

POLICY BRIEF: SUPPORTING YOUTH TRANSITIONS

RESPECTING DIGNITY, FULFILLING DREAMS

A community partnership initiative spearheaded by Community Living Stratford and Area, Community Living Guelph and Wellington, Community Living Cambridge, and Community Living Owen Sound and District.

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“

Staff help me with like groceries, budgeting, phone bills; a lot of stuff. I'm afraid if I move out on my own. I have a fiancée. If I do move out, I am going to be in debt and going to lose everything. That's what I'm afraid of. I know I will not be able to manage money.

”

- Youth being supported by Community Living Guelph and Wellington

“

I have a dream. One day I want to be able to live on my own; be able to go hold a job, have a girlfriend, and travel to different places.

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-Youth being supported by Community Living Cambridge

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I have had bullying by my best friends and a bunch of others, where they would threaten me, beat me up and stuff, or worse. And I'm like, "that's enough! I don't want that." I need new friends. I have been looking for new friends, and I found few. I hanged out with them this week, which was fun.

”

- Youth being supported by Community Living Owen Sound and District



Acknowledgements

Four local Adult Developmental Services organizations came together to organize this pilot study in 2018-2019: Community Living Stratford and Area; Community Living Guelph and Wellington; Community Living Cambridge; and Community Living Owen Sound and District. We would like to thank all 25 youth who shared their experiences and insights while being interviewed for this research, as well as the many Direct Support Professionals and Managers who attended the 7 focus group discussions and provided valuable recommendations. In the Grey Bruce Region, several agencies participated: Community Living Owen Sound & District, Community Living Walkerton & District, Bruce Peninsula Association for Community Living, Community Living Hanover, South East Grey Support Services, and Community Living Meaford. We also thank the Managers for participating in the research design and implementation.

Special thanks to Ashley Garner, who conducted the interviews, focus groups and literature review for this research. We are grateful to the Community Engaged Scholarship Institute (CESI) at the University of Guelph, which has provided expertise, resources and financial support. CESI's encouragement and guidance have been invaluable to completing this research. Thank you as well to the Sunbeam Centre, which provided a seed grant to begin working with both youth and Adult Development Services to document their experiences.

We think that the strength of this document testifies to our joint commitment to provide more effective support to youth who are in the long process of transitioning from Children's Services to Adult Developmental Services.



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Executive Summary

This Policy Brief shares the findings of a pilot research project implemented in 2018-2019 by Community Living. The research documents that young people transitioning from Children's Services to Adult Developmental Services, like all young people, want to build futures based on their own priorities, decisions and dreams. Some face multiple barriers to self-determination; several erected by the very systems that are supposed to provide safe places to live and support youth self-empowerment.

Supporting Youth Transitions: Respecting Dignity, Fulfilling Dreams is our vision for moving forward. It is centred on a community partnership initiative that brings service providers together in a model of wrap-around support that meets youth where they stand. It includes modifying existing policies and creating new policies that open avenues to their rights fulfillment, and resourcing and implementing innovative programs and partnerships to ensure that early and ongoing transition planning actually supports youth to live in dignity, health and safety while pursuing their dreams.

Key Recommendations arising from this pilot research project are:

1 Early Transition Planning

Begin transition planning before youth reach age 14 and include Adult Developmental Services in the development of the Transition Plan to ensure early, consistent and ongoing support.



2 Collaborative Community Teams

Based on current practice of the Regional Working Group in Bruce Grey Region and the Connectivity Table in Cambridge, ensure consistent and effective support within collaborative community teams that include Child Welfare Services, Adult Developmental Services, addictions services, healthcare and mental health services, public health services, Probation and Parole, and Police services.



3 Increase Resources to Support Youth

Based on a revised Support Intensity Scale® assessment specific to youth with dual diagnosis who have been "Crown Wards," increase the resources allocated to support these youth.





