Community Report
Thunder Bay

Supports for Success

A project of **Wellesley Institute**

Wellesley
Institute
advancing urban health

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Acknowledgment of Traditional Land
We would like to acknowledge this sacred land on which Supports for Success has been hosted. The City of Thunder Bay has been built on the traditional territory of Fort William First Nation, signatory to the Robinson Superior Treaty of 1850 and for thousands of years it has been the traditional land of the of the Anishnabek Nation. Today, Thunder Bay is home to many Indigenous people from across Turtle Island and we are grateful to have the opportunity to work on this territory. We would also like to recognize the contributions that all First Nations, Métis and Inuit peoples have made in building and strengthening this community.

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Introduction

Supports for Success (SFS) is a model for improving educational, economic and social outcomes for marginalized children and youth in Ontario.

Education and employment can boost economies, reduce poverty, help communities thrive and ensure future growth. The earlier we invest in our children and youth, the better positioned they are to succeed in school and gain meaningful employment. In Ontario we make significant investments in healthcare, education at all levels, employment and creating healthy communities. There are dedicated organizations, programs and funding that offer supports to help children thrive from cradle to career.

Despite all this – and while many young people benefit from the supports we have in place – too many are still not thriving.

For instance, in Thunder Bay there is a wide and integrated set of services that support families, children and youth throughout their life-stages. Despite these investments 11.0 per cent of Thunder Bay's youth were not in education, employment or training (NEET)[1] and 35.4 per cent of children were entering school with low scores on Early Developmental Indicators such as physical health and well-being, communication skills and social competence in 2015[2].

Low EDI scores when entering school and NEET rates in adolescence are known indicators of poverty[3], and in Ontario more than 30 per cent of children and youth living in poverty are from vulnerable populations such as Indigenous groups and racialized backgrounds[4].

Complex and intersecting issues, such as public transit, housing, employment and racism, affect how children and youth respond to programs and interventions. However, it is possible to improve the adaptability of programs and services, so that all children and youth benefit, despite systemic barriers. We need to explore new approaches that improve our support system so that all children and youth in Thunder Bay get a fair shot at success. There are many ways to improve the reach and quality of supports:

Improve coordination

Currently, multiple sectors support children and youth, resulting in siloed operations. Children and youth from marginalized groups are more likely to fall through the gaps created by this system. Developing an integrated and inclusive system of support can help, especially if these systems also align their efforts towards achieving common goals.

Create a continuum of care

Another important strategy is to focus on a healthy start to life and then ensure that supports are created to address the needs of people at critical periods throughout their development[5]. For instance, transitioning between life-stages can be a particularly difficult and vulnerable time, and is further exacerbated when children and youth 'age out' of systems of care. A life-course approach would provide gap-free services to create a continuum of support throughout development. Evidence strongly suggests that a life-course approach to child and youth development will help bridge gaps at key transitional stages and lead to healthier and more successful adults[6]. Examples of this include 'Cradle to Career' support models and programs that span from infancy through to young adulthood, such as Harlem Children's Zone in Harlem, NY.

Increase access points

Another strategy is to have a diverse group of supports and services to ensure different points of access and to reflect the complexities of communities. The Mental Health Commission of Canada has shown that programs and services that are culturally-adapted and reflect diversity produce better outcomes for clients and increase overall program satisfaction[7].

To have a transformative impact that prevents children and youth from falling through the cracks, we need a well-designed life-course strategy that breaks siloes and mobilizes diverse stakeholders.

For this to work, we need shared goals and outcomes. The collective impact approach facilitates structured collaboration across different sectors towards achieving common goals. When different actors come together and align their goals, coordinate their actions, and evaluate their progress, transformation is possible.

Supports for Success (SFS) aims to ignite a collective impact process that includes three levels of coordination and action:

- between local service providers;
- between community members (including youth and parents);
- between funders.

At each life-stage, we need to focus and coordinate efforts around a few collectively-chosen, shared outcomes. By working towards common goals, we can achieve effective and sustainable improvements in our ability to support children, youth and their families.

In this report, SFS presents evidence to inform a collective impact strategy for Thunder Bay. The evidence was collected in a four-part research process, detailed in Table 1, below.
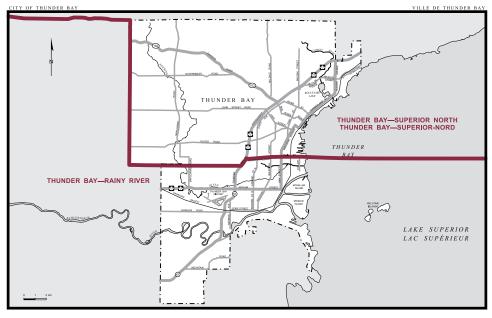
Table 1. Description of SFS research activities

Research Activities	Description	Purpose
Community Profiles	A compilation of demographic information and key indicators of social, economic, educational and health markers that are predictive of success later in life. These indicators are presented at each of the five early life-stages of development.	To provide data that can offer potential direction for future initiatives, such as specific outcomes that various actors will work to improve.
Programs Inventory	An up to date list of programs and services that are available for children and youth in each SFS site. This inventory includes information from existing provincial databases like 211 as well as other sources.	To provide a robust list of programs and services as a tool for community members and policy makers. To identify strengths in the support systems serving children and youth, as well as service sectors or life-stages that need more programs.
Social Network Analysis	An analysis of how programs and services are interacting with one another to refer children and youth to the supports they need.	To gain an understanding of the connections between organizations that serve children and youth, including referral processes and potential gaps in service connectivity across the life-course.
Interviews, Focus Groups, and Indigenous Talking Circles	Interviews were conducted with service providers and community leaders across all four sites. Focus groups and Indigenous Talking Circles were conducted with parents and youth across all four sites.	To better understand the experiences, success strategies, and challenges of families, children, youth, and service providers. To ensure community members and users of the system have a voice in shaping policy recommendations.

Thunder Bay Community Profile

A community has a distinct set of characteristics, strengths and challenges that form an ecosystem within which some children and youth thrive, and some do not. Understanding the strengths, needs and context of a community is critical information to rely on when shaping a collective impact approach. This community profile is meant to inform collective impact in Thunder Bay by providing a brief account of Thunder Bay's historical context, demographics, and social and developmental outcomes.

