

Putting Health on the Agenda: The 2026 Municipal Election

How Municipal Decisions Shape Community Health

Your Community.

Your Health.

Your Vote.



Northeastern
PUBLIC HEALTH
SANTÉ PUBLIQUE
du Nord-Est



Putting Public Health on the Agenda during the 2026 Municipal Election

Municipalities influence health

Municipal leadership plays an important role in influencing the social, environmental and economic conditions that affect health across our communities. Municipalities also provide programs, services, facilities and emergency planning, which contribute to creating safe, healthy and inclusive communities.

We encourage municipalities to keep health equity and Indigenous health at the forefront when considering municipal issues. People in our communities experience different barriers to health and well-being. By listening to these experiences and working to reduce barriers, we can help create fairer access to services, opportunities, and the things people need to be healthy. Small changes can make a big difference in reducing health gaps.

When all residents can reach their full potential, communities become stronger and more resilient.

Why public health is important

Northeastern Public Health is one of 29 public health agencies in Ontario. Public Health supports healthier communities by promoting health, preventing disease and injury, and protecting population health. Its work focuses on upstream factors by addressing the root causes of health outcomes related to factors like housing, income, education, food access, and community environments.

Public Health also helps communities respond to emergencies like natural disasters and pandemics. By working with municipalities and local partners, public health can respond quickly to protect people's health

and safety. This work helps keep communities healthy, reduces pressure on hospitals and healthcare services and supports stronger communities.

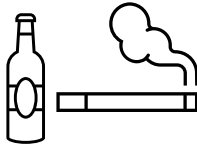
Northeastern Public Health is committed to providing evidence-based information to support decisions that affect health and well-being.

During this election, we encourage candidates and voters to consider key local public health issues.

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Substance Use and Retail Environments



The issue

The NEPH region has the highest smoking rates and alcohol use in Ontario.^{1,2} The density and location of tobacco, vaping, cannabis, and alcohol retailers can influence substance use behaviours by increasing visibility, accessibility, and normalization, particularly among youth.^{3,4,5} Higher retailer density has been associated with increased tobacco and alcohol use, greater susceptibility to smoking among youth, and increased substance-related harms.⁶ As a result, retail density and location are increasingly recognized as important municipal policy considerations for reducing substance-related harms and advancing health equity.

Why it matters

Supporting healthier retail environments can help reduce use, exposure to and normalization of harmful substances, particularly among youth.⁷ Each year in Ontario, smoking contributes to an estimated 16,673 deaths, 68,046 hospitalizations, and 125,384 emergency department visits among adults aged 35 and older.⁸

Policies that reduce retailer density and expand smoke-free and vapour-free spaces can improve health outcomes, advance health equity, and help reduce long-term health care costs associated with chronic disease, injuries, impaired driving, enforcement, and exposure to second-hand smoke and vapour exposure.⁹

What NEPH is doing:

- Supporting municipalities in developing and strengthening smoke-free and vapour-free bylaws that extend beyond the Smoke Free Ontario Act (SFOA).
- Providing municipalities with local evidence and tools.
- Supporting zoning restrictions such as retailer caps (a policy that limits the number or density of stores permitted to sell products within a municipality based on geographic area or population), school buffer zones, restrictions on sale locations, and policies such as retail licensing.
- Collaborating with municipalities to strengthen policies related to alcohol, cannabis and tobacco.

What municipalities can do:

- Consider retailer caps and zoning restrictions for tobacco, vaping, cannabis, and alcohol retailers, where permitted.
- Implement retail licensing requirements and fees.
- Support substance-free recreational, cultural, and community events.
- Implement smoke-free and vapour-free bylaws on municipal properties not covered by the SFOA, such as parks, trails, beaches, and municipal events.

Learn more: [Summary](#) of tobacco, vaping and cannabis by-laws in Ontario.

Learn more: [Summary](#) of municipal tobacco and vaping retail licensing by-laws in Ontario.

Housing and Homelessness

The issue

Access to safe and affordable housing is a social determinant of health.¹⁰ When people have access to adequate housing, they are more likely to have better health outcomes. Affordable housing provides adequate shelter, reduces overcrowding, and supports access to basic needs like food. Quality housing in good neighbourhoods with access to transit, recreation and services improves overall health and well-being. Different forms of homelessness have been associated with increased rates of infectious diseases, mental health issues, chronic disease and injury.

