

# Making the Shift

Youth Homelessness Social Innovation Lab

## Preventing and ending youth homelessness in Canada

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Executive Director  
*A Way Home*



**A WAY HOME**  
**VERS UN CHEZ-SOI**

**CANADA**



# Part 1

Mobilizing an

**IDEA!**

# TACTICS:

Building an evidence base on  
Models of prevention and Housing  
First for Youth to shift public policy  
and investment

Collaborating with and supporting  
communities to implement models  
of prevention and Housing First for  
Youth



**Then something happened...**



# Making the Shift

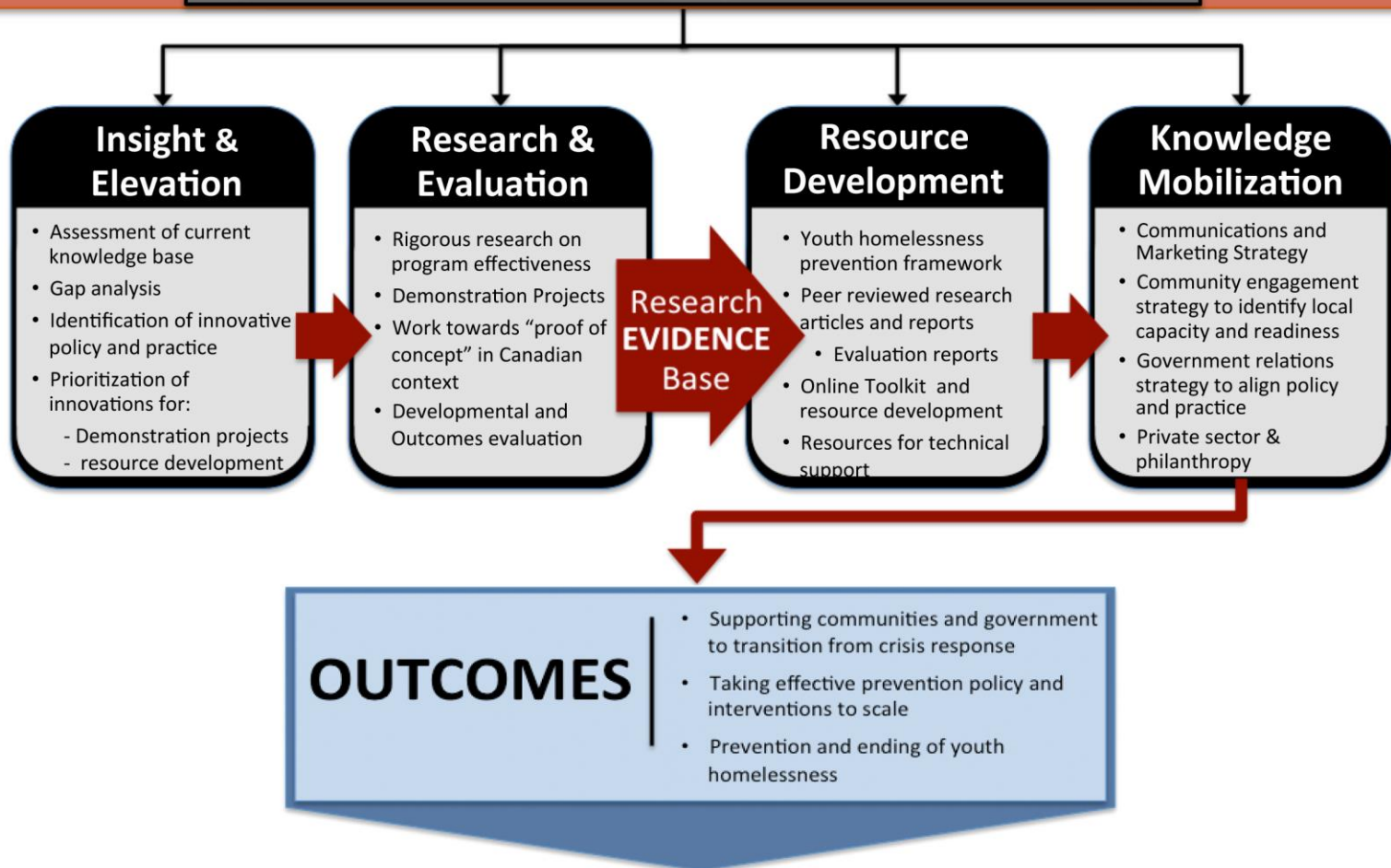
## Youth Homelessness Social Innovation Laboratory

