

The Corporation of the Township of Faraday

Bylaw 10-2022

A Bylaw to Adopt a Community Safety Well-being Plan for the Corporation of Township of Faraday in Collaboration with the Participating Lower-Tier Municipalities of North Hastings

Whereas the *Municipal Act*, 2001, Chapter 25, as amended, Section 5 (3), states that municipal power, including a municipality's capacity, rights, powers and privileges, shall be exercised by bylaw unless the municipality is specifically authorized to do otherwise; and

Whereas Section 8 of the *Municipal Act*, 2001, Chapter 25, as amended, provides that a municipality has the authority to govern its affairs as it considers appropriate and enables the municipality to respond to municipal issues; and

Whereas Section 9 of the *Municipal Act*, 2001, Chapter 25, as amended, provides that a municipality has the capacity, rights, powers and privileges of a natural person for the purpose of exercising its authority under this or any other Act; and
Whereas Section 143 (1) and (2) of the *Police Service Act*, R.S.O. 1990, C. 3, Schedule 1, as amended, requires all applicable municipalities to prepare and adopt a community safety and well-being plan, that may be prepared individually or jointly in consultation with other municipal councils; and

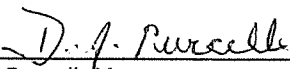
Whereas the Council of the Corporation of the Township of Faraday is desirous of adopting a Community Safety and Well-being Plan with the participating lower-tier Municipalities located in North Hastings and approved a draft of the plan in principle on June 16, 2021.

Now Therefore Be It Resolved that the Council of the Corporation of the Township of Faraday Hereby Enacts as Follows:

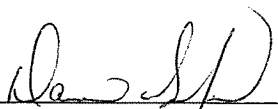
1. That the Community Safety and Well-being Plan, attached hereto and forming part of this bylaw, is hereby adopted by the Council of the Corporation of the Township of Faraday; and

READ a first and second time this 6th day of April 2022

READ a third time and finally passed on this 6th day of April 2022.



D.J. Purcell, Mayor



Dawn Switzer, Clerk

North Hastings Community Safety and Well-being Plan



2021

MESSAGE FROM THE CO-CHAIRS

“Alone, we can do so little; together, we can do so much” – Helen Keller

Community Safety and Well-being Planning is the community-led response to addressing the issues that prevent all of our residents from thriving. It is a commitment to addressing the root causes of crime, homelessness, addiction, and poverty. It is a recognition that we do not have to wait for crisis situations to occur that require emergency responses – we can take more proactive and measured steps to reduce the likelihood of crisis situations from occurring at all. This plan is unique to North Hastings and reflects the lived experiences and socio-economic realities of our region.

Bill 175, *the Safer Ontario Act* (2018) mandated a collaborative approach to community safety and well-being in which municipalities have a larger role in defining and addressing local needs. The idea is that by focusing on local needs and proactively addressing community safety concerns, vulnerable populations can receive the help they need, when and where they need it most - by the providers best suited to help them. To achieve this, Bill 175 required every municipal council to prepare and adopt by resolution a community safety and well-being (CSWB) plan.

In July 2018, the councils of all seven North Hastings municipalities unanimously passed resolutions that, while unique in language, declared safety and well-being a priority, enrolled the municipalities in a collaborative initiative to develop a regional plan, and directed their senior administrators to work together to do so. The Clerks and CAOs formed a North Hastings CSWB Planning Coordinating Committee to guide and direct the key tasks required to create the plan before us today.

The development of this plan took a significant effort by municipal elected officials, staff, and community members. Its implementation will also take time and commitment. It takes time to develop relationships, make the necessary changes, and transform our way of thinking. This is not a plan that should be adopted and gather dust. It should be as entrenched in municipal operations and community conversations as a strategic plan or a comprehensive zoning by-law. Its impact will be directly related to the level of municipal commitment and community engagement. The strategies detailed in the plan involve a wide range of partners and encourage community groups to take the lead on activities. We will need to collaborate, use our existing resources and develop strong relationships to get things started and keep the momentum going. This plan outlines how to do that, and together, we can get it done.

Chantelle Beaumier and Nancy Carrol

Co-Chairs, North Hastings Community Safety and Well-being Coordinating Committee

Table of Contents

1	Message from Co-Chairs	38	Housing
3	List of Abbreviations	46	Moving Forward
4	Executive Summary	48	Appendices
5	Acknowledgements	49	Potential Action Team
6	Introduction	50	Demographics
9	Community Safety and Well-being	56	Adult Survey
12	CSWB in North Hastings	59	Youth Survey
19	Timeline	61	Advisor Survey
20	Identifying Priorities		
22	Poverty		
30	Mental Health and Addiction		



List of Abbreviations

CAMH: Centre for Addiction and Mental Health

CSWB: Community Safety and Well-being

NH: North Hastings

NHCT: North Hastings Community Trust

NHCSWB: North Hastings Community Safety and Well-being

HPE: Hastings and Prince Edward

MHA: Mental Health and Addictions

OHRC: Ontario Human Rights Commission

SUD: Substance Use Disorder

WHO: World Health Organization



Executive Summary

In 2018, the municipal governments of Bancroft, Carlow/Mayo, Faraday, Hastings Highlands, Limerick, Tudor and Cashel, and Wollaston declared community safety and well-being (CSWB) a priority and agreed to work collaboratively on a regional plan.

Bill 175, the *Safer Ontario Act* (2018) mandated every municipality in Ontario to create, and implement a CSWB plan. Our plan is a collaborative commitment to address priority risk factors and improve the safety and well-being of all.

Representatives from 30 organizations from across North Hastings shared data, insights, and anecdotes. Two hundred and ninety adults completed the North Hastings Community Safety and Well-being (NHCSWB) Survey. Twenty-three youth responded to the NHCSWB under 16 survey. Thirty-two youth also participated in CSWB focus groups. In addition, town halls were held across the region, and dozens of interviews were held with residents and experts.

Based on local data, and community consultation three priority areas were identified in North Hastings; poverty, mental health and addictions, and housing. Priorities were selected based upon their frequency of mention in community and advisor consultations, local data, rate of occurrence, their level of community impact, and building upon current successes.

Acknowledgements

Effective community safety and well-being planning is a collaborative process. This plan has been made possible through local government leadership and significant contributions from area residents, advisors, and organizations. We would like to acknowledge and thank:

The Municipal Councils of Carlow/Mayo, Faraday, Hastings Highlands, Limerick, Tudor and Cashel, Wollaston and Bancroft for making CSWB a priority, and working collaboratively to build a safer and healthier community.

The County of Hastings for supporting the collaborative initiative, and acknowledging the importance of planning for a sustainable future.

The Coordinating Committee for their diligent work in guiding and directing the planning process.

The members of the Advisory Board, and their organizations for providing valuable data and information, facilitating community engagement and supporting planning.

Dr. Hugh Russell for his invaluable insights, and guidance throughout the planning process.

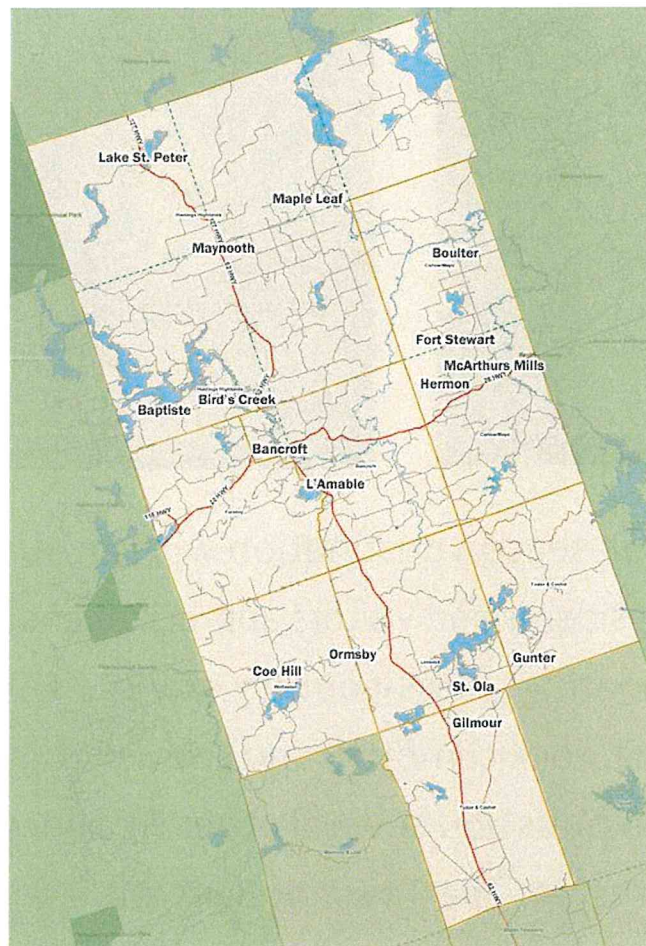
Lianne Sauter being a Co-Chair on the Coordinating Committee and for her guidance and expertise through the creation of the plan.

The many community members who shared their views and experiences on CSWB and supported the planning.



Introduction

North Hastings covers an area of 2,683 square kilometres and seven municipalities; Carlow/Mayo, Faraday, Hastings Highlands, Limerick, Tudor and Cashel, Wollaston and Bancroft. Situated in Hastings County in eastern Ontario, North Hastings is known for its plentiful lakes, rugged outcrops, vibrant art scene, and rural communities [1,2].



