

Realistic Implementation Plan to End Youth Homelessness in Ottawa (target: 2030)

Goal definition: "End youth homelessness" = reduce to *functional zero* — immediate housing and supports available for all youth who need them, and an effective prevention/diversion system that prevents new inflows from exceeding capacity.

Key local context & assumptions (evidence):

- Ottawa Point-in-Time Count (Oct 2024) enumerated 2,952 people experiencing homelessness in the city. <u>City of Ottawa</u>
- National PiT youth snapshot (2020–2022) found ~12% of PiT respondents were youth (13–24), and identified high rates of learning/cognitive limitations, mental health and substance-use issues among youth i.e., *invisible disorders are common and co-occurring*. I use the 12% figure as a working assumption to estimate Ottawa's youth population experiencing homelessness (~350 youth on a single night). Housing Infrastructure Canada+1
- Mayor Sutcliffe publicly pledged to end youth homelessness by 2030 and has signalled funding announcements in upcoming budgets. Implementation detail and exact municipal funding are still being developed. <u>CityNews Ottawa+1</u>

Strategic approach (3 pillars)

- Prevention stop youth from losing housing (family mediation, rent assistance, school-based supports).
- Diversion & Rapid Re-Housing (RRH) when youth face imminent homelessness, divert to safe alternatives and provide short-term rental assistance + supports.
- 3. **Permanent Supports** create scattered-site and congregate supportive housing for youth who need longer-term housing with integrated mental health/substance-use/cognitive-support services.

All pillars must be *trauma-informed*, *low-barrier*, *youth-centred*, and explicitly designed to meet needs of youth with invisible disorders (e.g., neurodiversity-aware programs, integrated addiction and mental health care, supported education/employment).

Timeline & targets (high level)

Phase 0 — Immediate: Planning & Rapid Mobilization (0–6 months)

- Actions: Create an inter-governmental Youth Homelessness Task Force (City, Province, Health, Child Welfare, NGOs, youth with lived experience); commission a detailed costed needs assessment focused on youth & invisible disorders (including hidden homelessness estimate for <16s); expand outreach hours; pilot 24/7 diversion hotline for youth.
- Targets: Task Force formed; needs assessment completed; 24/7 pilot hotline & outreach expansion launched.
- Indicative cost: \$0.5–\$1.0M (one-time planning + pilot staffing & data systems).

Phase 1 — Scale Prevention & Diversion (6–24 months)

Actions:

- Fund school-based prevention (counselling, housing navigation) and family mediation services.
- Expand youth RRH: provide short-term rent top-ups + case management for
 ~150 youth per year.
- Build "youth diversion" capacity with rapid small-grants, emergency motel alternatives, and youth-facing mediation teams.
- Targets (by end Year 2): Prevent *new* homelessness for 300+ youth annually via prevention/diversion; RRH capacity for ~150 concurrent youth placements.
- Indicative cost (annual once scaled): Prevention/diversion programs: \$3–6M/year; RRH rental assistance & case management: \$2–4M/year.

Phase 2 — Build Permanent Supportive & Transitional Units (Years 2-5; 2027-2030)

Actions:

 Create a mix of supportive housing (long-term, on-site supports) and transitional housing + rapid-exit units.

- Prioritise 24/7 staffed supportive sites for youth with co-occurring invisible disorders and 100–200 scattered-site RRH units with intensive wraparound services.
- Targets (by 2030): Construct / secure ~300–400 dedicated youth units
 (combination of supportive, transitional, and deeply affordable units), plus maintain robust prevention/diversion capacity.
 - Rationale: Ottawa PiT ~2,952 people; estimating youth share ~12% → ~350 youth on one night. To achieve functional zero and to cover hidden/undercounted youth plus turnover, 300–400 units is a defensible target. City of Ottawa Documents+1
- Indicative capital cost (one-time): \$60M \$160M (see assumptions & range notes below).
- Indicative operating cost (annual): \$7–15M/year (support services & operations).

Phase 3 — Sustain, Evaluate & Adapt (Years 4–10; 2029 onward)

- Actions: Ongoing monitoring, evaluation (PiT + local youth counts), continuous
 quality improvement, scale successful models, transition from emergency funding
 to steady provincial/federal/municipal allocations.
- Targets: Maintain functional zero; continuous reductions in first-time youth homelessness; reduced chronic youth homelessness and emergency system use.

Budget rationale & breakdown (illustrative estimates)

Important: these are *scenario* estimates using available evidence and comparable program cost ranges. Ottawa should commission a local cost study to refine exact figures.

1) Capital — housing creation (one-time)

- Assumption for per-unit capital cost (Ottawa): \$200k \$400k / unit for affordable/supportive units (range reflects land, construction costs, higher in urban centres). (This range reflects typical Canadian development costs for purpose-built affordable units in recent municipal planning and national housing program headlines; local tendering will refine it.)
- If target = 300 units: 300 × \$200k = \$60M (low) → 300 × \$400k = \$120M (high)
- If target = 400 units: 400 × \$200k = \$80M → 400 × \$400k = \$160M

Capital subtotal (illustrative): \$60M - \$160M.

