

STAFF REPORT ACTION REQUIRED

Healthy Toronto by Design

Date:	October 3, 2011
То:	Board of Health
From:	Medical Officer of Health
Wards:	All
Reference Number:	

SUMMARY

Cities are important centres for innovation and economic growth. About 80 percent of the population of Canada now lives in urban areas. The Toronto region generates almost 20 percent of Canada's and 45 percent of Ontario's gross domestic product. The region is also home to 40 percent of the nation's business headquarters.

Many socio-economic and environmental factors affect health. These include: air and water quality, culture, education, employment, housing, income, and social supports. These factors are also important for creating vibrant and thriving cities that attract business and foster economic development and growth.

Many of the investments in public health in cities in the past focussed on prevention of communicable diseases. These diseases have become less important as housing conditions improved and safe water and sanitation infrastructure help control water-borne diseases. Immunization programs and food safety measures have also prevented many other diseases that once were common. While continued vigilance is needed to maintain the gains made in controlling communicable diseases there is also the need to address the most important 21st century threats to health – chronic conditions, such as heart and lung diseases, cancer, and diabetes. The way cities are built and how well they perform on economic and social factors are critical in providing an environment where people can stay healthy and lead productive lives.

Local governments have a central role in fostering a prosperous and healthy city. This includes: a) land-use and transportation planning, which sets out the overall structure of the built environment; b) provision of infrastructure for communication, energy distribution, transportation including public transit walking and cycling, clean water and waste management which are services needed for industry, commerce and day- to-day

life of people in the city; c) provision of green space and facilities for recreation, culture and learning; d) economic and social support for at-risk and vulnerable people, including support for affordable housing and ; and e) promoting local economic development. Governments enhance quality of life through service delivery and education, the adoption and enforcement of necessary regulations and bylaws, the creation of partnerships and facilitation of multi-stakeholder processes. Effective local interventions recognize and respond to the diverse needs of the population, with specific attention to the most vulnerable. Toronto is already a leader in many areas of civic governance, policy and service provision and can build on the success of the past to create a healthy city for the future.

A prosperous city provides its residents with opportunities for good health; and at the same time, a healthy population is needed for a city to prosper. Since the conditions where we live, learn, work, and play influence our well-being and the prosperity of the city, it is important to consider how municipal decisions on policies, programmes and services impact health.

RECOMMENDATIONS

The Medical Officer of Health recommends that:

- 1. The Board of Health request the Medical Officer of Health to:
 - a. work with the heads of relevant City Agencies, Boards, Commissions, corporations and divisions to identify and promote measures to protect and promote population health which are feasible within their mandate, and to report back to the Board of Health in the fall of 2012 on progress made;
 - b. report to the Board of Health on City initiatives that could have significant impacts on population health and health equity; and
- 2. The Chair of the Board of Health and the Medical Officer of Health forward this report to the Mayor, City councillors, the City Manager, and heads of City Agencies, Boards, Commissions, Corporations and Divisions for their information.

Financial Impact

There are no financial impacts from the adoption of this report.

ISSUE BACKGROUND

Introduction

The Ontario Public Health Standards outline the roles and responsibilities of boards of health. It emphasizes that addressing the factors that influence health (determinants of health) and reducing health inequities are fundamental to the work of public health in Ontario. Every board of health in Ontario must comply with these standards.

Boards of health have a responsibility to make policy-makers, community partners, and health service providers aware of the best available research regarding the factors that determine the health of the population and which support effective public health practice. The report *Healthy Toronto by Design* has been prepared to inform the Board, City Councillors and staff of the major impacts cities have on health and highlights the role of local governments in creating healthy and prosperous cities (see attachment).

Economic, environmental and social factors affect health

The World Health Organization defines health as "a state of complete physical, mental, and social well-being and not merely the absence of disease or infirmity".ⁱ The conditions in which we live, learn, work, and play influence our well-being. Good health and healthy lives are the result of the influence of many different interacting factors.

Access to health services is only one of the factors that influence health. Economic, environmental and social factors are important in determining the health of individuals and communities. For example, people who are unemployed or underemployed, lack access to community resources or social supports, have lower levels of education or face employment barriers and discrimination are at greater risk of poor health. Low income, income inequality, homelessness and poverty, which have negative effects on people's health, are currently on the increase in the city.

Air and water pollution, crowded or poor housing conditions, urban sprawl and traffic congestion, and effects of climate change all contribute to the rate of health conditions and diseases, including obesity, mental illness, and respiratory and cardiovascular diseases. Some groups, such as children, people with disabilities, seniors, low income and racialized communities are more severely affected.

