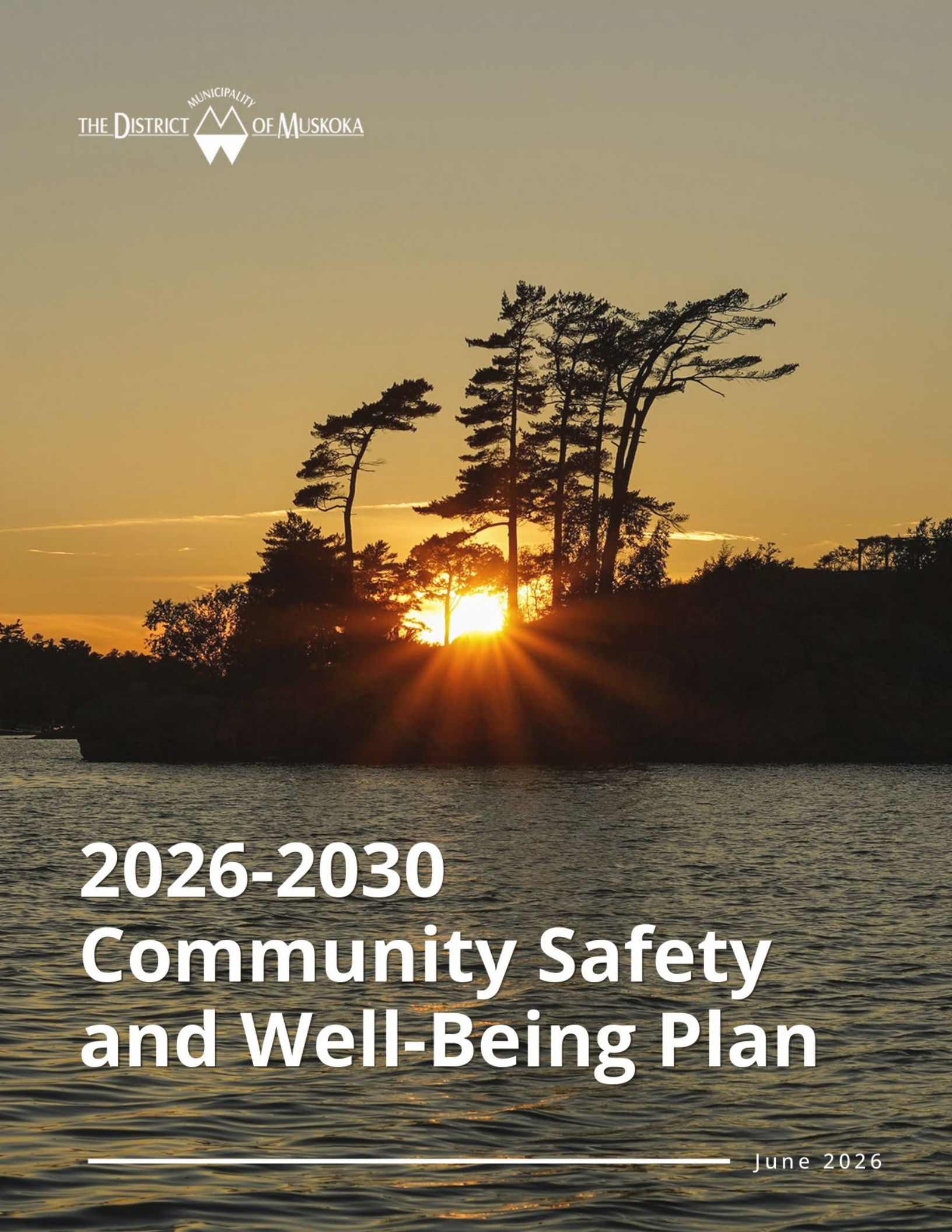
THE DISTRICT MUNICIPALITY OF MUSKOKA



2026-2030 Community Safety and Well-Being Plan

June 2026

The District of Muskoka Community Safety and Well-Being Plan 2026–2030

Prepared for: The District of Muskoka

Prepared by: Avail Consulting Inc.

In collaboration with: The District of Muskoka CSWB Governance Group, the District of Muskoka CSWB Advisory Committee and community partners

Date: June 2026

Table of Contents

Acknowledgements....3
Land acknowledgement....4
Foreword....5
Introduction....6
Plan at a glance....7
Building on experience....9
Understanding our community....10
Engagement and consultation process....12
What we heard and what the data shows....13
How we will move forward....22
Housing / Homelessness Strategy....23
Mental Health and Addiction Strategy....24
Access to Services and Supports Strategy....24
Data Approach Strategy....25
Working together and measuring progress....27
Leadership, coordination and accountability....28
Other important priorities beyond this plan....29
Building on what exists....30
Appendix A: Organizations and voices that helped inform the plan....36
Appendix B: District of Muskoka CSWB Advisory Committee....37
Appendix C: CSWB Framework....38
Appendix D: Helpful terms and abbreviations....39
Appendix E: Survey demographic data....40

Acknowledgements

The District of Muskoka extends a sincere thank you to the many residents, service providers, community organizations, and municipal and system leaders who contributed their time, knowledge, and experience to the Community Safety and Well-Being (CSWB) plan refresh.

This refresh was strengthened by the individuals and organizations who participated in interviews and engagement sessions, reviewed drafts, and helped interpret local information and trends. We also acknowledge the contributions of partner agencies and internal teams who supported coordination, data collection, facilitation, and document development.

A list of organizations and contributors that helped inform this plan is included in Appendix A. While every effort was made to recognize those who contributed, we apologize for any unintentional omissions.

Land acknowledgement

This plan will be developed and carried forward across the District of Muskoka. We recognize First Nations, Métis, Inuit, and Urban Indigenous communities, and the important contributions they make to the well-being of communities across Muskoka. We offer the following land acknowledgement in recognition of the lands and waters where this work will take place.

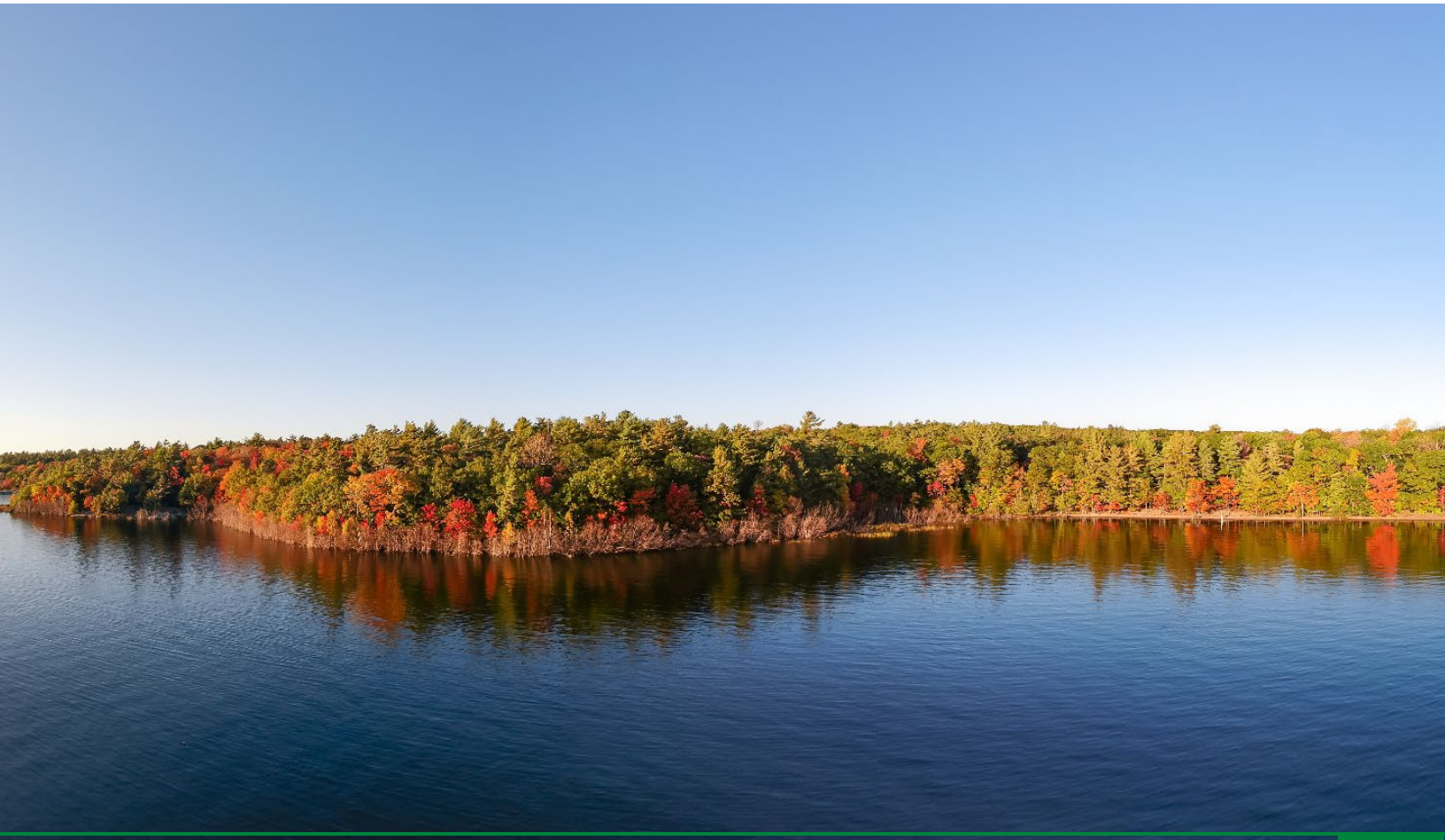
In the spirit of reconciliation, we wish to acknowledge the enduring relationship between Indigenous Peoples and the territories they traditionally occupied.

