

# Anybody's Couch

*Understanding the Lives, Health and Service Needs  
of York Region Homeless Youth  
June 2006*

*Dr. Cheryl van Daalen-Smith, RN, PhD  
Rosemary Lamont, RN, MEd  
York University School of Nursing*



© Dr. Cheryl van Daalen-Smith and Rosemary Lamont, York University School of Nursing Please address all requests for duplication to [cvandaal@yorku.ca](mailto:cvandaal@yorku.ca) or [closetotheedge@bellnet.ca](mailto:closetotheedge@bellnet.ca)  
NB: This pilot study will be published in a peer reviewed journal at a later date.

*Table of Contents*

Ethical Approval .....	3
Acknowledgements .....	4
Background .....	5
Methodology .....	8
Findings	
Youth .....	10
Parents .....	12
Service Providers .....	13
Discussion .....	16
Preliminary Recommendations .....	19
Sources Consulted .....	20
UNCRC .....	21



**Certificate #:** 2005 – 147

**Approval Period:** 08/02/05 –  
08/02/06

OFFICE OF  
RESEARCH  
SERVICES  
214 York Lanes

## OFFICE OF RESEARCH SERVICES

### Memo

4700 Keele St.  
Toronto ON  
Canada M3J 1P3  
Tel 416 736 5055  
Fax 416 736 5512  
[www.research.yorku.ca](http://www.research.yorku.ca)

**To:** Dr. Cheryl van Daalen-Smith, Nursing  
cvandaal@yorku.ca

**From:** Alison M. Collins-Mrakas, Manager, Research Ethics

**Date:** Tuesday August 2nd, 2005

**Re:** Ethics Approval

### **Anybody's Couch: Exploring the Lives, Health and Service Needs of York Region Street-Involved Youth**

I am writing to inform you that the Human Participants Review Sub-Committee has reviewed and approved the above project.

Should you have any questions, please feel free to contact me at: 416-736-5914 or via email at: [acollins@yorku.ca](mailto:acollins@yorku.ca).

Yours sincerely,  
Alison M. Collins-Mrakas M.Sc.  
Manager, Research Ethics  
Secretary, Human Participants Review Committee  
214 York Lanes

4700 Keele St.  
Toronto ON  
Canada M3J 1P3  
Tel 416 736 5055  
Fax 416 736 5512  
[www.research.yorku.ca](http://www.research.yorku.ca)

## Acknowledgements

This project is entitled Anybody's Couch to capture the experience of youth homelessness. Many youth who do not have stable housing, vacillate between friends, family and acquaintances in hopes of finding a place to sleep...often on someone's couch. This "couch surfing" is transient and unpredictable in nature. Anybody's couch also suggests that homelessness can happen to anybody...to you or someone you know. It also connotes that anybody who is part of the community has the responsibility to care for all children.

Anybody's Couch would not have come to fruition without the support, sponsorship and involvement of a variety of York Region community agencies and members of the York Region Harm Reduction Coalition. Thank you:

- York Region Health Services
- Crosslinks Housing and Support Services
- Addiction Services of York Region
- Canadian Mental Health Association
- Centre for Addiction and Mental Health
- York Region Community Services and Housing Department
- Town of Newmarket Recreation Department
- Pathways for Children, Youth and Families of York Region Inc.

York University School of Nursing must be acknowledged for its support for this study.

Finally, the co-investigators wish to acknowledge and thank York University's Atkinson Faculty of Liberal and Professional Studies for financial support of this study.

## Background

In 1986, *The Ottawa Charter for Health Promotion* became an international guide for understanding the myriad of influences on the health of individuals, families and communities. The world health organization asserted that what was central to health was the necessity to have one's rights and freedoms protected and respected. Social justice and equity in access to *voice* and *choice* came to the forefront (again) as participants at an international interdisciplinary conference in Ottawa sought to re-focus the efforts in public health globally. Children and youth must also have *voice* and *choice*, and this is an important factor in enabling healthy growth and development. Children and youth have rights: rights that Canada ratified when they signed the *UN Convention on the Rights of the Child* in 1991. Since then, the *Canadian Coalition for the Rights of Children* has played a leadership role in producing educational information and tools to facilitate Canada's compliance with the convention. Organizations such as *Unicef Canada*, the *Canadian Association for Community Living*, *Justice for Children and Youth*, *World Vision Canada*, *Save the Children Canada*, the *Christian Children's Fund*, the *First Nations Child and Family Caring Society of Canada*, the *Canadian Child Care Federation*, have joined forces to form a strong and dedicated coalition whose mandate includes monitoring Canada's commitments to children, developing links between international, national, provincial and local organizations, fostering knowledge and understanding of the UN convention *particularly* among young Canadians who live at the fringe of society. Street-involved youth live at the fringe, and the ragged edges of this fringe are where many York Region youth-serving professionals practice.