4 Mandate Trauma-Informed Practice

Mandate and ensure trauma-informed practice across all Adult Developmental Services.



Lived trauma should inform practice

5 Evaluate, Mitigate, Implement

Ensure that the Ministry of Children Community and Social Services urgently evaluate the impacts and effectiveness of the Integrated Transition Planning Protocol (ITPP), mitigate negative consequences, and implement changes based on this study as well as on their own evaluation.



6 Conduct Further Research

Resource Community Living to conduct a province-wide Phase 2 of this pilot research and become a learning organization.



7 Individualized Services

Ensure individualized Adult Developmental Services that recognize and address the complex realities of youth.





Supporting Youth Transitions: Respecting Dignity, Fulfilling Dreams

Young people transitioning from Child Services to Adult Developmental Services, like all young people, want to build futures based on their own priorities, decisions and dreams. Some face multiple barriers to such empowerment and self-determination; several of which are erected by the very systems that are supposed to provide safe places to live and support youth self-empowerment.

In 2018-2019, Community Living Stratford and Area, Community Living Cambridge, Community Living Guelph and Wellington and Community Living Owen Sound and District conducted research in order to better understand these barriers. The goal of the research was to identify and implement strategies to more effectively support a particular group of youth. Who are these young people? These youth are currently 18-29 years old. They were “Crown Wards” in the Child Welfare System for a significant part of their lives and are in an ongoing transition to being supported by Adult Developmental Services. They have a dual diagnosis of developmental disabilities and mental health disabilities; many have been diagnosed with Fetal Alcohol Syndrome (FASD) or Autism. Most have difficulty maintaining a household, sustaining healthy relationships with peers, and claiming their own rights and responsibilities as citizens. Twenty-five of these youth – living in Cambridge, Guelph, Owen Sound and District and Stratford – were interviewed for this research.

However, these youth are so much more than their labels. Many are building the skills necessary to maximize their safety and independence in everyday life. Some are trying to rebuild fractured relationships with their birth or adoptive families. Several have completed college or university, while a number are actively seeking employment or volunteer placements and working hard to overcome discrimination based on their disabilities.

Community Living is advocating that we meet these youth halfway. We want to work with government and community service providers to identify, strengthen and implement the innovative policies and programs necessary to enable these youth to know and claim their rights and determine their futures. They have a right to be respected and supported effectively by the government departments, systems and services mandated to support their self-empowerment and fulfill their human rights.

This Policy Brief shares the findings of a pilot research project implemented in 2018-2019 by Community Living. With seed funding from the Sunbeam Centre, Community Living invested in this pilot research because we are committed to the youth we serve. We are sharing this Policy Brief with government because it is critical that we act on the findings together.



Supporting Youth Transitions: Respecting Dignity, Fulfilling Dreams is our vision for moving forward. It is centred on an invitation to community partnership that brings service providers together in a model of wrap-around support that meets youth where they stand. It includes modifying existing policies and creating new policies that open avenues to their rights fulfillment, and resourcing and implementing innovative programs and partnerships to ensure that early and ongoing transition planning actually supports youth to live in dignity, health and safety while pursuing their dreams.

We look forward to meeting with you to discuss a province-wide Phase 2 of the research and the necessary changes to policy and program resourcing that will allow us to work together in ***Supporting Youth Transitions: Respecting Dignity, Fulfilling Dreams***.

Research Context

Since the inception of Integrated Transitional Planning Protocol (ITPP) in 2013, Community Living agencies in Ontario have been supporting youth who have a dual diagnosis of developmental disabilities and mental health disabilities, who were “Crown Wards” in the Child Welfare System and are transitioning to Adult Developmental Services. While serving this unique population of youth across the province, Community Living agencies have identified a number of barriers to the human rights and self-determination of these youth, including:

- 1) discrimination and internalized stigma;
- 2) histories of trauma,
- 3) dual diagnosis within a system that silos and fragments supports for people labelled with developmental disabilities and people labelled with mental health disabilities,
- 4) limitations in the ITPP, and
- 5) involvement with the criminal justice system and substance use.

