



**For Action**

## **City Council Transmittal – Executive Committee Item 25.4 SafeTO: Toronto’s Ten-Year Community Safety and Well-Being Plan**

**Date:** September 15, 2021  
**To:** TTC Board  
**From:** Director – Commission Services

### **Summary**

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City Council on July 14, 15 and 16, 2021, adopted the subject item and has forwarded a copy of City Council’s decision to the Toronto Transit Commission Board for consideration.

### **Recommendations**

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It is recommended that the TTC Board:

1. Adopt SafeTO: Toronto’s Ten-Year Community Safety and Well-Being Plan and that staff partner with the City of Toronto on its implementation.
2. Request that staff to forward a copy of this decision to the City Manager for information.

### **Signature**

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Chrisanne Finnerty  
Director – Commission Services

### **Attachments**

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Attachment 1 – SafeTO: Toronto’s Ten-Year Community Safety and Well-Being Plan

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August 17, 2021

Timothy Murphy  
Chair, Toronto Community Housing Corporation Board

Sue Graham-Nutter  
Chair, Toronto Public Library Board

Jaye Robinson,  
Chair, Toronto Transit Commission

Jim Hart  
Chair, Toronto Police Services Board

Dear Sir/Madam,

**Re: SafeTO: Toronto's Ten-Year Community Safety and Well-Being Plan**

On July 14, 2021, Toronto City Council adopted [2021.EX25.4: SafeTO: Toronto's Ten-Year Community Safety and Well-Being Plan](#), including the following direction:

8. City Council forward the SafeTO report to the Boards of Directors of Toronto Community Housing Corporation, Toronto Public Library and Toronto Transit Commission, and the Toronto Police Services Board and City Council request the Boards to adopt the SafeTO Plan through a Board resolution and to partner with the City of Toronto on the SafeTO Implementation Plan.

SafeTO represents a fundamental shift in the way that the City of Toronto thinks about community safety and well-being, refocusing efforts on prevention and addressing the root causes of issues that negatively impact community safety. I would first like to thank you and your teams for your engagement in the development of SafeTO. Our collaboration to date demonstrates that working across our institutions is the only way to bring about a safe Toronto that promotes and celebrates the well-being and resilience of all.

SafeTO provides a roadmap by which the City and social systems that serve Torontonians, such as community services, healthcare systems, education systems, justice systems, police and businesses, can work collaboratively across different sectors and across governments to support community safety and well-being. The Plan will drive 26 priority actions across seven strategic goals:

- reduce vulnerability;
- reduce violence;
- advance truth and reconciliation;
- promote healing and justice;
- invest in people;
- invest in neighbourhoods; and
- drive collaboration and accountability.

The City cannot make this shift alone. Further to City Council's direction above, I ask that you adopt the SafeTO Plan through a Board resolution, and advise the City once this has been done. We are also looking for the continued support of your organizations on the development of the implementation plan that will be presented to City Council in December 2021. The SafeTO implementation plan will detail the timelines, structures and steps required to advance the SafeTO goals and priority actions, including a SafeTO Investment Approach, Governance Structure, Intergovernmental Strategy and Indicator Framework.

If you have any questions on SafeTO, please contact Scott McKean, Manager, Community Safety & Wellbeing Planning at [scott.mckean@toronto.ca](mailto:scott.mckean@toronto.ca); 647-828-5985. We would be pleased to arrange for a briefing (either virtually or in-person) of appropriate staff in your organizations.

I thank you for your ongoing cooperation and look forward to our continued partnership in advancing SafeTO.

Sincerely,



Chris Murray  
City Manager

- c: Mayor John Tory  
Jag Sharma, President and CEO, Toronto Community Housing Corporation  
Vickery Bowles, City Librarian, Toronto Public Library  
Rick Leary, CEO, Toronto Transit Commission  
James Ramer, Interim Chief, Toronto Police Service  
Ryan Teschner, Chief Administrative Officer, Toronto Police Services Board  
Tony Veneziano, Toronto Police Service  
Tom Azouz, Interim Deputy City Manager, Community & Social Services  
Denise Andrea Campbell, Executive Director, Social Development, Finance and Administration  
Sandra Rodriguez, Director, Intergovernmental & Agency Relations

## SafeTO: Toronto's Ten-Year Community Safety and Well-Being Plan

**Date:** June 21, 2021

**To:** Executive Committee

**From:** Executive Director, Social Development, Finance and Administration

**Wards:** All

### SUMMARY

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Under the *Ontario Police Services Act*, all municipalities are mandated to prepare and adopt a Community Safety and Well-Being Plan by July 2021. A provincial framework has been developed to guide municipalities in our planning to broaden our understanding of safety and centre the well-being of individuals, families and communities through long-term strategic actions that ensure community safety and well-being. The root causes of community violence, trauma and injustice are complex. A traditional enforcement approach cannot be the only response, nor the default response to building a safer city. Growing evidence calls for proactive, multi-sector responses guided by a unified vision and a set of agreed upon priorities. This shift being called for by provincial legislation mirrors what City staff have heard from community leaders, advocates and academics over many years. SafeTO is our response.

SafeTO is a comprehensive Ten-Year Community Safety and Well-Being Plan that reimagines core elements of community safety and well-being in order to shift our paradigm from a reliance on reactive emergency response to a culture of proactive prevention. SafeTO inspires us to think differently, work collaboratively across sectors, community and governments, and to do better to bring about a safe Toronto that promotes and celebrates the well-being and resilience of all residents.

Toronto has a legacy of taking bold action to address complex challenges. In recent years, Toronto City Council has committed to a 20-year plan to transform how the City addresses poverty through TO Prosperity: Toronto Poverty Reduction Strategy; has endorsed the Toronto Action Plan to Confront Anti-Black Racism to acknowledge and uproot anti-Black racism from our systems and structures; and has put into action policing reform measures to create a new community-led Community Crisis Support Service to reimagine how our systems respond to mental health crises. SafeTO provides City Council with another opportunity to think boldly and act differently to advance community safety and well-being in Toronto by:

- Expanding the definition of community safety beyond crime or policing to include well-being,

- Redefining what trauma means and deepening the ability of the City and its partners to be informed by it and respond to it,
- Enhancing our ability to act early and advance preventative approaches,
- Developing innovative mechanisms to use multi-sector data to inform decision making and integrate investments,
- Implementing an effective multi-sector governance structure that brings our critical partners into coordinated leadership and action, and
- Committing to a long-term vision of community safety and well-being and a comprehensive plan to realize it.

For Toronto to make the shift envisioned by the Province, the majority of community safety investments need to be focused on developing and/or enhancing programs that focus on social development, prevention, and intervention through multi-sector collaboration to reduce the reliance on reactive emergency response. The City cannot make this shift alone. For the City to be successful, a whole-of-governments approach consisting of effective partnerships with and investments from other orders of government is critical.

SafeTO will drive 26 priority actions across seven strategic goals: Reduce Vulnerability; Reduce Violence; Advance Truth and Reconciliation; Promote Healing and Justice; Invest in People; Invest in Neighbourhoods; and Drive Collaboration and Accountability. SafeTO provides a roadmap for how the City and social systems that serve Torontonians, such as community services, healthcare systems, education systems, justice systems, police and business, can work collaboratively across different sectors and across governments to support community safety and well-being.

In the process of developing SafeTO, the City has already started to apply a broader, multi-sector approach to prevent and interrupt escalating violence this summer. In the spring, Social Development, Finance and Administration Division, the Toronto Police Service and the Toronto Police Service Board, Toronto Community Housing, Toronto Public Health, Toronto Transit Commission, the Toronto District School Board, and the Toronto Catholic District School Board formed the Executive Leadership Table with the support of the Office of the Mayor to collaboratively develop a Short-term Community Safety Pilot to leverage and integrate community safety efforts across organizations for better impact on the reduction of gun violence through the summer months. Lessons learned through this collaborative work will be used to inform the SafeTO Implementation Plan which will be brought back for Council consideration in December 2021.

## **RECOMMENDATIONS**

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The Executive Director, Social Development, Finance and Administration recommends that:

1. City Council adopt SafeTO: Toronto's Ten-Year Community Safety and Well-Being Plan as outlined in Appendix A.

2. City Council request the Executive Director, Social Development, Finance and Administration to report to the December 2021 Executive Committee meeting with the SafeTO Implementation Plan.
3. City Council forward the SafeTO report to the Boards of Directors of Toronto Community Housing Corporation, Toronto Public Library, Toronto Transit Commission and the Toronto Police Services Board and request they adopt the SafeTO Plan through a Board resolution and partner with the City on the SafeTO Implementation Plan.
4. City Council forward the SafeTO report to the Toronto District School Board, the Toronto Catholic District School Board, le Conseil scolaire de District catholique MonAvenir and le Conseil scolaire Viamonde for their consideration of the SafeTO Plan in service planning and to partner with the City on the SafeTO Implementation Plan.
5. City Council forward the SafeTO report to Native Child and Family Services of Toronto, Children's Aid Society of Toronto, Catholic Children's Aid Society of Toronto and Jewish Family and Child Service for their consideration in service planning as part of the provincially-mandated Child Welfare redesign, and to partner with the City on the SafeTO Implementation Plan.
6. City Council forward the SafeTO report to the following provincial ministries for their consideration: Ministry of the Solicitor General, Ministry of the Attorney General, Ministry of Children, Community and Social Services, Ministry of Health, Ministry of Long-Term Care, Ministry of Municipal Affairs and Housing, Ministry of Education, and the Ministry for Seniors and Accessibility.
7. City Council forward the SafeTO report to the following federal departments for their consideration: Department of Justice Canada, Department for Women and Gender Equality, Public Safety Canada, Public Health Agency of Canada, and Indigenous Services Canada.
8. City Council request the City Manager to share the results of the Sunnybrook Breaking the Cycle of Violence with Empathy (BRAVE) Program with the Ministry of Health and request the Province of Ontario to provide funding to support the continued operation of the BRAVE Program and the creation of a St. Michael's Hospital violence intervention program.

## **FINANCIAL IMPACT**

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SafeTO is a comprehensive ten-year plan that includes a mix of initiatives that can be completed within existing corporate resources and others requiring new investments. Implementation of SafeTO will require dedicated staffing resources to lead implementation, coordinate critical partners, manage implementation issues, ensure ongoing community engagement, integrate multi-sector data sets, and monitor and report on outcomes. It will also require investments in new directly delivered City programs and services, and resources to invest in partners. Comprehensive monitoring and evaluation infrastructure will need to be built at the City, which over time, can enable the City to fine-tune its investment in what is working, and divest investment from efforts that are not sufficiently impactful. This infrastructure will require the

development of agreements, mechanisms to share data sets across sectors and appropriate City and multi-sector governance structures. Multi-sector data-sharing and governance planning is already underway and will be detailed in the SafeTO Implementation Plan.

The SafeTO Implementation Plan, to be submitted to Toronto City Council in the December 2021 cycle, will detail anticipated financial impacts for 2022 to be considered in the 2022 budget process. Future year financial impacts beyond 2022 will be considered in future year budget processes.

### **Intergovernmental Funding is Necessary**

The City acting alone cannot bring about the safety and well-being of Toronto residents. The City funding alone, cannot deliver this provincially-mandated Community Safety and Well-being Plan. Intergovernmental support is critical.

The SafeTO Implementation Plan will also point to an Intergovernmental Strategy required to engage appropriate Provincial ministries and Federal departments in resourcing priority actions and making policy considerations for factors within their jurisdictions. For the City of Toronto to make the shift envisioned by the provincial legislation, investment from the Provincial and Federal governments is critical. The SafeTO goals and priority actions will require comprehensive, whole-of-governments and multi-sectoral responses. It requires integrated provincial and federal investments. Without intergovernmental investments in implementation, key priority actions cannot be started, scaled, or sustained.

### **Provincial Investment Required for City-incubated BRAVE Pilot**

In approving the 2020 Operating Budget for Social Development, Finance and Administration, Toronto City Council designated \$100,000 to pilot the hospital-based violence intervention program, Breaking the Cycle of Violence with Empathy (BRAVE), with Sunnybrook Hospital. The BRAVE Program uses a public health and trauma-informed approach to violence prevention, through promoting positive alternatives to violence in order to reduce retaliation, criminal involvement, and re-injury among youth injured by violence.

City investment in the BRAVE Pilot has enabled the program to prove its concept and has demonstrated that early intervention by a qualified social worker in a hospital setting provides a meaningful opportunity to reduce risk by connecting victims to immediate supports, developing relationships to ensure continuum of care in the transition between hospital and necessary aftercare within the community, and strengthening collaboration between hospital, City and community support services. Between October 2020 and March 31, 2021, the BRAVE program serviced 51 gunshot victims addressing 217 risk factors through 475 patient interactions and 176 home visits.

Moving forward, provincial health system funding is required to sustain and grow the program and develop others. The report recommends that the City share the results of the BRAVE Pilot with the Ministry of Health and request the Province to provide funding to support the continued operation of the BRAVE Program and the development of the St. Michael's Hospital model.

The Chief Financial Officer and Treasurer has reviewed this report and agrees with the financial impact information.

## **EQUITY IMPACT STATEMENT**

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Systemic discrimination has negatively impacted how Indigenous, Black, racialized and equity-deserving communities, including women, LGBTQ2S+, people with disabilities, people that experience homelessness, newcomers and residents with precarious immigration status, and people who live on low incomes, experience community safety in Toronto.

Efforts to address community safety and well-being must consider the needs of those most negatively impacted and the systems or structures that impact residents. Understanding how poverty, racism and other structural inequities impact risk factors associated with safety and well-being (i.e. inequitable access to resources, exposure to violence, grief and loss, or lack of quality affordable housing), and protective factors (i.e. education attainment, financial stability or social support networks) can help prioritize the actions that will have the most impact in bringing about a safer Toronto. SafeTO, the proposed Ten-Year Community Safety and Well-Being Plan for the City of Toronto, will have a positive equity impact on Indigenous, Black, and equity-deserving communities. By prioritizing Toronto's most vulnerable communities, SafeTO will help build confidence in community safety and well-being initiatives by redefining what community safety and well-being mean across the city.

## **DECISION HISTORY**

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### **HL29.2 Toronto Overdose Action Plan: Status Report 2021**

At its June 14, 2021 meeting, the Toronto Board of Health adopted this report with amendments and reiterated its call urging the Federal Minister of Health to use the authority under the Controlled Drugs and Substances Act to permit the simple possession of all drugs for personal use.

<http://app.toronto.ca/tmmis/viewAgendaItemHistory.do?item=2021.HL29.2>

### **EX 24.11 - Recommendations to Consult and Amend Bill 251, Combat Human Trafficking Act**

At its June 8, 2021 meeting, City Council considered this item and moved to forward the staff report to the Solicitor General to express concerns about Bill 251 and urge the Solicitor General to consult with sex workers and other affected vulnerable communities.

<http://app.toronto.ca/tmmis/viewAgendaItemHistory.do?item=2021.EX24.11>

### **EX24.1 - Report back on Accessing Justice - New Toronto Courthouses**

At its June 1, 2021 meeting, Executive Committee adopted the report back on Accessing Justice - New Toronto Court Houses with amendments.

<http://app.toronto.ca/tmmis/viewAgendaItemHistory.do?item=2021.EX24.1>



### **EX20.1 - Community Crisis Support Service Pilot**

At its February 2, 3, and 5, 2021 meeting, City Council adopted the Community Crisis Support Service Pilot.

<http://app.toronto.ca/tmmis/viewAgendaItemHistory.do?item=2021.EX20.1>

### **CC22.2 - Changes to Policing in Toronto**

At its June 29, 2020 meeting, City Council adopted 36 decisions related to policing reform covering areas related to policing, community safety, and crisis response.

<http://app.toronto.ca/tmmis/viewAgendaItemHistory.do?item=2020.CC22.2>

### **HL17.2 - Toronto Overdose Action Plan: Status Report 2019**

At its June 8, 2020 meeting, the Toronto Board of Health adopted the Toronto Overdose Action plan Status Report 2020.

<http://app.toronto.ca/tmmis/viewAgendaItemHistory.do?item=2020.HL17.2>

### **EC6.12 - City of Toronto Community Safety and Well-being Plan**

At its July 15, 17, and 28, 2019 meeting, Council adopted a report on the City's approach to develop a Community Safety and Well-being Plan as required by provincial legislation. <http://app.toronto.ca/tmmis/viewAgendaItemHistory.do?item=2019.EC6.12>

### **HL11.1 - Community Violence in Toronto - A Public Health Approach**

At its meeting on November 26, 2019 City Council adopted the Board of Health report.

<http://app.toronto.ca/tmmis/viewAgendaItemHistory.do?item=2019.HL11.1>

### **EX8.26 - Investing in Community Based Anti-Violence Programs**

At its meeting on September 18, 2019, Executive Committee requested the Executive Director, Social Development, Finance and Administration to review the outstanding grant requests to the National Crime Prevention Strategy Fund and determine which will make the most meaningful impact to reduce gun violence and the City's long-term Community Safety and Well-Being Plan, and report directly to City Council at its meeting on October 2 and 3, 2019.

<http://app.toronto.ca/tmmis/viewAgendaItemHistory.do?item=2019.EX8.26>

### **HL71. - Toronto Overdose Action Plan: Status Report 2019**

At its June 18 and 19, 2019 meeting, City Council endorsed the Toronto Overdose Action Plan: Status Report 2019.

<http://app.toronto.ca/tmmis/viewAgendaItemHistory.do?item=2019.HL7.1>

### **HL18.3 - Toronto Overdose Action Plan: Prevention and Response**

At its meeting on March 20, 2017, the Board of Health endorsed the Toronto Overdose Action Plan. <http://app.toronto.ca/tmmis/viewAgendaItemHistory.do?item=2017.HL18.3>

### **EX29.11 - Toronto Action Plan to Confront Anti-Black Racism**

At its December 5, 6, 7 and 8, 2017 meeting, the Toronto City Council adopted the Toronto Action Plan to Confront Anti-Black Racism.

<http://app.toronto.ca/tmmis/viewAgendaItemHistory.do?item=2017.HL18.3>

## COMMENTS

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In the past decade, Toronto has strengthened its position as a world-class city due to its high quality of life, social diversity, and strong economy. However, not everyone gets to equitably participate in Toronto's prosperity due to deeply entrenched systemic inequities that drive divides in our city. These inequities are embedded within our social (health, education, justice), economic, and political systems and have impacts on the conditions that influence the health and well-being of residents. If left unattended, growing inequities in systems, policies, programs and services across Toronto can manifest into complex conditions such as homelessness, food insecurity, poverty, community violence, and crime that severely threaten community safety and well-being for Torontonians, particularly Indigenous, Black and equity-deserving communities.

Community safety and well-being refers to “the ideal state of a sustainable community where everyone is safe, has a sense of belonging, opportunities to participate, and where individuals and families are able to meet their needs for education, health care, food, housing, income, and social and cultural expression.”<sup>1</sup> It is responsive to the social determinants of health and many aspects of our social, physical, emotional and spiritual well-being to ensure our basic needs are met and communities are thriving.

### **Re-Imagining Community Safety in Toronto**

Community advocates, academics and residents have called for a fundamental shift in the ways in which the City thinks about community safety by centring the well-being of people and places, while factoring in inequities and other root causes that threaten safety and well-being.

The root causes of community violence, trauma, and injustice are complex. No single sector can address the intricacy, or in some cases, the urgency of community safety and well-being challenges on their own. These complex efforts require a diverse and integrated range of skill, locally-driven mandates, and resources to address community needs under the guidance of a shared vision, data-driven outcomes, and by empowering local leadership of affected communities.

Re-imagining community safety in Toronto requires a shift from the tradition of governments looking to address community safety issues through a lens of law enforcement and crime, using policing, special constables, security or by-law officers as the primary response. An enforcement-only approach to community safety increases barriers and risks for Torontonians, particularly those from Indigenous, Black, LGBTQ2S+ and equity-deserving communities as a result of systemic racism embedded within the Canadian justice system<sup>2</sup>. A law enforcement lens that embeds a deep understanding of and commitment to confronting structural anti-Indigenous and anti-Black racism, inequity and bias, has its place in responding to community safety challenges. However, while the role of enforcement remains an appropriate part of the spectrum of responses to community safety issues, enforcement as the only response,

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1 Ministry of Community Safety and Correctional Services - A Strong Safe Ontario - Booklet 3 - Planning Framework | Ministry of Attorney General (gov.on.ca)

2 Ontario Human Rights Commission.2017. "Under suspicion: Research and consultation report on racial profiling in Ontario". <http://www.ohrc.on.ca/en/book/export/html/21201>

or the default response, cannot alone address root causes, proactively reduce risks, or promote and maintain community well-being. Government services, health services, and education system acting alone, have also struggled to uproot systemic inequity and to effectively respond to community violence, trauma and injustice.

A public health approach recognizes the interconnectedness of the complex conditions that create community safety challenges and mobilizes a wide range of evidence-informed interventions to respond to these conditions while monitoring the results from upstream prevention efforts to advise ongoing investments and system reforms. Approaches focused on strengthening the social determinants of health and reducing health inequities -- the economic and social conditions that influence individual and community differences in health status -- are effective at preventing community violence, vulnerability and the risk factors that negatively impact communities. A public health approach encourages the wide spread adoption of what works and requires community leadership in implementation. A re-imagined approach to community safety and well-being in Toronto necessitates a public health approach.

Community calls for the City to reimagine community safety are further enabled by provincial legislation requiring municipal-level plans with multi-sector approaches that emphasize social development and prevention.

### **A Provincial Requirement to Shift Community Safety Paradigms and Culture**

Under the *Police Services Act* and its forthcoming successor, the *Community Safety and Policing Act, 2019* (which is not yet in force), all municipalities are mandated to prepare and adopt a Community Safety and Well-Being Plan by July 2021. A community safety and well-being plan is a long-term tool to address key social priorities, root causes of crime, social disorder and ill-health, with identified shared goals through multi-sectoral partnerships. While these statutes provide some direction on the content of the plan through elements that are required, they also allow for flexibility respecting the unique context and needs of each municipality.

A Community Safety and Well-Being Planning Framework, developed by the Ministry of the Solicitor General and informed by a broad range of sectors including input from the City of Toronto, is meant to guide municipalities in their processes to re-imagine community safety at the local level. The Community Safety and Well-Being Planning Framework includes the planning areas captured in Table 1 below.

