

SUMMER 2026 EDITION

ToughTimes

Nothing about Us, Without Us, Is for Us



OHC "GET ON BOARD" PROTEST DRAWS THOUSANDS TO QUEEN'S PARK



By: Tania Deol

Ontario's public health system is in crisis! On May 28, the Ontario Health Coalition (OHC) gathered in downtown Toronto for their "Get on Board" protest.

The protest was a province-wide day of action, with participants from various communities across Ontario demanding the Ford government to "stop the hospital privatization trainwreck."

"We won't stop fighting because this healthcare system is ours, it's not private equity's to own," said OHC executive director Natalie Mehra.

Thousands of Coalition members rallied at GO train stations before heading to Queen's Park. As the chanting mass of protesters arrived and gathered at Union Station, Mehra addressed the crowd.

"We want good ratios for our nurses instead of magical convention islands that nobody asked for," she said. "We want addiction treatment and supportive housing instead of multibillion dollar jail beds. Enough is enough."

Ontarians have been suffering the effects of underfunding for years, which only ramped up

under Doug Ford's leadership. The OHC is arguing that funding is being funnelled into for-profit clinics instead of public hospitals.

According to calculations from the Canadian Institute for Health Information (CIHI), the Coalition found that Ontario has the lowest healthcare spending per person in all of Canada, despite having the largest population.

Donna Del Re, who has been part of the Mississauga Health Coalition for the past four years, says she attended the protest to see the others rooted in this cause and "to let the government know I am not in favour of their policies."

Many other attendees, like Del Re, have had personal experiences with healthcare privatization and are now demanding the government to halt for-profit healthcare.

"It was validating seeing people together fighting for the same cause," Del Re says, adding that the attendance numbers were uplifting. She encourages others to never give up hope. "Things can improve if we continue to advocate for our rights and vote."

Inside the Issue

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Tough Times

Nothing about Us, Without Us, Is for Us

PRODUCED BY:

Peel Poverty Action Group (PPAG)

PRINT TEAM:

Michelle Bilek

Tania Deol

Hailey Ford

Catherine Soplet

CONTRIBUTIONS FROM

Cara Robinson

Candice Zhang

Tanya Burkat

Samantha Mather

William H. Graham

Meera Karunanathan

Mia Vallière

Dr. Michelle Hewitt

Paula Torres

ACORN

Boys & Girls Club Peel

The Conversation

Disability Without Poverty

Food Banks Mississauga

HART Hub Brampton

Knights Table

Ontario Nonprofit Network

PPAG's mandate is to advocate for people in need and to educate the public about poverty issues. Tough Times is part of that. PPAG is open to every individual and organization in Peel Region that cares about what poverty does to people. It provides a safe place to speak up and out

"MY FAMILY NEEDS TO EAT"

A MOM OF TWO CHILDREN WITH SPECIAL NEEDS
SHARES HER STRUGGLES TO FEED HER FAMILY.

BY: FOOD BANKS MISSISSAUGA



With the rising cost of food, families with teenagers know the struggle to keep food on the table. But for Ada*'s family, it became impossible.

Ada would do anything for her family. In spite of her own health issues, she devotes her days to caring for her two kids with special needs. Her husband, Jon*, brings in the family's only income. But with the family's complex needs, it isn't enough to make ends meet.

Braces, glasses, cochlear implants, and hearing-aid batteries add up faster than they can keep up. "Medical expenses will eat you alive," she sighs. "We have insurance, but it doesn't cover enough. Last year we spent \$12,000, and that was just for one kid."

Ada shares how heavy the burden is, but she perseveres because she will do anything for their family. "It's incredibly stressful. But my daughter needs to hear. My son needs his medication. My family needs to eat."

Thankfully, Ada learned about Food Banks Mississauga and its network of 60+ food programs they provide food to.

"It's a great help. When I can save money on groceries, that money can then go towards my son's medication or my daughter's hearing equipment," she says.

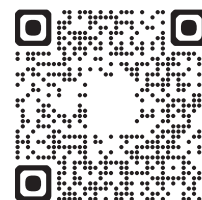
Stories like Ada's, unfortunately, aren't uncommon. There are a multitude of reasons why someone might need food support, and every one of those reasons is valid.

Food Banks Mississauga leads a network of 60+ food programs across Mississauga, providing food for almost 10 million meals each year to those living with food insecurity in the city and beyond.

They saw a record-breaking 503,000+ visits last year – the most in their 40-year history.

Visit foodbanksmississauga.ca/donate if you would like to get involved or help neighbours like Ada in need

**names and photo are representative to protect privacy*



COMMUNITY FIRST: KNIGHTS TABLE'S NEXT CHAPTER

BY: DANISHA CHOPRA, KNIGHTS TABLE



Tania Deol / Tough Times

For more than 35 years, Knights Table has been a place where people can find more than a meal. It has been a place of hope, dignity, and belonging for individuals and families facing difficult times in Brampton and across Peel Region.

Whether it is a senior struggling to make ends meet, a parent worried about putting food on the table, or a newcomer building a new life, Knights Table has been there when support is needed most.

This year marks a major milestone in our journey. After more than three decades of operating from leased facilities, Knights Table purchased its first permanent home at 73 Hale Road.

But this story is not really about a building - it is about people. It is about ensuring that our community continues to have a place where support, compassion, and opportunity come together.

When construction began on our new home, we faced a difficult choice. We could slow down services until renovations were complete, or we could continue serving the community despite the challenges.

We chose the community.

Today, while the construction continues around us, food bank services remain open, meals are prepared and served every day, and vulnerable residents continue to receive the support they depend on. Staff, volunteers, donors, and community partners have worked together to ensure that no one is left behind. Even in the midst of one of the most significant transitions in our history, our commitment to the people we serve has never wavered.

And the mission continues beyond food. Children are enjoying summer camp, preparations are underway for our annual Back-to-School Backpack Program, and seniors continue receiving nutritious meals and support. Construction may be underway, but life does not stop - and neither do the programs that help strengthen our community.

The need has never been greater. Last year, more than 47,000 individuals and families turned to Knights Table for support, resulting in more than 514,000 visits to our food bank and programs.

Those numbers represent neighbours facing difficult choices, seniors stretching limited incomes, parents working hard to provide for their children, and newcomers trying to build a better future.

As we build our future home, we have launched the Building Dignity Through Food and Community Capital Campaign. This campaign will help transform our new facility into a permanent, accessible community hub featuring a modern grocery-style food bank, commercial kitchen, seniors' wellness space, volunteer centre, and community programming areas where people can access support with dignity and respect.

This campaign is about more than bricks and mortar. It is about building a place where a child can start the school year with confidence, where a senior can find connection and support, where families can access nutritious food, and where every person is welcomed with dignity.

HOW YOU CAN HELP

The story of Knights Table has always been a community story, and the next chapter will be written together.

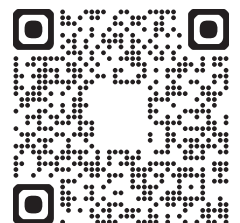
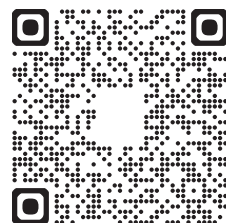
Whether you volunteer, donate, contribute to our Capital Campaign, support the Back-to-School Backpack Program, organize a food drive, or simply share our story, you can help build something extraordinary.

Together, we are building hope, dignity, and a stronger community for generations to come.

For more information, to volunteer, donate, or support the Building Dignity Through Food and Community Capital Campaign, visit www.knightstable.org.

Because community comes first.

DONATE WEBSITE



HOW THE CSSA BUILDS COMMUNITY AND INCLUSION THROUGH SOCCER

BY: TANIA DEOL & HAILEY FORD



The FIFA World Cup has brought soccer to front-of-mind for many Canadians, even those who hadn't previously paid much attention to the sport. As the most popular sport in the world, it requires little equipment and has fairly simple rules. It also creates a strong foundation for building community.

"We found the sport to be a language that we can easily use to attract people to be included, to be part of something bigger than themselves," says Canadian Street Soccer Association (CSSA) founder and CEO, Hossam Khedr. "Instead of talking about resumes and housing and jobs, we start to talk about getting to know each other and building that trust back."

The CSSA was established in 2024 and brings soccer sessions, tournaments, and other support programs to Canadians living with homelessness, mental health struggles, addiction or social isolation.

Local programs are offered in cities across the country, including Brampton and Mississauga.

"We meet our players where they are. Our focus isn't just on the team, it's on each person's journey," he says. "Our outreach starts with a simple message: 'Come and kick a ball.' That simple invitation opens the door to connection and hope."

According to Khedr, the CSSA fills an important gap between social and sports organizations.

Local programs have a soccer coach who understands the sport and helps modify the games according to the needs and abilities of the players. There's also a social coach, who creates trust between players and understands the challenges they're experiencing.

"We saw the need in our communities for something like this," he says. "We took knowledge and experience from other countries, and how they run things, but we tried to modify every program according to the province we're working in."

The CSSA also takes part in the Homeless World Cup, a yearly tournament where 70+ similar organizations and their players gather to represent their countries. The 2025 tournament took place in Oslo, Norway, and the upcoming 2026 tournament, set to play in January 2027, will be in Mexico City, Mexico.

