LANDMARK REPORT

Solving Canada's Homelessness Crisis Starts Here:

Why Preventing Youth Homelessness Is Critical and How to Do it Effectively

OCTOBER 2026

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A WAY HOME VERS UN CHEZ-SOI CANADA

canadian observatory on homelessness

MAKING THE SHIFT INC

> "Ending youth homelessness is within reach. Canada already has the evidence and the tools. What's needed now is the investment to bring prevention to scale." - ***DR. STEPHEN GAETZ***

TABLE OF CONTENTS

How to Use This Report and the Brief Series ____ 3

Executive Summary ____ 4

1. What Is Youth Homelessness Prevention? ____ 6

2. Why Youth Homelessness Demands Urgent Action ____ 8

3. Prevention Pays Off: The Economic Case ____ 14

4. The Principles That Guide Effective Prevention ____ 19

5. Four Evidence-Based Program Models ____ 21

6. Taking Prevention to Scale ____ 35

7. Reconciliation, Equity, and Prevention ____ 39

8. Conclusion: Prevention Is a Policy Choice ____ 42

References ____ 44

How to cite this document:
Gaetz, S., Bonakdar, A., Vasko, S., Sohn, J., Buchnea, A., McCagherty, T. & Drammeh, P.S. (2026). *Solving Canada's Homelessness Crisis Starts Here: Why Preventing Youth Homelessness is Critical and How to Do it Effectively.* The Canadian Observatory on Homelessness Press.

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Acknowledgements

This brief series and synthesis report would not have been possible without the dedicated contributions of the Canadian Observatory on Homelessness, A Way Home Canada, and Housing, Infrastructure and Communities Canada teams, and the young people who participated in our Making the Shift Demonstration Lab projects, whose participation made this evidence possible.

The ideas, views and opinions in this publication belong to the author(s). They may not reflect those of the Government of Canada.

This project is funded by the Government of Canada.

Financé par le gouvernement du Canada.

Canada

How to Use This Report and the Brief Series

This report synthesizes the key findings of a 24-brief policy series on the prevention of youth homelessness in Canada, developed by A Way Home Canada and the Canadian Observatory on Homelessness. It is meant for policy-makers, funders, and service providers who want a comprehensive overview of the evidence and the case for action.

Each section of this report draws on one or more of the individual briefs, which contain the full evidence base, data tables, and methodological details behind every finding summarized here. Readers who want to go deeper on any topic, model, or recommendation will find what they need in the brief series. All 24 briefs are available at **homelesshub.ca/collection/prevention**.

Foundations

Brief 1 ▸ Definition: *The Prevention of Homelessness*

Brief 2 ▸ Definition: *Youth Homelessness Prevention*

BRIEF 3 ▸ Towards Shared Commitments and Core Principles for Youth Homelessness Prevention

BRIEF 4 ▸ Why We Must Prioritize Youth Homelessness Prevention

BRIEF 5 ▸ Homeless Before 16: *Addressing the Critical Needs of Youth with Early Homelessness Experiences*

BRIEF 6 ▸ How to Effectively Take Homelessness Prevention Innovation to Scale

BRIEF 7 ▸ Prevention Pays Off: *The Economic Case for Investing in Youth Homelessness Prevention*

BRIEF 8 ▸ Upstream Canada: *The Economic Case for School-Based Youth Homelessness Prevention*

Housing First for Youth

BRIEF 9 ▸ Housing First for Youth: *A Rights-Based Model for Preventing and Ending Youth Homelessness*

BRIEF 10 ▸ Housing First for Youth: *What a Three-Year Study Tells Us About What Works*

BRIEF 11 ▸ Housing First for Youth: *What Young People Tell Us About What Works*

BRIEF 12 ▸ Housing First for Youth: *Delivering the Model with Fidelity and Equity*

Family and Natural Supports

BRIEF 13 ▸ Family and Natural Supports: *Strengthening Relationships as a Pathway Out of Homelessness*

BRIEF 14 ▸ Family and Natural Supports: *Evidence from a Six-Month Outcomes Study*

BRIEF 15 ▸ Family and Natural Supports: *What We Heard About What Works*

BRIEF 16 ▸ Family and Natural Supports: *What Frontline Delivery Tells Us About Effective Implementation*

Reconnect

BRIEF 17 ▸ Reconnect: *A School-Based Early Intervention to Prevent Youth Homelessness*

BRIEF 18 ▸ Reconnect: *Evidence from School-Based Early Intervention Programs in Canada and Australia*

BRIEF 19 ▸ Reconnect: *What Young People Tell Us About Support, Connection, and Stability*

BRIEF 20 ▸ Reconnect: *Using Developmental Evaluation to Protect Fidelity and Strengthen Prevention*

Upstream Canada

BRIEF 21 ▸ Upstream Canada: *Preventing Youth Homelessness and School Disengagement Through Early Intervention*

BRIEF 22 ▸ Upstream Canada: *Evidence from Universal School-Based Screening*

BRIEF 23 ▸ Upstream Canada: *What Students, Families, and Educators Tell Us About What Works*

BRIEF 24 ▸ Upstream Canada: *Youth Homelessness Prevention That Works — Lessons from Developmental Evaluation*

Executive Summary

Youth homelessness in Canada is not inevitable. It is preventable—and Canada can no longer absorb the cost of not preventing it.

Each year, at least 35,000 young people experience homelessness.[1] Nearly half of all currently homeless Canadians had their first experience of homelessness before age 25,[2] and the earlier homelessness begins, the more likely it is to become chronic and lifelong.[3,4,5] Yet, most communities have no services designed for young people under 16,[6,7] the age at which over 40% of homeless youth first leave home.[1] Most public investment continues to flow into emergency services that manage the consequences of homelessness rather than stopping it from occurring in the first place.

Youth homelessness is not simply a subset of the broader problem of homelessness. It is the entry point. Research shows that hope about the future declines measurably after just one year of homelessness,[8] that 74% of homeless youth are already chronically homeless,[2] and that chronic homelessness rates were higher among those who first experienced homelessness before age 18 (87%). Without intervention, the trajectory from youth homelessness to chronic adult homelessness is nearly inevitable.[9,10] It is critical to act early when that trajectory can be fundamentally changed.

The good news is that we already have the knowledge, the tools, and the evidence-based program models to change course. This synthesis report draws on a **24-brief policy series** to make that case. The foundational briefs establish that prevention is a human rights imperative, a fiscal responsibility, and a developmental emergency.

The program briefs demonstrate that prevention works: four models—**Housing First for Youth (HF4Y)**, **Family and Natural Supports (FNS)**, **Reconnect**, and **Upstream Canada**—are delivering measurable results across Canada and beyond. Together, these program models address different points in the prevention continuum, from school-based early identification before homelessness occurs to relationship-building that addresses root causes and immediate housing with wraparound support for those already homeless. They form a system capable of preventing homelessness at every stage. The evidence also shows what it takes to bring that system to scale by identifying nine key conditions that determine whether scaling succeeds or fails, and what governments must do to meet them.

> *Youth homelessness is not simply a subset of the broader problem of homelessness.* ***It is the entry point.***

Before the Age of 16

40%

of youth had their first experience with homelessness[1]

Before the Age of 25

47%

of all homeless adults had their first experience with homelessness[2]

In Canada

74%

of homeless youth are already chronically homeless[2]

The Scale of the Problem

Only about **18% of permanent emergency shelters in Canada were designated for youth** (106 of 587 shelters), with youth-specific beds accounting for just 7% of total emergency shelter capacity.[11]

The Cost of Inaction

Emergency shelter costs four times more than FNS—and there is no evidence that this leads to a lasting resolution of their homelessness.[12]

Prevention programs cost only a fraction of the current crisis responses. FNS costs just $36 per day[12] per young person, compared to at least $134 for emergency shelter,[14] $807 for youth detention,[15] and up to $1,349 for group homes for youth with more complex needs[16]—and FNS achieves housing stability rates that crisis services cannot match. Indigenous, Black, 2SLGBTQI+, and racialized youth are most affected by homelessness and most likely to be missed by referral-based, crisis-driven systems.[1,3,17,18] Prevention that does not centre equity will replicate the disparities it is meant to address.[19]

Given the growth in understanding of evidence-based interventions, the question is no longer whether prevention works. It is whether governments will choose to fund it at the level the problem demands. **Prevention works when it is implemented as designed and funded to scale.** This report sets out exactly what that requires and what the evidence shows becomes possible when those conditions are met.

PREVENTION WORKS

HF4Y programs show a 93.3% housing stability rate after two years,[13] and FNS programs lead to a 65% reduction in shelter use.[39]

FNS returns $6.70 and HF4Y $4 for every $1 invested over 30 years.[12] Upstream Canada returns $6.36 over 20 years.[100]

1. What Is Youth Homelessness Prevention?

Preventing youth homelessness requires a life-course approach that ***supports young people's health and well-being.***

Across Canada, homelessness has long been treated as a crisis to be managed rather than a problem to be solved.

Most public investment flows into emergency shelters, day programs, and policing responses that address suffering after homelessness occurs.[20] This is important, sometimes lifesaving work, but it does little to stop homelessness from arising in the first place.

The prevention of youth homelessness refers to housing-led, developmentally appropriate policies, practices, and interventions that stabilize housing, support well-being, enhance social inclusion, strengthen family and natural supports, and keep youth connected to community, education, and employment.[21,22]

Drawing on a PUBLIC HEALTH FRAMEWORK, prevention includes:

Primary Prevention: Reduce inflows into youth homelessness through early intervention—in other words, working upstream to stop people from becoming homeless in the first place.