Table 1: Provincial Community Safety and Well-Being Planning Framework

Area	Description
<p><b>Social Development</b> (upstream)</p> <p><i>Promoting and maintaining community safety and well-being</i></p>	<p>Social development requires long-term, multi-disciplinary efforts and investments to improve the social determinants of health and reduce the probability of harm and victimization. Investing in social development allows residents to thrive by addressing the root causes of crime and disorder</p> <p>Appropriate investment in social development will establish protective factors through improvements in areas such as health, employment and graduation rates, and will produce significant social benefits as a result of addressing the root causes of crime and social disorder.</p>
<p><b>Prevention</b> (midstream)</p> <p><i>Proactively reducing identified risks</i></p>	<p>Prevention involves proactively implementing evidence-based situational measures, policies or programs to reduce locally-identified priority risks to community safety and well-being before they result in crime, victimization and/or harm.</p>
<p><b>Risk Intervention</b> (downstream)</p> <p><i>Mitigating situations of elevated risk</i></p>	<p>Risk intervention involves multiple sectors working together to address and/or interrupt escalating situations where there is an elevated risk of harm</p>
<p><b>Emergency Response</b></p> <p><i>Critical and non-critical incident response</i></p>	<p>Emergency response is immediate and reactionary responses that may involve a sense of urgency in response to crime or safety. Initiatives in this area alone cannot be relied upon alone to increase community safety and well-being.</p>

Upstream and downstream programs are equally important and work together to support community safety and well-being. For Toronto to make the shift envisioned by the Provincial Community Safety and Well-Being Planning Framework, the majority of investments need to be focused on developing and/or enhancing programs that fall under social development, prevention, and risk intervention to reduce the reliance on emergency response and strengthen community capacity to promote and maintain safety and well-being.

SafeTO, Toronto's Ten-Year Community Safety and Well-Being Plan, is the City of Toronto's response to the Provincial Community Safety and Well-Being Planning Framework. Given the breadth and complexity of the community safety and well-being challenges in Toronto, Implementation of SafeTO will require integrated investments from other orders of government.

Equally important to upstream and downstream investments is a commitment to track multi-sector investments and initiatives across the Community Safety and Well-Being Planning Framework to enhance collaboration and maximize collective resources. The City is required by provincial legislation to develop an outcomes framework to monitor and evaluate SafeTO. Staff have initiated the development of a SafeTO Indicator Framework through a multi-sectoral partnership which will support the City and its partners to monitor the success of SafeTO priority actions at a population level and facilitate planning at a programmatic level. Staff will report on the SafeTO Indicator Framework as part of the Implementation Plan in December 2021.

## **Development of the Toronto Plan**

In preparing a Community Safety and Well-Being Plan, Provincial legislation requires municipalities to consult communities and those that serve them in order to prioritize risk factors and to identify strategies to address them. In response, SafeTO: Toronto's Ten-Year Community Safety and Well-Being Plan was informed by extensive stakeholder engagement and consultations. To inform the engagement process, the Social Development, Finance and Administration Division partnered with the Canadian Municipal Network on Crime Prevention on a jurisdictional review of twelve Canadian municipalities. Staff further conducted a scan of an additional four Canadian and seven international cities doing related work, did research in the area of community safety and well-being, and reviewed deputations on community safety matters to various City of Toronto Standing Committees over the last four years.

Staff also conducted analysis of relevant sector data including from the Toronto Police Service and from existing City-led programs, such as Furthering Our Community by Uniting Services (FOCUS), the Specialized Program for Inter-Divisional Enhanced Responsiveness to Vulnerability (SPIDER), and the Community Crisis Response Program.

From November 2020 to April 2021, City staff engaged in an extensive community consultation process. Engagement included population-specific, issue-specific, and geographic-based consultations as well as internal discussions with 18 City divisions, agencies and corporations. Community consultations were targeted to stakeholders providing services related to or directly experiencing challenges related to community safety and well-being. This was complemented by engagement with subject matter experts, residents and community thought-leaders. In total, over 2,500 stakeholders were engaged, with written submissions also accepted. A public survey was available from March 1-15, 2021 that received an additional 1,500 responses.

The City consulted all groups required by provincial legislation, including residents and community organizations representing youth, members of racialized groups, and First Nation, Inuit and Métis communities. A summary of the SafeTO consultation findings is available in Appendix C.

Provincial legislation also calls on municipalities to form a multi-sectoral advisory committee to support the development of the municipal Community Safety and Well-Being Plan. Social Development, Finance and Administration identified and invited members from education, health, mental health, community (agencies and resident leaders), policing, and the private sector to establish a SafeTO Advisory Committee in

early 2020. However, the declaration of the global COVID-19 pandemic and resulting emergency response required by the City and many advisory members interrupted the formal establishment of the committee and paused SafeTO development work. When work resumed, City staff instead consulted many of the invitees directly and leveraged existing multi-sector advisory tables such as the Toronto Child and Family Network, Human Service and Justice Coordination Committees, the Acquired Brain Injury Network and others to better understand community safety and well-being priorities and to plan appropriate actions.

Additionally, in spring 2021, a Community Safety Partners Executive Leadership Team was formed as a first-step institutional table to leverage and integrate community safety efforts for better impact on the reduction of gun violence through the summer months through the Short-Term Community Safety Pilot. The Executive Leadership Table was established with the support of the Office of the Mayor, Social Development, Finance and Administration, the Toronto Police Service and the Toronto Police Service Board, Toronto Community Housing, Toronto Public Health, Toronto Transit Commission, the Toronto District School Board, and the Toronto Catholic District School Board.

Through the SafeTO Implementation Plan, City staff will leverage the Executive Leadership Table along with lessons learned through the Short-Term Community Safety Pilot and the extensive SafeTO engagement process in order to develop and implement the necessary multi-sector and community advisory, decision making and governance structures required to support trust, collaboration, transparency and effectiveness in the implementation of SafeTO. Staff will report on the proposed SafeTO governance structure in the December 2021 cycle.

### **Toronto's Priority Safety and Well-being Challenges**

Based on a review of past and present public consultation data, City staff identified a number of critical challenges to the safety and well-being of Torontonians. The issues are many and complex. Staff analysis revealed four key priority challenges summarized in Table 2 below.

Table 2: Four Priority Challenges

Challenge 1	Community Trauma
<p><b>Rationale</b></p>	<ul style="list-style-type: none"> <li>• Communities and neighborhoods that experience higher levels of inequities and/or experience higher levels of violence are most vulnerable to becoming traumatized. Unaddressed trauma can manifest in physical, emotional, and psychological harm creating negative impacts on community well-being, health and safety. Systemic racism and inequity are primary contributing factors of trauma.</li> <li>• There is growing evidence that the experience of trauma, multi-generational or intergenerational racial trauma, and early trauma as a result of adverse childhood experiences can cause life-long harm, poor health outcomes and in some cases perpetuate violence.</li> <li>• Community consultations amplified the need for the City to prioritize addressing trauma. Recognizing trauma as a contributing root cause and directly addressing the impact of trauma on individuals and communities through culturally responsive approaches can help facilitate recovery from the consequences and manifestations of trauma.</li> </ul>
<p><b>Examples</b></p>	<ul style="list-style-type: none"> <li>• Inter-generational and multi-generational trauma as a result of historic harms experienced by Indigenous peoples are often unacknowledged or unaddressed and can result in further traumatization as a result of negative interactions with government systems.</li> <li>• In recent years, Toronto has experienced attacks including the Yonge Street van attack and the Danforth shooting which resulted in mass casualties and victimization. Further, some communities experience more frequent exposure to community violence or adverse community experiences disproportionately. The compounding impact of these events can traumatize individuals and entire communities.</li> <li>• Preliminary data from the Office of the Chief Coroner for Ontario demonstrates there was a record high number of confirmed opioid toxicity deaths in Toronto in 2020, with a total of 521 fatalities. This represents a 78 percent increase from 2019 and a 280 percent increase from 2015. There has been a notable increase in drug-related deaths since the start of the COVID-19 emergency. Substance use is often driven by trauma, and the increase in deaths has had devastating impacts on the loved ones of those lost and the frontline workers who supported them.</li> </ul>

<b>Challenge 2</b>	<b>Community Violence</b>
<b>Rationale</b>	<ul style="list-style-type: none"> <li>• Community violence -- including gun violence, gender-based and intimate partner violence -- has been on the rise in Toronto and was declared a public health issue by the Toronto Board of Health in 2019.</li> <li>• The traumatic impact of gun violence in communities is not only experienced by individuals, it is experienced by communities which can contribute to negative long-term health outcomes and can be a contributing factor to the propensity to commit violence.</li> <li>• There have been calls to strategically mobilize short-term and long-term actions in coordination with multi-sector partners, community leaders, and residents to interrupt the immediate risks of community violence and continuously work to prevent it.</li> </ul>
<b>Examples</b>	<ul style="list-style-type: none"> <li>• As of May 19, 2021, there have been 119 shootings in Toronto resulting in 46 injuries and 12 people losing their lives.</li> <li>• Incidents of gender-based and intimate partner violence are also increasing in Toronto, particularly through the COVID-19 pandemic.</li> </ul>
<b>Challenge 3</b>	<b>Harm and Victimization</b>
<b>Rationale</b>	<ul style="list-style-type: none"> <li>• Experiencing both immediate and life-long harms or repeated victimization can be a risk factor of complex conditions that threaten community safety (e.g. mental health crisis, substance use, human trafficking, and hate crimes). Continued exposure to such harms can negatively impact the social determinants of health and further exacerbate the risk to equity-deserving communities.</li> <li>• Advancing policies and programs to reduce harm and victimization and further understand vulnerability will ensure individuals and communities have access to resources and supports such as victim/witness, psycho-social and other relevant supports that promote community healing while also beginning to address the root causes of these harms.</li> <li>• Vulnerability extends to instances of acquired brain injuries and developmental disabilities; the lack of understanding of these issues combined with the lack of appropriate supports presents an increased risk of engagement with the criminal justice system<sup>3</sup>.</li> </ul>

3 McIsaac, et. al. 2016. "Association between traumatic brain injury and incarceration: a population-based cohort study. CMAJ, 4(4), 746-753. <https://pubmed.ncbi.nlm.nih.gov/28018890/>



<p><b>Examples</b></p>	<ul style="list-style-type: none"> <li>• The number of reported hate-related incidents in Toronto has increased by 51 percent in 2020<sup>4</sup> with clear calls from the community for the City to prioritize efforts to address systemic racism and inequity.</li> <li>• Mental health calls to police are occurring at a rate of approximately 85 per day, and 76 percent of all FOCUS Toronto situations respond to mental health issues.</li> <li>• Acquired and Traumatic Brain Injuries are another notable concern given their prevalence among populations experiencing homelessness; a study conducted in 2008 found that of 904 people experiencing homelessness in Toronto, 53 percent had sustained at least one traumatic brain injury<sup>5</sup>.</li> <li>• In 2020, Toronto Paramedic Services responded to 3,861 suspected overdose calls, including 268 calls involving death. This is a 90 percent increase in the number of suspected overdose deaths attended by Toronto Paramedic Services. Criminalization of people who use drugs and limited access to harm reduction services, including safer supply, contributes to the increase of drug-related overdoses and death<sup>6</sup>.</li> </ul>
<p><b>Challenge 4</b></p>	<p><b>Injustice</b></p>
<p><b>Rationale</b></p>	<ul style="list-style-type: none"> <li>• The reliance on an enforcement lens continues to perpetuate the over-representation of Indigenous, Black and equity-deserving communities in the criminal justice system. There is a lack of consistency in terms of the application of a community justice lens in the approaches that address the root causes of community safety and well-being.</li> <li>• Restorative practices are an approach to justice that focus on addressing the harm caused by crime while holding the offender responsible for their actions, through providing an opportunity for those directly affected by the crime (victims, offenders and communities) to identify and address their needs in the aftermath of a crime in a culturally specific approach.</li> <li>• Reintegration is the support given to offenders during their re-entry into society following incarceration. It can include treatment, restorative justice and suitable community based supports or treatment.</li> <li>• There are clear calls from the community to mobilize culturally responsive restorative practices and reintegration approaches that embody cultural identity and tradition as forms of intervention within communities.</li> </ul>

4 Toronto Police Service. 2020. Annual Hate Crime Statistical Report. <http://www.torontopolice.on.ca/publications/files/reports/2020hatecrimereport.pdf>

5 Hwang, S. et. al, 2008. "The effect of traumatic brain injury on the health of homeless people". CMAJ, 179(8), 779-784. <https://www.ncbi.nlm.nih.gov/pmc/articles/PMC2553875/>

6 Toronto Board of Health Report. June 3, 2021. Toronto Overdose Action Plan: Status Report 2021. Toronto Overdose Action Plan: Status Report 2021

<p><b>Examples</b></p>	<ul style="list-style-type: none"> <li>• Nearly one out of every 15 young Black men in Ontario experienced jail time, compared to one out of about every 70 young white men<sup>7</sup>, and incarcerated Black people were more likely to live in low-income neighbourhoods. A siloed approach to community safety that results in an over-emphasis on enforcement has been shown to perpetuate the over-representation of Indigenous, Black and equity-deserving communities in the criminal justice system.</li> <li>• Between September 2018 and October 2019, Toronto’s Metro West Courthouse received approximately 306 youth cases from 23 Division and 312 from 31 Division. Taken together, 23 and 31 Divisions account for over 40% of all youth cases seen at the Metro West Courthouse.</li> <li>• Despite making up only 4.1% of the population in Ontario under age 15, Indigenous children represent approximately 30% of foster children<sup>8</sup>.</li> </ul>
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Consultation data, research and findings from the jurisdictional review indicated that an effective plan for Toronto needs to be comprehensive and take a long-term view to effectively address these interconnected priority challenges.

The City has demonstrated its leadership through a robust infrastructure of programs and services that play important roles in advancing community safety and well-being. Staff have identified over 60 existing City-led strategies, programs and initiatives that are actively working to address elements of community safety and well-being. The interconnections with existing City-led strategies are outlined in Appendix A. The SafeTO Implementation Plan will demonstrate alignment with existing programs and initiatives.

These include:

- **Key multi-year strategies** such as TO Prosperity: Toronto's Poverty Reduction Strategy, the Toronto Action Plan to Confront Anti-Black Racism, the HousingTO 2020-2030 Action Plan, the Toronto Indigenous Health Strategy, the Toronto Drug Strategy and the Economic Development and Culture Divisional Strategy.
- **Embedded programs and services** such as the Furthering Our Community by Uniting Services (FOCUS) Toronto Situation Tables, the Youth Outreach Worker Program, Investing in Families (IIF), Eviction Prevention in the Community (EPIC), The Works, and TO Wards Peace.

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7 Race and Incarceration: The Representation and Characteristics of Black People in Provincial Correctional Facilities in Ontario, Canada

8 Ontario Human Rights Commission. 2018. "Interrupted childhoods: Over-representation of Indigenous and Black children in Ontario child welfare". [http://www.ohrc.on.ca/en/interrupted-childhoods#\\_ftnref38](http://www.ohrc.on.ca/en/interrupted-childhoods#_ftnref38)

- **New initiatives** such as the Justice Centres initiative in partnership with the Ministry of the Attorney General, the Integrated Prevention and Harm Reduction Initiative, and the development of Community Crisis Support Service Pilots as a non-policing alternative to respond to complex mental health crises.

Despite this existing robust infrastructure, key limitations exist. The City is mobilizing investments, programs, and services across the spectrum from emergency response to social development, but they operate largely independently from each other with little intentionality in how lessons learned can inform ongoing prevention and social development approaches. SafeTO provides a framework to connect these dots and inform a culture shift to pursue a more comprehensive and holistic approach to community safety and well-being. SafeTO will bring together existing City strategies and programs under one "umbrella" with new priority areas for action.

### **SafeTO: the City's Plan to Advance Community Safety and Well-Being**

SafeTO, included in Appendix A, is a comprehensive Ten-Year Community Safety and Well-being Plan that reimagines core elements of community safety and well-being in order to shift our paradigm from a reliance on reactive emergency response to a culture of proactive prevention. It inspires us to think differently, work collaboratively, and to do better to bring about a safe Toronto that promotes and celebrates the well-being and resilience of all residents.

SafeTO is designed to address four inter-connected, priority challenges to help create a safer Toronto: community trauma, community violence, harm and victimization, and injustice.

It provides a roadmap for how the City and social systems that serve Torontonians, such as community services, healthcare systems, education systems, justice systems, police and business, can work collaboratively across different sectors and across governments to support community safety and well-being. This roadmap advances years of knowledge built through partnerships and collaboration between City divisions and agencies, community agencies, Indigenous organizations and communities, residents, multiple sectors, and other orders of government. This multi-sectoral collaboration recognizes that if we only focus on what the City can do, we will not solve the complex issues facing our city. Through SafeTO, the City of Toronto, in collaboration with our partners, will take a leadership role in defining and addressing Toronto's priority challenges through proactive, integrated strategies that build on local strengths to ensure Indigenous, Black, and equity-deserving groups are heard, validated and supported.

Addressing the root causes of issues that negatively impact community safety and well-being will build individual and community resilience, improve services and systems of care, and positively impact the lives of all Torontonians. SafeTO will empower strong collaboration and multi-sector leadership to respond to a unifying vision to advance community safety and well-being in Toronto.

## SafeTO Goals and Priority Actions

To advance community safety and well-being in Toronto, SafeTO focuses on 26 priority actions across seven key goals: Reduce Vulnerability, Reduce Violence, Advance Truth and Reconciliation, Promote Healing and Justice, Invest in People, Invest in Neighbourhoods, and Drive Collaboration and Accountability. A summary of the goals and priority actions can be found in Appendix B.

The SafeTO Implementation Plan, to be submitted in the December Council cycle, will detail the structures and specific actions required to advance the seven goals and 26 priority actions outlined in SafeTO. SafeTO goals and priority actions will centre the needs of Indigenous, Black and equity-deserving communities. This commitment will be reflected and embedded in the specific actions outlined in the Implementation Plan.

### Goal 1: Reduce Vulnerability

The more vulnerability experienced by individuals and communities, the more their safety and well-being is threatened. This has become of critical concern as vulnerability continues to increase in Toronto, especially as COVID-19 exacerbates existing structural racism, marginalization, and health inequities.

The mental health system has long since reached its capacity. It has historically been underfunded and inadequately resourced. This has resulted in people with mental illness not receiving the supports they need and falling into distress. The current system functions as a crisis management system rather than one that is integrated, proactive, preventative, and working in tandem with enforcement and justice systems. While the City does not provide direct mental health services, the City is well-positioned to provide coordination support to ensure the complex needs of residents are met.

There are urgent calls from the community to advance safer supply and advocate for treatment and supportive drug policies including identifying a pathway to the decriminalization or the removal of criminal penalties for the personal use and possession of drugs; this has been recommended by the Toronto Board of Health, public health agencies<sup>9</sup>, law enforcement<sup>10</sup> and civic agencies as an evidence-based approach to reduce public health and public safety harms associated with drug use.

SafeTO will reduce harm and victimization through proactive mental health and vulnerability support strategies, life stabilization, community-led crisis support models, and collaborative risk-driven approaches.

Priority Actions include:

- Enhance multi-sector mental health and vulnerability supports,
- Implement life stabilization and service navigation supports,
- Embed the Community Crisis Support Service as a well-resourced, first-response service City-wide,

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<sup>9</sup> Public Health Agency of Canada. October 2020. From Risk to Resilience: An Equity Approach to COVID-19.

<sup>10</sup> Canadian Association of Chiefs of Police. 2020. Decriminalization for Simple Possession of Illicit Drugs: Exploring Impacts on Public Safety & Policing

- Strengthen, align and expand the capacity of collaborative risk-driven approaches to reduce risk of harm and victimization, and
- Advance strategies, programs and services that reduce harm related to substance use.

## **Goal 2: Reduce Violence**

Communities are calling for action by the City to address the continued escalation of gun violence across Toronto. Although the City, Toronto Police Service and Toronto Community Housing Corporation have various programs and services aimed at reducing and responding to gun violence, there is a need for stronger coordination and integration of these efforts through multi-sector partnerships with related institutions, community leaders and residents guided by a shared violence reduction vision and measurable outcomes. Gun violence is a complex issue; a comprehensive, multi-sector approach is required to thoughtfully balance enforcement, intervention, and prevention approaches, when working with those actively involved in committing violence, those involved in conflicts, those at highest risk of being victimized or the wider community.

Incidents of gender-based and intimate partner violence have also notably increased in Toronto, particularly throughout the COVID-19 pandemic. Community consultations for the development of SafeTO highlighted the need for the City to clarify its role in preventing gender-based and intimate partner violence.

Violence reduction requires a comprehensive approach that goes beyond any single strategy or sector acting alone. Developing a culture of shared outcomes across stakeholders can lead to a reduction of violence and inspire a change in culture and practice across Toronto. Leveraging the City's existing infrastructure and investments to complement efforts of community partners in the areas of violence prevention, intervention, interruption, and response and recovery will address the growing culture of violence and underlying social determinants.

SafeTO will implement dedicated strategies to prevent and reduce gun violence, interpersonal violence, and gender-based and intimate partner violence through strategic and timely coordinated efforts across communities and systems.

Priority Actions include:

- Develop a comprehensive multi-sector gun violence reduction plan,
- Develop a comprehensive gender-based and intimate partner violence reduction strategy, and
- Strengthen community crisis response protocols to better support victims and communities impacted by violence.

## **Goal 3: Advance Truth and Reconciliation**

To build on the City of Toronto's commitment to Truth and Reconciliation, SafeTO will leverage the strategic directions provided in the Statement of Commitment to the Aboriginal Communities of Toronto (2010), the Calls to Action set out by the Truth and Reconciliation Commission's final report (2015), the principles detailed in the United Nations Declaration on the Rights of Indigenous Peoples (2007), and the Calls to Justice outlined by Reclaiming Power and Place: The Final Report of the National Inquiry into Missing and Murdered Indigenous Women and Girls (2019). The City of

Toronto understands that many Indigenous people living in Toronto are affected by historical and contemporary injustices which continue to perpetuate profound trauma and social and cultural impacts on most, if not all, aspects of life. The City further acknowledges that reconnecting with, maintaining, and celebrating a strong Indigenous identity through cultural expression, retention of language, spiritual practice, and community relations, is fundamental to the well-being of Indigenous communities.