Toronto faces many health challenges

While Toronto provides many benefits of urban living, the city also has many health challenges to addressⁱⁱ, such as:

- **Major chronic conditions:** the proportion of people diagnosed with at least one common chronic condition (such as asthma, diabetes, cancer, high blood pressure or heart disease) increased from 23 percent in 2001 to almost 29 percent in 2008; this upward trend could continue as Toronto's population ages.
- Low Birth Weight: Toronto's low birth weight rate is just above 7 percent, which is higher than in the rest of Ontario.
- **Overweight/obesity**: over 40 percent of adults were overweight or obese in 2008.
- **Physical Activity:** In 2008, only about 40 percent Torontonians met the recommended level of physical activity for good health.
- Nutrition: Not enough people are eating the recommended daily amount of vegetables and fruits in 2008, only about 40 percent of people reported eating the recommended number of servings of vegetables and fruits.

COMMENTS

Cities and the regions around them are the engines of the global economy. As the largest city in Canada, and the fifth most populous in North America, Toronto is a driver of the Canadian economy. The Toronto region generates almost 20 percent of Canada's and 45 percent of Ontario's gross domestic product, and is home to 40 percent of the Canada's business headquarters.ⁱⁱⁱ Toronto's future economic success in the competitive global economy may likely depend on how well the city continues to attract and retain talented and skilled professionals, newcomers and migrant workers as well as businesses.

Factors that make a city prosperous make a city healthy

Factors that make a city a liveable also make a city good for business; cities where people like to live are cities that provide businesses with more customers and potential employees. Several organizations rank cities with respect to their quality of life or environment for business (see the City's web page *Toronto in world rankings* <u>http://www.toronto.ca/progress/world_rankings.htm</u>). While the results of each of these are different because of the difference in the methods used, they include common factors that are considered important when assessing a great city (see Table 1).

Table 1: Factors that make a city a great place to live are good for its economy and contribute to people's health			
A safe place live in	Quality education		
Access to health care	Quality employment		
Efficient public transportation	Quality natural and built environment		
Food security	Safe drinking water and sanitation		
Good governance	Socially inclusive		
Opportunities for recreation	Vibrant culture		

The Toronto Board of Trade Scorecard on Prosperity compares 25 global cities. In 2011, Toronto ranked 8th, down from 4th in 2010 and 2009^{iv,v}. Toronto ranked high on various economic indicators such as level of professional employment, overall tax burden and the number of residential permits issued, which is a sign of confidence in the economy. On indicators of labour attractiveness, which relate to the quality of life, Toronto ranked high for its large proportion of immigrants, good teacher-student ratio in schools, population with higher education, and a relatively low crime rate. These are areas of strength that Toronto needs to maintain.

The Board of Trade identified lower scores on economic performance and lack of investment in public transit, which affects labour attractiveness and productivity as well as overall economic performance, as the reasons for Toronto's lower ranking. For housing affordability, among the Canadian cities assessed, only Vancouver is less affordable. Of the Canadian metropolitan areas included in the Scorecard, Toronto has the highest inequality as measured by the Gini coefficient.

Good city building addressed past health threats

Modern-day public health has been traced back to Edwin Chadwick, secretary to the Health in Towns Commission established by the British government in 1843. Since healthy workers were needed, the Commission looked at how to improve the health of the working poor who had flocked to rapidly industrializing cities. This led to the establishment of public health measures such as health regulations, housing standards, safe drinking water supplies and creation of sewer systems. These interventions had a dramatic effect on public health in Britain in a very short time.

In 1909 Canada established the Commission on Conservation. Its Public Health Committee identified good town planning as instrumental to the preservation of the environment and people's health. Thomas Adams, advisor to the Committee from 1914-1919 was instrumental in the development of town planning legislation across the country.

Toronto was one of the first cities in the world to begin chlorination of drinking water in 1910, which by 1915 was followed with chlorination of sewage and water filtration. In July 1915, Maclean's magazine declared Toronto the healthiest of large cities in the world. This high level of public health was achieved due to the leadership of Dr. Charles Hastings, Toronto's Medical Officer of Health, the political commitment of city council, and support of the community. Under the tenure of Dr. Hastings, the work of the public health department addressed health in the workplace, social welfare, housing, school health, community health education, diet and nutrition, child rearing, and care for the sick. These interventions and those that followed, such as universal immunization and food safety programs, greatly reduced the burden of illness from communicable diseases in Toronto and cities around the world.

Reducing chronic diseases is a new priority for cities

In addition to maintaining the programs and services that control and prevent communicable diseases there is also a need to address chronic diseases, which are now the major cause of illness and death in Toronto and Canada. These diseases include respiratory ailments, coronary heart disease; type-2 diabetes, overweight and obesity, high blood pressure and stroke, osteoporosis, cancers, and depression. Lack of physical activity, limited access to healthy food, and exposure to air pollution are some of the risk factors for these diseases that cities must now address. The way cities are built and how well they perform on economic environmental and social factors are critical in providing opportunity for people to healthy and lead productive lives.