"CSSA is a bigger movement than the organization itself," Khedr says. "During the last ten years, I have communicated and chatted and talked to managers from around the world, and learned quite a bit about the skills we need here, and how to build capacity within Canada to run a program that fits Canada."

However, like many nonprofits and charities, the work isn't easy. Khedr says their niche means they aren't always taken seriously by other sport or social organizations. Resources and funding are also limited.



**// OUR FOCUS
ISN'T JUST ON THE
TEAM, IT'S ON
EACH PERSON'S
JOURNEY. //**



"The beauty of running an organization like this is there's not any boring day, but a lot of challenges come our way," he says. "We're trying to raise awareness, while we also try to create opportunities for these players, so finance becomes a huge challenge for us."

CSSA was offered grants to provide activities in Toronto during the FIFA world cup, some of which will extend for the next year or two.

Still, there are many more cities, such as Winnipeg, Hamilton, London and Edmonton who have expressed interest in starting their own local programs, and don't have the same designated funding.

"We're reaching out to government, we're reaching out to private foundations, we're reaching out to community foundations, we're reaching out to corporations for sponsorship," Khedr says. "We were successful enough to run the program so far, but today we declined one of the locations [that wanted] to start a program, because we don't have money for it."

Despite their challenges, they have helped foster a sports community that is built on trust and care. Khedr recalls one of the program participants saying, "I consistently come to the program because I know that if I don't show up one week, someone will ask about me."

Khedr says "the main reason we're here is to raise awareness about unhoused populations, about poverty, about people who are recovering from mental health and addiction. To give a second chance to some of our populations, our citizens, and our residents in our cities."

He also hopes to reduce the judgment that comes with homelessness. "Any of us could be in financial trouble the day after, be in a shelter, or a place, or asking a family member for help," he said, adding that financial setbacks can affect anyone.

In Brampton, mixed sessions take place on Tuesdays from 2:30 - 3:30 p.m. at the SaveMax Sports Complex. Mississauga offers programming for women, and information can be requested by emailing mississauga@canadianstreetsoccer.ca.

BOYS AND GIRLS CLUB PEEL YOUTH COUNCIL



BGC Peel Youth Council Application Opens July 31, 2026.

Are you 14 to 24? Ready to lead, inspire and make an impact in the BGC Peel communities across Mississauga, Brampton, and Caledon?

Now is your chance! Share your ideas and drive positive outcomes for youth in the Region of Peel. The Youth Council is a key partner in delivering the 2025-2029 BGC Peel Strategy plan. Launching in late September / early October 2026.

Email Bindi at info@bgcpeel.org
Subject: BGC Peel Youth Council
2026-2027

Applications close August 31, 2026.

Youth Council Members will:

- Bring unique perspectives directly into the governance and work of BGC Peel.
- Provide updates to the BGC Peel Board and staff on issues relevant to youth today.
- Ensure youth are represented in key decision-making processes
- Participate in specialized BGC Peel committees.
- Serve as role models for BGC Peel youth across the Region, embodying and refining leadership qualities.
- Meaningful opportunities to build a professional network
- Connect with mentors and peers across the GTAH.
- Gain hands-on experience by assisting in the planning and execution of youth events.



67 Hillcrest Ave, Mississauga, ON
Saturday, August 29 • 11 AM - 4 PM



“Over 48 hours after arriving to an ER with vomiting and nausea, my 30 year old sister was admitted in the hallway of a large hospital, connected to an IV on a sofa that turned into a bed.

She was taken for a last procedure (a “scope”) before returning on a stretcher to a spot near the nursing station. There was very little privacy in that busy and noisy area, with paramedics coming in with patients from ambulances, and beeping sounds all around.

Her husband was beside her and they called me on the phone when the doctor arrived. I began driving to the hospital right away after the doctor began to speak, telling her directly she had stomach cancer, that it was very serious, and the procedure she just had done was one of the worst the specialist had ever seen. Then the doctor left, her husband by her side, and me in the car.

She died 10 days later peacefully with her closest family by her side. She was able to briefly leave the hospital during those days with the hopes she would get some chemotherapy but the appointment for that never came.”



EXPERIENCES OF HALLWAY HEALTHCARE



“I went with someone to the ER this past winter. It was late in the evening. When we arrived, there was no one other than patients in the triage area. No nurses, no security guards, no staff of any kind, just a slowly growing line of people needing help.

There wasn't any way to sit while waiting in line and no indication of when anyone would be back or where they'd gone. We probably waited about half an hour before anyone came to help.

We weren't able to locate any staff member. The rest of the ER was behind doors locked from that side.

By the time a nurse came, one of the people waiting was an older man with serious chest pain, who was having trouble breathing. He was seen first, because they were fairly sure he was having a heart attack. I think he still waited around ten minutes.

They told him off for not calling 911, which is definitely what he should have done, but by that point it was too late to go back in time and redo it. He was whisked away. I don't know if he was okay. I hope he was.”



FROM THE HALLWAY TO HOPE

BY: CARA ROBINSON
PEER WELCOMER AT HART HUB BRAMPTON

There was a time in my life when addiction defined how the world saw me before anyone took the time to know me. Handcuffs, homelessness, scars, and the label of "drug addict" often spoke louder than my voice. Some of my most painful memories did not happen on the streets, they happened in hospitals, where I went seeking help.

While incarcerated, I developed severe pneumonia. By the third day, every breath had become a struggle. I was taken to the hospital, where the waiting room was nearly empty, yet I remained in triage for more than four hours, handcuffed and under the watch of correctional officers, while gasping for air.

My condition was not taken seriously until I collapsed from a lack of oxygen. Only then was I rushed into a treatment room. Doctors later drained fluid from around my lungs and explained that my condition had become life-threatening. I had come frighteningly close to losing my life.

Another time, after being stabbed in my hip, the wound became badly infected. I arrived at the emergency department with a high fever, vomiting, dizziness, and a large abscess. I was first met by security and told to leave before eventually being triaged and left on a stretcher in the hallway.

Exhausted, I fell asleep. The next morning, I was told I had missed my name being called and would have to register again. Before I could, I collapsed with a fever of 104°F and dangerously low blood pressure. When I regained consciousness, the doctor looked at me and said, "We almost lost you."

I replied, "Yeah you almost did, but. I was exactly where your staff left me—in the hallway, struggling to breathe."

These are only two of many experiences that left me feeling invisible. I often avoided seeking medical care because I feared the judgment more than the illness. No one should ever feel they are less deserving of compassion because of addiction. Today, I am approaching nine years of sobriety.

Recovery gave me more than freedom from addiction. It gave me purpose. I returned to school twice. First, for Medical Office Administration, because I wanted every person entering a healthcare setting to feel welcomed, respected, and seen. Then, for Addiction Support and Community Service Work.

I am currently a Peer Support Worker because I wanted to stand beside those living with mental health challenges and addiction, reminding them they are not alone, they matter, and recovery is possible.

My past does not define me; it prepared me to serve others with empathy. I cannot change what happened to me, but I can help someone else's experience be better.

Christa Hiscock at CMHA, thank you for always treating me with kindness, dignity, and hope when I needed it most.

Dr. Rondal Phillipson and Karen Brown at Tikun Addiction and Withdrawal Management Services, thank you for believing in recovery and helping people rebuild their lives with compassion.

Adam Chalcraft and Nat Kaminski at Moyo Health & Community Services, thank you for your encouragement, support, and for helping people feel seen and valued.

Regeneration Outreach Community and Knight's Table, thank you for the warm meals, kindness, and reminder that even the smallest acts of compassion can change someone's day—and sometimes, their life.

Most importantly, thank you to everyone who looked beyond my addiction and saw the person I was always capable of becoming.

A NEW LOCATION FOR REGENERATION OUTREACH?



By: Tough Times

Regeneration Outreach in Brampton has secured a new location, though the new facility may take years to build and open. The site previously served as a fire and emergency services station, and will be located at 8 Rutherford Road South.

This comes after legal action was threatened against Regeneration Outreach by Brampton City Council if their "concerns were not addressed," triggering pressure for the organization to move from the space at Grace United Church it has used for over a decade.

The city and region will be responsible for leasing the space and demolishing the former fire station.

The new space, when open, is expected to operate 24 / 7 with a food pantry, meals, laundry facilities, washrooms, showers, clinic/medical supports as well as temporary overnight accommodations.

NATIONAL ADDICTIONS AWARENESS WEEK



Photo via Unsplash

By: Tough Times

The 2026 National Addictions Awareness Week will be taking place from November 1 to 7, 2026. The Community Addictions Peer Support Organization (CAPSA) will hold their second annual week of action, centered around "Inspiring innovation through action: connecting communities to care."

THE BRUTAL REALITY OF HEAT ON THE HUMAN BODY: ONTARIO, TAKE ACTION

BY: TANYA BURKAT, BRAMPTON CENTRE CHAIR, ACORN



Photo via ACORN Canada

Heat is recognized as the leading cause of weather-related deaths in Canada and around the world. Yet, a recent ACORN Canada survey of 700 tenants found that 44 per cent do not have access to AC, and nearly half say cost is the only reason. Over 90 per cent of tenants reported being severely impacted by extreme heat. Tenants are actively getting sick just trying to survive the summer in their own apartments.