### Strategic Partnerships

- Researchers
- Community
- Private sector
- Government
- Philanthropy
- Innovation
- Youth engagement

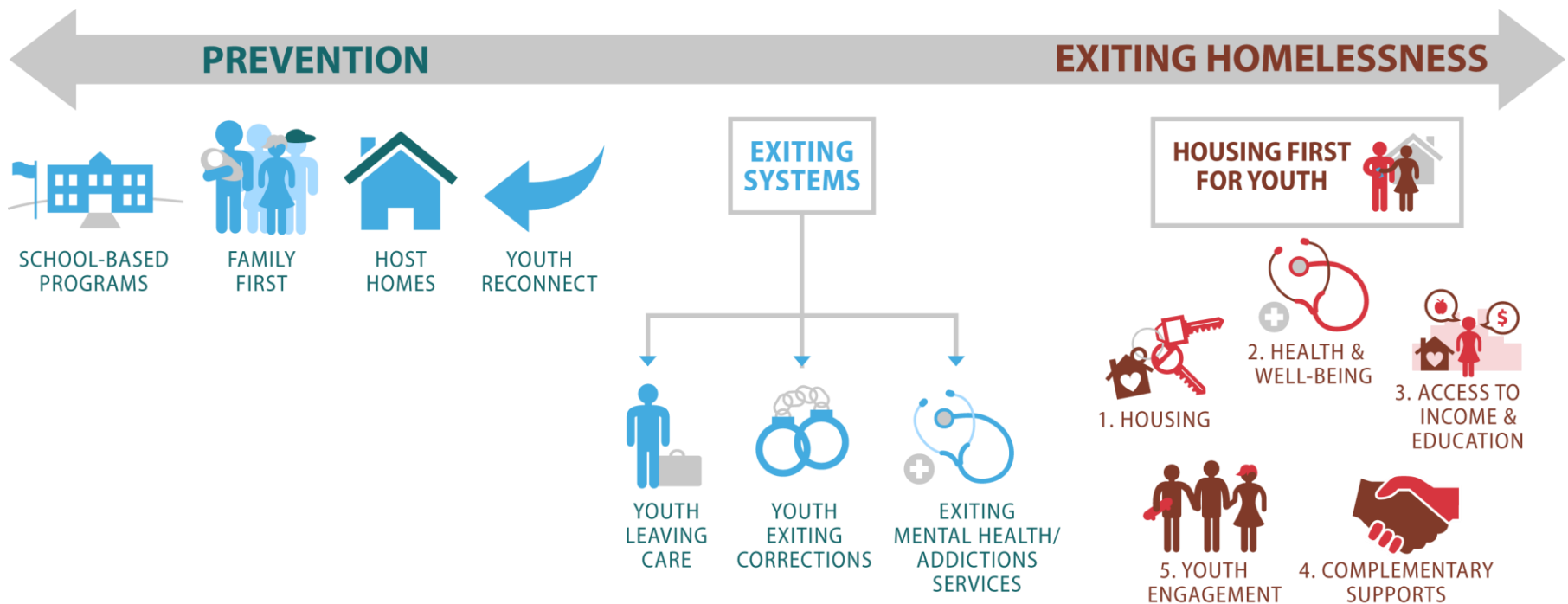
### International Engagement

- Canada
- United States
- Europe
- Australia



# Canadian Demonstration Projects

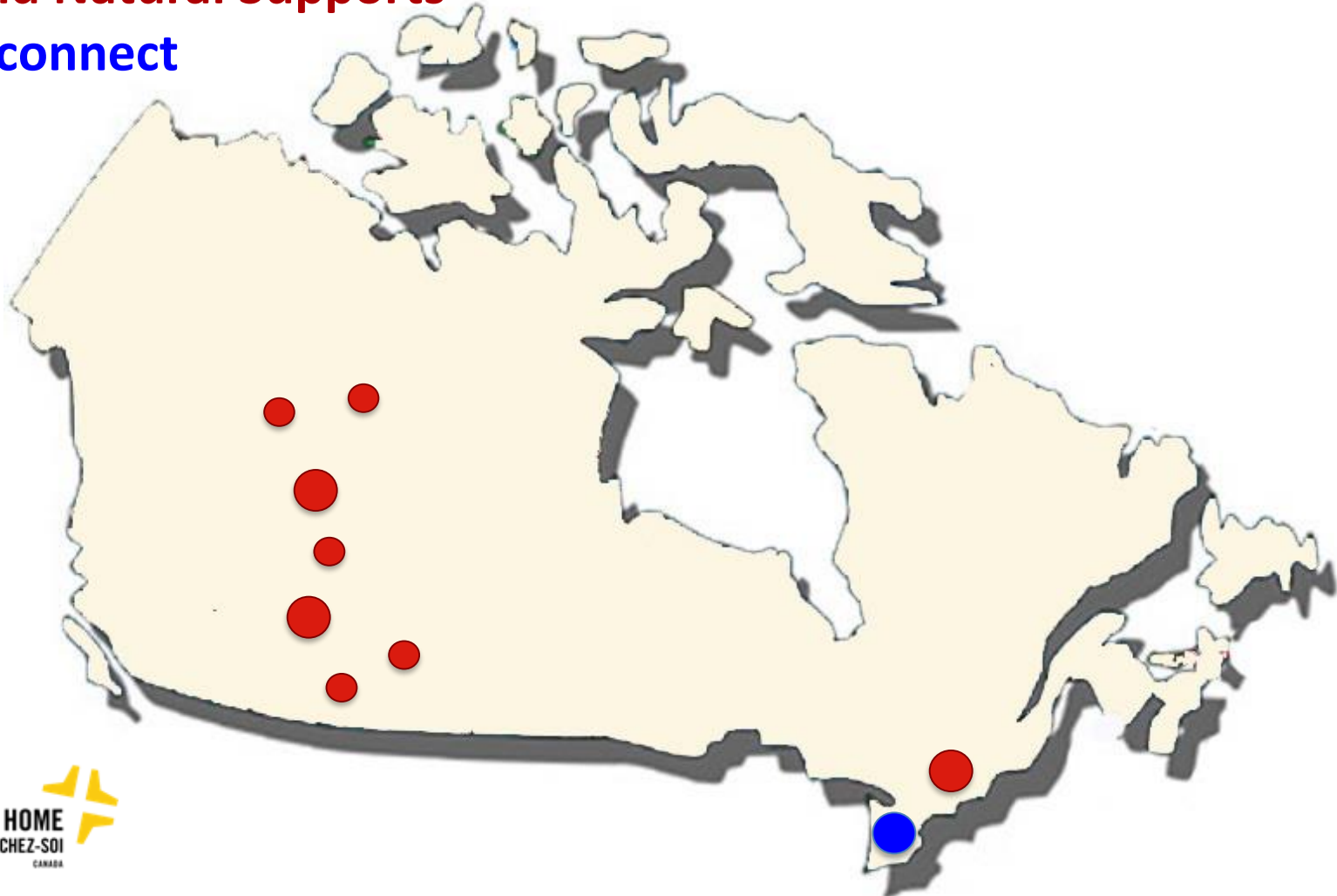
## Building the Evidence Base



# *PREVENTION*

## Demonstration Projects

- Family and Natural Supports
- Youth Reconnect





# Housing First for Youth Demonstration Projects

## Ottawa:

- Housing First for Youth

## Toronto:

- Housing First for Youth (leaving care)

