The Ottawa Community Wellbeing Report

Spotlight on the Role and Wellbeing of Ottawa's Community Services



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COALITION OF COMMUNITY HEALTH AND RESOURCE CENTRES OF OTTAWA COALITION DES CENTRES DE RESSOURCES ET DE SANTE COMMUNAUTAIRES D'OTTAWA

SOCIAL PLANNING COUNCIL of Ottawa



e CONSEIL de L'ANIFICATION SOCIALE Ottawa

Table of Contents

INTRODUCTION	2
EXECUTIVE SUMMARY	4
SUMMARY OF THE EIGHT DOMAINS OF WELLBEING	5
RÉSUMÉ	7
RÉSUMÉ DES HUIT DOMAINES DU MIEUX-ÊTRE	9
SECTION 1: MEASURING WHAT MATTERS - THE EIGHT DOMAINS OF WELLBEING, OTTAWA 2016	11
LIVING STANDARDS	12
Income and Poverty	12
Labour Force and Unemployment	16
Meeting Basic Needs	20
Housing	
Food Insecurity	
HEALTHY POPULATIONS	
	_
TIME USE	
EDUCATION AND CHILDCARE	
LEISURE AND CULTURE	32
DEMOCRATIC ENGAGEMENT	33
ENVIRONMENT	34
RURAL AND SUBURBAN REGIONS CHANGING PROFOUNDLY	36
SECTION 2: IMPROVING WHAT MATTERS - COMMUNITY SERVICES BUILDING COMMUNITY WELLBEING	37
LIVING STANDARDS: SPOTLIGHT ON BASIC NEEDS	39
HEALTHY POPULATIONS: SPOTLIGHT ON MENTAL HEALTH AND ADDICTIONS	42
COMMUNITY VITALITY: SPOTLIGHT ON SAFETY	45
TIME USE: SPOTLIGHT ON CAREGIVING	47
EDUCATION: SPOTLIGHT ON READINESS TO LEARN AT ENTRY TO KINDERGARTEN	49
LEISURE: SPOTLIGHT ON PHYSICAL ACTIVITY FOR CHILDREN AND YOUTH	53
DEMOCRATIC ENGAGEMENT: SPOTLIGHT ON VOTER TURNOUT	
ENVIRONMENT: SPOTLIGHT ON TRANSPORTATION	
COMMUNITY SECTOR CALLED ON FOR URGENT AND CRITICAL COMMUNITY CONDITIONS	
SECTION 3: CHECK-UP ON THE WELLBEING OF OTTAWA'S COMMUNITY SERVICE SECTOR	
APPENDIX A: HOW DO WE COMPARE?	
ENDNOTES	76

Introduction

For more than 10 years, the <u>Canadian Index of Wellbeing (CIW)</u>, based at the University of Waterloo, has provided comprehensive analyses of how we are really doing in the areas of our lives that matter most. The CIW framework is rooted in Canadian values and reflects what really matters in our lives.

The CIW takes a systems approach and identifies key leverage points that have a positive impact on our wellbeing across several domains — Community Vitality, Democratic Engagement, Education, Environment, Healthy Populations, Leisure and Culture, Living Standards, and Time Use. When we tackle challenges in one part of the system, the improvements can translate across a number of domains and to overall wellbeing. *(Canadian Index of Wellbeing and University of Waterloo, The 2016 CIW National Report, 2016, p. 2)*

Wellbeing can be defined as the presence of the highest possible quality of life in its full breadth of expression focused on but not necessarily exclusive to: good living standards, robust health, a sustainable environment, vital communities, an educated populace, balanced time use, high levels of democratic participation, and access to and participation in leisure and culture. (Canadian Index of Wellbeing and University of Waterloo, The 2016 CIW National Report, 2016, p. 11)

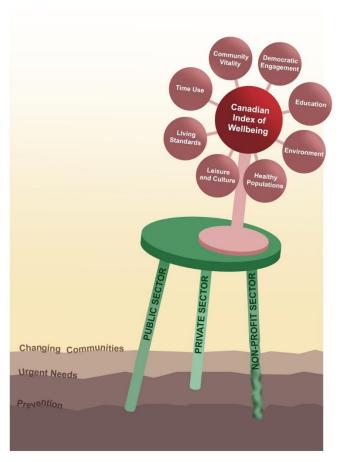
This report has three sections.

Section 1: Measuring What Matters - The Eight Domains of Wellbeing, Ottawa 2016

Section 1 presents some of the latest statistical measures that have been identified as important for an Ottawa focused CIW. It describes how well residents of Ottawa are really doing. Based on the 2016 census of population and historical trends, the Canadian Community Health survey, crime statistics and other data sources, the data shows where we are making progress, where we are falling behind, and where we need to make improvements.

Section 2: Improving What Matters -Community Services Building Community Wellbeing

Community wellbeing relies on the public, private and nonprofit sectors each playing important roles – a "three-legged stool" that supports a balanced approach to address complex issues. Section 2 explores the critical role of Ottawa's non-profit community services in protecting and improving community wellbeing. For each of the eight domains of wellbeing, this section highlights a priority issue of concern from section 1. It presents additional data related to the issue and examines the role of community services in improving community wellbeing related to the issue.



Section 3: Checkup on the Wellbeing of Ottawa's Community Service Sector

Because of the essential role of community services in supporting well-being, the final section looks at the wellbeing of the community service sector itself. This section is based on data from Canada Revenue Agency's Charity Directorate, a 2018 survey of community agencies receiving funding from the City's community services stream, and service data from a range of agencies. Ottawa' community service sector is resourced through many different funding streams, including different levels of government, each with responsibility for different issues. The findings from these three data sources highlight the significant gap between stagnant investment overall (from all sources of funding) and the ever-increasing demands placed on the community service sector as the sector responds to pressures from population changes, on-going prevention work as well as emerging and urgent needs.

Data Notes

The findings in this project are based on the most recent data available on selected indicators for each of the domains of wellbeing.

All indicator data is presented for the city of Ottawa unless otherwise specified.

The source of data, unless stated otherwise, is the 2016 census of population accessed via the <u>Community Data</u> <u>Program</u>. Other key sources of data include: The City of Ottawa, Statistics Canada, Ottawa Public Health, Ottawa Police Services, as well as other community organizations. Throughout the report, superscript numbers identify the source listed in the endnotes. Where available, historical data has been included in order to provide some context.

Please note that Statistics Canada data with respect to Aboriginal residents is disputed by some local service providers who indicate that it under-represents due to under-reporting.

The 2018 community agency survey was sent to the 89 agencies that receive Renewable Community Funding from the City. These are a sub-set of all community agencies in the City. 39 of the agencies responded to the survey (44%). The survey explored the situation with respect to all services and funding within the agency, not just those covered by the City's Renewable Community Funding Program.

For a detailed list of references, data sources and definitions, please refer to the Endnotes of this document.

Note: Please see the relevant section of the report for the data sources in the *Summary of the Eight Domains of Wellbeing* (pg. 5 and pg. 6) and in the *How do we compare table* (pg. 70 and pg. 71).

This report was prepared in June 2018 by the <u>Social Planning Council of Ottawa</u> for the <u>Coalition of Community</u> <u>Health and Resource Centres</u> and the <u>Making Voices Count</u> initiative.

Executive Summary

For more than 10 years, the <u>Canadian Index of Wellbeing (CIW)</u>, based at the University of Waterloo, has provided comprehensive analyses of how we are really doing in the areas of our lives that matter most: Living Standards, Healthy Populations, Community Vitality, Education, Time Use, Leisure and Culture, Democratic Engagement and Environment.¹ **The Ottawa Community Wellbeing Report 2018** identifies where we are making progress and where we are falling behind in relation to the eight CIW domains of wellbeing.

Section 1 describes how well **residents of Ottawa** are really doing based on the 2016 census of population, the Canadian Community Health survey, crime statistics and other data sources

Section 2 highlights the critical **role of the community services sector** in providing a broad range of services that improve quality of life in Ottawa across all the domains of wellbeing, using the same data sources as section 1, service data from a range of agencies and results of a 2018 survey of community agencies receiving Renewable Community Funding from the City.

Section 3 examines the **wellbeing of Ottawa's community services sector**, using data from Canada Revenue Agency's Charities Division and the results of the 2018 survey of community agencies.

The picture that the 2018 Community Wellbeing Report highlights is one of the urgent unmet needs in the community, with Ottawa's community services sector stretched to the limit with a significant need for sustainable investment to support the sector in its pivotal role.

The report highlights that, despite a high standard of living on average, there are very serious wellbeing problems in Ottawa. The percent of people living in poverty continues to grow. Thousands of residents are not able to meet their basic needs for housing and nutritious food. This is driven by a critical and worsening shortage of affordable housing. Precarious employment – with inadequate hours or working conditions – is on the rise with a growing number of people working full-time but still living in poverty. While unemployment rates have improved, Aboriginal residents, racialized groups (visible minority residents) and youth have continuing high unemployment and significantly lower median incomes. Several chronic diseases are on the rise (such as diabetes), and growing mental health and addictions issues are having a serious impact on individuals, families and communities. Dementia and caregiving pressures are increasing as the population ages. Serious safety incidents and hate crimes are increasing. Significant population growth in the suburbs has resulted in under-served areas and a loss of farm land.

Community wellbeing relies on the public, private and non-profit sectors each playing important roles. Non-profit community services serve an essential function and are constantly innovating to address changing and increasing needs. They provide excellent value for money to improve the key quality of life issues highlighted in the Canadian Index of Wellbeing. The report identifies that there is a significant gap between the ever increasing demands placed on the community sector, in relation to the stagnant investment. Many organizations are at a crisis point, particularly those called upon to address the increasing difficulty for thousands of residents to meet basic needs. Community agencies need an increase in sustained funding, to address critical vulnerabilities in the non-profit sector, as it responds to pressures from population changes, on-going prevention work as well as emerging and urgent needs. Community wellbeing in Ottawa urgently requires increased resources for the community services sector, so it can continue to fulfill its role as the foundation for wellbeing in Ottawa, benefiting both the individuals served and the community at large.

Summary of the Eight Domains of Wellbeing

LIVING STANDARDS

Things to Celebrate

- Median total income of Ottawa households is one of the highest in Ontario.
- The gap between female and male income levels is getting smaller.
- The unemployment rate is improving overall.

Things to Improve

- 12.6% of residents were low income in 2015.
- 42.3% of renter households in 2016 were living in unaffordable housing and there are 10,000+ families on the social housing waitlist.
- 1 in 15 households experienced moderate to severe food insecurity in 2017.
- The unemployment rate for immigrants is 8.1%, 15.1% for immigrants who arrived since 2011 and for racialized groups (visible minority) is 10.4% compared to 7.2% for all Ottawans.

HEALTHY POPULATIONS

Things to Celebrate

- Two-thirds of people self-rate their health as excellent or very good and two-thirds stay physically active (150 min./week).
- 88.3% of residents have a regular family physician.

Things to Improve

- 60% of residents do not eat enough fruits and vegetables daily and a growing number of low income families cannot afford healthy food.
- The number of Emergency Department repeat visits related to unintentional drug overdose or mental health issues have been steadily



increasing since 2007. There was a 32% increase in the rate of drug overdose from 2014-15.

• The incidence of chronic disease is increasing.

COMMUNITY VITALITY



Things to Celebrate

- 70.4% of residents have a strong sense of belonging, up from 65% in 2010.
- 69% of residents feel safe walking in their neighbourhood at night and 91% feel safe in their homes.

Things to Improve

- From 2015-2016, the Overall Crime Rate went up 5.9% and Crime Severity Indexwent up 10.5%.
- Hate crimes increased 10% (2014-16) and were double the national average
- Only 16% feel safe waiting for or using public transit after dark.
- Low income neighbourhoods are significantly more affected by crime.

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TIME USE

Things to Celebrate

 Ottawa has lots of opportunities for residents to enjoy vacations close to home – including outdoor spaces, world class culture and an expanding agri-tourism sector.

Things to Improve

- 22% of people aged 12 and over report that most days their life were quite a bit or extremely stressful.
- 45.6% of working population worked part year or part time in 2015, an increase from 2010.
 While some people choose part-time work, the increase in part-time work is part of a growing trend of precarious employment.
- Stress for unpaid caregivers of seniors is growing.

EDUCATION

Things to Celebrate

- 74% of kindergarten kids are developmentally on track at school entry.
- 85.5% of youth passed the Ontario Secondary School Literacy Test.
- Ottawa has a well-educated population -- 45% of people (aged 25 to 64) have a bachelor's degree or higher. Immigrants are more likely to have a bachelor's degree, at 49.9%.

Things to Improve

- 1 in 4 children was low on one or more domains of development and were considered vulnerable for school readiness at the beginning of kindergarten. Children in low income neighbourhoods are disproportionally vulnerable.
- There are 2 children per childcare space. 8,830 children were waiting for a licensed childcare space in 2016-2017.



LEISURE AND CULTURE

Things to Celebrate

- Residents from 81% of households participate in outdoor activities.
- The City's recreation facilities received nearly 10 million visitors in 2016.

Things to Improve

- Only 25% of students aged 12 to 17 reached the recommended level of physical activity (2013).
- 60% of students aged 12 to 17 spend more than 2 hours in front of a screen. Students from lower socio-economic status homes were more likely to report daily screen time over 2 hours (75% vs. 55%).



Democratic Engagement



Things to Celebrate

- Half of Ottawa residents volunteer.
- The dollar amount of charitable donations is growing.

Things to Improve

- The proportion of residents donating to charity is declining, from 31.32% in 2001 to 25.5% in 2015.
- Only 40% of eligible voters voted in the last municipal election (2014).
- City government is not representative of the make-up of the population. For example, women and diverse groups are underrepresented.

ENVIRONMENT

Things to Celebrate

- More people use public transit, walk or bike to work in Ottawa compared to the Ontario average.
- We have over 1,000 farms and gross farm receipts increased by 9% since 2011.
- Access to local food is increasing, with 20 farmers markets and 60 community gardens.
- Ottawa households are using energy saving and water preserving tools and practices.

Things to Improve

- Although we are doing better than Ontario in general, in 2016, 62.7% of Ottawa commuters got to work by driving.
- Agricultural land decreased by over 18,300 hectares between 2001 and 2016.

Résumé

Depuis plus de 10 ans, <u>l'Indice canadien du mieux-être</u>, dont les responsables se trouvent à l'Université de Waterloo, présente des analyses exhaustives sur ce que nous faisons vraiment dans les aspects les plus importants de notre vie : les niveaux de vie, les populations en santé, le dynamisme communautaire, l'éducation, l'emploi du temps, les loisirs et la culture, la participation démocratique et l'environnement¹. Le Rapport sur le bien-être communautaire d'Ottawa de 2018 rend compte des progrès accomplis et des retards par rapport aux huit domaines du mieux-être de l'ICM.

La section 1 décrit la situation réelle des résidents d'Ottawa en fonction du recensement de la population de 2016, de l'Enquête sur la santé dans les collectivités canadiennes, des statistiques sur la criminalité et d'autres sources de données.

La section 2 souligne le rôle crucial du secteur des services communautaires dans la fourniture d'une gamme étendue de prestations qui améliorent la qualité de vie à Ottawa dans tous les domaines du mieuxêtre. Les auteurs ont utilisé les mêmes sources de données que pour la section 1 ainsi que des données sur les services provenant d'un éventail d'organismes et les résultats d'une enquête réalisée auprès des organismes communautaires qui reçoivent des sommes du Programme de financement communautaire renouvelable de la Ville.

La section 3 examine le mieux-être du secteur des services communautaires d'Ottawa à l'aide de données de la Division des organismes de bienfaisance de l'Agence du revenu du Canada et des résultats de l'enquête réalisée en 2018 auprès des organismes communautaires.

Le rapport de 2018 sur le bien-être communautaire fait ressortir les besoins urgents non satisfaits dans la collectivité. Le secteur des services communautaires d'Ottawa travaille à la limite de ses capacités et éprouve un important besoin d'investissement durable pour le soutenir dans son rôle clé.

Le rapport met en évidence le fait que, malgré le niveau de vie élevé en moyenne, il y a des problèmes de mieux-être très graves à Ottawa. La proportion de personnes vivant dans la pauvreté continue de croître. Des milliers de résidents sont incapables de satisfaire leurs besoins fondamentaux en matière de logement et d'aliments nutritifs. Cette situation est stimulée par une pénurie critique de logements abordables qui empire. L'emploi précaire — avec un nombre d'heures ou des conditions de travail inadéquats — est en hausse; de plus en plus de gens travaillent à temps plein tout en continuant de vivre dans la pauvreté. Les taux de chômage se sont certes améliorés, mais les résidents autochtones, les groupes racialisés (les résidents membres d'un minorité visible) et les jeunes connaissent un chômage élevé et disposent d'un revenu médian beaucoup plus faible. Plusieurs maladies chroniques sont en hausse (comme le diabète) et des problèmes grandissants de santé mentale et de dépendance ont de graves répercussions sur les personnes, les familles et les collectivités. La démence et les pressions exercées sur la prestation des soins augmentent au fur et à mesure du vieillissement de la population. Les incidents graves liés à la sécurité et les crimes haineux sont en hausse. La croissance importante de la population des banlieues a créé des zones mal desservies et entraîné une perte de terres agricoles.

Les secteurs public, privé et sans but lucratif doivent chacun jouer des rôles de premier plan en faveur du mieux-être communautaire. Les prestations du milieu sans but lucratif exercent une fonction essentielle et innovent constamment afin de répondre aux besoins changeants et croissants. Il s'agit là de façons très rentables d'améliorer la situation entourant les grands enjeux liés à la qualité de vie que l'Indice canadien

du mieux-être met en évidence. Le rapport fait état d'un écart significatif entre les demandes de plus en plus nombreuses auxquelles fait face le secteur communautaire et la stagnation du financement. De multiples organismes sont en crise, en particulier ceux à qui l'on s'adresse pour s'attaquer à la difficulté accrue qu'éprouvent des milliers de résidents à satisfaire leurs besoins fondamentaux. Les organismes communautaires ont besoin d'une hausse du financement soutenu, afin de chercher à résoudre les **vulnérabilités critiques du secteur sans but lucratif, alors qu'il réagit aux pressions exercées par les changements au sein de la population, qu'il effectue un travail de prévention continu et qu'il répond aux besoins nouveaux et pressants. Pour assurer le mieux-être collectif à Ottawa, il faut accorder de toute urgence plus de ressources au secteur des services communautaires afin qu'il puisse continuer de remplir son rôle de fondement du mieux-être dans la ville, pour le bien des personnes desservies et de la collectivité en général.**

Résumé des huit domaines du mieux-être

Niveaux de vie

Choses à célébrer

- Le revenu médian total des ménages d'Ottawa est l'un des plus élevés en Ontario.
- L'écart entre les niveaux de revenu des femmes et des hommes diminue.
- Le taux de chômage s'améliore dans l'ensemble.

Choses à améliorer

- 12,6 % des résidents avaient un faible revenu (2015).
- En 2016, 42,3 % des ménages locataires vivaient dans des logements inabordables et plus de 10 000 familles se trouvent sur la liste d'attente pour un logement social.
- 1 ménage sur 15 a connu une insécurité alimentaire modérée à grave en 2017.
- Le taux de chômage des immigrants est de 8,1 %, celui des immigrants arrivés depuis 2011 se chiffre à 15,1 %, tandis que celui des groupes racialisés (minorités visibles) est de 10,4 %, par rapport au taux de 7,2 % pour l'ensemble des Ottaviens.

