

MIDDLESEX-LONDON BOARD OF HEALTH

REPORT NO. 40-25

TO: Chair and Members of the Board of Health
FROM: Dr. Alexander Summers, Medical Officer of Health
Emily Williams, Chief Executive Officer
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MIDDLESEX-LONDON POPULATION HEALTH NEEDS AND PRIORITIES 2025

Recommendation

It is recommended that the Board of Health receive Report No. 40-25 re: "Middlesex-London Population Health Needs and Priorities 2025" for information.

Report Highlights

- Middlesex-London's population grew by 9.9% from 2016 to 2021, surpassing the provincial growth rate.
- Increased diversity in the region requires public health programs to be inclusive and designed to meet the unique needs of racialized communities and recent immigrants.
- There is a growing need for maternal and child health services due to an increase in live births, and particularly for newcomer families.
- The increases in homelessness, substance use harms, and violence require ongoing, strategic approaches with expanded services and resources to address both immediate needs and the long-term health consequences of these issues.
- Infectious disease cases and outbreaks substantially impact the region, underscoring the important role the Health Unit plays in infectious disease control. This is done through case follow up, outbreak investigation, and prevention by sustaining high vaccination coverage among school-aged children.

Background

Each year, public health units prepare an [Annual Service Plan](#) (ASP) for the Ministry of Health. This report highlights some of the current and emerging population health needs and priorities underpinning the Community Assessment of the 2025 MLHU ASP.

Community Needs and Priorities

Population growth and increasing diversity: The Middlesex-London region has undergone significant demographic growth and transformation. Between 2016 and 2021, the population increased by 9.9%, surpassing the provincial growth rate of 5.8%. As of July 1, 2024, the region's population is projected to have reached 579,471.

Alongside population growth, the region is becoming increasingly diverse. In 2021, 4.1% of residents were recent immigrants (up from 2.6% in 2016), and 24.7% of the population identified as racialized, a significant increase from 17.0% in 2016. The rapid growth and shifting demographic profile for Middlesex-London highlight the importance of adapting public health programs and services to meet the evolving needs of both a growing population and equity-deserving groups, particularly immigrants and racialized communities, who may experience disproportionate health disparities due to systemic barriers.

Increasing births and need for maternal-child services: In 2024, the region recorded the highest number of live births in a decade, with 5,072 births, and the corresponding local rate was significantly higher than the provincial rate in 2022 and 2023. From 2015 to 2023, the percentage of infants in Middlesex-London with a parent or their partner with a mental illness was significantly higher than across Ontario. Additionally, the *Healthy Baby Healthy Children* program works with many families in need of newcomer support, focusing on factors like being new to Canada, lack of social supports, and social isolation. Since 2015, the percentage of infants in Middlesex-London requiring this support has consistently been significantly higher than in Ontario, reaching about 10% in 2023. The increase in births, the impact of mental health concerns on families, and growing population of recent immigrants signals growing local demand for maternal and child health services.

Homelessness: A 2018 survey reported just over 400 individuals experiencing homelessness in the City of London, and recent estimates indicate this number has surged to 1,595 as of December 2024. This increase has prompted the City of London to launch a collaborative response plan involving over 70 agencies, including the Health Unit, to address homelessness and its associated health impacts.

Substance use harms: From 2017 to 2023, the rate of emergency department (ED) visits for opioid poisonings in the Middlesex-London region consistently exceeded those in Ontario. In 2022, the rates of methamphetamine toxicity deaths nearly tripled in Middlesex-London compared to 2019. The Health Unit plays a critical role in an ongoing comprehensive community approach along the four pillars of prevention, treatment, harm reduction, and enforcement.

Violence: From 2015 to 2023, the rates of assault-related ED visits in Middlesex-London was significantly higher than in Ontario. Further, in 2023, the local rate of ED visits for intimate partner violence (IPV) significantly exceeded the provincial rate. Violence, in all forms, is a widespread issue with profound health implications, particularly for women, transgender, and non-binary people. The Health Unit is one of several community agencies that has prioritized, albeit with limited resources, implementation of IPV and other violence prevention strategies.

Infectious diseases: Since the end of the global COVID-19 pandemic in May 2023, respiratory illness outbreaks in Middlesex-London institutions have surged. During the 2023-24 respiratory season, 183 respiratory outbreaks were confirmed in local institutions, which was more than double the pre-pandemic average of 76 outbreaks. As of early April 2025, more than 70 respiratory outbreaks had been reported, with more than four months remaining in the season. The Health Unit remains committed to working with institutions to limit and mitigate respiratory outbreaks and protect the most vulnerable in our hospitals, long-term care homes, and retirement homes.

At a community level, in 2024, routine monitoring enabled early identification and response to several significant infectious disease events, including clusters of chickenpox among post-secondary students and a large outbreak of Legionnaires' disease. This increased burden of infectious disease outbreaks has continued into 2025. As part of an Ontario-wide measles outbreak, 43 cases have been reported in the Middlesex-London region as of early May 2025. The Health Unit remains actively engaged in outbreak response, coordinating efforts across local sectors to contain transmission and protect vulnerable populations. These ongoing clusters and outbreaks highlight the unpredictable nature of infectious diseases and the critical role of rapid public health response.

The Health Unit follows up on individual infectious disease cases, including tuberculosis, invasive group A *streptococcus*, and syphilis. Between 2015 and 2024, the local number of reported infectious syphilis cases more than quadrupled. Further, congenital syphilis has reemerged as a public health concern across the province, and as of December 2024, the Health Unit was following nine local infants for possible development of congenital syphilis. A comprehensive STI strategy is now in place, to address all sexually transmitted infections, focusing on high-risk groups such as unhoused individuals and people who inject drugs.

Vaccination coverage among school-aged children: In 2022, 41,000 students in Middlesex-London schools were overdue for at least one vaccine required under the *Immunization of School Pupils Act* (ISPA); this number decreased to 17,500 by the 2023-24 school year. Coverage levels have returned to or surpassed pre-pandemic levels.

These are only a few of the existing and emerging population health needs that influence local public health planning and service delivery. To gain a more fulsome understanding of the population health profile of Middlesex-London, please visit the MLHU [Community Health Status Resource](#).

Moving Forward

The local demographic shifts have presented challenges in meeting the diverse needs of the community, especially for equity-deserving groups such as newcomers. To address these challenges, the Health Unit is adopting programs to be more inclusive and responsive to evolving community needs. The Health Unit will continue to adopt and adapt programs and services to meet local population health needs and priorities.

This report was written by the Population Health Assessment and Surveillance Team, in the Public Health Foundations Division.



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This report refers to the following principle(s) set out in Policy G-490, Appendix A:

- The Population Health Assessment and Health Equity Foundational Standards as outlined in the [Ontario Public Health Standards: Requirements for Programs, Services and Accountability](#).
- Goals from the Client and Community Confidence and Program Excellence pillars within the [Middlesex-London Health Unit's Strategic Plan](#).

This topic has been reviewed to be in alignment with goals under the Middlesex-London Health Unit's [Anti-Black Racism Plan](#) and [Taking Action for Reconciliation](#), specifically recommendations involving Awareness and Education (TAFR).