

# Community Safety and Well-Being

for **HURON COUNTY**



JUNE 2021

# Community Partners



Avon Maitland District  
School Board

Betamarsh

Big Brothers Big Sisters

Children's Aid Society

Choices for Change

CMHA

Community Living

Domestic Assault Response  
Team (DART)

Emergency Medical Services

Equity, Diversity and Inclusion  
Working Group

Faith Community

Gateway Centre of Excellence  
in Rural Health

Huron Community Family  
Health Team

Huron County Economic  
Development

Huron County Food  
Distribution Centre

Huron County Immigration  
Partnership

Huron County Social Services

Huron Perth Addictions and  
Mental Health Alliance

Huron-Perth Catholic District  
School Board

Huron Perth Centre

Huron Perth Children's  
Aid Society

Huron Perth Community  
Support Services

Huron-Perth Healthcare  
Alliance

Huron Perth Human and  
Justice Coordinating  
Committee

Huron Perth Public Health

Huron Respite Network

Indigenous Issues  
Working Group

ONE CARE

Ontario Provincial Police

Poverty to Prosperity

Probation and Parole

REACH Fanshawe College

Rural Response for Healthy  
Children

Safe Homes for Youth

Tanner Steffler Foundation

United Way Perth Huron

Victim Services

VON

Women Shelter and  
Second Stage Housing

YMCA

“

Community safety and well-being... is a shared responsibility by all members of the community and requires an integrated approach.



“The Ontario Provincial Police – Huron Detachment supports a collaborative approach to addressing local priorities where everyone is safe, has a sense of belonging, access to services and where individuals and families are able to meet their needs for education, health care, food, housing, income, and social and cultural expression.

Community safety and well-being cannot rest solely on the shoulders of the police. It is a shared responsibility by all members of the community and requires an integrated approach. The Huron OPP are committed to fighting crime, victimization and violence on every front with a vision of a safe community and secure Ontario.”

**Inspector Jason Younan**, Detachment Commander,  
Huron Ontario Provincial Police

## Messages from the Municipalities

### The Township of Ashfield-Colborne-Wawanosh

The Township of Ashfield-Colborne-Wawanosh is a rural community of small villages and hamlets with strong ties to agriculture that make the community a place our residents are proud to call home. In ACW, we are passionate about the safety and well-being of our community and our residents. We are eager to move forward initiatives on access to health care services, community security and safety, adequate and affordable housing, food security, and recreational opportunities. We are committed to working together with our neighbouring municipalities in Huron County to make sure our community is protected and healthy through the Community Safety and Well-being Plan. The events of 2020 have proven that we care about our most vulnerable residents and are stronger when we act together.



**Glen McNeil**

Mayor of the Township of  
Ashfield-Colborne-Wawanosh

### The Municipality of Bluewater

In Bluewater, our vision is to build communities that are proactive, inclusive, responsive, respectful, and forward-looking. To ensure the safety and longevity of our communities, it is important for us to come together with our partner municipalities and social agency partners to create a plan for how we can continue to provide services and resources that keep our residents safe, well, active and happy. The Community Safety and Well-Being Plan will help us to not only meet the needs of our residents but surpass what we have done before. The Municipality of Bluewater is committed to putting the safety and well-being of our communities first by ensuring that the resources needed for our residents to prosper are accessible, available, and affordable so that we all benefit.



**Paul Klopp**

Mayor of the Municipality  
of Bluewater



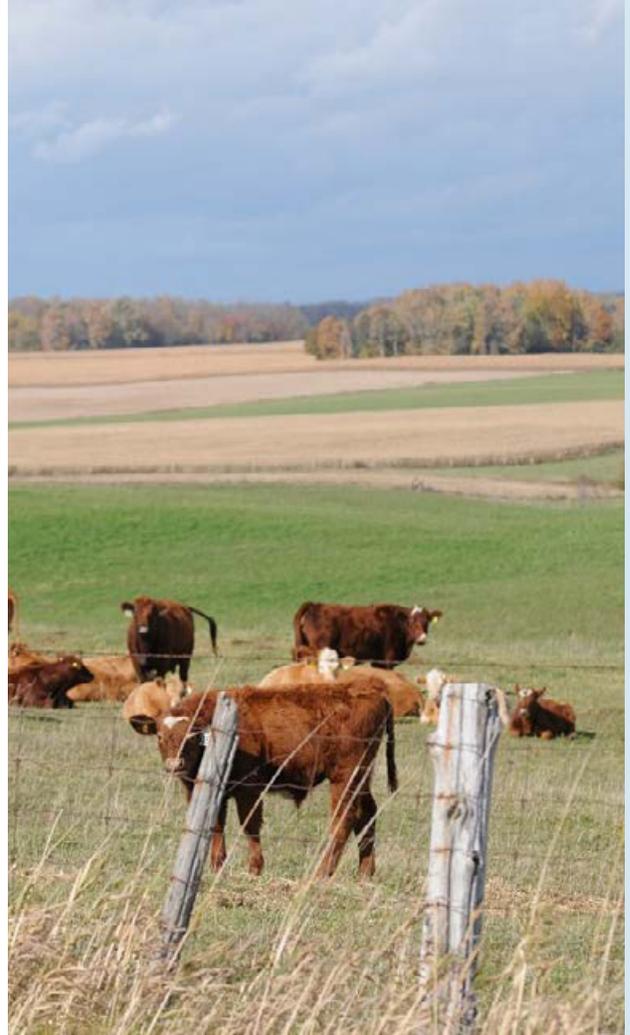
## The Municipality of Central Huron

As we continue to address the impact that COVID-19 has had on our communities, it is important that we facilitate partnerships with all levels of government, health & education sectors as well as our community based organizations to ensure that local plans are as efficient and effective as possible in making communities safer and healthier places. With a collaborative effort, this Community Safety & Well-being Plan can support and enhance partnerships while dedicating our precious human and financial resources where they are needed most.



### Jim Ginn

Mayor of the Municipality  
of Central Huron



## The Town of Goderich

Safety and well-being of the residents of Goderich is Councils top priority. Our Community Safety and Well-Being Plan has been developed collaboratively with our neighbouring municipalities. This Plan allows municipalities in Huron County to work with one another on social problems facing our respective communities. A coordinated effort will be made with social agencies across Huron County communities in order to move forward with initiatives addressing the priorities identified in the Plan. Goderich looks forward to enhancing and strengthening these partnerships in order to improve the safety and well-being of our community and our residents.



### John Grace

Mayor of the Town of Goderich

## The Township of Howick

Howick Township is the most northeasterly of Huron County. All lower tier municipalities of Huron County worked collaboratively to develop a Community Safety and Well-Being Plan in partnership with police services and other various sectors, including health/mental health, education, community/social services and children/youth services to identify and achieve community safety and well-being objectives in each municipality. Many of the preliminary issues (i.e. affordable housing, transportation, mental health, substance misuse) are interdependent and multi-jurisdictional.



### Doug Harding

Reeve of the Township  
of Howick

### The Municipality of Huron East

Over the past year, with its unprecedented trials and tribulations, Huron East residents have shown great resiliency, compassion, and caring for their community. Together with the other municipalities within Huron County, Huron East has further committed to advancing community safety and inclusivity through the development and maintenance of a Community Safety and Well Being Plan. Working as a collective will ensure that not only Huron East, but Huron County as a whole, will become a safer and more inclusive community for its residents.



**Bernie MacLellan**  
Mayor of the Municipality  
of Huron East

### The Municipality of Morris-Turnberry

Everyone has a role to play in the Safety and Well-being of a community, and for the Municipality of Morris-Turnberry the safety and well-being of our residents is the highest priority. This Community Safety and Well-Being Plan will provide us with a roadmap for how to approach some of the tough issues that our residents face.



**Jamie Heffer**  
Mayor of the Municipality  
of Morris-Turnberry



## The Township of North Huron

The Township of North Huron is a community of communities and the safety and well-being of our residents is and will forever be, a top priority. We recognize that efficient and effective local planning is crucial to ensuring that our communities are safe and healthy, and that is why North Huron Council and staff have been eagerly engaged in the development of the Community Safety and Well-Being Plan to address the root causes of social issues and crime by developing crime prevention methods that will improve the quality of life for all. The Township of North Huron strives for a safe, secure and thriving community.



### Bernie Bailey

Reeve of the Township  
of North Huron

## The Municipality of South Huron

Building this plan together with the input of our residents and support of neighbouring municipalities demonstrates our collective will to foster an inclusive community for all. As a retired OPP Constable with 30 years of policing experience, I know that this level of collaboration is absolutely vital to address inequities in access to basic social needs and make our communities safer across the region.



### George Finch

Mayor of the Municipality  
of South Huron



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# Acknowledgements

## Advisory Committee Members

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## SECTION 1: Introduction



Community safety and well-being are priorities in every Ontario community. Changes made to the *Ontario Police Services Act* in 2019 require municipalities to develop and adopt plans that address root causes of crime and complex social issues by focusing holistically on social development, prevention, and risk prevention. These plans – referred to as Community Safety and Well-Being (CSWB) plans – recognize that complex issues cannot be addressed in isolation or solely on an incident response basis. As such, municipalities must work on CSWB plans in partnership with multi-sectoral advisory committees that include representatives from social and community organizations, school boards, boards of health, the police service, and any other local service providers working to protect or enhance safety and well-being.

The broad goal of a CSWB plan is to establish a roadmap for how partners can collaborate across different sectors to make Ontario communities safer, more inclusive, more resilient, and places where all residents thrive. It is in the spirit that Huron County has approached the development of its CSWB Plan, which involved all nine municipalities: the Township of Ashfield-Colborne-Wawanosh; Municipality of Bluewater; Municipality of Central Huron; Town of Goderich; Township of Howick; Municipality of Huron East; Municipality of Morris-Turnberry; Township of North Huron; and, Municipality of South Huron. Myriad other organizations contributed to the development of this Plan by participating on working groups and committees, providing input through surveys and interviews, and by working on-the-ground to address safety and well-being in Huron every day.

Preventing crime and enhancing safety requires addressing issues before they arise or incidents occur. That is why this Plan is based on a collective impact approach that strives to bring people together to work towards a common agenda based on equity. This Plan also applies a social determinants of health lens that recognizes that the social, economic, and environmental conditions affect health, safety, and well-being. As well, the plan takes a place-based approach to focusing resources and attention on geographic areas and groups in the population most in need.

Partnerships and community lie at the heart of a strong and enduring risk and crime prevention system that can build and sustain capacity to promote well-being and safety.<sup>1</sup> Partnerships should strive to deliver place-based,

evidence-informed preventative actions that respond to the Huron context. To create local circumstances where everyone feels safe, has a sense of belonging, has timely access to services and opportunities, and can have their needs met across Huron County, we must all work together.

## What is in this Plan?

To advance Community Safety and Well-Being in Huron County, this Plan:

- Examines population data and other statistics for municipalities in Huron County to understand the context within which we are working, where resources are distributed and to identify potential risks and challenges to be addressed;
- Provides an overview of the legislative framework guiding the development of this Plan and the process taken by the nine Huron County municipalities to understand risk and needs;
- Establishes an approach to community safety and well-being in Huron based on collective impact, equity, and social determinants of health to ensure risk and needs are understood holistically;
- Identifies Priority Areas for action to be addressed through this plan;
- Presents an Evaluation Matrix to help us measure progress; and,
- Discusses next steps for Plan implementation.

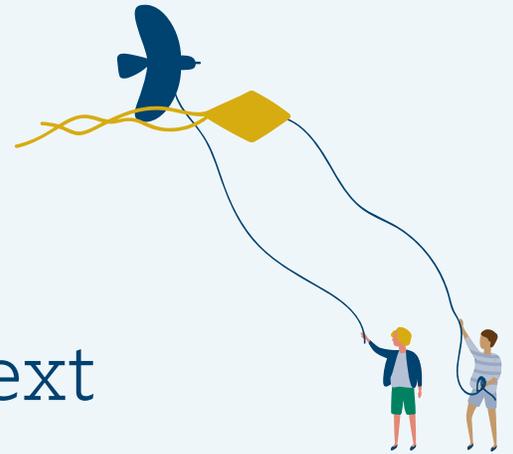
## Impact of COVID-19 Pandemic

The COVID-19 pandemic has upended most aspects of daily life in Huron County—not to mention globally. A state of emergency was first declared in March 2020 to combat what would soon become a global pandemic. COVID-19 had an immediate and resounding impact in our community. More than one year later, we continue to feel the effects—and will for many years to come.

The COVID-19 pandemic has placed unprecedented restrictions on everyday life. Loneliness and feelings of isolation are being felt by many. As the pandemic has unfolded, only some of the potential impacts on community safety and well-being have been realized—including crime, health, public safety, security, and risk prevention.<sup>2</sup> The COVID-19 pandemic and accompanying economic disruption will have large-scale effects in areas of social and health determinants, highlighting inequalities in labour markets that have disproportionately affected individuals from vulnerable and marginalized backgrounds.

The COVID-19 pandemic has revealed inequities in access across the County including lack of access to decent work and experiences of discrimination. Many vulnerable populations in the region have more acutely experienced the economic impacts of the pandemic. Huron County has had to endure a ‘shockwave’ created by the pandemic that has cast new light on many long-standing challenges. Social and economic recovery from the pandemic requires a new tethering of police services to the broader economic logic of social investment. Through proactive harm reduction and social inclusion, Huron County’s CSWB Plan can help to advance our recovery.

## SECTION 2: Huron County in Context



Huron County—known as Ontario’s West Coast—is located along the shores of Lake Huron. The County is one of the most agriculturally productive areas in Ontario and is an innovator in applying agricultural technologies in new ways. The County is a unique blend of rural and urban, creating a vibrant landscape on which urban amenities are united with rural benefits—providing the right fit across our nine municipalities for families and businesses.

Like many primarily rural Ontario counties, Huron must manage with several demographic and socio-economic challenges and considerations, including (see [Appendix A](#) for more detail):

- **An older—and aging—population than the Ontario average.** With a growing senior and elder population, Huron communities must be cognizant of providing appropriate services and policies to support healthy aging-in-place.
- **Population growth and outmigration.** Since at least 2009, Huron County has had more outmigration than in-migration. However, natural population growth has outpaced outmigration. As such, the County’s population is projected to exceed 72,000 in the next 25 years. A notable trend is that most outmigration is occurring within the County’s young adult cohorts. This trend, over time, will likely lead to older adults making up a greater proportion of the County’s total population.
- **Lower individual after-tax and median household incomes.** Compared to Ontario overall, individual annual after-tax incomes for individuals in Huron County is approximately \$16,000 lower.
- **Lower ethnic and cultural diversity than more urban communities.** Less than 8% of Huron residents identify immigrants and only 1.5% of residents identify as being a visible minority—compared to nearly 30% on average for both Ontario-wide. Attracting newcomers to rural regions has been a historic challenge across Canada.



- **External pressures on the real estate market challenge affordability.**

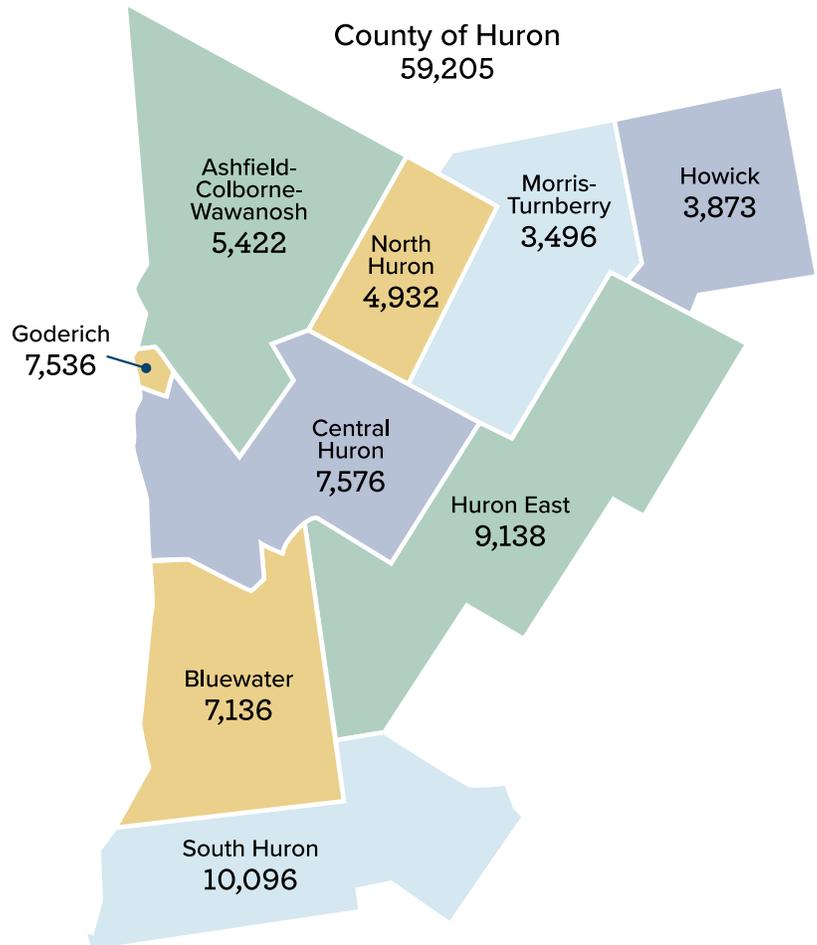
The impacts of COVID-19 on Huron's real estate market have been felt in terms of new residents with higher purchasing power moving to the County from major urban centres. The average home price in the County has increased from around \$350,000 in 2020 to nearly \$500,000 as of March 2021. This has created a situation in which many Huron residents—particularly those on fixed incomes—must grapple with higher assessed property values.

- **Housing Availability and over housing trend.**

Housing vacancy rates are at an all time low of 0% occupancy rates in the region<sup>3</sup> on average. As the population continues to age and the availability of housing options in the region we are seeing larger homes with fewer occupancy creating an over housed scenario.

## Statistical Overview

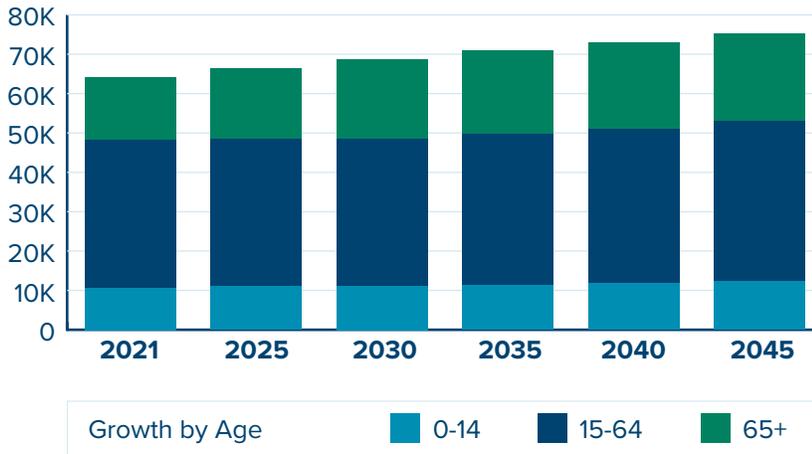
### 2016 POPULATION DISTRIBUTION BY MUNICIPALITY<sup>4</sup>



### AGE BREAKDOWN

| Population    | Huron County          | Ontario                  |
|---------------|-----------------------|--------------------------|
| Aged 0 to 14  | <b>9,985</b> (16.8%)  | <b>2,207,970</b> (16.4%) |
| Aged 15 to 64 | <b>35,855</b> (60.5%) | <b>8,988,865</b> (66.8%) |
| Aged 65+      | <b>13,455</b> (22.7%) | <b>2,251,655</b> (16.7%) |
| Aged 85+      | <b>1,780</b> (3.0%)   | <b>301,075</b> (2.2%)    |
| Total         | <b>59,295</b>         | <b>13,448,490</b>        |
| Average Age   | <b>43.6</b>           | <b>41.0</b>              |

### POPULATION GROWTH IN HURON 2021–2045

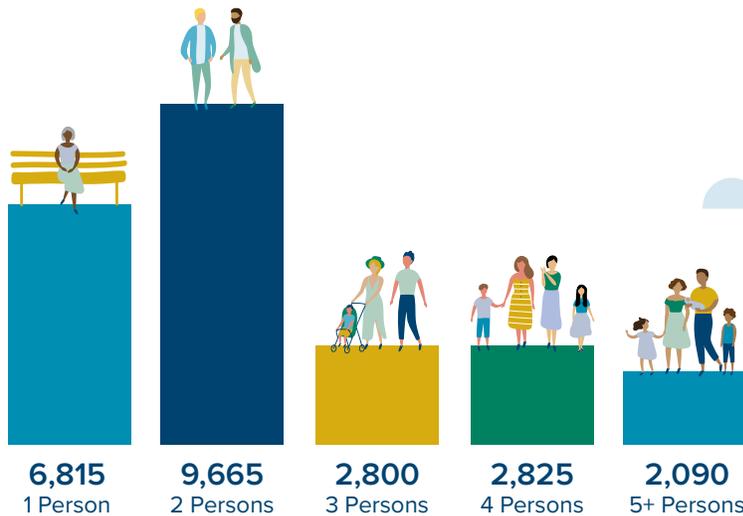


Population projections<sup>5</sup> shows a continued steady population growth. These projections, prepared by the Ontario Ministry of Finance, do not take into consideration pandemic trends.