Secondary Prevention: Reduce the likelihood that those who are at imminent risk of homelessness or who have recently become homeless transition to long-term or chronic homelessness.[i]

Tertiary Prevention: Providing housing-led supports to help people exit homelessness while reducing the likelihood that they return to it.

Preventing youth homelessness requires a life-course approach that supports young people's health and well-being. Improving access to housing is essential, but housing alone is not enough.[23,24,25]

i. The Government of Canada's definition of chronic homelessness refers to individuals who are currently experiencing homelessness and who meet at least one of the following criteria: 1) They have experienced a total of at least 6 months (180 days) of homelessness over the past year, and 2) They have recurrent experiences of homelessness over the past 3 years with a cumulative duration of at least 18 months (546 days).

Effective prevention strengthens family and community connections and ensures youth have supportive adults (kin and non-kin) to help them transition to adulthood.[20,26] Prevention efforts must be individualized, choice-based, and timely, enabling youth to maintain housing, stay in school, find employment, and build healthy relationships.

It is critical to distinguish what prevention is not. Emergency services such as shelters, food programs, day services, and crisis supports are vital and lifesaving, but they are not prevention. A person can receive all of these services and remain homeless.[20] Prevention directly interrupts or prevents the occurrence of homelessness altogether.

A Typology of Prevention Activities

Preventing youth homelessness requires coordinated action across systems. The typology below outlines five interconnected components and clarifies what prevention looks like, when it should occur, and who holds responsibility. **Prevention requires coordinated action across all five types, with responsibility shared among all orders of government, public institutions, and community organizations.**[22]

TYPOLOGY of Youth Homelessness Prevention

Structural Prevention: Addresses root causes: poverty, racism, colonialism, housing unaffordability, and social exclusion. Requires coordinated government action and rights-based legislation.

Systems Prevention: Ensures public institutions (healthcare, corrections, child welfare, education) do not contribute to homelessness through inadequate discharge planning, discrim-inatory practices, or eligibility barriers.

Early Intervention: Targets people at immediate or emerging risk, aiming to resolve issues be-fore housing loss occurs through mediation, financial assistance, mental health supports, and case management.

Crisis Prevention: Supports those who have recently lost housing with rapid, housing-led responses including diversion, rapid rehousing, and direct cash transfers.

Housing Stabilization: Provides long-term support for those exiting homelessness through intensive case management, culturally grounded approaches, and flexible support tailored to different groups.

FOUNDATIONS ▸
See Brief #2 for the detailed typology of youth homelessness prevention.

2. Why Youth Homelessness Demands Urgent Action

Youth homelessness is not simply a subset of the broader homelessness problem.[27] It is the entry point, the moment at which the pathway to chronic, lifelong housing instability either opens or closes.[9,10] Preventing youth homelessness is therefore not only about supporting young people; it is the most effective strategy available for reducing homelessness across the lifespan.[28]

The Scale of the Problem

Youth aged 13 to 24 make up approximately 12% of Canada's homeless population, a rate comparable to their proportion of the general population.[3] This is likely an undercount, though, given that many communities lack the infrastructure to adequately identify and count young people experiencing homelessness.[7]

At least 35,000 young people experience homelessness each year.[1] Meanwhile, only about 18% of Canada's permanent emergency shelters were youth-designated (106 of 587 shelters), while youth-specific beds accounted for just 7% of total emergency shelter capacity, underscoring the limited availability of youth-focused crisis responses nationally.[11] The lack of youth-focused supports also indicates a lack of prioritization, which further complicates the scaling of effective and evidence-based preventive interventions for youth homelessness. Without youth-designed services in place, young people must access family or adult shelters or remain invisible as part of the "hidden homeless" population by staying temporarily with friends, in unsafe situations, or on the street.[3] **Without adequate services, data is not collected, which can create the false impression that the problem does not exist.**

> ***Youth aged 13 to 24 make up approximately 12% of Canada's*** *homeless population, a rate comparable to their proportion of the general population.*[3]

What the Experience of Youth Homelessness Actually Involves

What rarely gets talked about is the lived reality of young people moving through systems that are not designed to prevent the problem:

- 85.4% of homeless youth fall into the highest mental health risk category[1]
- 42% have attempted suicide[1]
- 35% have overdosed and required hospitalization[1]
- 1 in 5 youth across a 10-city Canadian study had been trafficked, mostly for sex—a direct consequence of the vulnerability, isolation, and survival pressures that homelessness creates[29,30]

These are the predictable outcomes of a system that waits for crisis before it acts. They are also the experiences that prevention can interrupt.

The Critical Importance of Age at First Experience

The age at which a young person first experiences homelessness profoundly shapes their life course. National point-in-time count data reveals that 47% of all currently homeless adults had their first experience of homelessness before age 25, when they were adolescents or young adults.[2] More strikingly, 40.1% of currently homeless youth first left home before age 16.[1]

THE IMPLICATIONS ARE STARK

The pathway into youth homelessness is rarely a single event.

Youth who first experience homelessness before age 16 are significantly more likely to:

- Experience multiple episodes of homelessness (86.7%)
- Be involved with child protection services (73.3%)
- Have greater mental health and addiction symptoms
- Be victims of crime, including sexual assault
- Attempt suicide
- Become chronically homeless[1]

The pathway into youth homelessness is rarely a single event. In the **Without a Home** national survey, only 24.1% of respondents reported being homeless just once, meaning 75.9% had experienced multiple episodes.[1] Among youth who first left home before age 16, the pattern is even more pronounced: 86.7% experienced multiple episodes, and of those, nearly half (49.8%) reported five or more episodes.[1] This is not a picture of young people navigating a brief crisis. It illustrates housing instability becoming entrenched before adulthood, which involves cycling through shelters, friends' couches, and unsafe situations with decreasing likelihood of exiting over time. Multiple episodes compound trauma, disrupt education, erode relationships, and progressively narrow the window for effective intervention.[9]

FOUNDATIONS ▸ *For the full data, including rates by identity group, see* **Brief #5**.

Behind the data on episodes and chronicity is something harder to measure but equally important: what **prolonged homelessness does to a young person's capacity to imagine a different future**. A qualitative study conducted with young people participating in the Making the Shift Housing First for Youth randomized controlled trial in Toronto and Ottawa found that young people's sense of hope about the future declines significantly after just one year of experiencing homelessness.[8] This is not because they stop wanting stability, but because instability has become the norm for them. Youth who had been without stable housing for extended periods struggled to imagine what an ideal home, or a different future, would even look like. Every year a young person spends without stable housing is a year of developmental capacity and future orientation that cannot be fully recovered. This is an argument not just for better programs, but for earlier, faster access to them.

HOUSING FIRST FOR YOUTH ▸ *For qualitative evidence from young people themselves on what housing stability makes possible, and what losing it takes away, see* **Brief #11**.

The HF4Y study found that, at 12 months, HF4Y participants were stably housed at a rate 27.7 percentage points higher than those receiving standard services, evidence that earlier access to the right intervention produces meaningfully different outcomes.

Chronic Homelessness Begins Young

The extent of chronic homelessness among young people is often underestimated, in part because youth are often assumed to be at the beginning of a housing crisis rather than already entrenched in one. National shelter data tells a different story. As **TABLE 1** shows, 74% of youth experiencing homelessness are already chronically homeless. While this rate is lower than for older adults in absolute terms, it is striking given how little time young people have had to accumulate the episodes that define chronicity. For many, the pathway to chronic homelessness is extraordinarily fast.

TABLE 1. Prevalence of Chronic Homelessness Among Specific Populations in 2024[2]

Age	Acute chronicity	Combined chronic	Prolonged instability	Overall chronic
YOUTH (13-24)	26.5%	37.6%	9.8%	**74.0%**
ADULT (25-49)	21.8%	54.2%	8.0%	83.9%
OLDER ADULT (50-64)	20.3%	54.8%	8.4%	83.5%
SENIOR (65+)	23.2%	47.9%	7.1%	78.1%

Earlier experiences of homelessness are associated with greater chronicity across all age groups: 87% of those who first experience homelessness before age 18 are now chronically homeless, compared to 83% at ages 18–24, 81% at 25–49, 78% at 50–64, and 68% after age 65.[2] Notably, those with child welfare histories are much more likely to experience acute chronicity (79%) than those without care involvement (73%).[2]

FOUNDATIONS ▸ *For a full breakdown, including subcategories of chronic homelessness, see* **Brief #4**.

When Chronic Homelessness Begins in Adolescence, Public Costs Multiply

The earlier a person's first experience of homelessness, the more public costs increase. When chronic homelessness begins in adolescence or early adulthood, the long-term fiscal implications multiply in ways that are distinct from adult-onset chronicity: [5,9]

- Health and mental health deterioration begin at a younger age, compounding over more years
- Educational attainment is disrupted at its most critical stage, reducing lifetime earnings and tax revenue
- Labour force attachment weakens before it is fully established
- Justice system involvement increases and tends to begin earlier
- Income assistance dependency begins sooner and lasts longer
- Engagement with health and mental health services intensifies across the life course

These are all cascading consequences of a single, preventable situation. Intervening before chronic homelessness takes hold is not only more humane; it is the point at which public investment produces the greatest return.

FOUNDATIONS ▸ *See* **Brief #4** *for the full evidence base underpinning these findings.*

Disparities by Identity

Youth homelessness **RISK IS NOT** evenly distributed.

