



Community Safety & Well-Being in North Bay

A plan to foster a safe,
healthy and inclusive
community.



2021

Message from the Mayor of North Bay



The City of North Bay strives to create a City where individuals and families can enjoy a safe, healthy and secure quality of life. Planning efforts to keep the city safe and healthy moving forward are vastly important. North Bay's Community Safety and Well-Being Plan entitled *Community Safety & Well-Being North Bay: A plan to foster a safe, healthy and inclusive community* is another commitment to safety, well-being, and inclusivity in North Bay.

Working in a collaborative system, the Plan builds off of the excellent work that is being completed in the community. The Plan aims to mitigate and reduce identified risks in the community through a coordinated effort among service providers.

On behalf of the City of North Bay Council, I would like to thank everyone that participated in the development of this important initiative including all community service providers for all the work you do each day.

Al McDonald,
Mayor, City of North Bay

Message from the Chair of the Gateway Hub Executive Committee

The Gateway Hub Executive Committee is committed to the creation of a safe, engaged, and inclusive community. The development of North Bay's first Community Safety and Well-Being Plan is another step towards realizing this vision.

The Plan understands that a collaborative effort is required to ensure a healthy and safe community. Community partners are instrumental in assisting individuals and families in need and the Plan seeks to further coordinate the work of the entire service system to realize the Plan's outcomes.

Through the implementation of North Bay's Community Safety and Well-Being Plan and the dedication of the Gateway Hub member organizations, we enable ourselves to make North Bay a safe, healthy, and inclusive city for all.

Scott Tod,
Chair, Gateway Hub, Executive Committee
Chief of Police, North Bay Police Service

Gateway Hub Executive Committee Members: Alan McQuarrie – Community Counselling Centre of Nipissing, Andrea Roberts – Hands the Family Help Network, Anna Marie Bitonti – Nipissing Parry Sound Catholic District School Board, Anne-Marie Desjardins – Ministry of Children, Community and Social Services, Ann Loyst – North Bay Regional Health Centre,

Catherine Matheson – District of Nipissing Social Services Administration Board, Craig Myles – Near North District School Board, Darlene Stone Aro – North Bay Police Service, Gisèle Hébert – Children’s Aid Society of Nipissing & Parry Sound, Ian Kilgour – City of North Bay, Jaymie-lynn Blanchard, North Bay Nurse Practitioner-Led Clinic, Jim Chirico – North Bay Parry Sound District Health Unit, Liana Blaskievich – Near North District School Board, Louise Gagne – North Bay Parry Sound District Health Unit, Mary Davis – Nipissing Mental Health Housing and Support Services, Megan Waqué – North East Local Health Integration Network, Michelle Glabb – District of Nipissing Social Services Administration Board, Monique Menard – Conseil scolaire catholique Franco-Nord, Scott Tod, North Bay Police Service, Stephanie Beausoleil – North Bay Parry Sound District Health Unit, Stephen Merkley – Nipissing Mental Health Housing and Support Services, Sue Rinneard – Crisis Centre North Bay, William McMullen – Ontario Provincial Police.

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Introduction

North Bay's Community Safety and Well-Being (CSWB) Plan is a coordinated effort to foster a safe, healthy and inclusive community by responding to identified priority risks. The Plan builds upon the community's strengths while also addressing gaps in the community's safety and well-being landscape. Ultimately, the Plan sets out to meet locally identified goals, outcomes, and objectives through evidence-based outputs and actions. An implementation strategy is included within the Plan to ensure successful implementation.

Crime is on the rise in Ontario. From 2015-2019, police-reported crime in Canada, as measured by the Crime Severity Index (CSI), increased 19% and marks the fifth consecutive annual increase in CSI. Concerning well-being, the Canadian Index of Wellbeing shows a modest increase of 7.3% in overall well-being among Ontarians. Although growth has been made on well-being indicators related to education, community vitality, and health, modest growth has been made in democratic engagement and environment while troubling trends are noted in leisure and culture, time use, and living standards. Living standards indicators, for instance, show a growing income gap, volatility in long-term employment, and lower job quality.

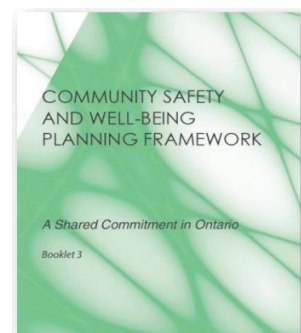
Locally, North Bay is also facing several issues affecting community safety and well-being. To begin, many would agree that North Bay is facing an opioid crisis based on local surveillance and evidence. The North Bay Parry Sound District Health Unit reported 422 overdoses and 30 deaths in the Nipissing District which is one of highest opioid death rates in the province since the reporting began in 2019. Of the reported overdoses, 77.5% were in North Bay. To continue, homelessness continues to be more prevalent in the City as evidenced by the physical presence of more people apparently without shelter and also recent reports and community activity in this area. Lastly, mental health concerns are prominent and are a growing issue. Nipissing District has higher rates for mood disorders, anxiety disorders, and suicide than the provincial average. In addition, approximately 20% of the calls received by the North Bay Police Service are primarily related to mental health and addictions.

North Bay's Community Safety and Well-Being Plan builds on the work of the 2020 Mayor's Roundtable Report on Mental Health and Addictions as well as other work that has, and is currently being completed in the community surrounding community safety and well-being issues such as addictions, mental health, housing, homelessness, and employment.

Community Safety and Well-Being Planning Framework

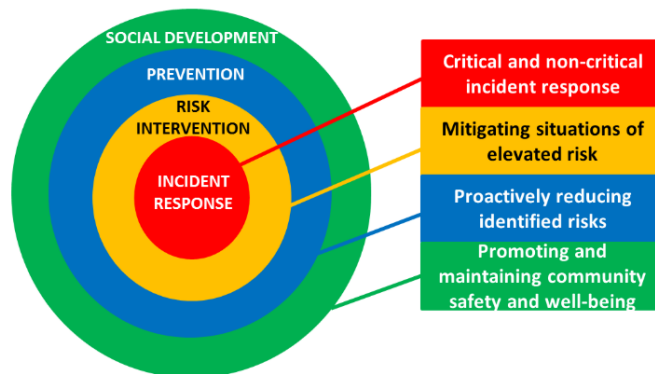
Effective January 1, 2019, as part of legislation under the *Police Services Act*, municipalities in Ontario are required to develop and adopt Community Safety and Well-Being (CSWB) plans by July 1, 2021. This legislative requirement applies to all single and lower-tier municipalities and regional governments, and is being directed by the Ministry of Community Safety and Correctional Services.

Developing and implementing the CSWB Plan requires the City of North Bay to work in partnership with a multi-sectoral advisory committee



comprised of representation from the police service board and other local service providers in health/mental health, education, community/social services, and children/youth services. The Plan allows the City to take a leadership role in defining and addressing priority risks in the community through proactive, integrated strategies that ensure vulnerable populations receive the help they need from the providers best suited to support them.

The province has published a *Community Safety and Well-Being Planning Framework* which provides guidance on the development of local plans. The framework outlines the following four areas to ensure local plans are as efficient and effective as possible in making communities safer and healthier:



- *Social Development* (promoting and maintaining safety and wellbeing)
- *Prevention* (proactively reducing identified risks)
- *Risk Intervention* (mitigating situations of elevated risk)
- *Incident Response* (critical and non-critical incident response)

These areas of focus are all relevant to the City’s vision. To begin, *social development* through the CSWB Plan will promote long-term investment in the social determinants of health which complements the community’s current investments and delivery of programs and services in these areas. Social development is also where a wide range of sectors, agencies and organizations bring different perspectives and expertise to the table to address complex social issues such as poverty, from every angle. Knowing who to contact (community agency versus first-responder) and when to contact them (emerging risk versus crisis incident) will allow communities to operate in an environment where the response matches the need.

In terms of *prevention*, the North Bay CSWB Plan will help to identify and address local risk factors before they escalate and reach critical levels, thus leading to reduced costs in crisis management and improved community outcomes. Additionally, through prevention and proactively implementing evidence-based situational measures, policies, or programs/ services, the identified risks to community safety and well-being will be reduced before they result in crime, victimization, harm, and/or health-related issues.

The CSWB Plan’s focus on *risk intervention* is intended to reduce harm before situations or incidents of elevated risk can occur that require an elevated - or incident - response. This is an

immediate intervention that will require a multi-sector response and collaboration between various community and acute care agencies.

Lastly, *incident response* includes immediate and reactionary responses that may involve a sense of urgency from first responders such as the police, fire, emergency medical services, and social and human services. Planning will be done in this area to better collaborate and share relevant information and data, such as the types of occurrences and victimization, to ensure the best use of resources and the most appropriate service provider is responding.

Guiding Principles

The guiding principles for the Community Safety and Well-Being Plan emerged from the planning framework and were reinforced by the Advisory Committee. These principles will shape the daily decision-making around the Plan and will define the way in which things get done, including carrying out the Plan’s strategic objectives and strategies.

Strength-Based



Recognizing the great work already happening within individual agencies, organizations, committees, and planning tables using collaboration to do more with local experience and expertise.

Risk-Focused



It is far more effective, efficient, and economical to prevent something bad from happening rather than trying to find a “cure” after the fact to improve an individual’s quality of life.

Awareness & Understanding



Planning partners will need to understand what they are getting into – and why – before they fully commit time and resources.

Highest Level Commitment



Community Safety and Well-Being planning is a community-wide initiative that requires dedication and input from a wide range of sectors, agencies, organizations, and groups.

Effective Partnerships



A plan will only be as effective as the partnerships and multi-sector collaboration that exists among those developing and implementing the plan.

