

Community Safety and Well-Being Plan



City of Dryden, Machin and Area

July 2021

Prepared by MNP LLP



Acknowledgement

We would like to begin by acknowledging with respect, that we are in Treaty Three Territory and that the land on which we are gathered is the traditional territory of the Anishinaabe and Métis People.

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Message from the Chair

As Chair of the Joint Advisory Committee, I am pleased to provide this foreword for the launch of the Dryden, Machin and Area Community Safety and Well-Being Plan.

A sense of well-being and place is accomplished when members of the public express confidence in their safety and security, both actual and perceived. Measures that increase actual and perceived safety contribute strongly to cohesive and engaged communities.

Dryden, Machin and area are wonderful communities to live in, work, and play; with so much potential, and so many offerings of opportunity. It is imperative, however, that we acknowledge not all members of our communities are safe and feel secure.

This Plan is an important strategic document that enables us to gauge the community's thoughts about safety, and drive actions toward achieving increased opportunities and targeted resources to address and promote safety. The actions outlined in the Plan are designed to be steps toward stimulating and continuing wellness advancements.

The Dryden, Machin and Area Community Safety and Well-Being Plan 2021-2026 is one of the Councils' key strategic plans. Together with the strategic plans for each community, it outlines our purposeful planning framework – our vision for the municipality in which we all live – for the next four years.

The priorities and actions identified in this plan have been informed by local data and province-wide data, as well as comprehensive consultation with our key stakeholders - local residents and community-based organizations. The safety and well-being of our communities remain our greatest assets. Physical and mental wellness, feeling safe and secure, being connected to culture and community, and the ability to participate are crucial elements of a healthy community.

These factors, along with maintaining liveable, resilient communities, are the cornerstones of the Dryden, Machin and Area Community Safety and Well-Being Plan. As municipalities, we face complex health and social challenges, and it is everyone's responsibility to play a part in protecting and supporting the overall well-being and health of our residents. Partnerships and collaboration are essential to achieving this aspiration.

The impact of COVID-19 has certainly served to bring to the forefront the crucial function of locally relevant community safety and well-being plans. We are pleased to deliver this Plan which reflects feedback from across our diverse communities. It was wonderful to see the communities respond so overwhelmingly with their contributions towards the development of this Plan, by taking part in consultations through feedback surveys, working closely with staff of community-based organizations, and visiting website information platforms.

Residents of Dryden, Machin and Area enjoy the lifestyle opportunities that living in our region represents - liveability, amenity, heritage, and environment. Our communities are vibrant, diverse and

progressive. We live in an exciting period of growth and change which poses both challenges and opportunities for continuous improvement.

As the Joint Advisory Committee and in partnership with the Pillar Working Groups, we will continue to explore and maximize possibilities for our communities' health and prosperity, incorporating a strong public health and well-being focus as we plan for the future. We will also provide strong leadership to advance the long-term sustainability of improved service delivery through partnerships, diversified funding sources and economic efficiencies.

We will continue to promote opportunities and open spaces, both natural and urban, for our communities to come together with family and friends to enjoy, strengthening our long tradition of being caring, welcoming, and inclusive communities.

It is also essential that all levels of government hear the concerns that are important to our residents, and our Councils, municipal and community leadership will speak out to ensure that these issues are recognized.

This Dryden, Machin and Area Community Safety and Well-Being Plan builds upon a foundation of good governance and continues our purpose as adaptable, forward-thinking municipalities with a commitment to a brighter future for our residents.

On behalf of the Joint Advisory Committee, I would like to thank everyone who has contributed to this Plan, and sincerely offer our dedication to continue working together for the improved health and well-being of all our residents over the next four years.

Sincerely,

Marcel Penner

Marcel Penner, Director, MHA
Dryden Regional Health Centre

Joint Community Safety and Well-Being Advisory Committee

The Joint Community Safety and Well-Being Advisory Committee (“Joint Committee”) is a multi-sectoral committee established through existing relationships and partnerships of community organizations and institutions, all of whom offer services through a safety and wellness lens. The legislation requires that advisory committees include representation from the following sectors:

- Health/Mental Health Services
- Educational Services
- Community/Social Services
- Community/Social Services to Children or Youth
- Custodial Services to Children or Youth
- Municipal Council Member or Municipal Employee
- Representative of the Police Services Board or a Detachment Commander (or delegate)

In the Dryden, Machin and area context, it was also important to include housing providers, anti-racism/equity leaders, and safety for women services. The Joint Committee will continue to provide advice on complex social issues impacting the policies, programs and services of these communities, and monitor and adjust the plan as required in the future.

The Joint Committee has formal terms of reference that were approved by the Councils of the City of Dryden and Municipality of Machin in January of 2021. Voting member representation includes:

- Mayors or Alternates of the City of Dryden and Municipality of Machin
- One (1) citizen appointment from the City of Dryden
- One (1) citizen appointment from the Municipality of Machin
- One (1) representative (Trustee or board employee) from the Keewatin Patricia District School Board
- One (1) representative (Trustee or board employee) from the Northwest Catholic District School Board
- One (1) representative from the Dryden Police Services
- One (1) representative from the Dryden Ontario Provincial Police Detachment
- One (1) representative from Dryden Regional Health Centre
- One (1) representative from the Northwestern Health Unit
- One (1) representative from the Patricia Region Seniors Services
- One (1) representative from the Kenora-Rainy River Districts Child and Family Services
- One (1) representative from Kenora District Services Board

Non-voting members include:

- Four (4) Pillar Chairs/Champions of the Dryden, Machin and Area Community Safety and Well-Being Pillar Working Groups
- Anishinaabe Abinoojii Family Services – Dryden
- Community Living Dryden-Sioux Lookout
- Dryden Native Friendship Centre
- Employee of each municipality
- FIREFLY
- Hoshizaki House
- Probation and Parole
- Tikinagan Child & Family Services
- Migisi Sahgaigan (Eagle Lake First Nation)
- Waabogpmoow Saaga'igamoow Anishinaabeg (Wabigoon Lake Ojibway Nation)

The Joint Committee may find it appropriate and necessary to invite additional voting and/or non-voting members to the committee in accordance with required field of expertise contributions and guidance.

It is important to note that the Joint Committee is not an entity with the legislative or funding authority to ensure all gaps in services or potential opportunities for improvement are realized. To this point, the Joint Committee has been established by the City of Dryden and Municipality of Machin, both single-tier municipalities governed by the *Municipal Act, 2001*, of Ontario. Responsibilities of the City of Dryden and Municipality of Machin include:

- | | |
|---|--------------------------------------|
| • Water and sewage | • Parks and recreation |
| • Transportation | • Property assessment |
| • Planning new community developments and enhancing existing neighbourhoods | • Arts and culture |
| • Maintenance of the local road network, including snow removal | • Long-term care and senior housing |
| • Library services | • Economic development |
| • Police services | • Land ambulance |
| • Fire services | • Airports |
| • Emergency preparedness | • Provincial offences administration |
| • School safety guards | • Tax collection |
| • Public health | • Sidewalks |
| • Childcare | • Storm sewers |
| • Animal control and by-law enforcement | • Employment and social services |
| | • Social housing |
| | • Waste collection and recycling |

For Dryden and Machin, levies are paid to the Kenora District Services Board as well as the Northwestern Health Unit for services including:

- Public health
- Land ambulance
- Long-term care and senior housing
- Social housing
- Employment and social services
- Childcare services

With this in mind, the Joint Committee has been established to serve as a strategic backbone organization to align the efforts of existing service providers, as well as municipal and provincial levels of government.

Introduction

Background

Bill 68, the *Comprehensive Ontario Police Services Act, 2019*, requires that municipalities adopt a Community Safety and Well-Being Plan (CSWB Plan) by July 1, 2021. The plan must be developed in partnership with a multi-sectoral advisory committee that includes, at a minimum, representatives from a specific set of community agencies and service providers.

The origin of the Dryden, Machin and Area CSWB Plan began in November of 2016 with the establishment of a Situation Table for Dryden and the surrounding area. The purpose of the Situation Table was to better serve individuals with elevated risk factors by means of a coordinated service delivery model. In February 2017 and as a continuation of the work of this community steering committee, the Dryden Area Rapid Response Team (DARRT) was formed. The purpose of this response team is:

- To engage and unite human service sectors toward the collective understanding and identification of systemic issues and risk factors that are prevalent in our communities and present a barrier to desired quality of life conditions and outcomes.
- To provide a network of coordinated care and support for vulnerable populations in our communities, thereby promoting the crucial construct of risk/crisis prevention and management.

DARRT became operational in the City of Dryden in March 2017, with services extended to the municipalities of Machin and Ignace. At the time, the Risk Tracking Database identified the community's most emergent risk factors as:

- Mental health
- Alcohol/substance abuse
- Suicide

In November 2017, the partners involved in the creation of the DARRT identified the need for the development of a Dryden and Area Community Safety and Well-Being Plan. In recognition of this need, DAART representatives invited Migisi Sahgaigan (Eagle Lake First Nation), Ignace, Machin, and Waabogpmoow Saaga'igamoow Anishinaabeg (Wabigoon Lake Ojibway Nation) to help develop the plan.

A planning session was held over two consecutive days in February 2018. The community steering committee hosted partner consultations to identify the risks within all four communities, gaps in services, wellness priorities, and opportunities for strategic investments. At least 55 organizations including municipal leadership from Dryden, Ignace and Machin were in attendance. In June 2018, the steering committee released a draft report of this consultation process.

In October 2018, the community steering committee entered the first phase of Pillar Development, addressing the areas of:

1. Youth
2. Prevention/education
3. Treatment
4. Social development

The formal Terms of Reference for the Joint Committee was approved by the Councils of Dryden and Machin in January 2021. Terms of Reference to guide the purpose and work of the Pillar Working Groups have also been drafted.

Purpose of Community Safety and Well-Being Plan

The purpose of the CSWB Plan is to elevate the safety and overall well-being of all community members by developing a proactive, integrated strategy to address the identified risks of the community. As outlined within the *Police Services Act, 2018*, the intended benefits of a CSWB Plan include (2018):

- 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 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 identifying trends, gaps, priorities and successes
- Reduced investment in and reliance on incident response (pp. 5-6).

Note: Bill 68, the *Comprehensive Ontario Police Services Act, 2019*, repealed the *Police Services Act, Police Services Act, 2018*, the *Ontario Policing Discipline Tribunal Act, 2018*, and the *Policing Oversight Act, 2018*.

It became very clear as planning efforts and community engagement progressed that an intentional collective effort was needed across the stakeholder organizations working on social issues. All involved strongly supported an initiative to pull together the already diverse work underway to help coordinate efforts and improve the likelihood of realizing optimal impacts. With that said, this plan is intended to be adapted to the changing needs and information from the communities of Dryden, Machin and area.

Overall, the CSWB Plan is intended to provide a strategic framework for working in partnership with all stakeholders to promote and maintain community safety. As such, a comprehensive process was undertaken to develop the plan, which was grounded in research, data analyses, information from other initiatives, and community consultation and engagement. The CSWB Plan is an integral part of the existing municipal strategies for the City of Dryden and Municipality of Machin, as shown in Figure 1 and Figure 2 below:

Figure 1: CSWB Plan and Existing Plans for the City of Dryden



In 2019, the City of Dryden adopted the Community Strategic Plan 2020-2025. Residents, City Council and staff, united in their pursuit of continuous quality improvement, recognized the need to establish a results-oriented plan which would serve to support and guide sound-decision making practices and approaches. The Strategic Plan provides the long-term guidance and visionary leadership that empowers the City to advance priorities, strengthen municipal operations, identify key performance outcomes, and allocate the resources required to pursue implementation. Through this plan, the City has also committed to cultivating an organizational culture that values, supports, and promotes equity, human rights, respect, and accountability. This lens advances a Cultural Responsiveness commitment and collective dedication to achieving a more equitable, accessible, and inclusive environment for all who work, learn, and live within the community and area.

Figure 2: CSWB Plan and Existing Plans for the Municipality of Machin



In 2017, the Municipality of Machin recognized the need to re-energize and diversify their local economy and create positive change for the community to meaningfully participate in the ever-changing socio-economic conditions in the region. Understanding that renewal and population growth are crucial factors for continued provision of the quantity and quality of services currently available, Machin adopted a community strategic plan that outlines an overall community vision, defines five-year goals and objectives, and delivers an implementation plan that clearly illustrates how the vision and objectives will be achieved.

Community Engagement

The CSWB Plan has been developed and will be implemented through the collaboration of service providers and the communities. Community engagement for the development of the plan included:

- 1. Joint Community Safety and Well-Being Advisory Committee:** Advisory Committee members provided input regarding the plan to ensure the alignment of the objectives with existing programs and services as well as strategies existing in Dryden and Machin.
- 2. Pillar Working Groups / Community Organization Input:** Representatives of key government service providers and community organizations participated in working sessions between April 23rd, 2021 to May 17th, 2021, to provide insights on:

- Current state and supporting statistics
- Vulnerable populations
- Existing programs and service
- Risk and protective factors
- Gaps and barriers
- Pillar objectives, target outputs/outcomes, and working groups

Table 1 provides a comprehensive list of the working session participants:

Table 1: Working Session Participants

Prevention / Education	Supporting Our Youth	Treatment	Social Development
• City of Dryden • Community Living Dryden-Sioux Lookout • Dryden Native Friendship Centre • Dryden Police Service • Dryden Regional Health Centre • Hoshizaki House Dryden District Crisis Shelter • Kenora District Services Board • Kenora-Rainy River Districts Child and Family Services • Northwestern Health Unit • Ontario Provincial Police • Paawidigong First Nations Forum	• City of Dryden • Dryden Area Family Health Team • Dryden Native Friendship Centre • Dryden Police Service • Dryden Public Library • FIREFLY • Keewatin Patricia District School Board • Kenora District Services Board • Kenora-Rainy River Districts Child and Family Services • Northwestern Health Unit	• City of Dryden • Dryden Native Friendship Centre • Dryden Regional Mental Health and Addiction Services • FIREFLY • Teen Challenge Dryden	• Canadian Mental Health Association • City of Dryden • City of Machin • Dryden Food Bank • Dryden Police Service • Dryden Regional Health Centre • FIREFLY • Hoshizaki House Dryden District Crisis Shelter • Kenora District Services Board • Kenora-Rainy River Districts Child and Family Services • Northwestern Health Unit • Patricia Region Senior Services Inc

3. Working Circle Committee and Dryden Area Anti-Racism Network (DAARN): Board members from DAARN as well as representatives from the Working Circle attended a working session on May 12th, 2021. The topics discussed included:

- Confirmation of the Working Circle Committee and DAARN representatives
- Confirmation of current program, services, and initiatives

- Identification of gaps in services related to marginalized populations in Dryden and Machin
 - Objectives
 - Target outputs/outcomes
 - Working groups
4. **Machin Working Session:** Representative(s) from the Council of the Municipality of Machin, Points North Family Health Team/Machin Medical Group, and the Municipal Clerk Treasurer were invited to a working session on May 17th, 2021 to provide insights on:
- Current state and supporting statistics
 - Vulnerable populations
 - Existing programs and service
 - Risk and protective factors
 - Gaps and barriers
 - Pillar Working Group objectives, target outputs/outcomes, and working groups
5. **General Community:** 916 community members provided input to this process through a survey that was made available online as well as in print at Dryden City Hall, the Machin Municipal Office, and FIREFLY Dryden. Community members were informed of the survey through the Dryden and Machin municipal websites, notices to social media accounts, Dryden media, and through the Joint Committee and Pillar Working Groups. The results of the survey may be found in Appendix 1.

Please Note: Questions 2, 24, and 28 of the survey have been removed for confidentiality purposes as they were open-ended questions and contained information that could potentially identify the respondent.

Community Safety and Well-Being Plan

Mission

In accordance with the Ministry of Community Safety and Correctional Services Community Safety and Well-Being Planning Framework (2018), “the ultimate goal of this type of community safety and well-being planning is to achieve sustainable communities where everyone is safe, has a sense of belonging, opportunities to participate, and where individuals and families are able to meet their needs for education, health care, food, housing, income, and social and cultural expression. The success of society is linked to the well-being of each and every individual” (paras. 4).

To this end, the following mission has been established for this plan:

We will bring people together to advance inclusion, build upon our resilience and strengthen our community connections for a safer Dryden, Machin and Area.

Guiding Principles

The CSWB Plan is guided by four underlying principles. These principles are important considerations within every pillar and objective.



Community-Led Collaboration: The CSWB Plan will be guided by the principles associated with a Collective Impact Model, which will include the establishment of backbone support provided by the Joint Community Safety and Well-Being Advisory Committee, a common agenda, shared measurement, mutually reinforcing activities, and continuous communication. Citizens and community organizations are recognized as essential assets in our social infrastructure with the role of government and institutions as supportive rather than directive.



Anti-Racism / Anti-Oppression: The CSWB Plan will acknowledge principles of belonging and health equity, and purposefully seek to address inequalities of race, age, gender, ability / disability, religious background, sexual orientation, social class, geographic origin / current location, and educational attainment / ability.



Person-Centered Care: The CSWB Plan will endorse an approach wherein a person’s whole experience of care is considered to promote coordination and continuity in the physical, cultural and psychosocial environments of health and well-being support systems. Work plans and goals will be evaluated for accessibility, flexibility, and ease of navigation through the multiple lenses of a ‘no wrong door’ approach, warm-handoff referral practice, and strength-based, harm reduction practices that provide the care and support people need when they need it, and how they need it.



Data Informed Practice: The CSWB Plan will develop work plans and key performance indicators that are reflective of the safety and well-being needs of the community, as demonstrated through locally-informed data sets for all ages and stages of life.

Goals

The figure below identifies the three primary goals of the CSWB Plan reflecting input from the Joint Committee and community members that participated in the survey.

Figure 3: Overall Goals of the CSWB Plan



Indicators

Key performance indicators have been developed to measure progress toward the overarching goals of the CSWB Plan. The table below outlines each overall goal and applicable key performance indicators.

Table 2: Overall Community Safety and Well-Being Plan Goals and Target Outcomes

CSWB Plan Goals	Target Outcomes
Meaningful multi-sectoral collaboration enhancing service provision to community members with high risk factors	- Enhanced communication and collaboration amongst the sectors, agencies, and organizations - 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 - More effective, seamless service delivery for individuals with complex needs

CSWB Plan Goals	Target Outcomes
	• New opportunities to share multi-sectoral data and evidence to better understand the community through identifying trends, gaps, priorities, and successes • Reduced investment in and reliance on incident response
Safe and healthy community members	• Stronger families and improved opportunities for healthy child development • Healthier, more productive individuals that positively contribute to the community • Enhanced feelings of safety and being cared for, creating an environment that will encourage newcomers to the community
Meaningful community engagement and inclusion that improve community safety and well-being	• Increased engagement of community groups, residents and the private sector in local initiatives and networks • Increased awareness, coordination of and access to services for community members and vulnerable groups

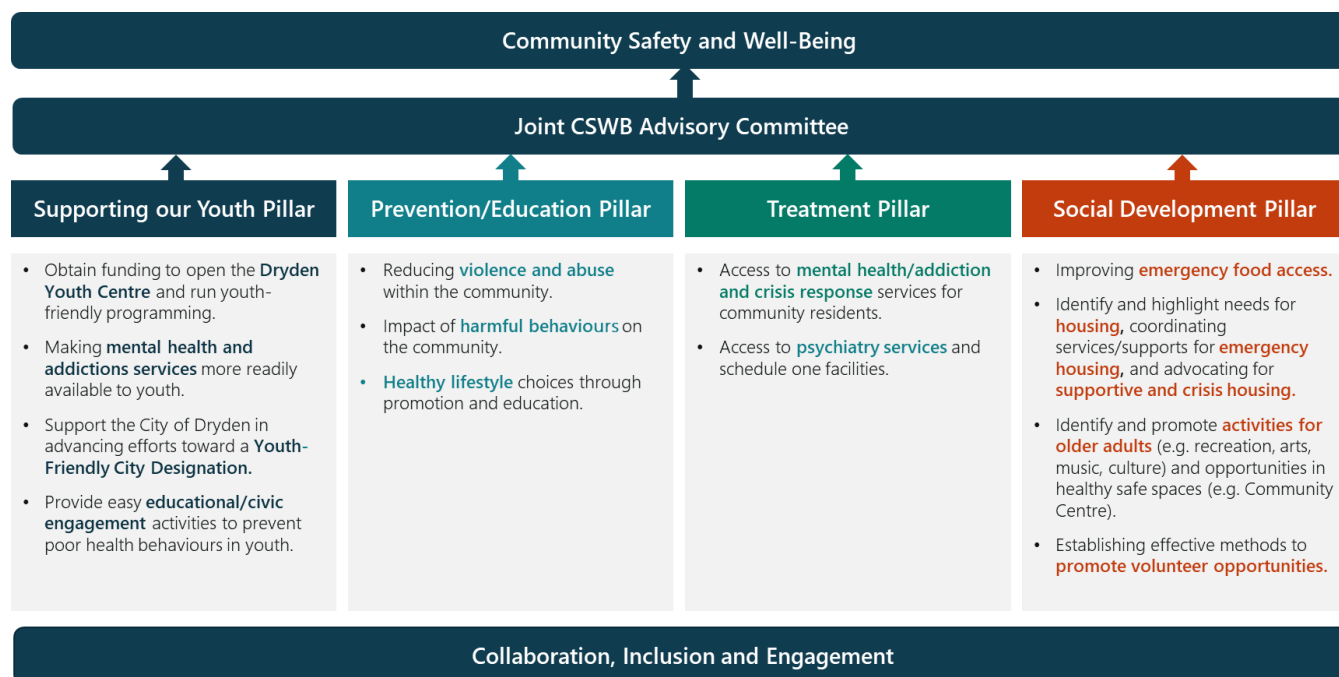
Four Priority Pillars of Focus

The Joint Committee and overall CSWB Plan are supported by the following four pillars that were identified during working sessions with more than 55 organizations in 2018:

- Supporting Our Youth
- Prevention / Education
- Treatment
- Social Development

To ensure the CSWB Plan is able to adjust to changing needs and demands, the four Pillar Working Groups will receive and provide feedback to organizations and citizens regarding the focus areas for each respective pillar. Providing a formal mechanism for organizations and citizens to provide input will help to ensure that the CSWB Plan is adaptable to changing needs and utilizes all available resources to achieve specific outcomes. Figure 4 outlines the connection between the working groups, as well as their respective focus areas and community engagement opportunities.

Figure 4: Community Safety and Well-Being Organizational Chart



The Joint Committee will advise the Councils of the City of Dryden and the Municipality of Machin on future directions with respect to community safety and well-being in these communities.

In-depth information for each of the four Pillar Working Groups will be provided below and include:

- Summary of the pillar as well as the focus areas (i.e. challenges the pillar seeks to address).
- A brief discussion of the current state and supporting statistics providing contextual information regarding the focus areas.
- Identification of characteristics associated with vulnerable populations regarding the focus areas of each pillar. For example, age, ethnicity, and/or employment status.
- Contributing factors regarding the focus areas and vulnerable populations. Specifically, risk factors that increase the vulnerability or likelihood that an individual experiences a negative outcome. This also includes protective factors that decrease the vulnerability or likelihood that an individual experiences a negative outcome.
- Outline of applicable programs and services that exist within Dryden, Machin and Area that address the focus area(s) of the pillar.
- Gaps in and barriers to accessing applicable services to help address the identified focus areas and risk factors.
- Finally, strategic information for each pillar including:
 - Objectives – the specific achievable outcomes that each pillar will focus to achieve.
 - Target Outputs/Outcomes – the short, intermediate, and long-term measurable results that will be used to establish if an objective is achieved or not.

- Working groups – the groups/organizations responsible for ensuring the objectives identified are achieved.

Identified Trends

Based on an analysis of the information provided to complete the CSWB Plan the following trends have been identified:

- **Risk Factors:** The most frequently identified risk factors include trauma, mental health and addictions, unemployment, involvement with the justice system, insecure housing, low socioeconomic status, unemployment, and family breakdown/social isolation. Further, lack of access to services was frequently mentioned due to unaffordable or unavailable transportation, uncoordinated services, long wait times or non-existent services, and limited culturally appropriate care. Generally, these risk factors were understood by stakeholders as interrelated with one another. For example, an individual may not be receiving the support they need to address traumatic experiences that are leading to substance abuse and in turn a lower likelihood of securing gainful employment resulting in a higher likelihood of experiencing poverty and housing insecurity. With this understanding of risks, most working session participants agreed that services need to be coordinated to ensure individuals receive the multifaceted care they require to address their multi-layered and complex needs.
- **Vulnerable Populations:** When considering all characteristics identified by working session participants as well as secondary research, the most vulnerable individuals are from marginalized populations that are experiencing mental health and addiction issues, as well as poverty and social inequity. Primarily, youth, Indigenous, individuals with a disability, 2SLGBTQ, and senior community members were identified as vulnerable populations.
- **Protective Factors:** Most participants of the working sessions identified gainful employment, educational, recreational, and volunteer opportunities as well as stable housing and supportive family and peers as factors that would help mitigate the identified risks. Further, community and support services providing cultural activities as well as mental health and addiction counselling were identified as protective factors to help address the identified risks.
- **Gaps in Services:** Specific gaps in services that were mentioned by working session participants included the absence or lack of healing lodges, homeless shelters, residential addiction treatment facilities, affordable and accessible transportation (public), and psychiatric services. Regarding service provision, a consistent gap in services identified is the limited hours of operation in the evenings and on weekends for all services. Further, affordable and accessible transportation and a lack of access to the internet were noted as being a reason that exacerbates gaps in services. Finally, limited culturally appropriate and translation services were noted as being gaps in existing services.
- **Cross-Cutting Actions:** The following activities have been identified as joint responsibilities for all four Pillar Working Groups:

- Conduct an annual review of performance measures and targets for each priority pillar and strategic initiative.
- Work with service agencies to assess local community health needs in specific areas and to advance high-quality local health services.
- Develop and conduct annual Public Safety and Quality of Life surveys to gather data to inform the future evolution of the CSWB Plan.
- Support the use of data analysis and information sharing for program design and delivery in all priorities.
- Publish public safety performance measures and targets on a central platform and in a user-friendly and accessible format.
- Continue to convene the Joint Advisory Committee with partner agencies and residents to expand links between the community, programs and service delivery providers. Further, continue to connect with all stakeholders to expand the reach of community safety initiatives in diverse communities.

Data and information regarding community safety and well-being that is specific to Dryden and Machin are limited. Further, there is no central database or collective understanding amongst stakeholders as to what data points are collected by respective organizations. Consequently, there are aspects of the CSWB Plan that are reliant on the perspective of key stakeholders (i.e. service providers) and cannot be corroborated with supplementary statistics. These are not issues specific to Dryden and Machin as data collection and analysis within and between organizations is a complex and resource-intensive endeavour. With that said, there are opportunities for improvement regarding the collection, storage, and analysis of data and information in the future to help inform the CSWB Plan as it is implemented and further developed by the City of Dryden and Municipality of Machin. This plan will serve as a guiding document for the collection and analysis of data and information moving forward that in turn will help to inform citizens and decision makers in matters related to community safety and well-being.

Finally, the ongoing exploratory work of the Nuclear Waste Management Organization (NWMO) is important to highlight. Specifically, an economic impact report completed by AECOM in 2015 estimates that,

If a community in the area near Ignace was able to capture 40 per cent of benefits during the operations phase of the Adaptive Phase Management Project, this would represent approximately 536 additional households in the community to accommodate the employees....A population increase of this magnitude would also result in a need for increased infrastructure and social services and could attract additional retail and services to the community (p.20).

As a regional leader and essential service, retail and transportation hub, Dryden is a neighbouring community very near the area of the proposed site for the Deep Geological Repository (DGR). As such, it is reasonable to anticipate that Dryden will be significantly impacted by the forecasted population and community growth noted in the AECOM report, as well as the Project Economics: Employment background report released by the NWMO in 2016, should the DGR be developed in this region.

In acknowledging the potential economic benefits of the Adaptive Phased Management project of the NWMO, we must also consider the possibility of impacts to the environment, increases in food prices, rental availability and cost, demand for housing, emergency responders, health care providers, and other core and supportive community services. Consequently, the following workplan of the CSWB Plan for Dryden, Machin and Area has laid the foundation to begin anticipating and accommodating projected growth and additional pressures to the existing social safety and well-being ecosystem. Specifically, the CSWB Plan shall serve to further inform and validate future data acquisition efforts, thereby advancing purposeful examination of safety and well-being in the context of sustainability as we work to accomplish Dryden's Community Capacity Study, Business Gap Analysis, and additional strategic planning projects currently under review.

Inclusion and Community Engagement

Context

Description

A critical success factor for all strategic plans is buy-in from key stakeholders and the general public regarding the development as well as the implementation of the plan. To this end, inclusion and community engagement are two foundational mechanisms for ensuring buy-in. Inclusion involves equal access to opportunities and resources for people who might otherwise be excluded or marginalized, such as those who have physical or mental disabilities and members of other minority groups.

Community engagement includes processes and activities that seek to involve community members in providing important insights and perspectives that inform sustainable and salient outcomes. The CSWB Plan for Dryden, Machin and area has been developed utilizing these two mechanisms to ensure buy-in from key stakeholders and the general public.