Figure 1. Map of Thunder Bay electoral district. Source: Elections Canada online, Maps of Ontario

Historical Context

Thunder Bay is a vibrant and diverse city located in northwestern Ontario. It sits on Lake Superior and has a population of 107,910. Thunder Bay has been described as an outdoor city at heart, with a lot of opportunities for children and youth to be active and thrive.

Thunder Bay is continually changing and growing to meet the needs and demand of the region. Its geographical location on the northern shore of Lake Superior positions the city to be a regional hub to support Northern and remote communities in the northwest region of Ontario. Thunder Bay is surrounded by many First Nation communities, resulting in a higher Indigenous population within the city compared to the rest of Ontario. Eighteen-and-a-half (18.5) per cent of the Thunder Bay District self-reported Indigenous identity compared to, 2.8 per cent of Ontario's total population self-reporting Indigenous Identity[8]. As such, Thunder Bay is home to the largest First Nation, Métis and Inuit (FNMI) population in Canada.

The FNMI population has a unique set of needs that differ from the rest of Thunder Bay. However, structural and systemic racism have created barriers to culturally appropriate services. The levels of racism and discrimination and its impacts are so pervasive that they have received national attention. In a recent survey, more than 80 per cent of residents indicated that they strongly or somewhat agreed that racism and discrimination is a serious issue in Thunder Bay[9].
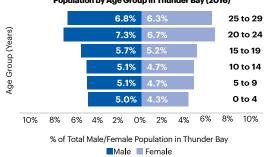
Demographics

Demographic characteristics of the Thunder Bay population are important to consider when planning for collective impact. All demographic information presented here is derived from the 2016 Census at the Thunder Bay (City) subdivision level[10]. It is important to note that this is a smaller geography than Thunder Bay District, and there may be variation in demographic characteristics across the broader Thunder Bay region.

Age Demographics

Children and youth between the ages of 0-29 make up more than 30 per cent of the population of Thunder Bay. Of that per cent, young adults aged 20-24 represent the largest age group, with infants and children aged 0-4 being the smallest. The distribution of population by life-stage can be seen in Figure 2. The larger young adult population in Thunder Bay highlights the importance of services supporting a transition from adolescence to young adulthood, as well as programs addressing the specific health and social needs of young adults (such as employment, post-secondary education and mental health supports).

Figure 2. Population pyramid for children and youth in Thunder Bay using 2016 Census data

Population by Age Group in Thunder Bay (2016)

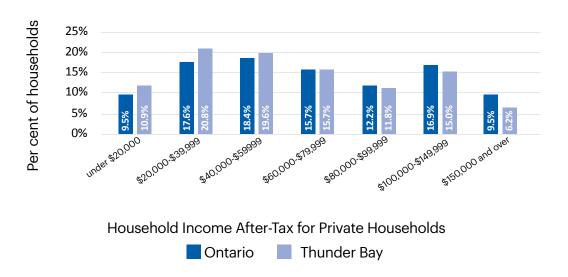| Age Group (Years)	Male	Female
25 to 29	6.8%	6.3%
20 to 24	7.3%	6.7%
15 to 19	5.7%	5.2%
10 to 14	5.1%	4.7%
5 to 9	5.1%	4.7%
0 to 4	5.0%	4.3%

% of Total Male/Female Population in Thunder Bay
■ Male ■ Female

Income and Basic Needs

Poverty is a pervasive issue in Thunder Bay. In 2015, 10.9 per cent (5,125 households) of households in Thunder Bay had an after-tax income of less than $20,000 per year and the highest per cent of households fell within $20,000-39,999 income range. In addition to having a large per cent of households in low income ranges, many children in Thunder Bay live in low-income households, using the Low-income measure, after tax (LIM-AT) as a measure of low income[a]. According to the 2016 Census, 21.5 per cent (4,095) of children and youth aged 0-17 in Thunder Bay were living in low income households. This is a higher per cent of children in youth living in low income households in comparison to the province (18.4 per cent).

Figure 3. Percentage of households in $20,000 income groupings in Thunder Bay using 2016 Census data

Household Income After-Tax for Private Households

■ Ontario   ■ Thunder Bay

Indigenous Identity[b]

Thunder Bay is home to a large and growing Indigenous population. In 2016, 12.8 per cent (13,490 people) of the population in Thunder Bay identified as Indigenous. Of those who identified as Indigenous in Thunder Bay, 75 per cent identified as First Nation, 23 per cent identified as Métis and 2 per cent identified as other or multiple Indigenous identities. Figure 4 gives a visual representation of the Indigenous distribution in Thunder Bay.

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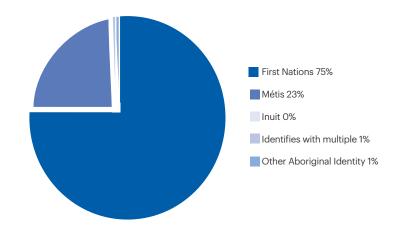
[a]Statistics Canada emphasizes that LIM-AT and other low-income measures are not measures of poverty and rather reflect a consistent methodology for measuring changes in trends for those living in situations that are substantially worse off than others (https://www12.statcan.gc.ca/census-recensement/2016/ref/dict/pop191-eng.cfm)

[b]While the term "Indigenous" is used throughout this report as it is the preferred term, we note that the data source for the below demographic data is termed Aboriginal identity as per the 2016 Census.

However, it is important to note that the Indigenous population in Thunder Bay and across the province is likely to be higher than reported above. For instance, there is evidence that the Canadian Census underestimates the number of Indigenous people in Toronto by an estimated factor of two to four[11]. Quality issues as well as issues of undercounting leave us without accurate data on Indigenous communities. The data that currently exists provides us with little understanding of the true size of the Indigenous population in Thunder Bay, as well as the status of important health, economic and employment indicators that we have collected in this report.

Figure 4. Distribution of identities for Aboriginal identifying indviduals in Thunder Bay using 2016 Census data

- First Nations 75%
- Métis 23%
- Inuit 0%
- Identifies with multiple 1%
- Other Aboriginal Identity 1%

Visible Minority[c] Populations

The visible minority makeup in Thunder Bay is quite small in comparison to the rest of the province. According to the 2016 Census, 4.5 per cent (4,705 people) of the population in Thunder Bay identified as a visible minority, whereas 29.3 per cent of the population of Ontario identified as a visible minority. The largest visible minority group in Thunder Bay is of South Asian origin (0.89 per cent). This is followed by Chinese origin (0.71 per cent) and people who self-identified as Black[d] (0.63 per cent).