These youth, each within their own lived realities, face common barriers to strengthening decision-making and other skills that will allow them to pursue their goals safely and with an awareness of possible risks and options. These skills include sustaining healthy relationships with peers, weighing risks against benefits, and understanding their own rights and responsibilities as citizens. In addition, these young adults have the same priorities and needs as any others: to explore, assert their independence, engage in consensual sexual relationships, deal with peer pressure, obtain and keep employment, and feel a sense of belonging to the community. When these priorities and needs go unmet, youth experiences of stigmatization and exclusion may lead to substance use, misunderstandings around consent within relationships, police and court interventions, and homelessness.

The high levels of risk and violence experienced by these youth indicate that Transition Planning processes and implementation, as well as available resources for ongoing supports, are inadequate to support youth self-determination and rights fulfillment. However, this issue has not been systematically studied. Against the backdrop of the ITPP, which remains unevaluated, this research represents a pilot study to investigate the experiences and priorities of Transition-Aged Youth and their service providers.



Research Goal

Our goal is simple: *to effectively support youth who have a dual diagnosis of developmental disabilities and mental health disabilities, who were “Crown Wards” in the Child Welfare System and are transitioning to Adult Developmental Services, to:*

- 1) *live with dignity*
- 2) *determine their own futures, and*
- 3) *reach their dreams*

Research Purpose and Objectives

The primary purpose of the research is to identify necessary changes to policies, programs and service provision in order to remove barriers to youth living with dignity, determining their own futures, and reaching their dreams. The secondary purpose of the study is to identify areas for future research, recognizing that this pilot study is based on the lived experiences of 25 youth.

The research objectives are:

- 1) Identify current factors that negatively impact youth quality of life;
- 2) Identify effective practices that positively impact youth quality of life:
 - a. during the transition to adult services, and
 - b. once supported in adult services;
- 3) Explore whether changes to the transition process implemented by Community Living as a result of the pilot research have contributed to improving youth quality of life;
- 4) Identify community service partners and potential partners vital to transition and support teams; and
- 5) Identify areas for future research and necessary changes to policies, programs and service provision.

Methodology

The findings presented in this Policy Brief were gathered from a review of academic literature, demographic data, and relevant legislation, as well as:

- 1) 25 individual interviews with youth who reside in the southwestern Ontario and are served by: Community Living Stratford and Area; Community Living Guelph and Wellington; Community Living Cambridge; or Community Living Owen Sound and District;
- 2) 4 focus group discussions with 29 Managers of Community Living organizations; and
- 3) 3 focus group discussions with 26 Disability Support Workers (DSW) who are currently responsible for supporting youth (for questions, see Appendix A).



Research Findings

The following pages highlight the findings of the pilot study conducted by Community Living and detail recommended actions that government, Community Living and other community service providers can take to ensure that, together, we can effectively support youth to live with dignity, determine their own futures, and fulfill their dreams.

Key Findings and Recommendations

Problem 1

Late Transition Planning Causes Youth to Fall Through the Cracks in the System



Youth thrive when they are being equipped with the skills to practice self-determination leading to a good quality of life. This happens when transition planning begins before youth reach age 14. When transition planning begins too late, youth face the risk of falling through the cracks between the Child Welfare System and Adult Developmental Services because they are moving from a Child Welfare System in which they have little control and few personal choices into the Adult Developmental Services system which requires them to make their own choices in the absence of a safety net.

At the same time, youth are stigmatized as children with developmental disabilities. They are put into “special classes” at school, ostracized and bullied because people do not understand their choices and behaviour, and excluded from peer and friendship groups. Unaddressed, this stigma becomes internalized resulting in youth not wanting to be part of any Adult Developmental Services, supports or events associated with disability or people with disabilities.

