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## Forward to the Revised Framework

In recent years, policy-makers and service providers have expressed concerns about whether and how Housing First can be applied to the population of young people who experience homelessness. In response, [\*A Safe and Decent Place to Live\*](#) was developed to provide a workable framework for Housing First for Youth (HF4Y). It is important to note that the development of this framework was the result of a collaboration between the Canadian Observatory on Homelessness (formerly the Canadian Homelessness Research Network) and two bodies that work with young people who are homeless: The Street Youth Planning Collaborative (Hamilton) and the National Learning Community on Youth Homelessness. Young people with lived experience of homelessness were an important part of this process, and provided necessary and valuable input.

Much has changed in a very short time. Since the report was released, communities in Canada and elsewhere in the world (including the U.S. and several countries in Europe) have begun to implement HF4Y programs consistent with this framework. A downside of the growth in interest in HF4Y is that in many contexts, people are using the term “HF4Y” but not following the framework, by either simply applying the mainstream Housing First approach without adapting it to the needs of young people, or having unrealistically large caseloads and strict time limits.

The ongoing development of our understanding of emerging examples of HF4Y, combined with a need to clarify how it actually needs to be implemented on the ground, led to a consideration of the need to refine the framework. In order to move forward, we engaged in an extensive consultation process in Canada (led by [A Way Home Canada](#) and the National Learning Community on Youth Homelessness), the U.S. (involving the National Network for Youth, with contributions from USICH and as well as a large number of communities) and in Europe, involving FEANTSA and FEANTSA Youth, Focus Ireland, Rock Trust (Scotland) and others. We also consulted experts like Dr. Sam Tsemberis and Wally Czech as well as those applying the HF4Y framework in the field to get their feedback. The considerable insights and expertise of these individuals and organizations has contributed to the enhancement of an effective and achievable model of HF4Y, which is outlined in this new framework.

### What's new?

The new framework for HF4Y includes:

- Revised and refined core principles
- Expanded discussion of HF4Y as a program vs. philosophy
- Deeper discussion of models of accommodation and support
- A new section on service delivery that outlines how the program should work on the ground
- A new section on data

*A Safe and Decent Place to Live* is intended to provide guidance for communities, policy-makers and practitioners interested in addressing the needs of developing adolescents and young adults through the application of HF4Y.

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# What is Housing First for Youth?

Housing First for Youth (HF4Y) is an intervention for young people (aged 13-24) who experience homelessness, or who are at risk. HF4Y has been designed as an adaptation of Housing First to address the needs of developing adolescents and young adults by providing them with immediate access to housing that is safe, affordable and appropriate, and the necessary supports they need that focus on wellness and social inclusion designed to help them successfully transition to adulthood. The goal of HF4Y is not simply to provide housing stability, but to support them in their youth and facilitate a healthy transition to adulthood. HF4Y can be considered both as an intervention or program model, as well as a philosophy guiding a community's response to youth homelessness.

It is based on the understanding that the causes and conditions of youth homelessness are distinct from adults, and therefore the solutions must also be youth-focused. HF4Y is grounded in the belief that all young people have a right to housing, and that those who have experienced homelessness will do better and recover more effectively if they are first provided with housing and/or their current housing situation is stabilized.

*Housing First is an effective, evidence-based approach to ending homelessness. This model advances our understanding of how we can tailor Housing First to the unique needs of young people so that we can end youth homelessness once and for all."*

Jasmine Hayes, Deputy Director of the U.S. Interagency Council on Homelessness.

## How is HF4Y distinct from the traditional Housing First approach?

HF4Y is an adaptation of the well-established Housing First approach to addressing homelessness. Housing First programs – including the Pathways model and the At Home/Chez Soi project – have shown great success in addressing the needs of adults who experience homelessness by specifically prioritizing chronically homeless persons with significant mental health and addictions issues.

"The underlying principle of Housing First is that people are more successful in moving forward with their lives if they are first housed. This is as true for homeless people, and those with mental health and addiction issues as it is for anyone. Housing is not contingent upon readiness, or on 'compliance' (for instance, sobriety). Rather, it is a rights-based intervention rooted in the philosophy that all people deserve housing and that adequate housing is a precondition for recovery." (Gaetz, 2013: 12)

The adaptation of HF4Y is based on the understanding that the causes and conditions of youth homelessness are distinct from adults, and therefore the solutions must be youth-focused. HF4Y is grounded in the belief that all young people have a right to housing and that those who have experienced homelessness will do better and recover more effectively if they are first provided with housing.

## 2. The Core Principles of HF4Y

Core principles are important because they provide a guide for planning and delivering a strategy, service or intervention. Core principles also become a standard against which we measure fidelity to the model in the context of scaling or adaptation.

The core principles of HF4Y adapt the general model to meet the distinct needs of developing adolescents and young adults. This is based on an understanding that any and all homelessness interventions must take account of the fact that youth homelessness is distinct from adult homelessness, both in terms of its causes and conditions and the solutions should also follow this understanding. Central to the core principles of HF4Y is the need to embed the model within a human rights perspective that also embraces a Positive Youth Development orientation. How we adapt HF4Y invariably raises questions about safety, appropriateness of services and supports based on age and development (cognitive, social, physical), what “choice” means and the importance of addressing diversity. The core principles that underlie this approach are based on these considerations.

The **core principles of HF4Y** include:

1. A right to housing with no preconditions
2. Youth choice, youth voice and self-determination
3. Positive youth development and wellness orientation
4. Individualized, client-driven supports with no time limits
5. Social Inclusion and community integration

### 1. A right to housing with no preconditions

HF4Y involves providing young people with assistance in obtaining safe, secure and permanent housing that meets their needs as quickly as possible. Youth homelessness exists because of the *denial* of the basic human rights of young people and once identified as such, must be remedied. Practically speaking, this means that policies, laws and strategies aimed at youth homelessness must recognize international human rights obligations<sup>1</sup>, and be grounded in a human rights framework that will inform all stages of development, implementation and evaluation.

For youth, housing needs to be safe, affordable and appropriate based on the needs and abilities of developing adolescents and young adults. There should also be a consideration of location and accessibility not becoming barriers to accessing services. In addition, cultural appropriateness needs to be taken into account, particularly for Indigenous youth. Young people who experience homelessness, like other youth, may prefer to live with roommates.

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<sup>1</sup> [International Covenant on Civil and Political Rights \(ICCPR\)](#), the [International Covenant on Economic, Social and Cultural Rights \(ICESCR\)](#), the [Convention on the Rights of the Child \(CRC\)](#) and the [International Convention on the Elimination of All Forms of Racial Discrimination \(ICERD\)](#).

## No preconditions

The key to the Housing First philosophy is that individuals and families are not required to first demonstrate that they are “ready” for housing. At the same time, housing is not conditional on sobriety or abstinence. For young people with addictions, a recovery orientation also means providing a harm reduction environment. Harm reduction aims to reduce the risks and harmful effects associated with substance use and addictive behaviours for the individual, the community and society as a whole, without requiring abstinence. However, as part of the spectrum of choices that underlies both Housing First and harm reduction, people may desire and choose “abstinence only” housing.

This approach runs in contrast to what has been the orthodoxy of “treatment first” approaches where people experiencing homelessness are placed in emergency services and must address certain personal issues (ex. addictions, mental health) prior to being deemed “ready” for housing (having received access to health care or treatment).

## Housing and supports are separated

Immediate access to safe, affordable and appropriate housing and supports without preconditions is particularly crucial for young people and every effort should be made to divert them from long stays in emergency shelters. The separation of housing from supports means that young people are not required to accept supports or to participate in programming (ex. attending school) as a condition of obtaining or retaining their housing. In a scattered-site housing context, supports are portable. If someone loses their housing or tenancy, they are not out of the Housing First program. The offer of support is tied to the individual, not their housing, and young people should be assisted in finding new housing.

The separation of housing and supports also refers to contexts to where the actual services, particularly mental health and clinical services, are not located in the housing or living environment of the individual, if possible. An important exception to this is in supportive or supported housing as well as transitional housing, where mentors are often living in the same home or building. Young people may choose this kind of housing.

A right to housing with no preconditions means that **housing and supports are separated**. In other words, access to housing cannot be defined by conditions such as participation in programming that may mean non-compliance with leads to loss of, or a denial of access to housing.

At the same time, HF4Y providers should also adopt a “zero discharge into homelessness” perspective and practice, which means a young person’s behaviours and actions should not lead to a permanent loss of housing. The important point is that in a HF4Y, case workers need to make sure they never give up and do what it takes to address the behavioural issues that experiences of eviction or other events which lead to loss of housing can become “learning moments,” and every effort should be made to help the young person find different housing options.



## 2. Youth choice, youth voice and self-determination

As a rights-based, client-centred approach, HF4Y emphasizes youth choice regarding housing and supports. Choices are best made when young people have been provided with enough information to make an informed decision on the appropriate options available to them. In supporting youth choice, one also needs to consider age and cognitive functioning (ex. FASD, developmental delays and/or brain injury) and how this may impact decision-making. Complexities may constrain choices available to youth, which is acceptable as long as the available options provide youth with the opportunity to choose their preferred course of action.

