

COMMUNITY DEVELOPMENT COMMITTEE

*HIS WORSHIP, THE MAYOR
AND COUNCILLORS*

SUBJECT: SUPPORT SERVICES FOR HIGH-RISK YOUTH IN BURNABY

RECOMMENDATIONS:

1. THAT Council forward a copy of this report to:
 - ◆ Burnaby's four Provincial Members of the Legislative Assembly (MLAs);
 - ◆ the Provincial Minister of Children and Family Development;
 - ◆ the Provincial Solicitor General;
 - ◆ the Provincial Minister of Health;
 - ◆ Burnaby's two Members of Parliament (MPs);
 - ◆ the Federal Minister of Citizenship and Immigration;
 - ◆ the Federal Minister of Human Resources and Social Development;
 - ◆ the Federal Minister of Justice; and
 - ◆ the Federal Minister of Health.

2. THAT a letter be sent to Burnaby's MPs and MLAs inviting them to meet with the Chair and Vice-Chair of the Community Policing Committee and representatives of the Burnaby-New Westminster Task Force on the Sexual Exploitation of Children and Youth to discuss possible responses to the service and support needs of high-risk youth.

3. THAT copies of this report be forwarded to the Community Policing Committee and the Social Issues Committee for information.

Copied to: City Manager Director Parks, Recreation and Cultural Services OIC, Burnaby RCMP Director Planning and Building
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To: His Worship, the Mayor and Councillors
From: Community Development Committee
Re: Support Services for High-Risk Youth in Burnaby
2007 October 01..... Page 2

REPORT

The Community Development Committee, at its meeting held on 2007 September 18, received and adopted the *attached* report providing information about gaps in services for high-risk youth in Burnaby, and highlighting the need for an increased financial commitment from senior levels of government to address the needs of high-risk youth.

Particularly vulnerable groups include lesbian, gay, trans-gendered, bi-sexual, and questioning (LGTBQ) youth, Aboriginal youth, immigrant and refugee youth, homeless and street-entrenched youth, youth with mental illness and disabilities, and youth living in poverty.

While the City of Burnaby and the Task Force on the Sexual Exploitation of Children and Youth could play role in addressing some of the needs, it is clear that most of the areas in which service deficits exist are the responsibility of senior levels of government. Thus, an infusion of resources from the Federal and Provincial governments would be required to reduce or eliminate the deficits.

Respectfully submitted,

Councillor C. Jordan
Chair

Councillor D. Johnston
Vice Chair

Councillor G. Evans
Member

TO: CHAIR AND MEMBERS
COMMUNITY DEVELOPMENT
COMMITTEE

DATE: 2007 September 13

FROM: DIRECTOR PLANNING AND BUILDING

FILE: 1750 20
Reference: Task Force on the Sexual
Expl. of Children and Youth

SUBJECT: SUPPORT SERVICES FOR HIGH-RISK YOUTH IN BURNABY

PURPOSE: To provide the Committee and Council with requested information about gaps in services for high-risk youth in Burnaby, and to highlight the need for an increased financial commitment from senior levels of government to address the needs of high-risk youth.

RECOMMENDATIONS:

1. **THAT** the Committee request Council to forward a copy of this report to:
 - Burnaby's four Provincial Members of the Legislative Assembly (MLAs);
 - the Provincial Minister of Children and Family Development;
 - the Provincial Solicitor General;
 - the Provincial Minister of Health;.
 - Burnaby's two Members of Parliament (MPs);
 - the Federal Minister of Citizenship and Immigration;
 - the Federal Minister of Human Resources and Social Development;
 - the Federal Minister of Justice; and
 - the Federal Minister of Health.

2. **THAT** a letter be sent to Burnaby's MPs and MLAs inviting them to meet with the Chair and Vice-Chair of the Community Policing Committee and representatives of the Burnaby-New Westminster Task Force on the Sexual Exploitation of Children and Youth to discuss possible responses to the service and support needs of high-risk youth.

3. **THAT** copies of this report be forwarded to the Community Policing Committee and the Social Issues Committee for information.

