

# Provincial Human Services and Justice Coordinating Committee

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2024 Pre-Budget Submission to the Minister of Finance

# OUR NETWORK

Ontario’s [Human Services and Justice Coordinating Committee \(HSJCC\) Network](#) is a cooperative effort of the Ministries of Health, the Attorney General, Children, Community and Social Services, and the Solicitor General. Our priority consideration is for individuals with complex human service needs which may include but are not limited to those living with mental health issues, substance use concerns and/or behavioural dependencies, or neurodevelopmental and neurocognitive disabilities including developmental disabilities and dual diagnoses and that are involved in the justice system.

Our network includes over 1500 members across Ontario. Each HSJCC is a voluntary collaboration between social service organizations, Black, Indigenous, and racialized led organizations, mental health and addictions organizations and partners from the justice sector, including police services, Legal Aid Ontario, Crown attorneys and correctional and probation officers. There are 14 Regional HSJCCs who provide education and training to their members, and work to address regional change initiatives. There are 39 Local HSJCCs who focus on education and training, while also coordinating care for justice-involved individuals in their communities and provide input to regional committees.

Our network affirms the importance of a coordinated, cross-sectoral approach to address issues affecting Ontarians in conflict with the law and its effective means of reducing criminalization across the province. We remain committed to providing essential supports to communities that face multiple barriers to accessing health care.

The [Provincial HSJCC \(P-HSJCC\)](#) functions as a planning body, providing support and leadership to the individual and collective efforts of the Local and Regional HSJCCs. The P-HSJCC is supported by the HSJCC Secretariat, which is housed at the Canadian Mental Health Association, Ontario. Established in 2015, with funding made available by the Ministry of Health, the Secretariat has supported a considerable expansion of the work of the HSJCC Network by coordinating province-wide projects, providing overall project management, strategic policy advice and analysis and assistance with member engagement support. The Secretariat also assists with education and knowledge exchange activities, including educational webinars, newsletters, and informational guides, which are all made publicly available on the HSJCC [website](#).

The following submission is made on behalf of the HSJCC Network.