When indoor temperatures skyrocket, the body's cooling mechanisms fail, leading to rapid, systemic organ damage. This is a medical emergency that particularly threatens children, seniors, and those with pre-existing conditions.

- **Heart:** Forced to pump at dangerous rates to cool the skin, leading directly to heart attacks, cardiovascular failure, and lethal drops in blood pressure.
- **Kidneys:** Dehydration concentrates bodily toxins, causing acute kidney injury (AKI) or complete renal failure.
- **Brain:** Extreme internal heat breaks down the blood-brain barrier, resulting in swelling, confusion, violent seizures, coma, and death from heat stroke.
- **Gut & Liver:** Decreased blood flow causes the gut barrier to rupture, spilling toxins into the bloodstream while the liver suffers severe, irreversible cellular damage.
- **Muscles:** Muscle tissue disintegrates

While the City of Toronto stepped up to fund 3,000 free AC units for vulnerable residents, this piecemeal approach leaves Mississauga tenants completely exposed. In 2021, the BC government partnered with BC Hydro to distribute 8,000 free air conditioners to save lives after a heat dome killed over 600 people. The Ontario government has given zero.

The provincial government's new air conditioning rules under Bill 97 have given corporate landlords a legal green light to price-gouge low-income families trying to survive the summer. Under this law, landlords can slap expensive, unproven utility surcharges onto tenants whose utilities are included in their rent. Allowing landlords to use arbitrary estimates to guess hydro usage is an open invitation for them to exploit tenants for extra profit.



Photo via ACORN Canada

This forces low-income families to make an impossible choice: risk deadly heat stroke, or pay the surcharge and face eviction for falling behind on rent.

Currently, only tenants who pay for their own hydro can apply for the \$35–\$75/month credit on their hydro bill. Because these predatory AC surcharges are tacked directly onto rent bills, low-income tenants with utilities included in rent are locked out of the Ontario Electricity Support Program,

The provincial government's continued inaction on extreme heat has turned into a life-or-death crisis for low-income tenants across Mississauga and the entire province.

ACORN is calling on the provincial government to address these critical issues and meet our demands for AC for all.

1. **Fund a province-wide program** to provide free, energy-efficient air conditioners to low-to-moderate income and heat-vulnerable tenants.
2. **Stop the price-gouging and close the Bill 97 loopholes.** Ban landlords from charging extra fees for air conditioning to tenants who have utilities included in their rent.
3. **Expand energy support (OESP) and increase summer relief** to fully cover any extra AC surcharges forced onto tenants by landlords and account for higher rates and the increased electricity cost of running AC.

It is unacceptable that the province has downloaded the responsibility of keeping people alive during extreme heat events onto municipalities and cash-strapped tenants. With Ontario reaching its hottest temperatures in 90 years this week, we need immediate provincial leadership.

MORE THAN MY HARDEST MOMENTS

BY: SAMANTHA MATHER
PEER WELCOMER AT HART HUB BRAMPTON



There have been times in my life when asking for help felt harder than continuing to struggle alone.

I have lived through childhood trauma, addiction within my family, my own struggles with substance use, teenage pregnancies, mental health challenges, and the long process of rebuilding my life.

During some of my most difficult moments, I needed healthcare and support, but I was often afraid of how I would be treated once I told the truth about what I was experiencing.

It is difficult to be honest when you feel that one part of your story may become the only thing people see.

When substance use, poverty, trauma, or mental health concerns are involved, people can be treated as though they are difficult, irresponsible, or unwilling to help themselves.

I remember what it felt like to carry shame into places where I was supposed to receive care. Sometimes I felt that I had to prove I was worthy of being helped.

Other times, I avoided asking for support because I did not want to be judged or made to feel smaller than I already felt.

What I needed most was not someone to lecture me or tell me everything I had done wrong. I already carried those thoughts with me every day. I needed someone to recognize that I was still a person underneath everything I had survived.

The moments that stayed with me were the moments when someone listened without rushing me. When someone spoke to me with kindness. When someone understood that unhealthy choices can sometimes begin as ways of surviving pain.

Those experiences did not fix everything immediately, but they helped me believe that change was possible.

Recovery did not happen in a straight line. It involved setbacks, difficult decisions, grief, accountability, and learning how to live differently. It also required me to understand that needing help did not make me weak or undeserving.

Today, I have rebuilt a life that once felt impossible. I work in mental health and addictions, support others facing their own struggles, and am preparing to become a grandmother. My past is still part of me, but it is not the only thing that defines me.

My experiences have taught me that healthcare is not only about treating an illness, injury, addiction, or diagnosis. It is also about how a person is treated while they are vulnerable.

People remember when they are dismissed, judged, or not believed. They also remember the person who looked beyond their circumstances and reminded them that they still mattered.

Sometimes, being treated with dignity is the first step toward believing your life can become something different.

HEAT RESOURCES

High temperatures can be deadly. The risk of heat-related illnesses increases with the temperature, time spent indoors, and individual sensitivity. Children, seniors, and those with chronic illnesses are most at risk.

During heat warnings, the Region of Peel encourages individuals to seek shelter in public spaces with air conditioning, including shopping centres, community centres, libraries and homeless shelters.

In extreme heat, Peel municipalities will open cooling centres and public spaces to offer heat relief.

MISSISSAUGA



PEEL REGION



CALEDON



BRAMPTON



NEW ONTARIO WATER AND SANITATION LAW COULD PAVE THE WAY FOR THE FINANCIALIZATION OF PUBLIC WATER

BY: MEERA KARUNANANTHAN,
ASSISTANT PROFESSOR AT CARLETON UNIVERSITY

The following is a republished excerpt from The Conversation.

In November 2025, the Ontario government rushed through new legislation to dramatically restructure public drinking water and wastewater services without any public consultation.

The Water and Wastewater Public Corporations Act (WCA) authorizes the province's minister of municipal affairs and housing to remove water and wastewater services from local governments and assign them to arms-length governance structures by classifying them as "water and wastewater public corporations (WCCs)."

Despite being buried among other controversial measures in the omnibus Bill 60, the WCA drew considerable public backlash. A broad-based coalition was formed, bringing together water workers, environmental organizations, physicians and anti-poverty activists to push back against what seemed like the stealth privatization of provincial water infrastructure.

In response, Premier Doug Ford's government tabled amendments to restrict shareholders in WCCs to "a municipality, the Province of Ontario, the Government of Canada or an agent of any of them" under Bill 98, which is now in third reading.

But University of British Columbia law professor Joel Bakan has concluded these amendments don't rule out privatization. The possibility of shares being held by the ambiguously termed "agent" of the state opens the door for any number of public-private configurations.

While critical details might be clarified in upcoming regulations, a troubling picture emerges when connecting the dots. Whether the WCA leads to outright privatization, its proposed reforms are consistent with an insidious global push to make municipal water and sanitation systems more amenable to private

investment. This essentially transforms them into tradeable assets.

This process, known as financialization, would erode the public health and social mandate of public water infrastructure, undermining the capacity of communities to cope with growing ecological and financial stresses.

Around the world, fierce public opposition has resulted in the termination or non-renewal of private contracts in hundreds of communities around the world. Even the staunchest proponents of privatization now view water as too politically risky and insufficiently profitable for private sector engagement.

At the same time, there has been a growing appetite for "bankable" water infrastructure projects in the face of growing economic uncertainty. In response, international financial institutions and other powerful entities are pushing for policy reforms to pave the way for the integration of water into global financial markets.

Privatization is not a necessary precursor to financialization. Corporatized public utilities, argues British water researcher Kate Bayliss, can perform the same function of laying the groundwork and creating revenue streams that can eventually be captured by financial markets.

In fact the World Bank, the largest funder of water projects in the Global South, promotes reforms to publicly owned and operated utilities to improve their risk-return profiles for commercial investment. In other words, public institutions are restructured to absorb risk and shift costs to local communities in order to ensure greater extraction of private profit.

The Ontario legislation follows this model by dismantling municipal services and restructuring them into arm's-length WCCs.

By removing water and sanitation services from local control, WCCs create a more

streamlined system for profit generation. Key decisions — including finances, contracts and water rates — would be made by corporate boards with little direct accountability to communities.

Measures that generate value for shareholders will likely take precedence over public health and equity-related considerations.

As Brock University water management expert Lina Taing warns, the proposed consolidation of operations will ultimately undermine hard-won accountability provisions. It will also diminish the "site-specific knowledge" that is central to the multi-barrier approach developed in the aftermath of the Walkerton contaminated water crisis in May 2000.

The plan would take effect most immediately in Peel Region, one of the most racially diverse municipalities in the country. By 2029, jurisdiction over water and wastewater services will be transferred from Peel to its three lower-tier municipalities, which will then be required to deliver services exclusively through a newly created WCC.

The financial implications for Peel are deeply troubling. Water and wastewater infrastructure in Peel was built over decades with public funds. Under the new Ontario law, this infrastructure would be transferred to a WCC while Peel's existing debt remains with the municipal government.

In other words, the assets are transferred while the liabilities stay behind. Peel will be left servicing legacy debt with no corresponding revenue stream, while revenues generated from water bills flow to WCC shareholders who bear no responsibility for that debt.

This is a textbook example of what scholars describe as risk socialization and profit privatization. Simply put, the public bears the burden while shareholders capture the reward.