REPORT

1.0 BACKGROUND

At its closed meeting of 2006 August 28, Council approved the establishment, by the Lower Mainland Purpose Society for Youth and Families, of a group living house for high-risk youth in a City-owned house. Arising from the discussion, Council requested that staff prepare a report for the Community Development Committee on gaps in services and supports for youth at risk, and the need for additional Provincial support for such youth.

This report responds to that request.

In early 2007, the Burnaby-New Westminster Task Force on the Sexual Exploitation of Children and Youth (the Task Force) established a Workplan for the year. One activity identified in the Workplan was a discussion with Burnaby's MPs and MLAs on youth-related issues. It is believed that this report on gaps in services/supports for high-risk youth will provide a logical starting point for those discussions.

2.0 GAPS IN SERVICES AND RESOURCES FOR HIGH-RISK YOUTH IN BURNABY

Responses to a January 2007 survey of front-line service providers in Burnaby and New Westminster conducted by the Task Force suggest that the lack of appropriate supports and services renders the following groups of youth particularly vulnerable to engaging in high-risk behaviours:

- lesbian, gay, trans-gendered, bi-sexual, and questioning (LGTBQ) youth;
- Aboriginal youth;
- immigrant and refugee youth, especially those from war zones and other traumatic situations;
- homeless and/or street-entrenched youth;
- youth with mental illness and disabilities – both physical and cognitive; and
- youth living in poverty.

Burnaby youth have access to a wide array of services and resources, ranging from counselling, education and training to health services and recreational opportunities. Nevertheless, local service providers report that there are many gaps in services which make it difficult to support and/or treat youth who engage in high-risk behaviours. Those gaps are focused primarily in the following five service areas:

- targeted youth services and supports (i.e., for the six groups of vulnerable youth noted above);
- youth outreach;
- youth detox and addictions treatment;
- safe, affordable and supportive housing for youth; and
- youth health services.

Appendix 1, *attached*, contains a detailed inventory of locally-available services in the five service areas.¹ The Appendix also summarizes service provider concerns about those services, and identifies additional service needs, as articulated in responses to the aforementioned service provider survey. The concerns and service needs in each of the five service areas are discussed below.

2.1 Targeted Services and Support

For the purposes of this report, “targeted services and support” pertains to resources focused on the six groups of vulnerable youth noted above.

With regards LGTBQ youth, service providers report that there is a great need for community education on homophobia, in order to reduce discrimination, bullying, and other violence, and to increase positive opportunities for such youth.

Similarly, Aboriginal and immigrant/refugee youth are often subject to discrimination and bullying. These latter groups also have particular cultural needs, and require culturally-sensitive health, educational, housing, economic, social, and recreational supports. Resources for Aboriginal youth in Burnaby are extremely limited. As for immigrant/refugee youth, many do not have access to free trauma counselling and support, to free ESL training, and to financial support through the period of transition into the new culture. Agencies providing settlement services to immigrants and refugees in Burnaby report that they do not have adequate resources to focus on the needs of youth (as distinct from the needs of the entire family), although this situation might be partially ameliorated by recent Federal funding for school-based settlement workers. The two-year funding package will enable the Burnaby School District to hire the equivalent of ten full-time positions for the 2007/08 and 2008/09 school years. Also recently announced is funding for four settlement outreach workers, who will focus primarily on Afghani and African immigrants and refugees in the Edmonds area.

As with Aboriginal and immigrant/refugee youth, resources in Burnaby for street-entrenched and/or homeless youth are also limited. A Burnaby-based safe house for sexually exploited youth ceased operations in 2003 due to Provincial government budget cuts. For the past three years, also due to Provincial

¹ Every effort has been made to ensure the information in the Appendix is accurate and up-to-date. However, as resources and services continually evolve, the inventory of services should be viewed as illustrative of the services available, rather than as an exhaustive list of the services currently available.

government budget reductions, the Edmonds Youth Resource Centre has been able to provide only 12 hours of drop-in service per week. During the three evenings per week that the Centre is open, youth can participate in recreation-type activities, and access condoms, toiletries, and information about services and supports they may require. However, despite the fact that the Centre is frequented by high-need youth with issues around mental illness, drugs, poverty, and violence, the Centre is not able to provide one-to-one counselling or intervention services. What is required by street-entrenched and/or homeless youth is either a twenty-four hour or a dusk-to-dawn type of drop-in centre where they can find safety, warmth, hot food, a bed, support, and washroom and shower facilities. Service providers also suggest that Burnaby requires a restorative justice program for street-involved youth who engage in petty crime such as graffiti and shoplifting, and who are not being charged and processed through the criminal justice system. The purpose of a restorative justice program would be to have the youths acknowledge the negative impacts of their actions, and to redirect their energies in a more positive direction.

