

Report to the Community 2018/2019



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WELCOME FROM THE WARDEN

Welcome to the first 'Report to the Community' from the Dufferin County Equity Collaborative (DCEC). DCEC recognizes that no one should be disadvantaged from reaching their full potential because of their social, economic or environmental circumstances. Not all Dufferin residents start from the same place. Equity does not mean equality. In Dufferin County we know that inequity exists for many of our residents. DCEC is mobilizing community service agencies to collectively address inequities. This reports illustrates what collaboration in a small region can achieve.



No one agency, board, or council can address inequity on its own. The County of Dufferin applaud the work of DCEC and look forward to the next year and new successes.

Darren White

Warden
County of Dufferin

REFLECTIONS FROM THE CO-CHAIRS

Greetings from the Co-Chairs of the Dufferin Community Equity Collaborative (DCEC).

As Co-Chairs of DCEC, it is our privilege to be working with a talented group of members supporting and guiding our efforts in advocating equity in Dufferin. The work accomplished in 2019 by DCEC is comprehensive. As part of that work, we would like to share the results of this year's *Impact Report to the Community*. The report would not be possible without the involvement and support of our local service providers. We value and appreciation their dedication to this work and to the Dufferin community.

As co-chairs we would like to thank all of our active committee members and look forward to continuing to advance equity in the Dufferin community in 2020.

Anna McGregor

Director of Community Services The County of Dufferin

Louise Brooks

Health Promotion Specialist (HPS) Wellington-Dufferin-Guelph Public Health





WHO WE ARE

Dufferin County Equity Collaborative (DCEC) officially formed in 2018. It was created when the Dufferin County Poverty Reduction Task Force (PRTF) and the Local Health Integration Network (LHIN) Poverty Sub-Collaborative recognized they could benefit from combining their skills and knowledge. The first meeting was held in December 2018.



The collaborative is comprised of 26 member agents representing a diverse cross section of:



VISION & MISSION



EVERY RESIDENT OF DUFFERIN COUNTY WILL HAVE THE OPPORTUNITY

TO REACH THEIR FULL POTENTIAL



A COLLABORATIVE BROAD BASE OF STAKEHOLDERS WHO ARE WORKING TOGETHER TO IMPROVE THE QUALITY OF LIFE OF DUFFERIN COUNTY RESIDENTS

COLLECTIVE IMPACT

DCEC is a group of stakeholders committed to a common agenda through collaboration. We are better when we work together. Working on collective success through: of a group of important actors from different sectors to a common agenda for solving a specific social problem

-Kania & Kramer, Stanford Social Innovation Review, Winter 2011



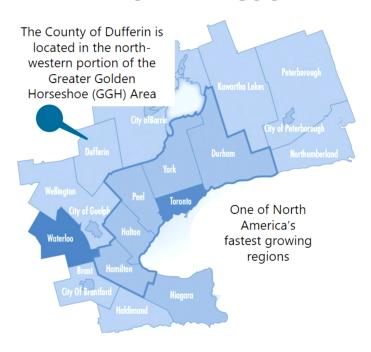








WE ARE DUFFERIN COUNTY



Made up of 1,486 square kilometers

and 8 towns and townships:

- Amaranth
- East Garafraxa
- Grand Valley
- Melancthon
- Mono
- Mulmur
- Orangeville
- Shelburne



40.7

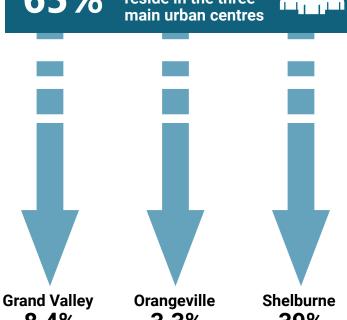
Median age of the population in Dufferin County

