

DEVELOPED BY THE MEMBER ORGANIZATIONS
OF THE HEALTHY CITY STEWARDSHIP CENTRE



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ENDORSEMENT

The member organizations of the Healthy City Stewardship Centre endorse the *Healthy Mississauga 2010 Plan* and agree to participate in the success of the Plan through both their collective and individual efforts.

Mayor Hazel McCallion, HCSC Honorary Chair City of Mississauga

Michael Botor

Michael Bator, HCSC Chair

Dufferin-Peel Catholic District School Bd.

Japice Baker, HCSC Vice Chair City of Mississauga

Staff Superintendent Tom Allen Peel Regional Police

Michael Cloutier AstraZeneca Canada Inc.

Wayne Fyffe/ Credit Valley Hospital

Peter Fonseca, MPP Mississauga East Parliamentary Asst. to the Minister of Health Promotion

Jim Grieve Peel District School Board Louroz Mercader

Mayor's Youth Advisory Committee

Ian Orchard

University of Toronto at Mississauga

Lynn Petrushchak

Dixie-Bloor Neighbourhood Centre

Chris Power

Trillium Health Centre

David Szwarc

Region of Peel

Shelley White

United Way of Peel Region

HEALTHY MISSISSAUGA 2010 PLAN EXECUTIVE SUMMARY



Executive Summary

The *Healthy Mississauga 2010 Plan* is a framework for action toward the betterment of health for the people of Mississauga. It charts a course for residents, businesses and agencies to collectively and proactively work toward positively affecting the well-being of those who live and work in Mississauga. Not only is individual physical health discussed in the Plan, but social and environmental health as well.

This document is developed by the thirteen member organizations of the Healthy City Stewardship Centre (HCSC). The HCSC organizations all have different mandates for various local health issues. The member organizations have come together to develop the *Healthy Mississauga 2010 Plan* because they recognize that there will be greater benefits achieved by collaborating together. The principal vision of the Stewardship Centre is:

Mississauga will be a Healthy City of people with optimal physical, mental and spiritual health.

The *Healthy Mississauga 2010 Plan* presented herein, describes a number of priorities that will be collectively focussed on over the next five years. The Plan is written with the specific intention to allow the HCSC member organizations to continue to work toward their own mandates and strategic priorities, and also collaborate on agreed to health issues.

There is a collective belief among the Healthy City Stewardship Centre members, that Mississauga is generally in a favourable health condition, but that there are growing trends such as obesity rates, poverty levels, etc. that cause concern for the future health of our local community. Mississauga's present health condition of its residents, environment and communities requires assessment and positive action to ensure there is no further decline, but more importantly, improvement and leadership in development of best practices in certain areas.

Throughout the 2010 Plan, there is specific reference made to measuring the improvements in local health, as the work to fulfil the Plan progresses. The University of Toronto at Mississauga will champion the measurements of progress throughout the years ahead. As each of the initiatives within the Plan become galvanized and put into action, a resource plan to do all that is necessary or possible to meet the set targets will be developed by the specific champion for that initiative.

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STEWARDSHIP CENTRE

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The *Healthy Mississauga 2010 Plan* is presented as a five year strategy. It is an attempt at having a network of key decision-making agencies and organizations, work together on a number of initiatives that they agree are of importance. The nine stated HCSC ACTIONS outlined below are not presented in priority order. For some of the actions listed below work has already begun, but much is still to be done to ensure these initiatives are implemented. The nine HCSC ACTIONS of the 2010 Plan are:

i. Goal: All people in Mississauga will value and strive for optimal health.

a. HCSC ACTION: To understand why some people are motivated to value and strive for good health, and why others are not. To use

this knowledge to mobilize more of the City's population to

achieve better health.

champion: University of Toronto at Mississauga

target: to conduct research and develop materials and strategies on

various aspects of personal health motivation; to then use this knowledge to motivate more people in Mississauga to strive

for optimal health

• timing: on-going to 2010

b. HCSC ACTION: To support the ACTIVE 2010 – GET ACTIVE Mississauga Plan.

• champion: Mississauga YMCA (with direct support from the City of

Mississauga)

• target: to better the 44.3% rate of the Mississauga population that is

physically active, to 55%

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• timing: immediate and on-going to 2010



c. HCSC ACTION: To support the Youth Strategy development and implementation.

• champion: City of Mississauga (with direct support from the Mayor's

Youth Advisory Committee (MYAC))

• target: to provide children and youth the support, programs,

opportunities and life-skills to move well through their teen

years into adulthood

timing: a) completion and approval of the Youth Strategy by year-end

2006

b) full implementation of the Youth Strategy by 2010

ii. Goal: All people in Mississauga will feel safe in their communities.

d. HCSC ACTION: To identify the neighbourhoods, community groups or

individuals where concerns regarding safety are preventing people from leading active lives. To implement effective

solutions that help alleviate these concerns.

• champions: all HCSC member organizations

targets: to identify neighbourhoods or individuals and response to their

specific safety concern by implementing an effective solution

within an acceptable response time.

• timing: immediate and on-going to 2010

iii. Goal: All people in Mississauga will have equal access to information and services.

e. HCSC ACTION: To strive for correct, culturally appropriate and timely

communication on health information for all communities

in Mississauga.

champions: All HCSC member organizations for best practices and the

United Way of Peel Region as champion for the future 2-1-1

service implementation.



targets:
 a) to develop best practices for health information

communication, in particular targeting new immigrants to

Mississauga,

b) to successfully negotiate for, and then implement, the 2-1-1

social services phone service.

timing: a) best practices: development of best practices by the end of

1st year, May '07, implementation of best practices by 2010,

b) 2-1-1 service: fully implemented by 2010.

iv. Goal: All people in Mississauga will live in and contribute to a clean and sustainable environment.

f. HCSC ACTION: To support the 'Public Health and Urban Form'

initiative's development and implementation.

• champions: Region of Peel (Office of the Medical Officer of Health) and

the City of Mississauga (Planning and Building Department)

target: a) to develop a planning process by which Mississauga's

urban form is supportive of good public health,

b) fully implemented as a standard planning process.

■ timing: a) planning process developed by the end of the 1st year –

May '07,

b) full implementation by 2010

g. HCSC ACTION: To support the UTM's 'Centre for Emerging Energy Technologies'.

champion: University of Toronto at Mississauga

target: to improve community access to new and sustainable energy

technologies by means of encouraging partnerships, and

coordination with City and Region initiatives.

• timing: immediate and on-going to 2010



v. Goal: All people in Mississauga will feel part of a larger community and will know that they will be cared for in times of need.

all HCSC member organizations

h. HCSC ACTION: To investigate the health and community needs of new immigrants to help their transition into the community of Mississauga, and implement effective solutions to manage their needs.

champions:

target: to investigate gaps in services for new immigrants, to lobby for

increased resources, and to implement effective solutions to

manage their needs

• timing: immediate and on-going to 2010

i. HCSC ACTION: To research existing volunteer programs, especially in

Mississauga's private sector, and create a forum by which

success stories are shared.

• champion: all HCSC member organizations

• target: to hold a forum on volunteer capacity with local private and

public organizations, and then communicate examples and

success stories to a wider local audience.

■ timing: end of first year – May '07



The Healthy City Stewardship Centre member organizations believe that working together on these priority health actions will generate the best results. It is hoped that the collaborative efforts toward the HCSC goals will galvanize the public, governments, agencies and businesses to get involved to achieve optimum success.



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I. INTRODUCTION:

The *Healthy Mississauga 2010 Plan* document is a roadmap toward better health for the people of Mississauga. It charts a course for residents, businesses and agencies to collectively and proactively work toward positively affecting the well-being of those who live and work in Mississauga. Not only is individual physical health discussed in the Plan, but social and environmental health as well.

This document is co-written by the member organizations of the Healthy City Stewardship Centre listed below:

- 1. AstraZeneca Canada Inc.
- 2. City of Mississauga
- 3. Credit Valley Hospital
- 4. Dixie-Bloor Neighbourhood Centre
- 5. Dufferin-Peel Catholic District School Board
- 6. Mayor's Youth Advisory Committee
- 7. Peel District School Board
- 8. Peel Regional Police
- 9. Peter Fonseca, MPP Mississauga East and Parliamentary Assistant to the Minister of Health Promotion
- 10. Region of Peel
- 11. Trillium Health Centre
- 12. United Way of Peel Region
- 13. University of Toronto at Mississauga

In 2004, these thirteen organizations joined the newly formed Healthy City Stewardship Centre (HCSC), with the agreement to work together on local health issues. The HCSC member organizations all have different mandates for various local health issues. Those mandates will not be changed by the *Healthy Mississauga 2010 Plan*. However, all of the member organizations agree that there will be greater benefits achieved by collaborating together on priority health issues. The *Healthy Mississauga 2010 Plan* presented herein, describes a number of priorities that will be collectively focussed on over the next five years. It is expected that the *Healthy Mississauga 2010 Plan* is the first of many health plans to be developed over the years to come.



II. BACKGROUND:

The formation of the Healthy City Stewardship Centre began in the mid-1990s, as a partnership between the University of Toronto at Mississauga (UTM) and the City of Mississauga. The idea centred on the concept that a local university should provide the research and expertise required by city officials, to make informed public policy based on empirical data. Eventually the concept was expanded to include a number of the municipality's key decision-makers (listed in the introduction).

During the late 1990s, the Healthy City Stewardship Centre concept also caught the attention of the World Health Organization (WHO), which eventually lead to Mayor Hazel McCallion becoming a Director of the WHO 'Cities and Health Programme' from 2001 to 2006.

Please visit the HCSC website at www.mississauga.ca/portal/cityhall/stewardship for more background information on the WHO, the work by UTM to develop the Healthy City Stewardship Centre concept, and the HCSC terms of reference and membership.

Since its inception in 2004, the Healthy City Stewardship Centre members have formulated a vision and a number of health goals for a healthier Mississauga. As well, they have sought input and advice from numerous community organizations and local residents through a 'Community Discussion on Health' which was held in November, 2005 at the University of Toronto at Mississauga campus. The HCSC vision and goals are:

Vision: Mississauga will be a Healthy City of people with optimal physical, mental and spiritual health.