SafeTO will work with Indigenous communities to advance actions and recommendations in the forthcoming reconciliation action plan being developed by the Indigenous Affairs Office that improve community safety and well-being for Indigenous peoples and advance Indigenous-led community safety and well-being priorities.

Priority Actions include:

- Advance Indigenous-led community safety and well-being priorities,
- Develop an implementation plan to guide the City's response to the Calls for Justice from National Inquiry into Missing and Murdered Indigenous Women and Girls, and
- Strengthen meaningful engagement with Indigenous organizations and communities by leveraging lessons learned on relationship building.

#### **Goal 4: Promote Healing and Justice**

Consistent exposure to events that can cause physical, emotional and psychological harm can have a negative impact on an individual's or a community's well-being, health and safety. There is a growing worldwide movement to develop trauma-informed cities and systems with a growing number of international best practices. City staff partnered with the THRIVE Toronto table facilitated by the Wellesley Institute to research trauma-informed city models and the pathways to becoming one. Additional context on what it means to become a trauma-informed and responsive City is attached in Appendix C.

Community justice is a significant factor of healing and resilience. The City does not have authority over the justice system, however, the City has an opportunity to better leverage municipal policy levers to advance outcomes for communities most impacted by injustice by creating local and accessible community justice approaches that bring together community supports (health, mental health, housing, justice, community and social supports) with the justice system, to address access, equity, human rights and the root causes of crime in pre/post charge spaces. This includes the development and implementation of culturally-responsive reintegration and restorative justice practices.

SafeTO will enable the City to embed trauma-informed and responsive services, approaches and tools that are grounded and directed by a thorough understanding of the complete impacts of trauma, adversity and violence on people, families and neighbourhoods. The plan will also use municipal levers in concert with other partners to advance culturally responsive and accessible community justice approaches.

Priority Actions include:

- Become a trauma-informed and responsive City,
- Embed anti-racism and human rights based approaches into policy development and service planning across all City divisions, agencies, and corporations, and

- Strengthen access to community justice by prioritizing culturally-responsive reintegration and restorative practices, including Justice Centres.

### **Goal 5: Invest in People**

The importance of promoting and investing in healthy families was consistently raised by participants through SafeTO community consultations. Participants felt that families are the “core system” and prevention strategies need to start with the family unit and extend beyond parenting. If parents, older siblings or other family members are adequately supported with protective factors including jobs, livable income, affordable housing, better transportation and food security, then youth and children can thrive and grow.

Building the capacity of residents to support one another, lead locally and participate in decision-making processes about strategies that impact their community are fundamental elements to enhancing community safety and well-being. Providing tools and embracing the strengths of communities by empowering resident driven, culturally responsive solutions is what we know works as a City.

SafeTO will identify programs and services to better support people, create access and build trusting relationships with the community to advance community safety and well-being.

Priority Actions include:

- Engage residents and build community capacity to lead,
- Enhance programs and services that promote child and family development and well-being,
- Invest in youth outcomes to ensure equitable, positive youth development, and
- Increase equitable access to supports for seniors.

### **Goal 6: Invest in Neighbourhoods**

Toronto is a city of neighbourhoods, each known for its unique quality or diversity and local culture. Some neighbourhoods experience higher levels of inequities that are unjust or unfair. If left unaddressed, these inequities can manifest into crime or victimization.

Community leaders are calling on the City to enhance existing efforts by implementing accountable place-based action plans that collaborate with local leaders on design and build on community assets to respond to local priorities. Documented strategies that promote physical revitalization and activities to counter urban blight that are complemented by social development approaches will have an immediate and long-lasting impact. Creating safe and accessible spaces that are activated and vibrant can enable healthy community engagement. The design, planning and governance of spaces can foster active and healthy communities, which can result in economic and cultural development.

Community safety and well-being and economic development are intricately linked, not only from the perspectives of individuals and households, but also from the perspective of quality of life in neighbourhoods. It should also be noted that community safety and well-being is defined differently across communities, especially in how it relates to local

economic development. Community safety and well-being must be viewed with the unique assets, needs, characteristics and challenges of the individual community in mind.

SafeTO will develop responsive and accountable place-based approaches to address the social, cultural, physical and economic environments that impact neighbourhoods and public spaces.

Priority Actions include:

- Embed transparent and accountable monitoring and reporting practices into integrated place-based planning,
- Add more safe and culturally-accessible community spaces and advance Indigenous place-making,
- Implement place-based economic empowerment and development approaches, and
- Enhance local cultural development.

### **Goal 7: Drive Collaboration and Accountability**

Community safety and well-being is complex and requires multi-sector efforts to ensure that the right supports are provided to those that require them at the right time. The majority of issues addressed within the context of community safety and well-being require the tools, resources, and mandates across sectors, not just of the City alone. SafeTO requires strong City leadership across City divisions, agencies and corporations, supported by multi-sector governance.

The current service system lacks intentionality in how systems collectively gather, integrate, evaluate, report, and communicate data and learnings to advance outcomes for residents and advance prevention. The current inability to analyze issues across sectors impacts the City's ability to serve complex individuals and creates barriers in community safety and well-being system planning.

SafeTO will build the necessary structures to use multi-sector data, evidence, and lived experience to respond to immediate needs, enhance collaboration, inform service planning, advance policing and law enforcement reform, integrate investments and drive communication campaigns.

Priority Actions include:

- Develop a comprehensive strategy to share, integrate and analyze data across multiple institutions for the purpose of informing real-time policy development and service planning,
- Advance policing and law enforcement reforms,
- Strengthen multi-sector collaboration through partnership and integrated investments, and
- Develop and implement robust communication approaches to advance SafeTO goals.



## Next Steps: The SafeTO Implementation Plan

Staff will report back to City Council in its December 2021 cycle with a SafeTO Implementation Plan that will detail the structures and steps required to advance the SafeTO goals and priority actions.

The Implementation Plan will be developed working with relevant City divisions, agencies and corporations, community stakeholders and external institutions and will leverage the Community Safety Partners Executive Leadership Team and its lessons learned from implementing the Short-Term Community Safety Pilot during the summer months to try and reduce gun violence in identified neighbourhoods.

The Implementation Plan will be informed by the findings of research and community consultation conducted during the development phase for SafeTO and will delineate where existing City strategies and programs are advancing SafeTO goals and where critical new priority actions to advance community safety and well-being in Toronto are required.

Along with timelines, divisional/agency leads, and intended outcomes for all priority actions, the Implementation Plan will include the following:

- **SafeTO Investment Approach:** Effective implementation of SafeTO will require dedicated staffing resources to lead implementation, coordinate critical partners, manage implementation issues, ensure ongoing community engagement and report on outcomes. It will also require investments in new directly delivered City programs and services and resources to invest in partners.
- **SafeTO Governance Structure:** Addressing community safety and well-being extends beyond the program and policy levers of the City of Toronto and requires the active leadership, assets and commitment from a cross-section of City agencies, and leaders in community, health, education, policing and the private sector to contribute to the development of the Implementation Plan and advise on the ongoing design and implementation. SafeTO provides an opportunity to build and launch a new governance structure including an advisory committee that engages multiple sectors in the shared work of building a safer Toronto.
- **SafeTO Intergovernmental Strategy:** Intergovernmental alignment, engagement, and investment is required to fully realize a number of the SafeTO priority actions. The City will need to engage appropriate Provincial ministries and Federal departments on aligned investments and policy considerations, and is already engaged in the Province's process to develop regulations under the *Community Safety and Policing Act*. The City will need to continue working regionally with area municipalities and with other big cities across the country to advance community safety and well-being.
- **SafeTO Indicator Framework:** The City is required by provincial legislation to develop an outcomes framework to monitor and evaluate SafeTO. SafeTO provides an opportunity to integrate data, system knowledge and processes across key stakeholders to inspire new, multi-sectoral ways of advancing

community safety and well-being. It will also enable us to understand what investments are truly having a positive impact and which investments are not effective. Work on the SafeTO Indicator Framework is already underway through a collaboration of the City, Toronto Public Health, Toronto Police Service and the Population Health Analytics Laboratory at the Dalla Lana School of Public Health, University of Toronto.

Once the *Community Safety and Policing Act, 2019* comes into force, police service Boards will be required to prepare and adopt strategic plans which consider the goals of the municipality's Community Safety and Well-being Plans. Accordingly, this report recommends forwarding the SafeTO: Toronto's Ten-Year Community Safety and Well-Being Plan to the Toronto Police Services Board and requests they adopt the SafeTO Plan through a Board resolution and partner with the City on the SafeTO Implementation Plan. The Toronto Police Services Board will also be required to report annually to the City on the provision of policing as it relates to the City's community safety and well-being plan once the *Community Safety and Policing Act, 2019* comes into force.

Advancing community safety and well-being is complex. It requires a range of expertise and collaboration across sectors and community. SafeTO, Toronto's Ten-Year Community Safety and Well-Being Plan, represents a fundamental shift in the way the City thinks about community safety and well-being by refocusing efforts on prevention and addressing the root causes of issues that negatively impact community safety. The Plan calls for a comprehensive ten-year movement to make a clear impact on the priority challenges of community trauma, violence, harm and victimization, and injustice, and builds a City that promotes the well-being and celebrates the resilience of residents. SafeTO will empower strong collaboration and multi-sector leadership to respond to this unifying vision for community safety and well-being in Toronto. City staff will submit the SafeTO Implementation Plan to Toronto City Council in its December 2021 cycle.

## **CONTACT**

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## **SIGNATURE**

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Denise Andrea Campbell  
Executive Director, Social Development, Finance and Administration

## **ATTACHMENTS**

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Appendix A: SafeTO: Toronto's Ten-Year Community Safety and Well-Being Plan  
Appendix B: SafeTO Goals and Priority Actions  
Appendix C: SafeTO Community Consultation Summary  
Appendix D: Safe TO: Roadmap to become a Trauma-Informed City

# SafeTO:

Toronto's Ten-Year Community Safety and Well-Being Plan

July 2021



# A MESSAGE FROM THE MAYOR

## Diversity Our Strength.

We as Torontonians wear our City's motto as a badge of pride celebrating our rich culture and values as the most diverse city in the world. Yet, systemic inequities are still present that threaten our city's values and work to drive divide. Rather than being able to enjoy and participate in Toronto's prosperity, many Torontonians, particularly those from Indigenous, Black and equity denied communities, must navigate a city where such inequities negatively contribute to their safety and well-being.

As Mayor, I believe it is vital to acknowledge this as we strive to build a 'Toronto for All' and live by our values which see us striving to be the most inclusive city in the world.

We are actively building:

A Toronto that acknowledges and actively works to reconcile the historical and contemporary injustices on the lives of Indigenous peoples;

A Toronto that introduces systemic changes to eradicate racism, discrimination and other forms of marginalization;

A Toronto where everyone feels a sense of belonging;

A Toronto that produces equitable opportunities for residents to participate;

A Toronto where everyone is safe, healthy and well.

I understand this is no easy task, but we at the City are up for the challenge. We have a city of immense potential, talent, and a history of being bold and innovative to address complex challenges.

And we have been steadily been putting into place key building blocks that will help us get there. In recent years, Toronto City Council has committed to a 20-year plan to transform how the City addresses poverty through TO Prosperity: Toronto Poverty Reduction Strategy. Five years into this plan, we've made progress with new investments and new ways of working. Council endorsed the Toronto Action Plan to Confront Anti-Black Racism to acknowledge and uproot systemic anti-Black racism in our systems and structures. Now in our third year of this plan, I am seeing changes in how we understand the effects of anti-Black racism, new partnerships, more diverse

leadership and new opportunities being created for Black Torontonians. We continue to deepen our work to advance reconciliation in our city. And this year, Council directed the development of a new Community Crisis Support Service to support Torontonians experiencing a mental health crisis.

It is for these reasons I am proud to present SafeTO, Toronto's Ten-Year Community Safety & Well-Being Plan. SafeTO builds on these and other efforts. It provides us with another opportunity to be bold, innovative and more collaborative in how we work together to build a safer Toronto by reimagining core elements of community safety through the prioritization of well-being and by inspiring a culture shift in our institutions and our city to pursue a more comprehensive and whole of government approach.

Created with contributions from over 2,500 stakeholders including community residents, the Toronto Police Service, our community partners and City divisions, agencies and corporations, SafeTO recognizes that advancing community safety and well-being is a shared responsibility. The City, cannot do this alone; the Toronto Police Service cannot do this

alone; no one entity can do this on their own. It takes all of us to work together in new ways to improve the lives of Torontonians. SafeTO lays out seven important goals and 26 priority actions that build on existing community safety efforts, leverage our strengths, and respond to important gaps that need new, multi-sector responses to ensure all Torontonians can thrive in our city.

As our city continues to evolve, we must evolve with it. We must create a Toronto that meets the needs of everyone who lives here. SafeTO will help us achieve this. It will deploy all of our people and resources in a coordinated manner and it will make a positive difference well beyond law enforcement.

On behalf of Toronto City Council, I would like to thank staff and the many people who contributed to building SafeTO. Your contributions and the resulting plan will work towards making Toronto a world class leader in community safety and well-being.

Sincerely,

Mayor John Tory



# A MESSAGE FROM THE CHIEF OF POLICE

The Province of Ontario has directed that all Municipalities prepare and adopt a Community Safety and Well-Being Plan by July 2021. This is mandated under the Police Services Act and its forthcoming successor, the Community Safety and Policing Act, 2019.

Once the Community Safety and Policing Act, 2019 comes into force, the Toronto Police Services Board will be required to prepare and adopt strategic plans that consider, and are aligned with, the goals of SafeTO; the City of Toronto's Community Safety and Well-being Plan.

To this end, The Toronto Police Service has been an active and willing partner in the development of this plan. I can assure you that we look forward to playing an equally supportive role in its implementation, and ultimately in its successes.

The days of police Services playing strictly reactive enforcement-driven roles with a singular focus on responding to crime and disorder are long gone. The Police Services Act, in fact, mandates our commitment to crime prevention. While the police will, and must, always have a role in reacting to incidents of crime, violence, and disorder, the Toronto Police Service has never been more committed to meaningful community engagement and cross-sector collaboration with intervention and prevention as our top priorities. This aligns exceptionally well with the community safety mission of SafeTO.

As your Chief of Police, I am united with our partner agencies in recognizing that the root causes of community violence, trauma, and injustice are complex and that they extend far beyond the scope of policing. No single sector can effectively address the intricacy, and in some cases the urgency, of community safety and well-being challenges. The Toronto Police Service has much to contribute, but we are one stakeholder in this broader mission. Simply put, complex efforts require a range of expertise, coordination, and collaboration across sectors and community, including city services, health and social supports, community-based organizations, community leaders, and private sector stakeholders.

Even internally, our contributions to SafeTO have not been insular, or developed through a narrow policing lens. On the contrary, the Toronto Police Service, Toronto Police Services Board, our Community-Police Liaison Committees, and Chief Consultative committees have been valued contributors to the development of SafeTO and will be key stakeholders in the SafeTO Governance Structure and Implementation Plan.

SafeTO builds on a number of significant strategies and programs already being advanced by the Toronto Police Service, including our Mental Health and Addictions Strategy, our Gun and Gang Strategy Framework, including the recently-formed Executive Leadership Table, The Way Forward, and our extensive and ongoing efforts with respect to police reform. Neighbourhood Community Officers will also play a fundamental role in the implementation of SafeTO working with residents and community partners to find solutions to community challenges. Moreover, our specialized units and squads that work towards reducing gun violence, gender-based violence, human trafficking



and hate crimes all play a role to advance community safety and well-being. Lastly and importantly, community engagement will continue to be key to our understanding of lived experiences and will be relied upon in our contributions to SafeTO.

The Toronto Police Service has never been more committed to working with the City, other levels of government, health and social services, community organizations, community leaders, and businesses to create a safer Toronto for all. This commitment is critical to our guiding principle, To Serve and Protect.

James Ramer, M.O.M.

Chief of Police

## BACKGROUND

Within the past decade, Toronto has strengthened its position as a world class city due to its high quality of life, social diversity, and strong economy.

However, as Toronto continues to grow and evolve, we are faced with challenges. Not everyone gets to equitably participate in Toronto's prosperity. Longstanding systemic inequities continue to divide residents and communities by impacting the ways in which they can interact with each other and participate within our city. These inequities are embedded within our social (health, education, justice), economic, and political systems and have impacts on the conditions that influence the health and well-being of residents. If left unattended, growing inequities in systems, policies, programs and services across Toronto can manifest into complex conditions such as homelessness, food insecurity, poverty, community violence, and crime that severely threaten community safety and well-being for Torontonians, particularly Indigenous, Black and equity-deserving communities.

To ensure a greater equitable experience in how we advance community safety and well-being, it is critical we begin to address the underlying inequities that fuel these conditions impacting Torontonians across the city.

*"A different type of Community Safety and Well-Being Plan for a different time." - Mayor John Tory*

## A SHIFT IN THINKING

Community safety and well-being refers to "the ideal state of a sustainable community where everyone is safe, has a sense of belonging, opportunities to participate, and where individuals and families are able to meet their needs for education, health care, food, housing, income, and social and cultural expression."<sup>1</sup> It is responsive to the social determinants of health and many aspects of our social, physical, emotional and spiritual well-being to ensure our basic needs are met and our communities are thriving.

Community residents, advocates, and academics have called for a fundamental shift in the ways in which the City of Toronto thinks about community safety. Traditionally, governments have looked to address community safety issues through a lens of law enforcement and crime, using policing, special constables, and security or by-law officers as the primary response.

An enforcement-only approach to community safety increases barriers and risks for Torontonians, particularly those from Indigenous, Black, and equity-deserving communities, often leading to negative outcomes due to embedded systemic racism.<sup>2</sup>

A law enforcement lens that embeds a deep understanding of and commitment to confronting structural anti-Indigenous and anti-Black racism, inequity and bias, has its place in responding to community safety challenges. However, even this type of enforcement cannot be the only response, or the default response to community safety challenges. It alone, cannot address root causes, proactively reduce risks, or promote and maintain community well-being. Government services, health services, and education systems acting alone, have also struggled to uproot systemic inequity and to effectively respond to community violence, trauma and injustice.

As such, communities have called on the City to reimagine core elements of community safety and shift from a reliance on reactive emergency response to a culture of prevention. This call looks to address community safety by engaging a diverse range of skillsets, mandates, and resources under the guidance of a shared vision. A key step towards creating this shift in thinking is the development of SafeTO: Toronto's Ten-Year Community Safety and Well-Being Plan.

1. Ministry of Community Safety and Correctional Services - A Strong Safe Ontario - Booklet 3 - Planning Framework | Ministry of Attorney General (gov.on.ca)

2. Ontario Human Rights Commission. 2017. "Under suspicion: Research and consultation report on racial profiling in Ontario". <http://www.ohrc.on.ca/en/book/export/html/21201>

# A PROVINCIAL REQUIREMENT TO RE-THINK COMMUNITY SAFETY AND WELL-BEING

Community calls for the City to reimagine community safety have been strengthened by provincial legislation recognizing the complexity of community safety challenges and the need to respond with multi-sector approaches that emphasize social development and prevention. Under the *Police Services Act, 2019* and its forthcoming successor, the *Community Safety and Policing Act, 2019* (which is not yet in force), all municipalities are mandated to prepare and adopt a Community Safety and Well-Being Plan by July 2021. A community safety and well-being plan is a long-term tool to address key social priorities and root causes of crime, social disorder and ill-health, with identified shared goals through

multi-sectoral partnerships. While the provincial legislation provides some direction on the content of the plan, it also allows for flexibility respecting the unique context and needs of each municipality.

The development of SafeTO was based on the Community Safety and Well-Being Planning Framework developed by the Ministry of the Solicitor General and informed by a broad range of sectors including input from City, and the Police Service and Board. The framework is intended to support municipalities in a developing a comprehensive approach to addressing community safety and well-being.

Upstream and downstream programs are equally important and work together to support community safety and well-being. For Toronto to make the shift envisioned by the Provincial Community Safety and Well-Being Planning Framework, the majority of investments need to be focused on developing and/or enhancing programs that fall under social development, prevention, and risk intervention to reduce the reliance on emergency response and strengthen community capacity to promote and maintain safety and well-being.

