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FINAL REPORT

Project:

Learning from Cabot Square - Developing the Strategy for Community Safety and Wellbeing



July 2013
(Updated October 2013)



This publication was funded by Aboriginal Affairs and Northern Development Canada (AANDC), Secrétariat aux affaires autochtones (SAA), First Nations Human Resources Development Commission of Quebec (FNHRDCQ), and the City of Montreal.

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Native Women's Shelter of Montreal
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The report will be made available in English and French on the following websites:

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Montreal Urban Aboriginal Community Strategy Network (NETWORK)
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We would also like to extend our appreciation to the members of the NETWORK (and specifically to the Justice and Homelessness sub-Committees), as well as to all the partners, organizations and individuals who contributed to the development of the Strategy. These organizations and individuals ensured the achievement of the project due to their generous support and assistance over the past few months. Our thanks also extend to the International Centre for the Prevention of Crime (ICPC), projet Dialogue (YMCA), the Borough of Ville-Marie and the Peter-McGill Community Council for their continued support and for providing office space for meetings.

It is our wish and hope that after many months of hard work leading to the development of the solutions (described in the Strategy), the *Strategy for community safety and wellbeing for Cabot Square* will be implemented.

GLOSSARY

Aboriginal: Aboriginal (person, people, population) has been used for the sake of simplicity and in regards to the Government of Canada's use of terms. It must be noted that there are a number of different names for Aboriginal people. There are in fact 52 uniquely distinct Aboriginal cultural groups, and Aboriginal populations in Canada are typically classified into four major groupings: First Nations - Status Indians, First Nations - Non-Status Indians, Métis, and Inuit.

Community safety: Community safety is a broader concept than "crime prevention". It refers to the sense of wellbeing and the quality of life of a community or neighbourhood.

Front-line worker: An individual who does work designed to provide various types of support to the target population, and who are also referred to as street workers, outreach workers, district nurses, etc.

General public: Individuals living, working and studying in the Peter-McGill district, and who are also referred to as residents, business owners, users of public space (Cabot Square), visitors, workers, and students.

Homeless person/population: An individual or group of individuals without a home and therefore typically living on the streets.

Strategy: A plan of action designed to achieve an overall aim/objective.

Target population: The population in Cabot Square that accesses support services and are referred to as participants, clients, and the vulnerable and/or marginalized population by community organizations and service providers.

Wellbeing: Wellbeing is a general term used for the condition of an individual or group, for example their social, economic, psychological, spiritual, or medical state.

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INTRODUCTION

a) Background, mandate, timeline, project team and partners

The Justice sub-Committee of the NETWORK proposed to complement existing efforts in order to improve safety in Cabot Square and its surrounding area. The sub-Committee developed a project that aimed to establish the foundation for Montreal's first Strategy for Community Safety and Wellbeing in order to respond to the needs of the target Aboriginal population in Cabot Square.

Mandate:

To develop a strategy to prevent community safety issues from worsening. The strategy aims to situate Montreal as a model city that fosters local coordination, promotes social inclusion and co-existence, and to provide efficient services and improve wellbeing and safety Montreal.

Timeline: January 14 to July 12, 2013.

Project team:

- Project supervisor: International Centre for the Prevention of Crime (ICPC)
- Project coordinator: Montreal Urban Aboriginal Community Strategy Network (NETWORK)
- Front-line worker: YMCA (Downtown Montreal), projet Dialogue (YMCA)
- Researcher: Montreal Urban Aboriginal Community Strategy Network (NETWORK)
- Steering Committee: Borough of Ville-Marie, Native Women's Shelter of Montreal

Project partners:

- City of Montreal
- Borough of Ville-Marie
- International Centre for the Prevention of Crime (ICPC)
- Montreal Urban Aboriginal Community Strategy Network (NETWORK)
- Native Women's Shelter of Montreal
- YMCA (Downtown Montreal), projet Dialogue
- Peter-McGill Community Council
- Secrétariat aux affaires autochtones (SAA)
- Aboriginal Affairs and Northern Development Canada (AANDC)
- First Nations Human Resources Development Commission of Quebec (FNHRDCQ)

b) Objectives and deliverables:

Objectives	Proposed Deliverables	Actual Deliverables	Actual supplementary deliverables
1. Improve the coordination and collaboration of existing services/relevant groups working with the target population to improve safety in Cabot Square and the surrounding area.	<ul style="list-style-type: none"> a) Produce a document that outlines existing services; b) Secure formal agreements with the partners for coordination; c) Document, quantify, and analyze ongoing interventions. 	<ul style="list-style-type: none"> a) Developed a document that outlines existing services; b) Secured partnerships with relevant groups for Phase 2; c) Developed a map of services, and identified service gaps. 	<p>(+) Analyzed results from the surveys and incorporated the results into the solutions (19 organizations participated).</p> <p>(+) Organized 3 working meetings with the service providers to develop solutions (30+ organizations participated).</p>
2. Close the gap between the residential/commercial population and the target population (Aboriginal, homeless, etc.) in Cabot Square and the surrounding area.	<ul style="list-style-type: none"> a) Distribute and compare two public surveys to document the level of feelings of safety (before and after Phase 1); b) Encourage the coordination and collaboration of organizations during community events; c) Coordinate the participation of front-line workers in community events. 	<ul style="list-style-type: none"> a) Analyzed the results of a general public survey (101 participants). The second survey will be disseminated at the end of phase 2; b/c) Organized a meeting with community groups and front-line workers, who proposed solutions to improve cohabitation between users of Cabot Square (24 organizations participated). 	<p>(+) Analyzed results from the surveys of other organizations (e.g. organizations that host community events, public institutions, etc.) (18 organizations participated).</p> <p>(+) On behalf of the planning team (Borough of Ville-Marie), collected information from organizations and the general public regarding measures during the re-development phase that will improve the feelings of safety.</p>
3. Develop a Community Safety and Wellbeing Strategy for Cabot Square and the surrounding area.	<ul style="list-style-type: none"> • Compile and centralize information on existing services and the situation of the target population in the area; • Identify the needs of the target population; • Develop a series of objectives and a timeline for Phase 2; • Develop formal agreements with partners for Phase 2; • Evaluate the results of Phase 1 and make recommendations. 	<ul style="list-style-type: none"> a) Produced a report which provides information on existing data, research, safety-related action plans and strategies in Montreal; b) Integrated the results from the surveys completed by the target population in Cabot Square (35 participants) into the proposed solutions; c) Developed a series of objectives and a timeline for Phase 2; d) Prepared a list of committed partners for Phase 2; e) Identified a need for Phase 2 through the results of Phase 2 (solutions and survey results). 	<p>(+) Prepared case studies on Canadian best practices.</p>

c) Results of Phase 1:

The project was a success despite the tight timeline. Below are some of the results, which highlight the importance of ensuring a second phase of the project:

- Shared knowledge between stakeholders;
- Improved understanding of existing services and the various actors in the district, as well as identifying their needs:
 - o Set in motion the first step towards the centralization of available information;
 - o Developed an action plan (phase 2) for the centralization of available information.
- Mobilized organizations and pertinent groups in the district:
 - o Developed solutions jointly;
 - o Secured partnerships for phase 2;
 - o Interest expressed from service providers and other actors to improve collaboration and coordination, and to implement the solutions.
- Consulted the target population and improved understanding of their needs;
- Interest expressed to enhance front-line intervention, with a cultural approach;
- Developed solutions (simple complexity, medium complexity and complex) that respond to the gaps, the needs and the re-development of Cabot Square;
- Produced a collective, coordinated and comprehensive strategy for Cabot Square and its surrounding area: Strategy for Community Safety and Wellbeing.

CANADIAN CASE STUDIES

There are countless promising practices across urban Canada that address similar issues to those raised in this project. The section *Canadian Case Studies* provides a brief overview of some of those practices and offers an idea of the different types of initiatives that may be useful for - and adapted to the realities of - Montreal. This information provides food for thought and inspiration for the Strategy.

The initiatives listed below include small to large scale projects/programs, action plans and strategies that cover a range of issues and offer innovative approaches to homelessness, housing, healthcare and psycho-social support, alternative forms of justice, Aboriginal-focused justice related services, and holistic programs that offer a diversity of services under one roof.

Most of the initiatives presented are from Western Canada, which have large urban Aboriginal populations. Over the years, these areas have experienced a growth in the number of programs geared to address the specific and diverse needs of urban Aboriginal communities.

This is a summary of the document *Canadian Case Studies*. To receive a copy of the document, please contact:

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Alberta

10 Year Plan to End Homelessness (Calgary)

- The Plan is the first of its kind in Canada. It was created in 2008 in response to Calgary's rapidly increasing homeless population.
- Two fundamentals guide the Plan:
 - *Housing First*: homeless people are provided with a home and are offered ongoing support services to help them overcome the challenges that caused them to be homeless.
 - *The business case*: it is less expensive to house homeless people and provide them ongoing services than it is for them to use emergency shelters and services.
- The Plan consists of four strategies: Prevention and Rehousing, Housing, Data and Research and the Non-Profit Sector.
- A primary objective of the Plan is to ensure that no individual is homeless for more than a week by 2018.
- The Plan is funded by the Government of Alberta, the Government of Canada, the City of Calgary, and over 50 private, public and non-profit partners.

Kootenay Lodge (Calgary)

- Established in 2007, the Lodge offers services to homeless Aboriginal people suffering from severe disabilities, such as physical disabilities, brain injuries, addictions and Fetal Alcohol Spectrum Disorder (FASD).
- The Lodge provides specialized housing to 10 Aboriginal adults between the ages of 18-65.
- The Lodge seeks to improve the physical and emotional wellbeing of its patients through counselling, medical treatment, opportunities for family reconnection and culturally appropriate activities.
- Aboriginal and non-Aboriginal workers, including Managers, Caregivers, Rehabilitation Workers and Volunteers, are on site 24 hours.
- The Kootenay Lodge is owned by the Calgary Community Land Trust and is operated by the Universal Rehabilitation Service Agency (USRA).