# OUR MEMBERSHIP



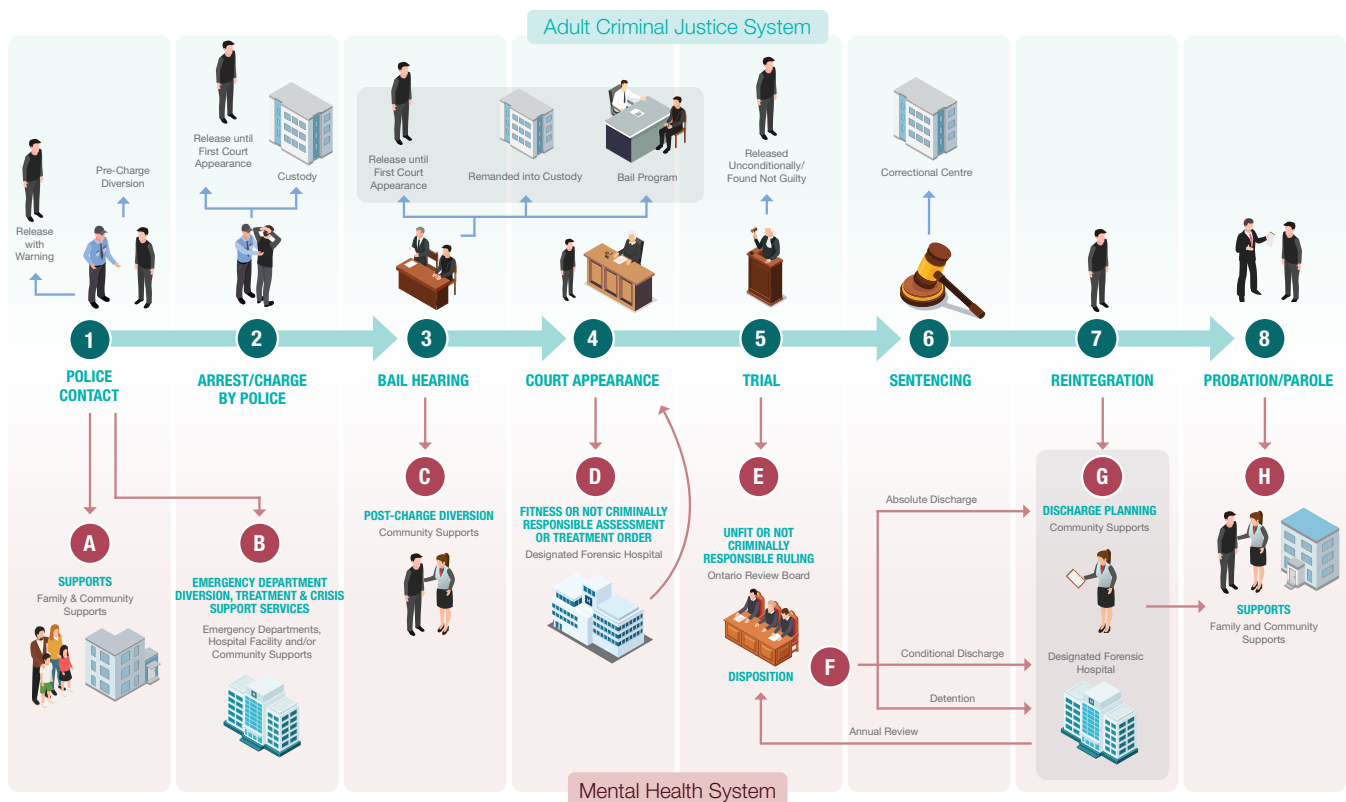
## OUR REQUESTS

### Ensure Equitable Access to Preventative Mental Health and Substance Use Care

Since 2020, the need for greater access to preventative mental health and substance use care became clearer as more and more Ontarians experienced a new or worsening mental health or substance use issue. Since the onset of the COVID-19 pandemic, the mental health, addictions and/or neurodevelopmental needs of Ontarians have risen and increased in complexity. Years later, members of the HSJCC Network are continuing to manage a greater volume of complex cases, which require more time, resources and supports to help address.

The populations that our members serve are among the most vulnerable in Ontario and those who are most at risk of developing mental health issues. Our core service populations are also more likely to come into contact with the justice system <sup>i</sup>. Regrettably, due to long wait times, lack of awareness of services or unavailability of services in their communities, many people who come in contact with the justice system are accessing mental health, substance use, and/or developmental disability assessments and services for the first time <sup>ii</sup>. No matter the first point of contact with the justice system, these populations fare worse than those who do not. To help illustrate the challenges in navigating the criminal justice and mental health systems, a graphic guide is provided below.

## Navigating the Adult Criminal Justice & Mental Health Systems



An estimated 1 in 5 people with a mental health and/or substance use issue have come into contact with police. Arrests among individuals with mental health issues are also more common than for the general population – 40% of people with a mental health issue have been arrested over the course of their lifetime, while only a small percentage of these interactions with police were related to criminal activity <sup>iii</sup>. Interactions between individuals with mental health issues and police are also more likely to be related to a minor offence, and are more likely to lead to an arrest despite the lesser nature of the offence <sup>iv</sup>. These interactions are also more resource-intensive for police. A report by the John Howard Society of Ontario highlights that a police interaction with a person with a mental health issue uses almost 90% more resources than interactions with individuals who do not have mental health issues <sup>v</sup>.

For those with mental health and/or substance use issues who are taken into custody, the bail and court system can present substantial barriers. These populations are more likely to be living in poverty, to be experiencing homelessness and to lack the necessary supports and treatment options in the community, which can impact their ability to comply with bail conditions. In bail courts in Ontario, individuals are often subject to conditions related to their personal behaviour, conditions that may not necessarily be directly tied to the offence with which they are charged<sup>vi</sup>, which further criminalizes those with mental health and/or substance use issues and those with developmental disabilities such as Fetal Alcohol Spectrum Disorder (FASD) or an Acquired Brain Injury (ABI). The impacts of strict bail conditions are most likely to impact Black, Indigenous, and racialized individuals, who are most overrepresented among the remand population, those who are taken into custody pending trial. In 2021-2022, 79% of individuals in provincial custody facilities in Ontario were on remand and therefore legally innocent<sup>vii</sup>. Providing the necessary supports for individuals with mental health and substance use issues to comply with their bail conditions or while in custody awaiting trial is costly and often ineffective.