Indigenous, 2SLGBTQI+, Black, and racialized youth are disproportionately represented:

- **2SLGBTQI+ youth:** 46.7% became homeless before age 16, compared to 37.1% of hetero-sexual youth
- **Transgender and gender non-binary youth:** 49.2% became homeless before age 16
- **Indigenous youth:** 45% experienced their first homelessness before age 16[1]

These disparities are not incidental. They reflect the accumulated effects of colonialism, systemic racism, family rejection, and discrimination, forces that push certain young people toward homelessness earlier and make it harder to exit.[31,32]

The child welfare system is a critical intersection point. Only 0.3% of Canadian youth have ever had any involvement with child protection services, yet 58% of currently homeless youth have been in care, and nearly half (47.2%) have a history of foster care or group home placements.[1,33] Among youth who first experienced homelessness before age 16, that figure rises to 73.3%. And 75% of those with care histories first experienced homelessness before age 16.[1] These are not coincidences. They reflect systemic failures in how child welfare manages transitions to independence, which the homelessness system is left to absorb.

Average Youth

0.3%

Canadian youth have ever had any involvement with child protection services.[34]

Currently Homeless Youth

58%

of currently homeless youth in Canada have been in care.[1]

IN ADDITION, ALMOST

1 in 2

currently homeless youth (47.2%) have a history of foster care or group home placements.[1]

It is also important to understand what is driving young people out of their homes in the first place. While "family conflict" is the most commonly cited reason,[27] that framing understates what many youth are actually experiencing. In the **Without a Home** national survey, 63.1% of respondents identified abusive relationships, including physical, sexual, and emotional abuse and neglect, as a key factor in their homelessness. For youth who first left home before age 16, abuse and violence were significantly more likely to be cited than for older youth, factors which were often combined with parental mental health problems and addiction. Preventing homelessness for this group requires a response that takes abuse seriously as a cause.

The Legal Gap: Who Is Responsible for Youth Under 16?

While some crisis intervention and outreach programs may serve youth under 16, no Canadian communities have dedicated services or homelessness response strategies designed for youth under the age of 16. This gap exists partly because these young people are assumed to fall under child welfare's mandate.

However, child protection is a provincial and territorial responsibility in Canada, and legislation varies considerably across jurisdictions.[34] In some circumstances, provincial or territorial systems can intervene when unsafe housing or family circumstances put children at risk. But no province's core child protection statute explicitly identifies homelessness alone as grounds for mandatory in-tervention. The statutory duty turns on whether a child is "in need of protection," which is generally understood to include neglect, abandonment, or danger to health and safety. If a young person is without housing due to family conflict, but is not being neglected or abused, many provincial laws do not require mandatory child protection intervention.

The result is a population that falls between two systems. Child welfare may not be required to act; youth homelessness services typically begin at age 16 or 18; and in the rare communities where school-based programs like Reconnect and Upstream Canada exist, they represent the only point where someone is positioned to identify and respond to this age group before crisis occurs. In most Canadian communities, no such program exists at all. Closing this gap requires explicit legislative and funding action—both to mandate that someone is responsible for youth under 16 and to fund the school-based early intervention infrastructure that makes identification and response possible at scale.

FOUNDATIONS ▸ *See* **Brief #5** *for a full analysis of the child protection mandate and its limitations across provincial and territorial jurisdictions.*

3. Prevention Pays Off: The Economic Case

The case for prevention is not just about doing what's right; it is also fiscally responsible. Canada's current approach to youth homelessness is extraordinarily expensive, and it produces poor outcomes. Crisis responses cycle young people through systems that are costly, traumatizing, and provide no lasting solution.[35]

The Cost of Crisis vs. the Cost of Prevention[ii]

CRISIS RESPONSES—Higher Cost, No Housing Solution

Approach	Daily	Monthly	Annual	OUTCOME	PATHWAY TO CHRONICITY
Hospital (Inpatient)[36]	$1,142	$34,736	**$416,830**	***74%** of currently homeless youth are already chronically homeless*[2]	
Provincial Youth Prison[15]	$807[iii]	$24,546	**$294,555**	These services are not designed to end homelessness. Prolonged exposure leads to greater dependence on crisis supports, further entrenchment, and eventually chronic homelessness.	
Group Home[37]	$354[iv]	$10,767	**$129,210**		
Hotel Shelter[38]	$281	$8,547	**$102,565**		
Emergency Shelter[14]	$134	$4,075	**$48,910**		

PREVENTATIVE INTERVENTIONS—Lower Cost, High Housing Retention

Approach	Daily	Monthly	Annual	OUTCOME	HIGH HOUSING RETENTION
Housing First for Youth (HF4Y)[39] approximately two-year intervention	$66	$2,004	$24,050	*Both HF4Y and FNS are designed to end homelessness, not manage it.*	
Family & Natural Supports (FNS)[40] approximately one-year intervention	$36	$1,100	$13,250	High post-intervention housing retention means young people are stably housed long after support ends.	

ii. Costs are adjusted to 2026 dollars using the Bank of Canada inflation calculator.
iii. Depending on the type of facility, daily costs per youth range from roughly $807 to $2,744 in Ontario (adjusted to 2026 dollars).
iv. As high as $1,349/day for youth with more complex needs who require a one-on-one worker (adjusted to 2026 dollars).

Prevention programs cost significantly less than crisis responses while delivering outcomes that crisis responses cannot match. The FNS program led to a **50% reduction** in conflict-related displacement and a **65% reduction** in shelter use by addressing the root cause of family conflict rather than managing its consequences.[39] HF4Y achieves **93.3% stability** at 24 months.[13] These are not temporary results: Both models are designed to end homelessness, not manage it, and high post-intervention housing retention means young people remain stably housed long after formal support ends.

But the economic costs of youth homelessness extend far beyond housing and shelter budgets. When a young person becomes homeless, the disruption to their education and employment generates losses that accumulate across an entire lifetime.

The **Without a Home** study found that 50.5% of homeless youth are not in employment, education, or training (NEET).[1] Among them, 65% have failed to complete high school, and 75.7% are currently unemployed.[1] These rates dramatically exceed the general youth population, where school dropout sits below 9% and youth unemployment at 13.3%.[1] Educational attainment is the strongest single predictor of lifetime earnings.[41] When attachment to education is undermined or disrupted during adolescence, the result is detachment from school and, in turn, reduced productivity, lower tax contributions, and higher public support costs across entire lifetimes. Importantly, 73.9% of homeless youth who dropped out of school want to return, but housing instability creates barriers that make re-engagement functionally impossible.[1] Prevention, by stabilizing housing at a critical developmental moment, protects educational pathways before they close.

Family and Natural Supports, which may include reconciliation, is particularly cost-effective for youth under 16. Child welfare placements, which are the typical response to family breakdown for this age group, cost an average of $129,200 annually for group homes, and specialized care can reach $490,000 per child.[37] FNS, which addresses the root cause, costs $13,250 annually.[40]

Family and Natural Supports

−50%

reduction in conflict-related displacement[39]

Family and Natural Supports

−65%

reduction in shelter use[39]

Housing First for Youth

+93.3%

stability at 24 months[13]

Modelling the Return on Investment

Formal return-on-investment modelling quantifies what these savings mean over time. Measured conservatively against the avoided cost of a young person remaining homeless, Family and Natural Supports returns approximately $6.70 for every dollar invested over a 30-year horizon, and Housing First for Youth returns approximately $4.00.

> Per 100 young people served, **this represents roughly $7.6 million in net public value for FNS and $14 million for HF4Y.**

Both programs repay their full cost within three years (at the central estimate): FNS pays for itself if just two young people in every 100 remain stably housed because of the program; HF4Y pays for itself if just seven in every 100 remain stably housed.

Upstream Canada's own modelling shows a similar pattern, returning approximately $6 for every dollar invested over 20 years (see "The Economic Case for Upstream Canada," Section 5).

The real value is higher than these figures show.

FOUNDATIONS ▸ *See Brief #7 for the full analysis.*

Family and Natural Supports

$6.70 : $1

return on investment over 30 years

Housing First for Youth

$4.00 : $1

return on investment over 30 years

Both programs pay for themselves within three years

— and FNS breaks even if just two young people in every 100 stay housed because of the support they receive.

Cross-Ministerial Savings: Why Siloed Budgets Are the Problem

Prevention programs save money across multiple systems simultaneously by reducing emergency department visits (health), police interactions and court appearances (justice), and emergency housing use (social services).[12,42] But under current funding structures, investment comes primarily from housing or homelessness budgets, while savings accrue elsewhere. This misalignment creates a structural barrier to investment in prevention.

The solution is strategic cross-ministerial investment frameworks that allow departments to share in the savings to encourage co-investment in prevention. Washington State provides a compelling international example of what this looks like in practice. Following the implementation of the Youth Homelessness Act (2015), the state established the Office of Homeless Youth, which leads a coordinated strategy emphasizing early identification, family reconciliation, and community-based prevention supports for youth aged 12 to 24. The approach is reinforced by Senate Bill 6560 (2018), which explicitly prohibits any publicly funded system, including child protection, juvenile justice, and health and behavioural health facilities, from discharging a young person into homelessness, ensuring planned transitions to stable housing and support.

Critically, the state treated prevention as infrastructure rather than as a pilot: Funding grew from $10 million to $90 million biennially over the course of implementation.[43] The results reflect that sustained commitment. Washington achieved a 40% reduction in youth homelessness between 2016 and 2022, with 75% of youth who found housing in 2020 remaining stably housed two years later.[43] More than 90% of youth who received immediate, flexible cash grants, which were provided to young people on the verge of homelessness, remained stably housed one year later.[43] A more recent study published by Johns Hopkins shows that when youth experiencing homelessness received a one-time cash payment, they exited homelessness within 6 months with 92% success rate.[44]

The lesson for Canada is not simply that prevention works, but that it works when governments treat it as a system-level investment rather than a program-level experiment.

