



# Hearst and Mattice – Val Côté Community Safety and Well-Being Plan

Adopted by Council for the  
Municipality of Mattice – Val Côté  
on October 25<sup>th</sup>, 2021

Resolution no. 21-233



# Table of contents

|  |    |
|--|----|
| MESSAGE FROM THE MUNICIPALITIES .....  | 3  |
| INTRODUCTION .....   | 4  |
| Social Development .....   | 4  |
| Prevention .....   | 4  |
| Risk Intervention .....  | 5  |
| Incident Response .....  | 5  |
| THE GOALS OF THE HEARST AND MATTICE VAL CÔTÉ COMMUNITY SAFETY AND WELL-BEING PLAN .... | 6  |
| PRIORITIES .....   | 6  |
| OUTCOMES .....   | 9  |
| BIBLIOGRAPHY.....  | 10 |



## MESSAGE FROM THE MUNICIPALITIES

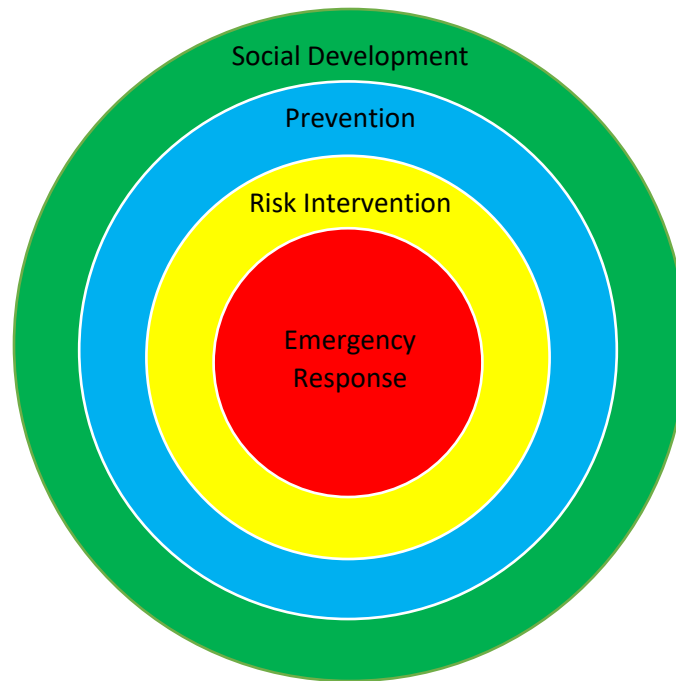
In January 2019, amendments to the Police Services Act (PSA) came into force which mandate every municipality in Ontario to prepare and adopt a community safety and well-being (CSWB) plan. The main goal of this plan is to identify the community safety and well-being priorities in Hearst and Mattice - Val Côté and to address them in upcoming years by using existing and additional resources from the community. In order to obtain the general public's input and provide a forum for their voices to be heard, a public survey was made available to the population in 2020. The survey generated a significant amount of responses, the results of which allowed us to identify the issues of concern and the priorities that need to be addressed in our communities.

For each of these priorities, an analysis of local data and local needs was conducted to identify strategies that will enable us to make our community better. The plan was drawn up by the Town of Hearst, in collaboration with the Mobilization Committee, and was then reviewed by the CRRIDEC (Centre régional de recherche et d'intervention en développement économique et communautaire). This plan is intended to be a guide on how to make better use of existing resources and on how all these resources can better work together to ensure the safety and well-being of our communities. As we move forward, our Community Safety and Well-Being Plan will remain a living document, allowing for revisions and updates as we adapt to changing environments and unforeseen circumstances. It is our hope that this plan will serve as a foundation, which can be built upon and embraced by our community. The strategies are the building blocks that we need to change people's lives for the better.

