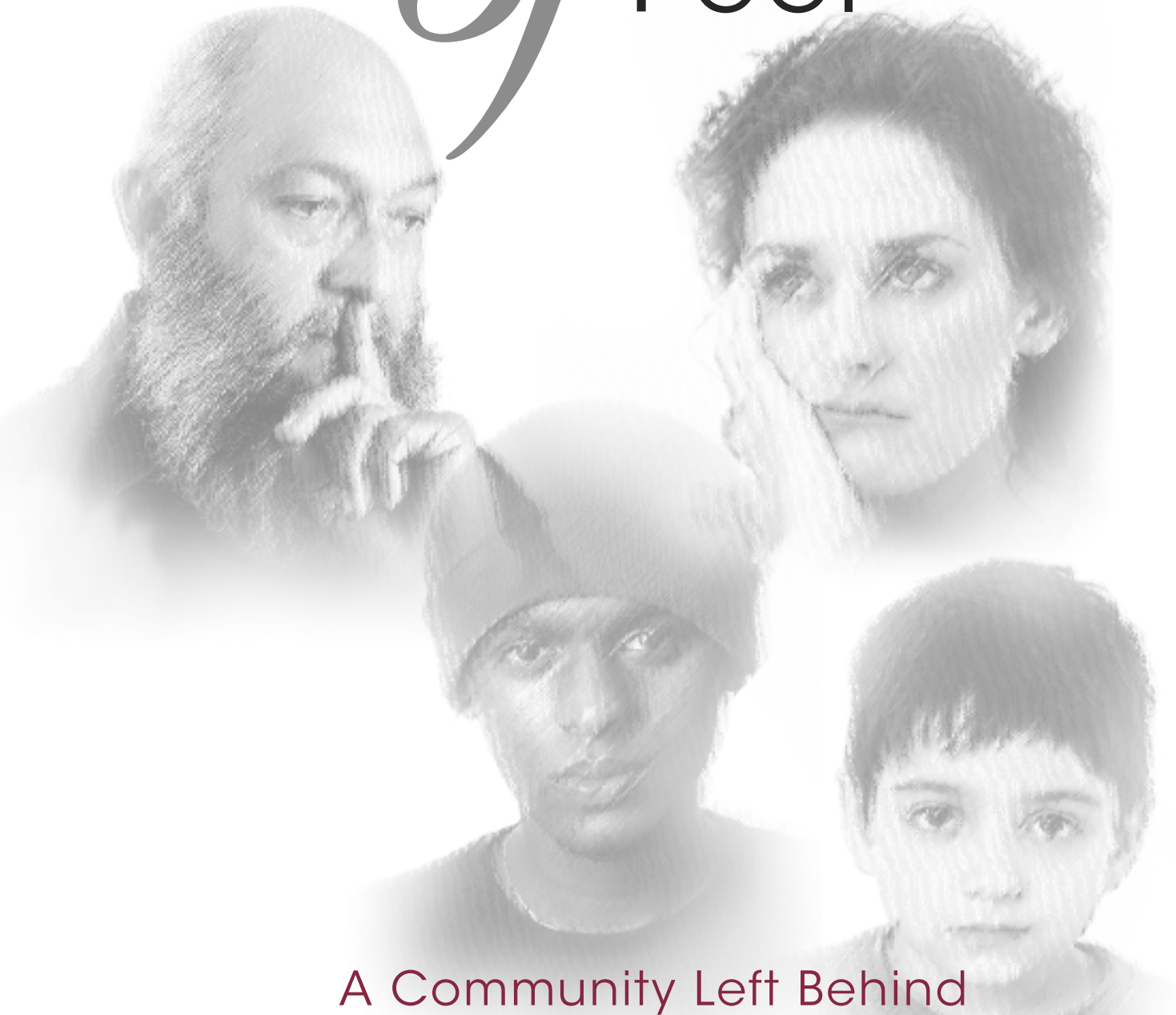


PORTRAITS *of* Peel



A Community Left Behind
2011

Peel at a glance

Peel is among Ontario's fastest growing municipal areas

- Peel is home to more than 1.2 million residents, about 10% of Ontario's population.
- More than 34,000 new residents move to Peel annually.
- Brampton and Mississauga are among the top 10 municipalities in Canada that experienced the largest percentage population growth in recent immigrants between 2001 and 2006.
- From 2001 to 2006, immigrants made up roughly 80% of Peel's population growth.
- Peel's rate of newborns is the highest in Ontario. In 2007, 16,340 babies were born.
- Peel's senior population (65+ years of age) is increasing at almost three times the rate of Ontario and Canada's senior population. By 2018, Peel's senior population will top 200,000.
- By 2031 Peel's population is predicted to reach 1.64 million.

Growth brings challenges

- 171,030 Peel residents, about 15% of Peel's population, reported a disability.
- Peel Children's Aid receives one of the lowest levels of per-capita child welfare funding in the province, about one-third of the provincial average.
- Youth violence is on the rise in Peel. In 2007, almost one-third of all violent crimes were committed by youth.
- In 2009, Peel Regional Police responded to 13,319 domestic disturbances compared to 9,600 disturbances in 2005, an almost 40% increase.

Poverty is one of those challenges...

- 33% of Peel's recent immigrants live in poverty.
- About 20% of visible minorities live in poverty, about double the rate for non-visible minorities.
- Nearly 40% of seniors living alone in Peel are living in poverty.
- 20% of children aged 0 to 5 are part of families living in poverty.
- From 1996 to 2006, there was a 57% increase in the number of children aged 0 to 5 living in poverty in Peel.
- 18% of persons with disabilities, about 30,000 people, are living in poverty.

So they wait...

- Brampton-Caledon Community Living reports that currently 600 people are on a waiting list for a spot in a group home.
- In 2006, there were almost 10 low income children in Peel for every subsidized child care space, the worst ratio among the municipalities that are part of the Federation of Canadian Municipalities' Quality of Life Reporting System.
- By mid-2010, Peel's wait list for Social Housing was more than 15,000 households. Families without priority status that move into social housing in Peel today have typically waited 12 to 15 years for that placement.
- Children in Peel are waiting: 6 to 8 months for counselling; 12 to 15 months for specialized sexual abuse treatment services; and 8 to 10 months for day treatment services.

Introduction

As Peel's population continues to grow, so does the need for careful investment in the community health and human services our community requires to stay strong and healthy. Overall, funding for human services is shrinking relative to the growing needs, compelling us all to do more with less. In fact, according to the Fair Share Peel Task Force, Peel residents receive only a little more than half the support that other Ontario residents receive per capita. This funding gap has grown since 2007 and was estimated to be \$386 million in 2008-09.

Peel's business community understands that declining community health and social service infrastructure affects the overall quality of life in the community, and consequently their ability to attract and maintain a skilled labour force. Business has made significant contributions to the United Way of Peel Region, to support non-government organizations that deliver these important services, as well as to community-based food banks.

In 2009, individual corporate contributions from the private sector to the United Way of Peel Region exceeded \$3.5 million. This does not include employee contributions of \$6.7 million. Individual residents have also shown their support through financial donations and by contributing thousands of hours of volunteer services.

However, business, labour, residents and local taxpayers cannot do it alone.

Portraits of Peel provides an inside look at the challenges individuals and families face and the local supports that make a difference in their lives.

Portraits of Peel 2011: A Community Left Behind is a collaboration of the Peel Fair Share Task Force, The Social Planning Council of Peel, United Way of Peel Region and the Region of Peel.

These partners recognize diversity as a vital characteristic of Peel and are committed to valuing, respecting and promoting inclusion, equitable access and opportunity for all residents.

Names of individuals in the case studies have been changed to safeguard their privacy.

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Message from the Editors

In 2005, when *Portraits of Peel: Facing the Facts* was published, we highlighted the formidable social and economic challenges in Peel. We also illustrated the human costs being experienced by some of Peel's most vulnerable citizens.

Today, our communities and service providers continue to struggle to meet growing demands for the wide range of community health and human services that make up our social and human infrastructure. Like roads, sewers and clean water, these services contribute substantially to the overall quality of life residents can experience in their community.

Peel is not the same

Peel is no longer a GTA "bedroom" community. More Peel residents work within Peel than work outside its borders. With over 1.2 million residents representing 200 different ethnic origins and speaking 70 different languages, Peel is a destination of choice, with more than 34,000 new residents settling in Peel each year. As our population has grown - at rates faster than most other Ontario municipalities - Peel has quickly become a maturing urban area, with all of the benefits and challenges that it brings.

A question of capacity

The 2011 edition is concerned with vulnerable communities who are at risk because they cannot obtain services to meet their needs. Even when they are available, there are very long wait lists for services such as affordable housing, child care, youth mental health services, addiction treatment and counselling for victims of abuse. Without the benefit of critical community health and social infrastructure, individuals and families are indeed left behind.

As resources grow leaner relative to demand, we are in danger of exhausting a sector that is already stretched to the brink and which sees no relief in sight. Deteriorating financial resources resulting from increased competition for a diminishing pool of individual donors and relatively low levels of government support are being spread thin.

Organizations do not have the resources to invest in technology, management systems or practices that would improve their efficiency. Employees in the sector are poorly paid and many do not have benefits, pensions or retirement savings plans. There is almost no ability to reinvest in the human resources that drive the sector or to develop succession plans to replace leaders nearing retirement. There is just enough to pay the rent and keep the lights on.

Peel is solution-focused

As a community, we can take pride in the efforts of our local governments, non-profit organizations, community health and human service providers in tackling the growing need. Since 2006, they have made extraordinary efforts to both coordinate their efforts and collaborate to stretch the resources available to them. Among them, we note the development of a Community Investment Strategy developed jointly by the United Way of Peel Region and Region of Peel to identify Peel's social and community health priorities (see page 24).

