

Greater Toronto and Hamilton Area Community Safety and Well-Being Virtual Symposium 2022

9 a.m. to 3:30 p.m. Friday, June 10, 2022



What We Heard Report Prepared by LURA Consulting



Acknowledgements

Land Acknowledgement

The symposium was opened with a land acknowledgement, provided verbatim below, on behalf of the GTHA CSWB Working Group members. The symposium was held virtually, and the acknowledgement was read aloud by a facilitator located in Durham Region.

Today, we meet as a collective group to build new and foster existing relationships. While doing this, we must acknowledge the distinct impact of colonialism that prevents the people, animals and plants who are Indigenous to this territory from being here. It is important for us, many of whom are guests on this land, to take the time to learn and honour the stories of the true knowledge keepers of the land that we currently call home. As I read the land acknowledgment, I ask that you think about how we can best approach the work of community safety and well-being through a lens of truth and reconciliation.

Today I am speaking to you on the land which has long served as a site of meeting and exchange among the Mississauga Peoples and is the traditional and treaty territory of the Mississaugas of Scugog Island First Nation and all the territories covered under the Williams Treaties. Durham Region is now home to many First Nations, Inuit and Metis peoples. We recognize that we must do more to learn about the rich history of this land so that we can better understand our roles as residents, neighbours, partners and caretakers. Recognizing that we are gathering from across the GTHA, I invite you to share in the chat the traditional territory from where you are participating today.

Greater Toronto and Hamilton Area (GTHA) Community Safety and Well-being (CSWB) Working Group Members

The GTHA CSWB Symposium was a joint effort of representatives from six municipalities. Working Group members are listed below, in alphabetical order. The Working Group was chaired by Kiersten Allore-Engel, Durham Region.

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Executive Summary – Symposium Highlights

Symposium Background

In January 2019, legislative amendments to the Police Services Act mandated communities across the province to develop Community Safety and Well-Being (CSWB) Plans. The amendment came into effect in July 2021.

In response to escalating gun violence and crime severity across the GTHA, a working group was convened to plan a Community Safety and Well-being (CSWB) Symposium. The working group has representation from the municipalities of City of Hamilton, the City of Toronto, Durham Region, Halton Region, Peel Region and York Region and their respective police services.

The day included five (virtual) sessions with 31 speakers. More than 250 participants attended the event virtually. Over 140 organizations were represented from 30+ Ontario municipalities.

Symposium Purpose

The GTHA CSWB Symposium provided an opportunity for practitioners to come together to listen, learn and connect. As this was the first event of this kind, a focus was placed on sharing "information out". The goal was to raise awareness about CSWB plans and priority risk factors across communities in the GTHA. The symposium provided a starting point for identifying and sharing common areas of concern and identifying opportunities to work collaboratively on priority issues.

Action Items

One of the symposium's key outcomes was identifying **action items for municipalities and community partners to work together on CSWB issues in the future**. This section provides highlights of action items from speakers and attendees. Actions are separated into high-level "overarching actions" and concrete "specific actions".

Overarching Actions

- Connect people to the right services at the right time.
- Apply a diversity, equity and inclusion lens to CSWB work; acknowledge intersectionality.
- Employ a trauma-informed, culturally responsive approach to interventions; consider the impact of historical and generational trauma.
- Use a collaborative, multi-sectoral approach; do not operate in silos.
- Undertake ongoing, inclusive engagement with communities to build trust; enhance the representation of diverse groups in engagement processes.
- Validate and incorporate learnings from people with lived experience.
- Ensure interventions are impact-focused and informed by data; use cross-sectoral networks to validate community-based data.
- Build the capacity of social services to support community needs; support community-driven initiatives.
- Work towards a sustainable funding model for CSWB; ensure adequate investment for actions.

- Direct funding to top risk factors in each community; pursue intervention strategies that are nuanced to specific neighbourhoods.
- Leverage existing work and strategies already underway in communities.
- Meet communities where they are when providing services; ensure communication channels are appropriate for the audience.
- Be mindful of language choices (e.g., use "at-promise youth" instead of "at-risk youth"); be optimistic when talking about change.
- Facilitate greater collaboration and coordination of services across municipalities.
- Continue the conversation between municipalities and community partners.
- Increase public awareness of community safety and well-being initiatives.

Specific Actions

- Undertake quantitative and qualitative data collection with on-the-ground monitoring and evaluation of gaps. Use data to inform intervention strategies.
- Re-engineer police services to work collaboratively with other service providers. Ensure the right provider and right response.
- Create mixed teams for non-criminal response (e.g., an officer and a social worker for intimate partner violence calls).
- Ensure services are accessible through a "no wrong door" approach; provide a centralized model for intake and referral.
- Develop a cross-jurisdictional approach to addressing gun violence.
- Develop shared language for responding to and addressing issues (e.g., common definition for "hate crime").
- Align data collection and evaluation frameworks across the GTHA.
- Use common assessment tools to encourage connectivity between agencies.
- Develop a GTHA CSWB Community of Practice.
- Develop a guide for CSWB plan implementation considerations.
- Develop a searchable information hub to share data and resources across partners and municipalities.
- Provide support and resources for caregivers and compassion fatigue.
- Provide on-the-ground support to communities through local ambassadors (e.g., youth engagers, violence disruption workers).
- Provide education on available tools and resources, so they can be accessed and used by those that need them.
- Provide front-line officers and service providers with holistic training (e.g., how to support victims of sexual violence, how to identify red flags of human trafficking).
- Involve Councillors as champions of the CSWB plan.
- Host a "data day" to share and learn about data collection.

The GTHA CSWB symposium brought together diverse stakeholders from across the province. This was an opportunity to make connections, learn from one another and start conversations that lead to meaningful changes in the communities in which we work, live and play. Collectively, we hope to continue the conversation as we strive toward action for improved community safety and well-being in our communities.

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1. Background & Symposium Overview

Community Safety and Well-being in Ontario

In January 2019, legislative amendments to the Police Services Act mandated communities across the province to develop a Community Safety and Well-Being (CSWB) Plan. The amendment came into effect in July 2021. The province describes community safety and well-being as a place where everyone feels safe, has a sense of belonging, where individuals and families can meet their needs for education, health care, food, housing, income, and social and cultural expression.

GTHA Working Group

In response to escalating gun violence and crime severity across the GTHA, a working group was convened to plan a CSWB Symposium. The working group has representation from the municipalities of City of Hamilton, the City of Toronto, Durham Region, Halton Region, Peel Region and York Region and their respective police services.

Symposium Overview

A full-day virtual symposium was held on June 10, 2022, from 9:00 am to 3:30 pm. The day included five sessions with 31 speakers. More details on each session are provided in subsequent sections. A complete agenda can be found in **Appendix B**.

More than 250 participants attended the event virtually. Over 140 organizations were represented from 30+ Ontario municipalities.

CSWB Planning in Ontario

Staff from the Ministry of Solicitor General were not able to attend the symposium but provided a written update that can be found in **Appendix A**.

Highlights from the update include:

- Since the legislative deadline for CSWB planning, the Ministry has been tracking the status of CSWB plans across the province through various channels (e.g., news/media, stakeholder communications, municipal websites, etc.).
 - Note: there are currently no legislative requirements for municipalities to inform the Ministry of the completion or progress on the development of their CSWB plans.
- As of April 30, 2022, of the 372 municipalities legislatively required to prepare and adopt a CSWB plan, the Ministry is aware of 99 per cent (369 municipalities) that have completed plans or are in progress (including regional/joint plans). This includes:
 - 74 completed CSWB plans – representing 260 participating municipalities or 69 per cent of all required municipalities, covering 85 percent of the total Ontario population.
 - 29 CSWB plans in progress – representing 109 participating municipalities or 30 per cent of all required municipalities, covering 13 percent of the total Ontario population.



250+ Individuals in attendance



Representing 140+ organizations



From 30+ GTHA & Ontario municipalities

The GTHA CSWB Working Group retained LURA Consulting to assist with the symposium's planning, facilitation, and reporting. This report summarizes "what we heard" throughout the day. Where applicable, presentation slide decks are provided in **Appendix C**.

Symposium Purpose and Objectives

The purpose and desired outcomes of the GTHA CSWB Symposium are outlined below.

Purpose

- Bring representatives together from across the GTHA to host an event focused on community safety and well-being.
- Raise awareness about Community Safety Well-being Plans, priority risk areas, the role of data and evaluation metrics.
- Discuss community perspectives on gun violence, the growing culture of violence across the GTHA and how we can work together from a program and education perspective.
- Identify common priority areas, share best practices, identify action items and receive feedback on the next steps.

Desired Outcomes

- Opportunity to communicate common areas of concern and strategies for working collaboratively to address them.
- Develop a summary report highlighting community-informed practices and strategies.
- Identify action items for ways to work together in the future.

2. Keynote Speaker Presentations

Keynote presentations were provided by **Matt Torigian**, Distinguished Fellow, Munk School of Global Affairs; **Lindsay Kretschmer**, Executive Director, Aboriginal Legal Services; and **Anthony N. Morgan**, Manager of the City of Toronto's Confronting Anti-Black Racism (CABR) Unit.

Keynote presentations highlighted the importance of upstream intervention and a collaborative approach to community safety and well-being planning. There is a need for action and collaboration rather than operating in silos. There was a common theme of collaboration throughout the presentations. The need for community safety from the lens of environment, language, access, economy, health, education, and connection was highlighted.

Presenters stressed that interventions must focus on multi-generational and multi-sectoral approaches, action, relationships, and building trust. There is a need to consider history, stereotypes, and the importance of looking at policies and programs that are embedded in our organizations and systems. Making changes to these systems requires personal considerations in reconstructing the systems. This process takes time, effort and resources.

The keynote presentations spoke about targeted universalism - the idea of focusing on those at the highest rates of disadvantage, which leads to better outcomes for all. Finally, the importance of intersectionality was highlighted; we all have layers in our identities and keeping that top of mind will lead to outcomes that better suit the diverse needs of communities.

Additional highlights of the presentations are provided below.

Presentation Highlights

Community Safety & Well-Being Legislation, Matt Torigian

- Many people in the justice system would not be there if they could access services' upstream'.
- Collaborative risk-based support systems can "off-ramp" at-risk individuals before entering the criminal justice system.
- Situation Tables were instrumental in developing CSWB Planning Framework for the Province.
 - Various social service representatives (police, nurses, social workers, etc.) were involved.
 - 70% of the situations were brought by police, but 70% of the time, a different service provider was determined to be the right service provider to respond.
 - Developed a risk-tracking table, recognizing that:
 - Different cities will have different top risks.
 - Funding should focus on addressing top risk factors.
- Need to re-engineer police forces to support working collaboratively with other service providers, so the right service provider can lead the response in addressing risk factors.

Indigenous Perspective on Community Safety & Well-Being, Lindsay Kretschmer

- To understand some of the unique nuances and considerations concerning Indigenous communities regarding community safety and well-being, we have to look in the past.
 - These are major events throughout history, first contact to the Royal Proclamation to the creation of the Indian Act, the former British North American

Act, the legacy of Indian residential day schools, the sixties scoop, the Truth and Reconciliation Commission work, missing and murdered Indigenous women, two-spirit and girls, the discovery of children's mass graves and the ongoing system of colonialism that Indigenous Peoples are still facing.

- In the original relationship between Indigenous Peoples and the first settlers, Wampum Belts were used to acknowledge agreements.
 - We would travel side by side, equal to one another, never interfering with one another's way of life with peace, friendship and respect.
 - Canada did not uphold its end of this agreement.
- When we think about what community safety and well-being look like from an Indigenous perspective, we must acknowledge that Indigenous communities have been decimated through intentional and repeated efforts of assimilation using policies, programs and violence.
 - Access to education, employment, housing and the reclamation of sovereignty and self-determination are among the few things Indigenous Peoples in this country strive for every day.
- The urban Indigenous population in Toronto is approximately 70,000+; however, because they are not concentrated in one area, it is difficult to participate in neighbourhood-level discussions.
 - There are around 23 Indigenous-focused non-profits in Toronto. Most are clustered downtown.
- Indigenous community safety looks like – employment, education, affordable housing, access to dignified and relevant health services, economic strength, inclusion in the discussion, reclamation of culture, language and identity, a return of land, a clean environment and clean drinking water.
- Advice on how to effectively engage Indigenous communities:
 - Engage early and often; resources are required; Indigenous Peoples should author their own solutions; involve multi-generational commitment and a multi-sectoral approach; understand protocols and building trust; validate Indigenous ways of seeing, being and doing; reciprocal and responsive, honouring people with lived experience.

Confronting Anti-Black Racism Action Plan and Community Safety & Well-Being Plans, Anthony N. Morgan

- Confronting Anti-Black Racism (CABR) unit:
 - Permanent office; staff of 10; started May 2018;
 - The unit supports the City of Toronto Action Plan to Confront Anti-Black Racism (5 focus areas, 20+ actions).
 - Partners with other service agencies to advance the interests of Black communities (Toronto Transit Commission, Police, Toronto Community Housing).
- The framework used is Targeted Universalism:
 - By focusing on communities with the highest rates of marginalization, we can create benefits for all.
 - We learn how to remove barriers for all communities seeking equity by removing barriers for the target community.
 - It must be done with an intersectional lens.
 - Allows for focus on distinct barriers without ignoring interconnections between different groups.
- One of the key gaps in current planning is that there is no mention of the intersectionality of Black and Indigenous communities.

- Individuals should not have to choose between parts of their identity to access services.
- Adopted a Black food sovereign initiative, giving Black communities access to grow their food.
- Anthony is part of the anti-racism panel on the Toronto Police Board.
- Anti-Black racism:
 - Is about policies and practices embedded in governments.
 - Involves biases and prejudice.
 - Applies to people of African ancestry.

3. CSWB Planning in the GTHA

Staff from each municipality provided an overview of local CSWB planning efforts, the purpose of these plans and what is happening at the local level. Common CSWB risk factors across all six regions include mental health, substance use, housing and homelessness, violence and victimization, and discrimination.

Presentations were provided by **Jenn Hohol**, Manager, Human Service Integration, Strategy & Quality Improvement (City of Hamilton); **Kendra Habing**, Decision Support Advisor – CSWB Initiatives (Halton Region); **Mary Boushel**, Manager, Strategic Initiatives, Health Services (Peel Region); **Scott McKean**, Manager of SafeTO. Community Safety and Well-Being Planning (City of Toronto); **Sue Smythe**, Program Manager, Community Investments (York Region); **Nathan Stern**, Program Manager, Community Development (York Region); and **Kiersten Allore-Engel**, Manager of Community Safety and Well-being, Diversity, Equity and Inclusion Division (Durham Region).

Presenters noted that CSWB planning is an intentional journey. There is a need to look at CSWB through a services lens while also focusing on process and approach to ensure plans are centred on Diversity, Equity and Inclusion (DEI) principles, improved systems and collaboration. It was acknowledged that the inequities faced in our communities are growing, and the CSWB plans are a way of acknowledging that and planning to address inequities collaboratively.

Key themes highlighted across municipalities included the need to:

- Consider the local context when collecting data.
- Work towards a sustainable funding model.
- Establish buy-in and accountability from multiple levels of leadership, including the municipal police and elected officials, to ensure the success of plan implementation.
- Build relationships and trust with the community throughout plan development and implementation.

Additional presentation highlights are provided below.

CSWB Planning Highlights by Municipality

City of Hamilton

- HAIL (Hamilton Anchor Institution Leadership).
 - A coalition of anchor institutions in Hamilton.
 - Worked as a committee to develop Plan – completed July 1, 2021.
- Guiding principles developed in consultation with the community.
 - The community wanted to focus on processes for developing/implementing the plan.

- Principles = EDI (equity, diversity and inclusion), Community Engagement, System Collaboration, Data & Evaluation, Sustainable Funding.
- Partners developed a community-based hate-reporting tool in collaboration with the community.
- Working with McMaster University to ensure Plan is developed in consultation with the community and is informed by data.

Halton Region

- Halton was one of the first to develop a CSWB Plan.
 - Approved by Regional Council and Police Services Board in 2017.
 - Already several years into implementation.
- An established model for collaboration, planning and action for key human service sector partners
- Respond to priorities through Action Tables.
 - On-the-ground monitoring of issues and identification of gaps.
- Some Action Table highlights:
 - The new model of access and system navigation (ASN) for the child and youth mental health sector was established with Reach Out Centre for Kids (ROCK) leadership.
 - Coordinated access framework established to strengthen supports for homeless residents – 100+ offers of housing through a new framework.
 - Recommendations to enhance support to survivors of sexual assault adopted by Halton Police – training provided to more than 800 front-line officers
- Data analytics allows for a view of CSWB from different angles using multiple data sources.
- Data & Decision Support Group helps to identify issues through analysis of trends.
 - Can track effectiveness/responsiveness of work using both program-level and population-level indicators.
- Indicator Framework involves ten indicators for each domain (health, safety, community well-being) – 30 in total.
- Aligned Halton's Community Investment Fund (\$3.75 million) to CSWB Plan – Action Tables can apply for project funding.

Peel Region

- Over 30 organizations collaborated on Plan development.
- Started work in 2018 – partners spent considerable time developing mission and vision, focusing on collaboration and system-level change.
- Areas of focus for the first iteration of the Plan (4 years) are family violence, mental health and addictions, and systemic discrimination.
 - Based on an extensive review of data (i.e., wait times for access to services, police calls, etc.), literature and consensus-building sessions with partners, validated through community engagement sessions.
 - Youth lens applied to all focus areas.
- Pandemic intensified existing impacts/inequities related to areas of focus. The decision to continue with Plan development and meet the original deadline of January 2021.
- Action Tables consist of 76 individuals across 33 organizations.
 - Action Tables identify goals, strategies, actions and outcomes for each area of focus.

- Introduction of co-chairs for each action table to create a sense of ownership and collaboration around implementation.
- Extended Leadership Table includes Councillors.
 - Adds credibility to Plan; Councillors can help champion the Plan.
- Pandemic-related increases in intimate-partner violence furthered the need to raise awareness of issues and available supports through a region-wide campaign.

City of Toronto

- SafeTO designed in consultation with the community – a comprehensive plan to drive 26 action areas.
 - Adopted Jan 2021.
- Wheel (see slides) represents over 60 City strategies that already exist and advance SafeTO goals:
 - Invest in neighbourhoods; invest in people; promote healing and justice; advance Truth and Reconciliation; reduce violence; reduce vulnerability; drive collaboration and accessibility.
 - The plan focuses on partnering with these existing strategies.
- Year 1 Implementation Plan has four key focus areas (actions 1.3, 2.1, 2.3, 7.1):
 - 1.3: Embed the Community Crisis Support Service as a Well-Resourced, First Response Service City-Wide.
 - 2.1: Develop a Comprehensive Multi-Sector Gun Violence Reduction Plan.
 - 2.3: Strengthen Community Crisis Response Protocols to Better Support Victims and Communities Impacted by Violence.
 - 7.1: Develop a Comprehensive Strategy to Share, Integrate and Analyze Data Across Multiple Institutions.
 - Toronto Office to Prevent Gun Violence brings together different community agencies.
- Study in collaboration with the University of Toronto – community-informed approach to characterizing community well-being.

York Region

- Plan based on over two years of research and engagement.
- Pandemic allowed the team to test plan ideas and strategies.
- Based on data and community consultations, the first iteration of the Community Safety and Well-being Plan for York Region focuses on four specific geographic areas within the Region
- Community Action Tables were set up for each focus area.
 - Community Investment Fund was adapted to support Community Action Table initiatives.
- Implementation:
 - Local-driven actions.
 - The tables include residents and service agencies.
 - Action tables work together to develop place-based strategies.
 - Offer grants for community-led initiatives to address root causes.
 - Various projects for each risk factor within each geographic focus area (e.g., mental well-being engagement events in Northern Georgina).
- Looking to use more data to support monitoring and evaluation going forward.
- Information on the Plan and implementation can be found on www.york.ca/communityaction

Durham Region

- Priority risk factors: Mental Health, Substance Use, Criminal Involvement, Social Isolation, Victimization, Homelessness and Basic Needs, and Experiences of Racism.
- Goal to prioritize delivery of upstream services (social development, prevention).
- Steering Committee involved throughout Plan development.
 - Includes senior leadership such as Mississauga's of Scugog Island First Nation Chief, School Board superintendents, health care sector and Regional Council.
- Highlighted actions identified for experiences of Racism.
 - Enhance representation of diverse population groups and their perspectives in developing policies and delivering programs and services.
 - Apply an equity lens to the design and delivery of all programs and services.
 - Involve people with lived experience when designing and improving programs, supports and services.
- Some working groups will look at more than one risk factor or additional issues.
- CSWB information hub exceeds legislative requirements, developed based on feedback from community engagement.
 - Promote and highlight existing services.
 - Includes an interactive map of amenities and services; link to 311.
 - Searchable catalogue of program/strategy.
- Year one focus is to set up building blocks for long-term success.
 - Want to work across regions to identify advisory committee connections.

4. Community Perspectives Panel

The root causes or drivers of gun violence are complex. It is an outcome often resulting from systemic inequities, including poverty, racism, lack of opportunities, disproportionate exposure to violence, trauma, and adverse childhood experiences.

Effectively reducing gun violence requires a range of expertise and collaboration across sectors, governments and communities most affected. No one entity can reduce gun violence on its own. Gun violence reduction requires comprehensive multi-sector efforts that leverage the expertise, tools and mandates across sectors and governments to enhance the efforts of community partners in the areas of violence prevention, intervention, and response and recovery.

Police Services provide necessary responses to gun violence and coordinate across the GTHA, regularly sharing information that compliments enforcement, suppression and prevention approaches across geographic boundaries. While municipalities and regions are mobilizing at the local level, there is no cross-jurisdictional approach that enables municipalities or regions to collaborate across jurisdictions on strategies to prevent gun violence before it occurs or support communities to recover from the impacts of violence when it does happen.

Recognizing the need for a multi-pronged approach to addressing gun violence, this panel not only provided a policing perspective but also highlighted community and grassroots-led responses to gun violence, municipal approaches to prevention and identified opportunities for information sharing across jurisdictions.

Panelists included **Randy Carter**, Staff Superintendent (4219), Community Safety Command - Field Services (Toronto Police Service); **Nicola Crowe**, Executive Director (Durham Family Court Clinic); **Devon Jones**, Founding Director (Youth Association for Academics, Athletics and Character Education Y.A.A.A.C.E); **Scerena Officer**, Manager, Community Safety & Well-being

Unit (City of Toronto); **Jesse Williamson**, Project Manager, Strategic Youth Initiative (City of Hamilton); **Erin Goetz**, Youth Navigator, Xperience Annex (City of Hamilton); and, **Nathan Stern**, Program Manager, Community Development (York Region).

Panellists discussed factors for action, including anti-oppression, anti-racism, investment, collaboration, engagement, and being impact-focused. Presentations highlighted the importance of support systems and being proactive and noted the importance of language (e.g., framing of youth 'at promise' instead of 'at risk'). Municipal partners discussed multi-sectoral approaches and the importance of qualitative and quantitative data, partnerships, building youth up and creating and applying a trauma-informed approach.

Additional presentation highlights are provided below.

Presentation Highlights

Policing perspective

- All firearms in Ontario are tracked by FATE (Firearms analysis and tracing enforcement).
- Key trends:
 - Decreasing age of gang violence victims and accused subjects overall in 2021.
 - Greater and increased profile and activity of high-risk gang members on social media sites.
 - Increased rate of high-risk offenders regarding personal carry/access to firearms.
 - The increase of extended magazines and conversion switches that have been seized is reflective in the amount of rounds discharged and seized from crime scenes.
 - An increase in the number of offenders carrying firearms, resulting in more discharge scenes with multiple shooters.
 - Significant increase in the drug trafficking trade of schedule I controlled substances.
 - Potential bail revisions or reintegration supports with respect to gun violence and firearm recidivism and high-risk offenders –legislative change required.
- Need for greater coordination of services within the City and across municipalities.
- Toronto Police Gun and Gang Strategy is only one component of addressing gang violence – we need to collaborate with various organizations and agencies.

Changing the story – working together to empower the potential

- Everything we do is about safe, hopeful, healthy communities and the way we do this is by empowering and engaging young people, families and communities through collaboration, innovation and excellence.
- Durham Family Court Clinic (DFCC) offers specialized community-based services for young people.
- Their clinical counselling approach is non-traditional in that they go to communities where our youth and families feel comfortable and safe.
- Collaboration is key – we cannot do this work alone. Internal and external collaboration with multiple programs to support the young person through their journey.
- The young people they work with come from all walks of life, socioeconomic backgrounds, ages, and demographics with diverse identities and lived experiences.
- Work is community-responsive and trauma-informed.
- Durham Youth Gang Strategy is recognized as the best practice for prevention and intervention for youth who are gang-involved or at risk of gang involvement.

- When updating this strategy, DFCC collaborated with the City of Toronto. Planning was interrupted by the pandemic.
- Factors for Action:
 - Anti-oppression, anti-racism and DEI. The systems we work in are oppressive and built on a colonial construct. The pandemic has compounded pre-existing inequities. Need a coordinated approach to building capacity and shared awareness.
 - Investment and collaboration. Building the capacity of our social services to support the needs of our developing communities. Invest in support for the social determinants of health.
 - Engage and empower. It takes time to build relationships, but it is integral to this work.
 - Impact-focused and informed by data.
 - The ripple effect. We live in a global universe – we see the impacts of wider events on our communities.
 - Changing the story – working together to empower the potential.

Grassroots – Community-Driven Gun Violence Prevention

- Critical to have a multi-sectoral approach to addressing issues.
- Peace Core – New Narrative is a key program.
 - A new initiative with comprehensive services and programs working together to address the risk factors that impact involvement with violence and crime.
 - Family support; learning and education training; case management; employment training and support.
- Poor racialized young people who lack of access to social services and engagement are prone to involvement in gun violence.
- Need data to make sense of who victims of gun violence are.
 - Make sense of the impacts of different risk factors.
- CSWB plans should look different for specific communities/neighbourhoods to be more targeted.
 - Focus on intervention strategies that are more nuanced to specific communities. Ensure we are targeting those individuals at the core of these phenomena.
- There is a correlation between crime and access to programs and infrastructure.
 - In the Jane and Finch community, 3% of kids have access to recreational programs vs. Rosedale, whereas 70% of kids have access to recreational programs.
 - Speaks to the need to manage the recreational and school trajectory of youth.
- Please do not give up on kids in conflict with the law; do not assume the worst about their behaviour; do not label them in ways that will dictate their future; do not assume they are someone else's responsibility.
 - Do place importance on early childhood proactive strategies that promote emotional intelligence.
 - Think about "what happened" to someone, rather than "what is wrong" with someone.
- Model for action based on four foci:
 - Address the social-political context of violence, racialization, trauma, children and youth mental health and the education and justice systems.
 - Reach out to create partnerships across education, mental health and the justice system.
 - Support community-driven initiatives for healing and re-engagement.

- Develop and implement asset-based approaches to build from strengths.

City of Toronto – Community Safety and Well-being Unit

- Community Crisis Response Program is responsive to gun and gang-related violence. Multi-sector approach for supports and resources.
- Community Crisis Response Fund. Includes a youth-specific stream to support community healing and capacity building after traumatic events.
- The importance of trauma-informed and culturally specific support is critical. We must consider the link to historical trauma, particularly in racialized communities. Supporting mental, physical and emotional impacts of experiencing gun violence.
- Working with partners to identify hot spots for gun violence to prioritize place-based and population-based prevention and interventions.
- Violence disruption workers that have the lived experience to drive community solutions. Identifying risk-involved youth, mitigating risk and increasing access to support.
- Looking at hospital-based interventions and the continuum of care for victims of gun violence.
- Care-for-the-caregiver initiatives that provide a public health approach to experiences of gun violence.
- Integrated and wrap-around approach for interventions. Have seen a 43% increase from 2020 to 2021 in interventions.
- Mobilization is dependent on learning. Collaboration and data collection for evaluation and monitoring is key.

Positive Youth Development

- Youth Navigator helps to support the youth of Hamilton.
 - Support youth in reaching their goals, connecting with services, engaging youth voices and fostering collaboration.
 - Offer drop-in and virtual support to connect youth with services and offers a safe space to talk.
 - Parenting programming and supporting youth with high school completion.
 - Also looking to re-start a Nurse Navigator program through public health. Support the general health, mental health and addiction referrals within the community.
- They also have Youth Engagers – paid positions with the City, who offer peer-to-peer youth support. Their role is to connect in the community and are a key part of the team.
- Youth Strategy developed in engagement with youth, their families and local stakeholders.
- Five priority themes: accessing mental health and additions supports, accessing employment and training, access to safe and affordable housing, enhancing safety and a sense of inclusion, enhance youth engagement and leadership opportunities.
- Worked with a youth steering committee to develop the plan. Features youth from across the city, representing different demographics.
 - Will follow the lead of the youth on appropriate ways of engaging.
- Working with the CSWB planning team on guns, gangs and violence. Completed a local scan of programming for youth in the community. Developed a working group to support youth at risk of becoming involved with guns and gangs.
- Using a holistic approach to building youth up. Fostering positive mental well-being from youth. Focusing on prevention to strengthen protective factors.

Community Safety and Well-being Planning – York Region

- Four Community Action Tables (CAT) work in target neighbourhoods to develop programs for social development.
- Prevention:
 - CAT used data to develop Community Action Plans.
 - Looking to develop a community violence prevention grant.
 - Looking to develop protocols for responding to incidents to support the community through trauma.
- Emergency response:
 - Looking to develop children, youth and families' situation tables.
 - Have a mobile Response Unit.
 - Looking to work across regions/municipalities to address cross-regional issues and conflicts.

Panel Discussion

What does collaboration look like across regions?

Devon:

- Understand the nuances and complexities of issues within specific communities.
- On the ground, blanket policies and plans are difficult to implement.
- Collaboration – intervention needs to be framed collectively.
- Use data to inform strategy.

Nicola:

- Consider systemic barriers and data collection.
- Share what we learn from other communities within our own.
- Develop shared language for responding to and addressing issues.

Jesse:

- Days like today are a great start – you can understand who the players are.
- Importance of keeping these conversations going.
- Align evaluation frameworks across regions – useful to have GTHA numbers.
- Determine communication channels to collaborate. Channels need to be tailored to the audience.

Nathan:

- How to capture and validate community-based lived experience; usually not captured in traditional databases.
- Use cross-sectoral networks to validate community-based data.
- Create a repository for sharing work and progress that can be accessed anytime.

5. Breakout Sessions: Sharing CSWB Best Practices

Participants were invited to join one of six breakout discussions summarized below.

Human Trafficking (facilitated by Durham Region)

Speakers for the session on human trafficking included **Kiersten Allore-Engel**, Manager of Community Safety and Well-being, Diversity, Equity and Inclusion Division (Durham Region); **Jocelyn Siciliano**, Supervisor and Anti-Human Trafficking Advocate (Durham Region); and **Karly Church**, Human Trafficking Crisis Intervention Counselor (Victim Services of Durham Region).

Key Messages

- It is unfair to ask individuals to leave their human trafficking situation if their basic needs cannot be met. It is important to keep doors open and continue collaborating with partners to ensure basic needs can be met.
- Flexibility when developing programming.
- Understand we need to approach things from a client-centred lens.
- Importance of being innovative when working with partners and collaborating with this work. The partnership with Victim Services in Durham is highly important to ensure services for human trafficking victims and a quick and flexible response.
- Importance of working together across municipal borders.

Ideas for Action

- Continue keeping doors open.
- Continue collaborating with partners to make sure everyone's unique needs are met
- Importance of educating Social Service staff on domestic sex trafficking and how to have a conversation with someone and know what to do when you come into contact with a victim.
- Continue educating staff and community members on identifying red flags of Human Trafficking and Domestic Sex Trafficking.

Additional Context

Domestic Sex Trafficking

- The Government of Canada defines Human Trafficking as "the recruitment, transportation, harbouring, and/or exercising control, direction or influence over the movements of a person in order to exploit that person, typically through sexual exploitation or forced labour."

Human Trafficking

- It can exist if forced, fraud or coercion is present.
- If someone is doing it to you and profiting from you.

Sex Work Continuum

Choice (Sex Work)

- Consenting adult
- Makes decisions, is in control
- Keeps all funds

Circumstance (Sex Work)

- "Survival", the person may be homeless, suffers from mental health or addiction
- No third party
- Do what they need to do to survive
- Circumstances are naturally exploitive

Coercion (Sex Trafficking)

- Tricked, forced, and manipulated
- No control or decision making
- A third party keeps the funds
- Homeless are at a very high risk of being trafficked. Victim Services reports almost 100% of homeless youth are trading sex for a place to stay or food to eat.

Stages of Commercial Exploitation

- Luring
- Grooming & Gaming
- Coercion & Manipulation
- Exploitation
- Recruitment

Risk and Vulnerability Factors

Individual Factors

- Low self-esteem/self-worth
- Lack of confidence/insecurity
- Problems with family
- Do not feel adequately loved
- Lack of social support networks
- Problems at school/bullying
- Previous abuse

Societal/System Factors

- Social marginalization
- Poverty/few economic opportunities
- Isolated neighbourhood/proximity to a crime
- Racism/discrimination
- Newcomer/language barriers
- Gender/being female
- 2SLGBTQI+
- Aboriginal/legacy of colonization

If individual factors and societal/system factors overlap, they are at the highest risk

Response to Human Trafficking

- In Durham Region, human trafficking cases have doubled annually over the last three years.
- Victims are often isolated and rarely have contact with someone safe.

Domestic Violence

- In 1991, the Violence Prevention Coordinating Council invited Income Support to join their network.
- Women could not leave abusive situations without financial support.

- Protocol for Ontario Works was developed that ensured cases involving domestic violence were handled in a sensitive and timely manner.
- Training took place for all staff, and Woman Abuse Response Teams were developed in each office.

Human Trafficking

- In 2018, staff learned about human trafficking, which has been a topic in training and the media ever since.
- Ontario Works staff had victims of human trafficking on their caseloads or as new applicants.
- Durham Ontario Works responded, recognizing that this issue is not like domestic violence and that our response was crucial to the safety and well-being of those involved in human trafficking.

Ontario Works Protocol: A Response to Human Trafficking

- Client service should be flexible and occur the day clients make contact whenever possible.
- A safe phone number or method of contact is recorded for future use.
- Emergency accommodation and transportation can be arranged if they have just left or want to leave their trafficking situation.
- If the client has their ID in their possession, copies should be taken and placed in the Ontario Works file.
- The outcome plan should include restrictions on voluntary participation or a full deferral in participation based on their situation.

Human Trafficking Tool for Staff

- Red flags that could indicate a client is being trafficked.
- A conversation guide that provides sample questions and how to ask them in a sensitive and supportive way.
- A deeper understanding of a client's true situation and the reasons behind their decisions.

Human Trafficking Response Teams – Durham Region

- Each Ontario Works office now has a supervisor and caseworkers that make up the Human Trafficking Response Teams (HTRT).
- Any new applicant identified as a victim of human trafficking will be connected to a member of HTRT immediately. The goal is same-day service.
- For any client already in receipt of Ontario Works, their caseworker will connect to a member of the HTRT team in their office for consultation and support.

Durham Region Service Model

- Offers a multi-sectoral survivor-informed service built on collaboration.
- Partners work together to provide survivors with the wrap-around personalized support they need with zero pressure to report to the police.
- Professional assistance is provided at any point, and survivors can access available funds to support their basic needs and long-term goals without repeatedly telling their story.

- Specialized human trafficking support from Ontario Works, crisis intervention counsellors with real-life understandings from Victim Services of Durham Region, and the police team working from a victim-centred lens.
- This infrastructure ensures all the services work together to put the survivor first.
- More information is available at <https://www.stopht.com/home>.

Data and Decision Support (facilitated by York Region)

The speaker for the session on data and decision support was **Anna Malenkov**, Program Manager, Data Services (York Region).

Key Messages

- Data is key to making informed decisions and for action planning. Lack of data does not mean that action cannot be taken as community knowledge is available.
- Use the Result Based Accountability (RBA) framework in planning – this is a "backward" approach from ends to means.

Ideas for Action

- Listening to the participants' challenges using Stories (qualitative data),
- York Region team proposed to plan a "Data Day" for interested participants to share and learn about data collection and support.

Additional Context

Data Use – All Plan Phases

- Data work can be presented as a cycle:
 - Data allows us to develop new knowledge about situations and trends in the community. This knowledge helps us as leaders and community members to take action and improve the community's well-being.
 - As we plan and implement actions and observe results, we ask new questions, find or create data to answer them, and the cycle repeats.
 - While working on the CSWB plan in York Region, we went through this cycle at every phase of the plan. It is data work that helped us move from one phase to another and helped us to shape every new phase.
- From the initial data analysis came the understanding of a place-based approach. As we learned what these places are, we could go to these places, connect with these communities, listen to them and learn from them.
- Through this engagement and learning about the communities, we were able to identify priorities for these communities.
- York Region has established Community Action Tables as bodies that will plan and implement actions to address the priorities.
- Data plays an important role in the implementation of the action plan.

Collecting Local Data – Developing knowledge

- We compiled and analyzed the data for the initial risk indicators and further developed this list based on new learnings from consultations with stakeholders.

- Census data was used to understand the distribution of risks across the Region and if there are areas in York Region where these risks are more pronounced.
 - A lot of partnerships were developed in the initial phase
- The compilation and analysis of "local" data at the granular geographic level – Census Tract – pointed to certain areas in York Region that would benefit from targeted efforts.
- To verify these findings and understand how York Region fares against its neighbours, we used the Ontario Marginalized Index (OnMarg), specifically its Material Deprivation dimension.
 - OnMarg confirmed our conclusions and pointed to the same geographic areas ("Focus Areas").
- Engagement with residents and community organizations in the Focus Areas was done through online surveys and consultations. Data in the form of community profiles helped in facilitating a conversation.
- The major findings from this cycle of engaging and consulting were the new knowledge about priorities – what community members saw as major priorities in their areas.

Work Planning

- The "ends to means" approach to planning actions comes from the RBA framework. It starts with determining what results you want to achieve.
 - Results – as a condition of the community's well-being, explained in simple terms.
 - The next step is to develop indicators – ways to identify this result when you see it.
 - The final step is to plan actions that have a chance to "turn the curve" of a particular indicator.
- Lack of data does not mean that action cannot be taken.
- One of the actions can be to start collecting the data and develop tools to collect data.
 - In RBA, this is called a data development agenda.

Monitoring and Evaluation

- Data plays a big role in evaluating results.
- Partners, each performing their actions, contribute to the community results.
- Each partner's performance is evaluated through performance measures.
- Performance measures are developed for population indicators.
 - First, determine the results and what we want to gain.
 - Then we want to know if we are doing it, and finally, what we plan to do, change, or alter (ends to means).
- Performance Measure categories: how much we have done, how well it was done and how clients are better off.

Summary

- Data allows us to monitor the performance of the place-based initiatives.
- When data proves these initiatives to be successful, they can be scaled up in the community.
- Data can be an instrument of action planning for improving community indicators and performance measures.

Discussion

- We honour stories and storytelling coming from the community. How do we make this qualitative data relevant/appropriate to funders?
- York Region proposed to host a "Data Day" for interested participants.

Community-Based Crisis Response (facilitated by the City of Toronto)

Speakers for the session on community-based crisis response included **Mohamed Shuriye**, Manager Policing Reform (City of Toronto) and **Andrea Westbrook**, Social Worker (Gerstein Centre).

Key Messages

- Alternative approaches to policing that respond to mental health crisis calls are possible and can be integrated into our system.
- The needs of Indigenous, Black and Racialized communities need to be prioritized and at the forefront of this work.
- Diverse skillsets must be involved in design and implementation, reflecting lived experiences.
- Community-driven; trauma and culturally informed.
- Need a diverse set of people involved.
 - The pilot teams, the Anchor agencies, access and intake, including 911.
 - Support from the police services to identify calls and review calls, defining the City's role, governance and evaluation.
 - Clearly identified roles and responsibilities are required.
- Ongoing Community Engagement is critical.
- Principles of Care need to be understood and abided by.
- Clear accountability and governance structure.
- Creating service access and the review of the effectiveness of the service access should be consistently monitored and evaluated.
- Response teams should be multi-disciplinary, and teams should be trained effectively.
- This model requires culture change and will take much time to influence the culture.

Ideas for Action

- Develop a Community of Practice.
- Develop a guide for implementation considerations.
- Collective advocacy about mental health service system needs and gaps.

Additional Context

- This work has required wide collaboration across the organization and in the community and, if successful, will have a large, positive impact on vulnerable Torontonians
- The summer of 2020 was a summer of protests and calls for action to defund the police in our city and across the globe that was decades in the making. After the tragic deaths of Regis Korchinski-Paquet, George Floyd, and Chantal Moore, among many others, calls to reform the police came to a head for many Canadians, accompanied by a global movement calling for critical reforms.
- In June 2020, Council adopted a set of 36 recommendations intended to reform policing in Toronto. These reforms touch on several areas of policing, public safety, and crisis response. The main buckets of work we are responsible for are:

- Alternative Community Safety Response Models.
- Police Chief Selection Criteria (e.g., this involves broad-scale consultation to inform qualities, characteristics, qualifications and competencies that are required from Toronto's next Chief of Police)
- Police Budgetary Transparency (e.g., publishing line-by-line budgets open to the public).
- Data Sharing and Information Transparency (e.g., posting Use of Force Procedures, collecting race-based data, releasing datasets onto the City's Open Data Portal).
- Police Conduct Accountability.
- Independent Auditing and Police Service Accountability.
- Status and Implementation of Existing Recommendations (like the Andrew Loku inquest, the Iaccobucci report, and Justice Epstein's report).
- One of the key directions was to develop an alternative community service that does not require the presence or intervention of the police for people in crisis.
- An online dashboard has been established.
- Thirty-three round tables, two public surveys, multiple interviews, Public Opinion Poll.
- Roundtables facilitated by multiple partners.

Service Access

- The service should be accessible to all Torontonians, including undocumented Torontonians and those who traditionally experience barriers accessing and receiving services, such as the Indigenous, Black, and 2SLGBTQ+ communities.
- The service should operate 24/7 with local points of access.

Principles of Care

- It is imperative for the approach to be community-driven and led, trauma-informed, evidence-based and founded on principles of harm reduction and anti-oppression.
- The service should include a commitment to non-judgmental and non-coercive care and an understanding of intersectionality.
- The pilots should be locally developed and reflective of the communities they serve.

Response Teams

- The multi-disciplinary team should include people with diverse lived and professional experiences.
- The team members should be capable of responding to various situations.
- Intentional hiring practices and ongoing professional development related to anti-oppression, anti-racism and de-escalation training should also be built into the service.

Population Specific Considerations

- There is an identified need for a Black-led and Indigenous-led response due to existing service gaps, over-policing, and criminalization within these communities.
- Two-Spirited, Trans and non-binary individuals, sex workers, undocumented Torontonians, children, seniors, youth, and individuals who have been unfairly criminalized by the current system due to racism, homelessness, mental health and/or substance-use challenges, also require special consideration.
- Specific supports should be expanded to support people with complex issues who frequently and repeatedly engage with the system, focusing on scaling evidence-based services.

- It will be important to have Elders and Knowledge-Keepers, spiritual healers, and population-specific mental health experts involved in the response and for a family/kinship-based approach to care and after-care.

Accountability

- Accountability for the service should be community-based.
- The service should build a relationship with the community through ongoing discussions that address local concerns and emerging issues related to the service.
- Service data should be regularly collected and reported.
- Information on what potential service users can expect to receive from the service should be clear and posted publicly.
- An external group of agencies, organizations, people with lived experience, and community members should provide oversight and direction, including service improvement.