Goal: All people in Mississauga will value and strive for optimal health.

Goal: All people in Mississauga will feel safe in their communities.

Goal: All people in Mississauga will have equal access to information and services.

Goal: All people in Mississauga will live in and contribute to a clean and sustainable environment.

Goal: All people in Mississauga will feel part of a larger community and will know that they will be cared for in times of need.



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Throughout the 2010 Plan, there is specific reference made to measuring the improvements in local health, as the work to fulfil the Plan progresses. The UTM faculty and student body will champion the measurements of progress throughout the years ahead. The measurement work by UTM has already begun with the following recent events:

- a UTM undergraduate student received funding for research focusing on neighbourhood health. The student has been working with the Dixie-Bloor Neighbourhood Centre to build a 'Health Opportunity Index' which builds upon previous work by agencies such as United Way. The research will allow a greater understanding of perceptions and determinants of health in the neighbourhood.
- funding was received from the Canadian Foundation for Innovation (CFI) to establish a "Cities, Health and Neighbourhoods Geomatics Research Laboratory (CHANGE)." The goal of the CHANGE lab is to facilitate understanding of health in the City of Mississauga by examining how social and physical neighbourhood environments shape health through the application of geographic information systems.

As a final note, it must be recognized that the Healthy City Stewardship Centre is not an agency unto itself, but rather represents organizations dedicated to collaboration on health priorities. The effort to date has been with staff and in-kind resources for the meetings and research; some corporate sponsorship was also received to hold the 'Community Discussion on Health' held in November, 2005. As each of the initiatives within the Health Plan become galvanized and put into action, a resource plan to do all that is necessary, or possible, to meet the set target will be developed by the champion(s) of that initiative.

While each member organization has agreed to work toward the various elements of the 2010 Plan, each organization must also determine how the priorities of the Plan work within their own organization's strategic goals and endeavours. To help the HCSC members work the Plan into their own structure and feel comfortable with the priorities, the *Healthy Mississauga 2010 Plan* has been developed so there will be a focus on each of the five HCSC goal statements, with a wide range of endeavour and commitment. The priorities of the Plan will be both broad and specific, research-based and action-based, community outreach and internal organizational activities - all of the work, no matter how small, will matter as it supports the collective efforts to meet the HCSC vision.



III. CITY OF MISSISSAUGA – EXISTING HEALTH CONDITION:

It is important at the launch of the *Healthy Mississauga 2010 Plan*, to generally define the health of the local community. While some specific health data does exist for Mississauga, most of the health facts are combined in regional and provincial numbers, so it is somewhat difficult to be definitive about local health conditions. Listed below is a snapshot of what we know today:

- 1. Mississauga is the safest city in Canada and has held that title for the past six years¹
- 2. 48% of Ontarians participate in acceptable levels of daily/weekly physical activity². Based on the same research, Mississauga residents participate only 44.3% approximately 4% less than the provincial average³
- 3. in Ontario, almost 60% of adults and 28% of children and youth are overweight or obese⁴. The Region of Peel's Health Unit indicates that the total overweight and obese population for Mississauga is 47%⁵
- 4. 17% of seniors live alone⁶
- 5. more than one in 10 families have low income⁷
- 6. more than 115,000 people in Peel live below the poverty line⁸
- 7. over 46% of Mississauga's population are newcomers to Canada, and 42% of the population's mother tongue is neither English or French
- 8. the top three chronic diseases affecting the people of Mississauga are lung disease, ischemic heart disease and diabetes⁹
- 9. motor vehicle collisions in the Region of Peel are higher than the provincial average¹⁰
- 10. the Region of Peel has one of the lowest rates for residents relying on cycling and walking for commutes¹¹
- 11. in a 2002 survey by the National Post, Mississauga ranked as the sixth healthiest city overall, among the 14 largest Canadian cities represented 12

The information above serves only to inform readers that the health of residents in Mississauga is not completely known, and that behind each statistic there are many issues and forces at play. However, there is a collective belief among the HCSC member



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¹ Mississauga Crime Prevention Association

² Ontario Ministry of Health Promotion

³ Mississauga Community Action Plan 2005-2010

⁴ Ontario Ministry of Health Promotion

⁵ Statistics Canada (as described in the Mississauga Community Action Plan 2005-2010)

⁶ United Way - Portraits of Peel

⁷ United Way – Portraits of Peel

⁸ United Way of Peel

⁹ Trillium Health Centre

¹⁰ Peel Health Status Report - 2005

¹¹ Peel Health Status Report - 2005

¹² National Post, Oct. 21, 2002

organizations, that Mississauga is generally in a favourable health condition but that there are growing trends such as obesity rates, poverty levels, etc. that cause concern for the future health of our local community. Mississauga's present health condition of its residents, environment and communities require further assessment and positive action to ensure there is no further decline, but more importantly, positive improvement for the five health goals that the HCSC has set.

IV. RESEARCH AND METHODOLOGY:

The *Healthy Mississauga 2010 Plan* is presented with many unknowns at the start of the Plan. The priority actions that the HCSC has put forth in the 2010 Plan almost all require further investigation to clearly understand what we know today about the issues; what is being done at this time toward solutions, which organization (if any) has the legislated mandate to handle the issue, what is the measurement or target to be achieved, and where best can the collaboration efforts of HCSC organizations be employed.

The Healthy City Stewardship Centre members suggest that the following list represents the key ways they can contribute collaboratively to the Plan's success:

- showing leadership
- sharing similar messages via broad communication avenues
- cutting through red tape between agencies
- providing in-kind resources
- sharing knowledge and best practices
- completing research
- advocating on behalf of the community
- bridging gaps and building capacity
- making connections between parties
- approaching corporations and community leaders to get them involved

Unless one of the HCSC organizations has a clear mandate for one of the stated actions in the *Healthy Mississauga 2010 Plan*, or is an organization that has work in progress toward that action, the 2010 Plan is written on the premise that there are no established resources available. However, considering the key ways that the HCSC members can contribute to bettering health for the people of Mississauga (listed above) there is much that can be achieved. Also, additional funding or resources will likely be forthcoming in the future, but this plan does not assume such an event will occur.

As mentioned above, further investigation, research and data gathering is still needed for many of the actions within the 2010 Plan to be initiated. Setting achievable targets and being aware of the differing needs in various neighbourhoods will be a challenge. The University of Toronto at Mississauga (UTM) has declared a full interest in being the champion of research and measurements of future successes. UTM has already been



involved in the *GET ACTIVE Mississauga Plan* (discussed in more detail in section V.B.i. below) and intends on making research on local health issues a specific UTM focus.

Once the *Healthy Mississauga 2010 Plan* is officially adopted, there will be a yearly review of the progress being made and, if necessary, revisions or renewal of the Plan. An annual public report will be made to Mississauga's City Council (and any and all councils, boards, or directorial committees of the HCSC member organizations at a HCSC member's request).

V. HEALTH PLAN:

The *Healthy Mississauga 2010 Plan* is organized around the five health goals as outlined in section II of this report. It is strategic in nature, as it focuses on the health priorities as determined by the Healthy City Stewardship Centre members. The 2010 Plan is developed as a framework for action. Some priorities of the Plan are already in action but most require more research and/or planning to know how best to proceed on an issue.

This document is written with five cornerstone considerations; the *Healthy Mississauga* 2010 Plan:

- will be the first of many, continuous health plans for Mississauga, which will work toward positively influencing the health of the City,
- will describe actions toward all five HCSC goal statements,
- will not create a barrier, or additional bureaucracy, that impedes each individual HCSC member organization in working toward their own mandates and strategic priorities,
- will ensure that measurement of the anticipated improvements in the health of Mississauga, is consistently and practically completed,
- will make improvements to the health of the people and community of Mississauga by 2010.



A. HEALTH PRIORITIES:

The health challenges on which the *Healthy Mississauga 2010 Plan* focuses, were advanced by the Healthy City Stewardship Centre members, in consultation with the many local health and advocacy agencies that attended the 'Community Discussion on Health', in November 2005 (please refer to Appendix A for the Summary Notes of this event). While it is agreed there is a long list of community health concerns, the following are the <u>priority</u> concerns on which the 2010 Plan will concentrate:

- youth
- sedentary lifestyles
- safety
- older adults
- new immigrants
- effective information sharing

B. SUCCESSES TO DATE:

In the process of formalizing the Healthy City Stewardship Centre and writing the *Healthy Mississauga 2010 Plan*, there have been some notable successes that are worth mentioning. There are literally hundreds of programs, initiatives, grass-roots efforts, research projects, etc. that are happening every day in Mississauga. The two successes listed below help to illustrate what can be achieved when thirteen key city agencies and organizations come together on issues regarding health. These successes give understanding to the model by which the *Healthy Mississauga 2010 Plan* has been structured.

i. **ACTIVE 2010:**

In January, 2005 the provincial Ministry of Health Promotion unveiled the ACTIVE 2010 program which gave seed money to towns and cities to develop their own municipal physical activity plan. In Mississauga, the YMCA took the lead on this initiative and along with 38 other local organizations, developed their *GET ACTIVE Mississauga Plan* that outlines a number of city-wide efforts to help motivate the people of Mississauga to be more physically activity over the next 4-5 years. The YMCA approached the HCSC seeking support in principle for the project which was just getting underway. Not only were the local partners able to write a solid plan but the YMCA was also successful in receiving a provincial grant to put the plan into action. The YMCA contributes much of that success to the HCSC support.

ii. Public Health and Urban Form:

In 2005 the College of Family Physicians issued a report that concluded that living in the 'suburbs' had negative health effects largely due to the dependency



on automobiles in daily life. The lack of walking or physical effort has contributed greatly to obesity and poor health in adults and children alike. Clearly, the city planners and the health experts were equally concerned and wanted to proactively work toward effective solutions. The Office of the Medical Officer of Health has pledged to help and support City efforts to develop communities that are less dependent on personal vehicles and other determinants which affect the health of people in urban settings.

C. HEALTH PLAN PER GOAL STATEMENT:

i. Goal: All people in Mississauga will value and strive for optimal health.