(Recommend a blended financing model: federal NHS/Build Canada funds, CMHC

programs, provincial match, municipal land/brownfield conversions, non-profit partnerships, philanthropic leverage.) <u>Housing Infrastructure Canada+1</u>

2) Operating & support services (annual)

- Supportive housing operating cost per unit (evidence range): \$24k \$60k / year (i.e., ~\$2k–\$5k/month), depending on intensity of supports. AMHO (Addictions & Mental Health Ontario) cites operating costs in that range for supportive housing vs. much higher costs for institutional care. Addictions & Mental Health Ontario
- If 300 units × \$30k/year average = \$9M/year; if 400 units × \$36k/year = \$14.4M/year.
- Add prevention/diversion & RRH program annual costs: \$3–7M/year (staffing, small grants, rent supplements, school/community-based services).
- Data, outreach, youth navigator teams, evaluation, admin: \$1–3M/year.

Operating subtotal (annual): \$13M – \$25M / year (depending on number of units and service intensity).

3) One-time planning, data, IT & capacity building

Needs assessment, service mapping, upgrades to data systems (youth registry, coordinated entry), training in trauma-informed, neurodiversity-competent care:
 \$0.5–2.0M initial.

Funding model (recommended mix)

- **Federal:** Canada's National Housing Strategy / targeted homelessness funding (major share of capital). <u>Housing Infrastructure Canada+1</u>
- **Provincial:** Operating subsidies, mental health/addictions program funding, youth in care transition supports. Ontario
- Municipal: Land donations, zoning/fast-track approvals, seed operating funds, and oversight of coordinated entry. <u>Engage Ottawa</u>
- **Non-profits & Providers:** Service delivery, supportive housing partnerships (non-profit housing providers, health agencies).
- **Philanthropy & Social Finance:** Bridge capital and innovation pilots (e.g., social impact bonds for prevention).

• **Leverage savings:** show cost-offsets (reduced ER, police, corrections costs) to justify health/system partners contributing to operating costs (evidence shows integrated supports reduce other system use). Maytree+1

Program design features to overcome invisible-disorder barriers

(These are essential — without them prevention & diversion will underperform.)

- Low-barrier access & "no wrong door" flexible ID requirements, drop-in access, mobile outreach, and peer navigators to reach hidden youth. (National PiT shows hidden homelessness is high and youth are undercounted.) <u>Housing Infrastructure</u> <u>Canada</u>
- 2. **Integrated care on site or via warm-handovers** mental health, substance-use, and cognitive supports co-located with housing; specialized youth clinicians and rehabilitation/learning supports.
- 3. **Youth-centric case management caseloads** smaller caseloads for complex needs; neurodiversity-aware training for staff.
- 4. **Family engagement & mediation pathways** because 51% of youth cite interpersonal/family reasons for loss of housing, family reconciliation programs can be highly effective prevention tools. <u>Housing Infrastructure Canada</u>
- 5. **Youth in care transition supports** targeted programs for youth aging out of care (they are overrepresented among homeless youth). <u>Housing Infrastructure Canada</u>
- 6. **Data improvements** local youth counts (including <16), improved outreach mapping, and regular evaluation to capture hidden homelessness and service gaps. City of Ottawa Documents+1

Risks & mitigation

- Risk: Hidden homelessness & undercounting lead to underinvestment.
 Mitigation: Immediate youth-specific count & outreach to estimate true need (Phase 0).
- Risk: Insufficient operating funds to sustain supportive services.
 Mitigation: Prioritise operating subsidies, involve provincial health in funding service delivery, and cost-share agreements. <u>Addictions & Mental Health Ontario</u>

Risk: Construction timelines & rising costs.
 Mitigation: Use modular, conversion, or acquisition approaches to shorten timelines and reduce per-unit cost, and fast-track approvals.

Example 5-year funding scenario (simple illustration)

(Conservative mid-range numbers for clarity — refine with local costing)

- Capital (years 1–4): \$100M (to build/acquire ~300 supportive/affordable youth units at ~\$333k/unit average).
- Annual operating & programs (from Year 2 onward): \$12M/year (supportive operations + RRH + prevention + outreach).
- One-time planning & data: \$1M

First 5-year cash need (approx.): \$100M capital + \$30–40M operating (assuming ramp up) → \$130–140M total across 5 years.

(This is illustrative — could be lower with provincial/federal capital grants, or higher if unit costs are higher in Ottawa.)

Measurable outcomes & indicators

- Number of youth housed (by program type) and time to housing.
- Number of youth diverted from shelter entry.
- Reduction in youth counted in PiT (absolute numbers & percent).
- Reductions in emergency/service use (ER, policing) for youth engaged in supports.
- Client-reported outcome measures (housing stability, mental health functioning, education/employment engagement).

Next steps (recommended, immediate)

- 1. City to convene Youth Homelessness Task Force with mandated timelines and lived-experience representation (0–1 month). Mayor Mark Sutcliffe
- 2. **Commission a 3-month costed needs assessment** specifically for Ottawa youth (including hidden homelessness estimate for <16s). (0–3 months)

- 3. **Allocate pilot prevention/diversion funding** in the 2026 budget to demonstrate early wins (6–12 months). (Mayor signalled investments in 2026 budget.) <u>CityNews</u> Ottawa
- 4. **Issue RFPs for rapid-build/modular youth supportive housing** and negotiate operating partnerships with health providers and child-welfare. (6–24 months)

Closing note

Mayor Sutcliffe's 2030 target is **achievable in principle**, but only if Ottawa combines **ambitious capital creation** with **sustained operating funds**, and—critically—**tailors interventions to youth with invisible disorders** (who are more likely to be hidden, to have complex needs, and to cycle into chronic homelessness). The plan above gives Ottawa a practical, staged pathway with transparent budget ranges and the program features needed to reach functional zero while protecting youth with the most complex and invisible needs.