SIX SYSTEMIC BARRIERS to Prevention

I. Crisis response dominates investment

II. Siloed budgets

III. Short budget cycles

IV. Path dependency

V. Capacity gaps

VI. Scaling innovation takes time

WHY Prevention Isn't Already Standard Practice

If prevention is more effective and less expensive than crisis response, why isn't it already standard practice?

Overcoming these barriers requires multi-year funding commitments, cross-ministerial investment frameworks, and leadership that is willing to prioritize long-term fiscal responsibility over short-term visibility.

FOUNDATIONS ▸ *See* Brief #7 *for the full analysis.*

Six systemic barriers explain the gap and point to where policy change is most needed:

Crisis response dominates investment. Emergency shelters, day programs, soup kitchens, and law enforcement continue to absorb the majority of homelessness funding, leaving little room for prevention, even where the will exists.

Siloed budgets. Prevention saves money across health, justice, social services, and education—but investment decisions are made in housing budgets alone. No single ministry captures the full benefit, so no single ministry has the incentive to bear the full cost.

Short budget cycles. Annual budget processes favour spending with immediate, visible results. The returns on prevention materialize over years, making them structurally invisible to the decision-makers who control the funding.

Path dependency. Existing crisis infrastructure creates institutional inertia. Organizations, workforces, and funding relationships are built around emergency response. Shifting resources to prevention requires dismantling established systems, not just adding new ones.

Capacity gaps. Communities lack the trained workforce, program infrastructure, and implementation supports needed to deliver prevention at scale. Funding prevention without also funding training and technical assistance produces compliance without quality.

Scaling innovation takes time. Even well-evidenced innovations take an average of 17 years to move from development to widespread adoption. Scaling prevention across diverse policy environments, organizational cultures, and community contexts is inherently complex. Without deliberate investment in the conditions that support them, even proven models stall at the pilot stage.[45]

4. The Principles That Guide Effective Prevention

Effective youth homelessness prevention requires a shared framework of values and approaches that cut across **policy, program design, and practice.** Below are three overarching commitments and six core principles that should guide all prevention efforts.[20,21]

Three Overarching COMMITMENTS to Guide all Prevention Efforts [19,21]

1. Grounded in Human Rights[v]
Homelessness is a violation of young people's rights. All prevention efforts must be grounded in a human rights framework.[46]

2. Cross-Systems Collaboration
No single sector can prevent youth homelessness alone. All public systems must share responsibility and be accountable for outcomes.[20,47]

3. Intersectional & Holistic Outcomes
Young people experience homelessness differently. Prevention must address intersecting inequities and measure success beyond housing status alone.[48,49]

v. This commitment draws on Canada's obligations under international human rights frameworks including the Convention on the Rights of the Child (CRC), the United Nations Declaration on the Rights of Indigenous Peoples (UNDRIP), the International Covenant on Civil and Political Rights (ICCPR), the International Covenant on Economic, Social and Cultural Rights (ICESCR), and the International Convention on the Elimination of All Forms of Racial Discrimination (ICERD).

These commitments and principles are the active ingredients on which the four program models described in the next section are built, and they are the ***standard against which their implementation should be measured.***

Six Core Principles for Youth Homelessness Prevention

These six principles are non-negotiable conditions for effective prevention:[20,22]

1. Timely access to adequate, age-appropriate housing with no preconditions[25,50]
Housing must be available rapidly, without conditions such as sobriety, school attendance, or employment. Young people should never be discharged from housing because of behaviour.

2. Youth choice, youth voice, and self-determination
Young people must control their own lives and contribute to decisions about housing and supports. Prevention approaches must create meaningful opportunities for youth with lived experience to inform design, implementation, and evaluation.

3. Positive youth development, recovery, and wellness orientation
Supports must build on strengths, not just address deficits. Recovery from trauma takes time, and timelines must reflect developmental reality.

4. Equitable and culturally appropriate supports[51]
No single program can prevent youth homelessness for all. Prevention must offer culturally appropriate options led by and for Indigenous, Black, racialized, and 2SLGBTQI+ communities.

5. Strengthening family and natural supports
Strong connections with meaningful adults are among the most protective factors available. Prevention must actively seek to strengthen youth's connections to family, chosen family, and other natural supports.

6. Individualized, flexible supports without time limits
Young people's needs are not identical and change over time. Effective supports adapt to each person's developmental stage, identity, and circumstances.

These commitments and principles are the active ingredients on which the four program models described in the next section are built, and they are the standard against which their implementation should be measured.

> **FOUNDATIONS** ▸ *See* **Brief #3**, *which provides the complete framework, including the evidence base for each principle, guidance on how they apply across different program models and policy contexts, and discussion of the equity and reconciliation dimensions of each commitment. It is essential reading for anyone designing, funding, or evaluating youth homelessness prevention efforts.*

5. Four Evidence-Based Program Models

***No single sector** can prevent youth homelessness alone.*

Canada has tested four evidence-based program models that operationalize youth homelessness prevention. **Each targets a specific point in the prevention continuum, and together, they form a comprehensive prevention system**.

All four models were piloted through **Making the Shift Youth Homelessness Social Innovation Lab**, jointly led by A Way Home Canada and the Canadian Observatory on Homelessness.

Housing First for Youth

BRIEFS 9–12 ▸ A rights-based model for young people aged 13–24 that provides immediate access to safe, stable housing alongside individualized, developmentally appropriate supports with no preconditions. HF4Y works after homelessness occurs, preventing the progression to chronic homelessness.

Family and Natural Supports

BRIEFS 13–16 ▸ The relational foundation of youth homelessness prevention. FNS strengthens, rebuilds, and sustains supportive relationships for young people at risk of homelessness, before crisis occurs. It operates as a standalone program, as embedded practice within youth-serving programs, and as a core component of Housing First for Youth, Reconnect, and Upstream Canada.

Reconnect

BRIEFS 17–20 ▸ A school-based early intervention model that partners community organizations with schools to identify young people at risk before homelessness occurs, particularly youth under 16, who are otherwise underserved by most community systems.

Upstream Canada

BRIEFS 21–24 ▸ A collaborative school-community model that uses universal screening (the Student Needs Assessment) to identify students aged 12–16 at risk of homelessness and school disengagement, and delivers coordinated, strengths-based supports before instability escalates.

Housing First for Youth (HF4Y)

HF4Y was developed in Canada as an adaptation of the well-established adult **Pathways Housing First model** and is grounded in the recognition that youth homelessness is fundamentally different from adult homelessness.[52,53] Young people need more than a roof; they need supports that align with their developmental stage. These supports must include addressing family conflict, reconnecting with supportive adults, staying in school, and building healthy, independent lives.

The "Zero Discharge Into Homelessness" Principle

No young person should permanently lose housing due to their behaviour. If housing is lost, caseworkers must actively support the youth to secure alternatives, treating the situation as an opportunity to understand what went wrong and find a better fit, not as grounds for discharge from the program. This principle is what separates a rights-based housing model from a compliance-based one, and it is a non-negotiable requirement for any program claiming fidelity to HF4Y.

FOUNDATIONS ▸ *See* **Brief #3** *for the full principle and its implications.*

THE HF4Y MODEL centres on six core principles

These principles are operational requirements. Programs that do not deliver on them are not delivering HF4Y.

I. A right to housing with no preconditions

II. Youth choice, voice, and self-determination

III. Positive youth development and wellness orientation

IV. Individualized, client-driven supports with no time limits

V. Social inclusion and community integration

VI. Enhancing family and natural supports

What the Evidence Shows

The strongest evidence for HF4Y comes from a three-year, randomized controlled study that tracked youth at Making the Shift demonstration sites in Toronto and Ottawa. Young people randomly assigned to HF4Y did significantly better than those who received standard community services.[54]

Housing stability

HF4Y participants spent on average 97% of their time in stable housing at 36 months, compared to 87.5% in the treatment-as-usual group. Critically, HF4Y achieved this stability faster. At 12 months, HF4Y participants spent 79.5% of their time on average in stable housing compared to only 51.8% in the treatment-as-usual group—a gap of 27.7 percentage points. This speed matters: the earlier a young person achieves stable housing, the less exposure they have to the compounding harms of homelessness and the narrower the window for chronic homelessness to take hold.

Physical health

HF4Y participants improved steadily, while treatment-as-usual participants declined, and this gap that widened over the three years.

Mental health

Both groups started at virtually identical levels; HF4Y participants improved steadily, while treatment-as-usual participants declined.

Substance use

HF4Y participants saw substantial reductions, while the comparison group showed modest increases.

Life skills

HF4Y participants made strong gains in housing management, money management, and resilience.

Social supports

HF4Y participants showed improvements in all dimensions—family, friends, significant others, and community.

Housing First for Youth

97%

of their time stably housed at 36 months.

Treatment as Usual

87.5%

of their time stably housed at 36 months.

DIFFERENCE AT 12 MONTHS

+27.7%

This speed matters.

