



**West Nipissing Ouest**

# Community Safety and Well-Being Plan

2022-2027

**Joie de vivre**

[westnipissingouest.ca](http://westnipissingouest.ca)



## Land Acknowledgment

The Municipality of West Nipissing respectfully acknowledges that we are located on the homelands of the Anishinaabe Peoples, on the traditional territory of the Nipissing, Temagami and Dokis First Nations, covered by the Robinson-Huron Treaty. We honour and recognize their historic connection to the land and value their significant contributions in shaping and strengthening our communities.







## Disclaimer

This plan is a living document. New evidence, best practices, and additional data are expected to emerge. The information and strategies presented in this document should not be considered finite but rather a snapshot of the strategies and actionable steps which the Municipality intends to take. The Advisory Committee encourages ongoing collaboration, strategizing, and problem-solving for the purpose of strengthening approaches to safety and well-being planning. To offer additional information, data, or inquire about the contents of this plan, please contact the Municipality of West Nipissing at [cswb@westnipissing.ca](mailto:cswb@westnipissing.ca).





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## MESSAGE FROM OUR LEADERS IN COMMUNITY SAFETY



I am proud to share West Nipissing's own *Community Safety and Well-Being Plan* as it aims to reassert our commitment to safety, well-being, and belonging across West Nipissing. The Municipality of West Nipissing prioritizes the safety and well-being of all residents. Planning efforts to focus on prevention and harm reduction is critical in the prevention of risk to residents, in particular children and families, youth, and senior populations.

This plan is a result of the collaborative efforts of community partners. The community consultation and engagement period saw many citizens, local leaders, and organizations come together to prioritize strategic mitigating of risk. Their efforts, feedback, data sharing, and storytelling is the foundation of this plan.

On behalf of the Municipality of West Nipissing, I would like to thank the many organizations, agencies, staff, and residents that participated in the development of this planning process. I encourage all residents and local leaders to learn more about the work being done to improve safety in our community and to join us as we move forward in the implementation process.

Joanne Savage  
Mayor, Chair of the Advisory Committee



We are committed to collaborating with our community partners to develop co-response models that focus on prevention, harm reduction and risk intervention strategies to improve the overall well-being of our communities. We remain open to and respectful of, cultural differences and the ongoing development of skills and knowledge to build mutually effective relationships. We will continue to identify opportunities to enhance our frontline officer's experience. As we look forward, we will continue to ensure our communities have the service delivery they require.

Commitment to Community Safety and Well-Being Planning will ensure we are reducing victimization by focusing our attention on the suppression of crimes in our area. The dedication of our members, together with the support of our municipalities, will ensure our continued success in keeping our communities safe.

Insp. Michael Maville  
Detachment Commander, Nipissing West Detachment, Ontario Provincial Police



## EXECUTIVE SUMMARY

### The Plan “at a Glance”

This Community Safety and Well-Being Plan is a collaborative approach that will strengthen West Nipissing and ensure that communities are safe, well, and ideally, free of the downstream consequences of crime.

This plan is the result of a legislative requirement to work with a multi-sectoral advisory committee to develop a plan that is;

- Focussed on prevention
- Strength-based
- Collaborative
- Founded on evidence
- The result of in-depth community consultations and research.

#### Phase 1: Community Consultations

Public survey:  
544 responses

Targetted group  
engagement  
sessions

31 key  
informant  
interviews

Engagement at  
Rec Centre

West Nipissing’s plan focuses on the following **five priority areas**:

Poverty

Mental Health

Addiction

Housing and  
Underhoused

Community  
Cohesion

### How to Read This Plan

This document offers a full explanation of the consultations and research before each risk is thoroughly explained and the strategies and risk items are introduced.

Each risk is accompanied by the following;



“What We Heard” - A brief explanation of the relevant statistics gathered from community consultations and the importance or reasoning behind the selection of risk.



“Strategies and Action Items” - A summary of the intended strategies to prevent or mitigate the priority risk area and the accompanying action items.



“Previous and Current Efforts” - A glance at the existing efforts and achievements.



“Measuring Implementation” - The data and metrics that could be consulted to understand if, and to what extent, the implementation was successful.





## INTRODUCTION

### Ontario's Mandate

As part of the Police Services Act that was made effective on January 1, 2019, municipalities are required to develop and adopt community safety and well-being plans. Municipalities must work in partnership with a multi-sectoral advisory committee that includes representation from a member of the police services board, in addition to representatives in health/mental health, education, community/social services, and children/youth services. The goal of this planning is to acknowledge that Ontarians need efficient and effective access to crucial services. And, a multitude of services is often needed to support their needs. This planning process is designed to enhance collaboration between key sectors, services, and agencies so that the safety and well-being of residents are met.

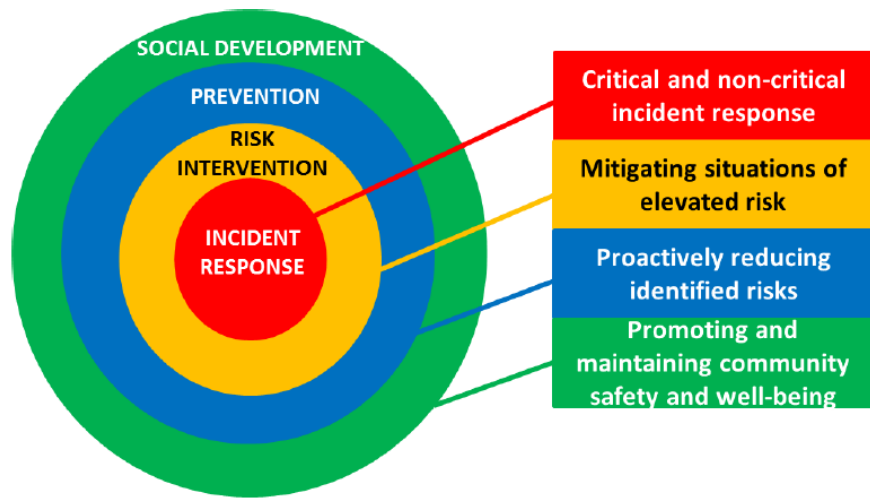
The goal of community safety and well-being planning is...

***“to achieve sustainable communities where everyone is safe, has a sense of belonging, opportunities to participate, and where individuals and families are able to meet their needs for education, health care, food, housing, income, and social and cultural expression. The success of society is linked to the well-being of each and every individual”***

(A Shared Commitment, n.d., p.4).

### Community Safety and Well-Being Planning Framework

Community safety and well-being plans require less dependence on reactionary and incident-driven responses and instead focus on investing in the longer-term benefits of social development and mitigating risk. By improving the social determinants of health, communities reduce the probability of harm and victimization. In addition to working to improve health, the Ministry's framework also suggests implementing measures and programs to reduce priority risks before they result in crime or harm. When there is an elevated risk, incident response is needed. This means collaborating and sharing information among agencies to inform strategies in the realm of social development and prevention. Lastly, safety and well-being require a reaction and response to immediate harm, which was previously the most common approach to safety and well-being.



The Ministry of the Solicitor General suggests that planning should occur in all four areas, however, most of the energy and resources should be used to develop social programming and focus on prevention and risk intervention strategies. Prioritizing social development and improving prevention measures can alleviate the strain on front-line workers such as police, fire, and emergency medical services.

## What is Community Safety and Well-Being?

Community safety and well-being, according to the Canadian Municipal Network on Crime Prevention (CMNCP), “is a sustainable state where every community member is safe, feels a sense of belonging, has opportunities for engagement and participation, and has the following needs met; education, healthcare, food, housing, income, and social and cultural expression” (CMNCP, 2020, p.7). Safety and well-being can be achieved through collaborative efforts to reduce crime through upstream approaches, as opposed to focusing on imminent threats.

Put more simply, safety, according to the Merriam-Webster Dictionary, is “the condition of being safe from undergoing or causing hurt, injury, or loss. Well-being is “the state of being happy, healthy, or prosperous” (n.d.). The goal of this planning is to enhance the community in a way that the safety and well-being of residents are prioritized.



## ACKNOWLEDGMENTS

This plan was developed in collaboration with an advisory committee of community leaders who are invested in community safety and well-being through their involvement in various sectors. In addition to offering their expertise, the lived experience and opinions of residents were also called upon and used to create this document. This plan could not have been developed without the continued support from the West Nipissing community, including the local leaders, residents, media, and the support from Municipal staff. The following is an acknowledgment of key individuals, agencies, organizations, participants, and others who have contributed to this plan. Roles and responsibilities as determined by the Ministry of the Solicitor General will also be provided.

*This plan was developed by and for residents of West Nipissing.*

## Advisory Committee

The Advisory Committee was formed in March of 2020 following a Community Safety and Well-Being Roundtable Event that took place in November of 2019. The Advisory Committee was responsible for advising the Municipality on the priorities of the community. Other duties include:

- Developing and undertaking a broad community engagement strategy to build on the members' awareness of local risks, vulnerable groups and protective factors.
- Developing and maintaining a dynamic data set, and ensuring its ongoing accuracy as new sources of information become available.
- Determining the priority risk(s) that the plan will focus on based on available data, evidence, community engagement feedback and capacity.
- After priority risks have been identified, all actions going forward should be designed to reduce these risks, or at least protect the vulnerable groups from the risks.
- Based on community capacity, developing an implementation plan or selecting, recruiting and instructing a small number of key individuals to do so to address the selected priority risk(s) identified in the plan (A Shared Commitment, n.d. p.22)





The following community agencies and leaders formed the Advisory Committee:

**Agency, Organization or Affiliation**

Au Château  
Centre Alliance  
Collège Boréal  
Community Living West Nipissing  
Conseil scolaire catholique Franco-Nord  
Conseil scolaire public du Nord-Est de l'Ontario  
DNSSAB  
Horizon Women's Shelter  
Literacy Alliance  
Near North District School Board  
Nipissing-Parry Sound Catholic School Board  
North Bay-Parry Sound District Health Unit  
Ontario Provincial Police  
West Nipissing Community Health Centre  
West Nipissing General Hospital  
The Municipality of West Nipissing, Council  
The Municipality of West Nipissing, Staff



*Pictured: Roundtable event, November 2019*



## Implementation Team

In addition to the Advisory Committee, one or more Implementation Team(s) will be utilized to ensure that the Plan and its strategies and action items are undertaken. The Implementation Team's responsibility is to ensure that strategies are implemented to ensure that priority risks are mitigated. Other duties include:

- Identify strategies, establish outcomes and performance measures for all four planning areas related to the priority risk, including promoting and maintaining community safety and well-being, reducing identified risks, mitigating elevated risk situations and immediate response to urgent incidents.
- Engage community members from the vulnerable populations relevant to the priority risk to inform the development of the strategies in each area.
- Establish an implementation plan for the strategies in each area which clearly identifies roles, responsibilities, timelines, reporting relationships and requirements.
- Monitor the actions identified in the implementation plan, whether it is the creation, expansion and/or coordination of programs, training, services, campaigns, etc.
- Report back to the advisory committee (A Shared Commitment, n.d., p.23).

## Participants

The development of this plan also relied on the sharing of stories, experiences, and expectations from community leaders and those with lived experience. The Municipality would also like to recognize the efforts made by these anonymous and important participants including; key informants, survey respondents, and focus group participants. Information on these community consultations and other research methods can be found in the chapter titled "Methodology" on page 20.

## Other Contributors

In addition to those listed above, this plan was also a result of contributions by, and collaborations between, the Municipality and several others. The Municipality of West Nipissing would like to thank:

- The Township of Ear Falls, Municipality of East Ferris, and Township of Nipissing for providing the Coordinator with sample questions and interview guides;
- The Canadian Municipal Network on Crime Prevention (CMNCP) for providing training, samples, and guidance in the planning process;



- Northern Policy Institute for sharing information on asset mapping, and providing suggested guidelines on research ethics;
- The West Nipissing Community Health Centre for their help in conducting a senior engagement session;
- The West Nipissing Tribune for supporting the survey distribution process;
- The West Nipissing Public Library branches for offering print survey copies;
- As well as any others who supported this planning process.

## Coordinator

The final role and contributor in this Community Safety and Well-Being Plan is that of the Coordinator. The Coordinator must be from the Municipality and is usually a clearly identifiable individual who leads the planning and implementation process. Coordinators are responsible for the following:

- Planning and coordinating advisory committee meetings.
- Participating on the advisory committee.
- Planning community engagement sessions.
- Ensuring the advisory committee decisions are acted upon.
- Preparing documents for the advisory committee (e.g., terms of reference, logic model(s), the plan).
- Receiving and responding to requests for information about the Plan.
- Ensuring the Plan is made publicly available (A Shared Commitment, n.d., p.21)

In the case of West Nipissing's Community Safety and Well-Being Plan, the Coordinator is Larissa Yantha, who acts as the Municipality's Special Projects Coordinator.





## VISION AND MISSION

### **Vision: A safer West Nipissing.**

West Nipissing's vision, in coordination with the legislation, is to ensure that West Nipissing is safe for all residents. This vision intends to inspire the Municipality of West Nipissing, the Advisory Committee, and the Implementation Group(s) to recognize their common goal.

### **Mission: A collaborative, proactive approach to strengthen West Nipissing as a whole.**

The mission of this Community Safety and Well-Being Plan is to provide a collaborative and proactive approach that will strengthen West Nipissing as a whole. Following legislation, this means that West Nipissing will focus on social development and prevention to mitigate crime and harm while advancing the safety and well-being of West Nipissing.



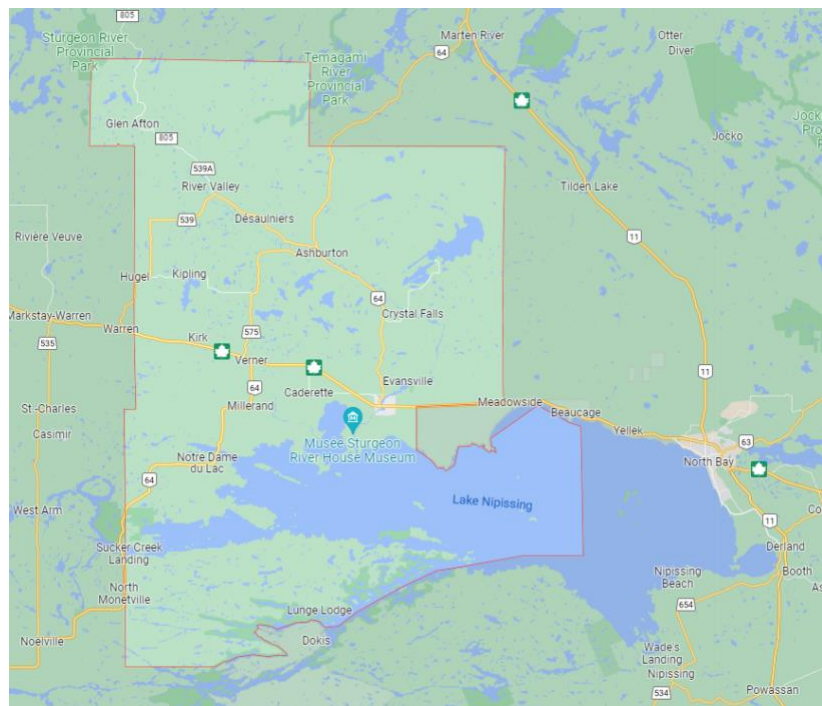


## COMMUNITY OVERVIEW

### Profile

West Nipissing is a community that is 1,994 km<sup>2</sup> in size and is strategically located on the Trans-Canada Highway between North Bay and Sudbury. It is located 400 kilometers north of Toronto, the provincial capital. In 1999, West Nipissing became an amalgamated Municipality in which Cache Bay, Crystal Falls, Desautniers, Field, Kipling, Lavigne, North Monetville, River Valley, Sturgeon Falls, Verner, and 17 and a half unincorporated townships came together.