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[c] The term "visible minority" is used throughout this report as this is the terminology utilized in the Census 2016. However, Wellesley Institute recognizes that this term does not capture the complexity of discrimination experience based on racialization and needs to be replaced by a more nuanced understanding of the experiences of different racialized groups. We use this term here to reflect the source of our data.

[d] The term "Black" is used throughout this report as this is the terminology utilized in the Census 2016. However, the Wellesley Institute recognizes that this terminology is problematic. Unlike the other visible minority categories included in the Census, the term "Black" does not refer to a region of origin. It is a racial category and needs to be interpreted with caution as it aggregates people from many different origins, including those of African and Caribbean descent.

Although there is not much diversity amongst those who identify as a visible minority, it is important to note that there is diversity amongst those who do not identify as a visible minority. This is evident through language spoken most often at home. Approximately 0.7 per cent (745 people) of the population in Thunder Bay speaks French most often at home and 3 per cent (3,625 people) speak a non-official language most often at home, with the most common being Italian (805 people), Finnish (415 people) and Polish (210 people).
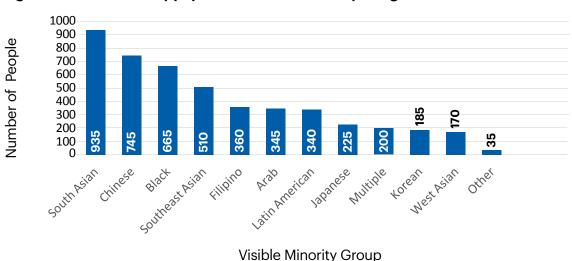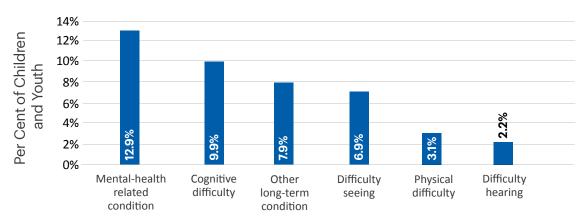
Figure 5. Visible Minority populations in Thunder Bay using 2016 Census data

Activity Limitation[e]

In Thunder Bay 6.9 per cent of children and youth aged 0-29 report difficulty seeing and 2.2 per cent report difficulty hearing, even with the use of aids such as glasses, contacts or hearing aids. Approximately 3.0 per cent of children and youth report difficulty engaging in physical activity such as walking or using their hands, and 9.9 per cent have difficulty learning, remembering or concentrating. In addition, 12.9 per cent report having an emotional, psychological or mental health condition (e.g. anxiety or depression) and 7.9 per cent report having another health problem or long-term condition, all of which may limit the kinds of activity they can engage in at home, school, work or other leisure activities.

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[e] Activity limitation refers to people who always, often or sometimes have a long-term health, mental health or other health related condition/problem that may affect their ability to engage in daily activities. Note that activity limitation is not an accurate estimation of disability. This is due to the large number of false positive reported (i.e. people who report a limitation but do not have a disability).

Figure 6. Percentage of Children and youth aged 0-29 who report an activity limitation in Thunder Bay using 2016 Census data

Social and Developmental Indicators

One of the core ingredients of collective impact is the establishment of shared goals and outcomes to rally collaborative action. As part of our research, we have chosen a small set of 'success indicators' at each of the five early life-stages. These success indicators were chosen based on evidence showing their predictive value for achieving positive employment, educational and social outcomes. The evidence base for choosing each indicator is summarized in the Appendix of our Summary Report.

The success indicators for each of the five early life-stages (prenatal and infancy, early childhood, middlechildhood, adolescence, young adulthood) are presented below. These statistics are derived from a variety of sources including the Census, Canadian Community Health Survey, Public Health Ontario, Ministry of Health and Long-Term Care, and the Ministry of Education. For a complete list of data sources and indicators, see Appendix A.

Appendix A also indicates the level of geography each indicator is presented at. Where possible, we sought to obtain data for Thunder Bay City. However, due to issues related to sampling this was not always possible, and it was necessary to report data at a larger level of geography
(e.g. Thunder Bay District).

We present the success indicators for Thunder Bay alongside the provincial average. This will allow comparison and can help highlight opportunities for growth and improvement in the region. The threshold for comparison was selected by Wellesley staff to be one or more per cent above or below the province.

As whole, the community profile provides an informative snapshot of children and youth's well-being across the life-stages in Thunder Bay.

Table 2. Comparing social and developmental indicators in Thunder Bay to the province.

LEGEND: 🟢 1% or more above the province 🟡 less than 1% above or below the province 🔴 1% or more below the province

Prenatal and Infancy Ages 0 to 2				
Indicator	**Definition**	**Thunder Bay**	**Ontario**	**Compared to Province**
Low birth weight	% of babies born <2.5 kg (5.5. pounds), regardless of gestational age per 100 live births	5.7%	6.8%	🟢
Rate of 18-month well-baby visit	% of children registered for healthcare that have been assessed by a physician for key areas of development	44.7%	54.7%	🔴

Early Childhood Ages 3 to 5				
Indicator	**Definition**	**Thunder Bay**	**Ontario**	**Compared to Province**
Vulnerable in Physical Health / Well-being+	% of Kindergarten children scoring below the 10th percentile for physical health/well-being	23.8%	16.1%	🔴
Vulnerable in Social Competence+	% of Kindergarten children scoring below the 10th percentile for social development	11.7%	10.7%	🔴
Vulnerable in Language/ Cognitive Development+	% of Kindergarten children scoring below the 10th percentile for cognitive development	7.7%	6.7%	🔴
Vulnerable in Communication Skills/General Knowledge+	% of Kindergarten children scoring below the 10th percentile for communication skills	13.7%	10.2%	🔴
Vulnerable in Emotional Maturity+	% of Kindergarten children scoring below the 10th percentile for emotional development	13.0%	12.3%	🟡

