

Street-Involved Youth Needs and Service Analysis: FINAL REPORT Spring 2011



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EXECUTIVE SUMMARY

BACKGROUND: Not unlike most Canadian cities, and despite a wealth of social services, Thunder Bay continues to be home to a number of street-involved youth. At some point in the social service spectrum, youth's needs are not being met, and as a result their risks are increased.

OBJECTIVES: The Children's Aid Society of the District of Thunder Bay conducted a small-scale study which assessed the services available to street involved youth living in city. The aim was to describe the situation for street involved youth as it appears now. Specific objectives of the study were; 1) to understand youth's knowledge of, access to, and use of social services in Thunder Bay, specifically housing related services; 2) to explore gaps in service that may exist for the street involved youth population; 3) to develop an understanding of the types of services that youth find valuable in facilitating an exit out of street life and limiting their risk while they are/were street involved, and 4) to make recommendations based on evidence informed practice.

METHODS: Focus groups were conducted with over 60 youth who currently are or have experience being street involved. We also conducted key informant interviews with 27 staff from agencies who support street involved youth in Thunder Bay. In addition, we performed a review of the literature and an analysis of evidence informed programming designed for street involved youth.

FINDINGS: Consistent issues identified by both youth focus groups and key informants included suitable housing, skills to maintain housing, challenging processes and policies surrounding Ontario Works, mental health and addiction, access to services, transportation, navigating the social service system, personal safety and lack of fulfilling activities for youth to engage in.

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Ontario Works

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Thunder Bay Counseling Centre

Thunder Bay District Health Unit, Superior Points

Thunder Bay Police Services

Various Youth

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INTRODUCTION

I don't have any money. I've got nothing to wear. I've got nothing to eat. I've got nothing. I want to be like the other children. But I can't. Just look at me. Look, look! Do you see how dirty I am? The people treat me like I am dirty. There's nobody who likes me.” – street youth

In Canada, people between the ages of 16-24 are believed to be the fastest growing segment of the homeless population (Karabanow, 2008). The continued demand for research in this area likely lies in the heightened risks street youth are exposed to compared to their non-street involved peers. Street youth have an increased risk of violence, unsafe and unwanted sex, STI's, HIV, teen pregnancy and suicide (Boivin,

“Street youth have an increased risk of violence, unsafe and unwanted sex, STI's, HIV, teen pregnancy and suicide. The mortality rate in Canada's population of homeless teens is near 11 times the rate of the general population based on the same age and gender.”

Roy, Haley, Galbaud, de Fort, 2005; Dehne & Riedner, 2001; Flicker & Guta, 2008; Mallett, Rosenthal, Myers, Milburn Rotheram-Borus, 2004;). The mortality rate in Canada's population of homeless teens is nearly 11 times the rate of the general population based on the same age (Boivin et al., 2005). In Canada, it is estimated that 10% of shelter users are under the age of 15; with 30% of shelter users between the ages of 15 and 34 (Kisely, Parker, Campbell, Karabanow, Hughes, & Gahagan, 2008). However, many youth do not use homeless shelters and are therefore missed in Census counts (Kisely et al., 2008).

Classifying “street youth”

Street youth are not a homogeneous group; their pathways to homelessness and housing preferences vary greatly. Each youth has a different story as to the circumstances that lead to their eventual homelessness. Some youth are homeless in an absolute sense while others are relatively homeless and have some place to stay, some of the time (Kelly & Caputo, 2007). A large percentage of street youth are/have been involved with child welfare services and are/were placed in foster or group homes which they subsequently leave for a variety of reasons (Status of Women in Canada, 2002; Kelly & Caputo, 2007). Some youth have the opportunity to stay with parents but eventually leave due to relationship breakdown, abuse, or financial constraints, amongst other reasons (Public Health Agency of Canada (PHAC), 2006a). Other youth ‘couch surf’ with friends, relatives or stay at youth shelters; still, there are youth who see no other choice but to sleep outside, under bridges and in parks, mostly for safety reasons and negative experiences at their prior living arrangement.

With regards to research, classifying who street youth are as a study population is complicated. In the literature the definition of street-youth varies widely. Some researchers define street youth under a broad definition of youth who are living or working on the streets (Boivin et al., 2005); while others use specific definitions, such as youth who have spent more than two consecutive nights from home either having been told to leave or without their caregivers knowledge of their whereabouts (Mallett et al., 2003). Other studies have left the definition up to youth who participate in their study to self identify as homeless (Christiani, Hudson, Nyamathi, Mutere, Sweat, 2008), and others have categorized youth into ‘newly homeless’ (homeless for less than six months) or ‘chronically homeless’ (homeless for longer than 12 months) (Rew, L., Grady, M., Whittaker, T., Bowman, K., 2008).

Identifying street youth according to their age is difficult because of the broad classifications that are used. Statistics Canada considers youth 15-29 years old, the

Public Health Agency of Canada identifies youth between the ages of 14-24, while other studies have identified youth as 14-20 (Moss et al., 2004), 12-20 years of age (Mallett et al., 2004) and 13-17 years (Flicker & Guta, 2008).

The characteristics of street involved youth are as diverse as are the means by which they become homeless. Previous researchers have made attempts at classifying the experiences of homeless youth, and studies often mention a homelessness continuum, along which a youth may find him or herself depending on their prior circumstances. Ziefert & Brown (1991) outline a continuum that is particular to homeless youth. First are the *situationally* homeless. These youth are homeless for the first time on account of the loss of a job, the loss of social assistance benefits, or as a result of interpersonal conflict. While they are physically separate from their families, they may continue to have some contact with them. Next along the continuum are the *marginally* homeless. These youth have usually experienced homelessness before, and frequently have had exposure to and experience with substance use and/or mental health issues. They often depend more on other homeless people for support than on family members. If the marginally homeless do not receive support, they may move to the last spot on the continuum and become *chronically* homeless. Here individuals have developed a routine for living on the street, becoming what is often referred to as 'street entrenched'; they begin to identify with street culture and become more accustomed to life on the street than with life in mainstream society.



Ziefert & Brown's Youth Homelessness Continuum.

The reasons that young people leave home are complex and varied. This has led researchers to attempt to classify homeless youth according to the reasons they leave home. Zide & Cherry (1992) developed four categories of homeless youth including those who are: 1) running to (youth who leave home who are looking for adventure, but who

often return home); 2) running from (youth fleeing dangerous family situations; 3) thrown out (youth who are asked to leave home or who are kicked out or abandoned; 4) forsaken (youth who have to leave because their families can no longer support them financially). As cited in Bronstein (1996), other authors have categorized youths into the following groups: youths who maintain intermittent contact with family, youths who have had problematic experiences in residential or foster care, youths who leave home to run away from various form of abuse, youths from other cities or locations, and youths who have been members of homeless families. In a similar vein, Aviles & Helfrich (2004) classify homeless youth as runaways (voluntarily leave home), throwaways (told to leave home, street youth (living on the street), sheltered youth (living in a homeless shelter), and systems youth (wards of the state or foster care youth). The authors are careful to express that these categories are not mutually exclusive.

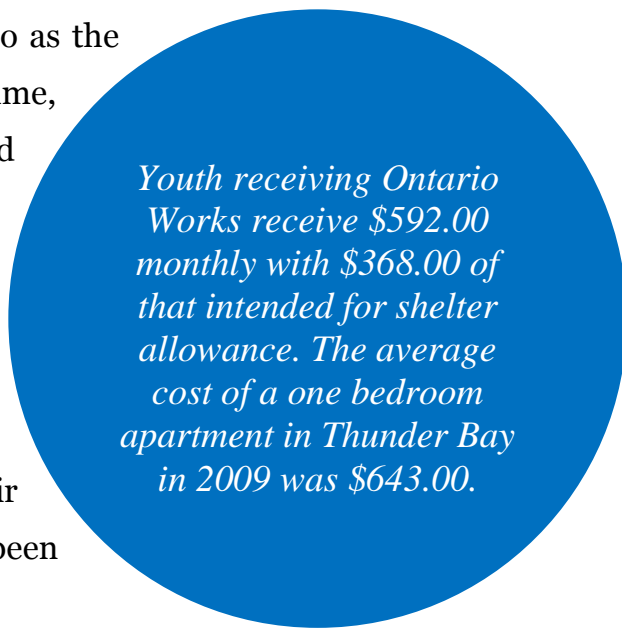
It is well researched that many street youth have tumultuous histories. Many of them have experiences with varied forms of abuse and neglect (Karabanow & Clement, 2004). The effects of these experiences accumulate over time, and may result in developmental delays, a lack of attachment to others, poor social and behavioural adjustment, difficulties with education, as well as psychological and emotional harm (Fitzgerald, 1995). Without well developed coping skills, youth often cope with their trauma through experimenting with drugs and alcohol, which more often than not develops into addiction. Through a series of conversations with street-involved youth, Karabanow (2008) found that, “family life was seen as chaotic, disruptive, and inconsistent, with a lack of love, care, interest, and support from caregivers. For the most part, young people experienced loneliness, boredom, alienation, and neglect (in addition to such traumas as being witnesses and/or victims of violence, abuse, and substance misuse) within their family settings” (Karabanow, 2008, p. 774).

Many street-involved youth endured traumatic experiences that influence the current direness of their circumstances and needs. However, society appears to generally believe that street youth are capable and responsible for the improvement of their own lives, by merit of their chronological age and physical maturity (Fitzgerald, 1995). This is perhaps

the definitive juxtaposition for these youth: while there is an understanding that they are victims and they have been shaped by experiences beyond their control society still believes they should be able to 'grow up' and make appropriate, adult decisions.

Living in poverty

Homeless individuals often come from a long generation of family where supports have been inconsistent or lacking; often referred to as the cycle of poverty (Power & Hunter, 2001). Over time, the root causes of poverty become complex, and create barriers that prevent individuals living in poverty from exiting the cycle; and in many cases homelessness becomes a learned behaviour. In the 2003 Enhanced Street Youth Surveillance Report, 15% of street youth reported experiencing homelessness during their childhood with their families, and 35% report that their parents have been in jail (PHAC, 2006a).



Youth receiving Ontario Works receive \$592.00 monthly with \$368.00 of that intended for shelter allowance. The average cost of a one bedroom apartment in Thunder Bay in 2009 was \$643.00.

For street youth, issues surrounding poverty are exacerbated. Youth who are living in poverty have very distinct needs compared to their non-homeless peers. Instead of being concerned with attending school, maintaining supportive relationships and their health, street-involved youth are more focused on meeting their daily needs; for instance, securing food and shelter instead of attending or studying for school.

If youth are living on their own, they are responsible for securing their income. Many youth living in poverty, choose to access Ontario Works (OW) until they finish their schooling, training, find a job, or become healthy enough to take on the responsibility of work. In addition to allowing youth some independence or the choice to leave a disadvantaged and troubled childhood home, one advantage to receiving Ontario Works is the full health coverage recipients receive. However, being a recipient of

social assistance also requires fine tuned budgeting skills, which youth living on their own for the first time find difficult. They experience feelings of loneliness, self-doubt, and often lack the necessary skills required to maintain an apartment, shop for groceries, make meals and arrange utilities, not to mention abstaining from high-risk and criminal activities. A single youth living in Thunder Bay and receiving social assistance receives a total monthly income of \$592.00, leaving youth with limited options for housing. The average cost of a one bedroom apartment in Thunder Bay in 2009 was \$643.00 (TBDSSAB, 2011), often with the addition of utilities. Frequently, youth opt to rent from rooming houses instead of apartments, or maintain live-in relationships where expenses can be shared.

Due to funding limitations, most youth need to work to compliment the social assistance they are receiving (Shultz, 2006). Youth frequently face employment discrimination because of their age and work inexperience. Youth receiving social assistance income are obligated to report any work they have been paid for to Ontario Works where they risk being “cut off”. As a result, many youth turn to methods of work which they feel they do not need to report to Ontario Works such as labour jobs, under the table work, or illegal activities. The Enhanced Surveillance of Canadian Street Youth (E-SYS) is an ongoing multi-centre initiative that collects and distributes comprehensive data on Canadian Street Youth. In the 1999-2003 cycle of the Enhanced Surveillance of Canadian Street Youth (E-SYS), of 4334 street youth surveyed, 556 (13%) reported their primary income as illicit behaviour (sex work, stealing or drug dealing), (PHAC, 2008).

Due to the risk of losing their social assistance, there is little incentive for these youth to find legal work. If youth are living on their own and they are receiving Ontario Works, they will lose their income assistance in addition to their drug and dental benefits if they report any kind of supplemental income. Youth are not proud of the unconventional methods they use to make their income; 83.4% of males and 87.8% of females said they would prefer to find legitimate paid employment and, 51.8% of this

sample said they thought being employed in any job was better than receiving social assistance (National Homeless Initiative, 2004).

In one study, the predominant factor preventing youth from getting a job was having no fixed address (45.2%), followed by lack of work experience (43.3%) and not having regular use of a telephone (44.5%) (NHI, 2004).

First Nation Street-Involved Youth

While the exact number is unknown, there is a perception that many street-involved youth in Thunder Bay are of First Nation descent. Where any race is represented disproportionately, there are likely to be structural factors to consider.

According to the Ontario Federation of Indian Friendship Centres (OFIFC), poverty among Aboriginal people is rooted in “multi-generational experiences of residential schools, wardships through child welfare systems, and economic and social marginalization from mainstream Canadian society. . . For reasons none other than [being Aboriginal], Aboriginal people have, for generations, grown up poor” (OFIFC, 2000, p.21).

The overrepresentation of First Nation citizens among the homeless has being documented in various Canadian cities. In Hamilton, for example, only 2% of the population identifies as having First Nation status, yet 20% of the homeless are First Nation (Social Planning and Research Council of Hamilton-Wentworth, 2002). In Winnipeg, 75-80% of the homeless population is First Nation (Winnipeg Research Demonstration Project, 2011). Closer to Thunder Bay, the Sioux Lookout Homelessness Committee cites that 99.9% of the homeless in their town are from First Nation communities (2002).