The particular needs of youth with disabilities and youth living in poverty and are alluded to below in the sections on housing and health services.

2.2 Youth Outreach

As the information in Appendix 1 suggests, there are a few outreach workers liaising in various capacities with youth in Burnaby. However, given that outreach is the most effective way to make contact with high-risk youth, local service providers advise that more outreach is needed - including mental health outreach services, and a night van to provide street youth in all areas of Burnaby with supplies (e.g., to ensure their health and safety). The dusk-to-dawn or twenty-four hour drop-in centre model alluded to in Section 2.1 would increase outreach capacity considerably. Service providers also stress the need for longer-term sustainable funding for outreach positions, most of which are currently funded through time-limited contracts.

2.3 Youth Detox and Addictions Treatment Services

Although Burnaby youth with substance abuse issues can access free, confidential assessment, counselling, educational, and referral services, service providers report that there is an extreme shortage of youth detox beds², and affordable youth residential treatment programs.³ Moreover, few of the services are available “on demand”⁴, or in the evening and on weekends. Some can be accessed only through the Ministry of Children and Family Development (MCFD) or an

² Currently, there are six youth detox beds for the whole Fraser region.

³ There are fewer than 30 residential treatment beds to serve youth in the whole Lower Mainland, and some of those carry a considerable fee for service.

⁴ There is often a very small window of opportunity for securing a youth’s agreement to entering detox and treatment, and thus the ability to seize an opportunity when it arises is crucial.

addictions worker. Finally, some of the services have additional barriers, such as requirements for substance abstinence or sobriety, which render many youth ineligible.

2.4 Safe, Affordable and Supportive Housing for Youth

One of the most critical service gaps is housing for youth who are unable, for a variety of reasons, to live in their family home and who are not under the protection of MCFD. As noted above, the Burnaby-New Westminster area no longer has a safe house for youth fleeing sexual predators and violent situations. Such youth may be able to access resources in Surrey, Maple Ridge, or Vancouver, but waitlists are usually long. Also in short supply is short-term emergency housing, transitional housing (e.g., for parenting and pregnant youth), and second-stage housing (e.g., for youth completing addictions treatment.) Burnaby has a number of group homes for youth who have cognitive handicaps and/or behavioural issues, but the need outstrips the supply. As with addictions treatment programs, service providers report that barriers to service, including “gating” by MCFD (i.e., access only through MCFD), are a challenge for youth and their advocates seeking to access housing resources.

2.5 Youth Health Services

Service providers suggest that there is a need for a youth health clinic, similar to the one operated by Fraser Health Authority at Burnaby Heights Community Resource Centre – but which also serves youth younger than 13 years – in South Burnaby. The existing clinic in North Burnaby provides access to free and confidential medical and health services for youth aged 13 to 21 years. According to service providers, a resource similar to the Evergreen one-stop prenatal care program for youth in Vancouver – to which Burnaby youth no longer have access – and a street nurse, would also benefit Burnaby youth.

With regards mental health, relevant services are provided to children and youth up to the age of 19 years by MCFD at three sites in Burnaby. Requests for direct service must come from the potential client for reasons of confidentiality, with the result that many youth in need do not access services. The Child and Youth Mental Health Program can assess a client’s mental health needs, and assist in forming a plan to meet those needs, either in Burnaby or using regionally-based services. The Program, however, is not an emergency service, and does not treat autism and a number of developmental disorders. Service providers report that more emphasis must be placed on prevention and early intervention (i.e., intervention at the first signs of depression rather than after a suicide attempt), especially with youth under the age of 13 years. Service providers also express concerns about the lack of an outreach component for the Child and Youth Mental Health Program.