## Hamilton:

- Housing First for Youth (Indigenous)



# Part 2

# Research and Evaluation



# Research and Evaluation

## Research:

- Control trial – interviews at three month intervals
- Control groups in each city
- Qualitative and quantitative methods
- Outcomes tied to service and supports
- Positive youth development orientation (strengths-based approach)

## Evaluation:

- Developmental Evaluation
- Outcomes Evaluation



# Research Team



**Sam Tsemberis**  
Clinical Director



Many key researchers  
from **At Home/Chez  
Soi**

# OUTCOMES



Outcomes are tied to service delivery model. Because the focus of HF4Y is not just on independence, but on healthy transitions to adulthood, outcomes go beyond a simple measure of housing stability.

- Health
- Mental health
- Addictions
- Personal safety
- Educational engagement and achievement
- Income and employment
- Quality of life
- Life skills
- Family and natural supports
- Social relations
- Community connections
- Cultural connections
- Engagement in meaningful activities

# Final thoughts about the research

- The clinical trial helps build knowledge and demonstrates proof of concept. Important for policy, funding and taking HF4Y to scale.
- Need to balance the needs of the trial and those of the communities.
- Therefore requires some trial-based (though community informed) parameters on the population.

# Part 3

## Considerations for Service Delivery



# Prioritization

How do we  
**prioritize?**



# Communities Set Priorities

**The community identifies those young people in greatest need. Traditionally Housing First prioritizes chronically homeless youth with high acuity mental health and addictions issues.**

HOWEVER, communities may choose to adapt the HF4Y model to prioritize:

- Young people leaving care
- Indigenous youth
- Youth leaving corrections
- Sex trafficked youth
- Etc.

# Additional Vulnerability Factors

**Young people who do not fit the criteria of high acuity chronically homeless may be considered if:**

- Their family and natural supports are particularly weak or absent.
- They lack personal safety.
- They are experiencing serious mental health and/or addictions problems.
- They are forced to work in unsafe conditions (including being sex trafficked).
- They may have disabling conditions that affect decision-making and judgement, such as FASD, brain injury or a developmental delay. They may also be unaware of this.
- They have experienced high levels of adverse and traumatic experiences, including physical, sexual and emotional abuse and neglect.
- They have been released from institutional care (child protection, corrections/juvenile justice, inpatient mental health care) without a plan, housing or supports.
- They are pregnant and / or have children.



