



**Youth Homelessness  
Roots, Connections, and Actions  
Symposium Report**

**March 17<sup>th</sup> & 18<sup>th</sup>, 2010**

**A Special Session of the  
Unite and Ignite Conference  
Ottawa, 2010**

**Report Prepared by**

**Les Voakes – TYPS: Youth Centres Canada  
&  
Stephanie Clark – The Students Commission**

**Funding Support provided by Rural Secretariat**

TYPS: Youth Centres Canada  
P.O.Box 729 Merrickville, ON K0G 1N0



**Youth Homelessness: Roots, Connections, and Actions**  
**Symposium Report**  
**Symposium Agenda**  
**March 17<sup>th</sup> & 18<sup>th</sup>, 2010**

March 17	Agenda	
1:00 PM	<b>Opening the Symposium</b> Greetings and Acknowledgements Introductory Statements Symposium's Process, Agenda, and Outcomes	
1:30 PM	<b>Youth Panel: Voices and Stories</b> Aboriginal & Métis Youth Experience Youth from Rural/Small Community Experience Falling through the Cracks Big City Street Experience	
2:30 PM	Break	
2:45 PM	<b>Understanding the Youth Homelessness Continuum</b> What do we really Know? Constructing the Youth Homelessness Continuum Identifying inputs, outputs, and outcomes of Youth Homelessness Constructing and Analyzing the Continuum Allies in Research and Government	
5:00 PM	Adjourn to Next Day	

<b>March 18</b>	<b>Day 2</b>	
8:00 AM	Breakfast & Review/Discussion	
9:00 AM	<b>Times and Places for Intervention or Support</b> Identifying the points for Intervention Allies in Community - presentation by Programs (Emergency, Transitional, Alternative/Innovative approaches)	
10:15 AM	Break	
11:30 AM	<b>Making a Difference</b> Building a Framework Best Practices and Promising Practices to Build Upon	
11:30 AM	Wrap Up and Next Steps	

# **Youth Homelessness: Roots, Connections, and Actions**

## **Report on Process and Findings**

### **Opening the Symposium**

There are few symposiums that have had more challenges than this one in organizing. There was great interest and commitment to the topic and many individuals wanted to contribute and be present. However, not all were able, as the unfortunate reality is those most involved in homelessness issues, are also working for organizations with the least funds and resources to travel and attend meetings and symposiums. There were several shifts in the scheduling of the symposium, for reasons beyond the control of the organizers, but all participants agreed to follow the previously circulated format and to work on the originally planned goals.

There were over thirty fully committed individuals to the full weekend's agenda, with another twenty persons able to intermittently participate. As mentioned earlier, many individuals were unable, but sent notes, opinions, recommended documents, and furthered the overall understanding and goals of the symposium. The majority of attending participants represented expertise in small town, rural, or remote communities, with one-third of the symposium being youth (under 25 years of age).

### **Acknowledgements**

The Rural Secretariat had provided funding and support toward the Youth Homelessness: Roots, Connections, and Actions Symposium. The Centre of Excellence for Youth Engagement was a key partner in co-funding and co-facilitation of participants, both for the symposium and for the overall conference, Unite and Ignite 2010. TYPS: Youth Centres des Jeunes Canada provided the primary coordination for the symposium and background support.

There were approximately 40 community organizations that provided input and involvement in the symposium and its report.

Bathurst Youth Centre	Bathurst, NB
Beaumont Youth Centre	Beaumont, AB
Community Youth Network	NF
Carleton Place Youth Centre	Carleton Place, ON
Eastern Townshippers	Sherbrooke, QC
Sidestreet Youth Centre	Dresden, ON
Faro Youth Centre Program	Faro, Yukon
Lanark County Transitions for Youth	Lanark County, ON
Merrickville Youth Group	Merrickville, ON
New Mentality	Toronto, ON
Perth Youth Action Committee	Perth, ON
Regional Multicultural Youth Centre	Thunderbay, ON
Sudbury Action Centre for Youth (SACY)	Sudbury, ON
SideDoor Youth Centre	Yellowknife, NWT
Smiths Falls & District Club for Youth	Smiths Falls, ON
Stellarton Youth Centre	Stellarton, NS
Student Commission	Toronto, ON
The Haven	Kanata, ON
TYPS: Youth Centres Canada	Merrickville, ON
University of Alberta	Edmonton, AB
Youth Services Bureau	Ottawa, ON

## **Introductory Statements**

TYPS planned and coordinated a symposium March 17 and 18<sup>th</sup>, 2010 on the issues of Rural Youth Homelessness, bringing together front-line organizations and national experts on Canadian youth homelessness to review, develop, and recommend best practices and strategies to specifically address rural youth homelessness. The symposium connected with the main Unite and Ignite Conference as a special theme which continued to March 21. This type of symposium had never been done by TYPS before, but the opportunity to draw upon the potential synergy of the annual conference with its diversity and energy, was expected to add to the learning and knowledge sharing on this topic.