Non-Police-Led Crisis Response in Toronto

- In doing this work, it's important also to recognize that over the past decades, there have been non-police crisis response initiatives in Toronto.
- We looked at 50 jurisdictions worldwide, across Canada, and in Toronto.
 - Geospatial analysis is critical.
- The mental health system has long since reached its capacity.
 - It has historically been underfunded and inadequately resourced.
 - This has resulted in people with mental illness not receiving the support they need and falling into distress.
- The current system functions as a crisis management system rather than one that is proactive and preventative.
 - We are seeing a rapid increase in hospital emergency room visits for mental illness, demand for treatment and support services, and waitlists for intensive mental health case management.
- Over the past five years, the Toronto Police Service has seen a 32.4% increase in "person in crisis" calls.
 - These calls are defined by a person experiencing a temporary breakdown of coping skills and reaching out for help.
- The police have become default first responders of the mental healthcare system, with approximately 1 in 5 police interactions across Canada involving a person with a mental illness or substance use issue.
- However, this police-led response to addressing health issues creates service barriers and risks for many Torontonians, particularly for Indigenous, Black, and other equity-deserving communities, members of the 2SLGBTQ+ community, and youth and seniors.
 - Torontonians with mental health and /or substance use challenges, those street-involved individuals often have complex needs incompatible with a law enforcement approach.
 - Systemic racism, anti-Black and anti-Indigenous racism, and bias have compounded these interactions, often leading to negative outcomes for residents who reach out at their most vulnerable state.
- Community mistrust and lack of confidence in a police-led response to those experiencing a health crisis have led residents, communities and organizations to call on the City to reimagine a model of response that is non-police led, client-centred, trauma-informed, and focused on reducing harm.

- This engagement and research that everyone participated in directly informed a made-in-Toronto service model.
- A pilot approach was recommended to Council, one led by community health partners, in four areas across the City from 2022 to 2025 to achieve full city-wide implementation in 2026.

Toronto Community Crisis Service

- TCCS (Toronto Community Crisis Service) is an action of SafeTO.
- A central intake partner, 211, will dispatch the calls to the appropriate pilot team. Others will be triaged through 911.
- The service will be anchored in a health service provider (like a Community Health Centre), which will hire and manage the mobile crisis teams and wrap-around supports.
- Each team will be comprised of two crisis workers that respond to calls together to ensure mutual safety.
 - Additional team members include case managers, service navigators, nurses, peers, or outreach workers to respond to a broad range of service calls.
- The City will select the anchor agencies, serve as backbone support for the new service, lead intergovernmental advocacy, develop public education campaigns to prepare residents to use the new service, and identify areas for increased community investments.
- The City will develop a City-Wide Pilot Advisory Table to shape and guide the pilot throughout implementation. This Table will comprise mental health experts, key stakeholders, and people with lived experience.
- A third party will lead monitoring, evaluation and knowledge mobilization, including developing a community of practice around crisis support.
- We need to test, learn, adjust and refine based on the pilot across the pilot years to prepare for full city-wide expansion.

About the Pilot

- 24/7 service.
- It is a voluntary service.
- "No wrong door" approach.
- Features mobile crisis response.
- Service focuses on serving people aged 16+.
- Offers post-crisis follow-up, referrals, service navigations, and case management.
- Most importantly, the service offers client-centred trauma-informed care and harm reduction.
- 211 is our dispatch partner.

Training and Curriculum

- Sessions focused on the Foundational Principles of the service and the work.
- Sessions focused on core technical skills.
- Sessions focused on applying those skills to specific circumstances.
- And finally, scenario training to wrap everything up.

Role of Police

- Providing backup support on the scene if a situation is deemed unsafe or if there is a possibility of imminent harm.
- Amending necessary policies, practices, procedures and other governance to integrate referral to a community crisis support service to the 911 call centre as a dispatch option.
- Training 911 call-taker staff about the pilot and its objectives.

- Analyzing and sharing on the City's Open Data Portal and reporting on call diversion data, separated into calls diverted to Mobile Crisis Intervention Teams, the community crisis support service, and available outcomes and geographic distribution of the calls.

Family Violence (facilitated by Peel Region)

Speakers for the session on family violence included **Lisa Hewison**, Inspector, Crimes Against Persons (Peel Regional Police) and **Shelina Jeshani**, Director of Strategic Partnerships and Collaborations (Catholic Family Services Peel-Dufferin).

Key Messages

- Creating a partnership between the Safe Centre of Peel and the Peel Regional Police (PRP) Intimate Partner Violence (IPV) unit to provide services and navigation tools in one safe space.
- Information is readily available in this framework.
- Completely up to the survivor if they want to get the police involved.
- The IPV unit officers wear normal clothes (no uniform) to ensure survivors are not intimidated.
- Welcome survivors into a future that is full of hope and well-being.
- **Safe Centre of Peel and the IPV unit provide:**
 - Help with navigating systems
 - Coordinated communication between service providers
 - Areas that are welcoming to children and survivors
 - Access to legal information
 - Risk assessment and safety planning – employees speak a common language when talking about risk among people
 - Multilingual services

Housing supports Ideas for Action

- Looking at funding opportunities for partnerships and opportunities.
- Looking to create mixed teams for non-criminal responses to IPV calls.
 - An officer with a social worker will be responsible for such calls.
- Creating a framework that will be optimistic when talking about change.

History of Safe Centre of Peel

- Started as an idea in 2008 when service providers and Peel Region came together to discuss how we provide services to those in need.
- Safe Centre of Peel noticed clients had difficulty accessing and navigating resources.
- There was a need for better support for clients in the community.
- In 2010, Safe Center of Peel surveyed to get to know the gaps within their organization, the community and services.
- There was difficulty navigating services on the clients' end (where to go, what to do and who to contact).
- There were cultural and language barriers when responding to calls regarding family violence.
- Organizations were also scattered; no one was working together to provide services.
- Once the gaps were identified, a **family justice system model** is what the Safe Centre of Peel followed.
- **Services and sectors came together to provide client resources in one space.**

- Information is readily available in this framework.
- Began the planning by looking at the needs of the community.
- Before the Safe Centre of Peel and the Peel Regional Police IPV unit partnership, there were barriers. **Barriers to safety were:**
 - Navigating complex systems (clients did not know where to go and the next steps to take)
 - Lack of communication between service providers
 - Lack of child-minding
 - Survivors had to tell their story over and over
 - Transportation challenges
 - Fear of police and child welfare
 - Limited access to legal information
 - Language and cultural barriers
- In 2011, the Safe Centre of Peel was created.
 - Vision: our community lives free from the impact of violence
 - Mission: To strengthen our community by providing a single point of access to services that are coordinated, responsive and accessible to those experiencing family and intimate partner violence.
 - Based on the IPV Reduction Strategy: this is aligned with the Region of Peel, Peel Regional Police and CSWB frameworks.
 - The client navigator works closely with Safe Centre of Peel and makes referrals, so clients do not have to worry about navigating the system.
 - Space created is physically and emotionally welcoming.

Safe Centre of Peel initiatives

- Look out for children and provide support for mothers.
- Work at creating a resource list for parents.
- Partners with Safe center of Peel: IPV unit.
- Compassionate and seamless approach.
- Trauma-informed approach.
- Working together with a CSWB framework.

IPV Unit

- In 2020, the IPV unit looked at the service delivery model of how we work to solve IPV calls.
- In April 2021, Peel Regional Police launched an IPV unit in partnership with Safe Centre of Peel.
- In this unit, specialized investigators work only to deal with such IPV calls.
- The location is in the 60 West Drive building.
- 12-hour shifts and coverage.
- Always working in plain clothes, with no police signage to ensure clients are not intimidated.
- Only the survivor will come, not the abuser.
- Members of the IPV unit are diverse and collectively speak 14 different languages.

Current State

- Risk assessment and safety planning – employees speak a common language when talking about risk among people.
- Safety plan that gets reviewed by clients and navigators regularly.
- Multilingual and child friendly.
- Having services available virtually.
- Housing support is available.

- Focus on people not having to repeat their story (trauma causing).
- They tell their story once and are moved to the next referral or service.
- Family court supports with navigating the system.
- Specialized police response.
- Soft interview rooms for police investigations (non-intimidating).
- Clients' choice always of whether they want to speak to the police or not.
- A client navigator is available.
- Utilizing action/situation tables.
- Safety planning for all the survivors.
- Look after early intervention support programs.
- Utilizing social media for education.
- Provide support and services for wrap-around care.

What to Work On

- Drop in the number of calls but increase in assault and charges.
- This trend is still increasing- partnership helps provide the support.
- Program numbers and outcomes:
 - Clients served feel helped (positive feedback).
- Ending family violence is the priority:
 - Looking at funding opportunities for partnerships and opportunities.
 - Looking to create mixed teams for non-criminal response IPV calls, an officer with a social worker will be responsible for such calls.
 - Creating a framework that will have an optimistic lens when talking about change.
 - Welcome survivors into a future that is full of hope and well-being.

Lessons Learned

- Starting the conversation in your community - come and start the conversation; others will come when they are ready.
- Look at community data, what is happening, and what the inventory is.
- Find authentic ways to engage survivors. Incorporate those voices in the planning.
- IPV employees are very knowledgeable in providing services and support.
- Maintaining a continuum of relationships; developing a key foundational relationship understanding that all are here for a purpose.
- Training is very thorough - addressing all the possibilities that may come up.

Homelessness & Youth Mental Health (facilitated by Halton Region)

Speakers for the session on homelessness and youth mental health included **Daryl Kaytor**, Manager, Homelessness & Supportive Housing (Halton Region); **Melissa Pongracz**, Housing Programs Analyst (Halton Region); **Tiffany Dorman**, Supervisor, Housing Stability (Halton Region); **Kirsten Dougherty**, CEO (Reach Out Centre for Kids); and, **Michelle Whalen**, Director of Services (Reach Out Centre for Kids).

Key Messages

Homelessness Action Table

- The Action Table is working together to create a more coordinated approach to addressing homelessness.

- A framework has been created to strengthen how Halton Region and service providers identify and support individuals who are homeless or at risk of homelessness. This work includes:
 - A centralized model of intake and referral,
 - A common assessment tool and,
 - Greater connectivity to mental health services.
- As of 2021, over 151 chronically homeless households have received an offer of housing through the framework for coordinated access.

Youth Mental Health Action Table

- The Action Table for youth mental health was established to convene service and system partners to improve access to mental health services for children, youth and their families.
- Reach Out Centre for Kids (ROCK) and local providers of child and youth mental health services have established a new model of [access and system navigation](#) to make it easier for children, youth and their families to connect to the programs and services best suited to meet their needs.
- The Action Table has impacted the Halton community by leading a distinct change in how children, youth and their families, as well as service providers, experience referral, screening and connection to child and youth mental health services. There is now a clear system of entry and accessibility to child and youth mental health programs, and it is integrated within the larger system.
- More information is available at <https://www.halton.ca/The-Region/Projects-and-Initiatives/Community-Safety-and-Well-Being-in-Halton>

Additional Context

Youth Mental Health Action Table CSWB Action Table on Access and System Navigation

- Presented on Action Table work that has occurred in Halton.
- A framework for "one call, all access for child & youth mental health".
- Discussed key components of client flow.
 - Different pathways for different venues (direct, complex, etc.).
- Key Performance Indicators:
 - Average days in the queue - This decreases time in the queue, even with increased referrals (improvement in the sector).
 - Also looked at referral source trends to help target areas where they may need to do promotion and where they see the majority of referrals come from.
- Standardized Screening tool – CALOCUS (Child and Adolescent Level of Care Utilization System).

Housing & Homelessness CSWB Action Table

- Presented on Action Table work that has occurred in Halton.
- The work focused on a coordinated access approach – coordinated entry into the sector to streamline intake, assessment and vacancy fulfillment processes across the system for those experiencing homelessness.
 - Coordinated access improves inter-agency communication.
- Three essential elements are centralized access points, common screening, and prioritization referrals.
- There is a "no wrong door approach" where someone can enter the system at any agency involved and get navigated and connected to the appropriate housing supports.

- VI-SPDAT (Vulnerability Index - Service Prioritization Decision Assistance Tool) is the common assessment tool used. Allows prioritization around the type of support and intervention needed.
- Creation of one central by-name list and triage to the appropriate service.
- Also focuses on moving individuals who are actively homeless into housing.
- The impact can be measured by looking at:
 - The number of vacancies filled (increasing by year – in 2021, 61 vacancies were filled).
 - The client demographics – trends for families and individuals.
 - Chronic homelessness count (180 consecutive days).

Online Hate Reporting Tool (facilitated by City of Hamilton)

The speaker for the session on online hate reporting was **Kojo Dampney**, Executive Director (Hamilton Centre for Civic Inclusion).

Key Messages

- Needs to be a more consistent definition of hate incidents.
- There needs to be support for those who need it to use the tool who want to report – education, testing of the beta model with those who were consulted to build the tool but may not be able to do so due to experienced trauma.
- Important to ensure that reports are actioned, that support is offered to those who are reporting, and that information goes back to relevant organizations for action – education and policy change.

Ideas for Action

- Anonymous reporting should be considered.
- Education on the tool will be needed.
- Future connections or collaboration with police service reporting.

Additional Context

- Hamilton, like many areas, has had a history of hate, and police-reported hate data, which continues to show this is an issue in the community.
- Police reporting of hate incidents only captures hate-related crimes involving criminality, not the whole picture.
- Environmental scan of other platforms worldwide – Ireland, Vancouver, Edmonton.
- Canadian Race Relations Foundation funding was obtained for developing a community hate reporting tool.
- How does this tool fit with CSWB Plan?
 - The tool allows for a more complete picture of what is happening in the community – this is where incidents happen.
- Need to invest three times as much in preventative actions rather than incident response.
 - We spend so much on incident response, not the social aspect.
 - Only a couple of municipalities provide funding to work in CSWB.

Discussion Period

- The tool has not been released yet. It is still being developed and will be released this summer. Before releasing it, we will do beta testing with Hamilton Centre for Anti-Racism Centre. When we are doing the work, we involve the people who are impacted.
- How do we engage people through non-digital platforms?
 - Make sure the platform has different languages.
- How to support families in pursuing reporting who are experiencing significant trauma at the time?
 - In Hamilton, there are resources for support – Hamilton Centre for Civic Inclusion.
- A coalition of organizations – No Hate in the Hammer – will help educate the community on reporting. The platform will be able to access resources from it directly.
- Will data from the community reporting tool be sent to the police?
 - When people are reporting, because we are dealing with private information, we have to get consent. Going to ask through the reporting if they want their report to be sent to the police. If they choose yes, it will be forwarded to the police. Police will then investigate incidents of criminality.
- Hamilton Police also have an online reporting tool. Once an incident is submitted, the police decide how to investigate. The community platform will capture reports regardless of whether there is an investigation. Community reporting will provide greater context for policy review.
- The main challenge in this planning process is funding. Research and planning started in 2019 and then put on hold with funding opportunities for 2020.
- Currently do not have a number that you can report hate crimes, only focused on online tool development. Have been discussions on how telephone reporting would like. Something to consider in the future, as it is resource-intensive.
- The tool will be web-based on community consultation. URL needs to be very easy to remember and something everyone would know.
- Information obtained from reporting can be forwarded to owners of properties/spaces so businesses are aware and can action/plan.
- Is there an option in the tool to be anonymous?
 - Yes – there will be an option for anonymous reporting.
 - It will also include an option asking if they would like a follow-up and can pick which organization leads the follow-up.
- Need to use data and work with City and partners to action.
- Provincial discussions on the need for one definition of hate crime – hate crime, incident, occurrence. Each police service has its own definition.
- Please talk about how we redefine community safety and how we fund the plan.
- We know what the issues are. Make sure we talk about Indigenous issues and underserved communities.

6. Post-Event Survey Feedback

Following the event, participants were invited to complete a feedback survey. Thirty-six responses were received. Highlights of the feedback are presented below, with full results in **Appendix D**.

Overall Feedback

As shown below, **almost all respondents (92%) were "satisfied" or "very satisfied" with the event**. Respondents felt that the breakout discussion portion of the day contributed most to their learning.

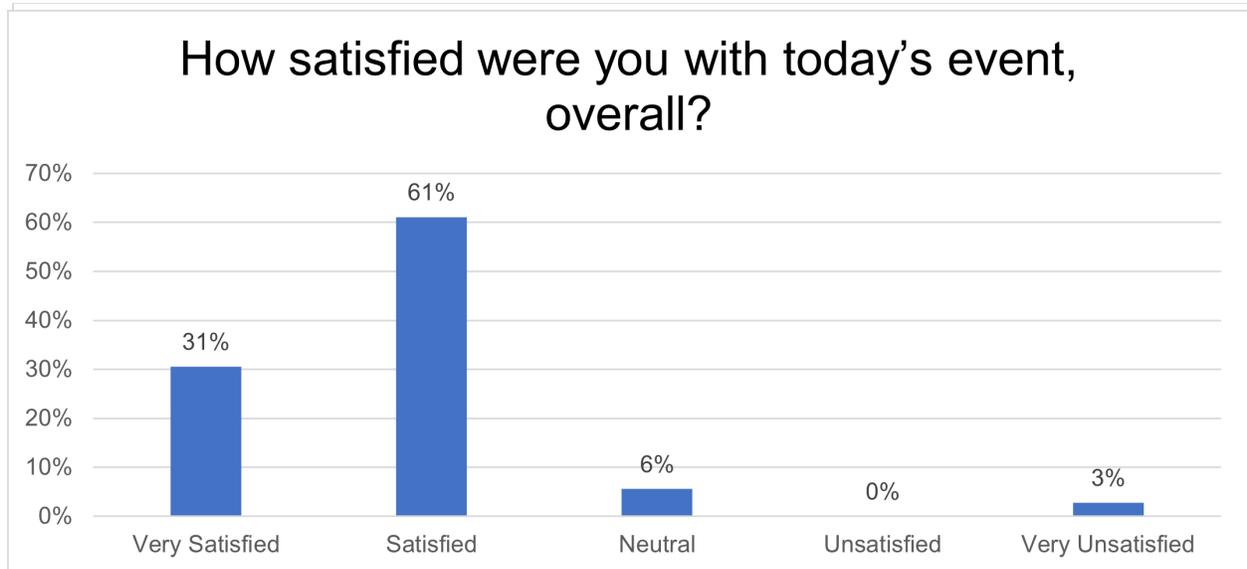


Figure 1: Overall satisfaction with the event (n=36)

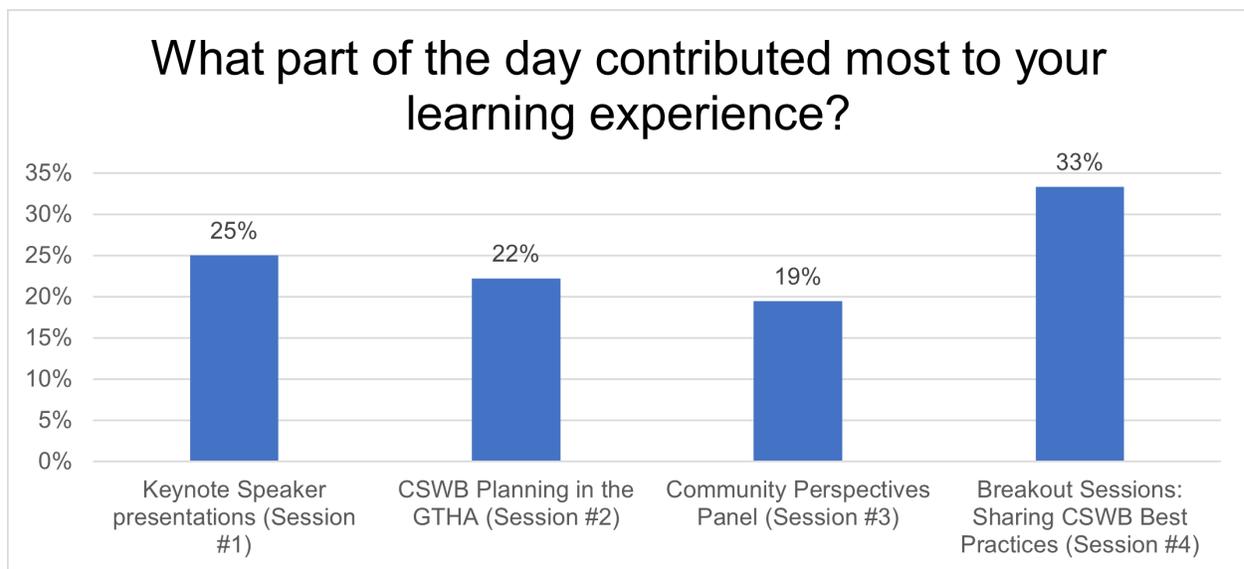


Figure 2: Greatest learning experience (n=36)

Respondents were asked to indicate what could be improved for future events. Highlights of feedback are provided below.

- Consider hosting the event in person.
- Provide more time to keynote presentations.
- Include presentations from the community and those with lived experience.
- Be mindful of the diversity of presenters.
- Include more opportunities for audience interaction and discussion.
- Consider increasing the length of the event.
- Facilitate networking amongst participants during and after the event.
- Interest in hearing more about implementation and lessons learned.

Additional Suggestions

Respondents were asked to suggest how GTHA governments and agencies can work collaboratively on common areas of concern. Highlights of feedback are provided below.

- Share data across governments and agencies; use common metrics and indicators.
- Continue providing forums to connect – including events like these and online resource hubs.
- Dedicate staff to communicating between agencies, government, partners and the community.
- Connect action tables across municipalities working on similar issues.

Specific suggestions for collaborating on gun violence are provided below.

- Share data and best practices across municipalities, including school boards, hospitals and police.
- Advocate for funding at the provincial and federal levels; share approaches for distributing funds to the community.
- Listen to those with lived experience on how to address gun violence.

Respondents were asked to share any other ideas for action. Feedback is summarized below.

- Increase public awareness of community safety and well-being.
- Support and facilitate community-led solutions.

7. Conclusion

The GTHA CSWB symposium brought together diverse stakeholders from across the province. This was an opportunity to make connections, learn from one another and start the conversation about areas of common concern. Collectively, we hope to continue the conversation as we strive toward action for improved community safety and well-being in our communities.

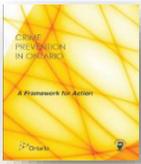
8. Appendices

- Appendix A – CSWB Planning Placemat
- Appendix B – Agenda
- Appendix C – Presentations
- Appendix D – Post-Event Survey Responses

Overview: Community Safety and Well-Being Planning

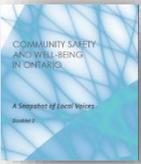
Ontario’s Modernized Approach to Community Safety and Well-Being (CSWB):

- The Ministry of the Solicitor General has worked with its inter-ministerial, policing, and community partners to develop a modernized approach to CSWB that addresses crime and complex social issues on a sustainable basis. This process involved three phases, with each phase resulting in the release of a booklet:



- **Phase I** – *Crime Prevention in Ontario: A Framework for Action* booklet (released in 2012). This booklet involved raising awareness, creating dialogue and promoting the benefits of proactive and preventative approaches to CSWB. The booklet is available at the following link:

<https://www.ontario.ca/document/crime-prevention-ontario-booklet-1-framework-action>



- **Phase II** – *Community Safety and Well-Being in Ontario: A Snapshot of Local Voices* booklet (released in 2014). This booklet highlights feedback from multi-sectoral stakeholders across the province regarding locally-identified challenges and promising practices related to CSWB. The booklet is available at the following link:

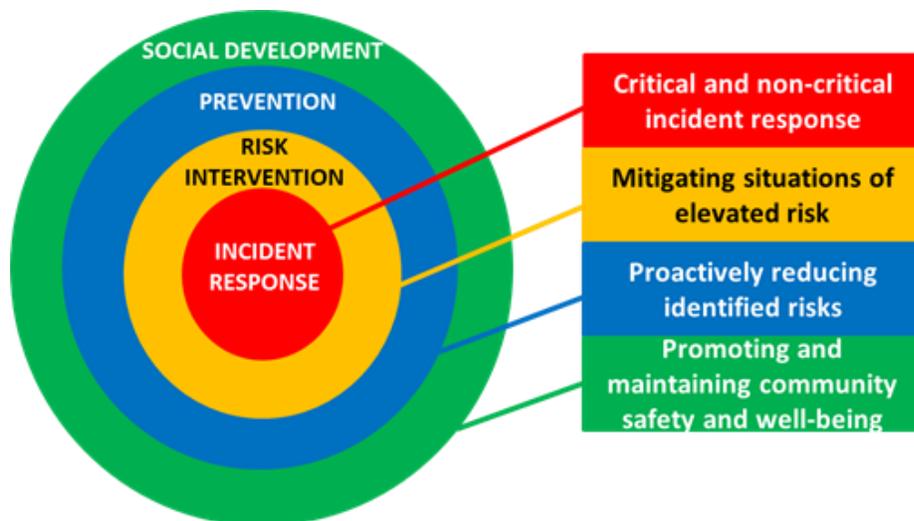
<https://www.ontario.ca/document/community-safety-and-well-being-ontario-booklet-2-snapshot-local-voices>



- **Phase III** – *Community Safety and Well-Being Planning: A Shared Commitment in Ontario* booklet (released in 2017 and updated in 2018). This booklet was developed as a resource to support municipalities, First Nations and their partners as they undertake the CSWB planning process. It includes the CSWB Planning Framework and a toolkit of practice guidance documents to assist communities as they develop and implement local plans. The booklet is available at the following link:

<https://www.ontario.ca/document/community-safety-and-well-being-planning-framework-booklet-3-shared-commitment-ontario>

- The **CSWB Planning Framework** encourages a more integrated approach to service delivery by working collaboratively across sectors to identify and address local priority risks to safety and well-being before they escalate and result in situations of crisis.
- CSWB planning also involves reducing the number of incidents that require enforcement by shifting to more proactive, preventative efforts that focus on the long-term benefits of social development and prevention and in the short-term, risk intervention.
- As part of this planning process, communities are encouraged to address local priority risks from every angle by planning collaboratively in these four zones:



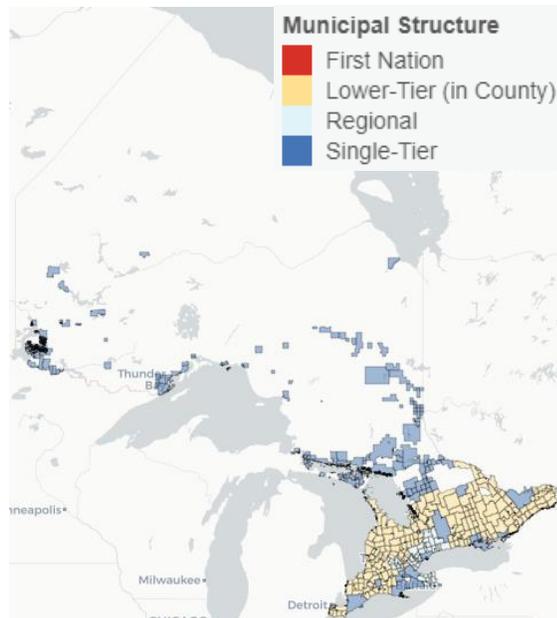
- **Incident Response (red zone):** This zone involves immediate and reactive responses to an incident that has already occurred, including critical (e.g., crime) and non-critical (e.g., school expulsion) incidents.
 - **Risk Intervention (yellow zone):** This zone involves multiple sectors working together to address situations where there is an elevated risk of harm (known as “acutely elevated risk of harm”) and connecting these individuals to the most appropriate resources in the community.
 - **Prevention (blue zone):** This zone involves proactively implementing evidence-based strategies, policies and/or programs to address locally-identified priority risks to safety and well-being before they escalate and result in crime and victimization.
 - **Social Development (green zone):** This zone involves using long-term, multi-sectoral approaches and investments to improve the social determinants of health and address complex social issues (e.g., poverty, homelessness, mental health), thereby reducing the probability of harm and victimization.
- Through this collaborative planning process, communities can ensure better coordination between local partners, not only through crisis response, but by developing and implementing proactive programs and strategies that address local priority risks and improve the social determinants of health (e.g., education, housing, health services); thus, alleviating the long-term reliance on the criminal justice system and the financial burden of crime on society.
 - This holistic approach will help ensure that the needs of vulnerable populations are being addressed by the most appropriate providers and ultimately, save lives and prevent crime, victimization, and suicide.

CSWB Planning – Legislative Requirements:

- Effective January 1, 2019, legislative amendments under the *Police Services Act* came into force which mandate every municipal council in Ontario to prepare and adopt a CSWB plan.
 - First Nation band councils are encouraged to engage in and undertake CSWB planning but are not required to do so by legislation.
- Municipalities had until July 1, 2021, to prepare and adopt their first CSWB plan, either individually or jointly with other municipalities and/or First Nation band councils.
- Municipalities must work in consultation with local police services/boards and various other sectors, including health/mental health, education, community/social services, and children/youth services, through the establishment of a multi-sectoral advisory committee.
- The CSWB planning provisions include the following additional requirements:
 - Conducting consultations with the advisory committee, members of the public and community organizations to identify local priority risks in the community including consulting with youth, members of racialized groups and of First Nations, Métis and Inuit communities, as well as the organizations that represent the interests of these groups.
 - Utilizing data from multiple sources to identify local risks in the community.
 - Developing a plan that identifies and prioritizes risk factors, strategies to reduce the prioritized risk factors, and measurable outcomes
 - Publishing the completed plan within 30 days of adoption (both online and in print)
- The relevant legislation can be found at the following links:
 - *Police Services Act, 1990:*
https://www.ontario.ca/laws/statute/90p15?_ga=2.209888402.646991963.1588706531-1141746741.1567689526
 - *Coronavirus (COVID-19) Support and Protection Act, 2020:*
<https://www.ontario.ca/laws/statute/s20006>

Status of CSWB Planning in Ontario:

- Since the legislative deadline for CSWB planning, the ministry has been tracking the status of CSWB plans across the province through various channels (e.g., news/media, stakeholder communications, municipal websites, etc.).
 - Note: there are currently no legislative requirements for municipalities to inform the ministry of the completion or progress on the development of their CSWB plans.
- As of April 30, 2022, of the 372 municipalities legislatively required to prepare and adopt a CSWB plan, the ministry is aware of **99 per cent (369 municipalities)** that have completed plans or are in progress (including regional/joint plans). This includes:



- **74 completed CSWB plans** – representing 260 participating municipalities or **69 per cent** of all required municipalities, covering 85 percent of the total Ontario population.
- **29 CSWB plans in progress** – representing 109 participating municipalities or **30 per cent** of all required municipalities, covering 13 percent of the total Ontario population.

- The top 10 priority risks that have been identified by municipalities in their communities include:

1.  Mental Health (85% of plans)
2.  Substance Use and Addictions (82% of plans)
3.  Housing and Homelessness (77% of plans)
4.  Poverty and Income (41% of plans)
5.  Crime and Crime Prevention (39% of plans)
6.  Domestic Violence and Sexual Assault (25% of plans)
7.  Employment (24% of plans)
8.  Community Safety (20% of plans)
9.  Health and Well-Being (17% of plans)
10.  Transportation (16% of plans)

- Municipalities, who have not already done so, are encouraged to submit their completed CSWB plan or provide a status update on their CSWB planning process to the ministry via the following email address, SOLGEN.Correspondence@ontario.ca.
- For more information on CSWB planning or additional resources to support the planning process, please email SafetyPlanning@ontario.ca.

GTHA CSWB Symposium: Agenda

Welcome & Keynote Presentations (9:00am – 10:00am)

Time	Topic	Format	Speakers
9:00 – 9:10	Welcome and introduction of keynote speakers	Welcome, land acknowledgement, introductions	Susan Hall , LURA Consulting
9:10 – 9:25	Community Safety & Well-Being Legislation	Presentation	Matt Torigian , Distinguished Fellow, Munk School of Global Affairs
9:25 – 9:40	Indigenous Perspective on Community Safety & Well-Being	Presentation	Lindsay Kretschmer , Executive Director, Aboriginal Legal Services
9:40 – 9:55	Confronting Anti-Black Racism Action Plan and Community Safety & Well-Being Plans	Presentation	Anthony N. Morgan , Manager of the City of Toronto's Confronting Anti-Black Racism (CABR) Unit
9:55 – 10:00	Closing & Next Steps	Directions for joining next session	Susan Hall , LURA Consulting

[Break 10:00am – 10:15am]

CSWB Planning in the GTHA (10:15am – 11:30am)

Time	Topic	Format	Speakers
10:15 – 10:25	Welcome and introduction of session speakers	Welcome, introductions	Michelle Dagnino (LURA)
10:25 – 10:35	CSWB Planning in Hamilton	Presentation	Jenn Hohol , Manager, Human Service Integration, Strategy & Quality Improvement (City of Hamilton)
10:35 – 10:45	CSWB Planning in Halton Region		Kendra Habing , Decision Support Advisor – CSWB Initiatives (Halton Region)
10:45 – 10:55	CSWB Planning in Peel Region		Mary Boushel , Manager, Strategic Initiatives, Health Services (Peel Region)
10:55 – 11:05	CSWB Planning in Toronto		Scott McKean , Manager of SafeTO. Community Safety and Well-Being Planning (City of Toronto)
11:05 – 11:15	CSWB Planning in York Region		Sue Smythe , Program Manager, Community Investments (York Region) & Nathan Stern , Program Manager, Community Development (York Region)
11:15 – 11:25	CSWB Planning in Durham Region		Kiersten Allore-Engel , Manager of Community Safety and Well-being Diversity, Equity and Inclusion Division (Durham Region)
11:25 – 11:30	Closing & Next Steps	Directions for joining next session	Michelle Dagnino (LURA)

[Lunch 11:30am – 12:30pm]

Community Perspectives Panel | Gun Violence across the GTHA (12:30pm – 1:45pm)

Time	Topic	Format	Speakers
12:30 – 12:35	Welcome and introduction of session speakers	Welcome, introductions	Susan Hall (LURA)
12:35 – 12:45	Policing perspective	Panel of service providers/those with lived experience	Toronto Police Service , Randy Carter Staff Superintendent (4219)
12:45 – 12:55	Changing the story – working together to empower the potential		Nicola Crowe , Executive Director (Durham Family Court Clinic)
12:55 – 1:05	Grassroots – Community Driven Gun Violence Prevention		Devon Jones, Founding Director (Youth Association for Academics, Athletics and Character Education Y.A.A.A.C.E)
1:05 – 1:10	City of Toronto – Community Safety and Well-being Unit		Scerena Officer , Manager, Community Safety & Well-being Unit (City of Toronto)
1:10 – 1:15	Positive Youth Development		Jesse Williamson , Project Manager, Strategic Youth Initiative (City of Hamilton) Erin Goetz , Youth Navigator, Xperience Annex (City of Hamilton)
1:15 – 1:20	Community Safety and Well-being Planning – York Region		Nathan Stern , Program Manager, Community Development (York Region)
1:20 – 1:40	Panel Q&A	Discussion	LURA to facilitate <ul style="list-style-type: none"> • <u>From your perspective - How can municipalities and regions collaborate better across jurisdiction?</u> • <u>What are the platforms and networks that we could be using or developing?</u>
1:40 – 1:45	Closing & Next Steps	Directions for joining next session	Susan Hall (LURA)

[Break 1:45pm –2:00pm]

Breakout Sessions: Sharing CSWB Best Practices (2:00pm – 3:00pm)

Time	Topic	Format	Lead Facilitator/Speakers
2:00 – 2:05	Welcome and introduction	Welcome, introductions	Michelle Dagnino (LURA)
2:05 – 3:00	Human Trafficking (Durham Region)	Six (6) concurrent breakout room presentations and discussions	Kiersten Allore-Engel , Manager of Community Safety and Well-being Diversity, Equity and Inclusion Division (Durham Region) Jocelyn Siciliano , Supervisor and Anti-Human Trafficking Advocate (Durham Region) Karly Church , Human Trafficking Crisis Intervention Counselor (Victim Services of Durham Region)
	Data and Decision Support (York Region)		Anna Malenkov , Program Manager, Data Services (York Region)
	Community-Based Crisis Response (City of Toronto)		Mohamed Shuriye , Manager Policing Reform (City of Toronto) Andrea Westbrook , Social Worker, (Gerstein Centre)
	Family Violence (Peel Region)		Lisa Hewison , Inspector, Crimes Against Persons (Peel Regional Police) Shelina Jeshani , Director of Strategic Partnerships and Collaborations (Catholic Family Services Peel-Dufferin)
	Homelessness & Youth Mental Health (Halton Region)		Daryl Kaytor , Manager, Homelessness & Supportive Housing (Halton Region) Melissa Pongracz , Housing Programs Analyst (Halton Region) Tiffany Dorman , Supervisor, Housing Stability (Halton Region) Kirsten Dougherty , CEO (Reach Out Centre for Kids) Michelle Whalen , Director of Services (Reach Out Centre for Kids)
Online Hate Reporting Tool (City of Hamilton)		Kojo Dampney , Executive Director (Hamilton Centre for Civic Inclusion)	

Wrap-Up & Key Messages (3:00pm – 3:30pm)

Time	Topic	Format	Lead Facilitator/Speakers
3:00 – 3:15	Report-Back	Verbal report-back summary	Invite each breakout facilitator to do a quick 1-2 minute report back <ul style="list-style-type: none"> • Human Trafficking (Durham Region) • Data and Decision Support (York Region) • Community-Based Crisis Response (City of Toronto) • Family Violence (Peel Region) • Homelessness & Youth Mental Health (Halton Region) Online Hate Reporting Tool (City of Hamilton)
3:15 – 3:25	Event Recap	Provide a high-level overview of the day	Susan Hall (LURA)
3:25 – 3:30	Symposium Closing	THANK YOU!	Susan Hall (LURA)

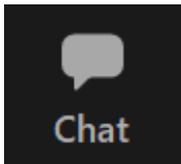
Greater Toronto and Hamilton Area

- Community Safety and Well-Being
- Virtual Symposium Friday, June 10, 2022



Session #2

Community Safety & Well- being Planning in the GTHA



Use the chat button to open the chat pane and type reflections, experiences or comments.



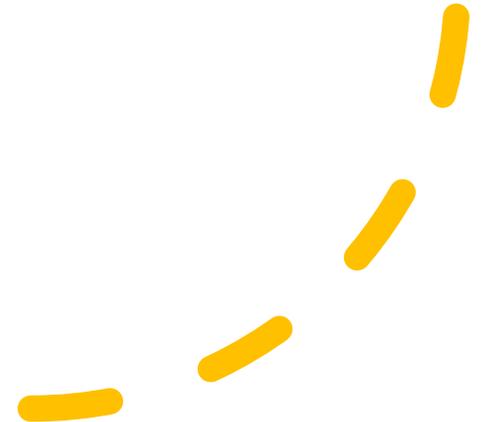


Jenn Hohol

Manager, Human Service Integration, Strategy
and Continuous Improvement

Panelist:

CSWB Planning in the City of Hamilton



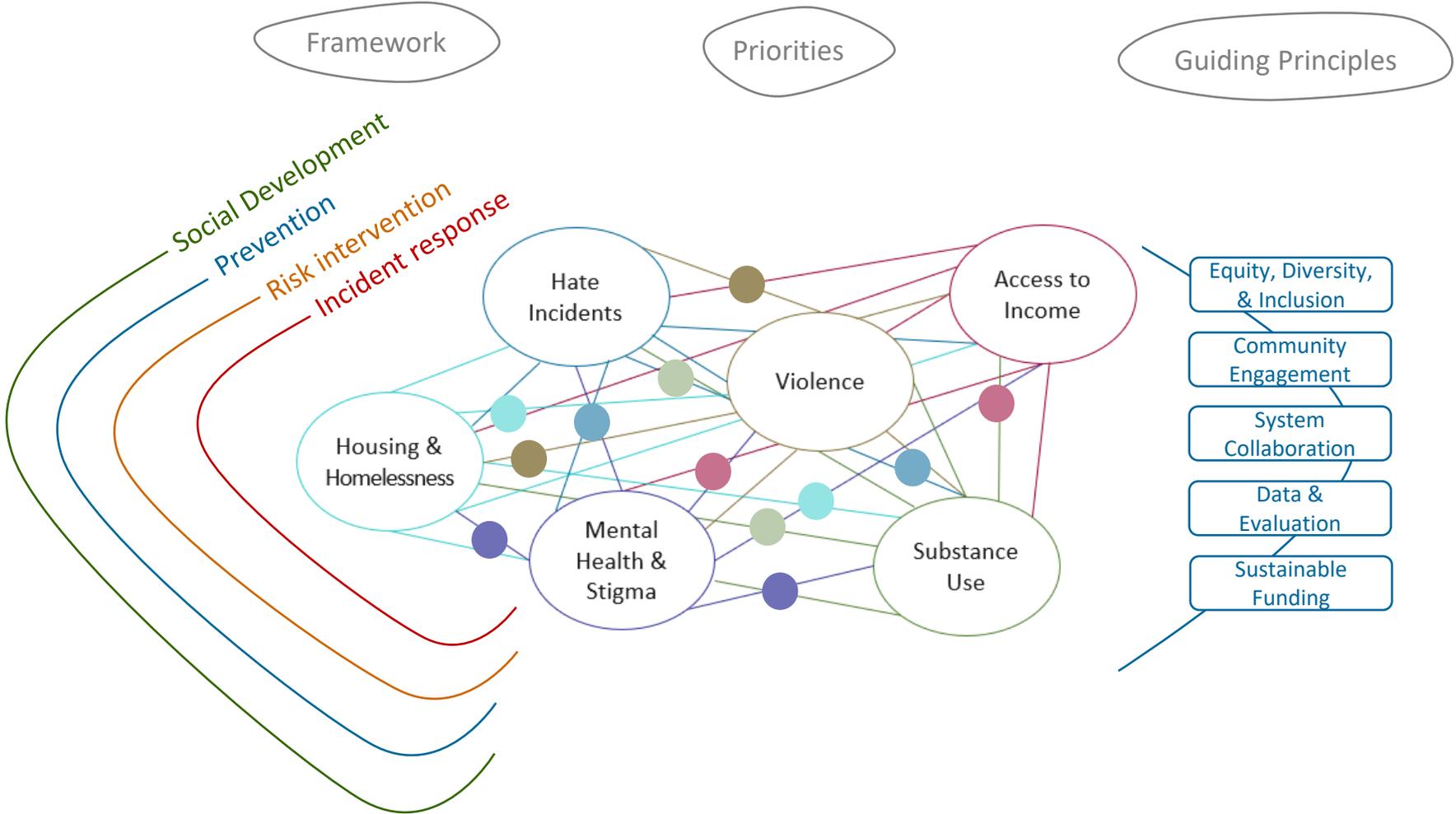


HAMILTON'S
**COMMUNITY SAFETY
& WELL-BEING PLAN**





Overall aim: Ensure all residents in the community feel safe, have a sense of belonging, and can meet their needs for education, health care, food, housing, income and social and cultural expression.