Evidence & Evaluation



It will be important to gather information and evidence to paint a clear picture of what is happening in the community to support the identification of local priority risks and to monitor and evaluate the impact of the CSWB Plan in achieving its outcomes.

Cultural Responsiveness



The plan must be informed by the City's cultural diversity and have the ability to effectively interact with, and respond to, the needs of diverse groups of people in the community.

North Bay's Context

The City of North Bay, often considered the “gateway to the north”, is located 3-hours north of Toronto and 3.5-hours north-west of Ottawa. North Bay is situated in traditional Anishinabek territory, on lands occupied by the peoples of Nipissing and Dokis First Nations whose aboriginal and treaty rights are recognized by the Robinson Huron Treaty of 1850. Considered a small city, North Bay has a population of 51,553 and offers both urban and rural living. North Bay prides itself on its quality of life: nestled between two large lakes with forests, rivers, and even a small waterfall. The local economy offers employment in various professions, industries, and trades, offering a balance of work and family life. Much like other Northern Ontario population centres, the City of North Bay serves as a regional hub for employment, education, health care services, retail shopping, and other vital services to neighbouring municipalities in the Nipissing and Parry Sound Districts.



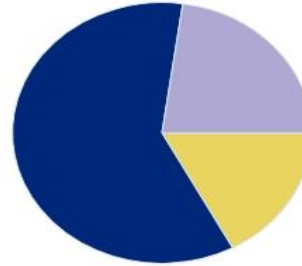
DEMOGRAPHICS REPORT

North Bay, Ontario

AGE

As with many Northern Ontario communities, North Bay has notable demographic differences when comparing to provincial figures. The following are worth highlighting:

- North Bay has a higher proportion of seniors 65 years and over (19.9%) compared to the provincial average (16.7%).
- North Bay has a lower proportion of children 0-14 years old (15%) compared to the provincial average (16.4%).
- North Bay has a lower proportion of adults 25-64 years old (52.5%) compared to the provincial average (54.2%).



0-14 15 25-64 53 65+ 20

Household Income



\$59,967 median income

North Bay households have a lower median income at **\$59,967** and average income at **\$75,784** compared to the provincial figures of **\$74,287** and **\$97,856** respectively. Household income is **25.4%** lower than the provincial average.

Low Income Measure

17.4% of households live below the Low-Income Measure, after tax (14.4% in Ontario).



Population

10.8%

Individuals with Aboriginal Identity represent **10.8%** of North Bay's population compared to the provincial average of **2.8%**.

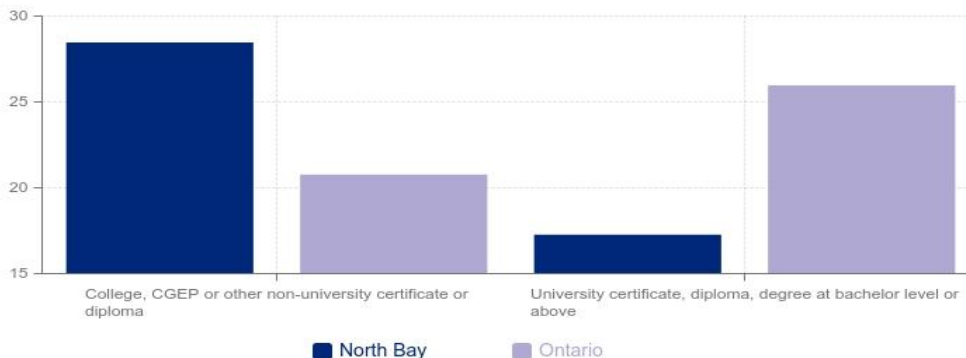


25%

of the North Bay population is bilingual (English and French) compared to the provincial average (**11.2%**).

EDUCATION

Fewer individuals in North Bay have a university certificate, diploma, degree at bachelor level or above (**17.3%**) compared to the provincial average (**26.0%**). In turn, a higher proportion of individuals in North Bay have a college, CGEP or other non-university certificate or diploma (**28.5%**) compared to the provincial average (**20.8%**).



Municipalities play a key role in maintaining community safety and well-being. On a daily basis, the City of North Bay helps ensure that citizens have access to clean water, maintained streets, effective wastewater systems, public transit, and clean parks and recreational spaces. North Bay is also innovative and has developed planning documents to lead the City to a sustainable and healthy future. Along with the City's Official Plan, over the last 10 years the City has developed the following plans:

- Growth Community Improvement Plan – City of North Bay (2020)
- City of North Bay Parks Master Plan (2020)
- City of North Bay Active Transportation Master Plan (2019)
- The City of North Bay Energy Conservation and Demand Management Plan (2019)
- North Bay Downtown Waterfront Master Plan (2017)
- City of North Bay Age-Friendly Community Action Plan (2016)
- Building a Creative Community: A Cultural Plan for North Bay (2011)

North Bay's Community Safety and Well-Being Plan

The Plan's vision shows a clear direction for the City of North Bay. It inspires the City of North Bay and its partners, and other stakeholders, to rise towards a common cause, and empowers them to take the necessary steps for fulfilling their part of the vision.

Vision

Children, youth, adults, and families will grow and thrive in a safe and healthy inclusive community.

The mission communicates the purpose of the Community Safety and Well-Being Plan, and its contribution to the citizens of North Bay. The mission will guide the City of North Bay and its partners, and other stakeholders, through the implementation of the Plan, while providing a common focus on the greater good.

Mission

Through leadership, adaptation and collaboration, the City of North Bay will build a safer healthier and inclusive community.

Outcomes

The CSWB Plan outcomes represent everything the Plan is to accomplish in reaching the above vision and mission. The outcomes have been set through provincial CSWB legislative requirements and the City of North Bay's strategic priorities and confirmed by the advisory committee:

- A reduction in harm and victimization for all members of the community.
- A decrease in the upward trends in demand for, and costs of, incident (emergency) responses.
- Local risk factors are identified, prioritized, and addressed before they escalate and reach critical levels.¹
- The response matches the need: individuals are receiving the right response at the right time by the right service provider.
- Risks to community safety in areas such as mental health, addiction, homelessness and housing, are addressed upstream.
- The demand for incident responses and acute care resources are more appropriately linked to emergencies where need is best addressed at that level.
- Community resources relevant to community safety and well-being are coordinated and aligned around person's needs at the earliest state of intervention.
- An implementation and evaluation framework is in place to implement the CSWB Plan and monitor, evaluate, and report on the Plan's progress and outcomes.

Advisory Committee

The existing Gateway Hub Executive Committee is the appointed Community Advisory Committee for North Bay's Community Safety and Well-Being Plan. The Advisory Committee was responsible for guiding the development of the Plan, determining the priorities of the Plan, establishing achievable outcomes and encouraging collaboration within the community. Ultimately, the Committee, with the direction of the City of North Bay, will steward the ongoing implementation of the Plan including evaluating and monitoring the Plan. Other duties include recommendations to the City Council for North Bay, for the following:

- Lead community engagement sessions to inform the evolution of the Plan.
- Performance measures as well as the schedule and processes used to implement them.
- Identification and championing of agencies/organizations and participants.
- Making annual reports to City Council related to implementation and evaluation of the Plan and in alignment with the municipal planning and budgeting cycle.
- Thinking about ways in which the underlying structures and systems currently in place can be improved to better enable service delivery.

The following member community agencies and organizations form the Gateway Hub Executive Committee:

- Children's Aid Society of Nipissing & Parry Sound
- City of North Bay
- Community Counselling Centre of Nipissing
- Conseil scolaire catholique Franco-Nord
- Crisis Centre North Bay
- District of Nipissing Social Services Administration Board

¹ Risk factors include systemic discrimination and social factors that contribute to crime, victimization, poverty, addiction, drug overdose, domestic violence, and suicide.

- HANDS the Family Help Network
- North East Local Health Integration Network
- Ministry of Children, Community and Social Services
- Near North District School Board
- Nipissing Mental Health Housing and Support Services
- Nipissing-Parry Sound Catholic District School Board
- North Bay Nurse Practitioner-Led Clinic
- North Bay Parry Sound District Health Unit
- North Bay Police Service
- North Bay Regional Health Centre
- Ontario Provincial Police

Research Framework and Methodology

The CSWB Planning and Research Framework (<https://www.northbay.ca/media/olvf3ebi/north-bay-cswb-planning-and-research-framework.pdf?v=637520870281900000>) provides details on the research approach and methodology utilized in the development of the North Bay CSWB Plan. As per the framework, primary data was collected through focus group consultations with organizations/ agencies that have a vested interest in community safety and well-being in North Bay and a public survey that provided the general public with an opportunity to voice their concerns surrounding the major themes of the CSWB Plan: safety, well-being, and inclusivity. In turn, secondary data was collected through public and open data sources and community/ unstructured data, and a literature review of reports, studies, and plans relevant to community safety and well-being in North Bay. An asset mapping exercise was also conducted to establish an understanding of the service network including existing bodies (planning tables, committees) and programs and strategy inventory. Once the data was collected and analyzed, sub-reports were developed for the specific research activity. These sub-reports, taken together, provide the main body of evidence to inform North Bay's CSWB Plan.

Literature Review

The literature review focused on research documents regarding community safety and well-being, municipal planning documents, and strategic plans. Documents were obtained through database searches, organization/agency websites, and through a survey to 72 organizations/ agencies who were identified as working in CSWB-related sectors and forming the core service network, and having an interest in the development of North Bay's CSWB Plan.

