

A Training Report to Use Lifestory Board™ to Address The Met and Unmet Needs of
Vancouver's Homeless/ Street Involved Youth. Developed for the Staff and Board of
Covenant House, Vancouver, BC



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Dedication

I would like to dedicate this work to the memory of Pauline Mary Burnside (1942-2009) who has left an indelible mark on my life and heart. Not only did she ensure a happy childhood for me but taught me the importance of kindness, especially with regards to the psychiatric patients she worked so tirelessly for.

Acknowledgments and Gratitude

Firstly, I am most grateful to my 10-year-old son for his patience, love and support whilst I undertook this journey. There have been many times he has waited quietly for me to appear from my research and encouraged me to keep going when I felt I had reached an impasse. He is the wisest person I know. I am also thankful he has amazing grandparents who have taught me that it really “takes a village to raise a child”.

I am grateful to the staff and board of Vancouver's Covenant House who allowed me to work with the incredible youth they serve. The staff's passion for street involved youth and social justice is apparent as soon as you enter the Drake Street building.

I would also like to thank my thesis project supervisor Dr. Jeannine Carriere who has allowed me to feel safe and supported. I have always felt she is in both "my corner" and this project's "corner". She is an inspiring person – kind, thoughtful, dedicated and passionate. Thank you to Dr. Robina Thomas for also participating on my committee – her enthusiasm for social justice is contagious. Thank you as well to Kevin Van Buskirk for being a member of my committee and making arrangements for my meeting the four youth. I would like to acknowledge Dr. Chase for his wisdom and understanding of the Lifestory Board™.

And most of all I have great appreciation for the four youth who took the time to meet with me and share their incredible stories of courage, struggle and hope. I loved every minute that I met with these four young people. Their gifts will surely continue to teach me long after I have completed my MSW.

Background for Project

Homelessness is in itself a painful existence but when it is imposed upon our city's youngest citizens it turns tragic. If we as a society cannot care for our youngest members then we have failed not only them, but also ourselves. Youth embody the hopes and dreams of a nation's future. Without shelter the tasks of daily living, eating, studying, and working, in essence remaining healthy, become almost impossible. Mental health conditions such as depression and bipolar disorder further complicate the existence of homeless youth. St. Paul's Hospital adolescent psychiatrist and co-founder of the Inner

City Youth Mental Health (ICY) Team Dr. Steve Mathias said the following in a recent Globe and Mail (Mason, G., 2013) article: “This is a chronic issue”. “Only one in 4 kids between 12 and 24 are getting the mental health attention they need and the numbers around that are grim”. He of course is referring to the mortality rates of youth whose mental health conditions go untreated. In the same article Dr. Mathias states that the mortality rates for youth with mental health issues are thirty times higher than those youth without such problems (Mason, 2013, October 8). The met and unmet mental health needs of Vancouver’s homeless youth have influenced the development of this report for the clinical staff of Covenant House (those with MSW’s or counselling degrees), a Vancouver agency that will be described later in this document, which begins with a literature review. By met and unmet mental health needs reference is to accessing mental health services and supports in such a way that satisfies the consumer – homeless youth. For example, how do they interpret seeing mental health clinicians? Do they interpret seeing them when they need them and in a timely manner? In other words, do they feel they are waiting too long to see clinicians or able to see them at all?

Plan for this report

This report is an outcome of a Master of Social Work project for the University of Victoria School of Social Work. In the project the met and unmet mental health needs of homeless youth in Vancouver, utilizing the Lifestory Board™ (LSB™) are examined. For this project four Vancouver homeless/street involved youth struggling to find mental health treatment and who, in addition, are clients of Covenant House are interviewed. The staff there assisted in connecting with these youth.

The Agency

Covenant House purports to be North and Central America's largest privately funded child youth care agency (Covenant House, nd). Its website also reports that:

During this past decade we have seen an explosion in the number of youth presenting with serious mental health and addictions issues. Likewise, we continue to identify an increase in the number of youth who have aged out of foster care (19 years old) and have nowhere to live and no source of income. Homelessness, and a lack of affordable housing, continues to be identified as major concerns by Vancouver residents. (Covenant House, nd).

At the onset of this research, staff at Covenant House described a need to explore how mental health resources are accessed, as this is often a difficult process for youth involved with Covenant House. An example of these challenges is the waiting time (weeks to months) to see a clinician or mental health professional.

A Covenant House staff member has been acting as the community research partner in this research. This feedback has been invaluable, as the agency staff has intimate knowledge as to the mental health needs of Covenant House clients. The usefulness of the LSB™ for Covenant House clinicians with (university degrees) is described below as demonstrated through the voices of four youth who volunteered to participate in exploring LSB™. The results of this youth engagement in the research will inform how staff can access mental health resources on behalf of clients as quickly as possible based on the needs of their clients.



Literature Review- Homeless Youth Met and Unmet Needs

It is important to discuss the numbers with regard to homeless youth as they illustrate the scope of the issue and the number of young people impacted by this growing issue. In North America it is estimated there are as many as 2 million street entrenched youth (Kidd, 2003, p. 235). Furthermore, in the United States 7 percent of youth are thought to be homeless (Heinze, & Hernandez Jozefowicz-Simbeni, 2009, p. 210).

Canada's largest city, Toronto is believed to be inhabited by ten to 20 thousand homeless youth (Carey, 1990; Kelly, 1989 as cited in Kidd, p. 235). It should be noticed that some of these statistics are over a decade old (it was difficult to locate more recent data) and one can only assume the numbers have grown, especially given that a North American recession was declared several years ago. Statistics for Vancouver were a little more

difficult to find; nonetheless, Piper (2009) cites that in 2008, the homeless population in general had doubled to 2,660; youth are believed to make up 21 per cent of Vancouver's homeless (p.iii).

Marginalised groups, including Indigenous youth, girls, lesbian, gay, bisexual, transgendered, youth living with mental illness and those with substance use issues are overrepresented in homeless youth statistics (Millar, 2010, p. iv). "Homeless youth are vulnerable while living in a street environment, with youth experiencing high rates of violence, sexual exploitation, sexually transmitted disease, suicide and pregnancy"(Millar, p. iv). The issue of youth homelessness is especially germane because while youth represent our country's future, homelessness diminishes their potential for human and economic capital.

The lack of research pertaining to homeless youth and mental health in Canada, especially within Vancouver is significant (Millar 2010, p. 15). The one exception is a research report written by Heather Millar, a Simon Fraser University Public Policy master's candidate entitled "Rehousing Vancouver's Street-Involved Youth" (Millar 2010). She indicated that homeless youth are an underserved population especially with regards to housing and mental health services (p. 15). It is obvious additional research in this area is required including a need for more research coupled with the LSB™ method.

There are several US and Australian journal articles focusing on the mental health of street entrenched youth. Several issues were highlighted in the literature. These include the need for outreach programs and vocational programs (Busen & Engebretson, 2007; Ferguson & Xie, 2008). There is a high correlation between trauma histories and youth homeless (Dixon, Funston, Ryan & Wilhelm, 2001), and higher rates of suicidal

ideation (Kidd, 2004), mental health and substance use (French, Reardon & Smith, 2003). Another article by Heinze & Hernandez Jozefowicz-Simbeni (2009) argues that far too many services designed for homeless youth, like homeless shelters, focus on deficits of youth and offer quick fixes, such as brief counselling and bridging programs, rather than enhancing youth strengths and addressing their long-term needs (Acosta & Toro, 2000, as cited in Heinze et al., p.210). For example the youth in this Uvic report expressed that long term horse therapy and dialectic behavior therapy was most beneficial.

It should also be noted that researchers have found direct correlations between homeless youth's suicidal risk and previous trauma histories. "Suicidal ideation and attempts are associated with physical and sexual abuse histories (Molnar, Shade Kral, Booth & Waters, 1998; Yoder, 1999), familial substance abuse (Greene & Ringwalt, 1996), and familial dysfunction (Yodder, 1999, all as cited in Kidd & Carroll, 2007, p. 284).

Australian researchers French et al. (2003) report that international research studies cite mental health as an issue for 14-20 percent of youth (p.529). They also argue that only a small percentage of these youth access mental health resources and that the statistics for homeless youth are even more dire (p. 529). "The barriers and problems inherent in accessing, receiving and completing treatment are likely to be magnified for 'at-risk' youth" (p.530). The barriers for homeless youth include contact with the justice system, substance abuse and self-harm (p.530).

In terms of Canadian research pertaining to the issue of mental health and youth homelessness, McKenzie-Mohr, Coates and McLeod (2011) argue that interventionists working with this population should be trauma informed. More specifically McKenzie-

Mohr et al., advocate for “therapeutic approaches to address the negative effects of trauma; development of community services that adequately respond to the consequences of traumatic life experiences; and socially responsible policies that ensure provision of adequate services and also aim to address root causes of youth homelessness” (p.1).

While these same authors acknowledge frequent trauma histories are recognized by many researchers in this area, a more radical understanding of trauma frameworks is called for. These radical frameworks would be strength-based and focus on promoting active participation of the youth themselves in an effort to address their trauma histories (p. 6). Such radical interventions would include community development, affordable housing policy, recreational opportunities, high quality schools and health services (p. 6).

One of the most startling issues highlighted was the mortality rate cited for this population. In Montreal, Quebec, for example, homeless youth are 11 times more likely to die prematurely than their non-homeless counterparts (Ensign & Ammerman, 2007, p. 366). Furthermore, another Canadian-based researcher argues that the mortality rate for homeless youth in Toronto and Vancouver is as high as 12 to 40 times that of the general population (Kidd, 2004, p.31). Most of these deaths can be attributed to suicide, issues associated with mental illness, drug use, survival sex and other high-risk behaviours (Molnar, Shade, Krahl, Booth & Waters, as cited in Slesnick, Prestopnik, Meyers & Glassman, 2007, p. 128). It is fair to conclude that youth homelessness is a life versus death issue.

The Context

Furthermore, homelessness has become a pandemic in Vancouver, Canada’s third largest city. It is impossible to drive through the streets of Vancouver’s poorest postal

code, the downtown eastside, without seeing hundreds of homeless persons gathered together waiting for food and shelter. Frequently, they are unable to find either. One group, which is overrepresented within homeless statistics, is youth. They are indeed amid the most disregarded persons in North America. Furthermore, street involved and runaway youth are among the “highest risk, most difficult to access, and least understood populations” (Whitbeck, Johnson, Hoyt & Cause, as cited in Busen & Engebretson, 2007, p. 568). It is proposed here that their marginalisation and subsequent homelessness/street involvement are directly linked to their unmet needs, specifically their access to mental health resources. This report outlines 10 key areas:

- 1) An identification of the met and unmet mental health needs of Vancouver’s homeless youth in relation to the agency for whom this report was designed,
- 2) A literature review of articles addressing the needs of homeless youth,
- 3) A description the research design with a focus on the chosen method of narrative analysis,
- 4) A rationale for a narrative approach
- 5) A discussion of how this research might be evaluated, and
- 6) An analysis of the strengths and limitations of the methodology
- 7) The youth’s social locations;
- 8) How homelessness/ street involvement impacts their met and unmet mental health needs: how are their mental health needs being met?
- 9) Homelessness/street involvement histories and finally
- 10) Youth’s impressions of LSB™, and recommendations.

Before beginning I would like to outline my research design in relation to the agency I carried out my project with. Particularly, I interviewed 4 youth at Covenant House and the methodology for working with these participants was influenced in narrative theory. In terms of a method the LSB™ was utilised, which will be detailed later on in this report.



Location of the Researcher

Although I undoubtedly tried to remain as self-reflexive as possible throughout my research, I cannot deny that I am a middle class, university-educated, heterosexual woman who has never lived the reality of homelessness. Although I am of mixed race, I often pass for white and so some of the participants undoubtedly interpreted the ‘intersectionality’ of my location as privileged. In addition, the privileges associated with my intersecting location undoubtedly affect my worldview and hence my judgment of my participants. I was, however, struck by the following quote from a Toronto-based researcher working with homeless youth; he writes: “as I interacted with people who bear labels such as addict and prostitute, I began to realise the vast extent of the social problem that has put these young people on the street” (Kidd, 2004, p. 36). He continues

that throughout the project he learned to focus his energy more and more on advocacy for these young people (p.36). I too hope to further develop such an understanding.

Method

To further develop such an understanding the method used to gather information from the youth of this project was the LSB™, a board game originally designed to engage young people with opening up about past events in their lives. The LSB™ Toolkit includes “element” sets for many breadths of experience: relationships; events; activities; health; family, cultural, and environmental effects; as well as feelings, questions, dreams, problems, goals, risks and resources.

With this set of components, the LSB™ allows for the representation of intricate narratives. However, it’s also effectual with only a subset of the magnets used in a session; for example, to reveal the important people in the storyteller’s life, and the a characterisation of these relations.

The guide chooses which elements to use in a session based on features like the client’s age, the setting and purpose of the session, therapeutic modality, and personal style. Elements can be introduced in a methodical directive way, or more spontaneously in response to the narrative as it unfolds. Please see Appendix A, the LSB™ manual.

Specifically this report utilises the game with regards to how homelessness/ street involvement is impacting this project’s participants’ mental health. Although the game was originally employed to examine the traumatic experiences of refugee youth it can be played with a variety of populations. The purpose of the board is to externalise not internalise past, present and future life events. Findings were used to outline how Covenant House staff can best utilise the LSB™ as a narrative tool; these will be

addressed later on in this report. The directors of Covenant House are specifically interested in how the LSB™ can be used by staff with the homeless youth (many of whom live with complex histories and mental health needs) its' agency serves. The goals of research to develop this report included the identification of how homeless youth can be assisted to access Vancouver mental health resources as expediently as possible. The report also incorporates the stories of the youth, who are identified by pseudonyms and their stories are connected to the usefulness of the LSB™ as a therapeutic tool. The goal of this tool is to remain mindful of how youth's met and unmet mental health needs are identified. The rationale for this research is that these youth represent some of the most marginalised and oppressed persons in our country and continent.

Methodology - Narrative Approach

Four participants whom identified with past or present mental health contact were voluntarily recruited by Covenant House staff for the research supporting this report. A narrative approach was used in the research design. Narrative analysis has roots in phenomenology (Ricoeur, 1991), but its applications “now extend beyond lived experience [characteristic of phenomenology], and ‘worlds ‘beyond’ the author” (as cited in Riessman & Quinney, 2005, p. 392). “A central area of narrative study is the human interaction in relationships – the daily stuff of social work” (p. 392).

Narrative interviews are often rich with data and hence take time to conduct, transcribe, interpret and analyze. Riessman and Quinney (2005) state “narrative research analyses the extended account, rather than fragmenting it into thematic categories” (p. 395). The analysis was comprised of a ‘fine-grain’ line-by-line analysis. The ‘words’ of participants were used as much as possible to ensure their stories were told from their

perspectives (Thomas, 2000, p. 29). Participants were asked to review transcriptions of their stories throughout the project as well as reviewing the completed analysis (Thomas, p. 28).

Confidentiality was secured as well as formal consent. Pseudonyms were used throughout the project to protect participants' confidentiality as they likely hope to leave the streets one day and obtain formal employment without the judgment of their histories by future employers. The participants came up with pseudonyms on their own at the beginning of the project when the writer explained confidentiality is a paramount principle of this research.

Ethics

The popularity of narrative analysis may prove to be an ethical issue as it has come to mean “anything and everything” (Reissman, 2005, p. 395). There is a difference between narrative research and analysis and telling your story to friends. In narrative research data is analysed and coded for themes. This is why gaining the trust of participants, transparency with regards to the researcher's location, research motivations and relationship building have been key factors in this research project. In addition, participants and researcher were unknown to each other at the start of the project. Power over participants was partially mitigated by working with competent youth who were not using substances on the day of the research and those who were mentally stable (not actively suicidal or psychotic). Furthermore youth who are clean and sober whilst meeting with the researcher are less emotionally vulnerable to the questioning of the researcher and more able to set boundaries regarding persons or issues they do and do not want to address – hence allowing for some self-determination.

Ethically speaking, a certificate of approval was obtained through the University of Victoria's Human Research Ethics Board. A certificate of approval can be found in Appendix B. Training in the LSB™ method was obtained during this time. Questions for youth were vetted with the Ethics Board and with the LSB™ creator. Questions can be found in Appendix C. Once the Ethics Board approved this research, the project began through youth recruitment. The rationale of the project: to seek input on the met and unmet mental health needs of homeless youth, as well as the usefulness of the LSB™ was shared with participants. Consent forms were signed and explained in detail indicating youth could withdraw at any time throughout the project. A copy of the consent form is in Appendix D. The youth were required (due to the sharing of their stories of homelessness and substance use etc.), at times, to be vulnerable which was respected and honoured by validating their stories and ensuring them that they were safe; this also required being available to them after the project was finished and/or suggesting they connect with a therapist to continue to process their stories after data was compiled. Furthermore, a Covenant House director suggested that if participants appeared, in anyway, re-traumatised during research, this was to be shared with staff immediately. It was also agreed upon that the participants and the researcher would check in and out with a youth worker after meeting with the researcher. Furthermore after each interview/meeting participants were asked, if they were alright with continuing to share or if they need a break? Leaving the project, if the process became too much for them emotionally, was always a transparent option for them. (Two safeguards, which are built in to the game, were utilised – the secret cards and the containment zone, which will be described in, further detail below).

For example, if a participant started showing any signs of sadness, tears, anger, internalising etc. this was to be reported to a youth worker immediately. Although it could not be guaranteed that participants would not experience some form of emotion, the LSB™ method was chosen because it is a much less intrusive and arguably a more creative method than a survey or traditional interview (Chase, Mignone & Diffey, 2010, p. 146). In fact, the LSB™ began as an assessment tool for a child and mental health intervention (Chase, et. al. p. 146). Chase et. al. report the following of their tool: “as internal memories, cognitions, and feelings are given a pictorial representation, emotionally charged material elements are externalised, allowing cognitive distance and relief” (p.147).

The researcher asked self-reflective questions too, for example are these stories becoming emotionally heavy for you to bear? Do you need a break? Do you need to practice some self-care now? In part these questions of self by the researcher were designed for self-care, but most importantly to protect the youth from further traumatization.