Streetworks (Edmonton)

- Streetworks was created in 1989 to address the presence of HIV among sex trade workers and injection drug users.
- This collaborative organization bases its values on harm reduction, health promotion and primary health care.
- Streetworks has 6 fixed sites around Edmonton, as well as a van. Its staff members also do outreach work on foot.
- Streetworks provides clean needles, condoms and alcohol wipes to injection drug users and sex trade workers to help prevent the spread of HIV.
- Streetworks offers many programs for the target population, including nursing services, advocacy, a Prison Program and the Natural Helpers Program.
- Funders include the Alberta Community HIV Fund, the Capital Health Authority and Alberta Health.

British Columbia

Lu'Ma Native Housing Society (Vancouver)

- Established in 1980, Lu'ma is an Aboriginal run housing society that provides culturally appropriate dwellings to Aboriginal people with low or moderate income.
- Lu'Ma has expanded its services over the years to better meet its clients' needs.
- Lu'Ma works extensively on Aboriginal homelessness has created the award-winning Aboriginal Patients' Lodge for Aboriginal patients coming to Vancouver for health care and was the first in Canada to introduce Community Voice Mail.
- Funders include the Government of British Columbia, as well as other governmental, private, public and non-profit partners.

The Portland Hotel Society (Vancouver)

- The Portland Hotel Society, created in 1993, provides sustainable housing to people living with concurrent disorders, such as mental illness and addictions.
- 86 adults are provided with permanent, semi-private housing. Each apartment has a toilet and shower and each floor contains a common kitchen, laundry facility and lounge area.
- Mental health workers are on-site 24 hours and a doctor and nurse are on-site several days per week. Additional services include nutritional counselling, acupuncture, art and poetry groups, and communal events.
- Staff members employ the harm reduction model for residents who want to reduce their substance intake.
- The Portland Hotel Society is funded by the British Columbia and Mortgage Corporation and the Vancouver Coastal Authority. Residents pay their rent.

Vancouver's Downtown Community Court

- Established in 2008, the Court has taken a new approach to dealing with offenders who face health and social problems, such as drug addiction, mental health problems and homelessness.
- The Court works with a partnership of organizations from the justice, health and social services sectors to understand and address the root causes of offenders' criminal activity in order to better meet their needs.
- Offenders are provided assistance, such as addictions treatment, housing and employment and educational training, when necessary.
- Depending on the severity of the crime, offenders are either required to perform community service with local organizations and businesses. or are sentenced to jail.

Manitoba

Ni-Apin Program (Winnipeg)

- The Aboriginal Health and Wellness Centre of Winnipeg created the Ni-Apin Program in 2009 as part of the national At Home/Chez Soi Homelessness demonstration project.
- The Program offers housing and support to homeless Aboriginal people suffering from substance abuse and mental health issues.
- Ni-Apin's services are based on Aboriginal values and beliefs, such as the Seven Sacred Teachings and the Ni-Apin Service Wheel.
- Program participants are assisted in finding housing, signing leases, furnishing homes and managing relations with their landlord.
- Once participants have moved in, they are offered ongoing services based on Aboriginal values, such as counselling and training, and health, cultural and economic supports.
- Funding was provided by the Mental Health Commission of Canada (MHCC) until March 2013.

Onashowewin Centre (Winnipeg)

- Onashowewin Centre, established in 2002, is a community-based, non-profit organization that provides urban Aboriginal people with Aboriginal Restorative Justice Services.
- Onashowewin seeks to repair damaged relationships between victim and offender by using Restorative Justice Practices and by working with the community.
- Staff members meet with offenders to identify issues that led to their criminal behaviour. Offenders willing to participate in the program are offered victim/offender mediation, Community Justice Forums and conciliation.
- Offenders often perform community service and partake in a number of in-house community programs and workshops that focus on issues such as making positive life choices, addiction, theft and the roles and responsibilities of Aboriginal men in society. Offenders can also learn how to build a sweatlodge and participate in a sweatlodge ceremony.
- Funding is provided by the Manitoba Ministry of Justice and the Federal Department of Justice via the Aboriginal Justice Strategy.

Ontario

Native Child and Family Services of Toronto

- Native Child and Family Services of Toronto (NCFST), established in 1986, is an Aboriginal run organization and Ontario's only Aboriginal Children's Aid Society.
- NCFST aims to protect Aboriginal children from abuse and supports their healthy development, as well as that of their families.
- NCFST offers a wide range of culturally appropriate services for Aboriginal children, youth and adults in Toronto.

- Some of its services include an Aboriginal Early Childhood Development Program, a school readiness program, the Native Men's Transitional House, and the Youth Skills Training program.
- NCFST's budget exceeds \$20 million and it is funded by the Governments of Canada and Ontario, the City of Toronto, and partners from the private, public and non-profit sectors.

Tungasuvvingat Inuit (Ottawa)

- Established in 1987, Tungasuvvingat Inuit (TI) is a unique organization geared toward empowering and enhancing the lives of Inuit in Ontario.
- TI helps Inuit adjust to southern urban culture through its multitude of Inuit-specific programs and services, as well as its drop-in centre where Inuit can gather, make traditional foods, and come together for a monthly feast.
- TI has five separate locations throughout Ottawa that house an Inuit Family Resource and Health Promotion Centre, a Cultural Centre, an Employment Resource Centre, the Mamisarvik Trauma & Addictions Treatment Program (Transition House), the Tungasuvvingat Inuit Family Health Team Medical Centre, and the Community and Housing support program.
- TI has direct contact with Nunavut and sends workers up north to help local organizations better respond to clients suffering from trauma and substance abuse.
- TI has an annual budget of \$4 million. Funders include the Aboriginal Healing Foundation, the Governments of Ontario, Canada, and Nunavut, the City of Ottawa, the Applied Health Research Networks Initiative and private donors.

Saskatchewan

Community Mobilization Prince Albert

- Community Mobilization Prince Albert (CMPA), created in 2009, is a 'first of its kind' approach that has gained national and international attention.
- Basing its actions on rigorous research and analysis, CMPA prevents crime and violence by bringing together multiple partners to provide short and long-term interventions for individuals at risk of engaging in criminal behaviour.
- CMPA targets the root causes of criminality by offering counselling and options to individuals and families in need, such as those suffering from addictions and mental health issues, or those requiring further education and employment training.
- CMPA consists of two components:
 - *The Hub*, a group of individuals from partnering organizations that meet weekly to identify emerging problems and deliver immediate, coordinated solutions.
 - *The COR* (Centre of Responsibility), the group of professionals that uses research to establish long-term community goals and solutions for crime prevention and reduction.
- The CMPA project is funded by the Province of Saskatchewan, which provides \$450,000 to the COR component. The Hub component operates with existing resources.

My Aunt's Place (Regina)

- Established in 2009, My Aunt's Place (MAP) is an emergency shelter for women and children in need of temporary shelter while seeking longer-term accommodation.
- MAP employs the Housing First model and helps its clients find apartments, provides reference letters to landlords and teaches its clients about the expectations of tenants.
- Clients are taught valuable life skills during their short stay at the shelter, such as cooking nutritious meals and budgeting.
- With a clientele that is 90 percent Aboriginal, traditional Aboriginal cultural activities are offered, such as smudging.

MAPPING OF EXISTING SERVICES

Mapping services is essentially an exercise in compiling information regarding existing services. The mapping outlined below highlights the duplication of services and the evident gaps in the services provided in the area. It is a visual tool that aims to build knowledge. This exercise has several uses:

- Provides valuable information for designing the Strategy (e.g. health, housing, day centre, etc.);
- Provides valuable information to ensure that the Strategy is both appropriate (i.e. corresponds to what already exists), and useful (i.e. addresses the needs and gaps);
- Provides a uniform information bank that organizations, funders, institutions, etc. can use;
- Assists organizations in identifying which other groups offer similar and/or complimentary services;
- Encourages coordination and/or collaboration among organizations/service providers;
- Identifies whether certain types of services are saturated;
- Offers useful information in assessing the situation 'on the ground' regarding the target population, and helps to assess needs.

Table 1 – *Organizations classified by sphere of intervention and service gaps* - details the types of services offered to the target population in Cabot Square. These services are presented according to a trajectory and are organized in categories to reflect the types of services offered to the target population, in accordance with 'spheres of life/levels of organization'. In order to conduct the mapping exercise, the project team decided that the 'level of organization' and stability of a person (i.e. target population) was a good criterion for classification because it has been observed that the central element that characterizes an individual's trajectory is mainly related to the degree of organization in his/her life.

The mapping has been classified according to the different stages within the trajectory of the target population. These include:

- A. Harm reduction (presence) - Front-line workers ensure that a person's¹ lifestyle does not have too many negative impacts on the individual and his/her entourage (individuals in that person's life).
- B. Social instability (accompaniment) - Front-line workers accompany the person in the early stages of recovery and taking back control over his/her life. In addition, they help restore confidence in the healthcare system, the community and society in order to assist the individual in taking control of his/her future.
- C. In the process of gaining social stability (support) - Front-line workers are present to guide the person in his/her efforts. Having created a more stable environment and lifestyle, the person requires less physical and moral support and/or counselling.
- D. Stabilized in society (network support) - The person is autonomous and has stabilized his/her lifestyle. He/she continues to seek out medical or social appointments himself/herself. Front-line workers are present in order to prevent a relapse.

Table 1 also outlines the service gaps, which include:

- Identification cards (At all moments in the trajectory)
- Mental health (Harm reduction – at the beginning of the trajectory)
- Housing/accommodation (Harm reduction - at the beginning of the trajectory)
- Finance/ revenue (Stabilized in society – at the end of the trajectory)
- Justice (Stabilized in society – at the end of the trajectory)
- Hygiene (Stabilized in society – at the end of the trajectory)
- Family (In the process of gaining social stability and Stabilized in society – at the end of the trajectory)

¹

Target population

It is important to note that only the CLSC des Faubourgs offers an identification card service for people without a fixed address. All organizations consulted in this project refer to the same place. No other organization provides this essential service, which is related to the larger issue of the lack of access to social support services due to the lack of identification cards.