Canada has an affordability and housing crisis. The rise in homelessness a societal and economic issue. There are many factors that are contributing to this complex issue. By taking a housing first stance, municipalities can help improve the wellbeing of residents in their community.

Why it matters

By investing in affordable housing, supportive services and working collaboratively across sectors, municipalities can help:

- Significantly reduce healthcare costs – some research suggests that individuals experiencing homelessness use up to 6 times more healthcare services than people who are housed.^{11,12}

Additionally, addressing the root causes of homelessness and housing instability helps

- Reduce long term public costs like emergency services (emergency departments, shelters, justice system).¹³
- Support strong local economies and better quality of life.
- Increase municipal revenues through new housing developments.¹⁴

What NEPH is doing:

- Supporting partners in applying a public health and health equity lens to housing and homelessness.
- Facilitating cross-sector collaboration with municipalities, service providers, Indigenous partners, and community organizations.
- Contributing to policy development that promotes safe, affordable and supportive housing environments.

What municipalities can do:

Municipalities can play a role in increasing affordable housing by:

- Incorporating homelessness into an Official Plan and linking it with a Housing and Homelessness Action Plan.
- Supporting transitional and affordable housing in land use policies.
- Preventing the demolition of affordable housing, and expedite affordable housing developments.
- Working with developers to reuse brown fields for building social housing.¹⁵
- Advocating for provincial and federal investment.
- Championing community improvement plans, homelessness action plans and effective land use planning.



Social Connection



The issue

Social connection refers to the quality and quantity of relationships people have with others and their sense of belonging within community. Loneliness and social isolation are strongly associated with poorer mental and physical health outcomes, including depression, cardiovascular disease, cognitive decline, and increased risk of premature mortality.¹⁶

Certain populations, including young people, visible minorities, older adults, newcomers, people with low incomes, individuals with disabilities, and those living in rural or remote communities, may face a higher risk of social isolation.¹⁷ Community design plays an important role in shaping social connectedness. Access to parks, public spaces, reliable transportation, and inclusive community gathering places can help foster meaningful social interaction and strengthen a sense of belonging.¹⁸

Why it matters

Investing in social connection can improve well-being while reducing pressure on health and social systems.

Canadian evidence from social prescribing programs found:

- Every \$1 invested may generate approximately \$4.43 in social and economic return.¹⁹
- Reduced emergency department visits and hospitalizations.
- Improved mental health and aging at home.

Connected communities are also associated with:

- Stronger community resilience.
- Increased civic participation.
- Safer, healthier neighbourhoods.²⁰

What NEPH is doing:

- Monitoring loneliness and social isolation as population health issues.
- Supporting social prescribing and community referral programs.
- Promoting age-friendly and inclusive communities.
- Working with municipalities on healthy built environments, transportation, parks, and community hubs.
- Collaborating across sectors to support older adults, LGBTQ2S+ populations, and newcomers.

What municipalities can do:

Municipalities play a key role in creating connected communities by:

- Investing in parks, libraries, trails, community centres, and public gathering spaces.²¹
- Supporting walkable, age-friendly, and accessible neighbourhoods.
- Improving transportation access.
- Funding recreation, arts, cultural, and intergenerational programming.
- Embedding social connectedness into planning, housing, recreation, and community wellbeing strategies.
- Partnering with public health, community organizations, schools, and libraries.

Small local investments that increase opportunities for people to connect can support healthier, more resilient communities.

Healthy Built Environment

The issue

The built environment refers to our human-made surroundings; it includes housing, food systems, natural environments, transportation and neighbourhood design. The way our communities are designed can influence many outcomes related to chronic diseases such as cancer, cardiovascular disease, and diabetes, as well our mental health and social well-being.

Healthy built environments shape how people move, connect, and live day to day. When communities lack safe sidewalks, accessible housing, green space, or reliable transportation, this can negatively affect physical activity, mental health, social connection, and health equity. These gaps disproportionately affect older adults, low-income residents, newcomers, people with disabilities, and rural or underserved communities.