In the 1980s renewed interest in the global public health community on the impacts of urban living on well-being led to the creation of the Healthy Cities movement. The idea, which originated in Toronto, is being implemented in many cities around the world to foster an inter-sectoral approach to promote urban health.

Active transportation in cities supports health

A city's built environment influences levels of physical activity by encouraging or discouraging walking, biking, playing in parks, driving cars or taking public transit. The design of indoor and outdoor spaces influences the degree to which people are injured, have access to nutritious food, or feel stressed. The transportation system impacts health directly through injuries, air pollution, and noise and indirectly by influencing levels of physical activity, facilitating access to services, and supporting social cohesion.

Compact neighbourhoods with a good mix of land use and streets that are designed for all users make it easier for people to maintain health through physical activity. Better access to transit also increases the likelihood of physical activity. Accessible and affordable public transit improves access to employment, education, food, recreation and other services, which are all important for health. This is particularly important for low-income individuals and families.

Cities with quality natural environments are better for health

Providing high quality drinking water, waste water treatment and waste management services are essential for maintaining health in a city. Air pollution and its impact on heart and lung diseases is an on-going challenge in cities. Past industrial and commercial activities have also left areas with contaminated soil.

Green space – particularly trees, but also grass, perennial plants, shrubs and other vegetation – provide benefits to health by improving air and water quality. Green space also helps reduce the health impacts of climate change. Public spaces provide an opportunity for exercise, physical activity and relaxation all of which contribute to health. Parks help create stable neighbourhoods and strengthen community development, which helps make communities healthier.

More prosperous cities foster health

In Canada the concentration of aboriginal peoples, female-headed lone-parent families, immigrants and people with disabilities in cities makes poverty a particular concern for urban areas. These groups are more likely to be poor and experience a higher rate of unemployment.

The association between socio-economic status and health is well documented – individuals with higher socio-economic status (people with higher income, employment, education, etc.) have better health. In the 2008 report *The Unequal City*, Toronto Public Health showed that areas of Toronto that have a greater proportion of people living with low income experience more risk factors for illness (for example, physical inactivity, overweight/obesity, smoking), higher rates of disease and death at an earlier age compared with higher income areas.^{vi} These areas also had the highest rate of singleton low birth weight, considered to be an important determinant of infant health with impacts that extend through childhood and beyond. Unemployment and economic hardship can affect health through their impact on family and social relationships, parenting, and self-esteem. These can also contribute to social isolation when lack of income reduces the ability to participate in social, cultural, and recreational activities.

Affordable quality housing is needed for a healthy and prosperous city and contributes to the overall economic success of a city. With sufficient income and a good supply of affordable housing, people are able to get quality housing in a desirable neighbourhood. Housing issues are multi-dimensional. They include: the physical structure, its design and characteristics; the social and psychological aspects of the home; the immediate physical area around the building; and the social characteristics and range of services in a neighbourhood. Poor housing conditions and homelessness are associated with a wide range of health conditions including mental health. As well, when individuals or families have to spend too much of their income on housing, they are often not able to get enough food for a healthy and nutritious diet.

Income also affects food security – access to sufficient, safe and nutritious food to meet dietary needs and food preferences for an active and healthy life. In Canada, a larger proportion of households in urban areas are food insecure (that is, they lack the resources to obtain a sufficiently nutritious diet) when compared to those in rural areas. With sufficient income people are also able to improve their access to health and social services, afford quality childcare, and have the time and resources to participate in cultural and health promoting activities.

Improving socio-economic conditions of individuals and communities also helps the performance of the economy as a whole.

A well educated city improves health

Individuals with higher levels of education have better health than people who have not completed high school. Education affects health in part because of its influence on other factors such as income, employment and working conditions. Education also influences health through greater access to and understanding of information regarding health promoting choices and behaviours. It can also increase a person's ability to make the best use of health services.

Early childhood education is one the most cost-effective human capital interventions. Its social and economic benefits include: greater success at school; higher graduation rates; higher employment earning; better health outcomes; less dependency on social assistance; lower rates of crime; and greater government revenues and lower expenditures on health and social services. Availability of child care also contributes to the economy by enabling parents' participation in the labour force.

Equitable and inclusive cities are healthier

Equity and social inclusion help everyone benefit from the opportunities for education, employment, food, housing, and recreation that the city offers and which are necessary for good health. Marginalization of individuals and communities, and systemic

discrimination creates negative experiences and living conditions that contribute to poor health: educational underachievement, crime, mental illness, reduced physical activity and social exclusion.