Middle Childhood Ages 6 to 12				
Indicator	**Definition**	**Thunder Bay**	**Ontario**	**Compared to Province**
Grade 3 School Achievement for English School Boards	% of Grade 3 students in English school boards that have achieved the provincial average in reading, writing and mathematics assessments	R: 76%	R: 76%	🟡
		W: 72%	W: 76%	🔴
		M: 58%	M: 64%	🔴
Grade 3 School Achievement for French Schools++	% of Grade 3 students in French schools that have achieved the provincial average in reading, writing and mathematics assessments	R: 68%	R: 84%	🔴
		W: 74%	W: 80%	🔴
		M: 75%	M: 78%	🔴
Grade 6 School Achievement for English School Boards	% of Grade 6 students in English school boards that have achieved the provincial average in reading, writing and mathematics assessments	R: 79%	R: 83%	🔴
		W: 77%	W: 81%	🔴
		M: 45%	M: 51%	🔴
Grade 6 School Achievement for French Schools++	% of Grade 6 students in French schools that have achieved the provincial average in reading, writing and mathematics assessments	R: 94%	R: 93%	🟢
		W: 77%	W: 85%	🔴
		M: 84%	M: 83%	🟢
Measles Immunization Coverage	% of 7 year old children at school who received required ≥2 doses of the measles vaccine or are exempt for evidenced immunity	94.2%	91.8%	🟢
Meningococcal Immunization Coverage	% of 12 year old children at school who received required ≥1 doses of the MCV4 vaccine	81.5%	80.6%	🟡

Adolescence Ages 13 to 18				
Indicator	**Definition**	**Thunder Bay**	**Ontario**	**Compared to Province**
Grade 9 School Achievement for English School Boards	% of Grade 9 students in English school boards that have achieved the provincial average in mathematics for applied or academic streams	App: 45%	46%	🔴
		Acad: 84%	84%	🟡
Grade 9 School Achievement for French Schools++	% of Grade 9 students in French schools that have achieved the provincial average in mathematics for applied or academic streams	App: N/A	44%	N/A
		Acad: 78%	85%	🔴
Grade 10 School Achievement for English School Boards	% first-time, eligible Grade 10 students in English school boards who achieved the provincial average on Ontario Secondary School Literacy Test (OSSLT)	79%	81%	🔴
Grade 10 School Achievement for French Schools++	% of first-time, eligible Grade 10 students in French schools boards who acheived the provincial average on Ontario Secondary School Literacy Test (OSSLT)	93%	95%	🔴
5 Year Graduation Rates by School Board	% of adolescents that graduate with a secondary school diploma from secondary school within 5 years of starting grade 9	Lakehead DSB 75.3%	86.5%	🔴
		T.Bay CDSB 84.7%	86.5%	🔴
		CSDC des AB 90.0%	86.5%	🟢
Employment Rate	% of 15-19 year old adolescents that are employed	44.8%	34.5%	🟢
Self-rated Health	% of 12-19 year old adolescents who rate their own health as either excellent or very good	67.2%	73.5%	🔴
Physical Activity	The median amount of minutes per week 12-17 year olds are engaged in moderate-to-vigorous physical activity	630min	540min	🟢
Self-rated Mental Health	% 12-19 year old adolescents who in rate their own mental health as either excellent or very good	72.7%	73.5%	🟡
Sense of Belonging	% of 12-19 year old adolescents who rate their sense of belonging to a community as very or somewhat strong	86.8%	81.3%	🟢
Young Adult Ages 19 to 29				
Indicator	**Definition**	**Thunder Bay**	**Ontario**	**Compared to Province**
Employment Rate	% of 20-29 year old young adults that are employed	70.3%	70.1%	🟡
Self-rated Health	% of 20-29 year old adolescents who rate their own health as either excellent or very good	67.4%	70.3%	🔴
Self-rated Mental Health	% 20-29 year old young adults who rate their own mental health as either excellent or very good	65.8%*	68.2%	🔴
Sense of Belonging	% of 20-29 year old young adults who rate their sense of belonging to a community as very or somewhat strong	64.3%	62.3%	🟢
NEET Rate	% of population aged 15-24 who are not in education, employment or training (NEET)	8.6%	8.9%	🟡
Post-Secondary Educational Attainment	% of 20-29 year old young adults that have obtained a post-secondary certificate, diploma, or degree	55.0%	56.9%	🔴

+ Vulnerability is determined by the Early Development Instrument (EDI), a population-level assessment of children's ability to meet developmental expecations in five general domains. The 10th percentile cut-off point for vulnerability is based on data from the Ontario Baseline assessment (Cycle 1).

++French school achievement indicators are based on results from French-language schools belonging to a French school board. They do not include results from French Immersion programs.

R/W/M indicates reading, writing, and mathematics respectively

"App": Indicates applied stream for mathematics

"Acad": Indicates academic stream for mathematics

"N/A": Indicates that the data was suppressed

*Estimate had a coeffcient variaion between 15.0% and 35.0%. This indicates that it is not a very precise estimate and should interpreted with caution.

Community Assets

Before engaging in a collective impact process, it is important to take stock of all the programs and services that make up the system supporting children and youth. Existing networks are also important assets that could help provide the seeds of a collective impact group. Lastly, referral processes are vital pieces of community infrastructure that determine how children and youth navigate and access the system. In this section we present an inventory of programs and services, networks and referral processes that support children, youth and their families. This information will help us gain a better understanding of the strengths and weaknesses of the system supporting children and youth and can help inform future interventions and implementation strategies.

Programs and services that support children, youth and their families

Thunder Bay has a wide array of programs that support families, children and youth throughout their development. Our programs and services inventory found that there are over 394 programs and services provided by over 141 organizations. See Table 3 for a descriptive overview of the kinds of programs and services available to people in Thunder Bay at each life-stage.

Table 3. Programs and services that serve families, children and youth in Thunder Bay

Prenatal/Infancy (Ages 0-2)	Early Childhood (Ages 3-5)	Middle Childhood (Ages 6-12)	Adolescence (Ages 13-18)	Young Adulthood (Ages 19-29)
Child development Childcare Health services Home care Mental health and counselling Midwife services Nutrition Playgroups Prenatal classes Special needs	Adoption services Childcare Childhood development Cooking and nutrition Family health Home based support Indigenous services Legal support Mental health and counselling Playgroups Social services Special needs Sports, art, and recreation	Child development Child welfare Childcare Cooking and nutrition Educational programming Family support Health services Indigenous services LGBTQ+ services Mental health and counselling Mentorship Parenting programs Special needs Sports, art, and recreation Summer camps	Addiction services After school program Career support Financial counselling Health services Housing support LGBTQ+ health Mental health and counselling Religious services Secondary education Special needs Sports, art, and recreation Youth justice	Academic programs Addiction services Employment services Financial counselling Food bank Health services Housing support Indigenous services LGBTQ+ health Mental health and counselling Religious services Secondary education Special needs Sports, art, and recreation Youth justice

What people are saying about progrmas and services in Thunder Bay

Each life-stage across the life-course has areas of strength and areas that need improvement. In our interviews and focus groups (See Voices from the Community for a description), community members told us about the strengths and opportunities of the services serving the five life-stages in Thunder Bay.