Dynamisme communautaire

Choses à célébrer

- 70,4 % des résidents éprouvent un fort sentiment d'appartenance, soit une augmentation par rapport à 65 % en 2010.
- 69 % des résidents se sentent en sécurité quand ils marchent dans leur quartier la nuit et 91 % se sentent en sécurité chez eux.

Choses à améliorer

- Depuis 2015-2016, le taux global de criminalité a augmenté de 5,9 %, tandis que l'indice de gravité de la criminalité l'a été de 10,5 %.
- Il y a eu une hausse de 10 % des crimes haineux (2014-2016). Leur nombre est deux fois plus élevé que la moyenne nationale.
- Seulement 16 % des gens se sentent en sécurité lorsqu'ils attendent un véhicule de transport en commun ou lorsqu'ils sont dedans une fois la nuit tombée.
- Les quartiers à faible revenu sont considérablement plus touchés par la criminalité.

Populations en santé Choses à célébrer

- Deux tiers des gens disent que leur santé est excellente ou très bonne et deux tiers demeurent physiquement actifs (150 minutes/semaine).
- 88,3 % des résidents ont un médecin de famille régulier

Choses à améliorer

- 60 % des résidents ne mangent pas assez de fruits et de légumes chaque jour. Un nombre croissant de familles à faible revenu ne peuvent se permettre des aliments sains.
- Le nombre de visites répétées à l'urgence à cause d'une surdose de drogue ou de problèmes de santé mentale augmente régulièrement depuis 2007. Il y a eu une
 - augmentation de **32 %** de taux de surdose de drogue depuis 2014-2015.
 - L'incidence de maladies chroniques augmente.

Emploi du temps

Choses à célébrer

 Ottawa offre à ses résidents de nombreuses possibilités de passer les vacances près de chez eux, notamment des espaces en plein air, des installations culturelles de calibre mondial et un secteur agrotouristique en expansion.

Choses à améliorer

- 22 % des personnes âgées de 12 ans ou plus indiquent que, la plupart du temps, leur vie est très ou extrêmement stressante.
- 45,6 % de la population active a travaillé une partie de l'année seulement ou à temps partiel en 2015, ce qui représente une hausse par rapport à 2010. Certaines personnes choisissent de travailler à temps partiel, mais la hausse de ce type de travail s'inscrit dans une tendance croissante à l'emploi précaire.
- Le stress des soignants non rémunérés qui travaillent auprès des personnes âgées s'intensifie.

Éducation

Choses à célébrer

- 74 % des enfants de la maternelle sont sur la bonne voie du point de vue du développement lorsqu'ils commencent l'école.
- **85,5** % des jeunes ont réussi le Test provincial de compétences linguistiques.
- Ottawa possède une population bien instruite : 85 % de la population (de 25 à 64 ans) détient un baccalauréat ou un diplôme de niveau supérieur. Les immigrants sont plus susceptibles d'avoir un baccalauréat (49,9 %).

Choses à améliorer

- 1 enfant sur 4 avait un faible niveau de développement dans au moins un domaine et était jugé vulnérable quant à son degré de préparation à l'école au début de la maternelle. Les enfants des quartiers à faible revenu sont disproportionnellement plus vulnérables.
- Il y a 2 enfants par place de garderie.
 8 830 enfants attendaient une place dans une garderie agrée en 2016-2017.

Loisirs et culture

Choses à célébrer

- Des membres de 81 % des ménages participent à des activités de plein air.
- Les installations récréatives de la Ville ont accueilli près de 10 millions de visiteurs en 2016.

Choses à améliorer

- Seulement 25 % des élèves âgés de 12 à 17 ans ont atteint le niveau d'activité physique recommandé (2013).
- 60 % des élèves âgés de 12 à 17 ans passent plus de 2 heures devant un écran. Les élèves vivant dans des ménages au statut socioéconomique faible étaient plus susceptibles de déclarer qu'ils passaient plus

de 2 heures par jour devant un écran (75 % c. 55 %).

Participation démocratique

Choses à célébrer

- La moitié des résidents d'Ottawa font du bénévolat.
- Le montant en dollars des **dons** de bienfaisance **augmente**.

Choses à améliorer

- La proportion de résidents qui font des dons de bienfaisance diminue, passant de 31,32 % en 2001 à 25,5 % en 2015.
- Seulement 40 % des électeurs admissibles ont voté lors des dernières élections municipales (2014).
- Le gouvernement municipal n'est pas représentatif de la composition de la population. Par exemple, les femmes et les groupes de la diversité sont sous-représentés.

Environnement

Choses à célébrer

- Plus de gens que la moyenne ontarienne se rendent au travail en transport en commun, à pied ou à vélo à Ottawa.
- Nous avons plus de 1000 fermes et les revenus agricoles bruts ont augmenté de 9 % depuis 2011.
- L'accès aux aliments locaux est en hausse : il y a 20 marchés fermiers et 60 jardins communautaires.
- Les ménages d'Ottawa utilisent des outils et des pratiques d'économie d'énergie et de préservation de l'eau.

Choses à améliorer

- Bien que nous fassions mieux que l'Ontario en général, en 2016, 62,7 % des navetteurs se sont rendus au travail en auto à Ottawa.
- Plus de **18300** hectares de terres agricoles ont disparu entre 2001 et 2016.

Section 1: Measuring What Matters The Eight Domains of Well-Being, Ottawa 2016





LIVING STANDARDS

Our living standards should reflect our capacity to transform economic growth into stable current and future income streams for everyone. Economic growth does not automatically translate into better living standards. A higher average income, for example, may be achieved at the cost of increased social inequality or greater economic insecurity. In contrast, achieving greater job quality, reducing poverty, and providing basic affordable housing and food security to individuals and families will raise wellbeing for everyone. (Canadian Index of Wellbeing and University of Waterloo, The 2016 CIW National Report, 2016, p. 42)

INCOME AND POVERTY

The median income is increasing

The overall income of residents is on the rise. The median total income of Ottawa households is one of the highest in Ontario. It reached **\$85,981** in 2015, an increase of **4.2%** since 2005. The increase was most noticeable in families with children, both couple and single parent, partially due to the enhancement of federal government child benefits programs.

The concentration of wealth is a concern

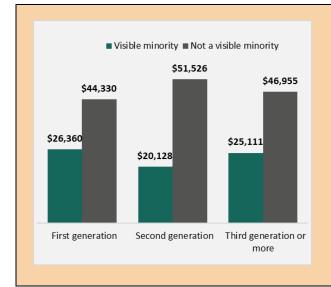
There is a relatively high concentration of wealth in Ottawa. One in five of Ottawa households had income **higher than \$150,000** in 2015. At the same time, the income of the richest 10% of Ottawa residents was 8.5 times that of the poorest 10%.

Inequality is significant and persistent

Not all groups are benefitting equally from increasing incomes.

Although the gap between the incomes of men and women lessened in Ottawa between 2005 and 2015 the gender gap in median income was 24 percent in 2015. Some of the complex causes of the persistent gender wage gap include a gender-segregated labour market, persistent social norms that place additional care and family responsibilities on women, and the higher representation of women in lower-wage jobs.²

In addition, Aboriginal peoples, racialized groups (visible minority residents), first generation immigrants and refugees have lower median incomes.



Median total income of racialized (visible minority) population compared to the population that is not visible minority, by generation status, Ottawa, 2015.

Over one in five people living in Ottawa is a member of a visible minority (racialized group). Members of a visible minority group have a much lower annual income than people who are not visible minorities. The difference in income continues even for the second and third generation – i.e. people who were born in Canada.

Median total income of racialized (visible minority) women and men compared to the income of nonracialized women and men, Ottawa, 2015

Racialized women have much lower income than nonracialized women and are at higher risk of living in poverty than men in the same social group.



The poverty rate continues to get worse

For ten years in Ottawa the poverty rate has continued to worsen. There were **115,175** people in Ottawa (**12.6**% of all residents) living below the low-income threshold (low income measure after-tax) in 2015. Among those who are still most at risk from poverty are children and youth, lone-parent families, people living alone, new immigrants, racialized groups (visible minority residents) and people with disabilities.

In terms of age groups:

- Youth aged 18 to 24 had the highest rate of low-income (**20.5**%) followed by children and then seniors.
- **16**% of Ottawa children aged 0 to 17 were living in low income households in 2015, an increase from 15.2% in 2005,

• The number of low-income seniors aged 65 and older nearly doubled between 2005 and 2015, and their proportion increased from 6.9% to **9.4**%.

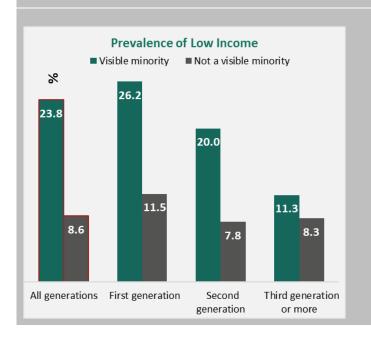
Among all family and living arrangement types, the rate of low income was the highest for **female lone-parent** families (**28.9%**), followed by all lone-parent families (**26.4%**) and people living alone (**25%**).³

Poverty rates are worse for Aboriginal, racialized and immigrant groups

The 2016 Census data show that the groups of racialized (visible minority), indigenous people and new immigrants continue to face significantly higher rates of poverty compared to the general population.

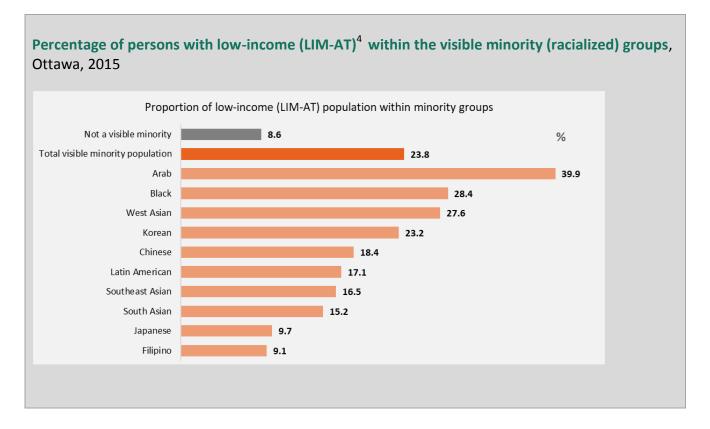
18.7% of Ottawa's 22,960 Aboriginal peoples lived in low income in 2015, compared to 12.6% of the general population.

Proportion (%) racialized population and nonracialized population with low income (LIM-AT)⁴ by generation status, Ottawa, 2015

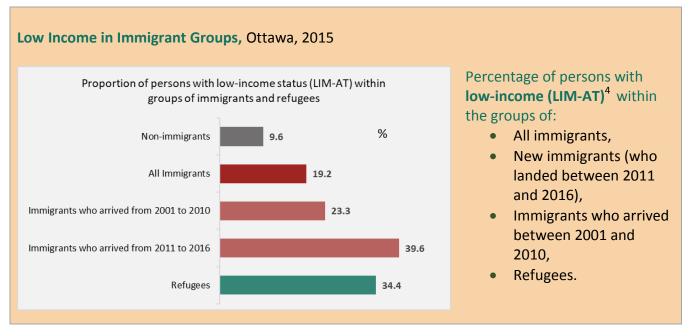


Low Income Rates of Visible Minority Groups by Different Generation

In 2016, **26.3%** of Ottawa residents selfidentified as **racialized (visible minority).** At the same time, racialized people represented **almost half (49.8%)** of poorer citizens. This is a number grossly disproportionate to their representation in the general population. In total, **23.8%** of racialized residents lived in poverty compared with **8.6%** percent of the non-racialized population.



26% of Ottawa residents were born outside of Canada. Between 2011 and 2016 Ottawa welcomed 30,080 new immigrants. 39.6% of new immigrants lived in poverty (below the low-income measure – after tax⁴), a significantly higher proportion than the low-income rate of the general population (12.6%).



LABOUR FORCE AND UNEMPLOYMENT

The unemployment rate in Ottawa is steadily improving

At the time of the 2016 census, the unemployment rate of people aged 15 and older in 2015 was 7.2% - higher than 10 years back in 2005 (5.9%). The unemployment rate for youth 15 to 24 years old was more than double, at 18%.

Since then, the unemployment rate in Ottawa has been steadily improving. According to the Labour Force Survey (LFS)^{3, 5}, the rate of unemployment in Ottawa in March 2018 was **4.9%** for people aged 15 years and older, and **11.5%** for youth aged 15 to 24.

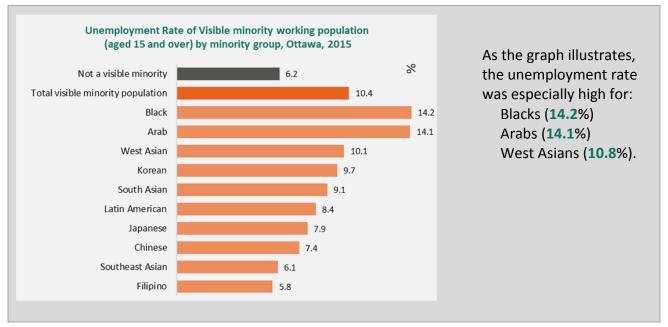
	Ottawa	Ontario	Canada	Unemployment Rate in Ottawa, Ontario and
15 years and over	4.9%	5.9%	6.3%	
15 to 24 years	11.7%	11.9%	11.6%	15 to 24 years, as of March 2018, LFS ^{3,5}

The unemployment rate is worse for Aboriginal, immigrant and racialized groups

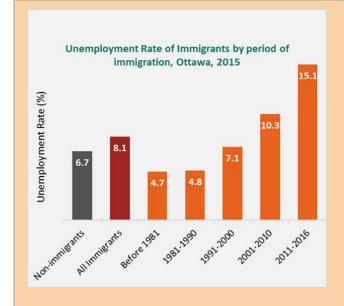
Data from the 2016 census allows for a comparison of labour market participation and employment rates for different population groups. Aboriginal peoples, recent immigrants, and racialized groups (visible minority residents) face barriers in the labour market, resulting in significantly higher rates of unemployment.

The unemployment rate for Aboriginal workers was **9.7%** compared to **7.1%** for the general population.³

The unemployment rate for racialized (visible minority) groups was **10.4%**, whether or not they were born in Canada, compared to **7.1%** for the general population and 6.2% for non-racialized residents.

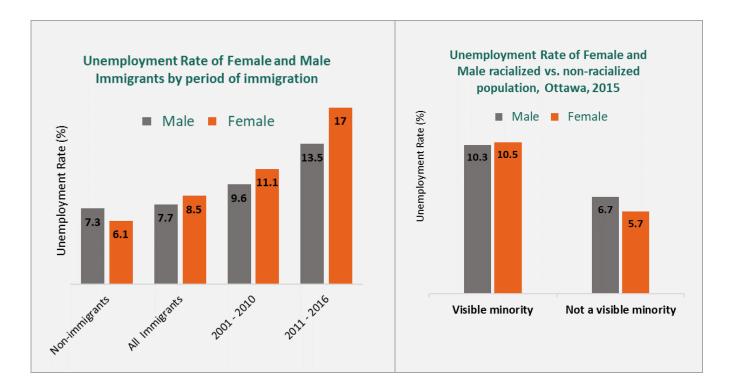






Immigrants also had a higher rate of unemployment. The greatest number of immigrants are economic immigrants, selected for their potential to contribute to Canada's labour market. Despite that, **new immigrants** (who arrived between 2011-2016) had an unemployment rate of **15.1%**, more than double the unemployment rate of non-immigrants at **6.7%**. A significant barrier is that employers do not always recognize qualifications of people who have worked or studied in other countries.

The unemployment rate of women in all immigrant and racialized groups is higher compared to the unemployment rate of men from the same population group. Immigrant and racialized women have much higher unemployment rates when compared to women of non-immigrant or non-minority background. In addition, racialized women are more likely to work part-time, be underemployed or have more than one job.

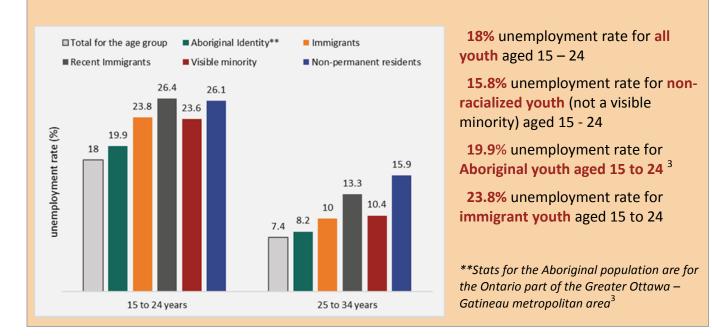


Youth unemployment is very high

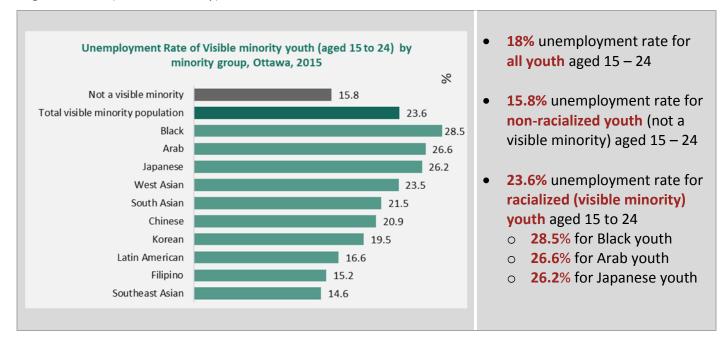
18 % of youth aged 15 to 24 were unemployed at the time of the 2016 census, more than double the unemployment rate for the general population (at 7.2%).

The unemployment rate for **youth and young adults** of **diverse social groups** at the time of the 2016 census shows that particular groups are disproportionately affected by the challenging employment circumstances experienced by all young people in the present labour market.

Unemployment rate for diverse social groups of youth (aged 15 to 24) and young adults (aged 25 to 34), Ottawa, 2015



As the chart below shows, unemployment rates were higher for all racialized (visible minority) youth aged 15 – 24 (visible minority).



Since the 2016 census, the unemployment rate has improved significantly, but is still more than double for youth compared to all ages. According to the Labour Force Survey (LFS)^{3,5} **11.5**% of youth aged 15 to 24 were unemployed in Ottawa in March 2018 compared to **4.9**% for all people aged 15 years and older.

	Ottawa	Ontario	Canada	Unemployment Rate in Ottawa, Ontario
15 years and over	4.9%	5.9%	6.3%	and Canada for population 15 years and
15 to 24 years	11.7%	11.9%	11.6%	older and 15 to 24 years, as of March 2018, LFS ^{3,5}

Precarious employment is on the rise for all ages

Precarious work is contributing to an increase in involuntary part-time work. A higher proportion of the working age population (aged 25 to 64) worked **part time** in 2015 (**30.3**%) than in 2005 (27.4%). While some people choose to work part-time, the increase in part-time work is related to the growing precariousness of employment.

MEETING BASIC NEEDS

<u>Housing</u>

A crisis of unaffordable housing

In Ottawa and across Ontario, there is a compound problem: very few affordable housing units being built and ever-increasing rents. An increasing number of people in Ottawa cannot find appropriate affordable housing.

23.8% of Ottawa residents are living in **unaffordable housing**⁶, spending **over 30%** of their income on housing. **One in five** renter households (more than **25,000** households) are spending more than **50%** of their income on housing, leaving inadequate resources to meet other basic needs.

