Appendix 4

DRAFT

Healthy City Strategy

Towards a Healthier City

MISSISSAUGA





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We are grateful to the many contributors to the Healthy City Strategy:

Project Steering Committee:

Mississauga Directors from City Planning Strategies; Infrastructure Planning & Transportation Services; Parks Forestry & Environment; Recreation & Culture, Strategic Communications & Initiatives

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Peel Public Health:

University of Toronto Mississauga Novo Nordisk Network for Healthy Populations

Cities for Better Health (Novo Nordisk Canada)

Project Community Engagement Consultants

Mivian Consulting

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Section 1. Introduction

1.1 Why a Healthy City Strategy?

Mississauga aspires to be a healthy equitable city. A city where the healthy choice is the easy choice and the available choice. The attributes of a healthy city include being compact for walkability, active transportation, access to green space; a mix of uses to meet daily living needs; and a strong sense of place through social and individual experiences to help foster resilience, social connection, and healthier neighbourhoods. One of the many benefits will be lower chronic disease in the city.

By focusing on these attributes, Mississauga will become a healthier city for all and move towards health equity.

"Health equity is created when individuals have the fair opportunity to reach their fullest health potential. Achieving health equity requires reducing unnecessary and avoidable differences that are unfair and unjust. Many causes of health inequities relate to social and environmental factors including income, social status, race, gender, education, and physical environment."

(Ontario, Public Health Ontario, "Health Equity," Last Modified June 21, 2024, <u>Public Health Ontario, Health Equity</u> ("Public Health Ontario").

The state of diabetes in Mississauga may be considered an indicator of the health of the city. Diabetes affects a rapidly growing number of Mississauga residents. The prevalence rates of type 2 diabetes in most neighbourhoods in Mississauga range from 13 to 16.9% (see Figure 1). These rates exceed the

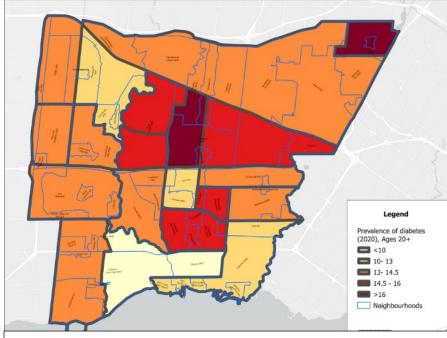


Figure 1: Prevalence Type 2 Diabetes in Mississauga Neighbourhoods (Source: University of Toronto Mississauga Novo Nordisk Network for Healthy Populations and Ontario Community Health Profiles Partnership)

Ontario average of 9.8%. Areas of high prevalence of diabetes appear to generally align with areas that are considered more at risk to climate change impacts², social vulnerability³, lower walkability, access to greenspace, transit, higher proportion of fast food restaurants, core housing needs and poor air quality⁴.

¹ Lipscombe LL, Ali FM, Lamb K, Rosella LC, Shah BR, Zen lea IS, eds. "Current State of Type 2 Diabetes in the Peel Region," Mississauga, ON: Novo Nordisk Network for Healthy Populations; 2024, <u>Current State of Type 2</u> <u>Diabetes Report</u>, ("Current State Report") p 14.

² Climate Risk Institute (CRI), Emmons & Olivier Resources Inc. (EOR), Nodelcorp, and Climalogik, *Climate Change Risk and Adaptation Assessment for Asset Management*, 2023, Prepared for the City of Mississauga, Ontario.

 ³ Toronto & Region Conservation Authority and Credit Valley Conservation, SNAP Neighbourhood Screening Process for the City of Mississauga: Summary Report, 2022, Prepared for the City of Mississauga, Ontario
 ⁴ Lipscombe LL, Ali FM, Lamb K, Rosella LC, Shah BR, Zen lea IS, eds. "Current State of Type 2 Diabetes in the Peel Region," Mississauga, ON: Novo Nordisk Network for Healthy Populations; 2024, <u>Current State of Type 2</u> <u>Diabetes Report</u>, ("Current State Report") p 31, 39-40, 50, 90, 103-104.



Mental health, housing and food insecurity, racism, trauma, and oppression are also associated with diabetes prevalence.⁵ This means that specific areas of Mississauga carry a higher burden of diabetes along with other risk factors that contribute to the challenge of healthy living. This is not health equity.