By 2045, Huron County’s population is expected to **increase by 11,197** residents (17.46%).

### HOUSEHOLD COMPOSITION<sup>6</sup>



**2.4 persons** is the average household size in Huron.

Compared to Ontario with a 2.6 average, Huron is likely somewhat overhoused when considering the average number of bedrooms in houses and household size.

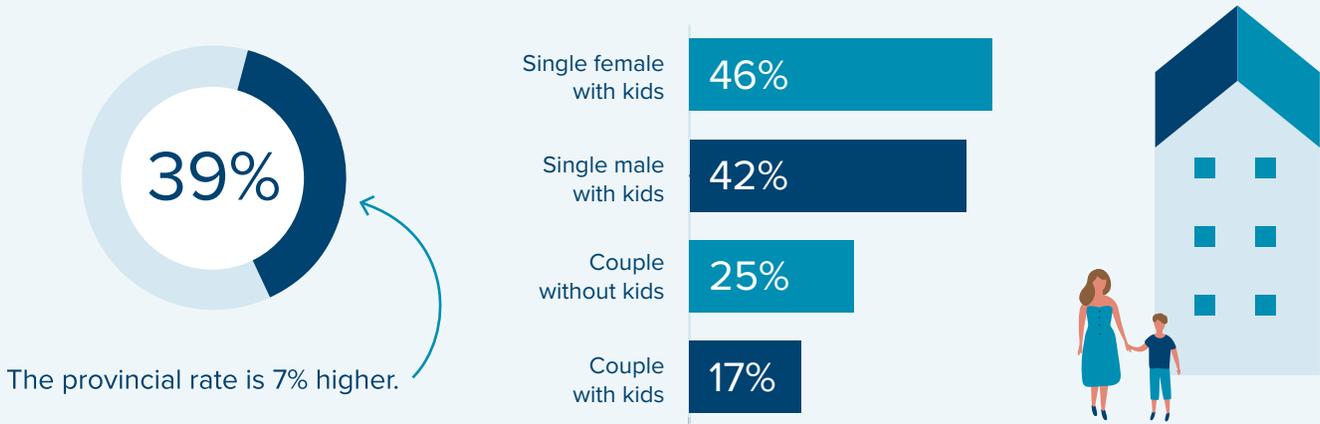
### RENTER HOUSEHOLD INCOME

| Income  | Huron    | Ontario  |
|---------|----------|----------|
| Average | \$45,082 | \$53,691 |
| Median  | \$36,064 | \$41,750 |

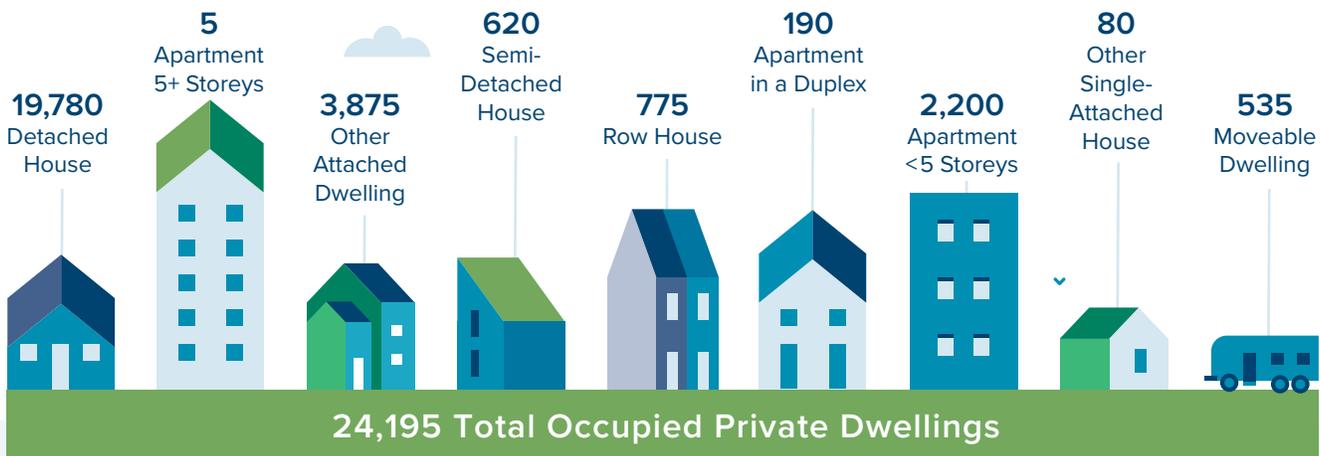
**\$815**

The average monthly cost of rent and utilities in Huron. The Ontario average is just over \$1,109.<sup>7</sup>

HOUSEHOLDS SPENDING 30%+ OF INCOME ON RENT AND UTILITIES<sup>8</sup>



HOUSEHOLD AND DWELLING CHARACTERISTICS



AFTER-TAX INCOME (POPULATION AGES 15+)<sup>9</sup>

| 2016 Income   | Huron                         | Ontario  |
|---|-------------------------------|----------|
| Individual median income in private households          | \$30,303                      | \$46,260 |
| Median income of economic families                      | \$72,501                      | \$79,531 |
| Lone parent in low-income households (based on LIM-AT*) | \$24,540<br>(29% of persons)  | \$28,890 |
| Couples in low-income households (based on LIM-AT*)     | \$35,330<br>(5.6% of persons) | \$35,572 |

ETHNICITY AND CULTURAL DIVERSITY

| Identify As      | Huron | Ontario |
|------------------|-------|---------|
| Indigenous       | 1.4%  | 2.8%    |
| Immigrant        | 7.2%  | 29.1%   |
| Visible Minority | 1.5%  | 29.3%   |



<sup>8</sup>The Low Income Measure (LIM), after tax, refers to a fixed percentage (50%) of median adjusted after-tax income of private households. The household after-tax income is adjusted for different household sizes and reflects the fact that a household's needs increase, but at a decreasing rate, as the number of members increases.

## EDUCATION AND EMPLOYMENT

Overall, the region is well educated, and unemployment rates are low. Employers in some Huron communities have experienced labour shortages, with an identified need to attract more workers to the community.



**83%** of Huron's population aged 25 years or over having earned a high school diploma or above (post-secondary certificate, diploma or degree)

**61.0%** Employment Rate

**4.0%** Unemployment Rate

**62.7%** Participation Rate

**21.9% of the population were employed part-time** — that's higher than the provincial average of 18.6%.<sup>10</sup>

## Factors Impacting Community Safety and Well-Being in Huron

The conditions in which we live, grow, work, and age contribute to community safety and well-being. Improving the social determinants of health and working toward system change are central features to improving safety and well-being for Huron residents. It is first important to determine what community safety and well-being means to Huron residents. For a more detailed overview of each of the factors identified here, please see [Appendix B](#).



### What is Community Well-being?

Community well-being is the combination of social, economic, environmental, cultural, and political conditions identified by individuals and their communities as essential for everyone to thrive and fulfill their potential.

### What is Community Safety?

Community safety is about helping communities to be and feel safe. It is important that people feel safe where they grow, live, work, and spend leisure time. There are ways that people can get involved to help improve safety in their own communities.

## Economic Stability

- Economic stability underpins many social determinants of health, including education, employment, and income.
- Huron residents feel that the pandemic has increased financial stress due to job loss and job uncertainty.
- Economic elements have both protective and adverse effects on community safety and well-being and should be recognized as a critical foundation upon which safety and well-being depends.

## Employment

- Precarious employment has become a much more significant issue in the County in the context of the COVID-19 pandemic. Ensuring residents can earn a living wage<sup>11</sup> is critical to economic stability.

## Mental Health and Well-Being

- Police data suggests that there has been an increase in service calls during the pandemic, particularly for wellness checks and mental health calls.
- Huron (and Perth) residents have reported poor rates of mental health and are vulnerable to COVID-19 mental health impacts because of unique characteristics associated with living in a rural area.

## Housing

- Huron has become a retreat for those looking to avoid the challenges associated with urban density. As such, housing prices have increased significantly since the start of the pandemic. The average house price in Huron has increased from around \$350,000 in January 2020 to nearly \$500,000 in March 2021.
- Increased demand for housing has lowered vacancy rates and has challenged affordability, with affordable housing nearly impossible for some residents to obtain. The “Housing First” model advocates for housing stability as the starting point for community safety and well-being and significant work is needed in this area.

## Crime and Safety

- There have been year-over-year increases in incidences of violent crime (up 7%), mental health act calls (21%), and highway traffic act occurrences (3%). There have been slight declines in domestic disturbances (7%), and thefts (27%).
- With more Huron residents at home than normal, it is possible that domestic disturbances are being under-reported due to challenges related to social distancing, public health restrictions, and lack of alternative housing options. Thefts are likely also down because of people being at home more often.



## SECTION 3:

# Planning Framework & Process



As was discussed in the Introduction, legislative changes to the *Ontario Police Services Act* came into effect in 2019 that require Ontario municipalities to develop Community Safety and Well-Being (CSWB) Plans.

## Under this new legislation, municipalities developing CSWB Plans are required to:<sup>12</sup>

- Establish a multi-sector advisory committee to guide Plan development;
- Conduct consultations with the advisory committee, members of the public including youth, members of racialized groups, First Nations, Métis and Inuit communities, as well as community organizations that represent these groups;
- Create a Plan that identifies priority risk factors (e.g. systemic discrimination and other social factors that contribute to crime, victimization, addiction, drug overdose and suicide);
- Identify strategies to reduce the prioritized risk factors (e.g. new services, changing/ coordinating existing services); and
- Establish measures to monitor Plan implementation.

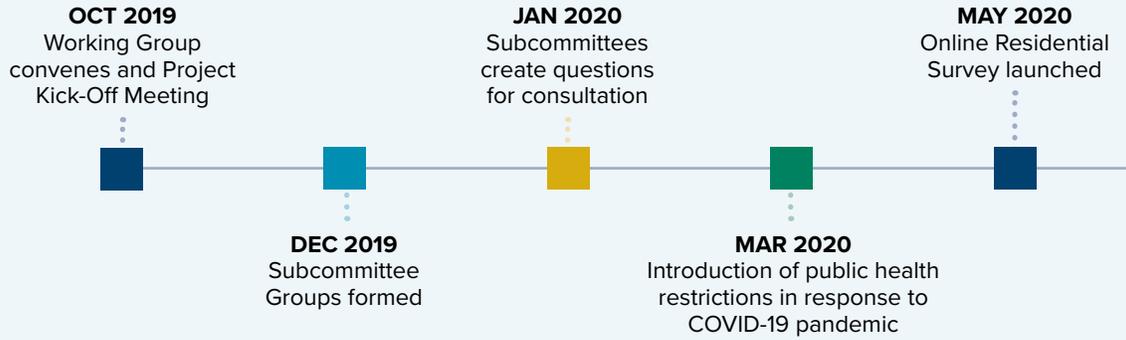
## How This Plan Was Developed

In 2019, the nine lower-tier municipalities in Huron County joined forces with police, boards of education, health, child welfare, social services, community organizations, and other committees to initiate CSWB planning processes. One aspect of this planning work included conducting an online survey of residents to identify needs and challenges, which commenced in January 2020. Planning work was disrupted by the COVID-19 pandemic in 2020, with the nine municipalities deciding to place Plan development on hold to respond to emerging needs of Huron County residents. However, the resident survey remained open over the initial stages of the pandemic.



## Timelines

This Plan was developed over four phases which are described in brief on the following pages.



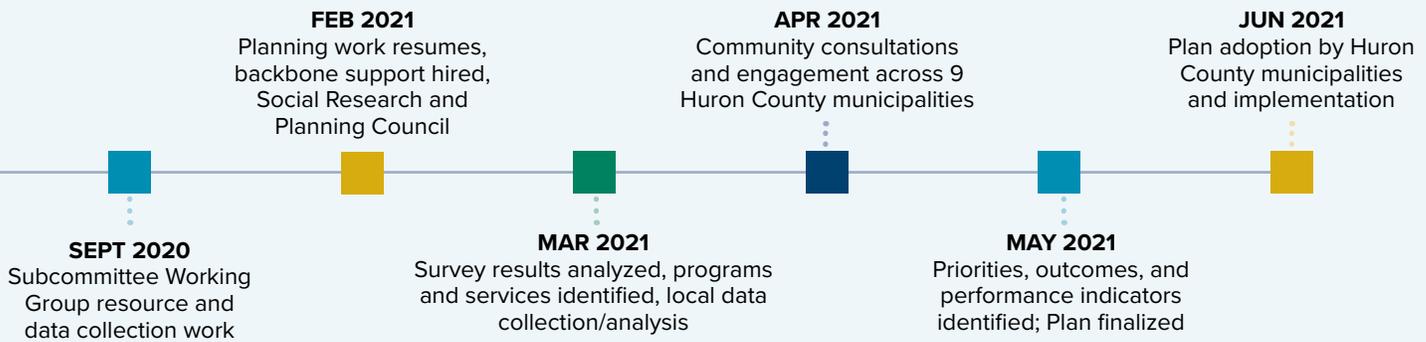
## Plan Development Process

### Phase One: Working Group

Phase One of plan development involved establishing a Working Group of representatives from the nine member municipalities. The Working Group was tasked to then establish an organizing structure, gather community resources, and develop a residential survey with the Canadian Municipal Network on Crime Prevention.

#### Advisory Committee

- Education Rep
- Seniors/Adults with Disabilities Rep
- Poverty/Housing Rep
- Crime Rep
- Medical Rep
- Children/Youth Rep
- Mental Health Rep
- Under 30 Advisory Rep
- Evaluation Advisory Rep
- Working Group  
(Lower Tier Municipality Reps)



## Sub-Committees (Reports directly to the Working Group)

### Education

- Avon Maitland District School Board
- Huron Perth Catholic District School Board
- Private Schools
- School Services Advisory Council
- Fanshawe
- REACH

### Seniors/Adults with Disabilities

- ONE CARE
- Alzheimer's Society
- H/P Community Support Services Network
- Community Living

### Poverty/Housing

- United Way Perth Huron
- Huron County Food Banks
- Huron Out of the Cold
- Huron's Women's Shelter
- Ontario Works/Pathways
- Huron County Social Services
- Housing/Homelessness Committee
- Poverty to Prosperity

### Crime

- Victim Services Huron
- Probation and Parole
- OPP
- H/P Human Services Justice Coordinating Committee
- DART
- Huron Perth Situation Table
- Betamarsh

### Medical

- Huron County Health Unit
- AMGH
- Exeter, Clinton, Wingham Hospitals
- Medical Clinics
- EMS
- Home and Community Care
- VON
- Family Health Team

### Children/Youth

- Rural Response for Healthy Children
- Salvation Army – Youth/Restorative Justice
- H/P Centre for Children and Youth
- Children's Aid Society
- Huron County Social Services
- Safe Homes for Youth

### Mental Health

- CMHA Huron Perth
- United Way - Mental Health
- AMGH - Psych Dept.
- H/P Addiction and Mental Health Alliance
- Choices for Change

### Under 30 Advisory

- Community representatives under the age of 30

### Evaluation Advisory

- Huron Perth Public Health
- Papineau Consulting
- Municipal Council Members
- Municipal Staff
- Economic Development

## Phase Two: Subcommittees

During Phase Two, several Subcommittees were struck and tasked with taking a deep dive into specific risk areas of focus. These Subcommittees/risk areas included:

- **Education**
- **Seniors/Adults with Disabilities**
- **Poverty and Housing**
- **Crime**
- **Medical and Physical Health**
- **Children and Youth**
- **Mental Health**
- **Addictions**

Two additional Subcommittees were established: an Evaluation Action Team and an Under 30 Advisory Committee. The Evaluation Action Team was tasked with identifying local data sources and potential indicators to measure implementation. The Under 30 Advisory Committee was established to ensure that Huron County youth needs and perspectives were of particular focus.



## Phase Three: Advisory Committee

The Huron CSWB Advisory Committee had a broad mandate to apply a cross-sector, interdisciplinary lens to known, emergent, and anticipated community and system-level issues. This diverse Advisory Committee came together with cross-sector representation to identify and reduce risk factors that can contribute to individuals engaging in or becoming victims of crime. Working together is not a new approach for the nine municipalities in Huron; however, the CSWB planning process expanded on collective impact, cross-sector structures, and processes in place to leverage the best possible outcomes in improving safety and well-being of all residents.

The Advisory Committee identified that the Huron CSWB Plan should focus its actions in the areas of prevention and social development, while ensuring greater coordination, collaboration, and resource sharing.

Representatives included leaders from the following sectors:

- Economic Development and Immigration Partnership Network
- Social Services
- Housing and Homelessness
- Poverty and Income
- Huron Perth Public Health
- Mental Health
- Addictions/Substance Use
- Medical
- Emergency Services
- Police
- Education and Employment
- Healthy Child Development
- Domestic and Family Violence
- Seniors
- Disabilities and Neurodivergent
- Physical Health

## Phase Four: Public Consultations and Stakeholder Interviews

To help identify local risks, partners involved in the development of the CSWB Plan in Huron conducted wide-ranging public consultations seeking perspectives on experiences, priority areas, challenges, and strategies for solutions. Service providers, youth, families, and other stakeholders were engaged through this process. In total, more than 1,500 survey responses, consultations, and discussions were analyzed to identify perceptions and feelings of community safety and well-being in Huron. Consultation work also sought to identify work already underway in Huron to address specific issues, to avoid duplication, identify strengths, resources, best practices, and capture opportunities for future action. The following is an overview of consultations.

**Online Residential Survey:** the CSWB Advisory Committee partnered with the Canadian Municipal Network on Crime to create an Online Residential Survey to understand Huron residents' current feelings of safety and well-being. The aim of the survey was to both understand perceptions and subsequently focus on local actions that may improve quality-of-life-for all. The survey included questions about day-to-day life, health, education, employment, safety, recreation, and leisure activities, as well as thoughts on living, working, and playing in Huron. Through this survey, Huron residents were able to share experiences that help shape daily life, identify community priorities, and indicate where changes may be most needed to support community safety and well-being.

**Community Consultations:** four engagement tactics were employed for local community consultations.

- Libraries across Huron conducted a three-month long **community narrative project** in 2019. This project involved conducting street interviews with community members that discussed aspirations, concerns, and specific issues identified by participants. This information was informative for verifying / ground-truthing survey data and literature reviewed.
- Several **virtual online public consultations** were hosted via digital platforms.
- Virtual **focus group discussions** with service organizations, community committees, youth, and one-on-one interviews were conducted on an ongoing basis during Plan development to identify priority areas, strategies, and outcomes.
- Finally, an **Under 30 Advisory Committee** was developed to ensure a youth voice was reflected in the Huron CSWB Plan. Through the Committee, additional efforts were made to engage youth to identify priority areas and review potential outcomes.

In the section that follows, Huron's approach to community safety and well-being is discussed. This approach is based on the Ontario CSWB Framework and focuses primarily on social development and prevention and provides a conceptual lens for addressing risk in Huron based on collective action, social determinants of health, and collective impact.



## SECTION 4:

# Huron's Approach to Community Safety and Well-Being



## Ontario Community Safety and Well-Being Framework

The Ministry of the Solicitor General developed the Ontario Community Safety and Well-Being Planning Framework that was utilized by the Huron CSWB Plan Advisory Committee to advance a comprehensive approach for mitigating harm and promoting community safety and well-being.<sup>13</sup> This Framework is based on the definition of CSWB as being: “a sustainable state where everyone in the community is safe, feels a sense of belonging, has opportunities to engage and participate, and where individuals and families are able to meet their needs for education, healthcare, food, housing, income, and social and cultural expression.”<sup>14</sup> Long-term collaborative efforts are needed to realize this definition of CSWB and the Ontario CSWB Framework and its four nested rings illustrate the interconnectedness of safety and well-being.