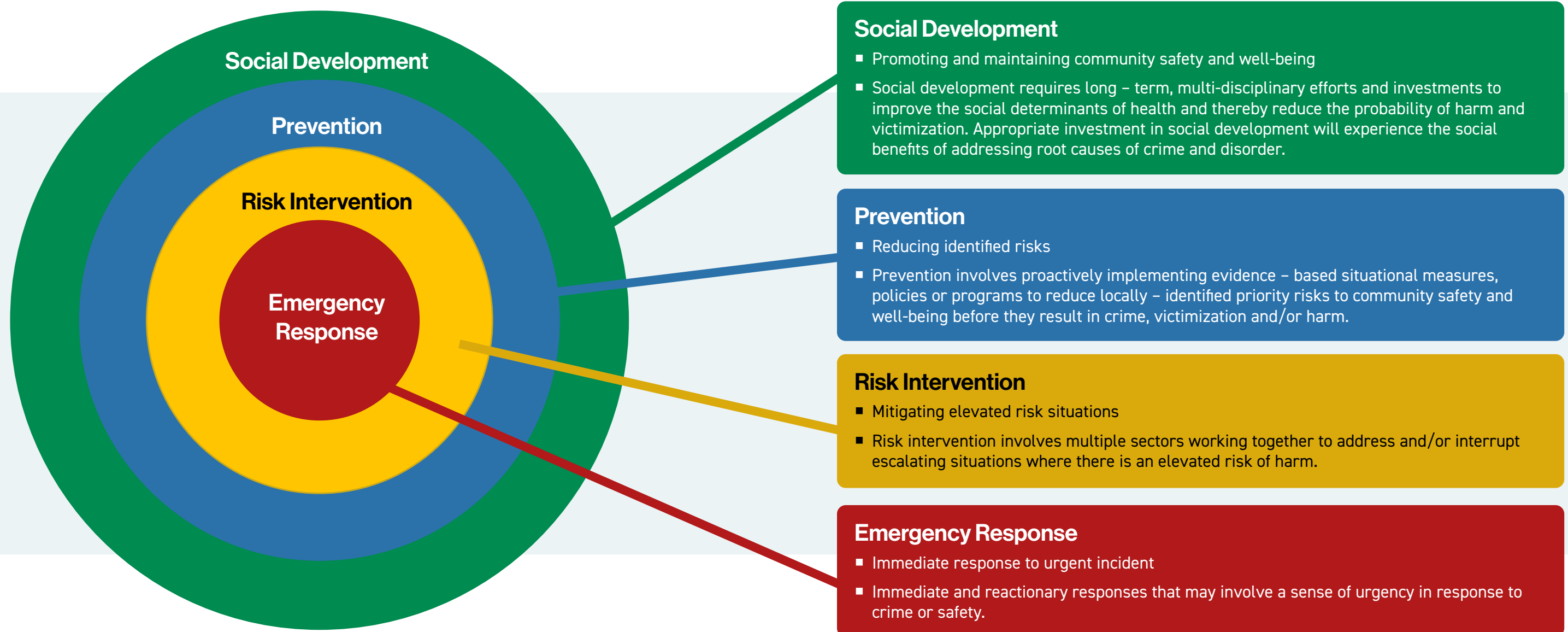


Figure 1: Community Safety and Well-being Planning Framework

# WHAT IS SAFETO?

SafeTO is the City of Toronto's comprehensive ten-year plan to advance community safety and well-being. SafeTO builds on years of knowledge and collaboration across City divisions and agencies and in partnership with community agencies, residents, other sectors and other orders of government to provide a roadmap for how social systems that serve Torontonians, such as community services, healthcare systems, education systems, justice systems and police can work collaboratively to support community safety and well-being. By addressing the root causes of conditions that negatively impact community safety and well-being, SafeTO will work to build individual and community resilience, improve services and systems of care, and positively impact the lives of all Torontonians.

At its core, the vision of SafeTO is that Toronto is a safe city that promotes the well-being and celebrates the resilience of residents. To achieve this vision, **SafeTO has six guiding principles:**

## EMBED AN EQUITY AND HUMAN RIGHTS APPROACH



## ENSURE TRUST, TRANSPARENCY AND ACCOUNTABILITY



## BUILD COMMUNITY CAPACITY TO LEAD



## DUTY OF CARE



## DO NO HARM



## BE RESPONSIVE AND ADAPTABLE





# WHAT WE'VE HEARD

SafeTO was informed by extensive stakeholder engagement and consultations. From November 2020 to April 2021, staff engaged in a community consultation process. Engagement included population-specific, issue-specific, and geographic-based consultations as well as internal City engagement with 18 City divisions, agencies and corporations. Community consultations were targeted to stakeholders providing services related to or directly experiencing challenges related to community safety and well-being. This was complemented by engagement with subject matter experts, residents and community thought-leaders. In total, over 2,500 stakeholders were engaged, with written submissions also accepted. A public survey was available from March 1-15, 2021 that received an additional 1,500 responses.

Below are a selection of narratives from community consultations used to inform the development of SafeTO's priority challenges and goals.

*“The City needs to do better at listening to the community, both community agencies doing front line work and people with lived experience. The City often holds consultations but then never follows through with the suggestions people give.”*

*“People in crisis outside of our space have no proper infrastructure for interventions outside of criminalizing the person. Someone inevitably calls the police, there needs to be a safe alternative for everyone involved.”*

*“Vulnerable People go from the hospital to police, then to the streets, or police to the hospital then to the streets, or service agency to police, to jail, from jail back to the streets, then back to police.”*

*“Decriminalize all drugs and provide safe supply immediately!”*

*“Implement trauma informed practices at every level, in every department.”*

*“Access to health care is justice, access to education, is justice and access to City services is a form of justice, stop focussing on criminal justice”*

*“Economic stability is the long-term plan. If everybody is on the same playing field then there is no desperation for money and compromising to earn money from crime.”*

*“My Indigenous identity should not be defined by programs and services rooted in colonialism. Indigenous identity matters, our children, elders, ancestors, brothers, sisters and 2-spirited peoples matter. Our identity and culture should be celebrated and embraced through voluntary actions and considerations. Not because they asked.”*

*“Safety and Well-being is for people to see me and accept me for who I am...I just want to belong.”*

# WHY IS SAFETO NEEDED? TORONTO'S PRIORITY SAFETY & WELL-BEING CHALLENGES

Based on a review of past and present public consultation data, City staff identified a number of critical challenges to the safety and well-being of Torontonians. The issues are many and complex. Staff analysis revealed four key priority challenges that point to the most urgent root causes of safety and well-being issues in Toronto. These four priority challenges include:

## CHALLENGE 1 COMMUNITY TRAUMA

- RATIONALE**
- Communities and neighborhoods that experience higher levels of inequities and/or experience higher levels of violence are most vulnerable to becoming traumatized. Unaddressed trauma can manifest in physical, emotional, and psychological harm creating negative impacts on community well-being, health and safety. Systemic racism and inequity are primary contributing factors of trauma.
  - There is growing evidence that the experience of trauma, multi-generational or intergenerational racial trauma, and early trauma as a result of adverse childhood experiences can cause life-long harm, poor health outcomes and in some cases perpetuate violence.
  - Community consultations amplified the need for the City to prioritize trauma. Recognizing trauma as a contributing root cause and directly addressing the impact of trauma on individuals and communities through culturally responsive approaches can help facilitate recovery from the consequences and manifestations of trauma.

- EXAMPLES**
- Inter-generational and multi-generational trauma as a result of historic harms experienced by Indigenous peoples are often unacknowledged or unaddressed and can result in further traumatization as a result of interactions with systems.
  - Preliminary data from the Office of the Chief Coroner for Ontario demonstrates there was a record high number of confirmed opioid deaths in Toronto in 2020, with a total of 521 fatalities. This represents a 78 percent increase from 2019 and a 280 percent increase from 2015. There has been a notable increase in overdose deaths since the start of the COVID-19 emergency. This has contributed to extensive grief and loss and has had a devastating impact on the family and friends of lives lost and the frontline workers who supported them.

## CHALLENGE 2 COMMUNITY VIOLENCE

- RATIONALE**
- Community violence - including gun violence, gender-based and intimate partner violence - has been on the rise in Toronto and was declared a public health issue by the Toronto Board of Health in 2019.
  - The traumatic impact of gun violence in communities is not only experienced by individuals, it is experienced by communities which can contribute to negative long-term health outcomes and can be a contributing factor to the propensity to commit violence.
  - There have been calls to strategically mobilize short-term and long-term actions in coordination with multi-sector partners, community leaders, and residents to interrupt the immediate risks of community violence and continuously work to prevent it.
- EXAMPLES**
- As of May 19, 2021, there have been 119 shootings in Toronto resulting in 46 injuries and 12 people losing their lives.
  - Incidents of gender-based and intimate partner violence are also increasing in Toronto, particularly through the COVID-19 pandemic.

### CHALLENGE 3 HARM AND VICTIMIZATION

- RATIONALE**
- Experiencing both immediate and life-long harms or repeated victimization can be a risk factor of complex conditions that threaten community safety (e.g. mental health crisis, substance use, human trafficking, and hate crimes). Continued exposure to such harms can negatively impact the social determinants of health and further exacerbate the risk to equity-deserving communities.
  - Advancing policies and programs to reduce harm and victimization and further understand vulnerability will ensure individuals and communities have access to resources and supports such as victim/witness, psycho-social and other relevant supports that promote community healing while also beginning to address the root causes of these harms.
  - Vulnerability extends to instances of acquired brain injuries and developmental disabilities; the lack of understanding of these issues combined with the lack of appropriate supports presents an increased risk of engagement with the criminal justice system.<sup>3</sup>

- EXAMPLES**
- The number of hate-related incidents in Toronto has increased by 51 percent in 2020 with clear calls from the community for the City to prioritize efforts to address systemic racism and inequity.
  - Mental health calls to police are occurring at a rate of approximately 85 per day, and 76 percent of all FOCUS Toronto situations respond to mental health issues.
  - Acquired and Traumatic Brain Injuries are another notable concern given their prevalence among populations experiencing homelessness; a study conducted in 2008 found that of 904 people experiencing homelessness in Toronto, 53 percent had sustained at least one traumatic brain injury.<sup>4</sup>
  - In 2020, Toronto Paramedic Services responded to 3,861 suspected overdose calls, including 268 calls involving death. This is a 90 percent increase in the number of suspected overdose deaths attended by Toronto Paramedic Services. Criminalization of people who use drugs and limited access to harm reduction services, including safer supply, contributes to the increase of drug-related overdoses and death.<sup>5</sup>

### CHALLENGE 4 INJUSTICE

- RATIONALE**
- The reliance on an enforcement lens continues to perpetuate the over-representation of Indigenous, Black and equity-deserving communities in the criminal justice system. There is a lack of consistency in terms of the application of a community justice lens in the approaches that address the root causes of community safety and well-being.
  - A paradigm shift to restorative justice places the person at the centre and is assessed against the reduced barriers and marginalization of Indigenous, Black and equity-deserving communities' experience of community safety and well-being. There are clear calls from the community to mobilize culturally responsive and restorative practices and reintegration approaches

- EXAMPLES**
- Nearly one out of every 15 young Black men in Ontario experienced jail time, compared to one out of about every 70 young white men, and incarcerated Black people were more likely to live in low-income neighbourhoods. The reliance on an enforcement lens continues to perpetuate the over-representation of Indigenous, Black and equity-deserving communities in the criminal justice system.
  - Between September 2018 and October 2019, Toronto's Metro West Court-house received approximately 306 youth cases from 23 Division and 312 from 31 Division. Taken together, 23 and 31 Divisions account for over 40% of all youth cases seen at the Metro West Courthouse.
  - Despite making up only 4.1% of the population in Ontario under age 15, Indigenous children represent approximately 30% of foster children.<sup>6</sup>

The priority challenges identified here are all interconnected. SafeTO's goals may address multiple priority challenges and capture other aspects of community safety and well-being beyond these challenges.

3. McIsaac, et. al. 2016. "Association between traumatic brain injury and incarceration: a population-based cohort study. CMAJ, 4(4), 746-753. <https://pubmed.ncbi.nlm.nih.gov/28018890/>

4. Hwang, S. et. al, 2008. "The effect of traumatic brain injury on the health of homeless people". CMAJ, 179(8), 779-784. <https://www.ncbi.nlm.nih.gov/pmc/articles/PMC2553875/>

5. Toronto Board of Health Report. June 3, 2021. Toronto Overdose Action Plan: Status Report 2021. Toronto Overdose Action Plan: Status Report 2021

6. Ontario Human Rights Commission. 2018. "Interrupted childhoods: Over-representation of Indigenous and Black children in Ontario child welfare". [http://www.ohrc.on.ca/en/interrupted-childhoods#\\_ftnref38](http://www.ohrc.on.ca/en/interrupted-childhoods#_ftnref38)

# TAKING A PUBLIC HEALTH APPROACH TO ACHIEVE SAFETO

Approaches focused on the social determinants of health -- the economic and social conditions that influence individual and community differences in health status - are effective at preventing community violence, vulnerability and the risk factors that negatively impact communities. SafeTO will use a public health approach to achieve its goals as it recognizes the interconnectedness of complex conditions and mobilizes a wide range of evidence-informed interventions to respond to these conditions while monitoring the results from upstream prevention efforts to advise ongoing investments and system reform. The SafeTO public health approach includes:

1. Defining the Problem
2. Identifying its Causes and Risk and Protective Factors
3. Developing and Testing Prevention Strategies
4. Ensuring the Widespread Adoption of Effective Strategies

In applying this public health lens to advance community safety and well-being, SafeTO will advance seven goals with a total of twenty-six priority actions. These include:

- Reduce Vulnerability
- Reduce Violence
- Advance Truth and Reconciliation
- Promote Healing & Justice
- Invest in People
- Invest in Neighborhoods
- Drive Collaboration & Accountability



For a comprehensive overview of the SafeTO goals and priority actions please refer to Appendix 1



# SAFETO GOALS AND PRIORITY ACTIONS

GOALS	1. Reduce Vulnerability	2. Reduce Violence	3. Advance Truth and Reconciliation	4. Promote Healing and Justice	5. Invest in People	6. Invest in Neighbourhoods	7. Drive Collaboration and Accountability
<b>WHAT</b>	Reduce harm and victimization through proactive mental health and vulnerability support strategies, life stabilization, community-led crisis support models, and collaborative risk-driven approaches.	Implement dedicated strategies to prevent and reduce gun violence, interpersonal violence, gender-based and intimate partner violence through strategic and timely coordinated efforts across communities and systems with a focus on violence prevention, intervention, interruption, response and recovery	Advance actions and recommendations in the Path to Reconciliation report that improve community safety and well-being for Indigenous Peoples and advance Indigenous-led community safety and well-being priorities.	Transform the City to embed trauma informed, responsive and specific services, approaches and tools that are grounded and directed by a thorough understanding of the complete impacts of trauma, adversity, racism and violence on people, families and neighbourhoods.	Strengthen Support for families, children, youth and adults through investment, skill development and increased access to services and opportunities.	Develop responsive and accountable place-based approaches to address the social, cultural, physical and economic environments that impact neighbourhoods and public spaces.	Reimagine core elements of community safety and wellbeing to build the necessary structure to use multi-sector data, evidence and lived experience to respond to immediate need, enhance collaboration, inform service planning, advance policing and law enforcement reform, and integrate investments.
<b>PRIORITY ACTIONS</b>	1.1 Enhance Multi-Sector Mental Health and Vulnerability Supports	2.1 Develop a Comprehensive Multi-sector Gun Violence Reduction Plan	3.1 Advance Indigenous-Led Community Safety and Well-Being Priorities	4.1 Become a Trauma-Informed and Responsive City	5.1 Engage Residents and Build Community Capacity to Lead	6.1 Embed Transparent and Accountable Monitoring and Reporting Practices into Integrated Place-Based Planning	7.1 Develop a Comprehensive Strategy to Share, Integrate and Analyze Data Across Multiple Institutions for the Purpose of Informing Real-Time Policy Development and Service Planning
	1.2 Implement Life Stabilization and Service Navigation Supports	2.2 Develop a Comprehensive Gender-Based and Intimate-Partner Violence Reduction Strategy	3.2 Develop an Implementation Plan to Guide the City's Response to the Calls for Justice from the National Inquiry into Missing and Murdered Indigenous Women and Girls	4.2 Embed Anti-Racism and Human Rights Based Approaches into Policy Development and Service Planning across all City Divisions, Agencies and Corporations	5.2 Enhance Programs and Services that Promote Child and Family Development and Well-Being	6.2 Add more Safe and Culturally-Accessible Community Spaces and Advance Indigenous Place-Making	7.2 Advance Policing and Law Enforcement Reform
	1.3 Embed the Community Crisis Support Service as a Well-Resourced, First-Response Service City-wide	2.3 Strengthen Community Crisis Response Protocols to Better Support Victims and Communities Impacted by Violence	3.3 Strengthen Meaningful Engagement with Indigenous Organizations and Communities by Leveraging Lessons Learned on Relationship Building	4.3 Strengthen Access to Community Justice by Prioritizing Culturally-Responsive Reintegration and Restorative Practices, including Justice Centres	5.3 Invest in Youth Outcomes to Ensure Equitable, Positive Youth Development	6.3 Implement Place-Based Economic Empowerment and Development Approaches	7.3 Strengthen Multi-Sector Collaboration through Partnership and Integrated Investments
	1.4 Strengthen, Align and Expand Capacity of Collaborative Risk-Driven Approaches to Reduce Risk of Harm and Victimization				5.4 Increase Equitable Access to Supports for Seniors	6.4 Enhance Local Cultural Development	7.4 Develop and Implement Robust Communication Approaches to Advance SafeTO Goals
	1.5 Advance Strategies, Programs and Services that Reduce Harm Related to Substance Use						



## WHERE DO WE GO FROM HERE? MOVING FORWARD

Advancing community safety and well-being is complex. It requires a range of expertise and collaboration across sectors and community. SafeTO: Toronto's Ten-Year Community Safety and Well-being Plan, represents a fundamental shift in the way the City thinks about community safety and well-being by refocusing efforts on prevention and addressing the root causes of issues that negatively impact community safety. The Plan calls for a comprehensive ten-year movement to make clear impact on the priority challenges of community trauma, violence, harm and victimization, and injustice, and builds a city that promotes the well-being and celebrates the resilience of residents.

SafeTO will empower strong collaboration and multi-sector leadership to respond to this unifying vision for community safety and well-being in Toronto. SafeTO provides a roadmap for how the City and social systems that serve Torontonians, such as community services, healthcare systems, education systems, justice systems, police and business, can work collaboratively across different sectors and across governments to support community safety and well-being. It requires integrated provincial and federal investments to enable key actions to start, be scaled, and be sustained. SafeTO requires us to think differently, work collaboratively and do better for Torontonians.

In order to have impact, an implementation plan is needed to turn SafeTO from a promise into action. A strong SafeTO Implementation Plan requires details about the structures and steps necessary to advance SafeTO's goals and priority actions. To develop this SafeTO Implementation Plan, City staff, working in partnership with key stakeholders, will build off the key insights identified through the research and community consultations conducted.

Along with timelines, accountabilities, and intended outcomes for all priority actions, the SafeTO Implementation Plan will include:

- An Investment Approach to guide resources where needed most;
- A Governance Structure to support multi-sector collaboration and accountability;
- An Intergovernmental Strategy to leverage and engage Provincial ministries, Federal departments, and other cities in driving change for Torontonians; and
- An Indicator Framework to ensure we can measure impact, invest in solutions that work, and know we are making a positive difference in the safety and well-being of Torontonians.

GOALS	1. Reduce Vulnerability	2. Reduce Violence	3. Advance Truth and Reconciliation	4. Promote Healing and Justice	5. Invest in People	6. Invest in Neighbourhoods	7. Drive Collaboration and Accountability
<b>WHAT</b>	Reduce harm and victimization through proactive mental health and vulnerability support strategies, life stabilization, community-led crisis support models, and collaborative risk-driven approaches.	Implement dedicated strategies to prevent and reduce gun violence, interpersonal violence, gender-based and intimate partner violence through strategic and timely coordinated efforts across communities and systems with a focus on violence prevention, intervention, interruption, response and recovery	Advance actions and recommendations in the Path to Reconciliation report that improve community safety and well-being for Indigenous Peoples and advance Indigenous-led community safety and well-being priorities.	Transform the City to embed trauma informed, responsive and specific services, approaches and tools that are grounded and directed by a thorough understanding of the complete impacts of trauma, adversity, racism and violence on people, families and neighbourhoods.	Strengthen Support for families, children, youth and adults through investment, skill development and increased access to services and opportunities.	Develop responsive and accountable place-based approaches to address the social, cultural, physical and economic environments that impact neighbourhoods and public spaces.	Reimagine core elements of community safety and wellbeing to build the necessary structure to use multi-sector data, evidence and lived experience to respond to immediate need, enhance collaboration, inform service planning, advance policing and law enforcement reform, and integrate investments.
<b>PRIORITY ACTIONS</b>	1.1 Enhance Multi-Sector Mental Health and Vulnerability Supports	2.1 Develop a Comprehensive Multi-sector Gun Violence Reduction Plan	3.1 Advance Indigenous-Led Community Safety and Well-Being Priorities	4.1 Become a Trauma-Informed and Responsive City	5.1 Engage Residents and Build Community Capacity to Lead	6.1 Embed Transparent and Accountable Monitoring and Reporting Practices into Integrated Place-Based Planning	7.1 Develop a Comprehensive Strategy to Share, Integrate and Analyze Data Across Multiple Institutions for the Purpose of Informing Real-Time Policy Development and Service Planning
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	1.3 Embed the Community Crisis Support Service as a Well-Resourced, First-Response Service City-wide	2.3 Strengthen Community Crisis Response Protocols to Better Support Victims and Communities Impacted by Violence	3.3 Strengthen Meaningful Engagement with Indigenous Organizations and Communities by Leveraging Lessons Learned on Relationship Building	4.3 Strengthen Access to Community Justice by Prioritizing Culturally-Responsive Reintegration and Restorative Practices, including Justice Centres	5.3 Invest in Youth Outcomes to Ensure Equitable, Positive Youth Development	6.3 Implement Place-Based Economic Empowerment and Development Approaches	7.3 Strengthen Multi-Sector Collaboration through Partnership and Integrated Investments
	1.4 Strengthen, Align and Expand Capacity of Collaborative Risk-Driven Approaches to Reduce Risk of Harm and Victimization				5.4 Increase Equitable Access to Supports for Seniors	6.4 Enhance Local Cultural Development	7.4 Develop and Implement Robust Communication Approaches to Advance SafeTO Goals
	1.5 Advance Strategies, Programs and Services that Reduce Harm Related to Substance Use						



# SafeTO Community Consultation Summary

## **SECTION 1 | Background**

- What is SafeTO?
- Purpose of Consultation
- Who was Consulted

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- Highlights from the SafeTO Survey

## **SECTION 3 | Reduce Vulnerability**

- Housing and Homelessness
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## **SECTION 7 | Invest in People**

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## **SECTION 8 | Invest in Neighbourhoods**

- Economic Development
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## **SECTION 9 | Drive Collaboration and Accountability**

- Integrated Data
- Integrated Investments
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- Communication

## **SECTION 1 | what is SafeTO?**

SafeTO is a comprehensive Ten-Year Community Safety and Well-Being Plan that reimagines core elements of community safety and well-being in order to shift our paradigm from a reliance on reactive emergency response to a culture of proactive prevention.

### **Purpose of Consultations**

Based on a review of past and present public consultation data, City staff identified a number of critical challenges to the safety and well-being of Torontonians. The issues are many and complex. Staff analysis revealed four key priority challenges that point to the most urgent root causes of safety and well-being issues in Toronto:

- Community Trauma
- Community Violence
- Harm and Victimization
- Injustice

The SafeTO consultation process focused on what SafeTO should prioritize by exploring how existing community safety initiatives were responsive or not responsive to the identified priority challenges, what people were struggling with in regards to community safety and well-being, and what gave them hope. The consultation process also explored how the City could better engage them through SafeTO. .

