

# onkwanatiiohskats

SKEN:NEN AKENHNA:KE ONKWATONHNETSHE:RA

## Vibrant Communities

OUR SAFETY AND WELL-BEING PLAN

## Collectivités dynamiques

NOTRE PLAN DE SÉCURITÉ ET DE BIEN ÊTRE

Action Plan 2022-2027

Produced By:  
The Social Development Council of  
Cornwall and Area





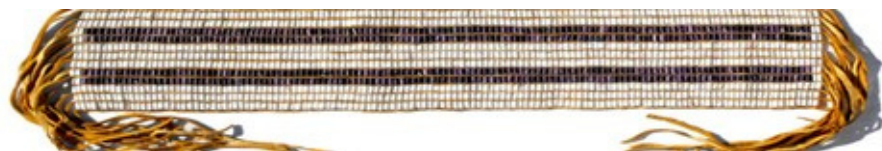
Shé:kon, Bonjour, Hello,

We respectfully acknowledge that the development of the Vibrant Communities; Our Safety and Well-being plan has been created on the traditional land of the Kanieh'keha'ka of the Haudenosaunee.

We reflect on our relationship with all creation as settlers and appreciate the enduring presence and influence of the First People. We recognize the diverse histories and cultures of the First Nation, Inuit and Métis peoples.

We recognize ongoing colonial policies of segregation, violence and oppression that attempt to deprive the Indigenous People of their culture, language, spiritual practices, and community. We strive to be a good ally as we commit to listen with compassion, hold space and act in meaningful ways.

We are Treaty people and believe all Treaties should be lawfully honoured. We embrace and respect the Kuswhenta, which describes the conditions under which the Haudenosaunee welcomed settlers to Turtle Island. The Kuswhenta continues to require all to share the territory and protect the land in the spirit of peace, friendship and respect.



We support the Truth and Reconciliation Commission of Canada: Calls to Action and The United Nations Declaration of Rights to Indigenous Peoples.

We are grateful for being a guest on Turtle Island: the land the First People have and continue to care for.

Skén:nen, Paix, Peace

**The Vibrant Communities and Social Development Council Team**

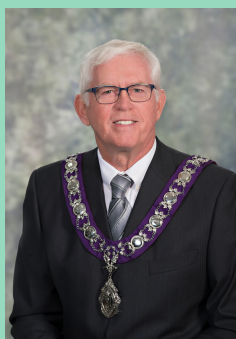
# A Joint Message from our Leaders



**Abram Benedict**  
Grand Chief  
Mohawk Council  
of Akwesasne



**Carma Williams**  
Warden, United  
Counties of  
Stormont, Dundas  
& Glengarry



**Glen Grant**  
Mayor, City of  
Cornwall

As leaders of this diverse region, we are always striving to create a better community for all who live in Akwesasne, Cornwall, and Stormont, Dundas and Glengarry. Vibrant Communities; Our Safety and Well-being Plan was designed to do just that, and ensures no one is left behind and that everyone has equal opportunities to access the services they need in order to live resilient meaningful lives.

The inclusion of the Lived Experience Advisory Committee has been a critical piece of this Plan. Having the voices of some of the most vulnerable people in our region reflected in this Plan makes it truly a plan 'by the community for our community'. These individuals shared their stories of struggle and hardship with the desire to help others. We are grateful for their participation.

This initiative has been a true collaborative effort. We have received input from every sector including non-profit organizations, governments, health services, and business leaders, to name a few. It is proof that we are stronger when we work together for the betterment of our residents.

Although the COVID pandemic delayed the finalization of this Plan, it also brought to light so many key issues that will be addressed during the Plan's implementation. Building a sense of community and breaking social isolation is more important than ever. This Plan will also form an important piece of the pandemic recovery.

We want to thank the team at the Social Development Council of Cornwall and Area, members of the working groups, as well as the Advisory Committee for bringing their passionate leadership and dedication to our community in assisting with the creation of "Our Safety and Well-being Plan".

But the Plan is just the beginning. We look forward to the implementation of these key strategies that we know will positively impact our community at large. We encourage all residents to get engaged and help create more vibrant communities for all.

## **Grand Chief Benedict, Warden Williams & Mayor Grant**

My congratulations to the Social Development Council of Cornwall and area, including its staff, board members, partners, and volunteers, for their work in the development of this plan for our region. These strategies will help support Cornwall, Akwesasne, Stormont, Dundas, and Glengarry as we work to recover from the COVID-19 pandemic – as we move to create communities even more vibrant than those we lived in pre-2020.

Participating directly in these conversations through a meeting with the Lived Experience Advisory Committee has underscored the effective consultation undertaken by the SDC. I look forward to more discussions and more engagement as my Senate colleagues and I propose solutions, too. Together, we can create communities that are vibrant and safe for all.

**Senator Bernadette Clement**





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# Executive Summary

**Vibrant Communities; Our safety and Well-being plan includes 52 strategies with corresponding solutions and action items aimed at improving the quality of life for the residents of Stormont, Dundas and Glengarry, Cornwall and Akwesasne. (SDGCA).**

In 2018 The Social Development Council of Cornwall and Area (SDC) embarked on a collective impact initiative called Vibrant Communities. They engaged policy makers, healthcare workers, non-profit professionals, business owners, people with lived experience and many more from across SDGCA. The objective was to assess the greatest risks and find the biggest issues the communities are faced with. The goal was to then take action collectively and address those largest societal issues, the pillars, with a strong focus on prevention.

**Their 5 pillars, as determined by the community are Mental Health, Health Services, Poverty, Community Safety and Community Well-being**

On January 1, 2019 The Government of Ontario mandated municipalities (single and upper tier) to prepare and adopt a Community Safety and Well-Being plan (CSWB). As part of these legislative changes, municipalities are required to work in partnership with police services, health/mental health, education, community/social services and children/youth services as they undertake the planning process.

The goal of this plan is to achieve the ideal state of a sustainable community where everyone is safe, has a sense of belonging, access to services and where individuals and families are able to meet their needs for education, health care, food, housing, income and social and cultural expression.

With a clear aligned vision, both initiatives became one under the leadership and guidance of the multi-sectoral Advisory Committee and version 1 of the ***Vibrant Communities; Our Safety and Well-Being*** Plan was created. The regional approach to this initiative is key to its future success.

The Social Development Council, with the assistance of the United Way SDG, VC working groups, and in partnership with subject matter experts have finalized a feasibility study for the strategies identified in version 1. An action plan has been created for implementation. Implementation will require the collaborative efforts of governments, agencies local businesses and residents as success cannot be achieved alone. Commitment to leadership, creativity and learning new ways of working together for the betterment of the community will influence the success of the Vibrant-Communities--Our Safety and Well-Being Plan and bring positive and life changing effects to our community

## February 2018

Initial Meeting. Introduce the community to collective impact

## Fall 2018

The Vibrant Communities Members used the survey responses to determine that the pillars would be Mental Health, Access to Health Services and Poverty

## Summer 2019

Focus groups and public engagement took place across SDGCA. Conversations with over 1200 residents to ask about their concerns, ideas and suggestions regarding the 4 pillars.

## Winter 2020

Working groups for each pillar were established to begin the work on the feasibility and implementation/action plan

## November 2020

Working group reconvened as the pandemic heightened the need for this plan. The first task was the feasibility study which began with mapping existing services as it relates to the identified strategies

## April 2021

A Lived Experience Advisory Council was created with 12 individuals with diverse backgrounds who have lived or are living in poverty to advise on our plan.

## Summer 2021

While working on the action plan, a 5th Pillar was created to focus specifically on overall Community Well-being. This will be critical for pandemic recovery.

## Winter 2021

Finalize plan with all necessary approvals with hopes to launch in April 2022

# Project Timeline

## Summer 2018

Conducted a community survey to determine our collective agenda. Over 700 residents from all backgrounds participated to help determine the most important issues in SDGCA.

## Winter/Fall 2019

The Community Safety and Well-Being Plan and Vibrant Communities merge to be a stronger force for change in SDGCA and adds 4th pillar: Community Safety.

## December 2019

Version 1 of our plan was created which included 116 ideas and initiatives that came from public engagement

## March 2020

Pandemic relief became the priority for the SDC

## February 2021

Working groups created a feasibility matrix that weighed each strategy by the following criteria: Level of Community Support, Ease of Implementation, Financial feasibility, Anticipated Level of Use, Economic Impact Priority as determined by working groups and lived experience committee.

## Spring 2021

Working groups met again to begin the brainstorming for the action plan. These meetings helped identify the action items for each strategy digging deeper and creating actionable ideas to achieve each strategy.

## December 2021

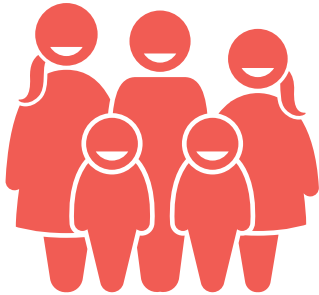
Working groups determined timelines and key partners for each strategy and action item for the action plan.

# Strategies identified as the community's priorities through focus groups and public engagement.



## Mental Health Pillar

- #1** Programs that have a focus on early intervention, prevention and that promote healthy childhood development.
- #2** Ensure families and individuals have access to free counseling and addiction services.
- #3** Break the stigma and raise awareness of mental health and addictions.
- #4** Programs dedicated to children and youth.
- #5** Programs that teach life skills, coping and resiliency to all ages.



- #6** Continue working on becoming a dementia friendly community.
- #7** Knowledge and tools for employers on mental health and mental illness in the workplace.
- #8** Adaptive, accessible, and flexible mental health and addictions service delivery to meet people and their individual needs.
- #9** Provide better accessibility to mental health services in rural communities.
- #10** Continue offering virtual Mental Health Service.
- #11** Peer mentorship or support group programs in person and online around specific themes.



## Health Services Pillar

- #1** Work with existing efforts to attract and retain medical professionals to fully service our communities.
- #2** Workshops and classes dedicated to prevention.
- #3** Opportunities for free access to indoor and outdoor physical activity and equipment.
- #4** Advocate for true Universal Health Care.
- #5** Advocate for extended health coverage for new Canadians.
- #6** Continue offering virtual Health Services.
- #7** Adaptive, accessible and flexible health services delivery to meet people and their individual needs.
- #8** Ensure members of our community have access to transportation in order to attend their medical appointment.



- #9** Work with health care providers to ensure better accessibility in rural communities.
- #10** Advocate for barrier free parking at medical facilities.
- #11** More support for Allied Health Services.
- #12** Educational opportunities to teach individuals about new technologies now being used in health care.



## Poverty Pillar

- #1 Accessible client centered services providing equal consideration and treatment for all clients.
- #2 Advocate for accessibility to basic needs.
- #3 Identify the gaps in services offered to the working poor.
- #4 Ensure adult learners have access to diverse and inclusive learning opportunities
- #5 Adaptive, accessible and flexible social services delivery model to meet people and their individual needs.
- #6 Equip individuals with skills that build resilience.
- #7 Prevention and mentorship programs that can break the cycle of poverty.
- #8 Remove the stigma that is often associated with living below the poverty line.
- #9 Supporting children of low income families.
- #10 Ensure we have adequate housing for all.



- #11 Join a campaign that encourages employers to pay a living wage.



## Community Safety Pillar

- #1 Enhance awareness and promote existing services beyond first response within the Police, Fire, Paramedic services.
- #2 Crime and abuse prevention programs.

- #3 Build trust towards public safety agencies.



- #4 Safety education campaign about the risks associated with social media.
- #5 Public education on cyber crime.
- #6 Support families and individuals in emergency or financial Crisis Situation
- #7 Foster pride in our community and personal responsibility.
- #8 Work with municipalities to examine property standards and focus on increasing the stock of safe and adequate housing.



## Community Well-being Pillar

- #1 Provide better awareness of existing resources to ensure residents are accessing the services they need.
- #2 Engage multiple community agencies to create a community hub.
- #3 Ensure adequate support and services for caregivers and frontline Staff.
- #4 Limit duplication of services.
- #5 Create and enhance public infrastructure and green space that supports a healthy community that is friendly for all.
- #6 Create a community with a culture of volunteerism and giving back.
- #7 A centralized coordination of care.
- #8 Programs for seniors and persons with disabilities living in isolation.
- #9 Build a sense of community and alleviate social Isolation.
- #10 Free or affordable outdoor activities for youth, families and adults.