Past conferences have included individual workshops, for sixty minutes of discussion, on the topics of youth homelessness. Some past TYPS workshops have had special attention to the needs and special circumstances of rural youth homelessness and TYPS had developed a considerable literature and connection with the subject. The symposium's approach was to provide a concentrated focus on this important topic, as identified by many youth organizations at last year's conference and during the past year to TYPS. Rural Youth Homelessness was decided to be a part of an enhanced theme symposium with additional workshops and discussions during the main conference (totaling at least another 5 hours of workshops, tools, development, and action plans.

## **Symposium's Process, Agenda, and Outcomes**

The idea behind the symposium was from the recommendations of the November 2009 meeting in Smiths Falls, ON. At that meeting several communities from across Ontario were involved. The agenda was outlined and widely circulated to interested groups across Canada, through the TYPS network. The agenda is included in this report, at the beginning of the document.

**The process of the symposium and workshops was to concentrate discussion and presentations on youth homelessness over the four day period with a group of participants, representing communities from across Canada, that were experienced in issues and problems of youth homelessness. This would include representatives from government, academia, youth program managers, youth workers, and youth.**

**The process described by the agenda was to review information from experts: both from studies, reports, and from first-hand accounts by youth that have experienced homelessness. The participants would then work together and in smaller discussion groups to consider the key points concerning youth homelessness and construct a youth homelessness continuum chart, considering differences in rural vs. urban experiences and where/when different interventions would better support the youth.**

The outcome was to have a final report and recommendations on means to reduce youth homelessness, particularly with attention to youth originating from rural, remote, and small towns.

## **Youth Panel: Voices and Stories**

**Aboriginal & Métis Youth Experience:** Our guest panelist was unable to attend, however there were several aboriginal participants and organizations working with aboriginal youth that were able to contribute their experiences during the group discussions.

**Youth from Rural/Small Community Experience:** M.J. is a rural youth from Quebec. She lived in a difficult family environment with regular physical and mental abuse. MJ noted that her mother had a very troubled teen history and had been a teen mother with an abusive partner, often moving from place to place and usually in very bad housing. Her mother's best friend had similar history with serious mental health problems and living in extreme poverty (often shacks with no running water, heat, or electricity). MJ's home for a few years, was on the edge of a large wilderness/wooded area and she often dreamed, even as a little girl, of escaping into the woods to live.

Eventually the mother moved the children into the city because it was the only place with supportive shelters to assist. The family did not adjust well to the city and MJ increasingly had mental health and substance abuse issues. She began to runaway regularly before sixteen years of age. Tried to live with father and his new family but this situation was very problematic and she left at 16 yrs. to live on the streets in the city (where she could panhandle for drugs/shelter). She started going to the downtown drop-in youth centres, was referred to a psychiatrist who was able to help her enter a recovery program and became more connected with other Youth Services Bureau in Ottawa services.

MJ credits much of her life improvements to the assistance of the youth drop-in and the Ottawa YSB services and referrals. She has connected with many programs and is finishing school. She has developed self-confidence and is now able to do public presentations and has participated in several mental health projects as a youth leader.

**Big City Street Experience:** Renee was from a Montreal, Quebec francophone family. She grew up with a blended family since 1 1/2 years old. Renee's family often moved from apartment to apartment because of rent problems. There were always tensions with the step-mother. By 12 yrs. Renee was asked by the step-mother to leave but was able to move with her natural mother until 14 yrs., trying to avoid their home by being involved with cadets and music. But this home environment was always unstable and another house-sharing member (a woman) tried to commit suicide, which further upset the household. Renee was asked to leave by 14 yrs. and she ended up on the streets in Ottawa (which was a new city and she didn't know anyone).

Eventually, she ended up in CHEO (Children's Hospital) and a Children's Aid Worker became involved and arranged Renee to return to her mother's

home. This arrangement broke down very quickly and the CAS set up a foster group home situation as a transitional type of housing. A short attempt to try with father's home and return to school ended when the relationship broke down again. Now 16 yrs., Renee became homeless, kicked out of school, heavily into drugs, and fully entrenched into street living. Panhandling was the main source of revenue and friends were formed based on the ability to share drugs. Sleeping was usually at Major Hill Park, under bridges and underpasses – sleeping outside with boyfriend sharing a single sleeping bag.

Renee had experienced a lot of harassment from police and security officers. Often, police gave her \$50 fines, which she couldn't pay. Eventually, Renee got sick and tired of drugs and lifestyle. Many of her friends were also coming to the same decision, which helped her resolve. Renee became involved with Operation Go-Home's youth drop-in centre. An Ontario Works staff assisted in getting Renee some housing funds and back into school (she had to switch schools once to avoid the drugs). The Ottawa Youth Services Bureau was also a great assistance and she began volunteering at their drop-in and programs.