The City committed to take action. In 2021, City Council endorsed the Urban Diabetes Declaration to invest in the promotion of health and well-being; address the social and cultural determinants of health and strive for health equity; integrate health into all policies; engage communities to ensure sustainable health solutions; and create solutions in partnership across sectors.

A municipality like Mississauga can effect and/or influence change through how and where people live, play, shop and work within the city and its neighbourhoods, the municipal services and programs offered, and through built infrastructure. This Healthy City Strategy outlines how the City can influence positive change along with the help of collaborators and community to create a healthier city to help reduce the prevalence of type 2 diabetes.

1.2 What is the strategy purpose?

The strategy sets a way forward for the City's decision-making and actions to reduce the risk factors associated with type 2 diabetes, create opportunities for improved health, and decrease the prevalence of diabetes (as well as other chronic diseases) in Mississauga.

Moving towards a healthier city requires:

- building complete communities that are compact, pedestrianfriendly, and transit-supportive, and contain a mix of uses that support daily living and enable physical activity through active transportation. These are important built environment characteristics that reduce social isolation and improve community connectedness and help create health equity;
- providing community services and programming in support of active living and education; and
- working with the community, organizations, industry, agency, and government partners on solutions.

2.0 Four Key Drivers of the Strategy

There are four key drivers of the strategy, as shown in Figure 2. Research provides the scientific evidence, while community engagement provides the lived experience. Existing City policies, programs, initiatives, and infrastructure, along with external collaborations, shape the context for the strategy.

⁵ Current State Report, p XIV, 17, 23.





Figure 2: Framing the Healthy City Strategy:



2.1 Research and External Collaborations

The City has established relationships with University of Toronto Mississauga's Novo Nordisk Network for Healthy Populations (NHP), Trillium Health Partners (THP), Peel Public Health (PPH), and Cities for Better Health (CBH) to leverage expertise and data for an evidence-informed approach to understanding type 2 diabetes and its implications for the built environment and social determinants of health in Mississauga.

The Current State of Type 2 Diabetes in Peel Region 2022⁶, as prepared by NHP, researched behavioural, social determinants and the future risk of type 2 diabetes. The report evaluated six key built environmental characteristics and their association with diabetes prevalence. The following areas of the Mississauga were identified where higher rates of diabetes intersected with a key built environmental indicator:

- north Mississauga has lower walkability
- central Mississauga has lower access to green space
- north and west Mississauga have lower access to transit
- north, central, and west Mississauga have a higher proportion of fast-food restaurants
- northeast, central, west, and east Mississauga have a higher core housing need; and
- north, central, and east Mississauga have poor air quality.

The City can positively influence these environmental indicators.

The report stated that the highest predicted risk (%) of diabetes in Peel Region will occur among those with the following characteristics: older age, visible minority, low household income, food insecure, physically inactive, overweight, or obese, and hypertension. Visible minority and immigrant groups are disproportionately at future risk of developing diabetes in Peel. This is a significant factor for Mississauga with 61% of the population being comprised of visible minorities and 53% are immigrants.7

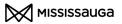
2.2 Existing City Policies, Programs, Initiatives, and Infrastructure

As a municipality, the City already has existing strategies, programs, initiatives, and infrastructure aimed at creating a compact and complete city and improving healthy choices and options for residents. Figure 3 lists some of the approved plans & programs. This Healthy City Strategy is designed to

⁶ Current State Report. p.36-40

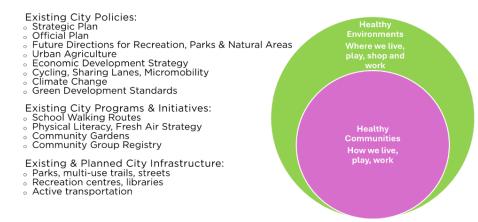
⁷ Statistics Canada. *Census Profile*. 2021 Census of Population. Ottawa: Statistics Canada Catalogue no. 98-316-X2021001, Retrieved October 3,

^{2024,} from: https://www12.statcan.gc.ca/census-recensement/2021/dppd/prof/index.cfm?Lang=E.



complement and build on these City efforts and provide guidance for future decision-making and initiatives.