3.0 ADDRESSING THE NEEDS

The majority of the needs discussed in Section 2.0 of this report can only be addressed through additional senior government resources – and in particular, Provincial resources. The Province is responsible for ensuring the safety and well-being of youth in British Columbia, which includes the adequate provision of:

- services and supports for Aboriginal youth;
- addictions treatment and support;
- affordable, flexible, and supportive emergency, transitional and second-stage housing;
- physical and mental health services; and
- victims services and youth-focused crime prevention initiatives.

The Province and the Federal government need to work together to meet the counselling and settlement needs of immigrant and refugee youth and, as noted above, to ensure that appropriate community supports exist for youth diverted from the justice system.

The Task Force, on behalf of the City, could assume a role in meeting some of the needs outlined in Section 2.0 that are within the mandate of local government. For example, the City could assist efforts of the Burnaby Restorative Action Group (BRAG) to establish a youth-focused restorative justice program in Burnaby recognizing that, to be sustainable, the program would require a partnership consisting of at least both senior levels of government⁵, the School District, the RCMP, and relevant non-profit agencies.

As noted above, members of the Task Force believe that a focused meeting between local Federal and Provincial elected officials, the Chair and Vice-Chair of the Community Policing Committee, and representatives of the Task Force could prove useful in highlighting the needs of high-risk youth in Burnaby, and in commencing a dialogue and problem-solving process to address those needs.

4.0 SUMMARY AND CONCLUSIONS

Burnaby youth have access to a wide range of services designed to keep them safe and healthy, and to optimize their life opportunities. However, responses to a January 2007 survey of local service providers, conducted by the Burnaby-New Westminster Task Force on the Sexual Exploitation of Children and Youth, suggest that serious gaps in services and supports hinder the efforts of service agencies and families to support high-risk youth. Particularly vulnerable groups include LGTBQ youth, Aboriginal youth,

⁵ The Federal Youth Criminal Justice Act has a considerable focus on diverting youth from the justice system, and into more supportive and rehabilitative environments. Thus, the Federal government has a moral obligation to assist communities with processes or structures to support that diversion. The Province is responsible for delivering services to victims of crime and for crime prevention initiatives, both of which are foci for restorative justice.

To: Community Development Committee
From: Director Planning and Building
Re: Gaps in Services and Support for High-Risk Youth in Burnaby
2007 September 13 Page 7

immigrant and refugee youth, homeless and street-entrenched youth, youth with mental illness and disabilities, and youth living in poverty.

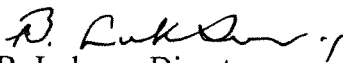
The service gaps are focused primarily in the following five service areas:

- targeted youth services and supports (i.e., for the six groups of vulnerable youth noted above);
- youth outreach;
- youth detox and addictions treatment;
- safe, affordable and supportive housing for youth; and
- youth health services.

While the City of Burnaby and the Task Force could play a role in addressing some of the needs, it is clear that most of the areas in which service deficits exist are the responsibility of senior levels of government. Thus, an infusion of resources from the Federal and Provincial governments would be required to reduce or eliminate the deficits. Nevertheless, members of the Burnaby-New Westminster Task Force on the Sexual Exploitation of Children and Youth believe that the City of Burnaby could play a role in focussing attention on the issue by inviting local MLAs and MPs to meet with Task Force and City representatives to discuss the service needs of high-risk youth, and to commence a process to address those needs.

In order to ensure relevant Federal and Provincial officials are aware of the youth services situation in Burnaby, it is recommended that copies of this report be forwarded to the Provincial Minister of Children and Family Development, the Provincial Solicitor General, the Provincial Minister of Health, the Federal Minister of Citizenship and Immigration, the Federal Minister of Human Resources and Social Development, the Federal Minister of Health, the Federal Minister of Justice, and Burnaby's four MLAs and two MPs.

It is further recommended that Burnaby's MPs and MLAs be invited to meet with the Chair and Vice-Chair of the Community Policing Committee and representatives of the Burnaby-New Westminster Task Force on the Sexual Exploitation of Children and Youth to discuss possible responses to the service and support needs of high-risk youth.