Read the full article at theconversation.com

**THE
CONVER
SATION**



PEEL COMMUNITY LAND TRUSTS

BY: MICHELLE BILEK

The Peel Community Land Trusts is a newly established Not for Profit created to address the lack of community engagement, oversight and ownership of community assets.



We're grounded by localized, collective and collaborative community stewardship to develop and protect permanently affordable housing, community spaces, and other assets such as faith institutions, businesses, and community green spaces.



We ideally wish to collaborate to initiate neighbourhood-based development and service transformations for the needs of the community throughout Peel Region.

Many forms of affordable housing being developed today are at risk of becoming unaffordable overtime, due to insecure land tenure, time-limited affordable mandates, and lack of long-term financial viability.



Existing affordable housing spaces are being lost or transformed in speculation, disruption by new transit nodes, changing needs, displacement, and the lack of appropriate accessible



services - all contributing to a situation where our communities feel voiceless and isolated.

We are the Peel Community Land Trusts and want to help our neighbourhoods to access assets for their good and steward those assets by community forever.

Our vision is to create a sector that is well-connected, enabled by government policy and funding, driving a major increase in the national share of non-market housing assets.

Peel Community Trusts is governed by community leaders who have been serving vulnerable, marginalized and stigmatized people for many years. These community leaders are the Directors of the Peel Community Land Trust.

With their passion and expertise, we can provide all the tools, resources, and relationships to establish a land trust where the neighbourhood envisions, collaborates, takes leadership and eventually ownership of land and spaces for the good and prosperity of that community forever.



For more information or to get involved, email info@peelclts.ca or visit peelclts.ca

WILDFIRE DONATIONS AND SUPPORT

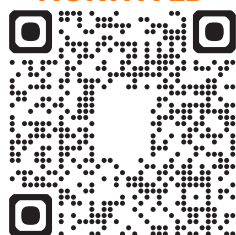
As the wildfires continue to devastate Northwestern Ontario, many Indigenous communities continue to need support.

To help support wildfire relief and affected communities, you can donate to True North Aid or Namaygoosisagagun First Nation through the Anishinabek Nation 7th Generation Charity.

When families have to leave their homes without notice, they may be forced to leave pets behind.

To help evacuate animals and pets, you can donate to the Northern Reach Dog Rescue Network. The Ontario SPCA and Humane Society is also helping evacuees and their pets by providing resources and pet food.

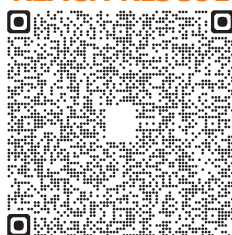
**TRUE
NORTH AID**



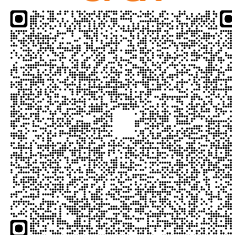
**ANISHINABEK
NATION**



**NORTHERN
REACH RESCUE**



**ONTARIO
SPCA**



WHO DOES WHAT?

THE SENATE

- Non-elected oversight
- Investigate & report on areas of public concern
- Approve, amend or veto bills from the House of Commons

GOVERNMENT OF CANADA

- Passports
- Citizenship
- Criminal Law
- RCMP
- Currency
- Federal Taxes
- Foreign Affairs
- National Defence
- Postal Services
- Indigenous Lands & Rights
- Railways
- Pipelines
- Pensions

GOVERNMENT OF ONTARIO

- Healthcare
- Education
- Provincial Parks
- Highways
- Driver's Licenses
- Metrolinx & GO
- Natural Resources
- Energy (OPG)
- Provincial Police
- Property Rights
- (Most) Courts
- Landlord & Tenant Supports
- Birth & Marriage Certificates
- ODSP & Ontario Works

PEEL REGIONAL COUNCIL

- Garbage and Recycling
- Paramedic Services
- Regional Roads
- Water and Wastewater
- Peel Regional Police
- Housing Subsidies
- Social Housing
- Vaccine Clinics
- Long-Term Care

CITY AND TOWN COUNCILS

- Bylaws
- Fire Services
- Local Roads
- Snow Removal
- City Parks
- Community Centres
- Public Transit
- Zoning Regulations
- Property Taxes
- Animal Control
- Libraries

SCHOOL BOARDS

- Allocating funding
- Choosing locations
- Maintenance
- Furnishing classrooms
- Extracurricular programming
- Hiring teachers & staff
- School buses

APPOINTED VS ELECTED AND STRONG CHAIR POWERS IN PEEL

Bill 100, the Better Regional Governance Act, 2026, from the Government of Ontario has made some significant changes to municipal governance.

Among them is that the "head of council" of eight municipalities, including Peel, will now be appointed by the Minister of Municipal Affairs and Housing.

Previously, regional chair positions have either been directly elected by voters or chosen by the elected councillors.

The new, non-elected chairs will also be granted "strong chair powers," which will mirror the previously created and controversial "strong mayor powers."

With these powers, the appointed chairs are expected to be able to veto bylaws that interfere with "provincial priority," have control over budgets, hire and fire some city staff and propose bylaws related to provincial priorities, which can be passed with only one-third support from council.

Under Bill 100, the Minister will also be allowed to require the use of weighted voting, which would give some council members more votes than others. When, or if, weighted voting is used has previously been left to councils to decide.

In 2017, amidst a greater discussion about equitable representation on Peel Regional Council, weighted voting was suggested, but quickly pulled from consideration.

The bill has been heavily criticized, including by the Association of Municipalities of Ontario (AMO) for being undemocratic and weakening voter accountability.

These changes come at a similar time to the appointment of "supervisors" to numerous Ontario school boards, including the Peel District School Board. They are effectively replacing the elected trustees.

The upcoming elections in October will see new trustees and councillors elected into the changing municipal landscape.

HART Hub Brampton

Community Supports Available:

- Nursing
- Primary Care
- Counselling Services
- Psychiatry
- Peer Support
- Housing Support
- Addictions Support
- Vocational Support
- Basic Needs – Laundry, Showers

Contact Us:

✉ info@harthubbrampton.ca

☎ 905-451-4278(HART)

📍 HART Hub Brampton
10 Peel Centre Dr,
Building B, Suite 100,
Brampton, ON, L6T 4B9

Open Monday through Sunday 9:30AM – 8:30PM



VOTING MUNICIPALLY WITHOUT A FIXED ADDRESS

You can still vote in municipal elections if you're homeless or do not have a fixed address. You just need to be:

- 18 years or older
- A Canadian citizen
- Not legally prohibited from voting
- Eligible to vote.

While homeless, you're able to vote in the area where you most frequently went to eat or sleep in the five weeks before the election.

This would be considered your residence when voting. This can include food banks, shelters, and community health care facilities.

If **you're on** the voters list but do not have proof of identity

with an address listed, you'll also be asked to fill out a declaration of identity form at the voting location.

To get on the voters list, you do need to submit a piece of ID with both your name and housing address.

Many of the forms of ID accepted are the same as in a provincial election. Things such as hospital records or pay receipts can help serve as proof.

Ontario Photo Cards are also acceptable ID to vote and register to vote. "Recognized institutions" can allow their address to be used by applicants without a permanent residence.

LIST OF ID ACCEPTED



REGISTER TO VOTE

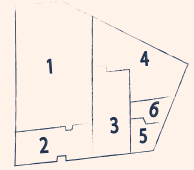
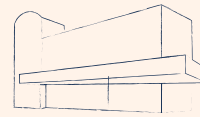


PHOTO CARD INFORMATION



In Caledon...

each ward elects a town councillor.

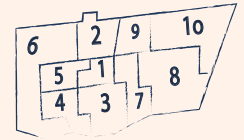
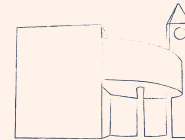


Wards 1,2,3 and Wards 4,5,6 each collectively elect a **regional councillor**.

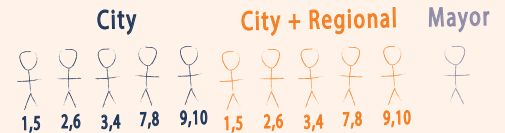


In Brampton...

each pair of wards elects both a city councillor and **regional councillor**.

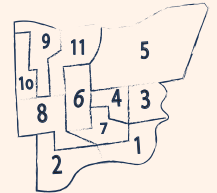
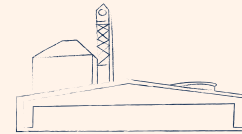


City council then selects three city councillors to also sit on Peel Regional Council.



In Mississauga...

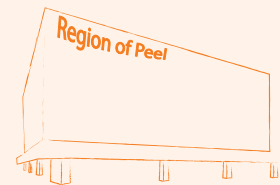
Each ward elects one **regional councillor**.



Since regional councillors in **all** cities already also sit on their local council, there are no specific "city councillors"



Peel Regional Council is made up of the three elected **mayors**...



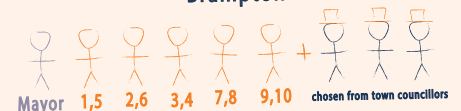
The two **regional councillors** from Caledon, the 11 **regional councillors** from Mississauga and...

Caledon



The five **regional Councillors** and the three selected city councillors from Brampton, for eight total.

Brampton



Mississauga



There is also a regional chair, who will be appointed by the Government of Ontario after the elections.