1. Hastings County. (2017). Destinations Guide Book North Hastings.
<https://bancroftdistrict.com/Destinations2017/#1>

2. Statistics Canada, (2016). Census Profiles.
<https://www12.statcan.gc.ca/census-recensement/2016/dp-pd/prof/index.cfm?Lang=E>

North Hastings has a regional population of 11,826 people, which expands to over 60,000 with seasonal residents. The average age in North Hastings is 49 years old. This is higher than the provincial average due to the lower distribution of youth and higher distribution of seniors in the region. 12.5% of the regional population self-identify as Aboriginal, and 2.1% self-identify as a visible minority [1].

In the NHCSWB Community Consultation Survey, respondents identified nature, people, and small-town/rural life as the most liked features of their community.



North Hastings is a four-season destination with an abundance of natural resources to explore. Residents and visitors appreciate endless outdoor activities, including boating, cross-country skiing, fishing, horse riding, golfing, hiking, hunting, rock climbing, and snowmobiling. There are three main population hubs and several other smaller villages spread across the expansive region. The Town of Bancroft is a unique commercial centre for all of North Hastings and provides substantial retail, employment, education and cultural opportunities. The regional art community offers theatre, live music, studio tours, galleries and classes.

1. Statistics Canada, (2016). Census Profiles.

<https://www12.statcan.gc.ca/census-recensement/2016/dp-pd/prof/index.cfm?Lang=E>

Table 1: North Hastings Demographic Information

Area	North Hastings covers an area of 2683 square kilometres [1].
Population	The population of North Hastings is 11,826 people. 12.5% self-identify Aboriginal, 2.1% self-identify as a visible minority, and 8.7% of the population have immigrant status [1].
Age	The average age in the North Hastings region is 49 years old. According to the 2016 census, 16.9% of the regional population were aged 0-19, 54.5% aged 20-64 and 28.9% 65 or older [1].
Education	The proportion of those living in North Hastings with less than high school education is 16.9%, which is higher than the rest of the province. The proportion of those living in North Hastings with high school education or equivalent is 25.4%, which is higher than that of Ontario. The proportion of those living in North Hastings with post-secondary education is 43.6%, which is lower than the rest of the province [1].
Employment	The rate of employment is lower in North Hastings than in the surrounding areas [1]. The majority of these opportunities are available in the Town of Bancroft [2]. Approximately 66% of workers must travel outside of their municipality to get to their place of employment [1]. The proportion of workers with part-time employment is 55.8%. The opposite is true for both Hastings and Ontario, where the proportion of workers with part-time employment is lower compared to full-time employment.
Income	Income levels vary by municipality. According to the 2016 census, 21.5% of North Hastings residents are low income [1].
Housing	There are 6030 housing structures in North Hastings. The proportion of households that own their housing, the average house price, and the proportion of core housing needs vary greatly depending on the municipality [3].

1. Statistics Canada, (2016). Census Profiles. <https://www12.statcan.gc.ca/census-recensement/2016/dp-pd/prof/index.cfm?Lang=E>

2. Analyst, Emsi. (2019) <https://login.economicmodeling.com/login/login.php>

3. Hastings County (2017). Housing Profiles. <https://www.hastingscounty.com/business/community-profile/housing>

Community Safety and Well-being

Bill 175, the *Safer Ontario Act* (2018) mandated every municipality in Ontario to create, and implement a Community Safety and Well-being plan. This approach recognizes the capacity for local communities to identify and address their unique needs. Municipalities may complete planning individually or jointly. Planning directs municipalities to explore their risk factors, identify priority concerns, work closely with groups most directly affected, adopt strategies to address areas of key risk, and measure outcomes.

"The ultimate goal of this type of planning is to achieve sustainable communities where everyone is safe, has a sense of belonging, opportunities to participate, and where individuals and families are able to meet their needs for education, health-care, food, housing, income, and social and cultural expression. The success of society is linked to the well-being of each and every individual" [1].



Benefits of Planning

Community Safety and Well-being planning provides a myriad of benefits to residents, local organizations, and the community as a whole [1]:

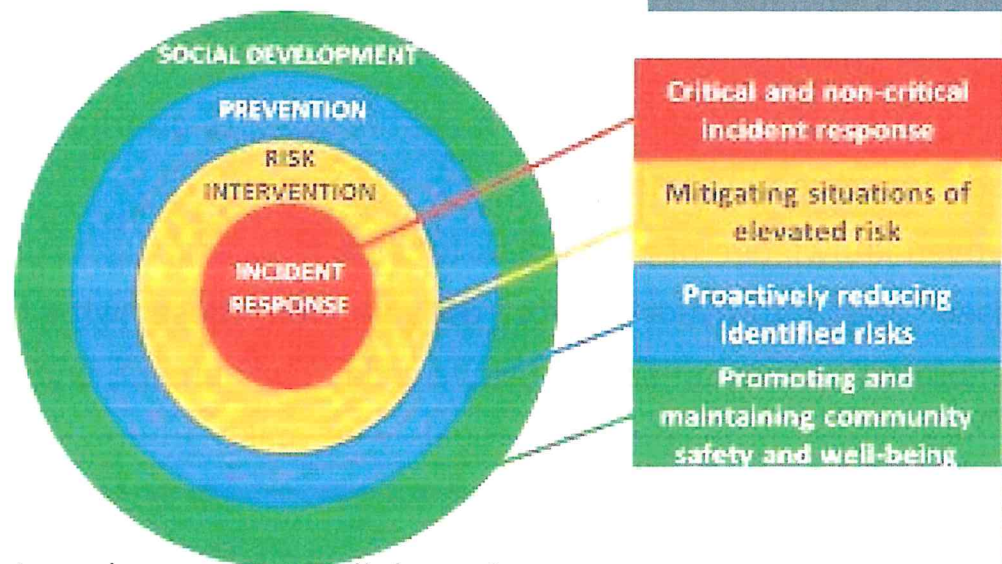
- Improved communication and collaboration between sectors and agencies;
- Data shared across sectors to improve the understanding of gaps, assets, risks and trends;
- Enhanced knowledge of priority risk and those most directly affected;
- Expanded community engagement;
- Reorientation of services to better meet the needs of priority risk factors and those most directly affected;
- Improved knowledge of and access to local services;
- Revised and improved service delivery for those with complex needs;
- Ameliorated opportunities for positive child development, and healthy families;
- The production of healthier individuals who make productive and positive contributions;
- Enhanced sense of safety and well-being within the community;
- Decreased dependence on incident response.



The Provincial Framework

CSWB in North Hastings was guided by the provincial framework which highlights four key areas of planning; social development, prevention, risk intervention, and incident response.

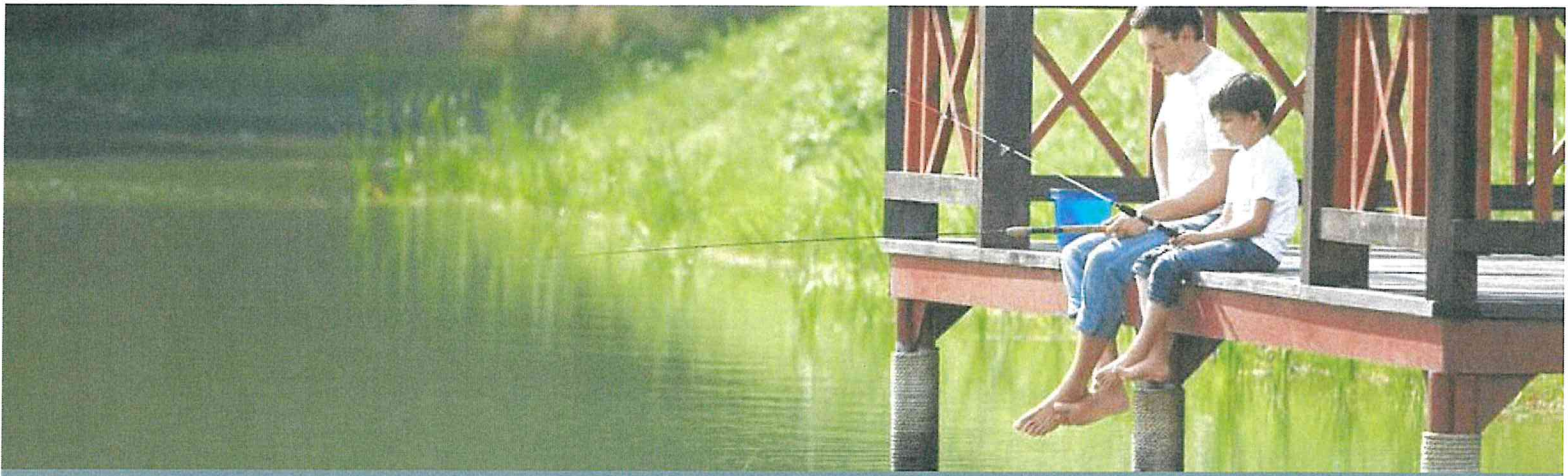
Figure 1: . Four Areas of CSWB Planning



Social Development is a long-term, collaborative approach that addresses the root causes of social issues, such as housing and education.

Prevention is focused upon implementing strategies that are proven to reduce identified risks to safety and well-being.

Risk Intervention involves identifying and responding to situations of acutely elevated risk. **Incident Response** is the reactionary response to an incident, including police, fire, and EMS [1].