West Nipissing is known for being friendly and close to nature. The community proudly celebrates its bilingual, Francophone, and Indigenous diversity. West Nipissing is located on the north shores of Lake Nipissing and is home to numerous lakes and waterways, offering an attractive setting for residents, newcomers, and retirees. West Nipissing is an agricultural hub and is surrounded by additional opportunities from the mining, healthcare, public service, retail trade, education, construction, forestry and transportation sectors.

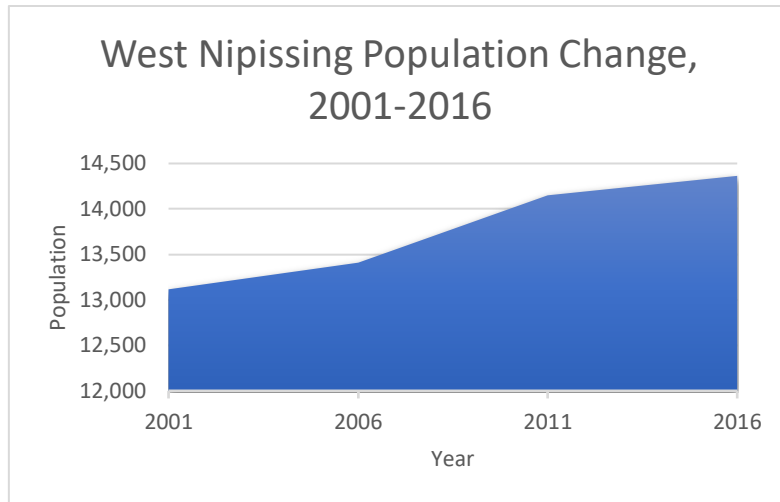


The Municipality of West Nipissing is focused on service excellence, collaboration, and resourcefulness. West Nipissing is committed to providing quality services for both urban and rural residents while proudly maintaining one of the lowest tax rates in the province (Municipality of West Nipissing, n.d.)



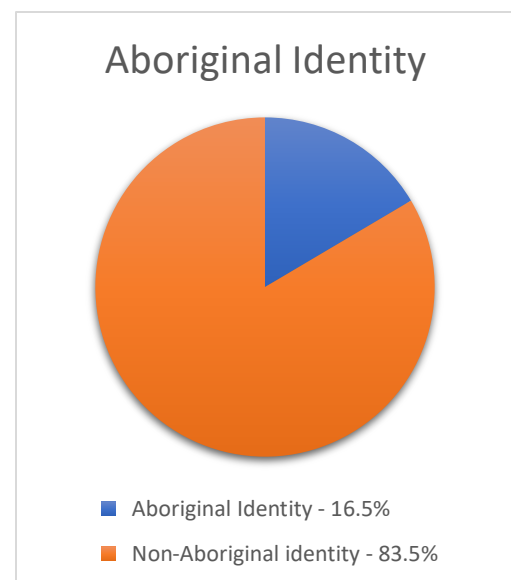
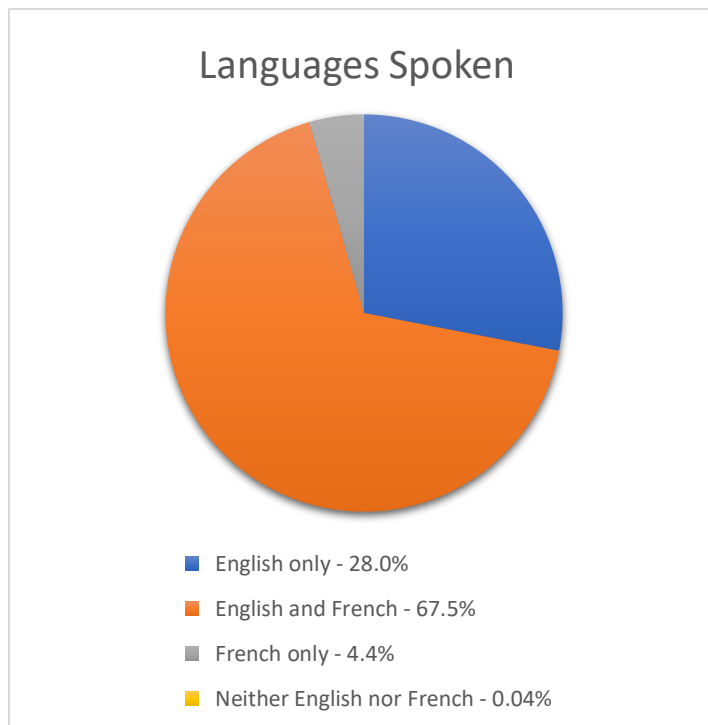


## Demographics<sup>1</sup>



### Fast Facts:

- **14,364** citizens (population increase of 1.5% between 2011 and 2016)
- **67.5%** of residents are bilingual
- **\$76,381** is the median total income of couples
- **61.4%** of the total population is of working age (15 to 64)
- **69%** of residents own their homes



<sup>1</sup> Between 2016 and 2021, the population rose another 1.5 percent, making the most recent population as 14,583.



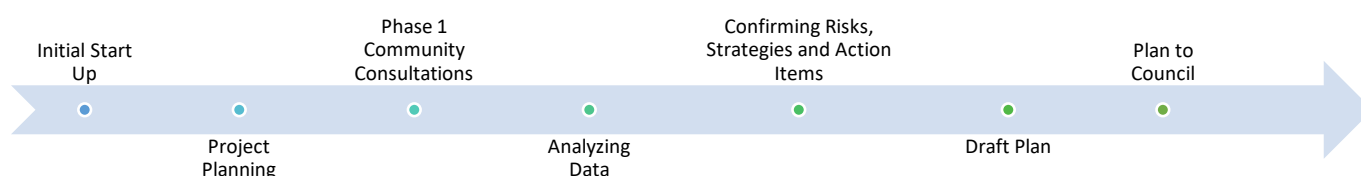


## METHODOLOGY

This plan is the result of numerous community consultations, Advisory Committee meetings, and gathering of public and private data sets.

### Timeline: The Creation of this Plan

The following is a timeline of events that led to the drafting of this safety and well-being plan.



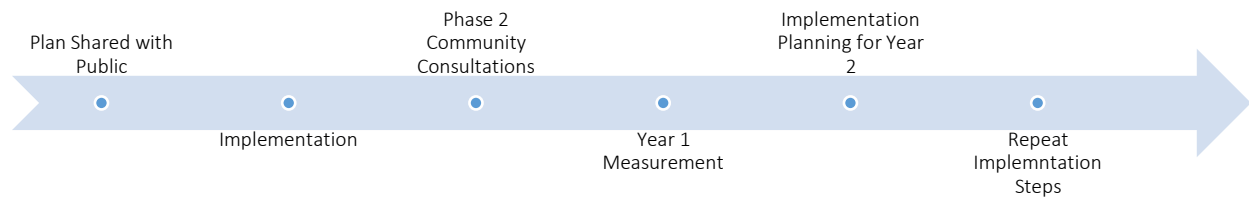
Date	Task
<input type="checkbox"/> November 2019	Roundtable discussion with community leaders, those working in safety, well-being
<input type="checkbox"/> March 2020	Formation of Advisory Committee
<input type="checkbox"/> September 2021	Special Projects Coordinator was hired to take on CSWB Coordinator role
<input type="checkbox"/> October 2021	Project planning, reconvening with Advisory Committee
<input type="checkbox"/> November 2021	Phase 1 of community consultations and engagement sessions
<input type="checkbox"/>	Community Survey (November 19 to December 17)
<input type="checkbox"/>	Senior Survey Groups (December 13 & December 15)
<input type="checkbox"/>	Engagement at the Recreation Centre (December 1)
<input type="checkbox"/>	Key Informant Interviews (November 2 to December 17)
<input type="checkbox"/> January 2022	Gathering and analyzing data, continuing community engagement
<input type="checkbox"/>	Youth Survey (February)
<input type="checkbox"/> March 2022	Confirming risks, defining strategies and action items, discussing assets
<input type="checkbox"/> April 2022	Drafting the Plan
<input type="checkbox"/> May 2022	Review Process and Layout
<input type="checkbox"/> June 2022	Plan to Council for Approval



## Timeline: Implementation and Beyond

The following is a timeline of events that are expected to take place after the Community Safety and Well-Being Plan is approved by Council.

**Please note:** Specific committee meetings and deadlines will be deliberated upon at a later date.



	Date	Task
<input type="checkbox"/>	June 2022	Translating the Plan
<input type="checkbox"/>	July 2022	Plan to be Made Available for Public Viewing
<input type="checkbox"/>	August 2022	Advisory Committee to Approve Implementation Framework
<input type="checkbox"/>	July 2023	Year 1 Measurement
<input type="checkbox"/>	August 2023	Implementation Group Planning for Year 2
<input type="checkbox"/>	September 2023- August 2024	Implementation Year 2
<input type="checkbox"/>	September 2024- August 2025	Implementation Year 3
<input type="checkbox"/>	September 2025- August 2026	Implementation Year 4
<input type="checkbox"/>	September 2026- August 2027	Implementation Year 5, Evaluate & Update Plan



## Research Methods Explained

To produce a strength-based, risk-focused, collaborative plan that also rests on a foundation of evidence and evaluation, several research methods were used.

### Community Consultations

*“A primary data source is an original data source, that is, one in which the data are collected firsthand by the researcher for a specific research purpose or project.... The most common techniques are self-administered surveys, interviews, field observation, and experiments” (Salkind, 2010, para. 1).*

To get a firm grasp on feelings and perceptions of safety, well-being, and belonging in West Nipissing, a crucial part of the research was community consultations. Community consultations were done as a means for primary data collection, while also generating public buy-in. Several methods of community consultations were completed.

**Community Survey-** A community survey was developed to gauge the safety, well-being, and belonging of members of the general public who reside in West Nipissing. The survey opened on November 19, 2021, and remained open for four weeks, closing on December 17, 2021. The survey was available in both English and French, electronically on the Municipality’s website, as well as in print at the local libraries. (See Appendix B for a list of questions).

**Senior Survey Groups-** One of the demographics of interest to the Advisory Committee is seniors. To ensure that this demographic was represented in the research, an event was designed to specifically engage with local seniors. A senior survey session was held twice, one on December 13, 2021, and the other on December 15, 2021, both in the first hour of regular senior’s day programming at the West Nipissing Community Health Centre.

**Engagement at the Recreation Centre-** To engage with residents in a more creative manner, the coordinator had a drop-in activity at the Recreation Centre. A central, thematic question was posted on the wall, and passersby were given the opportunity to respond to the question by posting their responses to the wall. Due to pandemic restrictions, there were fewer people attending programming at the centre, however, the engagement resulted in helpful dialogue and built awareness of the community survey.

**Key Informant Interviews-** One-on-one interviews were conducted over seven weeks, from November 2, 2021, to December 17, 2021. Informants were selected with assistance from the Advisory Committee and consisted of those who are leaders in West Nipissing, work in fields that



overlap with safety and well-being, have lived experience in these areas, or represented a combination of these characteristics. (See Appendix C for a list of questions).

**Youth Survey-** Similar to seniors, another demographic of interest to the Advisory Committee are youth. To ensure that this demographic was also represented in the consultations, a survey was developed to target high school students. École secondaire catholique Franco Cité distributed the survey to a civics class as well as a lunch hour youth group during the first week of February in 2022.

### Secondary Data Collection

*“Secondary data refers to data that already exists and which, can be analyzed beyond what it was originally used for – in this case for [CSWB] research and planning purposes” (District of Nipissing Social Services Administration Board, 2020, sec 2.2.2).*

In addition to the data that was produced through the community consultations, secondary data collection was also undertaken. Gathering data from open sources such as the 2016 Census helped to create a broad perspective of West Nipissing as a Census Subdivision (CSD). This informed the team on statistics such as population growth, changes in community diversity, income, and other statistics that are relevant to well-being. In addition to the more general data gathering that took place using the work of Statistics Canada, the Advisory Committee was also approached for relevant data sets and reports that they may have collected and or published. This includes data on health trends, addiction and mental health.

### Literature Review

To offer effective context to the information provided by the Advisory Committee and derived through the community consultations, a literature review was undertaken. Rather than publishing a separate sub-report of the literature review, the relevant content can be found throughout this document. Information on the community of focus, along with contextual information on safety and well-being, planning, and implementation, were all discovered by remaining privy to material published by the CMNCP, the Municipality itself, and various safety and well-being plans that other local municipalities published.

### Asset Mapping Approach

Asset mapping is a method for gaining a clear image of community assets, programs, and services. Mapping can also help to identify gaps in programs and services, highlighting duplicate services, and can create opportunities for increased collaboration (Falls Brook Centre, n.d.). In the case of Community Safety and Well-Being Planning, a survey for the purpose of mapping assets was beneficial in the identification of community services and programs while also acting as a method for ensuring that plan’s strategies are inclusive of all relevant partners and residents with a stake in





community well-being. Understanding what already exists in terms of services and programming, ensures that strategies are appropriate, and that the Municipality is not “reinventing the wheel,” while also providing context to the plan itself.

These efforts resulted in a buildable chart that represents an inventory of existing bodies. Appendix D displays a paired down or introductory version of this chart. It is intended that this chart will continue to be built upon, and partnerships and social networks will be considered as the implementation framework is developed.