Here are some of the things we learned:

Prenatal/Infancy

Members of the community told us that there are a wide range of programs, supports and resources that exist for the prenatal period and infancy stage. Many of these programs focus on health and well-being, to help ensure babies and new mothers receive adequate supports early enough to be proactive should further supports or interventions be required. Some of these programs offer support for addictions, breastfeeding, mental health, and social inclusion.

The community recognized that organizations offering inclusive programs and services for Indigenous parents and babies are important. Several community members talked about how Indigenous parents are often frightened when they first give birth, especially those that come to Thunder Bay to access medical services. In Thunder Bay, there are several Indigenous-led agencies that offer culturally competent and safe services to new parents. However, the community expressed the need to increase the number of prenatal supports, as well as the outreach efforts for existing ones. Many of the service providers in the city admit that there are services that pregnant and new mothers don't know exist.

Early/Middle Childhood

The community held that one of Thunder Bay's strengths is its numerous programs and resources for the early and middle years. Children from families living in poverty benefit from the many free sports, recreation and arts programs offered throughout the year. Families can also gain access to subsidized early childhood care, low-rental housing, food, clothing and emergency shelter if necessary. However, the community also noted that there is much more work to be done, as many families in need are still not accessing these supports. Organizations reported that collective impact could be an important strategy for ensuring that the needs of all families are being met. However, the agencies and organizations have discussed barriers that exist within their own agencies. One main barrier was that some organizations are not allowed to share information between agencies which creates difficulties in engaging in fulsome collaboration.

Adolescence

While adolescents have many health and wellness supports available to them, local organizations are looking at ways to offer more services that are directed towards this age group. The community indicated that building trusting relationships is important for adolescents. Indigenous students have shared stories of not feeling safe within the city because of the racism and discrimination they experience. We heard that there is a sense of hesitation by Indigenous youth to participate in services if they do not have a relationship or connection to the organization. Organizational leads and front-line workers understand this need and are working towards policies that enable relationships to build and grow.

> *"…with a number of youth that we're working with, we're working with youth who've been in precarious situations and so there is a level of trust required and we take the time to build that trust, and it's very need and goal-focussed."*
> *– service provider in Thunder Bay*

Adolescents expressed a desire to be engaged with their communities in a meaningful way and to also have opportunities to engage in peer to peer programs. This could take many forms, whether it is having a peer navigator help youth navigate the different systems or simply providing a safe space to hang out.

Young adulthood

Though many programs and resources exist for young adults seeking employment, the community noted that there is a need for more one-on-one interaction with this age group. Young adults reported needing help with writing resumes, drafting cover letters, and interview skills but expressed that programming was not available when they needed it. They voiced that they needed supports that are available after school and after the regular nine-to-five work week.

Organizational networks and hubs

A great deal of networking takes place in Thunder Bay among agencies and organizations that aim to help guide policy change to benefit families, children and youth. There are many programs and strategies in Thunder Bay that include goals and recommendations around children and youth and the issues that they may experience. The voice of lived experience is also utilized to gain information and advice.

Many agencies that offer services and supports to marginalized populations sit at the various tables and share information and resources. These relationships have helped to create supports in the community that increase the chance for success for these populations. More organizations are engaging with each other as it becomes more apparent that these relationships are advantageous. They are overcoming barriers including funding, geography and policy.

"Even though we're funded different, different ministries, different mandates,
we came together to provide a service in our community, and it's a very valuable service…"
– service provider in Thunder Bay

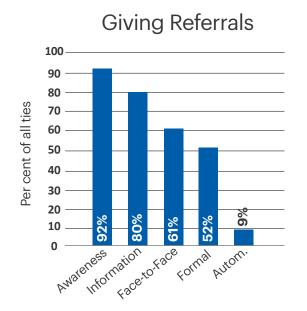# Referral networks between programs and services

When seeking services, a person receiving services may need to find their way from their first point of contact to other service providers. This can be a daunting process especially as individuals age, potentially losing their eligibility for some programs, and becoming eligible for others. This can be further exacerbated especially if their current service providers are not connected to the service they need next. Needs can also change over time, and clients often rely on their service providers to find new and appropriate sources of support. Because of this, it is important to understand the connections within service provision for children and youth, and specifically which providers refer their clients to one another. Specifically, any future collective impact must be aware of places in the network where the referrals between programs need strengthening. This insight would be key to find places where young people may be in danger of falling through gaps in the network of referrals.
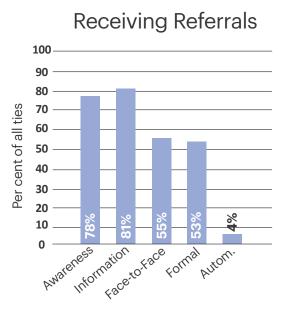
To create this map of services for children and youth, SFS undertook a social network survey of program staff in Thunder Bay. Our sampling list was produced through a combination of administrative data (i.e. 211 community and social support helpline) and consultations with our local partners and stakeholders to provide us with a sense of what programs and organizations needed to be sampled. We identified 141 organizations in Thunder Bay that had programming serving children and/or youth in some capacity and sought to recruit program staff to answer the survey through relationships to our local partners, as well as direct contact. One hundred and two out of 141 (72.3 per cent) of these organizations had at least one program that was represented in the survey, either as a participant or a contact mentioned by a participant. Two hundred and twenty-three unique programs were represented in the survey. Where possible, programs mentioned in the survey were matched to publicly available data about each program.

Stength of referral connections between programs

Participants in the SFS social network survey listed programs that they made 'referrals' to by any definition of the word, and then were asked to say what kind of referral method they used. Many these referrals included promoting awareness of other programs, without any formal mechanism, or face-to-face meeting or assuring that the person would become connected to another program.

