



Haliburton County

Community Safety and Well-Being Plan

2022 - 2026



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Land Acknowledgement

We respectfully acknowledge that the County of Haliburton is located on Treaty 20 Michi Saagiig territory, and in the traditional territory of the Michi Saagiig and Chippewa Nations, collectively known as the Williams Treaties First Nations, which are Curve Lake, Rama, Hiawatha, Alderville, Scugog Island, Beausoleil and Georgina Island First Nations.

We acknowledge a shared presence of Indigenous nations throughout the area, and recognize its original, Indigenous inhabitants as the stewards of its lands and waters since time immemorial.

Contributor Acknowledgements

Haliburton County's first Community Safety and Well-Being Plan was developed from 2020 - 2022 with the dedication and support of individuals who collaborated to share their knowledge, experience, and insight to inform and influence our Plan and address community safety and well-being needs in innovative, and impactful ways.

Their commitment to building the Haliburton County CSWB Plan, and working alongside fellow community partners toward evolving and implementing the Plan, is appreciated and recognized.

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The County of Haliburton would like to thank all members of Council from the 2018 – 2022 Term of Council and Strategy Corp Inc. for their work in establishing this Plan.

Special thanks to: Aaron Mulcaster, Dan Collings, Rachel Lewis, Stephanie MacLaren, service providers and community members who engaged in consultation and contribution. This input has been, and is, critical to a successful outcome.

Message from County Council

As warden of Haliburton County, I am extremely proud to present our first Community Safety and Well-Being Plan.

Over the past two years, the County, on behalf of its member municipalities of Algonquin Highlands, Dysart et al, Highlands East and Minden Hills, has worked collaboratively with many committed organizations, agencies, and people with lived experience to co-design this Plan.

By identifying the evidence-based priority issues in our community, we can work proactively, rather than reactively, to support our residents through strong partnerships.

We know there is already tremendous community mobilization and engagement taking place throughout the County, and we pledge to create an even more inclusive community where everyone can feel safe, have a sense of belonging, have access to services and opportunities to meet their needs, and can be a contributing resident whether living here permanently or seasonally.

Haliburton County's Community Safety and Well-Being Plan is designed to be a living document where key activities and steps forward will evolve to reflect the changing needs of our community to allow us to make strides forward and achieve success.

It is important to note that the plan doesn't only apply to those who participated in its planning, or to our service providers, but to everyone in the community. There is always something everyone can do.

We extend an open opportunity to all residents of Haliburton County to continue to connect with us and shape this living document.

We are grateful to all who shared their experience, guidance, and wisdom to inform the Plan. Throughout the process of its development, we became more aware of the depth of issues and needs in the County. We also heard time and time again how proud people are to live here. We hope, that as we move forward in supporting one another in new ways, Haliburton County will become an even better place to live, work and play.

Warden Liz Danielsen



Publication Year: 2022

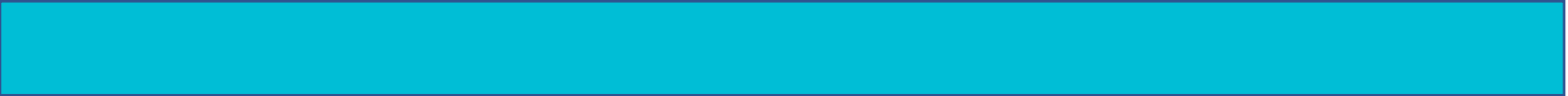
Section 2. Executive Summary

The Haliburton County ('County') Community Safety and Well-Being ('CSWB') Plan ('the Plan') is a product of collaboration between community organizations, partners, and service providers, as well as police services, and local government and County leadership. Community members came together to develop a Plan that provides a roadmap for how partners can work together across different sectors toward a shared vision to make Haliburton a safer, more inclusive, and connected community for all its residents.

This Plan is intended to serve as a living document. It is meant to be a starting point and guide for future joint action between local government, service providers, and community members. In other words, this Plan represents a platform from which to build a connected, co-designed, county-wide roadmap to address the collective community safety and well-being needs across the county. As we move towards addressing each of the identified priority areas, the key activities and steps forward will evolve to reflect changing needs and progress made.

This Plan was developed with the application of an intersectional lens to help ensure that community members of all backgrounds and life experiences are represented – this means taking appropriate consideration of what community safety and well-being may mean to a diverse range of the county's citizens. The Plan is meant to support all residents with an emphasis on those facing systemic barriers due to factors such as race and ethnicity, sexual orientation or gender, income and employment status, health or mental health, and physical and mental disabilities, among other factors.

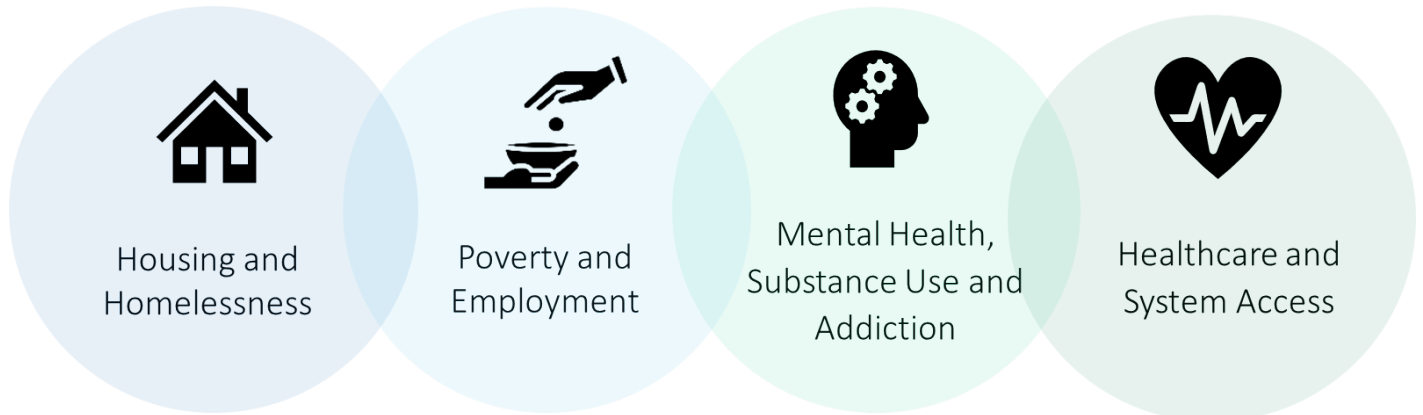
Community safety and well-being refer to an "ideal state of sustainable community where everyone feels safe, has a sense of belonging, opportunities to participate, and where individuals and families are able to meet the needs of their education, health care, food, housing, income, and social and cultural expression".¹ This means that community safety and well-being are much more than just ensuring that the basic needs of our communities are met. They also encompass the broader context of well-being, accounting for social determinants and indicators, alongside the many complex and multifaceted elements of our social and emotional well-being.



Haliburton County is geographically large and demographically complex. The purpose of this Plan is to define and understand the current state of safety and well-being in the county, with an emphasis on issues, gaps, risks, strengths, and existing assets; and then prioritize areas for action while considering the safety and well-being ecosystem as a whole.

Key measures for safety and well-being, and the social determinants of health and well-being include income and social status, education and literacy, childhood experiences, social supports and coping skills. These social determinants also encompass access to health services, race and racism, family violence, and fear of crime.²

Each of these indicators are critical to community safety and well-being. However, through in-depth engagement and consultation with community members, service providers, and government leadership in the county, we identified four key priority areas for action, and intervention and developed strategic goals for each priority.



<p>Goal 1: Align policy areas, desired outcomes and impacts, and key activities across existing programs and initiatives to the City of Kawartha Lakes & the County of Haliburton Housing & Homelessness Plan.</p> <p>Goal 2: Increase wraparound support for community members struggling to access housing.</p> <p>Goal 3: Continue to support service provider collaboration and information sharing.</p>	<p>Goal 4: Increase access to, and advocate for improved employment opportunities for low-income groups.</p> <p>Goal 5: Elevate existing service integration and information sharing efforts to alleviate poverty across key axes such as housing, transit, food, and energy.</p> <p>Goal 6: Identify innovative opportunities to address food insecurity through closed-loop referral processes.</p>	<p>Goal 7: Increase access to, and awareness of, mental health and addiction support services.</p> <p>Goal 8: Co-design and develop experience-based mental health and addiction and substance use support services and programs.</p> <p>Goal 9: Improve education, awareness, and information sharing on substance use and addiction, harm reduction, and mental health.</p>	<p>Goal 10: Increase awareness on the importance of movement and increase access to active transportation as a central mode of mobility (where applicable).</p> <p>Goal 11: Develop a Health Equity Working Group to support equal access to health across priority groups such as low-income, BIPOC, LGBTQA+, and Seniors.</p> <p>Goal 12: Enhance and expand service scope of Virtual Care for health and mental health in the County.</p>
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The priority areas are component parts of a complex and interconnected system that is informed by the intersectionality of identity, socioeconomic status, and health conditions, among other factors. Each of the priority areas can be understood in relation to one another, meaning that housing and

poverty, for example, can be both the cause and consequence of one another. The same two-way relationship applies to mental health and poverty, and mental health and housing. Acknowledging the interconnectedness between priority areas from the early stages of intervention development will help ensure that priority communities are provided with the appropriate supports.

Additionally, each of our priority areas are underpinned by critical enablers (i.e., supports or activities that are necessary to facilitate the success of any proposed initiatives) and risk factors (something that increases the likelihood of failure of any proposed initiatives).