In Table 1, it appears that in many cases there are services available; however, this does not necessarily suggest that there is an adequate or complete level of support. As in the case of physical health, it appears to be filled with services, yet the reality remains that access to medical services is limited. The Strategy aims in part to fill some of the gaps presented in the table, which is in turn reflected in the types of solutions proposed (i.e. health, housing, and justice related services). It is also important to note that some people do not need services at all stages; however, the importance of having an available breadth of services is necessary due to the fact that the target population has different types and levels of need.

Table 2² - *Organizations classified by sphere of intervention* - explains in detail the different types of services offered by service providers, organized by spheres of life and type of service. In order to avoid conflating the information, the project team organized the information by spheres of life, in accordance with the type of service and specific stages throughout a person's trajectory.

Three types of services were used:

- Direct services - organizations that provide services in this sphere of life, e.g. Médecins du monde, provide physical health services directly to the target population;
- Support - services that are not directly in response to the sphere of life, but nevertheless provide support to the person within this sphere;
- Referral/accompaniments - includes all organizations that work with the target population to provide assistance within this sphere of life.

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In the next stages of the project, the mapping exercise will be used to prepare proposals for each focal point in the Strategy. The information will be further analyzed in detail to explore the situation of each service, and therefore to ensure that pertinent information is included.

Table 1: Organizations classified by sphere of intervention and service gaps

Document prepared by the YMCA (Dialogue)

	A	B	C	D
Identification cards	No service	No service	No service	No service
Physical health	Médecins du monde, Ka'wáhse Street Patrol, Cactus, Stella	Médecins du monde, Ka'wáhse Street Patrol, Cactus, Stella	Médecins du monde, Cactus, Stella	Ka'wáhse Street Patrol
Mental health	No service	Nazareth House, Salvation Army – Booth Centre, Chez Doris	Nazareth House, Salvation Army – Booth Centre, Chez Doris, Native Women's Shelter of Montreal	Nazareth House, Salvation Army – Booth Centre
Housing / accommodation	No service	Nazareth House, Native Women's Shelter of Montreal, Salvation Army – Booth Centre, Chez Doris	Nazareth House, Native Women's Shelter of Montreal, Chez Doris, Salvation Army – Booth Centre	Salvation Army – Booth Centre, Nazareth House
Finance/ revenue	Face à Face, Chez Doris	Face à Face, Chez Doris	Chez Doris	No service
Consumption/ addiction	Groupe Harmonie, CLSC Métro, Cactus, Stella	Groupe Harmonie, Salvation Army – Booth Centre, CLSC Métro Native Women's Shelter of Montreal, Cactus, Stella	Groupe Harmonie, CLSC Métro Native Women's Shelter of Montreal, Cactus, Stella	Groupe Harmonie
Social network (Belonging)	St-James Drop-In Centre, Groupe Harmonie, L'Itinéraire, Salvation Army – Booth Centre, Face à face Exeko, Ka'wáhse Street Patrol, Open Door	Destination centre-ville, St-James Drop-In Centre, Nazareth House, Groupe Harmonie, L'Itinéraire, Salvation Army - Booth Centre – Booth Centre, Face à face, Exeko, Chez Doris, Ka'wáhse Street Patrol, Native Women's Shelter of Montreal, Open Door	Destination centre-ville, St-James Drop-In Centre, Groupe Harmonie, Nazareth House, L'Itinéraire, Salvation Army – Booth Centre, Face à face, Dialogue (YMCA), Chez Doris, Ka'wáhse Street Patrol, Native Women's Shelter of Montreal, Open Door	Groupe Harmonie, Destination centre-ville, Nazareth House, Salvation Army – Booth Centre, Y des femmes de Montréal, Ka'wáhse Street Patrol
Justice	Ka'wáhse Street Patrol	Ka'wáhse Street Patrol	Ka'wáhse Street Patrol	No service
Hygiene	Ka'wáhse Street Patrol, Open Door, Native Women's Shelter of Montreal, Dialogue (YMCA)	Ka'wáhse Street Patrol Open Door Chez Doris Dialogue (YMCA)	Ka'wáhse Street Patrol Open Door Chez Doris Dialogue (YMCA)	No service

Support network (friends, front-line workers, etc.)	L'Anonyme, Nazareth House, St-James Drop-In Centre, Dialogue (YMCA), Face à Face Ka'wáhse Street Patrol, Open Door, Cactus, Stella	L'Anonyme, Nazareth House, St-James Drop-In Centre, Dialogue, Face à Face, Ka'wáhse Street Patrol, Open Door, Cactus, Stella	L'Anonyme, Nazareth House, St-James Drop-In Centre, Dialogue (YMCA), Face à Face, Ka'wáhse Street Patrol, Open Door, Cactus	Nazareth House, Dialogue (YMCA), Face à Face, Ka'wáhse Street Patrol
Family	CLSC Métro, Exeko, Cactus	CLSC Métro, Exeko, Cactus	No service	No service
Activities/leisure	Ka'wáhse Street Patrol, St-James Drop-In Centre, Open Door, Exeko, Stella	Ka'wáhse Street Patrol, Médecins du Monde, Nazareth House, St-James Drop-In Centre, Salvation Army - Booth Centre – Booth Centre, Open Door, Chez Doris, Native Women's Shelter of Montreal, Exeko Destination centre-ville, Dialogue (YMCA), Stella	Ka'wáhse Street Patrol, Médecins du Monde, Nazareth House, St-James Drop-In Centre, Salvation Army – Booth Centre, Open Door, Chez Doris, Exeko, Destination centre-ville, Dialogue (YMCA)	Ka'wáhse Street Patrol, Médecins du Monde, Nazareth House, Salvation Army – Booth Centre, Destination centre-ville
Mental and emotional state	Ka'wáhse Street Patrol, Open Door, CLSC Métro, Dialogue (YMCA), Cactus, Stella	Ka'wáhse Street Patrol, Open Door, CLSC Métro, Dialogue (YMCA), Cactus, Stella	Ka'wáhse Street Patrol, Open Door, Dialogue (YMCA)	Ka'wáhse Street Patrol, Dialogue (YMCA)
Employability and education	L'Itinéraire, Open Door	Destination centre-ville L'Itinéraire, la Société de développement sociale de Ville-Marie, Open Door	Destination centre-ville, L'Itinéraire, la Société de développement sociale de Ville-Marie, Open Door	Destination centre-ville, la Société de développement sociale de Ville-Marie, Le Y des femmes de Montréal
Food	People's potato, St-James Drop-In Centre, Open Door	People's potato, St-James Drop-In Centre, Open Door	People's potato, St-James Drop-In Centre, Open Door	People's potato, St-James Drop-In Centre, Native Women's Shelter of Montreal, Open Door

REVIEW OF EXISTING DATA, RESEARCH, ACTION PLANS AND STRATEGIES

The following information is the executive summary of the document *Review of existing data, research, and safety action plans and strategies to inform the Strategy for Community Safety and Wellbeing*. To receive a copy of the document, please contact:

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The first step in developing the Strategy for Community Safety and Wellbeing consisted of gathering relevant and existing information on Cabot Square and the target population. This information provided in-depth knowledge of the actual situation and provided a basis for the Strategy. Further, the information ensured that the Strategy was developed in accordance with existing efforts. From this information, the report *Review of existing data, research, and safety action plans and strategies to inform the Strategy for Community Safety and Wellbeing* was developed. The report provides an overview of the general feelings of safety in Cabot Square, the challenges faced by the target population, and actions carried out by various levels of government and other actors with the aim of improving urban safety.

The report is divided into several sections:

- A socio-demographic portrait of the Peter-McGill district, where Cabot Square is located;
- A portrait of Cabot Square, including an overview of crime and violence in the district;
- An overview of challenges faced by the Aboriginal population in Montreal and issues related to homelessness;
- Safety strategies and action plans at the provincial, municipal, and community level;
- Recommendations for improving safety of the target population, as outlined in the literature.

A SUMMARY OF THE CONSULTATIVE PROCESS

a) The five surveys disseminated

Survey 1

Title: Safety and wellbeing in Cabot Square

Participants: The organizations that offer services to the target population

Dissemination date: March 16th to April 15th 2013

Dissemination method: Internet / email

The survey was completed by 19 organizations that offer services to the target population. Among these participants, 11 organizations work directly in Cabot Square and the surrounding area (these 11 groups are identified with a * below). The 19 groups that completed the survey include:

- CACTUS- Montréal*
- Connexion et SIDEp (CLSC Métro)*
- L'Anonyme*
- Exeko*
- Médecins du monde*
- Dialogue (YMCA) *
- The Native Friendship Centre of Montreal*
- The Native Women's Shelter of Montreal*
- Groupe Communautaire L'itinéraire
- Équipe mobile de référence et d'intervention en itinérance (EMRII)*
- Chez Doris*
- Stella*
- Nazareth House
- Open Door
- People's Potato
- St-James Day Centre
- Makivik
- Groupe Harmonie
- Salvation Army - Booth Centre

Needs:

According to these organizations, their main needs are related to improving the services offered to the target population, including receiving more training and having a better understanding of all the services offered.

Most of the requests for training are related to Aboriginal realities such as violence, trauma, culture, issues faced by Inuit women, northern realities, and cohabitation between Aboriginal people and non-Aboriginal people in the context of the services offered.

The organizations have also requested a resource guide highlighting the services offered to the target population, which could be disseminated to this population in order to encourage personal responsibility. Moreover, a detailed resource guide was suggested for the use of front-line work and referrals.

The survey participants also described the following as secondary needs:

- Offer more space/locations where services can be offered, and increase the number of shelters for the target population;
- Improve access to physical and mental health services, including detoxification services;

- Support organizations by ensuring regular funding;
- Develop education and training programs, as well as offer more jobs to the target population;
- Ensure a continuous presence of a front-line worker in Cabot Square.