Current State

In the development of this plan, engaging individuals under the age of 24 as well as Indigenous and new Canadian community members was a challenge. To this point, only approximately 14% of individuals that completed the community survey were between the ages of 12 and 29 and only approximately 10% of all respondents self-identified as being Indigenous. Based on the 2016 Census data, individuals aged between 10 and 29 represent approximately 22% of the population in Dryden and 18% of the population in Machin. Furthermore, Indigenous community members represent approximately 19% of the population in Dryden and 24% in Machin. Ideally, ongoing inclusion in the CSWB Plan will reflect these population dynamics for both communities.

Acknowledging these gaps in representation, strategic efforts will be made going forward to ensure engagement from these two community groups are improved. For improving Indigenous representation, The Working Circle Committee has been established to:

- Identify issues important to Dryden's Indigenous population. These would include things such as lifestyle issues, social issues, amenities Indigenous people are looking for and other issues impacting their experience living in the community, positive or negative.
- Identify actions the community could take to improve the experience of Indigenous people in Dryden.
- Identify actions or activities the community could take to bring the Indigenous and non-Indigenous community members closer together. These actions may start as small steps that lead to bigger moves over time.

- Identify opportunities for fostering positive relationships between Indigenous peoples and other community members and make recommendations to City Council to capture these opportunities.

Augmenting the Working Circle, the Supporting Our Youth Pillar Working Group will help to ensure youth are included within the ongoing development of the CSWB Plan. The Joint Committee will develop a comprehensive community engagement plan to align the efforts of the Working Circle and Supporting Our Youth pillar with an overall plan ensuring all community members are able to provide their input into the ongoing development of the CSWB Plan.

The City of Dryden is a central municipality for community members from Eagle Lake First Nation, Ignace, Machin and Wabigoon Lake Ojibway Nation. At the time of this CSWB Plan, the City of Dryden and Municipality of Machin are working together to complete the plan. However, due to the geographic proximity and the integrated nature of community members from each of the municipalities/Nations, strategic efforts will also be made to ensure alignment between all communities regarding community safety and well-being.

During the working sessions each Pillar Working Group, including Dryden and Machin representatives, identified a perceived stigma within each community pertaining to individuals experiencing mental health and addiction issues. This stigma is perceived to be a barrier for individuals becoming integrated within each community as well as seeking and receiving support. No specific information is available to corroborate these perceptions. However, a team led by the Canadian Mental Health Association has been established to develop and implement a public, educational campaign with the goal of eliminating the stigma regarding mental health and addiction within Dryden and Machin.

Finally, it is important to note that efforts to improve inclusion and community engagement will be made to the degree possible acknowledging the limitations that have been realized due to COVID-19. Some efforts have been placed on pause, although will resume as soon as possible. For example, tablets will be made available to Indigenous community members at the Dryden Native Friendship Centre to help increase input into the CSWB Plan.

Objectives

The following table outlines a key objective regarding inclusion and engagement that is a high priority for the CSWB Plan:

Table 3: Inclusion and Community Engagement Objectives

Objective	Description	Target Completion
Establishing a comprehensive community engagement plan	Establish a formal process to include community member input with an emphasis on youth and Indigenous community member participation.	2022
Eliminating mental health and addiction stigma public education campaign	Stigma is a negative stereotype, that is perceived to be a challenge for individuals experiencing mental health and addiction issues. Specifically, the stigma around mental health and addiction is perceived to impact how others judge individuals experiencing mental health and addiction issues and is a barrier to accessing support services and engaging with the community.	2022
Integrating cultural responsiveness into strategic decision making related to the CSWB Plan	Cultural responsiveness is the ability to effectively interact with, and respond to, the needs of diverse groups of people in the community. Being culturally responsive is a process that begins with having an awareness and knowledge of different cultures and practices, as well as one's own cultural worldview. It involves being open to, and respectful of, cultural differences and developing skills and knowledge to build effective cross-cultural relationships. It also includes developing strategies and programs that consider social and historical contexts, systemic and interpersonal power imbalances, acknowledge the needs and worldviews of different groups, and respond to the specific inequities they face.	2022

Target Output/Outcomes

The specific target outputs/outcomes for the community engagement plan are shown in the following table:

Table 4: Inclusion and Community Engagement Target Outputs/Outcomes

Objective	Short-term	Intermediate	Long-term
Establishing a comprehensive community engagement plan	Developing a robust engagement plan tailored to CSWB Plan objectives.	Community engagement is central to the success of the service and program interventions of this plan in that it provides residents with a clearer understanding of the specific health issues impacting their communities, their root causes, and the availability of resources and assets to address them. Greater representation from Indigenous and youth community members through engagement opportunities enacted compared to the 2021 CSWB Plan Survey.	Community engagement will involve those affected in understanding the risks they face and involve them in response actions that are acceptable and promote more equitable health opportunities for everyone. Community engagement agendas and activities will be designed with community members, rather than approaching them as passive recipients. Strengthened bonds between community, service providers and institutions, leading to increased collaboration around priority issues. Support provided for partnerships to reclaim data for reflection, improvement and measuring progress towards community safety and well-being. Partner with researchers to identify or co-develop “metrics that matter” to our local communities, reflecting community-determined strategies.

Objective	Short-term	Intermediate	Long-term
Eliminating mental health and addiction stigma public education campaign	Identify perception of mental health and addiction issues amongst community members.	Develop an educational campaign to address the stigma regarding mental health and addiction.	Increase awareness of community members about the harmful effects of stigma for individuals living with a mental health and addiction illness by providing literacy campaigns aimed at reducing negative stereotypes.
Integrating cultural responsiveness into strategic decision-making related to the CSWB Plan	Identifying gaps in knowledge that exist amongst Pillar Working Group members regarding the following concepts related to cultural responsiveness: • Ethnicity (e.g., racialized communities, Indigenous communities) • Gender identity and sexual orientation (e.g., lesbian, gay, bisexual, transgender, transsexual, 2 spirited, intersex, queer, and questioning) • Religion • Socioeconomic status • Education • Age (e.g., seniors, youth) • Living with a disability • Citizenship status (e.g., newcomers, immigrants, refugees) • Regional location (e.g., living in northern, rural, remote areas)	Cultural and traditional knowledge will be emphasized during the engagement process for strategic decision-making. Culturally responsive practices will involve recognizing and incorporating the assets and strengths all residents bring to the community and ensure that learning and engagement experiences are relevant to all people. To this end, recommendations to address identified gaps in knowledge regarding cultural responsiveness will be shared.	Integrating the mandate of the Working Circle to further develop and promote positive relationships between Indigenous and non-Indigenous members of the community. Investing in building and supporting the capacity of local leaders to facilitate meetings and conversations across racial, cultural and other differences. Such facilitation should enable participants to learn from inevitable tensions. Identify service and program delivery approaches that have the capacity and flexibility to respond to the broader sociopolitical context and dynamics that shape daily realities for vulnerable populations. Strategies and supports are identified to build welcoming relationships, mitigate the effects of stereotype threat, and provide culturally relevant opportunities for diverse populations.

Working Groups

The following table identifies the organization(s) responsible for ensuring the objectives are achieved by the specified dates with success being measured in reference to the identified target outputs/outcomes:

Table 5: Inclusion and Community Engagement Working Groups

Objective	Lead	Members
Establishing a comprehensive community engagement plan	The Joint Committee	Member from all four Pillar Working Groups, the Dryden Native Friendship Centre, the Working Circle Committee and municipal representation
Eliminating mental health and addiction stigma public education campaign	Prevention and Education Pillar Working Groups	Member from all four Pillar Working Groups
Integrating cultural responsiveness into strategic decision-making related to the CSWB plan	The Joint Committee	Member from all four Pillar Working Groups, the Dryden Native Friendship Centre, the Working Circle Committee and municipal representation

Supporting Our Youth

Context

Description

Inclusion within a community through involvement in activities is key to supporting youths' development, mental health and well-being and is a contributing factor to overall well-being. Consequently, this pillar focuses on ensuring youth have a sense of inclusion within their community through involvement in activities in safe spaces and by promoting general well-being and a holistic healthy lifestyle. It also focuses on supporting those at risk of mental health and/or behavioural issues by providing access to services.

The importance of social connectivity, feeling close and connected to others, has been linked to positive overall physical and mental health and can decrease the risk of obesity, poverty, and poor school performance. Youth that feel connected through a well-rounded support system of friends, family, and local organizations are better able to access support to avoid crisis, reducing their likelihood of requiring emergency services. Dryden and Machin acknowledge that a strong sense of community, providing safe spaces, promoting well-being and healthy activities are all important elements required to support their youth.

In recognition of these facts, this pillar will focus on the following areas:

- Obtain funding to open the Dryden Youth Centre and run youth-friendly programming.
- Making Mental Health and Addictions services more readily available to youth.
- Support the City of Dryden in advancing efforts toward a Youth Friendly City Designation.
- Provide easy educational/civic engagement activities to prevent poor health behaviours in youth.

Current State and Supporting Statistics

Demographics

Table 6 below shows the age distribution in Dryden and Machin based on the 2016 Census. During the working session, the definition of youth was confirmed as being an individual between the ages of 10 and 29. With that definition, youth make up approximately 22% and 18% of all residents in Dryden and Machin respectively. As a total number of individuals, there are approximately 1,965 youth in both Dryden and Machin.

Table 6: 2016 Census Age Distribution for Dryden and Machin – Youth

Age	Dryden 2016	Machin 2016	Dryden 2016 (%)	Machin 2016 (%)
0 to 9 Years	765	75	10%	8%
10 to 14 Years	410	40	5%	4%
15 to 19 Years	485	55	6%	5%
20 to 24 Years	475	55	6%	5%
25 to 29 Years	410	35	5%	4%
30 Years and Older	5,200	730	67%	74%
Total	7,745	990	99%*	100%

*Totals may not add up to 100% due to rounding

Education and Recreation for Youth

In Dryden, there are four elementary schools and one high school that are administered by the Keewatin Patricia School Board and Northwest Catholic School Board (Table 7). Additionally, there are four licensed childcare programs providing childcare services for residents. Machin has one elementary and junior high school that is administered by the Keewatin Patricia District School Board and no licensed childcare programs.

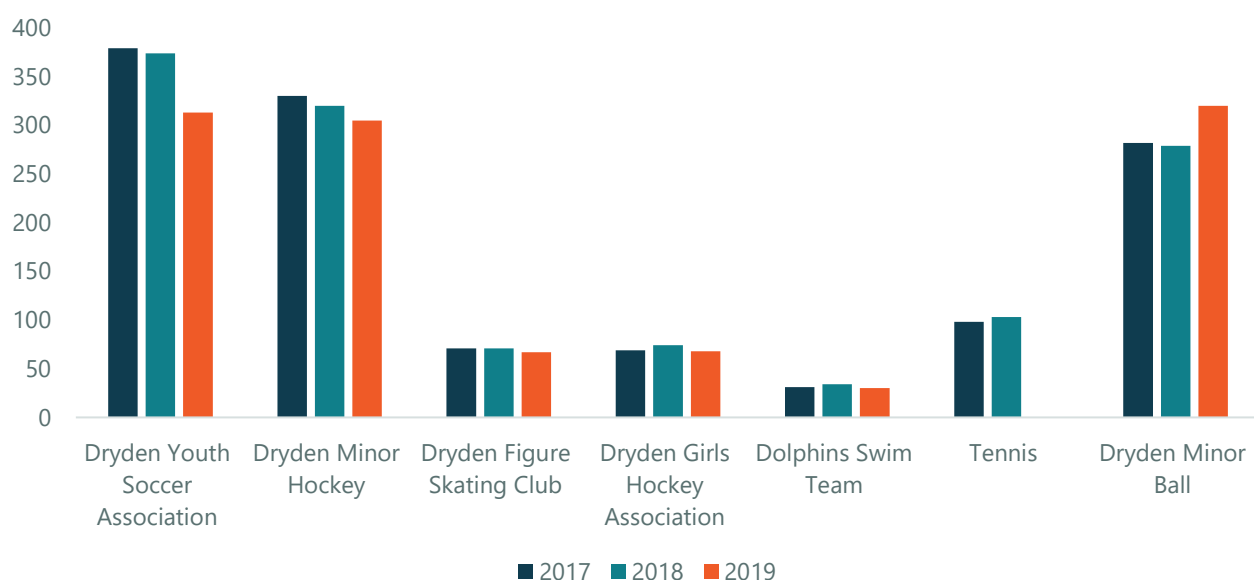
Table 7: Summary Table of Kindergarten to Grade 12 Schools in Dryden and Machin

School	Grades	Language
Ecole Catholique de l'Enfant-Jesus	Kindergarten to Grade 8	All French
New Prospect School	Kindergarten to Grade 8	English Only
Open Roads School	Kindergarten to Grade 8	English Only
St. Joseph's School	Kindergarten to Grade 8	French Immersion
Dryden High School	Grade 9 to Grade 12	French Course
Lillian Berg School	Kindergarten to Grade 8	English Only

There are several recreational opportunities in Dryden with youth soccer, hockey and minor ball having the highest registration numbers (Figure 5). From 2017 through to 2019, registrations in most sports declined except for girl's hockey and swimming which saw registrations increase in 2018 before declining again in 2019. Overall, recreational registrations have been relatively stable between 2017 and

2019. Machin does have recreational opportunities for youth, such as hockey and social clubs. However, no statistical information is available to identify trends over time.

Figure 5: Annual Recreational Registration Numbers for the City of Dryden Between 2017 and 2019



Youth and Mental Health

Annually, one in five Canadians experience a mental illness or addiction problem and 70% of mental health challenges begin during childhood or adolescence (Smetanin, P, 2011; Government of Canada, 2006). Further, 34% of students in Ontario have been found to be experiencing moderate to serious psychological distress, which are symptoms of anxiety and depression (Boak et al., 2016). Boak et al. (2016) also noted that 28% of students in Ontario they were interested in speaking with someone about a mental health issue in the past year, however, they did not know where to go.

Pertaining to Dryden, between 2008 and 2015 there were 120 hospitalizations per 10,000 per year related to mental and behavioural disorders for individuals age 10 to 24 (Lunny & Jibb, 2017). Of comparator communities, Dryden had a lower hospitalization rate compared to Sioux Lookout, Kenora, and Red Lake. However, Dryden had a higher hospitalization rate of individuals age 10 to 24 compared to the provincial rate. The report did not include specific information for youth residing in Machin.

Further, the Northwestern Health Unit Child and Youth Mental Health Outcomes Report 2017 states that between 2008 and 2015 Dryden had approximately 19 hospitalizations per 10,000 per year due to intentional self-harm for individuals age 10 to 24. This is among the lowest in the region but almost double of the province of Ontario.

To augment the information above, the following information has been provided by services that support youth experiencing a mental health crisis as well as family violence in Dryden:

- 29 pediatrics patients (age 0 to 18) received crisis services in 2020. An additional 39 pediatric patients received support from the Child and Youth Mental Health Outreach Worker (CYOW) in 2020. During the same year, there were 61 pediatric patients that required child and youth mental health services after hours (between 3:00 pm and 11:00 pm). These 61 individuals required 210 after hours services with 38 of the 210 occurring in the emergency room.
- In 2020, FIREFLY provided brief mental health services to approximately 64 youth and school-based mental health services to approximately 11 youth in Dryden.
- Between 2018 to 2021 the Hoshizaki House provided counselling services to a total of 88 youth from Dryden.

No comparable information was provided for similar services within Machin.

Vulnerable Groups

Working session input as well as secondary research has identified the following characteristics of vulnerable youth:

- Youth in and from care are less likely to graduate high school as well as more likely to be involved in the criminal justice system to youth overall (Brownell et al., 2020).
- Growing up in poverty as a child is associated with more challenges regarding nutrition, completing homework, experiencing and addressing learning disabilities, as well as pursuing post-secondary education (McMain et al., 2011). Furthermore, an estimated 20 to 25% of children that grow up in poverty are likely to remain impoverished into their adult life (Feed Ontario, 2019).
- Underhoused youth who do not have a permanent residence were perceived to be a characteristic of vulnerable youth by key stakeholders. To this point, youth between the ages of 16 and 18 were identified by stakeholders as being vulnerable since they require guardianship for securing rental agreements to secure housing. However, they may not have a legal guardian due to their respective family dynamics.
- Input from stakeholders indicated that 2SLGBTQ and Indigenous people are at higher risk of experiencing racism, homophobia, and transphobia. Also, Indigenous and 2SLGBTQ youth are more likely to engage in harmful behaviour such as smoking.

Contributing Factors

Risk Factors

The following risk factors have been identified as contributing to the likelihood of a youth experiencing negative safety outcomes:

- Substance abuse including drugs, alcohol, and tobacco by the youth and/or their family members
- Experiencing or history of trauma
- Low socioeconomic status

- Underhoused
- Food insecurity
- Lack of access to services
 - Uncoordinated services
- Lack of access to internet
- Lack of access to transportation
- Lack of knowledge regarding the dangers/health consequences of risky behaviour
- Marginalized population
 - 2SLGBTQ
 - Indigenous

Protective Factors

The following factors have been identified as important to mitigate/prevent youth from becoming at high risk of negative safety outcomes:

- Mentor and peer support
- Mental health programming within schools: health classes, presentations, counselling
- Community programs including, but not limited to:
 - Indigenous and Friendship Center – helping to educate those about aboriginal culture
 - Gay Straight Alliance
- Recreational opportunities
- Employment opportunities
- Volunteer opportunities

Identified Programs and Services

The following table outlines the organizations providing services to youth in Dryden and Machin. A more detailed description including services, target population, location, access, and business hours may be found in Appendix 2.

Table 8: Organizations Providing Youth Services in Dryden and Machin

Organization	Service Line
Anishinaabe Abinoojii Family Services	• Child Protective Services
City of Dryden	• Community Services • Recreation
Community Living Dryden-Sioux Lookout	• Mental Health ○ Psychological and Psychiatric Services • Recreation • Employment

Organization	Service Line
	Housing
Dryden and Ignace Area Impaired Reduction Strategy (DAIRS)	- Education - Recreation
Dryden Public Library	- Community Services - Recreation
Dryden Regional Health Centre	Medical Services
Dryden Native Friendship Centre	- Education - Health - Mental Health - Indigenous Support
Dryden Full Gospel Church	Youth group program
FIREFLY	- Counselling - Therapy - Education - Justice Counselling - Making Connections for Children and Youth - Mental Health - Psychological and Psychiatric Services
Kenora District Services Board	- Housing - Medical - Employment
Keewatin-Patricia District School Board	- Public Services - Education
Kenora-Rainy River Districts Child and Family Services	- Children's services - Family services - Mental Health - Community Services
Lillian Berg School	- Food security - Recreational activities
Metis Nation of Ontario	Educational Support
Municipality of Machin	- Community Services - Recreation

Organization	Service Line
Northwest Catholic School Board	• Public Services • Education
Northwestern Health Unit	• Preventative Health Services • Food Security • Mental Health Promotion
Paawidigong First Nations Forum	• Medical Services • Mental Health • Cultural Learning • Social Services
Tikinagan Child and Family Services	• Child and Welfare Services • Counselling
Vermilion Bay Lion's	• Recreational

Gaps and Barriers

Key gaps and barrier identified that impact the ability of youth to meet their needs include:

1. Limited public transportation affects youth's ability to attend school, social programming, medical appointments, and recreational/social activities.
2. Facilities are limited in the evenings and on weekends with most of the services closing around 4:00 pm.
3. Poor internet access throughout the area including poor cellphone reception which affects the ability of youth to communicate, sign up for activities and learn online.
4. Youth are perceived to be reluctant to access services due to a stigma around asking for help regarding mental health.

Objectives

The following table outlines the key objectives of the Supporting Our Youth Pillar:

Table 9: Supporting Our Youth Pillar Objectives

Objective	Description	Target Completion
Obtain funding to open the Dryden Youth Centre and run youth-friendly programming	- The youth centre would have focused programs that provide a framework for effectively teaching healthy lifestyles, mental health, relationships, employment, life skills, and youth activities, etc. - Partners would be recruited to provide programming to youth through the central hub of the youth centre	2021
Making Mental Health and Addictions services more readily available to youth	- Reducing barriers to accessing care for youth with education for adult allies and youth. - Develop inventory (or referral pathway) to ensure a quick response to mental health and addiction care for youth. - Develop a quick survey of needs for youth to self-identify. - Parental education/engagement to ensure families can support youth.	2021
Support the City of Dryden in advancing efforts toward a Youth Friendly City Designation	Complete seven out of ten steps to achieve the Youth Friendly City Designation	2022
Provide easy educational/civic engagement activities to prevent poor health behaviours in youth	Engage youth on making healthy choices and understanding risks/rewards associated with behaviours around substance abuse, self-harm, mental health, etc.	Ongoing

Target Outputs/Outcomes

The specific target outputs/outcomes for the Supporting Our Youth Pillar are shown in the following table:

Table 10: Supporting Our Youth Pillar Target Outputs/Outcomes

Objective	Short-Term	Intermediate	Long-Term
Obtain funding to open the Dryden Youth Centre and run youth-friendly programming	- Youth Centre funding is secured for capital infrastructure - Youth Centre funding is secured for operational program costs	- Number of youth who attend programming facilitated by partner organizations - Number or percentage of youth who report a stronger sense of belonging to the community	Reduced youth interactions with police and court system
Making Mental Health and Addictions services more readily available to youth	- FIREFLY will lead a focus group on identifying gaps and barriers in youth mental health services with community partners - Awareness/education campaigns will be created to support additional services to address gaps and barriers identified by focus group	Track how many times the Youth Centre Facilitator uses the Mental Health and Addiction inventory to refer youth to support	Reduced wait time for youth mental health services
Support the City of Dryden in advancing efforts toward a Youth-Friendly City Designation	Number of steps to achieve the designation	Number of steps to achieve the designation	Number of steps to achieve the designation

Objective	Short-Term	Intermediate	Long-Term
Provide easy educational/civic engagement activities to prevent poor health behaviours in youth	- Youth have increased knowledge of healthy choices such as recreation, arts, music, and cultural opportunities. - Barriers to school attendance is identified utilizing focus groups and/or surveys.	% that report a very strong or strong sense of belonging in the community % of individuals that report they are always or often accepted or valued in their community	Reduced youth substance abuse rates

Working Groups

The following table identifies the organization(s) responsible for ensuring the objectives are achieved by the specified dates with success being measured in reference to the identified target outputs/outcomes:

Table 11: Supporting Our Youth Pillar Working Group

Objective	Lead	Members
Develop a Youth Centre/Community Center	Supporting Our Youth Pillar Working Group	• Kenora District Services Board • City of Dryden • Dryden Police Service
Making mental health and addictions services more readily available to youth	FIREFLY	• Dryden Regional Health Centre – Youth Mental Health Outreach Worker and Crisis Staff • Mental Health and Addiction Nurse (NW LHIN) • Early ON Years program • Local school boards
Support the City of Dryden in advancing efforts toward a Youth-Friendly City Designation	City of Dryden	• Supporting Our Youth Pillar Working Group
Provide easy educational/civic engagement activities to prevent poor health behaviours in youth	Youth Centre Coordinator	• Supporting Our Youth Pillar Working Group

Prevention/Education

Context

Description

Crime and harmful behaviours such as drug and alcohol use are two prominent issues that have been repeatedly identified by community members as a concern, they have regarding community safety and well-being. According to the Dryden Community Safety and Well-Being Survey (2021), respondents felt addictions, crime prevention and mental health are the top three most important priorities related to safety and well-being in their community. In recognition of these issues, the prevention/education pillar will focus on the following areas:

- Reducing violence and abuse within the community
- Impact of harmful behaviours on the community
- Healthy lifestyle choices through promotion and education

For the purpose of the CSWB Plan, harmful behaviours have been defined as any action which causes pain or harm to someone else. Healthy lifestyles have been defined as a way of living that improves an individual's well-being and lowers their risk of being seriously ill or dying prematurely.

Current State and Supporting Statistics

Prior to reading this section, it is important to note that although these statistics show that criminal incidents and severity are increasing with Dryden they should not be interpreted as the only means of determining safety within a community. Instead, there are multiple indicators that need to be utilized together to have a complete understanding of safety within a community. For instance, the perception of safety is another indicator that may be utilized. To this end, approximately 70% of individuals that completed the 2021 Community Safety and Well-Being Survey indicated that they feel safe in their community. Additionally, the police reported crime rates above do not speak to types of criminal incidents as they represent overall criminal trends. Finally, crime is the result of a multiple factors such as, but not limited, poverty, mental health and addictions, affordable housing. Enforcement is one aspect of a multifaceted response required to address crime within any community.

Police and Crime Rates

Policing plays an important role in reducing violence and abuse within the community while crime and policing statistics help to show the current state of violence and prevention. To this end, Dryden's and Machin's statistics are included below and compared to Ontario as well as Canada when applicable.

Sworn Officer to Population Ratio

Dryden has a relatively high number of sworn officers for its population compared to Ontario and the rest of Canada. Based on the latest Statistics Canada data, Dryden had an average of 242 police officers per 100,000 population between 2015 and 2019 compared to 183 in Ontario and 188 in Canada.

Crime Severity Index

The Crime Severity Index (CSI) is a means of measuring both how much crime is being reported to police within a particular jurisdiction as well as the severity of those crimes. Figure 6 shows that between 2015 and 2019, Dryden had the highest CSI compared to Ontario and Canada (Statistics Canada, 2021). Over that same time, Dryden had the highest CSI average growth rate compared to Ontario and Canada at 17%. CSI is separated into both violent and non-violent categories to reflect crimes that involve individuals (i.e. violent crime) and crimes that involve property (i.e. non-violent crime). Figure 7 shows that non-violent CSI grew at a faster rate than violent crime in Dryden. However, both increased between 2015 and 2019 (Statistics Canada, 2021).

Figure 6: Annual Crime Severity Index from 2015 to 2019 for Dryden, Ontario and Canada

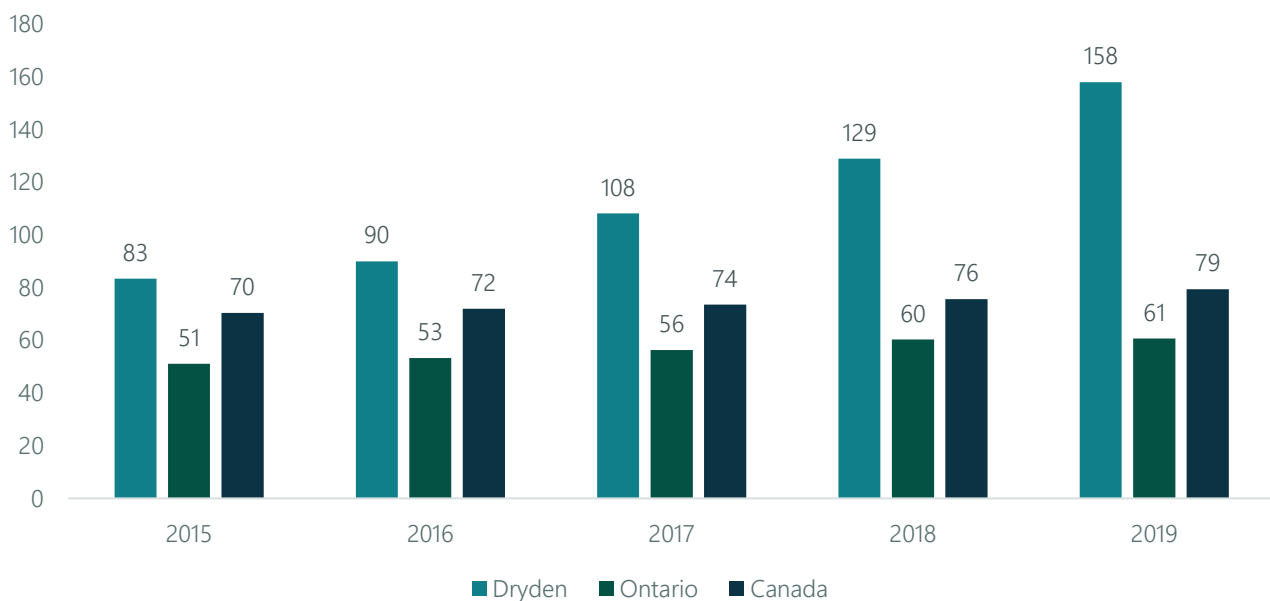
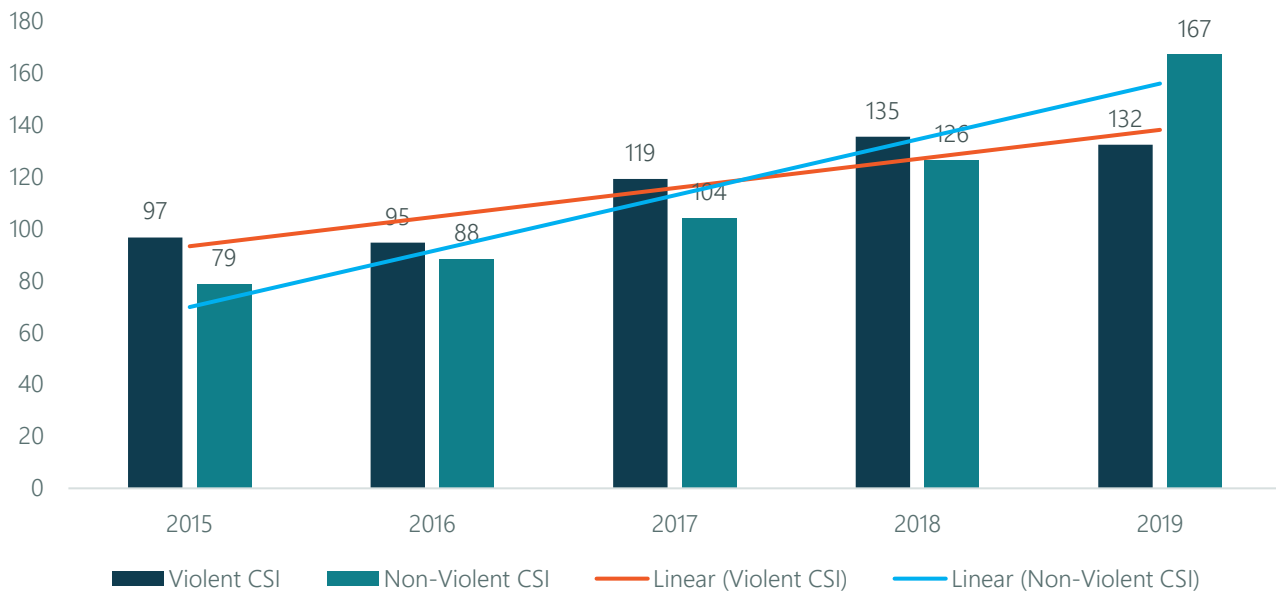


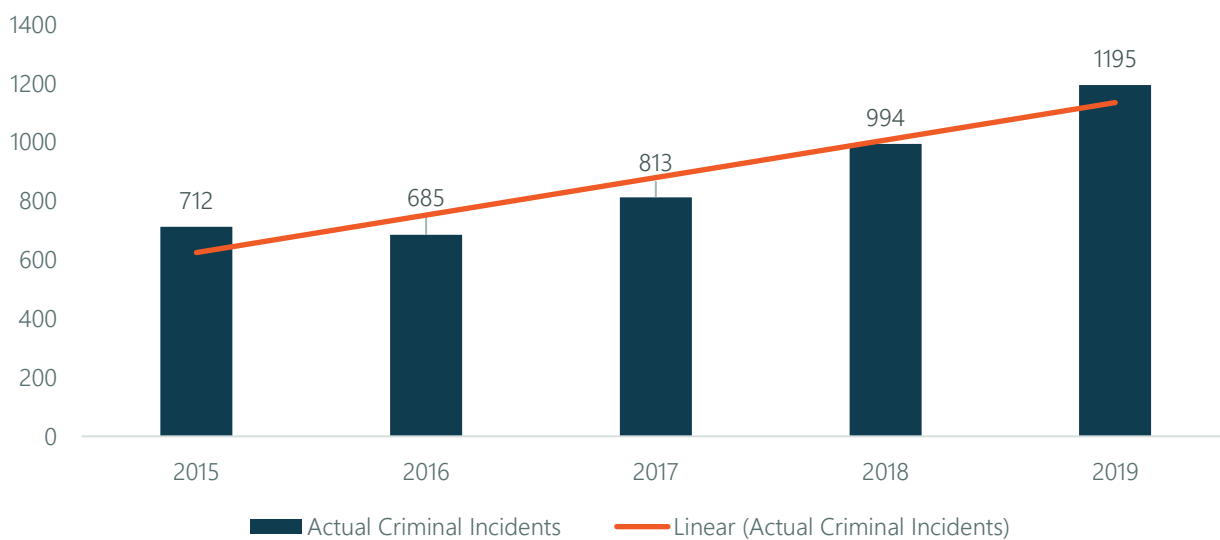
Figure 7: Annual Violent and Non-Violent Crime Severity Index in Dryden Between 2015 and 2019



Criminal Incidents

Criminal incidents are distinct events involving one or more criminal acts. Figure 8 shows that Dryden has had an increasing number of criminal incidents per year, growing by approximately 127 incidents per year between 2015 and 2019 (Statistics Canada, 2021).