CHALLENGE: To mobilize a city's population to achieve optimal health requires the people to be <u>motivated</u> to do so.

There is often a gap between what a person might understand is necessary to achieve or elevate their personal health, and what they will actually do about it. What are the barriers that people face in trying to achieve optimal personal health and, once these barriers are known, can any be removed or lessened? Whether it is a physical barrier, a social stigma, a personal belief or simply not being concerned – what gets in the way of people bettering their own, or their family's health, is important to understand. Personal motivation to become or remain healthy is a big part of this; if we understand what motivates people to better their health, we will be able to use these lessons to move less-motivated people to take action regarding their health needs. This evidence will help to break the myths regarding healthy lifestyles, and help officials target their efforts appropriately.

The following HCSC ACTION statement should be considered an overriding or umbrella action. The research into 'motivation' is clearly an enormous study topic, however it is fundamental to the goal statement to '...value and strive for optimal health'. Therefore, the *Healthy Mississauga 2010 Plan* describes the initial phase as a research project, and then the research informs the community efforts to mobilize the less motivated residents of the City to strive for healthy, active lives. It is likely that this action will be on-going beyond year 2010.

Key HCSC member organizations would include: UTM, City of Mississauga, school boards, Region of Peel Health, hospitals



a. HCSC ACTION: To understand why some people are motivated to

value and strive for good health, and why others are not. To use this knowledge to mobilize more of the

City's population to achieve better health.

• champion: University of Toronto at Mississauga

target: to conduct research and develop materials and

strategies on various aspects of personal health motivation; to then use this knowledge to motivate more people in Mississauga to strive for optimal health

• timing: on-going to 2010

CHALLENGE: People need to be physically active on a daily basis.

The issue of the sedentary lifestyles, that describe the general lifestyle and activity rates of a majority of residents and business people of Mississauga, is a major concern of health authorities. HCSC members from the Office of the Medical Officer of Health, the Credit Valley Hospital and the Trillium Health Centre strongly support any and all efforts to stem the tide and get more people to embrace a physically active lifestyle.

Scientific research strongly supports the role of physical activity in disease prevention and in the treatment of chronic disabling conditions – especially for cardiovascular disease, cancer, diabetes, osteoporosis, arthritis and obesity¹³. Of particular concern is the rise in youth obesity rates and in the growing older adult demographic in Mississauga.

At the 'Community Discussion on Health' forum, participants cited many examples of urban centres which had successfully increased the levels of daily physical activity such as Auckland, N.Z. and Denmark. Many ideas were set into motion to achieve the positive results these cities, even countries, have realized; in the end it was about a mind-set change among the people – that physical activity is an important pursuit and that individuals (and families) have to assess their own physical health and involve themselves in daily physical activity for themselves. It is interesting to note that secondary positive results cited included the building of stronger family units and a decrease in mental illness such as depression.

¹³ Public Health Agency of Canada





Fortunately, Mississauga has a substantial community effort underway with the development of the 2005 GET ACTIVE Mississauga Plan; the Mississauga YMCA has led this initiative, with the collective efforts of 38 local organizations and agencies, to write the plan. The GET ACTIVE plan discusses numerous endeavours and activities that multiple organizations can collectively, or independently, use to encourage Mississauga residents and employees to become more physically active. As of spring 2006, an ACTIVE 2010 coordinator position has been created by the YMCA to help move the plan into action. Specific endeavours include a City-wide walking campaign, open door days at various public and private facilities, a four times per year 'event' that would expose the people of Mississauga to get more physically active. The GET ACTIVE Mississauga Plan is written with the view that all age groups, physical abilities and diverse communities in the City will be involved in some way by 2010. (please refer to Appendix B for the GET ACTIVE Mississauga Plan)

It is also expected that in the process of implementing the *GET ACTIVE* plan, that there will be an increased knowledge of the total capacity in Mississauga for facilities and open space amenities in which physical fitness and activities can occur. There are hundreds of such amenities (gyms, pools, community rooms, outdoor sports fields, fitness centres, playgrounds, etc.) both privately and publicly owned. The HCSC members believe that there is likely more that could be done to improve the usage of these facilities. This research should also extend to sharing of best practices for optimal facility usage, such as companies who have very successful employee fitness programs, or community groups who are responsive to specific cultural needs and in turn have increased the usage rates of their local facilities.

Key HCSC member organizations would include: City of Mississauga, school boards, UTM, hospitals, Region of Peel Health, Peter Fonseca (Ministry of Health Promotion)

b. HCSC ACTION: To support the ACTIVE 2010 – GET ACTIVE Mississauga Plan.

• champion: Mississauga YMCA (with direct support from the City

of Mississauga)

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• target: to better the 44.3% rate of the Mississauga population

that is physically active, to 55%

• timing: immediate and on-going to 2010



CHALLENGE: An all-encompassing youth strategy is needed for the young people of Mississauga.

It is often stated that kids need to succeed at one thing to become a successful adult. The hurried lifestyles of today are negatively influencing the fundamental principles of a healthy environment and a healthy city. If family units are not strong, they are not able to support their children through their most critical period of emotional development. The media and technology also greatly influence young children and teenagers and contribute to less social interaction. The basic values and morals originate in the home and these core values make for healthier individuals and healthier relationships with others. These issues cross all socio-economic boundaries.

In 2006, the City of Mississauga is embarking on a Youth Strategy which aims to be an umbrella strategy for not only the Corporation of the City of Mississauga, but for all of the many agencies and organizations that come in contact with youth as well. The Community Services Department, City of Mississauga is spear-heading this strategy; initial conversations with other agencies, many of whom are HCSC members, have indicated a strong desire for such a strategy.

There are many excellent programs that exist for all age segments of the youth population and there needs to be knowledge shared about existing programs so as to avoid duplication and overlap. It is also understood that a one-size-fits-all view will not work, so to be effective, programs in one neighbourhood or school will likely need to be tailored to the needs found in another community.

At this time, it is imagined that the Strategy may be phased or multi-pronged, as there are multiple areas of concern and a wide spectrum of need – it is hoped that in some way all segments of the youth population in the City will be represented in some capacity within the Youth Strategy. One of the priorities of the plan will be to focus on youth / communities at risk, with the hope that the strategy will provide children with programs, opportunities and life-skills to move well through their teen years to adulthood.

Key HCSC member organizations would include: City of Mississauga, MYAC, school boards, United Way, hospitals (paediatrics), UTM, Region of Peel Health, Dixie-Bloor Neighbourhood Centre, Peel Regional Police



c. HCSC ACTION: To support the Youth Strategy development and

implementation.

• champion: City of Mississauga (with direct support from the

Mayor's Youth Advisory Committee (MYAC))

target: to provide children and youth the support, programs,

opportunities and life-skills to move well through their

teen years into adulthood

• timing: a) completion and approval of the Youth Strategy by

year-end 2006

b) full implementation of the Youth Strategy by 2010

ii. Goal: All people in Mississauga will feel safe in their communities.

CHALLENGE: People are expressing increased concern about their personal safety.

The Mississauga Crime Prevention Association (MCPA) has rated the City of Mississauga as the safest city in Canada, six years in a row. This is a phenomenal statistic for the sixth largest city in Canada and is a compliment to the local police service and the community at large. The heightened concern of citizens for their personal safety may be due to the perception of an escalation in violent crimes, possibly exacerbated by media coverage.

The focus that the HCSC members feel is important for Mississauga, is to understand better what people are feeling about their safety and, if these feelings are impeding people from living well in their communities, what can be done to reverse this thinking.

On a broad-scale, it is important to research and understand both the nature and the breadth of the possible fears that are being expressed. Are these fears wide-spread or only in certain neighbourhoods? Are they more prevalent with specific age groups? Knowing these specifics will help in the approach taken to counter the identified concerns.

There may be individual examples of people not doing the things they want to do, due to safety fears. For example if a person wants to begin a personal walking program in their neighbourhood, but feels they cannot due to an



unwarranted fear for their safety, there are a number of solutions that exist to address their fears: walking with neighbours, being aware of your surroundings, walking in well-illuminated areas, etc.

Of particular concern to the HCSC members, are safety issues in schools: issues of personal safety, bullying, substance abuse, etc., are being reported by students and teachers alike. These concerns also extend to family units as teachers cite challenges for parents to understand and be involved in their children's lives, as one of the contributing factors.

Key HCSC member organizations would include: Peel Regional Police, City of Mississauga, school boards, UTM, Region of Peel Health

d. HCSC ACTION: To identify the neighbourhoods, community groups

or individuals where concerns regarding safety are preventing people from leading active lives. To implement effective solutions that help alleviate

these concerns.

• champions: all HCSC member organizations

targets: to identify neighbourhoods or individuals and response

to their specific safety concern by implementing an effective solution within an acceptable response time.

• timing: immediate and on-going to 2010

iii. Goal: All people in Mississauga will have equal access to information and services.

CHALLENGE: Mississauga is a city of neighbourhoods representing a wide range of diverse cultures and with many different languages spoken. It is important that all residents receive important health and community information in a timely and understandable manner.

Our health care services do not lack in knowledge, but there is a challenge in getting some of that knowledge out to residents. There have been advances in the way various organizations have addressed this issue: adult learning forums, websites in languages other than English and French, etc.

Considering the large number of languages spoken in Mississauga, some residents do not receive important health information in a timely or understandable fashion.



Health officials and community agencies indicate that there are times when new immigrants will arrive in the community in relatively good health, but their health will deteriorate due to their inability to access the right information.

Making information available to various communities in a way that is understandable and comfortable is essential; different topics must be discussed in ways that are acceptable to a particular group. No matter what method is used to bring information to various communities it is also essential that messages are consistent and memorable. One idea often suggested is to engage the community in the health conversation from ground up – including having local leaders/champions/advocates help to initiate ideas and relate important health information to their own communities. Developing these best practices with the HCSC member organizations will be a focus over the next five years.