The earlier a young person achieves stable housing:

- the less exposure they have to the compounding harms of homelessness

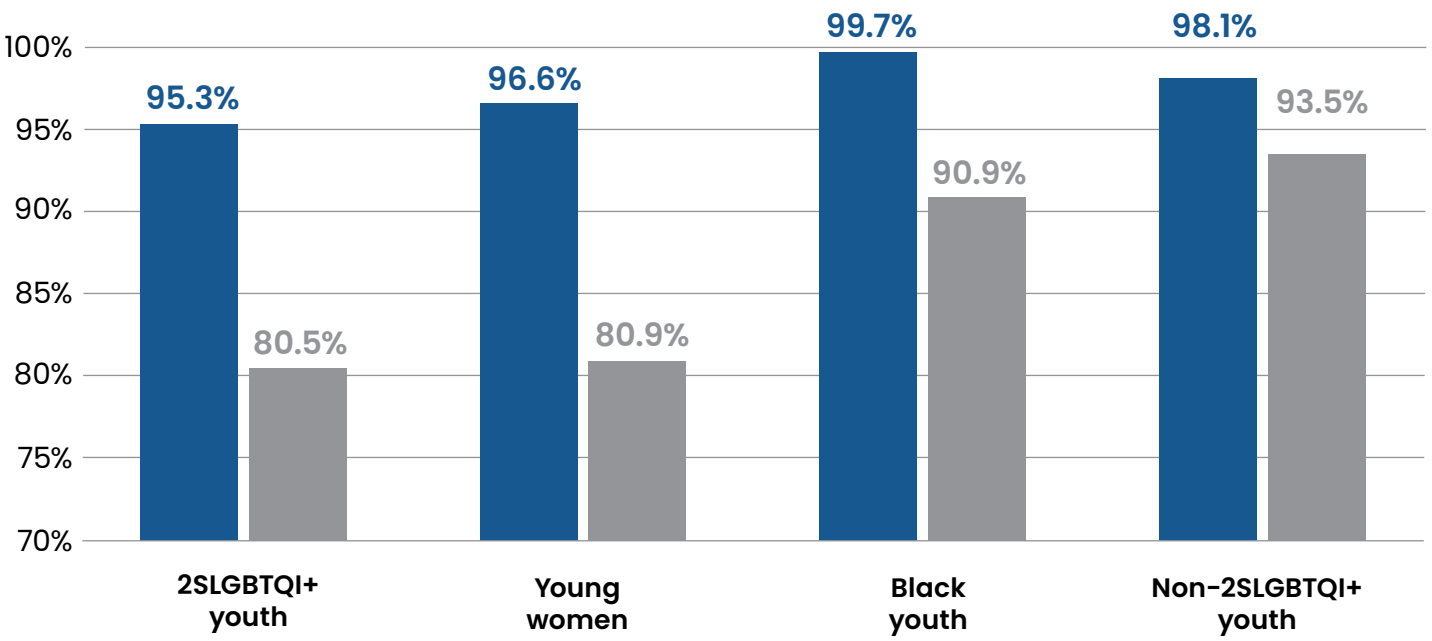
- the narrower the window for chronic homelessness to take hold

Housing First CANADA 4 Youth

HF4Y also narrowed equity gaps. The model produced stronger outcomes for young women, Black youth, and 2SLGBTQI+ youth—populations that are disproportionately affected by homelessness and are often underserved by mainstream systems.[54] Housing stability at 36 months by equity group tells that story clearly.[55]

FIGURE 1. Housing stability at 36 months by equity group

Average time spent in stable housing. Higher = better.



Results for all groups show strong evidence of a real difference between HF4Y and TAU — not due to chance.

For 2SLGBTQI+ youth and young women, the gap between HF4Y and standard services at 36 months was approximately 15 percentage points. For Black youth, it was nearly 9 points. This is evidence that the model works more equitably than what it replaces and is the result of deliberate design: identity-affirming, relationship-based, youth-centred practice, which is embedded in the model's core principles.

HOUSING FIRST FOR YOUTH ▸ *See* **Brief #10** *for the full data tables and study design.*

One important limitation should be noted: Indigenous youth are overrepresented among those experiencing homelessness in Canada, yet Indigenous participation in this study was limited. Delivering HF4Y equitably for Indigenous youth requires Indigenous-led design culturally grounded practice, and evaluation frameworks developed and governed by Indigenous communities themselves. Existing programs like Endaayaang demonstrate what this looks like in practice.[56]

What Governments Must Do

HF4Y outcomes are contingent on policy. Even the most capable programs cannot deliver the model's results without adequate housing supply, rent supplements matched to market rents, stable funding, and manageable caseload sizes.

- Fund HF4Y as permanent prevention infrastructure, not short-term pilots
- Set rent supplement levels to match local market rates so youth can exercise real housing choice
- Require early, planned transitions from child welfare—the absence of such planning is a leading driver of youth homelessness
- Build fidelity reviews and developmental evaluation into funding agreements
- Require and fund equity-focused measurement, including outcomes by identity group. A national sector needs assessment found that 54% of youth homelessness service providers want to implement Housing First for Youth, but most face significant barriers to doing so.[57] The gap between what the sector knows works and what is currently funded and supported can be closed through policy changes and dedicated funding.

HF4Y NON-NEGOTIABLES: What Fidelity Requires in Practice

Funding for HF4Y is necessary, but it is not sufficient on its own. There are specific operational requirements that cannot be compromised, modified, or treated as aspirational without the program ceasing to be HF4Y in any meaningful sense:[58]

- Consistent home visits as a core delivery mechanism, not optional outreach
- Rent paid directly on behalf of young people
- Rent supplements set at real market rates—not averaged, not outdated
- A standard lease held in the young person's name
- Individualized, relationship-based case management
- Manageable caseload sizes (between 7 and 10), protected through funding agreements and organizational oversight
- A firm commitment that no young person is ever discharged into homelessness

When any of these are compromised (e.g., caseloads grow beyond what relationship-based practice requires, supplements fall below market rates, home visits become optional), what is being delivered is not a weaker version of HF4Y—it is something else entirely. Young people experience the difference, and outcomes reflect it.

HOUSING FIRST FOR YOUTH ▸ *See* Brief #12 *for the full discussion of delivery conditions and what happens when they erode.*

Family and Natural Supports (FNS)

For many young people, long-term housing stability depends not only on having a place to live but also on having meaningful adults they can rely on. FNS is built on that insight. It is an equity-based, prevention-focused approach that helps young people strengthen, rebuild, and sustain supportive relationships with the people they identify as important in their lives.[59,60] **FNS is not just one program among several; it is the relational foundation that should inform case management across all forms of youth homelessness prevention.**

"Family" in the FNS framework is defined entirely by the young person. It may include family of origin, extended family, kin, caregivers, and chosen natural supports, such as mentors, Elders, teachers, trusted adults, and in some cases their peers. The focus is not on reconnection or mediation as ends in themselves, but on building safe, sustainable support networks on the young person's own terms.

FNS can operate as a standalone prevention program, as a practice embedded within existing youth-serving programs, or as a core component of Housing First for Youth, Reconnect, and Upstream Canada programs. Across all contexts, the principle is the same: safe, relational support defined by youth is prevention infrastructure.

This breadth of application reflects something deeper about the model's design. FNS also shifts how we think about "the client." Rather than focusing support on the individual young person alone, FNS recognizes that sustainable outcomes depend on the broader network, and so families, caregivers, and chosen natural supports are engaged as active participants in the care process, not simply as background, but as people whose own capacity, well-being, and relationships matter to the outcome.[61,62]

In 6 Months, FNS led to a

50%

reduction in conflict-related displacement.

What the Evidence Shows

Six-month outcomes from 10 FNS demonstration sites across Canada show promising early results.[39] The study reached a notably diverse population: 43.2% of participants identified as 2SLGBTQI+ and 26.3% as Indigenous, which reflects who prevention systems most need to reach.[63] The FNS program led to a **50% reduction** in conflict-related displacement and a **65% reduction** in shelter use.

In 6 Months, FNS led to a

65%

reduction in shelter use.

More Outcomes from FNS

- **Youth mental health satisfaction improved:** from 15.3% to 30.6%
- **Shelter and emergency housing use declined:** from 11.9% to 4.1% of youth
- **Conflict-related displacement declined:** youth sleeping away from home in the past 30 days dropped from 24.6% to 12.2%
- **Supportive adult networks strengthened:** mean supportive connections increased from 6 to 8
- **Program acceptability was high:** 88.7% found FNS helpful; 91.8% reported good worker fit

These results emerged within six months of program entry, which challenges the assumption that relationship-based prevention takes too long to show results. The case for investing in FNS does not require waiting for longitudinal evidence, because early results already point in the right direction.

What Qualitative Evidence Tells Us

Across sites, young people, family members, and frontline staff identified four elements that made FNS distinctly effective: active listening and steady support; mediation, coaching, and skill building for both young people and the adults in their lives; identity-affirming and culturally responsive practice; and flexible supports that reduced stress and created space for relationship repair.[102]

The findings also surfaced clear gaps. Youth wanted stronger mental health integration, more peer connection opportunities, and clearer transition planning when leaving the program. Staffing shortages and worker burnout, which are both products of under-resourcing, were identified as the primary barriers to consistent delivery.

What Governments Must Do

- Fund FNS as permanent prevention infrastructure, not short-term pilots. Relationship-based work requires continuity.
- Align budgets with real delivery costs, including staffing ratios, training requirements, and coordination
- Build FNS into cross-sector coordination frameworks across child welfare, housing, health, education, and justice systems
- Require and resource culturally safe, Indigenous-led, and 2SLGBTQI+-affirming practice as a standard condition of funding
- Invest in Indigenous-led design, delivery, and evaluation—not cultural adaptation of non-Indigenous models
- Support local backbone coordination: Fund lead agencies or community tables to maintain system alignment and continuous learning across FNS delivery partners. System-level prevention cannot be achieved by individual programs working in isolation.

Reconnect

Virtually every young person who becomes homeless was once in school. And in most of those schools, there was likely an adult who knew something was wrong but did not know what to do. Reconnect is built to address that reality.[64,65]

Reconnect is a school-based early intervention model based on partnerships between community organizations and schools that seeks to identify young people at risk of homelessness and provide coordinated, relationship-based support before crisis occurs. At its heart is a Reconnect worker, employed by a community organization but embedded within the school. They are a trusted support person for students facing financial hardship, housing instability, and family conflict.[103]

Reconnect is particularly valuable for youth under 16, which addresses a critical service gap: Most homelessness services are designed for those aged 16 and older.

