

# Cochrane Well-Being Frame Work



A Plan for Collaboration & Action



ONTARIO, CA

**COCHRANE**

**WONDERFULLY UNEXPECTED**



# **COMMUNITY WELL-BEING FRAMEWORK**

For the Municipality of Cochrane

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# INTRODUCTION

This Community Safety and Well-being Plan has been developed for our community. It is mainly based on four areas of focus selected by analyzing the results of the statistics for our community. The four areas of focus are the following: crime, housing, mental health, as well as substance abuse and addiction.

In this plan, each area of focus is briefly explained, accompanied by supporting evidence to demonstrate the needs and risks associated with the said area of focus in our community. Then, courses of action accompany each area of focus in order to allow our community to take the first step in mitigating or overcoming the risks identified. It is important to note that the proposed courses of action are not only aimed at our community, but also at the community organizations.

The proposed courses of action have been developed based on the stakeholder meetings, the Cochrane Police Service Board, Council input and community engagement. It is important to note that this plan is not intended to be carried out in one single year.

At the end of the document, there is a section addressing the impact of the COVID-19 pandemic on the risks associated with the four areas of focus. This section is followed by another one listing some performance indicators which will be helpful in measuring the progress achieved by each community within these same four areas of focus.

It should be made clear that this plan is to be used as a tool that can evolve over time based on the circumstances and challenges to our community and we will face in the years to come, and not as a magic formula making it possible to overcome all challenges. Collaboration, commitment, and communication must be applied here in order to build safe communities where the well-being of residents is given priority.



# LEVELS OF INTERVENTION

In its Community Safety and Well-being Planning Framework, the Ministry of the Solicitor General has identified four levels of intervention, shown in the diagram below. The courses of action suggested in this plan are found at different levels of intervention. It is indeed crucial to have a balanced strategy, and therefore to keep from channeling efforts on only one of these levels.

**Social Development**

**Prevention**

**Risk Intervention**

**Incident Response**





Four areas of focus have been identified as priorities for the community safety and well-being of the municipalities targeted by this plan:

**Crime**

**Housing**

**Mental Health**

**Substance Abuse and  
Addiction**

# CRIME

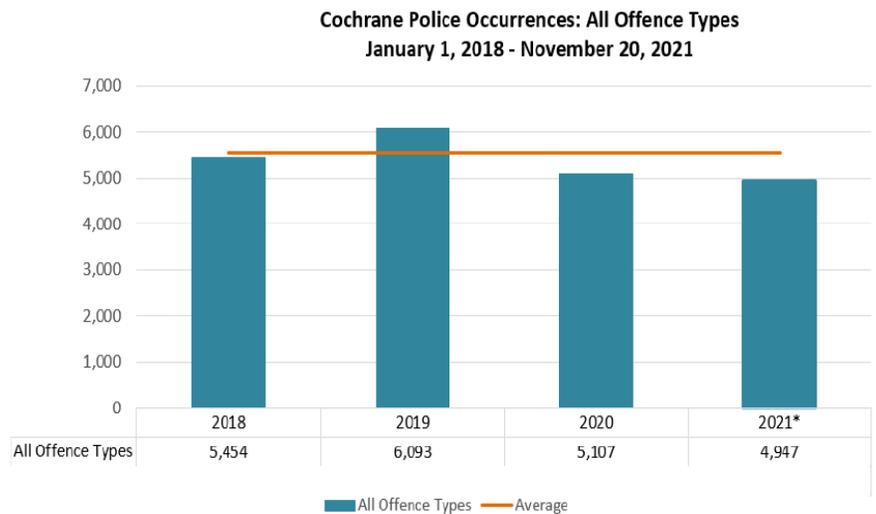
Between January 1, 2018 and November 20, 2021, there have been 72,978 occurrences that Cochrane OPP have been involved in, averaging 5,551 occurrences per year. While the overall trend has been downward, there was a slight uptick in 2019, representing a 12% jump compared to 2018 (see Figure 1, below). Since the peak in 2019, numbers have again decreased, with 2020 reflecting a 16% decrease. 2021 is predicted to reach a similar volume as 2020.