Spending 30% or more of income	Spending 50% or more of income
on shelter costs, Ottawa, 2016	on shelter costs, Ottawa, 2016
Renters – 42.3%	Renters – 19.7%
Owners – 14.1%	Owners – 4.8%

In 2017, to pay the average market rent of a bachelor apartment (\$836)⁷ in Ottawa it would take: 116% of the Ontario Works monthly payment per single individual

72.6% of the Ontario Disability Support Program monthly payment per single individual
 41% of the minimum wage monthly income of a single individual working full time
 At the same time, the average rent of a one-bedroom apartment was \$1,023, the highest in Ontario

after the Greater Toronto Area.⁷ The average vacancy rate declined to 1.7% in 2017 from 3% in 2016 placing increased pressure on the rental housing market.^{7,8,9}

Loss of affordable housing through gentrification, with few new affordable units

In a number of Ottawa centrally located communities, investment has resulted in a rapid economic development where affordable properties are being replaced by high-end condos. There is a human price to this process - the increased cost of living is forcing low-income residents out of their homes. Along with the costly housing, additional space is taken over by amenities that cater to the wealthier population. This course of development is evident in the historically working-class neighbourhoods such as Hintonburg/Mechanicsville and Vanier.

The pending arrival of light rail transit (LRT) is contributing to the gentrification process. Ottawa housing advocates and urban planners worry the new light-rail system will make neighbourhoods inaccessible to the very people the LRT was meant to benefit. In the areas around new LRT stations, property values will go up and add to an already crisis level of affordability. The neighbourhoods west of downtown along the LRT, for instance, through Hintonburg, Wellington West, and Westboro, have already seen some of the highest housing value increases in 2016-2017.¹⁰

Thousands of households in inadequate housing and more people using emergency shelters

Over the last four years, there have been very few	Newly created affordable housing options: a combination of newly built housing units and newly administered housing subsidies ⁹					
newly created affordable		2014	2015	2016	2017	
housing options, resulting in	New Affordable and Supportive Units	136	34	48	146	
a net loss of affordable	Newly administered Rent Supplements	0	0	100	9	
housing in the City.	Newly administered Housing Allowances	5	0	132	140	

As a result, **10,597** people were on the Centralized Waiting List (CWL) in 2017, a **5.1%** increase from the previous year.⁹ There are approximately **22,500** social housing units in the City. Approximately **1,541** people moved from the CWL list into housing in 2017. Average time spent on the list is **five** years.⁹ For families on the CWL, the reality is high rents or substandard housing or homelessness.

Demand for emergency shelter beds continues to increase, with a **5.1**% increase from 2016 to 2017. Demand has increased in part due to the increase in newcomers requesting service (14% in 2014 and 37% in 2017). 7,530 people stayed in shelters, however 1,280 were diverted from shelters. The average length of stay increased by 19.2% in 2017 due to higher demands from families – 12.4% more families used emergency shelter in 2017.⁹

From 2015 to 2016 ⁸	From 2016 to 2017 ⁹					
 5.6% more people used an overnight emergency shelter 5.1% more bed nights were spent in shelters 20.1% more women older than 50 had to rely on emergency shelters 31.2% more women older than 60 used an overnight emergency shelter Older women and youth stayed for longer periods of time 	 5.1% more people used an overnight emergency shelter 24.7% more total nights were spent in shelter 19.2% increase in the average length of say 12.4% more families used emergency shelter 					

One of the worrying trends is the increased number of women relying on emergency shelters. Up to 21% of single shelter users in Ottawa are single women. Women experiencing homelessness face unique challenges. For example, women are more likely to be low-wage earners, and are most likely to head single parent households. Newcomer women face further challenges such as limited social networks, language barriers, discrimination and difficulties navigating social service systems.⁸

Intimate partner violence is a common risk factor for women's homelessness. City of Ottawa shelter data does not include the numbers of women staying at Ottawa's Violence Against Women shelters. Therefore, the percent of women using all types of emergency housing is even higher than the 21% identified above.⁸

Food Insecurity

Many Ottawa residents are not able to afford a sufficient amount of nutritious food One in 15 households experienced moderate to severe food insecurity in 2017.¹¹ The cost to feed a family of 4 in Ottawa increased by **18.6**% between 2009 and 2017.¹¹

Food insecurity is when an individual or household:

- cannot afford balanced meals,
- goes hungry by eating less or skipping meals (sometimes not eating for an entire day), or
- does not have access to the variety or quantity of food that they need, due to lack of money.

The inadequate or insecure access to food due to financial constraints is a serious problem that negatively impacts physical and mental health.

Among the households at highest risk for food insecurity are:

- Low-income households 20.2% of households living below the low-income cut off in Ottawa report being moderately to severely food insecure.¹¹
- Recent immigrant households 18.8% of households in Ottawa with new immigrants report being moderately to severely food insecure.¹¹
- Single parent households, specifically single mother households: Canadian single mother families who have children under 18 years of age are more likely to experience food insecurity than any other type of household at 33.5%.¹¹
- One-person households.
- Households with people who have chronic health problems.
- Households of young adults.
- Indigenous households.

Many Ottawa residents had to **rely on Food Banks** and other social services for assistance with daily nutrition.

Each month **41,500** Ottawa residents were accessing emergency food services during 2015-2016.¹²

Of those accessing food banks:

35% were families with children
35% were younger than 18
31% lived in social housing
50% lived alone
28% received disability benefits
33% were on social assistance

The number of people accessing food banks grew by **5.6%** from 2016 to 2017.¹²



HEALTHY POPULATIONS

Healthy Populations captures both the overall health of the population ("health status") as well as factors that influence health ("health determinants"). This broad perspective is used because individuals' lifestyles and behaviours are constrained and shaped by broader social factors such as how food is distributed and priced, how houses are constructed and located, how urban transportation is designed, how accessible health care and recreational services are, and how we interact with the natural environment. (Canadian Index of Wellbeing and University of Waterloo, The 2016 CIW National Report, 2016, p. 24)

Most Ottawa residents rate their health as good, very good or excellent

In 2016, two-thirds of Ottawa residents (aged 12+) rated their health as excellent, very good or good.¹³

Years	2007/2008	2009/2010	2011/2012	2013/2014	2015/2016				
Perceived health, very good or excellent	64.1	63.6	63.1	62.8	66.9				
Has a regular medical doctor	97	96.9	91.8	95.7	97.3				

Health indicators for the percent of Ottawa population aged 12 years and older:

Chronic disease and difficulties performing daily living activities are increasing

Chronic health conditions are a growing concern, with an increase in the percent of the population with diabetes, asthma and high blood pressure.

Percent of the Ottawa population aged 12 years and older with specific chronic conditions (self-reported). 13

Years	2007/2008	2009/2010	2011/2012	2013/2014	2015/2016
Diabetes	3.4	5.8	5.3	5.5	5.6
Asthma	9.5	10.9	9.6	8.4	11
High blood pressure	13.8	14.6	16.3	15.2	15.2
Mood disorder	8.9	7.9	9.1	8.8	8.5

More than **one in three** of Ottawa residents reported having **difficulties performing daily living activities.**¹⁴ The limitations in doing certain activities could be a result of physical, mental, or other health-related conditions as well as age-related difficulties.

Smoking rates are going down, but two thirds of people don't eat enough fruits and vegetables

Years	2007/2008	2009/2010	2011/2012	2013/2014	2015/2016
Perceived mental health, fair or poor	4.7	5.1	6.2	8.4	6.4
Current smoker, daily or occasional	17.6	15.4	15.5	15.2	14.9
Body mass index, self-reported, adult (18 years and over), overweight	33.9	33.4	29.9	32.5	35.3
Body mass index, self-reported, adult (18 years and over), obese	14	17.3	17.9	15.3	24.7
Not enough fruits and vegetables per day	53.9	54.2	60.9	59.8	67.2

Lifestyle Indicators for the percent of Ottawa population aged 12 years and older ¹³

In 2016 only **36%** of residents had enough vegetables and fruits in their everyday meals.¹³ In 2017, it cost at least \$873 per month to feed nutritious foods to a family of four.¹¹

Healthy eating can help prevent chronic diseases such as diabetes, cancer and cardiovascular disease. Eating a nutritious breakfast is especially important for child and youth development. Having a quality breakfast every day can increase children's motivation to learn and lead to better academic performance. In 2013, more than 11% of students (grade 7 to 12) did not eat breakfast on all school days.¹⁵

Regular physical activity promotes positive self-esteem and helps to prevent overweight and obesity. It also reduces risks for many chronic diseases. In 2016, only two-thirds of Ottawa residents (aged 18+) were engaging in physical activities throughout their weekly routine.¹³

Self-reported body mass index (overweight or obese) has been increasing.

Mental health and addictions issues are increasing

Roughly one in five residents in Ottawa has a mental health or addictions issue. The percent of Ottawa residents who feel their mental health is fair or poor has been increasing.

Prevalence Estimates for				
Mental Health and	Persons with a mental health/addictions condition	Western	Central	Eastern
Addiction Conditions in	Persons with a mental health/addictions condition	Ottawa	Ottawa	Ottawa
2014-15, as reported by	Estimated number persons 2014/15	48,883	84, 419	39,075
Champlain Local Health Integration Network	Estimated percent persons 2014/15 (percent)	19.0	21.0	21.0
(LHIN) ¹⁶				

For young people, mental health is strongly linked to school performance, and behaviours such as substance misuse, violence, unprotected and risky sexual activities. Mental health can be improved when youth have the personal tools to overcome problems, positive role models, safe homes and school environments, and access to support services.¹⁷

Problematic alcohol use is more prevalent than the misuse or drugs

Problematic alcohol use is more prevalent than the misuse of illicit drugs or prescription opioid pain relievers among Ottawa residents. Alcohol also causes a greater burden of illness and deaths than illicit drugs.

Alcohol has been attributed to an increased risk of more than 60 causes of illness and death, including several types of cancer, hypertension, cirrhosis of the liver, pancreatitis, mental health conditions and injuries.¹⁸

The widespread use of alcohol among Ottawa residents leads to a substantial burden of chronic disease, mental illness, and injuries.

Among Ottawa's adult population (age 19 and older):

83% drinks alcohol,

22% exceeds weekly limits of alcohol intake (a decrease from 29% in 2007–2008),

39% report binge drinking,

20% report heavy drinking (an increase from 15% in 2000–2001).¹⁸

Among Ottawa's young adults (ages 19–24 years): 44% reported heavy drinking.¹⁸

Among Ottawa's students in grades 7 to 12:

47% report drinking alcohol at least once in the past year,

22% binge drank at least once per month,

24% first drank alcohol before grade 9.¹⁸

In Ottawa, alcohol misuse was the reason for:

2,060 calls to Ottawa Paramedic Service in 2015,

6,100 Emergency Department (ED) visits per year (average 2013–2015),

1,651 motor vehicle collisions between 2010 and 2014,

16% of violent crimes between 2011 and 2015 (approximately 1,000 every year).¹⁸

The use of illicit drugs and opioids in Ottawa is on the rise, along with related ER visits and unintentional deaths

In 2015, an estimated 23,600 – 46,900 individuals in Ottawa used illicit drugs (excluding cannabis) or opioids taken for non-medical purposes.¹⁹

Misuse of some **illicit drugs** and prescription **opioid** pain relievers carries a higher risk of death or hospitalization than problematic alcohol use, resulting in significant health and social impacts and tragedy.¹⁹

Drug-related emergency room (ER) visits are increasing. In 2015 there were:

1,750 drug-related ER visits,

205 ER visits related to unintentional drug overdose (a 77% increase from 2009 to 2015),

1,550 ER visits due to drug-related mental health conditions (a **38**% increase from 2009 to 2015).¹⁹

In Ottawa, **unintentional overdose deaths due to opioids** increased and were **2.7 times higher** during 2009–2015 (**24** per year) compared to 2003–2008 (9 per year):

36 Ottawa residents died from unintentional drug overdose annually (average 2011-2015),

Two-thirds were due to opioids.

48 Ottawa residents died from unintentional drug overdose in 2015,
 60% (29) were due to opioids.²⁰

Approximately **8,600** Ottawa residents received treatment for substance misuse during fiscal year 2014-15.¹⁹



COMMUNITY VITALITY

Vital communities are those that have strong, active, and inclusive relationships among people, private, public, and non-governmental organizations that foster individual and collective wellbeing. (Canadian Index of Wellbeing and University of Waterloo, The 2016 CIW National Report, 2016, p. 30)

More people feel a strong sense of belonging to their community

The sense of belonging in Ottawa increased significantly, from 65% in 2010 to 70.4% in 2016. In 2016, close to two-thirds of residents felt strong connection to their community.¹³



Most Ottawa residents feel safe, but feelings of safety are down

Feelings of safety have gone down slightly from 2012 to 2015. At night, 91% of residents feel safe in their homes, and **69%** feel safe in their neighbourhood. Feeling safe after dark is lowest in public places such as downtown, on cycling paths and walking trails or using public transit. Further, the feeling of safety is not equal across Ottawa neighbourhoods. In some neighbourhoods, residents are more likely to feel unsafe, particularly in Central East and East neigbourhoods of the city.²¹

Perception of Safety



However, there are concerning trends in terms of safety.

Ottawa's crime rate is up

For 9 years Ottawa's crime rate was going down (2006 to 2015). However, between 2015 and 2016 the Overall Crime Rate went up by 5.9% and the Crime Severity Index went up by 10.5%.²²

Crime Rate, Ottawa, 2014 – 2016 ²²

Year	2014	2015	2016
Property crime rate per 100,000 population	2,327.0	2,267.6	2,400.4
Violent crime rate per 100,000 population	555.4	543.0	539.9
Overall crime rate change, %	n/a	2.0	5.9
Crime Severity Index (CSI)	42.6	44.0	48.6
Crime Severity Index (CSI) change, %	n/a	3.4	10.5

There has been a particular concern around gun violence, gang activity and street-level violence in Ottawa. The gang problem is a deeply entrenched and complex social problem that policing alone cannot resolve. Through the leadership of community stakeholders, the **Ottawa Street Violence and Gang Strategy** was developed as an integrated approach uniting youth, families, child welfare, schools, community, City services, social service agencies, faith groups, police, and criminal justice agencies in multi-faceted efforts to prevent and reduce gangs in Ottawa. It identifies a full circle approach to address the root causes of street violence.²³

Hate crimes are increasing

Hate crimes have been increasing locally and across Canada.²⁴

Ottawa has the second highest rate among major Canadian cities of criminal incidents motivated by hate (second only to Hamilton, Ontario). The rate of **hate crime in Ottawa** increased to **9.5** hate crimes per 100,000 people, compared to **3.9** hate crimes per 100,000 nationally.²⁴

Hate Crime Rates, Ottawa, 2014 – 2016²⁵

Year	2014	2015	2016
Number of hate crime incidents	83	73	96
Rate per 100000 population	8.4	7.3	9.5

Across the country, **43**% of police-reported hate crimes in 2016 were **violent** offences. Hate crimes were largely motivated by hatred of a sexual orientation (**25**% increase since 2015) or of a race or ethnicity (**4**% increase since 2015). **33**% of hate crimes reported in 2016 were motivated by hatred of religion.²⁴

Recent reports by the Ottawa Local Immigration Partnership and City for All Women Initiative have highlighted growing concerns about anti-Black racism and Islamophobia (hatred of Muslims) in Ottawa.²⁶

TIME USE



Time Use considers how people experience and spend their time. It means how the use of our time affects physical and mental wellbeing, individual and family wellbeing, and present and future wellbeing. It examines the length of our work week, our work arrangements, our levels of time pressure, and the time we spend with friends and in other free-time activities. (Canadian Index of Wellbeing and University of Waterloo, The 2016 CIW National Report, 2016, p. 48)

Ottawa residents spend a lot of time commuting to work

Only **19.8%** of commuters spend less then 15 minutes while **42%** spend more than 30 minutes getting to work.

One in five Ottawa residents perceives their life as stressful

A significant percent (22.1%) of Ottawa residents aged 15 and older found their life to be quite a bit or extremely stressful on most days in 2016.¹³

Stress for unpaid caregivers of seniors is growing

The number of seniors aged 65 and older in Ottawa **increased by 23.6**% between 2011 and 2016. With that, the number of seniors living alone is also growing.

57.2% of residents aged 65 and older and 68.9% of residents aged 75 and older live with a form of **disability** (difficulties a person may have doing certain activities as a result of physical, mental, or other health-related conditions or problems).¹⁴

The number of seniors living in poverty increased from 2010 to 2015. In 2015, **9.4%** of seniors were living in poverty, with monthly incomes below the low-income after-tax measure.¹³

There are more women than men at older ages. The 2016 census data shows that three out of five seniors aged 75 and older were women and there were two times more women than men aged 85 and older.

The senior population in Ottawa is expected to increase to **22%** of the total population, by **2031**.²⁶ The vast majority of Ottawa older adults live at home and would like to remain there as long as possible. Of those, some require help from home care and other support services (housework, snow clearing, meal preparation, etc.) to manage daily activities and care for their health conditions. In addition to practical support, these services also provide people with connections to their community, reducing their social isolation.²⁷ As the number of seniors increases, so does the need for formal and informal care and supports.



EDUCATION AND CHILDCARE

Education is a process that begins before school age and is reflected in pre-school arrangements such as child care and early childhood education. It also continues beyond elementary and high school, to college, university, and professional training through apprenticeships. Education continues as lifelong learning. As the world changes, education helps Canadians adapt to new challenges. (Canadian Index of Wellbeing and University of Waterloo, The 2016 CIW National Report, 2016, p. 20)

Despite significant improvements, child care capacity in Ottawa remains insufficient

There have been significant investments in childcare and early years supports in the past couple of years, including from the City. In **2015**, Ottawa had a total of **32,681** spaces offered in a **licensed child care program**.²⁸

There has been a steady increase in licensed capacity with a total of more than **11,000** spaces since 2010. Introduced in 2014, the Child Care Registry and Waitlist along with the 2015 new fee subsidy model are improving the City response to the needs for child care. ²⁸ Still, there are many families waiting for a child care space. As of February 2016: ²⁸

- 8,830 children were waiting for a child care space.
 Of those waiting, 984 children were waiting for a subsidised space and 7,846 for a full fee space.
- 3,131 children placed in a program and in receipt of a fee subsidy were requesting a transfer to a child care program at a preferred location
- 30% of all families approved for a fee subsidy are in receipt of Ontario Works.

74% of Ottawa children are on track as they enter school ²⁹

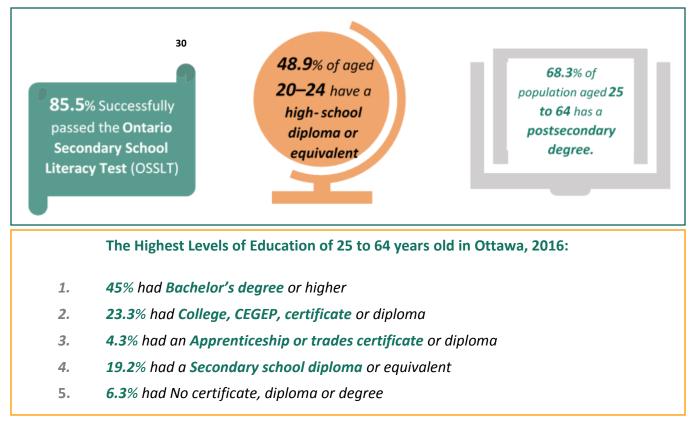
Results of the Early Development Instrument (EDI), 4th cycle

The Early Development	
Instrument (EDI) measures developmental	One in four children in Ottawa are vulnerable in one or more areas of their development. ²⁹
changes in children. When children are vulnerable in at least	<i>The percent of vulnerable children varies between</i> 7% and 48% across Ottawa neighbourhoods. ²⁹
one aspect of their development, they are at increased risk for difficulties later in life.	The percentage of children classified as "Not on track" (i.e., "at risk" and "vulnerable") in Ottawa was lower than the provincial baseline in all but one EDI domain, Emotional Maturity . ²⁹

High school and university completion continue to increase

In 2016, the proportion of young people who had completed secondary school (high-school or equivalent) increased. The proportion with no certificate, diploma or degree among youth aged **15 to 24** decreased to 30.5% in 2016 from 36% in 2006. And only 5% from the group of **20 to 24** years old did not have a certificate, diploma or degree in 2016, down from 8.6% in 2006.