Supports Required to Facilitate Plan Success	Factors that Pose Barriers to Plan Success
<ul style="list-style-type: none"> • Transportation (Public and Active) - Transportation options to connect distal communities and access to services. • Internet Connectivity: Similar to transportation, internet access connects people to services. • Streamlined System Access / Navigation: Ease of navigation and referrals between service providers across the community. • Continuous Interested Party and Community Engagement: Ongoing engagement of the community and those with lived experience, to co-design, and support the continued relevance, impact, and inclusiveness of the emerging CSWB. • Data Collection and Sharing: Data stewardship and integration framework and leadership. 	<ul style="list-style-type: none"> • Funding Capacity: Municipalities and service providers have limited resources and rely on provincial funding to support any increase in services. • Environment and Climate Change: An aggravating factor to homelessness, poverty, and mental and physical health. • Geographic Distribution: Gaps in outreach and service provision –for Indigenous and other communities. • Population/Demographic Based Challenges: Differentiated impacts on community members based on identity, health, age, and income status, among other factors. • Public Health Threats: Public health outbreaks drastically alter the way community services are delivered and how laws are enforced.

Our priority areas are also understood in terms of the CSWB Planning Framework provided by the Ontario government.

Community Safety and Well-being Plans are legislated by the province, for municipalities in Ontario under the *Police Services Act, 1990*. The province has developed and provided a framework to support the planning process that includes four domains of intervention:

1. Incident Response
2. Risk Intervention
3. Prevention
4. Social Development

Each of these domains represents a different level of *proactive* intervention, with incident response being the least proactive, and social development being the most. Proactive intervention refers to the level in which the community has the adequate social service infrastructure, and integration of services in place to effectively alleviate risk factors upstream.

This document outlines a Plan that is informed by the principles of continuous improvement and collaboration, which is grounded in the risk context, and that accounts for intersectionality and the differentiated impacts of priority areas based on individuals' identity, socioeconomic circumstances and health status in order to establish the best conditions for a strong, and inclusive community.

As stated in the province's CSWB Planning Framework, the following benefits are wide-ranging, and impact individuals, the broader community, and participating partner agencies and organizations:

- 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.

Introduction and Overview

Haliburton County

Located on the traditional territories of the Michi Saagiig – the Mississauga, Chippewa, and Algonquin First Nations – Haliburton County is located in Central Ontario, northeast of Toronto. Spanning over 4,000 sq km, the County is home to the Highlands – one of the highest points on the Canadian shield – and to hundreds of rivers and lakes, creating an overall rich and diverse natural environment.

In addition to its rich landscape, Haliburton is known for its resilient, close-knit community that offers a small town feel and all the benefits of rural living.

The County provides its residents with access to arts and culture through its dynamic network of artists, and an abundance of recreational opportunities, including opportunities for outdoor adventure.

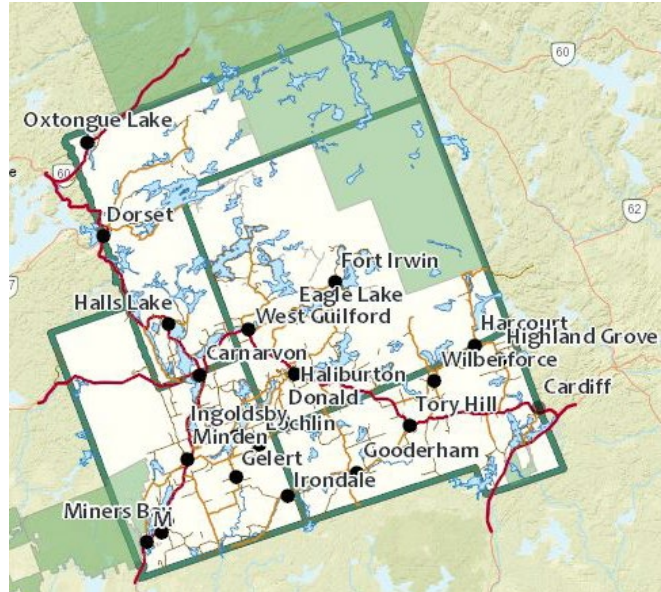
From a population perspective, the county is experiencing significant growth in its permanent residents and a growing income divide across population groups.

Limited employment opportunities, a lack of housing availability and affordability, combined with challenges related to balanced service access and availability are a few challenges that deepen existing issues and help characterize the County's safety and well-being context.

The vast geographical region, and the regular influx of seasonal visitors generates a decreased awareness among permanent County residents about the challenges facing the wider population, creating an overarching perception of strong economic conditions across demographic groups.

This perception makes it difficult to recognize the challenges facing priority, equity-deserving community groups that exist in the County.

Home to approximately 20,500 people year-round³, the County operates as a two-tier system of municipal government, connecting four local municipalities into a complementary community that includes the Township of Algonquin Highlands, the Municipality of Dysart et al, the Municipality of Highlands East, and the Township of Minden Hills.



Together, Haliburton County and its local municipalities are bringing together community partners and members, as well as service providers and government leaders to foster the necessary partnerships and collaborations required to **create an inclusive, equitable, balanced, and thriving community for all our residents.**

We bring forward a set of core values that have guided the development of this Community Safety and Well-being Plan, including: **community care, equitable service access, information communication and sharing, respect, and service innovation and excellence.**

Together, these core values help define and shape the future of Community Safety and Well-being for the County as a whole.

Facts & Figures – A Snapshot of Haliburton County

Population

The County of Haliburton is a growing community.

With its four partner municipalities:

Algonquin

Highlands, Minden

Hills, Dysart Et Al,

and Highlands East, the County

experienced a population growth rate of 13.9%⁴

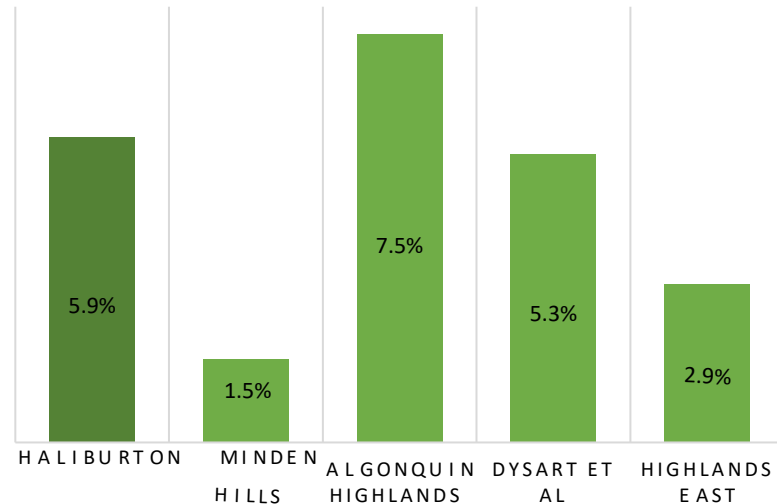
between 2016 to

2021, compared to a

growth rate of 5.8%⁵ in the province at that time. Between 2011 and 2016, the County's growth rate was 5.9%⁶, compared to the province's growth rate of 4.6%⁷ during the same period of time.⁷ Among its partner municipalities:

- Highlands East has seen the most significant growth at 14.6%⁸
- Algonquin Highlands experienced the least amount of growth at 10.1% over five years⁹.
- The average age in Haliburton is 52.8, compared to the provincial average of 41.8.¹⁰
- Only 3.3% of the population is between 15 and 19 years old⁴, compared to 5.6% provincially.¹¹
- Another 4.4% of the population is between ages 30 to 34 years¹², compared to 6.9% in Ontario.¹³
- Seniors make up 35.2% of the population in Haliburton County, compared to only 18.5% in Ontario more broadly.¹⁴

POPULATION GROWTH, 2011-2016



The Local Economy

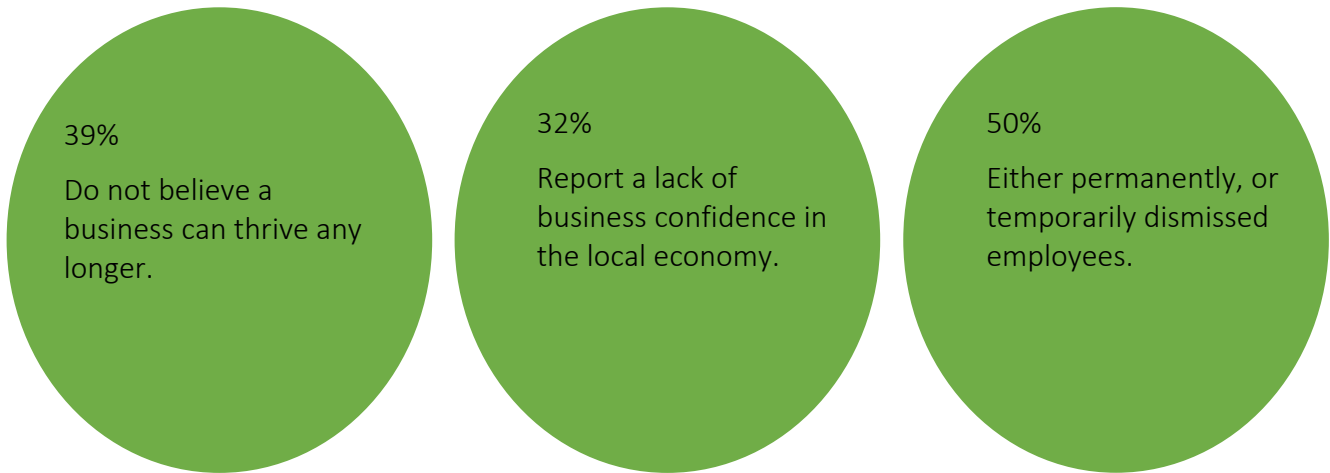
The County offers an economy where residents can access a range of businesses that support the local community. With a significant proportion of the year-round population having an education background in trade or apprenticeships, the economy is in large part comprised of retail, trade and construction jobs. However, the arts, entertainment and recreation sectors, as well as the education, tourism, health, social services and public sectors also employ a large proportion of the labour force. As of 2021, the top five industries with employees include¹⁵, but are not limited to:



Impact of COVID-19

The global COVID-19 pandemic and the provincial state of emergency declared in 2020 has significantly impacted the local economy in the County through business closures, job losses, and increased anxiety and uncertainty related to the collective new normal. The impacts of COVID-19 across Canada, as within the County, are predominantly impacting small business owners in local communities, as well as women and young people. The Ontario Chamber of Commerce's Economic Report Survey and the Haliburton Highlands Chamber of Commerce (HHCC)^{16, 17} highlight that the COVID-19 pandemic has substantially impacted business operations, and that the Haliburton business ecosystem is feeling significant impacts.