## Calls to OPP Between 2018 and 2021 (Cochrane)

**Violent: 891**

**Property: 1223**

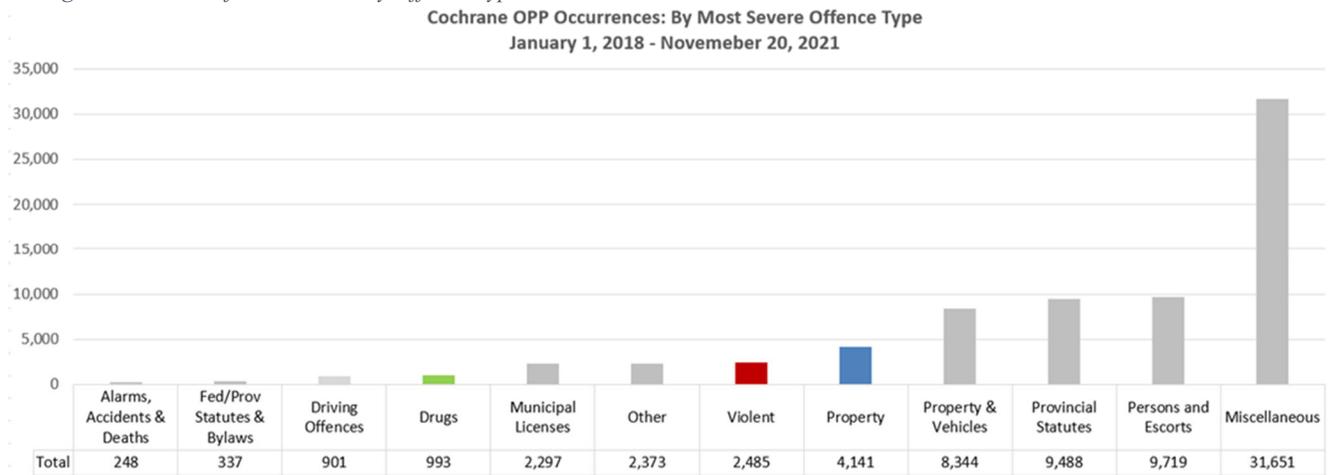
**Drugs: 229**



\* 2021 numbers current to November 20, 2021; average reflects 2018-2020

From 2018 through November 20, 2021, Violent occurrences accounted for 3.4% of Cochrane OPP occurrences, Property occurrences have accounted for 5.7% of occurrences, and Drug occurrences have contributed 1.4% of occurrences (see figure 3 below). Overall, Miscellaneous, Person/Escorts, and Provincial Statutes contribute to the most incidents involving OPP services.

Figure 3: Volume of Occurrences by Offence Type



While overall occurrences reported to Cochrane OPP have been generally declining since 2018, occurrences related to drugs, property, and violent offences have increased. However, these three occurrence types represent a fraction of all occurrences reported to OPP.

# COURSE OF ACTION

## Mobilization Committee

- ❖ Maintain the meetings of the Cochrane Community Well-Being Framework Advisory Committee to ensure communication and collaboration between community agencies.

## Youth Crime

- ❖ As part of a feasibility study, survey the population in order to possibly open a meeting place for youth where there would be recreational activities and equipment such as computers, internet connexion, board games, a pool table, a table tennis set, etc.
- ❖ In partnership with community agencies, hold workshops or information sessions on different themes in order to reduce crime in the communities (e.g., discrimination and racism, domestic violence, human trafficking).