There are various structural and sociological roots to the overrepresentation of First Nation people within the street-involved and homeless populations. Risk factors that

affect the non-First Nation population, such as the lack of affordable housing, poverty, mental health issues, substance use, and domestic violence, affect First Nation people at higher rates (Sider, 2005), putting them at a greater risk of becoming homeless. Sider further cites risk factors that are predominantly experienced by First Nation populations that amplify the likelihood that they will experience homelessness or street involvement, including migration, asset impoverishment, welfare dependency, discrimination, and the destructive impacts of the residential school system (2005).

Residents from Northern First Nation communities travel to Thunder Bay for a variety of reasons. Thunder Bay is a hub for resources of all kinds, and many people come to the city in order to access medical services, social services, legal services; some people are here to shop, attend meetings, visit family, participate in employment related activities, and social activities. For reasons almost as varied as the reasons people come to Thunder Bay, many people decide to stay in Thunder Bay.

Rural to urban migration patterns are often consequences of depressed conditions, job shortages, poor housing conditions, and a lack of services and opportunities on reserve (Falconer, 1990; Morrow, 1990). In terms of housing, one report reveals that there is a shortage of 85, 000 houses on reserves, and 44,000 houses need renovations (personal communication, Infrastructure and Housing Secretariat, Assembly of First Nation, 2011). With hope that the housing situation will be better in the city, some people leave their home communities to try to re-establish themselves in Thunder Bay.

Young First Nation people who leave their communities to migrate to Thunder Bay may be unprepared for the realities of urban life. They may arrive without identification which may prevent them from accessing a range of social services. They may not have family or friends in the city, or, the people whom they thought would support them may chose not too or may no longer be able to. Some young people may

be fleeing violent situations, or may be forced out of their communities for being perpetrators themselves. Or they may simply be craving the emancipation that many of us yearned for as young people. Whatever the case may be, First Nation youth are choosing to leave their home communities, and often with good reason. With little in terms of transitional support, some First Nation youth find themselves without access to or knowledge of appropriate resources and consequently become street-involved. For an in depth review of the literature and history of First Nation homelessness, please see Sider, 2005.

Living on the street and length of time on the street

Researchers have found that the longer youth stay on the street, or have no stable residence, the more risky their behaviour becomes (Tyler, 2008). For instance, chronically homeless individuals (homeless for greater than 12 months) report lower levels of social connectedness, more sexual-risk taking behaviour and lower intent and self efficacy to use condoms than their newly homeless (homeless for less than six months) peers (Rew et al., 2008), increased personal victimization (Tyler et al., 2000), and regular to heavy substance use (Rhule-Louie, Bowen, Baer, & Peterson, 2007).

Evidence shows that if youth living on the street do not receive supports that enable them to get off the street within the first week of being homeless, they are much more likely to live long term on the streets (Health Initiatives for Youth, 2008).

Safety on the street

In most cases, a life on the street is more dangerous than many of the homes street youth leave. In 2004, 45.7% of street-youth report being attacked in the past year, compared to 6.3% of their non-homeless peers (NIH, 2004). When asked how safe street youth felt where they were currently living, 52% of respondents felt completely safe, 34% felt quite safe, 12% reported feeling somewhat safe and 2% felt completely unsafe (Erickson, 2008). Females experience increased risk compared to their male

peers. Of 150 youth surveyed (75 males, 75 females), 27% had been physically hurt by their partner (33% males), 30% had been threatened (males 7%), and 18% had been sexually assaulted (males 1%) (Erikson, 2008).

Extreme consequences of decisions

Many homeless youth emerge from home lives shaped by chaos, neglect, danger, loneliness, and alienation (Karabanow, 2008). The choice to leave, or the experience of being kicked out, would be difficult for most, but may be especially hard for young people who may lack self confidence and are not fully able to understand the circumstances that lead to the separation. Adolescence is a time of angst and deviance, where youth experience great sensitivity and emotional change (Dworetzky, 1984; Frydenberg, 1999; Greenblatt and Robertson, 1993) and a time where the most important and influential people in your life are your friends. Most adolescents are able to cope reasonably well and develop a system of values and establish a secure sense of self and identity (Greenblatt & Robertson, 1999), healthy self-esteem and the ability to care for themselves (Anderson & Olnhausen, 1999).

It is widely accepted, however, that support from adults is required in order to develop the skills and capacity necessary to graduate successfully into a healthy adult (Anderson & Olnhausen, 1999; Gilligan, 1999; Greenblatt and Robertson, 1993). Street youth do not have consistent access to a supportive adult, and often have more difficulty developing into adulthood compared to non-homeless youth (Lewis & Sullivan, 1996). A youth with a hindered development is rendered even more disadvantaged when placed in a street context; decisions that are made, especially poor ones, generally have much greater consequences for street youth, who may still have a difficult time anticipating the impact of their actions. Poor decisions and a certain degree of deviance may be natural and even constructive aspects of adolescence (Chassin, Presson, & Sherman, 1988; Williams, Holmbeck & Greenley, 2002), but for youth who are street involved, the results can be detrimental, leading to eviction, loss of financial support, loss of shelter, and potential loss of service.

Social networks

Youth who are street-involved have generally experienced a high degree of family breakdown and as such have limited or no contact with their immediate family. In place of family; peers and friends with whom street-involved and homeless youth feel a sense of belonging become important and these social networks can be protective to the wellbeing of youth (Berdahl, Hoyt & Whitbeck, 2005). For instance, youth who report close ties with their social network are less likely to have sex with multiple partners or participate in sex-trade acts; whereas youth lacking a social network have an increased likelihood of engaging in risky sex and drug use when compared to youth with social networks (Ennett, Federman, Bailey, Ringwalt, & Hubbard, 1999). Conversely, social networks can be harmful in that they have the ability to coerce, demand and degrade youth into engaging in high-risk activity, such as selling and using drugs, gang related behavior, crime and survival sex (Tyler et al., 2008).

Education level

Increased educational attainment is particularly important to maintaining one's wellbeing because it forms behaviours that increase an individual's ability to be self aware and proactive in terms of their health. Individuals who have completed high school detect unusual symptoms earlier, seek out information on questions they have regarding their health, have better coping strategies and adhere more closely to treatment regimes than those with less than high school education (Mechanic, 2007). Many street-involved and homeless youth have limited interaction with the school system. In 2003, 25% of street youth aged 18 or older had completed Grade 12, 40% reported they had dropped out of school permanently and 37% reported being permanently expelled from school (PHAC, 2008). In one study, a significant proportion of youth who had 'dropped-out' were shown to have anger management issues (25.6%), Attention Deficit Disorder (19%) and Hyperactivity (15.2%) (NHI, 2004).

Involvement with Child Welfare Services

Youth who have been in foster care are overrepresented in the homeless population (Penzerro, 2003; Duval & Vincent, 2009). One Canadian study found that of almost 700 homeless youth, 68% had come from foster care, group homes, or a youth centre (Youth Homelessness in Canada, 2008). Another author estimates that more than half of the street youth population are former children in care (Covell, 2010). For the majority of children, foster care provides stability and protection while parents engage in treatment or other possible corrective measures in preparation for the return of their children, but for some, foster care can be a very negative experience. As Duval & Vincent (2009) summarize:

“Children from abusive and neglectful home environments have often experienced a life of uncertainty, fear, and chaos with insufficient opportunity to feel a sense of comfort and safety as well as responsiveness to their need to be acknowledged, praised, and supported. Once in the custody of the child welfare system, these children are prone to struggles with grief, loss, and ongoing disrupted attachments. Further, it is possible that their need for connecting with another and experiencing a sense of calm and reflection may not be met in the child welfare system either or it may be repeatedly disrupted. Additionally, children may be maltreated by their substitute caregivers, possibly experience placement instability, and exhibit a range of emotional and behavioural problems as a result”. (p.156)

The most prepared and therapeutic foster homes experience difficulty accommodating the physical and emotional needs of children who have endured significant trauma. At times this can lead to a child being transferred to another foster or group home. Although it is rare, there are instances of abuse within foster homes and group homes. Youth who have experienced abuse within their foster homes are most likely to end up street involved (Martijn & Sharpe, 2006). Some researchers suggest that youth in foster care may begin to develop patterns of

estrangement that are characteristic of the ‘career homeless’ long before they begin to live on the street (Penzerro, 2003; Piliavin, Sosin, Michael, Westerfelt, & Matsueda, 2003). As a result of numerous transitions from one foster placement to another, youth experience an eventual identification with a drifting lifestyle. A strength of the Children’s Aid Society of the District of Thunder Bay is their efforts in limiting transfers of youth in care. In 2007, the average provincial frequency for a placement change was 23 months, while in Thunder Bay, the average frequency for a placements change was 42.5 months (Crown Ward Review, 2010). Foster care does not cause homelessness; rather it is one component in a web of social, institutional, and familial failures that may affect children (Roman & Wolfe, 1997).

Many child welfare agencies have attempted to improve the situation for foster youth by implementing strategies to better prepare youth for their eventual emancipation from the system. In Ontario, youth in foster care are eligible to receive Extended Care & Maintenance (ECM) once they turn 18 until the age of 21. ECM is intended to provide financial and emotional support to youth as they transition to independent adults. Some research indicates that more focus should be given to the examination of psychological functioning and the emotional well-being of youth prior to emancipation as this may be a better indicator of successful transition (Duval & Vincent, 2009).

A study by the National Alliance to End Homelessness (Roman & Wolfe, 1995) suggests that more attention be paid to the potentially damaging effects of not attending to the past traumatic experiences of youth. These researchers claim that, “foster care has an impact on personal risk factors that may eventually result in homelessness and the system often fails to help children deal with problems that resulted from circumstances which caused them to be removed from their homes and fails to help them deal with problems that arise in care” (p. 3). While financial and emotional support is important to youth who are transitioning from foster care, child welfare agencies may not be well enough equipped to appropriately treat youth who

have histories of psychological trauma. Simply put, it may be that child welfare agencies are not designed to deal with the problems and needs of traumatized adolescents (Fitzgerald, 1995; Serge, Eberle, Goldberg, Sullivan, & Dudding, 2002)

While some provinces have extended their child welfare legislation to include children from 0-18, Ontario Children's Aid Societies are only mandated to respond to the needs of children 0-16. If a youth who is 6 months past their 16th birthday is being abused by a parent in Ontario, he or she cannot be protected under child welfare legislation, unless he or she is already under the protection of the agency prior to turning 16. Many young people in this situation are required to leave home for their own safety, but are up against enormous barriers: no government mandated agency is required to support them; Ontario Works will require them to have a trustee in order to receive welfare (this is often problematic); many landlords will not rent to anyone under 18 or anyone without references.

Substance use

Rates of smoking, illicit drug and alcohol use and the adverse consequences of their use are extremely high in homeless youth. On average, 80% of street youth report smoking, compared to 15% in the general youth population, although the street-youth smoking rate has decreased from 84.3% in 1999 to 78.8% in 2003 (PHAC, 2006b).

Compared to youth in the general population, Canadian street youth are 11 times more likely to die of a drug overdose (PHAC, 2006c). The 2003 E-SYS revealed that the use of any drug remains high in street-involved youth (95.3%), (PHAC, 2006c). An average of 82% report regular use of marijuana in the past twelve months, compared to 37% in the general youth population (PHAC, 2006c). Alcohol use among street youth is also moderately high; 30% of youth report drinking at least once a week and 5% reporting drinking on a daily basis (PHAC, 2006b).

Most street youth use substances as an outlet for dealing with the stress of living on the street and as a method of connecting with and being accepted by peers (Rhule-Louie et al., 2008). Substance use is particularly harmful to youth who lack supports because its use has been shown to lengthen an individual's time of living on the street (Thompson, McManus, Lantry, Windsor, & Flynn et al., 2006) and increases a youth's association with peers who report weekly use of drugs or alcohol (Tyler et al., 2004). Alcohol and drug use has long been assumed to be harmful to the physical, and mental health, and overall well-being of youth; for instance it leads to premature death, the presence of chronic conditions like diabetes or heart disease and suicidal tendencies (Benoit et al., 2008). The long term consequences of alcohol and drug use have not been examined in this population. Regular alcohol use by a youth has also been associated with expulsion from school, experiencing abuse, involvement in the sex trade and having been in a corrections facility (PHAC, 2006b).

Characteristics of Thunder Bay youth drug use behaviour

The recently completed Thunder Bay Drug Strategy found that OxyContin use is higher for Thunder Bay youth (3.1% reporting use) compared to 1.6% of their provincial counterparts, as well as cocaine use (4.1% for Thunder Bay youth) versus 2.6% among the province. Substance-related mental health disorders have also shown to be higher in our region for both adolescent (14 to 19) males (33% as compared to 21% provincially) and females (18% as compared to 12% provincially) (Draft Thunder Bay Drug Strategy, 2011).

Substance-related mental health disorders are elevated in the Thunder Bay region for both adolescent (14 to 19) males (33% as compared to 21% provincially) and females (18% as compared to 12% provincially). Over 2008 and 2009, 2,215 individuals were served at the Sister Margaret Smith Centre, a centre focused on the holistic therapy of alcohol and drug dependency. Adults aged 25-54 accounted for the majority of clients served at the centre (67%); youth 24 years of age and under accounted for 23% of the clients served while older adults represented 10%. In 2008/09, the youth 16-24

accounted for the highest percentage of clients accessing community substance use treatment (25%) while adults 35-44 years followed closely at 24% (Draft Thunder Bay Drug Strategy, 2011).

Use of the health care system

Because they face increased health concerns, street involved individuals access health care services more often than non-street involved individuals. The cost to the Canadian government of individuals living on the street is significant. The average homeless person uses about \$4,714 in health care expenses every year, compared to \$2,633 by the average Canadian (NHI, 2004). Inconsistent use and/or lack of access to health care can allow for a manageable and treatable illness, to go for long periods of time without treatment, and sometimes by the time homeless individuals' access health care, their health concerns have spiraled to the point where they have limited treatability (Crowe, 2007). It is also difficult for individuals living on the street to maintain a home address, telephone number and thus maintain a valid health card.

For the most part, health care utilization among the homeless youth population is sporadic. They largely access hospitals and primary care clinics, and it is difficult to do follow-up care with street youth as they tend to be transient, have a difficult time keeping appointments and can rarely be contacted to receive reminder calls about upcoming appointments (Christiani et al., 2008).

Limited access to cohort-specific health services

In Thunder Bay, youth have limited choices for cohort-specific service. Compared to many of the provinces' larger cities, Thunder Bay's youth-specific health and social services are lacking.