Difficulties or limitations encountered:

According to the 12 organizations that offer services in Cabot Square, the difficulties or limitations they face in conducting their work in Cabot Square include:

- Substance abuse on site and intoxication which can cause aggressive behaviour;
- Inappropriate intervention style conducted by the police;
- Displacement of the individuals due to the closing of Cabot Square, which will create difficulties in reaching the target population.

Secondly, other limitations or difficulties encountered were provided:

- Lack of free equipment;
- Difficulty reaching the target population;
- Lack of collaboration between organizations and knowledge of other services;
- Lack of mental health services;
- Lack of housing;
- Gap between the community and the individuals;
- Lack of tailored services to different cultures, specifically for Aboriginal people.

Proposed solutions:

The organizations that offer services to the target population propose the following solutions:

- Increase the number of social housing in the area, supervised housing, housing with community support services and monitoring supports. There is also a specific need for housing for intoxicated people;
- Offer mobile health clinics with a team of front-line workers and nurses, initiate or consolidate a response team made up of different organizations, more street workers that have a daily presence in the park, community support services tailored to Aboriginal men and women (in the context of domestic violence);
- Open a new day center in the area or expand the mandate of an existing one in the area, which would be open for 7 days and evenings/week and would offer Aboriginal cultural activities.

Other solutions proposed in this survey include:

- Increase the number of services adapted to urban Aboriginal people living in vulnerable situations;
- Create a meeting place or a positive project for the target population;
- Ensure ongoing presence in the park in order to make it more welcoming;
- Develop an awareness campaign for the general public;
- Improve and increase police services (training, etc.);
- Improve communication between partners.

The majority of organizations supported the idea of hiring an Aboriginal front-line worker to work only in Cabot Square.

Survey 2

Title: Safety and Wellbeing in Cabot Square

Participants: 18 organizations interested in the project, but who do not directly work with the target population

Dissemination date: March 22nd to April 15th 2013

Dissemination method: Internet / email

The survey was completed by 18 organizations that work in the neighbourhood, host activities in the Square, conduct research related to the target population, and/or develop strategies to improve safety and wellbeing. Among these participants, 9 organizations work directly in Cabot Square in terms of hosting or participating in public events and activities (these 9 organizations are identified with an * below). The organizations that filled out this survey include:

- SAESEM (Éco-quartier Peter-McGill)*;
- Shaughnessy Village Association*;
- YWCA Montreal*;
- Peter-McGill Community Council*
- ASCCS (Tandem Ville-Marie)*;
- Innovation Jeunes*;
- Association des familles du Parc Percy-Walters*;
- Division des sports, des loisirs et du développement social de l'Arrondissement de Ville-Marie*;
- The Montreal Children's Library*;
- Direction de la diversité sociale de la Ville de Montréal;
- CSSS Jeanne-Mance;
- Société de Transport de Montréal;
- Société de développement sociale de Ville-Marie;
- Makivik;
- Quebec Native Women;
- Module du Nord Québécois;
- Spectre de rue;
- Redwolf Community Strategies.

Difficulties encountered:

The 9 organizations that work directly in Cabot Square have identified several difficulties that they've encountered during their events and activities. The main difficulties include a strong presence of homeless people or people under the influence of alcohol or drugs, the fact that residents are bothered by the presence of the target population, the division between event participants and the target population, the fact that it is hard for residents to 'take back' the space, the presence of incivilities, and the general uncleanliness of the space.

Among these organizations, the majority would like to be more informed of Aboriginal realities. Approximately 6 out of 9 organizations requested general information on the resources offered to this population, whereas 3 organizations requested specific tools such as training and information on Aboriginal cultures.

Feelings of safety: Feelings of safety were evaluated among the organizations that work directly in Cabot Square. The results are as follows:

On a scale of 1 to 5 (1 = "I do not feel safe in Cabot Square" 5 = "I feel very safe in Cabot Square")	Answers
1	1
2	1
3	4
4	2
5	0
Total	8

The main results contributing to the feeling of insecurity as expressed by these organizations include:

- Aggressive behaviour as well as a feeling of "gang" presence;
- Conflicts between "gang" members, and alcohol consumption leading to violence (specifically near the entrance of the metro);
- Lack of lighting or lack of a children's play area.

It is important to note that some participants mentioned that they would feel safer in the Square if it was more used.

Proposed solutions: The main solutions proposed by the 18 organizations to improve safety and wellbeing in Cabot Square and to improve services for the target population include:

- More housing, emergency shelters, and more front-line workers;
- Redevelop the square in order to make the physical space more attractive (including hosting more events and improving lighting);
- Develop more resources for Aboriginal people (e.g. day centers, etc.);
- Offer training to organizations and develop a complete communication plan to improve dialogue between all stakeholders (i.e. police officers, front-line workers, residents, etc.).

According to the 18 organizations, a safety strategy would encourage stakeholders to share a common vision and improve the feeling of safety together, and thus could promote cohabitation among all the different space users in Cabot Square. They suggested that the strategy would also help revitalize the area, allow the general population to get to know the Aboriginal population as well as to invite all park users to participate during activities.

Survey 3

Title: Safety and wellbeing in Cabot Square

Participants: The target population

Dissemination date: March 21st to May 2nd 2013

Dissemination method: In person

Among the 35 surveyed participants; 29 were Aboriginal, 18 were men and 17 were women, and 26 were not born in Montreal.

The primary need identified by the target population was an increase in Aboriginal specific services. Half of the participants believed that there were not enough services for Aboriginal people in this area.

Feelings of safety: In terms of crime levels, 18 out of the 35 participants declared that they had been victims of violence and/or a crime in Cabot Square. Moreover, 22 of the 35 participants have either been arrested in Cabot Square or confronted by the police, while 12 had not experienced any confrontation with the police.

Feelings of safety were evaluated and the main reason for feeling unsafe was violence and intoxication (i.e. alcohol).

<i>On a scale of 1 to 5 (1 = "I do not feel safe in Cabot Square"; 5 = "I feel very safe in Cabot Square,"</i>	<i>Results in %</i>
1	12%
2	12%
3	15%
4	29%
5	32%
Total	100%

Re-development of Cabot Square

Approximately 20 out of 35 participants were not aware of the plans for re-development and that the park would be closed during construction. In regard to how this will affect them, the most popular answer was that they would 'miss their friends and family' if they lost their gathering space.

Proposed solutions:

According to the surveyed target population, the solutions to make Cabot Square a safer place as well as a place where Aboriginal people and other populations could gather together and feel a sense of community include:

- Make the space more welcoming (e.g. more lighting, more benches, a playground for children);
- Host more community events (e.g. traditional festivals, Pow Wows or discussions to share their problems):
 - o 29 of 35 participants believed that it would be a good idea to have more First Nations and Inuit cultural activities in Cabot Square;
 - o 26 out of 35 participants said they would be interested in participating in these events;
 - o 10 of 35 said they have talents that they would like to showcase during these activities (include making traditional arts and crafts, throat singing, Pow Wow dancing, Inuit feast, poetry).

The majority of participants (29 of 35) believe that having an Aboriginal worker on-site in the park would improve safety and wellbeing.

Survey 4

Title: Safety and wellbeing in Cabot Square

Participants: The general public

Dissemination date: March 26th to April 27th 2013

Dissemination method: Internet

Approximately, 101 participants including 79 residents completed this survey. Among the 22, 12 participants work or study in the area, while 9 participants visit Cabot Square but are not residents, workers or students in the area. The average age of participants was 49 years old and 61% of participants were women while 39% were men. Primarily, these participants described their activity in Cabot Square as walking through Cabot Square to get to another destination. Secondly, the participants described attending public events and activities in this space, or avoiding spending time in Cabot Square.

Feelings of safety:

Feelings of safety were evaluated and the main reasons that contributed to a feeling of insecurity were described as a lack of cleanliness, the presence of intoxicated persons or public consumption of alcohol, and the presence of persons with anger management issues.

<i>On a scale of 1 to 5 (1 = "I do not feel safe in Cabot Square"; 5 = "I feel very safe in Cabot Square,"</i>	<i>Results in %</i>
1	26%
2	28%
3	28%
4	16%
5	2%
Total	100%

Proposed solutions:

In order of popularity, the primary solutions described by the general public were:

- More police intervention or other forms of surveillance;
- Front-line help and social resources, housing or centres;
- Zero tolerance for alcohol or drug consumption;
- More public activities or events (e.g. markets, pétanque, re-open the hut, games for children, etc).

According to the general public, the main needs of the target population include, primarily, having access to services such as health services, alcohol and drug treatment, social support and front-line support. However, only 4 participants identified the importance of respecting the target population, the need for better cohabitation between all populations, and the need to end stigmatization. The same number of participants described the solutions as removing the target population from Cabot Square, stating that this population should not be publicly visible or should be quarantined.

Finally, the majority of participants (66 of 101) replied that they would like to participate in one or several of the following actions to contribute to improving safety and wellbeing in Cabot Square: participate in collective clean-up days; participate in a resident committee focusing on safety issues; attend awareness or information sessions regarding Aboriginal realities and cultures; and help organize or host public events and activities.

Survey 5

Title: Cabot Square Redevelopment

Participants: The general public and organizations that participated in surveys 1 and 2

Dissemination date: March 16th to April 27th 2013

Dissemination method: Internet

This survey has been completed by 101 participants from the general public and 36 organizations, with a total of 137 survey participants.

The majority of participants (93 of 137) were not aware of the plans for the re-development of Cabot Square, as described in the Plan particulier d'urbanisme (PPU) des Grands Jardins for the Cabot Square sector (a plan created by the City of Montreal).

In order of popularity, the improvements that could contribute to improving feelings of safety in Cabot Square include:

- Permanent use of the building in the square (e.g. coffee shop, small business, information kiosk, etc.);
- Better lighting;
- Add garbage bins;
- Renovate the ground finishings with soft surfaces (grass, crushed stone, etc.);
- Install free Wi-Fi;
- Add furniture (tables, benches, etc.).