We recognize and deeply appreciate the historic connection they have to this place –both the land and the water.

We are grateful for the opportunity to meet here, and we thank all the generations of Indigenous Peoples who have taken care of this place and continue to care for it – and we want to show our respect.

Hundreds of years after the first treaties were signed, they remain relevant today. May they guide our decisions and actions.

We commit to learn, to educate, to honour sacred places and to take actions toward Truth and Reconciliation.



Foreword

Muskoka is a place people choose for its natural beauty, close-knit communities, and quality of life. It is also a place where province-wide pressures show up in Muskoka-specific ways, shaped by geography, seasonality, a changing population, and the realities of accessing supports across a large rural area.

This refreshed Community Safety and Well-Being plan reflects a shared commitment to help people stay safe, connected, and supported, before challenges become crises. It builds on the coordination already underway across Muskoka and strengthens how we align efforts across the District and Area Municipalities, partners, community organizations, education, health and social services, and public safety.

Across Muskoka, we hear consistent themes: that every resident should have access to safe, stable housing; timely supports for mental well-being and substance use; and simpler ways to find help when it is needed. These pressures look different from community to community, from our larger service centres to smaller settlements and seasonal areas, but the impacts are shared by residents, families, employers, and front-line teams.

The refresh also strengthens how we track what is happening in our community and how our systems are responding. By combining local information with partner insight, we can make better decisions, focus resources where they matter most, and report progress in a clear and transparent way.

Community safety and well-being is not the responsibility of any one organization. It is built through relationships, shared priorities, and the day-to-day work of people who care about Muskoka.

THE DISTRICT MUNICIPALITY OF MUSKOKA

Julie Stevens, Chief Administrative Officer

Arfona Zwiers, Commissioner of Community and Planning Services

Norm Barrette, Commissioner of Health Services

Tina Kilbourne, Manager, Regional Strategic Initiatives

Introduction

Community safety and well-being (CSWB) planning helps governments and partners use local evidence to guide shared action that strengthens safety and aims to improve equitable outcomes across communities.

Grounded in the provincial framework (social development, prevention, risk intervention, and incident response), community safety and well-being action relies on inter-sectoral collaboration, information sharing, and performance measurement to support coordinated action. It focuses on strengthening the supports, relationships, and community conditions that help Muskoka residents thrive.

Ontario municipalities are required under the Community Safety and Policing Act, 2019 (Part XVI) to have a CSWB plan. Plans are guided by the CSWB Framework, which promotes coordinated action across social development, prevention, risk intervention, and incident response.

Building on Muskoka's first CSWB plan, this refresh reflects progress to date and what we have learned about moving from planning to action. It confirms shared priorities, updates actions, and strengthens the structures needed to support implementation over the life of the plan.

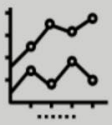
The priorities in this plan do not capture every important effort underway in Muskoka. They reflect a shared commitment to advance a small number of key strategies, selected because they are foundational and can strengthen many related initiatives.

As needs, funding, and services evolve, partners will need to stay agile: building on what is working, adjusting when conditions change, and linking with concurrent initiatives where it helps reduce duplication and increase impact.

The pages that follow outline the priorities and actions partners will advance, including roles, timelines, and points of connection. The plan is meant to be a practical reference to guide collaboration, align work, and support implementation across Muskoka.

Plan at a glance

This plan focuses on four shared priorities that can help strengthen safety and well-being across Muskoka. Together, they reflect a practical, coordinated approach to reducing risk, strengthening protective factors, and helping people connect to the right supports earlier.

Priority	What this priority focuses on
Housing and Homelessness	Strengthening coordinated pathways to housing and stabilization so people can be identified earlier, connected to the right supports, and prevented from experiencing chronic homelessness whenever possible.
Mental Health and Addiction	Strengthening coordinated support for infants, children, youth, and families by improving access to mental health services and responding to substance use concerns that may affect youth directly or impact the well-being of children, youth, and families.
Access to Services and Supports	Helping people connect to the right supports closer to home by reducing barriers, creating trusted places to seek help, and building a stronger network of community support.
Data 	Working collaboratively across CSWB partners to improve how data is identified, accessed, and applied to inform planning, decision-making, and shared learning.

Note: While adult mental health and substance use concerns remain important community issues, this plan's mental health strategy focuses upstream on infant, child and youth well-being, with adult mental health continuing to be a priority for coordinated action beyond the strategies outlined in this plan.

How the plan was informed

This refresh was informed by a mix of local voices, partner input, and document review. Seventeen organizations and more than 25 service providers contributed through interviews, meetings, or participation in a strategy-setting session, in addition to input gathered through collaborative table presentations. A total of 425 residents completed the community survey. Although the survey was promoted widely across Muskoka, it did not ask whether respondents were seasonal or year-round residents; this distinction will be considered in future data collection.

The plan was also shaped by a review of local strategies, reports, and system planning documents to build on existing work and identify areas of alignment.

How the plan will be actioned

This plan will be carried forward through shared leadership, practical coordination, and ongoing partner collaboration. Each strategy identifies a lead organization to help convene partners, advance planning, and track progress over time.

The CSWB Advisory Committee will continue to provide cross-sector advice, identify emerging issues, and support alignment across the plan's priorities. Governance oversight by a small group of senior leadership at the District will remain important to maintaining accountability, supporting decision-making, and helping address issues that require senior-level direction or inter-organizational coordination.

Together, strategy leads, advisory structures, and governance partners can help keep implementation focused, connected, and responsive to changing community needs.

The strategies in this plan are supported by shared implementation, ongoing partner collaboration, and a commitment to adapt as conditions change and new information emerges.

Building on experience

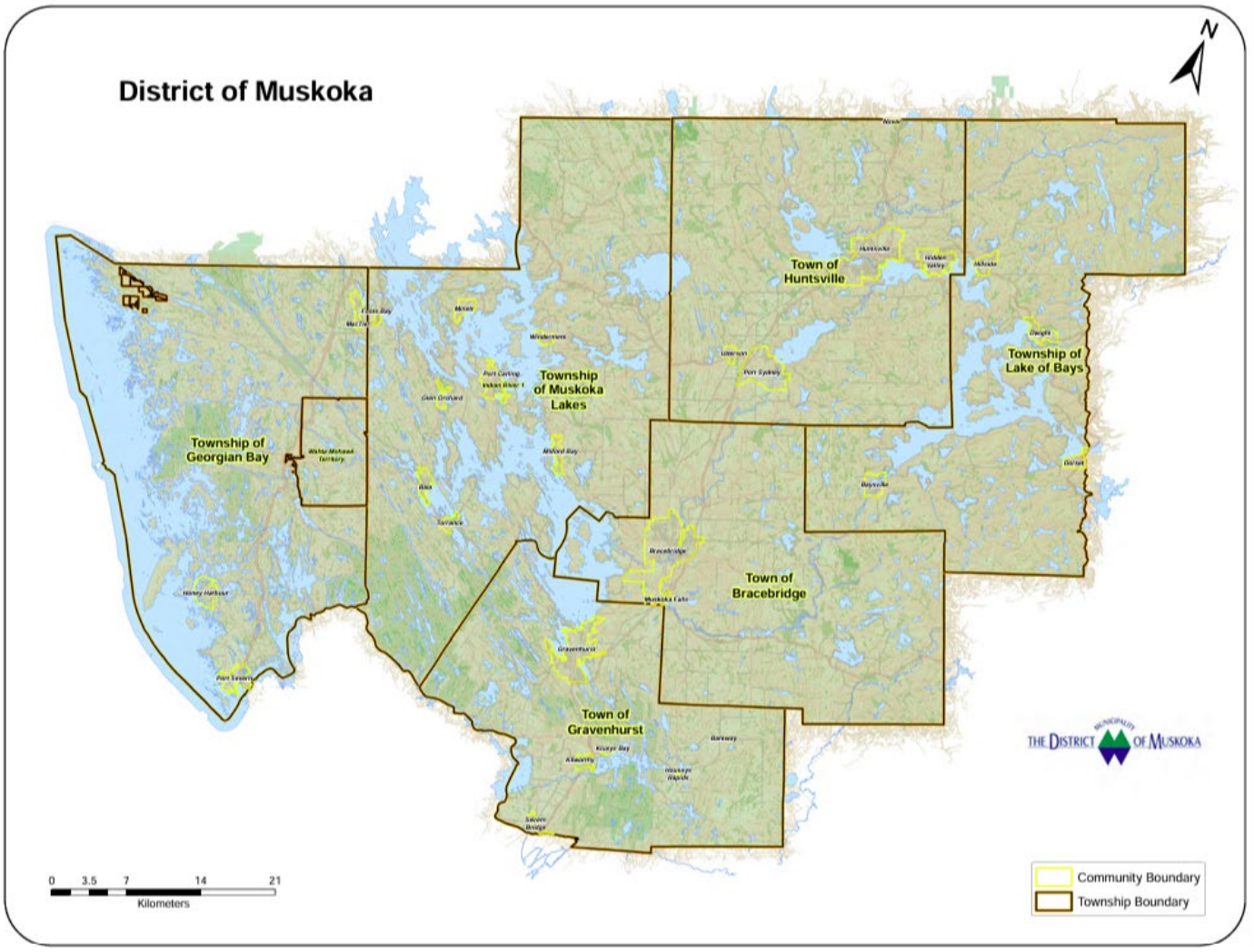
This refresh builds on Muskoka's first CSWB plan and reflects what we have learned about turning shared priorities into real, coordinated action. The insights below draw on local experience, along with practical lessons shared by other CSWB communities, and highlight the conditions that most support implementation.