The research documents revealed that the top themes discussed, in order of frequency, were substance use and addictions, mental health, housing and homelessness, poverty/income, and violence (physical, emotional, etc.). Overall, research has shown that North Bay has a higher rate of opioid deaths, mood disorders, anxiety disorders, and suicides as compared to the Provincial average. Along with these higher rates is an increase in homelessness in the City coupled with long waitlists for addictions, mental health, and housing services. Research points to the need for additional withdrawal management, residential treatment, assessment and recovery services, family doctors and psychiatrists, transitional housing, and safe and affordable

housing. Lastly, lengthy wait times have also been noted as a major issue in North Bay for individuals to access the services and housing that they need.

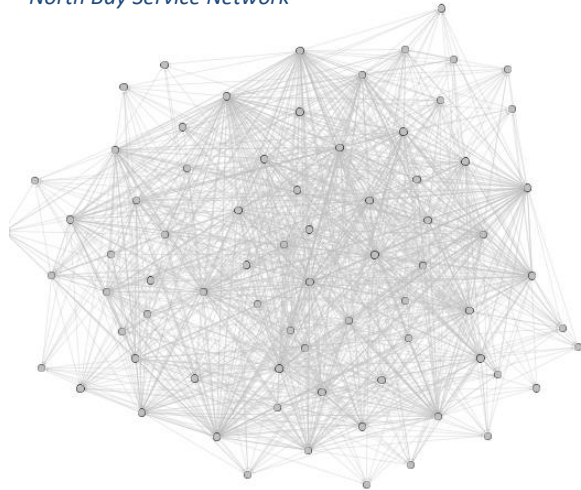
To access the completed literature review sub-report, please visit the following:

<https://www.northbay.ca/media/hi1dgtoj/sub-report-1-literature-review.pdf?v=637582441412970000>

Asset Mapping

Conducting a community asset mapping exercise involves identifying and mapping North Bay's CSWB service delivery network. This includes identifying the network organizations and the connections between them to gain a better understanding of the underlying network structure, and their programs/ services, strategies, and community planning tables/committees that are an important part of the structure. Combined with the information and data gathered from other areas of the planning including the literature review and community consultations, the asset mapping helps to identify community strengths and resources to build upon going forward, while also revealing any barriers, gaps, or duplications in the service network and opportunities for coordinating and aligning resources.

North Bay Service Network



The asset mapping has identified an extensive service network in North Bay comprised of about 70 organizations that deliver programs and services relevant to community safety and well-being. Based on survey results from participating organizations (62.5% of the network) the service network is highly integrated and complex, as evidenced by strong, multi-sectoral collaboration through a minimum of 1,475 connections between the various network organizations. Based on key network measures and statistics a number of the organizations occupy a central position in the network and have a strong influence on

the system. These organizations can play a large role in implementing the CSWB Plan in areas such as system coordination, information and knowledge sharing, and general communications.

The asset mapping also identified over 70 planning tables and committees in North Bay adding another layer of connections, relationships, and community planning activity that influences network performance and community outcomes. While many of these tables/ committees are already working on addressing safety and well-being issues in the community, the CSWP Plan offers a checkpoint to see if there are opportunities for improved coordination, adaptation and alignment between the tables/ committees to facilitate plan implementation and improve community outcomes.

While many of the organizations participating in the asset mapping survey are satisfied with the level of collaboration in the network some are not satisfied for reasons that include not having a

common agenda or purpose; a lack of system coordination; organizations operating in silos; a lack of accountability and measures of progress/ outcomes; a general lack of communications; and participation issues. These issues will need to be addressed in the implementation phase of the CSWB Plan to leverage the network to its full potential and maximize collective impact to achieve the Plan's outcomes.

To access the completed asset mapping sub-report, please visit the following:

<https://www.northbay.ca/media/f4uhchfx/sub-report-2-community-asset-mapping.pdf?v=637582441420330000>

Community Consultations

Consultations were a crucial part of the CSWB Plan methodology given that it obtained input on local issues as experienced by a variety of populations. Consultations were completed in order to assess the safety, health, and inclusion landscape in the community and to identify priority risks. The consultations also assisted in identifying strengths, weaknesses, opportunities, and threats locally. Nine focus groups were completed in April 2021 with service provider organizations/ agencies and focus group surveys were sent to those that could not attend. Additionally, in May 2021 a public survey was completed by approximately 3000 individuals who live and/or work in North Bay.

The research and consultations further confirmed a complex service network paired with multiple gaps. Ensuring that the service network is operating at its full potential is critical to ensuring that community risks are properly addressed. Risks have also started to emerge in the findings. Major community risks that have been identified include addictions, mental health, homelessness, and poverty/income – similar to those revealed in the literature review. Service navigation is at the forefront of the network's issues. Service recipients and providers need to know the services available in the community to properly refer and access the right services in a timely fashion. In addition, although the service network is highly integrated and complex, *gaps* were highlighted. Gaps identified range from access to family doctors/primary care to enhanced discharge planning from institutions with regular follow-ups. Strengths in the system were also identified. The Gateway Hub along with other major community planning tables were viewed as an excellent platform for collaboration and communication of new programs, program changes, and events. Another strength has been the increased collaboration and access to shared opportunities through remote meetings and virtual workshops. Increasing community education and awareness of community risks and of the work of the service network will be important going forward. Other opportunities include the creation of service hubs to access multiple services in one location and the exploration of the Housing First model.

The results of the public survey also assisted in the identification of community *risks*. Much like the focus group sessions, the major community risks identified include addictions, homelessness, mental health, and poverty/income. The results of the public survey also confirm safety concerns in North Bay. 83.7% of respondents noted that they have felt unsafe in North Bay. In terms of well-being, respondent self-assessments of mental health were generally lower than self-assessments of mental health. Overall, cost/affordability, program/service accessibility, and program/service not available were the primary barriers and issues for both physical and

mental health. Required and desired programs, supports, or services to improve physical health, in order of frequency of mention, are family doctors/physicians, gyms and fitness centres, recreational opportunities (i.e. biking, walking), and medical specialists. Required and desired mental health services and supports indicated by respondents are counselling, therapy (group and individual), psychiatrists and psychologists, and family doctors/physicians.

Finally, with regard to inclusivity, 43.5% of respondents feel a strong or very strong sense of belonging in North Bay. The most common response was “neither weak nor strong” with 35.8% of respondents selecting this option. Recommended programs, supports, and services to improve sense of belonging primarily focus around having more opportunities for social engagement, which respondents mention the need for more events and activities in the community. It is also important that the social engagement opportunities are inclusive for everyone to attend and participate.

To access the completed community consultations sub-report, please visit the following: <https://www.northbay.ca/media/vq1brxiy/sub-report-3-community-consultations.pdf?v=637589354093930000>

Community Safety and Well-Being Themes

Sense of safety, belonging, and well-being are all important factors to a safe and healthy community, As such, North Bay’s CSWB Plan is focused on three key themes: safety, well-being, and inclusivity.

Safety

Concerning safety, North Bay strives to foster a safe community. The Crime Severity Index (CSI) is the leading national measure to identify changes in the level of severity of crime in municipalities from year to year. In the index, all crimes are assigned a weight based on their seriousness. The level of seriousness is based on actual sentences handed down by the courts in all provinces and territories. North Bay’s current CSI is 100.29, which represents a 58.2% increase over the last 5-years of available indexes. North Bay’s CSI ranks 39.59 points higher than the provincial average and 20.84 points higher than the national average. In terms of the Violent Crime Severity Index (VCSI), North Bay’s VCSI is 97.43, which represents a 19.2% increase over the last 5-years of available indexes. North Bay also ranks 22.53 points higher than the provincial average and 7.76 points higher than the national average. Ultimately, when comparing CSI and VSCI, North Bay’s indexes are more comparable to major Northern Ontario cities as depicted in Table 1.

Table 1 - CSI and VSCI among major Northern Ontario cities (2019).

Geographical Area	CSI	Five-Year Change in CSI	VCSI	Five-Year Change in VCSI
North Bay	100.29	+58.2%	97.43	+19.2%
Ontario	60.70	+18.9%	74.90	+24.9%
Greater Sudbury	82.05	+38.2%	94.45	+46.5%

Sault Ste. Marie	107.20	+60.1%	87.45	+36.8%
Thunder Bay	104.88	+26.9%	149.77	+20.3%

The results of the CSWB Plan public survey also confirm safety concerns in North Bay. 83.7% of survey respondents noted that they have felt unsafe in North Bay. In terms of feeling unsafe, nearly 90% of respondents have felt unsafe downtown. Other notable areas selected are “my neighbourhood” (43.9%), “outdoor recreational space” (29.2%), and “public transit” (26.6%). The major noted reasons for feeling unsafe, based on the frequency of mentions, are drugs and addictions, homelessness, break-ins (sheds, cars, homes), unwanted followings, mental health, crime overall, and guns and shootings.

Well-Being

Well-being generally takes into account population health, mental health, and overall life satisfaction. In North Bay Parry Sound District Health Unit (NBPSDHU) Region, approximately one in every two individuals aged 12 years or older had very good or excellent perceived health. Conversely, in Ontario, nearly 60% indicated having very good or excellent perceived health. In terms of mental health, figures for the NBPSDHU Region were more closely aligned to the provincial figures. 71.7% of individuals aged 12 years or older in the NBPSDHU indicated having very good or excellent mental health while the province was slightly lower at 70.7%. Local life satisfaction figures also correspond with Ontario. About 9 in every 10 individuals aged 12 years or older in the NBPSDHU Region and Ontario reported being satisfied or very satisfied with life. Analyzing life satisfaction by age group reveals that individuals aged 12-17 years old have a notably lower life satisfaction in the NBPSDHU Region (88.4%) compared to the same age group in Ontario (94.3%).

The results of the CSWB Plan public survey further add to the sense of well-being. With regard to physical health, 88% of survey respondents feel that their physical health is excellent, very good, or good with the largest grouping characterizing their physical health as very good (40.5%). 12.1% assessed their physical health as fair or poor. Conversely, lower self-assessment ratings were uncovered for mental health. 78.3% of respondents feel that their mental health is excellent, very good, or good. Fair and poor mental health self-assessments account for 21.7% of respondents. This is a large increase in comparison to physical health.