While planning work should focus on all four of these category rings, particular attention should be focused on the two outer rings: social development and prevention.

These two rings, in addition with risk intervention, have the greatest potential to reduce risk 'upstream' in communities and reduce potential for harms occurring in the first place.

### Social Development

Promoting and maintaining community safety and well-being, where a wide range of sectors, agencies and organizations bring different perspectives and expertise to the table to address complex social issues, like poverty, from every angle, ensuring all community members are aware of services available to them and can access those resources with ease.

### Risk Intervention

Mitigating situations of elevated risk, where multiple sectors work together to prevent an incident, whether it is a crime, victimization or harm, from occurring, while reducing the need for, and systemic reliance on, incident response in order to increase access to and confidence in social supports, and decrease victimization rates and the number of emergency room visits.

### Prevention

Proactively reducing identified risks and implementing evidence-based situational measures, policies or programs to reduce locally-identified priority risks to community safety and well-being before they result in crime, victimization and/or harm, where people participate more in risk-based programs, feel safe and less fearful, and are more confident in their own abilities to prevent harm.

### Incident Response

Critical and non-critical incident response, or what is traditionally thought of when referring to crime and safety, including service responses such as police, fire, emergency medical services, child welfare organizations removing a child from their home, a person being apprehended under the Mental Health Act, or a school principal expelling a student.

The Huron CSWB Plan focuses primarily on social development and prevention, but also recognizes the importance of risk intervention work and the need for incident response resources.

- **Social Development** is about protecting and maintaining community safety and well-being. Long-term, sustained, upstream investments are measures to improve social determinants of health. A range of sectors, agencies, and groups work collaboratively to address complex issues to reduce risk.
- **Prevention** is about taking proactive steps to reduce risks that have been identified. Policies, programs, and other supports should be implemented to address local risks *before* they result in crime, victimization, and/or harm.
- **Risk Intervention** is about mitigating situations where there is an elevated risk of harm that may occur and intervening/preventing is just before it occurs.
- **Incident Response** is about responding to critical and non-critical incidences and situations that arise, such as crimes committed. Incident response efforts most closely fall within the scope of policing and first line responder duties.

By focusing on social development and prevention in Huron, it is envisioned that the need for risk intervention and, ultimately, incidence response, will be reduced.

## A Systems Approach to Enhancing Community Safety and Well-Being in Huron

In addition to utilizing the Ontario CSWB Framework discussed above, the Huron CSWB Plan utilizes several concepts and lenses to ensure that we are working together as effectively, transparently, and productively as possible to support community safety and well-being in the region.

Each of the nine municipalities and sub-regions in Huron have unique qualities and bring diverse strengths and resources. As the CSWB plan was being developed, it was found that there are shared concerns and risks emerging in communities, including homelessness, mental health, and addiction issues that require a collective approach to effectively address, as no one community would be able to solve emerging issues on their own.



Our approach to working together is based upon the following:

## Collective Impact

Partners of the Huron CSWB Plan are committed to utilizing a collective impact approach, which brings people together in a structured way to work towards a common agenda and plan of action to address complex social problems.<sup>15</sup> The collective impact approach is characterized by five core elements that facilitate effective cross-sector collaboration:

1. **Common Agenda:** All participants have a shared vision for change that includes a common understanding of the problem and joint approach to problem solving through agreed-upon actions.
2. **Shared Measurement Systems:** All participants agree on how to measure and report on progress, with a short list of common indicators identified to drive learning and improvement.
3. **Mutually Reinforcing Activities:** A diverse set of stakeholders, typically across sectors, coordinate a set of differential and mutually reinforcing activities.
4. **Continuous Communication:** All participants are engaged in frequent, structured communication to build trust, assure mutual objectives, and create common motivation.
5. **Backbone Support:** Dedicated staff provide support and key functions for the sustained operation of the collective impact initiative.

## Equity

Equity refers to fair, just, and respectful treatment of all, recognizing the need to treat people differently depending on their needs and circumstances. Equity means putting in place policies and allocating resources so that people with fewer resources and those who face exclusion and discrimination (e.g. on the grounds of race, sex, gender, age, disability, or income) realize improvements in their health and living conditions. Equity also involves removing barriers for people who experience historic and current disadvantages and for under-represented and marginalized groups.<sup>16</sup> Systemic barriers and historic disadvantages hinder the ability of marginalized populations to feel safe and live to their full potential. As part of our approach to Plan development, the Huron CSWB Advisory Committee has considered how we can integrate anti-racist,<sup>17</sup> anti-oppressive,<sup>18</sup> and culturally safe<sup>19</sup> approaches into all our work.<sup>20, 21</sup>

## Social Determinants of Health

The conditions in which people are born, grow, work, live, and age influence their overall health and well-being. These conditions, known as the social determinants of health, include social and economic factors that can positively or negatively influence health outcomes.<sup>22</sup> The social determinants of health include income and income distribution, education, employment, job security and working conditions, early childhood development, food security, housing, social inclusion, social safety network, health services, Aboriginal status/ Indigeneity, gender, sexual orientation, race, immigration status, and disability. Factors beyond the control of individuals can influence their well-being, impacting the types of preventive and upstream measures that are needed to influence and improve population health.

## Place-Based

A place-based approach means focusing resources and attention on particular geographic areas or sub-groups of the population where there are concentrations of issues to be addressed. Such an approach compliments existing universal programs or strategies.<sup>23</sup> For example, focusing on a specific neighbourhood or community to better understand the local context and design programs with community members. This approach recognizes that community safety and well-being is not a 'one size fits all' issue and emphasizes assets and strengths of a local community. A place-based approach will be applied to certain strategies and implementation considerations of the Huron CSWB Plan when relevant.

Issues impacting community safety and well-being in Huron are top of mind for community partners. These issues are often complex, systemic, and require collaborative efforts and action across multiple stakeholders at the same time to effectively address concerns. By taking a collective impact approach, we can better understand issues by working together and collaboratively planning and actioning processes to respond to a wide range of community and system level issues.



The key elements and functions of this approach include:

- Focusing on social development and prevention actions while also ensuring greater coordination, collaboration, and sharing of resources within the risk mitigation and incident response rings (upstream interventions);
- Focusing on emergent and anticipated community and system level issues/gaps that negatively impact vulnerable people and result in an increased demand on emergency and crisis-driven services (downstream interventions);
- Convening leaders from organizations in the region;
- Anticipating and identifying issues and services by exploring opportunities to enhance data collection and knowledge sharing;
- Ensuring that Huron is response-ready when emergent issues are identified;
- Working to achieve greater coordination between existing issue and planning tables and support consolidation where appropriate;
- Strengthening how the community plans and deploys resources to address priority issues; and,
- Creating opportunities to align resources and efforts to achieve collective impact for the identified community safety and well-being priorities.

This Plan emphasizes social development and prevention priorities to address issues in a proactive, upstream manner that may in turn mitigate increased demand for emergency and crisis-driven services downstream. This collective action approach is also flexible and open to responding to all issues and/or risk factors that impact community safety and well-being, particularly emergent issues. Collective action is about mobilizing resources and expertise and pivoting when needed to meet the needs of vulnerable Huron residents. Another important tenet of this approach is transparency in how issues are identified and actioned.

## Collective Action: How Do We Identify Issues?

There are several steps involved in identifying issues related to community safety and well-being within a collective action approach. These steps and how they were followed in the Huron CSWB Plan development process are outlined below.

**1 Listen:** community safety and well-being issues were identified initially through the various Subcommittees established, ongoing engagement with community groups, other levels of government, and the Advisory Committee. Local partners are often most aware of on-the-ground issues and realities and it is important to listen to concerns and lived experiences.

**2 Follow the Evidence:** it is important that emerging research, reports, data, and statistics are reviewed and analyzed in relation to information learned through consultations. A wide-ranging environmental scan was conducted as part of Plan development that further substantiates priority areas identified.

**3 Validate:** with potential issues identified and supporting evidence gathered, the next step is to examine these issues in the context of the Huron region more broadly. Several criteria were considered:

- Is the issue supported by data/evidence?
- Does achieving a desired outcome require a collaborative or multi-sector approach?
- If the issue is not addressed, is there a risk to community safety or well-being?
- Has input been sought from people with lived experience of the issue under consideration?
- Is a group or organization well-positioned to successfully address the issue within its current capacity or resources?
- Does the issue require a broader community or system-level response? (i.e. the issue must be beyond the scale of an individual or family).
- Is the issue of a size and scope that is actionable by community partners?

**4 Prioritize and Consult:** with issues identified and validated, the next step is to prioritize issues and themes, as well as to consult with the public and other stakeholders to establish goals, strategies, and outcomes to address risks and issues related to community safety and well-being in Huron.

Through the Online Residential Survey and community consultations that occurred throughout the planning process, several key themes emerged that would form the basis of Priority Areas that have been established.

## SECTION 5:

## Priority Areas For Action



Utilizing survey and consultation findings to identify key themes ([Appendix C](#)), supplemented by a review of the literature and focus group discussions, four Priority Areas have been established to address community safety and well-being in Huron County: Mental Health and Addictions; Housing and Homelessness; Domestic and Family Violence; and Community Safety and Security.

This section begins by providing an overview of key themes identified through public consultations that informed Priority Areas identified. The four Priority Areas are then discussed, each presenting research highlights and Huron community perceptions as identified through the survey and consultation. The section concludes by discussing priority populations in Huron and the importance of shared decision-making that reflects our diversity in terms of achieving long-term success.

## Key Themes from Public Consultations

### Interconnectedness

The interconnectedness of issues like poverty and income directly impact housing, mental health, and domestic violence is recognized by Huron residents and service providers. It is important that systems, too, are interconnected to ensure coordination and integration for improved access to services and programs in the region.

### Integration

Entry pathways into services and navigation within systems and programs in the region should be simplified. Better integration is needed to minimize victimization and to enable story-telling once services are accessed by residents.



### Youth

Many planning and development decisions in Huron are made without youth participation. Existing youth communities should be empowered by creating safe spaces for dialogue to address stigmas associated with priority areas. Diverse experiences of Huron youth inform how they connect to safety and well-being issues and underscores the need to engage youth to co-create messages and understand how to adjust messages for different audiences.

### Prevention

It is generally acknowledged by Huron residents and service providers that prevention is the most cost-effective approach for minimizing risk and issues related to community safety and well-being. Addressing risk before issues emerge is key for healthier communities and residents.

### Advocacy

The chronic underfunding of rural community mental health, addiction, homelessness, and other social issues has created a situation in which there are few support options available for Huron residents. Options that are available often have lengthy wait times that impact emergency room visit numbers, police responses, lost workdays impacting income, and so forth. Collective advocacy for greater awareness of issues and for adequate funding will help increase community capacity to meet existing and growing demands/needs.



### Holism

To address the complexity and interconnectedness of issues identified, a holistic community approach is needed that enables continuous learning and knowledge development about current and emergent issues. More voices need to be brought to the table more often to ensure supports developed meet needs and that stigmas are decreased.

### Communication

Continuous communication, engagement, and management is needed. Dialogue amongst community partners is essential to address community safety and well-being issues in Huron. Strategic partnerships are critical for a successful future.

### Data

Data, indicators, and measurement are key to monitor progress and measure success. Working together to identify and collect local data and identifying shared metrics will help Huron community partners to avoid duplication and build greater data literacy within the region.



## Priority Populations in Huron

There are many different groups within Huron that experience a disproportionate burden of inequities, leading to differences in socio-economic outcomes. These inequities are not due to personal fault or responsibility; rather, many are largely avoidable. Social inequality and social disadvantage occur when resources are unevenly distributed. Equality means that all people can reach their full potential without disadvantage due to social position or other socially determined circumstance, such as ability, age, culture, ethnicity, family status, gender, language, race, religion, sex, social class, or socio-economic status. Many differences among people and groups are socially produced, unfair, and/or unjust because opportunities for safety, well-being, and health are limited due to systemic/social barriers.



Individuals and/or groups in Huron identified as more vulnerable to social, economic and/or health related risk factors are:

- Seniors
- People experiencing mental health and/or addiction challenges
- Lesbian, gay, bisexual, trans/transgender, queer or questioning people and other sexuality and gender diverse people and/or intersex people (LGBTQ2+)
- People of low socio-economic status
- People who are homeless or precariously housed
- Newcomer, minority populations, culturally and linguistically diverse
- People with disability
- Children and youth
- People who are more isolated or limited social networks
- Women and children in abusive situations

The needs of each individual and group are diverse. There is no one-size-fits-all approach to improving community safety and well-being. Goals, strategies, and outcomes need to be inclusive and reflective of such diversity. Shared decision-making, strategic partnerships, and involving people with lived experience at the heart of policy development and implementation are key to creating meaningful change.

# Priority Area 1: Mental Health and Addictions



Mental health is a state of well-being, in which an individual realizes one's potential. Mental health is about *thriving*—enjoying life, having a sense of purpose, strong relationships, feeling connected to others, and managing life's highs and lows. 'Good' mental health might look different from one person to another. Achieving and maintaining good mental health is not a one-person journey. The settings and situations that individuals find themselves in, as well as people interacted with, can impact mental health and well-being. To ensure individual well-being, mental health must be a common theme and priority in every workplace, school, and neighbourhood in Huron. Good mental health is the lifeblood running through the veins of communities that enables resilience, confidence, and connections.

Individual family environments and social and economic circumstances influence the prevalence of poor mental health, as well as substance use disorders and/or addictions. Intersecting factors can include childhood trauma and other social determinants of health. Mental health and addiction are interrelated issues for many in Huron and it is important to recognize this.

## Research Highlights

The Mental Health Commission of Canada estimates that the economic cost of mental illness nationally is around **\$51 billion** per year, which includes health care costs, low productivity, and impacts on health-related quality of life.<sup>24, 25</sup>

In Ontario, the annual cost of alcohol-related health care, law enforcement, corrections, lost productivity, and other problems is estimated to be at least **\$5 billion**.<sup>26</sup>

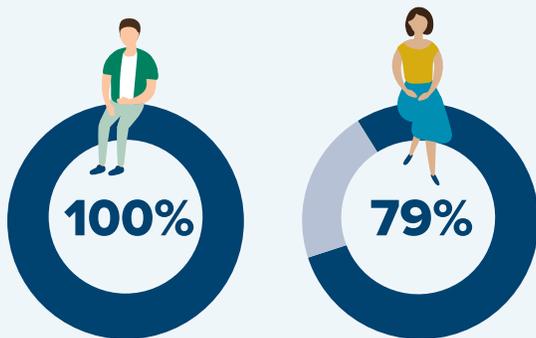
By the time Canadians reach 40 years of age, **1 in 2** have—or have had—a mental illness.<sup>27</sup>

**24,000 people** in Huron Perth<sup>28</sup> could benefit from some level of mental health and addiction services.

Police data for Huron shows **an increase in alcohol and drug occurrences** in 2020 from previous years.



There has been a **26% increase of reportable mental health occurrences** dealt with by front line officers in Huron year-over-year (2020 to 2021).



A 2020 Huron Perth Residential Survey reported a **100% increase in males** and **79% increase in females** aged 18-29 who reported poor mental health.<sup>29</sup>

Police data shows a reported **increase in overall mental health acts** in 2020 compared to previous years.

Mental health and addiction services are in high demand for residents and long wait times for services increases usage of hospitals and law enforcement.

There were **66 emergency department visits for opioid overdose** in Huron in 2019, an increase from 40 in 2018.<sup>30</sup>

## Community Perception

- Mental Health and addiction ranked the highest priority area across the region.
- There is a lack of coordination and it is hard to find services and supports.
- Residential treatment needed for addictions.
- Mental health should be integrated into schools and educate children younger.
- Open dialogue and transparency is needed to reduce stigmas.
- Streamline and coordinate services.
- Advocate for increased funding.
- Infrastructure resources are needed.
- Move from incident response and crisis to prevention.
- Proper diagnosis and faster sustained treatment required.
- Mental health and addictions are often the symptom not the cause.
- Lifespan model of services would be beneficial. (i.e. post-treatment supports and services)
- Specialized services for addictions and mental health needed.
- Have more social services available for those that cannot pay privately.

## Actions

### MENTAL HEALTH AND ADDICTIONS

| Intervention       | Goal  | Strategies   |
|--------------------|---|--|
| Social Development | Improve access to mental health and addiction services in Huron County.                               | Transform pathways for timely and appropriate mental health and addiction supports for those who need them (System Navigation, one door approach: all services within a sector are aware of one another and agree to share data).  |
|                    |   | Improve service coordination amongst diverse stakeholders to support and simplify pathways utilizing a navigator. A navigator is assigned to each participant who follows them through the process of care, and there is also a team of experts to help collaborate on that care. They have wide knowledge about the types of resources available and how best to access them. |
| Social Development | Support the work of implementing initiatives in the Roadmap to Wellness to reduce barriers to access. | Adopt standardized processes for referrals. Utilize collaborative care plans, coordinated discharge plans, and support improved communications between service providers, Emergency Department/Hospital diversion, and digital health records.   |
|                    |   | Explore feasibility of the following services: <ul style="list-style-type: none"> <li>• Centralized intake</li> <li>• Digital health and virtual care offerings</li> <li>• Co-locating services, community hubs, and satellite locations in smaller population centres</li> <li>• Mobile and outreach service delivery</li> </ul>  |
| Prevention         | Increase Mental Health and Addictions literacy/ awareness.  | Create effective, efficient, and digital training tools for implementation to prevent the need for Mental Health and Addiction services.   |
|                    |   | Expand overall health literacy including Mental Health and Addictions training provided by the Human Services & Justice Coordinating Committee to include other emergency responders, as well as primary care, judicial system, long-term care, home, and community care providers.  |
| Incident Response  | Optimize emergency response by enhancing supports for mental health.                                  | Support Mobile Crisis Rapid Response where ongoing monitoring of needs and challenges are identified.  |
|                    |   | Utilize mental health and addiction professionals to defuse and de-escalate crisis situations.   |
|                    |   | Provide responses to Mental Health and Addictions issues in a timely manner with specialized services that meet immediate needs.   |

See [Appendix D](#): List of Community Activities addressing Mental Health and Addictions.

## Priority Area 2: Housing Stability and Homelessness



Housing is a fundamental element in the social determinants of health and includes access, availability, affordability, quality, and homelessness. Recently, housing prices in Huron have rapidly increased—in many cases prices have doubled. At the same time, housing supply, especially affordable housing for both rental and ownership, is almost non-existent. Many Huron residents, including young families, low-income earners, and seniors are now potentially unable to afford to keep living in the community.

Canada's first *National Housing Strategy Act*<sup>31</sup> declares that adequate housing is a fundamental human right affirmed in international law. It recognizes that adequate housing is essential to a person's inherent dignity and well-being and to building healthy, sustainable communities for all.<sup>32</sup>

Housing is considered "affordable" if it costs less than 30% of a household's before-tax income (shelter cost-income ratio). The ratio applies to housing provided by the private, public, and non-profit sectors and includes all forms of housing tenure: rental, ownership, and co-operative ownership, as well as temporary and permanent housing. Given the current context in Huron with housing affordability and shifting demographics, it is important that we continue to approach housing through the lens of a continuum that is based on providing adequate, affordable, and accessible housing for all.

Homelessness is not a choice – it's about a lack of choice. It's about not having access to the resources to prevent falling into the current of homelessness, a current so powerful that it cannot be escaped alone.<sup>33</sup>

### HOUSING SPECTRUM





## \$504,000

is the estimated median house price in Huron as of early 2021 and are rising.<sup>34</sup>



A national housing deficit and low vacancy rates have caused rents to jump.<sup>35</sup> The average **two-bedroom rent** across major Canadian CMAs **increased by 3.6%** to \$1,165—making average rents unaffordable.

## Research Highlights

Huron County has a Long-Term Affordable Housing and Homelessness Plan. Recently a 5-year review<sup>36</sup> was completed that looks at ending homelessness, system coordination, and expanding access to affordable housing, including housing with supports.

