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# The Regional Municipality of Durham Information Report

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From: Commissioner & Medical Officer of Health  
Report: #2025-INFO-71  
Date: September 12, 2025

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**Subject:**

2024 Annual Report of the Chief Medical Officer of Health of Ontario

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**Recommendation:**

Receive for information

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**Report:**

**1. Purpose**

1.1 To provide an update on the release of the 2024 annual report from the Chief Medical Officer of Health of Ontario (CMOH) to the Legislative Assembly of Ontario entitled, [Protecting Tomorrow: The Future of Immunization in Ontario](#).

**2. Background**

2.1 Section 81(4) of the [Health Protection and Promotion Act](#) requires the CMOH to make an annual report in writing on the state of public health in Ontario and deliver it to the Speaker of the Legislative Assembly.

2.2 The CMOH released the 2024 annual report on August 29, 2025.

2.3 The CMOH's annual report highlights gaps in Ontario's current immunization system and provides recommendations to strengthen the system.

**3. CMOH Annual Report Highlights**

3.1 The first section of the report shares information and evidence about how vaccines save lives, prevent diseases, reduce health care spending, and prevent other economic losses to society.

- a. The World Health Organization estimates that between three and a half to five million lives are saved each year through routine immunizations, which prevent diseases like diphtheria, tetanus, pertussis, influenza, and measles.
  - b. In the past 50 years, an estimated 154 million deaths were prevented worldwide by immunizations, of which over 100 million deaths were prevented in children under the age of one.
  - c. Estimates found that in Canada, adult vaccines save the health care system and economy \$2.5 billion annually.
- 3.2 The second section of the report explores Ontario's current immunization landscape. Currently, Ontario's publicly funded immunization programs include 29 unique immunization products which protect against 23 different diseases and are offered across the lifespan. Between 2014 and 2025, investment in publicly funded immunization in Ontario has increased by over 400 per cent thanks to continued investment in research and new vaccine technologies.
- 3.3 The third section describes current challenges in Ontario's immunization system and the following three central issues:
- a. Gaps in immunization data.
    - Immunization data in Ontario are spread across multiple record systems, making it difficult to check if individuals are up to date, provide efficient clinical services and determine vaccination coverage for communities and regions. This data gap creates challenges for patients and families, health care providers, public health organizations, and the broader health care system.
  - b. Disparities in vaccine access and uptake.
    - Disparities are driven by structural and systemic factors that create barriers to vaccine access as well as beliefs and attitudes that can impact vaccine confidence. Contextual factors may prevent some people from vaccine access and uptake (e.g., work, transportation, or childcare issues). Mobility issues and language barriers also impede vaccine access and uptake.
    - Ontario does not have consistent data to track vaccine uptake among different sociodemographic groups. This makes it challenging to identify and address gaps. National surveys and local data suggest that some groups in Ontario face greater barriers to vaccination, which creates unfair differences in health outcomes.
  - c. Declining vaccine confidence.
    - In 2019, prior to the COVID-19 pandemic, the World Health Organization warned about the pressing global threat of vaccine hesitancy. With the increased circulation of misinformation through social media in recent

years, which was exacerbated during the COVID-19 pandemic, vaccine confidence declined in Canada and globally.

- In Canada, parental skepticism about routine childhood immunizations doubled between 2019 and 2024. Only 67 per cent of Canadian parents in 2024 would vaccinate their children without hesitation, down from 88 per cent in 2019. Parents also reported feeling skeptical about vaccine science (29 per cent) and worried about side effects (34 per cent).
- Over half (54 per cent) of Canadians reported moderate to high vaccine fatigue, especially those under age 45.

3.4 The fourth section of the report describes the CMOH's vision for strengthening Ontario's immunization system. The vision is for vaccination programs to be based on an efficient, comprehensive immunization system that captures all immunizations across a person's lifespan. The vision includes having an interconnected provincial immunization information system that provides real-time data to everyone, including patients and health care providers, to improve the system itself, as well as improve program monitoring and evaluation.

3.5 The fifth section describes Ontario's evolving immunization landscape. Key components of the evolution include:

- a. Emerging threats such as future outbreaks and pandemics.
- b. Innovations and opportunities for future advancements (e.g., the creation of new immunizations against other infectious diseases, cancer, dementia, and birth defects; new vaccine manufacturing techniques; and alternative vaccine delivery systems like oral, intranasal, inhaled, and transdermal delivery).

3.6 The sixth and final section of the report presents recommendations and next steps to address the three central issues presented in the report.