According to the UN Convention on the Rights of Children, children have a right to the highest attainable standard of health and to have access to treatment facilities. *Article 12* states that children should have a say in decisions affecting their lives and *article 13* states that children have the right to seek, receive and impart information. This includes information concerning their own health and the options available to them. *Article 23* specifically describes the rights of children with disabilities including their right to live a full and decent life. Lastly, *article 25* states that children placed by authorities for the treatment of physical or mental health issues should be provided with a periodic review of their treatment. Further, it is expected that child and youth-serving professionals must periodically reassess the state of the child's health and determine if the treatment being used is appropriate and necessary.

York Region initiated a review of the health and well-being of its children and youth in 2004.(Advisory Forum on Children, Youth and Families 2004) . To ensure that this process continues a sustainable mechanism is vital in order that the rights of children and youth will be consistently and systematically monitored and addressed. We believe that exploring the lives of homeless youth, and acting upon the findings is just one of the many examples of child and youth advocacy that already exist in York Region.

## **A History of Youth-Centredness in York Region:**

The *Harm Reduction Coalition of York Region* is a compilation of dedicated citizens and professionals, who are involved in many initiatives related to marginalized populations. Accordingly, they strive to understand how the answers to questions such as “What life is like?” and “How can service providers best partner with you in order to support your quality of life?” would be answered by street-involved youth. To date, there has been minimal documented inquiry into the lives, needs and barriers faced by rural and small town street-involved youth in Ontario. Thus, York Region’s track record in providing extensive, diversified and evidence based supports to *many* aggregates who live in the region, makes it an obvious setting for such an important project.

The history of concern for youth, particularly marginalized street-involved youth is impressive. An initial enumeration to ascertain the extent of homelessness in York Region was conducted by Crosslinks Housing and Support Services in 1999. This study indicated that 54.4% of the homeless were youth under 25 years of age (Crosslinks, 1999). York Region has had an active Homelessness Task Force, and it released a report in September of 2000 indicating that youth homelessness was a concern that demanded dignified attention. The key recommendation was that York Region facilitate the development of a collaborative regional youth strategy that could provide opportunities for learning, innovative partnership, risk prevention strategies (rooted in a harm reduction framework), and creative approaches to “address” youth issues. A very important and successful first step towards these goals was York Regions’ Youth Summit which was held November 19<sup>th</sup>, 2001.

The summary report, entitled *Seeking a Shared Strategy For Youth: A Call to Action*, was completed in April 2002 and was reported to and endorsed by the *Human Services Planning Coalition* (HSPC) on May 15<sup>th</sup>, 2002. From that, the HSPC created a Task Force with representation from

- Area Municipalities
- Educators
- Police
- Social Services and Family Support Services
- The Child and Youth Sector
- Youth Summit Steering Committee
- An Advisory Forum on Children, Youth and Families

This Task group was struck with the responsibilities of prioritization of next steps, specific actions and to determine what and who it would take to ***develop a Regional Youth Strategy***. The Task group was steadfast in its work and addressed the recommendations of the Youth Summit Report. Not only did the Task group discuss the recommendations, but they have also outlined various partner agencies, indicated who would take the lead in some of these initiatives, and suggested timelines. These are re-introduced below. It is worthy to note that the

public health emergency created by the outbreak of SARS created many barriers to this work being done and dampened the momentum of this important work.

The Harm Reduction Coalition of York Region called upon faculty from York University School of Nursing to investigate the lives, health and service needs of street-involved youth aged 16-21. The co-principal investigators agreed, provided the project would be rooted in the UN convention for the rights of the child. This will be the foundation from which the research will be planned, conducted and analyzed.

A Youth Strategy Task Group started with the identification by the York Region Homelessness Task Force Report (September 2000) of youth homelessness as a concern. The report recommended that York Region facilitate the development of a collaborative regional youth strategy which could provide opportunities for learning for all stake holders involved (most importantly learning stemming from the voices of youth themselves), innovative partnerships, harm reduction strategies and creative approaches to address youth defined barriers to health and quality of life.

The 2002 York Region Youth Summit “*Seeking a Shared Strategy for Youth: A Call to Action*” made specific recommendations that effect the lives and health of York region street-involved youth including:

- Development of a framework and clear statements of understanding about youth needs
- Cross-sectoral exchanges about youth issues
- A research agenda to determine how youth are doing (the core thrust of this research)
- Exploration of mapping as a tool for identifying community capacity, services and supports for youth – and whether they are meeting the needs of youth as defined by youth.
- Creation of a central youth resources directory for youth by youth and youth-serving practitioners
- Development of a tool-kit which would include a positive practices guide that would identify and evaluate effective practices and innovative approaches used in York region. We might consider using the work of Youth Participation Jeunesse.
- A directory of youth services in York region
- Development of a wallet sized Information card listing important resources and phone numbers such as help lines, addiction services, housing support, youth-centred counselling, health clinics etc.
- Development of a conceptual framework including a statement of needs(s), capacities should be established by youth, for youth and all that work with youth.
- An Annual (or bi-annual report card) presented to Regional Council

Further documentation of youth homelessness was completed in July 2003 with the

release of *Youth Homelessness in the 905: An Evaluation of the Services at Pathway's Home Base Youth Drop-In Centre* in partnership between Pathways for Children, Youth and Families

of York Region and The Centre for Studies of Children At Risk, McMaster University. The authors Kelly N Cameron, Yvonne Racine and Dr. David R Offord supported recommendations to expand multi-service programs including shelter services for youth.