65% of the population reside in the three main urban centres



Dufferin is predicted to have **85,000** residents by 2041

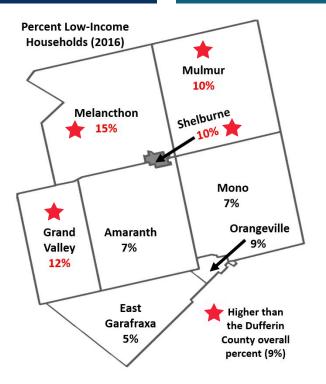
Population of Dufferin County 61,735 (2016)



8.4% population change from 2011 - 2016

Orangeville 3.3% population change from 2011 - 2016

39% population change from 2011 - 2016



THE DUFFERIN COUNTY CONTEXT

It is important to consider the work being done by DCEC within broader socio-economic trends. To do this, Statistics Canada (2016) data is provided on some key factors of the social determinants of health. The social determinants of health are the interconnected social and economic factors that influence the circumstances in which people are born, develop, live and age (World Health Organization, 2011).

IF DUFFERIN COUNTY WAS A VILLAGE OF 100 PEOPLE



tenant households would spend more than 30% of their household income on shelter costs



21

owner households would spend more than 30% of their household income on shelter costs



37

of those 75+ would spend more than 30% of their income on shelter



73

of those 15+ would commute outside of their municipality for work



6

individuals (15+) in the labour force would be unemployed



11

individuals 25-64 do not have a certificate, diploma or degree



15

family households would be lone-parent family households



11

of the children age 5 and younger would live in low income households

9

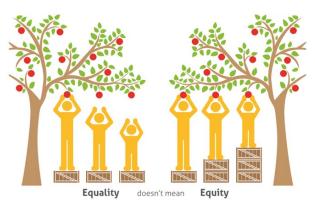
individuals would be living in low-income households

WHY EQUITY?

The equity lens for this collaborative focuses on goals designed to ensure everyone in our community has a range of opportunities so they can be successful, regardless of their starting point. Equity is achieved when each individual can reach their full potential and are not disadvantaged from attaining it because of barriers.

Equality doesn't mean equity. Equality means that everyone is treated the same regardless of their needs or circumstances.

Equity recognizes that some groups in our community may require extra support and resources to provide the same opportunities to reach and maintain their optimal well-being. Understanding additional barriers that individuals face and providing an opportunity to reduce those barriers, is the first step to achieving equity. Barriers may include low income, inability to access to healthy food, or unsafe housing. However, it is important to keep in mind that equity is subjective and personal.



(adapted from Health Quality Ontario, 2018)

DCEC is working towards reducing inequities, removing barriers and creating equitable opportunities that support the well-being for all members of our community.

CURRENT COMMUNITY PRIORITY AREAS

There are a multitude of barriers which effect an individuals ability to reach their full potential. However, the DCEC stakeholders agreed that three factors are top priority in Dufferin County at this particular time, these factors are:

- housing and homelessness
- employment
- health equity

These three areas have been the focus of DCEC's work since the December 2018 launch.

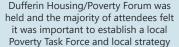


November 2015

February - September 2016

Summer 2016

TIMELINE



First three meetings on poverty were held on poverty reduction. First and second DC MOVES Forums took place Consultant was hired to conduct research to understand what poverty looked like in Dufferin County

PATHWAYS TO CHANGE

Over time, each priority area will see outputs, which lead to outcomes, and eventually impact. Impact will be achieved by taking action in each of the three pathways to change:

ADVOCATING, INFORMING & BUILDING AWARENESS



- Championing and giving a voice to the need for system and policy changes that reduce inequities
- Increasing public, influencer and decision maker awareness and will
- Informing stakeholders and decision-makers about local needs and priorities to influence policy and service design, delivery and evaluation

MINIMIZING SERVICE BARRIERS



- Defining the boundaries, actors and relationships in the system and providing service from a system lens
- Understanding service access through a client (patient, etc.) perspective
- Responding (to needs and designing system accordingly) from client perspective

INNOVATING SOLUTIONS



- Informing planning and decisions through evidence
- Creating or adjusting projects, programs, services and practices
- Recognizing and acting on opportunities to make immediate change to improve services