Figure 3 - City Scope of Influence



2.3 Community Engagement

More than 1,000 people participated in various community engagement opportunities in 2023, sharing ideas about community needs and priorities to be healthy. The City Connector (independent community engagement consultant, Mivian Consulting) reported eight key findings based on the community engagement⁸ (listed below in no ranked order):

- 1. Address **affordability of City programing** to support participation.
- 2. Improve **program accessibility** through affordable, culturally appropriate, and close to home programming.
- 3. Support **mobility** through improvements to the transit system and built environment.
- ⁸ Mivian Consulting, Mississauga Diabetes Healthy City Strategy Community Engagement Report, Prepared for the City of Mississauga, May 2024, <u>Draft</u> Report.

- 4. Maintain **outdoor spaces** to promote physical activity, especially walking as a free physical activity close to home.
- 5. Address **food security and nutrition** through accessible and affordable healthy food options.
- 6. Create more solutions to address **affordability of housing.**
- 7. Increase **awareness** of type 2 diabetes and of existing resources while enhancing relevant educational offerings.
- 8. Cultivate opportunities for connection and a sense of belonging.

2.4 Strategic Decision-making – Equity Action Areas

The City needs to work towards building health equity with the tools that it has available. The concept of an "Equity Action Area" grew out of the comments from the community engagement about the need for programs and services to be tailored to the specific needs of diverse communities and offered closer to home. Equity Action Areas are intended as a tool to assist in this process.

The term Equity Action Area is recommended. This term recognizes the health, environmental and social differences across Mississauga. These factors are interrelated. According to OHRC there is a difference between Equality and Equity: Equality generally means treating people the same way, to give everyone the same access to opportunities and benefits in society. Equity means treating people differently, to take into consideration people's different needs and situations. For example, requiring public buildings to have wheelchair accessible entrances to accommodate persons with disabilities



(rather than deciding that everyone can climb stairs or open doors themselves)."9.

To effect change towards equity, a defined geographic area is a manageable way to evaluate information for City staff and decision-makers to inform and measure the impact of decisions and programming.

These areas would be defined by geographies in Mississauga where a higher prevalence of type 2 diabetes (and other chronic disease) aligns with significant environmental risk factors and population characteristics that impact individual and population health (social determinants of health such as income, employment, education, gender, culture, and racism).

A review of other municipalities across Canada and their approach to decision-making in this regard showed that many rely on various data and mapping tools, including neighbourhood improvement areas (Toronto)¹⁰, equity index and community service areas (Calgary)¹¹ and well-being scores (Region of Peel, 2021).¹² The City now has a reference map (see Figure 1) of the prevalence of type 2 diabetes for Mississauga along with environmental and socio-demographic information to enable a similar approach.

It is critical to consider the collective impact of the social and environmental characteristics of a community and to recognize its diverse needs. Establishing Equity Action Areas can help facilitate the most appropriate approach for the needs within neighbourhoods and work towards the obligations in the Urban Diabetes Declaration.

To help define "Equity Action Areas" and build out a "Healthy City Dashboard" with consolidated data and mapping, the following existing resources will provide a foundation:

- the mapping of the built environmental characteristics and their association with diabetes prevalence as completed by the NHP in their Current State of Type 2 Diabetes in Peel Region 2022¹³
- Peel Public Health's Peel Health Data Zone Information Tool¹⁴ for Mississauga (depicts chronic diseases including diabetes), The Healthy Development Monitoring Map¹⁵, and the Region of Peel's Neighbourhood Information Tool, 2021¹⁶

These tools will enable evidence-informed decision-making.

⁹ Ontario, Ontario Human Rights Commission, "Appendix B: Human rights and policing: Creating and sustaining organizational change," 2011, <u>Human rights and policing: Creating and sustaining organizational change | Ontario Human Rights Commission</u>.

¹⁰ City of Toronto, Toronto *Strong Neighbourhoods Strategy 2020*, 2020, <u>Final</u> Report.

¹¹ Alberta, City of Calgary, *Calgary Equity Index*, Community Services Areas, Last Updated 2024, Calgary Equity Index (CEI).

¹² Region of Peel, *Neighbourhood Information Tool*, 2021, <u>Neighbourhood Information Tool</u>, ("Peel Information Tool").

¹³ Current State Report, p 30-42

¹⁴ Peel Public Health, Peel Health Data Zone, https://peelregion.ca/health/health-status-data/peel-health-data-zone-information-tool

¹⁵ Region of Peel, *The Healthy Development Monitoring Map*, 2021, https://regionofpeel.maps.arcgis.com/apps/Cascade/index.html?appid=9f08d 432116b4529836f784f590b9958.