Figure 8: Annual Criminal Incidents in Dryden Between 2015 and 2019



It is important to note that although these statistics show that criminal incidents and severity are increasing with Dryden they should not be interpreted as the only means of determining safety within a community. Instead, there are multiple indicators that need to be utilized together to have a complete understanding of safety within a community. For instance, the perception of safety is another indicator that may be utilized. To this end, approximately 70% of individuals that completed the 2021 Community Safety and Well-Being Survey indicated that they feel safe in their community. Additionally, the police reported crime rates above do not speak to types of criminal incidents as they represent overall criminal trends. Results from the 2021 Community Safety and Well-Being Survey found that citizens from Dryden and Machin are most concerned with the following types of crime:

1. Drugs/Drug Trafficking
2. Assault/violent
3. Robbery/Break and Enter
4. Theft
5. Property Damage/Graffiti

In addition to these crimes, the members of the Prevent/Education Pillar Working Group have identified the following crimes as a priority to address within Dryden:

- Domestic Violence – violent or aggressive behaviour within the home, typically involving the violent abuse of a spouse or partner.
- Human Trafficking – involves the recruitment, transportation, harbouring and/or exercising control, direction or influence over the movements of a person in order to exploit that person, typically through sexual exploitation or forced labour. It is often described as a modern form of slavery.
- Harassment – is the improper conduct by an individual, that is directed at and offensive to another individual which the individual knows or ought to have reasonably known would cause offence or harm.
- Internet crimes – internet crime or cybercrime, refers to any illegal practice that involves the use of a computer or network, or targeting of a computer or network.

Figure 9 shows that the most frequently occurring crime identified by this Pillar Working Group is domestic violence followed by harassment.

Figure 9: Annual Total Number of Incidents Between 2018 and 2020

	2018	2019	2020
Domestic Violence	94	110	104
Human Trafficking	1	2	0
Harassment	66	68	83
Internet Crimes	13	12	13

More detailed information regarding the crimes identified in Figure 9 is unavailable with the exception of domestic violence. Specifically, between 2018 and 2021 the Hoshizaki House provided shelter to 87 women and 80 children with the majority self-identifying as Indigenous (Table 12). Further, Hoshizaki House has received 963 crisis calls from Dryden and Area community members between the same three-year period.

Table 12: Hoshizaki House Shelter Admission Information Between 2018 and 2021

	2018-2019	2019-2020	2020-2021
Dryden Geographic Area Crisis calls	356	248	359
Women Admitted to Shelter	51	55	32
Children Admitted to Shelter	21	45	14
Proportion of Women Admitted to Shelter that Self-Identify as Indigenous	64.7%	69.2%	56.3%
Proportion of Children Admitted to Shelter that Self-Identify as Indigenous	76.2%	71.1%	56.7%

Harmful Behaviour and Healthy Lifestyle Information

A 2017 report completed by the Northwestern Health Unit on alcohol noted that “in Canada, alcohol is second only to tobacco as the substance that creates the most health, social, economic, and criminal harm to individuals, families, and communities” (Cassey and Shewfelt, 2017, p.6). The report goes on to note that in Ontario, “alcohol is the second leading risk factor for death, disease, and disability” (p.6). No statistics were available for Dryden and Machin specifically regarding alcohol consumption. However, the following key findings were identified regarding the Northwestern Health Unit region (2017):

- Heavy drinking is statistically higher in the Northwestern Health Unit region compared to the provincial rates.
- Mothers from the Northwestern Health Unit region had two times the rate of drinking while pregnant compared to provincial rates.
- ER visits linked to alcohol use in the Northwestern Health Unit region were six times the rate of the province.
- Finally, a statistically higher rate of individuals under the age of 18 had consumed alcohol in the Northwest Health Unit region compared to the provincial rate.

No information has been made available regarding drug use rates within Dryden and Machin for this report. As a result, it is unknown how prevalent or what type of substance abuse issues are most prevalent within Dryden and Machin.

Pertaining to overall health, a 2016 Demographic Profile and Health Status report showed that individuals from the Northwestern Health Unit's life expectancy at birth are approximately four years lower than the rest of the province based on information collected between 2009 and 2011 (Northwestern Health Unit, 2016). Further, the report showed that individuals from the Northwestern Health Unit region have higher rates of death from cancer, circulatory disease, respiratory disease and unintentional injuries compared to the provincial rates. Additionally, individuals from the Northwest Health Unit region had higher rates of obesity, arthritis, diabetes, asthma, high blood pressure, and hospitalization rates for stroke, cerebrovascular disease, ischemic heart disease, and injury compared to provincial rates. Finally, a larger proportion of individuals from the Northwestern Health Unit region are daily as well as occasional smokers compared to the rest of the province. With that said, a larger proportion of individuals from the Northwestern Health Unit region were found to be physically active and eat fruits/vegetables five times or more a day compared to the province.

Vulnerable Groups

Participants of the working session perceived individuals that are unemployed, had a low income, did not graduate high school, were house insecure, and were experiencing mental health and addiction issues were more vulnerable to criminal activity and engaging in harmful behaviour. Further, participants perceived seniors and individuals with a disability to be a vulnerable population regarding crime and victimization.

Contributing Factors

Risk Factors

Between 2017 and 2021, DARRT identified the following risk factors as the most prominent for vulnerable populations in Dryden:

- Mental health and cognitive functioning
- Substance abuse
- Antisocial/problematic behaviour
- Criminal involvement
- Victimization

Demographic information recorded by DARRT shows that there is an equal split between males and females that receive assistance from DARRT with the two largest age ranges being 30 to 39 and 40 to 59.

In addition to the individual risk factors identified by DARRT, one or more of the five risk factors in Table 13 were repeatedly mentioned during all working sessions completed to inform this plan. For these characteristics, 2016 Census data shows that there are a larger proportion of individuals that have not completed high school and are unemployed in Machin compared to Dryden. However, the proportion of

low-income, lone-parent families, and renters are higher in Dryden compared to Machin. With that said, this information must be consolidated and mapped utilizing spatial analysis software to determine high-risk areas for criminality/victimization.

Table 13: Dryden and Machin Proportion of the Population by Socioeconomic Risk Index Factor Using 2016 Census Data

Risk Factor	Statistics from Dryden	Statistics from Machin
Educational Attainment – Proportion of individuals that did not complete high school	22%	31%
Employment Status – Proportion of the population that is unemployed	8%	14%
Income – Low Income	5%	4%
Family Structure – Lone-Parent Families	17%	14%
Housing Status – Proportion of individuals renting	30%	16%

Protective Factors

The following factors have been identified as important to mitigate/prevent individuals from becoming high risk of negative safety outcomes:

- Gainful employment
- Educational opportunities
- Affordable housing
- Access to supportive community services such as:
 - Counselling supports and a shelter crisis line
 - After school programs and recreational/social activities
 - Criminal justice diversion programs
 - Cultural activities
 - Educational and employment support
 - Food security

Identified Programs and Services

The following table outlines the organizations providing services to prevent and educate community members that are at high risk for experiencing negative safety outcomes. A more detailed description including services, target population, location, access, and business hours may be found in Appendix 3.

Table 14: Organizations Providing Applicable Services in Dryden and Machin

Organization	Service Line
City of Dryden	• Community Service • Recreation • Transportation
Community Living Dryden-Sioux Lookout	• Mental Health ◦ Psychological and Psychiatric Services • Recreation • Education • Employment Services • Host Family Program • Residential Services • Supported Independent Living
Dryden Area Anti-Racism Network	• Community Service • Education
Dryden Native Friendship Centre	• Education • Health • Mental Health • Indigenous Support
Dryden Police Service	• Policing • Crime Prevention • Victim Assistance
Dryden Regional Health Centre	• Medical Services
Hoshizaki House Dryden District Crisis Shelter	• Emergency Shelter • Counselling
Kenora Rainy River Districts Child and Family Services	• Children's Services • Family Services • Mental Health • Community Services
Kenora District Services Board	• Housing • Medical • Employment
Municipality of Machin	• Community Service • Recreation • Transportation

Organization	Service Line
Northwestern Health Unit	• Preventative Health Services • Food Security • Mental Health Promotion
Ontario Native Women's Association	• Mental Health • Education • Violence Prevention • Indigenous Teachings/Education
Ontario Provincial Police	• Policing • Crime Prevention • Victim Assistance
Paawidigong First Nations Forum	• Medical Services • Mental Health • Cultural Learning • Social Services
Tikinagan Child and Family Services	• Child and Welfare Services • Counselling
Youth Probation Services	• Diversion/Prevention

Gaps and Barriers

Key gaps and barrier identified that impact the ability of community members to meet their needs:

- The majority of the services are offered in person, requiring individuals to travel. This can be difficult for those who lack transportation.
- Stakeholders indicated that there are limited culturally appropriate services available.
- Presently, there is no:
 - Healing lodge in Dryden or Machin,
 - Emergency shelters for individuals in need as the existing emergency shelter are exclusive to women and children fleeing domestic violence,
 - Education available for seniors to learn strategies/approaches to prevent them from being a victim of a crime,
 - Psychiatric services in Dryden or Machin, and
 - Limited capacity for need services and long wait times; development services for adults were specifically mentioned as an area of concern.
- Limited financial support for travelling to receive services not offered within Dryden or Machin.
- Stigma, discrimination limiting access to supportive services.

Objectives

The following table outlines the key objectives of the Prevention/Education Pillar:

Table 15: Prevention/Education Pillar Objectives

Objective	Description	Target Completion
Situation Table	Develop a risk mitigation tool to reduce harm and victimization from social disorder and crime.	Established
Harm Reduction	Public Health organizations operating harm reduction programs (i.e. needle exchange, sexual health clinic, dating violence, elder abuse, internet abuse).	Ongoing
Safety and Crime Prevention	Activities that keep the peace, ensure public safety and reduce criminal activity with a focus on community safety.	Ongoing
Victimization	Educating the public about proactive ways to decrease their likelihood of being a victim of a crime as well as supportive services for victims of crimes in an effort to improve the feelings of safety by community members.	Ongoing
Online Directory/ Community Information	- Develop an online directory to improve communication and the promotion of services to residents. - Continue to develop a community directory with support agencies to ensure information is current and accessible for residents.	Ongoing

Target Outputs/Outcomes

The specific target outputs/outcomes for the Prevention/Education Pillar are shown in the following table:

Table 16: Prevention/Education Pillar Target Outputs/Outcomes

Objective	Short-Term	Intermediate	Long-Term
Situation Table	Identify situations where individuals/families are in an acute elevated risk (AER) situation	Monitor number of Situation Table discussions that meet acutely elevated risk	Establish a robust situation table that is continuously updated
Harm Reduction	Identify risk factors in the community which require targeted harm reduction services	- Quarterly public campaigns – educating prevention of harmful behaviours and promotion of health choices - Identify mechanisms to encourage and promote programs within the community that focus on needle exchange, sexual health, elder abuse and intimate partner violence	Reduce harm related to needle exchange, sexual health, elder abuse and dating/relationship violence through educational activities
Safety and Crime Prevention	Establishment of programs to reduce crime; early intervention, e.g. Situation Table	- Increase in crime prevention programs (RIDE, Lock it or Lose it, etc.) - Reduce crime through proactive enforcement (targeted enforcement or hot spots) - Through targeted programming, the aim is to reduce risk factors and promote protective factors by engaging community groups, police officers and other stakeholders to	- Actions designed to respond to criminal activity and minimize the effects of crime - Strategic location of cameras to deter crime

Objective	Short-Term	Intermediate	Long-Term
		create safe and thriving communities	
Victimization	• Increase educational resources regarding victimization • Increase educational resources regarding safety planning	• Percentage of population feels safe in the community	• Conduct bi-annual public education events to educate and promote the elimination of violence
Online Directory/ Community Information	• Update information	• Raise awareness of services directory through an educational campaign	• Keeping database complete and up to date • Increase public usage of database

Working Groups

The following table identifies the organization(s) responsible for ensuring the objectives are achieved by the specified dates with success being measured in reference to the identified target outputs/outcomes:

Table 17: Prevention/Education Pillar Working Groups

Objective	Lead	Members
Situation Table	Dryden Police	• Dryden Regional Health Centre
Harm Reduction	Northwestern Health Unit	• Methadone Clinic • Needle Exchange Program
Enforcement	Dryden Police and Ontario Provincial Police	• Dryden, Ontario and Treaty Three Police Services • Dryden Native Friendship Centre • Grand Council Treaty Three • CMHK • Kenora (Mental Health Diversion) • FIREFLY

Objective	Lead	Members
		Victim Crisis Assistance and Referral Services
Victimization	Dryden Police, Ontario Provincial Police, and Hoshizaki House	- Hoshizaki House - Victim Crisis Assistance and Referral Service - Dryden Native Friendship Centre - Older Adults agencies - Grand Council Treaty Three
Online Directory/Community Information	City of Dryden	- Member organizations involved with project - Media partners (CKDR/Q104/CBC) - Northwest Employment Works

Treatment

Context

Description

Develop strong partnerships that enhance key collaborative efforts to address gaps and barriers within the mental health and addictions services and crisis intervention system.

The treatment pillar will focus on the following themes:

- Access to mental health/addiction and crisis response services for community residents
- Access to psychiatry services and schedule one facilities

Current State and Supporting Statistics

Mental Health and Substance Abuse Statistics

The most robust information regarding mental health and addiction has been provided by the Dryden Regional Mental Health and Addictions Services (DRMHAS). The organization provides mental health and addictions services to pediatrics (0-17) adults (18-65) and the elderly (65+) in the Dryden area.

According to DRMHAS' 2020 statistics:

- The average age of their client was 35
- 60% of all admitted individuals were male
- 47% identified as Aboriginal, although they represent 19% of the general population in Dryden
- 32% had documental legal problems
- Most common housing status was a private home or apartment
- Most common education level was secondary school
- Most common source of income was employment insurance

Between 2018 to 2020 DRMHAS serviced 2,796 clients (181 elderly, 2,430 adults and 185 pediatrics). Figure 10 below shows the number of patients that received mental health services while Figure 11 shows the number of patients that received substance abuse treatment. Pertaining to mental health services, the number of elderly and pediatric patients increased each year from 2018 to 2020, while adults increased in 2019 before dropping in 2020. For substance abuse, all three age categories had a decline in individuals served from 2018 through to 2020.

Figure 10: Individuals Served – Mental Health

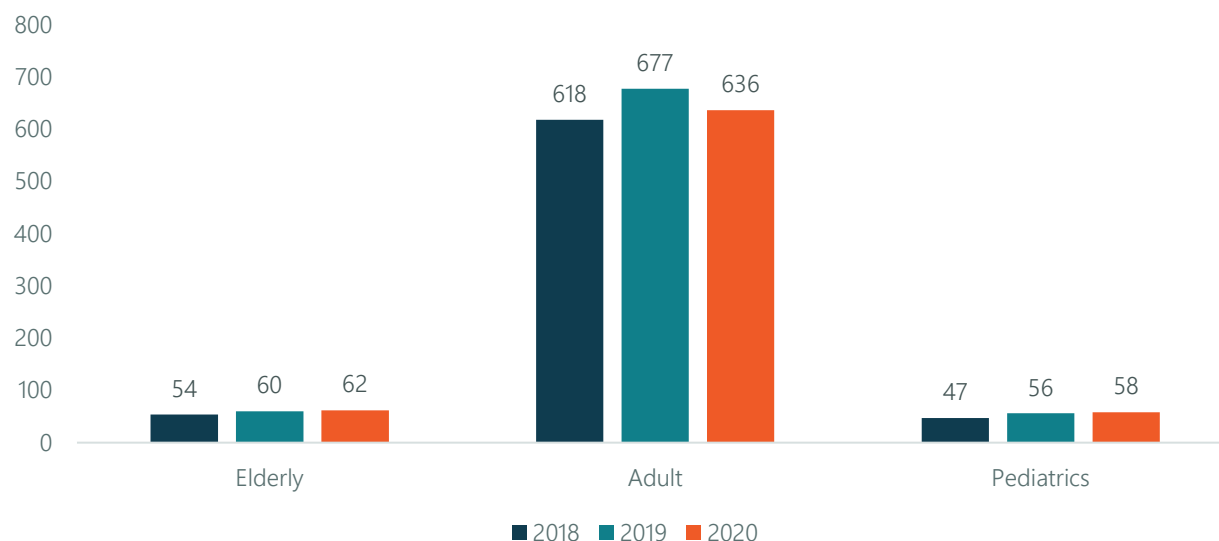
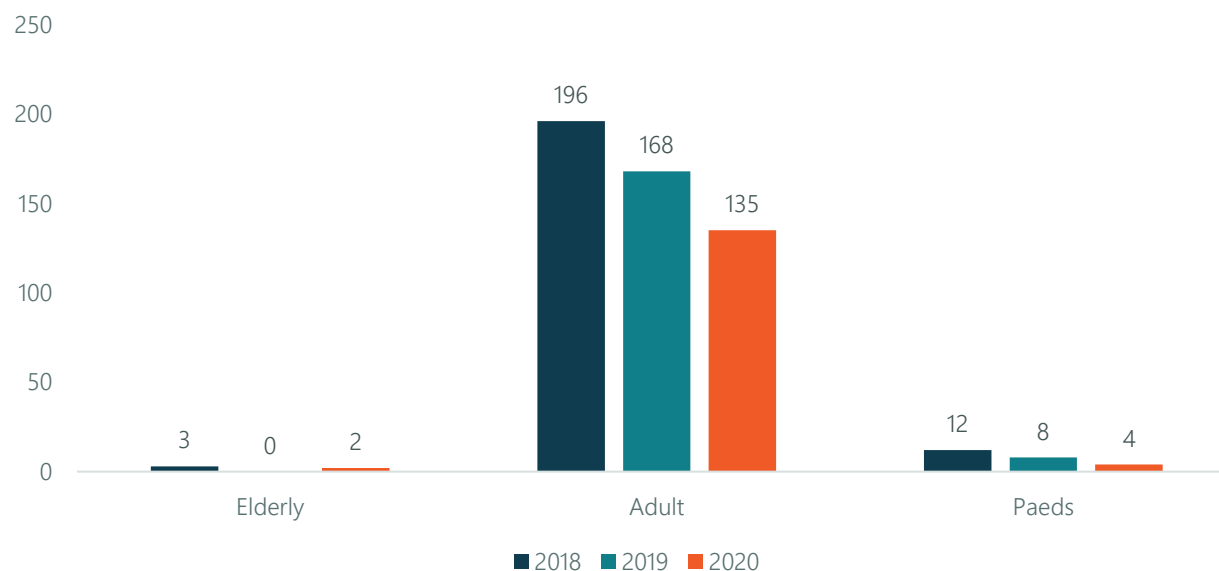


Figure 11: Individuals Served – Substance Abuse



DRMHAS offers in-person, phone, email, group, home, and community meeting options to its clients. Table 18 shows the number of client meetings by type and program. Most client meetings are over the phone and for mental health.

Table 18: DRMHAS Client Meetings by Type

Program	Face-to-Face	Phone	Email	Group	Home	Community	Total
Addictions	101	526	23	0	19	2	671
Case management	617	1389	24	1	227	0	2258
Child and youth mental health outreach worker	188	163	11	0	0	0	362
Housing case management	201	763	29	0	124	0	1117
Mental health	793	6405	80	314	90	20	7702
Opiate case management	184	432	11	5	37	6	675
Gambling	0	11	0	0	0	0	11
Domestic violence	11	16	0	0	0	0	27
Substance abuse	38	69	0	0	0	0	107

Waitlist

Although 2,796 individuals were serviced from 2018 to 2020, there were still 504 individuals added to the mental health waitlist and 57 to the substance abuse wait list. Once added to the waitlist, an individual had to wait on average 19 days before receiving mental health treatment and 22 days to receive substance abuse treatment in 2020. For mental health services this is an increase of 6 days from the previous year and 10 days from 2018. Substance abuse wait times also increased in 2020 by 15 days from 2019 and 22 days from 2018.

Emergency Room Visits

According to DRMHAS records, in 2020 there was a total of 689 visits to the emergency room for mental health-related issues. 316 of those visits were related to substance/alcohol addiction.

Time in Program

In 2020 DRMHAS discharged 92 clients from programs. Clients on average spend 236 days in a program with the median length of stay being 30 days. The most common discharge/close reason was completed programs. The top 5 program discharge reasons for 2020 were:

- Completed Program – 31
- Internal Program Transfer – 28
- Drop Out/No Show – 16
- Client Withdrew and Notified Staff – 6
- Client Moved – 5

Crisis Response

Mental health crisis means an incident in which someone with an actual or perceived mental illness is experiencing intense feelings of personal distress (e.g., anxiety, depression, anger, fear, panic, hopelessness), obvious changes in functioning (e.g., neglect of personal hygiene, unusual behaviour) and/or catastrophic life events (e.g., disruptions in personal relationships, support systems or living arrangements; loss of autonomy or parental rights; victimization or natural disasters), which may, but not necessarily, result in an upward trajectory of intensity culminating in thoughts or acts that are dangerous to self and/or others. Data obtain from DRMHAS indicates that 279 individuals received crisis intervention services in 2020. Table 19 shows the method in which clients received crisis services.

Table 19: DRMHAS Crisis Services Meetings by Method

Program	Face-to-Face	Phone	Email	Group	Home	Community	Total
Crisis Services	482	201	4	0	2	0	689

Suicide

According to the Northwest Health Unit (2016), the top cause of injury-related deaths from 2007 to 2011 was intentional self-harm accounting for 23.8% of all injury-related deaths. During the same timeframe, the rate of intentional self-harm cases increased from 9.9 incidents per 100,000 people to 29.4 per incidents 100,000 people. In 2013, 59.2 ER visits per 10,000 visits were due to intentional self-harm. This was approximately 4.5 times Ontario's rate.

Vulnerable Groups

The following characteristics were identified as being vulnerable to experiencing mental health and addiction issues:

- Indigenous community members
- Individuals experiencing homelessness or housing insecurity
- Individuals that experience post-traumatic stress such as veterans

- Individuals experiencing mental health issues
- Individuals with a developmental disability that are experiencing mental health and addiction issues
- Youth and socially isolated elderly
- Individuals from marginalized communities such as the 2SLGBTQ community

Contributing Factors

Risk Factors

The following risk factors have been identified as contributing to the likelihood of an individual experiencing negative safety outcomes:

- History of trauma and mental health issues within the family
- History of substance abuse in the family
- Residential school history
- Social isolation
- Unemployment
- Involvement with the criminal justice system
- Homelessness
- Broken family relationships
- Lack of access to
 - Nutritional food
 - Affordable housing
 - Financial assistance/support
 - Unorganized and uncoordinated system
 - 24/7 mental health and addiction support
 - Primary care service providers

Protective Factors

The following factors have been identified as important to mitigate/prevent individuals from becoming high risk of negative safety outcomes:

- Stable housing
- Gainful employment
- Supportive peer and family groups
- Educational programs and preventative training and education
- Existing supportive services such as, but not limited to:
 - Dryden Native Friendship Centre
 - Northwestern Health Unit
 - Dryden Regional Mental Health and Addiction Services

Identified Programs and Services

The following table outlines the organizations providing treatment services to community members that are experiencing mental health/addiction issues. A more detailed description including services, target population, location, access, and business hours may be found in Appendix 4.

Table 20: Organizations Providing Applicable Services in Dryden and Machin

Organization	Service Line
Adult and Teen Challenge of Central Canada	• Counselling • Mentorship • Criminal Justice Support • Crisis Intervention and Prevention
Canadian Mental Health Association	• Counselling • Therapy • Cognitive Screening and Intervention • Psychiatry • Education • Mental Health
Community Living Dryden-Sioux Lookout	• Mental Health ◦ Psychological and Psychiatric Services • Recreation • Education • Employment Services • Host Family Program • Residential Services • Supported Independent Living
Dryden Regional Health Centre	• Medical Services
Dryden Regional Mental Health and Addiction Services	• Counselling • Education • Mental Health
Dryden Area Family Health Team	• Counselling • Mental Health
Dryden Native Friendship Centre	• Education • Health • Mental Health • Indigenous Support
FIREFLY	• Counselling

Organization	Service Line
	• Therapy • Education • Justice Counselling • Mental Health ◦ Psychological and Psychiatric Services
Four Directions	• Support Navigator
Ontario Addiction Treatment Centre	• Medical Services • Addictions Services
Paawidigong First Nation Forum	• Medical Services • Mental Health • Cultural Learning • Social Services
Points North Family Health Team	• Counselling • Medical Services • Mental Health and Addiction Services • Social Services

Gaps and Barriers

Key gaps and barrier identified that impact the ability of community members to meet their needs

- Facilities are limited in the evenings and on weekends. The latest any organization is open is 8:00 pm while a children's help line is available till 11:00 pm on weekdays.
- Limited services that are perceived to not be meeting the demand for:
 - Child welfare and child mental health services
 - There is only one 24/7 crisis response team in Dryden
 - Culturally appropriate services as well as Indigenous-led organizations and services
- Presently, there is:
 - No residential addictions treatment center in Dryden – patients are referred to Kenora for treatment
 - No homeless shelter in Dryden
 - No Action Community Team (ACT) in Dryden to support people with moderate to serious mental illness
 - No child psychiatry services
- Siloed service delivery:
 - Need a single point of access to simplify the process for individuals in need of support

Objectives

The following table outlines the key objectives of the Treatment Pillar:

Table 21: Treatment Pillar Objectives

Objective	Description	Target Completion
Mental Health and Addictions	Address gaps and barriers within Mental Health and addictions services through the Enhancement of key partnerships	Ongoing
Crisis Intervention	- Address gaps and barriers within crisis response through the enhancement of key partnerships - Identify opportunities for new partnerships and review current funding sources	Completed
Response to Suicide	- Review current service offerings and identify gaps/barriers that need to be addressed - Develop a plan to address gaps and barriers	Ongoing

Target Outputs/Outcomes

The specific target outputs/outcomes for the Treatment Pillar are shown in the following table:

Table 22: Treatment Pillar Target Outputs/Outcomes

Objective	Short-Term	Intermediate	Long-Term
Mental Health and Addictions	- Identify Gaps and barriers - Engage community partners in current and future mapping	- Create mental health, addictions, and crisis response database - Decrease interactions with police and court system	High/increased percentage of populations that rates their mental health as "good"

Objective	Short-Term	Intermediate	Long-Term
	Advocate for increase access to psychiatry services and schedule one facilities	Number of police encounters with individuals with Mental Health issues	- Percentage of individuals 19+ who exceed Low-Risk Alcohol Drinking Guidelines - Decline in the rate of emergency department visits for problematic substance use conditions
Crisis Intervention	Establish a sub-committee to develop a mobile crisis team for Dryden and Area		
Response to Suicide	Review current services and supports	Develop plan to address gaps and barriers	Implementation of the plan to address gaps and barriers

Working Groups

The following table identifies the organization(s) responsible for ensuring the objectives are achieved by the specified dates with success being measured in reference to the identified target outputs/outcomes:

Table 23: Treatment Pillar Working Groups

Objective	Lead	Members
Mental Health and Addictions	Adult Mental Health – Dryden Regional Health Centre	TBD
Crisis Intervention	Dryden Regional Health Centre Crisis Response Program	TBD
Response to Suicide	TBD	TBD

Social Development

Context

Description

Social development is focused around promoting individual and community wellness by addressing social issues including:

- Improving emergency food access
- Identifying and highlighting needs for housing, coordinating services/supports for emergency housing, and advocating for supportive and crisis housing
- Identifying and promoting activities for older adults (e.g. recreation, arts, music, culture) and opportunities in healthy safe spaces (e.g. Community Centre)
- Establishing effective methods to promote volunteer opportunities

Current State and Supporting Statistics

Food Insecurity

Food insecurity is defined as, “is the inability to acquire or consume an adequate diet quality or sufficient quantity of food in socially acceptable ways, or the uncertainty that one will be able to do so” (Health Canada, 2020, paras.1). Often, food security is linked with household and/or personal finances (Health Canada, 2020). A discussion paper written by the Ministry responsible for the Ontario Poverty Reduction Strategy, stated that rates of food insecurity are highest amongst:

- Recent immigrants to Canada
- Black and Indigenous community members
- Single female parents
- Single-person households
- Individuals on social assistance

The discussion paper also notes that food insecurity in Northern Ontario and other rural areas was associated with fewer purchasing options (i.e. a limited number of businesses selling food), lack of public transit, and higher food costs.