Why it matters

Investing in healthy built environments produces long-term health, social, environmental, and economic benefits, including:

- Reduced rates of chronic disease through increased physical activity.
- Lower healthcare system costs over time.
- Improved mental health and reduced loneliness and social isolation.
- Increased mobility and independence, particularly for older adults.
- Stronger local economies through more walkable, connected communities.
- Improved climate resilience through greener, more sustainable infrastructure.²²

What NEPH is doing:

- Providing evidence-informed education and resources related to road safety, policy advice, cross-sector collaboration related to active school travel and promoting age-friendly communities.
- Supporting municipalities and community partners with public health expertise.
- Promoting equity-focused planning and decision-making.
- Sharing knowledge on best practices in community design.
- Encouraging collaboration across health, planning, and social sectors.

What municipalities can do:

Municipalities can support healthier communities by:

- Improving walkability through safe sidewalks, crossings, and traffic calming.
- Expanding access to parks, trails, and green spaces.
- Investing in reliable and accessible public transportation.
- Supporting affordable, safe, and age-friendly housing options.
- Designing inclusive public spaces that encourage social connection.
- Integrating health considerations into planning and zoning decisions.



Climate Change



The issue

Climate change is a public health threat across Canada caused by increasing greenhouse gases in the atmosphere. It is contributing to more frequent and intense extreme weather events, shifting patterns of infectious diseases, and it impacts food and water safety.²³ In Northeastern Ontario, these changes affect physical and mental health, place additional pressure on healthcare and emergency services, and impact vulnerable populations, including older adults, children, people with chronic conditions and those facing social and economic challenges.²⁴

Wildfire smoke is now a recurring seasonal issue in Northern Ontario. Climate change is contributing to earlier snowmelt and later fall frost, extending wildfire seasons. Wildfire incidence is projected to increase by about 25% by 2030 due to warmer, drier summers and increased lightning activity.²⁵ Changes in the climate are expected to intensify over time will increase risks like heat-related illness, poor air quality, and climate sensitive diseases like Lyme disease and West Nile virus, particularly in rural and remote communities.

Why it matters

Investing in climate action helps protect health, reduce future costs, and build more resilient communities. Actions that reduce climate risks can help prevent illness and injury, improve air quality, protect food and water sources, strengthen emergency preparedness, and support healthy, vibrant communities. Proactive investments today can help avoid future healthcare, infrastructure and emergency response costs.²⁶

What NEPH is doing:

- Raising awareness about the health impacts of climate change among residents, health care professionals, community partners, and decision-makers.
- Providing weather alerts and public health information related to extreme heat, extreme cold, and air quality.
- Monitoring and preventing climate-sensitive diseases including Lyme disease and West Nile virus.
- Conducting surveillance and inspections to help protect food and water sources that may be affected by climate change.
- Collaborating with municipalities, community organizations and regional partners through initiatives like the Northern Ontario Climate Change and Health Collaborative to better understand and address climate-related health risks.²⁷

What municipalities can do:

Municipalities can support climate change initiatives by:

- Integrating climate adaptation and resilience into municipal planning and decision-making.
- Supporting emergency preparedness measures for extreme heat, severe weather, wildfire smoke and other climate-related events.
- Investing in green infrastructure, urban forests and natural spaces that help reduce heat and improve environmental sustainability.
- Supporting active transportation, energy efficient buildings and other initiatives that reduce greenhouse gas emissions while promoting health.
- Partnering with public health and community organizations to identify and address local climate-related health risks.

Growing Healthy Families

The issue

Early adversity refers to the negative, potentially lifelong effects that early childhood life events can have on physical and mental health. These experiences can affect a child's health, development, and well-being throughout their life.

In the NEPH area, more families experience adversity compared to the provincial average. For example, a higher proportion of families are involved with child protection services (7.4% vs. 4.4%). More pregnancies are affected by alcohol, drug, or substance exposure (6.0% vs. 2.5%). More infants are born into families experiencing financial stress (8.2% vs. 4.4%), led by a single mother (6.6% vs. 2.8%), or without access to a primary care provider (21.3% vs. 7.6%).²⁸

Children do best when they grow up in safe, stable, and supportive environments. Community factors such as affordable housing, financial supports, quality childcare, and strong community partnerships help families thrive and reduce the impact of adversity.²⁹

Why it matters

Many chronic diseases and high-risk substance use in adults begins in childhood. Supporting families during pregnancy and the early years of a child's life helps children get the best possible start and promotes better health and well-being into adulthood.