### **Who Was Consulted?**

From November 2020 to April 2021, City staff engaged in an extensive community consultation process. Engagement included population-specific, issue-specific, and geographic-based consultations as well as internal discussions with 18 City divisions, agencies and corporations. Community consultations were targeted to stakeholders providing services related to or directly experiencing challenges related to community safety and well-being. This was complemented by engagement with subject matter experts, residents and community thought-leaders. In total, over 2,500 stakeholders were engaged, with written submissions also accepted. A public survey was available from March 1-15, 2021 that received an additional 1,500 responses.

Throughout the consultations, City staff heard that despite the engagement that was completed, there is further opportunity for more consultation throughout implementation of SafeTO. Community stakeholders requested that staff continue to engage them throughout the SafeTO implementation process to ensure transparency and accountability. These requests have influenced the guiding principles and goals of SafeTO.

This document provides a high-level summary of stakeholder feedback and learnings to address the identified SafeTO priority challenges. Feedback received through the consultation process informed the development of seven SafeTO strategic goals: Reduce Vulnerability; Reduce Violence; Advance Truth and Reconciliation; Promote Healing and Justice; Invest in People; Invest in Neighbourhoods; and Drive Collaboration and Accountability. This summary report has thematically grouped insights under these goals.

## SECTION 2 | SafeTO Survey

The SafeTO survey ran from March 1-15, 2021 and was promoted through existing City and partner networks, on the City's website, and through social media. In total, the survey received 1,500 responses. The survey asked 38 questions across the following four thematic areas:

1. Needs for Well-being
2. Needs for Safety
3. Priorities for Well-being and Safety
4. Community Assets and Resources

Information gathered from the survey was used to inform the development of the SafeTO Plan and will inform development of the SafeTO Implementation Plan. The following is a high-level summary of the results of SafeTO survey.

### Needs for Well-being

For those that completed the survey,

- 53% were satisfied with their current state of well-being and 24% were unsatisfied
- 70% of people's needs were met in their community and 30% were not
- 52% know where to get support to meet their needs, 49% of people rely on family friends
- 30% of people did not have what they need in their community to meet their needs
- 27% of people do not know where to get their needs met

Barriers to Well-being in Neighbourhood	Who would you reach out to improve your Well-being?
<ul style="list-style-type: none"> <li>• 52% - Lack of Stable Housing</li> <li>• 46% - Lack of Crisis Mental Health Supports</li> <li>• 43% - Lack of Economic Opportunities</li> <li>• 17% - Lack of Harm Reduction Services</li> <li>• 15% - Lack of Culturally Responsive Supports</li> </ul>	<ul style="list-style-type: none"> <li>• 77% would seek input from family and friends</li> <li>• 53% would seek the support of a community service</li> <li>• 28% would seek the support of community member</li> <li>• 19% would seek support from faith communities</li> <li>• 8% did not have anyone to turn to</li> </ul>

### Needs for Safety

How do you feel walking alone in your neighbourhood?	What defines a safe neighbourhood for you?
<ul style="list-style-type: none"> <li>• 36% Reasonably Safe</li> <li>• 30% Somewhat Safe</li> <li>• 19% Very Unsafe</li> <li>• 15% Very Safe</li> </ul>	<ul style="list-style-type: none"> <li>• 69% - Feeling safe to live, work, travel</li> <li>• 56% - Feeling economically safe</li> <li>• 63% Feeling minimal concern for your physical safety</li> <li>• 48% Feeling your beliefs, values and identity are safe in your neighbourhood</li> </ul>

## Priorities for Community Safety and Well-being

<b>Violent Crime</b>
<ul style="list-style-type: none"> <li>• 27% percent of individuals were impacted by a violent crime.</li> <li>• 33% of those individuals did not contact police but sought alternative levels of support compared to 25% who called 911. 22% of people took no action at all.</li> <li>• 38% of those impacted by an incident felt that they did not have access to support versus 26% who did. The top support mobilized was:                             <ul style="list-style-type: none"> <li>○ 51% - Support from Family Members</li> <li>○ 51% - Support from Community Members</li> <li>○ 33% - Mental Health Services</li> <li>○ 33% - Greif Counselling Support Services</li> <li>○ 21 % Cultural Services</li> </ul> </li> </ul>

<b>What are the most important Community Safety and Well-being Issues in the Neighbourhood?</b>	<b>Which of the following areas do you think are important in addressing violence in Toronto?</b>
<ul style="list-style-type: none"> <li>• 49% - Mental Health</li> <li>• 46% - Housing and Homelessness</li> <li>• 42% - Crime</li> <li>• 41% - Discrimination and Racism</li> <li>• 35% - Community Violence</li> </ul>	<ul style="list-style-type: none"> <li>• 66% - Housing Affordability</li> <li>• 61% - Jobs and Economic Opportunity</li> <li>• 60% - Youth Programs</li> <li>• 54% - Violence Prevention</li> <li>• 53% - The Education System and Improving Academic Outcomes</li> </ul>

## Community Assets and Resources

<b>Which of the following resources do you identify most with?</b>	<b>What support do you think that your community needs?</b>
79% Family Friends 59% Recreational Space 36% Services in the Community 19% Faith Community 11% Ethno-Cultural Community	62% Violence Prevention Services 52% Programs for Youth 50% Better Living Conditions 49% Recreational Spaces 45% Economic Opportunities

## SECTION 3 | Reduce Vulnerability

SafeTO will reduce harm and victimization through proactive mental health and vulnerability support strategies, life stabilization, community-led crisis support models, and collaborative risk-driven approaches

The following is a high-level summary of themes of vulnerability that were surfaced through the SafeTO consultation process.

## Housing and Homelessness

- A contributing factor to the risk vulnerable populations face raised across the consultations was the lack of access to safe and affordable housing, including challenges with long waitlists for affordable housing. The need for supportive housing to help the most vulnerable stay housed was raised consistently throughout the consultations.
- Stakeholders recommended the City review current assessment tools for supportive housing to better identify high-need or high-risk individuals and the supports that they require.
- Access to stable and affordable housing was cited as a core issue connected to the escalation of risks faced by vulnerable residents that can contribute to criminalization. There were calls for enhanced services within Toronto Community Housing Corporation (TCHC) communities.
- Stakeholders recommended that Toronto shelter standards be updated to reflect the new hotel programs and new services implemented, including health and harm reduction measures. Additionally, participants urged the City to treat the hotel programs as transitional housing programs rather than shelter programs.
- Eviction prevention programs are in high demand. Both SPIDER and EPIC were pointed to as positive models working to prevent evictions.
- Several consultations made reference to the City's "encampment situation". Stakeholders called for the City to apply a rights-based approach that includes the provision of increased health, safety and sanitation services in and around encampments, complimented by a moratorium on encampment evictions. Groups in support of those staying outside called for updated City policies and procedures to respond to encampments.
- Participants from this sector frequently commented that Streets to Homes was not resourced to provide adequate follow-up for many of the high needs clients who are recently housed, which leads to these clients returning to the streets.
- Many frontline workers who partook in the consultations identified challenges with Shelter, Respite and Hotel programs frequently restricting clients from services, turning them out into the streets or encampments.
- Some individuals identified daytime drop-in programs as a pivotal part of the response to homelessness but are that these programs are not regularly considered part of the strategy. The coordination efforts of the Toronto Drop-In Network was identified as a best practice.
- New SSHA-implemented data reporting through an online dashboard was identified as a positive development that is transparent and that enhances community service planning to better respond to the needs of homeless individuals.

## Mental Health and Mental Illness

*"The City needs to distinguish between mental health and mental illness. Mental health tools can be provided to communities to increase awareness and reduce stigma. When responding to mental illness, the City and the Province must address that the system is set up to victimize or label people to access mental health services. This flaw can reduce a person's ability to access services, which can damage relationships and further isolates vulnerable populations. Untreated mental illness results in interactions with Police, which can escalate the situation. Lack of access and poor service is at the root."*

- Challenges related to mental health featured heavily across consultations. Waitlists and the lack of prompt services, particularly for vulnerable communities, was the most commonly raised issue.
- There is a distinct need for culturally responsive mental health supports within Indigenous, Black and racialized communities. Calls for alternative and non-police, culturally responsive mental health crisis intervention programs were consistent across all consultations.
- Many stakeholders pointed out that a lack of preventative, early intervention tools and coordination across system partners was leading to compounding mental health problems and unnecessarily escalated situations that could be prevented.
- Investment in a coordinated mental health and substance use system is needed in order to create a comprehensive and coordinated response for dual diagnosis. A lack of access to health services and other preventative approaches exacerbates issues faced by people experiencing mental health and substance use challenges.
- Multiple stakeholders struggled with trying to prevent the criminalization of complex individuals.
- Parents, communities, faith-based organizations, businesses and peers play a significant role in having conversations about mental health. Providing tools such as psychological first aid and mental health literacy training to residents and businesses will reduce stigma and empower informal supports within communities.
- Multiple stakeholders called for a drastic increase in mental health and substance use services. For mental health, the demands centred around more on-site and neighbourhood-based supports that are easy to access, especially in times of crisis. For addictions, the demand for more spaces for detox, withdrawal and rehab was raised.
- Participants noted that grief, loss, and bereavement supports are needed not only for community but also for frontline staff working in the sector. Frontline staff are experiencing direct and vicarious trauma and have limited access to mental health or other supports.
  - *"Between the 14<sup>th</sup> and 25<sup>th</sup> five people died within the community and within the last 2 days I found 3 dead bodies in two days while on outreach. There is no space to grieve or take a break between people passing, it is constant, EAP is not accessible and there is no support."*

## Harm Caused by Substance Use

- Overdose prevention sites and safe injection sites were highlighted as examples of successful programming that need to be expanded urgently. There were calls to coordinate them across 24-hour 7 day a week availability combined with increased outreach, engagement and enhanced safety measures in the surrounding communities.
- The expansion of safe supply programs was also raised - both the effects on crime and individual health and safety were discussed. The push for more safe supply programs and treatment supports, and education about what they are and how they work, were vocalized by a wide range of participants, including harm reduction workers, policy staff, law enforcement and people who use drugs.
- Participants called for the decriminalization of drugs for personal use but voiced that the pathway to decriminalization needs to be thoughtful and guided by a diverse set of stakeholders representing the communities most affected. Stakeholders noted that the response to the overdose epidemic needs to be a health-based response aimed at saving lives by mobilizing the most appropriate health-led interventions.
- Participants called for adequate resourcing for prevention approaches, safe supply, treatment, rehabilitation and harm reduction services.

- Coordinated data-driven overdose response and recovery supports to deal with the devastating grief and loss in the community was identified as a gap. There were requests for the City to further its role in providing backbone coordination support in partnership with community partners to coordinate the mobilization of harm reduction, prevention and grief, loss and bereavement supports.
- Participants raised concerns that there is little understanding about the impact of the use of meth and that there is no strategy or plan that deals with the long lasting impacts of meth. Participants stressed that work in this area is something that the City and other service providers should be planning for.
  - *"There is a large cohort of individuals that have acquired brain injuries as a result of Meth use which increases an individual's risk of becoming criminalized."*

## **Developmental Disability (DD), Acquired Brain Injury (ABI) and Traumatic Brain Injury (TBI)**

*"Police or other human services can apprehend someone with Developmental Disabilities or Acquired Brain Injuries 4 or 5 times, mostly because there is a lack of bed space. People are then discharged with no plan to outpatient programs they don't know how to access, so the system encounters them again and again."*

- One of the most revealing areas of the consultations was around acquired brain injuries (ABI), traumatic brain injuries (TBI), and developmental disorders (DD). These highly complex disabilities are often not recognized or understood by City, housing, justice and police services, resulting in judgement, unfair treatment, homelessness and incarceration.
- Dual diagnosis can further increase the risk due to a lack of services and long waitlists. Several participants noted dual diagnosis as a challenge due to the exclusion of those with ABI or TBI from addiction treatment programs given the complexity of the services that they require.
- The inconsistent use of effective screening tools for ABI, TBI and DD's was a notable concern and was encouraged as an opportunity for the City to pursue. Referrals such as housing have streamlined processes that could be modified to better support this population. City programs could inspire widespread adoption of screening tools by implementing them across programs. The adoption of such tools could connect people to the services they require, raise awareness and be a source of data to respond to system issues.
- Participants raised the need for training and awareness of the barriers and challenges those with acquired brain injuries or traumatic brain injuries face when interacting with services. Participants identified the Everyday Behaviours Tool, a two day training, as a useful resource.
- Participants called for the City to partner with the Acquired Brain Injury Network and the Developmental Service Provider Network to increase capacity of City services to better support this population and to identify how the City can mobilize to respond to these issues.
- The lack of discharge planning from hospitals was specifically noted as a concern, often resulting in homelessness or other risks to health and safety. Some providers called for the circle of care to be reviewed to include the referral source as part of discharge planning.
- Specialized supportive housing for those with ABIs, TBIs, or DDs was raised in consultations as a solution, noting that without appropriate supports individuals are ending up homeless with little capacity to navigate the shelter system.

## Human Trafficking

- Participants called for a public health approach to human trafficking that uses evidence-informed approaches to respond to vulnerable individuals who are exploited. By leveraging the full scope of the resources available to confront the problem across a diverse set of stakeholders through a comprehensive survivor informed approach, the City and its partners can better respond to this issue.
  - *"When people think of human trafficking, it is not public health that they think of. It is usually law enforcement as this is who traditionally has taken the lead. But a law enforcement approach is a reactive one whereas public health is proactive. Criminal justice focuses on catching and prosecuting perpetrators and referring victims for services. This happens, however, after harm has already occurred. Public health, on the other hand, stresses primary prevention, or initiatives to prevent the root causes of why some people are vulnerable to exploitation in the first place. Both the criminal justice and public health approaches to trafficking are crucial. Public health can no more run-down criminals than law enforcement can address the complex structural and social determinants that feed vulnerability to exploitation. Both are necessary and both are insufficient without the other."*
- Participants vocalized that human trafficking, specifically forced sexual labour, and consensual sex work are different but often conflated. Distinguishing between the two is essential for developing clear public policy objectives and effective implementation. Understanding the difference is also necessary to avoid undermining the safety and well-being of people engaged in consensual sex work. Grouping these issues together can result in a misunderstanding of the issues.
- Participants expressed an inconsistent understanding of the role of policing. Some of those consulted called for the reallocation of Police funding towards grassroots and community groups. Others wanted a deeper understanding about the role that the police play in addressing human trafficking and how groups can come together to reduce the exploitation of vulnerable individuals and better support victims/survivors.
- Participants voiced that human trafficking approaches need to be comprehensive and connected to gender-based violence and violence reduction strategies. Primary efforts should be on prevention and survivor support. However, human trafficking approaches also need to factor in the traffickers who can be connected to street gangs, organized crime groups and individuals identified on the Sex Offender Registry List. These individuals pose a significant risk to community safety, and have a propensity to engage in violence that can impact the whole community.
- Participants suggested the City could play a stronger coordination role to make connections across services, enhance data collection and analysis, and lead inter-governmental advocacy.
- Municipalities across the country need to coordinate across jurisdictional boundaries to better support the needs of victims who are moved throughout the country.
- Participants spoke about the need for the City, youth serving agencies and school boards to build the capacity of youth programs to better understand and prevent human trafficking. Participants raised concerns that often larger institutions do not want to acknowledge that recruitment and trafficking is happening in their programs and institutions.
- Participants spoke about the necessity of empowering and investing in peer centred organizations that are survivor-led to have the best results.
- Calls for training of police and by-law officers on trauma-informed practices, bias and supporting victims was requested consistently throughout consultations.



- *" An educational strategy in which all levels of the authorities and programs get sense on those issues related to labour trafficking, to prevent the re-victimization of those who have been subject of labour trafficking and exploitation."*
- Public education campaigns aimed at building awareness, reducing stigma and reducing victimization related to human trafficking need to be ongoing and play a role in schools
- Education campaigns for parents must be prioritized to reduce stigma and raise awareness.

## Sex Work

- Participants told us that human trafficking and legal, consensual sex work are often conflated and require separation to look at workers' rights while still enabling supports for those who are preyed upon. Grouping these issues is dangerous, infringes on human rights and can further victimize individuals. Participants also felt that the "anti-trafficking agenda" is backed by groups who stigmatize women and transgender individuals who turn to consensual sex work as a means of economic independence. Those consulted raised the need for the decriminalization of sex work due to its adverse impact on individuals, particularly racialized, newcomer and LGBTQ2S populations.
  - *"Decriminalization and empowering sex workers to organize and define their safety and addressing the stigmatization in the media is the best thing that you can do to stop sex trafficking."*
- Participants told us that there is no "either/or" when it comes to legal sex work. They shared that anti-trafficking policies and applicable by-laws can push sex workers underground into unsafe situations. This in turn increases victimization and experiences.
- Participants expressed that services should be available to everyone who needs them, but raised situations where individuals have to victimize themselves in the way they were forced to describe their life situation in order to receive services. There were also examples shared of victims turning to organizations for help only to be turned away due to stigma or organizational anti-trafficking policies.
- Stakeholders consulted feel that sex worker organizations with the appropriate means could run their own supportive housing and victim support services driven by lived experience. Transitional housing would radically transform the way that organizations could support people and empower them to leverage other assets to maximize support.
- Sex worker organizations perceive that they are excluded from funding processes as a result of supporting sex workers.
- Participants expressed that City by-laws dictating the lack of cameras, closing times and locked doors increased unsafe situations in holistic centres and for individuals working in those environments.
- Participants felt that supports for businesses were inconsistently applied during the COVID-19 pandemic response and that sex workers were targeted. Many holistic centres could not remain open but were required to renew their licences and those who work in the adult entertainment industry are required to keep paying for their licence. This is in direct comparison to other industries, including the taxi industry, who received additional forms of aid.
- Participants felt that by-law and policing powers were used inconsistently and were often driven by anti-Black or anti-Asian racism and bias with no avenues to pursue complaint or accountability. Participants indicated that there is mistrust between sex workers and police due to the historic harms that anti-trafficking policies have enabled. Participants felt that this can be repaired with de-stigmatization and education.

## SECTION 4 | Reduce Violence

SafeTO will implement dedicated strategies to prevent and reduce gun violence, interpersonal violence, gender-based and intimate partner violence through strategic and timely coordinated efforts across communities and systems with a focus on violence prevention, intervention, interruption, response and recovery

### Reduce Gun Violence

Specific consultations were centred on gun violence response and recovery, gun violence intervention and interruption and gun violence prevention. Below is a high level summary identifying the needs, gaps and opportunities identified in the consultation process related to the goals of system coordination and how to include and build on the lived experiences within communities.

- Participants articulated the need to be intentional in naming gun violence as disproportionately impacting Black youth, families and communities. Participants recognized gun violence as a product of anti-Black racism poverty, bias in education systems, and a lack of equitable social and economic opportunities for Black youth in their communities. Participants also stressed that although gun violence impacts Black communities, it is not *synonymous* to Black communities. Many Black residents, thought leaders, parents and youth contributed to consultations sharing existing ways their communities are mobilizing to build resilience and address the systemic harms that are at the root of gun violence in Toronto.
- Participants spoke about the need to modify strategies to respond to those at the greatest risk of gun violence. Identifying new business practices, information sharing and mobilizing multi-sector intentional interventions must drive the work ahead.
- Consultations reinforced that achieving violence reduction in Toronto requires building strategies on a continuum so the approaches are inter-connected and complementary.
- Community members expressed the need for an increase in communication and outreach by service providers in their communities.
- Participants felt that they lacked knowledge of system coordination and the system partners involved in response strategies. They urged the City to develop a coordinated network between the City, TCHC, TPS, which clarifies roles, responsibilities related to gun violence response.
- Participants felt that recovery should address exposure to gun violence through accessible community building and healing-centred engagement after incidents occur.
- Parental supports should be safe, free of judgement and provided in the context of systemic barriers and harms that disproportionately impact their capacity to supervise, and build relationships with their children.
- Participants felt isolated from interventions that are mostly led by system partners, leaving limited opportunity for resident leadership and community-based solutions and knowledge. Leveraging the ability to work together with local lived experience combined with City and health teams to deescalate conflicts was suggested as a priority for SafeTO.
- Enhancing resident capacity and developing avenues for residents to be involved in decision making, and planning processes was identified as an important element of any response.

- There is a lack of economic, and social engagement opportunities for youth in their communities that provide alternatives to crime and violence.
- Interventions are often late and risk factors, that drive interventions often to not reflect the complexities of challenges or the nuance to understand those challenges when dealing with equity-deserving groups, primarily Black youth.
- There were calls for the City to invest in social media strategies aimed at intervention, interruption and prevention. Participants felt that the service system must embrace social media in new ways.
- Participants felt that there is a lack of adequate and long-term investment in neighbourhoods, programs and community spaces. Community assets that are place-based and activated by residents such as culture and arts, recreational spaces, community gardens must be enhanced to create community connectedness and belonging.
- Poverty and a lack of economic stability in families is a root cause of violence that must be addressed through direct investments to families living in neighbourhoods experiencing heightened levels of violence.
- Services are competing for funding which hinders their capacity to collaborate and provide programming that reaches youth.
- Long-term funding for violence prevention programming is required for sustainability, to properly align with evidence and best practices, and to enhance impact.
- Prevention strategies must recognize the systemic anti-Black racism that is disproportionately impacting Black youth and increasing their vulnerabilities to gun violence.
- Collecting race-based data and trends that can monitor and support the reduction of violence that Black communities' experience is important.
- Culturally specific supports must be prioritized in order to reach and connect Black youth to reduce the harms of anti-Black racism and restore a sense identity and belonging to community.
- Multi-sector collaboration which includes internal accountability, commitment responsibility and trust is needed across community services, education, justice, police and housing sectors to ensure information and knowledge is shared for prevention purposes.