*The Town of Hearst and the Municipality of Mattice - Val Côté*



The Community Safety and Well-Being Plan has been established through the following framework:



- 1. Social Development** – Promoting and maintaining community safety and well-being  
Social development requires long-term, multi-disciplinary efforts and investments to improve the social determinants of health and thereby reduce the probability of harm and victimization. The key to successful development initiatives is working together in ways that challenge conventional assumptions about institutional boundaries and organizational culture, with the goal of ensuring that individuals, families and communities are safe, healthy, educated, and have housing, employment and social networks that they can rely on.
- 2. Prevention** – Proactively reducing identified risks  
Prevention involves proactively implementing evidence-based situational measures, policies or programs to reduce locally-identified priority risk to community safety and well-being before they result in crime, victimization and/or harm. Successful planning in this area may indicate whether people are participating more in risk-based programs, are feeling safe and less fearful, and that greater engagement makes people more confident in their own abilities to prevent harm. Efforts will be focused on developing and/or enhancing strategies in the social development area to ensure that risks are mitigated before they become a priority that needs to be addressed through prevention.

### **3. Risk Intervention** – Mitigating situations of elevated risks

Risk intervention involves multiple sectors working together to address situations where there is an elevated risk of harm. Risk intervention is intended to be immediate and prevent an incident, whether it is a crime, victimization or harm, from occurring, while reducing the need for, and systemic reliance on, incident response. Efforts will be focused on developing and/or enhancing strategies in the prevention area to ensure that individuals do not reach the point of requiring an immediate risk intervention.

### **4. Incident Response** – Critical and non-critical incident response

This area represents what is traditionally thought of when referring to crime and safety, which includes immediate and reactionary responses that may involve a sense of urgency. Planning will also be done in this area to better collaborate and share relevant information to ensure that the most appropriate service provider is responding.

In order for this local plan to be successful in making our communities safer and healthier, the municipalities and their partners need to refocus existing efforts and resources in a strategic way to enhance collaboration, information sharing and performance measurement. This can be done by identifying the sectors, agencies and organizations that need to be involved, the information and data sharing required and the expected outcomes of the plan. Different forms of collaboration, information sharing and performance measurement will be required in each of the planning areas.

Those involved in the plan need to continuously keep in mind how their respective organizational strategic planning in budgeting activities could further support strategies in the plan.

While planning will occur in all 4 areas, the majority of investments, time and resources will be spent on developing and/or enhancing social development, prevention and risk intervention strategies to significantly reduce the number of individuals, families and communities that eventually require an incident response. Developing preventative rather than reactive strategies will ensure efficiency, effectiveness and the sustainability of safety and well-being delivery in the Hearst and Mattice – Val Côté area.

This plan is not about reventing the wheel, it's about recognizing the great work already occurring within existing community agencies and organizations, and using collaboration as the main tool to do more with local experience and expertise. Hearst and Mattice – Val Côté have hard-working, knowledgeable and committed individuals who want to keep our communities safe and healthy.



## THE GOALS OF THE HEARST AND MATTICE - VAL CÔTÉ COMMUNITY SAFETY AND WELL-BEING PLAN

1. **Community collaboration:** be the catalyst for positive, working interconnection of all community agencies, resources and partners;
2. **Supporting those in need:** ensure provision of basic needs to all members of the community and assist the most vulnerable with accessible and timely resources and support;
3. **Safe community:** ensure the safety of all community members;
4. **Benefit our youth:** assist in the continued development, education and support of our youth (18 and under);
5. **Community development:** provide the communities with healthy and safe practices to further their development.