OUTPUT: the number of people affected or number of items produced by an action

OUTCOMES: Actions, behavior changes, etc., by key system actors that contribute to our goals (i.e. change in decision makers awareness of or interest in equity)

IMPACT: The effects of outcomes that contribute to our vision



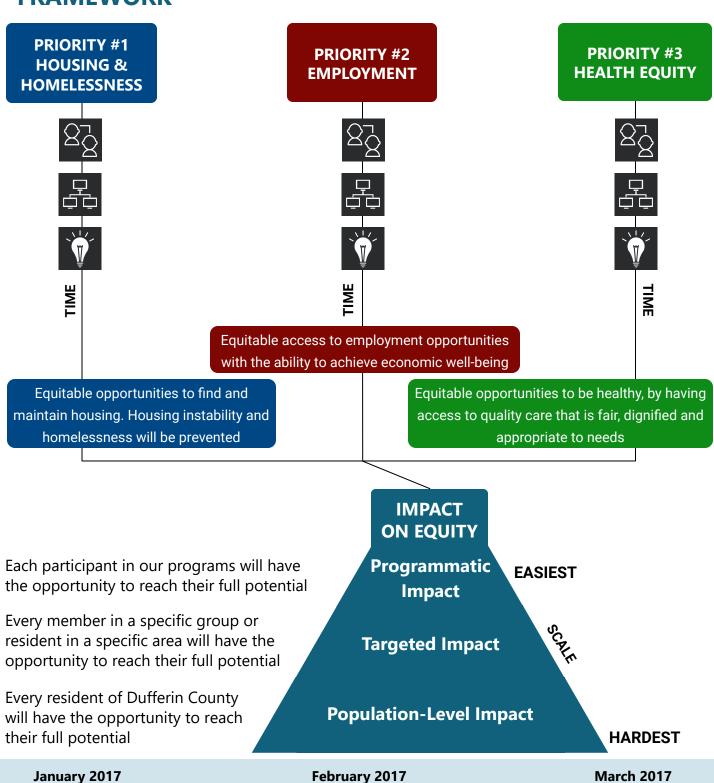
CONTRIBUTION: helped to cause or bring about

A NOTE ON CONTRIBUTION VS. ATTRIBUTION

Any impact that we have had or may have in the future does not exist in a bubble. It has also been influenced by many factors. Changes often occur due to multiple factors beyond one single group's actions. Throughout the rest of this report we will discuss impacts and outcomes in terms of understanding the contribution of our efforts.

October 2016 November 2016 December 2016

FRAMEWORK



PRIORITY #1 - HOUSING & HOMELESSNESS

BACKGROUND

The average resale price for homes within Dufferin have risen substantially over the past decade; however, incomes are not rising quickly enough to meet these increasing prices. There is also an insufficient availability of affordable rental units in Dufferin. There was a monthly average of 643 applicants on the Housing Access Dufferin Waitlist in 2018 and 487 individuals were served in some manner by the Homelessness Prevention Program in 2018. Every person in Dufferin County should have an affordable, suitable and adequate home. Having a wide variety of housing options in Dufferin means a higher quality of life for all residents. We need to raise awareness of the causes of housing insecurity and homelessness and identify and remove barriers to reduce inequities.

Homelessness: the situation of an individual or family without stable, permanent, appropriate housing, or the immediate prospect, means and ability of acquiring it. It is the result of systemic or societal barriers, a lack of affordable and appropriate housing, the individual/household's financial, mental, cognitive, behavioural or physical challenges, and/or racism and discrimination.

-The Canadian Observatory on Homelessness, Homeless Hub (2017)

GOAL

Members of the community will have equitable opportunities to find and maintain housing. Housing instability and homelessness will be prevented



HIGHLIGHT: STORIES OF SUCCESS

There have been **quicker collaborations** and turnarounds for the tight timelines for funding applications to the Province for supportive housing dollars. **Greater awareness** has been reached of what makes successful tenancies and how RentSmart will be able to assist clients and the community to maintain housing and prevent homelessness. There has also been **new connections** made, for instance with a local champion of Golden Girls Canada, who will be able to spread information about homesharing to a larger audience.

