Rethinking Community Safety in Ottawa
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Rethinking Community Safety in Ottawa

In the wake of growing concerns in Canada and across North America about anti-Black racism, anti-Indigeneity, and the ongoing reassessment of community safety systems, several Community Health and Resource Centres (CHRCs) recognized a need to re-examine how resources are deployed to address safety needs here in Ottawa. Working with partners with a background in related efforts, and members of the communities most affected by systemic issues, the CHRCs developed this report to help guide critical first steps in that process.

The report explores how well current community safety systems are achieving the goals they set out to meet. Most notably it looks at how effectively policing is meeting community needs and producing outcomes that actually keep Ottawa safer. Where policing is not proving to be an effective tool to produce greater safety, the report looks at other jurisdictions to see what alternatives are effective elsewhere, and looks at Ottawa’s own capacities to see where we have the tools, and ready opportunities, to do better.

This report is one modest part of broader, long-standing community efforts to bring about change. While it explores how existing service providers could scale up their programs to better respond to community crises immediately, it also begins to consider what an expanded network of services could achieve, including how less formal, less established, more grassroots services could be supported to play a larger role. Black, Indigenous, and racialized people have been most affected by the ongoing challenges in community safety. Their work is the foundation of this effort; their guidance has been invaluable in this process; and their leadership is central to the success of potential change, especially given the extensive work all established, mainstream organizations need to do to address racism and systemic discrimination.

This report identifies a wide range of opportunities that Ottawa City Council can pursue to better apply existing spending to improve community safety. It supports the City’s efforts to look beyond the traditional criminal justice approach to safety and to fully explore its current effort to adopt a community safety and well-being approach. Although extensive, this report is not exhaustive. It is a starting point for exploring how the funds that the City now spends, which may not be achieving its objectives, can be refocused on more effective models that improve outcomes for all Ottawa’s residents, especially those least well served by the current system. It also represents a step away from the perennial focus on external funding sources and looks more closely at how Ottawa can make the most of its own, current spending. Focusing funds on systems that work also leads to greater efficiency by addressing the scarcity of funding that hampers those valuable systems. Programs run off the sides of desks, or strung together from multiple funding sources, are always going to struggle more than those robustly funded and appropriately supported.

We present this data as a starting point for work that could happen tomorrow to make the community safer for everyone, but also as an invitation to all Ottawa residents to imagine how to create safety in our city in even better ways, using new models that aren’t fully explored or aren’t yet imagined in this report. These are big issues that rarely change in one step or one day.
We encourage City Council, and the whole community, to take the steps immediately available, and to begin to plan for future years and future opportunities, including ongoing efforts to explore better models for community safety in future years and in future budgets, and to ensure that those who do not see themselves represented play an active role in rounding out this analysis to make it more representative of organizations that are led by and for the BIPOC community.

**Methodology**

The CHRCs reviewed the literature on community safety, policing, community services, and supports for vulnerable people, communities, and neighbourhoods in Canada and across North America. The review included academic studies, media reports, and reports by community-based organizations. The CHRCs also conducted a review of Ottawa Police Service (OPS) data, Ottawa Police Services Board (OPSB) minutes, published reports, and statistical data, and studies and analyses about the OPS conducted by local organizations, the Ontario Human Rights Commission (OHRC), and the media.

The CHRCs interviewed non-profit service providers in Ottawa to explore their roles in providing services and programs that affect the safety and well-being of people who face barriers. While we were not able to interview all service providers, we completed over forty interviews and were able to identify clear patterns and recurring themes as the scope grew. We also interviewed leaders in the communities affected by systemic racism to draw on their ongoing work to address these issues and root our analysis in their guidance. Their feedback was aggregated to provide anonymity to respondents in order to increase the candor of their responses. Throughout this report we routinely refer to data received from these participants as “information obtained from over forty interviews with staff delivering community services in Ottawa” in footnotes. The limitations of this research are outlined in the appendix.

The CHRCs collated the data, both across Canada and locally, to help foster a better understanding of how community safety systems work now, to examine their strengths and weaknesses, and to support the community to consider the alternatives that exist now in Ottawa. We wanted to find out what economically sustainable options currently exist to improve safety and community well-being in Ottawa, and what options could produce better outcomes for vulnerable people and the whole community.

This analysis is not designed as a critique or a promotion of any service. It presents information to enable policy-makers to ensure that the right people, with the right skills, training, and approaches, are sent to the right places at the right times to facilitate optimal outcomes. This report looks at investments in existing services that could be scaled up immediately, but it only begins to explore where grassroots efforts and emerging programs might play a greater role.
Race and Policing

Although many Canadians feel that racism is more of an American problem than a Canadian problem, and that the multicultural Canadian context is more equitable than the US context, research on the criminal justice system, and the experience of racialized communities, shows a less encouraging picture. There is profound concern about the impact of policing on Black, racialized, and Indigenous communities. Recent events, including the deaths of Ottawa’s Abdirahman Abdi, as well as Rodney Levi, and Chantel Moore in New Brunswick, D’Andre Campbell in Brampton, Ejaz Ahmed Choudry in Mississauga, and Regis Korchinski-Paquet in Toronto have brought into stark relief the long-standing issue of disproportionate policing, violence, and death facing Indigenous, Black, and other racialized communities. Studies have repeatedly shown what communities have known for a long time: police stop, arrest, and search Black and Indigenous people more often than they engage with white people—here in Canada as well as in the United States.

A recent CivicAction report demonstrates “the depth and pervasiveness of anti-Black racism in Canada, and how systemic racism against Black individuals appears across their full lifecycle in areas like education, employment, healthcare, and policing.”¹ Black and Indigenous people in particular, but also other racialized people, are more likely to be expelled from school, underpaid at work, underserved in our healthcare system, and most disturbingly, to die at the hands of police.²

An analysis of policing in Halifax in 2019 showed that Black people were six times as likely as white people to be stopped for street checks.³ In 2017, Indigenous people accounted for over 16% of street checks in Vancouver, despite making up just over 2% of the population and Black people accounted for 5% of the checks despite making up less than 1% of the population there.⁴ A Montreal study found that almost one in every six Indigenous people were stopped in street checks, and one in every seven Black people were stopped while the rate for whites was less than one in twenty.⁵ Analysis of Toronto police statistics showed that Black people were 3.8 times as likely to be “carded” as white people and that brown people were 1.8 times as likely to be stopped.⁶ Black people make up 7.2% of the prison population in Canada⁷ but only 3.5% of

² Ibid.
the overall population, making them more than twice as likely to be incarcerated. Indigenous people are five times as likely as the rest of the population to be incarcerated, and constitute 25.2% of the prison population though they make up only 4.9% of the population as a whole.

According to an Ontario Human Rights Commission (OHRC) study in Toronto, Black people are five times more likely to experience low-level use-of-force than white people and made up approximately 30% of police use-of-force cases that resulted in serious injury or death, despite representing only 8.8% of Toronto’s population.

Black people make up 60% of deadly encounters with police, and 70% of fatal police shootings involved Black people, making them nearly twenty times more likely than white people to be involved in a fatal shooting. In Winnipeg, Indigenous people make up about 10.6% of the city’s population, while constituting over 60% of those who died in police encounters between 2000 and 2017. Between 2007 and 2017, more than one-third of people shot to death by the RCMP were Indigenous, despite Indigenous people making up less than 5% of the total population.

Ottawa is not an exception.

**Race and Policing in Ottawa**

**Street checks show race bias**

Studies show that street checks in Ottawa were disproportionately applied to racialized groups. A 2015 report showed that 20% of the over 4,000 people stopped the previous year were Black and 14% were Middle Eastern, though they make up under 6% and 4% of the population respectively. Only 58% of those subject to street checks were white despite their representing 74% of the population.

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10 Statistics Canada, “Census Profile, 2016 Census.”


12 Ibid.

13 Ibid.


Traffic stop study confirms findings
Two subsequent studies on traffic stops showed that these challenges were persistent, even when considerable focus was put on addressing the problem of inequitable policing. An examination of over 80,000 traffic stops between 2013 and 2015 revealed that only 69% of the people stopped were white although white people make up 74% of Ottawa’s populations, while 12% were Middle Eastern and almost 9% were Black, though they make up under 4% and 6% of the population respectively. Young, racialized males in particular are heavily overrepresented. Young Middle Eastern men were about twelve times as likely to be stopped as their population would indicate, and young Black men were stopped over eight times more often than their population would indicate.18

Studies show limited progress even after high-profile review
Studies show limited progress even after high-profile review. The study on race data and traffic stops in Ottawa generated considerable concern and a careful review of its implications. New policies, programs, and training, including the Community Police Action Committee (COMPAC), the Newcomer Initiative, and the implementation of the Multi-Year Action Plan for Bias-Neutral Policing, were put in place. Nonetheless, progress has been limited. Further analysis of police activity, published in 2019, continued to show disproportionate focus on Black and Middle Eastern people.19 Middle Eastern drivers were still stopped roughly three times as often as their population would indicate, Black drivers were still stopped more than twice as often, and white drivers were still as underrepresented as before.

The only significant improvements lay in the reduction of traffic stops for young Black and Middle Eastern men. Those rates, though lower, were still disturbingly high: young Middle Eastern men were stopped almost nine times as often as their population would indicate, and young Black men were stopped almost seven times as often as their population would indicate. The overall pattern was described in a report commissioned by the OPS as “consistent with findings of racial profiling” that “cannot be justified.”20 A 2018 survey conducted by the OPS revealed that only 56% of respondents were satisfied with the police’s level of cultural sensitivity.21

These results are even more concerning since the OPS was undertaking its Multi-Year Action Plan for Bias-Neutral Policing during the period under study. The program, which spent approximately $500,000 in the 2017 fiscal year alone,22 consisted of audits, accountability measures, and

19 Ibid.
20 Ibid.
training. Researchers also found these survey results after the police had delivered their Fair and Impartial Policing (FIP) program to all officers in 2016, and adopted their Human Rights and Racial Profiling Policy.\textsuperscript{23}

These challenges are consistent with statistics on policing across jurisdictions, which indicate that ongoing race bias in policing is common in North America and persists despite expensive investments in training, reform, and transformation.

**Use of force**

We were not able to find disaggregated data indicating how force is used by police in specific communities in Ottawa. However, Ottawa’s use-of-force statistics remain cause for some concern. The use of force has risen considerably over the last five years. Although there is significant year-over-year fluctuation, the overall trend is rising rapidly. Over the last five years for which there are data (2015 to 2019) use of force has risen more than 30% overall and discharge of firearms has risen more than 50%. The category for taser use has risen just under 50%. These increases are all the more concerning when taken in the context of the declining number of police calls. Overall force per call has risen over 50% and use of firearms and tasers per call are up 75%. Perhaps the high rates reflect the fact that OPS recruits receive more training on the use of force than on any other area of police work.\textsuperscript{24}

**Costs**

Despite the police service’s performance on race-based policing and use of force, the City of Ottawa has consistently invested more and more in the OPS. The police budget rose almost $50 million from 2015 to 2019,\textsuperscript{25} roughly 240% the rate of inflation.\textsuperscript{26} Despite these rapid increases the OPS went over budget by at least $4 million every single year over that period.\textsuperscript{27} These rapid increases in costs have brought annual salaries and benefits for staff members in the OPS to over $140,000 on average.\textsuperscript{28}

These high costs raise questions about the appropriateness of sending police to situations that might be better handled by others. There is a comparatively low rate of specifically criminal, dangerous, or violent incidents among the calls the OPS responds to, and therefore little justification for being attended by staff who are armed or experienced in addressing violent situations. According to the Ottawa Police Services 2019 Annual Report, of the 709,000 calls received by the OPS, only 35% (246,000) resulted in police responding at all. Most were low-

\textsuperscript{23} Ibid.


\textsuperscript{27} Ottawa Police Service, “Cost of Policing.”