Finally, the majority of participants stressed the necessary of hosting more public activities in order to improve feelings of safety in Cabot Square. Many participants also stated that they preferred that the hut in the Square be open all year round instead of only during summer months.

b) The three consultative work meetings

Participating organizations:

The Native Women's Shelter of Montreal, the Native Friendship Centre of Montreal, CACTUS-Montréal, CLSC Métro/CSSS de la Montagne, Groupe Harmonie, Groupe Communautaire L'itinéraire, Salvation Army - Booth Centre, Chez Doris, Nazareth House, EMRI et CSSS J-Mance/CLSC Faubourg, Exeko, Makivik, the Borough of Ville-Marie, NETWORK , SPVM - PDQ 12, Projets autochtones du Québec, Face à face, Agence de la santé, Médecins du monde, Stella, Open door, YMCA (Dialogue), City of Montreal, Peter-McGill Community Council, YWCA, Tandem Ville-Marie, Société de développement sociale de Ville-Marie, Quebec Native Women, Secrétariat aux affaires autochtones du Québec, Health Canada, Église Cathédrale Social service society, St-James Day Centre, the International Centre for the Prevention of Crime, Éco-quartier Peter-McGill, the Children's Library, Institut culturel Avataq, a resident living in Peter-McGill (who sits on the security committee at the Borough of Ville-Marie), Concordia University, and other groups.

First consultative work meeting: May 8th at 12pm

Objectives:

- Present a portrait of Cabot Square (from the point of view of the target population as well as the organizations that offer services to this group);
- Develop solutions to improve safety and wellbeing in Cabot Square, focusing on a collaborative and coordinated approach, as well as to address the closing of Cabot Square during the re-development phase (aimed for 2014).

Results: Specific solutions to improve the safety and wellbeing were identified in each of the following categories:

1. Simple solutions: does not require additional resources and is deliverable within 1-2 months;
2. Medium term solutions: requires a small amount of additional resources and is deliverable within the next year or so;
3. Complex solutions: requires a considerable amount of additional resources and is deliverable in 2 years or more.

The organizations identified more than 70 solutions aimed at supporting front-line services, maximizing existing services, increasing the size of gathering space for the target population, (day centres and outdoor spaces), improving health services, housing services and cultural services, increasing communication between all stakeholders, prompting cohabitation between all users of the space, etc.

Second consultative work meeting: June 19th at 12pm

Objective: Develop the supported solutions that were proposed May 8th, develop the strategy and create steering committees (follow up from May 8th).

Results: The organizations have identified and developed 4 key solutions to improving the safety and wellbeing in Cabot Square:

1. Front-line coordination and support;
2. Offer a gathering space for the target population;
3. Improve health services;
4. Improve housing services.

Third consultative work meeting: June 19th at 2:30pm

Objective: Cohabitate, collaborate, and share information between all the community groups (the organizations that host events and activities in the Square) and groups that offer services to the target population in order to improve the feeling of safety in Cabot Square and the surrounding area.

Results: The organizations identified two objectives to improve the cohabitation between the users of Cabot Square:

1. Improve communication between all stakeholders;
2. Increase the general public's awareness and involve the target population.

PUBLIC SAFETY

The target population:

According to the results of survey 3, which address feelings of safety and wellbeing of the target population in Cabot Square, 22 participants claimed that they had been arrested or had been confronted by the police in Cabot Square. The main reason for the arrest or interaction with the police was due to drinking³ on public property, and laying or loitering while drunk on a public thoroughfare. Among the proposed solutions to improve feelings of safety in Cabot Square and sense of community, the target population (who participated in the survey) suggested that the presence of an Aboriginal security guard or police officer would increase safety.

Organizations:

According to the 12 organizations that offer services to the target population directly in Cabot Square, certain types of police intervention were described as affecting and limiting their work with the population. Further, it was suggested that the increased police presence in Cabot Square was provoking a displacement of the target population and resulting in difficulties in reaching that population (and engaging in interventions, meetings, etc.). Moreover, it was claimed by some that police intervention was repressive and, in turn, hindered their front-line work.

There was also concern about police officers seizing consumption material since it leads to an increase in sharing of materials, and thus more risk-taking by the population using consumption material. In addition, the organizations suggested that police officers were engaging in racial profiling of certain individuals. It was proposed by several organizations that it would be useful to work with the police to promote preventive and non-repressive methods of intervention.

General public:

In the survey disseminated to the general public, 29% of participants reported that police interventions or other types of surveillance would enhance their feelings of safety in Cabot Square.

SPVM (Montreal Police Service) – Station 12:

On September 17, 2012, a press release was issued by the police station 12, entitled "Operation Square". The press release aimed to inform the public of an increase in police presence and interventions in the area as a means of reducing crime and incivilities and also to assist in referring people in need towards community-based and medical resources. It was noted that the goal of this initiative was to respond to complaints from citizens and business owners in the district.

³

Some participants referred to reason for arrest or police confrontation as due to 'public intoxication'.

THE IMPLICATIONS OF RE-DEVELOPMENT

a) Displacement:

Organizations that host events in Cabot Square and its surrounding area were concerned about the possible displacement of the target population during the re-development of Cabot Square. Specifically, they were concerned that there might be displacement towards Hector-Toe-Blake Park, commercial/shopping centres, public transport areas, their homes, alleyways, etc.

The surveyed target population stated that they were worried about losing their gathering space where they meet with friends and family. They suggested that if the Square was closed, they would visit other public spaces such as Old Montreal, Hector-Toe-Blake Park, Places-des-Arts, Peace Park, or shelters and day centres such as the Native Friendship Centre of Montreal.


Organizations that offer services to the target population suggested that the possible closing of Cabot Square would lead to the displacement and scattering of the target population, which would hinder the provision of services and may isolate the population, possibly leading to more precarious situations. For instance, it will become difficult to locate individuals who have been tested positive to an STI and/or to deliver the results to that individual.

Further, a displacement of the target population to other districts, such as the Borough of South-West Montreal, will break the links between the front-line workers and the target population, as many organizations have limited mandates that are restricted to certain areas of downtown Montreal.

In addition, since the target population primarily uses "word of mouth" to spread information about available resources, organizations offering services to the population are concerned about their ability to share information if the population no longer gathers in Cabot Square.

b) After re-development:

As described during the consultative working meetings regarding the re-development of Cabot Square, organizations are concerned about the gentrification of the district and 'expulsion' of the target population. In this case, the organizations that offer services to the target population question the future of the target population: will they be welcomed back in Cabot Square? In the survey results, the organizations that provide services to the target population stated that re-development will enhance divisions that are already present between the general public and the target population. In addition, considering that a lack of understanding regarding the realities faced by the target population already exists, as evidenced in the general public survey results, phone calls to the police and repressive intervention may increase and have an impact on front-line work.

* The actions outlined in the Strategy that address issues related to re-development (i.e. closing of Cabot Square) are identified by a .

STRATEGY FOR COMMUNITY SAFETY AND WELLBEING

a) Support

The development of a strategy is one step in a series of steps towards achieving the final objective: the improvement of safety and wellbeing for all users of Cabot Square and its surrounding area. In order to do so, the solutions in the strategy must be realized.

In regards to the project, the solutions were developed in accordance with existing action plans and strategies (see section *Review of existing data, research, and safety action plans and strategies to inform the Strategy for Community Safety and Wellbeing* and the Strategy below). It is for this reason that the Cabot Square project team proposes to formally integrate the solutions within existing government action plans and strategies, which would ensure the implementation of the solutions as well as the coordination of efforts to maximize impact.

Presented below are two types of demands of support for the City of Montreal, the Government of Quebec, and the Government of Canada, which would ensure the realization of this Strategy:

- 1) Financial support for organizations to implement the specific solutions, depending on their expertise;
- 2) Integration of specific solutions into existing action plans and strategies produced by the City of Montreal, the Government of Quebec, and the Government of Canada.

It is important to note that following the transition period of this project (July 15 – August 16), some of the solutions will be developed into proposals, which will then be presented to the funders to encourage their support and engagement.

The project team recommends that the actions within the Strategy are implemented in accordance with existing action plans and strategies listed below, and that the solutions be supported by the (municipal, provincial, federal) government.

Solution 1 – Front line coordination and support

Mission	Actions	Current state	Proposed steps	Required partners and conditions
<p>Support the front-line in order to maximize existing services and ensure that front-line workers can continue to work with the target population during Cabot Square's re-development phase</p> <p>←</p>	<p>Support front-line workers who already work with the target population and offer a private space for consultations between workers and the population (Open Door) that will act as a meeting space to share information between front-line workers from different organizations. ←</p> <div data-bbox="338 1227 653 1338" style="border: 2px dashed #008080; padding: 5px; margin: 10px auto; width: fit-content;"> <p>City of Montreal</p> </div>	<p>A) A private room is already informally offered by Open Door and some front-line workers already use it on a walk-in basis (e.g. Médecins du monde, Cactus, Harmonie, Face à Face, Dialogue, etc.).</p> <p>Open Door proposes to formalize an agreement with interested front-line workers in order to offer services at fixed intervals for the benefit of the target population.</p> <p>B) A front-line committee organizes medical examinations and tests every three months in Cabot Square. Members of the committee include: CACTUS, Médecins du Monde, Dialogue (YMCA), Stella, Anonyme, CSLC Métro, Salvation Army – Booth Centre, and others.</p> <p>To date, various pamphlets have been created by organizations (Native Women's Shelter, NETWORK, Native Friendship Centre, etc.).</p>	<p>A)</p> <ul style="list-style-type: none"> - Rent a room from Open Door; - Prepare the room to accommodate private consultations and medical examinations (for example, add a door, etc.); - Invite all the front-line workers to use the room, each resource can bring its expertise to this shared space; - Create an occupancy schedule to ensure the room's efficient use and display the schedule in the day centre if possible. <p>B)</p> <ul style="list-style-type: none"> - Support the front-line Cabot Square committee and encourage the inclusion of all front-line workers working in Cabot Square in the committee; - Encourage sharing of Cabot Square schedules to ensure proper coverage of services and to avoid duplication (e.g. create a Google agenda with front-line workers' Cabot Square schedules). When possible, share schedule with target population; - Create a pamphlet of resources as a reference tool for participants with a specific section for Aboriginal people and one for 	<p><i>Registered organizations:</i> Chez Doris, Native Friendship Centre of Montreal, Exeko, Médecin du monde, Salvation Army – Booth Centre, Nazareth House, Native Women's Shelter of Montreal, Stella, YMCA-Dialogue, Ville-Marie Borough, CACTUS, NETWORK, Projets autochtones du Québec.</p> <p><i>Conditions:</i></p> <ul style="list-style-type: none"> - Room rental - Close collaboration with a day centre; - Support for the day centre and front-line workers; - Coordinator to ensure implementation of proposed steps.