Kendra Habing

Decision Support Advisor – CSWB Initiatives

Panelist:

CSWB Planning in Halton Region



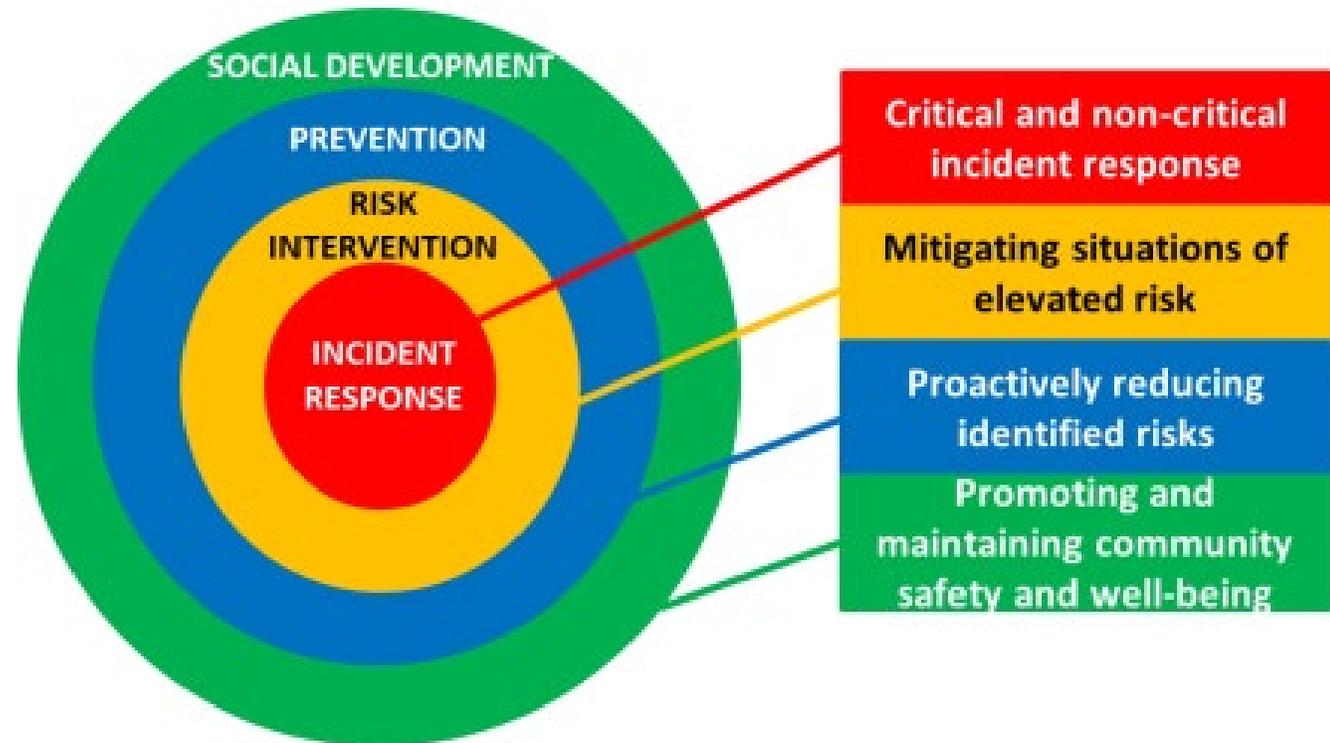


Community Safety & Well-Being in Halton

Community
Safety &
Well-Being
in Halton

Background on **Community Safety and Well-Being (CSWB)** Planning

- Emerged from policing sector – a more proactive and holistic approach
- Based on multi-sector collaboration and collective impact
- Provincial mandate for municipalities to adopt a CSWB plan by July 1, 2021 (Police Services Act)



CSWB in Halton

Community
Safety &
Well-Being
in Halton

Community Safety & Well-Being in Halton

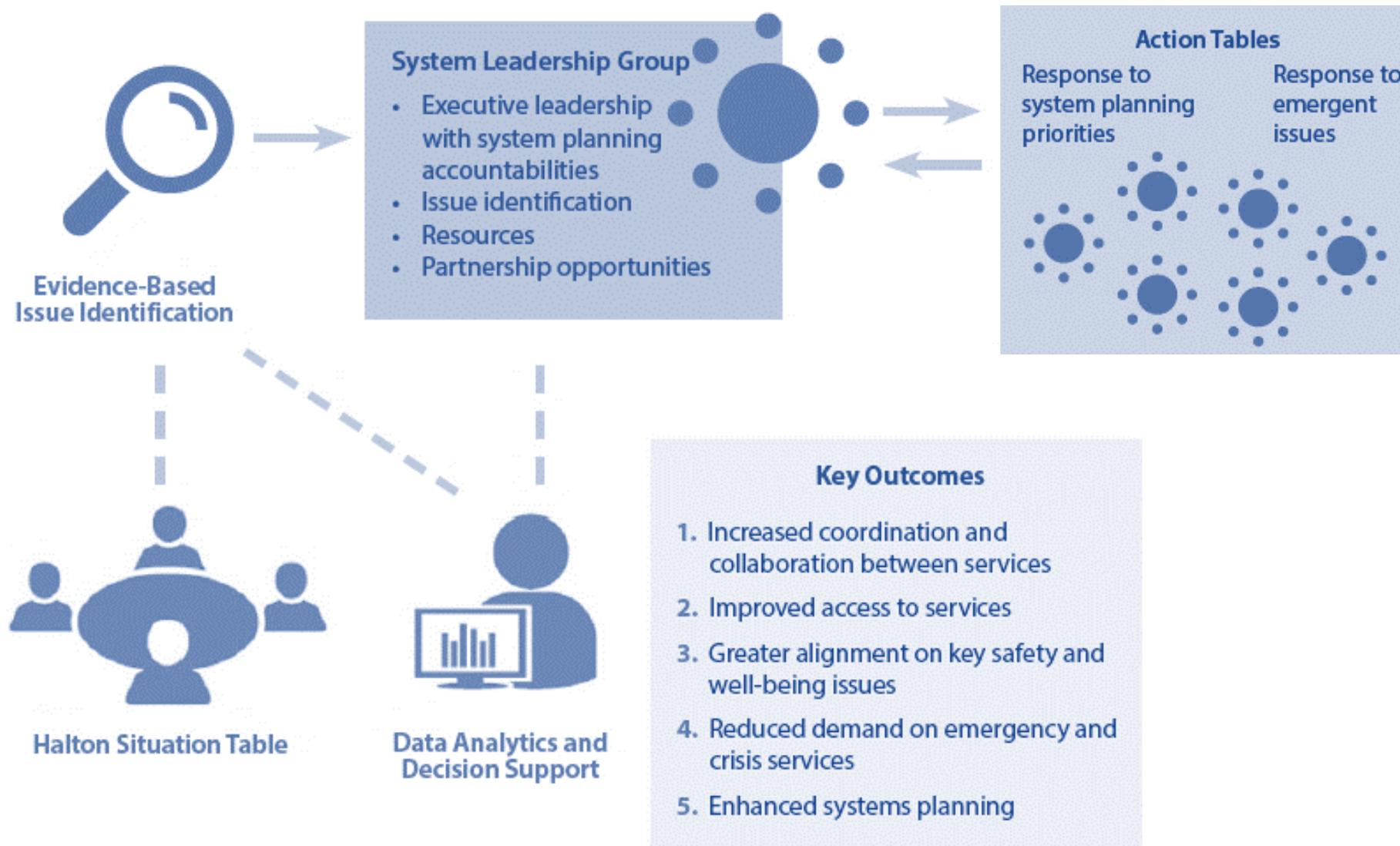


A Plan for Collaboration & Action



- Early adopters – plan approved by Regional Council and Police Services Board in Nov. 2017
- Plan informed by a robust consultation process
- Built on a made-in Halton model for collaboration, planning and action
- Ongoing issue identification
- Led by System Leadership Group
- Respond to priorities through Action Tables

The Halton Model



CSWB Action Tables

Community
Safety &
Well-Being
in Halton

- Intimate Partner Violence
- Crisis Mental Health Services
- Dual Diagnosis
- Food security
- Homelessness
- Older Adult Isolation
- Youth Transitioning Out of Care
- Opioids
- Alcohol
- Youth Mental Health
- COVID-19 Coordination
- Sexual Assault



Action Table Highlights



New model of access and system navigation (ASN) for child and youth mental health sector established with leadership from Reach Out Centre for Kids (ROCK)



Coordinated access framework established to strengthen supports for homeless residents – 100+ offers of housing through new framework



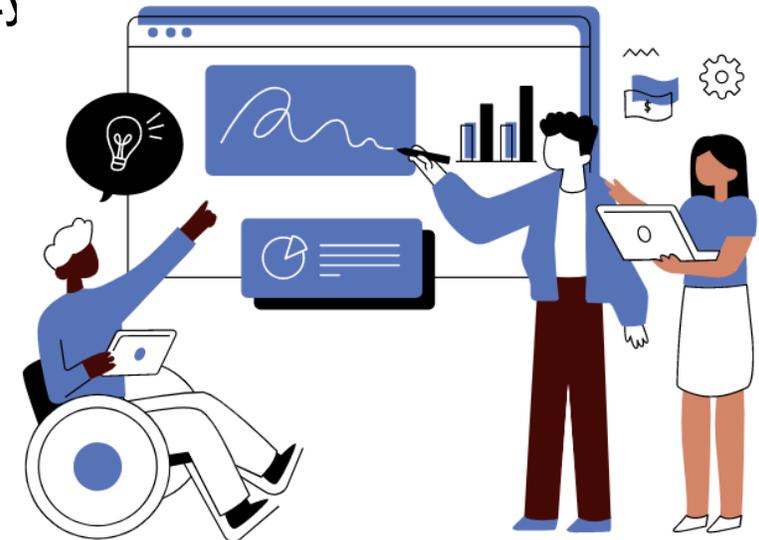
Recommendations to enhance support to survivors of sexual assault adopted by Halton Police – training provided to more than 800 front line officers



Pilot connecting youth exiting the care of Halton Children's Aid Society to education training, employment and mentorship completed – 26 youth supported

CSWB Data and Decision Support

- Ensure decisions are based in evidence and local context
- Promote a broader climate of data and information sharing between partners
- Identify evidence of emerging issues and trends that may impact the safety and/or well-being of the Halton community in issue identification
- Develop and monitor indicators of CSWB
- Measure outcomes of the CSWB initiative through working with Action Tables



CSWB Population Level Indicator Framework

Community
Safety &
Well-Being
in Halton

The indicator framework is organized into three domains: **Health**, **Safety** and **Community Well-Being**.

Health



A community where everyone is supported to reach both physical and mental well-being.

Safety

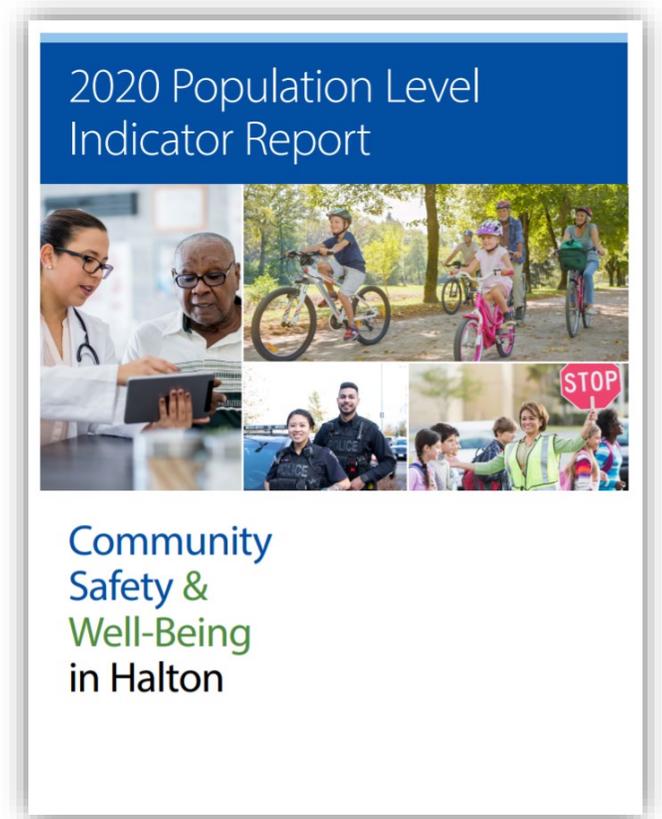


A community where everyone can go about their daily activities without risk or fear of harm.

Community Well-being



A community where everyone is connected and engaged, with a vibrant, healthy environment and strong social supports.



Available at [Halton.ca](https://www.halton.ca)

Impact of Action Tables

Desired Outcomes

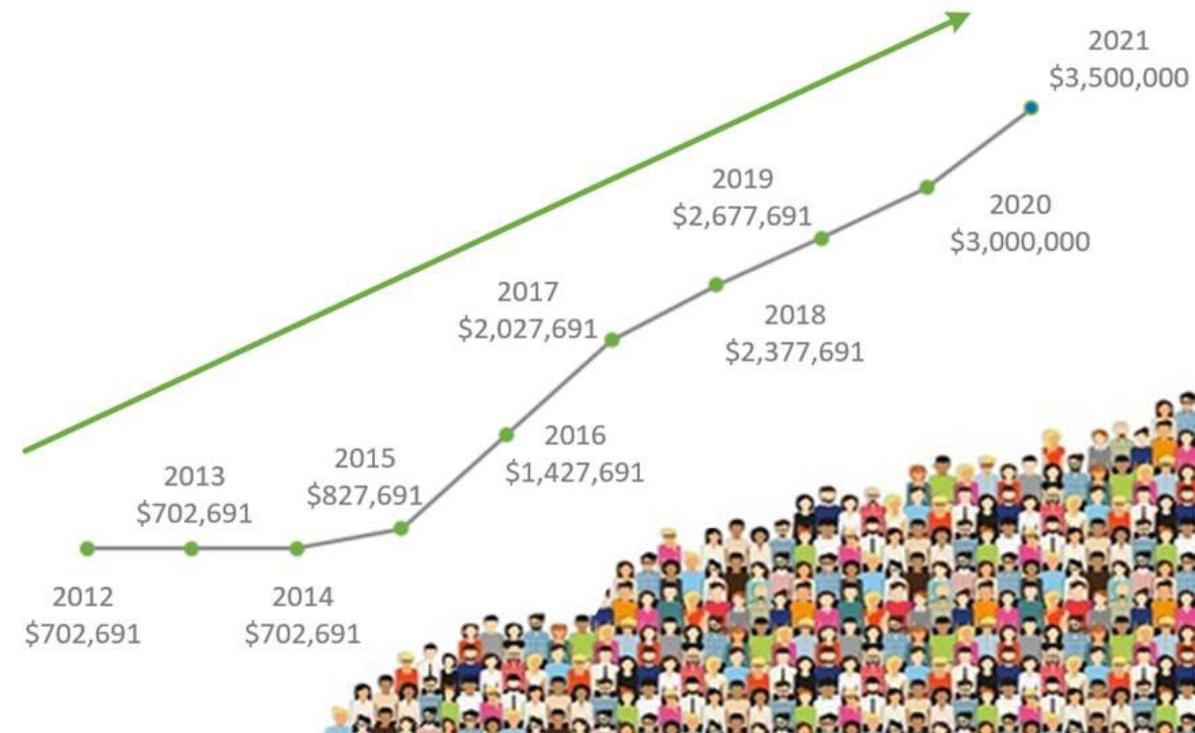
- What were the desired impact, results and outcomes?
- What did you set out to achieve?

Measured impact *(indicators, performance measures)*

- To what extent and in what ways did the Action Table impact the Halton community?
- How do you know you have achieved your desired outcomes/results?
- What progress was made (key indicators)?
- How much did you do? How well did you do it? Is anyone better off?
- How and why the initiative is making progress (evaluation)?

About the Halton Region Community Investment Fund (HRCIF)

- Enhances the health, safety and well-being of Halton residents by providing funding to human service programs and initiatives
- Supports individuals vulnerable to negative health and social outcome
- Invests \$3.75 million annually in sin and multi-year grants
- Tool to respond to issues emerging from CSWB planning



Lessons Learned

- Build on existing strengths and assets in your local community
- Fostering strong relationships with community partners is key
- Use local data and evidence to inform innovative solutions
- Dedicated staff resources are essential
- Focus on the priority issues and develop real solutions
- Requires commitment from senior leadership
 - There is a continued role for Halton Regional Council and Halton Police Board as approvers, supporters and champions
- Established a more cohesive, less siloed human service system – leveraged beyond the legislation



Thank you

Kendra Habing, Decision Support Advisor – CSWB Initiatives
Kendra.Habing@Halton.ca

Community
Safety &
Well-Being
in Halton

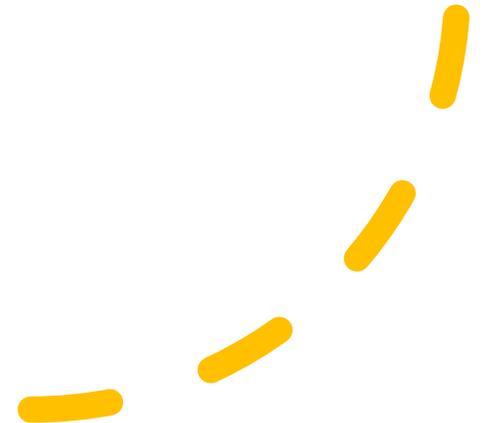


Mary Boushel

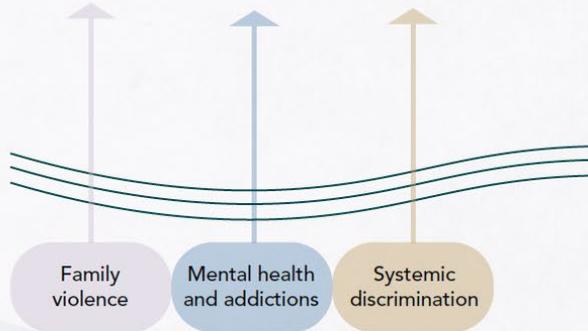
Manager, Strategic Initiatives, Health Services

Panelist:

CSWB Planning in the Region of Peel



Peel's Community Safety and Well-being Plan 2020-2024



Peel's Community Safety and Well-being Plan 2020-2024

Mary Boushel

Manager, Strategic Initiatives

Health Services

Region of Peel



Peel's **Community Safety** and **Well-being Plan** 2020-2024

Vision: Peel is a safe, inclusive and connected community where all residents thrive.

Mission: We will work together to ensure access to services and supports that advance safety, connectedness and well-being for all Peel residents.

Values:

- Inclusive
- Equitable
- Courageous
- Accountable
- Transparent
- Kind



Safety is:

"Having a safe space to talk to someone."

"Having the ability to be yourself and express yourself freely (e.g., your culture, religion)."

"Being free from harassment."

"Feeling safe with authority."

"Having access to supports to help you feel safe and secure."

Well-being is:

"Being able to accomplish your goals and contribute to society."

"Meeting your own needs without burning yourself out."

"Having a sense of belonging."

"Feeling connected to your community."

"Finding healthy ways to cope."



4-year Plan

Family Violence

**Mental Health &
Addictions**

Systemic Discrimination

Youth

Goals for the 4-year plan within each area of focus
Measures of success for each area of focus

Enablers: Communication and Engagement, Data, Advocacy

Approaches: Equity lens, Social Determinants of Health, Collective Impact, Place-based

Goals



Peel's Community Safety
and Well-being Plan 2020-2024

Family Violence

1. Create and strengthen Peel's pathways to safety
2. Increase awareness and public education of family violence

Mental Health & Addictions

1. Promote mental wellness and positive relationships among youth and families
2. Improve access to mental health and addictions (MHA) services and supports for youth by simplifying pathways and coordinating efforts

Systemic Discrimination

1. Publicly review, develop and sustain anti-oppressive and equity practices and policies in Peel
2. Implement effective data practices in order to assess impact and respond to inequities as they emerge

Responding to Pandemic Impacts

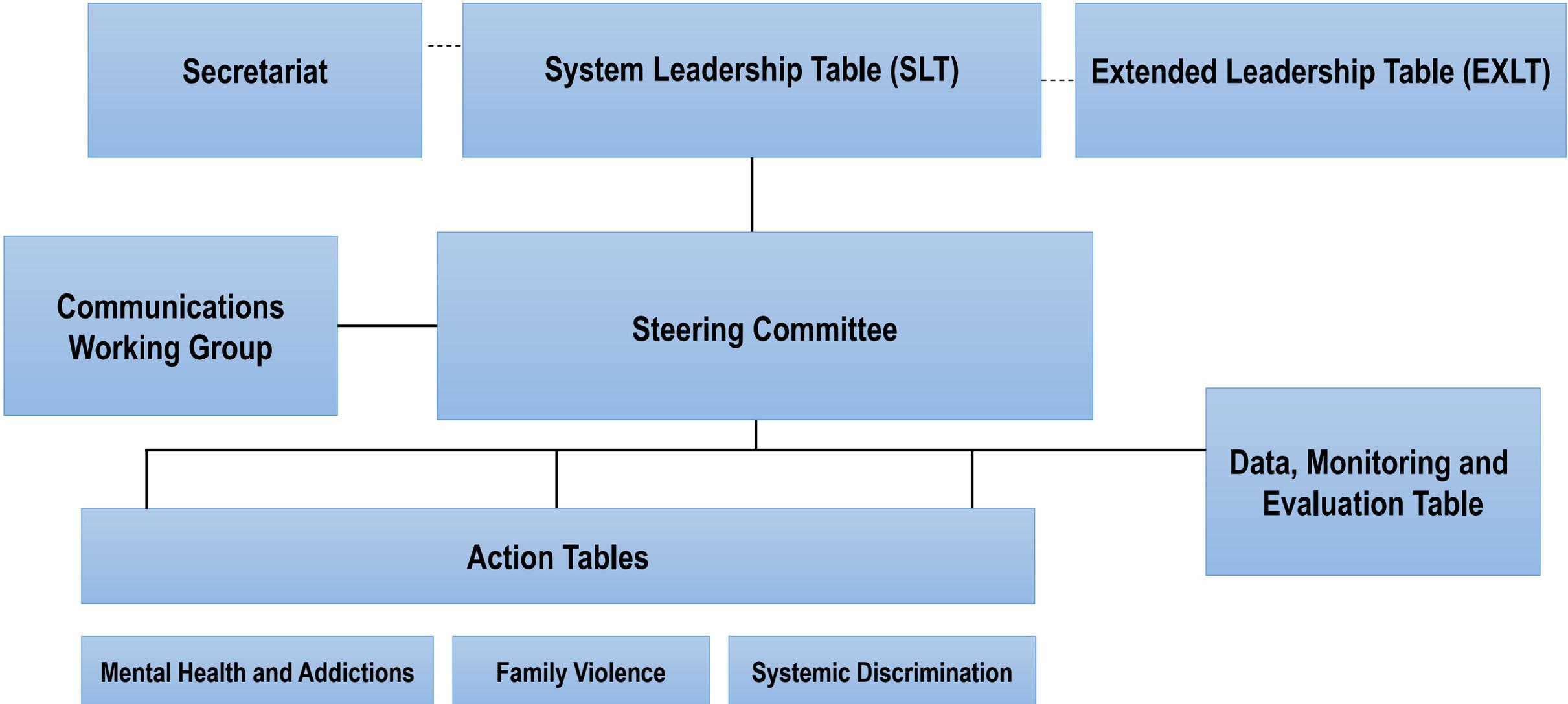
Exacerbated disproportionate impacts and existing inequities

Reinforced need to address systemic barriers in accessing services and supports

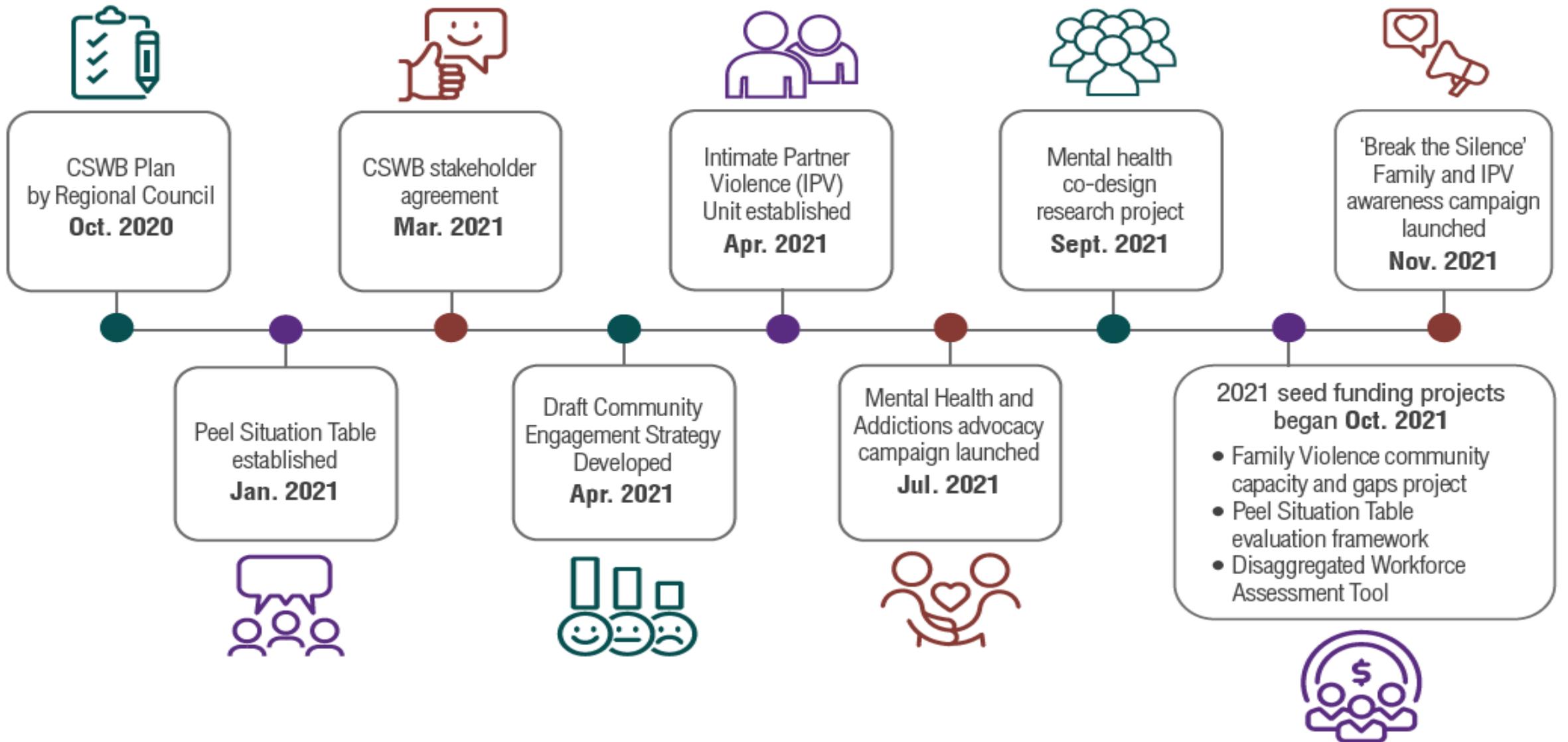
Must apply equity lens to inform recovery planning and service delivery



Governance Structure



2021 key milestones



Break the silence.

Share
your
story.

**You are not alone.
We are here to listen.
We are here to help.**

If you are experiencing abuse,

call 905-403-0864 
or **1-855-676-8515** 

peelregion.ca/BreakTheSilence

This campaign was developed in collaboration with community partners.

 **Region
of Peel**
working with you

Break the silence.

No excuse
for abuse.

**Violence against
women can take
many forms.**

Learn how to
identify the early
signs of abuse.

If you think someone is
experiencing abuse, visit
peelregion.ca/BreakTheSilence



This campaign was
developed in collaboration
with community partners.

 **Region
of Peel**
working with you

Moving Forward

- Reflections
 - Community capacity
 - Advocacy
 - Alignment of existing initiatives, funding and systems supports
- Next steps
 - Implementation of year 2 action table activities
 - Evaluation plan
 - Community engagement

Thank you

Visit peelregion.ca/cswb



**Peel's Community Safety
and Well-being Plan 2020-2024**



Scott McKean

Manager of SafeTO

Community Safety and Well-Being Planning

Panelist:

CSWB Planning in the City of Toronto



SafeTO:

Toronto's Ten-Year Community Safety and Well-Being Plan

July 2021



SafeTO is a **comprehensive** that requires a fundamental shift in thinking and acting to achieve transformative change.

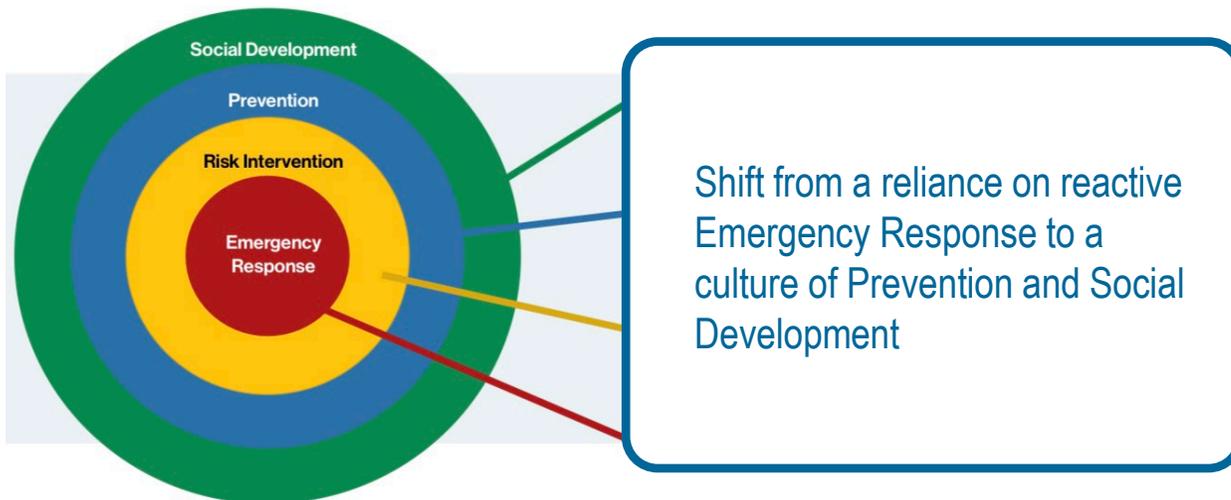
SafeTO provides a **roadmap** for how the City and social systems that serve Torontonians, such as community services, healthcare systems, education systems, justice systems, police and business, can **work collaboratively across different sectors and across governments** to support community safety and well-being.

SafeTO will drive **26 priority actions** across **seven strategic goals** over the next 10 years

From Legislative Direction to Council Commitment

2019 Community Safety & Well-Being Planning Framework

Community Safety and Policing Act, 2019, all Ontario municipalities are mandated to prepare and adopt a Community Safety and Well-Being Plan - a long-term tool to address root causes of crime, social disorder, health inequities, and other key social priorities, with shared goals identified through multi-sectoral partnerships



2021 2022 Toronto City Council Approval



“A different type of Community Safety and Wellbeing Plan for a different time” – *Mayor John Tory*

“The Toronto Police Service has never been more committed to meaningful community engagement and cross-sector collaboration with intervention and prevention as our top priorities. This aligns with the community safety mission of SafeTO” – *Chief Ramer*

ACTION 1.3

Embed the Community Crisis Support Service as a Well-Resourced, First Response Service City-Wide

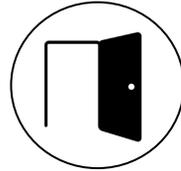


Toronto Community Crisis Service

- A new Toronto-made approach to responding to people in crisis that focuses on health, prevention and well-being
- An alternative to police enforcement, creating a community-based, client centred, trauma-informed response

ACTION 2.1

Develop a Comprehensive Multi-Sector Gun Violence Reduction Plan



Toronto Office to Prevent Gun Violence

- A new office to coordinate gun violence prevention and intervention initiatives, integrate investments and empower locally driven community-led approaches

ACTION 2.3

Strengthen Community Crisis Response Protocols to Better Support Victims and Communities Impacted by Violence



Community Crisis Response Program

- Enhance capacity the City's Community Crisis Response Program to provide 24/7 response to violence traumatic incidents
- Enhance community-led, trauma informed, culturally responsive response and recovery supports

ACTION

Develop a Comprehensive Strategy to Across Multiple Institutions



Toronto Collaborative Analytics Lab

A multi-sector data centre to enhance the collation, analysis, and use of data from across sectors to inform real-time decision making and monitoring of safety efforts

RESEARCH STUDY:

A Community Informed Approach to Characterizing Community Wellbeing

June 10th, 2022



We Want to Hear From You!



Focus group interviews:

- **Timing:** 1-hr duration, scheduled June/July
- **Location:** Virtual, over Zoom
- **Compensation:** \$25 gift card

Interested in participating?

(...or know of others who may be?)

- Learn more about the study:
<https://pophealthanalytics.com/community-wellbeing-consults/>
- Sign-up:
<https://redcap.utoronto.ca/surveys/?s=ETT79HRHDY8HMAYX>



SafeTO:

Toronto's **Ten-Year Community Safety and Well-Being Plan**

Scott Mckean

Manager, Community Safety & Well-being Planning,
SafeTO and Justice Centres

Scott.Mckean@Toronto.ca

Appendices

- SafeTO Goals and Actions
- Toronto Community Crisis Service Slides
- Toronto Office to Prevent Gun Violence overview
- Enhanced Community Response and Recovery
- Multi-sector Data Centre Overview
- Inter-governmental Approach



Sue Smythe

Program Manager, Community Investments

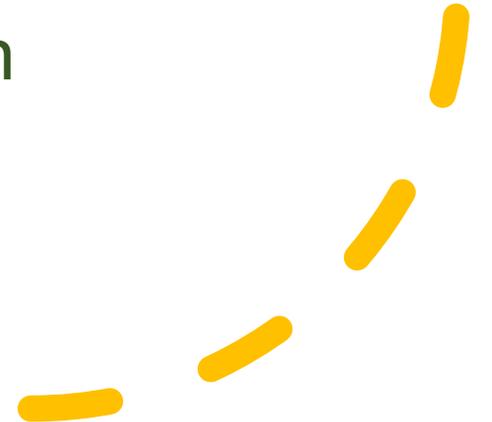
Nathan Stern

Program Manager, Community Development



Panelists:

CSWB Planning in York Region



COMMUNITY SAFETY AND WELL-BEING PLAN FOR YORK REGION

Presented to:
GTHA Community Safety & Well-being Symposium 2022

Sue Smythe
Program Manager
Community Investments

Nathan Stern
Program Manager
Community Development

June 10, 2022



COMMUNITY SAFETY AND WELL-BEING PLAN

A collaborative Plan that focuses on enhancing safety and well-being through proactive, targeted, community-driven actions

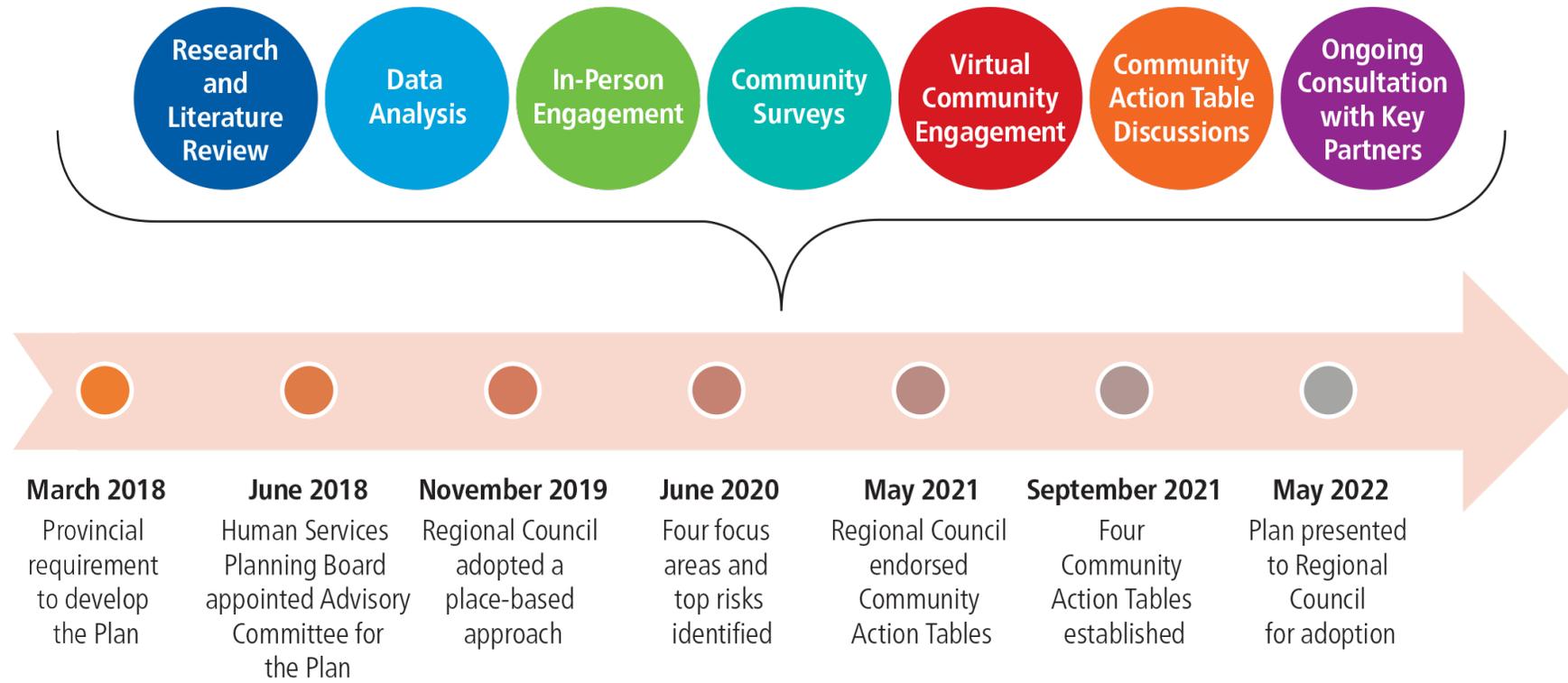


Community Safety and
Well-Being Plan for York Region
2022 to 2026

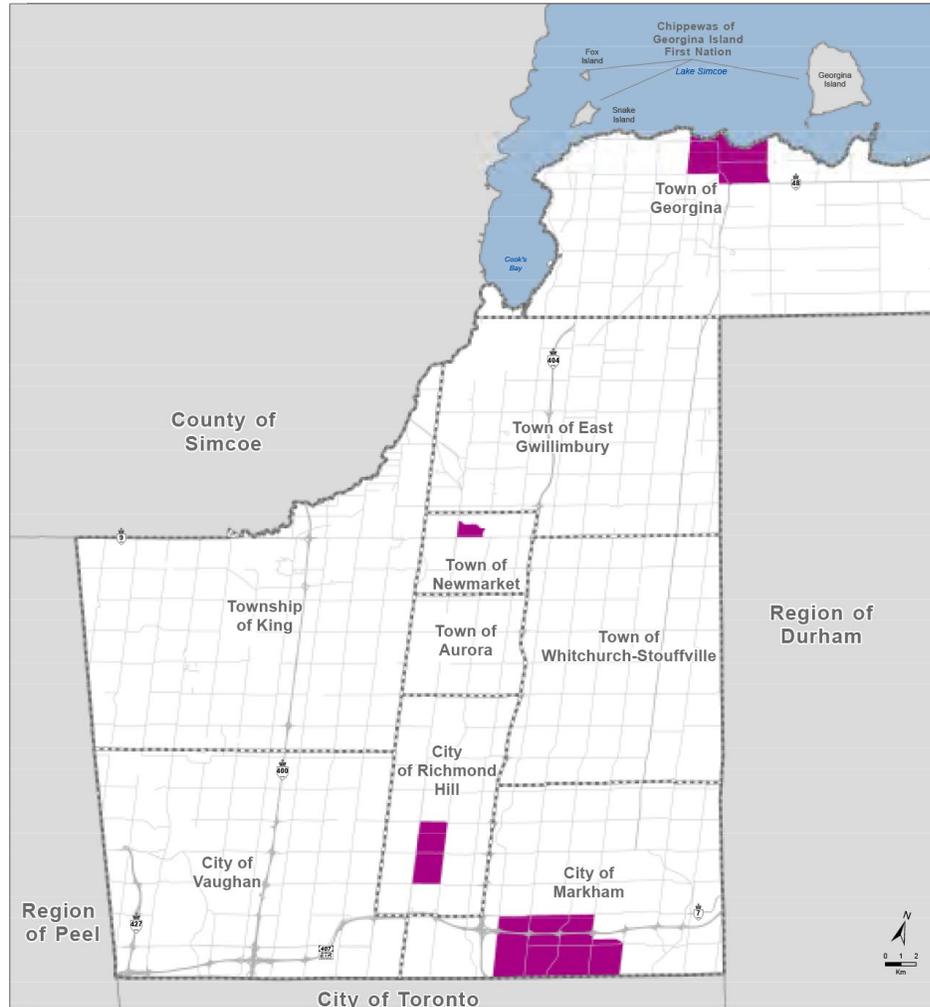


OUR PATH

Figure 1.2: Development of the Community Safety and Well-Being Plan, including key milestones



OUR PLACE-BASED APPROACH: FOCUS AREAS AND PRIORITY RISKS



- 4 focus areas
- 3 priority risks
 - Mental Well-Being
 - Housing Stability
 - Economic Stability

PROACTIVE, TARGETED, COMMUNITY-DRIVEN



Community Safety and Well-Being Plan for York Region york.ca/communityaction

BUILD COMMUNITY CAPACITY, LEVERAGE STRENGTHS

STRATEGIC OBJECTIVE 1

Bringing partners together and strengthening community capacity

KEY ACTIONS

- 
- Strengthen place-based community development by establishing Community Action Tables
 - Support and invest in Community Action Tables to design, develop and deliver local initiatives with collective impact

STRATEGIC OBJECTIVE 2

Leveraging strengths, and bridging gaps where they exist

KEY ACTIONS

- 
- Develop and maintain asset maps to identify services and programs to address priority risks
 - Work with partners to identify, promote and help strengthen service access and navigation tools
 - Establish, support and leverage multi-sectoral planning and response tables to better identify, direct and improve coordination and alignment of services and actions
 - Leverage existing plans and programs, testing new services and adapting them as required, and introducing new actions if needed to address gaps

COMMUNITY ACTION TABLES

- Community-driven
- Collective impact
- Membership includes:
 - Residents
 - Local Service Providers
 - York Region and local municipalities
 - York Regional Police
 - United Way Greater Toronto
 - School Boards
 - Ontario Health Teams



REDUCE RISKS IN TARGETED COMMUNITIES

STRATEGIC OBJECTIVE 3

Targeting efforts to communities that can benefit the most

KEY ACTIONS

- 
- Using data, advance place-based planning and actions in identified focus areas: northern Georgina, central Newmarket, south-central Richmond Hill and south-central Markham
 - Working with partners and informed by data and evidence, scale up successful initiatives to other communities in York Region, where needed

STRATEGIC OBJECTIVE 4

Focusing on top opportunities for action, and prioritizing preventative initiatives

KEY ACTIONS

- 
- Address priority issues related to mental well-being, housing stability and economic stability through preventative solutions

COMMUNITY ACTION PLANS

Northern Georgina - Early Actions for 2022

Action	Action Description	Performance Measures
Mental Well-Being		
Mental Well-being Engagement Events	Through the provision of community kitchens, tax clinics, weekly community luncheons, and festivals, residents will receive resources to improve awareness of community services available throughout Georgina.	# residents and partners engaged # events
Youth Peer Support Teams in Schools	Through the identification, training and support of youth peer workers, the youth peer support teams will hold monthly awareness building sessions in the local community.	# peer workers recruited and trained # youth engaged # sessions
Enhanced Community Resource Asset Map	Raise awareness of resources and supports available in Georgina through the creation and maintenance of a resource asset map. Community ambassadors and other resident leaders will lead this project, including the development of a marketing strategy.	# resources identified # focus groups # surveys administered # sessions # residents engaged
Economic Stability		
Community Job Fairs	Coordinate with agencies hosting job fairs, collaborate to host a larger Spring and Fall job fair. Create and implement a marketing strategy using community ambassadors to promote the job fairs.	# employers recruited # residents participated # partners engaged - Surveys pre and post job fair - resident participants - Surveys pre and post job fair - employer participants
Employment Readiness Workshops	Host workshops for local residents focused on transitional supports, coaching, interview skills, resume preparation etc., to increase the likelihood of job seekers finding meaningful employment.	# residents trained # residents and partners engaged # workshops
Employers Workshops	Host workshops with a focus on preparing the workplace for a diverse range of workers (i.e., youth, women, Indigenous peoples, newcomers, mature job seekers). Local employers will gain an understanding of barriers and/or gaps in their workplaces.	# workshops # employers surveyed and trained - Greater than 80% of the employers participating in the workshop express a greater understanding of how to better prepare their workplace for a diverse range of workers
Feasibility Study	Conduct research (site visits and interviews) on Working Centre models across Ontario. The research will explore the establishment of a multi-service Working Centre in North Georgina that will provide a variety of services/programs to support socio-economic needs. Residents will provide input and develop ownership on the approach for a future organization aimed to assist them with their basic needs (food, employment, participation, training, advocacy, etc.).	# residents engaged Final report developed

SYSTEM COLLABORATION, INVESTMENT, EVALUATION

STRATEGIC OBJECTIVE 5

Setting up for success by mobilizing resources and collaborating to drive change

KEY ACTIONS

- 
- Enable Regional funding and other supports to help implement the Plan
 - Establish and coordinate a Funders Table to identify and align resources to implement Community Action Table initiatives and other activities under the Plan
 - Pursue senior government and other funding opportunities, and work with partners to advocate for policy changes where needed

STRATEGIC OBJECTIVE 6

Delivering the Plan and building on success

KEY ACTIONS

- 
- Steward the Plan, working alongside York Regional Police, local municipalities, and community partners
 - Develop, monitor and report on community indicators and performance metrics under the Plan
 - Establish and manage a cross-sector Evaluation Group to assess performance of the Plan and advise on possible improvements
 - Engage with HSPB and York Regional Council to review progress of the Plan and refresh directions
 - Meet reporting requirements set by Province

WHAT'S NEXT

- Continued development of Community Action Tables
- Implementation of community action plans
- Engagement
- Setting up strategic tables
- Pursuing funding and partnerships
- Monitoring and evaluation



THANK YOU!