## Metrics for Success

- ✓ The public survey resulted in 544 completed surveys, which represents 3.8% of the population. (The CMNCP considers a successful community safety and well-being survey to represent 1.5% of the total population).
- ✓ 2 senior survey groups were held, resulting in 22 completed surveys and valuable verbal feedback.
- ✓ 2 youth survey groups were done, which resulted in 25 completed surveys.
- ✓ 31 key informant interviews were held with community leaders on all levels, as well as those with lived experience.
- ✓ A sticky note community engagement method was held at the Recreation Centre which resulted in an engagement rate of 1 in 3, which includes 12 unique written responses and a number of verbal feedback and discussion.
- ✓ The asset mapping approach led to an existing body inventory chart, which will be an important starting point for increased collaboration during the later implementation phases.
- ✓ This work resulted in one unpaid media mention in The Tribune.

## Limitations

West Nipissing is a large municipality spanning 1,994 km<sup>2</sup> and according to the 2016 Census, the population is 14,364 (Statistics Canada, 2016 Census of Population). While Sturgeon Falls has the largest population of 6,798 people (Statistics Canada, 2016 Census of Population), there are 7,566 people, or almost 53 percent of the population, that lives outside of Sturgeon Falls. Every attempt was made to ensure that a diverse group of participants, from all corners of West Nipissing, were aware of the survey and empowered to participate. However, it is difficult to determine if complete representation was attained.

In addition to factors of representation, the COVID-19 pandemic restrictions did affect community consultations in a number of ways. Consultations that were originally intended to be in person (i.e.



youth engagement sessions) had to be changed over to a survey format without the presence of the Coordinator. And due to public health restrictions and school closures at the time, they had to be postponed until the new year. The engagement at the recreation centre also faced limitations. Due to reduced capacity at the West Nipissing Community and Recreation Centre, the number of passersby was reduced which affected the viability of the session.

To combat these limitations and ensure that the community is consulted and fully involved in the later implementation phase of this project, it is important that consultations and engagements are continued, and that more rural communities are directly targeted. Phase 1 consultations took place during changing public health restrictions. For that reason it would be ideal if in-person engagements are added when fulfilling action items, measuring, and considering changes to strategy in the upcoming years of this project. Since the first round of consultations, additional contacts have been made with leaders who will enhance these engagements once it becomes time to undertake them once again. The Municipality would like to keep the public informed on the progress of this plan and also include the public in future planning.



After months of consulting with community leaders and those with lived experience, the data was organized and formulated into a report for the Advisory Committee. Together, the Committee confirmed the pre-selected risks and agreed-upon strategies and action items. The following is perhaps the most important part of this Plan. Each priority (or risk) is explained, along with the desired strategies and action items that are to be implemented. Whenever possible, existing programs and services will be identified. Five priority risks were selected along with 16 strategies and 42 action items.

## POVERTY

### What We Heard



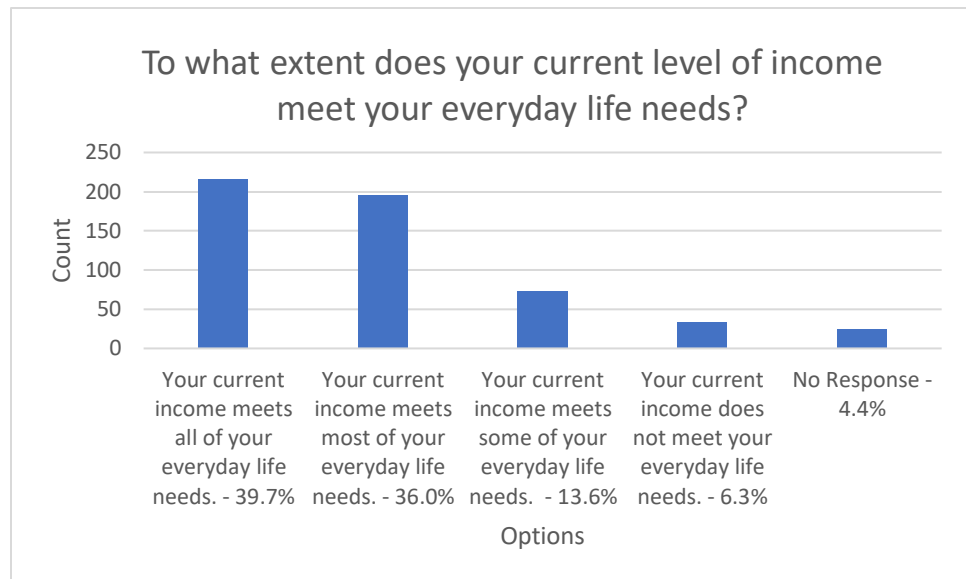
One of the key priorities or risk areas of this plan is poverty. When doing community consultations, poverty was measured or asked about in a number of ways, including food consumption, level of stress over personal finances, and solutions were also requested.

According to those who responded to the community survey (n=544), 0.7 percent of participants selected “often you and other household members did not have enough to eat.” 2.4 percent of respondents selected “sometimes you and other household members did not have enough to eat.”

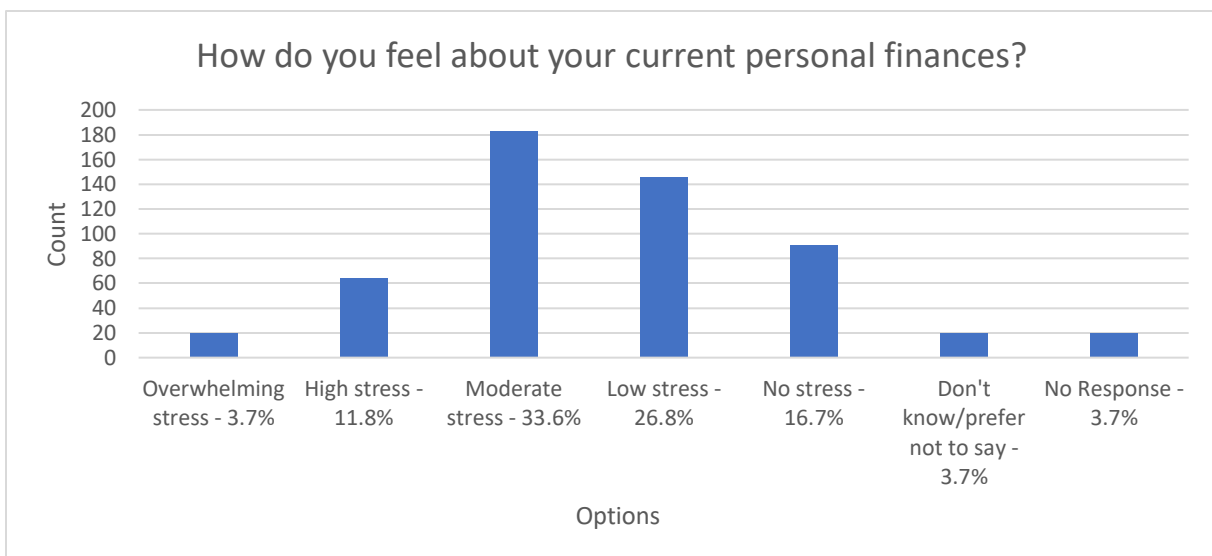




When the community survey asked, “to what extent does your current level of income meet your everyday life needs,” only 39.7 percent of participants selected “your current income meets all of your everyday life needs” and 6.3 percent selected “your current income does not meet your everyday life needs.”



When the community survey asked, “in general, how do you feel about your current personal finances,” only 16.7 percent selected “no stress.” The most common response was “moderate stress” at 33.6 percent.



Poverty was selected as a priority risk by the Advisory Committee because of the downstream effects that it has on safety and well-being. Some of the key informants who have local experience in the social services and education industries noticed that those who require adult educational





programming due to having less than a grade twelve education are more likely to experience unemployment, various forms of homelessness, or are on social assistance. Poverty is a complex issue that is often linked with crime, and lower education levels and is often believed to be a root of other risk areas. Generational poverty was another specific issue raised by key informants, which can exacerbate the issue, making solutions even harder to come by.



## Strategies and Action Items

Strategies	Action Items
<i>Expand approaches to food security.</i>	Lobby for less volunteer-reliant approaches to food security.
<i>Enhance employable skills and life skills through age-appropriate programming.</i>	Investigate options for additional volunteer-led initiatives (community garden, community fridge, etcetera) Investigate the need for financial management classes.
<i>Support the success of families</i>	Take stock on the free, paid, and subsidized courses and classes already taking place, ensuring that all residents are aware of the options. Explore options for daycare in communities with fewer childcare options. Before and after school kids programming.

The key strategies that have been decided are;

- 1) **Expand approaches to food security-** This strategy is the result of consultations that emphasized the need for a more expansive approach to feeding the community. It was acknowledged that the Food Bank and other local programming have done a wonderful job of mitigating hunger in West Nipissing, however alternative approaches are needed. Action items include lobbying for less volunteer-reliant approaches to food security for the purpose of lessening the load on volunteers and placing accountability into the hands of upper levels of government. The other action item, also a result of what was heard in community consultations, reflects the spirit of volunteerism in West Nipissing. Many informants and survey participants expressed a desire to continue building volunteer-led strategies including those seen in other, larger, and more southern communities. Examples include community gardens and exploring the option of adjusting the design for a community fridge to be suitable for a northern climate.



“I think we need a community garden. Imagine organic, sustainable growing where youth and elderly people gather and share food with those who need it. A holistic approach. Poverty is a reality in our community. When you’re not eating, it affects your mental and physical health. It has a ripple effect.” -Anonymous Informant



- 2) **Enhance employable skills and life skills through age-appropriate programming-** This strategy was chosen to reflect the need for additional opportunities to educate and build skills to be employable, safe, and well in West Nipissing. A number of free and paid courses have been offered in West Nipissing prior to the pandemic, however, local leaders and survey participants request bringing back these courses quickly and effectively. Action items include investigating the need for financial management classes to provide families and individuals with the tools needed to save money and spend responsibly. The other action item seeks to appreciate the many skill-building courses that already exist in the community by taking stock of the options that exist currently, and to ensure that all residents are aware of the options that are available to them.

“Skill building is a pathway out of poverty. It is not an overnight process. And it has to be made a priority.” -Anonymous Informant



- 3) **Support the success of families-** The final strategy to help mitigate poverty was selected to represent and appreciate the unique needs of children and youth, and by extension, families. Female survey respondents expressed concern over their ability to take on paid work opportunities because of a lack of daycare options. Exploring options for daycare in smaller and rural communities that have fewer options, was a key action item for this strategy. Another action item is to consider the use and expansion of before- and after-school kids’ programming which would keep children and youth busy, and allow parents more flexible work hours.

## Previous and Current Efforts



Part of effective planning is recognizing the options that are currently available to those living in West Nipissing. There are a number of organizations and agencies that focus on prevention and assisting those who may be experiencing poverty, some of which are local, and others can be found in neighboring cities but have close partnerships with agencies that are in West Nipissing. Some examples include;



- ❖ The Gathering Place (North Bay) and The Alliance Centre collaborates to provide weekly food hampers to individuals and families in need.<sup>2</sup>
- ❖ True Self<sup>3</sup> is an agency located in North Bay that offers courses and services to those living in West Nipissing.
- ❖ In addition to these partnerships, the West Nipissing Food Bank<sup>4</sup> is located in Sturgeon Falls and can be accessed every first and third Wednesday of the month.
- ❖ The Literacy Alliance of West Nipissing<sup>5</sup> focuses on education as a means of reaching career goals. This agency offers a workplace readiness series that trains adults in workplace communication skills, digital technology, and mathematics. The Literacy Alliance also offers opportunities for completing the Ontario Secondary School Diploma (OSSD), the General Education Development (GED), and workshops on banking and personal finances, cooking, and sewing classes.

## Measuring Implementation



There are many indicators and measures for understanding poverty. By considering Low Income Measure (LIM), Low Income Cut-Off (LICO), youth unemployment rates, participation rates, food bank use, educational attainment, and by re-issuing the survey questions periodically, poverty can be better analyzed and understood as implementation takes place.

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<sup>2</sup> For more information on The Gathering Place, visit: <https://www.thegatheringplacenorthbay.ca/>

<sup>3</sup> Information on True Self can be found at: <https://www.trueself.ca/>

<sup>4</sup> The West Nipissing Food Bank can be contacted at 705-753-0314 or join the Facebook group “West Nipissing Food Bank/Banque Alimentaire Nipissing Ouest.”

<sup>5</sup> For more information on the programs and services offered by the Literacy Alliance, visit: <http://www.yes2literacy.ca/>



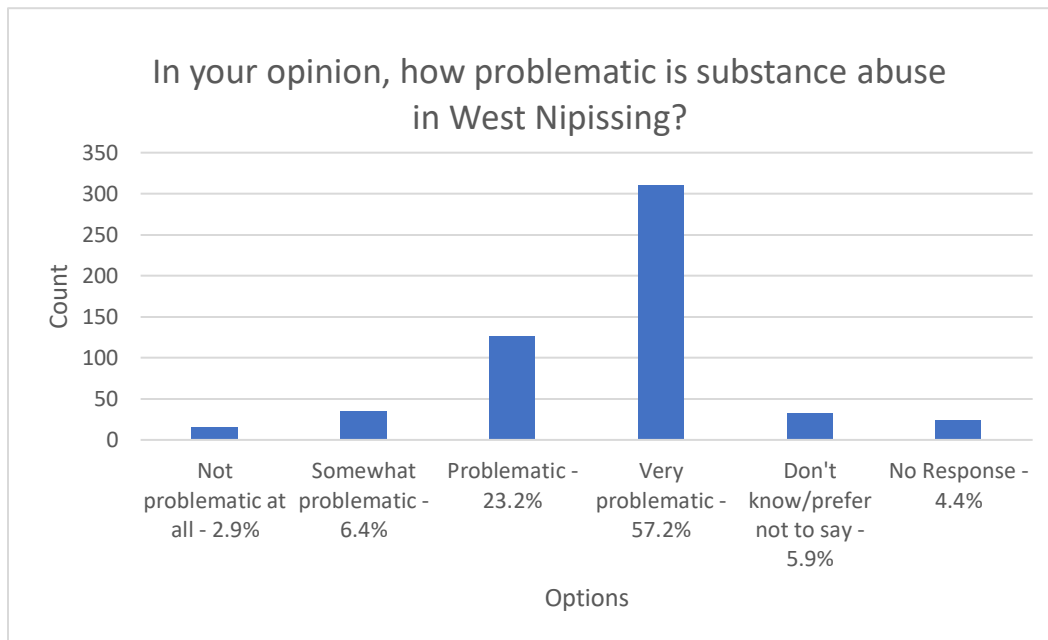
## ADDICTION

### What We Heard



The second priority risk area is addiction. Perceptions around rates of substance abuse were measured in the community consultations and addiction or substance abuse came up frequently in open box responses and in key informant interviews.