Youth choice does not mean “Do whatever you want.” Instead, it means “Here are the options available that fit within the criteria of HF4Y, the pros and cons of each, what is recommended given your circumstances, etc. What do you think you would like to do and how can we help you get there?”

“Youth voice” means that young people bring ideas, opinions and knowledge that not only need to be acknowledged and respected, but should be brought into the work. In other words, young people should be actively involved in the design and evaluation of local HF4Y programs and have the opportunity to provide feedback on the supports they are receiving.

Self-determination acknowledges that young people should be in control of their own lives, and be encouraged to make decisions and learn from them.

### Limits to choice

When we use the language of “choice,” we understand that no individual has free and complete choice to do what they want, whenever they want; this would not be true for anyone in society. Young people should be supported in making choices, in order to be able to learn from their mistakes.

Participation in a HF4Y program does come with two key conditions:

- Young people must agree to a weekly visit or contact with a caseworker.
- If young people have an income source, they are expected to contribute up to 30% to the cost of rent.

It also needs to be acknowledged that for those who are young and in early stages of adolescence, as well as those who are identified as having disabling conditions (ex. brain injury, developmental delays and/or FASD) that may impact on their cognitive abilities and decision-making in ways that may be counter-productive and create additional problems. In these cases, options and choices may need to be negotiated to guide young people to make decisions that are feasible and reasonable, both short- and long-term.

### Putting choice into action

In the context of HF4Y, then, “choice” means that young people are able to make their own decisions about their goals and their future, what services they receive and when to start using (or end) services. Case workers will work with young people in a

supportive and strengths-based way to identify assets and challenges, and to develop and actualize clients' identified goals.

Young people must be able to exercise some choice regarding the location and type of housing they receive (ex. neighbourhood, congregate setting, scattered site, etc.). This may mean that some young people want independent scattered site housing, while others may feel that congregate transitional housing models better suit their needs. Choice may, however, be constrained by local availability and affordability.

Some housing options (ex. transitional housing programs) may have preconditions; however, a complete HF4Y program and system provides at least one other option without preconditions that allows youth to decide whether or not they are interested in and/or ready to pursue conditional housing or programs.

### 3. Positive youth development and wellness orientation

Within the established Housing First model, practice is not simply focused on meeting basic client needs, but on supporting recovery. This is central to the Pathways model and [At Home/Chez Soi](#). For youth, a recovery orientation is not only embedded in an understanding of child and youth development, but must also account for the fact that many young people who wind up homelessness have experienced trauma. Research consistently shows that a majority of street youth come from homes where there were high levels of physical, sexual and emotional abuse, interpersonal violence and assault, parental neglect and exposure to domestic violence, etc. (Gaetz & O'Grady, 2002; Karabanow, 2004; Rew et al., 2001; Tyler & Bersani, 2008; Van den Bree et al., 2009). Moreover, once on the streets, young people are often exposed to high levels of violence (Gaetz et al., 2010) and sexual exploitation. Such traumatic experiences can impair cognitive development, decision-making and undermine the ability of young people to form attachments.

A recovery orientation focuses on individual wellness, which means we go beyond merely providing housing and minimal supports by also focusing on building assets, confidence, health and resilience. It means that we ensure young people have access to a range of supports that enable them to nurture and maintain social, recreational, educational, occupational and vocational activities.

The HF4Y model employs a "positive youth development" orientation, a strengths-based approach that focuses not just on risk and vulnerability, but also youth's assets. A positive youth development approach:

- Identifies the youth's personal strengths in order to build self-esteem and a positive sense of self
- Works to improve the youth's communication and problem solving skills
- Enhances and builds natural supports, including family relationships
- Assists the youth in personal goal setting
- Helps the youth to access educational opportunities and identify personal interests



Adopting a positive youth development approach has important implications for practice. Assessment tools, case management and data management supports must be strengths-based and account for risks and assets. The program model and case management supports must incorporate an understanding of the physical, cognitive, emotional and social needs of developing adolescents. It must build on the strengths, talents and dreams of young people, and work towards enhancing protective factors and resilience. Importantly, a positive youth development orientation means that young people may need to be supported for a number of years. The HF4Y program asserts that young people cannot be rushed to assume the responsibilities of an independent adult. Rather, it ensures that supports are provided for the length of time they need to develop skills, confidence and the financial stability necessary to achieve independence.

### **Trauma-informed care**

Because many young people who are exposed to traumatic events (ex. physical, mental, emotional abuse, etc.) either prior to becoming homeless or once they are on the streets (ex. exploitation and criminal victimization), a HF4Y program must be infused with a culture of **trauma-informed care**. The experience of trauma can impact cognitive development, decision-making, how people respond to stress, the regulation of aggression and anger as well as motivation. Because trauma can be profoundly disabling, a trauma-informed approach means that everything the HF4Y program or system does is based on an acknowledgement of the existence of trauma, and that recovery and support must be part of how we work with young people.

Trauma-informed care involves the organizational implementation of principles, policies and procedures to increase consumer safety and prevent re-traumatization in the context of service access, but does not necessarily address experiences of trauma directly through treatment intervention (Kirst et al. 2017; Elliott et al. 2005; Fallot and Harris 2005). For example, organizations can apply a trauma-informed care approach by training staff on trauma, and involving clients in decision-making with regards to treatment in order to create a collaborative and safe environment for recovery. If one of our key goals for young people is wellness, then HF4Y supports must attend to helping young people recover through identifying the source of trauma, developing strategies for regulating emotions and controlling stress and anxiety, and helping young people feel they have control of their lives. Addressing trauma can take time, and in many cases, must precede active and ongoing participation in other program goals and activities such as education and employment.

The focus of HF4Y, then, is not merely a successful transition to independent living, but on supporting a healthy transition to adulthood. This means supports must also focus deeply on enhancing physical and emotional wellness, and addressing personal safety. Accommodation and supports must be designed and implemented in recognition of the developmental needs and challenges of youth, as well as foster and enable a transition to adulthood and wellness based on a positive strengths-based approach.

## 4. Individualized and client-driven supports with no time limits

A client-driven approach recognizes that as individuals, all young people are unique and so are their needs. Once housed, some young people will need few, if any, supports while others will need supports for the rest of their lives. This could range from Intensive Case Management to Assertive Community Treatment. Individuals should be provided with “a range of treatment and support services that are voluntary, individualized, culturally-appropriate and portable (ex. in mental health, substance use, physical health, employment, education)” (Goering et al., 2012:12). Supports may address housing stability, mental and physical health needs, education, labour market attachment and life skills.

*“Practitioners of HF4Y need to be aware of the focus needed on positive youth development and life skills development within the work. Essentially, every interaction a HF4Y worker has with a young person is an opportunity to build those skills.”*

Kim Ledene, Director of Housing and Shelter, Boys and Girls Club of Calgary

### Active engagement without coercion

It is important to remember that the central philosophy of Housing First is that people have access to the supports they need as they choose. Acknowledging young people have choice does not mean that case management supports must be delivered in a totally passive way. The notion of **active engagement without coercion** is an “assertive, though very importantly not aggressive way of working with Housing First users” (Pleace, 2016:34). In doing so, one must consider:

- Supports must be flexible in terms of time frames. Providing supports for one, two or even three years is unlikely to be adequate for young people, especially those under 18 and/or those who have experienced trauma or who have more complicated developmental, mental health and disability challenges.
- The needs of young people will evolve over time, so the nature and range of supports must be adaptable. Individualized plans of care will need to take account of developmental changes, capabilities and capacities, maturity and level of independence.
- What the worker thinks the young person needs or wants is not necessarily what they want for themselves.
- It may take a long time to build a trusting relationship with a young person in order to engage in this kind of work.
- Young people should be encouraged to focus on positive change and to learn from mistakes.
- A harm reduction approach must be used in dealing with substance use and addictions.
- Young people experiencing trauma or disabling conditions may have difficulty in engaging and participating in supports they need.

Working with some young people in this way can be challenging, and caseworkers may feel frustrated or disappointed with the lack of progress a young person is making. It is important to remember that rather than pushing young people along or leading them, the worker is walking together with them on a journey where the young person is charting their own path and they are being supported to get there. Each one of those interactions is an opportunity to build important life skills with that young person.