\textsuperscript{28} Ibid.
priority calls that required no direct police presence. Of those calls attended by police, 40% were generated by the police themselves, not by members of the public. Even when police attended calls, the urgency and physical risk appear to have been modest in most cases.

Police took reports of any kind in less than half (43%) of the calls they attended. Only one in six calls that police attended involved an actual criminal code violation, and only one in sixty was a call involving a crime in progress or potential physical danger. In short, the 1,200 front-line investigative staff at Ottawa’s Police Service29 attend about 42,000 crime scenes per year (roughly three every month per person). They attend about 4,300 incidents that involve ongoing crime or danger, or just over three per year per person. Only 34% of those crimes are solved.30

These statistics should generate interest in assessing whether the expenditures are achieving optimal results. An analysis of four areas of policing suggests that alternatives may be an attractive option.

We examined community safety strategies that address homelessness, mental health and addictions, youth, and violence against women to assess how well Ottawa’s current strategies are working, and whether there are other approaches that might yield better outcomes without increasing the overall investment made by the City of Ottawa. These approaches offer alternatives to policing, but do not, alone, fully address the need to address racism and systemic discrimination affecting Black, Indigenous, and racialized communities. There is considerable work still to be done to help the community service sector fully adjust their work to properly meet the needs of these communities, and more work still to expand support and resources for Black- and Indigenous-led organizations and grassroots initiatives that continue to develop, modify, and reorient programs to address the realities of the communities most marginalized by racism and systemic discrimination.

Potential Areas for Non-police Interventions

Homelessness and the precariously housed

Cost and volume of current police interventions

We were not able to obtain any comprehensive statistics on the policing of people experiencing homelessness in Ottawa because no such data is published by the OPS. However, the available information indicates that significant OPS resources are expended on policing the homeless—with questionable results.

Direct interviews with those who work most closely with people experiencing homelessness in Ottawa confirm that Ottawa falls within the range found in North American research, which indicates that people experiencing homelessness interact on average over forty times per year.

with police, twenty times the average for most people.\textsuperscript{31} In Ottawa there are over 1,400 people experiencing homelessness on any given day,\textsuperscript{32} and over 8,000 people who experience homelessness in any given year.\textsuperscript{33} A disproportionate share of them come from marginalized communities.\textsuperscript{34} For example, official estimates indicate that 24% of people experiencing homelessness in Ottawa are Indigenous (though Indigenous leaders suggest the real figure is significantly higher),\textsuperscript{35} even though only 2.5% of the population is Indigenous.\textsuperscript{36} Considering that a typical person experiencing homelessness interacts with the police over forty times each year,\textsuperscript{37} and that over 1,400 people in Ottawa experience homelessness each day, we estimate that police interact with individuals experiencing homelessness at least 60,000 times per year. OPS data indicate that the cost of this volume of interventions is at least $25 million per year.\textsuperscript{38}

However, the cost of policing people in precarious housing is even greater. While no data is available for the interventions for most people struggling with housing, some housing providers have tracked police interventions at their addresses. Police make thousands of visits to affordable housing developments every year, but these visits are primarily for noncriminal, nonviolent issues such as disturbances. Totalling in excess of 14,000 calls per year,\textsuperscript{39} these interventions make up at least 4% of all calls that the OPS attend, at a cost of roughly $14 million. Similar calls are made to private-market homes where tenants are in various types of crisis, but where no laws are broken, and no one is at risk of harm. As a result, housing-related police costs can reasonably be estimated at $40 to $50 million per year.

**Impact**

Police and public officials express frustration at dedicating time to policing those experiencing homelessness, recognizing that it has little, if any, impact on serious criminal activity.\textsuperscript{40} Most interactions between police and people experiencing homelessness relate to quality-of-life infractions and the complications of living in public, such as sleeping in public places, not having access to a bathroom, or public intoxication and have little to do with crime or safety. Despite this, Ottawa police focus heavily on people experiencing homelessness. After the passage of the

\begin{footnotesize}
\begin{itemize}
  \item City of Ottawa, “Everyone Counts, Ottawa’s 2018 Point-in-Time Count.”
  \item Information obtained from over forty interviews with staff delivering community services in Ottawa.
  \item Rountree, Hess, and Lyke, “Health Conditions Among Unsheltered Adults in the US.”
  \item Ottawa Police Services, 2019 Annual Report.
  \item Information obtained from over forty interviews with staff delivering community services in Ottawa.
\end{itemize}
\end{footnotesize}
Safe Streets Act, ticketing of people experiencing homelessness in Ottawa rose rapidly, from 103 tickets issued in 2000 to 1,527 issued in 2006. In all, nearly 5,000 tickets were issued in that period, over half of them to people who received six or more tickets.

Intensive policing of people experiencing homelessness continues. The 2013 “Nuisance Enforcement Project” added fourteen officers to patrols in the downtown core in response to “complaints about vagrancy” and issued 1,607 tickets in just two months. “Vagrancy” calls continue to be a prominent factor in Ottawa policing. Police reported that homeless-related calls rose 94% last year, reaching 180 calls per month last spring.

But all this activity has little effect. People who work most closely with the homeless population, local residents, and businesses express frustration with these practices, and call ticketing “a joke.” They note that few tickets are ever paid, and that ticketing serves to create only the illusion of action, since the police have no effective tools to address homelessness. Data from the early 2000s confirms this. A total of 14 of the 4,882 tickets issued were actually paid. Those tickets, however, do have a serious consequence. Unpaid fines can pile up to produce more serious offences, including breaches of court orders, that result in unnecessary incarcerations.

The high rate of relatively ineffective ticketing reflects the fundamental challenge with policing people experiencing homelessness. Police themselves concede that they do not have the tools to tackle homelessness, and are not the best placed to address the circumstances that people experiencing homelessness face. In interviews, service providers note that interactions between police and their clients are often unproductive. They note that their clients tend to “scatter” when any police presence appears. Some noted that their work becomes more challenging when it intersects with the justice system, adding “police disrupt our clients just by being there.”

More effective approaches
Community service providers, in contrast, offer a range of interventions that more effectively respond to the issues related to people experiencing homelessness and the communities around them. Research shows that services focused on the real needs of people experiencing homelessness dramatically reduce justice system interventions, including arrests, incarcerations,
and court time. Evaluations of these types of programs show that they succeed at moving people experiencing homelessness from the streets to stable housing, with appropriate supports, and in the process reduce arrests by as much as 80% and incarceration time by as much as 90%49 (as well as cutting time in hospital emergency rooms by as much as 60%).50

Follow-up studies on people experiencing homelessness in Toronto, for example, showed that a full range of supports resulted in a 56% reduction in arrests and a 68% reduction in incarcerations (as well as a roughly 40% reduction in ambulance and emergency room use).51 Community service providers in Ottawa estimate that justice involvement drops by 80% when appropriate services are made available. As one Ottawa service provider noted, in most cases “the homeless guy doesn’t need a cop—he needs some water and a pair of socks.” Of course the greatest impact is providing that person with a safe and stable place to live.

Appropriate interventions can have dramatic impacts across system costs. People whose disruptive behaviours, after years on the street, include violent outbursts and other repeatedly harmful behaviours lead to perennial involvement with police. This group of homeless people use the healthcare system frequently, and many people see this population as impossible to house. But the right supports can and do have an impressive impact. Within local supportive housing services there are people who initially require as much as intensive twenty-four-hour support, but they progressively graduate to eighteen hours, and then eight until they live independently. Those community service investments are substantial, but they lead, over time, both to dramatic reductions in system costs and to exceptional improvements in a person’s quality of life.52

The opportunities to reduce overall costs by reducing reliance on the justice system are considerable. With a police interaction costing between $1,000 and $2,500 per incident, an average trial costing over $6,000,53 and a day in jail costing between $200 and $30054 there are a lot of potential savings. Even when investments are in fields normally managed by other levels of government, municipalities do well to step into the breach since they end up paying the costs through their police budgets if they can’t ensure the right supports in community services.

51 City of Toronto, What Housing First Means for People: Results of Streets to Homes 2007 Post-occupancy Research (Toronto: Shelter and Housing Administration, 2007).
52 Information obtained from interviewing over forty staff delivering community services in Ottawa.
The ineffectiveness of a justice system response to homelessness has led cities across North America, including places like Olympia, Washington; Honolulu, Hawaii; Chicago, Illinois; Denver, Colorado; and Charleston, North Carolina, to shift to offering relevant supports to people experiencing homelessness as their first line of response and decreasing police involvement in noncriminal, nonviolent issues related to people without homes.

Ottawa has a distinct advantage in that area. Ottawa already has a wide range of relevant and effective services that, if appropriately scaled up and coordinated, could dramatically reduce the volume and costs of policing and improve outcomes for people experiencing homelessness. These services represent readily available programs that can be upscaled. They are, however, not the exhaustive list of potential investments, especially given the role of grassroots, informal, and smaller-scale programs that are best attuned to the needs of marginalized communities, nor are they necessarily programs that are without the need for further development to ensure that they fully address issues of systemic discrimination.

**Drop-ins and day programs.** A significant proportion of police activity is generated by the fact that people experiencing homelessness have no place to go. Public intoxication, sleeping in public, trespassing, and other issues are the result of what one service provider called “the consequences of living your whole life in public.” Having a place to go can ameliorate that. Unfortunately, Ottawa’s “day programs” are chronically under-resourced. These programs typically provide access to bathrooms, showers, food, laundry, as well as harm reduction, social supports, and social interaction with peers, and a quiet place to go. However, these programs tend to operate about six hours per day, leaving large gaps, and they have too little space and too few locations to fully meet people’s needs.

Demand for these services is high. Centre 507 does 50,000 interactions per year, St. Joe’s Centre has 13,000 visits per year, while others provide for tens of thousands more. Current programs, often scraped together with a mix of funding, fundraising, volunteer time, and donated space, cost between only $400,000 and $800,000 per year. Today an investment of $1 million could create a new, robust program in any one of the neighbourhoods in need of these services, or double capacity at an established centre.

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60 Information obtained from over forty interviews with staff delivering community services in Ottawa.
61 Ibid.
62 Ibid.
More intensive supports are also needed. A low-barrier drop-in, especially one based on harm-reduction principles that enable people with serious substance dependencies to participate, would be a significant asset to Ottawa’s community service infrastructure. Expansion of the more intensive health and social support programs like Ottawa Inner City Health and Centretown CHC’s Urban Health Program, with clinical services and actively supported transfers to other services, would provide complex care and prevent millions of dollars in health and other intervention costs. These programs also reduce the number of crises that the justice system deals with by giving people a place to address emerging issues before crises arise. Expansion here is also achievable at a modest cost. While higher-cost healthcare professionals play a role in this work, front-line service providers note that “a little psychiatrist goes a long way” in this model, which tends to see nurses and social workers shouldering most of the burden. Expansions that could more fully meet local needs, or provide service in new geographies, are achievable for between $500,000 and $1 million.

**Outreach and crisis support.** While many people experiencing homelessness need a place to go, in times of intense challenge their issues are best resolved when service providers can reach out and intervene directly where the problems are happening. Ottawa has taken some important steps toward resourcing that capacity, but there are significant gaps. The Centretown Community Health Centre’s Urban Health Program, Ottawa Inner City Health, and the Homeless Crisis Outreach Program at Somerset West CHC all provide outreach programs that support street-involved people who have complex needs. They offer basic care, conduct referrals, and provide necessities like water and clothes.

The homeless Crisis Outreach Program at Somerset West CHC responds to people in distress and supports them to navigate the service system. They also provide crisis counselling. Funding for this program ends at the end of December 2021, but there continue to be needs for this essential service in West Centretown. For $315,00 per year, this essential service could continue in a community where the number of people who are without homes or precariously housed has increased significantly over the last few years. The severity of people’s needs has also increased with the opioid crisis and COVID-19-related impacts on mental health.