Another communication tool that has been discussed for the past few years is the implementation of a 2-1-1 phone service which is a publicly accessible reference line for local social services. At the time of the writing of the *Healthy Mississauga 2010 Plan*, there is renewed discussion about this initiative between the provincial government and United Way. If the 2-1-1 service were to become a reality in the Peel area, the key HCSC member organizations would be at the front-lines in its successful implementation and use by Mississauga residents, businesses and agencies.

Key HCSC member organizations would include: best practices - all HCSC member organizations; 2-1-1 service – United Way, provincial government (Peter Fonseca, MPP) with support from Region of Peel Health, Peel Regional Police, school boards, hospitals, City of Mississauga, Dixie-Bloor Neighbourhood Centre.

e. HCSC ACTION:

To strive for correct, culturally appropriate and timely communication on health information for all communities in Mississauga.

champions:

All HCSC member organizations for best practices and United Way as champion for the future 2-1-1 service implementation.

targets:

- a) to develop best practices for health information communication, in particular targeting new immigrants to Mississauga,
- b) to successfully negotiate for, and then implement, the 2-1-1 social services phone service.



• timing:

- a) best practices: development of best practices by the end of 1st year, May '07, implementation of best practices by 2010,
- b) 2-1-1 service: fully implemented by 2010.

iv. Goal: All people in Mississauga will live in and contribute to a clean and sustainable environment.

CHALLENGE: A city's urban form and environment can positively effect the health of residents.

The location of roads, parks, buildings, institutions, homes and shops cause people to move to destination points via a variety of transportation modes. Mississauga's neighbourhoods have been built with often too great a distance between homes and the services that residents need on a daily basis which, in turn, cause people to use their vehicles for even the shortest trips.

Cities that are declared as 'liveable' or 'healthy' tend to always be linked with great public transit systems. The inordinate amount of vehicle use in Mississauga must be countered in the future plans for the City. It is also important to get people out of their vehicles in order to contribute to a clean and sustainable environment – this will reduce air pollution and decrease traffic and congestion. As a secondary outcome, individual health will likely be improved if people are less dependent on their own vehicles, such as positively influencing respiratory illnesses and relieving stress for those in constant difficult driving conditions.

Working toward an urban form that embraces healthy living is already a priority for both the City of Mississauga and the Peel Region's Office of the Medical Officer of Health (for more information refer to the information above in section V.B.ii. – Public Health and Urban Form). Other HCSC member organizations will also be involved in the planning process, such as UTM and the two school boards. Mississauga still has areas as yet undeveloped, and many more prospects for redevelopment, so there is a real opportunity to move forward in a more 'health conscious' manner, for future urban forms.

On the topic of air pollution, guidelines for 'healthy' development should include building and land forms that help decrease air pollution, other than simply less cars on the road, for example, providing sufficient space for large tree growth which will assist in the removal of air pollutants.



Key HCSC member organizations would include: City of Mississauga, school boards, UTM, Region of Peel Health.

f. HCSC ACTION: To support the 'Public Health and Urban Form' initiative's development and implementation.

• champions: Region of Peel (Office of the Medical Officer of

Health) and the City of Mississauga (Planning and

Building Department)

• target:

a) to develop a planning process by which

Mississauga's urban form is supportive of good

public health,

b) fully implemented as a standard planning process.

timing: a) planning process developed by the end of the 1st

year – May '07,

b) full implementation by 2010

CHALLENGE: Renewable energy sources are becoming increasingly important as fossil fuel supplies decline.

Like any other large urban centre, the City of Mississauga's businesses, institutions and residents have an enormous need for energy. Clearly, alternatives to fossil fuel energy are required not only due to decreases in supply, but also for environmental impact and sustainability. Alternative and renewable energy sources and technologies are being studied and tested throughout the world. In 2004, the University of Toronto at Mississauga formally created the Centre for Emerging Energy Technologies (CEET), in partnership with industry and government, which is involved in research for implementation of technologies such as fuel cells, microturbines and solar energy.

The mandate of CEET, is to provide a cohesive approach to the commercialization of these new products on a national level. CEET will work toward the development, evaluation and testing of new energy technologies – with a future potential for expanding in the area of educational activities including public outreach.

UTM has successfully launched some local campus initiatives to improve campus energy sustainability and positively affect the environmental impact of



the campus growth and development that is occurring at this time. The Centre for Emerging Energy Technologies is also a participant with the Hydrogen Village Partnership whose mandate is to accelerate the commercialization of Canadian hydrogen and fuel cell technology.

The Centre for Emerging Energy Technologies at the UTM campus is new, exciting and very timely. Issues of energy supply, use and environmental impact are of important concern to all members of the community. The members of the Healthy City Stewardship Centre will support the Centre's work and help wherever possible to grow the partnership of agencies and organizations dedicated to new energy technologies.

Key HCSC member organizations would include: all HCSC member organizations as requested

g. HCSC ACTION: To support the UTM's 'Centre for Emerging

Energy Technologies'.

• champion: University of Toronto at Mississauga

target: to improve community access to new and sustainable

energy technologies by means of encouraging partnerships, and coordination with City and Region

initiatives.

• timing: immediate and on-going to 2010

v. Goal: All people in Mississauga will feel part of a larger community and will know that they will be cared for in times of need.

CHALLENGE: New immigrants who make Mississauga their home, often require additional support to connect with the health system and to their local communities.

Mississauga has some developing social issues that are of real concern. For example, poverty and homelessness are on the rise and more seniors are isolated in their homes. There are significant numbers of new immigrants making their homes in Mississauga and while this brings vibrancy, manpower and a world-view to the local communities, it also often brings new challenges



and hardship for the families and the services, agencies and educational institutions that are directly involved.

It is important to prepare immigrants for entry into this country. Children of immigrants who can barely speak English are entering the school system and this is placing an additional burden on teachers and students. There is a need for more preparation in all respects of immigration. School boards already offer programs such as English as a Second Language and reception centres, and the Region of Peel have collected important data on the newcomers to the City.

The HCSC member organizations believe that there is more that can be done for new immigrants as they arrive in Mississauga. New immigrants of all ages need to receive essential services and be embraced by their communities. Understanding what programs are in place, and where the gaps are, will help integrate services, programs and resources better. New resources to fill these gaps are needed. At this time there is a discrepancy between what different provinces receive from the federal government to cover costs of a new immigrant; provincial ministries are working toward a fairer equalization of resources and funding at this time. Important in all of this is making the system understandable – more integration of various agencies work, mandate and resources would go a long way to helping a newcomer adjust.

Key HCSC member organizations would include: Peter Fonseca, MPP (Ministry of Health Promotion, Ministry of Citizenship and Immigration), United Way, Region of Peel Health, UTM, City of Mississauga

h. HCSC ACTION: To investigate the health and community needs of

new immigrants to help their transition into the community of Mississauga, and implement effective

solutions to manage their needs.

• champions: all HCSC member organizations

• target: to investigate gaps in services for new immigrants, to

lobby for increased resources, and to implement

effective solutions to manage their needs

• timing: immediate and on-going to 2010

19



CHALLENGE: An increase in Mississauga's volunteer capacity is needed.

There are some very innovative volunteer initiatives in existence, including those within the private sector. For instance, Hewlett Packard require that their employees contribute one hour of their time per week to a community organization. The Mississauga community has wonderful examples of individual, group and corporate volunteer efforts. The forty hours of volunteer work that high school students must perform to graduate, has become a major component of volunteer initiatives.

The HCSC member organizations are interested in knowing more of the City's volunteer success stories, especially in the business world where a return on investment has been realized through volunteer efforts. Success stories will be shared with the hope of creating synergy around building commitment to initiate or expand like efforts. Hopefully this will inspire more businesses and agencies to embed volunteerism into their organizations' goals.

i. HCSC ACTION: To research existing volunteer programs, especially

in Mississauga's private sector, and create a forum

by which success stories are shared.

champion: all HCSC member organizations

target: to hold a forum on volunteer capacity with local private

and public organizations, and then communicate examples and success stories to a wider local audience.

■ timing: end of first year – May '07

VI. SUMMARY:

The *Healthy Mississauga 2010 Plan* is presented as a five year strategy to better the health of the people and the community of Mississauga. It is an attempt at having a network of key decision-making agencies and organizations, work on a number of initiatives that they agree are of priority importance. The nine stated HCSC ACTIONS outlined below are not presented in priority order. They are simply placed within the most appropriate HCSC goal statement. For some of the actions listed below work has already begun, but for most there is still research and appropriate targets to be identified before the work can be initiated. The nine HCSC ACTIONS are:



i. Goal: All people in Mississauga will value and strive for optimal health.

a. HCSC ACTION: To understand why some people are motivated to

value and strive for good health, and why others are not. To use this knowledge to mobilize more of the

City's population to achieve better health.

• champion: University of Toronto at Mississauga

target: to conduct research and develop materials and

strategies on various aspects of personal health motivation; to then use this knowledge to motivate more people in Mississauga to strive for optimal health

• timing: on-going to 2010

b. HCSC ACTION: To support the ACTIVE 2010 - GET ACTIVE

Mississauga Plan.

• champion: Mississauga YMCA (with direct support from the City

of Mississauga)

• target: to better the 44.3% rate of the Mississauga population

that is physically active, to 55%

• timing: immediate and on-going to 2010

c. HCSC ACTION: To support the Youth Strategy development and

implementation.

• champion: City of Mississauga (with direct support from the

Mayor's Youth Advisory Committee (MYAC))

• target: to provide children and youth the support, programs,

opportunities and life-skills to move well through their

teen years into adulthood

• timing: a) completion and approval of the Youth Strategy by

year-end 2006

b) full implementation of the Youth Strategy by 2010



ii. Goal: All people in Mississauga will feel safe in their communities.

d. HCSC ACTION: To identify the neighbourhoods, community groups

or individuals where concerns regarding safety are preventing people from leading active lives. To implement effective solutions that help alleviate

these concerns.

• champions: all HCSC member organizations

targets: to identify neighbourhoods or individuals and response

to their specific safety concern by implementing an effective solution within an acceptable response time.

• timing: immediate and on-going to 2010

iii. Goal: All people in Mississauga will have equal access to information and services.

e. HCSC ACTION: To strive for correct, culturally appropriate and

timely communication on health information for all

communities in Mississauga.