## PRIORITIES

| Priority Risks/Strategies  | Education & Awareness  | Community Partnerships  | Risk Intervention   |
|--|--|---|---|
| <p><b><u>SUBSTANCE USE &amp; ADDICTION</u></b></p> <p><b>Maison Renaissance:</b></p> <ul style="list-style-type: none"> <li>✓ 65% of clients identify alcohol as problematic and 40% identify cannabis as problematic</li> <li>✓ 34 % of clients are between the ages of 35 to 44</li> <li>✓ 70% of clients are from the northeast region</li> <li>✓ 49% of clients are also being treated for a mental health issues</li> </ul> | <ul style="list-style-type: none"> <li>✓ Awareness of substance use and addiction</li> <li>✓ Awareness and promotion of addiction services</li> <li>✓ Promotion of support groups</li> <li>✓ Encourage participation in initiatives such as server training or designated driver programs aimed at mitigating the consequences of alcohol consumption</li> </ul> | <ul style="list-style-type: none"> <li>✓ Coordination of services</li> <li>✓ Mobilization Committee</li> <li>✓ Personalized assessment for substance use and addiction</li> <li>✓ Partnership between agencies</li> <li>✓ Cooperation between services</li> <li>✓ Support the initiatives of the Porcupine Health Unit and of the province for the dissemination and sharing of free naloxone kits</li> </ul> | <ul style="list-style-type: none"> <li>✓ Quality of life</li> <li>✓ Services provided to youth</li> <li>✓ Education in schools</li> <li>✓ Plan more opportunities for discussion, roundtables or information sessions on specific topics (example: risk management of drug use) in which parents are the target audience</li> </ul> |

|   |  |   |  |
|---|--|---|--|
| <p><b>Cochrane District Detox Centre (CDDC) :</b></p> <ul style="list-style-type: none"> <li>✓ 1365 requests in 2019-2020</li> <li>✓ Most recurrent substances among those admitted: alcohol (58%), amphetamines and other stimulants (53%), cannabis (45%), prescription opioids (27%) and cocaine (26%).</li> </ul> <p><b>OPP:</b></p> <ul style="list-style-type: none"> <li>✓ 21 drug crime accusations in 2021 (11 for possession and 10 for trafficking)</li> <li>✓ 14 drug crime accusations in 2020 (8 for possession and 6 for trafficking)</li> </ul> |  |   |  |
| <p><b><u>MENTAL HEALTH</u></b></p> <p><b>Porcupine Health Unit (2014):</b></p> <ul style="list-style-type: none"> <li>✓ Mental health of the PHU Population is poorer than elsewhere in the province.</li> </ul> <p>Prevalence rate of self-reported:</p> <ul style="list-style-type: none"> <li>- mood disorders: 7.3% vs. 6.7%</li> <li>- anxiety disorders: 5.9% vs. 5.2%</li> </ul> <p>Rate of hospitalizations for mental illnesses is</p>   | <ul style="list-style-type: none"> <li>✓ Awareness and promotion of mental health</li> <li>✓ Promotion of mental health services</li> <li>✓ Encourage employers to improve working conditions</li> <li>✓ Campaign on mental health awareness to reduce stigma</li> <li>✓ Encourage organizations to improve working conditions for their staff by</li> </ul> | <ul style="list-style-type: none"> <li>✓ Coordination of services</li> <li>✓ Mobilization Committee</li> <li>✓ Access to mental health services</li> <li>✓ Services provided to the elderly</li> <li>✓ AIVO program</li> <li>✓ Multidisciplinary team</li> <li>✓ Lifesaver program</li> </ul> | <ul style="list-style-type: none"> <li>✓ Quality of life will lead to community well-being</li> <li>✓ Services provided to youth</li> <li>✓ Adaptability skills</li> <li>✓ Personal coping skills</li> <li>✓ Self-esteem</li> <li>✓ Self-efficacy</li> <li>✓ Ensure the offer of mental health services directly in schools through a worker that is present on site. Research shows that young</li> </ul> |