CSWB Planning in North Hastings

In July 2018, the municipal Councils of Bancroft, Carlow/Mayo, Faraday, Hastings Highlands, Limerick, Tudor and Cashel, and Wollaston unanimously passed resolutions which:

- Declared that safety and well-being in North Hastings is a priority
- Enrolled the municipalities in a collaborative initiative to develop a regional community safety and well-being plan for all of North Hastings County and,
- Directed their respective municipal administrations, headed by Clerks or Chief Administrative Officers, to work together in developing the regional plan.
- Subsequently, the Town of Bancroft opted out of the Regional Plan to maintain their individual plan. They will serve on the Advisory Committee for the regional plan.

Purpose

The purpose of the North Hastings Community Safety and Well-being Plan is to detail a strategy to direct public policy, social programs and resources, and community awareness, interests and activities to where they can be most effective in increasing public safety, improving health and well-being, and reducing crime, disorder and social isolation in the area.

Core Principles

Our planning was guided by five core principles.

Collaboration: the need for local governments, organizations, and residents to work together.

Equity and Inclusion: A commitment to value, respect, and include all members of the community.

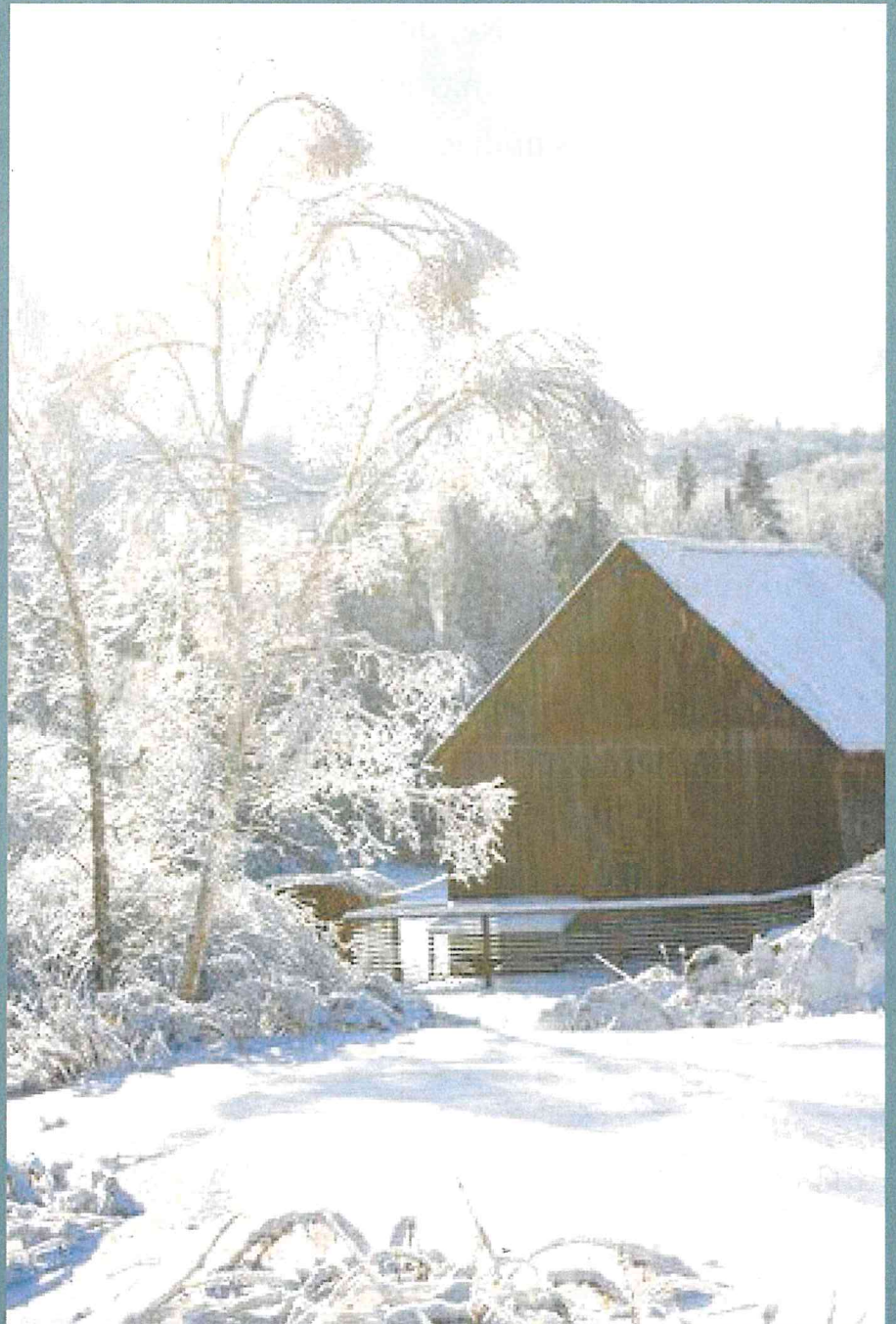
"Nothing About Us, Without Us": The importance of lived experience and hearing from those most directly affected.

Transparency: Open and transparent strategies, including ongoing communication and space for feedback.

Asset Based: Recognizing and building upon existing strengths within the community.

Coordinating Committee

The Clerks and Chief Administrative Officers from Carlow/Mayo, Faraday, Hastings Highlands, Limerick, Tudor and Cashel and Wollaston formed the North Hastings CSWB Coordinating Committee. The Coordinating Committee has guided and directed the key tasks required for the Regional Community Safety and Well-being Plan, including planning, recruiting, coordinating, and participating on an Advisory Committee.



Advisory Committee

The Advisory Committee is made up of local experts from local health services, community and social services, First Nations, education, police services, and member municipalities. The role of the Advisory Committee is to advise and inform the Coordinating Committee as they examine the region's principal risk factors, those most affected, and protective factors needed to reduce harms and enhance safety and well-being for all in North Hastings.

Advisors were selected and recruited based on the following characteristics:

- Knowledge and information about the risks and vulnerable populations in North Hastings;
- Lived experience with risk factors;
- Understanding of protective factors needed to address those risks;
- Experience developing effective partnerships in North Hastings;
- Experience with ensuring equity, inclusion and accessibility in community initiatives;
- A proven track record advocating for the interests of vulnerable groups; and,
- The power and authority needed to make decisions and represent the expertise of their respective agencies or organizations.



Community Consultation

Community consultation was a key consideration in planning as when done well, it generates:

- Valid information about priority risk and protective factors among the people of North Hastings;
- Broad public support for the whole planning process; and
- Expectations and commitments for the implementation of the plan emerge out of this process.



The NHCSWB consultation involved multiple strategies. The NHCSWB Advisors Survey was created to gauge local experts opinions on CSWB in the region. Data and information specialists from social agencies and organizations were asked to examine their own data, information and experiences with their own clients to provide a service profile and answer questions on risk and protective factors. Twenty-two advisors completed the full survey and others provided anecdotal information.

The North Hastings Community Safety and Well-being Public Consultation Survey was designed to obtain input from regional residents to inform the CSWB planning. Two versions of the survey were created (Adult Version and Under 16 Version) to obtain feedback from both adult and youth respondents (see Appendices). Two hundred and ninety adults and twenty-three youth completed the surveys between July 26 and December 2, 2019.

A series of town hall meetings were held throughout North Hastings in August 2019. Youth focus groups were held in October 2019 to gather in-depth views from young people in North Hastings. In addition, throughout the planning, small group discussions and one-to-one interviews were held with community members and Advisors.



Advisory Committee Member Organizations

Municipalities: Carlow/Mayo, Faraday, Hastings Highlands, Limerick, Tudor and Cashel, Wollaston and Bancroft.

Children, Youth and Family:

Bancroft Pregnancy Care Centre
Graphite Bible Camp
Highland Shores Children's Aid Society (CAS)
Maynooth Public School (MPS)
North Hastings Children's Services (NHCS)
North Hastings High School (NHHS)
Switchyard
York River Public School (YRPS)

Community:

Bancroft/Carlow Pastoral Charge of the United Church
Bancroft/Maynooth Parish of the Anglican Church
Hastings County Housing Services
Links to Health Eastern Ontario
Loyalist College Community Employment Services (CES)
North Hastings Community Integration Association (NHCIA)
North Hastings Community Trust (NHCT)

Emergency Services:

Bancroft Fire Department
Hastings Highlands Fire Department
Limerick Fire Department
Ontario Provincial Police (OPP)

First Nations:

Kijicho Manito Madaouskarini Algonquin First Nation Community
Métis Nation of Ontario

Health Services:

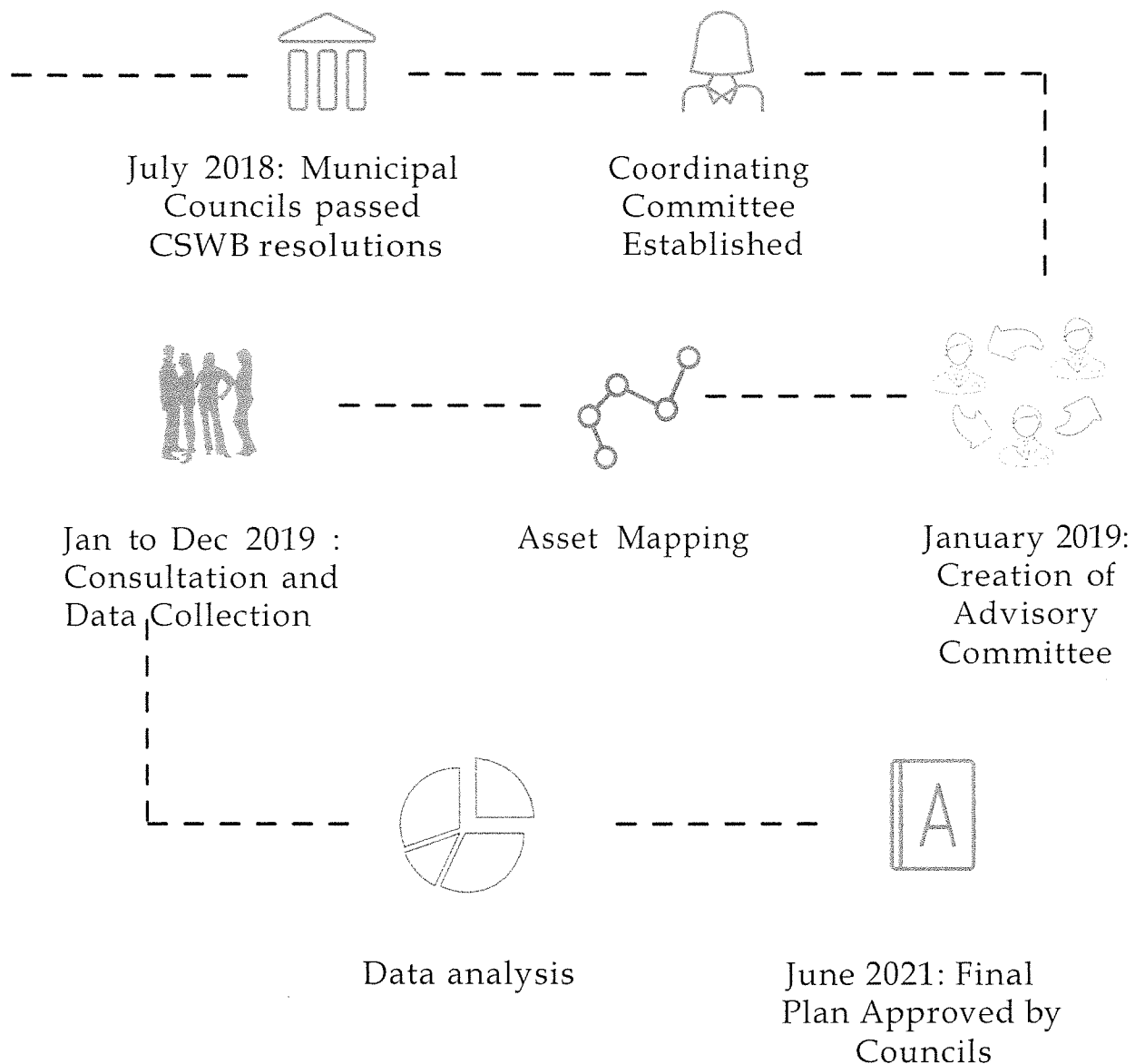
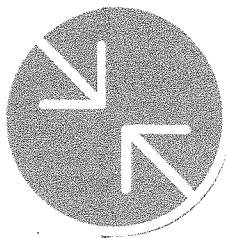
Addictions and Mental Health Services
Hastings Prince Edward (AMHS)
The Bancroft Community Family Health Team (BCFHT)
Children's Mental Health Services (CMHS)
Hastings Prince Edward Public Health (HPEPH)

Seniors:

Hastings Centennial Manor



Timeline



Identifying Priorities

Risk factors are negative characteristics or conditions in individuals, families, or society that can decrease access to the social determinants of health, or increase rates of social disorder, crime (or fear of crime), or the likelihood of harms or victimization to persons or property.

Protective factors are positive characteristics or conditions that can eliminate or reduce the negative effects of risk factors and foster healthier individuals, families and communities.

Throughout the data collection process, multiple risk factors emerged. The Coordinating Committee chose to focus upon 2-4 key areas of risk in the first phase of regional planning. This strategy ensures a clear focus, where important risk factors are given substantial consideration, and goals are measurable, and achievable.

Priorities were selected based upon their frequency of mention in community and advisor consultations, rate of occurrence, their level of community impact, local data, and building upon current successes.



Based on community consultations and local data, three priority risk factors were identified in North Hastings; poverty, mental health and addictions, and housing.

Poverty

2. Mental Health and Addictions

3. Housing

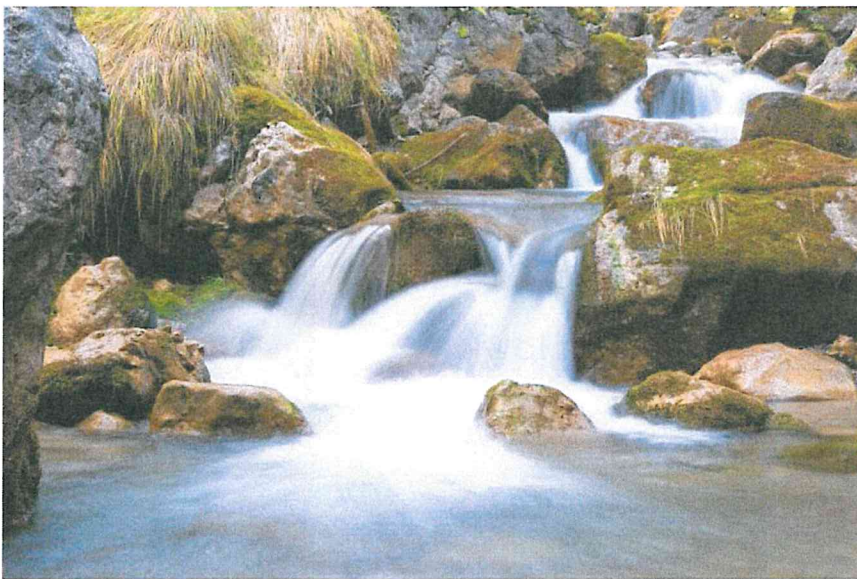
This plan thoroughly examines each area of concern (definition of the issue, its prevalence in North Hastings, community views, risk factors, impact, those most directly affected, and protective factors) and then importantly identifies strategic priorities and outcomes.

Poverty

Poverty is frequently defined in (absolute) financial terms. In this sense, poverty relates to low income and an inability to obtain the necessities of life (food, housing, and clothing).

However, poverty is a more complex issue that must also be considered in relevant terms, including social inequality, and an inability to meet normal living standards and opportunities.

"Poverty means going short materially, socially and emotionally. It means spending less on food, on heating, and on clothing than someone on an average income. Above all, poverty takes away the tools to build the blocks for the future — your 'life chances'" [1].



Poverty in North Hastings

“Over half our population does not have enough to meet their basic needs. This is a rural crisis”. (Jane Kali, Program Director, NHCT)

People living in rural Canada have an increased risk of poverty compared to those in urban areas. Poverty is a prominent risk factor in North Hastings. There are very clear indicators of absolute poverty in the region. The rate of unemployment is higher throughout the municipalities of North Hastings in comparison to the broader surrounding areas [1].

According to the 2016 census, 21.5% of North Hastings residents are low income. For children aged 0-5 the percentage increases to 32.4% and for youth aged 0-17, it is 27.8%. There is also considerable variation across the region. More than 50 per cent of children in Tudor and Cashel and 40% in Limerick are living in low-income households.



Community Views on Poverty

In the North Hastings Community Safety and Well-being Public Survey, poverty was identified as one of the top community concerns by respondents. Equally, in the Advisors Survey, those with low income/poverty were identified as a group most affected by risk factors in the area. Advisors who responded identified a lack of services addressing poverty issues (employment, income, housing, food, etc.) across North Hastings.

Globally, COVID-19 has led to an increase in poverty and its effects. The pandemic has highlighted social inequalities, and it will likely exacerbate them. Anecdotal reports from advisors and front line workers in North Hastings has suggested that struggling individuals and families have been pushed deeper into poverty by the pandemic.



Poverty Risk Factors:

Many factors can lead to an increased risk of poverty, including, rural living, race and discrimination, underemployment and unemployment, income, low educational attainment, multi-generational poverty, marital status, and lack of affordable childcare.

Impact:

Poverty can impact an individual or family's housing and food security, education, access to services, recreation, and community participation.

Accordingly, poverty can cause stigma and social isolation, mental and physical illness, reduced well-being, reduced access to healthcare and supports, increased risk of substance misuse, family conflict, and an increase in crime and victimization.

Those most directly affected:

In rural Ontario communities, poverty has increased amongst seniors. Single seniors can be most affected as one income may be insufficient to provide the necessities of life. Poverty can be also particularly detrimental to children and youth. Individuals, and families living on fixed income or low-paying, part-time jobs are also affected. As are individuals and families with mental health and addictions. Women and children in abusive domestic relationships are also directly affected by poverty. Ultimately, poverty and its effects impact everyone.

Poverty: Protective Factors:

Examples of protective factors for poverty include employment, affordable housing, education, childcare, family support, youth supports and programming, mental health and addiction services, and social connections. Building protective factors can lower the risk of poverty in North Hastings and improve the well-being of those experiencing poverty.

Respondents to the NHCSWB Advisors Survey identified community supports and services as an essential protective factor in the area. They also noted that cooperation and coordination between the organizations of North Hastings was an important protective factor. This plan seeks to address the stigma associated with poverty, increase our knowledge of the problem and who is most directly affected, and improving the integration of existing services in North Hastings.