We encourage our partners and funders in other levels of government to consider the challenges their fellow citizens' face and to help us bridge the gaps that put children, families and communities at risk.

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2011 *Portraits of Peel*

A Community Left Behind

2011

PORTRAITS *of* Peel

A Community Left Behind

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chapter 1

Children and Youth

Peel's population is growing rapidly and the development of new subdivisions within our municipalities attracts newcomers and families, increasing the number of children in Peel.

This growth creates the illusion that Peel is wealthy and not beset by problems. While Peel can be a wonderful place to raise a family, many of the vulnerabilities within our communities are not easily visible.

Today, Peel receives about one-third of the provincial average for funding of child care services. There are more than 100,000 children ages 0 to 6 in Peel and their numbers increase every day. Single-parent families make up about 14% (41,350) of our economic families, with the majority (34,350) led by women.

In Peel, 20% of children aged 0 to 5 are part of low income families. As a result, many parents cannot afford quality child care to attend school or training; to find work; or hold a job, keeping them in low income.

Sadly, family income isn't the only threat to the health, safety and well-being of Peel's children. Some threats are located in the place that should be the safest: a child's home.

Peel Children's Aid Society (CAS) and Peel Regional Police receive thousands of calls each year about suspected incidences of child abuse and neglect. Unfortunately, Peel CAS receives one of the lowest levels of per capita child welfare funding in the province, about one-third of the provincial average.

There are a growing number of children with disabilities in Peel. They and their families must cope with many challenges, including emotional injuries. Imagine not being able to play games with your peers, being dependent on others for assistance, and experiencing unfair treatment or discrimination.



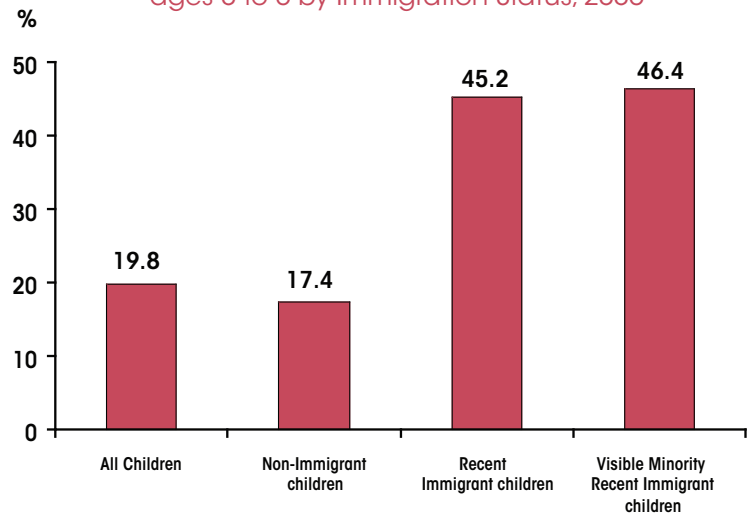
FAST FACTS

- In 2007-08, 16,370 babies were born in Peel, the second highest number of births of any municipality in Ontario, after Toronto.
- Peel has a fairly young population compared with Ontario and Canada: 21.1% of Peel's population in 2006 was in the 0 - 14 age group. For Ontario it was 18.2% and for Canada, it was 17.7%.
- From 1996 to 2006, there was a 57% increase in the number of children aged 0 to 5 living in poverty in Peel.
- 2007 Early Development Instrument (EDI) results show that 32% of children surveyed in Peel were vulnerable in terms of school readiness and are more likely to be limited in their ability to meet the demands of school.
- Mental health services in Peel: children wait six to eight months for counselling; 12 to 15 months for specialized sexual abuse treatment; eight to ten months for day treatment services.
- Youth violence is on the rise in Peel. In 2007, almost one-third of all violent crimes were committed by youth.
- In 2009-10, Peel Children's Aid Society (CAS) responded to 11,654 calls about children's safety and well-being. Of these, 5,728 resulted in investigations of suspected child abuse and neglect.

FAST FACTS

- In 2009-10, Peel CAS served 7,073 families.
- 4,626 family disputes were reported in Peel in 2008 (12 per day).
- In Canada, suicide is the second leading cause of death among young people after motor vehicle accidents.
- It is estimated that about 30% of suicides are of lesbian, gay, bisexual and transgendered (LGBT) youth.

Prevalence of Low Income for Peel Children, ages 0 to 6 by Immigration Status, 2006



Source: Statistics Canada 2006 Census
 Note: Recent immigrant - arrived in Canada between 2001 and 2006.

*G*rowing up in Mississauga, Jo felt like an outsider. It wasn't easy going to school without a lunch or the right' clothes.

Even worse, his home life was filled with physical abuse and poverty. So when a youth gang opened their doors to him, Jo welcomed the invitation. As a gang member, Jo was introduced to drugs and alcohol which helped him block out the memories of his childhood. He even started selling drugs as a way to earn money.

This lifestyle didn't lead Jo down a positive path. He became addicted to drugs and alcohol and left school with only a Grade ten education.

His interaction with the gang led him to the Nexus Youth Centre. Funded by the United Way of Peel Region and the Region of Peel, the drop-in centre provides a safe haven where youths can get help on their own terms. Marginalized youth like Jo find it to be a non-intrusive place where they can hang out and not be subjected to a lot of questions.

Jo began spending time at the centre, just observing for the first little while. Soon, he allowed staff to engage him and began interacting with other youths in activities. Eventually, with encouragement from staff at the centre, Jo returned to school and earned his high school diploma. He was proud to take it to the centre to show it to those who had helped him.

Today, Jo has a full-time job and is saving for university. His confidence has improved and he shares his knowledge and experience with other youths at the centre. He's happy to help others change their lives, the way he changed his.

The Nexus Youth Centre played an instrumental role in helping Jo turn his life around. Over the years, it has become a popular place – but not all youths have access to a place like this one. This centre, located in Mississauga, is too distant for youths living in the north Peel communities of Brampton and Caledon.

If we want more happy endings – like Jo's – we need to create drop-in destinations closer to home, where young people can feel safe and hang out in an environment that helps to build their confidence and their social skills in positive directions.

How can we help our most vulnerable children and youth enjoy a bright future?

Collaborative Strategies

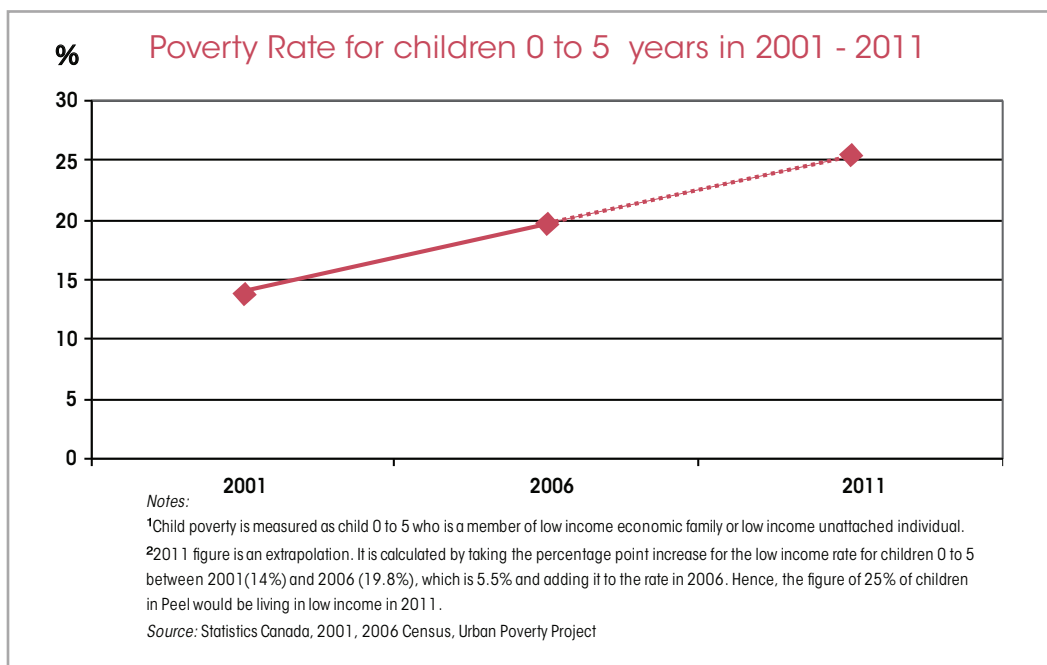
Significant work is underway in Peel Region to support children and youth to reach their full potential.

Peel Children and Youth Initiative is a new organization formed to focus on the needs of children and youth, ages zero to 24 in Peel. With a broad representation from community-based organizations, health and human service providers, the initiative leads community planning, capacity building, research, service co-ordination, advocacy and other roles, including providing a meaningful voice for children and youth. It also incorporates the Peel Youth Violence Prevention network involving more than 40 agencies and service providers committed to the reduction and prevention of youth violence in Peel.

Success By 6 Peel is a multi-sectoral collaboration of more than 40 partners dedicated to providing important opportunities and experiences to help children reach their full potential from birth to age six. Strategic

planning is underway to combine Success by 6 Peel with the Peel Children and Youth Initiative. Some initiatives include: Peel Children's Charter of Rights, Family Fair, Postpartum Mood Disorder Program, LION, St. John Fisher Early Years Partnership and the Fetal Alcohol Spectrum Disorder Initiative.

Learning in Our Neighbourhood (LION) was launched in November 2008 by Success by 6 Peel to support early learning for Peel children. A specially-fitted recreation vehicle serves as a mobile early learning centre and provides programming to high-needs areas. Families come to the LION to attend parent/child play-based programs with a focus on language, literacy, and numeracy.