In addition, these populations are more likely to develop symptoms of a severe mental illness while in correctional custody, particularly if they are placed in segregation. An estimated 41% of people in provincial custody in Ontario will experience at least one severe mental health issue while in custody<sup>viii</sup>. Both individuals with existing mental health and substance use issues are vulnerable to decompensation in custody. These challenges persist upon release, as these populations are 58 times more likely to be hospitalized in a psychiatric facility one week after their release and 12 times more likely within the first three months of their release from custody<sup>ix</sup>.

### **Prioritizing Investments in prevention and early intervention services**

The current system for mental health and substance use care does not sufficiently prioritize preventative and early intervention care such as psychotherapy, brief interventions, targeted prevention, addictions treatment, case management, specialized assessments and treatment<sup>x</sup>. Too many vulnerable individuals receive mental health, addictions or neurodevelopmental assessments and related treatment after they have come into contact with the justice system. Not only can this deepen the cycle of criminalization for those who are living with a mental health and/or substance use issues, but it creates additional pressures and increased costs for the policing and healthcare sectors in Ontario. By intervening earlier, we can help prevent the need for more intensive interventions, reducing the resourcing and cost pressures on police, hospitals, and correctional facilities across the province.

### **Where to Invest**

The appropriate investments in preventative and early intervention programs and supports through funding increases to the community mental health and community justice sector base budgets will better support our members as they provide high-quality services to those in their communities who are among the hardest to serve. The HSJCC Network welcomed the government's investment of a 5% increase in base budget funding for the community mental health and addictions sector in the 2023 budget. However, more is needed to stabilize and support the mental health, substance use and developmental disability programs and supports that our members provide.

This investment represented the first base budget increase in a decade for the community mental health and addictions sector and allowed our members to continue the crucial work that they do. It also provided slight salary increases for their staff members, whose pay is significantly lower than other areas of the healthcare system. In November 2023, the released of the [Ontario Community Health Compensation Market Salary Review](#), highlighted the pay gap between community health sector staff, who received an average salary increase of 1.53% in 2023, with some roles not receiving an increase at all. In contrast, hospital staff received an 11% increase while emergency medical services received an 8% increase<sup>xi</sup>. Our network welcomes measures in healthcare to address cost pressures and increase pay to reasonable levels. However, the community mental health and community justice sectors provide desperately needed care in their communities, while navigating inflationary pressures and historic needs for service.

**To stabilize and support the community mental health and community justice services sector, we echo our member organizations' requests for fair wages for their service providers.**

## INCREASE HOUSING SUPPLY AND SUPPORTS THROUGHOUT THE HOUSING CONTINUUM

Improving housing accessibility for justice-involved individuals with mental health and/or substance use issues has been a longstanding priority for the HSJCC Network <sup>xii</sup>. As a Network, we welcome the commitments made in the last few years by all levels of government to end chronic homelessness. The relationship between the social determinants of health such as housing, mental health issues, substance use, and justice-involvement and cycles of poverty, homelessness and incarceration have been established in numerous reports and studies <sup>xiii</sup>. The broader social determinants of health<sup>1</sup> can also reinforce these issues since poverty and social inequality can create or exacerbate housing instability, mental health and substance use issues, and therefore the risk of justice-involvement. Providing the appropriate housing at the right time, from across the housing continuum <sup>xiv</sup>, is an essential way to interrupt the cycle between mental health issues, justice-involvement, and homelessness.

It is essential that an adequate supply of housing and the accompanying supports be available throughout the full housing continuum for justice-involved individuals, including transitional housing, supportive housing, and subsidized housing.

**Each level of housing provides unique supports and benefits for justice-involved individuals with complex human service needs issues that help to divert these populations from other access points to services, such as emergency departments or through continued involvement with the criminal justice system.**

Housing programs that provide transitional housing, supportive housing and subsidized housing also help to address the great pressures that various levels of government are facing to end homelessness and the presence of encampments in communities across the province.

## HOUSING SUPPORTS AND SERVICES FOR JUSTICE INVOLVED INDIVIDUALS

### Transitional Housing

Transitional housing provides supports for individuals released from custody, those who may be at risk of being held in custody during a bail hearing due to their experience of homelessness, those who are leaving long-term forensic hospitalization, and those being released from custody after long-term sentences. This form of housing provides short-term placements with support services (such as bail beds) to prevent homelessness or returning to homelessness, supporting reintegration, and mental health and substance use issues <sup>xv</sup>. However, transitional housing, which can be available for up to three years, is often not available to those who need it most due to lack of capacity to meet existing needs. Further along the continuum, connections to longer-term supportive housing are not necessarily available due to similar capacity challenges, which exacerbates this issue. For justice-involved individuals with complex needs, the post-incarceration supports available in transitional housing may not be sufficient to meet the need for service, resulting in even greater service gaps.