Youth-specific services are ideal because the needs of youth vary from those of adults, in that they are more timid to make the first contact with a service, have limited trust in service providers they do not know, are afraid they will be asked questions they do

not want to answer (Flicker & Guta, 2008), and that their attendance at a service will be shared with guardians or reported to child welfare services (Christiani et al., 2008).

Youth 16 to 18 face increased barriers to service. These youth are in something of a systematic limbo, where they are no longer considered children but are not considered adults (Conlin, 1993). This sentiment is well documented in current literature (Millar, 2009) as well as in the findings of this study. What remains unclear, however, is whether this is a reflection of societal values around the needs of adolescents or simply an oversight on the part of service providers and legislators. Although every homeless youth has his or her own personal story to tell, according to Parker, “homelessness has less to do with the details of an individual’s biography, tragic as this may be, than with the social and legal context in which the tragedy unfolds. For it is ambivalence about the resolution of central questions of responsibility which creates the holes in the net through which [youth] at risk fall (1999, p. 94).

Trust in service provider

Despite the importance of a trust connection with a service provider, there has been little research investigating the relationship between homeless youth and their service providers. It is essential that youth have someone they feel they can trust because it enhances their overall well-being (Dubois, Neville, Pana, & Pugh-Lilly, 2002; McGrath & Pistrang, 2007; Sale et al., 2008). Street youth often experienced a lack of trust from authority figures as children and in some cases felt abandoned or overlooked by individuals who may have been able to help them (e.g., teachers, foster parents, police), street youth find it difficult to trust services and potential friends for fear that they will be hurt again (Brindis, Loo, Adler, Bolan, & Wassherheit, 2005).

Research suggests that some of youth’s reluctance to engage in service stems from a general lack of trust in formal helping agencies (Bielicki, 1972; DeRosa, Montgomery,

Kipke, Iverson, Ma, & Unger, 1999; Karabanow & Clement, 2004; Ross, 1980; Kidd, 2003) as well as negative first hand experiences (Kidd, 2003). Some youth state that they avoid formal services for fear of subsequent involvement with the police or child welfare services (DeRosa et al., 1999). However, youth do repeatedly emphasize the significance of services that are tailored to their needs and desire more involvement from service professionals, as long as it is in a manner that is empathic and understanding of their situation and not accusatory (Kidd, 2003; Kurtz, Lindsey, Jarvis, & Nackerud, 2000; DeRosa, 1999).

Homeless youth carefully observe service providers before they are willing to trust them and share with them intimate details about their lives (Ulager, Pearson, Tomescu, Hill, Auerswald, & Ginsberg, 2005). Relationships with service providers are typically built over time and through information from friends regarding which providers can be trusted. The lack of initial trust homeless youth have in service providers can prevent youth, especially at risk youth, from seeking the supports they need (Ulager et al., 2005; Flicker & Guta, 2008). As a consequence, youth often make themselves invisible to service providers who may contact child welfare services or police if youth share details about their lives (Kelly & Caputo, 2005). In some cases, street involved youth report feeling as though service providers are not trained to deal with the unique situations in which they are living, cannot speak from lived experience, and often overlook youth-specific developmental needs (Christiani, Hudson, Nyamathi, Mutere, Sweat, 2008). According to DeRosa et al. (1999), “youth attempting to transition off the streets still reported needing more assistance and better guidance. They wanted more help in planning, advice, support, encouragement, and life skills training from service providers” (p.456).

Youth crime

It is difficult to find accurate and current information on youth crime in Thunder Bay because there is significant under reporting of crime. Youth are more likely to commit property crime than violent crime, and property crime is more likely to go

unreported. In addition, because of fear of repercussion (both social and legal), youth rarely report being the victim of a crime, even if it is violent.

While reported youth crime (representing youth under 18) rates in the city represent a decline, currently at 4%, there is interest by some for a 'tough on crime' approach to understanding and dealing with street youth and youth crime. One such measure is the proposal of a possible curfew for young people. This is reflective of the move away from community based support for youth and towards more punitive measures. The perception that youth crime is a growing problem in Thunder Bay may be based more on anecdotal evidence than on hard evidence.

STUDY OBJECTIVES

The aim of this project was to gain an increased understanding of the situation for street youth, to introduce service gaps, to make suggestions for improvements, to make recommendations and to follow them with evidence-informed programming suggestions and options. Specific objectives of the study include; 1) to understand youth's knowledge of, access to, and use of social services in Thunder Bay, specifically housing related services; 2) to explore gaps in service that may exist for the street involved youth population; and, 3) to develop an understanding of the types of services that youth find valuable in facilitating an exit out of street life and limiting their risk while they are/were street involved, and 4) to make recommendations and present program options based on evidence-informed model programs.

METHODOLOGY

“It is what we think we know already that often prevents us from learning.”
- Claude Bernard

METHODS

Population and sample

The population of interest for this project was street involved youth living in Thunder Bay. The Children’s Aid Society of the District of Thunder Bay had a specific interest in finding out more about this population with the hopes of tailoring future programs to their needs.

To be eligible for inclusion in this study, participants had to: 1) be between 13 and 24 years of age, 2) live in Thunder Bay, and 3) identify as *street-involved* – an individual who had unstable housing and spends the majority of their time on the streets and bounces between home, foster or group home, youth shelter or jail; or *homeless* – an individual who had no place to live and as a result lived in abandoned buildings, squats, crowded accommodations, flop houses, outside or in a shelter.

As discussed earlier, the specific ages of street youth the literature identifies as youth varies widely. For the purposes of this project, ‘youth’ were considered to be those between 13-24 years of age, as this accommodates the varying ages in the literature as well as the eligibility for most of Thunder Bay’s youth encompassing social services.

Data Collection

Analysis of the Literature

A thorough review of the literature on street involved youth was conducted to inform the study, as well as to analyze and compare the current situation for street involved youth in other Canadian cities with the situation in Thunder Bay. Best practice guidelines and program models that have been successfully implemented in a street involved youth setting were reviewed to give context to project recommendations. An analysis of the services that directly support street-involved youth, or youth in general was developed. The full Street Youth Service Spectrum Map can be found in Appendix A.

Focus Groups with youth

Focus groups are a method of bringing together specific groups of people to discuss a particular subject under the direction of a facilitator (Rossi, Lipsey and Freeman, 2004). Focus groups can provide wealth of descriptive information about an issue in a short period of time, and give appropriate insights to problems and solutions (Rossi et al., 2004).

Focus groups have a higher response rate than methods that leave youth to follow through on their own (mail surveys/ telephone survey), and facilitators can probe for complete answers, decreasing the amount of item non-response which is especially important when working with a small sample size. Facilitators can also give the focus group setting more legitimacy, in terms of trust, and make the youth participants feel more at ease, and clarify where the terminology is not clear to all participants (Flicker & Guta, 2008). Most importantly, we had the ability to provide referrals to services following the focus groups to increase likelihood that youth will get any help they require.

A number of focus groups were conducted with youth 13-27 who were currently street involved or homeless. Youth consented for their own participation in the focus groups and received \$20 cash and 2 bus tickets for their involvement.

Key informant interviews with service providers

Key informant interviews are qualitative in-depth discussions with community experts whose position or experience provides them with specific knowledge regarding the degree and context of the problem being examined (Rossi et al., 2004). We chose to conduct interviews with key informants because it allowed us to speak in-depth with people from diverse backgrounds and opinions about a specific subject. Community experts can also provide researchers with recommendations and solutions for issues that might not be reached through a traditional survey.

For the purposes of this project we collected information from a wide range of service professionals across all sectors including mental health, youth justice, street outreach, emergency shelter, income support, social researchers, addictions, and policing.

FINDINGS

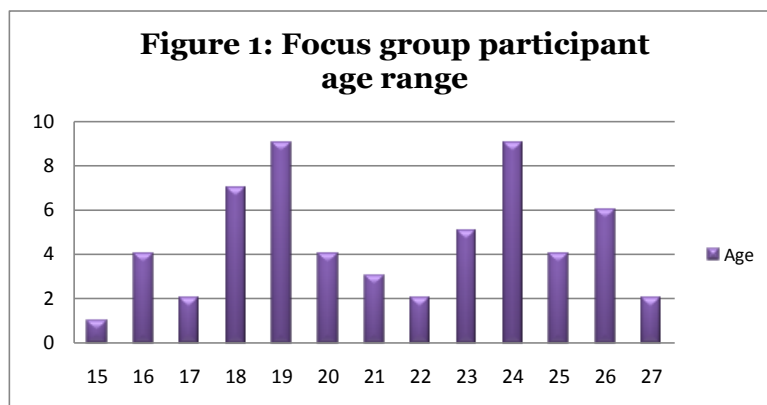
“We may not be able to prepare the future for our children, but we can prepare our children for the future”. – Franklin D. Roosevelt

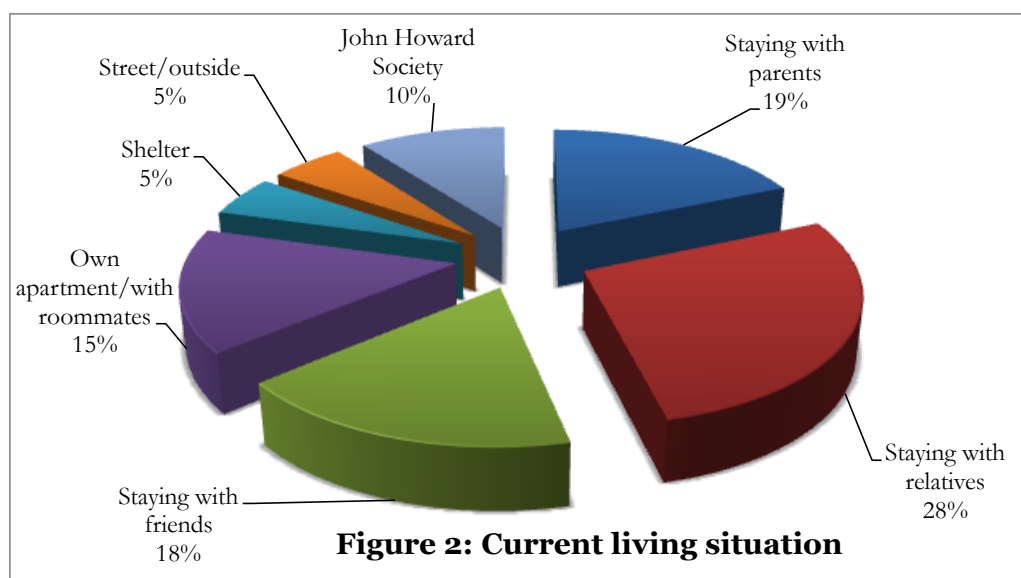
KEY INFORMANT INTERVIEWS

We interviewed 28 key informants who represent agencies working with street-involved youth in our community.

YOUTH FOCUS GROUP DEMOGRAPHICS

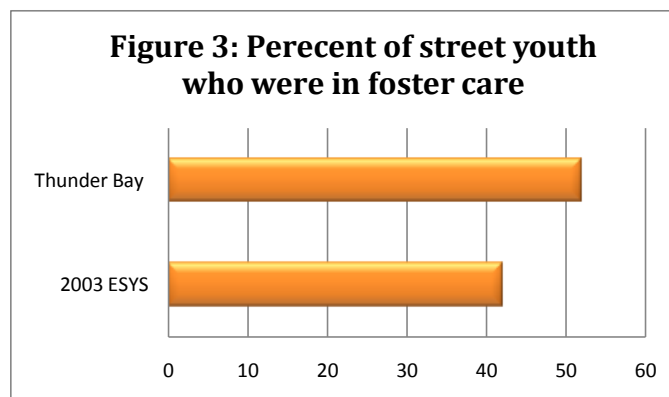
We asked youth to self identify as street involved. We interviewed a total of 61 youth, 35 males and 26 females. The age ranged from 15 to 27 with a mean age of 19 (see Figure 1). The main current living situations identified by youth we spoke with were staying with relatives (26%), living with parents (18%) and staying with friends (16%). A small number of youth reported having no where to stay, and were staying on the street (5%), or in shelter (5%) (see Figure 2). Of the youth who participated in the focus group, 69% had experienced unstable housing in their lifetime (having ever staying overnight in a shelter, outdoors, in an abandoned building or couch surfing). Of the youth we spoke with 52%, had lived in a foster or group home.



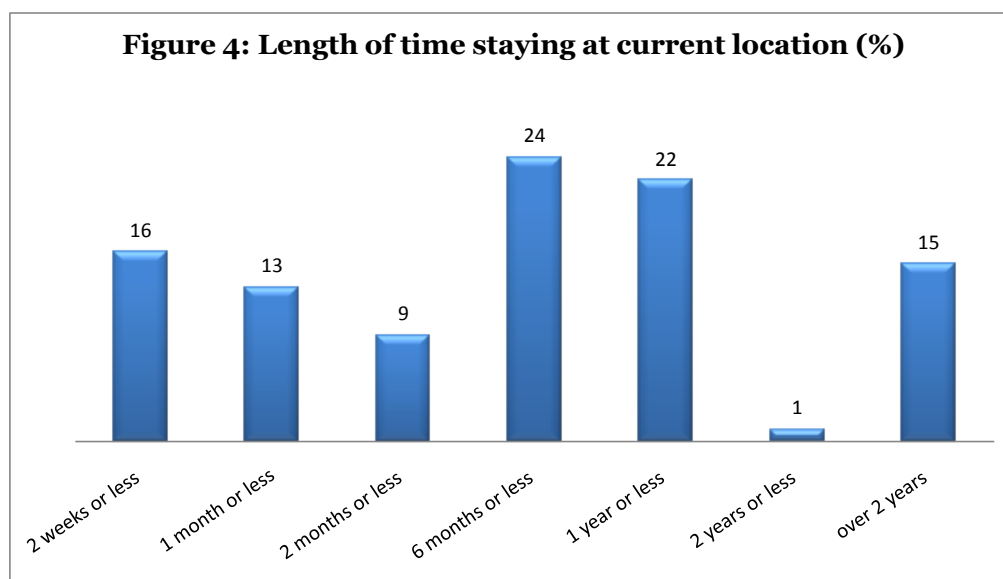


It is well documented that street-involved youth have endured a high stress childhood, frequently including housing instability, neglect and abuse. Statistics collected for this project are reflective of this; more than half of the youth we spoke with have lived in a foster or group home.

