needed.</p>
---	---	--	--

**Study Seven**

Government of Ontario, S. C. (July 17, 2021). Sexuality and developmental disability: a guide for parents.

Government of Ontario.

[https://www.ontario.ca/document/child-and-parent-research-institute-cpri-sexual-behaviours-team-recommended-re  
sources/sexuality-and-developmental-disability-guide-parents](https://www.ontario.ca/document/child-and-parent-research-institute-cpri-sexual-behaviours-team-recommended-resources/sexuality-and-developmental-disability-guide-parents)

<p><b>Gaps in knowledge about the topic identified by the authors;</b></p> <p><b>Research question or statement of intent</b></p> <p>This government report provides parents with current information on teenagers with developmental/physical disabilities in relation to sexuality. The guide highlights the negative impacts or statistics surrounding people with developmental disability and sexuality, in relation to a higher chance of experiencing sexual victimization. The guide provides guardians with guidance on how to educate their children on the topic. They also provide tips, resources and suggestions to help the child better develop and embrace their sexuality and sexual identity.</p>	<p><b>Study Methodology</b></p> <p><b>Method(s) used for data collection</b></p> <p><b>identify key concepts; dependent and independent variables - for survey or experimental design</b></p> <p>Information packet</p>	<p><b>Recruitment strategy</b></p> <p><b>Sample design</b></p> <p><b>Describe achieved sample (if appropriate, distinguish targeted from achieved sample)</b></p>	<p><b><u>Key Finding(s): be specific – usually located in Findings or Results section, not the Discussion section!</u></b></p> <p><b>Do the findings relate back to the RQ or statement of intent?</b></p>
--	---	---	--

**Study Six Eight**

Goodall. (2019). “There is more flexibility to meet my needs”: Educational experiences of autistic young people in Mainstream and Alternative Education Provision. *Support for Learning*, 34(1), 4–33.

<https://doi.org/10.1111/1467-9604.12236>

<p><b>Gaps in knowledge about the topic identified by the authors;</b></p>	<p><b>Study Methodology</b></p>	<p><b>Recruitment strategy</b></p>	<p><b><u>Key Finding(s): be specific – usually located in Findings or Results section, not the Discussion section!</u></b></p>
<p><b>Research question or statement of intent</b></p>	<p><b>Method(s) used for data collection</b></p>	<p><b>Sample design</b></p>	<p><b>Do the findings relate back to the RQ or statement of intent?</b></p>
<p>This study conducted by Goodall (2019) examined the direct impacts of educational programming on seven adolescents with autism. The main finding was that when alternative programming designed specifically for young adults with autism was offered, participants better learned and incorporated their experiences in a classroom setting than when compared to traditional education plans.</p>	<p><b>identify key concepts; dependent and independent variables - for survey or experimental design</b></p>	<p><b>Describe achieved sample (if appropriate, distinguish targeted from achieved sample)</b></p>	<p>Mainstream education has produced mixed experiences for youth with autism.</p>
	<p>Semi structured interview among seven autistic teens in Northern Ireland.</p>	<p>Male sample, voluntary group of seven.</p>	<p>Concern among parents about mainstream education effectiveness for all autistic children.</p>
			<p>There are high levels of anxiety among adolescents in mainstream school settings.</p>

**Appendix 5**

## Media Presence

### Posted on Trent University's Website

#### *Innovative Presentation: POSTER PRESENTATION*

Presented to the student(s) who have demonstrated highly effective communication and presentation skills in the design of their research poster. Judges looked for high standards of poster design and information presentation, effective and imaginative use of space, and communication of research process and results.

Sponsor: Human Services and Justice Coordinating Committee.

2023 Winner: Amber Titterton and Julia Beggs, Gender and Social Justice Studies, "Market analysis for developmental teenage programming at Five Counties Children's Centre", HOST: Five Counties Children's Centre

**Market Analysis**

**DEVELOPMENTAL TEENAGE PROGRAMMING AT FIVE COUNTIES CHILDREN'S CENTRE**

"Building abilities for life."  
(FCCC)

Five Counties Children's Centre works with children with physical, communication, and developmental needs. They have identified a gap and need for teenage programming to help these youth develop life skills. The research project aims to identify possible life skills or developmental programs that Five Counties Children's Centre could offer that would be beneficial for teenagers.

**Research Questions:**

- What are the unmet teenage developmental needs of the clients of Five Counties Children's Centre?
- Is there enough of a need to justify developing new services?
- How would any new development be funded?