Food security is important because it improves mental health, reduces risks of chronic disease, and lowers health care expenditures overall (Tarasuk, Cheng, de Oliveira, Dachner, Gunderson, and Kurdyak, 2015). Experiences of hunger in childhood increase the risk of developing asthma and depression (Tarasuk & Mitchell, 2020). Tarasuk and Mitchell (2020) also found that adults living in food-insecure households report poorer physical health and are more vulnerable to a wide range of chronic conditions, such as

diabetes, heart disease, hypertension, arthritis, and back problems. They are also more likely to be diagnosed with multiple chronic conditions and higher mortality rates.

Over the last three years, those with employment income who access food banks have increased by 27% in Ontario (Feed Ontario, 2020). The report goes on to note that the increase in food bank usage in Ontario is attributable to an "...inadequate safety net, precarious employment, and unaffordable housing" (Feed Ontario, 2020, p. 9). Income has also been found to be a determining factor for food insecurity. For instance, in 2017 the Northwestern Health Unit released a media report based on the results of the annual food costing survey that stated, "...people with low incomes do not have enough money to pay the rent and all the bills, plus buy healthy food" (p. 2). Further, the Northwestern Health Unit (2017) noted that the majority of individuals that are food insecure, 58.9%, are employed contrary to a perceived misconception that employment will lead to food security.

No information regarding food banks or food insecurity has been provided for the Municipality of Machin. However, in 2020, the Dryden Food Bank supported 520 individuals with a weekly hamper. Statistics gathered by the Dryden Food Bank show that:

- 76% of individuals are renting or residing in social housing
- 58% of the individuals receive support from Ontario Works or the Ontario Disability Support Program
- 28% are children age 0 to 14, which is the largest proportion of individuals receiving support by age

Homelessness

According to the 2018 Kenora District Services Board (KDSB) Housing and Homelessness Report, there were 393 individuals in the District of Kenora that identified as homeless. This correlated to approximately 1% of the district's population making it one of the highest rates of homelessness in the province. Table 24 shows the distribution of individuals experiencing homelessness in the district with Dryden having the second highest with 67 of the included municipalities just above Sioux Lookout.

Table 24: Distribution of homelessness in Kenora District

District	Number of Homeless Individuals	Percentage of total
Dryden	67	17%
Ignace	5	1%
Kenora	223	57%
Red Lake	19	6%
Vermilion Bay	1	0.3%
Pickle Lake	11	3%
Sioux Lookout	66	17%

District	Number of Homeless Individuals	Percentage of total
Lac Seul Unincorp.	1	0.3%
Total	393	100%

Of the 393 individuals, 34% were between the ages of 25-35, 90% self-identified as Indigenous, and 18% were in jail at the time of the survey. When asked the reason for homelessness, the top three reasons provide were:

- Addiction or substance use
- Health (hospitalization, treatment program, illness, or medical condition)
- Conflict (with spouse/partner or parent/guardian)

The report stated that most individuals experiencing homelessness were sleeping in emergency shelters, couch surfing or staying in hospitals, jails/prisons, or remand centers on the night the survey was conducted.

The results of the report show that homelessness is a multifaceted and complex issue that involves addiction, mental health, and family conflict. The results also show that Dryden does have a higher population of individuals experiencing homelessness compared to other Northwestern municipalities in Ontario.

Housing

Kenora District Services Board facilitates and administers several programs in the region to address homelessness and housing in Kenora. Specifically, they are responsible for 1,155 social housing units in the district and provide financial assistance to individuals through the following methods:

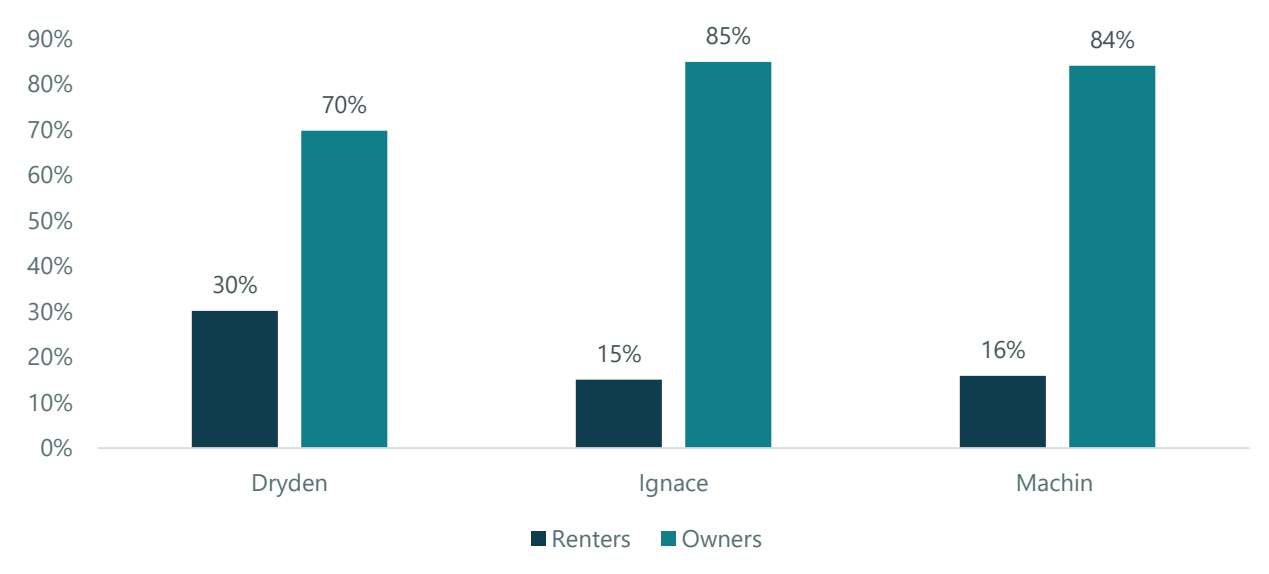
- Rent-Geared-to-Income: Rent based on gross income earned by all members of a household.
- Rent Supplement Housing: KDSB works with third-party landlords to offer Rent-Geared-to-Income to individuals and covers the difference.
- Housing Allowance: Providing housing allowances to low-income individuals who cannot afford the market rent.

In 2018, KDSB provided social assistance to 719 individuals of which approximately 229 were based in Kenora. During the same year, there were approximately 1,091 individuals on the housing waitlist for Rent-Geared-to-Income housing of which 36% were families and 16% were seniors.

According to the 2018 KDSB report, the demand for private apartment units far outweighs the supply in the district which drives up rent and forces individuals/families to accept poor housing conditions in undesirable communities. The diverse economies within the district also affect rental rates and availability, as apartments can charge higher rates to those who can afford it leaving those with less wealth unable to find affordable accommodation.

For Dryden and Machin, the proportion of renters is 30% and 16% respectively (Figure 12).

Figure 12: Proportion of Homeowners and Renters in Dryden and Machin Based on 2016 Census Data



A 2018 report by the Canadian Rental Housing Index identified the following information regarding the City of Dryden about renters:

- Average annual household income for renters in Dryden is \$48,696, which is lower than the provincial average of \$53,691. Average annual household income for Indigenous community members in Dryden is \$38,168 compared to \$52,114 for non-indigenous community members. Further, single female-led households with a kid had an average income of \$34,906 compared to \$65,237 of couples without kids and \$97,947 for couples with kids.
- 45% of renters are spending over 30% of their income on rent and utilities compared to a provincial rate of 46%. Of the proportion of households in Dryden spending more than 30% of their income on rent and utilities, 45% are single female-led households. Additionally, 56% of the proportion of households in Dryden spending more than 30% of their income on rent and utilities are Indigenous.
- 8% of renters in Dryden are living in crowded conditions compared to the provincial rate of 12%.

Similar information regarding renters is not available for Machin. However, these statistics show that renters within Dryden are more likely to have lower than average incomes in general with lower household incomes for Indigenous and single female-led families.

Activities for Seniors

The table below shows the number and proportion of seniors residing in both Dryden and Machin.

Table 25: 2016 Census Age Distribution for the City of Dryden – Seniors

Age	Dryden 2016	Machin 2016	Dryden 2016 (%)	Machin 2016 (%)
65 to 69 Years	520	80	7%	8%
70 to 74 Years	350	50	5%	5%
75 to 79 Years	315	35	4%	4%
80 to 84 Years	255	20	3%	2%
85 Years and Older	215	15	3%	1%

No specific recreational or other activity participation rates are available for seniors. However, the City of Dryden does provide information regarding the use of the recreation, arts, music, cultural venues that are owned and operated by the city.

The following graphs show the use of the various facilities from 2017 to 2019. First, the City of Dryden has had a consistent decline in the number of visitors to its pool and fitness center from 2017 to 2019 (Figure 13). However, arenas, baseball and soccer facilities have had slightly increasing hours of utilization between 2017 and 2019 (Figure 14).

Figure 13: Number of Visitors – Pool and Fitness Center

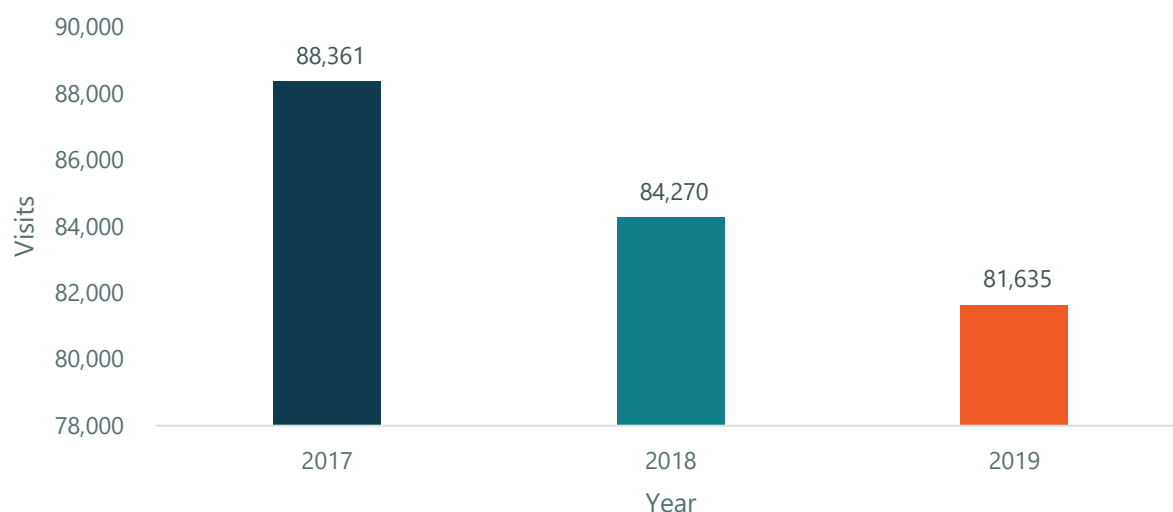
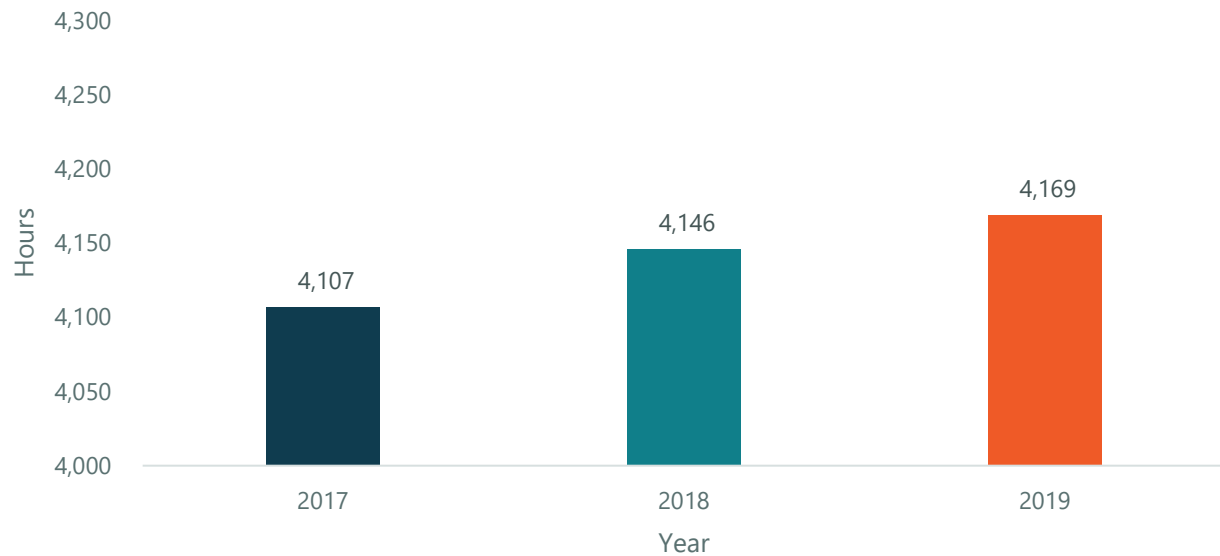


Figure 14: Hours of Utilization – Arena, Baseball, Soccer



The museum in Dryden saw visitations increase from 2017 to 2018 before dropping slightly in 2019 (Figure 15). On average 1,675 people visited the museum over the three-year period. However, during the same three years, museum memberships dropped from 87 in 2017 to 64 in 2019 (Figure 16).

Figure 15: Museum Visitors

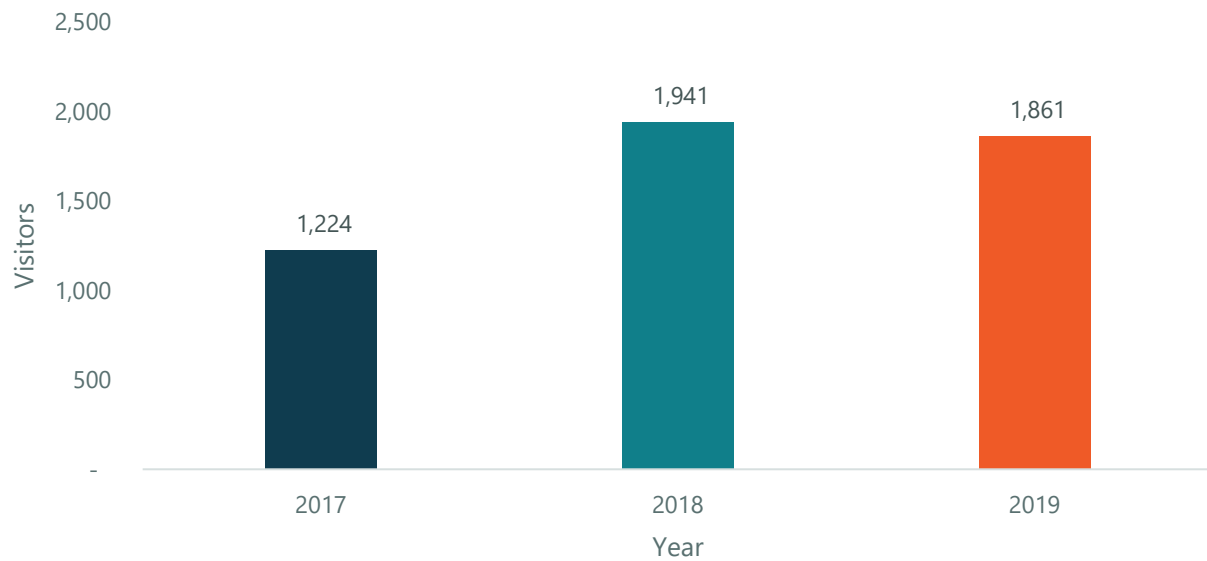
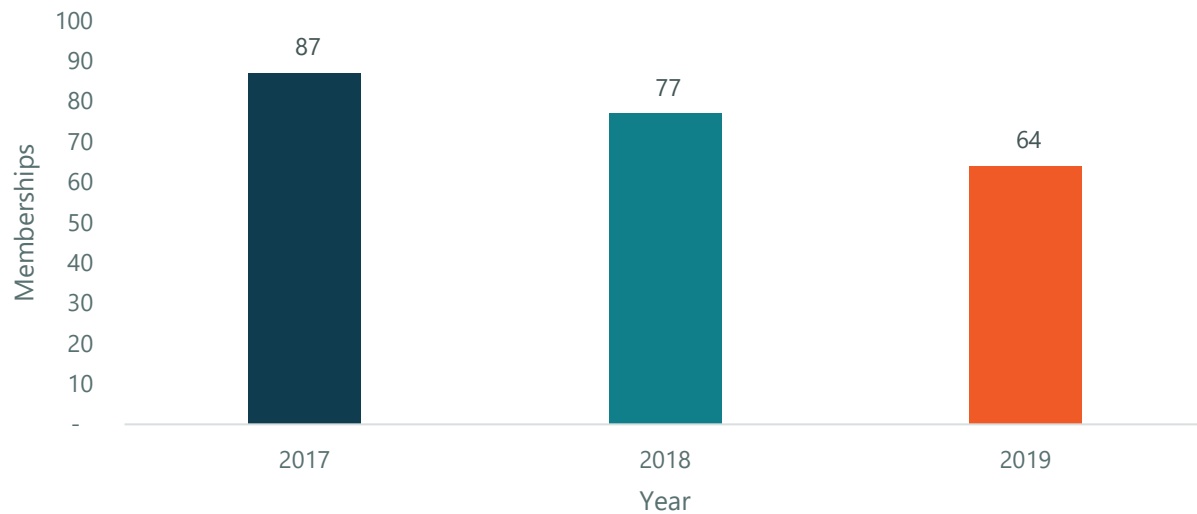
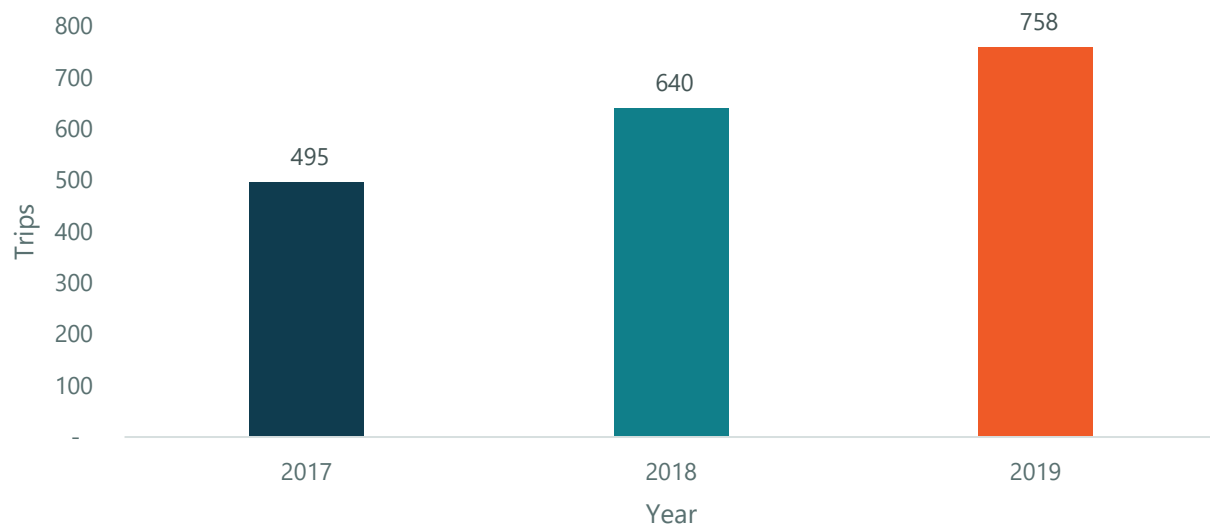


Figure 16: Museum Memberships



Finally, MyLift is a service in Dryden that offers transportation for seniors, individuals that are unable to use regular city transportation, youth, and individuals from low income households. The service consists of one lift-equipped van that can accommodate 3 wheelchairs and 8 walking passengers. According to the City of Dryden's records, the number of trips per 1,000 population has increased from 495 in 2017 to 758 in 2019 (Figure 17).

Figure 17: Passenger Trips per 1,000 Population in Service Area



Volunteer Opportunities

Working session participants perceive volunteers to be valuable for delivering services to improve Community Safety and Well-Being with Dryden and Machin. However, neither community has a centralized location for individuals to find volunteer opportunities. Further, each organization has a different standard for volunteers, meaning when an individual wants to volunteer, they do not know where to go to find an opportunity and they do not know if they are qualified unless they contact the organization directly.

According to the 2021 Community Safety and Well-Being Survey, approximately 618 individuals volunteered at least once during the year with the average individual volunteering 184 times or three times per week. However, these findings cannot be extrapolated to the rest of the population of Dryden or Machin as there is no information regarding the number of individuals that are willing to volunteer, how long individuals volunteer for, and what individuals are interested in volunteering in.

Vulnerable Groups

Information provided by the working committee as well as secondary research suggests that individuals from marginalized communities, living alone, that are renters, have a fixed or limited income and are experiencing mental health and addiction issues are more vulnerable to food insecurity and homelessness.

Contributing Factors

Risk Factors

The following risk factors have been identified as contributing to the likelihood of an individual experiencing negative safety outcomes:

- Low socioeconomic status
 - Limited gainful employment opportunities
- Lack of transportation
- Family structure
- Social isolation
- Mental health and substance abuse
- Increasing food costs
- Discrimination based on race or other characteristics such as mental health
- Lack of access to social programs as well as recreational and cultural activities
- Lack of supportive housing for seniors, individuals living with disabilities, and individuals experiencing mental health and addiction issues
- Limited social housing

Protective Factors

The following factors have been identified as important to mitigate/prevent individuals from becoming high risk of negative safety outcomes:

- Gainful employment

- Affordable and supportive housing
- Family and peer network
- Recreational and cultural activities
- Existing community services including:
 - Dryden Native Friendship Centre
 - Dryden Food Bank

Identified Programs and Services

The following table outlines the organizations providing social development services to the community. A more detailed description including services, target population, location, access, and business hours may be found in Appendix 5.

Table 26: Organizations Providing Applicable Services in Dryden and Machin

Organization	Service Line
Canadian Mental Health Association	• Counselling • Therapy • Cognitive Screening and Intervention • Psychiatry • Education • Mental Health
City of Dryden	• Community Services • Recreation • Transportation
Confederation College	• Skills Training • Job Preparation • Student Services: ◦ Counselling ◦ Dental ◦ English as a Second Language ◦ Food Bank ◦ Health Centre • Wellness Centre
Community Living Dryden-Sioux Lookout	• Mental Health • Psychological and Psychiatric Services • Recreation • Education • Employment Services • Host Family Program • Residential Services

Organization	Service Line
	Supported Independent Living
Dryden Senior Services	- Community Support Services - Adult Day Programs - Supportive Housing - Health Programming - Food Programming
Dryden Native Friendship Centre	- Education - Health - Mental Health - Indigenous Support
Dryden Full Gospel Church	- Education - Worship - Recreation
Dryden Lutheran Parish	- Food Services - Recreation
Dryden Food Bank	Food Service
Dryden Go-Getters	Recreation
Ear Falls Community Health Centre	Dental Services
Helping Hands	Christmas Food Hamper Program
Hoshizaki House Dryden District Crisis Shelter	- Emergency Shelter - Counselling
Kenora District Services Board	- Housing - Medical Services - Employment
Kenora Association of Community Living	- Mental Health - Developmental Disability
Municipality of Machin	- Community Services - Recreation - Transportation
Northwestern Health Unit	Preventative Health Services

Organization	Service Line
	• Food Security • Mental Health Promotion
Paawidigong First Nations Forum	• Medical Services • Mental Health • Cultural Learning • Social Services
Tikinagan Child and Family Services	• Child and Welfare Services • Counselling
Vermilion Bay Lion's	• Senior Transportation • Senior Recreational Activities • Food Bank • Medical Equipment

Gaps and Barriers

Key gaps and barrier identified that impact the ability of community members to meet their needs:

- Facilities are limited in the evenings and on weekends
- There are limited translation services for Indigenous and New Canadian community members
- Limited transportation service providers (City of Dryden – MyLift and Dryden Senior Services)
 - Less service during evening and weekends
 - Limited services for seniors and individuals that use the handicap bus
 - Limited services outside city limits
 - No affordable transportation outside city limits
- Limited organizations providing affordable food
- No homeless shelter in Dryden
- No centralized location to post volunteer opportunities
 - No standardized policies for volunteers
- Recreational and other activities can be too costly
- Stigma, discrimination limiting access to supportive services
- Limited in-home support for seniors and individuals with disabilities

Objectives

The following table outlines the key objectives of the Social Development Pillar.

Table 27: Social Development Pillar Objectives

Objective	Description	Target Completion
Emergency food access	Work with community-based organizations and food programs to improve emergency food access	2022
Emergency housing support	- Working with local, provincial, and federal governments to advocate for appropriate housing including supported housing and crisis housing - Identify and highlight needs related to community housing - Coordination of support/service pathways for emergency housing clients	2022
Volunteerism	Establish effective methods to promote volunteer opportunities	2022
Seniors' health and well-being	Identify and promote activities for older adults (arts/music/cultural/etc.) to reduce isolation	Ongoing

Target Outputs/Outcomes

The specific target outputs/outcomes for the Social Development Pillar are shown in the following table.

Table 28: Social Development Pillar Target Outputs/Outcomes

Objective	Short-Term	Intermediate	Long-Term
Emergency food access	Establish a committee that includes all those engaged in providing emergency food programs	- Identification of gaps and opportunities for enhanced coordination of existing food access programs - Seek funding opportunities to enhance existing programs and/or create new ones - Increase awareness among partners and populations in need about available emergency food programs	Increased capacity of existing emergency food access programs and/or new ones to serve populations in need
Emergency housing support	Establish a committee of organizations that will provide support/services to shelter clients	- Establish clear pathways for health and social services/support for shelter clients - Implement a campaign to raise awareness of the state of homelessness (including the issue of hoarding) to increase community readiness prior to the opening of the shelter	- Increased access to emergency housing (as per KDSB plan) - Enhanced coordination of services/support for those in need of emergency housing - Increased community receptiveness and support for a shelter
Volunteerism	Establish a working group to do a scan of local organizations that offer volunteer opportunities	Establish effective methods to promote the volunteer opportunities identified	Increased awareness of opportunities to volunteer

Objective	Short-Term	Intermediate	Long-Term
Seniors' health and well-being	Seniors' representation on existing older adults subcommittee	- Coordination of activities to reduce isolation and increase safety (including arts, cultural, recreation activities and emergency preparedness) - Promotion of activities to reduce isolation and increase safety through community partners and local media	- Increased opportunities to access activities that increase safety and reduce isolation among older adults - Increased awareness of these activities

Working Groups

The following table identifies the organization(s) responsible for ensuring the objectives are achieved by the specified dates with success being measured in reference to the identified target outputs/outcomes.