June 2017 November 2017 January 2018

INTENDED OUTCOMES

Increase awareness and buy-in of housing challenges in **Dufferin County**

ACTIONS

Investigate collaborative solutions for mixed housing with mixed living/sharing arrangements, which may involve:

- Zonina
- Joint planning
- Pooling dollars
- Building business cases
- Seeking grants
- Homesharing (i.e. Golden Girls, etc.)

Increase access to:

- Emergency
- Transitional
- Support accommodation options



PATHWAY



OUTPUTS

STATUS

Ongoing

8 attended Golden Girls presentation providing:

- Greater awareness
- New knowledge
- Connections
- Changed attitudes

 Voiced need for planning and policy changes

Completed

 Submitted 21 housing considerations to County Planning Coordinator

Headwaters Health Care Centre and County Collaboration, Submitted a supportive housing proposal to the Province

In progress

Greater support/ service(s) for individuals with complex needs

- Improve tenant outcomes
- Create/host renter education
- · Explore barriers and solutions (i.e. RentSmart)





- · Two County staff are RentSmart certified
- Presentation shared to 7 working group members providing:
 - Awareness of what makes successful tenancies
 - Information on it assists with maintaining housing and preventing homelessness

Spring 2018

May 2018

September 2018

Finalization process for roadmaps. Revisited priority areas and inventoried what was happening across agencies. Connected with the CW-LHIN Questions raised regarding Terms of Reference (TOR) and connection to DC MOVES. Discussions of amalgamation of DCPRTF and CW-LHIN Poverty Sub Collaborative

The two groups amalgamated. New TOR presented & ratified by electronic vote. Moved away from DC MOVES leadership. New name Dufferin County Equity Collaborative (DCEC) adopted. County of Dufferin & Public Health became co-chairs

In progress

PRIORITY #2 - EMPLOYMENT

BACKGROUND

Currently 73% of residents (15+) in Dufferin County commute outside of their municipality to work, and 54% commute out of the County for work, yet local businesses feel that an obstacle to their growth is the attraction and retention of talent. Residents are not able to access local jobs, while employers are having difficulty finding new hires. The majority of businesses in Dufferin have few or no employees. There is a lack of awareness of employment options in the County. Upcoming employee's expectations of the labour market do not align with employer's current expectations of employees - both need education. There is a lack of awareness in the local business community about what is required for a healthy standard of living in Dufferin. There needs to be measures in place to ensure that individuals can earn a *Living Wage*. We need raise awareness of what is required for a healthy living, identity and remove barriers to reduce inequities.

Living Wage is not the same as minimum wage, a living wage reflects what earners in a family need to bring home based on the actual costs of living in a specific community.

-Living Wage Canada, 2013



GOAL

Members of the community will have equitable access to employment opportunities with the ability to achieve economic well-being

HIGHLIGHT: STORIES OF SUCCESS

There has been a **re-connection** with those previously at the table under former committees, and an increased **awareness** of what is happening in the County across a broad spectrum. The group now has a **greater collective understanding** of the mismatched expectations of employees and employers. Challenges have been updated based on new data. There has also been a **rejuvenated will** to work together to address employment from a collective perspective, knowing how we can **leverage** each others work.

October 2018 December 2018 February 2019

INTENDED OUTCOMES

Increase awareness of the challenges employees face in Dufferin

ACTIONS

- Connect with Workforce Planning Board Waterloo Wellington Dufferin and local Economic Development officers on groundwork.
- Research what others are doing including (Dufferin Board of Trade, etc.)