It should be noted that the sample size of this HHCC 'micro-survey' is not available; and that these insights should be interpreted as directional in nature.



As the province and the country move into post-pandemic recovery, there will be significant long-term impacts on mental health and well-being, particularly for small business owners¹⁸, and vulnerable members of society such as young people, children, and women¹⁹.

While the impacts of this pandemic have been notable in the County, we have also seen our community demonstrate resilience and a strong sense of unity, where community members and support organizations have come together to support one another – where support organizations have created innovative ways to respond and address the growing and changing needs of our community.

Education Levels

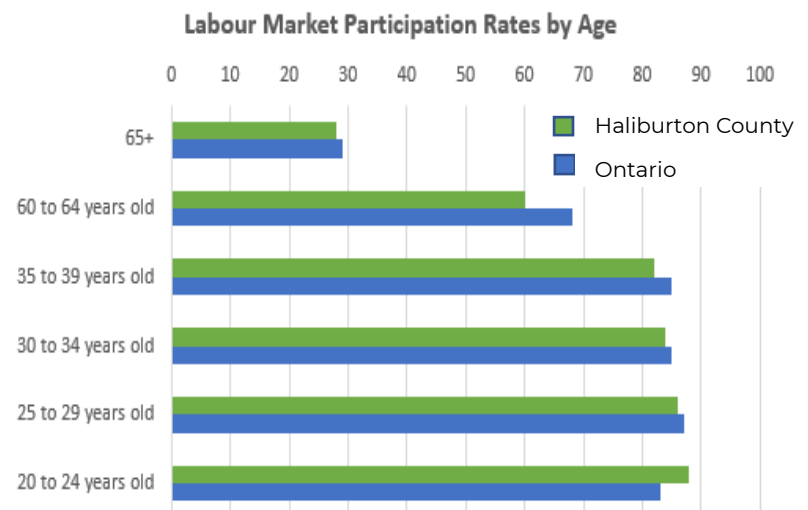
The education profile within the County is primarily made up of apprenticeships, trade-related certificates, and diplomas – however, there is still a significant proportion of the year-round community with four-year university degrees²⁰:

- 11.1% of the population in the County does not have a high school diploma
- 57.9% of the population aged 25 to 64 have post-secondary certificates, diplomas, or four-year degrees; compared to two-thirds of Ontarians that have completed some form of post-secondary education (certificate, diploma, or degree).²¹

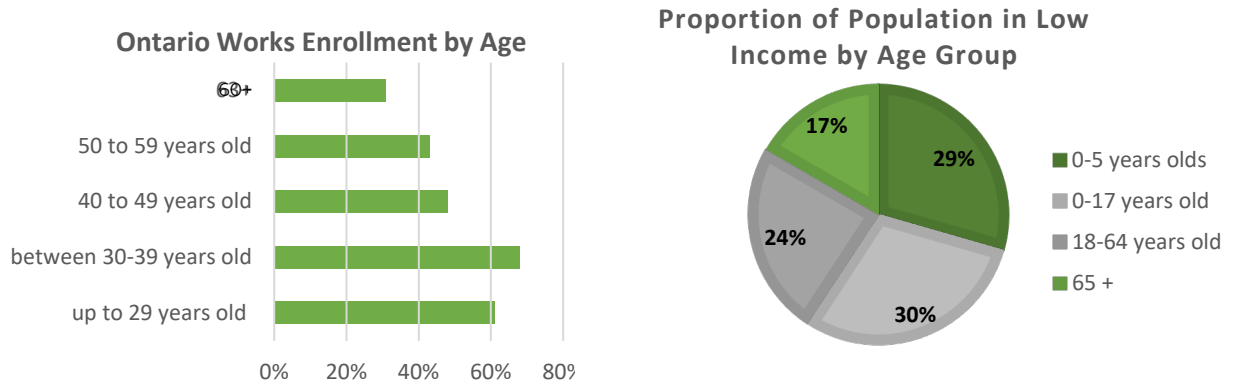
Employment, Income, and Poverty

The unemployment rate in the County has fluctuated around one point under the provincial average (12.2%), at 11.1%.²² The employment profile is characterized by low-wage jobs and high Ontario works enrolment rates, particularly among 30 to 39-year-olds (accounting for 65% of service recipients).²³

- The average labour market participation rate was 46.7% in 2021, compared to the provincial average of 62.8%.^{24,25} While the overall labour market participation rate is much lower than the provincial rate, when broken down by age groups the labour market participation is actually similar to the provincial rate. With such a large proportion of the County's population being seniors, this drives the participation rate down. The chart above uses data from Statistics Canada, Centre for Income and Socioeconomic Well-Being Statistics.



- 17.2% of residents are considered low-income – higher than the provincial average of 9% in 2020.^{26, 27}



- The median income after tax is \$32,690 – just below the Provincial average of \$37,060.²⁸
- Among the permanent population in the County, those up to the age of 29 (60%) and those between the age of 30 and 39 (65%) make up the largest proportion of Ontario Works enrollments.²⁹
- In 2018, Haliburton County had the second highest living wage rate in Ontario, at \$19.42/ hour – second only to Toronto.³⁰ In 2022, that wage rate decreased to \$19.05/hour, in large part due to a change in how geographic areas are defined by the Ontario Living Wage Network.³¹
- Haliburton County has a child poverty rate of 25% and an overall poverty rate of 17.2%.³² The persisting poverty rates in the county are attributed in part to low, non-living wage incomes, low-paying seasonal work and to the high numbers of pensioners.³³
- In 2020, 12.3% of seniors in Haliburton County lived on low income.³⁴
- In 2019, 13.5% of households in the Haliburton, Kawartha, Pine Ridge district faced food access challenges (e.g., not having enough to eat, limited access to quality foods, or worries about having enough to eat) due to financial challenges.³⁵

Housing & Homelessness

The housing profile in the County is characterized by high levels of home ownership, as well as significant challenges related to invisible homelessness.

- Housing stock is significantly low in the County, posing challenges for residents across income levels. There is a general lack of housing available across the continuum.
- 13% of residents in the County rent their homes.³⁶
- 87% of residents in the County own their homes.³⁷
- Homeowners spend an average of 20.8% of their income on housing-related costs.³⁸
- Tenants spend nearly half (49.5%) of their income on housing and shelter costs.³⁹

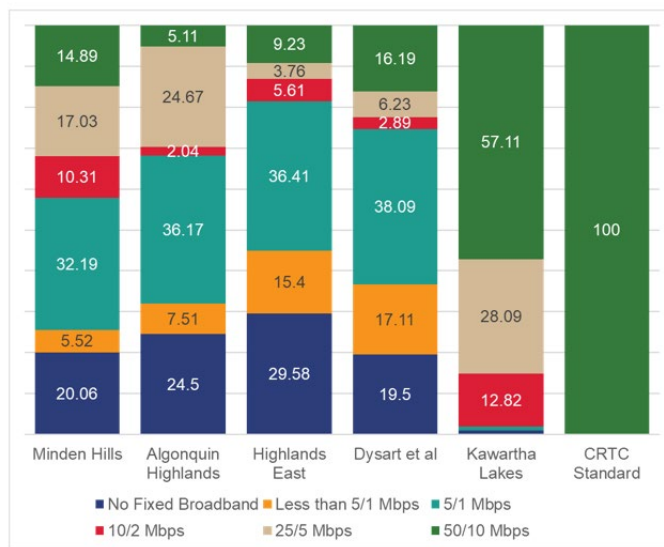
Access to quality and affordable housing is another key area that contributes significantly to community well-being.

- 98.5% of residents in the County reside in homes that are considered suitable – meaning that there are enough bedrooms for each dweller.⁴⁰ While housing conditions may be considered suitable in terms of size, anecdotal evidence from service providers indicates that housing conditions, regardless of size, may be substandard.
- 26.8% of tenant households in the County reside in subsidized housing.⁴¹
- For context, as of 2016, among Ontario families, 78.1% were owners, 19.1% were unsubsidized renters and 2.8% were subsidized renters. Among non-family households, 49.7% were owners, 41.6% were unsubsidized renters, and 8.7% were subsidized renters.⁴²

Crime and Safety

- Between 2018 and 2020, violation against person crimes decreased by 7% from 150 to 140; whereas violation of property crimes increased by 11% from 270 to 303 incidents. Of these incidents, there was a case clearance rate of 57% and 13% respectively in 2020.⁴³
- From 2017-2020 there was a slight uptick in 911 calls related to social disorder (e.g., domestic disputes, unwanted persons, keep the peace, and trespassing). There was a single reported hate crime in the County in 2020.⁴⁴
- Drug crimes made up 1.7% of total reported crime incidents in 2020.⁴⁵

Internet access



The graph above compares the various internet speeds found throughout Haliburton County and neighbouring Kawartha Lakes compared to the CRTC standard for internet speeds, showing the percentage of dwellings based on broadband access in 2021. Less than 17% of dwellings in each municipality in Haliburton County have access to the CRTC standard. The lack of reliable internet is a barrier as it limits the ability to actively participate in employment services, banking, and online schooling.⁴⁶

Community Perspective on Safety and Well-Being

What is Community Safety and Well-Being?

The Ministry of the Solicitor General defines community safety and well-being as:

“The ideal state of sustainable community where everyone feels safe, has a sense of belonging, opportunities to participate, and where individuals and families are able to meet the needs of their education, health care, food, housing, income, and social and cultural expression”.⁴⁷

Through this definition, community safety and well-being means much more than just ensuring that the basic needs of our communities are met. It also encompasses the broader context of well-being, accounting for social determinants and indicators, alongside the many complex and multifaceted elements of our social and emotional well-being.