• champions: All HCSC member organizations for best practices

and United Way as champion for the future 2-1-1

service implementation.

targets:a) to develop best practices for health information

communication, in particular targeting new

immigrants to Mississauga,

b) to successfully negotiate for, and then implement,

the 2-1-1 social services phone service.

timing: a) best practices: development – end of 1st year, May

'07, implementation by 2010,

b) 2-1-1 service: fully implemented by 2010.



iv. Goal: All people in Mississauga will live in and contribute to a clean and sustainable environment.

f. HCSC ACTION: To support the 'Public Health and Urban Form'

initiative's development and implementation.

• champions: Region of Peel (Office of the Medical Officer of

Health) and the City of Mississauga (Planning and

Building Department)

target:
 a) to develop a planning process by which

Mississauga's urban form is supportive of good

public health,

b) fully implemented as a standard planning process.

• timing: a) best practices: development of best practices by the

end of 1st year, May '07, implementation of best

practices by 2010,

c) 2-1-1 service: fully implemented by 2010.

g. HCSC ACTION: To support the UTM's 'Centre for Emerging

Energy Technologies'.

champion: University of Toronto at Mississauga

target: to improve community access to new and sustainable

energy technologies by means of encouraging partnerships, and coordination with City and Region

initiatives.

• timing: immediate and on-going to 2010

v. Goal: All people in Mississauga will feel part of a larger community and will know that they will be cared for in times of need.

h. HCSC ACTION: To investigate the health and community needs of

new immigrants to help their transition into the community of Mississauga, and implement effective

solutions to manage their needs.

• champions: all HCSC member organizations



target: to investigate gaps in services for new immigrants, to

lobby for increased resources, and to implement

effective solutions to manage their needs

• timing: immediate and on-going to 2010

i. HCSC ACTION: To research existing volunteer programs, especially

in Mississauga's private sector, and create a forum

by which success stories are shared.

• champion: all HCSC member organizations

target: to hold a forum on volunteer capacity with local private

and public organizations, and then communicate examples and success stories to a wider local audience.

■ timing: end of first year – May '07

The Healthy City Stewardship Centre member organizations believe that working together on these priority health actions will generate the best results. It is hoped that the collaborative efforts toward the HCSC goals will galvanize the public, governments, agencies and businesses to get involved to achieve optimum success.



HEALTHY MISSISSAUGA 2010 PLAN APPENDICES





Community Discussion on Health

UTM Campus - November 12, 2005

EVENT SYNOPSIS

The Healthy City Stewardship Centre (HCSC) held a one-day forum with representatives who are working toward the betterment of health in the community. The event was held at the University of Toronto at Mississauga (UTM) campus and was the first public meeting the Stewardship Centre had organized to date. The objectives for the day were to:

- introduce the HCSC to the public,
- get feedback on the concept, vision and goals of the HCSC,
- develop an understanding of the local community's views, objectives and on-going work on local health issues,
- develop a list of the priority health issues for the five HCSC goals, including potential areas of needed research.

Invitations were sent out to approximately 50 community groups. Representatives from the participating groups were challenged to bring a young member of their organization and/or local neighbourhood to the forum to gain a youth perspective in the discussions. The faculty and students from the UTM campus were also well represented. In total, 80 participants attended the day.

The event was opened by welcoming words from Mayor McCallion and Michael Bator. The President of the University of Toronto, Dr. David Naylor, was the morning's keynote speaker. Many audience members indicated that Dr. Naylor's address was a wonderful start to the day's discussions. The keynote speaker for the afternoon was Peter Fonseca, MPP Mississauga East and Parliamentary Assistant to the Minister of Health Promotion. Mr. Fonseca outlined some of the key issues and priorities of the newly created Ministry of Health Promotion over the next few years. Many of the issues presented were echoed by the participants during the break-out sessions throughout the day.

At the break-out sessions, participants were divided into groups organized around each of the five goal statements of the Health City Stewardship Centre. The size of the groups ranged from 6-19 participants and the sessions were run by volunteer facilitators arranged through the United Way of Peel Region.

1

FINDINGS

(Note: A detailed compendium of all of the comments made in each break-out session is also available.)

To begin the discussion, participants were asked their opinion on the concept, vision and goals of the Healthy City Stewardship Centre. The general consensus was that the HCSC was needed and timely, however, many participants made the point that the work of the HCSC is also very complex. There was a collective agreement that the five goals hit the mark. The idea that the HCSC should not become another bureaucracy was applauded, however some voiced the opinion that there would have to be a basic organizational structure established for the HCSC to really achieve its vision and goals.

The discussion groups than focussed in on the five goals – one for each of the five break-out sessions. Below are the top priorities / issues that the participants concluded upon:

GOALS: All people in Mississauga will value and strive for optimal health.

- get people more active (the use of incentives should be explored),
- make people aware of the HCSC (a full-time coordinator position should be established),
- advocate to other levels of government and agencies for resources (research and apply for funding),
- set achievable targets and be aware of the differing needs in various neighbourhoods.

All people in Mississauga will feel safe in their communities.

- personal safety / crime (violent, unreported, gangs),
- traffic safety (driving behaviours, drunkenness, bicycle safety),
- health (smoking, sexual health (safety aspect)).

All people in Mississauga will have equal access to information and services.

- information must be given to various communities in a way that is understandable and comfortable to the audience.
- engage the community in the conversation from ground up, including having local leaders/champions/advocates to help initiate ideas, relate important health information, etc.,
- align the messages that the community hears (make the messages the same and memorable).

2

All people in Mississauga will live in and contribute to a clean and sustainable environment.

- clean air, clean water and clean land (ensure the focus is specific),
- the HCSC should have a member organization representing the environment,
- pilot projects should be started and then expanded across the municipality,
- the benefits of a healthy environment must be taught (such as economic benefits through energy conservation, etc.).

All people in Mississauga will feel part of a larger community and will know that they will be cared for in times of need.

- the nurturing of our youth is needed to develop healthy ideas that will carry through to adulthood,
- services and information for newcomers to Mississauga must be better (timely, understandable, friendly).

CONCLUSION

The clear message that come out in the Community Discussion on Health, was that in going forward with initiatives to the people of Mississauga, the HCSC must strive to approach the different communities in a way that is both appealing and comfortable for that particular segment of the population. There was often the comment that the information is not the issue, it is the communication process that is more important.

Overall, there was positive feedback from many who attended. Participants found the discussion worthwhile and enjoyed spending time networking with their colleagues and visiting the beautiful UTM campus. A majority of the participants suggested that they would like to continue with an annual 'Community Discussion on Health' and were looking forward to reading the *Healthy Mississauga 2010 Plan* when it is available.

Special thanks is extended to the corporate sponsors and staff who contributed greatly to the success of the Community Discussion on Health, including:

- COMPASS Group / Chartwells
- Western GTA Convergence Centre
- University of Toronto at Mississauga
- United Way of Peel Region and volunteer facilitators
- City of Mississauga
- Office of Peter Fonseca, MPP Mississauga East



MISSISSAUGA COMMUNITY ACTION PLAN 2005 – 2010

GET ACTIVE MISSISSAUGA!





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PROJECT OVERVIEW

In early 2005, the YMCA convened people and organizations in 16 communities throughout Ontario who share a passion for healthy, active living and a sense of urgency related to current levels of physical inactivity. Their common mission: To get people moving and living healthier lives. Their common task: To exchange information, experience and insight toward the creation of a plan of action.

Across the province, more than 250 concerned citizens, educators, and representatives of government, public health, the media, business, and organizations large and small, came together to take stock of their resources and to determine what steps they might take together.

Conversations percolated for several months in Barrie, Brampton, Brighton, Cambridge, Chatham-Kent, Fort Erie, Kingston, Lake Country, **Mississauga**, North Simcoe, Port Hope/Cobourg, Port Perry/Whitby, Sarnia, Sault Ste. Marie, South Georgian Bay, and Sudbury. Each conversation reflected the unique character, conditions and circumstances of these communities. Each plan now provides insight into common and particular challenges or opportunities. Even more importantly, each plan is a map of ideas, partnerships and programs leading to different health outcomes for specific groups of people.

The YMCA facilitated the development of the roundtables in the same spirit as it has supported the holistic development of individuals for more than 150 years. Its focus was on welcoming and including diverse voices, emphasizing strengths or assets over deficiencies, and taking a practical, "people-centred" approach to distinguish this work from other related planning processes.

This project will be evaluated in the Fall of 2005. Learnings will be shared widely to strengthen our collective capacity to learn and lead in ways that improve the quality of life for all Ontarians.



THE MISSISSAUGA COMMUNITY ROUNDTABLE PROCESS



From January 2005 through August 2005, a group of representatives from a wide range of sectors met, researched, discussed, developed and created the Mississauga Community Action Plan. Roundtable members that represented a wide variety of sectors were invited including: health and wellness, community recreation, education and school boards, children and youth, seniors, families, municipalities, libraries, people with physical and/or developmental disabilities, police services, faith communities,

new comers to Canada, ethnically diverse communities, visible minorities, and multicultural services, media and the private sector.

Step One: Strengths Based Planning

From the onset of the process RT members focused on using a *strengths-based* planning approach. Enabling RT members to consider and build upon the strengths and successes of the Mississauga community. This included an informal survey of physical activity options currently available across the city. The resulting inventory, created from members own knowledge, demonstrated the amount and variety of options available across Mississauga.

Step Two: Environmental Scan

RT members studied the issue through reviewing existing research on health and physical activity. Reports confirmed the most effective interventions are community-wide campaigns; point-of-decision prompts and school based physical education. Members learned from one another by sharing their own knowledge and looked at current and projected demographics for Mississauga noting a stabilizing of growth for Mississauga and a shift to a more *seniors* based population.

Step Three: Establishing Priorities

RT members identified barriers to activity and discussed target populations. A key priority for the members was to ensure ALL members of the Mississauga community have access to and become more active. This decision was supported by the participation of the University of Toronto Mississauga (UTM), who has offered research services and support. UTM will gather data which will provide findings and information on participation and non participation.