## **CORE ISSUE:**

There has been very little written about the lives of rural/suburban street-involved youth in Ontario. There is an incredible amount of interest and commitment *already* from youth, parents and youth serving-professionals to launch a pilot study that explores the lives, health and service needs of rural/suburban street involved youth. We suggest that the life trajectories, the current means by which rural/suburban street youth live their lives, their health and their service needs are similar *and different* than that which is published about urban street-involved youth. We believe that if we ask them, they will tell us about their life trajectories, what they need and how we can best support them – *in York Region*.

## **OBJECTIVES**

To explore the lives, life trajectories, health, capacities and service needs of street-involved youth in York Region aged 16-21.

To highlight and build from an already strong existence of “Pockets of Provision” in York Region in order to identify what exists and what is needed.

To provide youth-driven identification, planning and development of services that address needs, capacities, and particular risks.

To explore the needs of parents of street-involved youth

Through service provision, public awareness, and consultations with youth, parents and service-providers, we seek to reduce harm, protect dignity, and embrace York Region street involved youth as full and active citizens, capable of making decisions that affect their quality of life and future.

## **Methodology**

Given its size and brief duration, this clearly is a pilot study aimed at spawning further inquiry into the lives of homeless youth in York Region. To begin, the core objectives of this study are to inquire about the lives, health and service needs of street-involved youth residing in York Region. As nurses, we believe that health, in this context, is a subjective experience that can only be described by the person who lives it. Housing and health are also closely connected, as shelter is recognized as one of the prerequisites of health (Ottawa Charter, 1986). There have been some parents of previously or currently homeless youth who have approached the York Region Harm Reduction Coalition requesting a more coordinated service delivery model, and one that reaches out to parents and guardians in an affirming and supportive way. Thus, we wanted to interview parents. Lastly, during our initial consultations we met countless wise and



dedicated service providers whose wisdom about the lives, health and service needs of homeless youth is immeasurable.

Confidential, semi-structured interviews and focus groups were conducted with youth, parents and service providers. These interviews were audio-taped, video-taped or conducted through a thorough note-taking process. A process of informed consent was diligently followed.

We interviewed a total of 21 previously or currently homeless youth about their lives, what the health impact of street-involvement has on their health (from their perspective) and what services they require in order to attain/maintain health and quality of life (again from their perspective). We were particularly interested in enabling both *voice* and *choice* in how we enacted this study and with how we articulate its findings. We want to learn about their lives, their hopes and their plans for the future. Do they have special needs? What are their fears, doubts? What are their strengths? What barriers do they face systemically, and societally in order to attain quality of life? How can they best be supported?

Three parents of homeless York Region youth (past or present) were interviewed to ascertain their lived experiences and perspectives as to what services they deem necessary to help families with youth who are street-involved or *at risk* for becoming homeless.

Consultations and focus groups with approximately 25 youth-serving professionals who routinely work with York region homeless youth were held. The goal of these consultations was to discuss current services and service gaps, explore strategies to combat youth homelessness, and most especially to ascertain their understanding of the lives, health and service needs of homeless youth.

Subsequent to the interviews, focus groups and consultations, a thematic analysis of the data was carried out and the conclusions drawn from the findings provide insights into the lived experiences of York Region youth homelessness and health. These findings clearly point to policy development pertaining not only to youth-centred, youth-driven service delivery, but more importantly to the prevention of the core causes of youth homelessness – namely poverty, a dearth of parental/family affirming support systems, and a lack of affordable housing.

Lastly, extensive consultation with Emma Rooney, Program Coordinator for Street Kids International, Brent MacKinnon, Program Manager, Community Resource and Learning Room and Coordinator of *Resilient Youth and Communities: A Youth Community Mapping Program*, and Jane Wedlock, Public Education Coordinator for the York Region Alliance to End Homelessness enabled the investigators to disseminate these preliminary findings of this pilot study. Their dedication to the issue of youth homelessness is to be commended. In fact, it is our hope that this study will *strengthen* the work of these individuals, and in particular the York Region Alliance to End Homelessness.



## Findings

I want all of our children to have dreams – not bad dreams,  
but good dreams. Dreams about what they want to become,  
[and] how they can strengthen each other.

- *Ovide Mercredi*

## Youth Voices

First and foremost we must mention how humbled the youth were for “even being asked.” They were amazed that this was important to researchers from a local university, and were pleased that it was backed and supported by so many of the service providers they continuously turned to for support. It is their wish that they be believed, valued for their input and understood from their life lens – for it is their lives that this study pivots around.