Sue Smythe

Program Manager, Community Investments
Strategies and Partnerships
Community and Health Services

sue.smythe@york.ca

Nathan Stern

Program Manager, Community Development
Strategies and Partnerships
Community and Health Services

nathan.stern@york.ca

Community Safety and Well-Being Plan for York Region york.ca/communityaction



Kiersten Allore-Engel

Manager of Community Safety and Well-being

Panelist:

CSWB Planning in Durham Region





GTHA CSWB Symposium

June 10, 2022

Kiersten Allore-Engel, RPP

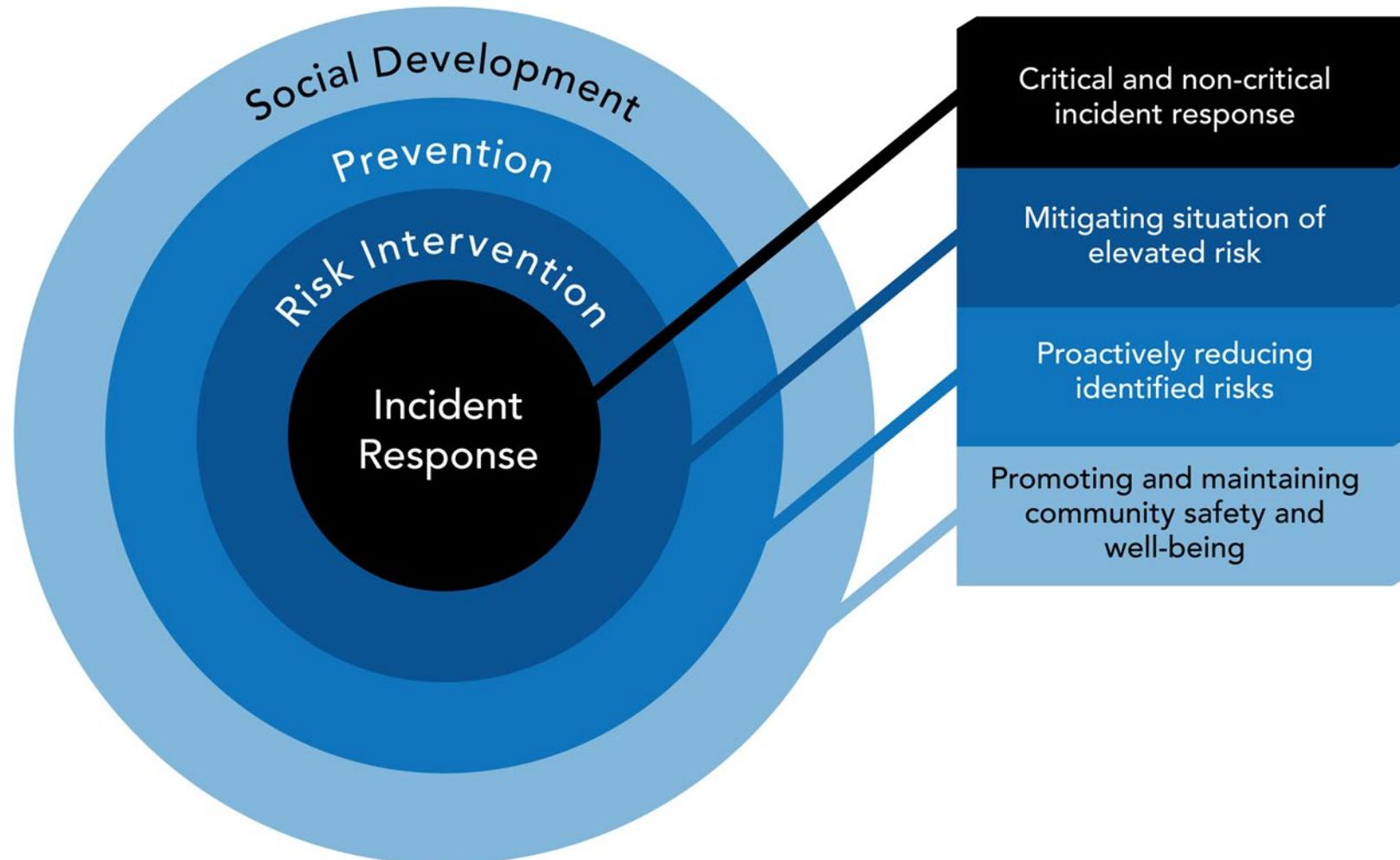
Community Safety and Well-Being:

Describes a place where everyone feels safe, has a sense of belonging, where individuals and families can meet their needs for education, health care, food, housing, income, as well as social and cultural expression.

Community Safety and Well-Being Plan

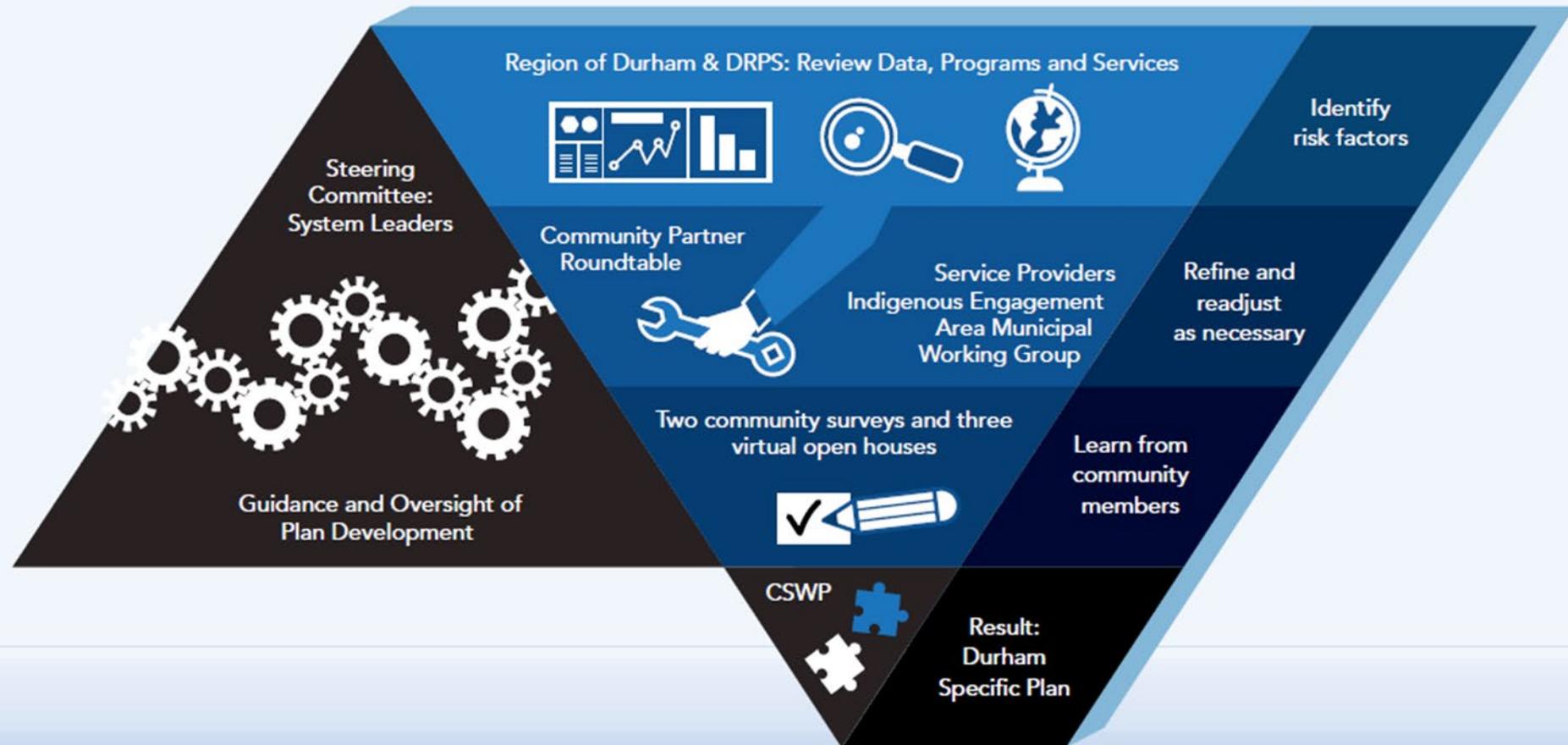


Four Levels of Risk Mitigation



An Illustration of Durham's Approach to Plan Development

Figure 1.5



Priority Risk Factors

Mental Health

Substance Use

Homelessness
and Basic
Needs

Criminal
Involvement

Victimization

Social Isolation

Experiences of
Racism

Priority Risk Factor Action Items

- Action items for each of the priority risk factors
- Informed by community engagement in 2021
- Starting point for consideration by the Steering Committee and working groups
- CSWB Plan: Page 26
- Example – Experiences of Racism

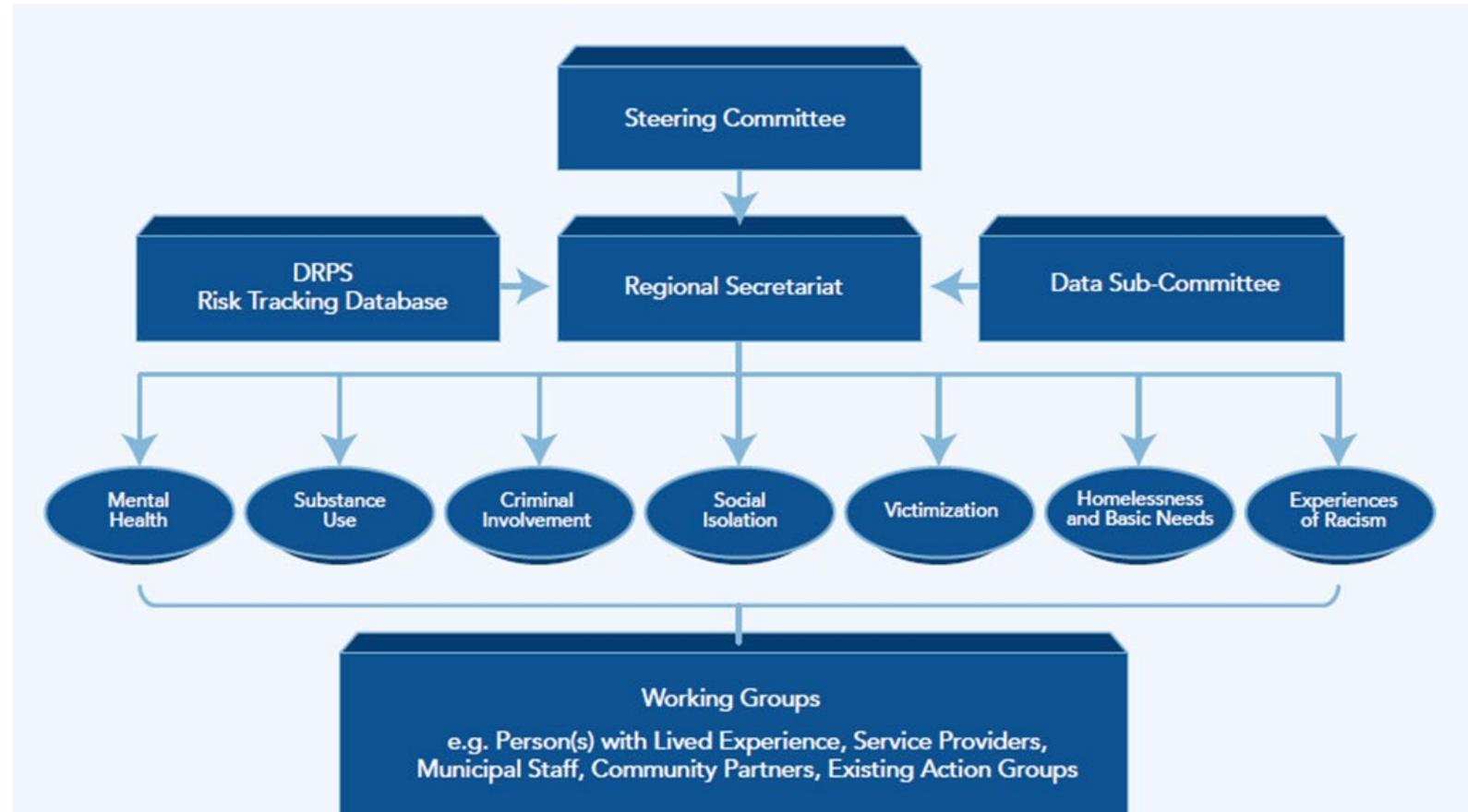




Actions Identified as Priorities: Experiences of Racism

1. Enhance representation of diverse population groups and their perspectives in developing policies and delivering programs and services
2. Apply an equity lens to the design and delivery of all programs and services
3. Involve people with lived experience in designing and improving programs, supports and services

Implementation Framework



Online Information Hub



Year One Implementation Plan

1. Establish the CSWB Plan Secretariat
2. GTHA Community Safety and Well-being Symposium
3. Transition from Planning to Implementation: Steering Committee and Area Municipal Working Group
4. Identify/Assemble Working Groups
5. Advisory Committee Connections
6. Expand Searchable Program and Strategy Catalogue
7. Build Future Phases for Implementation
 - Community Network Mapping
 - Evaluation Metric Development



Thank You!

Kiersten Allore-Engel, MCIP RPP

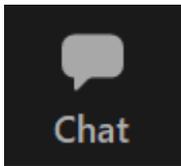
Manager,
Community Safety & Well-Being
Kiersten.Allore-Engel@durham.ca

More Information: durham.ca/cswp

durham.ca
[@RegionofDurham](https://www.instagram.com/RegionofDurham)



Session #3 Community Perspectives Panel | Gun Violence Across the GTHA



Use the chat button to open the chat pane and type reflections, experiences or comments.





Randy Carter

Staff Superintendent (4219), Community Safety
Command - Field Services, Toronto Police
Service

*Information by Steve Watts, Staff Superintendent (4077),
Organized Crime Enforcement, Toronto Police Service*

Panelist:

Gun Violence Trends in the GTHA



GTHA Symposium June 10, 2022

Gun Violence Trends

Randy Carter, Staff Superintendent (4219), Community Safety Command - Field Services, Toronto Police Service

Information by **Steve Watts**, Staff Superintendent (4077), Organized Crime Enforcement, Toronto Police Service



Firearm Trends 2021

Firearms analysis and tracing enforcement (FATE)



A total of 555 firearms have been submitted to FATE to date from Toronto PS. Of those 414 have been traced to a USA or CDN source.

- **Handguns:** 377 of which 323 are USA (86%), 54 are CDN (14%)
- **Long Guns:** 37 of which 0 are USA (0%), 37 are CDN (100%)
- **Possessors:** 112 Street Gang Linkages, 1 Other OC Linkage



A total of 79 firearms have been submitted to FATE to date from Durham RPS. Of those 48 have been traced to a USA or CDN source.

- **Handguns:** 34 of which 24 are USA (71%), 10 are CDN (29%)
- **Long Guns:** 14 of which 0 are USA (0%), 14 are CDN (100%)
- **Possessors:** 8 Street Gang Linkages, 18 Other OC Linkages



A total of 114 firearms have been submitted to FATE to date from Peel RPS. Of those 72 have been traced to a USA or CDN source.

- **Handguns:** 61 of which 44 are USA (72%), 17 are CDN (28%)
- **Long Guns:** 11 of which 2 are USA (18%), 9 are CDN (82%)
- **Possessors:** 12 Street Gang Linkages

Firearm Trends 2021

Firearms analysis and tracing enforcement (FATE)



A total of 78 firearms have been submitted to FATE to date from York RPS. Of those 57 have been traced to a USA or CDN source.

- **Handguns:** 52 of which 51 are USA (98%), 1 is CDN (2%)
- **Long Guns:** 5 of which 0 are USA (0%), 5 are CDN (100%)
- **Possessors:** 23 Street Gang Linkages



A total of 34 firearms have been submitted to FATE to date from Halton RPS. Of those 23 have been traced to a USA or CDN source.

- **Handguns:** 22 of which 19 are USA (86%), 3 are CDN (14%)
- **Long Guns:** 1 of which 0 are USA (0%), 1 is CDN (100%)
- **Possessors:** 4 Street Gang Linkages, 1 Other OC Linkage



A total of 116 firearms have been submitted to FATE to date from Hamilton PS. Of those 62 have been traced to a USA or CDN source.

- **Handguns:** 48 of which 32 are USA (67%), 16 are CDN (33%)
- **Long Guns:** 14 of which 0 are USA (0%), 14 are CDN (100%)
- **Possessors:** 19 Street Gang Linkages, 2 Other OC Linkages

Significant Trends and Takeaways

- Decreasing age of gang violence victims and accused subjects overall in 2021
- Greater and increased profile and activity of high risk gang members on social media sites.
- Increased rate of high risk offenders in regards to personal carry / access to firearms
 - from intercepts / source information / accused based accounts.
- The increase of extended magazines and conversion switches that have been seized is reflective in the amount of rounds discharged and seized from crime scenes.
- Increase in the number of offenders carrying firearms, resulting in more discharge scenes with multiple shooters.
- Significant increase in the drug trafficking trade of schedule I controlled substances in regards to the supply and demand and increased profits in the Central and North regions of Ontario, as well as the Western provinces throughout Canada. This is being directly facilitated by Organized Criminal Groups.
- Potential bail revisions or reintegration supports with respect to gun violence and firearm recidivism and high risk offenders – legislative change required.
 - During the period of January 1st 2019 to December 31st 2021, the TPS arrested **3,763** people that were on bail for a Firearm related offence.
 - 1,718 of those persons were re-arrested (**45%**)
 - 494 of those persons were re-arrested a second time while their bail was still active (**28%**)
 - Of those persons re-arrested while their bail was still active, 109 persons were arrested a third time (**22%**)



Toronto Police Gun and Gang Strategy Goals & Objectives



The over arching aim of Toronto Police Service Gun and Gang Strategy Framework is the elimination of incidents of gun and gang violence in the City of Toronto.

The **strategic goals** of the Toronto Police Gun and Gang Strategy Framework are:

1. To provide a co-ordinated approach to gun and gang activity in partnership with our communities and guided by *SafeTO - Community Safety and Wellbeing Plan*.
2. To implement organizational and operational changes to improve public trust and confidence.
3. To engage in a multi-sectoral and evidence-based response to gun and gang activity that includes a public health lens.

The **objectives** of the Toronto Police Gun and Gang Strategy Framework are:

1. Long-term and sustained reduction in incidents of gang activity, shootings and gun deaths.
2. Increased trust and engagement with all communities in neighborhoods throughout Toronto.
3. A sustained process of co-ordination in partnership with communities, stakeholders and service providers to reduce the harmful impact of gun and gang activity.

These **strategic goals** and **objectives** will be accomplished by focusing on, and continuously improving our **Prevention, Intervention, and Enforcement** efforts.



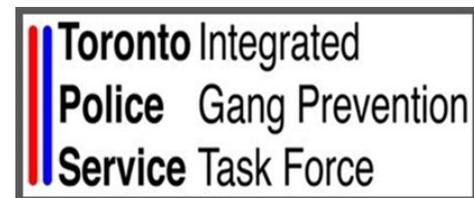
Neighbourhood Community Officer Program

- Currently in 34 City of Toronto Neighbourhoods in all 16 TPS Divisions; 148 Constables and 12 Sergeants.



Gang Prevention & #Engage416

- Assist at-risk youth and gang members wishing to disengage by connecting them with resources.
- Intensive outreach in Toronto's northwest communities by the Integrated Gang Prevention Task Force.



#ENGAGE416

Public Safety Response Team (PSRT)

- Focuses on increased community engagement, prevention, intervention, and referral to gang exit strategy.
- Enhances early intervention with individuals at risk of becoming involved with gangs. Priorities include:
 - Attend areas of potential retaliation,
 - Bail Compliance Checks on firearm offenders, and
 - Co-ordination with Gang Exit program.





Centralized Shooting Response Team (CSRT)

Centralized and consistent investigative response to all shootings. Enhanced collaboration and co-ordination with the Homicide Squad, other TPS units and partner agencies.

"I am very thankful to you & your team for all their efforts in keeping our neighborhood safe."

- Local Community Group

Focus on Strategic Enforcement

Strategic, community informed, and intelligence-led enforcement that enhances public safety while minimizing social cost.

Project Sunder

- 118 people charged, of which 101 were arrested **prior** to take down day
- 31 firearms, 7 kilos of cocaine, 2 kilos of fentanyl and \$300,000

Project Compound

- One firearm linked to 7 separate shootings started this project
- 11 people charged over the course of the investigation
- 7 firearms, over \$100,000 worth of drugs and cash seized



"This investigation utilized a proactive style of investigative techniques...highly focused [and] integrated...a number of varied enforcement protocols are not only essential but are absolutely critical...the enforcement strategies actually result in the prevention of violent crime in our communities."

- Superintendent Steve Watts



Nicola Crow

Executive Director, Durham Family Court Clinic

Panelist:

Changing the story – working together to
empower the potential





**Changing the story –
working together to empower the potential**

Nicola Crow (she/her/hers)

Executive Director

T: 289-685-0175

E: ncrow@dfcc.org

www.dfcc.org

What will I talk about?

Focus:

How to change the story – working together to empower the potential:

- i) About DFCC & our collaborative work in youth violence prevention
- ii) Call to action for a community-based collaborative approach for youth violence prevention and gun violence reduction

DFCC – who are we?

In everything we do, we're all about safe, hopeful, healthy communities.

The way we do this is by empowering and engaging young people, families and communities through collaboration, innovation and excellence.

What do we do?

Across Durham Region, we offer a unique spectrum of prevention & intervention services, including specialized mental health supports and mobile outreach to meet young people's & families' individualized needs and to promote their health and wellbeing.

Our Collaborative Work in Violence Prevention and Gun Violence Reduction

- Current programs and services
- Durham Youth Gang Strategy

<https://www.publicsafety.gc.ca/cnt/rsracs/pblctns/drhm-strtg/index-en.aspx>

- Community-based initiatives, collaborations and aspirations

Factors for Action

Anti-Oppression

Anti-Racism

Equity

Diversity

Inclusion

Factors for Action

Invest and Collaborate

Factors for Action

Engage and Empower

Factors for Action

Impact Focused

Factors for Action

The Ripple Effect

Factors for Action

Changing the story – working together
to empower the potential

The Youth Voice

“It feels good to hear other people say they’re proud of you but to feel proud of yourself is a whole other feeling that’s just amazing and what truly counts”. *Former youth service user*

THANK YOU

Nicola Crow (she/her/hers)

Executive Director

T: 289-685-0175

E: ncrow@dfcc.org

www.dfcc.org



Devon Jones

Founding Director (Youth Association for
Academics, Athletics and Character Education
Y.A.A.A.C.E)

Panelist:

Grassroots – Community Driven Gun
Violence Prevention



BEING PROACTIVE

*SUPPORTING CHILDREN AND YOUTH MENTAL HEALTH AND
WELLNESS IN SCHOOLS AND COMMUNITIES*

PRESENTING TO GTHA CONFERENCE

DEVON JONES

Founding Director

YAAACE | Youth Association for Academics, Athletics, and Character
Education



Youth Association for Academics, Athletics and Character Education

YAAACE is a community organization that seeks to engage children and youth from all communities – particularly those from marginalized and poor under-resourced communities through participation in year-round comprehensive educational programming.



- Non-profit organization offering affordable and accessible programs and services to Jane-Finch community
- Founder Devon Jones (2007) - School teacher in the community
- Purple logo was intentional to mitigate the turf war north and south of Finch
- Focus is on mitigating the opportunity gap and providing access: www.yaaace.com
- Social Inclusion Strategy framework and holistic services
- Eizadirad book chapter (2020): “Closing the Achievement Gap Via Reducing the Opportunity Gap: YAAACE’s Social Inclusion Framework Within the Jane and Finch Community”



Crime Prevention Initiatives

- Strengthening Community Readiness
- Direct Intervention

 Government of Canada
Gouvernement du Canada



Public Safety
Canada

Peace Core –
The New Narrative

Ontario 

MCCSS

Ministry of Children Community
And Social Services

Youth Violence and
Human Trafficking

 TORONTO

TO Wards Peace

Strategic Community and
Safety Intervention



The multi-level government direct intervention initiatives that seek to create a culture of prevention subsequently facilitating safer schools and communities for our students. The proposed Violence Prevention/Intervention Strategies aims to **reduce** youth gangs, youth violence and the culture of retaliatory/reciprocal shootings.



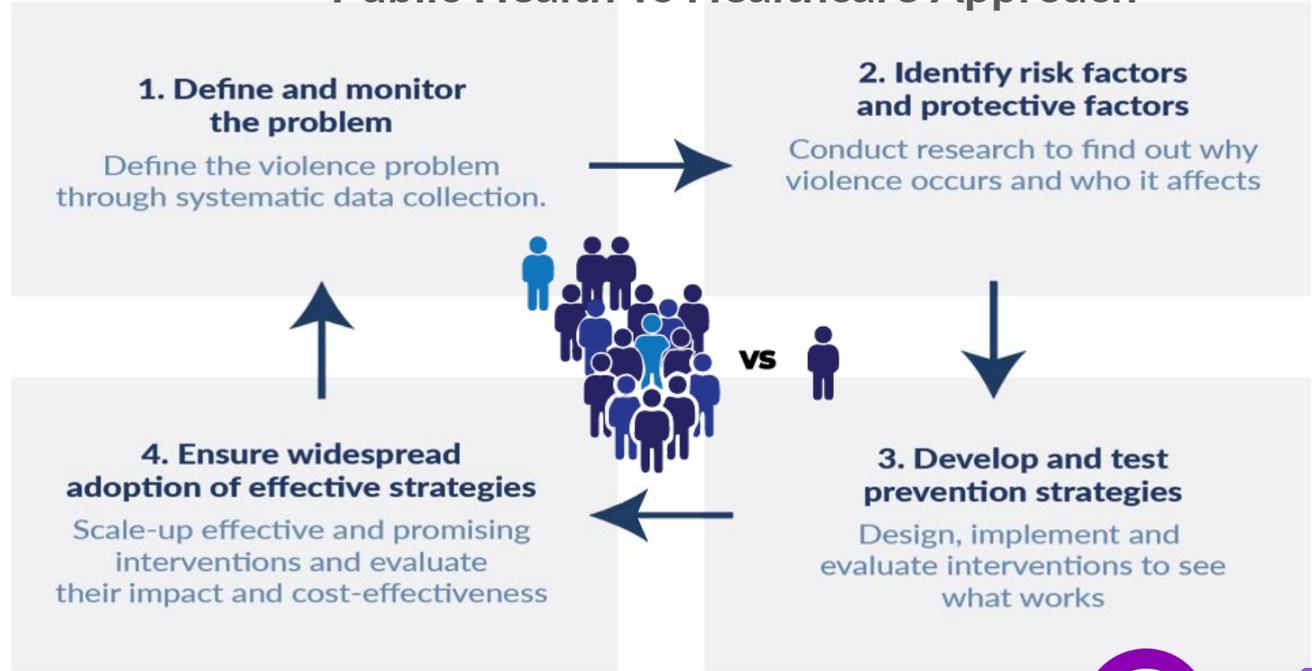
reintegration development **Crime reduction** YAAACE opportunity targeted approach
YOUTH GANG support case management mental wellness
 social programs **Justice** one-on-one counselling
 capacity building family therapy

Peace Core – New Narrative

A new initiative with comprehensive services and programs working together to address the risk factors that impact involvement with violence and crime

- Family Support
- Learning & Education Training
- Case Management
- Employment Training/Support

Public Health vs Healthcare Approach



“

Crime itself has no particular denominator, but certain crime has certain elements to it. You take a community with a lack of infrastructure, no support systems, and lots of young people being left to their own devices, and you're going to have problems.

This has been a big problem in Toronto... and the inevitable results are tragic for everyone. These things were built for disaster.

- Julian Fantino,
former Head of Toronto Police Service

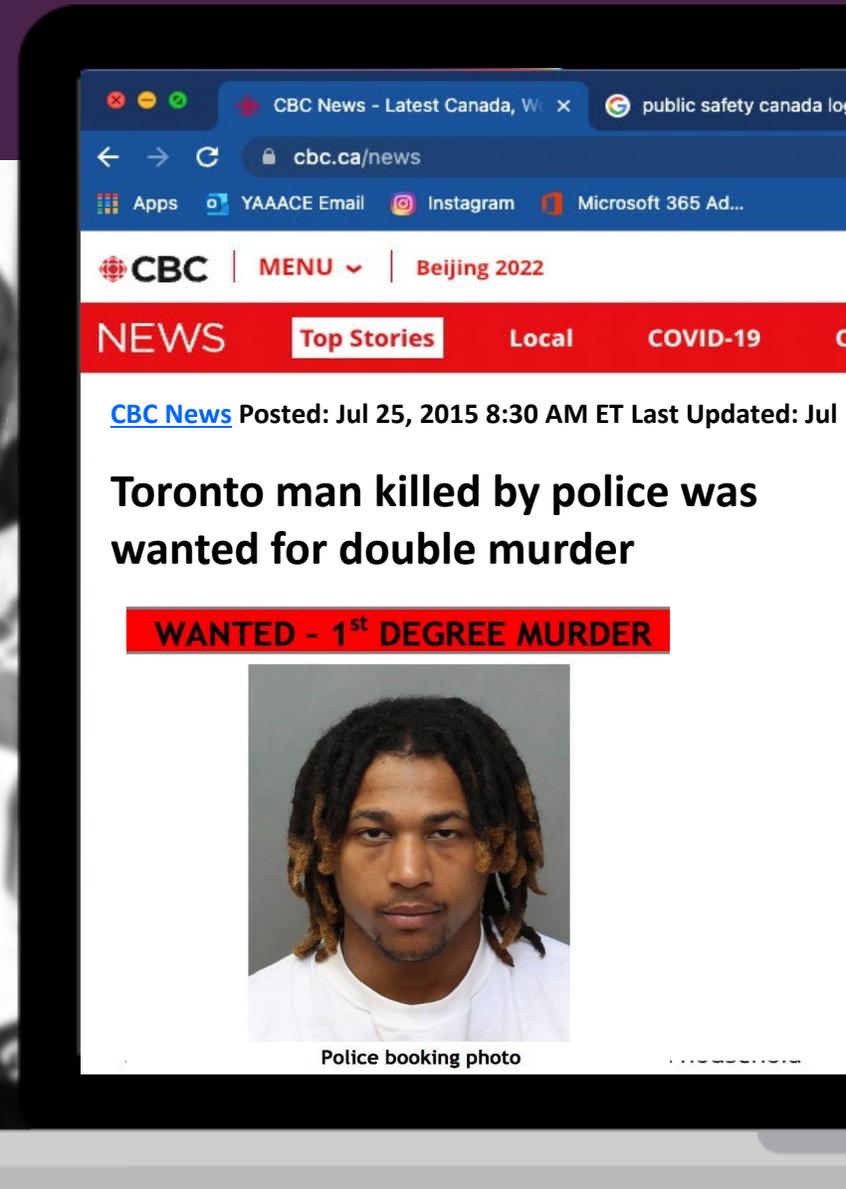
”





The Kwasi Peters Story:

The dichotomy of what's wrong with you vs what happened to you?





All but one

TORONTO STAR

"Toronto's most dangerous place to be a kid."

Published Aug. 31, 2013

¹ Pagliaro, Jennifer. "Jane and Finch Toronto's Most Dangerous Place to be a Kid." The Toronto Star, Sat., Aug 31, 2013. https://www.thestar.com/news/crime/2013/08/31/jane_and_finch_torontos_most_dangerous_place_to_be_a_kid.

The University of Toronto and officials from the City of Toronto have developed the Youth Crime Risk Index, which identifies neighbourhoods with a high risk of youth gang activity. *The index shows that Jane-Finch has the highest risk score in Toronto.*



From the Margins

Building Curriculum for Youth in Transition

Funded by the Department of Justice
 Report Submitted by: Chris Williams, PhD
 Devon Jones, MEd(c) • Rose-Anne M. Bailey MEd(c)
 Research Assistants: Wayne Black, David Myers
 November 30, 2013



Department of Justice
Canada

Ministère de la Justice
Canada

Priority Neighbourhood: Jane-Finch	
Incarceration Costs (2008)	\$36,856,603 (Postal Code M3N)
Police Expenditures (2011)	\$30,576,947 (31 Division)
Data for Census Tract 0312.04 (2005)	Percentage of families with one parent: 39% (+22%)
	Total population 15 years and over with no certificate, diploma or degree: 47% (+27%)
	Unemployment: 12.1% (+5.4%)
	Median income (All private households): \$37,056 (-\$27,072)
TDSB Learning Opportunities Index School Rankings (2011)	Westview Centennial Secondary School (1/109) Brookview Middle School (15/479) Shoreham Public School (3/479) Driftwood Public School (9/479)
Fraser Report Rankings (Secondary Schools 2011-12)	Westview Centennial Secondary School (696/725)

Chart 1, Williams, C., and Jones, D, 2013

The correlation between crime and access to program and infrastructure



M3N

JANE & FINCH



\$30,675,947

POLICE EXPENDITURES (2011)



\$36,856,603

INCARCERATION COSTS



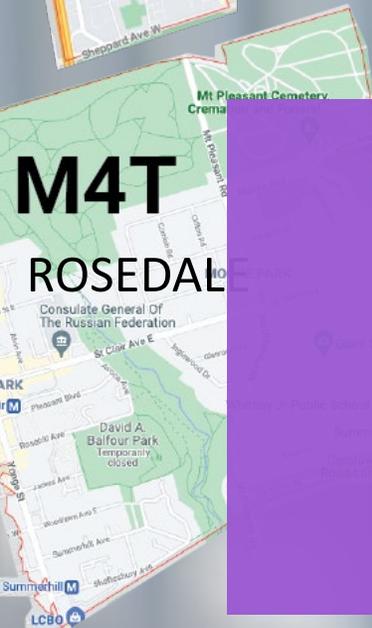
\$37,056

MEDIAN HOUSEHOLD INCOME (2005)

2.88%

of kids with household income less than \$39,999 participate in organized sports

*taken from 2021 KEDZ report on OBA



M4T

ROSEDAL



\$20,965,401

POLICE EXPENDITURES (2011)



\$0

INCARCERATION COSTS



\$179,935

MEDIAN HOUSEHOLD INCOME (2005)

70.98%

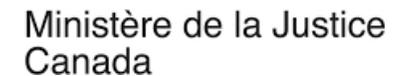
of kids with household income greater than \$100,000 participate in organized sports

*taken from 2021 KEDZ report on OBA



Being Proactive: 2011 - 2013 Forum Series

Multidisciplinary forums on youth violence and underlying, often undiagnosed, mental health issues.

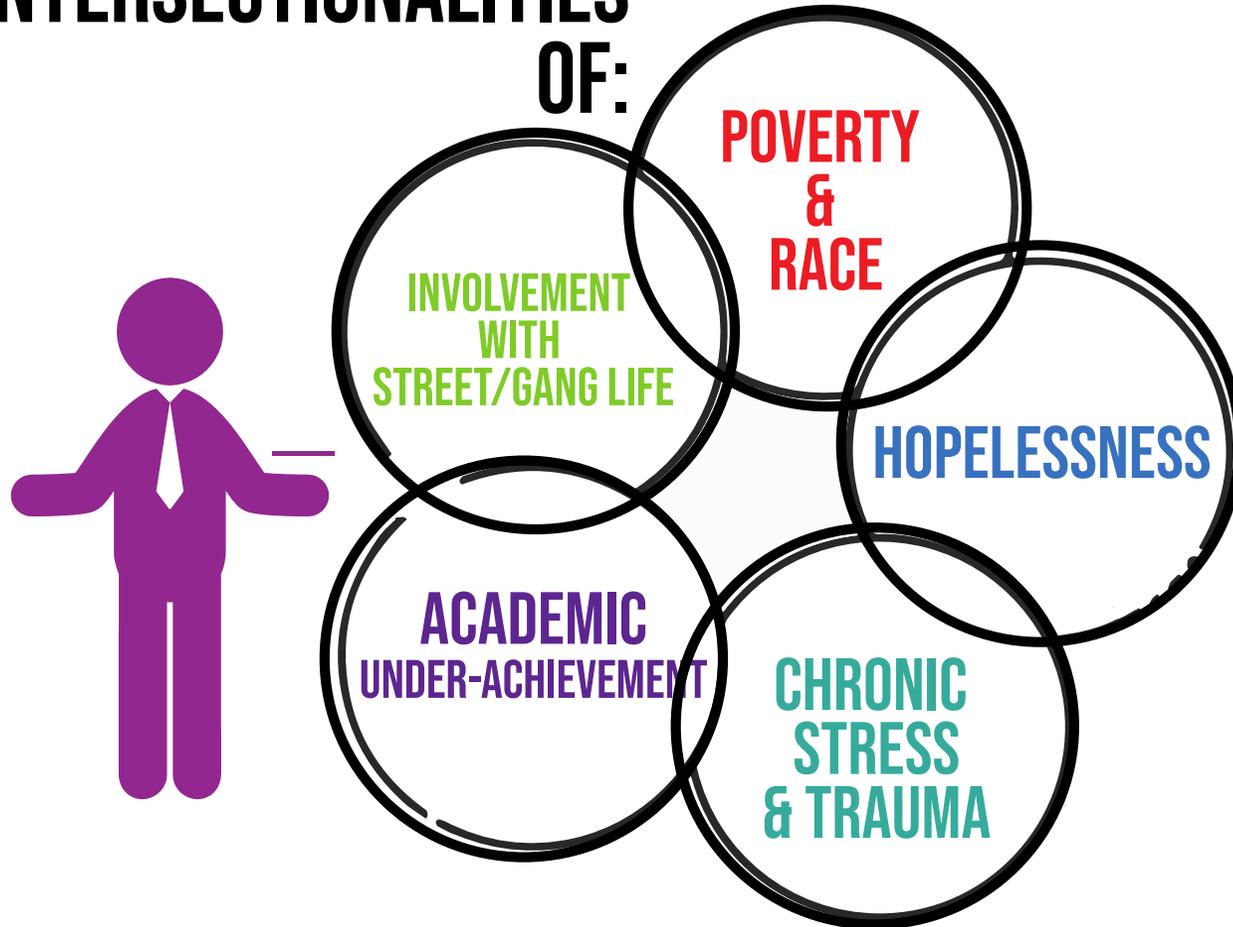


Project Co-Leads: Dr. Carl James and Devon Jones

Being Proactive: 2011 - 2013 (continued)

Each forum explored:

INTERSECTIONALITIES OF:



And examined a range of positive, proactive interventions and responses.



Being Proactive Conferences

Resounding Theme:

The mental health of marginalized and racialized youth is compromised very early in life by **racism, violence, poverty, street involvedness** of young people in conflict with the **law** and other related institutional and systematic factors.
The damage cannot be easily undone.

While the hard work is just beginning, cross-sectoral partnerships are as necessary as they are complex.



Out of rich dialogue and debate, panelists and participants articulated a vision to guide the hard cross-sectoral work ahead:

○
Do not give up on kids who are in conflict with the law.

○
Do not catastrophize their behaviour.

○
Do not label them in ways that will circumscribe their future

○
Do not assume they are someone else's responsibility

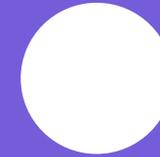
DO place importance on early childhood proactive strategies that promote emotional intelligence.

Action
Changes
Things

Model for action based on four foci:



Address the social-political context of violence, racialization, trauma, children and youth mental health and the education and justice systems.



Support community-driven initiatives for healing and re-engagement.



Reach out to create partnerships across education, mental health and the justice system.



Develop and implement asset-based approaches to build from strengths.

“They are hurting and hurting others and they are hurting themselves. They don’t need to be locked up and further punished; what they need is help. Their disruptive behaviour is indicative of underlying issues or factors that need to be addressed.”

Dr. Theresa Shanahan, York University, *Crossing Paradigms*, 2011

QUESTIONS?