An individual accessing Ontario Works would need to **spend 85% of their monthly income on shelter** in Huron County.<sup>37,38</sup>

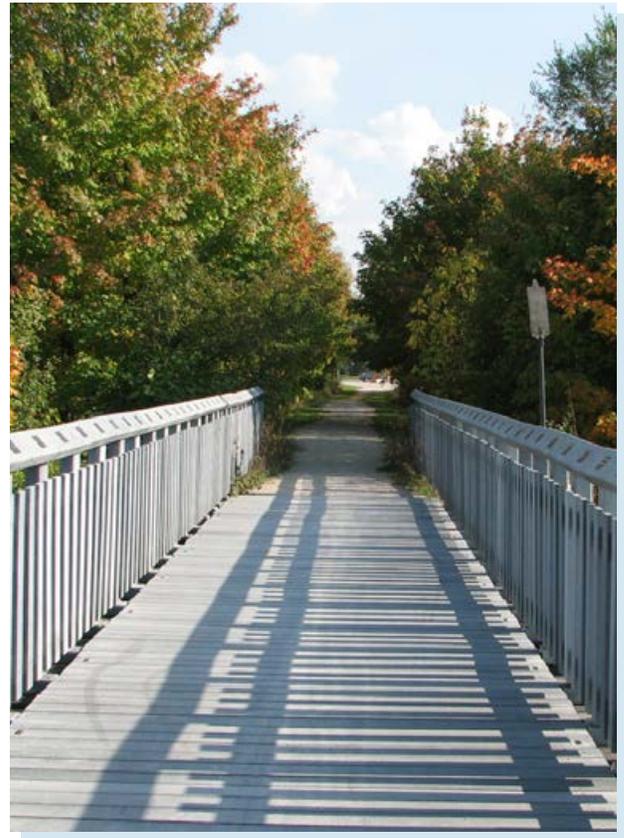
Costs of living (e.g. hydro, taxes, and groceries) are increasing and fewer than half of Huron residents make a living wage. A recent report **estimates the living wage for Huron County to be \$17.55 per hour**. With such a sizable population not earning a living wage, many young families and low-income earners are unable to afford housing.<sup>39</sup>

During a one-day point-in-time-count in 2018, it was **identified that approximately 100 people in Huron were homeless**; this number does not account for those who remain hidden in their homelessness such as couch surfing or those who have left the community to seek emergency shelter in urban communities. Additionally, others who were not counted include people that are precariously housed, or facing other circumstances that place them at-risk of becoming homeless or being evicted.

Canada spends more than **\$30 billion annually on social service programs for the homeless**.<sup>40</sup> Homelessness is often caused by traumatic experiences, crises, violent situations and/or other related mental health, mental illness, drug, and alcohol addictions.

## Community Perceptions

- More diverse housing options are needed.
- Sense of stagnation in housing market—stronger market regulation required.
- Innovation in housing development, partnerships, and collaboration with developers needed for collective impact.
- Engaging developers and private land sale opportunities for public use where possible.
- Increased subsidies to improve affordability are needed.
- Feeling that Huron County Official Plan Review will help to provide greater options for homeowners.



## Action

### HOUSING STABILITY AND HOMELESSNESS

| Intervention      | Goal   | Strategies  |
|-------------------|--|---|
| Prevention        | Coordinate efforts to reduce homelessness and prevent eviction.                          | Establish a bridge of supports to tenants and landlords to decrease evictions.  |
|                   |  | Improve data collection, management, and reporting practices for non-market housing and supports.   |
| Risk Intervention | Public awareness of the housing spectrum and importance of housing for all is increased. | Develop a communications strategy and public awareness campaign to educate Huron residents about the value of supportive / social housing to build local consensus. |

See [Appendix D](#): List of Community Activities addressing Housing Stability and Homelessness.

## Priority Area 3: Domestic and Family Violence



Domestic violence is identified as violence in intimate relationships, including those between the opposite-sex and same-sex partners. Relationships vary in duration and legal formality and encompass current and former dating partners, common-law, and married couples. Although both women and men can be victims of domestic violence, the overwhelming majority of domestic violence involves men abusing women.<sup>41</sup>

Domestic violence crimes are often committed in a context where there is a pattern of assaultive and controlling behaviour. This violence can involve physical assault, and emotional, psychological, and sexual abuse. It can also include threats to harm past or present partners, children, other family members, pets, and property. Violence is used to intimidate, humiliate, or frighten victims, or to make them feel powerless. Domestic violence may include a single act of abuse or several acts, which may appear minor or trivial when viewed in isolation, but collectively form a pattern that amounts to abuse.<sup>42</sup>

Family violence is defined as any form of abuse or neglect that a child or adult experiences from a family member, or from someone with whom they have an intimate relationship.<sup>43</sup> Exposure to violence and experiences of abuse can lead to poor physical and mental health outcomes and potentially lead to injury or even death.<sup>44</sup>

An intersection of individual, family, community, and societal factors can influence whether an individual experiences family violence.<sup>45</sup> For example, a history of child abuse or neglect, substance use, family conflict, poverty, and gender norms can all contribute to the risk of family violence.

An intersection of individual, family, community, and societal factors can influence whether an individual experiences family violence.

## Research Highlights

Trauma and adverse childhood experiences (such as abuse and neglect) can be both a risk factor and outcome. Children exposed to intimate partner violence are more likely to perpetrate or be victims of intimate partner violence as adults.<sup>46</sup>

Community Safety and Well-Being Community survey results suggest there are significant differences between sense of safety and security in Huron by gender and age, with **women feeling less safe than men** and youth under the age of 24 feeling less safe than those over 25.

Survey results also indicate that many respondents feel multiple sectors play a role in keeping Huron safe — not just police (e.g. mental health services, social services, schools, community services, employment services, and hospitals).

Crisis supports are offered by Victim Services, Huron-Perth Centre and Huron Women's Shelter 1049.<sup>47</sup>

Trends identified include increases in domestic violence concerns as a result of COVID-19 measures, isolation contributing to increased elder abuse; and longer shelter stays due to increased risk of violence.<sup>48</sup>



**918 calls**  
made in 2019 to  
the Children's  
Aid Society

Children's Aid Society Data had 1,127 calls in 2019 and 918 calls in 2020 from concerned citizens about children who might need protection.

Youth in and from child welfare care also have greater involvement in the youth justice system and are more likely to become homeless.<sup>49</sup>

## Community Perceptions

- Extended training needed for emergency services to respond to domestic and family violence incidences.
- Education on family violence should be delivered earlier in schools.
- A culture shift needed to imbue a greater sense of gender equity into communities.
- More training for police and the judicial system (e.g. lawyers, judges, etc.) is needed to support victims of domestic and family violence.
- Awareness and education should look at the whole family and remove the oneness on the gender roles specifically.

## Action

### DOMESTIC AND FAMILY VIOLENCE

| Intervention              | Goal   | Strategies  |
|---------------------------|--|---|
| <b>Social Development</b> | Increase the understanding and awareness of domestic and family violence as an issue.  | <p>Develop educational on-line tools that are accessible, appropriate, timely, and regularly updated and supported.</p> <hr/> <p>Develop education and awareness campaign on family and intimate partner violence, for:</p> <ul style="list-style-type: none"> <li>• Public use in workplace training; and,</li> <li>• A youth friendly educational program for school aged Huron residents.</li> </ul>                             |
| <b>Prevention</b>         | The vision for Child Welfare in Ontario is widely accepted in Huron County.  | <p>Develop a made-in-Huron approach to enhance lifelong supports provided to youth exiting care and enhance local community collaboration to prevent and support children, youth, and families from accessing child welfare services.</p> <hr/> <p>Support the new vision for Child Welfare in Ontario focussing on prevention, early intervention, and supporting children, youth, and families from marginalized communities.</p> |
| <b>Risk Intervention</b>  | Learn from and support domestic and family violence responses during times of disruption, particularly during pandemic and recovery. | Develop a Huron resiliency strategy to better prepare for disruption (i.e. pandemic) to ensure continued services are not interrupted.  |

See [Appendix D](#): List of Community Activities addressing Domestic and Family Violence.



## Priority Area 4: Community Security



This priority area includes the ability to meet basic needs, ability to enjoy life and participate in leisure activities, accessibility to transportation, having a sense of belonging, and being free from crime such as human trafficking, theft, assaults, and break and enter, and drug trafficking, as discussed by community stakeholders.

Security measures can include things like observation and monitoring (i.e. ‘eyes on the street’) and strategies such as Crime Prevention through Environmental Design (CPTED) that seeks to understand how the built environment can better promote a sense of safety and security. For extended periods during the COVID-19 pandemic, public health measures have restricted the ability of individuals to be outside of their residences. Beyond the sense of isolation that can come from such restrictions, they have also limited people’s ability to gather in public spaces or frequent other popular areas.

Over time, perception of a formerly ‘safe’ place or space can shift due to having a different ‘feel’. Lack of safety and security, whether risk is real or perceived, can affect economic growth and investment in communities. An important component of this Priority Area is to build the capacity of existing systems, services, and initiatives to effectively engage the community and to ensure that community members feel ‘free from fear’ in Huron.

When we consider the diversity of our community—ancestry, ability, age, country of origin, culture, gender, income, language, race, and sexual orientation—perception of safety and security can vary quite significantly, as can the feeling of belonging. Huron County must



recognize our diversity that exists, examine the accessibility of services, and ensure inclusion in our systems to ensure safety and security for everyone.

However, community security can also focus on changing the underlying social conditions of children and youth through initiatives such as nurse visits to “at risk” families with infants, parenting classes, availability of recreational programs, and a focus on social competency skills in school, to name just a few. All of these initiatives have been found to decrease crime.<sup>50</sup>

A report by the National Council on Welfare on the cost of poverty identified incarceration of low-income offenders as a major cost to society. Low-income people are more likely to be arrested, detained without bail, jailed, and given the harshest sentences.<sup>51</sup> Improving family incomes can have a positive effect on reducing crime. A Canadian Council on Social Development study showed that a child’s risk of poor outcomes dramatically diminished as family income reached \$30,000, and the risk diminished even further as family income reached \$40,000.<sup>52</sup>

During times of economic distress, people have heightened awareness of and sensitivity to crime and the perception of rising crime in their community. During the COVID-19 pandemic, individuals have spent much more time within their neighbourhoods and at the community level. With many at home, preventative measures

to protect homes and neighbourhoods are required. While no community is immune to crime, working with neighbours, family members, and others to create a sense of community and safety can be key for combating crime—both real and perceived.

## Research Highlights

### Top 10 reasons the Ontario Provincial Police were called:<sup>53</sup>

1. Traffic complaint/hazard, enforcement
2. No voice contact/unintentional calls
3. Motor vehicle collision
4. Request for OPP assistance
5. Alarm
6. Domestic dispute
7. Theft
8. Mental health
9. Family dispute
10. Suspicious person



**95% of the 2.1 million calls to OPP PCCs were answered in 12 seconds of less.**

Crime Prevention through Environmental Design (CPTED) is based on the principle that the built environment can and does influence people's behavior and that effective design can reduce the incidence and fear of crime. Building design, landscaping, lighting, access control, and creating a sense of ownership are all elements of design that can affect behavior and incidences/sense of crime.<sup>54</sup>

Isolation and lack of connectedness in one's older adult years can have economic, social, physical, and mental health impacts. As Huron's older adult population continues to grow, it is important to take steps to build aging-friendly communities that foster a strong sense of belonging, and to support those who are most at-risk of poor outcomes due to a lack of social support.

There were **21,141 food bank and mobile food bank visits** in 2020.<sup>55</sup>

Over 600 people in Huron Perth completed the **Discrimination Survey**<sup>56</sup> in 2021. The respondents experienced the following types of discrimination or mistreatment in the past three years:

- Inappropriate jokes
- Derogatory language
- Verbal threat
- Verbal abuse
- Physical threat
- Physical abuse
- Damaged property



**Inappropriate jokes** is the most common type of discrimination/mistreatment. **56% of those who self identified as Indigenous and 67% of those who identified as a visible minority** experienced it in Huron Perth.

The second highest ranking form of discrimination/mistreatment is derogatory language.

## Community Perceptions

- Homelessness and mental health incidences seem to be more prevalent (unpredictable behaviours, wandering).
- More instances drug activity, drug abuse, addiction problems.
- Lack of community engagement and sense of belonging.
- Increased feeling of isolation, lack of social networks (access to 'third spaces'/transformation of public spaces).
- Greater sense of feeling unsafe walking down the street.
- Being female, young, senior, single changes experiences of places and spaces in Huron.
- Access and wait times for health services need to be improved.
- Huron residents reporting a strong sense of community belonging also report better mental health compared to those who did not have a strong sense of belonging.



## Action

### COMMUNITY SECURITY

| Intervention       | Goal  | Strategies   |
|--------------------|---|--|
| Social Development | Create welcoming and inclusive communities in Huron County.   | Develop a Diversity, Equity, and Inclusion Strategy for Huron County*. All nine lower-tier municipalities work together to enhance welcomeness of communities ( <a href="#">Appendix E</a> ).<br>*Consider utilizing the City of Ottawa's Equity and Inclusion Lens. |
| Prevention         | Community cohesion and feelings of belonging are increased among those that are isolated and/or new to community. | Engage seniors, youth, those with disabilities, language barriers, and other priority populations to address isolation and build greater community connectedness.  |
| Prevention         | Increase understanding and awareness of Diversity, Equity, and Inclusion. <sup>57</sup>                           | Develop awareness and educational tools both virtually and in-person for public use in the workplace. Consider beginning with all leadership and management staff to create more positive and respectful environments and improve delivery of services.              |

See [Appendix D](#): List of Community Activities addressing Community Security.

## SECTION 6: Evaluation Matrix



Through development of this Plan, local surveys, research, data, and reports were collected from across the region. An Evaluation Action Team was also established to collectively determine what success looks like, what measurements are needed, and what data is available to monitor potential impacts of plan implementation.

### **Two themes emerged out of Evaluation Action Team discussions:**

- 1) that local data is important and data gaps should be addressed where possible; and
- 2) the Plan should focus on process indicators over outcome indicators at this time to best support implementation.



Over the long-term and as this Plan evolves, outcome indicators will become more important to measuring the success of goals and strategies. A major difference between process and outcome indicators is that process indicators are action-oriented and tend to be yes/no evaluations as to whether a process has been initiated or not. In contrast, outcome indicators are used to evaluate whether processes are having the desired impact at the community and regional scale. Outcome indicators are effective for measuring success of processes when observed over longer time periods. As the Huron CSWB Plan is a new initiative in the region, process indicators will be important during the first phases of Plan implementation. Over time, and as processes and initiatives are developed based on this Plan, tracking outcome indicators will become more important. As part of Plan development, a list of potential outcome measures has been compiled across several thematic areas and can be found in [Appendix F](#).

To support Plan implementation, an evaluation matrix template has been developed (see [Appendix G](#)). It is envisioned that working groups, Action Tables, committees, or other organizations working to implement this Plan will work together to populate matrices for goals and strategies. A sample evaluation matrix is presented on the opposite page to illustrate how evaluation can be integrated into Plan implementation. There are several questions that should also be engaged with during the development of an evaluation matrix:

- Is the goal of the intervention clear?
- Does the strategy clearly connect to the goal? Is there a clear action identified? Does the strategy have a temporal dimension? (i.e., should be complete within 6 months).
- Who is providing backbone support? Who is leading?
- Who should be involved with this strategy? (i.e., partner mapping).
- What resources are needed for strategy success? What gaps might exist? (i.e., knowledge, funding).
- What data do we need to make informed decisions or to track long-term outcomes?
- What happens after the strategy or action has been accomplished / implemented? (i.e., wind down).

## Transitioning from Process to Outcome Indicators

As this Plan is implemented and strategies are put into action, a shift in focus from process indicators (i.e. are we doing what we said we would?) to outcome indicators is recommended (i.e., is what we did/are doing having the community impact we would like?). For example, a goal may be to reduce homelessness in the region and a strategy could be to provide wrap-around services to those vulnerable to eviction or other dimensions of housing instability. A process indicator would be to establish a working group to identify services that should be provided or available. Once these services and approaches to providing them more holistically are determined, outcome indicators should be identified. For example, indicators such as number of evictions in the region or number of individuals accessing new wrap-around services could be selected. In some cases, data may not be available to track these indicators and strategies to address data gaps may be required. Evaluating the long-term impact of the wrap-around services initiative requires outcome indicators to be tracked over many months and, likely, years.



## Sample Evaluation Matrix

### PRIORITY AREA: COMMUNITY SECURITY

| Intervention         | Social Development  |
|----------------------|---|
| Goal                 | Create welcoming communities in Huron County  |
| Strategy             | Develop a Diversity, Equity, and Inclusion Strategy for Huron County to increase a sense of inclusion, belonging, and connectedness   |
| Process Indicators   | <ul style="list-style-type: none"> <li>• Organization responsible for strategy development is identified (e.g., Action Table with all nine lower-tier municipalities represented)</li> <li>• Potential partners are identified, and roles defined</li> <li>• Action Plan developed that establishes specific goals, objectives, timelines, and work plan for strategy</li> <li>• Gaps and opportunities to be addressed through the strategy are identified</li> <li>• Input from priority populations is gathered (e.g., survey and interviews)</li> <li>• Draft strategy is reviewed by January 2022</li> <li>• Strategy implemented by May 2023</li> </ul> |
| Data Source(s)       | <ul style="list-style-type: none"> <li>• Community survey and interview data</li> <li>• Partner input</li> </ul>  |
| Key Themes Addressed | <ul style="list-style-type: none"> <li>• Integration</li> <li>• Holism</li> <li>• Communication</li> </ul>  |

## SECTION 7:

# Moving Forward Together

## 2021–2025



### Advancing Community Safety and Well-Being Across Huron

Huron's Community Safety and Well-Being (CSWB) Plan takes a comprehensive and holistic approach to planning that intersects with many sectors. Across Huron, organizations are committed to improving community safety and well-being, and this Plan establishes a foundation and approach that organizations can embed in their own work.



With issues identified and prioritized, the next steps of the Huron CSWB Plan will be to determine how best to action and implement strategies to achieve outcomes that have been identified to date. Accountability of the Community Safety and Well-being Plan rests with the nine municipalities and potential implementation tactics may include:

- 1 Appoint an Oversight Committee** with representation from each municipality, police, health care, social services and 25% comprised of other key stakeholders (e.g. School Boards, Children and Youth Services, United Way, Violence Against Women, Immigration Partnership Network, Mental Health and Addiction Services, etc.) and to oversee and guidance of the Huron Community Safety and Well-Being Plan.

**Committee responsibilities could include:**

- Developing an implementation plan, monitoring and evaluating the Plan, and guiding efforts for collaboration and action as the overarching governing body for community safety and well-being planning occurring locally.
- Building an alliance among people and organizations from multiple sectors for a common purpose and provide opportunities for partners to share their opinions and experiences, and influence the direction of prevention, intervention, and capacity building activities.
- Helping to coordinate and mobilize key community groups, agencies, and initiatives through effective communication channels and undertake a problem-solving approach to identify risk factors and gaps that, left unchecked, have the potential to compromise the safety and wellbeing of vulnerable community members.
- Identifying and prioritize community safety and well-being issues for potential responses, which could include identifying existing or establishing new Action Tables.
- Measuring and reporting on Plan implementation, progress, and achievements.

**The Oversight Committee will have in place the following core features to enable members to achieve collective impact:**

- A common agenda among partners.
- Clearly articulated roles, responsibilities, and timelines.
- Continuous communication processes among stakeholders to maintain trust and alignment.
- A backbone organization that provides supports required to coordinate and convene partners.
- Mutually reinforcing activities aligned with priority objectives.
- Shared measurements to assess impacts.

**2 Utilize Action Tables** (new or existing) to operationalize goals and strategies to achieve stated outcomes for identified and emergent Priority Areas.

- Action Tables led by an appointed chair could recruit community partners or individuals best positioned to address issues and implement strategies. If an existing group is well-positioned to address the issue, the group could be asked to assume the de-facto role of an Action Table.
- Action Tables are accountable to the Oversight Committee and could be tasked with:
  - Address risks and other issues related to community safety and well-being, both those identified in this Plan and those that emerge over time.
  - Deliver on the Action Plan goals and outcomes to be achieved, identify timelines, establish measurable objectives, and resources required.
  - Deliver on the identified evaluation matrix template that outlines goals, strategies, and processes align with or address key themes identified within this Plan.
  - Action Tables would then provide regular updates to the Oversight Committee as progress is made on implementation of key activities of the Action Plan.

## Next Steps

Moving the Community Safety and Well-Being Plan forward the following phases of work is extremely important and recommended:

### 1. Establish the Oversight Committee

(as described previously) and identify municipal staff that will provide administrative support to the Committee including:

- a. Drafting internal and external communications.
- b. Preparing and circulating meeting agendas and minutes.
- c. Preparing Committee documents (e.g., proposals, briefing notes) as directed by the Chairperson / Co-chairs.