Looking at supports and services, 57% of respondents indicated that they can access adequate supports and services for their physical health and well-being in North Bay while 36.1% of respondents feel that they can access adequate services and supports for their mental health. Figure 4 displays the main factors that respondents stated affecting their ability to access supports and services for their physical and mental health. Overall, cost/affordability, program/service accessibility, and program/service not available were the primary barriers and issues for both physical and mental health. It should be noted, barriers and issues to accessing physical and mental health supports and services were only asked of respondents that did not feel they could access adequate supports.

Inclusivity

Sense of belonging is often associated with inclusivity. Belonging is an emotional need to be accepted and supported by your community. In North Bay, approximately 54% of residents indicated having a strong sense of belonging to the community. This is markedly higher than the noted strong or very strong sense of belonging figures obtained through the CSWB Plan public survey. 43.5% of survey respondents felt a strong or very strong sense of belonging in North Bay. The most common response was “neither weak nor strong” with 35.8% of respondents selecting this option. A weak or very weak sense of belonging was selected by 20.7% of respondents. A low sense of belonging was commonly associated with not feeling safe in North Bay. Other reasons include the local government and leadership, a lack of activities and events, and concerns around the community being unwelcoming, cliquy, and not inclusive.

In terms of discrimination, nearly 30% of respondents indicated that they have experienced discrimination in North Bay (see Figure 1). Gender was the main reason noted for discrimination followed by age, race, sexual orientation, and disability. Another 26.1% of respondents have avoided seeking help or obtaining supports in North Bay due to embarrassment, fear, or presumed stigma. Of these respondents, 76.4% avoided mental health supports, 38% avoided financial support, and 33.5% avoided physical health supports.

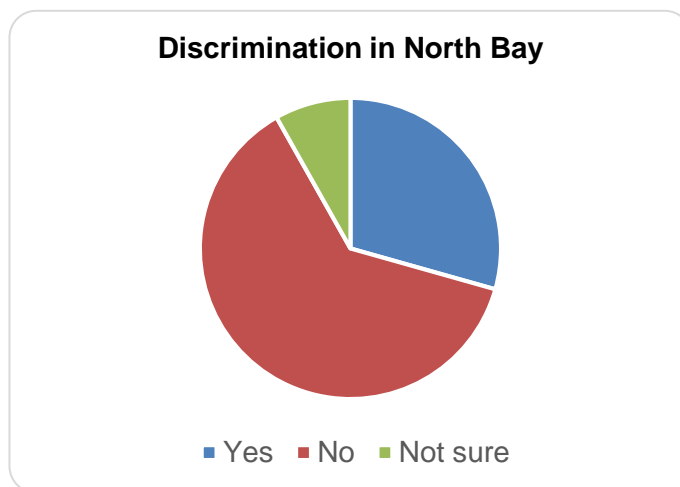


Figure 1 - Survey respondents' experience with discrimination. (n=2,645)

Community Safety and Well-Being Priorities

Four total priorities have been identified for North Bay's CSWB Plan. Three priorities are specifically associated with the top community safety and well-being risks while the final priority pertains to North Bay's service network. These priorities are intended to improve the efficiency and effectiveness of the service network and ultimately are aimed to mitigate and reduce community risks overall.

Service Network



Service network improvements were also uncovered through consultations and the asset mapping exercise. Specifically, improvements to system coordination and service navigation were most frequently noted.

The North Bay service network shows a high degree of collaboration, with the 45 organizations completing the asset mapping survey indicating that they collaborate with 1,475 other

organizations in total (33 organizations on average). As noted above, most of the organizations also make referrals and combined, refer clients and citizens to 1,213 other organizations (30 on average), or about 82.0% of the organizations that are generally collaborated with.

Adding further complexity to the service network are the numerous planning tables and committees that exist in North Bay. This adds another layer of system connections, relationships, and community planning activity that also influences network performance and community outcomes. After survey data standardization, 76 different planning tables and committees were identified. A majority (66.7% n= 52) of these planning bodies have a single organization as a member, as survey participants identified smaller committees, committees with a provincial, federal, or association focus, or committees that other survey respondents did not identify. On average, each organization participates on about four tables or committees although this number varies significantly from one organization to another.

Given the size and complexity of the service network, it follows suit that the mix of community programs/ services and strategies is equally busy. Approximately 145 programs/ services and over 100 community strategies addressing various aspects of safety and well-being have been identified in the survey. As with earlier reminders, these numbers should be viewed as a minimum as many organizations were unable to complete the survey. Additionally, some of the larger organizations have numerous programs and services that the survey respondent may not have fully captured. With regard to risks addressed by programs, the major risks include Health (20%), Housing and Homelessness (18%), Education (14%), General Well-Being (14%), Mental Health (14%), and Poverty/Income (13%). It is important to note, select programs address multiple risks.

The respondents completing the asset mapping survey on behalf of their respective organizations were also asked if they are satisfied with the level of community collaboration around matters pertaining to community safety and well-being in North Bay.

It can be noted from the side table that 60.0% indicated they are satisfied with the level of collaboration while 26.6% are not satisfied and 13.3% are not sure.

Satisfied with collaboration	
Yes	27
No	12
Not sure	6
Total	45

Respondents that were unsatisfied with the level of collaboration noted the following main reasons for not being satisfied:

- No common agenda/purpose
- Lack of coordination
- Organizations operating in silos
- Lack of accountability and measures of progress, outcomes
- Lack of communications
- Participation issues

In the focus group consultations, collaboration was viewed as a strength in the community. Participants acknowledged service providers' collaboration and commitment that can be exemplified by providers routinely coming together to find timely solutions to assist clients in crisis. Multi-sectoral planning tables and committees were viewed as excellent platforms for

collaboration. Tables that were often mentioned include the Gateway Hub and the Nipissing District Housing and Homelessness Partnership. These tables and committees are seen as an asset in the community because they are a way for service providers to collaborate, learn about services and programs offered, and foster partnerships. Another strength in the community has emerged throughout the COVID-19 pandemic. This strength is embracing the virtual world for remote service delivery and collaboration. Participants have mentioned that in many ways collaboration has increased and improved as a result of online platforms making it simpler to connect. In addition, participants have also noticed higher participation rates with online service delivery.

Although collaboration was identified as a strength, some participants mentioned concerns surrounding the silo of sectors and service providers. Participants added that it can also be a challenge to meaningfully participate. This was attributed to the lack of resources and increased workloads with staff burnout and the overall feeling of organizational busyness as an inefficiency. Lastly, participants noted that there is confusion regarding priorities in the community, which can be observed in the varying priorities across planning tables and committees.

Focus group participants noted several opportunities surrounding improvements to collaboration. Community education and awareness of the work completed and community risks were highlighted in multiple sessions as a way to improve collaborations and relationships within the community at large. Concerning service network collaborations, a need was expressed for more strategic tables and committees to avoid meeting overload. This corresponds with the opportunity for a review of existing tables and committees. Many opportunities were also expressed surrounding improved communications. A need was expressed for a streamlined form of communication across sectors to better inform the network organizations/ agencies of changes to programs, new programs, events, and any other relevant information that would be of interest to the network.

In terms of improvements to service navigation, the creation of a service hub model was widely discussed in sessions. A service hub would serve as a single-point access for multiple services. This would mitigate people who use services having to go to a multitude of service providers to access the services they need. Participants also discussed how to improve service navigation. Overall, participants acknowledged the need for multiple levels of service navigation improvements. Service directories were noted as a need and this should come in the form of a website and/or phone application, a telephone line, and a paper-form service directory. The multiple service director options take into account people that use services who cannot access to internet or telephone. Finally, a need was expressed for in-person service navigation. This could take the form of a service kiosk and would serve the overall service network.

Addictions



Addictions and substance use issues was the top research theme uncovered in the literature review and was the top community risk identified in both the focus group consultations and the public survey.

The community of North Bay has recognized the need for increased addiction programming and services as evidenced through many local reports and studies. In 2019/20, there was an increase in service use with regards to alcohol and drug assessment compared to previous years, alluding to the need for more services to continue to meet the needs of people who use services (Community Counselling Centre of Nipissing, 2019). Notably, there are many waitlists for addiction services in North Bay; both the addictions residential treatment beds on King St. and the North Bay Recovery Home's residential beds are waitlisted (Ontario Health Coalition, 2020). The literature reviewed frequently identified substance use and addictions as a barrier to finding housing and a top-three risk factor locally (District of Nipissing Social Services Administration Board 2019; Gateway Hub, 2018).

To continue, the opioid epidemic in Ontario has reached new heights; from January 2019 to September 2019, one person in Ontario died every 4.7 hours from opioids (Ontario Provincial Police, 2020). According to the Ontario Provincial Police (2019), opioid-related incidents in North Eastern Ontario rose to 22% in 2019 from 9% in 2018. Similarly, in the North Bay Parry Sound region, the rate of opioid-related emergency department visits among the 25 to 44 years of age demographic was notably higher than the provincial rate between 2013 and 2017 (North Bay Parry Sound District Health Unit, 2018). Thus, providing evidence to support the opioid pandemic's severe impact on the North Bay region.