Insights

Strength scores improved with Reconnect across every measured domain from 2021-22 to 2022-23.

Domains with strong gains include mental health, living skills, harm reduction and recovery.

Reconnect

What the Evidence Shows

Evidence for the Reconnect model draws on two complementary datasets: Trellis Society's All in for Youth (AIFY) initiative in Calgary, a school-based program with close alignment to Reconnect's core model, and Australia's national Reconnect program, which has operated since 1999. Together, these provide a cross-national evidence base for early intervention embedded in schools.[64,65]

Australia's Reconnect program is among the most extensively documented school-based prevention initiatives in the world. Between 2018 and 2023, it supported over 30,000 individual clients through more than 470,000 sessions, delivered by 70 organizations across 101 funded programs nationally. Schools were the single largest source of referrals, accounting for 35% of all inbound contacts.[64]

Outcome data from Australia's 2024 national program review, which covered more than 14,000 client records, show consistent improvements across the domains that matter most:[64]

Housing stability

the mean score[vi] increased by +1.17; 79% of clients reported their housing situation improved

Education engagement

the mean score increased by +1.16; 78% reported increased engagement with education and training

vi. The score measurement tracks client progress by capturing outcome data at two points: when someone first enters the program and when they leave. The resulting number, falling somewhere between 1 and 5, reflects the average shift across all clients. The Reconnect program's assumption is that any score increase contributed positively to outcomes, with larger increases indicating greater positive changes.

Family functioning
the mean score increased by +1.16

Knowledge and access to supports
the mean score increased by +1.49—the strongest gain across all domains

Community participation
the mean score increased by +1.24

The Canadian Reconnect model also has roots in the Youth Reconnect program developed and run by The RAFT in Niagara Region, Ontario. The RAFT's pioneering work in school-based early intervention for youth at risk of homelessness provided an important foundation for the adaptation and testing of the Reconnect model in Canada through the Making the Shift Youth Homelessness Social Innovation Lab.

In Calgary, Alberta, Trellis Society's school-based Reconnect program, All in for Youth (AIFY), served 486 unique youth across 16 school sites in a single year, generating over 1,870 program interactions. Of youth discharged from high school sites, 40% remained enrolled in school and 25% had graduated, while only 9% had dropped out. Strength scores improved across every measured domain from 2021-22 to 2022-23, with particularly strong gains in mental health (75% to 87%), living skills (70% to 83%), and harm reduction and recovery (82% to 93%).[65] **Making the Shift demonstration sites have confirmed the model can be adapted to the Canadian context while maintaining fidelity to its core features.**

Qualitative findings from Hamilton's demonstration project highlight five consistent themes:[66]

1. Early intervention interrupts disconnection before homelessness takes hold by providing support before family conflict, school disengagement, and housing instability become entrenched

2. Crisis support and mental health care help youth feel held and connected during the most difficult moments. They are core prevention, not a separate downstream service

3. Trusted adults are foundational, particularly for young people whose family relationships are strained or unavailable

4. Family relationships can improve when reconnection is safe and appropriate, with mediation and parent engagement as important program components

5. Community integration supports long-term stability—once immediate crises are stabilized, reconnecting to school, community organizations, and positive relationships reduces isolation and builds resilience

Developmental Evaluation Findings

Developmental evaluation from both Hamilton's Reconnect demonstration project and Australia's national program review points to the same conclusion: the gap between Reconnect as designed and Reconnect as delivered is almost always a policy and funding gap, not a practice gap.

Specifically

- Late referrals, coming at or near a crisis point, significantly weaken outcomes—communities that invest in upstream identification through schools do better
- Flexibility in service design is key—holistic, cross-sector support consistently outperforms single-issue interventions
- Family and community connections are protective—family mediation and parental advocacy produce better long-term outcomes
- Mental health access emerged as one of the most critical—and most frequently unavailable—program components
- Even well-designed programs fail when housing shortages, administrative burdens, and weak transitions undermine delivery

What Governments Must Do

- Ensure Reaching Home directives enable communities to apply for funding to implement Reconnect.
- Fund Reconnect as permanent prevention infrastructure through multi-year, sustained investment
- Prioritize funding for early intervention programs in homelessness services, with school-embedded delivery as the preferred model
- Require standardized outcome measurement as a condition of funding, enabling cross-site accountability and building the evidence base for further reallocation over time
- Align funding with real delivery costs, including staffing, barrier-removal funds, and the time required to develop partnerships with schools
- Build Reconnect into cross-sector coordination frameworks that span education, child welfare, housing, health, and justice
- Invest in Indigenous-led design, delivery, and evaluation
- Support longitudinal evaluation to build the Canadian evidence base over time

Upstream Canada

Most young people show signs of housing instability long before they lose their housing. They stop coming to school. They fall asleep in class. They stop eating lunch. They disengage from learning and from the people around them.

Yet some of the most vulnerable young people show no obvious signs at all. Risk can be hidden behind good grades, regular attendance, or quiet coping—remaining unseen until a crisis occurs.

Upstream Canada is built on the belief that schools are where prevention can happen first. By taking a universal and proactive approach with all students—not just those already known to be struggling—Upstream helps uncover hidden needs, identify young people who might otherwise go unnoticed, and connect them to support before a crisis takes hold.[67]

Upstream Canada is a collaborative, early-intervention model built on partnerships between schools and community agencies that seeks to identify young people at risk of homelessness before a crisis hits and to deliver coordinated supports that strengthen family relationships, stabilize housing, and sustain educational engagement. The model targets youth aged 12 to 16, ages when early warning signs often emerge but go unaddressed. It is adapted from **Upstream Australia**.

From 4,170 Students

37%

were identified as within the homelessness risk spectrum.

Insights

Schools were previously unaware of risk factors for approximately half of high-risk students—a direct measure of what referral-based systems miss.

Insights

Upstream Canada costs $11,000 per student to deliver, but it prevents an estimated $70,000 in lifetime public costs per student.

The Student Needs Assessment: Equity by Design

At the heart of Upstream Canada's model is the Student Needs Assessment (SNA), a privacy-protected screening tool administered to all students at participating schools. The SNA is not a referral trigger. It is a population-level tool designed to reveal emerging risk before it becomes visible through behaviour, absence, or family breakdown.

This design choice is fundamental to equity. Most prevention systems depend on someone doing something: a family navigating a referral, a student disclosing a problem, a teacher recognizing a crisis. Each of those steps is a barrier, and barriers are not distributed equally. Universal screening removes them by design.

Quantitative findings from 4,170 Student Needs Assessment responses collected across demonstration sites in Kelowna and St. John's reveal five consistent patterns.[17]

Five Consistent Patterns from the Student Needs Assessment

More than one third of students (37%) were identified as within the homelessness risk spectrum—substantially more than population-level crisis estimates

50% of at-risk students showed signs of school disengagement, versus only 7% of their not-at-risk peers—disengagement is an early warning signal for broader instability, not primarily an academic issue

Risk factors cluster: At-risk students showed significantly higher rates of bullying (30% vs. 4%), low educational confidence (24% vs. 1%), and preference for work over school (36% vs. 11%)

Schools were previously unaware of risk factors for approximately half of high-risk students—a direct measure of what referral-based systems miss.

2SLGBTQI+, Indigenous, and racialized youth face disproportionate and compounded risk: among 2SLGBTQI+ youth identified as high-risk, 88% showed signs of disengagement; racialized at-risk youth were six times more likely to be disengaged than their not-at-risk peers; Indigenous at-risk youth were five times more likely to be disengaged. Universal screening does not just identify more students; it identifies different students: the ones most likely to be missed by every other system and facing the greatest compounded risk.

What Students, Families, and Educators Tell Us

Qualitative findings from 37 participants across both sites, including youth, caregivers, educators, case managers, and sector leaders, identified five consistent themes about why Upstream Canada works:[68]

1. **School disengagement signals broader instability:** Participants described it not as an academic failure, but as a visible indicator of housing stress, family conflict, and mental health challenges that schools alone cannot address.

2. **Relationships function as equity infrastructure:** Trust is foundational, especially for youth who are cautious of formal systems. Embedding community staff in schools reduces stigma and normalizes support: "When supports are integrated into schools, it actually helps release a stigma around needing help."

3. Family stress is structural, but pathways into risk are diverse: Poverty, housing precarity, racism, and historical trauma shape family strain, but risk also appears in relatively resourced households facing acute relational breakdown or mental health challenges. In all cases, the Family and Natural Supports approach is central to how Upstream Canada responds once risk is identified.

4. Barrier-free, in-school access enables earlier intervention: Universal availability means youth do not have to navigate systems, bear costs, or advocate for themselves: "Someone doesn't have to reach out; it's already there."

5. Upstream adds critical infrastructure and capacity to schools without adding burden to educators: Role clarity, which means knowing community workers handle complex family and housing issues while teachers teach, is essential to sustainable school partnerships.

Developmental Evaluation Lessons

Upstream Canada was developed through developmental evaluation at sites in Kelowna, BC, and St. John's and Marystown, NL.

