

# Quantitative Research in CBR: Data to Support Communities and Services



## *The Calgary Youth, Health and the Street Study*

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# Research Partners

- AIDS Calgary (co-lead)
- Social Work, U of Calgary (co-lead)
- Boys and Girls Club of Calgary (Sidedoor, Safehouse, Avenue 15, Street-Teams, Marlborough Teen Resource Centre)
- The City of Calgary
- Alberta Alcohol and Drug Abuse Commission (AADAC)
- Calgary Health Region (Safeworks)
- Wood's Homes (EXIT Community Outreach)
- John Howard Society
- The Alberta Youth Outreach Foundation
- Alberta Community Council on HIV (ACCH)
- Sexual and Reproductive Health Centre
- The Drop-Inn
- Bridging the Gap
- Canadian Red Cross



# Calgary Youth, Health and the Street Study – Community-Based Research

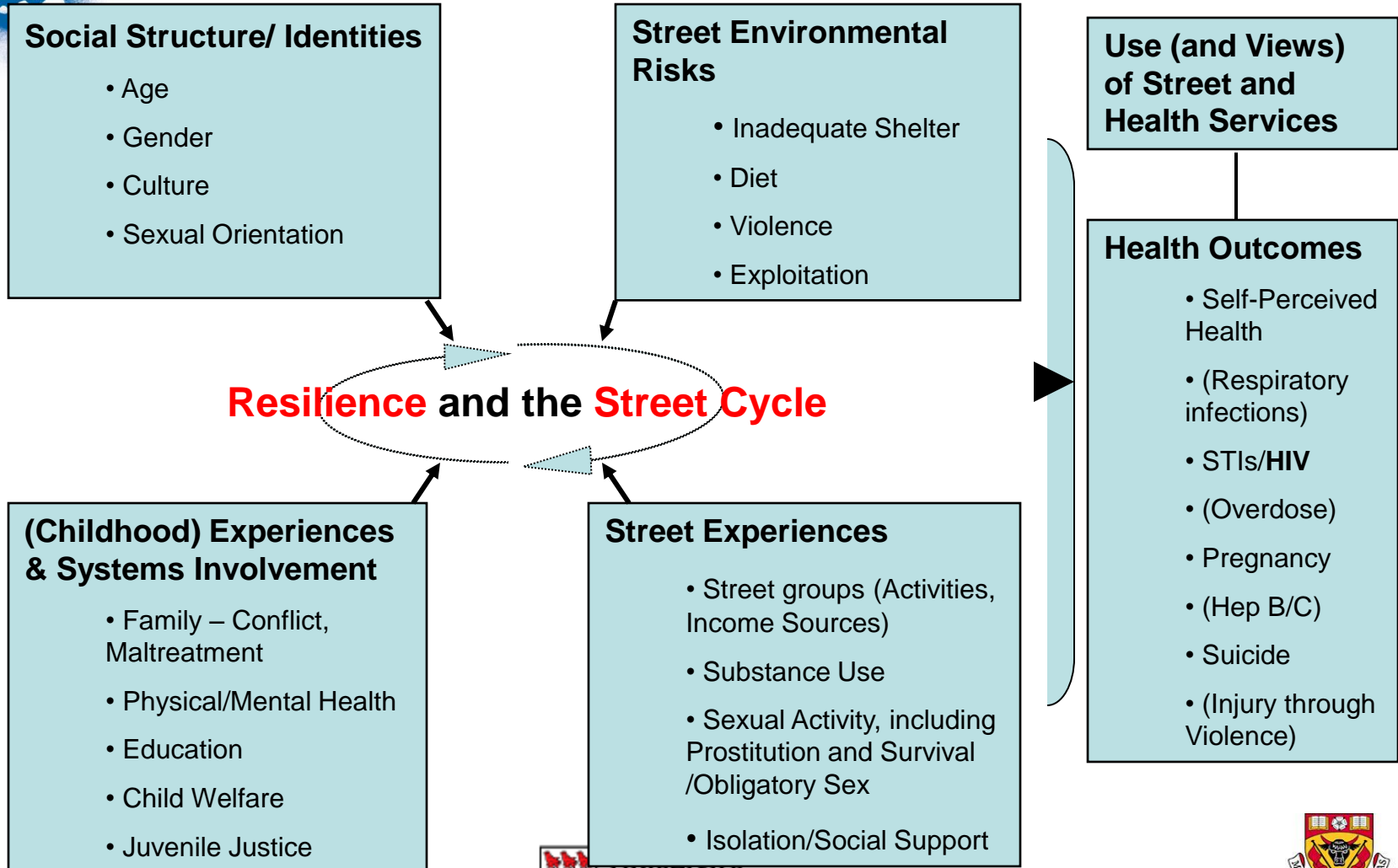
- **Study initiated by community agencies, led by AIDS Calgary**
  - 3 years of community commitment prior to funding
  - Support of CIHR CBRF
- **2004-2005 – Start-up and research plan development**
  - Survey finalized, pre-tested and pilot tested in collaboration with team of 13 youth/health agency representatives *and* youth with street experience; outreach worker research training; ethics approval
- **2005-2006 – Data collection and analysis**
  - Trained street outreach workers collected 355 (+) anonymous surveys at a variety of locations (all city quadrants; indoor/outdoor gathering places; agency locations; and shelters)
  - Trained outreach workers conducted in-depth interviews with 42 street-involved youth
- **2006 – Roundtables; Process evaluation**
  - 3 hour arts-based Roundtable with youth; 5 hour Roundtable with service providers
- **2007 – Dedicated period of KTE – 16 fact sheets, full report on-line**
- **2008 on – Policy work (CHF), teaching/research publications**



