Engagement Summary
Building the Engagement

At the direction of the Community Safety and Wellbeing Plan's Community Leaders Panel, the engagement process was built to be diverse, aware, and accessible. Engagement occurred from September 2023 to July 2024.

With the help and guidance from the Canadian Centre for Safer Communities (CCFSC), the panel built an engagement framework that came in multiple parts. The CCFSC worked with the panel from August 2023 to May 2024, and assisted in facilitating meetings, providing samples and examples, compiling information, and consulting about the engagement approach. Their role in the beginning of this process was crucial and provided much-needed analysis and information about approaches taken to community consultation across the country.

Early on, it was clear that many people, regardless of whether they live in the city, have an attachment to Victoria. As a provincial capital, and an important piece of the history of British Columbia and Vancouver Island, people across the province, the Island, and Greater Victoria are keenly attuned to the needs and realities of the city.

Victoria is the downtown core for the Greater Victoria area, which includes about 400,000 people. It is a prime tourist destination for both international and domestic tourists and is also the commerce centre for Vancouver Island. Many people who live outside the city limits visit Victoria to shop, dine, work, visit parks and amenities, and so much more.

While community safety and wellbeing plans are a legal requirement for local governments in some jurisdictions, there are no communities in the Capital Region that have engaged in this process. While every municipality across B.C., and likely across Canada, are considering and engaging in community safety and wellbeing work, Victoria's position as the provincial capital makes it important to ensure that our plan is not only forward thinking and encompassing, but also thought provoking, robust, and carefully crafted.

CITY OF VICTORIA

From the beginning, the panel made clear that Victoria's work can and should set a standard of excellence for community engagement.

It was also important to ensure that everyone's voices were heard, and that every resident had the opportunity to be heard. This meant that special attention was needed to ensure that residents who are not typically represented in surveys, had the ability to participate. This included people who are unhoused or underhoused, people with disabilities, people without internet access, and more.

It was equally important to ensure that the data collection process was not intimidating and was done to minimize harm, trauma, and inadvertent triggering by sharing personal, private, and often emotionally-challenging information.

Surveys

For the collection of rich and diverse, data, two unique surveys were launched. The analysis of all the collected data, including data from surveys and in-person sessions, is included in the following section. Highlights are included here.

Survey One – General Survey

The first survey, referred to as the general survey, was one part of the engagement process and was open to people who reside in Victoria and the Capital Region. The survey was approximately 30 questions in length and could be completed online using the City's Have Your Say online engagement platform, or via paper form that could be picked up and dropped off at City Hall.

The survey was advertised with print ads, posters and small handbills distributed in public spaces. Information about the survey was promoted on the City's social media channels, in a media release, and emailed directly to local organizations, facilities, businesses, and outreach groups.

The list of organizations receiving the survey was widespread and diverse – from local businesses to youth sports leagues to food banks, and many more. The goal of the survey was to be widespread and accessible, providing a solid base of quantitative and qualitative data.

This survey, crafted in partnership with the Community Leaders Panel, CCFSC, and the City, opened on Friday, April 5 and closed Sunday, May 12, 2024. In total, there were 1,660 respondents.

Survey questions explored many topics, including demographic information, respondents' relationships with the city, experiences of crime and safety, perceptions of belonging, and factors affecting wellbeing.

High-Level Findings

Overwhelmingly, Victorians expressed attachment to natural places and the environment, including parks, trails, the harbour front, and beaches. They also expressed great care for arts and cultural institutions, and local businesses and restaurants. The majority of survey respondents appreciated the size and pace of the city and expressed appreciation for walkability and ease of movement.

Of the 1,584 respondents who chose to identify their place of residence, 80 per cent reported that they live in the City of Victoria. When asked about personal connections to the city, most respondents shared that they spend their time in the city dining at local restaurants and cafes, shopping at local businesses, and exploring Victoria parks and natural areas.

Other notable responses included attending cultural events and festivals, visiting museums and libraries, and strolling through downtown. Similarly, when asked about where respondents feel a sense of belonging, residents responded that they feel belonging when in parks and natural areas, while spending time with friends and family, exploring downtown, while in workplace and professional networks, and in libraries and museums.