We also asked what community, safety, and well-being each meant to the community.⁴⁸

Community means:

“Building a sense of togetherness in helping community members.”

“Working together, and not having social silos.”

Safety means:

“A strong sense of familiarity, and comfort in the community.”

Well-being means:

“The coming together of togetherness, familiarity, and access to help and support when it is needed.”

Our Approach to Community Safety and Well-Being Planning

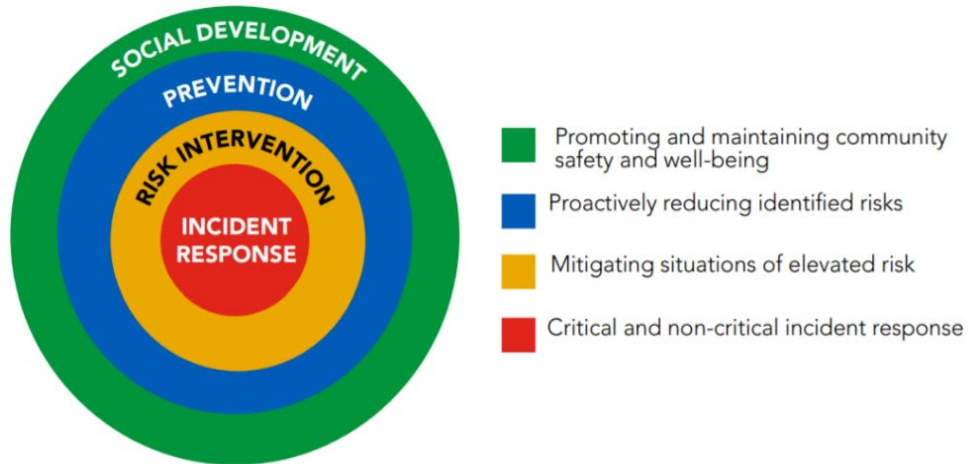
Community safety and well-being has traditionally been understood and defined in terms of maintaining order and a sense of safety in a community through effective police services and incident response. Over the last decade, however, there has been significant research that has shown how some of the key factors influencing community safety and well-being actually extend far beyond policing and crime and include social factors such as poverty, employment, income levels, health, disability and mental health, as well as the degree of systemic barriers and discrimination experienced by community groups. This means that community safety and well-being is largely determined by the ability or inability of an individual or group to fully participate in society, and to feel a strong sense of belonging to a community.

The changes and progress made to the Police Services Act in 2019 to broaden the definition of community safety and well-being to include social factors, and to recognize the importance of creating a cohesive and robust response to the needs of community members is the direct reason for the development of our Plan. **Our Plan aims to address the real, everyday needs of our community** by improving alignment across our key service providers, integrating data collection and information to better understand and measure progress, supporting vulnerable communities as they access information and services, and ensuring that we are continuously engaging with our community and interested parties to align this Plan, with the real, everyday needs of our community members.

The Ontario government has created a framework to promote community safety and well-being, and to develop a complete and proactive social services ecosystem that reflects the needs of a community. The framework reflects the changes and progress made in the Police Services Act in 2019 by deemphasizing incident response, and placing greater importance on social development or, in other words, the broader conditions that contribute to and inform safety and well-being.

Ultimately, the Ontario government has outlined a planning framework to support municipalities in developing a comprehensive approach to mitigate harm and promote safety and well-being.⁴⁹

The framework outlines four levels of intervention:



SOCIAL DEVELOPMENT: Addresses underlying causes of social issues through upstream approaches that promote and maintain individual and community wellness.



PREVENTION: Applies proactive strategies to known and identified risks that are likely to result in harm to individuals or communities if left unmitigated.

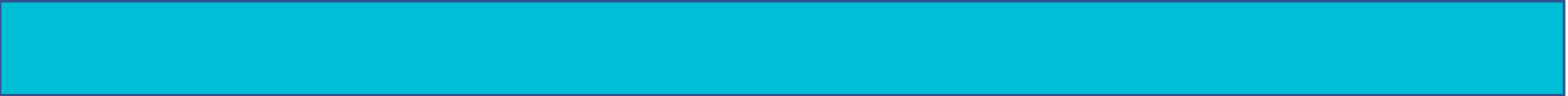


RISK INTERVENTION: Identifies and responds to situations of acutely elevated risk and mobilizes immediate interventions before an emergency or crisis-driven response is required.



INCIDENT RESPONSE: Requires intervention by first responders such as police, paramedics, and other emergency-driven services.

By deemphasizing incident response, the framework demonstrates the importance of shifting towards preventative, social development-oriented interventions for several reasons. Firstly, incident response is inherently reactionary, meaning that the conditions resulting in an incident are rarely addressed through this single action. Secondly, reliance solely on incident response (as has historically been the approach) can be inefficient and ineffective – it does not set the conditions to mitigate any future occurrences of the same or similar incident. Lastly, the inherent relationship between incident response and police services limits the extent to which interventions can effectively support communities as they experience broad-based social

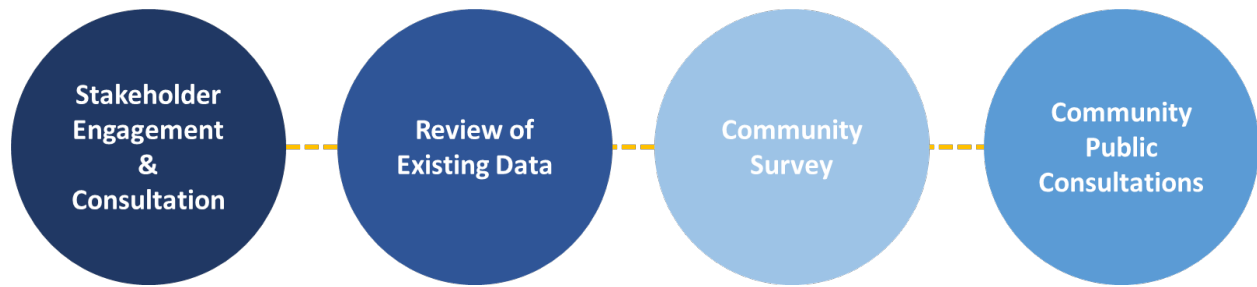


challenges. While police services are crucial for maintaining the safety of a community, they are not always able to effectively respond to a high variety of incidents equally.

Incident response remains an important component of community safety and well-being; but it is a tool that should be leveraged as a last recourse.

The provincial guideline goes beyond this framework and requires the County to establish a multi-sectoral advisory committee comprised of service provider representatives, and other leaders in the community, alongside a collaborative approach to building on the existing strengths, tools, resources within the community as our starting point.

Key Inputs to the Plan



Our Partners in Community Safety and Well-being Planning

Our Plan is, in part, based on the robust review of available data from different levels of government (local, provincial, and regional), as well as an in-depth collaboration with community members, service providers, and other key interested parties.

Using the available data to establish a baseline view of safety and well-being in the county, we were able to engage with community members, service providers, and interested parties to develop a deeper and more detailed knowledge and understanding of the issues and challenges facing the community and the service provider ecosystem.

Interested Party Consultation & Engagement

Consultation and engagement for the CSWB is intended to drive the evolution of safety and well-being in a way that continues to reflect the changing needs of community members. Not only was collaboration critical to the development of this Plan, but it will also play a fundamental role in continuing progress, relevance, and impact of the Plan.

As part of our approach to consultation and engagement, we worked with several members of the safety and well-being ecosystem. This includes:

- **SERVICE PROVIDERS:** To represent the service provider ecosystem in the community, we engaged the Haliburton County Service Providers Network (HCSPN). Due to their daily work with members of the community, the HCSPN is closest to the specific needs of the community as it relates to safety and well-being, HCSPN has helped deepen our understanding of what safety and well-being means from a lens of lived experience and intersectionality – in other words, what it looks like to diverse members of the community in their day to day.

- **COMMUNITY MEMBERS:** Through a community survey, and two public consultations, we spoke directly with the community to best understand the factors that are most impacting the potential for safety and well-being in Haliburton County.
- **CSWB PLAN ADVISORY TABLE:** Our Advisory Committee was established by the County of Haliburton to facilitate the development of the Community Safety and Well-being Plan. The Committee is comprised of service provider representatives, as well as local government leadership, and was engaged throughout the Plan development process. The Advisory Committee provided invaluable input and direction on the identification of key priority areas, and what they mean for community members. They are also tasked with driving the continuation of this Plan into the future. Representatives include leaders across key issue areas and sectors such as:
 - Health and mental health
 - Crisis response and intervention
 - Education
 - Youth engagement
 - Poverty reduction
 - Employment

The community members, representatives, and interested parties that we worked with to develop this Plan represent the large network of agencies and organizations that work on issues across the entire framework spectrum from social development and prevention, to risk intervention and incident response. These social service ecosystem members have provided significant input into the Plan and will be one of the leading collaborator groups throughout its implementation and evolution.

Review of Existing Data

As a first step in developing this Community Safety and Well-being Plan, we conducted an in-depth review of the existing and available data on key indicators across social and economic factors, such as: mental health, crime and safety, employment, income, and Ontario Works enrolment. We also evaluated the housing and ownership versus tenancy rates, as well as education rates in the region. The goal of this data review was to provide a starting point for the conditions characterizing community safety and well-being, and to develop a foundational understanding of the available

information that is collected and shared among the county and its community members.

Whenever possible, data specific to Haliburton County was captured and analyzed, however, given the service manager relationship between the County and the City of Kawartha Lakes, there were some emergent data points that reflected the collective region. Each of the relevant points extracted from the review of available data are reflected in the priorities section and are complemented by the findings that emerged from our consultations and collaborations.