## **Reduce Gender-Based and Intimate Partner Violence**

- Participants identified that safe and accessible shelter spaces and affordable housing options for women fleeing violence are limited in Toronto which contributes to the risk they face. Survivor-centred supportive and affordable housing are vital.
- Participants spoke of the challenges they face when leaving abusive situations as a result of eligibility criteria, lengthy applications and costs. Combined with the disruption of an abusive situation, this can cause further harm and in some cases result in homelessness, financial instability or returning to violent situations.
- Victims and survivors are expected to leave their housing due to the lack of Safe at Home interventions and strategies that keep women in their homes and exclude the abuser from the home. Safe at home supports can be combined with culturally appropriate services and homelessness prevention strategies including legal protection orders, home security upgrades, rental supplements and supports for the perpetrator.
- Participants spoke highly of the collaborative risk-driven approaches championed by the City of Toronto, United Way and Toronto Police through FOCUS. There were calls from community to use the infrastructure from FOCUS to develop multi-agency intervention approaches for high-risk cases of gender-based or intimate partner violence.

- Survivor-centred approaches that are outside of police and led by grassroots community groups were consistently referenced in consultations due to their ability to be responsive to local need and be nimble to respond to the changing needs of victims. There were multiple suggestions for the City to increase funding to enhance the capacity of grassroots organizations.
- Participants spoke of the importance of enhanced coordinated data collection and data use strategies to enhance service planning and responsiveness to gender-based and intimate partner violence. It was suggested that data could be consistently collected through existing City intake and engagement processes and by partnering with the Assaulted Women's Helpline. Data could be used by organizations to develop responsive evidence informed programs, and could be used by the City to conduct neighbourhood planning, inform transit mapping considerations and to respond to system issues.
- The development of multi-sector gender-based violence or intimate partner violence strategies should be included in the design of gun and gang reduction and human trafficking strategies because they are often inter-woven.
- Inter-generational trauma as a result of cycles of harm, racism and exposure to violence must inform interventions at all levels. City services and Police must demonstrate that they understand trauma and acknowledge that uninformed actions can re-traumatize people.
- Language barriers consistently reduce the ability of those in need to access services.
- Participants called for intentionality in the way that gender-based violence and intimate partner violence is included in the implementation of SafeTO. The implementation must include a gender equity framework, measures to address poverty reduction and economic empowerment and increased awareness of the support available for victims and survivors.
- Participants highlighted that education on the process for reporting gender-based violence and intimate partner violence could be enhanced, noting a potential role for City communication channels.
- The need to confront toxic masculinity was commonly raised in consultations.
- Gender assumptions was another area that participants felt contribute to harm and victimization. In some cases, assumptions can pose barriers to women leaving violent situations and can be reinforced by law enforcement and City supports.

## Victim Supports

- Participants expressed that enhanced collaboration, information sharing and service integration is required across victim serving agencies, City Services and the Province. Specific protocols that enable integrated service delivery should be advanced with input from those with lived experience. It was noted that Victim Services Toronto and the City's Community Crisis Response Program are currently co-developing a coordinated victim crisis response protocol. Many participants expressed their support of this but encouraged the process to be expanded to include incidents of gender-based violence, intimate partner violence and human trafficking.
- Participants expressed that many services for victims are short-term and do not meet the long-term needs of victims. Dealing with grief, loss and trauma is long-term and often after the short-term services have expired, victims and their families are triggered by anniversary dates or other life moments with nowhere to turn to for support. Empowering and investing in grassroots groups within the community is something that was expressed that could help address this challenge. Groups like Mending the Crack in the

Sky, Communities for Zero Violence and United Mothers against Violence Everywhere were identified as having played a fundamental role mobilizing in the community to address community safety issues and in leading advocacy efforts to better support communities. It was recommended that all funders empower this kind of mobilization.

- Access to safe and affordable housing or emergency shelter spaces for victims was one of the most consistent elements identified, with supportive housing specifically raised as an intervention that could stabilize victims and their families. The waitlist for housing and the lengthy process for priority transfers were identified as barriers that can contribute to unsafe conditions for victims. Participants also raised that the Province of Ontario needs to play a role in coordinating housing transfers across municipalities for people who are at the greatest risk.
- Participants raised financial supports as a consistent challenge for living victims of crime, their families and families of homicide victims. Costs such as funerals, childcare, medical supplies, and transportation prevent victims and their families from being able to care for themselves or recover. Some felt that this was exacerbated by the provincial download of the Criminal Injury Compensation Board to local victim service organizations whose capacity became stretched as a result. Many participants identified that the Criminal Injury Compensation Board was not perfect but helped.
- Emergency transfer for victims of violence, particularly women, are critical. Participants noted the potential for victims to end up homeless when trying to flee violent situations, or the potential to return to violent situations which increases the risk of serious bodily and psychological harm.

## SECTION 5 | Advance Truth and Reconciliation

### Indigenous Engagement

A combination of one-on-one discussions with residents, agencies, and service providers were conducted, along with two open community consultations with Indigenous communities in Toronto. An additional youth specific survey was conducted in partnership with ENAGB Indigenous Youth Agency that engaged 171 Indigenous youth between the ages of 12 – 29 from across Toronto.

Consultations reinforced the need to build on existing City and Indigenous-led strategies, including:

#### **Current City Strategies to Build On:**

- Toronto Indigenous Health Strategy
- Toronto Indigenous Overdose Strategy
- City of Toronto's Response to the National Inquiry into Missing and Murdered Indigenous Women and Girls
- Indigenous Place-Making
- Ravine Strategy
- Indigenous-Led Mobile Crisis Support Pilot

#### **City Strategies Under Development:**

- City of Toronto Reconciliation Action Plan

#### **Toronto Aboriginal Support Services Council:**

- Toronto Aboriginal Research Project 2.0
- Tkaronto Indigenous Prosperity Plan

Below is a high-level summary from the consultations:

- The biggest act of advancing community safety and well-being for Indigenous Peoples the City should prioritize the continued action to advance Truth and Reconciliation and make its efforts available publicly through dashboards so community can monitor, track and participate in ongoing efforts.
- Truth and Reconciliation is often grouped with equity and diversity efforts and should be separated. While efforts to combat racism are critical in many communities who are continuously victimized by inequities, including Indigenous communities, Truth and Reconciliation is about Indigenous sovereignty. Both must be addressed but the distinction is important. Allies must work with Indigenous communities to deconstruct racism and colonialism.
- There should be continued Indigenous leadership and knowledge in program and investment design to ensure they are responsive to Indigenous needs and that there are intergenerational teachings, knowledge transfer and healing incorporated.
- Indigenous place-making efforts that enable ceremony in City spaces including parks and City facilities should be prioritized to ensure that there are places to safely gather and celebrate culture. Indigenous place-making efforts also provide an opportunity to provide education on Indigenous culture and should have an Indigenous governance model.
- Indigenous people often do not have access to spaces to practice cultural healing and learning in their neighbourhoods. Safe accessible spaces for Indigenous youth was identified as a priority.
- In enhancing the City's efforts to become trauma-informed and responsive, the City must work with Indigenous leaders to reflect the true impact of historic harms and the negative impacts of intergenerational and multi-generational trauma.
- Service coordination through the Toronto Aboriginal Support Services Council (TASSC) is critical and the City should continue to work with TASSC and seek their advice.
- Culturally rooted, trauma-informed programs should be prioritized and designed with community.
- Investments from other levels of government are disconnected to the urban Indigenous experience and do not factor in the movement of Indigenous people between other parts of the country to Toronto. The City could play a role in advocating for inner-city Indigenous agencies given the role they play in supporting people within Toronto and across the country.
- Funding flexibility was enhanced through the COVID-19 pandemic response and could be used to innovate existing funding programs to make them less burdensome for agencies.
- Providing quality virtual engagement opportunities requires technological equipment that many organizations do not have access to. Investment in these areas should be considered so that Indigenous agencies can effectively engage and reduce harm in a virtual environment.
- Participants raised challenges with funding "gatekeepers". Participants noted that money that is intended for Indigenous communities should be provided to the community to manage funds as needed.
- There are existing recommendations to advance the calls for Justice for Missing and Murdered Indigenous Women and Girls that the City can move on and that should be factored into SafeTO.
- Human trafficking prevention, intervention and exit strategies should be designed to include safety considerations for sex workers.
- Culturally relevant mental health services should be prioritized and led by qualified Indigenous organizations that include rapid access case management.

- Indigenous-led alternatives to policing mental health responses are critical.
- The Toronto Indigenous Overdose Strategy needs to be invested in and fully implemented.
- Indigenous-led child welfare reform processes should be rooted in prevention, connected to HousingTO plans and complemented by community supports.
- Culturally rooted reintegration wrap around models for those leaving incarceration are needed.
- Enhanced legal supports for those engaged within the Justice system are needed.
- It is important that Indigenous representation is increased within the Police service. The Toronto Police Service needs to build stronger relationships with Indigenous communities.

## SECTION 6 | Promoting Healing and Justice

SafeTO aims to transform the City to embed trauma-informed, responsive and specific services, approaches and tools that are grounded and directed by a thorough understanding of the complete impacts of trauma, adversity, racism and violence on people, families and neighbourhoods. Below is a high-level summary from the SafeTO consultations.

### Community Trauma and Healing

- Trauma or the importance of trauma-informed services was commonly raised in the consultations. Trauma was used to describe a variety of adverse experiences faced by individuals and communities. Participants identified that trauma and how it manifests can change based on who an individual is (race, age, gender), where they live in the City (neighbourhood, public space) and their interactions with systems (whether systems support them or not). Participants further identified that entire communities can become traumatized if unsupported. Participants were supportive of identifying a common framework to deepen the City and its partners understanding of trauma.
- Although "trauma informed" was a common thread, participants identified that deep work has to be done to ensure that our systems are responsive to trauma. Participants identified that training parents, businesses and community workers in psychological first aid and other tools enables a strong community support mechanism. Participants cautioned that if we don't respond to trauma that the consequences can be devastating, contributing to health issues, addiction challenges and increased risk of violence.
  - *"A number of adversities and stressful events can accumulate into trauma impact and have devastating consequences for individuals or communities."*
- Participants confirmed that by understanding trauma and shifting our culture to be responsive to it can enable better outcomes for individuals and communities. It was also suggested that accessing and addressing trauma in this way can increase community resilience.
  - *"Police require more Trauma informed training on the development of an abused person's brain to ensure they are no longer re-traumatizing that persons looking for support. 3 months at the police college isn't enough."*
- Healing centred engagement came up as a practical way to be informed and responsive to trauma but to move beyond it by encouraging healing, growth recovery and inspiring resilience. City staff were encouraged to include this methodology in the design of a trauma-informed City model.
- Participants spoke regularly about Adverse Childhood Experiences (ACEs) and the devastating impact that they can have on the health and well-being of individuals and

community. Participants encouraged the City to empower parents and families with the tools to address ACEs. Participants also recommended that the City include the ACEs survey within existing data collection programs and partner with agencies that have implemented the approach to integrate their findings with City data.

## Youth Justice

- Respondents indicated that information-sharing between systems and the community is lacking and that justice institutions, the City, and communities should collaborate to share knowledge and resources. Several respondents pointed to the Human Justice Services Coordinating Committee (HSJCC) as a model of success within the adult justice system. The Youth Justice Network could provide the building blocks for collaboration based on the HSJCC model. It was suggested that City services could play a role in achieving enhanced coordination.
- Navigating the justice system can be challenging. Improved coordination and information-sharing were suggested as means of mitigating this challenge. City services could be leveraging lessons learned within the courts to advise on investments for prevention based programs and effective referral pathways from the court to community supports.
- Respondents suggested that the youth justice system could be improved by building after-care and transitional supports into the system. Although many youth in the justice system incur charges after their 18<sup>th</sup> birthday, there is little communication between youth and adult justices systems and few, if any, formal programs exist to support young people at this transitional stage.
- Support for youth transitioning from custody and detention to the community is lacking. Participants also brought up the need for culturally responsive reintegration services. Although not currently operational, Redemption Reintegration Services was named as an effective Afrocentric approach. Participants encouraged the City to apply an anti-Black racism lens to programs and services focussed on reintegration.
- Many participants spoke of the impact of young people being removed from school as a result of criminal charges.
- Participants want more emphasis on a treatment-centred approach to youth criminal justice, using individualized case management plans that include the young person's family. Individualized treatment and the inclusion of family leads to better outcomes.
- Participants would like to see the courts make greater use of alternative measures. City services such as the Toronto Youth Partnerships & Employment program and other youth outreach programs could support building appropriate connections.
- Respondents would like to see more culturally relevant programs and services. Inconsistency in funding and program delivery was highlighted.
- Respondents felt that schools should play a greater role with youth who are at-risk or justice-involved. There is little in the way of identification and support for youth who are struggling and not enough coordination between schools and the courts. Participants suggested that the City should play a convening role to bring the right services to the table.
  - *"They put my name and face on the news when I was charged and when I went to school everyone knew! No one offered to help and I became known for my charges."*



- Schools and service providers could collaborate on alternative dispute resolution or restorative justice mechanisms to avoid court involvement.
- Culturally responsive services were raised regularly in the consultations.
  - *"The African Canadian Legal Clinic was an important on-site service for African and Black youth. Redemption Reintegration Services was an afro-centric approach to reintegration. These types of supports are needed back in the courts."*

## Adult Justice

- Meeting the basic needs of those being released from detention centres was the most commonly identified area of need in the adult justice sector. Respondents stated that poor release planning is a regular feature of the justice system, as a result of the lack of coordination between the courts, detention centres, community agencies and the City. Participants cited examples of individuals being released from institutions at late hours and without basic needs met (e.g. no suitable clothing, no food, harm reduction supplies and no place to go). Respondents shared that jurisdictional issues between provincial and City entities create a void that leads to nobody taking responsibility for these issues. As a result, individuals end up homeless. Participants actively called on the City and province to coordinate reintegration approaches.
- Participants noted that when there are attempts to coordinate discharge planning there are often no services available making it next to impossible for individuals to access life stabilization supports or meet the conditions of their release. Participants called this "the cycle".
  - *"Individual gets released, they have no supports, and they end up in an encampment, hospital or back in custody because they never met their conditions. Then the process happens again and we put them in front of a judge to make them talk about the system failure as if it was their fault. They never had a fighting chance but always promise to do better."*
  - *"There is no discharge planning. Vulnerable People go from the hospital to police, then to the streets, or police to the hospital then to the streets, or service agency to police, to jail, from jail back to the streets, then back to police- but there are no supports or adequate communication on any of these discharges or transfers and people get stuck, not helped. It just gets worse for everyone."*
- There is a lack of housing in the city, especially for those who or in transition from the justice system to the community. In some cases this is a contributing factor to why individuals are engaged in the justice system to begin with. Many services designed to meet basic needs (food, clothing, shelter, primary health care, etc.) have high barriers to access and are complex to navigate. Those who require these services typically do not have the means to navigate these complexities. Some participants suggested that correctional facilities are a substitute for housing at specific times of the year. For some individuals in the consultations, it was a known fact that low level offences would increase in October as a means of having somewhere to be for the Christmas holiday season, with a meal and bed.
  - *"Pre-Covid, if you offended after October, then you run the risk of not getting a bed in the cell and would be put on the mat on the floor, close to the toilet, so timing is critical."*
- An underlying theme of the consultations was the need for a greater focus on prevention and early intervention for issues that can evolve into criminal justice concerns. Respondents also indicated that programs focused on diversion from the court system should extend beyond the youth system.

- The concept of trauma-informed court rooms was raised in multiple consultations. While some felt the concept was not possible, others thought there might be potential if it was grounded in building capacity and could be co-designed between community, the City and the Ministry of the Attorney General. The Downtown East Justice Centre provides an opportunity to test this model with care given their attempt to look at the individual not just the offence.
- The issue of systemic racism was raised throughout the consultations. In particular, respondents indicated that anti-Black racism plays a role in individuals becoming involved in the justice system.
- Participants spoke about their perception of anti-Black racism within the justice system,
  - *“All you have to do is be a six-foot Black man, and you’ll be arrested”.*
- Participants noted that even without a criminal record, they felt that they were treated as criminals. Many described feeling they had been “written off.”
  - *“You can have a criminal record with no criminal record.”*

## Hate Crimes

- Participants noted that it is important that the City focus on systemic rather than the anecdotal incidents.
- Participants identified that education and awareness related to incidents, impact, and frequency, is important. There is no current response and the City can play a preventative role.
- Participants identified that the City has to demonstrate its good will and build relationships with communities that are most affected, especially with such a drastic increase in the number of hate-related incidents.
- Participants identified that the City can respond to the impact of hate crimes and racism on children who have witnessed parents being targeted and harassed.
- The City should explore alternative data collection at the community level to learn more about the impact of hate crimes.

## Section 7 | Invest in People

### Vulnerable Seniors

- Additional programs and services that support vulnerable seniors in crisis are needed. Participants highlighted the important role of programs such as the Crisis Outreach Support for Seniors program and noted that there needs to be more programming like this available.
  - *“Not enough support for seniors with ABI or Developmental challenges getting supportive housing. Not enough hospital beds to transition these people into a bed.”*
- Stakeholders also mentioned policies that put undue hardship on seniors, such as the need for seniors to pay for their own mental healthcare and capacity assessments, which many will refuse or are unable to pay the high amount for. There was mention of creating a “Seniors Advocate Office” that could function in the way the Child’s Advocate office does.
  - *“Seniors whose families are not involved are treated differently than when children are abandoned by their families. In both cases, it is a vulnerable group that has been left to fend for themselves. Perhaps a Seniors Advocate to connect or hold families accountable.”*

- Participants identified home supports as a mechanism for preventing harm for vulnerable seniors but are concerned that there are not enough of these services available, nor is there sustainable resources for existing programs for comprehensive follow-ups. Services identified included laundry, grocery shopping, housekeeping, hoarding and pest supports and in-home health services. These services were mentioned as some of the most critical in preventing acutely elevated risks. The focus on prevention and maintenance would not only be a large cost-saving measure, but provide positive health and social outcomes.
  - *“Housekeeping services for helping seniors with housekeeping, groceries, and other personal care needs. Cleaning, laundry and food are such essential services to keep quality of life. If this service was expanding, as it is the Toronto Seniors Helpline most requested services. This can keep seniors out of hospitals, just checking in on someone a few times regularly.”*
- Participants identified that seniors have become further isolated throughout the pandemic. Inter-generational peer outreach models and vulnerable person's registry lists were suggested as areas that would benefit.
- There were calls to increase the capacity of frontline workers to better understand the abuse of older adults.
- Some participants noted that they didn't know where to access information and resources regarding service delivery. There was a recommendations to develop centralized access portals complimented by outreach and education.

## Supporting Families

- Participants identified that skill building at the local level is an essential support. Building the capacity of communities to take care of themselves by providing psychological first aid training, active listening and other parenting skills can enhance a community's ability to care for one another.
- Poverty and a lack of economic stability in families is a root cause of violence that must be addressed through direct investments to families living in neighbourhoods experiencing heightened levels of violence.
- Investing in families was a key idea raised by participants. Participants felt that families are the “core system” and prevention strategies need to extend beyond parenting. If parents, older siblings or family members are adequately supported with jobs, income, access to better transportation and food security, youth and children are not exposed to simply surviving.
- The concept of “thriving” was a theme identified related to investment in families, to ensure that root causes are addressed and the circumstances in which children and youth grow and live are transformed. This is a preliminary step that is broader and less targeted than current approaches that focus on supporting families of youth involved in violence. Instead, contextualizing neighbourhood levels of poverty, income and the impact this may have on generations is the catalyst to investing in families at early stages.
- Participants spoke about a number of Mother's groups such as Mending the Crack in the Sky, Communities for Zero Violence and Regent Park Mothers of Peace and the important role that they play in coming together to support one another and confront gun violence. Mothers are at the forefront of the fight to address gun violence in Toronto, and their leadership indicates that communities are self-advocating for greater systemic commitments to violence reduction.
- A number of participants spoke about the gap in supporting children and caregivers together. Serving the family holistically can strengthen outcomes.

- Participants also felt that children are often left behind in the process of recovery. While many urged for more targeted family supports, a lack of children's mental health and counselling supports was recognized as a large service gap.

### Supporting Youth

- Youth consulted challenged the City to invest in new ways that create opportunities locally. "Young people are interested in experiential learning. Gen Z is thinking out of the box and have demonstrated that we can take down the system on line. We want experience and that is how we learn"
- Participants challenged the City to invest in their ability to lead by building their skills, building their ability to participate in decision making processes. Participants told us that they want to contribute but their skills are not used and their neighbourhoods are stigmatized.
  - *"The media and the City is not fair to all communities, why are they not talking about drug use or domestic violence in wealthy neighbourhoods. They don't promote the amazingly talented youths from our communities who are on Tiktok, Instagram and YouTube telling their stories and sharing their talents. Instead, our neighbourhoods are used as clickbait for people in the City to feel good about themselves if they have set up a program or to point the finger at when something is wrong."*
- Participants encouraged the City to meet young people where they are at and to use pop culture and social media as tools for engagement.
- Participants identified the community healing project as a noteworthy intervention because it invested in creating young leaders and gave them the tools to support other young people.
- Participants noted that even without a criminal record, they felt that they were treated as criminals. Many described feeling they had been "written off." One participant stated that "you can have a criminal record with no criminal record."
- Participants recommended creating a culturally appropriate services for Black Torontonians in order to address anti-black racism, which characterizes the current experience of youth in the city. The need for positive role models and mentors was identified as a way to help young people navigate systems.
- Participants felt that the City should be increasing access to youth spaces, programming and relevant opportunities to prevent engagement with the justice system and reducing the interaction with it once people have been engaged. Some participants described the justice system as ruining young people's lives.

### Resources

- While multiple investments were noted as being needed, the most universal demand was for an increase to Ontario Works and Ontario Disability Support Program to keep up with the skyrocketing costs of living in Toronto, Several stakeholders also raised that a Guaranteed Living Income (not just a "basic" income) on top of these supports is urgently needed in Toronto.
- Another common thread was that frontline staff salaries and wages are far too low and this, coupled with low benefits and the impacts of the COVID-19 pandemic, is resulting in high burnout which creates inconsistency for the vulnerable populations being served and the agencies supporting them.

## SECTION 8 | Invest in Neighbourhoods

Develop responsive and accountable city wide and place-based approaches to address the social, cultural, physical and economic environments that impact neighbourhoods and public spaces.