Newcomers

Immigration has been the primary building block of Canada's economy and society. Over the last decade, Peel has been transformed, from being a secondary choice for immigrants, to a primary destination. Well over 20,000 immigrants directly settle in Peel each year.

Many recent immigrants are highly educated and skilled, making our economy more innovative and competitive. They contribute to expanding trade with their native countries through their knowledge and network of contacts. Collectively, newcomers contribute to increased foreign investment.

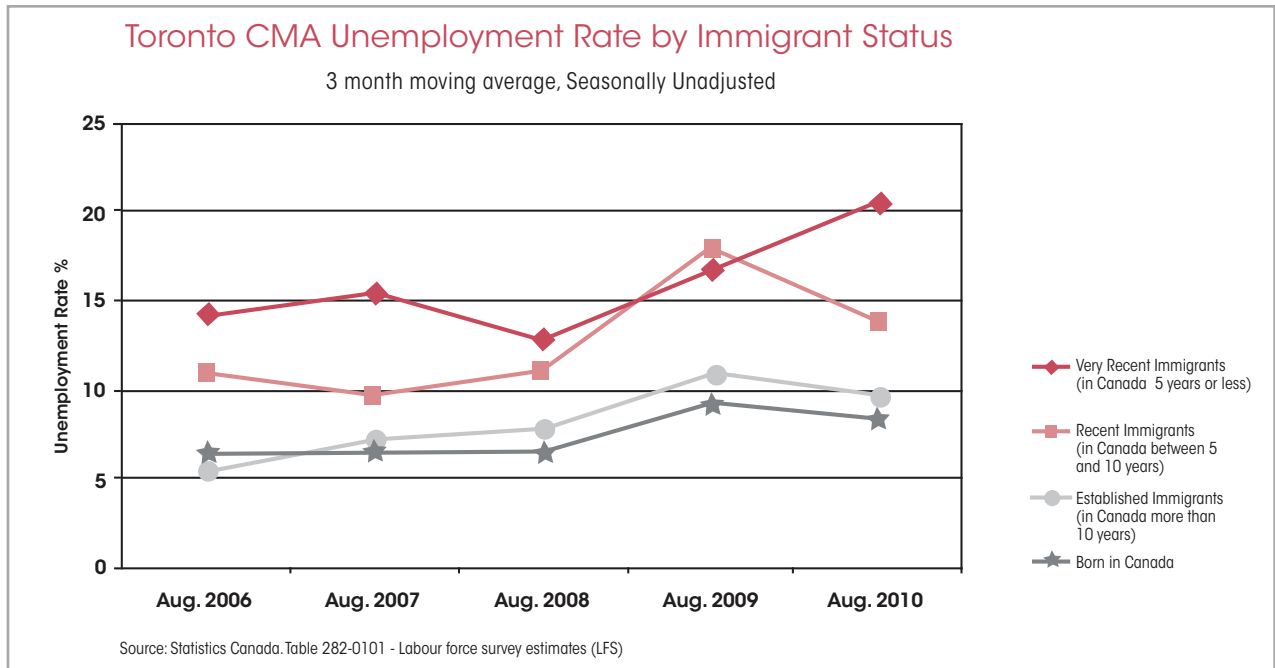
Not surprisingly, they come expecting to find work matching their skills and education. They are highly motivated to succeed, but too often find their experience devalued, and their credentials and competencies under-utilized. As a result, they may be forced to accept "survival jobs" that can result in poverty.

There are other barriers that hinder their participation in our society. These include language skills; lack of Canadian experience and knowledge of North American workplace culture; lack of recognition of skilled immigrants' international credentials; as well as structural and attitudinal barriers of the host community. Peel is also home to a significant number of refugees; they face the same barriers as skilled immigrants but of greater magnitude, since they may know very little English. These barriers are compounded by issues and challenges such as poor health, mental stress (post-traumatic stress), low literacy and education levels. They are some of our most vulnerable residents.

Policy and program responses and supports to these distinct groups of immigrants must meet their varying needs. A "one-size-fits all" approach doesn't work. Peel's ability to flourish depends largely on our ability to continue to be a place where newcomers can succeed — both economically and socially.

FAST FACTS

- A 1% rise in the share of immigrant scientists and engineers increases patenting by at least 41%.
- The Conference Board of Canada reports that a 1% increase in the number of immigrants results in 0.11% increase in exports. Increased immigration is also linked to increases in direct foreign investment.
- On average, 22,000 recent immigrants directly settle in Peel region each year, some of the highest volumes in the country.
- Between 2001 and 2006, the immigrant population of Peel grew by 32.1%, compared to only 13.6% for Canada and 12.2% for Ontario.
- Immigrants accounted for approximately 80% of the growth in Peel's population between 2001 and 2006.
- 118,220 recent immigrants (those in Canada less than five years) live in Peel, of which 90% are visible minorities.
- About 20% of visible minorities in Peel live in low income, about double the rate for non-visible minorities.
- 44% of recent immigrants in Peel have a bachelor degree or higher, compared to 19% for Canadian-born Peel residents.
- 33% of Peel's recent immigrants live in low income. This is three times the poverty rate for the non-immigrant population.
- About 60% of newcomers do not work in the same occupational field as they did before coming to Canada.
- Recent immigrant men earned 85 cents for each dollar earned by Canadian-born men in 1980; by 2005, recent immigrant men's earnings had dropped to 63 cents.



Pratheea is a single mother of two boys. Originally from Sri Lanka, Pratheea and her sons moved to Peel in 2004 to escape the harsh realities of war and to join her husband for a better life.

The long separation from her husband, while he tried to settle into Peel, had undermined Pratheea's marriage. Soon after their reunion, the arguments began. When they became violent, Pratheea knew she had to leave her husband to save herself and her two sons. But she was in a new country, staying with her husband's relatives, with basic English skills, no job and children to feed.

Pratheea lacked Canadian work experience and didn't know how to take the bus to get around, much less find a job. By chance, her son brought home a flyer about Catholic Cross Cultural Services (CCS) he received at school. Pratheea contacted the agency and made an appointment to see a counsellor who specialized in helping Sri Lankan newcomers.

CCS helped Pratheea find her own apartment and provided her with basic life skills training so she could use public transportation, seek employment and find her way to the food bank. With the help of family in Sri Lanka, she was able to pay first and last month's rent for her own apartment. She also found a job as a receptionist for a company owned by a Sri Lankan businessman.

But the problems didn't end. Her husband's visits to his sons turned into violent outbursts toward Pratheea. Soon, the police became involved and the single mother, only in Peel for six months, applied for a formal separation. To add to her stress, Pratheea's next month's rent was due and she didn't have the money to pay. CCS saw this as an emergency situation and found an apartment in a subsidized building for the small family.

It has been a long and difficult road, says Pratheea, but she managed to make it on her own. She spent the last six years working three jobs so she could finally afford a small home for her family. Her children are now in their teens so childcare is no longer an issue. But looking back, she remembers the hardships and the feeling of being alone in a new country.

Fortunately, CCS was there to help. Unfortunately, thousands of newcomers don't benefit from these supports because they are not always available.

How can we help newcomers succeed in Peel?

Collaborative Strategies

The Peel Newcomer Strategy Group (PNSG) was launched in 2008 by the United Way of Peel and the Region of Peel. The mission of this cross-sectoral partnership is to develop a co-ordinated and collaborative strategy for the successful integration of newcomers into the economy and community of Peel. PNSG released its model for newcomer settlement and integration in June 2010 and has subsequently developed work plans which address service delivery gaps to newcomers, including the piloting of community hubs and networks. PNSG requires support from senior levels of government to help implement its model.

ImmigrationPeel.ca is Peel's municipal immigration portal, developed by the Region of Peel through an extensive community consultation involving recent immigrants and service providers. Built with provincial and federal funding, ImmigrationPeel.ca provides newcomers with relevant local information:

- Appropriate government and community programs and services.
- Labour market information and employment related opportunities in Peel.
- The realities (some of them unpleasant) for a newcomer.
- Tips or steps that will speed settlement and integration into the community and economy.

Since its launch, there have been 100,000 visits to the portal.

Mentorships are one of the most useful strategies skilled newcomers can use to find employment in their field. **The Mentoring Partnership** is a program of the Toronto Region Immigrant Employment Council (TRIEC), which provides new immigrants in Peel and throughout Greater Toronto Area (except Durham) with occupation-specific mentoring opportunities. Over 50 corporate partners from the private, public and voluntary sectors participate in the program, including the Region of Peel, and the Cities of Mississauga and Brampton.

