INDICATOR REPORT

Community Safety & Well-Being Planning

THE MUNICIPALITIES OF BRUCE AND GREY







A Shared Commitment in Ontario

COMMUNITY SAFETY & WELL-BEING PLAN

INDICATOR REPORT

Keynote Address

The Police Leaders of Bruce and Grey Counties, representing Hanover Police Service, Neyaashiinigming First Nation Police, OPP – Grey Bruce, OPP South Bruce, OPP – Collingwood/Blue Mountains, Owen Sound Police Service, Saugeen Shores Police Service and West Grey Police Service, are excited to be partners in the creation and implementation of the new Municipalities of Bruce and Grey Community Safety and Well-Being Plan (CSWBP).

Police Services have known for a long time that the goal of Crime Prevention is not something that we can accomplish alone. We are very aware that it is a shared responsibility and takes an entire community to ensure the Safety and Well-Being of our residents. Police Services are often called upon to respond to calls for service that may be better served by proactive agencies with expertise in the areas of Addictions, Mental Health, Poverty and Homelessness. Working with our many Safety and Well-Being community-oriented partners, identifying these emerging risks in Grey and Bruce Counties and developing strategies to address these risks in a proactive and collaborative manner, we anticipate collective success in enhancing the Safety and Well-Being of our communities.

With the release of the Indicator Report that will supply all stakeholders with valuable data to assist in the creation of strategies to address the identified risks, the CSWBP Advisory and Steering committees are even better positioned to improve Safety and Well Being in Grey Bruce. We look forward to being active participants in the strategies developed to address the identified risks where required. We will also support those involved partners who will take the lead in implementing preventative strategies that fall within their area of expertise. The Police Leaders of Bruce and Grey Counties are hopeful that this is just the starting point for the CSWBP. With community and local government support we are optimistic that this plan will be supported by leadership and appropriate funding that will result in sustainability for years to come.

Police Leaders



Christopher R. Knoll Chief of Police Hanover Police Service



Vince Wurfel Sergeant Neyaashiinigmiing First Nation Police



Debra Anderson S/Sgt Sergeant Operations Manager



Mary Shannon Inspector OPP - Collingwood/ Blue Mountains



Kevin Zettel Chief of Police Saugeen Shores Police Service



Krista Miller Inspector OPP - South Bruce



Craig Ambrose Chief of Police Owen Sound Police Service



Robert Martin Chief of Police West Grey Police Service

Working together in a coordinated manner, we are confident we will experience success in enhancing Community Safety and Well-Being in all of our communities in Grey and Bruce Counties.

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Acknowledgements

Community Safety and Well-Being Planning: The Municipalities of Bruce and Grey is the result of a unique commitment of 16 lower-tier Municipalities and 2 Counties to create one shared, regional Plan, and was developed through a collaborative process involving the following partners:

Municipality/County

Corporation of the County of Bruce Corporation of the County of Grey City of Owen Sound Municipality of Arran-Elderslie Municipality of Brockton Municipality of Grey Highlands Municipality of Kincardine Municipality of Northern Bruce Peninsula Municipality of South Bruce Municipality of West Grey Town of Hanover Town of Saugeen Shores Town of South Bruce Peninsula Town of The Blue Mountains Township of Chatsworth Township of Georgian Bluffs **Township of Huron-Kinloss** Township of Southgate

First Nations

M'Wikwedong Native Cultural Resource Centre

Neyaashiinigmiing First Nation Police Services

Education

Bluewater District School Board Bruce Grey Catholic District School Board Conseil scolaire catholique Providence Georgian College, Owen Sound Campus

Police Services/Boards

Collingwood/Blue Mountains OPP Grey Bruce OPP Hanover Police Services Neyaashiinigmiing First Nation **Police Services Owen Sound Police Service** Saugeen Shores Police Service South Bruce OPP West Grey Police Service **Brockton Police Services Board** Chatsworth Police Services Board Georgian Bluffs Police Services Board Grey Highlands Police Services Board Hanover Police Services Board Huron-Kinloss Police Services Board **Kincardine Police Services Board** Northern Bruce Peninsula Police Services Board Owen Sound Police Services Board Saugeen Shores Police Services Board South Bruce Peninsula Police Services Board Southgate Police Services Board The Blue Mountains Police Services Board

Children/Youth, Youth Justice

Bruce Grey Child & Family Services Grey Bruce Children's Alliance Grey Bruce Youth Engagement Network Keystone Child, Youth & Family Services Saugeen Valley Children's Safety Village Ministry of Children, Community & Social Services

Community/Social Services

Bruce County Human Services Community Connection - 211 Central East Region Contact Centre Four County Labour Market Planning Board Grey Bruce Community Legal Clinic Grey County Social Services Ministry of Children, Community & Social Services United Way of Bruce Grey Victim Services Bruce Grey Perth YMCA of Owen Sound Grey Bruce

Health/Mental Health

Canadian Mental Health Association Grey Bruce Mental Health & Addiction Services

Grey Bruce Health Unit

Grey Bruce Integrated Health Coalition

Grey-Bruce Ontario Health Team Planning Committee

South West Local Health Integration Network

Community Committees/ Collaboratives

Bruce Grey Poverty Task Force

Bruce Peninsula Safe Communities Committee

Community Drug & Alcohol Strategy

Council on Aging Grey Bruce

Southern Bruce County Safe Communities Committee

Violence Prevention Grey Bruce



The creation of this Report would not have been possible without the following:

- The organizational data provided by numerous agencies from across Bruce and Grey Counties;
- The data collected by the Bruce Grey Data Information Sharing Collaborative (BG DISC);
- The financial support of both Counties and the sixteen participating Municipalities, used to hire a Coordinator for the project;
- The assistance of Alanna Leffley (Epidemiologist), and CCI Resources (Orangeville), who led the analysis of the Bruce and Grey CSWBP Community Engagement Survey that highlighted resident perceptions of priority risks related to safety and well-being. Bruce County also provided time for a placement student to support the survey qualitative analysis, and Grey County and the Grey Bruce Health Unit provided in-kind staff time to assist with survey initiation; and
- The advice and support of the Canadian Municipal Network on Crime Prevention (CMNCP), the Halton Region Community Safety and Well-Being collaborative, and the Ontario Municipal Social Services Association (OMSSA) who were integral throughout the process of developing the Bruce and Grey model for collaboration, planning and action.



SECTION TWO

Introduction

The Municipalities of Bruce and Grey Counties sit on the traditional territory of the Anishnaabek Nation: the People of the Three Fires known as Ojibwe, Odawa, and Pottawatomie Nations. We give thanks to them, and to the Chippewas of Saugeen, and the Chippewas of Nayaashiinigmiing, as the traditional keepers of this land and water, and we also recognize the traditional homeland of the Metis Nation.

The Municipalities of Bruce and Grey – spread across 8,592 square kilometres – are known for their small towns and two First Nation communities nestled in picturesque rural landscapes. Framed by Lake Huron to the west and Georgian Bay to the east, you will rarely find yourself more than 30 minutes from a beach, ski hill, or provincial park. These Municipalities form a vibrant community with stunning natural beauty, clean air and sparkling water, where residents report high levels of satisfaction with their neighbourhoods as a place to live, with their access to community parks and recreational opportunities, and with the environmental quality of their neighbourhoods (1).

Given the percentage of residents who express satisfaction with these aspects of their lives, not surprisingly many also express satisfaction with their personal relationships and mental well-being, which are important contributors to overall well-being. However, levels of satisfaction among people residing in Bruce and Grey Counties are comparatively lower for how well they feel the local government is responding to community needs, how well democracy is working in the community, and when asked about access to educational opportunities (<u>1</u>).

Those residents who report above average well-being in Bruce and Grey tend to be men who are 65 years of age or older, are more likely to have a university or graduate degree and are retired with no children living at home (2). Those residents who report below average well-being are generally women who are under the age of 35, who are living on their own. They are more likely to be living with a mental or physical disability or chronic illness that limits activity, are more likely to have children living at home, and tend to spend more than 30% of their monthly income on housing, with 5.7% spending more than 50% of their monthly income on housing (2).

^{2.} Note: Smale, B. (June 2019). A Closer Look at CIW Community Wellbeing Survey Results for Bruce and Grey Counties. Owen Sound, ON.



Note: Smale, B., & Gao, M. (2018). Wellbeing in Bruce and Grey Counties: A Summary of Results from the CIW Community Wellbeing Survey. Waterloo, ON: Canadian Index of Wellbeing and the University of Waterloo. (Smale, 2018)



Residents who participated in the creation of the Municipalities of Bruce and Grey Community Safety and Well-Being Plan (hereafter called the Bruce and Grey CSWBP) told us that 54% of them believe that crime has increased over the past 3 years in their communities (3), and local criminal court data tells us that trends are increasing over time for most offences (2017 vs. 2019-20 - 17% to 27% increase) (4a). There have also been stable or increasing calls for police service across Bruce and Grey related to violent crime, property crime and crime related to emotional violence, harassment, and bullying as well as an increase in the mental health calls for service by police (4a). Approximately one quarter of Grades 7-12 students report that they don't feel safe at school and have been bullied at school and/or cyberbullied in the past year (4b). Police Service data and community engagement survey responses show that speeding, impaired driving and motor vehicle collisions (MVC) are areas of concern in Bruce and Grey, with MVC deaths continuing to be the leading cause of death in 15-24 year-olds and the second leading cause of death in 25-44 year-olds both higher than the Ontario rates (4c).

So, while organizations and many residents know that the social determinants of health – income and social status, employment and working conditions, education and literacy, childhood experiences, physical environments, social supports and coping skills, biology/genetics and healthy behaviours, access to health services, gender, culture and race – have a significant impact on safety and well-being, it is now time for all of us to recognize that community safety and well-being starts well before crime actually occurs.

The prevention of crime and the enhancement of safety and well-being must begin much further upstream, before issues arise or incidents occur, in order for there to be lasting impacts for the residents living in our communities. This is why 16 Municipalities have joined forces with Bruce and Grey Counties to create one shared Community Safety and Well-Being Plan.

^{3.} Note: The Municipalities of Bruce and Grey CSWBP Advisory Committee (2020). The Municipalities of Bruce and Grey CSWBP Community Engagement Survey Tabulated Results. Owen Sound, ON.

^{4.} Note: The Municipalities of Bruce and Grey CSWBP Advisory Committee (2020). The Municipalities of Bruce and Grey Community Safety and Well-Being Plan Indicator Report. Owen Sound, ON. - 4a. Crime Prevention - 4b. Emotional Violence, Bullying and Harassment - 4c. Community Belonging and Neighbourhood/Environment

Building on a long history of cross-sector collaboration, the process of Community Safety and Well-Being Planning has allowed community partners in Bruce and Grey – from Municipalities, police services, police service boards, education, health, community and social services - to come together to discuss resident perceptions and explore local data related to safety and well-being, with the goal of identifying and reducing risk factors that contribute to safety and well-being issues, using cross-sector strategies and focusing on the social determinants of health. The overarching goal of CSWBP is to achieve sustainable communities where everyone is safe, has a sense of belonging and opportunities to participate, and where individuals and families can meet their needs for education, health care, food, housing, income and social and cultural expression – which will ultimately lead to a reduction in crime across the region (5).

The success of society is linked to the well-being of each and every individual and integral to this success is cross-sector service coordination.

This approach to planning recognizes that crime prevention and risks to safety and well-being cannot be solved by any one organization or sector. Many situations driven by mental health or addiction concerns, the lack of safe and affordable housing, inadequate access to services or social isolation and a lack of transportation result in crime or incidents that require a response from police, paramedics, emergency departments of local hospitals or other crisis-driven services focused on victims, rather than the root causes of the issues. Planning will occur in the areas of social development, prevention, risk intervention and incident response, however the majority of investments, time and resources must be spent on developing and/ or enhancing social development, prevention and risk intervention strategies to reduce the number of individuals, families and communities that reach a crisis point where they require an incident response.



Developing strategies that are preventative as opposed to reactive will ensure efficiency, effectiveness and sustainability of safety and well-being service delivery across Bruce and Grey (<u>5</u>).

Bruce and Grey's CSWBP will strengthen how Municipalities collaborate with partner organizations serving residents living in our region, and will provide a community of support for committees already tackling the important issues that impact safety and well-being across Bruce and Grey. Specifically, this CSWBP provides a model for collaboration, planning and action that will shape how the Municipalities of Bruce and Grey identify and respond to current and emerging issues through ongoing engagement with community stakeholders and regular assessment of local data. In many respects, the Plan formalizes and coordinates the strong history of collaboration in Bruce and Grey, and it also documents and builds on successful initiatives that are already improving safety and enhancing the well-being of vulnerable populations.

The Bruce and Grey CSWBP – building on the health promotion approach taken by numerous organizations and collaborative, cross-sector committees – will lead to enhanced coordination of action taken within all areas of the framework, providing the opportunity for greater collective impact across the two counties and a shared voice during planning and resource discussions.

The Municipalities of Bruce and Grey Counties

Bruce County Grey County



Ontario CSWBP Framework

The work of Community Safety and Well-Being Planning began in 2009 in Ontario with a partnership between the Ministry of the Solicitor General and the Ontario Association of Chiefs of Police (OACP) – together, these two groups initiated the development of a provincial response to crime and victimization. Now, new legislative amendments outlined under part XI, Section 143 of the current Police Services Act (1990) (7) mandates every municipal council to prepare and adopt a Community Safety and Well-Being Plan (CSWBP). Under the legislation Municipalities have the discretion and flexibility to develop joint plans with surrounding municipalities or First Nation communities [s. 143(2)], although First Nation band councils are not required by the Ministry to engage in Community Safety and Well-Being Planning.

Collaborative, cross-sector Community Safety and Well-Being Planning has been shown to result in numerous benefits for individuals, the broader community, and participating partner agencies and organizations, including (<u>5</u>):

- Enhanced communication and collaboration among sector, agencies and organizations;
- Stronger families and improved opportunities for healthy child development;
- Healthier, more productive individuals who positively contribute to the community;
- Increased understanding of and focus on – priority risks, vulnerable groups and neighbourhoods;

- Transformation of service delivery including realignment of resources and responsibilities to better respond to priority risks and needs;
- Increased engagement of community groups, residents and the private sector in local initiatives and networks;
- Enhanced feelings of safety and being cared for, creating an environment that will encourage newcomers to the community;
- Increased awareness, coordination of and access to services for community members and vulnerable groups;
- More effective, seamless service delivery for individuals with complex needs;
- New opportunities to share multi-sectoral data and evidence to better understand the community through identification of trends, gaps, priorities and successes; and
- Reduced investment in and reliance on incident response.

 Note: Ministry of the Solicitor General. (2017). Community Safety and Well-Being Planning Framework: A Shared Commitment in Ontario, Booklet 3, Version 2. Retrieved from: www.mcscs.jus.gov.on.ca/sites/default/files/content/mcscs/docs/Booklet%203%20A%20Shared%20Commitment%20Final%20Dec%202018.pdf
 Note: Police Services Act (1990). Current – April 2020, part XI, Section 143.

The Ontario Framework

The Ontario Community Safety and Well-Being Planning framework (5) helped to guide the Municipalities of Bruce and Grey and their partners as this Plan was developed. It has been crucial for all members involved in the planning process to understand the following four areas to ensure the Bruce and Grey regional CSWBP is both efficient and effective:

Social Development

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

2 Prevention

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

3 Risk Intervention

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

4 Incident Response

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

5. Note: Ministry of the Solicitor General. (2017). Community Safety and Well-Being Planning Framework: A Shared Commitment in Ontario, Booklet 3, Version 2. Retrieved from: www.mcscs.jus.gov.on.ca/sites/default/ files/content/mcscs/docs/Booklet%203%20A%20Shared%20Commitment%20Final%20Dec%202018.pdf

Areas of Focus

Social Development

orevention

Risk Intervention

Incident

Response

3

4

Collaboration Information Sharing Performance Measurement

Greater investments need to be made in the areas of social development, prevention and risk intervention - with the result that there will be fewer crisis incidents for Municipalities and organizations to respond to.

Bruce Grey Data/Indicator Framework

The partners working across Bruce and Grey Counties have always understood that the issues that impact the safety and well-being of their residents are often systemic, complex and require collective involvement, effort and action from several sectors at once. While some issues and risks can be addressed at an individual level through approaches like the Grey Bruce Situation Table for Acute Response (STAR), others require a broader cross-sector or 'systems-based' approach. Bruce and Grey's model for collaboration, planning and action outlines a flexible, action-oriented process to identify and respond to a wide range of community and system-level issues that impact safety and well-being across Bruce and Grey.

The four areas of intervention for community safety and well-being planning - social development, prevention, risk intervention and incident response - provide a framework for implementing Bruce and Grey's model. Emphasis will be placed on the outer zones (prevention and social development) to address issues in a proactive, upstream manner in order to reduce demand for emergency and crisisdriven services downstream.

Bruce and Grey's model is open to responding to a wide range of issues and/or risk factors that impact community safety and well-being, particularly for vulnerable residents. As a starting point, the Bruce and Grey CSWBP consultation and local data analysis phase has informed identification of the priority areas for action for Phase 2 of the project. Bruce and Grey's model for collaboration, planning and action is led by Counties on behalf of the lower-tier Municipalities with the involvement/collaboration of the Advisory Committee.



The Advisory Committee includes representation from sectors taking action on the following:

Addictions/Substance Use

Community Belonging and Neighbourhood/Environment

Crime Prevention

Education and Employment

Emotional Violence, Bullying and Harassment

Healthy Child Development

Housing and Homelessness

Mental Health

Physical Health

Poverty and Income

The Advisory Committee will have a broad mandate to apply a cross-sector, interdisciplinary lens to known, emergent and anticipated community and system-level issues. Issues will then be prioritized and addressed primarily by identifying or establishing Action Tables that will respond to both emergent issues and longer-term system planning priorities. Criteria will be applied to issues raised through the model to determine if an Action Table response may be effective. In some instances, an organization within the Advisory Committee may be best positioned to respond to an issue and will take direct action.

Issue Identification & Action Chart

SEE <u>SECTION 4A</u> FOR A DETAILED EXPLANATION OF THIS PROCESS



SECTION 4A

Issue Identification & Action Table Response Process

Evidence-Based Issue Identification

A community safety and well-being issue is identified through the Advisory Committee, ongoing engagement with community groups, other levels of government, emerging research, environmental scan/data analysis or as submitted online at **cswbp-brucegrey.ca** by community partners, organizations or individuals.

Criteria for considering an Action Table response:

- The issue is supported by data/evidence.
- Achieving the desired outcome requires a collaborative or multi-sector approach.
- If the issue is not addressed, there is a risk to community safety or well-being in one or more of the Priority Risk Areas.
- Input has been sought from people with lived experience of the issue under consideration.
- Another group or organization is not already well-positioned to successfully address the issue within its current capacity or resources.
- The issue requires a broader community or system-level response. For instance, the issue must be beyond the scale of an individual or family.
- The issue is of a size and scope that is actionable.
- There is a high likelihood that an Action Table will achieve the desired outcome.



2 Issue Assessment

The Advisory Committee assesses the issue to determine the appropriate response including the potential identification or formation of an Action Table. The issue assessment process will be augmented by the available local data and decision support.

3 Action Table Formation/ Identification

Where appropriate, an Action Table will be created. A chair is appointed to recruit community partners or individuals best positioned to address the issue. If an existing body is already well-positioned to address the issue, the group may be asked to assume the role of an Action Table.

4 Action Planning

The Action Table develops an Action Plan that includes measurable objectives and outcomes and identifies required resources. The Advisory Committee endorses the approach.

5 Implementation

The Action Table implements the Action Plan. The nature, approach and outcomes of each Action Table will vary. Action Tables will be formed for various lengths of time, dependent on the needs of the community and the response required.



Evaluation and Outcomes

Action Tables will provide regular updates to the Advisory Committee and a final report will be provided at the conclusion of the initiative. This will include an evaluation of outcomes and impact. Action Tables that have been established to respond to longer-term system issues will report to the Advisory Committee no less than once per year.

SECTION 4B

Local Data & Decision Support

Accurate and timely organizational and population data is critical to making informed policy and planning decisions at both an organizational and systems level. The model will create an enhanced opportunity to facilitate data and knowledge sharing within the community and across sectors.



Wherever possible, the model will leverage the local work of the Bruce Grey Data Information Sharing Collaborative (BGDISC), and the following objectives will be considered by the Advisory Committee:

- Identifying evidence of emerging issues and trends to support the creation of Action Tables;
- Supporting the data requirements of the Advisory Committee;
- Supporting the development and monitoring of Bruce and Grey CSWBP indicators; and
- Establishing data, information sharing and privacy protocols between partner organizations including opportunities to share anonymized data to enable holistic and integrated human services planning.



Throughout the course of the Bruce and Grey CSWBP process, the identification of local data has remained of utmost importance in order to both validate resident perceptions and to then focus the work that Action Tables will do related to the Priority Areas of Risk and opportunities for action/improvement. Over the past several months, local data has been collected to support ongoing discussions related to safety and well-being, and to create a foundation from which the Advisory Committee and Action Tables are able to monitor and evaluate the CSWBP work as it proceeds. This local data is now being shared through this Indicator Report which has informed the statistics/ indicators and opportunities for consideration by Action Tables that can be found in <u>Section 6</u> of the Plan.

It must be stressed, that the indicators that follow are not an exhaustive list but are meant to be used as a starting point or baseline for Action Tables to use for the work that follows. It is expected that the Action Tables will refresh the data provided here as well as discover new or additional indicators to measure the impact of their work. Some of these indicators appear in more than one category due to the overlapping nature of the categories. The data provided to us from various organizations came in many different formats and time frames. For summary purposes, the most recent data is reported here and, when available, is compared to previous years. Please note that one of the shortcomings of the data in this report is that it includes very little First Nations-specific information. This is because either the data was not collected or released, Indigenous identification resulted in small numbers or was deemed unreliable (especially Census data), or data sharing agreements have yet to be negotiated with the First Nations communities. It is hoped that future versions of this report will be able to add more specific information. It should be noted that there will be challenges comparing the baseline data from this report to data collected in 2020 and 2021 because of the COVID-19 Pandemic. Data collected in 2020, 2021 (and possibly 2022) will need to be interpreted with this event in mind because of the enormous changes due to data collection methods and/or indicator changes and the significant modifications in various program delivery access and availability.

In an effort to be transparent and to support continued sharing of community-based data and information in Bruce and Grey counties, it is imperative that the information in this report and any other data that the Action Tables produce be shared publicly through the local data sharing website **BGDISC**. SECTION FIVE

An Overview of Safety and Well-Being in Bruce and Grey

- 1 Addictions/ Substance Use
- 2 Community Belonging and Neighbourhood/ Environment
- **3** Crime Prevention
- 4 Education and Employment
- 5 Emotional Violence, Bullying and Harassment

- 6 Healthy Child Development
- 7 Housing and Homelessness
- 8 Mental Health
- 9 Physical Health
- 10 Poverty and Income
- 1) Other Comments About Safety and Well-Being in Bruce and Grey

1 Addictions/Substance Use

The description of this category includes:

- Alcohol misuse
- Cannabis misuse
- Illegal drug use and misuse
- Prescription drug misuse
- Gambling (online, racetrack, casino, etc.)
- Access to addiction services
- Coordination between addiction services in the community

Below you will find some key Addictions/ Substance Use indicators gathered from local organizations that Action Tables could use to monitor progress/improvements. Please note that some indicators may be included in more than one section due to categories not being mutually exclusive. For more information on the indicators that follow, please use the link provided for the source report in the third column, where available.