THE UPCOMING MUNICIPAL ELECTIONS MAY MATTER MORE THAN EVER

BY: CANDICE ZHANG, ONTARIO NONPROFIT NETWORK



Municipal elections in Ontario are set to take place on October 26, 2026 which is less than five months away. Municipal elections tend to be overlooked the most, with voter turnout usually significantly lower than provincial and federal elections.

In 2022, the average voter turnout for Ontario municipal elections was 32.9 per cent, a decline from 35 per cent in 2018.

As a provincial organization, ONN has always focused on nonprofit engagement in provincial elections, but not as much when it comes to local elections.

But, with increased centralization of power, and a growing lack of belief in our democratic processes, this year's local elections might matter more than ever before. As a sector, we must step up.

Currently, there is a general feeling of hopelessness and overwhelm when it comes to our democratic processes.

With governments passing legislation with minimal to no meaningful consultations and public concerns increasingly disregarded in decision making, it's no surprise that more and more people are becoming apathetic towards democracy.

As nonprofits, many of the issues we work on require systemic changes through public policies on all levels of government to handle root causes. Many of us also serve communities who face barriers when it comes to democratic engagement.

However, some of us tend to shy away from election engagement work, thinking it is too risky or not within our mission.

In reality, we need to do more of exactly what most of us don't think we can or should do: advocate with and for the communities we serve, and participate in elections.

Vu Le, a nonprofit thought leader once wrote that playing safe "prevents us from engaging in political actions and systems change work that are necessary to effectively address the root causes of inequity."

In this municipal election, nonprofits must play a more active role in demanding better from our system, candidates, and elected leaders, alongside the communities we are part of.

Election engagement is not just about voter turnout, it is also about local organizing, movement building, and deepening connections with our communities.

LOADS OF CARE

Neighbours caring for the unhoused by providing access to a basic human need: The Dignity of Clean Clothes

"We provide free shower passes to our clients to be used at local community centres, but then they put on the same dirty clothes."

Veroy Clarke, Community Development Coordinator,
Open Window Hub, City of Mississauga

Providing
Pre-paid
Laundry
Vouchers

"LOADS OF CARE" is a love and kindness initiative of local faith communities in partnership with City Councillor Martin Reid and the Peel Poverty Action Group for the good of Mississauga.

For more information contact Sam Cooper at scooper@meadrc.com
Or join us by donating at: www.meadowvalecommunitychurch.ca/giving

A HERSTORY OF TOUGH TIMES: A TRIBUTE TO EDNA TOTH

BY: MICHELLE BILEK (Originally Published 2022)



In reviving Tough Times, it's important we acknowledge and honour the woman who started it all – Edna Toth. I first met Edna over 15 years ago, as a political advocate and fierce commitment to social justice. At the time, Edna was involved in many political campaigns and championed local candidates and progressive politics during and in between political campaigns.

In her retirement from being a Librarian with the City of Mississauga Libraries, Edna wanted to provide an opportunity for folks with lived experiences of poverty and homelessness, who she met at Knights Table in Brampton, with an opportunity to share their stories and utilize their experiences to inform advocacy efforts and eventually policy. This was the beginning of Peel Poverty Action Group.

PPAG shared a space and held meetings at Knights Table and eventually other locations within Peel. Discussions centred on what people were dealing with, whether that be an eviction, loss of employment, barriers to social assistance, accessibility issues, or even where they were going to sleep for the night.

Edna, the warrior she was, would make calls – to politicians, leaders and bureaucrats at the Region of Peel, local program and service providers –

basically to anyone who would listen and provide a solution.

Everyone listens to Edna, and everyone feared Edna too, because she would let everyone know if you did not respond or addressed the issues that PPAG members were dealing with (letters to councillors, the Mayors, letters to the Editor of Mississauga News and Brampton Guardian).

Tough Times became the tangible means to provide a forum for people with lived experience to contribute and feel part of a community. Articles ranged from providing information on programs and services, to local advocacy efforts, and information on how to seek out supports. Tough Times had focused papers during elections, highlighting candidates and provided means for people with no fixed address to get out and vote.

Tough Times published 10,000 papers every two months and its distribution included libraries in the region and front line programs and services, including Knights Table and Food Banks.

It is with this fierceness and in her honour, we continue the legacy of Peel Poverty Action Group and Tough Times. We hope to do this work justice in the name of our social justice warrior Edna Toth.

**2026
BRAVE STEPS
TO END VIOLENCE**

**14TH ANNUAL
STEPS TO END VIOLENCE**

**Sunday August 23, 2026
9:30AM - 1:00 PM**

**J.C. Saddington Park
53 Lake Street, Mississauga**

**Join us in taking Brave Steps
to end gender-based violence!**

Registration Includes:

- Lunch
- Fun Kids Activities
- Event T-Shirt
- Face Painting
- Ice Cream
- Caricature Artist

Register Now!

<https://shorturl.at/mQ0eP>

EMBRACE

SCAN HERE TO REGISTER!

TOGETHER. WE REMEMBER.
TOGETHER. WE CAN PREVENT.

**INTERNATIONAL
OVERDOSE
AWARENESS DAY**

**AUGUST 31
4:00 PM – 9:00 PM**

**LAKE PROMENADE PARK
PICNIC AREA B**

*Remember.
Support.
Prevent.
Together.*

Everyone is welcome. Together, we can create hope, compassion and change.

Let's Save Lives.

FOR MORE INFORMATION: CAROLYNHARRIS@GMAIL.COM

The 25th BIEN Congress

**Basic Income &
the Polycrisis:**

The key to unlocking the puzzle

TORONTO, CANADA

Canada Day | August 19, 2026

25th BIEN Congress | August 20 - 22, 2026



BIEN2026.NET

The BIEN 2026 Congress is a free event for all. Registration is open to all. The event is organized by the BIEN 2026 Congress Committee. The event is organized by the BIEN 2026 Congress Committee.

DISCUSSING PEEL REGION'S HOMELESSNESS UPDATE

BY: WILLIAM H. GRAHAM



I read the 2025 PIT (Point in Time) report when it came out and got several calls for comments from individuals. One comment from several people was that "It was accepted by council with no comments"

Comparing it to the previous ones it seemed as though it was beefed up and added to the numbers to justify the need for more money, staff and facilities.

The three things that Peel does really well:

1. Write reports.
2. Have group meeting complimenting each other on the great work they are doing.
3. Protect each other.

The second proposal (using HRIF Funds) helping unsheltered homeless move into housing. "The proposed project outlines a coordinated encampment - to - housing pathway grounded in Critical Time Prevention principals"

This sounds great but it is words only and the reality is that some people are put in apartments without beds etc., individuals go, in some cases for months, without a contact with a worker, even ones with medical issues.

They are set up to fail, and be back in the shelters to keep the shelter numbers up. Then Peel workers can say "We tried, our numbers are back up, we need more money and staff". The homeless are the cash cows.

"As warmer weather approaches, our team will be out in the community connecting

with residents and partners" Wow! Sounds good for the warm weather. Don't the vans have heaters? On Christmas morning with -8 deg. temperatures the people came out of their tents shivering as we gave them coffee.

What about the lady sitting on the steps below the Tims close to Cawthra. She is sitting there most days and in the Tims on rainy days. We help keep her in Tim cards, which is some help. Where is the street outreach and Social workers? Surely they can't say they have never seen her for the past two or more years.

They deserve better. Must be someone around with a heart and not on vacation or away on a conference. I could list many others in the same spot. We see them daily.

Shame on an uncaring system. If it was your parent or a child of yours would you not care? Would you not stop to help?

Regarding the emergency shelter update: Wilkinson shelter has been hated by anyone who has been there or had a relation there. Theft, violence etc. are the common comments I have heard over the past 20+ years. The redevelopment should include staff. That was the problem more than the building. Cawthra shelter is very little better with barricades to protect the staff from those they are paid to serve.

While the encampments are a big concern to Peel and others, the question should be why people prefer a tent, even in the winter rather than the shelter. Yes, shelter

operators say that people prefer tents so they can smoke and use dope. I believe that is garbage.

Many people also sleep in their cars, year round, rather than the shelters. Why? There is more to it than this, but I will talk about shelters at another time, and why people choose not to live in them. Encampments have been studied to death. I have a binder of the studies. There is nothing more to learn. People just have to practice what is already known and want it to work.

The reaching home program and Furniture Bank is necessary. Seeing a person put in a \$2,800.00 a month apartment without a bed does not make sense to me. But, I do believe they are being set up to fail.

Congratulations to all recipients: A lot of deserving groups were included in Leslie's report, but one important one was left out: The Open Door. It opened fifty years ago when Square One opened and the lady that started it is still working there fifty years later.

Her daughters and others also help. The last time I was there I saw a place amazingly well organized with clothing and items well documented and available for those they serve. On that day they were giving a noon meal to about 30 people. I am in awe of their dedication and commitment to those good folks needing help. We owe them our thanks.

You say: To donate to a shelter, call 905-791-7800. Seems that most of the woman and children products that we brought to the Family shelter on Argentia ended up in the manager's office and any ladies I spoke to said they were refused and nothing came to them. This has happened at other shelters. Not the only time. Now we give directly to the person, or not at all.

Peel Region has the resources and staff to do a better job. Getting people off the street in a shelter is not enough. They should be helped to get up and running and back into society. They have a "wrap around" system that has a good rating, but they have to put the work into making it work. Years ago, it worked, at least to some extent.