**In the London-Middlesex region, the Canadian Mental Health Association Thames Valley branch offers affordable housing services for individuals with mental health and substance use needs, with a spectrum of support options that can include daily living activities, medication administration and education, psychosocial rehabilitation programming and case management services. CMHA Thames Valley's goal in providing transitional and longer-term housing is to promote community-based recovery while ensuring that services are tailored to the needs of the clients they support.**

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1 The social determinants of health are conditions in the environments where people, live, learn, and work that affect a wide range of health risks and outcomes.

## Supportive Housing

Supportive housing provides services and supports to individuals living independently in the community who may need on-or-off site supports. Supports can include clinical mental health and substance use services (i.e., case management, assertive community treatment, etc.) and social supports (i.e., employment, peer support, and life skills training, etc.). Much like transitional housing, supportive housing can be available to justice-involved individuals for months to years, although unlike transitional housing, supportive housing may not have a requirement that individuals leave programs after a specific period.

For individuals who are justice-involved, providing access to supportive housing plays a preventative and recovery role by assuring them housing, making it affordable for low-income individuals, ensuring acceptable quality and safety, and ensuring more secure tenancies <sup>xvi</sup>.

**Supportive housing <sup>xvii</sup> also has wider economic benefits across a series of systems, including the healthcare, social services, and justice sectors. In 2021-2022 in Ontario, the cost associated with providing care in hospital is \$486 per day while the cost associated with supporting individuals in custody is \$365 per day <sup>xviii</sup>.**

Providing housing for an individual in the community with the necessary supports is not only healthier, but it is also cost effective – the average cost associated with providing supportive housing in the community is \$72 per day.

Despite the wider benefits of supportive housing, the level of investment in this type of programming is insufficient, both in terms of the funding required to expand supply, as well as the funding for the necessary supports. Our members report that the need for supportive housing exceeds the availability of services, at a time when clients are demonstrating more complex needs that require more time and investment to support. Wait lists for these services are growing and the demand has long outpaced supply. The current shortfall of supportive housing has a disproportionate impact on individuals discharged from custody facilities and directly from court, since this population is often discharged without a fixed address. Despite the level of need among the population we serve in the community mental health and addictions and community justice sectors, the greatest proportion of funding for new housing is allocated to other areas of the housing continuum.

## Barriers to Supportive Housing for Justice Involved Populations

Among the vulnerable populations that access supportive housing, those with previous justice-system involvement are the most difficult to place in these programs. There are severe barriers for those who have mental health and/or substance use issues and criminal-justice system involvement. These individuals face discrimination related to their criminal records, having previous patterns of disruptive behavior, having multiple complex social and healthcare needs, and challenges with previous tenancies <sup>xx</sup>. Within supportive housing, there is a need for dedicated funding to expand access to this programming for individuals with mental health and/or substance use issues and previous justice-system involvement. Any dedicated fund for these populations should still allow for some flexibility, as regions in the province face unique challenges in supporting justice-involved populations.

The P-HSJCC welcomed the construction of more affordable housing in cities across the province in 2023 <sup>xx</sup>. However, more is needed, particularly given the stigma and discrimination that people with complex needs face when obtaining appropriate housing. Community service providers have consistently reported that landlords may discriminate against people with complex needs for reasons such as having criminal records, showing past patterns of disruptive behavior, having multiple complex social and healthcare needs, and having inconsistent tenancy histories. Addressing the need for additional housing stock for individuals with complex needs requires a targeted and coordinated approach.

## Subsidized Housing

Subsidized housing provides an opportunity for individuals with previous justice system involvement to reintegrate into standard residential settings. Justice-involved individuals often face discrimination at the hands of potential private landlords, particularly those who have served sentences for serious offences. Further, agencies that support justice-involved individuals often report that subsidies for privately-owned rental units do not meet market rent. Justice-involved individuals with mental health and/or substance use issues may not be able to transition to subsidized housing due to a lack of affordability, impacting the availability of supportive housing units. The units that these populations may access often are of lower quality and are in greater states of disrepair than standard market rentals.