Clear ownership and structure:	One of the clearest takeaways from Muskoka's first plan is that strong intentions need clear stewardship to translate into sustained action. This refresh puts a stronger emphasis on shared accountability, clarifying who is leading, who is involved, and how decisions will be made when issues arise. Practical tools such as a shared workplan, regular check-ins, and clear points of contact across District services, Area Municipalities, and community partners help keep work coordinated and moving forward.
Information, measurement, and adaptability:	Sustained coordination also depends on a shared understanding of what residents are experiencing and how needs are changing over time. This refresh strengthens the role of both front-line insight and consistent data to show demand, service use, and outcomes. When information is shared in practical, regular ways, it supports earlier, more coordinated responses and helps partners track progress, including outcomes that can be harder to see in the short term (such as the impact and outcomes of prevention or crises avoided). In Muskoka, geography and seasonality can affect access and capacity, so the plan is designed to be adaptable: connecting with related initiatives where it adds value and adjusting approaches as needs and opportunities evolve.

Understanding our community

The place we call home, and the context for this plan

Muskoka is a large, rural region in Central Ontario, shaped by its natural environment, seasonal economy, and a population that shifts throughout the year. Spanning 4,774 square kilometres and home to more than 640 lakes and extensive wetlands, Muskoka includes six Area Municipalities and two Indigenous communities.[1] This geography matters for CSWB planning because it influences how easily people can reach supports, how partners coordinate, and where service gaps may emerge.



[1] The District Municipality of Muskoka. 2025 Fast Facts. 2025.(pdf)

Muskoka's year-round population is 66,674, alongside a significant seasonal population. Second homes account for about 47% of all households, contributing to an estimated second-home population of 84,400. Looking ahead, the District's Growth Strategy Update projects the year-round population could reach about 99,100 by 2051, with growth expected to be concentrated in Huntsville, Bracebridge, and Gravenhurst. The seasonal population in the same time period is expected to experience slow growth primarily as seasonal residents convert cottages to permanent residences. [2] For CSWB partners, this underscores the need for service models that can flex with seasonal demand and adapt as communities grow.

Muskoka's population is also aging. In 2021, 47% of residents were age 55+, and projections suggest this could reach 55% by 2051. The local economy reflects Muskoka's seasonal nature with 51% of the workforce employed part-year or part-time in 2021, and median employment income 15.8% lower than the Province of Ontario. Cost-of-living pressures can affect many households—even those who are working. For example, 48% of residents aged 15+ earned under $29,999 in employment income in 2020.[3] Together, these factors can make it harder for some people to stay stably housed, get to appointments, or access timely support, reinforcing the value of CSWB planning that reduces barriers and helps people connect to the right help earlier.

[2] Watson & Associates Economists Ltd., *District of Muskoka Growth Strategy Final Report* (prepared for the District Municipality of Muskoka, 2024).

[3] Statistics Canada, *2021 Census of Population Census Profile, District Municipality of Muskoka, Ontario*, Census Profile, 2021 Census of Population (Ottawa: Statistics Canada, 2022)

Engagement and consultation process

The Muskoka CSWB plan refresh was informed by a mix of community input, partner consultation, local data, and a review of the existing plans and reports. This approach helped ground the refreshed plan in local experience, align it with work already underway, and focus it on priorities where coordinated action could make a meaningful difference.

425
resident surveys completed

25+
providers from
17
organizations contributed through interviews, meetings, and advisory sessions

In total, the refresh was informed by input from more than 25 service providers from 17 organizations, 425 resident survey responses, and local data and related planning documents.

The process included:

Reviewing local information and existing work

Relevant strategies, reports, system reviews, data sources, and planning documents were reviewed to understand current pressures, emerging trends, and opportunities for alignment across Muskoka.

Gathering resident input

A community survey[4] was used to hear directly from residents about the issues they felt were affecting safety and well-being in Muskoka. Survey findings helped identify shared concerns, access barriers, and community priorities. Surveys were promoted through an organic email campaign, social media posts, paid social media ads, and paid radio ads on local stations.

Engaging service providers and community partners

Interviews, meetings, and advisory conversations were held with organizations and providers working across housing, health, mental health and substance use, income support, education, justice, navigation, social and community services. These conversations helped identify system pressures, gaps, strengths, and practical opportunities for coordinated action.

Testing and refining priorities

Input from residents, partners, and local data was reviewed together to identify priority areas for the refreshed plan. Partners helped confirm where CSWB planning could add value, build on existing initiatives, and support more coordinated implementation.

Developing strategies and implementation approaches

Strategy leads, partners, proposed actions, and exploratory measures were developed based on what was heard and learned. The focus was on practical actions that can support early connection to help, strengthen coordination, and allow partners to learn and adapt over time.

Reviewing and refining the draft plan

Draft content was reviewed and refined with input from District staff and partners to ensure the plan was clear, realistic, locally relevant, and aligned with Muskoka's CSWB responsibilities and implementation capacity.

[4] District of Muskoka, Muskoka CSWB Resident Survey (February -March 2026)

What we heard and what the data shows

The following snapshot summarizes key evidence that informed the three areas of risk and the data opportunity this plan will focus on.

Housing and Homelessness

Housing affordability and homelessness was the top well-being concern identified by survey respondents

Housing affordability and homelessness emerged as the most consistently identified risk in the resident survey and across partner discussions. Residents described the impacts of homelessness and housing instability across the community, including in public spaces.

The resident survey identified housing affordability and homelessness as the top factor impacting well-being (75% of respondents). Respondents also identified mental health and/or addiction (61%), income instability/food insecurity (59%), and access to health, social, or community services (53%), reflecting how closely these risks overlap.

Some survey respondents described direct housing strain (e.g., difficulty paying rent/mortgage or finding affordable housing), and many reported challenges paying for basic needs such as food, utilities, and transportation.

Other survey responses highlighted perceptions of personal safety when visible homelessness is present in public spaces. These findings are interpreted with care, recognizing homelessness as a housing and well-being issue and avoiding assumptions that people experiencing homelessness are themselves a source of risk.

From a service perspective, suggested responses to homelessness included shelter access and outreach supports, timely service connections, and community education.

This matters for CSWB because housing instability has significant well-being impacts on individuals, can increase pressure on health and emergency systems, shape safety perceptions, and strain community cohesion.

What the housing data tells us

Local housing data provides additional context. These indicators point to continued housing affordability pressures, including 10% of Muskoka households and 28% of renter households living in core housing need. This means their housing is unaffordable, overcrowded, or in need of major repairs, and they cannot afford suitable alternative housing in their community. [5]

While core housing need and homelessness measure different aspects of housing insecurity, together they help illustrate the range of housing challenges experienced by some residents across Muskoka. The November 2024 Point-in-Time (PiT) Count[6] identified 234 people experiencing homelessness in Muskoka.

Partner consultations reinforced the need for practical, housing-focused approaches alongside supports that address health and safety needs. Partners also noted that high rents and limited housing availability can make it harder to secure and sustain housing especially when other support needs are also present.