**Background Information:**

- Gap in knowledge on sexual health/sexuality for youth with developmental needs
- Teenagers with developmental needs are at higher risk for sexual victimization (Government of Ontario, 2021).
- There is better support within a mentor-mentee relationship when both parties have a developmental need (Kramer et al, 2016).
- Lack of programming in general for autistic teenagers.
- Lack of life skills programming for teenagers with developmental needs transitioning into adulthood (Merz et al, 2020).

**Methods:**

- Focus Groups  
We will conduct two focus groups with both families and clinical staff.
- Literature Review

**Five Counties Children's Centre (FCCC) Key Themes:**

- Workplace Culture and Talent
- Awareness
- Bigger Gifts and Support
- Thought Leadership
- Personalized Care Plus

For more information on the project/Five Counties Children's Centre and preliminary outcomes, scan this QR code.

Researchers: Julia Beggs and Amber Titterton  
Faculty Supervisor: Dr. Lisa Roucher  
Host: Scott Papin and Darlene Callan, FCCC  
TOSC Coordinator: Brittany Finigan  
GESO - 382H

TRENT UNIVERSITY  
Trent Community Research Centre  
Five Counties CHILDREN'S CENTRE

Above quote and image taken directly from:

<https://www.trentu.ca/community-based-research/2023-project-highlights>

Featured on first page of the Peterborough Examiner



CLIFFORD SKARSTEDT EXAMINER

Gender studies students Amber Titterton, left, and Julia Beggs researched gaps in the services for adolescents with developmental disorders at Five Counties Children's Centre. They presented their findings Wednesday at Trent Community Research Centre's celebration of community-based research projects.

# Teens with developmental disorders lacking sex ed

## Trent University event showcases students' research projects

**ALEX SCHUMMER**  
EXAMINER REPORTER

Research partnerships between students, faculty and local organizations were showcased Wednesday at Trent University's Community Research Centre at the Trent Student Centre.

The Celebration of Community-Based Research event, which has been held annually for nearly 30 years, presented a wide range of research topics with regional impact from 32 community-based research projects.

"This program allows students the opportunity to really undertake this community-engaged research to try to respond to information needs that have been identified within the community," said Ryan Sisson, Trent's community and workplace partnership manager.

Gender studies students Amber Titterton and Julia Beggs researched gaps in the services supporting adolescents with developmental disorders at Five Counties Children's Centre.

"Our research project aims to identify possible life skills or devel-

opmental programs that Five County Children's Centre could offer that would be beneficial for teenagers," Titterton said.

One of the largest unmet needs for teens with developmental disorders was proper sexual education, explained Beggs.

"These teenagers aren't getting the sexual education they deserve. In one study, they found that a lot of teens with developmental disabilities were not using contraceptive when practising sex," Beggs said.

"This can of course lead to  
SEE SEX ED, A2

## Appendix 6

### Suggestions

The following suggestions have been compiled based on both literature and focus group findings.

- A useful resource that can be recommended to parents that was retrieved from the literature review is [\*The Sexuality and Developmental Disability: a guide for parents\*](#). It provides background information on teenagers with disabilities and vulnerabilities in terms of topics surrounding sexuality, and offers strategies to educate these youth (Government of Ontario, 2021).

Link to document:

<https://www.ontario.ca/document/child-and-parent-research-institute-cpri-sexual-behaviors-team-recommended-resources/sexuality-and-developmental-disability-guide-parents#section-0>

- One recommendation was having smaller life-skills programs implemented for youth in collaboration with community partners. Below is a list of suggestions and ideas.
  - Partnering with Trent/Fleming Social Service Worker and Social Work placement students in order to help reduce the strain on staff needed to help run/facilitate/supervise clients. All students in these programs have to have vulnerable sector checks cleared as well as additional training.
    - Help clients 1 - on - 1 with transit, groceries or practicing lifeskills.
    - Host virtual game nights.
    - Plan smaller, similar events to reduce strain on FCCC.

More information:

- <https://www.trentu.ca/socialwork/experience/social-work-opportunities>
- <https://flemingcollege.ca/programs/social-service-worker>
  
- Partnering with [Tiny Greens](#) plant shop / hosting a workshop there. They have an accessible space available for planting parties.
  - <https://www.tinygreens.ca/planting-studio>
  
- Partnering with the Peterborough Public Library (or other government organization) to give youth the opportunity to volunteer with their peers and help with library tasks (like shelving books, shredding paper, reading at story hour).  
Suggestion based on a collaboration between Community Living with the Madawaska Valley Public Library.
  
- Partnering with a local restaurant and creating a take home meal kit for pickup where the meal just has to be assembled by client.