PATHWAY

IVVAY

OUTPUTS

STATUS

sharing Completed

Held 4 data sharing meetings re-connecting with other parties and their work. The meetings led rejuvenated will among partners

Increasing awareness.
Increased from 9 to 14
working group participants

More opportunities for residents to work within Dufferin County and reduce commuting

Contribute to/leverage the work being done through Economic Development and other partners within Dufferin



Greater collective understanding across the group about projects and activities in progress

In progress

Providing opportunities to leverage each others work to improve outcomes for employees. For example, work has commenced on the Job Board. It will be the largest in the County. It also offers additional information (career pathways, a mapping tool, etc.)

Jointly investigating transportation solutions for employment equity

Participate in transportation planning initiatives including:

- Ride sharing programs
- Car share programs
- Phone apps
- School bus transportation between Dufferin's more urban centres

March 2019

April 2019



PRIORITY #3 - HEALTH EQUITY

BACKGROUND

Increasing food costs affect low-income individuals and families. The latest research indicates that at least 14% of households in the County experience food insecurity. Inadequate income leads to this inability to purchase nutritious food on a consistent basis. Individuals experiencing food insecurity are more likely to report poorer physical, mental and social health. Food services exist, but do not provide a solution to the root cause of the problem. Food insecurity cannot be managed. Working collaboratively to address the root causes will require addressing the factors that limit food purchasing, including the lack of adequate income. We need to identity and remove service barriers to reduce health inequities.

Health equity means that all people can reach their full health potential and are not disadvantaged from attaining it because of their race, ethnicity, religion, gender, age, social class, socioeconomic status or other socially determined circumstance.
-Whitehead & Dahlgren, 2006

GOAL

Members of the community will have equitable opportunities to be healthy, by having access to quality care that is fair, dignified and appropriate to needs



HIGHLIGHT: STORIES OF SUCCESS

The adoption of the health equity priority led to the **amalgamation** of several existing tables, including **12** new members, to form DCEC. Recognizing one of our largest **barriers**, **3** member agencies - Dufferin Area Family Health Team (DAFHT), Orangeville Food Bank (OFB) and the Central West Local Health Integration Network (CW-LHIN), started a 6-Month Health Equity Pilot Project. Staff from DAFHT and CW-LHIN have prepacked boxes of non-perishable food containing three days worth of food at their agencies. These boxes can be taken on home visits or available when clients attend appointments. In addition, non-perishable food will be accessible to clients within the DAFHT office, providing an opportunity to introduce clients to the services of the OFB and immediate hunger relief. For clients that are house-bound, the agencies are able to take orders from clients for perishable and non-perishable items. Items are packed by OFB and taken by agency staff when attending the next home visit.

May 2019 June 2019

INTENDED **OUTCOMES**

PATHWAY

OUTPUTS

STATUS

Raise awareness of the root cause of health equity issues within the community

Develop and deliver health equity training(s) to:

ACTIONS

 Build capacity and local health equity



20 attended *Empathy* Effect & C.A.R.E. Training Sessions

Completed

raise awareness of

issues



94 attended *Bridges Out* of Poverty including members of County Council

Awareness raising and capacity building for health equity at the local institutional levels

 Build capacity and increase awareness of health equity impact assessments (HEIA) as a tool to identify barriers in new programs and services in Dufferin County





Connection to Ontario Public Health Association for potential HEIA training & online HEIA training course added to the DCEC webpage

In progress

Identify and remove service barriers to reduce health inequities

Complete the knowledge picture. Increase understanding of lived experience and what would help to lessen the impact

Plan and implement a research study to gain a better understanding of the lived experience of poverty in Dufferin County







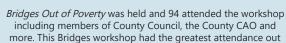
3 DCEC member organizations developed a six-month pilot project to deliver food to community members who experience barriers to accessing services

Instigated the groundwork for lived/living experience connections

In progress

September 2019

October 2019



of any Bridges training held in Dufferin County before

NEXT STEPS



- Expand collaborative to include the voice of lived/living experience
- Continue to strengthen collaboration with members and partners



- Increase and align data collection to make more meaningful reporting
- Fill current data gaps to inform actions



- Improve process by continuing to approach actions with systems thinking
- Leverage what we each bring to the table, ensuring everyone can contribute within our Theory of Change framework



 Move forward and have progress on medium and long term actions with a focus on defining desired outcomes and impacts



- Drive roadmap for next year and beyond from a continuous improvement mindset
- Take into account changes in the environment, community and government policy

CALL TO ACTION

We open the invitation to others to join the effort to improve the lives of the residents of Dufferin County.