CCHC’s Urban Health Program provides wrap-around supports to people who use drugs and facilitates engagement with health and social services, providing a holistic approach to supporting health and wellness. These services are provided part time, with constrained access across limited geography. A $350,000 investment could double outreach capacity and increase capacity to offer health and social services supports by adding an extra half-day to the clinic.

Ottawa Inner City Health provides street outreach and peer support for street-involved people in crisis, but funding limits the program to part-time hours and a limited geography. A $350,000

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63 Ibid.
64 Ibid.
investment could expand outreach programs to full-time hours and enhance mobility, geography, and carrying capacity by providing staff with access to e-bikes.\textsuperscript{65}

The Salvation Army offers a more crisis-oriented response with two vans that field as many as thirty calls a day, but it still has to turn away others. The vans carry supplies and provide supports. They also intervene in crises, often at the request of police. These vans provide urgent interventions and conflict management—they help transport people to appropriate drop-ins, and even provide emergency medical transport, as well as linking people to housing supports and “homes-first” services. However, the Salvation Army vans, unlike similar services in Oregon, Washington, and Colorado, are not first responders. They are dispatched only after police have attended the scene, which unnecessarily increases costs for nonviolent, noncriminal situations. By contrast, the well-known CAHOOTS program in Eugene takes as many as 20\% of all police calls on a first-responder basis and calls in police support in only a tiny fraction of cases—and it has had nearly zero incidents of injury to any participant.\textsuperscript{66}  

The Salvation Army’s vans already address almost 700 incidents per month. It estimates that one additional van could expand its program to meet current needs, and address the fact that clients are turned away, given the pressure on current resources. The Salvation Army would be able to fully serve its current client population with an investment of $500,000 per year.\textsuperscript{67}

Peer-based outreach, like that provided by the Somerset West Community Health Centre, offers highly effective and often lower-cost options for increasing outreach. But peer programs are present in only a few neighbourhoods. These initiatives could reach twice as many people with a modest investment of $350,000 and, as one provider noted, “It’s just cheaper to pay for the supports up front than to pay for the jail cell when it all falls apart.”

Community health programs offer a range of supports to people experiencing homelessness and who are precariously housed, but there are no Community Health Centres (CHCs) east of the Rideau River, leaving many Ottawa-Vanier residents without community-based health hubs. For only about $2 million the largely francophone communities who live in that end of the city could have better access to care. Outreach programs are also stretched in Vanier, Overbrook, and Rideau/Rockcliffe. Interventions during the pandemic showed how significantly just three bilingual outreach workers, at a cost of less than $250,000, would help this diverse community connect vulnerable populations to critical supports.\textsuperscript{68}

**Housing interventions/supports.** Helping people sustain viable tenancies is key to managing homelessness, but people in crisis face challenges in maintaining housing. The 14,000 calls police make to social housing are rarely for criminal issues. They relate to the high proportion of social-

\textsuperscript{65} Ibid.  
\textsuperscript{67} Information obtained from over forty interviews with staff delivering community services in Ottawa.  
\textsuperscript{68} Ibid.
housing tenants drawn from highly vulnerable populations. While these circumstances pose challenges, they are not criminal issues and are best addressed by interventions that focus on underlying social or health concerns.

Community service providers can and do deliver that support in some social housing communities. For example, Options Bytown has staff on site during business hours at local resource centres in eight Ottawa Community Housing (OCH) developments that handle over 20,000 visits each year and deliver between 500 and 700 urgent interventions annually. Similar interventions are provided to their Housing First clients with high levels of success. (Housing First programs boast long-term stability for about 80% of their clients.) Peer-support programs help stretch resources to provide support after hours. Expanding the resource centres to more OCH communities would cost less than $100,000 for each site, and peer-housing support could be expanded for only $36,000 per community. Meeting the support needs of the 1,233 clients on the current supportive housing centralized wait list would require another $7.2 million. For rooming-house tenants, the Salvation Army delivers similar services as “eviction prevention” efforts, and dedicates staff to the task, but there is demand for more staff, which could be met for less than $200,000.

Community houses also provide drop-in services for local residents, including those without permanent homes. The Caldwell Family Centre supports over 4,000 clients with over 90,000 contacts per year, but even its planned expansion is already too small for local needs. Others have deliberately tailored programs that are designed—individually and with grassroots partner organizations—to better serve Black and racialized community members with drop-in supports as well as structured programs.

Somerset West Community Health Centre (SWCHC) offers a community health worker and nurse practitioner who work together to reach out to rooming houses to provide social services and medical support, referrals, and information and practical support. However, this important service is available only one half-day per week. With an increase in $226,000 they could have a full-time nurse practitioner and a full-time community health worker.

This kind of “housing with supports” or “supportive housing light” model responds efficiently well to households with intermittent challenges—those that do not need the frequency or intensity of interventions that supportive housing provides. They stabilize tenancies, prevent evictions, and stop crises from deepening. Enforcement has a far less beneficial impact. Even police concede that people in crisis need support rather than enforcement and that they are more likely to sustain their housing and stabilize their circumstances with health interventions

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69 Ibid.
70 Ibid.
73 Information obtained from over forty interviews with staff delivering community services in Ottawa.
74 Ibid.
rather than justice interventions.\textsuperscript{75} And each person who can remain housed offsets, on average, forty police interactions per year. Unfortunately, resources are instead devoted to enforcement measures that not only do little to address the problem but even disrupt housing efforts for precariously housed people by coaching landlords through the Crime Free Multi-Housing program\textsuperscript{76} that encourages landlords to refuse to rent to people with past justice involvement.\textsuperscript{77}

\textbf{Supportive housing.} Some tenants are at stages that require more intensive and more frequent support. Supportive housing is the most appropriate model for these tenancies. People in these circumstance are highly unlikely to be able to improve while they’re homeless but they have considerable difficulty sustaining tenancies. People facing complex challenges have much higher rates of emergency-room use, hospital admissions, and incarceration. These impose considerable strain on the people involved as well as high costs to the public. For example, supportive housing costs $53 per day—less than a quarter of the $233 it costs to keep someone in a provincial jail for a day, less than a sixth of the $330 it costs to keep them in a federal prison for a day,\textsuperscript{78} and less than one-eighth the $441 cost of an Ontario hospital bed for a mental health patient.\textsuperscript{79}

Justice system responses to complex challenges have not proven effective. However, service providers in Ottawa have developed very successful, proven models that support tenants facing such challenges and have a strong track record of helping them transition to less-intensive supports over time. In some cases, day staff is augmented by peer supports at night, which has proven more effective and less costly than security services and far less costly than police interventions when crises occur. Supportive housing tends to require $6,000 annually per unit on average for supports. Compared to the cost of emergency room use, enforcement, and incarceration costs, supportive housing is, in the words of one service provider, “a lot cheaper than homelessness.” While provincial contributions would be an appropriate source of funds for this program, municipal leaders should recognize that they are already footing the bill for the shortcomings of this system though their policing budgets. Investing in prevention will be more effective and less costly.

\textbf{Recovery beds/medical detox/TED/special care.} Some people in high levels of crisis need intensive or complex care. Programs that meet these needs have been developed through partnerships among Ottawa Inner City Health, the John Howard Society, Shepherds of Good Hope, the Canadian Mental Health Association (CMHA), and others, including the Targeted Emergency Diversion program (TED), Special Care for Men, the Rita Thompson Residence, and safe-bed facilities. Montfort Renaissance offers housing services that include various programs focusing on providing people at risk of homelessness both housing and the support services they

\textsuperscript{75} McNamara, Crawford, and Burns “Policing the Homeless: Policy, Practice, and Perceptions.”


\textsuperscript{77} Information obtained from over forty interviews with staff delivering community services in Ottawa.


require to keep their homes and increase their autonomy. These services are primarily intended for people who live or have lived in a state of chronic homelessness as well as for people with a severe and persistent mental illness or concurrent disorders, including complex addiction issues. These programs can support and assist people who would likely otherwise face incarceration or mental health apprehensions.\textsuperscript{80} Some, like safe-bed facilities, provide very intensive support for clients who stay for short-term transitional periods. Ottawa needs fifteen more of these, at a cost of $1.5 million. Others tend to provide longer-term housing with health and mental health supports embedded, like those offered through Special Care for Men, or the Rita Thompson Residence. Ottawa needs forty more of these transitional beds and could operate them for an annual cost of only $550,000.\textsuperscript{81}

\textbf{Cultural appropriateness.} The lack of access to housing is not equally distributed in Ottawa, and Black and Indigenous people are overrepresented in the official data and likely even more severely impacted in reality. Ottawa’s 2018 Point in Time Count indicated that Indigenous people make up 24\% of the people without homes and Black people make up 21\%, even though those populations make up less than 2.5\% and 6\% of the population, respectively. Black and Indigenous leaders note that these figures likely underestimate the true numbers, as Indigenous people are often withdrawn from the formal homelessness system and Black communities often provide alternate supports for people without homes because the existing system is less attuned to the needs of those communities. Addressing the needs of these populations will require not only increased provision of supports but also more appropriate models, better suited to the populations that make up nearly half of all homeless people.

\textbf{Summary}

Ottawa intensely polices people experiencing homelessness and people who are precariously housed at a high cost, but gets few positive outcomes for that investment. There are service providers in Ottawa, delivering programs right now, who can produce better outcomes and reduce the need for police interventions if they were given the resources to expand both the volume and geography of their programs. Most of these investments would be under $1 million per year. Combined, they would require a small fraction of what is spent on policing the same population with less beneficial results. Investing in drop-ins, outreach, and housing supports is consistently cheaper and more effective than continuing to apply the current enforcement-oriented approach. Moving investments to these more effective options makes both practical and fiscal sense.

\textbf{Mental Health}

\textbf{Cost and volume of current police interventions}

Tracking the number of mental health calls that the OPS responds to is a complex task. Mental health calls are coded in a variety of ways and so produce conflicting statistics, but cumulatively across all codes related to mental health, the OPS responds to over 6,000 mental health calls.

\textsuperscript{80} Information obtained from over forty interviews with staff delivering community services in Ottawa.

\textsuperscript{81} Ibid.
every year, reaching 6,844 people in 2019.82 These calls now make up about 3% of the 246,000 calls that required police presence.83 According to the OPS, not only has the number of calls grown steadily but the complexity of mental health calls has also grown, making the time per call higher every year.84 As a result, mental health calls are now consuming more than 3% of frontline officer time.

To add to the complexity, these calls are coded for mental health only when that is the primary presenting issue—the data do not account for the complete list of calls involving people experiencing mental health crises. Ottawa police analysis from January 2021 indicated that calls coded for mental health make up “only a fraction of the calls for service where mental health was a contributing factor.”85 OPS research notes that other Ontario jurisdictions have determined that they undertake more than four times as many interactions involving people with mental health issues than there are calls coded specifically for mental health.86 Similar patterns in Ottawa would put mental health-related calls at about 13% of all police calls.

A recent analysis by Vivic Research and the 613-819 Black Hub estimates the volume at 15% of all police calls.87 Other jurisdictions have tracked the rates of mental health involvement at significantly higher levels. For example, the CAHOOTS program in Oregon provides non-police interventions for mental-health-related issues and diverts 17% of all police calls.88 Statistics Canada found that almost 20% of police interactions involve a person with a mental illness or substance use disorder,89 an estimate widely seen as conservative. These estimates also fail to cover the many instances where mental health issues involve concurrent addictions issues. Activity in this range would indicate that Ottawa police are spending between $50 and $75 million per year on mental health interventions.

Impact
That sum is a sizable share of all spending on mental health in Ottawa, but it may not be yielding optimal results. By the OPS’s own analysis, police interventions often do not resolve the issues. As a recent OPS report notes, “OPS members often respond multiple times to help the same people, the same families, over and over again.” The report describes much of police activity on mental health as a “stop gap measure” and recognizes the need for the “realignment of existing

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83 Ottawa Police Services, 2019 Annual Report.
85 Chief of Police, “Consultation Approach for Mental Health Response Strategy.”
86 Ibid.
services and the establishment of services that better support community members dealing with mental health issues.”