|   |   |  |   |
|---|---|--|---|
| <p>higher than the provincial average: 15.7% vs. 10.7%</p> <p>Suicide rates are 3 times higher than the provincial average.</p>   | <p>providing them with free access to mental health services</p> <ul style="list-style-type: none"> <li>✓ Education on appropriate medication</li> </ul>  |  | <p>people are more likely to seek help directly from schools than from community services.</p>  |
| <p><b><u>ROAD SAFETY</u></b></p> <p>Speed limit reduced to 40 km/hr in school zones.</p> <p>Speed radar indicates that 97% of drivers are going 40 km/hr or under on municipal roads.</p>   | <ul style="list-style-type: none"> <li>✓ Speed radar</li> <li>✓ Speed reduction in school zones</li> <li>✓ Flickering lights at crosswalks in school zones</li> <li>✓ RIDE program</li> <li>✓ Bike rodeo</li> </ul>                             | <ul style="list-style-type: none"> <li>✓ Municipalities and OPP</li> <li>✓ Municipalities and schools</li> <li>✓ Encourage families to make their children aware of road regulations</li> </ul>  | <ul style="list-style-type: none"> <li>✓ Teaching road regulations to students</li> <li>✓ Reducing speed limits in designated areas</li> </ul>  |
| <p><b><u>HOUSING</u></b></p> <p>53.8% - owner<br/>46.4% - tenants</p> <p>98.6% - suitable for private housing</p> <p>49.2% of private dwellings were built between 1961 and 1980</p> <p>79.2% of residents are spending less than 30% of their income on shelter costs</p> <p>51.8% of owners have a mortgage</p> | <ul style="list-style-type: none"> <li>✓ Promotion of different programs offered to seniors to enable them stay home longer</li> <li>✓ Programs available within the Cochrane District Social Services Administration Board (CDSSAB)</li> </ul> | <ul style="list-style-type: none"> <li>✓ Mobilization Committee</li> <li>✓ Personalized assessment for homelessness</li> <li>✓ Collaboration with the CDSSAB for low income housing</li> <li>✓ Housing units for seniors</li> <li>✓ Evaluate the possibility for a partnership between Résidence Taïga, Non-Profit Housing and CLFN to build a housing complex for seniors</li> <li>✓ Access to stable, appropriate and</li> </ul> | <ul style="list-style-type: none"> <li>✓ Quality of life</li> <li>✓ Developing incentives to build new housing or renovate existing housing</li> <li>✓ Approval for 12 additional long term care beds</li> <li>✓ Youth education</li> <li>✓ Access to / availability of resources, professional services and social supports</li> <li>✓ Housing in close proximity of services</li> <li>✓ Positive, cohesive community</li> </ul> |





|   |  |   |   |
|---|--|---|---|
| <p>Average shelter costs for owned dwelling: \$1,023</p> <p>Average value of dwellings: \$175,765</p> <p>Approximately 60 persons on waiting list to enter into Foyer des Pionniers</p> <p>In 2019, 1,361 people were on waiting list for access to subsidized housing in the District of Cochrane and 51.7% of them were over the age of 60.</p> |  | <p>sustainable housing</p> <p>✓ Explore the possibility for residents to create secondary units in their home or on their property (secondary suites) to accommodate an aging or other family member and identify potential barriers that could hinder such initiatives</p> | <p>✓ Establish healthy relationships with neighbors</p> |
|---|--|---|---|

## OUTCOMES

The expected outcomes of this plan are higher levels of civic involvement and pride and the creation of more positive and cohesive communities that are engaged, thriving, and growing.

- Enhanced communication and collaboration among sectors, agencies and organizations;
- Stronger families and improved opportunities for healthy child development;
- Healthier, more productive individuals that 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 of 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 the identification of trends, gaps, priorities and successes; and
- Reduced investment in and reliance on incident response.

## BIBLIOGRAPHY

1. Ministry of the Solicitor General (2020). Community Safety and Well-Being Planning Framework [Website]. Retrieved from <https://www.mcscs.jus.gov.on.ca/english/Publications/MCSCSSOPlanningFramework.html>
2. Canadian Municipal Network on Crime Prevention (2020). Together for Safer Canadian Municipalities [Website]. Retrieved from <http://safercities.ca/home/>
3. Statistic Canada (2021). Census Profile, 2016, Census [Website]. Retrieved from <https://www12.statcan.gc.ca/census-recensement/2016/dp-pd/prof/details/page.cfm?Lang=E&Geo1=CSD&Code1=3556076&Geo2=CD&Code2=3556&SearchText=Hearst&SearchType=Begins&SearchPR=01&B1=Housing&TABID=1&type=1>
4. Porcupine Health Unit (2014). Community Health Status Report [PDF Document]. Retrieved from <https://www.porcupinehu.on.ca/en/your-community/reports/community-health.pdf>
5. Ontario Provincial Police (2021). Report for the Hearst Police Services Board.