Primary data sources include:

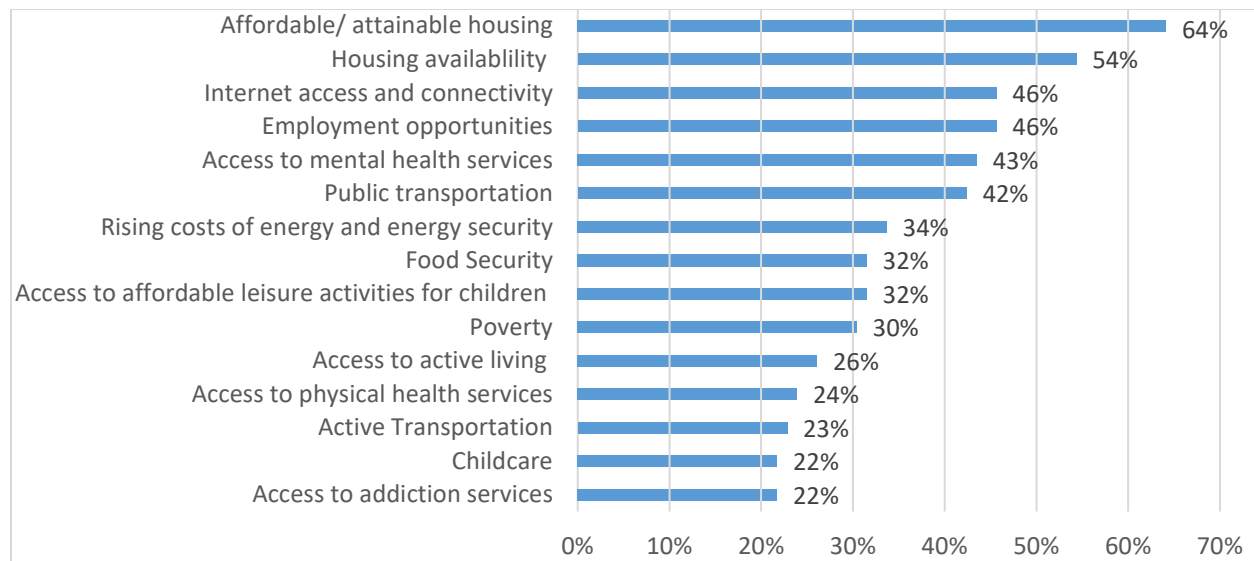
1. Statistics Canada
2. The City of Kawartha Lakes
"2020-2021 Haliburton Data Review"
3. The Haliburton, Kawartha, Pine Ridge District Health Unit
4. Ontario Provincial Police (OPP) Crime and Safety Data

Community Survey

The County conducted a survey to gather data on the current state of well-being and feelings of safety across the community. The survey was available for completion online and in hardcopy. In total, 102 valid surveys were submitted and analyzed in the following section. While not very large, this sample just exceeds the minimum size required for meaningful analysis to be made and therefore has been considered as input to the development of this Plan.

High-Level Community Survey Results

Top 15 Community Priorities



Feelings of Safety

- 88% of respondents reported feeling very, or relatively safe in the community
- 66% of self-identified racialized respondents reported feeling very, or relatively safe in the community

Sense of Belonging

61% of the community feels that they belong, while 11% said they did not feel they belonged, and 27% were unsure.

Factors that contribute to a sense of belonging:

- The primary factor stated by respondents that increased their sense of belonging was active groups and organizations.
- Additionally, respondents identified the familiarity and longevity of members of the community in making them feel a sense of belonging.
- However, several respondents noted that familiarity and longevity of families in the community can lead to “newcomers” feeling isolated and excluded years after they have settled into the community.

Satisfaction with Supports and Services in the Community

n Satisfied or Very Satisfied n Unsure n Dissatisfied or Very Dissatisfied

Education opportunities and programming for children and youth



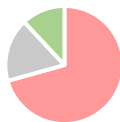
Education opportunities and services for adults



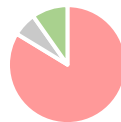
Financial assistance opportunities and employment services



Stable employment opportunities that pay a living wage



Housing and social supports including shelter

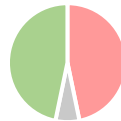


Green and park spaces, sidewalks, and recreation and leisure activities and spaces

Infrastructure to support active living



Healthcare



Mental health and well-being supports and services

Supports for substance misuse issues including addiction and family services



Policing and enforcement



Victim services and supports

Services for newcomers



Services for persons with disabilities



Services for seniors

Services for children and youth



Services for 2SLGBTQ+ individuals



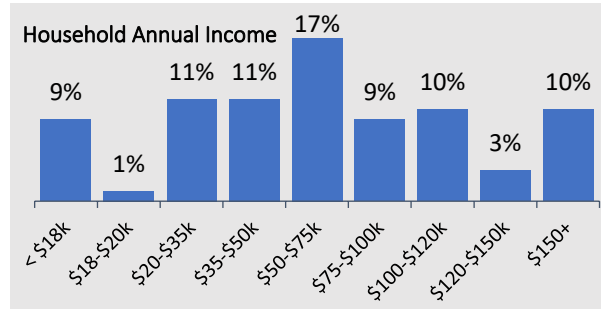
Services for Indigenous people

Education & Employment Data

- 70% of all respondents have graduated from post-secondary institutions or higher, with 12% completing high school or equivalent.
- With 41% of respondents reporting that they are steadily employed, one in 10 often work more than one job at a time, and an almost equal number are currently unemployed. Additionally, 20% of respondents are retired.

Financial Data

- The financial support collected by the majority of respondents is CPP at 24%, and an additional 14% collect old age security. The other supports being received were CERB at 8%, OW at 7%, EI at 7%, and ODSP at 5%.



Housing Data

Access to Safe Housing

73% reported living in safe, secure, long-term housing

7% reported living in unsafe or unsecured housing, relying on friends or family for housing, or being homeless

Financing

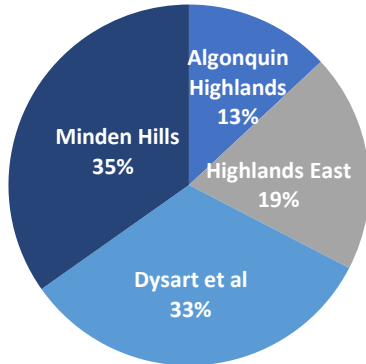
50% reported owning their home

11% reported renting their home

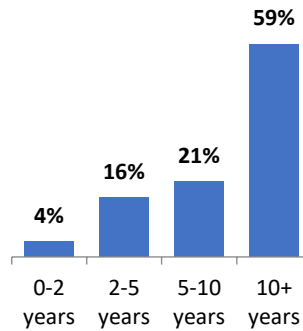
47% reported spending over 30% of their income on housing related costs

Residence Data

Resident Municipality



Time in the Community



Nature of Residency

92%

Described themselves as full time residents

Demographic Data

Ethnic or Racial Identity

88% described themselves as White or Caucasian
8% described themselves as Black, East, or Southeast Asian, Indigenous, Latino or Hispanic, Middle Eastern, or South Asian

Gender





79% identified as female
16% identified as male
1% identified as non-binary

Sexual Orientation

88% Did not identify as 2SLGBTQAI+
4% identified as lesbian, gay, bisexual, transgender, queer, two-spirited, asexual, or intersex (2SLGBTQAI+)

Community Safety and Well-being Priorities in Haliburton County

Based on our community and service provider consultation and engagement, and research findings, we have identified four key priority areas that align with the needs of our community and their service providers. For each priority, a set of corresponding goals has also been articulated.

 <p>Housing and Homelessness</p>	 <p>Poverty and Employment</p>	 <p>Mental Health, Substance Use and Addiction</p>	 <p>Healthcare and System Access</p>
<p>Goal 1: Align policy areas, desired outcomes and impacts, and key activities across existing programs and initiatives to the City of Kawartha Lakes & the County of Haliburton Housing & Homelessness Plan.</p> <p>Goal 2: Increase wraparound support for community members struggling to access housing.</p> <p>Goal 3: Continue to support service provider collaboration and information sharing.</p>	<p>Goal 4: Increase access to, and advocate for improved employment opportunities for low-income groups.</p> <p>Goal 5: Elevate existing service integration and information sharing efforts to alleviate poverty across key axes such as housing, transit, food, and energy.</p> <p>Goal 6: Identify innovative opportunities to address food insecurity through closed-loop referral processes.</p>	<p>Goal 7: Increase access to, and awareness of, mental health and addiction support services.</p> <p>Goal 8: Co-design and develop experience-based mental health and addiction and substance use support services and programs.</p> <p>Goal 9: Improve education, awareness, and information sharing on substance use and addiction, harm reduction, and mental health.</p>	<p>Goal 10: Increase awareness on the importance of movement and increase access to active transportation as a central mode of mobility (where applicable).</p> <p>Goal 11: Develop a Health Equity Working Group to support equal access to health across priority groups such as low-income, BIPOC, LGBTQA+, and Seniors.</p> <p>Goal 12: Enhance and expand service scope of Virtual Care for health and mental health in the County.</p>

Each of these priority areas do not exist in isolation from one another. Each of the priority areas overlap and intersect in terms of cause and effect, and based on identity, socioeconomic status, and health status, among others, meaning that experience-based challenges will affect different community groups in unique and differentiated ways.

The social determinants of safety and well-being intersect to create unique challenges for community members based on their identities, and

socioeconomic statuses; and thus, need to be considered in context to the broader, systemic determinants that impact each and all the priority issue areas. Meaning, that while this community safety and well-being plan identifies these four priority issues for action to drive improvements in the conditions of safety and well-being in the community, it is critical to maintain the lens of interconnectedness.

Finally, each of our priority areas are underpinned by critical enablers (i.e., supports or activities that are necessary to facilitate the success of any proposed initiatives) and risk factors (something that increases the likelihood of failure of any proposed initiatives).