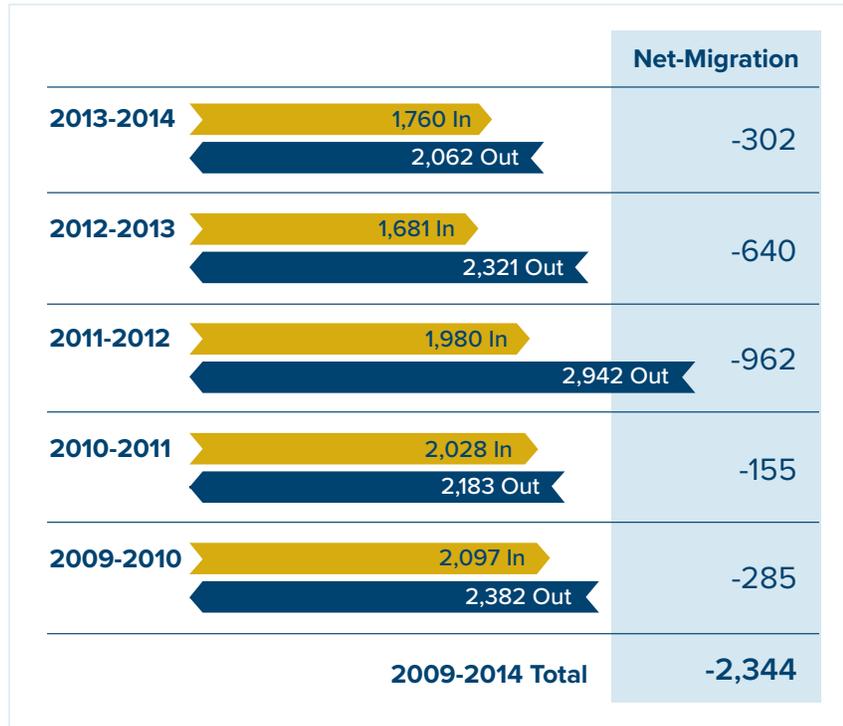
### 2. Develop an implementation plan.

Given the complexity and interconnectedness of factors that impact community safety and well-being in Huron, Plan implementation should be based on building on existing collaborations, initiatives, and system plans.

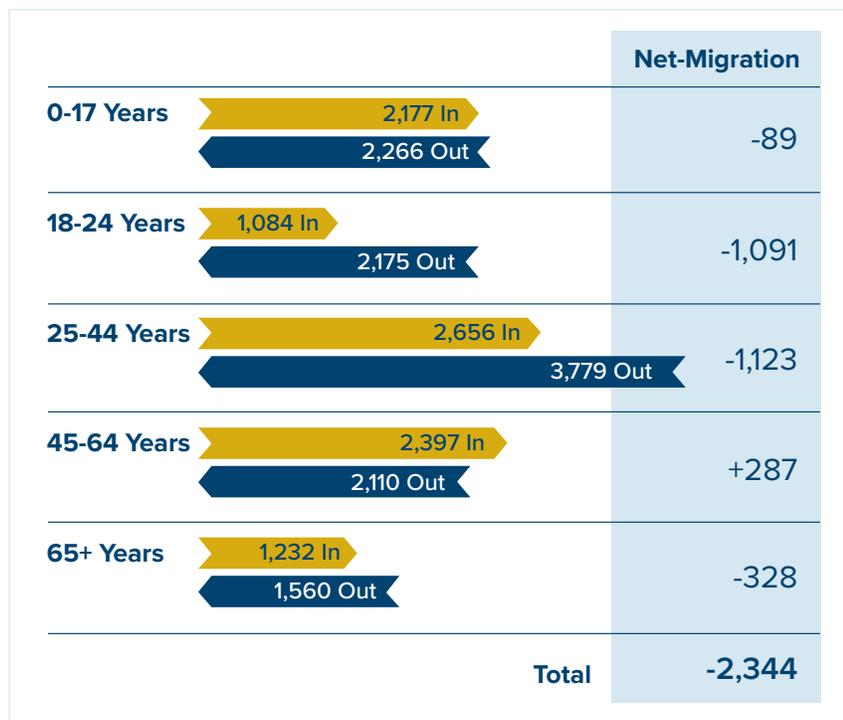
There are many efforts occurring in Huron that contribute to making the region feel safe and equitable for all. As an iterative and evolving Plan, we encourage service providers, residents, and local organizations to stay connected, share their work, and collaborate on new initiatives that contribute to community safety and well-being in Huron. We all have a role to play in making Huron a safe, inclusive, and connected community where all residents thrive.

# Appendix A: Statistics and Data

## MIGRATION CHARACTERISTICS: HURON COUNTY, 2009-2014



## MIGRATION BY AGE COHORT: HURON COUNTY, 2009-2014



## Migration Rates in Huron<sup>57</sup>

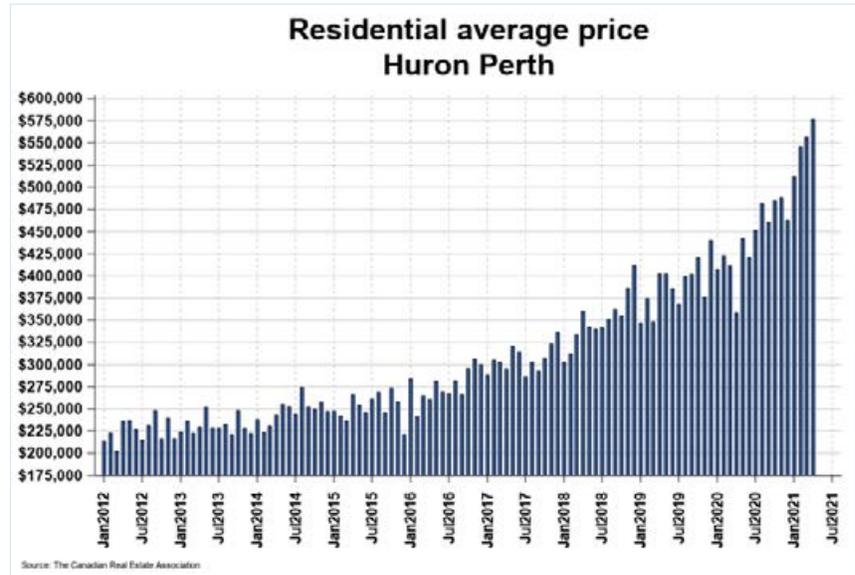
Between 2009 and 2014, Huron County attracted 9,546 persons through in-migration and lost 11,890 to out-migration, with net-migration resulting in a decrease of 2,344 persons.

## Migration by Age Cohorts<sup>58</sup>

In addition to looking at the total number of people who moved into or out of Huron County, the images above show migration by age cohort over the 2009 to 2014 period. The data reveals that the 25 to 44 age cohort accounts for most migrants moving into and out of Huron, at 2,656 and 3,779 persons, respectively. The 45 to 64 age cohort accounted for the only net gain of persons, at 287, while the 25 to 44 cohort accounted for the greatest net loss of people.

## Housing Market<sup>59</sup>

The number of homes sold through the MLS® System of the Huron Perth Association of REALTORS® totaled 232 units in April 2021. This was more than double the levels from a year earlier, increasing 197.4% from April 2020. Competition among buyers for a record low supply of listings has now driven year-over-year benchmark price growth into the neighbourhood of 40%.



The MLS® Home Price Index (HPI) tracks price trends far more accurately than is possible using average or median price measures. The overall MLS® HPI composite benchmark price was \$505,800 in April 2021, a substantial gain of 39.3% compared to April 2020.

The average price of homes sold in April 2021 was a record \$576,514, a jump of 61% from April 2020. The dollar value of all home sales in April 2021 was \$133.8 million, more than double the levels from a year earlier, surging 379% from the same month in 2020.

## Household Spending on Rent

| Household Type          | Average Renter Household Income | Median Renter Household Income | Average Household Rent and Utilities |
|-------------------------|---------------------------------|--------------------------------|--------------------------------------|
| Couple with kids        | \$66,104                        | \$59,222                       | \$947                                |
| Couple without kids     | \$55,883                        | \$50,179                       | \$891                                |
| Single male with kids   | \$40,995                        | \$44,005                       | \$799                                |
| Single female with kids | \$35,992                        | \$30,580                       | \$843                                |

# Appendix B:

## Factors Impacting Community Safety and Well-Being in Huron

Across the municipalities of Huron, economic stability converges on social determinants of health and is an influential factor affecting overall community safety and well-being. These economic elements include education, employment and occupation, and income.<sup>60</sup> Along with social factors, these elements may influence an individual's socio-economic position in society and are interrelated with all priority areas in Huron.<sup>61</sup>

In the “How Much is Enough”<sup>62</sup> report prepared by the Social Research and Planning Council individuals in Perth and Huron Counties with lived experience talked about the impacts of not

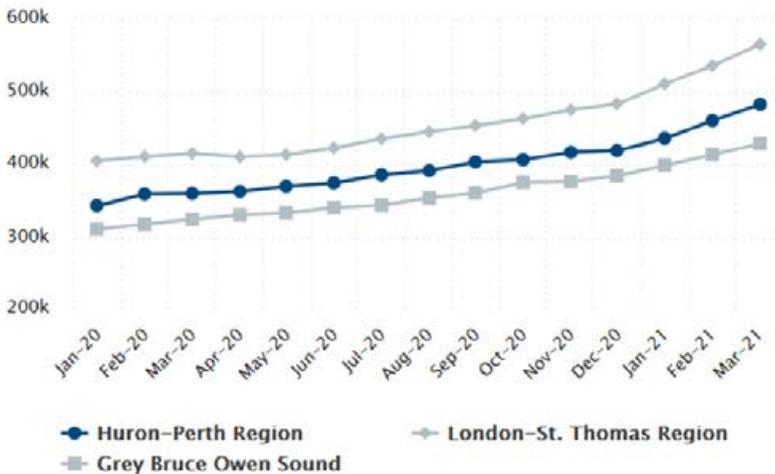
earning enough, which includes food insecurity, poor physical and mental health, limited transportation options, lack of stable housing, and lack of access to programming (e.g., childcare). Individuals mentioned that the pandemic has created increased financial stress due to job loss/layoffs and/or job uncertainty.

Economic elements and identified protective and adverse factors that affect economic stability for individuals and communities. Many of these factors are closely related to or underpin risks or issues that adversely affect community safety and well-being in Huron.

| Economic Element                                       | Protective Factors   | Adverse Factors   |
|--|--|---|
| Education <sup>64</sup>                                | <ul style="list-style-type: none"> <li>• Higher skilled/labour jobs</li> <li>• Higher and stable income</li> <li>• Increased school connectedness</li> <li>• Sense of Community belonging</li> <li>• Access to nutritional food, exercise and physical health and healthcare<sup>65</sup></li> </ul> | <ul style="list-style-type: none"> <li>• Childhood trauma</li> <li>• Greater disadvantage leading to higher mortality rates amongst poorly educated</li> <li>• Poverty trap</li> <li>• Health issues</li> </ul>                       |
| Employment and Occupation<br><sup>66, 67, 68, 69</sup> | <ul style="list-style-type: none"> <li>• Sense of purpose</li> <li>• Job security</li> <li>• Financial security</li> <li>• Social status</li> <li>• Personal development</li> </ul>  | <ul style="list-style-type: none"> <li>• Unemployment Reduced income</li> <li>• Underemployment</li> <li>• Delinquency/Crime</li> </ul>   |
| Income <sup>70, 71, 72</sup>                           | <ul style="list-style-type: none"> <li>• Higher standard of living</li> <li>• Greater choice in food availability and quality, housing, physical activity, social participation, and health care</li> </ul>  | <ul style="list-style-type: none"> <li>• Loss of income</li> <li>• Poor health (mental and physical health) Psychosocial stressors on family amongst lower income earners (Risks of Violence)</li> <li>• Social inequality</li> </ul> |

## Housing and Homelessness

This region has become a retreat from the urban density concerns of the pandemic, housing prices are on a steady upward trajectory, which has contributed to the low vacancy rates in the region, making affordable housing nearly impossible to obtain.



Housing is one of the best-researched social determinants of health, and selected housing interventions for low-income people have been found to improve health outcomes and decrease health care costs. Improved housing conditions can save lives, prevent disease, increase quality of life, and reduce poverty. Housing has become increasingly important to health considering urban growth, ageing populations, and climate change.

A “Housing First” model<sup>72</sup> involves moving people experiencing homelessness—particularly people experiencing chronic homelessness—rapidly from the street or emergency shelters into stable and long-term housing, with supports. Stable housing provides a platform to deliver services to address issues frequently faced among the chronically and episodically homeless. The goal is to encourage housing stability and improved quality of life for persons served by Housing First and, to the extent possible, foster self-sufficiency.

Homelessness is associated with crime victimisation, which is a leading cause of death, exacerbates health problems, and increases the risk of violence. During the COVID-19 pandemic there has been a heightened law enforcement response to homelessness and homeless encampments locally and nationally. There is a culture of criminalization of poverty in the time of COVID-19. A National Youth Homelessness Survey<sup>73</sup> found that 59.6% of youth who are homeless experience violent victimization,

including high rates of sexual assault, compared to 7.6% of the general public.<sup>74</sup> This violence on the streets is often preceded by violence or neglect within the home, with many youth being kicked out or forced to leave home due to instances of abuse, destructive family relationships, or alienation due to gender-diverse or sexual identity disclosure. As a result, there are extremely high rates of school dropouts, involvement in crime, and incidences of human trafficking. Homelessness can have a lifelong impact on mental and physical health.

Homelessness can be attributed to historical trauma, discrimination, and racism, which translates to limited opportunities. Extreme poverty and lack of adequate housing and supports also put individuals at higher risk for homelessness. Women who are experiencing poverty and homelessness<sup>75</sup> is on the rise. 27% of shelter users are women, 16% are seniors living in poverty, and 1.9 million+ women are living on low income and are dangerously close to homelessness.<sup>76</sup>

Homelessness is a complex problem that demands a response from governments, service providers, service recipients and the community

at large. We need to support every person that is on a journey out of homelessness. Whether it is providing safe and affordable housing units, addressing issues around mental health and addiction, or connecting individuals and families to other support services, we are there to provide tangible solutions that lead to positive outcomes.

## Employment

From 2016 to 2019 the Four County Area witnessed significant job growth and very low unemployment rates.<sup>77</sup> Even under these desirable labour market conditions, however, lurked the challenge of precarious employment and its implications. Amidst the COVID-19 pandemic, precarious employment has become much more of an issue in Huron County. Precarious employment has serious impacts on workers and their families. Some of the more significant issues associated with precarious employment are:<sup>78</sup>

- Harmful effect on worker’s physical and mental well-being;
- Limited access and support for workplace training and educational upgrading;
- Inability to meet basic financial needs such as housing, transportation, and/or childcare;
- Increased health and safety concerns on and off the job;
- Work-life imbalance created by difficult schedules, multiple jobs;
- Lack of benefits or wage coverage during times of illness or family emergencies;
- Inability of multiple job holders to qualify for employment insurance if an income or wage are lost;
- Inability to access the supports and services available to the unemployed; and
- Income disparity with significant loss of income during the pandemic.

It is important to recognize the significant influence that economic stability has on overall community safety and well-being. With precarious employment becoming a larger issue in Huron within the context of the COVID-19 pandemic, many of the Priority Areas identified will inevitably intersect with or be affected by economic stability in the months and years that follow and as this Plan is actioned and implemented.

## Mental Health and Well-Being

Police perform many duties, including responding to events that are directly related to public safety and well-being, even if they are not criminal in nature. These events are referred to as calls for service. In a selected police-reported crime and calls for service during the COVID-19 pandemic, March to August 2020,<sup>79</sup> the number of calls for service rose 8%, particularly wellness checks, mental health calls, and calls to attend domestic disturbances. Most notably, police services that were able to report data on calls for service responded to more calls related to general well-being checks (+12%), domestic disturbances (+10%) and mental health-related calls such as responses to a person in emotional crisis or apprehensions under the *Mental Health Act* (+10%).

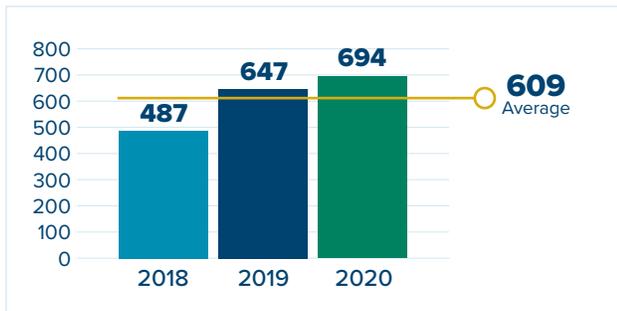
In a qualitative Rural Response to COVID-19 Residential Survey conducted by Dr. Leith Deacon,<sup>80</sup> University of Guelph, in August 2020 in Huron and Perth found a 79% increase in females reporting poor mental health and a 100% increase in males aged 18-29. Rural communities are highly vulnerable to the impacts of COVID-19 due to their unique characteristics, including demographics (i.e., increased percentage of older residents) and insufficient service access (i.e., digital, social, and medical).

# Crime and Safety Issues

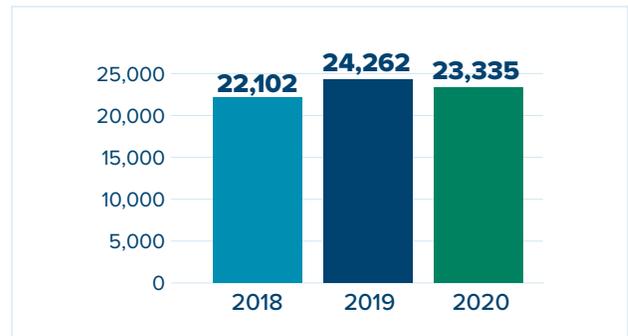
## Violent Crime

Huron is served by the Ontario Provincial Police (OPP) Huron County detachment. From 2019 to 2020, there has been a 7% increase in actual violent incidents in Huron County. Comparably to Ontario statistics where there has been a slight decrease 3% in violent crime incidents in 2020.

**VIOLENT INCIDENTS IN HURON COUNTY, 2018-2020**



**VIOLENT INCIDENTS IN ONTARIO, 2018-2020**



## Domestic Disturbances

There have been 1996 domestic disturbances in Huron between 2018 to 2020, with 2019 and 2020 showing lower numbers than 2018, with an average of 665 and 2020 was just below the yearly average. 2020 showed a 7% decrease compared to 2018.

While OPP data provides some indication of family and intimate partner violence in the community, incidences are significantly underreported and the true extent of family violence in Huron is unknown, adding complexity of unreported incidences during the conditions of the pandemic.

**DOMESTIC DISTURBANCES IN HURON COUNTY, 2018-2020**



A domestic relationship\* was one aspect associated to 4,500 victims in violent crime occurrences.

**Of these 4,500 victims:**



**82.6%** were or were previously involved in an intimate relationship with the offender



**62.4%** were female

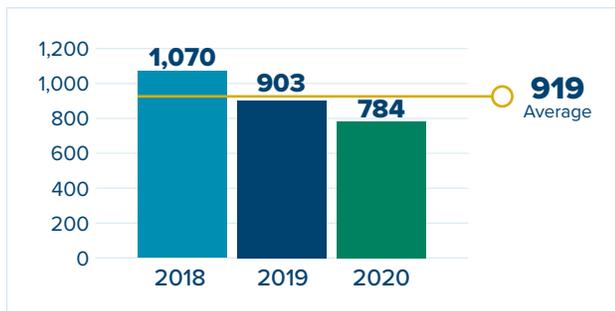
**Less than 1%** of offenders were **strangers** to the victims

\*For this reporting the relationship to the victim included boyfriend, girlfriend, ex-boyfriend, ex-girlfriend, other intimate relationship, casual acquaintance, spouse, separated or divorced.