Through mentoring, employees build their cross-cultural and leadership skills and help support skilled immigrants who are trying to find their place in the Canadian society and economy. Now operating for over five years, The Mentoring Partnership has facilitated close to 5,000 mentoring relationships between skilled immigrants and established Canadian professionals.



chapter 3

Persons with Disabilities

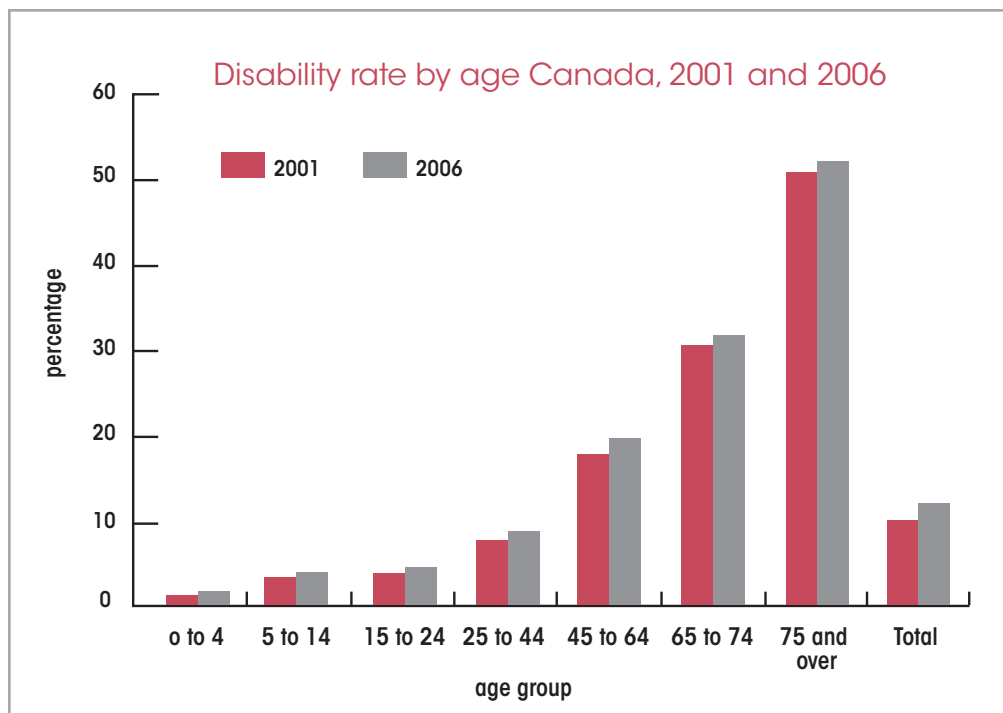
With a growing and aging population, Peel anticipates a greater need for services for persons with disabilities.

Families trying to care for a child with an intellectual/developmental disability face many challenges and financial, social and emotional stresses. Some families feel they have no choice but to give up trying to care for their child or adult child at home and give up legal custody so their children can have access to services.

When young adults with intellectual disabilities leave school, they must fend for themselves to find the supports they need. Many are placed on waitlists for day supports or funding or are placed in long-term care residences; these are people in their 20s, 30s and 40s.

Agencies such as Community Living Mississauga and Brampton-Caledon Community Living support over 4,000 individuals with an intellectual disability and their families. This does not include individuals and families receiving services from other community organizations such as the Peel Children's Centre.

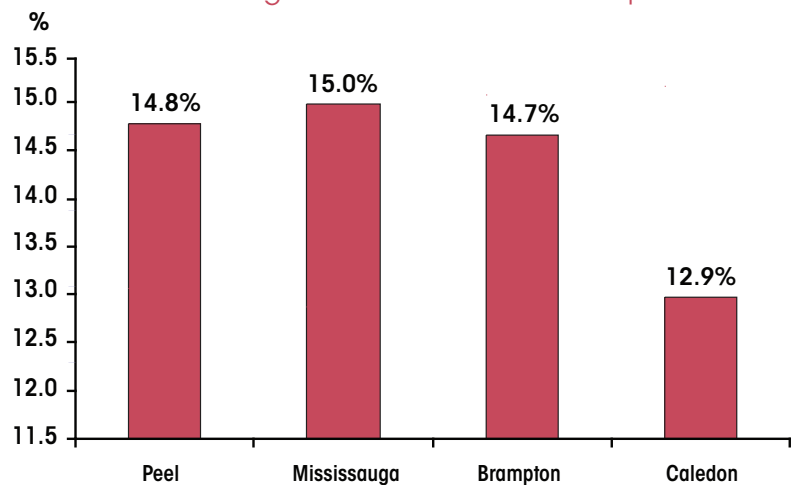
Funding shortfalls in Peel are a great concern. For example, more than 1,000 Peel families are on a waitlist for "Special Services at Home" funding and over 600 individuals are seeking residential supports. Senior parents must address their own health concerns as they age, in addition to looking after the needs of adult children with a disability.



FAST FACTS

- 171,030 Peel residents or 14.8% of Peel's total population reported a disability.
- The number of persons living with disabilities in Peel is expected to increase as the population ages.
- In Canada, over one-third of persons aged 65 to 74 years and half of those aged 75-plus have some disabilities.
- Population aging is only one factor that has contributed to the increase in the disability rate since 2001. Disability rates have increased for nearly all age groups.
- Services for persons with developmental disabilities are significantly underfunded in Peel. In 2008-09, developmental services in Peel received \$62 per capita, compared to the provincial average of \$133 per capita.
- 18% of persons with disabilities, about 30,000 people, in Peel live in low income.
- Only 48% of persons with disabilities living in Peel are working or looking for work.

Persons with disabilities as per cent of Total Population in Peel Region and Local Area Municipalities



*B*orn with cerebral palsy, 30-year old Sahra is physically and developmentally disabled and needs full-time care. The vibrant young woman is lucky to have parents who are at home to provide the 24-hour round the clock support she needs. Sahra's mother Marie Smith is 60 and her father is 66. As they get older their own health issues will become a concern and they are frightened of what will happen to Sahra when they are no longer able to care for her full time.

Until she was 21, Sahra attended a modified learning program that helped her to interact with her peers and to gain social skills so she could enjoy a better quality of life. But after graduation, Sahra, who is not able to work, was confined to her home.

To ensure their daughter did not lose her social interaction and to give themselves some time on their own, the Smiths registered her in Brampton-Caledon Community Living's day service program. Sahra attends this program three days a week where she engages in activities and day trips under the supervision of caring professionals.

Though Sahra has both her parents to share in the care giving, a recent change in her father's health put the onus on Marie to be the primary caregiver for both.

After looking into the option of a residential placement home for Sahra, where she could live with her peers under professional care, the couple was faced with an incredibly long waiting list. The Smiths realized that if something happened to them, their 30-year old daughter would be placed in a long-term care facility. While Marie knows her daughter needs full-time care, she also knows Sahra is quite active and benefits from interacting with others her own age. A long-term care facility would not be a suitable place for her social development and her quality of life.

Unless the waiting list for a residential placement home suddenly accelerates, there is no other option for Sahra. So with the help of Brampton-Caledon Community Living, the Smiths developed a proposal for the government, asking for its help and outlined a plan for their daughter's future. Marie has been told that the government is still working on its own funding plans for residential placement homes and only when this is complete will they consider looking at the Smiths' plan to help their family.

Meanwhile, the couple isn't getting any younger and with her husband's health issues becoming a concern, Marie doesn't know where to turn. She can only be patient and wait. While Sahra has secured a place in the day services program, many families are still on the waiting list. Lack of essential funding has limited access to programs like this, leaving many people with physical and developmental disabilities on their own.

How can we help persons with disabilities thrive in Peel?

Collaborative Strategies

Peel's Transition Advisory Committee is a collaborative cross-sectoral partnership of more than a dozen community agencies that promote successful transition planning for high school students with developmental disabilities. This committee produced a resource guide, *The Road to Adulthood: Transition from High School to Community*, which provides an overview of community options available for young adults in Peel. It provides information regarding employment, service coordination, community participation supports, respite, post-secondary education options and specialized funding.

Peel Planning Group (PPG) has implemented a regular strategic planning process that involves comprehensive stakeholder and environmental scans. Through its regular meetings, strategic planning and advising government ministries, PPG has distinguished itself as an exemplary community force for individuals with developmental disabilities and their families.

chapter 4

Seniors



Like many communities, one of Peel's most significant changes is its aging population.

Large numbers of seniors living alone face challenges such as poor health, managing disabilities, loneliness, isolation and depression. Many seniors have multiple mental and physical health concerns.

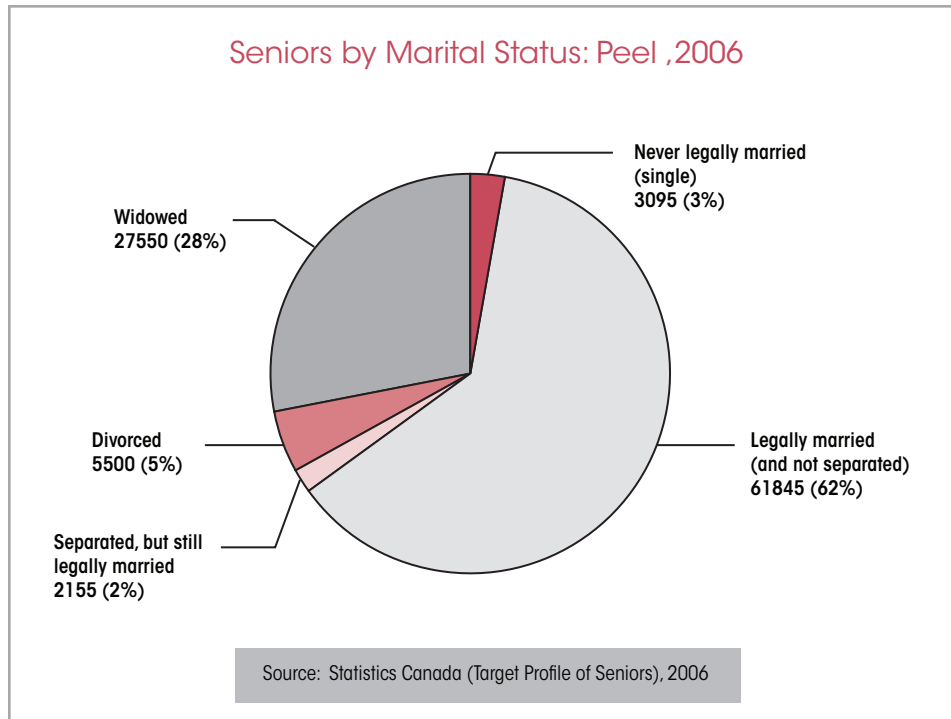
Addressing the lack of sufficient in-home community services available in Peel is an acute priority. The alternative to providing resources that enable seniors to remain at home is more expensive hospital care. Without adequate funding for senior care, institutionalization becomes the only alternative.