Renee has just completed her Social Service Worker program at Algonquin College and is considering applying for Law School.

**Falling Through the Cracks:** Les Voakes provided a synopsis of studies and the experiences heard from youth over the past 20 years. The challenge has been that youth are not in any position to learn about their rights, options, and resources for support from the primary sources of family, school, or overall community until after they have become “street involved.” There is little evidence that the youth who become street involved are from stable, middle-income homes. On-going poverty or on-going financial stressors are common indicators. An incident of early childhood abandonment by a parent, caused by relationship breakdown or death, have been shown to be more common for youth who end up homeless than was previously thought. There are often significant indicators of substance abuse and mental illness problems within the family and/or the youth. Abuse in all forms is the most common factor. Even though these risk factors are well-known and documented, there is no consistent plan or obligation (except in obvious physical or sexual abuse to minors) for intervention or offered assistance.

Most studies have shown that youth homelessness is first experienced, in some form, by the age of 15 years. Becoming independently homeless usually between 15.5 and 16 years (when CAS is unable to intervene).

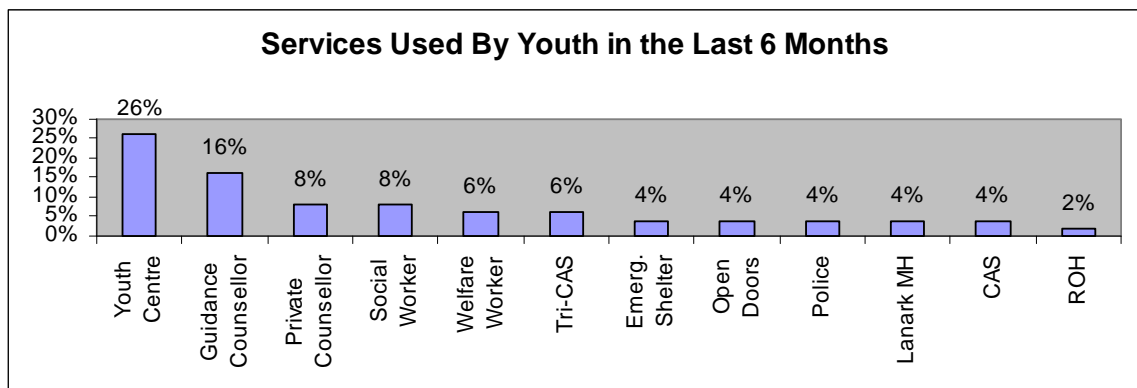
Rural/small town youth have a particularly difficult problem as there are usually few or no resources or outreach in the community (except the limited capacity of a local youth centre). The youth usually find they have few options but to leave for a nearby city, where some services exist and where they do not feel as stigmatized and ostracized compared with their own community.

The most concerning risk is that these youths are particularly vulnerable to street-life harm because of their lack of experience in city environment and the concentration of predatory “friends”. Panhandling, prostitution, and crime become primary means of survival; substance abuse the main means of coping.

Poor nutrition, sleep deprivation, and substance abuse can cause, contribute, or aggravate mental health conditions. A lack of identification and health card, along with a learned distrust for institutions/and officials result in serious health risks and conditions.

Whether in small towns or cities, street involved youth consistently have reported the most trusted and accessed service is the local youth centre or drop-in centres. These organizations often are the first point to intervention/assistance provided, far more often than social workers, schools, police, or other services. The Transitions Report stated small town youth centres were the primary support for at-risk homeless youth compared with all other youth services. (Diagram #1)

**Transitions Report: Youth Homelessness in Lanark County 2003 Diagram #1**



Les summarized that there appeared to be a continuum path toward youth homelessness with clear indicators and points where possible early intervention could be identified in assessment plans to reduce the level of youth homelessness or at least reduce the level of harm caused. In effect, there were many opportunities to close the cracks which too many youth fall through.

## Understanding the Youth Homelessness Continuum

### What Do We Really Know?

What do we know about homelessness, especially for youth?

What does it mean?

What does it look like?

What is being done?

Is it just being without a home? Lack of housing? Couch Surfing?

**Rural Poverty:** Food banks, soup kitchens, other resources (including most social services are minimal, sporadically, or often not available at all. Access to any type of support is further limited by transportation issues (no public transit and often considerable distances between home and a town with a service. Rural and small towns rarely receive funding for anti-poverty/employment projects or support programs because those resources are usually directed to the cities, where there is a seemly higher need because of the actual numbers of homeless, however the per capita levels of homelessness are often the same or higher in rural, remote, and small town communities. (Voakes 1991)

**Different Kinds of Youth Homelessness (under housed, absolute homelessness, legal standards):** It was agreed that Youth Homelessness was difficult to define because of its complicated appearances and that many youth, especially from rural/towns resist the labeling. Raising the Roof describes youth homelessness as:

*“youth who are homeless, at risk of homelessness, or caught in a cycle of homelessness for whatever reason. This includes the many homeless youth (some say as high as 80%) who don’t live on the street and who are among the hidden homeless... Most often ... youth are defined as 16 to 24 years old. They are not living with a family in a home and they are not under the care of child protection agencies. Often they are defined as living in a cycle of homelessness which can mean being temporarily sheltered or living in crowded or unsafe conditions.”*

The group focused on several questions:

- Transitioning: how difficult is it to transition from abject homelessness to being an active participant in society?
- What are the barriers and opportunities to transition from abject homelessness to being an active participant in society?
- What are the results and effects of homelessness?
- What are some of the misconceptions of homelessness?
- What reductions of values are created in the society to deem the homeless as valueless, creating judgments, and having the division of being visible vs. invisible?

## Identifying Inputs, Outputs, and Outcomes of Youth Homelessness

### **Key issues noted:**

- 1) Stigma and being Labeled
- 2) Visible and Invisible Poverty
- 3) Couch Surfing is homelessness
- 4) Transitional Housing is needed for support and is important to the solution
- 5) “Red-tape” barriers cause delays, frustrations, and loss of hope for “getting back into society”
- 6) Lack of supportive adults creates environment for homeless youth and barriers to re-integrating/reconnecting to community
- 7) S/he doesn't exist: and when you don't exist, you get taken advantage of.

### **The group spoke at length about several key, connected issues:**

- 1) Health and mental health services (access and availability)
- 2) Knowledge of and access to services
- 3) Education (for young people, reintegration, alternative forms of receiving credit, education for community, families etc about issues and homelessness)
- 4) Stable, adequate housing
- 5) Early and adequate system interventions in family issues
- 6) Youth friendly services (particularly identification and crisis intervention)
- 7) Youth centres as service provider/connection/conduit.

### **Outcomes of Youth Homelessness**

- 1) Loss of potential for young people (early school leaving, low paying jobs)
- 2) Increased costs in health care (STDs, HIV, drug addictions)
- 3) Increased costs to justice system (calculated at more than \$250 per day for a youth involved in the justice system)
- 4) Increased costs to social services (CAS, welfare)
- 5) Unplanned pregnancies



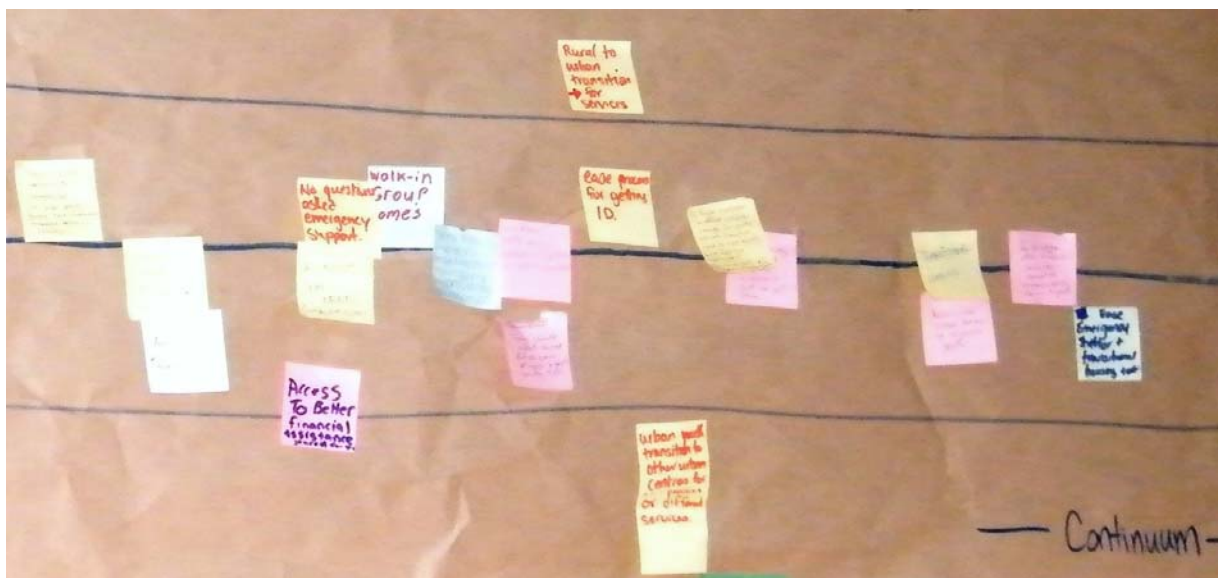
## Constructing and Analyzing the Continuum

What are the transition points from being part of the community and having a home – to homelessness – to re-connecting and being a contributing person in society/community? Are there different paths to homelessness for youth who are from rural/small towns or remote/northern communities, compared to large urban centres? What are the causes and circumstances which cause youth homelessness? What are some of the barriers and opportunities that a youth faces when transitioning from abject homelessness to active participation in society?