The circumstances that lead to involvement with a child welfare agency may be a predictor of street involvement. Life time experience of unstable housing may also be a predictor of homelessness. Experiencing homelessness as a child with their parents or guardians increases the likelihood that a youth will experience homelessness when they are living on their own (Mallet, Rosenthal & Keys, 2004). The 2003 E-SYS reported that in Canada 42% of street youth have lived in foster care. Our study found that 52% of respondents had experienced living in foster care, a 10% difference from the national average (see Figure 3 on following page). It is important to note that youth represented in this average are a snapshot of the street youth population in Thunder Bay, and don't represent all street youths experiences.



We asked youth to identify how long they had been staying at the location they identified as their current living situation. There was a significant proportion of youth who had been staying at the same location for over two years (15%). However, there were a number of youth with more transient living situations, who reported staying at their current living situation for less than one month (13%), and other youth who had stayed in the same place for less than two weeks (15%). See Figure 4 for details.



The age range of focus groups participants (15-27) also indicates that years street youth are spending street-involved are extending into their adult years. A number of explanations for street involvement were discussed in our focus groups and key informant interviews. They are discussed in detail below.

FOCUS GROUP THEMES

A number of themes were consistently identified during the focus groups and key informant interviews. They are discussed in further detail and include specific quotes from our conversations with youth and key informants.

HOUSING

The frustrating search for suitable, affordable housing was identified by both key informants and focus group participants as one of the most prominent issues facing street involved and homeless youth. Youth identified the amount they receive from Ontario Works as insufficient for securing safe and affordable housing. Often youth end up renting motels for weeks to months at a time, which are expensive and increases their level of transience. One key informant suggested that landlords may be intentionally setting their rent levels just above what is affordable for people on Ontario Works:

“It’s almost like the landlords caught on to \$500 plus hydro, or \$550 inclusive, because no one can afford that. Only people who don’t have problems can afford that.”

Another key informant shared their view on landlords:

“I think that landlords are a big barrier; they just don’t want to rent to a lot of people, but especially to youth who may not have a steady income or may look a certain way.”

Many of the youth in the focus groups felt discriminated against by landlords. One youth, for example, stated that:

“That’s where I get discriminated against too, because I am young. They think that you just want to party or something and that you will ruin the place.”

The struggle to obtain housing is reflected in the following interaction between three focus group members:

“You go to get an apartment from a landlord and if you are on welfare they look at you like you are broke.”

“Ya, they look at you different.”

Another youth shared their experience:

“It’s hard to find someone who will accept you for housing. They judge everything – your age, what you look like, how you are dressed.”

“When I take my intent to rent a landlord, they think I’m going to trash up the place.”

Key informants were especially concerned with the lack of affordable housing available to city residents. Affordable housing is a concern for everyone, but youth are significantly affected by the shortage of one bedroom or bachelor apartments, as these units normally qualify under Ontario Works. As one key informant stated:

“I know that in the City of Thunder Bay access to social housing for single individuals is tight, almost nonexistent. So that’s a huge barrier.”

Another observed that:

“Trying to find affordable housing in the city, whether it is market or subsidized, it is pretty tough.”

Most youth we spoke with were aware of subsidized housing and had applied. However, this process was identified as one of a check list of things youth know they

have to complete, but they have limited faith in a positive outcome when applying for housing.

“Like even trying to go to Thunder Bay Housing, they say it is going to take up to a year, so it’s kind of like, you can’t wait a year.”

Finally, this key informant illustrates the situation by saying:

“The wait is too long and there aren’t many places for a single person, they can assist you easier if you have a larger family, but if it is just a single person with a low income, you have slim chances of getting anywhere.”

It is apparent that the stock of affordable housing is inadequate to meet the needs of youth. Both youth and service providers feel frustrated and defeated at the prospect of securing social housing. Market housing is becoming unaffordable to youth and is difficult to obtain, in part due to various forms of discrimination.

Skills needed to maintain housing:

The skills needed to maintain housing and prevent the need for an eviction are generally lacking in the youth we spoke with. Although not acknowledged as a barrier by many of the youth in the focus groups, the issue of life skills frequently emerged within key informant interviews. Service providers suggested that in order for youth to be able to maintain housing, more supports are needed in terms of teaching them specific skills. One key informant noted that:

“If it’s the first time that a youth has lived alone, they need support to learn the skills of what to do – even the basics, paying rent on time, respecting neighbors – support is big.”

Another informant echoed this response by stating that:

“The biggest obstacle is building the necessary supports around keeping someone housed. Housing is way more than just bricks and mortar, especially for youth who haven’t developed certain skills or haven’t been taught all of the things that it takes to maintain a household or to succeed in a household. If you are really serious about keeping a youth housed long term, there needs to be a lot of skill building.”

The idea that skill building should take place in the home of the youth, rather than at a central location is reflected in the idea that Thunder Bay needs more supportive and transitional housing for youth. The need for life skills programming is shared by one professional:

“... it is critical to encourage supports to efficient transitional housing that includes proper role modeling, counseling, and safety. This ‘transitional housing’ is nonexistent in our community. The longer that a homeless youth is left in an unsupported environment, the probability that the youth will engage in risky behaviours is elevated substantially.”

Process involved in securing Ontario Works

For street-involved youth, securing social assistance is necessary before finding housing. Youth in the focus groups shared their difficulties they have experienced with various Ontario Works (OW) processes and policies; specifically long wait times and identification requirements. Multiple youth spoke of extremely long wait times over the telephone while trying to reach someone for screening:

“I have been on hold for 6 hours,” claimed one female youth.

Another remarked:

“I have been trying to get my screening since early January and I just did it yesterday [February 11, 2011].”

Not having proper identification was a considerable problem for a few of the youth, either because they had lost it, or because it was not something they had thought of

finding and taking prior to leaving or fleeing their homes. One male participant remarked:

“I’ve been a ghost in society for years; I don’t have a piece of ID to my name.”

Other youth made similar comments about the frustrating experience of trying to secure Ontario Works, and having to wait more than a month only to acquire the necessary identification for the application, pushing back their access to money even further. In these situations, youth are forced to find other means of acquiring money while they wait for notice about their applications.

Trusteeship

Of special concern to many key informants is the requirement for Ontario Works applicants between the ages of 16 and 18 to have an adult trustee to whom the assistance is paid on behalf of the youth. One informant noted that:

“... these kids are already struggling, so they are going to often pick who they think is the safest or most comfortable [for their trustee], but quite often that person is also disenfranchised so they may take advantage of the youth.”

Ontario Works policy states that trustees must be deemed appropriate by staff or by a physician and while significant effort on behalf of Ontario Works is invested into ensuring an appropriate trustee, the interviewers repeatedly heard about situations where trustees allegedly misappropriated funds that were intended to be distributed on behalf of a youth. Key informants spoke about the difficulty some youth have in securing an appropriate trustee, as noted in the following observations:

“The trustee thing is huge – if you are leaving a home because of addiction issues or abuse issues for example, you don’t have that support from anyone to be your trustee; you don’t have a stable friend or family member, and keep in mind, even if you find someone that you deem as stable, and you bring them to OW, OW may say they are ineligible because they are already

on OW or maybe they have been kicked off ODSP. A lot of these kids that we are working with don't have that support. They don't have an adult who can assist them."

"And another reason why they couldn't get somebody as a trustee is that some of them have come down from Northern Communities that end up at the shelter for multiple reasons, and we tell them they have to find a trustee and they don't know anybody."

Equally telling is the sentiment put forth by this youth:

"You have to have a trustee for practically everything, and if you don't have one, you are basically screwed."

Securing an appropriate and trustworthy trustee proves difficult for many of the youth we interviewed. Some youth come from families where poverty and disenfranchisement has been a problem for generations and are either not in contact with any family or do not have family members that are in a position to help. Many youth admitted that they had given up attempts at securing Ontario Works because they felt as though they would not be able to meet the policy requirements.

ADDICTIONS

Often the first issue identified by youth in all focus groups was addiction. Both youth and service providers were concerned about the impact that drugs and alcohol are having on the community. Many youth in the focus groups identified drugs as the biggest issue affecting youth in Thunder Bay. They shared concern regarding the ease of acquiring drugs, that drugs are 'everywhere', and that getting into drugs leads to a life on the street. One young person observed:

"Addictions. That's why people are homeless, they spend their money on drugs and alcohol and that's where their money is going for rent and stuff. Then they start stealing to do drugs and stuff."

According to one key informant, substance use is common among homeless and street-involved youth:

“I would say 100% of them in my experience; they are struggling with some kind of addiction. They are usually under the influence or trying to be.”

Most of the youth readily acknowledged the prevalence of drugs and the detrimental effect they are having on individuals and families. Youth were less able to identify means by which a person could seek help or treatment for drug misuse.

Prescription Drugs

Addiction specialists are witnessing a change in the culture of youth drug use. One informant shared that youth are using multiple substances, rather than having one drug of choice, which was common in the past. This informant also noted changes in the transition from experimentation to regular use:

“No one is dedicated to one drug anymore. We are also seeing the transition from beginning to use, to hard core drugs, to injecting happening a lot more rapidly. Injecting used to be more common among older folks, but now youth are doing it. It likely has something to do with the addictiveness of these opiates. And the availability.”

A range of informants shared the view that substance use has become more problematic since the introduction of opiates in the form of prescription drugs. More specifically, key informants spoke about the difficulties youth face in attempting to recover from opiate addictions:



“Detox never used to be a problem, because the majority of the youth used alcohol and marijuana. Whereas now it’s alcohol, marijuana, Oxy’s, Percocet’s, it’s the prescription drugs. The withdrawal is longer, harsher.”

Withdrawal Services

Not only is the withdrawal from opiates more difficult physically for users, there are limited options in the city in terms of withdrawal services:

“Detox is limited to 3 opiate beds, so if somebody has an opiate concern and people are already in those beds, then they have nowhere to go to detox. And if they are going through the process of withdrawal, they have to get to detox, if you leave them on the street, they are just going to go back to using.”

Another informant noted the lack of youth-specific services, especially in the context of withdrawal management:

“There aren’t many things that are specific for youth, like at the detox, the beds are open to everybody, and there are only three opiate beds, but right now we have lots of youth who are addicted to opiates, and what do you do?”

There is no withdrawal facility in the city that accommodates people under the age of 16. Young users are still required to have gone through the withdrawal process prior to entering treatment, but they must do this at home. Although it is possible for young people to receive medication to help with the withdrawal process, having to withdrawal in a home setting presents a variety of challenges. For example, some youth may not have a home, may not have a stable home or a stable home environment, may not have a home free of substances or substance users, and lack the support system required to undertake such a significant process.

MENTAL HEALTH

While often mentioned by key informants as a barrier to finding housing and remaining housed, youth seldom brought forward the issue of mental health. Some youth mentioned that they would like to feel happier, but only two youth mentioned depression by name:

“Depression – people have issues, you know like with their friends and stuff, they feel depressed and lost cause you are in a city that nobody knows you in.”

“What is that called when you are sad all the time? Depression, repression, and oppression.”

For key informants, mental health services were often mentioned as the most challenging service sector with which to connect a youth. Wait lists, referral processes, the acquisition of a diagnosis, and the difficulty of navigating the service spectrum were all repeatedly mentioned as challenges.

According to one key informant:

“A lot of that too is waitlists because a lot of people need the service, but then especially for youth, doctors are very leery about handing out a diagnosis to a young person, especially when they are still going through those developmental stages.”

Addictions and Mental Health

Finally, addiction treatment can be difficult to access if the user is also experiencing difficulties with their mental health. This informant explains that many treatment programs are hesitant to provide service to people whose mental health is unstable:

“Depression; people have issues, you know, like with their friends and stuff, they feel depressed and lost cause you are in a city that nobody knows you in.”

- Female focus group participant

“Mental health is an issue with the youth because when you have a combination of mental health and substance use, one exacerbates the other and if you have a program that says you have to have stable mental health, and we can’t stabilize your mental health because of drugs and alcohol, it’s really hard.”

This focus group participant has experienced the effects of the chronic underfunding that is common among mental health outreach programs:

“A lot of these programs like [Mental Health Outreach Program], they initially help you, but they run out of resources and then they just don’t call you back because they can’t help you.”

ACCESSING SERVICES

A concerning finding from the youth in the focus groups was that very few of them are actually accessing service. The researchers hypothesized that youth would talk about waitlists and discrimination by service providers, but in actuality very few of the youth in the focus groups were connected with any type of service, and subsequently had very little to say regarding the accessibility of services. One male youth declared:

“Jail for me, that’s about the only service I got.”

Many, if not most of the youth displayed a concerning lack of knowledge regarding how to access social services. One male youth said:

“I find things in the phone book.”

Another youth agreed with him and mentioned that he would turn to Kijiji if he needed help.

The youth we spoke with displayed a troubling lack of understanding of the social service system in Thunder Bay. Very few of them could correctly identify where to begin to seek help for a variety of issues. Those who could correctly identify appropriate avenues for information were those already in contact with an outreach worker, or some other supportive adult acting as a liaison. Traditional services may not be connecting with the youth in our focus groups.

Receiving Information

Traditional avenues used to get information to youth are not working. When prompted to tell us how they find out about services, many agreed with the youth who said:

“Word of mouth. Hear it in the grapevine.”

Echoing this sentiment, and indicating the importance for youth involvement in programming, another youth suggested that agencies should:

“Maybe have like young representatives; ones that have gone through it and can tell others how to get help.”

A young female suggested that service providers:

“Go to the schools, from program to program, to tell everyone.”

One young male relayed that:

“I see no one getting help. Outreach style, that would help.”

Another explained that:

“Lots of times you have to be a self advocate though and go out and actually find it [services], because it’s not advertised. If posters were on the street, with helpful places and services of where to go, it would be more noticeable. Or on the bus.”

The notion that word of mouth is a common means of receiving information is reiterated in other studies of marginalized populations, such as the local report *Engaging Populations at Risk: Strengthening connections* (Sobota, Tranter, & Hudson, 2010). One key informant felt as though youth are not receiving the information they need in order to begin connecting with social services:

“I don’t think that youth are getting the message about services, maybe because of literacy or whatever, but we need to go where the youth are to deliver service. Maybe even just for information, but someone has to go where they are. We need more outreach.”