○ **YAAACE**

45 Norfinch Dr.,
North York, ON



djones@yaaace.com



416.617.5121



[@yaaace_si](#)



yaaace.com

THANK YOU





Nathan Stern

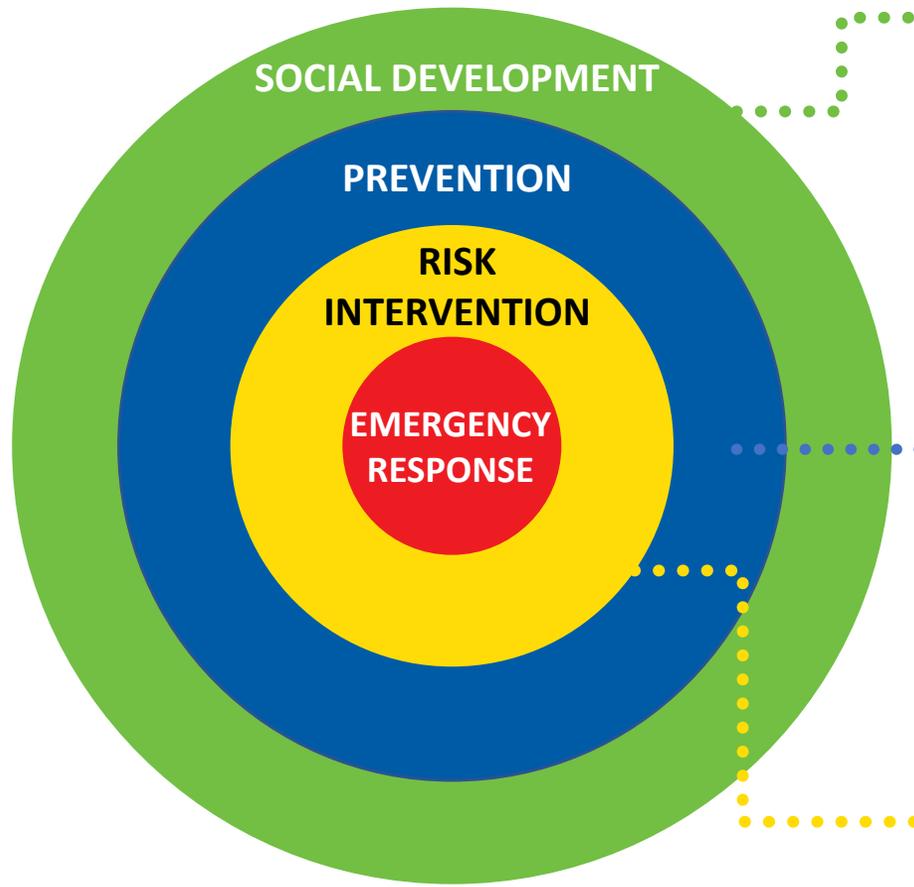
Program Manager, Community Development

Panelists:

CSWB Planning in York Region



YORK REGION'S APPROACH TO VIOLENCE PREVENTION



Four Community Action Tables (CATs) in identified community safety and well-being focus areas:

- Northern Georgina
- Central Newmarket
- South-central Richmond Hill
- South-central Markham

Community Action Plans

- Developed by each CAT
- Initiatives that address priority needs identified by the community to foster engagement, collaboration and partnerships and improve quality and access to services

Community Violence Prevention Grant (TBC)

- Potential grant opportunity for projects aimed at violence prevention and intervention programming

Traumatic Incident Response Protocol (TIRP) Pilot (TBC)

- Enhanced safety planning and integration and coordination of key strategic partners and local community-based services when a traumatic incident occurs

Four Children, Youth and Families Situation Tables

- Helps to reduce crime, the need for targeted enforcement and improve community resiliency and well-being
- Consists of multi-sector human service providers working together to provide immediate, coordinated and integrated responses to address situations facing children, youth and/or families at acutely elevated risk

Housing & Homelessness CSWB Action Table

Action Table contact information



Name: Daryl Kaytor
Title: Manager, Homelessness
and Supportive Housing
Organization: Halton Region
Email: Daryl.Kaytor@halton.ca



Name: Tiffany Dorman
Title: Supervisor, Housing
Stability
Organization: Halton Region
Email: Tiffany.Dorman@halton.ca

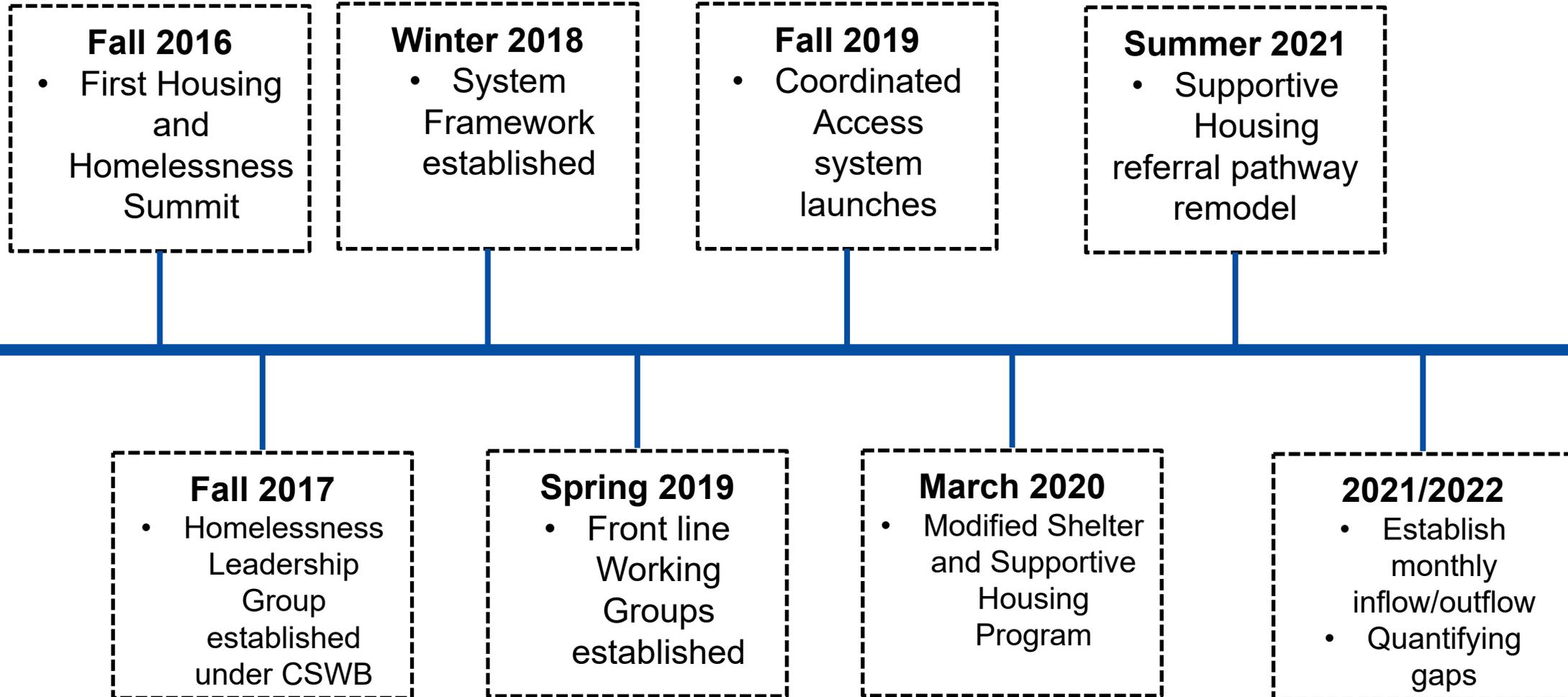


Name: Melissa Pongracz
Title: Housing Program Analyst
Organization: Halton Region
Email: Melissa.Pongracz@halton.ca

Presentation Overview

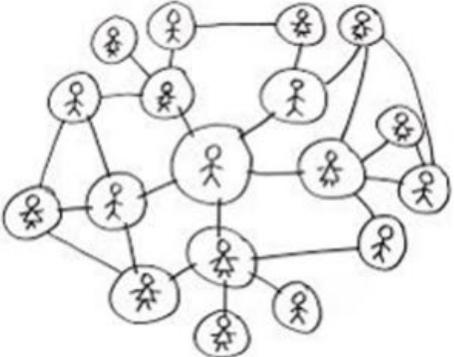
- Timeline Overview
- Coordinated Access Essentials
- Data and Results
- Partners
- Moving Forward

Action Table Timeline Overview



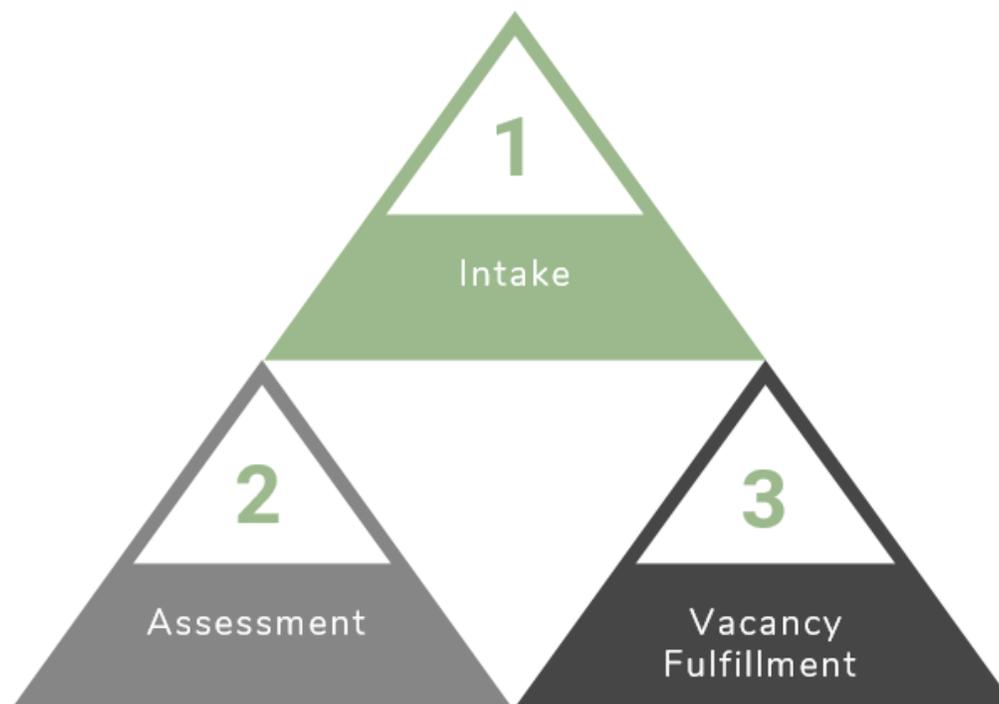
Where we began....

Halton Region Before Connected but Uncoordinated



What is Coordinated Access?

Coordinated Access Systems also known as Coordinated entry are designed to streamline **intake, assessment and vacancy fulfillment** processes across the system for those experiencing homelessness.



What do we know about Coordinated Access?

It is an essential
element to prevent
and end
homelessness

These systems
have been in place
in the United States
for many years as
well as other
provinces across
Canada

System decisions
can be made based
data.

It improves inter-
agency
communication

It is a best practice
that works!



Coordinated Access Three Essential Elements

Centralized Access Points



Clearly defined and established entry points utilizing diversion principles.

Common Screening



Objective tool to determine housing needs. Halton has adopted the Vulnerability Index-Service Prioritization Decision Assistance Tool (VI-SPDAT)

Prioritization and Referrals



Prioritization based on vulnerability. Housing Providers accept referrals from the By-Name List and perform follow-up assessment to ensure program fit.

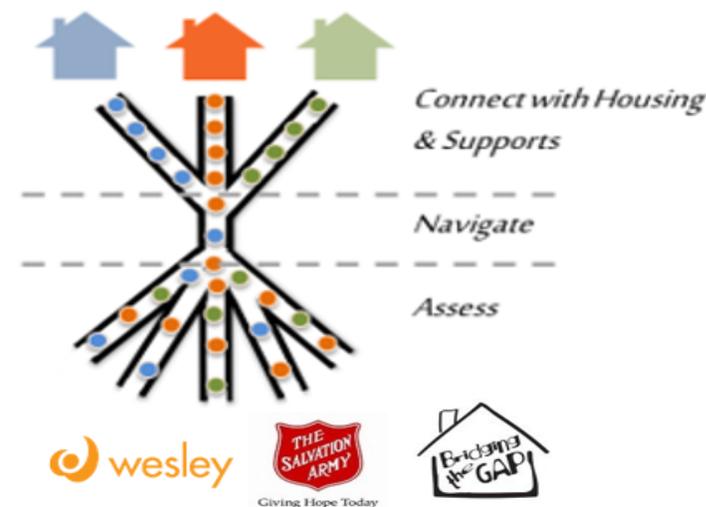
Centralized Access Points

Centralized Access Points also known as Coordinated Entry have clearly defined entry points to Halton's Homelessness Response System.

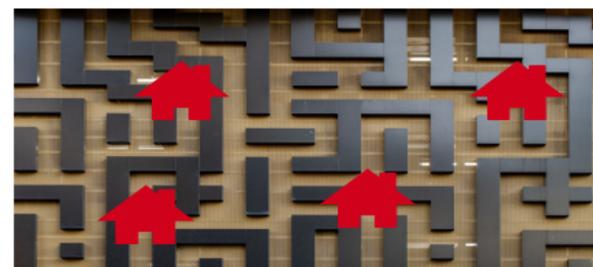
Streamlines and simplifies the process for clients to access supportive housing services

Provides important data for program planning and evaluation system wide decision making.

With Centralized Access Points



Without Centralized Access Points





Common Assessment

Objective tool to determine housing needs.

Common assessment practices are critical to understand client needs and provide information on prioritization for housing opportunities.

In Halton Region, all centralized access points administer the *Vulnerability Index-Service Prioritization Decision Assistance Tool (VI-SPDAT)*. Tool is a best practice now used in over 1,000 communities worldwide.

Vulnerability score is based upon questions pertaining to history of homelessness, police/hospital use, socialization and wellness.

Community
Safety &
Well-Being
in Halton

VI-SPDAT



VI-SPDAT
0-3

Little housing
intervention required



VI-SPDAT
4-8

Moderate supports
are needed



VI-SPDAT
9 +

Intensive Supports
required

Not a thorough assessment tool, but a means to guide decision making for triage and prioritization. Agency assessment remains important.

Halton's Homelessness Response System

Community
Safety &
Well-Being
in Halton

Access Points



Halton Housing
Help
(unsheltered)



Salvation Army
Lighthouse
(single males)



Wesley Halton
Housing Program
(women, couples, families)

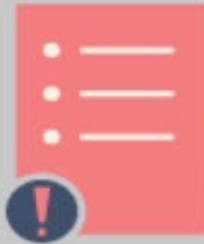


Bridging the Gap
(Youth 16-24)

Assessment By-Name List



VI-SPDAT
Assessment



By-Name List
Status

Triage Housing Intervention



High Acuity
(8+)



Supportive
Housing



Medium Acuity
(5-7)



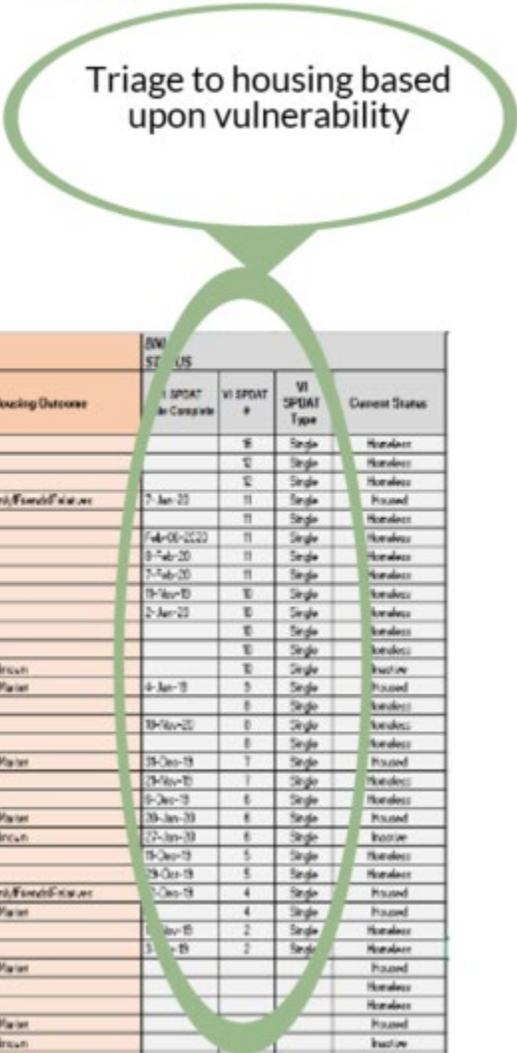
Rapid
Rehousing/light
support



Low Acuity
(0-4)

What is a By-Name List?

A BNL (By-Name List) is a real-time list of all people experiencing homelessness in the community. Individual status is kept up to date with the most recent information.



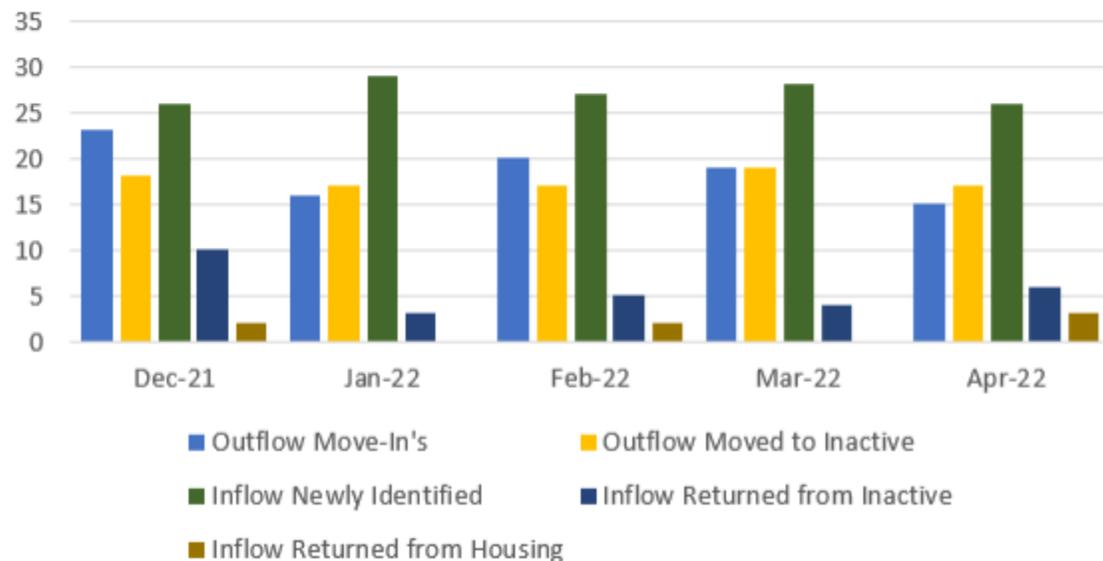
IDENTIFYING CLIENT INFORMATION				ICM		LH INFO				BMS STATUS			
Issue	B.O.B.	Last Name	First Name	Most recent CM Service Date	Case Manager/Agency Involvement	Most recent LH Admissions Date (if applicable)	LH Discharge Date	Length of Stay	LH Housing Outcome	VI SPDAT In Complete	VI SPDAT #	VI SPDAT Type	Current Status
Grants/Info	8-May-03	Test 1	Test 1	12-Oct-18	H-HESI+						8	Single	Homeless
OSDP	2-Aug-03	Test 2	Test 2	28-Mar-19	H-HESI						12	Single	Homeless
	2-Jul-03	Test 3	Test 3			18-Jan-20		31			12	Single	Homeless
OSDP	28-Feb-03	Test 4	Test 4			28-Jan-20	7-Feb-21	10	Placed in a Family/Extended Stay	7-Jan-21	11	Single	Housed
OPRICAS	18-Feb-03	Test 5	Test 5	29-Feb-18	H-H						11	Single	Homeless
Grants/Info	25-Oct-03	Test 6	Test 6			5-Feb-20		5		7-Feb-20	11	Single	Homeless
	8-Sep-03	Test 7	Test 7			5-Feb-20		5		7-Feb-20	11	Single	Homeless
	2-Jul-03	Test 8	Test 8			6-Feb-20		4		7-Feb-20	11	Single	Homeless
Grants/Info	30-Aug-03	Test 9	Test 9			12-Dec-18		60		19-Jan-19	10	Single	Homeless
OSDP	2-Jan-04	Test 10	Test 10			12-Dec-18		60		2-Jan-21	10	Single	Homeless
Grants/Info	12-Jan-04	Test 11	Test 11	29-Aug-18	Wesley						10	Single	Homeless
OSDP	1-Jan-04	Test 12	Test 12	3-Dec-18	H-H						10	Single	Homeless
OSDP	22-Mar-04	Test 13	Test 13			20-Jan-20	2-Feb-21	4	Menorahs Shirkun		10	Single	Homeless
Grants/Info	1-Jan-04	Test 14	Test 14			27-Dec-18	4-Feb-21	28	Housed-Private Market	4-Jan-21	9	Single	Housed
OSDP	22-Mar-04	Test 15	Test 15			18-Oct-18		111			8	Single	Homeless
OSDP	18-Mar-04	Test 16	Test 16			15-Nov-17		101		19-Nov-20	8	Single	Homeless
Grants/Info	12-Oct-04	Test 17	Test 17	8-Aug-18	H-H						8	Single	Homeless
OSDP	12-Oct-04	Test 18	Test 18		H-H	27-Dec-18	6-Feb-21	41	Housed-Private Market	18-Dec-19	7	Single	Housed
OSDP	1-Jul-04	Test 19	Test 19		EVV					24-Nov-20	7	Single	Homeless
OPRICAS	19-Apr-04	Test 20	Test 20			2-Dec-18		20		5-Dec-19	6	Single	Homeless
Employee-Part/Full Time	18-Jan-04	Test 21	Test 21			18-Jan-20	5-Feb-21	18	Housed-Private Market	28-Jan-20	6	Single	Housed
Employee-Part Time	1-Oct-04	Test 22	Test 22			28-Jan-20	1-Feb-21	6	Menorahs Shirkun	17-Jan-20	6	Single	Homeless
Grants/Info	25-Apr-04	Test 23	Test 23			9-Dec-18		60		19-Dec-19	5	Single	Homeless
Private Person, OPICAS	8-Dec-04	Test 24	Test 24			18-Nov-18		107		28-Oct-19	5	Single	Homeless
Grants/Info	2-Jan-05	Test 25	Test 25			1-Dec-18	1-Feb-21	62	Placed in a Family/Extended Stay	1-Dec-19	4	Single	Housed
OPRICAS	25-Dec-04	Test 26	Test 26			11-Jan-20	1-Feb-21	15	Housed-Private Market		4	Single	Housed
Employee-Full Time	21-Jan-05	Test 27	Test 27			15-Nov-18		107		10-Jan-21	2	Single	Homeless
OPRICAS	4-Feb-05	Test 28	Test 28			28-Oct-18		115		11-Jan-21	2	Single	Homeless
Employee-Full Time	1-Jan-05	Test 29	Test 29			11-Jan-20	4-Feb-21	28	Housed-Private Market				Housed
OPRICAS	1-Oct-05	Test 30	Test 30			27-Oct-18		116					Homeless
Support Payment	28-Sep-05	Test 31	Test 31			28-Jan-20		21					Homeless
	1-Jul-06	Test 32	Test 32			20-Jan-20	9-Feb-21	20	Housed-Private Market				Housed
OSDP	11-Dec-07	Test 33	Test 33			28-Jan-20	2-Feb-21	6	Menorahs Shirkun				Homeless
		Test 34	Test 34			11-Jan-20	5-Feb-21	5	Housed-Private Market				Housed
Grants/Info/Support Program	25-Jan-02	Test 35	Test 35			1-Feb-21	2-Feb-21	1	Placed in a Family/Extended Stay				Housed
	25-Jan-02	Test 36	Test 36			1-Feb-21	2-Feb-21	1	Remotely Placed				Homeless

**By-Name List
Inflow
& Outflow**



By-Name List Inflow & Outflow

By-Name List Trends



Month	Actively Homeless	Outflow		Inflow		
		Move-In's	Moved to Inactive	Newly Identified	Returned from Inactive	Returned from Housing
Dec-21	118	23	18	26	10	2
Jan-22	119	16	17	29	3	0
Feb-22	114	20	17	27	5	2
Mar-22	113	19	19	28	4	0
Apr-22	110	15	17	26	6	3

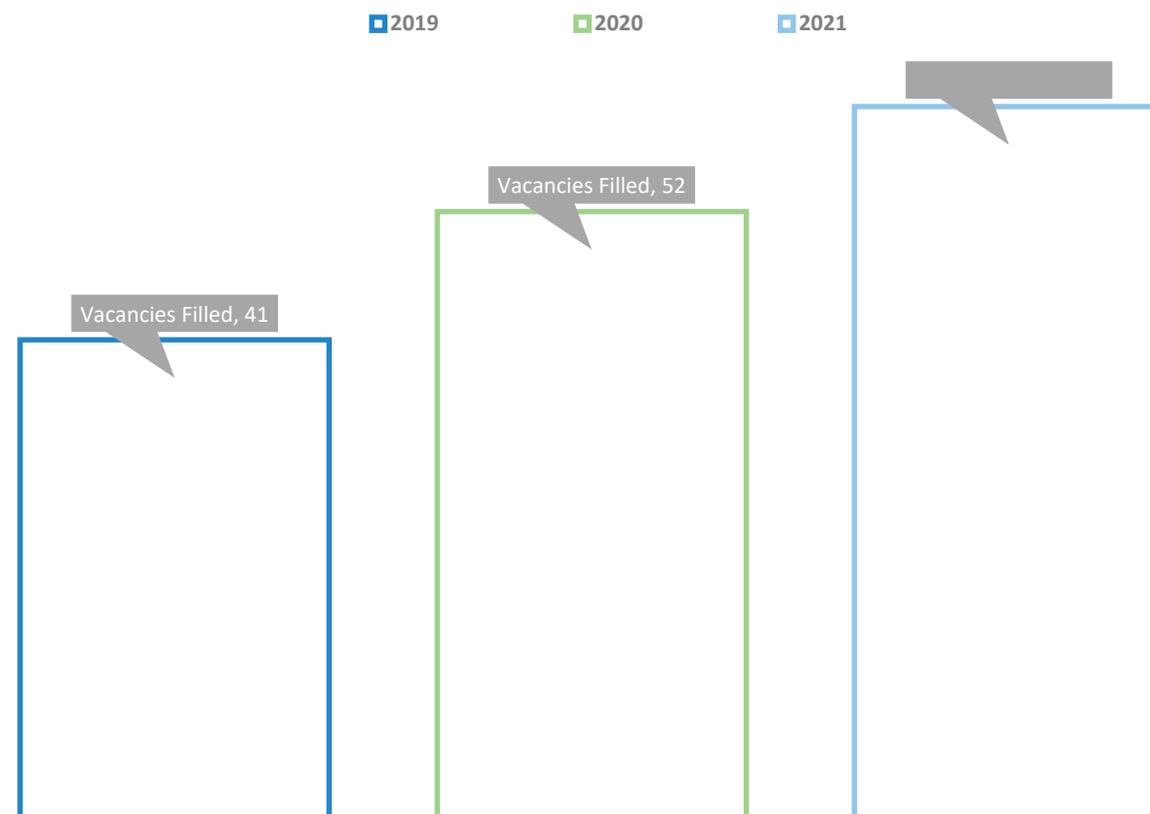
Key area of Impact 1

Desired Outcomes

- Streamline all supportive housing vacancies through the Coordinated Access By-Name List

Measured impact (*indicators*)

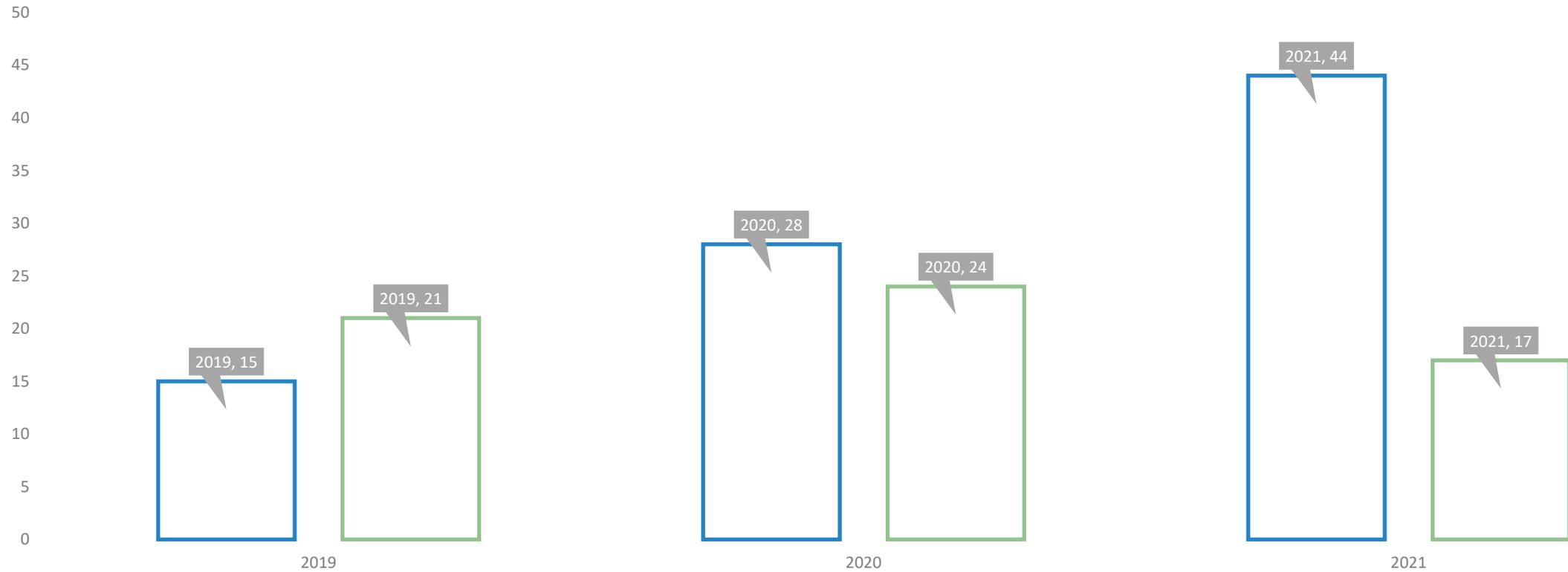
Coordinated Access Vacancies Filled



Who We are Serving

Demographic Served

■ Individuals ■ Families



Our Partners

Community
Safety &
Well-Being
in Halton



Giving Hope Today

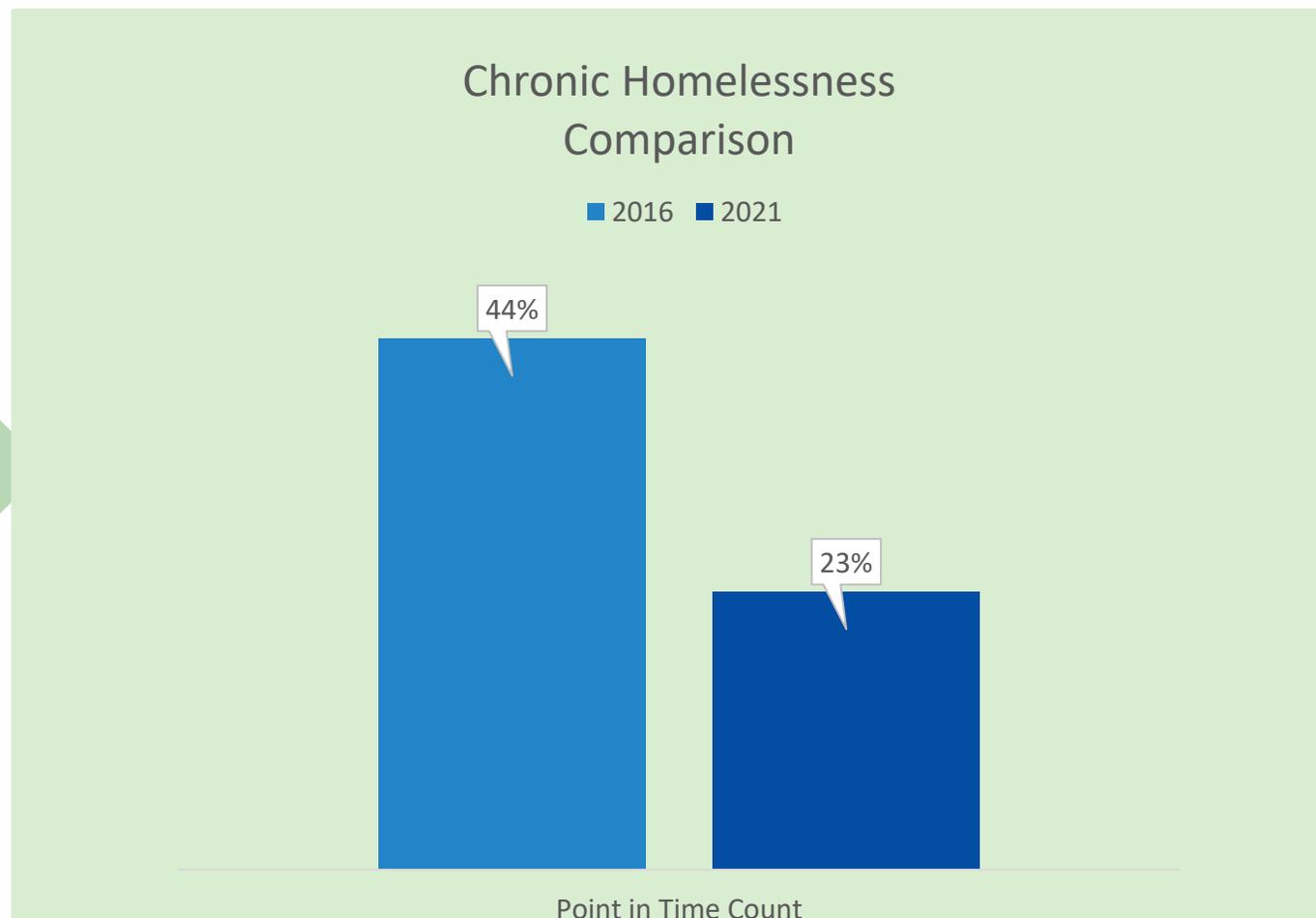


Key area of Impact 2

Desired Outcomes

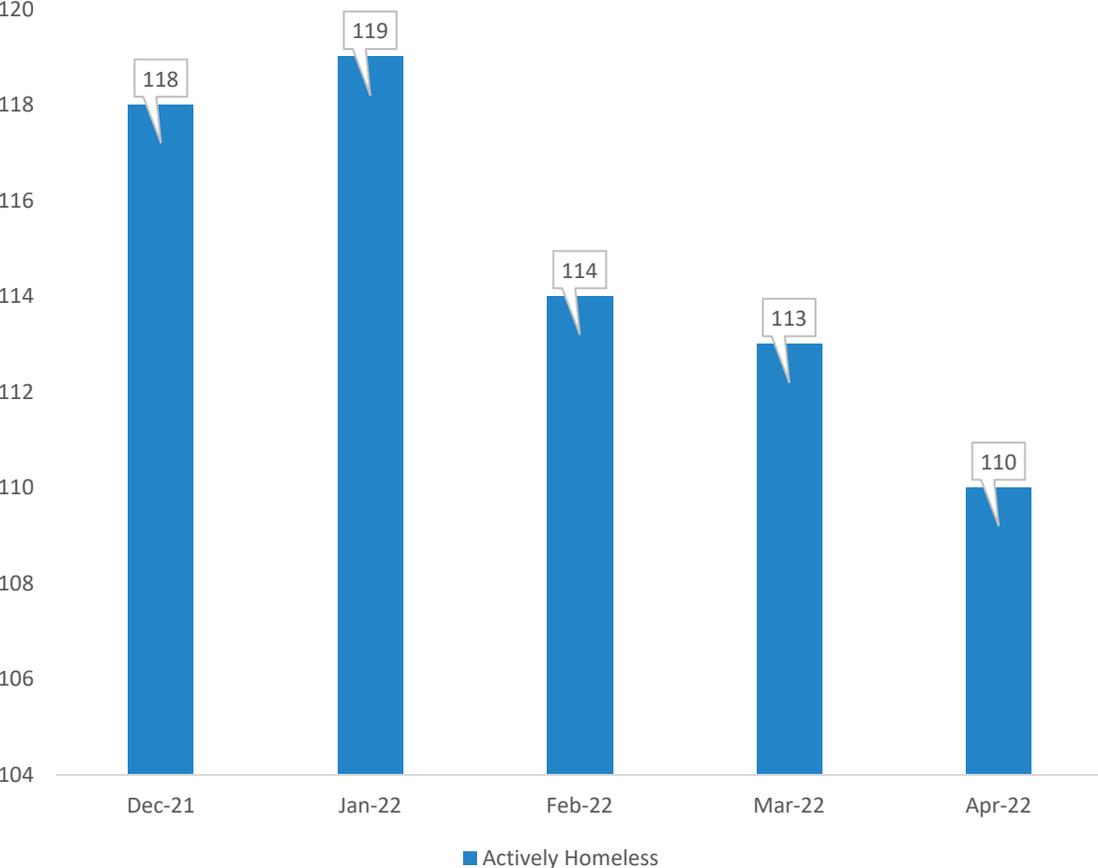
- See a measureable reduction in chronic homelessness (180 consecutive days)

Measured impact (*indicators*)

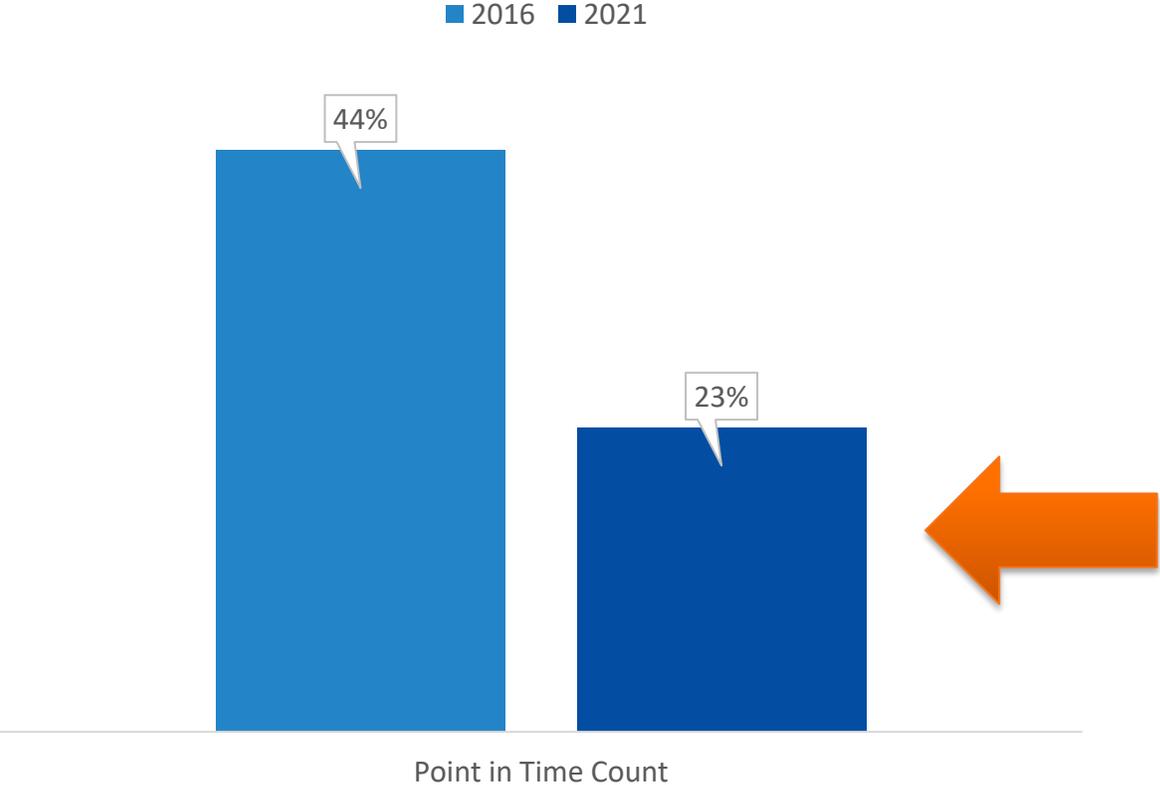


Comparing Chronic Homelessness

Actively Homeless 2021/2022

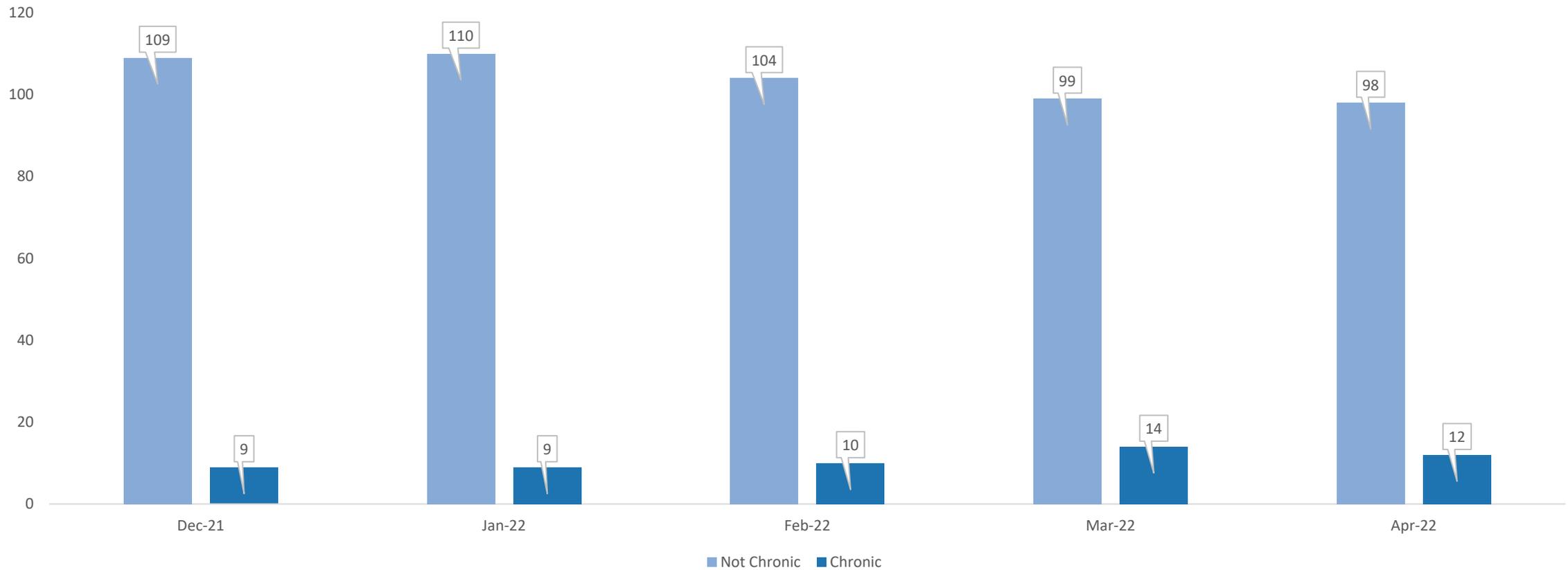


Chronic Homelessness Comparison



Chronic Homelessness Current Landscape

Actively Homeless



Continuation and sustainability



Thank you

Questions?