### *Circumstances leading to homelessness*

- Abuse
- Neglect
- Struggles in school/with school officials
- Family reconstitution – without adequate community supports in place
- Poverty
- Step-parent discord
- Disrespect
- Kicked out as a solution to any family disturbance
- Maltreatment by peers, alienation, marginalization
- CAS/Foster care interface
- Continued messaging that they are worthless, stupid, and an inconvenience
- Lack of supports for their own parents and having to become caregivers
- Not being believed
- Pathologization by mental health professionals
- Ageism
- Lack of suitable youth-centered supports for every-day struggles
- Lack of affordable housing
- Lack of follow up by *some* agencies who follow youth

### *Effects of Being Homeless*

- Self-esteem erosion
- Spirit injuries initiated or exacerbated
- Begin to blame selves
- Lose touch with their authentic selves and their potential
- Judged, criticized, harassed, further abuse, exploited by peers or adults
- An overwhelming sense of degradation

- Experience life as an up-hill battle
- Live in fear for their life
- 
- Persistent poverty –biases by employers make it hard to find work
- Impinged, delayed or a full stoppage in their right to education
- Police maltreatment
- An overwhelming need to numb – and drugs are easier to find than food
- Drawn into illegal activity – usually by predatory adults
- Ill health with little options for youth-centered health care
- Lose hope realizing that they are invisible or desired to be by “almost” everyone
- Forced to live their lives day to day, minute by minute – no future planning
- Forced to be constantly on the move – no real sense of belonging
- Alone, lonely, hypervigilant, distrusting of most
- Experience an infringement of *all* of their rights as per the UNCRC
- Develop enormous resiliency, creativity, and motivation “to keep trying”

***What are they asking of us – “the collective we”?***

- Someone to talk to – that will listen without judgment, believe them and stay with them
- Assistance to get into school and stay there
- More places like Pathways, the Newmarket Youth Centre, drop - ins and shelters
- An address to use
- To be treated with respect
- The people who run the programs to have “lived the life”
- CAS to believe them, and foster care to be guided by a child rights model
- Permission to be unique
- To not be labeled
- Better transportation – affordable
- RECREATION – affordable (free), accessible, and youth-friendly
- Augmented street outreach
- Help for their parents
- That service providers *know* that when families reconstitute, the kids sometimes suffer
- That this report “tell the truth”
- To belong
- To count
- To become visible
- To not be defined by their “mistakes”

**“It’s a degrading life”**

## Youth Participant

### Parent Voices

From one parent – this study had life breathed into it. Her lived experience of having a son “on the edge” for a large part of his life, brought groups of concerned service providers and researchers together on many occasions to explore what had been done already in York Region. These conversations, in consultation with parents, led to the development of the study, its objectives, and its questions of inquiry. Through several one to one interviews with parents, the following is a beginning list of their concerns and wishes. Although this study is youth-centered, the lives of their parents deserves dignified attention.

- There are insufficient affirming services for parents experiencing youth homelessness or problems
- Parents, when interfacing with many youth-serving providers feel blamed and shamed
- Parents need to have allies who will partner with them and assist them to reach out to their child in a way that is aligned with the perceived needs of the youth
- Child Protective Services must be brought on board in understanding that “we are not bad parents”
- There is little or no application of a harm reduction model of youth intervention in York region
- Youth can easily become victimized by pedophiles, sexual and criminal predators in exchange for food money, housing and drugs
- Youth face police intolerance: “Send them to Toronto”
- There is a “not in my backyard sentiment” in rural/suburban towns including those in York region
- “Our own communities are afraid of street involved youth” due to incorrect information, myths and a lack of compassion. It is seen as somebody else’s problem and *always* because of a bad parent(s).
- Few services in York region for “hard core street involved youth”
- There is a zero tolerance in schools, shelters, addiction and counselling programs for youth with addictions or behavioural symptoms. Because of this, they are often excluded.
- There are minimal beds for youth in local youth shelters
- There are very limited shelters for girls/young women and only in the north
- Inadequate housing for street-involved youth, even for youth over 16.
- More outreach workers are needed in York Region
- The current outreach van and shelters are a great start
- Youth receive poor dental and health care due to a lack of funds, lost identification, limited transportation, low literacy skills and very little case management-style support
- Youth are forced to live in forests, or in unsafe housing including those that do not meet fire regulations/exits, those with poor air quality/mold

- Youth have no rights when it comes to rent control
- Youth are unable to access meds including ventolin, insulin, birth control
- Lack of follow up for meds for youth who are institutionalized/incarcerated and then released
- Lack of family programs to support, educate
- A felt lack of political interest or understanding of the magnitude of the problem
- It is traumatizing to lose a child over and over
- It is the parents who are generally blamed by both the community and *some* agencies.
- Isolation,
- Abandonment
- It becomes necessary to develop survival skills – just to get through one day

“It’s post-traumatic stress ...  
over and over and over”

Parent Participant

## Service Provider Voices

We were privileged to have met many committed youth-serving *and* youth-centred practitioners in York Region.. We believe that those bearing witness to youth homelessness, on a daily basis, have wisdom to share. The service providers who gave of their time, did so with one common thread: they respected the youth and their families. They *articulated* that this was a system’s issue, rather than just ‘another rotten kid,’

The following are some insights of the service providers regarding the lives of those living on the streets, sleeping rough, calling for help, and of the parents seeking guidance.