Supports Required to Facilitate Plan Success

- **Transportation (Public and Active) -** The lack of accessible transportation options makes service provision to distal communities increasingly challenging; and impacts overall connectivity across the County.
- **Streamlined System Access / Navigation:** Ease of navigation between different community service providers within the County is a key challenge. Service recipients may at times not receive wraparound services due to limited knowledge and communication on available services (e.g., outreach to vulnerable community members).
- **Continuous Interested Party and Community Engagement:** Continuous engagement with the community and key collaborators can support the continued relevance, impact, and inclusiveness of the emerging CSWB.
- **Data Collection and Sharing:** Data gathering across community service providers is not integrated; and there needs to be clarity on who to work with to gather key data. There also needs to be clear and consistent definitions of the key data parameters required to gain regular and relevant insight to inform service provision. *There is “not a lack of will, but a lack of structure”.*

Factors that Pose Barriers to Plan Success

- **Environment and Climate Change:** Climate change is a risk factor associated to several other key focus areas, including homelessness, poverty, and mental and physical health. There is increased concern around the impacts of climate change (e.g., lack of shelter and exposure to changing temperatures), particularly their differentiated impacts on those already vulnerable in the County. Energy poverty is expected to rise with rising temperatures, and the increased reliance on air conditioning.
- **Geographic Distribution:** There are significant gaps in outreach and service provision where, due to service proximity, Indigenous people have to travel to different areas in order to access key services.
- **Population/Demographic Based Challenges:** Each of the identified issue / priority areas noted earlier is expected to result in differentiated impacts on community members based on identity, health, age, and income status, among other factors.
- **Public Health Threats:** As demonstrated by the COVID-19 pandemic, public health outbreaks drastically alter the way community services are delivered and how laws are enforced.

Our Priorities

The following section of the Plan outlines our key priorities, their corresponding goals and strategies, and what key implementation activities are required in order to help address each of the outlined priority areas.

In this section, you will find a total of four evidence-based priorities, 12 goals, and 25 strategies. Each of these elements is based on our research, and consultation and engagement findings, and seeks to address some of the community's most critical safety and well-being challenges.

The initiatives outlined in the following pages are based on key principles designed to enhance what already exists in the community, and to innovate where key gaps linger. The implementation of the CSWB Plan and each of the key priority area goals will require a lead, and important governance considerations.

Priority Design Principles

1. **Base all goals on the data collected.** Everything reflected in the Plan is grounded in the information collected through extensive data and document review and interested party engagement.
2. **Amplify what already exists** to avoid duplication and strengthen existing efforts.
3. **Innovate wherever possible.** Creative solutions can help empower communities and key delivery collaborators.
4. **Enable and convene** key players and **work at the intersection** of local government (County, Local Municipalities), service providers, and community.
5. **Advocate to secure the support needed** where capacity and resources do not exist.
6. **Continuously Engage with interested parties** to ensure that progress is being made on goals and priorities, and that impacts are effectively reaching community members.

Action Planning and Implementation

This Plan does not prescribe specific timelines for implementation. Instead, for each priority and their respective goals, high-level workplans identify supporting activities and a sequence for their rollout. It is expected that these activities will evolve, and the timing of their implementation may be adjusted as additional activity detail is incorporated into more detailed operational plans.

Additional information on implementation is discussed in Section 5. The Path Forward – Addressing our Priorities, below.

Priority 1 – Housing and Homelessness

The County of Haliburton’s housing context is characterized by a lack of available housing across the continuum, particularly affordable housing stock; meaning that housing challenges, while differentiated, impact all community members regardless of income levels. Housing is also complicated by discrepancies in the infrastructure (for example, sewage systems) that supports housing development. This means that a collective effort to the development of housing stock across the community is invaluable to ensuring that community members have access to attainable, affordable housing.

The City of Kawartha Lakes and Haliburton County Housing and Homelessness Plan outlines the following targets for the ten-year period between 2020-2029⁵⁰:

- 270 low-income rental units
- 200 middle-income rental units
- 280 supportive rental units

The objective is to reach a total of 2,030 additional rental units across the City of Kawartha Lakes and the County, and a total of 750 new rental units in the County.

Current State Snapshot – Key Gaps and Data Points

- Lack of housing stock – Housing prices are rapidly increasing. In 2021, the average home sale price was \$425k (*up from \$307k in 2020*).⁵¹
- Lack of affordable housing stock – As of 2020, there were only 16 Community Housing Units that turned over in Haliburton County; out of a total of 224 Community Housing units in Haliburton County⁵², with a combined waitlist of over 2,000 households waiting for Community Housing across Kawartha Lakes and Haliburton County.⁵³
- Homelessness – As of 2021, there are 40 households presently experiencing homelessness, and 83% of these households are experiencing chronic homelessness (six months or more over the last 12 months).⁵⁴ Given COVID-19, while there are data gaps, service providers anecdotally cite a higher rate of homelessness.

Existing Programs and Initiatives

Current programs and initiatives include the following, among others:

- [2020-2029 City of Kawartha Lakes & the County of Haliburton Housing & Homelessness Plan](#)
- [The Affordable Housing Target Program](#)
- [Built for Zero national change effort to end homelessness](#)
- [Homelessness Coordinated Response Team](#)
- [Places for People](#)

Goal 1: Align policy priorities

Align policy priorities and activities across existing programs and initiatives to the 2020-2029 City of Kawartha Lakes & the County of Haliburton Housing and Homelessness Plan

The current plan focuses on eight policy areas, including accountability and outcomes, ending homelessness, coordination of community services, Indigenous focus, community needs, community housing providers, and climate change and environmental sustainability. Each of the policy areas includes key objectives that can be leveraged to support the goals of the CSWB Plan.

Key strategies:

- Identify key desired outcomes and targets outlined in relevant programs and initiatives (such as the 2020-2029 Housing and Homelessness Plan), and align targets across programs, initiatives, and plans. Ensure that a complementary and comprehensive understanding of outcomes is developed.
- Work with community, as well as housing providers and service providers to assess outcome targets and identify targeted methods for achieving these goals based on lived experiences and community needs.

Goal 2: Develop wraparound support

Develop wraparound support for community members struggling to access housing through greater service integration, communications, and outreach.

Key strategies:

- Collaborate with the service recipient group, in this case people experiencing homelessness, to evaluate and assess service gaps, and develop an approach to program, service, and initiative co-design, to design accessible services, and address community-specific barriers and challenges.
- Investigate services and service provider collaboration using the closed-loop referral model (such as a multi-agency consent form) to establish wraparound services provision, facilitate information sharing, address upstream risks, and achieve life stabilization outcomes.

Definition call-out box:

Closed-loop referral models are models that center life stabilization as key to service provision. Closed-loop referrals mean that service providers ensure that service recipients have engaged with the correct organizations and / or service providers to effectively address their needs.

Life Stabilization Outcomes include: more people finding meaningful employment; shorter stays on assistance; fewer people needed to reapply for social assistance; improved housing stability, reduced child welfare involvement, prevention and early intervention.

Goal 3: Support service provider collaboration

Continue to support housing service provider collaboration and information sharing to improve wraparound services, system navigation, and greater recipient autonomy and agency.

Key Strategies:

- Develop a housing website that builds on existing platforms or sites to centralize information on housing providers, housing and homelessness statistics and data, as well as information on how to access housing support (i.e., key applications and documents, service providers by geography)
- Work with organizations (see 'Existing Initiatives and Programs') that work on the front line to support underhoused populations and people experiencing homelessness. Organizations include, but are not limited to: the Food Hubs, 4Cs, Fuel for Warmth, the Heat Bank, and public libraries.

Priority 1 – Proposed Workplan

Key Activity	Estimated Timeline			Sample Key Performance Indicators
	Short term	Medium term	Long term	
Goal 1: Align policy areas, desired outcomes and impacts, and key activities across existing programs and initiatives to the 2020-2029 City of Kawartha Lakes & the County of Haliburton Housing and Homelessness Plan.				
Develop inventory of existing programs and initiatives that are aligned with existing Plans and the work towards ending homelessness, and identify existing target outcomes				No. of Service Providers consulted No. of community members consulted
Based on existing community efforts, assemble a working group of community members, and service providers to assess existing targets and outcomes as outlined in the 10-year Housing and Homelessness Plan). The working group would lead the effort on intersectional and representative information gathering				No. of unhoused community members supported No. of previously homeless newly housed community members housed
Work with the Haliburton County Service Provider Network (HCSPN) to conduct one to three working group sessions				Community Scorecard
Update and redefine outcomes based on community and service provider inputs and discussion findings				
Promote and evaluate progress against identified outcomes, and program and identify opportunities for scaling existing outcomes				
Goal 2: Increase wraparound support for community members struggling to access housing.				
Develop an approach to working with service recipient communities in co-evaluating and assessing service gaps				No. of unhoused community members who

Engage with community groups and interested parties to evaluate existing services and programs			have been successfully referred to supplementary services
Begin co-design of closed-loop service delivery models based on input from community members			No. of successful closed-loop referrals (i.e., referrals where follow-up has been sufficient, and service provision was wraparound)
Establish formalized mechanisms for information sharing between housing and homelessness service providers to support closed-loop referral service delivery models			
Continue to evaluate service gaps, and measure outcomes of closed-loop referral support mechanisms			

Goal 3: Continue to support service provider collaboration and information sharing.

Develop inventory of key programs, initiatives, and services and providers available in the County; as well as an inventory of key applications, document requirements and process summarizations			Level of engagement between service providers (e.g., frequency of information shared)
Identify key data parameters for tracking and publishing on a centralized website			No. of events, forums, or meetings between service providers
Work with the consolidated Municipal service manager, and identify data stewards to manage, collate, and communicate data points and key statistics on housing and homelessness in the County			
Develop and launch website			
Continue to manage website, update data and service provider information on a regular basis			

Priority 2 – Poverty and Employment

The County's poverty profile is characterized by low-income, minimum wage jobs; resulting in high Ontario Works enrollment even among those who are employed. Additionally, this priority is exacerbated by housing challenges, as well as significant limitations in mental health, addictions, and substance use outreach and support services.

