



Ontario Association of Young Parent Agencies
serving infants, children and young parents - together

l'Association Ontarienne des Agences pour Jeunes Parents
servir nourrissons, enfants et jeunes parents - ensemble



Building strong foundations: Recommendations based on the current state of live-in/intensive day programs for pregnant and parenting youth, their infants and children in Ontario

POLICY BRIEF Executive Summary

November 2024





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Suggested Citation

Burman, A., Denberg, H., Gnat, L., Khalil, J., Mina, M., O'Neill, L., Panchal, Z., Wells, M., & Morton Ninomiya, M.E. (2024). *Building strong foundations: Recommendations based on the current state of live-in/intensive day programs for pregnant and parenting youth, their infants and children in Ontario [Policy Brief]*. Wilfrid Laurier University. <https://researchcentres.wlu.ca/ccrla/research/interdisciplinary-and-indigenous-pathways-to-wellness/research-outputs.html>



Acknowledgements

This report was developed collaboratively by researchers at Wilfrid Laurier University, graphic designers Olivia Schultz and Ella Huber, and members from the Ontario Association of Young Parent Agencies (OAYPA).

The Wilfrid Laurier University research team would like to thank Olivia Schultz and Ella Huber for designing and formatting this report; Ekua Asabea Blair, Lesley Barraball, Suzanne Flier, Jane Kenny, Bev MacKillop, Joanna Mendez, and Tamar Meyer (listed alphabetically) for sharing their time and arms-length feedback on the study design and recruitment strategy; Fiona Inglis, librarian at Wilfrid Laurier University, for her expertise and assistance with developing the rapid review search strategy; Dr. Christina Han (Director of the Laurier Hub for Community Solutions) and Stephanie Wall (Laurier's Research Partnership Officer) for their administrative support in the early planning stages of this project; as well as the pregnant and parenting youth and Young Parent and Infant Agency staff who participated in this research.

Funding

This study was funded by OAYPA and matched funding from Mitacs Ontario.



Terms and Definitions

community-based

- support services open to the public and live-in clients for the agency
- community-based services are located at the organization as a virtual or at-home component (e.g., educational programming)

intensive day programming

- interchangeable with **intensive treatment services** in government policies
- refer to services with a strong component of mental health support

live-in

- interchangeable with **residential** and **out-of-home (OOH) care** in government policies
- refers to programming delivered in the agency's residence or shelter
- "live-in treatment" has replaced the term "residential treatment" due to the association with the legacy of residential schools, colonial trauma and harms to Indigenous people across Canada

participants and residents

- interchangeable with **clients** in government policies
- the term "participants" is seen to represent a broader range of service users
- refer to people who are accessing the supports and services; "residents" is reserved for people who access live-in programs and treatment

support services

- interchangeable with **supplementary support services** in government policies
- refer to services designed to meet residents'/participants' needs, available with or without a live-in component

supportive housing

- housing programs and services that provide housing assistance (e.g., rent subsidies) and/or support services (e.g., mental health services)

pregnant and parenting youth (PPY)

- referring to pregnant and/or parenting youth ages 13-29 in the context of this study

Abbreviations/Acronyms

CMHO	Children's Mental Health Ontario
MCCSS	Ministry of Children, Community and Social Services
MMAH	Ministry of Municipal Affairs and Housing
OAYPA	Ontario Association of Young Parents Agencies
YPIA	Young Parent and Infant Agencies
YPS TPR	Young Parent Services Transfer Payment Recipients
PPY	Pregnant and Parenting Youth



Executive Summary

Experiencing pregnancy and having a child at a young age can impact developmental and life trajectories for both the birthing parent and their child(ren). Research shows that pregnant and parenting adolescents, also referred to as pregnant and parenting youth (PPY), experience a four-fold higher prevalence of mental health disorders than their age-group peers without children. PPY are more likely to have a history of substance use and child welfare involvement than those aged 21 years and older. Evidence also shows that children born to PPY are more likely than children born to older birthing parents to develop cognitive and language delays, including developmental disabilities such as fetal alcohol spectrum disorder. Providing adequate support and programming that enhance transition-aged parents' skills, knowledge, and relationships, and provide them with a sense of stability, can promote positive life outcomes for both the birthing parent and their child(ren).

The Ontario Association of Young Parent Agencies (OAYPA) is a coalition of 20 member agencies dedicated to advocating for and supporting PPY (ages 13–29) and their children across Ontario. OAYPA member agencies provide comprehensive, community-based services focusing on mental health, early childhood development, housing, education, employment, and childcare. By promoting preventative strategies and systemic reforms, OAYPA aims to enhance the well-being and life outcomes of young parents and their children, using evidence-based interventions to ensure sustainable, positive impacts for vulnerable families.

Despite limited funding, with half of the agencies relying on private donations and fundraising, OAYPA supports the development of provincial policies and tools to ensure effective data collection and advocacy. However, there is a significant disparity in service availability across Ontario, with most MCCSS-funded agencies concentrated in the Greater Toronto Area and Eastern Ontario, leaving Northern regions and other parts of the province underserved. This regional disparity exacerbates inequitable access to essential services, perpetuating cycles of disadvantage for young parents and their infants and children.

PPY face numerous challenges, including mental health issues such as postpartum depression, anxiety, trauma, and substance use disorders, often compounded by minimal support and adverse childhood experiences. Their children are at higher risk for developmental delays in speech, language, and cognitive skills, making early identification and intervention critical. Structural and social inequities, such as socioeconomic disadvantage and minority status, are key drivers of health disparities for young families. The societal costs of inadequate support are significant, with stigma further harming vulnerable groups like racialized young mothers. However, investing in early childhood and family programs yields high returns, both economically and in terms of improved mental health outcomes.