A Brief Description of How the Research Might be Evaluated or Assessed

This research project will be evaluated by both, the youth who access its programs, and the staff who work at Covenant House. Furthermore, concerning the evaluation of narrative research, an important distinction between it and other qualitative approaches such as grounded theory and critical discourse analysis is important as narrative places emphasis on the meaning of language (Riessman, p. 394). Riessman explains “analysis in narrative interrogates language – *how* and *why* events are storied, not simply the content to which language refers” (p. 394). When someone decides to tell

a story she chooses to focus on specific events and organise them in particular ways, depending on factors such as the perceived audience (p. 394). And depending on what questions are asked – there is always the fear that we will only get the answers to the questions we ask. And if we ask the wrong questions without intending to do so? Signs of trauma and emotionality were sought and referrals to after counselling were paramount. So evaluators may choose to examine how language is used in this project and whose voices are highlighted? In addition, they may also choose to look at the ways in which participants and the topic was approached from an anti-oppressive framework. Are participants’ experiences of marginalisation presented as transparent? Are the power imbalances many of these youth have lived with for most of their lives discussed in detail? Stakeholders such as the staff and board of Covenant House may also ask if reflective-work around assumptions about homeless youth was done? They may ask, was the researcher transparent in the writing of the project with regards to initial biases towards this population? Was the researcher transparent with the youth with regards to her intersecting location and the privilege it has provided, especially in contrast to street youth who have often lived very marginalised lives? And finally, is the LSB™ an effective tool, especially pertaining to this population? A journal was kept throughout this project, which reflected these questions.

Riessman (2002) makes the important argument that in narrative analysis attention is placed in the forms of storytelling not just content; in other words, “why was the story” told in the manner it was (p. 218)? Some future readers may question why a narrative approach was chosen – a narrative methodology allowed participants, who have been already traumatised by their families of origin and by the streets themselves, to

design the telling of their own stories.

Limitations

With regards to the limitations of narrative methodology, self-reflexivity and openness were important as the researcher was the person interpreting the data generously provided by the participants. Riessman (2002) points out that both talking and listening result in the joint production of a narrative (p. 221). Listening then can be seen as action and inaction, as it led to the way stories were shared by participants and interpreted by the researcher.

Another limitation of the study's design is its length. Because a project was chosen the researcher was limited to 50-or so pages, which means only 4 participants were interviewed whom were all found at one agency – Covenant House. It is acknowledged that youth who do not access shelter services may have been missed. Stakeholders such as shelter staff or mental health clinicians were also not interviewed and this too may limit research data.

LSB™ Background

The LSB™ began as a test project by Dr. Robert Chase as a tool to interview children from war affected areas such as Sri Lanka (Medina-Muñoz, 2014, p. 15). The purpose of the game was not to elicit trauma but to find a 'gentle method' to work with these children and interview them about life events without eliciting more trauma in their lives. One of the strongest aspects of the game is its externalisation of painful events.

Elements of the client's past, present and future are depicted on the LSB™ and shared with the therapist as well as viewed by the client/participant. This visual picture of the client's lifestory opens up dialogue between the therapist/ researcher and participant

allowing for the participants to externalise life events and reflect on them as such. The layers on the LSB™ are developed through the therapy session by formation of the client’s lifescape” (Medina-Muñoz, 2014, p.15).

Many participants in social work research and clients of social work clinicians become involved in this work because of their trauma histories and tools, which seek to avoid further marginalization, are paramount. Externalising rather than internalising is key to a successful therapeutic interaction (Medina-Muñoz, 2014, p.15). In figure 1 the dialogical relationship between the therapist and client is depicted. The inner world of the client can be seen in the yellow portion of the diagram but it is mitigated or externalised in the green zone. The participant then does not keep past events locked up inside herself but rather ‘extensionalises’ these events painful or otherwise.

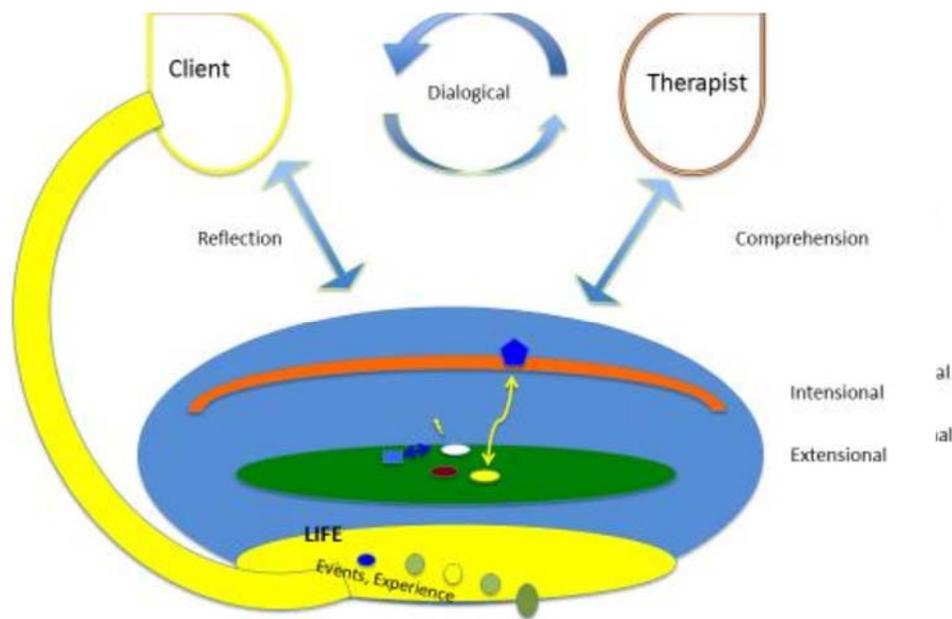


Figure 1. Conceptual Framework Interaction in Therapy with LSB™. (Chase, 2013)

Method: Life Story Boards™ Literature Reviewed

The LSB™ was used to complement the narrative approach. The LSB™ is an

interview tool, created by Robert M. Chase, a physician and professor at the University of Manitoba. This tool fits nicely with the narrative methodology utilised during research. This will be explained further in the next few paragraphs.

The LSB™ “is a pictorial, tactile interviewing activity using a game mat and set of markers and cards designed for older children and adults” (Chase, 2008, p. 1). In a subsequent article Chase, Fernanda Medina & Mignone (2012) write that the LSB™ serves as a “platform” to depict personal narrative information as well as facilitating verbal and nonverbal approaches in assessment and therapy (p.183). The narrative approach “provides questions that can be used to help tell their stories, typically moving from childhood to adulthood” (p 124). Tools such as spiritual histories, life maps, genograms, eco-maps and eco-grams are all discussed and meant to elicit responses from participants in a non-obtrusive manner, while remaining mindful of Indigenous cultural values, such as family, spirituality and connection to all living beings (p. Chase et al., 2012, p.25).

Furthermore, the fluid interview process of LSB™ more freely follows a narrative than conventional questionnaires or verbal interviews by themselves and as such there is “greater adaptability and comfort cross-culturally and with low literacy” (Chase, 2008, p. 1). In a 2010 article (the third Chase article looked at) “Life Story Board™: A Tool in the Prevention of Domestic Violence” Chase, Mignone & Diffey point out that the LSB™ can be viewed as a qualitative alternative to verbal interviews and focus groups (p. 150). The LSB™ can feel less intrusive to the youth who are interviewed. It can be used as an ‘icebreaker’ and a way to slowly build trust and rapport with participants. They are the storytellers. They are the authors of their own life stories, not the researcher.

Taken further, the LSB™ can be a tool of empowerment.

Youth can present as guarded with adults even when raised in ideal and nurturing families. Chase, Fernanda Medina & Mignone (2012) state that LSB™ may be particularly valuable early on in a therapeutic/research relationship as it allows the researcher(s) to establish trust in a fun nonthreatening way (p. 184). Young participants involved in the Chase, Fernanda Medina & Mignone's study on the LSB™ state that the LSB™ assisted them in sharing sensitive and personal information without re-traumatising participants (p. 194). Because the LSB™ is a visual narrative designed by the participant on the board and outside of them it can prove to be quite therapeutic as it encourages him or her to externalise rather than internalise traumatic events he or she has experienced. Often when one has been traumatised, as many street youth have, he or she can get caught up in patterns of self-blame. The LSB™ encourages one to look at some of the external causes for past and present traumas. Chase writes: “a significant event or traumatic event could be disclosed, without words, by placing a marker on a card. The act ‘externalises’ the cognition, memory or feeling...”(p.9).

In “A Native American Perspective on Spiritual Assessment: The Strengths and Limitations of a Complementary Set of Assessment Tools” (2010) researchers Hodge and Limb outline several methods to conduct spiritual assessments with Indigenous North American clients. The study uses a sample of recognised experts in Indigenous culture to access these tools. Many homeless youth are of Indigenous heritage (Millar, 2010, p. iv). In fact one of the youth interviewed for this report was indeed of Indigenous heritage. Indigenous culture and spirituality along with a shared history of oppression – are all paramount to an Indigenous identity (Hodge & Limb, p. 122). Understanding the

spirituality and identity of participants is key to a narrative methodology.

Brott (2005) does not directly look at the LSB™, but she does speak to the importance of co-constructing a life story with clients/participants and outlines the importance of participants directing their own life stories whether, past, present or future (p. 183). Like the LSB™, visually tracing one's life roles and connecting them to significant events in one's life is empowering. The therapist or researcher then works with the client/participant to deconstruct the stories they have outlined/drawn on paper and make meaning of them (p. 144). Similar to the LSB™, participants become the narrators of their life stories and the designers of their future lives. Planning one's future, while understanding one's past, can be viewed as an act of hope. And hope is integral to a life well lived.

Training in the LSB™ Method

Training began before the research for this project started. Dr. Chase spent three sessions with the researcher teaching her how to best utilise this game for this project. The researcher was also provided with a LSB™ manual and reading material before the hands on training began. By the time Dr. Chase completed the training session this researcher felt quite confident to work with the participants of this game using the LSB™ method. As mentioned in a subsequent section training in this method is vital.

How the Board works

Figure 2 represents a blank board before any markers have been placed and essentially before the therapeutic/ or research session has really begun. The yellow zone is where one would place pieces/ cards related to the storyteller's life – in essence his or her inner world of thoughts and feelings. The green zone is where one would place

elements relating to his or her family and friends. The blue zone represents the community and larger systems. And finally the red arch is the time line and begins sequentially with birth and early life related cards being placed there and the middle represents present events. Finally the end of the arch represents future events.

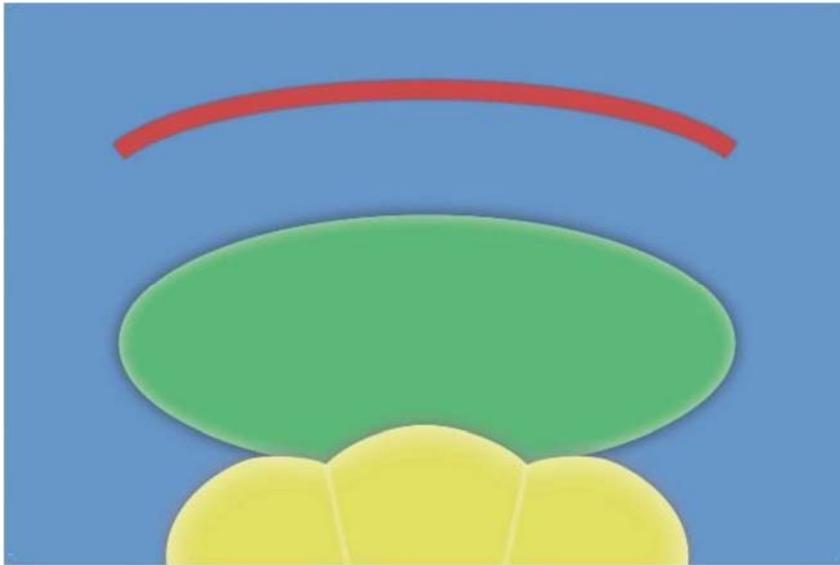


Figure 2. Blank LSB™ (Chase, 2013).

The “Hollow Zone” was placed in the corner of the board and this is where participants placed pieces, which represented their hopes (see figure 3). For example one of the participants was hoping to find housing. So a house/ or a “dwelling card” was placed in the zone. Or another participants wished for a “happy life” so we place a card representing this in the zone.

ZONE CARDS

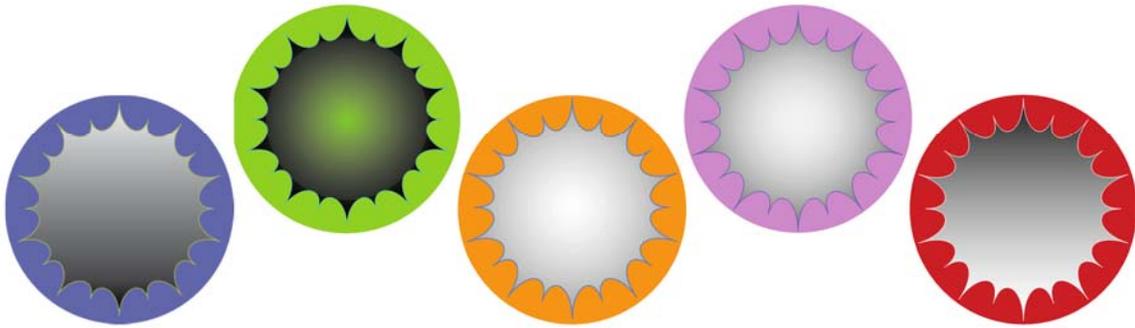


Figure 3. The LSB™ zone cards (Chase, 2013).

The purple card above shows the area on the board where a participant can place pieces representing people or events he or she wants safety from. This is the safety zone. For example an abusive parent’s card can be placed here. The other zone cards may be used as hollow or wish zones where the participant can place “things” they hope for – employment, housing, a dog etc.

Figure 4 depicts a LSB™ kit. Although it looks complex the therapist or researcher need not use all the pieces shown here. For example, the researcher of this project used primarily the white pieces pictured near the right side of figure 4 which were meant to represent houses. As this was a thesis, which primarily addressed street involvement and mental health the house pieces were used quite frequently, even to depict where participants had lived before becoming homeless.



Figure 4 The LSB™ tool kit placed on top of the board. (Chase, 2013).

Other pieces, which were utilised quite frequently in this project, were person cards (Please see figure 5). They come in four shapes and colours. Ovals are used for groups/ social networks, for example a therapy group. Circles present females and squares represent males. The triangle is meant to assign an LGBT identity as defined by the participants. Colours for this shape are assigned as the game is played, but generally red shapes depict the player and his or her family/ close ones.

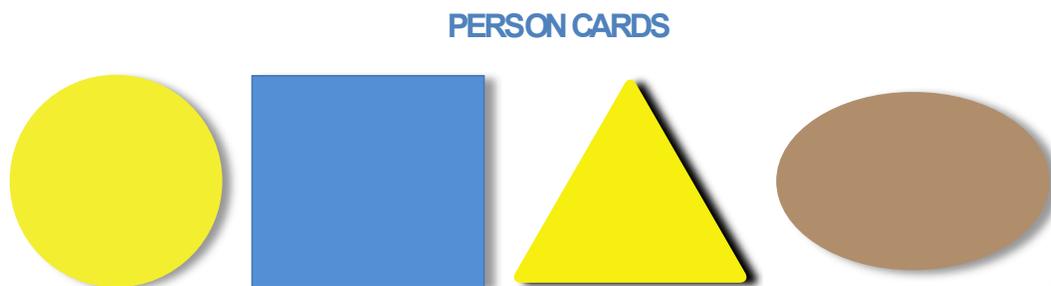


Figure 5. Person cards (Chase, 2013).

Event cards are also used in the game and placed on the board (See figure 6). Event cards come in four colours and mirror the overall outline of the board: yellow for personal, green for family, blue for the larger community and brown for natural events, e.g. an earthquake. Event cards are typically placed just above the timeline. Dates and brief descriptions and significance to the participant are also written in felt marker on the card if possible.

EVENT CARDS

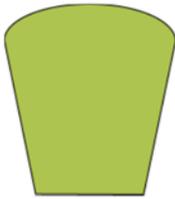


Figure 6. Event Card (Chase, 2013).

Act cards like event cards come in four different colours (See figure7). Yellow represents the participant, green the family, blue the community and brown outside the person: family and community. These too are placed on the board above the red time line.

ACT CARDS

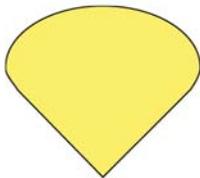


Figure 7. Act Cards (Chase, 2013).

remember it”.

A larger safety/ containment zone card is placed on the board. Within the safety zone they can (and did) set any person or place or event that is too uncomfortable for them to discuss. In other words, the safety zone represents what the storyteller (the youth) want safety from. For example, if they begin speaking of abuse by an estranged parent and signs of trauma/ emotion become evident or if they indicate that this is too painful directly the worker can ask if they wish to place that parent’s card in the safety zone and by placing the card in this area they share they are not ready, currently, to revisit the topic. An outline of how these cards work with the youth is important to explain at the first meeting. At that time they were given a brochure and showed the consent form, which they took home to think about, and were encouraged to come back with any questions. This took about 30 minutes and hence was the first meeting. During the second meeting, the youth signed the consent form, and asked any further questions. Again attention was drawn to the safety zone and the secret cards. A list of the research questions were also reviewed at this time. In terms of transferring the game to a more clinical context – the worker/ therapist may be sage to meet with a youth first explain the board and then agree to meet again at a later date. This would provide for participants to digest the newness of the game.

Once more, if any evidence of re-lived trauma comes up participants should be referred to support services to protect participants from any harm. Lastly, participants should be informed of the therapists/ researchers intention to veer away from re-traumatisation.



The Voices of the Youth...

The social locations of the four youth

1. Echo:

Echo chose the triangle symbol from the LSB™ to self-identify. The triangle per the LSB™ manual represents an individual who chooses a non-specific gender identify. Echo is 22-years-old and primarily of Indigenous heritage from the Port Hardy area of Vancouver Island. Echo chose to identify, as a street involved youth as opposed to the homeless, as s/he states even if s/he is living under a bridge (as s/he has from time to time) this is still her/ his home.

Echo's family growing up, until the age of approximately 14, consisted of herself/ himself, two sisters and two brothers and her/ his mother. S/he mentioned her/his father

but was quick to place him in the ‘safety zone’ stating he was and remains a “dick”. He did not treat Echo as part of the family – primarily due to being gay and maintaining an ambiguous gender. Echo also maintains that homophobia on the reserve and within Indigenous communities is rampant. S/he reports growing up with a poor self-esteem as a result. “I also grew up being ashamed of being Native and the residential school history in my family – I had to carry all that around; I felt like I was ‘a dirty Indian’”.