When asked about what was important to overall personal wellbeing, most respondents chose access to quality healthcare and social services, access to parks and nature, feeling safe in one's own environment, and affordable housing. Building on this, most respondents indicated that to improve their wellbeing, they needed increased availability and access to a family doctor, more affordable housing, increased availability to mental health and addiction support services, strengthened environmental conservation efforts, safer pedestrian infrastructure, and more free community events and cultural programs.

They also recognized the need for safe and inclusive spaces for Indigenous people and people of colour, people who are part of the 2SLGBTQIA+ community, people with disabilities, and others. Participants encouraged decision makers, non-profits, and business owners to engage in practices through an equity, diversity, and inclusion lens, and to recognize that perceived class differences and social status still exist and are influential in stigmatizing people.

Many survey respondents expressed concern with increased visible homelessness, public drug and/or substance use, and safety – 34.4 per cent reported that they felt somewhat unsafe/very unsafe in Victoria during the day, while 64.3 per cent said they felt somewhat unsafe/very unsafe at night. Areas where people reported feeling unsafe included alleys and side streets, downtown, parking areas, public restrooms, and industrial neighbourhoods.

In addition, people were particularly concerned about visible drug use in spaces that they feel attached to, like parks and near small businesses, and were anxious to see improvements through a reduction in visible homelessness. They recognized that small factors, like improved lighting, are key to making people feel safe, but we need big, bold action on housing and mental healthcare to interrupt cycles of abuse and get vulnerable people into safe spaces.

When asked about what would make people feel safe, top responses included increased income to meet the costs of living, everyone in the community being housed, more affordable housing options, increased access to healthcare, increased access to mental health and addiction services, and an improved court system.

Similarly, when asked about who has a role to play in creating a safer community, top responses included municipalities, the provincial government (including a push to have government workers return to onsite work to increase "eyes on the street" during the day), mental health services, addiction services, and social services.

Survey Two – Systemic Change Survey

The second survey, referred to as the Systemic Change Survey, was a targeted approach at understanding the systemic barriers and challenges affecting the wellbeing of our most vulnerable populations in the city. The Systemic Change Survey was developed by the Community Leaders Panel, and was a closed, invite-only survey, hosted online.

This survey asked participants to comment on their understanding of the systemic barriers and challenges to wellbeing for vulnerable populations in the city. The questions were predominantly essay-style and encouraged participants to think critically about their roles in community safety and wellbeing.

Those who work in the social service sector, those who directly support vulnerable or unhoused individuals, and those with an identified expertise in the field of service provision and societal barriers, as identified by the Community Leaders Panel and facilitators, were invited to participate. From there, participants were asked to share the survey with their networks. Approximately 20 organizations were given the link to the survey and 135 people completed the survey. As with the General Survey, the Systemic Change Survey was available on the City's Have Your Say online engagement platform and was open from April 5 to May 21, 2024.

High-Level Findings

Key themes from this data articulated that housing, the toxic drug supply, and a lack of healthcare access are key barriers to community wellbeing.

Participants overwhelmingly expressed great care and concern for unhoused and precariously-housed individuals in the community, recognizing that homelessness, substance use, crime and victimization appear to be increasing. This increase leads to more frequent conflict with residents and visitors, and creates more stigma, compassion-fatigue, and harm. Participants also recognized that these shortages make people more vulnerable to discrimination, gender-based violence, criminal violence, and institutional discrimination through the health, justice and enforcement systems.

Respondents also identified significant staffing challenges and chronic issues within the supportive housing and social services sector that make it challenging to operate effective supportive housing. This included increasing expectations for service providers without

complementary increased funding, fewer options to house people requiring complex care, burnt-out staff, and limited administrative support.

There was an observed gap in communication amongst agencies, and increasingly siloed work, leading to gaps in service, particularly between the provincial health authority and service providers. They recognized that regionally, the responsibility of supporting and housing individuals is unfairly distributed across the Capital Region and that much of the burden is on the City of Victoria. A frequent comment noted the need for the Province to respond to housing and mental healthcare services with urgency.