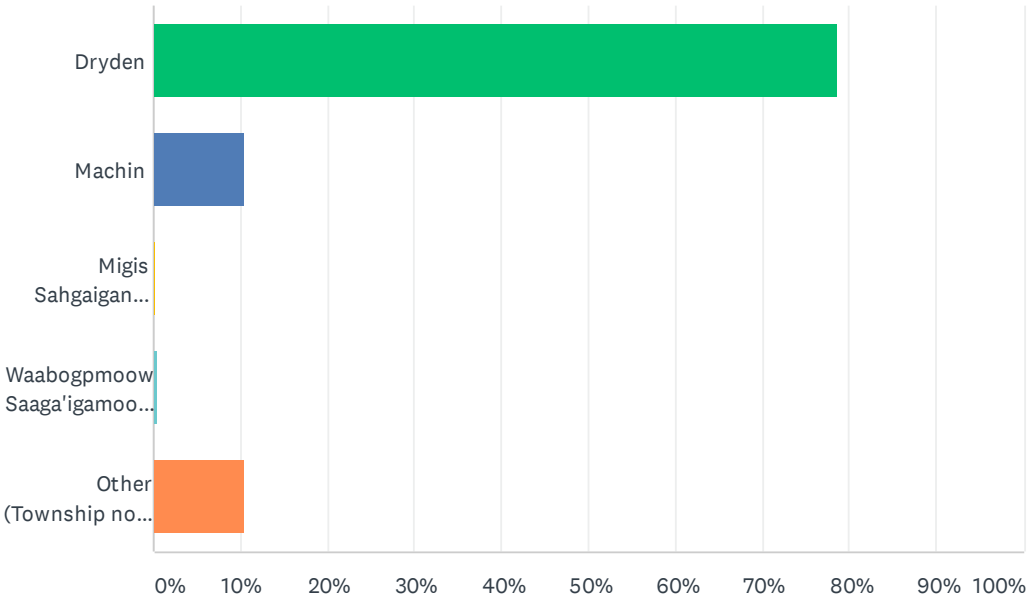
Table 29: Social Development Pillar Working Groups

Objective	Co-Leads	Members
Emergency food access	Northwestern Health Unit and Dryden Native Friendship Centre	Dryden Food Bank, Dryden Native Friendship Centre, Full Gospel Church, First United Church, Meals on Wheels, Northwestern Health Unit
Emergency housing support	Kenora District Services Board and a co-lead	Social Development Pillar
Volunteerism	TBD	Social Development Pillar
Seniors' health and well-being	Northwestern Health Unit and District Mental Health Services for Older Adults Programs (and health care rep)	Canadian Mental Health Association, City of Dryden, Kenora District Services Board, Metis Nation of Ontario, Northwestern Health Unit, Patricia Gardens

Appendix 1 – Community Safety and Well-Being Plan Survey Results

Q1 What community do you live in?

Answered: 916 Skipped: 2



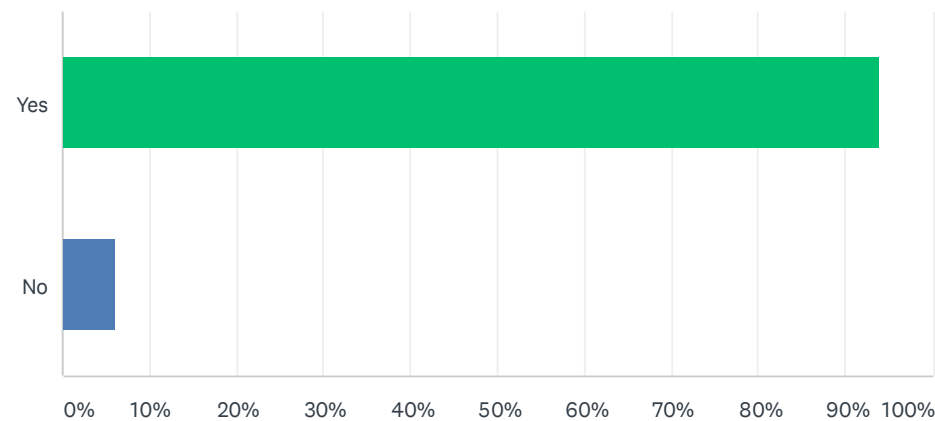
ANSWER CHOICES	RESPONSES	
Dryden	78.60%	720
Machin	10.37%	95
Migis Sahgaigan (Eagle lake First Nation)	0.22%	2
Waabogpmoow Saaga'igamoow Anishinaabeg (Wabigoon Lake Ojibway Nation)	0.33%	3
Other (Township not listed)	10.48%	96
TOTAL		916

Q2 How long have you lived in your community?

Answered: 908 Skipped: 10

Q3 Were you born in Canada?

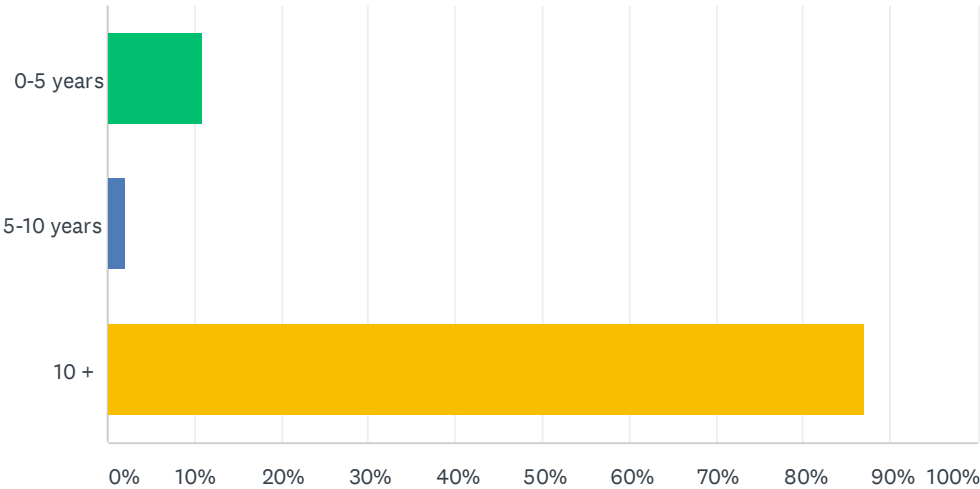
Answered: 912 Skipped: 6



ANSWER CHOICES	RESPONSES	
Yes	93.97%	857
No	6.03%	55
TOTAL		912

Q4 How many years ago did you move to Canada?

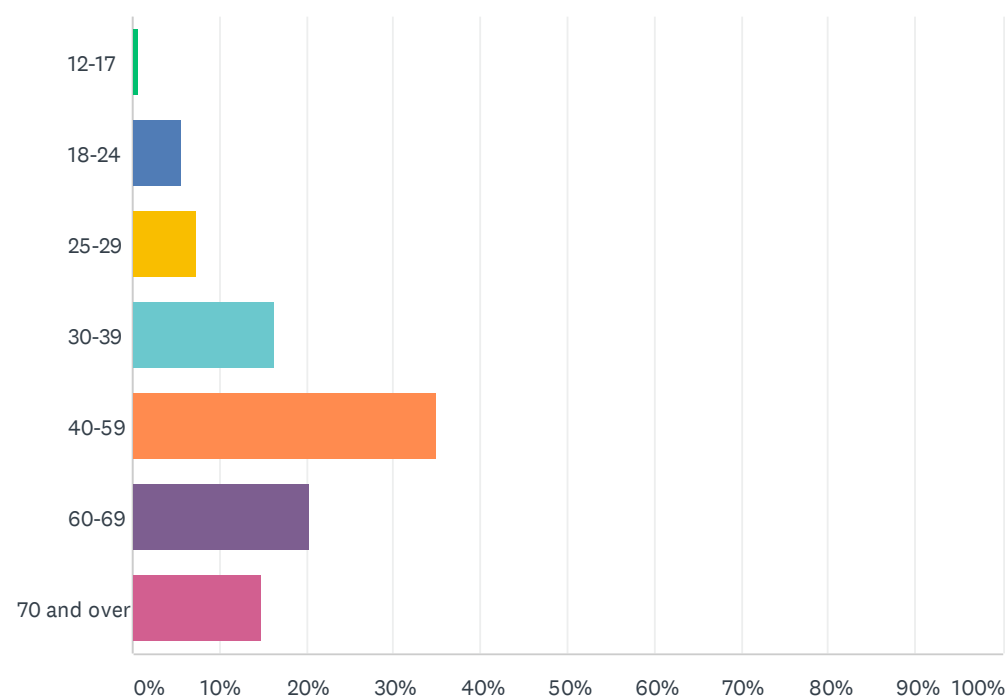
Answered: 46 Skipped: 872



ANSWER CHOICES	RESPONSES	
0-5 years	10.87%	5
5-10 years	2.17%	1
10 +	86.96%	40
TOTAL		46

Q5 How old are you?

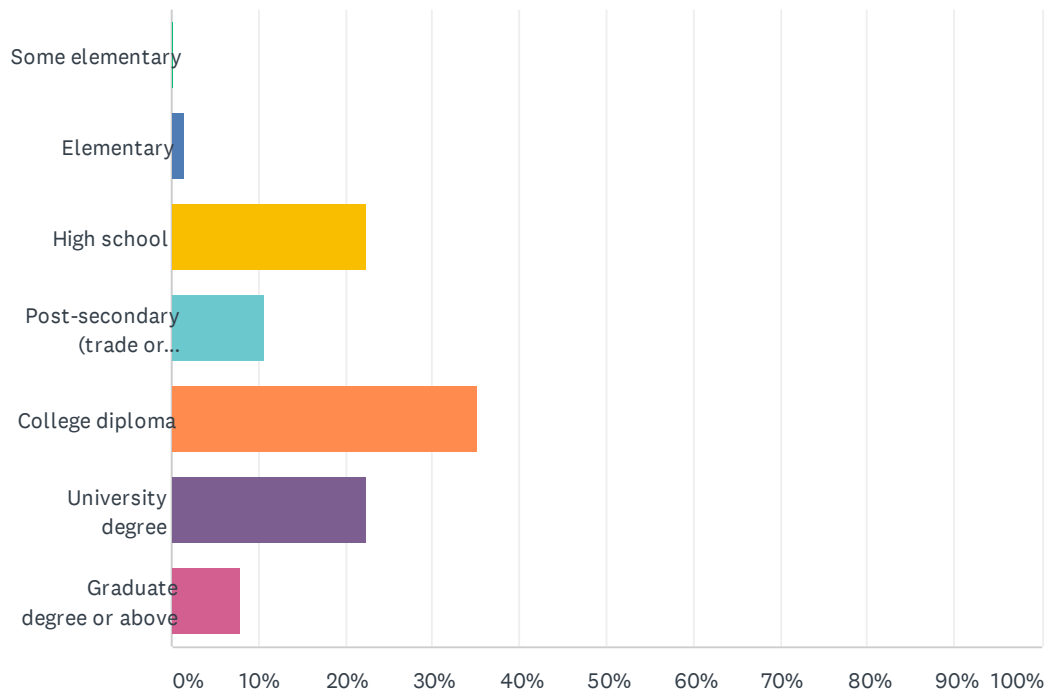
Answered: 696 Skipped: 222



ANSWER CHOICES	RESPONSES	
12-17	0.72%	5
18-24	5.75%	40
25-29	7.33%	51
30-39	16.24%	113
40-59	34.91%	243
60-69	20.26%	141
70 and over	14.80%	103
TOTAL		696

Q6 What is the highest level of education you have completed?

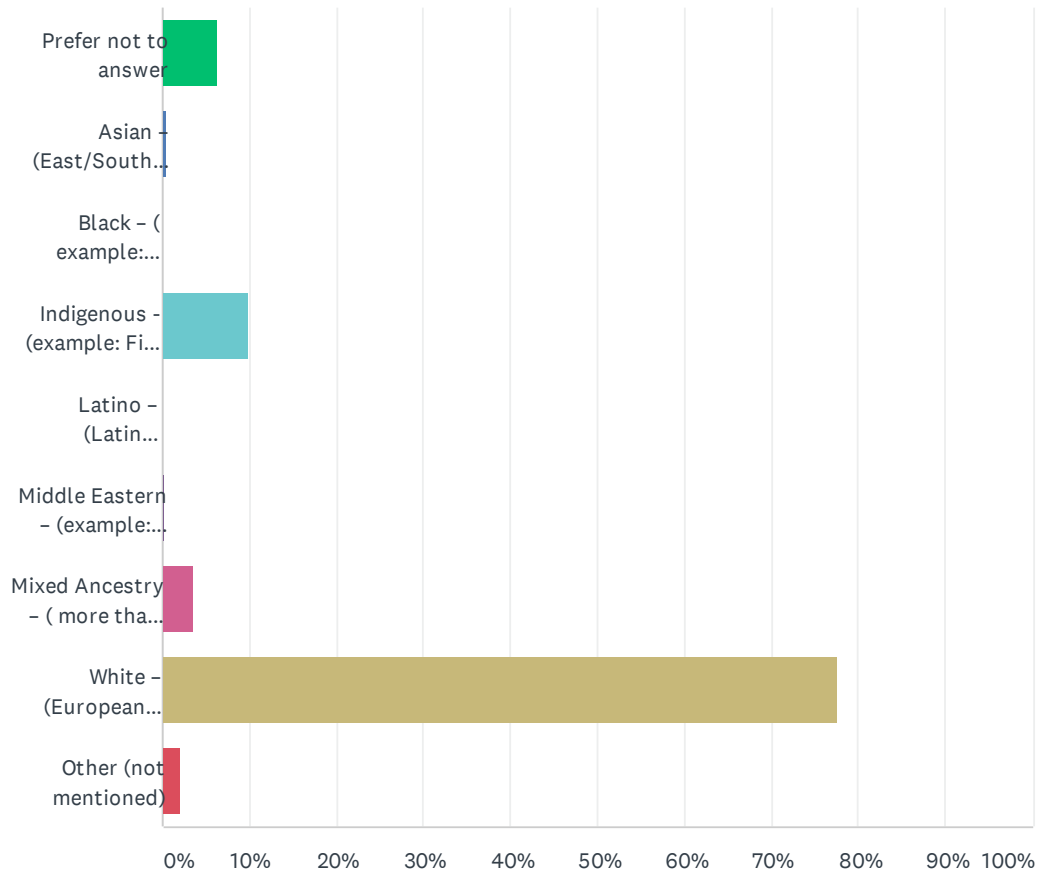
Answered: 695 Skipped: 223



ANSWER CHOICES	RESPONSES	
Some elementary	0.14%	1
Elementary	1.44%	10
High school	22.45%	156
Post-secondary (trade or apprenticeship)	10.65%	74
College diploma	35.11%	244
University degree	22.30%	155
Graduate degree or above	7.91%	55
TOTAL		695

Q7 Do you identify as:

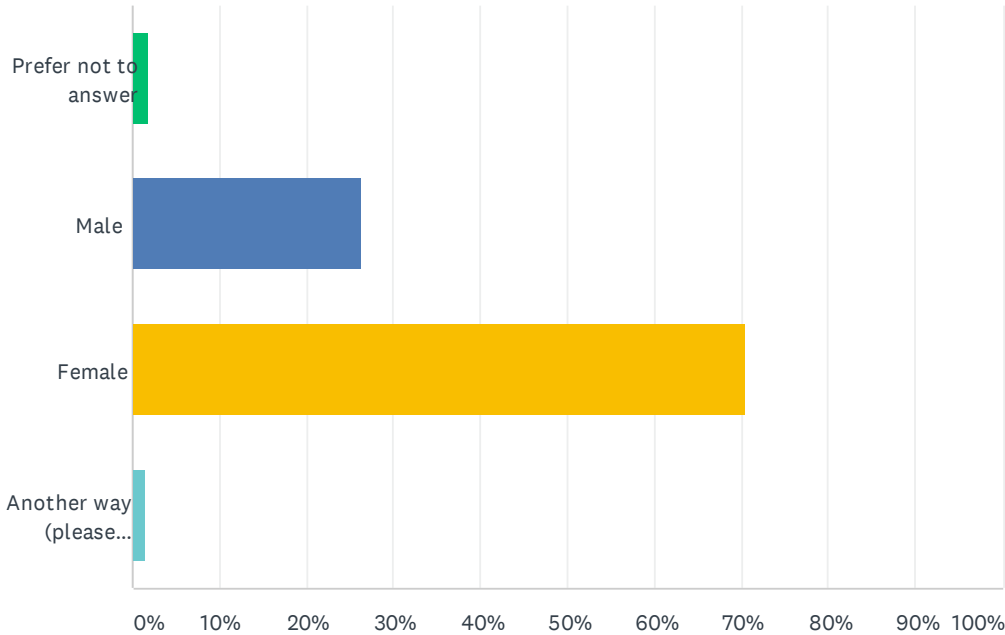
Answered: 695 Skipped: 223



ANSWER CHOICES	RESPONSES	
Prefer not to answer	6.33%	44
Asian – (East/South Asian, Chinese, Korean, Japanese, Taiwanese, Filipino, Cambodian, Thai, Indonesian)	0.43%	3
Black – (example: African, Afro-Caribbean, African-Canadian)	0.00%	0
Indigenous - (example: First Nations, Inuit, Metis)	9.78%	68
Latino – (Latin American, Hispanic Descent)	0.00%	0
Middle Eastern – (example: Arab, Persian, Afghan, Egyptian, Iranian, Lebanese, Turkish, Kurdish, West Asian Descent)	0.14%	1
Mixed Ancestry – (more than one race category would apply)	3.45%	24
White – (European descent)	77.70%	540
Other (not mentioned)	2.16%	15
TOTAL		695

Q8 How do you define your gender?

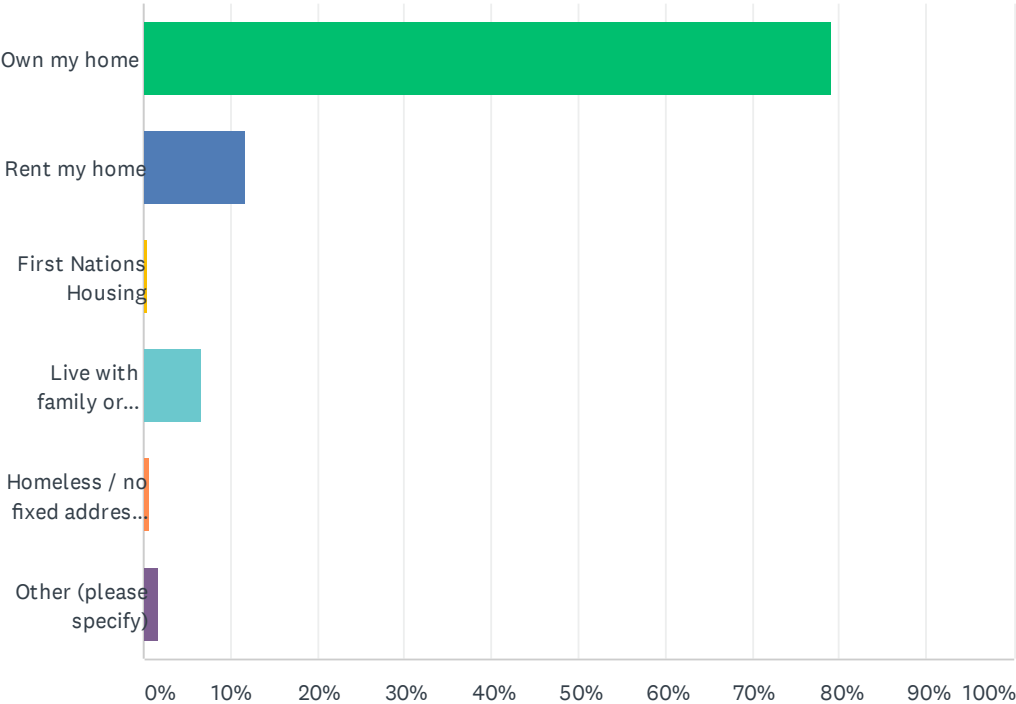
Answered: 697 Skipped: 221



ANSWER CHOICES	RESPONSES	
Prefer not to answer	1.87%	13
Male	26.26%	183
Female	70.44%	491
Another way (please specify)	1.43%	10
TOTAL		697

Q9 What is your housing situation?

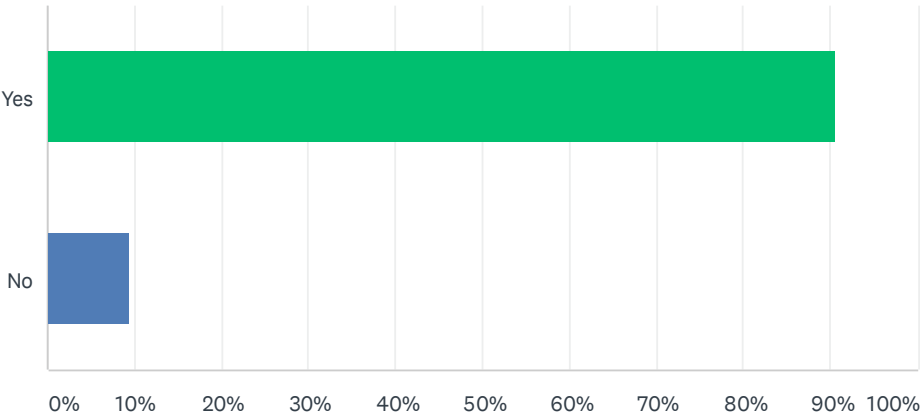
Answered: 697 Skipped: 221



ANSWER CHOICES	RESPONSES	
Own my home	79.05%	551
Rent my home	11.76%	82
First Nations Housing	0.43%	3
Live with family or friends	6.60%	46
Homeless / no fixed address / couch surf	0.57%	4
Other (please specify)	1.58%	11
TOTAL		697

Q10 Do you feel your home is in good repair

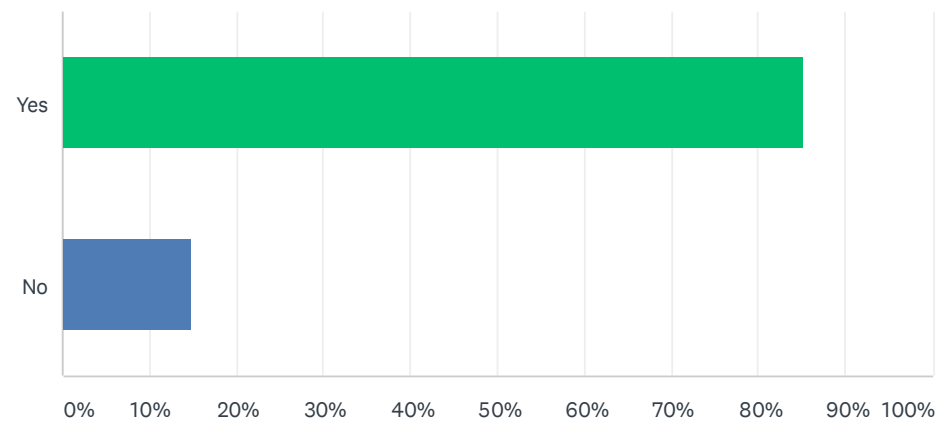
Answered: 695 Skipped: 223



ANSWER CHOICES		RESPONSES	
Yes		90.50%	629
No		9.50%	66
TOTAL			695

Q11 Do you feel homes in your neighbourhood are in good repair?

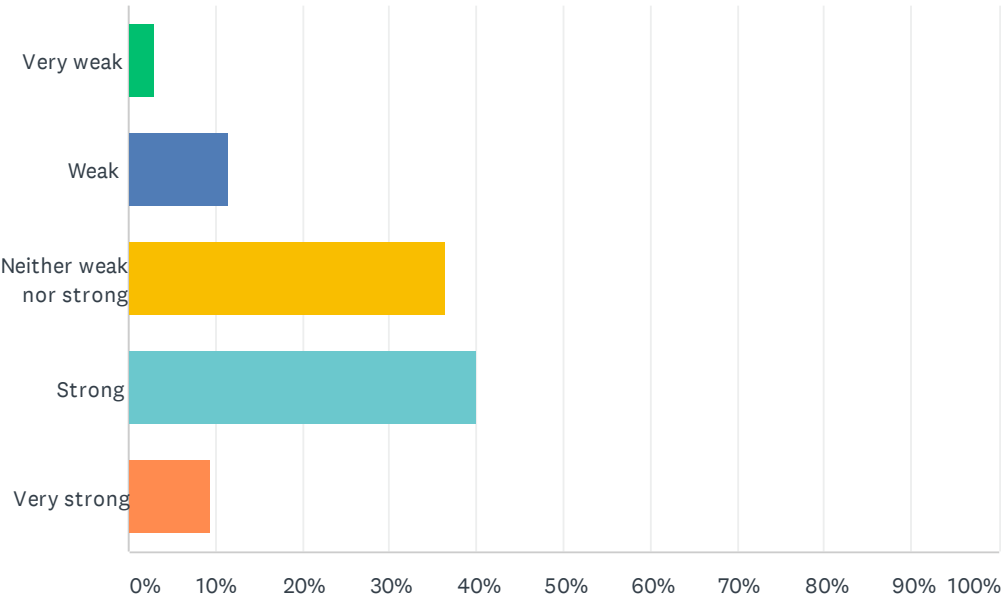
Answered: 697 Skipped: 221



ANSWER CHOICES		RESPONSES	
Yes		85.22%	594
No		14.78%	103
TOTAL			697

Q12 How would you describe your sense of belonging in your community?

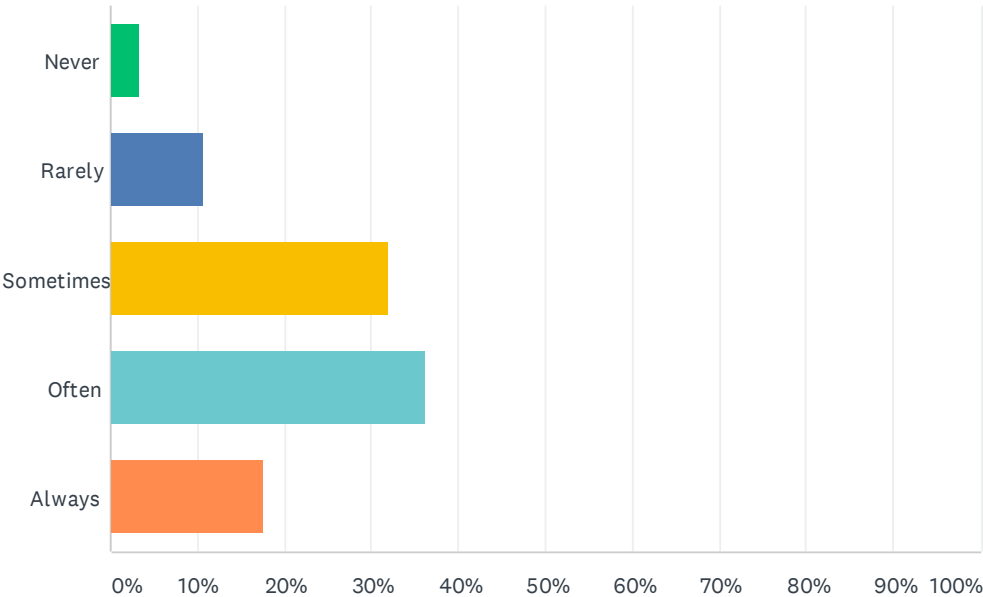
Answered: 697 Skipped: 221



ANSWER CHOICES	RESPONSES	
Very weak	3.01%	21
Weak	11.48%	80
Neither weak nor strong	36.30%	253
Strong	39.89%	278
Very strong	9.33%	65
TOTAL		697

Q13 How accepted and valued do you feel in your community?

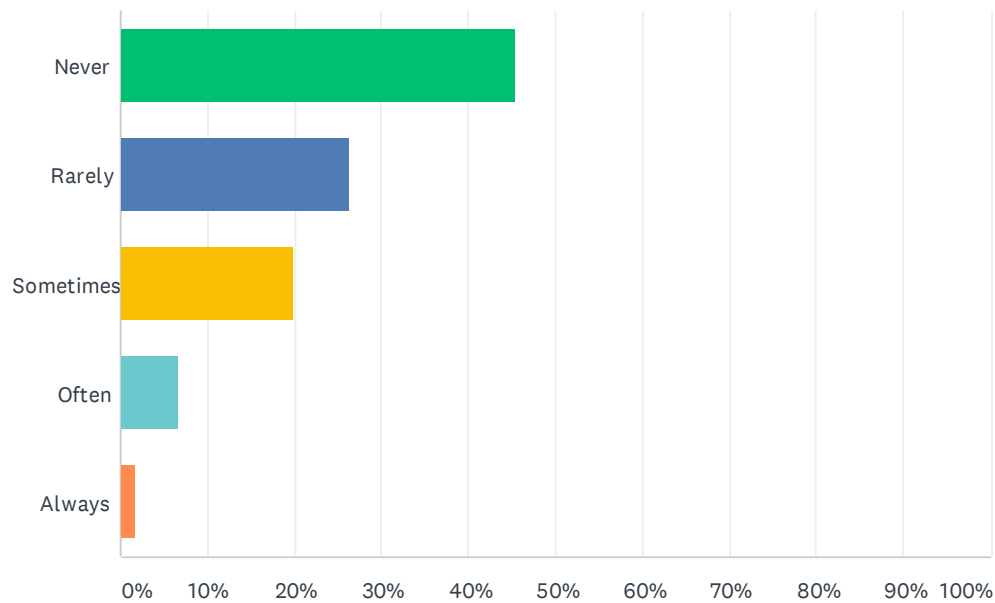
Answered: 696 Skipped: 222



ANSWER CHOICES	RESPONSES	
Never	3.45%	24
Rarely	10.63%	74
Sometimes	32.04%	223
Often	36.21%	252
Always	17.67%	123
TOTAL		696

Q14 How often do you feel unsafe or not accepted in the community because of your religion, culture, skin colour, sexual orientation, age, appearance, health?