### Economic Development and Business

For many years there has been a growing recognition that community safety and well-being and economic development are inextricably linked, not only from the perspectives of individuals and households, but also from the perspective of quality of life in neighbourhoods and cities. As part of the development of SafeTO, the City partnered with the Downtown Yonge Business Improvement Area to explore the relationship between community safety and well-being and economic development, by examining the inter-relationship, risks and impacts if the two are not in sync and how effective partnerships between the public and private sectors can contribute to building safe and inclusive neighbourhoods.

The City and the Downtown Yonge BIA, with the support of Humber College interviewed 35 businesses across the City representing 17 Business Improvement Areas (BIAs). Additional consultations were held with the members of the Toronto Business Improvement Association, Downtown Core BIAs, economic development experts, and subject matter experts about safety considerations for businesses and emerging opportunities for partnership. Below is a high-level summary of the key themes identified.

- Businesses identified that economic development and community safety are linked and have a "push and pull" relationship; perception of a safe neighbourhood have more likelihood of pulling people and opportunities into a neighbourhood and as a result economic opportunities can thrive and community safety and well-being will be enhanced. However, if one the areas is experiencing challenges or a neighbourhood is perceived to be unsafe, then there is the potential to push opportunities and people away from the neighbourhood which can negatively impact economic development and business.
- Businesses across the city have been experiencing an increase in unsafe situations and in some cases violence due to escalating or erratic behaviour. Participants identified that it is often related to substance, intoxication or perceived mental health challenges. Although this was identified as a trend across the city, the severity increases in the downtown core. In many cases, businesses did not know where to turn to for help and were concerned about the health and safety of staff who do not have the skillset or training to deal with these situations.
- Participants identified an increase in break and enter incidents that leave costly damages and impact insurance costs. Some participants identified that they felt the increase was due to the large amount of businesses that remain closed or have ceased operations as a result of the COVID-19 pandemic, creating a sense of urban blight and attracting increased vandalism and other elements that could, without the appropriate supports, have an impact on local businesses and the neighbourhood.
- Some businesses noted an increase in public drug dealing and drug use that raised health and safety concerns due to discarded needles and the potential for violence.
- The increase in encampments was another notable concern for businesses closer to the downtown core. There was a genuine concern for those living outside and requests for

the City to increase outreach, health and sanitation supports. Some business have been mobilizing support for encampment residents in partnerships with local service providers but commented that it is not sustainable. Some participants spoke about increased violence in encampments as well as in and around establishments, break-ins, thefts and weapons being found. In some cases participants witnessed customers get threatened and others expressed that they had not felt safe close to businesses.

- Businesses spoke of increased costs related to increased health and safety measures (security guards, cameras, locks, increased staff, signage, gates etc.), repair costs for damaged or broken infrastructure and increasing insurance rates.
- Participants spoke about community belonging, high pedestrian traffic, good relationships with neighbourhood police or community outreach officers, good lighting, clean environments and beautification projects contributed to a sense of safety. Participants also spoke about relationships within the community and capacity building projects that were led by the City and Downtown Yonge BIA.
- Strong cultural activities that create healthy avenues for expression, define a communities identify and transform the physical environment were identified as mechanisms that can enhance safety and well-being.

## Place-Based Planning

- Participants identified the demand for more place-based and community-led programming and funding that identifies and empowers Indigenous, Black, and racialized community champions (especially the ones we don't immediately recognize) and recognition of local knowledge. Participants asked for these considerations when forming working groups, task forces and accountability tables for SafeTO. An equity lens embedded in SafeTO was raised as important.
- Participants spoke about the existing networks, local planning tables and safety committees that are City-supported as effective mechanisms for place-based mobilization. However, participants raised concerns that there is little accountability associated with the action plans. Participants recommended that the plans be made public and published on the City website so they can be tracked and updated. Community groups also called on the City to fully commit to actions within local plans and to actively engage residents on the impact of these plans.
  - *"Sometimes it feels like senior institutional leaders don't know local plans exist. When something bad happens, there is a lot of attention and we build another plan with the same incomplete actions as the last plan."*
- Participants encouraged SafeTO to build on existing assets and strengths within communities.
  - *"Communities are vibrant and have leaders/culture within them that should be invested in to strengthen local leadership. People need to feel empowered to engage and to lead."*

## Community Space

- Recreation centres, schools, youth lounges, community hubs and libraries were all identified as important "community spots". Participants identified that the City could look at increased accessibility for grassroots groups to use them. In some examples, local permitting processes or insurance was a barrier to access. Effective partnership between the City and grassroots groups to increase local access was an opportunity identified.
- Safety audits were identified as an effective tool for assessing the safety of public spaces by identifying deficiencies such as lighting, overgrown foliage, poor sight lines

and other factors that can create unsafe environments. Participants spoke about the importance of training residents to conduct safety audits.

- Participants raised concerns about the lack of accountability for the actions coming out of safety audits. Some safety audits are conducted by a number of stakeholders including the City, Toronto Police Service, Toronto Community Housing and METRAC a community based organization. Participants identified that multiple City divisions participate in conducting the audits but were unclear in who was responsible for the follow up and where to find actions that have been completed. Participants recommended having an online portal that monitors and tracks safety audits.
- Indigenous Place-making was consistently brought up throughout consultations. Participants identified that existing processes limited their ability to gather for cultural ceremony.
- Participants engaged identified that access to shared public space including parks can improve safety and well-being by creating access to recreation, meeting places for friends and opportunities to know your neighbours. Stakeholders identified that creating inclusive engagement opportunities to plan for the shared use and activation of public spaces is often overlooked and should be prioritized. Effective engagement can contribute to the culture, community ownership, pride and social networks of a community.

## SECTION 9 | Drive Collaboration and Accountability

SafeTO will reimagine core elements of community safety and well-being to build the necessary structures to use multi-sector data, evidence and lived experience to respond to immediate need, enhance collaboration, inform service planning, advance policing and law enforcement reform, and integrate investments. Below is a high level summary from the consultation process that speaks to this goal.

### Integrated Multi-sector Data Centre

- Participants validated the need to link data sets about specific issues from across sectors together and then analyze those data sets with integrated staff who represent those sectors and understand the issues. Layering complex data could help illustrate how issues are intertwined and how systems mobilize accurate and appropriate service delivery to address complex issues. Participants spoke about leveraging collective systemic experiences versus conducting analysis in silos as a major opportunity that would benefit our service system.
  - *"Working together would enable faster and richer analyses to complex problems, Enable responsive, adaptive, and coordinated multi-sectoral response. Many individuals and families touch all of our systems."*
- The need to create a common vision and shared outcomes was commonly raised in consultations. Participants reinforced that the big picture and the paradigm shift that SafeTO aims to achieve should drive the collaboration and integration of multiple sectors. They cautioned that current siloed approaches will impact SafeTO's ability to make significant advancement of its goals. A shared vision and defined processes will ensure that integrated work is effective and intentional.
- Participants voiced that collaboration takes time and to not rush it. Take the time to build a data dictionary and a clear process for multi-sector collaboration. Define the governance structure and ensure there are clearly articulated roles.

- Partners identified that not all those that need to be at the table have capacity or power to participate and it will be the responsibility of large institutions to invest in their capacity to participate to ensure an "all of community approach".
- Participants were excited about the opportunity to do something differently and encouraged the City to be bold and pursue innovative approaches and tools such as predictive modelling and forecasting. Further, participants encouraged the City to make research findings public, validate the findings with affected communities and build the capacity of the community to use the findings for service planning.
- Participants cautioned that everyone involved would need to be aware of the risks and limitations and thoughtfully plan for them in the design. Collection of inaccurate data, inconsistent or biased analysis, lack of timely data, inconsistent boundaries and ineffective information sharing processes that could contradict the shared vision could all be significant risks. The structure should include a risk mitigation strategy, privacy impact assessment and data for equity principles.
- Participants suggested that data visualization would enhance accessibility by helping communities better understand what the data says.

## **Integrated Investments**

- There was criticism that the City and other levels of government are not effectively coordinating their investments, creating confusion about who is responsible for funding what. Participants identified that this often leads to finger pointing while people fall through the cracks. In some cases all three levels of government are funding initiatives that are not coordinated to maximize investments and not working towards a common goal. Some participants identified that the City is in competition with community organizations for funds from other levels of government. Such funding silos can have an adverse effect on vulnerable communities and the community infrastructure that supports them.
- There were requests for the City to take leadership in advocating to other levels of government for the financial resources required to create invest in community to achieve SafeTO Goals.
- Residents called for greater accountability and transparency about how funds are used in communities and called for mechanisms to embed community feedback into funding decisions.
- Participants explained that agencies are overburdened with reporting for small grants received from multiple funders given the lack of core or sustainable funding. Participants stressed the City and other levels of government should look to leverage and support existing community organizations through provision of core funding to enable stability, capacity and growth.
- Participants called for investments in place-based, grassroots initiatives that empower those with lived experience and champion peer led, place-based approaches.
- There were multiple calls to reallocate funding from policing and enforcement structures to community health and social supports.

## **Governance and Accountability**

- Calls were made for effective multi-sector governance structures that create the opportunity for community leadership. Given the broad scope of SafeTO, participants suggested that there should be issue-specific advisory committees or the City should leverage existing advisory committees. Those consulted asked for a governing body that has the decision making authority to drive action and prioritize/align investments.



- Recommendations for representation of a SafeTO Advisory Committee included a diverse grouping of representatives of system level (City, health, mental health, housing, education, police, justice), Community (seniors, community agencies, businesses, tech communities, grassroots leaders, faith leaders) and those with lived experience from equity deserving communities including Black, racialized and equity-deserving communities, such as women, LGBTQ2S+, people with disabilities, people that experience homelessness, newcomers and residents with precarious immigration status, and people who live on low incomes.
- Participants called for a public accountability framework to drive any governance structures that are implemented along with a robust communication plan to ensure trust, transparency and action.

## **Communication**

- There were clear calls for the City to broaden its use of communication. Some felt that the City does not communicate with them but rather "talk's key messages at them". Participants voiced that community safety and well-being should be an ongoing dialogue, enabled by a robust communication plan that leverages a number of online tools, platforms, social media networks and media.
- Communication should be considered a vehicle for education. This work requires a paradigm shift in the way people think about community safety and well-being. The public education campaign will need to leverage platforms that people participate in.

# **ROADMAP TO A TORONTO TRAUMA-INFORMED CITY**

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## ***Introduction***

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Toronto is a city with great opportunity and continues to evolve as a world-leader in many areas, but it faces enormous challenges. The City has witnessed growing inequities and inequalities with housing losses, job losses, an increase in opioid overdose and deaths, the rise in homelessness, hate crimes, gun violence and most recently the emerging effects of COVID-19.<sup>1,2</sup> The impact of the pandemic has had differential impacts on certain communities, and exposed deep, systemic issues that have been present in Toronto for a long time.<sup>3,4</sup>

Many Toronto residents and communities suffer from trauma and its after-effects as a result of these systemic inequities. Our businesses, civil society organizations, service providers including City staff and leaders as well as residents, families and communities experience the human and economic costs of trauma every day.

Trauma is the response to a deeply distressing or disturbing event that overwhelms an individual's central nervous system and their ability to cope. Trauma causes feelings of helplessness, diminishes sense of self and the ability to feel a full range of emotions and experiences.<sup>5,6</sup> Long after the traumatic event or episodes occur, people experiencing trauma can often feel shame, powerlessness, intense fear<sup>7</sup>, and see their physical health negatively impacted.<sup>8</sup> Trauma is not only experienced by individuals, but it can also affect groups, families and entire communities or neighbourhoods.<sup>9</sup>

Trauma comes in many forms and can be caused by many factors. Many understand that the impacts of residential schools, gun violence in Toronto, or major events such as the Toronto van attack, or the Danforth shooting could lead to trauma. Frequently people do not realize that events do not need to be as extreme as these to impact an individual deeply. For instance, studies in the USA and Alberta have demonstrated that adverse childhood experiences such as violence, abuse, neglect, and witnessing violence in the home or community, have profound impacts on the physical health, mental health and social success of people, lasting well into their adult lives.<sup>10,11</sup>

Research shows that racialized and equity-seeking groups are at greater risk for experiencing four or more types of adverse childhood experiences (ACEs) that result in trauma.<sup>12</sup> Beyond this, racialized populations also experience racial trauma, or race-based traumatic stress (RBTS). This refers to the mental and emotional injury caused by encounters involving racial bias, ethnic discrimination, racism, and hate crimes.<sup>13</sup> The race-based traumatic stress theory suggests that some individuals from racialized and ethnic groups may experience racial discrimination as psychological trauma, and that it may elicit a response comparable to post-traumatic stress. Experiences of race-based discrimination can have detrimental psychological impacts on individuals and their wider communities.<sup>14</sup>

Research shows that the economic and social costs to families, communities, and society totals hundreds of billions of dollars each year.<sup>15, 16,17, 18</sup> Adopting trauma-informed approaches in workplaces, communities, government programs, and a trauma-informed model across the city can help prevent mental, emotional, physical, social and/or economic issues for Torontonians impacted by toxic stress and/or trauma. These benefits may also extend to their families, communities and the entire city. Adopting a trauma-informed city model may result in more effective and efficient services, healthier and happier service users, City employees, and other service providers, a better functioning city, and a thriving Toronto.

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## *Background*

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### ***SafeTO: Toronto's Community Safety and Wellbeing Plan***

The City's ongoing work to develop a Community Safety and Wellbeing Plan (CSWB) is guided by the Province of Ontario's CSWB Framework and in collaboration with a range of sectors. The plan aims to shift from an emergency-based response to a culture of prevention and will prioritize four areas of risk: community trauma, community violence, harm and victimization, and community justice to help create a safer Toronto. These risk areas are interconnected and strategies to respond to them will overlap.<sup>19</sup>

SafeTO's work and consultations reflect the need for Toronto to become a trauma-informed city. The strategies to respond to community trauma includes embedding trauma-informed, responsive, and specific services, approaches and tools that are grounded in and directed by a thorough understanding of the complete impacts of trauma, adversity, and violence on people, families, and neighborhoods.<sup>20,21,22</sup>

### ***The Roadmap***

The Roadmap to a Toronto Trauma-Informed City was brought about through a partnership between the City's Social Development Finance and Administration Division (SDFA), the Wellesley Institute, and the THRIVE Toronto Table. As a member of the THRIVE Toronto Table, SDFA requested the THRIVE Toronto Table support producing a Roadmap to inform the development of a Toronto<sup>23</sup> trauma-informed city model.

The evidence for this roadmap is grounded in a literature review of the evidence on the use of trauma informed approaches at a systems level, and an international jurisdictional scan of eight trauma-informed city models. Additionally, interviews were conducted with experts from five cities that self-identified as trauma-informed and have implemented trauma-informed

approaches. The information contained in this Roadmap and its supporting documents are intended to serve as a catalyst for ongoing innovation as we work together to make Toronto a trauma-informed city that will support the resilience and thriving of all Torontonians.

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### *Trauma and Adverse Childhood Experiences (ACEs)*

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Trauma can result from direct personal experience, witnessing trauma to others, indirect exposure by learning that a traumatic event occurred to a family member or close associate, and firsthand repeated or extreme exposure to aversive details of a traumatic event(s).<sup>24,25,26,27,28</sup> It impacts individuals, families, caregivers, workplaces and communities physically, emotionally, socially, and intergenerationally.<sup>29,30,31,32</sup>

While no one is immune from experiencing trauma, many factors including sex, gender, race, housing and employment can increase risk to trauma, decrease access to health care services, and result in negative socioeconomic impacts throughout one's life.<sup>33</sup> Toronto has many population groups who are at greater risk of experiencing trauma.<sup>34, 35, 36, 37</sup>

As a result of seminal research into Adverse Childhood Experiences (ACEs), connections between disadvantage in childhood development and multiple negative outcomes in adulthood are being made clear.<sup>38</sup> The rise in awareness about the impact of ACEs and the trauma they cause has spurred the emergence of implementing a trauma-informed approach within individual treatment, organizations and city models.

ACEs are events that occur in childhood (0-17 years) such as experiencing violence, abuse, neglect, witnessing violence in the home or community, and having a family member attempt or die by suicide. They negatively impact child development and are linked with many poor health and mental health outcomes across the lifespan, such as chronic health problems,

mental illness, and substance use problems in adulthood. ACEs can negatively impact education, job opportunities, earning potential and social relationships.

ACEs are common and costly.<sup>39</sup> Merrick et al (2018) found that of 61.55 per cent of adults surveyed across 25 US states who reported traumatic experiences, at least one and 24.64 per cent reported three or more ACEs.<sup>40</sup> Preventing them could potentially reduce the rates of health problems, economic and social costs to families, communities, and society.<sup>41, 42</sup> Women, racialized groups, people living in under-resourced neighborhoods and those experiencing food insecurity are at greater risk than others for having experienced four or more types of ACEs.<sup>43</sup> These social inequities highlight the need for a whole-system approach to work on the conditions in which ACEs are more prevalent and to address structural inequities for ACEs and trauma related policies, services, and interventions.

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### *A Toronto Trauma-Informed City Model*

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There is a growing worldwide movement to develop trauma-informed cities and systems.<sup>44</sup> The experiences of cities around the world suggest that transforming Toronto into a trauma-informed, responsive and specific city could promote healing from trauma, reduce long lasting negative impacts of trauma on individuals and communities, build individual and community resilience, improve services and systems of care,<sup>45,46,47</sup> and positively impact the lives of Torontonians.

A trauma-informed approach would mean that City programs, services, policies, and staff, would demonstrate an understanding of trauma, and consider the implications for people experiencing trauma in their planning and delivery.<sup>48, 49</sup> Toronto and other cities across Canada have effective public health approaches to prevent or mitigate the impact of trauma as a result of ACEs.<sup>50</sup> A trauma-responsive approach involves transforming all aspects of the City's programming, language, and values to ensure that City programs, services, policies, and those

delivering them, have the capacity to identify and mobilize informed responses for those experiencing trauma.<sup>51</sup> A trauma-specific approach requires programs, services, and approaches intended to directly address the impact of trauma on individuals, families, and community and facilitate recovery from the consequences of trauma.<sup>52,53, 54</sup>

All jurisdictions that implement a trauma-informed approach<sup>55</sup> are looking to change their work, governance, structures, and policies to deliver programs, organizations, or systems that “**realize** the widespread impact of trauma and understands potential paths for recovery; **recognize** the signs and symptoms of trauma in clients, families, staff, and others involved with the system; and **respond** by fully integrating knowledge about trauma into policies, procedures, and practices, and seek to actively **resist re-traumatization.**”<sup>56</sup>

The changes that this model brings can have positive results for everyone. This is especially needed given the consequences and changes in the city as a result of the pandemic - the need to build thriving communities has never been more critical.

Although the theory, practice and evidence on trauma-informed cities is still evolving, cities that have adopted the model<sup>57</sup> reported reductions in crime, improved sense of well-being, improved academic outcomes, reduction in staff burnout, improved quality of services and a reduction of cost of trauma on the system.<sup>58, 59, 60, 61</sup>

These cities models focused attention and resources upstream on addressing the social determinants of health in their communities. A public health approach fostering the health, safety and well-being of the entire population, with targeted emphasis on higher risk and vulnerable populations set the foundation for the trauma-informed approaches implemented by these cities. They stressed the importance of the fundamental change in structures, policies, processes, procedures and practices, and concerted efforts to motivate and equip staff to implement trauma-informed approaches that are required for a trauma-informed city model to be successful.<sup>62, 63</sup>

The adoption of this model comes along with initial increased costs and requirements of city staff and departments.<sup>64</sup> Despite this initial increase in resource requirements, considerable financial savings and the prevention of human suffering could be achieved. Implementing a trauma-informed model could increase staff functioning, decrease staff sick days, increase effectiveness of services, increase the health and resilience of the population lowering the demand for services, and improve the health of the workforce leading to improved productivity.<sup>65 66</sup>

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### *Different Cities, Different Trauma-Informed City Models*

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To better understand how a trauma-informed city can and should work, we analyzed information about potential trauma-informed cities in North America and Europe. Eight cities that self-identified as a trauma-informed city or were working on that designation, and have comparable socio-demographics to Toronto were selected for closer examination. Relevant grey literature on trauma-informed approaches and trauma-informed city models, from government and health authorities were reviewed. These documents were identified through web searches and consultations with trauma-informed city experts in Toronto and the cities being studied. Consultations with senior leaders who have direct knowledge of implementing a trauma-informed approach from these cities were requested as a component of this jurisdictional review. Expert interviews were secured with five cities - Baltimore, Maryland; Chicago, Illinois; Glasgow, United Kingdom; Philadelphia, Pennsylvania; and San Francisco, California. It would be useful to follow up with the other cities, New York City, New York; Calgary, Alberta; and Plymouth, United Kingdom, to uncover more about their progress towards becoming trauma-informed cities if Toronto embarks on developing and implementing a trauma-informed city model.

#### **Case Studies**



## Appendix D: Safe TO: Roadmap to become a Trauma-Informed City

The following five cities began with a clear decision to implement a trauma-informed approach. They considered the context and the challenges of their own cities, looked at the evidence of ACEs, used the public health approach, allocated resources to address these challenges, and stepped forward to make foundational change.

The Substance Abuse and Mental Health Services Administration (SAMHSA), a branch of the United States Department of Health and Human Services, is an internationally recognized leader in trauma-informed research and development, has outlined ten implementation domains that trauma-informed transformation should address.<sup>67</sup> In order to visualize differences between these complex programs, Table 1 shows which of these ten implementation domains each city has implemented.

Table 1 SAMHSA’s Ten Implementation Domains Carried Out by Five Cities

Domain	Baltimore	Chicago	Glasgow	Philadelphia	San Francisco
Governance and leadership support the vision of a trauma informed city	X	X	X	X	X
Policy is reshaped to be trauma-informed (on-going)	X	X	X	X	X
Physical environment promotes safety and resilience					X
Engagement of all citizens is encouraged; no group is excluded	X	X	X	X	X
Cross-sector collaboration is the norm	X	X	X	X	X
Screening and treatment are in place for identifying and responding to trauma.				X	
Monitoring and quality assurance processes are used uniformly to inform and improve services		X	X	X	X
Financing mechanisms make trauma-informed programs and trauma-specific services sustainable		X	X		
Evaluation data are collected from a variety of perspectives		X	X	X	X

### Baltimore

Baltimore has the distinction of being the first American city to be legislated as a Trauma Informed City, through the Elijah Cummings Healing City Act, 2021.<sup>68</sup> The City started the Healing City Baltimore to build a united movement of Baltimore's communities focused on healing from trauma, violence, and racial inequity. The movement began with a 'listening tour' of over 200 hundred community consultations. The City leadership heard about the existing work that the community was doing to heal from past trauma. As in many cities, this work was happening in silos and needed to be connected.