Transportation

In terms of logistics, various youth noted that accessing services is made even more difficult if the individuals only means of transportation is city transit. Most of the youth in the focus groups are reliant on the city bus to get from place to place, and many of them explained that this is becoming more difficult as the price to use the service has become prohibitive. At the time of this report, the cost is \$2.50 to ride the bus, or \$5.00 round trip. If a person has multiple places to go in a day, this can quickly become very expensive. The price, coupled with the vast geography of Thunder Bay, makes getting to services across town difficult and time consuming. One focus group participant remarked:

“We need some kind of transportation . . . because that’s the reason they [youth] don’t get help.”

Note the following exchange:

“And even to look for a place, you still need transportation.”

“Yeah, doing that on the bus could take all week.”

System Navigation

In reflecting on the services available to street involved youth, key informants expressed the opinion that there is not necessarily a lack of services; informants were concerned with the difficulties experienced by youth when trying to navigate the service system which was a significant barrier to gaining access to services:

“The barriers are not necessarily the services; the services are there, if you want addictions services, there are addictions services, I mean there are waitlists, but for me the biggest barrier is access – there is no hub for these kids – no centralization of service.”



This young person has a similar opinion:

“There are services out there, but unless you ask the right questions, you won’t get the right answers. I don’t know why. Unless you get somebody to advocate for you, you don’t get nowhere.”

Some informants conveyed that the social service system in Thunder Bay is often confusing to work through:

“It is also very difficult to navigate the service system in Thunder Bay; people who get paid to do it have a difficult time, let alone lay people, let alone marginalized populations.”

“... the social services field in town is really hard to navigate; it is hard to navigate for seasoned professionals, but we somehow expect parents or youth to be able to do it. If they give up, I don’t blame them.”

“One of the other issues is that we can’t refer. They want families or youth to self refer. For some of our clients, that is exceptionally difficult. That is a bit of a hindrance. Sometimes just negotiating the system for some of our clients is just too mind boggling.”

Eligibility criteria and the referral process

A range of key informants spoke about the increased difficulty some youth have in accessing services due to eligibility criteria and means of referral. For instance, having a specific diagnosis, be a certain age, or have a specific combination of mental health and substance use in order to access a program.

“I think the strict eligibility criterion creates a huge barrier for people with complex, multijurisdictional needs, because it is really easy to turn those people away.”

“So many agencies will say that you aren’t a fit. Or that it isn’t bad enough - so what? Do you tell a kid to get more depressed so that he can get help, or tell him to go rob someone so that he can get into treatment?”

“Lots of services, you have to gain access through primary care, so that is difficult for youth or people in general who don’t have access to a family doctor.”

Several key informants mentioned that specialized services in Thunder Bay require an individual to have a mental health diagnosis as a prerequisite for service:

“Lots of times too, there are places like [Mental Health Service] that offer subsidized housing attached to some of their programs, but the thing is that with young people, they don’t fit into cookie cutter programs, and [Mental Health Service] needs to have a mental health diagnosis in order to be a client. Lots of doctors don’t like to diagnose or label young people.”

Some informants expressed that street involved people are often left out of services due to strict mandates that sometimes leave certain individuals disconnected:

“You have these people who present with a huge array of challenges that no one service provider is prepared to deal with. . .”

“Agencies shouldn’t have to bend their mandates to help people; they should just be mandated to help.”

Resistance to accessing emergency shelters

Youth shared less than favorable experiences with the emergency shelters in the city. For the majority of youth we spoke to, the emergency shelter system in Thunder Bay is used as a last resort.

A few female youth shared that they did not feel safe staying in a shelter:

“It isn’t always safe there for young people.”

Another young female spoke of often having her personal belongings stolen while at the shelter. Others raised concerns about the overcrowding that occurs and in

situations where there are not enough youth beds, young people are forced to sleep in the same areas as the general population. This is reflected in this young man's comment:

"There is always overflow at the shelter, people in the middle of the place, having to sleep there. Even young people, in the hallways and stuff."

Another young female shared her view of shelter by saying that:

"[It] is just a flop house that you know you can always go back on if you get kicked out of treatment or leave jail. It's the easiest place to get into".

A few youth were firm in their claim that they would never stay in the shelter, and spoke about the alternatives:

"I'd rather stay in the bush than stay there."

"I have done a crime so that I didn't have to go to the shelter. I was hoping to get into Balmoral by getting caught drunk or whatever."

Male participants expressed that they find it difficult at times to find appropriate shelter if they are with their children. The discussion that follows is indicative of their struggle:

"I think they need to open a men's hostel for men with children. Like for 6 men. 'Cause it's not always women taking the kids. I have to walk around with my kid and then take the last bus home and then I'm in the same situation I was in."

"I've noticed that in the past couple years, more single dads. If moms in jail."

"I had my son and they couldn't put us up in the Salvation Army, 'cause some of the people there are criminals, druggies, pedophiles, or violent or drunk. You talk to them and they are angry. You can't bring your kids to a place like that. I had to keep my son up all night at a coffee shop until the sun came up."

Need for a youth shelter

Numerous youth reflected on their experiences with the youth shelter once available to young people as constructive support in their lives:

“It [the youth shelter] was a really good thing. They should have kept that open. The government is always looking at ways to help this and that, and [the youth shelter] was such a good thing and then they shut it down.”

The youth shelter is remembered by many youth as a place that helped with getting young people off the street. Those that did not remember the youth shelter specifically still felt as though there should be somewhere young people can go to stay where they do not have to intermix with the older homeless population. This focus group participant expressed a need for something more transitional than a shelter:

“If they had a place like this . . . but for troubled youth, like a boarding house, that would be a great thing. Like a half way house kind of thing.”

Key informants readily acknowledged that the youth shelter had its challenges, yet they generally felt as though it was both useful and necessary. One informant reflects:

“I thought it was a very good resource. I strongly believe that youth are particularly vulnerable and need to be separated from adults, and I was strongly in support of something along the lines of [the youth shelter].”

Another informant said simply:

“It took kids off the street.”

Various service providers explained the difficulties youth experience when having to reside with older people. This key informant noted that the current shelter system was not designed for young people:

“One of the biggest obstacles is not having a youth facility for kids experiencing homelessness. I think there is a lot of fear in them to go to the adult place, which makes sense, it is a new environment that was designed with adults in mind.”

Another key informant spoke of the risks associated with putting vulnerable youth in a situation where they are required to survive among older, more entrenched individuals:

“... and they are often manipulated by the older crowd and I think that is one more reason why the youth and older person shelter doesn't work as one. The youth are getting coached by the veterans and even victimized by them. The youth latch on to these veterans, for safety maybe, but this is how they become more entrenched.”

The resounding sentiment from both focus group participants and key informants is that there is a dire need for a shelter that segregates street-involved and homeless youth from their adult counterparts.

The “Gap”

As noted earlier, youth between the ages of 16 and 18 are sometimes in a service limbo. Social service sectors usually need to define the population they serve by their chronological age and it is common for services to be designated as service the under 16 population or the over 18 population, leaving those in the middle in something of a grey area. This topic arose in both the key informant interviews as well as in the focus groups:

“That there is nothing really for people age 16-18; we are practically on our own.”

- focus group participant

“We often discuss the ‘gap’, meaning that between 16 and 18 there isn't really a lot of access to services, because you don't really fit into the children's services anymore, but you aren't an adult.” - key informant

“The 16 and 17 year olds are, I find, the most vulnerable of clients, and they [service providers] are making it more difficult to get help for them.” – key informant

Lack of activities that are attractive and accessible to street youth

Youth in the focus groups often shared that they experience boredom. Many youth attributed the perception that adults have of young people loitering in malls and other congregate areas as simply a result of young people not having anywhere else to go. Naturally, youth expressed that they want to ‘hang out’ together. This was a common concern among the youth; that because they do not have their own housing, and because sometimes their parental homes are not appropriate options, youth need somewhere to go, especially at night.

“This is one of the reasons I started getting high, was because there is nothing to do in Thunder Bay. Bored. Even to this day, I drink because I have nothing else to do”. – male youth

Focus group participants had many ideas for programs. Some of their ideas included drop in programming where youth could play games (pool, video games), hold dances, had open access to computers,

“It would be sweet if they had a kid lounge. I’d rather be there than doing nothing. I think they city is blaming things on the youth because we have nothing to do, but it’s not our fault that we have nothing to do. The skate park is the best thing that’s happened in a while”.

There was specific interest expressed in programming that is open and available to young people twenty-four hours a day. Youth share their thoughts below:

“I think it would be cool if they opened up a program that was open all night. All night long. So the youth can have a place to go if they have nothing to do, you can go and chill out there, play video games, listen to music. It would keep them out of trouble.”

“And then if there was someone in crisis, or whatever, there would be a counselor there for them to talk to. Twenty-four hours.”

While some youth said that they typically stay in at night and watch movies or play video games, other youth were eager to share that their favourite night time activity is to “party.”

PERSONAL SAFETY and YOUTH CRIME

When prompted to talk about personal safety, focus group participants expressed mixed opinions. Some, usually females, expressed feelings of apprehension about walking alone at night, articulating concerns about gangs and being beaten up. Males, on the other hand, were less concerned about their personal safety, but still identified it as a concern. One male participant claimed:

“I do [feel safe], but I am used to the life.”

Another male pointed out:

“I used to feel safe, like whatever – walk anywhere, but now it’s getting freaky and scary. I still have to do it because I don’t own a car, but I’m more freaked out.”

This young male noted that:

“It depends how you grow up. A lot of kids grow up in good homes and not on the street. But us, we all grew up on the streets. We know a good group of people from a bad group of people. If someone who doesn’t have the street smarts ends up of the streets, well – they have to learn the hard way.”

When asked how they cope with the growing feelings of danger, one youth responded:

“Ya, me and my friends are carrying knives, that’s how bad it’s gotten.”



This was not the only youth to identify that they carry a weapon in fear of being attacked. Others suggested that you are safe as long as you are hanging around the ‘right people’, meaning people who can protect you or who are feared by others.

Some youth remarked that some areas in town feel safer than others. The opinion that Port Arthur is safe and Fort William is not was shared by many participants. One focus group member said:

“I can walk there [in Port Arthur] by myself that late at night and I don’t have to carry a lighter on me at all times – not like on this end [Fort William] – I am always carrying a lighter in my hand.”

These youth shared their feelings about safety:

“A lot of it is the area you live in. But drugs are everywhere. That’s basically what it is [why it is unsafe].”

“Put it this way – say it takes you 20 minutes to get home going the long way, or 15 minutes to get home going through the lanes – you take the long way because it’s safer. You never know what can happen.”

This young female summarized these concerns by saying:

I prefer to be walking at night with somebody, but during the day it’s okay. When I walk by myself I carry something on me. I’d carry a pocket knife. Something bad happened to me when I was 13 so I carry that now. Being a young person, and a girl – we’re targets. I feel like I’m an easy target because I’m pregnant right now, and I can’t just run.”

Concern for their client’s personal safety was shared among all key informants. Many shared that they are aware their client’s get taken advantage of, participate in activities that put them at increased risk – like sex work, running drugs,

participating in crime – but that there are limited ways they can support their clients in decreasing these concerns.

“What do you do in a situation where a client gets beat up, but he doesn’t want to say, they don’t want to make a report. You know they need your help, and you want to help, but they are afraid to reach out because of the consequences, the retaliation.” – key informant

Unfortunately, most of the youth we spoke with have become so entrenched in a lifestyle that includes violence and crime, they have normalized it.

“They have accepted it [violence] as part of their lifestyle.” – key informant

There was also a general consensus among service providers and youth we spoke with that crime is a significant issue for street involved youth in our city. Youth and key informants shared that they thought crimes against teens are going up. When asked about reporting crime, key informants shared that they offer clients the option, and will support them in the reporting process, but that youth choose not to report because they fear that being identified as ‘a rat’ will only further compromise their safety.

“Crime against teens is going up”. – female youth

“It’s not just youth who do the crimes”. – key informant

The fear of repercussion places youth at increased risks. Youth also shared they felt society was placing blame on them, but that crime was not isolated to their generation:

THUNDER BAY'S STRENGTHS

Youth identified a number of services in the city that they consistently find helpful. In particular, youth identified that they accessed services they felt were non-judgmental and met multiple needs; for instance youth could get a meal, participate in programming and had services for children available.

"You don't feel discriminated against when you go there".

"You don't have to dress up fancy".

"You can be coming right out of the drunk tank, too".

Services that focused on education and skills upgrading were consistently highlighted by youth as helpful.

"It [Aboriginal centre] gives people a chance to go back to school and stuff – they do upgrading there".

"They [employment service] have so many things that they offer – workshops on how to conduct interviews and workshops on stuff that could potentially be holding you back from getting a job".

Both youth and key informants also added that there are plenty of services for youth to access food in Thunder Bay.

"There is not a person in this city that is going hungry. Among all the services available, they have unlimited food, and for the most part they [street youth] know the times and dates of where to go". – key informant

"Soup kitchens are helpful. They come in handy when I run short".
– male youth

“[because of soup kitchens], the homeless are not staved. It’s not every day we get to end up at Pizza Hut”. – female youth

Youth and key informants also expressed the value of various outreach services available in the city, specifically their discrete nature, and the ability for them to be there during times of crisis.

“It is nice when the help comes to you, because we’re shy people, and it is very hard to speak up. When people are doing outreach, they can approach us privately”. – female youth

“If you have a question to ask them, they [outreach workers] know everything that you need, like they would comfort you in anyway.”
-female youth

“The nice thing about outreach is that they are very approachable, there is not a lot of formalities in getting involved with them. They are out on the streets, and they will come and meet us. It’s really simple to connect. They don’t even need first and last names. The formal approach can be off-putting to some youth”. – key informant

RESEARCHER OBSERVATIONS OF FOCUS GROUPS

A large percentage of the youth who attended the focus groups were Aboriginal. This is likely attributed to the response we received from some Aboriginal agencies who helped recruit and host youth focus groups. Many participants were parents who seemed to be actively caring for their children. Some participants displayed signs of low literacy (needing the researchers to read and explain the consent forms to them, sometimes repeatedly).