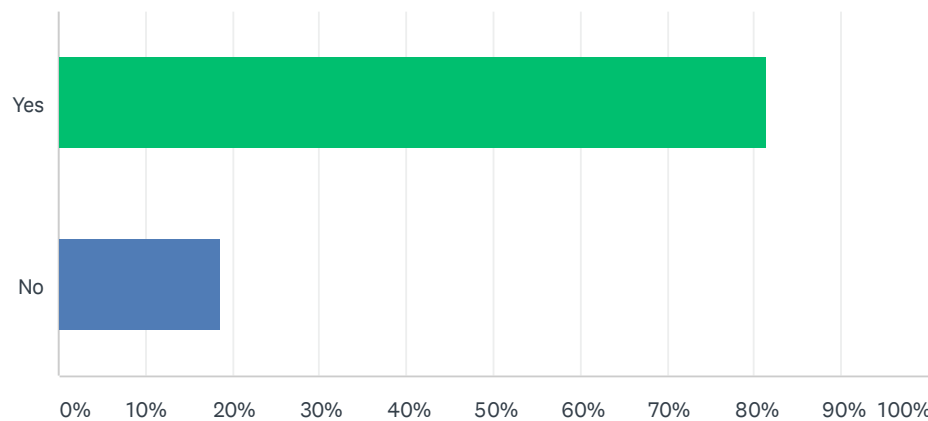
Answered: 695 Skipped: 223



ANSWER CHOICES	RESPONSES	
Never	45.47%	316
Rarely	26.33%	183
Sometimes	19.86%	138
Often	6.62%	46
Always	1.73%	12
TOTAL		695

Q15 Do you feel comfortable accessing services in the community?

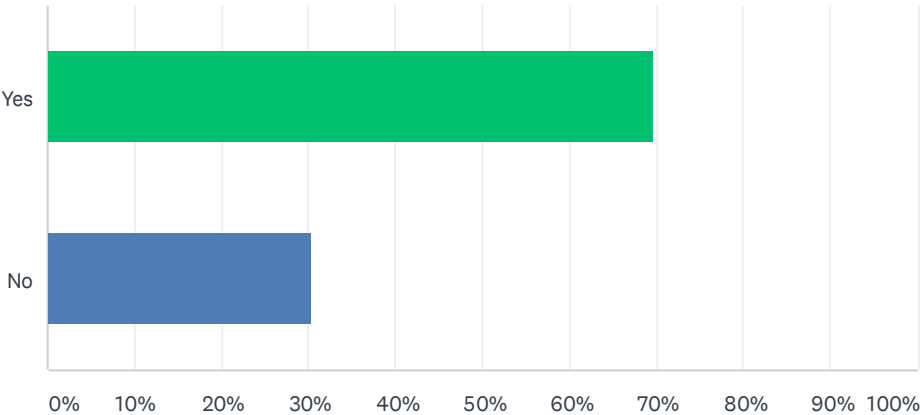
Answered: 696 Skipped: 222



ANSWER CHOICES	RESPONSES	
Yes	81.32%	566
No	18.68%	130
TOTAL		696

Q16 Do you feel safe in your community?

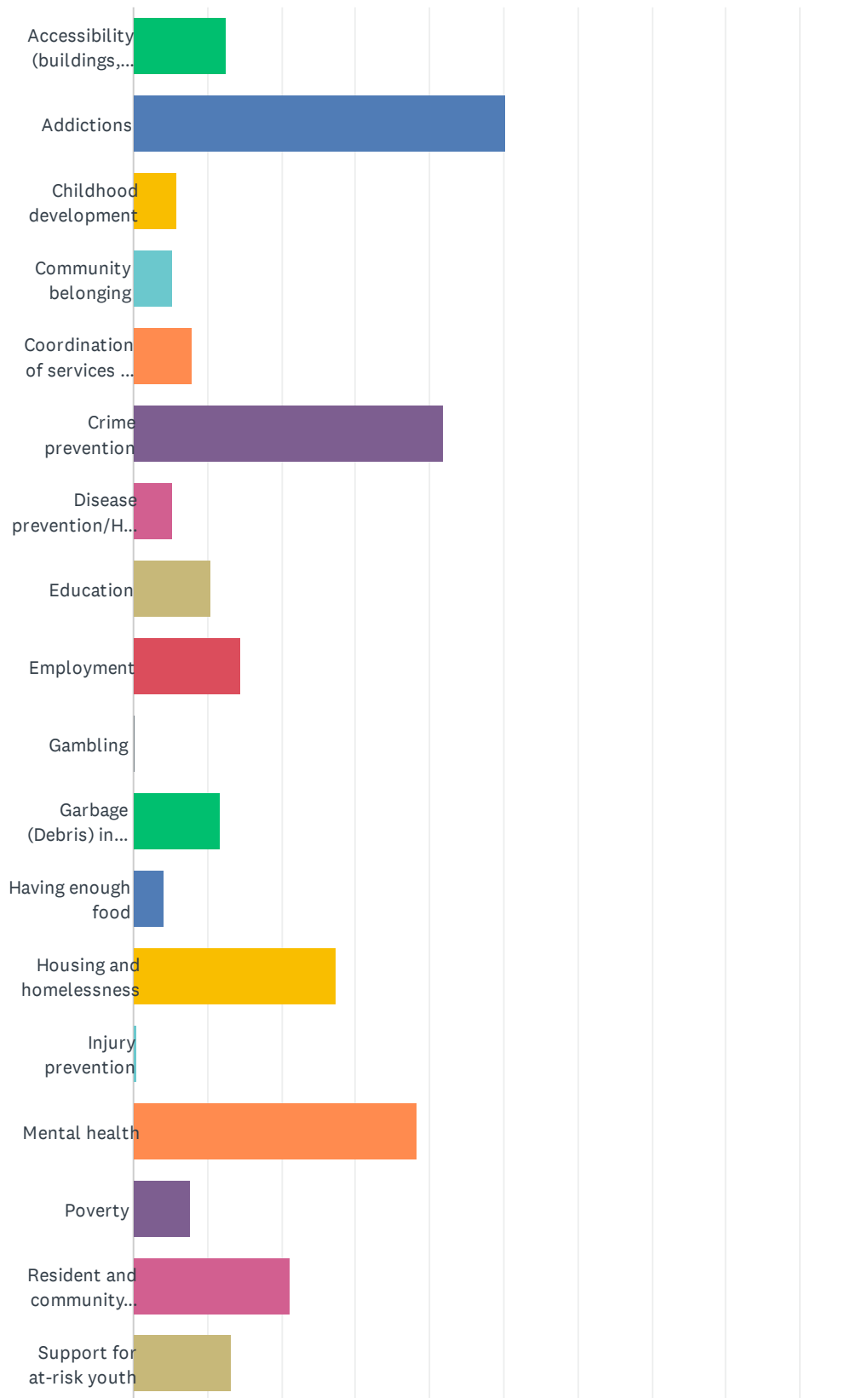
Answered: 692 Skipped: 226



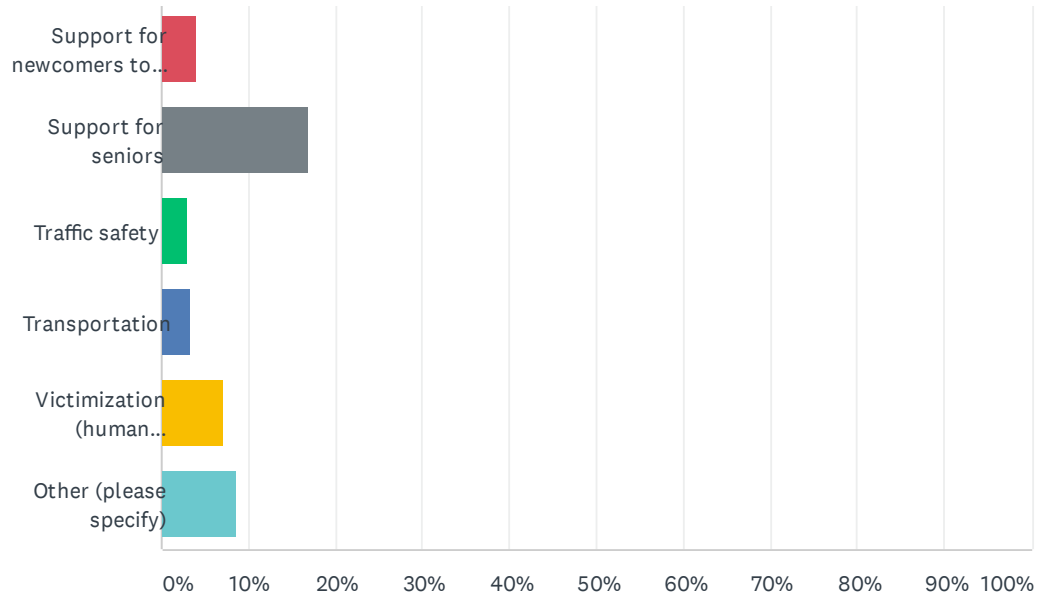
ANSWER CHOICES		RESPONSES	
Yes		69.65%	482
No		30.35%	210
TOTAL			692

Q17 What do you feel are the 3 most important priorities related to safety and well-being in your community?

Answered: 697 Skipped: 221



Survey – For the Dryden, Machin and Area Community Safety & Wellbeing Plan

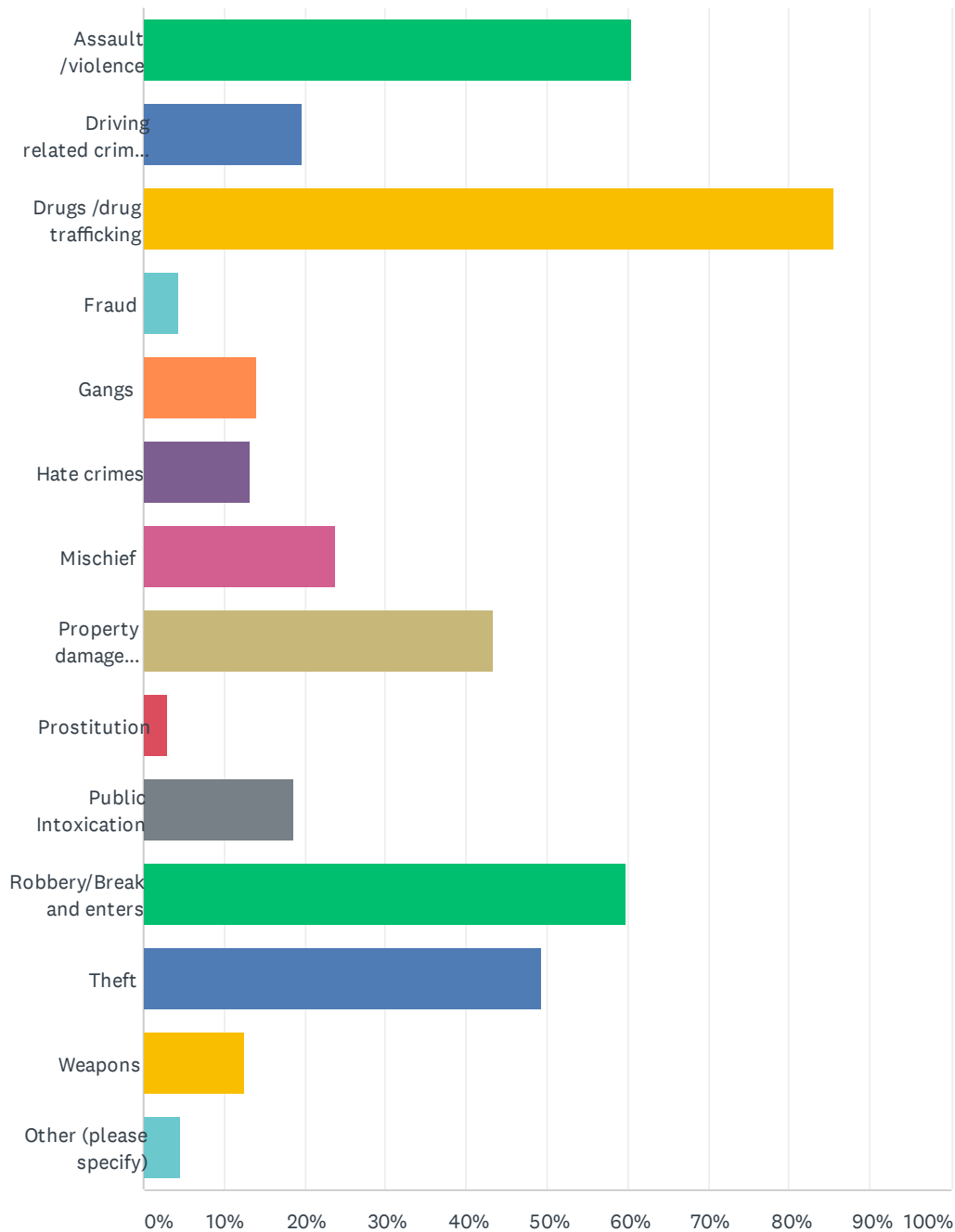


Survey – For the Dryden, Machin and Area Community Safety & Wellbeing Plan

ANSWER CHOICES	RESPONSES	
Accessibility (buildings, public venues, sidewalks, streets, etc)	12.63%	88
Addictions	50.22%	350
Childhood development	5.88%	41
Community belonging	5.16%	36
Coordination of services in Dryden	7.89%	55
Crime prevention	41.75%	291
Disease prevention/Harm reduction	5.16%	36
Education	10.47%	73
Employment	14.35%	100
Gambling	0.29%	2
Garbage (Debris) in public areas (glass, needles, plastics, etc)	11.62%	81
Having enough food	4.16%	29
Housing and homelessness	27.40%	191
Injury prevention	0.43%	3
Mental health	38.31%	267
Poverty	7.75%	54
Resident and community safety	21.23%	148
Support for at-risk youth	13.20%	92
Support for newcomers to Dryden	3.87%	27
Support for seniors	16.93%	118
Traffic safety	3.01%	21
Transportation	3.30%	23
Victimization (human trafficking / exploitation / domestic violence)	7.03%	49
Other (please specify)	8.61%	60
Total Respondents: 697		

Q18 Which crimes are you most concerned about in your community? (choose up to 5)

Answered: 694 Skipped: 224

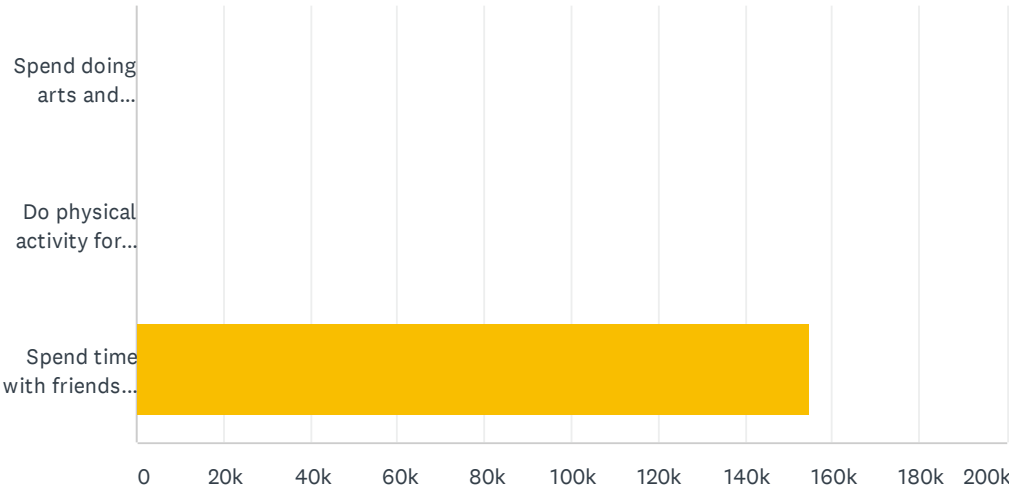


Survey – For the Dryden, Machin and Area Community Safety & Wellbeing Plan

ANSWER CHOICES	RESPONSES	
Assault /violence	60.37%	419
Driving related crimes (speeding, impaired, etc.)	19.60%	136
Drugs /drug trafficking	85.59%	594
Fraud	4.47%	31
Gangs	14.12%	98
Hate crimes	13.26%	92
Mischief	23.78%	165
Property damage /graffiti	43.23%	300
Prostitution	2.88%	20
Public Intoxication	18.59%	129
Robbery/Break and enters	59.80%	415
Theft	49.28%	342
Weapons	12.54%	87
Other (please specify)	4.61%	32
Total Respondents: 694		

Q19 How many hours per week do you:

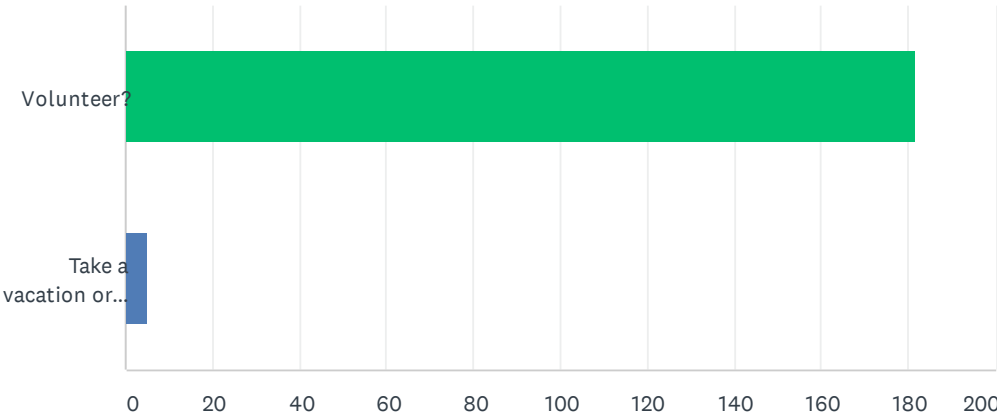
Answered: 661 Skipped: 257



ANSWER CHOICES	AVERAGE NUMBER	TOTAL NUMBER	RESPONSES
Spend doing arts and culture activities?	5	2,817	626
Do physical activity for longer than 15 minutes?	11	6,975	653
Spend time with friends and family?	155,009	100,136,049	646
Total Respondents: 661			

Q20 How many times per year do you:

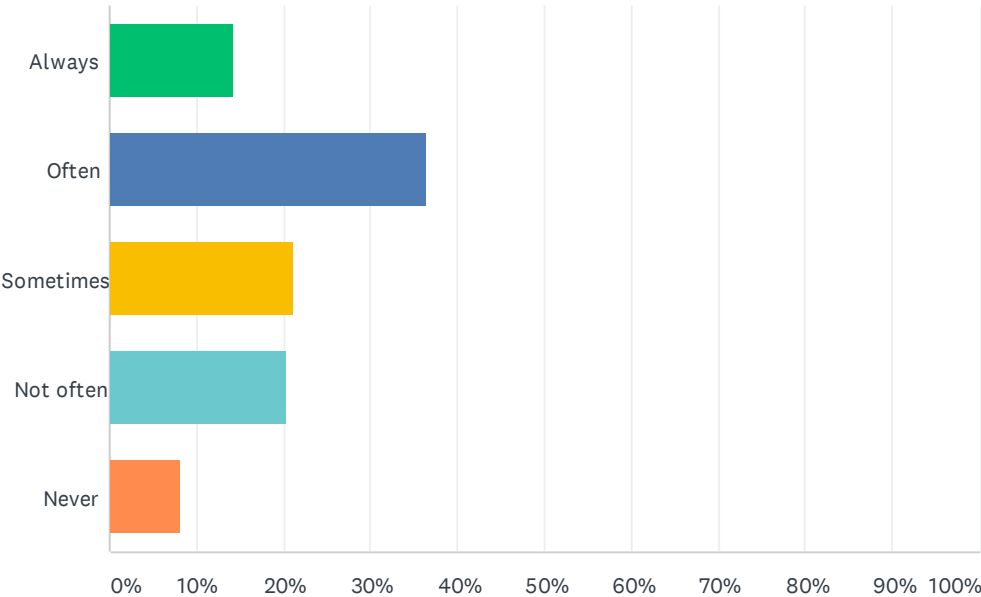
Answered: 653 Skipped: 265



ANSWER CHOICES	AVERAGE NUMBER	TOTAL NUMBER	RESPONSES
Volunteer?	181	113,545	626
Take a vacation or trip outside of your home community?	5	3,363	648
Total Respondents: 653			

Q21 How often do you get 7-9 hours of good quality sleep per night?

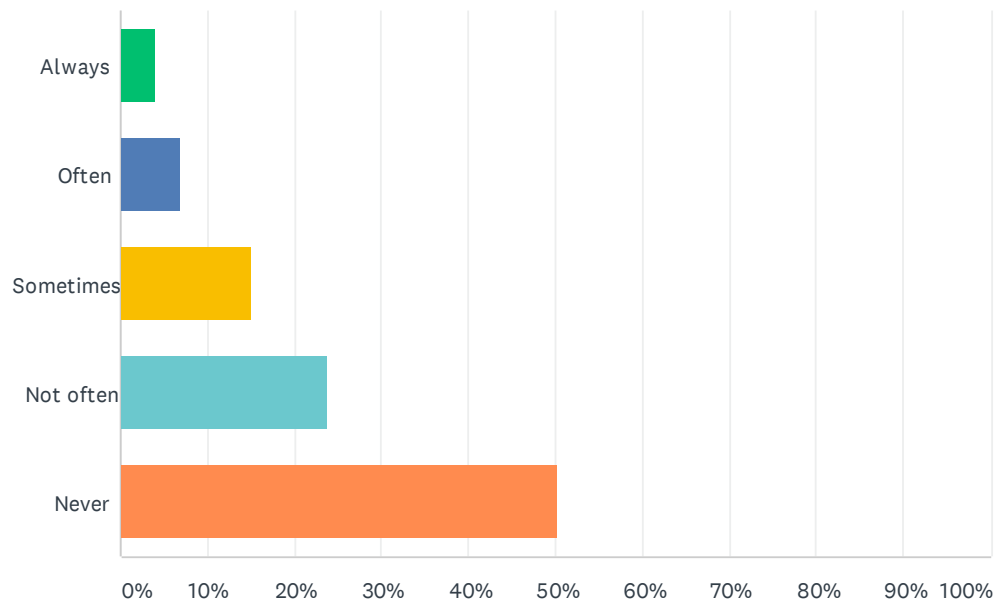
Answered: 686 Skipped: 232



ANSWER CHOICES	RESPONSES	
Always	14.14%	97
Often	36.30%	249
Sometimes	21.14%	145
Not often	20.26%	139
Never	8.16%	56
TOTAL		686

Q22 How often during the past year did you have difficulty making ends meet (able to pay rent/mortgage, pay bills, buy food, pay for child care or transportation)?

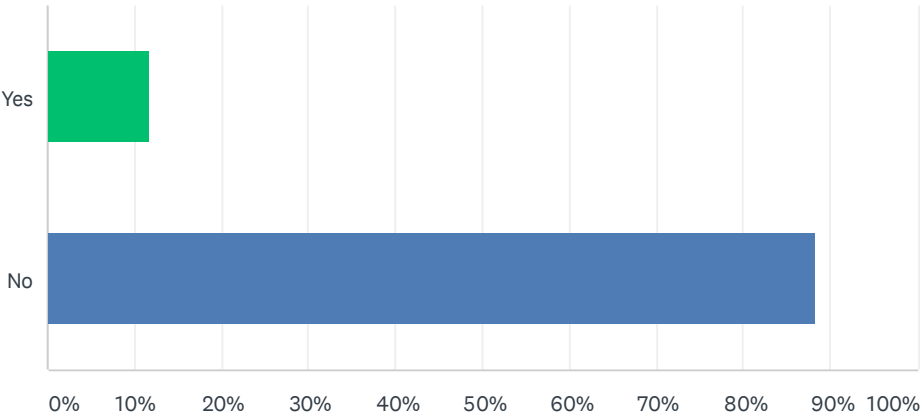
Answered: 685 Skipped: 233



ANSWER CHOICES	RESPONSES	
Always	3.94%	27
Often	6.86%	47
Sometimes	15.04%	103
Not often	23.94%	164
Never	50.22%	344
TOTAL		685

Q23 In the past year, has lack of transportation caused you to not get where you needed to go?

Answered: 683 Skipped: 235



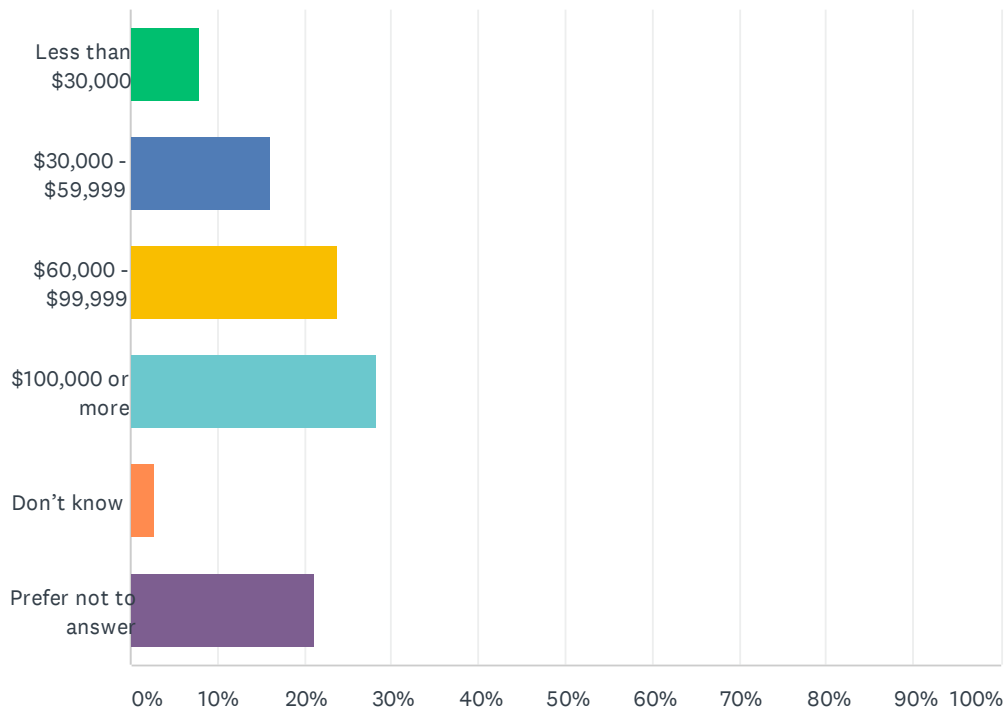
ANSWER CHOICES	RESPONSES	
Yes	11.71%	80
No	88.29%	603
TOTAL		683

Q24 What do you think can be done to improve the safety and well-being in your community?

Answered: 544 Skipped: 374

Q25 What was your total household income before taxes last year?