			<p>Cabot Square;</p> <ul style="list-style-type: none"> - Ensure that essential services are offered directly in Cabot Square by using the park's hut and ensuring the continuous presence of front-line workers. ← 	
	<p>Maximize the expertise of and provide tools like training sessions to front-line workers working with the target population in order to provide appropriate and personalized services.</p> <div data-bbox="338 748 653 964" style="border: 2px dashed #008080; padding: 10px; margin: 10px auto; width: fit-content;"> <p style="text-align: center; color: #008080;">City of Montreal</p> <p style="text-align: center; color: #008080;">Quebec Government</p> </div>	<p><i>A few groups that already offer pertinent training:</i></p> <ul style="list-style-type: none"> - NETWORK and McGill First People's House: general information on the Aboriginal community; - Makivik: the realities in the North and its many dimensions; - Exeko: inclusion through innovation in culture and education. <p><i>Upcoming developments:</i> The NETWORK and ICPC is organizing a training that will be offered to SPVM Station 12. The training will address the following subjects: the Montreal Aboriginal population (the different nations and communities, culture and history); the obstacles faced by Aboriginal in relations to urban living; the services that are offered to the Montreal Aboriginal community; Canadian models of collaboration between police officers and Aboriginal populations; suggestions to improve the relationships between the police and the Montreal urban Aboriginal community.</p>	<ul style="list-style-type: none"> - Survey the training needs of employees working with the target population (the list of topics from June 19th should be explored: sexual violence, harm reduction, the treatment of women, culturally appropriate front-line work with Aboriginal people); - Encourage victim sensitivity training in hospitals and clinics; - Promote knowledge and expertise training and survey organizations' ability to provide training or information sessions (e.g. the Native Women's Shelter of Montreal could offer training on front-line work with Aboriginal people); - Organize group training sessions; - Ensure the completion of the police training in collaboration with the NETWORK and ICPC. 	<p><i>Registered organizations:</i> Chez Doris, Native Friendship Centre of Montreal, Exeko, Nazareth House, YMCA, NETWORK, Native Women's Shelter of Montreal, Makivik, Projets autochtones du Québec.</p> <p><i>Conditions:</i></p> <ul style="list-style-type: none"> - Material, food, honorariums for training sessions; - Coordinator to ensure implementation of proposed steps.

Integrate solution 1 in the following actions plans and strategies:

- Ville-Marie Plan d'action en sécurité urbaine;
- Ville de Montréal - Plan d'action cible en itinérance (2010);
- PPU du Quartier des grands jardins;
- Plan d'action gouvernemental 2012-2017 en matière de violence conjugale (volet autochtone);
- Plan d'action gouvernemental 2008-2013 en matière d'agression sexuelle;
- Plan d'action interministériel en itinérance 2010-2013.

Solution 2 – Offer a gathering space for the target population

Mission	Actions	Current state	Proposed steps	Required partners and conditions
<p>Provide a gathering space for the target population during evenings and weekends</p>	<p>Extend the hours of operation of a nearby day centre, earlier in the morning and later in the afternoon and evening and open a day center on weekends for the benefit of the target population. ←</p> <p>Increase the services offered inside the day center in order to respond to the needs of the target population, including culturally appropriate activities and services for Aboriginal people. The centre must be ←</p>	<p>Here are a few day centres as well as their hours of operation. The following list represents those consulted during this process:</p> <ul style="list-style-type: none"> - Chez Doris – for women (every day from 8:30am to 3pm, except every second Wednesday from 8:30am to 2pm, and Fridays during the summer from 8:30am to 1:30pm); - Native Friendship Centre of Montreal – for young Aboriginal people (Mondays to Thursday from 11am to 6pm and Fridays from 11am to 4pm) and for Aboriginal who are homeless or at risk (Monday, Tuesday and Thursday from 10am to 6pm, Wednesday from 10am to 9pm, and Friday from 9am to 4pm) - Open Door – available to everyone (Monday to Friday from 8:30am to 2:30pm); 	<p>The following steps target Open door day centre since it is located within steps of Cabot Square and is available to the target population, including men, women, Aboriginal people, non-Aboriginal people, and intoxicated persons. The target population already visits this day centre in large numbers to eat, gather with friends, use computers, rest, take part in chapel activities, etc.</p> <p>A steering committee must be created to ensure the implementation of these steps:</p> <ul style="list-style-type: none"> - Immediately increase the hours of operation based on the availability of the space (early morning and late afternoon) and identify an additional location for the hours when the centre's current location is not available (including evenings and weekends): - Offer a space to rest (12 beds offered in 8 hour intervals during day centre hours): - Coordinate the delivery of additional food that will be needed to offer second and third meals per day (in collaboration with Salvation Army); 	<p><i>Registered organizations:</i> Open Door, Chez Doris, Native Friendship Centre of Montreal, YWCA, Exeko, Peter-McGill community council, Native women's shelter of Montreal, Projets autochtones du Québec.</p> <p><i>Conditions:</i> - Human resources necessary to staff the centre</p>

	<p>accessible to intoxicated persons.</p> <div style="border: 1px dashed blue; padding: 5px; width: fit-content; margin: 10px auto;"> <p>City of Montreal</p> <p>Government of Canada</p> </div>	<ul style="list-style-type: none"> - The Red Roof available to everyone (Monday to Friday from 8am to 1pm) - St-James Day Centre: available to everyone but must sign up and be approved as a member (Monday to Friday from 9am to 5pm). <p><i>Since most day centres located near Cabot Square close in the afternoon and are not open on weekends, the target population tends to be more present in Cabot Square during the evenings and on weekends.</i></p>	<ul style="list-style-type: none"> - Since the day centre is visited by a large number of Aboriginal people (specifically Inuit), the needs of this population must be met, including offering cultural activities and hiring an Inuit front-line worker to work with the target population in the day centre; - Offer an office space for front-line work, which could be shared between the front-line workers from Cabot Square and surrounding area for a small maintenance fee (see solution 1); - Communicate with the City of Westmount regarding extending the day centre's hours of operation; - Evaluate the obstacles related to the centre's accessibility for Aboriginal people (e.g. address the concerns related to its services within a church). 	<p>during extended hours of operation;</p> <ul style="list-style-type: none"> - Availability and rental of an additional space; - Resources to offer cultural activities; - Truck rental for food delivery; - Coordinator to ensure implementation of proposed steps.
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Integrate solution 2 in the following action plan:

- Plan d'action intersectoriel en itinérance 2007-2012.

Solution 3 – Avoid the displacement of the target population				
Mission	Actions	Current state	Proposed steps	Required partners and conditions
Ensure access to Cabot Square during the	To avoid a major displacement of the	The success of the proposed solutions rests on the fact that the target population gathers together in	- Redevelop Cabot Square section by section to ensure	<i>Conditions:</i> Close collaboration and

<p>re=development phase to avoid displacing the target population ←</p>	<p>target population, it is imperative that the Square be accessible during the re-development phase. ←</p> <div style="border: 1px dashed blue; padding: 5px; width: fit-content; margin: 10px auto;"> <p>City of Montreal</p> </div>	<p>Cabot Square. If the population is displaced or dispersed, issues related to safety and wellbeing will shift with the population. It will be much more difficult to offer the needed services and interventions proposed to improve urban safety and wellbeing to a dispersed group.</p>	<p>that portions of the Square remain accessible at all times;</p> <ul style="list-style-type: none"> - Ensure that the space is safe and secure for the target population. 	<p>support from the Borough of Ville-Marie.</p>
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Integrate solution 3 in the following action plan:

- Ville de Montréal - Plan d'action cible en itinérance (2010).

Solution 4 – Improve health services

Mission	Actions	Current state	Proposed steps	Required partners and conditions
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<p>Improve access to existing health services and offer services that correspond to the needs of the target population</p> <p>←</p>	<p>A) Improve access to services offered by CSSS de la Montagne/CLSC Métro and improve the availability of these services to correspond to the needs of the target population.</p> <div style="border: 1px dashed blue; padding: 5px; text-align: center;"> <p>City of Montreal</p> <p>Government of Quebec</p> <p>Government of Canada</p> </div>	<p><i>The services offered by organizations:</i></p> <ul style="list-style-type: none"> - Médecins du Monde: Healthcare component – district nurses with Médecins du Monde work in partnership with street workers and orchestrate regular medical clinics in four locations with the help of a dozen volunteer doctors; - Chez Doris: Mental health and physical health program; - Anonyme: Distribution of syringes, pyrex tubes and other prevention materials, health promotion and nursing services (on specific evenings); - Stella: distribution of STI prevention materials, syringes and crack pipes; - Cactus: fixed-site needle exchange program, hand out condoms and consumption material, - Action santé travesti(e)s & Transsexuel(le) du Québec (ASTTQ): Health care and social services sensitive to trans people’s needs; - Salvation Army - Booth Centre: therapy for drug and alcohol addiction, mental health; - Native Women’s Shelter: 	<p>A)</p> <ul style="list-style-type: none"> - Improve links between front-line workers and the services offered at CLSC Métro by creating a reference and follow-up network in order to remove barriers between the target population and its access to necessary health services; - Offer similar services to those offered at the homelessness clinic at CLSC Faubourg (for example, offer a health card renewal site for persons without fixed addresses, offer consumption material handouts, etc.) within close proximity to Cabot Square. 	<p><i>Registered organizations:</i> CSSS de la Montagne, Chez Doris, Médecins du Monde, Health Canada MUAHC, Cactus, Salvation Army - Booth Centre, Stella</p> <p><i>Conditions:</i></p> <ul style="list-style-type: none"> - Close collaboration and support of the CSSS de la Montagne; - Support for immediate solutions; - Coordinator to ensure implementation of proposed steps.
	<p>B)</p> <div style="border: 1px dashed blue; padding: 5px; text-align: center;"> <p>City of Montreal</p> <p>Government of Quebec</p> <p>Government of Canada</p> <p>coordination</p> </div>		<p>B)</p> <ul style="list-style-type: none"> • Establish a funding agreement to support health services and act immediately in Cabot Square by offering the necessary services directly to the target population; • Develop an action plan to ensure that the necessary health services are offered to the target population during the re-development phase; ← • Develop an action plan to address the needs for a 	<p><i>Registered organizations:</i> CSSS de la Montagne, Chez Doris, Médecins du monde, Health Canada MUAHC, Native Women’s Shelter of Montreal, Stella, NETWORK, Cactus</p>