Echo has been street involved on-and-off for 8 years. S/he lived with foster families beginning at age 14. S/he returned back to her/ his family of origin several times but left two more times either to a subsequent foster home or for the streets. S/he explained that living in a 3 bedroom place with 5 other people in addition to feeling ostracised for being gay were her/his primary reasons for leaving her/his mother’s home, situated on a reservation on the north part of Vancouver Island. S/he described the home as being neglected by the federal government and spoke of black mould growing in the home – known but ignored by federal agents. S/he reports that her/his asthma went into remission as soon as s/he left the reservation.

Echo speaks fondly of one foster family in particular, however. S/he lived with Paul and Kate from ages 16-17. “We got along really well but then we started fighting like siblings, so I left,” s/he reported. S/he still keeps in touch with the foster father believing him to be a “good guy”. Echo has engaged in sex trade work again on-an-off for six years but stopped this. S/he spoke of making hundreds of dollars a day and spent most of her/his earnings on crack cocaine. Echo is glad s/he’s out of the sex trade; states s/he had fun when s/he was doing it. “But the amount of stuff I’ve seen – someone being shot, stabbed, people being dragged by cars; some johns were nice – someone took us to

Kamloops; just wanted friends,” s/he shared. “There were fun times but horrible times too; I worked for a pimp and as a kind of pimp”, s/he stated.

S/he left when it wasn't fun anymore; s/he felt too old. “ It was tiring: I did it from 14-20 years old for 14-16 hours a day”. Soliciting also became harder with the popularity of the Internet – it became more dangerous; s/he reports you can't judge someone over the Internet. S/he was arrested twice for solicitation and served 90 days.

Despite her/his history Echo was able to graduate from grade 12 – something of which s/he is quite proud. Echo even shared that her/his social workers at the time were very pleased and threw an impromptu party for her/ him presenting her/ him with a book which all the workers in the office signed.

2. Alex:

Alex is a 21-year-old male who identifies as Caucasian, gay and street involved. He was raised primarily in Comox, British Columbia with his mom, his brother and his sister. His mom has supported the family by working at a Tim Horton's coffee shop for 20 years. He reported his family “just got by” financially. He too, like Echo, chose to put his biological father in the safety zone of the LSB™.

Alex has been homeless for approximately 8 months. He does not object to being referred to as homeless stating he is very motivated to move on from this location, however. He attributes his drug use to his subsequent homelessness – telling he went to detox almost two years ago and made a promise to his mom he would stop using after he returned to her home. He unfortunately began using again and his mom asked him to leave. Alex stated: “My mom said get yourself a job, don't slip up – but I did”. Despite his separation from his mom and his drug use he still describes his relationship with his

mom as strong and supportive. Alex still speaks to his mom on the phone regularly and he states she is pleased he is getting involved in peer support work.

Alex moved to Vancouver from Comox. Initially he stayed with an ex-partner but following the breakup of this relationship he found himself homeless. Part of the reason for the breakdown of this relationship was his ex's frequent crystal methamphetamine use (crystal meth). Alex describes being in this relationship with this partner on-and-off for five years. He too (like Echo) chose to place his ex in the safety zone. He states that he is quite angry at his ex as he has lied a lot. It was his ex-partner who first introduced him to Covenant House for which he is grateful. He has been living in single resident occupancy (SRO) for three months but reports he is still somewhat homeless as a SRO is not a home but one step away from the streets.

Alex has lived with substance use for approximately 10 years. "Substance use definitely has been big issue in my life", he shared. Now he uses crystal meth once to twice a month; he cites stress and money as big triggers for his use. When asked, Alex stated that it was his own curiosity, which began his journey with substance use. He started with marijuana at age 12, graduated to ecstasy and alcohol at about 14. Then at 15 he transitioned to cocaine. About 8 months ago he started crystal meth but says his use has declined drastically in the last few months. He says because he is "sick of being stuck in the same place." He has limited his use to twice a month; in part because he has experienced drug-induced psychosis on a few occasions and tries to avoid it now.

Alex also spoke of growing up gay in Comox. He stated that the locals are "pretty red neck" but he "left them alone and they left me alone". He shared the hardest part of locating as LGBT was coming out to his dad and his brother – they reacted to it a bit

“hard at first”. But have since come around, at least his brother has. He stated his mom and sister already “knew” he was gay so he did not feel rejected. He also stated that the friends he surrounded himself with were female and didn’t seem to bother. Alex dropped out of school in grade 10, citing his marijuana use and his depression as reasons.

3. Anne

The third youth was Anne. Anne is a 22-year-old woman, of Caucasian heritage, identifies as heterosexual, and grew up in Alberta in the country. She was raised in a large family with her mom and dad, five brothers and a sister. She describes her upbringing as happy and middle class. She now describes herself as street involved but not homeless. She first moved out at 17.5. She stayed with a friend, she then went home to her parents and moved out again and stayed with another friend and subsequently met her third boyfriend.

She describes her feelings at the time in the following: “I couldn’t stand being at home; everyone was so busy and I snuck out without anyone noticing: I wanted to explore the world; I had big dreams and big goals and wanted them too fast for them to happen so my big dreams brought me to homelessness”. She was street involved and or homeless in Calgary for four years. At about 18 she describes being placed into the care of Alberta’s equivalent of the Ministry of Children. She stated that the ministry was alerted to her as she had reported several cases of sexual assault to the Calgary police. A social worker sent her to a drug treatment facility for five days due to her recreational drug use. “I was the only good one there”, she stated, as she had never been addicted to any street drug only using them recreationally. She then moved to Vancouver 1 year ago and again found herself without anywhere to stay. She explained sleeping on the street

for a few nights, accessing a Covenant House shelter. She shared that when she first came here her intention was to stay near her brother who lived on Vancouver Island. “I didn’t know that there was a difference between Vancouver Island and Vancouver at the time – I didn’t know you had to take a ferry back then”, she laughed.

Anne too has not completed grade 12. She left school in grade 10 she explained. She however does have plans to finish and would like to go to art school or do hair design. She also shared that her grandfather owns a gas company and is willing to help her pay for future schooling. She absolutely loves making art. In fact the picture she drew of herself on the LSB™ was an anime character. She shared having “accidentally” applied for art school in Vancouver, being accepted but because she does not have her grade 12 she had to decline.

Anne has been in the current relationship with her now fiancée Emanuel since November 2013. Emanuel is of mixed race heritage – Filipino, Fijian and Latin American. She met him at a park in the Downtown Eastside. She shared that their shared belief in Christianity brought them together. She was 3 months pregnant when she participated in this project at the end of October 2014. She revealed that she and Emanuel did not plan this pregnancy but were happily surprised to be expecting a child.

4. Lucy

The fourth and final youth is Lucy; she was brought up in the Okanagan region and left home at approximately 17 years old. Home consisted of herself, her mom and her stepfather. She describes her mom as descending from Hungarian Gypsies and her biological father from Celtic witches. Other than this she never mentioned her father again during this project. She reports that she had to raise herself growing up. She reports

not feeling connected to her family of origin.

Lucy began a yearlong relationship with a man 5 years older than herself when she left her parent's home. She was 17-years-old at the time. "I left because I don't feel connected to them". She argued with her parents a lot, especially her mom before she moved out. She described her mom as having a lot of issues with negativity. "She is still finding out who she is", told Lucy. "She gets upset with small things – like when we don't follow the plan for the day; she gets gratification from completing goals and I'm not like that". She continued stating that her mom can appear "unbalanced" and "smothering". She stated due to her relationship with her mom she never learned to make and care for friends until recently; she shared she had a hard time talking to people: Buddhism though has helped her with this she stated. "I really like Buddhism: respecting earth, being peaceful".

She now believes that she was only in the year long-plus relationship because she had to be. In other words, it was a relationship that served a single purpose – to help her transition from her parent's home to an adult life where she lives on her own. She reports that her relationship was not abusive nor was it nurturing or a meeting of two people with common interests and goals. She first lived with George in a house in the Okanagan and moved later as George was dealing drugs and had to escape some associates. "She explained: "He was dealing drugs and someone burned down the house so we had to getaway". She describes herself as having to move to a little green house in the forest near Clearwater to hide. Lucy shared she was scared when she left her boyfriend: "It was scary when I left him; I worried I would have no attachments". Still she found the courage to leave. She then began her travelling phase – moving to Vancouver for a short

bit then to Horseshoe Bay and then Maine Island where she stayed at a Buddhist sanctuary.

How Homelessness/ Street Involvement Impacts their Met and Unmet Mental

Health Needs: How are Their Mental Health Needs Being Met

1. Echo:

Echo describes herself/ himself as having been traumatised and re-traumatised many times throughout her/his life. S/he spoke of now working hard towards developing boundaries – a symptom s/he states having because of working in the sex trade.

In terms of organised ‘professional’ therapies Echo reports one of the only interventions that has helped her/ him is horse therapy. Through Victim Services, a police sponsored program, s/he is in receipt of one year (attending weekly) of horse therapy. Her/ his horse’s name is Daisy and her trainer is Daphne. S/he glowed when s/he spoke of how this program is helping her/him. Daisy has helped Echo’s confidence s/he shared. Daphne has noticed a real shift in her/ him, Echo stated. In addition, because human relationships with horses are built on empathy, feeling another’s feelings, a horse is great therapy for traumatised persons s/he states. “The horse mirrors me if I am feeling anxious, scared or even calm”, s/he shared. “[Daphne] has noticed that my confidence has improved since I started working with [Daisy]”. Daisy is also helping Echo’s anxiety – and s/he’s becoming more assertive with the horse. S/he shared that boundaries are difficult for those who have worked in the sex trade. Working with Daisy has also assisted Echo in dealing with her/his ex-partner. The therapy helps her/him put everything in the past.

Informally, Echo also reports creative writing as helping her/him heal. S/he states: “I am lucky, street kids don’t usually have one thing they like like I do and if they do it’s usually taken away from them,” s/he shared. Echo’s goal is to have her/ his poetry published.

Echo also shared that the Directions Program, a drop-in available to street involved youth is really working for her/him. In addition, s/he shared that Directions is open to youth 24/ 7 and that s/he appreciates its low barrier policy. “They basically saved my life – if Directions wasn’t around I would have passed out in a back alley and died,” s/he shared. S/he stated s/he was drinking heavily 5 years ago and was close to death. Directions workers helped her/him get into detox and s/he has not drank since.

It is here where Echo reports being able to get the support s/he needs. S/he reports the check-ins and checkouts with youth workers are keeping her/him stable. Echo states that although the workers are paraprofessionals their influence in her/his life is irreplaceable. They help her/ him process her/ his feelings and support her/him as s/he works through her/his crystal meth use. Echo uses once to twice a week but is firmly situated in a harm reduction perspective. Echo uses smaller amounts than s/he use to and only uses with people s/he feels safe with.

Echo has seen a psychiatrist and reports being diagnosed with PTSD and major depressive disorder. Echo no longer sees him anymore telling me that the psychiatrist “up and left one day” leaving her/ him to sort through her/ his mental health issues on her/ his own. S/he also feels that the psychiatrist “pushed” medication on her/him. Echo spoke of taking a medication prescribed for PTSD symptoms but says s/he didn’t like it as it made her/him tired all of the time. Echo shared last seeing a psychiatrist 3 years ago. S/he has

met several street nurses however that s/he has found very helpful. Echo spoke of one nurse in particular who dedicatedly helped when he was sick to come up with a working diagnosis. Unfortunately s/he has noticed there are less street nurses around in the last two years.

Echo also sees a substance use therapist through a Directions/ Nexus (a substance use program for youth located in Vancouver) partnership. In addition, s/he attends substance use drop-ins. As stated above Echo used crack cocaine for a number of years and has tried heroin a few times, but it was mixed with fentanyl and hence s/he now avoids it. Crack made her/ him feel confident. “I acted like a princess on it but really I was just a flayer” s/he shared and demonstrated by moving her/ his arms around. Echo has however graduated to crystal meth and uses 1 to 2 points at a time.

2. Alex

Alex has been enrolled in a Dialectic Behaviour Therapy program at the Covenant House Pender Street location for about six weeks. The program lasts for approximately one year and focuses on coping skill development and reframing patterns of behaviour and thinking that can be maladaptive such as suicidal thinking and cutting behaviours. “Feels good I’m finally dealing with stuff; I learned with substance use that I was self-medicating”, he stated. “I had the gist that these were going on for me (cutting, depression, suicidal thoughts) but the therapy is helping me deal with them”. The therapist who runs the program is female and there are three other people attending the group with Alex. “It’s nice to be with people who have been down the same road”, he stated. “All of us are pretty emotional – it is good though because we understand each other”. Alex also stated he can go from 0-100 emotionally quite quickly (not towards

anger but towards sadness) but the group is helping with this. He has also been learning mindfulness techniques such as deep breathing in his DBT group.

Alex sees a psychiatrist once a month through the Inner City Youth mental health team led by Dr. Mathias who was mentioned at the beginning of this report. He states really liking the program and being helped by both a psychiatrist and a case manager with a social work background. He reports calling his case manager whenever he needs help with resources, so he meets him for coffee and a chat about twice a month, sometimes more if he has additional questions. Alex was diagnosed with PTSD and major depressive disorder (MDD) this year by the ICY team. He states his feelings were mixed about being diagnosed, as he knew on some level these things were going on for him. He has engaged in self-harming behaviours in the past and shared that one time he cut himself quite badly. He is now being prescribed the antidepressant sertraline 150 mg daily and he was on sleep medications but he didn't like them. He also made it clear that he won't try Ativan for anxiety, as it is so addictive. When asked how having the support makes him feel he replied: "It makes me feel good; I'm in a better place; it's been going on (feeling better) for a couple months; when I was homeless I had suicidal thoughts; what I was before; never been put in a situation – fact of not having many friends; nowhere to go".

He continued of having the support: "ICY is really cool – it brings

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Alex

youth off the street and gets them housing and gets them geared towards work”. In addition, Alex states that his training in peer support is really helping him. “I am thinking of doing my practicum at Directions because I like its harm reduction approach”, he stated. He also appreciates that he can meet his practical needs such as getting a meal at Directions and Covenant House.

Alex has been finding ways to meet his own mental health needs as well. He accounts that he walks, reads, journal writes, does word searches and makes music to cope with his stressors.

3. Anne

Anne reports being referred to a psychiatrist by child protective services when she reported her sexual assault. “I saw one once in Alberta – but he thought I was perfectly normal”, she stated. “I heal quickly and I forgive fast”. She had some suicidal thoughts connected with a brief reactive depression at age 19. But they passed in a matter of weeks.

When Anne was asked if she feels supported now she reports she does. For her maintaining her Christian faith helps her most. She spoke of her faith in terms of beauty and peace. She states that her Christian church and its members in New Westminster are providing her with a safe place to process her feelings. She also reports that the Covenant House staff is also meeting her needs. But believes herself to be “solo” when it comes to her feelings. Still occasionally she finds herself experiencing anxiety attacks. She stated that if she is feeling anxious she finds herself talking to Covenant House staff. Their strength-based active listening appears to work for her.

Anne is now receiving support for her pregnancy through several programs. Currently she is connected to a youth pregnancy and parenting program, called Yipp in the New Westminster area. She very much would like to have the healthiest baby possible. “I have been waiting for this baby ever since I could hold my first doll,” she shared. She has hopes for more downtime, however. She wants to get out more – walk, socialise make art. She reports both her and Emanuel are so busy working to pay their rent and preparing for the baby that they have little time to spend relaxing which is something she longs for.

4. Lucy

Sadly it was Lucy’s birthday on the day she met with the researcher to play the game – which meant she has “aged out” of all MCFD services including her youth agreement which assisted her in paying for housing. Youth under 18 and under MCFD care receive services through a social worker – for example, housing/ rent money, clothing allowance, food allowance etc. Unfortunately Lucy lost her spot at Vancouver’s Aboriginal Safehouse the night before she met for this project as the result of turning 19. The Aboriginal Safehouse accepts youth of all racial heritages and as such Lucy’s Caucasian heritage did not interfere with her being placed there. She now has to support herself on social assistance, which means \$600 a month for housing food and living expenses. She is applying for disability, which may bump her monthly

“I have
been
waiting
for
this baby
ever since
I could
hold
my first
doll”.

income up to \$1000, but still this is a small amount considering Vancouver is one of North America's most expensive cities.

Still as alluded to above, the safehouse staff have helped her find new accommodation. She briefly spoke of moving into a garage or a studio; when I asked if there was running water or heat she changed the subject. So the exact details of her new home are unknown.

She did speak at length of what the safehouse has come to mean to her: "they are like my family – but now bigger and better things are to come". Still she shared that she never felt as if she had people who cared for her until she moved into the safehouse. For her the Aboriginal Safehouse was a surrogate family, which provided her literally with a sense of safety, belonging and acceptance. And because of this nurturing environment she had a safe place to process her feelings. She continued that the staff are kind and appreciate her artistic abilities. "They seem to know what's up", she shared. "They are like a family that cares about you – there are people there that you know you can talk to, workers who helped me not feel bad about myself".

She has learned to manage her anxiety on her own utilising a potpourri of coping skills. Her mantra now "is if you want something you will get it you just have to ask for it". She continued sharing her life philosophies: "Nothing's bad unless you think it's bad; it's all just an experience. I keep running into the same scenarios and life lessons. Things happen to teach us stuff; it's like a movie; things don't really matter. Now

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I try not to do anything I don't enjoy; you just have to have confidence in yourself and just ask".

Lucy revealed that her spiritual healing began when her parents took her to Hawaii in her late teens. There she met a "spiritual person who taught [her] to go with the flow". "Now I don't go out of my way to do much; go with the flow ... you should never do anything that makes you suffer. You shouldn't have to suffer for no reason; I try not to suffer if I don't have too. I use to philosophise a lot – but now you create your own reality; I know I just want to like things and enjoy things for what they are. My last acid trip – that's when I became free spirited".

Although Lucy has done acid, today she avoids drinking. She even avoids marijuana – telling that when she smokes she feels super emotional and out of control. She sticks primarily to hallucinogens – and only uses monthly or so. She does pick mushrooms as well. The last time she used was in early fall at a music festival. At that time she found herself admitted on a psychiatric unit in the Okanagan for drug induced psychosis. She reports she took acid and then was picked up by police for running naked in the street. She spent a couple weeks there whilst she stabilised. She described the experience in positive terms: "There is all the food you want; you can talk to people; I made friends – this one guy fell in love with me; I kissed him and he hadn't kissed anyone before". Her stay ended 3 months ago and she again found herself travelling and without stable housing.