Five lessons emerged for scaling prevention effectively[69]

Prevention needs ongoing trust building, especially where risk is hidden—programs that are withdrawn before trust is established do lasting damage to community willingness to participate in future prevention efforts

Schools are critical access points, but impact depends on what follows—the strength of the pathway from school to community support determines whether early warnings translate into timely help

Continuous adaptation strengthens uptake without compromising integrity—the key is actively managing the distinction between adaptation, which improves fidelity, and drift, which undermines it

Prevention can intervene where structural inequities manifest—this does not replace the need for structural change, but it means prevention is not futile in the face of it

Shared learning infrastructure is essential—communities of practice across sites kept research, policy, and frontline implementation aligned. Without them, local adaptations remain local and do not build the collective evidence base for scaling

The rural pilot in Marystown generated important additional lessons. Heightened privacy concerns, close social networks, and historical skepticism toward external programs initially constrained participation, but engagement increased steadily as trust deepened. Early variability in rural settings should not be interpreted as program failure; it is a signal that longer trust-building investment is required.[69]

The Economic Case for Upstream Canada

Since implementation began in 2021-22, Upstream Canada has supported 672 students at two sites, representing a cumulative operating investment of approximately $7.39 million. Based on conservative social-return-on-investment (SROI) modelling, this investment is projected to generate approximately $47 million in avoided lifetime public costs.[100] To put those figures into perspective: Upstream Canada costs approximately $11,000 per student to deliver, but it prevents an estimated $70,000 in lifetime public costs per student. This works out to a return of approximately $6.36 for every $1 invested.

These estimates intentionally exclude increased lifetime earnings, productivity gains, tax revenue increases, and intergenerational benefits and focus only on direct, measurable cost offsets within public systems. Even at conservative lower bounds, the ROI is 4.4 : 1.[100]

> **FOUNDATIONS** ▸ *For the full SROI methodology, sensitivity analysis, and a breakdown of how savings accrue across health, education, justice, and social service portfolios, see* **Brief #8**.

What Governments Must Do

- Invest in universal screening infrastructure as standard practice within schools—population-level identification is a prerequisite for equitable prevention, not a research activity.
- Pair identification with coordinated community response—screening without response is documentation, not prevention. Fund both together.
- Fund early intervention rather than letting entry be driven by crisis—current funding models that activate only at shelter entry or school dropout are structurally misaligned with where prevention is actually possible.
- Create cross-ministry investment frameworks that capture distributed benefits across education, health, justice, and social service portfolios.
- Support expanded implementation—the 672 students served to date represent a fraction of an estimated 400,000 to 435,000 students nationally who could be identified as needing early intervention.[vii]
- Invest in learning infrastructure alongside program delivery—communities of practice, evaluation capacity, and feedback loops are how prevention models improve over time, not overhead.
- Support long-term trust building, especially in rural and Indigenous contexts—short funding cycles are incompatible with the trust building that prevention requires in these communities.
- Require equity-focused implementation, monitoring, and disaggregated outcome reporting from the outset.
- Invest in Indigenous-led design, delivery, and evaluation—prevention for Indigenous youth must be designed and governed by Indigenous communities on their own terms.

vii. Estimate based on applying the 37% risk identification rate observed across Upstream Canada demonstration sites to the broader Canadian secondary school population, with a conservative engagement rate of approximately 60% based on observed participation patterns. See **Brief #8** for full methodology.

6. Taking Prevention to Scale

***The challenge is how to scale** without compromising what makes these models work.*

The four program models described in this report represent a coherent, evidence-based prevention system that can be scaled.

The challenge is how to scale without compromising what makes these models work. The brief series identifies nine leverage points that determine whether scaling succeeds or fails.

Nine Leverage Points for Scaling Prevention

1. Leadership

Scaling requires political will and institutional alignment across sectors. Government leadership is especially important, because policymakers can translate successful innovations into funding mechanisms and regulatory environments that enable wider adoption. But scaling also requires leadership from advocates, service providers, researchers, and philanthropic organizations working in concert.[7]

2. Sound Policy

Prevention scales when policy creates enabling environments, which include stable, flexible funding; enabling legislation; interdepartmental coordination; and institutionalized learning. Wales's Duty to Assist,[70,71] British Columbia's SAJE program,[72] and Washington State's Youth Homelessness Act[73,74] all demonstrate how policy can drive population-level change.

Washington State's approach also included a specific legislative provision worth noting: Senate Bill 6560 (2018) explicitly prohibits any publicly funded system of care—including child protection, juvenile justice, and health and behavioural health facilities—from releasing a young person into homelessness.[72,73] The explicit "prevent discharge into homelessness" provision converts a policy aspiration into a legal obligation, and it directly addresses one of the primary drivers of youth homelessness in Canada: the absence of planned transitions out of public systems.

FOUNDATIONS ▸ *See* **Briefs #4 and #6** *for the full international policy context.*

It is worth noting that Housing First for Youth, a Canadian innovation, now has over 30 implementations across 14 European countries, compared to approximately 12 active programs in Canada.[75,76] The gap reflects not a difference in evidence, but a difference in political commitment to act.

3. A Strong Evidence Base

Evidence establishes credibility, reduces risk, and helps decision-makers distinguish promising ideas from those unlikely to produce sustained impact. The At Home/Chez Soi trial played exactly this role for Housing First.[77] Building a parallel evidence base for youth homelessness prevention, including longitudinal outcome tracking and equity-focused research, is essential for the models described in this series.

4. Definitional Clarity

Scalable programs need clear definitions and well-defined service delivery models. Without them, programs risk being implemented inconsistently, reducing effectiveness and eroding trust in prevention efforts. When Housing First scaled in Canada without mandatory adherence to its core principles, the term began to lose its meaning, because programs adopted the label while abandoning the practice.[47] Clear operational definitions, articulated guiding principles, and program model specifications with identified core components are prerequisites for accountability.

5. Fidelity to Program Models

Scaling evidence-based programs requires balancing fidelity to the original model with the possibility of adaptation to local context. Fidelity is essential because the evidence supporting a program is tied to specific mechanisms of change. When core design elements are altered, the intervention delivered may no longer produce the outcomes that the evidence promises. At the same time, strict replication is rarely feasible at scale. Implementation science emphasizes distinguishing between core components, which are the active ingredients responsible for outcomes that must be treated as non-negotiable, and adaptable components, which can be modified for the local context without compromising the integrity of the model.[78,79] Successful scaling protects core mechanisms while also allowing contextual flexibility. Fidelity assessment is an accountability mechanism, not an administrative exercise, and requires investment to support implementation.[80] Funding agreements should include fidelity assessment as a condition.

6. Funding Must Match Policy Direction

Governments that signal new policy directions without providing new funding create what scholars call an unfunded mandate: a gap between policy expectations and organizational capacity that produces predictable, damaging consequences, regardless of the commitment or skill of the organizations that are expected to deliver.[81,82]

When the Government of Canada renewed the Homelessness Partnering Strategy and made Housing First a cornerstone of the program, it required eight large designated communities to allocate at least 65% of HPS funding to Housing First activities beginning in 2015, while other designated communities receiving more than $200,000 in HPS funding were required to allocate at least 40% in 2016. These funding requirements may have reduced the flexibility of communities to allocate resources to other homelessness initiatives and local priorities.

The same dynamic is a real risk for youth homelessness prevention. If governments direct communities to prioritize prevention while holding homelessness budgets flat, the predictable outcome is that organizations will be forced to narrow eligibility, compete for short-term grants, and protect core operations rather than build new prevention capacity. This is not a failure of organizational will; it is a structural consequence of asking the sector to do more with the same resources. Prevention must be funded as a new investment and not from existing crisis infrastructure.

What sustained investment could achieve is substantial. Reaching Home's point-in-time counts identified over 3,000 youth experiencing homelessness on a single night, and 45% of them have experience in foster care, group homes, or child welfare systems (rising to 51% among Indigenous youth).[3] These are young people already known to government, and they are an identifiable population where targeted prevention could intervene before housing loss occurs. The cross-ministerial savings that follow across health, justice, education, and social services create the conditions for a virtuous cycle: Prevention investments generate savings that fund expanded prevention, progressively reducing both homelessness and public cost.

FOUNDATIONS ▸ *See* **Brief #7** *for the full analysis.*

7. Training and Technical Assistance

Scaling requires a trained workforce, but training alone is not enough. Quality training and technical assistance (TTA) transfers information along with the skills and confidence needed to implement a model as intended to organizations and policy environments that were not part of the original development. Without TTA, the innovation spreads in name but not in substance, and programs carry the label of an evidence-based model while delivering something fundamentally different.[78]

TTA supports the balance between fidelity and adaptation that is essential to scaling. It helps practitioners distinguish which elements of a model are core and must be protected and where local adaptation is appropriate. This reduces the risk of rigid replication, on one hand, and uncontrolled drift, on the other. Effective TTA goes beyond one-time training to include coaching, supervision, communities of practice, and feedback loops that create continuous learning systems capable of sustaining quality over time.

In Canada, A Way Home Canada is actively building this infrastructure for youth homelessness prevention, offering supports that range from introductory to advanced training, implementation coaching, communities of practice, and fidelity reviews. Governments that fund prevention programs without also funding TTA are investing in capacity that is unlikely to hold at scale. TTA is how an investment in innovation becomes a durable change in practice.

8. Catalyst Events

Structured, multi-day learning sessions that bring together practitioners, researchers, government representatives, and people with lived experience complement this infrastructure by accelerating adoption across communities and, as we have seen with youth homelessness prevention, even countries.[83,84] The **FEANTSA Youth Study Sessions** in Europe offer a striking example: Two sessions focused specifically on Housing First for Youth directly contributed to its implementation in Ireland, Scotland, and the Netherlands, and to the over 30 programs now operating across 14 European countries. These events build shared understanding, identify practical solutions, and mobilize the cross-sector relationships that move promising innovations from isolated pilots to broader implementation. For governments and funders seeking to accelerate scaling, investing in structured knowledge exchange is part of the infrastructure that makes it possible.