There was also significant discussion about finding the right people to do the right work. This included focusing on proper education and upstream interventions to prevent people from falling into homelessness, as well as service providers who are well trained and resourced, and Police and Bylaw officers who are trained with current best practices and awareness of mental health issues.

Most significantly, participants overwhelmingly agreed that Victoria was and is ready for systemic change to improve the conditions and lives of all Victorians.

In-Person Dialogues

The City engaged four local facilitators with specific knowledge and expertise in working with diverse communities. Facilitators worked with community groups to set up conversations with various agencies, sectors, and communities within the city. These guided dialogues provided participants with a safe, confidential, and culturally-sensitive space to share their observations of safety and wellbeing.

The questions asked in each group differed, and were dependent on the group and facilitator, to minimize any risk of causing inadvertent harm through targeted questioning.

Topics included specific safety and wellbeing observations, potential actions, and perceptions of community safety. Honorariums were provided to participating individuals at their request, in accordance with the City's current honorarium policy.

Twenty sessions were hosted with approximately 160 participants. Groups included immigrants and newcomers, youth, service providers, neighbourhood associations, the business community, faith groups, seniors, the Francophone community, medical and

mental healthcare providers, police, young workers, union members, members of the Songhees Nation, and people with lived experience of homelessness and drug use.

Data from these sessions was collected using electronic transcripts, recordings, and hand-recorded facilitator notes.

The analysis of this data was inherently harder to interpret, given the fluid nature of the questions and the lack of standard questions and answers, in addition to the different methods of recording and receiving data. As such, all this data was collected and added to the whole pool of data collected through both surveys and analyzed together. This analysis, and a description of the methodologies used, are included in the next section.

Participants in these sessions offered various suggestions about improving safety in Victoria. This included community spirit initiatives, safe and connected bike paths, accessible and complete neighbourhoods for people of all ages, more volunteer opportunities, and safe, established places for people to shelter.

Pop-Ups

Five engagement pop-up events were hosted in the community in June and July 2024. They were drop-in style where participants were asked to share their thoughts anonymously on post-it notes, by answering six guided questions about safety, such as 'where they feel safe and unsafe', and 'what they would recommend to the City to improve safety and wellbeing'. These sessions were facilitated by City staff, facilitators, and members of the Community Leaders Panel.

Pop-up events were hosted at the Fernwood Community Centre, Moss Street Market, Victoria West Community Centre, the Victoria Public Market, and the Atrium. As with other parts of the public engagement, the pop-up events were communicated to the public via online ads, social media advertising, print ads in local news outlets, and across a variety of City platforms and newsletters. In total, approximately 200 people participated.

Generally, participants were pleased to have the opportunity to provide feedback, engage with the City, and connect with their neighbours while engaging. On several occasions, participants remarked that more frequent drop-in style events on a range of City issues would allow for increased social connection, and the direct opportunity to be heard and

seen by their local government. Specifically, participants commented on the ease and simplicity of the questions posed, and appreciated that, regardless of one's background or abilities, participation was simple.

One of the questions posed asked participants what short-term solutions they would recommend to the City to improve safety and wellbeing. Responses included: more communication about events, better parking signage, support for public libraries, more street cleaning and power washing, more public bathrooms (especially on Pandora Avenue), and neighbourhood-oriented events.

Another question asked participants what individuals in Victoria could do to improve community safety and wellbeing. Responses included: joining community groups, smiling at strangers, connecting with your neighbourhoods, education around mental health and services, "clean up your yard", and engaging with all levels of government.

Collectively, nearly 300,000 data points were collected through the entire engagement process.

Methodologies and Data Analysis

The unique challenge set out by the Community Leaders Panel was to collect diverse data on a range of topics, and to collect data from as many people in our community, with a focus on people who are rarely heard from in traditional data collection and with approaches that are accessible while minimizing harm on vulnerable participants.

This resulted in data that was challenging to analyze. Data was collected and recorded in different formats, came from different questions, and was framed in completely different ways. While much of the content was similar, the way in which it was collected, framed, and communicated was unique and distinct to each participant. The surveys included many open-ended, essay-style questions, and with over 1,600 respondents in the General Survey alone, thousands of pages of data were created.