Lucy was asked if she feels supported by the doctors, nurses and social workers she has met and she answered indifferently. She told of seeing a psychiatrist recently at Coast Mental Health in Vancouver but explained the only reason she went to see him was

to have her disability paperwork filled out for social assistance. “I went to see him for [secondary] gains. I know who I am – I know that I’m doing the right thing for me; I’m genuinely crazy but I think people who go to work every day are crazy”, she said whilst smiling. “Labels don’t bother me”.

Lucy also talked about having been assigned a mental health worker but it is unclear if this relationship will continue. “Now that I’m 19 I don’t think I have one – although I see her in a couple of days”. The two go out for lunch and her worker helped her “get on” disability. She describes their relationship in the following: “She isn’t as free spirited as me; a lot of things I do shock a lot of people – I have a lot of odd hobbies – picking mushrooms, art, sitar, going donation binning and I like soulful music, and different instruments, like the mandolin and the penny whistle”.

She was prescribed antipsychotics but doesn’t want to take them anymore. She shared that she still sees shapes (spirits and energy) at the Sky Train station but that they do not scare her and these images are only fleeting – she stated that bad things can only happen to you if you let them. Other than her reference to seeing energy Lucy presented as lucid whilst playing the LSB™ game – still with Lucy’s permission I shared with a Covenant House youth worker that Lucy needs more support as she transitioned so quickly from the care of MCFD to being on her own.

Lucy also spoke of her sitar teacher as having quite an influence on her. When asked where she will go for support now that her formal ties to the safehouse are being severed she talked of her guru/ sitar teacher as someone who helps her. She spoke of him more as an equal than a teacher “but he definitely has a lot of good ideas”. She shared that John is a 70-year-old “white guy” who whilst an equal also fills a father figure

role for her. She continued that he lives in his car with his son. When asked if she felt safe with he and his son she nodded yes saying: “he treats me really well”. She continued, “he doesn’t do drugs, and if I am hungry he always buys food; he use to let me stay in the car with them”.

Homelessness/ Street involvement

1.Echo

Echo reports s/he is having a difficult time transitioning from street life to housing. S/he has a SRO suite in the Vancouver area, but reports s/he prefers sleeping outside for now. In fact the night before our second meeting, in which we played the LSB™ s/he reports, s/he slept outside on a friend’s porch, which became flooded whilst s/he was sleeping there. Echo has a platonic street companion Carol and spends most nights outside with she and her dog. “We are not a family but we are good friends and Cassie is our baby,” s/he said. Carol and Echo bonded as each has saved the other from overdosing on several occasions. Carol has a place as well but like Echo she doesn’t like going inside. “It’s hard to adapt when you’ve been outside for so long. Adapting to inside life is so difficult. You are use to being cold all the time; use to being on hard floor; I cannot fall asleep in a room that’s hot – when I’m hot in a room I freak out; I hate sleeping bags; it’s difficult to run away if someone comes out, if I’m in a bag. A lot of people who have been street involved feel this way. Echo also spoke of the positive aspects of not maintaining a permanent address: “Being street involved finally gave me freedom; finally I don’t have to think about what they think”.

Echo also shared that it is difficult to access the Covenant House shelter as dorms are assigned based on identifying as either male or female. “It is hard for people and for me

because I won't – I can't pick a gender", s/he shared. "Covenant House works for some people but not for everyone; it needs to be more harm reduction, low barrier – CSS (the Covenant House drop in program) is good; shelters not so much re. shelter beds," s/he continued.

Due to Echo's age there are no other youth shelters s/he can access. S/he has stayed at a few local adult shelters but prefers the street to shelters. As above s/he has a place but doesn't go there as it is too traumatic to go there; s/he shared something happened there between s/he and his/ her ex last year; "It is too traumatic to go back; plus it's infested with bed bugs and cockroaches", stated Echo. (her/ his ex was placed in the safety zone when Echo began talking about his SRO, which seemed to work for Echo. The safety zone will be discussed further in a subsequent section).

2. Alex

Alex stated that homeless has been a gift of sorts – as it has forced him to take a look at his substance use and make some changes. Since being homeless and meeting ICY and the Covenant House teams he reports being goal directed. "It made me turn everything around", he professed. "It motivated me – I don't like being homeless; I don't like sleeping on concrete", he laughed. Although he did mirror Echo's sentiments by stating that in some ways being street involved can be freeing but in another way (the cold and the lack of a bed) it isn't. He was very clear in telling he "hates" living in a SRO. In terms of what is working for him he again reports forward thinking – wanting to work as a peer counsellor, dating again and finding a real "home" with a couch etc.

3. Anne

Anne reports still being street involved as she and Emanuel continue utilising

resources offered by Covenant House or Covey as she calls it. She states that their lack of money connect her still to the resources with the exception of shelters that she used when she was truly homeless. When Anne was interviewed using the LSB™ she shared she and Emanuel live in an apartment in New Westminster, but unfortunately the couple have been evicted for failing to pay their rent. They have 30 days to find a new apartment. Anne reports not feeling stressed over this as she and Emanuel have moved once before and a month is a long time to find something new. She has faith the couple will find somewhere to be housed and comfortable.

4. Lucy

As alluded to earlier Lucy has been homeless since age 17. She now finds herself aged out of MCFD programs and its support. She misses her surrogate family at the safehouse and glossed over her new home in a makeshift garage somewhere in Vancouver.

How To use LSB™ with this Group and Their Feedback on LSB™

1. Echo

Echo stated s/he really liked the LSB™ method. Echo gave it a score of 8/10 with 10 being excellent and 1 very poor. S/he shared that because s/he is an artist s/he enjoys visual tools. S/he stated it was not intimidating to look at parts of her/ his life, both pleasant and unpleasant, on a board. As explained the safety zone and the secret cards were used both verbally in the first meeting and at the beginning of the second

“They are like a family that cares about you”.

Lucy

meeting (as well as in the confidentiality agreement). Echo appeared comfortable using them. In fact this was true for all the youth. It was wonderful to see youth who have struggled with boundary settings due to their childhoods and subsequent street involvement assert themselves when people and topics came up that made/ make them uncomfortable. Clues like hesitation, uncertainty or expressions on their faces were sought as well and the researcher offered to use the safety zone or secret cards several times with all of the youth whilst playing the game. The safety zone and the secret cards were the “secret” to playing the game with the youth in a thoughtful, respectful and ethical manner. These tenets are of course so important when working with such a vulnerable population.

In terms of Echo in particular; the only piece s/he choose to use on the board, which differed from her/ his colleagues was the triangle piece. And as mentioned above this is because s/he feels s/he cannot identify with the binary of s/he. S/he had as many home (representing houses they have lived in) pieces on the board as the other youth – approximately 5. S/he also had half a dozen or more pieces on the board for family. Unlike some of the other youth (with the exception of Lucy,) s/he had fewer pieces on the board representing professionals: doctors, social workers, therapists etc.

2. Alex

Alex really liked the game: “The board helped; it always helps me to clarify where I’ve been and what I’m doing now; it makes me feel good I have pulled myself up from where I was; I still understand that I will have slip ups; but not to let it eat myself up”.

He felt that board is “cool”; He liked putting pieces down – he believes the board helped him organise where he was, where he is now and where he is going; as well as who the significant people in his life were and are. He scored the board at 9/10 – 10 being excellent and 1 being very poor. “ It hurts to see some of the shitty things that have helped me but also helps just to get it out”, he reports. He had approximately 3 house pieces on the board and several pieces for important friends and family. As mentioned earlier he too was quick to place his ex-partner in the safety zone when he felt uncomfortable discussing him further. Alex also had more pieces on the board representing professionals – perhaps this is because of his connection to the ICY team. It is fair to conclude that of the 4 youth Alex was the most vocal about wanting to stay off the street (with the exception of maybe Anne). Alex also placed several pieces in the hollow zone, the area on the board where a player can touch people things etc. that are missing and/or working towards.

Alex believes that stable housing would make all the difference in his life. He connects his homelessness to impacting his depression. Alex chose to place housing and stable employment as a counsellor in the “hollow zone” of the board. The hollow zone is a place on the board where the participant place ‘things’ they want; for example, housing, education, a relationship, etc. Alex also shared that he has plans to go back to school and finish his grade 12. He then hopes to look at a degree such as social work – and perhaps work as a substance use counsellor/ therapist.

When asked about the support he receives from ICY, Covenant House, etc., he stated: “It makes me feel good; I am in a better place”, he shared. Furthermore, he said he’s been feeling great for a couple months. Again I include his thoughts on how bad his

life was: “What I was before – I’ve never been put in a situation – It was depressing the fact that I didn’t have any friends; there was nowhere to go”. Alex had therapy a half-hour after we met and concluded our second meeting – he left sharing he felt well and supported and helped by playing the LSB™.

3. Anne

Anne also gave the board a strong rating of 8 out of 10. She said she liked playing. She placed the average amount of pieces on the board representing friends, family, places she has lived. She had few pieces representing professionals, which again may imply that professionals may not be showing up in the lives of homeless youth as much as one would have liked to see. However, Alex’s connection to ICY left this researcher to conclude that perhaps this team is working for street entrenched youth but instead needs to increase its size (by hiring more staff) and outreach.

Anne also had thoughts on what should be placed in the LSB™’s “hollow zone”. Perhaps unsurprisingly she would like to find a stable home for herself, Emanuel and their baby. She would also like to go back to school and then find work in a creative field. In general she hopes for a happy and healthy future.

4. Lucy

Of the four youth Lucy was very clear that she did not like the LSB™ game. She shared she enjoyed speaking to the researcher but she really didn’t “see the point of the game”. She felt that the game was boring: “I don’t really have a lot of boundaries like talking about my past; maybe there are people who do like the safety zones but I don’t need stuff like that. I always try and tell the truth; I had a lot of traumatic things happen to me – but things are only bad if you think about them as being bad; I can have

confidence in something's but I have difficulty talking to people in settings where people are expecting things and then I get nervous and leave".

Lucy scored the board 2 out of 10. She stated: "I think there are other ways you can help people; it looks really weird it doesn't make sense in my mind why you'd have something like that; it looks strange; it's hard to understand; I don't like seeing all the negative things on the board; a lot of time I don't realise I have problems until I am forced to look at them". She continued: "You don't want people to harbour those feelings on the board; like my mom is smothering – better just to say mom; I could see all those words on the board I can't even focus my problems and I've come to terms with my life; I don't need to see it".

She did like some aspects of the board, however. She shared that she liked the places on the board where you could place things you like. For example: She liked putting things that happened in her life on the board but didn't want to comment further on events and people in her life; I didn't want to put down that I want more friends or family – I don't like seeing negative things".

So again, Lucy really didn't like the board. She reported not liking to see her mom's negative attributes on the board. She shared she just wanted to see the word mom on the mom piece and nothing else. Lucy also met with the researcher on a particularly vulnerable day – she was transitioning from MCFD care to what she termed "nowhere". She chose to place being happy in the hollow zone and again many of the people on her board could be characterised as paraprofessionals or informal support persons like youth workers, her sitar teacher etc.

Recommendations

Although this researcher is not in any way affiliated with the game's creator Dr. Chase in terms of its marketing and/ or promotion, still, through happenstance it is an exciting method to engage youth. Three of the four project's youth really liked the board. One stated that its ability to capture one's life in visual pieces really helped sort through what was working for him and what was not.

I would like to acknowledge Dr. Chase again as whilst he was providing me with training he also helped me fine tune my questions – hence this made working with the youth that much easier as my questions targeted the research topic I had in mind: the met and unmet needs of Vancouver's homeless/ street involved youth utilising the LSB™. I also recommend that the therapist and or researcher who use this game with clients/ participants has a goal or a research area in mind; otherwise the game could become too broad. You can literally look at any aspects of a person's life if you do not narrow your focus. A narrowed focus is particularly important with regards to research.

Training and keeping cognizant of your focus

Whilst attempting to pass UVic Ethics committee's approval to start this research, training in LSB™ proved necessary. The LSB™ is like any other tool in which one has to be taught to use. One wouldn't just pick up a chainsaw without someone teaching he or she to use it. Dr. Chase spent 3 two-hour sessions training with the writer to use the board and not just because it was an ethical requirement but because it provides a firm understanding of how the board works. Instead of focussing on the pieces of the board and what they symbolise (for example red circles, and squares and triangles represent family/ or loved ones) the user/ researcher can actively hear the stories of the youth. Their

stories then become the focus of the meetings and not the board. Yes part of this research was to test the merits of the board in terms of working with street involved youth with mental health histories, but the purpose was also to focus on the stories of their lives as well. In fact, questions pertained mostly to their street involvement, and mental health histories and the resources, which are meeting and or not meeting their needs. The following is a list of questions to determine the context of youth involved in this project:

- How long have you been homeless for?
- Tell me what your living situation was at the time you ended up becoming homeless – who was there with you? What was going on? Where were you? How old were you? Where were you living? What were you doing – were you in school or skipping? Why?
- Since becoming homeless what’s happened to you? What’s your living situation? Who are you connected with? Do you have friends or social circles?
- In your current situation do you have anything like a caseworker or someone who is in a position to help you control you/ direct you? What are those relationships like?
- Do you feel you have a safe place to process/ deal with your feelings now? Who do you feel supported by – workers, friends etc.?
- What’s going on in your life now, especially re. your psychological life/ issues? (Do you want more help with this stuff? What would help? What’s going on in your life now that’s helping with your met and unmet psychological stuff? Who knows what’s going on?)
- Are there people there to help you sort through your psychological ‘stuff’?
- Are you dealing with this ‘stuff’ by yourself or are people helping you?
- Have you ever had contact with a mental health clinician/ worker?

Would you like to? If you have what does that feel like for you? What does it look like?

- How do you feel your homelessness is impacting your mental health?
- Do you feel you have a safe place to process/ work through your feelings?
- Are you currently using (today)/ Do you feel well in your mental health today?
- What would it look like in the future if there were people – case workers social workers, doctors – who were there to help you?

The Secret Cards and the Safety Zone

The importance of the secret cards and the safety zone may be the strongest aspect of the board. When working with a vulnerable population, boundaries are particularly important. These youth have inarguably lived through more trauma in their young lives than some do in 70 years and the aim is to protect participants/ clients from re-traumatisation. The cards and the zone protect participants from further unnecessary pain. Participants are left with some control even when navigating a discussion about the hurtful aspects of their lives and sensitive issues like street involvement and mental health conditions.

It is recommended that a therapist or worker who uses this tool in the future with street involved youth, point out and explain the importance of the secret cards and the safety zone. This can be reviewed at the beginning of playing the game and then again several times whilst playing the game. Looking for signs of emotion while playing the game is critical as is asking the youth if there was something or someone they wanted to place in the safety zone or place a secret card throughout the sessions.

Conclusion

Homeless youth are a particularly vulnerable population. They are still

transitioning into adulthood and as such are still developing coping skills. In addition, experiencing homelessness as an adolescent or young adult interrupts key emotional, physical and psychological developmental stages. Homeless youth report higher levels of violence, sexual exploitation and health issues including teen pregnancy (Smith, et al., 2007; Calgary Homeless Foundation, 2009; Kelly and Caputo, 2007, as cited in Cardinal). Meeting their needs then is especially important. This is why the mental health resources available to these youth need to be examined with regards to relevancy to their lives. The four youth involved in this research were all relying on their own coping techniques: writing, meditating, walking, spirituality/ Buddhism and Christianity. Echo and Lucy in particular found that youth peer workers are meeting some of their mental health needs. And Alex found a great deal of support from the ICY team. In addition, both Alex and Echo spoke highly of the Directions program. Furthermore, 3 of the youth felt quite supported by the Covenant House program and youth workers. The LSB™ method may very well be a less intrusive way to access youth's stories. Three out of the four youth spoke highly of the game; it was only Lucy who shared she was not fond of it. This may also be because the negative aspects about her family and history were on the board. It may be more appropriate to ask each one if he or she was "okay" seeing both negative and positive attributes and stories on the board. LSB™ can be beneficial for multiple therapeutic sessions. For example for a therapist who works with clients on an on-going basis. Again it is important to note that the LSB™ is a tool for therapists with graduate degrees.

The LSB™ proved to be a less intrusive way to access some of these stories. I have truly loved working on this research project, examining the met, and unmet mental

health needs of Vancouver's homeless youth, as well developing a report on the merits of LSB™ for Covenant House Vancouver.

I leave you with the “Five Covenant House Principles”:

Immediacy – Young people come to us in crisis, desperately requiring help. We provide for their basic human needs – food, clothing, a shower, medical attention, a safe bed – immediately.

Sanctuary - Youth who are trying to get off the streets are often scared and mistrustful. We protect them from the street and its terrors and from the failures of their past. Youngsters can only grow when they feel safe and protected.

Value Communication - Lying, cheating, stealing; these are part of the street code. It's the way young people are forced to survive on the street. We try to show our youth, by example, that lying, cheating and stealing are wrong, that street values are destructive. Even more important, we teach them that caring relationships are built on trust, respect and honesty.

Structure - Street life is very unstructured. Young people on the street never know where they will sleep or how they will get their next meal. We provide the structure and stability of legitimate and carefully articulated expectations without a lot of rules and regulations. This helps alleviate anxiety and allows them to focus on planning their next steps.

Choice - Young people often feel powerless to control their lives. They fall into a self-defeating cycle of failure. We encourage our youth to make serious choices about their futures. They must choose to change, believe they can make it, to believe that tomorrow

can be better.