While some focus group members spoke out more than others, participants generally seemed to be happy to talk about the issues. Although very few acknowledged any personal responsibility for their situation, they were generally

insightful into the systemic issues around their circumstances, and offered ideas and suggestions for program development.

Overall, participants appeared to enjoy the opportunity to have a chance to voice their opinions and their concerns. Some youth requested that we “hold more groups like this”, where they can share their experiences, learn about others, and feel heard by someone who they perceive as being connected to the system they feel has betrayed them.

RECOMMENDATIONS

“Once social change begins, it cannot be reversed . . . We have seen the future and the future is ours.” - Cesar Chavez

Based on an analysis of the youth focus groups, key informant interviews and a review of the literature, 5 recommendations have been made.

RECOMMENDATION 1: A YOUTH-SPECIFIC HOUSING STRATEGY

Housing was an overwhelming concern for both service providers and the youth that we spoke to during the focus groups and key informant interviews. However, given the varied housing needs that were identified, one type of housing for youth will not fill the housing voids youth are experiencing. In this respect, an inclusive, youth-specific housing strategy should be adopted that meets the changing and individual needs of youth. An inclusive housing strategy would include (see Figure 5):

a) A youth-specific emergency shelter.

A shelter that specifically focuses on the emergency shelter needs of youth needs to be established. Despite earnest attempts at creating a welcoming environment, the emergency shelter system as it exists now is not hospitable to young people requiring its services. Youth have different needs than adults when accessing the shelter system. Key informants repeatedly discussed the increased vulnerability and naivety of young people accessing the shelters. First time youth users of shelters are at a particular risk because they are exposed to high-risk activities, and are looking to be accepted by a social group. In some instances, being ‘accepted’ means joining a gang by being ‘beat-in’, using drugs with another person or having a sexual encounter for which they may not be ready. A youth-specific shelter would improve youth’s

perception of shelters and work to improve negative experiences they may have endured in a shelter system designed for adults.

b) Long-term transitional housing.

Youth need a secure home where they can safely practice independence with the support of staff without the impending risk of being evicted or the anxiety of a looming move out deadline. Youth need to be able to make some mistakes without such dire and extreme consequences as being denied service or being kicked out of housing.

c) Subsidized youth housing in Thunder Bay Housing's housing registry.

Youth do not receive priority status for Thunder Bay Social Housing, and as a result experience long waitlists. A community serious about ending homelessness will adopt a housing first strategy as early in a person's homelessness journey as possible. The sooner that homeless youth become housed, the less likely they are to become homeless adults.

d) Third party trusteeships.

Youth under 18 years of age require an adult trustee in order to receive Ontario Works. This individual trustee receives the money from the program and is expected to pass the money along to the youth, while assisting him or her in spending the money in accordance to its intended function. This presents many problems, particularly for youth who are not connected to family. Trusteeship issues are two-fold; 1) many youth do not have an adult who they can reliably ask to be their trustee; and 2) youth who do not require a trustee may not have the budgeting skills they need to manage their monthly bills. A third party trusteeship program is a viable option to help to ensure that underage youth are able to receive financial assistance without the worry that they will be taken advantage of during the process. A trusteeship program will help to ensure that youth who are of age are able to manage their money appropriately.

e) A landlord liaison.

Youth in focus groups and service providers in interviews spoke at length about the need for advocacy to and collaboration with private market landlords. Many landlords are raising rents to a rate just above what is affordable to a person receiving social assistance and some landlords are beginning to require that renters be over the age of 18. Service providers and youth feel that youth are routinely being discriminated against by landlords, and that this discrimination is increased if the youth is Aboriginal. It is recommended that a liaison be established to support landlords and young tenants, as well as to promote and educate landlords on human rights as they relate to rental housing.

f) Incorporating outreach to agency services.

While not every agency is able to hire an outreach team, adding an outreach component to current programs is simple and cost effective. Agencies should explore the idea of having workers go out to congregate areas to promote services and discuss service options with potential clients. Having information to hand out or a number to call would be helpful for at-risk and homeless youth. This would further help with demonstrating that helping professionals are accessible and friendly, and not 'above' associating with potential clients. A key tenet of social work is to start where the client is; sometimes this may mean geographically.

g) Intensive life skills programming.

Housing itself will temporarily decrease the amount of youth who are homeless, but it will not necessarily increase the independence of youth. Many young people do not have the skills to maintain housing once they have acquired it. Many may need help with skill building around budgeting, cooking, and maintaining a healthy level of cleanliness, or paying bills. Youth housing facilities need to be closely coupled with life skills programming that will teach youth such skills. These services may occur in conjunction with a supportive housing model, or on an individual basis. There are a variety of life skills programs currently offered in the city, but they occur sporadically

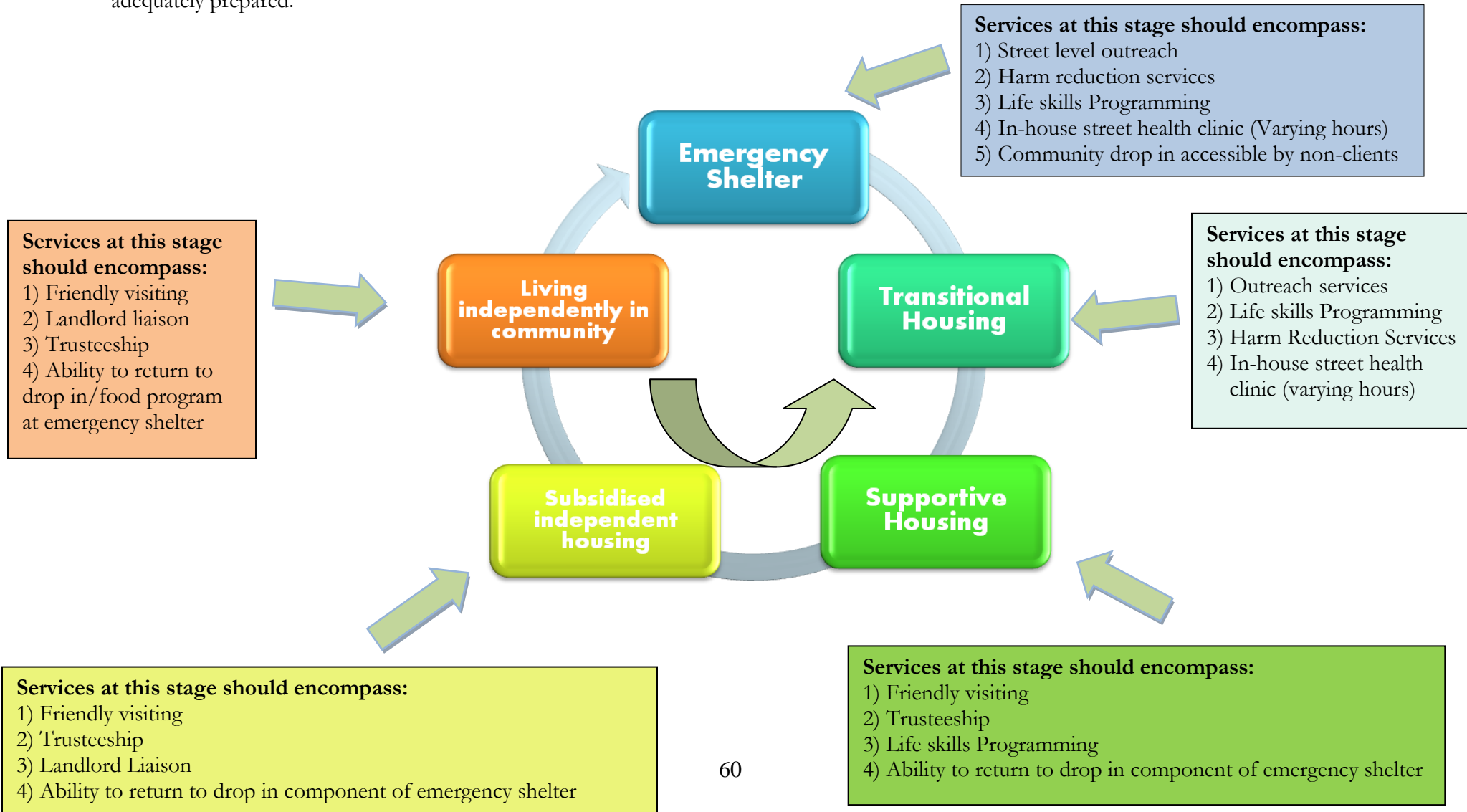
and there is a lack of coordination between the agencies that offer them. Additionally, it is difficult to find information on these programs unless you are already connected with a service. It is recommended that these services occur in the home, rather than at a service location. It is further recommended that consideration be given to whether there are instances where tenancy should be conditional to participation in this type of service.

h) Collaborative lobbying efforts for modifications to components of Ontario Works policies and programs.

It is recommended that a collaboration of service providers and service users engage in lobbying activities for changes to Ontario Works policies around trusteeship for youth under the age of 18. Lobbying efforts are required in other Ontario Works policy areas, such as the immediate loss of benefits if a person is fired from, or quits a job; many street involved youth will struggle with finding a good fit between themselves and an employer, and should not be penalized if the first job they acquire isn't the right fit. Additionally, policies around school truancy and loss of benefits should be reviewed and reconsidered.

Figure 5: Youth Housing Continuum

Our recommended youth housing continuum has five phases with multiple entry points. The continuous sequence of stages builds on the strengths achieved in the previous stage and is not time specific. Youth require support at each stage, and their needs will change as the strengths of the youth are increased. We also have to acknowledge that youth might return to previous stages of housing if they are not adequately prepared.



RECOMMENDATION 2: THAT ALL AGENCIES WORKING WITH STREET-INVOLVED YOUTH SHOULD AIM TO INCLUDE THE FOLLOWING COMPONENTS IN THEIR PROGRAMMING (where appropriate):

a) The expansion of drop in programming.

Street-involved youth do not have drop in programming that is accessible to them around during non-traditional hours, for instance in the evenings and during weekends. Youth like to stay up late and spend time with friends in a relaxed atmosphere; this is not unique to the youth who participated in our focus groups; teenagers in general function late into the evening and have a need to spend time with friends. It is recommended that the community identify and establish drop-in programming for youth; if not 24 hours a day, then during evenings and weekends. Youth need a safe space to be and congregate. In an ideal situation, drop in programming in both the North and South Wards of the city is recommended.

b) The provision of a transportation service.

Many homeless and at-risk youth have a difficult time navigating the bus system in Thunder Bay. If a youth has multiple engagement in one day, it can be both time consuming and expensive to rely exclusively on the bus. Some communities have implemented a volunteer driver program to assist people in getting to important appointments. Bookings for rides are made through a central agency and volunteers are reimbursed for their mileage. It is recommended that community stakeholders explore the feasibility of implementing a volunteer driver program to support city youth.

c) Life skills programming.

Many youth are not adequately prepared to live appropriately on their own. They have often lacked mentorship in this area, and need to acquire skills relating to various aspects of life, such as, budgeting, paying bills, time management, dealing

with landlords and neighbours, cooking, cleaning, organizing, applying for jobs, child safety, grocery shopping, etc. It is our recommendation that life skills programming occur “in the field” so that youth learn concrete ways of handling new situations.

d) Eligibility

A youth who wants service in any area of their lives should be eligible to receive service, regardless of their situation. Numerous services in the city have strict eligibility criteria that often exclude many of the youth who are in need of help. While we are cognizant that this is often a function of funding, it serves to exclude many young people who are in troubling situations. In addition, youth often have to go to great lengths to initiate service; this is a huge barrier for the youth we spoke with. It is difficult to stay motivated if one has to jump through hoops in order to be ‘accepted’ for service. We recommend that youth-specific services examine their eligibility criteria and work to reduce barriers in this area. We further recommend that services reduce the lengths that youth have to go through to attain service; services should conform to youth, not the other way around.

RECOMMENDATION 3: THE MEANINGFUL INCLUSION OF YOUTH.

Youth involvement has been recognized by all levels of government as a need for creating sustainable development and innovative thinking. A recently developed and proposed city-wide housing strategy neglected to consult youth-focused agencies, or youth themselves, about their housing needs. In addition, while an attempt has been made to include youth perspectives in the crime prevention, there are limited mechanisms in place for street-involved youth, who will likely experience the effects of proposed policies and programs, to share their thoughts with governing bodies focused on crime. The community needs to acknowledge youth as the experts in their

own lives and provide opportunities for youth to communicate their ideas and be involved with services that are focused on supporting the needs of street youth.

a) The re-examination of service promotion and messaging.

Many youth who participated in the focus groups had low to very low literacy levels. It is likely that many have not been involved in the educational system for some time. In addition, most youth had very limited knowledge of the services available to them. This may imply that mainstream avenues of information distribution targeted to the street youth population are not having their intended effect.

b) Consider how street-involved youth acquire information.

Many youth in the focus groups were unaware of service options designed to help them. Aside from employment services and child welfare agencies, most youth could not cite services for things like mental health or addictions. Many youth do not have access to primary care providers or gatekeepers to the rest of the service sectors. This lack of access and knowledge may suggest that traditional means of service promotion and messaging are not reaching intended audiences. It is recommended that plain language, street level and word of mouth strategies be employed for the greatest amount of benefit. In addition, stakeholders are urged to consider a peer volunteer information strategy (where peers are trained to share information and explain program components to youth). This recommendation was made after many youth cited that they receive most of their information about services via ‘word of mouth’ from friends, and not from brochures, television ads, or radio announcements.

c) Messaging that a life of destitution is not normal.

Routinely, youth in the focus groups made comments such as, “money is tight for everyone”, or “life is tough”. The youth we interviewed did not seem to identify as ‘homeless’ or ‘street-involved’; they felt as though they were experiencing ‘normal’ periods of housing instability and a lack of money. A concerning observation was

that these youth may incorrectly perceive middle class complaints about money as being similar to their experiences of destitution. The country's financial woes are often publicized in the media and these youth are hearing messages that people are 'broke', but there seems to be a disconnect between their understanding of lower/middle class 'broke' and sometimes-hungry-and-homeless 'broke'. These sentiments may have been normalized through cycles of intergenerational poverty. Youth need to be assured that they deserve equality, respect and are worthy of a higher quality of life.

RECOMMENDATION 4: FILLING IN THE GAPS IN THUNDER BAY'S MENTAL HEALTH AND ADDICTIONS SERVICE CONTINUUM.

a) Establishment of mental health practice guidelines for children involved in child welfare services.