# Our Story

## Vibrant Community Roundtable

In early 2018, the Social Development Council (SDC) of Cornwall and Area embarked on the Vibrant Communities Journey using the Tamarack Institute for Change's Model for Collective Impact. The then called Vibrant Community Roundtable (VCR) was composed of balanced representation between community leaders from business and non-profit sectors, as well as civic representatives from Akwesasne, Cornwall and the United Counties of Stormont, Dundas (SDG), and Glengarry. The goal of the Vibrant Community Roundtable was to address poverty reduction through systemic issues, brought forward by Vibrant Community Roundtable members, which contribute to complex societal issues like equity, Community development, resilience and community livability.



The initial meeting took place February 7th, 2018. Liz Weaver, Co-CEO of the Tamarack Institute introduced the Collective Impact Framework as a tool for decreasing poverty and shared stories of success from various Canadian cities. Paul Roumeliotis, the Medical Officer of Health and Chief Executive Officer of Eastern Ontario Health Unit presented on local demographics.

Liz Weaver introduced the Vibrant Community Roundtable Members to the key elements of the collective impact framework as a mechanism for advancing community vibrancy. It included examples of communities that are advancing community vibrancy through collective efforts.



# Developing a Common Agenda

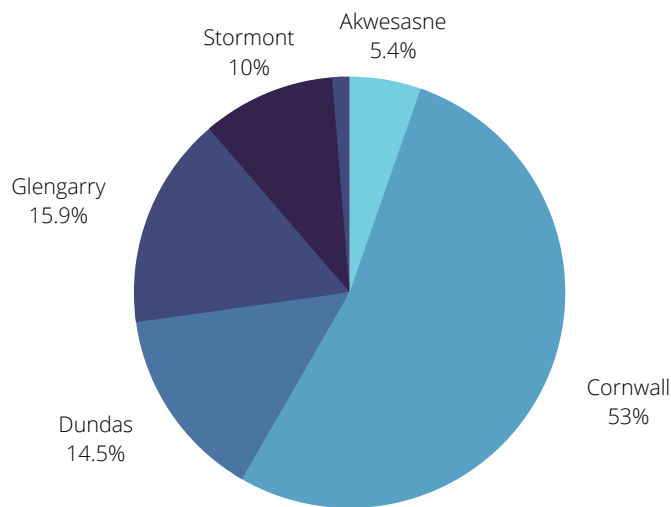
The group reconvened on May 29th 2018 to learn about developing a common agenda. A common agenda is a vision for change shared by community members that focuses on a common understanding of the problem and a joint approach to solving the problem by agreed actions. At the meeting partners discussed other successful collaborative efforts in our community as well as key issues within their sectors and communities and who we need at the table to determine the common agenda. It was decided that the community at large needed to be part of building our goals.

## Community Survey

Over the summer of 2018 the VCR and the SDC undertook a survey asking 3 key questions.

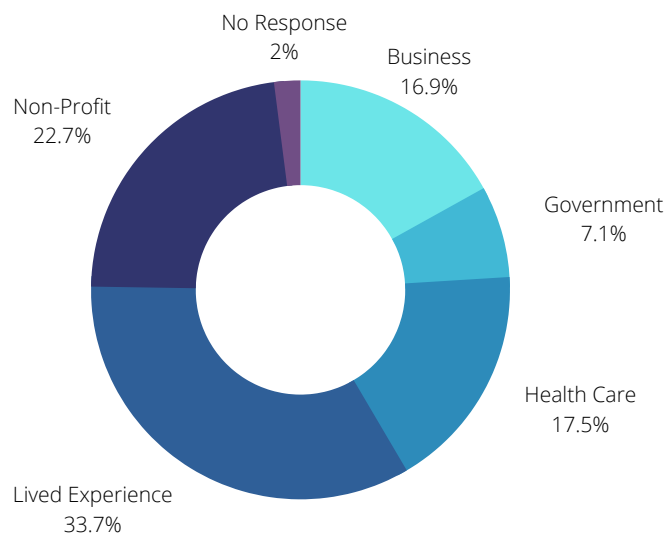
### #1 - What community do you live in?

This seems like a simple question but was key to ensure that the engagement was representative of our community as a whole. For example, when realizing survey responses were lower in one municipality compared with percentage of population across SDGCA dedicated VCR volunteers printed surveys and knocked on doors in said community to ensure equal participation.



### #2 - What option below best represents your situation?

- a. I am a business owner or work in the for-profit industry.
- b. I work or volunteer in the non-profit sector.
- c. I work in the health care sector.
- d. I am a government representative.
- e. I am an individual member of this community with lived experience. (I have faced challenges such as poverty, injustice, or abuse etc)



This was a critical piece of the survey. Feedback from all sectors is required for such an endeavor; however the participation of individuals with lived experience really ensures the VCR has their finger on the pulse of the community's greatest needs. So often plans are created or systems are changed without ever consulting with those who will be most impacted by the changes. Through a partnership with the Cornwall and SDG Human Services Department 33.72% of respondents were individuals with lived experience. The department was conducting their first Homelessness enumeration survey and included the VCR survey questions when meeting members of our community that were either homeless or at risk of homelessness.



### #3 - What 3 issues from the list below are most important to you?

1. Abuse
2. Access to Food (Including Food literacy)
3. Access to Health Services
4. Access to Services (ex: Counseling, Legal Aid, Literacy, Etc)
5. Addictions
6. Community Safety (Policing)
7. Early Childhood Development
8. Education
9. Environment
10. Poverty - Financial Stability
11. Safe Housing
12. Support Networks
13. Transportation
14. Mental Health

When entering the data from the lived experience responses, it became clear how important their participation was to the initiative. Prior to the partnership with Cornwall and SDG Human Services Department, the majority of the responses were from the health and non-profit sector workers and their number one priority was education. Once the lived experience feedback was entered, education dropped to the 4th priority and mental health rose to the top, followed by access to health services and then poverty. This shows us that when you ask individuals that work in the social services sector what it takes to pull someone out of poverty the perceived solution is education, yet when you ask someone who is struggling what is required to help pull them out of poverty, they prioritize addressing their health and mental health before considering financial stability and then education.

With survey results in hand the VCR established their initial 3 pillars; Mental Health, Access to Health Services and Poverty.

The VCR held a meeting on November 29th 2018 to review the survey results and begin the planning process. Members discussed the following questions.

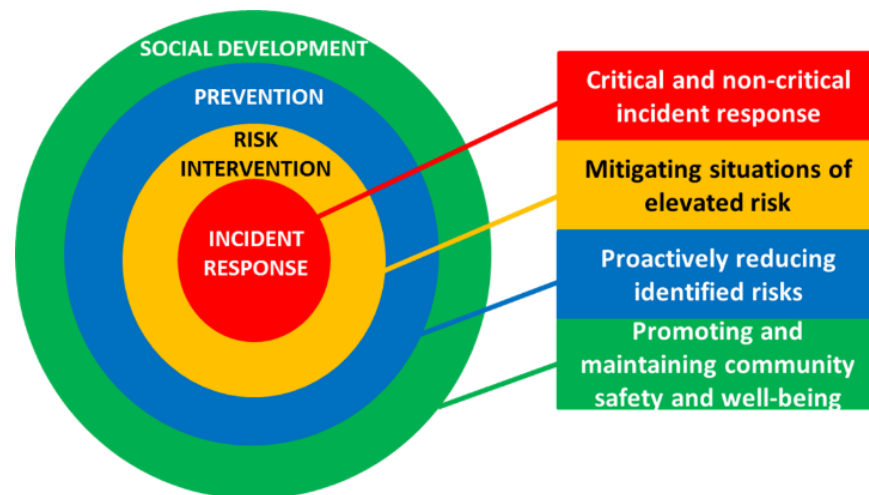
1. What is already being done in our community regarding our 3 priorities?
  2. What are the gaps in our community and what can we as individuals, agencies and VCR do to address them?
  3. How can the Vibrant Community Roundtable continue to be sustainable?
- This was the first step in creating a plan that would focus on prevention.



# Community Safety and Well-Being Plan

On January 1, 2019 The Government of Ontario mandated municipalities (single and upper tier) to prepare and adopt a Community Safety and Well-Being plan (CSWB). As part of these legislative changes, municipalities are required to work in partnership with police services, health/mental health, education, community/social services and children/youth services as they undertake the planning process. The goal of the CSWB plan is to achieve the ideal state of a sustainable community where everyone is safe, has a sense of belonging, access to services and where individuals and families are able to meet their needs for education, health care, food, housing, income and social and cultural expression.

“Community Safety and Well-Being Planning Framework – A Shared Commitment in Ontario” provided a process and principles for planning. This plan includes strategies for regional safety and well-being at four levels of intervention: social development, prevention, risk intervention, and emergency response.



The Cornwall Police Services with the support of Carmen Cousineau were in the very early stages of planning when the SDC became aware of this provincial mandate. As the mandates aligned, it was agreed the CSWB and VC plans would be stronger together. Presentations were made to the United Counties of SDG Council and Mohawk Council of Akwesasne to obtain their support in continuing our collaboration under the Community Safety and Well-Being umbrella. On May 1st, 2019 VCR members agreed to move forward as a joint initiative. The collaboration was rebranded as Vibrant Communities; Our Safety and Well-Being Plan. A logo was created in English, French and Kanieh'keha'ka (Mohawk) to ensure representation of the diversity of Stormont, Dundas, Glengarry, Cornwall and Akwesasne (SDGCA.)

A 4th pillar of Community Safety was added to ensure a true alignment with the provincial plan and a leadership advisory committee was created as per the specifications of the Provincial framework with representation from the following sectors.

- Municipal & First Nations community representation
- Education sector
- Health/mental health sector
- Community/social services sector & children/youth services sector
- Community/social services sector & children/youth services sector
- Custodial services to children/youth
- Police Services
- Community and Non-profit

## Public Engagement

The newly merged initiative launched itself in extensive public engagement to ensure that the plan was for the community and by the community. The first step included a full day of focus groups on each pillar with over 100 people on July 10, 2019 attending both in person and virtually. Each group was dedicated to a specific pillar; mental health, health services, poverty and community safety. The activity began by discussing the root causes followed by a substantial brainstorming session about what could be done to address these root causes as a collective. This brainstorming activity ended with over 700 data points recorded.



Themes (groupings of action items) were created for each pillar with the data collected from the July 10th event. These themes were then the focus of a summer long public engagement activity which was conducted in partnership with focus group members, students and volunteers who attended many public events to meet and speak to people directly about their concerns, ideas and suggestions.



Volunteers and Vibrant Communities members set up in parks, at food banks, public libraries, and many more public spaces to conduct a dot-mocracy exercise where individuals helped prioritize the themes along with identifying possible gaps. The idea behind this particular process was to bring the act of validating themes to the people, in their own spaces and ensure a variety of individuals were consulted. The process was a success, as conversations were held with over 1100 people over the summer of 2019.



## Version 1

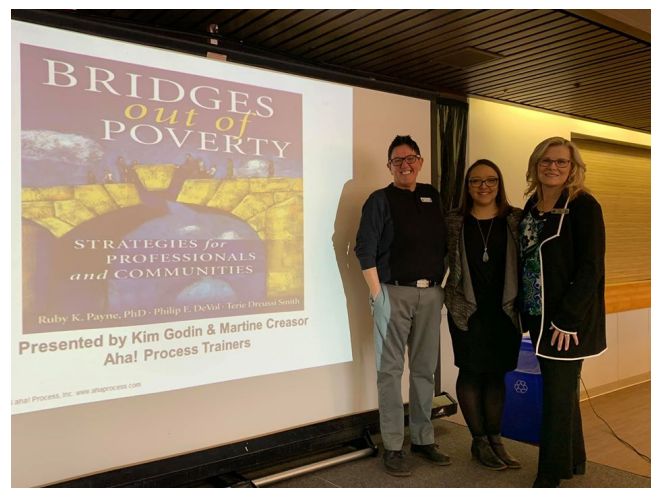
Public engagement results were presented to the Vibrant Communities members at a meeting on October 24, 2019. The findings were streamlined to create Version 1 The pPlan which can be found at <https://sdccornwall.ca/wp-content/uploads/2020/01/Vibrant-Communities-Our-Safety-and-Well-Being-Plan-SDGCA-Jan-2020.pdf>

Version 1 was approved by the CSWB Advisory Committee. It then received approval through a presentation from Mohawk Council of Akwesasne, the United Counties of SDG Council and the City of Cornwall Council in December 2019.

## Working Groups

In early 2020, working groups were created for each pillar to begin developing a feasibility study and an action plan. These working groups met in February and March 2020 to begin the planning process.