## Awareness and Prevention

- ❖ Complete a gap analysis in order to identify the strengths and the areas that need to be improved with respect to crime in communities. Develop an action plan to address the identified shortcomings.
- ❖ Hold consultations in our community in order to explore residents' interest and possible voluntary involvement in setting up a neighborhood surveillance and patrol program (Neighborhood Watch).

## Police Force

- ❖ Maintain the meetings of the Cochrane Police Services Board in order to continue to address crime-related problems in the communities.

## Domestic Violence

- ❖ Raise awareness and do prevention work in schools to educate young people on specific topics related to domestic violence (e.g., inappropriate, and unhealthy behaviors in a relationship, available resources and services, reporting such behaviors, the links between addiction and mental health) in order to decrease the number of possible future domestic violence conflicts.

## Theft, Break-Ins, and Damage to Private Property

- ❖ Organize awareness-raising and information events on theft and break-ins as well as damage to private property. These could cover types of thefts, their frequency, how to prevent them, people, or services to contact to report such acts, etc.

# HOUSING

there is a lack of affordable housing options for one and two-person households, and the existing options are almost exclusively on the rental market. In the coming decades, the population is expected to decrease slightly, and the overall population is expected to age. This means that will be an increased need for smaller, senior-friendly units that are accessible and have supports in place to help households age in place. These trends indicate that the demand for housing is not expected to increase. The Town of Cochrane can, therefore, focus on making adapting the current stock to meet these evolving needs through conversions and renovations.

## HOUSING STOCK

There are a total of 2,315 homes in Cochrane, the majority of which are single-detached houses. The second most significant build type is low-rise apartments.

Number of private dwellings by type, 2016

Type	Number of Units	Percentage of Stock
Single Detached	1,560	67%
Low-rise apartment	365	16%
Other attached	275	12%
Movable	115	5%
Total	2,315	100%

Since 2001, there has been an increasing number of households living in single-detached houses, this has corresponded with a decrease in the number of households living in other attached dwelling types, such as duplexes, semi-detached houses, and row houses.

The Town has an aging housing stock, with over one-third of its dwellings (35%) built in 1960 or earlier, and an additional third built between 1961 and 1980. This is common across similar-sized communities in the District of Cochrane. In fact, a larger share of the Town of Cochrane's housing stock was built in the last 20 years relative to its peers.

# COURSE OF ACTION

## Housing Units

- ❖ Increasing the number of affordable bachelor units, one-and two-bedroom dwellings.
- ❖ Increase the number accessible one-bedroom dwellings for seniors and supportive housing.
- ❖ Improving the condition of the aging stock
- ❖ Creating affordable options on the ownership market

## Homelessness

- ❖ Increase the number of beds in shelters\* and transitional housing and insuring there are sufficient supports for households who are in precarious housing situations.

\*It must be noted that the men's shelter (Gahbeh Shoooin) was shut down in 2021 with no plans to open.

- ❖ Creating alternative housing options on the ownership market for households who may not be able to afford a single-detached house, e.g. co-operative housing.
- ❖ Increasing the supports for households who are at risk of becoming homeless.

## Lack of Bachelor units

- ❖ Develop, in partnership with the Cochrane District Social Services Administration Board (CDSSAB) Ontario Aboriginal Housing Service and Ininev Friendship Centre on plans to increase the number of affordable housing units in the community.
- ❖ Continue lobbying government bodies in order to increase the number of affordable housing units in the community.

# MENTAL HEALTH

Mental health has been identified as a priority risk by the Well-being framework advisory committee, the Porcupine Health Unit's (PHU) Community Health Status Report 2014 indicates that the population served by the PHU is generally in poorer mental health than elsewhere in the province. For instance, the prevalence rate of self-reported mood disorders (7.3% compared with 6.7%), the prevalence rate of self-reported anxiety disorders (5.9% compared with 5.2%) and the rate of repeat hospitalizations because of a mental illness (15.7% compared with 10.7%) are higher than the provincial average. In addition, the report indicates that in the area serviced by the PHU suicide rates are three times higher than the provincial average.