Seniors also face housing affordability challenges. Many seniors living alone spend a sizeable share of their income on housing, leaving little for other necessities (e.g., food, clothing, transportation) and services and activities that improve their quality of life (e.g., recreation, exercise).

As Peel's population continues to age, elder abuse also becomes a larger issue. Incidents of physical, mental and financial abuse of elders have increased across the region. Essential services for seniors in abusive situations are broad, including: counselling and support; legal assistance; medical care; housing; financial support; assisted living; family counselling (including counselling for abusers); settlement agencies; respite; cultural; placement; police intervention; community supports (meals on wheels, telecheck, etc); transitional support; and safety planning.

FAST FACTS

- In 2006, there were 104,530 seniors living in Peel, representing 9% of the total population.
- Peel's senior population (65 years of age and older) is increasing at almost three times the rate of the Ontario and Canadian seniors population. Between 2001 and 2006, the number of seniors living in Peel increased by 32.6%.
- Immigrants make up 70.4% of Peel's seniors population.
- The Ministry of Finance 2010 Ontario population projections predict that Peel's senior population will reach over 200,000 by 2018.
- Between 2001 and 2006, the number of seniors living alone in Peel grew significantly by 23.1%, compared to 8.5% in Canada and 6.9% in Ontario. In 2006, there were 15,520 seniors living alone, representing 16% of the living arrangements for 99,030 seniors in Peel.
- Nearly 40% of seniors living alone in Peel are in poverty. The rate jumps to 43% for single female seniors.
- 10% to 25% of Peel seniors experience mental health disorders.
- Housing affordability challenges facing seniors in Peel are severe. In 2006, 4,640 or three-quarters of single-senior renter households were spending in excess of 30% of their income on shelter. Nearly three out of every 10 were spending over 50%.



At 82, Monica wants to maintain her independence. The Jamaican-born senior has been living on her own since she moved to Canada in the 1960s, preferring to be independent. With no children and her family living in the United States, Monica was literally on her own.

Like many seniors in Peel, Monica's health has slowed her down. When she reached the point where she was unable to care for herself as she would like, Monica contacted Peel Senior Link for help.

At the time of her assessment, Monica was suffering from severe arthritis in her hands and knees. She was unable to lift her arms and had not been able to wash her own hair properly. She also used a shopping cart as a walker so she could manoeuvre around her neighbourhood.

Monica qualified for Peel Senior Link's 24/7 Supports for Daily Living services funded by the Ministry of Health. Every week, personal support workers wash and braid Monica's hair in the traditional style she's used to. Daily, they help her dress and chop her vegetables and meat so she can still cook for herself. She has help with the laundry, and when she's unable to leave her apartment, her grocery shopping is done for her.

Peel Senior Link also found a doctor in her neighbourhood that she can visit easily. Staff from Peel Senior Link still visits daily to ensure she's safe and doing well.

Monica is a private person and prefers to keep her finances private but it's clear her income is minimal, just enough to pay her rent and provide the bare necessities of life. She does not receive social assistance and is not on the waiting list for affordable housing, which has a wait time of about six years for seniors.

If it wasn't for Peel Senior Link, Monica's quality of life could have very well diminished. This is why there is a growing need for funding for programs to assist seniors in their daily lives. Since so many live in isolation, funding for social activities is essential to their well-being. Monica says she has her faith to keep her spirits up, so she doesn't feel lonely, but she's still very grateful for the services she receives and knows it has helped enhance her life.

How can we serve seniors in cost-effective ways that help them to remain safe, healthy and comfortable in their community?

Collaborative Strategies

Coalition of Agencies Serving Immigrant Seniors in Peel (CASIS Peel) is an umbrella organization of community agencies serving newcomer seniors. Established in late 2009, this organization is the collective voice for immigrant seniors in Peel. CASIS will engage various stakeholders on enhancing the quality of life for immigrant seniors in Peel by developing the capacity of member agencies. The organization is still in its formative stages and used the first half of 2010 to become established and organized. CASIS' priorities are to document the gaps and inadequacies, seek additional members, seek joint funding and hire a coordinator.

The Peel Elder Abuse Prevention Network (PEAPN) is a collaboration of over 34 agencies working to eliminate all forms of abuse towards seniors and to raise awareness and service needs for seniors in Peel. While it is not unique to Peel, our diverse population, large number of immigrants, range of family formations, language barriers in accessing information and services and other factors contribute to the magnitude of this issue in Peel. The Peel Elder Abuse Prevention Network was established to develop a collaborative, coordinated and effective response to the abuse of seniors in Peel's diverse communities.

The Peel Advisory Working Group on Older Adults' Housing (PAWGOAH) is a community-based, cross-sectoral group of representatives from community agencies, private sector, social housing developers, local, regional, provincial and federal governments, the health sector and older adult residents. Established in 2001 by Peel Regional Council, its mandate is to develop and promote ways of meeting current and future needs for appropriate and affordable rental and ownership housing for older adults in Peel Region. It engages in a number of key activities:

- Publishes an informative booklet outlining various housing options and support services for older adults in Peel Region.
- Delivers educational sessions to various older adult groups.
- Provides information seminars for professionals such as urban planners, home builders and developers, renovators and real estate agents about the need for more affordable owner and rental housing specifically tailored to older adults' needs.

chapter 5

Families

Families face significantly more complex challenges today than they did decades ago. With salaries and wages remaining flat in the last 30 years (after factoring inflation), growing numbers of families need parents working full-time to make ends meet.

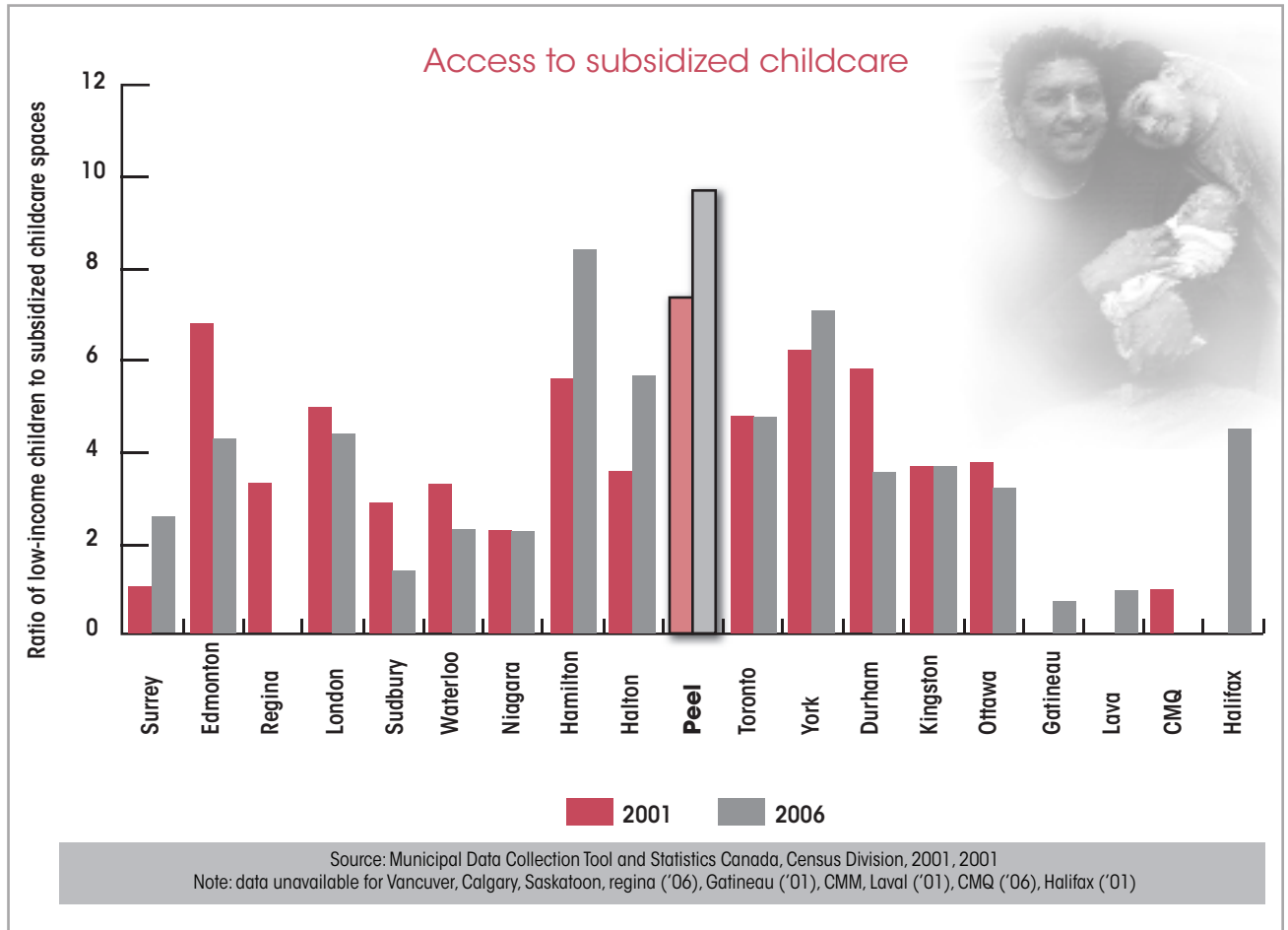
Families spend less time together due to longer working hours, which leads to higher stress levels and mental health problems. Sole-support parents face even greater pressures to provide for their family's needs.