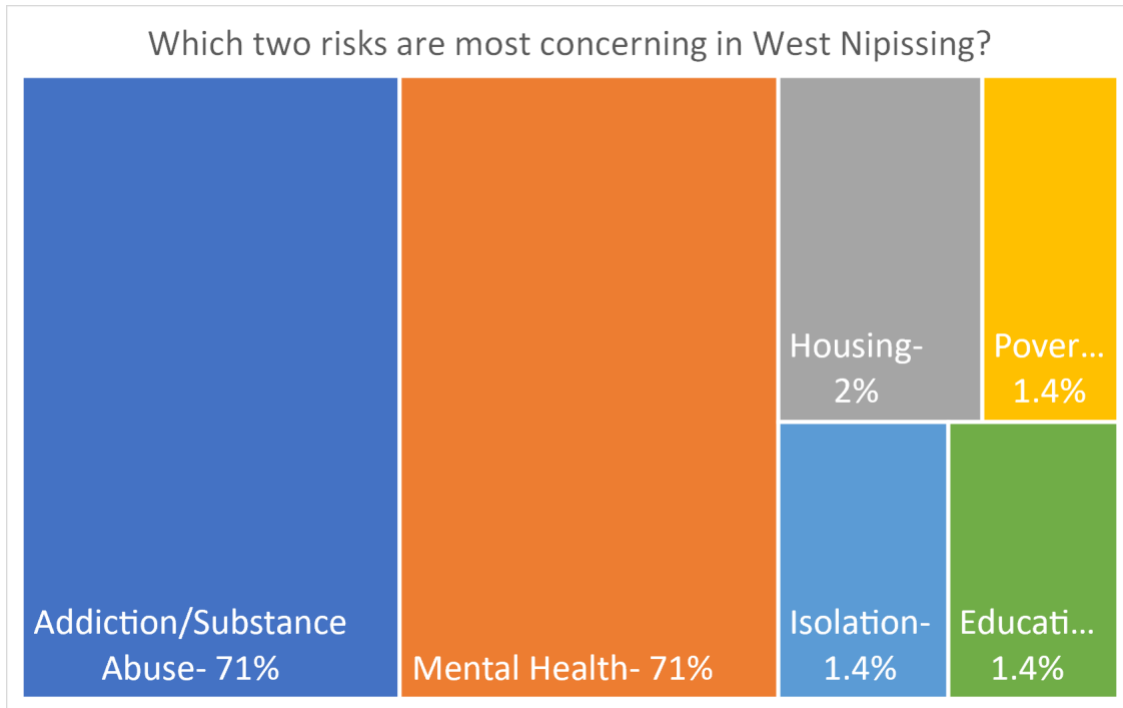
In the community survey, participants were asked, “in your opinion, how problematic is substance abuse in West Nipissing?” 57.2 percent selected “very problematic,” 23.2 percent selected “problematic,” 6.4 percent selected “somewhat problematic,” and 2.9 percent selected “not problematic at all.”







In key informant interviews, informants were asked to identify one or two risk factors that are of the highest priority in their own lives, or the lives of those they work with. Addiction or substance abuse was mentioned most frequently, at a rate of 71 percent.



Addiction was selected as a risk to safety and well-being because of its broad effects on the individual who experiences it, but also their social network and community. Those who experience addiction need services that are not always available locally nor can they be reached rapidly. When undertreated individuals partake in drug use, sometimes paraphernalia is improperly discarded, which business owners and community members have reported finding. Friends and family members are also affected. During key informant interviews, it was found that family members of those experiencing addiction are often underinformed on the treatment and support options, and they too feel the mental health effects of attempting to support those experiencing addiction.

Practitioners are also making note that addiction services are being inundated with referrals and demand for these services is higher than ever. According to the Canadian Mental Health Association, approximately 21 percent of the total population, or about 6 million people, will meet the criteria for addiction in their lifetime. Alcohol was the most common substance for which people met the criteria for addiction at 18 percent (Pearson et al., 2015). Addiction is also linked to other risk factors. Unemployment, for example, can lead to poverty and mental health issues. It also increases the likelihood of turning to coping behaviors that can turn into addiction (Raphaell et al., 2020).



## Strategies and Action Items

Strategies	Action Items
<i>Enhance treatment and prevention programs to meet demand.</i>	Review all treatment and prevention programs currently in West Nipissing, as well as those in neighboring cities.
	Expand the capacity of addiction services by seeking additional funding options to expand current services.
	Explore more, other opportunities for reduced/no wait time clinics.
<i>Implement harm reduction programs</i>	Explore options for safer opioid use.
	Build on existing needle disposal programs.
	Support the programs currently in place and sought out by local leaders in addiction services
<i>Establish supports for family members.</i>	Conduct research to understand the implications of addiction on family members and friends, reporting findings to public and relevant services.
	Introduce options for mutual support and dialogue among people with shared experiences.

The key strategies that have been decided are;

- 1) **Enhance treatment and prevention programs to meet demand**- This strategy seeks to acknowledge the diverse forms of treatment and prevention programs that are already available in West Nipissing, as well as in surrounding municipalities, and recommends that this work needs to be expanded to meet the increasing demand. Action items include reviewing the programs currently offered in West Nipissing and expanding the capacity of these addiction services by seeking additional funding options. During community consultations, it was found that West Nipissing has an assorted palate of intervention methods and service options, but due to a lack of funding, additional personnel cannot be hired. In addition, it has been found that no-wait time clinics have been successful and they too need to be expanded. In key informant interviews, it was discovered that by prioritizing those who are using opioids, successful intervention increases.



“When it comes to opioid use, it really is life or death. Time is of the essence.”

-Anonymous Informant



- 2) **Implement harm reduction programs-** Community consultations often resulted in requests for more radical measures for addressing substance use. One option is to take a harm reduction approach to keep all community members safe. Action items include exploring options for safer opioid use. Often debated, safe use programs are designed to reduce the transmission of disease and death among opioid users. In addition to keeping those who are using substances safe, building on existing needle exchange programs can also keep the broader community safe. Lastly, by supporting both the programs currently in place in West Nipissing, as well as the programs sought out by the local leaders in addiction services, it can reduce the harm that addiction can cause local residents.

“In order to offset mortality rates, we need to do something radical. One of the most meaningful things we can do to prevent people from returning to addiction is providing them with access to services.” -Anonymous Informant



- 3) **Establish supports for family members-** The final strategy that the Advisory Committee wishes to incorporate within addiction as a priority risk, is supporting and recognizing the unique role and effect on family members and friends. Action items include conducting research to better understand the implications of addiction on family members and friends and reporting this information to relevant services. While it is important to prioritize no-wait time clinics and the immediate needs of those who may be using opioids, improving the mental health and well-being of loved ones is an important component. By having readily available data on this local sub-group, it may also increase the likelihood that addiction services and mental health services are able to access funding. And, by introducing options for mutual support and dialogue among those with similar experiences, the mental wellness of this group will likely improve, and knowledge and resource sharing can take place.

“Historically, we’ve been reactive in the way that we treat addiction. But now we need to be proactive in our approach. If we treat it before it happens, we will have greater success.” -Anonymous Informant





## Previous and Current Efforts



West Nipissing has many wonderful services and programming that work to improve addiction in the region. Some of these services overlap with other priority risk areas such as mental health.

- ❖ The Alliance Centre,<sup>6</sup> a service based out of the West Nipissing General Hospital, offers free, confidential, and bilingual substance abuse and mental health services to individuals aged 16 years of age and older. The Alliance Centre offers a number of services and programming including;

- Mental Health Counselling and Treatment Program
- Substance Abuse/Addictions Assessment and Treatment
- Addictions Medicine Program
- Needle Exchange Program
- Intensive Case Management Program
- Walk-In Clinic
- Psychiatric Consultation
- Crisis Intervention Program
- Community Wellness Program

## Measuring Implementation



There are a number of options for measuring addiction and perceptions of addiction in relation to crime. Potential measurements or data to consider during the implementation period includes; EMS/police calls for overdoses, relevant hospital admissions, wait times for services (if applicable), and use or attendance of treatment methods and programming. Perception can also be measured when re-issuing the survey, and other factors such as number of successful funding applications, staff hired, number of family sessions, and number of new services may also be considered.

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<sup>6</sup> For more information on the Alliance Centre, visit: <https://www.wngh.ca/service/alliance-centre/>





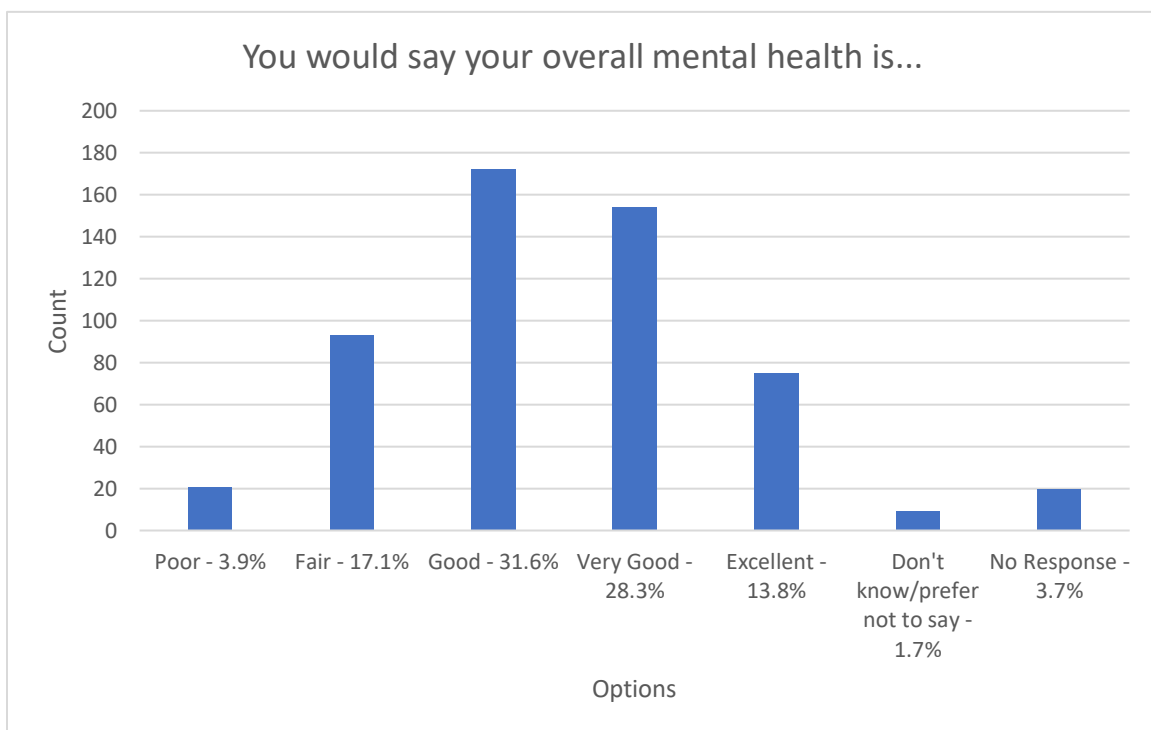
## MENTAL HEALTH

### What We Heard

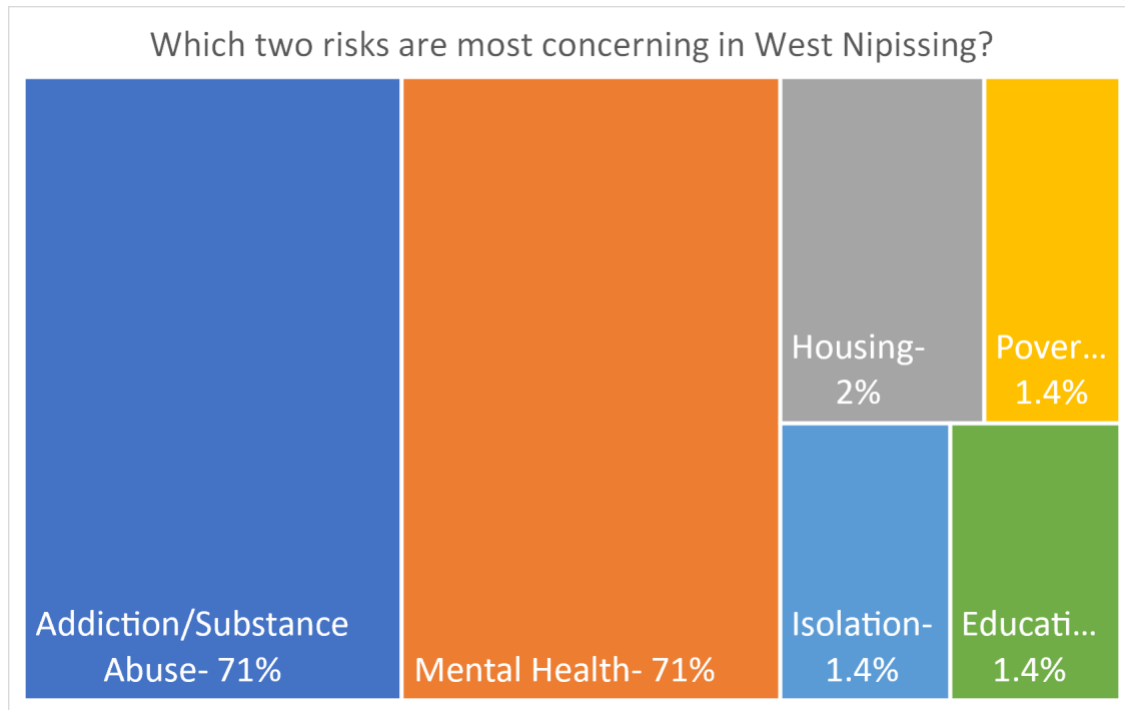


Mental health is another risk that is of priority to this Community Safety and Well-Being Plan, and that services often overlap with those pertaining to addictions. Mental health was selected as a priority risk factor because it mingles closely with the other risks and also the themes of safety and well-being.

The community consultations uncovered interesting results in terms of mental health and mental wellness. The community survey requested participants to self-rate their mental health. Mental health was self-rated as being quite high among the participants with only 3.9 percent selecting “poor.”



In key informant interviews, informants were asked to identify two risk factors that of the highest priority in either their own lives, or the lives of those they work with. Mental health was mentioned just as frequently as addictions, at a rate of 71 percent.



Mental health was selected as a priority risk because of the increased pressure experienced by existing mental health resources and programming. Its close relation to other risk factors, such as homelessness and poverty, is also unique. According to Canada Without Poverty, “estimates place the number of homeless individuals living with a disability or mental illness as high as 45 percent” (Canada Without Poverty, n.d., sec.6). Mental wellness can also be impeded by low income. Those with lower incomes are more likely to experience mental health issues and an increased likelihood of self-harm and suicide. Lastly, when individuals experience wavering mental wellness, it can impact their ability to work, contribute to the community, and fully experience the benefits of social capital.