Given these challenges, the City contracted HelpSeeker, a Canadian social science data firm with experience creating community safety and wellbeing plans, for the data analysis portion of this work. Using the data from both surveys, the in-person dialogues, and the community pop-ups, HelpSeeker developed a system to scrub, categorize, and clarify

the data. In this process, they developed a matrix – also called an ontology of categories – into which each piece of data could be slotted. From this, we were able to understand how many times themes, topics, suggestions, and observations were mentioned throughout the data, providing a comprehensive picture of the trends, ideas, and attitudes in the information collected.

This project employed a mixed-methods approach, combining qualitative and quantitative data collection and analysis techniques. To do this, HelpSeeker organized the vast amounts of data collected in a way that identified broad themes, and then narrowed down each level to demonstrate specific points.

This approach is effective when handling large volumes of unstructured data by providing a clear and consistent framework for categorization and analysis. It also helps differentiate data that is an observation, a concern, a priority, or a possible solution. Each piece of data, even if it is just expressing concern, is useful in understanding what Victorians think, at the broadest level.

The hierarchical structure, or 'levels,' is referred to as a taxonomy. This thematic categorization is a commonly-used approach in social science to help give researchers and writers a better sense of the themes and volume of data collected.

HelpSeeker established four levels of data:

Level 1: Broad categories of community safety and wellbeing concerns.
This level is about general themes and overarching categories, of which there are three:
1) Sense of belonging, 2) Community safety concerns, and 3) Solutions and interventions.

Level 2: Subcategories of major themes.
At this level, the broad categories are broken down into major themes. These include:
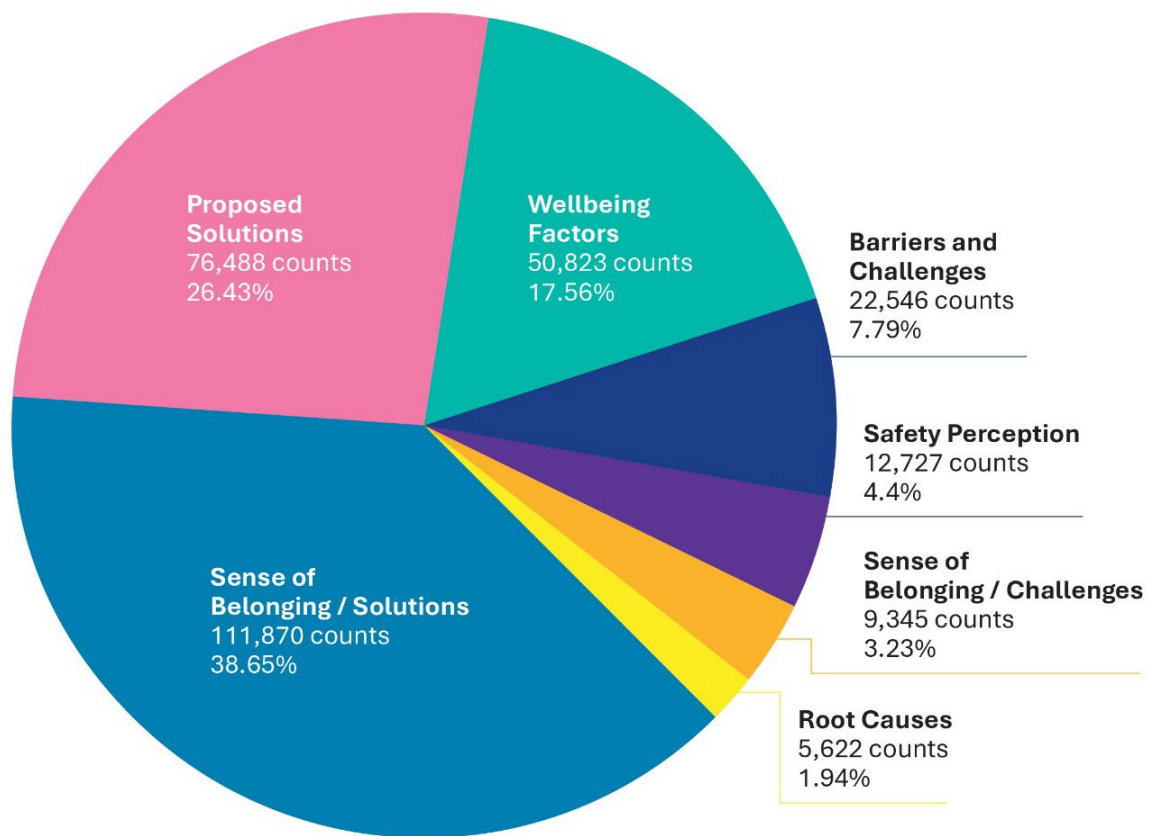
- Sense of belonging (Level 1): challenges, solutions
- Community safety concerns (Level 1): barriers and challenges, root causes, safety perceptions
- Solutions and interventions (Level 1): wellbeing factors, proposed solutions