9. Equity-Centred Implementation

Scaling must actively reach the young people most likely to be excluded by referral-based, eligibility-constrained, or crisis-triggered systems. Indigenous, 2SLGBTQI+, Black, and racialized youth are disproportionately affected by youth homelessness and must be centred in scaling strategies. Effective prevention policies and programs must be co-designed with equity-deserving communities, ensuring that those most affected have meaningful decision-making power. For Indigenous communities, this means incorporating traditional practices, Elders, and land-based healing while emphasizing self-determination and autonomy. For 2SLGBTQI+ youth, it means gender-inclusive services, identity-affirming spaces, and supports that address family rejection and discrimination.

Canadian examples demonstrate what culturally grounded approaches can achieve in practice. Indigenous-led programs, such as Endaayaang (an adaptation of HF4Y grounded in Indigenous culture, Elder connections, and traditional teachings)[56,85] and HOP-C North,[86] show that culturally specific delivery is not only more equitable but more effective, addressing relational and cultural dimensions of homelessness that mainstream programs are not designed to reach.

FOUNDATIONS ▸ *See* **Brief #7** *for a full discussion of what equitable prevention requires.*

7. Reconciliation, Equity, and Prevention

The data on who experiences youth homelessness *makes the equity imperative impossible to ignore.*

The economic case for prevention cannot be separated from equity and reconciliation.

Indigenous youth are disproportionately affected by homelessness at every stage: in who becomes homeless, when they first experience it, how long they remain homeless, and how difficult it is to exit.[31,87,88] The same is true, to varying degrees, for Black and racialized youth, 2SLGBTQI+ youth, youth with disabilities, and newcomer youth.

These disparities are products of colonialism, systemic racism, discrimination, and structural inequality[31,86,87]—forces that shape who is most exposed to housing instability and least able to access help. Prevention systems that do not address these forces will continue to replicate them.

The brief series is consistent with what EQUITY REQUIRES IN PRACTICE

- Indigenous-led design, delivery, and evaluation
- 2SLGBTQI+- affirming practice as a baseline
- Universal screening over referral-based access
- Disaggregated data and accountability
- Funding Indigenous-led delivery, not cultural adaptation

Indigenous-led design, delivery, and evaluation

For Indigenous youth, effective prevention must be grounded in Indigenous sovereignty, cultural continuity, and community self-determination. Mainstream organizations play a supporting role—following Indigenous leadership, not designing programs for Indigenous communities.[31,87,89]

2SLGBTQI+-affirming practice as a baseline

Gender-diverse and 2SLGBTQI+ youth are at elevated risk of family rejection and early homelessness. Identity-affirming practice—using correct names and pronouns, creating gender-inclusive services, and addressing family rejection—is not an enhancement; it is the minimum standard for equitable service delivery.[32]

Universal screening over referral-based access

Systems that depend on visibility, advocacy, or family capacity to navigate referrals will systematically miss the young people who most need support. Universal screening, as implemented by Upstream Canada, is how equity is built into program design.

Disaggregated data and accountability

Average program outcomes can mask inequity. Reporting outcomes by identity group is the only way to know whether prevention is reaching and serving all young people equitably.

Funding Indigenous-led delivery, not cultural adaptation

Adding cultural safety training to a non-Indigenous program is not the same as funding an Indigenous-led program. Governments must resource Indigenous organizations to design and deliver on their own terms, with Indigenous data governance and community-defined outcomes.

THE DATA

The data on who experiences youth homelessness makes the equity imperative impossible to ignore:

Indigenous youth represent 45% of those first homeless before age 16,[1] with 51% of Indigenous homeless youth having child welfare experience, compared to 23% of non-Indigenous youth.[6] Indigenous youth accounted for 8% of the Canadian youth population in 2021,[90] yet research shows that they are overrepresented in the population of homeless youth.

In Vancouver, 41% of homeless youth identified themselves as Indigenous.[91] Contributing factors to the overrepresentation of Indigenous homeless youth include the colonial legacy, residential schools, and the Sixties Scoop (which was aimed at dismantling Indigenous family structures and cultural identity), intergenerational trauma, poverty, violence, and discrimination.[31,92] These intergenerational traumas continue to drive Indigenous youth homelessness at disproportionate rates today.[1]

Black youth comprise 6.4% of all youth in Canada,[93] yet they are overrepresented in the population of homeless youth (32.4%).[55] Black youth are significantly more likely than white youth to report involvement with child protection services and to experience homelessness at a younger age.[94] In Toronto, the City's city-wide point-in-time survey of people experiencing homelessness found that Black people comprise 58% of those experiencing homelessness, yet they represent 10% of Toronto's overall population.[101] These results are the product of structural racism, economic inequality, and service systems that were not designed with Black youth in mind.

THE DATA

2SLGBTQI+ **youth are similarly overrepresented.** They represent 26% of homeless youth in Canada, while 1 in 10 youth (aged 15 to 24) reported being 2SLGBTQI+ (a considerably larger share than among any other age group).[95]

Reaching Home data shows that 2SLGBTQI+ youth were more likely to report experiencing homelessness for the first time under the age of 24 (61%) and were more likely to cite interpersonal issues (59%), abuse by a parent or guardian (15%), and mental health challenges (17%) as reasons for housing loss.[3] These are the direct consequences of family rejection rooted in homophobia and transphobia,[32] both of which are causes of homelessness that prevention systems must be explicitly designed to address, not simply accommodate.

Prevention programs that do not embed identity-affirming and anti-racist practice into their design will replicate these disparities rather than disrupt them. Reaching the young people most affected by homelessness is the test of whether prevention is working.

There is one further dimension of equity that outcome frameworks must account for.

Research shows that social exclusion (being shut out from social, economic, political, and cultural institutions) can persist even after housing is secured.[96,97,98] Young people who have exited homelessness may remain isolated from education, employment, cultural participation, and community life, and that isolation, if unaddressed, undermines the very stability that housing was meant to create.[99] This pattern disproportionately affects Indigenous, Black, racialized, and 2SLGBTQI+ youth, for whom systemic barriers to belonging do not disappear with a lease. Prevention systems that measure success only by housing retention will consistently miss this and will consistently underserve the young people for whom belonging, not just shelter, is what makes stability last. Holistic outcome measurement is therefore not a methodological preference; it is an equity requirement.

8. Conclusion: Prevention Is a Policy Choice

Canada has built some of the strongest evidence for youth homelessness prevention anywhere in the world.

Housing First for Youth (HF4Y) was developed here, and Family and Natural Supports, Reconnect, and Upstream Canada were each adapted from international models and rigorously tested in Canadian communities with Canadian young people, producing an evidence base that is distinctly Canadian in its scope and rigour. This collective body of work—co-created by the Canadian Observatory on Homelessness and A Way Home Canada—suggests a more expansive approach to addressing the problem of homelessness, especially chronic homelessness. Data from Reaching Home indicates that many people experience homelessness for the first time before age 25, with most between 12 and 20.[2,26] Our view is that by effectively addressing homelessness, we not only achieve better outcomes for young people, their families, and communities, but also create a longer-term opportunity to diminish the flow into chronic homelessness.

The good news is that we know what to do. Our real challenge is how to enhance the effectiveness of our efforts to scale prevention interventions. Our colleagues in Europe appear to be more successful at scaling interventions developed in Canada—there are now more HF4Y programs operating across Europe (over 30) than in Canada (12). The gap between what this country knows and what it has chosen to fund is not a technical failure. It is a policy decision—and it can be changed.

That choice carries particular weight for the young people this report is ultimately about. For Indigenous youth, Black youth, 2SLGBTQI+ youth, and other equity-deserving young people, the cost of inaction is compounded by the structural conditions that create disproportionate risk in the first place and make homelessness harder to exit. Prevention systems that are not actively designed to reach these young people will not reach them. Investing in Indigenous-led prevention is not only a fiscal imperative, but also an act of reconciliation, one that requires governments to resource Indigenous-led design, delivery, and evaluation with the autonomy and sustained investment that genuine self-determination demands, rather than simply funding cultural adaptations of programs designed elsewhere.

The gap between what this country knows and what it has chosen to fund is not a technical failure. ***It is a policy decision—and it can be changed.***

The models are proven, the workforce is developing the capacity to deliver prevention at scale, and growing training and technical assistance infrastructure means that ***communities across the country can access the implementation support they need.***

The barriers to making this shift are not technical and are not rooted in any lack of evidence or readiness. The models are proven, the workforce is developing the capacity to deliver prevention at scale, and growing training and technical assistance infrastructure means that communities across the country can access the implementation support they need.

What is missing is the political will to make specific, durable decisions that match the scale of what the evidence demands. That means naming prevention as a funded priority in the next iteration of Reaching Home, with dedicated allocations treated as new infrastructure investment rather than absorbed from existing crisis budgets. It means creating cross-ministerial frameworks that reflect where prevention savings actually accrue, so that health, justice, education, and social service ministries share in the cost of what they benefit from. It means requiring that publicly funded systems such as child welfare, juvenile justice, and health care never discharge a young person into homelessness. And it means holding funded programs accountable for fidelity to models supported by evidence, so that investment in prevention produces the transformative outcomes the evidence shows it is capable of achieving.

The evidence assembled in this series represents years of research, practice, and learning—built by and with the young people it is designed to serve. The question Canada now faces is not what works, but whether we will choose to act on what we know before another generation of young people pays the price of our hesitation.

To learn more about homelessness prevention, visit the Homeless Hub: homelesshub.ca/collection/prevention

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