With parents working, families need to find either formal or informal child care for their children. In addition, with many taking on a care giving role for their aging parents, some families are supporting the youngest and oldest generations in one household.

Parents who have children with disabilities, including mental illness, are faced with even more complex and difficult challenges. But they can't do it alone - inevitably community supports are needed. In Peel, these services are difficult to find and even when they are available, the waiting lists are too long.

FAST FACTS

- Between 1980 and 2005, median family earnings of economic families in Canada only increased 9.3% (in 2005 constant dollars). Earnings increases were mainly due to the increasing participation of female spouses or partners in the labour market.
- In 2006, there were almost 10 low income children in Peel for each subsidized childcare space, the worst ratio among the municipalities that are part of the Federation of Canadian Municipalities' Quality of Life Reporting System.
- In 2010, an average of 5,500 sole support parents per month were on social assistance in Peel.
- Between 15% and 21% of children and youth in Ontario have at least one mental health issue. That's equivalent to between 54,000 and 76,000 children and youth in Peel.
- Brampton-Caledon Community Living reports that currently 600 people are on a waiting list for a spot in a group home.



Families: Canada, Ontario, Peel, Mississauga, Brampton and Caledon, 2006

Region	Total # of families in private Households		Couple families				Lone-parent Families	
			Married couples		Common-law couples			
	#	%	#	%	#	%	#	%
Canada	8,896,845	100.0	6,105,910	68.6	1,376,870	15.5	1,414,060	15.9
Ontario	3,422,320	100.0	2,530,560	73.9	351,045	10.3	540,715	15.8
Peel	324,115	100.0	254,125	78.4	20,395	6.3	49,600	15.3
City of Mississauga	186,630	100.0	147,190	78.9	11,060	5.9	28,385	15.2
City of Brampton	120,865	100.0	93,300	77.2	8,125	6.7	19,440	16.1
Town of Caledon	16,615	100.0	13,630	82.0	1,205	7.3	1,775	10.7

Source: Statistics Canada, 2006 Census



*A*n open door is all Louise Baker needed. The single mother desperately wanted to get back into the workforce after leaving her job due to illness.

She had left an abusive 13-year relationship, two boys in tow, and was just starting to get back on her feet when she was diagnosed with cancer. Still trying to regain her confidence after so many years of mistreatment, the stress suddenly became overwhelming and she was forced to stop working and accept financial assistance from Ontario Works.

It was a tough decision as Louise was very ambitious and wanted to support her family on her own. Recognizing her drive, Louise's caseworker suggested she apply for a program called Open the Door to Better Futures, operated by Employment Services at the Region of Peel. The program places women into the workforce, ideally in a field of their choice, so they can acquire skills and experience that will help them pursue a career. They also spend one day a week in the classroom where they receive a wide range of life skills education.

Louise had dreams of working in Public Relations where she could use her savvy people skills. So, when she was placed in the field, she was overjoyed. The program runs for five months and gives brave single parents an opportunity to gain hands-on experience. Louise loves her job, not only because it will help her career aspirations, but also because she's regaining the confidence she lost when times were tough.

"My drive has returned," she says. "I am no longer that person who was so numb and afraid. Now, I want to get up every morning and come to work."

Today, Louise is living in a small basement apartment with her two boys who are doing well in school. Every day, she takes public transportation to her job where she's learning every day. Once the program is over, Louise has the option of going back to school or working and she's hoping to do both. Her long-term goals include purchasing her own car and a home for her family.

"Open the Door is an amazing program," she says. "Without it, I am not sure what I would have done."

Louise is not alone. Many women do not feel they can leave an abusive relationship because there is nothing out there for them. Programs like Open the Door provide hope and opportunities so women can feel a sense of purpose.

Louise says she's changed – and that's a good thing. The feeling of being alone and fearful is gone and she's looking forward to a bright future and a successful career.

How can we provide families with supports that make this essential building block of our community strong and resilient?

Collaborative Strategies

The Peel Poverty Reduction Strategy

Committee was formed in response to the growing and critical issue of poverty in Peel and is committed to reducing poverty in the region. It is comprised of a diverse number of agencies, grassroots organizations, stakeholders and local government.

A critical component of the committee's work is aligning regional efforts and advocacy with the provincial government's *Breaking the Cycle: Ontario's Poverty Reduction Strategy* as well as with *Campaign 2000* and the *25 in 5 Network's* efforts to build provincial momentum around addressing poverty in Ontario. In 2009, a region-wide food distribution network was convened to explore methods of improving access to more, culturally diverse foods to a larger number of Peel residents in need.

The Committee also attempts to influence public policies related to poverty and ensures Peel Region's voice is heard and considered when fiscal decisions are being made.

Child Care SNAP - Peel (Child Care Special Needs Access Point - Peel) provides a single point of access to co-ordinated services that help children with special needs from birth to six years participate in licensed child care programs. Services are provided by special needs resourcing agencies working in partnership with licensed child care centres across Peel.

Families First connects single-parent families on social assistance with public health nurses, employment programs, child care and recreation. This program not only enhances lives, but also helps reduce future need for social support. Preliminary research indicates:

- Significant improvements in the lives of sole support parents and their children receiving intensive case management interventions through the Families First program.
- Significant savings to taxpayer-funded programs in the areas of social assistance, health care, education and corrections.
- Costs to implement the program appear to be off-set by earlier exit from social assistance and significantly reduced reliance on social assistance.
- The program helps individuals and families to participate fully in the economic, social and cultural life of the community.

chapter 6

Special Issue Focus Violence and Abuse

Abuse: a behaviour that can include, but is not limited to, the physical, sexual, psychological, emotional, verbal, social, spiritual and financial/economic abuse. Assault and threats of violence, regardless of the context, are offences under the Criminal Code of Canada.

In Peel, we have observed that some vulnerable groups experience violence at a much higher rate than others.

This knowledge has become increasingly important to our understanding of the complexity of violence and abuse.

Learning more about the root causes of violence can help our community:

- Serve and support those who have been victimized.
- Work more effectively with those who use violence.
- Find ways to prevent violence in the future.

Intimate Partner Violence

Abuse can occur in any intimate partnership, including opposite and same gender relationships. Abuse and violence, regardless of the type of relationship, are equally as hurtful, damaging and criminal.

Male violence against women, however, is the most prevalent form of abuse. According to Statistics Canada, "the majority of victims of spousal violence continue to be females, accounting for 83% of victims." While the overall rates of spousal homicides in Canada are the lowest they have been in the past 30 years, this gender-based crime is relentless.

FAST FACTS

- In 2009, Peel Regional Police responded to 13,319 domestic disturbances compared to 9,600 disturbances in 2005, an almost 40% increase.
- 51% of all women in Canada will experience physical or sexual violence.
- Aboriginal women in Canada are three times more likely to be victims of spousal violence than non-Aboriginals (21% vs. 7%).
- In Canada, 83% of women with disabilities will be sexually assaulted in their lifetime.
- On an average day in Canada, about 2,500 women and 2,500 children are living in abused women's shelters. Three quarters of these children are under the age of 10.
- In 2008/09 Peel Children's Aid investigated 1,499 cases of physical abuse, 196 cases of sexual abuse, 99 cases of emotional abuse and 601 cases of neglect.
- Less than 10% of sexual assaults are reported to police.
- 1 in 6 males in Canada experience some form of sexual abuse before the age of 18.
- About one out of every 10 seniors (about 12,000) in Peel has experienced abuse; and 3 out of 4 cases are never reported.

Woman abuse can instigate a cycle of violence. It takes its toll on children, who often suffer emotionally, physically and cognitively from exposure to violence against their mother. In addition, children who are exposed to abuse have an increased chance of being abused and/or being abusive as an adult.

Men who are victims of abuse indicated that their disclosures of abuse were often met with reactions of disbelief, surprise and scepticism from staff at domestic abuse shelters, legal-based institutions and hospitals, as well as friends and neighbours. These reactions may cause male victims to feel even more abused, ashamed and isolated.

Sexual violence

Perpetrators of sexual violence are not usually strangers but someone known to the victim. While the majority of sexual violence is committed by men against women and children, it is also experienced by many people in same sex relationships, transgendered people as well as boys and men. Women are also sometimes the perpetrators of sexual violence. Sexual violence isn't random or isolated; rather, some of these violent incidents reflect societal systems of power, dominance and oppression.

The internet has enabled a new form of sexual exploitation, with offenders creating networks to proliferate child sexual exploitation. Currently, there are over a million images of child abuse on the Internet involving approximately 50,000 children.

Another growing problem is human trafficking: the illegal recruitment of people or exercise of control over a person for the purposes of exploitation (sexual, forced labour or domestic servitude). Trafficking occurs across international borders, and between provinces, cities and towns. Since the inception of trafficking legislation in 2005, Peel Regional Police have made arrests in 25 cases and lead the country in investigations and arrests.

Various aspects of a woman's identity can present many **barriers** to leaving an abusive relationship such as:

- Financial difficulties
- Emotional barriers (such as depression, shame, guilt and loving the offender)
- Concerns about children (effects of children witnessing abuse, being a single parent, pressure to keep family together, fear of losing children)
- Nowhere to go (lack of affordable housing)
- Safety for self and children
- Legal concerns (being unfamiliar with the legal system, uncertain about personal rights)
- Immigration status (language barriers, illegal or precarious immigration status in Canada)
- Racism and oppression (judgment and discrimination)
- Lack of accessible services (waiting lists, language barriers and mainstream agencies lacking appropriate and responsive approach to women's diverse needs)

Elder abuse

Often referred to as a hidden crime, elder abuse can involve physical, psychological, sexual, financial exploitation, domestic violence and neglect. The abuser may be dependent on the senior for money, child care or shelter and the senior may be dependent on the abuser for personal care. Some seniors are isolated, kept apart from friends, relatives and social gatherings. Elder abuse can occur in the family home, a residential or long-term care facility, or in the community.