B. Luksun, Director
PLANNING & BUILDING

JS/sla/sa
Attachment

Copied to: City Manager
Director Parks, Recreation and Cultural Services
OIC – Burnaby RCMP

R: Long Range Clerical\DOCS\Joan\Reports\CDC report on at-risk youth facilities.doc

Services for High-Risk Youth in Burnaby and New Westminster

IDENTIFIED GAPS IN SERVICES

1. Targeted Youth Services and Support
(i.e., for lesbian, gay, trans-gendered, bisexual, and questioning (LGTBQ) youth, aboriginal, immigrant/refugee, and street entrenched/homeless youth, and youth with disabilities, and youth living in poverty)
2. Youth Outreach
3. Youth Detox and Addictions Treatment
4. Safe, Affordable and Supportive Housing for Youth
5. Youth Health Services

SERVICES AVAILABLE

1. **Targeted Youth Services and Supports**
(i.e., for LGTBQ, aboriginal, immigrant/refugee, and street entrenched/homeless youth, and youth living with mental illness and disabilities, and youth living in poverty)

Burnaby youth currently have access to:

- information and support around sexual identity issues (GAB Youth Services)
- homework clubs for aboriginal youth (Aboriginal Leadership Paragon Society)
- leadership programs for aboriginal youth (ALPS)
- mentorship programs for aboriginal youth (Spirit of the Children)
- drop-in programs for aboriginal youth (Spirit of the Children)
- Aboriginal Education Support Team (Burnaby School District)
- Aboriginal Team (MCFD)
- family support sessions for immigrant/refugee youth through Byrne Creek Secondary School (Burnaby School District)
- support programs, such as after school activities, youth outreach, and life skills for targeted ethnic groups (Burnaby School District with SUCCESS and Immigrant Services Society)
- Settlement Workers in Schools (Burnaby School District – imminent)
- non-residential community support services for homeless and street-involved youth (Covenant House, Vancouver)
- 2 beds for homeless, mentally ill and/or addicted youth (Kla-How-Eya Youth Safe House in Surrey)

- 5 bed resource for youth, aged 13 to 18 years, who are homeless and/or abused (Iron Horse Safe House in Maple Ridge)
- 3 bed safe house in Surrey for sexually exploited youth (Servants Anonymous Society)

Concerns expressed by service providers:

- there is a great need for community-wide supports for queer youth
- there is a great need for culturally sensitive health, educational, housing, economic, social, and recreational supports for Aboriginal and immigrant and refugee youth
- there is a need for much more settlement support, including free ESL courses, free trauma counselling, and financial assistance for immigrant and refugee youth. The needs of these youth need to be considered separately from the needs of their wider families.
- homeless and street-entrenched youth require much more support and many more opportunities for integration into mainstream society
- there is a need for restorative justice services and other rehabilitative processes for street-entrenched and other youth caught engaging in petty crime, in order to redirect their energies in a more positive direction.

2. Youth Outreach

Burnaby youth currently have access to:

- two sexually exploited youth outreach workers (St. Leonard's Society and Lower Mainland Purpose Society)
- one homeless outreach worker (Progressive Housing Society [but not youth specific])
- one outreach worker in elementary schools focussing on transitioning students to high school (Cameray Counselling Centre)
- one preteen outreach worker for Metrotown (Cameray Counselling Centre)
- one mobile health van in New Westminster and south Burnaby (Purpose Society)
- two youth addictions outreach workers (Burnaby Addictions Services and Fraserside Community Services)
- four Settlement Outreach Workers (MOSAIC; imminent; focused on Edmonds area; focused on Afghani and African groups) [not youth specific]

Concerns expressed by service providers:

There is a great need for:

- more outreach to street entrenched youth and youth with mental illness
- more outreach period
- longer-term, sustainable funding for outreach positions.

3. Youth Detox and Addictions Treatment

Burnaby youth currently have access to:

- counselling, support groups, and educational workshops (Odyssey 1 Substance Misuse Services)
- school and community based addictions prevention services (Burnaby School District, Fraser Health)