Indicator	Baseline (most recent findings)	Year, source, level of geography, location	
Regular heavy drinking (% of residents 12+)	GB – 22% (significantly higher than ON – overall, males, 35-49 year olds)	2016-17, CCHS, Grey Bruce, GBHU Health Stats	
Age-standardized rate of exceeding low-risk drinking guideline (for injury or chronic disease)	GBHU – 56.5% (significantly higher; highest of all ON Health Units) ON – 44.4%	2015-16, CCHS, Grey Bruce <u>, Public</u> Health Ontario Snap Shots - alcohol use	
Age-standardized rate (per 100,000) for ED visits for conditions entirely attributable to alcohol	GBHU – 540.4 (significantly lower than ON) ON – 605.3	2018, NACRS, Grey Bruce, <u>Public</u> Health Ontario Snapshots - alcohol- related harms	
Age-standardized rate (per 100,000) for hospitalizations for conditions entirely attributable to alcohol	GBHU – 249.9 (significantly higher than ON) ON – 200	2018, NACRS, Grey Bruce, <u>Public</u> Health Ontario Snapshots - alcohol- related harms	
Age-standardized rate (per 100,000) for ED visits for conditions entirely attributable to cannabis	GBHU – 120.6 (significantly higher than ON) ON – 87.4	2018, NACRS, Grey Bruce, <u>Public</u> Health Ontario Snapshots - cannabis-related harms	
EMS alcohol intoxication (81.1)	GC – 63 (increased over 2 years) BC – 48	2019, EMS, by county	
EMS drug/alcohol overdose (81 & 81.3)	GC – 174 (increased over 2 years) BC – 40	2019, EMS, by county	
Illicit drug use* (lifetime) Illicit drug use* (past year)	36% 11%	2016-17, CCHS, Grey Bruce, GBHU Health Stats	

Indicator	Baseline (most recent findings)	Year, source, level of geography, location	
Injuries due to unintentional poisonings	ED Visits 68% higher than ON (increased) In GB – avg. 427 EDV, 27 hospitalizations and 8 deaths per year	2007 – 2016, Grey Bruce Health Unit, <u>GBHU Health Stats</u> , Grey Bruce	
Leading cause of death – cirrhosis & liver disease	For 45-64 year olds – 3 rd leading cause of death (significantly higher than ON rate)	2003-2012, Leading Causes of Death, Grey Bruce, <u>GBHU Health Stats</u>	
Leading cause of death – accidental poisoning	For 25-44 year olds – 3 rd leading cause of death (same as ON rate)	2003-2012, Leading Causes of Death, Grey Bruce, <u>GBHU Health Stats</u>	
EMS drug overdose – opioid (81.1)	GC – 31 (increased over 2 years) BC – 11	2019, EMS, by county	
Canadian Mental Health Association – Addictions Service Treatment	Total individuals served – 903 Total visits – 4,537 Court support – 47 Supportive housing – 14 Community treatment – problem gambling – 17 Community treatment – substance abuse – 558 Information & referral – 267	2019-2020 (fiscal year), CMHA Grey Bruce personal correspondence, Grey Bruce	
211 Mental Health & Addictions # of calls # of needs identified # of referrals	Increased over previous years 383 446 531	2019, 211 2019 report and <u>211 Dashboard</u> , Grey Bruce (also available by county and municipality)	
Emergency dept. visits for: All substance use Alcohol	Doubled provincially and increased by about two thirds locally (65%) since 2002. In Grey Bruce, over half (57%) were linked to alcohol.	McFarland, V., & Leffley, A. (2017). Substance misuse-related ED visits in Grey Bruce. <i>Data up to 2015</i>	
Opioids	Opioid-related ED visit rates have increased by 2.5 to 3 times both locally and provincially, reaching 80.3 per 100,000 population in Grey Bruce in 2015.		
Opioid poisonings	Total EDV – 89 (average per month – 7, highest month Dec.) More than doubled since 2014 Total deaths – 7	2018 Opioid Poisonings Grey Bruce, Annual Summary; there are also monthly reports <u>here</u>	
EMS withdrawal/detox (99.09)	GC – 20 (increased over 2 years) BC – 8	2019, EMS, by county	
Frequent ED visits (+4/year) for mental health and addictions	2016/17 – 8.4% (versus 9% ON) 2017/18 – 8.7% (versus 9.5% ON)	Fiscal years 2016/17 & 2017/18, Grey Bruce Ontario Health Teams planning document, Ontario Health (SWLHIN)	
Repeat ED visits within 30 days for mental health and addictions	2016/17 – 14.9-16.6% (23.6-25.4% ON) 2017/18 – 18.3-23% (24.6-25.4% ON)	Fiscal years 2016/17 & 2017/18, Grey Bruce Ontario Health Teams planning document, Ontario Health (SWLHIN)	
Repeat unscheduled emergency visits within 30 days for substance abuse conditions	GB – 30% (increase) GC – 24.1% (increase) BC – 18.6% (decrease)	2018/19 vs. 2017/18, Grey Bruce, NACRS Ontario Min of Health (July 2, 2020), Ontario Health (SWLHIN)	

Indicator	Baseline (most recent findings)	Year, source, level of geography, location	
Mental health and substance abuse hospitalization rate (per 10,000 population)	GB – 14.2 (same) GC – 17.3 (increase) BC – 7.5 (decrease)	2018/19 vs. 2017/18, Grey Bruce, NACRS Ontario Min of Health (July 2, 2020), Ontario Health (SWLHIN)	
Health care events rank – drug/alcohol/dependence	55 (versus 46 ON out of 226 grouper conditions)	Fiscal year 2017/18, Grey Bruce Ontario Health Teams planning document, Ontario Health (SWLHIN)	
Ontario Student Drug Use and Health Survey - students between grades 7 and 12, report during the 12 months before the survey	Drinking alcohol – 51.2% (increase) Using cannabis – 29.2% (increase) Using an opioid non-medically – 11% (increase)	2018 data (report 2019), OSDUHS, some Grey Bruce schools in the sample frame, GBHU is in the Western Region; report link here	
OPP Grey County+	Drug possession – 39 (decrease) Other drug offences incl. trafficking – 11 (decrease)	2019 (vs 2018), CFS Billing Summary Report, Grey County (Grey Highlands, Meaford, Blue Mountains, Chatsworth, Georgian Bluffs, Southgate)	
OPP Bruce County+	Drug possession – 73 (decrease) Other drug offences incl. trafficking – 14 (decrease)	2019 (vs 2018), CFS Billing Summary Report, Bruce County County (Northern Bruce Peninsula, Arran-Elderslie, Brockton, Kincardine, South Bruce, South Bruce Peninsula, Huron-Kinloss)	
Owen Sound Police Services+	Total drug offences – 57 (similar)	2018-2019, OSPS Crime Statistics, Owen Sound	
Hanover Police Services+	Total drug offences – 39 (similar)	2019, 2012 to 2019 HPS Calls for service, Hanover	
West Grey Police Services+	Total drug offences – 15 (increase)	2019 (vs 2018), West Grey PS Calls for service, West Grey	
Saugeen Shores Police Services+	Other drug offences incl. trafficking – 12 (decrease)	2019 (vs 2018), Saugeen Shores PS Calls for service, Saugeen Shores	
Criminal Courts Owen Sound	Impaired driving – 179 Drug possession – 45 Drug trafficking – 21	2019, Criminal Courts - cases received	
Criminal Courts Walkerton	Impaired driving – 96 Drug possession – 121 Drug trafficking – 69	2019, Criminal Courts - cases received	
STAR – Situation Table Top Risk Factors	Drug use by person – 5 Drug abuse by person – 4	2016-2019 based on 10 meetings/ cases; Owen Sound Police Services; note – multiple risk factors can be identified per case	
Alcohol density – # stores (per 10,000 people)	ON – 2.5 GB – 5.6	2019, Cancer Care Ontario, Prevention System Quality Index (supplemental tables)	

+ Note: OPP and other police service stats are not comparable because they are from different systems that report using different categories.

* Note: Illicit drug use definition -This includes cannabis if used more than once, and any use of cocaine, amphetamines, MDMA, hallucinogens, solvents, heroin/opium, and steroids.

Community Perceptions of Addictions and Substance Use

Question 24 in the community engagement survey asked: "What are the top areas where you feel improvements are needed to increase safety and well-being in your community? Rate them in order of importance with 1 being most important and 11 being least important."

Addictions/Substance Misuse category ranked highest (#1) overall in the community engagement survey (overall, by Bruce County, by Grey County and by 14 out of 17 municipalities). It was ranked in the top 3 areas of importance by 58% of survey respondents (BC 56%, GC 59%). When asked which areas were of particular concern in this category, illegal drug use, alcohol misuse, access to addiction services and prescription drug misuse were the top areas of concern. Several comments in the survey mentioned concern about the availability of illegal drugs in their community and the negative impact that it has on crime rates, mental health and employment.



Action Areas for Consideration

By monitoring the indicators above, changes + or - can be detected. It will be prudent to let members of the community as well as community partners know what actions are being taken to improve/ reduce addictions and substance use challenges. As this category was ranked as the highest area of importance by nearly 60% of survey respondents, the Action Table for this category will need to focus on the overarching effects that alcohol and substance misuse have had on our communities. The data from several organizations such as police, EMS and hospitals are showing increases in alcohol and substance use related events are continuing to increase. The opioid crisis layered on top of this has created an even more urgent demand for services and treatments in order to prevent further deaths. Other issues to note:

- Substance misuse regular heavy drinking remains a known issue in our community (self-reported CCHS data sign. higher than ON);
- Underage alcohol, cannabis and other drug use is increasing;
- Increased emergency department visits for substances (over half 57% linked to alcohol) and 2.5-3 times increased for opioid use;
- Note that the de-criminalization of cannabis in Canada in October 2018 may have impacted the police and court offence data for possession and trafficking thus clear trends for these indicators may be difficult to interpret at this point in time; and
- Addictions and substance misuse are a major cause of increasing morbidity and mortality in the region.

2 Community Belonging and Neighbourhood/Environment

The description of this category includes:

- Relationships with neighbours
- Unsafe or unwanted behaviour or activities in the community
- Resident safety
- Support for newcomers
- Support for older adults who are vulnerable
- Support for vulnerable youth
- Traffic safety
- Racism

Below you will find some key Community Belonging and Neighbourhood/Environment indicators gathered from local organizations that Action Tables could use to monitor progress/improvements. Please note that some indicators may be included in more than one section (e.g., Crime Prevention, Housing and Homelessness, Poverty and Income) due to categories not being mutually exclusive. For more information on the indicators that follow, please use the link provided for the source report in the third column, where available.

Indicator	Baseline (most recent findings)	Year, source, level of geography, location
% population 65 and over^	ON – 16.7% GB – 23.9% GC – 24.1% BC – 23.6% Highest in Northern Bruce Peninsula (39%), Hanover (34%), and The Blue Mountains (33%)	2016, 2016 Canadian Census, by County & municipality, <u>GBHU Health Stats</u>
% population 85 and over^	ON – 2.2% GB – 3.0% GC – 3.2% BC – 2.7% Highest in Owen Sound (5.2%), Hanover (5%), North Bruce Peninsula (3.9%)	2016, 2016 Canadian Census, by County & municipality, <u>GBHU Health Stats</u>
% age 65 and over living alone^	ON – 23.5% GB – 24.2% GC – 24.0% BC – 24.6% Highest in Owen Sound (33%), Hanover (31%), and Arran-Elderslie (28.5%)	2016, 2016 Canadian Census, by County & municipality, <u>GBHU Health Stats</u>
% of older adults 65+ in low-income households, according to LIM-AT^	ON – 12% GC – 13.4% BC – 11.5% Highest in Southgate (18%), Arran-Elderslie (18%), Chatsworth (17%)	2016, 2016 Canadian Census, by County & municipality, <u>GBHU Health Stats</u>

Indicator	Baseline (most recent findings)	Year, source, level of geography, location
Projected senior population by 2041^	ON – 25% GB – 33.9%	2016, 2016 Canadian Census, by County & municipality, <u>GBHU Health Stats</u>
% of children aged 0-17 in low income households, according to LIM-AT, Grey Bruce Municipalities, 2015^	ON – 18.4% GC – 20% BC – 17.9% Highest in Huron-Kinloss (29.3%), Chatsworth (28.4%), Owen Sound (25%), Southgate (24.9%), Arran-Elderslie (24.8%)	2016, 2016 Canadian Census, by County & municipality, GBHU Health Stats
Immigrant population (% of total population)^	Canada – 21.9% ON – 29.1% GB – 7.9% GC –8.0% BC – 7.7%	2016, 2016 Canadian Census, by County & municipality, GBHU Health Stats
Recent immigrant (2011-2016) population (% of total population)^	Canada –3.5% ON –3.6% GC – 0.3% BC –0.5%	2016, 2016 Canadian Census, by County & municipality, GBHU Health Stats
% Identify as a visible minority population^	Canada – 22.3% ON– 29.3% GB – 2.3% GC – 2.1% BC – 2.7%	2016, 2016 Canadian Census, by County & municipality, GBHU Health Stats
Aboriginal identity – population living off reserve^	GC – 2,360 BC – 1,600	2016, 2016 Canadian Census, by County & municipality, <u>GBHU Health Stats</u>
Estimates of on-reserve population	Saugeen First Nation – 810 Chippewas of Nawash Unceded First Nation – 724	As reported on websites: <u>Saugeen First Nation</u> <u>Chippewas of Nawash</u> <u>Unceded First Nation</u>
Estimates of off-reserve population	Saugeen First Nation – 1,043 Chippewas of Nawash Unceded First Nation – 1,958	As reported on websites: <u>Saugeen First Nation</u> <u>Chippewas of Nawash</u> <u>Unceded First Nation</u>
Sense of belonging – Somewhat to Very Strong (% of residents 12+)	GB – 77% (higher than ON & CAN rate)	2015-16, CCHS, Grey Bruce, GBHU Health Stats
Community vitality – % volunteered in past 12 months	GB – 58.9% GC – 56.3% BC – 61.3%	2018, Canadian Index of Wellbeing, overall & by county, <u>GBHU Health Stats reports</u>
Community vitality – mean # of social contacts reported by residents: Relatives to whom residents are close	GB – 6.4 GC – 6.3 BC – 6.5	2018, Canadian Index of Wellbeing, overall & by county, <u>GBHU Health Stats reports</u>

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Indicator	Baseline (most recent findings)	Year, source, level of geography, location
Community vitality – mean # of social contacts reported by residents: Close friends in whom residents can confide	GB – 5.4 GC – 5.5 BC – 5.2	2018, Canadian Index of Wellbeing, overall & by county, <u>GBHU Health Stats reports</u>
Community vitality – mean # of social contacts reported by residents: Neighbours from whom residents could ask a favour	GB – 3.5 GC – 3.5 BC – 3.6	2018, Canadian Index of Wellbeing, overall & by county, <u>GBHU Health Stats reports</u>
Community vitality – % agree – "Many people in this community are available to give help if somebody needs it"	GB – 82.4% GC – 80.9% BC – 83.9%	2018, Canadian Index of Wellbeing, overall & by county, GBHU Health Stats reports
Community vitality – % agree – "I have good friends in this community"	GB – 80.9% GC – 81.6% BC – 80.2%	2018, Canadian Index of Wellbeing, overall & by county, GBHU Health Stats reports
Community vitality – % agree – "I feel at ease with people in this community"	GB – 77.4% GC – 77.2% BC – 77.7%	2018, Canadian Index of Wellbeing, overall & by county, <u>GBHU Health Stats reports</u>
Community vitality – % agree – "People are sociable here"	GB – 79% GC – 80.6% BC – 77.4%	2018, Canadian Index of Wellbeing, overall & by county, <u>GBHU Health Stats reports</u>
Community vitality – % agree – "If I had an emergency, even people I do not know would be willing to help me"	GB – 74.6% GC – 75.9% BC – 73.3%	2018, Canadian Index of Wellbeing, overall & by county, GBHU Health Stats reports
Community vitality – % agree – "It is difficult for me to connect with the people in this community"	GB – 15% GC – 16.5% BC – 13.7%	2018, Canadian Index of Wellbeing, overall & by county, GBHU Health Stats reports
Community vitality – % agree – "I often feel isolated from others in the community"	GB – 15.1% GC – 14.1% BC – 15.1%	2018, Canadian Index of Wellbeing, overall & by county, GBHU Health Stats reports
Community vitality – % strong – Sense of belonging in local community	GB - 61.6% GC - 59.8% BC - 63.4%	2018, Canadian Index of Wellbeing, overall & by county, <u>GBHU Health Stats reports</u>

Indicator	Baseline (most recent findings)	Year, source, level of geography, location
Community vitality - % safe – How safe walking alone in neighbourhood after dark	GB – 82.7% GC – 81.6% BC – 83.8%	2018, Canadian Index of Wellbeing, overall & by county, <u>GBHU Health Stats reports</u>
Community vitality – % Never/Rarely – Feeling uncomfortable/out of place in neighbourhood because of ethnicity, culture, race, skin colour	GB – 95.3% GC – 93.5% BC – 97.1%	2018, Canadian Index of Wellbeing, overall & by county, GBHU Health Stats reports
Community vitality – % Never/Rarely – Experience of discrimination in community due to: Ethnicity, culture, race or skin colour	GB – 97.3% GC – 96.2% BC – 98.5%	2018, Canadian Index of Wellbeing, overall & by county, <u>GBHU Health Stats reports</u>
Community vitality – % Never/Rarely – Experience of discrimination in community due to: Religious affiliation	GB – 95.3% GC – 93.8% BC – 95.3%	2018, Canadian Index of Wellbeing, overall & by county, GBHU Health Stats reports
Community vitality – % Never/Rarely – Experience of discrimination in community due to: Sexual orientation	GB - 97.9% GC - 97.4% BC - 98.4%	2018, Canadian Index of Wellbeing, overall & by county, GBHU Health Stats reports
Community vitality – % Never/Rarely – Experience of discrimination in community due to: Age	GB – 91.7% GC – 90.5% BC – 92.9%	2018, Canadian Index of Wellbeing, overall & by county, GBHU Health Stats reports
Community vitality – % Never/Rarely – Experience of discrimination in community due to: Gender	GB – 93.9% GC – 93.6% BC – 94.2%	2018, Canadian Index of Wellbeing, overall & by county, GBHU Health Stats reports
Youth accessing shelter	GC – 98 youth BC – 49 youth	2018, 2019 Youth Vital Focus report (YMCA CHPI report), Grey Bruce
Women, children in shelter Women turned away from shelter due to shortage of beds	GB – 313 (increase) GB – 161 (decrease)	April 2019-March 2020 (vs 2018-2019), Violence Prevention Grey Bruce, Grey Bruce
211 Individual/Family Services # of calls # of needs identified # of referrals	266 304 463 (decrease)	2019, 211 2019 Report and <u>211 Dashboard</u> , Grey Bruce (available by county and municipality)

Indicator	Baseline (most recent findings)	Year, source, level of geography, location
211 Community Services # of calls # of needs identified # of referrals	191 200 303	2019, 211 2019 Report and <u>211 Dashboard</u> , Grey Bruce (available by county and municipality)
211 Volunteers/Donations # of calls # of needs identified # of referrals	25 28 36 (decrease)	2019, 211 2019 Report and <u>211 Dashboard</u> , Grey Bruce (available by county and municipality)
# of visitors % likely to return next year Economic impact of tourism	2.5 Million 90% \$299.1 Million	2018, Economic Impact of Tourism Report, Bruce County
Driving a recreational vehicle within 1 hour after 2+ drinks (self-reported) (% of residents 18+)	7%	2015, Grey Bruce Health Unit, GBHU Health Stats, Grey Bruce
Driving a motorized vehicle within 1 hour after 2+ drinks (self-reported) (% of residents 18+)	4%	2015, Grey Bruce Health Unit, GBHU Health Stats, Grey Bruce
Off-road vehicle collisions	ED visits 3 times higher than ON Hospitalization 4 times higher than ON In GB, avg. 297 EDV, 34 hospitalizations and 1 deaths per year	2007 – 2016, Grey Bruce Health Unit, GBHU Health Stats , Grey Bruce
Motor vehicle collisions	ED visits 68% higher than ON Hospitalization 2 times higher compared to ON Second highest cause of unintentional injury in GB (avg. 1585 EDV, 175 hospitalizations and 16 deaths per year)	2007 – 2016, Grey Bruce Health Unit, GBHU Health Stats, Grey Bruce
Top 3 leading causes of death – 15-24 year olds	Motor vehicle collisions (higher than ON) Suicide Other – too low to report	2008-12, Grey Bruce Health Unit, GBHU Health Stats, Grey Bruce
Top 3 leading causes of death – 25-44 year olds	Suicide (higher than ON) Motor vehicle collisions (higher than ON) Accidental poisoning	2008-12, Grey Bruce Health Unit, GBHU Health Stats, Grey Bruce
OPP Grey County+	Traffic (incl. MVCs, road rage) – 1,039 (increase) Neighbour dispute – 249 (increase)	2019 (vs 2018), CFS Billing Summary Report, Grey County (Grey Highlands, Meaford, Blue Mountains, Chatsworth, Georgian Bluffs, Southgate)

Indicator	Baseline (most recent findings)	Year, source, level of geography, location
OPP Bruce County+	Traffic (incl. MVCs, road rage) – 962 (increase) Neighbour dispute – 278 (increase)	2019 (vs 2018), CFS Billing Summary Report, Bruce County County (Northern Bruce Peninsula, Arran-Elderslie, Brockton, Kincardine, South Bruce, South Bruce Peninsula, Huron-Kinloss)
Owen Sound Police Services+	Total impaired driving – 86 (increase) Traffic MVC – 285 (increase) Traffic other – 2,491 (decrease) Neighbour dispute – 170 (increase)	2018-2019, OSPS Crime Statistics, Owen Sound
Hanover Police Services+	MVC – 248 (increase) RIDE – 253 (increase) Neighbour dispute – 248 (increase)	2019, 2012 to 2019 HPS Calls for service, Hanover
West Grey Police Services+	MVC – 334 (increase) RIDE checks conducted – 186 (increase) Neighbour dispute – 34 (decrease)	2019 (vs 2018), West Grey PS Calls for service, West Grey
Saugeen Shores Police Services+	Impaired driving – 51 (increase) Speeding – 248 (increase) MVC – 291 (decrease)	2019 (vs 2018), Saugeen Shores PS Calls for service, Saugeen Shores
Criminal Courts Owen Sound	Impaired driving – 179	2019, Criminal Courts – cases received
Criminal Courts Walkerton	Impaired driving – 96	2019, Criminal Courts – cases received
EMS failure to cope (99.13)	GC – 122 BC – 120	2019, EMS, by county
Monthly average # of children in care (0-17 years old)	2019-2020 – 118 2018-2019 – 110	2018-2020, Bruce Grey Child & Family Services, Bruce and Grey counties

+ Note: OPP and other police service stats are not comparable because they are from different systems that report using different categories.

^ Note: Census reports for Grey Bruce do not include data from the 2 First Nations communities due to very low response rates.



BELONGING AND NEIGHBOURHOOD / ENVIRONMENT

Community Perceptions of Belonging and Neighbourhood/Environment

Question 24 in the community engagement survey asked: "What are the top areas where you feel improvements are needed to increase safety and well-being in your community? Rate them in order of importance with 1 being most important and 11 being least important."

Community Belonging and Neighbourhood/Environment was ranked in the top 3 areas of importance by 23% of survey respondents (BC 24%, GC 23%). When asked which areas were of particular concern in this category: Unsafe or unwanted behaviour or activities in the community, Support for older adults who are vulnerable and Support for vulnerable youth were the top areas of concern. Several comments in the survey mentioned concern about desire for more neighbourhood/community activities and places to meet others, need for more inclusive/diverse/ tolerant community members toward newcomers, the erosion of a sense of community in areas with a lot of short-term accommodations as well as the need for more supports for those with physical and intellectual disabilities.

Other questions from the community consultation survey linked to the Community Belonging and Neighbourhood/Environment category had the following results:

Question	Response	Overall	Bruce County	Grey County
How long have you been a resident of this community?	% year or less % over 25 years	21% 39%	20% 42%	23% 35%
Of those with children aged 5 to 12, I feel comfortable allowing my children to play outside unsupervised.	Strongly Agree/Agree	57%	62%	51%
How would you describe your feeling of belonging to your local community?	Very Strong/Strong Very Weak/Weak	58% 13%	64% 11%	52% 16%
I would recommend this community to others as a place to live.	Strongly Agree/Agree	76%	82%	70%
How do you feel about your relationship with your neighbours?	Very Satisfied/Satisfied	74%	78%	70%
How many of the following people you trust?				
Neighbours	Trust all or most	63%	70%	57%
Colleagues at work	Trust all or most	69 %	73%	65%
Businesses in the community	Trust all or most	66%	72%	60%
Healthcare agencies	Trust all or most	69 %	70%	68%
Community service agencies	Trust all or most	64 %	66%	63%
County social service programs	Trust all or most	61%	62 %	58%
Police services	Trust all or most	73%	73%	73%

Question	Response	Overall	Bruce County	Grey County
How do you feel about your personal safety in your community?	Very Satisfied/Satisfied	72%	79 %	65%
If unsatisfied, name one thing that would make you feel safer?	Policing improvements (incl traffic, theft, drugs); Increased police presence			
How safe do you feel in the following areas?				
When you are in your own home after dark	Very Safe/Reasonably Safe	88%	90 %	85%
Walking alone in your neighbourhood after dark	Very Safe/Reasonably Safe	64%	70%	58%
Walking alone downtown after dark	Very Safe/Reasonably Safe	49 %	63%	35%
If unsafe, name main reason you feel unsafe?	Addiction-related issues including violence, theft, homelessness, loitering			

Action Areas for Consideration

By monitoring the indicators above, changes + or - can be detected. Organizations or committees taking action within this category are encouraged to consider strategies to bring younger people into the area in order to off-set the ballooning older populations in the area, many of whom live alone and need additional supports in order to age-in-place. In order to have thriving communities, there must be efforts made to not only grow the population but also to encourage diversity in our communities. As well, in order to reduce the major cause of injuries and deaths, motor vehicle collisions (MVC), concerted efforts must be made throughout our communities to tackle this issue as rates continue to increase. Other issues to note:



- Impaired driving remains an issue in this community as charges continue to increase;
- Nearly 1 in 5 children and 1 in 10 seniors live in low-income households;
- Although most Grey Bruce residents have a strong sense of community belonging, have many personal supports and feel at ease in the community, there remains a significant proportion of residents that do not experience the community in the same way. Resources need to be available to provide on-going support and services so they do not fall between the cracks.

3) Crime Prevention

The description of this category includes:

- Animal cruelty
- Arson
- Break and enter
- Child abuse
- Drug trafficking
- Elder abuse
- Gang activity
- Homicide

- Human trafficking
- Intimate partner or domestic violence
- Physical assault
- Theft
- Sexual assault
- Threats

Below you will find some key Crime Prevention indicators gathered from local organizations that Action Tables could use to monitor progress/improvements. Please note that some indicators may be included in more than one section due to categories not being mutually exclusive (such as Community Belonging and Neighbourhood/Environment indicators). For more information on the indicators that follow, please use the link provided for the source report in the third column, where available.