The momentum was high. Plans are often created with great intention however rarely make it to creating a plan of action for implementation, but the structure of this plan, provided a sense of ownership by all. To capitalize on the momentum the SDC hosted 'Bridges out of Poverty' on March 11, 2020. Bridges out of Poverty is a one-day workshop that was open to community minded individuals looking to gain knowledge and awareness about the social and economic impact that poverty has on individuals and our community as a whole.



The Bridges model is built on the proven concepts that everyone in a community has a role to play in poverty reduction. It allows for participants to gain a deeper understanding of the challenges and strengths of people living in poverty. This workshop is based on the work of Dr. Ruby Payne, PhD, which will help partner with individuals to create opportunities for success. 140 people attended this important workshop along with many of the working group members.



Days later, on March 17th, Premiere Doug Ford declared a state of emergency for the COVID 19 pandemic. The SDC's priority immediately shifted to join forces with the United Way/Centraide SDG to create and co-chair the Regional Emergency Response Council (RERC). The RERC became a multi-sectoral committee whose purpose was to evaluate and define the community's pressing needs during a time of crisis. Unfortunately, the Community Safety and Well-being plan was paused to focus on the crisis in our community.



Photo Credit - Jason McNamara for Cornwall Living Magazine.



## Feasibility Study

In the early Fall of 2020, situational poverty was on the rise, mental health and access to health services became more critical than ever. It was time to pick up where the working groups had left off. Meetings re-emerged in little boxes on a computer screen.

In November 2020, working groups met to begin the process of a feasibility study. This is when it was first noticed that many of the recommended strategies were already taking place in some capacity in the community. The working groups first step was to identify those programs and initiatives in a service mapping exercise that would help identify the largest gaps. This service map can be found on the SDC's website and will be updated to continue reflecting the services offered in SDGCA.

The working groups created a feasibility matrix to identify the priorities in the plan. A points system was created that weighed each strategy by the following criteria for a total of 100 points.

5 key leaders in each sector were consulted to help determine the Ease of Implementation and Financial Feasibility.

The Feasibility matrix can be found at Appendix A and B.

### Feasibility Matrix Criteria

- Level of Community Support - Determined by the public engagement
- Contribution to all pillars
- Ease of Implementation
- Financial feasibility
- Anticipated Level of Use
- Economic Impact
- Community priority as determined by agencies/working group
- Community priority as determined by lived experience

# Lived Experience Advisory Council

In April 2021, A Lived Experience Advisory Council (LEAC) was created. LEAC is an integral part of the Vibrant Communities Collective Impact Initiative. LEAC members' insight was critical to ensure the plan best reflects the needs of our community.

A safe, judgment free, respectful space was created for members to feel comfortable to share their stories.. Their main objective was to advise the Vibrant Communities Working Groups on the strategies identified in version 1 of the plan and to ensure that identified strategies are relevant to the needs of our community. LEAC brainstormed ideas that are part of the action plan.

12 individuals with lived expertise were recruited and paid a living wage to attend 6 hours of meetings per month. Recruitment ensured that members represented the entire SDGCA community and brought experience from the following diverse groups.

- Racialized people
- Newcomer to Canada
- Persons with disabilities
- Indigenous, metis or inuit people
- LGBTQ+ community
- Seniors
- Youth
- Single parents
- Employed and unemployed individuals
- Francophones

## Action Plan

The following Action Plan was a culmination of multiple brain-storming sessions with the Working Groups and the Lived Experience Advisory Council with hours of support from the team at United Way/Centraide SDG. Discussions took place on every strategy and solutions were identified to achieve the strategy's objective. Each solution was then further developed with action items that can be taken collectively with key partners in the community who have agreed to be part of this implementation. This plan's implementation can only be successful with the participation of the community as a whole, specifically with collaboration with our indigenous partners to ensure implementation takes place with a lens of equity focused on the Truth and Reconciliation Commission of Canada's Calls to Action. The complete action plan can be found in the following pages.

**Social Development Council  
of Cornwall & area**  
*"building stronger communities"*



**Conseil de développement social  
de Cornwall et de la région**  
*"renforcer les communautés"*

This plan was developed by the Social Development Council of Cornwall and Area (SDC). The SDC is a small non-profit organization which has been supporting the community since 2006. Their mission is to collaborate with partners to incubate, connect and strengthen social development enterprises across Cornwall, Stormont, Dundas, Glengarry and Akwesasne. If you would like to get involved with this plan please contact the SDC at [info@sdccornwall.ca](mailto:info@sdccornwall.ca) or 613-930-0211.





# Mental Health Pillar

## Strategy #1

**Programs that have a focus on early intervention, prevention and that promote healthy childhood development.**

Solutions	Supportive details and action items
Collaborating with key partners such as CYMHAC, EOHU and PLEO to inventory existing programs and identify gaps	Promote existing services.
	Ensure information about the Child Welfare Redesign is shared with community agencies
	Ensure there are sufficient support programs for parents (Prenatal, parenting, postpartum depression)
Advocate and support the creation of a Maternity Care Center	Work with the Cornwall Compassion Center to support the development of this project and ensure services are available to residents of Akwesasne.
Promote self-care within parenting skills	Ensure existing programs touch on caring for yourself to provide better care for your child.
<b>Timeline to begin implementation</b>	0 to 6 months
<b>Partners committed to implementation</b>	
Child and Youth Mental Health Advisory Committee	
Child and Youth Mental Health Services - CCH	
Children's Aid Society of SDG	
Cornwall Compassion Center	
EarlyOn	
Eastern Ontario Health Unit	
Koala Place, Child and Youth Advocacy Centre	
ON y va	
Parents' Lifelines of Eastern Ontario	



**Strategy #2**

## Ensure families and individuals have access to free counseling and addiction services.

Solutions	Supportive details and action items
Create a multi-agency communication campaign that is continual and sustainable to promote free services.	Create a comprehensive list and ensure it is communicated to the public and kept updated.
	Advertising services through social media with use of Sponsored ads, Billboards, Radio, Hockey boards, Newspaper ads etc.
	Partner with local students to create a marketing campaign
	Regular email blast to community agencies.
	Promote the use of 211 and other referral and information sharing services
	Promotional materials readily available at pharmacies, Dr's offices and all partnering agencies offices, supermarkets, grocery store
Lobby for more funding to expand free services and build capacity within agencies.	Such as Counseling, crisis intervention, Respite, specialized services for complex needs.
	Lobby to create service agreements between Ontario and Quebec for individuals who reside in Akwesasne and St-Regis Mohawk Tribe.
	Collaborate with multiple agencies to ensure sustainability in train the trainer programs and certification.
Identify gaps in free services and create a multi agency plan to address them across the entire region.	Determine what working groups exist and work with them to identify those gaps rather than duplicating a service.
	Mental Health Desk in public locations like Libraries.
	Lobby insurance companies to have more inclusive and complete coverage.
	Collaborate with multiple agencies to ensure sustainability in train the trainer programs and certification.
	Ensure services are accessible.
<b>Timeline to begin implementation</b>	6 months to a year
<b>Partners committed to implementation</b>	
211 - East Ontario	
1 call 1 click	
Access MHA (Access Mental Health Addictions)	
Connexontario	
Crisis Text Line - 686868	
eMental Health	
Kids Help Line	
Koala Place, Child and Youth Advocacy Centre	

## Break the stigma and raise awareness of mental health and addictions.

Solutions	Supportive details and action items
Create an inventory of existing awareness initiatives.	Promote existing programs and encourage participation
Encourage employers and service providers to include training on mental health in their employee training programs.	Encourage this training to include Mental Health First Aid
Education and training on Mental Health and Addictions	Mental Health 101 workshops offered to the general public. Subjects could include recognizing the signs and symptoms of mental illness, how to recognize trauma or abuse and how trauma affects brain development.
	Find unique and approachable ways and locations to teach the public about mental health. Ex: Comedy show on mental health, Community Fairs, Banquets, Fundraisers, Ted Talks Style.
Provide more opportunities to teach and learn Mental Health First Aid	Apply for training grants to supplement the cost of this course.
Public Advocacy Campaign on Mental Health and Addictions	Testimonials and personal stories from local influential people shared on social media and local media
	Promote and participate in Bell Let's Talk, Mental Health Week, World Suicide Prevention Day and Mental Illness Awareness Week
	Create a campaign targeted to men to break barriers and promote existing services geared to men.
	Host a weekly show on YourTV to build awareness of services
<b>Timeline to begin implementation</b>	6 months to a year
<b>Partners committed to implementation</b>	
Bounce Back	
Canadian Mental Health Association	
Man to Man	
MenTalk	
Mohawk Council of Akwesasne - Department of Health	
Suicide Prevention Coalition	
Your TV Cogeco	

## Programs dedicated to children and youth

Solutions	Supportive details and action items
Work with Cornwall Youth Mental Health Advisory Committee	Help identify gaps and support creating programs to fill gaps.
Promote mentorship opportunities for youth with mental illness.	Use social media to reach youth
Advocate for more counselling in schools.	Work with mental health leads in each school board
	Ensure consistency in the service so youth can depend on it.
	Make sure its private and confidential
Advocate for additional Mental health and Wellness education into school curriculum	Work with mental health leads in each school board
Advocate to create wellness rooms in schools.	A safe space created in a school intended to provide students with an opportunity to focus on reducing stress and anxiety, and the development of healthy coping strategies and self-care
Education to caregiver and parents on specific mental health needs of youth in different age ranges	
<b>Timeline to begin implementation</b>	0 to 6 months
<b>Partners committed to implementation</b>	
Ahkwesahsne Mohawk Board of Education	
Akwasasne Boys and Girls Club	
BGC Cornwall/SDG	
Big Brothers Big Sisters of Cornwall and Area	
Canadian Mental Health Association	
Catholic District School Board of Eastern Ontario	
Child and Youth Mental Health Advisory Committee	
Child and Youth Mental Health Services - CCH	
Conseil des écoles publiques de l'Est de l'Ontario	
Conseil scolaire de district catholique de l'Est ontarien	
Koala Place, Child and Youth Advocacy Centre	
L'équipe psycho sociale	
Ride The Wave	
Suicide Prevention Coalition	
Upper Canada District School Board	
Youth Wellness Hub	

Solutions	Supportive details and action items
Create an inventory of all programs and services currently offered and identify the gaps.	Include in the inventory wellness groups that help developing hobbies, confidence, builds identity, self worth and internal strength.
	Ensure inventory also includes programs that teach healthy habits and life skills to youth and adults. (Cooking, nutrition, exercise, gardening, self-care, stress management, meditation, work life balance, media and digital literacy, healthy relationships, parenting classes, financial literacy, Dialectical Behavior Therapy)
Promote existing workshops and programs	Ensure information is easily accessible and promoted in multiple locations.
	A local wellness app that provides information on community services, activities, group sessions and more.
	Approach St-Lawrence College for a potential partnership to have the app developed by students.
Ensure these programs are affordable and accessible	Promote financial "aid" programs for these services.
Work collaboratively to implement the Suicide Prevention Coalition's Strategic Plan.	
Lobby for resiliency skills to be part of the school curriculum	
<b>Timeline to begin implementation</b>	0 to 6 months
<b>Partners committed to implementation</b>	
Canadian Mental Health Association	
Community Addiction and Mental Health Services - CCH	
Centre de Santé Communautaire de l'Estrie	
Koala Place, Child and Youth Advocacy Centre	
L'équipe psycho sociale	
Seaway Valley Community Health Center	
Transition Cornwall +	
Youth Wellness Hub	

## Strategy #6

# Continue working on becoming a dementia friendly community.

Solutions	Supportive details and action items
Support existing efforts in becoming a dementia friendly community.	Work with the Alzheimer's Society to encourage private, public, and non-profit sectors to become dementia friendly.
Education on dementia and alzheimers	Ensure there is easy access to education in the community on the types of dementia, what to expect and how to behave when someone is going through the stages of dementia.
	Education on physician assisted death and on living wills.
	Working towards not only a dementia friendly community but also a dementia aware community.
<b>Timeline to begin implementation</b>	1 to 2 years
<b>Partners committed to implementation</b>	
Alzheimer Society of Cornwall & District	
Cornwall Community Hospital	
Geriatric Mental Health Services - CCH	
Senior Friendly Committee	

## Strategy #7

# Knowledge and tools for employers on mental health and mental illness in the workplace.

Solutions	Supportive details and action items
Partner with the Chamber of Commerce and Economic Development Departments to offer training to small businesses or self-employed professionals.	Help promote Mental Health Works offered by CMHA.
Ensure employers are promoting available mental health resources through EAP if available.	Encourage employer to go above and beyond the standard package to ensure enhanced quality of care.
Sharing resources on how to build safe, vibrant, and understanding workplaces.	Creating a better work environment ensures people feel valued.
Ensure confidentiality for employees when accessing mental health services	Promote the flexible use of sick or personal days detailed in HR policies.