The literature also supports concerns from the public around substance use and addictions. The North Bay Police Service issued a survey to the public and the results indicate the issue of drugs and drug-related crimes is a predominant concern among community members (Oraclepoll Research Limited, 2015). According to the Mayor's Roundtable report (2020), when compared to the provincial average, Nipissing District has higher levels of smoking and alcohol use than Ontario. Similarly and based on data that is available, students in the North Bay Parry Sound District used more illegal drugs in 2011 than the provincial average (Saad, 2013). Notably, students in the North Bay Parry Sound District also consumed significantly more alcohol (64.2%) than the provincial average (54.9%) (Saad, 2013). Additionally, in the North Bay Parry Sound region, a higher percentage of male students reported using cannabis in the last year (2010/11 & 2014/15 combined) compared to male students in other northern regions and Ontario (North Bay Parry Sound District Health Unit, 2017). Thus, it is evident to recognize that Nipissing District and the City of North Bay have high rates of substance use and addictions, especially when compared to the provincial average.

Within the literature, there were some suggestions to address substance use and addictions in the community. Lentinello & Rush (2018) recommended a broad systems approach to achieve a mezzo-level impact. Lentinello & Rush (2018) also noted that in order to improve accessibility and effectiveness of services for people experiencing substance use problems, further collaboration across multiple stakeholders is necessary. Moreover, an emphasis was placed on the need for a balance of evidence-informed psychosocial and clinical interventions when working with individuals with substance use problems (Lentinello & Rush, 2018). From a strengths-based perspective, there are several strong networks and services in the Nipissing District that help identify and support those in the community using substances. Lentinello & Rush (2018) identified several existing services in the Nipissing District that support people who use services with substance-related issues, including but not limited to: withdrawal

management, residential treatment, and community assessment and recovery service. However, in the same breath, Rush and Lentinello also note that the strong collaboration and partnerships “do not, in fact, translate into well-defined community care pathways across providers”.

It is important to note, the literature findings correlate with local newspaper coverage highlighting significant substance use and addictions within Nipissing District and in North Bay. Sixty-three news articles were examined from local newspapers and related extensively to the theme of substance use and addictions in North Bay over the last year. Many articles addressed the current opioid crisis in the city and drug-related crimes.

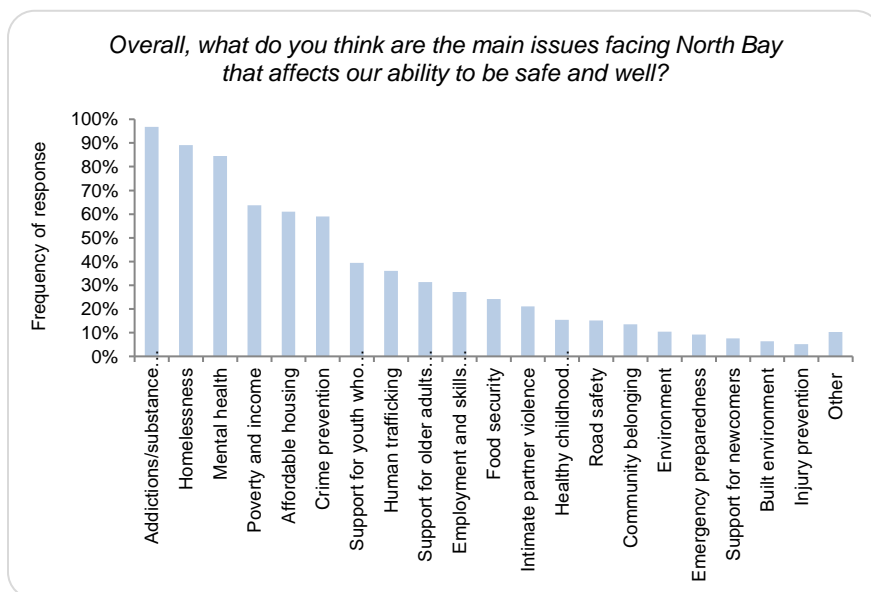
Addictions was the most identified risk and was stated in 9 of 10 focus group sessions. Strengths related to addictions were needle drop boxes, which are seen as a positive step towards the safe disposal of needles. Naloxone kits and training were another noted strength. The kits being in the hands of more service providers and emergency responders assists to reverse opioid overdoses in the community. The Rapid Access Addiction Medicine (RAAM) Clinic in North Bay was also viewed as a positive as it assists individuals in a non-judgemental manner to access the specialized addiction medicine they require.

In terms of weaknesses, participants noted weaknesses and gaps in mental health and addiction services. Specifically, weaknesses include service capacity, length of addiction programs, timely access to mental health and addiction programs due to lengthy waitlists, the need for additional psychiatric care, and an improved needle disposal program. Participants also added that police are conducting work outside of their typical duty (i.e. mental health and addictions) and that this was a concern. The impact of COVID-19 has also had a negative impact on addictions. COVID-19 has affected the general population through negative effects in

mental health and happiness and a rise in addictions and substance use.

Addictions/substance misuse was the most frequently mentioned issue affecting community safety and well-being in North Bay within the public survey. The major noted reasons for addictions affecting safety and wellness in the city are drug use, the finding of needles around the city, and unpleasant

behaviours associated with addictions. The reference to *drugs and addictions* appears most frequently in the survey comments section as well. The respondents recognize addictions as a major problem and issue in the city with negative impacts in other areas such as safety, health, crime, the physical environment, and local business.



Homelessness



Homelessness and often associated with housing by nature was the third most common research theme uncovered in the literature review and was the second most frequently identified community risk in both the focus group consultations and the public survey.

Homelessness in North Bay is on the rise and is increasing in complexity. According to the 2020 Point-in-Time (PiT) Homelessness Count, 242 individuals were counted as homeless and completed surveys representing a 90.6% increase over 2018 PiT Count figures (DNSSAB, 2020b. Note: any difference in PiT Count methodology needs to be considered when making comparisons between periods/counts).

A gap routinely identified in the literature is the lack of transitional housing in North Bay. As per the Mayor's Roundtable Report on Mental Health and Addictions (2020), North Bay requires a Transitional Housing Stabilization Centre, which includes among other vital services, short-term transitional housing. Transitional housing has been identified as a critical missing component to the City's housing continuum because this form of housing includes housing support services that ultimately teach individuals life skills aimed at making the transition to other forms of housing easier. Investments in transitional housing are also noted in the Nipissing District Housing and Homelessness Plan (2020a) along with the North Bay Indigenous Friendship Centre Suswin Report (2020). Invariably, the creation of new transitional housing through the Gateway House, Indigenous Friendship Centre Suswin and Native People of Nipissing Housing Corporation housing projects will start to close this formidable gap.

The lack of safe affordable housing has also been identified as a major problem facing North Bay. The lack of safe affordable housing has also proven to be a barrier to employment and connecting with the labour market (DNSSAB, 2019d). Housing issues are also exacerbated by lengthy wait-lists for subsidized housing and the unwillingness of landlords to rent units to youth and/or marginalized populations (DNSSAB, 2019c). Housing affordability is further impacting newcomers in North Bay as research shows that this population group is more likely than other residents to spend over 30% of their gross income on housing (Brown & Armenakyan, 2020).

Concerning Indigenous populations, multiple research documents point to the disproportional amount of Indigenous people in the Nipissing District homelessness population. Indigenous Peoples represent approximately 14% of the District's population, however, make up 42% of the homeless population that was surveyed in the last Point-in-Time Count (DNSSAB, 2020b). These figures are being seen across northeastern Ontario and are believed to be linked to chronic underfunding of housing solutions for Indigenous Peoples (Kauppi et al., 2015). Additionally, discrimination and stigma were noted as the second largest barrier to finding housing for people experiencing homelessness in the Nipissing District (DNSSAB, 2020b).

The COVID-19 pandemic also affected and hi-lighted gaps for the homelessness. Not only have shelter resources been strained as a result of the need for increased screening and sanitation but warming centres and low-barrier shelters have emerged due to the need for additional socially distanced shelter beds. A total of five sites at one point or another served as a low-barrier shelter and/or warming centre in 2020 in North Bay. Funding pressures and site

suitability were the primary reasons for the multiple site changes. As per the North Bay Police Services report (2020), the low-barrier shelter operations accounted for a total of 364 police incidents from January 1st to September 23rd, 2020, which would be the highest for a single address in the city if the low-barrier shelter had operated at a single site during that period. This represents an average of 1.4 police incidents per day related to the low-barrier shelter. The pandemic has also resulted in an economic recession that researchers anticipate will lead to an increase in homelessness that could be felt up to five years from the onset of the recession (Falvo, 2020).

Housing and especially homelessness continue to dominate local news articles. In fact, over the last year, a total of 71 articles were published by local newspapers about housing and homelessness. The majority of the articles in 2020 dealt with the impact of COVID-19 on homelessness and the additional homeless shelter beds and sites that spurred as a result of the pandemic and the growing concern for homelessness. Moreover, articles also focused on the costs associated with shelter operations and the lack of shelter space in North Bay.

Homelessness was also noted in at least half of the focus group sessions as a community risk in North Bay. Participants noted the need for additional affordable and supportive housing as a step towards reducing and mitigating homelessness. Specifically, participants mentioned that there is insufficient safe and affordable housing stock in North Bay as exemplified by long waiting lists for rent-geared-to-income (RGI) and affordable market housing. Along with more affordable housing was also the need for more supportive and assisted forms of housing. A noted threat from the focus groups was the understanding of rental affordability through the lens of landlords who operate as for-profit businesses. Although affordable housing is needed, landlords also need to receive a return on their investment.

In terms of opportunities, participants also discussed improvements to the housing and homelessness system in the City. The Housing First model was mentioned in multiple sessions as a model to explore further and implement in North Bay. Examples from Finland and Medicine Hat were noted as successes to build off of. The development of additional transitional housing and supportive housing units was another key opportunity presented. This would assist with diversifying the housing stock and may assist in elevating pressures on the RGI and market housing waiting lists.