How you can be part of the action:

- Share this report with your contacts
- Spread the word about DCEC
- Visit the website, Facebook, Twitter and share our posts
- Answer surveys
- Visit and take part in Join In Dufferin
- Attend trainings and workshops that are available

Website:



http://dcmoves.org/prioritypillars/dufferin-countyequity-collaborative/

Facebook:



www.facebook.com/dufferi ncountyequitycollaborative

Twitter:





ACKNOWLEDGEMENTS

We gratefully acknowledge the efforts of all individuals, local agencies and service providers involved in this collaboration. We appreciate and want to thank all of you. Let us continue together with our collaborative approach to creating a vibrant, equitable, inclusive and healthy community.

DCEC is pleased to have partnerships with many of the local human services agencies. Together we are making progress towards having an impact. In particular, we would like to thank County of Dufferin Council, our co-chairs, voting members, member agencies and all partners. Thank you to also to our working group members, presenters and event attendees. Special thanks also to the Tamarack Institute and the Cities Reducing Poverty Team.

This Impact Report was developed with the support of Tamarack Institute – Vibrant Communities' Getting to Impact program.







VOTING MEMBER AGENCIES:

- Alzheimer Society of Dufferin County
- Bethell Hospice Foundation
- Canadian Mental Health Association Peel-Dufferin
- Catholic Family Services Peel-Dufferin
- Choices Youth Shelter
- Community Torchlight
- Dufferin Area Family Health Team
- Dufferin Child & Family Services
- Dufferin County Community Services
- Family Transition Place
- Friends & Advocates Peel
- Georgian College

- Habitat for Humanity
- · Headwaters Health Care Centre
- Hospice Dufferin
- Humber College
- Central West Local Health Integration Network
- Ontario Telemedicine Network
- Orangeville Food Bank
- Orangeville Police Services
- Services and Housing In the Province
- United Way Guelph Wellington Dufferin
- Upper Grand District School Board
- Wellington-Dufferin-Guelph Public Health
- Workforce Planning Board of Waterloo Wellington Dufferin



MEASUREMENT APPROACH

The approach DCEC is using in this work is a a multi-dimensional framework model with a myriad of data sources from our stakeholders and partners. At the population level, we are using the Social Determinants of Health to measure overall impact. However, this data is only updated every five years with the Statistics Canada national census. At the targeted and programmatic levels, we are tracking multi-dimensional indicators from a variety of data sources.

METHODS

Data was gathered from a variety of sources including:

- Priority area working group partners
- Statistics Canada
- Wellington-Dufferin-Guelph Public Health Interactive Reports and other data
- County of Dufferin Community Services program data and previous reports to County Council
- Other stakeholders from the larger group

LIMITATIONS

There are some limitations with the data presented in this report, these include:

- 1. The wide variety of indicators used by diverse groups to track outcomes and impact. While all stakeholders have agreed to a general working definition of equity, it is difficult to have everyone use the same indicators to track progress. As a result, while all the member agents are measuring change, they have different ways of doing so
- 2. The mixed quality of the data gathered on outcomes and impact. The stakeholders have different levels of resources and expertise to measure progress
- 3. Those providing the data for this report are all producing information at different times. This means that the "snapshot" presented in this report is really a collection of "little snapshots"
- 4. The difficulty in determining the extent to which our efforts rather than some other factors have influenced the outcomes and impacts described in this report
- 5. The subjectivity of equity. The report focuses on capturing the general progress, a general moving towards equity, rather than judge it with a definitive bottom-line

With these limitations in mind, the data contained in this report still offers the broader community an update on the key activities implemented in the priority areas and a picture of DCEC's overall progress thus far.