## 5. Social inclusion and community integration

Many young people who are homeless or unstably housed experience social exclusion -- a term that describes the circumstances and experiences of persons who are shut out, fully or partially, from many of the social, economic, political and cultural institutions and practices of society. Part of the HF4Y strategy is to promote social inclusion through helping young people build strengths, skills and relationships that will enable them to fully integrate into and participate in their community, in education and employment. This requires socially supportive engagement and the opportunity to participate in meaningful activities. If people are housed and become or remain socially isolated, the stability of their housing may be compromised. Social inclusion and community integration are crucially important to the development of adolescents and young adults. Within a HF4Y framework, this can be particularly difficult and challenging work. Key areas of inclusion include:

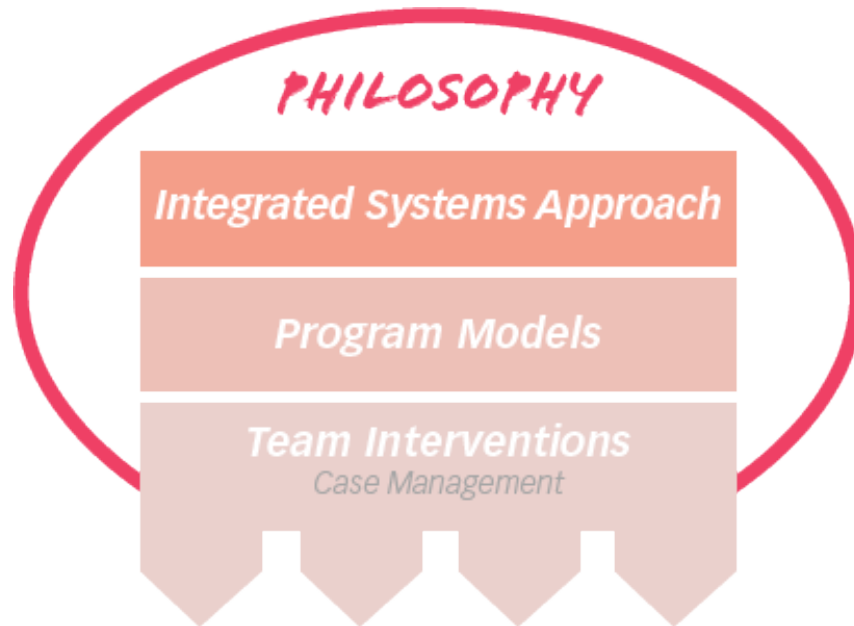
- Housing models that do not stigmatize or isolate clients. The kinds of housing a young person needs may evolve over time. Those who work with youth experiencing homelessness regularly remark that for young people – particularly younger teens – loneliness and isolation are constant concerns that can have an impact on reintegration.
- Opportunities for social and cultural engagement in order to develop positive social relationships and enhance social inclusion, particularly for Indigenous, racialized, LGBTQ2S, newcomer youth, and other subpopulations that may experience enhanced social isolation or exclusion.
- Building natural supports. All young people need to build healthy relationships with friends and meaningful adults in their lives, and this should be a goal of the support model. This includes support for strengthening relations with family, (however defined<sup>1</sup>) a process that necessarily is driven by the needs and desires of the young person. Though many young people leave home because of family conflict, family and community supports will continue to be important to most youth, even those who become homeless.
- Opportunities for engagement in meaningful activities through education, employment, vocational and recreational activities.
- Connections to relevant professional supports. When family and other natural supports are strained or non-existent, many youth will benefit from a positive relationship with a professional such as a doctor, therapist, social worker, etc.

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<sup>1</sup> We say this acknowledging that there is no single type of family structure, and that even those young people who have left home because of adverse childhood experiences may have strong and healthy relations with some family members.

### 3. HF4Y – A Philosophy and a Program Model?

The question of whether HF4Y is a program or philosophy is important to address. As will become clear, it is actually both.



#### A) HF4Y as a philosophy - guiding community planning and implementation

As a philosophy, the core principles of HF4Y can provide a community or an organization with a foundational set of values to guide goals, outcomes, collaboration and practice. In guiding community planning, it means that as a whole, the local system is designed around these core principles. All services should contribute either to the prevention of youth homelessness, or ensuring that young people have immediate access to housing and supports so that their experience of homelessness is brief and non-recurring.

To be clear, this does not mean that all crisis services and housing options/models are HF4Y programs. Rather, they exist within, and support a broader systems strategy that follows the core principles. Examples of this include:

- Rapid Rehousing programs where the basic principles of HF4Y may apply, but the supports are lighter and time delimited. Critical time intervention may be the case management model.
- Models of permanent housing that come with conditions such as abstinence, mandatory participation in school or employment.

The point is, and this is worth stressing, that different models of accommodation and support can be part of the community strategy, and can support the Housing First agenda without actually being considered HF4Y. Similarly, while mainstream services such as schools (education system) and health clinics support the work of HF4Y, they are not housing first programs themselves. What connects them altogether is integration into a service model guided by HF4Y principles. However, if a community only offers such programs and does not have any HF4Y programs that follow this framework, it cannot make the claim that it is a HF4Y community.

It is important to note that in some contexts (this is particularly the case in European countries such as Ireland and Scotland), young people have a right to housing, but this right often comes with conditions that conflict with the core principles of HF4Y (ex. the need to separate housing from supports). In these cases, the youth homelessness/housing system is more properly described as “housing led” rather than “housing first.”

### **HF4Y and systems integration**

In the context where the core principles of HF4Y guide local program planning, it is important that an integrated systems approach is adopted. This means that within a “system of care” approach, all services and program elements within the youth housing/homelessness sector work towards supporting young people to access housing (or avoid homelessness) and to get the supports they need. This includes not only dedicated HF4Y programs with a mandate to provide the intervention, but also allied services including outreach, emergency shelters and other youth-serving organization.

“What one needs to establish is a ‘Housing First Friendly’ system of care.” (Wally Czech, Director of Training, Canadian Alliance to End Homelessness)

An integrated systems approach must also address mainstream systems and services that may contribute to youth homelessness such as education, corrections and child welfare systems. As it is known that a disproportionate number of homeless youth were once in the care of child protection services (Nichols, 2013; Nichols et al., 2017), it is imperative that those services work with youth homelessness service providers to ensure a smooth and sustainable transition to housing with appropriate supports. Young people should never be discharged into homelessness, whether they leave care of their own volition, or “age out” of the system.

Additional considerations from the systems level must be given to funding and policy alignment with HF4Y Core Principles. Barriers to successful implementation can arise if the broader systems that provide funding and policy directions do not align with the core principles of HF4Y. Efforts to align these resources and interests with HF4Y should not be understated -- the goal is to create fundamental systems change to the way youth homelessness is addressed in order to prevent and end it.

**Collective impact** - One of the key organizational strategies that can advance HF4Y Systems planning is Collective Impact. For years, there have been calls within and across various sectors to end their siloed approaches to addressing wicked policy and social problems. Efforts to collaborate have, however, often fallen short of creating the necessary fundamental shifts in thinking to generate social and systems change around an issue. Collective Impact calls

on the various players and interests that touch on a carefully-defined issue to work together to develop and implement a plan that will fundamentally change outcomes for a population. Numerous resources exist on how to take a Collective Impact approach, and the Youth Homelessness Community Planning Toolkit goes into detail of how to use the model to address youth homelessness.

## **B) Program models**

Housing First can be considered more specifically as a program when it is operationalized as a service delivery model or set of activities provided by an organization. In other words, the program closely follows the core principles of HF4Y, and the service delivery model seeks to address the broader range of support needs intended not only to facilitate independence but a successful transition to adulthood and wellness. While HF4Y programs must demonstrate fidelity to the model, values and core principles as described, it can and should be adapted to take account of the local context, including the range of existing services and supports.

As a word of caution, as HF4Y grows in popularity, there will often be pressures at the community level to implement the model in ways that are not consistent with the core principles defined above. This is because of funding pressures and/or cases where the distinct needs of adolescents and young adults are not understood or respected, case loads being too large or the organization not embracing harm reduction. This can result in watered down versions of the Housing First model with very high case loads, and program models that look similar to the adult model, with stricter time limits and a more limited range of supports applied in the adult setting. In such cases, these should not be considered HF4Y programs but rather, Housing First programs that accept youth. The danger is that the research on the effectiveness of the traditional model of Housing First, when applied to young people under 25, does not identify strong outcomes (Kozloff, 2016).

“The organization that is providing the Housing First program must have their policies and values be aligned with the core principles. I have seen programs that struggle because their umbrella organization does not fully support all of the core principles.”

Wally Czech, Director of Training, Canadian Alliance to End Homelessness

## **C. Adaptations**

Housing First, as a program model, typically targets chronically homeless persons who have complex mental health and addictions issues. The basic idea is that some form of prioritization is necessary, following the principle that with limited resources, those in greatest need get served first.

As a human rights-based approach, the HF4Y philosophy and guiding principles should be applied to all youth who are at risk of, or who experience homelessness. This is because we know well from evidence that if we let young people become and remain homeless for any length of time, the risk of exploitation and criminal victimization, coupled with the rigours of life on the streets, can result in compromised health, declining mental health,



increased substance use and addictions and entrenchment on the streets (Gaetz, 2014; Gaetz et al., 2016). We need to consider the role of HF4Y as a preventive program model and also how the philosophy and core principles of HF4Y should inform community strategies to address youth homelessness so that all young people receive the supports they need.

Within a community strategy, priorities should be set as to who to target. Most certainly, chronically homeless youth must always be a priority population. However, communities may also decide to adapt the HF4Y model in order to target and meet the needs of specific sub-populations, or to implement it in a preventive context. Examples include:

- **Indigenous-led HF4Y** – The Home Fire program is an innovative adaptation that has shown success in meeting the needs of Indigenous youth through cultural engagement.
- **HF4Y targeting young people involved with Child Protection Services** – The [\*Without a Home study\*](#) identified that 57% of homeless youth were once in care, and 47% were in foster care or group homes. HF4Y can be adapted to support young people transitioning from care, even if they are not homeless.
- **HF4Y for youth leaving corrections** – There is a body of research that points to the fact that when we discharge people from prison into homelessness, the risk of reoffending goes up. HF4Y can be adapted as an important transitional support for young people leaving either the adult correctional system or the youth criminal justice system.

