

Clean Indoor Air Toronto

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Toronto Board of Health
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October 26, 2025

To the Board of Health;

We are [Clean Indoor Air Toronto \(CIATO\)](#), a group of concerned Toronto residents who are dedicated to improving indoor air quality in our built environments. We believe that for the health and well-being of city residents, it is essential to prioritize high indoor air quality, providing clean, safe-to-breathe air.

CIATO urges the Board of Health to direct Toronto Public Health (TPH) to incorporate [Health Canada's latest guidance on indoor air quality](#) (IAQ) into all current and future plans; to put this guidance into action; and to inform the public of the importance of clean and safe indoor air quality, and to provide information on readily available tools and methods to quickly improve IAQ.

In brief, Health Canada's [Guidance for Indoor Air Quality Professionals](#) ("IAQ Guidance") states that:

- Diseases can spread via particles that remain suspended in the air and travel longer distances; ventilation, filtration and HEPA air cleaners are recommended as risk-reduction measures
- There is evidence that people exposed to carbon dioxide (CO₂) concentrations above ~800 ppm report more mucous-membrane and respiratory symptoms;
- CO₂ monitoring can be used to indicate ventilation adequacy in occupied spaces;
- Guidance reinforces three core strategies: source control, ventilation, and filtration, and recommends maintenance protocols, prompt moisture remediation, and education for staff and building occupants.

Regarding the four items to be presented by TPH to the Board of Health for Meeting 28, October 27, 2025, none of these items include IAQ as a guiding principle in planning, despite the fact that Health Canada published their IAQ guidance on September 19, 2025. Municipal Licensing and Standards' [report on the Property Standards By-law](#), posted on October 16, 2025, makes note of the Health Canada IAQ Guidance, stating that "The latest guidance from Health Canada, published in September 2025, affirms that regular building and HVAC maintenance is a critical baseline standard for maintaining a health indoor environment".

HL28.1: Working with Schools to Improve the Health and Well-being of Children and Youth

TPH's plan for working with schools to improve health of students makes only passing mention of reducing the spread of respiratory infections but no specific description of what this plan entails. There is no mention of a plan to protect the school community from the health impacts of climate change, including extreme heat, wildfire smoke, and air pollution due to flooding/heavy rains. Will TPH provide information on how to reduce spread of respiratory infection, and how to manage the impacts of climate change, including extreme heat and air pollution?

HL28.2: Publication of Child Care Centre Infection Control Inspection Results

CIATO supports the initiative to create a public dashboard with the results of public health inspections of child care centres. However, we note that the proposed public dashboard will only include the results of

infection, prevention, and control (IPAC) inspections that include review of administrative health policies, observation of cleaning and disinfection practices, hand hygiene, and inspection of washroom and diapering areas. There is no mention of measures to improve IAQ that would both reduce spread of airborne diseases, and protect against the health impacts of climate change (e.g., smoke and other air pollution; extreme heat). The City of Toronto has [an indoor air quality policy for its offices](#), which helps to protect those child care centres that are located in municipal buildings, but what about the child care centres in other buildings? Is there any reason why the IAQ parameters in the City of Toronto's IAQ policy cannot be included as guidance to all child care centres? Will TPH update the public dashboard to include IAQ data, including CO₂ and fine particulate (PM_{2.5}) levels measured during the course of the day while the space is occupied, access to air conditioning in good working order, and compliance with the Ontario Building Code with regards to ASHRAE Standard 62.1, and the Health Canada IAQ Guidance?

HL28.3: Toronto Public Health Update on Respiratory Syncytial Virus (RSV) Prevention

TPH's plan to prevent RSV infections states that "Like influenza (flu) and the virus that causes COVID-19, RSV spreads through respiratory droplets". The Health Canada IAQ Guidance states that the virus that causes COVID-19 can remain suspended in the air and travel longer distances; given TPH's comparison, RSV can also remain suspended in the air. However, there is no mention of advising the public of additional protective measures that can be taken to reduce the risk of transmitting RSV and other diseases that spread primarily through the air. Will TPH revise their plan to prevent RSV infections to incorporate the Health Canada IAQ guidance?