Current State Snapshot – Key Gaps and Data Points

- Lack of jobs with a livable wage – Employment opportunities in the County are primarily minimum wage jobs. 10% of survey respondents cited that they “often” work more than one job⁵⁵; and 65% of OW Enrolment is among 30-to-39-year-olds.⁵⁶
- Wraparound Child Poverty Prevention – Haliburton County has a 23% child poverty rate – one of the highest in the country.⁵⁷ Given the role of low, non-living wages and incomes in exacerbating and / or causing poverty, an important consideration in the County is the percentage of residents experiencing low-income financial status. In Ontario, over half (56%) of all children living in low-income households live in families with a parent who is in the workforce either part-time, or full-time.⁵⁸
- Closed-loop Referrals for Food Insecurity – As of 2019, 13.5% of residents in the City of Kawartha Lakes and Haliburton County experience food insecurity⁵⁹ (e.g., *not having enough to eat, limited access to quality foods*). Interventions to support food insecurity do not target preventative measures.
- Energy Poverty – 16% of households spend over 15% of their income on energy costs (almost double the recommended 7.4% of income).⁶⁰

Existing Programs and Initiatives

Current programs and initiatives include the following, among others:

- [Haliburton County and City of Kawartha Lakes Roundtable for Ending Poverty](#)
- [CKL and County Poverty Reduction Strategy \(2016\)](#)
- [Good Food Box](#)
- [Fuel for Warmth](#)
- [SIRCH Meal Program](#)
- [The Food Hubs](#)
- [Heat Bank](#)
- [Fleming CREW Employment Services](#)

Goal 4: Reduce barriers to employment access

Reduce existing barriers to access, and advocate for improved employment opportunities for low-income groups.

Key Strategies

- Leverage existing employment resources in the County, such as Fleming CREW.
- Work with economic development and services departments, such as the Haliburton County Development Corporation, the Chamber of Commerce, and the City of Kawartha Lakes employment services department to integrate regional efforts and create a promotion strategy for the provision of employment to low-income groups.
- Work with potential employers, and training institutions to develop employment and training placement programs for low-income groups and individuals.
- Work with community partners and service providers to promote opportunities among low-income groups.
- Increase dedicated resourcing for the Haliburton County and City of Kawartha Lakes Roundtable for Ending Poverty, and collaborate to align on target outcomes, key approaches, and to monitor and drive progress and impacts.
- Increase awareness among employers around living-wage.

- Leverage high schools to help prepare students for future employment opportunities, and to create upstream interventions to employment precarity.

Goal 5: Elevate service integration and information sharing

Elevate and amplify existing service integration and information sharing efforts to alleviate poverty across key focus areas such as housing, transit, food, education, early learning, children’s services, and energy. Poverty is an inherently interconnected issue that is both a cause and consequence of the other identified priority areas.

Key Strategies

- Leverage existing poverty reduction efforts and recommendations such as the County’s Poverty Reduction Round Table, and the City of Kawartha Lakes and County Poverty Reduction Strategy (2016).
- Continue to identify points of intersection between risk and priority areas to address upstream challenges and prevent chronic poverty.
- Continue to identify opportunities to mitigate for service silos.

Goal 6: Innovate to address food insecurity

Identify innovative opportunities to address food insecurity through closed-loop referral processes.

Key Strategies

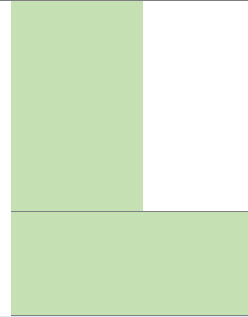
- Embed food security requirements and opportunities into local policies (where applicable, for example, in official plans and zoning by-laws).
- Identify and act on opportunities to strengthen or develop innovative solutions to food access challenges (e.g., through existing community gardens, and programs delivered through SIRCH, the Food Hubs, School Breakfast Programs, and the Good Foodbox, among others).
- Leverage FoodNet to continue to provide up-to-date information for service providers and recipients.
- Empower community members with custom-made solutions and centralize resources and information.

Priority 2 – Proposed Workplan

Key Activity	Estimated Timeline			Sample Key Performance Indicators
	Short term	Medium term	Long term	
Goal 4: Increase access to, and advocate for improved employment opportunities for low-income groups.				
Identify existing resources in the County targeted at supporting low-income groups gain employment	█			No. of established partnerships
Work with the Haliburton County and City of Kawartha Lakes Roundtable for Ending Poverty to define specific employment and placement-related target outcomes	█			No. of employment opportunities identified / established
Identify key community, economic development, and educational / training partners to support employment opportunity development	█			No. of referrals to employment opportunities
Co-develop an approach to provide and advocate for employment opportunities with key identified partners	█	█		No. of consultations with target groups
Pilot and scale employment partnership programming		█	█	
Monitor success through a regular process, and work directly with service recipients to support outcomes achievement			█	
Goal 5: Elevate existing service integration and information sharing efforts to alleviate poverty across key axes such as housing, transit, food, and energy.				
Identify key objectives and target outcomes that are outlined in existing Roundtable for Ending Poverty initiatives	█			Frequency of information shared between key services
Develop an aligned approach to service provision, and to amplify existing efforts related to service integration and information sharing	█	█		No. of joint engagements

Identify gaps in existing initiatives and develop targeted outcome measures related to child poverty, employment, food insecurity that integrate key activities and efforts

Pilot and scale efforts in partnership with service providers



between service providers
No. of referrals to adjacent services

Goal 6: Identify innovative opportunities to address food insecurity through closed-loop referral processes.

Identify and assess existing policies that target food insecurity

Identify existing programs and initiatives to alleviate food insecurity, and identify key service gaps and risk areas



No. of referrals to existing programs
No. of times a service is accessed
No. of report-backs to intake service

Work with the community to develop innovative solutions to food access issues



% change in individuals receiving services food-related services

Priority 3 – Mental Health, Substance Use & Addiction

Mental health and substance use and addiction support services are significantly constrained in the County due to proximity of service centres, and significant limitations in available resources to support service provision and outreach to in-need community members.

Current State Snapshot – Key Gaps and Data Points

- Outreach Services – The County currently relies on a single addictions worker to support in-need communities. Given this resource challenge, there is a significant gap in outreach capabilities.
- Drug Use and Suspected Drug Poisoning Rates – 8.9% of residents in Grades 7 to 12 use opioids without prescription⁶¹; and in 2019, there were 251 cases of drug poisoning among the wider population.^{62,63}
- Education and Information – 51.5% of residents believe there is no risk of overdosing from overusing prescription medicine; and 20.6% of residents 18+ believe there is no risk of getting addicted to opioids.⁶⁴
- Consent Silos – Consent silos by organization, and by legislation result in added administrative burden for service recipients, and service providers, and result in information gaps that impact the quality of wraparound services for community members.

Existing Programs and Initiatives

Current programs and initiatives include the following, among others:

- [Haliburton, Kawartha Lakes, Northumberland Drug Strategy](#)
- [Haliburton, Kawartha Lakes, Pine Ridge Drug Strategy](#) (PARN)
- [Four County Crisis Information Sessions](#)
- [Youth Wellness Hub](#) Mental Health and Addictions Support
- [Rapid Access Addiction Medicine](#) (RAAM) Clinic
- [Fourcast](#) Community-based addiction treatment provider
- Fourcast partnership with the Haliburton Highlands Health Services (HHHS)
- [John Howard society](#) and [PARN](#) provide harm reduction supports

Goal 7: Improve access to mental health and addiction support services

Increase access to, and awareness of, mental health and addiction support services.

Key Strategies

- Expand service availability and increase frontline resources for outreach and risk-reduction oriented capabilities and supports for residents.
- Develop a robust and creative human resource approach that is aligned with service requirements to mitigate existing gaps, as well as to address the exacerbated labor shortages that have impacted the sector.
- Collaborate with agencies to develop an approach to improving mental health outcomes.
- Expand service outreach to underserved populations.
- Develop a mechanism for service recipient information sharing to improve wraparound services, and to reduce administrative burdens on service recipients.

Goal 8: Co-design mental health and addiction services

Co-design and develop experience-based mental health and addiction and substance use support services and programs.

Key Strategies

- Work with community members who have lived experience with mental health, addiction and substance use to co-design programs and services that best promote life stabilization and risk-reduction based outcomes.
- Advocate for improved services based on co-design outcomes.
- Build on, and improve existing services and programs based on input from community members.

Goal 9: Improve education on substance use and addiction

Improve education, awareness, and information sharing on substance use and addiction, harm reduction, and mental health.

Key Strategies

- Leverage the Haliburton, Kawartha Lakes, Northumberland (HKLN), and the Haliburton, Kawartha, Pine Ridge (HKPR) Drug Strategy pillars (harm reduction, prevention and education, treatment and justice and enforcement), and existing school programs to increase awareness, and support service reach, and impact.
- Further develop and amplify existing harm reduction strategies and develop education and awareness campaigns to prevent overdose and substance use among youth.
- Develop an education campaign to increase awareness of harm reduction and access to harm reduction sites; and connect with local schools to disseminate education campaigns on substance use and addiction prevention and intervention.
- Advocate for collaboration between the school board, and mental health, substance use and addictions service providers to drive awareness among youth.

Priority 3 – Proposed Workplan

Key Activity	Estimated Timeline			Sample Key Performance Indicators
	Short term	Medium term	Long term	
Goal 7: Increase access to, and awareness of, mental health and addiction support services.				
Identify key resource gaps as they relate to required service gaps and areas, and impacts on service recipient communities				% change in service use
Develop targeted interventions and tools to support outcomes achievement				% change in outreach support
Hire key resources to support outreach, frontline crisis response, and wraparound intervention				% change in services used
Work with key agencies to identify strategies to improve mental health, substance use, and addiction outcomes				% change in community members reached
Work with agencies to identify service outreach approach and identify target demographics by geography				
Goal 8: Co-design and develop experience-based mental health and addiction and substance use support services and programs.				
Identify community members and service providers (such as youth outreach workers) for service and program co-design				No. of community consultations and engagement
Work with community members and service providers to develop approaches to experience-based support services				No. of new services piloted
Pilot services				% change in outcomes by service
Scale co-designed services if applicable				
Monitor and evaluate impacts of services, and continue to improve and build upon				

successful service delivery methods and programs

% change in outreach support
% change in community members supported

Goal 9: Improve education, awareness, and information sharing on substance use and addiction, harm reduction, and mental health.