OAYPA member agencies are well-positioned to provide these essential services, addressing developmental needs and reducing risk factors to create healthier, thriving families.

A number of Young Parent and Infant Agencies (YPIAs) receive funding from MCCSS to deliver services, as well as from other funders. Young parent services are funded by MCCSS as part of the ministry's healthy child development mandate. MCCSS is currently working with contracted YPIAs to develop standard descriptions for services delivered and target populations served.

OAYPA reached out to the Laurier Hub for Community Solutions to conduct research and use the research findings to inform a policy brief. A research team conducted three studies to inform policy recommendations: 1) a **rapid review** to synthesize global promising practices based on evidence-based literature; 2) an **environmental scan** of live-in and intensive day programs that serve PPY across Ontario, as well as public databases that report on PPY in Ontario; and 3) a **mixed-methods study** involving online surveys and interviews with PPY and staff at OAYPA Young Parent and Infant Agencies (YPIAs).

The **rapid review** identified 58 studies reporting on promising practices of young parent programs globally. The review revealed that effective programs were founded on the four principles of trauma-informed practice: 1) trauma awareness, 2) safe and trusting environments, 3) opportunities for choice, collaboration, and connection, and 4) strengths-based approaches and skill-building opportunities. The **environmental scan** found that despite decreasing pregnancy rates in Ontario, the proportion of youth under age 25 who experience mental health concerns during pregnancy has nearly doubled in the last ten years. The most frequent requests made by pregnant/parenting youth were for housing and support for mental health and substance use disorders. The top unmet need was housing. The **mixed-methods study**, which included 411 former/current PPY clients of YPIAs and 153 YPIA staff, revealed that the most helpful service that PPY reported accessing was housing support, followed by mental health and counselling services. Parenting youth reported that the most helpful service was childcare, followed by parenting skills, healthy eating, and nutrition. Youth confidence improved after accessing YPIA programs and services. Findings across all three studies support the need for increased financial, human, and time resources that agencies do not currently have. The following four recommendations are informed by this research.



Recommendations

Note to reader: Detailed rationale and actionable recommendations can be found on pages 39-43.

Recommendation 1: Improve equitable access to Young Parent and Infant Agencies and services (Immediate/Urgent)

Provide equitable access and core services for pregnant and parenting youth through increased funding from Ministry of Children, Community and Social Services (MCCSS).

Currently, only 11 of 20 young parent agencies receive consistent funding from MCCSS while the others rely on donations and private funding. Despite YPIAs' vital role in providing early interventions for PPY and their children, many regions of Ontario remain underserved. This recommendation highlights the need for strategic planning to address service gaps, the need for increased funding to account for cost-of-living adjustments, and collaboration with key partners to ensure a cohesive, province-wide support system for young families. Specifically, ***equitable access and service delivery can be improved through the expansion of targeted funding to all 20 OAYPA member agencies, alongside strategic planning and investments in Young Parent and Infant Agencies (YPIA), Programs and Services across the province to address critical service gaps.***

Recommendation 2: Enhance mental health services within Young Parent and Infant Agencies for the parent, child and dyad (Short-term)

Many PPY are disproportionately affected by mental health disorders, often exacerbated by structural challenges like adverse childhood experiences (ACEs), trauma, and systemic discrimination. The absence of mental health professionals across YPIAs limits the ability to address these issues. Early mental health interventions, especially those focused on parent-child dyads and trauma-informed care, are essential for improving both immediate and long-term outcomes, and studies show these investments yield significant societal and economic returns. To successfully implement this recommendation, resources must be dedicated to hiring qualified professionals who can provide low-barrier, trauma-focused care and reduce the impact of mental health and systemic challenges on young parents and their children. It is recommended ***that specialized mental health professionals (i.e. clinicians with expertise in dyadic mental health interventions) for PPY who attend YPIAs are funded. Mental health professionals can offer trauma-informed mental health supports focused on parent-child dyads, including infant and early childhood mental health services.***



Recommendation 3: Revise policies, funding, and eligibility to reflect changing demographics (Short-term)

While adolescent pregnancies have declined, many PPY accessing YPIA services are older and require long-term, intensive mental health and wraparound services, especially those with cognitive or developmental disabilities. Current regulations under the Child, Youth and Family Services Act do not account for infants in live-in treatment, despite evidence supporting the effectiveness of infant mental health and parent-child attachment interventions. To improve outcomes and keep families together, policies must be updated to reflect these demographic shifts, adjust age restrictions, and adapt eligibility criteria to better meet the needs of young parents and their children. Therefore, it is recommended that ***live-in treatment care policies, funding and eligibility requirements for YPIAs are revised to better align with the evolving demographics of young parents and their infants/children.***

Recommendation 4: Establish partnerships to develop and implement housing strategy (Long-term)

Housing insecurity was cited as the #1 reason PPY accessed services at YPIAs. Safe, stable housing is essential for well-being and helps prevent long-term negative outcomes associated with housing instability, such as mental health challenges, trauma, and child welfare involvement. Housing instability can strain parent-child relationships, disrupt child development, and perpetuate cycles of poverty. To implement this strategy, collaboration with federal and municipal governments is needed to reform housing policies, prioritize pregnant and parenting youth, and ensure housing is located near essential services. The strategy should include a range of housing support options, from independent living to live-in treatment, and wraparound services that include job readiness, education, and mental health support, along with converting existing buildings into housing stock for young families. It is recommended that ***MCCSS partner with OAYPA and the Ministry of Municipal Affairs and Housing (MMAH) to create and implement a housing strategy for young equity-deserving families; a strategy that includes providing priority access to affordable, long-term family-friendly housing with wraparound support.***



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