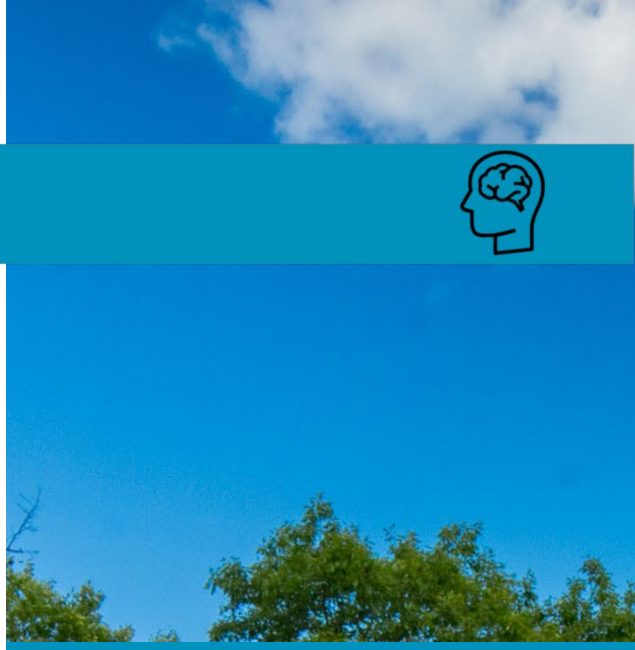
What this means for CSWB:

Housing stability is a foundation for safety and well-being. While affordability and housing availability are major pressures in Muskoka, CSWB planning can help partners strengthen coordinated pathways, outreach, navigation, prevention, and stabilization supports so people can find help earlier and reduce the likelihood that housing insecurity leads to crisis or emergency response.

[5] Core housing need is defined by Statistics Canada as the condition in which a private household's dwelling falls below at least one of three National Occupancy Standard (NOS) thresholds — adequacy (dwelling is not in need of major repair), suitability (dwelling has enough bedrooms for the size and composition of the household), or affordability (shelter costs do not exceed 30% of before-tax household income), and the household would need to spend 30% or more of its before-tax income to access acceptable local housing that meets all three standards. (*Statistics Canada, Census of Population, 2021.*)

[6] A Point-in-Time (PiT) Count is a coordinated community effort to estimate the number of people experiencing homelessness in a community on a single night (the “enumeration”) and includes a survey that is administered directly to individuals experiencing homelessness.

Mental Health and Addiction



Residents and partners described mental health and substance use as significant concerns in Muskoka, with access barriers that can make it harder for people to get help early. While these pressures affect residents of all ages, partners identified infant, child, and youth mental health as an important upstream opportunity to strengthen protective factors earlier, support families sooner, and reduce the likelihood that needs escalate over time.

What the broader data shows

- Mental health and/or addiction was selected by 61% of respondents as impacting well-being.
- Residents identified barriers to timely access such as not knowing where to start, long waits, limited awareness of services, service costs (if applicable), transportation, and stigma.
- Open-ended feedback highlighted gaps in crisis and after-hours supports, youth/teen mental health supports, specialized care (including psychiatry), and continuity/coordination.

Public health indicators provide additional context on substance-use-related harms and system impact, including alcohol-attributable hospitalizations and fluctuations in opioid poisoning emergency department visits. These indicators do not replace lived experience, but they help illustrate why prevention, timely access, and coordinated response matter.

Partners identified infant, child, and youth mental health as a key upstream opportunity to strengthen protective factors early and reduce the likelihood that needs escalate over time.

Why this plan focuses upstream

A Muskoka system review[7] for children and youth with complex mental health needs helps explain the upstream focus of the proposed strategy. The review describes a fragmented service system, multiple waitlists, limited local publicly funded capacity, and gaps in consistent case management, coordination, and transition planning. It also highlights barriers tied to geography and transportation, and inequities where families who can afford private assessments and services may access help sooner.

Partner input also pointed to rising post-COVID demand and complexity, including for transitional-aged youth (roughly ages 16–25), and identified gaps such as bed-based withdrawal management, harm reduction capacity, and alternate "step-down" options that can prevent Emergency Department use as the default pathway.

What this means for CSWB:

CSWB planning is especially well suited to prevention and early support. By focusing upstream on infant, child, and youth mental health, partners can strengthen protective factors earlier in life, improve navigation and coordination for families, and reduce the likelihood that needs escalate into repeated crisis, emergency department use, or police and emergency response.

[7] A point-in-time review of Muskoka's child and youth mental health service system, highlighting barriers, gaps, and opportunities to strengthen access and coordination for children, youth, and families with complex mental health needs.

Access to Services and Supports (including navigation)

A combined majority of resident survey respondents said they did not know, or were unsure, where to go for help with housing, mental health/addictions, or basic needs.

Across the resident survey and partner feedback, navigation and access emerged as a cross-cutting risk: it can be hard to know where to start, systems can feel fragmented, and practical barriers can delay support until needs become more serious. This affects various areas of risk including housing, mental health and addictions, and basic needs.

What the survey responses told us

- Access to health, social, or community services was selected by 53% of respondents as impacting well-being.
- Only a minority of respondents indicated they would confidently know where to go for help with housing, mental health/addictions, or basic needs; a combined majority reported not knowing or being unsure.
- Residents described relying on informal routes (online searches and social media) rather than formal navigation supports; awareness and use of 211 was very low.

Survey findings also suggest that people often turn to municipal websites, search engines, and word of mouth to find information, highlighting the importance of clear, consistent service information across communities and channels.

The child and youth system review reinforces these themes, describing siloed pathways, inconsistent coordination, and barriers related to geography, transportation, and connectivity - issues that can also shape adult pathways across Muskoka.

Partners emphasized that navigation often happens through “open door” triage and warm hand-offs between programs. While that approach can work for some residents, it can create inequities for people without strong networks, transportation, or the ability to persist through multiple steps to reach support.

Note: While surveys are useful in gauging resident feedback, we recognize that survey responses do not represent the entire resident population and often vulnerable population are underrepresented in the results. Various forms of ongoing engagement are needed to better understand resident needs.

What this means for CSWB:

Improving access is not only about adding services, but also about making it easier to find help, reducing practical barriers, and strengthening coordination so people do not have to repeat their story or “fall through the cracks.” CSWB planning supports shared pathways, clearer entry points, and stronger cross-sector collaboration so residents can connect to the right support earlier.

If you or someone you know
needs help accessing services or supports

Call 211

or text 211
or online at 211ontario.ca

A Stronger Data Approach

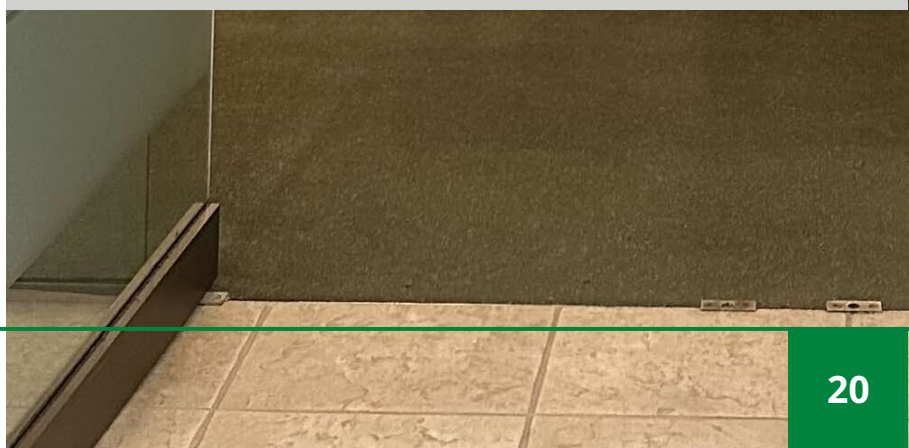
Residents and partners raised a consistent message: clear, shared data can help the community notice what is changing, identify system pressures, and inform prevention-focused planning over time.

Partners emphasized the need for a consistent approach to CSWB data across municipalities and systems, including shared indicators, common definitions, and a regular rhythm for reviewing information that supports planning.

In this context, data is best understood as a set of system signals or indicators, not as a precise measure of cause and effect. Community conditions are shaped by many overlapping factors, and changes in outcomes are rarely attributable to a single action or variable.

Data quality, consistency, and availability may also vary across partners and systems. Used thoughtfully, shared data can help identify patterns, emerging risks, opportunities for early intervention, and areas requiring closer attention.

Partners emphasized the need for shared indicators, common definitions, and a regular rhythm for reviewing data across municipalities and systems to identify emerging risks, opportunities, and shifts in community need.



What we heard from partners

- Partners noted the value of agreeing on key CSWB data points and establishing a predictable "rhythm" for data requests and reporting, including to support planning and potential grant applications.
- Children's services partners emphasized the need for shared dashboards and common data to strengthen a more unified view of child and youth mental health demand, access, and emerging patterns, reducing fragmentation risk in planning.
- Public health reporting can support CSWB planning by providing consistent indicators and trend information related to community well-being and system pressures.
- District service reporting (such as Ontario Works caseload trends and "no fixed address" trends) can provide additional system-level signals related to income instability and housing risk.