To continue, the public survey revealed homelessness as the second-highest risk to community safety and well-being in North Bay. Survey respondents noted feeling unsafe due to the (perceived) increase in homelessness in the city and the negative impact it is having on the city and residents. The respondents also mention homelessness relatively frequently in the survey comments and often in conjunction with their comments concerning addictions and mental illness. Additional concerns around shelter locations and services, and emerging 'tent cities' are also noted in the comments, as is a general reference to a lack of affordable housing in this context.

Mental Health



Mental health and mental illness was the second most common research theme uncovered in the literature review and was the third most frequently identified community risk in both the focus group consultations and the public survey.

Mental health was discussed in 30% of the literature reviewed. As noted in the Mayor's Roundtable report (2020) the Nipissing District has higher rates for levels of mood disorders, anxiety disorders, and suicide than the provincial average. In turn, the North Bay community has recognized the need for more mental health supports and has prioritized the need for an increase in access to 24/7 mental health supports outside of a hospital setting (Mayor's Roundtable 2020). Moreover, in 2020, The Gateway Hub Table identified mental health and cognitive functioning as the top risk high-level risk priority (Gateway Hub, 2020). Similarly, the North Bay Police Service (2018) note that out of the approximate 30,000 calls the North Bay Police Service receives a year; 20% of the calls are primarily related to mental health and addictions. Thus, the literature confirms that mental health is a prominent and vastly growing issue in the North Bay region.

In terms of children's mental health, approximately 1 out of 4 hospital crisis calls are responded to by Community Mental Health child and family therapists (Mayor's Roundtable, 2020). Although crisis calls represent a need, capacity is required for timely treatment to mitigate and reduce risks and the potential for family breakdown. Similarly, the North Bay Parry Sound District Health Unit have indicated that 1 out of 4 students in the region wanted to speak with someone about a mental health concern but did not know how to access supports (North Bay Parry Sound District Health Unit, 2017a). The difficulty in navigating the local service system continues as it was more recently identified in the network mapping and focus groups (see the sub-reports also). There must be equal access to health services and social supports given they are important determinants of health (Mayor's Roundtable, 2020). This illustrates that not only are adults experiencing mental health-related concerns in the region but children and adolescents are also experiencing these same concerns and not receiving adequate access to services. This is likely related to the large waitlists and wait times for mental health services. Children's Mental Health Ontario (2020) reports that 28,000 children and youth (under 18) are on waitlists for mental health and addiction services. In Nipissing, Hands the Family Help Network reported 170 children and youth are waitlisted for mental health services (Lee, 2020). The Gateway Hub (2017) recommends to better meet the needs of youth in the region; increased collaboration and strengthened partnerships between all children and youth services in the region is necessary.

Kauppi, Pallard, & Shaikh (2015) did a study on mental illness and homelessness in North Bay, Sudbury, and Timmins respectfully. Their findings show of the participants in the study; 34% of those experiencing absolute homelessness and 46% of those at risk of homelessness suffered from mental illness and other health-related problems in the past year. Thus, indicating the high correlation between mental health and homelessness. The Mayor's Roundtable (2020) indicates that it is a circular pattern where mental health can put housing at risk, and a lack of housing exacerbates mental health issues. Moreover, The Gateway Hub (2017) notes that a lack of timely assessment can result in unintentional harm for people who use services and can cause

a great deal of dissatisfaction for both the provider and people who use the services. Similarly, the District of Nipissing Social Services Administration Board (2019) has cited various gaps in the Nipissing District related to a shortage of family doctors and psychiatrists and wait times to access mental health treatment. A prominent suggestion would be to improve timely psychiatric assessment for people who use services in North Bay (Gateway Hub, 2017). From a strengths-based perspective, there are many supports and services in North Bay that assist individuals with their mental health and wellbeing. According to the Ontario Health Coalition (2020), North Bay has a mix of critically important mental health and concurrent disorder services.

The literature findings correspond with local newspaper coverage regarding mental health in Nipissing District and North Bay. The review also looked at 34 news articles from local newspapers that exclusively explored mental health issues in North Bay over the last year. The majority of articles discussed the local impact of the COVID-19 pandemic on mental health.

Mental health was also noted in at least half of the focus group sessions. As previously stated under addictions, focus group participants noted a weakness in mental health and addiction services. Specifically, weaknesses include service capacity, timely access to mental health and addiction programs due to lengthy waitlists, and the need for additional psychiatric care. In terms of policing, participants expressed a need for more mobile crisis teams and ensuring that police officers have mental health and social work training. COVID-19 has also exacerbated mental health concerns. The pandemic was noted as having an impact on children due to remote learning and disengagement from school. Negative impacts of remote learning include lowering children's mental health, heightened stress for working parents, and more teens disengaging from school altogether. COVID-19 has also affected the general population through negative effects on mental health and happiness.

The public survey revealed that mental health was the third most frequently stated issue affecting safety and well-being in North Bay. The survey also revealed lower self-assessment ratings for mental health. As per Figure 2, 78.3% of respondents feel that their mental health is excellent, very good, or good. Fair and poor mental health self-assessments account for 21.7% of respondents. Conversely, physical health self-assessments indicated that 88% of respondents feel that their physical health is excellent, very good, or good. Looking at supports and services, 57% of respondents indicated that they can access adequate supports and services for their physical health and well-being in North Bay while 36.1% of respondents feel that they can access adequate services and supports for their mental health. Overall,

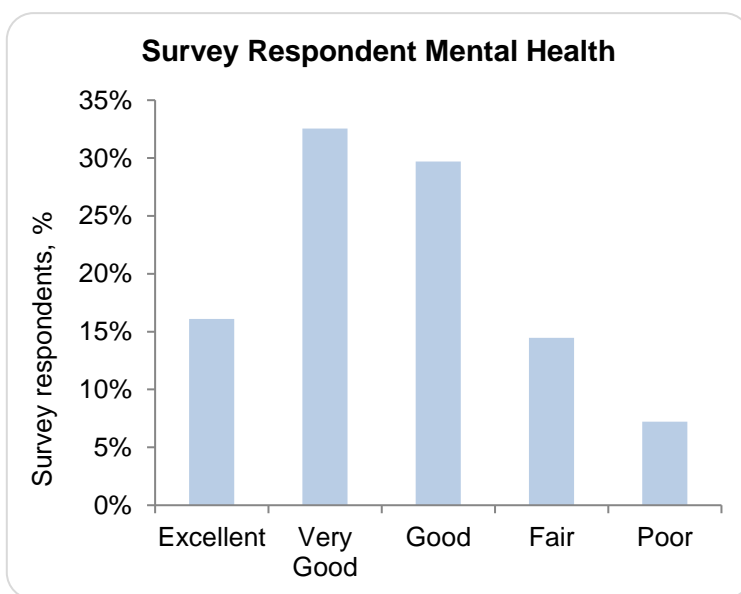


Figure 2 - Survey respondent self-assessed mental health. (n=2,704)

cost/affordability, program/service accessibility, and program/service not available were the primary barriers and issues for both physical and mental health.

Respondents also indicated if they required any programs, supports, or services to improve their physical and/or mental health. 29.7% of respondents stated that they require physical health supports and services while 23.8% of respondents require mental health supports and services. Interestingly, approximately 30% of respondents were not sure if they required physical and/or mental health services and supports. Those requiring programs and services indicate they need family doctors/physicians; medical specialists; affordable access to physiotherapy; therapists; chiropractors; counselling; (more mental health programs and services were also mentioned in this physical health section); increased access to recreational and physical activity, both indoors and outdoors (recreational centres, gyms, fitness centres, tennis and basketball courts, pools, running tracks, walking/hiking/ bike trails, parks, greenspace); and police presence and programs. Respondents added that it is essential that physical health services and recreation and physical activities are affordable.

The Plan

The Plan is divided into 4 priorities, 15 strategies, and 56 action items. The priorities are based on the top three identified community risks with another priority linked exclusively to service network improvements. Each priority has a set of specific outcomes and measures. The outcomes are primarily focused on risk reduction and lowering the demand for incident response related to the identified community risks. The performance measures, in turn, are known databases and sources that will provide information and data to measure the level of impact of the actions taken in meeting the outcomes.



Each priority is then divided into select strategies as identified through research and consultations. The strategies are then further broken into specific action items. The action items contain timelines, output indicators, and partners needed. Action items contained in the CSWB Plan are either short-term representing action items that can be completed within the Plan's first year or medium-term representing action items that are estimated to take longer to implement (1-3 years). It is important to note, action item progress will likely depend on several variables including the availability of resources, partner collaboration, and system coordination to name a few. The action items also contain output indicators. Output indicators are the specific outputs provided by completing the action item. Finally, action items and strategies include partners needed for successful implementation/ completion. The partners listed are often broad and sector-based. Where possible, specific partners were listed as shown in the table. This is not an exhaustive list and other partners will be brought into the Plan as needed and based on available resources.

On an annual basis, progress on the Plan should be reviewed and reported to the public. Additionally, the plan's performance and outcomes need to be monitored and evaluated through

a type of report card and/or dashboards that are publicly available on the CSWB website. As a living document, the CSWB Plan should also be amended and updated over time to reflect the current safety and well-being priorities in North Bay.

CSWB Priority 1: Service Network



Outcomes:

- Community resources are coordinated and aligned to CSWB Plan.
- The response matches the need: individuals are receiving the right response at the right time by the right service provider.
- Clients can navigate and access services easier and more effectively.
- Increased level of satisfaction of collaboration by the service network organizations/agencies.

Performance Measures:

- Improved service network coordination.
- Decreased non-crime related incidence response.
- Local police, emergency medical services, and fire services data.

Strategy 1: Ensure the service system and planning tables/ committees are coordinated and operating efficiently and effectively.