There is an upward trend in the level of educational attainment with more people of working age obtaining a **postsecondary** degree. **Two-thirds** (68.3%) of Ottawa residents aged 25 to 64 had either college or university qualifications in 2016, up from 61.2% in 2006. An additional 4.3% had an apprenticeship or a trades certificate.



Tuition fees have almost tripled

Undergraduate student tuition fees have been steadily rising. The average tuition fee in **2017-2018** reached **\$8,040** in Ottawa and **\$8,454** across Ontario. ^{31,3}

As this financial burden increases, access to university presents an even greater challenge for many young Canadians. In addition, the significant student debt that many students carry after completing their studies hinders their ability to participate fully in all aspects of society. (Canadian Index of Wellbeing and University of Waterloo, The 2016 CIW National Report, 2016, p. 22)



LEISURE AND CULTURE

As forms of human expression, leisure and cultural activities help to more fully define our lives, the meaning we derive from them, and ultimately, our wellbeing. This remains true throughout our lives regardless of age, gender, or social group. The impact of participation in leisure and cultural activities is even greater for people in marginalized groups, such as those living with disabilities, living in poverty, or as members of a minority population. (Canadian Index of Wellbeing and University of Waterloo, The 2016 CIW National Report, 2016, p. 60)

Residents of Ottawa have many opportunities to engage in physical and cultural activities



Ottawa residents participate in a variety of sport, fitness and cultural programs **at over 100 locations** across the city. Overall, the city's recreation facilities received nearly **10 million** visitors **in 2016**.³²



Residents participate in **more than 100 festivals, fairs and cultural events** that take place in Ottawa each year.³³



36% of Ottawa's population own an active Ottawa Public Library card.³⁴

Participation in physical activity has increased, but a third of residents are not physically active enough



An increasing number of residents participate in outdoor activities, such as walking, running, hiking, bicycling, swimming.³⁵



67.3% of Ottawa residents aged 18 and older reported 150 minutes per week of physically active time in 2016.¹³



In 2016, **60.6%** percent of Ottawa youth aged 12 to 17 were physically active for one hour at average every day.¹³ Many young people are spending more than the recommended time in front of a screen. Students from lower socio-economic status homes were more likely to report daily screen time more than 2 hours (**75% vs. 55%**).¹⁵

DEMOCRATIC ENGAGEMENT

A society that enjoys a high degree of democratic engagement is one where citizens participate in political activities, express political views, and foster political knowledge; where governments build relationships, trust, shared responsibility, and participation opportunities with citizens; and where citizens, governments, and civil society uphold democratic values at local, provincial, and national levels. A healthy democracy needs citizens who feel their votes count, are informed, participate, debate, and advocate. It needs governments at all levels to be transparent, inclusive, consultative, and trustworthy. In essence, political leadership, citizen participation, and communication demonstrate the level of democratic engagement. (Canadian Index of Wellbeing and University of Waterloo, The 2016 CIW National Report, 2016, p. 36)

Volunteering increased since 2010

In 2013, **50%** of Ottawa residents volunteered their time to the community, an increase from 47.2% in 2010.³⁶ However, this was still below the level of volunteering in 2004 and 2007.

Only one in four residents donated to charity, a decline from 2010

The proportion of residents donating to charity declined, from **31.2**% in **2001** to **25.5**% in **2015**.

In the same time period, the average amount of a donation went up from \$858 in 2001 to \$1,265 in 2015. 37

Voter turnout declined from 2010

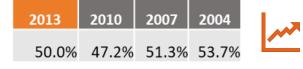
Only **40%** of eligible voters voted in the last municipal election in 2014. This is a decline from 44% in 2010 and 54% in 2006.³⁸

City government is not representative of Ottawa's diverse population

Only one in five of Ottawa City Councillors are women.³⁹

To compare, women made up 45% of Ontario's provincial government in 2017. $^{\rm 40}$

Other diverse groups in the City's population are also under-represented.











ENVIRONMENT

The Environment is the foundation upon which human societies are built and the source of our sustained wellbeing. On a broader level, environmental protection involves the prevention of waste and damage while revitalizing our ecosystems and working towards the sustainability of all of our resources. (Canadian Index of Wellbeing and University of Waterloo, The 2016 CIW National Report, 2016, p. 54)

More Ottawa residents use public transit, walk or bike to work compared to Ontario average

More than **31%** of Ottawa commuters used public transit, biked or walked to work in 2016.

However, most people (62.7%) get to work by driving their cars.

Access to local food is increasing

With more than 100,000 farms, more than 20 farmers markets and many community gardens, access to local food is increasing.

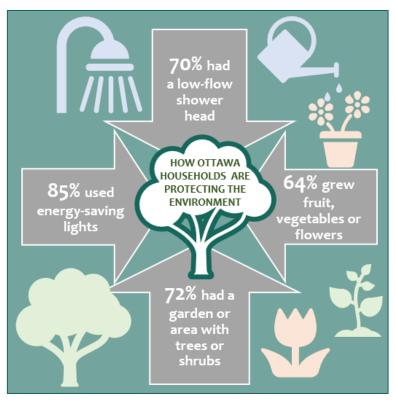
Reducing our ecological footprint is becoming important

Green House Gas (GHG) Emissions -

Ottawa's goal is to reduce the GHG emissions to **4.6** t CO2e per capita by year **2024**.⁴¹

Green House Gas Inventory results for 2012 indicate that **transportation** and **building operations** are the two activities that most greatly contribute to GHG emission and air pollution in Ottawa.⁴¹

The 2015 Statistics Canada Households and the environment survey ^{42, 3} shows that many Ottawa households use energy saving and water preserving tools and practices in their homes – 85% use energy saving bulbs, 70% have a low-flow shower head. 64% of households grow fruits, vegetables and flowers. 72% keep green areas with trees and shrubs on their properties.



Ottawa is losing good agricultural land

Agriculture plays a significant role in our land use and economy. **37%** of Ottawa's land is designated as agricultural lands (102,152 ha). Gross farm receipts exceeded \$220 million dollars in 2016 and increased by 9% since 2011.^{43, 44} Over the last 15 years, there has been a significant shift from animal to crop production.

In 2016, there were **273** fewer farms in Ottawa than there were in 2001. ^{43, 44} The total number of farm businesses dropped to 1,045 in 2016 from 1,318 in 2001. This is a loss of almost 21% of farm businesses in 15 years. Farms in Ottawa range in size from small (less than 10 acres) to very large (greater than 3,500 acres). Many Ottawa farms are getting larger through consolidation. The traditional "family farm" is disappearing.⁴⁵

We are losing farmland to other land uses, and there are fewer farms

The amount of agricultural land decreased by more than **18,300** hectares between **2001** and **2016**. In **2016**, the total farmland area was **102,152** hectares. ^{43,44} As well, there is continued loss of woodlots and hedgerows.



Of all Canadian cities, Ottawa has the largest rural area. Approximately 80% of the city's territory is comprised of rural areas. Approximately 10% of the city's population lives in the rural areas. The majority of Ottawa's rural residents live in 26 communities, on properties of less than half an acre.⁴⁵

Ottawa's rural and suburban populations are growing at a faster rate than the Ottawa average, mainly as a result of new housing developments.⁴⁶

	Рор	Population Numbers, by Year				
Area	2006	2011	2016	2017	2006-2017	
Ottawa City	812,130	883,390	934,243	979,173	20.6	
Urban Areas Inside the Green belt	487,360		532,528	534,764	9.7	
Urban Areas Outside the Green belt						
(Suburban Areas)	244,055	299,125	339,084	349,525	43.2	
Rural Sub-Areas Total	80,720	85,760	94,320	94,884	17.5	
Rural Northeast	11,195	12,180	11,949	12,012	7.3	
Rural Southeast	23,365	25,305	28,389	28,610	22.4	
Rural Southwest	24,765	25,275	28,414	28,660	15.7	
Rural Northwest	21,395	23,000	25,568	25,602	19.7	

A higher proportion of seniors in the rural areas, and increasing in the suburbs

The average age of residents in rural communities around Ottawa is above the Ottawa average, and increasing very rapidly. Many seniors live alone, and while not all seniors living alone are isolated, there is a growing community concern about those seniors who are isolated.

Services, amenities and transportation

Ottawa's rural and suburban communities are under-serviced in comparison to urban Ottawa. Access to health, social and community services is limited in both the urban and rural areas. Many services which are supposed to be City-wide are not reaching rural and suburban communities equitably. Access to basic amenities such as medical services, food stores and other types of supports are concerns in the rural areas.

Distance and transportation are significant barriers in rural and suburban areas of Ottawa. In rural areas, there is either no public transportation or very limited public transportation, and residents rely mainly on cars to get from place to place. Most of the rural working population commute by car to urban Ottawa for work. A 2016 consultation process in West Carleton,⁴⁷ and surveys in 2017 by the Barrhaven Seniors Centre and the Riverside South Community Association identified transportation as one of the most significant challenges with respect to healthy aging-in-place. In rural communities, the limited transportation options coupled with a lack of local shops for basic necessities reduces seniors' options within their own community. The shortage of medical services and the distance to health services affects seniors more than other age groups. Access to supports for aging-in-place and for caregivers of seniors is a concern in rural and suburban communities. The City continues to work with the private and non-profit sectors on investments and partnerships to increase options.

Section 2: Improving What Matters



Community Services Improving What Matters

Community wellbeing relies on the public, private and non-profit sectors each playing important roles – a "three-legged stool" that supports a balanced approach to address complex issues. The public and private sectors rely on Ottawa's non-profit community services to provide important services that are critical in protecting and improving community wellbeing. The public and non-profit sectors must constantly adapt to urgent issues and changes in the community, while continuing to stay the course on long-term goals. For example, although median incomes are increasing in Ottawa, so is poverty. Government and the private sector rely on community services to deal with issues such as poverty and other situations of inequity and vulnerability.

This section explores the critical role of Ottawa's community services in protecting and improving community wellbeing. For each of the eight domains of wellbeing, the report highlights one priority issue of concern identified in the section 1. For each of these issues, the report provides:

- Additional data related to the issue of concern;
- A brief explanation on why it is important to improve this issue;
- An overview of the role of Ottawa's non-profit community services in improving the issue;
- Examples of impactful programs and innovations within Ottawa's non-profit community sector. (Examples are selected primarily from services that receive funding from the City of Ottawa.);
- A summary of key pressures on the non-profit community services addressing the issue, including findings from the 39 agencies that completed a 2018 survey of agencies receiving funding from the City of Ottawa's Renewable Community Funding Program (see section 3 for more details).

Section 2 ends by highlighting the unique and central role of <u>Community Health and Resource Centres</u> within Ottawa's non-profit community services. Ottawa has 13 Community Health and Resource Centres, located across the City from the inner city to the suburbs and rural areas. Each is a multi-service community-based centre providing "one stop" access to social and community services, health promotion and community development programs. All 13 centres provide direct services, resources, referrals, information, support and community development, with the six Community Health Centres also providing primary health care. Each centres understands the local priorities and mobilizes resources that will make a difference in the wellbeing of individuals in their communities. They pay particular attention to those who are most vulnerable and at risk, and strive to ensure that programs and services are available to people who face barriers accessing services. They work together in a Coalition to seek solutions to common issues, share resources, plan and coordinate service delivery and advocate for healthy community sector in general, and particularly Community Health and Resource Centres, are called upon by governments and businesses to coordinate urgent responses to emergencies and critical community situations.

Section 2 highlights the significant gap between the ever increasing demands placed on the community sector in relation to investment – which has been stagnant overall. It points to an urgent need for increased resources to address critical vulnerabilities in the non-profit sector, as it responds to pressures from population changes, on-going prevention work as well as emerging and urgent needs.

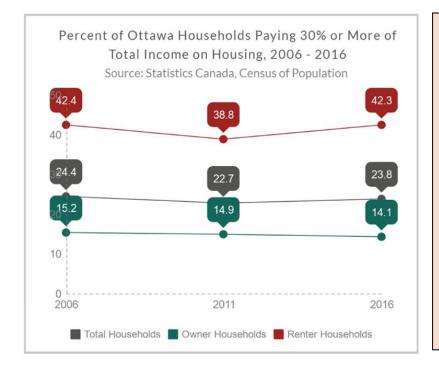
Living Standards

Spotlight on

Basic Needs

From 2010 to 2015, the median income in Ottawa increased by 4.2%, making it a wealthy community on average in comparison to Ontario in general. Despite economic growth, poverty⁴ in Ottawa has continued to increase, from 12.3% in 2005 to 12.6% in 2015. The poorest 40% of Ottawa residents shared almost the same portion of after-tax income (22.8%) as the richest 10% (21.2%). Even middle income families are feeling the financial pressures.

Economic growth and higher than average incomes have unintended consequences, particularly on housing costs. As a result, a growing number of people in Ottawa are not able to adequately meet their basic needs for housing and food. On basic needs, Ottawa is losing ground.



Why This Matters

Poverty, inadequate housing and food insecurity have a profound effect on the healthy development of children, and mental and physical health of adults, and are linked to higher rates of chronic diseases, certain cancers, mental health and healthy development of children.

Poverty affects the strength and resiliency of our communities. Economic growth can slow and even decline when the middle class struggles, income inequality rises and poverty persists.⁴⁸

- Households paying 30% or more of their total income on housing are considered by Canada Mortgage and Housing Corporation to be living in unaffordable housing. For ten years, roughly one in five households have been in unaffordable housing. Renters are almost three times more likely to be in unaffordable housing compared to owners (42.3% compared to 14.1% in 2015). Affordability has improved over time for owners, but worsened for renters from 2011 to 2016.
- In 2016, more than 10,000 households were on the waiting list for social housing, with an average waiting time of more than 5 years. The number of individuals and families using Ottawa's homeless shelters increased by 8.6% compared to 2015.
- The lack of affordable housing is a key factor leading to more households not having enough money to afford sufficient nutritious food. 6.7% of Ottawa households experienced moderate to severe food insecurity in 2017, and the number of people accessing food banks grew by 5.6% from 2016 to 2017. 41,500 Ottawa residents used emergency food services monthly in 2015-2016. ¹²

Did you know?

Poverty, unaffordable housing and food insecurity disproportionately affect people of Aboriginal identity, racialized groups (called "visible minority groups" by Statistics Canada), new immigrants, single parents, people with disabilities and single people living alone.

Money Well Spent

Ensuring everyone has proper housing saves money. Without proper housing supports, people are more likely to be hospitalized or come into contact with the criminal justice system, which has high social and financial costs to society.

Average monthly costs in Ontario: ⁴⁹ Hospital \$10,900

Jail	\$∠	, 1,333
Rent Supplement	\$	701

(Ontario Association of Food Banks, 2018)

A full spectrum of supports

from basic needs to systems change

Ottawa's community services provide a full spectrum of services, from supporting residents with basic survival needs to working with the community to implement solutions that address the root causes of poverty, economic insecurity, inadequate housing and food insecurity.

For example, food security is a crisis issue in many high needs neighbourhoods, having a direct and profound effect on individuals, with critical need far outstripping available resources. In response, community agencies are innovating and collaborating to provide hundreds of programs including:

- Short-term relief through emergency and charitable service delivery models such as food banks and meal programs;
- Capacity building empowerment programs such as Good Food Markets and Community Gardening;
- Community action to make systemic change on food and income security, such as working groups and food system change.







Many fringe financial services, known as payday lenders, operate in Ottawa's lowest-income neighbourhoods, preying on individuals who live from one pay cheque to the next. The Causeway Community Finance Fund (CCFF) is the first of its kind in Canada, and offers an alternative to high-cost payday loans for financially vulnerable individuals. Causeway clients don't have access to mainstream banking and financial services when they face a financial crisis, so Causeway connects them to one of three credit unions who support Causeway and provide micro-loans on reasonable terms. Causeway's ultimate goal is to build their clients' financial literacy and economic independence.



Key Pressures

The 2018 community agency survey identified key challenges for agencies addressing basic needs:

- increase in demand for basic needs supports due to growing poverty, housing insecurity, food insecurity and precarity of employment;
- inadequate resources to meet even urgent needs;
- inadequate resources to properly support the settlement of recent immigrants, particularly 2,695 Syrian refugees who arrived from 2015 -2017; ⁵⁰
- the lack of affordable housing, which is negatively impacting other issues such as community based supports for residents with mental illness;
- the increasing cost of food for programs without comparable increases to revenues;
- staff burnout stemming from the increasing gap between the urgent needs & the ability to respond; and
- excessive fundraising and administrative burden.

Community Sector Innovation:

Rideau Rockcliffe Community Resource Centre (RRCRC) has transformed its food emergency program into a poverty reduction program. RRCRC works with the residents of Ward 13 to address causes and consequences of poverty. Food bank users are engaged in various activities through RRCRC, such as good food markets, community gardens and collective kitchens.

The Centre's 2017 evaluation results indicated that community members often access food programs as a point of first contact with the Centre. It was also noted that many community members are repeat users of our Food Bank but do not access other Centre programs and services.

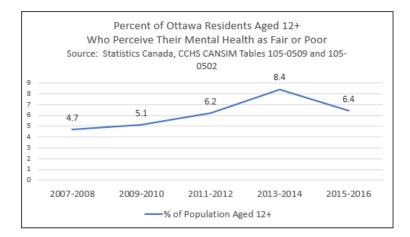
The Food Bank intake and counselling team piloted a new support system called the **Passport** program. The program is a personalized poverty reduction plan where a social work counsellor and a community member work together to identify specific needs and a unique plan is implemented to achieve identified goals. Community members who participated in the pilot reported improvements in their personal circumstances and increased selfsufficiency. This multi-faceted service model not only improves community members' personal autonomy and capacity but it also increases awareness of healthy eating, healthy life choices and empowers community members to take control of their circumstances.

In August Last year 2 bita Rough patch. Reat and bills left me without maneyfor food and too much poide to ask for Belp. By Sept., with the encourage ument of my daughter, 2 came to the center for help. This was how's met
Danika. I told her of my situation and she told me to call her office and make an appoint ment. This may introduction to the centre's passport program. Danika guided me through the program, Platened towny story and gave me. the encouragement 2 needed
to Rebuild my confidence. By the time 2 completed the passport program 2 felt confident enough the suggestion of my mind to the suggestion of the suggestion of the Volump eer work. This is where 2 met Patricia. and became a volunteer for the food cuppornd.

Spotlight on

Mental Health and Addictions

Mental health affects everyone. One in five Canadians lives with a mental health illness each year.⁵¹ Even those who don't have a mental illness may at times feel mentally unwell and very stressed from life circumstances. In 2014, one in five Ottawa residents aged 15 or older (2014) indicated they had quite a lot of life stress. ¹³



The Ottawa data is alarming:

- The percent of Ottawa residents who feel their mental health is fair or poor has been increasing.¹³
- Intentional self-harm was one of the top three causes of death among youth aged 15 to 24 in the Champlain LHIN catchment area (including Ottawa) in 2015-16.⁵²
- From 2009 to 2015, there was a 77% increase in Emergency Department visits related to unintentional drug overdose in Ottawa¹⁹ (Ottawa Public Health, 2016, p.3)

Mental health and addictions are often closely related

 Ottawa had a 38% increase in Emergency Department visits due to drug-related mental health conditions (2009-2015).¹⁹ (Ottawa Public Health, 2016, p. 3)

Opiate overdoses and death are a public health crisis across the country. 62% increase in the rate of hospitalization for 15-24 year olds in Canada for opioid poisoning from 2007-08 to 2014-15.⁵³

• The opioid prescribing rate in Ottawa increased between 2006-2010 and 2011-2013.¹⁹ (Ottawa Public Health, 2016, p. 3)

Did you know?