What this means for CSWB:

A stronger data approach helps Muskoka move from reacting to individual crises toward planning and prevention. By starting with a small set of shared indicators tied to this plan's priorities and building a repeatable way to review and interpret them, partners can strengthen shared understanding, identify emerging issues earlier, and support more informed, coordinated decision-making over time. These indicators are intended to act as signals that prompt discussion, learning, and response, not as definitive proof of cause and effect.

How we will move forward

Housing / Homelessness Strategy

‘Pathways to Housing and Stabilization’

Housing affordability pressures and complex needs are increasing the risk of homelessness in Muskoka, which can lead to more people in unsafe and unstable situations and increasing demand for emergency services and other community supports. This strategy explores ways to support a more coordinated and data-informed homelessness response, with an emphasis on earlier connection to housing pathways and life-stabilization supports.

Exploratory Measures

- Progress in exploring options to strengthen shared data and coordinated homelessness response.
- Identification of service gaps, system opportunities, and implementation considerations related to Coordinated Access, stabilization supports, and outreach.
- Partner engagement and planning activity related to potential system improvements.

Goal

Homelessness in Muskoka is reduced, and when it occurs, it is prevented from becoming chronic through earlier identification and coordinated connections to housing and life-stabilization supports.

Objective:

Improve how people experiencing homelessness are identified, connected to the right housing options, and supported with the services they need to achieve stable housing.

Action:

Work with community partners to explore several areas of interest that could support a more coordinated, data-informed homelessness response, including:

- Examine the feasibility of a Homelessness Management Information System (HMIS) to support shared by-name data.
- Assess options to support growth in the Muskoka Coordinated Access System (MCAS): Homelessness resources / inventory.
- Identify opportunities for transitional stabilization capacity for people with higher-complexity needs.
- Examine ways to strengthen outreach and timely connection for people experiencing unsheltered homelessness.

Lead Agency

The District

Partners

- MCAS: Homelessness partner organizations
- Rent supplement partners
- Landlords
- Private sector
- Outreach teams

Mental Health and Addiction Strategy

‘Muskoka Infant, Child & Youth Integrated Well-Being’

Infants, children, and youth in Muskoka thrive when they feel safe, supported, and connected at home, at school, and in the community. Barriers such as service cost (if applicable), transportation, and stigma can make it harder for families to access help early, especially when needs are complex. This strategy strengthens shared planning across the organizations that serve infants, children, and youth, with an initial focus on improving access to mental health services and responding to substance use concerns that may affect youth directly or impact the well-being of children and families. By strengthening coordination across the system, the strategy aims to connect children, youth, and families to the right supports sooner. It also creates an opportunity to align with and build on the work of the Child and Youth Mental Health Systems Review and the Infant and Early Mental Health Pathway (IEMHP) in Muskoka as part of a more coordinated approach to well-being.

Exploratory Measures

- Participating organizations and sectors represented in cross-sector planning.
- Progress in establishing shared planning, governance, or readiness activities related to infant, child, and youth well-being initiatives.
- Shared measurement or common approaches identified to support coordinated planning and service.

Goal

Infants, children and youth in Muskoka experience improved well-being and belonging, with earlier, equitable access to coordinated support that responds to mental health and substance use concerns affecting youth and families before needs escalate.

Objective

Strengthen coordinated support for infants, children, youth, and families by improving access to mental health services and responding to substance use concerns that may affect youth directly or impact the well-being of children, youth, and families.

Action

- Convene a Muskoka Infant, Child and Youth Governance and Planning Table to align cross-sector supports, strengthening mental health and addiction and other areas of risk, while reducing stigma and building belonging so families can access the right help sooner.
- Continue planning for a mobile Youth Hub in Muskoka, in partnership with Canadian Mental Health Association (CMHA) Muskoka Parry Sound, as partners work toward readiness for more integrated youth services and related Youth Wellness Hubs Ontario governance requirements.

Lead Agencies

- The District / Simcoe Muskoka Family Connexions / Mind-Aid

Partners

- Early years, education and family services
- Health, public health, mental health /addiction services
- Child welfare & youth justice
- Housing, income, and social services
- Indigenous, newcomer, and culturally specific organizations

Access to Services and Supports Strategy

‘Pathways to Support and Connection’

Demand for services and supports is increasing across Muskoka, and many providers are working at or beyond capacity. As needs grow, residents experiencing income-related pressures may find it harder to access timely help, with stigma and community perceptions further affecting how easily support can be reached. This strategy is intended to support local capacity and improve access to supports in everyday settings, while also encouraging community-wide efforts that can help reduce stigma and promote dignity. Strengthening access through trusted community settings and cross-sector partnerships may help create more timely, respectful pathways to support, while also building the relationships, trust, and sense of connection that help people know where to turn.

Exploratory Measures

- Number and type of community-based access points or partner-hosted locations explored or supported to help create warm, low-barrier pathways to services.
- Progress in exploring or supporting shared resourcing and other capacity-building approaches with service providers.
- Number and type of community conversations, awareness activities, or partner-led efforts intended to reduce stigma and improve understanding of available supports and pathways to help.

Goal

People in Muskoka can find and access the help they need close to home, in ways that feel welcoming, respectful, and connected to their community.

Objective

Help people connect to the right supports closer to home by reducing barriers, creating trusted places to seek help, and building a stronger network of community support.

Action

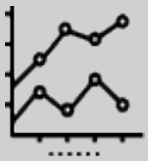
Work with community partners to explore and support opportunities that strengthen low-barrier, community-based and trusted pathways to help. This may include exploring community-based providers as hosts for satellite access points that support warm connections to services, navigation supports, and community information resources such as 211; considering shared resourcing approaches that help stretch provider capacity; and supporting or partnering in community conversations led by other organizations to reduce stigma and improve awareness of available supports and ways to access them.

Lead Agency

The District

Partners

- Cross-sector providers supporting residents experiencing poverty
- Community-based access points for those accessing emergency or urgent basic needs



Data Approach Strategy

‘CSWB Shared Data & Insight’

CSWB planning works best when partners have a shared understanding of community needs, emerging trends, and system pressures. Right now, data is often collected in different ways across organizations, which can make it harder to see patterns, identify gaps, and respond early to changing conditions. This strategy is intended to support a more consistent and responsible approach to using shared information over time, with ongoing collaboration with partner organizations to help identify common signals and indicators that can inform planning and better align supports with community needs. It recognizes that community conditions are shaped by many variables, and that data fidelity, consistency, and availability may differ across systems. For that reason, shared data is intended to support learning, pattern recognition, and informed decision-making rather than to prove direct cause and effect.

Exploratory Measures

- Progress in understanding available data, provide input related to system signals, and identification of existing information gaps.
- Engagement with partner organizations on shared data priorities, indicators, and opportunities for use of shared data.
- Learning and capacity-building related to responsible data use, and cross-sector understanding of trends and pressures.

Goal:

A stronger shared understanding of community needs to support more coordinated planning over time.

Objective:

Work collaboratively across CSWB partners to improve how data is identified, accessed, and applied to inform planning, decision-making, and shared learning.

Action

Explore the establishment of a CSWB Data Group, in collaboration with partner organizations, to support data sharing discussions, identify common indicators and system signals related to community safety and well-being, and inform regular, privacy-responsible review and interpretation of information that may help identify emerging needs, pressures, and planning considerations over time.

NOTE: the work undertaken by the CSWB Data Group is intended to complement the data collected and reviewed through each individual strategy. Its purpose is to strengthen shared learning and a broader understanding of community conditions, not to attribute change to any single action or variable.

Lead Agency

The District

Partners

- Cross-sector CSWB partners (The District, Simcoe Muskoka District Health Unit, Community Connection/211, police, school boards, allied health, social and community services as appropriate).

Working together and measuring progress

This plan will be carried forward through shared leadership, practical coordination, and ongoing learning. Each strategy identifies lead organizations and partners that will help move the work forward, connect related efforts, and bring implementation updates back through Muskoka's CSWB structures. This approach recognizes that community safety and well-being is shared work across the District, Area Municipalities, community providers and partners.

Implementation will be phased so partners can build from what already exists, test practical approaches, learn from early experience, and adapt as needs change. In the first year, strategy leads and partners will focus on moving early actions forward, clarifying how work will be coordinated, and exploring practical measures that can help show progress over time.

Progress measurement will be developmental and realistic. Some outcomes may take time to become visible and may be shaped by many factors. For this reason, the plan proposes exploratory measures, system signals, partner insight, and community experience to support shared learning and accountability without overstating cause and effect.

Key points for implementation and progress measurement:
The following points summarize how partners will move the plan forward, build on existing work, and review progress over time:

- Support strategy leads and partners to move early actions forward.
- Build on existing Muskoka tables, initiatives, and service pathways wherever possible.
- Coordinate implementation in ways that are practical and responsive to local conditions.
- Use exploratory measures and system signals to understand progress, pressures, and emerging needs.
- Review progress regularly through the CSWB Advisory Committee and governance structures to keep partners aligned and accountable.

During early implementation, partners will be encouraged to establish a manageable rhythm for coordination and reporting. Over time, this will help Muskoka strengthen implementation, stay responsive to changing community needs, and keep the plan grounded in local evidence and partner experience.