Abuse against persons with disabilities

People with disabilities are sometimes dependant on others for their care, which can put them at greater risk of abuse. Persons with disabilities are often victimized because they are unlikely to report or resist the event. When people with developmental disabilities report abuse themselves, they are not always believed, while others cannot verbalize their thoughts or feelings completely, making it even more difficult to talk to others and seek justice.

Child abuse

In Peel, many children are denied the basics of a safe home and adequate food and clothing, or lack the stable family and community supports essential for them to succeed and thrive. Some children also experience physical abuse, domestic violence, sexual and emotional abuse. Peel Children's Aid Society led 4,781 child protection investigations in 2008-09. A majority of these investigations involved incidences of physical abuse and domestic violence.

Youth violence

Youth violence is on the rise in Peel. In 2007, almost one-third of all violent crimes were committed by youth (1,051 out of 3,242 violent crimes including homicide, assault and sexual assault). Research in neighbourhood development indicates that the impact of violence in neighbourhoods is devastating: it incites fear, a code of silence, communities and youth become desensitized and stereotyped, violence is normalized as a way to deal with conflict, gang proliferation, increased police presence, poor school outcomes, teaching becomes more difficult, unsafe schools, youth depression and overloaded social services – all which may interfere with hopes of our youth having a fair chance in society. Youth who are isolated or discriminated against, such as racism, are at even greater risk of youth violence.

*C*assie is a professional, educated woman. She is also a survivor. Ten years ago, Cassie fell in love with someone who appeared to be charming. Soon after the two moved in together. Soon after that, the abuse began.

Like many victims of violence, Cassie lost the ability to think clearly, problem solve and stand up for herself. It took four years before she could muster the strength to reach for help. By then, the abuse had become so common she thought it was normal.

Her first anonymous call to an abuse hotline resulted in three referrals to other services. It took another month before she had the courage to call one. She made an appointment to speak to a counsellor and, when she arrived, the counsellor had gone home. Discouraged, Cassie gave up.

Later she stumbled upon a flyer for Family Services of Peel drop-in services and met with a counsellor. Since Cassie's boyfriend had been charged with sexual assault and had access to firearms, the counsellor identified her as a "high-risk victim" and urged her to get to a shelter immediately. With only her purse and the clothes on her back, Cassie fled to the nearest Peel shelter only to find it full. She was sent to nearby Orangeville where she stayed for six months, moving between three shelters to stay safe. Cassie was grateful for the shelter, but had no access to counselling services while there.

Eventually Cassie found a counsellor on her own but again had to leave her community to access these services.

"The perception of victims of domestic violence is often misconstrued," Cassie says, adding that it might explain why it's the most underfunded area in Peel Region. "People blame you," she said. "Everyone thinks it's the victim's fault for staying. But until you are a victim of this kind of violence, you can't know how you can shut down and become someone who just can't function normally."

According to Cassie, funding is not the only issue. Lack of information and communication between agencies, means victims must find help for themselves and that makes it more difficult. "The government needs to understand that victims need a life preserver thrown to them. We are drowning and cannot reach out for help on our own," she says.

Today, Cassie has started her own support group for victims of violence and abuse. Unfortunately, she was unable to find public funding or space for meetings, so once again, she had to go out of the city to a non-profit agency. Yet, in light of this, she feels the 45-minute drive twice a month is worth it, "There's a lot of reassurance in knowing you are not alone."

How can we protect those who have been abused and provide supports for those who have offended?

Collaborative Strategies

Peel Region has an integrated and informed response system for victims of violence. The good news is that community education programs have produced positive attitudinal changes associated with violence against women. In addition, criminal justice policies that strongly condemn violence against women can lead to the development of new social norms.

A number of Peel agencies provide a spectrum of services ranging from prevention, intervention, support and treatment. These services are also offered in a number of languages and many are housed within culturally or faith-specific agencies. Peel also has many collaboratives, made up of agencies from various sectors that work toward a common goal. Together, agencies in the anti-violence sector use best practice models to ensure competent and accountable services and supports.

Safer Families is a joint initiative of the Peel Children's Aid Society, Family Services of Peel, and Catholic Family Services of Peel-Dufferin. This collaboration provides an innovative response to violence against women related to child protection cases in Peel. The program offers customized service to the entire family in cases where children are exposed to domestic violence. Emphasis is placed on promoting responsible fathering. Safer Families staff works with families who are separated, as well as those who have remained together or who wish to reunite. This program has produced significant results - cases surveyed in 2008-09 have extremely positive outcomes:

- 100% of clients generally feel safer.
- 93% feel confident in their ability to refrain from future use of violence.
- 91% learned new ways to safely manage their difficult emotions.
- 95% feel safer in their relationship.

However, due to limited resources, the Safer Families program cannot treat all of the potential Children's Aid referrals. In 2008-09, of all the investigations opened for domestic violence at Peel CAS, 20% were referred to the Safer Families program (207 out of 1,025).

The Family Justice and Child Advocacy Planning Committee in Peel is a multi-service collaborative of 14 organizations dedicated to the creation of a centre where families and individuals impacted by violence and abuse can access many of the services they need at a single location. This committee is creating a "made in Peel model" by reviewing best practices of global Family Justice and Child Advocacy centres (FJCA), while also incorporating the unique needs of the Peel community. With help from government, it is hoped that a FJCA centre will be operating in late 2011.

Founded in 1984, **Peel Committee Against Woman Abuse** (PCAWA) is a group of individuals representing various agencies with a mandate to promote a comprehensive and effective response to woman abuse in Peel.

Peel Committee on Sexual Assault (PCSA) is a group of service providers working together to establish a comprehensive, effective, community response to sexual violence in Peel Region.

Helping End Abuse for Life (HEAL Network) is a collaboration between 18 social service agencies providing services and support to children and mothers who have been exposed to abuse and violence. In recognition of the significant diversity that exists in Peel Region in both culture and language, the HEAL Network works in collaboration with a number of ethno-specific, multicultural and mainstream agencies in order to address the needs of women and children in the region.

Community Collaboration

Working Towards Improved Quality of Life for Individuals and Families
 Community Investment Strategy Review: Investing for Resilience

The United Way of Peel Region and the Region of Peel invest millions of dollars in planning, supporting and delivering human services. In 2007, they joined efforts to review their investment strategies, share costs, consult and partner on the future.

As Peel's population continues to grow, so does the need for careful investment in the human services our community needs to stay strong and healthy. Overall, funding for human services is shrinking relative to the growing needs, compelling us all to do more with less. In fact, according to the Fair Share Peel Task Force, Peel residents receive only a little more than half the support that other Ontario residents receive per capita. This funding gap has grown since 2007 and was estimated to be \$386 million in 2008-09. Peel Region is indeed a community left behind.

The Community Investment Strategy

The Community Investment Strategy involved an extensive review of the state of our community health and human services. The partners held multiple consultations with residents, service providers and funders in many locations across Peel, involving different age and cultural groups and many languages.

What we learned

The consultation participants made valuable recommendations on strategies focused on collaboration, advocacy and championing social change. They also made suggestions on how these strategies could be implemented. Participants felt that the community would benefit from the United Way of Peel and the Region of Peel taking a leadership role in the work going forward.



A new approach

To guide this review, the United Way and the Region of Peel were inspired by the resilience framework of Sherri Torjman, as outlined in *Shared Space: the Communities Agenda*. A community's resilience is determined by its capacity to provide services in four independent but related areas or clusters:

1. **Sustenance:** meeting basic needs
2. **Adaptation:** helping people to develop coping skills and abilities
3. **Opportunity:** providing economic opportunities
4. **Engagement:** aiding active participation in society

This framework is useful in looking at the community in a whole and wide-ranging way. It moves out of compartmentalized approaches towards multi-sectoral approaches that are more collaborative and strategic to create and sustain meaningful change.

In order to have the greatest impact possible, community consultations identified nine population results that build resilience. The community also agreed on a shared goal that: ***all individuals and families in Peel are resilient and thrive within a vibrant community.*** To achieve this goal, investments are to be made in programs, services and initiatives that result in:

Resilient people

1. Supporting seniors to be healthy and live independently
2. Supporting individuals with disabilities
3. Assisting people who are vulnerable to abuse, especially women and children
4. Supporting people affected by mental health issues

Strong families

5. Supporting newcomers and immigrants to fully participate in community life
6. Assisting families and children to have a high quality of life
7. Empowering children and youth to reach their full potential

Vibrant neighbourhoods and communities

8. Reducing poverty, eliminating hunger, and ensuring people have access to affordable housing
9. Strengthening neighbourhood development efforts so that people can become involved and engaged in their community

Working towards improved accountability and impact

The United Way of Peel and the Region of Peel have adopted the Results Based Accountability (RBA) framework as a tool to work towards improving accountability and offer the ability to

effectively measure changes over time. RBA is a disciplined way of thinking and taking action that communities can use to improve the lives of individuals and families.

The implementation of the RBA framework is proving to be an effective tool to focus and discipline the Peel community's language, goals and processes to simultaneously track and measure successes at both an agency performance level as well as a population planning level.

Many social issues in our community – such as poverty, abuse, isolation and discrimination – are complex and cannot be addressed by any one group or organization. United Way and the Region of Peel, as two local funders, are modeling new approaches and behaviours in implementing this collaborative community vision. Strengthening agency capacity to measure and evaluate the impact of programs is a key strategy. The RBA framework will develop community action plans that leverage the strengths, skills and experiences of our community to confront the root of social problems; implement solutions; and build resilient communities.