Peel can and should do better.

DO YOU HAVE PRESCRIPTION MEDICATION COVERAGE?

20 per cent, or around \$8.42 billion worth of prescription medications in Canada are paid out-of-pocket, according to a 2023 report. Rising medication costs have led to people with high-cost medications paying hundreds more per year.

While the Trillium Drug Program can be of benefit for those who spend over four per cent of their household income out of pocket on prescription medication, the high deductible can be a serious limiter for those who spend nearly all of their income on essentials like food, housing and transportation.

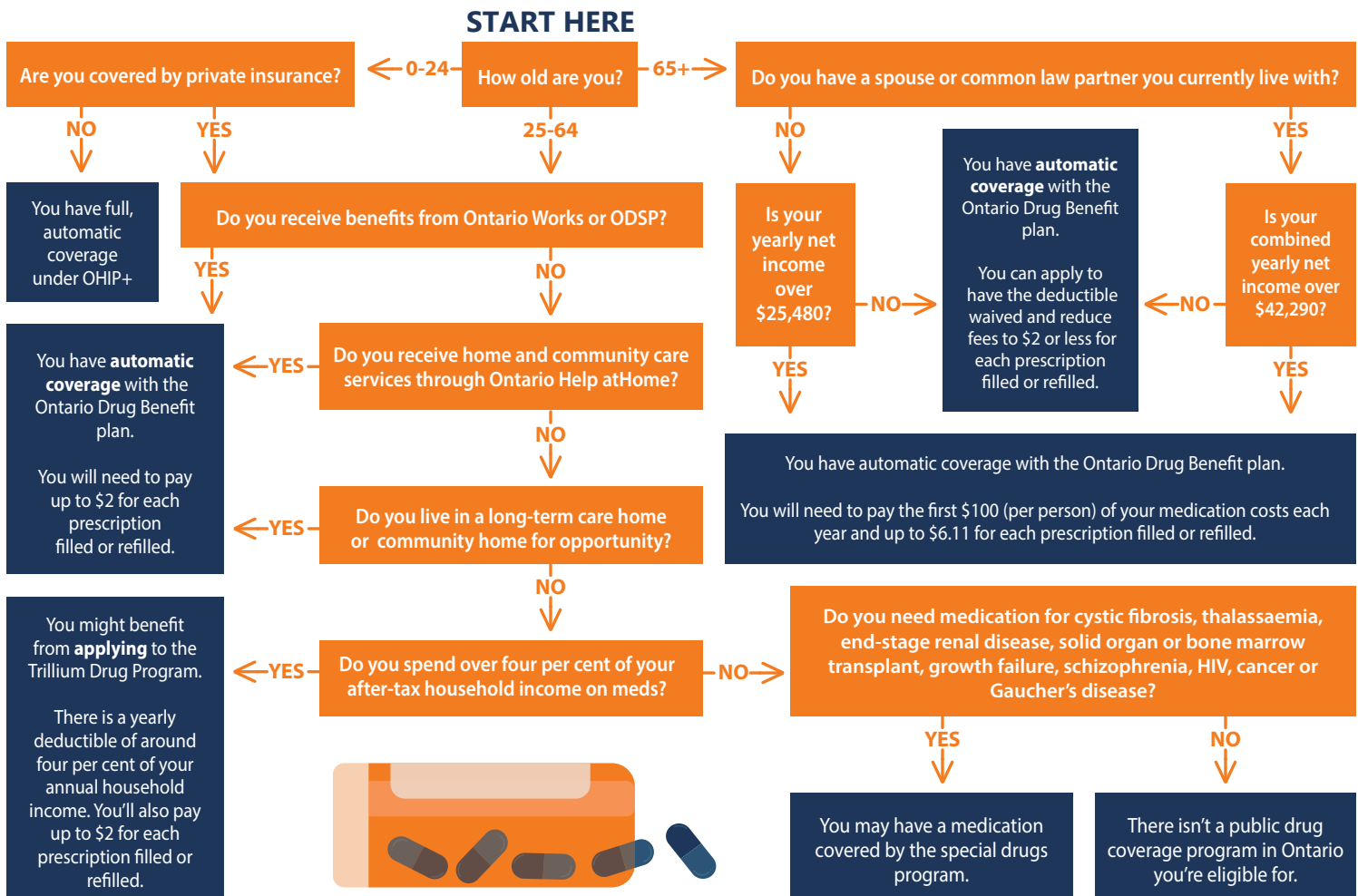
According to a 2021 Government of Canada study, over one in five Canadians reported not having any prescription medication insurance. Those without coverage were nearly 2.5 times more likely to skip or delay their prescribed doses because of cost.

A 2017 study found that over half of Canadians who did not take their medication as prescribed were not aware of public drug coverage programs.

In 2015, one in ten Canadians reported some level of cost related non-adherence to prescription medication.

In 2024, Statistics Canada data found that 14.2 per cent of Ontarians delayed, reduced or skipped doses due to cost, with just over half of Ontarians having at least one chronic condition.

Nonadherence to prescribed medications has been found to lead to greater need for in-patient help, emergency room visits, and a higher mortality rate.



While many medications are covered by these programs, some are not. However, if you are on OHIP+ or the Ontario Drug Benefit Plan and one of your meds isn't covered, your doctor or nurse practitioner can apply to the **Exceptional Access Program**. They will grant coverage on a case-by-case basis and you **cannot** apply on your own behalf.

**LIST OF
MEDS
COVERED**



A 'MITEY' HUMAN TOUCH

BY: CATHERINE SOPLET



Meet Debbie, a young senior and long-time resident of Peel Region, and her Goldendoodle dog Mitey.

Last October during Breast Cancer Month, St. John Ambulance Therapy Dog Program ambassadors Debbie and goldendoodle Mitey teamed up with Peel Region Paramedics in its 20th Annual Open House in Brampton.

"I did this event with my mother in mind," says Debbie. "She's beat breast cancer three times."

"Mom raised our family to always give back – give something, whatever you can."

As a 12-year volunteer with St. John Ambulance (SJA) – Therapy Dog Program, Debbie makes regular hospital and long term care visits to shut-ins, and is an ambassador for health promotion, and other corporate and public events.

The SJA Therapy Dog Program involves trained volunteer handlers and dogs visiting informal settings to enhance quality of life. The program fosters dignity, affection and support for making social bonds and conversation.

In 2018, University of Saskatchewan research on SJA Therapy Dogs visits shows that human-animal relationships improve mental, emotional, and social health for senior veterans.

Visiting dogs provided them with stress relief, companionship, and emotional support. As a result, they reported a better sense of calmness and other health outcomes.

Even more than other seniors the same age, older veterans often face social isolation and loneliness worsened by aging and poor physical health, combat trauma, PTSD, depression and dementia.

Debbie has lived insights into the benefit of SJA Therapy Dogs Program, with her own onset of midlife disability. Not only did her

job prospects end - but also her disability pay fell short of income replacement.

"Persons living with disabilities (PLWD) often become homebodies," says Debbie.

"Back then, before Mitey, I had my people-friendly dog Tuffy and weekday time to serve. I contacted St. John Ambulance to volunteer for Therapy Dog program visits, 1 hour per week in a location close to home."

Now Debbie's role has expanded over the years to join in SJA education and outreach programs, such as Brampton's EMS Open House.

And thanks to her mom's introduction to another dog lover, in 2020 under COVID conditions Debbie and friend Christine helmed "Peel Helping Hands" (PHH) online mutual aid initiative. When Tuffy passed, Mitey the pup was seeking rehoming – and Debbie answered the call.

PHH was inspired by Mississauga Cooksville veteran William Graham and the community-supported Free Food Tables initiative, to get food and other help to those detached from care system support delivered under the Peel Region Community Safety and Well-Being Plan.

Under each initiative, provisions and donations from individuals and service groups live up to: "Give something. Do whatever you can."

BLACK HEALTH
& SOCIAL SERVICES HUB PEEL

Mobile Health Clinic
Bringing Care to You

Our services include:

- Physical exams
- Immunizations
- Diabetes testing
- Minor wound care
- Blood pressure monitoring
- Social services supports
- STI/STD testing & treatment
- Specialist care & referrals
- Reproductive health screening
- Brief mental health counselling

The BHSS Hub Mobile Health Clinic now serves Brampton, Mississauga, and Caledon, bringing culturally-affirming care closer to you.

647-812-5226

info@bhsshubpeel.ca

www.bhsshubpeel.ca

HOUSING IS SAFETY: “BREAK THE CYCLE” SUMMIT



Leaders across the Region of Peel, community organizations and all levels of government are calling for urgent, coordinated action to strengthen housing pathways and improve access to safe, stable housing for survivors of gender based violence following the Break the Cycle Summit on June 19, 2026.

Representatives from municipal, provincial, and federal governments participated in the discussions, underscoring a shared commitment to collaboration and long-term system change.

"Housing is one of the most important factors in helping survivors escape and recover from gender based violence," said Nancy Polsinelli, Peel's Commissioner of Health Services. "Our collective responsibility now is to turn this momentum into action that improves safety and stability for survivors."

While the summit created space for important dialogue, organizers emphasized that its success will be measured by what happens next.

