

Making the Shift

Youth Homelessness Social Innovation Lab

Preventing and ending youth homelessness in Canada

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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

Insight & Elevation

- Assessment of current knowledge base
- Gap analysis
- Identification of innovative policy and practice
- Prioritization of innovations for:
 - Demonstration projects
 - resource development

Research & Evaluation

- Rigorous research on program effectiveness
- Demonstration Projects
- Work towards “proof of concept” in Canadian context
- Developmental and Outcomes evaluation

Research
EVIDENCE
Base

Resource Development

- Youth homelessness prevention framework
- Peer reviewed research articles and reports
 - Evaluation reports
- Online Toolkit and resource development
- Resources for technical support

Knowledge Mobilization

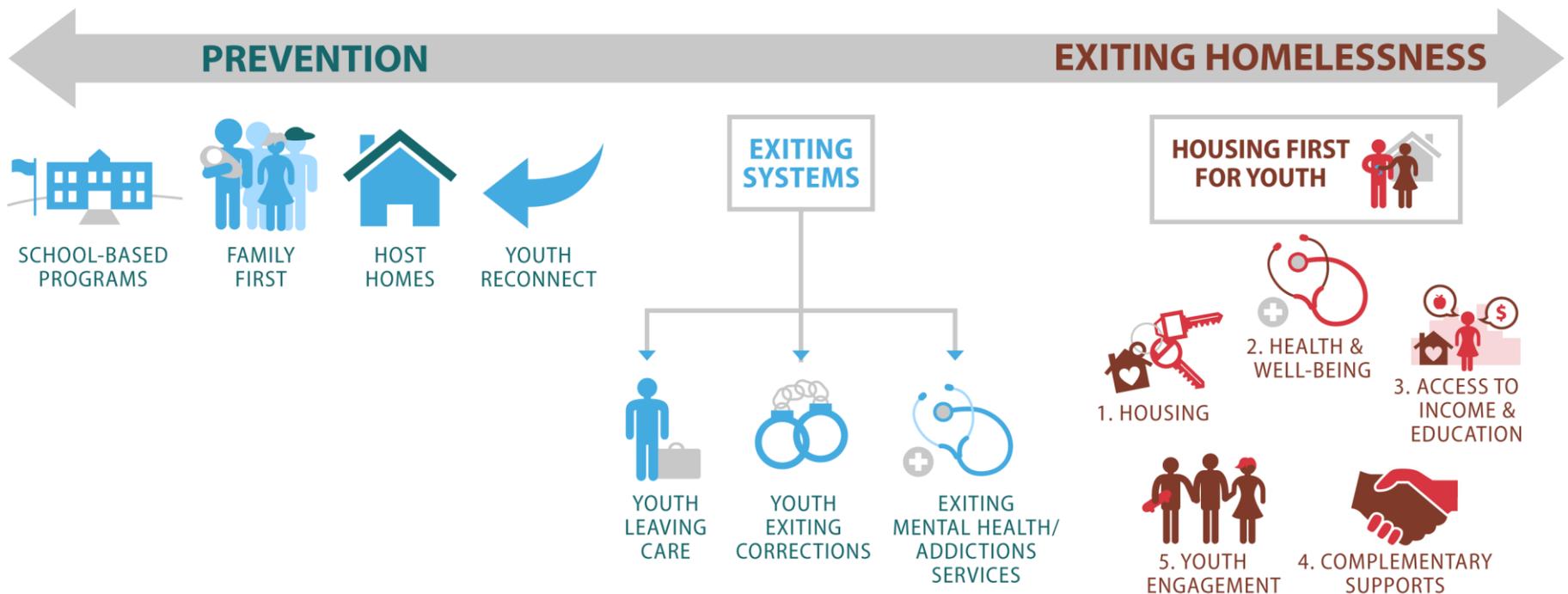
- Communications and Marketing Strategy
- Community engagement strategy to identify local capacity and readiness
- Government relations strategy to align policy and practice
- Private sector & philanthropy