## Strategies and Action Items

Strategies	Action Items
Enhance mental health services and programs to meet demand.	<div>Review the mental health services and programs currently in place, as well as what is available in neighboring cities.</div> <div>Expand the capacity of mental health services by seeking additional funding options to expand current services.</div>



*Introduce prevention programs that counteract isolation and promote mental wellness across the lifespan.*

*Promote active living.*

Consider the feasibility of bringing in Saturday morning classes.

Engage with youth to better understand their needs and wants for programming.

Locate options for open parks and free green space for shared enjoyment and gathering

Enhance access to existing cultural and recreational facilities and programming.

Consider the use of dynamic lighting options to expand hours for outdoor recreation, walking

The key strategies that have been decided are;

- 1) **Enhance mental health services and programs to meet demand**- Similar to the hurdles faced by those offering addiction services and programs, mental health services have also seen an increase in demand. Action items include reviewing the mental health services and programs currently in place, as well as what is available in neighboring cities. The intention is to bring awareness and analysis on what is available, before expanding the capacity of services by pursuing innovative funding opportunities.

“When I think about safety and well-being, mental health is at the center. There is more that we can do and I want to be a part of that.” -Anonymous Informant



- 2) **Introduce prevention programs that counteract isolation and promote mental wellness across the lifespan**- One of the key themes that arose in community consultations was the concern over isolation. Being a lightly populated municipality over so much land mass means that residents are often rural and isolated. This isolation has been made worse in recent years due to pandemic restrictions. Community consultations shone a light on the need for promoting mental wellness for all age groups, but in particular children, youth, and seniors. Action items include considering the feasibility of Saturday morning classes and engaging with youth to better understand their needs and wants for local programming. By engaging with youth, it can also be better understood how they envision their community to grow and thrive in a post-pandemic world of safety and well-being.



- 3) **Promote active living-** When engaging in community consultations and the literature review, it becomes evident that physical health ties closely with mental health. In addition, a key strength that was frequently mentioned was West Nipissing's proximity to nature. Participants vouched that to improve mental well-being locally, additional green space is needed. The first action item, locating options for open park and free green space for shared enjoyment and gathering, speaks to this. Residents wanted to see additional space for roaming, for exercising, engaging in unorganized sports, and enjoying the company of others for free.

"We need more opportunities and activities for poor and vulnerable populations. We have a lot of great infrastructure and services but to focus on creating a safe and growing community, we need to make sure that we are drawing all community members into healthy activities. Activities like unorganized sports and hobbies and classes; are activities that encourage you to flourish both physically and mentally. We also need to provide a place to just be. A place where people can gather and create their own fun, or visit one another. Unpaid and unorganized is often where the most beautiful gathering takes place." -Anonymous Informant



Other action items include enhancing access to existing cultural and recreational facilities and programming and considering the use of dynamic lighting options to expand hours for outdoor recreation and active transportation. These last two action items focus on West Nipissing's strengths of proximity to nature by working to improve what is available as opposed to inventing something new. These in turn would promote active living, the gathering of residents, and result in the enhancement of mental well-being.

\*While 53.3 percent agree and 27.5 percent strongly agree with the statement "I feel safe walking alone in my community during the day," only 23.7 percent agree and 7.0 percent strongly agree with the statement, "I feel safe walking alone in my community at night."

"I would like to see more lighting in the community and it doesn't have to be intrusive. It could be done in coordination with local artists or steelworkers, something to make the town look unique and allows us to walk safely."  
-Anonymous Informant





## Previous and Current Efforts



West Nipissing has many mental health services that overlap with addiction services and can be accessed in person or online/by telephone.

- ❖ The Alliance Centre,<sup>7</sup> a service based out of the West Nipissing General Hospital, offers free, confidential, and bilingual mental health and substance abuse services to individuals aged 16 years of age and older. The Alliance Centre offers a number of services and programming including;
  - Mental Health Counselling and Treatment Program
  - Intensive Case Management Program
  - Walk-In Clinic
  - Psychiatric Consultation
  - Crisis Intervention Program
  - Community Wellness Program
- ❖ Hands: The Family Help Network<sup>8</sup> is dedicated to helping families. They offer a number of services, including child and youth mental health services. They offer a counseling clinic for those under 18 years of age as well as options for long-term support.
- ❖ There are also numerous mental health crisis lines for adults, children and youth, older adults and seniors, Indigenous peoples, and LGBTQ+ people<sup>9</sup>. For example, the Mental Health Crisis Line for Children and Youth is a phone line intended for children and youth as well as their families, caregivers and service providers. This is available for anyone living in Nipissing and Parry Sound Districts.
- ❖ The local school boards also play a role in the mental health of youth. The Mental Health and Well-Being team at the Conseil scolaire catholique Franco-Nord is composed of Social Workers/Attendance Counsellors, a Child and Youth Worker, a Psychotherapist, and a Mental Health Nurse. The team provides services and support in promotion, prevention, and intervention.

In addition to services that directly relate to mental health, West Nipissing also has a number of options to improve physical well-being and promote active living.

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<sup>7</sup> For more information on the Alliance Centre, visit: <https://www.wngh.ca/service/alliance-centre/>

<sup>8</sup> To find out more about “Hands,” visit their website at: <https://thefamilyhelpnetwork.ca/>

<sup>9</sup> For a complete list of mental health services in our area, visit: <https://www.myhealthunit.ca/en/health-topics/mental-health-services.asp>





- ❖ The Municipality of West Nipissing has fitness programs and facilities.<sup>10</sup>
  - Swimming pools, indoor and outdoor ice rinks, and gym facilities can be found in many communities.
  - The Municipality also offers a number of programs for all ages including lifeguarding and first-aid classes, open lap swims, and open recreational gym access for participants to work on weight training and cardio.
- ❖ The Rod and Gun Club<sup>11</sup> is a non-profit member club of the Ontario Federation of Anglers and Hunters (OFAH) and is dedicated to conservation. Located in Sturgeon Falls, the club has 11 kilometers of snowshoe trails and 13 kilometers of ski trails. They also have options for archery, trapshooting, and a shooting range.
- ❖ Lastly, the West Nipissing Cycle for Charity<sup>12</sup> was founded in 2016 and is a yearly event designed to promote active living and fundraise to provide bikes, helmets, and locks to youth.

## Measuring Implementation



There are many metrics for measuring mental health and well-being, including the self-rating that took place in the community survey. Other measurement options include relevant hospital admissions, wait times for services, the accessibility rating of services, use or attendance at facilities, number of mental health services added or staff hired, classes added to the roster, use or attendance at parks, as well as any efforts to expand lighting.

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<sup>10</sup> For a list of programs and services offered by The Municipality of West Nipissing, please visit:

<https://www.westnipissing.ca/culture-recreation/>

<sup>11</sup> For information on membership and activities, visit: <https://sfrgc.ca/>

<sup>12</sup> To join upcoming charity rides or view the cycling route, visit: <https://discoveryroutes.ca/?event=west-nipissing-cycle-for-charity>.



## HOUSING AND UNDERHOUSED

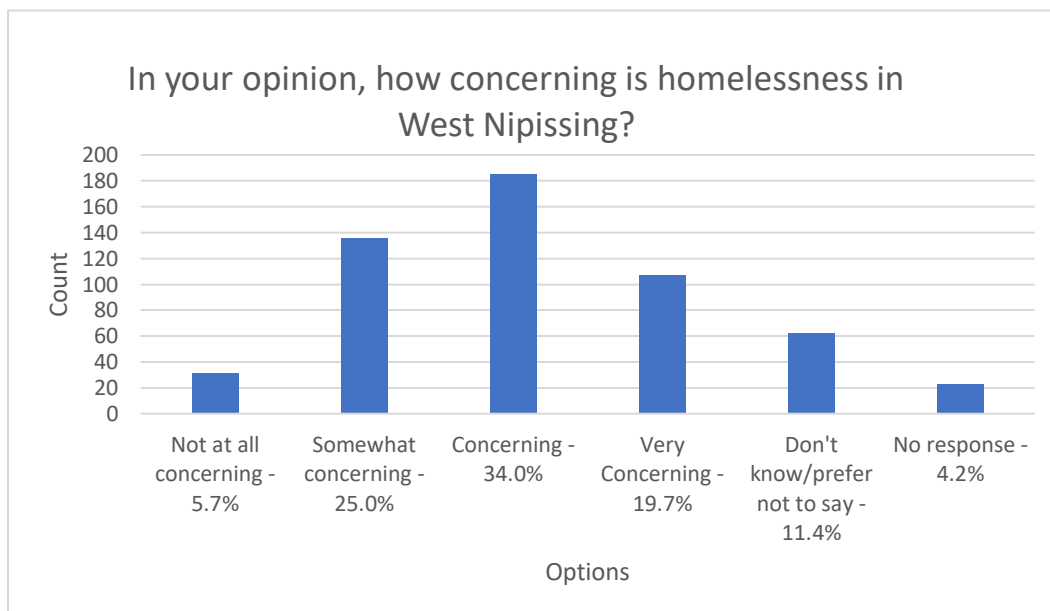
### What We Heard



The fourth priority risk area is housing and underhoused populations. Like the other risk factors discussed thus far, this risk is also relevant to safety and well-being. Shelter is a necessity of life and necessary for being safe and well. Additionally, overcrowding can lead to health issues. High housing costs and lack of diverse housing options also creates a burden on personal finances. These obstacles can contribute to stress and unhealthy means of coping (Raphaell et al.

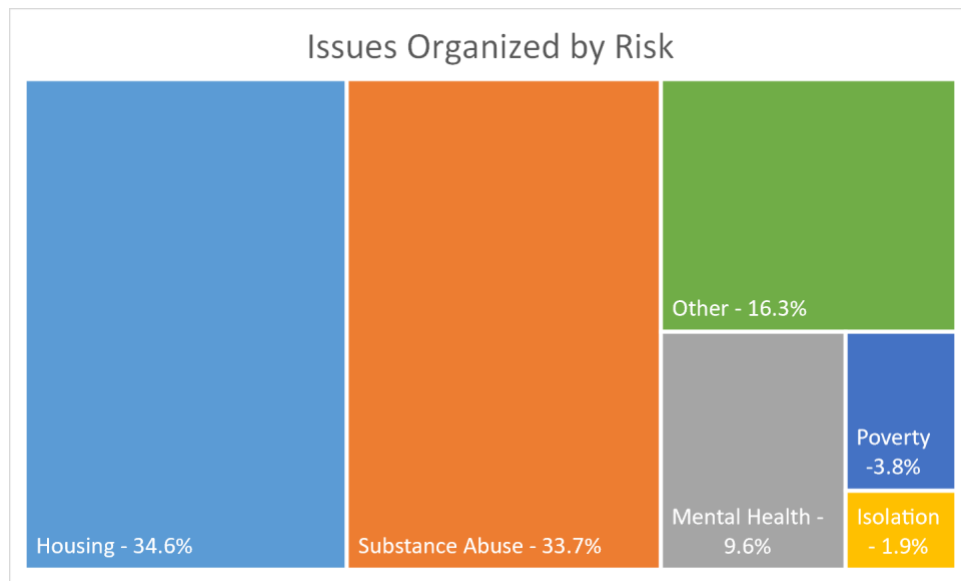
2020). This priority was determined to reflect concern over the ongoing housing crisis and the growing rates of homelessness in West Nipissing, as well as Nipissing District and across Northern Ontario more broadly. Nipissing has experienced an increase in unsheltered homelessness, sheltered homelessness, and provisionally accommodated people. Investing in, and improving housing, is a cost-saving mechanism. For every \$10 spent on housing and support for chronically homeless individuals, there is \$22 of savings related to health care, social supports, housing, and the justice system (Canada Without Poverty, n.d., sec. 6).

The community survey sought to understand perceptions of homelessness in West Nipissing. When asked, “in your opinion, how concerning is homelessness in West Nipissing,” 11.4 percent admitted that they didn’t know. 19.7 percent selected “very concerning,” 34.0 percent selected “concerning,” 25.0 percent selected “somewhat concerning,” and 5.7 percent selected “not at all concerning.”





In an open response question, survey participants were also asked “which issue(s) require(s) the most improvement or attention to improve quality of life, safety, and well-being in West Nipissing?” After organizing the responses according to risk factors, and assigning all other concerns to an “other” category, 34.6 percent of those who responded said that housing needs to be viewed as the top issue requiring improvement.



When participants were asked how housing does not meet their needs, the responses were split into two key categories; those who are satisfied with their housing situation but are concerned about their fellow community members’ housing conditions, and, those who are concerned about their current housing situation but do not feel as if there are adequate options available to them.

According to participants in the community consultation phase, the housing situation in West Nipissing falls short in the following ways: there are a lack of affordable rentals, houses for purchase are inflated beyond what is affordable to most residents, there are inadequate transitional and emergency housing options, and there is a lack of subsidized housing options. A housing strategy, a shelter for men, and all-around more affordable housing options for those across the lifespan were the most frequent recommendations made by key informants.



## Strategies and Action Items

Strategies	Action Items
<i>Improve understanding of West Nipissing's housing needs.</i>	Reviewing current approaches to housing.  Conduct a needs assessment to understand what units are needed and rank their priority level.
<i>Increase emergency and transitional housing units.</i>	Reviewing current approaches to housing.  Explore funding options and partnerships.  Investigate the need for a warming centre or low barrier shelter for the winter months.
<i>Increase affordable housing units.</i>	Reviewing current approaches to housing.  Explore funding options and partnerships
<i>Enhance in-home supports for aging in place.</i>	Reviewing current approaches, including volunteer and paid positions.  Explore options for keeping seniors safe, healthy, and thriving in rural communities.

There are four key strategies to address housing and underhoused in West Nipissing. They are;

- 1) **Improve the understanding of West Nipissing's housing needs**- Part of working to improve the housing situation in any municipality is recognizing that housing and homelessness require understanding the root causes and developing awareness of diverse approaches to overcome them. For this reason, action items include reviewing the current approaches to housing and conducting a needs assessment to understand what units are needed and what their level of priority is.
- 2) **Increase emergency and transitional housing units**- This strategy was selected to reflect the need for housing for those who are experiencing immediate homelessness. Action items include reviewing the current approaches including what is available and what options might be missing, exploring funding options and partnerships, and investigating the need for a warming centre or low barrier shelter for the winter months.



"I don't remember seeing homelessness as often as I do today. We see it in our larger, neighboring cities where they have these huge encampments, but we're starting to see that locally. When I go for walks in the summer, I run into small encampments. It is more of an issue than we think." -Anonymous Informant



- 3) **Increase affordable housing units-** Along with prioritizing emergency housing, there is also a need for affordable housing across the lifespan. Similar to the previous strategy, action items include reviewing the current approaches to this type of housing and looking into funding options and partnerships.