Indicator	Baseline (most recent findings)			Year, source, level of geography, location
Crime Severity Index ^a	ON BC avg ^b GC avg ^b (mostly driven by Hanover and OS rates)	2018 60.4 52.8 53	2019 60.7 53.9 65.4	2018-2019, <u>Statistics Canada</u> Crime Severity Index
Incidents-based crime rate per 100,000 ^b	ON BC avg ^b GC avg ^b (mostly driven by OS and Hanover rates)	2018 4,506.1 4,328.7 4,333.7	2019 4,533.6 4,524.4 4,947.7	2018-2019, <u>Statistics Canada</u> Crime Severity Index
OPP Grey County+	Violent criminal code – 392 (lower Top 3-4: Assault 1 – 142 (lower) Utter threats to person – 85 (hi Sexual assault – 43 (higher) Criminal harassment – 43 (lower	gher)		2019 (vs 2018), CFS Billing Summary Report, Grey County (Grey Highlands, Meaford, Blue Mountains, Chatsworth, Georgian Bluffs, Southgate)
	Property crime violations – 1,098 Top 3-4: Theft under – other – 144 (high Mischief-master code – 137 (low Break & enter – 136 (lower) Fraud-other – 112 (higher)	ner)	2018)	
	Animal cruelty – 0			
	Trouble with youth – 85 (higher)			

Indicator	Baseline (most recent findings)	Year, source, level of geography, location
OPP Bruce County+	Violent criminal code – 471 (higher than 2018) Top 3-4: Assault 1 – 182 (higher) Utter threats to person – 89 (higher) Sexual assault – 64 (higher) Criminal harassment – 45 (lower)	2019 (vs 2018), CFS Billing Summary Report, Bruce County (Northern Bruce Peninsula, Arran-Elderslie, Brockton, Kincardine, South Bruce, South Bruce Peninsula, Huron-Kinloss)
	Property crime violations – 1,232 (lower than 2018) Top 3-4: Theft under – other – 176 (higher) Mischief-master code – 245 (lower) Break & enter – 152 (lower) Fraud-other – 98 (higher)	
	Animal cruelty – 2 (decrease)	
	Trouble with youth – 183 (higher) Youth Criminal Justice Act – 2 (lower)	
Owen Sound Police Services+	Total incidents – 16,592 (increase) Total charges – 2,107 (increase)	2018-2019, OSPS Crime Statistics (UCR occurrence stats),
	Violent crimes – 623 (higher) Property crimes – 1,205 (higher) Other criminal code – 772 (higher) Impaired driving – 86 (higher) Federal statute violations – 69 (lower)	Owen Sound
	Youth criminal young offender – 97 (lower)	
Hanover Police Services+	Total incidents – 5,098 (higher than 2018) Top 3-4: Police assistance – 320 (higher) Property related – 282 (higher) Theft – 250 (higher) MVC – 248 (higher)	2019, 2012 to 2019 HPS Calls for service, Hanover
West Grey Police Services+	Total POA/Bylaw charges – 1,230 (lower)	2019, 2018-2019 WGPS Activity
	Total # of criminal charges – 380 (higher) Top 3-4: MVC property damage – 334 (higher) Police assistance – 317 (higher) Police information – 305 (lower) Traffic complaint – 248 (lower)	Report, West Grey
	Trouble with youth – 38 (higher)	



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Indicator	Baseline (most recent findings)	Year, source, level of
Saugeen Shores Police Services+	Violent criminal code – 235 (higher than 2018) Top 3-4: Assault 1 – 103 (lower) Utter threats to person – 36 (higher) Criminal harassment – 29 (higher) Sexual assault – 20 (higher)	geography, location 2019, 2018-2019 SSPS Crime Stats-Annual Report, Saugeen Shores
	Property crime violations – 377 (higher than 2018) Top 3-4: Theft under – 148 (higher) Mischief – 73 (lower) Fraud – 36 (lower) Break & enter – 30 (lower)	
	Total impaired driving – 39 (higher)	
	Youth Criminal Justice Act – 4 (lower)	
Victim services	Victim Crisis Assistance ON Bruce – 556 VCAO Grey – 592 VCAO top reasons – tragic circumstance, domestic violence, sexual violence	2018-19, Victim Services Bruce Grey Perth Annual Report, Grey Bruce
Incidents reported to police: Domestic violence	GB – 791 (decrease)	April 2019-March 2020 (vs 2018- 2019), Violence Prevention Grey Bruce, Grey Bruce
incidents Sexual violence incidents Human trafficking	GB – 237 (increase)	
incidents	GB – 13 (increase)	
211 Legal/public safety # of calls # of needs identified # of referrals	Increase over previous years 352 381 507 (increase)	2019, 211 2019 Report and 211 Dashboard, Grey Bruce (available by county and municipality)
Assault injuries	GB avg. yearly ED visits – 439 GB avg. yearly hospitalizations – 20 GB avg. yearly deaths – 2 Overall, comparable to ON rates except: *GB rate of ED visits due to assault is higher than ON rate	2008-17, Vital Statistics, Self-Harm & Other Intentional Injuries in Grey Bruce (2019)
Criminal courts Owen Sound	Trend shows increases over time for most offences (2019, 2018, 2017); current vs 2017=27% increase	2019-2020 (fiscal), Offense-based Statistics - cases received, Ontario
	Total cases – 1819	Court of Justice - Owen Sound
	Crimes against the person – 478 Top 4: Common assault – 189 Uttering threats – 104 Major assault – 80 Sexual assault – 44	
	Crimes against property – 402 Top 4: Theft – 167 Possess stolen property – 93 Fraud – 61 Mischief – 42 Other: Impaired driving – 181 Drug trafficking – 23 Youth criminal cases – 72	

Indicator	Baseline (most recent findings)	Year, source, level of geography, location
Criminal courts Walkerton	Trend shows increases over time for most offences (2019, 2018, 2017); current vs 2017=17% increase	2019-2020 (fiscal), Offense-based Statistics - cases received, Ontario
	Total cases – 1979	Court of Justice - Walkerton
	Crimes against the person – 434 Top 4: Common assault – 178 Major assault – 92 Uttering threats – 58 Sexual assault – 33 Crimes against property – 373 Top 4: Possess stolen property – 110 Theft – 76 Fraud – 68 B & E – 64	
	Other: Impaired driving – 116 Drug trafficking – 57	
	Youth criminal cases – 82	
STAR* – Situation Table Top Risk Factors	Drug use by person – 5 Mental health - suspected – 5 Unemployment – chronic – 5 Basic needs – unable to meet – 4 Drug abuse by person – 4	2016-2019 based on 10 meetings/ cases; Owen Sound Police Services; note – multiple risk factors can be identified per case

- a Crime Severity Index (CSI) monitors the severity level of police-reported crime. It measures the overall seriousness of crime from one year to the next by tracking both the prevalence and the seriousness of the crimes committed. Thus providing a better understanding of the impact that crime has on individual community members, their families, and the community as a whole. Note when available, data was available by police geographies and averages had to be calculated in order to get this figure. Note this measure only includes the permanent or resident population of a jurisdiction.
- b Incidents-based Crime Rate shows the number of police-reported incidents that have occurred per 100,000 population. When available, data was by police geographies and averages had to be calculated in order to get this figure. Note this measure only includes the permanent or resident population of a jurisdiction.
- + Note: OPP and other police service stats are not comparable because they are from different systems that report using different categories.
- * STAR A situation table that is a strategic alliance of human services, guided by common principles and processes in order to mitigate risk situations in a timely manner, usually within 24-48 hours. The term "table" highlights that it is a meeting, which convenes regularly, with police and other human service professionals from a variety of organizations. During a Situation Table, participants work together to review situations of acutely elevated risk (AER) and determine if an individual is at imminent risk of harm and victimization and then coordinate interventions to reduce them.



Community Perceptions of Crime Prevention

Question 24 in the community engagement survey asked: "What are the top areas where you feel improvements are needed to increase safety and well-being in your community? Rate them in order of importance with 1 being most important and 11 being least important."

This category ranked third (#3) overall in the community engagement survey (overall, by Bruce County, second by Grey County and in top 3 by 13 out of 17 municipalities). It was ranked in the top 3 areas of importance by 44% of survey respondents (BC 42%, GC 46%). When asked which areas were of particular concern in this category, break and enter, drug trafficking and theft were the top areas of concern followed by Intimate partner or domestic violence and human trafficking. Several comments in the survey mentioned concern about the road safety issues (found in Community Belonging and Neighbourhood/Environment category), drug related property crimes and violence as well as proactive/preventative policing.

Other questions from the community consultation survey linked to the Crime Prevention category had the following results:

Question	Response	Overall	Bruce County	Grey County
Over the last three years, do you think crime in your community has:	Increased Same Decreased	54% 40% 6%	52% 42% 5%	50% 38% 8%
Compared to other communities in Ontario, do you think your community has:	Lower crime rates Same Higher	48% 41% 11%	56% 39% 5%	41% 42% 17%
In your opinion, the role of policing in ensuring community safety is:	Extremely or very important	87%	87%	88%
How would having more police officers in your neighbourhood/community make you feel?	Much safer	30%	26%	34%

Action Areas for Consideration

By monitoring the indicators above, changes + or - can be detected. It will be prudent to let members of the community as well as community partners know what actions are being taken to improve Crime Prevention challenges. The Action Table for this category will need to focus on developing an over-arching set of indicators that can be monitored so that a clear picture of police crime statistics for this region can be monitored and communicated. Because of the differences in reporting across the 8 police service areas, collaborative efforts may be challenging to see impact. More synthesized, comparable data over time is required to have a true sense of crime in Grey Bruce, thus we are reliant on Criminal Court data which is not a replacement for local police service data. Other considerations:

- Crime Severity Index data revealed that rates had increased between 2018 and 2019, especially in Grey County where it is largely driven by incidents in Owen Sound and Hanover;
- Criminal Court cases show trends are increasing over time for most offences (2017 vs 2019-20 – 17% to 27% increase);
- Survey respondents felt that crime had increased in the past 3 years in their community; many felt that police play an important role in community safety;
- Overall, assault injuries are comparable to ON rates except that GB rate of ED visits due to assault is higher than ON rate.





Education and Employment

The description of this category includes:

- Availability of education opportunities
- Access to education opportunities
- Affordability of education opportunities
- Education quality
- Availability of job opportunities
- Access to job opportunities
- Job quality
- Opportunities to develop employment skills

Below you will find some key Education and Employment indicators gathered from local organizations that Action Tables could use to monitor progress/improvements. Please note that some indicators may be included in more than one section due to categories not being mutually exclusive (e.g., such as Child Development, Physical Health). For more information on the indicators that follow, please use the link provided for the source report in the third column, where available.

Indicator	Baseline (most recent findings)	Year, source, level of geography, location
Highest educational attainment (15-24 years)^	Not completed high school – 62% (vs 68% ON) Completed high school – 35% (vs 39% ON) Post-secondary qualifications – 3% (vs 3% ON)	2016, 2016 Canadian Census, by County & municipality, GBHU Health Stats
Highest educational attainment (25-64 years) - % no certificate, diploma or degree^	Canada – 11.5% ON – 10.4% GC – 15.3% BC – 12.3% Highest in Southgate (28.1%), Hanover (18%), West Grey (17.4%)	2016, 2016 Canadian Census, by County & municipality, <u>GBHU Health Stats</u>
Highest educational attainment (25-64 years) - % completed high school or equivalency cert.^	Canada – 23.7% ON – 24.5% GC – 28.8% BC – 26.4% Highest in Hanover (34.7%), South Bruce (32.8%), N. Bruce Peninsula (30.9%)	2016, 2016 Canadian Census, by County & municipality, <u>GBHU Health Stats</u>
Highest educational attainment (25-64 years) - % completed postsecondary certificate, diploma, or degree^	Canada – 64.8% ON – 65.1% GC – 55.9% BC – 61.2% Highest in Saugeen Shores (71.8%), Blue Mountains (70.5%), Kincardine (67.1%)	2016, 2016 Canadian Census, by County & municipality, <u>GBHU Health Stats</u>

Indicator	Baseline (most recent findings)	Year, source, level of geography, location
% (25-64 years) with postsecondary qualifications – major category of field of study (top 3)^	Canada – Business, management and public administration; Architecture, engineering, and related technologies; Health and related fields	2016, 2016 Canadian Census, by County & municipality, <u>GBHU Health Stats</u>
	ON – Business, management and public administration; Architecture, engineering, and related technologies; Health and related fields	
	GB – Architecture, engineering, and related technologies; Health and related fields; Business, management and public administration	
EQAO results – grade 6, % meeting or exceeding ON standard in reading	Target – 75% ON – 81% BGCDSB – 81% BWDSB – 72% CSDC Providence – 92%	2018-19, EQAO School Board Progress Reports, GB School Boards
EQAO results – grade 10, literacy test - % of those eligible to write for first time and passed	ON – 80% BGCDSB – 71% BWDSB – 85% CSDC Providence – 96%	2018-19, EQAO School Board Progress Reports, GB School Boards
EQAO results – credit accumulation by the end of grade 10 - % that have 16 or more by end of grade 10	ON – 79% BGCDSB – 81% BWDSB – 72% CSDC Providence – 96%	2018-19, EQAO School Board Progress Reports, GB School Boards
EQAO results – credit accumulation by the end of grade 11 - % that have 23 or more by end of grade 11	ON – 82% BGCDSB – 82% BWDSB – 72% CSDC Providence – 91%	2018-19, EQAO School Board Progress Reports, GB School Boards
EQAO results – four and five-year graduation rates - % of students receiving OSSD within four years (five years)	ON – 81% (87%) BGCDSB – 84% (90%) BWDSB – 67% (82%) CSDC Providence – 93% (96%)	2018-19, EQAO School Board Progress Reports, GB School Boards
Unemployment rate (compared to 2018)	Overall – 4.3% (increase; lower than ON) Youth (15-24) – 9.1% (increase)	2019, Four County Market Labour Board Plan, 2020; Stratford-Bruce Peninsula
Participation rate (compared to 2018)	Overall – 64.6% (decrease) Age 15-24 – 70.2% (higher than ON) Age 25-44 – 89% (higher than ON) Age 45-54 – 86.7% Age 55-64 – 65.6% (lower than ON) Age 65+ – 18.3 (higher than ON)	2019, Four County Market Labour Board Plan, 2020; Stratford-Bruce Peninsula
Labour force characteristics (compared to 2018)	Full-time (per 1,000) – 120.7 (decline) Part-time (per 1,000) – 33.9 (decline)	2019, Four County Market Labour Board Plan, 2020; Stratford-Bruce Peninsula
Indicator	Baseline (most recent findings)	Year, source, level of geography, location
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Employment Ontario – number of clients served	Employment services – 4,049 (increase) Apprenticeship – 864 (increase) Job grant – 447 (decrease) Second career – 55 (decrease) Youth job connection – 220 (decrease) Literacy & basic skills – 726 (increase)	2018-19 (vs 2017-18), Four County Market Labour Board Plan, 2020; Huron, Perth, Grey, Bruce
Migratory change (net gain or loss of labour force 15+)	BC – 810 gain *However, the 15-24 age cohort was the only cohort to experience a net loss, at 395 people. A net loss in this age group is not unusual in the area as it has few local post-secondary institutions.	2018-19 (vs 2017-18), Four County Market Labour Board Plan, 2020; Huron, Perth, Grey, Bruce
	GC – 1,255 gain *The 15 to 24 age cohort was the only age group experiencing a net loss, at 390 people. A net loss in this age group is not uncommon in areas like Grey that have few local post-secondary institutions to retain youth.	
Number of businesses – total number	GC – 11,709 (decrease) BC – 6,585 (decrease)	2018-19 (vs 2017-18), Four County Market Labour Board Plan, 2020; Huron, Perth, Grey, Bruce
Number of businesses – % owner operated	GC – 69% (decrease) BC – 71% (decrease)	2018-19 (vs 2017-18), Four County Market Labour Board Plan, 2020; Huron, Perth, Grey, Bruce
Top 5 hard-to-fill jobs	Managers/directors/supervisors Chefs/cooks Labourers Servers/bartenders Drivers (including AZ)	2020; Four County Market Labour Board Plan, 2020; EmployerOne Survey; Grey, Bruce, Huron, Perth
Top in-demand workplace competencies	Dependability – 51% Work ethic – 45% Customer service – 31%	2020; Four County Market Labour Board Plan, 2020; EmployerOne Survey; Grey, Bruce, Huron, Perth
Top in-demand technical skills	Basic math skills Computer literacy skills Drivers' license Safe food handling SmartServe	2020; Four County Market Labour Board Plan, 2020; EmployerOne Survey; Grey, Bruce, Huron, Perth
Availability of qualified workers by sector - % Excellent or Good	Agriculture – 19% Construction – 9% Healthcare & social assistance – 9% Manufacturing – 15% Wholesale & retail trade – 2%	2020; Four County Market Labour Board Plan, 2020; EmployerOne Survey; Grey, Bruce, Huron, Perth

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Indicator	Baseline (most re	ecent findings)	Year, source, level of geography, location	
Top 3 reasons why employees have quit jobs	Schedule was un	assment or bullyi predictable – 31% job/not using my s variety – 26%	2018; Four County Market Labour Board Plan, 2020; 2018 Employee Survey; Grey, Bruce, Huron, Perth	
Employers' concerns with workplace retention;	62 %			2020; Four County Market Labour Board Plan, 2020;
What employers are doing to encourage retention	-	es salary & benefit ervice/outstanding – 43%		EmployerOne Survey; Grey, Bruce, Huron, Perth
Anticipated hires;	82%			2020; Four County Market
Top 3 anticipated hires	Chefs/cooks Labourers Servers/bartend	ers	Labour Board Plan, 2020; EmployerOne Survey; Grey, Bruce, Huron, Perth	
Tuition assistance	1994-2019 – GBCF has disbursed \$374,312 to Grey Bruce students at both secondary and post-secondary levels in 331 scholarships, bursaries or awards			2019, Community Foundation of Grey Bruce – personal communication, Grey Bruce
Launch Pad – Brockton Youth transport program	30% – increase in participation of Brockton youth participating in Skills Development Programming at Launch Pad			2018, Community Foundation of Grey Bruce - Youth Vital Signs Focus Report 2018, Brockton
Plans of Grey Bruce youth aged 10 to 17 – where to live after schooling completed?	Live in Grey Bruc Move away from Unsure – 22.2%	e – 24.8% Grey Bruce – 53%	As cited in 2018, Community Foundation Youth Vital Signs Focus Report 2018: We C.A.R.E. (2018). Resources and Support for Mental Health in Grey Bruce: 2017 Survey Results. The Grey Bruce We C.A.R.E. Project.	
Early Development Instrument (EDI) - % of SK children vulnerable on at least one & at least two domains	ON BC GC	<u>1</u> 29.6% 29.7% 31%	<u>2</u> 13.9% 9.8% 16.3%	2017-2018, EDI Report, Bruce & Grey Counties
Employment Resource Centres	12,300 visits			2018-19, YMCA Grey Bruce Annual Report, Grey Bruce
211 Education # of calls # of needs identified # of referrals	Increase 308 309 363			2019, 211 2019 Report and <u>211 Dashboard</u> , Grey Bruce (available by county and municipality)
211 Employment # of calls # of needs identified # of referrals	33 36 63			2019, 211 2019 Report and <u>211 Dashboard</u> , Grey Bruce (available by county and municipality)
# of job postings per month	ВС	<u>Jun 2019</u> 741	<u>Apr 2020</u> 540	Jun. 2019-Apr. 2020, Job Demand Report, Bruce County

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Indicator	Baseline	e (most rece	nt findings)		Year, source, level of geography, location
Job type	BC		<u>FT</u> 87.6%	<u>PT</u> 12.4%	Jun. 2019-Apr. 2020, Job Demand Report, Bruce County
Permanency of jobs posted	BC	<u>Perm.</u> 75.7%	<u>Cont.</u> 20%	<u>Temp.</u> 4.3%	Jun. 2019-Apr. 2020, Job Demand Report, Bruce County
Top 3 occupations		ail sales, hoi nancial offic		ousekeeping,	Jun. 2019-Apr. 2020, Job Demand Report, Bruce County
Interest by skill type (top 3)		des, transpo & admin; ma	ort & equip op anagement	.; business,	Apr. 2020, Job Search Report, Bruce County
Interest by skill level (top 3)	BC – professional occup.; technical, paraprofessional & skilled occup.; labour & elemental occup.			Apr. 2020, Job Search Report, Bruce County	
Interest by job type	ВС		<u>FT</u> 82.5%	<u>PT</u> 11.3%	Apr. 2020, Job Search Report, Bruce County
Interest by Job Duration	BC	<u>Perm.</u> 59%	<u>Temp.</u> 17.9%	<u>Contract</u> 15.4%	Apr. 2020, Job Search Report, Bruce County
Residents who took formal education courses in the past year: % to get started in current or new job	GB – 11. GC – 13. BC – 9.8	1%			2018, Canadian Index of Wellbeing, overall & by county, <u>GBHU Health Stats reports</u>
Residents who took formal education courses in the past year: % to improve skills in current job	GB – 23. GC – 23. BC – 24.	2%			2018, Canadian Index of Wellbeing, overall & by county, <u>GBHU Health Stats reports</u>
Residents who took formal education courses in the past year: % to prepare for a job in future	GB – 14. GC – 14. BC – 14.	1%			2018, Canadian Index of Wellbeing, overall & by county, <u>GBHU Health Stats reports</u>
Residents who took formal education courses in the past year: % to lead directly to a qualification related to current job	GB – 17. GC – 18. BC – 16.	8%			2018, Canadian Index of Wellbeing, overall & by county, <u>GBHU Health Stats reports</u>
Perceptions of educational opportunities – % agree that there are plenty of opportunities to take formal education courses	GB – 35. GC – 41. BC – 28.	9%			2018, Canadian Index of Wellbeing, overall & by county, GBHU Health Stats reports
Perceptions of educational opportunities – % agreed they would take courses, but they are too expensive	GB – 23. GC – 23. BC – 24.	3%			2018, Canadian Index of Wellbeing, overall & by county, GBHU Health Stats reports

Indicator	Baseline (most re	cent findings)		Year, source, level of geography, location
Perceptions of educational opportunities – % agreed there are schools nearby where I can upgrade my educational qualifications	GB – 33.6% GC – 41.9% BC – 25.4%			2018, Canadian Index of Wellbeing, overall & by county, <u>GBHU Health Stats reports</u>
Perceptions of educational opportunities – % agreed they would take courses, but they are offered at inconvenient times	GB – 17% GC – 15.7% BC – 18.4%			2018, Canadian Index of Wellbeing, overall & by county, <u>GBHU Health Stats reports</u>
Living standards - % of residents who work for pay	GB – 62.1% GC – 60.3% BC – 64%			2018, Canadian Index of Wellbeing, overall & by county, GBHU Health Stats reports
Living standards - # of different paid jobs	1 GB 77.6 GC 75.3 BC 79.8	% 19.9%	<u>3 or more</u> 4.2% 4.7% 3.7%	2018, Canadian Index of Wellbeing, overall & by county, <u>GBHU Health Stats reports</u>
Residents' perceptions of job fit and security - % agree they have little hope for promotion at my job	GB - 43.2% GC - 42.7% BC - 43.6%			2018, Canadian Index of Wellbeing, overall & by county, GBHU Health Stats reports
Residents' perceptions of job fit and security - % agree that current occupational position adequately reflects their education and training	GB – 71% GC – 74.1% BC – 68.2%			2018, Canadian Index of Wellbeing, overall & by county, <u>GBHU Health Stats reports</u>
Residents' perceptions of job fit and security - % agree that "Considering all my efforts and achievements, my opportunities at work are adequate"	GB – 65.9% GC – 68.4% BC – 63.5%			2018, Canadian Index of Wellbeing, overall & by county, <u>GBHU Health Stats reports</u>
Residents' perceptions of job fit and security - % agree that they have experienced or expect to experience an undesirable change in work situation	GB – 24.1% GC – 26.6% BC – 19%			2018, Canadian Index of Wellbeing, overall & by county, <u>GBHU Health Stats reports</u>
Residents' perceptions of job fit and security - % agree that "Considering all my efforts and achievements, my salary/income is adequate"	GB – 59.5% GC – 57% BC – 61.8%			2018, Canadian Index of Wellbeing, overall & by county, <u>GBHU Health Stats reports</u>
Residents' perceptions of job fit and Security - % agree that their job security is poor	GB – 14.1% GC – 15.7% BC – 12.6%			2018, Canadian Index of Wellbeing, overall & by county, <u>GBHU Health Stats reports</u>

 Note: Census reports for Grey Bruce do not include data from the 2 First Nations communities due to very low response rates.

EDUCATION AND EMPLOYMENT

Community Perceptions of Education and Employment

Question 24 in the community engagement survey asked: "What are the top areas where you feel improvements are needed to increase safety and well-being in your community? Rate them in order of importance with 1 being most important and 11 being least important."

Education and Employment was ranked in the top 3 areas of importance by 24% of survey respondents (BC 25%, GC 25%). When asked which areas were of particular concern in this category, availability of job opportunities, opportunities to develop employment skills and access to job opportunities were the top areas of concern. Several comments in the survey mentioned concern about need for a living wage, affordable transportation options, awareness of local education and training opportunities.



Action Areas for Consideration

By monitoring the indicators above, changes + or - can be detected. It will be prudent to let members of the community as well as community partners know what actions are being taken to improve opportunities for more education and employment opportunities. Organizations or committees taking action within this category are encouraged to consider local training and re-training opportunities in order to qualify the available work force to fill the jobs available in the region. Focus should be placed on encouraging youth to continue their post-secondary education in fields where there are local job opportunities, as well as strengthening partnerships between education and business sectors. Creative cross-sector strategies are needed to combat the impact of an aging workforce on many local business sectors in order to avoid further employment challenges.