This is consistent with evidence from other cities and the analysis of other police services. As Houston Police Chief Art Acevedo noted, on behalf of police chiefs from across the United States, “we can’t arrest our way out of societal problems.”

**More effective approaches**

Research and analysis over more than a decade point to the benefits of a less enforcement-oriented approach. Police data show that mental health calls rarely involve any violent activity and often no criminal activity at all. Officers themselves often report frustration with their inability to resolve these calls successfully. This pattern led the Mental Health Commission of Canada and the Centre for Addiction and Mental Health (CAMH) to suggest that people other than police would be best placed to effectively address mental health crises.

In other cities, civilian-led strategies for addressing mental health crises have been implemented with very good results. The White Bird Health Clinic community health centre’s widely praised CAHOOTS program in Eugene, Oregon, uses mental-health outreach workers as first responders, taking non-violent calls related to mental health and addictions. They take 17% of all police calls, at less than one-seventh of the cost of policing those incidents, resolving the issues with referrals to services, de-escalation, and support. Similar programs have been set up in Washington, DC, Baltimore, Houston, Olympia, and Denver. Civilian first responders are able to handle 99.6% of all calls without any police support and have a near-zero record of any harm or injury coming to anyone involved. In Ottawa, the 613-819 Black hub has worked

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90 Chief of Police, “Consultation Approach for Mental Health Response Strategy.”
97 DC Department of Behavioral Health, “Community Response Team,” https://dbh.dc.gov/service/community-response-team
99 Houston Police Department, “Crisis Call Diversion Program (CCD),” https://www.houstoncit.org/ccd.
100 Thompson, “This City Stopped Sending Police to Every 911 Call.”
101 Beaty, “A Long-Planned Program to Remove Police from Some 911 Calls Launched As Denver’s Streets Erupted in Police Brutality Protests.”
with Vivic Research to design an Ottawa-based version of these types of programs, that they published earlier this year.\textsuperscript{103}

**Crisis intervention capacity in Ottawa.** Ottawa has the infrastructure to provide civilian-led responses to a range of mental health needs, as other cities now do, but that capacity is hampered by wait-lists and underfunding.

The Drug Overdose Prevention and Education (DOPE) response team provides outreach in the Centretown, Carlington, and Somerset West Community Health Centre neighbourhoods. This peer-led program connects directly with people in the community who are at risk of overdose, providing resources, peer support, overdose prevention, and referrals.

As noted earlier, Ottawa Inner City Health and the CCHC’s Urban Health Program already undertake interventions for people facing both homelessness and mental health crises. These programs are run by trusted providers with skilled teams that are effective at supporting and de-escalating distressing situations involving mental health issues using both clinical staff and peer networks. However, they are not all centrally dispatched, not all operating 24/7, and not covering Ottawa’s full geography.

Expansion to a larger geography would require further investment. Ottawa Inner City Health and the Urban Health Program offer valuable supports, but 24/7 services would require new investment. Experienced crisis-intervention managers recommend a team of eleven staff to serve the inner city, including a mix of peer workers and mental health nurses, with access to clinical psychiatric services. A program of this type would cost approximately $1.5 million per year.\textsuperscript{104} This is similar in cost to the non-police pilot programs in Toronto,\textsuperscript{105} which have created one team for its downtown core and other teams to cover larger suburban areas of 300,000 to 400,000 residents. On that scale, Ottawa could meet community needs with three to four teams, at a cost of between $4.5 and $6 million. Because of Ottawa’s large geography and diverse mix of urban, suburban, and rural spaces, it will need both centrally dispatched and locally based services to address the full range of communities. Even if these investments reduced police calls related to mental health by only 10% the program would cost the city less than it now pays.

**Community-based approach to mental health.** Crisis intervention is only one stage of response. Supports that focus on prevention are also required. Ottawa has an exceptional asset in addressing mental health challenges. Ottawa’s community houses and grassroots and community-based initiatives create a critical first line of support for people facing mental health challenges, with teams well positioned to address prevention and early intervention in the spaces that are familiar and safe for the most vulnerable in our communities. These locally based, community-led efforts, already located within affected communities, also have the ability

\textsuperscript{103} Vivic Research, “Alternatives for a Safer Ottawa: Non-Police Mental Health Crisis Response Report.”

\textsuperscript{104} Ibid.

to engage in community-based organizing around crime prevention that allows residents to actively participate in addressing safety challenges.

Place-based organizations and ethno-specific initiatives are on the ground, connecting first-hand to community issues, including mental health challenges, as well as disruptions that affect the safety of neighbourhoods. There is often an immediate need to address these incidents in real time and offer crisis intervention. Community houses are located directly within neighbourhoods facing challenges across Ottawa and benefit from ongoing resident engagement and outreach to inform service providers of emerging needs and trends. They therefore can develop and implement strategies to appropriately support people where they are with the services that are ultimately needed. Community-based support for individuals pre- and post- mental health care (including hospitalization, treatment programs, and counselling) could also improve transitions and support reintegration into the community.

There is a relationship of trust with the community house staff and other place-based service providers that is deliberately built by specifically engaging those most affected by community safety issues. As a result, residents reach out for support in times of crisis, and get the support they need at early stages. This is more effective than rebuilding well-being after the fact, at greater cost to the people involved and the programs needed to support them. As studies have repeatedly shown, “preventing and intervening early for young people with mental health problems ... can dramatically improve immediate and long-term outcomes.”

Unfortunately those same community-based, locally led programs suffer from chronic lack of space and funding which strains their ability to play their full role, meet the volume of need, and respond in the timely ways that most benefit the community. Funding of $1.25 million would create a comprehensive community-based mental health team to support existing community-based infrastructure in sixteen high-risk social housing neighbourhoods to support underserved, marginalized, Black, and racialized families; $500,000 could create a modest community house program; and $1.5 million could create a full-service program.

Wrap-around services. In addition to prevention and crisis intervention, people in crisis need support services they can access once an intervention is complete.

Safe beds: People in severe addiction and metal health crises may need intensive support, including 24/7 monitoring. “Safe beds” are a well-established tool for ensuring this level of intensive intervention without drawing on hospitals or resorting to incarceration. However, Ottawa does not have an adequate supply of safe beds to meet those needs. Given the typical volumes of crisis and standard length of stays, Ottawa would require fifty safe beds to meet current needs, but it has only thirty-five. That gap of fifteen safe beds could be met with an investment of about $1.5 million.

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107 Information obtained from over forty interviews with staff delivering community services in Ottawa.
**ACT teams:** People in need of high-intensity supports are often assigned an Assertive Community Treatment (ACT) team to ensure that they get the help they need to respond to very acute mental health and addiction issues. Ottawa has five ACT teams located across its diverse geography, with community partners including the CMHA, Pinecrest-Queensway Community Health Centre, and Clarington Community Health Centre. But there is a very long waiting list for new clients, in part because very few people move from this level of care since returning to it is so difficult. The addition of one to two ACT teams (along with appropriate growth in intensive case management we outline next) would alleviate this pressure. This increase in services would cost $1.3 to $2.6 million. 108

**Intensive case management:** Most people who face ongoing, serious mental health challenges have less severe circumstances, and less frequent or intense crises. Access to intensive case management (ICM), to ensure they are getting the services they need regularly, is often the right model in those cases. ICM not only coordinates the necessary supports for a person who has been in crisis but also provides supports that help reduce the number of crises in the first place. Unfortunately, the wait-list for ICM is currently three years long, during which time people’s circumstances can worsen. Between 120 and 140 case managers could be brought on stream with an investment of $14 to $17 million to end those waits. 109

People facing intensive addiction and substance use challenges can also benefit from intensive models similar to the Toronto Community Addiction Team model (TCAT) offered by St. Michael’s Hospital and St. Stephen’s Community House in Toronto. This peer-driven approach costs only $1.5 million to deliver, provides intensive case management to people with addictions who face frequent crises and high rates of engagement with institutions, and succeeds in significantly reducing emergency room use.

Some service providers in suburban communities, like Pinecrest Queensway Community Health Centre, and South East Ottawa Community Health Centre, have created related “System Navigator” programs to try to fill the gap, doing intake and supporting program access, often unfunded or underfunded, with staff stretched to meet this pressing need. Just $225,000 could add another 1,000 clients to this highly efficient program that prevents crises and bridges gaps. 110

**Addiction services:** The opioid crisis has grown sharply in the last few years. The chemical make-up of opioids and of the drug supply, most notably with the growing presence of fentanyl, has made overdoses more frequent and recovery more difficult. In 2020 alone, overdoses rose 60% and front-line workers describe needing as many as twenty times the normal dose of Naloxone to revive a patient. The demand for safe consumption sites is significantly higher, and the imperative for intervention is exponentially more significant. 111

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108 Ibid.
109 Ibid.
110 Ibid.
111 Ibid.
Centre’s OASIS program serves 2,000 individual clients with harm-reduction services, a drop-in, as well as a safe-consumption site. Shepherds of Good Hope offers a range of residential and non-residential care, and hosts Ottawa Inner City Health’s harm-reduction program which has diverted hundreds of hospital visits and prevented millions of dollars in care costs. Somerset West Community Health Centre’s Drug Overdose Prevention and Education (DOPE) response team reached out into the community using peer-based strategies. The Ottawa Inner City Health team provides harm reduction, patient care, and outreach in partnership with other Ottawa service providers.

Staff in these programs stress the growing demand for harm reduction and the increasingly deadly impact of failing to apply that approach. Front-line staff and public health officials all agree that there is no way to arrest our way out of the opioid crisis.

The expansion of safe consumption programs requires a further investment of about $2.5 million to double capacity in existing communities.112 This would be a sound investment—research shows that safe consumption programs save over $10,000 per person served by preventing more costly medical interventions.113 Although mobile needle exchanges help bring harm reduction to more communities, Eastern Ottawa lacks a safe injection site and communities widely recognize the need for one. Just $1.2 million could reduce this inequity.114 Outreach programs can meet the current needs if the crisis-intervention programs outlined earlier were implemented.115 While this is not a traditional municipal area of investment, municipalities are paying the cost of underinvestment through their police budgets. Investing the same amount upstream is less expensive and more effective.

**Cultural appropriateness.** Planning and implementing of robust mental health strategies for immigrants, newcomers, and Black and Indigenous populations still lags far behind demand, especially given the range of significant impacts that war, relocation, disruption, and culture shock have on new Canadians.

There have been valuable efforts to improve access. The growth of the Ottawa Newcomer Heath Centre and Somerset West CHC’s multicultural health navigator program have expanded access so that more newcomers can access mental health supports in a culturally appropriate context. Jewish Family Services’ mental health walk-in clinics expanded service to increase linguistic accessibility in Somali, Cantonese, and Arabic. Others have responded to the need for culturally specific services include the African, Caribbean, and Black-focused portal on the city’s Counselling Connect platform that emerged through joint work through the Ottawa Black Mental Health Coalition.

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112 Ibid.
114 Information obtained from over forty interviews with staff delivering community services in Ottawa.
115 Ibid.
However, the Ottawa Local Immigration Partnership (OLIP) notes the need for similar service in more areas, and development across five pathways (including immigrant-aware clinical education) to ensure appropriate mental health services. A knowledge hub for planning and integration of culturally appropriate services could be established for only $300,000.116

Regroupement Ethnoculturel des Parents Francophones de l’Ontario (REPFO) addresses pressing needs for Black francophone newcomer populations facing multiple challenges with systems not designed to address their particular, intersectional challenges, and a social service infrastructure that is not attuned to that combination of barriers. REPFO’s demand exceeds their capacity by almost 100% and they need to double staffing to keep up with community needs. Muslim Family Services faces a similar shortfall, and works with REPFO and other agencies supporting underserved francophone Black newcomer populations. Funding of $1.9 million would spread entho-specifically appropriate racialized francophone newcomer mental health services to all areas of the city.