Among youth from 10 to 19 years of age, the difference is even more significant: the rate is 24 times higher for girls, and 12 times higher for boys. Programs and initiatives are already in place in the targeted communities to lower the risks associated with mental health.

## MINTO COUNCELLING CENTRE statistics 2019 – 2021

Fiscal Year April 1 <sup>st</sup> - March 31 <sup>st</sup>	2019-2020	2020-2021	2021-2022 April 1 <sup>st</sup> – November 16 <sup>th</sup>
Individuals Served	666	523	406
Individuals Referred	664	570	406

Note: the above statistics only represents anyone over the age of 16, the numbers do not represent the overall statistics for Cochrane.



# COURSE OF ACTION

## Access to Mental Health Services

- ❖ Encourage workplaces to improve their staff members' work conditions by offering them free access to mental health services
- ❖ Identify community leaders who could get involved as volunteers to help reduce stigma and promote mental well-being with various social groups to which they belong. Research shows that such community leaders are lay health workers and that their interventions increase the demand for services while reducing stigma and barriers to care.

## Partnerships and Collaborations

- ❖ Pursue efforts of coordination of services related to planning and implementation of mental health services between community organizations working in this field.

## Quality of Life

- ❖ Maintain efforts to ensure an excellent quality of life for all residents and thus participate in the creation of a better environment promoting well-being.

## Mental Health Among Youth

- ❖ Develop education workshops (either in person or in an online stand-alone format) for parents in order to increase their awareness and to inform them on dangerous behaviors which have negative consequences on their mental health or that of their children (stress and anxiety, over-consumptions of social networks, harassment and bullying etc.)
- ❖ Work with various key partners in order to provide regional schools with more opportunities to raise awareness on mental health and to increase prevention. Indeed, research shows that health-led programs are more effective than school-led programs in curbing anxiety problems in youth.
- ❖ Prominently display mental health services in communities where there is no office in order to further promote the available services.
- ❖ Create new full time position dedicated to raising awareness on mental health, substance abuse and addiction. This new position could be funded by a grant or by a group of community organizations wishing to increase awareness and prevention, but who do not necessarily have the time to do so or who are not mandated to do so.

# SUBSTANCE ABUSE AND ADDICTION

In our community, the challenges associated with substance abuse and addiction are important risks for community safety and well-being. Indeed, the use of drugs, legal and illegal, represents a considerable problem. For instance, according to the Community Health Status Report 2014, published by the Porcupine Health Unit (PHU), the percentage of people who self-reported use of illicit drugs is higher in the region (50.6%) than elsewhere in the province (39.8%). As for overdoses from opioids, ambulance services from the PHU region received on average over 10 calls per week in that respect in the fall of 2020-21, a rate increasing at an alarming pace.

Finally, the Cochrane District Detox Centre (CDDC) received 1,365 demands in 2020, a majority of which had to be refused due to a shortage of available beds. The most recurring substance abuse among people admitted to the CDDC were alcohol (58%), amphetamines and other stimulants (53%), cannabis (45%), prescription opioids (27%) and cocaine (26%).

Moreover, the Ontario Provincial Police detachment of Cochrane has reported 229 calls related to possession of illicit drugs between 2018 and 2021.

## Most recurring substances among people admitted to the CDDC in 2019-20

Alcohol:	58%
Amphetamines and other stimulants:	53%
Cannabis:	45%
Prescription opioids:	27%
Cocaine:	26%

# COURSE OF ACTION

## Cooperation Between Agencies

- ❖ Maintain partnerships between agencies so that they are made aware of the services provided in our community and have the possibility to refer their clients when necessary.
- ❖ Develop an inventory of tools, programs and community projects on substance abuse and addiction in order to facilitate access to information on these subjects.

## Cyberaddiction

- ❖ Promote functions or applications such as Screen Time and Moment which allow parents to monitor the hours they or their children spend on social media in order to manage the risks associated with an excessive use of social media.