	<p>committee must be created to encourage the collaboration between front-line services and CSSS de la Montagne (CLSC Métro) to develop immediate, medium-, and long-term solutions. Committee members must include: CLSC Métro, Médecins du Monde, NETWORK health committee, Anonyme, Cactus, Stella, etc ←</p>	<p>health related services;</p> <ul style="list-style-type: none"> - Native Friendship Centre of Montreal: medical clinic; - SPVM: Mobile reference and intervention team focusing on homelessness (EMRII). <p><i>The services offered by CSSS de la Montagne (CLSC Métro) to the target population:</i></p> <ul style="list-style-type: none"> - Screening for STIs in community organizations, support for patients with hepatitis before, during and after treatment; - Projet Connexion: psychosocial follow up adapted to the clientele, accompaniment to medical appointments. <p>As discussed during the second consultative work meeting, the efficiency and the quantity of services offered by the CSSS de la Montagne do not respond to the needs of the target population. Access and timeliness of services were described as inadequate.</p>	<p>Health Village and a Holistic Health Centre in partnership with the CLSC Métro and the NETWORK's health committee, which has already developed proposals for these initiatives. The action plan should identify service gaps, the target population's needs, and propose specific services. The action plan should also include an implementation plan. The following services were proposed during the first consultative work meeting:</p> <ul style="list-style-type: none"> ○ Health services offered in Aboriginal languages and that address Aboriginal needs; ○ Physical and mental health evaluations; ○ A healing centre; ○ Detailed referral temporary and long-term housing services; ○ Services related to food safety; ○ Services related substance abuse; ○ Services related to social network, employability, etc.; ○ An innovated respite and detox centre with medical services (with complete follow-up). 	<p><i>Conditions:</i></p> <ul style="list-style-type: none"> - Close collaboration with and support from the CSSS de la Montagne; - Support for immediate solutions; - Coordinator to ensure implementation of proposed steps.
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Integrate solution 4 in the following actions plans:

- Plan d'action intersectoriel en itinérance 2007-2012;
- Plan d'action interministériel en itinérance 2010-2013.

Solution 5 – Improve housing services


Mission	Actions	Current state	Proposed steps	Required partners and conditions
<p>Improve referral and follow up services related to housing and increase the number of housing services</p>	<p>A) Take advantage of the resources that are already being offered to create a reference network for housing services and ensure that there is a complete follow up after housing services are used;</p> <p>B) Identify an organization with expertise in housing issues who will be able to take on a leadership role and develop an action plan to improve related services.</p>	<p>Here are a few shelters located near Cabot Square. The list below describes the centres visited by the target population (according to the surveyed population);</p> <ul style="list-style-type: none"> - Projets Autochtones du Québec: short term housing (shelter) for men and women; - Native Women’s Shelter: Short term housing (shelter) and transition housing for non-intoxicated women; - Nazareth House: long-term housing for men; - Y des femmes: long-term transition housing for women; - Salvation Army - Booth Centre: short term housing (shelter) for men; - Old Brewery Mission: emergency shelter. <p><i>New initiative:</i></p> <ul style="list-style-type: none"> - A new respite and detox centre (open since Spring 2013) offers 4 beds for men, 8 beds for women, and 1 bed for a transgender or transsexual person. The center can accommodate stays from 2-3 days at most. <p><i>Upcoming developments:</i></p> <ul style="list-style-type: none"> - Nazareth House - In February 2014, Nazareth House is opening a new residence, "Anne's House", for 28 women on Tupper Street. The centre could offer private space for front-line workers to meet with the target population. - Native Women’s Shelter - the construction of a transition home for its clientele; - Projets Autochtones du Québec – a new day centre 	<ul style="list-style-type: none"> - Create a network for referrals and follow-ups between front-line workers, day centers, employment services, shelters, transition homes, long-term housing, and homecare and social work visits; - Identify and support an expert organization that will evaluate the housing needs in response to the request to increase housing (suggested by a majority of organizations in the survey and during the consultative work meetings). Here were the specified housing types needed: <ul style="list-style-type: none"> o Supervised housing; o Housing that includes different services within the centre (for example, Passage, SIDA Secours, and community support etc.); o Low cost or subsidized housing; o Housing for intoxicated persons. - Support this expert organization in the development of the action plan to respond to the needs of the target population. 	<p><i>Registered organizations:</i> Chez Doris, Salvation Army - Booth Centre, YWCA, Nazareth House/Anne’s House, Marc Garneau’s office, M.P., Open Door, NETWORK, Cactus, Projets autochtones du Québec</p> <p><i>Conditions:</i></p> <ul style="list-style-type: none"> - Close collaboration with expert organization - Support for expert organization; - Coordinator to ensure implementation of proposed steps.

	<p>City of Montreal</p> <p>Government of Quebec</p> <p>Gouvernement of Canada</p>	and shelter.		
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Integrate solution 5 in the following actions plans and strategies:

- Plan d'action intersectoriel en itinérance 2007-2012;
- Ville de Montréal - Plan d'action cible en itinérance (2010);
- PPU du Quartier des grands jardins;
- Plan d'action interministériel en itinérance 2010-2013.

Solution 6 – Improve cohabitation between all users of the space				
Mission	Actions	Current state	Proposed steps	Required partners and conditions
Improve communication between all stakeholders ←	A) Improve the communication methods between the target population, the general public, the merchants, as well as the community organizations and those that offer services to the target population.	A) The public event schedule is shared with neighbourhood residents. However, the target population is rarely notified of events ahead of time. Also, the efforts and	A) Develop a communication plan and determine the best methods to share information. Here are a few methods described during the third consultative work meetings: the installation of a community bulletin board (in collaboration with Éco-quartier Peter-McGill); the dissemination of information by email (in collaboration with Peter-McGill Community Council); the organization of information kiosks during public events; an information pamphlet to be handed out by day centres, shelters and with the help of front-line workers. This communication plan should foster:	<i>Registered organizations:</i> Open Door, Chez Doris, YWCA, CSSS de la Montagne, Salvation Army - Booth Centre, Peter-McGill Community Council, Éco-quartier Peter-McGill, Exeko, The Children's Library of Montreal, the Native Women's Shelter of Montreal, Concordia University and all the

		<p>work of the organizations working with the target population is rarely communicated with residents. Some of these organizations participate in community events.</p> <p>During the third consultative working meeting with community organizations and those that work with the target population, many expressed a desire to collaborate during these public events.</p>	<ul style="list-style-type: none"> - The dissemination of this Strategy; - Inviting the general public and merchants to get involved in the implementation of this Strategy; - Sharing event schedules and public activities that are hosted in Cabot Square, Hector-Toe-Blake park and surrounding area with the organizations that work with the target population in order to encourage cohabitation during events; - Invite the target population to participate during events and encourage the cultural organizations to orchestrate activities for the benefit of the general public; - Name a representative from the front-line committee to invite all committee members to public events in order to promote cohabitation. The role of security guard should be avoided if it harms relationships between front-line workers and the target population; - Name a community organization to take on the communication tasks and disseminate information between community organizations, the general public, and the representative of the intervention committee; - Create a resource guide and disseminate to the target population through front-line workers. 	<p>organisation that host events in Cabot Square, Hector-Toe-Blake park and surrounding area.</p> <p><i>Conditions:</i></p> <ul style="list-style-type: none"> - Communications support (graphic design, newsletter writing, bulletin board, etc.) - Printing costs; - Close collaboration with a representative of the front-line committee; - Close collaboration with a representative of the community sector; - Coordinator to ensure implementation of proposed steps.
<p>Increase the general public's awareness and get the target population involved ←</p>	<p>B) Increase the general public's awareness of the Aboriginal realities and its many dimensions in order to improve cohabitation between all the different users of the space, and encourage the general public to get involved in solutions aimed at improving the wellbeing of the target population</p> <p>←</p>	<p>B) The results of the general public survey indicated that feelings of insecurity are attributable to the presence of the target population. The results also show a lack of education and understanding regarding Aboriginal related issues.</p>	<p>B) Increase the general public's awareness:</p> <ul style="list-style-type: none"> - Support community organizations that work with the general public to host activities or discussions regarding Aboriginal realities and cultures (e.g. fine art workshops, singing and dance shows, Pow wows, Human Library, etc.) during the public events that are already hosted by the Borough of Ville-Marie, the Montreal Children's Library, l'Éco-quartier Peter-McGill, Tandem Ville-Marie and all other community organizations. Discussion forums could be hosted by Concordia University and Aboriginal groups; - Create a bank of volunteer opportunities (targeting the general public) in organizations that offer services to the target population. For example: 	<p><i>Registered organizations:</i> Open Door, Chez Doris, YWCA, CSSS de la Montagne, Salvation Army - Booth Centre, Peter-McGill Community Council, Éco-quartier Peter-McGill, The Children's Library of Montreal, Concordia University, Native Women's Shelter of Montreal.</p> <p><i>Conditions:</i></p> <ul style="list-style-type: none"> - Close collaboration and support from the Borough of