Step Four: Vision and Goals

The vision for 2010 was crafted and the goals for the Mississauga Action Plan set. RT members confirmed the task of developing a community action plan that would meet the provincial goal set under ACTIVE 2010 to increase **Mississauga's physical activity rate to 55%, by 2010, up by 10.7% from 44.3% to 55%.**

Step Five: Strategies, Action Initiative and Crafting the Plan

Four strategies for success were developed as over riding principals in which to develop initiatives for action. RT members of the Roundtable selected walking as one of the most accessible physical activities, and this become the focus for the plan. RT members also want to see effective key interventions to physical activity as part of future action initiatives including – community-wide campaigns; point-of-decision prompts, and school based PE.

Step Six: Build Community Support

Wider-community support for the plan has been garnered through presentations to and discussion with the Healthy City Stewardship Centre and Mayor Hazel McCallion.



PART ONE: GET ACTIVE MISSISSAUGA!

A PLAN FOR ACTION

The goal for the action plan is to create a community development tool that brings community stakeholders together in working towards a more active Mississauga. The focus is physical activity. Enabling and supporting everyone in Mississauga to be more active everyday so they will receive and enjoy the benefits of an active healthy lifestyle. To help reach this goal, the RT members created the following vision and goals for 2010, and identified the strategies and action initiatives to reach the vision and goals.

VISION & GOALS

All Mississauga's communities and neighbourhoods embrace and celebrate active healthy living.

- Mississauga's physical activity rates have increased by 10% reaching the provincial goal of 55% activity.
- Members of the Mississauga community are incorporating physical activity into their everyday lives.



STRATEGIES FOR SUCCESS

Overriding Strategies

- Ongoing seasonal events and action initiatives for the long-term
- Measuring and evaluating success

Program Strategies

- Building on our strengths
- Partnerships

Social Marketing & Communication Strategies

- Awareness and education
- Communication and promotion

ACTION INITIATIVES

- City-Wide Walking Challenge
- Open Doors
- Communication strategy to build awareness and educate
- Bring-a-friend campaigns
- Point-of-decision prompts



IMPLEMENTATION OF THIS PLAN

The action plan will be successful as it allows for all community based stakeholders in Mississauga to find a way to take on the challenge, to participate in and work towards the common vision and goals. This process is starting with the RT members who have made a commitment to continue to collaborate and partner to ensure success and a more active Mississauga community.

As the plan is promoted and launched in the fall 2005 RT members will reach out across the community to invite, engage and involve the wider community. Already the work of implementing *action initiatives* has begun. A group of RT members has begun the planning and development of the first *Walking Challenge* set to start this fall.

Commitment to Partnership

RT members are committed to supporting and achieving the vision and goals laid out in this Mississauga Community Action Plan 2010. They will do this by:

- Developing and implementing new initiatives to achieve the goals and vision
- Sharing and promoting initiatives of other organizations to achieve the goals and vision
- Promoting and increasing participation in current programs and services
- Partnering with others
- Ongoing communication with partner organizations
- Ongoing promotion of the action plan and solicitation of other organizations to engage in the process towards achieving the 2010 vision and goals

Network & Next Step Strategy Group

Reflecting the commitment of RT members to the sustainability of the plan they have developed a *Network and Next Steps Strategy Group*. This group will meet on a quarterly basis and will focus on:

- Action initiative planning and implementation
- Scheduling and planning events
- Partnering and partnerships
- Resource coordination
- Accomplishments and report backs

The community action plan, its vision and goals belong, in a sense, to the greater community. No one organization or agency has solitary ownership of or responsibility for the plan. Its success will come through continued efforts to work together, collaborate and combine efforts and resources.



STRATEGIES FOR SUCCESS

In developing the plan, RT members highlighted six key strategies that will provide a framework in which to develop action initiatives that will increase activity rates among Mississauga residents. These strategies are important parts of the process in creating a greater-community environment that supports everyone's participation in physical activity.

Overriding strategies

- Ongoing Seasonal Events & Action Initiatives for the long-term
- Measuring & Evaluating Success

Program Strategies

- Building on our Strengths
- Partnerships

Social Marketing & Communication Strategies

- Awareness & Education
- Communication & Promotion

Two overriding strategies will drive the action plan: Ongoing seasonal events and action initiatives, and measuring and evaluating success.

The RT members have made a commitment to take this plan beyond the 2005 – 2010 timeframe and embed its vision and goals into the greater Mississauga community. Action initiatives will not stop after 2010, they will continue on: seasonally, annually and into the future. The goal is to create the *mind-shift* and provide an environment that demonstrates leadership through its commitment to healthy living.

The involvement and support of the research department at the University of Toronto at Mississauga will enable action initiatives to be carefully measured and evaluated. This research support will provide *action initiative project committees* with the information they need to identify effective action initiatives towards achieving the vision and goals.

The remaining strategies fall into two distinct categories **Program Strategy** – new or adapted programs that are introduced in the community to increase levels of physical activity, or **Social Marketing & Communication Strategies Strategy** – promotional information and media campaigns to encourage physical activity.



The focus of the RT members was to look at immediate action items that will increase physical activity rates across the Mississauga community. **Policy and infrastructure strategies** where discussed and identified as key long-term components in moving towards a more active community. As the plan progress and action initiatives are implemented the more long-term work of reviewing infrastructure and policy strategies will begin. This work will be well supported by the resources in Mississauga such as the Healthy City Stewardship Centre and Mississauga Recreation and Parks who are already discussing issues of policy and infrastructure.



STRATEGIES FOR SUCCESS			
KEY SUCCESS STRATEGY	DESCRIPTION		
Seasonal Events & Action Initiatives for the Long Term	The RT members have made a commitment to take this plan beyond the 2005 – 2010 timeframe and embed its vision and goals into the greater Mississauga community. Action initiatives will not stop after 2010 they will continue on: seasonally, annually and into the future. The goal is to create the <i>mind-shift</i> and provide an environment that demonstrates leadership through its commitment to healthy living.		
Measuring & Evaluating Success	The involvement and support of the research department at the UTM will enable action initiatives to be carefully measured and evaluated. This research support will provide action initiative project committees with the information they need to identify effective action initiatives towards achieving the vision and goals. As research is shared project committees will know which initiatives they may need to adapt or amend to increase participation and success. They will also be able to identify communities with low participation rates. This will enable project committees to create future action initiatives specific to the needs of any target populations or groups that will benefit from more directed action initiatives.		
Building on our Strengths	There already exist many successful programs and services as well as service providers within the community that are doing an excellent job in supporting healthy active living. A key strategy for the plan is to build capacity where Mississauga's capabilities and success already exist. As the greater-community comes together in the manor of collaboration it will be more possible to identify, support and expand success. This strategy will have a two fold effect: Program and service providers will learn from one another and share resources and skills that will increase capacities across Mississauga and; participation rates in current programs and service will increase.		



STRATEGIES FOR SUCCESS				
KEY SUCCESS STRATEGY	DESCRIPTION			
Partnerships	Partnering across the community is an important strategy to ensure the success of the plan and achieving its vision and goals. Through working in collaboration and combining our efforts, resources and skills it will be possible to extend the reach of the plan and the action initiatives and do more for everyone across Mississauga.			
Awareness & Education	Awareness and education are important parts of the process to support an increase in physical activity. Awareness around the issue must be generated before the education and change management process can take place. First it is necessary to draw people's attention to the issue; this is followed by an explanation of what physical activity is and why it is so important; and lastly by demonstrating accessible opportunities and how it can be incorporated into daily life.			
Communication	A long-term communication strategy will be effective in positioning the plan, building support and increasing participation at all levels for the long-term. Communication efforts need to be coordinated across the greater-community ensuring consistency of message and action. It is important that all messaging is multi-lingual and sensitive to the many individual communities (age, sex, faith, ability, and socio-economics) across Mississauga.			



MISSISSAUGA ACTION INITIATIVES

Increasing participation in physical activity by all members of the community will be achieved through working together towards achieving the vision and goals set out in the plan for Mississauga. The following action initiatives are just a start of what can be done to support community members to be more physically active and receive the health benefits of an active life.

Annual/Seasonal Action Initiatives launching Year One:

- City-Wide Walking Campaign & Challenge
- Open Door Days
- Communication and promotion

Annual/Seasonal Action Initiatives launching year two:

- Bring-a-friend campaign
- Point-of-decision prompts

Although some action initiatives and events may be listed as one time annual events it is important to note that they can be seasonal events and adapted or altered for seasonal implementation.



	ACTION INITIATIVES				
KEY SUCCESS STRATEGY DESCRIPTION					
CITY	-WIDE WALKING CAMPAIGN & CHALLENGE				
Goals	 Kick-off for plan, first public acknowledgment Develop community awareness to the issue Involve all members of the community in an annual walking event and challenge towards 10,000 steps a day Build momentum and participation on an annual basis Demonstrate leadership through participation by wide-variety of community leaders Residents know more about trails and parks across the city 				
Duration	Encourage walking as a daily activity Year one of the walking campaign and challenge will launch fall 2005. The campaign will continue on an annual basis and become part of the annual events for Mississauga				
Target Audience	All members of the Mississauga community (age, sex, faith, ability, and socio-economics)				
Current Project Committee					
Approach	 Launch initiative with a series of local community walking events on the 10th day of the 10th month promoting 10,000 steps per day for 2010 Obtain sponsors Thanks Giving-walk with family and friends Highlight the issue and start the process of learning and change Initiate pedometer challenges between local environments Media coverage of ongoing challenge results Involve media from all communities and generate human interest and success stories E Portal to log steps and monitor progress Link to other walking (and physical activity) opportunities Link event to existing Ministry campaign baseline data 				
Evaluation/Successes	Annual participation will be measured by UTM. Year one will provide baseline data				