To construct a model for analysis to understand youth homelessness, a continuum chart was roughly constructed, providing means to place known common points of reference. This includes risk factors/indicators, consistent time-line points, intervention potentials, support services, and noted barriers. A basic framework was presented to build upon, which had been roughly discussed and described in a previous Ontario meeting of youth projects, organized by the Lanark Transitions Project.

A Youth Homelessness Continuum was worked upon throughout the symposium. There were many points readily identified and supported by research and the experience of participants of the symposium. For example, research consistently reveals first youth homelessness experiences are usually in the youth's fifteenth year, with 15.5 years of age being the most common reported age of final exit from home. However, youth reported earlier, intermittent experiences of being unable to return home for short periods and relying on couch surfing at friends or relatives. School grades dropped and truancy commonly began in grade 9 and early school leaving often occurred within grade 10. Commonly reported was the lack of awareness of services that might help, and the barriers because of young age, inexperience, unpreparedness for independent living and lack of money.

These points were included in the continuum charts. Below is a sample section of the diagram constructed from all the discussion notes and inputs.



## **Continuum Chart & Stages of Street-Involved/Homeless Youth: An Overview**

In the chart below, is an overview of commonly reported street-involved/homeless youth experiences, referenced within the most reported age set groups. There may be youth without any of the early indicators/experiences, but they would be rare and were not found in the collective experience or reviewed literature, other than those with serious mental health issues. The most consistent factor precipitating a youth's start along the homeless continuum is that there is an event or crisis which causes them to feel abandoned or betrayed by key family members. Despite some youth's presentation of "toughness" there is usually a great deal of bravado masking a very vulnerable individual that is desperate to cope with conflicting emotions. It needs to be remembered it is this core vulnerability and confusing, often emotionally painful, feelings of disconnectedness which provides the opportunity and willingness to take risks with strangers, crime, gangs, sex, drugs, and other high risk activities.

It is also important to note that the chart reflects the "average" ages for the most commonly reported experiences and that all points are not necessarily experienced by every youth that has been "street involved" or "homeless." Not all homeless youth will have experienced all of the points noted, but some do. Some youth may literally skip a section or pass through it very rapidly: therefore a sixteen year old may have his/her life more closely resemble the seventeen year old section of this chart. Similarly, it is possible that some rural/town and remote youth may not proceed past the 15-16 year old section and mainly remain in their community because of an intervention (youth worker, friend/family) that connects the youth to a program that provides some level of support and independence. Another alternate path for girls is pregnancy, which immediately puts into action a series of service supports which provides a level of independence which may eliminate the need to migrate to a city.

After 18 years of age, the youth is entering a legal and psycho-social phase of adulthood. Depending upon the level of street entrenchment, noted in the sections below, one of four main paths are the most common results:

- 1) Fully street entrenched – meaning continuations of all negative behaviours and consequences (drugs, crime, prostitution, very poor health, serious emotional/mental health issues). Result is the homeless youth becomes a homeless adult.
- 2) Career Criminal – gangs and prisons.
- 3) Seeks exit strategies from street – usually long and difficult, relapses to street life and street culture – but eventually can exit with considerable assistance and support from social services and community programs. Exit strategy requires a significant new identity shift.
- 4) Death – drug overdose, accidental (fires and cold exposure), health collapse (Aids, hepatitis, etc), murdered, or suicide.

An important point throughout this continuum/chart is the identity construct of the youth. The most common difference between city youth and rural/town, remote youth, was where along the continuum the youth self-identified as being street-involved or homeless. Typically, the youth in the cities identified themselves as street-involved/homeless earlier, whereas the small community youth resisted that

identity until they moved into the city, despite having similarly age-phased experiences as city youth.

Several studies have looked at the identity construct through the phases/stages of street-involved youth and youth homelessness in the theoretical deviance models of “career-identity.” (Becker,1963). This framework is particularly relevant for youth that are drawn into “gangs.” Noteworthy is that in most of our participants’ experiences and examined cases, the career-identity of being “street” or a “homeless youth” is developed through imposed circumstances, most of which are not in the youth’s control or choice. Being sexually assaulted at a young age, dysfunctional family, single parent home may each compound a sense of shame, guilt, and being unwanted. A “street” identity becomes a survival strategy to cope with the inability to reconcile their lack of connection with family or community. This “stigmatized,” self- awareness and new “street” identity is gradually verified and continually re-confirmed by external interventions from police, courts and social assistance programs (Goffman, 1963).

The most common ways for “exiting” from the street (program interventions and support) are dependent upon self-assertion of being street involved and homeless. This is re-enforced by social services and service provider agencies, as access may be limited only to those that meet the program’s criteria of being a street or homeless youth.