A modest investment of $140,000 would enable the Somali Centre to address racialized immigrant youths’ mental health needs in culturally appropriate, responsive, and familiar ways, and in geographic locations that meet client needs.

As OLIP notes, planning and coordination continue to be undersupported, making it difficult to fully capture the needs of the most marginalized communities.

Summary
Addressing mental health crises in Ottawa will require significant increased investment in crisis intervention, safe beds, ACT teams, case management, addiction services, and culturally appropriate programs. Combined, they could cost as much as $30 million. But that investment is already being made, several times over, in the $50 to $75 million spent on police interventions in mental health crises, with far less positive impact than these mental health services would achieve. These savings are in addition to the savings from current health services and prison expenses.

Youth
Cost and volume of current police interventions
Despite the limited existence of comprehensive data on OPS interactions with youth, the evidence indicates that youth are heavily overpoliced in Ottawa. US studies show that youth receive over 38% of all police interaction,117 despite making up only 14% of the population. The data on policing in Ottawa is consistent with those studies. Research on street checks in Ottawa indicates that 40% of all street checks were with people between the ages of 20 and 29,118

116 Ibid.
though this age group makes up just over 14% of the population.\textsuperscript{119} Research on traffic stops in Ottawa showed that young men between 16 and 24 were about twice as likely to be stopped as their older counterparts.

These challenges were exacerbated by race and gender, with young Middle Eastern men almost five times as likely to be stopped as older ones, young Middle Eastern women about three times as likely to be stopped as older ones, young Black men almost four times as likely to be stopped as older ones, and young Black women about three times as likely to be stopped as older ones. Even when race was not a factor, young white men were 75% more likely to be stopped than their population would indicate.\textsuperscript{120}

This heavy policing occurs even though Canadian studies demonstrate that youth were responsible for only 13% of Criminal Code violations,\textsuperscript{121} and the violations that youth are charged with also tended to be less serious offences even where arrests are made.\textsuperscript{122}

The costs associated with policing youth are high. The OPS recently ended the “School Resource Officers” program that placed two dozen officers in local schools, a program that cost $3.69 million\textsuperscript{123} in addition to the $100,000 the Ottawa Carleton District School Board (OCDSB) contributed from its cash-strapped budget. The cost comparison with highly effective community workers is stark. For example, settlement staff supporting newcomer students place twenty-three staff in 103 Ottawa schools for half the cost, with consistently positive impacts on student success, especially for the most vulnerable.\textsuperscript{124}

Overall, at 38 to 40% of police interactions, the OPS spends over $100 million per year policing youth. This very significant expenditure should be producing exceptional results, but evidence indicates that it does otherwise.

**Impact**

Although policing is heavily used and heavily funded as an intervention for youth, the evidence indicates that policing is frequently the wrong tool to address underlying problems, and it actually has several disturbing negative impacts. Youth involved with the justice system face serious long-term impacts on employment, education, housing, and income.\textsuperscript{125} US studies show that youth who have been arrested have drop-out rates that are 22% higher, postsecondary enrolment that is 16% lower,\textsuperscript{126} and future income that is 20% lower than youth who’ve never
been arrested.\textsuperscript{127} They also have higher rates of future involvement with the justice system.\textsuperscript{128} Even when youth are found to be not guilty, youth who have been arrested are more likely to live in poverty and are less inclined to engage in civic participation than similar youth who have never been arrested.\textsuperscript{129}

Evidence also shows that “get tough” strategies aimed at youth usually fail, and often create larger safety problems.\textsuperscript{130} Targeting youth with those programs actually promotes anti-social attitudes that cause youth to “push back” against authorities.\textsuperscript{131} They increase youths’ image of themselves as criminals\textsuperscript{132} and tend to produce higher crime rates than occur when aggressive policing is not employed.\textsuperscript{133}

Overpolicing also undermines community relations, which makes efforts to address real safety issues more difficult.\textsuperscript{134} A Canadian study conducted in 2020 showed that young people, people of colour, and Indigenous people were more likely to have had negative interactions with police than other groups and were also more likely to have negative views of police and to feel unsafe with increased police presence.\textsuperscript{135} These findings reflect extensive international research.


\textsuperscript{135} Angus Reid Institute, “Policing in Canada: Major Study Reveals Four Mindsets Driving Current Opinions and Future Policy Preferences,” 9 October 2020, \url{http://angusreid.org/wp-content/uploads/2020/10/2020.10.09_Policing.pdf}.
showing that previous negative interactions were significant factors affecting willingness to engage with police.136

Most distressingly, youth, and especially Black, Indigenous, and racialized youth, are more likely to face deadly force at the hands of police. Analysis in June of 2020 revealed that 66% of the last 100 people who died at the hands of police officers in Canada were between the ages of 16 and 35 and that Black and Indigenous people were overrepresented.137

**More effective approaches**

Instead of pursuing intensive policing, communities across North America are increasingly addressing youth issues with more community-based, asset-oriented approaches. These programs assess risk factors, facilitate access to protective factors, create stable relationships, and proactively link together services and supports. These evidence-based, positive interventions promote youth well-being, address conflict through conflict resolution, and establish positive relationships with youth that focus on support and guidance rather than punishment and control.

**School-based services.** Many agencies work to support youth at the earliest possible stages of the challenges they face. Organizations like the John Howard Society, Rideauwood Addictions and Treatment Centre, and Community Health and Resource Centres deliver school-related programs like Pathways to Education, SNAP, Project STEP, Choices, and SWAG for youth facing multiple barriers, often with rates of success in the 80 to 90% range.138 These programs connect directly with the schools and support youth to achieve academic goals that keep options open for them—goals that are less often achieved by youth facing the challenges they contend with on their own. Some programs have been adjusted by organizations like Acacia Youth Wellness, and the Ottawa Community Immigrant Services Organization (OCISO) to respond to the particular needs of racialized youth. However, funding for these more culturally appropriate services is precarious. Programs are funded for a few months, and clients whose needs are finally being met in suitable ways are then left in the lurch.

Unfortunately, school-based programming is limited in Ottawa. Many service providers are eager to significantly expand their capacity to intervene early, in ways that are coordinated with the education system, to support youth in crisis. Their programs operate in a handful of schools but, with appropriate resources, they could serve far more young people both in and out of school. The Eastern Ottawa Resource Centre currently serves all four Ottawa school boards in both

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138 Information obtained from over forty interviews with staff delivering community services in Ottawa.
official languages, supporting approximately twenty-five schools per year, but its funding hasn’t changed in over a decade and school requests exceed capacity every year.\(^{139}\) Service providers often expressed concern about the lack of a systematic, pervasive structure to ensure that students who face crises have access to community service providers trained in trauma and the appropriate clinical tools to support those most at risk.

Several service providers’ comments foreshadowed the OCDSB’s recent decision to end the School Resource Officer (SRO) program. They noted that their clients were too easily shifted to the justice system and a punitive approach when the most likely route to long-term positive outcomes was a support-based model. The OCDSB review of the program found that police involvement often criminalized behaviours that were unusual, disorderly, or disruptive but not illegal or dangerous, and disproportionally affected marginalized students.\(^{140}\) Moreover, the SRO’s $3.69 million price tag contrasted sharply with the limited resources for youth support programs, crisis intervention, and counselling mentioned earlier, which have demonstrably better outcomes. Social service providers looked forward to hearing more about how that funding was to be reinvested to support youth in crisis.

Most of these programs were funded at a fraction of that level, and some had no stable funding at all but could be increased to meet critical needs at a far lower cost. For example, just $125,000 would double the size of the highly successful SWAG program. The program provides mental health, counselling, and educational attainment supports throughout the high-school careers of youth facing intense barriers and it boasts a 90% success rate.\(^{141}\) An investment of $1.2 million could add a comprehensive Pathways program in a new community, providing academic supports, one-on-one mentorship, and social and financial supports using a case-management approach and whole-family model, again with success rates in the 80% range.\(^{142}\)

The settlement supports that OCISO provides to help newcomer youth adjust to the school system should be doubled to meet demand. Just $500,000 would add fifty more schools to the Choices program, ensuring youth on the brink of justice involvement get the support they need to succeed.\(^{143}\) There are a host of similar opportunities to fund interventions that cost a fraction of what was spent on SROs and that provide proven positive impacts. To address demand, twice as many schools in French-language boards could be reached by immigrant-oriented francophone youth-success programs like Entre-Filles and Francs-succéss if they received $185,000.

**Community houses and other placed-based community services.** Place-based agencies—including community houses, and other less institutionalized, grassroots projects focused on cultural, racial, and social realities—are at the ground level and can thoroughly understand the

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\(^{139}\) Ibid.


\(^{141}\) Information obtained from over forty interviews with staff delivering community services in Ottawa.

\(^{142}\) Ibid.

\(^{143}\) Ibid.
many risk factors that Black, Indigenous, and racialized communities face daily. These place-based entities have close connections with those who are the most impacted because of established relationships and supports related to social disparities, mental health, safety, and advocacy.

Because they’re familiar with the depth and nuances of these individuals’ contexts and priorities, place-based agencies can adapt to respond to the unique needs of those most impacted, and have displayed the responsiveness, and commitment to social healing that build strong relationships and create trust. These placed-based organizations are usually smaller in size, have fewer resources, and as a result, don’t often get the systemic attention, resources, or value that larger organizations benefit from. But because of their strong relationships, they are also better positioned to address safety issues (in contrast to the disconnection between police services and many racialized communities). This reality highlights the need to acknowledge and support agencies and individuals who are doing the hard but necessary work at the grassroots level, with high levels of demand but minimal or precarious resources—especially those who advocate, mobilize, and navigate in ways that reach beyond their funded mandates and operations.

However, most of the programming funding and support for community houses, and especially for the grassroots, engaged activity that best connects to marginalized communities, is precarious, modest, and usually short term. Over a dozen community houses and drop-in programs are scattered across Ottawa, often embedded in OCH communities. They serve up to 3,000 local youth in an embedded, connected, local, preventative model. They offer a broad range of youth and after-school programs, homework clubs, STEM programs, sports, recreation, and summer camps all with a focus on building a strong sense of community belonging.¹⁴⁴

Their high volume of interaction and their connection to the neighbourhood enable these services to address emerging issues proactively before they become crises, and to be trusted partners in addressing crises when they occur. Their proximity, especially in a geography as large as Ottawa’s, which covers urban, suburban and rural areas, is an enormous asset.

Community house staff provide programs that are engaging to youth but also offer basic supports. They are trained to identify and address emerging mental health issues and tackle problems from both an individual and a whole-family approach, making them highly effective for early interventions. Some programs leverage participants as ambassadors or interns to incorporate peer support and maximize scope and impact.

Their proximity, flexibility, and creativity transformed often small facilities and razor-thin budgets into trusting spaces in vulnerable communities. With adequate resources, place-based agencies working with families could leverage their access and early intervention capacity to fully facilitate wrap-around services that ensure swift response, warm hand-offs, and comprehensive support for vulnerable populations that often fall through the cracks. The expansion of their children and youth programs is a low-cost proposition given their impact. Service providers describe child and

¹⁴⁴ Ibid.
youth program-expansion budgets of $500,000 as adequate to ensure ongoing engagement in a community, but with no stable sources of funding to meet the level of need, they have to constantly scramble to make the process sustainable.

**Prevention/early intervention.** Ottawa has a wide range of programs that connect with young people outside school hours and provide support, guidance, and positive options. But most currently run at a fraction of their needed capacity, despite low costs and high impact.

Drop-ins across Ottawa’s wide geography, including drop-ins across the South East Ottawa Community Health Centre catchment, serve 1,000 to 1,500 youth in programs that serve anywhere from 75 to 300 individuals at a single location. These programs offer everything from employment supports to social recreation and more are badly needed. As little as $250,000 could add a program that improves outcomes for youth.\(^\text{145}\)

The Somali Centre for Family Services is developing capacity to serve Black youth facing mental health challenges with culturally responsive, gender-appropriate, multilingual Black counsellors in mobile crisis intervention since so few youth have access to transportation to access services.