Poverty: Current Initiatives and Strengths

Asset mapping is an important step in CSWB planning as it identifies our current strengths and highlights areas for future collaboration. Across North Hastings, numerous organizations and initiatives work to address poverty, some of which include:

Community Care North Hastings

Friends for Dinner

Kijicho Manito Madaouskarini Algonquin First Nation

Métis Nation of Ontario in Bancroft

North Hastings Children's Services

North Hastings Community Cupboard

North Hastings Community Trust

North Hastings Economic Development Committee

Ontario Works

The Poverty Roundtable HPE

SIRCH Community Services

Wood Share

Plans:

Canadian Poverty Reduction Strategy

Ministry of Children, Community & Social Services: Poverty Reduction Strategy

Moving Forward – Recommendations for Community Action: Poverty Roundtable HPE

North Hastings Community Trust: Report on Rural Poverty

Poverty Strategic Priority 1: Awareness and Anti-stigma

Poverty is a very prominent risk factor in North Hastings. We recognize the need for comprehensive and collaborative strategies to assist those experiencing poverty, target risk factors, and increase protective factors.

Lack of awareness and stigmatization of poverty leads to discrimination, further isolation, decreased access to service, and a reduced sense of belonging.

Action:

Work collaboratively with community organizations, individuals with lived experience and local media outlets on a CSWB anti-stigma strategy to provide information about poverty and its effects. The focus of this campaign will be to increase awareness, reduce discrimination and promote respect for all residents in North Hastings.

Outcomes:

- Increased community awareness of poverty and its effects.
- Reduced stigma, discrimination, increase dignity, and respect for all.
- Reinforce community inclusion and belonging of those experiencing poverty.
- Promote access to services and supports by reducing stigma.

Poverty Strategic Priority 2: Research and Knowledge Building

Poverty and its effects can change with time. Increased research into poverty in North Hastings is important to increase our understanding of the local issue and those most affected.

Action:

North Hastings has a large senior population. We will provide the community with a list of available resources.

Many youths in North Hastings live in poverty. We will provide the community with a list of available resources.

Outcomes:

- Increased data focused on local poverty.
- Improved understanding of poverty and its effects in North Hastings.
- Individuals most directly affected by poverty are given the opportunity to share their insights and effect change.
- Increased understanding of funding and supports available to assist those experiencing poverty in North Hastings.

Mental Health and Addiction

"Mental health includes our emotional, psychological, and social well-being. It affects how we think, feel, and act. It also helps determine how we handle stress, relate to others, and make healthy choices" [1]. Importantly, mental health goes beyond simply the lack of mental illness or disorder. Mental health is an essential element of health and is itself a place of well-being.

Also known by the clinical term, substance use disorder (SUD), "addiction is the problematic use of a substance" [2].

Mental health and addiction (MHA) are strongly interconnected. Half of those who experience a mental illness during their lives will also experience SUD, and vice versa.

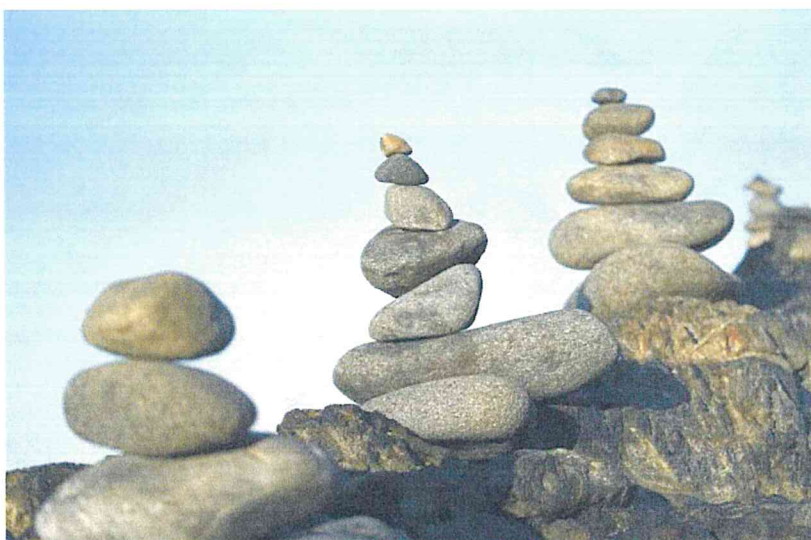


MHA in North Hastings

MHA is a national concern. Twenty per cent of Canadians experience a problem with mental health or addictions every year. In addition, by age 40 half of all Canadians will have experienced some form of mental illness [1].

Ontario 211 collects data on service needs, availability, and gaps in the province. This information provides clear insights into issues and trends in the region. 211 data for North Hastings identified mental health and addictions as the top category of service needs (2019).

According to local service providers, the COVID pandemic and increased poverty has worsened mental illness and increased overdoses in the region. Overdose deaths have doubled in North Hastings over the past year. Many of these deaths are a result of fentanyl [2].



Community Views on MHA

Across all areas of community consultation, mental health and addictions were listed as a primary concern in North Hastings.

In focus groups, youth identified MHA as the main issue of concern, and an area of influence. Youth who participated in discussions spoke about their own MHA problems, their peers, and within the wider community.

In the NHCSWB Community Survey, the number one community concern among respondents in all municipalities was substance misuse. One individual stated, “I am concerned most about the drug activity, but especially the drug activity in such young individuals.”

In the Advisors Survey, respondents reported persons living with MHA problems were among those at most risk in the region. Furthermore, advisors who responded to the survey identified mental health as the risk factor that impinges most on the people their organization serves.



MHA Risk Factors:

MHA problems are common. The causes of MHA are varied and include traumatic life events, family conflict, isolation and dislocation, marginalization, effects of colonization, medical conditions, genetics, and poverty. Mental health problems can increase the risk for substance use disorder, and conversely, SUD can lead to an increased risk of mental illness.

Impact:

Mental health and addiction problems can impact people in many different ways including, poor physical health, reduced life expectancy, housing insecurity, unemployment, poverty, damaged relationships, isolation, and reduced well-being. Stigma and discrimination associated with mental health problems can also lead to increased feelings of isolation and act as a barrier to treatment.

Those most directly affected:

Mental health and addiction problems can affect people of all ages and demographics. People who are marginalized, living in poverty, have a familial history, or experienced a traumatic life event are at increased risk. Statistically, young people are at the highest risk. Youth aged 15-24 are most likely to be affected by mental illness or substance use disorders [1].

MHA: Protective Factors:

Protective factors for MHA include housing, education, employment, community supports, healthy relationships, and physical activity.

Community involvement and connection can also positively influence MHA.

When surveyed, advisors stated that increased availability and accessibility of mental health services would be a protective factor. This plan addresses the stigma associated with MHA, increases our knowledge of the problem and who is most directly affected, and improves the integration of existing services in North Hastings.



MHA: Current Initiatives and Strengths

Across North Hastings, numerous organizations and initiatives work to address mental health and addictions, some of which include:

Addictions and Mental Health Services HPE

Algonquin & Lakeshore Catholic District School Board

Bancroft Family Health Team

Baseball for Dad

Children's Mental Health Services HPE

Hastings and Prince Edward District School Board

Hastings and Prince Edward Public Health

IMPACT program (pending)

Kijicho Manito Madaouskarini Algonquin First Nation

Métis Nation of Ontario

NHCS - Youth Advisory Board

Ontario Addiction Treatment Centres (OATC)

Ontario Provincial Police (OPP)

Safe Use Hastings

Plans:

Government of Ontario: Roadmap to Wellness

The Impact of Opioids and Other Drugs in Hastings and Prince Edward Counties

The Mental Health Strategy for Canada

MHA Strategic Priority 1: Awareness and Anti-stigma

According to the Centre for Addiction and Mental Health (CAMH) over half of the individuals with MHA problems won't seek treatment for fear of stigmatization.

Action:

As part of a comprehensive CSWB anti-stigma campaign we will work collaboratively with local organizations and individuals with lived experience to enhance community awareness of mental health and addictions.

211 data indicates that some residents are still unclear where they can access some services and supports. We will work to promote awareness of MHA services throughout North Hastings, in order to help individuals find the supports they need.

Outcomes:

- Enhance community inclusion.
- Increase awareness and reduced stigma and discrimination
- Increase awareness of local services and supports
- Promote supportive workplaces.
- Promote access to MHA services and supports by reducing stigma.

MHA Strategic Priority 2: Research and Knowledge Building

Research and knowledge building on MHA is important to expand our understanding of the problems and those most affected in the region.

Action:

In partnership with community organizations, research will explore MHA in North Hastings.

Outcomes:

- Improved understanding of MHA and its effects in North Hastings.
- Enhance targeted services and supports to those most directly affected.
- Individuals most directly affected by poverty are given the opportunity to share their insights and effect change.

Housing

In Canada, housing is recognized as an essential human right and an important social determinant of health.

Adequate housing is essential to one's sense of dignity, safety, inclusion and ability to contribute to the fabric of our neighborhoods and societies" [1].



Housing in North Hastings

The United Nations' Special Rapporteur on adequate housing called housing in Canada a "national crisis" [1]. Nationally there is a shortage of affordable properties and increasingly people are being priced out of the market.

Housing insecurity can be less visible in rural areas such as North Hastings. Unlike large urban centres, in rural areas homelessness can be hidden, thus it can be difficult to determine the true extent of the problem. Dr. Buck-McFayden recently completed an interim report on homelessness in North Hastings and concluded that the region is "experiencing a housing crisis" [2].

In North Hastings, there is a lack of affordable rental housing, no emergency shelter, and an increase in poverty. Over the past year, the average cost of an existing home in Canada increased by 32 per cent. In Bancroft, the average house price increased by 42.4% or over \$100,000 in one year [3]. This surge in home sales in the area has further exacerbated the existing housing crisis, decreasing availability, increased rent, and increased housing insecurity.

