

PROMOTING HEALTH FOR HOMELESS AND STREET-INVOLVED YOUTH:

USE AND VIEWS OF SERVICES OF STREET-INVOLVED YOUTH IN CALGARY

Catherine WORTHINGTON & Bruce MACLAURIN

What do you need to know?

The economic boom that occurred in Alberta in the mid-2000s drew people to the city of Calgary, putting greater pressure on affordable housing and social services, and increased the number of youth on the streets. The number of homeless people in Calgary went up 32% between 2004 and 2006, and the youth homeless population grew at an even faster rate than the adult homeless population. For youth and health service providers in Calgary, the issues faced by street-involved youth were thus of growing concern.

What did the researchers do?

Pencil-and-paper surveys were administered to 355 youth recruited from a variety of service locations and in-door and out-door gathering locations in all quadrants of the city. The survey included questions on childhood experiences, street experiences, health, service use and views of services. Qualitative interviews were also conducted with 42 street-involved youth. Youth survey participants were generally between the ages of 14-24, with a few (6%) up to

age 29. In order to ascertain whether service use varied according to level of street involvement, three groups of youth participated: youth currently living on the street (*Currently on Street*, 47%), youth who were not currently living on the street but had lived at the street in the past (*Not on Street – History*, 33%), and youth who were involved in street culture but were not currently living on the street and never had (*Not on Street – No History*, 20%).

WHAT IS THIS CHAPTER ABOUT?



This chapter reports on findings from the Youth, Health and Street Study conducted to help services better respond to needs of street-involved youth in Calgary, Alberta. This study was community-based, and engaged community members (including 2 street-involved youth and representatives of 14 agencies) in every aspect of the research process.

ARTICLE SOURCE

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What did the researchers find?

The vast majority of participants reported using a variety of services within the past three months, and only 11% indicated they had used no services. The services most frequently used were shelters (48%), drop-in centres (44%), medical clinics (41%), outreach services (37%), and food banks (32%). Youth *Currently on Street* reported the greatest use of services overall. Youth *Currently on Street* reported significantly greater use of shelters (72%), drop-in centers (68%) and outreach services (53%) than other youth, while youth *Not on Street – History* reported using counselling services more frequently (26%). Reported concerns about services included location (such as bad neighbourhoods) and distance between services, limited hours of service or availability, personal safety issues, employee attitudes/ heavy caseloads, and policies that restricted services to certain youth (for example, having to be “stable” for three months). There were some differences in attitudes towards services by group. For instance, youth *Not on Street – No History* were more likely to dislike shelters, and did not want to be viewed as a ‘street kid’. Youth *Currently on Street* and *Not on Street – History* had favourable comments about shelter staff, but more specific issues with particular shelter policies (such as curfews, smoking, and age restrictions), the physical environment of the shelters (e.g., cleanliness or safety), and availability of shelter beds. Finally, youth in the *Not on Street – No History* were more likely to be aware of services provided by food banks, and more likely to be able to access these services.

How can you use this research?

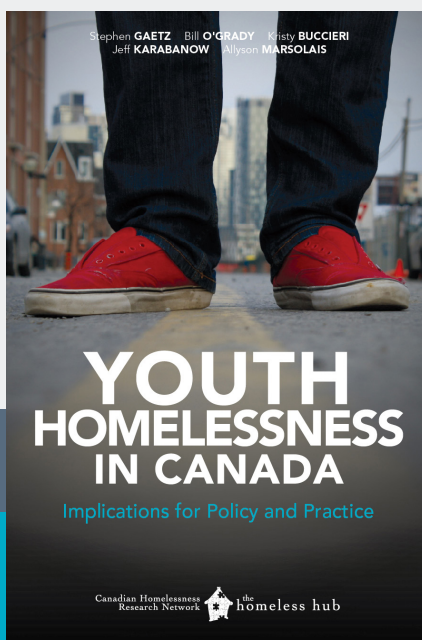
This research demonstrates that the large majority of street-involved youth access services, and that the use of and attitude toward services varies by level of street involvement. This has implications for both service providers and policy makers. For service providers, some components were identified as being important to all youth, particularly caring, non-judgemental staff, and accessible and flexible rules. Service providers should also be aware of where a youth is in terms of his or her level of street involvement in order to best understand what types of services he/she will appreciate to maximize their health and well-being. For policy makers, this research demonstrates a need to establish a continuum of services to meet the diverse needs of street-

involved youth, and that assist youth at different points, specifically, before youth become regularly involved in the streets, during street involvement, during a transition from the street to stable housing and as a follow-up to street-involvement. This type of service approach requires a well-coordinated system of components linked through a shared understanding of goals, quality standards, a common assessment framework, central referral processes, and shared resources and tools. Finally, this research points to the need for further inquiry into interventions that assist street-involved youth, particularly the best way to provide services to different sub-groups of youth.

About the researchers

CATHERINE WORTHINGTON is an Associate Professor at the School of Public Health and Social Policy, University of Victoria. Her research focuses on quality of and access to health and social services for vulnerable populations. In research studies funded by the Canadian Institutes for Health Research (CIHR) she has worked with people living with HIV, street-involved youth, African immigrant communities, and Aboriginal youth to develop services that meet the needs of client groups.

BRUCE MACLAURIN is an Assistant Professor at the Faculty of Social Work, University of Calgary, and a Senior Researcher at Wood’s Homes. He has been a Co-Investigator on the three cycles of the Canadian Incidence Study of Reported Child Abuse and Neglect, as well as the Principal Investigator for provincial studies in BC, Alberta and Saskatchewan. His research and publishing has focused on child maltreatment, child welfare service delivery and outcomes, youth at risk and street-involved youth.



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