Level 3: Subcategories of topics.

At this level, each piece of data is characterized into themes. The number of themes varies and can include things like "discrimination," "transportation and mobility," or "social services and support systems," as examples.

Level 4: Specific concerns and examples.

These are the specific concerns, observations, and examples that participants mentioned. Each entry lists how many times the concern was raised, across all the data.

Proposed Solutions
76,488 counts
26.43%

Wellbeing Factors
50,823 counts
17.56%

Barriers and Challenges
22,546 counts
7.79%

Safety Perception
12,727 counts
4.4%

Sense of Belonging / Solutions
111,870 counts
38.65%

Sense of Belonging / Challenges
9,345 counts
3.23%

Root Causes
5,622 counts
1.94%

Using this categorization approach with all the data collected, from all sources, helps to ensure consistent and reliable analysis, where no one piece of data is more important than another. This technique also allows us to find common themes and concerns that emerge across different data collection methods, which helps to make sure we have a complete understanding of the community's perspectives.

For example, while a survey response might explicitly mention "drug use in parks" as a concern, a focus group discussion might describe scenarios or experiences that identify the same concern but use different language or context. This approach ensures that all relevant data is captured and categorized, regardless of its original format or the terminology used by respondents.

During analysis, it was observed that certain themes naturally recur across multiple levels and categories within this classifying structure. For example, themes such as "homeless encampments" or "mental health and addiction" are multi-faceted, often appearing both as barriers to community safety and wellbeing and as focal points within proposed solutions. This recurrence highlights the complexity and interconnectivity of the issues at hand.

The goal of this work was to identify common themes and concerns that emerge across each type of engagement, while uncovering underlying themes that were implied, but not necessarily stated explicitly. It also helped recognize nuance and variation and quantifies how many times each concern was raised.

For a more detailed description of the process, and a summary of the collected data and themes, please refer to the HelpSeeker Report in the appendices.

The City also worked with Muflehun, a non-profit resource centre that uses data analytics to inform public policy. As part of the Community Resilience Early Warning System (CREWS) Canada project, funded by Public Safety Canada, Muflehun worked with the City of Victoria to perform data analytics on factors contributing to violent crime, hate crimes, and terrorism. This process helped enhance the understanding of the unique safety and resilience landscape in Victoria, while providing insights on what sectors can and should be targeted to reduce crime.

Muflehun pulled data from publicly-available data sources, including Statistics Canada, the Victoria Foundation's Vital Signs Report, Elections BC, the BC Data Catalogue, and more to perform advanced data analytics to identify and prioritize risks and protective factors, to aid in violence prevention.

This approach, introduced to several cities across Canada with the support of Public Safety Canada, uses quantitative statistical analysis and explainable machine learning to identify key risk and protective factors that affect issues like hate crimes, violent crimes, and violent extremism.

A risk factor is a negative characteristic, condition, or system that can lead to increased social disorder, crime, fear of crime, or stress. In a community, if harm is being done to individuals, and community systems are not adequately supporting people and families, there is an increased chance that people will experience victimization, and collectively, the community will see higher rates of poverty, social disorder, crime, and radicalization.

Risk factors can occur at the individual level, like a person having PTSD, experiencing systemic racism, being unable to access suitable housing, substance abuse, or intergenerational trauma. At the community level, factors like inadequate lighting, derelict buildings, low rates of high school and post-secondary education, a lack of community diversity, gang activity, food security issues, and a lack of community engagement are factors that contribute to crime.