	ACTION INITIATIVES			
KEY SUCCESS STRATEGY	DESCRIPTION			
	OPEN DOORS			
Goal	 Open the doors of facilities and fitness centres (providing activity based services and programs) across Mississauga allowing the general public to try something new for free Develop community awareness to the issue Build momentum and participation by members of the community on an annual or bi annual basis 			
Duration	On going on an annual /bi annual basis following initial launch			
Target Audience	All members of the Mississauga community (age, sex, faith, ability, and socio-economics)			
Current Project Committee	 City of Mississauga Erinoak Mississauga Sports Council Mississauga YMCA Region of Peel Health Department, Public Health This Mississauga News Additional community stakeholders that join the process 			
Approach	 Welcome and encourage as many service providers as possible to open doors and participate Partner with community groups to host "try it" sessions Promote event through media and participating service providers All events are free to support breaking down the barriers to participation Volunteer participation Cultural needs considered and supported 			
Evaluation/Successes	Participating facilities and centers will gather participation data and collect feedback from participants			



	ACTION INITIATIVES				
KEY SUCCESS STRATEGY DESCRIPTION					
	COMMUNICATION STRATEGY				
Goals	 Develop a central point for information access SECTOR Strategy Strategy to build understanding, involvement and support for the Community Action Plan POPULATION Strategy Strategy to build overall understanding of the issue and support increase activity levels for members of the Mississauga community 				
Duration	Planning and development cycle for this initiative will start in year-one with launch of the initiative in year-two.				
Target Audience	All members of the Mississauga community (age, sex, faith, ability, and socio-economics).				
Key Partners	All Roundtable members and community-wide supporters of the plan				
Approach	 RT member organizations have plan of website with point of contact Top five Mississauga website host plan and action initiative information Consistent logo use SECTOR Strategy Through RT members, share plan with all possible community stakeholders building support and participation Enlist support of community leaders POPULATION Strategy Identify lead partners to plan, develop and manage the process Using existing resources and tools etc Long-term plan that looks beyond 2010 Consistent messaging and actions Involve media from all sectors (mainstream, cultural, ethnic, college etc) Builds awareness, teaches how, supports change, encourages long-term maintenance Success stories that motivate to participate Appropriate for all individual communities Multi-lingual 				
Evaluation/Successes	Long-term increased participation rates and decrease negative health stats				



	ACTION INITIATIVES				
KEY SUCCESS STRATEGY DESCRIPTION					
	BRING-A-FRIEND CAMPAIGN				
Goals	 Annual or bi annual week long campaign where active members of the community can bring a friend to join them for free Currently inactive community members feel welcomed and encouraged to participate 				
Duration	On going on an annual /bi annual basis following initial launch				
Target Audience	All members of the Mississauga community (age, sex, faith, ability, and socio-economics)				
Key Partners	TBC as planning and development of the initiative are started in year- one				
Approach	 Participation by a variety of recreational service providers such as; belly dancing, soccer, cricket, golf, curling, skating, gymnastics, lacrosse, yoga, walking, biking, swimming, basketball, etc. Seasonal Week long-events are coordinated across the city Promotion is created through media and participating service providers Break down the barriers for fear etc Volunteer participation Link into annual walking events 				
Evaluation/Successes	 Annual increase in participation by recreation program providers Annual increase in participation by members of the Mississauga community 				



ACTION INITIATIVES				
KEY SUCCESS STRATEGY	DESCRIPTION			
	POINT-OF-DECISION PROMPTS			
Posting of prompt signs to remind community members to participate in an opportunity to be more active. For example signs can be placed by elevators and escalators to remind people to use the stairs and signs can be place in public transit to suggest people get off the bus one stop early and walk the final stop to their destination				
Duration	On going on an annual /bi annual basis following initial launch			
Target Audience	All members of the Mississauga community (age, sex, faith, ability, and socio-economics)			
Key Partners	TBC as planning and development of the initiative are started in year- one			
Approach	 Placed in general public spaces as well as places of work, schools, etc. Culturally sensitive and appropriate messaging Multi-lingual Alternative messaging format (Braille, accessible web and audio messaging etc) Consistent use of logo 			
Evaluation/Successes	Difficult to monitor and evaluate success. Can measure through on site observations and counting system			



	SAMPLE FIVE YEAR CALENDAR						
	2005	2006	2007	2008	2009	2010	>>>
Winter		Initiate point of decision prompts Initiate open doors A day in winter Winter active Walk the mall challenge	Winter point of decision prompts Winter open doors A day in winter Winter active Walk the mall challenge	Winter point of decision prompts Winter open doors A day in winter Winter active Walk the mall challenge	Winter point of decision prompts Winter open doors A day in winter Winter active Walk the mall challenge	Winter point of decision prompts Winter open doors A day in winter Winter active Walk the mall challenge	Winter point of decision prompts Winter open doors A day in winter Winter active Walk the mall challenge
Spring		Initiate spring bring a friend campaign Walk the valleys and greenbelts Earth week links Link w" Mississauga Marathon	Spring bring a friend campaign Walk the valleys and greenbelts Earth week links Link w" Mississauga Marathon	Bring a friend campaign Walk the valleys and greenbelts Earth week links Link w" Mississauga Marathon	Bring a friend campaign Walk the valleys and greenbelts Earth week links Link w" Mississauga Marathon	Bring a friend campaign Walk the valleys and greenbelts Earth week links Link w" Mississauga Marathon	Bring a friend campaign Walk the valleys and greenbelts Earth week links Link w" Mississauga Marathon
Summer	Community Action Plan Complete Launch/walking committee established	Summer point of decision prompts Summer camp Fit Kit Walk the waterfront Summer active Swimming safety	Summer point of decision prompts Summer camp Fit Kit Walk the waterfront Summer active Swimming safety UTM new athletic wellness centre	Summer point of decision prompts Summer camp Fit Kit Walk the waterfront Summer active Swimming safety	Summer point of decision prompts Summer camp Fit Kit Walk the waterfront Summer active Swimming safety	Summer point of decision prompts Summer camp Fit Kit Walk the waterfront Summer active Swimming safety	Summer point of decision prompts Summer camp Fit Kit Walk the waterfront Summer active Swimming safety
Fall	Walking campaign & challenge kick off event E portal Complete communication strategy	Anniversary walk event (walk a park) Pedestrian only road e portal continues Fall open doors Fall bring a friend	Anniversary walk event (walk your community) Pedestrian only road e portal continues Fall open doors Fall bring a friend Passport to parks	Anniversary walk event (walk the waterfront) Pedestrian only road e portal continues Fall open doors Fall bring a friend Scavenger hunt	Anniversary walk event (walk the valley lands) Pedestrian only road e portal continues Fall open doors Fall bring a friend	Anniversary walk event (walk Mississauga) Pedestrian only road e portal continues Fall open doors Fall bring a friend	Anniversary walk event (walk a park) Pedestrian only road e portal continues Fall open doors Fall bring a friend



Measurement Tools

Formal measures of success will be found in existing measurements tools and information. Federal, provincial and regional data will identify increases in activity as well as decreases in obesity (Canadian Fitness and Lifestyle Research Institute, Health Canada, Ontario Ministry of Health Promotion, Stats Canada). Mississauga Recreation and Parks measure physical activity rates for Mississauga and the Peel Health Unit measures weight and obesity. The YMCA also measures participant and membership rates which will also be useful in measuring local activity rates.

As members of the Community Roundtable and as part of their commitment to partnership UTM will measure the effectiveness of the walking campaign and challenge initiatives. This support will provide evaluation and success data that will enable modification of initiatives to ensure all members of the diverse Mississauga community are engaged and participating.

Success of the action plan as a community development tool can be measured by the number of organizations and agencies that report they use the action plan as a planning tool within their organization.



PART TWO: ENVIRONMENTAL SCAN

Mississauga - A Dynamic Community

Mississauga is a successful and dynamic city. Formed in 1974, Mississauga is the 6th largest city in Canada with a population of close to 700,000. People from all parts of the world have chosen to make Mississauga their home. Over 18,000 businesses also make Mississauga their home. Fifty of Canada's Fortune 500 are companies located in Mississauga enabling residents to work close to home.

The community of Mississauga is committed to supporting the on going vitality, health and wealth of the city and its residents. Participation in the Community Roundtable process and the development of the community action plan is a good example of how the Mississauga community works together towards a healthy future for all. From the initial meeting and through out this planning process there has been representation for Mississauga's many populations: male, female, children, youth, adults and seniors, culturally diverse and ethnic minorities, newcomers to Canada, and people with disabilities.

Mississauga is also fortunate to have the Mississauga Healthy City Stewardship (HCSC) aimed at creating a health development plan for the City of Mississauga.

It is the strength of the community of Mississauga to work together in partnership that will ensure the success of the city, its people and the community action plan.

A Demographic Overview

Mississauga's population growth has started to steady and the biggest influence on the community in the coming years will be an aging population. Currently over 23% of the population are 45 to 64 years of age and over 33% are 25 to 44 years of age. Over the next 10 to 20 years Mississauga's senior's population will significantly increase.

Over 46% of Mississauga's population are newcomers with the current top three countries for immigration being India (11+%), Poland (8.5+%), Philippines (6.5%). Total population of visible minorities is over 40% with the top 3 groups being South Asian (almost 15%), Black (6.+%) and Chinese (almost 6%). Almost 55% of the population has English as a mother tongue. Close to 42% of the population's mother tongue is an unofficial language with the top five being Polish, Chinese, Punjabi, Portuguese and Italian.



The unemployment rate in Mississauga is around 5.3%. Over 71% or dwellings are owned. 4.9% of the population lives alone, but almost 17% of seniors live alone. The average family income is just over \$80,000. Eleven percent of families are 'low income' families.

Mississauga's Physical Activity Rates

The Ontario Ministry of Tourism and Recreation states Ontario's physical activity rates as 48%. This low level of activity is creating concern for the short and long-term health of all Ontarians. The ACTIVE 2010 strategy calls for a provincial increase of 7% in physical activity bringing the provincial average up to 55% by 2010.

Based on the same research Mississauga's <u>inactivity</u> rates are recorded at 55.7%. **Only 44.3% of the population is physically active enough**. This statistic indicates that Mississauga is below the Provincial average with regards to self reported physical activity levels. We need also to look at other health indicators such as body weight and obesity. Mississauga's obesity rates are recorded at 13.8% and 33.2% are recorded as being overweight. The total overweight and obese population for Mississauga is 47%.