Figure 7. Informal methods of referring clients to other programs (e.g. promoting awareness) were the most common type of referral

'Awareness' refers to providing program name and contact information.
'Information' refers to providing program pamphlets and videos.
'Face-to-face' refers to arranging face-to-face connections with new services (e.g. 'warm hand-offs').
'Formal' refers to arranging enrollment opportunities with formal/written referrals.
'Automatic' refers to setting up automatic sign-up, opt-out only.

Our social network analysis found that the most common referral practices are not strong or easy ways for a client to get from one program to another. In other words, the most common ways of connecting a person to a new program were also the ways that placed most of the burden on the client. Simply providing names of programs, or pamphlets, places responsibility on the client to get connected and does little to remove any barriers they may face. Figure 7 demonstrates this pattern: the predominant form of referral (whether referrals given, or referrals received) in Thunder Bay was promoting awareness and providing information, leaving it to the client to make the connection.

While face-to-face referrals were only moderately common, these 'warm-hand-offs' reached nearly 60 percent of all giving referrals. This is promising, considering that in some circumstances face-to-face connections may be a stronger form of referral than formal referrals or automatic enrolment from the client's point of view. Automated enrolment was especially rare; less than 10 per cent of all referrals occurred through this method.

It is important to note that marginalized families and individuals may face even more barriers to becoming connected to a new, appropriate program. Without formal and built-in processes to ease transitions, their ability to navigate the system will be even more challenging than those not facing some form of marginalization.

Connectivity between organizations

The patterns of referrals revealed that most organizations have relatively few connections to other organizations. Most organizations had few connections to other organizations, while a small number of organizations were very well-connected. While this could indicate a high degree of inequality in the sector, with some organizations enjoying numerous strong and useful connections, we should proceed cautiously with this interpretation. Not giving out very many referrals might be a sign of quality, since it could mean that the organization can do all that it needs to do by itself. Regardless, whether a sign of prestige or a lack of capacity, referral activity seems to be concentrated among relatively few organizations.

Importantly, who refers to who in this network is not random. Organizations may be more likely to refer to other organizations that share some specialization, and while this could be beneficial, it may also be the case that some clients become stuck in a part of the network with organizations that only refer to each other, making it difficult for them to access the full range of services in Thunder Bay.
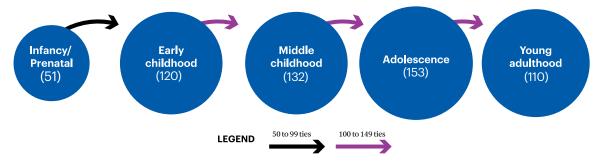
Indigenous groups in Thunder Bay face considerable stigma and may also face social isolation. Likewise, it may be the case that organizations that serve Indigenous peoples face a similar situation and become separated from the wider sector of social services in terms of referrals – which seems to be the case in our data. There were 15 out of 102 organizations in our sample that exclusively served Indigenous people (14.7 per cent). Of these, 78.6 per cent gave or received referrals to other Indigenous-focused organizations. But for organizations outside this group, only 35.6 per cent gave or received a referral from Indigenous-focused organizations.

It is important to note that some of this pattern could result from a lack of Indigenous cultural competency and safety training in the sector. Staff at Indigenous-focused organizations may not want to send their clients to these other organizations, and their clients may not want to go, expecting that when they arrive they will be not be met with culturally-appropriate services. They may also be met with racism and discrimination, or threats to their safety. Regardless, without addressing the many forms of stigma and discrimination faced by Indigenous peoples in Thunder Bay, both from within and outside of these organizations, one would expect this pattern would persist.

Program supports and connectivity across the life-stages

Finally, we examine how programs and services are connected to one another by the life-course stage they serve, using a 'network diagram,' which is presented below in Figure 8. This diagram combines information from the network survey and the inventory of programs and services; if a program provides services to multiple life-course stages, it is correspondingly represented in multiple life-course stages in the diagram, and it contributes to the continuity between life-course stages by counting as a connection between the stages. This provides us with a comprehensive picture of the service continuum across age groups – the 'pipeline' of programs and services for young people in the region.

Figure 8. Pipeline of programs and services for children and youth in Thunder Bay, formed by referral ties between programs

Note on reading this diagram: Size of bubbles is proportional to number of programs that serve that life-course stage. Arrows indicate number of referrals ('ties') between programs that serve each life-course stage. Number of programs serving each life-course stage given in brackets within each bubble.

Life-course stages are as follows: Infancy and prenatal (ages 0 to 2), early childhood (ages 3 to 5), middle childhood (ages 6 to 12), adolescence (ages 13 to 18), and young adulthood (ages 19 to 29).

Circles in the network diagram represent programs that serve a life-course stage, sized according to how many programs there are in our data that serve that stage. Ties are thickened to show how numerous the connections are between programs that serve that life-course stage (see legend). Programs serving adolescents are the most numerous and have many ties with programs serving middle childhood and young adulthood.[f]

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[f] Note that most of the continuity across life-course stages is actually within programs – 69.3 per cent of the ties from one life-course stage to an older stage are within programs, not across. When one only considers ties from one program to another, 30.5 per cent are to programs serving the same stage, 41.5 per cent are forward to older stages, and 28.0 per cent are backward to younger stages. The 'backward' ties are primarily to multiservice hubs that often serve every life-course stage.

The resulting picture is therefore of a sector with a relatively balanced number of programs across the life-stages, with a slightly larger number of programs directed towards adolescents. The number of programs at each life-stage is not necessarily a reflection of the capacity for serving children and youth; as people age, their needs may become more diverse as people take a wide range of different paths in their life, necessitating a wider range of programs. A smaller number of programs may be just as effective when the kinds of needs they must address are relatively few. The number of programs active in each life-course stage may therefore be proportional to need, and the large number of programs serving both adolescence and young adulthood – and their strong ties may point to a large number of resources for people at this point in their lives.

To summarize this section: We found that

      a) although more than half of referral activity involved face-to-face handoffs, or stronger methods, a substantial portion of referrals are likely to put burden on the clients;

      b) there were strong connections between adolescence and young adulthood in terms of apparent continuity of services;

      c) Indigenous-focused organizations were a relatively separate part of the network of referrals, set apart from organizations that did not share this focus.

Voices from the Community: Priority issues and opportunities in Thunder Bay

The following are three core priority issues and opportunities identified by community that aim to better support marginalized children and youth in Thunder Bay.