Recommendation:

1 Early Transition Planning

Begin transition planning before youth reach age 14 and include Adult Developmental Services in the development of the Transition Plan to ensure early, consistent and ongoing support through the following actions:

- 1) Develop and implement criteria for early identification of youth who have a dual diagnosis of developmental disabilities and mental health disabilities, who are also “Crown Wards” in the Child Welfare System and are transitioning to Adult Developmental Services.





- 2) Build on the current practice at Community Living Owen Sound and District by creating opportunities for the Developmental Services Ontario and Community Living to offer joint training for Child Welfare Services staff about implementing these criteria.
- 3) Change the criteria for Adult Developmental Services, as needed, to ensure that these youth qualify for the supports they need.
- 4) Reprioritize Transition Planning processes to ensure that the prevention of future harms in adulthood becomes a key priority, rather than only the mitigation of current harms.
- 5) Develop and implement a program designed to reduce or eliminate internalized stigma that has been proven to alienate youth from Adult Developmental Services, which includes informing youth about what can/will happen when youth access these services in the future; and ensuring rapport and trust-building between youth and Adult Developmental Services staff before youth become adults.
- 6) Change the Support Intensity Scale to accommodate youth realities and ensure that they have the resources and budgets needed to stay safe and have a good quality of life.
- 7) Review and update the individualized Transition Plan when youth are in any of the following situations to ensure adequate supports and resources:
 - a. involvement with court, prison, probation orders, etc.;
 - b. financial distress or emergencies;
 - c. experiencing violence/trauma; and/or
 - d. substance use without harm reduction supports.
- 8) As part of Transition Planning, and with the permission of youth, ensure that Adult Developmental Services have access to key information in the files held by Child Welfare Services required to identify and implement the most appropriate and effective supports and services (ie. histories of trauma, conflict with the criminal justice system).
- 9) Provide ongoing training and support for youth to ensure they are able to recognize the multiple risks they face and build the skills and resilience to make informed decisions to take risks, stay safe, avoid dangerous situations, and seek help when problems arise.
- 10) As youth build and strengthen their skills, demonstrate respect their abilities and right to self-determination by adjusting the supports and services provided.



- 11) Recognize when a person's disabilities prevent them from implementing particular skills and ensure that ongoing supports and services are provided to youth in that area (ie. financial management and banking, taking medications according to medical practitioner instructions, shopping for and preparing healthy meals).



... the “stepping down” apartment is a place where you come for a week and we make a full comprehensive assessment of your skills to be living on your own. And there are a lot of one-on-one supports to work with people and then they have a feeling of being on their own and there's no staff overnight. They learn about safety and all kinds of things and then we write up a document that goes back to either Family and Children's Services and the transition worker, or their families, with recommendations as to what needs to be done...

– Staff Member, Focus Group at Community Living Cambridge



I don't like the word handicapped. The word needs to go. Like, it's unacceptable because people with disabilities are like people in wheelchairs, basically. Like, they are retarded. And like they are stupid. “Oh, they'll never work. Oh like, yeah, they'll never work in a real environment.” But they are NOT stupid. They are still smart.

– Youth being served by Community Living Guelph and Wellington



Problem 2:

Fragmentation of Community and Health Services and Supports Puts Youth at Further Risk



Fragmentation of community services and supports, including the Child Welfare System, Adult Developmental Services, healthcare and mental health services, addiction services and transformative justice processes, puts youth at further risk. Current policies and practice prevent youth from accessing multiple services simultaneously; forcing youth to choose which harms to address and which to ignore. For example, once a young person is labelled as having a developmental disability it is extremely difficult to access mental health services as mental



health service providers feel ill equipped to support people with developmental disabilities. Similarly, services focused on harm reduction and addictions often refuse to serve people with developmental and/or mental health disabilities. The system is not designed to provide effective supports to youth with a dual diagnosis, particularly youth who use substances or are involved with the justice system. This fragmentation prevents youth from accessing appropriate and effective supports to live with dignity and claim their human rights.