HL28.4: Toronto Public Health's Preparation for FIFA World Cup 2026

TPH's plan mentions the public health risks of mass gatherings, including the potential for disease transmission, importation of rare diseases, as well as environmental health risks (extreme heat and poor air quality). The TPH report also states that respiratory viruses will be monitored via waste water trends, and promote messages aimed at reducing infection risk. As noted by Health Canada, respiratory viruses may remain suspended in the air and travel longer distances; this becomes a risk factor in crowded situations, particularly if there is inadequate fresh air supply. During the Taylor Swift concerts in December 2024, TPH social media messages placed emphasis on vaccination and hand-washing, downplayed the consequences of COVID-19 and influenza infection ([described as feeling "delicate"](#)), with only passing mention to "consider wearing a mask". In our view, such messaging will be ineffective for preventing respiratory infections, particularly as it is not preventative, it is in reaction to a detected increase of infections. Is TPH going to incorporate Health Canada's IAQ guidance into messages to the public, to inform the public in advance, of protective measures that are effective against airborne transmission of disease?

The air in our shared indoor spaces is not as clean as we think. Our built environments were not designed with clean, safe-to-breathe-indoor air in mind. Many serious infectious diseases including COVID-19, measles, RSV, and tuberculosis, are primarily transmitted through the air, especially in poorly ventilated spaces or crowded conditions. At the same time, many Toronto buildings are not adapted to handle the challenges from climate change-related events like wildfire smoke and extreme heat.

The COVID-19 pandemic, combined with the climate crisis, have also shown us that there are many sectors of our society that are vulnerable to the effects of air pollution and airborne infectious diseases: young children, seniors, people who are immunocompromised, people with asthma and other chronic respiratory conditions, people with chronic illnesses like diabetes and cardiovascular disease, and the list goes on.

CIATO recognizes indoor air quality as an accessibility and equity issue. Most members of our group, and many more in our network, have been forced to radically change how we engage and interact with the city's facilities and services to avoid indoor spaces perceived as potentially having poor air quality, and thus protect our health. The City of Toronto has [an indoor air quality policy for its offices](#), thus protecting its

office employees, but this policy does not extend to all of Toronto's buildings, creating inequitable access to clean air. This IAQ policy forms an invisible layer of protection that many remain unaware of – it is only apparent to those who have had discovered that access to clean, safe-to-breathe air is a privilege.

These health impacts are well-documented and are being formally recognized by policy makers. In 2022, [the UN declared](#) that everyone on the planet has a right to a healthy environment, including clean air, water, and a stable climate. In September 2025, expert organizations, academic and research institutions, scientists, engineers, and community advocates gathered at the UN General Assembly to sign a global [pledge](#) for healthy indoor air, and declared that ***clean indoor air is a fundamental human right for protecting health and safeguarding well-being***. In addition, Health Canada's IAQ Guidance states that "Indoor air quality is considered an important environmental determinant of health. A healthy indoor environment is one that contributes to productivity and comfort of occupants and protects their health and well-being."

By including IAQ in public health planning and actions, the City of Toronto can take positive steps towards making all buildings, services, and facilities in the city inclusive and accessible to all our vulnerable sectors, while protecting the health of Torontonians from the many negative impacts of poor indoor air quality, and making the city more resilient to climate change.

We welcome the opportunity to discuss this topic further. Please do not hesitate to contact us if you require any additional information.

Yours Sincerely,

On behalf of Clean Indoor Air Toronto (CIATO)

Louise Hiding, Ph.D., Scarborough Southwest - Ward 20

Heather Pun, Don Valley East - Ward 16

[Plus signatures of 32 CIATO members]

Mary Jo Nabuurs, Spokesperson and Officer of Media Relations &
Outreach, *Ontario School Safety*

Safe Air Collective

Concerned members of the public:

Dr. Joe Vipond, Emergency Physician, co-chair, Canadian Covid Society, Clinical Assistant Professor, Dept of Emergency Medicine, Cumming School of Medicine, University of Calgary

Jutta Treviranus, Director & Professor, Inclusive Design Research Centre, OCAD University

Michelle Aarts, Elected School Board Trustee (Beaches - East York)

[Plus 52 signatures of concerned members of the public.]