Actions	Timelines	Output Indicators	Partners Needed
Through the Gateway Hub Executive Committee, service system organizations adopt a common purpose and vision for community safety and well-being in North Bay.	1 Year	<ul style="list-style-type: none"> • Alignment of purpose, resources, and outcomes • Improved system coordination 	<ul style="list-style-type: none"> • Service network
Conduct a review of the existing planning tables and committees, which includes: <ul style="list-style-type: none"> • Membership • Purpose/mandate(s) • Outcomes 	1 Year	<ul style="list-style-type: none"> • Identification of gaps and duplications in work • Identification of coordination opportunities 	
Explore the continued use of video conferencing and virtual connection for collaboration beyond the end of the pandemic.	1 Year	<ul style="list-style-type: none"> • Video conferencing options available 	

Strategy 2: Create service directories that meet the needs of all citizens and improves service system navigation.

Actions	Timelines	Output Indicators	Partners Needed
Determine a lead agency who will ensure that the various service directories are updated and consistent.	1 Year	<ul style="list-style-type: none"> • Identification of a lead agency 	<ul style="list-style-type: none"> • Service network
Enhance and regularly update the Nipissing Service Collaborative website (the NSC directory could	1 Year	<ul style="list-style-type: none"> • Up to date online service directory 	

also be incorporated into an information kiosk – see below).			
Develop and regularly maintain a hard-copy service directory.	1 Year	<ul style="list-style-type: none"> • Up to date hard-copy service directory 	
Explore the creation of a mobile app service directory.	1-3 Years	<ul style="list-style-type: none"> • Up to date mobile phone service directory 	
Explore the creation of a telephone service directory.	1-3 Years	<ul style="list-style-type: none"> • Up to date telephone service directory 	
Explore the creation of a kiosk-style directory service to provide in-person service navigation at various locations in the city (e.g. in malls).	1-3 Years	<ul style="list-style-type: none"> • Up to date in-person service directory 	
Promote all service directories in the community.	1 Year	<ul style="list-style-type: none"> • Service network promotional efforts 	

Strategy 3: Increase community education and awareness around safety and well-being in the community.

Actions	Timelines	Output Indicators	Partners Needed
Develop a communication strategy for communicating with the media and public on community safety and well-being (this includes reducing stigma and misinformation). The strategy should include the following components:	1 Year	<ul style="list-style-type: none"> • A communications strategy. • Educational campaigns. • Media coverage. 	<ul style="list-style-type: none"> • Identify organizations in the service network to take this lead.
1. Increase community awareness of the services available in the community and link the public to the service directories and information kiosks (see strategy #2)	1 Year	<ul style="list-style-type: none"> • Education sessions. • Media coverage. 	
2. Promote “good news stories” of local service network successes.	1 Year	<ul style="list-style-type: none"> • Sentiment score/rank. • Positive media coverage. 	
3. Provide public reporting on the progress of the CSWB Plan through report cards and interactive dashboards available on the CSWB website.	1 Year	<ul style="list-style-type: none"> • The development of statistical dashboards with CSWB indicators and other relevant information and data. 	<ul style="list-style-type: none"> • Analysts, statisticians, and IT staff from network organizations.

Strategy 4: Enhance service and program delivery throughout the service network.

Actions	Timelines	Output Indicators	Partners Needed
Explore opportunities for service centralization and shared service delivery following a hub or wrap-around model. This could include a	1-3 Years	<ul style="list-style-type: none"> • Single-point access for services. • Partnership(s). • Funding source. 	<ul style="list-style-type: none"> • Implementation Committee • Service network • Nurture North

centralized intake and common referral process.			<ul style="list-style-type: none"> • Nipissing Mental Health Housing and Support Services • Hands The Family Health Network • Others as identified
Building on the planning work to date, systematically review all programs, services, and supports offered in the community with a view of improving service delivery for clients and citizens.	1-3 Years	<ul style="list-style-type: none"> • Similar programs are aligned and coordinated and gaps in services are filled. 	
Enable or expand existing data sharing agreements between network organizations so information, data, and knowledge can be shared and acted on collectively.	1-3 Years	<ul style="list-style-type: none"> • Data sharing agreements are in place and CSWB data (for example, indicator data) is being collected across the network and housed in a central data repository for analysis to inform, planning, service delivery, and reporting. 	
With the above agreements in place, share 'by name' lists between organizations so the proper interventions and supports/ services can be put in place.	1-3 Years	<ul style="list-style-type: none"> • Vulnerable and hard-to-serve populations are being served effectively through coordinated and collective planning and service delivery. 	

CSWB Priority 2: Addictions



Outcomes:

- Addictions response matches the need: individuals are receiving the right response at the right time by the right service provider.
- The demand for incident responses and acute care resources is reduced relative to the supports provided at the onset of addictions.
- Risks to community safety in the area of addictions are addressed without the use of emergency resources where possible.

Performance Measures:

- Addiction program waitlists.
- Nipissing Parry Sound Overdose Incident Report.
- Hospital/ ER data.
- Local police, emergency medical services, and fire services data.

Strategy 1: Enhance addiction prevention and treatment programs, supports, and services and ensure these are culturally appropriate and inclusive.

Actions	Timelines	Output Indicators	Partners Needed
Implement longer-term addiction programs.	1 Year	<ul style="list-style-type: none"> • Decreased wait times for addictions programs, supports, and services. • Decreased drug overdose and mortality. • Decreased incidence response related to addictions and substance use. 	<ul style="list-style-type: none"> • Health sector • Addictions service providers • Mental health service providers • Others as identified
Expand the capacity of addiction services including the recruitment and training of staff.	1 Year		
Where addictions and mental health are presented together, ensure there is coordinated case-management between addictions and mental health service providers.	1 Year		
Link individuals that have been discharged from addiction treatment programs to ongoing support programs.	1 Year		

Strategy 2: Implement additional harm reduction programs.

Actions	Timelines	Output Indicators	Partners Needed
Align the addictions harm reduction efforts with the research being completed.	1 Year	<ul style="list-style-type: none"> • Decreased drug overdose and mortality. • Decreased incidence response related to addictions and substance use. 	<ul style="list-style-type: none"> • Health sector • Addictions service providers • North Bay Parry Sound District Health Unit
Consider implementing the harm reduction recommendations outlined in the Consultant's future report based on the research and work currently being undertaken.	1 Year		

Explore the implementation of a safer opioid supply program.	1-3 Years		<ul style="list-style-type: none"> • North Bay Police Service • OPP • Others as identified
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Strategy 3: Build on and improve existing needle syringe programs.

Actions	Timelines	Output Indicators	Partners Needed
Determine a lead agency or lead agencies for the needle syringe program.	1 Year	<ul style="list-style-type: none"> • Reduced visibility of needles. • Increased public sense of safety. • Decreased incidence response related to addictions and substance use. 	<ul style="list-style-type: none"> • Health sector • Addictions service providers • North Bay Parry Sound District Health Unit • Others as identified
Increase the number of needle syringe drop boxes throughout the city.	1 Year		
Provide outreach services for needle syringe pick-up.	1 Year		
Offer education sessions in the community surrounding the proper disposal of needles/syringes.	1 Year		

Strategy 4: Create a nursing street outreach program.

Actions	Timelines	Output Indicators	Partners Needed
Explore program details surrounding nursing street outreach with the view of implementation.	1 Year	<ul style="list-style-type: none"> • Increased sense of physical and mental health. • Decreased drug overdose and mortality. • Decreased incidence response related to addictions and substance use. 	<ul style="list-style-type: none"> • Health sector • Addictions service providers • EMS Community Paramedicine • Others as identified
Establish nursing street outreach program documentation and secure resources.	1 Year		
Implement a nursing street outreach program that could include wellness checks. Street nurses would have naloxone kits and be linked with the local needle syringe program.	1 Year		
Offer street health clinics.	1 Year		

CSWB Priority 3: Homelessness



Outcomes:

- Homelessness response matches the need: individuals are receiving the right response at the right time by the right service provider.
- The demand for incident responses and acute care resources is reduced relative to the supports provided at the onset of homelessness.
- Risks to community safety in the area of homelessness are addressed without the use of emergency resources where possible.
- Services are in place to support homeless to access permanent housing and life stabilization.

Performance Measures:

- Point-in-Time Counts/Homeless Enumeration.
- Emergency shelter data, supply equals demand for shelter.
- Hospital/ ER data, Local police, emergency medical services, and fire services data.
- Homeless Individuals and Families Information System (HIFIS).

Strategy 1: Discover and implement a community approach to successfully house vulnerable individuals with a focus on cultural appropriateness and inclusivity.

Actions	Timelines	Output Indicators	Partners Needed
Review various housing approaches including Housing First to determine the best approach to implement in North Bay. This would include identifying the existing housing stock that could be dedicated for the selected approach.	1 Year	<ul style="list-style-type: none"> • Decreased homelessness. • Improved access to housing for the homeless population. • Increased linkages to supports and services required by the homeless population. 	<ul style="list-style-type: none"> • Housing and homelessness sector • Support and outreach service providers • Housing providers (non-profit and private landlords) • Others as identified
Establish program documentation and secure resources.	1 Year		
Implement a pilot program for the selected community approach.	1 Year		
Implement a permanent program (if successful).	1-3 Years		

Strategy 2: Increase the supply of transitional and supportive housing units to meet the demand.

Actions	Timelines	Output Indicators	Partners Needed
Conduct a needs assessment to determine the amount of transitional and supportive housing units needed (supply & demand).	1 Year	<ul style="list-style-type: none"> • Decreased homelessness. 	<ul style="list-style-type: none"> • Housing and homelessness sector

Monitor and evaluate the three transitional housing projects currently under development (Gateway House, Suswin Village, NPON).	1 Year	<ul style="list-style-type: none"> Improved access to housing for the homeless population. Increased linkages to supports and services required by the homeless population. 	<ul style="list-style-type: none"> Transitional and supportive housing providers City of North Bay District of Nipissing Social Services Administration Board North Bay Indigenous Friendship Centre Native People of Nipissing (NPON) Others as identified
Explore innovative funding opportunities and creative partnerships to support the development of additional transitional and supportive housing units (as needed).	1 Year		

Strategy 3: Increase the supply of affordable housing units to meet the demand.