# *The Calgary Youth, Health and the Street Study*

- **Study Aim**
  - To provide information to improve services (prevention, safety, stabilization) for street-involved youth at all stages of street-life
- **Study Goals**
  - 1) Describe the spectrum of street-involved youth < 25 in Calgary and
    - explore the social, environmental, and institutional factors contributing to HIV and health risks, and service needs
  - 2) Use this information for collaborative service planning

# Determinants of Health for Street-Involved Youth





# Descriptive Findings – Some Highlights

- **Sample (n=355) 61% male; 52% ≤ 19 years old; 26% Aboriginal**
- **46% currently lived on the street, 33% had lived on the street in the past, and 20% were street-involved but had not lived on the street**
- **Life experiences:**
  - High prevalence of child maltreatment – witnessing domestic violence (54%), physical abuse (62%), sexual abuse (30%), neglect (42%), and emotional maltreatment (75%)
  - Almost 69% of street involved youth had been charged with a crime
  - 43% of youth reported mental health concerns, 38% had attempted suicide
- **Street experiences:**
  - 76% experienced violence while on the streets
  - 26% of youth were asked to exchange sex for food or shelter
  - 54% of youth were asked to serve as a look out for the police during illegal activities
  - 23% rated their health “fair” or “poor”
  - 48% had been pregnant/gotten someone pregnant







# Selected Findings – Health and Health Services Use

- Controlling for age group, ethnocultural group and sex:
  - significant health (physical, mental, violence) and health risk (pregnancy, survival/obligatory sex, prostitution, IDU) differences by level of street involvement
  - Youth living on the street were less likely than those who had not lived on the street to use a physician during office hours
  - those who had lived on the street were more likely to use services targeted to those at higher risk (e.g., mobile clinics, HIV/STI testing)

(Worthington & MacLaurin, *CdnJPubHlth*, 2009)



# Selected Findings – HIV

- **HIV Status**
  - Of the 55% who had tested for HIV
    - 2% (4) reported they were HIV positive
    - 11% (13) said “I don’t know”
    - 1.5% (3) said “results weren’t clear”

Worthington et al., *CAHR conference* 2006  
Worthington & MacLaurin, *CdnJPubHlth*, 2009





# Selected Findings – HIV

- **HIV Risk Perception**
  - Overall, 79% youth perceived no/low HIV risk; no significant difference in risk perception by level of street involvement
  - Of the HIV street risk experiences, only survival/obligatory sex significantly associated with perceived HIV risk
- **Condom Use**
  - 26% said they “always” used condoms; controlling for age, ethnocultural group and sex, no significant difference in condom use by level of street involvement

Worthington et al., *CAHR conference* 2006  
Worthington & MacLaurin, *CdnJPubHlth*, 2009



## Community Outcomes and Impacts (2009+)

- **Community agencies**
  - 8 used information to tailor services, 5 used data for funding proposals; (research) team development and communication
- **Street-involved youth/students**
  - Education: 1 youth BSW; 1 youth MSW; Research Coordinator further grad studies; 2 research practicum for BSW students
  - Service development for youth-run organizations
- **Outreach workers**
  - Research training/ augment résumé
- **Policy players**
  - CHF Youth Sector planning document; CHF submission to Alberta's Child Intervention Review Panel; CHF youth plan
- **University researchers**
  - Publications, 9 conference presentations
  - Further community and academic partnerships – Homelessness, Housing and Health ICE grant; CIHR intervention study; CBR pregnancy grant; CHF proposal development



# CBR: Benefits and Challenges

## • Benefits

- Integrated KTE
- Improved research Qs, processes, cultural alignment
- Community - increased research capacity; research demystified
- Academics - increased sensitivity to community issues
- Development of community and community-academic partnerships

## • Challenges

- Who/what is community?
- Time and resource intensive
  - Community: not often resourced for research; long timelines until information available
  - Academics: slow to publish
- Equity of relationships
- Research and advocacy



# Acknowledgements

- Street youth participants
- Calgary street youth serving agencies and street outreach workers
- Operating grant funding from CIHR HIV/AIDS Community-Based Research Program
- Cathy Worthington - CIHR New Investigator and AHFMR Population Health Investigator support