Seniors aged 65 and older were nearly one quarter of the hospitalizations for opioid poisoning in Canada between 2007-08 and 2014-15. ⁵³

Why This Matters

The impact of mental health and addictions on individuals, families and neighbourhoods is significant and if not properly addressed, can be devastating and long-term.

Our neighbourhoods are stronger when we support all residents, including those experiencing stress, mental illness or addictions.

It's cost effective. A good network of health and community based mental health and addiction services reduces the burden on more expensive services including emergency rooms, police and paramedic services and the criminal justice system.

The 2018 survey of community agencies identified mental health and addictions issues as one of the top two social issues for Ottawa.

Money Well Spent

The burden of mental illness and addictions in Ontario is more than 1.5 times that of all cancers, and more than seven times that of all infectious diseases.⁵⁴

Non-health related interventions and policy options can prevent mental illness and promote good mental health. Interventions such as investment in high quality early childhood programs can reduce child maltreatment that is associated with mental illness and poor mental health, and approaches such as supportive housing can improve quality of life and prevent many of the consequences of severe mental illness and addiction. ⁵⁵

Community sector is the forefront of prevention and support

Community based mental health and addiction services are a critical part of prevention and support services for mental health and addictions.

Prevention services are a critical part of the spectrum of supports for mental wellness. Non-profit organizations provide a range of prevention supports for mental wellbeing and harm reduction including helping people cope with stress and trauma, building resiliency, providing counselling and suicide prevention, leading harm reduction efforts and community education, providing mental health first aid training and creating opportunities for socializing and belonging. They also work to improve the community conditions that can lead to poor mental wellbeing or addictions such as abuse, domestic violence, poverty, homelessness, long-term unemployment, social isolation and trauma.

For people with mental illness and their families, **communitybased support services** provided by Ottawa's non-profits are essential in the path to wellness. Non-profits provide a range of services including supportive housing, peer support, family supports including respite, employment services, recreational opportunities and assistance with basic needs. "Youth with early onset mental illness are at risk of dropping out of school, leaving home... and perhaps making a series of bad life decisions. We help them find the right treatment, and this in turn keeps hope alive. One 19-year-old had developed agoraphobia and so our staff worked with the family in the home. Within 6 months the young person went back to school and had a part-time job. Within a year they were stabilized and living a full life. We have proof that a little bit of help at the right time changes a whole life."

(Tim Simboli, Executive Director, Canadian Mental Health Association, Ottawa Branch)

Community Sector Innovation:

Somerset West Community Health Centre's (SWCHC) **Harm Reduction Peer Workers** pilot hired people with lived experience to act as peer supporters for people using substances. The project aimed to build capacity for everyone involved: substance users, peers, service providers, and community members.

Participants felt that the project contributed to their positive outlook and increased confidence. They were also able to identify various personal strengths and skills, such as: leadership; a sense of purpose; patience; listening; conflict resolution; ability to remain objective; navigating resources; identifying and assessing client issues; and being a positive role model.

Key Pressures

There has been increased investment, particularly from the Provincial government in recent years. While this is a good start, it is only the beginning of what is required. The 2018 survey of community agencies identified key pressures on the community sector in addressing mental health and addictions:

- increase in demand for service to support mental health and addictions, including dementia;
- growing complexity of cases and the need for individualized approaches;
- the urgency of the opioid crisis;
- increasing number of people with mental health conditions living in social housing communities; and
- chronic under-funding, particularly for prevention.

Financial Check-Up for charities in Ottawa that provide mental health and addictions services

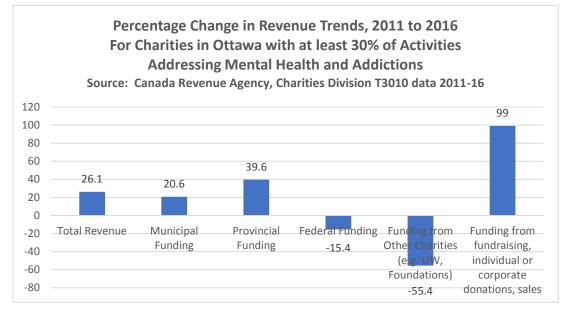
The community sector includes:

- non-profit organizations that are charities and
- non-profit organizations that are not charities (including informal and grassroots groups).

Charities must file a charity return (T3010) each year which includes a standard presentation of their financial situation. As a result, data from Canada Revenue Agency's Charities Division provides a reliable snapshot of the financial situation of charities in Ottawa over time. This data is not available for non-profits that are not charities.

Revenue Trends 2011 to 2016

For Ottawa charities with at least 30% of their activities addressing mental health and addictions



For charities with at least 30% of their activities addressing mental health and addictions, 63.5% of their funding in 2016 came from Provincial funding.

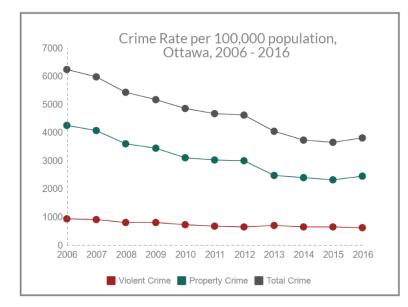
Although 20% of Canadians are affected by mental health or addictions every year, only 6.5% of Ontario's health budget is devoted to mental health and addictions. ⁵⁶

Community Vitality

Spotlight on

Safety

After a steady positive trend of reduced crime rates, beginning in 2015 there has been an increase in crime rates. Between 2015 and 2016 the Overall Crime Rate went up by 5.9% and the Crime Severity Index went up by 10.5%. ³ There has been a 10% increase in hate crimes in Ottawa from 2014 (8.4 per 100,000) to 2016 (9.5 per 100,000), compared to under 4% nationally. ²⁵



Why This Matters

While most neighbourhoods in Ottawa are very safe, the increase in violence in 2015 – 16 disproportionately affects particular neighbourhoods in urban Ottawa. Residents in these neighbourhoods are more likely to feel unsafe and are more impacted by issues such as open street drug dealing, gang violence and related social issues. In addition to the terrible impact on the direct victims of crime, a critical incident such as a shooting can result in trauma for a broad range of local residents.

Money Well Spent

"From a cost-benefit perspective, extensive research shows that crime prevention programs have proven to have significant returns on investment and are a cost-effective manner in which to address crime. It is fiscally responsible to work collaboratively and allocate resources in a balanced manner to target the risk factors of crime.... Research and current practices internationally, nationally and locally indicate that social development activities that target the risk factors of crime are the best way to address crime."⁵⁷





Ottawa's community services play a critical role in improving safety and supporting victims

An extensive body of research supports community-based crime prevention as an effective and cost-effective strategy to reduce crime. Ottawa's social services play a critical role in crime prevention and support to victims. They work in priority neighbourhoods and with people at risk of or affected by crime, providing a broad range of important services:

- Running programs that keep youth out of trouble
- Providing counselling and other supports for victims of domestic violence, child abuse, hate crimes and other trauma
- Training residents on personal safety or community supports, e.g. Mental Health First Aid and harm reduction
- Coordinating supports following a critical incident such as a shooting or a major flood
- Using community development to develop local action plans with police and residents to address concerns
- Crime prevention through environmental design (safety audits, park improvements, improved lighting, etc)
- Building community cohesion

Pinecrest-Queensway Community Health Centre's (PQCHC) **United Neighbours/ Levers of Change** (UNLOC) engages diverse community groups to identify pressing issues related to crime prevention and safety.

Since 2007, UNOLOC has held hundreds of "Coffee Houses" and learning forums to facilitate community dialogue and action planning on safety, security, health and wellbeing. Participants are residents, businesses, and service providers, as well as the Ottawa Police Service and Ottawa Community Housing Security.

Since UNLOC's beginnings in 2007, there has been a marked increase in community engagement and volunteer rates. Police statistics as well as community feedback confirm that there has been a decrease in overall crime rates, and an increase in crime reporting. Because of the project, people feel safer and there are better relationships among community partners to address crime.

Eastern Ottawa Community Resource Centre's (EOCRC) **Violence Against Women program** offers direct services to women and children affected by violence. It provides counseling to women who are currently victims of abuse or have been abused and to children up to the age of 18 who have witnessed or been the victim of abuse. Safety planning is one of the most important aspects of the work. Support groups are also offered throughout the year and are a great way for women to break isolation. The **transitional housing and support program** provides help finding affordable housing and requesting financial assistance, accompaniment to legal proceeding and referrals to other community resources. The **family court support program** provides accompaniment and preparation for legal appointments or court proceedings with custody and access of children, child/spousal support, restraining orders and links to other legal resources.

Community Sector Innovation:

Daisy's Drop-in was established in response to a request from sex trade workers. They felt stigmatized and isolated in their struggles with health, mental health, substance use and their histories of abuse. One morning a week from 5:00 a.m. to 9:00 a.m., women receive a healthy meal and can access harm reduction information and supplies. A public health nurse and social worker from **Carlington Community Health Centre** provide services and a police officer provides legal information and support for reporting "bad dates". CCHC's primary care clinic gives Daisy's participants immediate service at any time for any health concerns, even without insurance coverage.

Daisy's Drop-in was recognized for its innovative service partnership with a Community Safety Award from Crime Prevention Ottawa.

Time Use

Spotlight on

Caregiving

With Ottawa's population aging, the need for a range of supports will continue to increase. The seniors population in Ottawa increased by 42.9% between 2006 and 2016. 58% of people aged 65 and older in 2016 had an activity limitation (disability) some or all of the time, compared to 35% in the general population.¹⁴ Older seniors are more likely to need caregiving so community supports are particularly targeted for seniors aged 75+. In 2016 there were 62,130 seniors aged 75 and older compared to only 48,910 in 2006 (a 27% increase). Women are more likely to be caregivers.

Percent Change in Caregiver Support Services Provided Compared to Funding, From 2014-15 to 2015-16 in Ottawa				
Funding	Funding 26.3%			
Face-to-Face Visits	47.0%	~~		
Non Face-to-Face Visits	-12.6%	~		

Why This Matters

The amount of time residents spend providing unpaid care is increasing on average, and caregiver stress is a growing concern.

Access to appropriate supports are essential to reduce caregiver stress and improve outcomes for the individual receiving care.

Living alone is a risk factor for social isolation and vulnerability. 33,210 Ottawa seniors were living alone in 2016, although the percent of seniors living alone has gone down since 2006, from 27.4% to 25.1% in 2016.

Funding for caregiver supports in Ottawa has been increasing, as part of the Province's Patients First strategy.

Face-to face supports have increased dramatically in Ottawa, reflecting the need for individualized supports

In Ottawa in 2015-16, in cases where the application came from a hospital, the wait time for eligible residents to start receiving home care was 17.7 days on average across Ottawa's sub-regions - within the provincial target of 21 days. However, where the application came from the community, the wait time was roughly 3X higher, at 54.7 days on average across Ottawa's sub-regions – i.e. not meeting the provincial target of 21 days. People whose first language was neither English nor French waited longer. ¹⁶ (Champlain LHIN, 2017, p. 82)

Money Well Spent

A 2017 survey by CIBC showed that 14% of Canadians with parents over the age of 65 incur care related out-ofpocket costs that average \$3,300 a year. Notably, the study found that many of these direct costs are being borne by those with lower incomes. Even greater are the labour related costs of the amount of time taken off work to provide care. ⁵⁸ (Tal, 2017, pp. 1 - 2)

Community services provide critical supports

Community support services are critical, providing transportation, day programs, meals on wheels, friendly visiting, homemaking services and assistance for daily living.

Access is not equitable across the region, particularly given the rapid population growth in some areas. Western Ottawa in particular, has lower service rates. ¹⁶ (Champlain LHIN, 2017, p. 9)

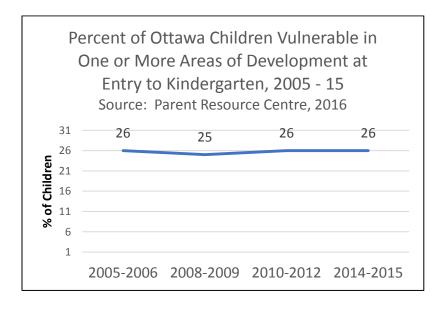
The increase in dementia is a critical pressure on families and services. Dementia is now one of the top three causes of death for seniors in the Champlain LHIN catchment area and Ontario. ¹⁶ (Champlain LHIN, 2017, p. 8) A priority in Ottawa is increasing the availability of flexible, self-directed respite services, particularly for caregivers of people with dementia.



Spotlight on

Success at School - Kindergarten to Graduation

"With the increasing complexity of contemporary living, and the corresponding increases in the skills needed by young people entering adult society, school readiness has never been more important. What children know and can do at the time they start school ('school readiness') helps determine their educational, and lifelong, success. This is never more true than today. Today's economy demands a highly educated citizenry, meaning that children must be prepared for their own futures more than any other generation in the past Effective investment in the early years reaps life-long gains".⁵⁹



Why This Matters

School readiness has lifelong implications for children, setting the foundation that improves education outcomes, high school completion and productivity in adulthood.⁶⁰

It is well recognized that early childhood education and care has the potential to address multiple social and political objectives. Women's equality and employment, poverty reduction, family-work balance, social integration and equal opportunity, improved child development and wellbeing, and economic prosperity.⁶¹

There has been no significant change in the percent of Ottawa children vulnerable in one or more areas of development at entry to kindergarten over the last ten years. In 2014-15, 26% of children in Ottawa started kindergarten with vulnerabilities in one or more areas that are critical to healthy development. This was slightly better than the Provincial benchmark of 28%.

Readiness in two domains has been going down slightly over time, specifically:

- Language and Cognitive Development, and
- Communication Skills and General Knowledge.

In Ottawa, "Early Development Instrument" results have been linked to such local factors as prenatal health, nutrition, education, employment, income, mobility, neighbourhood cohesion, and family structure. Generally, the percentage of children in a neighbourhood who were vulnerable on at least one dimension of the EDI rose with the level of social risk.²⁹ (Millar, 2016, p. 27)

Money Well Spent

Early childhood education is cost effective. School "unreadiness" is costly, affecting the school system in the short term and social costs related to unemployment and the justice system in the long term.⁵⁹

A 2017 report by the Conference Board of Canada found that expanding early childhood education (ECE) and care in Canada would provide sizable benefits, such as improving children's academic outcomes and future wages, reducing income inequality and bringing many families out of poverty. Every \$1 spent would yield close to \$6 in economic benefits if Canada expanded ECE enrolment of children under 5 years of age to the Organisation for Economic Co-operation and Development (OECD) average.⁶²

Early childhood education and care levels the playing field

Early Childhood Education and Care (ECEC) includes kindergarten, childcare services and community-based programs for early learning and supports to parents. There has been improvement in access to early learning thanks to investment in Ottawa's childcare sector and the expansion of full day kindergarten. However, there is still a shortage of licensed childcare in Ottawa. At February 2016 there were 2 children per childcare space and 8,830 children waiting for a licenced childcare space.

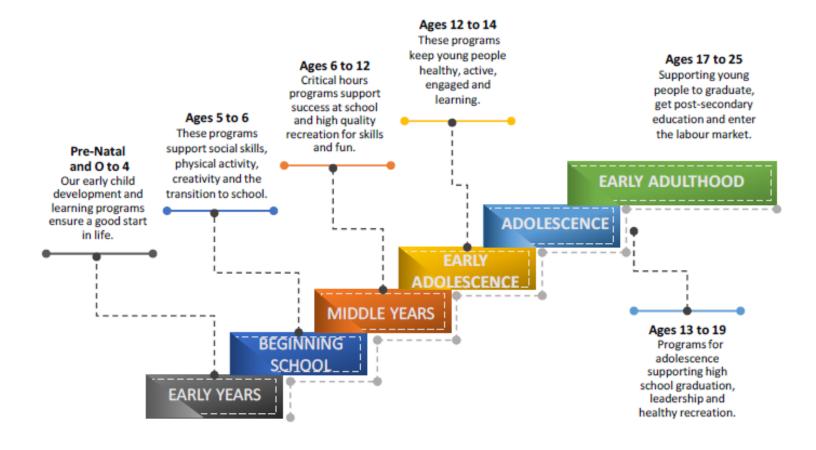
Did you know? The percent of children ready to learn is quite different across Ottawa neighbourhoods – ranging from 7% to 48%. Children in low income neighbourhoods are more at risk to vulnerabilities on one or more domains of development.²⁹ (Millar, 2016, pp. 3, 27)

Evidence abounds that disadvantaged children make the most dramatic gains from early childhood development programs and in turn from school readiness programs.⁶⁰ (United Nations Children's Fund, 2012, p. 18). However, they have the least access to high quality childcare and can already be disadvantaged at the time they enter kindergarten.

Community agencies play a critical role in leveling the playing field for children in low income families, including newcomer families and families with a parent with a disability. In addition to helping with basic needs like healthy food, agencies provide a broad range of programs in vulnerable neighbourhoods, including play-based learning programs, language training and parenting supports. Critical hours programs are the heart of community house programs in 15 social housing neighbourhoods in Ottawa. Members of the **Ottawa Coalition of Community Houses** provide social recreational programming, academic support, critical hours/after-school programming, summer camps, March break activities, workshops, and work and volunteer opportunities.

Community House programs emphasize social and emotional wellbeing, leadership and life skills development and building a strong sense of belonging. They ensure that children and youth in the neighbourhoods have healthy development opportunities and supports to succeed in school.

Community Services Support "Success at School" From the Early Years to Post-Secondary



In partnership with Pathways to Education Canada and four local school boards, **Pinecrest Queensway Community Health Centre's** (PQCHC) **Pathways to Education** program has increased high school graduation significantly in low-income west end neighbourhoods.

This success has generated significant interest among other low-income communities in Ottawa, and so PQCHC is now collaborating on a city-wide collective impact initiative called Equity in Education, which will bring Pathways' coordinated and comprehensive wrap-around supports to 160 youth in three other Ottawa neighbourhoods.

The expanded program will contribute to our understanding of the systemic barriers that low income youth face, and inform policies and systems that can eliminate inequities in educational achievement.

Key Pressures

The 2018 Community Agency Survey identified key challenges for community agencies providing early childhood education and care services including:

- The increase in the percent and number of children who are low income in Ottawa (from 16.8% in 2005 to 17.1% in 2015) leading to increased demand for services
- The depth of poverty among families in low income neighbourhoods, making it harder and harder for these families to meet the basic needs of their children
- Challenges in the agencies' capacity to provide culturally relevant early childhood services as Ottawa's population becomes more diverse and poverty becomes more concentrated in racialized communities
- The complexity of needs of refugee families who have recently arrived, and
- Persistently low wages in the early learning and care sector, resulting in HR challenges.

Community Sector Innovation:

Students Will All Graduate (SWAG) is a partnership program of the **Carlington Community Health Centre** (CCHC) with local schools to address high school drop-out rates that exceeded 40% in some neighbourhoods. Participating Grade 8 students attend a summer SWAG orientation and throughout Grades 9 and 10 receive additional support in the areas of academics, voluntarism, community service, and personal development. If a student does not come to the SWAG program, a staff person works with the family to re-engage them.