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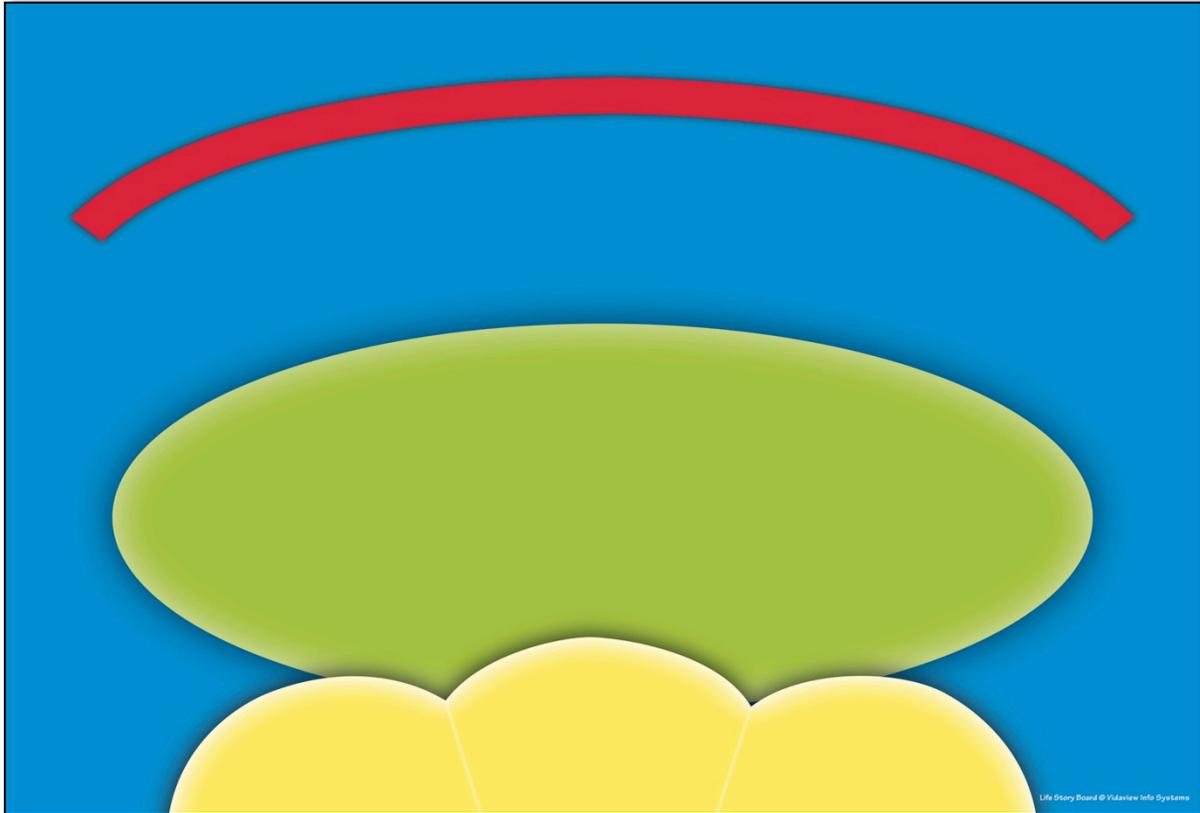
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THE VIDAVIEW LIFE STORY BOARD™

TOOLKIT HANDBOOK



ROBERT M. CHASE MD ©2013

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FOREWORD

The Life Story Board is an interactive tool that can be used for a various therapeutic modalities in counselling, play therapy, family marital therapy, occupational therapy among others. Many professionals have found the Life Story Board as an innovative and useful clinical tool for assessments and the therapeutic process. Creating a “lifescape” with your Life Story Board is engaging for both the client and clinician alike as it facilitates verbal communication as well as it opens up visual spatial modes of expression and cognition.

The Life Story Board Toolkit was created in 2009 as a practical interview tool for clinicians such as yourself and for narrative researchers, developed from pilot tests of earlier versions since 1995. The Basic Kit includes everything you would need as a clinician/researcher to get started guided by the training and even includes access to the LSB Users Discussion Forum. As a small social enterprise, Vidaview is committed to learning from your experience, and collaborating to evaluate and improve the Life Story Board.

How your feedback supports the LSB community is what makes it so unique. Vidaview will make additional modules that will include sets of symbols and markers as they are developed for specific applications or clientele. As part of our growing Life Story Board community, updates and revisions of this Manual, the Guide Sheets and Elements sets will become available to you. Your learning does not end with the training. Over the next year, you will also receive online training resources that will be accessible to LSB users including, brief instructional videos, photo galleries with annotated lifescapes, and case studies in which experienced LSB users describe and review LSB sessions.

I would like to welcome you to the Vidaview Life Story Board and to its growing practice community.

Sincerely,

Dr. Rob Chase MD November 2013

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ABOUT THIS MANUAL

This manual presents the Components of the Vidaview Life Story Board™ system, with a brief description of each. It is not a “how to” guide: it does not prescribe or assume the context, process or direction of a session. This will depend on many factors:

❖ THE CLINICIAN OR ‘GUIDE’

- Professional or therapeutic discipline
- Personal style and preferences e.g. In visual, narrative methods, expressive modalities
- How directive or non-directive is their approach or process?
- Level of comfort and proficiency with the LSB system- skill, creative ingenuity, artfulness

❖ THE CLIENT AS A ‘STORYTELLER’,

- their world or story is the subject of the Life Story Board
- How receptive or inclined to non-verbal, visual modes of expression?
- Age, culture, attention span, neurocognitive development, emotional literacy, etc.

❖ THE SESSION CONTEXT

- Is this a single session, or one in a sequential process of multiple sessions
- What is the setting, the time constraints
- What is the purpose(s) of the session? — primary and secondary — e.g. rapport-building, assessment (intake, diagnostic), or therapeutic intervention
- Within the session’s purpose, what is role(s) for LSB? e.g. as a creative activity, to encourage disclosure, to record information? (photographed and saved)

There are elements described further in the Manual. These descriptions are suggestions and are not meant to be prescriptive or followed without purpose. Detailed recording may not be appropriate or conducive to the sessions flow and direction. Consistency in recording may be important depending on the use of the tool such as gathering information.

A. INTRODUCTION

THE LSB™ SYSTEM AS A VISUAL LANGUAGE

The Vidaview Life Story Board™ is a visual interview tool designed for the helping professions to use with clients. It extends features of the genogram and eco-map common in clinical practice, into a multi-dimensional blend. Its unique strength is its open-endedness and versatility to content and process, in contrast to other 'board games' for therapists.

In a typical session, the client or 'storyteller' shares personal terrain of their life situation, while the therapist 'guides' the process to render the conversation or experience into a *lifescape*.

The process uses a creative blend of: Element cards; markers with sets of icons; and notations with marker pen and clay to represent aspects of the situation or narrative that is shared.

*When language is used for communication, it has three interrelated aspects: **semantics, syntax and pragmatics**. Semantics refers to the meanings of words; syntax refers to the grammatical rules that specify how words should be combined in sentences; and pragmatics refers to the relationship between the meanings of an utterance in the context in which the utterance occurs¹.*

In the LSB system, cards and symbols depicting *elements* of one's personal life are arranged on the play board in zones and configurations related to self, family and relations, social networks, community and time. In this context: **semantics** are the meanings of the shapes, cards, icons and markers; **syntax** is the 'grammatical' convention to record information in card arrangements and notations with pen or clay; and pragmatics refers to the entire LSB communication mode or platform that is actively shared between the 'Guide' and 'storyteller'.

❖ **LEARNING THE LSB: STORYBOARDING IS A MEANS, NOT AN END IN ITSELF**

The LSB is a visual information system for expression, sharing and recording. Like learning a new language, realizing its potential begins with the conceptual idea of the basic structure and 'vocabulary', and then practicing, playing and exploring. For the beginner, simple constructions with a few types of cards, with pen and conversation can be useful. Once you get the hang of it, over time with practice, you are comfortable with more of the Toolkit, adapting it to the situations and opportunities that come up.

What is special to the LSB is how the client's story becomes externalized or narrated using the visual elements of the *lifescape*. Multiple processes can be facilitated within the session where the client and therapist experience verbal sharing and listening, seeing issues brought into focus and contextualized, with reflection, honouring and awareness.

¹ From textbook Mussen, Conger, Kagan and Huston A C, Child Development and Personality 7 Ed, New York: Harper and Row (1990) Chapter 6 'Language and Communication', p226

Be responsive to the present moment and the dynamics at play; the experiential, therapeutic value is in the **process** more than the product.

Our training workshops emphasize the importance of containment, comfort and safety. There are Secret cards for example and the narrative process with the story board allows for many ways to acknowledge issues and dynamics direct or indirect. Creating safety and containment requires respectful non judgemental listening and collaborative co-construction. The playboard and it's contents becomes an extension of the storyteller's self or personal space that is not entered or altered without their consent.

THE LSB™ SYSTEM AS A MULTI-LAYERED MAP OF THE STORYTELLER'S LIFE TERRAIN

In his popular introduction to semantics — the study of words as symbols and their meaning — S.I Hayakawa² writes, “...the **extensional** meaning of an utterance is that to which it points in the physical world, ... the **intensional** meaning of a word or expression is that which is suggested (connoted) inside one’s head.”, and draws upon the metaphoric dictum of the influential father of semantics Alfred Korzybski, “The map is not the territory”.

Borrowing the metaphor and terminology, a LSB lifescape can be understood as a multi-layered ‘map’, a visual rendering of the terrain of the Storyteller’s life, or story. It may help to conceptualize the lifescape as inter-penetrating or levels:

❖ LEVEL 1: EXTENSIONAL

- A primary level of things that exist in objective reality: people, places, entities, and events or actions that occurred.
- Corresponds to objective reality as perceived by the Storyteller
- Includes: Person Cards, Vital Status Markers, Event and Act Cards, Dwelling Cards, Activity and Behaviour Cards

❖ LEVEL 2: INTENSIONAL

- A second layer of feelings, meanings and associations; the connotations projected on to the primary elements by the Storyteller.
- These intensional elements primarily reflect the Storytellers own experience; its meaning and value, which may be ‘core’ or change over time, with awareness etc;
- Includes: Feeling Cards, Role Cards, Relationship Cards

❖ LEVEL 3: REFLECTIONS, REACTIONS, RESPONSES

- At this level are elements that arise from the process of the LSB session: the Storyteller’s interaction with his/her own lifescape, and the client counsellor dialogical interaction.
- Includes: Question & Self Esteem Cards, Risk and Resource Chips, and may include Zone and Field Cards to draw out themes and issues that underlie the patterns and influences at play

❖ LEVEL 4: GUIDE'S ANNOTATION AND ANALYSIS (INDEPENDENT OF STORYTELLER)

- A fourth layer consists of the Guide's post-session notes, formulations, interpretation and analysis, such as annotations on the printed photograph of the lifescape.

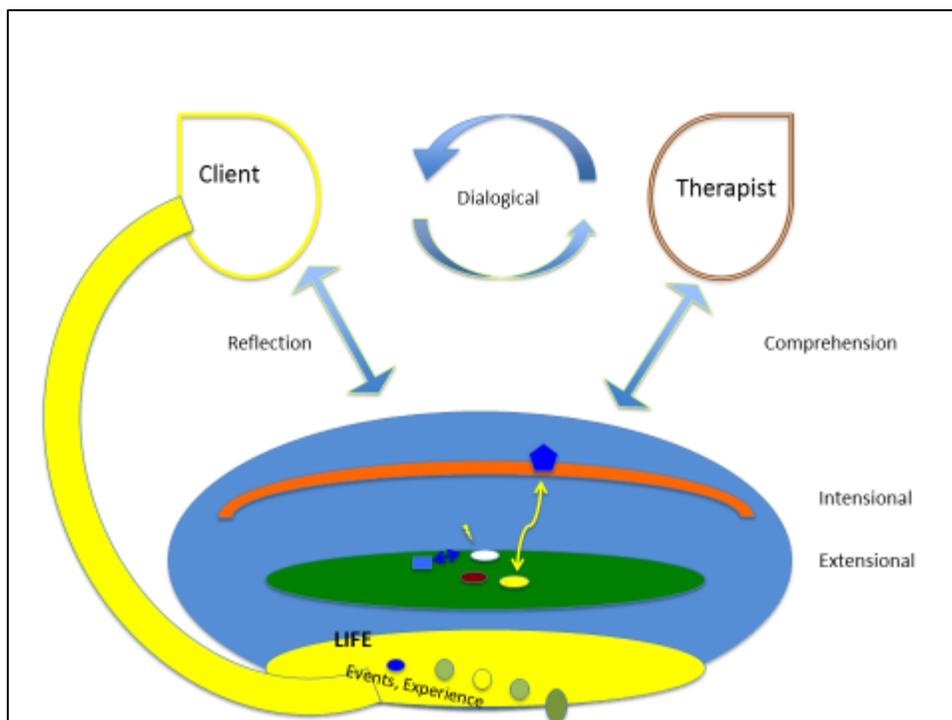
❖ LEVEL ‘O’: THE SUBTERRANEAN, SUBCONSCIOUS LEVEL

- In this schema, visualize the underlying level, hidden and unexpressed, that influence the Storyteller’s state of mind, awareness, and relational world; and aspects of which emerge into awareness with insight over the course of sessions.

² S.I Hayakawa and Alan R. Hayakawa, Language in thought and Action, 5th edition, 1994, S.I. Hayakawa and Alan Hayakawa, Language in Thought and Action, 5th Edition, 1991, p 19

The figure below is a conceptual framework for the multi-dimensionality of the LSB system. It is not meant to prescribe how the Elements of the Toolkit are introduced in a session. Narrative disclosures tend to unfold in a much less linear or precise fashion, weaving through time and place with blank spots, 'missing puzzle pieces' as an early LSB user calls them. One of the strengths of the LSB system is that the details of the Storyteller's life and experience can be depicted in a responsive, flexible way that allows for natural gaps and non-linear expression.

The lifescape as a map charting the Storyteller's life situation is an apt simile. One can also trace the narrative path taken in the session, and the progression of reflection and insight that emerged in the process.



USING THE VIDAVIEW LIFE STORY BOARD™

This LSB Manual presents the Life Story Board™ component **Elements** according to the Table presented at the beginning of Section B. Many of the **Elements** have corresponding **Guide Sheets** provided in the LSB Toolkit. These are for handy reference and are to be shared with the Storyteller in the session. When a new **Element** is introduced, its **Guide Sheet** can orient the Storyteller to focus on and express the specifics of their experience, verbally, by choosing a marker or symbol, or by writing/drawing on the respective card.

A session may be an overview of a whole life, or it may focus on a specific time, event, or theme. Efficiency is found in balancing the purpose of the session and the ground to be covered in the time available. We encourage you to improvise and be open to creative ways to ‘storyboard’. The process of the LSB is open to ways that facilitate other therapeutic modalities.

The board and magnets can be written upon with erasable marker pens, which are provided in the Toolkit. Details can be drawn or written as needed, and lines can be drawn between Cards or around groups of Cards. An example of this use is to encircle the Person Cards for all the members of household, present or past.

❖ THE PALETTES

In practice, as the Guide, you can customize your own working system by assembling selections of pre-set markers and icons on the magnetic **Palettes**. The Basic LSB Kit includes nick-cut sheets of small rectangular magnets, onto which symbols and notations can be drawn, or labels applied from the label sheets of icons provided. With use, you generate the selection that works for you, harvesting symbols and ideas from your sessions.

The Storyteller can conveniently choose a marker from a palette or guidesheet, or write / draw their own on a blank label or card. The Guide Sheets provided for Feelings, Behaviour, Activity, Health and Death have lists of word descriptors, unlinked to the symbol the Storyteller may draw or choose. What counts is the meaning the Storyteller ascribes to the marker or symbol; good practice is to use the Storytellers’ own words when referring to it in conversation, preferable to listed descriptor.

❖ SUGGESTED NOTATION CONVENTIONS

Some **Element** descriptions include conventions for notation of details upon the Card. This is meant as a guide only, if it helps to organize the enquiry of an assessment, for example. In many cases, recording such details may not be relevant or appropriate to the context, the client, or the flow of the session.

PRACTICE NOTE: *We generally suggest that written notations such as connecting lines are added onto the play board towards the end of the session, to avoid having to change them if Cards are rearranged before the layout is established. Drawing / writing directly on the cards themselves avoids this problem, so the information stays with them when they are moved.*

❖ **CLAY TAGS**

The Toolkit also includes a packet of variously coloured *Clay* and a *Clay Assignment Sheet*.

Placing small pieces of the same coloured clay on Cards and Markers is a very effective way of depicting connections and tracking themes. For example, small balls of blue clay might be placed on the Person Cards for everyone involved in particular event; small pieces of green clay might be placed everywhere the influence of a particular belief system about money appears.

The Clay Assignment Sheet can be used to keep track of the assigned meanings – simply put a piece of the clay on it, and write down what that represents on the LSB.

❖ **COLOURED CHIPS**

In the right lower corner of the Compartment Box are plastic chips of 6 different colours; the Yellow and Red chips are used in 'Risks and Resources' Activity (p 39). A chip colour can be assigned other meanings, or tags, e.g.: who do I trust/distrust?; when did I feel safe /scared? This kind of activity can be part of your repertoire of LSB skills.

B. VIDAVIEW LIFE STORY BOARD™: ZONES AND ELEMENTS

The Vidaview Life Story Board™ system is based on a 19" x 26" magnet-receptive play board with 4 demarcated zones, and 23 sets of magnetic Elements, Cards and Markers that can be placed on the board and marked up with erasable marker pen and clay,

This section of the Manual presents each Component according to the following order.

TABLE: LSB ZONES & ELEMENT SETS

❖ 1. ZONES

- LSB Board Zones: Personal, Family and Close Ones, Community, the Timeline
- Zone Cards
- Field Cards

❖ 2. EXTENSIONAL ELEMENTS

• 2.1 PEOPLE, ENTITIES AND OBJECTS THAT EXIST

- Person Cards
- Vital Status Cards: for Departure, Death and Health Status
- Dwelling Card (Households)
- Body Map
- Pets / Animals

• 2.2 THINGS THAT HAPPEN, THINGS PEOPLE DO

- Events
- Acts
- Activities
- Behaviours

❖ 3. INTENSIONAL ELEMENTS

• 3.1 RELATIONAL / SOCIAL ASPECTS

- Roles
- Interaction Patterns
- Themes

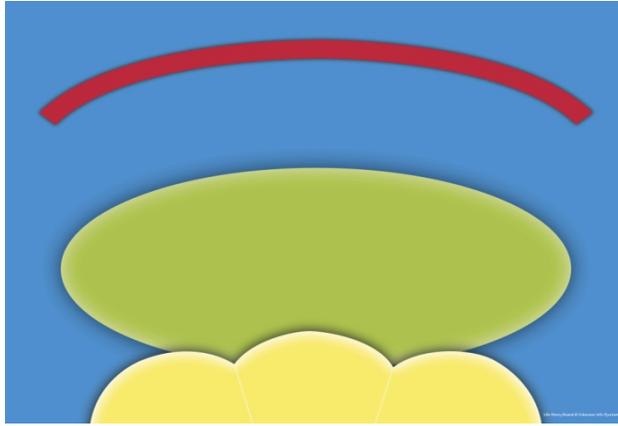
• 3.2 INTERNAL EXPERIENCE AND REFLECTIONS

- 'Signposts': Questions, Problems, Insights, Resolve
- Qualities
- Self Esteem
- Thought clouds: hopes, dreams, ideas, worries
- Feelings
- Secrets
- Risk and Resource Chips

B.1.ZONES OF THE LIFE STORY BOARD

The LSB Board has three zones of different colours and a **Timeline** arching across the top.

There are also **Zone Cards** (described below) to be placed onto the LSB as needed.