1. Kothari, Miloon, United National Special Rapporteur on adequate housing, "Preliminary Observations at the end of his Mission to Canada 9 – 22 October 2007," A/HRC/7/16/Add.4 (Preliminary Observations).

2. Buck-McFayden, E. (2020). Homelessness in North Hastings. Interim report.

3. Carrick, R. (2021). The housing boom is ripping apart the financial fabric of Canadian life. The Globe and Mail. [Online] Available at: <https://www.theglobeandmail.com/opinion/article-the-housing-boom-is-ripping-apart-the-financial-fabric-of-canadian/>

Community Views on Housing

In the NHCSWB Community Consultation Survey, lack of affordable housing was identified as a primary concern in the region. When asked what local services are needed, housing was the most frequent response. In addition, affordable housing was the number one recommendation to make the community better.

In the NHCSWB Advisors Survey, respondents identified housing supports as the greatest gap in services. Housing was also identified as one of the top issues impinging on the people they serve.

In consultation with advisors and local service providers, the housing problem was also highlighted. They noted that some individuals sleep in their cars, tents, trailers, camps or couch surf. It was also reported that Indigenous peoples are at increased risk of homelessness. Local service providers noted the problem is exacerbated by the marginalization and discrimination of people experiencing housing insecurity. Several community members suggested there is a need to appreciate and acknowledge the resiliency and resourcefulness of people dealing with housing realities.

Housing Risk Factors:

There are many causes of housing insecurity and homelessness including, poverty, unemployment, MHA problems, disability, lack of affordable housing, family conflict, divorce, family violence, trauma, and involvement in the criminal justice system.

Impact:

Lack of appropriate housing can lead to poor and unsafe living conditions, food insecurity, stress, health problems, reduced access to health care and benefits, difficulties obtaining and maintaining employment, increased risk of MHA problems, which can make it difficult to escape abuse or maintain child custody, and reduced community opportunities [1].

Those most directly affected:

The impact of colonization, racism and poverty has led Indigenous people to be at increased risk of housing insecurity and homelessness. Youth, young single men, women and families, and those marginalized such as LGBTQ2S are also at increased risk.

1. Ontario Human Rights Commission. (2021) Housing as a human right. [Online] Available at: <http://www.ohrc.on.ca/en/right-home-report-consultation-human-rights-and-rental-housing-ontario/housing-human-right#fn3>

Housing: Protective Factors:

Protective factors that reduce the likelihood of housing insecurity include employment and a livable wage, the availability of safe, affordable housing, housing supports, education, social support networks (such as friends and family), and community involvement.

This plan seeks to address the stigma associated with housing insecurity and homelessness, increase our knowledge of the problem and who is most directly affected, and improve the integration of existing services in North Hastings.



Housing: Current Initiative and Strengths

Hastings County has the primary role in Housing. The municipalities in North Hastings support the County within their mandate and resources. Across North Hastings, numerous organizations and initiatives also work to address housing insecurity and homelessness, some of which include:

Housing First Working Group of the Poverty Roundtable HPE

Hastings County's Community and Human Services Department

The Hastings Housing Resource Centre

Kijicho Manito Madaouskarini Algonquin First Nation

Maggie's Resource Centre

Métis Nation of Ontario

North Hastings Community Integration Association

North Hastings Community Trust

North Hastings faith communities

North Hastings Non-Profit Housing Corporation

Ontario Works

Trent/Fleming School of Nursing- Dr. Ellen Buck-McFadyen

Plans:

Bancroft Economic Development Strategic Plan

Opening the Right Door: A Ten-Year Plan to Address Housing and Homelessness Issues in Hastings County

Buck-McFayden, E. (2020). Homelessness in North Hastings. Interim report.

Housing Strategic Priority 1: Awareness and Anti-stigma

In our community consultation, local service providers noted the lack of awareness, stigma and discrimination of those experiencing housinginsecurity.

Action:

As part of a comprehensive CSWB anti-stigma campaign, we will work collaboratively with local organizations and individuals with lived experience to enhance community awareness of homelessness and housing insecurity.

Outcomes:

- Enhance community inclusion.
- Increase awareness and understanding of local housing issues.
- Reduce stigma and discrimination of those experiencing housing insecurity.
- Increase awareness of local services and supports.

Housing Strategic Priority 2: Research and Knowledge Building

Many details about housing insecurity and homelessness in North Hastings remain unknown. This problem is exacerbated by the hidden nature of the problem in rural areas. In order to comprehensively address housing further empirical research is needed on the extent of the problem, those most directly affected, and changes in regional homelessness.

Action:

The North Hastings Community Safety Well-being Committee will support the County of Hastings, community organizations and residents, research and explore housing insecurity and homelessness in North Hastings.

Outcomes:

- Increased data focused on local housing.
- Enhanced data sharing between local organizations and municipalities.
- Improved understanding of housing insecurity and homelessness in North Hastings.
- Services and supports can be tailored to the unique needs of the local community, making them more effective and efficient.
- Individuals most directly affected by housing insecurity are given the opportunity to share their insights and effect change.

Moving Forward

“Have a bias towards action – let’s see something happen now. You can break that big plan into small steps and take the first step right away” (Indira Gandhi).

This is the first regional community safety and well-being plan. Our planning has involved a great deal of care, consideration, and effort with the goal of making North Hastings a healthier and safer place to live. Ongoing municipal communication and cooperation are needed to ensure the plan’s success. Accordingly, the CSWB Coordinating Committee will continue meeting regularly to assess progress and make amendments where necessary. In addition, the Advisory Committee will meet at least once annually to share their insights and evaluations.

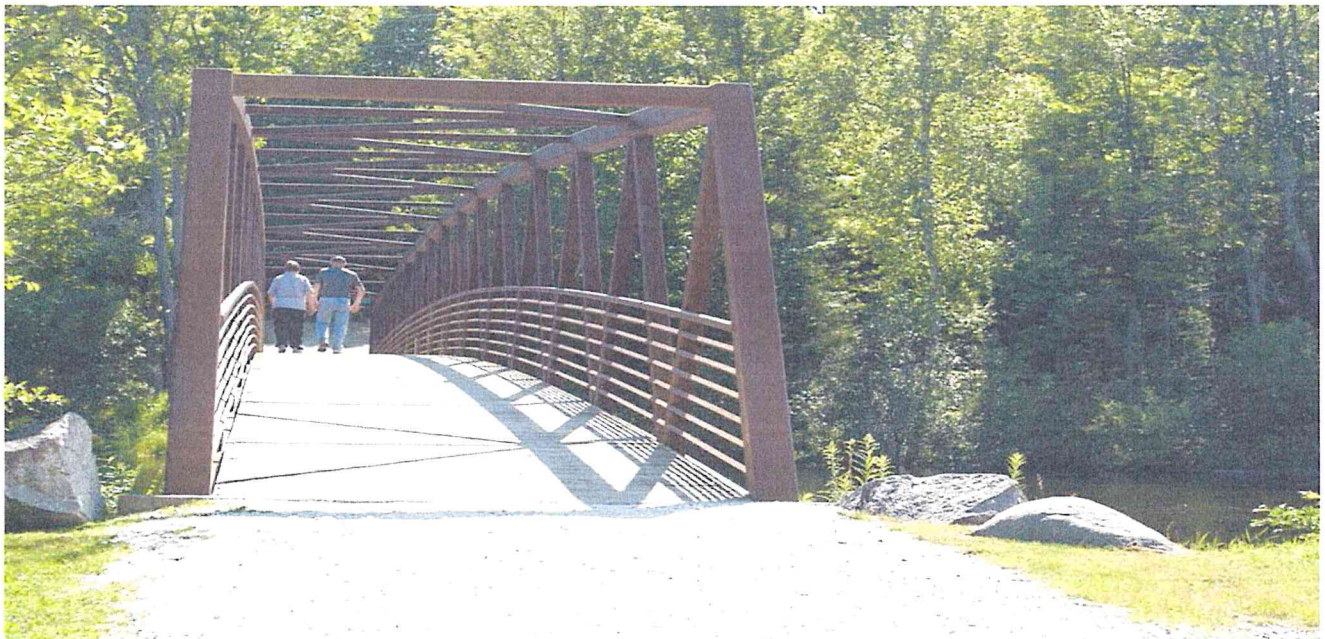
To ensure that the burden of responsibility does not solely fall on municipalities; and that residents, local experts, and organizations are actively involved, the Coordinating Committee will recruit and guide small action committees for each priority concern. Potential participants are listed in the preceding pages.



The Coordinating Committee will empower each action team to identify and recruit local and county organizations to assist in the promotion of strategic priorities.

The Coordinating Committee will ensure that the information emerging from the action teams clearly indicates what needs to be done.

This plan has detailed the importance of community safety and well-being planning, highlighted our regional concerns and laid out strategic priorities. Our plan is a collaborative commitment to address priority risk factors and improve the safety and well-being of all.