Identify target focus areas for education and awareness campaigns based on the HKLN and HKPR Drug Strategies

No. of education campaigns

Develop an education and awareness approach with key partners (e.g., schools, service providers, community members, local government, government agencies, etc.)

No. of campaign partners identified, and partnerships established

Scale relevant education and awareness programs and initiatives

No. of students and community members engaged

Continue to implement education and awareness campaigns on a regular cadence

% change in substance use among minors
% change to perceptions of harm of substance use among minors

Priority 4 – Healthcare System Access

Healthcare access and more broadly health equity are a key challenge across Ontario. Different demographic groups face unique challenges in accessing health, however, broadly there are inequities experienced across priority groups.

Current State Snapshot – Key Gaps & Data Points

- Active Transportation Awareness and Use – Commuting by car, van, or truck, either as a driver or passenger, was the main mode of commuting to work (92.4%), compared to 77.9% provincially; additionally, 73.6% of residents aged 12 and up spend 15+ hours / week engaged in sedentary activity.⁶⁵
- Differentiated Health Impacts – Among low-income groups, 23.2% of residents with a household income of <\$40k believe they are in poor health.⁶⁶
- Wraparound Health Services for Vulnerable Residents – there is a need for more comprehensive geriatric care for seniors in the community that extends beyond the medical lens to include social interventions.

Existing Initiatives and Programs

- [Haliburton Highlands Health Services provides a suite of services for seniors](#) (e.g., Friendly visiting, Meals on Wheels, Falls Prevention Program)
- [Communities in Action Committee](#) helps residents navigate to find trails, and bike paths.
- [Volunteer Dental Outreach](#)
- [Youth Wellness Hub](#)

Goal 10: Increase awareness on benefits of health and physical activity

Increase awareness on the importance of physical movement and increase access to active transportation as a central mode of mobility (where applicable).

Key Strategies

- Provide educational resources on movement as it relates to health and well-being and encourage increased physical activity.
- Work with service providers, medical and health care providers, and schools to disseminate information on the importance of movement for well-being and overall health.
- Promote healthy living by sharing information on the Canada Food Guide's Physical Activity Guidelines (PAG) on sedentary behavior.
- Increase Active Transportation infrastructure such as sidewalks, trails, pedestrian crossings, and ramps into buildings for accessibility purposes, among others.

Goal 11: Develop a Health Equity Working Group

Develop a Health Equity Working Group to support equal access across the continuum of care among community members more broadly, including priority groups such as low-income, BIPOC, 2SLGBTQIA+, and seniors.

Key Strategies

- Improve health access by convening health and medical care providers, as well as social service providers to determine key gaps, and intervention strategies
- Collaborate with key collaborators and community members to set targets, key outcomes, and to establish outreach mechanisms.
- Monitor outcomes of the long-term care paramedicine pilot program, and scale where possible.

Goal 12: Increase Access to Primary Care

Increase access to primary health care among community members.

Key Strategies

- Advocate for better health and mental health services, and work with different levels of government to facilitate better service provision.
- Explore approaches to attracting more health human resources such as further supporting enhanced scopes of practice for health providers working in these communities to improve access (e.g., nurse practitioners, physician assistants, pharmacists, paramedics, midwives, unregulated workers)
- Amplify existing innovative care models, such as virtual care, the community paramedicine program in the County to increase outreach and raise awareness of existing services.

Priority 4 – Proposed Workplan

Key Activity	Estimated Timeline			Sample Key Performance Indicators
	Short term	Medium term	Long term	
Goal 10: Increase awareness on the importance of movement and increase access to active transportation as a central mode of mobility (where applicable).				
Identify and develop key messages for awareness strategies and campaigns				No. of awareness campaigns conducted
Work with partners to disseminate the campaign among schools, and through service providers				% change in youth enrollment in sports leagues
Continue to share information on active living for well-being				% change in sports facility / recreation memberships
Goal 11: Develop a Health Equity Working Group to support equal access across the continuum of care among community members more broadly, including priority groups such as low-income, BIPOC, 2SLGBTQIA+, and seniors				
Identify key collaborators and community members that will constitute the Health Equity Working Group				% change in utilization of health care services
Collaboratively identify and set key targets, and desired outcomes, and determine outreach and intervention mechanisms and strategies				% change in patients successfully accessing primary care services
Pilot and scale key initiatives, programs, and efforts based on Working Group findings and discussion outcomes				% improvement in patient outcomes
Establish and implement a regular cadence of Working Group impact evaluations, outcome measures, and establish a mechanism for course-correction, where applicable				No. of Working Group

Leverage paramedicine pilot program, and expand and scale program in complement to Working Group initiatives



meetings and consultations

Goal 12: Increase access to primary health care among community members.

Identify opportunities to increase advocacy efforts to health and mental health services



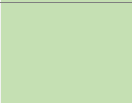
No. of community members accessing virtual care clinics

Identify existing virtual care models, and define service gaps, challenges, and scaling opportunities



No. of community members able to access primary care

Develop an outreach and awareness strategy to notify the community on innovative care options



Scale virtual care models



% change in no. of community members with family doctors

Monitor and evaluate impacts of virtual care, and course-correct if required



No. of virtual appointments per year
Average wait-times to see a health care provider

Section 5: The Path Forward – Addressing our Priorities

As a living document, the Plan acts as a guide for key interested parties to come together, and address community safety and well-being needs in innovative, and impactful ways. It is intended to be driven by key partners, interested parties, service providers, and local government alike, and to continuously reflect the changing needs of our community members as progress is made.

The Haliburton County Community Safety and Well-being Plan aims to use the provincial framework to inform the careful planning and promotion of safety and well-being in the community, as well as to support meaningful implementation, using the different levels of intervention as a guide.

Advancing the CSWB in the County means working together across community, service providers, local government, and other levels of government to support the continuous improvement of community outcomes, across the key priority areas.

The implementation of the CSWB will require a lead, and important governance considerations. Effective implementation and continuation will be based on the following key principles:

- ✓ **Good Governance** Identification of a key resource at the County could help better spearhead and mobilize the implementation of goals and strategies, and to work closely with the Steering Committee and other governing groups to monitor, track, and evaluate progress.
- ✓ **Data Stewardship** Identification of a working group of data stewards that can convene, and identify key data parameters, and spearhead data collection across key sectors (e.g., housing, health, mental health, substance use, poverty, employment, among others).
- ✓ **Continued Consultation & Engagement** Creation of a formalized process of community consultation and engagement as part of tracking, monitoring, and evaluating CSWB impacts.

Together, these principles will help support innovative solutions to community challenges, amplify what already exists in the County, and leverage the municipal role in driving our desired CSWB outcomes.

Good Governance

To support the effective implementation of the CSWB Plan, a collaborative, and inclusive governance structure will be developed and maintained to support coordination, collaboration, and accountability for results.

The governance structure will include a CSWB Coordinator at the County, a Steering Committee, the Advisory Table, and supporting Sub-Committees and Working Groups around specific topics, as required. The Advisory Table will help set and maintain the strategic direction of the Plan, and each of the Sub-Committees will be consistent with the goals and strategies outlined in the priorities section of this Plan.

Over the horizon, as we continue to collaborate with community members, service providers, and government leaders, additional sub-committees and specialized working groups may emerge.

Data Stewardship

The Data Stewardship principle ensures that data is collected across key priority areas and across all of the Social Determinants of Health, more broadly, in a timely, integrated, and regularly updated manner.

The Working Group will consist of four leads, across each of the priority sectors, and will work closely with the respective Sub-Committees to ensure cohesion, collaboration, and improved information sharing across key service providers in the County. The efforts of this group should build upon existing initiatives in the region.⁶⁷

Four leads will drive Cohesion, Collaboration, and Information Sharing to help deliver the Community Safety and Well-being Plan.



Continued Consultation & Engagement

Continuous improvement for the Plan, and for the community means engaging directly with the community in order to track, monitor, and evaluate outcomes; and course-correct programs, and strategies where necessary based on emerging impacts, and lingering service gaps.

To effectively deliver on meaningful consultation and engagement, as part of the monitoring of outcomes for each priority's goals, it is critical that communities are consulted to ensure that the outcomes we are targeting are being achieved for those most affected by existing gaps, in a timely, and highly impactful way.

Next Steps

This Community Safety and Well-being Plan is intended to inform, and deliver a broader understanding of Community Safety, and Well-being, and the unique and ongoing challenges and opportunities within the County of Haliburton. While there is an increasing understanding that safety and well-being are complex, multifaceted, and systemic pillars of a community, and that the County and its community members have made significant efforts to alleviate challenges across Housing and Homelessness, Poverty and Employment, Mental Health, Substance Use and Addiction, and Healthcare System Access, significant economic uncertainty across the country, and unforeseen events (e.g., the COVID-19 pandemic) continue to exacerbate inequalities across priority groups and deepen the existing income gap.

We know that more work needs to be done. As such, this Plan outlines our key priority areas, and their respective goals, strategies, and implementation activities and performance indicators to support a safety and well-being context that is comprehensive, intersectional, and equity based.

Through the proposed governance structure, the County will regularly monitor progress regarding the achievement of CSWB Plan goals.

The County and its partner municipalities are committed to working closely with the community, our key service providers, and government leaders to drive better safety and well-being outcomes for our residents.

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For more information, updates or to connect, visit haliburtoncounty.ca/cswb.

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