❖ FOR REPRESENTATIONS OF INNER, PERSONAL QUALITIES AND ISSUES — YELLOW

keep Zone undifferentiated, or the three sub-sections in the Personal Zone may be used to lay out different aspects according to some construction, e.g.

- Spirit – one’s core identity, ‘big picture’, faith or religious interests, attitudes, outlooks
- Mind – on a more mundane level one’s thoughts, moods, feelings
- Body - e.g. issues about health, appearances, and physical features

Note: the Body Card is also used for info about the physical body marked on the figure e.g. injuries, issues, and symptoms

❖ FAMILY, CLOSE RELATIONS — GREEN

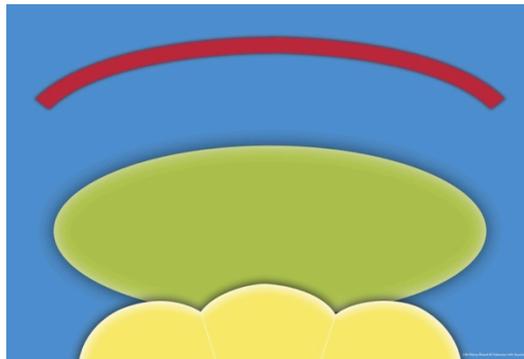
The green Zone is for the primary and central people in the Storyteller’s life, typically family members and other household members, and close relations and friends. Family members are configured like a genogram in a generational arrangement. Those living together can be clustered and associated to a Dwelling card, e.g. encircled and connected by lines,

❖ COMMUNITY — BLUE

The outer Blue zone is an area for laying out social circles and networks or ‘circles of influence’ outside home and family.

PRACTICE NOTE: In the Blue and Green Zones, placing Cards in closer proximity to the Personal Zone and the Storyteller’s yellow Person Card(s) can be used to signify importance and closeness. Something placed farther away, or in a corner could symbolize emotional distance, unimportance, rejection, fear or dislike.

TIMELINE



The red **Timeline** arcs across the top of the LSB. It is used to map events, acts, changes in living situations, locations, and other temporal factors along the dimension of time.

PRACTICE NOTE: Standard use of the Timeline is to indicate 'Past' on the left, and 'Future' on the right, with 'Now' close to the middle. This may be varied, to span a lifetime, a period set in the past, or the current days, according to the session and the Storyteller's preference.

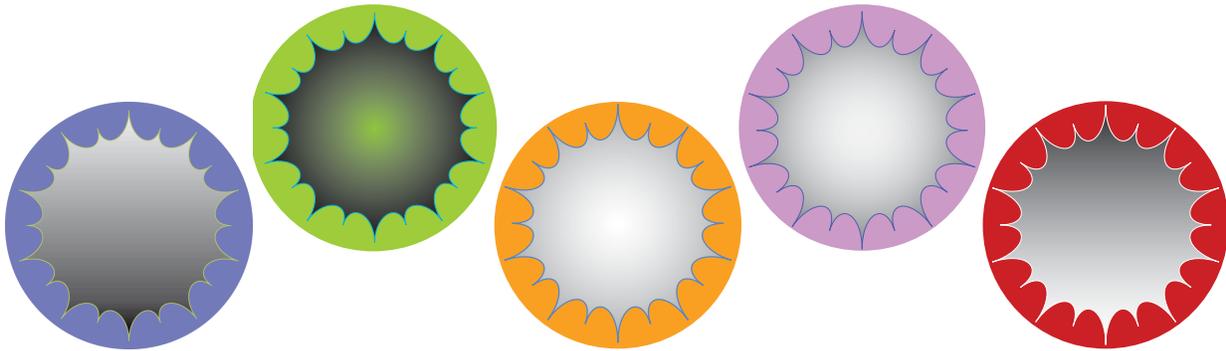
How the Guide navigates the flow of the Storyteller's narrative may follow different schema, within and across sessions. The session may wind through time following the narrative as it develops, back and forth. A given session may 'zoom in' to a particular window of time and place, or 'zoom out' for a wider perspective that spans e.g. a lifetime.

The **Timeline** allows the depiction of multiple temporal 'snapshots' from the Storyteller's narrative. This added dimension to the lifescape can open up exploring what has changed over time and what has remained constant; what are the patterns and trails; and what sequences of events led to the present.

PRACTICE NOTE: Remember, consider multiple sessions and how to explore sequentially; photographing the session lifescape is recommended to create a valuable record and keepsake for the client.

Event and **Act Cards** are usually placed along the **Timeline** with Date, Age and Place written on the Card or Timeline. Connecting lines can be drawn from the **Timeline** to other cards / elements on the LSB as appropriate.

ZONE CARDS



There are five *Zone Cards* of different colours, which are larger in size than the other Cards in the LSB system. The blue *Zone Card* has a dedicated meaning, of '*Hollow Zone*' while the other four are available to have a particular meaning designated and labeled as needed. Cards in the lifescape associated to that meaning are placed on the Zone Card, or connected with a drawn line or clay marker.

The blue *Hollow Zone* was the only Zone Card in the earlier versions of the LSB, but more have been added in response to feedback from early LSB users that they would be very useful.

The *Hollow Zone* serves as a place on the Story Board to indicate the entities, roles, or qualities notably **missing or absent (for bad or good)** in the Storyteller's life situation being storyboarded. These absences might come up in the narrative during the session, or become apparent through guided enquiry.

For example, if the Storyteller answers enquiry such as "*Who protects you from harm?*" with "No one." the corresponding *Role Card* for *Safety* can be placed in the *Hollow Zone*. (Whereas, if the answer were, "I don't need anyone to protect me, I can protect myself", the Role Card for Safety would better fit placed on the Storyteller's Personal Zone.)

Placing cards or markers in the *Hollow Zone* is always based on the Storyteller's subjective sense of which absences have significant impact or meaning. For example, if the Storyteller's milieu has never involved drugs, placing the '*Drug Use Behaviour Card*' in the *Hollow Zone* would not register as significant, whereas for someone living in a family or community with a significant history of drug involvement, the absence of personal drug involvement may be of major importance, and would warrant putting the *Drug Use Behaviour Card* into the *Hollow Zone*. Similarly, the absence of a life partner may be experienced as neutral, positive or negative, and so the *Card* for *Significant Other* would only be placed in the *Hollow Zone* if the Storyteller feels this absence has strong meaning.

Placing markers into the *Hollow Zone* helps provide a clear overall picture of the Storyteller's life, by graphically representing both the gaps, such as missing role models or domestic security, and potential strengths, such as the absence of violence, disease or substance abuse.

PRACTICE NOTE: We recommend setting up the LSB before the session starts, as follows: The Hollow Zone on left hand edge; the Body Map on the Yellow Personal Zone at the right side, and the ID Card in the top left corner. This way, the Guide can quickly orient the Storyteller to the basic logic and schema of the LSB with the Board Zones of Self, Family, Community, and Time for what is present, and the Hollow Zone for what is notably missing.

The other 4 coloured Zone Cards have not been assigned a particular meaning. You are welcome to use and assign meaning to them as suits the opportunity. Some suggestions from early LSB users are:

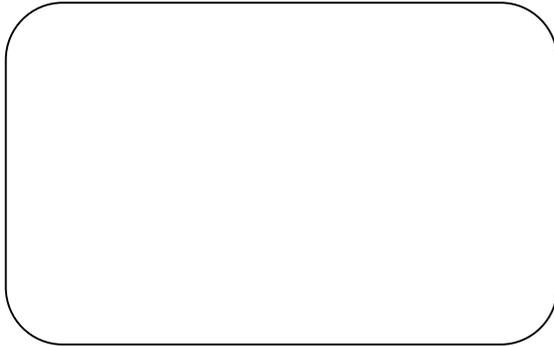
Containment Zone:

A place to put *Persons, Thoughts, or Events*, from which the Storyteller wishes to protect themselves or the rest of the Story Board. The Storyteller may hesitate to storyboard highly toxic, traumatic or dangerous elements in their life situation, as if doing so will contaminate or negatively affect the lifescape. Putting the element in a *Containment Zone*, placed away from others symbolically conveys this aversion, creates a sense of control, and brings the issue into the storyboarding process, instead of suppressing or hiding it.

'Force' Zones:

A *Zone Card* can be assigned to represent a presence and influence, positive or negative, that acts upon the Storyteller's life situation or people in the lifescape: source of inspiration, guiding principles, past trauma (personal or multi-generational); addiction; or other aspect he/she identifies with...if it's important, it belongs on the board.

FIELD CARDS



Field Cards provide a writing surface to facilitate storyboarding and to organize discussion of themes or patterns influencing the Storyteller’s experience.

Some aspects of life may be so much a part of the ‘field’ that they may be almost invisible (‘can’t see the forest for the trees’), even though they exert a strong influence. Recognizing and naming them can help the Storyteller to locate and relate their personal experience within these larger Fields of Influence.

The **Field Cards** can also be used in an ad hoc way as needed, such as to track family experiences that constellate around a particular theme, to record significant content, make lists or note ideas. Used in pairs they can be **Quality Cards** (see p32). Place **Field Cards** on the LSB as needed, add a label, and write or draw relevant information as it arises during the session. Use the marker pen, or a colour and shape of clay to connect items on the Card to other Cards in the lifescape.

PRACTICE NOTE: By writing on the **Field Cards** instead of the **Playboard**, you can move the content around as the storyboard layout takes shape.

THE LIFE STORY BOARD™ TOOLKIT INCLUDES THIS SET OF FIELD CARD LABELS

PHYSICAL ENVIRONMENT		COMMUNITY ENVIRONMENT		CULTURAL TRADITIONS		FERTILITY/ REPRODUCTION		GUIDING PRINCIPLES					
SPIRITUALITY		RELIGION		SEXUALITY		PARENTING		EDUCATION		VIOLENCE			
ASPIRATIONS		SUCCESSES		FAILURES		PHILOSOPHY		CREATIVITY		MEANING			
INSPIRATION		PRESSURES		CUSTOMS		SAFETY		DANGER		ABUSE			
WORK		MONEY		WAR		POLITICS		HEALTH		PAIN		NATURE	
BEAUTY		TRUTH		THE LAW		STRESS		VALUES		FEARS		FOOD	

A selection of these labels can be put together on a palette for display, and drawn from in the session. For some topics a **Field Card Guide Sheet** suggests potential aspects that may be meaningful to the Storyteller’s experience. Some items refer to personal experience, while others are more transpersonal, referring to the larger community and background milieu.

These **Guide Sheets** can serve as a reference and starting off point to exploration and enquiry, as appropriate to the session. They are provided as examples, and you are invited to create others to suit your needs.

ID CARD

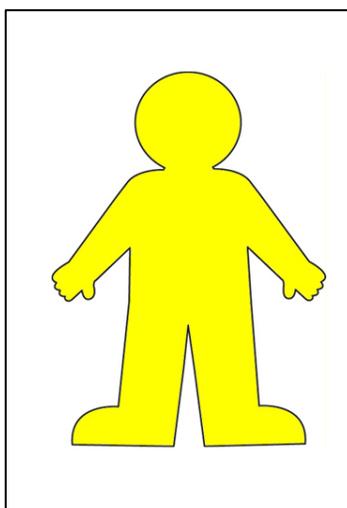
The **ID Card** is a blank white rectangle used to signify the Storyteller, while retaining confidentiality.

At the beginning of the session the Storyteller quickly sketches or writes something on the card to represent themselves, rather than using their name. The session date and the Storyteller's age — either at the time of the session, or during the time period the session is going to focus on — are typically also included.

The **ID Card** is placed at the top of the board on the left hand side.

The lack of identifying information allows for the completed LSB lifescape to be photographed and potentially shared, without compromising the confidentiality of the Storyteller.

BODY MAP



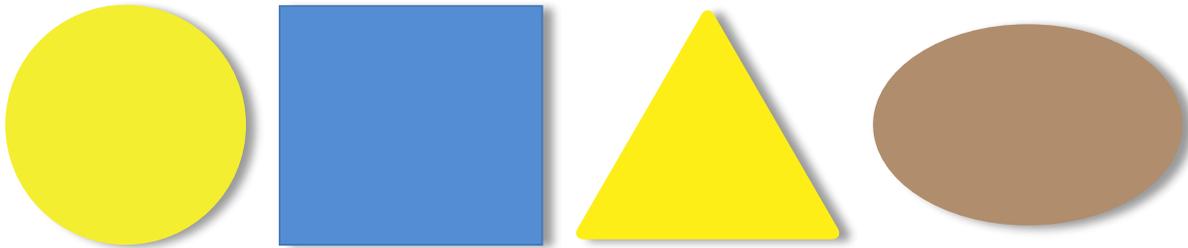
Use the **Body Map Card** to indicate any physical problems, difficulties or concerns. Also the site of any injuries or surgeries can be marked. Draw or write on the card to show what part of the body is affected, and to describe symptoms.

The **Body Map Card** can also be used to record strong feelings – positive or negative – that the Storyteller expresses about their body. Such expressions may arise spontaneously during the session, or as the result of guided inquiry in conjunction with the **Self Esteem Guide** and **Cards**.

Conventionally the **Body Map Card** is placed on the right hand side of the yellow **Personal Zone** at the beginning of the session.

B.2. THE EXTENSIONAL ELEMENTS

PERSON CARDS



The *Person Cards* come in 4 shapes and 8 colours. The squares and circles also come in 2 sizes.

Following genogram convention, circles represent females and squares represent males.

Triangles can be used in two different ways: on their own to represent someone who identifies as other than female or male; or placed on top of a square or circle to indicate LGB if this is relevant.

Circles and squares are used together to represent transgender: circle on square for female to male, and square on circle for male to female.

PRACTICE NOTE: Offer Storyteller these shape options when choosing their *Person Card*

Ovals are used to represent groups, such as cousins or members of a social network. Use Group cards when it is not necessary to specify individuals within the group.

Generations and types of relationship such as Significant Other and Non-Family are colour-coded. These designations are indicated on the *Person Card Guide Sheet*, which also has space to write in other colour assignments as wished.

Typically, a yellow *Person Card* is used to identify the Storyteller.

Most LSB sessions begin with placing the *Storyteller's Person Card* on the Board, and further identifying it with a small piece of clay they have shaped.

Person Cards for relatives are placed within the green family/household zone of the Board, and those for important people from the community, such as friends, teachers and social groups are placed on the blue community area.

In the Parents' generation, 'Mother' (M) is conventionally placed to the left of 'Father' (F), with maternal and paternal relatives placed to either side, respectively. In some layouts, Mother and Father may be placed in other configurations, as best fits the narrative and orientation with the *Timeline*.

Aim to include all members in the Storyteller's current *household*, both relatives and others, early on in the layout. Include *Person Cards* for members of the extended family living elsewhere with discretion based on their significance and the importance of the relationships.

Use smaller sized cards, and *Oval Group Cards*, which come in blue and brown, to occupy less space if the Storyteller wishes to include many people on the Board.

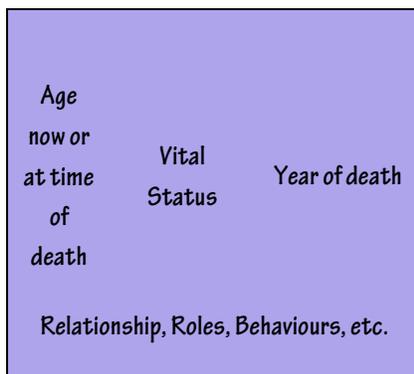
ALTERNATE COLOUR CODING FOR PERSON CARDS

In cases where the generational coding of the *Person Cards* is not relevant, colours can be assigned as applicable, such as to different social groups, levels of an organizational hierarchy, etc.

SOCIAL CIRCLES/NETWORKS

In addition to close family and households, there are other social networks or ‘circles of influence’ in the Storyteller’s life. These can be included in the lifescape by drawing and labelling circles on the outer periphery of the Storyboard, to stand for community, social and political elements or networks that register significantly in the experience of the Storyteller. Individual or group *Person Cards* can be placed within these circles.

CONVENTIONS FOR INFORMATION RECORDED ON PERSON CARDS



The *Person Cards* can be used to record key data about the person represented, and to illustrate important aspects of their relationship with the Storyteller.

Conventionally, age is written at the left side of the card and corresponds to the current age, the age at the time period being discussed, or the age at the time of death, as applicable. The centre-right space is reserved for the date of death or departure, if applicable. The relationship to the Storyteller can be indicated with a code letter below the age on the lower side of the card.

Remaining space can be used for relevant markers such as *Status*, *Role*, *Behaviour*, *Feelings*, or *Relationship*. If including people’s names would be helpful in keeping track of the story, initials rather than full names can be used to protect anonymity.

Relationship Codes for Person Cards	
M	Mother
F	Father
S	Step-sibling
H	Half-sibling
A	Adopted
F	Foster
R	Live-in relatives
B	Boarder
X	Not otherwise Classified

DWELLING CARDS

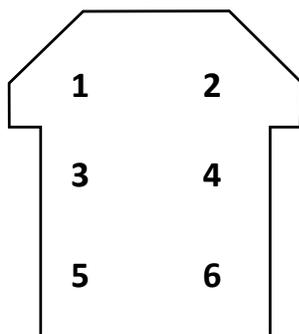


Dwelling Cards are used for recording descriptive information about the physical home, and are typically placed along the top edge of the **green Family Zone**, with the associated date and place noted as appropriate. Typically **Dwelling Cards** are used after the Storyteller has placed their **Person Card** on the LSB, and has then added Cards for members of their current household.

Where to place the **Dwelling Card** for the Storyteller's current household will depend on what period of time is being explored in the session. Wherever 'present time' is designated on the **Timeline** - typically somewhere to the right of center – place the 'present time' **Dwelling Card** correspondingly. Place additional **Dwelling Cards** for previous homes chronologically from left to right, with dates, locations and other relevant information noted.

The date or time period the person has lived there can be noted on the Card, as well as any other applicable information about the home. This might include both concrete information, such as what kind of shelter and amenities the house provides, as well as associated feeling aspects such as sense of safety/danger, crowded, noisy, happy and so on.

PRACTICE NOTE: You may wish to record information about the Dwelling as



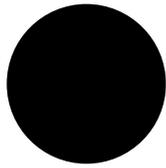
shown below.

1. Core Household members
2. Transient Household members
3. Dwelling type
4. Utilities
5. Location
6. Safety/Stability

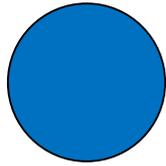
HOUSEHOLD COMPOSITION & CHANGES

Indicate changes in family composition and/or household members by drawing lines encircling the appropriate **Person Cards** and linking these to the related **Dwelling Card**, or mark with clay tags.