<b>Timeline to begin implementation</b>	6 months to a year
<b>Partners committed to implementation</b>	
Canadian Mental Health Association	
City of Cornwall - Economic Development	
Cornwall & Area Chamber of Commerce	
Moose Creek Chamber of Commerce	
North Dundas Chamber of Commerce	
North Dundas Economic Development Officer	
North Glengarry Economic Development Officer	
North Stormont Economic Development Officer	
South Dundas Chamber of Commerce	
South Dundas Economic Development Officer (Communication Partner)	
South Glengarry Economic Development Officer	
South Stormont Chamber of Commerce	
South Stormont Economic Development Officer	
United Counties of SDG - Economic Development	

## Strategy #8

## Adaptive, accessible, and flexible mental health and addictions service delivery to meet people and their individual needs.

<b>Solutions</b>	<b>Supportive details and action items</b>
Evaluate the needs for increasing after hours and walk in mental health services.	Work with local agencies to create anonymous surveys to ask clients and potential clients how they believe their mental health services should be delivered.
Encourage agencies to offer home visits for complex cases.	Ensuring safety. Safety audits to be considered if mobile services are developed.
	Find additional funding to allow the growth and sustainability of home visits
Consider Transportation in the definition of accessible	Free or affordable transportation to and from appointments
Encourage the use of social service workers as a valid option within the mental health team.	Lobby for funding that is specific to supportive council.
	This can alleviate the current pressures on mental health professionals.
Encourage local Police Department to respond to mental health calls out of uniform	Refer to communities such as Ottawa who have already implemented this procedure

Work with partners in Akwesasne	Ensure the delivery of all services take into consideration the cultural needs of our indigenous community
<b>Timeline to begin implementation</b>	1 to 2 years
<b>Partners committed to implementation</b>	
Akwesasne Mohawk Police	
Community Addictions and Mental Health Services	
Cornwall Community Police	
Help Addiction and Mental Health recovery Services Cornwall	
Ontario Provincial Police - Stormont Dundas and Glengarry Detachment	
Social Development Council of Cornwall and Area	
Youth Wellness Hub	

### Strategy #9

## Provide better accessibility to mental health and addictions services in rural communities.

Solutions	Supportive details and action items
Create satellite offices in the Counties and Akwesasne for mental health services.	Consider the land crisis in Akwesasne when potentially developing locations.
	Potential locations: Libraries, virtual space, community centers
Encourage the use of social service workers as a valid option within the mental health team.	This can alleviate the current pressures on mental health professionals.
Encourage agencies to offer home visits for complex cases.	Ensuring safety. Safety audits to be considered if mobile services are developed.
	Find additional funding to allow the growth and sustainability of home visits
Advocate for better internet connection in rural communities	
Program with a focus on mental health in the farming community.	Promote existing Services
	Find gaps in existing services.
	Facilitate peer support groups
	Ensure the counselors are empathetic to realities of farming
	Break the stigma of mental illness within the farming community. Join forces with established groups like the junior farmers.
<b>Timeline to begin implementation</b>	2 to 4 years



Partners committed to implementation
Canadian Mental Health Association
Carefor
CCH: Community Addiction and Mental Health Services
Child and Youth Mental Health Services - CCH
Inspire Community Support Services
L'équipe psycho sociale
Social Development Council of Cornwall and Area
Youth Wellness Hub

## Strategy #10

## Continue offering virtual Mental Health Service.

Solutions	Supportive details and action items
Identify a new base model of service delivery.	Inventory the progress made in virtual programming
	Online and phone mental health services such as telemedicine, e-Counselling, services by text or social media, and online support groups.
Continue innovating new models of service	Such as Text and apps
	Ensure all virtual services are accessible to individuals with varying disabilities.
Ensure innovation doesn't create gaps due to lack to digital literacy and access to technology	Advocate for better internet connection in rural communities
	Research the outcomes of virtual vs. in person service delivery to ensure that it is as effective.
	Adapt serviced to the clients needs such as accommodating with a phone call.
<b>Timeline to begin implementation</b>	Ongoing
Partners committed to implementation	
Social Development Council of Cornwall and Area	

## Peer mentorship or support group programs in person and online around specific themes.

Solutions	Supportive details and action items
Inventory the existing programs to help identify the gaps.	Ensure we have service for individuals who have suffered a miscarriage, stillbirth, and Chronic pain.
	Ensure we have support programs for those living with AIDS and HIV
Create local support programs specifically for PTSD.	Work with trauma therapists to provide appropriate training to mental health workers.
	Offer a variety of programs including exposure therapy and Virtual reality
	Explore Eye Movement Desensitization and Reprocessing (EMDR) Therapy
	Awareness campaign for the general public on emotional support animals and how to access a support animal.
<b>Timeline to begin implementation</b>	2 to 4 years
<b>Partners committed to implementation</b>	
Canadian Mental Health Association	
Centre de Santé Communautaire de l'Estrie	
Community Addiction and Mental Health Services - CCH	
EarlyOn	
Inspire Community Support Services	
L'équipe psycho sociale	
Man to Man	
MenTalk	
Mohawk Council of Akwesasne - Department of Health	
ON y va	
Seaway Valley Community Health Center	
Youth Wellness Hub	

# Health Services Pillar

## Strategy #1

**Work with existing efforts to attract and retain medical professionals to fully service our communities.**

Solutions	Supportive details and action items
Collaborate with local municipal initiatives in their recruitment efforts.	Write letters of support from Vibrant Communities and its members.
	Encourage the inclusion of nurse practitioners in recruitment efforts.
	Advocate expanding the program to include non-local medical professionals. (Debt forgiveness/Re-education for out of country qualification)
	Explore best practices in recruitment efforts from other communities including relocation support (Housing etc.)
Create a positive community attraction campaign.	Engage with Tourism and Economic Development Departments
Attract doctors to join Vibrant Communities to inform our decisions making.	Engage with Community Health Networks and organizations to help recruit doctors for our working groups
Ensure increased telemedicine options continue post-pandemic.	Telemedicine opens opportunities for access to specialists however can create barriers for some.
Build trust for Nurse Practitioners	Public Education on the benefits of using a nurse practitioner.
Advocate for changed in the Canadian health care recertification	Lobby for flexibility and affordable recertification for medical professionals from outside of Canada.
Identify the scope of medical professionals to meet the needs of our communities	The need reaches beyond general practitioners. (Nurse Practitioners, Pediatricians, Psychiatrists, etc.)
Identify the need by public surveys	
Advocate for cross jurisdiction licensing exemptions in Akwesasne	
<b>Timeline to begin implementation</b>	0 to 6 months
<b>Partners committed to implementation</b>	
Akwesasne Mohawk Board of Education - Child Care	
City of Cornwall - Economic Development	

Cornwall Community Hospital
Cornwall Community Hospital Foundation
Cornwall SDG Human Services - Child Care
Hôpital Glengarry Memorial Hospital
Mohawk Council Of Akwesasne
Mohawk Council of Akwesasne - Department of Health
United Counties of SDG
United Counties of SDG - Economic Development
Winchester District Memorial Hospital

## Strategy #2

## Workshops and classes dedicated to prevention.

Solutions	Supportive details and action items
Create a complete list of programs that is available and ensure this list is updated regularly and shared with our community.	Programs can include nutrition, healthy lifestyles etc.
Identify the gaps and work with community partners to create a plan to fill the gaps.	Work with local health providers to implement new programs.
Create free fitness workshops for vulnerable populations.	Ensure there is inclusion of workshops that do not require equipment
	Walking groups with accountability.
<b>Timeline to begin implementation</b>	0 to 6 months
<b>Partners committed to implementation</b>	
211	
Centre de Santé Communautaire de l'Estrie	
Eastern Ontario Health Unit	
Seaway Valley Community health Center	
Social Development Council of Cornwall and Area	

## Opportunities for free access to indoor and outdoor physical activity and equipment.

Solutions	Supportive details and action items
Promote what already exists in our community by partnering with existing infrastructure and programs.	Learn from the lending libraries in Stormont and Dundas.
Provide education on the use of free/outdoor exercise equipment.	Provide educational classes on equipment use.
Create a lending library for outdoor recreation equipment.	Consult with local libraries.
Ensure there are no financial barriers to access recreational activities in SDGCA	Provide passes to outdoor activities through libraries.
Support the implementation of local municipal recreation master plans.	Ensure they are implemented with a lens of equity and accessibility
<b>Timeline to begin implementation</b>	1 to 2 years
<b>Partners committed to implementation</b>	
City of Cornwall - Parks and Recreation	
Cornwall Public Library	
Eastern Ontario Health Unit	
Mohawk Council of Akwesasne - Department of Child & Family Services	
Mohawk Council Of Akwesasne	
North Dundas Parks and Recreation	
North Glengarry Parks and Recreation	
North Stormont Parks and Recreation	
Raisin Region Conservation Authority	
SDG Library	
South Dundas Parks and Recreation	
South Glengarry Parks and Recreation	
South Nation Conservation Authority	
South Stormont Parks and Recreation	

## Advocate for true Universal Health Care

Solutions	Supportive details and action items
Lobby to expand Universal Health Care	To include eye and dental and essential medical care, medication, and supplies
Create an assessment-based emergency fund for medical care to fill in the gap for those in need.	Ensure they have accessed all over supports (ex Trillium etc.)
	See Community Safety Pillar Strategy #6 Support families and individuals in emergency or financial Crisis Situation
Leverage existing advocacy campaigns to lobby system changes at the provincial and federal level.	Advocate for doctors to receive the same compensation regardless of how the patient is paying. (Ex ODSP/OW vs insurance)
Provide System navigation through the existing supports by collaborating with 211	Ensure 211 is updated with all local resource and educate doctors the benefits of 211
Ensure clients can advocate for themselves or have someone that can advocate for them.	Work with existing programs to mentor individuals to become advocates (ie: PLEO, Senior Clubs, Caregiver Center)
Encourage and equip residents to be able to vote in local elections and be engaged with their local candidate and the issues.	Facilitate the conversation between residents and candidates regarding issues related to health care.
Create a lending library for medical equipment.	Consult with Dundas County Hospice on how we can expand this program to the community as a whole.
Promote funding programs or affordable alternatives for medical equipment and care.	Promote the existing Free Clinics and Healthy Smiles
	Ensure the process is easy and accessible
<b>Timeline to begin implementation</b>	0 to 6 months
<b>Partners committed to implementation</b>	
Social Development Council of Cornwall and Area	

## Strategy #5

### Advocate for extended health coverage for new Canadians.

Solutions	Supportive details and action items
Join existing provincial and federal lobbying campaign	Ensure the necessary medical care for new Canadians goes beyond emergency services.
Promote what services are available to newcomers.	Work with EOTB and ACFO to connect them with the appropriate health related resources that service newcomers.
	Ensure this is shared in multiple languages.
Survey newcomers to identify gaps.	To identify what was missing when they first arrived and accessed health services
<b>Timeline to begin implementation</b>	6 months to a year
<b>Partners committed to implementation</b>	
L'Association des communautés francophones de l'Ontario, de Stormont, Dundas et Glengarry	
Le Réseau de soutien à l'immigration francophone de l'Est de l'Ontario	
Newcomer Employment Welcome Services	
Social Development Council of Cornwall and Area	
TR Leger Immigrant Services	

## Strategy #6

### Continue offering virtual Health Services.

Solutions	Supportive details and action items
Identify a new base model of service delivery.	Inventory the progress made in virtual programming
	Online and phone health services such as telemedicine, e-Counselling, services by text or social media, and online support groups.
Continue innovating new models of service	Such as Text and apps
	Ensure all virtual services are accessible to individuals with varying disabilities.
Ensure innovation doesn't create gaps due to lack of digital literacy and access to technology	Advocate for better internet connection in rural communities
	Adapt services to the clients needs such as accommodating with a phone call.
<b>Timeline to begin implementation</b>	Ongoing
<b>Partners committed to implementation</b>	
Social Development Council of Cornwall and Area	