## OUR REQUESTS:

In order to address the housing needs of justice-involved individuals with mental health and/or substance use issues, the HSJCC Network recommends the following:

**1.**

**Develop and implement an inter-ministerial group comprised of the Ministry of Health, the Ministry of the Solicitor General, the Ministry of the Attorney General and the Ministry of Children, Community and Social Services and the Ministry of Municipal Affairs and Housing to ensure the coordination of decision-making related to housing with supports for justice-involved individuals with mental health and/or substance use issues. An advisory committee should be convened to support the work of this inter-ministerial group, composed of service providers and subject matter experts to help guide the inter-ministerial group's efforts, and to ensure transparency and accountability.**

**2.**

**Allocate \$33 million for capital and operating costs for the development of innovative and evidence-based models of housing with supports. This fund should be available exclusively to the community mental health and addictions, and community justice organizations. It is recommended that \$11 million from this fund be dedicated specifically for supportive and transitional housing for justice involved individuals.**

**3.**

**Allow community mental health and community justice organizations that provide rent subsidies for justice-involved populations to use their rent subsidies flexibly, to respond to client needs.**

As an intersectoral, inter-ministerial Network, we collaborate with community organizations, hospitals, police and correctional services, and various levels of government. We share a commitment to supporting individuals with mental health, substance use, and/or neurodevelopmental disabilities to access the services and treatments they need to improve or maintain their wellbeing in their communities. The HSJCC Network has the knowledge and expertise to support Ontario's Roadmap to Wellness. We would welcome the opportunity to discuss these requests.

## REFERENCES

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- <sup>ii</sup> Stuart, H. (2005). Fighting Stigma and Discrimination is Fighting for Mental Health. Canadian Public Policy. 31: S21-S28; Corrigan, P. (2004). How stigma interferes with mental health care. American Psychologist, 59(7): 614-625.
- <sup>iii</sup> *Ibid*
- <sup>iv</sup> *Ibid*
- <sup>v</sup> *Ibid*
- <sup>vi</sup> Legal Aid Ontario (July 18, 2019). A legal aid strategy for bail. A legal aid strategy for bail – Legal Aid Ontario.
- <sup>vii</sup> Statistics Canada. (2023). Average counts of adults in provincial and territorial correctional programs. Online: [Average counts of adults in provincial and territorial correctional programs \(statcan.gc.ca\)](https://www150.statcan.gc.ca/n1/pub/26-011-x/2023001/article/00001-eng.htm).
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- <sup>ix</sup> Ministry of Health & Ministry of the Solicitor General. (November 2021). Bridging the Gap: Programs that Intersect with Forensic Mental Health and Corrections. Presentation to the Human Services & Justice Coordinating Committee Conference. Online: [PowerPoint Presentation \(hsjcc.on.ca\)](https://www.hsjcc.on.ca/wp-content/uploads/2021/11/Bridging-the-Gap-Programs-that-Intersect-with-Forensic-Mental-Health-and-Corrections.pdf)
- <sup>x</sup> Government of Ontario. (2020). Roadmap to Wellness: a plan to build Ontario's mental health and addictions system. Online: [Roadmap to wellness: a plan to build Ontario's mental health and addictions system | ontario.ca](https://www.ontario.ca/document/roadmap-to-wellness-a-plan-to-build-ontario-s-mental-health-and-addictions-system).
- <sup>xi</sup> Eckler Ltd. (2023). Ontario Community Health Compensation Market Salary Review. Online: [Ontario-Community-Health-Compensation-Study.pdf \(amho.ca\)](https://www.amho.ca/wp-content/uploads/2023/01/Ontario-Community-Health-Compensation-Study.pdf).
- <sup>xii</sup> HSJCC Network engagement and recommendations on improving supportive housing for justice-involved individuals with mental health and substance use issues were included in the Provincial HSJCC's Housing and Justice Report (February 2020). Online: [HSJCC\\_Housing-Justice-Report\\_EN-updated.pdf](https://www.hsjcc.on.ca/wp-content/uploads/2020/02/HSJCC-Housing-Justice-Report-EN-updated.pdf).
- <sup>xiii</sup> John Howard Society of Ontario, Social Research and Demonstration Corporation, and Canadian Observatory on Homelessness. (May 2022). No Fixed Address: The Intersections of Justice Involvement and Homelessness. Online: Reintegration & Housing Archives - John Howard Society of Ontario.
- <sup>xiv</sup> The housing continuum refers to the types of housing in a community that is needed to meet the needs of different residents. The housing continuum includes emergency housing such as emergency shelters, transitional housing, supportive housing, subsidized housing, market rental housing and market homeownership housing. See Canadian Observatory on Homelessness, Homelessness Hub (2021). Affordable Housing. Online: [Affordable Housing | The Homeless Hub](https://www.homelessnesshub.ca/affordable-housing).
- <sup>xv</sup> Wellesley Institute, Canadian Mental Health Association, Toronto, and Addictions & Mental Health Ontario. (July 2020). Justice-focused Mental Health Supportive Housing in Toronto: Needs Assessment and Action Plan. Online: [Justice-focused-Mental-Health-Supportive-Housing-in-Toronto-Needs-Assessment-and-Action-Plan-2020.pdf \(wellesleyinstitute.com\)](https://www.wellesleyinstitute.com/wp-content/uploads/2020/07/Justice-focused-Mental-Health-Supportive-Housing-in-Toronto-Needs-Assessment-and-Action-Plan-2020.pdf).
- <sup>xvi</sup> *Ibid*
- <sup>xvii</sup> Supportive housing generally refers to individuals living independently in the community who may need on-or-off-site supports. Supports include clinical mental health and substance use services (i.e. case management, assertive community treatment, etc.) and social supports (i.e. employment, peer support, and life skills training, etc.).
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- <sup>xx</sup> Government of Ontario. (August 2023). Ontario Providing More Affordable Housing in Little Current. Online: [Ontario Providing More Affordable Housing in Little Current | Ontario Newsroom](https://www.ontario.ca/news/ontario-providing-more-affordable-housing-little-current).