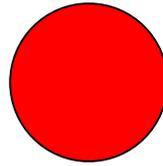
STATUS CIRCLES



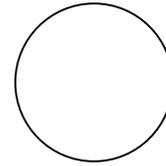
Death



Departure



Physical
Health



Mental
Health

There are four colours of ½ inch round *Status Markers*, which are used to indicate people's *deaths*, *health status*, and significant *departures* from the Storyteller's household or close proximity.

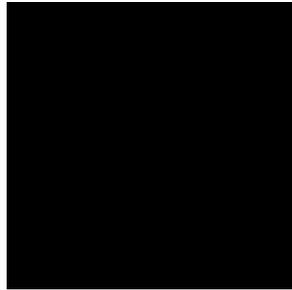
Typically, the *Status Markers* are placed directly onto the corresponding *Person Card*. They may also be used as descriptive tags on *Event*, *Act*, or *Activity* cards.

The Toolkit includes *Guide Sheets* that list *Reasons for Departure*, *Causes of Death* and *Physical, Mental and Emotional Health Factors*.

PRACTICE NOTE: *The Guide Sheets can be used to help elicit information or add details about people who have died, moved away, or have health issues. The Guide can look at the Guide Sheets together with the Storyteller, while asking questions such as, 'Did this happen to anybody?' or "Is there anybody who experiences this?"*

The Toolkit also includes a set of ¼ inch blank white circles and labels that can be placed on top of the Black, Blue or White Status Circles to add details. These can be marked up as wished, placed on magnets and stored on a palette, with symbols that can be cross matched to Guide Sheet descriptors.

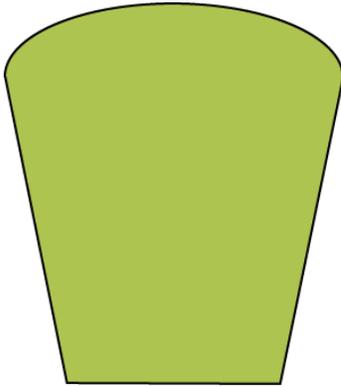
ANIMAL CARDS



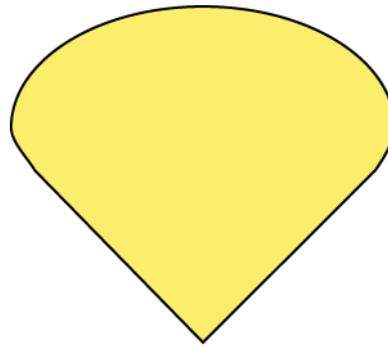
Animals that are important to the Storyteller, whether as companion animals, or because of their cultural significance, can be represented on the LSB with the **Animal Cards**. Place them within a household grouping, or where they belong on the Board.

Cards depicting a dog and cat are included in the Toolkit. Other types of animals can be represented with either a **Wild Card** or with a shape cut and marked as desired on the 1" x ¾" labels on small rectangular magnets provided.

EVENTS AND ACTS



EVENT CARD



ACT CARD

Place **Event** and **Act Cards** above and below the **Timeline** to depict significant occurrences that have impacted or originated from the Storyteller, someone important to them, or the community at large.

DEFINITION OF EVENTS AND ACTS

For the LSB an **Event** is defined as something that happens or occurs, at a particular time and place, affecting the Storyteller and/or people around him/her, resulting in significant changes or impacts. The precipitating event and its related incidents or developments can span a period of time; it may involve a sequence rather than just one discrete occurrence.

An **Act** is a single, specific, volitional action done by someone. An **Act** is therefore more circumscribed than an **Event**; within a given **Event**, several **Acts** may occur, which can be separately marked as warranted by the importance ascribed. For example, the Storyteller's community may have experienced the **Event** of a destructive flood, which led to the **Act** of the father moving away to look for new work.

Naming something as an **Event** or **Act** and depicting it on the **LSB** with a Card encapsulates a key point or passage in the life narrative. Determining which aspects of the overall narrative warrant being depicted as **Events** or **Acts** is a fluid, consensual process based on what comes up in the storytelling, and the weight the Storyteller ascribes.

Lines can be drawn from the **Event** and **Act Cards** to **Person Cards**, and other elements in the Story Board related to the Event/Act and its effects.

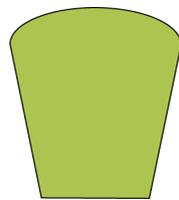
Important causal or sequential links between **Events** and/or **Acts** can be indicated in writing, or by marking the relevant Cards with colour-coded **Clay Tags**.

EVENTS AND ACTS CARDS COLOUR-CODING

Following the colour coding of the *Board Zones*, the *Event* and *Act Cards* are available in four colours, to indicate who was primarily affected or was the originator:

- Yellow: mainly involved or affected the Storyteller
- Green: mainly involved or affected the Storyteller's household or family
- Blue: mainly involved the community around the Storyteller
- Brown: originated from sources beyond the Storyteller, their family or immediate community, yet impacted the Storyteller in some noteworthy way.

EVENT CARDS



COLOUR-CODING

Event Cards come in four colours, corresponding to personal, family, community and larger world levels:

- **Yellow:** for something experienced mainly by the Storyteller alone, like being accepted at a new school, or being chronically bullied
- **Green:** for a family/ proximal level event, such as loss of family income, or a house fire
- **Blue:** for community-level event, occurring within and impacting the larger community, beyond self and family alone
- **Brown:** for an event originating outside the personal, family or community realms, such as large-scale political occurrences, or acts of nature.

The experienced impact of Events may overlap these realms, in which case use the colour that most closely describes the scope of the effects, from the Storyteller's point of view.

PLACEMENT OF EVENT CARDS

Usually the **Event Card** is placed above the **Timeline**, at the corresponding designated time spot. The date can be written directly onto the card, or the Board. (In general, writing on a Card is better than writing on the Board, as then if the Card gets moved, the pertinent information moves with it.)

INFORMATION RECORDING ON EVENT CARDS

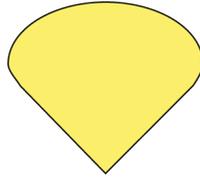
Record specific details such as date, source or cause, brief description, who was impacted, frequency / duration and significance on the **Event Card** as appropriate. The Guide or Storyteller can add these details using icons, initials, drawn symbols or words. You may also want to connect the Event Card with the associated Person Card(s), by drawing a line or using a clay tag.

As with all elements in the Toolkit, the degree of detailed recording that is necessary or helpful will vary from session to session. Information can be placed on the Card following the conventional layout described below, or more spontaneously, depending on the session type and purpose. For instance, if the LSB is being used to conduct assessment sessions with multiple participants to collect specific data that will later be correlated, then following a standard information layout pattern may be most useful.

A CONVENTIONAL LAYOUT FOR RECORDING INFORMATION ON THE EVENT CARD:

- ❖ The central part is for writing or drawing an Event description
- ❖ At the top, detail as appropriate:
 - Type of Event (top)
 - Source or precipitating cause (top left)
 - Effect, i.e. who is affected and how (top right)
- ❖ At the base of the Card indicate:
 - Duration/Frequency (bottom left). e.g. 1 d, 8 m, 3 y, or 3x
 - Degree of Impact (bottom right) - - - for very negative, up to +++ for very positive

ACT CARDS



COLOUR-CODING

Act Cards come in four colours, corresponding to personal, family, community and larger world levels. Choose the appropriate colour to indicate the **primary originator** of the Act.

- **Yellow:** the Storyteller
- **Green:** family/proximal
- **Blue:** community
- **Brown:** outside the personal, family or community realms

USING ACT CARDS

Use *Act Cards* judiciously: depict an occurrence on an *Act Card* based on its overall relevance or impact, from the Storyteller's viewpoint, and not automatically for anything that is mentioned.

Deciding which aspects of the story warrant *Act Cards* can be discussed between the Guide and the Storyteller. Sometimes the nature of an occurrence will make using an Act Card seem obvious, yet the Storyteller's subjective experience or description of the action may be that it's not very important. This can then become a discussion point between the Guide and Storyteller.

Depending on the LSB session's purpose and setting, *Act Cards* can be used with specific screening questions, such as: "Have you (or family members) ever been shot at? Arrested? Raped?" For positive answers, the Guide or Storyteller places the card appropriately on the Story Board with connecting lines drawn to the relevant *Person Cards*.

PLACEMENT OF ACT CARDS

In most cases *Act Cards* are placed just below the *Timeline*, in the designated temporal location. Sometimes it may make more sense to place the *Act Card* near the *Person Cards* most involved; in such cases draw a line to the *Timeline*'s corresponding time period or write the date on the *Card*.

ACTIVITY CARDS



USING ACTIVITY CARDS

Activity Cards denote common and/or meaningful activities or pastimes that the Storyteller mentions, either spontaneously in the course of discussion, or in answer to a directed inquiry. This may include both current and former activities.

Use *Activity Cards* when this information is relevant to include in the lifescape because of its importance to the Storyteller's experience and situation. They may also be used to depict other people's Activities that are significant for some reason.

Place *Activity Cards* on the LSB wherever they fit best, for example, in the yellow Personal Zone for a solitary activity, and in the blue community zone for a team sport. Use lines or clay to connect to the Dwelling Card, Timeline, Social network, or People as appropriate.

The *Activities Guide Sheet* lists a wide variety of common activity categories, and may be referred to during the session to elicit more information with guiding questions.

The *Activity Card* reflects what the Storyteller has shared, and details its importance and impact.

Any given Activity may:

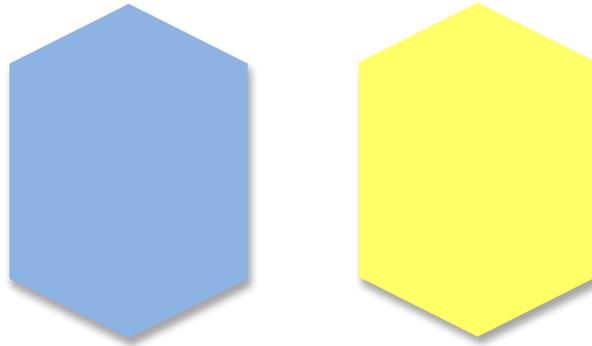
- Be liked or disliked; voluntary or required
- Give meaning and purpose to life, or not
- Entail **risk** or protection from risk, or not
- Have **impact**, positive or negative, on the quality and direction of life
- Be frequent or occasional
- Be done currently, or in the past (or the future)

These aspects may be quickly noted in code on the Activity card (below). Or the activity card can be placed onto a Field Card for extended writing space

CONVENTIONAL NOTATION FOR ACTIVITY CARDS:

- Use the Left Hand space to draw a picture or write words depicting the activity
- Use the Middle Space to write any comments
- Use the Upper Right Field to note feelings about it such like/dislike, and their intensity this might be done with a drawing, for e.g. 'Happy' or 'Sad' face, or by choosing an appropriate symbol from the set of Feelings Icons, such as 'Proud' or 'Scared'.
- Use Lower Right Field to note impact : +++ very positive, 0 neutral, --- very negative
The assessment of 'Impact' is from the Storyteller's point of view, (which may not be shared by the Guide.)
- Past activities: If an activity /pastime was in the past, and is no longer done, depict this by encircling the card with a dashed line. The encircled Marker can be dated by drawing it back to the Timeline, or by writing the year, time period, or age of the Storyteller, whatever is most appropriate

BEHAVIOUR CARDS



Behaviour Cards come in two colours: Yellow for the Storyteller's behaviour, Blue for other people.

Details about the behaviours of individuals or groups depicted in the Storyteller's *lifescape* will arise during the session. Add **Behaviour Markers** to the LSB when various behaviour traits are referred to in the narrative, or when they arise in response to specific screening questions such as "Who drinks alcohol? Uses drugs? Breaks up fights?"

The **Behaviour Guide Sheets** include both the negative and positive behaviours that people do which collectively form the environment of risk and support for the Storyteller, and can be referred to as a means of eliciting significant information.

Negative behaviours might include: substance abuse and other addictions, aggression, gambling, high-risk sexual activity, skipping school/work, criminal activities, or anything else that is likely to have a deleterious overall effect on life.

Positive behaviours might include: striving to achieve goals, peacemaking, fairness, showing empathy/compassion, healthy lifestyle, helper to family, community or environment, or anything else likely to have a beneficial overall effect on life.

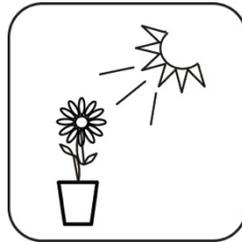
Place **Behaviour Markers** on or near the relevant **Person Card(s)**, and mark them with pictures and/or words to denote the specifics of the behaviour. Different values such as – positive +++, ++, + or negative ---, --, - can be indicated as suits the case.

Conventionally, the relative positive/negative value assigned is from the Storyteller's perspective.

PRACTICE NOTE: To indicate previous behaviour, encircle the Marker with a dashed line.

B.3. THE INTENSIONAL ELEMENTS

ROLE MARKERS



A Role is a characteristic relational function that an individual plays in someone's life.

LSB **Role Markers** are small, illustrated white cards depicting a range of common roles or functions.

Role Cards may be used to describe roles others play in the Storyteller's life, or roles that the Storyteller plays in someone else's life. When appropriate they are also used to indicate roles between people other than the Storyteller, when this has significance to the Storyteller's life. An example could be, *"Person X is my mother's spiritual leader and she does everything he says but I don't trust him."*

The fulfillment of roles may be mentioned spontaneously in the course of the session, such as if the Storyteller mentions an inspiring teacher. Also, the Guide and Storyteller might look together at the **Roles Guide Sheet** after the LSB has been populated with Person Cards, to identify who, if anyone, occupies the various roles.

Typically a **Role marker** is placed on or near the relevant **Person Card**. Person Cards for people not previously mentioned can be added at this time as needed.

Intensity / importance can be indicated with symbols such as --, ++, 0, +++.

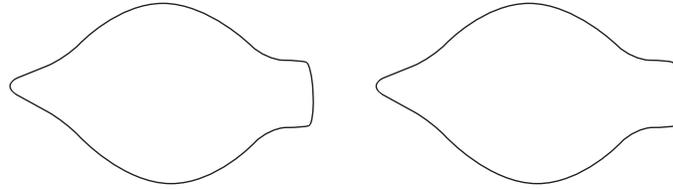
When someone played a given role in the past, but not now, you can draw a line across the card, or use an '--> arrow marker, to mean 'S/He left that role.'

In the small box at the bottom right of the **Role Card**, you can draw an arrow to indicate whether the Card shows a role that someone plays in the Storyteller's life - inward pointing arrow; or whether it is the Storyteller who plays this role for someone else - outward pointing arrow.

When specific enquiry makes it clear that a role is unoccupied, and this lack is perceived as significant, place the corresponding **Role Marker** in the **Hollow Zone**. For example, the ST might say, “There’s no one who really pays attention to me.” or, “I don’t know anyone I want to be like when I grow up.”

Ensure the Storyteller understands that this represents a possible Role that nobody is currently occupying. As with all Markers placed in the **Hollow Zone**, noting this absence may help in identifying risks and resources, and in generating ideas for useful actions or directions, for example, to find a mentor

FEELINGS CARDS



Feeling Cards come in two colours: Yellow for the Storyteller’s feelings, Blue for other people’s feelings.

Feeling Cards are placed on the LSB pointing towards the ‘object’ of the feeling described. They may be used to identify feelings associated with a specific person by placing them next to the relevant Person Card, or by writing the initials of that person on the Card.

Feeling Cards can be added to the LSB as they are mentioned by the Storyteller, and/or after looking together at the Feelings Guide Sheet.

The **Feelings Guide Sheet** provides a list of broad feeling categories, and words for a range of feelings within those categories. Consulting the **Guide Sheet** together may help the Storyteller identify and describe their feelings with more specificity or degree of intensity than their language initially conveys. For example, ‘sad’ might mean anything from ‘mildly upset’ to ‘totally grief-stricken’.

Feelings can be noted in various ways, either simply with the Feelings Card, or by adding a drawing and/or text descriptor to it. For example, you might draw an emoticon for ‘Sad’ and add text ‘in mourning’. The LSB Toolkit also includes sheets of labels printed with icons for some feelings, which can be added onto the cards.

PRACTICE NOTE: *Developing a full set of Feeling Icons is one of our current ‘works - in - progress’, so we encourage you and your clients to work together inventively to create depictions of feelings that have personal resonance and meaning.*

INTERACTION CARDS



Dynamic qualities of interactions between individuals or groups are indicated through the use of diamond shaped *Interaction Cards*.

Yellow diamonds describe relationships between the Storyteller and others, while blue diamonds reference relationships between others, i.e. not including the Storyteller.

Place the *Interaction Cards* on the LSB between the relevant Person Cards. If the Cards are not adjacent on the Board, you can indicate to whom the *Interaction Card* refers by placing it close to one of the *Person Cards*, and linking it to the other with a drawn line or *Clay Tag*.

Depict the nature of the interaction on the card either using the standardized symbols on the *Interactions Guide Sheet*, creating your own symbols and drawing, or with words.

THEMES



The LSB Toolkit includes a set of labels printed with graphics representing some common themes, such as Violence, Alcohol Use, Pregnancy and others. These can be added onto the plain white rectangular magnets, and placed onto the board wherever is appropriate.

A Themes Guide Sheet lists the printed images with their meanings, and as, with the other Guide Sheets may be referred to as a means of eliciting information.

PRACTICE NOTE: *As with the Feeling Icons, we encourage you and your clients to work together inventively to create Theme depictions that have personal resonance and meaning.*

QUALITIES CARDS

QUALITIES

The *Qualities Card (Field Card in portrait layout)* is used to identify personal characteristics (of Self or another person) that the Storyteller considers important: their 'best' or 'worst' qualities, (use a pair of cards to list each), those that affect their life most significantly, that they most strongly identify with, etc.

The *Qualities Card Guide Sheet* presents a list of many traits to use as a help to identifying and articulating aspects of self. There are also suggested questions about personal qualities that can be used in inquiry. Also the Storyteller may mention things about themselves as they speak which can be written on a *Qualities Card* if they are deemed significant.

Once traits have been identified, the session process might look at where these show up in life experiences, how they impact choices and events, and what effect they have in the Storyteller's life, both outwardly and inwardly. Qualities may be tracked across the lifescape with notation, clay, chips, or with *Risk* and *Resource Chips* at the session's end.