- Better health outcomes across the lifespan- healthy families grow healthy children.
- Better outcomes in school readiness, learning, and social development of children.
- Reduced healthcare and social service costs.
- Reducing exposure to early adversity lowers the risk of chronic diseases in adulthood, including heart disease, diabetes, and depression.

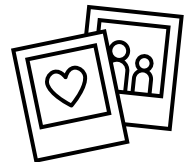
What NEPH is doing:

- Raising awareness about early adversity, adverse childhood experiences (ACES), resilience, and protective factors.
- Delivering in-home parenting programming (relational health) for families experiencing life challenges.
- Providing prenatal education classes.
- Providing breastfeeding education and hands-on support during pregnancy and after birth.
- Working with partners to improve consistent breastfeeding support across services.

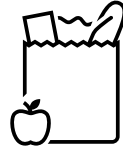
What municipalities can do:

Municipalities can support growing healthy families by:

- Investing in community and neighbourhood features that support families and enhance safety (e.g. lighting, adequate housing, playgrounds, libraries, recreation).
- Investing in programs and policies that reduce stress and support children and the adults who care for them.
- Enhancing and promoting social and cultural connections
- Implementing policies and practices that promote equity and inclusivity.
- Integrating a trauma-informed approach into all stages of land use planning and development, and all programs and services³⁰



Food Security & Affordability



The issue

Household food insecurity (HFI) refers to inadequate or insecure access to food due to financial constraints and is fundamentally an income-related issue. In Ontario, HFI reached a record high in 2024, affecting 25.3% of households.³¹ Food insecurity is associated with poorer physical and mental health outcomes, increased health care utilization, and reduced quality of life.³² While food insecurity is strongly linked to low income, it is increasingly affecting households with employment income due to rising costs of housing, food, and other essentials. Indigenous Peoples and other equity-denied populations continue to experience disproportionately high rates of food insecurity due to the ongoing impacts of colonialism, systemic racism, and structural inequities.³³

Why it matters

Addressing the root causes of food insecurity through income-based and affordability-focused policies can improve health outcomes, reduce health inequities, and lessen pressures on health and social systems. Evidence demonstrates that interventions that improve income security, including adequate social assistance, living wages, child benefits, and income supports are more effective at reducing the prevalence and severity of food insecurity than food-based charitable responses. Investments in reducing food insecurity contribute to healthier communities, improved educational and employment outcomes, and reduced health care costs associated with chronic disease, mental illness, and severe food insecurity.^{34,35}

What NEPH is doing

- Monitoring HFI and food affordability trends across the NEPH region.
- Developing a Monitoring Food Affordability in Ontario (MFAO) data collection plan.
- Collecting updated food affordability data to better understand local challenges and trends.
- Using local evidence to inform municipal decision-making and support actions that address the root causes of food insecurity.

What municipalities can do:

- Recognize household food insecurity as an income issue and support policies that improve income and affordability.
- Advocate to provincial and federal governments for stronger income supports, including adequate social assistance rates, living wages, and affordable housing.
- Incorporate food affordability into municipal planning, housing, transportation, and community development decisions (i.e. support affordable and active transportation, consider food access in land-use planning, and promote community gardens, community kitchens, and food hubs).
- Support Indigenous-led initiatives that advance food sovereignty, self-determination, and access to traditional foods.
- Partner with public health, Indigenous communities, community organizations, and other sectors to reduce the root causes of household food insecurity.
- Recognize the important role of food banks and other charitable food programs while supporting long-term solutions that address the root causes of household food insecurity.