## Adaptive, accessible, and flexible health services delivery to meet people and their individual needs.

Solutions	Supportive details and action items
Survey clients and the community on when, where, and how they would like to access their health services to identify gaps.	Creating flexibility can remove the stigma among youth when they are absent school for a medical appointment
Advocacy for additional funding for non-profit health service agencies.	Funding is required for additional days, receptions, cleaners etc.
Encourage employers to allow their staff to create their own flexible schedules.	This might be difficult to implement in unionized workplaces.
Encourage the use of nurse practitioners as a valid option within the health team.	This can alleviate the current pressures and needs for doctors
Advocate for a 24-hour walk clinic	Can alleviate the demand in emergency rooms
Better communicate existing services that are flexible	Ensure websites and 211 have updated information on service hours and programs
	Education on the capacity of a pharmacist
Encourage agencies to offer home visits for complex cases.	Ensuring safety. Safety audits to be considered if mobile services are developed.
	Find additional funding to allow the growth and sustainability of home visits
Consider Transportation in the definition of accessible	Free or affordable transportation to and from appointments
Work with partners in Akwesasne	Ensure the delivery of all services take into consideration the cultural needs of our indigenous community
<b>Timeline to begin implementation</b>	1 to 2 years
<b>Partners committed to implementation</b>	
Eastern Ontario Health Unit	
Social Development Council of Cornwall and Area	

## Ensure members of our community have access to transportation in order to attend their medical appointment.

Solutions	Supportive details and action items
Promote existing transportation programs and services.	Inventory existing programs and promote within the communities.
Work with existing transportation providers such as transit, taxi and more to expand sustainable shuttle service for seniors or those with disabilities	Advocate for changes to Handi-Transit to ensure it is easy to use. Review transit master plan. Public Transportation across SDGCA and out of region for medical appointments
Create a program with community volunteers that are not tied to a specific agency but can be accessed by all clients.	Volunteers could also help clients fill out forms. Ensure appropriate vehicles (Accessible) adequate insurance etc. Create a tool kit for agencies on how to engage volunteers for transportation Volunteers would receive appropriate training
<b>Timeline to begin implementation</b>	6 months to a year
<b>Partners committed to implementation</b>	
Carefor	
Cornwall Transit	
J. W. MacIntosh Community Support Services	
Maxville Manor	
Volunteer Administrators Network	

## Strategy #9

### Work with health care providers to ensure better accessibility in rural communities.

Solutions	Supportive details and action items
Explore mobile health services and home visits.	Create community Satellite offices in all municipalities which will mitigate the costs of travel. (Possible locations: Pharmacies, libraries, etc.)
	Considering the difficulties to implement a traveling service, prioritize this for the most complex needs
See Health Services Strategy #8 for transportation related action items.	
<b>Timeline to begin implementation</b>	1 to 2 years
<b>Partners committed to implementation</b>	
EarlyOn	
J. W. MacIntosh Community Support Services	
ON y va	
Social Development Council of Cornwall and Area	

## Strategy #10

### Advocate for barrier free parking at medical facilities.

Solutions	Supportive details and action items
Advocate for further funding for medical facilities	Funding to replace the financial loss of potentially removing parking fees.
Provide parking passes	Provide free parking passes to vulnerable people through a donation system.
	Discount for agencies to buy multiple passes to share with their clients
Encourage the creation of more accessible parking spaces.	Work with medical facilities to increase capacity for handicap parking spaces.
<b>Timeline to begin implementation</b>	6 months to a year
<b>Partners committed to implementation</b>	
Cornwall Community Hospital	
Hôpital Glengarry Memorial Hospital	
Social Development Council of Cornwall and Area	
Winchester District Memorial Hospital	

## Strategy #11

### More support for Allied Health Services.

Solutions	Supportive details and action items
Create inventory of existing services.	Ensure inventory is made public.
Advocate for more funding for the client and the professionals	Such as Nutritionist etc.
Work with the Ontario Health Teams in our area	Support their proposal to the provincial government.
Educate local employers on expanded benefit coverage	Includes mental health and self care expenses.
Encourage health professionals to adopt a sliding scale for fees.	This would provide the opportunity for low income individuals to access these services
<b>Timeline to begin implementation</b>	1 to 2 years
<b>Partners committed to implementation</b>	
Centre de Santé Communautaire de l'Estrie	
Eastern Ontario Health Unit	
Home and Community Care Support Services Champlain	
Seaway Valley Community health Center	

## Strategy #12

### Educational opportunities to teach individuals about new technologies now being used in health care.

Solutions	Supportive details and action items
Collaborate with literacy providers such as Tri-County Literacy Council and Moi j'apprends	Promote existing digital literacy programs
	Explore further funding opportunities for literacy providers to offer more specific and specialized courses. (Personal care devices, clinic check-in computers, etc.)
Work with Seniors clubs and Carefor to deliver such training.	Ensure accessibility to training (ex: Access to internet, tech literacy, Visual impairment etc.)
<b>Timeline to begin implementation</b>	6 months to a year
<b>Partners committed to implementation</b>	
Carefor	
Centre Charles-Emile Claude	
GIAG Adult Day Program	
J. W. MacIntosh Community Support Services	
Moi j'apprends	
Senior Friendly Committee	
Tri-County Literacy Council	

# Poverty Pillar

## Strategy #1

**Accessible client centered services providing equal consideration and treatment for all clients.**

Solutions	Supportive details and action items
Lobby Provincial Government for system changes.	Engage with Political Candidates during elections
	Advocate for the ability to save and build equity while on social assistance
	More discretion or flexibility for case workers. Learn from the flexibility Akwesasne has with income assistance.
	Smoother transition between programs (ex: moving from ODSP to CPP)
Engage with people with lived experience to identify gaps.	Work collaboratively to address gaps in our community.
Offer training opportunities to grow empathy in the front-line sector.	Offer more Equity, Diversity and Inclusion training to agencies including Akwesasne lead culture sensitivity and services delivery training.
Connect with national programs on credit creation for social assistance recipients.	Use these resources to advocate with community, workers and recipients.
Work with partners in Akwesasne	Ensure the delivery of all services take into consideration the cultural needs of our indigenous community
<b>Timeline to begin implementation</b>	0 to 6 months
<b>Partners committed to implementation</b>	
Cornwall SDG Human Services	
CUREA - Coalition for Unity, Respect, Equity\Equality	
Mohawk Council Of Akwesasne - Community and Social Services	
Mohawk Council Of Akwesasne - Community Support Program	
Roy McMurtry Legal Clinic	
Seaway Valley Community health Center	
Social Development Council of Cornwall and Area	

**Advocate for accessibility to basic needs.**

<b>Solutions</b>	<b>Supportive details and action items</b>
Advocate for free or affordable education and training.	Advocate for affordable trades training.
	Join existing campaign such as Ontario Federation of Students and provide input on provincial planning tables provinces
Fight to end food insecurity	Revive Food insecurity working group with EOHU.
	Join existing campaign such Food Secure Canada, Feed Ontario, Second Harvest Canada, Sustain Ontario and provide input on provincial planning tables provinces
	Continue working to implement Community Gardens
	Create a local strategy to tackle Food Waste
	Support Green Food Boxes
Advocate for a Basic Income/Living wage	Advocate for fair increases to ODSP and OW that includes clothing allowance, moving expenses. first and last month's rent etc.
	Ensure it reflects continuous increase in cost of living.
Identify service gaps in transportation including our rural community	Work with Cornwall Transit for affordable passes.
	Advocate for free transit
	Create a plan to address transportation in the counties and Akwesasne.
<b>Timeline to begin implementation</b>	0 to 6 months
<b>Partners committed to implementation</b>	
Beyond 21	
Canadian Mental Health Association	
Carefor	
Centre 105	
Centre de Santé Communautaire de l'Estrie	
Community Food Share	
Eastern Ontario Health Unit	
Food Banks United	
Glengarry Interagency Group	
House of Lazarus	
J. W. MacIntosh Community Support Services	
Job Zone d'emploi	
L'Association des communautés francophones de l'Ontario, de Stormont, Dundas et Glengarry	
Le Réseau de soutien à l'immigration francophone de l'Est de l'Ontario	

Mohawk Council Of Akwesasne
Newcomer Employment Welcome Services
Saint Vincent de Paul Alexandria Food Bank
Saint Vincent de Paul Cornwall
Salvation Army Cornwall
Seaway Valley Community health Center
Senator
Social Development Council of Cornwall and Area
The Agape Centre
TR Leger Immigrant Services
Transition Cornwall +
Tri-County Literacy Council
United Way of SDG
Upper Canada Leger Centre for Education and Training

### Strategy #3

## Identify the gaps in services offered to the working poor.

Solutions	Supportive details and action items
Engage with existing agencies and people with lived experience to identify the gaps	Work as a collective to find solutions to gaps in services offered to working people living in poverty.
Fight against Precarious work to ensure employees are receiving benefits.	Contract, seasonal, part time
Advocate for affordable daycare	Review current income guidelines to ensure they reflect the cost of living increase.
Lobby to create a cap on Payday loans.	Support Hon. Pierrette Ringuette with her Bill to Amend the criminal code.
Transportation programs from Akwesasne to connect individuals with employment.	Work in collaboration with local employers and services providers to help fill job opportunities
Encourage local employers to re-evaluate hiring policies regarding individuals with criminal records	Education targeted towards employers about discriminatory policies and options when considering a candidate with a record.
<b>Timeline to begin implementation</b>	0 to 6 months

### Partners committed to implementation

City of Cornwall - Economic Development
Cornwall & Area Chamber of Commerce
Cornwall SDG Human Services - Child Care
Employability Network
Le Réseau de soutien à l'immigration francophone de l'Est de l'Ontario
Local Immigration Partnership
Moose Creek Chamber of Commerce
North Dundas Economic Development Officer
North Glengarry Economic Development Officer
North Stormont Economic Development Officer
Roy McMurtry Legal Clinic
Senator Bernadette Clement
Social Development Council of Cornwall and Area
South Dundas Chamber of Commerce
South Dundas Economic Development Officer (Communication Partner)
South Glengarry Economic Development Officer
South Stormont Chamber of Commerce
South Stormont Economic Development Officer
United Counties of SDG - Economic Development

### Strategy #4

## Ensure adult learners have access to diverse and inclusive learning opportunities

Solutions	Supportive details and action items
Continued marketing campaigns to promote existing programs with different learning styles	Education resource list. One location that promotes all adult education options from literacy to university.
	Promote and expand existing literacy training and employment preparation programs.
Remove barriers to adult learners	Ensure Internet access and technology is accessible
	Adult guidance counselling and mentorship to support educational goals and career changes.



Promote the use of Second Career	Advocate for fewer restrictions and recognize being a stay at home parent as a first career.
Empower people to consider entrepreneurship programs	Promote local organizations that support new business owners.
<b>Timeline to begin implementation</b>	6 months to a year
<b>Partners committed to implementation</b>	
ACCFutures	
Akwesasne Mohawk Board of Education	
Akwesasne Career and Employment Support Services	
Contact North Cornwall	
Cornwall Business Enterprise Centre	
Glengarry Interagency Group	
Job Zone d'emploi	
Mohawk Council Of Akwesasne - Community Support Program	
Moi j'apprends	
St-Lawrence College	
TR Leger School of Adult, Alternative and Continuing Education	
Tri-County Literacy Council	

### Strategy #5

## Adaptive, accessible, and flexible social services delivery model to meet people and their individual needs.

Solutions	Supportive details and action items
Reduce barriers to accessing services	Encourage municipalities and institutions to provide free internet access to ensure there are no barriers to accessing services.
	Create satellite offices across SDG and Akwesasne
	Encourage agencies to offer flexible hours
	Offer free or affordable transportation
	Ensure clients have access to technology.
	Ensure services are accessible to all abilities
	Encourage the use of Translation services.
Work with 211 or ConnexOntario to help identify gaps in how to provide services.	Use data to fill gaps in service delivery.