Shared Infrastructure that supports collaboration

Community Door brings socially-focused agencies together under one roof where they benefit from combining their resources. Sharing physical space in a common facility and the option to access shared resources such as administration, information technology, meeting facilities and maintenance contributes to reduced operating costs.

This model better serves the community by centralizing a number of human and/or community health services in a single location and by channelling more resources directly into front-line client services.

Peel will benefit from the opening of two Community Door sites in 2011, one each in Brampton and Mississauga. The Region of Peel has supported the development of Community Door through repayable loans that fund a range of capital costs.

Reaching Out

Help a Community Left Behind

Don't overlook Peel - recognize demographic changes

We can't move forward without government

Equitable funding practices to better Peel's residents

Build on our existing body of work and strategies

To address deteriorating access to social and community health services in Peel, a multi-pronged approach is required. We need to work collaboratively within Peel across various sectors and with other levels of government.

While we understand the importance of finding new, innovative and efficient ways to deliver the services our residents need, we also must receive adequate supports and resources from our provincial and federal governments to meet the commitments and mandated requirements for these supports. Our continuing inability to do so, results from historic funding practices that no longer meet contemporary needs.



1. Don't overlook Peel - recognize Peel's demographics today:

- 57% increase in child poverty since 1996
- 15,000 households wait for social housing – with the longest wait time in the province
- Peel's senior population is increasing at almost three times the provincial and national rates
- Social and community health services are critically underfunded – one-third to one-half provincial averages.

2. **We can't move forward without senior levels of government - Intergovernmental and interministerial joint strategy development, investment and measurement**

As collaboratives, networks, organizations and service providers strive to combine limited resources for maximum impact, and to push for changes that can turn the curve on important issues affecting our community, the federal and provincial governments need to work with us to address the issues.

Without their support, these issues continue to grow and become detrimental to the health and resiliency of Peel residents. We cannot make significant progress on our own. There is a shortage of programs and services to respond to the needs of our residents, especially our most vulnerable. Investment, collaborative strategic planning, and engaging in meaningful collective action is essential.

Examples:

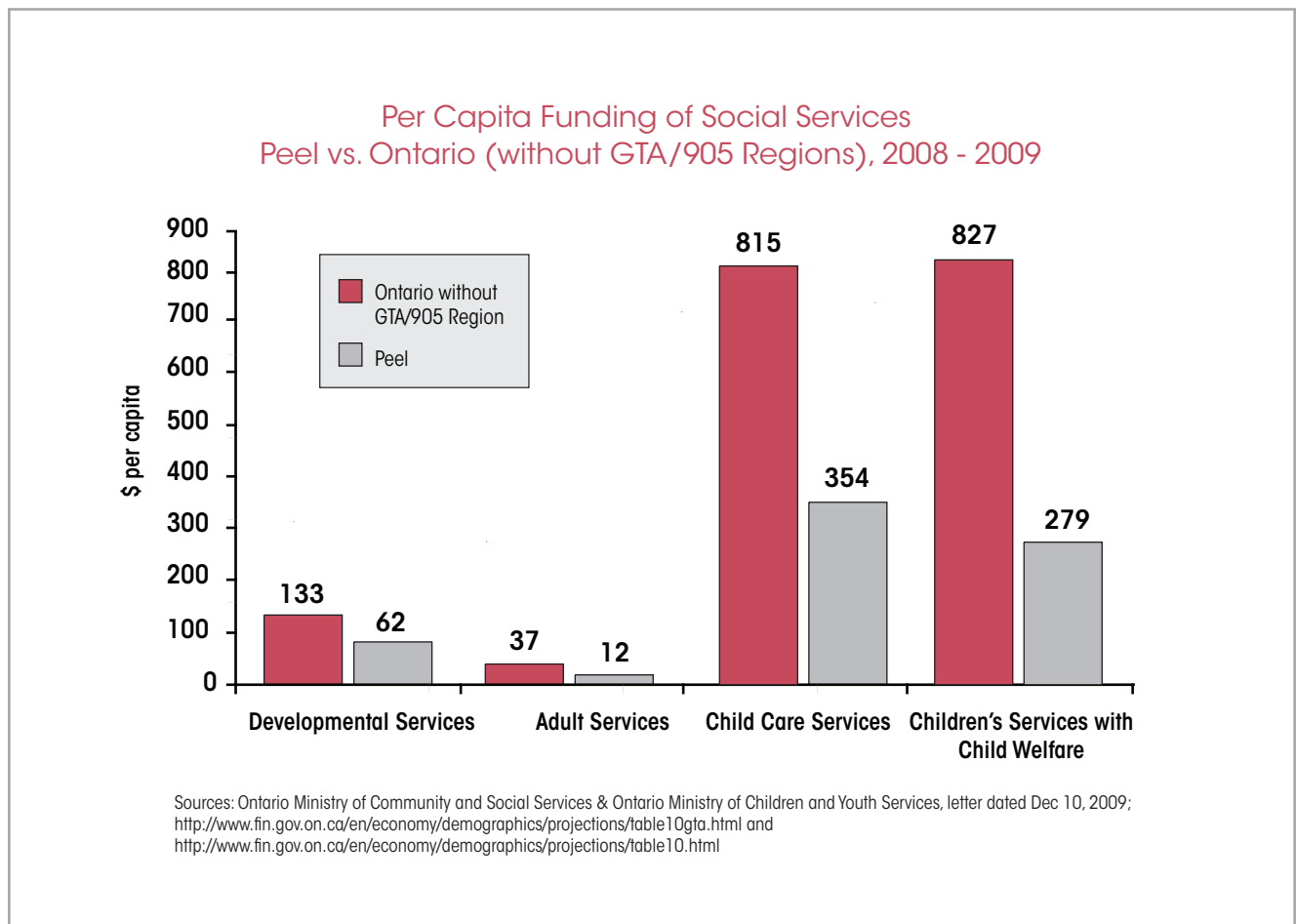
- Initiate discussions between the community, local and Regional Councillors, MPs and MPPs of high growth areas, and relevant provincial ministries and federal departments to develop an action plan.
- Develop a task force comprised of government and community representatives to develop a funding formula for the various services funded by the provincial Ministry of Children and Youth Services and the Ministry of Community and Social Services, Ministry of Citizenship and Immigration and the Federal department of Citizenship and Immigration. This revised funding formula will be population-based, taking into consideration the population numbers as well as the particular needs of a given area.

3. **Improving access to Services**

Peel and its community partners are working hard to ensure sufficient funding is in place so that all residents have improved and equitable access to social and health services. Over the next decade, plans to achieve funding equity will address growing service gaps between high growth regions and the rest of Ontario.

High growth communities need more support in achieving government goals and acknowledgement that all communities do not start from the same capacity base when pursuing government priority areas such as poverty reduction, mental health and addictions services, prevention of youth violence, and full day learning.

Funding equity will enable municipal and non-profit community health and human services organizations to serve residents and communities better and more effectively.



4. **Building on our innovative, creative and successful efforts**

Peel is proud of its ability to create home-based solutions that draw upon our strengths and resources and address the needs of our community. Building on our innovation, sharing best practices and strategies with other communities, acknowledging what is working for residents – we look to opportunities to share our knowledge with agencies, government and private sector proponents. It is only through a collaborative approach that we can make strides and great accomplishments in improving the standard of living and care of our most vulnerable populations.

Sources

Citizenship and Immigration Canada, Landing data, 2001-2009

Conference Board of Canada, Immigrants as Innovators: Boosting Canada's Global Competitiveness, October 2010.

Fair Share Peel Task Force website www.fairsharetaskforce.ca

Fair Share Peel Task Force, Mental Health and Addictions Issues Report to Provincial Select Committee: A Peel Perspective, 2010

Federation of Canadian Municipalities, Quality of Life Reporting System, Mending Canada's Frayed social safety net:

The role of municipal governments, April 2010

National Advisory Council of Women, Child Sexual Abuse Statistics

OCRCC-Ontario Coalition of Rape Crisis Centres

OECD Territorial Reviews, Toronto, Canada, November 2009.

Ontario Ministry of Finance projections; HRSDC Module 1 Elder Abuse Awareness

Ontario Ministry of Children and Youth, A Policy Framework for Child and Youth Mental Health, November 2006.

Parents Families and Friends of Lesbians and Gays (PFLAG) Canada website www.pflagcanada.ca

Peel Children's Aid Society website <http://peelcas.org>

Peel Children's Aid Society, We Care: Partnering to Protect Children in Peel, 2009

Peel Newcomers Strategy Group

Peel Police Services Board, Domestic Violence Occurrences, July 15, 2009

Peel Regional Police, 2005 Annual Statistical Report & 2009 Annual Performance Report

Region of Peel, Human Services Department

Social Planning Council of Peel, Portraits of Peel 2008

Statistics Canada, 1996, 2001 & 2006 Census, Target Group Profiles / Custom Data order, EO1163 Table 01 / Urban Poverty Project

Statistics Canada, Earnings and Incomes of Canadians Over the Past Quarter Century, 2006 Census, May 2008

Statistics Canada estimates, 2009, and Ontario Population Projection Updates, Ministry of Finance, Spring 2010

Statistics Canada, General Social Survey of Victimization, 1999 and 2004

Statistics Canada, Measuring Violence Against Women, Statistical Trends 2006

Statistics Canada, Transition Home Survey, 2004

Stimpson, L. and M. C. Best, Courage Above All: Sexual Assault Against Women with Disabilities, Toronto: Disabled Women's Network, 1991

Success By Six Peel, Status of Children in Peel, 2009: Reference Manual



2011

PORTRAITS *of* Peel

A Community Left Behind