Recommendation:

2 Collaborative Community Teams

Based on current practice of the Regional Working Group in Bruce Grey Region and the Connectivity Table in Cambridge, ensure consistent and effective support within collaborative community teams that include Child Welfare Services, Adult Developmental Services, addictions services, healthcare and mental health services, public health services, Probation and Parole, and Police services through the following actions:



- 1) Provide opportunities for service providers to share knowledge of potential resources, effective practices, and strategies for connecting youth with additional resources, supports and services.
- 2) Ensure that management and staff understand what it means to practice inclusion and respect each youth as an individual human being, as well as to change policies, budgets, programs and practice to reflect the principles of inclusion and respect.
- 3) Create opportunities for Adult Developmental Services working with youth to provide professional development training for service providers, partners, and the Ministries of Education, Children and Youth Services, and Community and Social Services about effective practices for working with youth so that they continue to receive supports based on their goals, priorities and needs.



Our connections to other sectors have broadened; we're connecting to sectors we historically haven't needed to connect with. We were connected somewhat with the Mental Health system before but nowhere near how we're connected now. That is a current and emerging practice and a good practice...And frankly at a systems level, at an upper level, we are getting a lot of push back around: "you shouldn't be doing that. Mental Health systems should be doing that." [But] if we compartmentalise things, then we're not talking together. And then the youth start falling between the cracks. Again.

– Staff Member, Focus Group at Community Living Guelph and Wellington





Problem 3:

The 'Support Intensity Scale' Assessment Ignores the Lived Realities of Transition-Aged Youth



When assessed against the Supports Intensity Scale® (SIS)¹, these youth are often identified as needing low-intensity support (including the frequency, amount and type of support needed)². However, the scale does not take into account the lived realities of youth with a dual diagnosis. Currently, higher-intensity support is only provided after these youth have experienced unsafe situations resulting from an Adult Developmental Services System that does not meet their priorities and needs combined with experiences of substance use, violence, and/or involvement with the justice system. The youth served by Community Living are exposed to more risks, experience insecurity and violence, and as a result their quality of life is decreased. For these youth, increased self-determination requires increased, rather than decreased, supports.

Recommendation:

3 Increase Resources to Support Youth

Based on a revised Support Intensity Scale® assessment specific to youth with dual diagnosis who have been “Crown Wards,” increase the resources allocated to support these youth in order to:



- 1) Ensure that youth have opportunities to strengthen the skills needed to claim their right to self-determination, including everyday living skills and healthy relationship skills;
- 2) Allow youth to access the resources necessary for addictions counselling, mental health services, legal aid and transitional justice services which, in turn, are equipped to serve youth with a dual diagnosis.

¹ “The Support Intensity Scale® measures the individual’s support needs in personal, work-related, and social activities in order to identify and describe the types and intensity of the supports an individual requires.” (<https://aaid.org/publications/supports-intensity-scale>).

² SIS-A measures support needs in the areas of home living, community living, lifelong learning, employment, health and safety, social activities, and protection and advocacy. The Scale ranks each activity according to *frequency* (refers to how often support is needed, e.g. 0/none to 4/hourly or more frequently), *amount* (refers to how much time in one day another person is needed to provide support, e.g. 0/none to 4 hours or more), and *type* of support (refers to what kind of support should be provided, e.g. 0/none to 4/full assistance). Additionally, the behavioral and medical section of the SIS-A rates exceptional medical and behavioral support needs. Ratings range from 1, or no support, to 2, or extensive support needed. Finally, a Supports Intensity Level is determined based on the Total Support Needs Index, which is a standard score generated from scores on all the items tested by the Scale (<https://aaid.org/sis/product-information>).