Summary of other findings: Education

- GB young adults are more likely than Ontarians in this age group to have completed highschool, and equally likely to have post-secondary qualifications, unlike most age groups in Grey Bruce who tend to have fewer educational qualifications than Ontarians overall.
- EQAO results show that for most categories across all 3 school boards, students in Grey Bruce schools are mostly meeting or surpassing provincial averages. The majority of students achieve OSSD after 4 years and over 80% graduate after 5 years however, these results differ by school board.
- Over half of Grey Bruce youth aged 10-17 say that they plan to move away from this area after school is completed.
- Educational opportunities for work, career and skill development are only being used by less than a quarter of residents. Many find them to be expensive and held at inconvenient times.



Summary of other findings: Employment

- Grey Bruce has low unemployment rates which means that there are fewer available workers looking for work in the region. In other words, the labour resources are very scarce and in demand.
- In Grey Bruce, the working population is experiencing a serious aging issue. There is an urgent need for future qualified workers to replace retiring experienced workers.
- Decreases in labour force full-time and part-time jobs in the region were mainly driven by the loss of jobs that came from a significant shedding of full-time jobs that could not be off-set by part-time hiring. Thus, increasing full-time work opportunities remains an issue in the region. A majority of employers anticipate hiring in the next year.
- In the Grey Bruce region, there remains a loss of the 15-24 age cohort. A net loss in this age group is not unusual for the area as it has few local post-secondary institutions. The issue that remains is how to motivate them to come back and work in the area after graduation.
- Both counties have experienced decreases in the number of total overall businesses as well as owneroperated businesses.
- The top 5 hard to fill jobs in the region are Managers/ Directors/Supervisors, Chefs/Cooks, Labourers, Servers/ Bartenders and Drivers (including AZ).
- Locally, employers continue having challenges matching skilled, qualified workers to the jobs that are available.
- Approximately 70% agree that their current occupational position adequately reflects their education and training.
- Although 75% of employed workers have one job, many others work at 2 or more jobs.
- Two-thirds feel that their opportunities at work are adequate.
- Approximately 14% felt that their job security was poor.

5 Emotional Violence, Bullying and Harassment

The description of this category includes:

- Emotional violence, bullying and/or harassment in homes
- Emotional violence, bullying and/or harassment in schools
- Emotional violence, bullying and/or harassment in workplaces
- Emotional violence, bullying and/or harassment in businesses and other public spaces
- Emotional violence, bullying and/or harassment in neighborhoods and communities

Below you will find some key Education and Employment indicators gathered from local organizations that Action Tables could use to monitor progress/improvements. Please note that some indicators may be included in more than one section due to categories not being mutually exclusive (e.g., Crime Prevention, Community Belonging, Child Development). For more information on the indicators that follow, please use the link provided for the source report in the third column, where available.

Indicator	Baseline (most recent findings)	Year, source, level of geography, location
Top reasons why employees have quit jobs	Experienced harassment or bullying – 37%	2018; Four County Market Labour Board Plan, 2020; 2018 Employee Survey; Grey, Bruce, Huron, Perth
Emergency medical care for:		April 2019-March 2020 (vs 2018- 2019), Violence Prevention Grey
Acute Sexual Assaults	GB – 30 (increase)	Bruce, Grey Bruce
Domestic Violence	GB – 9 (increase)	
Pediatric Sexual Assaults	GB – 8 (increase)	
Incidents reported to police:		April 2019-March 2020 (vs 2018-
		2019), Violence Prevention Grey
Domestic violence	GB – 791 (decrease)	Bruce, Grey Bruce
Sexual violence	GB – 237 (increase)	
Human trafficking	GB – 13 (increase)	
% of cases opened for children	GB – 19% (same)	April 2019-March 2020 (vs 2018-
who were exposed to domestic		2019), Violence Prevention Grey
violence		Bruce, Grey Bruce

Indicator	Baseline (most recent findings)	Year, source, level of geography, location
% of cases opened for children who were exposed to domestic violence	GB – 19% (same)	April 2019-March 2020 (vs 2018- 2019), Violence Prevention Grey Bruce, Grey Bruce
Women, children in shelter Women turned away from shelter due to shortage of beds	GB – 313 (increase) GB – 161 (decrease)	April 2019-March 2020 (vs 2018- 2019), Violence Prevention Grey Bruce, Grey Bruce
Violence against women related calls attended by victim services for: Domestic violence Sexual assault Human trafficking	341 (increase) 141 (increase) 17 (increase)	April 2019-March 2020 (vs 2018- 2019), Violence Prevention Grey Bruce, Grey Bruce
Violence against women shelter crisis/Helpline calls	GB – 11,836 (increase)	April 2019-March 2020 (vs 2018- 2019), Violence Prevention Grey Bruce, Grey Bruce
Counseling through violence against women organizations Partner assault response program completions	GB – 1,065 (increase) GB – Men 100 (decrease) GB – Women 28 (increase)	April 2019-March 2020 (vs 2018- 2019), Violence Prevention Grey Bruce, Grey Bruce
OPP Grey County+	Utter threats (all) – 91 (increase) Indecent/harassing communications – 16 (increase) Criminal harassment – 43 (decrease) Family dispute – 277 (increase) Domestic disturbance – 414 (increase) Neighbour dispute – 249 (increase)	2019 (vs 2018), CFS Billing Summary Report, Grey County (Grey Highlands, Meaford, Blue Mountains, Chatsworth, Georgian Bluffs, Southgate)
OPP Bruce County+	Utter threats (all) – 96 (increase) Indecent/harassing communications – 9 (decrease) Criminal harassment – 45 (decrease) Family dispute – 341 (increase) Domestic disturbance – 468 (increase) Neighbour dispute – 278 (increase)	2019 (vs 2018), CFS Billing Summary Report, Bruce County County (Nothern Bruce Peninsula, Arran-Elderslie, Brockton, Kincardine, South Bruce, South Bruce Peninsula, Huron-Kinloss)
Owen Sound Police Services+	Total violent crimes – 623 (increase) Uttering threats – 158 (increase) Threatening/harassing communications – 26 Criminal harassment – 106 (increase) Neighbour dispute – 170 (increase)	2018-2019, OSPS Crime Statistics, Owen Sound
Hanover Police Services+	Threats – 35 (increase) Domestic dispute – 54 (decrease) Family dispute – 63 (increase) Harassment – 38 (increase) Neighbour dispute – 18 (decrease)	2019, 2012 to 2019 HPS Calls for service, Hanover

Indicator	Baseline (most recent findings)	Year, source, level of geography, location
Hanover Police Services+	Threats – 35 (increase) Domestic dispute – 54 (decrease) Family dispute – 63 (increase) Harassment – 38 (increase) Neighbour dispute – 18 (decrease)	2019, 2012 to 2019 HPS Calls for service, Hanover
West Grey Police Services+	Threats – 23 (increase) Domestic dispute – 41 (decrease) Family dispute – 73 (increase) Harassment – 30 (decrease) Neighbour dispute – 34 (decrease)	2019, 2018-2019 WGPS Activity Report, West Grey
Saugeen Shores Police Services+	Utter threats to person – 36 (higher) Criminal harassment – 29 (higher)	2019, 2018-2019 SSPS Crime Stats-Annual Report, Saugeen Shores
Criminal Courts Owen Sound	Uttering threats – 104 Criminal harassment – 10	2019, Criminal Courts - cases received (pg 66)
Criminal Courts Walkerton	Uttering threats – 65 Criminal harassment – 25	2019, Criminal Courts - cases received (pg 66)
Grades 7-12 students – % reporting being very or somewhat worried about being harmed or threatened at school	13.9% Western region (ON 13%, ns)	2017 Ontario Student Drug Use and Mental Health Survey
Grades 7-12 students – % reporting being bullied (in any way) at school since September, 2017 OSDUHS	25.3% Western region (ON 21%, ns)	2017 Ontario Student Drug Use and Mental Health Survey
Grades 7-12 students – % reporting being cyberbullied at least once in the past year, 2017 OSDUHS	23.8% Western region (ON 20.5%, ns)	<u>2017 Ontario Student Drug</u> <u>Use and Mental Health</u> <u>Survey</u>
Teens reporting that they have adults they can get help/ support - % agree	Teens (10-17) feel they can speak to their family for emotional help or support when they need it –76% Teens feel they can speak to adults in their community for emotional help or support when they need it – 59%	2018, Community Foundation of Grey Bruce Youth Vital Signs Focused Report, 2019 (from We C.A.R.E. (2018). Executive Report: Research into the Root Causes of Youth Suicide in Grey and Bruce Counties), Grey Bruce

+ Note: OPP and other police service stats are not comparable because they are from different systems that report using different categories.

Community Perceptions of Emotional Violence, Bullying and Harassment

Question 24 in the community engagement survey asked: "What are the top areas where you feel improvements are needed to increase safety and well-being in your community? Rate them in order of importance with 1 being most important and 11 being least important."

Emotional Violence, Bullying and Harassment category in the top 3 areas of importance by 22% of survey respondents (BC 24%, GC 22%). When asked which areas were of particular concern in this category: emotional violence, bullying and/or harassment in schools; emotional violence, bullying and/or harassment in neighbourhoods and communities followed by emotional violence, bullying and/or harassment in homes. Several comments in the survey mentioned specific concerns about on-line social media bullying.



Action Areas for Consideration

Summary of findings:

By monitoring the indicators above, changes + or - can be detected. It will be prudent to let members of the community as well as community partners know what actions are being taken to reduce violence of all kinds in this community. Organizations or committees taking action within this category are encouraged to consider strategies to improve student safety while at school by combatting bullying and cyber bullying among students. As well, there need to be community-based activities to increase awareness of domestic violence and disputes between residents in the community with hopes of reducing incidents.

- Violence against women statistics continue to show increasing incidents resulting in stretched resources for shelters, supportive programming and upstream prevention programs.
- Nearly 25% of students in the region experienced bullying and/or cyber bullying at least once in the past year. Just over 10% reported about being worried about being harmed or threatened while at school.
- Nearly all police services in the region reported increases in threats, disputes and family/domestic disturbances.

Healthy Child Development

The description of this category includes:

- Availability of leisure activities for children
- Access to leisure activities for children
- Affordability of leisure activities for children
- Availability of childcare
- Access to childcare
- Affordability of childcare
- Positive role models
- Positive peer groups
- Stable and nurturing home environments
- Availability of social support services for children
- Access to social support services for children
- Coordination between social support services for children in the community

Below you will find some key Healthy Child Development indicators gathered from local organizations that Action Tables could use to monitor progress/improvements. Please note that some indicators may be included in more than one section (e.g., Education, Mental Health) due to categories not being mutually exclusive. For Youth Crime, see the Crime Prevention police and court data. For more information on the indicators that follow, please use the link provided for the source report in the third column, where available.

Indicator	Baseline (most recent findings)	Year, source, level of geography, location	
% population 0-19 years old^	ON – 22.5%	2016, 2016 Canadian Census,	
	GB – 20.5%	by County & municipality	
	GC – 20.3%	(breakdowns also available	
	BC – 20.8%	for 0-4, 5-9, 10-14, 15-19) ,	
	Highest in Southgate (27%), Arran-Elderslie (25%), South Bruce (25%) and Huron-Kinloss (24%)	<u>GBHU Health Stats</u>	
Low Income Measures - After Tax	ON- 18.4%	2016 (based on 2015 income	
(LIM-AT)	GB – 19.2%	reference), 2016 Canadian	
% of children living in low income	GC – 20%	Census, by County &	
(0-17 years)^	BC – 7.9%	municipality (breakdown	
	Highest in Huron-Kinloss (29.3%), Chatsworth	also available 0-5),	
	(28.4%), Owen Sound (25%), Southgate (24.9%), Arran-Elderslie (24.8%)	<u>GBHU Health Stats</u>	
Family Characteristics of Children	ON – 19%	2016, 2016 Canadian Census,	
(0-14) - % of Children in lone-parent	GB – 16.8%	by County & municipality,	
families^	GC- 17.9%	GBHU Health Stats	
	BC – 15.3%		

Indicator	Baseline (most recent findings)	Year, source, level of geography, location
% of children and youth aged 17 and under by Household Food Security Status, Grey Bruce	Household Food Security Status Secure – 79.9% Insecure – 20.9%	2017, Canadian Community Health Survey (CCHS) 2016-17, Grey Bruce Health Unit, Grey Bruce
Child Care wait lists	BC – 2019 Q4 – 1,052 GC – 2019 Q4 – 1,531	2019, Bruce County & Grey County Social Services; personal communications
YMCA Child Care, total	1,106 Before & after care – 802 Early learning centre – 304	2018-19, YMCA of Grey Bruce Annual Report, Grey Bruce
YMCA Health Fitness & Aquatics – # children, teens	2,505	2018-19, YMCA of Grey Bruce Annual Report, Grey Bruce
YMCA Day Camps – # days aged 4-12	8,330 days	2018-19, YMCA of Grey Bruce Annual Report, Grey Bruce
EQAO Results – four and five-year graduation rates - % of students receiving OSSD within four years (five years)	ON – 81% (87%) BGCDSB – 84% (90%) BWDSB – 67% (82%) CSDC Providence – 93% (96%)	2018-19, EQAO School Board Progress Reports, GB School Boards
Plans of Grey Bruce youth aged 10 to 17 – where to live after schooling completed?	Live in Grey Bruce – 24.8% Move away from Grey Bruce – 53% Unsure – 22.2%	As cited in 2018, Community Foundation Youth Vital Signs Focus Report 2018: We C.A.R.E. (2018). Resources and Support for Mental Health in Grey Bruce: 2017 Survey Results. The Grey Bruce We C.A.R.E. Project.
Bruce County Childcare Centres – # of centres (total spaces)	For profit – 8 (285) Not-for-profit – 28 (1,471) Licensed – 36 (1,756) Home child care agencies/approved homes – 51	2018-19, Bruce County Licensed Child Care Data Profile, Bruce County
Grey County Childcare Centres – # of centres (total spaces)	For profit – 14 (543) Not-for-profit – 31 (1,908) Licensed – 45 (2,451) Home child care agencies/approved homes – 51	2018-19, Grey County Licensed Child Care Data Profile, Grey County
Number of unique children served in the Special Needs Resource (SNR) Program (0-12 yrs)	GC – 1,556 BC – 218	2018, Bruce County Child Care & Early Years Service System Plan and Grey County persona communication, Bruce & Grey County
Bruce County EarlyON Child & Family Centres	16 – locations 8,695 – children visits 6,363 – parent/caregiver visits 375 – professionals in workshops	2018, Bruce County Child Care & Early Years Service System Plan, Bruce County
Grey County EarlyON Child & Family Centres	16 – locations 21,200 – children visits 13,241 – parent/caregiver visits 238 – professional education session	2018, Grey County personal communication, Grey County

Indicator	Baseline (most recent findings)	Year, source, level of geography, location
Median daily cost of child care – rates per day Bruce County (ON)	Infant – \$45 (\$65.71) Toddler – \$42 (\$53) Preschool – \$38.50 (\$46.85)	2018, Bruce County Child Care & Early Years Service System Plan, Bruce County
Median daily cost of child care – rates per day Grey County (ON)	Infant – \$42 (\$66) Toddler – \$40 (\$53) Preschool – \$38 (\$47)	2018, Grey County personal communication, Grey County
Child Care Fee Subsidy Funds delivered	GC – \$3,542,660.00 BC – \$1,485,889.04	2018, Bruce County Child Care & Early Years Service System Plan and Grey County Child Care Plan, Bruce County & Grey County
# of referrals resulting in investigation	2019-2020 – 1,249 2018-2019 – 1,246	2018-2020, Bruce Grey Child & Family Services, Bruce and Grey counties
# of families served ongoing services	2019-2020 – 696 2018-2019 – 705	2018-2020, Bruce Grey Child & Family Services, Bruce and Grey counties
# of children served ongoing services	2019-2020 – 1,529 2018-2019 – 1,552	2018-2020, Bruce Grey Child & Family Services, Bruce and Grey counties
% of children (0-17) placed in family-based setting	2017-18 – 95% 2016-17 – 90%	2018-2020, Bruce Grey Child & Family Services, Bruce and Grey counties
% of children (0-17) that remained with primary caregiver while receiving on-going services	2019-2020 – 80.6% 2018-2019 – 81.8%	2018-2020, Bruce Grey Child & Family Services, Bruce and Grey counties
Monthly average # of children in care (0-17 years old)	2019-2020 – 118 2018-2019 – 110	2018-2020, Bruce Grey Child & Family Services, Bruce and Grey counties
% of cases opened for children who were exposed to domestic violence	GB – 19% (same)	April 2019-March 2020 (vs 2018-2019), Violence Prevention Grey Bruce, Grey Bruce
Women, children in shelter Women turned away from shelter due to shortage of beds	GB – 313 (increase) GB – 161 (decrease)	April 2019-March 2020 (vs 2018-2019), Violence Prevention Grey Bruce, Grey Bruce
Percent of infants born to parents/ partner with history of mental illness (depression, anxiety, or other mental illness)	GBHU – 30.6% (significantly higher than ON; increasing) ON – 19.1%	2019, HBHC Post-partum Screens, Grey Bruce, <u>Public</u> <u>Health Ontario Snapshots –</u> <u>Healthy Child Developmen</u> t
Percent of infants with parents/ partner who have been involved with Child Protection Services as a parent	GBHU – 7.1% (significantly higher than ON; stable) ON – 3.4%	2019, HBHC Post-partum Screens, Grey Bruce, <u>Public</u> <u>Health Ontario Snapshots -</u> <u>Healthy Child Developmen</u>

Indicator	Baseline (most recent findings)			Year, source, level of geography, location	
Percent of infants with families who have concerns about money to pay for housing/rent and family's food, clothing, utilities and other basic necessities	GBHU – 4.5% (not significantly different than ON; stable) ON – 3.7%			2019, HBHC Post-partum Screens, Grey Bruce, <u>Public</u> <u>Health Ontario Snapshots –</u> <u>Healthy Child Development</u>	
Early Development Instrument (EDI) – % of SK children vulnerable on Physical Health & Well-being domain	ON – 16.3% GC – 20.4% BC – 22.8%	6			2017-2018, EDI Report, Bruce & Grey Counties
Early Development Instrument (EDI) – % of SK children vulnerable on Social Competence domain	ON – 9.9% GC – 11.1% BC – 6.5%				2017-2018, EDI Report, Bruce & Grey Counties
Early Development Instrument (EDI) – % of SK children vulnerable on Emotional Maturity domain	ON – 11.39 GC – 14.7% BC – 6.7%				2017-2018, EDI Report, Bruce & Grey Counties
Early Development Instrument (EDI) - % of SK children vulnerable on Language & Cognitive Development domain	ON - 7.5% GC - 8% BC - 4.7%				2017-2018, EDI Report, Bruce & Grey Counties
Early Development Instrument (EDI) - % of SK children vulnerable on Communication Skills & General Knowledge domain	ON – 10% GC – 7.9% BC – 6.5%				2017-2018, EDI Report, Bruce & Grey Counties
Early Development Instrument (EDI) - % of SK children vulnerable on at least one & at least two domains	ON BC GC	<u>1</u> 29.6% 29.7% 31%	<u>2</u> 13.9% 9.8% 16.3%		2017-2018, EDI Report, Bruce & Grey Counties
% of teens (12-17) getting 8 to 10 hours of sleep	GB – 59.9%	6 (similar to	ON)		2015-16, CCHS, Grey Bruce, GBHU Health Stats
% of teens (12-17) engaging in 15+ hours of screen time per week during leisure time	GB – 59.1%	o (similar to	ON)		2015-16, CCHS, Grey Bruce, GBHU Health Stats
Fresh ideas	55% of respondents from non-profit agencies feel young people bring fresh new ideas to the Board Room table yet: 76% of key leadership position holders are 50 years and older		2019, Community Foundation Grey Bruce Vital Focus On Youth Report (2019), Grey Bruce		
Top 3 leading causes of death – 15-24 year olds	Motor vehicle collisions (higher than ON) Suicide Other – too low to report			ON)	2008-12, Grey Bruce Health Unit, <u>GBHU Health Stats</u> , Grey Bruce
% residents providing unpaid care to any children	GB – 20.8% GC – 20.9% BC – 20.7%			2018, Canadian Index of Wellbeing, overall & by count <u>y</u> <u>GBHU Health Stats reports</u>	
Residents' perceptions of the adequacy of supply of child care in the community – % adequate (note – most don't know)	GB – 16.6% GC – 18.8% BC – 14.5%			2018, Canadian Index of Wellbeing, overall & by county <u>GBHU Health Stats reports</u>	
United Way Backpack Program	children i		ks distributed to	school-aged	2005 - 2019, United Way of Bruce Grey, GB region; personal communication

^ Note: Census reports for Grey Bruce do not include data from the 2 First Nations communities due to very low response rates.

Section 5 | Bruce & Grey CSWBP Indicator Report



HEALTHY CHILD DEVELOPMENT

Community Perceptions of Healthy Child Development

Question 24 in the community engagement survey asked: "What are the top areas where you feel improvements are needed to increase safety and well-being in your community? Rate them in order of importance with 1 being most important and 11 being least important."

Healthy Child Development category ranked in the top 3 areas of importance by 14% of survey respondents (BC 15%, GC 13%). When asked which areas were of particular concern in this category affordability of leisure activities for children, stable and nurturing home environments and positive role models were the top areas of concern. Several comments in the survey mentioned concern about the need for more safe places in the community for kids to hangout, more supports for parents, shorter wait lists and better access to more leisure activities.

Action Areas for Consideration

By monitoring the indicators above, changes + or - can be detected. It will be prudent to let members of the community as well as community partners know what actions are being taken to improve/reduce child development challenges. Organizations or committees taking action within this category are encouraged to consider enriched opportunities for early learning and support for families that are disadvantaged. By focusing on the long-range goal of creating more resilient youth, it is hoped that those who leave the community for further education will eventually want to return to the area to raise their own families.

Summary of findings:

- Approximately 20% of the GB population are 0-19.
- In Grey Bruce, nearly 25% of children (0-17 years) live in low-income households, many are single-parent led and many experience food insecurity.
- Median child care rates per day are approximately \$10-20 lower than the provincial rates. Throughout the entire Grey Bruce region, there are only 71 licensed childcare centres with 4,207 spaces. Each county has lengthy waitlists for childcare.
- There are 32 EarlyON child and family centres providing resources for parents and their children as well as professional development opportunities.
- Approximately 30% of SK children in Grey Bruce are vulnerable on at least 1 domain on the EDI tool.
- EQAO results show that for most categories across all

3 school boards, students in Grey Bruce schools are mostly meeting or surpassing provincial averages. The majority of students achieve OSSD after 4 years and over 80% graduate after 5 years however, these results differ by school board.

- Each year, the United Way provides more than 2,500 backpacks to school-aged children in Grey Bruce and the need has been increasing each year.
- Over 50% of Grey Bruce youth aged 10 to 17 say that they plan to move away from this area after school is completed.
- For young adults (15-24 years), the top 2 leading causes of death are largely preventable motor vehicle collisions (higher than ON) and suicide.

Housing and Homelessness

The description of this category includes:

- Access to housing
- Availability of housing
- Affordability of housing
- Safety of housing
- Quality of housing
- Homelessness

Below you will find some key Housing and Homelessness indicators gathered from local organizations that Action Tables could use to monitor progress/improvements. Please note that some indicators may be included in more than one section due to categories not being mutually exclusive (e.g., Poverty and Income, Education and Employment). For more information on the indicators that follow, please use the link provided for the source report in the third column, where available.