ACCESS AND SYSTEM NAVIGATION

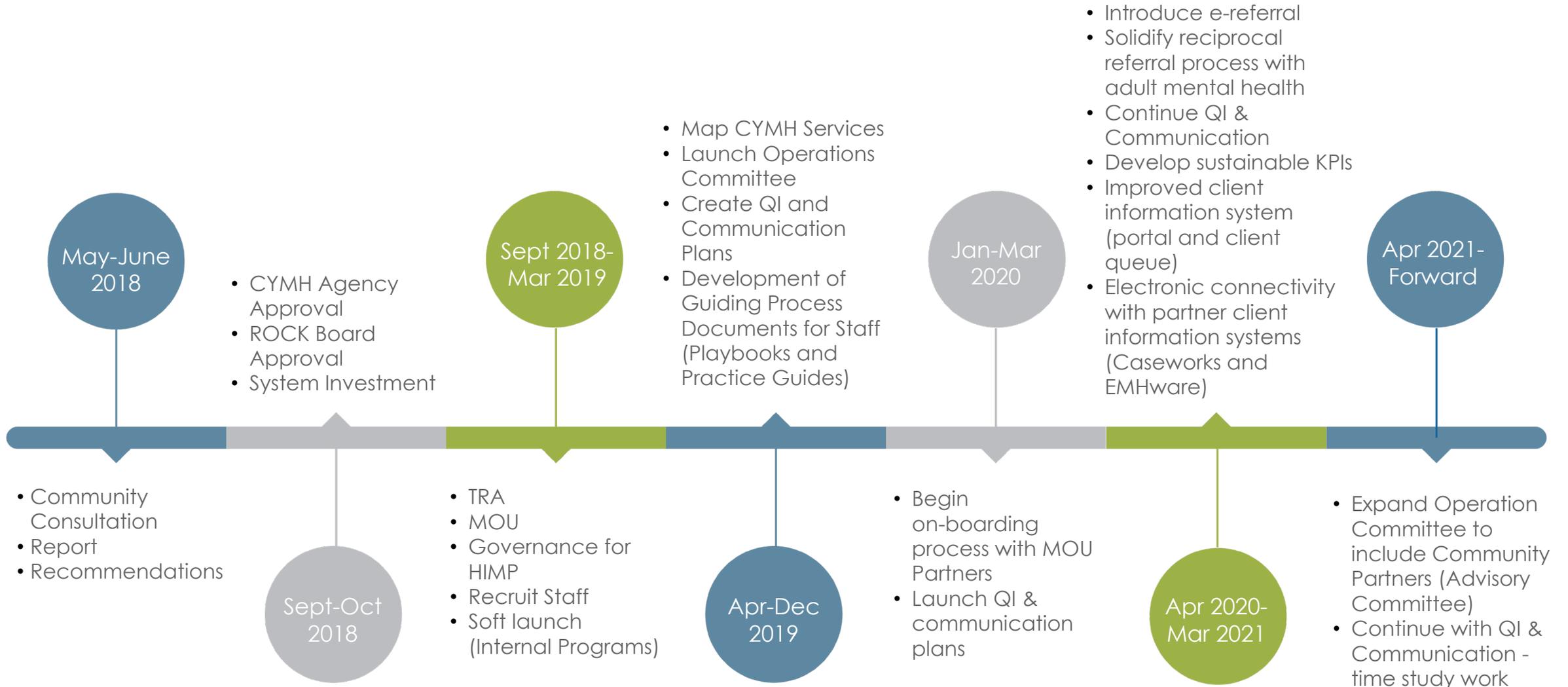
June 10, 2022

Presenters:
Kirsten Dougherty
CEO

Michelle Whalen:
Director of Services



Key Milestones



Access & System Navigation



Radius Child & Youth Services™
PREVENTION • INTERVENTION • RESEARCH



Nelson Youth Centres
Changing Young Lives



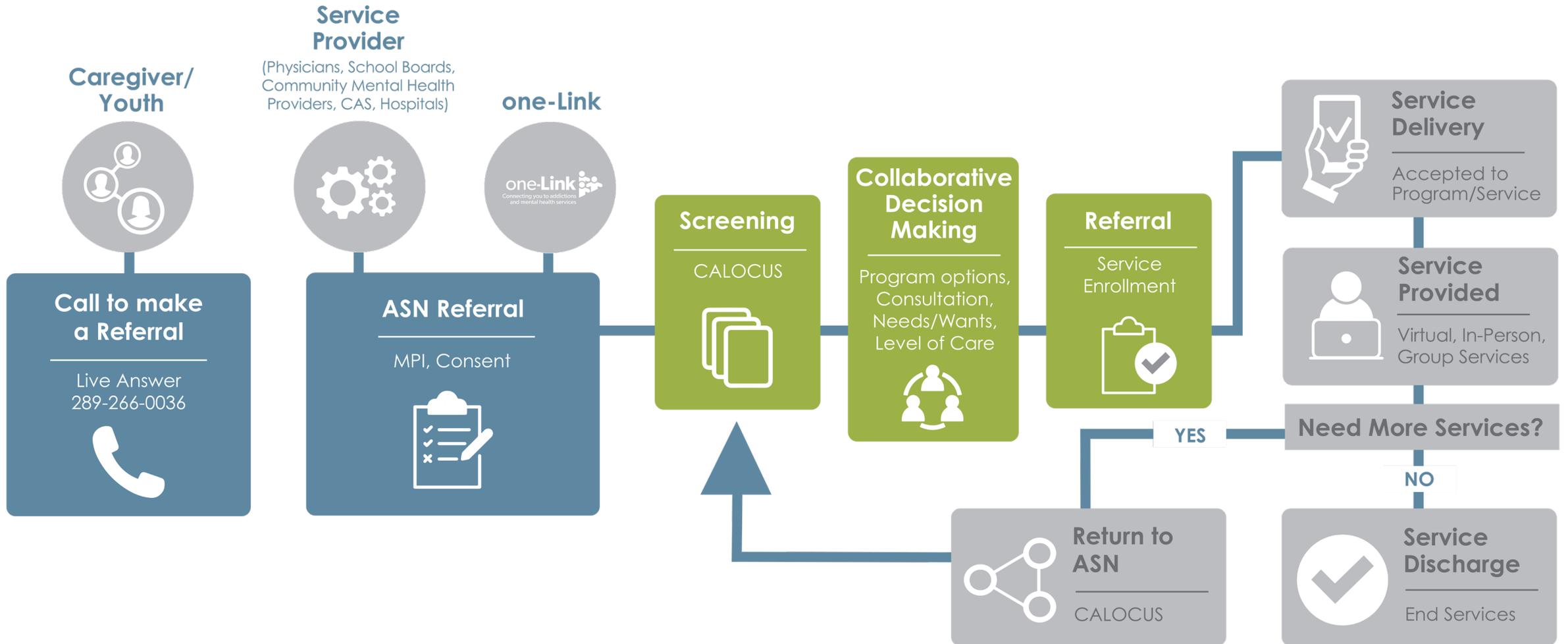
paH!



One Call, All Access for Child & Youth Mental Health

289-266-0036

Access & System Navigation



Key Components: Client Flow

Live Answer Access Line

One number for youth/families and service providers to call



One Universal Electronic Referral Form

With embedded consent – to be completed by Service Providers



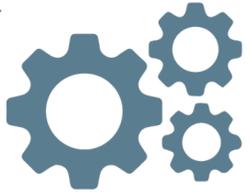
E-Referral

Between two client information systems – CaseWorks and EMHware



Multiple Avenues

To submit referral – Live Answer calls, fax, electronic referral portal for Service Providers



300+ Providers registered to date

CALOCUS

One Standard Assessment Tool



Equitable Access to Service for Families

Imbedded Interpretation

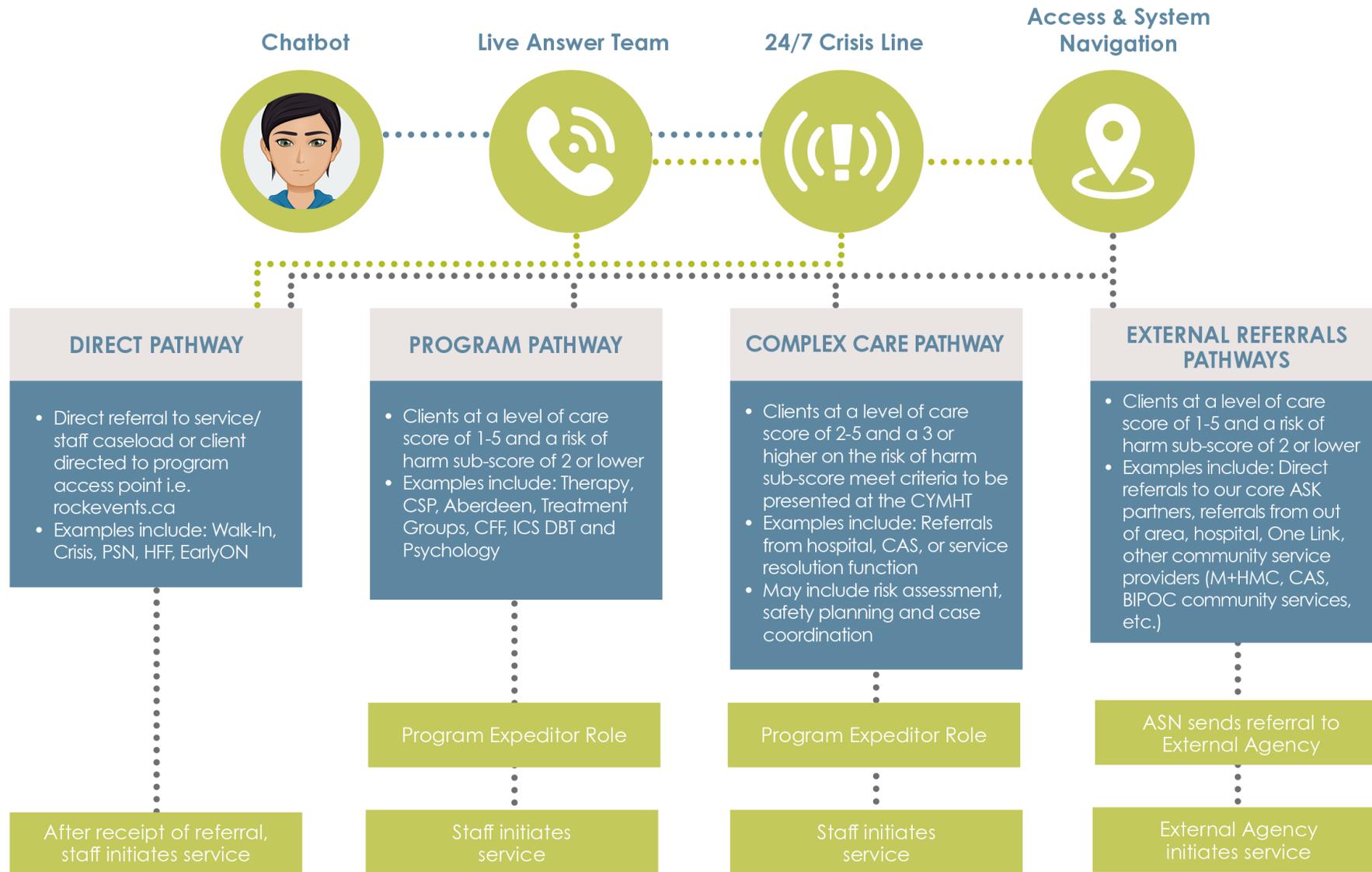


Ability to refer into system

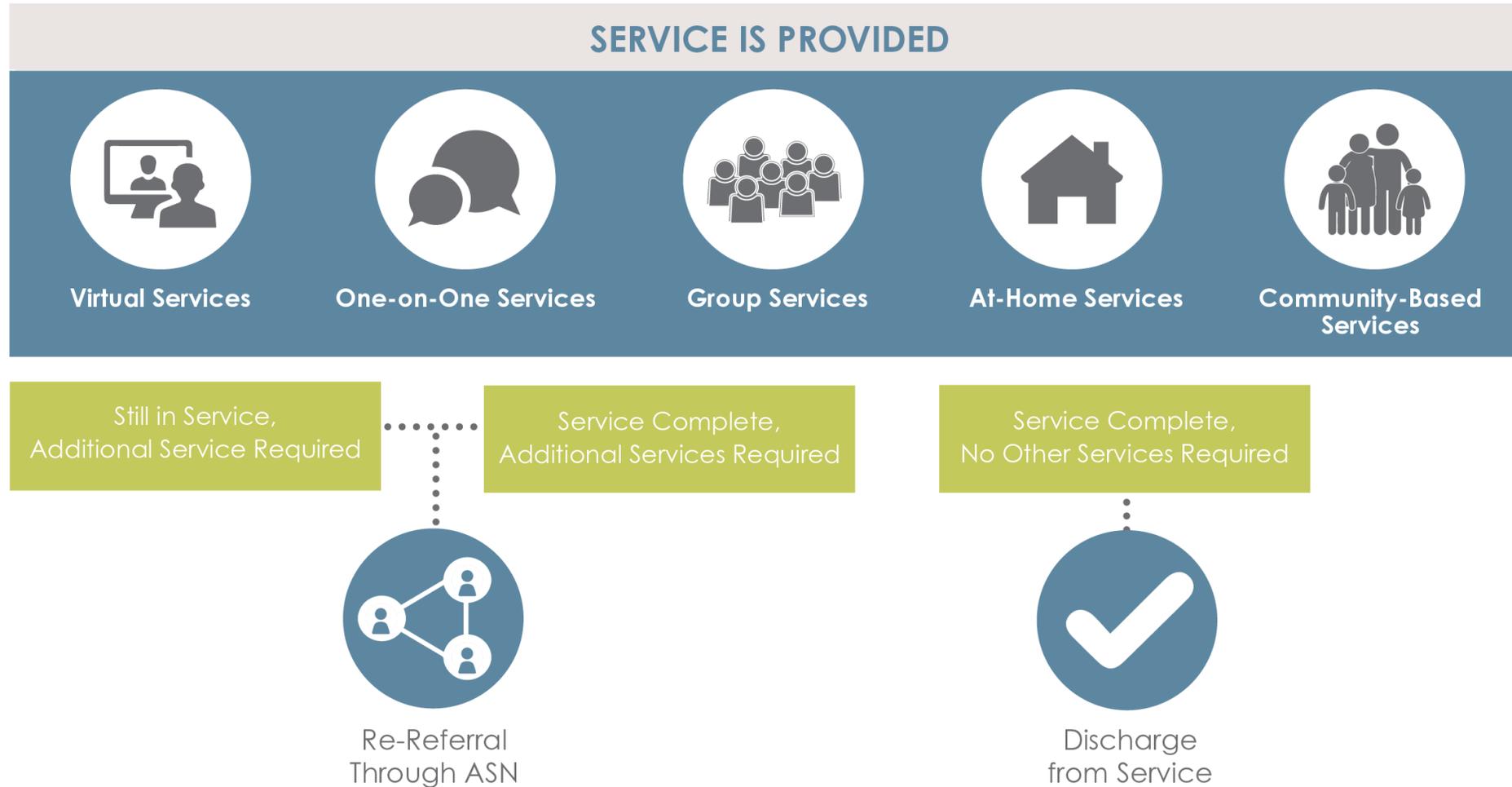
And gain access to a variety of services offered by the community



Client Flow: Part 1



Client Flow: Part 2



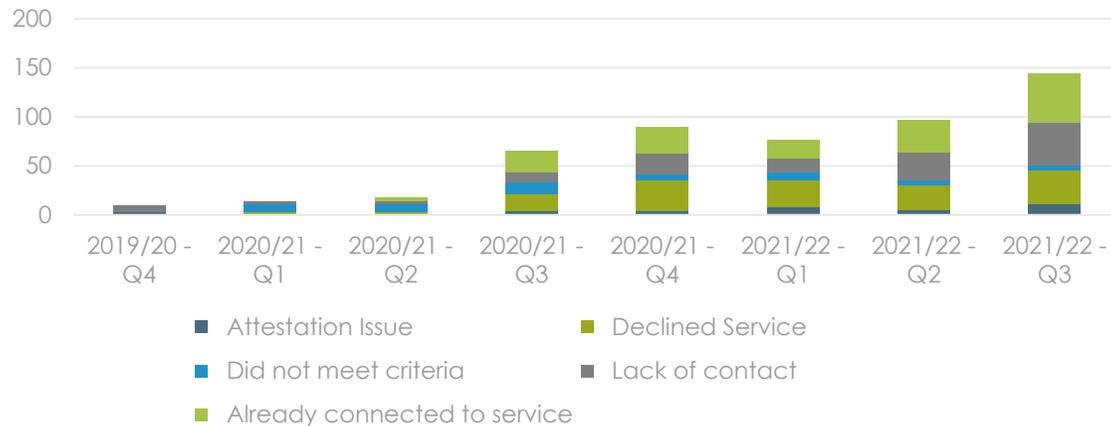
Key Performance Indicators

Indicator	2021/22-Q3
# of referrals received by ASN	743
New referrals	531
Re-referrals	212
# of referrals to program/service	613
# of clients exiting without referral	144
Attestation Issue	11
Declined Service	34
Did not meet criteria	6
Lack of contact	43
Already connected to service	50
Average days in queue	13.7

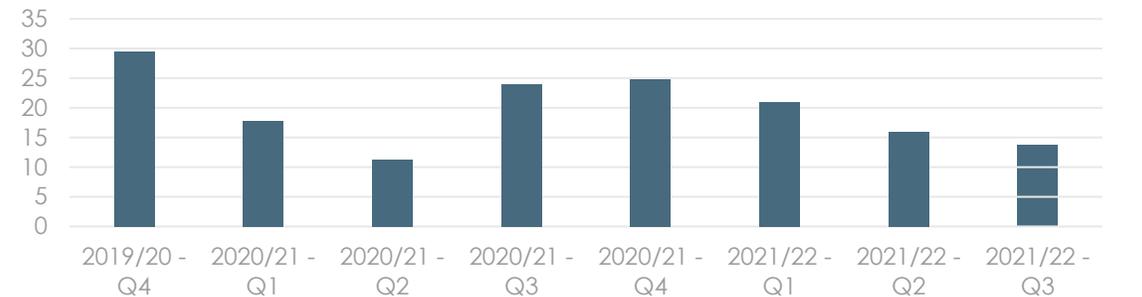
Referral Trends



Clients Exiting without Referral



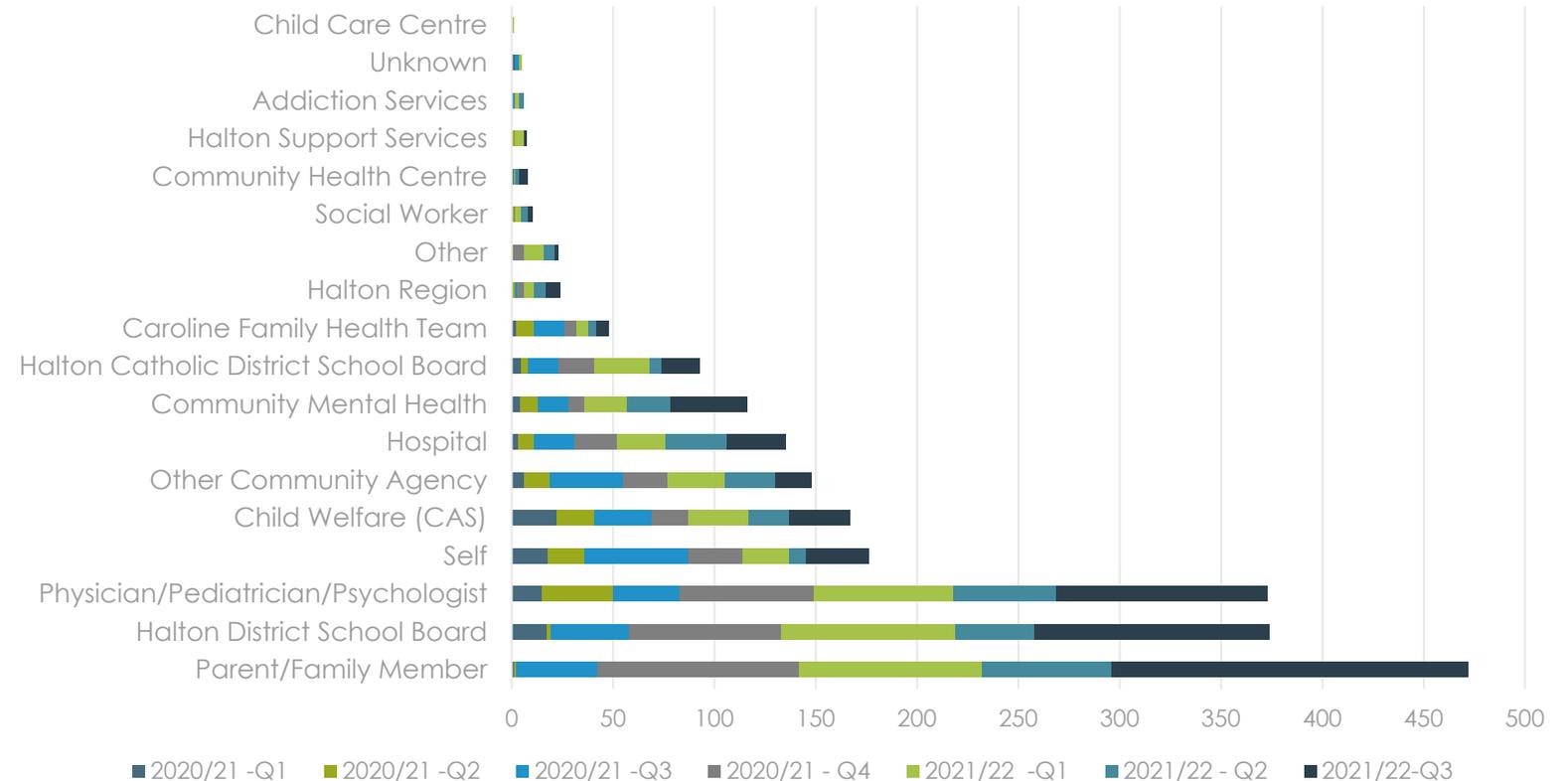
Average Days in Queue



Key Performance Indicators

Referral Source	2021/22-Q3
Parent/Family Member	176
Halton District School Board	116
Physician/Pediatrician/Psychologist	104
Self	31
Child Welfare (CAS)	30
Other Community Agency	18
Hospital	29
Community Mental Health	38
Halton Catholic District School Board	19
Caroline Family Health Team	6
Halton Region	7
Other	2
Social Worker	2
Community Health Centre	4
Halton Support Services	1
Addiction Services	
Unknown	
Child Care Centre	

Referral Sources Trends



Continuation and Sustainability



Governance and Operational Committees in place, Community Advisory Group meet on an on-going basis
Continued growth of the system- expansion and continuous QI



Stay abreast of current technologies and opportunities – ever evolving, continuing to meet the needs of the community



Monitor client service levels, KPIs and QI plans to understand when resources (funding and staff) will be needed to meet service demand

Toronto Community Crisis Service (TCCS) Pilots

June 2022



Agenda

Slide 3

Circle-In & Welcome

Slides 4-8

Introduction to Policing Reform

Slides 9-25

How did the TCCS Pilots come to be?

Slides 26-37

What is the TCCS?

Slides 38-41

What is the TCCS's place within the context of emergency services?

Slide 42

Additional Resources

BLACK
LIVES
MATTER

Policing Reform Themes



**Alternative Community Safety
Response Models**



Police Chief Selection Criteria



**Police Budget and Budgetary
Transparency**



**Independent Auditing & Police
Service Accountability**



**Data Sharing & Information
Transparency**

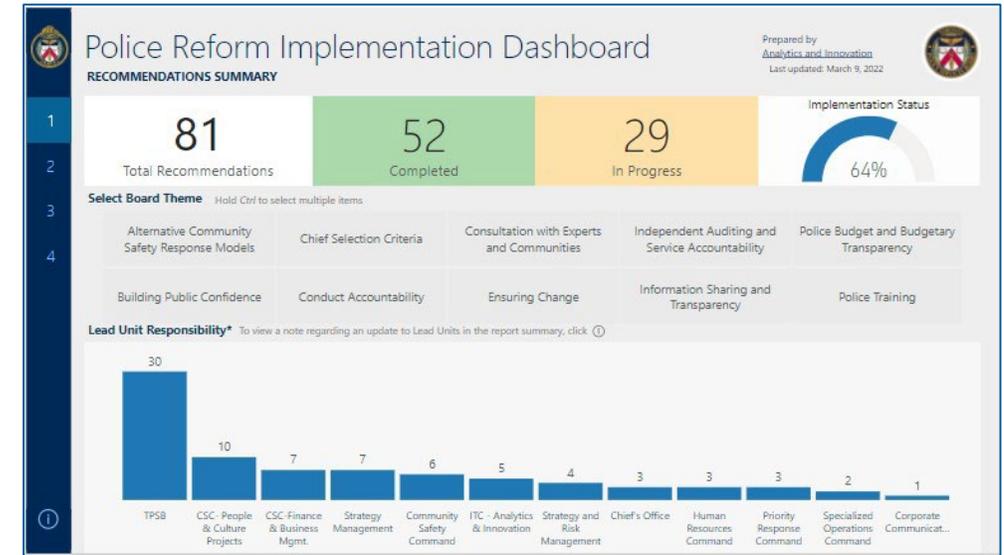
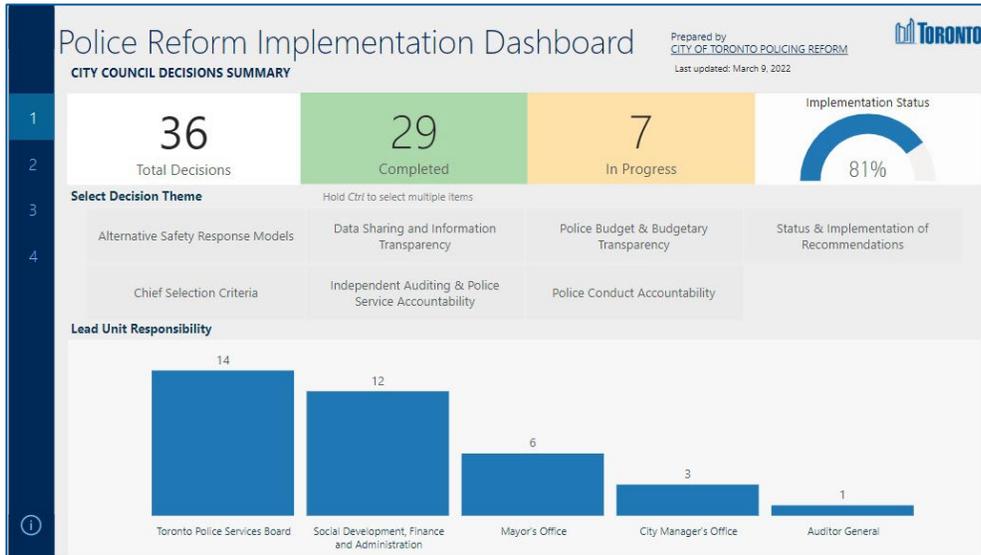


Police Conduct Accountability



**Status & Implementation of
Recommendations**

Policing Reform Implementation Dashboards



Available on the City's Policing Reform website:
<https://www.toronto.ca/community-people/get-involved/community/policing-reform/>



Available on the TPS's website:
<https://www.torontopolice.on.ca/tpsb-reform-implementation/>

How did the TCCS pilots come to be?

Community Engagement To Build the New Service



33 Community Roundtables

Hosted by 17 community orgs with 500+ participants



2 Public Surveys

Combined total of 6,384 responses



29 Key Subject Matter Experts Interviewed

Legal, health experts, front-line workers, academics, activists



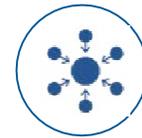
Public Opinion Poll

1000 person representative sample of Torontonians



Online Discussion Guide & Feedback Forms

- *Mitigate for COVID-19 restrictions*
- *5 community submissions received with 32 participants*



Alternative Community Safety Response Accountability Table

- *Representation from 50+ community organizations*
- *Ongoing*



Scan of 53 crisis response models from 50 jurisdictions

- *17 co-response models and 36 non-police led response models within Canada and internationally*

Who was part of this work?



Roundtables Facilitated by:

- 2-Spirited People of The 1st Nations
- Across Boundaries
- Black Coalition for AIDS Prevention
- Black Creek Community Health Centre
- Black Health Alliance
- Canadian Centre for Victims of Torture
- Dixon Hall Neighbourhood Services
- ENAGB Indigenous Youth Agency
- FCJ Refugee Centre
- Gerstein Crisis Centre
- Native Child and Family Services of Toronto
- Reach Out Response Network
- Sherbourne Health
- South Riverdale Community Health Centre – Moss Park
Overdose Prevention Site
- TAIBU Community Health Centre
- Toronto Youth Cabinet
- Toronto Trans Coalition Project



Interviews with:

- Caitlyn Kasper, Staff Lawyer, Aboriginal Legal Services
- Christa Big Canoe, Legal Advocacy Director, Aboriginal Legal Services
- Howard F. Morton, Legal Aid Ontario, former Director of the Special Investigations Unit
- Mark Sandler, Lead Counsel, Independent Civilian Review into Missing Person Investigations
- The Honourable Justice Gloria Epstein, Reviewer, Independent Civilian Review into Missing Person Investigations
- Centre for Addiction and Mental Health (CAMH)
- Delta Family Resource Centre
- Dixon Hall Neighbourhood Services
- Downtown Yonge BIA
- Empowerment Council
- Food Share
- House of Friendship
- Human Services and Justice Coordinating Committee
- Ministry of Community Safety and Correctional Services
- Pathways to Care
- Reconnect Community Health Services
- Sound Times
- Strides Toronto - What's up Walk-in Clinic
- The Walkabout
- Toronto Police Services - Mobile Crisis Intervention Teams (MCIT)
- University of Toronto
- Voices from the Street
- Women's Health in Women's Hands Community Health Centre

Community Engagement Highlights



Principles of Care

The service should be...

- **Community-driven and led**
- **Trauma-informed**
- **Non-judgmental**
- **Non-coercive**
- **Evidence-based**
- Founded on principles of **harm reduction** and **anti-oppression**
- Locally developed and **reflective of the communities it serves** (e.g. ethno-cultural, language, gender-based considerations)

Accountability

- Need for a **community-based governing/oversight body**
- **Communications about the service** and what to expect should be **clear and posted publicly**
- Need for **transparent data collection and reporting**
- Need to maintain **ongoing discussions that address community concerns and emerging issues** related to the service.

Service Access

- Accessible to all through **multiple channels**
- Operate **24/7**
- **'No wrong door'**

Response Teams

- **Multidisciplinary team**
- **Lived and professional experience** with mental health and substance use crises
- **Anti-oppression/Anti-racism** training
- **De-escalation** training

Population-Specific Considerations

- Identified need for **Black-led and Indigenous-led responses**
- **Intersectional** approach is required
- Support for **complex needs**
- More options and funding for **cultural and identity-specific** mental health care and supports are needed



Non-Police-Led Crisis Response in Toronto

Gerstein Crisis Centre

- 24 hour Crisis Services for individuals 16+ living in the City of Toronto who are living with mental health, concurrent or serious substance use issues.
- Telephone crisis line, mobile crisis team, community-based crisis beds, short term follow-up support, referrals

Distress Centres of Greater Toronto

- Offers access to emotional support from the safety and security of the closest telephone. Callers can express their thoughts and feelings in confidence. Callers' issues can include problems related to domestic violence, social isolation, suicide, addictions, mental and physical health concerns.

Anishnawbe Mental Health Crisis Management Service

- Crisis management services and referrals to internal and community services for members of Indigenous community in Toronto
- Places Indigenous culture and tradition at its core, uses a client-centered, strengths-based, trauma-informed approach

Scarborough Hospital Mobile Crisis Program

- Provides Telephone Crisis Response and community crisis response to individuals over 16 years of age who are experiencing a mental health crisis in Scarborough and East York.

Jurisdictional Scan: International Pilots

B-Heard

NYC, New York

- Behavioral Health Emergency Assistance Response Division (B-HEARD)
- Accessed via 911
- Staffed by paramedics + mental health clinicians
- Provides mental health care, suicide response, medication support and basic medical care
- Also have a warm line NYC-WELL

Street Crisis Response Team

San Francisco, California

- Accessed through 911
- Team consists of community paramedic, behavioral health clinician, and behavioral health peer specialist who has lived experience of homelessness, mental illness, and/or substance use disorder
- Response to calls related to people suffering from mental health and substance use challenges on city streets

STAR

Denver, Colorado

- Support Team Assisted Response (STAR)
- Accessed through 911 as a 4th dispatch option and its own 10 digit number
- Team consists of mental health clinician and paramedic
- Mobile crisis intervention for mental health, substance use, and other public health emergencies
- Provides free medical care and first aid
- Modeled on CAHOOTS

Portland Street Response

Portland, Oregon

- Accessed through 911
- Team will consists of EMTs, licensed mental health therapist, and community health worker
- Focus on mobile support for people experiencing houselessness or a behavioral / mental health crisis
- Trained by CAHOOTS



Jurisdictional Scan



**CRISIS
DIVERSION
TEAM**

Reach Edmonton 24/7 Crisis Diversion Team
Edmonton

- Not-for-profit multi-agency partnership
- Mobile response to people who are in distress and vulnerable on the streets of Edmonton
- Provides comprehensive, coordinated access to 24-hour services for vulnerable residents
- Provides warm handoffs by connecting the individual with the support that they need for the immediate crisis
- Purpose is to reduce the need for medical, judicial and police interventions



KUU-US Crisis Line
Port Alberni/ unceded territory of
Tseshaht and Hupacasath



Okihcitawak Patrol Group
Saskatoon



Bear Clan Patrol
Winnipeg

- Indigenous-led community safety patrol since 1992
- Aims to provide restoration and maintenance of harmony within the community by:
 - promoting and providing safety
 - conflict resolution
 - mobile witnessing and crime prevention
 - maintaining a visible presence on the streets
 - providing an early response to situations
- Volunteer-led (1500 volunteers!)

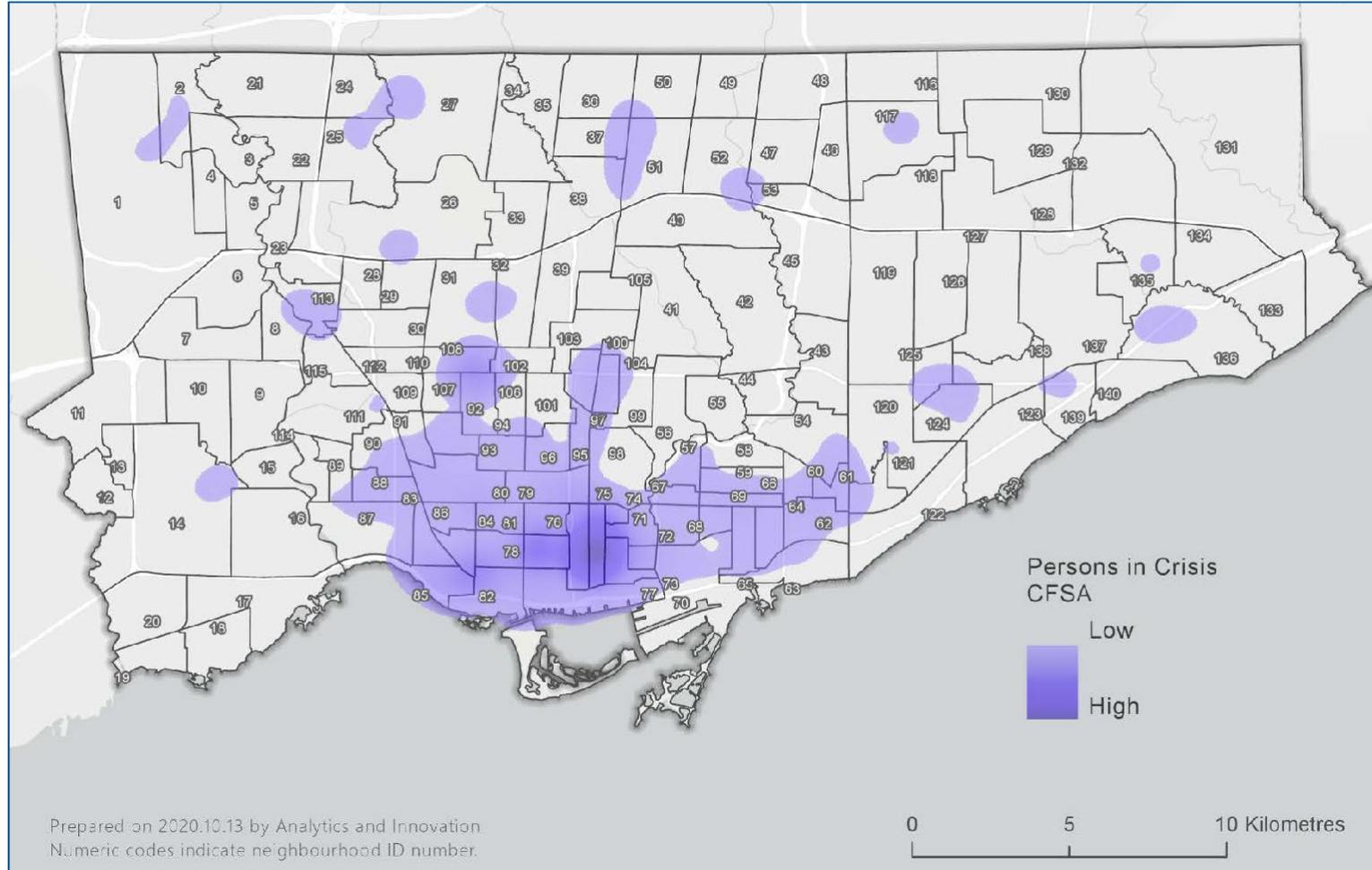


Wiindo Debwe Mosewin ("walking together in truth")
Thunder Bay

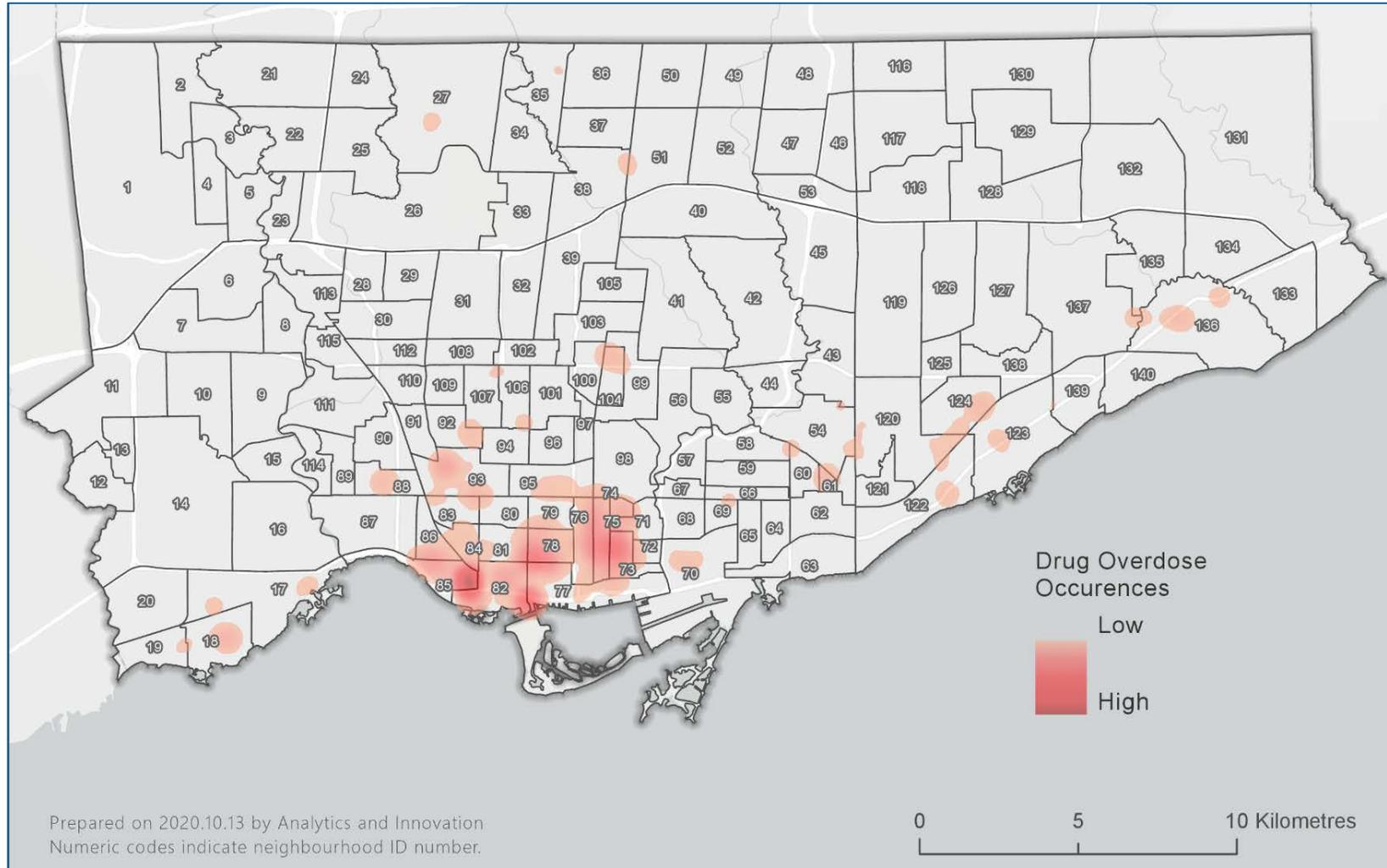


Street Team OutReach Mobile (STORM)
Ottawa

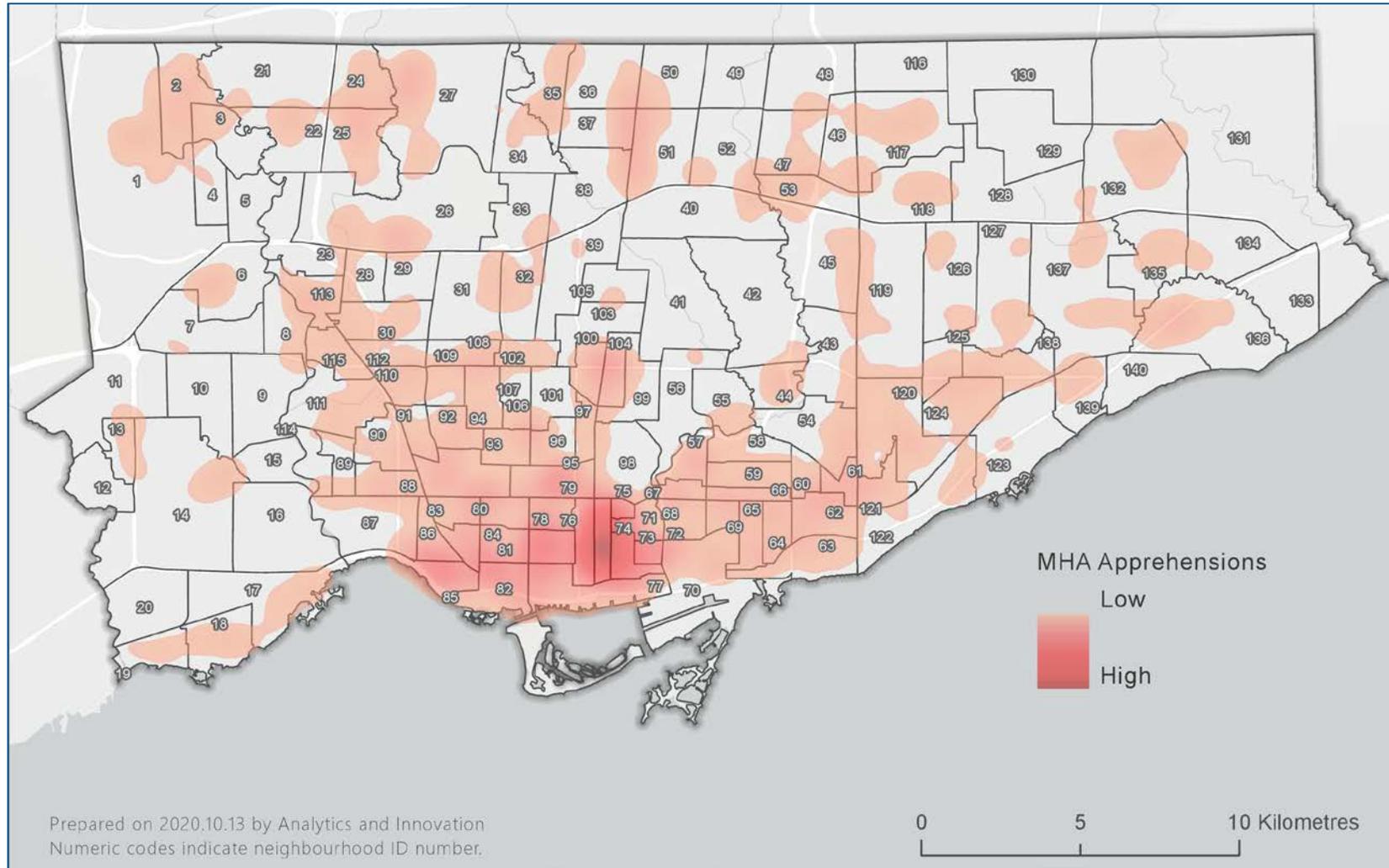
TPS Data – Map of Person in Crisis Calls for Service Attended in 2020



TPS Data – Map of Drug Overdose Occurrences in 2020



TPS Data – Map of Mental Health Act Apprehensions in 2020



What is the TCCS?

Re-Imagining Crisis Response



Underinvestment in mental health treatment over several decades & **lack of capacity in the community sector** has resulted in many people not receiving timely or appropriate support and **falling into distress as a result.**



32.4% increase in “person in crisis” calls received by the Toronto Police Service over the last 5 years.



Addressing health issues through a law enforcement lens creates **service barriers and risks**, particularly for **Indigenous, Black and equity-deserving communities.**

Residents, communities and organizations have called on the City of Toronto to **reimagine a new non-police model of response** that is client-centred, trauma-informed, and reduces harm.

A Made-in-Toronto Approach



Toronto Community Crisis Service

- The Toronto Community Crisis Service is a pilot led by community health partners in four areas across the City.
- The pilot will operate from 2022-2025, with a view to full scale city-wide implementation in 2026.
- The service is one of the key priority actions under SafeTO – Toronto’s 10 Year community safety and wellbeing plan.

SafeTO

- Ontario Police Services Act requires all municipalities to develop a **Community Safety and Well-Being Plan by July 2021**
- SafeTO is a **comprehensive Ten-Year Community Safety and Well-Being Plan** that reimagines core elements of community safety and well-being in order to shift our paradigm from a reliance on reactive emergency response to a culture of proactive prevention.
- A **roadmap** for how the City and social systems that serve Torontonians to **work collaboratively** to support community safety and well-being.
- The **TCCS pilots are one of SafeTO's key priority actions** under year one efforts to reduce vulnerability through proactive mental health

SafeTO:

Toronto's **Ten-Year Community Safety and Well-Being Plan**

July 2021



How the Pilots



City's Role

City will serve as **backbone support**, **intergovernmental advocacy lead**, develop **public education campaigns**, and identifying areas for **increased community investments**.