- Street-involved youth are struggling with poverty, homelessness and addiction
- They are there because of severe life circumstances
- They are tired of being blamed for their lives
- Many have faced multiple types of abuse
- They “don’t fit” traditional models of youth servicing
- They are strong, are a community unto themselves, and deserve respect
- They want to have peer supports in place
- They want “one-stop-shopping” for supports and such supports must be youth centred (i.e. youth friendly, respecting of the specificities of their lives, etc)
- Youth in York Region are engaging in high-risk activities around drug use
- A peer education model was stated as the preferred intervention model
- Further and ongoing consultation with street-involved youth is needed
- Live via a daily impossible to-do list that virtually gets them no further ahead

They went on to answer specific questions:

*What is life like for youth living on the street in York Region?*

- Unsure
- Very day to day
- Something like living in the moment
- Everything is temporary
- Stranded
- 
- A life of fear
- Up all night in Tim Horton's
- Have to constantly worry about basic needs
- Transient life
- Have to protect what little they have with everything they have
- Safety is a huge issue for them
- Police treat youth as a homogeneous group
- Very few safe spaces
- They are treated based on assumptions
- It's a hustle for a lot of them – they don't know what's next
- Hypervigilant
- Friends can quickly become enemies
- Take what you can get
- Drug and alcohol use

*What leads to homelessness for York Region Youth?*

- Abuse
- Family tension
- Unloved
- They eventually crash
- Family conflict
- Drug/alcohol use
- Lack of recreation
- Little to do
- Step parent enters the picture
- Unstable home life –parents need help – more support for parents – structured parenting programs that are free, accessible, relevant and stigma free \*\*
- For some cultures living in York region, there is a stigma associated with going outside of the home – it's assumed that you can't handle it and the *shame* is big
- Parents often ship them away
- One great thing is that *Islamic* and *Muslim* services for youth came to Pathways
- Mental health is also stigma based “doesn't happen in our culture.”
- Huge waiting lists for mental health and this is a disincentive
- Not enough services
- “They come to us” and we're not enough\*\*
- We build relationship here

*What is the experience of being homeless on youth?*

- It's a hustle

- For every day health issues, they often don't have I.D.
- Dental is an ongoing problem
- They have to go to the Toronto Shout clinic

*Is being homeless differentially experienced by girls, boys, youth of colour, disabled, gay etc?*

- **Girls** have more opportunity to get rentals or stay with friends' parents
- Girls are more resourceful – they plan ahead
- “No one wants to see a girl on the street”  
Girls are more susceptible to sexual assault etc
- **Black Youth**
  - Pulled over for no reason
  - If a black or a Persian youth try to rent it's an automatic ‘no’
  - Racism has moved to the less overt – harder to name – more dangerous
- **Disabled Youth** – don't see them
- **Mentally Challenged** – don't see them
- **Younger Youth** – when you are 12 and under there are a lot of supports
- Very few services for youth 14-18 – some said 21
- Fall through the cracks
- The later in their teen years – the more trouble they have getting supports
- They scare people \*\*

*What needs to change?*

- Stigma – that youth are hoodlums
- People in charge need to do grass root observations on a regular basis or at the very least for a couple of days \*\*
- RECREATION
- A radical approach – a lot of these problems are when there is a breakdown in the home so we need
  - Better parent supports
  - Stop judging parents
  - Formalized parenting programs – in the community and schools. “It needs to be woven into the fabric of society and schools. Its like taking Ethics education out of universities and then we see Enron happen” \*\*
  - -Parents don't have the tools, no background
  - -Parents are falling down right now – its hard to watch it

We need to stop judging parents. After all, who's a parent?

“We're all parents... It's all our responsibilities.

The butcher, the pharmacist, the teacher, the preacher –  
we're all raising the kids.

We have to stop being a bunch of individuals.