Baltimore's Trauma Informed City legislation led to:

1. A taskforce made up mostly of community stakeholders to move the work forward.
2. Deep training in trauma-informed and responsive care for city staff and divisions co-led by community-based organizations.
3. A review of all procedures within city agencies to reduce re-traumatization.

Baltimore's training sessions were provided to the government, community and local media. With in the City of Baltimore, leadership received training first, followed by the mayor, city council, and city divisions. Training provided staff with the support to deal with trauma, and train community members to be champions of the initiative and to go back into the community and share and disseminate the knowledge of these training sessions.

### Philadelphia

Since the 1990's Philadelphia has been a leader in developing and implementing trauma-informed approaches and The Philadelphia Department of Behavioral Health and Intellectual disAbility Services (DBHIDS) initiated the formation of a Trauma Task Force in November 2006 for the purpose of developing recommendations toward a trauma-informed system of care.<sup>69</sup>

The task force set to work incorporating trauma into the department mission statement, identifying policy and procedures to avoid re-traumatization of both people receiving services and staff, and providing staff training. They also developed recruitment standards and job

qualifications that meet the competencies required to provide trauma-specific treatment. These included people receiving services, their families and other supporters, survivors and other recovering persons at all levels of planning, development, and implementation of services. They also worked to ensure trauma policies and services that respect culture, nationality, ethnicity, gender, gender identity or expression, age, sexual orientation, and physical disability.

In 2014, the Recovery and Resilience-Oriented System of Care framework was established,<sup>70</sup> which added a comprehensive public health approach and engaged police, hospitals, community services, and universities, to help ensure prevention, treatment and intervention around mental health issues. It led the way in joining up services, making sure they are aligned with the principles of a trauma-informed approach, and developing a wealth of information on implementation designing screening protocols, training, public campaigns and toolkits.

### Chicago

Chicago's process to become a trauma-informed city started in 2011 when Mayor Rahm Emanuel launched Healthy Chicago which emphasized a public health approach, investing in community resources and interventions, and collaboration to maximize the city's health and well-being.

This began with an environmental scan of all city and community programs that were already addressing trauma or ACEs, and an examination of what was and wasn't working. The Chicago Department of Public Health (CDPH) became the first trauma-informed department in the city.<sup>71</sup> Using this backdrop to address health equity, a trauma-informed approach spread to other city departments that connect directly with the public.

The CDPH, supported by Health & Medicine Policy Research Group, developed their own curriculum, *Trauma 101*, to help staff and communities understand and respond to trauma and learn how to build resilience.<sup>72</sup> They set up a champions committee to mentor staff and sustain

the training received, and a 'messaging committee' to send out updates and new information about being trauma-informed.

Chicago's trauma-informed city model has two components. First, The Collaborative - an external inter-sectoral group with representation from every neighbourhood. It is focused on non-city workers and led by the Health & Medicine Policy Research Group.<sup>73</sup> They collaborate to address mental health stigma and increase the awareness of trauma and the resources available. Second, a city governance component led by the City Health Department, focuses on administration, human resources, internal transformation, policy development and spreading the approach through other city departments.

### San Francisco

The San Francisco Health Department and the Department of Children, Youth and Families led the way to the development of a trauma-informed system in 2012.<sup>74</sup> They began with a workgroup with two initial goals: first, to create a common language about trauma and what it meant to be trauma-informed, how to speak about healing and recovery, and how to use this lexicon with clients and each other; and second, an over-arching second goal to create on-going and sustainable organizational change.

San Francisco started with meetings and focus groups with about 400 staff, a city-wide survey on policies, programs, procedures practices to understand where challenges and strengths lie regarding the ability to implement a trauma-informed city model, and developing training programs for all health staff to create and sustain trauma informed knowledge and practices. An evaluation team is in the process of developing a plan to measure the impact of this change process on staff, services, and the people served.

Cross-sectoral involvement is integral to the continuation of San Francisco's trauma-informed city model. Other city departments, probation system, public schools, and the police are involved in a coalition to advance the principles of the trauma-informed approach. These

organizations are receiving training and have begun to expand their work to make regional impact.

### Glasgow, UK

Glasgow's work towards incorporating a trauma-informed approach started in 2005 with four city police staff seeking to reduce the city's murder rate. This began with a meeting with about 30 decision-makers representing schools, hospitals, public health, police, city staff and business. The table agreed to take a public health approach, not a punitive approach. This meant treating violence as a disease to be diagnosed, the root causes analyzed, then solutions developed, and evaluated, then scaled up appropriately.

Community empowerment was at the forefront of this model, enabling community to make their own decisions, while keeping the discussion of trauma front and centre. Glasgow's success has become a movement that has spread across Scotland<sup>75</sup> with many other jurisdictions across the world, including London, England, now hoping to emulate their work.

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### *Race and Trauma-Informed Approaches*

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Toronto is one of the largest cities in North America, with over 2.9 million people and 140 neighborhoods. In 2016 51.5 per cent of residents identified as a visible minority, 51.2 per cent were born outside of Canada, and 29 per cent of households spoke a language other than English or French at home.<sup>76</sup> Poverty, income inequality and [social-spatial polarization](#) are major challenges in Toronto with increasing segregation along economic and ethno-cultural lines across the city. High-income non-immigrant communities are clustered in the downtown core near transit hubs, while low-income immigrant communities are clustered near the inner suburbs of the Greater Toronto Area with limited access to transit and other services.<sup>77</sup>

Criminalization and over-policing of racialized communities is pervasive throughout the history of community safety in Toronto and has failed to reduce crime while contributing to community trauma, violence, and harm.<sup>78, 79, 80</sup>

A trauma-informed city model can outline approaches that reduce the impacts of trauma, promote healing and resilience for all Torontonians, especially racialized and equity-seeking populations. The City of Toronto has a number of local initiatives to address racism and race-based inequities like the City's Confronting Anti-Black Racism unit (CABR) and the [Neighbourhood Improvement Areas](#) initiative. Initiatives like these can contribute to the advancement of a trauma-informed approach in Toronto.

One of SAMHSA's six key principles fundamental to a trauma-informed approach include a focus on cultural, historical, and gender issues. Using this approach, organizations, systems or cities offer access to gender-responsive services; leverages the healing value of traditional cultural connections; incorporates policies, protocols, and processes that are responsive to the racial, ethnic and cultural needs of individuals served; and recognizes and addresses historical trauma.<sup>81</sup>

The cities that we examined used four main methods of addressing race-based trauma: -  
fostering community leadership from defining problems to creating solutions;

- data collection, analysis and action;
- incorporating race-focused frameworks into their planning; and
- race focused programming.

Baltimore and Philadelphia developed and integrated community partnerships and collaboration across the full range of city systems and departments. Their trauma-informed task forces leading decision-making and planning are made up of community members and organizations focused on community, racial equity, LGBTQ2+ advocacy, newcomers, public

school system, individuals recently exited from the correctional system and other equity seeking populations.

Baltimore established Healing City Champions to build a critical mass of community individuals and organizations committed to creating a more compassionate, caring and connected community. These champions are a dedicated group of community organizers, practitioners, social workers and scholars committed to building a racially, socially and economically just and thriving Baltimore for all.

San Francisco Department of Public Health (SFDPH), who lead the City's trauma-informed city initiative, work closely with Black and African American health organizations, and integrate work with cultural humility training to better understand and align with the impact of racism on delivery systems.

Chicago's trauma-informed approach began by using and maximizing data and research. They started by collecting demographic data, looking for inequities, and using the data to develop and drive its Healthy Chicago 2.0 plan. They engaged community members and stakeholders to guide data collection and analysis, and shared the results with community members, seeking their guidance on prioritizing the issues outlined in the plan. They also monitor a discrimination indicator measuring the percentage of adults who report ever experiencing discrimination, been prevented from doing something or have been hassled or made to feel inferior because of their race, ethnicity or color, as well as a discrimination from criminal justice system.

Baltimore's Mayor is working to ensure that Baltimore's trauma-informed city model systematically addresses racism and race-based trauma. He stipulated that people who are intimately aware of and knowledgeable about systems of oppression and racial inequality be part of the City's trauma-informed planning and implementation. He requested additional appointees that represent populations whose voices need to be lifted up and an organization with an explicit focus on racial equity in their mission statement be part of their task force and

workgroups. Baltimore also required that partner agencies work in partnership with equity coordinators at to review each agency's equity assessment program in their trauma-informed review of agency policies and procedures.

Glasgow began the use of 'Trauma Champions' from across Local Authorities and Health Boards. They recruited 'champions' from the city's Horn of Africa community to provide various forms of assistance to other racialized and newcomer groups across the city. The initiative works with Black, minority and ethnic communities across Glasgow to overcome barriers in access to education and encouraging positive life choices. The champions are provided a range of training to ensure people get the right support from people and services in the city to overcome any challenges.

Research has shown links between health and mental health impacts, and individual, community and intergenerational trauma connected to racism, colonialism and immigration. The cities we studied have started on a path to leverage the healing value of traditional cultural connections, incorporate policies, protocols, and processes that are responsive to the racial, ethnic and cultural needs of individuals served, as well as recognize and address historical trauma. They provide useful examples for Toronto to draw lessons from and build on.<sup>82, 83</sup>

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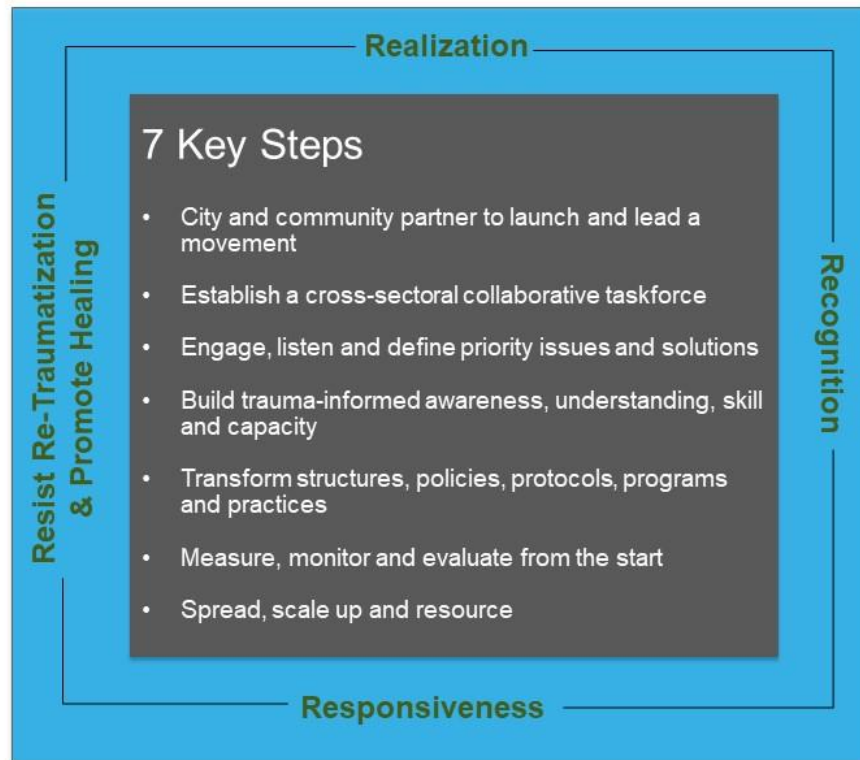
### ***Roadmap to a Toronto Trauma-Informed City***

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International best practices suggest the following seven steps to transform Toronto into a traumainformed, responsive and specific city explained below. The Roadmap to a Trauma-Informed City Model is informed by lessons in developing and implementing a trauma-informed city model from the literature and trailblazers in Baltimore, Philadelphia, Chicago, San Francisco and Glasgow.



## Roadmap to a Toronto Trauma Informed City Model



### ***City and community partnering to launch and lead a movement***

The cities that we studied began with city government and community working in partnership to launch and lead trauma-informed city movements. For example, Mayor Rahm Emanuel launched Healthy Chicago in collaboration with community in 2011, and Baltimore enacted the Elijah Cummings Healing City Act, 2021 that emerged from the voices of the community.

Everyone across the city needs to be a part of the process of making change. City governments play a critical role leading action in their city departments, championing the movement in the community, and supporting continued engagement of all segments of society as well as city employees. Every trauma-informed city movement that we studied actively partnered with community to transform their city.

Some started by focusing their efforts internally and others on amplifying the voice of the community in their trauma-informed city efforts. The experiences shared by different cities suggest that a mixed approach is beneficial. Cities embraced and clearly communicated the intended goals and outcomes of this work to everyone.

To address the damaging impacts of trauma and build resilient communities, the City of Toronto will need to commit to working with communities to develop and deliver programs, organizations, and a system that follow SAMHSA's well-established guidance to "**realize**" the impact of trauma and understands potential paths for recovery; "**recognize**" the signs and symptoms of trauma in service users, families, staff, and others involved with the system; "**respond**" by fully integrating knowledge about trauma into policies, procedures, and practices, and seek to actively "**resist re-traumatization, and promote healing**" across the city.

***Establish a cross-sectoral collaborative taskforce***

A systems approach that integrates inclusive partnership with a cross section of stakeholders including community services, civil society, and business representatives is paramount in trauma-informed city model development and implementation. Without broad buy-in, a shared understanding, and the voices of those most affected by trauma, the kind of system and society-wide change that could transform Toronto will not be possible.

Addressing trauma requires acting on the social determinants of health which requires involvement from diverse sectors and disciplines. This cross-sector collaboration involves bringing multiple service agencies and sectors together; ensuring peer and community involvement in equal partnership with larger organizations or institutions; establishing agreement that understanding trauma can help individuals, organizations, and communities across the city; and collaboratively improving service delivery.

Baltimore, Philadelphia, Chicago, San Francisco and Glasgow all established cross-sectoral collaborative taskforces. Their cross-sectoral taskforces engaged the community, conducted research to assess needs and opportunities for solutions, and developed policy, programs, and plans for a trauma informed approach and trauma-informed city model.

Baltimore's Mayor is working to ensure that an explicit focus on racial equity is integrated into the City's mission statement, trauma-informed planning and implementation by including people who are intimately aware of and knowledgeable about systems of oppression and racial inequality in their task force and work groups.

A multi-sectoral Toronto Trauma-Informed City taskforce or group can be built from already existing networks like THRIVE Toronto that has the support and expertise of multi-sectoral leaders across the city who are experiencing local challenges related to trauma and actively addressing many of these issues.

***Engage, listen and define priority issues and solutions***

City transformation needs to be rooted in the voices of people across the city - including people who have experienced trauma and their families, service providers, businesses, advocates and system planners and administrators - who together will develop a shared vision to transform the city. Blending lessons from local experience and expertise from across the globe will help us develop an effective Toronto trauma-informed city model.

The City of Toronto can continue its consultation and engagement with stakeholders to build public awareness and knowledge of factors that promote healing from trauma and resilience, gather information about community needs and strengths, and develop trust and relationships with all communities especially those that experience higher levels of trauma.

Multiple cities expressed the importance of this work. Baltimore undertook extensive consultations and emphasized the importance of the voices of their community. They

conducted over two hundred listening sessions in multiple languages asking the community for direction on how Baltimore could heal from its trauma. They elevated conversations around mental health, racism, youth activism, anti-violence to generate community healing. The cities suggested committing to at least one year of intensive community engagement. This knowledge and community building becomes a core source of strength and support as the adoption of trauma-informed approaches and the movement progresses across the city.

Deliberate effort will need to be made in Toronto to collaboratively engage with and involve communities disproportionately impacted by trauma, people in recovery, trauma survivors, people and caregivers receiving trauma services, and service providers. It is important to ensure these groups have significant involvement, voice, and meaningful choice in all areas of trauma-informed approaches.

***Build trauma-informed awareness, understanding, skill and capacity***

Being trauma-informed includes understanding the prevalence of trauma, recognizing trauma and the many interrelated factors that influence it, and recognizing culture and practices that are re-traumatizing. Lack of this understanding and recognition leads to misinterpretation and inappropriate approaches to treatment, and, ultimately, more harm. As the system moves towards transformation of its services to promote healing and resilience, the issue of trauma has to include a commitment to becoming trauma-informed and ensuring staff are trained to be able to provide trauma-specific treatment.

Being trauma-informed includes leadership and administrative commitment to trauma-informed change that includes the provision of trauma training and supports to all staff; as well as incorporating trauma-informed competency requirements into recruitment and hiring processes.

Ongoing training on trauma and trauma-informed approaches is an essential step in becoming trauma-informed. Building overall capacity toward trauma-informed system transformation will also require human resource systems to incorporate trauma-informed principles in hiring,

supervision, and staff evaluation; and put procedures in place to support staff with trauma histories and/ or experiencing secondary traumatic stress from vicarious trauma.

All five cities provided training on trauma-informed approaches for their employees. The City of Baltimore offers training that lasts between eight and twelve months.<sup>84</sup> Although training can be extensive, it is shown to reduce staff's own stresses and desensitization to situations.

The Trauma Transformed Initiative in San Francisco relied on a train the trainer model to build the capacity of the agencies to sustain and build upon the initiative. This model embeds trauma experts within the agencies, ensuring that in future fiscal years the initiative will not be dependent on resources to fund outside consultants. The Center for Health Care Strategies (CHCS) has put out recommendations for successful trauma-informed care implementations. Since introducing a trauma-informed approach for public health staff and their partners in San Francisco, retention of front-line workers has increased and surveys of workers have shown decreased levels of stress and burnout.<sup>85, 86</sup>

### ***Transform structures, policies, protocols, programs and practices***

SAMHSA puts governance and leadership buy-in at the top of their list of factors that are essential to the implementation of a trauma-informed approach. At the outset, leadership must address external and internal cultural and policy barriers that may impede implementation of trauma-informed approaches, establish strategies for rolling out changes, and clearly communicate the rationale and benefits to both staff and community members.

Leadership across the City and organizations need to ensure that the structures, policies, processes and procedures are in place and aligned with a trauma-informed approach, values, and principles. Leaders will also need to identify resources, prioritize the trauma-informed city model in funding allocation, and determine how staff time is designated to the implementation of the trauma-informed city model.

Trauma-informed transformation requires the involvement of people with lived experience (trauma survivors) in designing and evaluation of services; review and development of formal and informal policies and procedures to ensure they reflect a thorough understanding of trauma and the needs of trauma survivors; and a thorough assessment of the ways in which existing structures can adversely affect proper service delivery to people receiving services who have been traumatized.

Engaging community and staff in these processes, and assessing their needs, priorities and assets, will build up community and frontline champions for a trauma-informed city model. Policies in this type of trauma-informed approach would build in accountability to service users and communities.

In Philadelphia, the Department of Behavioral Health and Intellectual Disability Services (DBHIDS) found that executive leadership buy-in and involvement was critical during the implementation process and to successfully create trauma-informed environments. The Commissioner and leadership team of DBHIDS championed the integration of a trauma-informed approach that they developed in partnership with the community across the department.

Based on the trauma-informed work in San Francisco, a key first step to transformation is conducting a city-wide survey on policies, programs, procedures practices to understand where challenges and strengths lie regarding the ability to implement a trauma-informed city model. In Toronto, this process should be greatly informed by the community safety and well-being mapping work already under way. This would illuminate current policies that may lead to re-traumatization of staff and clients, and help build on knowledge around already existing trauma-informed capacity.

***Measure, monitor and evaluate from the start***

There needs to be ongoing assessment, tracking, and monitoring of implementation of trauma-informed principles and effective use of evidence-based trauma specific screening, assessment and treatment. Evaluation at all stages of intervention development and implementation is necessary for ongoing improvement and sustainability of initiatives.

San Francisco has a team evaluating their programs and services and assessing to what extent they are trauma-informed and improving. The Chicago experience suggests choosing a department or program, then developing, implementing and evaluating the trauma informed approach. This process allows all involved to learn from the experience, and then deliberately scale and spread the trauma-informed practices and approach.

***Spread, scale up and resource***

There is a considerable amount of work already being undertaken by communities, community agencies, civil society, and by the City of Toronto that advances trauma-informed approach principles. A significant amount of time and resources have been invested into developing and sustaining them. It is important to leverage these existing efforts and initiatives, spread and scale them up to meet the comparable needs across the city.

In the last ten to fifteen years, cities have used different methods to start local trauma-informed city movements. Based on their experiences, a dedicated funding stream is needed to move Toronto towards becoming trauma-informed, and speed city transformation. Glasgow's movement spread to the entire country and beyond, across business, school and health sectors. Philadelphia had a successful trauma awareness campaign that includes signs on buses, kiosks at department stores and pharmacies with the slogan "check up for the neck up." The Collaborative in Chicago has spread beyond Chicago to across Illinois, and San Francisco is expanding its work to include the greater metropolitan area.

Fully integrating a trauma-informed approach, implementing the necessary practices, and transforming the way the City provides services and in turn people's lives will require significant fiscal, policy, practice and community change.

Dedicated resources are needed to mobilize diverse players and facilitate the co-creation and implementation of plans to develop and implement a trauma-informed city model and sustain impactful change. City transformation will require staff capable of offering trauma-informed services which in turn will create a trauma informed system.

Resourcing will be an ongoing challenge and the following steps from above are crucial to building the case for implementing trauma-informed city approaches and setting the foundation for transformation change across a city. Earlier steps, including local engagement and leadership, movement building, and establishing a strong cross-sectoral taskforce, will generate lessons, internal champions, demonstrated value and efficacy of a trauma-informed city model, and ensure the transformation is impactful.

### ***Conclusion***

Mobilizing the City and its partners to transform our service system to becoming a trauma informed city is a long-term approach and requires strong internal and external cross-sectoral collaboration. Leadership, engagement, system planning and early intervention will transform how City of Toronto departments collaborate with stakeholders to provide effective and efficient services, foster healthier work environments, employees, residents – and achieve a thriving Toronto.

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