The BGCO (formerly Boys and Girls Club of Ottawa) manages Provincial Youth Outreach Workers (PYOWs) who are also embedded in local communities. Like community houses, PYOWs can rely on strong connections and trust in the community to reach youth who have had negative relationships with institutional systems. Many PYOWs are from the communities they serve and share lived experience, and in many cases, linguistic and cultural backgrounds, with clients. That makes them compelling intermediaries who can engage disaffected and alienated youth.

PYOWs focus on case management and referral. They are effective at reaching out, spotting problems, recognizing emerging issues, connecting with youth facing challenges, and supporting them in successful, client-centred well-being strategies that include counselling, addiction supports, employment programs, and life skills. Their efforts are augmented by one clinical staff person who can offer more intensive case management. The PYOWs support and coordinate a large and growing “neighbourhood ambassador” peer program, with twenty-eight trained youth working part time to connect with young people in six priority neighbourhoods. The modest program is funded only temporarily by the City of Ottawa.

Unfortunately, with only seven PYOWs, Ottawa has only one-tenth the team that Toronto has, despite the fact that Statistics Canada shows Ottawa has 40% as many youth as Toronto, making Ottawa’s per capita capacity a quarter as robust as Toronto’s. This is, in part, because the City of Toronto supplements the PYOW team with municipal staff dedicated to expanding outreach to youth. Expanding to Toronto’s level of outreach would require a new investment of about $1.5 million, and would have a significant impact in diverting youth from the justice system. The

\(^{145}\) Ibid.
BGCO could also bring their peer program to six more neighbourhoods for an investment of $350,000.146

Outreach and engagement could also be expanded by growing Youth Services Bureau’s West End Youth Motivator peer program. The program supports youth in Pinecrest Queensway area neighbourhoods, addressing issues that affect them as well as creating a link to services and supports. Just $75,000 would bring this award-winning program to another Ottawa community.147

**Support for youth in conflict with the justice system.** Too often early intervention is unavailable for youth who find themselves in crisis and often in conflict with the justice system. Justice involvement has adverse consequences for youth. Fortunately, there are services that work to help young people extricate themselves from justice-system involvement and find safer positive opportunities.

Some community houses have expanded to provide crisis support programs and case management for youth. The Youth Services Bureau (YSB), the John Howard Society, YouTurn, and Rideauwood Addiction and Family Services, both individually and in partnerships, offer several programs to serve youth trying to disentangle themselves from the justice system. These programs focus on clinically based, evidence-informed interventions to resolve the root causes of violence and illegal activity, address trauma and addiction, and support the development of life skills that help youth to manage crises and resolve issues. Some provide 24/7 access and include bridging to a host of external supports, as well as interventions to facilitate greater support from family, peers, school, and community. These programs often work with youth who have experienced significant interruptions in healthy attachments with adults in their lifetime, which has undermined their willingness and ability to trust and build meaningful relationships, making intensive engagement and sustained trust critical.

These programs show high rates of success in helping hundreds of young people reconnect to school, family, employment, and positive role models and avoid future justice involvement.148 This support-based model has an enormous impact that enhances the long-term well-being of youth, in contrast to the long-term negative effects of justice involvement. For example, a study in 2020 showed how Time4Change reduced future violent offences by 61% and saved the justice system roughly $2 million, more than three times the program’s spending. Nine out of ten participants said support from the program helped keep them out of custody and engaged in prosocial activities. An analysis of the On Point program in 2018 showed similarly positive results. Just over 90% of youth who complete YouTurn’s probation program show decreased...
engagement with the justice system and 80% of court-referred clients show improved mental health.\textsuperscript{149}

Unfortunately, funding for these programs falls well below the need. YouTurn, for example, operates its major programs at 160% to 175% capacity, stretching staff teams and resources to try to address growing needs, especially for youth attempting to disengage from high-risk activities like street violence. Demand for support for survivors of human trafficking has grown tenfold. These effective programs could grow to meet critical needs for only $700,000.\textsuperscript{150}

Some programs, like those offered by OCISO, also address transition issues that bring youth into unnecessary conflict with the law. Newcomer youth can and do make unfortunate decisions, in part because of their lack of information about Canadian laws and practices, and their consequent challenges in navigating the system. As one of the staff engaged with this community put it, “there are people in the criminal justice system who are, by any sound definition, not criminals.” Early involvement with the justice system spirals into deeper issues, including incarceration, homelessness, and addictions, that could be avoided with appropriate supports. But with only $800,000 per year to reach justice-involved newcomer youth facing a host of challenges including displacement and war trauma, it is hard to meet the scope of needs and almost impossible to provide the volume of long-term support needed.\textsuperscript{151}

\textbf{Places to go: services for homeless youth.} When youth are disconnected from school and a safe home, they need positive options that provide support, guidance, and the input of a caring and responsible adult. Ottawa has some outstanding services that do this, but the needs continue to outstrip the supply.

Drop-ins are a key part of supporting the needs of homeless youth. In the city’s core, they serve between 400 and 500 youth each year. These are more than just a place to go—their client-centred, clinically informed model enables youth facing an array of challenges to get the support they need to reorient their lives and establish stability and success. They provide food, social engagement, basic supports, housing help, employment supports, addictions programs, referrals to a host of other services, and even education supports directly. The impact of supports like this on the justice system is undeniable. They divert youth, by some estimates 100 youth each year, from further involvement in the justice system, at an enormous benefit to those youth,\textsuperscript{152} and also a savings to the public of, on average, over $8.4 million per year in criminal justice costs.\textsuperscript{153} But their existing budget can’t even meet current needs.

\textsuperscript{149} Information obtained from over forty interviews with staff delivering community services in Ottawa.
\textsuperscript{150} Ibid.
\textsuperscript{151} Ibid.
\textsuperscript{152} Ibid.
At Restoring Hope the evening drop-in program is augmented with crisis and addiction services. In their limited space, they are able to bridge that to an overnight program that offers shelter to some of their drop-in participants. But a budget of just $80,000 and constrained space essentially limits the services to a few dozen youth from a couple of neighbourhoods. Budgets are tight for all drop-ins. Downtown services need another $500,000 for space, clinical staff, counselling, and social supports to address the challenges of the youth who come to them. Ottawa also needs at least one additional site outside of their current catchment, access to addiction supports, and more help addressing human trafficking.154

The Youth Services Bureau (YSB) is by far the largest provider of services to youth in crisis, youth experiencing homelessness, and justice-involved youth. Its drop-in programs run seven days a week and provide for basic needs, showers, food, laundry, counselling, mental health supports, clinical services, as well as referrals to a range of other services. YSB also operates two shelters with transitional housing connected to the shelters serving thirty young men and thirty young women. It also provides stable but supported housing for over 150 more young people. Its services are enhanced by housing-based case managers who support youth in addressing mental health, addictions, and conflict resolution, augmented by peer-support systems and partner agencies.155

These facilities are invariably full, and sometimes occupied beyond capacity, with youth making do with couches and overflow motel rooms. Still, not all youth can be accommodated. Despite the scope and size of YSB, it struggles with capacity. The transitional housing and supported housing are backlogged as a result of limited access to affordable housing for those who are otherwise ready to move on. Current funding is not adequate to address after-hours crises and more on-site staff and clinical teams are urgently needed. An investment of $1.5 million would enable the expansion of support teams to improve outcomes. It would prevent 250 to 300 police calls per year and prevent emergency room visits.156

Central Ottawa is certainly not the only area that needs improved access to services for vulnerable youth. YSB notes the need for a facility outside the city core to help youth in crisis access support closer to their own communities and avoid the need to shift to central Ottawa. A program like this could be created for less than $1 million, and enable a wider range of youth to access services.

Vanier’s 49 Marier Avenue Hub was created as an experiment during the pandemic—it has shown the deep need for hub facilities east of the Rideau River. Social recreation, skills development, and arts programs have drawn youth to the existing facility, which should be made permanent, and more could be developed for only about $100,000 per facility per year.

154 Information obtained from over forty interviews with staff delivering community services in Ottawa.
155 Ibid.
156 Ibid.
**Crisis response.** Academic and anecdotal evidence all indicate that youth in crisis tend to respond negatively to police intervention, especially, as noted before, youth with past negative experiences with police. One service provider noted the extreme example of a youth who, faced with a no-knock entry, tried to flee by leaping to his death from a twelfth-story balcony rather than face police intervention. Youth-oriented crisis intervention, preferably with trauma-informed providers, and ideally from providers who have cultural connection and established trust relationships in the community, tend to be better.\(^{157}\)

There are already-established youth crisis intervention systems in Ottawa. For example, YSB operates a bilingual 24/7 crisis line for youth. The line takes both calls and chat messages and received 5,279 calls in 2020. Crisis-line support alone was able to divert over 150 clients from police involvement and over 200 from emergency-room visits.\(^{158}\) YSB’s crisis line connects to their mobile crisis team, which is available from 2:00 PM to 10:00 PM seven days a week in both official languages. This program provides both immediate intervention and follow-up as well as referrals to other services. For crisis calls with youth who are not already engaged in services, a risk assessment and safety plan are provided along with service referrals. In 2020, these 5,279 calls were the equivalent of just over 2% of all calls attended by Ottawa Police.\(^{159}\)

This service could be extended to a 24/7 program for $2.2 million by adding staff teams for the hours not covered. This could offset some of the costs that could be associated with 24/7 support at YSB residential facilities, further lowering the net cost of youth-oriented and youth-appropriate interventions.\(^{160}\) Expanding youth crisis intervention services to 24/7 with an investment on this scale would need to offset only approximately half of 1% of police calls for service to fully offset the expenditure with avoided police costs. Community service providers have the additional advantage of being able to engage peers in this response work, optimizing trust relationships and further improving outcomes. One service provider described the potential as creating “outreach by youth for youth throughout the city”—an option likely to produce significantly better interactions.

**Cultural appropriateness.** The evidence strongly indicates that police interventions with youth vary considerably depending on the racial background of the youth involved. As noted before, Black, Indigenous, and, in particular in Ottawa, Middle Eastern youth are more likely to be stopped by police and to experience more intensive policing. Data on racialized youth in education also shows that Black, Indigenous, and Middle Eastern students are disproportionately subject to suspensions.\(^{161}\) Service providers consequently note that institutional supports that provide alternatives to policing also need to be appropriate to the population being served. One service provider noted that most racialized youth facing mental health challenges get their first

\(^{157}\) Ibid.
\(^{158}\) Ibid.
\(^{159}\) Ibid.
\(^{160}\) Ibid.
mental health assessment in the criminal justice system, having slipped through the cracks in schools and the healthcare system.

As OLIP and City for All Women Initiative (CAWI) note in their 2016 report on anti-Black racism in Ottawa, residents often see key institutions as insufficiently responsive to Black community concerns. There is a need for all institutional actors to acknowledge anti-Black racism and how it affects access to, and trust in institutions, including police and the justice system but also community services, employment supports, and the education system. These impacts vary by gender, age, abilities, sexual orientation, and other social categories so institutions need to be accountable to the communities most affected by gathering racially disaggregated data, and setting performance standards, sharing outcomes, and engaging communities in accountability processes.¹⁶²

Service providers at the Somali Centre for Family Services, Acacia Youth Wellness, OCISO, the African Canadian Association Ottawa, and front-line workers in various community houses noted the need to ensure that programs were culturally appropriate, and so they modified SNAP programs, school supports, drop-ins, and counselling services to ensure they were well-suited and responsive to newcomers, Black, Indigenous, Middle Eastern, and racialized youth.