It's time to know your neighbour”

Service Provider, York Region

***“If a miracle happened and all the problems that youth who are homeless or who are forced to sleep rough were eliminated, what would York Region look like?”***

- **safety**
- needs are taken care of
- stability and support
- certainty \*\* - next meal, a bed, a future
- sensitivity training about youth. One provider stated that some of this is inevitable so we need to be prepared to catch them.
- Reduction in the accessibility of mind blowing drugs
- RECREATION- free and inviting to *all* youth

We need to take a whole person point of view when working with issues – address the whole person or else it will perpetuate itself. Services for youth need to be holistic and cover all issues. We need to create safe spaces for youth and parents .One particular focus group yielded a profound realization of the actual lived “to do” lists of homeless youth in York region. We’ve tried to capture it here, but we realize it is incomplete

**TO-DO LIST FOR  
YORK REGION  
HOMELESS YOUTH**

- **food**
- **food for dog**
- **shelter**
- **place to sleep**
- **place to hide**
- **shower**
- **community service hours**
- **transportation**
- **work**
- **money**
- **a way to matter – to someone**
- **a need to belong**
- **to count**

## **Discussion**

### **Introduction: Holding another in our hands**

Holding another person’s life in one’s hand, endows this metaphor with a certain emotional power that we have the power to determine the direction of something in another person’s life. We’re to a large extent inescapably dependent upon one another. We are mutually and in a most immediate sense in one another’s power

Knud Logstrup, philosopher

Danish philosopher Knud Logstrup reminds us that we “hold another in our hands,” and in this way we find our ethical responsibilities. He states that our existence demands that we protect the life of the person who lays him or herself open to us and puts themselves into our hands.

~~The health of Canadian youth lies in our hands and, while it may seem a tall order, the United~~



Nations Convention on the Rights of the Child (UNCRC) is a beacon that can surely guide us in our policies and practice concerning youth homelessness in York Region.

The biggest barrier facing homeless youth in York Region is the palpable notion of NIMBY, i.e. “not in my backyard.” Somehow, some residents believe that because of the general socioeconomic status of *most* residents in the region, and because of the huge development occurring in the region, that families have money and therefore there will be no homeless “problem”. The problem with this assumption is that homeless becomes equated with income and this is a myth. Homelessness can originate from *Anybody’s Couch*, and this is an attitudinal shift that is urgent.

Secondly the labels associated with youth and parents of youth that are homeless are harmful, erroneous and based on flawed assumptions. There exists still a belief that there are “those people”, and then “all of the rest of us”. This creates a barrier, in service delivery, in the funding provided to services that *want* to and are skilled at youth centered outreach, and never really allows a region to address homeless from its core antecedents.

Affordable housing in York Region is extremely limited. Youth who are homeless, who are trying to go to school, work and live on their own face ageist assumptions that prevent them from securing sustainable housing. Social assistance programs do not adequately assist youth to “get back on their feet” – and it is not for lack of trying on the part of the region’s welfare professionals. There is urgent policy change needed, starting with the need for a separate fund *specifically* for homeless youth.

York Region boasts incredible “pockets of provision” for de-housed and marginalized youth. There needs to be a coordinated mechanism between these pockets – and within that mechanism there is an urgent need for sustainable funding so that the region’s providers can develop long term plans that work at all levels of the homeless spectrum: from causes, to youth at risk, to youth who are experiencing homelessness, to youth-centered programming that enables youth to become educated, employed and regain their footing, dignity, identity and right to belong.

Homelessness in York Region while surprising to some, who define risk for homelessness as directly related to the richness of a region, is inarguably inevitable in a society that privileges some at the expense of others. Youth homelessness is correlated with many factors and not only socioeconomic status. Therefore, developing strong social services through sustainable funding is a must Sustainable funding would not only treat the homeless with dignity and meaningful programming, but also enable them (us) to prevent homelessness in the first place.

There is a clear link between the social determinants of health (Raphael 2004), the pre-requisites to health as outlined by the Ottawa Charter for health promotion (WHO 1986), and the United Nations Convention on the Rights of children (United Nations 1986). These three documents are sanctioned and ratified by Canada. They are non-negotiable. Upon reflection of the emerging themes that have been gleaned from the interviews/focus groups with youth, parents and service providers, what has become clear, is that the life of a homeless youth starts out and lives out with *these pre requisites and rights breached*. Table 1.0 draws parallels

between the determinants of health, components of Quality of Life (QOL) (Labonte 1998) and the United Nations Convention on the Rights of Children.

**Table 1.0 Homeless Youth Health and the UNCRC: The direct relationship**

Based on Labonte, , Raphael, the Ottawa Charter for Health Promotion, and the Population Health Model

<b>Determinants Of Health/QOL</b>	<b>Relevant Articles from the UNCRC</b>
<b>Food, Water Shelter</b>	24 (c) – The right to adequate nutrition, clean drinking water; 24(d)- The right to give all segments of society basic knowledge of nutrition
<b>Stable Ecosystem</b>	24(4) The right to protection from environmental toxins
<b>Autonomy</b>	12 – The views of children and youth must be heard and given due weight;
<b>Choice</b>	13 – Freedom of expression; 8 – The right to preserve one’s identity
<b>Safety/Peace</b>	17- The right to access information 12 – The views of children and youth must be heard and given due weight
<b>Dignity</b>	2 - The right to be free from any form of discrimination (all protection rights) 20- The right to be protected by the state 19- The right to protection from abuse, neglect, punishment and mental violence
<b>Equity</b>	7- The right to a name, and nationality; 16- The right to privacy
<b>Freedom</b>	42- The right to these rights and to their widespread dissemination 4- The right to enact the UNCRC administratively and legislatively
<b>Belonging</b>	
<b>Purpose</b>	31- The right to freedom from work; freedom of thought, conscience, religion
<b>Being</b>	1-The right to be a child; 42 The right to these rights  15- Freedom of association;
	28/29- The right to education