<b>Timeline to begin implementation</b>	On going
<b>Partners committed to implantation</b>	
CUREA - Coalition for Unity, Respect, Equity\Equality	
Diversity Cornwall	
Social Development Council of Cornwall and Area	
Volunteer Administrators Network	

## Strategy #6

## Equip individuals with skills that build resilience.

Solutions	Supportive details and action items
Create a community wide communication and promotional strategy for existing programs.	Create an inventory of existing programs that includes following subjects: Food prep, budget, laundry, sex education, independence, financial Literacy, good consumer practices, resiliency, healthy relationship, Stress Management, conflict resolution skills, conflict resolution skills, anger management, anger management, Emotion regulation, home ownership and maintenance, Coping mechanism, self compassion self awareness. forgiveness etc.
Fill the gaps identified when inventory is created.	Ensure culturally appropriate accessible workshops are delivered by existing partners.
	Ensure this starts in the school systems with age-appropriate topics at every step of their development.
<b>Timeline to begin implementation</b>	1 to 2 years
<b>Partners committed to implantation</b>	
Bereaved Families of Ontario-Cornwall & Area	
Canadian Mental Health Association	
Centre de Santé Communautaire de l'Estrie	
Children's Aid Society of SDG	
Maison Baldwin House	
Maison Interlude House	
Moi j'apprends	
Mohawk Council Of Akwesasne - Housing, Infrastructure and Environment	
Naomi's Family Resource Centre	
Roy McMurtry Legal Clinic	
Sexual Assault Support Services Stormont, Dundas, Glengarry & Akwesasne	

Seaway Valley Community health Center

Tri-County Literacy Council

Strategy #7

## Prevention and mentorship programs that can break the cycle of poverty.

Solutions	Supportive details and action items
Support the implementation of mentorship programs	Support the implementation of Circles across SDG, Cornwall and Akwesasne
	Encourage Big Brothers Big Sisters to launch a local Mpower program for youth 15 to 24 (Transition into adulthood)
	Help promote the recruitment of BIGs with Big Brothers Big Sisters
Create opportunities to expand your social network and community.	A coordinated effort to connect people to the appropriate faith-based groups and clubs to build connections.
Opportunities to teach financial skills	Life financial planning and Budgeting.
<b>Timeline to begin implementation</b>	1 to 2 years
<b>Partners committed to implantation</b>	
Akwesasne Boys and Girls Club	
BGC Cornwall/SDG	
Big Brothers Big Sisters of Cornwall and Area	
Circles - Cornwall SDG Human Services	
Cornwall Interfaith Partnership	
Moi j'apprends	
Tri-County Literacy Council	
Youth Wellness Hub	

## Remove the stigma that is often associated with living below the poverty line.

Solutions	Supportive details and action items
Education campaign targeted to employers	Education and information for employers on the reality of poverty and the barriers it may cause employees.
Public education campaigns about the reality of living in poverty	Support the planning of and participation in events like the Homelessness Maze, Do the Math Challenge, the Poverty Game, Hunger Awareness Challenge etc Encourage employers, government officials, business leaders, doctors, lawyers, CEOs to participate.
	Community campaign with real stories of living in poverty that the community can relate to.
	Workshops on the reality of poverty to the general public, business community, front line staff, government officials, elected officials, community leaders etc.
<b>Timeline to begin implementation</b>	0 to 6 months
<b>Partners committed to implantation</b>	
Akwesasne Career and Employment Support Services	
City of Cornwall - Economic Development	
Cornwall & Area Chamber of Commerce	
Cornwall & District Labour Council	
Eastern Ontario Training Board	
Employability Network	
Glengarry Interagency Group	
Job Zone d'emploi	
Le Réseau de soutien à l'immigration francophone de l'Est de l'Ontario	
Local Immigration Partnership	
Moose Creek Chamber of Commerce	
North Dundas Economic Development Officer	
North Glengarry Economic Development Officer	
North Stormont Economic Development Officer	
Social Development Council of Cornwall and Area	
South Dundas Chamber of Commerce	
South Dundas Economic Development Officer (Communication Partner)	
South Glengarry Economic Development Officer	
South Stormont Chamber of Commerce	

South Stormont Economic Development Officer
United Counties of SDG - Economic Development
United Way of SDG

## Strategy #9

## Supporting children of low-income families.

Solutions	Supportive details and action items
Promote existing programs supporting youth and child development.	Support existing breakfast and snack programs
	Promote homework help programs and tutoring
Advocate for financial assistance for specific needs	Financial assistance for after school and homework programs
	Allowance for clothing and supplies for children going back to school.
	Affordable/free extra curricular activities
Advocate for a better learning environment for all.	Advocate for smaller class sizes, more EAs etc.
<b>Timeline to begin implementation</b>	2 to 4 years
<b>Partners committed to implantation</b>	
Ahkwesahsne Mohawk Board of Education	
Akwasasne Boys and Girls Club	
BGC Cornwall/SDG	
Big Brothers Big Sisters of Cornwall and Area	
Catholic District School Board of Eastern Ontario	
Federation of University Women Cornwall & District	
Child and Youth Mental Health Services - CCH - By providing free publicly funded services.	
Conseil des écoles publiques de l'Est de l'Ontario	
Conseil scolaire de district catholique de l'Est ontarien	
Cornwall Compassion Center	
Cornwall Interfaith Partnership	
EarlyOn	
Eastern Ontario Health Unit	
Elementary Teachers' Federation of Ontario	
ON y va	
Upper Canada District School Board	

Solutions	Supportive details and action items
Work with existing efforts lead by municipalities	Support the Mayor's task force on housing and United Counties Housing Plan
	Lobby for implementation once plans are in place.
	Support the implementation of City of Cornwall and United Counties of Stormont Dundas & Glengarry Housing Revitalization Plan
	Encourage the development of incentive programs for landowners to donate property for social housing
Advocate to simplify the process to apply for housing supports.	Work with social and housing services to advocate for necessary changes at the provincial level.
Advocate for more supportive housing for those with specific needs	Such as mental health illnesses, disabilities, or other health needs.
	Ensure adequate supportive devices (Lighting, visual doorbell/fire alarm, etc.)
Advocate for the creation of an emergency shelter and transitional housing.	Work with existing efforts by the local non-profit community.
<b>Timeline to begin implementation</b>	0 to 6 months
<b>Partners committed to implantation</b>	
Akwesasne Family Wellness Program	
Akwesasne Healing Center	
Canadian Mental Health Association	
CCH: Community Addiction and Mental Health Services	
City of Cornwall - Mayors Task Force on Housing	
Cornwall SDG Human Services - Housing	
Habitat for Humanity	
House of Lazarus	
Maison Baldwin House	
Maison Interlude House	
Mohawk Council Of Akwesasne	
Mohawk Council Of Akwesasne - Housing, Infrastructure and Environment	
Naomi's Family Resource Centre	
Regional Emergency Strategic Response Council	
Seaway Valley Community health Center	
Social Development Council of Cornwall and Area	

Township of North Dundas
Township of North Glengarry
Township of North Stormont
Township of South Dundas
Township of South Glengarry
Township of South Stormont
United Counties of SDG
United Way of SDG





Solutions	Supportive details and action items
Create a local living wage campaign in collaboration with the provincial movement	Celebrate employers who already pay a living Work with chambers of commerce.
Education and awareness on the economic impact of living wage.	Use local media sources and social media
<b>Timeline to begin implementation</b>	6 months to a year
<b>Partners committed to implantation</b>	
Cornwall & Area Chamber of Commerce	
Cornwall & District Labour Council	
Eastern Ontario Health Unit	
House of Lazarus	
Living Wage Ontario	
Moose Creek Chamber of Commerce	
Social Development Council of Cornwall and Area	
South Dundas Chamber of Commerce	
South Stormont Chamber of Commerce	
United Way of SDG	

# Community Safety Pillar

## Strategy #1

**Enhance awareness and promote existing services beyond first response within the Police, Fire, Paramedic services.**

Solutions	Supportive details and action items
Create an inventory of the peripheral services offered by Police, Fire, and Paramedic services.	Ensure inventory is public and kept update on a regular basis
Facilitate a community marketing campaign about the identified services.	Showcase services on a regular basis in local media.
	Consistent Media advertisement
	Contribute to Community Calendars
	Work with community organizations to share and promote each other's services.
Ensure our frontline is aware of the existing services in order to refer their clients.	Ensure all programs are updated on 211
	Communicate with service providers through coordinated newsletters and emails.
Work with partners in Akwesasne	Ensure the delivery of all services take into consideration the cultural needs of our indigenous community
<b>Timeline to begin implementation</b>	Ongoing
<b>Partners committed to implementation</b>	
ACSDG Situation Table	
Community Action Network Against Abuse	
Koala Place, Child and Youth Advocacy Centre	
Social Development Council of Cornwall and Area	
Victim Services of S.D.G. & A	



## Strategy #2

## Support and expand crime and abuse prevention programs.

Solutions	Supportive details and action items
Inventory existing programs, ensure there is sufficient communication and support and identify gaps.	Update the service mapping to include all programs Helps with promotions to encourage participation and to prevent duplication
Crime and abuse prevention program for those at risk of offending.	Offers ways to relieve frustrations such as Smash Rooms, Art programs etc. Find a community partner with the capacity to run Caring Dads Helping individuals address past trauma. Create Peer support for adults who are at risk of offending
Crime Prevention program for youth 25 and under.	Create a flow chart for parents that can help them identify what to do when a child is in crisis. Ensure we have sufficient after school programs for youth such as BGC and Youth Wellness Hub Facilitate the creation of an outreach program to youth by Ensure health and wellness activities that support prevention in youth and young adults are in place by working with partner like the Youth Wellness Hub and many other organizations already providing these activities. Teach resiliency skills to kids in schools, (ex: therapist on site, meditation area, smash room, sensory room etc.) Ensure support for families of kids in crisis. Create crisis beds for youth in SDG
Support and help expand Vulnerable Sector Mobile Acute Response Team (VSMART) with the Cornwall Police Services and the Mobile Crisis Response Team with the SDG OPP	Advocate for financial support to expand Educate the community about these programs. Support the creation of a program with the Akwesasne Mohawk Police
Continue to collect good and usable statistics and data for our region.	Use data to make informed decisions
Ongoing support for the local Situation Table.	Ensuring frontline workers are aware of how to access the Situation Table for their clients. Ensure Situation Table has adequate support to meet the needs of our community
Encourage the creation of an Integrated Harm Reduction Strategy	Education on addiction, prevention and how to identify addiction Provide NARCAN training to targeted populations



	Education on the reality of addictions to foster empathy.
	Build capacity in programming for mental health and addictions including first responders.
	Lobby for the creation of safe injection sites
Programs for potential offender of domestic violence	Ensuring this subject is included in the school curriculum about healthy relationships and consent.
	Offer opportunities for emotional training at younger ages
	Explore expanding the Getting Along Together (GAT) programs offered at the Akwesasne Mohawk School across schools in SDG and Cornwall.
	Explore reinstating Paths to Change
Support Neighbourhood watch programs to ensure community safety for all residents.	Provide targeted training to groups of individuals on what to watch for regarding potential crime and proper reporting structure. Ex: Dog Walker, crossing guards, park animators., taxi Driver and municipal staff.
	Community training on the proper reporting structure and what to do when they see a broken window, vandalism etc
	Work with By-law offices to coordinate effective Neighbourhood watch programs. Prone safety and discourage vigilantism
	<b>Encourage municipalities to instal blue light emergency phones in strategic locations</b>
	Ensure to have Personal Safety as an element when implementing the housing registry if approved.
	Learn from the program developed in Akwesasne.
	Support firefighters home visit assessments to identify households in need.
<b>Timeline to begin implementation</b>	1 to 2 years
<b>Partners committed to implementation</b>	
ACSDG Situation Table	
Akwesasne Mohawk Police	
Children's Aid Society of SDG	
City of Cornwall	
Collaborative Justice Program	
Cornwall Community Police	
Inspire Community Support Services	
Koala Place, Child and Youth Advocacy Centre	
Laurencrest Youth Services Inc.	