# Prioritization tool

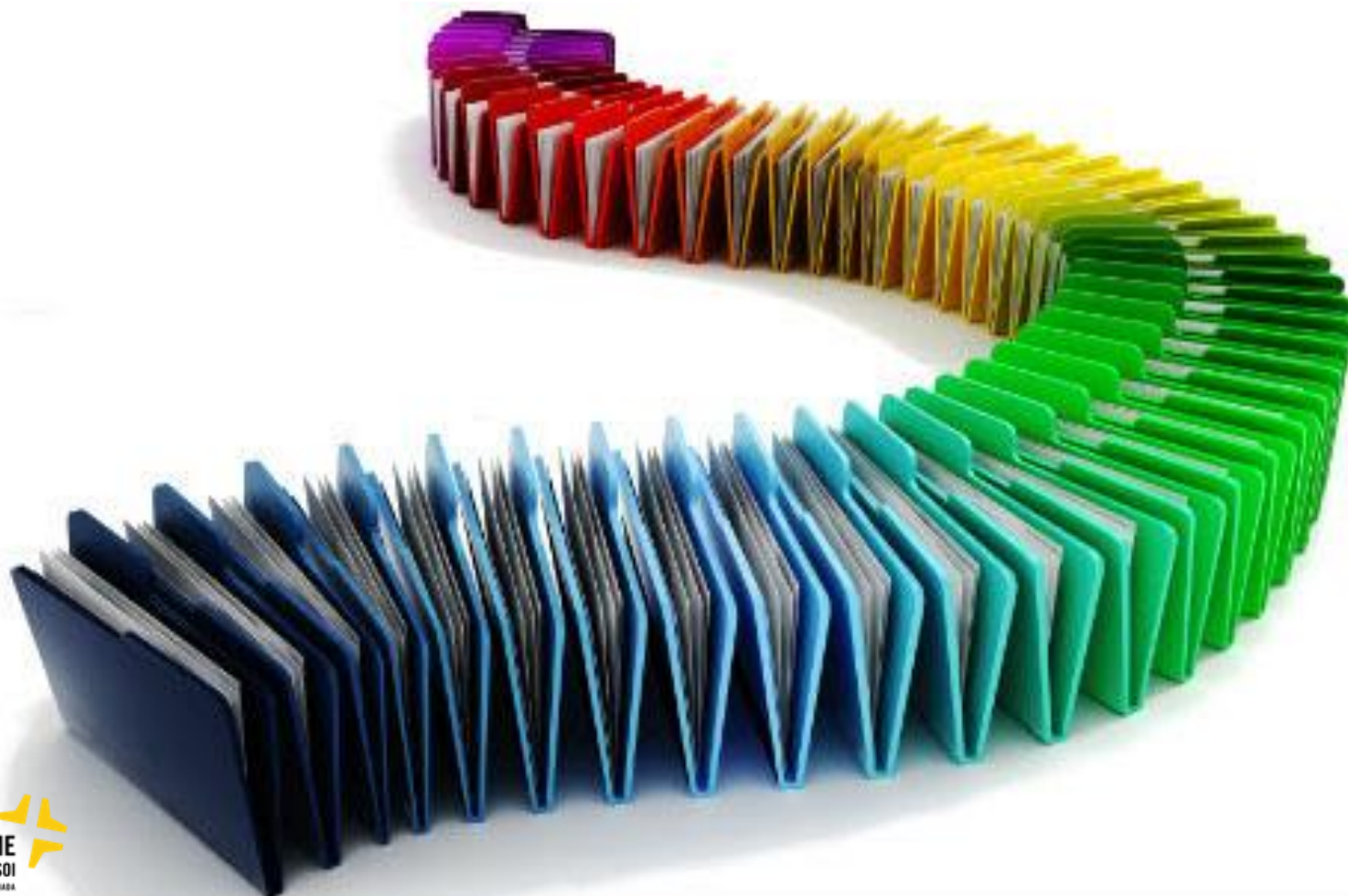
For this project, we will be using the

**Youth Assessment and Prioritization tool**, because it:

- Is based on the needs of developing adolescents and young adults
- Is strengths-based and rooted in a Positive Youth Development orientation.
- It involves both client and staff knowledge
- It assists decision-making, and doesn't determine prioritization for you
- It can catch things that other vulnerability assessment tools cannot.



# Case Management



# Good Case Management

- Client driven
- Effective assessment
- Collaboration and Cooperation
- Right matching of services
- Contextual case management
- Evaluation for Success



**Each youth has a primary worker  
but consider **Shared Caseload****



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# Consider the importance of Family and Natural Supports





# Case loads





# Case loads

Between 7-10 with the  
ideal being *seven!*





# Staff training and competencies



# Key areas for on going training

- Positive youth development and strengths/asset based case management
- Trauma informed care
- Harm Reduction
- Developmentally focused motivational interviewing

# Questions or comments?

[www.homelesshub.ca](http://www.homelesshub.ca)

[www.AWayHome.ca](http://www.AWayHome.ca)