Indicator	Baseline (most recent findings)	Year, source, level of geography, location	
Home ownership – % owned^	Canada – 67.8%	2016, 2016 Canadian Census,	
	ON – 69.7%	by County & municipality,	
	GC – 76.7%	GBHU Health Stats	
	BC – 81.5%		
	Lowest in Owen Sound (57.1%), Hanover		
	(61.6%), Brockton (77.7%)		
Home ownership – % rented^	Canada – 31.8%	2016, 2016 Canadian Census,	
	ON – 30.2%	by County & municipality,	
	GC – 23.3%	GBHU Health Stats	
	BC – 18.3%		
Subsidized Housing – % of tenant	Canada – 13%	2016, 2016 Canadian Census,	
households in Subsidized housing	ON – 15%	by County & municipality,	
(includes rent geared to income, social	GC – 17.9%	GBHU Health Stats	
housing, public housing, government-	BC – 16.3%		
assisted housing, non-profit housing, rent	Highest in Owen Sound (23.7%), Meaford		
supplements and housing allowances)^	(23.3%), Kincardine (22.3%), Southgate (20.3%)		



Indicator	Baseline (most recent findings)	Year, source, level of geography, location
Housing affordability – % owned with unaffordable shelter costs (30% or more of the households' total 2015 income is spent on shelter)^	Canada – 16.6% ON – 19.8% GC – 17.4% BC – 14.8% Highest in Chatsworth (25.5%), Southgate (24.0%), Grey Highlands (20.7%)	2016, 2016 Canadian Census, by County & municipality, <u>GBHU Health Stats</u>
Median (50% mark) of monthly shelter costs by owned dwelling^	Canada – \$1,130% ON – \$1,299 GC – \$959 BC – \$860 Highest in Southgate (\$1153), Chatsworth (\$1035), Arran-Elderslie (\$1001)	2016, 2016 Canadian Census, by County & municipality, <u>GBHU Health Stats</u>
Median (50% mark) of owner estimated value of dwelling if sold^	Canada – \$341,556 ON – \$400,496 GC – \$279,423 BC – \$274,563 Highest in The Blue Mountains (\$500,370), Saugeen Shores (\$323,826), Grey Highlands (\$313,565)	2016, 2016 Canadian Census, by County & municipality, GBHU Health Stats
Median (50% mark) of monthly shelter costs by rented dwelling^	Canada – \$910 ON – \$1,045 GC – \$829 BC – \$836 Highest in The Blue Mountains (\$1004), Kincardine (\$928), Chatsworth (\$918)	2016, 2016 Canadian Census, by County & municipality, <u>GBHU Health Stats</u>
Housing adequacy – % living in a dwelling in need of major repairs^	Canada – 6.5% ON – 6.1% GC – 7.0% BC – 7.0% Highest in Southgate (9.2%), Chatsworth (9.0%), Owen Sound (7.9%)	2016, 2016 Canadian Census, by County & municipality, <u>GBHU Health Stats</u>
Core housing need – % of identified households not living in, and not able to access, acceptable housing (crowded, unaffordable, in need of major repairs)^	Canada – 12.7% ON – 15.3% GC – 11.4% BC– 9.3% Highest in Owen Sound (17.7%), Hanover (15.5%), Arran-Elderslie (14.4%)	2016, 2016 Canadian Census, by County, <u>GBHU Health Stats</u>



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Indicator	Baseline (most rece	ent findings)		Year, source, level of geography, location
% of private dwellings occupied by usual residents (regular, non-seasonal or non-vacation housing)^	ON – 92.3% GC – 83.2% BC – 70.1% Lowest (more seaso Peninsula (38.1%), T South Bruce Penins	he Blue Mounta		2016, 2016 Canadian Census, by County, <u>GBHU Health Stats</u>
Rental vacancy rates 2017 (all bedrooms)	ON – 1.6% GC – 2.1% BC – 1.4%			2013-2017, Grey County Affordable Housing Task Force Statistical Summary, by County & Municipality; personal communication
Housing waitlist (for housing)	BC – As of Mar 2020 As of Mar 2019 GC – As of Mar 2020 As of Mar 2019	- 489 - 1,040		Q2 2020 & 2019, personal communications from Bruce and Grey Social Services
Average rent by bedroom count	Bach 1 2 3	<u>BC</u> - \$831 \$1,049 \$1,104	<u>GC</u> \$662 \$808 \$928 \$1,029	2019, Real Property Solutions House Price Index, by County
Average resale price	GC – \$406,397 BC – \$367,924			2019, Real Property Solutions House Price Index, by County
211 Housing # of calls # of needs identified # of referrals	Increase in referrals 532 631 856	over previous y	rear	2019, 211 2019 Report and <u>211 Dashboard</u> , Grey Bruce (available by county and municipality)
Homeless enumeration (one week)	GC – 33 BC – 17			2018, Rural Homelessness <u>Enumeration</u> , Bruce County and Grey County
The Community Homelessness Prevention Initiative – # clients served	5,113 (4246 adults, 8 2,519 number of nig provided – increase	hts of emergen		2019 (vs 2017 & 2018), YMCA Grey Bruce, personal communication; Grey Bruce

^ Note: Census reports for Grey Bruce do not include data from the 2 First Nations communities due to very low response rates; some housing stats do not include farm dwellings



HOUSING AND HOMELESSNESS

Community Perceptions of Housing and Homelessness

Question 24 in the community engagement survey asked: "What are the top areas where you feel improvements are needed to increase safety and well-being in your community? Rate them in order of importance with 1 being most important and 11 being least important."

This category ranked fouth highest overall in the community engagement survey (overall, by Bruce County, by Grey County). It was ranked in the top 3 areas of importance by 29% of respondents overall but especially in Owen Sound, North Bruce Peninsula and Kincardine. When asked which areas were of particular concern in this category, affordability of housing, availability of housing, access to housing followed by homelessness. Several comments in the survey mentioned concern about the lack of affordable housing in communities, the lack of variety (e.g., smaller, more affordable homes), need for more education of tenants and landlords on rights as well as concerns that many folks stay in unfit, unsafe housing because there is no other options available to them.

Action Areas for Consideration

By monitoring the indicators above, changes + or - can be detected. It will be prudent to let members of the community as well as community partners know what actions are being taken to improve housing and reduce homelessness challenges. The Action Table for this category will need to focus on cross-sectoral initiatives that monitor the current and future housing needs of the various communities within the region with a vision of housing that fits a variety of housing needs for safe, accessible and affordable housing. Some other findings of note:

Summary of findings:

- Compared to ON & CA this region has more owned dwellings and fewer rental dwellings.
- Some areas have more subsidized housing than ON and Seasonal housing is high in North Bruce Peninsula, Blue CA (Owen Sound, Meaford, Kincardine, Southgate).
- When looking at those people needing to spend >30% of their income on shelter (the target for affordable housing), this region is lower than ON in general, but higher than ON in Chatsworth, Southgate and Grey Highlands.
- Core Housing need (% in overcrowded, unaffordable, in need of repairs) – this region is lower than ON in general, but higher than ON in Owen Sound, Hanover.
- Housing wait lists are higher than they were in the previous year for both counties.

- Average housing prices are increasing dramatically, however are lower than ON.
- Mountains, South Bruce Peninsula.
- Very low rental vacancy rates in the region, however these are similar to ON.
- Housing Wait Lists are increasing as are calls to 211 for housing issues in our region.
- There is an increased need for homelessness prevention initiatives in the region as housing needs increase.

8 Mental Health

The description of this category includes:

- Mental health conditions (such as depression, anxiety, bipolar disorder)
- Emotional or psychological trauma
- Suicide
- Access to mental health services
- Availability of mental health services
- Affordability of mental health services
- Coordination between mental health services in the community

Below you will find some key Mental Health indicators gathered from local organizations that Action Tables could use to monitor progress/improvements. Please note that some indicators may be included in more than one section due to categories not being mutually exclusive (e.g., Addictions/Substance Use, Physical Health). For more information on the indicators that follow, please use the link provided for the source report in the third column, where available.

Indicator	Baseline (most recent findings)	Year, source, level of geography, location
Self-rated mental health – excellent/very good	GB – 70% (same as ON rate) GB – 50-64 year olds – 60% (significantly lower than ON rate)	2015-16, CCHS, Grey Bruce, GBHU Health Stats
Self-assessed mental health – excellent/very good	GB – 55.9% GC – 58% BC – 53.9%	2018, Canadian Index of Wellbeing, overall & by county, <u>GBHU Health Stats reports</u>
Level of satisfaction (% satisfied) with "my mental wellbeing"	GB – 73.2% GC – 75% BC – 71.5%	2018, Canadian Index of Wellbeing, overall & by county, <u>GBHU Health Stats reports</u>
Life stress – find life quite a bit or extremely stressful	GB – 20% (same as ON) GB – 50-64 year olds – 33% (significantly lower than ON rate)	2015-16, CCHS, Grey Bruce, GBHU Health Stats
Contact with a mental health professional past year	GB – 15% (same as ON)	2015-16, CCHS, Grey Bruce, GBHU Health Stats

Indicator	Baseline (most recent findings)	Year, source, level of geography, location
Self-harm & suicide	GB avg. yearly ED visits – 170 GB avg. yearly hospitalizations – 100 GB avg. yearly deaths – 18	2008-17, Vital Statistics, Grey Bruce, <u>Self-Harm & Other</u> Intentional Injuries in Grey
	Overall, comparable to ON rates except: *Rates of ED visits for self-harm are increasing among young females locally and provincially. The local rate tripled between 2011 and 2017.	<u>Bruce (2019)</u>
	GB females 15-24 year olds – higher hospitalizations than ON	
	GB males 15-24 year olds – higher ED visit rate than ON	
	GB males 25-44 year olds – higher hospitalizations and deaths by suicide than ON	
Frequent ED visits (+4/yr) for mental health and addictions	2016/17 – 8.4% (versus 9% ON) 2017/18 – 8.7% (versus 9.5% ON)	Fiscal years 2016/17 & 2017/18, Grey Bruce Ontario Health Teams planning document, Ontario Health (SWLHIN)
Repeat ED visits within 30 days for mental health and addictions	2016/17 – 14.9-16.6% (23.6-25.4% ON) 2017/18 – 18.3-23% (24.6-25.4% ON)	Fiscal years 2016/17 & 2017/18, Grey Bruce Ontario Health Teams planning document, Ontario Health (SWLHIN)
Repeat unscheduled emergency visits within 30 days for mental health conditions	GB – 20.2% (increase) GC – 20.5% (increase) BC – 17.8% (increase)	2018/19 vs. 2017/18, Grey Bruce, NACRS Ontario Min of Health (July 2, 2020), Ontario Health (SWLHIN)
Mental health and substance abuse hospitalization rate (per 10,000 population)	GB – 14.2 (same) GC – 17.3 (increase) BC – 7.5 (decrease)	2018/19 vs. 2017/18, Grey Bruce, NACRS Ontario Min of Health (July 2, 2020), Ontario Health (SWLHIN)
Leading cause of death – suicide	For 15-24 year olds – 2 nd leading cause of death (same as ON rate) For 25-44 year olds – 1 st leading cause of death (significantly higher than ON rate)	2003-2012, Leading Causes of Death, Grey Bruce, <u>GBHU</u> Health Stats
Health care events rank – mental health signs & symptoms (Q82)	34 (versus 28 ON out of 226 grouper conditions)	Fiscal year 2017/18, Grey Bruce Ontario Health Teams planning document, Ontario Health (SWLHIN)
Health care events rank – neurotic/ anxiety/OCD (Q11)	15 (versus 11 ON out of 226 grouper conditions)	Fiscal year 2017/18, Grey Bruce Ontario Health Teams planning document, Ontario Health (SWLHIN)
EMS behaviour/psychiatric (45 and 45.1)	GC – 455 BC – 223 (increasing)	2019, EMS, by county

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Indicator	Baseline (most recent findings)	Year, source, level of geography, location
Barriers to access to mental health and addictions services	Increasing volume of mental health and addiction issues/visits in the Emergency Department –are complex, require specialized medical & nursing support, assessment & treatment can be difficult to access consistently across Grey and Bruce	2019, Grey Bruce, Rural Health and Wellness Service User Survey Results, from report "Rural Health and Wellness: A Multi-System, Collaborative Approach to Care in Grey and
	Limited inpatient mental health beds, alternate level of care days for complex service users	Bruce"
	Lack of suitable placement options for those requiring supportive environments, especially supervised residential settings	
	Challenges to providing outreach across such a large catchment area	
	Access to tertiary specialized mental health & addictions services is lowest when compared to other sub-regions across the SW LHIN	
	Demand for specialized pediatric/youth services continues to grow as several communities in the region are experiencing an influx of young families	
Canadian Mental Health Association – Mental Health Service Treatment	Total individuals serves – 6,093 Total visits – 30,272 Urgent response team – 996 Counselling & treatment – 642 Short term residential crisis support beds – 4 Peer/self help initiatives – 89 Support within housing – 117 Health promo & education – 1,192 Information & referral – 2,248	2019-2020 (fiscal Year), CMHA Grey Bruce personal correspondence, Grey Bruce
# of individuals served in clinical programs at Keystone Child, Youth & Family Services	1,398	2019-2020, Keystone Child, Youth and Family Services, personal communication
% of infants born to parent/partner with history of mental illness	GBHU – 30.6% (significantly higher than ON; increasing) ON – 19.1%	2019, HBHC Post-partum Screens, Grey Bruce, <u>Public</u> <u>Health Ontario Snapshots –</u> Healthy Child Development
% of women who gave birth that reported any mental health concern during pregnancy	GBHU – 32.3% (significantly higher than ON; increasing) ON – 19.2%	2018, BORN Registry, Grey Bruce, Public Health Ontario <u>Snapshots – Maternal</u> <u>Health Snapshot</u>
211 Mental Health & Addictions # of calls # of needs identified # of referrals	Increased over previous years 384 447 763	2019, 211 2019 Report and <u>211 Dashboard</u> , Grey Bruce (available by county and municipality)

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Indicator	Baseline (most recent findings)	Year, source, level of geography, location
Individuals seen by mental health team at Bruce Grey Catholic District School Board	624	2018-present, personal communication, Bruce Grey Catholic District School Board, Grey County and Bruce County
Grades 7-12 Ontario students – self rated mental health (fair or poor)	23.2% Western region (ON 18.8%, ns; increase noted over time)	2017 Ontario Student Drug Use and Mental Health Survey
Grades 7-12 Ontario students – % of students indicate moderate to serious psychological distress in the past month	39.2 Western region (ON 39%, ns; increase noted over time)	2017 Ontario Student Drug Use and Mental Health Survey
Grades 7-12 Ontario students – % of students wanted to talk to someone about their mental health but did not know where to turn	31.7% Western region (31.2% ON, ns)	2017 Ontario Student Drug Use and Mental Health Survey
Grades 7-12 Ontario students – % of students report serious thoughts of suicide in the past year	14.8% Western region (14% ON, ns)	2017 Ontario Student Drug Use and Mental Health Survey
Youth mental health – local	1/3 of Grey Bruce youth (aged 10 to 17) indicated that their family members' problems prevented them from talking about their own problems	2018, We C.A.R.E. (2018). <u>Research into the Root</u> <u>Causes of Youth Suicide in</u> <u>Grey and Bruce Counties.</u>
	Youth identified wanting to talk to adults when they were struggling, depressed or anxious. Adults on the other hand, believed that youth would rather speak to their peers during difficult times	<u>The Grey Bruce We C.A.R.E.</u> <u>Project</u>
	76% feel they can speak to their family for emotional help or support when they need it	
	59% feel they can speak to adults in their community for emotional help or support when they need it	
	18% don't know who to ask for help with a mental health concern	
OPP Grey County+	Mental Health Act – 247 (similar) Sudden death – suicide – 3 (decrease)	2019(vs 2018), CFS Billing Summary Report, Grey County (Grey Highlands, Meaford, Blue Mountains, Chatsworth, Georgian Bluffs, Southgate)

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OPP Bruce County+	Mental Health Act – 393 (increase) Sudden death – suicide – 12 (decrease)	2019 (vs 2018), CFS Billing Summary Report, Bruce County (Northern Bruce Peninsula, Arran-Elderslie, Brockton, Kincardine, South Bruce, South Bruce Peninsula, Huron-Kinloss)
Owen Sound Police Services+	Mental Health Act – 772 (increase)	2018-2019, OSPS Crime Statistics, Owen Sound
Hanover Police Services+	Mental Health Act – 135 (decrease)	2019 (vs 2018), Hanover Police Services calls, Hanover
West Grey Police Services+	Mental Health Act – 134 (increase)	2019 (vs 2018), West Grey Police Services calls, West Grey
STAR* – Situation Table Top Risk Factors	Suspected mental health – 5	2016-2019 based on 10 meetings/cases; Owen Sound Police Services; note - multiple risk factors can be identified per case

+ Note: OPP and other police service stats are not comparable because they are from different systems that report using different categories

* STAR - A situation table that is a strategic alliance of human services, guided by common principles and processes in order to mitigate risk situations in a timely manner, usually within 24-48 hours. The term "table" highlights that it is a meeting, which convenes regularly, with police and other human service professionals from a variety of organizations. During a Situation Table, participants work together to review situations of acutely elevated risk (AER) and determine if an individual is at imminent risk of harm and victimization and then coordinate interventions to reduce them.



Community Perceptions of Mental Health

Question 24 in the community engagement survey asked: "What are the top areas where you feel improvements are needed to increase safety and well-being in your community? Rate them in order of importance with 1 being most important and 11 being least important."

The Mental Health category ranked second highest (#2) overall in the community engagement survey (overall, by Bruce County, #3 for Grey County and by 10 out of 17 municipalities). It was ranked in the top 3 areas of importance by 41% of survey respondents (BC 42%, GC 41%). When asked which areas were of particular concern in this category, availability of mental health services, access to mental health services, mental health conditions (such as depression, anxiety) and affordability of mental health services were the top areas of concerns. Several comments in the survey mentioned concern about the need for more mental health services for children, barriers like long wait times, and needing more/better crisis services.

Action Areas for Consideration

By monitoring the indicators above, changes + or - can be detected. It will be prudent to let members of the community as well as community partners know what actions are being taken to improve/reduce mental health challenges. The Action Table for this category will need to focus on cross-sectoral solutions to handle the increased mental health needs across all age groups - especially children and youth - as well as addressing the current gaps in services locally. Efforts to address underlying causes of mental health concerns, as the implementation of evidence-based prevention strategies are vital.

Summary of findings:

- Self-rated mental health indicators show that while approximately 25% of GB residents rate their Mental Health as Excellent/Very Good, approximately 20% are experiencing a lot of stress and 15% have sought help for mental health issues.
- In the past year, more than 33% of students grade 7-12 experience moderate to severe psychological distress, 14% reported serious thoughts of suicide and nearly 33% of them did not know where to turn for help.
- 33% of local youths want to talk to someone about their mental health but indicated that their family members' problems prevented them from talking about their own problems.

- Emergency department visits as well as calls to EMS and Police Services in the region have seen increases in calls for mental health concerns; 211 calls have also increased.
- Self-harm ED visit rates have tripled among young females locally (this is comparable to the province).
- GB males 25-44 years have higher hospitalizations and deaths by suicide (higher than ON).
- Suicide is the leading cause of death for 25-44 year olds (higher than ON) and is the second leading cause of death for 15-24 year olds (same as ON).

Physical Health

The description of this category includes:

- Access to health services such as a family doctor
- Availability of health services such as a family doctor
- Access to services for persons with a physical disability
- Availability of services for persons with a physical disability
- Access to exercise opportunities
- Availability of exercise opportunities
- Affordability of exercise opportunities
- Access to healthy food
- Availability of healthy food
- Affordability of healthy food

Below you will find some key Physical Health indicators gathered from local organizations that Action Tables could use to monitor progress/improvements. Please note that some indicators may be included in more than one section due to categories not being mutually exclusive (e.g., Addictions/ Substance Misuse, Poverty & Income and Mental Health). For more information on the indicators that follow, please use the link provided for the source report in the third column, where available.

Indicator	Baseline (most recent findings)	Year, source, level of geography, location
Self-rated health very good/excellent (% of residents 12+)	ON – 61% GB – 59% ns	2015-16, CCHS, Grey Bruce, GBHU infographic
	Higher for GB – 65+ (56%) compared to ON or CAN	
Physical activity – adults	ON – 57% GB – 56% ns	2015-16, CCHS, Grey Bruce, GBHU infographic
% meeting Canadian Physical Activity Guidelines	Higher for GB – 35-49 yrs (69%) compared to ON or CAN	
Physical activity – youth 12-17 years	ON – 60% GB – 64% ns	2015-16, CCHS, Grey Bruce, GBHU infographic
% meeting Canadian Physical Activity Guidelines	Higher for GB – females (77%) compared to ON or CAN	
Fruit and vegetable consumption % eating 5 or more servings per day	ON – 28% GB – 31% ns	2015-16, CCHS, Grey Bruce, GBHU infographic
Current smokers – daily or occasionally (% of residents 12+)	ON – 17% GB – 17% ns	2015-16, CCHS, Grey Bruce, GBHU infographic
% smoking daily	ON – 12% GB – 14% ns	

Indicator	Baseline (most recent findings)	Year, source, level of geography, location
Obesity – adults	CAN – 26% ON – 26% GB – 33% sign. Higher (ON, CAN)	2015-16, CCHS, Grey Bruce, GBHU infographic
	Higher for GB males (38%) compared to ON or CAN. Higher for GB 35-49 year olds (45%) compared to ON or CAN	
Overweight or obese – youth 12-17	ON – 25% GB – 28% ns	2015-16, CCHS, Grey Bruce, GBHU infographic
Hypertension (% of residents 12+)	CAN – 17% ON –18% GB – 21%	2015-16, CCHS, Grey Bruce, GBHU infographic
	GB higher than CAN	
Arthritis (% of residents 12+)	CAN – 21% ON –21% GB – 28%	2015-16, CCHS, Grey Bruce, GBHU infographic
	GB higher than ON and CAN	
Age-standardized rate of exceeding low-risk drinking guideline (for injury or chronic disease) (% of residents 12+)	GBHU – 56.5% (significantly higher; highest of all ON Health Units) ON – 44.4%	2015-16, CCHS, Grey Bruce, Public Health Ontario Snap Shots - alcohol use
Prevalence of COPD, age-standardized rate, both sexes (per 100,000) (% of residents 12+)	GBHU – 9,831.5 (significantly higher than ON) ON – 7,172.6	2018, ICES, Grey Bruce, <u>Public Health Ontario</u> <u>Snapshots - COPD</u> <u>prevalence</u>
Has a regular health care provider (% of residents 12+)	ON –90% GB – 91% ns	2015-16, CCHS, Grey Bruce, GBHU CCHS Report- Part 1
Has had contact in past 12 months a family doctor or specialist (% of residents 12+)	ON –74% GB – 69% GB lower than ON	2015-16, CCHS, Grey Bruce, GBHU CCHS Report- Part 1
Percent of infants and/or infants with mothers who do not have a designated primary care provider	GBHU – 2.4% (significantly lower than ON; stable) ON – 3.8%	2019, HBHC Post-partum Screens, Grey Bruce, <u>Public Health Ontario</u> <u>Snapshots – Healthy Chilc</u> <u>Development</u>
% of residents who rated overall quality as Very Good/Excellent	GB - 44.8% GC - 46.1% BC - 43.5%	2018, Canadian Index of Wellbeing, overall & by county, <u>GBHU Health Stats</u> <u>reports</u>
% of residents who rated overall accessibility as very good/excellent	GB – 34.6% GC – 39.7% BC – 29.6%	2018, Canadian Index of Wellbeing, overall & by county, <u>GBHU Health Stats</u> <u>reports</u>
% of residents who never "could not afford to pay for doctor prescribed medications"	GB – 91.3% GC – 91.3% BC – 91.3%	2018, Canadian Index of Wellbeing, overall & by county, <u>GBHU Health Stats</u> <u>reports</u>

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Indicator	Baseline (most recent findings)	Year, source, level of geography, location
% of residents who never "could not afford to get dental care in past year"	GB – 81.0% GC – 79.4% BC – 82.5%	2018, Canadian Index of Wellbeing, overall & by county, <u>GBHU Health Stats</u> <u>reports</u>
% of residents: Ate less because there was not enough food or money for food, at least once in past year	GB – 9.4% GC – 7.8% BC – 11%	2018, Canadian Index of Wellbeing, overall & by county, <u>GBHU Health Stats</u> <u>reports</u>
Percentage with physician visit within 7 days of discharge from Acute Care	ON – 46.3% (lower than previous year) Owen Sound satellite & GBHS-OS – 36.5% (lower than previous year)	2016/17 vs. 2017/18, Grey Bruce (Networks 5 & 59), IC/ES Population Health Indicators special tabulation for Ontario Health Team
Percentage who were able to schedule same day/next day appt. when sick	ON – 43.3% (higher than previous year) Owen Sound satellite & GBHS-OS – 27.5% (lower than previous year)	2016/17 vs. 2017/18, Grey Bruce (Networks 5 & 59), IC/ES Population Health Indicators special tabulation for Ontario Health Team
Percentage of Alternate Level of Care (ALC) Days of total days	ON –15.8% (higher than previous year) Owen Sound satellite & GBHS-OS –14.3% (higher than previous year)	2016/17 vs. 2017/18, Grey Bruce (Networks 5 & 59), IC/ES Population Health Indicators special tabulation for Ontario Health Team
30-day readmission rate as % for selected conditions	ON –16.5% (similar to previous year) Owen Sound satellite & GBHS-OS –15.8% (higher than previous year)	2016/17 vs. 2017/18, Grey Bruce (Networks 5 & 59), IC/ES Population Health Indicators special tabulation for Ontario Health Team
Hospitalizations for ambulatory care sensitive conditions (ACSC) – rate per 100,000 attributed population age 0-74	ON – 84.0 (higher than previous year) Owen Sound satellite & GBHS-OS –113.6 (lower than previous year)	2016/17 vs. 2017/18, Grey Bruce (Networks 5 & 59), IC/ES Population Health Indicators special tabulation for Ontario Health Team
Hospital stay extended until home care services or supports are ready – median ALC length of stay	ON – 7 (same as previous year) Owen Sound satellite & GBHS-OS – 6.3 (higher than previous year)	2016/17 vs. 2017/18, Grey Bruce (Networks 5 & 59), IC/ES Population Health Indicators special tabulation for Ontario Health Team
Hospitalizations for ambulatory care sensitive conditions (ACSC) – rate per 100,000 attributed population age 0-74	ON – 84 (higher than previous year) Owen Sound satellite & GBHS-OS – 113.6 (lower than previous year)	2016/17 vs. 2017/18, Grey Bruce (Networks 5 & 59), IC/ES Population Health Indicators special tabulation for Ontario Health Team
Rate of emergency visits for conditions best managed elsewhere (per 1,000 population)	GB – 14.1 (decreased) B – 20.2 (decreased) G – 9.8 (decreased)	2019/20 vs. 2018/19, Grey Bruce, NACRS Ontario Min of Health (July 2, 2020), Ontario Health (SWLHIN)