The youths’ that choose and assert their desire to exit the streets, need to plan an exit strategy through supports and assistance of specialized school or employment programs, substance abuse recovery programs, mental health support programs or other special needs programs. Ironically, to exit the streets, the youth must therefore first overcome their self-identity of being homeless or street-involved, while simultaneously accepting this negative, stigmatizing label to access the support and help available from service providers and programs.

## Continuum Chart & Stages of Street-Involved/Homeless Youth

11-12 years old (Puberty)	13-15 years old	15-16 (Not subject to CAS intervention and can leave school)	17 years old	18 (Adult Legal status)
Parental Instability Divorce/Splits/family violence/ was adopted	Increased detachment from family, avoids going home especially weekends. Week-end couch surfing common and referred to as “staying over at a friends”	Leaves home more often and for longer periods Couch surfs regularly at friends and relatives, sometimes for weeks. May migrate to larger town or nearby city and may occasionally return to home community, trying to straddle independence with staying connected to family. Becomes more connected in street family and/or gangs as support	Usually migrates to a city and stays. Has learned survival resources (soup kitchens, emergency shelters, sleeping in vacant buildings, panhandling, stealing, doing and selling drugs, and/or prostitution. Fully adopts a “street family” or gang.	Continues in cities, rarely connects to home community or family Primary support those from street/gang family and some specific social services/programs.  Often first contemplations about wanting to exit street life and seeking new supports/trusting non- street people
Parent(s) Substance abuse pattern common	Parent(s) Substance abuse pattern common	Parent(s) Substance abuse pattern common	Parent(s) Substance abuse pattern common	Parent(s) Substance abuse pattern common
Youth acts as parent for younger siblings	Decreases time with younger siblings but still protective.	Avoids younger siblings	No contact with parents or siblings or very rare.	Sometimes re-contacts siblings.
Sexually abused by family member	Avoids abuser by any means possible	Avoids or confronts abuser – but often leaves to avoid. Often forms boyfriend/girlfriend relationships where they are the abuser or the abused	No contact with original abuser. Often forms relationships where they are the abuser or the abused	Often forms boy friend/girlfriend relationships where they are the abuser or the abused

Few friends	Loses all childhood friends new friends are substance abusers	Only friends are partiers, substance abusers, and can stay overnight	Street and gang friends become very important as friends and family.	Street and gang still important. Often time that doubts about quality of friends are considered (users, trust, etc)
	Drops all past positive interests (sports, playing an instrument, etc)	Time spent mostly on managing from day to day for basic requirements (food, shelter, not appearing homeless.	Day to day survival is primary concern. Usually alcohol and drugs primary means of recreation.	Day to day survival is primary concern. Usually alcohol and drugs primary means of recreation.
Sexuality uncertain and/or not accepted by family, community or friends (GLBT)	Uses sex for any relationship that may benefit (avoiding home, drugs, emotional support). Vulnerable to sexual predators that have home community respectability. Girls will sometimes use pregnancy as means of gaining social services for independent living. May still be confused with sexuality or in denial or hiding. Suffering bullying if not straight	Sex regularly means of securing needs (place to stay, drugs). If already moved to city, prostituting common Likely knows sexuality preference but may be hiding it or being bullied. This is the time when the youth is the most vulnerable to sexual predators, particularly if located in the city.	Knows sexuality but uses sex as a means to an end. Prostituting regularly	Knows sexuality but uses sex as a means to an end. Prostituting self regularly

Mental Health is often difficult to judge but mood swings, especially anger and depression are common	Greater mood swings, and serious anxiety and depression are common. STDs common. Seeks info and way to avoid pregnancies. Periods of sleep deprivation For some first suicidal ideations.	Health is poor, commonly sick with colds, influenzas, infections, suffering lack of sleep and substance abuse effects. Increased periods of depression/suicide possible and considered a valid option	Health issues connected to poor hygiene, drug use and multiple sex partners/unprotected sex Increased periods of depression/suicide possible or considered as an option	Health issues connected to poor hygiene, drug use and multiple unprotected sex partners. Increased periods of depression/suicide possible or regularly considered as an option. Accessing health services is much easier, takes advantage where possible.
School marks are lower than potential	School attendance more erratic, fails courses	Very poor school attendance, marks, suspensions, quits regular school but may try alternate school believing possible to complete Secondary school.	No school, no employment	Sometimes starts to look for “programs” or alternative education to qualify for social services and support. Problems conforming to programs and needs repeated attempts
	Youth crimes (shoplift, B&E/police contact, courts)	More frequent crime, courts/probation/custody. OR has a social assistance case worker involved.	Increase involvement with justice system. Police in more than one area know youth as “of no fixed address”. Youth’s friends have similar police contact.	Either in justice system or works very hard to avoid.
Starts using alcohol or drugs	Regular substance abuse, often dangerous levels (binging, drugs).	Substance abuse is daily and a pre-occupation	Substance abuse is daily and a pre-occupation.	Substance abuse is daily and a pre-occupation.
	Starts leaving caches of personal belongings at different locations (school lockers, relatives, and friends)	Fewer possessions and little identification other than a student card. Parent keeps IDs or youth loses it because of unstable home/address.	No ID, possesses only what can be carried in backpack	Continues as previous or may start to gain some basic ID and possessions as required to access social services and health care.