- 3) Adequately resource Adult Developmental Services to support youth. This means funding enough staff to lower ratios of youth-to-staff which will allow staff to effectively address youth priorities, needs and goals (including volunteering and employment).

“

I am just stuck in a room doing nothing; watching Netflix, doing nothing.

– Youth being served by Community Living Guelph and Wellington

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I think that some of the biggest challenges that we're experiencing are the Support Intensity Scale® and the documents that government use to indicate someone [who] might need less support. In actuality, they are at bigger risk...Normally I can devote ten hours and a set schedule for supported/independent living and that is not a support model that would be effective for these youth. It might be ten hours one day and then they've gone off for two weeks and it's trying to track them down. So, I think my biggest concern is our current system of assessing what level of support they need which is not indicative of the true realities that we face 6 months, 3 years, 6 years down the road.

– Staff Member, Focus Group at Community Living Owen Sound and District

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“

I am able to go out in the community. I want to live in the community. I can go do jobs. Like, I can still work. Everybody wants cash. I can't do the cash. My brain doesn't work in cash handling. And what about cleaning tables or helping take out garbage? I'm capable of that. But employers, "Oh no, we don't want people for that." It's like, then what am I going to do? I'm stuck.

– Youth being served by Community Living Owen Sound and District

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Problem 4:

For Youth, Reconnecting with Family May Lead to Re-traumatization





Youth with histories of trauma and abuse may be re-victimized or re-traumatized when they reconnect with family members or foster family as adults. For example, one young person was devastated when their father wanted to reconnect only to access their income support cheque. While another young person had no idea how to ask their mother to stop sleeping on their couch; she moved in as soon as they had an apartment of their own. While there is an assumption within the system that re-connection with family is a positive step, for youth who have experienced violence and exploitation at the hands of their family members re-connection can lead to renewed violence.

Recommendation:

4

Mandate Trauma-Informed Practice

Mandate and ensure trauma-informed practice across all Adult Developmental Services by taking the following actions:



- 1) Jointly develop and implement a Trauma-Informed Practice policy within the Ministry of Children Community and Social Services, the Ministry of Education, and all services providers funded by these Ministries;
- 2) Develop and provide training for all managers and staff within Adult Developmental Services on Trauma Informed Practice, based on the new policy;
- 3) Ensure Trauma Informed Practice³ throughout Adult Developmental Services that includes enhanced supports for youth reconnecting with family members and/or foster parents who were/are perpetrators of abuse;
- 4) Develop and implement, in partnership with youth, a Risk Assessment Tool to identify the health and safety risks that youth face and strategies, including harm reduction, that youth and service providers can implement together to maximize youth safety and wellness; and
- 5) Ensure that youth have ongoing access to mental health service providers who are trained to work with dual diagnosis and are equipped to support youth to build strategies to live safely and independently rather than over-medicating youth to render them compliant.

³ According to the BC Provincial Mental Health and Substance Use Planning Council, Trauma Informed Practice includes: (1) working at the client, staff, agency, and system levels from the core principles of: trauma awareness; safety; trustworthiness, choice and collaboration; and building of strengths and skills; and (2) discussing the connections between trauma, mental health, and substance use in the course of work with all clients; identify trauma symptoms or adaptations; and, offer supports and strategies that increase safety and support connection to services (http://bccewh.bc.ca/wp-content/uploads/2012/05/2013_TIP-Guide.pdf).



Problem 5:

Current Policies and Funding Models Inadequately Resource Adult Developmental Services to Support the Goals and Dreams of Youth



Since the implementation of the ITPP in 2013, Community Living has been supporting youth with dual diagnosis who are transitioning from the Child Welfare System to Adult Developmental Services. Only now, reflecting on the first five years of service, is Community Living in a position recognize gaps between the supports offered and youth priorities, needs and goals. Currently, Adult Developmental Services are not equipped to provide the specialized supports needed to strengthen youth self-empowerment and self-determination skills such as those needed to obtain and keep employment, travel independently, manage their finances, pursue hobbies and interests, and build and maintain healthy interpersonal relationships. Other barriers to effectively supporting youth include: (i) the need to retrain current staff and hire additional staff with qualifications specific to youth lived realities; (ii) lack of coordination between programs serving youth with a dual diagnosis; and (iii) not enough resources to effectively implement the ITPP across Ontario.