¹⁶ Region of Peel, *Neighbourhood Information Tool*, 2021, https://experience.arcgis.com/experience/6ebef168efed4d86bf1f1af69008a423



3.0 Vision, City Commitments and Actions

The community's input and identified priorities formed the basis for the strategy vision, commitments, and actions for a healthier city and hopeful reduced prevalence of type 2 diabetes.

3.1 Vision:

Mississauga will be a city where all people thrive and are healthy, active, connected and supported within their community.

3.2 City Commitments

The City commits to improving health equity and addressing the environmental and social disparities across the city by:

- continuing to collaborate, learn and seek evidence-informed solutions
- establishing resilient neighbourhoods enabling all people to live well
- ensuring easy and safe movement for all daily living needs
- providing supportive, accessible programs, services, amenities, and facilities for healthy living
- helping to create affordable housing options
- supporting equitable access to affordable, healthy food
- helping to create communities where all people feel they belong
- connecting and working with communities to promote healthy living

3.3. Themed Actions

The following actions are organized by themes representing the ongoing research work, and the key findings from the community engagement. These actions will help move Mississauga toward becoming a healthier city. By making healthy living possible and an easy choice, the risk factors associated with type 2 diabetes can be reduced and opportunities for improved health can be achieved. Doing so will contribute to decreasing the prevalence of diabetes (and other chronic diseases) in Mississauga.

These actions respond to the various academic, health, government, business, agency, organization, and community collaborations with the City, to the research lead by the NHP, Peel Public Health resources, as well as to the priorities for the City – identified through community engagement – to consider for this strategy (see Section 2.3).

Action Type	Action description	Timeline ST 1-3 yrs MT 4-7 yrs LT 7+ yrs	Status Not Started Planned Underway	City Divisions Involved ("Bolded" indicates Divisional lead)	External Contributors
Research & Extern	al Collaboration				
Continue Research Collaboration	Continue to work with the UTM Novo Nordisk Network for Healthy Populations (NHP), Trillium Health Partners (THP), Peel Public Health (PPH), Cities for Better Health (CBH) and other community and business collaborators and partners to:	ST	Underway	City Manager's Office (CMO) / Recreation & Culture (RC)/ Parks, Forestry & Environment (PFE) /Various other City divisions	NHP, THP, PPH, CBH

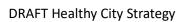




Action Type		Action description	Timeline ST 1-3 yrs MT 4-7 yrs LT 7+ yrs Status Not Started Planned Underway City Divisions Involved ("Bolded" indicates Divisional lead) External Contri			
		 Increase understanding of the environmental risk factors and social determinants of health that the City may influence Identify actions, execute, and evaluate findings 				
2.	Promote Healthy City Project Proposals	Promote the opportunity for "healthy city" project proposals with NHP, through the City's Community Group Registry Program (CGRP).	ST	Underway	CMO / RC	NHP
3.	Explore Grant Program Opportunities	Explore opportunities to amplify and help sustain "healthy city" community projects through the City's Community Grant and Small Project Matching Grant programs.	ST	Not Started	CMO / RC	NHP
Str	ategic Decision	-making - Equity Action Areas	_	•		
4.	Establish Equity Action Areas to Guide Decision- making	Establish "Equity Action Areas" to guide the implementation of tailored and strategic actions in specific areas of the city to help achieve health equity opportunities in developing and directing program, policy, infrastructure, and initiative planning at the City.	ST	Not Started	CMO PFE/ All City Depts	NHP, PPH, Credit Valley Conservation (CVC), Toronto Region Conservation Authority (TRCA)
	Develop a Healthy City Dashboard	Develop a new "Healthy City" Dashboard to inform City decision-making using data and a centralized mapping tool.	ST	Underway	CMO / PFE Information Technology (IT) / City Planning Strategies (CPS)	NHP, PPH
	ordability of City I					
6.	Explore Ways to make City Programs More Affordable in Equity Action Areas	 Increase participation in City programs by: a. Evaluating participant fees for programs offered in Equity Action areas. b. Reviewing the Active Assist Program to increase subsidies offered. c. Explore funding options to support special needs adaptive programming. 	ST	Underway	RC	Play in Peel THP