<p>Prefers opportunities to stay weekends with other relatives, especially grandparents or friends</p>	<p>Stays out later - or all night and “couch surfing/camping” especially on weekends (weekenders/curbsider street-involved). Trades sex for places to stay.</p>	<p>Regularly does not return home or leaves permanently. Options may be to “stay” with a relative but usually ends being asked to leave. Tries emergency shelters if available but when in small towns uses empty building, cars, breaks into buildings.</p>	<p>Emergency shelters/ parks, under bridges, abandoned buildings.</p> <p>If in city, pimp provides a place.</p>	<p>Emergency shelters/ parks, under bridges, abandoned buildings.</p> <p>In city, pimp provides a place.</p> <p>May start seeking social housing options, including transitional programs.</p>
<p>Sense of abandonment/ unwanted or betrayal</p>	<p>Defiance, anger, confusion – still seeks familial support – usually grandparents, extended family</p>	<p>Defiant independence but seeks “peer” support. Less time with any family. Lack of trust, especially to adults is obvious in all interactions. Bravado is common presentation.</p>	<p>Defiance prominent but now works with street supports-gangs, services. Considers self fully independent &amp; purposely avoids any “attachments” to others. Bravado is primary presentation “I can take care of myself”</p>	<p>Ability to make any emotional attachment to anyone is rare. However, its also a time of questioning about level of trust that should be extended and with whom</p>
<p>Uncomfortable in role within family (confused identity)</p>	<p>Identifies still as part of community, but only tenuously with family, high anxiety of who they are and unfocused plans for future. Does not think of self as homeless.</p>	<p>Identity shifting towards self-reliance independent but self as not conventional – “out of the margins”. May start thinking of self as being sometimes homeless.</p>	<p>Identity solidifies as independent/ street involved, and homeless when in need of services.</p>	<p>Thinks of self-identity as “homeless and street” Identifies self as such</p>

## **Allies in Research and Government**

### **Times and Places for Intervention or Support**

Identifying the points for Intervention

Allies in Community - presentation by Programs (Emergency, Transitional, Alternative/Innovative approaches)

There was recognition by the group that there are not enough services and support for homeless youth, even in the major urban centres. Emergency shelters are usually full and there are very few transitional housing programs for youth. Cities struggle to provide their limited support and interventions, even though cities receive 95% or more of the government funding toward homeless support. In addition, as was previously recognized, many of the homeless youth in cities are not from those cities but from smaller towns and communities. Therefore, to have a real impact on youth homelessness, more had to be done in the home communities of the youth.

There was a consensus that more needed to be done to PREVENT youth homelessness and that this was an area not being pursued enough. Preventing a youth from becoming homeless and entrenched in streetlife was an important goal to save the youth and society both costly and life altering problems.

The group felt that that there were not enough specific services for homeless youth particularly in rural areas, that dealt with health and mental health services. There was an acknowledgment that the rural areas would not necessarily be able to host or sustain comprehensive mental health and health services, rather, they proposed that a strategy for reaching into the communities be implemented provincially and nationally- where services could be accessed if not immediately, then within a specified, appropriate period of time. Consensus was that having an outreach team located in a rural community that networked to other communities in the area would be a step towards helping meet the demand for health and mental health related services. The group felt that it was particularly important to get information into the elementary schools before students became homeless. Teaching students about mental health issues and addictions early, they felt, would encourage more open communication between parents, families and students. The groups also felt that there needed to be more discussion about homelessness in the community in general to help de-stigmatize the issues.

Youth centres should be utilized and funded as being conduits to services for street involved and homeless youth. For example, though the centre would not be required to run these services, they would be able to have a running knowledge of the area services, and could act as homeless outreach workers etc. Youth Centres could also provide neutral spaces for youth and services to work.

The participants wanted to ensure that youth centres would be involved in the conversations about how to make the most of these suggestions. They felt that the relationships that the workers developed with the youth of the community were imperative and would be helpful in getting the youth to access and sustain the use of

services, no matter their need. They also felt that youth centre workers required more training and information around the current services, and intervention models.

Allies identified included services and departments from all levels of government and local services. Federally, HRSDC had several youth employment programs which have proven to be particularly beneficial to at-risk youth and an important step towards preventing or exiting streetlife, National Homelessness Initiative is a good resource and able to fund some projects. Provincially, alternative education programs were viewed as particularly helpful in supporting youth to complete their high school. Social assistance plans had mixed reviews but with an advocate, seen as important bridging support for homeless youth to develop a viable plan. “Raising the Roof: Solutions for Canada’s Homeless” is an important national charity with a variety of resources and some funding. Youth Centres/drop-ins were consistently recognized as an important community link that refers and assists a youth to all the local services (health, addiction, housing, school, employment) and were considered a prime ally and advocate for youth.