"Affordable housing needs to be made a priority in West Nipissing. If you don't live in appropriate housing, you feel unsafe. If you don't have housing, you have issues of homelessness but also addiction and mental health issues. There are many problems that could be solved through a housing-first approach."  
-Anonymous Informant



- 4) **Enhance in-home supports for aging in place-** The final strategy for housing and underhoused is designed to support seniors and older adults in West Nipissing. Action items include reviewing current approaches, along with what is available and needed for both volunteers and paid positions, as well as exploring innovative options for keeping seniors safe, healthy, and thriving, at home in their communities outside of Sturgeon Falls.

"We have a lot of great services for seniors here... When we bring people together, we can better help their medical and socialization needs. But for those living on the outskirts, you start to see the effects of isolation. Au Château, the [West Nipissing Community] Health Centre, the Golden Age clubs all play a huge role in prevention and housing. To beat the problem is not necessarily bringing seniors into a centre, but to use what and who we have in the local communities to bring people together and take care of one another." -Anonymous Informant







## Previous and Current Efforts



While West Nipissing faces challenges with housing, there are many services and organizations with housing mandates and support underhoused people.

- ❖ Au Château<sup>13</sup> has a 160-bed long-term care home that caters to West Nipissing's aging population.
- ❖ The District of Nipissing Social Services Administration Board (DNSSAB)<sup>14</sup> is responsible for funding and administering social housing and work to prevent homelessness.
- ❖ Horizon Women's Centre<sup>15</sup> is an emergency housing option for victims of domestic violence or women and children in crisis. In addition to short-term shelter, Horizon also provides education to the public, counseling, and support for victims of elder abuse.

## Measuring Implementation



There are many options for measuring and understanding the perceptions around housing in West Nipissing, including wait times for low-income housing, Point in Time Counts, average rent cost, average mortgage, counts for each type of housing, and percentage of those who own. Perception can also be re-measured using the survey question.

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<sup>13</sup> To find out more about Au Château's housing options, call 705-753-1550.

<sup>14</sup> To learn more about the role of DNSSAB, visit their website at: <https://www.dnssab.ca/>

<sup>15</sup> Information on Horizon Women's Centre can be found on their website at <https://horizoncentre.ca/>



## COMMUNITY COHESION

### What We Heard

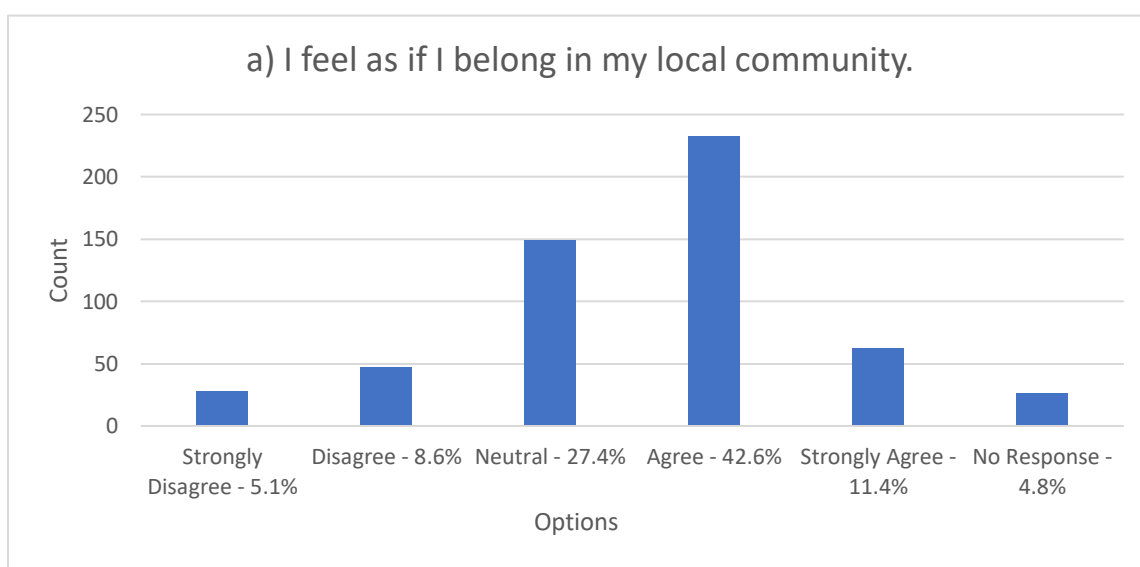


The fifth and final priority risk of this plan, is community cohesion. Cohesion, meaning “the act or state of sticking together tightly” is often used in conjunction with the term “cohesive society” which, according to the OECD, is one that “works towards the well-being of all its members, fights exclusion and marginalization, creates a sense of belonging, promotes trust, and offers its members the opportunity of upward social mobility” (OECD, 2012, para. 1). Community

cohesion, in the eyes of West Nipissing, is the ideal outcome of embracing a cohesive society to promote safety and well-being.

This risk was prioritized to best answer the Ministry’s expectations of creating a Community Safety and Well-Being Plan that is strength-based and collaborative. But it was also selected in part due to how often issues and solutions for collaboration, information-sharing, and increased events around community wellness, were called for. While this risk factor overlaps with others and showed up in many ways during the consultation phase, only a few key results will be displayed and themes explained.

While belonging was an element that appeared in the survey questioning, trust, and social mobility were inadvertently measured in the research. When asked to rate the statement “I feel as if I belong in my community,” 24.6 percent agreed, but 27.4 percent selected “neutral.” 5.1 percent strongly disagree, 8.6 percent disagree, and 11.4 percent strongly agree. 4.8 percent did not answer the question.

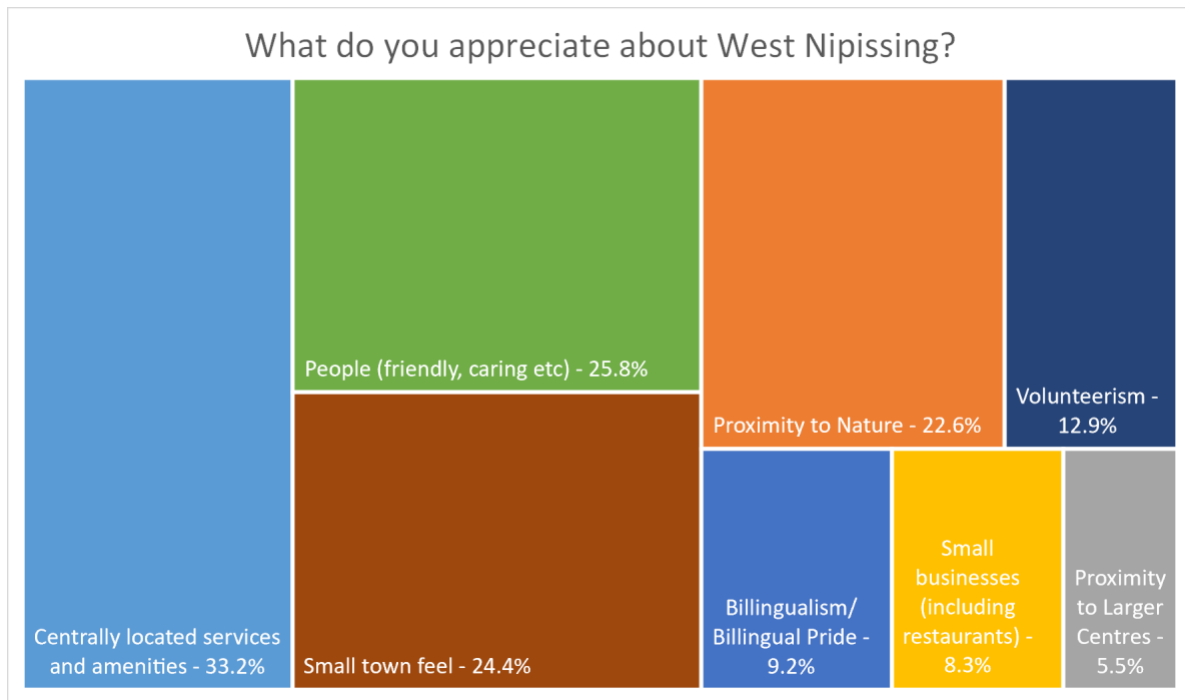




During key informant interviews, it was found that local police, family, friends, and neighbors are all trusted members of the community and make people feel safe and happy in West Nipissing. 60 percent of informants specifically mentioned the local OPP detachment or officers. 67 percent mentioned local first responders or emergency services more broadly. 66 percent mentioned their family, friends, neighbors, or coworkers.



When asked, “what do you appreciate about West Nipissing?” most who commented (33.2 percent), said that they appreciated the centrally located services and amenities. 25.8 percent said that the community and its people are friendly. 24.4 percent made note of how they liked the “small-town feel.” Others said they appreciate the proximity to nature, volunteerism, bilingualism, small businesses, and the proximity to larger centres.



In addition to the results already provided, calls for community cohesion more broadly came up often when participants were asked what they believe needs to take place for all West Nipissing residents to be safe, well, and feel as if they belong. In key informant interviews, which were largely done with community leaders on all levels, it was found that collaboration and knowledge sharing among community resources, organizations, and agencies must be improved. In addition,



informants recognized that education and awareness play a significant role in perceptions of community safety and well-being. Informants suggested that those who have higher education, work experience, or lived experience with vulnerable people are less likely to perceive threats to personal safety in public settings. As such, they recommended encouraging increased relationship building among the general public to change the way residents perceive a threat, and in turn, understand, respect, and protect local vulnerable people. Lastly, the community consultations demonstrated that leaders and residents alike were hopeful that the end to pandemic restrictions would bring about opportunities for increased social cohesion in West Nipissing through increased programming, events, and strategizing for improved wellness all around.



## Strategies and Action Items

Strategies	Action Items
<i>Improve inter-agency knowledge sharing and collaboration.</i>	Conduct a review of the current planning tables and committees (i.e. expand on asset mapping).
	Explore whether a sub committee is needed that would be tailored to assisting with mitigating immediate risks, or if this falls onto the Working Group. (i.e. Crisis Committee, Red button group)
	Decide how often and by what means this group meets and target groups.
<i>Create an accessible service directory.</i>	Determine a lead for directory creation.
	Explore current directories and options.
	Determine method of directory to ensure total accessibility (by what means is it shared/posted), how often it requires review and update



*Continue relationship building and working on community cohesion between leaders and residents.*

Increase education and awareness of vulnerable populations with the wider public

Consider ways in which local leaders' training methods could be improved to better support racial and sexual communities/minorities locally

Continue the work that is being done to build relationships between police services and the community

Celebrate culture and community wellness through events.

Offer opportunities for training (intercultural, anti-racism, LGBTQ+ related) for all levels of the community (residents, leaders, workplaces etc.).

Promote opportunities for leadership and social development among youth (including youth who may fall into marginalized groups).

There are three key strategies for improving community cohesion in West Nipissing. They are;

- 1) Improve inter-agency knowledge sharing and collaboration-** To improve relationships and create a suitable foundation for long-term collaboration at the agency and organization level, the following action items have been selected. First, an in-depth review of the current planning tables, committees, organizations, and agencies must be undertaken. A preliminary asset mapping exercise was undertaken for this plan; however, it would be most beneficial to continue these efforts in the coming years when pandemic restrictions and crises are less likely to burden these leaders in community safety. In addition, a discussion on what type of collaboration is needed for safety and well-being to be had in West Nipissing, is needed. In the consultations, informants recommended a sub-committee for the purpose of mitigating immediate risks faced by individuals and or families in West Nipissing. Currently, there are emergency tables that exist, but it is possible that they fail to include some community leaders who frequently engage with vulnerable populations. Lastly, the terms of reference including how often this group meets, as well as who their target groups are, need to be drafted and finalized.





“We have a good network but we need to have a committee that is designed to assist individuals facing immediate crisis. Someone that we can call to make sure that the client will get the services they need. Because all too often, when they end up in our office, they need some kind of help. And it may not be the help we can provide but maybe we can do something to steer them in the right direction... When someone is in crisis, you don’t want them to leave your establishment. If you let them go, who knows what can happen to them. It’s about caring for their safety and the community’s safety.” -Anonymous Informant



- 2) Create an accessible service directory-** Another theme that arose from the consultations was the perceived lack of complete communication and or knowledge between organizations and agencies and community members. In particular, it was found that when community members need services that fall into more than one priority risk area, they are unsure where to find accurate and updated information. To create a service directory that benefits all ages and abilities, action items include; determining a lead for directory creation, exploring any directories that already exist and the options for evolving those, and determining a method for the future directory that would ensure full accessibility. Also, determining how often the directory requires a review and managing updates would contribute to its success.

“There has to be an awareness of what is in our community. And not a one-time effort but on a continuous basis... We need to communicate what services are here, define which services are free, and reassure residents of confidentiality.” -Anonymous Informant



- 3) Continue relationship building and working on cohesion between leaders, organizations/agencies, and residents-** The final strategy to improve community cohesion, is to continue strategic relationship building among all groups; the community leaders in safety and well-being, leaders in the community who may have a different stake, and residents. Action items include working to improve education and awareness on vulnerable populations with the public, considering improvements or addendums for training local leaders on racial and sexual minorities, and continuing the work that is being done to build relationships between local police and the community. As reflected in the research, a strength in this community is the use of police in West Nipissing. While the intention of planning for safety and well-being is to reassert responsibility and power upstream, it remains important to recognize the contributions of police officers in this particular community. When police assistance and leadership are required, then leaders and residents can be assured that this is taking place in a positive manner.



“We need to work together. One of our core values is partnerships. And we believe that partnerships make a difference for the people we support. We have a philosophy where we will be involved in our community. We need to participate as equal partners in the community.” -Anonymous Informant



Another method for increasing community cohesion, which was present before the pandemic, is using public events for celebrating culture and wellness. Community events can tie into mental health and wellness by encouraging people to gather and support local businesses and endeavors. Key informants and survey participants also encouraged offering additional training opportunities so that residents, community organizations, and leaders, can all become more knowledgeable on racial and sexual minorities. Lastly, by promoting opportunities for leadership and mentorship of local youth, volunteer opportunities increase, education and awareness increases, improving social capital.

“Sensitivity and inclusion training would benefit professionals and community members in West Nipissing. By changing the culture of inclusivity, we can ensure that everyone, Indigenous people, LGBTQ+, racialized people, feels safe. Training and education are important. This could be a turning point in terms of making sure that everyone’s safety matters.” -Anonymous Informant



## Previous and Current Efforts



Although the COVID-19 pandemic has created unique challenges for enhancing social capital, there has been a number of successful community events and opportunities for collaboration that have contributed to the improvement of community cohesion across West Nipissing.