**Connectedness**

24- The right to health  
 26/27- The right to social security and an adequate standard of living for the child's physical, mental, moral and social development

**Being Loved****Receiving**

7- The right to be cared for by their parents (if safe); 18- State parties must render appropriate assistance to parents in the performance of their child-rearing responsibilities; 30 The right to enjoy one's culture, religion or language

**Becoming****Social Justice**

3- The best interests of the child are always to be factored into decisions/policies  
 6- The right to survival and development; The entire UNCRC  
 24- The right to accessible health care; 28/29; (All provision rights)  
 6- The right to survival and development; 24 – The right to enjoy the highest attainable standard of health possible; 31- The right to rest, leisure and play  
 The entire UNCRC

## Preliminary Recommendations

The path is the goal.  
 If there's any possibility for enlightenment,  
 it's right now, not at some future time.  
 Now is the time.  
 This very moment is the perfect teacher.  
 Pema Chodron, *When Things Fall Apart*

- Strengthen opportunities for street involved youth, parents, service providers, local and regional governments to *collectively* develop strategies to promote the health and wellbeing of youth in York Region. The Alliance to End Homelessness is one such organization that is already structured to be a conduit in bringing key informants and stakeholders together. Thus the alliance requires financial sustainability to fulfill this key role.
- Offer multiple services- “one stop shopping”, in various regional locations to increase accessibility.
- Increase the number of accessible emergency, transitional and supportive housing for youth *throughout* the region and particularly for females.
- Increase the number of supportive, affordable and timely services to families under stress.
- Provide accessible and affordable recreational opportunities for homeless and street involved youth
- Develop strategies to increase positive engagement between youth and police services
- Further develop innovative and flexible programs for youth to participate in the educational/job skills systems.

- Implement innovative outreach programs to youth based on harm reduction, peer education models.
- **Immediate** establishment of a shelter for girls, young women, women and trans women
- Establishment of sustainably funded street outreach workers in sufficient numbers to service all areas of the region.
- Youth centers throughout the region modeled similarly to the Newmarket Youth and Recreation Centre - attached to the strong department of Recreation. This is critical.
- Establishment of an overarching York Region *Youth Net* Chapter
- Strengthening of the York Region Alliance to End Homelessness - financial sustainability *plus* assurances that the alliance advises Regional Council regarding housing, transportation, and other issues associated with the Region's homeless populations

## Sources Consulted

Advisory Forum on Children, Youth and Children & York Region Human Services Planning Coalition. (2004). *Our Children: A Preliminary Status Report on York Region's Children*. Newmarket, Ontario: Human Services Planning Branch.

Butterfield, P. (1993). "Thinking upstream: Conceptualizing health from a population perspective", In P.G. Butterfield, *Community Health Nursing: Promoting the health of aggregates*. Boston: W.B. Saunders, pp. 68-80

Cameron, K., Racine, Y. and Offord, D. (2003). *Youth Homelessness in the 905: An Evaluation of the Services at Pathway's Home Base Youth Drop-In Centre*. Hamilton: McMaster University

Campaign 2000, "Decision time for Canada: Let's make poverty history. A 2005 report card on Child Poverty in Canada. Available from <http://www.campaign2000.ca/rc/> Accessed June 1<sup>st</sup>, 2006

Canadian Coalition for the Rights of Children (2002). *Health Care and the United Nations Convention on the Rights of the Child*. Ottawa: Canadian Coalition for the Rights of Children.

Canadian Pediatric Society, "Hold Summit for Aboriginal Kids, Mercredi says", *CPS News*, September/October, 1999.

Canadian Coalition for the Rights of Children (2002). *Health Care and the United Nations Convention on the Rights of the Child*. Ottawa: Canadian Coalition for the Rights of Children.

Crosslinks Housing and Support Services (1999) *Out of the Cold: A Report on Outreach to the Homeless in York Region*. Prepared by Anglican Houses, Crosslinks Housing and Support Services Program. April 1999. Aurora, Ontario.

Knud Logstrup (1997). *The Ethical Demand*. Notre Dame, University of Notre Dame Press, 1997, p. 18.

Labonte, R. (1998). "Exploring Health:," In *ParticipACTION*. Centre for Health Promotion, University of Toronto, pp 15-20.

Raphael, D. (2004). "Introduction to the Social Determinants of Health," in Dennis Raphael, ed., *Social Determinants of Health: Canadian Perspectives*. Toronto: Canadian Scholars Press, p 85.

United Nations (1986) *Convention on the Rights of the Child*. Geneva: United Nations.