Children come to the attention of child welfare agencies because they have experienced some form of abuse or neglect, or they have been witness to violence. These children tend to be especially vulnerable and are at a high risk of developing mental health problems. There is a need to formulate evidence based guidelines pertaining to the mental health care of children involved in child welfare services. It is recommended that standards be established regarding the comprehensive mental health screening of all children where abuse or neglect has been verified. Youth with emotional and behavioural concerns need to be readily identified as they enter the system, and need sufficient access to meaningful, responsive, and high quality mental health services (Pecora, Jensen, Romanelli, Hunter, Jackson, Ortiz, 2009).

b) Community based mental health and substance use services for street-involved youth.

For many street involved youth, mental health concerns occur concurrently with substance use. Many services are only able to treat either mental health or substance use, and are rarely equipped to provide service for someone who presents with both

concerns. It is recommended that agencies work in collaboration to identify and execute community based treatment models that are unique to the needs of street-involved youth, including those with concurrent disorders. Youth friendly, accessible, non-judgmental, and non-stigmatizing services should be established for youth with concurrent disorders.

c) Increased capacity within withdrawal services.

With the rise in prescription opiate misuse, withdrawal facilities are facing a new and fierce form of addiction. It is recommended that service be expanded to provide youth-specific, residential withdrawal services (including medicated withdrawal where necessary) for people between the ages of 12-21.

RECOMMENDATION 5: INCREASED RESEARCH AND EVALUATION OF STREET YOUTH'S NEEDS AND PROGRAMMING.

a) The development and strengthening of relationships with the academic and research communities.

Opportunities for community-based research and various prospects for linking the community of Thunder Bay, and our academic institutions, and various formal research organizations exist. Capacity can be increased and research dollars can be attracted by building and solidifying relationships with the social service community, by collaborating in funding opportunities for further research. Smaller scale projects, needs assessments and point-in-time counts, can be carried out by graduate students under the supervision of social researchers. It is recommended that agencies and/or collaboration are established with the academic institutions and research agencies in order to further identify evidence-based models and best practices regarding street-involved youth. Efforts to include youth in the research process should be a priority.

b) A point in time count of the number of street involved youth living in Thunder Bay.

As a community, we have limited knowledge about the number of street youth living in the city. In order to have a better idea of how many homeless youth exist in our community, a point-in-time count should be considered. Knowing specifically how many youth require emergency services helps to inform future programming developments and funding endeavors. A point-in-time count would align with the Thunder Bay Housing Strategy to be released spring 2011.

c) Further exploration into the needs of First Nation youth migrating to Thunder Bay.

For a wide array of reasons, many First Nations youth are arriving in Thunder Bay, and were well represented in the focus groups conducted for this project. While the reasons for their arrival are vast, many of these youth require support in establishing themselves in the city, or conversely require support in returning to their home community, should that be their goal. Stakeholders should consider the provision of orientation and support services to new First Nations residents, prior to their departure where possible. In addition, further examination as to the reasons for relocating to Thunder Bay from their home communities is a main concern.

MODEL PROGRAMS

To increase the usability of this report a number of model programs have been reviewed and included Appendix B. The intent of including a portfolio of programs is two-fold: 1) to decrease the need for further resources to be invested into researching program solutions; and 2) to present ideas for possible program development that have been proven in other communities. Where appropriate, each recommendation has been matched with a model program that the community could use as an outline for developing the program in Thunder Bay. Best practices research for each recommendation was not available, however where best practice research has been done, it is included. Model programs included here have been a) recognized publicly, b) published in refereed journals, c) undergone scrutiny for quality implementation and evaluation or 4) have been replicated in another jurisdiction.

CONCLUSION

When a herd of buffalo intercepts danger, the adult buffalo create a circle around the young buffalo to protect them. The adults can recognize that in order for buffalo to continue to thrive, their young need to be protected and guided.

This report illustrates our conversation with street-involved youth, various key informants who represent a variety of social services supporting street-involved youth and our review of the literature. Traditional perceptions tend to characterize street-involved youth as a population that is reckless and personally responsible for their own marginalization. However, the findings of this report portray a youth population that is currently underserved by the social service sector. The reality for these young people is that they are an extremely vulnerable population who are part of the Thunder Bay community, and we have a responsibility to respond to their varied and complex needs.

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Appendix A: Street-Involved and Homeless Youth Service Spectrum Map

AGENCY	PROGRAM NAME	DESCRIPTION
STREET OUTREACH		
Children's Aid Society of the District of Thunder Bay	Outreach Program Outreach Worker: 624-6292	Serves homeless youth and youth at-risk of becoming homeless by guiding and supporting them back into the use of traditional and non-traditional supports and services. Targets young people who inhabit public places and the streets of Thunder Bay, forging a life style of survival which may include engaging in unhealthy behaviours. 1 FTE outreach worker (Monday-Friday, 9-5pm)
Dilico Anishnabek Family Care	Youth Outreach Worker Services (YOWS) To contact a worker, call: 629-0224 629-0206 629-0207 621-3259 629-3358	Directly engages with youth on the street; supports them to find opportunities, solutions and resources to address their own social, behavioural, emotional and educational and employment needs. 4 FTE outreach workers (Monday-Friday, 11-7pm)
John Howard Society 315 Syndicate Ave S.	My Own Place 623-5355	Works with at-risk and homeless populations (15 years and older) to move them from homelessness to stable housing. 1 FTE outreach worker (Monday-Friday, 9-5pm)
EMERGENCY SHELTER		
Shelter House Thunder Bay 420 George St. S.	Overnight Shelter 623-8182	Provides a dormitory style facility with 27 beds for male, 8 beds for female and 10 beds for youth (24 hour service). Minimum age to access a bed is 16.
Beendigen	Native Women's Crisis Home 345-0964	Provides a safe temporary shelter to women and their children who are fleeing abuse (24 hour service).

Faye Peterson Transition House	Crisis Shelter For Women 345-0450	Shelter for abused women and their children who have been victims of physical, emotional, sexual or financial abuse (24 hour service).
Salvation Army	Booth Centre 345-7319	Men's homeless shelter with zero tolerance for alcohol and drugs; provides accommodation for men with children in local hotels; accommodates and provides special care for released psychiatric patients; accommodates individuals on parole or mandatory supervision (24 hour service).
HOT MEAL PROGRAMS		
Shelter House Thunder Bay	Soup Kitchen 623-8182	Open daily; Lunch, 2pm-3pm; Dinner, 7-8pm.
Salvation Army	Soup Van 344-7300	Serves daily; 7:00pm North Ward; 8:00pm South Ward.
St. Andrew's Church 286 Red River Rd.	Dew Drop Inn 345-0481	Daily meals, 2:30-4:30pm.
Grace Ministries 235 Simpson St.	Grace Place – Meals 473-3538	Monday, Tuesday, Wednesday, 1-4pm.
FOOD BANKS		
Thunder Bay Food Bank 129 Miles St. E.	Food Bank 626-9231	Limit once a month; Tuesdays & Fridays, 9am-11am (except first Tuesday & Friday of the month).
St. Thomas Anglican Church 1400 S. Edward St.	Food Cupboard 623-3608	Residents of Westfort only; must phone ahead; every second Friday, 10:30am-11:30am (closed July & August).
Redwood Park Church 532 N. Edward St.	Opportunities Centre 577-3481	Residents of Northwood and County Park only; Thursdays, 1pm-3pm.
St. Vincent de Paul Society <i>South Ward Branch</i> 1019 Brown St.	Food Bank 577-3464	Food hampers for families. Residents of South Ward only; limit every three months; by appointment only.
Thunder Bay Methodist Church 920 Sprague St.	People That Love, Crisis Centre 623-3828	Emergency basis only; Friday, 9am-11am (closed July & August).

Thunder Bay Christian Community Centre 132 Dease St.	Hamper Program 623-8184	First come first serve; Tuesday's at 1:30; Emergency hampers available once every four months.
AIDS Thunder Bay	Mother's Cupboard 345-1516	Agency clients only.
St. Vincent de Paul Society North Ward Branch 664 Red River Rd.	Food Bank 344-4898	North Ward residents with children only (excludes Current River); limit 6 uses a year; Tuesday & Thursday, 1pm-3pm.
St. Stephen's Anglican Church 494 Leslie Ave.	Current River Churches Food Cupboard 683-6051	Residents of Current River, Pass Lake, Shuniah Township only; limit once every two weeks; every Tuesday, 10am-12pm.
Lakehead University	Food Bank 343-8850	University students only; limit once a month; Monday – Friday, 1-3pm.
Confederation College	Food Bank 475-6110	College students only.
Redeemer Lutheran Church Hwy 11/17, Kakebeka Falls	Rural Cupboard Food Bank 935-2202	Rural residents only; every third Wednesday 10am-1pm.
OPEN ACCESS AND DROP-IN PROGRAMMING		
Grace Ministries 235 Simpson St.	Grace Place 473-3538	Offers free clothing, free coffee, free homemade meals, a non-denominational church service to the homeless and less fortunate in the Simpson Street area. Tuesdays 1-4pm, Wednesdays 1-4pm, Sunday Service 2:00pm, Friday Night Fire, the second Friday of each month at 7:00pm.
Lutheran Community Care Centre 633 Simpson St.	Street Reach Resource Centre	Offers fellowship, access to laundry machines for free. Monday, Wednesday, Thursday, 4:30-8pm, Friday, 12-3pm.
The Underground Gym 634 Simpson St.	Kitchen/Youth Centre/Kitchen/Fitness/Boxing/Music/Tutoring 622-5666	Provides free access to multiple activities for youth in need, ages 4-17.

New Hope Youth Centre 1014 Victoria Ave. E.	Outreach/Drop In Centre 623-4673	Christian based drop in centre for First Nation's youth (14-24). Offers fellowship, games, activities, and outings to anyone interested in participation. Not exclusively for First Nation's youth, but primarily.
Thunder Bay Indian Friendship Centre 401 N. Cumberland St. 345-5840	Aboriginal Youth Empowerment Program	For young people between the ages of 15-24. Enhances the physical, spiritual, emotional, and mental well being through various activities, such as movie nights, recreation nights, cultural activities, art workshops, group outings and more.
Regional Multicultural Youth Centre 511 E. Victoria Ave. 622-4666	Various Programs	Uses a youth-to-youth approach to connect with peers, share information, develop programs, and organize activities. Programs include an orientation for newcomers to the city, a stay-in-school program, girl-power programs, recreation for youth, and much more.
PRIMARY HEALTH SERVICES		
Thunder Bay District Health Unit	Street Outreach Nursing Program 629-2157	Free and confidential street-level services aimed at assessing and addressing the needs of the street-involved population; counselling and referral to services harm reduction services infectious disease follow-up STI testing and treatment.
SERVICES FOR PREGNANT & PARENTING TEENS		
Lakehead Public School Board	SAM-MISOL (Mothers in Search of Learning – Single Adolescent Mothers) 475-6502	Pre/post natal programs for teen mothers (age 14-20) looking to complete their high school education. Daycare/breakfast programs for participants.
Dilico Anisknabek Family Care	June Steeve-Lendrum Family Resource Centre 283 Pearl St. 345-0311	Specialized programs for teen parents; residences available; parenting and life skills program; prenatal classes and breastfeeding support.
Thunder Bay Counselling Centre	The Hope Place	Offers programming for pregnant women and/or women with small children who are struggling with substance use.

MENTAL HEALTH SERVICES		
St. Joseph's Care Group 710 Victoria Ave. E.	Outreach to Recovery 624-3400	Offers an intensive case management program that provides ongoing treatment and support to individuals (18 and older) with a serious mental illness who also have a substance use problem.
Canadian Mental Health Association 200 Van Norman St.	Getting Appropriate Personal and Professional Supports (GAPPS) 345-5564	Outreach and other services for people 16 years and up with serious and complex mental illness and addiction.
Alpha Court 100-106 Cumberland St. N	Rapid Response Outreach Services 683-8200	Homeless or at risk of being homeless individuals 16 and older with a desire to address mental health and/or addiction issues.
Thunder Bay Regional Health Sciences Centre 289 Munro St.	Assertive Community Treatment Team (ACT Team) 346-8300	Provides mobile mental health and psychiatric services on a long term basis to people who are 16 years and older and experiencing a severe and persistent mental illness.
Children's Centre Thunder Bay 283 Lisgar Street 343-5000	Brief Treatment & Walk in Clinic	Offers brief mental health counselling services for youth under 18, as well as a walk in service to people of any age (in conjunction with Thunder Bay Counselling Centre).
SUBSTANCE USE & MISUSE SERVICES		
St. Joseph's Care Group	Sister Margaret Smith Centre (Youth Addiction Programs) 301 Lillie Street 684-5100	Residential treatment and community based programs for youth with addictions.
St. Joseph's Care Group	Balmoral Withdrawal Management Services 667 Sibley Drive 623-6515	14 bed, non-medical withdrawal management service for men and women to withdraw/detox from alcohol and other drugs. Open 24 hours a day, 7 days a week. There is no waiting period and service is free. Must be 16 years of age.
Children's Centre Thunder Bay 283 Lisagar Street 343-5000	New Experiences Program	Community based treatment for youth ages 12-18 with issues relating to mental health and substance abuse.