## D. Putting it all together

The purpose of the distinctions between HF4Y as a philosophy, systems approach, and program is to bring forward a clearer understanding of what HF4Y **is** and **is not**. Ideally, all levels of practice and system design should align to support and put the core principles into practice, because greater fidelity to the model can indicate what works well in practice and where changes may need to be made.

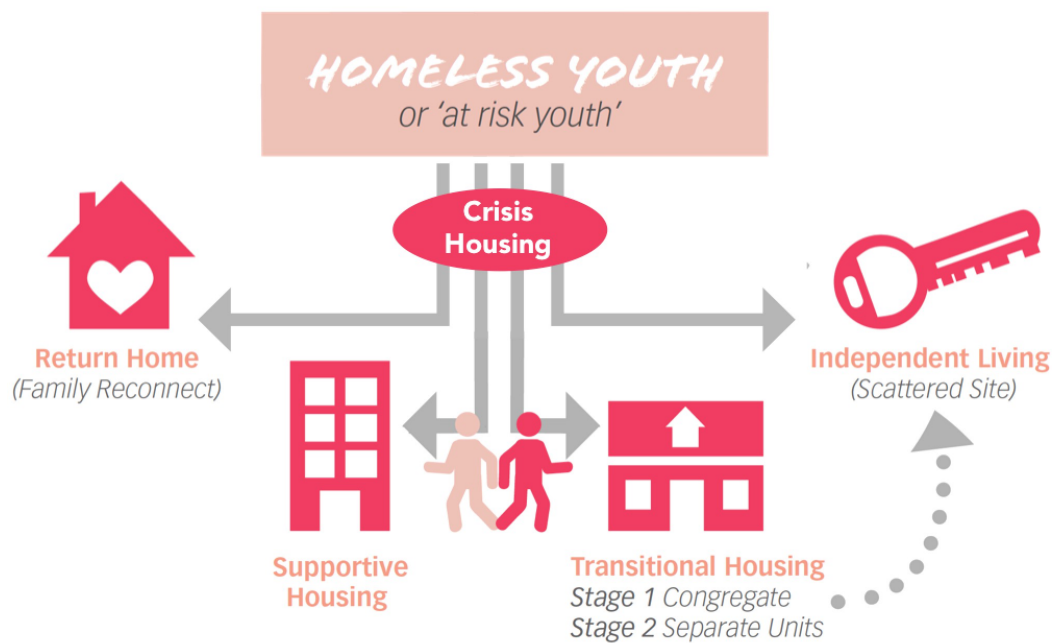
Until the model gains a stronger foothold in policy and practice within all orders of government and at the community level, there may be some inconsistency in how these core principles are upheld and applied. For example, a community can do systems and planning work in partnership with the education and health systems using the HF4Y model without having any formal HF4Y programs, as long as the core principles are guiding and integrated into the community's system of youth homelessness services and interventions. While not individually being Housing First programs, a range of housing options and service providers that work with youth (ex. schools, hospitals, corrections, etc.) are each different parts of a larger system that can work the goals of a complete HF4Y program.

The more the communities adopt and adapt HF4Y in ways that are aligned and consistent with the core principles and the program model as described, the greater likelihood that we will succeed in our quest to prevent and end youth homelessness.

## 4. Models of Accommodation

A key principle of HF4Y is Youth Choice, Youth Voice and Self-Determination. In other words, young people should have some kind of choice as to what kind of housing they receive and where it is located. There are sometimes questions about the kind of housing that young people should have access to through Housing First. The Pathways model prioritizes the use of **scattered-site housing**, which involves renting units in independent private rental markets. While this will be an important option, it may not meet the needs of all youth. As in any housing first context, choice is primary, which means there must be options; and in this case, options that are age and developmentally appropriate. While not all communities can offer a wide range of solutions, the following diagram outlines a range of housing options for young people.

**Figure 2: Models of accommodation within a HF4Y framework**



### A. In-place crisis housing

Sometimes referred to as “respite accommodation,” in-place crisis housing is short-term accommodation for young people with the aim of diverting youth away from emergency shelters into healthier, more positive environments while long-term housing is arranged. Host Homes programs provide a safe room to stay in their community with an approved volunteer and receive case management support in their communities, as an alternative to emergency shelters (which may not exist locally). Young people and their families may simply need a break to cool off and sort things out through time-limited critical case management, or the home environment may be unsafe for the youth to return and other housing options need to be explored. Host Homes programs may act as an intermediary between returning home and other housing options, but are distinct from emergency shelters. If possible, emergency shelters

should be the very last resort to housing young people, due to the risks of exposure to trauma and exploitation targeting emergency youth shelters for drug and sex trafficking.

## B. Returning home

Within this framework, one of the potential housing outcomes of Housing First is for young people to return to the home of their parents and/or to the home of a significant adult including relatives, godparents and/or family friends. Returning home is best supported through programs and services that adopt a **family reconnect** orientation. The supports offered young people and their families should extend beyond simply assisting with the return home. Ongoing counselling and support may be necessary to ensure housing stability. While ideal for some young people, returning home may not be safe, desirable or even possible for other young people. One model used by the Family and Youth Services Bureau is In-Home Family Stabilization, which works with family members to identify and address the sources of family conflict to prevent youth from leaving the home. Careful planning and investigation ought to go into determining if the home is a positive and safe environment for the youth to return to.

## C. Supportive housing

“Supportive Housing” encompasses a number of possible program models that can range from short-term to long-term or permanent. Some key examples include:

- **Supported Lodgings Schemes (UK):** Schemes are a variation on Host Homes/Respite Accommodations that temporarily serve youth that are unable to return home. Operated by local councils, voluntary organizations or charities in the UK, Supported Lodgings connect young people aged 16 to 21 (sometimes up to 24 years old) to local hosts that are willing to rent out a spare room in their home and provide food, basic life skills training and support. Often, youth are able to access a Supported Lodgings within a day, and the length of stay can range from a few days or weeks to a couple of years.
- **Long-term/Permanent Supportive Housing:** Youth whose health and mental health needs are acute and chronic may require **Permanent Supportive Housing**. Permanent supportive housing options may be appropriate for extreme cases for youth with serious disabilities or high acuity. This is a more integrated model of housing and services for individuals with complex and concurrent issues where the clinical services and landlord role are often performed by the same organization.

## D. Transitional housing

There is a broad range of transitional housing models for youth. The Foyer is a well-established transitional housing model that is quite well developed in the UK and other European countries, and has been adapted and transformed in Australia. There is also a strong evidence base for its effectiveness as an [age appropriate housing and supports intervention](#) (Gaetz & Scott, 2012) with one proven [example from Calgary](#) (Turner, 2016).

The actual living arrangements within a transitional housing model can vary. **Two stage models** provide an interesting approach, whereby in the first stage, young people live in congregate settings where they may share living space (separate bedrooms but congregate cooking and

living spaces). In the second stage, young people may move into separate bachelor apartments within the same facility. This allows for more independence and the learning of life skills, but in a more structured environment than scattered site models.

Denmark also offers a form of transitional housing that allocates a certain number of rooms within university/college dorms to youth that have experienced homelessness to provide them with a positive peer environment that can eventually lead to independent living.

Finally, the inclusion of transitional housing within this framework comes with two caveats. First, time limited transitional housing is highly problematic and does not produce positive outcomes, because young people are forced to leave before they are ready. Second, all young people who access such accommodation must eventually be supported to move into independent living, with supports, at some point. This can be achieved through housing supports that help young people locate safe and appropriate housing. It can also be achieved through “lease conversion,” whereby after a time, young people who are living in apartments have the leases transferred over to them. In this way, they can achieve independence without having to move.

## **E. Scattered-site housing**

This is the model of accommodation that most closely fits with mainstream approaches to Housing First. Independent living refers to situations where young people obtain and maintain their own or shared permanent housing in either the private market or the social housing sector. Depending on the needs and desires of the young person in question, they will also have access to a range of services and supports. Some will need supports in order to get into housing in the first place, but their needs will lessen once they are housed and as they grow older. Other young people may need ongoing supports. The success of the Infinity Project in Calgary attests to the viability of this model for many young people.

Moving into independent accommodation can present opportunities and challenges for young people. Karabanow (2013) has suggested that in order to “leave the streets,” spatial separation of housing from both street youth services and from those spaces that street youth occupy may be important. At the same time, as he also suggests, this transition may be accompanied by feelings of loss, guilt, loneliness and isolation. Learning how to manage having friends over in ways that do not jeopardize their tenancy can be a challenge for young people who are used to the companionship of friends.

A key barrier to successful implementation of Housing First is the lack of affordable housing, which is particularly acute in some markets. While this presents challenges to housing anyone who is homeless, the problems can be compounded for the young. Unemployment rates tend to be much higher for youth and those that are able to gain employment typically wind up with low wage, part-time jobs, which means maintaining housing over the long run is difficult. In tight markets, young people may also face age discrimination.