World Health Organization (1986). *Ottawa Charter for Health Promotion*. Geneva: WHO.

York Region Homelessness Task Force Report (2000). *From Awareness to Action: Responding to Homelessness in York Region*. York Region Community Services and Housing Department, September 2000, Newmarket, Ontario.

York Region Youth Strategy Task Force, (2002). *A Call to Action*. Presented to The Human Services Planning Coalition of York Region, November, 2002, Newmarket, Ontario

UNCRC in Child Friendly Terms  
Compiled by Dr. Cheryl van Daalen-Smith, RN, PhD

**Article 1**

Everyone under 18 has these **rights**.

**Article 2**

All children have these , no matter who they are, where they live, what their parents do, what language they speak, what their religion is, whether they are a boy or girl, what their culture is, whether they have a disability, whether they are rich or poor. No **child** should be treated unfairly on any basis.

**Article 3**

All adults should do what is best for you. When adults make decisions, they should think about how their decisions will affect children.

**Article 4**

The government has a responsibility to make sure you are protected. They must help your family to protect you and create an environment where you can grow and reach your potential.

**Article 5**

Your family has the responsibility to help you learn to exercise your , and to ensure that your are protected.

**Article 6**

You have the right to be alive.

**Article 7**

You have the right to a name, and this should be officially recognized by the government. You have the right to a nationality (to belong to a country).

**Article 8**

You have the right to an identity – an official record of who you are. No **one** should take this away from you.

**Article 9**

You have the right to live with your parent(s), unless it is bad for you. You have the right to live with a family who cares for you.

**Article 10**

If you live in a different country than your parents do, you have the right to be together in the same place.

**Article 11**

You have the right to be protected from kidnapping.

**Article 12**

You have the right to give your opinion, and for adults to listen and take it seriously.

**Article 13**

You have the right to find out things and share what you think with others, by talking, drawing, writing or in any other way unless it harms or offends other people.

**Article 14**

You have the right to choose your own religion and beliefs. Your parents should help you decide what is right and wrong, and what is best for you.

**Article 15**

You have the right to choose your own friends and join or set up groups, as long as it isn't harmful to others.

**Article 16**

You have the right to privacy.

**Article 17**

You have the right to get information that is important to your well-being, from radio, newspaper, books, computers and other sources. Adults should make sure that the information you are getting is not harmful, and help you find and understand the information you need.

**Article 18**

You have the right to be raised by your parent(s) if possible.

**Article 19**

You have the right to be protected from being hurt and mistreated, in body or mind.

**Article 20**

You have the right to special care and help if you cannot live with your parents.

**Article 21**

You have the right to care and protection if you are adopted or in foster care.

**Article 22**

You have the right to special protection and help if you are a refugee (if you have been forced to leave your home and live in another country), as well as all the in this Convention.

**Article 23**

You have the right to special education and care if you have a disability, as well as all the in this Convention, so that you can live a full life.

**Article 24**

You have the right to the best health care possible, safe water to drink, nutritious food, a clean and safe environment, and information to help you stay well.

**Article 25**

If you live in care or in other situations away from home, you have the right to have these living arrangements looked at regularly to see if they are the most appropriate.

**Article 26**

You have the right to help from the government if you are poor or in need.

**Article 27**

You have the right to food, clothing, a safe place to live and to have your basic needs met. You should not be disadvantaged so that you can't do many of the things other kids can do.

**Article 28**

You have the right to a good quality education. You should be encouraged to go to school to the highest level you can.

**Article 29**

Your education should help you use and develop your talents and abilities. It should also help you learn to live peacefully, protect the environment and respect other people.

**Article 30**

You have the right to practice your own culture, language and religion - or any you choose. Minority and indigenous groups need special protection of this right.

**Article 31**

You have the right to play and rest.

**Article 32**

You have the right to protection from work that harms you, and is bad for your health and education. If you work, you have the right to be safe and paid fairly.

**Article 33**

You have the right to protection from harmful drugs and from the drug trade.

**Article 34**

You have the right to be free from sexual abuse.

**Article 35**

No **one** is allowed to kidnap or sell you.

**Article 36**

You have the right to protection from any kind of exploitation (being taken advantage of).

**Article 37**

No **one** is allowed to punish you in a cruel or harmful way.

**Article 38**

You have the right to protection and freedom from war. Children under 15 cannot be forced to go into the army or take part in war.

**Article 39**

You have the right to help if you've been hurt, neglected or badly treated.

**Article 40**

You have the right to legal help and fair treatment in the justice system that respects your

**Article 41**

If the laws of your country provide better protection of your than the articles in this Convention, those laws should apply.

**Article 42**

You have the right to know your rights! Adults should know about these and help you learn about them, too.

**Articles 43 to 54**

These articles explain how governments and international organizations like UNICEF will work to ensure children are protected with their rights.

For more information see  
[www.rightsofchildren.ca](http://www.rightsofchildren.ca)  
[www.unicef.ca](http://www.unicef.ca)