Social and environmental risk factors occur at a larger level, and include things like high poverty rates, systemic inequality, social isolation, climate change, and income inequality.

Ultimately, risk factors affect the social determinants of health and the social determinants of crime, leading to increased community safety and wellbeing concerns.

On the contrary, protective factors are characteristics that have a positive influence on the community and help reduce the likelihood of crime and violence. They help improve the experience that people have in the community. Protective factors increase resilience and insulate individuals and communities against risk factors. At the individual level, this can include having strong role models, access to services, personal health, family connections, and stable housing.

At the larger community level, this includes access to the natural environment, low rates of violence, a healthy economy, low unemployment rates, options for recreation, and effective safety enforcement. At a society level, it may include hate crime laws, neighbourhood diversity, rule of law, and social cohesion.

Some factors can be protective if they are working well – and can be risk factors if they are contributing to harms. For example, the health system can be a profound protective factor. However, if a significant number of community members struggle to access the health system, or are having negative interactions with the healthcare system, it can become a risk factor.

Risk and protective factors are correlated and cumulative, meaning that someone experiencing one risk factor is more likely to experience others, and less likely to experience protective factors. Young people that experience risk factors are more likely to develop long-term risk factors that are more difficult to support and treat. For example, a young person that experiences domestic violence, and has negative experiences at school with bullying, is much more likely to develop a condition that impacts their physical or mental health as they get older. This highlights the importance of early and multi-pronged intervention approaches.

Using this framework, Muflehun examined over 75 socio-ecological factors across seven sectors and 24 different subsectors to understand which factors were most contributing to Victoria's community risk, and most contributing to its protection.

A correlation analysis was also run, to understand if and how wellbeing factors are changing in relation to socio-economic factors. While correlating factors do not directly indicate causation, it is helpful to understand and visualize how factors, like healthcare funding, may be aligned with collective health experiences.

Risk and Protective Factors

These trends are further assessed over time, to understand how, and if, there was a notable impact before, during, and after the COVID-19 Pandemic. For example, economic factors were, as a whole, protective factors prior to the Pandemic. This means issues like food security, income, and labour were secure and stable, and were creating a safety

benefit for the community. However, after the Pandemic, food insecurity and income issues have increased, causing them to become risk factors.

Similarly, prior to the Pandemic, health factors were generally a protective factor. After the Pandemic, access to healthcare went from one of the strongest protective factors, to one of the most significant risk factors, indicating that the population's general health status has become concerning and is contributing to increased crime.

Similarly, mental health was a positive factor from 2016-2019 and is now one of the most significant risk factors affecting community safety, alongside access to general health. Other factors, like availability of facilities were risk factors prior to the Pandemic but have become more severe post-Pandemic.

Key learnings through this process include:

Hate crimes in 2023 were 250 per cent higher than pre-Pandemic levels. This only includes incidents that were reported to police.

The Violent Crime Severity Index is well above baseline, provincial, and national scores. It was steadily declining until 2018, increased sharply from 2019-2021, and has been decreasing since 2023.

Post-Pandemic, the health sector has emerged as one of the most significant contributors to hate crimes and safety concerns.

Healthcare access is a critical issue, with Indigenous and visible minority populations facing the highest barriers.

On average, one in five households in Victoria is facing core housing needs related to unsustainable costs or unsuitable spaces.

There has been a 69 per cent increase in residents reporting poor or fair perceived mental health in the past decade.

There has been a 400 per cent increase in opioid fatalities since 2014, reflecting overlapping health, mental health, and social vulnerability.

In B.C., 22 per cent of households experience food insecurity, and 40 per cent of Indigenous people experience food insecurity. Indigenous people in urban areas are more food insecure than those in rural areas.

Foodbank use in urban areas across B.C. has nearly doubled since the Pandemic.

A number of factors are working well in Victoria and serve as protective factors, including population diversity, sense of belonging, life satisfaction, and educational attainment.

Housing, healthcare, mental health services, food security, and social cohesion are all areas that require attention.

More details can be found in the Muflehun appendix.