- a. To resolve gaps in immunization data, the CMOH recommends that Ontario should:
  - Create a comprehensive provincial immunization information system.
  - Advocate for the development of a national immunization information system.
  - Develop an integrated public health data platform to enhance immunization program safety and effectiveness monitoring, performance, and access.
  - Advocate for a harmonized national immunization schedule (currently vaccine schedules are set by each province/territory) with federal vaccine purchasing and procurement through a National Pharmacare Strategy.
  - Use data to identify and monitor disparities in immunization access and uptake.
  - Collect sociodemographic data at the clinical interface and work in partnership with Indigenous, Black, and other racialized community

partners to develop governance frameworks to guide the secure use of immunization data.

- b. To address inequities in vaccine access and uptake, the CMOH recommends that Ontario should:
- Guide the development of publicly funded immunization programs using a needs-based framework.
  - Bring together leadership from Indigenous health organizations and community leaders with local and provincial health authorities to explore a provincial Indigenous Immunization Strategy.
  - Work with underserved, priority, and racialized communities to improve vaccine confidence and access to immunizations, using community knowledge and leadership to guide this work.
  - Engage with researchers, local public health organizations, health care providers, and communities to identify barriers to accessing publicly funded vaccines.
  - Improve access to primary care, particularly for young children who rely on this service for access to routine early childhood vaccines.
  - Explore immunization access models, carefully considering provincial and regional contextual factors.
- c. To reverse declining vaccine confidence, the CMOH recommends that Ontario should:
- Develop a centralized, provincial immunization resource centre to answer questions about immunization eligibility and access.
  - Invest in community health ambassador programs to create opportunities for community health promotion leadership and vaccine advocacy.
  - Use data to guide vaccine communication locally and provincially by monitoring the relationship between immunization uptake and public health messaging.
  - Do more to mitigate the impact of misinformation and disinformation on vaccines by investing in 'pre-bunking' and 'de-bunking' public communication campaigns.
  - Implement a province-wide active immunization surveillance system to monitor and evaluate vaccine safety and effectiveness in real time using comprehensive immunization data.
  - Develop tools to communicate vaccine safety and effectiveness data regularly to build trust and public confidence.

#### **4. Relationship to Strategic Plan**

4.1 This report aligns with/addresses the following Strategic Directions and Pathways in Durham Region's 2025-2035 Strategic Plan:

- a. Healthy People, Caring Communities

- H1. Implement preventive strategies to support community health, including food security.
  - H2. Collaborate with partners to respond to complex social issues that improve community safety and well-being, including mental health and addictions.
  - H4. Support the development of healthy children and youth, including access to affordable and quality child care.
  - H5. Provide services for seniors and work with community partners to support aging in place.
  - H7. Prepare for and respond to local health emergencies in partnership with the community.
- b. Strong Relationships
- S5. Ensure accountable and transparent decision-making to serve community needs, while responsibly managing available resources.

## 5. Conclusion

- 5.1 The CMOH concludes with a reminder that the impact of immunization on human health cannot be overstated.
- 5.2 Ontario's ongoing investment in immunization programs demonstrates a strong commitment to prevention, but as communities change from a societal, microbial, and disease perspective, there is still work to be done.
- 5.3 Ontario has the potential to be a leader in immunization, but this will require a coordinated approach between all levels of government, local and provincial public health, primary care, hospitals, community organizations, and local communities.
- 5.4 The Durham Region Health Department (DRHD) plays an important role in local immunization management, vaccine delivery, and communication. This includes:
- a. Supporting [\*Immunization of School Pupils Act\*](#) compliance by providing provincially funded immunizations to eligible students through school-based clinics, managing students' immunization records and exemptions, and sending out notifications to parents/guardians of students with missing or incomplete immunization records.
  - b. Offering immunization clinics to Durham Region residents with limited access to publicly funded vaccines.
  - c. Providing COVID-19 vaccine homebound clinics for Durham Region residents with limited access to vaccine.
  - d. Ensuring vaccine safety by managing vaccine storage and handling for all publicly funded vaccine in Durham Region which involves safe and secure distribution of publicly funded vaccines, inspections, providing education to

health care providers who administer vaccine, and following up on cold chain incidents.

- e. Administering rabies post-exposure prophylaxis and supporting local veterinarians and municipal animal services to host low-cost rabies immunization clinics.
- f. Communicating immunization information on [durham.ca](http://durham.ca) to the public, including sharing information about vaccines, where to access personal immunization records, how to report a child's immunization records, Ontario's routine immunization schedule, and more. DRHD also has a [webpage](#) dedicated to COVID-19 vaccines. This includes evidence-based information about COVID-19, vaccine eligibility, information on where to get vaccinated, frequently asked questions, and resources in other languages.
- g. Communicating emerging immunization information to the general public using social media, as needed, as well as sharing information with health care providers and community partners through Fax Abouts, as needed.

Respectfully submitted,

Original signed by

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R.J. Kyle, BSc, MD, MHSc, CCFP, FRCPC, FACPM  
Commissioner & Medical Officer of Health