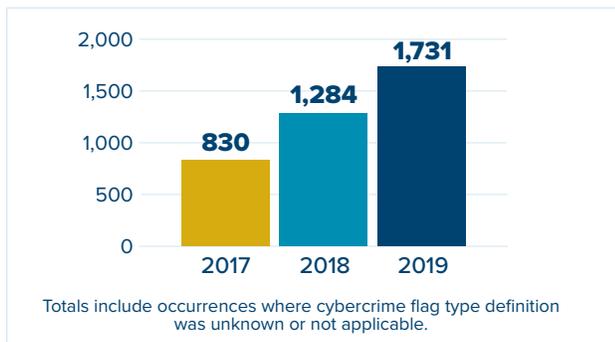
### MENTAL HEALTH ACT CALLS IN HURON COUNTY, 2018-2020



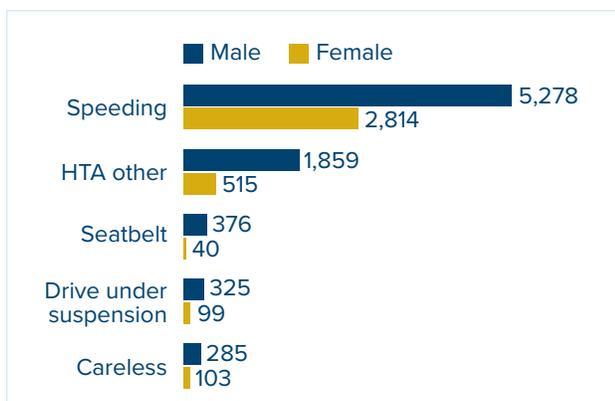
### THEFTS IN HURON COUNTY, 2018-2020



### CYBERCRIME OCCURRENCES IN ONTARIO, 2017-2019



### TOP 5 DRIVING OFFENCES BY GENDER, HURON COUNTY 2018-2020



## Mental Health Acts

Police responded to an average of 716 calls over the past three years related to mental health acts. In 2020 there was a sharp increase of 21% mental health related requests for assistance from the OPP Huron detachment.

## Thefts

The number of thefts per year in Huron has been decreasing steadily from 2018 to 2020, with 2020 showing 27% fewer occurrences compared to 2018 (784 occurrences in 2020 vs 1070 in 2018). Ontario reported a total of 22,136 theft offences. These thefts include over/under \$5,000, shoplifting, theft of mail, theft of/from motor vehicle, etc.).

## Cybercrimes

In total, there have been 108 cybercrime occurrences in Huron between 2018 to 2020. In 2020, there were 38 occurrences, just above the 3-year average of 36 in Huron. In Ontario in 2018 there were 1,284 offences and in 2019 there were 1,731 and climbing.

## Highway Traffic Act Occurrences

In 2020, there were 4,353 Highway Traffic Act occurrences, 3% more than the 3-year average of 4,250 in Huron. Speeding and seatbelt charges were the most common Highway Traffic Act offences. In total, males showed more than double the figures of females and accounted for 8,793 charges, while females accounted for 3,900 charges.

## Liquor License Act Occurrences

In total, there have been 526 Liquor License Act occurrences in Huron between 2018 to 2020. In 2020, there were 194 occurrences, 11% more than the 3-year average of 175.

# Appendix C:

## Priority Area Selection Process

This process was community led and tested over months of knowledge gathering, surveying, and ongoing community consultations. The Priority Area selection process included:

### 1. Community Survey

The process began with the distribution of the Canadian Municipal Network on Crime Prevention Survey and the results of the consolidation of all regions.

#### **Survey Results: Question—Which issues require improvement or attention to improve safety and well-being?**

- Traffic controls
- Affordable housing
- Mental health and addiction (education and programs)
- Health care services
- Accessibility
- Public transportation
- By law enforcement
- Cleaner public spaces
- Homelessness, poverty
- Road safety

### 2. Literature Review and Trend Analysis

A collection of academic sources (such as books, reports, and research articles) on various community issues, specific topics, and geographical information was developed. These sources were existing knowledge and were reviewed. Trends were analyzed in a widespread practice of collecting information and attempting to spot patterns. Some sources included:

- [How Much Is Enough Report](#)
- [Living Wage Report](#)
- [Mental Health and Addictions Report](#)
- [Racism Survey](#), Huron County Immigration Partnership
- [Housing and Homelessness Plan](#) and 5 Year Review
- [Residential Survey Huron Perth 2020](#)
- [Supportive Housing Report](#)
- [Feasibility Studies](#)
- [Community Renewal Company](#)
- [Transformative Resiliency Framework](#)
- [Basic Income Report](#)
- Community Safety and Well-Being Plan review: Grey Bruce, Cornwall, Durham, Halton, Peel and Perth.
- [Health Studies](#)
- [COVID-19 Impact Report](#)
- [Understanding the Prevalence of Precarious Employment in Four County Area](#)
- [Post pandemic Economic Scenarios](#)
- [Ontario Provincial Police Annual Report 2019](#)

### 3. Subcommittee Discussions

Subcommittees on Crime, Education, Medical, Children and Youth, Seniors/Adults with Disabilities, Mental Health, Addictions, Poverty and Housing utilized knowledge from the Provincial Risk Driven Tracking Database, existing reports, strategies, data, and key indicators to identify areas of elevated risk. Based on this work, the following risk factors were identified:

#### Homelessness/Housing

- Lack of housing options and support
- Leads to, increase in service from police to remove from private property but does not solve the problem permanently for those facing homelessness

#### Drug Addiction / Alcohol Abuse

- Increase in addiction issues in the community
- Extended waitlists for addiction support
- Impaired/distracted driving
  - High risk to public safety, potential loss of life
- Increase in criminal involvement
  - Increase in motor vehicle thefts
- Lack of appropriate and effective treatments and harm reduction strategies for addictions and substance abuse
- Overdose, chronic health conditions, increased accidental death

#### Sexual Violence / Domestic Violence / Family Violence

- Challenges of getting sexual domestic violence resources/education to the community
- Limited awareness of the resources available and how to recognize warning signs
- Limited available services during the pandemic
- Limited social safety nets for child, youth during the pandemic (i.e. online school)

#### Mental Health

- Increase in drug and alcohol for coping mechanisms
- Lack of access to timely and effective mental health and medical services
- Misdiagnosis and limited professional services in the area

#### Physical Health

- Lack of activities
- Affordability of activities
- Access to activities (transportation, guardians working multiple jobs)
- High obesity rates

#### Transportation

- Limitations on transportation for those in need to access resources
- Lack of transportation can further impact criminal behaviour and public safety as a means to meet basic needs
- Lack of transportation between towns in the region and beyond, limiting accessibility to appointments and work

## Public Security

- Sense of feeling safe in community, walking down the street without changing direction
- Safety concerns for women walking alone after dark
- Sense of theft increasing
- Insecurity of community safety with public outbursts and unpredictable mental health concerns
- Drug and alcohol activities are visible in community
- Increase in nuisance crime and vandalism
- Lack of activities for youth engagement
- Impaired/distracted driving

## Poverty Reduction & Economic Stability

- Income Inequity
- Job Insecurity
- Systemic discrimination
- Gig workforce (Gig Economy)
- Skills Training

Emerging trends identified include: access to services; timely and professional services in the region; education and awareness; systems planning and integration; affordable, accessible, and suitable housing.

## 4. Public Consultations and Stakeholder Feedback and Existing Committee Tables

To test and further explore emerging and identified community concerns further exploration and knowledge gathering amongst community participants, organizations, and service providers, through:

- Public consultations (and under 30 public consultations)
- Stakeholder interviews (i.e. Huron Perth Centre; Choices For Change; Rural Response for Healthy Children; Huron Safe Homes for Youth; Faith Community Leaders, etc.)
- Existing Community Committee discussions (i.e. P2P; Equity, Diversity and Inclusion; Indigenous Working Group; Tanner Steffler Foundation Youth Advisory Committee, etc.)
- Evaluation Advisory Committee, Community Safety and Well-Being Advisory Committee
- Under 30 Advisory Committee, Community Safety and Well-Being Advisory Committee

## Mental Health and Addictions

- Consideration for services to be provided within the home. (12 responses)
- Use language around 'care navigation'. (4)
- Navigation services exist in other regions, potential examples to learn from. (20)
- Increased communications between mental health and physical healthcare providers. (15)
- Services are effective when rapport with participants are in place, this can be achieved through more onboarding processes and time. Consider utilizing service providers who already have existing relationship where appropriate. (3)
- 'Social Prescribing' - peer referral or mentor system can assist with long wait times. (7)
- Local services do not have the resources to educate the public, this will need to be funded and carried out by branches of government. (20)
- Health literacy is lower in rural communities. (6)
- Police and courts need to understand the cognitive function is reduced or not there for individuals with addictions. Courts specifically for opioid offences could help alleviate this gap. (5)
- Understand addictions as a disease. (7)

- Take a proactive approach and educate at a younger age. (26)
- Services need to be local, or an affordable, consistent transportation option needs to be available. (23)
- ‘One Door Approach’, connections and information are shared amongst all services. (26)
- Understand housing is intrinsically linked. (24)
- Explore a new framework for collaboration amongst services. (7)

### Housing Stability and Homelessness

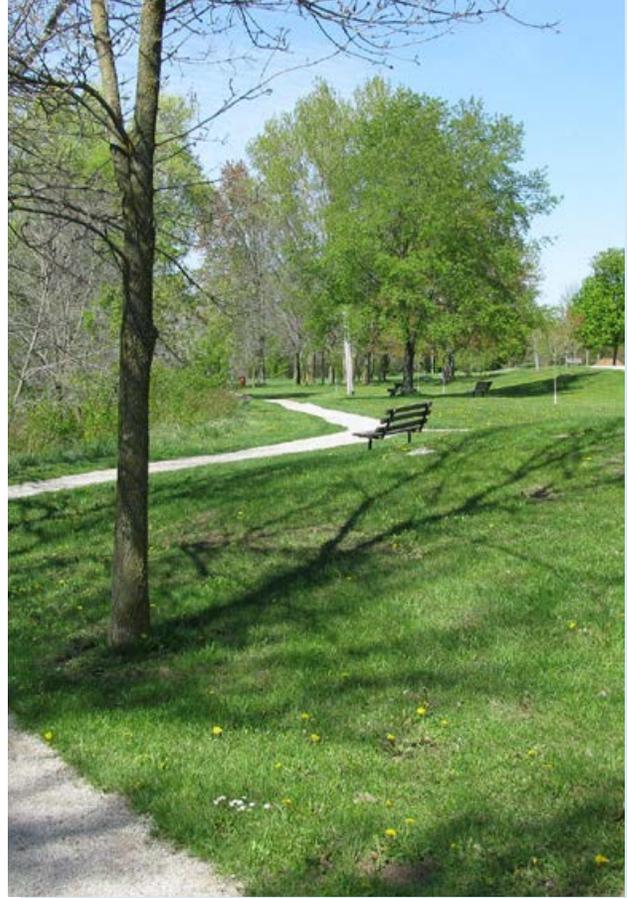
- Often, young adults need space, while older adults have too much space. A program to pair the two could benefit both parties. (8)
- Services need to improve response time for those experiencing housing instability and eviction in rural communities. (26)
- A sense that an individual basic needs are going to be met. Safety at all levels (Maslow hierarchy of needs) and supported if your needs are not met. (6)
- More options available to homeless youth, with less requirements for entry (both long term and short term). (17)
- Consider gender and LGBTQ+ issues when approaching homelessness. (9)
- Services and housing options need to be local, without the need for people to travel long distances. (12)
- Greater awareness and reducing stigmas. (24)
- Funding for supportive housing from all levels of government. (16)
- Transitional services are available to help adjust to living in the home. (9)
- Consider and investigate people’s views and cultures before settling on an approach. (11)
- More subsidized housing available. (22)
- Stronger market regulations on rent prices. (15)
- Change laws and regulations around foreign home ownership. (7)
- Change laws and regulations around land development and housing. (12)
- Support is equal across all demographics. (14)

### Domestic Violence

- It is incredibly important to not let the issue ‘go underground’ due to COVID 19. (16)
- Culture needs to be a consideration for newcomer families, even offering a grace period leniency to provide more opportunity for correcting what used to be normative behaviour. (3)
- Education should focus on prevention and breaking cycles, as most instances are not a first time offence. (23)
- Resources need to be available to teach children how to deal with negative emotions, especially those from violent households. (12)
- Online learning from home have compounded instances of child abuse. (7)
- Services need to increase response times for rural communities. (21)
- Increasing cyber security training for services to avoid lost time and resources to hacking and viruses.
- Basic needs being met does not directly reduce issues such as poverty, but does allow individuals to focus on corrective behaviours, personal goals and making right decisions. (22)
- Cultural shift toward equity (12)
- COVID-19 causing increases in isolation means approach needs to be different from prior years. (18)
- Providing safe spaces for children, women and men. (3)

## Community Security

- Providing basic needs should extend past just food, as toiletries are arguably in greater need to low-income families. (19)
- Municipalities should be more involved in providing multiple transportation options. (22)
- A shortage of nurses, PSWs and social workers needs to be addressed at the local and provincial levels. (6)
- Focus on shared values and characteristics when two parties are learning about one another for the first time. (1)
- A greater push for families to have a primary healthcare provider. Communities do well when the largest percentage of individuals have a family doctor. (11)
- Greater education on situations involving elder abuse. (17)
- A standardized process needs to be in place to regularly identify silent or overlooked groups. (4)
- Nonverbal individuals remain one of the most isolated groups, with most services having no way to provide same level of care they would with participants who are verbal.
- Expectations are different than what is actually happening - blurring of lines to provide service delivery - overall security of the community but should not be the supplier...911 is an easier call than the person that can actually help you...so they can be the beginning, but police are not the service providers and nor should they be. (9)
- Significant cultural shift is needed for all communities. (16)



- Vulnerable populations...multi dimensions (disabilities and Mental Health issues) those that we put into a box but they don't fit in one box...makes them more vulnerable... they are hidden because they get social assistance and live in a house but are very vulnerable - systems don't fit. (1)
- Ability to walk around community alone at night and feel safe. (26)
- Replacing the traditional 'colonial system' with an effective multicultural system in all sectors. (18)
- Understand that transportation is interconnected to accessibility or services, groceries and employment. (24)
- Adequate caregiver support. (10)

## 5. Community Narrative Library Community Consultations

Over 50 one-to-one interviews and 9 community conversations were held. These interviews/conversations reflected the aspirations, main concerns, and specific issues that were shared by the participants.

### Highlights:

- People want a safe, healthy, and friendly community that has a self-sufficient, small-town feel.
- People want a community that is supportive, barrier-free, and inclusive with opportunities and activities for all.
- Overall feeling of pride and love for the communities in which they live.



### Concerns:

- Identification of the communities lacking progress.
- Lack of openness to new ideas and people.
- Division among groups seems to be widening.
- Trend toward the inability to work together that is affecting community engagement, participation, and communications.
- People are feeling discouraged and un-welcomed.
- There was an overall concern that basic needs in community are not being met equally such as housing and transportation.
- Communities are divided into cliques and silos which creates barriers to new events, ideas, and people.
- Concerns with the lack of social space, effective communication of community events, and services and scarcity of entertainment.
- Lack of collaboration in community.
- Services are often hard to find and difficult to navigate.
- Youth are overlooked and lack opportunities in community, housing options, transportation, addictions, and mental health.
- Community is becoming less affordable, welcoming, and safe (e.g. housing, transportation, etc.). People are being left behind.
- Building better infrastructure and support for everything from basic needs, housing, recreation, culture, and growth.
- Community vitality is a concern.

# Appendix D: Community Activities

## Mental Health and Addictions

### [Alcoholics Anonymous - Central West](#)

Fellowship group offering support to anyone with a desire to stop drinking. Group meetings follow the Alcoholics Anonymous twelve steps to recovery.

### [Alexandra Marine & General Hospital](#)

The Alexandra Marine and General Hospital (AMGH) has been providing quality health care services to the residents of the Town of Goderich and surrounding municipalities for over 100 years.

- **Inpatient Mental Health:** Alexandra Marine and General Hospital is a Schedule 1 facility which serves the broader region with our unique mental health programs that provides care and treatment to adults 16 years and older experiencing acute and chronic mental health and addiction illness.
  - **Psychiatry Services:** The 20 bed inpatient program services adults experiencing acute mental health and addictions issues and concerns. In partnership with Choices for Change, three of these beds are available to individuals requiring withdrawal management and three addiction services.
  - **Social Work:** The Social Work Department provide the following services to inpatients utilizing a case management approach: Consultation and assessment with multidisciplinary treatment teams, both in our hospital and the community. Discharge planning, which involves assessment of the patient and his/her social situation to determine appropriate post hospital care and facilitate placement, where needed. Facilitating connections for

financial assistance, legal representation, educational upgrading and vocational rehabilitation, as necessary.

- **Outpatient Mental Health:** The Hospital offers full-time Community Psychiatric Services located in Clinton, Exeter, Goderich, Seaforth, and Wingham.
  - **Huron Community Psychiatric Services:** offers outpatient mental health psychosocial rehabilitation both group and individual counselling. Our services are supported by psychiatrists and regulated health care professionals (serving adults 16 years and over) dedicated in providing you with high quality care.
  - **Huron Outreach Eating Disorders Program:** offer Outreach Counselling to individuals diagnosed with an eating disorder, or engaging in eating disordered behaviours.
  - **Huron Perth Regional Intensive Case Management Program:** Intensive Case Management services provide time limited goal specific in home community treatment. The program focusses on relapse prevention and stabilization in the community utilizing psychological education, medication management, liaising with partner agencies and advocacy.

### [Alzheimer Society of Huron County](#)

The Alzheimer Society of Huron County is a non-profit charitable organization dedicated to helping people living with Alzheimer's disease and other dementias, their families, and their caregivers. We provide programs, services, and education to persons with Alzheimer's disease

and other dementias and their care partners. The Alzheimer Society of Huron County serves residents of Huron County, with an office located in Clinton and satellite offices located in Zurich and Wingham.

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#### [Avon Maitland District School Board](#)

At Avon Maitland District School Board, we use a tiered approach to mental health and well-being: Tier 1 – Mental Health Promotion for all students, Tier 2 – Preventative Interventions for students at risk, and Tier 3 – Pathways and Circles of Support for students and families with complex needs. During the month of January, the focus is on mental health and well-being and includes Bell Let's Talk day.

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#### [Betamarsh](#)

Betamarsh is a therapeutic agency that provides residential and foster care for children, adolescents, and young adults in a variety of programs, with individualized and group therapy as essential components of treatment. Betamarsh provides residents with long-term and short-term placements, in a safe and nurturing milieu. Betamarsh's continuity of care provides residents with support throughout all stages of their lives: from stabilization, to treatment, to semi-independence and full independence. The goal of these specialized programs is to provide the opportunity for the client to develop skills which will enable them to reach their own unique potential.

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#### [Choices for Change: Alcohol, Drug & Gambling Counselling Centre](#)

Choices for Change: Alcohol, Drug and Gambling Counselling Centre is an incorporated, charitable organization governed by a volunteer Board of Directors. The Board of Directors represents the communities in which we provide service and are responsible for the overall operation of the agency.

#### [Canadian Mental Health Association Elgin-Middlesex](#)

Canadian Mental Health Association (CMHA) Middlesex is here to encourage you along your mental health journey. Our goals are to promote good mental health, prevent further illness, offer treatment, support recovery, and provide mental health education. Our vision is an inclusive community with mental health and well-being for all.

- [Exeter Office](#)
- [Goderich Office](#)
- [Bounce Back Ontario](#) is a free skill-building program managed by the CMHA. It is designed to help adults and youth 15+ manage low mood, mild to moderate depression and anxiety, stress or worry.

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#### [Canadian Mental Health Association Huron Perth](#)

Canadian Mental Health Association Huron Perth (CMHA) is one of the smaller branches of CMHA in Ontario. We are very proud of the range of important and innovative services that we provide. Huron Perth has a rich history of mental health and addiction agencies coordinating services together since a working committee was first created in 1975. This history and spirit of cooperation continues today in our work as the Huron Perth Addictions and Mental Health Alliance. We take pride also in having a single point of access for people seeking support.

- *Goderich Office:* 52 Newgate Street, Goderich, ON N7A 1P1
- *Seaforth Office:* 92 Goderich Street West, Seaforth, ON N0K 1W0

### Huron Perth Helpline & Crisis Response Team

The Huron Perth Helpline & Crisis Response Team is available to all residents of Huron and Perth Counties. This service is available for individuals who are experiencing a mental health crisis.

- The *Helpline* is a 24 hour / 7 Days a week, crisis phone service with crisis assessments, brief crisis therapy and education regarding mental health and addiction services. The phone number for the Huron Perth Helpline & Crisis Response Team is 1-888-829-7484.
- Crisis also offers face-to-face assessments in the hospital Emergency Departments, homes and communities with police (*Mobile Crisis Rapid Response Team*), schools and doctors' offices in Huron and Perth counties.