Appendices



Potential Action Teams

Poverty:

Community Care North Hastings
Kijicho Manito Madaouskarini Algonquin First Nation
Métis Nation of Ontario
North Hastings Community Cupboard
North Hastings Community Trust
North Hastings Economic Development Committee
Ontario Works
Poverty Roundtable Hastings Prince Edward (HPE)
North Hastings faith communities

Mental Health and Addictions:

Addictions and Mental Health Services HPE
Bancroft Family Health Team
Baseball for Dad
Children's Mental Health Services HPE
Hastings and Prince Edward Public Health
Kijicho Manito Madaouskarini Algonquin First Nation
Métis Nation of Ontario
NHCS - Youth Advisory Board
Ontario Provincial Police (OPP)
Safe Use Hastings

Housing:

The Hastings Housing Resource Centre
Housing First Working Group of the Poverty Roundtable HPE
North Hastings Community Trust
Housing Services Hastings County
Kijicho Manito Madaouskarini Algonquin First Nation
Métis Nation of Ontario
North Hastings faith communities
Trent/Fleming School of Nursing - Dr. Ellen Buck-McFadyen

Table 2: Carlow/Mayo Demographic Information

Area	The Township of Carlow/Mayo covers 390.79 square kilometres. The population density is 2.2 per square kilometre.
Population	The population of Carlow/Mayo is 864 people. 11% identify as having Aboriginal identity, 1.7% identify as a visible minority, and 8.7% of the population have immigrant status
Age	The average age of the population is 47.9. 0-14 years old 12.7% 15-64 years old 60.1% 65 and older 26.6% 85 or older. 1.7%
Education	Less than high school education is 23.8% High school education on or equivalent is 29.8% Post-secondary education is 46.3%.
Employment	The employment rate for Carlow/Mayo is 44.4% and the unemployment rate is 8.2%.
Income	The median household income after tax (2015) was \$49,792.
Housing	There are 627 private dwellings in Carlow/Mayo. The average household size is 2.3.

Table 3: Faraday Demographic Information

Area	The Township of Faraday covers 219.62 square kilometres. The population density is 6.4 per square kilometre.
Population	The population of Faraday is 1,401 people. 12.5% identify as having Aboriginal identity, 1% identify as a visible minority, and 7.5% of the population have immigrant status
Age	The average age of the population is 49.2 0-14 years old 10.7% 15-64 years old 63% 65 and older 26.3% 85 or older. 0.7%
Education	Less than high school education is 22.8% High school education on or equivalent is 27.3% Post-secondary education is 49.3%.
Employment	The employment rate for Faraday is 43.4%% The unemployment rate is 8.5%.
Income	The median household income after tax (2015) was \$49,229.
Housing	There are 1261 total private dwellings in Faraday. The average household size is 2.2.

Table 4: Hastings Highlands Demographic Information

Area	The Municipality of Hastings Highlands covers 972.35 square kilometres. The population density is 4.2 per square kilometre.
Population	The population of Hastings Highlands is 4,078. 11.9% identify as having Aboriginal identity 2% identify as a visible minority 10.1% of the population have immigrant status
Age	The average age of the population is 49.2 0-14 years old 12.9% 15-64 years old 58.4% 65 and older 28.8% 85 or older. 1.6%
Education	Less than high school education is 17% High School education on or equivalent is 29.5% Post-secondary education is 53.3%
Employment	The employment rate for Hastings Highlands is 44.8% The unemployment rate is 8.1%.
Income	The median household income after tax (2015) was \$51,296.
Housing	There are 3,684 private dwellings in Hastings Highlands. The average household size is 2.2.

Table : Limerick Demographic Information

Area	The Township of Limerick covers 205.37 square kilometres. The population density is 1.7 per square kilometre.
Population	The population of Limerick is 346. 21.2% identify as having Aboriginal identity 0% identify as a visible minority 7.5% of the population have immigrant status
Age	The average age of the population is 48.9 0-14 years old 10.1% 15-64 years old 63.8% 65 and older 24.6% 85 or older, 1.4%
Education	Less than high school education is 31.6% High school education on or equivalent is 28.3% Post-secondary education is 41.6%.
Employment	The employment rate for Limerick is 32.2% The unemployment rate is 16.7%.
Income	The median household income after tax (2015) was \$39,296.
Housing	There are 541 private dwellings in Limerick. The average household size is 2.2.

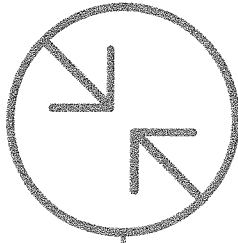
Table 6: Tudor and Cashel Demographic Information

Area	The Township of Tudor and Cashel covers 445.66 square kilometres. The population density is 1.3 per square kilometre.
Population	The population of Tudor and Cashel is 586. 9.5% identify as having Aboriginal identity 0% identify as a visible minority 4.7% of the population have immigrant status
Age	The average age of the population is 48.8 0-14 years old 9.4% 15-64 years old 65% 65 and older 25.6% 85 or older 1.7%
Education	Less than high school education is 28.7% High school education on or equivalent is 35% Post-secondary education is 37%.
Employment	The employment rate for Tudor and Cashel is 34.9% The unemployment rate is 14%.
Income	The median household income after tax (2015) was \$42,624.
Housing	There are 768 private dwellings in Tudor and Cashel. The average household size is 2.2.

Table 7: Wollaston Demographic Information

Area	The Township of Wollaston covers 219.14 square kilometres. The population density is 3.1 per square kilometre.
Population	The population of Wollaston is 670. 16.1% identify as having Aboriginal identity 0% identify as a visible minority 8.8% of the population have immigrant status
Age	The average age of the population is 50.9 0-14 years old 9.7% 15-64 years old 61.9% 65 and older 28.4% 85 or older. 1.5%
Education	Less than high school education is 24.8% High school education on or equivalent is 31.4% Post-secondary education is 43.8%.
Employment	The employment rate for Wollaston is 35% The unemployment rate is 12.5%.
Income	The median household income after tax (2015) was \$55,168
Housing	There are 791 private dwellings in Wollaston. The average household size is 2.2.

Adult Survey



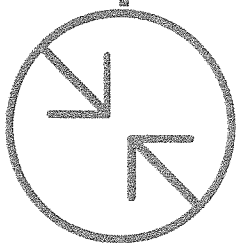
North Hastings Community Safety and Well-being Public Consultation Survey

The seven municipalities in North Hastings are working together to create a community safety and well-being plan. To inform the plan we want to hear from everyone in North Hastings. This survey is designed for people 16 and older. Your participation is completely voluntary, and answers are anonymous. This survey includes questions about things like your age and gender identity to make sure we are hearing from as diverse a group as possible, and so we can respond to the specific needs of different groups. The survey should take approximately fifteen minutes to complete. If you have any questions or concerns about this survey, please contact your local municipality for more information.

Your Community

1. What do you like most about your community?
2. What concerns you most about your community?
3. What could help make your community better?
4. How have local services benefited you?
5. What other local services are needed?

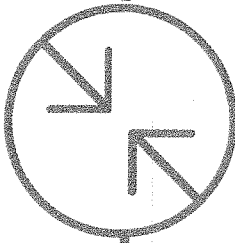
Adult Survey Page 2



Your Demographics

1. Which municipality do you reside in when in north Hastings County? *(Check ONE only)*
- | | | | |
|-----------------------------------|---|------------------------------------|---|
| <input type="checkbox"/> Bancroft | <input type="checkbox"/> Carlow/Mayo | <input type="checkbox"/> Faraday | <input type="checkbox"/> Hastings Highlands |
| <input type="checkbox"/> Limerick | <input type="checkbox"/> Tudor and Cashel | <input type="checkbox"/> Wollaston | |
2. Are you a permanent, seasonal or occasional resident? *(Check ONE only)*
- | | | |
|------------------------------------|-----------------------------------|-------------------------------------|
| <input type="checkbox"/> Permanent | <input type="checkbox"/> Seasonal | <input type="checkbox"/> Occasional |
|------------------------------------|-----------------------------------|-------------------------------------|
3. How old are you? *(Check ONE only)*
- | | | |
|--|--|--|
| <input type="checkbox"/> 16-24 years old | <input type="checkbox"/> 25-34 years old | <input type="checkbox"/> 35-44 years old |
| <input type="checkbox"/> 45-54 years old | <input type="checkbox"/> 55-64 years old | <input type="checkbox"/> 65-74 years old |
| <input type="checkbox"/> 75+ years old | | |
4. What is your gender identity? *(Check ONE only)*
- | | | | |
|---------------------------------|-------------------------------|---|---|
| <input type="checkbox"/> Female | <input type="checkbox"/> Male | <input type="checkbox"/> I identify as: _____ | <input type="checkbox"/> Prefer not to answer |
|---------------------------------|-------------------------------|---|---|
5. What is your sexual orientation? *(Check ONE only)*
- | | | |
|---|---|----------------------------------|
| <input type="checkbox"/> Heterosexual | <input type="checkbox"/> Asexual | <input type="checkbox"/> LGBTQ2+ |
| <input type="checkbox"/> I identify as: _____ | <input type="checkbox"/> Prefer not to answer | |
6. Do you self-identify as an Indigenous person?
- | | | | |
|---|---|--------------------------------|---|
| <input type="checkbox"/> Yes <i>(Check ONE below)</i> | <input type="checkbox"/> No <i>(Go to question 7)</i> | | |
| <input type="checkbox"/> First Nations | <input type="checkbox"/> Inuit | <input type="checkbox"/> Metis | <input type="checkbox"/> I identify as: _____ |
7. What is your main ethnic or cultural background? _____
8. Do you live with any of the following? *(Check ALL that apply)*
- | | | |
|--|--|---|
| <input type="checkbox"/> Addictions | <input type="checkbox"/> Environmental sensitivities | <input type="checkbox"/> Hearing or vision loss |
| <input type="checkbox"/> Intellectual disability | <input type="checkbox"/> Learning disability | <input type="checkbox"/> Mental health issues |
| <input type="checkbox"/> Physical disability | <input type="checkbox"/> Chronic disease | <input type="checkbox"/> Poverty |
| <input type="checkbox"/> Trauma | <input type="checkbox"/> None | <input type="checkbox"/> Other: _____ |
| <input type="checkbox"/> Prefer not to answer | | |
9. What type of housing do you occupy in north Hastings? *(Check AS MANY as apply)*
- | | |
|---|---|
| <input type="checkbox"/> Boarding home | <input type="checkbox"/> Group home |
| <input type="checkbox"/> Owned home | <input type="checkbox"/> Owned Home |
| <input type="checkbox"/> Rented home or apartment | <input type="checkbox"/> Retirement residence |
| <input type="checkbox"/> Shelter or hostel | <input type="checkbox"/> Trailer, RV or tent |
| <input type="checkbox"/> Friend or relative's home, apartment | <input type="checkbox"/> Couch surfing |
| <input type="checkbox"/> Homeless | <input type="checkbox"/> Prefer not to answer |
| <input type="checkbox"/> Other: _____ | |