Action Type		Action description	Timeline ST 1-3 yrs MT 4-7 yrs LT 7+ yrs	ST 1-3 yrs Not Started ("Bolded" indicates MT 4-7 yrs Planned Divisional lead)		External Contributors
		d. Collaborate with health partners to develop pathways and opportunities for active and educational programming.				
Ac	cessibility of Cit	y Programming				
7.	Make City programs More Accessible	In Equity Action Areas, review programming to improve accessibility by using an equity lens to understand diverse needs; specifically, assessing location, convenience, and scheduling factors.	ST	Underway	RC / Library Community Services Department (CMS) Marketing	University of Toronto Mississauga
	Align Library and Recreation & Culture programs to support Equity Action Areas	Review City program offerings to align Library and Recreation & Culture offerings in Equity Action Areas: a. Food Literacy - including how to grow, and/or purchase and cook healthy foods. Consider also how to create cultural shifts to offer healthy options and a summer program for children. Support families with infant feeding needs. b. Physical Literacy – including healthy living in indoor and outdoor settings (e.g. walking groups, and lending libraries) c. Collaborate with schools and local agencies on educational programs that support healthy living.	MT	Underway	Library / Recreation, CMS Marketing Parks, Forestry & Environment (PFE)	Peel Public Health University of Toronto Mississauga Play in Peel School Boards Local agencies
Ea	se of Getting Are	ound				
9.	Improve Transit Service in Equity Action Areas	Improve transit service in Equity Actions Areas, including: a. safe and direct pedestrian and micromobility connections to transit b. convenient bus schedules for transfer points c. display bus schedules with live updates at key bus stops	MT	Underway	MiWay (Transit) / Capital Works Delivery and Transportation Infrastructure Management Active Transportation Traffic Management and Municipal Parking	





Action Type	Action description	Timeline ST 1-3 yrs MT 4-7 yrs LT 7+ yrs	Status Not Started Planned Underway	City Divisions Involved ("Bolded" indicates Divisional lead)	External Contributors
	 d. improved connections between business hubs and communities e. more frequent or increased capacity of buses along busiest routes f. affordable transit program review g. improved year-round accessibility, safety, comfort of bus stops. 				
10. Improve Pedestrian Infrastructure in Equity Action Areas	Improve pedestrian infrastructure in Equity Action Areas to: a. give priority for pedestrian crossings at signalized intersections and opportunities to make crossing more convenient b. consider "car-free" zones c. adjust timing of traffic signals to ensure sufficient crossing time d. provide greater access to pedestrian amenities including benches, public washrooms, and water refill stations	ST	Underway	Capital Works Delivery and Transportation Infrastructure Management / Traffic Signals and Systems / MiWay	
11. Explore Micromobility and Active Transportation Options in Equity Action Areas	Review micromobility and active transportation options at community centres and other public facilities in Equity Action Areas, including: a. safe spaces for bicycles and/or scooters to access transit and to be secured; b. opportunities for a safe, extensive, and well-connected grid of bike lanes and bike parking	ST	Underway	Transportation Infrastructure Management, / MiWay	
	rhoods & Outdoor Spaces		I DI		1 ==::
12. Enhance the Built Environment	In Equity Action Areas, review opportunities to implement a Healthy Development Framework and a climate lens for new development, redevelopment, and/or life-cycle replacement of the built environment to: a. improve walkability, neighbourhood connectivity and air quality; and	MT	Planned	CMO / Planning and Building (P&B) / PFE / Transportation Infrastructure Management	PPH



Action Type	Action description	Timeline ST 1-3 yrs MT 4-7 yrs LT 7+ yrs	Status Not Started Planned Underway	City Divisions Involved ("Bolded" indicates Divisional lead)	External Contributors
	b. establish compact, pedestrian-friendly, and transit-supportive neighbourhoods that contain a mix of uses that support daily living and enable physical activity through active transportation.				
13. Improve the Safety and Amenities in Outdoor Public Spaces	In Equity Action Areas, review the opportunities for: a. shade and weather shelters; b. well maintained, safe and comfortable outdoor public spaces; and c. tree planting for improved air quality.	ST	Underway	PFE	
Access to and Affo	rdability of Housing and Healthy Food				
14. Attract Healthy Food Retailers to Equity Action Areas	In Equity Action Areas, encourage healthy food retailers to operate in food deserts;	MT	Not started	PFE /CPS/ Economic Development Division (EDD)	Business Improvement Areas (BIAs)
15. Promote Urban Agriculture in Equity Action Areas	Aligned with Action 4-1 of the Urban Agriculture Strategy, reduce barriers to urban agriculture activities on private and public lands in Equity Action Areas.	MT	planned	PFE / CPS / Development & Design / Enforcement / RC / CMO	
16. Improve Access to Healthy Food Options through Partnerships	Work with a broad range of community partners to increase urban agriculture and food security in Equity Action Areas (including delivery mechanisms for farmer's market produce, urban farming, community fridges, community gardens, fruit collection programs)	ST	planned	PFE / RC CPS	Local Food Growing Organizations Foodbanks PPH BIAs
17. Increase Access to Affordable and Adequate Housing in Equity Action Areas	Review opportunities for affordable and adequate housing for seniors and those most vulnerable in Equity Action Areas. This includes micro-housing, and options to remain in existing communities.	MT	Not Started	CPS	Region of Peel Human Services – Housing