## Alcohol Addiction

- ❖ Encourage participation in initiatives such as server training programs or designated driver programs designed to mitigate consequences related to alcohol consumption.

## Opioid Addiction

- ❖ Support Porcupine Health Unit and Provincial initiatives for dissemination and sharing of free naloxone kits. Take an active part in the Porcupine Health Unit public awareness campaign on opioids and overdose prevention.

## Awareness-raising and Education

- ❖ Develop a checklist which will allow organizations to provide an overview of the awareness activities held within the current year. This tool would make it possible to identify gaps related to the different groups and subjects targeted by these initiatives. Examples of targeted groups could be elementary school pupils or elderly people, while examples of targeted subjects could be heavy consumption of alcohol or resisting social pressures.
- ❖ Educate different population groups on substance abuse and addiction realities, as well as on the concurrent disorders which may be associated with these.
- ❖ Plan more exchange opportunities, round-table meetings or information sessions on specific themes (e.g., management of risks associated with consumption) of which parents are the target audience.
- ❖ Plan and hold local and regional activities during the National Addictions Awareness Week.

## Current Services

- ❖ Maintain current services in order to continue to serve the population dealing with addiction and substance abuse problems.

# CURRENT OUTLOOK IN THE PANDEMIC CONTEXT

On March 11, 2020, the World Health Organization (WHO) declared that the outbreak of COVID-19 had reached pandemic proportions. The subsequent events had significant impact everywhere, including in the six communities targeted by the plan, and that, equally when it came to lifestyle and economy, as well as crime rate, housing, mental health, and substance abuse and addiction. The next pages discuss the impacts the pandemic has had on the major focus areas of this plan, considering each one separately in order to show how the pandemic has increased the related risks.



# CRIME IN THE PANDEMIC CONTEXT

The pandemic seems to have influenced crime-related trends everywhere in Canada, especially when it comes to domestic violence and family violence. Indeed, confinement seems to have led to many problems within households, such as seclusion, financial stress, family stress, childcare and loss of employment. Many representatives of regional community organizations indicated that they were concerned about the increasing number of calls related to family violence. As a matter of fact, according to Statistics Canada, a 4% increase of such calls has been reported during the first four months of the pandemic. In some regions, this increase even reaches 20 to 30%. It is important to note that such statistics have historically tended to underestimate the actual number of cases, and that many health professionals believe that the pandemic has increased this statistical bias. For instance, for certain abusers the pandemic has become a new means of gaining power over their victim who is now completely isolated from its social network and in a considerably more vulnerable position.

# HOUSING IN THE PANDEMIC CONTEXT

Access to housing is closely linked to poverty. At the beginning of the pandemic, many lost work hours, their job or even their business, which has resulted in a decline in income. According to an article published in the *Nouvelliste* in September 2020, the pandemic has resulted in a labour market downturn in the country. Indeed, according to this same article, the current number of jobs in the country is inferior by approximately 1.1 million jobs compared to the number of jobs before the pandemic. Thus, according to many experts, despite the benefits provided by the government to people whose income has been affected by the pandemic, poverty rates are on the rise in the country. In addition, the number of people making use of food banks due to a lack of financial resources has increased during the pandemic.

An article published in *L'Acadie nouvelle* revealed that according to the accounting firm BDO Canada, the revenues of "close to 40% of Canadians have deteriorated during the first wave of the health crisis (*L'Acadie nouvelle*, 2020). In addition, according to the same article, the people in Canada most vulnerable to losing control of their indebtedness seem to be the residents of Ontario, of British Columbia and of Alberta.