The research that informed this section includes:

1) Key informant interviews with staff at programs serving children and youth (17 interviews);

2) Consultation interviews with community leaders and change-makers who were able to provide a more general picture of constraints and opportunities facing young people in the region (9 interviews) ; and

3) Discussion groups where actual or potential service users could gather to discuss their experiences with getting connected to programs (5 groups; 30 total participants). The participants in the discussion groups were 47 per cent female, 53 per cent male, and 80 per cent Indigenous.

Mental Health and Addictions

COMMUNITY VOICES

"Youth are being put on wait lists for services that they needed last year, and so I think it is really problematic because we see a lot of kids relapsing, going back to old behaviours if they don't have consistent support. "
– service provider in Thunder Bay

"I have support, but they are not there 24/7. They are only there 5 days a week and the Crisis Response is talking to someone you don't know on the phone doesn't do f*** all. I am not going to sit there saying personal things … when I was there, the counselors I had was switched every week. There were times I would go there and see them for a week and getting close to them and all of a sudden it is someone random, totally different. Through the trauma I had it takes me awhile to open up to people, I have trust issues."
 – youth in Thunder Bay

In Thunder Bay, there is a significant concern about mental health and substance abuse among children and youth. Many of these concerns relate to broader issues around housing, homelessness, poverty and violence within families. Among the Indigenous population, intergenerational impacts of trauma have left youth lacking supportive relationships and strong connections with culture. Community members have observed that Indigenous youth from fly-in communities are at a particularly high-risk of mental health concerns and suffer from extremely high suicide rates.

Several service providers told us that the system is overwhelmed by families and youth with complex needs. Although youth addiction services are well coordinated across the district, there is a consensus among emergency responders, service providers, and families that the services in place for mental health and substance abuse are insufficient to meet the need. Youth reportedly struggle with long wait lists, inconsistent counselors, and lack of culturally-specific service. This seems to contribute to a lack of trust and discontinuity of care. Service providers talked about the shortage of beds available for group homes in Thunder Bay; and that, as a result, many youth are sent to Southern Ontario due to the high demand and severe lack of facilities. Service providers also mentioned the small number of child psychiatrists for all psychiatrists for all northwestern Ontario is severely insufficient to meet the need. This lack of availability of care is exacerbated by the geographical layout of Thunder Bay, that creates a large distance between services (see Physical Geography and Transportation section).

Members of the Thunder Bay community articulated that more community supports and programs are needed to replace hospitals that no longer have the capacity to meet the current demand for mental health care, and offer little follow up after discharge. Community members also expressed that incorporation of cultural practices and land-based activities are required to make services more appealing to Indigenous youth. While there is a lot to be done within this area, existing interventions like telepsychiatry, and collaboration during crises have been identified by service providers as effective interventions that may pave the way forward for better mental health care for children and youth.

Safety, Supports and Access to Care for Indigenous Communities

There is a strong need to prioritize safety, supports and accessible care for the Indigenous community in Thunder Bay. Many community members feel discomfort accessing services due to restrictive policies, and a lack of culturally specific care. There is huge stigma and mistrust surrounding programs for children, due to fears of losing children to the child welfare system, and a history of babies being taken away from mothers. Members of the Indigenous community in Thunder Bay are reluctant to access service due to systemic and institutionalized racism manifested by social workers, hospital staff and service providers. This racism is experienced at all levels and often translates into broader concerns for safety in Thunder Bay.

Women frequently express that they feel unsafe walking alone and attribute this fear to the Missing and Murdered Indigenous Women and Girls crisis in Northern Ontario. Youth also face large concerns around safety and have been brutally attacked on the street due to their Indigenous identities. Most importantly, relationships with the police are also closely linked with concerns around racism and safety in Thunder Bay. Many Indigenous youth experience extremely violent interactions with the police, including physical violence, racist slurs and threats.

Community members expressed that prioritizing safety and sufficient supports for Indigenous youth is one step toward addressing the growing need for reconciliation and mental health supports in Thunder Bay. This is particularly important for youth from fly-in communities that are especially impacted by racism while lacking support and family networks. The Seven Youth Inquest, and the Walk a Mile training by the City of Thunder Bay both offer opportunities to address these concerns amongst service providers, the police and members of the community.

COMMUNITY VOICES

"I was jumped outside of Churchill, because I was specifically Native. By these two like guys in a pick-up truck... They started hitting me with bats, they put me in the hospital because of that. My eyes were like swollen shut, I got 32 stitches on my head. I was just walking home back from my foster parents. .....that whole time trying to cover my face but they were like grabbing my hands and putting me down like that and stomping on my face. Calling me like a dirty Indian, saying all Indians deserved to die."
– youth in Thunder Bay

"So we need to be able to meet the needs of our Indigenous youth in our community, and we need to have a community that – it's so big, because it's not just having mental health services, it's having a community that has less racism. And that's something – you know, we'll be at Indigenous Days and we'll be at Pride and we try to do our part of that, but it's going to take a long time... The Walk a Mile training we did with the City of Thunder Bay was phenomenal. All organizations in this community should take that training. "
– service provider in Thunder Bay

Physical Geography and Transportation

COMMUNITY VOICES

"I think another thing is the isolation of Thunder Bay is kind of a big one I think as well just because you get sort of, it's easy to feel like this is the whole world that there's nothing available that just because you're squished so far away from everything and maybe we don't have the access to certain services that you have in larger urban centres like Toronto or Montreal or something like that."
– parent in Thunder Bay

"The bus system sucks, it's cold, it's long waits in between buses. A lot of [our clients] don't have cars, so they might arrive thirty, forty minutes early for an appointment. And then, if they are picking up children and leaving, and they have to wait for that next bus, it's a challenge to do that when you have young children and it's January and it's minus forty and you're waiting for a bus. Our appointments aren't necessarily scheduled around bus times, so that's an issue for families."
- service provider in Thunder Bay

Thunder Bay's service landscape is widely spread out through the large physical area of what used to be two separate cities, Fort William and Port Arthur. As a result, distances between services often tends to be a significant barrier when accessing care.

This situation is exacerbated by an insufficient transit system that is poorly scheduled with long wait times. This is often an additional barrier for marginalized individuals that do not have their own vehicles, and for families needing to access services with children. Fly-in youth are also accustomed to communities where everything is walking distance, and face trouble navigating a new transit system when they come to Thunder Bay. This isolates people from services and poses safety concerns for Indigenous individuals who already experience high levels of racism. Youth with significant family struggles often find difficulty getting rides to and from services. As a result, there are many instances of police officers and service providers who drive youth home and to appointments but are limited by strict protocols and insurance liabilities.