Community	% Physically INACTIVE	% Overweight (BMI 25 - 29.9%)	% Obese (BMI 30+)	Total % Obese & Overweight
Mississauga	55.7 (44.3 active)	33.2	13.8	47.0

This information provided by Stats. Canada.

Peel Region Health Unit statistics have identified the differing rates between our male and female members of the community and suggest that 46.6% of men are physically active and but only 44.3% percent of women.

The good news is that research conducted by Region of Peel Healthy Hearth Network suggests that 78% of the community is interested in maintaining a healthy weight and 76% are interested in improving eating habits.

The outcome for this community development plan is to help our community realize the importance of a physically active lifestyle and support them to include activity on a daily basis. The success of this plan will be demonstrated through an increase in activity that is recorded in these above measures in future reports.

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Student Youth Survey

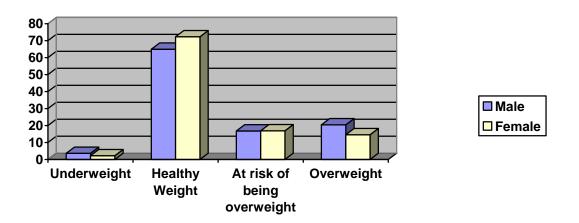
Physical activity rates among Peel's children and youth are declining and the rates of obesity are on the increase. The Peel Health Unit has just released a new report Student Health 2005: Gauging the Health of Peel's Youth. This report clearly highlights the situation for Peel's youth.

STUDENT MEASURES (activity/inactivity)	RESULT
· • • • • • • • • • • • • • • • • • • •	
Exercise vigorously outside of school everyday of the week.	18% fewer than one in five.
Do not exercise vigorously on any day of the week.	11% one in ten.
Females who exercise vigorously outside of school everyday of the	11%
week.	
Males who exercise vigorously outside of school everyday of the	26%
week.	
Females who exercise everyday during physical activity class.	15%
Males who exercise everyday during physical activity class.	25%
Watch six or more hours of TV, videos or DVDs weekly.	45%
Six or more hours of computer use NOT including school or part-	43%
time work every week.	

BMI percent of all students

Hardamar Salat	1114 14 1414	At risk of being	0
Underweight	Healthy Weight	overweight	Overweight
3%	69%	17%	11%

Per cent of all students



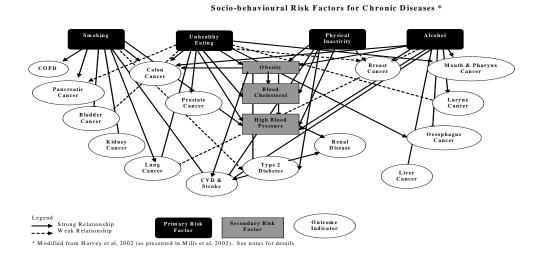


PART THREE: BACKGROUND ON HEALTH

In 2002, the World Health Organization stated that 'being overweight due to poor nutrition and lack of physical activity is one of the greatest health challenges and risk factors for chronic disease in the 21st century.' They have also stated that 'lack of physical activity has been found to lead to an increased risk of premature death, obesity, high blood pressure, stroke, colon cancer and depression.'

There are other factors that influence our health including our family history and our social, physical and economic environment. Some of these factors are within our control and others are not. The personal choices we all make can greatly affect our health. Eating well and staying active will help us to feel good about ourselves.

The following chart provided by the Ontario Chronic Disease Prevention Alliance clearly demonstrates the link between physical inactivity and an increased risk for chronic disease. This chart also identifies the negative impact of smoking, poor nutrition and alcohol.



Reproduced courtesy of Ontario Chronic Disease Prevention Alliance, Ontario Public Health.



Physical Activity Definition

Research suggests that a need to be physically active most if not all days of the week. The target is 60 minutes of activity a day but 30 minutes a day is enough to benefit overall health. Activity doesn't have to be extreme to improve health. It is possible to reach this goal by building physical activities into daily routines. Periods of at least 10 minutes each throughout the day can be added up to reach the daily target. The activity choice is individual.

Time needed depends on effort:

Very Light Effort	Light Effort 60 minutes	Moderate Effort 30-60 min.	Vigorous Effort	Maximum Effort
Strolling	Light walking	Brisk Walking	Aerobics	Sprinting
Dusting	Volleyball	Biking	Jogging	Racing
	Easy Gardening	Raking leaves	Hockey	
	Stretching	Swimming	Basketball	
		Dancing	Fast swimming	
		Water aerobics	Fast Dancing	
	Activity range needed to stay healthy			
No change from rest state	Starting to feel warm	Warmer	Quite warm	Very hot/perspiring heavily
Normal Breathing	Slight increase in	Greater increase	More out of breath	Completely aut of
140mai Breatining	breathing rate	in breathing rate		Completely out of breath
How activity should feel to be effective				

Information gathered from the Health Canada Website.



Barriers to Physical Activity

As identified by the roundtable members a variety of factors affect a person's ability to be physically active on a daily basis.

- Time or perceived lack of time
- Socio economics
- Transportation
- Car orientated environment
- Weather
- Accessibility
- Language
- Cultural beliefs
- Religious customs
- Focus on work
- Reduced time for physical activity within the school environment
- Lack of awareness and knowledge
- Fear
- Low-self esteem
- Lack of motivation



Who Needs to be Involved?

There are many components to creating and supporting a physically active environment for the community of Mississauga. The Healthy Weights, Healthy Lives Report published by the Chief Medical Officer of Health in 2004 suggests the following groups all have a role to play.

The Health Sector can promote healthy eating and physical activity as a means to improve health and prevent chronic disease	Governments can establish policies that promote healthy eating, physical activity and healthy environments	The food and recreation industry can develop and promote products and services that encourage healthy easting and physical activity
Workplaces can provide an environment that promotes healthy eating and regular physical activity	Healthy Weights, Healthy Lives for Ontarians	Schools can provide environments that encourage healthy eating and regular physical activity, and help students develop knowledge and skills to make healthy choices
Parents and caregivers can adopt and model healthy behaviours (breast feeding, healthy eating and regular physical activity)	Communities can create an environment that encourages healthy eating and regular physical activity	Individuals can make healthy eating choices and become more active



Effective Physical Activity Interventions

It is well documented that some of the most effective interventions in supporting people to be more physically active are:

- Community-Wide Campaigns
- Point of Decision Prompts
- School Based Physical Education

The former Ontario Ministry of Health as well as the former Ontario Ministry of Tourism and Recreation also identified these interventions as important components in any successful community action plan focusing on increasing physical activity rates.

Community-Wide Campaign

Community-wide campaigns involve many community sectors in highly visible, broadbased, multiple intervention approaches to increasing physical activity. In addition to incorporating substantial communication activities through mass media, interventions as part of a community-wide campaign typically include some combination of social support.

Point of Decision Prompts

Point-of-decision prompts have proved effective in a number and variety of settings. These signs motivate people to be more active in one of two ways: by reminding people already predisposed to becoming more active about an opportunity at hand to be more active or by informing them of a health benefit from as a result of the sign's suggested activity. Most common use for point-of-decision prompts is elevators and escalators reminding people to take the stairs. To be successful point-of-decision prompts must be culturally and environmental appropriate and respectful.

School-based Physical Education

Typically a successful school-based PE intervention would modify curriculum and policies to increase the amount of time students spend in moderate or vigorous activity while in PE classes. This can be done in a number of ways such as: lengthening existing classes; adding additional classes; and increasing the intensity level of classes.

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This Community Action Plan is the product of a collaborative effort by many people in our community. It is important to thank the following for their involvement in developing this Mississauga Community Action Plan.

- Canadian Mental Health Association
- City of Mississauga
- Community Living Mississauga
- Daniels Corporation
- Dixie Bloor Neighbourhood Centre
- Dufferin-Peel Catholic District School Board
- Elder Help-Peel
- Erinoak
- Family Services of Peel
- Healthy City Stewardship Centre
- India Rainbow Community Services of Peel
- Malton Neighbourhood Community Services
- Multicultural Inter-Agency Group of Peel (MIAG)
- Mississauga Garden Council
- Mississauga Heritage Foundation
- Mississauga Sports Council
- Ontario March of Dimes
- Ontario Ministry of Health Promotion
- Ontario Trillium Foundation
- Peel Children's Centre
- Peel Community Connections
- Peel District School Board
- Peel Heart Health Network
- Peel Literacy Guild
- Peel Multicultural Centre
- Peel Regional Police
- Pepsi-QTG
- PLASP Child Care Services
- Region of Peel
 - Children's Services
 - ➤ Health Department, Public Health
 - ➤ Social Services
- Social Planning Council of Peel
- Square One Older Adult Centre
- The Mississauga News
- Trillium Health Centre
- University of Toronto at Mississauga (UTM)
- 905 Area Faith Community Leaders
- YMCA Mississauga

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The support of YMCA Ontario is also acknowledged.

Thank you to Caroline Aston & Associates for coordinating and facilitating the roundtable series and producing the Mississauga Community Action Plan.

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REFERENCE MATERIAL

Information in the following publications, resource materials and websites was used to support the development of this community action plan.

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Effectiveness of Interventions to Increase Physical Activity, The American Journal of Preventative Medicine, volume 22, number 4S.

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Portraits of Peel: Neighbourhood Environmental Scan, the Social Planning Council of Peel, September 2004.

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Student Health Survey 2005: Gauging the Health of Peel's Youth, Region of Peel Public Health.

Social Disparities and Involvement in Physical Activity, University de Montreal, May 2003.



WEBSITES OF INTEREST

www.active2010.ca www.hc-sc.gc.ca www.tourism.gov.on.ca (former) www.health.gov.on.ca www.statcan.ca www.mississauga.ca



PARTICIPANTS & SPECIAL THANKS

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Amy Yee, Public Health Nurse, Peel Health Public Health

HEALTHY MISSISSAUGA 2010 PLAN



DEVELOPED BY THE MEMBER
ORGANIZATIONS OF THE HEALTHY
CITY STEWARDSHIP CENTRE

For more information visit: www.mississauga.ca/portal/cityhall/stewardship