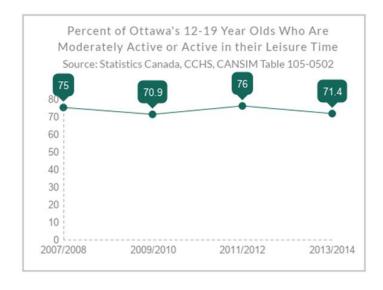
SWAG has already shown dramatic results. In June 2017 the first SWAG graduates received their high school diplomas, and most continued to post-secondary education. SWAG was recently enhanced with additional supports for Grades 11 and 12 and a peer mentorship component.

Leisure and Culture

Spotlight on

Physical Activity for Children and Youth

Despite the growing body of evidence highlighting the economic and adverse health outcomes of physical inactivity and sedentary behavior ..., these behaviors remain at unhealthy levels among school-aged children and youth in Canada and across the globe.⁶³



Why This Matters

Physical activity is essential for good health. Regular involvement in physical activity is essential to the healthy physical, mental and social wellbeing of children. It supports healthy development of bones, muscles, heart, and a healthy body weight, as well as improving control over symptoms of anxiety and depression.⁶⁴

Our communities are better when they include opportunities for young people to be involved in positive ways, including through good quality recreation programs.

- The percentage of Ottawa youth aged 12 19 who were moderately active or active in their leisure time has been going down (69.2% in 2013-24), although it has consistently been better than the Ontario rates.
- In 2015, only 60.6% of Ottawa youth aged 12 17 had the recommended level of physical activity, of 60 minutes per day on average.
- Excessive screen time for youth is a growing concern. Children who log more than two hours of screen time a day are twice as likely to be overweight or obese than those who spend an hour or less on screens.⁶⁵
- Getting outdoors is a recommended strategy to increase physical activity. Ottawa has lots of outdoor recreation opportunities, and in 2015, 81% of households participated in outdoor activities.



Keeping kids active and engaged

The after school hours, called "critical hours", are an important time for children and youth to be physically active. "Critical hours" programs are a key component of community wellbeing. Non-profit organizations and groups provide a broad range of critical hours opportunities to meet different needs, ages and interests – from sports leagues to homework clubs. For children and youth who face barriers to participating in programs in the critical hours and in the summer school break, community organizations and charities are essential to provide a full range of high quality, targeted activities including social recreation to increase physical activity, arts programs, academic support and skill building. Local non-profits also play an important role in fundraising and leveraging resources for local recreation infrastructure, including playgrounds and equipment.

Not all children have equal opportunities to participate in physical activity. For example, children and youth who live in overcrowded housing with little access to safe outdoor play spaces have limited opportunities at home. At the same time, more and more recreation opportunities have fees, putting them out of reach of many families. Key barriers to participating in physical activity include cost, transportation, knowledge of what exists and how to access it, equipment, family circumstances, culture/language and program locations.

Groups who are more likely to face barriers are those who are low-income, children and youth with disabilities, certain ethnic groups (Public Health Ontario, 2014), and in Ottawa, rural children and youth. For children and youth facing barriers to participating in physical activity, targeted strategies are necessary.

Christie Lake Kid's (CLK) mission is to enrich the lives and prospects of economically disadvantaged children and youth by providing quality year-round skills-based programming. CLK believes in the power of sport and recreation to transform young lives and better prepare youth for the transition into adulthood. They have over 25 programs, ranging from basketball to Aikido, designed to support children and youth who encounter a formidable list of barriers to participation in sport. By removing such barriers in the delivery of the skills development programs, and through CLK's Transformative Recreation model, the staff team implement programming that promotes such protective factors as healthy development, physical and mental health, resiliency and a sense of involvement and self-worth. CLK knows that when a child picks up a hockey stick, a guitar or chooses to participate in any other activity, they do so to be accepted, to fit in, to be understood. Such characteristics and traits will serve them well as they transition into adulthood.

Money Well Spent

Modest, targeted investments in community organizations for activities supporting behaviour change has been demonstrated to be a cost effective strategy to increase physical activity by youth.⁶⁶



Pinecrest Terrace Community House (PTCH) offers after-school and summer recreational programs that support low-income families and children aged 0 - 18. Each program includes nutritious eating and physical activity.

"Kid's Club" is for youth in grades 1-5, and includes outdoor basketball, soccer, baseball and free-play. "Keeping Youth Connected" is for youth in grades 6-9. Staff lead youth in active games including basketball, soccer, circuit training, relay races, free-play, dodgeball, volleyball and Jujitsu.

PTCH runs four "I Love To" programs, one each for skating, dancing, swimming and soccer. These run for up to ten weeks and are for youth aged 6-17. Instructors teach proper techniques, form and rules.

All the programs at Pinecrest Terrace are free and created with the understanding that families living in low-income are limited in accessing recreational programs due to low income and transportation barriers. The programs enhance the health and quality of life of at-risk youth living in low-income, by helping them to develop a life-long attachment to physical fitness and healthy living.

The 13 other community houses in Ottawa offer similar programs.



Nepean Rideau Osgoode Community Resource Centre (NROCRC partners with the City of Ottawa and the local private sector landlord (Minto) to provide a range of sports and recreation program through the year. The programming provides safe and accessible instruction and activities to children, youth, and adults which reduce social isolation, improve social networks, and improve physical fitness. All activities take place after school hours. Impacts include increased physical activity levels, improved social engagement opportunities, improved physical fitness and skills, improved social skills and reduction of social isolation.

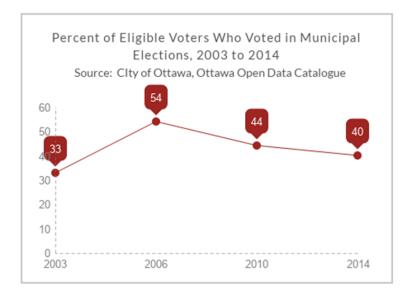
Key Pressures

Key challenges identified on the 2018 Community Agency Survey for programs supporting physical activity:

- Increasing operating costs, such as space rental, insurance, transportation
- Increasing salary costs, given the need for appropriate supervision for child/youth activities and the challenge finding enough volunteers to assist
- Inadequate resources to meet the full diversity of needs, including inclusion for children and youth with disabilities
- Increased dependence on fundraising

Spotlight on Voter Turnout

Voter turnout has been on the decline since the late 1970s. The impact of this trend is especially felt among lowincome residents who are less likely to vote than higher income voters. Elected officials are more likely to make decisions in the interest of the people who elect them. This, in turn, contributes to a vicious cycle of disconnectedness and democratic deficit where people experiencing poverty may not see their concerns addressed, and become even less likely to vote.⁶⁷



Why This Matters

Voting is the cornerstone of public participation in our democratic system. It's the mechanism by which the public selects both its political leaders and its government's policy direction. If all eligible voters are not equally drawn to the ballot box, there could be consequences for which communities and issues come to be regarded as priorities by elected officials. Additionally, low voter participation can reflect broader dynamics of social exclusion and alienation felt by some voters. Finally, the legitimacy of government itself can be compromised, if voter turnout is especially low in some areas or communities. ⁶⁸

- Voter turnout has been declining at the municipal level in Ottawa, a trend seen across the country for all three levels of government.
- Many factors contribute to the decline, including cynicism about the electoral process, lack of interest, feelings of not being represented in the process and policies, administrative and logistical barriers to casting a ballot, lack of knowledge and busy lives.
- Extensive research has identified particular groups who are less likely to vote, including young people, low income individuals, Aboriginal people, immigrants especially in the first ten years in Canada, people with lower levels of education and single parents.



Did you know? Although a higher percentage of young people don't vote compared to the general population, young people are very politically engaged and active in civic life in other ways, including getting involved in public policy issues, improving their communities, engaging in policy discussions on social media and volunteering.



Community agencies support resident involvement during and between elections

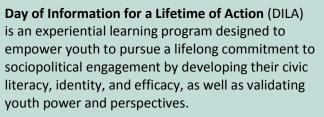
Community agencies use a variety of strategies to reach people who are at risk of not voting. The Coalition of

Community Health and Resource Centres and "Making Voices Count" have worked together to increase voter turnout through a long-term investment in civic engagement in which residents feel the positive impact of their involvement. They use a proven model, with four strategies:

- 1. Make it easy to vote
- 2. Make it fun to vote
- 3. Ignite the passion to make a difference
- 4. Build bridges between candidates and residents

(City for All Women Initiative and the Coaltion of Community Health and Resource Centres, 2014, p. 7)

Although the decline in voter turnout is a critical concern, democratic engagement goes beyond elections and is more than just voting. Community agencies are at the forefront of supporting the civic engagement of residents through volunteering, donating and improving community life. For example, in 2017 community health and resource centres working with residents and partners on neighbourhood improvement projects, leveraged thousand of dollars of cash and in-kind resources through the "Community Development Framework" initiative. Residents across 14 neighbourhoods donated thousands of hours of volunteer time to improve neighbourhood safety, social opportunities, food security and a host of other issues.



DILA operates within high school classrooms. Over the course of 8 classroom visits, youth in partnership with teachers, implement an action plan of their own creation while developing collaboration competencies and learning the basis of campaigning. Youth analyse power relations and inequities in their community and are supported by adult mentors, including community partners, to address social or environmental issues. The program caps-off with an event held at City Hall where student voices are championed and their campaigns shared with politicians at the local, provincial and federal level.

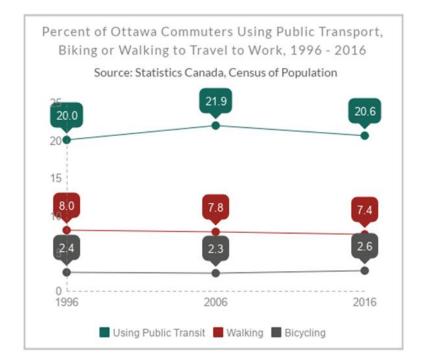
DILA is a program of **Youth Ottawa (Child and Youth Friendly Ottawa)**. It has been running for over six years, and it now operates in all four school boards and in most high schools. Close to 7,000 youth per year go through the program.



Environment

Spotlight on Transportation

Transportation and building operations are the two activities that most greatly contribute to greenhouse gas (GHG) emissions and air pollution in Ottawa.⁴¹ (City of Ottawa, 2014). Increasing the use of public transportation and active transportation (i.e. walking and biking) are important in reducing GHG emissions. Transportation issues (especially access and cost) continue to be identified as a key barrier to accessing services and amenities for vulnerable residents including seniors, people with disabilities, children and youth, and newcomers.



Why Increasing Public and Active Transportation Matters

An effective public transportation system is a key element of a "Smart City" benefiting both the environment and economic growth

An auto-dominated transportation system is inequitable. Large groups of people experience the negative effects (e.g. restricted access to services and activities, reduced health (including safety), increased financial hardship and decreased community social interaction).⁶⁹

- The number of Ottawa commuters who bike, walk or use public transit to commute to work is increasing
 over time, but is not keeping pace with population growth. The percentage of Ottawa commuters using
 public transit and walking has gone down slightly since 2006. The percentage of commuters biking to work
 increased by 27.2% from 2006 to 2016, but is still a small percentage of total commuters (2.6% at 2016).
- Ottawa is quite car dependent, with 62.7% of commuters getting to work by driving. Many factors contribute to this, particularly the geography and development patterns. Most of the huge rural land mass is not served by public transportation, and more than 35% of the population growth from 2010 to 2015 was in the suburbs, which are primarily designed for car dependency rather than public and active transportation.
- All levels of government have been investing significantly in expanding the public transit infrastructure, particularly with the light rail expansion, as well as increasing infrastructure supporting active transportation such as dedicated bike lanes.
- The introduction of the EquiPass and EquiFare was a very important improvement that is helping to address the access barrier of the increasing cost of OC Transpo fares.

Money Well Spent

When improvements in active transportation are made, communities win – with lower infrastructure costs, increased retail sales, higher property values, increased tourism and the ability to attract workers and businesses.

Offering a range of transportation options is one way in which small and rural communities can help retain employers and residents, maintain the local economy, ensure equal access to services, jobs and educational opportunities, address the needs of an aging population and improve the health of residents.⁷⁰



Land use and transportation systems that provide a range of mobility options, including walking, cycling and transit, can contribute to a decrease in injuries, reduce social and financial inequities, and can have a positive effect on mental health and social cohesion.⁷¹

Community services play a central role

in increasing access to a range of transportation options

Transportation issues are an important barrier that makes it difficult for many residents to access services, to attend school or work, to socialize and to participate in all aspects of community life. Non-profit agencies provide many services to address transportation barriers, including:

- Providing bus fare for participants
- Working with decision makers for reduced fares
- "Travel training" for people who need help to use public transportation (such as some people with disabilities or newcomers with language barriers)
- Providing transportation through company vehicles
- Coordinating and insuring volunteer drivers
- Training on bicycle maintenance and safe bicycling
- Improving road and traffic safety in neighbourhoods

Key Pressures

Key challenges for community agencies supporting increased access to diverse transportation options:

- Increased operating costs, including gas and vehicle insurance, without increases in related funding
- The aging of volunteers, including volunteer drivers
- The significant increase of the population in the suburbs, where access to services is more limited. This requires either providing more transportation supports to bring residents to services, or providing more services in underserviced areas, often without related increases in funding.





Community Health and Resource Centres Are Called On To Respond to Urgent and Critical Community Conditions

In addition to maintaining on-going programs that underpin all aspects of wellbeing in Ottawa, the community sector in general, and Community Health and Resource Centres in particular, are called upon by governments and businesses to coordinate urgent responses to emergencies and critical community situations. Whether for health crises like H1N1, catastrophic events like the flooding in West Carleton in 2017, settling Syrian refugees, or supporting residents after a neighbourhood shooting, Ottawa's community sector has demonstrated its ability to mobilize suddenly around these situations.

The City provides a foundation of core funding to 89 non-profits in Ottawa. However, this does not cover the range of programming needs, and so non-profits must seek diversified funding. The community sector is in critical need of adequate sustainable funding to ensure it has the capacity to continue to respond effectively. Agencies must continue to meet the on-going needs in the community during critical and urgent situations, while it also supports those impacted by critical community conditions after the media cameras have left.

In the first few days of flooding in West Carleton in 2017, a small team of **Western Ottawa Community Resource Centre** (WOCRC) staff members assembled to provide support to **the Constance & Buckhams Bay Community Association** (CBBCA), with volunteer and social media management, responding to crisis requests, coordinating donations and supplies, and sand bagging. Over the 14-day period between May 6th and May 19th, approximately 119 hours of front line staff hours were re-assigned to support efforts in Constance Bay. In addition, approximately 21 hours of Casual Relief were also allocated to the response. As water levels started to go down, WOCRC continued to be provide assistance that was very flexible, responding to the ever-changing community needs. These activities included: wellness checks on residents, greeting clients at the Community Centre, counseling, coordination with other service providers, service navigation, support and planning. WOCRC staff assisted residents to determine their immediate needs and help find resources to meet those needs. Both front line and managers were involved in the response.

Post flooding, **WOCRC** worked with **United Way Ottawa** to organize a community meeting with community and service provider partners for debriefing and to identify future needs. This report was done in partnership with the City Councillor for West Carleton.

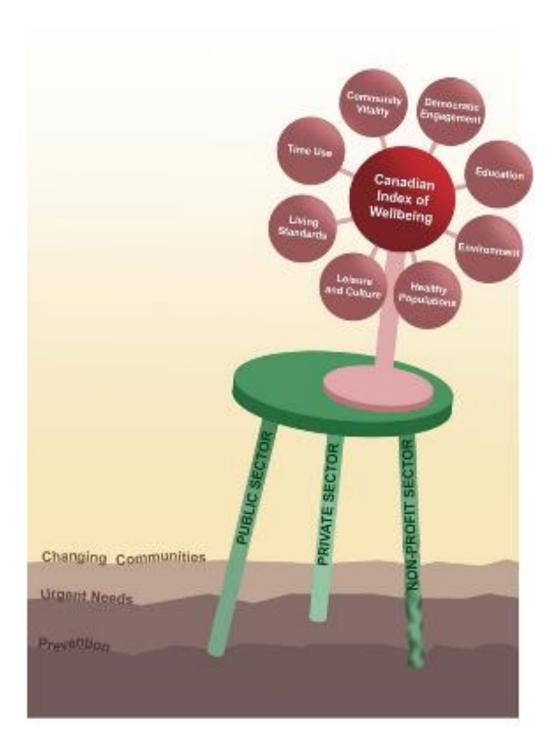




Ottawa Public Health has an established Public Health Emergency Management Plan to ensure that all health services are coordinated to provide a comprehensive and timely response to public health emergencies. Community Health Centres continue to play an active part in developing this plan and working in partnership with other service providers as apart of the City-wide response.

In 2009, Ottawa Community Health Centres (CHCs) mobilized to operate Flu Assessment Centres as an essential component of a coordinated community response to the declaration of an H1N1 pandemic. People who developed influenza symptoms and needed access to assessment, treatment and if necessary, referral to other services, were directed to their local Community Health Centre. Community Health Centres are well positioned to continue to support this role since they offer a range of primary care services, programs and supports to respond to individual health issues and issues that affect community health. They also hold a wide range of partnerships with other health and community service organizations and groups, effectively tailor services to vulnerable populations, and are accountable to the Champlain Local Health Integration Network.

Section 3: Check-Up On the Wellbeing of Ottawa's Community Services Sector



A Tale of Urgent Needs, Changing Communities and Pressures to Maintain On-going Prevention Work

Funding is not keeping up with the growing population, demand and increasing costs. Even with "lean type" processes, we cannot fill this gap. There is a lack of referral options and long wait lists for key services. We cannot be all things to all people without a level of investment that at least keeps pace with inflation. (Survey respondent)

This section of the report explores the wellbeing of Ottawa's community services sector, considering the range of issues it is called on to address and the scope of resources it relies on to respond. The community services sector relies on a broad range of resources to serve the community, including volunteers, donations, fee for services, and funding from governments, foundations and United Ways. Each funder, and each level of government, is mandated to fund different issues. For example, the Province has a mandate to fund health programs, whereas the City and the Federal government are mandated to fund other programs. The City is a significant backbone funder for many local community agencies, including community health and resource centres, providing core funding (distinct from program funding) to contribute to sustainability.

This section begins with highlights from an analysis of the charity return data from Canada Revenue Agency for 2016 provides an overview of the changes in funding from the different funding sources on which community agencies rely.

The final section of this report summarizes the findings from a 2018 survey conducted by the **Coalition of Community Health and Resource Centres, Making Voices Count and the Social Planning Counci**l. The survey was sent to the 89 community agencies that receive funding from the City's Renewable Community Funding Program. These agencies are key partners with the City in supporting wellbeing, equity and inclusion for Ottawa residents. 39 agencies responded (44%). The survey creates a snapshot of the state of community-based health and social services in the City. The survey explored the situation within the organizations for all programs and all funding sources, not just those programs funded by the City. In this section of the report, percentages reported for survey responses to each question are based on the number of agencies responding to the specific question.

The summary of the charity return data and the survey responses documents the growing demand – in scope and complexity – and an urgent need for increased investment.