Further, policies and programs designed to serve youth often limit their understanding of youth dignity and their right to master the skills of everyday living. Within Adult Developmental Services, youth are often not invited to share their dreams and aspirations. Therefore, these dreams and aspirations do not become part of Individualized Service Plans (ISPs), nor are youth encouraged to pursue them.

Community Living is working to transform and strengthen the way we work. We recognize that we must become a learning organization; constantly identifying, documenting, and implementing the most effective practices for supporting youth.

Recommendation:

5 Evaluate, Mitigate, Implement

Ensure that the Ministry of Children Community and Social Services urgently evaluate the impacts and effectiveness of the Integrated Transition Planning Protocol (ITPP), mitigate negative consequences, and implement changes based on this study as well as on their own evaluation.





Recommendation:

6 Conduct Further Research

Resource Community Living to conduct a province-wide Phase 2 of this pilot research and become a learning organization that:



- 1) Documents current effective practices for supporting youth;
- 2) Conducts further and systematic research about strengthening our effectiveness at supporting these youth;
- 3) Designing and implements processes for enhancing services based on individual youth priorities, needs and goals including ongoing documentation of what is working for whom;
- 4) Identifies and implements staff and management training that supports and sustains our practice as a learning organization;
- 5) Adapts organizational practice to support youth peer culture, build a support system that is flexible and recognizes the changing interests and priorities of youth;
- 6) Ensures leadership that is bottom-up, youth-driven and sees possibilities instead of problems; and
- 7) Develops tools for community partners to support youth to meet their priorities, needs and goals.



I think that I've also noticed a lot of ways that [certain Group Homes], they just give up on us. They don't see anything through. Day to Day they just come into work and it's just like drudge. Come into work and they want the day to end. Every time staff come into work here they want to leave, because it is tiring and working all day. Like, any job they want to go home at some point. You should love coming into work because everyday is something new. There is something to do. There are things that I have planned and that people do with me. When I turned 20, I went to something that would never happen in a million years. I went to a strip bar for the first time. It was the most fun I have ever had. In other services, that is something that would never happen in a million years. I would never have been able to go to a rock concert or get a gun license. There are things that I never thought I would do in a million years.

– Youth being served by Community Living Stratford and Area





...there was a need for something more and so what we were saying, there needs to be transitional homes and this would work and this is what we need and we need more staffing and it won't be a group home because you say group home to these guys and they run in the opposite direction and so we opened two transitional homes that have just been amazing. We've had people that have transitioned so it's like a step between the foster home and they get to practice living on their own and there's almost 24 hours support there if they need it. If they don't then we back off and then from there we then transition them into their own apartments. I don't know if other agencies are doing that but we are and it works so amazingly well.

– Staff Member, Focus Group at Community Living Cambridge



Recommendation:

7 Individualized Services

Ensure individualized Adult Developmental Services that recognize and address the complex realities of youth through the following actions:



- 1) Resource Community Living to train staff to effectively support youth who have histories of trauma, dual diagnosis, use substances, need training about “safe sex” and consent, and are involved with the justice system. This training should involve self-reflection, co-learning and information about youth experiences from youth perspectives in order to support youth to heal, grow and thrive.
- 2) Build on current practices at Community Living Guelph and Wellington by expanding use of the Step System Assessment which assesses individual youth abilities for the purpose of implementing support teams that recognize and compliments those strengths.
- 3) Build on current practices at Community Living Cambridge by expanding the Stepping Out Program which allows youth to live in their own apartment with decreasing levels of support as they become more independent in preparation for living in their own apartment.
- 4) Ensure that Individualized Service Plans support youth to identity, pursue and achieve their goals and dreams beyond the skills of everyday living by:



- a. identifying and including steps to achieving youth goals and dreams in ISPs;
- b. discussing how to balance these dreams against available resources, time and the realities of living with a dual diagnosis; and
- c. ensuring that available resources are allocated to completing the steps toward achieving youth goals and dreams.