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Indicator	Baseline (most recent findings)	Year, source, level of geography, location
Low birth weight rate (< 2,500 grams) per 100 live births	ON – 7.1 Owen Sound satellite & GBHS-OS – 5.1	2017/18, Grey Bruce (Networks 5 & 59), IC/ES Population Health Indicators special tabulation for Ontario Health Team
Crude birth rate per 1,000	GBHU – 9.5 (not significantly different compared to ON; increasing) ON – 9.3	2019, CIHI, Grey Bruce, <u>Public Health Ontario</u> <u>Snapshots – Reproductive</u> <u>Health Snapshot</u>
Pregnancy rate per 1,000 women of reproductive age (15-49 years)	GBHU – 59.4 (significantly higher compared to ON; stable) ON – 49.1	2018, CIHI, Grey Bruce, <u>Public Health Ontario</u> <u>Snapshots – Reproductive</u> <u>Health Snapshot</u>
Teen (15-19) pregnancy rate per 1,000 women of reproductive age (15-49 years)	GBHU – 13.6 (not significantly different than ON; decreasing) ON – 10.7	2018, CIHI, Grey Bruce, <u>Public Health Ontario</u> <u>Snapshots – Reproductive</u> <u>Health Snapshot</u>
Percent of new mothers that smoked during pregnancy	GBHU – 10.2% (significantly higher than ON; decreasing) ON – 6.5%	2018, BORN Registry, Grey Bruce, <u>Public Health</u> <u>Ontario Snapshots –</u> <u>Maternal Health Snapshot</u>
Percent of new mothers that used alcohol during pregnancy	GBHU – 3.2% (not significantly different than ON; increasing) ON – 2.5%	2018, BORN Registry, Grey Bruce <u>, Public Health</u> Ontario Snapshots – Maternal Health Snapshot
Percent of new mothers that used drug and/or other substances during pregnancy	GBHU – 4.4% (significantly higher than ON; increasing) ON – 2.6%	2018, BORN Registry, Grey Bruce, <u>Public Health</u> <u>Ontario Snapshots –</u> <u>Maternal Health Snapshot</u>
Percent of new mothers that used alcohol or drugs/substances during pregnancy	GBHU – 6.9% (significantly higher than ON; increasing) ON – 4.7%	2018, BORN Registry, Grey Bruce, <u>Public Health</u> <u>Ontario Snapshots –</u> <u>Maternal Health Snapshot</u>
Low birth weight rate (< 2,500 grams) per 100 live births	ON – 7.1 Owen Sound satellite & GBHS-OS – 5.1	2018, BORN Registry, Grey Bruce, <u>Public Health</u> <u>Ontario Snapshots –</u> <u>Maternal Health Snapshot</u>
Barriers to access to services	Stigma Geographical location of services, lack of transportation Hours Waitlists Lack of awareness of services Difficulty navigating the system	2019, Grey Bruce, Rural Health and Wellness Service User Survey Results, from report "Rural Health and Wellness: A Multi-System, Collaborative Approach to Care in Grey and Bruce"
	Lack of stable, supportive housing	

Physicians, Nurse Practitioners, Dietician/ Nutritionist, Registered Nurse/Registered Practical Nurse, Social Worker, Mental Health/ Addiction Counsellor, Psychologist, Psychiatrist, Chiropractor, Physiotherapist, Occupational Therapist, Pharmacist, Dental Staff, Lab TechnicianUser Survey Results, from report 'Rural Health and Wellness: A Multi-System, Callaborative Approach to Care in Grey and Bruce"Primary care services80% of respondents want to receive their non-urgent care via a Primary Care team S8% of First Nation respondents would prefer aboriginal-specific primary care services S8% of respondents want to have access to service on evenings and weekends, in addition to Monday-Friday, 9-5 hours: Almost half of these want enhanced hours also want access 7 days/week2019, Grey Bruce, Rural Health and Wellness: A Multi-System, Collaborative Approach to Care in Grey and Bruce"Cost of eating wellS884 per month for a family of 4 (2 parents, two children)2018, Poverty Task Force -Cost of Eating Well Grey Bruce, GB regionUnintentional injuriesTop 3 causes: Falls Motor vehicle collisions Unintentional poisonings2007 - 2016, Grey Bruce Health Unit, GBHU Health Stats, Grey BruceDivist 90% higher than ON Hospitalization 43% higher compared to ONAll unintentional injuries in GB - ayg.29,312 EDV, 662 hospitalizations and 69 deaths	Indicator	Baseline (most recent findings)	Year, source, level of geography, location
The wait list for service is too long.User Survey Results, from The wait list for service is noo long.I have to wait too long in a waiting room before community.Imam seen.User Survey Results, from Wellness: A Multi-System, Collaborative Approach to Care in Grey and Bruce"When asked who they want to be able to see for care close to homeMore than 50% of respondents wanted to be able to see: Physicians, Murse Practitioners, Dietician/ Nutritionist, Registered Nurse/Registered Practical Nurse, Social Worker, Mental Health Addiction Counsellor, Psychologist, Psychiatrist, Chiropractor, Physiotherapist, Occupational Therapist, Pharmacist, Dental Staf, Lab2019, Grey Bruce, Bural Health and Wellness Service Care in Grey and Bruce"Primary care services80% of respondents want to receive their non-urgent care via a Primary Care team Service on evenings and weekends, in addition to Monday-Friday, 9-5 hours: Almost half of these want enhanced hours also want access to walk-in services: 24.5% want same day access for non-urgent issues, while 63% would be happy with access want access to walk-in service; Gays/week2018, Poverty Task Force -Cost of Eating Well Grey Bruce, BuralCost of eating wellTop 3 causes: Falls Motor vehicle collisions Unintentional piosionigs2007-2016, Grey Bruce Health and Nuellosystem, Well Grey Bruce Health and Wellows Autor ServiceUnintentional injuriesTop 3 causes: Falls Motor vehicle collisions Unintentional piosionigs2007-2016, Grey Bruce Health and Nuell Grey BruceDurintentional piosionigsED visits 90% higher than ON Hospitalization 43% higher compared to ON All unintentional piosonings2007-2016, Grey		The service I need is not available when I need it.	•
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Wellness: A Multi-System, Collaborative Approach to Service on evenings and weekends, in addition to Monday-Friday, 9-5 hours: Almost half of these want enhanced hours also want access 7 days/weekCollaborative Approach to Care in Grey and Bruce"65% want access to walk-in services: 24.5% want same day access for non-urgent issues, while 63% would be happy with access within 24-48 hours2018, Poverty Task Force -Cost of Eating Well Grey Bruce, GB regionCost of eating well\$884 per month for a family of 4 (2 parents, two children)2017 - 2016, Grey Bruce Health Unit, <u>GBHU Health</u> Stats, Grey Bruce Health Unit, <u>GBHU Health</u> Stats, Grey BruceUnintentional injuriesFog 3 causes: Falls Motor vehicle collisions Unintentional poisonings2007 - 2016, Grey Bruce Health Unit, <u>GBHU Health</u> Stats, Grey Bruce	Primary care services	non-urgent care via a Primary Care team 58% of First Nation respondents would prefer	Health and Wellness Service User Survey Results, from report "Rural Health and Wellness: A Multi-System, Collaborative Approach to
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Hospitalization 43% higher compared to ON All unintentional injuries in GB – avg. 29,312 EDV, 662 hospitalizations and 69 deaths	Unintentional injuries	Falls Motor vehicle collisions	Health Unit, GBHU Health
EDV, 662 hospitalizations and 69 deaths		-	
per year		· ·	

Indicator	Baseline (most recent findings)	Year, source, level of geography, location
Falls injuries	ED Visits 70% higher than ON Hospitalization 21% higher compared to ON	2007 – 2016, Grey Bruce Health Unit, <u>GBHU Health</u> <u>Stats</u> , Grey Bruce
	Highest cause of unintentional injury in GB (avg. 8,630 EDV, 743 hospitalizations and 29 deaths per year)	
Concussions injuries	GB is 2x higher than ON and higher than other mainly rural areas (increasing)	2007 – 2016, Grey Bruce Health Unit, <u>GBHU Health</u> <u>Stats</u> , Grey Bruce
	GB youth under 20 years old have the highest rates in ON	
Agricultural machinery injuries	ED visits – GB is 2x higher than other rural areas in ON	2007 – 2016, Grey Bruce Health Unit, <u>GBHU Health</u> <u>Stats</u> , Grey Bruce
	Hospitalization – GB is 2x higher than other rural areas in ON	
	High number of unintentional injuries in GB (avg. 55 EDV, 8 hospitalizations and 1 death per year)	
% of teens (12-17) getting 8 to 10 hours of sleep	GB – 59.9% (similar to ON)	2015-16, CCHS, Grey Bruce, GBHU Health Stats
% of teens (12-17) engaging in 15+ hours of screen time per week during leisure time	GB – 59.1% (similar to ON)	2015-16, CCHS, Grey Bruce, GBHU Health Stats
YMCA Fitness & Aquatics – active members	Total – 7,655 Seniors – 1,442 Adults – 3,708 Children/teens – 2,505	2018-19, YMCA Grey Bruce Annual Report, Grey Bruce



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Community Perceptions of Physical Health

Question 24 in the community engagement survey asked: "What are the top areas where you feel improvements are needed to increase safety and well-being in your community? Rate them in order of importance with 1 being most important and 11 being least important."

Physical Health category ranked in the top 3 in the community engagement survey by 11% of respondents (overall, by Bruce County, by Grey County). When asked which areas were of particular concern in this category, access to health services such as a family doctor, availability of health services and affordable health food. Several comments in the survey mentioned need for better coordination of health care services, difficulty accessing timely care especially specialist care.

Action Areas for Consideration

By monitoring the indicators above, changes + or - can be detected. It will be prudent to let members of the community as well as community partners know what actions are being taken to improve/reduce physical health challenges. Organizations or committees taking action within this category are encouraged to consider the need for further/enhanced community interventions related to unintentional injuries, as well as ways in which access to after hours health care and resident perceptions of the quality of their health care could be improved. In addition, affordability of dental care, medications and food are of concern for some residents.

Summary of findings:

- Although almost 60% of Grey Bruce residents rate their overall health and physical activity as very good or excellent, rates of obesity and hypertension are higher compared to Ontario.
- Grey Bruce has the highest percent of residents whose drinking exceeds low-risk drinking guidelines compared to the rest of the province.
- Grey Bruce has significantly higher rates of emergency department visits and hospitalizations due to Unintentional Injuries (Falls, Motor Vehicle Collisions, Poisonings) compared to Ontario. As well, there are higher rates of concussions and agricultural machinery injuries.
- Although 90% of residents have a health care provider, fewer than 70% have seen them in the past year (lower than the province).
- Less than half (45%) residents rated the quality of health care services as very good or excellent and even fewer (35%) rated the accessibility of those services as very good or excellent. These ratings were even worse in Bruce County compared to Grey County.
- Regarding affordability in the past year, 20% said that in the past year that they could not afford to get dental care, 10% said that they could not afford medications and 10% said that they ate less because there was not enough food or money to get food.
- Regarding barriers that residents experienced in trying to get the health care services they needed, 80% wanted non-urgent care through primary care and 85% wanted access on evenings and weekends. Two thirds wanted access to walk-in services.

Poverty and Income

The description of this category includes:

- Ability to pay bills and meet basic needs
- Ability to enjoy life and participate in leisure activities
- Stress related to financial concerns
- Availability of financial supports
- Access to financial supports

Below you will find some key Poverty and Income indicators gathered from local organizations that Action Tables could use to monitor progress/ improvements. Please note that some indicators may be included in more than one section due to categories not being mutually exclusive (e.g., Housing and Homelessness, Employment and Education, Physical Health). For more information on the indicators that follow, please use the link provided for the source report in the third column, where available.

Indicator	Baseline (most recent findings)	Year, source, level of geography, location
Impact of income on: Self-rated Health Very Good/Excellent Self-Rated Mental Health Very Good/Excellent (% of residents 12+)	Low income – 37% High income – 67% Low income – 49% High income – 79%	2015-16, CCHS, Grey Bruce, GBHU infographic
Median (50% mark) household after-tax income^	Canada – \$61,348 ON – \$65,285 GC – \$56,458 BC – \$62,926 Lowest in Owen Sound (\$46,875), Hanover (\$49,810), South Bruce Peninsula (\$52,536)	2016 (based on 2015 income reference), 2016 Canadian Census, by County & municipality, <u>GBHU Health Stats</u>
Low Income Measures After Tax (LIM-AT)^ % of children living in low income (0-17 years)	ON – 18.4% GB – 19.2% GC – 20% BC – 17.9% Highest in Huron-Kinloss (29.3%), Chatsworth (28.4%), Owen Sound (25%), Southgate (24.9%), Arran-Elderslie (24.8%)	2016 (based on 2015 income reference), 2016 Canadian Census, by County & municipality, <u>GBHU Health Stats</u>
Low Income Measures After Tax (LIM-AT)^ % of seniors living in low income (65+)	ON – 12.0% GC – 13.4% BC – 1.5% Over half of municipalities in Grey Bruce had a higher low-income rate among seniors than Ontario.	2016 (based on 2015 income reference), 2016 Canadian Census, by County & municipality, <u>GBHU Health Stats</u>

Indicator	Baseline (most recent findings)	Year, source, level of geography, location
Ontario Works cases – average number of households receiving Ontario Works	GC: Ap 2018-Mar 2019 – 1,286 Ap 2019-Mar 2020 – 1,294 BC: Ap 2018-Mar 2019 – 562 Ap 2019-Mar 2020 – 518	2019-2020 fiscal year (vs 2018-19), Bruce & Grey County Social Services personal communication, by County (can have by pcode)
Ontario Disabilities Support Program cases (as of Sept. 2020)	Increased GC – 5,205 BC – 2,809	2019-2020 fiscal year (vs 2018-19), Bruce & Grey County, personal communication
% of residents: report spending more than 30% of income on housing	GB – 26.5% GC– 28.3% BC – 24.7%	2018, Canadian Index of Wellbeing, overall & by county, <u>GBHU Health Stats</u> <u>reports</u>
% of residents: unable to pay mortgage/ rent on time, at least once in past year	GB – 4.6% GC – 4.7% BC – 4.6%	2018, Canadian Index of Wellbeing, overall & by county, <u>GBHU Health Stats</u> <u>reports</u>
% of residents: unable to pay bills on time (e.g., water, hydro, phone, credit card), at least once in past year	GB – 17.8% GC – 18.4% BC – 17.2%	2018, Canadian Index of Wellbeing, overall & by county, <u>GBHU Health Stats</u> <u>reports</u>
% of residents: Ate less because there was not enough food or money for food, at least once in past year	GB – 9.4% GC – 7.8% BC – 11%	2018, Canadian Index of Wellbeing, overall & by county, <u>GBHU Health Stats</u> <u>reports</u>
% of residents: unable to afford to pay for transportation to get to where I needed to go, at least once in past year	GB – 8% GC – 8% BC – 7.9%	2018, Canadian Index of Wellbeing, overall & by county, <u>GBHU Health Stats</u> <u>reports</u>
% of residents that did not have enough money to buy the things they needed, at least once in past year	GB – 16.5% GC – 15.7% BC – 17.3%	2018, Canadian Index of Wellbeing, overall & by county, <u>GBHU Health Stats</u> <u>reports</u>
% of residents who agree that their job security is poor	GB – 14.1% GC – 15.7% BC – 12.6%	2018, Canadian Index of Wellbeing, overall & by county, <u>GBHU Health Stats</u> reports
United Way Backpack Program	Trending upwards since 2012 2019 – 2,308 backpacks distributed to school-aged children in Bruce Grey 2020 – 2,608 so far	2005 - 2019, United Way of Bruce Grey, GB region; personal communication

ZOBP Indicator Report

Indicator	Baseline (most recent findings)	Year, source, level of geography, location
Utility Assistance Program – # received utility assistance from UW	Total homes - 639 Adults - 767 Children - 453 Seniors - 146	2019, United Way of Bruce Grey Annual Report, GB region
Living wage Bruce Grey	\$18.39 needed to thrive	2019, United Way of Bruce Grey report, GB region
211 Food/Meals # of calls # of needs identified # of referrals	Increased over previous years 181 208 429	2019, 211, Grey Bruce (available by county), <u>211</u> Dashboard
211 Income/Financial Support # of calls # of needs identified # of referrals	Similar to previous years 326 356 596	2019, 211, Grey Bruce (available by county), <u>211</u> <u>Dashboard</u>
211 Utility Assistance # of calls # of needs identified # of referrals	Increased over previous years 849 852 1,325	2019, 211, Grey Bruce (available by county), <u>211</u> Dashboard
211 Employment # of calls # of needs identified # of referrals	Similar to previous years 33 36 85	2019, 211, Grey Bruce (available by county), <u>211</u> <u>Dashboard</u>
211 Other Gov't/Economic Services # of calls # of needs identified # of referrals	Similar to previous years 350 359 457	2019, 211, Grey Bruce (available by county), <u>211</u> Dashboard
Cost of eating well	\$884 per month for a family of 4 (2 parents, two children)	2018, Nutritious Good Basket Survey, conducted by the Grey Bruce Health Unit and released jointly with the Poverty Task Force
STAR* – Situation Table Top Risk Factors	Unemployment – chronic – 5 Basic needs – unable to meet – 4	2016-2019 based on 10 meetings/cases; Owen Sound Police Services; note - multiple risk factors can be identified per case

Note: Census reports for Grey Bruce do not include data from the 2 First Nations communities due to very low response rates; some housing stats do not include farm dwellings

* STAR - A situation table that is a strategic alliance of human services, guided by common principles and processes in order to mitigate risk situations in a timely manner, usually within 24-48 hours. The term "table" highlights that it is a meeting, which convenes regularly, with police and other human service professionals from a variety of organizations. During a Situation Table, participants work together to review situations of acutely elevated risk (AER) and determine if an individual is at imminent risk of harm and victimization and then coordinate interventions to reduce them.

Community Perceptions of Poverty and Income

Question 24 in the community engagement survey asked: "What are the top areas where you feel improvements are needed to increase safety and well-being in your community? Rate them in order of importance with 1 being most important and 11 being least important."

This category ranked fourth highest (#4) overall in the community engagement survey (overall, by county and by several municipalities). It was ranked in the top 3 areas of importance by 32% of survey respondents (BC 31%, GC 34%). When asked which areas were of particular concern in this category: ability to pay bills and meet basic needs, stress related to financial concerns, access to financial supports, ability to enjoy life and participate in leisure activities as well as availability of financial supports were the top areas of concern. Several comments in the survey mentioned concern about lack of affordable housing in the region (see category Housing & Homelessness), lack of quality, stable employment including the challenges of seasonal work, some mentioned the need for living wage and/or basic income plan as well as food insecurity concerns.

Action Areas for Consideration

By monitoring the indicators above, changes + or - can be detected. It will be prudent to let members of the community as well as community partners know what actions are being taken to deal with poverty and income issues. The Action Table for this category will need to focus on:

Summary of findings:

- Median household incomes in our region are lower than Ontario (lowest in OS, Hanover, South Bruce Peninsula)
- Overall, approximately 20% of children in the region live in poverty (Low Income Measure-After Tax); this is the highest in Huron-Kinloss (30%), Chatsworth (28%) and OS, Southgate, Arran-Elderslie (all approximately 25%)
- Trends from various organizations are showing increasing needs for support such as OW & ODSP, UW Backpack program, Utility Assistance, 211 calls for food/meals and utility assistance
- Over 25% of residents report spending more than 30% of income on housing and 5% in past year had not paid rent/mortgage on time, 18% report not paying other bills on time and 9% ate less because they did not have enough money to buy food
Other Comments About Safety and Well-being in Bruce and Grey

CSWB Survey respondents (Appendix A) were asked *"Is there anything else you would like to tell us about your safety and well-being in Bruce and Grey?"*

Responses to this question (Q57; n= 522) were coded into the 10 categories above as well as one additional "Other" category by two independent coders. Agreement was found for a majority of responses. The discordant responses were discussed between the coders and agreed upon. The "Other" category was subdivided into 6 themes described below.

Theme descriptions:

- 11 a Policing comments about presence, type (OPP vs other), response times
- 11 b Social Determinants of Health comments on general social problems, root causes
- 11 c Environment or Built Environment concerns or comments about
- 11 d Opportunities or issues with decision-makers, various levels of government
- 11 e Transportation issues
- 11 f Other comments not classified elsewhere

These comments were summarized for each municipality (see Appendix B). Action Tables are encouraged to review these comments to better understand and give context to the CSWBP Survey results.



SECTION SIX

Terms, Definitions and Resources

211

A free helpline that connects people to services and programs in their area and assists them to find services for mental health, housing, legal, emergency, employment and more. They have an interactive dashboard of statistics based on service requests (211ontario.ca).

Accidental/Unintentional Poisoning

Includes: accidental overdose of a drug (including narcotics and alcohol), the wrong drug given or taken in error, and a drug taken inadvertently; selfinflicted poisoning when it's not specified whether it's accidental or with intent to harm; and accidents in the use of drugs, medicaments and biological substances in medical and surgical procedures. It does not include: administration of drugs with suicidal or homicidal intent, or intent to harm; or the correct drug properly administered in therapeutic or prophylactic dosage as the cause of any adverse effect (Grey Bruce Health Unit (2019), <u>Unintentional Injuries in Grey Bruce</u>, 2019. Owen Sound, Ontario: Grey Bruce Health Unit).

Acutely Elevated Risk (AER)

A situation negatively affecting the health and safety of an individual, family, group or place where there is a high probability of imminent and significant harm to oneself or others. Used by the STAR situation table, which is a strategic alliance of human services, guided by common principles and processes in order to mitigate risk situations in a timely manner, usually within 24-48 hours.

Age Standardized Rate

When comparing rates between two time periods or two different geographical areas it is usually more representative when you take into account the differences in the age structure of the two populations. Age-standardized rates are often used to make such comparisons, as they account for the differences in the age structure of the populations being compared (Statistics Canada, 2021).

Better Outcomes Registry and Network (BORN)

This is Ontario's prescribed maternal, newborn and child registry with the role of facilitating quality care for families across the province. BORN collects, interprets, shares and rigorously protects high-quality data essential to making Ontario the safest place in the world to have a baby (www.bornontario.ca).

Bluewater District School Board (BWDSB)

This region's public school board - currently serves approximately 16,500 students in 41 elementary schools and nine secondary schools (www.bwdsb.on.ca).

Bruce County (BC)

Bruce County is comprised of eight lower-tier municipalities (brucecounty.on.ca).

Bruce Grey Catholic District School Board (BGCDSB)

This region's Catholic school board, with 11 schools throughout the region (<u>www.bgcdsb.org</u>).

Canadian Community Health Survey (CCHS)

An annually conducted Statistic Canada survey that gathers health-related data at the sub-provincial levels of geography (health region or combined health regions) with regular releases (www23.statcan.gc.ca).

Canadian Index of Well Being (CIW)

A survey offered to regions (small and large) through the University of Waterloo. The CIW has a conceptual framework and metrics to effectively measure what changes have occurred to Canadians' wellbeing so that we can understand what is happening and take informed action, as needed. The CIW provides a broader depth of understanding that, when partnered with GDP, gives us the evidence needed to help Canadians make decisions that will build a society that responds to the call for greater fairness. The choices we make as a society will determine whether we face a distressed future or a better quality of life (canadian-index-wellbeing).

Canadian Institute for Health Information (CIHI)

The Canadian Institute for Health Information (CIHI) provides comparable and actionable data and information that are used to accelerate improvements in health care, health system performance and population health across Canada. Their stakeholders use their broad range of health system databases, measurements and standards, together with their evidence-based reports and analyses, in their decision-making processes. They protect the privacy of Canadians by ensuring the confidentiality and integrity of the health care information they provide (www.cihi.ca).

Conseil scolaire catholique Providence (CSC Providence)

This region's French language school board with one school located in Owen Sound (www.cscprovidence.ca).

Calls For Service (CFS)

Source used for reporting by the Ontario Provincial Police data sets for this report.

Census

Statistics Canada conducts a national census of population every five years and releases the data with an approximate two-year lag. The Census of Population is the primary source of sociodemographic data for specific population groups, such as lone-parent families, Indigenous peoples, immigrants, seniors and language groups.



Crime Rate (also see Incidentsbased Crime Rate)

Crime rates are based on the number of incidents reported to police per 100,000 population. The "crime rate" represents total Criminal Code incidents, excluding traffic incidents. It does not include other federal statutes such as drug offences (www.statcan.gc.ca/eng/subjects-start/crime_ and_justice).

Crime Severity Index (CSI)

The CSI monitors the severity level of police-reported crime. It measures the overall seriousness of crime from one year to the next by tracking both the prevalence and the seriousness of the crimes committed. In the calculation of the CSI, each offence is assigned a weight based on the average sentences handed down by criminal courts. The more serious the average sentence, the higher the weight for that offence. As a result, more serious offences have a greater impact on changes in the index. The number of police-reported incidents for each offence is multiplied by the weight for that

offence. All weighted offences are then added together and divided by the corresponding population total. Finally, to make the index easier to interpret, the Index is standardized to "100" for Canada.

The CSI provides a better understanding of the impact that crime has on individual community members, their families, and the community as a whole. Note when available, data was available by police geographies and averages had to be calculated in order to get this figure. Note this measure only includes the permanent or resident population of a jurisdiction (Statistic Canada, 2021).

Crude Rate

The rate at which new cases, or new events occur in a defined time period in a defined population that is at risk of experiencing the condition or event. Crude rates do not take into account the age distribution of the population and in this report are per 100,000 population (Halton Region (2020)). <u>2020</u> <u>Community Safety and Well-Being Population</u> <u>Level Indicator Report</u> (Oakville, Ontario).

Education Quality Accountability Office (EQAO)

EQAO is an arm's length government agency that contributes to the quality and accountability of Ontario's publicly funded education system for K-12 and post-secondary institutions. As an evidencebased research-informed organization, EQAO is focused on empowering educators, parents, guardians, stakeholders and the public at large with the insights and information needed to support student learning and improve student outcomes (www.eqao.com).