Highlights from Analysis of Canada Revenue Agency Charitable Returns Data 2016

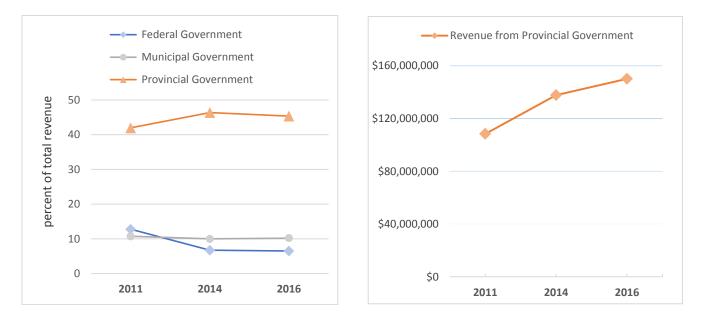
Canada Revenue Agency's (CRA) Charitable Returns Data Reveals A Picture of Financial Stress

The data from CRA for all charities in Ottawa providing social services paints a picture of budget pressures, particularly in terms of declining Federal funding. The Provincial government is the key funder of local charities.

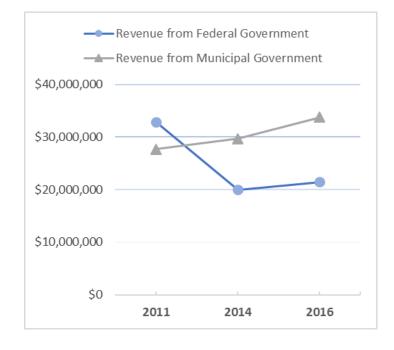
The number and percent of charities running deficit is increasing:

	2011	2014	2016
Percent charities with deficit	33.6	40.2	42.9
Number of Charities with Deficit	42	49	51

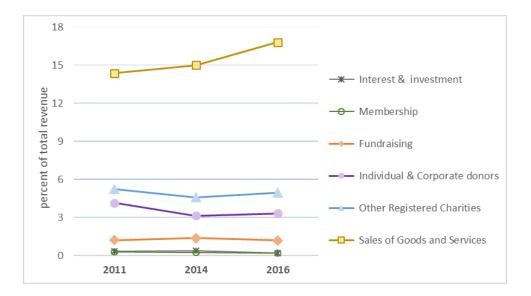
Revenue from the Provincial government makes almost ½ of the total revenue and is increasing in absolute dollar amount.



The total dollar amount of the Revenue from Municipal government is also increasing as opposed to the revenue from the Federal government, which is on decline and has the smallest share in the revenue from government sources.



The revenue from sales of goods and services increased both in dollar value and in % share of total revenue while the fundraising and membership revenues decreased in value.



Highlights from the 2018 Community Agency Survey

The 2018 survey was sent to the 89 agencies that receive Renewable Community Funding from the City. These are a sub-set of agencies in Ottawa, and a smaller sample of agencies than is represented in the Charitable Return data from Canada Revenue Agency. 39 agencies responded to the 2018 survey (44%) of those receiving Renewable Community Funding. The responses paint a similar picture in terms of financial pressures, and provide additional insights into the impact of the financial pressures on the community and the agencies.

Agency pressures

90% had unmet budget pressures

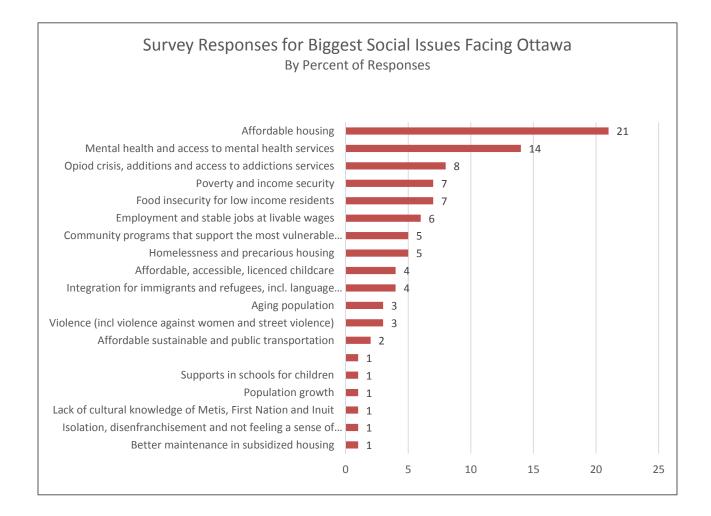
Over the past three years (2014 – 17):

- 87% had an increased demand for services (68% without additional resources)
- 77% had an increase in the number of people served
- 67% had an increase in the # of clients with complex needs
- 59% had increased diversity in the clients they served

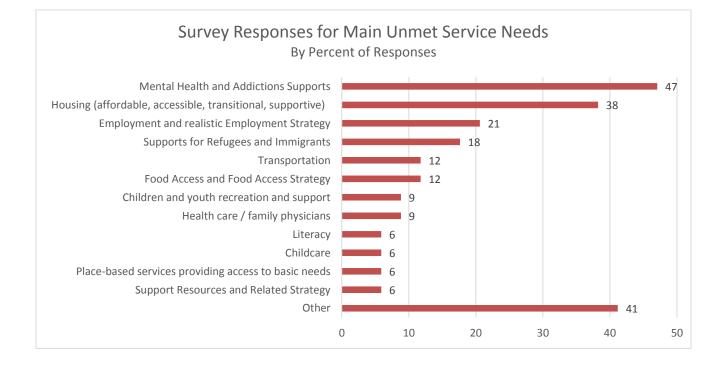
Consequences for the community

- 54% had less ability to offer long term support
- 50% had less ability to serve clients with minimal wait time
- 46% had less ability to offer individualized services
- 44% had reduced services
- 21% had inconsistency or reduced quality of services
- 18% were turning clients away
- 15% had longer waiting lists

Biggest issues and service gaps



Affordable housing and mental health and addictions were identified by agencies that responded to the survey as the biggest issues facing Ottawa (see chart above) as well as the biggest service gaps (see chart below). Income issues and the need for an employment strategy were the next biggest issue and service gap.



"Other" service gaps include single responses for the following services:			
Access to services in rural areas Outreach services			
Dental services for low income individuals	Poverty reduction strategy		
Emergency housing	Resources to support vulnerable families		
• Free programming for youth and older adults	der adults • Safety planning (prevention focused)		
Housing loss prevention	Service coordination and information		
LGBTQ+ services	management		
Services in French	• Services for the black population, LGBTQ+		
Support for caregivers	population and low income families		

The scale of increasing demands

Urgent needs, prevention, changing communities

Crisis in Basic Needs

e and more households are not able to cover basic food and housing costs. The Ottawa Food Bank supports more than 90 agencies, who provide emergency food services monthly. The number of food bank clients increased 5.6% from 2016 to 2017. 41.500 residents use emergency food services monthly.

"Community Food Banks are largely organized and delivered by volunteers as there is little funding to support them operationally. If current trends continue, these essential services will struggle more and more to recruit and retain volunteers. Ideally, eliminating food bank dependency is the goal, but based on data there is an ever growing need for the service." Britannia Woods Community House

On-Going Prevention

Community services provide a broad range of on-going services and supports that are the foundation of prevention – keeping people in good health through health promotion programs, supporting families and youth to keep people out of trouble, social activities for seniors and people with disabilities to reduce isolation, housing loss prevention programs, personal and financial counselling, and more.

Population Growth in the Suburbs

Ottawa's suburbs grew significantly between 2011 and 2016. By 2016, 36% of Ottawa residents were living in the suburbs. Services are significantly pressured to meet the exploding demand.

More and more people are facing difficult and complex situations needing more frequent support from our staff. In the past year, 622 people received monthly food support compared to 495 in 2012 and 328 in 2007. This represents a 90% increase in ten years, 26% in five years. Last year we encountered 899 people in our intake service which supports basic needs and in our emergency services, we encountered 899 people compared to 491 five years ago. This represents an 81% increase in five years. Orleans Cumberland Community Resource Centre

What's Creating Increased Demand?

In the survey, agencies identified key issues, including:

- growing pressures from the erosion of incomes, including the instability of employment which is dramatically increasing the demand for support for basic needs – food, shelter, utilities, school supplies and services for children. Poverty is contributing to higher stress on families, including increased violence and substance use;
- increased numbers of people needing services: low income residents, refugees, people with mental health and addictions, population growth in general (especially in the suburbs);
- increased complexity and a need for individualized support, especially for refugees and other new immigrants, and people with mental health and addictions issues.

Policy priorities including:

- Prioritizing people with mental health issues in shelters for move-ins to social housing. Without adequate supports, this is creating increased need for services in social housing;
- Aging in place including quick discharge after hospitalization is resulting in increased demands for supports at home, for vulnerable residents and their caregivers;
- Settlement of refugees is impacting ting community services related to basic needs, children's services and employment, as well as settlement services.

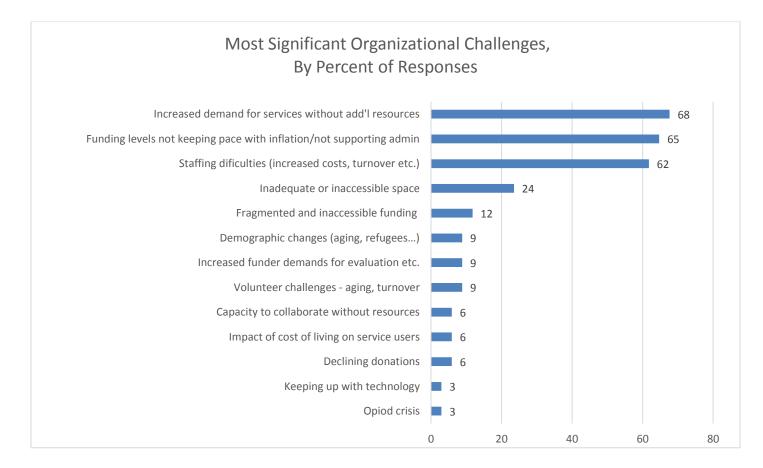
Survey highlights critical financial pressures

The 2018 Community Agency Survey paints a stark picture of the organizational and financial pressures on the sector. The biggest issue was funding not keeping pace with inflation, growing populations, and the increasing urgency and complexity of needs.

90% of responding agencies had unmet budget pressures related to the demand for services and increased costs.

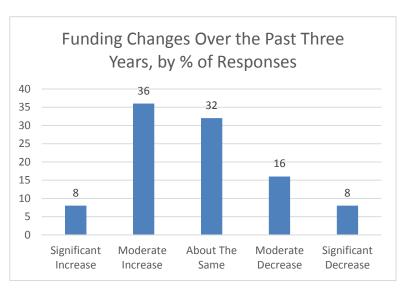
Agencies indicated other organizational and administration pressures, including.

- challenges with respect to their space (needing to expand or facing disruption from renovations);
- increased demands from funders and government for record-keeping and evaluation. This is exacerbated by different requirements by the multiple funders with no related resources to meet the administrative demands resulting in less time to serve clients;
- challenges attracting and integrated volunteers.



Modest increases but barely keeping up to inflation

56% of responding agencies had no change or a decrease in funding over the past three years (considering all sources of funding). Some identified their funding levels had been frozen for 5 or more years from some funders. All agencies surveyed received cost-of-living increases implemented by the City of Ottawa. While this has been critically important, it has not resulted in all agencies experiencing an increase in funding overall (given the number of funders covering program activities). Over the past three years, 44% of responding agencies had received increases in their funding overall (8% had received a significant increase and 36% had experienced a modest increase).



Changes by key funders

Federal funding: 25% had an increase; 25% about the same; 32% no federal funding

Provincial funding: 30% had an increase; 31% about the same; 25% had no provincial funding

Municipal funding: 100% had an increase in municipal funding (94% modest increase / 6% significant increase). The increases reflected both the COLA amounts and the new sustainability top-ups.

United Way:

64% had a reduction in United Way funding (21% a significant reduction). 21% had no United Way funding.

No agencies had an increase in United Way funding.

Individual and Corporate Donations: 29% had an increase; 39% had the same.

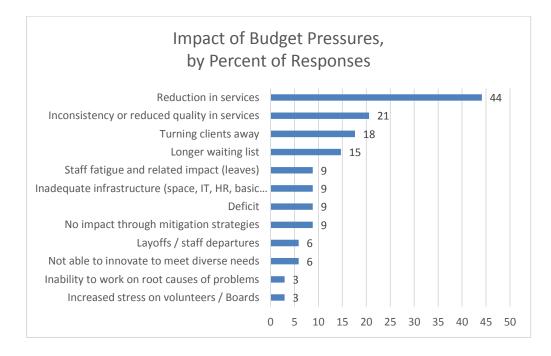
Contribution from other funding sources varied significantly, as set out in the table below (by % of responses)

	Significant	Moderate	About	Moderate	Significant	Not
	Increase	Increase	The	Decrease	Decrease	Applic-
			Same			able
Ontario Trillium Foundation	10.71	14.29	32.14	0	10.71	32.14
Ottawa Community Foundation	7.14	17.86	32.14	7.14	3.57	32.14
Other Charitable Foundations	3.57	25	32.14	7.14	3.57	28.57
Individual/Corporate Donors	10.71	17.86	39.29	17.86	7.14	7.14
Sales of Goods/Services / Fee for						
services/Social enterprise	7.41	11.11	22.22	0	3.7	55.56
Fundraising Campaigns/Events	3.57	28.57	17.86	17.86	3.57	28.57
Membership Dues	0	0	17.86	0	7.14	75
Interest/Investment Income	0	7.14	57.14	3.57	10.71	21.43
Other	0	0	11.76	0	0	88.24

Impact of Inadequate Budgets

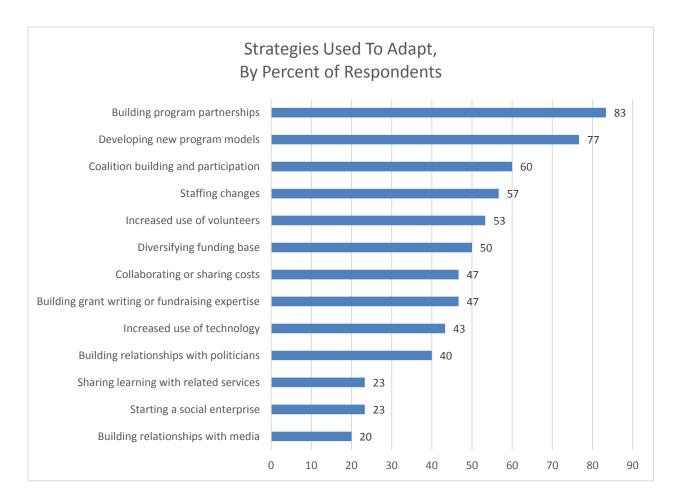
"We're maintaining direct services at the expense of administration, to the point that is becomes a risk to the organization." 2018 Community Agency Survey Respondent

The 39 respondents to the agency survey identified the key impacts that budget pressures are having on the community, particularly cuts to services, inconsistency, turning clients away, and longer waits.



Community Agencies Innovate In Response

The 2018 community agency survey identified the many ways Ottawa's non-profits are innovating, in an effort to address the increasing vulnerabilities – within the agencies and within the community at large.



Conclusion

Ottawa's community services sector has demonstrated its ability to adapt and innovate in the face of growing demands.

However, the 2018 Community Wellbeing Report highlights significant concerns about the capacity of community services to adequately respond to critical issues of wellbeing in the community, in the face of chronic under-funding and burdensome, short-term funding frameworks. Many organizations are at a crisis point, particularly those called upon to address the increasing difficulty for thousands of residents to meet basic needs.

Community agencies need an increase in sustained funding to realistic levels that enable them to fulfill their central role as the foundation for wellbeing in Ottawa, benefiting both the individuals they serve and the community at large.

APPENDIX A: HOW DO WE COMPARE TO ONTARIO & CANADA?

A general overview of how Ottawa is doing compared to the province, the country or to the other municipalities in the eight domains of the Canadian Index of Wellbeing.

The information reflects the most recent data available for each of the highlighted indicators.

	OTTAWA	ONTARIO	Canada
Living Standards			
Prevalence of low income (Low-income measure, after tax (LIM-AT), 2015			
Total population	12.6%	14.4%	14.2%
Aged 0 to 5 years	17.1%	19.8%	17.8%
Aged 0 to 17 years	16%	18.4%	17%
Aged 18 to 24 years	20.5%	17.6%	16.9%
Aged 65 years and over	9.4%	12%	14.5%
Percent of households spending 30 percent or more of total income on shelter costs, 2016	23.8%	27.6%	24.1%
Owner	14.1%	19.8%	16.5%
Renter	42.2%	45.6%	39.9%
Unemployment Rate of population 15 years and over, as of March 2018 ³	4.6%	5.9%	6.3%
Unemployment Rate of population 15 to 24, as of March 2018 ³	11.7%	11.9%	11.6%
Healthy Populations			
Health Conditions, 2015-16			
Diabetes	5.6%	7.4%	6.9%
Asthma	11.0%	8.6%	8.5%
Chronic obstructive pulmonary disease (COPD; 35 years and over)	2.2%	4.1%	4.1%
High blood pressure	15.2%	18.2%	17.3%
Mood disorder	8.5%	8.7%	8.2%
Perceived mental health, fair or poor	6.4%	6.9%	6.4%
Health Risk Factors, 2015-16			
Current smoker, daily or occasional	14.9%	16.7%	17.4%
Heavy drinking	19.1%	18.2%	19.1%
Body mass index, self-reported, adult (18 years and over), overweight	35.3%	35.2%	35.8%
Body mass index, self-reported, adult (18 years and over), obese	24.7%	26.2%	26.3%
Physical activity, 150 minutes per week, adult (18 years and over)	67.3%	57.4%	57.7%
Fruit and vegetable consumption, 5 times or more per day	32.8%	27.8%	30.8%
Education			
Children's early development: Percent of children vulnerable in one or more development domains of the Early Development Instrument (in comparison with the 2014-15 Ontario baseline), Cycle 4	26%	28%	N/A
Proportion of population aged 25 to 64 years with selected highest levels of education, 2016			
Bachelor's degree or higher	45%	31.9%	28.5%
Secondary (high) school diploma or equivalency certificate	19.2%	24.5%	23.7%
No certificate, diploma or degree	6.3%	10.4%	11.5%

How Do WE COMPARE TO ONTARIO & CANADA?

	OTTAWA	ONTARIO	Canada
Community Vitality			
Sense of belonging to local community, somewhat strong or very strong, 2015-16	70.1%	70.9%	68.4%
Environment			
Period of measured change	2004 – 2012	2005 - 2016	2005 – 201
Decline in Green House Gas (GHG) Emissions	12%	22%	3.8%
Percent people who commuted to work using public transit, walking or biking			
Public transit	20.6%	14.6%	12.4%
Walked	7.4%	5.3%	5.5%
Bicycle	2.6%	1.2%	1.4%
Leisure and Culture			
Percent Households Participating in Outdoor Activities, 2015 3			
Walking	62%	56%	N/A
Jogging, running, rollerblading, cross-country running	17%	11%	N/A
Football, soccer, field hockey, basketball, volleyball, baseball, rugby, lacrosse, ultimate (frisbee), ball/road hockey	6%	11%	N/A
Swimming, going to the beach, surfing, scuba diving, snorkeling	12%	6%	N/A
Bicycling	33%	21%	N/A
Time Use			
Commuting duration for the employed labour force aged 15 years and over, 2016			
Less than 15 minutes (percent)	19.8%	24%	28%
15 to 29 minutes (percent)	38.1%	32.2%	33.5%
30 to 44 minutes (percent)	24.7%	21.3%	20.3%
45 to 59 minutes (percent)	10.1%	10.1%	8.89
60 minutes and over (percent)	7.2%	12.4%	9.4%
Perceived life stress, 2015-16			
Percent aged 15 and over reporting that most days in their life were quite a lot or extremely stressful	22.1%	22%	21.5%
Democratic Engagement			
Voter Turnout at Municipal Elections	Ottawa	Vancouver	Toronto
Percent of all eligible residents who voted at 2014 municipal elections	40%	43%	55%

ENDNOTES

¹ <u>Canadian Index of Wellbeing</u>, University of Waterloo, 2016.