Actions	Timelines	Output Indicators	Partners Needed
Conduct a needs assessment to determine the size and types of affordable housing needed.	1 Year	<ul style="list-style-type: none"> Decreased homelessness. Improved access to housing for the homeless population. 	<ul style="list-style-type: none"> Housing and homelessness sector Housing Providers (non-profit and private landlords) City of North Bay Others as identified
Increase rental subsidies to enhance affordability in the private market.	1-3 Years		
Explore innovative funding opportunities and creative partnerships to support the development of additional affordable housing units (as needed).	1 Year		

Strategy 4: Expand and coordinate outreach programs.

Actions	Timelines	Output Indicators	Partners Needed
Review current outreach programs in the community (staff, purpose, target population, hours of operation, etc.).	1 Year	<ul style="list-style-type: none"> Decreased homelessness. Improved access to housing for the homeless population. Increased linkages to supports and services required by the homeless population. 	<ul style="list-style-type: none"> Housing and homelessness sector Outreach service providers Others as identified
Explore opportunities to further increase outreach services to meet identified service gaps.	1-3 Years		
Coordinate day programming for homeless and low-income individuals and families.	1 Year		

CSWB Priority 4: Mental Health



Outcomes:

- Mental health response matches the need: individuals are receiving the right response at the right time by the right service provider.
- The demand for incident responses and acute care resources is reduced relative to the supports provided at the onset of mental health.
- Risks to community safety in the area of mental health are addressed without the use of emergency resources where possible.

Performance Measures:

- Mental health program waitlists.
- Psychiatric care waitlists.
- Primary care waitlists.
- Local police, emergency medical services, and fire services data.

Strategy 1: Enhance access to mental health programs, supports, and services and ensure these are culturally appropriate and inclusive.

Actions	Timelines	Output Indicators	Partners Needed
Expand the capacity of mental health services for adults including the recruitment and training of staff.	1 Year	<ul style="list-style-type: none"> • Decreased wait times for mental health programs, supports, and services. • Decreased suicide rate. • Decreased incidence response related to mental health. • Increased client/ community satisfaction of mental health services. 	<ul style="list-style-type: none"> • Health sector • Mental health service providers • Addictions service providers • Others as identified
Expand the capacity of mental health services for children including the recruitment and training of staff.	1 Year		
Where mental health and addictions are presented together, ensure there is coordinated case-management between mental health and addictions service providers.	1 Year		
Link individuals that have been discharged from mental health programs to ongoing support programs.	1 Year		
Ensure the larger public establishments are welcoming and inviting to those with mental illness (i.e. reduce the associated stigma).	1 Year		

Strategy 2: Increase psychiatric and primary care services.

Actions	Timelines	Output Indicators	Partners Needed
Conduct a review of the waitlist demand for psychiatric care and	1 Year		<ul style="list-style-type: none"> • Health sector

primary care (i.e. family doctors and nurse practitioners) services.		<ul style="list-style-type: none"> • Increased sense of physical and mental health. • Decreased suicide rate. • Decreased incidence response related to mental health. 	<ul style="list-style-type: none"> • Mental health service providers • Others as identified
Explore opportunities to increase capacity for psychiatric care. This may include the recruitment of additional psychiatrists.	1-3 Years		
Explore opportunities to increase capacity for primary care. This may include the recruitment of additional family doctors and/or nurse practitioners.	1-3 Years		

Strategy 3: Expand the Mobile Crisis Service.

Actions	Timelines	Output Indicators	Partners Needed
Increase the hours of operation to provide services 24 hours per day and 7 days a week.	1 Year	<ul style="list-style-type: none"> • Decreased suicide rate. • Decreased incidence response related to mental health. 	<ul style="list-style-type: none"> • Health sector • North Bay Regional Health Centre • North Bay Police Service • North East LHIN • Others as identified
Expand the number of Mobile Crisis Service teams based on peak demand hours.	1-3 Years		

Municipal Planning Implications

The City of North Bay as a lower tier municipality has a large role in the development of a safe, secure, inclusive, and vibrant community outside of regular policing. The City of North Bay should consider the following Crime Prevention Through Environmental Design (CPTED) principles in new and existing developments:

- Encouraging natural surveillance through the use of mixed-use buildings, multiple transportation types such as cycling and walking, and improved lighting along pathways.
- Incorporating natural access control designs such as landscaping features that delineate public and private spaces and/or conflicting land uses.
- Fostering territorial reinforcement by creating attractive public spaces with useful amenities.
- Regular timely maintenance of public spaces and amenities and support beautification projects to reduce signs of deterioration in the community.
- Encourage the redevelopment of derelict buildings and infill developments.

It is also essential to ensure that the City of North Bay is inclusive for all. North Bay should provide opportunities for all and this includes social, spatial, and economic inclusivity. The following inclusive city factors should be considered in municipal decision-making and planning:

- Ensuring that daily necessities are affordable, available, and accessible. Necessities include housing, transportation, utilities (municipally controlled), and any other essential infrastructure under the purview of a municipality.
- Promoting the participation of all citizens, including marginalized population groups. This includes, but is not limited to, offering inclusive and diverse social events, public consultation opportunities, and municipal communications. Inclusive participation comes in many forms that can include virtual, phone, in-person, and community bulletin boards.
- Encouraging sustainable economic growth for accessible and meaningful employment for citizens.
- Increasing health and wellness in North Bay by offering new recreational opportunities such as a community centre that is designed and constructed to maximize community participation, inclusivity, and accessibility.

Plan Implementation

Leadership:

The success of North Bay's CSWB Plan relies heavily on strong leadership. The City of North Bay is the champion of the Plan and is, therefore the lead on the implementation of the CSWB Plan. In turn, the Gateway Hub Executive Committee which is composed of community service leaders are committed to the realization of the Plan's mission and vision.

Actions	Timelines
Assign the CSWB Plan to the Gateway Hub Executive Committee who will meet quarterly to provide guidance on the implementation of the CSWB Plan.	Immediate
Ensure that the Executive Committee has representation/liaison from the North Bay and Area Community Drug Strategy (addictions), Nipissing District Housing and Homelessness Partnership (homelessness), and the Child and Youth Mental Health Planning Table (mental health), and the Nipissing District Mental Health and Addictions System Table (mental health and addictions).	0-3 months

Monitoring & Communication:

Another key element for the Plan's implementation will be regular access to data from the performance measures and updates from the priority risk-related tables and committees. This will allow for further evidence-based decision-making and can motivate the implementation of the Plan forward.

Actions	Timelines
Executive Committee will receive quarterly updates from the North Bay and Area Community Drug Strategy (addictions), Nipissing District Housing and Homelessness Partnership (homelessness), and the Child and Youth Mental Health Planning Table (mental health), and the Nipissing District Mental Health and Addictions System Table (mental health and addictions).	0-3 months
Quarterly statistics will be provided to the Committee based on the performance measures listed in the CSWB Plan.	0-3 months
CSWB Plan progress report will be completed and made available to the public on an annual basis.	On-going
As new information becomes available, the CSWB Plan will be reviewed and updated.	On-going

Resource Alignment, Advocacy & Partnerships:

The implementation of action items may require a realignment of resources or advocacy for additional resources such as funding. Select action items are also research-based and may require partnerships to complete.

Actions	Timelines
Seek opportunities to conduct CSWB Plan-related research through partnerships in the community or other research opportunities.	On-going
Where feasible, realign existing resources to complete/implement the action items listed in the CSWB Plan.	On-going
Apply to available funding resources utilizing the information contained in the CSWB Plan and its sub-reports to move forward the action items.	On-going
Advocate to various levels of government for additional resources to complete/implement the action items listed in the CSWB Plan that cannot be realized through a realignment of existing resources.	On-going

Organizational Structure:

The City of North Bay will champion the Plan, and encourage the human service network to utilize their flexibility, innovation and collective leadership to implement the Plan on behalf of North Bay residents and the community at large. Service providers are contractually accountable to their funding agents for deliverables and performance. Their collective work and prioritization of the CSWB Plan will lead to improved safety and well-being.

In addition to championing the Plan, the City of North Bay in its municipal role, will be responsible for collaborating with appropriate community resources to implement identified actions where the City has a role. The goal of successfully implementing the entire Plan, will be accomplished by the Advisory Committee and Service Providers collective efforts to develop new collaborative approaches by reallocating and identifying new resources.

Acknowledgements

Plan Development Team

For leading the development of the CSWB Plan, which included extensive research and consultations:

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For providing direction, guidance, and support to the Coordinators throughout the CSWB Plan development:

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Executive Steering Committee

For contributing their time and effort, reviewing information, data, and sub-reports, and providing input and guidance throughout the development of the CSWB Plan appreciations go out to the Gateway Hub Executive Committee. A special acknowledgement goes to Stephanie Beausoleil and Alan McQuarrie for sharing their insights throughout the process and connecting the Project Coordinators with the Gateway Hub and other important committees/tables.

Community Service Providers

Over 79 local service providers were provided the opportunity to participate in the development of North Bay's CSWB Plan. An acknowledgement goes to those that took the time and effort to participate in surveys and focus groups.

Citizens of North Bay & Area

Approximately 3000 citizens of North Bay and Area participate in the public survey. Appreciation goes out to the citizens of North Bay and Area that assisted in informing the CSWB Plan through this survey.

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