References

- 1 Ontario Agency for Health Protection and Promotion (Public Health Ontario). (2023 June 5). Alcohol use snapshot. <https://www.publichealthontario.ca/en/data-and-analysis/substance-use/alcohol-use>
- 2 Fataar, F., Driezen, P., Owusu-Bempah, A., & Hammond, D. (2024). Distribution of legal retail cannabis stores in Canada by neighbourhood deprivation. *Journal of Cannabis Research*, 6, Article 5. <https://doi.org/10.1186/s42238-023-00211-x>
- 3 Ontario Public Health Association. (2018). Alcohol outlet density: Strategies to reduce alcohol-related harms in Ontario (Issue Series). <https://opha.on.ca/wp-content/uploads/2021/06/Alcohol-Outlet-Density.pdf>
- 4 Schwartz, N., Fu, S. H., Hobin, E., Myran, D. T., & Smith, B. T. (2026). Increase in alcohol outlets by neighbourhood socioeconomic status following the expansion of alcohol sales into convenience stores in Ontario, Canada. *Canadian Journal of Public Health*, 117(3), 434-441. <https://doi.org/10.17269/s41997-025-01094-6>
- 5 Sherk A, Stockwell T, Chikritzhs T, Andréasson S, Angus C, Gripenberg J, et al. Alcohol consumption and the physical availability of take-away alcohol: systematic reviews and meta-analyses of the days and hours of sale and outlet density. *J Stud Alcohol Drugs*. 2018;79(1):58-67. <https://doi.org/10.15288/jsad.2018.79.58>
- 6 Ontario Agency for Health Protection and Promotion (Public Health Ontario). (2023). Burden of health conditions attributable to smoking and alcohol by public health unit in Ontario. <https://www.publichealthontario.ca/en/Health-Topics/Health-Promotion/Tobacco/Smoking-Alcohol>
- 7 Ontario Public Health Association. (2018). Alcohol outlet density: Strategies to reduce alcohol-related harms in Ontario (Issue Series). Ontario Public Health Association. <https://opha.on.ca/wp-content/uploads/2021/06/Alcohol-Outlet-Density.pdf>
- 8 Ontario Agency for Health Protection and Promotion (Public Health Ontario). (2023). Burden of health conditions attributable to smoking and alcohol by public health unit in Ontario. <https://www.publichealthontario.ca/en/Health-Topics/Health-Promotion/Tobacco/Smoking-Alcohol>
- 9 Ontario Agency for Health Protection and Promotion (Public Health Ontario). (2024, November). Smoke-free series: Tobacco and vaping retail environments. https://www.publichealthontario.ca/-/media/Documents/S/24/smoke-free-series-retail-environments.pdf?rev=fa2cfa582cb945229bad1a4c890046e3&sc_lang=en&hash=F66CF7B1F8B271AE0BAC2AFE2BC41A3A_0
- 10 Public Health Agency of Canada. (2026) Health equity and determinants of health. <https://www.canada.ca/en/public-health/services/health-promotion/population-health/what-determines-health.html>
- 11 Richard, L., Carter, B., Nisenbaum, R. et al. Disparities in healthcare costs of people experiencing homelessness in Toronto, Canada in the post COVID-19 pandemic era: a matched cohort study. *BMC Health Serv Res* 24, 1074 (2024). <https://doi.org/10.1186/s12913-024-11501-2>
- 12 Ontario Public Health Association. (n.d) Public Action on Housing Needs. <https://opha.on.ca/what-we-do/projects/public-health-action-on-housing-needs/>