Governance

City-Wide Pilot Community Advisory Table will shape and guide the pilot throughout implementation.



Evaluation

A **third-party** will lead monitoring, **evaluation** and **knowledge mobilization**, including developing a community of practice around crisis support.



Access & Intake

FindHelp 211 will dispatch the calls to the appropriate pilot team.



Anchor Agencies

Anchored in a **health service providers** (e.g. Community Health Centre), the anchor partners are funded to hire and manage the mobile crisis teams, as well as provide wrap-around supports and case management.



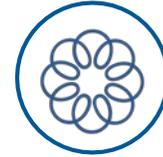
Pilot Teams

Each of the proposed **multi-disciplinary** community-based crisis response teams would comprise, **at minimum, two crisis workers** that respond to calls together to ensure mutual safety.

Guiding Principles



Enable **multiple coordinated pathways** for clients to access crisis and support services (i.e. a “no wrong door” approach)



Ensure service delivery is **client-centric, culturally relevant**, and allows for **individualized support needs**



Ensure **harm-reduction principles & a trauma-informed approach** are incorporated in all aspects of crisis response

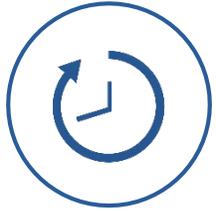


Guarantee **accountability to service users' voices** and outcomes by establishing clear pathways for complaints, issues and data transparency.

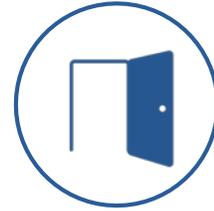


Develop a **transparent, consent-based, care model** of crisis response

What is the *Toronto Community Crisis Service*?



24/7 service



“No wrong door” approach that leverages multiple intake channels



Voluntary, consent-based



Mobile crisis teams



Serves clients 16+



Post-crisis follow-up, case management and service navigation



Trauma-informed care and harm-reduction

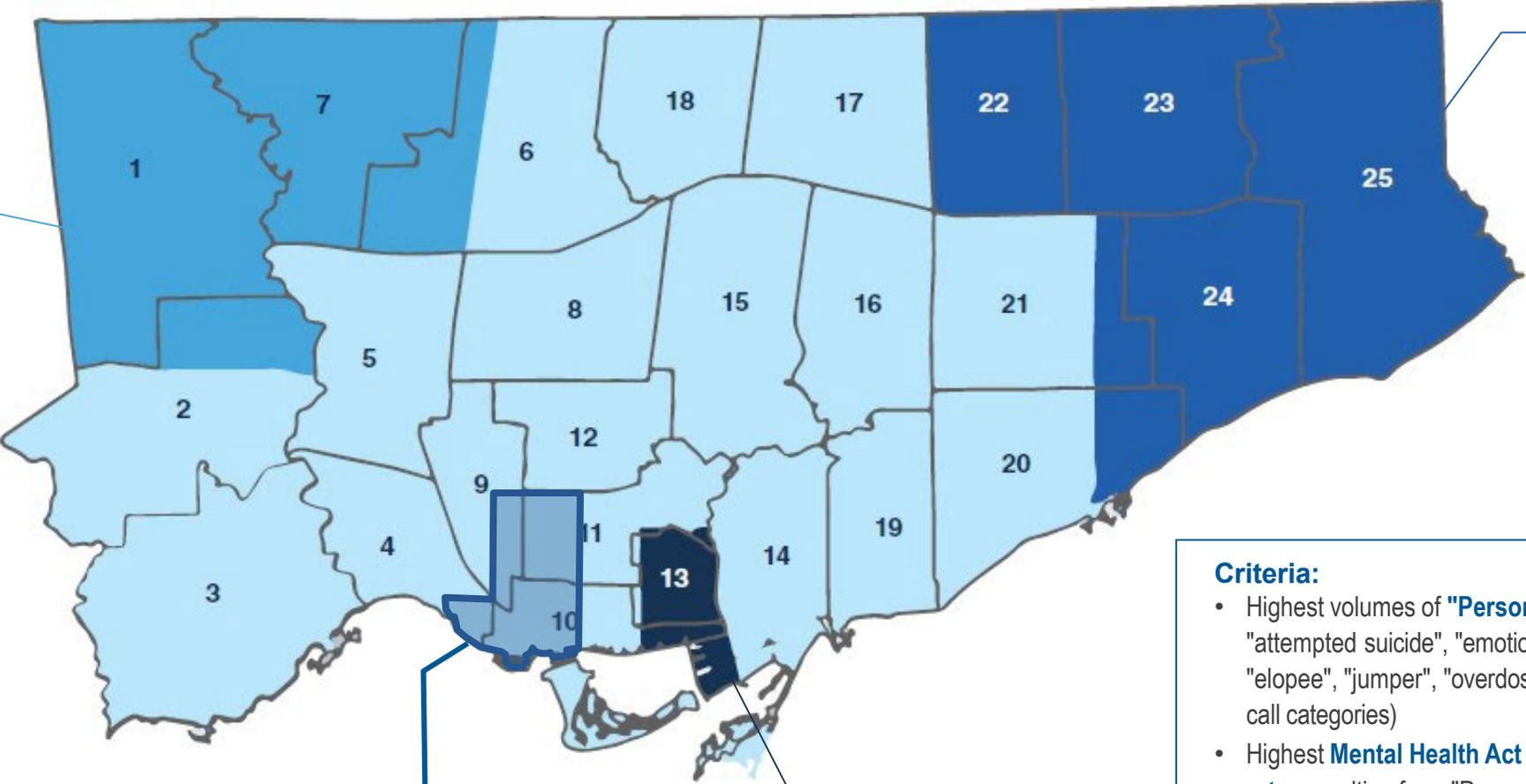


Culturally relevant services and referral network

Pilot Geography

Northwest Pilot
TPS Divs. 23 & 31

Northeast Pilot
TPS Divs. 42 & 43



Downtown West
(Indigenous-led) Pilot
TPS Div. 14

Downtown East
Pilot
TPS Div. 51

Criteria:

- Highest volumes of **"Persons In Crisis"** calls (e.g. "attempted suicide", "emotionally disturbed person", "elopee", "jumper", "overdose" and "threaten suicide" call categories)
- Highest **Mental Health Act (MHA) apprehension rates** resulting from "Persons in Crisis" calls
- Volumes of calls attended by the **Mobile Crisis Intervention Teams (MCIT)**
- **Geographic equity** (i.e. the availability of mental health and supportive services) and alignment with Neighbourhood Improvement Areas.

Locally Responsive Implementation

Est. Launch

N.E.



- **Afrocentric approach** to mental health and wellbeing
- Network of **7 local partners**: Hong Fook Mental Health Association, Strides Toronto, CMHA Toronto, CAMH, Scarborough Health Network, Scarborough Centre for Healthy Communities, Black Health Alliance

LIVE

D.T.E.



- **Strengths-based, non-medical, trauma informed, harm reduction approach** to crisis for over 30 years
- Network of referral pathways: Strides Toronto, Toronto North Support Services, Unity Health Toronto, WoodGreen Community Services, Health Access St.James Town, Inner City Health Associates, Regent Park CHC, Parkdale Queen West CHC

LIVE

D.T.W.



- *Maawinizo-wiidookidaading Maanda Pii Mineskaag* ("Supporting Each Other in this Time of Need") **Indigenous-led approach** with a **focus on harm reduction and holistic health and wellness** that centres the individual at the centre of the medicine wheel.
- Network of **2 local partners**: ENAGB Indigenous Youth Agency, Parkdale Queen West CHC

JULY
2022

N.W.



- **Anti-racist, anti-oppressive, and culturally safe** approach
- Network of **8 local partners**: Yorktown Family Services, Jane and Finch Centre, CAFCAN, Rexdale CHC, Black Creek CHC, Addiction Services Central Ontario, Black Health Alliance

JULY
2022

211 Intake & Dispatch Partner



- 211 is the **easy-to-remember 3-digit information helpline** that connects you to complete range of government, health, community and social services.
- 211 is **free, confidential and available 24/7**, 365 days a year in 150+languages!
- **Handles more than 250,000 contacts annually**, and more than **60,000 agencies and programs maintained in their provincial database**
- Provides information and referral to:
 - Food Bank & Meal Programs
 - Income Support/Financial Assistance
 - Mental Health Support
 - Housing Assistance
 - Seniors Support Programs
 - Newcomer Services & More!

High-Level Service Map



What skillset do crisis workers have?

- A minimum of 5 years experience in community mental health, crisis intervention, case management or related field
- Educational background in Health Sciences, Social Work, Health Administration or related discipline
- Experience in crisis intervention and de-escalation
- Experience in suicide risk assessments and interventions using the ASIST model
- Experience working with issues related to substance use and concurrent disorders within a harm reduction framework
- Experience to adapting interventions to a diverse client group
- Personal experience of mental health and substance use challenges

Training Curriculum Overview

Foundational Principles (20.5 hours)

- Harm Reduction (6 hours)
- Trauma-Informed Care (3 hours)
- Staff Wellbeing, Awareness and Resilience (6 hours)
- Panel of people with lived experience and family members of those who have participated in inquests (2.5 hours)
- Panel hosted by Voices from the Street centering people with lived-experience of the mental health system (3 hours)

Core Skills (81 hours)

Crisis Intervention & De-escalation

- Crisis Intervention (12 hours)
- Suicide Intervention (12 hours)
- Pharmacology (6 hours)
- Communications Skills (6 hours)
- Community Safety Strategies (6 hours)

Privacy & Legislation

- Mental Health Act (3 hours)
- PHIPA (3 hours)
- Documentation Skills (6 hours)

Technical Training

- Standard Operating Procedures (1.5 hours)
- 211 Dispatch (1.5 hours)
- Radio Technology (1.5 hours)
- First Aid/CPR + Naloxone (16 hours)

System Navigation

- 211 Information & Referrals (1.5 hours)
- MCIT (1.5 hours)
- FOCUS (1.5 hours)

Applied Learning (39 hours)

Focus on:

- Undocumented communities (3 hours)
- Newcomer mental health (3 hours)
- Supporting youth and families (3 hours)
- Indigenous communities (6 hours)
- Black communities (6 hours)
- Neurodiversity and Brain Injuries (6 hours)
- Gender and Sexual diversity (6 hours)

Scenario training (12 hours)

Professional Development

- There will be ongoing training opportunities
- Be sure to discuss potential areas of learning and development with your management that could be offered as part of professional development

Visual Appearance of Crisis Workers

- All crisis workers will have a lanyard and ID
- All crisis workers will be trained to identify themselves to any emergency services staff



Visual Appearance of Crisis Workers

- TCCS vehicles will be marked with decals on the back of the vehicle including the City of Toronto logo, community partner logo, and the TCCS graphic service identifier.



Stories from the frontline

Situation: Call came in to 911 from a business located in 51 Division. An employee called 911 because one of their colleagues disclosed their intent to commit suicide after their shift.

First responders on the scene: CRU, MCIT, TCCS

Interventions provided by TCCS:

- Suicide Risk Assessment
- Suicide Intervention
- Motivational Interviewing
- Immediate Safety Planning
- Short-term crisis planning

Outcome:

- Diversion from CRU and MCIT intervention
- ED diversion
- Direct follow up that evening and following day
- Person able to participate in their own crisis management plan
- Consent to ongoing suicide risk assessment support
- Crisis Management Follow Up
- Referrals made to community counselling

Stories from the frontline

Situation: Call came in to 911 from a community health team, requesting a wellness check with one of their clients. This person was described to be in a highly anxious state, feeling unsafe, threatened, and fearful of others. The clinical team believed the client to be exhibiting paranoid thinking and was worried about their well-being.

First responders on the scene: TCCS

Interventions provided by TCCS:

- Crisis de-escalation
- Emotional regulation tools to reduce anxiety
- Immediate Safety Planning
- Crisis Plan established

Outcome:

- Transportation to hospital by TCCS – voluntary, chosen outcome by client
- Support and advocacy during the intake process
- Crisis Management Follow Up
- Referrals made to community counselling

Stories from the frontline

Situation: A call was made to 911 from an apartment building resident who was concerned about their neighbour – they could hear loud banging and yelling from the apartment. A second call came later in the day from the building concierge, describing subsequent reports from other concerned neighbours.

First responders on the scene: TCCS, CRU, MCIT, EMS, FIRE

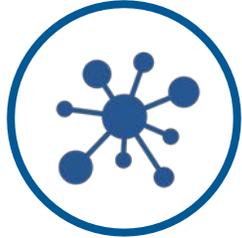
Interventions provided by TCCS:

- 1st visit: Risk assessment completed; rapport building with client; assessment of active mental health symptoms; developed a crisis plan for the day, including consent to a planned follow up visit by TCCS that evening
- 2nd visit: Risk assessment completed; supportive counselling; safety planning with client – emergency services called

Outcome:

- Safety of client and immediate safety concerns of other tenants addressed
- TCCS completed safety assessment - observed a strong chemical smell coming from the unit and emergency services were called.
- Client apprehended and brought to hospital
- TCCS provided follow-up call to hospital the following day

Role of Toronto Police Services



Support the implementation of pilots through ongoing communication and cooperation.



Amend necessary policies, practices and procedures to align 911 service integration

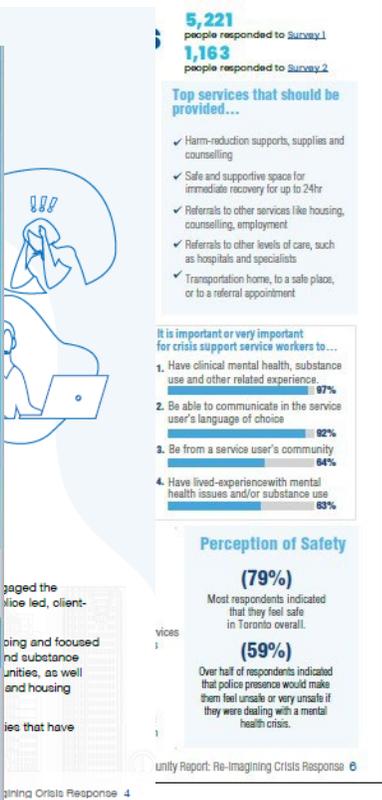
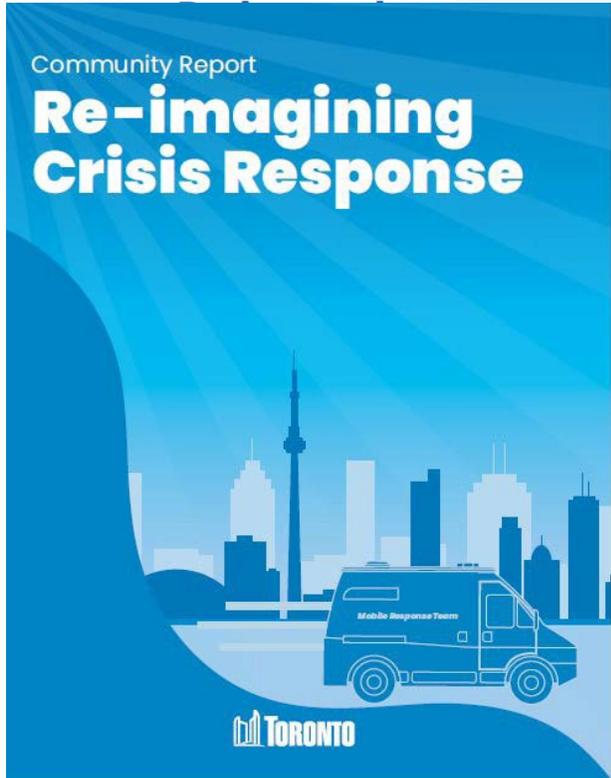


Train 911 intake staff about the pilot and its objectives.



Regularly sharing data related to call diversions, geographic distribution and other metrics related to crisis intervention.

Additional Resources



Available on the Policing Reform website!
<https://www.toronto.ca/community-people/get-involved/community/policing-reform/>

City Council consideration on June 29, 2020

CC22.2	ACTION	City Council consideration on February 2, 2021		
Changes to Policing in Toronto	EX20.1	ACTION	Amended	Ward: All

City Council Decision
 City Council on June 29 and 30, 2020 adopted the following:

1. City Council direct the City Manager Board, community-based organizations, and organizations to develop alternative models to provide matching funds for pilots.

City Council Decision
 City Council on February 2, 3 and 5, 2021, adopted the following:

1. City Council endorse the 2022 implementation of four community crisis support service pilots as outlined in Attachment 1, Framework to Pilot the Community Crisis Support Service and Attachment 2, Map of the Proposed Community Crisis Support Service, to the report (January 13, 2021) from the City Manager.
2. City Council direct that a guiding principle of the Community Crisis Support Service is that the Service will be the primary first responder to mental health crisis calls received during the pilot program and subsequent to full implementation.





Questions

Mohamed Shuriye

Manager

Policing Reform

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Andrea Westbrook

Manager, Toronto Community Crisis Service

Gerstein Crisis Centre

awestbrook@gersteincentre.org

COMMUNITY SAFETY AND WELL-BEING PLAN FOR YORK REGION: Data and Decision Support

Presented to:
GTHA Community Safety & Well-being Symposium 2022

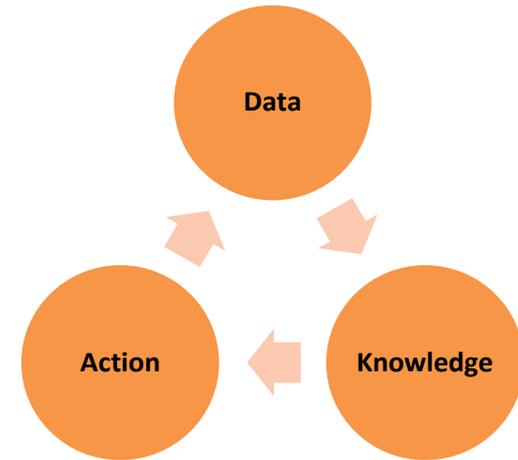
Anna Malenkov
Program Manager
Data Services

June 10, 2022



Data Use — All Plan Phases

- Knowledge based on data
- Actions based on knowledge

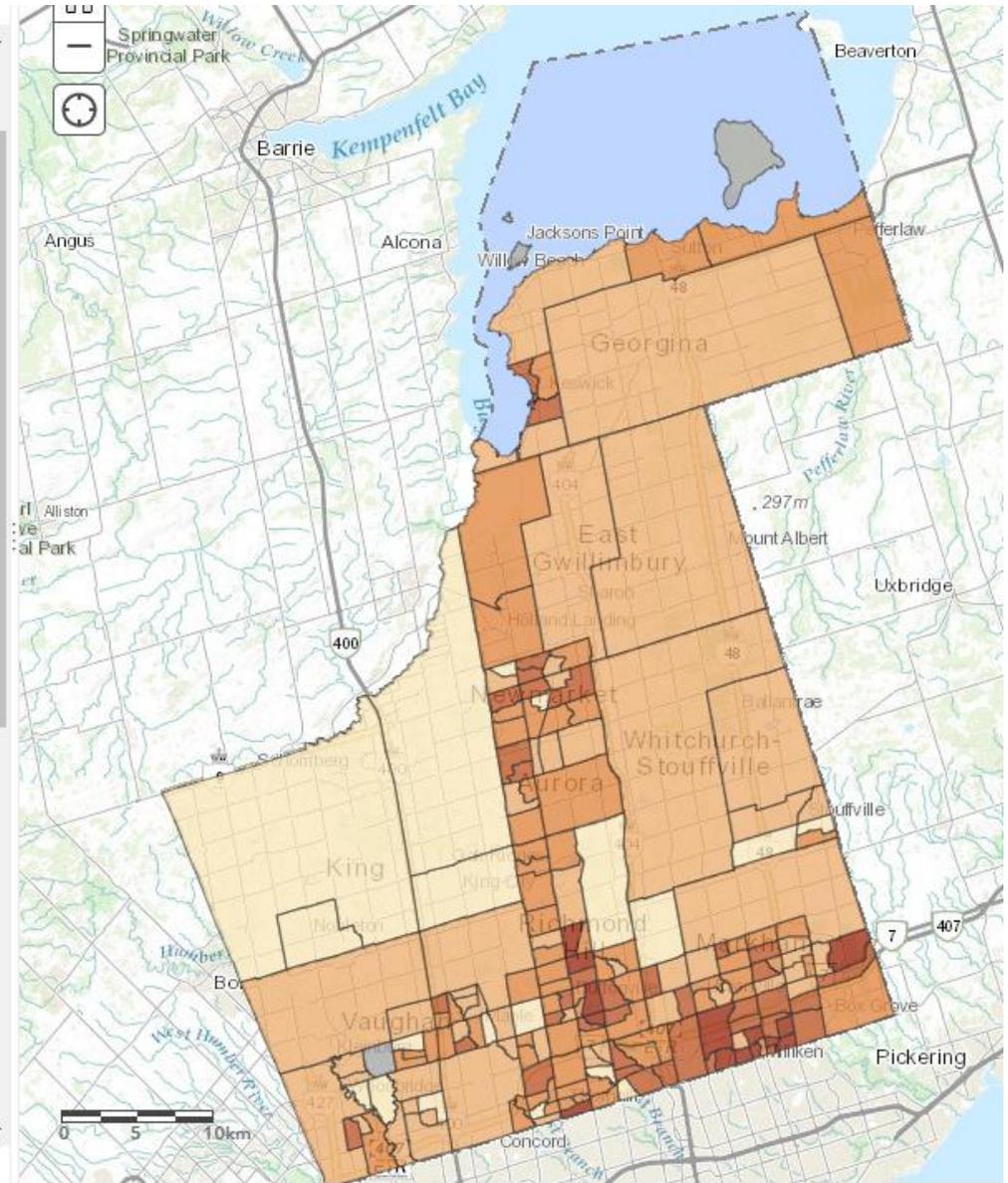


Collecting Local Data

Risk Category	Risk Based Indicators
Alcohol and Substance Misuse	Emergency department visits for opioid overdoses Emergency department for acute alcohol intoxication Police calls for Service – cannabis related, drug offence, impaired offence Heavy drinking episodes
Crime	Police calls for service – crimes against person Police calls for service – crimes against property
Discrimination	Number of hate crime incidents
Education and Development	Low educational attainment Education Development Instrument (EDI) – low score in one or more domains
Employment and Income	Low income households Population receiving social assistance Unemployment rate
Housing Stability	Households spending more than 30% income on housing
Mental Health	Emergency department visits select mental Health Conditions Emergency department visits self-Harm Self-rated extreme life stress Self-rated poor mental health Police calls for service – mental health issue (non-criminal)
Physical Health	Has chronic illness Daily smokers Poor self-perceived health
Social Isolation	No knowledge of either official language (french/english) Weak sense of community belonging

Collecting Local Data – Developing Knowledge

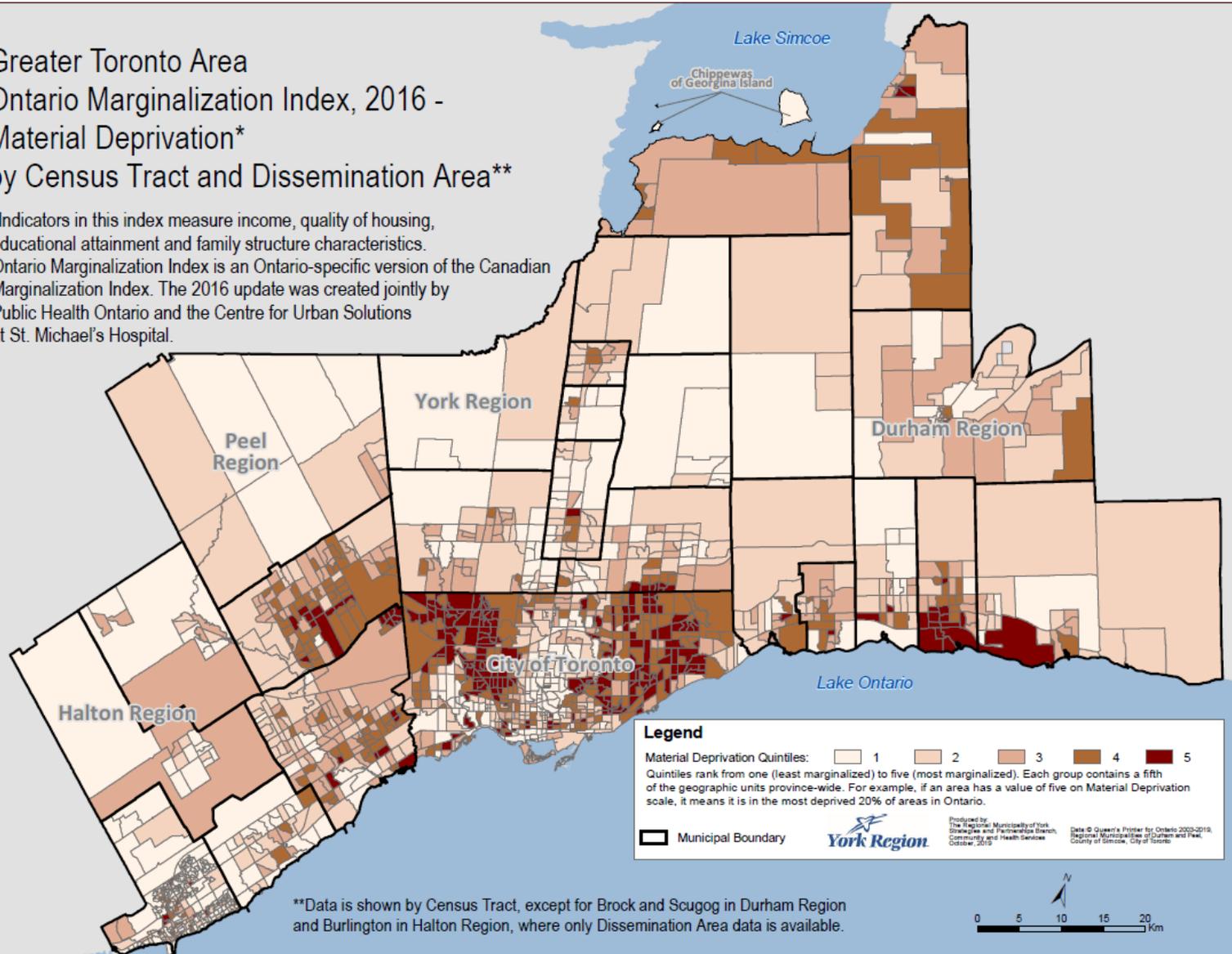
- ▲ Alcohol and substance misuse
 - Heavy drinking episodes
 - ED visits opioid overdoses
 - ED visits acute alcohol intoxication
 - Drugs and impaired offenses
- ▲ Crime
 - against property
 - against persons
- ▲ Demographics
 - Youth 15 to 24
 - Seniors 65+
 - Recent immigrants
 - Multiple-family HH
 - Immigrants
- ▲ Education and development
 - Education - no diploma, certificate, degree
 - EDI - scoring low in one or more domains
- ▲ Employment and income
 - Unemployment rate
 - Population on social assistance
 - Low income rate
- ▲ Housing stability
 - HH spending 30% or more on shelter
 - Core Housing Need
- ▲ Mental health
 - self-reported poor mental health



Collecting Local Data — Developing Knowledge

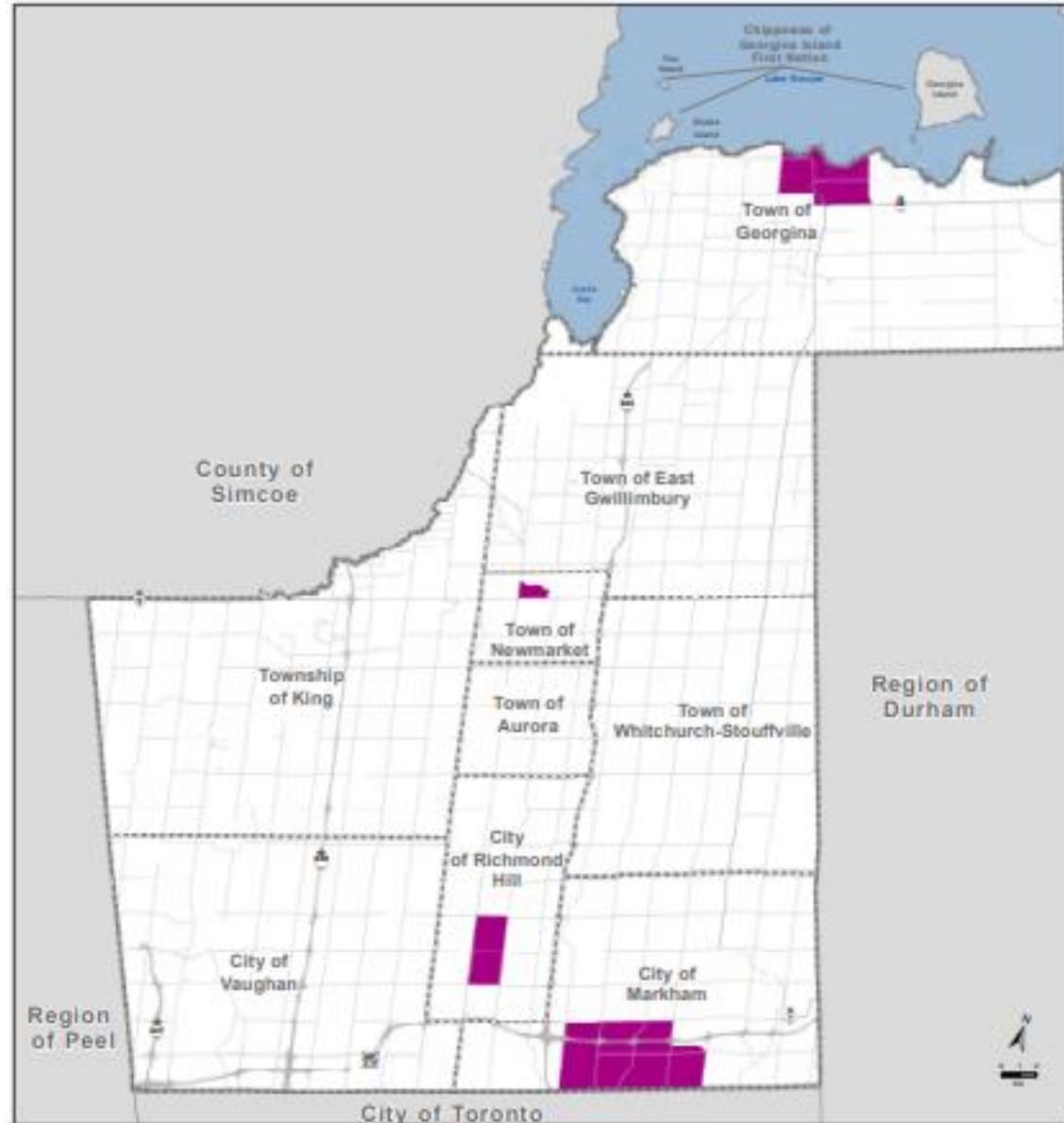
Greater Toronto Area Ontario Marginalization Index, 2016 - Material Deprivation* by Census Tract and Dissemination Area**

*Indicators in this index measure income, quality of housing, educational attainment and family structure characteristics. Ontario Marginalization Index is an Ontario-specific version of the Canadian Marginalization Index. The 2016 update was created jointly by Public Health Ontario and the Centre for Urban Solutions at St. Michael's Hospital.



Adopting Place-Based Approach

- Northern Georgina
- Central Newmarket
- South-Central Richmond Hill
- South Central Markham



Understanding Focus Areas

Data Collection - Listening to the Community

- Surveys and consultations
- Major community indicators and community assets data

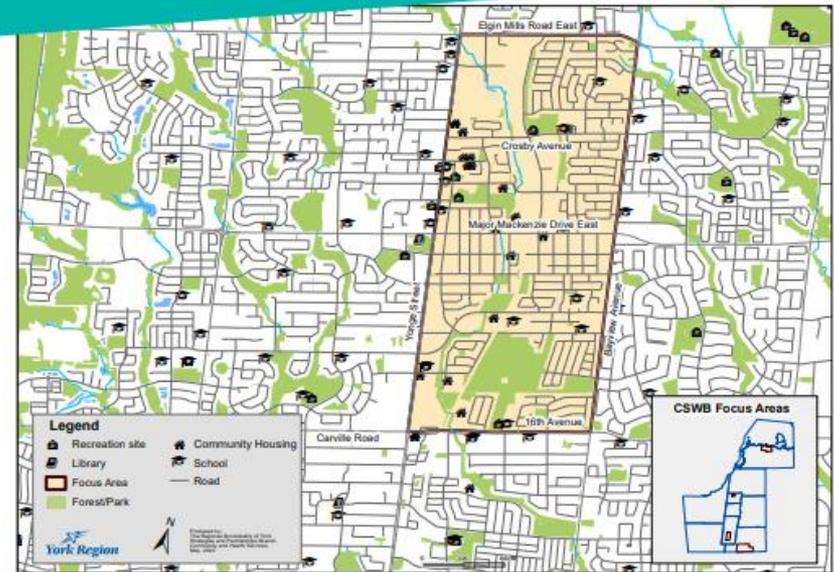
Knowledge – Identifying Priorities

- Confirming Priority Risks

Action – Community Action Tables

- Identifying Partners
- Developing Community Action Plans

APPENDIX 3 SOUTH-CENTRAL RICHMOND HILL Community Profile



South-central Richmond Hill (SCRH) is a community of 25,988 people. Data shows that the largest age group is adults aged 25 to 54. There is a high population of seniors (65+), and the number of lone-parent families is higher than the York Region average. While residents in this area tend to have a diploma, certificate or degree, the percentage of residents living with low income is relatively high, suggesting that some residents may be underemployed.

Population

York Region TOTAL 1,109,909
SOUTH-CENTRAL RICHMOND HILL 25,988

BY AGE

YR	SCRH
17.6%	13.4%
13.2%	11.8%
41.4%	40.3%
13.2%	14.1%
14.6%	20.4%

% OF INDIGENOUS PERSONS
YR 0.5%
SCRH 0.5%

CITIZENSHIP STATUS

YR	90.2%	9.8%
SCRH	84.4%	15.6%

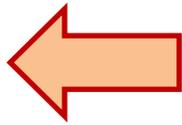
SELF-IDENTIFIED VISIBLE MINORITIES 51.8%

All data covered in this profile is from Statistics Canada, 2016 Census.

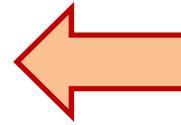
Work Planning



Choose your road



Know if you're approaching



Know your destination

- Develop Youth Peer Mentorship Program
- Program to support single mothers to obtain education and employment

- Unemployment rate
- % of population with no High School Diploma
- % of Lone Parent Families

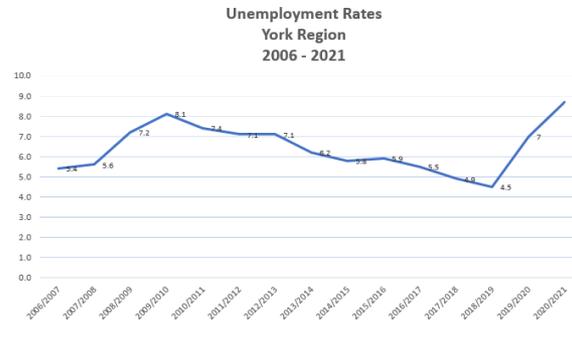
Economic Stability:
Residents receive sufficient income from employment

Work Planning — Special Notes

- No Data \neq No action
- Data Development Agenda

Doing Work – Monitoring and Evaluation

Community Indicator – Economic Stability: York Region Unemployment Rate



Source: Statistics Canada, Labour Force Survey, 2-year moving averages, 2006/2007 to 2020/2021.



Performance Measures: How much was done; How well was it done; How clients are better off

In Summary

- Evidence/Data - role at every phase of the Plan development and implementation
- Plan with results in mind - Ends to Means
- Data is an instrument of action planning – for Community Indicators and Performance Measures
- No Data \neq no action

DISCUSSION/QUESTIONS

Questions for me?

My questions for you:

- Did you find yourself “going back to use data” at every phase of Plan development or it was different for you?
- What challenges did you face using data for decision support if any? How did you overcome them?
- What data do you plan to use for action planning?

Anna Malenkov Program Manager, Data Services

Strategies and Partnerships; Community and Health Services Anna.Malenkov@york.ca

Community Safety and Well-Being Plan for York Region york.ca/communityaction

**Community Safety Well Being Plan
Region of Peel**

Responding to Intimate Partner Violence



INTIMATE PARTNER
VIOLENCE UNIT

Presented by: Shelina Jeshani and Lisa Hewison

June 10, 2022



INTIMATE PARTNER VIOLENCE UNIT



Family Life Resource Centre (FLRC)



Before Safe Centre of Peel and PRP IPV Unit

Barriers to Safety

- Navigating complex systems
- Lack of communication between service providers
- Women telling their story over and over
- No child-minding
- Transportation challenges
- Limited access to legal information
- Language and cultural barriers
- Fear of police and child welfare



Safe Centre of Peel



Vision

Our community lives free from the impact of violence.

Mission

To strengthen our community by providing single point of access to services that are coordinated, responsive and accessible to those experiencing family and intimate partner violence.

Safe Centre of Peel Opened Nov 2011



Safe Centre of Peel



<https://youtu.be/JgBNPfCIJF8>

Peel Regional Police Moves into the Davis Centre



Toronto

Why this officer has a special role to play in the new Peel police intimate-partner violence unit



Unit formed this week after several high-profile homicides and murder-suicides in Peel



Philip Lee-Shanok - CBC News

Posted: April 24, 2021

Last Updated: April 26, 2021



In 1993, Peel Det. Const. Katherine Kulbak left an abusive husband with her baby girl in her arms and little else. Now Kulbak, 54, is one of the 48 staff of a specialized Intimate Partner Violence Unit located inside the Safe Centre of Peel in Brampton. (supplied)

Toronto

Peel police saw domestic violence calls increase 74% in 5 years. A new unit aims to tackle the problem



Partnership between community group and police in Peel is trying to make it easier for victims to get help



Farrah Merali - CBC News

Posted: December 10, 2021



Gerri Dornford's friend Brittney Newman was killed in February 2020. Newman's former partner is charged with second degree murder in connection with the death. (Susan Reid/CBC News)

- From April 30th 2021 to April 30th 2022, the IPV Unit took carriage of **3025** investigations and laid **6445** criminal charges.
- Each month there were an average of **252** IPV related occurrences.
- Each occurrence is a referral to the Safe Centre of Peel.

Current State = Integration

- Risk assessments and safety planning
- Multilingual and cultural service delivery
- Child-minding and transportation
- Collaborative information exchange
- Women tell their story once
- Housing support
- Family Court support
- Specialized police response
- Soft interview rooms for police investigations





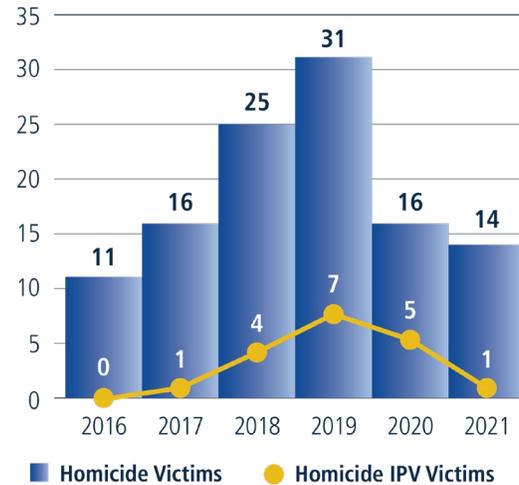
Intimate Partner Violence Reduction Strategy

Reported* Intimate Partner Disputes 2016-2021



*Reported Occurrences (Includes Actual and Unfounded violations).

Yearly Homicide Victims & Homicide Victims Involving IPV 2016 - 2021



Incident Response

- Enhanced Front line Response
- Intimate Partner Violence Unit
- Trauma-Informed Response
- Collaborative Approach to Provide Wraparound Service

Risk Intervention

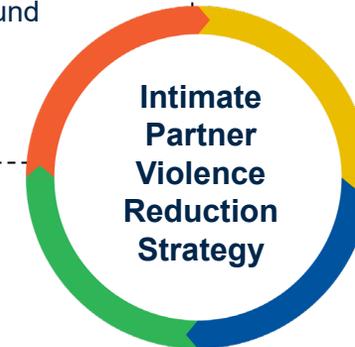
- Safety Planning
- Survivor Crisis Support
- Offender Management
- Situation Tables

Social Development

- Service Provider Advocacy
- Programming for Communities by Communities
- Survivor Support Programs
- Offender Support Programs

Prevention

- Risk Evaluation and Management in Peel (REVAMP) Referrals
- Early Intervention Support Program
- Public Education
- Media (Social Media, News)



3 of the top 4 most frequent incidents reported to Peel Regional Police are family and intimate partner violence related.

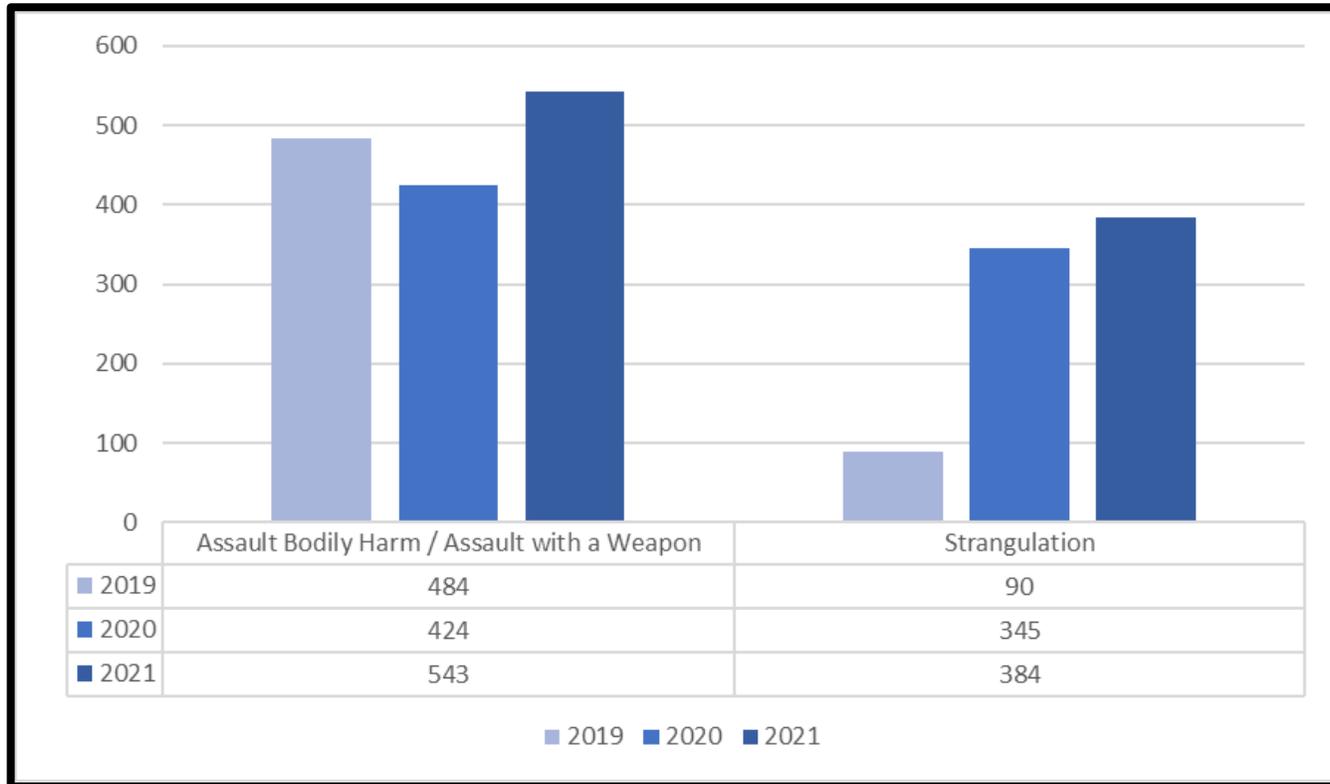


Average rate of family and intimate partner incidents investigated by Peel Regional Police in 2021:

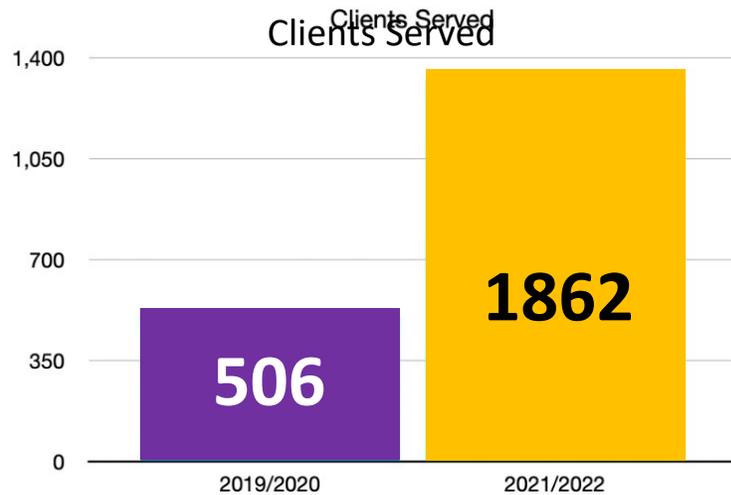


In 2021, police in Peel Region responded to 16,352 incidents of family and intimate partner violence. Those are just the incidents that were reported.