Leadership, coordination and accountability

Muskoka's CSWB plan will move forward through District leadership, shared partner contribution, and practical coordination. Strategy leads, partner organizations, the CSWB Advisory Committee, and governance structures will work together to keep implementation focused, connected, and responsive to community needs across Muskoka.

Strategy Leads

Each strategy identifies a lead organization to help guide the work with the partners named in the strategy. Strategy leads help bring partners together, support coordination, and keep early implementation on track while supporting learning and exploratory measures.

Strategy leads may support work planning, information sharing, and updates on progress, barriers, and emerging opportunities. They are not expected to carry the work alone. Implementation depends on the contributions of various partners identified in each strategy.

The District of Muskoka CSWB Advisory Committee

The District of Muskoka CSWB Advisory Committee will continue to support collaboration and shared learning. The Committee brings together local knowledge and cross-sector expertise to help partners stay connected, identify emerging issues, and support alignment across the plan's priorities.

A regular meeting rhythm will help maintain momentum and provide a space to share updates, discuss challenges, and reflect on data, system signals, and community experience. This will help the plan adapt as needs and opportunities change.

The District of Muskoka Governance Group

Governance oversight by the District of Muskoka CSWB Governance Group will support accountability, direction, and decision-making when broader coordination or senior-level guidance is needed. This includes monitoring overall progress, considering issues that affect more than one strategy or organization, and maintaining alignment with provincial CSWB expectations.

The Governance Group will also connect implementation partners with District Council. While many organizations contribute to the work, the District remains responsible for meeting municipal CSWB planning requirements, including any provincial reporting or updates. This shared approach supports transparency, accountability, and continued alignment as the plan moves into action.

Other important priorities beyond this plan

Engagement with residents, partners, and service providers surfaced many important ideas and concerns. This plan focuses on four shared priorities where there is a strong opportunity to strengthen protective factors, support coordinated action and make meaningful progress over this planning period. That means not every issue raised through engagement is reflected as a dedicated strategy in this version of the plan.

Some related work is already underway through other initiatives, some areas will require additional time, partner readiness, or resources, and others may help shape future planning and coordinated action. They are acknowledged here so they remain visible as this work moves forward.

Equity, diversity, and inclusion will remain essential to how this work is carried forward. A broad range of voices, perspectives, and lived experiences will continue to be important to understanding risk, identifying barriers, and shaping responses that are relevant across Muskoka's communities.

Intimate partner violence also remains an important issue for community safety and well-being in Muskoka. While this plan does not include a dedicated inter-sectoral strategy on intimate partner violence at this time, this should not be understood as a reflection of its significance. Rather, it signals the need for continued attention, stronger alignment across partners, and future opportunities to strengthen prevention, access, coordination, and support for people at risk of intimate partner violence and people who have experienced violence.

The plan also recognizes demographic shifts that may shape community needs in the coming years, including an aging population and more people who are new to Muskoka or represent equity-deserving populations. These changes may affect service demand, access needs, and how people connect with supports and community life. While the plan does not include a dedicated strategy focused on these populations, these considerations remain important and may help inform future planning, service design, and coordinated action over time.

Building on what exists

The plans, strategies, and initiatives that follow are aligned with the areas of risk identified through this CSWB plan refresh. They show where related work is already underway across Muskoka and where there may be opportunities to connect efforts, reduce duplication, and strengthen shared action over time. This section is not intended to capture every plan or initiative in the community, but to highlight key areas of alignment that can support implementation of the CSWB priorities.

Housing and Homelessness

District of Muskoka – Big Move on Housing	**District of Muskoka - 10-Year Housing and Homelessness Plan ("Housing for Everyone")**	**November 2024 Homelessness Enumeration / Point-in-Time (PiT) Count**
Lead: The District	**Lead:** The District	**Lead:** The District
An eight-year plan to help create more housing across Muskoka.	Identifies barriers in the housing system and guides action to improve access to safe, stable housing and the supports people need, in alignment with provincial and federal priorities. ***Updated Plan being released in 2026***	Provides locally grounded data on homelessness that supports evidence-informed, coordinated, and preventative actions to strengthen community safety and well-being.

Also aligned: Municipal Community Improvement Plans, Muskoka Affordable Housing Initiatives Program (MAHIP), Muskoka Housing Task Force (MHTF), Muskoka Homelessness Sharing Table

Mental Health and Addiction

Child and Youth Mental Health Systems Review	School Climate Surveys
Co-Leads: The District, Simcoe Muskoka Family Connexions	**Lead:** Trillium Lakelands District School Board (TLDSB), Near North District School Board (NNDSB). Simcoe Muskoka Catholic District School Board (SMCDSB)
This report is a point-in-time review of the child and youth mental health service system in the District of Muskoka, identifying current services, barriers, gaps, and opportunities to improve access and coordination for children and youth with complex mental health needs and their families.	School climate surveys are standardized tools administered by Ontario school boards to collect anonymous feedback from students, staff, and parents on their perceptions of school safety, belonging, bullying, equity and inclusion, and mental health and well-being, with results used to guide board and school-level planning and create safe, supportive learning environments.

Also Aligned: The Simcoe Muskoka Drug Strategy (SMDS) [8]

[8] The Simcoe Muskoka Drug Strategy (SMDS), evolved from the earlier Simcoe Muskoka Opioid Strategy, is a large partnership of agencies, organizations and individuals committed to working together to address the harms associated with the current drug toxicity crisis being experienced throughout the region.

Access to Services and Supports (including navigation)

District of Muskoka Community Transportation Plan (CTP)

Lead: The District

The CTP was developed with the goal of creating accessible, affordable, sustainable transportation solutions for both urban and rural residents, including east-west service within Muskoka.

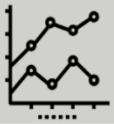
The District of Muskoka Multi-Year Accessibility Plan (MYAP) 2026-2029

Lead: The District

The plan guides how the District identifies, removes, and prevents barriers to accessibility across its programs, services, and facilities, in compliance with the Accessibility for Ontarians with Disabilities Act (AODA).

Also Aligned: District of Muskoka Community Paramedicine Program, Health Link

A Stronger Data Approach



The District of Muskoka: Data Consortium

Lead: The District

The District of Muskoka is part of a national network of municipalities and community organizations that share access to reliable social, economic and demographic data to better understand local trends and support informed planning and decision-making.

Health Stats Home

Lead: Simcoe Muskoka District Health Unit (SMDHU)

A data portal that provides information and data about health and health behaviours of the Simcoe Muskoka population, including chronic and infectious diseases, mental health, environmental issues, and more.

Also Aligned: District of Muskoka GeoHub

Appendices

Appendix A: Organizations and voices that helped inform the plan

Canadian Mental Health Association (CMHA) Muskoka Parry Sound

Community Connections (211)

Community Living Huntsville

District of Muskoka: Regional Strategic Initiatives, Housing and Homelessness, Ontario Works, Paramedic Services, Health Links, Communications, Children's Services

Simcoe Muskoka Family Connexions

Homelessness Sharing Table (collaborative)

IDEA Advisory Group (collaborative)

Manna Food Bank

MindAid

Muskoka Algonquin Health Care (MAHC)

Muskoka Women's Advocacy Group (MWAG) Interval House

Ontario Provincial Police (Bracebridge Detachment and Detachment Board Chair)

Ontario Provincial Police (Huntsville Detachment and Detachment Board Chair)

Simcoe Muskoka Catholic District School Board (SMCDSB)

Simcoe Muskoka District Health Unit (SMDHU)

Trillium Lakelands District School Board (TLDSB)

YWCA Muskoka

Appendix B: District of Muskoka CSWB Advisory Committee

Canadian Mental Health Association (CMHA) Muskoka Parry Sound

District of Muskoka: Regional Strategic Initiatives, Housing and Homelessness, Ontario Works, Paramedic Services, Children's Services

Simcoe Muskoka Family Connexions

MindAid

Muskoka Algonquin Health Care (MAHC)

Ontario Provincial Police (Bracebridge Detachment and Detachment Board Chair)

Ontario Provincial Police (Huntsville Detachment and Detachment Board Chair)

Simcoe Muskoka Catholic District School Board (SMCDSB)

Simcoe Muskoka District Health Unit (SMDHU)

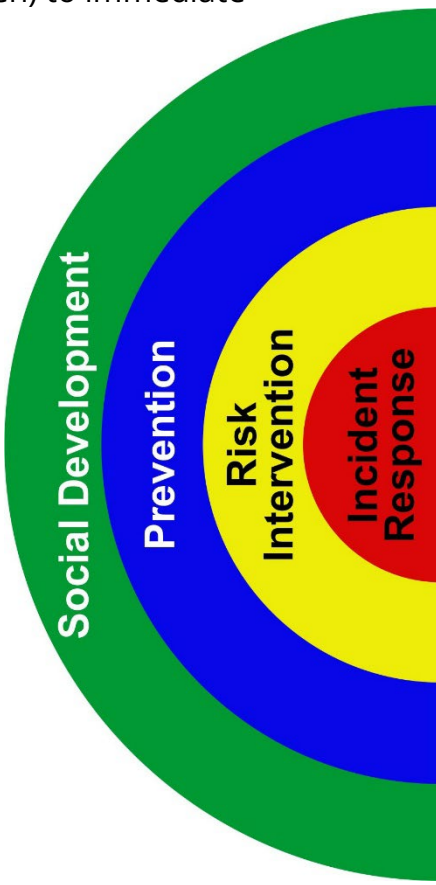
Trillium Lakelands District School Board (TLDSB)

YWCA Muskoka

Appendix C: CSWB Framework

The Community Safety and Well-Being (CSWB) Framework is a way for communities across Ontario to work together to make life better and safer for everyone. It helps us to look at the big picture, understand what people need to live well, and focus on preventing problems before they become emergencies.