- ❖ The West Nipissing Pride Committee<sup>16</sup> was established in 2020 and seeks to improve cohesion and inclusiveness in the community by making LGBTQ+ people feel welcome. In June 2022, the committee hosted West Nipissing’s first Pride Month events.
- ❖ There have also been a number of community events including; the 2019 International Plowing Match (IPM), Step Dance and Fiddle Fest, River and Sky Festival, and Feast on the Farm, all of which have celebrated culture and wellness.
- ❖ Community beautification groups<sup>17</sup> are another example of volunteer groups that have been active in West Nipissing, some operating as early as 1995, and who are working to clean up streets, parks, and gardens in West Nipissing.

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<sup>16</sup> To follow the events and support the efforts of the local Pride committee, visit their Facebook page “West Nipissing Pride - Fierté Nipissing Ouest.”

<sup>17</sup> To support or join the Sturgeon Falls group, join their Facebook group “Sturgeon Falls Beautification Group.”



- ❖ “Friends of the Beach”<sup>18</sup> is another group that specifically aims to care for the beach in Sturgeon Falls by raking and disposing of litter.
- ❖ There are also a number of Municipal committees and planning boards that have a stake in safety and well-being, two of which include the Accessibility Advisory Committee and the Police Services Board.<sup>19</sup>

## Measuring Implementation



There are a number of formal and informal methods for measuring the implementation of action items designed to improve community cohesion. Options include periodically measuring feelings of belonging and experiences with discrimination by redistributing the survey. Participation in events, number of new partnerships/collaborations, attendance at training, feedback from training sessions, and online traffic counts of the directory are also options for measuring the implementation of these action items.

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<sup>18</sup> To find out more about Friends of the Beach, check out their Facebook group “Friends of the Sturgeon Falls Beach.”

<sup>19</sup> For a complete list of municipal boards and committees, visit: <https://www.westnipissing.ca/town-hall/boards-and-committees/>



## LOOKING AHEAD

The contents of this plan and associated priorities, strategies, and action items represent the efforts that the Municipality of West Nipissing and the Advisory Committee feel are imperative to improve West Nipissing's safety, well-being, and belonging. This plan is just the beginning. As reflected in the timeline on page 19, a number of steps must be taken for this plan to move forward in a way that creates measurable impact. Developing the plan is the first step, and the emphasis will now be reallocated so that implementation is at the forefront, followed by measurement, and periodic review.

The Municipality and the Advisory Committee are confident that this plan will navigate any uncertainty as well as a constantly changing landscape of safety and well-being practices and mandates. As such, this plan was developed in a way that factors in any unforeseen changes and hurdles, including the upcoming implementation framework and measurement efforts. The Municipality is focused on moving ahead for the purpose of enhancing safety and well-being.

The Plan's immediate goals:

- To build the Implementation Team in a way that reflects the knowledge and stake of the community's many community partners and leaders;
- To determine the scheduling of various checkpoints that reflects the Implementation Team members' priorities and schedules, and that of the municipal cycle;
- To finalize indicators and benchmark statistics that are reflective of all five risk areas
- To share and celebrate successes and shortfalls with the broader community to facilitate transparency

The Municipality and the Advisory Committee will continue:

- Working with the public to ensure that consultations are continuous and inclusive;
- Building a knowledge base and shared understanding of the many organizations, agencies, and mandates, that are already working towards improving the safety and well-being of residents;
- Learning from the emerging best practices, data, research, and Community Safety and Well-Being Plans of neighboring municipalities;
- Prioritizing the safety and well-being of West Nipissing residents for years to come.





## APPENDIX A

### Glossary

**Collaboration:** Individuals, agencies or organizations, working together for a common purpose, sharing responsibility and striving for mutual outcomes.

**Community:** In the case of this plan, community refers to West Nipissing as a whole.

**Community engagement:** “The process of inviting, encouraging and supporting individuals, human services agencies, community-based organizations and government offices and services to collaborate in achieving community safety and well-being” (A Shared Commitment, n.d., p.59).

**Community safety and well-being:** according to the CMNCP, “is a sustainable state where every community member is safe, feels a sense of belonging, has opportunities for engagement and social and cultural expression” (CMNCP, 2020, p.7).

**Lived Experience:** is knowledge gained through first-hand experiences. Those who had personal experiences with the risk factors were approached, surveyed and or interviewed during the community engagement and consultation phase.

**Partners:** “Agencies, organizations, individuals from all sectors, and government which agree to a common association toward mutual goals of betterment through shared responsibilities, complementary capabilities, transparent relationships, and joint decision-making” (A Shared Commitment, n.d., p.59).

**Provisionally Accommodated:** Also known as “hidden homelessness,” this refers to people who are ‘couch-surfing’ or they are living temporarily with others. “Provisionally housed populations can also be staying temporary in a motel/hotel or those who are staying in a public institution (hospital, detox, detention, etc.) but who do not have permanent housing” (DNSAAB, 2018, p.33).

**Safety:** is “the condition of being safe from undergoing or causing hurt, injury, or loss” (Merriam-Webster, n.d.).

**Sheltered homelessness:** A form of absolute homelessness, it is “defined as those who are sleeping in emergency shelters, extreme weather shelters, violence against women (VAW) shelters and transitional shelters. This can also include people who are receiving vouchers to stay in hotel/motel rooms when there are no shelter beds available” (DNSAAB, 2018, p.6).



**Social determinants of health:** “the conditions in which people are born, grow, work, live, and age, and the wider set of forces and systems shaping the conditions of daily life. These are protective factors of health and well-being including access to income, education, employment and job security, safe and healthy working conditions, early childhood development, food security, quality housing, social inclusion, cohesive social safety network, health services, and equal access to all of the qualities, conditions and benefits of life without regard to any socio-demographic differences. The social determinants of health are the same factors which affect individual, family and community safety and well-being” (A Shared Commitment, n.d., p.60).

**Transitional Housing:** is a type of accommodation “that is meant to bridge the gap from homelessness to permanent housing through the use of structure, supervision and support. It is an intermediate step between emergency shelter and permanent housing that is limited in time to a stay of approximately three months to three years. Transitional housing also provides an environment where individual can work in a supported environment to address issues that led to homelessness. Individuals will be working towards moving on to long term permanent housing” (DNSAAB, 2018, p.33).

**Unsheltered homelessness:** Another form of absolute homelessness, it is “defined as those who are sleeping in places unfit for human habitation. This includes sleeping in the following types of locations: the streets, alleys, parks, public locations, transit stations, abandoned building, vehicles, and other outdoor locations where people who are homeless may sleep” (DNSAAB, 2018, p.6).

**Upstream:** Refers to the social and economic structures and systems that help to determine distribution of wealth, health, wellness, and with those, the opportunities and power to make decisions. This term, as well as “downstream” is used frequently in planning when attempting to address the root of the problem.

**Well-Being:** is “the state of being happy, healthy, or prosperous” (Merriam-Webster, n.d.).





## APPENDIX B

### Community Safety and Well-Being Survey

We want to hear from you! Tell us what community safety and well-being means to you.

We want to understand how you perceive community safety and well-being in West Nipissing and to learn from your lived experience. We're looking at what currently exists and is working well, as well as identifying challenges and community needs. Please note that sensitive subjects may be discussed. As such, you are free to decline to answer any questions. Your answers are anonymous (you will not be asked for identifying information). This data will be carefully stored to protect all information obtained. Responses will be collected until DECEMBER 17, 2021.

#### Demographics

##### 1) Which West Nipissing community do you live in?

- ☐ Cache Bay
- ☐ Field
- ☐ River Valley
- ☐ Sturgeon Falls
- ☐ Lavigne
- ☐ Verner
- ☐ Other: \_\_\_\_\_

##### 2) What is your age?

- ☐ 19 years or younger
- ☐ 20 to 30 years
- ☐ 31 to 40 years
- ☐ 41 to 50 years
- ☐ 51 to 60 years
- ☐ 61 to 70 years
- ☐ 71 years and over

##### 3) What do you identify as?

- ☐ Female
- ☐ Male
- ☐ Non-binary
- ☐ Prefer not to say
- ☐ Prefer to self-describe: \_\_\_\_\_



- ☐ Indigenous (First Nations, Métis, or Inuit)
- ☐ Caucasian
- ☐ European
- ☐ Hispanic/Latino
- ☐ Black
- ☐ Middle Eastern
- ☐ South Asian
- ☐ East Asian

- ☐ None
- ☐ Primary/grade school
- ☐ Secondary (high school)
- ☐ Some college or university but no degree
- ☐ Bachelor's degree/college diploma
- ☐ Graduate degree or higher

- ☐ Less than \$20,000
- ☐ \$20,000 - \$39,000
- ☐ \$40,000 - 69,999
- ☐ \$70,000 - 99,999
- ☐ \$100,000 - 129,999
- ☐ \$130,000 - 159,999
- ☐ \$160,000 and over

**7) Please rate the following statements.**

[illegible]



Ontario, my community has higher crime rates.						
d) I feel safe walking alone in my community during <b>the day</b> .	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
e) I feel safe walking alone in my community <b>at night</b> .	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

8) If you disagreed or strongly disagreed with statement d) or e), please provide the reason or location where you feel this way.

9) Personally, how concerned are you about experiencing the following crimes in West Nipissing?

Crime	Never Concerned	Rarely Concerned	Sometimes Concerned	Often Concerned
a) Home broken into, vandalized or trespassed	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
b) Vandalism in the community	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
c) Car broken into	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
d) Robbery in a public location	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
e) Harassment or assault by another person in public	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
f) Unwanted sexual contact or sex trafficking (could include kissing, fondling, touching of sexual body parts, and/or forced sexual intercourse)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
g) Domestic violence (may include physical, mental, emotional, financial, or social control by an intimate partner or close family member)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
h) Online fraud, a scam, online abuse or harassment	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

**10) In the last 12 months have you been the victim of the following?**

Crime	Yes, police were called	Yes, police were not called	No
a) Home broken into, invaded, vandalized, or trespassed	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
b) Car broken into	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
c) Robbery in a public location	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
d) Harassment or assault by another person in public	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
e) Racism or exclusion	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
f) Unwanted sexual contact or sex trafficking (could include kissing, fondling, touching of sexual body parts, and/or forced sexual intercourse)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
g) Domestic violence (could include physical, mental, emotional, financial, or social control by an intimate partner or close family member)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
h) Online fraud, a scam, online abuse, or harassment	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

**11) In the last 12 months has someone you know who lives in our community been the victim of the following?**

Crime	Yes	No
a) Home broken into, invaded, vandalized, or trespassed	<input type="checkbox"/>	<input type="checkbox"/>
b) Car broken into	<input type="checkbox"/>	<input type="checkbox"/>
c) Robbery in a public location	<input type="checkbox"/>	<input type="checkbox"/>
d) Harassment or assault by another person in public	<input type="checkbox"/>	<input type="checkbox"/>
e) Racism or exclusion	<input type="checkbox"/>	<input type="checkbox"/>
f) Unwanted sexual contact or sex trafficking (could include kissing, fondling, touching of sexual body parts, and/or forced sexual intercourse)	<input type="checkbox"/>	<input type="checkbox"/>
g) Domestic violence (could include physical, mental, emotional, financial, or social control by an intimate partner or close family member)	<input type="checkbox"/>	<input type="checkbox"/>
h) Online fraud, a scam, online abuse, or harassment	<input type="checkbox"/>	<input type="checkbox"/>



### Substance Use

**12) In your opinion, how problematic is substance abuse and mental health in West Nipissing:**

- ☐ Not problematic at all
- ☐ Somewhat problematic
- ☐ Problematic
- ☐ Very problematic
- ☐ Don't know/prefer not to say

### Homelessness

**13) In your opinion, how concerning is homelessness in West Nipissing?**

- ☐ Not at all concerning
- ☐ Somewhat concerning
- ☐ Concerning
- ☐ Very concerning
- ☐ Don't know/prefer not to say

### Accessibility to Services

**14) How accessible, in terms of location, do you consider the following activities or services?**

	Fully accessible	Somewhat accessible	Not accessible
a) Sports and recreation activities (indoors and outdoors)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
b) Green spaces/parks	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
c) Arts and cultural activities	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
d) Activities to develop your skills and abilities (e.g., educational courses, computer skills, sewing)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
e) Primary Health Care	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
f) Specialized Health Care	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
g) Community services	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
h) Public transportation	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
i) Internet access or other telecommunication services	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

**15) Please specify what could be done to make these services more accessible in terms of location:**



**16) Do you consider the following activities or services affordable?**

	Very Affordable	Somewhat Affordable	Not Affordable
a) Sports and recreation activities	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
b) Green spaces/parks	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
c) Arts and cultural activities	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
d) Activities to develop your skills and abilities (e.g., educational courses, computer skills, sewing)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
e) Primary Health Care	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
f) Specialized Health Care	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
g) Community services	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
h) Public transportation	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
i) Internet access or other telecommunication services	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

**17) Please specify what could be done to make these services more accessible in terms of affordability:**

**Health and Life Satisfaction**

**18) In general, you would say your overall mental health is:**

- ☐ Poor
- ☐ Fair
- ☐ Good
- ☐ Very good
- ☐ Excellent
- ☐ Don't know/Prefer not to say

**19) In general, you would say your overall physical health is:**

- ☐ Poor
- ☐ Fair
- ☐ Good
- ☐ Very good
- ☐ Excellent
- ☐ Don't know/Prefer not to say





**20) Which of the following statements best describes the food eaten in your household over the past 12 months?**

- ☐ You and other household members always had enough of the kinds of food you wanted to eat
- ☐ You and other household members had enough to eat, but not always the kinds of food you wanted
- ☐ Sometimes you and other household members did not have enough to eat
- ☐ Often you and other household members did not have enough to eat
- ☐ Don't know/prefer not to say

**Living Standards**

**21) All things considered, how satisfied are you with your current work life?**

- ☐ Very satisfied with your current work life
- ☐ Satisfied with your current work life
- ☐ Dissatisfied with your current work life
- ☐ Not applicable with your current work life
- ☐ Don't know/prefer not to say

**22) To what extent does your current level of income meet your everyday life needs?**

- ☐ Your current income meets all of your everyday life needs
- ☐ Your current income meets most of your everyday life needs
- ☐ Your current income meets some of your everyday life needs
- ☐ Your current income does not meet your everyday life needs

**23) In general, how do you feel about your current personal finances?**

- ☐ Overwhelming stress
- ☐ High stress
- ☐ Moderate stress
- ☐ Low stress
- ☐ No stress
- ☐ Don't know/prefer not to say

**24) In general, do you feel that you have adequate access to affordable housing options?**

- ☐ Strongly agree
- ☐ Agree
- ☐ Disagree
- ☐ Strongly disagree
- ☐ Don't know/prefer not to say



**25) If applicable, please specify the way in which housing does not meet your needs:**

**Belonging, Trust, and Relationships**

**26) Please rate the following statements.**

Statement	Strongly Disagree	Disagree	Neutral	Agree	Strongly Agree
a) I feel as if I belong in my local community.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
b) I would recommend this community to others as a place to live.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
c) I sometimes feel uncomfortable or out of place in my neighborhood because of my ethnicity, culture, race, skin color, language, accent, gender, sexual orientation, or religion.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
d) I have friends and family who I can call on for help when I need it most.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

## Resources

**27) Which sectors play a role in community safety? Select all that apply.**

- ☐ Schools Teen after-school programs/spaces
- ☐ Children after-school programs/spaces
- ☐ Daycare
- ☐ Community services/community-based organizations
- ☐ Recreation and leisure
- ☐ Social services (family and youth services)
- ☐ Employment programs
- ☐ Mental health services
- ☐ Faith/Religious/Spiritual organizations and groups
- ☐ Hospitals
- ☐ Primary care providers
- ☐ Police Services
- ☐ Fire Emergency Services
- ☐ Paramedic Emergency Services



☐ Municipal Bylaw Enforcement

☐ Other: \_\_\_\_\_

**28) What do you appreciate about West Nipissing?**

**29) What do you appreciate about your specific community?**

**30) Which issue(s) require(s) the most improvement or attention to improve quality of life, safety, and well-being in West Nipissing?**

**Thank you for completing this survey!**

Thank you for participating in this survey. The results you provided will help to ensure continued resource and knowledge sharing, greater information accessibility and an understanding of what actions are needed to fill gaps and to promote a safe and healthy West Nipissing.