OUTCOMES

- Supporting communities and government to transition from crisis response
- Taking effective prevention policy and interventions to scale
- Prevention and ending of youth homelessness

Canadian Demonstration Projects

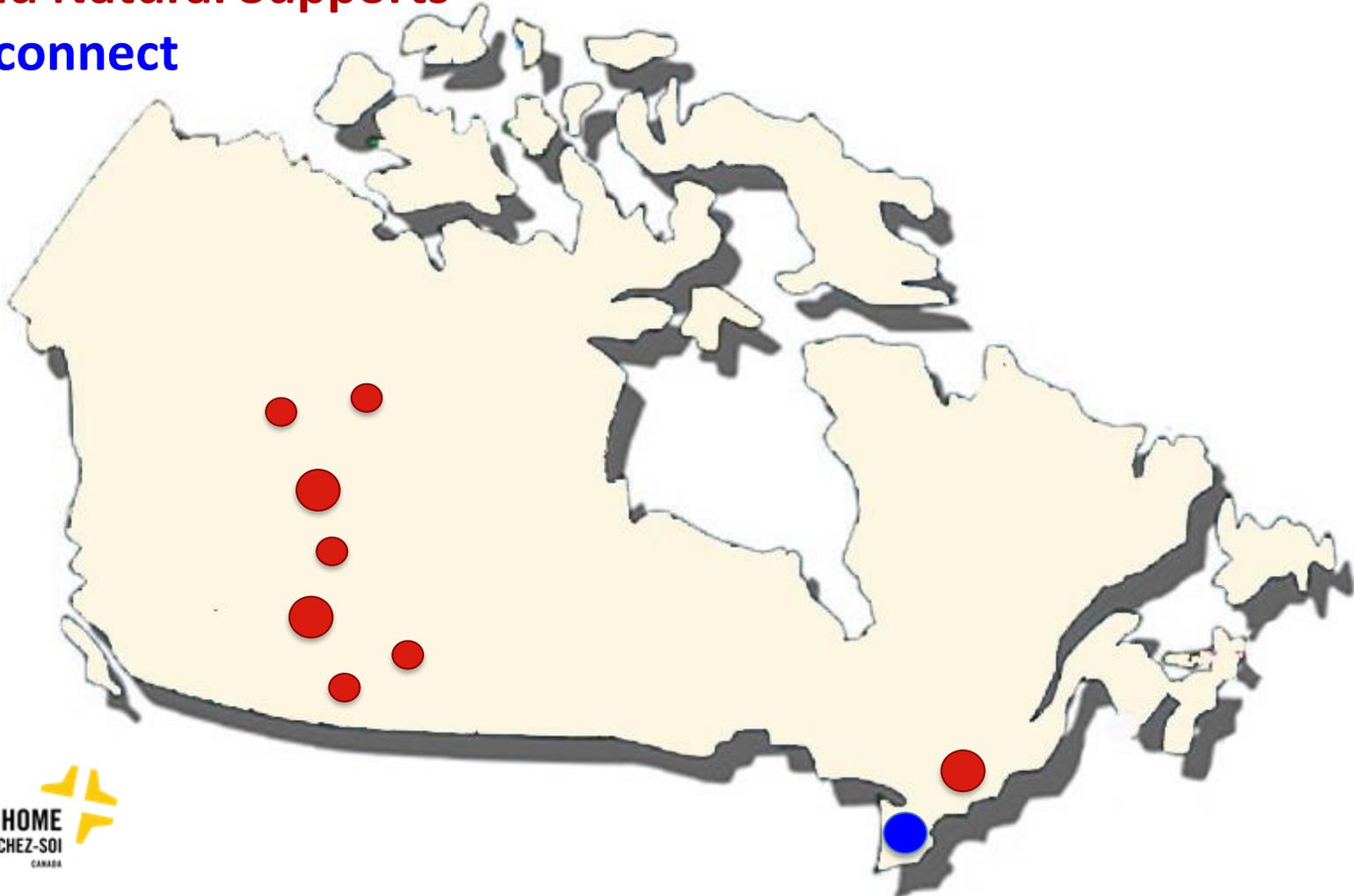