**One final consideration regarding housing options is that the kind of housing a young person chooses at a given time based on what they think will work for them, may not be permanent. “Young people must be given the opportunity to change their mind and try something different if their original choice is not working for them.” (Wally Czech, Director of Training, CAEH)**

## 5. The Range of Supports

The HF4Y model offers a broader range of supports than is typically associated with Housing First. This is because the model is designed to address the needs of developing adolescents and young adults. In addition, a key goal of HF4Y is not simply to be independently housed, but to support a successful transition to independence and well-being. This has implications for program costs, case management approach, caseloads, and the length of time a young person should be in the HF4Y program. The range of supports includes:



### A. Housing supports

Many people who have experienced homelessness manage to find housing on their own, and a large percentage never return to homelessness again. For others, however, there is a need for more intensive housing support. In some contexts, housing supports are provided by a separate housing worker. With the HF4Y model, the case worker is also responsible for housing supports, as this may be a route to deepening the relationship and to engaging in other kinds of supports for young people who are not easily engaged. Housing supports include:

1. Help in obtaining housing - Support in searching for, and obtaining, housing that is safe, affordable and appropriate.

2. **Housing Retention** - Getting housing is one thing, but maintaining it and keeping it is another. Housing retention means helping people learn how to take care of and maintain housing, pay rent on time, develop good relations with landlords and neighbours or deal with friends.
3. **Rent Supplements** - Given the low earning power and lack of education of many people who have experienced homelessness, providers should ensure that young people have access to income supports. Supports should be geared towards ensuring that people pay no more than 30% of their income on rent.
4. **Access to start-up home furnishings and appliances.**
5. **Support when things go wrong** - A successful Housing First agenda must be supported by a “zero discharge into homelessness” philosophy, so that housing stability and crisis management become key. Case managers have the responsibility to re-house a young person if there is an eviction or things don’t work out.
6. **Evictions prevention** – A range of interventions and supports are discussed in Section 4 of this typology.
7. **Aftercare** - Once individuals achieve some level of housing stability, continued contact with support workers is encouraged in case problems develop.

## B. Supports for health and well-being

Central to successful interventions such as Housing First is a recovery-orientation to clinical supports. These are designed to enhance well-being, mitigate the effects of mental health and addictions challenges, improve quality of life and foster self-sufficiency. Key areas of clinical support include:

1. **Health care** – Obtaining access to good primary care is important for a population that may not have had that in the past, particularly for individuals with ongoing health challenges and disabilities. Access to diagnostic testing is also important, as many individuals may have disabilities or conditions for which they can receive additional supports.
2. **Mental health** - Considerable research identifies the degree to which many people who are homeless experience mental health challenges. As part of a “system of care,” such individuals should be supported in accessing assessments for mental health problems or learning disabilities, as well as in finding suitable interventions if required.
3. **Trauma-informed care** – Because many people who become homeless often have experienced trauma either prior to becoming homeless or once they are on the streets, it is essential that those providing supports practice trauma-informed care. This is a different way of working with clients based on the acknowledgement of trauma experiences, and an understanding that the experience of trauma can be paralyzing, can affect behavior and decision-making, and can lead to addictions, for instance.
4. **Substance use and addictions** – Many formerly homeless people will need ongoing support to deal with addictions. Harm reduction is a humane, client-centred and



evidence-based approach to working with people with addictions, and such supports should help people retain their housing, reduce the risk of harms to themselves, people close to them and the community, and help them become more engaged with education, training and employment, as well as other meaningful activities.

Housing First programs should necessarily incorporate a “harm reduction” philosophy and approach that are best suited to young people. This means there can be no “abstinence only” requirements to access housing and that young people with addictions issues should be supported in a way that reduces harms to themselves and others. Again, it should be noted that a harm reduction approach does not exclude the possibility of abstinence-only environments, if that is what young people require to maintain their residency.

5. **Personal safety** – Personal safety is an issue for homeless youth. Many experience physical, sexual and/or emotional abuse prior to being homeless. Once on the streets, they are exponentially more likely to be victims of crime ([Gaetz, 2004](#); [Gaetz et al., 2010](#)). Two recent studies of youth homelessness in ten cities identified that almost one fifth were victims of human trafficking (mostly sex trafficking) ([Murphy, 2017](#)). When young people leave the streets, they often continue to be victims of criminal exploitation, including [home takeovers](#). Ensuring that young people are protected, and that they build resilience and strategies to avoid such exploitation, is a key part of wellness-based supports.
6. **Food security** – It goes without saying that food is important to everyone. Food provides us with the nutrients we need in order to survive. Eating on a daily basis gives us the energy we need to carry out our basic tasks, like going to school, working or taking care of our home. For young people growing up, a good diet is important for proper growth and development. If we don’t get enough food – and enough of the right kinds of food – if undermines our ability to get things done, and compromises our health. The surest way to guarantee food security is to ensure young people have an adequate source of income.
7. **Healthy sexuality** – Sexual health is a central feature of physical, emotional and social health and well-being that influences individuals of all ages. Unfortunately, many young people have been exposed to physical and sexual abuse at a young age. Furthermore, young people who remain homeless for extended periods of time are also exposed to early sexual activity, exploitation (including pressure to exchange sex for food, shelter, money or companionship) and a greater risk of sexual assault (Milburn et al., 2009; Saewyc et al., 2013; Gaetz, 2004; Gaetz et al., 2010). Finally, youth who self-identify as LGBTQ2S may face additional challenges in their transition to adulthood. It is important that services are sensitive to the diverse sexuality of youth including gender-appropriate services.

## C. Access to income and education

Inadequate income and employment are well-established risk factors contributing to people cycling in and out of homelessness. In the [Without a Home](#) study (Gaetz, et al.2016), 53% of the participants had

dropped out of high school (compared to the national average of 9% having failed to complete high school), and 50% were not currently in employment, education or training. Supporting both those at risk as well as formerly homeless people to earn an income and obtain an education is key to addressing housing stability in the long term.

1. **Education** - Many of those who experience homelessness have failed to complete high school, which puts them at a competitive disadvantage in the labour market. As such, for those who are interested, there should be supports for (re)engagement with school.
2. **Employment training** - Some individuals who are homeless have a weak history of employment, and can benefit from training that will support them to get the kinds of jobs they desire.
3. **Income and employment** – Many individuals will not need support in the form of education and training – they just need access to employment. On the other hand, for many other individuals who due to illness, injury or other forms of incapacitation may not be easily employable in the short, medium or long term and may need income supports.

## D. Complementary supports

These are supports designed to facilitate housing stabilization and to help individuals and families improve their quality of life, integrate into the community and potentially achieve self-sufficiency.

1. **Life skills** – For those with little experience of independent living or of having stable housing, life skills training, mentoring and individual support that focuses on the enhancement of self-care and life skills should be made available.
2. **Advocacy** – Clients may face challenges in advocating for their own rights and access to services and supports because of language barriers, stigma and discrimination. Individuals may also be reluctant to enter certain institutional settings such as hospitals or mental health facilities because of past experiences. In such cases, service providers can provide advice, support, advocacy and transportation to assist people.
3. **System navigation** - Navigating systems can be challenging, so providing support becomes important in ensuring that formerly homeless people are able to work their way through systems and get access to services and supports they need and are entitled to.
4. **Peer support** – Having someone to talk to or support you who has lived similar experiences can be important for individuals who are marginalized or who have experienced trauma. The At Home/Chez Soi project and other Housing First efforts have demonstrated the value of peer supports in enhancing housing stabilization.
5. **Legal advice and representation** – In general, people who experience homelessness are more likely to be involved with the criminal justice system in one way or another. Legal advice and representation may be important in assisting people deal with a range of problems, including addressing ongoing encounters with the justice system, dealing with accumulated debt resulting from ticketing (the criminalization of homelessness), etc.

## E. Enhancing social inclusion

Key to the well-being of any person is their ability to nurture positive relationships with others, connect to communities and become involved in activities that are meaningful and fulfilling.

1. **Developing and strengthening healthy social relationships and connections** – People should be supported in developing positive relationships with peers, adults, employers and colleagues and landlords etc.
2. **Enhancing family and natural supports** – Families are an important source of natural supports for people all through the life cycle. Reconnection and reunification with family for formerly homeless people is an important intervention that can contribute to longer term housing stability.
3. **Community engagement and integration** – The opportunity to engage with communities of choice – whether people and institutions in the local neighbourhood, or making cultural connections (see below) is also important to well-being.
4. **Cultural connection** – Cultural and spiritual connections are important for many people, and if they desire this, they should be supported in engaging cultural and spiritual traditions that support their growth.
5. **Engagement in meaningful activities** - People should be provided with the opportunity to participate in meaningful activities such as arts, sports, volunteering, etc. in order to learn skills, develop relationships and social skills.

## 6. Service Delivery

**In delivering a HF4Y program, here are some key points for consideration:**

### A. Prioritization

Prioritization for HF4Y can be understood in three related ways.

First, at the community level, decisions are made as to which youth are in greatest need and are to be prioritized for Housing First programs. This comes through the community planning process, and typically involves prioritizing chronically homeless youth with high acuity mental health and addictions for instance, or more broadly to the entire youth homelessness population as a whole (recognizing that exposure to homelessness can be traumatic for a broad range of youth).