### Huron Perth Addiction and Mental Health Alliance

The Huron Perth Addiction and Mental Health Alliance is a collaborative service model, established in 2012 to serve the addiction and mental health population in Huron and Perth Counties. The objectives of the Alliance are to: provide easier access to mental health and addiction services in Huron Perth; ensure optimal use of resources; and create stronger working relationships to improve client experience. The members of the Alliance include: Alexandra Marine and General Hospital; Canadian Mental Health Association Huron Perth; Canadian Mental Health Association Elgin Middlesex; Choices for Change: Alcohol, Drug & Gambling Counselling Centre; Huron Perth Centre for Children and Youth; and, Huron Perth Healthcare Alliance – Mental Health Services. The Huron Perth Addiction and Mental Health Alliance (the Alliance) is a collaborative service model, to serve the addiction and mental health population in Huron and Perth Counties. Better service to clients is the primary goal for the Alliance. Alliance members have a vision of Huron Perth as a community where every person enjoys good mental health and well-being throughout their

lifetime, and where people with mental illness or addictions can recover and participate in a welcoming supportive community.

### Huron Perth and Area Ontario Health Team

The Huron Perth and Area Ontario Health Team is one of the provincial teams implementing a new model of organizing and delivering health care that better connects patients and providers in their communities to improve patient outcomes. With approximately 60 partners, the team will integrate a full suite of health care services across Huron Perth and the surrounding area. Through the Ontario Health Team (OHT), patients will experience easier transitions from one provider to another, including, for example, between hospitals and home care providers, with one patient story, one patient record and one care plan.

### Huron-Perth Catholic District School Board

A tiered approach to mental health and wellness for our students is key to the development and implementation of programs and supports that enhance mental health and academic achievement. Mental Health and well-being supports for our students are provided by Board employed social workers, Social-Emotional Learning Skills Coaches and several community partners.

### Huron Perth Centre for Children and Youth

The Huron Perth Centre for Children and Youth is an accredited community-based children's mental health centre. It provides assessment and treatment services for a wide range of mental health concerns for children and youth up to their 18th birthdays. The Centre has partnerships with education, child welfare, health, youth justice/adult justice, violence against women, and fire services.

### Huron Perth Health Care Alliance

The Huron Perth Healthcare Alliance (HPHA) was established in 2003 and is a voluntary collective of four hospitals (Clinton Public Hospital, St. Marys Memorial Hospital, Seaforth Community

Hospital and Stratford General Hospital) that provides care across the continuum of acute and community-based services. HPHA is an organization born out of change; one that embraces the potential of partnerships; harnesses the power of performance and values the skills and guidance of our people – patients, families and caregivers included. That is how we remain at the forefront of care – thriving in a changing environment, pushing the envelope, and committed to the well-being of our patients.

- **Outpatient Mental Health**

Several Outpatient Mental Health Services are provided by the Huron Perth Healthcare Alliance (HPHA). Individual and group therapy services are offered in our offices in Listowel, Stratford, and Seaforth. In-home treatment is available for those individuals unable to participate in office-based services. Our services are supported by Psychiatrists and consultation is available to individuals registered with these services. These services are available for adults, 16 years and over, experiencing moderate to severe mental health challenges.

- **Clinical Intensive Case Management:**

The Huron Perth Clinical Intensive Case Management Program provides time-limited, goal specific in-home community treatment for individuals 16 years of age and over with serious mental health issues. The program focuses on relapse prevention and stabilization in the community. Services are provided by Registered Nurses, Social Workers, and a Consulting Psychiatrist. This program is a partnership between Alexandra Marine & General Hospital, the Huron Perth Healthcare Alliance, Canadian Mental Health Association and Huron-Perth & Middlesex.

- **Seniors Mental Health:** The Huron Perth Seniors Mental Health Program provides assessment and treatment for older adults experiencing responsive behaviours associated with complex and challenging mental health, addictions, dementia or other neurological conditions in the home, community, or long-term care.
- **Sexual Abuse Treatment:** The Sexual Abuse Treatment Program provides treatment to individuals who have experienced recent sexual assault or childhood sexual abuse. The program also promotes community awareness and provides education regarding the impact of sexual abuse issues.

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#### **Huron Perth Situation Table, Child and Youth Mental Health Network**

Service coordination group of police and other human service agencies which meets regularly to provide service coordination for individuals/groups/situations of Acute Elevated Risk due to mental health, addictions, life circumstances, involvement with the law, etc. Acute Elevated Risk addresses situations where significant harm can result without a coordinated and targeted response as soon as possible.

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#### **Mobile Crisis Response Teams (MCRT) OPP**

Crisis Workers team up with a specially trained police officer to respond to situations involving individuals experiencing a mental health or situational crisis. This Crisis Worker attends the scene and works hand in hand with the police. A primary goal of the MCRT is to provide an on-site assessment of the client, referring that person when appropriate to community-based services rather than transporting them to an Emergency Department.

### [Tanner Steffler Foundation](#)

TSF aims to enhance and improve mental health and addiction resources and support networks for youth between the ages of 12-24 within Huron County.

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### [thehealthline.ca](#)

thehealthline.ca is a website for Ontario patients, doctors, and health care providers to get accurate and up-to-date information about health services in their communities. thehealthline.ca platform is a provincially integrated database and asset that can be leveraged by health service providers and planners to help make healthcare better together.

## Housing and Homelessness

### [Canadian Mental Health Association](#)

#### [Elgin-Middlesex](#)

Manages affordable rental units throughout Huron and Perth Counties, includes owned buildings and sublet units from local landlords. Tenants with limited income and evidence of a mental illness may qualify for a rental subsidy based on income.

- **Supportive Housing:** Rent-subsidized apartments provide independent living for tenants. We manage rent-subsidized apartments and work with local landlords to provide quality supportive housing options. We also work closely with local service providers to assist you in gaining helpful community connections for greater well-being.
- **Permanent Housing:** Four residences in Exeter (four tenants in each) provide safe, affordable housing where rent is geared to income. Tenants receive on-going support as they gain greater independence.

[Cheshire Independent Living Services](#), Clinton Cheshire has been a non-profit, government funded organization that works to enable adults with significant physical disabilities and frail seniors to live actively, independently and with dignity in their own community.

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### [Habitat for Humanity](#)

We bring communities together to help families build strength, stability, and independence through affordable homeownership. With the help of volunteers, donors and Habitat homeowners, local Habitats in every province and territory across Canada help build and rehabilitate decent and affordable homes, from single-family houses to multi-unit developments. We do not give away free homes - the people who partner with us pay an affordable mortgage geared to their income and volunteer 500 hours with us. Our model of affordable homeownership bridges a gap for low-income, working families, by providing them with the opportunity to purchase their own home.

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### [Homelessness Task Force – County of Huron](#)

County of Huron and its partner agencies are dedicated to taking both immediate and long-term actions to improve the quality of life for all residents. These actions encompass inclusivity and awareness of the differences and complexities for every individual in need of support.

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### [Huron County Housing Services](#)

The County of Huron's Social Housing Program provides a range of administrative, support, and funding services to provide affordable housing options in the County of Huron. Available programs allow seniors to stay in their home communities, offer affordable homes to low-income families and give disabled people independence in a safe and secure environment.

### [Huron County Official Plan 5 Year Review,](#) **Huron County Planning Department**

The Huron County Official Plan 5-year Review includes the vision, goals, and policy directions of the County, as established by the community. It provides guidance for land use planning decisions in the County including locations for new housing, industry, offices and shops; what services like roads, water mains, sewers, parks and schools will be needed; when and in what order parts of our communities will grow; and protection for agricultural, mineral, and environmental resources.

### [Huron County Social Services Homelessness Strategy](#)

2019 County of Huron developed a Long-Term Housing and Homelessness Plan. A 5-year review of 2014-2019 was required for all Consolidated Municipal Service Managers. This report summarizes the findings from this research, identifies priorities and objectives for action to improve access to affordable housing and end homelessness within the County, and sets out recommended actions for the County to consider as it moves forward with the implementation of the Plan.

### [Huron County Social Services: Ontario Works and Ontario Disability Support Program](#)

Ontario Works is an Ontario-wide program that provides income and employment support to people in temporary financial need. The program combines income support with employment services and has two main components: Employment Assistance and Financial Assistance.

- **Pathways** is an emergency program that can assist families and individuals living with low incomes in Huron County when they are most in need. The aim of the program is to prevent homelessness and to provide access to financial supports for families and individuals. Emergency program that can assist families and individuals living with low incomes in Huron County to reduce child

poverty, promote attachment to the work force and prevent homelessness.

- **WILOW:** The County of Huron provides eligible Ontario Works clients and their family members with a free, confidential, short-term counselling support program for personal, family, and work-related problems. Wellness in Life for Ontario Works (WILOW) is operated by an external provider, Shepell. It is available 24 hours, 7 days a week, 365 days a year to provide immediate access to qualified professionals.

### [Huron Out of the Cold – Heart to Home](#)

Emergency overnight shelter offering warmth from the cold. Operated by Huron County Staff in the Lakeshore United Church in Goderich.

### [Huron Safe Homes for Youth](#)

Provides voluntary, confidential services for youth (16 years of age to their 18th birthday) and their families in Huron County. Adolescence is a period of transition where youth and their families face many challenges. Unresolved difficulties may contribute to a breakdown of the family unit. The purpose of Safe Homes is to respond to a crisis or emergency situation involving adolescents and their families in an attempt to resolve difficulties, and where possible, restore the family unit.

### [Turning Point for Men, South Huron](#)

Operating a transitional program and homelessness shelter, Turning Point Inc. is a recovery home that provides a temporary home like residence for recovering alcohol and drug dependent people. Services such as individual and group counseling, basic life skills, social and recreational activities are available to our residents. It includes a holistic approach and time development of skills and values in areas such as emotional, spiritual, physical, and basic life skills necessary for coping with stresses of life.

### Walker Place, Exeter

28 bed (23 HSC (Homes for Special Care) and 5 private) adult assisted living facility for people with a mental health diagnosis. Services include housekeeping, assistance with daily living activities, cooking, laundry, and medical transportation.

### Huron Women's Shelter, Second Stage Housing & Counselling Services of Huron

Shelter services offer residential support to women at high risk because of gender based violence, as well as the 24-hour help line available to anyone in need. All intakes, risk assessment, safety planning, advocacy and transitional support will be offered via telephone, video conferencing or email. Counseling, groups, and children's programming are currently offered via telephone or video conferencing and are facilitated by staff working from home.

## Domestic and Family Violence

### Domestic Assault Response Team

The Domestic Assault Response Team (DART) is a cross-sector committee working together to improve community response to victims of domestic and sexual violence.

### Huron Youth Justice Committee

The Youth Justice Committee of Huron County oversees the development and implementation of alternatives to the court-based system to handle low risk offences committed by young persons. In recent years, the Committee's scope has been expanded to promote and address youth issues that are relevant to Huron County.

### Kids First Huron Perth

Huron Perth Public Health works with Kids First Huron Perth to provide resources to assist service providers with "No Wrong Door" early identification and intervention support for children ages 0 to 6.

### Ontario Provincial Police

Ontario Provincial Police (OPP) provides essential services that ensure the safety and security of the people of the Province of Ontario. The OPP is a division of the Ministry of the Solicitor General, the largest operational ministry in the province, with a presence in every community across Ontario.

- [Domestic Violence](#)
- [Huron Detachment](#)

### Rural Response for Healthy Children

Rural Response for Healthy Children is a non-profit charity that serves Huron County families. Our work contributes to fostering a healthy community of trusted adults where children and youth thrive. Our team offers education and support groups, activities and workshops for parents / caregivers who are experiencing life transitions (pregnancy, new parents, starting school), managing relationships between parent / child / school / community, and coping with vulnerable situations (addictions, disabilities, domestic violence, financial challenges, illness, single parenting). The team also educates children and youth with a focus on personal safety at home (in the community and online), disability awareness, and social and emotional learning, including self-regulation and social skills.

### Victim Services of Huron County

Victim Services of Huron County is dedicated to providing short term emotional support, practical assistance, and community referrals to victims of crime, trauma and tragic circumstance in partnership with community and emergency services.

### Victim/Witness Assistance Program: Ministry of the Attorney General, Goderich

Services begin once police have laid charges and continue until the court case is over. Services are available to victims and witnesses of intimate partner abuse/domestic violence, child physical and sexual abuse, sexual assault

(including historical sexual assault and human trafficking), families of homicide victims, families of motor vehicle fatalities, elderly victims, victims with disabilities, and victims of hate crime.

## Community Security

### 211

211 is Canada's primary source of information for government and community-based, non-clinical health and social services. The free and confidential service can be accessed 24 hours a day, in more than 150 languages, by phone, chat, text, and web. 211 helps connect people to the right information and services, making their pathway to care and resources a guided and trusted one. 211 is available by phone, chat, website, and text in different regions – dial 2-1-1 to connect to community services.

[Big Brothers Big Sisters of South Huron](#) Many children and youth in Canada struggle with societal barriers and face adversities in their lives like detrimental living conditions, family violence, risk factors for mental health, school issues and identity challenges. Each Big Brother Big Sister agency provides direct service to children by matching volunteers and youths in quality mentoring relationships. Our agency staff members are experts at screening volunteers and matching them with a mentee having similar interests. The national organization provides services and programs to our member agencies to assist them with their work with parents, mentees, and volunteers.

### Community Living – Central Huron

Our role as an association is to enhance the dignity and value of all people. It is to assist people to regain power and control over their own lives. It is to listen and respond. When we embrace the richness of diversity, recognize the gifts we each possess and respect each others' contributions, we will, indeed, have a competent, caring community that includes all its citizens. People live in dignity and share in all aspects of living in their community.

### Community Living – South Huron

We are a community organization dedicated to providing support to people with intellectual challenges through education, advocacy, and innovation.

### Community Living – Wingham and District

Committed to assist people with developmental needs to live, work, and participate fully in the community as valued partners. We support our members to create and achieve life plans in their own community and advocate for inclusion of persons with intellectual disabilities in recreation, social, religious, educational, economic, employment, and health services.

### Community Futures Huron

Community Futures Huron has been helping entrepreneurs make their futures in Huron County since 1993. This goal is achieved by providing management counselling, business loans, and support for community projects that strengthen the local economy. Every year, we at CFH help new businesses get off the ground. Key emerging business opportunities include agriculture, renewable energy, manufacturing, tourism, retail services, and the creative economy.

### Huron Community Family Health Teams

- [Bluewater Area Family Health Team](#)  
6 Goshen St. South, Zurich, ON N0M 2T0
- [Clinton Family Health Team](#)  
105 Shipley St., Clinton, ON N0M 1L0
- [Huron County Community Health Team](#) - 32B  
Centennial Drive, Seaforth, ON N0K 1W0
- [Grand Bend Area Community Health Centre](#)  
69 Main Street East, Grand Bend,  
ON N0M 1T0
- [Maitland Valley Family Health Team](#)  
180 Cambria Road North Goderich,  
ON N7A 4N8
- [North Huron Family Health Team](#)  
271 Frances Street, Wingham, ON N0G 2W0

### [Family Services Perth-Huron](#)

Family Services Perth-Huron is dedicated to supporting, strengthening, and enriching the lives of individuals, couples and families through individualized counselling, support services, advocacy and education to meet the needs of the community. We work closely with other services within the community on your behalf to create a plan best suited to your situation. We can also, with your consent, provide information and referrals to other local community services.

### [Gateway Centre of Excellence in Rural Health](#)

Gateway Centre of Excellence in Rural Health is a not-for-profit corporation located in Goderich, Ontario, that aims to improve the health and quality of life of rural residents. Since its inception, Gateway has been governed by community-based volunteers who aim to advance rural health teaching and community-based research across four rural counties. Current research that is underway at Gateway center around four main research areas: healthy aging, mental health, addictions, healthy communities, and lung health.

### [Huron Hospice](#)

Huron Hospice has provided compassionate care, emotional support, and practical assistance to individuals and families who are facing a life-limiting illness, extending through to the bereavement process. Care can be provided in a home, a hospital, a long-term care setting, or our hospice residence. Support is also provided to caregivers and families who are grieving the loss of their loved one.

### [Huron County Food Distribution Centre](#)

The Distribution Centre's purpose is to support the existing food banks. We channel large food donations in a free-flowing fashion to the local community food banks. The Distribution Centre helps with the extras such as fresh produce, dairy, and meat as well as dry goods. The local food banks continue to count on individual donations for their basic needs.

### **Huron Food Banks**

- [Bayfield Area Food Bank](#)  
Trinity St James Anglican Church,  
10 Keith Cres., Bayfield, ON N0M 1G0
- [Blessings Community Store - Food Bank](#)  
45 Main St. W, Zurich, ON N0M 2T0
- [Exeter Community Food Bank](#)  
249 Andrew St., Box 93, Exeter,  
ON N0M 1S6
- [Friends of the Community Food Bank and Resource Centre](#), 9 Rattenbury St. E block 1565, Clinton, ON N0M 1L0
- [North Huron Community Food Share](#)  
405 Josephine St., Wingham, ON N0G 2W0
- [Ontario Student Nutrition Program](#) - Southwest Region - Huron Perth  
36165 Huron Rd., RR 2, Goderich,  
ON N7A 3X8
- [Salvation Army - Clinton](#)  
32 Albert St., Clinton, ON N7A 4C6
- [Salvation Army - Goderich](#)  
309 Suncoast Dr. E, PO Box 397, Goderich,  
ON N7A 4C6
- [Salvation Army - Wingham](#)  
205 Josephine St., Wingham, ON N0G 2W0
- [Seaforth and District Food Bank](#)  
72 Main St. (entrance at back of building),  
Seaforth, ON N0K 1W0
- [Society of Saint Vincent de Paul](#)  
441 MacEwan St., Box 382, Goderich,  
ON N7A 4C6
- [Vanastra Community Christian Reformed Church - Food Bank Truck](#)  
50 Fifth Ave., Vanastra, ON N0M 1L0

### [Huron Perth Children's Aid Society](#)

Huron Perth Children's Aid Society advocates for and protects children's rights, supports, and strengthens families; and is a leader for change in our community. The Society serves approximately 375 families each month and conducts more than 1600 abuse investigations each year. It also helps more than 130 children who are in the Society's care.

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### [Huron Perth Community Legal Clinic](#)

The Huron Perth Community Legal clinic staff have been committed to providing free legal services to residents. We are funded by Legal Aid Ontario. We give people living on a low-income free legal services for certain problems. The Clinic is a non-profit corporation staffed by lawyers, community legal workers, and administrative staff, and directed by a volunteer Board of Directors drawn from the community.

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### [Huron Perth Public Health](#)

Huron Perth Public Health (HPPH) works with our community to promote and protect health and prevent illness, based on community need, evidence and law. We are dedicated to delivering public health programs, classes and services in our community that are accessible for everyone. Our public health nurses, health inspectors, health promoters, dietitians, epidemiologists, and many other professionals promote and protect the health of our community. We are governed by the Board of Health and mandated by the Health Protection and Promotion Act.

- [Lived Experience Expert Panel](#)

The Lived Experience Expert Panel (LEEP) is a volunteer panel for Huron and Perth residents who have current or past involvement with systems such as: the welfare system, court system (family, civil, criminal, youth), child welfare, healthcare (mental health, addictions, disability), immigration, the Indian Act, and other systems that can regulate someone's life to a great degree.

### [Huron Perth Situation Table](#)

The Huron Perth Situation Table is a proactive tool used to mitigate risks of individuals and families through the collaboration of multiple agencies. The table is hosted by the Ontario Provincial Police and Stratford Police. Membership of the Table consists of representatives from a variety of health, mental health, and social service and justice agencies that work together to create a rapid response that prevents the occurrence of crisis and promotes stability for vulnerable individuals and families. The Table is used when all other resources have been exhausted and still nothing is working to reduce the risks for the individual or family. Two working groups have been established – Homelessness and Wraparound Services and Supports – comprised of multisector service providers and community members.

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### [Info Huron Perth](#)

This website contains listings for all the community, social, and government services available to residents of Huron and Perth Counties.

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### [Jessica's House](#)

Jessica's House is a Residential Hospice in Exeter, Ontario. We provide end-of-life care for residents living with a life limiting disease.

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### [John Howard Society of London & District](#)

The John Howard Society of London and District is an organization of citizens who accept responsibility for understanding and dealing with the problems of crime and the criminal justice system. The John Howard Society is a not-for-profit, charitable organization providing a broad range of evidence-based and outcome-driven community services in London and District. Our organization has a strong history of helping individuals and families who are at risk of, or who have come into conflict with the law.