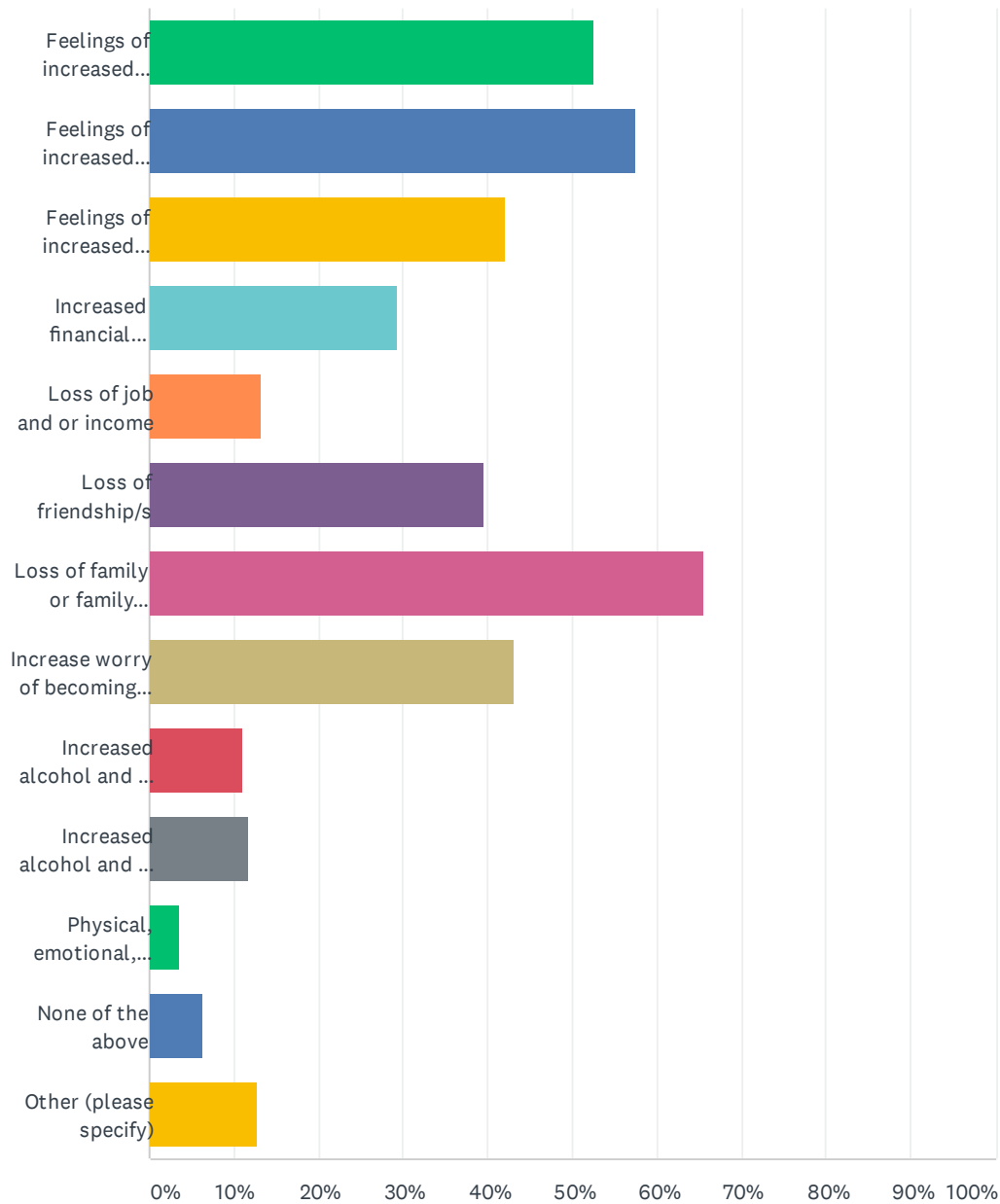
Answered: 687 Skipped: 231



ANSWER CHOICES	RESPONSES	
Less than \$30,000	7.86%	54
\$30,000 - \$59,999	16.16%	111
\$60,000 - \$99,999	23.87%	164
\$100,000 or more	28.24%	194
Don't know	2.77%	19
Prefer not to answer	21.11%	145
TOTAL		687

Q26 During the COVID-19 pandemic, I have felt or experienced the following: (Choose all that Apply)

Answered: 688 Skipped: 230

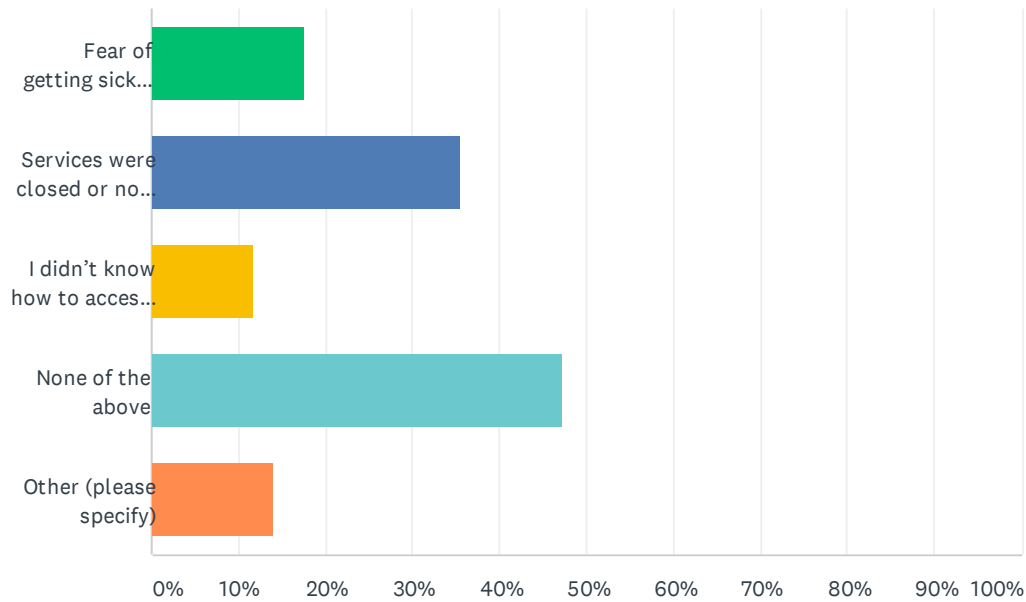


Survey – For the Dryden, Machin and Area Community Safety & Wellbeing Plan

ANSWER CHOICES	RESPONSES	
Feelings of increased loneliness	52.47%	361
Feelings of increased anxiety	57.56%	396
Feelings of increased depression	42.15%	290
Increased financial worries	29.36%	202
Loss of job and or income	13.23%	91
Loss of friendship/s	39.53%	272
Loss of family or family connection	65.55%	451
Increase worry of becoming sick	43.02%	296
Increased alcohol and or drug use (self)	11.05%	76
Increased alcohol and or drug use (family/friend/s)	11.63%	80
Physical, emotional, sexual abuse	3.63%	25
None of the above	6.25%	43
Other (please specify)	12.79%	88
Total Respondents: 688		

Q27 During the COVID -19 pandemic I did not access health care or social services because (Choose all that apply)

Answered: 676 Skipped: 242



ANSWER CHOICES	RESPONSES	
Fear of getting sick with the virus	17.60%	119
Services were closed or not available	35.50%	240
I didn't know how to access them during the pandemic	11.69%	79
None of the above	47.34%	320
Other (please specify)	14.05%	95
Total Respondents: 676		

Q28 Including yourself, how many people live in your household?

Answered: 686 Skipped: 232

Appendix 2 – Supporting our Youth

Organization	Major Programs and Services	Population Served	Working Location	Accessing Services	Business Hours
Anishinaabe Abinoojii Family Services	Administers bi-cultural child protection and prevention services for First Nation children and youth including: - Coordinates alternative care and customary care placements for children and youth - Conducts intake assessments - Investigates all reports of abuse and neglect - Offers family relief and support - Assists youth in planning for their future - Promotes community awareness and education through workshops and seminars - Hosts an annual traditional Honoring Our Children powwow - Organizes seasonal feasts in different communities” (Northwestern Health Unit, 2020, Service Description).	First Nations children and youth 17 years of age and younger, on/off-reserve and in need of protection.	12 Main St S Kenora, ON P9N 1S7	In-person services.	Office: Mon-Fri 8:30 am-4:30 pm Emergencies: Mon-Sun 24 hours
City of Dryden	- Recreational facilities as well as parks: - Pool - Ice arena - Field schedule - Hiking trails - Fitness center - MyLift	- These services are available to all residents of the City of Dryden - Any individual 6 years of age and older who is:	84 Whyte Ave., Dryden, ON P8N 1Z5 - Service is available city wide	- In-person services. - In-person services. - In-person and virtual services.	Monday to Friday 6:00am to 11:30pm (Arena) with other services being available Monday to Friday 8:30am to 4:30pm

Organization	Major Programs and Services	Population Served	Working Location	Accessing Services	Business Hours
	- Library services: - Take home craft kits for kids - Virtual book club for adults and seniors - Museum: - Educational programming - Exhibits and events	- Unable to use conventional transportation - Unable to walk more than 175 meters - Unable to climb more than three steps - Seniors Shuttle Service: Individuals 65 years of age and over - These services are available to all residents of the City of Dryden - These services are available to all residents of the City of Dryden	36 Van Horne Ave., Dryden, ON P8N 2A7 15 Van Horne Avenue, Dryden, ON P8N 2A5	In-person services.	- Monday to Friday, 8:00 a.m. to 4:00 p.m. - Monday – 10:00 am – 4:30 pm Tuesday – 10:00 am – 4:30 pm Wednesday – 12:00 pm – 6:00 pm Thursday – 10:00 am – 4:30 pm Friday – 10:00 am – 4:30 pm Saturday – 12:00 pm – 4:00 pm - Monday to Friday 8:30am to 4:30pm
Community Living Dryden-Sioux Lookout	“Clinical Services including psychological and psychiatric services through video conferencing - Community Inclusion Hud – recreational, learning, and leisure activities - Employment Services - Host Family Program - Residential Services - Supported Independent Living” (Northwestern Health Unit, 2020, Service Description)	Individuals 18 years of age and older with an intellectual and/or developmental disability	280 Arthur St Dryden, ON P8N 1K8	In-person and online services.	Mon-Fri 8 am-4 pm Closed weekends

Organization	Major Programs and Services	Population Served	Working Location	Accessing Services	Business Hours
Dryden and Ignace Area Impaired Reduction Strategy (DAIRS)	Recreational activity for youth – watching a movie. “Promotes awareness and education on impaired driving Supports victims of impaired driving” (Northwestern Health Unit, 2020, Service Description).	Services are available to youth within Dryden and the surrounding area.	No permanent office location.	In-person services.	Hours will vary throughout the year.
Dryden Public Library	- Homework Help - Career preparation - College Admissions Test Prep - Vocational Studies Premier - Homework Support	Offers services to the public	36 Van Horne Ave, Dryden, ON P8N 2A7, Canada	In-person and online services.	Monday, Tuesday, Thursday, Friday 10:00 am – 4:30 pm Wednesday 12:00 pm – 6:00 pm Saturday 12:00 pm – 4:00 pm Sunday: Closed
Dryden Regional Health Centre	“Operates a 41-bed acute care facility and provides an array of services including: - Acute care - Case management - Chronic care - Community programs - Crisis response - Diabetes Education - Diagnostic Imaging - Emergency department - Laboratory - Mental health and addiction services - Oncology - Outpatient services	These services are available to all residents of Dryden	58 Goodall St Dryden	In-person services.	Office Mon-Fri 8 am-4 pm Emergencies: Mon-Sun 24 hours

Organization	Major Programs and Services	Population Served	Working Location	Accessing Services	Business Hours
	• Outreach programs • Prevention and health promotion • Rehabilitation services • Respite care • Sexual assault and domestic violence • Surgical program" (Northwestern Health Unit, 2020, Service Description). 2. "Ontario Telemedicine Network (OTN): • Provides access to specialized medical care using video conferencing and other tele-diagnostic equipment • Allows specialists to remotely examine and prescribe treatments to patients in their home communities that reduces the need to travel to receive medical care" (Northwestern Health Unit, 2020, Service Description).				
Dryden Native Friendship Centre	• Akwe: Go – Urban Indigenous Children • Apatisiwin Employment and Training • Community Connections Program • Diabetes Education Program • EarlyON Child and Family Centre • Healing and Wellness • Health Outreach Worker • Indigenous Combined Court Worker	Aboriginal community members residing in Dryden for all ages	74 Queen St, Dryden, ON P8N 1A4, Canada	In-person and online services.	Monday and Tuesday: 8:30am-4:30pm Wednesday to Friday: 8:30am-6:00pm

Organization	Major Programs and Services	Population Served	Working Location	Accessing Services	Business Hours
	- Indigenous Mentor - Kizhaay Anishinaabe Niin - Lifelong Care Program - Lifelong Care Home Maintenance Program - Urban Aboriginal Healthy Kids - Urban Aboriginal Healthy Living Program - Urban Indigenous Homeward Bound Program - Wasa-Nabin – Urban Indigenous Youth Ages 13-18 - Indigenous Mental Health and Wellness Program				
Dryden Full Gospel Church	- Sunday school and Worship services - Women's, men's and youth ministries - True North Christian Academy 55+ Ministry - Music and worship creative arts - Kids club - Bible study and prayer	- Sunday School: children 2-12 years of age - Youth Programming: for those aged 12 to 18 - Other services are available to all individuals 18 years of age and older	599 Government St, Dryden, ON P8N 2Y4	In-person and online services.	Office: Mon-Fri 8 am-4 pm Sunday School and Worship Service: Sun 10:30 am, 7:30 pm
FIREFLY	- Services - Counselling and therapy - Child development, community education resources - Family and caregiver skills building - Infant and child development services	Children, youth, and their families from ages 0 to 18	75C Van Horne Ave Dryden, ON P8N 2B2	In-person services.	Mon-Fri 8:30 am-4:30 pm

Organization	Major Programs and Services	Population Served	Working Location	Accessing Services	Business Hours
	• SNAP • Psychology and psychiatry consultative services • Treatment for foster care • Occupational Therapy • Physiotherapy • Autism assessment and services • Speech and language pathology • Fetal Alcohol Syndrome Disorder • Foster parent support for foster parents with high-risk youths • Youth justice counselling • Youth mental health court worker program 2. Making Connections for Children and Youth 3. Children's Case Manager Program • Provides information and referrals to other services including physiotherapy, occupational therapy, counselling, psychology, telepsychiatry, child development and community integration • Provides case management to ensure children and youth are provided with services they require in a coordinated, effective, and efficient manner 4. "Planned Out-of-Home Respite • Provides funding for the family to hire a respite worker to care for				

Organization	Major Programs and Services	Population Served	Working Location	Accessing Services	Business Hours
	their high need's child outside of the family home Enables families to rest, attend to personal needs, or participate in outside activities" (Northwestern Health Unit, 2020, Service Description).				
Kenora District Services Board	- Community Homelessness Prevention Initiative - Social Housing - Land Ambulance - Ontario Works - Children's Programming	Multiple eligibility criteria for each service.	211 Princess St Suite 1 Dryden, ON P8N 3L5	In-person and online services.	Mon-Fri 8 am-4:30 pm
Keewatin-Patricia District School Board	- Student Services - Parents and Family support services - Child Protection - Safe 7 Support Schools - Mental Health Services - Student Success Initiatives - Adult Education - Hockey Academies	Public school board that serves the communities of Northwestern Ontario	79 Casimir Avenue, Dryden, ON P8N 2H4, Canada	In-person and online services.	Mon.-Fri. 8am to 4:30 pm
Kenora-Rainy River Districts Child and Family Services	"Child Welfare Services - Provides in-home support, counselling, education and advocacy - Protects children through prompt investigations of abuse and neglect	Children and youth 18 years of age and younger.	175 West River Rd Dryden	In-person services.	Mon-Fri 8:30 am-4:30 pm Emergencies: Mon-Sun 24 hours

Organization	Major Programs and Services	Population Served	Working Location	Accessing Services	Business Hours
	- Provides alternate placements for children unable to reside within their own families - Prepares and places children for adoption - Provides pregnancy counselling - Assists adolescents to move to independence - Provides extended care and maintenance to former crown wards - Provides counselling and care to developmentally challenged children - Recruits, trains, orientates and supports foster parents - Supports and counsels adoptive parents - Assists adult adoptees searching for birth parents 2. Bereavement Counselling - Provides individual counselling with family involvement - Offers counselling based on client needs" (Northwestern Health Unit, 2020, Service Description).				
Lillian Berg School	- Nutritional Care Packages for the Weekends- for students in need. - Breakfast Program- A Nutritional breakfast available for all students. - Hot Lunch Program- A charge but low income families can get for free.	Youth from the Municipality of Machin	Main St, Vermilion Bay, ON P0V 2V0	In-person services.	Hours vary depending on the program

Organization	Major Programs and Services	Population Served	Working Location	Accessing Services	Business Hours
	4. Hockey Academy- Has not been available during COVID 5. Forest School Program- The kids learn about forest in an outdoor learning space. 6. School Garden- Looking to start up this program- to teach the kids how to deal with food				
Metis Nation of Ontario	1. Educational support • Advocates for Métis people in the development of education policies and programs in Ontario • Participates in community school boards, colleges and universities and other educational agencies/stakeholders • Encourages academic skills development • Provides training programs that enable individuals to attain their educational aspirations • Administers the Métis Student Bursary Program and provides assistance in applying for the Métis post-secondary education bursary 2. Family and Wellbeing Services • After school safe places and homework clubs • Assistance in navigating the community support system	Métis individuals 15 years of age and older and their families	34B King St Dryden, ON P8N 1B3	In-person services.	Mon-Fri 8:30 am-4:30 pm

Organization	Major Programs and Services	Population Served	Working Location	Accessing Services	Business Hours
	- Assisting children and youth to foster self-identity and to develop life skills - Court-related supports - Empowering parents to be their children's best advocates - Ensuring families have their basic needs met - Guidance for building healthy relationships and raising awareness of personal safety issues - Peer support for youth involved in justice and correction issues - Referrals for employment and training programs - Supports for children and youth who have experienced or witnessed violence - Supports for Métis youth to stay in school - Support in case meetings and conferencing				
Municipality of Machin	- Woodland arena: - Provides regular scheduled hockey games during winter season - Offers public skating sessions - Holds annual hockey schools and power skating schools during summer months - Eagle River Recreation Centre: - Holds various community events	- These services are available to all residents of the City of Dryden and Municipality of Machin. - These services are available to all residents of the City of Dryden	29 Arena Ln, Vermilion Bay, ON P0V 2V0 75 Spruce St Vermilion Bay, ON - Multiple locations	- In-person services. - In-person services. - In-person services. - In-person services.	- Hours of availability will vary. - Hours of availability will vary. - Hours of availability will vary. - Hours of availability will vary.

Organization	Major Programs and Services	Population Served	Working Location	Accessing Services	Business Hours
	3. Parks: - Eagle River Hudson Post Park - Eagle River Park - Kinsmen Beach, with barbeque pits, change rooms and washroom - Vermilion Bay Pine Tree Park 4. Social clubs	and Municipality of Machin. 3. These services are available to all residents of the City of Dryden and Municipality of Machin. 4. Eligibility for these services will vary.	throughout the municipality 4. Location varies by club		
Northwest Catholic School Board	- Indigenous Education - Mental Health - Special Education - Continuation of Learning - Safe Schools - Technology - French language	Serving the communities of Sioux Lookout, Dryden, Atikokan, Fort Frances to Rainy River and First Nations	555 Flinders Ave, Fort Frances, ON P9A 3L2, Canada	In-person services.	
Northwestern Health Unit	1. Healthy Living Food Box 2. Infection Control 3. Northwestern Health Unit Mobile Dental Office 4. Perinatal Loss Support Group 5. Sexual Health Clinic Student Nutrition Program	Eligibility for these services will vary	75 D Van Horne Ave Dryden, ON P8N 2B2	In-person services.	Mon-Fri 8:30 am-4:30 pm Sexual Health Clinic: Mon 9 am-12 noon; Thu 9 am-6 pm Sexual Health at Dryden High School: Mon 11:40 am-12:30 pm
Paawidigong First Nations Forum	"Aboriginal Healing and Wellness Strategy Programs - Health Services Integration Fund (HSIF) - Aboriginal Fetal Alcohol Spectrum Disorder (FASD)	Provides culturally appropriate health programs and social services to the First Nations communities within the Dryden Tribal Area	105 King St, Dryden, ON P8N 1C1, Canada	In-person services.	Monday – Friday: 8:00 am – 4:00 pm

Organization	Major Programs and Services	Population Served	Working Location	Accessing Services	Business Hours
	- Community Health and Home and Community Care Nurse - Diabetes Nurse and Education program - Aboriginal Diabetes Initiative (ADI) - Mental Wellness - Mental Health and Addictions” (Northwestern Health Unit, 2020, Service Description).				
Tikinagan Child and Family Services	1. “Customary Care Services 2. Customary Care Services, Wee-chee-way-win Circle of Healing 3. Foster Care 4. Oshkee Meekena Youth Healing Centre in Cat Lake 5. Prevention and Support Services 6. Residential Services” (Northwestern Health Unit, 2020, Service Description).	First Nations individuals/families residing in Northwestern Ontario	65 King St Sioux Lookout	In-person services.	Mon-Fri 8 am-4:30 pm Emergency Service: Mon-Sun 24 hours
Vermilion Bay Lion’s	Air Cadet Program	Providing opportunities for youth to learn about aviation and the Canadian Armed Forces.	Unknown	Unknown	Unknown

Appendix 3 – Prevention and Education

Organization	Major Programs and Services	Population Served	Working Location	Accessing Services	Business Hours
City of Dryden	- Recreational facilities as well as parks - Pool - Ice arena - Field schedule - Hiking trails - Fitness center - MyLift - Library services - Take home craft kits for kids - Virtual book club for adults and seniors - Museum - Educational programming - Exhibits and events	- These services are available to all residents of the City of Dryden - Any individual 6 years of age and older who is: - Unable to use conventional transportation - Unable to walk more than 175 meters - Unable to climb more than three steps - Seniors Shuttle Service: Individuals 65 years of age and over - These services are available to all residents of the City of Dryden - These services are available to all residents of the City of Dryden	84 Whyte Ave., Dryden, ON P8N 1Z5 - Service is available city wide 36 Van Horne Ave., Dryden, ON P8N 2A7 15 Van Horne Avenue, Dryden, ON P8N 2A5	- In-person services. - In-person services. - In-person and virtual services. - In-person services.	- Monday to Friday 6:00am to 11:30pm (Arena) with other services being available Monday to Friday 8:30am to 4:30pm - Monday to Friday, 8:00 a.m. to 4:00 p.m. - Monday - 10:00 am - 4:30 pm Tuesday - 10:00 am - 4:30 pm Wednesday - 12:00 pm - 6:00 pm Thursday - 10:00 am - 4:30 pm Friday - 10:00 am - 4:30 pm Saturday - 12:00 pm - 4:00 pm - Monday to Friday 8:30am to 4:30pm

Organization	Major Programs and Services	Population Served	Working Location	Accessing Services	Business Hours
Community Living Dryden-Sioux Lookout	1. "Clinical Services including psychological and psychiatric services through video conferencing 2. Community Inclusion Hud – recreational, learning, and leisure activities 3. Employment Services 4. Host Family Program 5. Residential Services 6. Supported Independent Living" (Northwestern Health Unit, 2020, Service Description)	Individuals 18 years of age and older with an intellectual and/or developmental disability.	280 Arthur St Dryden, ON P8N 1K8	In-person and online services.	Mon-Fri 8 am-4 pm
Dryden Area Anti-Racism Network	1. Indigenous Art Program 2. Living Libraries 3. Social Justice Movie Nights 4. Trips to Pow Wow events for Dryden residents to surrounding First Nation communities	Services are available to City of Dryden and Machin residents.	No permanent officer location.	In-person services.	Hours will vary based on the event.
Dryden Native Friendship Centre	• Akwe: Go – Urban Indigenous Children • Apatisiwin Employment and Training • Community Connections Program • Diabetes Education Program • EarlyON Child and Family Centre • Healing and Wellness • Health Outreach Worker • Indigenous Combined Court Worker • Indigenous Mentor • Kizhaay Anishinaabe Niin • Lifelong Care Program • Lifelong Care Home Maintenance Program	Aboriginal community members residing in Dryden for all ages.	74 Queen St, Dryden, ON P8N 1A4	In-person and online services.	Monday and Tuesday: 8:30am-4:30pm Wednesday to Friday: 8:30am-6:00pm

Organization	Major Programs and Services	Population Served	Working Location	Accessing Services	Business Hours
	- Urban Aboriginal Healthy Kids - Urban Aboriginal Healthy Living Program - Urban Indigenous Homeward Bound Program - Wasa-Nabin – Urban Indigenous Youth Ages 13-18 - Indigenous Mental Health and Wellness Program				
Dryden Police Service	- Crime Prevention and Community Safety - Victim Assistance	These services are available to all residents of Dryden	Services are available city wide	In-person services.	Emergency Service: Mon-Sun 24 hours
Dryden Regional Health Centre	“Operates a 41-bed acute care facility and provides an array of services including: - Acute care - Case management - Chronic care - Community programs - Crisis response - Diabetes Education - Diagnostic Imaging - Emergency department - Laboratory - Mental health and addiction services - Oncology - Outpatient services - Outreach programs - Prevention and health promotion - Rehabilitation services - Respite care - Sexual assault and domestic violence - Surgical program”	These services are available to all residents of Dryden.	58 Goodall St Dryden	In-person services.	Office Mon-Fri 8 am-4 pm Emergencies: Mon-Sun 24 hours

Organization	Major Programs and Services	Population Served	Working Location	Accessing Services	Business Hours
	(Northwestern Health Unit, 2020, Service Description). 2. "Ontario Telemedicine Network (OTN): - Provides access to specialized medical care using video conferencing and other tele-diagnostic equipment - Allows specialists to remotely examine and prescribe treatments to patients in their home communities. Reduces the need to travel to receive medical care" (Northwestern Health Unit, 2020, Service Description).				
Hoshizaki House Dryden District Crisis Shelter	Emergency shelter services	Women aged 16 years or older, as well as their dependents, that identify themselves as having experienced sexual, physical, and/or emotional abuse.	146 Van Horne Ave, Dryden, ON P8N 2B7, Canada	In-person and online services.	Emergency Service: Mon-Sun 24 hours
Kenora-Rainy River Districts Child and Family Services	1. "Child Welfare Services - Provides in-home support, counselling, education, and advocacy - Protects children through prompt investigations of abuse and neglect - Provides alternate placements for children unable to reside within their own families - Prepares and places children for adoption	Children and youth 18 years of age and younger.	175 West River Rd Dryden	In-person services.	Mon-Fri 8:30 am-4:30 pm Emergencies: Mon-Sun 24 hours

Organization	Major Programs and Services	Population Served	Working Location	Accessing Services	Business Hours
	- Provides pregnancy counselling - Assists adolescents to move to independence - Provides extended care and maintenance to former crown wards - Provides counselling and care to developmentally challenged children - Recruits, trains, orientates and supports foster parents - Supports and counsels' adoptive parents - Assists adult adoptees searching for birth parents 2. Bereavement Counselling - Provides individual counselling with family involvement - Offers counselling based on client needs" (Northwestern Health Unit, 2020, Service Description).				
Kenora District Services Board	1. Community Homelessness Prevention Initiative 2. Social Housing	Multiple eligibility criteria for each service.	211 Princess St Suite 1 Dryden, ON P8N 3L5	In-person services.	Mon-Fri 8 am-4:30 pm
Municipality of Machin	1. Woodland arena: - Provides regular scheduled hockey games during winter season - Offers public skating sessions - Holds annual hockey schools and power skating schools during summer months	1. These services are available to all residents of the City of Dryden and Municipality of Machin. 2. These services are available to all residents	1. 29 Arena Ln, Vermilion Bay, ON P0V 2V0 2. 75 Spruce St Vermilion Bay, ON	1. In-person services. 2. In-person services. 3. In-person services.	1. Hours of availability will vary. 2. Hours of availability will vary. 3. Hours of availability will vary.

Organization	Major Programs and Services	Population Served	Working Location	Accessing Services	Business Hours
	- Eagle River Recreation Centre: - Holds various community events - Parks: - Eagle River Hudson Post Park - Eagle River Park - Kinsmen Beach, with barbeque pits, change rooms and washroom - Vermilion Bay Pine Tree Park - Social clubs	- of the City of Dryden and Municipality of Machin. - These services are available to all residents of the City of Dryden and Municipality of Machin. - Eligibility for these services will vary.	- Multiple locations throughout the municipality - Location varies by club	In-person services.	Hours of availability will vary.
Northwestern Health Unit	- Healthy Living Food Box - Infection Control - Northwestern Health Unit Mobile Dental Office - Perinatal Loss Support Group - Sexual Health Clinic - Student Nutrition Program	Eligibility for these services will vary.	75 D Van Horne Ave Dryden, ON P8N 2B2	In-person services.	Mon-Fri 8:30 am-4:30 pm Sexual Health Clinic: Mon 9 am-12 noon; Thu 9 am-6 pm Sexual Health at Dryden High School: Mon 11:40 am-12:30 pm
Ontario Native Women's Association	- Breaking Free from Family Violence - Community Wellness - Indigenous Health Babies, Healthy Children - Indigenous Victim and Family Liaison - Mental Health and Wellness - Missing and Murdered Indigenous Women Family Support	Deliver culturally enriched programs and services to Indigenous Women and their Families.	136 Main St S, Kenora, ON P9N 1S9, Canada	In-person services.	Monday - Friday: 9am - 5pm
Ontario Provincial Police	- Crime Prevention and Community Safety - Victim Assistance	Ensure the safety and security of all people in Ontario.	10 Krahn Ave, Dryden, ON P8N 3K8, Canada	In-person services.	Emergency Service: Mon-Sun 24 hours

Organization	Major Programs and Services	Population Served	Working Location	Accessing Services	Business Hours
Paawidigong First Nations Forum	1. "Aboriginal Diabetes Initiative 2. Aboriginal Fetal Alcohol Spectrum Disorder and Child Nutrition Program 3. Aboriginal Healthy Babies Healthy Children 4. Community Development Support Worker Program 5. Community Wellness Worker Program 6. Diabetes Nurse Education Program 7. Community Health Promotion and Injury/Illness Prevention 8. Aboriginal Health and Wellness Strategy - programs and services to address family violence and strategies to stop it" (Northwestern Health Unit, 2020, Service Description).	Services are available to all Treaty 3 communities of Wabiskang, Eagle Lake, Lac de Millac, Wabigoon and Lac Seul.	105 King St, Dryden, ON P8N 1C1	In-person services.	Monday to Friday – 9:00 am to 4:30 pm
Tikinagan Child and Family Services	1. "Customary Care Services 2. Customary Care Services, Wee-chee-way-win Circle of Healing 3. Foster Care 4. Oshkee Meekena Youth Healing Centre in Cat Lake 5. Prevention and Support Services 6. Residential Services" (Northwestern Health Unit, 2020, Service Description)	First Nations individuals/families residing in Northwestern Ontario.	65 King St Sioux Lookout	In-person services.	Mon-Fri 8 am-4:30 pm Emergency Service: Mon-Sun 24 hours
Youth Probation Services	Probation services provides community-based supports that are on a continuum of services that range from prevention and diversion to custodial programs. The objective is to	The Youth Probation Services Branch is responsible for the provincial operations of	v 610 Lakeview Dr. Kenora, Ontario P9N 3P7	In-person services.	Mon-Fri 8 am-4:30 pm

Organization	Major Programs and Services	Population Served	Working Location	Accessing Services	Business Hours
	improve outcomes for youth who become engaged in the youth justice system by holding them accountable and through the delivery of programs that are responsive to the risk, needs and strengths of youth. 1. Assessing a youth's risk, needs and strengths 2. Advocating and providing assistance to youth and their families (i.e. system navigation, referrals to community agencies) 3. Working with police, custody facilities, community service agencies, courts, schools, victims and families 4. Directly providing rehabilitative interventions 5. Preparing court reports and appearing in court 6. Monitoring and supporting compliance with court orders	probation services for youth who are between the ages of 12 to 17 when they come into conflict with the law.			