Second, communities may also choose to target specific sub-populations through specific HF4Y program models based on their unique vulnerability (young women, youth who are sex trafficked, Indigenous youth, LGBTQ2S youth) or to employ HF4Y as a preventive strategy (youth leaving care, youth leaving adult or juvenile corrections).

Finally, when prioritizing those in greatest need, communities may consider other factors beyond a narrower prioritization mandate (ex. chronicity combined with acuity). This means considering those who may have no history of homelessness (or have just become homeless) and don't demonstrate high acuity according to the scoring of traditional assessment tools, but who are deemed to be vulnerable because of a single or group of factors, including:

- Their family and natural supports are particularly weak or absent.
- Their personal safety may be at risk.
- 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 judgment, 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.
- Their young age.

Once communities decide on population priorities, then decisions will need to prioritize those in greatest need. Assessment and decision-making can be informed by assessment tools (for youth it is recommended that strengths-based assessment tools based on the needs of developing adolescents or young adults be used) and processes that include both the client's self-assessment as well as staff perspectives. Assessment tools that over rely on self-assessment and produce numerical scores for purposes of ranking and decision-making should be avoided. For this reason we recommend good strengths-based approaches to assessment, including using the **Youth Assessment Prioritization tool**, because it is helpful in facilitating decision-making regarding prioritization. It has been developed based on the needs of developing adolescents and young adults, is strengths-based, balances the youth perspective with that of the worker, incorporates other knowledge and assessment information, and truly assists in decision-making. Always remember: assessment tools are there to assist in decision-making, not to make decisions for you.

## **B. Embedding HF4Y within an integrated systems response**

In any community, there may be a range of public, non-profit and charitable programs and systems and services that can potentially serve and support youth and their families. Unfortunately, these programs and services lack coordination and can be difficult to navigate in most places. In a HF4Y context, efforts should be made to support an integrated "system of care" that is client-focused and driven, and are designed to ensure that needs are met in a timely and respectful way. Originating in children's mental health and addictions sectors, the concept of a "system of care" is defined as: "An adaptive network of structures, processes, and relationships grounded in system of care values and principles that provides children and youth with serious emotional disturbance and their families with access to and availability of necessary services and supports across administrative and funding jurisdictions" (Hodges et al., 2006:3).

A system of care can best be achieved through strategic partnerships, and the importance of these in enabling the success of HF4Y programs cannot be underestimated. We cannot achieve the important outcomes we want for young people – not just housing stabilization, but wellness and a successful transition to adulthood by solely relying on the efforts of the homelessness sector alone. Bridges and connections need to be made between the HF4Y program and mainstream services and sectors. In some cases, drawing in the "unusual suspects," such as police, creates new models for outreach and support. The development of partnerships should occur early in the planning process.

"So we get everybody and anybody together. If you aren't sure whether they should be involved, invite them anyway. One of the greatest advantages of collaboration, especially in the early stages, but is important throughout, is that those at the table and part of the discussion now have a vested interest, when they feel like they are part of something bigger than they are and have influence they become supporters instead of antagonists. But I would suggest even involving the naysayers. Most of the time they are the way they are because they care about

their community. Get them involved in a way that shows that their opinions and ideas matter to you” (Wally Czech, as quoted in Gaetz et al., 2013).

### C. Case work and case management

Case management is well-established approach to supporting youth with complex needs and/or who are in crisis. There are many different approaches and practices (Milaney, 2011a; Morse, 1998) but in the context of delivering HF4Y, this means placing client- centred case management at the centre of the work in order to organize and coordinate the delivery of services. The key is that case management must be conducted from a strengths-based Positive Youth Development and life-skills building orientation – this approach must guide every interaction with young people.

In practice, case management can be short-term (as in the Critical Time Intervention) or long-term and ongoing depending on the specific needs of the individual. Key here is that young people need supports for as long as it takes to help them transition to adulthood, independence and well-being. Good case management requires a willingness on the part of the young person to participate, and the building of a potentially therapeutic relationship may take time. In reviewing case management as a key component of strategies to end homelessness, Milaney (2011; 2012) identified it as a strengths-based team approach with six key dimensions:

1. Collaboration and cooperation: A true team approach, involving several people with different backgrounds, skills and areas of expertise
2. Right matching of services: Person-centered and based on the complexity of need
3. Contextual case management: Interventions must appropriately take account of age, ability, culture, gender and sexual orientation. In addition, an understanding of broader structural factors and personal history (of violence, sexual abuse or assault, for instance) must underline strategies and mode of engagement
4. The right kind of engagement: Building a strong relationship based on respectful encounters, openness, listening skills, non-judgmental attitudes and advocacy
5. Coordinated and well-managed system: Integrating the intervention into the broader system of care, and
6. Evaluation for success: The ongoing and consistent assessment of case managed supports.

Many young people can best be supported through a case management approach where the case worker has overall responsibility for care and support, but also acts as a broker to help young people access the necessary services and supports. An effective approach to case management necessarily works best with a system of care, where links are made to necessary services and supports, based on identified clients’ needs.



Each youth will have a primary worker, and this person should stay as consistent as possible. “Another consideration is the shared caseload concept. The entire team should be familiar with all cases so that given the inability of the primary worker to address a need of the participant, another member of the team can. Another worker may be particularly skilled in a particular area.” (Wally Czech, Director of Training, Canadian Alliance to End Homelessness). In cases where the primary case worker is struggling with a particular issue or challenge, another member of the team may be brought in to support the case work, particularly if they are skilled in a relevant area.

Young people should expect to be contacted/visited at least once a week, based on desire or need. Few, if any, young people will absolutely refuse supports.

**Enhancing family and natural supports.** A key part of casework involves helping young people repair, build and enhance relations with family and to broaden the range of natural supports they have access to, in order to support young people as they move forward in their lives. The underlying ethos of a Family and Natural Supports approach is that family is important to almost everyone and that a truly effective response to youth homelessness must consider the role the family – and the potential of reconciling damaged relationships – can play in helping street youth move forward with their lives. For many, if not most, young people who experience homelessness, there is a longing for family, even for those who had difficult up-bringsings. The Without a Home study on youth homelessness identified that 72% of youth surveyed had ongoing contact with at least one family member and 78% desired an improvement in relationships with family. What actually constitutes a “family” is variable, based on individual experience (ex. growing up with grandparents) and cultural contexts; therefore the “family” should be defined with, or by, the young person.

Natural supports “enhance the quality and security of life for people,” and may include family, friends, romantic partners, neighbours, coaches, co-workers, teammates, fellow students, and other relationships or associations that comprise our social network. These types of support give us a sense of belonging, identity, security, and self-esteem. In addition to helping meet emotional needs, they can also help to meet physical and instrumental needs (The Change Collective, 2017: 4).

In a HF4Y context, building family and natural supports will help the young person as they move forward in life, and therefore is a case support priority. This should be viewed as “building a safety net” for youth when supports end up backing away.

From a case management perspective, enhancing family and natural supports can have a positive impact in providing additional supports for young people and therefore lightening the case load responsibilities. On the other hand, supporting families can add additional layers of complexity for workers.

**The role of the housing locator.** In many HF4Y programs, the role of “housing locator” is separate from the rest of the case management team. The housing locator does the majority of landlord recruitment and tenancy work for the team(s) which frees up case managers to focus primarily on the case management. Working with the young person and the case manager, the housing locator helps identify available housing options for the young person. As the primary

liaison for the landlord and tenant, the housing locator maintains ongoing contact with the landlord, builds a trusting relationship, and is the first point of contact if the landlord has concerns. Separating the housing locator from the case manager means that the latter doesn't get caught in the middle of a dispute between the landlord and tenant, which may undermine the relationship with one or both.

**ICM and ACT teams.** For those young people with very complex needs, the case management models associated with the Pathways model of HF4Y may be adapted for the needs of developing adolescents and young adults. For instance, some young people with complex health and addictions challenges may require team-based approaches such as **Assertive Community Treatment (ACT)** teams. In the ACT model, a multidisciplinary team in the community where the individual lives, rather than in an office-based practice or an institution, provides case management. The team involves psychiatrists, family physicians, social workers, nurses, occupational therapists, vocational specialists, peer support workers, etc. and is available to the patient/client 24 hour a day, 7 days a week. Supports may also be provided through **Intensive Case Management**, which is also a team-based approach designed for clients with lower acuity, but are identified as needing intensive support for a shorter and time-delineated period. The *At Home/Chez Soi* project has identified that for many clients, the first three months can be most challenging and providing appropriate levels of support may be crucial for recovery and retention of housing.

## D. Staff training and competencies

Effective case management demands ongoing training and support for staff in **four** areas that are key to HF4Y:

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

Training in these areas should be a requirement.

## E. Caseloads

Where HF4Y has been delivered consistent with this framework, case loads have been established in the range of 7-10 per caseworker, with 7 being the ideal. Given the broad range of supports that any young person needs to transition to adulthood – and these are identified as central to the support model of HF4Y – smaller caseloads are necessary if we want to see desired outcomes.