The Province of Ontario created a model to guide how communities do this work. It resembles a bullseye with four layers, or "areas of focus." Each layer shows a different way we can support people in our community, from long-term planning (green) to immediate help in a crisis (red).



The Four Areas of Focus

Social Development
Improving housing, education, mental health, and employment over time creates stronger communities and reduces future risks.

Prevention
Early action through programs and outreach helps address issues before they become serious.

Risk Intervention
Coordinated support is provided to individuals or families showing signs of serious challenges to prevent crises.

Incident Response
Emergency services address urgent situations, with a long-term goal of reducing the need for crisis intervention.

How We Work Together

Collaboration
Bringing together partners from various sectors and services to work towards more effective and coordinated solutions.

Information Sharing
Sharing de-identified data helps partners understand emerging needs and risks, leading to better-informed and unified responses.

Performance Measurement
Tracking results shows what is working and where.

Appendix D: Helpful terms and abbreviations

CSWB (Community Safety and Well-Being): A collaborative approach that brings organizations together to improve the social conditions, supports, and responses that help people stay safe and well.

Coordinated Access: A process used in homelessness systems to help identify, assess, prioritize, and connect people to housing and support options in a more consistent and coordinated way.

Core housing need: A measure used to describe households whose housing is unaffordable, unsuitable, or inadequate, and who cannot afford alternative housing in their community.

Chronic homelessness: Long-term or repeated homelessness over time, often involving ongoing barriers related to housing stability, health, income, or support needs.

HMIS (Homelessness Management Information System): A shared information system used to support service coordination, data collection, and reporting in homelessness response systems.

MCAS (Muskoka Coordinated Access System): The local system used to support coordinated pathways to housing and homelessness-related services in Muskoka.

PiT Count (Point-in-Time Count): A coordinated effort to estimate the number of people experiencing homelessness in a community on a single night, usually paired with a survey.

Low-barrier access: An approach to services that reduces practical or procedural obstacles, such as location, stigma, cost, or complexity, so people can get help more easily.

Warm hand-off / warm connection: A supportive referral approach where one provider helps directly connect a person to another service or support, rather than expecting them to navigate the next step alone.

Trusted pathways: The people, places, relationships, and community settings that help residents feel comfortable seeking help and knowing where to turn.

System signals: Shared data points or indicators that help partners notice patterns, pressures, or emerging issues in the community, without assuming that one action directly caused a change.

Protective factors: Conditions or supports that help reduce risk and improve well-being, such as stable housing, supportive relationships, early intervention, and access to services.

SMDHU (Simcoe Muskoka District Health Unit): The local public health unit serving Simcoe Muskoka, including Muskoka.

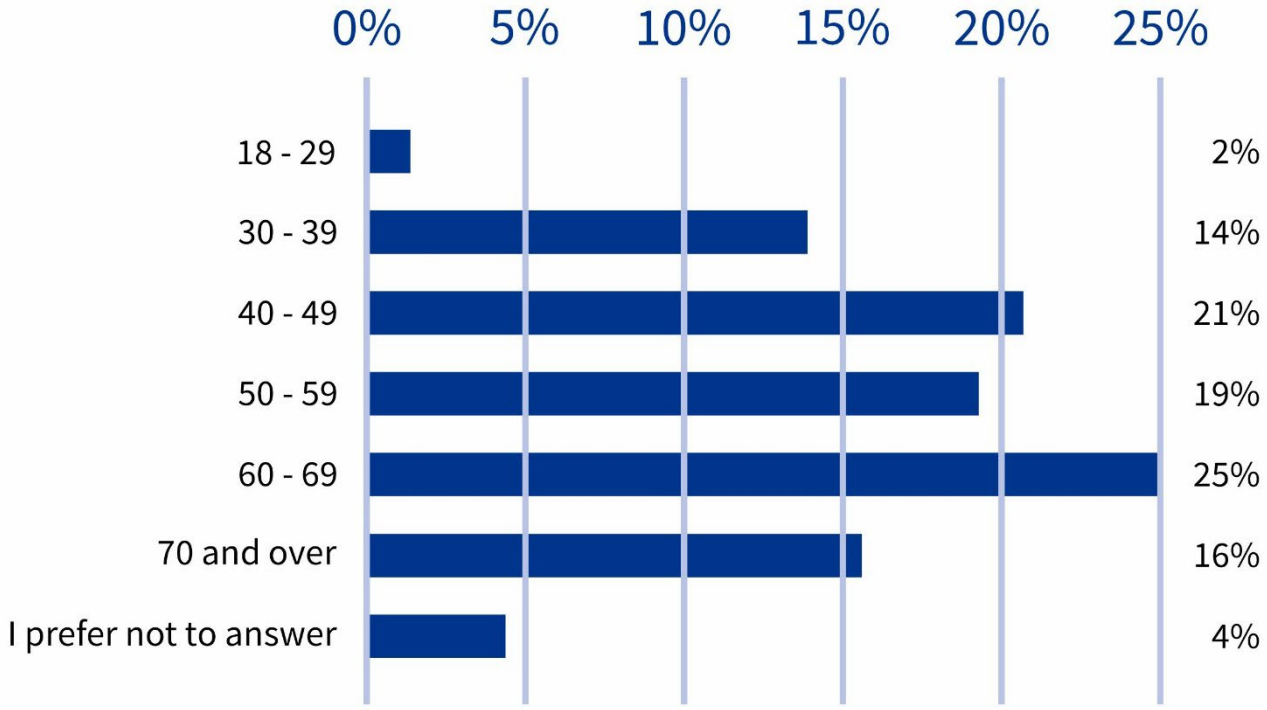
SMDS (Simcoe Muskoka Drug Strategy): A multi-sector partnership led by SMDHU that addresses the drug toxicity crisis through prevention, treatment, harm reduction, enforcement, and emergency management.

IEMHP (Infant and Early Mental Health Pathway): A coordinated local approach focused on supporting infant and early childhood mental health and well-being.

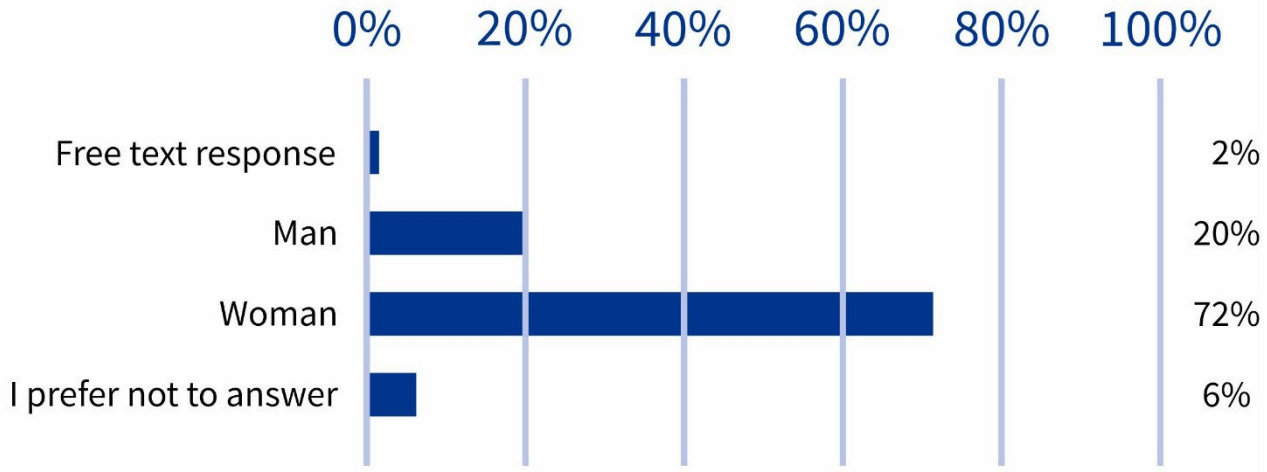
Appendix E: Survey demographic data

“In what age group do you fall?”