Regroupement Ethnoculturel des Parents Francophones de l’Ontario (REPFO) addresses pressing needs for Black, francophone newcomer populations facing multiple challenges with systems not designed to address their particular, intersectional challenges, and a social service infrastructure that is not attuned to that combination of barriers. Their hotline fields 300 to 400 calls per year (which are overwhelmingly justice-system related) and another 600 to 700 clients who come through referrals. They operate primarily with part-time staff, volunteers, and interns—working from home and augmenting their crisis supports with referrals, counselling, educational supports, and settlement work. Their work is linked to partners such as Muslim Family Services and others so that they can collectively level out with the perennial overflow of demand.

Culturally appropriate youth strategies, like those being developed by OLIP in partnership with other agencies, can help shape longer-term investment in programs to better support Black and Indigenous youth and young people of colour and reduce their engagement with the justice system. That will include changes to mainstream youth programming, help to expand educational options, and increase recreational alternatives to provide young people with positive outlets and linkages to supportive adults. Modified versions of the Pathways to Education model, the Somali Youth Support Project at Pinecrest-Queensway Community Health Centre, the Newcomer Reads Program, and the Somali Mothers’ education program all offer examples of programming developed to respond to the unique needs of immigrants and newcomers but that will need new investment to expand to meet current needs. For example, school settlement supports have significant backlogs for some language groups and need to be roughly doubled to ensure full access to supports. Six more modified SNAP program staff are needed to double the

¹⁶² Chelby M Narie Daigle, Addressing Anti-Black racism in Ottawa, OLIP/CAWI, 2016.
program capacity to meet current needs. REPOF’s demand exceeds their capacity by almost 100% and they need to double staffing to keep up with community needs.

Summary
There are many important initiatives that can improve outcomes for youth. School-related programs have enormous impact and are underfunded. The youth mobile crisis team, youth hotline, and housing-based supports could be expanded to 24/7. The drop-in programs, community houses, and Community Health and Resource Centres’ youth programs located across the region connect to youth close to home. These could be expanded to meet their current needs and to add locations in more communities. Supports for youth in conflict with the law, like Youth in Transition, Time4Change, On Point, and BGCO’s diversion program need to be expanded to meet current needs and to help more youth move to better approaches. More youth outreach through PYOWs, West End Youth Motivators, and community programs are badly needed. New investments in programming developed and delivered by those most affected are critical. Significant strides can be made in all of these areas for a small fraction of the $100 million spent policing youth.

Violence Against Women
Despite decades of policy reform on violence against women (VAW), existing solutions still largely focus on police and courts acting to punish and rehabilitate perpetrators, despite compelling evidence that focusing on the support of survivors is the most effective tool for ensuring safety and reducing harm.

The “criminal justice” approach is not working
The dominant response to violence against women (VAW)—a police-led, criminal-justice-oriented model—shows a number of significant weaknesses. Pro-arrest policies often cause more harm than good. Many police don’t believe they are an appropriate tool, survivors have a complicated relationship with them, and those on the front lines of the anti-violence movement also question their effectiveness because they frequently penalize survivors themselves and deter reporting. Survivors in racialized and vulnerable populations are

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163 Information obtained from over forty interviews with staff delivering community services in Ottawa.
167 Ibid.
particularly reticent about police involvement,\textsuperscript{171} dissuaded by fear of being arrested or having their partner arrested,\textsuperscript{172} and concerns over language barriers, racist treatment, and even deportation.\textsuperscript{173} Studies show that between 5% and 11% of the cases result in the woman being charged,\textsuperscript{174} despite the primary aggressor, in all instances, having been the male partner.\textsuperscript{175} Such negative experiences add to a large body of evidence that “the criminal justice system tends to be limited in what it can provide to women survivors.”\textsuperscript{176}

Front-line service providers note a range of barriers to engaging the police. Immigrant and newcomer women express concerns about language and cultural barriers, risks of loss of status and deportation, as well as concerns about their partners getting a criminal record and permanent barriers to employment. Some express concern about retaliation if the justice system is involved. These concerns are borne out by a review of the research on mandatory charging policies, especially for newcomer and racialized communities.\textsuperscript{177}

Women from many backgrounds also express concern about not being heard or believed by police, and about cases being dropped or abandoned. Those concerns appear to be justified. A recent report from the Ottawa Coalition to End Violence Against Women (OCTEVAW) noted that, of cases that are reported, only 32% are investigated, and of those, only 42% result in a charge of any kind. Statistics Canada reports that only half (49%) of those charged ever make it to court and conviction rates are 55%.\textsuperscript{178} As a result, cases have a 3.6% chance of ever producing any form of penalty for the perpetrator, and two-thirds of those convicted walk free the next day because custodial penalties occur only 36% of the time—bringing the chance of incarceration to just over 1%. Since only 5% of sexual assaults are reported\textsuperscript{179} that means incarceration is the outcome in six out of every 10,000 sexual assaults that take place. Also worth noting, the majority of sexual assaults reported were reported after the fact, not in the midst of a violent event.

\textsuperscript{172} Buzawa, Buzawa, and Stark, “Chapter 12: Community-Based and Court-Sponsored Diversions,” 320.
\textsuperscript{174} The Women Abuse Council of Toronto, “Documenting Women’s Experiences with the TPS in Domestic Violence Situations”.
\textsuperscript{175} Ibid.
Service providers expressed frustration about the reporting process, noting that responding officers are generally not trained to deal with sexual assaults, that the sexual assault unit where trained officers work is often not engaged when sexual assaults are reported, and that those who are trained often move on from the unit. The OPS’s website notes that, in 2019, 70 of their 2,000 staff were trained to respond to sexual assault issues.\\footnote{180 Ottawa Police Service, “Violence Against Women,” Ottawa Police 2019 Annual Report, \url{https://www.ottawapolice.ca/en/annual-report-2019/violence-against-women.aspx}.}

Several front-line service providers have been involved in efforts to improve OPS performance on this issue. Many report frustration with the lack of improvements to the system caused by police insistence on retaining control of the reform process instead of engaging in genuine co-design and co-creation. The ultimately police-led process fails to significantly deviate from existing police practice and resists anything other than police-controlled models. This is most confusing when the police spend $1 million annually on a Victim Support Unit that duplicates the work of Ottawa Victims Services, a well-established organization that actively partners with police and serves over 5,000 victims of crime per year.\\footnote{181 Ibid.}

**More effective alternatives**

Since the rate of criminal justice outcomes in sexual assault cases is less than 1%, and long-term outcomes are so rarely affected by that system, it is surprising that we spend so much on criminal justice system interventions and so little on supporting the struggles of survivors—support that shows the most impact on long-term outcomes for women and their children.

Ottawa is vigorously served by community-based anti-violence programs; shelters for survivors of partner violence and second-stage transition houses; independent sexual assault support centres; and specialized services for immigrant women and Indigenous women.\\footnote{182 For more information about the range of organizations supporting survivors in Ottawa, see \url{https://www.octevaw-cocvff.ca/get-help}.} While not all providers could be interviewed for this study, interviews with crisis service providers, system navigation programs, and advocacy organizations helped to provide an overview of the issues.

These services provide crisis hotlines for women facing gender-based violence, as well as ongoing supports, referrals, and system navigation that assists women in their search for safe housing and trauma care for themselves and their children, as well as legal supports and income assistance.\\footnote{183 Ibid.} Meanwhile, LGBTQ2S survivors of gender-based violence have few resources or supports for their needs.

These services manage an endless stream of crisis calls and support needs. For example, the Sexual Assault Support Centre fielded 9,681 crisis calls last year while also carrying out 1,000 advocacy calls to help locate housing, counselling, and legal services. It also offered another 550 hours of other supports. And they did that with a threadbare operation. Their five staff rely on another twenty-five volunteers to manage the volume on a budget of $438,000. Immigrant
Women Services has to restrict their staff to part-time hours to stretch their roughly $200,000 VAW staff budget over five people.\(^{184}\)

Service providers face chronic long-term and ongoing underfunding. There aren’t enough staff to meet demands, salaries are low, volunteers are heavily relied on, and mainstream institutions consistently devalue front-line expertise. Staff currently struggle to support clients in part because of the chronic shortage of shelter beds and affordable housing. A report by OCTEVAW showed that, due to lack of space, six women were turned away from VAW shelters for every one who was admitted.\(^{185}\) In the 2017/2018 fiscal year VAW shelters turned away over 2,000 women (statistics were not kept for accompanying children).

Nelson House turned away 447 women, Interval House of Ottawa turned away 800, Oshki Kizis Lodge turned away 100, Maison d’amitié turned away 417, and Chrysalis House turned away 344.\(^{186}\) Staff describe many other unworkable delays, including six- to eight-month-long wait-lists for counselling for children and women waiting two to six months to access legal counsel. Women in rural areas of Ottawa face even more strained access, often “couch surfing” as they wait for safe housing, and struggling to find geographically accessible programs for themselves and their children. Centre d’aide et de lutte contre les agressions à caractère sexuel (CALACS) notes the severe shortage of French-language services for their clients as well.\(^{187}\)

The evidence indicates a need for interventions that are survivor focused: led by community service providers that are committed and skilled in intersectional feminist frameworks for addressing violence against women and familiar with the support needs and opportunities for women facing violence. This requires new investments in front-line VAW staff, expansion of shelter spaces for women leaving violent homes, more long-term affordable housing, as well as new investments in trauma care and counselling for women and their children.\(^{188}\) Instead, the OPS spends millions on sexual assault resulting in the conviction of one in 100 perpetrators.

**Summary**

Justice system responses have little positive impact on violence against women, but use millions of dollars in resources to intervene there. Effective tools that enable women to get the support they need to make safe choices for themselves and their children, meanwhile, run on shoestring budgets and are vastly under-resourced.

**911 Dispatch**

Ensuring that the right person intervenes to promote public safety requires a process for dispatching responses that reflect the real safety needs of communities.

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\(^{184}\) Ibid.  
\(^{186}\) OCTEVAW, Letter to Minister McLeod, 27 March 2019, [https://endvawemail-my.sharepoint.com/w:/g/personal/ed_octevaw-cocvff_ca/EZFpypN2DhF6knyAlUticB8syo004CAF3i7KoCs_P42A?rtime=Qjw7IZ72Ug](https://endvawemail-my.sharepoint.com/w:/g/personal/ed_octevaw-cocvff_ca/EZFpypN2DhF6knyAlUticB8syo004CAF3i7KoCs_P42A?rtime=Qjw7IZ72Ug).  
\(^{187}\) Information obtained from over forty interviews with staff delivering community services in Ottawa.  
\(^{188}\) Ibid.
Most 911 calls aren’t really about policing
As retired Major Neill Franklin, who served as head of training for the Baltimore Police Department, notes “Many calls don’t involve a crime. And when they do, many of those crimes are minor and related to quality-of-life issues such as homelessness, mental health disorders, or substance misuse. We need to stop expecting police to do social work and start sending the right trained professionals to address low-level crimes and non-criminal calls for service.”189 These police-involved and even police-led responses are not only often unnecessary but can also create complications when they’re not appropriate to the situation. According to the International Association of Chiefs of Police, “the mere presence of a law enforcement vehicle, an officer in uniform, and/or a weapon … has the potential to escalate a situation” when a person is in crisis.190 For these calls, studies indicate that civilian response by staff, such as clinicians, crisis intervention specialists, or peer navigators, can provide valuable skills and perspectives on the call.191

Dispatchers at 911 could be dispatching civilian responses in a significant number of calls. A recent analysis conducted by the Center for American Progress (CAP) and the Law Enforcement Action Partnership (LEAP) examined 911 police calls for service from eight US cities and found that between 23% and 39% of calls were low priority or non-urgent, while only 18% to 34% of calls were life-threatening emergencies.192 In Ottawa, 911 calls are predominately lower-priority and non-urgent and non-emergency calls. Over 35% of all calls required police presence and only two-thirds of those were generated by the public—the rest were proactively generated by police.193 A recent US study found top-priority, life-threatening emergencies made up the smallest portion of 911 calls, from 18% in Seattle to 34% in Hartford.194 High-priority calls make up only 5% of calls in Ottawa.195

Non-police responses to 911 calls make sense
Clearly, 911 can dispatch more appropriate personnel in far more situations than is currently the case. Unfortunately, even in jurisdictions with highly effective civilian response services, the 911 service, which is managed by the police, continues to primarily dispatch police to circumstances where civilian response is appropriate.196 Marginalized communities are increasingly disinclined to call 911 because of their concerns about police response.197 Realigning 911 dispatch will be a

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192 Irwin and Pearl, “The Community Responder Model: How Cities Can Send the Right Responder to Every 911 Call.”
194 Irwin and Pearl, “The Community Responder Model.”
195 Ibid.
196 Thompson, “This City Stopped Sending Police to Every 911 Call.”
significant component of any process to ensure that the most appropriate staff intervene with the public to promote community safety.