Following the summit, Peel Regional Council passed a motion urging the Ontario Government to strengthen its response to gender based violence and requesting a provincial review of

funding and frameworks of the shelters serving women and children experiencing intimate partner violence (IPV).

"What we heard throughout the Summit was clear: survivors need more than emergency responses— they need access to safe, stable housing and coordinated supports that help them rebuild their lives," said Steve Jacques, Commissioner of Human Services at Peel Region. "We have an opportunity to build on the momentum already underway in Peel."

The motion also requests that the Peel Regional Chair undertake a similar review and take steps to ensure that regional funding reflects and adequately meets the needs of the shelters and those they serve.

"The summit was an important milestone, but only the beginning," said Jannies Le, Armagh Executive Director, summit facilitator. "We leave with clear priorities, shared accountability, and a commitment to advancing practical solutions that improve safety, housing stability and well-being for survivors."



**READ MORE ABOUT
PEEL'S COMMUNITY
SAFETY AND
WELLBEING PLAN**

A FEW DOMESTIC VIOLENCE SUPPORTS IN PEEL REGION

INDUS COMMUNITY SERVICES

Culturally aware services for newcomers, families, women and seniors. Crisis intervention and counseling.

Phone: **905-275-2369**

SAFE CENTRE OF PEEL

Partnership of multiple organizations in one place. Risk assessment, safety planning, referrals, counselling.

Phone: **905-450-4650**

EMBRACE

Shelter, counselling, and advocacy supports for survivors of GBV.

Phone: **905-403-9691**

VICTIM SERVICES OF PEEL

Crisis counselling, transitional support, shelter information, safety planning

Phone: **905-568-1068**

ASSAULTED WOMEN'S HELPLINE

Crisis counselling, safety planning, emotional support, information referrals. Available 24/7.

Phone: **416-863-0511**

OASIS CENTRE DES FEMMES

Services for Francophone women in regaining independence. Interventions, counselling, transition support.

Phone: **905-454-3332**



Photograph via Unsplash

HOW INTIMATE PARTNER VIOLENCE BECAME ITS OWN TORT... IN 2026

BY: MIA VALLIÈRE

In a landmark decision from the Supreme Court of Canada (SCC), intimate partner violence (IPV) is now a new tort. This decision allows IPV to stand as its own basis for lawsuits.

This decision came from the SCC's review of the 2026 case *Ahluwalia v. Ahluwalia*. Kuldeep Ahluwalia was married to Amrit Ahluwalia. During their 16-year marriage, Amrit subjected Kuldeep to verbal, mental, financial, and physical abuse on a regular basis.

Over the course of various legal proceedings, Kuldeep shared instances of controlling behaviours while she was isolated in Canada, including trying to prevent her from seeing her dying mother in India and being forbidden from furthering her education. Kuldeep also detailed instances of being threatened by Amrit, solidified by actual harm, as well as cruel behaviour towards their children.

For over a decade of marriage, Kuldeep lived in constant fear and felt she was enduring mental torture.

As a result of the divorce proceedings, Kuldeep was awarded \$50,000 in punitive damages, another \$50,000 in aggravated

damages, and then another \$50,000 in compensatory damages specifically for the harm of family violence. The last \$50,000 was added from a tort — a “civil wrong” that causes harm or loss to an individual for which the law provides a legal remedy — created by the Superior Court of Ontario.

Amrit appealed this first ruling, contesting the creation of the new tort. The Ontario Court of Appeal found there was no need to create a new tort for family violence because existing laws were sufficient protections from IPV.

Kuldeep then appealed this ruling to the SCC, which ruled in her favour six to three.

Writing for the supporting justices, Nicholas Kasirer cited reasons including how the existing tort on inflicting emotional distress does not account for the deprivation of autonomy, the recurrence of coercive control, and a narrow burden of proof which can leave survivors without remedies and with barriers to legal support.

“The existing torts fail to remedy the specific wrong to dignity, autonomy and equality that intimate partner violence creates” Kasirer wrote in the SCC's decision. This created the need for a new tort distinct

from existing ones because it seeks to compensate harms which are not covered by the existing torts — specifically, coercive control and loss of autonomy.

IPV has been steadily on the rise in Ontario and in Canada. The Ontario Provincial Police observed consistent increases in reports of IPV since 2023 — and many cases still go unreported. Statistics Canada noted many reasons why survivors of IPV may not report it, including fear of court system intervention and lack of trust in the criminal justice system.

This landmark decision may stand to change that reality. In a CBC article, Brenda Ottenbreit, a survivor of long-term abuse, said the decision shows that survivors are finally being taken seriously by those in positions of power.

“You lose yourself. You lose any ability to believe in yourself, any ability to think that you're a good parent. Everything is judged. And this Justice understands that,” Ottenbreit said. “This is huge. This is good, good news for survivors. It adds another level of we're being heard, because for so long we've been silenced.”

In a statement, Kuldeep said that this is a historic day for survivors. “Throughout this case, my goal was to bring family violence to the foreground, to promote an understanding that family violence is often experienced over the course of time, consisting of a combination of fear, coercion, emotional abuse, and control — not simply a series of separate occurrences.”

Kuldeep's lawyers, Julie Hannaford and Angela Pagano, issued a statement emphasizing the significance of this step forward in fundamental rights for survivors.

“Today's decision by the Supreme Court of Canada marks a significant development in Canadian law,” Hannaford and Pagano wrote.

“The court has squarely acknowledged the cumulative effects of psychological abuse, intimidation, financial control, fear, and coercion within intimate relationships — recognizing dignity, equality, and autonomy as fundamental rights for survivors and everyone.”

THE ONTARIO GOVERNMENT'S FLAWED IPV REPORT MUST NOT BE FORGOTTEN

BY: HAILEY FORD

In December 2025, the Government of Ontario released an 877 page report “examining the scale” of intimate partner violence (IPV) in Ontario. Despite calls to label IPV an epidemic, as 116 municipalities in Ontario have done, including Toronto, Ottawa, Hamilton and all three cities in Peel, the report decided to define it as endemic. It’s a small, but significant difference.

The report states that “such declarations may raise awareness, they remain largely symbolic and lack the operational mechanisms necessary to effect meaningful change.” However, even a symbolic gesture is better than a harmful one.

// WHEN WE PLAY GAMES WITH PEOPLE'S LIVES, COMMUNITIES SUFFER, AND OUR PROVINCE SUFFERS. //

The IPV report’s creation and development process was abnormal. Rather than the usual team of professional research staff writing the report, it was authored by a single Progressive Conservative MPP, Jess Dixon, and is filled with incorrect citations displaying tell-tale signs of AI hallucinations.

“What I want this government to do is to address the issue of intimate partner violence with the urgency and crisis level action that it deserves,” NDP MPP Kristyn Wong-Tam said in a December interview. “If you have falsified citations and you have hallucinated footnotes and sources, then the assumptions that the report makes is now called into question.”

On page 52, an experiment from England related to free school meals is cited, but links to an unrelated article titled “Giant Lipoma over Thigh,” and the experiment isn’t even real.

A report on “Technology Facilitated Gender-Based Violence Among Young People” is cited by the IPV report multiple times, but with varying accuracy,

attribution and formatting, even when on the same page, seen on page 72. Or, in the case of citation 118 on page 69, the attribution is not the same between the footnote and

body text, and the information isn’t accurate to the reference.

The NDP MPPs who were members of the committee responsible for the IPV report, withdrew a month before its publication, citing concerns that the process lacked integrity, accountability and respect.

“We knew we couldn’t honor the voices and the testimonies of the survivors if we stayed in that committee writing process and allowed the report, as it was and as it is, to be the only response,” said NDP MPP Alexa Gilmour in a December interview. “[It] ultimately doesn’t give the community what they asked for.”

When around 80 per cent of IPV goes unreported, proper acknowledgement and discussion is necessary to help those experiencing it. The flaws in the report risk further alienating survivors.

“I spent 18 months of my time in committee, listening to hundreds of witnesses, over 100 submissions, taking copious amounts of notes,” said Wong-Tam. “I didn’t do any of that lightly. I did not want to leave that committee...I literally begged them to work with the official opposition to fix their report.”

Instead, it faded into the background, scarcely covered. The NDP’s dissenting report, which does call to formally declare IPV an epidemic, was also mostly ignored.

“Declaring it an epidemic would compel the government to take emergency response and swift action, bringing critical funding, system-wide reform, rapid inter-ministerial coordination, and a crisis-level government response,” reads the dissenting report. “The declaration that IPV is endemic has triggered no such response.”

Now, over six months after the publication of the report, the Supreme Court of Canada has ruled that IPV can be the basis for lawsuits, but the Government of Ontario has done little to help survivors. Even the report itself has been largely forgotten.

“We would have had a meaningful document for people who had poured out themselves for the committee, and instead, we got a report...that turns out to have been largely AI, written with tremendous amount of errors that disrespects the voices of survivors and makes the report unusable,” said Gilmour. “When we play games with people’s lives, communities suffer, and our province suffers.”



HOUSING AS A STRUCTURAL DETERMINANT OF HEALTH IN PEEL

BY: TANIA DEOL

Peel is one of the fastest growing regions in Ontario, yet it faces an underinvestment in critical services such as housing, healthcare, and other social services. With this persistent underfunding, vulnerable groups have to wait longer to get access to essential services, including safe housing.