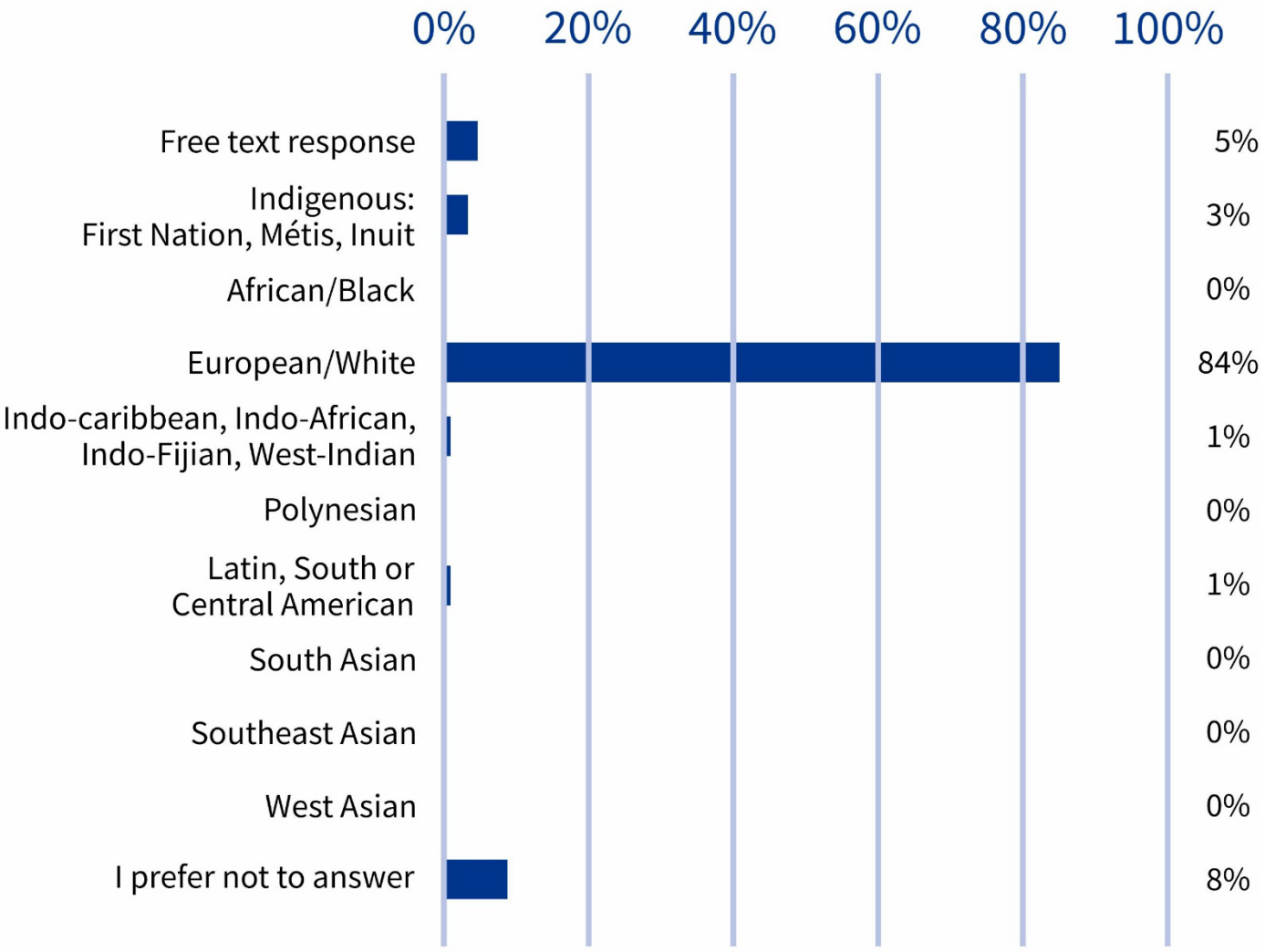
40



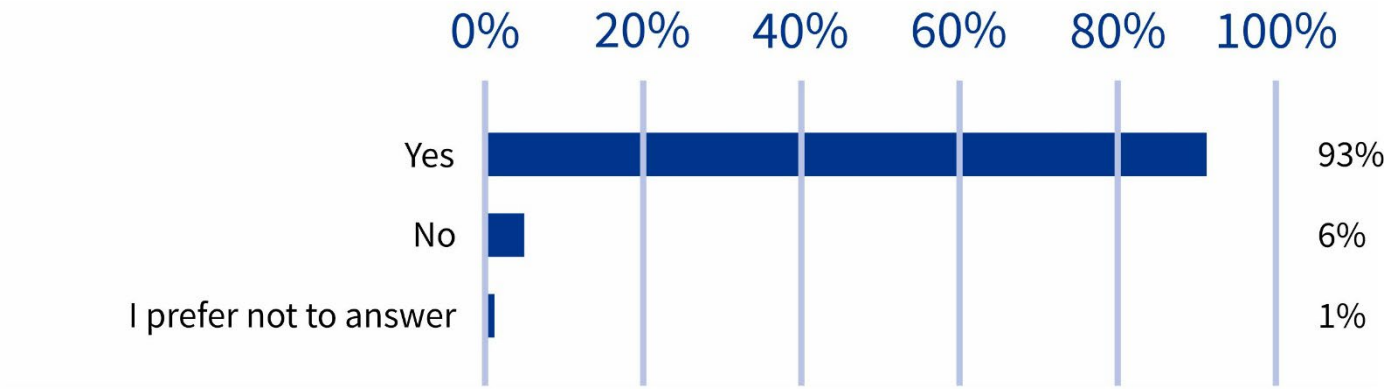
“How do you sef-identify in terms of gender?”



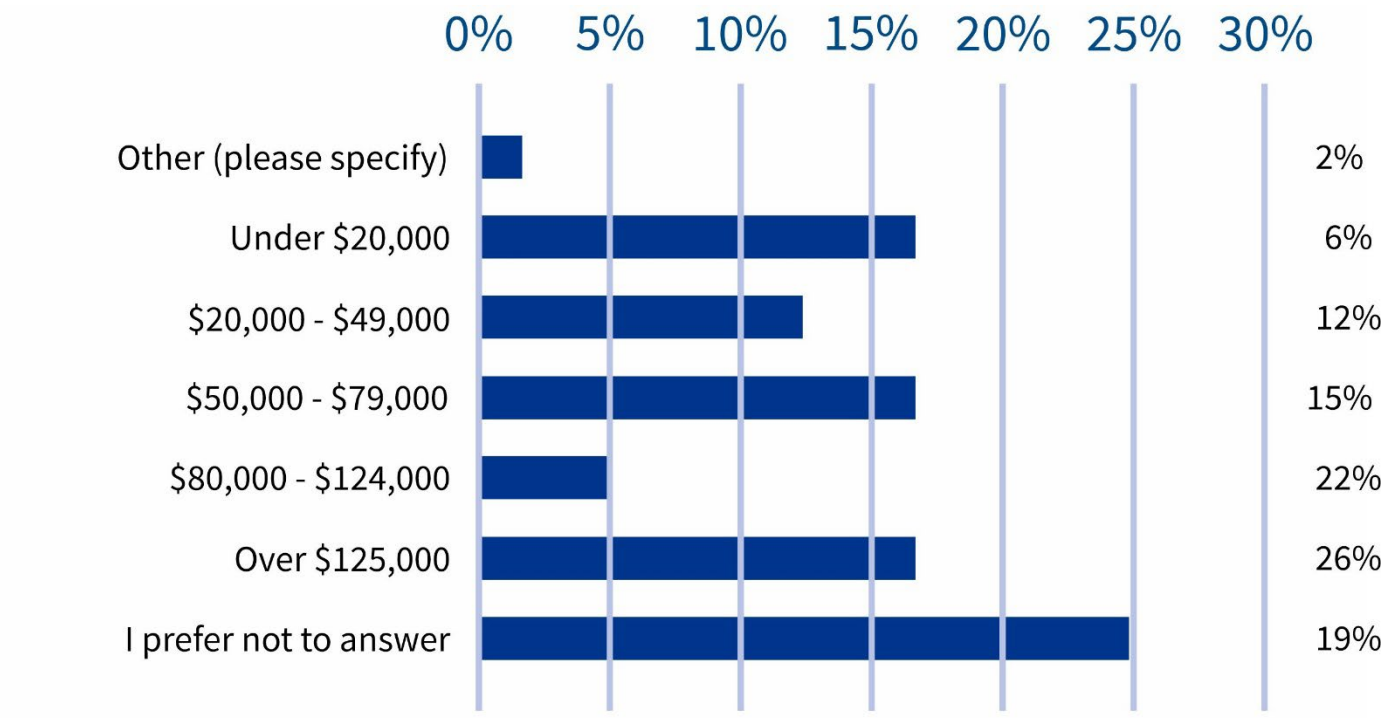
“Which race category best describes you? (you may choose more than one)



“Were you born in Canada?”



“What is your combined household income before taxes?”



Please
Come Again