If you have any questions about this survey or if you would like to request a paper copy for a loved one, please contact the Municipality of West Nipissing at 705-753-2250 or email [cswb@westnipissing.ca](mailto:cswb@westnipissing.ca).



## APPENDIX C

### Interview Questions

Key informants were provided with a brief outline of the project, the intentions of the interview and asking permission to use a voice recorder. Informants were asked two sets of interview questions.

Key informants who are on the Advisory Committee were asked the following questions.

- 1) *What or who makes you feel safe and happy in West Nipissing?*
- 2) *As a committee, we have identified several areas of risk that are relevant to residents in West Nipissing. They are; poverty, addiction, mental health, isolation, education and housing. In your opinion, which two are the most concerning in your life, or the lives of your clients?*
- 3) *Let's imagine that I showed you a big map of West Nipissing. Where do you feel safe and happy?*
- 4) *Now let's imagine that I show you the same map. But this time, I want to know where you do not feel safe.*
- 5) *What ideas do you have to increase community safety and well-being?*
- 6) *My last question isn't really a research question, but more so a question to help me get to know you better. Aside from mandates and legislation, why are you on this advisory committee?*

Informants who are not on the Advisory Committee were asked the following questions.

- 1) *What or who makes you feel safe and happy in West Nipissing?*
- 2) *What or who makes you feel unsafe in West Nipissing?*
- 3) *Let's imagine that I showed you a big map of West Nipissing. Where do you feel safe and happy?*
- 4) *Now let's imagine that I show you the same map. But this time, I want to know where you do not feel safe.*
- 5) *What ideas do you have to increase community safety and well-being?*
- 6) *We currently have a survey that is designed to gauge the public's perception on community safety and well-being. Can I email you a copy?*



## APPENDIX D

## Asset Mapping Approach

Please Note: The information on the following pages is not an exhaustive list. Should you wish to share resources that could help to expand our knowledge on local assets, please contact [cswb@westnipissing.ca](mailto:cswb@westnipissing.ca).

Name	Link	Services	Partnerships
Alliance Centre	<a href="https://www.wngh.ca/service/alliance-centre/#gsc.tab=0">https://www.wngh.ca/service/alliance-centre/#gsc.tab=0</a>	Mental health, substance abuse services	CAS, correctional services/criminal court/probation and parole, police services, West Nipissing Community Health Centre, West Nipissing Family Health Team
Alzheimer's Society	<a href="https://alzheimer.ca/sudburymanitoulin/">https://alzheimer.ca/sudburymanitoulin/</a>	Case management, cognitive testing, education/post-secondary education, health care navigation, support	LHINs, UNIVI Health Centre, West Nipissing Community Health Centre
Au Château	Website currently unavailable. For information please contact Au Château at 705-753-1550.	Housing, nursing home, seniors, support	LHINs
CMHA	<a href="https://nbd.cmha.ca/">https://nbd.cmha.ca/</a>	Housing, legal services, mental health, psychiatry, trusteeship	Correctional services/criminal court/probation and parole, mental health services
Children's Aid Society – Nipissing & Parry Sound	<a href="https://www.parnipcas.org/">https://www.parnipcas.org/</a>		



Collège Boréal	<a href="https://www.collegeboreal.ca/en/about-boreal/who-we-are/mission-and-vision">https://www.collegeboreal.ca/en/about-boreal/who-we-are/mission-and-vision</a>	Education/post-secondary education, employment services,	Centre alliance, child care services, Hands, Horizon Centre, Nipissing DSAAB, North Bay Crisis Intervention, police services, West Nipissing food bank, West Nipissing Community Health Centre, West Nipissing Family Health Team, West Nipissing General Hospital
Conseil scolaire catholique Franco-Nord	<a href="https://www.franco-nord.ca/">https://www.franco-nord.ca/</a>	Education/post-secondary education, social services, well-being	CAS, Centre Alliance, Child Care Services, Community Counselling Centre of Nipissing, Correctional Services/ Criminal Court/Probation and Parole, Hands, Horizon Centre, Indigenous Friendship Centre, LHINs, Ministry Services, NBPSD Health Unit, North Bay Regional Health Centre, One Kids Place, Police Services, Right Path Counselling and Prevention Services, School Board, West Nipissing General Hospital
Conseil scolaire public du Nord-Est de l'Ontario	<a href="https://cspne.ca/">https://cspne.ca/</a>	Education/post-secondary education, mental health	Centre Alliance, Hands, One Kids Place,
DNSSAB	<a href="https://dnssab.ca/">https://dnssab.ca/</a>	Children's services, EMS, housing, Ontario works, social services	
Dokis First Nation	<a href="https://www.dokis.ca/">https://www.dokis.ca/</a>		





Hands the Family Help Network	<a href="https://thefamilyhelpnetwork.ca/">https://thefamilyhelpnetwork.ca/</a>	Adult development, autism, children's services, mental health	Developmental Services Ontario, First Nations, Health Services, Mental Health Services, North Bay Regional Health Centre, Police Services, School Boards, West Nipissing General Hospital
Horizon's Women's Shelter	<a href="https://horizoncentre.ca/">https://horizoncentre.ca/</a>	Shelter/homelessness	Centre Alliance, North Bay Regional Health Centre, Ontario Disability Support Program, Ontario Works, Police Services, West Nipissing General Hospital, Women's Services
Literacy Alliance	<a href="http://www.yes2literacy.ca/">http://www.yes2literacy.ca/</a>	Education/post-secondary education, employment services	Correctional Services/Criminal Court/Probation and Parole, Employment Services, Ontario Disability Support Program, Ontario Works
Low Income People Involvement of Nipissing	<a href="https://lipinipissing.com/">https://lipinipissing.com/</a>	Dental services, health care navigation, housing, social services, trusteeship	EMS, Legal Aid Clinics, Ontario Disability Support Program, Ontario Works, Red Cross, (plus OPGT, Fire Prevention, Housing Providers, Crisis Shelters)
Near North District School Board	<a href="https://www.nearnorthschools.ca/">https://www.nearnorthschools.ca/</a> (requested)	Education/post-secondary education	"too many to list"
Nipissing Community Legal Aid Clinic	<a href="https://www.nipissingcommunitylegalclinic.ca/">https://www.nipissingcommunitylegalclinic.ca/</a>		
Nipissing First Nation	<a href="https://nfn.ca/">https://nfn.ca/</a>		
Nipissing Paramedic Service	<a href="https://dnssab.ca/emergency-medical-services/">https://dnssab.ca/emergency-medical-services/</a>		



Nipissing-Parry Sound Catholic School Board	<a href="https://www.npsc.ca/">https://www.npsc.ca/</a>	Education/post-secondary education, human resources, mental health, plant services, well-being	First Nations, Health services, Indigenous Friendship Centre, Mental Health Services, (plus, municipalities, school rehabilitation services, special education services)
NBPSD Health Unit	<a href="https://www.myhealthunit.ca/en/index.asp">https://www.myhealthunit.ca/en/index.asp</a>	Dental services, parenting support, sexual health services, vaccinations	("all public sectors and some private")
OPP Nipissing West	<a href="https://www.opp.ca/">https://www.opp.ca/</a>	EMS, policing	"Did not list – but engages in other planning groups and committees"
West Nipissing Chamber of Commerce	<a href="https://www.westnipissingchamber.ca/">https://www.westnipissingchamber.ca/</a>		
West Nipissing Child Care Corporation	<a href="http://www.wnccc.ca/">http://www.wnccc.ca/</a>	Child care, children's services	DNSAAB, Hands, Ministry Services, One Kids Place, School Boards
West Nipissing Community Health Centre	<a href="https://www.cscno-wnchc.org/">https://www.cscno-wnchc.org/</a>	Health promotion, primary care	Alzheimer's Society, LHINs, NBPSD Health Unit, School Boards
West Nipissing Community Living	<a href="http://www.communitylivingwestnipissing.com/Site/About_Us.html">http://www.communitylivingwestnipissing.com/Site/About_Us.html</a>	Children's services, clinical services, employment services, housing, respite	Mental health services, North Bay Regional Health Centre, Police Services, West Nipissing General Hospital (plus "other DS service providers")



West Nipissing Family Health Team	<a href="https://wnfht.org/">https://wnfht.org/</a>	Primary care	“other primary care providers, all organizations involved in the district’s OHT”
West Nipissing Fire Service	<a href="https://www.wnfs.ca/en/">https://www.wnfs.ca/en/</a>	EMS	EMS, Police services, West Nipissing General Hospital
West Nipissing Food Bank	Website currently unavailable. For information please contact 705-753-0314 or join the Facebook group “West Nipissing Food Bank/Banque Alimentaire Nipissing Ouest.”	Well-being	
West Nipissing General Hospital	<a href="https://www.wngh.ca/#gsc.tab=0">https://www.wngh.ca/#gsc.tab=0</a>	Health care	Au Château, Cancer Care Ontario, EMS, Health Sciences North, Mental Health Services, North Bay Regional Health Centre, Ontario Telemedicine Network, Police Services
West Nipissing Public Library	<a href="https://www.wnpl.ca/">https://www.wnpl.ca/</a>		



## APPENDIX E

### References

- About West Nipissing*. (n.d.). The Municipality of West Nipissing. Retrieved April 19, 2022, from <https://www.westnipissing.ca/town-hall/about-west-nipissing/>
- Canada Without Poverty. (n.d.). *Just the Facts*. Retrieved April 19, 2022, from <https://cwp-csp.ca/poverty/just-the-facts/>
- Canadian Municipal Network on Crime Prevention. (2020). *Practitioner Guide on Crime Prevention and Community Safety & Well-Being Planning*.
- District of Nipissing Social Services Administration Board. (2020, October 16). *Community Safety and Well-Being Plan: Planning Framework and Research Design*.  
<https://www.northbay.ca/media/olvf3ebi/north-bay-cswb-planning-and-research-framework.pdf?v=637520870281900000>
- District of Nipissing Social Services Administration Board. (2018). *Everyone Counts: Nipissing District*.  
[https://www.homelesshub.ca/sites/default/files/attachments/Everyone%20Counts\\_NipissingDistrict\\_FindingsReport\\_2018.pdf](https://www.homelesshub.ca/sites/default/files/attachments/Everyone%20Counts_NipissingDistrict_FindingsReport_2018.pdf)
- Falls Brook Centre. (n.d.). *Sustainable Communities: A Guide to Community Asset Mapping*.  
<https://www.tamarackcommunity.ca/hubfs/Resources/CDC%20ABCD%20resources/A%20guide%20to%20community%20asset%20mapping.pdf?hsCtaTracking=7e1fc8a3-723a-4613-812c-26cb69a2c7fc%7C00516522-798c-45ae-921b-e289bd2d7261>
- Government of Ontario. (n.d.) Community Safety and Well-Being Planning Framework: A Shared Commitment in Ontario. Booklet 3, Version 2. *Ministry of the Solicitor General*. Last updated: October 19, 2021. Retrieved April 19, 2022, from <https://www.ontario.ca/document/community-safety-and-well-being-planning-framework-booklet-3-shared-commitment-ontario>.
- Merriam-Webster Dictionary. (n.d.). Safety. In *Merriam-Webster.com dictionary*. Retrieved April 19, 2022, from <https://www.merriam-webster.com/dictionary/safety>



Merriam-Webster Dictionary. (n.d.). Well-Being. In *Merriam-Webster.com dictionary*. Retrieved April 19, 2022, from <https://www.merriam-webster.com/dictionary/well-being>

OECD. (2012). *Social Cohesion*. Retrieved April 19, 2022, from <https://www.oecd.org/dev/inclusivesocietiesanddevelopment/social-cohesion.htm>

Pearson, C., Janz, T., Ali, J. 2013. "Mental and substance use disorders in Canada" *Health at a Glance*. September. Statistics Canada Catalogue no. 82-624-X.

Raphaell, D., Bryant, T., Mikkonen, J., Raphael, A. (2020). *The Social Determinants of Health*. (2<sup>nd</sup> ed.). York University School of Health Policy and Management.

Salkind, N. J. (2010). *Primary Data Source*. Sage Research Methods. <https://methods.sagepub.com/reference/encyc-of-research-design/n333.xml>

Statistics Canada. 2017. *Focus on Geography Series, 2016 Census*. Statistics Canada Catalogue no. 98-404-X2016001. Ottawa, Ontario. Data products, 2016 Census. <https://www12.statcan.gc.ca/census-recensement/2016/as-sa/fogs-spg/Facts-CSD-Eng.cfm?TOPIC=2&LANG=Eng&GK=CSD&GC=3548055>

Statistics Canada. 2017. *West Nipissing, M [Census subdivision], Ontario and Ontario [Province]* (table). *Census Profile*. 2016 Census. Statistics Canada Catalogue no. 98-316-X2016001. Ottawa. Released November 29, 2017. <https://www12.statcan.gc.ca/census-recensement/2016/dp-pd/prof/index.cfm?Lang=E> (accessed April 19, 2022)