“

When I came to this agency, they asked me what my interests were and what goals I wanted to make and what I wanted to do in the future. I made a short list because I didn't know exactly what I wanted to do. So it was just having people that were genuinely interested in what I wanted and more than what my goals were and trying things that I hadn't tried before. I think it really helped me to open my eyes to who I really am, not who I have been trying to be. Or who I want to try and change myself for. It helped me to focus on only me.

– Youth being served by Community Living Stratford and Area

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I'm really good at art and all different types of artistry. I can draw and watercolour paint and sketch. I also like poems. I'm really good at poems, literacy, and I like to read dictionaries.

– Youth being served by Community Living Guelph and Wellington

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Conclusion

This research concludes that youth with a dual diagnosis who are transitioning from being “Crown Wards” within the Child Welfare System to being supported by Adult Developmental Services are a unique population with diverse priorities, goals and needs. Adult Developmental Services have not provided adequate services to support these youth to live with dignity, determine their own futures, and claim their human rights. It is critical that Adult Developmental Services adopt governance practices and organizational cultures that value youth peer culture. It is also vital that they implement flexible models of services and supports based on effective practices for supporting youth. This Policy Brief outlines initial changes to policy, resourcing, programming and practice that will better equip Adult Developmental Services to respect youth leadership and support youth dreams.

Further, this Policy Brief calls on the Ministry of Children Community and Social Services to urgently evaluate the impacts and effectiveness of the Integrated Transition Planning Protocol, mitigate negative consequences, and implement changes based on this study as well as on their evaluation.

In addition, province-wide Phase 2 of the research is needed to develop a clear and adequately-resourced policy implementation framework and program guidelines based on a thorough understanding of the diversities among youth with a dual diagnosis, including the range of their priorities, needs and goals. For more information, please contact: Trevor McGregor, Executive Director, Community Living Stratford and Area at tmcgregor@clsa.ca.

Together, the Ministry of Children Community and Social Services, the Child Welfare System, Adult Developmental Services, and other service providers have the power to effectively support youth transitions, respect youth dignity and fulfill youth dreams.



Appendix A: Research Questions

- ***During the individual interviews, youth were asked about:***
 - Their childhood experiences of living with family, in group homes and/or in foster care
 - experiences with the education system in elementary and secondary school
 - Experiences transitioning from Child Welfare Services to Adult Developmental Services
 - Everyday living experiences and arrangements with Community Living
 - Challenges they face on an everyday basis to living a good quality of life
 - Opportunities they have been provided
 - Support services they receive from DSW staff

- ***During the focus group discussions, Developmental Service Workers (DSW) were asked about:***
 - Defining the ways in which youth are 'at risk'
 - Youth experiences of transitioning from Child to Adult Services and the policies and practices of this transition
 - Consequences of the system not being equipped to identify and support youth with dual diagnosis
 - Challenges faced by DSW workers while supporting youth
 - Their role as DSW at Community Living
 - Recommendations to improve support services for youth and employment conditions for DSW

- ***During the focus group discussions, Managers were asked about:***
 - Defining the ways in which youth are 'at risk'
 - Youth experiences of transitioning from Child to Adult Services and the policies and practices of this transition
 - Issues with implementation of the Integrated Transition Planning Protocol
 - Challenges faced by Community Living while providing support to youth
 - Challenges faced by youth to live a good quality of life
 - Legislative and policy constraints to effectively supporting youth