Maison Baldwin House
Maison Interlude House
Mohawk Council Of Akwesasne
Mohawk Council of Akwesasne - Department of Child & Family Services
Naomi's Family Resource Centre
Ontario Provincial Police - Stormont Dundas and Glengarry Detachment
Probation and Parole
Roy McMurtry Legal Clinic
Township of North Dundas
Township of North Glengarry
Township of North Stormont
Township of South Dundas
Township of South Glengarry
Township of South Stormont
United Counties of SDG
Victim Services of S.D.G. & A
Youth Justice Services





**Build trust towards public safety agencies.**

<b>Solutions</b>	<b>Supportive details and action items</b>
Coordinate community events to engage residents and youth to meet our emergency teams and encourage an open dialogue.	Continue and encourage activities such as Touch a Truck and "Tickets" for kids caught doing good deeds
	Mobile Meet and Greets or Open Houses between emergency service providers and residents
Encourage the presence of Public Safety agencies in schools	Presence beyond emergency situations to build relationships with youth.
Expand on existing training for EMS and Firefighter on Mental Health response.	Including Non-Crisis Intervention training.
Police, EMS and Fire involvement in community events	Encourage our public safety agencies to volunteer at community events.
<b>Timeline to begin implementation</b>	<b>1 to 2 years</b>
<b>Partners committed to implementation</b>	
Akwasasne Mohawk Police	
Cornwall Community Police	
Cornwall SDG Paramedic Services	
North Dundas Fire Department	
North Glengarry Fire Services	
North Stormont Fire Department	
Ontario Provincial Police - Stormont Dundas and Glengarry Detachment	
South Dundas Fire & Emergency Services	
South Stormont Fire and Rescue	
The Cornwall Fire Service	
Township of South Glengarry Fire Services	
Victim Services of S.D.G. & A	



## Safety education campaign about the risks associated with social media.

Solutions	Supportive details and action items
Ensure schools are providing proper training to children and teens.	Education can be done in collaboration with local police services.
Educate parents and guardians on the reality and the risks of social media and the correlations to mental health	Provide information on how algorithms work.
	Investigate more about the research done by DR. Cheng at CHEO regarding screen time
Lobby for laws that create safer online structures.	Becoming liable for the content you produce online such as expressions of bullying.
<b>Timeline to begin implementation</b>	Ongoing
Partners committed to implementation	
Ahkwesahsne Mohawk Board of Education	
Akwasasne Mohawk Police	
Catholic District School Board of Eastern Ontario	
Catholic District School Board of Eastern Ontario, Parent Involvement Committee	
Catholic District School Board of Eastern Ontario, Special Education Advisory Committee	
Conseil des écoles publiques de l'Est de l'Ontario	
Conseil scolaire de district catholique de l'Est ontarien	
Conseil scolaire de district catholique de l'Est ontarien, Comité de participation des parents	
Cornwall Community Police	
Koala Place, Child and Youth Advocacy Centre	
Ontario Provincial Police - Stormont Dundas and Glengarry Detachment	
Upper Canada District School Board	
Victim Services of S.D.G. & A	



## Public education on cyber crime.

Solutions	Supportive details and action items
Provide age specific training to ensure seniors are aware of the potential risks.	Work with senior clubs and retirement homes.
Provide public education on the different kinds of cyber crimes.	Topics can include Human trafficking, Identity theft, child luring, etc.
<b>Timeline to begin implementation</b>	Ongoing
Partners committed to implementation	
Akwesasne Mohawk Police	
Catholic District School Board of Eastern Ontario, Parent Involvement Committee	
Catholic District School Board of Eastern Ontario, Special Education Advisory Committee	
Conseil scolaire de district catholique de l'Est ontarien, Comité de participation des parents	
Cornwall Community Police	
Koala Place, Child and Youth Advocacy Centre	
Ontario Provincial Police - Stormont Dundas and Glengarry Detachment	
Seaway Valley Crime Stoppers	
Victim Services of S.D.G. & A	



## Support families and individuals in emergency or financial crisis situation.

Solutions	Supportive details and action items
Create a Community Emergency Resource Fund	Continue existing funding partnership with CANAA
	Explore other funding opportunities to continue the Emergency fund that was initiated by the Regional Emergency Response Council.
	Create a checklist with all other funding sources to ensure families and individuals have exceeded all other available options.
	Create an application process that does not set strict criteria and funding parameters
<b>Timeline to begin implementation</b>	6 months to a year
<b>Partners committed to implementation</b>	
ACSDG Situation Table	
Community Action Network Against Abuse	
Cornwall SDG Human Services	
House of Lazarus	
Koala Place, Child and Youth Advocacy Centre	
Mohawk Council Of Akwesasne - Community and Social Services	
Mohawk Council Of Akwesasne - Community Support Program	
Social Development Council of Cornwall and Area	
United Way of SDG	
Victim Services of S.D.G. & A	



Solutions	Supportive details and action items
Encourage placemaking and beautification projects	These projects can lower crime rates and attract people which creates an informal but effective community surveillance system.
A community wide positive communications strategy	Communicate the great things happening in our communities (Through social media, apps etc.)
	Encourage the sharing of positive news and positive imagery. Support news outlets that are already doing so (Local Seeker).
	Community Champion to lead positivity campaigns that spotlight programs and people in our community Ex: Possibly the use of a Mascot.
	Encourage all municipalities to create videos like Street Level.
<b>Timeline to begin implementation</b>	1 to 2 years
<b>Partners committed to implementation</b>	
City of Cornwall	
Cornwall & Area Chamber of Commerce	
Downtown Cornwall BIA	
ExperienCity Project	
Mohawk Council Of Akwesasne	
Moose Creek Chamber of Commerce	
North Dundas Chamber of Commerce	
South Dundas Chamber of Commerce	
South Stormont Chamber of Commerce	
Township of North Dundas	
Township of North Glengarry	
Township of North Stormont	
Township of South Dundas	
Township of South Glengarry	
Township of South Stormont	
Transition Cornwall +	
United Counties of SDG	





## Strategy #8

# Work with municipalities to examine property standards and focus on increasing the stock of safe and adequate housing.

Solutions	Supportive details and action items
A public education campaign for the community regarding property standards.	Sharing information on property standards and how to report an infraction.
Support the implementation of a Rental Licensing Registry in all municipalities.	Work with by-law departments, landlords and tenants to ensure the program is beneficial for all.
Advocating for a shelter to address homelessness.	Work with existing efforts.
Work with the Human Services Department to ensure new builds and existing housing locations provide a positive quality of life for residents.	Advocate that all new housing development include Air Conditioning
	Ensure new builds are developed with a climate friendly lens.
	Advocate for access to Wi-Fi in housing developments.
Work to ensure proper loans are available for renovation to homeowners in Akwesasne.	Advocate to make loans available to landlords and property owners. (Loans are currently only available if there is an open mortgage on the home)
<b>Timeline to begin implementation</b>	Ongoing
<b>Partners committed to implementation</b>	
Akwesasne Healing Center	
City of Cornwall - Building & By-Law Division	
Cornwall SDG Human Services - Housing	
House of Lazarus	
Mohawk Council Of Akwesasne	
Mohawk Council Of Akwesasne - Housing, Infrastructure and Environment	
North Dundas Fire Department	
North Glengarry Fire Services	
North Stormont Fire Department	
Roy McMurtry Legal Clinic	
Social Development Council of Cornwall and Area	
South Dundas Fire & Emergency Services	
South Stormont Fire and Rescue	
The Cornwall Fire Service	
Township of North Dundas - By-law Enforcement Department	
Township of North Glengarry - Building, By law and Planning Department	
Township of North Stormont - By-Law Enforcement	



Township of South Dundas - By-Law Enforcement
Township of South Glengarry
Township of South Glengarry Fire Services
Township of South Stormont
United Way of SDG
Victim Services of S.D.G. & A



# Community Well-Being Pillar

## Strategy #1

**Provide better awareness of existing resources to ensure residents are accessing the services they need.**

Solutions	Supportive details and action items
Promote the use of 211 in our community	Work with 211 to ensure they have the resources needed to ensure continued promotion of their services
	Support the development of a 211 app
	Encourage all agencies to update their 211 info when prompted.
	Request that all service agencies and non-profits include information about 211 in their voicemail and hold music.
	Work with 211 to ensure the service is available to all residents in Akwesasne which includes engaging service providers to add their information to the 211 database.
	Accessible Community communication strategy to ensure everyone is aware of 211 (Include the business community, local media, service sector, College, and schools etc.)
Work with Francophone agencies.	Ensure promotion and delivery of services is bilingual.
<b>Timeline to begin implementation</b>	0 to 6 months
<b>Partners committed to implementation</b>	
211	
L'Association des communautés francophones de l'Ontario, de Stormont, Dundas et Glengarry	
Social Development Council of Cornwall and Area	
United Way of SDG	



## Engage multiple community agencies to create a community hub.

Solutions	Supportive details and action items
Collaborate with community agencies to identify shared space and resource opportunities that are not necessary under the same roof.	Such as boardroom spaces, office space.
Identify a lead in the community to implement such a space	Create an inclusive space for all organization and agencies that ensures a seamless transfer of clients between agencies
	Engage the business community
<b>Timeline to begin implementation</b>	6 months to a year
Partners committed to implementation	
Ahkwesahsne Mohawk Board of Education	
Catholic District School Board of Eastern Ontario	
Conseil des écoles publiques de l'Est de l'Ontario	
Conseil scolaire de district catholique de l'Est ontarien	
L'Association des communautés francophones de l'Ontario, de Stormont, Dundas et Glengarry	
Le Réseau de soutien à l'immigration francophone de l'Est de l'Ontario	
Social Development Council of Cornwall and Area	
Upper Canada District School Board	



## Ensure adequate support and services for caregivers and frontline staff.

Solutions	Supportive details and action items
Identify possible gaps in caregiver support services and create a plan to address them.	Connect with the CHC Caregiver committee to support this action item.
	Collaborate with the Champlain wide Caregiver Strategy
Promote existing services for caregivers and frontline staff.	Promote Ontario Caregiver Organization and Embrace
	Support Family Caregiver Centre at CHC in post covid reopening
Work to address the staffing shortage in the health and service sector.	Lobby provincial government to increase wages for healthcare professionals.
	Provide access to burnout avoidance training and Vicarious Trauma for frontline.
	Promote self care opportunities for front line and caregivers
<b>Timeline to begin implementation</b>	0 to 6 months
<b>Partners committed to implementation</b>	
Cornwall Community Hospital	
Eastern Ontario Caregiver Strategy	
Eastern Ontario Training Board	
Employability Network	
Social Development Council of Cornwall and Area	
United Way of SDG	



## Strategy #4

### Limit duplication of services.

Solutions	Supportive details and action items
Support more community partnerships with	A cohesive communication strategy that encourages better links between programs and services
	Create a local Non-profit network that shares information, meets annually to learn about each other's services, builds capacity in shared training and celebrate the achievements of sector
Using current networks, committees, and working groups to identify emerging needs.	Work collectively to address them while ensuring there is no duplication in the sector.
<b>Timeline to begin implementation</b>	1 to 2 years
<b>Partners committed to implementation</b>	
Social Development Council of Cornwall and Area	
United Way of SDG	

## Strategy #5

### Create and enhance public infrastructure and green space that supports a healthy community that is friendly for all.

Solutions	Supportive details and action items
Work with municipalities	Bring community events to social housing neighbourhoods like Touch a truck, or literacy classes.
	Encourage municipalities to implement bicycle friendly and walkable communities for all ages and abilities.
	Support implementation of the Waterfront master plan
	Support the development of the Port Lands
	Ensure that all new Community Housing includes community space and green space that respects youth and seniors
Ensure accessibility to recreation services	Support implementation of the Recreation master plans
	Ensure access to transportation
Support Placemaking opportunities	Create outdoor gathering spaces beyond picnic tables such as public chess tables
	Create free accessible indoor gathering space for the winter
<b>Timeline to begin implementation</b>	2 to 4 years
<b>Partners committed to implementation</b>	
ACCFutures	





City of Cornwall
City of Cornwall - Parks and Recreation
Cornwall & District Horticultural Society
Cornwall SDG Human Services - Housing
Eastern Ontario Health Unit
ExperienCity Project
Mohawk Council Of Akwesasne
North Dundas Parks and Recreation
North Glengarry Parks and Recreation
North Stormont Parks and Recreation
South Dundas Parks and Recreation
South Glengarry Parks and Recreation
South Stormont Parks and Recreation
Township of North Dundas
Township of North Glengarry
Township of North Stormont
Township of South Dundas
Township of South Glengarry
Township of South Stormont
Transition Cornwall +
United Counties of SDG
Your Arts Council Cornwall & The Counties



## Create a community with a culture of volunteerism and giving back.

Solutions	Supportive details and action items
Promote and grow the Volunteer Administrator Network	Volunteering provides more opportunity for people to build qualifications and experiences for work.
	Creating a shared volunteer database for both the agencies and volunteers.
	Create a shared training for volunteers to streamline the process of volunteer onboarding.
	Bridge the non-profit sector with local chambers of commerce to recognize volunteerism.
	Education on Vulnerable sector police check and liability.
Address gaps in volunteer opportunities	Work with youth and young adult to ensure we are valuing the skill sets and needs of younger volunteers
<b>Timeline to begin implementation</b>	2 to 4 years
<b>Partners committed to implementation</b>	
United Way of SDG	
Volunteer Administrators Network	



## A centralized coordination of care.

Solutions	Supportive details and action items
Include more of the necessary people in the circle of care.	Explore the creation of an advocates network for individuals in need who do not have an adequate support system. Advocacy office.
Ensure that frontline staff are aware of the Situation Table.	Communication strategy to front line workers
Create an inventory of services available to support individuals.	Identify gaps in the support for those who need help filling out forms and application process and promote existing supports
Ensure better communication within the circle of care.	Identify who is responsible for regular follow ups to ensure no one falls through the cracks.
	Ensure doctors have access to each other. This could regulate the proper medication.
	Care conference
<b>Timeline to begin implementation</b>	1 to 2 years
<b>Partners committed to implementation</b>	
ACSDG Situation Table	
Cornwall Community Hospital	
Hôpital Glengarry Memorial Hospital	
Social Development Council of Cornwall and Area	
United Way of SDG	
Winchester District Memorial Hospital	