### [MADD Canada - Huron-Bruce County Chapter](#)

National network of concerned citizens committed to stopping the crime of impaired driving and supporting victims by providing victim assistance programs, lobbying government, and operating school outreach and public awareness campaigns.

### [ONE CARE Home & Community Support Services](#)

ONE CARE Home & Community Support Services provides a range of supportive care services that enable seniors and people with disabilities to enjoy better quality of life as they age at home. ONE CARE is a community based, charitable, not-for-profit health organisation providing supportive care to families in Huron and Perth Counties and surrounding area. We are respected and known for friendly, quality, and accessible community services that support people in their home and enable them to benefit from a wide range of health services.

### [Poverty to Prosperity](#)

Poverty to Prosperity is a collaborative and action-based group that brings people together from across sectors to improve the lives of individuals living in poverty. The group undertakes participatory research, advocacy, education and awareness activities and community development projects.

### [Project Lifesaver Huron](#)

Project Lifesaver Huron provides equipment for individuals who may wander and become lost. Individuals living with Alzheimer's, Dementia, Autism, Acquired Brain Injury, Downs syndrome or other cognitive disorders. These individuals wear a lightweight transmitter which emits a radio signal that can be located up to 2 km away by specially trained OPP officers using mobile locating equipment. This transmitter can be worn while swimming, bathing or showering. This program is offered in co-operation with the Huron Detachment of the OPP. Monthly payment plans are available and the cost may be waived.

### [Social Research and Planning Council](#)

Social Research and Planning Council (SRPC) is operated by United Way Perth-Huron and is comprised of community representatives who are dedicated to the collection, analysis, and distribution of information relating to social trends and issues in Perth and Huron County. This research enables the United Way to discover and understand the root causes of issues affecting Perth-Huron and in turn helps to mobilize the community. SRPC, United Way, and Computer Systems Group at the University of Waterloo also partner to operate myPerthHuron, an online resource to help track the wellbeing of our communities.

- [myPerthHuron](#) is an online resource to help track the wellbeing of our communities, where we are doing well, and where our communities may be facing challenges. The website provides information on eight domains borrowed from the Canadian Index of Wellbeing that address economic, environmental, social, and cultural issues.

### [South Huron Hospital Association](#)

19-bed hospital with 24-hour emergency department. Inpatient services include medicine, acute care, palliative care, complex continuing care, and rehabilitation. Outpatient rehabilitation services include physiotherapy, social work, speech-language pathology, and diabetes education.

### [South Huron Medical Centre](#)

### [South West Local Health Integration Network Home and Community Care Services](#)

The South West Local Health Integration Network helps people get the care and support they need in their homes and communities. The South West LHIN is a crown agency which plans, funds, and delivers healthcare from Lake Erie to the Bruce Peninsula. South West LHIN Home and Community Care provides healthcare services at home and in the community and can assist

those considering supported living programs or long-term care options or requiring home and community care services.

### [United Way Perth Huron](#)

Our vision is a better life for everyone. An altruistic and philanthropic attitude helps achieve that vision. Helping others is at the heart of the United Way. Many individuals face challenges and barriers beyond their control. United Way asks those who can donate and help ensure programs are available for those that need them. Moreover, economic stability and growth are closely linked to community well-being. Investing in United Way helps build the social structure for a healthy community. Everyone benefits when people have the support they need.

- [Individual Urgent Needs Fund](#) is available to individuals and families who need help. Whether it is paying rent arrears to prevent homelessness, buying groceries to feed a family, or enabling repairs on a car so that someone can get to work, the Urgent Needs Fund is available to give our community members a hand up. Strengthening the resilience of our most vulnerable will help to make sure everyone in our community can enjoy health, safety, and a high sense of well-being.



# Appendix E: Equity and Inclusion Lens

## Apply to Your Work



After asking yourself three questions about inclusion,

**Who is not included in the work you do?**

**What could contribute to this exclusion?**

**What can you do differently to ensure inclusion?**

start to apply these answers to your work.

- **Communications** (pp. 24)
- **Engaging Community and Staff** (pp. 26)
- **Gathering Information / Research** (pp. 28)
- **Leading and Supervising** (pp. 30)
- **Monitoring and Evaluation** (pp. 32)
- **Planning: Services, Projects, Events** (pp. 34)
- **Policy Development** (pp. 36)
- **Recruiting and Hiring** (pp. 38)
- **Strategic Planning** (pp. 40)
- **Training** (pp. 42)
- **Working with People** (pp. 44)

When diversity, equity and inclusion is reflected throughout the organization, we benefit from a diversity of insights and are better prepared to address the needs of the populations we serve. From strategic planning to managing human resources to direct service, equity and inclusion matters.

**Select the area or areas of work that best relate to the work you are doing now. This includes both internal and external work.**

*one*

Read through the questions to consider which ones can inform your work.

*two*

Consult the Promising Practices provided to learn from the experience of others.

*three*

Consider what you are already doing and what you can do differently to ensure inclusion. Note your ideas on the [worksheet](#) pp.23.

# RECRUITING AND HIRING

## Staff and Volunteers



When we integrate equity and inclusion in our hiring practices and policies, we take action to increase diverse skills and perspectives in the workplace.

1. Do staff and volunteers in our work area reflect the diversity of the community we serve? Who is under-represented?
2. What knowledge, skills, experience and diversity would enhance our team's capacity to serve the diversity of clients?
3. Do job requirements and selection criteria unnecessarily limit who would qualify?
4. Are we open to considering what new perspectives people from different backgrounds could bring to the position?
5. Have we considered where best to post this employment opportunity to ensure that the widest diversity of people are able to access it? Do we encourage agencies and community partners to access the City's career site so that we can broaden the applicant pool from the diversity groups?
6. Are interview panels composed of individuals who bring diverse backgrounds and experiences relevant to the position?
7. Have we considered ways to reduce barriers in the interview process so as to make it more welcoming and friendly (i.e. physically accessible, provide a copy of the questions)?
8. Are candidates given the choice to be interviewed in French or English?
9. Do we consider that people from specific backgrounds may present interview behaviours that are different from what we expect, but still have the skills to do the job?
10. If a candidate's references are from abroad, what strategies can we use? (e.g., if an English speaking reference is not available then seek translation support)

### *ASK ABOUT INCLUSION*

Who is not included in the work you do?

What could contribute to this exclusion?

What can you do differently to ensure inclusion?

## Promising Practice

### Recruiting and Hiring

#### SUMMER STUDENT EMPLOYMENT

The City of Ottawa's Summer Student Employment Program makes possible a large number of external hires each year. The Recruitment and Staffing Unit, that coordinates the program, is mindful of the City's goal of building a diverse and talented workforce reflective of the population when planning recruitment. Since applicants may also progress to future employment with the City, it is important to attract a diverse candidate pool, with a special focus on groups that are under-represented.

With awareness of the guiding principles in the Equity and Inclusion Lens, possible barriers to diversity in recruiting were identified, including awareness of the opportunity, knowledge of the application process, and access to a personal computer.

To address these potential barriers the following steps were taken:

- Extended posting period to provide more time to promote the program and accept applications
- Distributed bilingual posters to organizations serving youth
- Shared information about the program with community organizations via groups such as the Aboriginal Working Committee and the Employment Access Resource Network (EARN)
- Promoted the program at career events such as fairs, networking and information sessions at local post-secondary schools.
- Held information sessions for students in English and French.
- Provided information about publicly available computers

These targeted outreach practices increased general awareness of the City's employment opportunities for those who are traditionally under-represented in the workforce, removing potential obstacles to broader participation.

#### *WHAT ABOUT THIS IS AN EQUITY AND INCLUSION PRACTICE?*

- ✓ Took note of who is under-represented
- ✓ Identified potential barriers
- ✓ Reached out to community organizations to promote
- ✓ Went to where the target group would be
- ✓ Provided information to overcome barriers

# Appendix F: Sample Indicators

## Adapted from Peel's Community Safety and Well-Being Plan Health

Reflects mental and physical well-being, health behaviours and access to healthcare services in the community.

| Sub-Domain  | Indicator Title  | Indicator(s)   | Data Sources                               |
|---|--|--|--|
| General health  | Life expectancy  | Life expectancy at birth   | Ontario Mortality Database                 |
|   | Premature death  | Rate (per 100,000) of potential years of life lost*  | Ontario Mortality Database                 |
|   | Self-rated health  | Proportion (%) of Huron population who rated their physical health as "excellent", "very good" or "good"                                       | Canadian Community Health Survey           |
| Mental health & well-being  | Self-rated mental health   | % of Huron population who rated their mental health as "excellent", "very good" or "good"  | Canadian Community Health Survey           |
|   | Emergency department (ED) visits for mental health disorders         | Rate of ED visits for mental health disorders (includes substance-related disorders, anxiety and mood disorders, personality disorders, etc.)* | National Ambulatory Care Reporting System  |
|   | Ever considered or attempted suicide                                 | % of Huron population who had considered suicide before  | Canadian Community Health Survey           |
| % of Huron population who had ever considered suicide who had attempted suicide |  |  |  |
| Access to mental health and addiction services                                  | Not receiving care prior to mental health/addiction-related ED visit | % of Huron adults who did not receive care from a physician prior to a mental health/addiction-related ED visit                                | ICES                                       |
|   | Wait time for a mental health/addiction specialist                   | Median wait time for patients referred to a mental health/addiction specialist   | ICES                                       |
| Access to health services   | Access to a regular healthcare provider                              | % of Huron population who reported having access to a regular healthcare provider  | Canadian Community Health Survey           |
|   | Unmet healthcare needs   | % of Huron population who felt that they needed healthcare but did not receive it in the prior 12 months                                       | Canadian Community Health Survey           |
| Health Behaviours   | Physical activity  | % of Huron adults who were physically active based on Canadian Physical Activity Guidelines  | Canadian Community Health Survey           |
|   | Sedentary behaviour  | % of Huron population who spent on average 15 hours or more per week engaging in sedentary activities over the prior three months              | Canadian Community Health Survey           |
|   | Harmful alcohol use  | % of Huron adults who exceeded Canada's Low-Risk Alcohol Drinking Guidelines   | Canadian Community Health Survey           |
|   | Problem drug use among secondary students                            | % of Huron secondary students classified as having a potential drug use problem  | Ontario Student Drug Use and Health Survey |
|   | Up-to-date childhood immunization                                    | % of children in Huron with up-to-date immunization coverage, by immunization type (e.g., Measles, Mumps, Rubella, etc.)                       | Public Health Ontario                      |

\*Rates to be calculated using population estimates/projections

## Safety

Reflects the right for community members to live without fear or risk of physical, psychological, or social harm.

| Sub-Domain            | Indicator Title  | Indicator(s)  | Data Sources                               |
|-----------------------|--|---|--|
| Crime                 | Crime Severity Index                                       | Crime Severity Index (OPP)  | Uniform Crime Reporting Survey             |
|                       | Total crime  | Rate reported actual incidents of total crime in Huron*   |  |
|                       | Total violent crime  | Rate reported actual incidents of total violent crime in Huron*   |  |
| Perceptions of safety | Sense of safety  | % of Huron respondents who reported a “very strong” or “somewhat strong” sense of safety in their local community   | Focus GTA Survey, Environics               |
|                       | Change in violence or public safety risks in neighbourhood | % of Huron respondents who believed that violence/ public safety risk across Huron has increased in the prior 6 month   |  |
|                       | Students feeling safe at school                            | % of Huron students in grades 7 to 12 who reported feeling safe at school   | Ontario Student Drug Use and Health Survey |
| Road safety           | Collisions resulting in injury/fatality                    | Rate of annual collisions resulting in injury/fatality on regional and municipal roads in Huron*  | Ontario Provincial Police (OPP)            |
| Discrimination        | Experiences of discrimination                              | % of Huron population who reported experiencing discrimination in the past 5 years, by type of discrimination (e.g., based on sex, ethnicity/ culture, race, age, religion, sexual orientation, etc.) | Community Life dataset, Environics         |
|                       |  | % of Huron population who reported experiencing discrimination in the past 5 years, by type of situation (e.g., in bank/store/restaurant, work environment, dealing with police, etc.)                |  |

\*Rates to be calculated using population estimates/projections

## Education

Reflects learning through formal schooling or training that allows individuals to develop and grow.

| Sub-Domain                                  | Indicator Title                                | Indicator(s)   | Data Sources                          |
|---|--|--|---------------------------------------|
| Educational achievement – Elementary school | Readiness to learn                             | % of senior kindergarten children who were considered “vulnerable” in at least one of the five Early Development Instrument domains                            | Early Development Instrument          |
| Educational achievement – Secondary school  | Youth not in education, training or employment | % of youth not in education, training or employment  | Census                                |
|   | High school graduation rate                    | % of students from a grade 9 cohort who graduated in 4 or 5 years  | Public/Catholic District School Board |
| Educational attainment                      | Highest level of education                     | % of population (aged 25-64 years), by educational attainment (e.g., less than high school, high school certificate, apprenticeship/ trades certificate, etc.) | Census                                |

## Community Life

Reflects individuals feeling included and connected and being engaged within their community.

| Sub-Domain           | Indicator Title                       | Indicator(s)   | Data Sources                                  |
|----------------------|---------------------------------------|--|---|
| Community Belonging  | Sense of community belonging          | % of Huron population who reported a “very strong” or “somewhat strong” sense of community belonging                                   | Canadian Community Health Survey              |
| Community Engagement | Voting in municipal election          | % of registered electors who voted in most recent municipal election   | Association of Municipalities Ontario         |
|                      | Volunteerism                          | % of respondents who reported doing volunteer work in the previous year  | Community Life dataset, Environics            |
|                      | Donation                              | % of Huron tax-filers who are charitable donors<br>Income Statistics Division, Statistics Canada Proximity to community meeting places | Income Statistics Division, Statistics Canada |
|                      | Proximity to community meeting places | % of Huron population within a 10 minute (800 metre) walk of libraries, community/recreation centres and places of worship             | Municipalities of Huron; Census               |
|                      | Municipal recreation program usage    | % of Huron population registered or a member of one or more recreation programs in their municipality in the previous year             | Municipalities of Huron                       |

## Living Standards

Reflects the ability of a community to support the basic needs of community members.

| Sub-Domain                      | Indicator Title                                   | Indicator(s)  | Data Sources                     |
|---------------------------------|---|---|----------------------------------|
| Income                          | Low income measure - after tax (LIM-AT)           | % of Huron population in private households living in low-income based on the LIM-AT  | Census                           |
|                                 | Private household median income                   | Private household median income   |                                  |
| Employment                      | Unemployment rate                                 | % of Huron population (aged ≥15 years) who are unemployed   | Labour Force Survey              |
|                                 | Temporary employment                              | % of Huron population (aged ≥15 years) who are temporary employees (e.g., seasonal jobs, term or contract jobs, casual jobs, other temporary employees) |                                  |
| Housing & homelessness          | Persons visiting shelters or transitional housing | Number of persons that visited emergency shelters   | Housing Services                 |
|                                 | Unaffordable housing                              | % of tenant and owner households in Huron spending 30% or more of total household income on shelter costs   | Census                           |
|                                 | Occupied dwellings requiring major repair         | % of occupied private dwellings requiring major repair  |                                  |
|                                 | Inadequate housing (suitability)                  | % dwellings in Huron considered “not suitable” (i.e., based on required number of bedrooms)   |                                  |
| Food security                   | Household food insecurity                         | % of Huron households with moderate or severe food insecurity in the prior 12 months  | Canadian Community Health Survey |
| Access to internet & technology | No access to internet at home                     | % of Huron population who reported not having access to internet at home  | Environics                       |

## Personal Relationships

Reflects the presence of strong, consistent and supportive relationships with family and peers.

| Sub-Domain                       | Indicator Title  | Indicator(s)   | Data Sources                               |
|----------------------------------|--|--|--|
| Supportive relationships         | Perceived social support                                   | % of Huron population who reported a high level of perceived social support  | Canadian Community Health Survey           |
|                                  | Not having close relatives or friends                      | % of Huron population who reported not having a relative that they feel close to   | Community Life dataset, Environics         |
|                                  |  | % of Huron population who reported not having any close friends  |  |
|                                  | Students who talk to their parents about problems/feelings | % of Huron students in grades 7 to 12 who reported talking to their parent(s) about their feelings or problems               | Ontario Student Drug Use and Health Survey |
| Harmful or violent relationships | Police-reported family disputes                            | Rate of reported family disputes (OPP)*  | OPP  |
|                                  | Police-reported intimate partner disputes                  | Rate of reported intimate partner disputes (OPP)*  |  |
|                                  | Students victim to bullying at school                      | % of Huron students in grades 7 to 12 who reported being a victim of bullying at school at least once during the school year | Ontario Student Drug Use and Health Survey |
|                                  | Students victim to cyber bullying                          | % of Huron students in grades 7 to 12 who reported experiencing cyber bullying in the previous 12 months                     |  |

\*Rates to be calculated using population estimates/projections

## Environment

Reflects the conditions in which we live that impact community well-being.

| Sub-Domain        | Indicator Title   | Indicator(s)  | Data Sources   |
|-------------------|---|---|--|
| Air quality       | Level of air pollutants   | Mean annual level of air pollutants (i.e., nitrogen dioxide, ozone, fine particulate matter)                              | Ministry of Environment and Climate Change   |
|                   | Exposure to secondhand smoke                                    | % of non-smoking Huron population who reported being exposed to second-hand smoke inside their home daily or almost daily | Canadian Community Health Survey   |
| Built environment | Parks, open green space or natural features per 1,000 residents | Hectares (per 1,000 residents) of park, open green space or natural feature with a trail or path running through it       | Municipalities; Conservation; Census   |
|                   | Active recreation per 1,000 residents                           | Active recreation amenities per 1,000 residents   | Active Recreation Amenities, Municipalities in Huron; Census   |
|                   | Street connectivity   | Average intersection density  | Municipal, Planning, Economic Development  |
|                   | Proximity to transit  | % of Huron population with access to cars, duration of commute to work  | General Transit Feed Specification, Municipal Employment Surveys, Four County Labour Market Board; Pedestrian Network, Municipalities of Huron |
| Food security     | Household food insecurity                                       | % of Huron households with moderate or severe food insecurity in the prior 12 months                                      | Canadian Community Health Survey   |

# Appendix G: Evaluation Matrix Template

**Priority Area: Which of the four priority areas does this intervention fall within?**

## Intervention

What Ontario CSWB Framework area does this intervention fall within? (social development, prevention, risk intervention, or incident response)

## Goal

What is the goal of this intervention? What does the intervention set out to do or accomplish?

## Strategy

What will be done to accomplish this goal?

## Indicator(s)

How will you know whether the strategy is working or achieving what is desired? Indicators can be process oriented (did we do what we said we would?) or outcome oriented (by doing this, did we have a measurable impact in the community?). Process indicators are more effective measures of success during early stages of implementation or for more short-term initiatives, whereas outcome indicators are important for measuring long-term success.

## Data Source(s)

Where will you get the data you need to measure the success of the strategy and whether the goal has been accomplished?

Does data exist? What data gaps may prevent or hinder measurement?

## Key Themes Addressed

What key themes identified in this Plan through community outreach area addressed or engaged with through this goal and strategy?

## Key Questions:

- Is the goal of the intervention clear?
- Does the strategy clearly connect to the goal? Is there a clear action identified? Does the strategy have a temporal dimension? (i.e., should be complete within 6 months).
- Who should be involved with this strategy? (i.e., partner mapping).
- What resources are needed for strategy success? What gaps might exist? (i.e., knowledge, funding).
- What data do we need to make informed decisions or to track long-term outcomes?
- What happens after the strategy or action has been accomplished / implemented? (i.e., wind down).

## Endnotes

- 1 Flach SD, McCoy KD, Vaughn TE et al. 2004. Does patient centered care improve provision of preventive services? *Journal of General Internal Medicine* 19(10):1019-1026. doi: 10.1111/j.1525-1497.2004.30395.x.
- 2 Statistics Canada. [Selected police-reported crime and calls for service during the COVID-19 pandemic, March – August 2020.](#)
- 3 [Huron County Economic Development](#)
- 4 Statistics Canada. [Census Profile 2016.](#)
- 5 Ontario Ministry of Finance. 2019-2046. [Ontario Population Projections. 2019.](#)
- 6 [Statistics Canada Census Data](#)
- 7 [Canadian Rental Housing Index 2021.](#)
- 8 [Canadian Rental Housing Index 2021.](#)
- 9 Statistics Canada, Taxfiler – Custom Tabulation
- 10 [Statistics Canada, Labour Force Survey](#)
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