² Government of Canada, Budget 2018, Budget Plan, Gender results framework, accessed at <u>https://www.budget.gc.ca/2018/home-accueil-en.html</u>

³ The numbers are for the Ontario part of the Ottawa-Gatineau Census Metropolitan Area.

Ontario part of the Ottawa-Gatineau Census Metropolitan Area includes the municipalities of Ottawa (population **934,243**, Clarence-Rockland (population **24,512**), Russell (population **16,520**) and North Grenville (population **16,415**). Population numbers source is the 2016 census.

⁴ After-Tax Low-Income Measure (LIM-AT). Statistics Canada. Dictionary, Census of Population, 2016, accessed at <u>http://www12.statcan.gc.ca/census-recensement/2016/ref/dict/index-eng.cfm</u>.

All low-income statistics in this report refer to the after-tax low-income measure (LIM-AT), unless otherwise specified. The Low-income measure, after tax, refers to a fixed percentage (50%) of median adjusted after-tax income of private households. The household after-tax income is adjusted for the household size. In 2015, the LIM-AT threshold for one-person households was \$22,133. For other household sizes, this amount is multiplied by the square root of the household size. For example, the LIM-AT threshold for a household with two members was \$31,301; with four members, it was \$44,266.

⁵ Statistics Canada. Table 282-0001 - Labour Force Survey estimates (LFS), accessed at <u>https://www150.statcan.gc.ca/n1//en/type/data?MM=1#tables</u>.

⁶ Affordable housing has shelter costs equal to less than 30% of total before-tax household income. Statistics Canada. Dictionary, Census of Population, 2016, accessed at <u>http://www12.statcan.gc.ca/census-recensement/2016/ref/dict/index-eng.cfm</u>.

For housing to be considered affordable, housing costs should be less than **30%** of a family's before-tax household income. Poverty rate is defined as households who are spending **50%** or more of income on shelter costs.

⁷ Canada Mortgage and Housing Corporation. CMHC Rental Market Survey, accessed at <u>https://www03.cmhc-schl.gc.ca/catalog/productList.cfm?cat=48&lang=en&fr=1529416694991.</u>

⁸ Alliance to End Homelessness, Ottawa. 2016 Progress report on ending homelessness in Ottawa; Progress Report Review 2014-2017, access at <u>https://www.endhomelessnessottawa.ca</u>.

⁹ City of Ottawa. 10-Year Housing and Homelessness Plan, Progress Report 2014 to 2017. March 2018, accessed at <u>https://ottawa.ca/en/residents/social-services/housing</u>.

¹⁰ Amanda Pfeffer. "New light-rail system could leave disadvantaged Ottawans in the lurch: transportation summit. A city-hosted summit examining how to make sure the people who need public transit get it." CBC News, Posted: Sep 22, 2017, accessed at <u>http://www.cbc.ca/news/canada/ottawa/Irt-leave-disadvantaged-in-lurch-1.4302355.</u>

¹¹ Ottawa Public Health. 2017 Nutritious Food Basket - The Price of Eating Well in Ottawa.

¹² Ottawa Food Bank. The 2017 Ottawa Hunger Report, accessed at <u>http://www.ottawafoodbank.ca/reports-and-newsletters</u>.

¹³ Statistics Canada. Canadian Community Health Survey: Canadian health characteristics. CANSIM table 105-0592 and 105-0593- - Canadian health characteristics, two-year period estimates, by age group and sex, last updated on: 2017-11-06, accessed at the Community Data Program, <u>https://communitydata.ca</u>. ¹⁴ Statistics Canada. 2016 Census, custom table EO2663: Activity limitation frequency and Activity limitation type for the Population in Private Households of Canada, Provinces, Territories, Census Divisions and Census Subdivisions, 2016 Census, accessed at the Community Data Program, https://communitydata.ca.

¹⁵ Ottawa Public Health. Ottawa Student Drug Use and Health Report, 2014. Ottawa (ON): Ottawa Public Health; 2014, accessed at http://www.ottawapublichealth.ca/en/reports-research-and-statistics/reports-research-andstatistics.aspx.

¹⁶ The Champlain Local Health Integration Network (LHIN) sub-region population health profiles, Technical Report, 2017, accessed at

http://www.champlainlhin.on.ca/GoalsandAchievements/OurStratPlan/SubRegions.aspx.

¹⁷ Ottawa Public Health. Mental Health, School Climate and Bullying among Youth. Ontario Student Drug Use and Health Survey 2009 - 2011, accessed at http://www.ottawapublichealth.ca/en/reports-research-andstatistics/reports-research-and-statistics.aspx.

¹⁸ Ottawa public health. Status of alcohol in Ottawa. November 2016, accessed at https://www.ottawapublichealth.ca/en/reports-research-and-statistics/alcohol-and-drug-use.aspx.

¹⁹ Ottawa Public Health. Problematic Substance Use in Ottawa: Technical Report. June 2016. Ottawa (ON): Ottawa Public Health; 2016, accessed at http://www.ottawapublichealth.ca/en/reports-research-andstatistics/reports-research-and-statistics.aspx.

²⁰ Office of the Chief Coroner for Ontario, extracted December 2, 2016. Analyzed by Epidemiology Team, Ottawa Public Health, accessed at http://www.ottawapublichealth.ca/en/reports-research-and-statistics/reportsresearch-and-statistics.aspx.

²¹ City of Ottawa Police Service. Report on the results of the 2015 Public Survey on Policing Services in the City of Ottawa, September 2015, accessed at https://www.ottawapolice.ca/en/news-and-community/Reports-and-Publications.asp.

²² City of Ottawa Police Service. Report on 2015-2016 Crime Trends and Report on 2014-2015 Crime Trends, accessed on https://www.ottawapolice.ca/en/crime.asp.

²³ Ottawa Gang Strategy – Technical Evaluation Report: Our First Three Years, October 5, 2016, accessed at http://www.crimepreventionottawa.ca/en/publications.

²⁴ Maxime Gaudet, Police reported hate crime in Canada, 2018; released April 25, 2018, accessed at Statistics Canada, http://www.statcan.gc.ca/pub/85-002-x/2018001/article/54915-eng.htm.

²⁵ Statistics Canada. CANSIM table 252-0094, last updated on: 2017-11-27, accessed at https://www150.statcan.gc.ca/n1//en/type/data?MM=1#tables.

²⁶ Ottawa Local Immigration Partnership (OLIP), City for All Women Initiative (CAWI), Addressing anti-black racism in Ottawa: Forum Summary Report, Chelby Marie Daigle, 2017, accessed at http://www.cawiivtf.org/portfolio.

²⁷ City of Ottawa Older Adult Plan 2015 - 2018, accessed at https://ottawa.ca/en/older-adult-plan.

²⁸ City of Ottawa. Child Care Service plan, 2015 and 2016-2017, accessed at https://ottawa.ca/en/residents/social-services/information-daycare-operators-and-child-care-professionals.

²⁹ Millar, C., Lafrenière, A., Lebreton, J., de Quimper, C. (2016). Our Kids, Their Story...Snapshot of Developmental Health at School Entry in Ottawa 2005-2015. Data Analysis Coordinators, Parent Resource Centre, Ottawa, ON. 49pp + 4pp (Appendices), accessed at

http://www.parentresource.ca/en/ottawaprc/Early_Development Instrument p562.html.

³⁰ The Education Quality and Accountability Office (EQAO), Results are for Participating Students (excludes "no data" and "exempt" categories), accessed at <u>http://www.eqao.com/en/research/data-portal</u>.

³¹ Statistics Canada. CANSIM Table 477-0077 - Canadian and international tuition fees by level of study, annual (dollars), accessed at <u>https://www150.statcan.gc.ca/n1//en/type/data?MM=1#tables</u>.

³² City of Ottawa. 2017 State of the Asset Report, accessed at <u>https://ottawa.ca/en/city-hall/accountability-and-transparency/corporate-planning-and-performance-management-0</u>.

³³ Open Data Ottawa. Cultural Resources, 2018, accessed at OttawaXYZ - <u>http://ottawaxyz.ottawa.ca/</u>.

³⁴ Ottawa Public Library. Annual Report 2016, accessed at <u>https://biblioottawalibrary.ca/en/2016-annual-report</u>.

³⁵ Statistics Canada. Table 153-0153 - Households and the environment survey, participation in outdoor activities, 2015, accessed at https://www150.statcan.gc.ca/n1//en/type/data?MM=1#tables.

³⁶ Statistics Canada. General Social Survey on Giving, Volunteering and Participating, 2013. Table 119-0009 - Volunteer rate and distribution of volunteer hours, accessed at the Community Data Program, <u>https://communitydata.ca</u>.

³⁷ Statistics Canada (CANSIM Table 111-0001 - Summary of charitable donors, annual) last updated on: 2017-02-21, accessed on 2018-01-22, accessed at the Community Data Program, <u>https://communitydata.ca</u>.

³⁸ City of Ottawa. Open Data Ottawa 2.0. Elections 2014 – Statement of votes cast, accessed at <u>https://ottawa.ca/en/city-hall/get-know-your-city/open-data</u>.

³⁹ City of Ottawa. City Hall, Mayor and City Councillors, accessed at <u>https://ottawa.ca/en/city-hall/mayor-and-city-councillors</u>.

⁴⁰ Government of Ontario, Ministries, accessed at <u>https://www.ontario.ca/page/ministries</u>.

⁴¹ City of Ottawa. Air Quality and Climate Change Management Plan, May 2014, accessed at <u>https://ottawa.ca/en/city-hall/planning-and-development/official-plan-and-master-plans/air-quality-and-climate-change-management-plan-aqccmp</u>.

⁴² Statistics Canada. 2015 Households and the environment survey, CANSIM Tables 153-0059, 153-0104, 1530156, 1530159, accessed at <u>https://www150.statcan.gc.ca/n1//en/type/data?MM=1#tables</u>.

⁴³ Statistics Canada. Census of Agriculture 2016, Tables 004-0204, 004-0201, 004-0233, accessed at <u>https://www150.statcan.gc.ca/n1//en/type/data?MM=1#tables</u>.

⁴⁴ Statistics Canada. Census of Agriculture 2006, Cat. No. 95-629-XWE, accessed at <u>https://www150.statcan.gc.ca/n1//en/type/data?MM=1#tables</u>.

⁴⁵ The Ottawa Rural Clean Water Grants Program. Program Review and Renewal, Aug 14, 2015, accessed at <u>https://www.rvca.ca/stewardship-grants/rural-clean-water-grants/ottawa-s-rural-clean-water-program</u>.

⁴⁶ City of Ottawa, Population and Household Estimates by Sub-Area, accessed at: <u>https://ottawa.ca/en/city-hall/get-know-your-city/statistics-and-economic-profile/statistics</u>.

⁴⁷ Social Planning Council of Ottawa, 2016. Engagement on Health Priorities for Seniors and Caregivers in West Carleton A Rural Community Development Initiative Case Study and Evaluation Report. Accessed at <u>https://www.spcottawa.on.ca/file/engagementonhealthprioritiesforseniorsandcaregiversinwesternottawa2016</u> <u>pdf</u>

⁴⁸ Employment and Social Development Canada, 2016. Towards a Poverty Reduction Strategy – Discussion Paper, p. 3. Accessed at <u>https://www.canada.ca/en/employment-social-development/programs/poverty-reduction/discussion-paper.html</u>

⁴⁹ Ontario Association of Food Banks, 2018. Ensuring Everyone Has Proper Housing Saves Us Money. Accessed at <u>https://oafb.ca/a-housing-benefit-would-reduce-the-need-for-food-banks/</u>

⁵⁰ Immigration, Refugees and Citizenship Canada, Open Government Licence - Canada <u>http://open.canada.ca/en/open-government-licence-canada</u>.

⁵¹ Mental Health Commission of Canada, 2013. Making the Case for Investing in Mental Health in Canada. Accessed at https://www.mentalhealthcommission.ca/English/major-mhcc-documents-2007-2017#2013

⁵² Champlain Local Health Integration Network (2017). LHIN Sub-Region Population Health Profiles Technical Report. Ottawa: author, p.8. Accessed at

http://www.champlainlhin.on.ca/GoalsandAchievements/OurStratPlan/SubRegions.aspx

⁵³ Canadian Institute for Health Information, 2016. Hospitalization and Emergency Department Visits Due to Opioid Poisoning in Canada, p. 14. Accessed at

https://secure.cihi.ca/estore/productFamily.htm?locale=en&pf=PFC3328&lang=en

⁵⁴ Ratnasingham, S., et al, 2012. Opening Eyes, Opening Minds: The Ontario Burden of Mental Illness and Addictions Report. Toronto: Institute for Clinical Evaluative Services, p. 7. Accessed at https://www.ices.on.ca/Publications/Atlases-and-Reports/2012/Opening-Eyes-Opening-Minds

⁵⁵ Ratnasingham, S., et al, 2012. Opening Eyes, Opening Minds: The Ontario Burden of Mental Illness and Addictions Report. Toronto: Institute for Clinical Evaluative Services, p. 55. Accessed at https://www.ices.on.ca/Publications/Atlases-and-Reports/2012/Opening-Eyes-Opening-Minds

⁵⁶ CMHA Ontario, 2018. Erase the Difference website. Accessed at <u>https://erasethedifference.ca</u>

⁵⁷ Ontario Ministry of Community Safety and Correctional Services in partnership with the Ontario Association of Chiefs of Police, 2013. Crime Prevention in Ontario A Framework for Action. Toronto, author, pp. 13-14. Accessed at https://www.mcscs.jus.gov.on.ca/english/publications/Crime_Prevention_Framework.html

⁵⁸ Tal, Benjamin and Mendes, Royce, 2017. Who Cares: The Economics of Caring For Aging Parents. Toronto: Canadian Imperial Bank of Commerce, pp. 1 – 2. Accessed at <u>https://www.cibc.com/content/dam/pwm-public-assets/documents/pdfs/insights/who-cares-the-economics-of-caring-for-aging-parents-in-focus-en.pdf</u>

⁵⁹ Farrar, Estelle Dr., et al (February 2007). School Readiness. Melbourne: Australian Research Alliance for Children and Youth, pp. 4, 18. Accessed at http://pandora.nla.gov.au/pan/62639/20071113-0024/www.aracy.org.au/AM/Common/pdf/Topical%20Papers/Readiness.pdf

⁶⁰ United Nations Children's Fund, 2012. School Readiness: A Conceptual Framework. New York, author, p. 21. Accessed at https://www.unicef.org/earlychildhood/files/Child2Child_ConceptualFramework_FINAL(1).pdf

⁶¹ Child Care Now, 2014. Child Care in Canada by 2020: A vision and a way forward, p. 8. Accessed at <u>https://timeforchildcare.ca/wp-content/uploads/2017/11/visionchildcare2020nov3eng.pdf</u>

⁶² Alexander, Craig et al., 2017. Ready for Life: A Socio-Economic Analysis of Early Childhood Education and Care. Ottawa: Conference Board of Canada, as reported in their press release accessed at http://www.conferenceboard.ca/press/newsrelease/2017/10/26/expanding-early-childhood-education-and-care-in-canada-yields-significant-economic-and-societal-benefits

⁶³ Gray, Casey E., et al, 2014. Results From Canada's 2014 Report Card on Physical Activity for Children and Youth. Journal of Physical Activity and Health, 2014, 11(Supp 1), S26-S32. Accessed at <u>https://fhs.mcmaster.ca/chemp/documents/JPhysAct-2014-</u>

ResultsfromCanadas2014reportcardonphysicalactivityforchildrenandyouth.pdf

⁶⁴ World Health Organization, Global Strategy on Diet, Physical Activity and Health (website page). Accessed at <u>http://www.who.int/dietphysicalactivity/factsheet_young_people/en/</u> ⁶⁵ Chief Public Health Officer's Report on the State of Public Health in Canada 2011 – Youth and Young Adults Life In Transition. Accessed at <u>https://www.canada.ca/en/public-health/corporate/publications/chief-public-health-officer-reports-state-public-health-canada/chief-public-health-officer-report-on-state-public-health-canada/chief-public-health-officer-report-on-state-public-health-canada/chief-public-health-officer-report-on-state-public-health-canada/chief-public-health-officer-report-on-state-public-health-canada/chief-public-health-officer-report-on-state-public-health-canada/chief-public-health-officer-report-on-state-public-health-canada/chief-public-health-officer-report-on-state-public-health-canada/chief-public-health-officer-report-on-state-public-health-canada/chief-public-health-officer-report-on-state-public-health-canada/chief-public-health-officer-report-on-state-public-health-canada/chief-public-health-officer-report-on-state-public-health-canada/chief-public-health-officer-report-on-state-public-health-canada/chief-public-health-officer-report-on-state-public-health-canada/chief-public-health-officer-report-on-state-public-health-canada/chief-public-health-officer-report-on-state-public-health-canada/chief-public-health-officer-report-on-state-public-health-canada/chief-public-health-officer-report-on-state-public-health-canada/chief-public-health-officer-report-on-state-public-health-canada/chief-public-health-officer-report-on-state-public-health-canada/chief-public-health-officer-report-on-state-public-health-canada/chief-public-health-canada/chief-public-health-officer-report-on-state-public-health-canada/chief-public-health-canada/chief-public-health-canada/chief-public-health-canada/chief-public-health-canada/chief-public-health-canada/chief-public-health-canada/chief-public-health-canada/chief-public-health-canada/chief-public-health-canada/chief-public-health-canada/chief-public-health-canada/chief-public-health-canada/chief-public-health-canada/chief-public-health-canada/chief-</u>

⁶⁶ Moore, Justin B., 2017. Cost-effectiveness of Community-Based Minigrants to Increase Physical Activity in Youth. Journal of Public Health Management and Practice: July/August 2017 – Vol. 23 – Issue 4 – p. 364-369. Accessed at

https://journals.lww.com/jphmp/Abstract/2017/07000/Cost_effectiveness_of_Community_Based_Minigrants.7 .aspx

⁶⁷ Gidengil, Blais, Nevitte, Nadeau, 2004, as quoted in City for All Women Initiative, March 2014. Making Votes Count Where We Live Creating a Culture of Civic Engagement, Executive Summary. Accessed at http://catherinedonnellyfoundation.org/right/wp-content/uploads/2017/01/making-votes-count-where-we-live-2014.pdf

⁶⁸ Siemiatycki, Myer and Marshall, Sean, 2014. Who Votes in Toronto Municipal Elections? Toronto: Maytree Foundation, p. 3. Accessed at <u>https://maytree.com/wp-content/uploads/Who_Votes-final.pdf</u>

⁶⁹ McLaren, Arlene Tigar, 2015. Moving Beyond the Car Families and Transportation in Vancouver, BC. Canadian Centre for Policy Alternatives, p. 10. Accessed at

https://www.policyalternatives.ca/sites/default/files/uploads/publications/BC%20Office/2015/04/CCPA_BC_Fa milies_and_Transportation-web-1.pdf

⁷⁰ Canadian Fltness and Llfestyle Research Institute, 2009. Making the Case for Active Transportation. Bulletin
 #3. Ottawa, author. Accessed at http://www.cflri.ca/art_page/142

⁷¹ Levy, Dr. Isra, 2014. Moving Forward on Active Transportation in Ottawa. Report to Ottawa Board of Health. Submitted by Dr. Isra Levy, Medical Officer of Health, November 17, 2014. Accessed at http://ottawa.ca/calendar/ottawa/citycouncil/obh/2014/11-17/ActiveTransportation%20Report.pdf