Early Development Instrument (EDI)

The EDI is 103-item questionnaire completed by kindergarten teachers that measures children's ability to meet age-appropriate developmental expectations in five general domains (edi.offordcentre.com).

Emergency Department Visits (EDV)

Includes individuals who present to the emergency department either by their own means or by ambulance and without a prior scheduled appointment for a specific condition. (Halton Region (2020)). 2020 Community Safety and Well-Being Population Level Indicator Report (Oakville, Ontario.)

Emergency Medical Services (EMS)

Each county runs its own paramedic ambulance service.

EmployerOne

Each year the Four County Labour Market Planning Board surveys employers in the counties of Bruce, Grey, Huron, and Perth. The EmployerOne survey collects and summarizes timely demand-side data directly from employers. This information is crucial to local organizations engaged in workforce attraction and retention strategies, strategic planning, and other community projects requiring up-to-date labour market data (www.planningboard.ca/category/ reports/employerone-survey/).

Food Insecurity

This is classified as at least one affirmative response on the Canadian Community Health Survey's Household Food Security module, which consists of 18 questions about the presence of food insecure situations in the household over the past 12 months. These situations range from worrying about running out of food to going a whole day without eating because of the inability to afford food. The food insecurity definition includes households who are marginally, moderately and severely food insecure (Halton Region (2020)). <u>2020 Community Safety and</u> <u>Well-Being Population Level Indicator Report</u> (Oakville, Ontario).

Grey Bruce Health Stats

An online data source from the Grey Bruce Health Unit about the health and well-being of the people who live in Bruce County and Grey County (www.publichealthgreybruce.on.ca/healthstats).

Grey County (GC)

Grey County is comprised of nine lower-tier municipalities (<u>www.grey.ca</u>).

Healthy Baby Healthy Children (HBHC) Postpartum Screen

Healthy Babies Healthy Children (HBHC) is a program funded by the Ontario Ministry of Children and Youth Services (MCYS) designed to help children in have a healthy start in life and provide them with opportunities to reach their potential. This voluntary program is delivered through 36 public health units (PHUs) in Ontario in partnership with hospitals and other community partners. The program consists of universal screening with targeted assessments and interventions for families and children from the prenatal period until their transition to school (www.children.gov.on.ca/htdocs/english/ earlychildhood).

Homelessness

Homelessness includes individuals staying in transitional housing, shelters and motels. It also includes "couch surfing", people in hospital/ corrections with no fixed address, public or undisclosed locations and those who did not disclose where they were staying (Halton Region (2020)). <u>2020</u> <u>Community Safety and Well-Being Population</u> <u>Level Indicator Report</u> (Oakville, Ontario).

Incidents-based Crime Rate (also see Crime Rate)

The Incidents-based Crime Rate shows the number of police-reported incidents that have occurred per 100,000 population. When available, data was by police geographies and averages had to be calculated in order to get this figure. Note this measure only includes the permanent or resident population of a jurisdiction. (**Statistics Canada**, 2021).

Institute for Clinical and Evaluative Services (IC/ES)

This is an independent, not-for-profit corporation that is an impartial, credible source of high-quality health and health services research and evidence. ICES receives core funding from the Ontario Ministry of Health (www.ices.on.ca).

IntelliHEALTH ONTARIO

IntelliHealth is a data repository containing clinical and administrative data collected from various sectors of the Ontario healthcare system. Some of the kinds of data that can be accessed through Intellihealth include data related to hospital services, community care, medical services, vital statistics and population data. Access is available to limited users including MOHLTC staff, LHINs, health service providers and community agencies responsible for analyzing, evaluating and/or planning the delivery of healthcare services in Ontario (intellihealth.moh.gov.on.ca).

International Statistical Classification of Diseases and Related Health Problems (ICD)

In Canada the International Statistical Classification of Diseases and Related Health Problems, Tenth Revision, Canada (ICD-10-CA) and the Canadian Classification of Health Interventions (CCI) use the coding standards to supplement the classification rules inherent in ICD-10-CA and CCI by providing additional information that could not be embedded into the classifications. These coding standards apply to all data sets submitted to the Discharge Abstract Database (DAD) used for hospitalizations and the National Ambulatory Care Reporting System (NACRS) used for emergency department visits (Canadian Institute for Health Information (CIHI), 2021).

Labour Force Survey

A Statistics Canada product, the Labour Force Survey is a monthly survey which measures the current state of the Canadian labour market and is used, among other things, to calculate the national, provincial, territorial and regional employment and unemployment rates (www.statcan.gc.ca/eng/ survey/household).

Low-Income Measure, After Tax (LIM-AT)

Refers to a fixed percentage (50%) of median adjusted after-tax income of private households. The household after-tax income is adjusted by an equivalence scale to take economies of scale into account. This adjustment for different household sizes reflects the fact that a household's needs increase, but at a decreasing rate, as the number of members increases. Using data from the 2016 Census of Population, the threshold applicable to a household is defined as half the Canadian median of the adjusted household after-tax income, multiplied by the square root of household size. The median is determined based on all persons in private households where low-income concepts are applicable. Thresholds for specific household sizes are presented in Statistics Canada's 2016 Census of Population. When the unadjusted after-tax income of household pertaining to a person falls below the threshold applicable to the person based on household size, the person is considered to be in low income according to LIM-AT.

Income data from the 2016 Census was collected solely from Canada Revenue Agency's (CRA) tax and benefits records. All income variables from the 2016 Census are based on the 2015 calendar year reference period, which may be different than the reference periods of other variables in the 2016 Census (Halton Region (2020)). **2020 Community Safety and Well-Being Population Level Indicator Report** (Oakville, Ontario).

Low-Risk Drinking (Guidelines)

Variables from CCHS use measures based on rate of exceeding the low-risk alcohol drinking guideline for chronic disease. Guideline one (long-term risk) provides sex-specific daily and weekly limits for alcohol consumption and recommends at least two non-drinking days every week (>2 for females; >3 for males on any day) and weekly consumption (>10 for females; >15 for males) (https://www. publichealthontario.ca/alcohol-use).

Mental Health and Substance Abuse Hospitalization Rate (per 10,000 Population)

Includes admissions to adult mental health beds for mental health, substance abuse, and behavioural disorders. The rate per 10,000 population is based on residents aged 18+. Data Source - Ontario Mental Health Reporting System (OMHRS), Ontario Ministry of Health, accessed via IntelliHEALTH ONTARIO, 7/2/2020 and Population Estimates, Ontario Ministry of Finance, accessed via IntelliHEALTH ONTARIO, 7/2/2020 (from report produced by SWLHIN for Grey Bruce, NACRS Ontario Ministry of Health and Long Term Care (July 2, 2020), Ontario Health (SWLHIN)).

Mental Health Conditions

These include mental health conditions where the main problem diagnosis code was an ICD-10-CA code of F00-F99 - mental and behavioural disorders, excluding F10-F19 (mental and behavioural disorders due to psychoactive substance use) (from report produced by SWLHIN for Grey Bruce, NACRS Ontario Min of Health (July 2, 2020), Ontario Health (SWLHIN)).

Owens Sound (OS)

The most populous city in the region and one of the municipalities in Grey County (<u>www.owensound.ca</u>).

National Ambulatory Care Reporting System (NACRS)

This reporting system contains data for all hospitalbased and community-based ambulatory care including Day surgery, Outpatient and communitybased clinics and Emergency departments. Client visit data is collected at time of service in participating facilities (<u>www.cihi.ca/en/national-</u> <u>ambulatory-care-reporting-system</u>).

Not Significant (NS)

Differences are not statistically significant.

Ontario (ON)

Ontario Student Drug Use and Health Study (OSDUHS)

The longest-running Canadian survey that shows trends in student substance use and mental and physical health (https://www.camh.ca/ontario-student-drug-use-and-health-survey).

Public Health Ontario (PHO) – Snapshots

Snapshots are a collection of interactive mapbased dashboards showing both geographic and temporal trends for key public health indicators by public health unit (PHU) and Ontario overall. Select Snapshots also include Local Health Integration Network (LHIN) and/or LHIN sub-region (LHIN SR) data. All Snapshots provide dynamically linked tables, graphs, and maps with pre-calculated statistics and use Core Indicators developed by the Association of Public Health Epidemiologists in Ontario (APHEO), where available

(www.publichealthontario.ca/snapshots).

Rate of Emergency Visits for Conditions Best Managed Elsewhere (per 1,000 Population)

Includes unscheduled ED visits for patients aged 1-74 that were triaged as less-urgent or non-urgent. Excludes unscheduled ED visits that resulted in an inpatient admission. Specific selection criteria: ICD -10-CA codes (MRDx): A740, B309, H100, H101, H102, H103, H104, H105, H108, H109, H130, H131, H132, H133, N300, N301, N302, N303, N304, N308, N309, N330, N390, H650, H651, H652, H653, H654, H659, H660, H661, H662, H663, H664, H669, H670, H671, H678, J00, J10, J11, J12, J13, J14, J18, J19, J28, J29, J38, J39, J40, J41, J60, J68, J69, J310, J311, J312, J320, J321, J322, J323, J324, J328, J329, J350, J351, J352, J353, J358, J359, J399. Data Source - National Ambulatory Care Reporting System (NACRS), Ontario Ministry of Health, accessed via IntelliHEALTH ONTARIO, 7/2/2020 (from report produced by SWLHIN for Grey Bruce, NACRS Ontario Min of Health (July 2, 2020), Ontario Health (SWLHIN)).

Regular Heavy Drinking

A binge drinking indicator used in CCHS that measures respondents 12 and older who report drinking 5 or more drinks on at least one occasion per month in the past 12 months (core.apheo.ca).

Repeat Unscheduled Emergency Visits Within 30 days for Mental Health Conditions

A visit is counted as a repeat visit if it is for a mental health condition and it occurs within 30 days of an index visit for a mental health condition. Based on main problem diagnoses of F00-F99 and F20-F99 for mental health conditions, this only includes unscheduled Emergency Department (ED) visits. The index visit may fall within the quarter specified, or within the 30 days prior to the quarter specified. The repeat visit will fall within the quarter specified. Data Source - National Ambulatory Care Reporting System (NACRS), Ontario Ministry of Health, accessed via IntelliHEALTH ONTARIO, 7/2/2020 (from report produced by SWLHIN for Grey Bruce, NACRS Ontario Min of Health (July 2, 2020), Ontario Health (SWLHIN)).

Repeat Unscheduled Emergency Visits Within 30 days for Substance Abuse Conditions

A visit is counted as a repeat visit if it is for a substance abuse condition and it occurs within 30 days of an index visit for a substance abuse condition. Based on main problem diagnoses of F10-F19 for substance abuse conditions, this only includes unscheduled Emergency Department (ED) visits. The index visit may fall within the quarter specified, or within the 30 days prior to the quarter specified. The repeat visit will fall within the quarter specified. The repeat visit will fall within the quarter specified. Data Source - National Ambulatory Care Reporting System (NACRS), Ontario Ministry of Health, accessed via IntelliHEALTH ONTARIO, 7/2/2020 (from report produced by SWLHIN for Grey Bruce, NACRS Ontario Min of Health (July 2, 2020), Ontario Health (SWLHIN)).

Rural Health and Wellness Service User Survey

Sponsored by the Grey Bruce Health Link, the Rural Health and Wellness Project brought together partners from various health care sectors and organizations – as well as other sectors such as justice, child and family services, and education – to evaluate the strengths, weakness, opportunities and threats (SWOT) of the Grey Bruce health care system, specifically related to youth and residents with mental health concerns and other chronic medical conditions, by administering a resident and provider survey in 2019. **STAR**

The Situation Table for Acute Response, a strategic alliance of human services, guided by common principles and processes in order to mitigate risk situations in a timely manner, usually within 24-48 hours. STAR is a key component of the Risk Intervention realm of the CSWBP framework.

Social Determinants of Health

The Ontario Public Health Standards acknowledge that health is influenced by a broad range of factors, including social determinants that affect the conditions in which individuals and communities live, learn, work and play. Individuals, communities and populations may experience these factors differently based on social or economic conditions, putting some at a disadvantage and greater susceptibility to poor health outcomes. Key social determinants of health include: access to health services; culture, race and ethnicity; disability; early childhood development; education, literacy and skills; employment, job security and working conditions; food insecurity; gender identity and expression; housing; income and income distribution; Indigenous status; personal health practices and resiliency; physical environments; sexual orientation and attraction; social inclusion/exclusion; and social support networks (Halton Region (2020)). 2020 Community Safety and Well-Being Population Level Indicator Report (Oakville, Ontario).

Statistical Significance

A statistically significant difference between two estimates is a difference that is likely not due to chance alone. Differences between groups (for example Grey Bruce and Ontario) were tested for statistical significance where applicable by calculating 95% confidence intervals. If the confidence intervals between groups did not overlap, differences were considered statistically significant. Statistical significance was described in the report for the following data sources: Canadian Community Health Survey, Emergency Department Visits (NACRS data), Vital Statistics data (Halton Region (2020)). 2020 Community Safety and Well-Being Population Level Indicator Report (Oakville, Ontario).

Substance Misuse (Conditions)

Substance misuse conditions where the main problem diagnosis code was an ICD-10-CA code of F10-F19 - mental and behavioural disorders due to psychoactive substance use. This includes mental and behavioural disorders due to use of: alcohol, opioids, cannabinoids, sedatives, hypnotics, cocaine, other stimulants, hallucinogens, tobacco, volatile solvents or a combination of multiple drugs (Halton Region (2020)). <u>2020 Community Safety</u> and Well-Being Population Level Indicator Report (Oakville, Ontario).

Unintentional Injuries

Unintentional injuries refer to injuries for which there is no evidence of intent (as opposed to intentional injuries such as self-harm or homicide) (Grey Bruce Health Unit. (2019). Unintentional Injuries in Grey Bruce, 2019. Owen Sound, Ontario: Grey Bruce Health Unit).

Violence Against Women (VAW)

Vital Statistics

Vital statistics are government records pertaining to births, marriages and deaths within the province of Ontario.

Vital Signs

Vital Signs uses local knowledge to measure the vitality of a community and support action towards improving collective quality of life. Local data gathered through the program is used to support evidence-based, locally-relevant solutions to improve the quality of life at the community level. Vital Signs aims to inspire civic engagement, to provide focus for public debate, and to help a range of actors take action and direct resources where they will have the greatest impact (communityfoundations.ca).

Vulnerable - Early Development Instrument (EDI)

Refers to children who score below the vulnerability cut-off points of the Early Development Instrument (EDI). The cut-off points are fixed values determined based on the lowest 10% of children in each domain in the first Ontario cycle of the EDI (established in 2004-2006) (Halton Region (2020)). <u>2020 Community</u> <u>Safety and Well-Being Population Level Indicator</u> <u>Report</u> (Oakville, Ontario).

Well-Being

The Centers for Disease Control and Prevention states there is no consensus around a single definition of well-being, but there is general agreement that at minimum, well-being includes the presence of positive emotions and moods (such as contentment, happiness), the absence of negative emotions (such as depression, anxiety), satisfaction with life, fulfillment and positive functioning. In simple terms, well-being can be described as judging life positively and feeling good. For public health purposes, physical well-being (such as feeling very healthy and full of energy) is also viewed as critical to overall well-being (Halton Region (2020)). <u>2020 Community</u>. <u>Safety and Well-Being Population Level Indicator</u> <u>Report</u> (Oakville, Ontario).



Appendix

- Appendix A Bruce and Grey Community Engagement Survey Questions
- 2 Appendix B Bruce and Grey Community Engagement Survey Summary of Comments by Municipality

Bruce and Grey Community Engagement Survey Questions

Introduction & Consent

Welcome! Thank you for your interest in this survey.

This survey is being hosted by Public Health Grey Bruce on behalf of the Municipalities of Bruce and Grey Counties as part of the development of a collaborative Community Safety and Well-Being Plan. The survey, which is meant to be completed by residents of Bruce County or Grey County, will help us understand the current state of well-being and feelings of safety in the people of Bruce and Grey so we can work together to focus on local actions to improve the quality of life for everyone.

It will take about 15 minutes to complete the survey. We will ask you questions about your day-to-day life, health, education, employment, and safety experiences. By sharing your experiences and what matters to you, you can help to shape life in Bruce and Grey, determine community priorities, and indicate where you think change is needed.

Your participation in this survey is voluntary and you can refuse to participate or withdraw from the survey at any time simply by stopping the survey. Once you have submitted the survey, you will not be able to withdraw your responses, since they are not linked to individual respondents. Your decision to participate or not will not have an impact on any services you are currently receiving from county social services, a community organization, or a health service, and we do not ask for your name at any time.

Your responses will be kept confidential by grouping responses together and by removing any identifying information. Survey responses will be stored on a secure sever at Grey County and the Grey Bruce Health Unit, and only the project coordinator and Grey County and Grey Bruce Health Unit staff who are supporting the project will have access to your individual, anonymous responses. The results will be summarized in a report and shared with local stakeholders and partners. A cleaned and de-identified version of the data set will also be posted on a publicly accessible data sharing website. This data set will not include your open-ended responses or any information that could identify you, certain groups (e.g. certain ethnic groups) or organizations. Open-ended responses (e.g. comments) will not be shared publicly. For more information about this local data sharing initiative, please visit the website https://bgdisc.ca/.

<u>If you have any questions about this survey</u>, please contact the project coordinator, Sarah Cowley, through the Community Safety and Well-Being Plan Bruce Grey website, <u>cswbp-brucegrey.ca</u>.

By completing and submitting this survey, you are providing your consent for participation.

If you would like to begin the survey, please turn to the next page.

WHERE DO YOU LIVE?

- 1. Is your primary residence in either Bruce County or Grey County?
 - □ Yes
 - □ No
- 2. Are you a permanent, year-round resident?
 - □ Yes (*go to question 4)
 - □ No
- 3. Are you a part-time or seasonal resident? (e.g. you spend winters somewhere else, or you live here part of the year for work)
 - □ Yes
 - □ No
- 4. In which municipality is your primary residence? (Bruce County)
 - □ Municipality of Arran-Elderslie
 - □ Municipality of Brockton
 - □ Municipality of Kincardine
 - □ Municipality of Northern Bruce Peninsula
 - □ Municipality of South Bruce
 - □ Town of Saugeen Shores
 - □ Town of South Bruce Peninsula
 - □ Township of Huron-Kinloss

4. In which municipality is your primary residence? (Grey County)

- □ City of Owen Sound
- □ Municipality of Grey Highlands
- □ Municipality of Meaford
- □ Municipality of Southgate
- □ Municipality of West Grey
- □ Town of Hanover
- $\hfill\square$ Town of the Blue Mountains
- □ Township of Chatsworth
- □ Township of Georgian Bluffs

5. Which community do you live in? (Please specify)

6. How long have you been a resident of this community?

- □ Less than 1 year
- □ 1-2 years
- □ 3-5 years
- □ 6-9 years
- □ 10-24 years
- □ 25 years or more

HAPPINESS, LIFE SATISFACTION, AND SPIRITUAL WELL-BEING

7. In general, how satisfied are you with your life as a whole?

- □ Very satisfied
- □ Satisfied
- □ Neither satisfied nor dissatisfied
- □ Dissatisfied
- □ Very dissatisfied

BELONGING, TRUST, AND RELATIONSHIPS

8. How would you describe your feeling of belonging to your local community?

- □ Very strong
- □ Strong
- $\hfill\square$ Neither weak nor strong
- □ Weak
- □ Very weak

9. I would recommend this community to others as a place to live.

- □ Strongly agree
- □ Agree
- □ Neither agree nor disagree
- □ Disagree
- □ Strongly disagree

10. How do you feel about your relationships with your neighbours?

- □ Very satisfied
- □ Satisfied
- □ Neither satisfied nor dissatisfied
- $\hfill\square$ Dissatisfied
- □ Very dissatisfied

11. Please tell us how many of the following people you trust. Place a check in the correct box for each group.

	Trust ALL	Trust MOST	Trust SOME	Trust A FEW	Trust NONE
Neighbours					
Colleagues at Work					
Businesses in the					
Community					
Healthcare Agencies					
Community Service					
Agencies County Social					
Service Programs					
Police Services					

COMMUNITY SAFETY AND PERCEPTIONS/EXPERIENCE OF CRIME

12. How do you feel about your personal safety in your community?

- $\hfill\square$ Very satisfied
- □ Satisfied
- □ Neither satisfied nor dissatisfied
- □ Dissatisfied
- □ Very dissatisfied

If very dissatisfied or dissatisfied, describe one thing that would make you feel safer from crime.

13. Over the last three years, do you think crime in your community has...

- □ Decreased substantially
- $\hfill\square$ Decreased somewhat
- $\hfill\square$ Remained the same
- $\hfill\square$ Increased somewhat
- □ Increased substantially

14. Compared to other communities in Ontario, do you think your community has...

- □ Lower rates of crime
- $\hfill\square$ About the same rates of crime
- □ Higher rates of crime

15. How safe do you feel from crime in the following areas?

	Very SAFE	Reasonably SAFE	Somewhat SAFE	Somewhat UNSAFE	Very UNSAFE	NOT APPLICABLE
When you are						
in your own						
home after						
dark						
Walking alone						
in your						
neighbourhood						
after dark						
Walking alone						
downtown						
after dark						

If very unsafe or somewhat unsafe, please share with us the main reason that you feel unsafe.

YOU'RE HALFWAY THERE! We really appreciate your input! Please continue.

16. In your opinion, the role of policing in ensuring community safety is...

- □ Extremely important
- □ Very important
- □ Somewhat important
- $\hfill\square$ Not so important
- □ Not at all important

17. How would having more police officers in your neighbourhood/community make you feel?

- □ Much safer
- A little bit safer
- \Box No different
- □ A little less safe
- □ Much less safe



18. Which groups do you think play a role in community safety? Select all that apply.

- □ Community Services (ie. support services provided by community agencies, like the United Way, the Alzheimer Society, or Victim Services, etc.)
- □ Elected officials
- □ Employers
- □ Faith Institutions
- □ Family/Youth Services
- □ Hospitals
- □ Mental Health and/or Addiction Services
- \Box Police
- □ Primary Care (Doctors Offices)
- □ Residents (ie. everyone who lives in the community)
- \Box Schools
- Social Services (ie. services provided through your County or municipality, like Ontario Works or ODSP, etc.)
- Other (please specify)_____

19. How much, if at all, do your feelings about safety and crime impact what you do (where you go and when)?

- □ Not at all
- □ Very little
- □ Some
- □ Quite a bit
- □ Significantly

20. Do you have children between the ages of 5 and 12?

- □ Yes
- \Box No (*go to question 22)

21. I feel comfortable allowing my children to play outside unsupervised.

- □ Strongly agree
- □ Agree
- □ Neither agree nor disagree
- □ Disagree
- □ Strongly disagree

22. What are the top areas where you feel improvements are needed to increase safety and wellbeing in your community? Rate the categories in the column on the left in order of importance with 1 being most important and 10/11 being least important. (Please Note: The column on the right gives you examples of the types of concerns that are included in each category.)

ADDICTIONS/SUBSTANCE MISUSE

- □ Alcohol misuse
- □ Cannabis misuse
- □ Illegal drug use and misuse
- □ Prescription drug misuse
- □ Gambling (online, racetrack, etc.)
- □ Access to addiction services
- Coordination between addiction services in the community
- □ Other (please specify)

COMMUNITY BELONGING AND NEIGHBOURHOOD/ENVIRONMENT

- □ Relationship with neighbours
- Unsafe or unwanted behaviours or activities in the community
- □ Resident safety
- □ Support for newcomers
- □ Support for older adults who are vulnerable
- □ Support for vulnerable youth
- □ Traffic safety
- □ Other (please specify)

CRIME PREVENTION

- □ Animal cruelty
- □ Anional cruelty
- Break and enter
- □ Child abuse
- □ Drug trafficking
- □ Elder abuse
- □ Gang activity
- □ Homicide
- □ Human trafficking
- □ Intimate partner or domestic violence
- □ Physical assault
- □ Sexual assault
- □ Theft
- □ Threats
- □ Other (please specify)

EDUCATION AND EMPLOYMENT

- □ Availability of education opportunities
- □ Access to education opportunities
- □ Affordability of education opportunities
- □ Education quality
- □ Availability of job opportunities
- □ Access to job opportunities
- □ Job quality
- □ Opportunities to develop employment skills
- □ Other (please specify)

EMOTIONAL VIOLENCE, BULLYING AND HARRASSMENT

- Emotional violence, bullying and/or harassment in homes
- Emotional violence, bullying and/or harassment in schools
- Emotional violence, bullying and/or harassment in workplaces
- Emotional violence, bullying and/or harassment in businesses and other public spaces
- Emotional violence, bullying and/or harassment in neighbourhoods and communities
- □ Other (please specify)

FAMILY AND PEER SITUATION

- □ Availability of leisure activities for children
- □ Access to leisure activities for children
- □ Affordability of leisure activities for children
- □ Availability of childcare
- □ Access to childcare
- □ Affordability of childcare
- □ Positive role models
- □ Positive peer groups
- □ Stable and nurturing home environments
- Availability of social support services for children
- □ Access to social support services for children
- Coordination between social support services for children in the community
- □ Other (please specify)

HOUSING AND HOMELESSNESS

- □ Access to housing
- □ Availability of housing
- □ Affordability of housing
- □ Safety of housing
- □ Quality of housing
- □ Homelessness
- □ Other (please specify)
- Mental health (such as depression, anxiety, bipolar disorder)
- □ Emotional or psychological trauma
- □ Suicide
- □ Access to mental health services
- □ Availability of mental health services
- □ Affordability of mental health services
- Coordination between mental health services in the community
- □ Other (please specify)

_ PHYSICAL HEALTH

- $\hfill\square$ Access to health services such as a family doctor
- Availability of health services such as a family doctor
- Access to services for persons with a physical disability
- Availability of services for persons with a physical disability
- □ Access to exercise opportunities
- □ Availability of exercise opportunities
- □ Affordability of exercise opportunities
- $\hfill\square$ Access to healthy food
- Availability of healthy food
- □ Affordability of healthy food
- □ Other(please specify)

MENTAL HEALTH

POVERTY AND INCOME

- □ Ability to pay bills and meet basic needs
- Ability to enjoy life and participate in leisure activities
- □ Stress related to financial concerns
- □ Availability of financial supports
- □ Access to financial supports
- \Box Other (please specify)

OTHER (please specify) ____

23. NOW: For those categories <u>above</u> that you ranked 1-3, please go back to those lists in the right-hand column and check off all issues that are of particular concern to you. Please select all that apply – but ONLY for those categories that you ranked 1-3.