## Programs for seniors and persons with disabilities living in isolation.

Solutions	Supportive details and action items
Create an inventory of existing programs	Promote existing programs
Work with the Senior Friendly Community committee	Support the implementation of the Senior Friendly Community Implementation Plan.
	Fill gaps in services and ensure we have programs such as home visit and check ins, a call-a-day, aging in place, and supportive home care programs.
Improve transportation services for seniors.	Education on how to use handi-transit
Encourage programs that reduce isolation.	Promote existing programs like the Shoebox Gift initiative, Adopt a Grandparent, Befriending for seniors, Seniors on Wheels
	Connecting seniors and youth to learn from each other, build empathy and respect towards our elders.
Explore specific isolation issues for seniors living in the counties and Akwesasne	Identify gaps and create a plan as a community to address the needs.
<b>Timeline to begin implementation</b>	6 months to a year
<b>Partners committed to implementation</b>	
Alzheimer Society of Cornwall & District	
Beyond 21	
Carefor	
Carefor Health & Community Services - Glengarry Outreach Lan-Char Centre	
Carefor Nor-Dun Seniors' Support Centre	
Carefor North Stor Support Centre	
Carefor South Stormont Support Centre	
Centre Charles-Emile Claude	
Community Living Dundas County	
Community Living Glengarry	
Community Living Stormont County	
Cornwall Senior Citizens Club - Branch 353	
Cornwall Transit	
Encore Education Centre	
Geriatric Mental Health Services - CCH	



GIAG Adult Day Program
Glen Stor Dun Lodge Community Outreach
Glengarry Outreach Rendez-Vous Centre (Carefor Health & Community Services)
Home and Community Care Support Services Champlain
J. W. MacIntosh Community Support Services
Maxville Manor
Seaway Senior Citizens Club
Seaway Valley Community health Center
Senior Friendly Committee
Social Development Council of Cornwall and Area



**Build a sense of community and alleviate social Isolation.**

Solutions	Supportive details and action items
Encourage placemaking opportunities	Identify key neighbourhoods in which to begin these initiatives
Identify organization or individual to organize and lead activities	Event can include block parties, free outdoor gatherings and group activities such as free yoga in the park, Conversation clubs, Newcomer meet and greets and Clothing Swaps
Identify existing initiative and promote to the general public	Involve faith-based organizations
	Encourage expanding meet me on Main Street to include more communities
Organize an annual event to connect people with services and organizations in our communities	Booths can include service clubs, recreation clubs, volunteer opportunities, mental health services etc.
<b>Timeline to begin implementation</b>	1 to 2 years
<b>Partners committed to implementation</b>	
City of Cornwall	
Cornwall Interfaith Partnership	
ExperienCity Project	
Mohawk Council of Akwesasne - Department of Child & Family Services	
Service Club Council	
Social Development Council of Cornwall and Area	
Township of North Dundas	
Township of North Glengarry	
Township of North Stormont	
Township of South Dundas	
Township of South Glengarry	
Township of South Stormont	
Transition Cornwall +	
United Counties of SDG	



## Free or affordable outdoor activities for youth, families, and adults.

Solutions	Supportive details and action items
Create an inventory of existing programs	Promote existing programs
Identify gaps in current service offerings and accessibility to programs.	Find partners to help fill gaps in programs such as Lending library of equipment, recreation programs, summer camps etc.
	Partner with existing affordable programs to ensure they are being accessed by the vulnerable population
	Seek funding to support working families in accessing affordable programs
	Ensure that transportation is not a barrier to access programs
	Support municipalities in implementing their Recreation master plans
<b>Timeline to begin implementation</b>	1 to 2 years
<b>Partners committed to implementation</b>	
Akwasasne Boys and Girls Club	
BGC Cornwall/SDG	
Big Brothers Big Sisters of Cornwall and Area	
Children's Aid Society of SDG	
City of Cornwall	
City of Cornwall - Parks and Recreation	
Cornwall Public Library	
EarlyOn	
Koala Place, Child and Youth Advocacy Centre	
Mohawk Council of Akwasasne - Department of Child & Family Services	
Mohawk Council Of Akwasasne	
Native North American Travelling College	
North Dundas Parks and Recreation	
North Glengarry Parks and Recreation	
North Stormont Parks and Recreation	
ON y va	
Raisin Region Conservation Authority	
SDG Library	





South Dundas Parks and Recreation
South Glengarry Parks and Recreation
South Nation Conservation Authority
South Stormont Parks and Recreation
Township of North Dundas
Township of North Glengarry
Township of North Stormont
Township of South Dundas
Township of South Glengarry
Township of South Stormont
United Counties of SDG





## **Appendix A - Feasibility Matrix Scoring Definition**

### **Level of Community Support:**

During public engagement residents were asked to vote for their top 3 priorities in each pillar. A score out of 20 was determined by the total number of votes.

### **Contribution to more than 1 pillar:**

- 1 Pillar = 0%,
- 2 Pillar = 5%,
- 3 Pillar = 10%,
- 4 Pillar = 15%

### **Ease of Implementation:**

- Easy/Quick = 15 points
- Moderate/Average = 10 points
- Challenging/Slow = 5 points

### **Financial feasibility**

- No funding required = 10 points
- Easily accessible funding = 5 points
- Requires additional funding = 0 points

### **Anticipated Level of Use**

- Universal Service = 10 points
- Some Criteria = 5 points
- Specific Clientele = 0 points

### **Community priority as determined by agencies/working group**

- High priority = 10 points
- Medium priority = 5 points
- Low Priority = 0 points

### **Community priority as determined by lived experience**

- High priority = 10 points
- Medium priority = 5 points
- Low Priority = 0 points

### **Abbreviations**

- MH = Mental Health Pillar
- HS = Health Services Pillar
- PO = Poverty Pillar
- CS = Community Safety Pillar
- CW = Community Wellbeing Pillar

Strategies		Level of Community Support	Contribution to more than 1 pillar	Ease of Implementation	Financial feasibility	Anticipated Level of Use	Economic Impact	Community priority as determined by agencies/working group	Community priority as determined by lived experience	Total points out of 100
HS.1	Work with existing efforts to attract and retain medical professionals to fully service our communities	20.0	0	15	10	10	10	10	10	85.0
MH.1	Programs that have a focus on early intervention, prevention and that promote healthy childhood development.	9.3	15	15	10	5	10	10	10	84.3
PO.1	Accessible client centered services providing equal consideration and treatment for all clients.	11.2	10	15	10	10	5	10	10	81.2
MH.2	Ensure families and individuals have access to free counseling and addiction services.	10.6	12.5	12.5	10	10	5	10	10	80.6
HS.2	Workshops and classes dedicated to prevention.	10.2	15	15	10	10	0	10	10	80.2
CW.1	Provide better awareness of existing resources to ensure residents are accessing the services they need.	6.5	15	15	10	10	5	7.5	10	79.0
MH.3	Break the stigma and raise awareness of mental health and addictions.	13.8	5	15	10	10	5	10.0	10	78.8
CS.1	Enhance awareness and promote existing services beyond first response within the Police, Fire, Paramedic services.	10.2	15	15	10	10	5	0	10	75.2
MH.4	Programs dedicated to children and youth	9.3	10	15	10	5	10	5	10	74.3
PO.2	Advocate for accessibility to basic needs.	11.2	10	15	0	5	10	10	10	71.2
PO.3	Identify the gaps in services offered to the working poor.	10.9	10	10	10	5	5	10	10	70.9
MH.5	Programs that teach life skills, coping and resiliency to all ages.	10.4	10	12.5	5	10	5	7.5	10	70.4
HS.3	Opportunities for free access to indoor and outdoor physical activity and equipment.	10.2	5	15	10	10	0	10	10	70.2
CW.2	Engage multiple community agencies to create a community hub.	5.0	15	15	10	10	5	0	10	70.0
MH.6	Continue working on becoming a dementia friendly community.	13.8	0	15	10	10	5	5	10	68.8
MH.7	Knowledge and tool for employers on mental health and mental illness in the workplace.	13.8	0	15	10	5	10	10	5	68.8
HS.4	Advocate for true Universal Health Care	13.0	5	15	5	5	5	10	10	68.0
CW.3	Ensure adequate support and services for caregivers and frontline Staff.	8.9	7.5	15	10	5	0	10	10	66.4
PO.4	Ensure adult learners have access to diverse and inclusive learning opportunities	11.1	0	15	5	10	10	5	10	66.1
MH.8	Adaptive, accessible, and flexible mental health and addictions service delivery to meet people and their individual needs.	9.5	10	10	0	10	5	10	10	64.5
CW.4	Limit duplication of services.	4.0	15	10	10	10	5	5	5	64.0
HS.5	Advocate for extended health coverage for new Canadians.	13.6	10	5	10	0	5	10	10	63.6
HS.6	Continue offering virtual Health Services.	13.6	10	10	10	10	5	0	5	63.6
HS.7	Adaptive, accessible and flexible health services delivery to meet people and their individual needs.	13.6	10	10	0	10	5	5	10	63.6

CW.5	Create and enhance public infrastructure and green space that supports a healthy community that is friendly for all.	7.9	10	10	0	10	10	5	10	62.9
PO.5	Adaptive, accessible and flexible social services delivery model to meet people and their individual needs.	6.7	10	15	0	10	5	5	10	61.7
HS.8	Ensure members of our community have access to transportation in order to attend their medical appointment.	6.5	10	10	10	5	0	10	10	61.5
CS.2	Support and expand crime and abuse prevention programs.	13.1	5	10	0	7.5	5	10	10	60.6
CS.3	Build trust towards public safety agencies	10.2	10	15	5	10	0	0	10	60.2
MH.9	Provide better accessibility to mental health and addictions services in rural communities.	9.5	10	10	0	5	5	10	10	59.5
PO.6	Equipe individuals with skills that build resilience	9.3	5	10	0	10	5	10	10	59.3
PO.7	Prevention and mentorship programs that can break the cycle of poverty.	9.3	15	5	0	5	5	10	10	59.3
CW.6	Create a community with a culture of volunteerism and giving back.	8.8	5	10	5	10	5	5	10	58.8
HS.9	Work with health care provide to ensure better accessibility in rural communities.	13.6	10	10	0	5	5	5	10	58.6
CS.4	Safety education campaign about the risks associated with social media.	13.1	0	15	10	10	0	5	5	58.1
PO.8	Remove the stigma that is often associated with living below the poverty line.	7.1	0	10	5	10	5	10	10	57.1
HS.10	Advocate for barrier free parking at medical facilities.	6.5	0	10	10	10	5	5	10	56.5
CW.7	A centralized coordination of care.	4.7	5	10	5	10	0	10	10	54.7
MH.10	Continue offering virtual Mental Health Service	9.5	10	10	0	10	5	5	5	54.5
PO.9	Supporting children of low income families.	9.3	0	15	5	5	5	5	10	54.3
MH.11	Peer mentorship or support group programs in person and online around specific themes.	9.3	0	15	10	5	5	0	10	54.3
PO.10	Ensure we have adequate housing for all	8.7	5	5	0	5	10	10	10	53.7
CW.8	Programs for seniors and persons with disabilities living in isolation	8.2	5	10	5	5	0	10	10	53.2
CW.9	Build a sense of community and alleviate social Isolation	7.9	10	10	5	10	0	0	10	52.9
CW.10	Free or affordable outdoor activities for youth, families and adults.	7.9	10	10	0	10	5	0	10	52.9
PO.11	Join a campaign that encourage employers to pay a living wage.	11.2	0	10	0	5	10	5	10	51.2
CS.5	Public education on cyber crime.	5.8	0	15	5	10	5	10		50.8
HS.11	More support for Allied Health Services	10.2	0	10	0	10	0	10	10	50.2
CS.6	Support families and individuals in emergency or financial Crisis Situation	9.0	0	10	0	5	5	10	10	49.0
CS.7	Foster pride in our community and personal responsibility.	8.4	0	10	7.5	10	0	5	7.5	48.4
CS.8	Work with municipalities to examine property standards and focus on increasing the stock of safe and adequate housing.	11.3	5	0	0	5	5	10	10	46.3
HS.12	Educational opportunities to teach individuals about new technologies now being used in health care.	3.4	0	10	5	5	0	5	10	38.4

## Appendix C

Map of Akwesasne, Cornwall, Stormont, Dundas and Glengarry.