Appendix 4 – Treatment

Organization	Major Programs and Services	Population Served	Working Location	Accessing Services	Business Hours
Adult and Teen Challenge of Central Canada	Residential and out-patient programming, including: • Support groups including mentorship programming • Counselling including life-coaching services • Assistance to help navigate the criminal justice system • Crisis intervention and prevention services • Family support	Dryden community members of all ages including their families that are experiencing a life-controlling problem.	34 King St, Dryden, ON P8N 1B3	Online services only at the time of writing this report.	The website for this organization indicates that business hours are “coming soon”.
Canadian Mental Health Association	Specialized community-based geriatric services including: • Assessment and cognitive screening • Counselling or therapy • Cognitive/behavioural interventions • Care/treatment planning referral/advocacy • Monitoring • Education/support to caregivers • Community outreach/presentation • Geriatric psychiatry • Support services and education for caregivers and care providers	Seniors that are 60 years of age or older with dementia or other serious mental illness such as: Clinical Depression, Mood Disorder, Anxiety Disorder, Schizophrenia, Vascular Dementia, Alzheimer’s Disease or Related Dementia. The target population includes older adults living in community and facility-based environments including personal residences, supportive housing, chronic	52 Van Horne Ave, Dryden, ON P8N 3Z2	In-person, online, and over the phone services.	Monday – Friday: 9:00 am – 3:00 pm

Organization	Major Programs and Services	Population Served	Working Location	Accessing Services	Business Hours
		and acute care facilities, LTC facilities.			
Community Living Dryden-Sioux Lookout	1. "Clinical Services including psychological and psychiatric services through video conferencing 2. Community Inclusion Hud – recreational, learning, and leisure activities 3. Employment Services 4. Host Family Program 5. Residential Services 6. Supported Independent Living" (Northwestern Health Unit, 2020, Service Description)	Individuals 18 years of age and older with an intellectual and/or developmental disability	280 Arthur St Dryden, ON P8N 1K8	In-person, online, and over the phone services.	Mon-Fri 8 am-4 pm
Dryden Regional Health Centre	1. "Operates a 41-bed acute care facility and provides an array of services including: • Acute care • Case management • Chronic care • Community programs • Crisis response • Diabetes Education • Diagnostic Imaging • Emergency department • Laboratory • Mental health and addiction services • Oncology • Outpatient services • Outreach programs • Prevention and health promotion • Rehabilitation services	These services are available to all residents of Dryden	58 Goodall St Dryden	In-person services.	Office Mon-Fri 8 am-4 pm Emergencies: Mon-Sun 24 hours

Organization	Major Programs and Services	Population Served	Working Location	Accessing Services	Business Hours
	• Respite care • Sexual assault and domestic violence • Surgical program" (Northwestern Health Unit, 2020, Service Description). 2. "Ontario Telemedicine Network (OTN): • Provides access to specialized medical care using video conferencing and other tele-diagnostic equipment • Allows specialists to remotely examine and prescribe treatments to patients in their home communities that reduce the need to travel to receive medical care" (Northwestern Health Unit, 2020, Service Description).				
Dryden Regional Mental Health and Addiction Services	• 24/7 Crisis Services • Anger management counselling and education • Educational and supportive group counselling • Facilitation of psychiatric consultations • Individual counselling • Mental health and addiction assessments as well as treatments for alcohol, substance abuse, and gambling • Mental Health Child and Youth Outreach Worker • Support and counselling for persons living with cancer • Case Management services for persons living with a serious mental illness	Aged 12 years of age and older.	58 Goodall St, Dryden, ON P8N 1V8	Services are available online, over the phone and in person.	Monday, Wednesday, Thursday, Friday: 8:00 am – 5:00 pm Tuesday 8:00 am – 8:00 pm Child and Youth Mental Health Phone Line open Monday – Friday 3:00pm -11:00pm, Closed Saturday and Sunday

Organization	Major Programs and Services	Population Served	Working Location	Accessing Services	Business Hours
	- Housing support for individuals living with a serious mental illness - School-based support services at Dryden High School - Referral services to other agencies for ongoing treatment and assistance - Child and Youth Mental Health				
Dryden Area Family Health Team	- Relationship Counselling - Family Issues Counselling - Blended families - Separation / divorce - Family conflict - Emotional eating - Communication (i.e. assertive communication skill building) - Life Change Adjustments for families or individuals. Including but not limited to: - Job loss - Workplace stress - Separation/ divorce - Sleep concerns - Relocation - Injury/Illness - Menopause - Bullying - Situational depression - Situational anxiety - Care giver support - Mental Health issues related to Chronic Disease Management - Coping skills	Dryden community members 16 years of age and older.	Address: 40 Goodall St, Dryden, ON P8N 1V8	Services are available online, over the phone and in person.	Monday and Tuesday: 8:00 am – 8:00 pm Wednesday to Friday: 8:00 am – 4:00 pm Closed Saturday and Sunday

Organization	Major Programs and Services	Population Served	Working Location	Accessing Services	Business Hours
	○ Depression ○ Emotions ○ Positive thinking				
Dryden Native Friendship Centre	• Akwe:Go – Urban Indigenous Children • Apatisiwin Employment and Training • Community Connections Program • Diabetes Education Program • EarlyON Child and Family Centre • Healing and Wellness • Health Outreach Worker • Indigenous Combined Court Worker • Indigenous Mentor • Kizhaay Anishinaabe Niin • Lifelong Care Program • Lifelong Care Home Maintenance Program • Urban Aboriginal Healthy Kids • Urban Aboriginal Healthy Living Program • Urban Indigenous Homeward Bound Program • Wasa-Nabin – Urban Indigenous Youth Ages 13-18 • Indigenous Mental Health and Wellness Program	Aboriginal community members residing in Dryden for all ages.	Address: 74 Queen St, Dryden, ON P8N 1A4	Services are available online, over the phone and in person.	Monday and Tuesday: 8:30am-4:30pm Wednesday to Friday: 8:30am-6:00pm
FIREFLY	• "Counselling and therapy • Child development, community education resources • Family and caregiver skills building • Infant and child development services • SNAP • Psychology and psychiatry consultative services	Various services work with ages ranging from 1-18.	75C Van Horne Avenue, Dryden, ON, P8N 2B2	Services are available online, over the phone and in person.	Office Hours Monday to Friday 8:30 am – 4:30 pm Child Care Monday to Friday 7:30 am – 5:30 pm

Organization	Major Programs and Services	Population Served	Working Location	Accessing Services	Business Hours
	• Treatment for foster care • Occupational Therapy • Physiotherapy • Autism assessment and services • Speech and language pathology • Fetal Alcohol Syndrome Disorder • Foster parent support for foster parents with high-risk youths • Youth justice counselling • Youth mental health court worker program" (Northwestern Health Unit, 2020, Service Description).				
Four Directions	• Navigation support worker helps students in identifying and attending mental health, addiction, and medical services.	Unknown	Unknown	In-person, online, and over the phone.	Unknown
Ontario Addiction Treatment Centre	• Needle Exchange Program • Naloxone Overdose Response Program	Unknown	35 Whyte Avenue, Unit 2, Dryden Ontario P8N 1Z2	In-person services.	Monday to Friday 8:30am – 2:00pm Saturday and Sunday 9:00am – 12:00pm
Paawidigong First Nations Forum	1. Aboriginal Diabetes Initiative 2. Aboriginal Fetal Alcohol Spectrum Disorder and Child Nutrition Program 3. Aboriginal Healthy Babies Healthy Children 4. Community Development Support Worker Program 5. Community Wellness Worker Program 6. Diabetes Nurse Education Program 7. Community Health Promotion and Injury/Illness Prevention	Services are available to all Treaty 3 communities of Wabiskang, Eagle Lake, Lac de Millac, Wabigoon and Lac Suel.	105 King St, Dryden, ON P8N 1C1	In-person services.	Monday to Friday – 9:00am to 4:30pm

Organization	Major Programs and Services	Population Served	Working Location	Accessing Services	Business Hours
	8. Aboriginal Health and Wellness Strategy - programs and services to address family violence and strategies to stop it” (Northwestern Health Unit, 2020, Service Description).				
Points North Family Health Team	• Diabetes Program • Hypertension visits • Cancer screening • Congestive Heart Failure program (CHF) • Suboxone Clinic – is a combination medication that includes buprenorphine and naloxone. It is used to treat opioid use disorder. It decreases withdrawal symptoms for about 24 hours • Well Baby visits • Immunizations • Team Home visits • Online Booking • General Health • Provides access/referrals to other health care professionals within and outside of the Family Health Team • Chronic disease management • Supportive counselling • Mental health/Addictions counselling • Nutritional counselling • Smoking cessation counselling • Wound care • Asthma and Chronic Obstructive Pulmonary Disease Management (COPD) • Disease prevention	Machin community members of all ages.	87 Spruce Street Box 250 Vermilion Bay, ON P0V 2V0	Services are available over the phone and in person.	Hours of Operation are Monday to Thursday 9:00 am to 4:00 pm.

Organization	Major Programs and Services	Population Served	Working Location	Accessing Services	Business Hours
	• Health promotion • Heart Health • Family Planning • Laboratory services • Acute Care				

Appendix 5 – Social Development

Organization	Major Programs and Services	Population Served	Working Location	Accessing Services	Business Hours
Canadian Mental Health Association	1. Case management including housing support 2. Peer support 3. Mental Health Act and Justice support 4. Mobile crisis response 5. Psychogeriatric resource program 6. District mental health for older adults *A drop-In centre is listed under services, although it has been noted as being closed.	Individuals 18 years and up with a serious mental illness and their family members	52 Van Horne Ave Dryden	1. Phone, PCVC, Zoom/virtual, in-person. 2. Phone, in person, Zoom/virtual, small in-person group. 3. OTN and Phone, in-person. 4. In-person. 5. OTN and Phone, in-person. 6. OTN, phone, in-person, virtual (iPads utilized).	Mon-Fri 8:30 am-4:30 pm
City of Dryden	1. Recreational facilities as well as parks • Pool • Ice arena • Field schedule	1. These services are available to all residents of the City of Dryden 2. Any individual 6 years of age and older who is:	1. 84 Whyte Ave., Dryden, ON P8N 1Z5	1. In-person services. 2. In-person services. 3. In-person and online services. 4. In-person services.	1. Monday to Friday 6:00am to 11:30pm (Arena) with other services being available Monday

Organization	Major Programs and Services	Population Served	Working Location	Accessing Services	Business Hours
	- Hiking trails - Fitness center - MyLift - Library services - Take home craft kits for kids - Virtual book club for adults and seniors - Museum - Educational programming - Exhibits and events	- Unable to use conventional transportation - Unable to walk more than 175 meters - Unable to climb more than three steps - Seniors Shuttle Service: Individuals 65 years of age and over - These services are available to all residents of the City of Dryden - These services are available to all residents of the City of Dryden	- Service is available city wide 36 Van Horne Ave., Dryden, ON P8N 2A7 15 Van Horne Avenue, Dryden, ON P8N 2A5		- to Friday 8:30am to 4:30pm - Monday to Friday, 8:00 a.m. to 4:00 p.m. - Monday - 10:00 am - 4:30 pm Tuesday - 10:00 am - 4:30 pm Wednesday - 12:00 pm - 6:00 pm Thursday - 10:00 am - 4:30 pm Friday - 10:00 am - 4:30 pm Saturday - 12:00 pm - 4:00 pm - Monday to Friday 8:30am to 4:30pm
Confederation College	- Post-secondary, pre-employment and skills training, apprenticeship, as well as cooperative/workplace training programs - For students the following services are also available: - Counselling - Dental - English as a second language - Food bank - Health Centre - Wellness Centre	- These services are available to all residents of Dryden - Services only available to students	1450 Nakina Dr Thunder Bay, ON P7B 6Z8	- In-person and online services. - In-person services.	- Hours of availability will vary - Hours of availability will vary

Organization	Major Programs and Services	Population Served	Working Location	Accessing Services	Business Hours
Community Living Dryden-Sioux Lookout	1. "Clinical Services including psychological and psychiatric services through video conferencing 2. Community Inclusion Hud – recreational, learning, and leisure activities 3. Employment Services 4. Host Family Program 5. Residential Services 6. Supported Independent Living" (Northwestern Health Unit, 2020, Service Description)	Individuals 18 years of age and older with an intellectual and/or developmental disability	280 Arthur St Dryden, ON P8N 1K8	In-person and online services	Mon-Fri 8 am-4 pm
Dryden Senior Services	1. "Community Support Services: • Emergency Response/Lifeline • Enhanced Hearing Centre • Friendly Visiting • Health Program • Home Help • Home Maintenance • Meals on Wheels • Transportation 2. Grace Haven Adult Day Program 3. Patricia Gardens Supportive Housing" (Northwestern Health Unit, 2020, Service Description).	• Individuals 60 years of age and older • Individuals 18 years of age and older living with disabilities may be eligible for services; determined at initial assessment	35 Van Horne Ave Dryden	In-person services	• Administration Office: Tue 1 pm-2 pm; Thu 11 am-12 noon • Client Services 8 am-12 midnight
Dryden Native Friendship Centre	• Akwe: Go – Urban Indigenous Children • Apatisiwin Employment and Training	Aboriginal community members residing in Dryden for all ages	74 Queen St, Dryden, ON P8N 1A4	In-person and online services.	Monday and Tuesday: 8:30am-4:30pm Wednesday to Friday:

Organization	Major Programs and Services	Population Served	Working Location	Accessing Services	Business Hours
	- Community Connections Program - Diabetes Education Program - EarlyON Child and Family Centre - Healing and Wellness - Health Outreach Worker - Indigenous Combined Court Worker - Indigenous Mentor - Kizhaay Anishinaabe Niin - Lifelong Care Program - Lifelong Care Home Maintenance Program - Urban Aboriginal Healthy Kids - Urban Aboriginal Healthy Living Program - Urban Indigenous Homeward Bound Program - Wasa-Nabin – Urban Indigenous Youth Ages 13-18 - Indigenous Mental Health and Wellness Program				8:30am-6:00pm
Dryden Full Gospel Church	- Sunday school and Worship services - Women's, men's and youth ministries - True North Christian Academy 55+ Ministry - Music and worship creative arts - Kids club - Bible study and prayer	- Sunday School: children 2-12 years of age - Youth Programming: for those aged 12 to 18 - Other services are available to all individuals 18 years of age and older	599 Government St, Dryden, ON P8N 2Y4	In-person and online services.	- Office: Mon-Fri 8 am-4 pm - Sunday School and Worship Service: Sun 10:30 am, 7:30 pm

Organization	Major Programs and Services	Population Served	Working Location	Accessing Services	Business Hours
Dryden Lutheran Parish	1. Sunday Divine Service 2. Midweek Service (Advent + Lent) 3. Bible studies	Unknown	175 Cecil Avenue Dryden, ON P8N 2X6	In-person and online services.	1. Sunday at 9:00am 2. Thursday at 7:00pm 3. Various days and times throughout the week
Dryden Food Bank	1. Provides non-perishable food items to individuals in an emergency situation 2. Hampers are provided that include fresh milk, eggs and bread	Individuals 18 years and older that reside in Dryden	62 Queen St Dryden, ON P8N 1A4	In-person services.	Monday, Wednesday, Friday 9:00am to 11:30am
Dryden Go-Getters	Various activities such as carpentry and coffee with friends are organized throughout the year.	Services are available to Seniors residing in Dryden.	84 Charles Street, Dryden, ON P8N 1L3	In-person services.	Hours vary depending on the program
Ear Falls Community Health Centre	1. Provides full range of general dentistry services 2. Examines and consults for the replacement of natural teeth 3. Takes impressions for new dentures and partials 4. Repairs older dentures 5. Offers nightguards, mouthguards and bleaching trays 6. Provides an on-site dental surgeon 7. Accepts emergency patients 8. Arranges for low income individuals and families to make	These services are available to all residents of Dryden	25 Spruce St Ear Falls	In-person services	Mon-Thu 8 am-5 pm

Organization	Major Programs and Services	Population Served	Working Location	Accessing Services	Business Hours
	monthly payments, on a case by case basis				
Helping Hands	Provides food hampers during Christmas	Unknown	Unknown	Unknown	Unknown
Hoshizaki House Dryden District Crisis Shelter	Emergency shelter services	Women aged 16 years or older, as well as their dependents, that identify themselves as having experienced sexual, physical, and/or emotional abuse.	146 Van Horne Ave, Dryden, ON P8N 2B7, Canada	In-person and online services	Emergency Service: Mon-Sun 24 hours
Kenora District Services Board	- Community Homelessness Prevention Initiative - Social Housing - Land Ambulance - Ontario Works - Children's Programming	Multiple eligibility criteria for each service.	211 Princess St Suite 1 Dryden, ON P8N 3L5	In-person and online services.	Mon-Fri 8 am-4:30 pm
Kenora Association of Community Living	"Adult Literacy Program" - Teaches individual literacy skills and development through various modes of communication such as drawing, writing and sign language - Offers flexible lessons and activities that meet the learner's goals - Community Arts Hub - Provides a center for individuals to participate in	Individuals with intellectual and/or developmental disabilities	1 Ninth Ave S Kenora, ON P9N 2H8	In-person services.	Mon-Fri 8 am-4 pm

Organization	Major Programs and Services	Population Served	Working Location	Accessing Services	Business Hours
	creative learning opportunities including visual arts, vocal and instrumental music, writing and storytelling, culinary arts, and gardening • Offers many guest presenters and hosts open community sessions 3. Employment Services • Assists adults with intellectual disabilities develop and maintain skills required to explore, secure and maintain employment • Collaborates with local employers to create possible employment opportunities 4. Fitness Friends • Promotes wellness and healthy living for people of all abilities • Coordinates recreational activities and participation in fitness centers and clubs • Activities can include but are not limited to walking clubs, swimming, skiing, snowshoeing, canoeing, kayaking, horseback riding and soccer" (Northwestern Health Unit, 2020, Service Description).				

Organization	Major Programs and Services	Population Served	Working Location	Accessing Services	Business Hours
Municipality of Machin	- Woodland arena - Provides regular scheduled hockey games during winter season - Offers public skating sessions - Holds annual hockey schools and power skating schools during summer months - Eagle River Recreation Centre - Holds various community events - Parks - Eagle River Hudson Post Park - Eagle River Park - Kinsmen Beach, with barbeque pits, change rooms and washroom - Vermilion Bay Pine Tree Park - Social clubs - Senior's Bus Program for all transportation needs	- These services are available to all residents of the City of Dryden and Municipality of Machin - These services are available to all residents of the City of Dryden and Municipality of Machin - These services are available to all residents of the City of Dryden and Municipality of Machin - Eligibility for these services will vary - Available to all senior residents of the Municipality of Machin	29 Arena Ln, Vermilion Bay, ON P0V 2V0 75 Spruce St Vermilion Bay, ON P0V 2V0 - Multiple locations throughout the municipality - Location varies by club 75 Spruce St Vermilion Bay, ON P0V 2V0	- In-person services. - In-person services. - In-person services. - In-person services. - In-person services.	- Hours of availability will vary - Hours of availability will vary - Hours of availability will vary - Hours of availability will vary - Tuesday and Thursdays 9:00am to 3:00pm
Northwestern Health Unit	"Healthy Living Food Box - Infection Control - Northwestern Health Unit Mobile Dental Office - Perinatal Loss Support Group - Sexual Health Clinic - Student Nutrition Program" (Northwestern Health Unit, 2020, Service Description).	Eligibility for these services will vary	75 D Van Horne Ave Dryden, ON P8N 2B2	In-person services.	Mon-Fri 8:30 am-4:30 pm Sexual Health Clinic: Mon 9 am-12 noon; Thu 9 am-6 pm Sexual Health at Dryden High School: Mon 11:40 am-12:30 pm

Organization	Major Programs and Services	Population Served	Working Location	Accessing Services	Business Hours
Paawidigong First Nations Forum	1. "Aboriginal Diabetes Initiative 2. Aboriginal Fetal Alcohol Spectrum Disorder and Child Nutrition Program 3. Aboriginal Healthy Babies Healthy Children 4. Community Development Support Worker Program 5. Community Wellness Worker Program 6. Diabetes Nurse Education Program 7. Community Health Promotion and Injury/Illness Prevention 8. Aboriginal Health and Wellness Strategy - programs and services to address family violence and strategies to stop it" (Northwestern Health Unit, 2020, Service Description).	Services are available to all Treaty 3 communities of Wabiskang, Eagle Lake, Lac de Millac, Wabigoon and Lac Suel.	105 King St, Dryden, ON P8N 1C1	In-person services.	Monday to Friday – 9:00am to 4:30pm
Tikinagan Child and Family Services	1. "Customary Care Services 2. Customary Care Services, Wee-chee-way-win Circle of Healing 3. Foster Care 4. Oshkee Meekena Youth Healing Centre in Cat Lake 5. Prevention and Support Services 6. Residential Services" (Northwestern Health Unit, 2020, Service Description).	First Nations individuals/families residing in Northwestern Ontario	65 King St Sioux Lookout	In-person services.	• Mon-Fri 8 am-4:30 pm • Emergency Service: Mon-Sun 24 hours

Organization	Major Programs and Services	Population Served	Working Location	Accessing Services	Business Hours
Vermillion Bay Lion's	1. Medical Equipment Borrowing Program- they have various medical equipment items that people can borrow. 2. Senior's Dinner- Spring dinner for free to all the seniors 3. Pontoon Boat Ride- Summer Pontoon Boat ride for all seniors. 4. Highway Clean up. 5. Tree Planting Service. 6. Food Bank- they are in need of a new director for this program. 7. Medical Assistance Travel Program- Give people in need help with travel to medical appointments.	Services are available to all residents of the Municipality of Machin	76 Spruce Street, Vermillion Bay, ON P0V 2V0	In-person services.	Hours vary depending on the program

References

1. Brownell M, Nickel N, Turnbull L, Au W, Ekuma O, MacWilliam L, McCulloch S, Valdivia J, Boram Lee J, Wall-Wieler E, Enns J. (2020). *The Overlap Between the Child Welfare and Youth Criminal Justice Systems: Documenting "Cross-Over Kids" in Manitoba*. Winnipeg, MB. Manitoba Centre for Health Policy. Spring. http://mchp-appserv.cpe.umanitoba.ca/reference/MCHP_JustCare_Report_web.pdf.
2. Boak, A., Hamilton, H.A., Adlaf, E.M, Henderson, J.L, and Mann, R.E. (2016). The mental health and well-being of Ontario's students 1991-2015: Detailed OSDUHS findings (CAMH Research Document Series No. 43). Toronto, ON: Centre for Addiction and Mental Health. <https://www.camh.ca/-/media/files/pdf---osduhs/the-mental-health-and-well-being-of-ontario-students-1991-2015---detailed-osduhs-findings.pdf?la=en&hash=59BFD5B17408AAEE0E837E01048088ED51E558B2>.
3. Canadian Rental Housing Index. (2018). A Snapshot of Renter Households in Dryden and Ontario.
4. Cassey, R., and Shewfelt, M. (2017). *Alcohol in Our Communities: A Report on Alcohol Use in Northwestern Ontario*. Northwestern Health Unit <https://www.nwhu.on.ca/MediaPressCentre/Documents/Alcohol%20in%20Our%20Communities%20-%20A%20Report%20on%20Alcohol%20Use%20in%20Northwestern%20Ontario%202017%20opt.pdf>.
5. Feed Ontario. (2020). *Hunger Report 2020: The Impact of COVID-19 on Food Bank Use in Ontario*. <https://feedontario.ca/wp-content/uploads/2020/11/Hunger-Report-2020-Food-Bank-Use-in-Ontario-Digital.pdf>
6. Government of Canada (2006). *The human face of mental health and mental illness in Canada*. Ottawa: Minister of Public Works and Government Services Canada. https://www.phac-aspc.gc.ca/publicat/human-humain06/pdf/human_face_e.pdf
7. Health Canada. (2020). *Household food insecurity in Canada: Overview*. <https://www.canada.ca/en/health-canada/services/food-nutrition/food-nutrition-surveillance/health-nutrition-surveys/canadian-community-health-survey-cchs/household-food-insecurity-canada-overview.html>
8. Kenora District Services Board. (2018). *A Place for Everyone: 10 Year Housing and Homelessness Plan*. <http://www.kdsb.on.ca/Homelessness/2018%20KDSB%20Housing%20and%20Homelessness%20Report%20-%20A%20Place%20for%20Everyone%20Final.pdf>
9. Lee, C., and Briggs, A. (2019). *The Cost of Poverty in Ontario: 10 Years Later*. Feed Ontario. <https://feedontario.ca/wp-content/uploads/2019/09/Feed-Ontario-Cost-of-Poverty-2019.pdf>.
10. Lunny, D., and Jibb, S. (2017). *Child and Youth Mental Health Outcome Report*. Northwestern Health Unit

- <https://www.nwhu.on.ca/MediaPressCentre/Documents/NWHU%20Child%20and%20Youth%20Mental%20Health%20Outcomes%202017%20amended.pdf>.
11. McCain, M.N., Mustard, J.F., & McCuaig, K. (2011). *Early years study 3: Making decisions, taking action*. Toronto, ON: Margaret & Wallace McCain Family Foundation.
 12. Ministry of Community Safety and Correctional Services. (2018). *Community Safety and Well-being Planning Framework: A Shared Commitment in Ontario*.
<https://www.mcscs.jus.gov.on.ca/english/Publications/MCSCSSSOPlanningFramework.html>
 13. Northwestern Health Unit. (2020). *Service Directory*.
<https://www.northwesthealthline.ca/display/service.aspx?id=140530>
 14. Northwestern Health Unit. (2017). *Food or Rent?*
<https://www.nwhu.on.ca/MediaPressCentre/Media%20Releases/Media%20Release%20-Food%20or%20Rent%202017%20Cost%20of%20Eating.pdf>
 15. Northwestern Health Unit. (2016). *Demographic Profile and Health Status*.
https://www.nwhu.on.ca/ourservices/healthstatistics/Documents/NWHU_Demographic_Fact_Sheet_April2016.pdf.
 16. Northwestern Health Unit, (2016). *Northwestern Health Unit Injury Trends. 2016 NWHU INJURYTRENDS INFOGRAPHIC June 2016.pdf*
https://www.nwhu.on.ca/ourservices/healthstatistics/Documents/NWHU_InjuryTrends_2016.pdf
 17. Province of Ontario. (2019). *Building Ontario's First Food Security Strategy: Discussion Paper*.
<https://www.ontario.ca/page/building-ontarios-first-food-security-strategy#ref-2>
 18. Statistics Canada. (2017). Census Profile. 2016 Census. Statistics Canada Catalogue no. 98-316-X2016001. <https://www12.statcan.gc.ca/census-recensement/2016/dp-pd/prof/index.cfm?Lang=E>.
 19. Statistics Canada. (2017). Census Profile. 2016 Census. Statistics Canada Catalogue no. 98-316-X2016001. <https://www12.statcan.gc.ca/census-recensement/2016/dp-pd/prof/index.cfm?Lang=E>.
 20. Statistics Canada. (2021). Incident-based crime statistics, by detailed violations, police services in Ontario. [Incident-based crime statistics, by detailed violations, police services in Ontario \(statcan.gc.ca\)](https://www150.statcan.gc.ca/t1/tbl1/en/tv.action?pid=3510018801).
 21. Statistics Canada. (2021). Crime severity index and weighted clearance rates, police services in Ontario. <https://www150.statcan.gc.ca/t1/tbl1/en/tv.action?pid=3510018801>
 22. Statistics Canada. (2021). Crime severity index and weighted clearance rates, Canada, provinces, territories and Census Metropolitan Areas.
<https://www150.statcan.gc.ca/t1/tbl1/en/tv.action?pid=3510002601&pickMembers%5B0%5D=1.16&cubeTimeFrame.startYear=2015&cubeTimeFrame.endYear=2019&referencePeriods=20150101%2C20190101>
 23. Smetanin, P., Stiff, D., Briante, C., Adair, C.E., Ahmad, S. and Khan, M. (2011). *The Life and Economic Impact of Major Mental Illnesses in Canada: 2011 to 2041*. RiskAnalytica, on behalf of the Mental Health Commission of Canada.
https://www.mentalhealthcommission.ca/sites/default/files/MHCC_Report_Base_Case_FINAL_ENG_0_0.pdf.

24. Tarasuk V, Cheng J, de Oliveira C, Dachner N, Gundersen C, Kurdyak P. (2015). *Association between household food insecurity and annual health care costs*. CMAJ;187(14): E429-E436. <https://pubmed.ncbi.nlm.nih.gov/26261199/>.
25. Tarasuk V, Mitchell A. (2020). *Household food insecurity in Canada, 2017-18*. Toronto: Research to identify policy options to reduce food insecurity. (PROOF). <https://proof.utoronto.ca/wp-content/uploads/2020/03/Household-Food-Insecurity-in-Canada-2017-2018-Full-Reportpdf.pdf>.