### **Making a Difference**

Building a Framework

Best Practices and Promising Practices to Build Upon

**Main Goal:** Prevention of homelessness whenever possible or quick re-integration of homeless youth within Canadian Society.

Services needed to be youth friendly, non-judgmental, and easy to access. They felt that a one stop phone number that could direct them to the services they needed would be important. The easier things were to find/access/call, the better they would be, the more likely young people would use them and the quicker services could be provided to youth in crisis or on the verge of crisis. This was, they felt, particularly important as a principle for getting identification sorted out.

The participants wanted to ensure that youth centres would be involved in the conversations about how to make the most of these suggestions. The consensus was that the relationships that the workers developed with the youth of the community were imperative and would be helpful in getting the youth to access and sustain the use of services. The participants also felt that youth centre workers required more training and information around the current services, and intervention models.

Youth Centres, and their staff/volunteers, need tools, training, and support to make connections and more connectivity to help youth that are or are at risk of becoming homeless. Youth centres need more options to assist. Basic identification and knowledge of local/regional social services were often barriers for youth in accessing the support and resources needed. These points had been noted in several reports but few systematic plans to act upon those recommendations had been put into place, although the most successful street exiting programs adhered to several key aspects of service delivery: see Youth Homelessness in Canada 2009; Getting off the Street, Karabanow and The Street Lifestyle Study 1997, by Caputo, Anderson, and Kelly).

A particular note was made in The Street Lifestyle Study 1997 in its recommendations that:

“Recognizing that opportunities for intervening with these high-risk youth exist prior to their going to the street, while they are on the street, and during their transition off the street, and that each of these periods requires a “different service response” and “understanding that supportive individuals can play a vital role in delivering relevant services to these young people.”

It was noted by the participants that several barriers for youth could be impacted by early supportive assistance from a trusted person/organization. The preparation could aid in preventing, or at least ameliorate and limit a homeless experience. The support would include some basic preparation in life skills and independence planning. Programs, and particularly youth centres, needed to develop tools and methods to avoid or manage the more common and predictable barriers.

**Need to develop Tools: Example a check list for immediate needs assessment and assistance plan as below:**

**Do you (youth) have...?**

SIN card

A dependable contact address/phone/email

A health card

Other photo ID including student ID

Five important requirements for community connection: ex: a personal bank account, personal reference, employment experiences and references, etc

A personal long-term plan – with goals and objectives

Assistance Plan will also include: transitional/stable housing strategy, short and long-term education/career plan, health care plan, income support plan and referrals.

It was agreed that all youth at risk should have the same overall information and assessment plan, with both the youth and the community involved in its development, and that there is a plan and means for sharing the information with key services.

Obviously, access to stable and adequate housing was an important issue. The participants felt that the number of beds in rural areas needed to be increased, and that emphasis on transitional housing was critical. Longer-term, more stable housing was important. They wanted rural areas to be host to more independent and semi-independent living opportunities for youth as well. They want to make sure that young people are able to be and remain stable so they have a foundation to start with and build on.

The participants also recommended the provincial governments to review and renegotiate their involvement in family issues to act in earlier intervention when necessary. They felt that ongoing assessment was also important as family breakdowns were identified as the most pressing cause of the homelessness.

The symposium's participants agreed that more emphasis on education was required and that the school systems needed to re-examine how they treat young people on the fringes of homelessness. They also felt that youth would respond better to interventions in the school that included members of the community and that there was a clear role for the members of the youth centre staff to advocate and support on behalf of the young people dealing with educational issues.

New and innovative ways of getting credit for homeless and street involved youth were identified as a need. The group also suggested that alternative methods/time and formats of schooling were necessary to reach this difficult to engage population.

It was also strongly expressed that education about homelessness and the issues surrounding homelessness was imperative to help create a better, more accepting, welcoming community. Parents, guardians and workers were to be involved in this education on some level.

Interventions save, in tax payers' costs, have been commonly estimated at between \$4 to \$6 saved for every dollar invested in intervention and prevention.

### **Final Resolutions of the Symposium**

# 1 That Youth Centres be considered an essential service in communities and receive core (consistent and stable) funding to stay open so that staff can (with appropriate training) be equipped and available for emergency and non-emergency interventions with youth. Along with funding, resources that are consistently available nationally, should be provided to staff and updated annually.

# 2 That the homeless and homeless youth be treated with dignity and kindness and that there be an integrated, easy to navigate (developed in consultation with homeless and street-involved youth) system for help-lines, securing ID, birth certificates, and emergency services (with no questions asked, or "proof of poverty" requirements) such as food, clothing, and shelter available in safe, supportive spaces like youth centres, youth emergency shelters, and transitions programs.

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