## APPENDIX A

The P-HSJCC regularly engages our members through surveys, consultations, webinars and virtual meetings to determine priorities, which are outlined in our annual reporting webinars. With the support of the P-HSJCC and Secretariat Staff, our Network has been able to markedly increase the scope of our achievements. The P-HSJCC has also been able to respond quickly to emerging province-wide issues, key concerns and needs identified by our Network. We have shared these concerns and proposed solutions in regular submissions to government. Our priorities of focus for **2022-2025** include identifying solutions to systemic issues, issues for specialized populations including Black and Indigenous populations and youth, expansion of crisis response, addressing substance use issues, cross-sector collaboration and cooperation issues, improving member engagement and supporting clients with complex needs.

This year, the P-HSJCC have delivered on these priorities in several ways. The P-HSJCC continued its work with the Ministry of the Solicitor General to support the development and operationalization of Community Reintegration Planning Tables. The P-HSJCC has leveraged its wide-ranging expertise, community and human services partnerships and existing regional and local tables to develop and implement the first four planning tables at Toronto South Detention Centre, Elgin-Middlesex Detention Centre, Thunder Bay Correctional Centre and Jail, and Maplehurst Correctional Centre. These tables are supporting a person-centred, collaborative, multidisciplinary and multisectoral approach to release planning for high-risk and high-needs individuals. These tables were established at these four sites beginning in May 2023. Initial monitoring and assessment results from these first sites indicate that the referral process is working well and individuals who would most benefit from being referred to planning tables are receiving these referrals. The P-HSJCC's network of over 130 Community Reintegration Planning Table members across these sites are coming together to discuss and develop release plans for individuals referred to them, to facilitate referrals to community services, and to share information. Between May and October 2023, these Planning Tables have received a total of 44 referrals. Housing and emergency shelter referrals were the most common types of service referrals, followed by mental health and substance use support services.

The P-HSJCC continues to work with Phase 1 sites to address local challenges, while preparing to set up tables for Phase 2 sites such as Kenora Jail, Vanier Centre for Women, Quinte Detention Centre, Toronto East Detention Centre, Brockville Jail, and Sarnia Jail. The P-HSJCC is proud to work with the ministry and our partners in the policing, corrections and community mental health and substance use sectors to support discharge planning for high-needs and high-risk individuals being released from custody.