Adult Survey Page 3



10. What is your family make up?

- ☐ I am single and I have no children
- ☐ I am partnered and we have no children
- ☐ I am single and I have children but they are not living with me
- ☐ I am partnered and we have children but they are not living with us
- ☐ I am single and I have children living with me *(Check ALL that apply)*

I have children in the following age groups:

- ☐ Infant/preschool ☐ Elementary school
- ☐ High school ☐ Young adult

- ☐ I am partnered and we have children living with us *(Check ALL that apply)*

We have children in the following age groups:

- ☐ Infant/preschool ☐ Elementary school
- ☐ High school ☐ Young adult

11. About what was your family's total income before taxes last year? *(Check ONE only)*

- ☐ \$0 - \$ 30,000 ☐ \$31,000 - \$60,000 ☐ \$61,000 - \$90,000
- ☐ \$91,000 or more ☐ Do not know ☐ Prefer not to answer

12. About how many people does this income support? *(Please indicate number)*

- _____ people ☐ Do not know ☐ Prefer not to answer

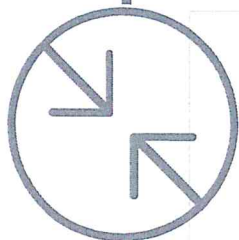
13. What is the highest level of education you completed? *(Check ONE only)*

- ☐ Less than high school diploma
- ☐ High school diploma or equivalency certificate
- ☐ Post-secondary *(Check ALL that apply)*
 - ☐ Apprenticeship or trades certificate or diploma
 - ☐ College, CEGEP or other non-university certificate or diploma
 - ☐ Bachelor's degree
 - ☐ University certificate, diploma or degree above a bachelor's degree
- ☐ Prefer not to answer

Thank you for completing this survey.

Please drop off your completed questionnaire at your nearest Municipal Office,
Library or North Hastings Community Trust by November 1st, 2019

Youth Survey



North Hastings Community Safety and Well-being Public Consultation Survey- Under 16 Version

We are making a community safety and well-being plan, and want to hear from everyone in north Hastings. This survey is made for people under 16 years old. This survey is voluntary, which means you do not have to take part. If you choose to take part, you will be asked questions about living in north Hastings. This survey includes questions about things like your age and gender identity to make sure we are hearing from a variety of young people, and so we can meet the needs of different groups. The survey should take about fifteen minutes to finish. If you have any questions or concerns about this survey, please contact Dr Meara Sullivan, mearasullivan@hotmail.com for more information.

Your Community

1. What do you like most about your community?
2. What do you like least about your community?
3. What could help make your community better?

About you

1. Where do you live in north Hastings County? *(Check ONE only)*

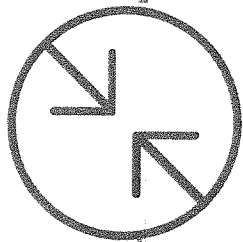
<input type="checkbox"/> Bancroft	<input type="checkbox"/> Carlow/Mayo	<input type="checkbox"/> Faraday	<input type="checkbox"/> Hastings Highlands
<input type="checkbox"/> Limerick	<input type="checkbox"/> Tudor and Cashel	<input type="checkbox"/> Wollaston	<input type="checkbox"/> I don't know
2. How old are you? *(Check ONE only)*

<input type="checkbox"/> 0-8 years old	<input type="checkbox"/> 9-15 years old
--	---
3. What is your gender identity? *(Check ONE only)*

<input type="checkbox"/> Female	<input type="checkbox"/> Male	<input type="checkbox"/> I identify as: _____	<input type="checkbox"/> Prefer not to answer
---------------------------------	-------------------------------	---	---

Thank you for completing this survey.

Youth Parental Consent Form



North Hastings Community Safety and Well-being Public Consultation Survey Consent Form for Parents/ Guardians

Dear Parent/Guardian,

The seven municipalities in north Hastings are working together to create a community safety and well-being plan. To inform the plan we want to hear from everyone in north Hastings. Your child is invited to complete a survey specially designed for young people under 16 years of age. Please read this information sheet carefully before consenting to allow your child to participate.

If you consent for your child to take part, he/she will answer questions on his/her thoughts and experiences living in north Hastings. The survey will take approximately 15 minutes to complete and includes questions about things like age, gender identity and what he/she likes most about living here. There are no known risks to participating in this study. Participation in this survey is completely voluntary. If you do consent, your child's answers will be kept anonymous and will not be shared with anyone. The combined results from all young people who participate will be included in the north Hastings CSWB plan and your child may be anonymously quoted.

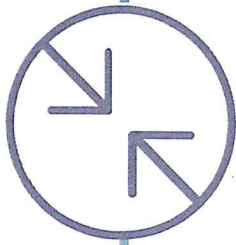
Thank you for your consideration.

If you have any questions or concerns please contact: please contact your local municipality for more information.

I, hereby give consent for my
son/daughter/dependent to be a participant in the
north Hastings Community Safety and Well-being Survey. I understand that the purpose of the
survey is to learn the thoughts and experiences of young people living in north Hastings.

Signature: Date:

Advisor Survey



North Hastings Community Safety and Well-being Meeting with Data & Information Specialists

Friday, January 18th, 2019

Crime and disorder has historically been a feature of society. But research has conclusively shown that there are effective ways to minimize their growth and their impact. Smart planning and wise investments can reduce community and the individual vulnerabilities.

One important step in the planning process is pulling-together data and information about the risk factors in North Hastings and groups of people who are vulnerable to those risk factors.

Risk factors are negative characteristics or conditions in individuals, families, communities or society that may *decrease* their access to the social determinants of health¹, or *increase* their rates of social disorder, crime (or fear of crime), or the likelihood of harms or victimization to persons or property.

There are many useful sources of information and data on risk factors and vulnerable groups including the social agencies and organizations that serve North Hastings. We are asking data and information specialists from these social agencies and organizations to examine their own data, information and experiences with their own clients in order to answer the following 10 questions:

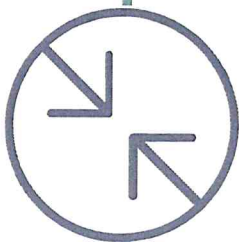
Service Profile

1. What is the range of services offered by your organization?
2. What's the demographic profile of those whom your organization serves?
3. Can you give us an estimate of the number of people served by your organization annually – e.g. numbers of children (0-12 years), youth (13-18), young adults (19-24), adults (25-65) and seniors (66+)?
4. What proportion of people served by your organization also receive support and social services from other organizations?
5. How satisfied with your organization's services are your clients?
6. What gaps in service or service deficiencies have they mentioned to your organization?

¹ The economic and social conditions that influence individual and group differences in health status (i.e. the health promoting factors found in one's living and working conditions).

* Co-chairs of the NHCSWB Coordinating Committee

Advisor Survey Page 2



Risk Factors

7. What risk factors impinge most on the people your organization serves (see list risk factors provided)?
8. What group of people (by age, socio-economic group, or other demographic factor) are most vulnerable to each of those risk factors?
9. What are the effects of those risk factors on the lives of these people?
10. What prevention or protective factors could reduce these vulnerabilities and thus, improve the lives of these people?

For purposes of this project, protective factors are defined as: Positive characteristics or conditions that can moderate the negative effects of risk factors and foster healthier individuals, families and communities, thereby increasing personal and/or community safety and well-being.

Our Ask and Next Steps

We are asking that representatives from the social agencies and organizations in North Hastings spend the next 8 weeks gathering this information on our behalf.

For some, this may be any easy task, for others, it will require more consideration of how best to gather and report this information. We encourage you to use hard data you have available, as well as anecdotal evidence that will help to illustrate the answers to our questions.

If, at any time during the process you require help or support (to build a survey, hold a focus group or interpret the information you have, or anything else!), please let Pat or Lianne know.

At the end of April, after we have had a few weeks with the answers to our questions, we hope to reconvene with you in order to rationalize and discuss what you've told us.

Thank you from the members of the NHCSWB Coordinating Committee:

Town of Bancroft – Lianne Sauter – L.Sauter@bancroft.ca *
Township of Carlow/Mayo – Arlene Cox – clerk@carlowmayo.ca
Township of Faraday – Lisa Hall – office@faraday.ca
Municipality of Hastings Highlands – Pat Pilgrim – cao@hastingshighlands.ca *
Township of Limerick – Jennifer Trumble – clerk@township.limerick.on.ca
Township of Tudor & Cashel – Bernice Crocker – clerk@tudorandcashel.com
Township of Wollaston – Dylinna Brock – dylinna@bellnet.ca

* Co-chairs of the NHCSWB Coordinating Committee



Plan Prepared by Meara Sullivan Consulting



Plan updates have been completed as required by the Coordinating Committee

Last updated February 24, 2022.