-
- 13 John Howard Society. (2022) No Fixed Address – The Intersections of Justice Involvement and Homelessness. <https://johnhoward.on.ca/wp-content/uploads/2022/05/No-Fixed-Address-Final-Report.pdf>
- 14 BC Housing Research Centre. (Oct 2018). SROI Summary Report: Overview of The Social and Economic Value of Supportive and Affordable Housing in B.C. <https://www.bchousing.org/sites/default/files/rcg-documents/2022-04/BK-SROI-Summary-Social-Economic-Value-Supportive-Affordable-Housing%20%281%29.pdf>
- 15 Institute on Municipal Finance and Governance. (2022). The Municipal Role in Housing. https://imfg.org/wp-content/uploads/2022/04/imfgwdw_no1_housing_april_5_2022.pdf
- 16 Card K., Yu C., Refol, J., Frost A., & Bombaci P. (2023) How does loneliness affect health? <https://www.socialconnectionguidelines.org/en/evidence-briefs/how-does-loneliness-affect-health>
- 17 Statistics Canada. (2024). You've got a friend in me. <https://www.statcan.gc.ca/o1/en/plus/6735-youve-got-friend-me>
- 18 Foundation for Social Connection. (2023). Action Guide for Building Socially Connected Communities. <https://action4connection.org/>
- 19 Canadian Institute for Social Prescribing. (2024). A Healthier Canada: An Analysis of the Potential Economic and Social Impacts of Social Prescribing. https://irp.cdn-website.com/92bb31b3/files/uploaded/A_Healthier_Canada-An_Analysis_of_the_Potential_Economic_and_Social_Impacts_of_Social_Prescribing.pdf
- 20 Canadian Alliance for Social Connection and Health. (2026) Social Connection Guidelines. <https://www.socialconnectionguidelines.org/en>
- 21 Grewal A., Refol, J, Frost A., and Card K. (2024). Does the built environment shape loneliness? <https://www.socialconnectionguidelines.org/en/evidence-briefs/does-the-built-environment-shape-loneliness>
- 22 Public Health Agency of Canada. (2018). The Chief Public Health Officer's Report on the State of Public Health in Canada 2017: Designing Healthy Living. <https://www.canada.ca/en/public-health/services/publications/chief-public-health-officer-reports-state-public-health-canada/2017-designing-healthy-living.html>
- 23 Health Canada. (2022) Health of Canadians in a Changing Climate. <https://changingclimate.ca/health-in-a-changing-climate/>
- 24 Northern Ontario Climate Change and Health Collaborative. (2022). Climate Change and Health in Northern Ontario/ <https://www.porcupinehu.on.ca/en/your-community/climate-change-and-health/changing-climate-and-health-in-northern-ontario-report.pdf>
- 25 Health Canada. (2022) Health of Canadians in a Changing Climate. <https://changingclimate.ca/health-in-a-changing-climate/>
- 26 Climate Policy Initiative. (2024). The Cost of Inaction. <https://www.climatepolicyinitiative.org/the-cost-of-inaction>
- 27 Northeastern Public Health (2026). Healthy Environments – Climate Change and Health in Northern Ontario. <https://www.neph.ca/en/programs/environmental-health/healthy-environments>
- 28 Ontario Agency for Health Protection and Promotion (Public Health Ontario). (2023). Risk Factors for Healthy Child Development Snapshot. <https://www.publichealthontario.ca/en/Data-and-Analysis/Reproductive-and-Child-Health/Healthy-Child-Development>
<https://www.publichealthontario.ca/>

-
- 29 Dawdy, J., Dunford, K. and Magalhaes Boateng, K. (2025). Ontario Early Adversity and Resilience Framework. Public Health Ontario Adverse Childhood Experiences and Resilience Community of Practice. www.earlyadversityandresilience.ca
- 30 Public Health Adverse Childhood Experiences & Resilience Community of Practice. (March 2025). Ontario Early Adversity and Resilience Framework. <https://www.simcoemuskokahealth.org/docs/default-source/EarlyAdversityandResilience/ontario-early-adversity-and-resilience-framework---final---aoda-1.pdf>
- 31 PROOF. (2024 April 26). New data on household food insecurity in 2023. <https://proof.utoronto.ca/2024/new-data-on-household-food-insecurity-in-2023/>
- 32 Tarasuk V, Fafard St-Germain A, Li T. Moment of reckoning for household food insecurity monitoring in Canada. Health Promot Chronic Dis Prev Can. 2022;42(10):445-9. <https://doi.org/10.24095/hpcdp.42.10.04>
- 33 Ontario Dietitians in Public Health. (2026). Call to action on household food insecurity. Ontario Dietitians in Public Health (ODPH)
- 34 Ontario Dietitians in Public Health. (2026). Call to action on household food insecurity. Ontario Dietitians in Public Health (ODPH)
- 35 Ontario Agency for Health Protection and Promotion (Public Health Ontario). (2025). Household food insecurity snapshot. <https://www.publichealthontario.ca/en/Data-and-Analysis/Health-Equity/Household-Food-Insecurity>