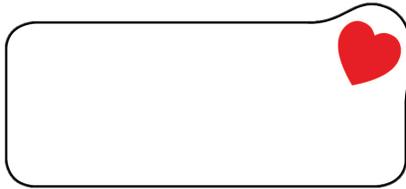
A *Qualities Card* may also be used as appropriate to list someone else's traits, or to track significant things that someone else says about the Storyteller. The latter may be especially useful if the Storyteller feels that how they are perceived and described by others does not match up with how they perceive and describe themselves. For example, the Storyteller might say, *"Everyone says I'm a snob because I never call them, but actually I am just really really shy and I'm scared to call in case they don't want to talk to me."*

The *Qualities Card* may be used, as well, to record the special characteristics of a place, activity or idea.

Labels for the *Qualities Card* are included in the *Labels Set* that is also used for the *Field Cards*.

Typically the *Qualities Card* is placed in the yellow Personal Zone, on the right hand side, but as with everything, may also be placed elsewhere according to what seems most appropriate in the context of that specific session.

ESTEEM CARDS



Use the *Esteem Card* to identify strong feelings that the Storyteller has about certain aspects of Self.

If the feeling is a negative one, such as *'I hate that I'm so bad at sports!'* then cross out the heart.

The *Self Esteem Guide*, which references many main aspects of life, can be looked over together as part of the session inquiry, and the Storyteller's significant responses noted on *Esteem Cards*. Also, the Storyteller may spontaneously express esteem-related feelings or descriptions of self during the session, in which case the Guide can ask whether it's appropriate to write them on a card to place on the LSB.

Esteem Cards can be placed together in the *Personal Zone*, or anywhere else on the LSB as appropriate.

As part of the session process it may be useful to notice where these views of self arise, how they impact experience, and how they feed back into the Storyteller's self-view.

'SIGNPOST' CARDS SERIES'

The Toolkit includes 4 sets of *Signpost Cards: for Questions, Problems, Insight and Resolve*

There is also a set of blank cards of the same shape, which we encourage you to customize to suit your purposes. Some suggestions are 'Shoes' – the shoes I walk in; 'Hats' – the hats I wear (the roles I fulfill); 'Burdens' - what I carry; 'joys' – what uplifts or carries me.

QUESTION CARD



The *Question Card* can be used to identify questions that the Storyteller has about their life in general, or as the basis of enquiry in a particular session.

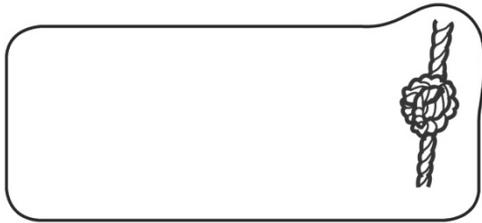
Common life questions might include life direction & purpose, who to be friends with, following traditions vs. exploring new ways, spirituality/religion, sexual/gender identity.

A *Question Card* can be used early in the session to guide the session's purpose. *Clay tags* can then be placed on other Cards on the LSB to identify and track relevant story elements as they are included.

Also, as questions arise throughout the session they can be written on *Question Cards* and placed on the LSB wherever is most appropriate.

The *Question Card* may also be incorporated into the session closure, to identify what the Storyteller may wish to think about afterwards in more detail, or explore in a subsequent session.

PROBLEM CARD

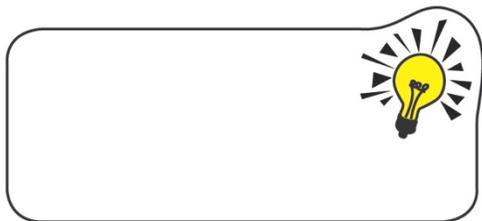


The **Problem Card** is used to note specific difficulties that the Storyteller or someone else important to them is experiencing.

Problems might be identified at the outset, with addressing them being the main purpose and focus of the session.

Or they may come forward later in the narrative process, such as while exploring impediments the Storyteller sees to achieving a particular goal.

INSIGHT CARD



The **Insight card** is used to catch meaningful new ideas, understanding or connections that arise for the Storyteller during the session.

These flashes of insight may occur spontaneously during the process of creating the lifescape, or while reflecting upon it at the end of the session.

Recording these insights, and then copying them to a journal and/or including them in the photo of the completed Story Board contributes to the Storyteller's useful take-away from the session.

RESOLVE CARD



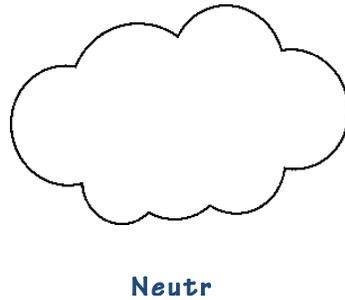
The **Resolve Card** is used to note important new intentions, commitments, changes of attitude or behaviour, or other significant next steps that the Storyteller has identified.

The **Resolve Card** can also be used to indicate where these have happened in the past, for example, "I promised myself I would never let that happen again."

Again, these may arise naturally during the narrative process itself, or intentionally as part of the therapeutic work with the material that has come forward during the session.

As with the other cards in this series, the information recorded on the **Resolve Cards** can contribute to a positive session take-away for the Storyteller, and may be useful as a starting point in subsequent sessions.

THOUGHT CLOUD CARDS



Thought Cards are used to portray the Storyteller's inner thought landscape.

They can be added and written on as expressions of dreams, worries, memories, hopes etc. arise spontaneously, or used in response to guided inquiry about these.

There are three colours of **Thought Clouds**. A suggested coding for them is:

- ❖ Yellow clouds: 'sunny day' things: happy memories, inspirations,
- ❖ White clouds: hopes, dreams, ambitions
- ❖ Grey clouds: worries, fears, bad memories

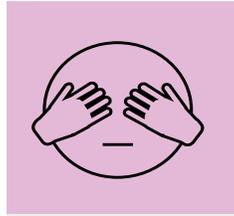
Typically, **Thought Clouds** are placed in the **Personal Zone**, but can also be put anywhere else as well. For example, they might be placed near a relevant **Person Card** if the content is directly connected to them.

They can be added and written on to record information spontaneously expressed, or used in response to guided inquiry. Typically, **Thought Cards** are placed in the **Personal Zone**, but can also be put anywhere else as well. For example, they might be placed near a relevant **Person Card** if the content is directly connected to them.

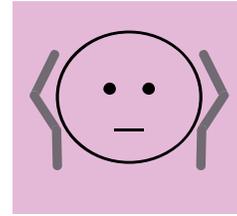
SECRETS CARDS



“I don't want to tell”



“I don't want to look.”



“I try to block this out.”

Secrets Cards are used to indicate that there is something that the Storyteller is not willing or ready to disclose further. Such a card can ease the Storyteller's discomfort and hesitation by acknowledging that there is some important aspect of their life story or situation that for some reason they are keeping secret, and are not required to disclose in order for the session to continue.

Without disclosing the actual content of the secret, the Storyteller can simply indicate that one exists, and the LSB layout can continue to unfold. In this way the *Secret Card* acts as a powerful placeholder.

When introducing the LSB at the beginning of the session, mentioning that the Storyteller is free to use *Secret Cards* whenever they don't want to reveal details helps to create an atmosphere of trust and reduced anxiety.

The Storyteller may wish to return to the secret later on the session when they're more comfortable, in subsequent sessions, or perhaps not at all. In any case, the *Secret Card* facilitates depicting the narrative at a comfort level that suits the Storyteller, and the existence of something significant is noted even without any details being revealed.

DIRECTION ARROWS



Arrow Cards can be used in several ways, such as to:

- Indicate causal connections such as how and where one thing led to another
- Lay out a path or action plan, such as steps to get from present situation to future goal
- Explore alternative options and likely outcomes
- Emphasize links between various Elements

Yellow = Storyteller's actions/path/intentions

Blue = Originates with another person

RISK AND RESOURCE CHIPS



There are 20 each of *Red Risks* and *Yellow Resources Chips*.

'Risks': sources of threats to the Storyteller's safety, or personal integrity and wellbeing

'Resources': positive elements that support, help, and further the Storyteller's wellbeing

Chips are placed in the 'personal' zone (yellow) for identified risks or resources within themselves, that is, personal attributes, qualities, behaviours, feelings about self, etc.

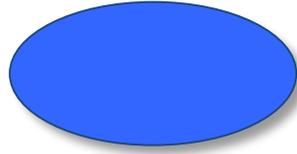
Typically the *Risk* and *Resources Chips* are used after everything has been laid out on the LSB. The Storyteller and Guide together can look over and reflect upon the *lifescape* with a view to identifying within it the inner and outer dangers and strengths it reveals.

The Storyteller can then place the *Chips* wherever these risks and resources are contained. They can go in the *Personal Zone* on the *Thoughts, Traits, Esteem* or *Body Map Cards*; or in *Family* and *Community Zones* by the relevant *Person, Activity* or *Behaviour Cards*.

Note: Using all 2 x 20 chips may be misleading if someone has many risks and few resources, or vice versa. If there is an imbalance, the overall number of *Chips* placed should accurately reflect this.

Then, place any unused *Chips* in the *Hollow Zone*, so their absence from the Storyteller's life, for good or bad, is depicted.

WILD CARDS



Use *Wild Cards* to depict anything significant to the narrative that does not fall into any of the other Element categories.

Wild Cards can be used to represent objects, concepts, experiences or 'entities' in any realm.

Appendix B

Subject: Ethics APPROVED - NAPASTIUK

Dear Pavlina,

The research ethics application has been APPROVED for your study:

Title: The Met and Unmet Mental Health Needs of Vancouver's Homeless Youth

Funder: na

Effective: Sept 23, 2014

This email is sufficient notification of approval.

Within approximately one month, you will receive emailed information from Jeta Rugova-Plakolli, our ethics assistant. Following this, a Certificate of Approval will be mailed to you at the address provided on the application.

Please contact me if you have questions or concerns.

Wishing you success with your study,

Shannon

Shannon McDonald, B.Sc., M.A.

Human Research Ethics Facilitator | Office of Research Services | University of Victoria | Room B233, Administrative Services Building

3800 Finnerty Road | PO Box 1700 STN CSC | Victoria, BC | V8W 2Y2 Canada

Phone (250) 472-5555 | Fax (250) 721-8960 | Email hre@uvic.ca

We are in the Administrative Services Building on Ring Road

<http://www.uvic.ca/buildings/ssb.html>

Our Website, forms, and guidelines are located on:

<http://www.uvic.ca/research/conduct/home/regapproval/humanethics/index.php>

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Appendix C

Napastiuk, Pavlina
Thesis Project: MSW
School of Social Work

The Met and Unmet Mental Health Needs of Vancouver's Homeless Youth Guided Questions

Session 1:

After we review the consent form I will go over these questions with you the participants.

- Are you 19 years of age or older?
- Are you currently homeless?
- Does the Life Story Board™ and my explanation of it make sense to you ?

Session 2:

- So we have signed the consent: now we will be playing this board game with you. (Now show Description of LSB™ again.) Are you still feeling comfortable with proceeding/ going on from here?

- How long have you been homeless for?
- Tell me what your living situation was at the time you ended up becoming homeless – who was there with you? What was going on? Where were you?

How old were you? Where were you living? What were you doing – were you in school or skipping? Why?

Since becoming homeless what's happened to you?

What's your living situation?

Who are you connected with? Do you have friends or social circles?

In your current situation do you have anything like a caseworker or someone who is in a position to help you control you/ direct you?

What are those relationships like?

- Do you feel you have a safe place to process/ deal with your feelings now?
Who do you feel supported by – workers, friends etc.?

- What is going on for you now? What's going on in your life now, especially re. your psychological life/ issues? (Do you want more help with this stuff? What would help? What's going on in your life now that's helping with your met and unmet psychological stuff? Who knows what's going on?)

- Are there people there to help you sort through your psychological stuff?/ - Are you dealing with this 'stuff' by yourself or are people helping you?

- Have you ever had contact with a mental health clinician/ worker?
Would you like to? If you have what does that feel like for you? What does it look like?

- How do you feel your homelessness is impacting your mental health?

- Do you feel you have a safe place to process/ work through your feelings?

- Are you currently using (today)/ Do you feel well in your mental health today?

What would it look like in the future if there were people – case workers social workers, doctors – who were there to help you?

- On a scale of 1-10 how much have you enjoyed playing the game today? Why?

- Did it help you talk about homelessness and mental health today and why?

- What did you like about it and what didn't you like?

Appendix D

**University of Victoria, School of Social Work:
MSW Program**

Participant Consent Form

Project Title: The Met and Unmet Mental Health Needs of Vancouver's Homeless Youth

Researcher: Pavlina Napastiuk, University of Victoria School of Social Work,
napastiuk@uvic.ca

Supervisor: Jeannine Carriere, University of Victoria School of Social Work,
carriere@uvic.ca

Purpose(s) and Objective(s) of Research:

For my Master's in Social Work project I will look at the met and unmet mental health needs of homeless youth in Vancouver. (Which services are working for you and what you'd like to see more of?) My plan is to interview (by playing a board game) about 4 homeless youth trying to find mental health treatment and who are clients of Covenant House, a youth homeless shelter and outreach program. The staff there will help me in connecting with these youth. I will use a Life Story Board™, a board game first created to help young people with opening up about past events in their lives. I then plan to turn my findings into a manual, which will outline how Covenant House staff can best utilize the LSB™ as a narrative tool. The director of Covenant House is specifically interested in how the LSB™ can be used by staff with the homeless youth (many of whom live with complex histories and mental health needs) his agency serves. The agency is interested in a staff-training manual to outline these details. In terms of my own research, my plan is to find out how I can assist homeless youth access Vancouver mental health resources as expediently as possible. The agency training manual then will include the stories of the youth, who will be identified by pseudonyms (fake names) and their stories then will be connected to the usefulness of the LSB™ as a therapeutic tool (or a helpful tool).

This Research is Important because:

Homelessness has become a big issue in Vancouver, Canada's third largest city. It is impossible to drive through the streets of Vancouver's poorest postal code, the downtown eastside, without seeing hundreds of homeless persons gathered together waiting for food and shelter. Frequently, they are unable to find either. One group, which is overrepresented (way too many of) within homeless statistics (numbers), is youth. They are among the most marginalized (left out) persons in North America. Furthermore, street involved and runaway youth are among the "highest risk, most difficult to access, and least understood populations" (Whitbeck, Johnson, Hoyt & Cause, as cited in Busen & Engebretson, 2007, p. 568). Their marginalization (left out of society) and subsequent homelessness, I hypothesize (guess), are directly linked to their unmet services needs, specifically access to mental health resources (staff). "Runaway and homeless youth have been described as understudied and underserved Rotheram-borus et al., 1994 as cited in Meade & Slesnick, 2002, p. 450). My research then will look at how to best improve these youth's access to mental health resources. Perhaps, wait times are too lengthy or there is need for more mental health outreach services. My hope is that my research will answer some of these questions. In addition, the usefulness of the LSB™ as a tool for youth shelter staff to support their clients may be well timed.

Participation:

You have been chosen as a participant because you fit the criteria of the project; you are between the ages of 19-22, and you are currently living in a homeless way.

Participation in this project is voluntary. It won't impact your dealings with Covenant House or your ability to use its services.

Please note if you sign this form you are agreeing to being audio (voice) recorded.

Whether you choose to participate or not will have no effect on your position [e.g. employment, class standing] or how you will be treated by (Covenant House).

You have also been chosen for this project because currently you are not high or drunk and your mental health is stable/ not out of control.

Procedures: We will meet in person. I will ask a few questions and we will then play the board game the Life Story Board. It is a non-intrusive (not nosy) way to have you tell your story/ your narrative. I will record our session with audio tape. I will then put together my findings into a manual, which will be left with Covenant House staff to help you.

Time: One initial (first) 30 minute meeting in which we talk about the game and go through the consent form together; you then go away and think about it and then if you decide to continue we will meet again for 1.5 hours: sign the consent, ask any further questions and then play the game.

Place: Covenant House meeting room

Compensation: Each participant will receive a \$10 food voucher from Safeway™ so you can buy a meal – this is my way of saying thanks for your time

It is unethical to provide undue money or inducements to research participants.

If you would not participate if the compensation was not offered, then you should decline. I will gift you with a Safeway card for \$10 but it is a thank-you and not a way to get you to meet with me.

Benefits: It is my hope that this research will add to knowledge and policy surrounding homeless youth trying to access mental health resources; as well as to the usefulness of the Life Story Board.

Risks: There are no known or anticipated risks to you by participating in this research **or** [E.G., EMOTIONAL, SOCIAL, PSYCHOLOGICAL, PHYSICAL, ECONOMIC, ETC.] But I will have to share any thoughts of suicide, homicide or any emotionality (lots of crying anger etc.) with the Covenant House staff.

Withdrawal of Participation: You may withdraw at any time without explanation or consequence. There will be no consequences (no flack) if you chose to leave the study at any time, either from myself or the staff at Covenant House.

Should you quit, your information will not be used in the final project and will be destroyed.

Anonymity and Confidentiality: I will keep all data audio and written in a locked cabinet. Pseudonyms (fake names) will be used in the final project: a manual. There is the smallest chance that even if I change the name of all the details of your life (parents, friends, school) someone may recognise your story; although the chance of this is very small.

I will also take a picture of the board after we have finished the game and email you a copy of it. I will also use the photos in my analysis and compilation of my manual.

Initials will be used on the board for yourself or any people or places you refer to so as to respect your privacy.

In addition, I will have to tell shelter staff if you are showing any signs of trauma (talking about super painful things in your life, crying becoming angry etc.)

Research Results will [may] be Used/Disseminated in the Following Ways:

DIRECTLY TO PARTICIPANTS; PUBLISHED ARTICLE; THESIS / DISSERTATION/ CLASS PRESENTATION; PRESENTATIONS AT SCHOLARLY MEETINGS;

Questions or Concerns:

Contact the researcher(s) using the information at the top of page 1;

Contact the Human Research Ethics Office, University of Victoria, (250) 472-4545
ethics@uvic.ca

Consent

You cannot competently consent to participate in this research unless you are sober/mentally stable.

Future Use of Data [IF APPLICABLE] PLEASE SELECT STATEMENT

I consent to the use of my data in future research: _____ (Participant to provide initials)

I **do not** consent to the use of my data in future research: _____ (Participant to provide initials)

I consent to be contacted in the event my data is requested for future research: _____ (Participant to provide initials)

SIGNED CONSENT: Your signature below indicates that you understand the above conditions of participation in this study and that you have had the opportunity to have your questions answered by the researchers, and that you consent to participate in this research project.

Name of Participant

Signature

Date

I also agree that the info I share with you excluding (not) my name and those of my family, schools, friends, associates work places etc. may end up in a 30-page manual that will be given to Covenant House.

Name of Participant

Signature

Date