# MENTAL HEALTH IN THE PANDEMIC CONTEXT

The pandemic situation has also had a negative impact on the mental health of the Canadian population at numerous levels. For many, anxiety, worry and stress were amplified by the situation. Indeed, according to a study conducted by a researcher from the Royal Ottawa Hospital, anxiety and depression problems have significantly increased since the beginning of the pandemic. In fact, it was observed that in the country, among people who had never experienced mental health problems in the past, “one in three shows signs of anxiety disorder, and one in two shows signs of depression at the present time” (Radio-Canada, 2020).

As for those people who were already experiencing mental health problems before the pandemic, their symptoms have amplified, becoming more severe and more frequent. Furthermore, being isolated can bear a negative impact on the mental health of Canadians. In fact, 25% of Canadians live alone, and the fact of only seeing other people via videoconferencing and social media can be demoralizing.

Moreover, according to a study by the Centre for Addiction and Mental Health (CAMH), in Ontario, the levels of suicidal ideation and psychological distress experienced by students from grades 7 to 12 are higher than ever. Indeed, according to that same study, one out of six young people (16%) have claimed having seriously thought about committing suicide, one out of five youth (21%) indicated experiencing severe psychological distress, and one youth out of seven (15%) declared having harmed themselves intentionally in the last year, data which has worsened since the beginning of the pandemic. This same survey also reveals that young people who experience mental health problems generally do not know where to turn to get assistance.

# SUBSTANCE ABUSE AND ADDICTION IN THE PANDEMIC CONTEXT

Events brought on by the pandemic have had a serious bearing in the areas of substance abuse and addiction. Indeed, 42% of respondents to a survey conducted in Ontario stated increasing their intake of substances or their playing habits since the beginning of the pandemic. Furthermore, the opioid crisis has intensified since the beginning of the pandemic; the province has observed an increase of nearly 40% of opioid-related deaths. In the areas served by the Porcupine Health Unit, ambulance services received on average 10 calls per week in this respect in autumn of 2020, a total which represents almost the double of such calls in April 2020, which was an average of five to six a week. As for gambling problems, 28% of the respondents to a survey launched at the provincial level believe that they have been developing a gaming addiction since the beginning of the pandemic. In another sphere of addiction, according to a survey conducted in Ontario, approximately three-quarters of parents who had laid down rules limiting the time their children were to spend in front of a screen have waived those rules since the beginning of the pandemic.

Challenges brought on by the pandemic in the area of substance abuse and addiction are complex: not only have the addiction rates soared, but most of the awareness-raising activities had to be cancelled and a great number of services were disrupted or faced with barriers in the delivery of their services. For instance, the Cochrane District Detox Centre has noted an 11% increase in its services refusal rate due to a lack of bed availability during the first seven months of the year 2020-21.

# PERFORMANCE INDICATORS

Listed below are a few performance indicators which will help measure the progress in each of the targeted municipalities according to the four areas of focus, which are crime, housing, mental health, as well as substance abuse and addiction. A performance indicator is a value used to measure the impact of the adopted strategies and of the actions taken in the targeted communities (e.g., by comparing current data to data from a previous period).

## Crime

- ❖ Crime-related data
- ❖ Number of charges and calls related to certain categories of crime (e.g., domestic violence, possession of illegal drugs)
- ❖ Perception of crime in the communities

## Housing

- ❖ Project assessment
- ❖ Number of beds in long-term care facilities
- ❖ Number of affordable housing units
- ❖ Number of affordable subsidized housing units
- ❖ Number of housing units for elderly people
- ❖ Unemployment rate

## Mental Health

- ❖ Development of new partnerships
- ❖ Data related to mental health
- ❖ Number of services offered
- ❖ Number of calls
- ❖ Number of referrals
- ❖ Evaluation of community initiatives
- ❖ New services offered
- ❖ Residents' perception of mental health

## Substance abuse and addiction

- ❖ Development of new partnerships
- ❖ Data related to substance abuse and addiction
- ❖ Number of services offered
- ❖ Number of calls
- ❖ Number of referrals
- ❖ Evaluation of community initiatives
- ❖ New services offered