Thunder Bay Counselling Centre 544 Winnipeg Avenue 684-1880	Addictions	Provides services such as assessment, brief counselling, treatment planning and referral, case management, relapse prevention.
Teen Challenge 454 Simpson St.	Addiction Treatment 345-CURE	12-month, faith-based, residential drug and alcohol rehabilitation program. Offers spiritual, academic and vocational training. Program participants must be 18 years of age or older. Thunder Bay facility currently accommodates men, but women can be registered for out of town services.
Kanachihih Solvent Abuse Treatment Centre 1700 Dease St.	Addiction Treatment 623-5577	Provides treatment for severely impaired chronic solvent abusers; must identify as members of a First Nation, be male, and be between 16 and 25.
Thunder Bay District Health Unit	Superior Points 624-2005	Provides clean needles and harm reduction services through outreach services which include: needles/syringe exchange, HIV and AIDS education, counselling and referral to services, condoms, sterile water, hepatitis C prevention information.
Three C's Reintroduction Centre 226 Dog Lake Rd.	Supportive Housing 767-4172	Offers long term care for adult males (18 years of age and older) who are chemically dependent. Programs include: relapse prevention, group therapy, life skills, one-on-one, counselling, group work, vocational counselling, and recreational therapy.
EMPLOYMENT & EDUCATIONAL SUPPORTS		
YES Employment Services 1116 Waterford St.	Employment Resource Centre 623-0768	Offers employment support services to the public such as access to computers, photocopier, fax and telephones for job search purposes; provides job listings as well as local job postings from the internet; provides employment counselling, job placement services and extensive job search workshops. Monday, Wednesday, Friday, 9-5pm; Tuesday, 9-6pm

Confederation College	Job Connect 475-6222	Provides employment planning and preparation for people ages 16-24, with a focus on Confederation College students.
March of Dimes Canada 237 Camelot St. 345-6595	Job Placement	<p>STEPS to Employment – focused on supporting those with a mental illness find work.</p> <p>Achieving Success (Thunder Bay & Sioux Lookout) – supporting youth 15-30 year of age find and keep employment. Includes vocational life skills pre-employment services.</p> <p>ASI Ontario Works Addictions Services Initiative – supporting individuals on OW supports who are involved in addictions recovery find employment.</p> <p>Enhanced Job Placement Ontario Works - supporting individuals on OW supports find employment.</p> <p>Terry Bellavance Resource Centre is open daily Monday to Friday offering free computer use, support for job search and resume preparation, free computer introductory program 3 x weekly.</p> <p>Discovery Skill Training offers a program in partnership with Confederation College; A 6 week microcomputer program offers skill enhancement to those on low income.</p>
Anishinabek Employment & Training Services 212 Camelot St.	Employment Counselling and Support 346-0310	Assists Aboriginal people of participating First Nations with employment training and supports. Includes a Youth Experience program.
Lakehead Public School Board	Steering Adolescents Into Learning (SAIL)	Designed for hard-to-serve 14-15 year olds as they attempt to prepare for re-entry to high school. Emphasis is placed on life skills, personal life management and academics.

Lakehead Public School Board	SAM-MISOL (Mothers in Search of Learning – Single Adolescent Mothers)	This program is an alternative to the traditional high school setting for students who, for one reason or another, have left or have needed to leave their home school.
Lakehead Public School Board	Connections	This program has been designed for students who are 16 and 17 year old young adults who find themselves out of school or in the process of leaving school, and require their Grade 9 and 10 compulsory courses.
Lakehead Public School Board	Collegelink	For students who have a college destination in mind even though they have opted out of the traditional high school system.
Thunder Bay Indian Friendship Centre 401 N. Cumberland St. 345-5840	Anishnawbe Skills Development Program (ASDP)	ADSP offers Aboriginal adults and youth the opportunity to upgrade their education. The program focuses on secondary school credits preparation, employment and life literacy, communications skills and numeracy, and on the enjoyment of learning.
HOUSING HELP SERVICES		
District of Thunder Bay Social Services Administration Board (DSSAB)	Thunder Bay District Housing Corporation (Housing Services Division)	Various programs to assist lower income families find safe and secure housing. Includes rent geared to income, rent supplement programs, provincial rent bank program. Priority based on need; minimum age 16.
Native People of Thunder Bay Development Corporation 230 Van Norman St.	Urban Native Housing Program	Promotes the economic and social welfare of persons of Native descent and helps to establish, maintain and operate low-income housing.

Canadian Mental Health Association	Homeless Outreach Program 215 Van Norman St.	Encourages and assists individuals (16 and older) or families who are homeless or at risk of becoming homeless to secure safe, affordable and long term housing through direct one on one support, advocacy and referral. Provides in-office support. 1 FTE outreach worker (Monday-Friday, 8:30-4:30pm)
TRANSITIONAL HOUSING		
Beendigen, Inc. 344-9579	Wakaigin Housing	Operates transitional housing units; limited to women and their children with priority given to women leaving Beendigen's Crisis Home.
John Howard Society	Residential Services 315 Syndicate Avenue S. 623-5355	Serves individuals released from the District Jail, the Thunder Bay Correctional Centre, the Thunder Bay Youth Centre, Bail Court and those needing supportive low income housing. While residing in the facility they are required to abide by rules of residency and participate in programming to address their needs. There are 45 rooms available for men and women. Must be 18 years of age or older.
Cross Roads Centre 580 N. Algoma St.	Transitional Housing Services	A complex of four drug and alcohol recovery homes with a capacity of 40 beds for men and women who are in the early stages of recovery from substance abuse disorder.
SUPPORTIVE HOUSING		
The Salvation Army/DSSAB	The Habitat 219 Pearl St.	Serves 'hard to house' adults. 34 units. Provides low-level support to residents. Applicants must be connected to primary support services (external). The unit is managed by DSSAB and the support services are administered by Salvation Army.

The Children's Aid Society of the District of Thunder Bay	Churchill Program	Home for adolescents that are experiencing difficulties and whose needs cannot be met in a traditional foster setting or in the family home. There are 8 beds available and 1 crisis bed. Program offers therapeutic services to residents. Residents must be associated with the Children's Aid Society.
Three C's Reintroduction Centre 226 Dog Lake Rd.	Supportive Housing 767-4172	Offers long term care for adult males (18 years of age and older) who are chemically dependent. Programs include: relapse prevention, group therapy, life skills, one-on-one, counselling, group work, vocational counselling, and recreational therapy.
LIFE SKILLS AND COMPREHENSIVE PROGRAMMING		
Anishnawbe Mushkiki 29 Royston Court 343-4843	Life Skills	Under the mental health portion of their services, the health centre offers life skills programming on Tuesdays from 1pm – 3pm.
Thunder Bay Indian Friendship Centre 401 N. Cumberland Street 345-5840	Wasa-Nabin Urban Aboriginal Youth Program	Offers a comprehensive set of activities for at-risk urban Aboriginal youth between the ages of 13-18. Provides social support, life skills guidance, addiction prevention, and a personalized plan of action for each youth.
LEGAL SERVICES		
Kinna-aweya Legal Clinic 86 S. Cumberland St. 344-2478	Legal Services	Provides legal advice and assistance to all low-income residents (of any age) of the District at no cost. Support is focused on problems with Ontario Works, CPP, ODSP, Tenants Rights, Employment Insurance

Appendix B: Model Programs

RECOMMENDATION & BEST PRACTICE	MODEL PROGRAM	UNIQUE COMPONENTS
<p>Recommendation: A Youth-Specific Emergency Shelter</p> <p>Best practice: Responsive emergency housing and support services need to be in place to assist youth in their decision to exit their homeless state, to meet their basic needs for shelter and support, and then stabilize them for a longer term plan.</p>	<p>Notre Dame House Hamilton, ON</p> <p>Notre Dame is a 20 bed, 24-hour emergency shelter and multi-agency resource centre for homeless and street-involved youth 16 to 21 years of age.</p>	<p>Notre Dame is more than an emergency shelter. It delivers services that are wrap-around in nature. Services include a drop-in meal program (that is open to both residence and drop in youth), a Section-23 school, one on one counseling with youth support workers, youth trustee, onsite access to a Mental Health Community Liaison Nurse, onsite access to a Nurse Practitioner, General Practitioner, Nutritionist, Psychiatrist and Addictions Counselor. These are delivered through partnerships.</p>
<p>Recommendation: Transitional Housing</p> <p>Best practice: The availability for residential services that address youth's issues while developing new skills for independence.</p>	<p>Eva's Initiatives Toronto, ON</p> <p>Eva's Initiatives provides homeless youth with emergency and transitional housing, harm reduction services, counseling, employment and training programs, housing support and services that reconnect youth with their families. Two of their three programs are highlighted. Their third program (not included here) is an emergency shelter.</p> <p>www.evasinitiatives.com</p>	<p>Eva's Phoenix (Transitional Housing): Can house 50 youth (ages 16-24), spread among 10 townhouses with 4-6 youth per house. Each youth has their own room, with access to a shared kitchen, bathing accommodation and common area. Eva's also offers life skills, peer to peer counseling and a mentorship program (e.g., print shop, technology training program). Youth can stay for one year.</p>

<p>Recommendation: Trusteeship Program</p>	<p>Good Shepherd Trusteeship Program Hamilton, ON</p> <p>A third party trusteeship program youth can use as an alternate to familial trustees.</p>	<p>Trustees act as liaisons between Ontario Works/ Ontario Disability Support Program and youth receiving support in an effort to help youth meet social income program requirements while meeting their personal budget needs. Trustees also support youth with landlord relations.</p>
<p>Recommendation: Subsidized Housing</p> <p>Best Practice: Longer term supports and transitions into adult-based services once youth have achieved an acceptable level of competence and independence, to prevent a return back to street life.</p>	<p>Youth are given special status for subsidized housing in the following communities:</p> <p>Hamilton, ON (Access to Housing) Burnaby, BC (BC Housing) Peterborough, ON (City of Peterborough) Calgary, AB (Calgary Homeless Foundation)</p>	<p>Identifying youth as a priority population has increased the amount of youth who have been able to live longer term in affordable accommodations and decreased the need for emergency shelter beds in these communities.</p>
<p>Recommendation: Formal Landlord Liaison</p>	<p>The Landlord Liaison Project Seattle, USA</p> <p>The Landlord Liaison Project is a partnership between landlords, property managers, services agencies and homeless individuals experiencing barriers to housing. The goal of the project is to offer homeless individuals and families who have been denied by landlords, help with accessing permanent housing, signing leases and moving into otherwise vacant units.</p> <p>http://www.landlordliaisonproject.org/index.html</p>	<p>Through the Landlord Liaison Project, participating landlords of private market rental units agree to apply alternative screening criteria to applicants and in exchange receive rapid response to concerns, access to a 24-hour call-in line and risk reduction funds. Tenants are connected to ongoing case management from human service agencies for one year to ensure stability.</p>

Recommendation: Drop in Programming

**Covenant House Vancouver
Vancouver, BC**

<http://www.covenanthousebc.org/what/css>

Covenant House is a drop in for youth 13-24 years of age. CH offers access to a youth outreach worker for support and counseling, housing worker, in-house addictions counselor, mental health clinician, psychiatrists, and programs focused on addiction support and recovery. They offer clothing, a message board, long distance calling, mail pick up, start-up kits, hot meals, a women's only drop-in on Friday mornings, help getting ID and applying for financial assistance. 24 hour snacks. An outreach worker connects with youth that won't access other services. Youth do not need to be homeless to access support at the drop in.

Recommendation: Strengthening of academic and research partnerships that include youth.

**California Homeless Youth Project
Sacramento, California, USA**

The California Homeless Youth Project is a research and policy initiative that brings youth to the policy table to inform policymakers, opinion leaders, and other stakeholders about the needs of homeless youth.

<http://cahomelessyouth.library.ca.gov/index.html>

The California Homeless Youth Project seeks to improve the understanding of young people ages 12 to 24 who are on their own and the issues they face (family conflict, lack of shelter, educational opportunities, health and mental health needs, interactions with law enforcement agencies). The initiative highlights solutions for homeless youth by engaging them directly in research and policy discussions, and giving voice to their experiences and recommendations as well as those of researchers, practitioners, and policy experts. Recently, they hired youth to work on their point-in-time count, act as peer interviewers in their youth homeless study and host a youth video wall where youth share their experiences and ideas.

Recommendation: Outreach services

Best Practice: Utilizing outreach and engagement approaches in supporting street youth to make the transition from the street to services and housing. Providing services through outreach is essential for reaching very young homeless youth who avoid shelters for fear of violence, robbery, sexual assault, or being reported to parents, police or sent to a foster home.

Street Ties Youth Outreach, Red Deer, AB

Street Ties Youth Outreach aims to divert youth from street involvement through education, crisis support and early intervention. Street Ties is a link between youth and relevant services such as RCMP, Child Welfare, shelters, health care and services as the need arises.

<http://parklandyouthhomes.ca/street-ties-youth-outreach/>

Street Ties Youth Outreach

Outreach workers go out to the streets and areas populated by young people, to connect with youth at their level and offer non-judgmental and confidential support and services.

Street Ties Outreach Workers engage youth at the street level to provide awareness and intervention through art projects, harm reduction, addictions counselling, and referrals.

Recommendation: Point in Time Count

Best Practice: Shelters need to collect necessary data for program planning is essential for addressing the changing needs of this target population. Specific information about what age youth become homeless and their level of knowledge about services and shelters is essential for program development.

Metro Vancouver Homeless Count, Vancouver, BC

The Vancouver Homeless Count is a triennial point-in-time count that consists of two components designed to detail the sheltered homeless and the street homeless.

http://intraspec.ca/GreaterVancouver_HomelessCount2005.pdf

Metro Vancouver Homeless Count: In a night-time component, staff at emergency shelters and transition houses area asked to complete a survey that anonymously lists all people who stayed with them on a specified night. Basic demographic characteristics for each client are recorded. The day-time component gives details about homeless people who did not stay in emergency accommodation the night before but who visited other locations used by homeless people, such as meal programs, drop in centers, certain social services, and congregating areas such as parks and certain streets. They may have slept outside, couch surfed or in a squat.

Recommendation: Establishment of mental health practice guidelines for children involved in child welfare services.

Mental Health Practice Guidelines for Child Welfare.
The REACH Institute
Washington, DC

<http://www.cwla.org>

The **Mental health Practice Guidelines for Child Welfare** stress the importance of making sure children and families in foster care receive the highest quality treatment. This is meant to draw attention to the often overlooked fact that this population is at high risk of costly, long-term mental health problems

Recommendation: Community based mental health and substance use services for street-involved youth.

Community Mental Health Liaison Program (CMHLP)
 Good Shepherd Centres,
 Hamilton, ON

The CMHLP is an outreach-based program that provides early mental health intervention, including, counselling and advocacy to street involved youth.

<http://www.goodshepherdcentres.ca/pdfs/Programs/Community%20Mental%20Health%20Liaison%20-%20Program%20Evaluation.pdf>

Community Mental Health Liaison Program: Through referrals from staff at youth agencies, a mental health nurse provides a basic triage assessment to help identify and respond to youth's mental health needs. The nurse conducts a holistic assessment before providing services and linkages to meet the needs of the youth. This assessment is done through an informal process over a period of time as the relationship builds.