Charge Severity Index



Program Numbers and Outcomes

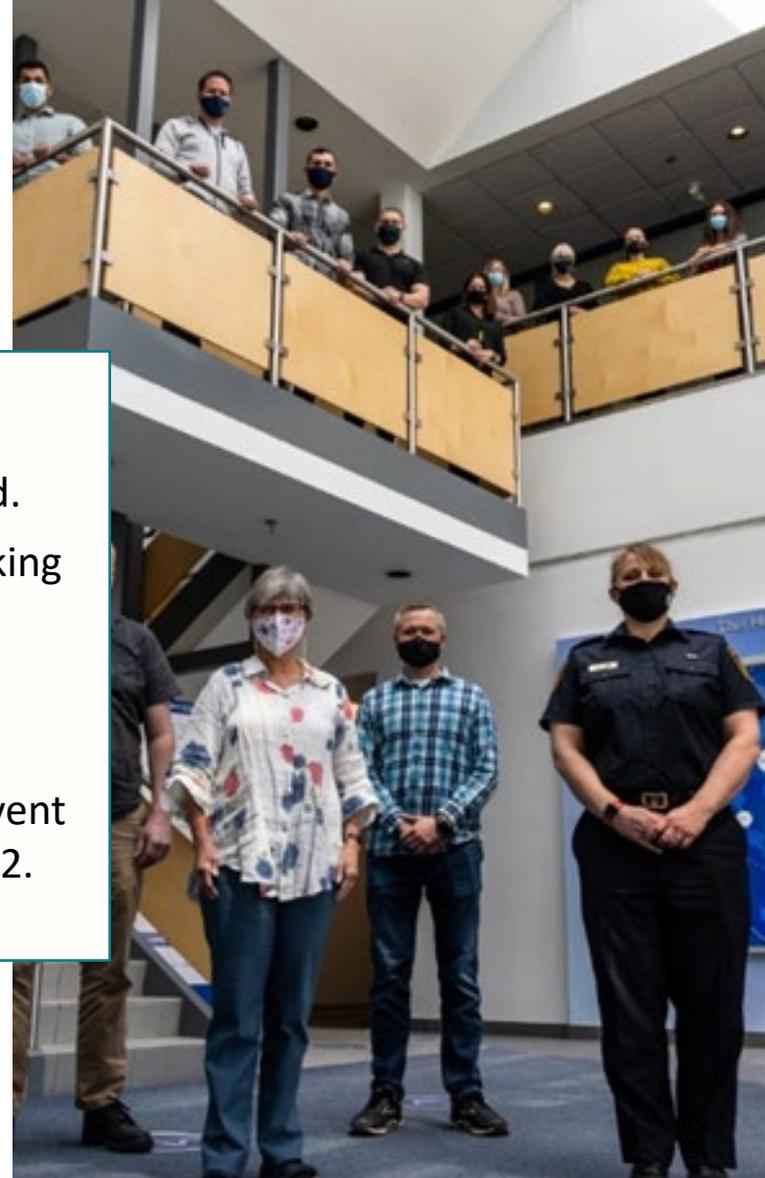


- **96%** of clients felt that they were connected to the services they needed.
- **98%** of clients felt that staff were working together to help them.
- **97%** of clients felt it was helpful to receive services in one location.
- **21%** decrease in On Scene Time per event per Frontline Officer from 2021 to 2022.

“Safe, informative, no rush, no judgement, helpful service and staff.”

“It truly makes me feel safe from the situation I am going through.”

“The counsellor was empathetic and listened to what I had to say.”



Ending Family Violence is our Priority



NEWS | *Region of Peel Approves Community Safety and Well-Being for Brampton and Mississauga* | By Marta Marychuk
Brampton Guardian | October 26, 2020

[3. Casey Video-SCoP's 10 Year Anniversary.mp4](#)

Questions



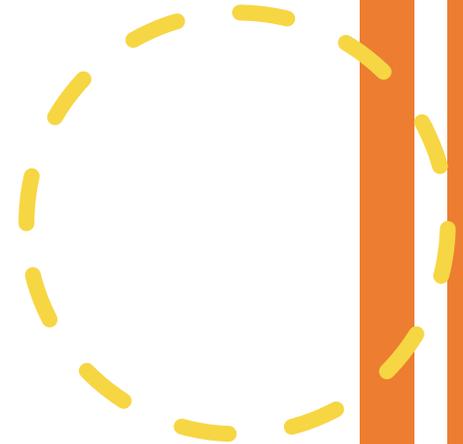
Session #5

Wrap-Up & Key Messages



Closing & Next Steps

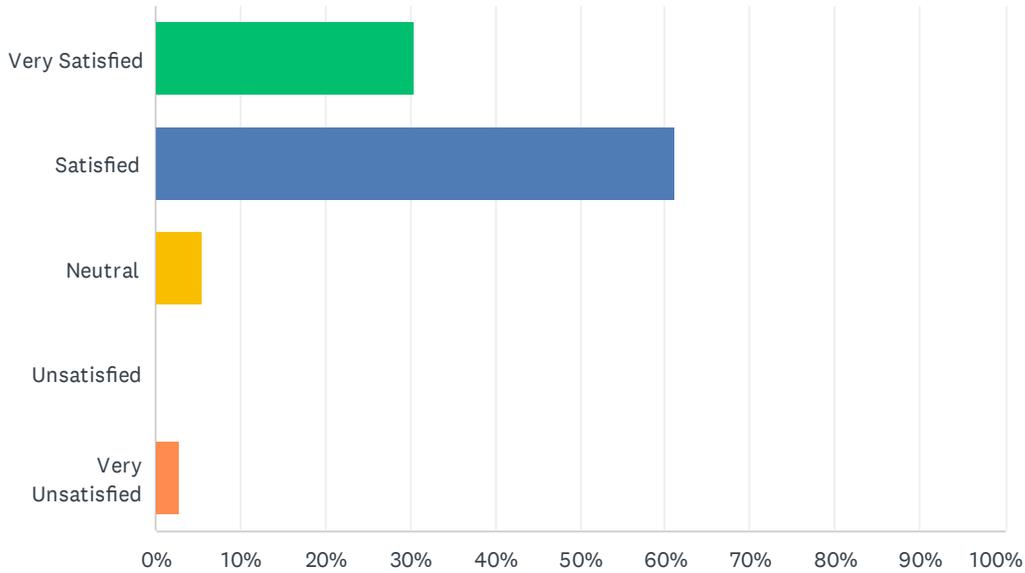
- Please complete our post-event survey
- Any additional comments or questions can be forwarded to GTHAsymposiumhelp@lura.ca
- Access to the Lobby (to watch recordings) will be open for 30 days
- Thank you for joining us!



Appendix D - Post-Event Survey Responses

Q1 How satisfied were you with today's event, overall?

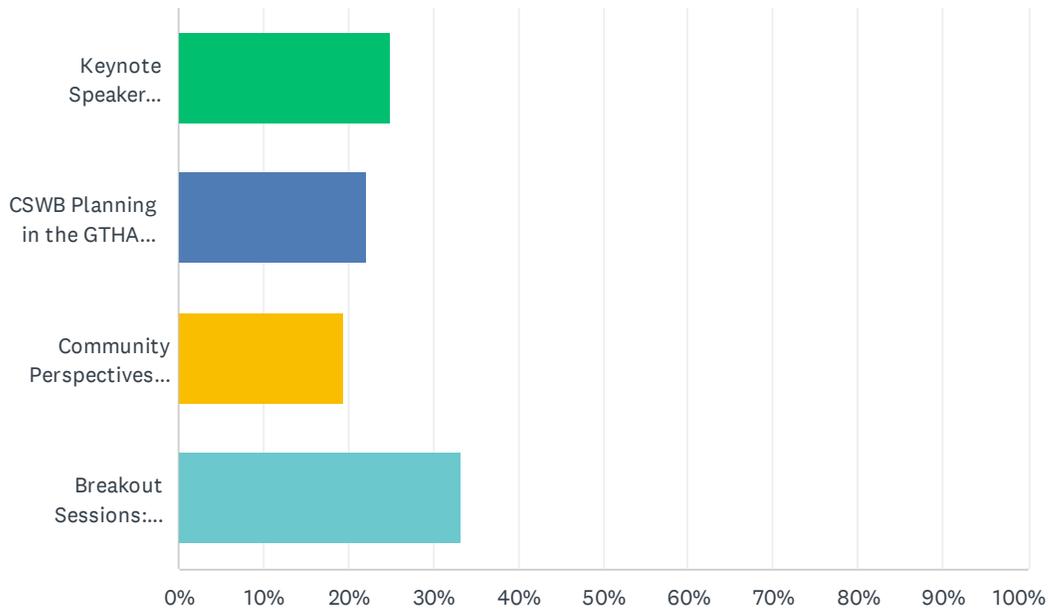
Answered: 36 Skipped: 0



ANSWER CHOICES	RESPONSES	
Very Satisfied	30.56%	11
Satisfied	61.11%	22
Neutral	5.56%	2
Unsatisfied	0.00%	0
Very Unsatisfied	2.78%	1
TOTAL		36

Q2 What part of the day contributed most to your learning experience?

Answered: 36 Skipped: 0



ANSWER CHOICES	RESPONSES
Keynote Speaker presentations (Session #1)	25.00% 9
CSWB Planning in the GTHA (Session #2)	22.22% 8
Community Perspectives Panel (Session #3)	19.44% 7
Breakout Sessions: Sharing CSWB Best Practices (Session #4)	33.33% 12
TOTAL	36

#	OTHER (PLEASE SPECIFY)	DATE
1	i was only able to stay for the morning session	6/16/2022 10:16 AM
2	A very close second and third would be #4 and #1	6/14/2022 1:35 PM
3	Issues with late start for Breakout Sessions and issues at my work meant I had to leave earlier	6/14/2022 12:21 PM

Q3 What could we improve on for the next event?

Answered: 31 Skipped: 5

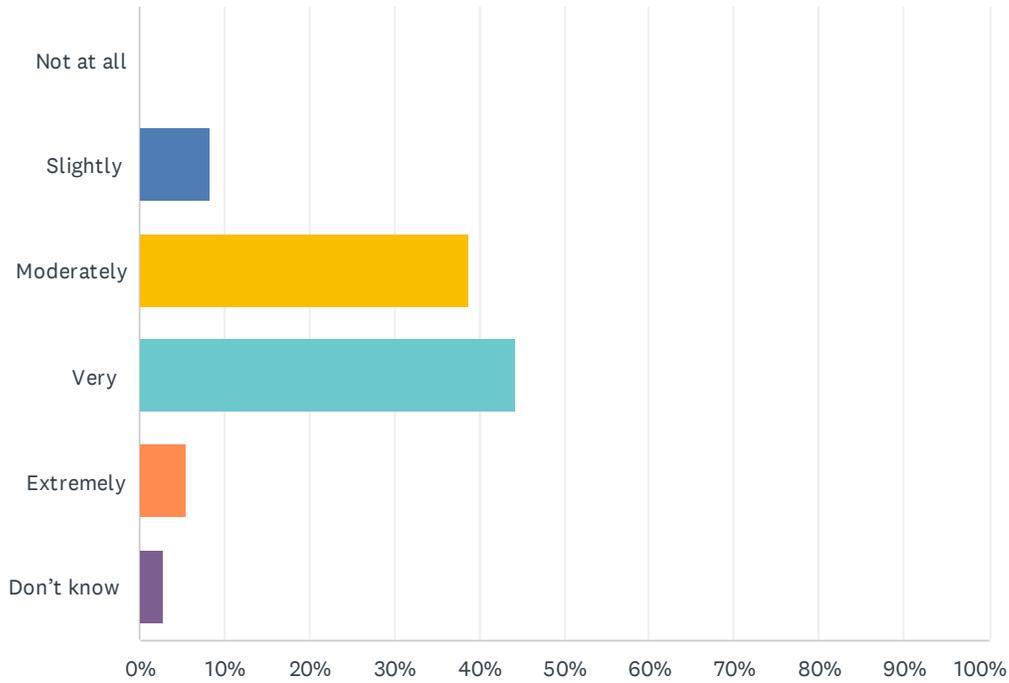
#	RESPONSES	DATE
1	In person option	6/20/2022 9:07 AM
2	The keynote speaker needed to stand out more; probably have less speakers and give the keynote more time. Organize the breakout to be more discussion oriented, instead of having another presentation in those sessions.	6/19/2022 11:10 PM
3	I would encourage speakers that work in the field. Stories of youth involved in gangs. This gives us a clearer picture of who we are working creating strategies for and with.	6/19/2022 8:28 AM
4	More audience interaction	6/16/2022 3:53 PM
5	I assumed we would be able to choose which breakout panel we would like to participate in; instead I was arbitrarily sent to a session that I had less interest than others.	6/16/2022 3:21 PM
6	More opportunity to interact and discuss issues.	6/16/2022 12:13 PM
7	??	6/16/2022 10:58 AM
8	Nothing to mention, it was very well put together.	6/16/2022 10:20 AM
9	not really an improvement but perhaps invite speakers who are in the early days of implementation now, to speak about the success and challenges of achieving success with their Plans.	6/16/2022 10:16 AM
10	Nothing	6/16/2022 10:06 AM
11	I need to know more about what is happening in my community. There might be ideas or resources I am not aware of but could use.	6/16/2022 10:05 AM
12	N/A	6/14/2022 10:58 PM
13	in person	6/14/2022 3:50 PM
14	Continued perspectives from the community	6/14/2022 2:23 PM
15	To further demonstrate a commitment to recognizing systemic injustices, consider the order of speakers. In the keynote session and in the panel discussion, it was noticeable that the first speaker in each was a white male.	6/14/2022 1:39 PM
16	Opportunity to attend additional breakout sessions	6/14/2022 1:35 PM
17	It would be interesting to include other municipalities outside of the GTHA as well	6/14/2022 1:10 PM
18	More opportunities to have group discussion	6/14/2022 1:08 PM
19	More time for discussion throughout the day.	6/14/2022 12:48 PM
20	Maybe longer keynote presentations.	6/14/2022 12:31 PM
21	More opportunities for engagement / discussion, resolving tech issues (breakout rooms), letting speakers know about ASL interpreters in advance to plan for slow measured delivery of presentations	6/14/2022 12:23 PM
22	Late start for Breakout Sessions, though I did get a lot out of the spontaneous conversation between participants during this delay.	6/14/2022 12:21 PM
23	If possible to add in some breakout rooms and discussion in the morning would be great. Given the movement of many of our clients across the GTHA, more sharing and discussion on the similarities of the planning structures, lessons learned etc. would be valuable.	6/10/2022 7:37 PM
24	Just more of these events that share best practices, what other municipalities are doing and how best to collaborate and build off of these.	6/10/2022 3:42 PM

GTHA CSWB Symposium - Post-Event Survey

25	Suggest to compile and share a list of symposium participants for future networking and collaboration.	6/10/2022 3:40 PM
26	I don't usually say this but more time. It could have been a two day event, there was lots of great information and many times I felt like we just scrapped the surface or had to move on quickly. More time for conversation/questions/dialogue.	6/10/2022 3:40 PM
27	More participation from community organizations and presentations about new ways of talking about community safety outside of policing.	6/10/2022 3:40 PM
28	Presentations were very informative	6/10/2022 3:35 PM
29	More time. More ways to connect outside of event.	6/10/2022 3:34 PM
30	split over multiple days	6/10/2022 3:34 PM
31	more conversations around gang violence youth engagement.	6/10/2022 3:33 PM

Q4 Did today's keynote speaker Matt Torigian increase your awareness and understanding of Community Safety & Well-Being Legislation?

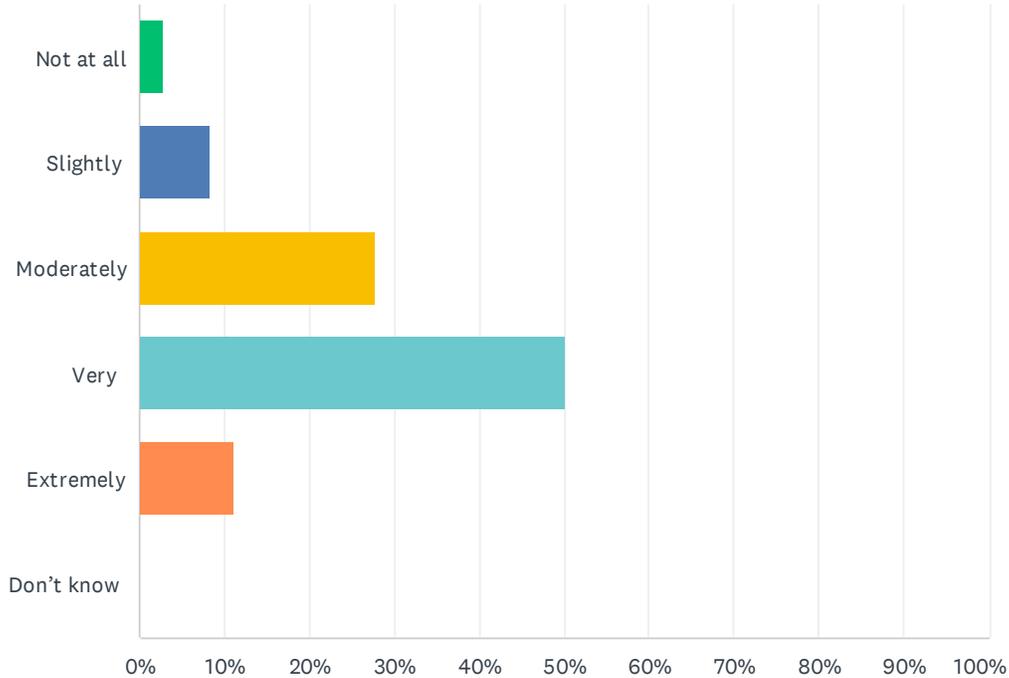
Answered: 36 Skipped: 0



ANSWER CHOICES	RESPONSES	
Not at all	0.00%	0
Slightly	8.33%	3
Moderately	38.89%	14
Very	44.44%	16
Extremely	5.56%	2
Don't know	2.78%	1
TOTAL		36

Q5 Did today's keynote speaker Lindsay Kretschmer increase your awareness and understanding of Indigenous Perspectives on Community Safety & Well-Being?

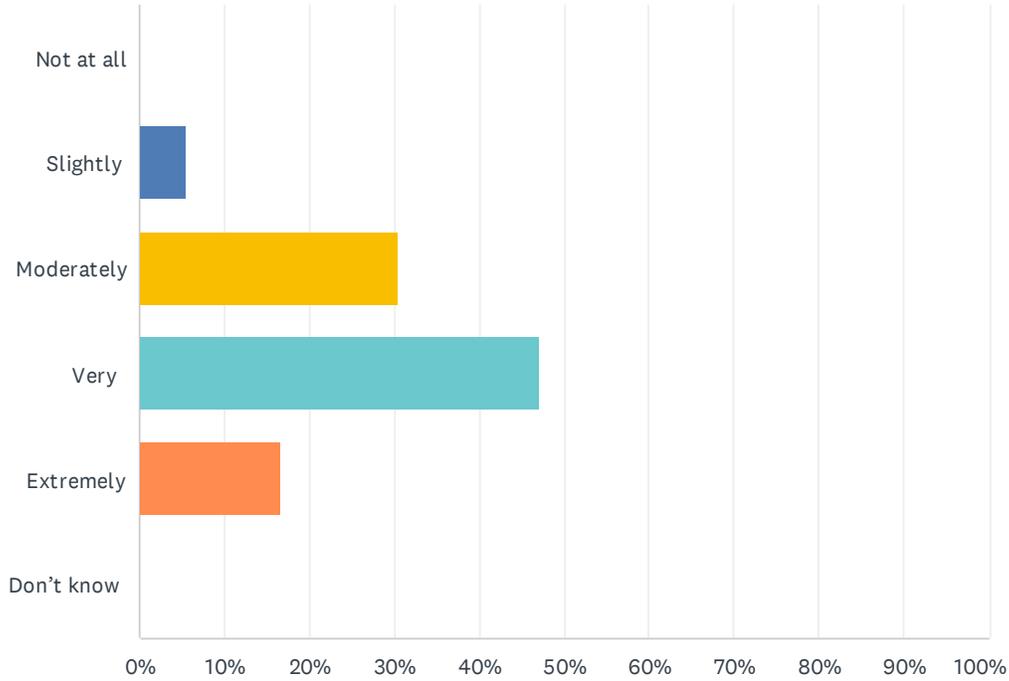
Answered: 36 Skipped: 0



ANSWER CHOICES	RESPONSES	
Not at all	2.78%	1
Slightly	8.33%	3
Moderately	27.78%	10
Very	50.00%	18
Extremely	11.11%	4
Don't know	0.00%	0
TOTAL		36

Q6 Did today's keynote speaker Anthony Morgan increase your awareness and understanding of confronting Anti-Black Racism?

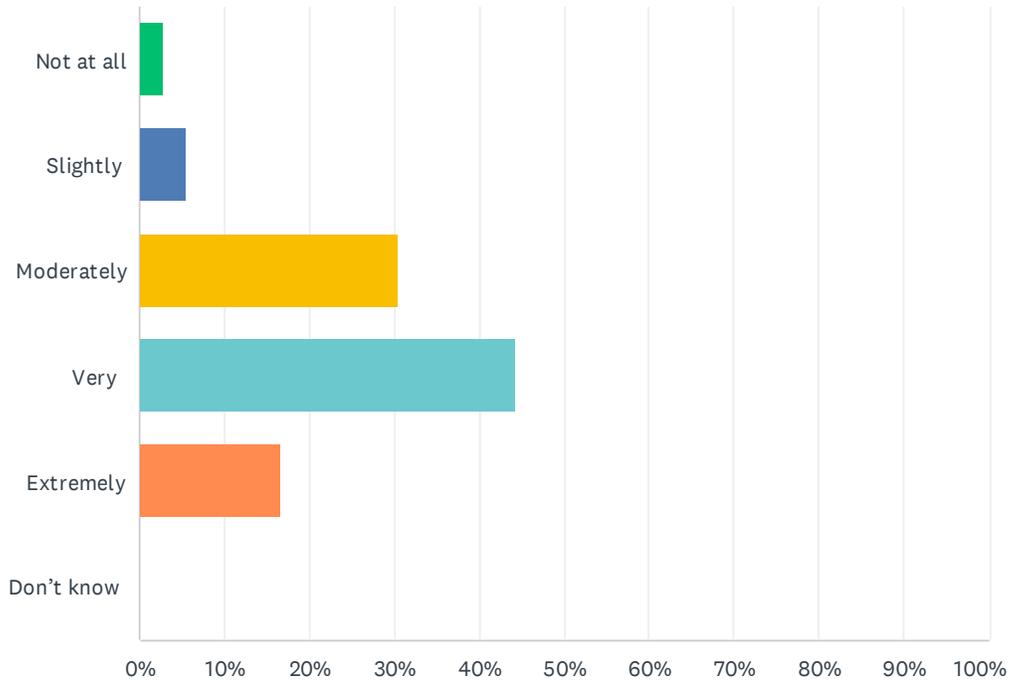
Answered: 36 Skipped: 0



ANSWER CHOICES	RESPONSES	
Not at all	0.00%	0
Slightly	5.56%	2
Moderately	30.56%	11
Very	47.22%	17
Extremely	16.67%	6
Don't know	0.00%	0
TOTAL		36

Q7 Did today's presentations from GTHA Regions and Cities increase your awareness and understanding of Community Safety and Well-being Plans?

Answered: 36 Skipped: 0



ANSWER CHOICES	RESPONSES	
Not at all	2.78%	1
Slightly	5.56%	2
Moderately	30.56%	11
Very	44.44%	16
Extremely	16.67%	6
Don't know	0.00%	0
TOTAL		36

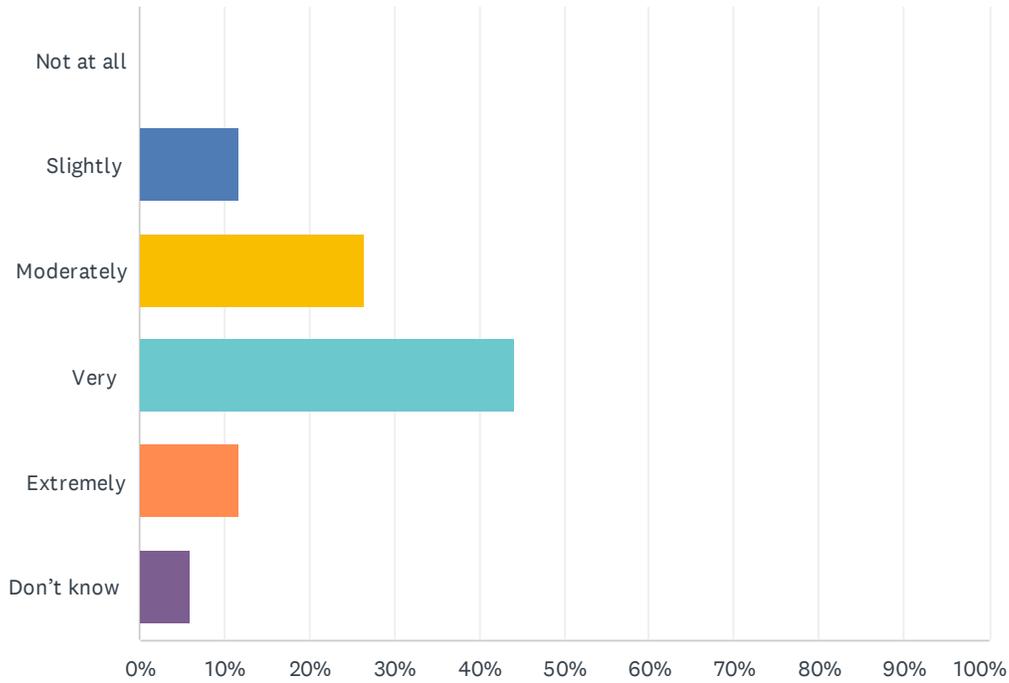
Q8 Do you have any suggestions for how GTHA governments and agencies can work collaboratively on common areas of concern (i.e., priority risk factors)?

Answered: 22 Skipped: 14

#	RESPONSES	DATE
1	`	6/20/2022 9:07 AM
2	Sharing data. Sharing ideas on interventions and prevention programs. Pooling resources across the GTHA.	6/19/2022 8:28 AM
3	Each agency etc should have a designated community safety coordinator who is in charge of communicating and coordinating between community partners	6/16/2022 3:53 PM
4	Engage more with frontline agencies doing work on the ground as they will see trends long before they show up statistically.	6/16/2022 3:21 PM
5	Continue to have symposiums and opportunities to work together.	6/16/2022 12:13 PM
6	involve community health sector, e.g., Community Health Centres that are also mandated to work in the social determinants of health framework in underserved communities.	6/16/2022 10:58 AM
7	None at this time	6/16/2022 10:20 AM
8	not at this time.	6/16/2022 10:16 AM
9	No	6/16/2022 10:06 AM
10	n/a	6/14/2022 10:58 PM
11	I've heard that many municipalities have action tables or something similar that are working on similar issues (i.e. addressing IPV or gun violence). I think it would be great to have these tables meet and collaborate in some capacity, even if it is just idea sharing of strategies that can be implemented to address the priority issues	6/14/2022 1:10 PM
12	.	6/14/2022 1:08 PM
13	No	6/14/2022 12:48 PM
14	Forums for continued sharing either interactive or static (e.g. online collection of tools or projects).	6/14/2022 12:23 PM
15	OHT processes and experiences on this kind of cross jurisdictional collaborations could provide some insight.	6/10/2022 7:37 PM
16	n/a	6/10/2022 3:42 PM
17	To share more concrete details of the implementation of the plan and lessons learned so far.	6/10/2022 3:40 PM
18	N/A	6/10/2022 3:40 PM
19	* It would have been great to have someone from the Ontario Anti-Racism Directorate attend. Through provincial legislation, they are collecting data. How would that inform or influence or work. * It would have been nice to have someone from the Solicitors General office come to listen and talk about how the Province intends on funding CSWPs across the province	6/10/2022 3:40 PM
20	Dual Diagnosed individuals with Complex needs and Supports	6/10/2022 3:35 PM
21	More events like this one.	6/10/2022 3:34 PM
22	common metrics and outcomes shared data / key indicators	6/10/2022 3:34 PM

Q9 Did today's Community Perspectives Panel increase your awareness and understanding of gun violence and related issues across the GTHA?

Answered: 34 Skipped: 2



ANSWER CHOICES	RESPONSES	
Not at all	0.00%	0
Slightly	11.76%	4
Moderately	26.47%	9
Very	44.12%	15
Extremely	11.76%	4
Don't know	5.88%	2
TOTAL		34

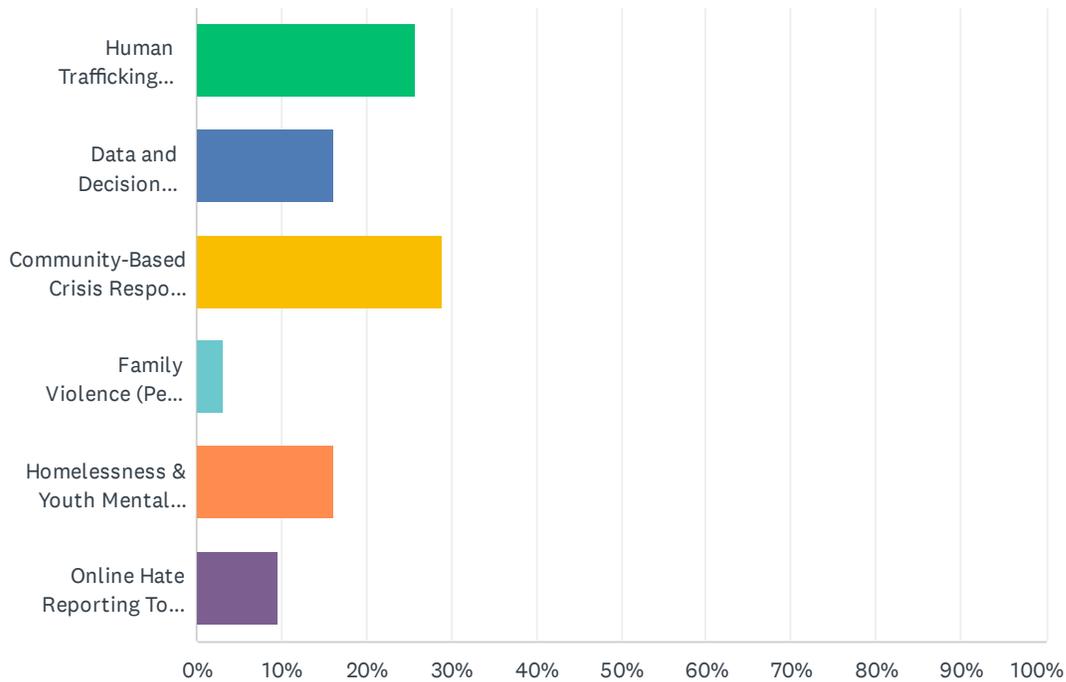
Q10 Do you have any suggestions for how GTHA governments and agencies can work collaboratively on addressing gun violence?

Answered: 18 Skipped: 18

#	RESPONSES	DATE
1	Increased partnership and info sharing between School Boards, Hospitals (mental health), CAS, and police, on the issue.	6/20/2022 9:07 AM
2	Same as above	6/19/2022 8:28 AM
3	not really	6/16/2022 3:53 PM
4	Not really.	6/16/2022 3:21 PM
5	There needs to be advocacy at the provincial and federal level to to ensure consistent banning of firearms. Please sharing of prevention strategies. Again lobbying provincially and federally for funding for early prevention.	6/16/2022 12:13 PM
6	advocate for affordable and accessible youth programming and support services to encourage positive growth and development opportunities	6/16/2022 10:58 AM
7	None at this time.	6/16/2022 10:20 AM
8	not at this time.	6/16/2022 10:16 AM
9	No	6/16/2022 10:06 AM
10	n/a	6/14/2022 10:58 PM
11	Similar to my previous response, creating a collaborative network across municipalities to tackle this.	6/14/2022 1:10 PM
12	shared data, geo locational data around gangs, working tables between police and community partners, joint responses to gang related incidents	6/14/2022 1:08 PM
13	No	6/14/2022 12:48 PM
14	Sharing approaches to distributing federal funds in communities that have received funding from Building Safer Communities Fund	6/14/2022 12:23 PM
15	Again sharing what is happening to work to adopt best practices amongst different municipalities to allow them to adopt pieces of this.	6/10/2022 3:42 PM
16	Sharing the data and trends, collaborate to innovate new ways to combat this issue, offer training and learning opportunities about how other places outside of GTHA are tackling this issue.	6/10/2022 3:40 PM
17	N/A	6/10/2022 3:40 PM
18	* Lets hear from people who have been involved in gun violence and their perspectives on how to address violence in our communities.	6/10/2022 3:40 PM

Q11 Which breakout session did you attend?

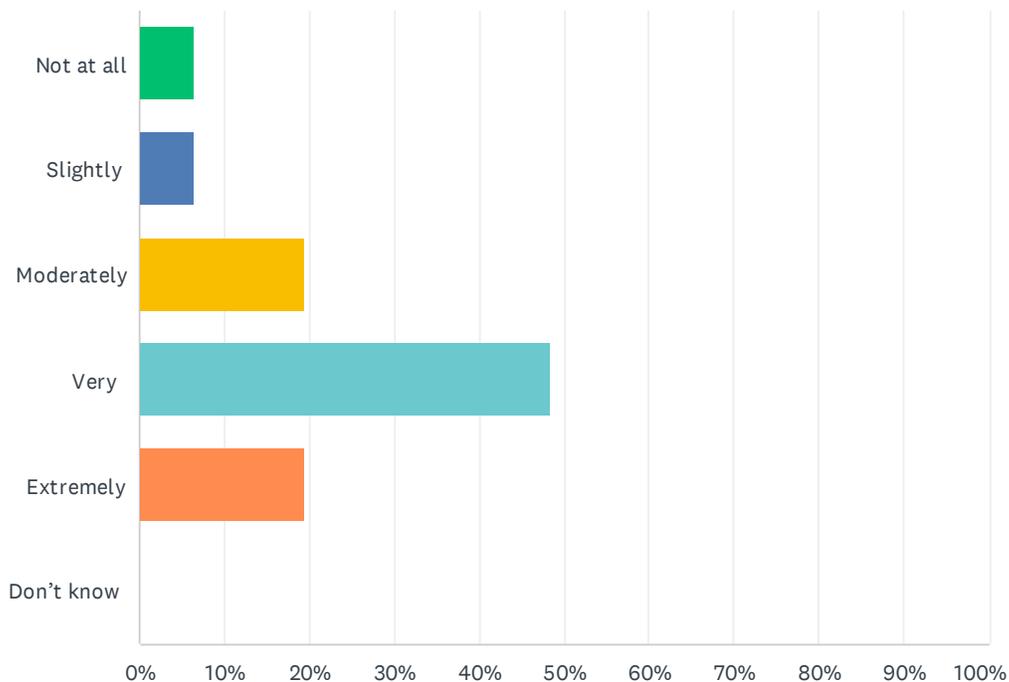
Answered: 31 Skipped: 5



ANSWER CHOICES	RESPONSES	
Human Trafficking (Durham Region)	25.81%	8
Data and Decision Support (York Region)	16.13%	5
Community-Based Crisis Response (City of Toronto)	29.03%	9
Family Violence (Peel Region)	3.23%	1
Homelessness & Youth Mental Health (Halton Region)	16.13%	5
Online Hate Reporting Tool (City of Hamilton)	9.68%	3
TOTAL		31

Q12 Did today's breakout session increase your awareness and understanding this issue?

Answered: 31 Skipped: 5



ANSWER CHOICES	RESPONSES
Not at all	6.45% 2
Slightly	6.45% 2
Moderately	19.35% 6
Very	48.39% 15
Extremely	19.35% 6
Don't know	0.00% 0
TOTAL	31

Q13 Do you have any suggestions for how GTHA governments and agencies can work collaboratively on addressing this issue?

Answered: 17 Skipped: 19

#	RESPONSES	DATE
1	Increased partnership and info sharing between School Boards, Hospitals (mental health), CAS, and police, on the issue.	6/20/2022 9:07 AM
2	Keep sharing data and info on programming.	6/19/2022 8:28 AM
3	Expressing that human trafficking is not just international	6/16/2022 3:53 PM
4	Be more inclusive and diverse in their data gathering	6/16/2022 3:21 PM
5	Housing is a huge issue which needs to be addressed not only locally but with again provincially and federally. Municipal planners need to be innovative and need to advocate to break down barriers that exist in order build truly affordable housing, taking into consideration environmental issues as well. I would strongly recommend that all plans involve Community Mental Health Agencies in their planning.	6/16/2022 12:13 PM
6	??	6/16/2022 10:58 AM
7	We need to continue working with hotel partners and law enforcement agencies to raise awareness of human trafficking and provide the hotel industry resources so the workers understand the important role they can play in assisting victims. If we can continue to educate the public, with outreach programs that we offer the schools. HT is a complicated issue that is on going, we need to just continue keeping doors open and offering resources	6/16/2022 10:20 AM
8	i did not attend the session. there is no option to indicate this.	6/16/2022 10:16 AM
9	No	6/16/2022 10:06 AM
10	n/a	6/14/2022 10:58 PM
11	No	6/14/2022 1:10 PM
12	fixed models across the GTHA	6/14/2022 1:08 PM
13	Share data and trends	6/14/2022 12:48 PM
14	Sharing tool once publicly available.	6/14/2022 12:23 PM
15	Durham Regions response is great. More municipalities need this response. Our homeless population is extremely vulnerable to this and the homeless population continues to increase.	6/10/2022 3:42 PM
16	Setting up regular knowledge exchange and community of practice focusing on innovations and potential promising practices in tackling this issue.	6/10/2022 3:40 PM
17	Funding and resources. We have something similar in our Region but to run it 24/7 would not be feasible, and at minimum there needs to be more mental health supports - we can intercept but if there is no where to refer to or those locations have a 6 month waiting list we are not getting any further ahead.	6/10/2022 3:40 PM

Q14 Are there any other ideas for action you would like to share?

Answered: 14 Skipped: 22

#	RESPONSES	DATE
1	More public awareness of internal workings. Prior to working with xxxx, I was highly unaware of all the health and safety initiatives that were going on.	6/16/2022 3:53 PM
2	Uncertain. Still processing to be honest.	6/16/2022 3:21 PM
3	It seemed that in each area Mental Health was a priority. Therefore would recommend all areas link to Community Mental Health Agencies, and Children's Mental Health Ontario. Local tables in each area should be explored.	6/16/2022 12:13 PM
4	none at this time	6/16/2022 10:20 AM
5	No	6/16/2022 10:06 AM
6	n/a	6/14/2022 10:58 PM
7	No	6/14/2022 1:10 PM
8	.	6/14/2022 1:08 PM
9	No	6/14/2022 12:48 PM
10	No	6/14/2022 12:23 PM
11	Surprised that only Toronto included Public Libraries in their CWBS plans.	6/14/2022 12:21 PM
12	n/a	6/10/2022 3:42 PM
13	More future discussion on how governments can really support and facilitate community organizations and communities in prevention and generating solutions that are community-centric, instead of bureautic or business-as-usual.	6/10/2022 3:40 PM
14	N/A	6/10/2022 3:40 PM

Q15 What topics would you like to see at possible future GTHA CSWB events?

Answered: 19 Skipped: 17

#	RESPONSES	DATE
1	Present a case study that shows how someone was able to rehabilitate from the drug and gun subculture.	6/20/2022 9:07 AM
2	Keeping schools safe for children and teachers	6/19/2022 11:10 PM
3	Youth themselves speaking to their own experiences and needs.	6/19/2022 8:28 AM
4	Defunding the police and community safety	6/16/2022 3:53 PM
5	Hate crimes, homophobia & transphobia, overuse of force by police, lockdown policies re spree shootings	6/16/2022 3:21 PM
6	Violence prevention against women.	6/16/2022 12:13 PM
7	Poverty/Addictions/Mental Health combined (I feel they are all related in a way)	6/16/2022 10:20 AM
8	street youth engagement, how youth employment programs are a driving factor to improving outcomes and reducing risk factors	6/16/2022 10:05 AM
9	Crisis Intervention	6/14/2022 10:58 PM
10	Food Security	6/14/2022 1:10 PM
11	smaller working groups around restorative justice models being used as prevention in a guns and gangs context	6/14/2022 1:08 PM
12	Funding for CSWB initiatives	6/14/2022 12:48 PM
13	Implementation plans, evaluation plans, sustainable funding models	6/14/2022 12:23 PM
14	Community member engagement in leadership/decision making roles.	6/10/2022 7:37 PM
15	MOre talk of initiatives happening from the Action groups.	6/10/2022 3:42 PM
16	Emerging safety issues, tested/piloted innovations, creative resourcing, funding and community resources leveraging	6/10/2022 3:40 PM
17	N/A	6/10/2022 3:40 PM
18	* Sexual Violence - please invite Sexual Assault Centres * Need to talk about disability justice - please invite Disability JUstice Network of Ontario - xxxx * the connection between Pubic Health and CSWP priorities	6/10/2022 3:40 PM
19	Evaluation of CSWB plans	6/10/2022 3:34 PM

Q16 Do you have any other comments or feedback on the event?

Answered: 16 Skipped: 20

#	RESPONSES	DATE
1	no	6/20/2022 9:07 AM
2	Incorporate some action plans and next steps.	6/19/2022 11:10 PM
3	Great symposium	6/16/2022 3:53 PM
4	Not at this time.	6/16/2022 3:21 PM
5	Thank you!	6/16/2022 12:13 PM
6	Overall this was a very informative event and it was well done	6/16/2022 10:20 AM
7	n/a	6/14/2022 10:58 PM
8	Thank you, ti was a very informative day	6/14/2022 1:35 PM
9	The event was a great look into some key CSWB priority areas and opportunity to hear from other municipalities	6/14/2022 1:10 PM
10	.	6/14/2022 1:08 PM
11	No	6/14/2022 12:48 PM
12	Excellent event, well organized except for a few tech glitches. Tech support was responsive as needed.	6/14/2022 12:23 PM
13	Well done. I enjoyed this.	6/10/2022 3:42 PM
14	Broader participation by extending the invite to community partners of different regions.	6/10/2022 3:40 PM
15	Very well put together, would highly recommend to colleagues. More time is my only feedback.	6/10/2022 3:40 PM
16	Great event. Please continue to hold the event. It should be held twice in the year.	6/10/2022 3:40 PM