*“Caseloads numbers should be carefully balanced. When considering the impacts of including family and natural supports, complexities of targeted groups (LGBTQ2S, Indigenous) and the potential of managing crisis, caseloads in excess of 7 should be avoided.”*

Kim Kakakaway – Homefire Support Worker, Boys and Girls Club of Calgary

Larger case loads mean that much of the case manager’s time will be focused on housing supports, and will undermine their ability to provide the broad range of supports addressing social-inclusion, health and well-being (including providing trauma informed care), life skills development and support in engaging in education, training or employment. If we truly want to support young people in their transition to adulthood, then there must be a commitment by communities (and funders) to ensure case loads stay within these recommended limits. Housing First programs that serve young people under 25 and operate with large case loads are not consistent with the HF4Y model, and should not be described as such.

## **F. Graduation**

If a key goal of HF4Y is a successful and healthy transition to adulthood, then we cannot mandate short-term time limits on program participation and support – for instance, making young people leave the program in one or two years. While in some cases young people may choose to leave the program after a shorter time, strict time limits put unrealistic expectations on young people that may compromise their recovery, goals and success. As with housed youth with strong natural supports, the transition to adulthood can take time, and require ongoing supports, including the opportunity to re-enter the program if they have left it.

## **G. Rent and income supplements**

This must be a program requirement, especially in a context where rents are high and opportunities for youth to earn a living wage (especially those with inadequate education) are limited. A good idea is for programs to set their HF4Y targets based on how many rent supplements they have access to.

## **H. Working with landlords**

Regardless of which one of the described housing options a young person chooses, a critical component of success is that the case manager, and the program, to develop and nurture effective relationships with landlords and housing providers. Building trust with the landlords is key, and helping to strengthen and support the relationships between landlord and the youth is going to be important for both. Ensuring landlords understanding that housing a young person in their unit(s) is come with a level of support for the landlord and the youth. It is not “housing only.” That philosophy is linked in with building relationships in communities where young people will be housed.

“Landlords can and should be incorporated as much as possible as members of the support team. They need to be trained to contact case managers regarding concerns as well as discuss things with the participant. It should also be mandatory that case managers, regardless of the existence of a problem, arrange to meet monthly with each landlord just to discuss how things are going. There should also

be a landlord advisory group established to recruit, praise, honor, and learn from landlords as well as continuously teach them about Housing First.”

(Wally Czech, Director of Training, CAEH)

In fact, landlords can, and should, be considered as much as possible as members of the support team. They will need support in learning about HF4Y, understanding the needs of young clients, and will need encouragement and training to contact case managers if they have concerns. A good practice is for case managers – whether or not there are any ongoing problems – to arrange to meet monthly with each landlord simply to discuss how things are going regarding concerns as well as discuss things with the participant. It should also be mandatory that case managers, regardless of the existence of a problem, arrange to meet monthly with each landlord just to discuss how things are going. These interactions should occur long before a young person is housed. Landlord relations is an ongoing process regardless if young people are housed.

For scattered site housing, recruitment of private landlords is a critical factor in a tight rental housing market, yet may not be as challenging as people might imagine. In case studies provided in the book [Housing First in Canada](#), and the experience case studies and the At Home/ Chez Soi study identify that some landlords buy in because the funding and supports offered by the Housing First program offer a kind of guarantee of tenancy. “In other cases some landlords want to get involved, because they are interested in making a contribution to solutions to homelessness. The key point is that even in tight housing markets, landlords can be persuaded to be partners in Housing First” (Gaetz & Gulliver, 2013:).

## I. Program outcomes

Defining program outcomes is important for Housing First programs. Clear program outcomes must clearly be tied to the objectives (and philosophy) of the program, drive the program model of service delivery and help measure performance. The program outcomes below are these must be directly tied to program objectives. A key design feature of the HF4Y model that differentiates it from the adult model is the youth focused models of accommodation and supports. These provide a good starting point for considering program objectives and outcomes.

### 1) Housing stability

- Obtaining housing
- Maintaining housing
- Enhancing knowledge and skills regarding housing and independent living
- Reducing stays in emergency shelters

## **2) Health and well-being**

- Enhanced access to services and supports
- Improved health
- Food security
- Improved mental health
- Reduced harms related to substance use
- Enhanced personal safety
- Improved self-esteem
- Healthier sexual health practices
- Enhanced resilience

## **3. Education and employment**

- Established goals for education and employment
- Enhanced participation in education
- Enhanced educational achievement
- Enhanced participation in training
- Enhanced labour force participation
- Improved financial security

## **4. Complementary supports**

- Established personal goals
- Improved life skills
- Increase access to necessary non-medical services
- Addressing legal and justice issues

## **5. Social inclusion**

- Building of natural supports
- Enhancing family connections
- Enhancing connections to communities of young person's choice
- Strengthening cultural engagement and participation
- Engagement in meaningful activities

# 7. Data Management

Effective data management is important to support the work of HF4Y. It begins with clarity about organizational goals and objectives: what is the problem one is trying to solve and what are the outcomes we want to see?

Underlying our approach to data management at the program and organization level is shared measurement and data management systems, which are key to supporting individual case management as well as the broader social change we are looking for. Having agencies and services use common assessment, case management and outcomes measures requires not only agreement within the sector but cooperation from funders.

All of this works most effectively if there is some form of data sharing agreement and a data management platform or system (in Canada, HIFIS or HMIS) where all agencies input data, and individuals can be tracked as they go through the system. While respecting privacy, data sharing means that young people can be tracked as they move through the system, and that they don't have to repeat an intensive (and potentially intrusive) intake every time they encounter a service. The benefits here are many. First, it can support the alignment of program philosophies, activities and outcomes across the sector. Second, it can contribute to enhanced collaboration, systems integration and a rethinking of how to collectively respond to the problem of youth homelessness through Collective Impact. Third and most importantly, it can potentially lead to better outcomes for youth, as they get access to the services that are most appropriate, enables more effective flow through the system, and holds the sector accountable for better outcomes for youth.

## Coordinated Entry

Coordinated Entry (also known as Coordinated Intake or assessment) is a key to integrated systems and service delivery models to support HF4Y. It takes the form of a first point of contact whereby there is common point of entry (which can be through community hubs, a dedicated assessment facility, phone lines or web-based access, or emergency services for instance), a common assessment and the sharing of data, so that young people and/or their families can get help when they need it.

For HF4Y, this is a standardized approach to assessing a young person's current situation, the acuity of their needs and the services they currently receive and may require in the future, and takes into account the background factors that contribute to risk and resilience, changes in acuity, and the role parents, caregivers, community and environmental factors play on the young person's development.

The key to coordinated assessment is to employ it as a system-wide process by having all agencies use the same assessment framework and instrument in order to standardize current practices and provide comprehensive and consistent client information. In other words, if a community has adopted a "system of care" approach, measures should be taken to share the

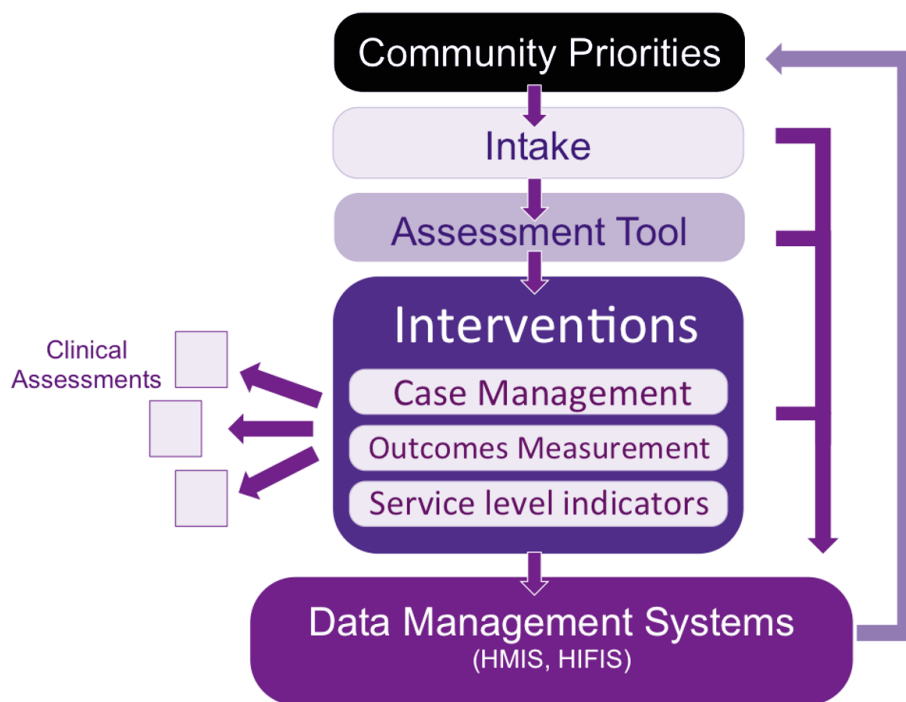


information between agencies and providers<sup>2</sup> in order to reduce duplication of assessments and enable effective case management so that clients get timely access to the most appropriate services based on need. So while common assessment means that all agencies use the same tool, centralized intake refers to a pooling of information that different providers can have access to. This facilitates systems coordination and means that youth won't have to tell their story multiple times (and it is important to remember that these stories can be emotionally difficult to share (traumatic) or stigmatizing (LGBTQ2S, criminal involvement, mental health challenges, etc.). This is important, because in larger cities, young people who are homeless often complain about having to retell their story upon intake at every new agency.