Around 99,800 households in Peel are in core housing need, which means housing that “falls below at least one of the indicator thresholds for housing adequacy, affordability, or suitability, and would have to spend 30% or more of its total before-tax income to pay the median rent of alternative local housing that is acceptable.”

Peel only has a total of 14,292 social housing units for its population, which leads to longer wait times for safe and affordable housing.

Stable housing is a large determinant of health. At a recent knowledge translation event on June 8, the Family and Child Health Initiative (FCHI) research team emphasized health inequity in the region of Peel, finding that racialized and vulnerable communities experience disproportionate health disparities shaped by structural barriers and inequality.

The presentation opened with remarks from Brampton South MP Sonia Sidhu, who congratulated the organizers and highlighted the importance of collaboration in improving community health outcomes.

In their presentation, they highlighted housing as a key social determinant of health. They noted that the underfunding of social services in Peel manifests as a form

of structural racism, where racialized communities are more likely to face unequal access to housing and healthcare.

This goes to show that housing and healthcare are inextricably linked, as addressing housing is required to improve health outcomes and equity.

Additionally, housing availability does not always mean accessibility, especially when support is not designed for individuals with complex needs.

People living with disabilities are more likely to experience housing insecurity or homelessness due to a lack of social supports. The underinvestment in Peel is affecting unhoused people with disabilities the most.

Despite these challenges, community organizations and non-profits are working hard to address the gaps left by the underinvestment in Peel. However, to effectively mitigate existing gaps, there must be increased funding for infrastructure for affordable housing and accessible healthcare.

REST CENTRES RECEIVES \$84,500 OTF GRANT



REST Centres Logo Graphic

By: Tough Times

In May 2026, Rest Centres received an \$84,000 seed grant from the Ontario Trillium Foundation (OTF). The grant will help them to improve how it “measures outcomes, adapts services to evolving youth needs, and strengthens long-term organizational resilience to support Black youth experiencing or at risk of homelessness.” Rest Centres is a Black-led, Black-serving, Black-focused organization. They have programs to help youth secure and maintain housing, meet their basic needs, such as food and hygiene. Other programs are focused on wellness, life skills, and employment support and training.

PEEL ONLY MEETS 17 PER CENT OF CORE HOUSING NEED



Photo via Pexels

By: Tough Times

The 2025 Housing Services Annual Report, released in late May 2026, reports that 99,800 Peel households, or approximately one in five are in “core housing need.” This means they live in inadequate or unsuitable housing. Inadequate is when a home needs major repairs, like fixing structural issues, pipes, or electrical wiring. Unsuitable means there are too few bedrooms for the number of occupants. The region says they are only meeting 17 per cent of that need. The report states that the need for affordable housing is greater than funding and capacity and calls for all levels of government to “improve and grow Peel’s community housing system.”

PEEL CHILD POVERTY RATE IS THIRD HIGHEST IN CANADA



Photo Via Pexels

By: Tough Times

The 2026 Child and Poverty Report Card for Toronto compared child and family poverty rates for cities and regional municipalities with populations above 500,000. While largely Toronto-focused, it placed Peel behind only Toronto and Winnipeg, making Peel the municipality with the third-highest child poverty rate. It says that 21.7% – or just over **one in five** children are living in poverty.

Organizations in Canada typically use either the Market Basket Measure (MBM) or a Low-Income Cut Off when tracking poverty. This report uses Census Family Low-Income Measure, After Tax thresholds to determine poverty rates.

ONE-TIME \$150 CDB PAYMENT

BY: DR. MICHELLE HEWITT
BOARD CHAIR, DISABILITY WITHOUT POVERTY

A year ago, on July 17, people started receiving their first Canada Disability Benefit (CDB) payments. We knew that it was too little money for too few people, but at Disability Without Poverty (DWP) we look back with pride at the movement of disabled people that came together to move the CDB from an idea to reality.

Of course, we all keep working to make it more accessible and beneficial, but we can be proud of the initial steps.

From September onwards, people who have already qualified for the DTC and the CDB will receive \$150 towards the cost of any expenses they had when they applied for the DTC, such as paying a medical practitioner. This will be a gradual roll out.

Anyone who has ever received a Canada Disability Benefit (CDB) payment will get this- even you only recieved a single payment, and even if you're no longer receiving the benefit.

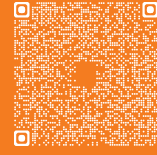
Again, we know that this may not be enough for the costs some of you have had to cover, and for those of you who have had to pay towards your DTC application and been unsuccessful, it brings no relief at all.

With summer comes local fairs and opportunities to meet your politicians from all levels of government in a relaxed setting.

It is conversations exactly like these, led by our movement over the last five years, that resulted in the Canada Disability Benefit and the other changes we've won together. What you share finds its way into the discussions we have with decision makers.

This article was originally published in the Disability Without Poverty newsletter.

DISABILITY WITHOUT POVERTY: COST OF LIVING SURVEY



This survey is the engine behind disability without poverty reports - which they carry directly into meetings with decision makers.

What you share finds its way into those conversations. Your experience becomes their evidence, and their evidence drives change. Whether you've answered before or this is your first time, this month is the perfect time to jump in.

It takes about two minutes, it's anonymous, and it's most powerful when you answer every month.

NEW AFFORDABLE HOUSING COMING TO PEEL IN 2027



Photo of Construction from Region of Peel Website

By: Tough Times

In May 2026, the Government of Canada and Government of Ontario announced over \$28 million in support of four housing projects in Peel, which will collectively bring 599 units to the region. One of the buildings, Credit River Way, in Mississauga, has been open since 2024. The other three are expected to be completed in or before 2027. While the remaining buildings are all focused on providing housing for low-income individuals, one will be dedicated to seniors, where around one third of the units will be "wheelchair-barrier-free". The developments are said to have a "mix of unit sizes and varying levels of affordability."

UPDATES ON THE HOSPITAL EXPECTED IN BRAMPTON



Concept Rendering from Infrastructure Ontario Website

By: Tough Times

In late March 2025, ground was broken for the new Peel Memorial Hospital, which will be an extension of the existing Peel Memorial Centre for Integrated Health and Wellness. However, that did not mean construction. The development partner wasn't confirmed until October 2025. In June 2026, the Osler Open golf tournament raised over \$275K to help fund the expansion. The hospital is expected to have "up to" 250 in-patient beds, mental health and addictions services, outpatient clinics and dementia care services for seniors.

There is still no expected opening date.

2026 FOOD BANKS CANADA POVERTY REPORT CARD



Screenshot Food Banks Canada

By: Tough Times

The 2026 Food Banks Canada Poverty Report Card gives Ontario a D-. Most statistics remain negative, but steady between 2026 and 2025, with increases or decreases within two percentage points. The most significant change is of "people having trouble accessing healthcare," a number that's increased from 16 per cent to 36 per cent. Ontario's hospitals are funded at the lowest per-person rate in the country, placing the system under strain. The healthcare budget, which the Ontario finance minister called unsustainable, does not reflect the needs of an aging population or inflation. Cuts have led to staff layoffs, high wait times and hallway healthcare.

REGIONAL HOMELESSNESS SERVICES IN PEEL

In Peel there are many programs available to support housing, shelter and fundamental needs. Please visit www.peelregion.ca/housing for more information.

Street Helpline Peel - 1-877-848-8481

- Offering 24/7 support for urgent homelessness needs, food, shelter access, referrals and more. The Street Helpline connects to their mobile Street Outreach team who can often come to your location to help. If you're in crisis or face an urgent need, call them.

Shelter Intake Line - 905-450-1996

- They can help you find the best option in any Peel shelter, including in adult, youth and family shelters.

Mental Health Support

- Distress Centre Peel – 905-278-7208
- Kids Help Phone – 1-800-668-6868
- Mental Health Mobile Crisis Centre of Peel – 905-278-9036
- Youth Mental Health Crisis Response Service – 416-410-8615

Regeneration Meal Program and Supports -156 Main St N

- Facilities and food for people in need
- Showers and laundry
- Phone and computer
- Staff support
- Clothing
- Breakfast - 8 a.m. to 9:30 a.m. (9:15 a.m. on Sundays)
- Lunch - 11:30 a.m. to 12:30 p.m., Monday to Thursday
- Hours - Monday to Friday 7 a.m. to 3 p.m., Saturdays 7 a.m. to 9:30 a.m., Sundays 7 a.m. to 9:15 a.m.

City of Mississauga

- Services are available to support at-risk individuals and the homeless in Mississauga, including free hot meals and shower access.
- Visit mississauga.ca/recreation-and-sports/sportsand-activities/assistance-programs/help-for-thehomeless/

Call - Street Helpline Peel Team at: 1-877-848-8481

Call if you are homeless, or at risk of being homeless, or know someone who is in need. Get help to access emergency and transitional shelters, street outreach, support services and finding permanent housing



The **Peel Food Map** provides updated hours and information on donations, through the Emergency Donation Centre.

Call 211 if you can't access the online food map.



Photograph via The Region of Peel

Visit PPAG's Website



ppag.media

Are you someone with lived experience who wants to share your story?

Are you an organization or individual who wants to write an article or make a comic? Do you just have an idea?

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Contact info@ppag.media or fill out our new form for submissions!

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Submissions Form