Action Type	Action description	Timeline ST 1-3 yrs MT 4-7 yrs LT 7+ yrs	Status Not Started Planned Underway	City Divisions Involved ("Bolded" indicates Divisional lead)	External Contributors			
Community Aware	Community Awareness & Education							
18. Encourage Employer Programs that Promote Healthy Living	Encourage employer programs that work to: a. create a more active workplace b. enhance their work location to encourage walking, outdoor comfort, and ease of access, as well as implement active transportation facilities and connections c. offer health education on type 2 diabetes, diet, and a healthy food environment.	MT	Not started	CMO / EDD, Development & Design	Mississauga Board of Trade (MBOT), BIAs, PPH			
19. Promote Outdoor Attractions	Promote awareness of parks, natural areas and recreational to support healthy living.	ST	underway	CMS Marketing / RC / Library/ PFE	PPH			
Connection & Belo								
20. Support Community Connection Opportunities	Help to enable community members to create connections in Equity Action Areas to: a. strive to provide social and cultural opportunities that are safe and free of racism b. deliver essential information about available services and support organizations based on the diverse needs of the community members.	ST	Underway	RC/ Library	Peel District School Board, PPH			
21. Enhance Access to Wireless Mississauga	Enhance free access to the City's Wireless Mississauga network and the laptop lending program in Equity Action Areas to support equitable opportunities to access information, make connections and participate in the community.	MT	Not Started	CMO / IT / Library/ PFE				
22. Support Program Delivery through Partner Collaboration	Promote partner collaborations to build on working relationships between the City, community partners, and members to focus on common areas of interest through programming and services.	MT	Not Started	RC / Library	Community Partners; School Boards, Board, Newcomers, THP Community Health Centres, religious communities			

Status

Planned

Not

Not

Not

Underway

Started

Started

Started

Not Started

CMO / All City Depts

Timeline

ST 1-3 yrs

MT 4-7 yrs

LT 7+ yrs

LT

ST

MT



Implementation & Measurement

Action description

Work with other levels of government,

living" programs and initiatives.

community, and business collaborators to

Provide Council with annual updates on the

Healthy City Strategy to advise on progress.

Update the Healthy City Strategy, Action Plan,

"Healthy City" Key Performance Indicators and

"Healthy City" lens every 5 years based on the

latest research and strategy progress.

explore sustainable funding options for "healthy

Action Type

23. Sustainable

Funding

Options

Council Updates

5 years

Strategy Every

24. Annual

25. Refresh

	November 2024
City Divisions Involved ("Bolded" indicates Divisional lead)	External Contributors
CMO / RC	
CMO / All City Depts	
CMO / All City Donto	

4.0 Implementation & Measurement

City decision-making will improve with an evidence-informed, health perspective. To drive change, evaluation is critical. The strategy provides staff and decision-makers the framework and tools to guide City decision-making from a health equity perspective. It acts as a "healthy city lens", to move the City closer to meeting obligations in the Urban Diabetes Declaration signed by Council to enable a healthier city.

Implementation of the strategy will include:

- Equitable Community Engagement City planning for program, policy, infrastructure, and initiatives needs to be informed by an equitable community engagement process in advance of changes.
- Measurement key performance indicators will be an important part of the annual reporting process to Council on the progress of the strategy. City-wide indicators will need to be identified and confirmed by City stakeholders and consider data on Equity Action Areas. The annual business plan and budget process will identify many relevant indicators. The Equity Action Areas are intended to be a critical reference point to assess the City's pursuit of health equity and progress on this strategy.