Point-in-Time (PiT) counts can also be used to identify youth who may not be engaged with the homelessness system. Some communities are moving towards “By Name Lists” as a means of tracking and following people as they move through the system.

### Assessment and case management

Key to supporting casework are assessment and case management tools. No single tool can do all of the work, as there are a number of points of intervention from coordinated entry, to screening and assessment, case management, program and service level indicators. However all can play a role in ensuring that young people get the supports they need to exit homelessness and to move forwards in their lives.



<sup>2</sup> To enable this, communities must ensure client consent, and address privacy concerns at the legislative and agency levels.

**Assessment tools** – These are key resources to help determine the needs of youth, program eligibility and priority setting. For young people who are known to service providers (the homelessness sector, or child protection system), young people who are deemed to fit within the priorities of the HF4Y program can be assessed and prioritized. Other young people may be identified through Coordinated Assessment systems or PiT counts.

For HF4Y, we are recommending the Youth Assessment Prioritization tool (which includes both a “screener” and a more extensive assessment tool) as a primary assessment tool. Unlike many other assessment tools currently being used, the YAP tool is strengths-based, evidence informed and relies on the knowledge of both the young person and the worker. The YAP tool has been field tested in Canada and will be validated and released more broadly in the coming year.

Again, it is important to note that no single assessment tool can do everything. The first assessment, combined with the judgment of the caseworker, may call out for deeper assessments using established tools, to identify conditions such as brain injury, developmental delays, FASD or other disabling conditions.

**Case management tools** – Effective case management is best served by an approach to data that focuses on clear program objectives and outcomes which drive the service delivery model. A positive youth development perspective (focusing on risks and assets) should likewise guide this approach. Strengths-based tools that incorporate a client-driven “stages of change” approach will be supported.

Measuring the outcomes of HF4Y is important. Outcomes are not only the end result of the work, but also answer the questions, “Did you see the changes you and the client wanted to achieve?” Good case management data tools support outcomes measurement at the individual, worker, program and organization level. We will be developing outcomes measures consistent both with the core principles of the program as well as the service delivery model.

## Performance management

In order to measure progress and the effectiveness of these systems approaches, performance indicators and milestones at the community, provincial/territorial and national levels. It is important to note that integrated systems work necessarily requires a broad cross-sectoral approach and working with key stakeholders that are outside the traditional homelessness sector. Turner identifies that the goal of such a systems-focused performance management process is to help the local community or government:

- Evaluate system’s impact on priority populations;
- Articulate what the system aims to achieve;
- Illustrate the level of performance expected of all services;

- Facilitate client participation in quality assurance activities at program and system-levels; and
- Promote service integration across sector and with mainstream systems.

([Turner, 2015](#))

Developing and implementing efficient performance measurement processes begins with a collective understanding of performance measures and targets, and that systems and processes (including data management tools and shared measurement discussed above) be in place and supported.

The key challenges for communities to engage in this important work comes down to resources, training and capacity to collect and manage data and to engage in data analysis and reporting that can contribute to a better understanding of their client base, service level performance, and can lead to continuous improvement. Here, higher levels of government need to fund and support communities to do this work if they want to see outcomes.

In conclusion, the development and implementation of the Canadian Youth Homelessness Data Dashboard will necessarily rely on deep and ongoing partnerships and collaboration between researchers and the users of research and will inform how we think about data for all populations impacted by homelessness. Collaboratively, we explore some bigger questions about the role of knowledge and data collection and the values of different methodologies and approaches to measurement and evaluation. We also need to be realistic about what data can and cannot do. While data is important, we cannot oversell it as a magical solution to the challenges of working to support youth experiencing homelessness. Our desire for evidence-based decision making should not preclude the consideration of innovation in policy and practice for which the current state of evidence for effectiveness may not yet be robust.

## 8. Conclusion

“For the first time in my life I am not living a program.  
I am living my life.”

Youth participant in the Infinity Project, quoted by Kim Wirth, BGCC.

The growing interest in Housing First and the strong evidence base for its success has clearly raised questions about its applicability for youth. As a *philosophy*, HF4Y can be a guiding principle for an organization or community wanting to end youth homelessness. HF4Y is important intervention because it prioritizes getting young people into housing as quickly as possible, with age appropriate supports to follow. It is founded on the belief that all people deserve housing and that people who are homeless will do better and recover more effectively if they are first provided with housing. Employing a positive youth framework means drawing on the strengths, dreams and talents of young people to support them on their path to adulthood.

“The thing that really appealed to me was that I was going to be able to have a place to live in a nice area of Hamilton. My rent was subsidized, but it was a place of my own. I had a bed, I had my own room, a bathroom and a kitchen. Another thing that really appealed to me was that it was something that I could look forward to and try to excel at. I was so happy to be in this place! I sat down at my desk inside my room of this new place -- I hadn't really finished unpacking my stuff -- and I sat down and I just thought in my head, 'like, this is it...I'm done fighting, I'm done searching, this is a place that I can sleep at, a place that I can call my own.' I'd been searching for this for so long and this is finally happening, after years. This is what I have been fighting for tooth and nail, for however long.”  
(Conor, age 20, Hamilton, ON.)

As part of our youth framework, the core principles of Housing First have been adapted to reflect the needs of the developing adolescent and young adult.

The **core principles of HF4Y** include:

1. A right to housing with no preconditions
2. Youth choice, youth voice and self-determination
3. Positive youth development and wellness orientation
4. Individualized, client-driven supports with no time limits
5. Social Inclusion and community integration

Why do core principles matter? HF4Y is more than a catch phrase, more than a brand, and much more than simply applying the adult model of Housing First with a different age mandate. Those communities that adopt a HF4Y approach must be able to demonstrate fidelity to the core principles as outlined here and work to provide the range of accommodation options and supports described above. This is important, because in a context where HF4Y becomes more popular with policy-makers and funders, there may be pressure or a temptation to simply describe existing program models as somehow being HF4Y. Not all housing program models for youth – no matter how good -- fit this definition and should not be described as HF4Y. Fidelity to the core principles and program model of Housing First is paramount if the concept is to mean anything.

The framework for HF4Y outlined here is intended to provide guidance for communities, policy-makers and practitioners interested in addressing the needs of developing adolescents and young adults. An extensive review of research and an engaged conversation with key service providers, as well as young people who have experienced homelessness, has produced a number of conclusions.

***Addressing youth homelessness means youth-focused approaches.***

The causes of youth homelessness are unique and so are the remedies. We can no longer be satisfied by taking adult approaches to addressing homelessness and make “homelessness junior.” Any response to youth homelessness must address the needs of developing adolescents and young adults. This framework blends what we know works in terms of Housing First with what we understand are the needs of adolescents and young adults. This means building the model from a healthy youth development perspective. It means adapting Housing First – in terms of core principles as well as models of accommodation and supports – to meet the needs of young people.

***Housing First CAN work for young people.***

The emerging evidence from communities that have applied this framework, as well as existing programs such as Infinity in Calgary, demonstrate that it is an effective intervention for youth.

***HF4Y requires different models of accommodation.***

The framework presented here identifies the range of housing options needed to meet the needs of young people who are transitioning to adulthood. The success of Housing First has raised questions about the need for transitional housing. If client choice is a paramount principle of Housing First, then transitional housing needs to be an option for youth, especially younger teens, who prefer it.

***Housing First only works for youth if there is an adequate supply of affordable***

***housing.*** In communities with an inadequate supply of affordable housing, implementing HF4Y becomes a challenge because of the lack of earning power of young people and age discrimination. Strategies to end youth homelessness that embrace Housing First must also work to increase the supply of affordable housing in the community, but must also focus on ensuring that young people have the necessary income supports to obtain and maintain housing.

***Housing First supports must be youth oriented.*** The focus of supports should be on assisting adolescents and young adults in their transition to adulthood, not merely to independence. This means not only providing support for obtaining and maintaining housing, but also supports that enhance health and well-being. It means ensuring young people have access to income and if possible, re-engagement with education. Life skills development is also important for young people who will have little experience of living independently. Finally,

young people need opportunities for meaningful engagement. A social inclusion approach includes not only support in building and strengthening social relationships and community connections, but engaging in activities that bring meaning and a sense of well-being to young people.

***HF4Y can be adapted as a model of homelessness prevention.*** As communities begin to recognize a need to focus on prevention along side supports for exiting homelessness, there are opportunities to adapt the model to support prevention. HF4Y can become a way of supporting young people exiting corrections, aging out of child protection or those who are discharged from inpatient care.

***There is a need for an Indigenous lens for HF4Y.*** In Canada, Indigenous youth make up about 30% of the youth homelessness population. There are some emerging practices that Indigenous-led approaches to HF4Y are effective in supporting young people, and helping them reconnect with their culture and communities.

There is also much we can learn from Indigenous ways of knowing that can and should apply to supporting *all* youth in transitioning to adulthood in a safe and planned way.

***Housing First is not the only solution to youth homelessness, but it is a key one.***

Housing First does not promise or pretend to be the only approach to addressing youth homelessness. However, it can and should become an important intervention that supports and in turn is supported by other preventive and early intervention strategies, short term emergency supports, etc. Under the broader umbrella of strategies to end youth homelessness, Housing First has an important place.

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