Building the Evidence Base



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

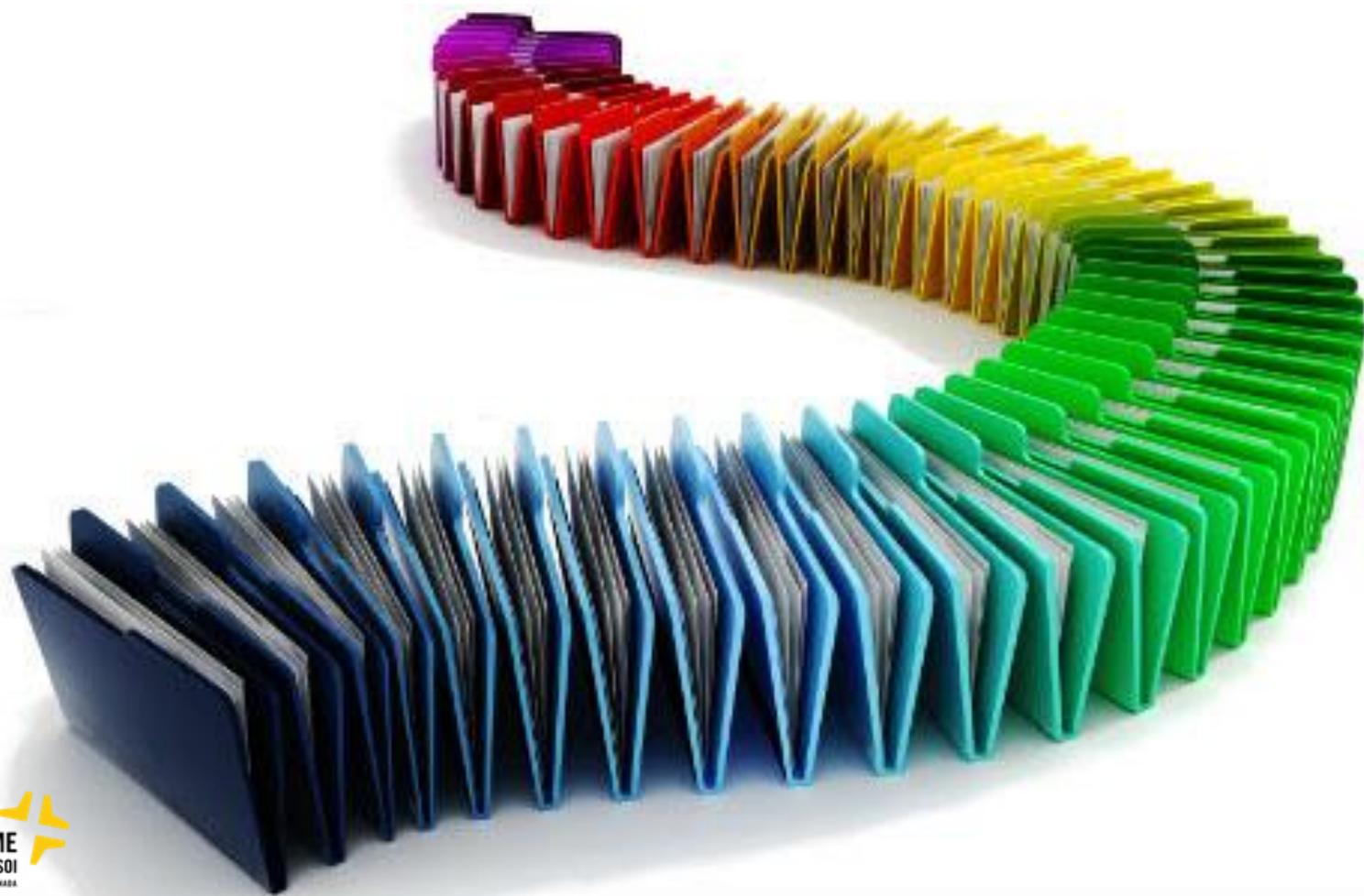
For this project, we will be using the

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?

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