Youth often create networks with one another to arrange for rides to services. There is an opportunity to strengthen ride share programming, provide bus tickets, and implement programs in communities in different parts of town. Other community suggestions for improvement include increased access to home-based services, programming services around bus schedules, and offering transportation to service.

What have we learned and where do we go from here?

Summary of findings

Our community profile analysis revealed that children and youth in Thunder Bay are not doing as well as the rest of the province on:

    a) the rate of 18-Month Well-Baby visits;
    b) Early Developmental Indicators in physical health/well-being, social competence,
       language and cognitive development, and communication skills and general knowledge;
    c) achievement scores in grades 3, 6, 9 and 10;
    d) self-rated health amongst adolescents;
    e) 5-year graduation rates (in 2 out of 3 school boards) and post-secondary educational
       attainment rates; and
    f) self-rated health and mental health amongst young adults.

Our inventory of programs and services found that in Thunder Bay, there are over 394 programs and services provided by over 141 organizations. Our findings demonstrate that although there is a wide array of programs and services available, there is still a need for more culturally safe and appropriate programming across all the life-stages, as well as increased supports during young adulthood.

In our social network analysis, we found that the relatively common use of face-to-face 'warm hand-offs' as a referral practices is promising and, is likely to be especially important when children are transitioning to a new life-stage and new set of programs. The finding that Indigenous serving organizations are much more likely to be connected to each other than to organizations that do not share this focus, points to cultural competency training and culturally adapted services as on possible way of improving service connectivity and access for Indigenous people. Our network analysis also showed strong connections between adolescence and young adulthood in terms of apparent continuity of services, but the drop off in programming in adulthood may indicate a bottleneck in the system at a time when many youths need more support than ever.

Talking to service providers, community members, parents and youth in Thunder Bay helped us learn which issues are perceived as priorities for the community. The priorities identified in Thunder Bay included :

    • Mental health and addictions;
    • Safety, supports and access to care for Indigenous communities;
    • Physical geography and transportation.

The way forward: The Supports for Success collective impact approach

The challenges that some Thunder Bay youth are facing are complex, multifaceted and cannot be solved with a single intervention or program. We need to work together to help Thunder Bay's most marginalized children and youth lead a healthy and successful life.

The findings presented here about Thunder Bay's strengths, assets, community priorities and opportunities, can be used to inform collective action. The demographic information, and the indicators of success highlight potential outcome areas that could be used to drive change and rally collective efforts at each life-stage. The findings of our social network analysis suggest how a collective impact process might improve the continuity of care throughout the life-course by strengthening referral practices. The priority areas that Thunder Bay community members have helped us identify as potential areas of transformative change and can help guide future intervention and implementation design.

The SFS collective impact approach not only creates an opportunity for more coordinated and effective supports that improve outcomes for children and youth but can also encourage more efficient service delivery. The formal relationships between organizations are important assets and can help reduce ineffective care paths and better utilize the resources needed for services. Any door is the right door when services are connected.

Focusing all the players in the system on a few strategic goals will be much more effective and economically efficient than the current patchwork approach to service delivery and intervention we often see across the province. The life-course approach taken by SFS will also prevent many problems children and youth face before they occur. By taking a preventative approach the province will save on expensive remedial measures that are often necessary after children and youth become homeless, ill, or in contact with the justice system.

Working together to make change

SFS designed a collective impact approach that includes three levels of coordination and action: coordination between local service providers, coordination between community members, and coordination between funders.

Funder participation will ensure their long-term strategic and funding commitments dovetail with the shared outcomes and strategies that emerge out the collective impact process. Providers will offer insight into what barriers exist and how frontline resources can be leveraged to meet collective outcomes. Community participation will ground the collective impact process in the strengths of residents, as well as the needs, gaps and challenges experienced in their daily lives. These three levels of input are important for achieving effective and sustainable system change.

Within these groups it will be important to recognize and foster the contribution of different sectors, as well as key stakeholders such as children, youth, parents, and diverse cultural groups. It will also be important to ensure that people from marginalized communities – such as families experiencing incarceration, racialized, Indigenous, rural and low-income communities, as well as individuals with lived experience of mental illness and addictions – are key players in the process. By leveraging diverse knowledge and experiences, a range of innovative approaches to service provision and community development can be developed to support Thunder Bay.

SFS has received generous support of this work from a number of local Thunder Bay networks and service organizations that we look forward to working with to move this work forward. Together, with the diverse voices of community members, children, youth and parents we can improve educational, social and employment outcomes for marginalized children and youth in the Thunder Bay community.

Appendix A

Indicator	Source	Geography Available for Analysis
Low Birth Weight	Public Health Ontario, 2016	Thunder Bay District Health Unit
18 Month Well Baby Visit	Ministry of Health and Long-Term Care, 2016-17 (Special Request)	Thunder Bay (City) Census Subdivision
EDI Indicators	Ministry of Education, 2014-15	Thunder Bay Census Division
School Achievement	Education Quality and Accountability Office (EQAO), 2016-17	Schools and School Boards in Thunder Bay
Immunization Coverage	Public Health Ontario, 2015-16	Thunder Bay District Health Unit
Graduation Rates	Ministry of Education, 2015-16	School Boards in Thunder Bay
Employment Rates	Census, 2016 (Special Request for Cross-Tabulation)	Thunder Bay (City) Census Subdivision
Self-Rated Health	Canadian Community Health Survey, 2015-16 (Special Request)	Thunder Bay Health Unit
Physical Activity	Canadian Community Health Survey, 2015-16 (Special Request)	Thunder Bay Health Unit
Self-Rated Mental Health	Canadian Community Health Survey, 2015-16 (Special Request)	Thunder Bay Health Unit
Sense of Belonging	Canadian Community Health Survey, 2015-16 (Special Request)	Thunder Bay Health Unit
NEET Rate	Collective Impact for Disconnected Youth Partnership Table, 2016 (Special Request)	Thunder Bay Census Metropolitan Area
Post-Secondary Educational Attainment	Census, 2016 (Special Request for Cross-Tabulation)	Thunder Bay (City) Census Subdivisions

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