In 2023-2024, the P-HSJCC also continued to support the development and preparations for the launch of an environmental scan of Mobile Crisis Response Teams in Ontario. The purpose of the environmental scan is to provide an updated view of all Mobile Crisis Response Teams and Community Crisis Response Teams (both police and community-based models) across the province. We will also seek to identify any potential gaps in crisis response services within geographic areas or communities and work to identify any potential opportunities for future expansion of existing crisis response teams and services. This environmental scan reflects the P-HSJCC's ongoing commitment to identify opportunities for knowledge exchange and dissemination of [Mobile Crisis Response Teams: A Framework for Ontario](#) and the accompanying toolkit *Tools for Developing Mobile Crisis Response Teams in Ontario*, which were endorsed by the Ministry of Health and the Ministry of the Solicitor General and launched in February 2023. In 2023, as part of our efforts to support knowledge exchange related to these resources, the P-HSJCC held a number of webinars for our members, staff from CMHA branches in Ontario and CMHA branches across the country, as well as other stakeholders in the community mental health and addictions and community justice sectors.

In addition to the initiatives included in our 2022-2025 workplan, the P-HSJCC leads several provincial working groups and policy projects that have produced important public policy resources and knowledge exchange products, such as [navigational guides and reports](#), [webinars](#), and [newsletters](#).

The P-HSJCC continues to convene standing committees and a Community of Practice in response to issues that emerged through the COVID-19 pandemic and remain with us today. These include a community of practice which addresses release from custody issues, a standing committee that addresses anti-racism within the human services and justice sectors and a standing committee to improve the engagement of people with lived experience across the HSJCC Network. The committees have provided an opportunity for members to share information, address common issues and generate system solutions to improve client outcomes.

## APPENDIX B

### SPOTLIGHT ON PROVINCIAL PROGRAMS AND SERVICES

Across the province, there are fantastic programs and services that are doing the crucial work of providing mental health and/or substance use care, developmental disability supports and/or housing for justice involved populations.

#### Mental Health, Substance Use and/or Development Disability Care and Supports

##### *Assertive Community Treatment (ACT) – Toronto*

The Canadian Mental Health Association (CMHA) Toronto's Assertive Community Treatment (ACT) Teams provide treatment, rehabilitation and support services to individuals diagnosed with a serious mental illness who have had multiple psychiatric hospitalizations. The teams are multidisciplinary, with each having a social worker, nurses, case managers, a vocational/employment specialist, an occupational therapist, a psychiatrist, a peer support worker, and an addictions specialist.

ACT Teams support individuals in their recovery process, meeting with them in their homes or in the community as frequently as the individual requires.

##### *Peer Support Programs – Waterloo-Wellington*

The Canadian Mental Health Association (CMHA) Waterloo-Wellington offers a variety of drop-in and registered peer support and recovery learning groups to adults living in Waterloo Wellington who identify as living with a mental health and/or substance use issue. There is no intake and no wait list to join drop in groups (some recovery learning groups have a wait). All groups are run by trained peer supporters with lived experience of the group topic. Daytime and evening groups are offered, online and in-person at three Recovery Learning Centres.

#### Housing Programs

##### *Homeless and Housing Help Hub (H4) - Windsor*

Windsor's Homelessness and Housing Help Hub was created in response to the need during the COVID-19 pandemic to rapidly adapt service delivery and prop up new initiatives to better meet the needs of people experiencing homelessness. When physical distancing, masks and hand hygiene became a matter of life or death for some, and uncertain illness for others, many community services were closed or reduced to limited capacity.

Windsor's response was to open the Homelessness and Housing Help Hub, also known as H4, in the former Windsor Water World building at 400 Wyandotte Street East. The site now operates as an enriched service centre and inclusive daytime drop-in – connecting people experiencing homelessness to services, community support agencies, and basic medical care, all while helping provide for their basic needs such as food, restrooms, clothing, and quiet/safe spaces for daytime rest.

##### *Residential Rehabilitation Program – Thunder Bay*

The John Howard Society residence offers interim housing to nine women and 39 men in a rehabilitative treatment facility. These individuals are currently involved or at risk of becoming involved in the criminal justice system.

By providing a safe place to reside, individuals are confident that their basic needs will be met and they can focus on addressing the underlying factors that have put them at risk. The John Howard Society develops care plans for each residential client using evidence-based criminogenic risk assessment tools to ensure that each plan not only addresses problematic behavior, but builds on strengths the client already has, and that will protect them against future criminal involvement.