If you are in need of URGENT mental health support or intervention, please call the Mental Health Crisis Line of Grey Bruce at 1-877-470-5200.

If you are in need of mental health support or intervention, and wish to locate treatment services in your area, please dial 211.

PERSONAL CHARACTERISTICS

We would like to know more about you so that we can create groupings of answers based on categories like age, gender, community affiliation, etc. so that we can better understand feelings of safety and well-being for all/diverse populations.

24. With which gender do you most identify?

- □ Female
- □ Male
- □ Prefer not to say
- Other (please describe) _____

25. What is your age?

- Younger than 16
- □ 16 to 17 years
- □ 18 to 24 years
- \Box 25 to 34 years
- □ 35 to 44 years
- □ 45 to 54 years

- 55 to 64 years
- □ 65 to 74 years
- □ 75 or older

26. Are you First Nations, Métis, or Inuit?

- □ Yes
- □ No
- 27. Are you Low German Speaking Mennonite, Old Order Mennonite, Orthodox Mennonite, Old Order Amish, or Amish?
 - □ Yes
 - □ No

28. Are you a Visible Minority?

- □ Yes
- □ No

29. Were you born in Canada?

- \Box Yes (*go to question 31)
- □ No

30. How long have you lived in Canada?

- □ Less than 1 year
- □ 1-2 years
- □ 3-5 years
- □ 6-9 years
- □ 10-24 years
- □ 25 years or more

31. Which of the following best describes your current marital status?

- □ Single, never married
- □ Married
- □ Widowed
- \Box Divorced
- □ Separated
- □ Living common-law

32. What is the highest level of education you have completed?

- □ Did not attend school
- □ Some elementary or some high school education
- □ High school diploma
- □ Completed technical or community college
- □ Some college or some university
- □ University degree (Bachelor's)
- □ Graduate degree (Master's, PhD)

33. What is your total annual household income?

- □ Less than \$20,000
- □ \$20,000 to \$34,999
- □ \$35,000 to \$49,999
- □ \$50,000 to \$74,999
- □ \$75,000 to \$99,999
- □ \$100,000 to \$119,999
- □ \$120,000 to \$149,999
- □ \$150,000 or more
- □ Prefer not to say

LAST PAGE! You're almost done. Great job.

CONCLUDING QUESTION

34. Is there anything else you would like to tell us about your safety and well-being in Bruce and Grey?

THANK YOU FOR COMPLETING THIS SURVEY!

If you have any additional questions about this survey or the Bruce and Grey Community Safety and Well-Being Plan, please contact the project coordinator, Sarah Cowley, through the Community Safety and Well-Being Plan Bruce Grey website, <u>cswbp-brucegrey.ca</u>.

Grey Community Engagement Survey Summary of Comments by Municipality

Is there anything else you would like to tell us about your safety and well-being in Bruce and Grey?

All true responses to this question (Q57; n= 522) were coded into 11 pre-determined categories by two independent coders. Agreement was found for a majority of responses. The discordant responses were discussed between the coders and agreed upon.

Eleven categories are described below. The "Other" category was subdivided into 6 additional categories based on themes.

Open-ended Response Categories (Q57)

1= ADDICTIONS/SUBSTANCE MISUSE - includes Alcohol misuse, Cannabis misuse, Illegal drug use and misuse, Prescription drug misuse, Gambling (online, racetrack, casino, etc.), Access to addiction services, Coordination between addiction services in the community

2= COMMUNITY BELONGING AND NEIGHBOURHOOD/ENVIRONMENT - includes Relationships with neighbors, Unsafe or unwanted behavior or activities in the community, Resident safety, Support for newcomers, Support for older adults who are vulnerable, Support for vulnerable youth, Traffic safety, Racism

3= CRIME PREVENTION - includes Animal cruelty, Arson, Break and enter, Child abuse, Drug trafficking, Elder abuse, Gang activity, Homicide, Human trafficking, Intimate partner or domestic violence, Physical assault, Theft, Sexual assault, Threats

4= EDUCATION AND EMPLOYMENT - includes Availability of education opportunities, Access to education opportunities, Affordability of education opportunities, Education quality, Availability of job opportunities, Access to job opportunities, Job quality, Opportunities to develop employment skills

5= EMOTIONAL VIOLENCE, BULLYING AND HARASSMENT - includes Emotional violence, bullying and/or harassment in homes, Emotional violence, bullying and/or harassment in schools, Emotional violence, bullying and/or harassment in workplaces, Emotional violence, bullying and/or harassment in businesses and other public spaces, Emotional violence, bullying and/or harassment in neighborhoods and communities

6= HEALTHY CHILD DEVELOPMENT - includes Availability of leisure activities for children, Access to leisure activities for children, Affordability of leisure activities for children, Availability of childcare, Access to childcare, Affordability of childcare, Positive role models, Positive peer groups, Stable and nurturing home environments, Availability of social support services for children, Access to social support services for children, Coordination between social support services for children in the community

7= HOUSING AND HOMELESSNESS - includes Access to housing, Availability of housing, Affordability of housing, Safety of housing, Quality of housing, Homelessness

8= MENTAL HEALTH - includes Mental health conditions (such as depression, anxiety, bipolar disorder), Emotional or psychological trauma, Suicide, Access to mental health services, Availability of mental health services, Affordability of mental health services, Coordination between mental health services in the community

9= PHYSICAL HEALTH - includes Access to health services such as a family doctor, Availability of health services such as a family doctor, Access to services for persons with a physical disability, Availability of services for persons with a physical disability, Access to exercise opportunities, Availability of exercise opportunities, Affordability of exercise opportunities, Access to healthy food, Availability of healthy food, Affordability of healthy food

10= POVERTY AND INCOME - includes Ability to pay bills and meet basic needs, Ability to enjoy life and participate in leisure activities, Stress related to financial concerns, Availability of financial supports, Access to financial supports

11=Other if does not fit into any of the above categories; subcategories created by coders below

11 a = Policing - comments about presence, type (OPP vs other), response times

11 b = Social Determinants of Health – comments on general social problem root causes

11 c = Environment or Built Environment – concerns or comments

11 d = Opportunities or issues with decision-makers, various levels of

government

- 11 e = Transportation issues
- 11 f = Other comments not classified elsewhere

BRUCE COUNTY

Municipality of Arran-Elderslie

Coded Response Category	Count
1	2
2	5
3	3
5	1
9	1
10	1
11a	4
11b	3
11d	2
11e	1
2, 8	1
6, 10	1
Grand Total	25

Responses to this question from Arran-Elderslie residents were mainly regarding Community Belonging, Policing, Crime Prevention and Social Determinants of Health. Several people mentioned the need to deal with the root causes of crime including addiction, mental health and other social problems. They saw that there was a need to be proactive in dealing with safety and security concerns as well as the need for more community supports in rural areas. Another theme emerged regarding policing mentioning things like slow police response time, negative experiences and lack of trust in police resulting in the failure to report crime among some residents. Other comments were linked to troublesome teens, the need for sidewalks to protect pedestrians from speeding cars, the need for transit between communities, need for more doctors as well as the loss of rural values and traditions.

Municipality of Brockton

Coded Response Category	Count
1	4
2	7
3	2
7	1
11a	3
11b	1
11c	2
11d	1
11e	1
Grand Total	22

Responses to this question from Brockton residents were mainly regarding Community Belonging, Addictions/Substance Misuse and Policing. Several people mentioned the need for increased, more visible and responsive, community-style of police presence in the area. Complaints about increased awareness of drug availability and the impact that it has in the community such as crime, mental health, unemployment. There was also a perception that large urban centres out of the area were sending their drug addicts to the area where there is a lack of resources to deal with them. A couple of residents identified that a more coordinated response across municipalities is needed to help the disadvantaged and vulnerable folks in the community. A couple of residents identified issues with newcomers to the area not being made to feel welcomed and included. A couple comments were related to the harm that could occur if a DGR nuclear waste facility were present in the area. Other comments referenced speeding in small communities, the need for more snow removal from streets, barriers where the dam was, reliable transportation to neighboring communities, a better justice system that prevents crime and more education and prevention efforts to help those struggling and falling through the cracks.

Municipality of Kincardine

Coded Response Category	Count
2	6
3	3
7	1
9	6
11c	1
11d	1
11e	1
6, 8	1
7, 11b	1
8,1,4	1
Grand Total	22

Responses to this question from Kincardine residents were mainly regarding Community Belonging, Physical Health and Crime Prevention. One over-arching theme emerged regarding the need for more local/better funding of health care services including better equipped hospitals (including doctors, staffing), LTC facilities and athome care for residents. Another theme related to road safety and maintenance, the need for more sidewalks because of speeding, better street lighting and more parking lots. Several people mentioned the need for police prevention strategies to deal with the rise in property crime, human trafficking, drug dealing and meth use. Some people mentioned that there needed to be more scheduled, regular seniors' activities as well as public transportation. One mentioned the idea of using more cross-discipline collaboration from the community to deal with issues of safety and well-being. Other comments were related to the lack of children's mental health services in the area; the need for affordable public transportation; unsafe public housing; the disparity between have and have-nots especially regarding affordable housing; a need for more education and mental health and addiction support to improve safety and increase employment; the poor condition of the break-wall at the lake and need for lighting there and the desire to ban handguns in the municipality.

Municipality of South Bruce

Coded Response Category	Count
2	4
7	1
8	1
11a	1
11c	3
11e	1
11f	1
2, 1	1
8, 1, 7	1
Grand Total	14

Responses to this question from South Bruce residents were related to Community Belonging and the Environment/Built Environment. There were concerns regarding the negative health and environmental effects of the DGR nuclear waste plans and EMFs from 5G networks. Others expressed safety concerns because of the number of tourists coming to the area, lack of police presence, increased criminal activity coming from outside of the area, better road maintenance, traffic safety for children coming to/from school and the need for more events/services for low income seniors. Other comments were related to the need for affordable housing options, services/supports for mental health and addictions particularly for 20-30 year olds that are "falling through the cracks". Regarding police services, a few noted the need for more staffing/ resources for better response times to reduce the impact on other first responders such as volunteer fire department. One person suggested that becoming and pride. One person said that the focus needs to be on maintaining "what we have" while another commented on Teeswater's run-down main street causing issues in the town.

Town of Saugeen Shores

Coded Response Category	Count
1	4
2	13
3	2
4	1
5	3
6	2
7	2
8	5
9	13
1, 10	1
11a	5
11b	2
11c	3
11d	2
11e	1
11f	1
4, 7	1
Grand Total	61

Responses to this question from Saugeen Shores residents were mostly in the categories of Community Belonging and Physical Health. The themes that emerged were primarily about traffic safety (need for more traffic lights, many not obeying traffic rules in residential areas) and lack of enforcement for speeding, distracted driving and disregard of stop signs. There were also comments regarding pedestrian traffic issues, especially school children walking to/from school, as well as the lack of cleared sidewalks in residential areas. Others noted that many businesses are not accessible to disabled people, and that there needs to be more low-cost seniors programming, outreach services to new comers and isolated individuals as well as public information about who is charged with drug and weapons charges in town. Regarding Physical Health, over half in that category mentioned difficulty/need to get more family physicians to the area. Other comments were about the need for more indoor activities such as a walking track, basketball courts, upgraded pool and more ice time. One respondent was concerned about the wild animals wondering the streets while another complimented the great maintenance of the trails. Themes from other categories: need for more affordable housing; more youth and adult mental health and addictions programs; more police presence, training in mental health and transparency; conflicts between the needs of the "haves" versus the "have nots"; dissatisfaction with the elected town officials not listening; too much alcohol and cannabis use leading to poor behavior; and need for more sidewalks.

Town of South Bruce Peninsula

Coded Response Category	Count
1	2
2	4
8	1
1, 8	1
11a	2
11c	2
11d	2
11f	1
2, 11c	1
Grand Total	16

Responses to this question from South Bruce Peninsula residence were across many categories but were mostly concerned Community Belonging. A few residents mentioned wanting to have community hubs or centres in downtown areas. A couple of others mentioned the need for better signage, sidewalk and road repairs and speeding issues. One mentioned the challenges of maintaining the sources of connection between people and the changing rural community. There were a few comments related to the need for outreach or other programs for mental health and addiction problems. A few others commented about the speeding on HWY 6, need for more police presence at the beach at night and better off-season patrols. Other comments discussed local government consideration for the ecosystem, the need for a climate change action plan, legal fees, the need to celebrate successes in the community, and the importance of consultation with First Nations.

Municipality of North Bruce Peninsula

Coded Response Category	Count
1	1
2	12
7	1
9	1
11b	1
11c	1
11d	2
11e	2
11f	1
Grand Total	22

Over half (12 of 22) responses to this question from residents of North Bruce Peninsula were related to Community Belonging. Most comments highlighted the traffic safety on Hwy 6 and County roads during the summer. Concerns about excessive traffic, speed, unsafe driving and impaired driving were mentioned. Some suggested the need for an alternate route citing concerns about the traffic, safety and in case of fire evacuation. Other themes in this category were about getting "back to basics" and need for folks to be healthier, more productive, honest and transparent. There were also a few comments regarding the strength of the community, good and supportive neighbors and hospital staff. Others mentioned the desire to maintain the current values which were being eroded by newcomers and seasonal residents. Other areas of concern included the need for public transportation, lack of affordable housing, need for yearround activities to be promoted/available, parking passes for residents and lack of police presence and growing drug problems.

Township of Huron Kinloss

Coded Response Category	Count
1	5
2	6
3	4
7	1
9	2
11a	1
11d	3
Grand Total	22

Responses to this question from Huron Kinloss residents mostly fell in the categories of Community Belonging, Addictions/Substance Use followed by Crime Prevention. Themes in the Community Belonging category included concerns regarding better signage and speeding especially in areas with children; newcomers and their families being treated as outsiders; attitudes of "looking the other way" and not getting involved/ reporting crime; and loss of rural values and traditions. In the Addictions/Substance Misuse and Crime Prevention categories, themes were related to the high drug and alcohol problems in the community including known "drug houses," drinking and driving and the desire for more prevention efforts to stop drugs from coming into the region. There was also mention of problems with trespassing on farms, increases in property theft and break and enters. Other comments highlighted the need for increased police presence, desire for more input into municipal decisions, problems with homelessness and lack of affordable housing, need for closer/more timely fire and ambulance services as well as a local transportation system and comments about vaccination exemptions (pro and con).

GREY COUNTY

City of Owen Sound

Coded Response Category	Count
1	11
2	7
3	5
4	4
6	1
7	7
8	1
9	1
10	2
1, 3, 8	1
1, 8	1
11a	5
11b	5
11c	2
11d	4
11f	1
3, 11c	1
4, 1	1
5, 6, 8	1
7, 8	1
Grand Total	62

Responses to this question from Owen Sound residents mostly fell in the categories of Addictions/Substance Use followed by Community Belonging and Housing and Homelessness. Themes in the Addictions/Substance Misuse category included many concerns from people feeling unsafe or avoiding downtown due to so many people with drug and mental health issues hanging out on the street. Several reported feeling unsafe due to the open drug use and trafficking, begging, increased petty crime and some suggested installing cameras to prevent crimes. Many noted the lack of stable, good paying jobs in the Owen Sound area. Some suggested that cleaning up of downtown was needed to attract more events and businesses. Three others felt that "drug addicts" were being sent to Owen Sound from other communities outside of the region and this was straining the local resources. Others mentioned that they felt that since the arrival of the methadone clinic, crime and safety problems have increased. One person wanted a safe injection site to draw people from using in public washrooms. Themes in the Community Belonging category were primarily regarding the impact of the bridge construction on pedestrians – many reported avoiding the

area, lack of traffic enforcement making it unsafe. Others reported feeling unsafe in their County Housing complex and walking or working in downtown area because of the "drug addicts" and dealers. Themes in the Housing/Homelessness category were that housing needs to be a priority to deal with homelessness, addiction, mental health and poverty. Others mentioned the need for more good quality, affordable housing options. Some mentioned the need for more affordable, safe rental housing with several mentioning the need for seniors' housing because of long waitlists. Other comments were related to the municipal government needing new ideas and fresh perspectives to combat the perceived favoritism/"cronyism" on council and police services; more supports and understanding of issues like racism, childhood trauma for front-line staff; more crime prevention and focus on the roots of crime, addiction and mental health; need for more green spaces, bike lanes and action on climate change as well as the need to work in partnership to deal with the issues of the community.

Municipality of Grey Highlands

Coded Response Category	Count
2	4
5	1
7	2
8	1
1, 2	1
11a	1
11c	2
11d	2
Grand Total	14

Responses to this question from Grey Highland residents mostly fell in the category of Community Belonging. Comments ranged from noise issues from hunting and home shops, drinking and driving not taken seriously by police as well as comments regarding a fractured community with too many activities centered in Markdale. Other comments included action towards preserving the natural environment and the impact of global warming on the community; need for more affordable, available mental health services and affordable housing options for people that need them; need for police to have more positive interaction in the community; as well as lower taxes.

Municipality of Meaford

Coded Response Category	Count
2	2
7	1
10	1
1, 3	1
1, 8	1
11a	5
11a, 2	1
11a, 6	1
11b	1
11c	1
11d	2
8, 9	1
Grand Total	18

Responses to this question from Meaford residents mostly fell in the category of Policing. The comments focused on the need for more police in the area. Many commented on the need for a more visible and engaged police presence and two commented that more police were needed for the safety of the community and for the officers themselves. Other responses to this question were related to the need for affordable housing; problems with drug, alcohol and mental health in the community; desire to maintain rural values and traditions for a sustainable, thriving community; need for coordination across municipalities to work on mutual problems, share services, plan programs; need to look at safety through a Social Determinant of Health lens; as well as the lack of stable employment opportunities in the area.

Municipality of Southgate

Coded Response Category	Count
1	1
2	7
3	2
11a	2
11a, 2	1
11c	1
2, 3	1
Grand Total	15

Over half of the responses to this question from Southgate residents fell in the category of Community Belonging. One overarching theme was regarding the divide between the traditional residents of the area versus the newcomers to the area coming from larger centres. One reported that several newcomers have experienced very unwelcoming, bullying behaviors from long-term residents. Some suggested that solutions like more art and culture events might bring folks together as well as downtown revitalization. Another theme was related to the need for more traffic enforcement (of speeding, drunk driving). Other comments explored the need for a greater police presence with better response times; drug and alcohol issues and the need to break the cycle; as well as the need for more sidewalks and enforcement of property standards.

Municipality of West Grey

Coded Response Category	Count
1	1
2	4
3	1
6	1
10	1
11a	4
11d	1
11e	1
11f	1
6, 4	1
8, 1	1
Grand Total	17

Responses to this question from West Grey residence mostly fell in the categories of Community Belonging and Policing. Themes for Community Belonging were realted to the distrust of newcomers and some residents being rude, nosey; aggressive driving; too many coyotes; and the need for organizations to remember that not everyone has access to electronic devices or internet. Themes from the Policing category included several comments supporting and appreciating of the local force as well as the desire to have them more visible in the communities (especially in new areas). Comments were also shared regarding police and courts needing to deal with repeat offenders. Other areas of concern included the increase of drug and alcohol problems in the area; the high amount of stress that folks are experiencing from unstable work and increasing costs of living; more opportunities needed for youth such as activities and skill-based training, education; and better transportation options between communities to connect fragmented and often competing communities.

Town of Hanover

Coded Response Category	Count
1	3
2	5
3	2
6	1
7	2
8	1
11a	5
11a, 4, 9	1
11b	1
11c	3
11d	1
11f	1
Grand Total	26

Responses to this question by Hanover residents mostly fell in the categories of Policing and Community Belonging. Themes regarding policing shared that residents were pleased with having a local police service but that they would like to see them more visible in the community, perhaps some on-foot interacting with the public. Comments in the Community Belonging category spoke of not feeling safe to allow children to play unsupervised outside, mentioning how much the town has negatively changed over the years. Residents also mentioned that there needs to be better lighting in some areas; that folks need to be more considerate of their neighbors (renoise, pets) and help is needed to remove criminals and addicts. Comments from other categories included several concerns related to the perceived increase in drug traffickers, addicts and criminals in the area and the need for more local addiction and mental health programs; the need for more affordable housing and rental units for families. One suggested more casual opportunities like "Meet with the Mayor" be available for the public to bring issues to elected representatives and police.

Town of The Blue Mountains

Coded Response Category	Count
9	3
10	2
11c	1
11d	2
11e	1
Grand Total	9

Responses to this question by Blue Mountain respondents mostly fell in the category of Physical Health with all comments relating to the difficulty of accessing health care, lack of walk-in clinics and lack of doctors in the area. Other comments shared the need for access to public transportation to get to services; feeling excluded from the community because unable to afford housing and shopping there; better water for Clarksburg; and more equitable use of tax money across regions.

Township of Chatsworth

Coded Response Category	Count
2	3
3	4
6	1
7	2
8	1
1, 8	1
11a	4
11a, 2	1
11b	2
11c	1
11d	1
Grand Total	21

Responses to this question by Chatsworth residents mostly fell in the categories of Community Belonging, Crime Prevention and Policing. In the Community Belonging category, there were 2 comments related to newcomers not feeling welcomed/wanted in the area especially in the farming community. One experienced harassment, petty crimes being done to them and another said they would feel safer if neighbors looked out for each other. Traffic safety (speeding, distracted driving) was also mentioned as an issue along both HWY 6 and 10. In the categories of Crime Prevention and Policing, the majority of the comments were about increased property crimes, the need for more police with better response times and more visibility in the community as well as the failure of the justice system to deal with repeat offenders and sentences being too light. Other comments were regarding wanting a municipal police service with local knowledge and better funded police. Themes from the other categories included several comments highlighting the need to deal with the root causes of mental health and addiction problems with flexible services so that folks don't "fall through the cracks"; the need to deal with the issues of poverty, low paying jobs and unaffordable housing. One asked how the counties were using the Canadian Index of Wellbeing results, another suggested having more activities for young people, and another suggested spending less on policing and more on social services.

Township of Georgian Bluffs

Coded Response Category	Count
1	2
2	5
3	2
6	1
7	2
8	2
1, 3	1
1, 8	1
11a	2
11a, 1, 7	1
11b	2
11b, 3	1
11d	2
11f	1
Grand Total	25

Responses to this question by Georgian Bluff residents mostly fell in the category of Community Belonging. Themes from this category were an overall expression of feeling safe except some expressed feeling less safe during tourist season and one felt that newcomers to the area do not appreciate the great community and expected the same amenities as in "the city". Another person wanted the noise by-laws to be amended as many live near commercial areas. One person wanted there to be more education and awareness of business owners about dementia as well as more activities for youth. The remaining comments spanned across several categories but the main themes were related to the need for more/better addictions, mental health and poverty support services with many mentioning feeling unsafe in downtown Owen Sound because of these problems. Others mentioned the need to invest in the community by providing more affordable housing for families, better employment opportunities, attracting more young professionals to the area. Other ideas put forth were improved training for police on domestic and sexual assault, better police and ambulance response times, more sharing of resources across municipal borders (fire and police), a more centralized mental health system for Grey Bruce with continuity of care and working in partnership with other organizations.

Disclaimer

The purpose of this document is to outline information that came to the attention of the consultant during Phase 1 of the Municipalities of Bruce and Grey Community Safety and Well-Being Planning (CSWBP) process and to offer comments and recommendations for consideration by the Municipalities of Bruce and Grey CSWBP Advisory Committee. The work has consisted of the inquiry, observation, comparison, and analysis of information provided by the Advisory Committee member organizations and other third-party individuals and entities.

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Limitation

This document has been prepared by Sarah Cowley, of Sarah C Consulting and Alanna Leffley, of Alanna Leffley Consulting, for use by the Municipalities of Bruce and Grey Community Safety and Well-Being Planning Advisory Committee. Such work does not constitute an audit. Accordingly, we express no opinion on financial matters, internal control, or other information. The authors neither warrant nor represent that the information contained in this report is accurate, complete, sufficient or appropriate for use by any person or entity other than the Municipalities of Bruce and Grey CSWBP Advisory Committee, and the authors hereby expressly disclaim any and all responsibility or liability to any person or entity other than the Municipalities of Bruce and Grey CSWBP Advisory Committee in connection with their use of this report for future Phases of the CSWBP process.

Bruce & Grey CSWBP Indicator Report





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A SHARED COMMITMENT IN ONTARIO

Report Prepared By



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