Indicators are intended to be used as key performance indicators to assess the City's pursuit of health equity consistent with the aspirations of this strategy. The goals set out below align with the key findings from the project community engagement. Data for the indicators are to be collected and shared annually with Council, to compare year over year data, and the City's progression towards better health. Those indicated with an asterisk (*) were cited in the Budget Book 2024 by the various service areas; double asterisk (**) are reported by MiWay



annually; ***triple asterisk are intended to be reported by Active Transportation annually as part of The Monitoring and Evaluation Framework was presented to Council in 2023 for the Micromobility program.

Goal	2024 Key Performance Indicators	2025 Key Performance Indicators
Affordability of City Programs		
Objective – To increase participation in physical activity, health education, and provide affordable programs for all city residents, especially those within areas of high diabetes prevalence (Equity Action Areas).	Number of visits to recreation facilities*	Number of visits to recreation facilities* across the city and in areas of high diabetes prevalence (Equity Action Areas)
Accessibility of City Programs		
Objective - To increase participation in physical activity, health education and provide culturally appropriate, safe, and close to home.	Number of visits to community centres*	Number of visits to community centres* across the city and in areas of high diabetes prevalence (Equity Action Areas)
Ease of Mobility		



Goal	2024 Key Performance Indicators	2025 Key Performance Indicators
Objective – To increase transit ridership, use of active transportation, support system improvements and built environment in Equity Action Areas.	 Number of accessible transit stops ** Number of transit stops (and % with shelters) * KM of cycling network* across the city KM of sidewalks* across the city KM of Trails* across the city 	 Number of accessible transit stops across the city and in areas of high diabetes prevalence (Equity Action Areas) Number of transit stops (and % with shelters)* across the city and in areas of high diabetes prevalence (Equity Action Areas) KM of cycling network* across the city and in areas of high diabetes prevalence (Equity Action Areas) KM of sidewalks* across the city and in areas of high diabetes prevalence (Equity Action Areas) KM of Trails* across the city and in areas of high diabetes prevalence (Equity Action Areas) Access to a shared micro-mobility device within a walking range of 500m *** Micro-mobility encourages community members to be physically active on a daily basis and reduce sedentary time*** Micro-mobility increases the feeling of social connectedness among community members***
Outdoor spaces Objective – To provide improved outdoor	Number of trees planted*	Number of trees planted* in areas of high diabetes
spaces that promote physical activity, especially walking as a free physical activity close to home	 Number of trees planted* Number of woodlands and natural areas* Number of parks* 	 Number of trees planted* in areas of high diabetes prevalence (Equity Action Areas) Number of woodlands and natural areas* in areas of high diabetes prevalence (Equity Action Areas) Number of parks* in areas of high diabetes prevalence (Equity Action Areas)
Access to and Affordability of Healthy F	oods	
Objective – To improve food security and nutrition for residents and employees through promoting increased access to and affordability of healthy foods		Number of community gardens across the city and in areas of high diabetes prevalence (Equity Action Areas)



November 2024

Goal	2024 Key Performance Indicators	2025 Key Performance Indicators
		Proximity of residents to full-service grocery stores in areas of high diabetes prevalence (Equity Action Areas) (Peel Public Health)
Affordability of Housing		
Objective – To create more solutions to address affordability of housing.		TBD - Increased access to affordable and adequate housing in good condition
Awareness and Education		
Objective – To provide health, wellness and type 2 diabetes education close to home.	Number of Library community programs*	Number of Library community programs* across the city and in areas of high diabetes prevalence (Equity Action Areas)
Connection and Belonging		
Objective – To cultivate opportunities for connection and a sense of belonging.	 Number of active Library card holders* Hours of free cultural space* in areas of high diabetes prevalence (Equity Action Areas) Value of community grants in support of (a number) of community organizations* Number of people helped through the Open Window Hub* Number of free outdoor WIFI "hot spots"* 	 Number of active Library card holders* across the city and in areas of high diabetes prevalence (Equity Action Areas) Hours of free cultural space* across the city and in areas of high diabetes prevalence (Equity Action Areas) Value of community grants in support of (a number) of community organizations* Number of people helped through the Open Window Hub* Number of free outdoor WIFI 'hot spots"* in areas of high diabetes prevalence (Equity Action Areas)

5.0 Conclusion

The Healthy City Strategy was developed through insights gained from external collaborations with research and data experts, health research findings, the experiences of other municipalities, and community engagement efforts to understand community needs and priorities. It will empower staff and decision makers with a health equity perspective to take an evidence-informed approach to the planning and development of City programs, policies, initiatives, and infrastructure.



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