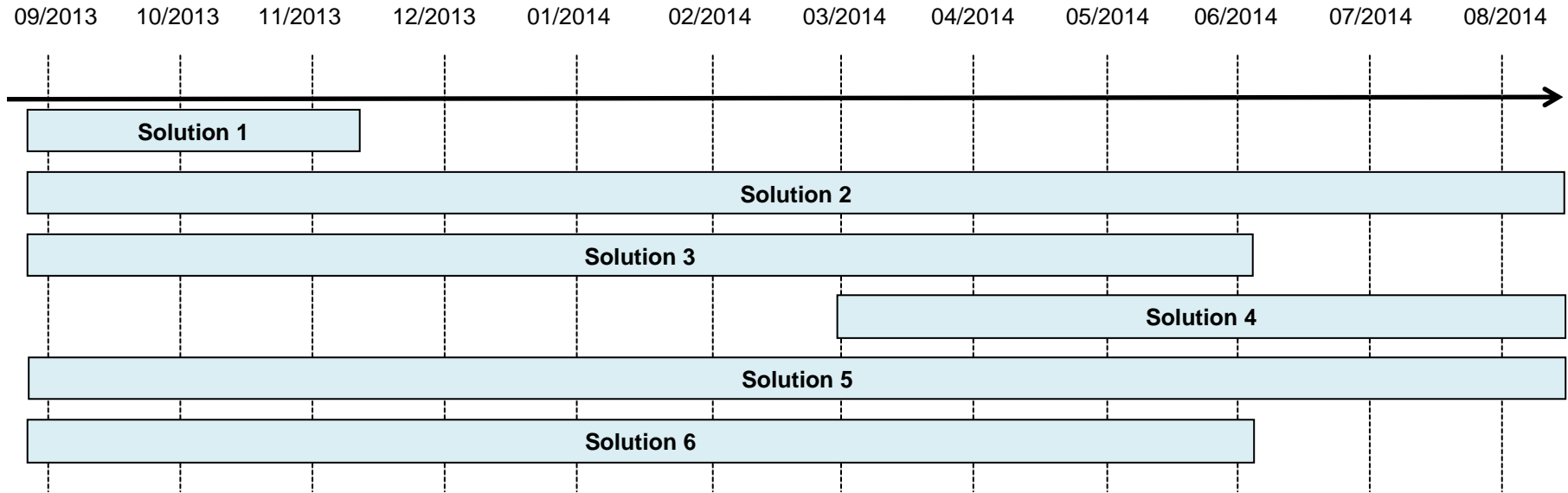
	<p style="text-align: center;">City of Montreal Government of Quebec</p>		<ul style="list-style-type: none"> ○ Open Door: a resident can cook, talk with people at the centre, organize visual art activities or play music, help people file taxes, fix their bikes, etc.; ○ Exeko: a resident could offer their time as they travel in Exeko's mobile van with the team and have conversations with the target population. <p>- Exhibit Aboriginal art and host Aboriginal cultural activities during community events that are already organized (e.g. photos of realities in the North could be presented in collaboration with Avataq and Exeko, sculpture workshops could be hosted during Youth Day organized by the Borough of Ville-Marie).</p>	<p>Ville-Marie;</p> <ul style="list-style-type: none"> - For events: material, honorariums, etc. - Support to develop community projects with the target population; - Coordinator to ensure the implementation of proposed steps.
	<p>C) Invite the target population to participate in community events and encourage this population to get involved and contribute to organizing the events in order to foster cohabitation and empowerment, as well as a feeling of ownership and community. ←</p> <p style="text-align: center;">City of Montreal Government of Quebec</p>	<p>C) The results of the survey completed by the target population indicated that hosting more cultural activities and public events would improve the feeling of safety in Cabot Square. According to front-line workers, by empowering the target population, it allows the person to gain more control in his or her personal life.</p>	<p>C) Encourage the target population to get involved:</p> <ul style="list-style-type: none"> - Survey the Aboriginal population in Cabot Square to identify their talents (for example, sculpture, dancing, etc.) and coordinate the exhibition of such talents during community events; - Encourage the target population to participate during community events in Cabot Square, Hector-Toe-Blake Park and surrounding area (e.g. attend shows hosted by the Borough of Ville-Marie); - Invite the target population to help install and prepare events (e.g. help install picnic tables during Sugar Shack events in Hector-Toe-Blake park in partnership with the Borough of Ville-Marie); - Develop community projects with the target population to encourage a feeling of ownership and community (e.g. organize clean-up days or gardening activities with the target population in Cabot Square or at the Open Door in collaboration with Éco-quartier Peter-McGill, offer workshops organized with Concordia University students, etc.). 	<p><i>Registered organizations:</i> Open Door, Chez Doris, YMCA, CSSS de la Montagne, Salvation Army - Booth Centre, Peter-McGill Community Council, Éco-quartier Peter-McGill, The Children's Library of Montreal, Concordia University</p> <p><i>Conditions:</i></p> <ul style="list-style-type: none"> - Close collaboration with and support from the Ville-Marie Borough; - For events: material, honorariums, etc.; - Support to develop community projects with the target population; - Coordinator to implement proposed steps.

Integrate solution 6 in the following actions plans:

- Ville Marie Plan d'action en sécurité urbaine;

- Ville-Marie - Proposition de priorités d'actions 2010-2011;
- Ville de Montréal - Plan d'action cible en itinérance (2010);
- Plan d'action intersectoriel en itinérance 2007-2012;
- Plan d'action interministériel en itinérance 2010-2013.

Implementation Timeline:



OTHER RECOMMENDATIONS

Support new initiatives and work in collaboration to improve the wellbeing of the Aboriginal population:

The following initiatives, which target the Aboriginal population in Montreal, will be developed over the coming years. Therefore, it is important that they be linked with the Strategy and its proposed solutions to ensure a collective approach to responding to the issues and maximizing existing resources and impact. Below are two examples of important initiatives that have a similar vision to the Strategy:

- *Improve justice-related issues:* The Justice sub-committee of the NETWORK recently completed the development phase of the JustPeace program, which involved a series of consultations with socio-judicial actors in Montreal to examine the existing situation regarding Aboriginal people who come into conflict with the criminal justice system in Montreal. This phase will inform the development of the JustPeace program, which aims to address:
 - a) The over-reliance on the use of imprisonment and the lack of appropriate services and programming for Aboriginal people;
 - b) The lack of a targeted prevention approach, considering that more of the Aboriginal than the non-Aboriginal population falls into the socioeconomic group most vulnerable to involvement in the criminal justice system.

- *Promote Aboriginal culture:* The Art and Culture Working Committee of the NETWORK is looking to establish an Aboriginal Community Cultural Centre in Montreal, which would house exhibitions, performances, workshops, roundtables, readings and other types of projects and events. Open to all generations and nations, this centre would also contain a cultural archive of the Aboriginal people in the greater Montreal area, and inform and educate the general public about Aboriginal art and culture.

NEXT STEPS

a) Phase 1: (completed)

Timeline: January 14 to July 12, 2013.

Mandate: Develop a strategy to prevent community safety issues from worsening. The strategy also aims to situate Montreal as a model city that fosters local coordination, promotes social inclusion and co-existence, provides efficient services, and ultimately to improve wellbeing and safety in Montreal.

b) Transition Phase:

Timeline: July 15 to August 16 2013

Mandate: To ensure the sustainability of the Strategy by proposing a plan for its implementation

Objectives:

- Prepare an action plan for phase 2 (implementation of the Strategy);
- Make recommendations for the next steps and address the re-development of Cabot Square, etc.;
- Outline a clear division of roles of all partners (e.g. develop plans and set up committees for implementing each solution);
- Detail the specific contributions of all partners and funders.

Team:

- Project supervisor: International Centre for the Prevention of Crime (ICPC)
- Project coordinator: Montreal Urban Aboriginal Community Strategy Network (NETWORK)
- Analyst: Montreal Urban Aboriginal Community Strategy Network (NETWORK)
- Steering committee: Borough of Ville-Marie, YMCA (Downtown Montreal), projet Dialogue

N.B. At the end of the transition phase, the results will be presented to all of the funders to ensure that the recommendations for the next steps are adopted. The following funders will be invited:

- City of Montreal
- Borough of Ville-Marie
- Secrétariat aux affaires autochtones (SAA)
- Aboriginal Affairs and Northern Development Canada (AANDC)
- First Nations Human Resources Development Commission of Quebec (FNHRDCQ)
- Others (to be determined)

c) Phase 2:

Timeline: (to be determined) It is recommended that phase 2 begin in mid-August.

Mandate: The implementation of the Strategy.

Importance of phase 2 of the Cabot Square project:

It is important to note that genuine and sustainable collaboration and coordination will ensure the success of the implementation of the Strategy. The development of the Strategy and of the solutions

(in a collective manner) during phase 1 demonstrates the numerous actors' interest in working together at some level to coordinate services. Therefore, it is imperative to achieve the objectives of the transition phase and to begin to establish coordination mechanisms to ensure the realization of the Strategy in the long-term. The reason for emphasizing the need for coordination during phase 2 is due to the high number of services offered and the diversity of mandates and activities that are being carried out in the area.

In addition, since Cabot Square will be closed in 2014, it is crucial to immediately begin the implementation of the Strategy to prevent negative impacts and the potential displacement of the target population.

Key partners for phase 2:

- a) City of Montreal (to be confirmed)
- b) Borough of Ville-Marie (to be confirmed)
- c) CSSS de la Montagne (CLSC Métro) (to be confirmed)
- d) Ministère de la santé et des services sociaux (MSSS) (to be confirmed)
- e) Secrétariat aux affaires autochtones (SAA) (to be confirmed)
- f) Aboriginal Affairs and Northern Development Canada (AANDC) (to be confirmed)
- g) First Nations Human Resources Development Commission of Quebec (FNHRDCQ) (to be confirmed)
- h) Montreal Urban Aboriginal Community Strategy Network (NETWORK) (to be confirmed)
- i) Organizations offering services to the target population and other interested groups
- j) Target population

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