Ottawa service providers underscore the need for change, noting that many people facing a crisis feel stuck, needing help but not wanting criminal justice involvement. People with loved ones facing a mental health crisis don’t want to see them arrested but don’t have an alternative urgent response. Parents who encounter folks who are without homes and in distress want them to get help, but not arrested—they currently have no options. Parents of youth who need interventions, but not a criminal record, don’t know where to turn. If 911 was not a default police response, but a system that, as one provider said, “sends the right person to the right place at the right time” urgent, noncriminal matters would get appropriate responses.\textsuperscript{198}

**Effective alternatives already exist**

In Ottawa 211 and 311 are already in operation. They currently manage hundreds of thousands of calls for a wide variety of service needs.\textsuperscript{199} Ensuring that calls go to a dispatcher whose primary goal is to send the right staff to the right task seems like the best option.

Some debate has been generated about the legality of delivering 911 with staff other than police employees under existing Ontario legislation. While the *Comprehensive Ontario Police Services Act* identifies “emergency response” as a core policing duty, it does not define the term and is silent on whether that includes 911 services, dispatch, or any other precursor to an emergency response as a “police function” under the act. Furthermore, section 14 of the act provides that a “prescribed entity” may provide even those core policing functions subject to ministerial approval.\textsuperscript{200} There is no impediment to Ottawa pursuing an alternative operator for 911, and any impediment that might exist can be erased with a regulatory adjustment by the minister.

**Summary**

The fact that 911 dispatch currently resides with police services in Ontario is a historical anomaly, not a necessity. In BC and the UK, agencies that are independent of any one service provider handle emergency dispatch and effectively allocate calls to the most appropriate organization to ensure the most effective intervention. While police must provide emergency services, they are not required to provide all of them, as our fire services and paramedics amply demonstrate. If Ottawa wants the right organizations to arrive at the right situation at the right time, they would be best served by an independent dispatch system that wasn’t accountable to only one service provider.

\textsuperscript{198} Information obtained from over forty interviews with staff delivering community services in Ottawa.


\textsuperscript{200} Province of Ontario, *Comprehensive Ontario Police Services Act*, 2019, \url{www.ontario.ca/laws/statute/s19001#Sched115}.
Recommendations

The City of Ottawa already spends a considerable amount of taxpayers’ money addressing the crises experienced by youth, people who are homeless, people facing mental health challenges, and people experiencing gender-based violence. Currently, the city is not getting positive long-term outcomes from that high level of spending. Municipal spending in these areas has often focused on policing, which evidence indicates is not the most effective tool for addressing these issues. As a consequence, costs continue to rise, the problems become worse, and outcomes for the most vulnerable people involved are negative.

There are alternatives. Ottawa has people who are skilled in addressing precisely these challenges—who are ready and able to take on these tasks, often at a far lower cost and consistently with better outcomes.

While large-scale changes in multi-million dollar institutions rarely happen quickly, and police services in particular are generally slow to change, it can never be too soon for the City of Ottawa to begin to focus its resources on getting the right person to address the right problem at the right time, including:

1. **Reallocating some of the millions spent policing homelessness** and devoting some of it to programs that have a longer and more significant positive impact. The following initiatives can have a greater impact for a fraction of what the City of Ottawa now spends:
   - $100,000 could establish a new resource centre in an OCH community.
   - $200,000 could meet the need for eviction-prevention staff in rooming houses to prevent growing homelessness.
   - $250,000 could put three bilingual outreach workers on the ground east to the Rideau River.
   - $350,000 could make existing crisis support programs 24/7 operations.
   - $360,000 could put peer housing supports in eight new communities.
   - $500,000 could put a new homeless outreach van on the road, reaching more people and helping them access appropriate services.
   - $500,000 to $1,000,000 could create a new homeless outreach program to tackle emerging issues before they become crises.
   - $550,000 could cover the operating cost for recovery beds to support transitions to stable housing.
   - $1 million could create a new day program to enable people experiencing homelessness to be off the street during the day.
   - $2 million could enable eastern Ottawa residents to access the services of a Community Health Centre.
   - $7.2 million could provide the supports to assist tenants in 1,200 housing units of supportive housing.
2. **Reallocating some of the millions spent annually policing mental health** and devoting some of it to programs that have a longer and more significant positive impact. The following initiatives can have a greater impact for a fraction of what the City of Ottawa now spends:

- $250,000 would add 1,000 clients for the System Navigators program.
- $500,000 would add a crisis-response van to existing services.
- $1.25 million would create a Community-Based Mental Health Team in sixteen high-risk neighbourhoods to support marginalized, Black, and racialized families.
- $1.5 million would create one non-police mental-health-crisis response team.
- $1.5 million would fill the gap for safe beds in Ottawa.
- $1.5 million would provide a Community Addiction Team for Ottawa, serving the people with the most critical addiction challenges.
- $1.9 million would spread culturally appropriate francophone mental health services across Ottawa.
- $1.3 to 2.6 million would provide Ottawa with the Assertive Community Treatment teams it needs.
- $2.5 million would double the capacity of safe consumption sites.
- $14 million would end the waits for intensive case management.

3. **Reallocating some of the millions annually spent policing youth** and devoting some of it to programs that have a longer and more significant positive impact. Initiatives like the following can have a greater impact for a fraction of what the City of Ottawa now spends:

- $100,000 could build a new multilingual community hub in Eastern Ottawa.
- $125,000 could add a new SWAG program to help students facing intensive barriers to complete high school.
- $185,000 could expand immigrant-oriented francophone youth-success programs to more schools in French-language boards.
- $350,000 could add youth peer-outreach programs to six more communities.
- $500,000 could create a modest Community House program; $1.5 million could create a full-service program.
- $400,000 could support badly needed youth drop-ins, and $1 million could create a full-service program outside the downtown.
- $500,000 would add fifty schools to the Choices program, helping youth on the brink of the justice system to change course.
- $1.2 million could create a new Pathways program to raise graduation rates across a community.
- $1.5 million would bring Ottawa’s Youth Outreach Worker program up to the levels other cities enjoy.
- $2.2 million could expand existing youth crisis response to 24/7.
4. Reallocating some of the millions spent annually on justice system responses to gender-based violence and devoting some of it to programs that have a longer and more significant positive impact.

5. Reallocating 911 operations to an organization that is focused on delivering the right service at the right time, and not managed by a single service provider.
Appendix: Limitations

The study faced a number of constraints and calculations were dependant on the data available. Ottawa Police, like police services across North America, share little of their data, making evaluation and assessment difficult. There is no comprehensive, clear, accessible, and disaggregated source of data to draw on. For example, although it’s of great concern to communities, use-of-force statistics are not disaggregated by the race, age, or the other demographic characteristics of the people they affect. Police data obtained for this study was gleaned from specific reports, summaries provided to the Police Services Board, research carried out by academic institutions and the Ontario Human Rights Commission, Statistics Canada data, annual reports, and coverage in the media.

Disaggregated budgets have only recently been provided which makes cost comparisons over time difficult. There are no cost breakdowns for specific types of policing, leaving analysis to rely on averages to calculate probable costs. As a result we made multiple calculations using different models to confirm the likely costs. We analyzed the frequency of specific types of police interactions, calculated their percentage of total police interactions, and assessed the percentage of police staff time they likely required. We applied average costs from other cities and assessed whether they reflected the data we saw in the projections made from Ottawa data. We also relied on grey literature and police reports for anecdotal assessments of particular types of costs to confirm that they correlated with our projections.

Involvement with the justice system is strongly negative correlated with income, housing, education, employment, opportunity, inclusion, and other social determinants of health. Many of the interventions outlined here would be less critical in a context where those needs were fully met. This analysis does not attempt to fully explore those protective factors or the full scope of preventative investments that might also diminish the need for justice system interventions.

Social services offer significant opportunities to improve community safety but continue to suffer from chronic funding shortfalls. In several cases providers were unable to give cost estimates because entire programs had no actual source of funding and were carried out in spare time, off the sides of desks or using volunteer labour. Providers also noted that the sector, being so perennially short of resources, faced the coordination and efficiency challenges associated with scarcity, including the need to gather funds from and report to multiple funders for a single program and the challenges associated with staff turnover driven by low salaries and the precarity of funding. Stable, adequate funding would enable the sector to deliver improved strategies for community safety at even lower costs than are outlined here.

This work assesses the scale and scope of possible reallocations but does not attempt to calculate the timelines through which those changes might occur. Large institutional change is complex and the data available was not sufficient to clearly indicate a specific timeline for change.
The data available from community service providers varied in level of detail, with anecdotal data being used when necessary. Community service providers also noted, on several occasions that, although they saw the services they offered as optimal interventions for clients in crisis, and that resulted in improved outcomes, many had partnerships with police that they wished to sustain, so asked that we be clear that inclusion of data from any organization not necessarily be read as an inherent critique of policing by any specific organization.

There were also data limitations resulting from the underfunding of key groups and specific providers of community services. While we were eager to more fully capture Indigenous experiences, we respected and worked with the constraints faced by Indigenous organizations and Indigenous leaders who indicated that the pressures on them, especially in the challenging times of the last year, made fuller participation impossible. They requested that we share with them our research although they could not dedicate time from their organizations to contributing to it.

The analysis attempts to look at available infrastructure that can be scaled or expanded to meet needs currently addressed ineffectively by policing. It is difficult to calculate the cost associated with scaling unfunded, informal, and grassroots initiatives that current operate without budgets and so those opportunities are likely under-reported.

Inappropriate policing is particularly challenging for intersectional groups such as francophone Black and Middle Eastern residents, racialized nonbinary populations, or racialized youth facing mental health challenges. While we endeavored to capture some of the impacts on people facing multiple challenges relating to the current community safety system, the specific impact of each intersectional experience is different and is not fully captured by the overview here.

While the analysis clearly indicates that community-based nonprofit organizations have a role in addressing the issues outlined here, it is also clear that real change will have to be led by the people most affected, specifically grass-roots, Black, Indigenous and racialized individuals and organizations who have the most direct experience of the impact of systemic discrimination and who are most familiar with the effective means of addressing those issues. Non-profit agencies have undertaken this study as an effort to play their specific part in supporting change, within a larger whole, not as an assumption of leadership or primacy in the process.

Assessments that there is benefit in expanding social service interventions should not be read as an assessment that those providers are exempt from the need to better address the challenges of anti-Black racism, anti-Indigeneity, systemic racism, or other forms of bias, or that institutional actors are necessarily the only or the best participants in reform. All of the organizations involved in the project fully recognized the need for institutional and mainstream services to continue to acknowledge the impact of colonialism and anti-Black racisms, address systemic discrimination, engage marginalized communities in assessing and revising their approaches, and fund and support Black, racialized, and Indigenous-led organizations in accurately assessing progress in these areas. The growth, funding, and expansion of Black-led organizations, Indigenous-led organizations, organizations led by racialized groups, as well as grassroots and
community-led groups should also be a priority in correcting imbalances in the safety system. This analysis should lead City Council, service providers, and all partners to take the opportunity to ensure that racialized experts will be invited to the table to develop and co-lead, implement, and evaluate more critical and appropriate responses.