- “Building Skills for Success at School” Program (Burnaby School District, Fraser Health)
- assessment, counselling and referral service for youth with substance misuse issues (Fraser Health)
- non-residential individual and group treatment for substance misuse for youths aged 13 – 18 years (DEWY – Pacific Community Resources Society)
- 6 youth detox beds, for youth aged 14 to 18 years, at Creekside Withdrawal Management Centre (formerly Maple Cottage Detox) in Surrey; serves entire Fraser Health Region (Fraser Health)
- non-medical detox beds (PLEA)
- 6 bed residential substance abuse treatment program for adolescent males, aged 14 -18 years (Last Door – New Westminster)
- residential substance misuse treatment for adolescent females, aged 14 – 18 (some beds fee for service) (The Cedars - Purpose Society - Burnaby)
- 9 bed residential substance misuse treatment program for adolescent females, aged 12 – 18 (Daughters and Sisters – PLEA – Surrey)
- 10 week, 8 bed residential treatment program for adolescents, aged 13 – 18 years, with substance misuse issues; serves entire Province of British Columbia (Peak House – Pacific Youth and Family Services - Vancouver)

Concerns expressed by service providers:

- there are too few youth detox beds, and far too few subsidized treatment beds.
- there are too many barriers to accessing treatment (e.g., hours of operation, lack of service availability “on demand”, eligibility requirements, referral only through MCFD or addictions workers).

4. Safe, Affordable and Supportive Housing for Youth*

Burnaby youth currently have access to:

- 6 emergency placement beds for youth 11 - 17 years with behavioural problems; MCFD referral (Orenda House - Elizabeth Fry Society).
- 7 emergency placement beds for youth – male and female - aged 13 – 18 years; includes counselling and assessment. Maximum 6 week stay; MCFD referral (Esau House – St. Leonard’s Society).
- 3 bed group home for female youth, aged 13 – 17 who are at-risk of engaging in high-risk behaviours; MCFD referral (Southside – St. Leonard’s Society)
- 5 bed group living house for youth with an income (Agape House – Purpose Society/Agape Society)
- 5 bed group living house for youth with an income (Olivet House – Purpose Society)

*This category includes housing other than residential addictions and mental health services, and residential resources noted above for homeless and street-entrenched youth.

Concerns expressed by service providers:

- too many of the resources are “gated” i.e., accessible only through MCFD, or accessible only if specific criteria, such as sobriety, are met

- there are very few actual resources in Burnaby, and not enough resources in the surrounding geographic area to meet needs.
- the continuum of required housing – from emergency and short-stay to 2nd stage housing – is incomplete or inadequately resourced.

5. Expanded Youth Health Services

Burnaby youth currently have access to:

- free confidential drop-in medical services for youth under 22 years (Burnaby Youth Clinic – Fraser Health)
- support and counselling for young and isolated pregnant women – no medical care involved (Purpose Society)
- one-stop shop for youth health services including HIV/AIDS clinic, support, and education, medical care, and mental health support (Youth Source, New Westminister Youth Clinic – Purpose Society, Fraser Health).
- mental health assessment and follow-up (MCFD Child and Youth Mental Health Services)
- assessment and treatment program for youth with psychiatric disorders (The Maples - MCFD)
- support, guidance, prenatal care for youth; no medical care involved (SMILE – St. Leonard’s Society)
- Adolescent Psychiatric Ward (Surrey Memorial Hospital – Fraser Health)
- Early Psychosis Intervention Program (Eagle Ridge Hospital – Fraser Health)
- suicide and crisis intervention for youth (Eagle Ridge Hospital - Fraser Health)
- health van providing food, clothing, blankets, disease prevention and resource information, condoms, limited needle exchange in New Westminister and south Burnaby; no medical care involved (Purpose Society)

Concerns expressed by service providers:

There is a great need for:

- a youth clinic in south Burnaby
- services for younger youth (e.g., under 13 years), especially for mental health issues
- a one-stop prenatal care program for youth (like Evergreen in Vancouver, which is no longer accessible to Burnaby and New Westminister youth)
- a street nurse
- more health education and early intervention in mental health issues
- emergency mental health services

Note: Base information gathered in January 2007 by Burnaby-New Westminister Task Force on the Sexual Exploitation of Children and Youth through survey of agencies serving high-risk youth. Every effort has been made to ensure the information is accurate and up-to-date. However, as resources and services continually evolve, this inventory of services should be viewed as illustrative of the services available, rather than as an exhaustive list of the services.

September 13, 2007

R:\Long Range Clerical\DOCS\Joan\Reports\Appendix 1 CDC Report At-Risk Youth Facilities.doc