This unequal distribution of health-damaging experiences is the result of a range of socioeconomic factors that governments can influence. Participation and civic engagement in public policy making processes helps to address this inequality by making sure all voices are heard, solutions meet the needs of all, and all people do their part. Greater equity and social inclusion not only improve the health of those who are at greater risk. They contribute to the overall the prosperity of the city which creates a better environment for all people to reach their maximum human potential including health.

City governments contribute to health and well-being in many ways

Municipal governments build and maintain healthy and prosperous cities through three main roles:

- Development of a vision for the future, formulation of strategic directions and adoption of policies to reach that vision
- Social and urban planning to improve the conditions for daily living and to ensure healthy urban environments, and
- Delivery of programs and services which support health.

The actions of local governments have a direct effect on people's health. They are therefore in a unique leadership position to protect and promote health as described below.

- Urban Planning: Sound and sustainable urban planning is a critical ingredient for creating healthy cities. Land-use planning is one of the principal roles of local governments. It is the process by which a municipality guides the development of the built environment that occurs within its boundaries. The design of a city can shape physical activity and community safety by encouraging or discouraging walking, biking, playing in parks, driving cars or taking public transit.
- Facilitating the movement of people and goods: Cities play an important role in transportation. In addition to planning where roads will be built, they also maintain the transportation network. Cities also have a major role in providing public transit, infrastructure for walking and cycling, and providing access to people with limited mobility.
- **Improving the environment:** Municipalities have a long-standing role in providing water, waste and wastewater services. They also support health by investing in parks, trees and green space, improving air quality and mitigating climate change.
- **Housing:** In 2001, Ontario shifted funding and administration of public and social housing to municipalities. Local governments can help access safe and affordable

housing in different ways: encouraging the preservation of affordable rental stock; providing funding and administration for social housing; owning and operating social housing units; providing services for homeless people to help them get housing; and, coordinating access to and repairing housing for low-income households and people with disabilities.

- **Income and employment:** Municipal governments have a role in creating the socio-economic conditions essential for the health of individuals and communities. Cities can do this in many ways, including facilitating economic development and providing employment services, social supports and financial benefits to the city's most vulnerable individuals and communities.
- **Health and social services:** Municipalities are involved in providing various services that support people and families through life's transitions such as prenatal classes, nutrition programs, child and elder care, and services for newcomers.
- **Recreation:** Municipalities extend their capacity to deliver affordable recreational programming by working in partnership with community groups. Many municipalities provide subsidies to ensure low-income families can benefit from recreational programs.

Generally, a municipal government plays a number of roles which influence health including service provider, investor, leader and champion, regulator, convener and partner.

Making a healthy and prosperous city involves all sectors of society

An inclusive community, a quality environment and a strong economy are needed to create an equitable, liveable, and sustainable city which is healthy. Given the number of factors that influence health, it is possible to achieve optimal health only when all sectors of government and society are involved. One way to ensure a prosperous city is to apply the notion of the Healthy City developed by the World Health Organization (WHO). Born in Toronto in the 1980s, the Healthy City approach challenges local governments to be aware of health issues embedded in all of their policies, programs and services.^{vii} This can be supported through the use of health impact assessment, a way to review policies, plans and projects in diverse sectors using quantitative, qualitative and participatory techniques to identify ways to enhance positive health impacts and minimize the negative ones.

The creation of a healthy city is a process that increases health awareness among all decision-makers enables collaboration between sectors, encourages the community's participation and ensures that public policy protects and promotes health to create a healthy, liveable and prosperous city. The Healthy City approach recognizes several principles to create cities that are healthy for all citizens: collaboration between the city services as well as other actors in society (such as other government institutions, the private sector, and community or other civil society organisations); engagement of all

citizens by bringing together different stakeholders and increasing participation in decision-making; and accountability to all stakeholders through an open process of governance.

CONCLUSIONS

Urban environments influence every aspect of health and well-being of city dwellers, including what we eat, our income and employment, where we live, the quality of the air we breathe, the water we drink, access to health services, and the risks to which we are exposed. A healthy and prosperous city provides a good economic, physical and social environment in which to live, learn, work and play. Health and prosperity are completely interdependent.

Municipal governments have a key role in creating the conditions for a healthy city as they are involved in many areas that have impacts on health and equity, such as city planning, economic development, housing, parks, forestry and recreation, and transportation. A healthy city is the result of integrated decisions made across the City's agencies, boards, commissions, corporations and divisions government that consider the needs of current and future generations. The three main ways in which local governments contribute to the creation of a healthy and prosperous city are as follows: the creation of a vision and adoption of strategic policy; urban and social planning; and program delivery.

Good health is a key ingredient of a vibrant, liveable and prosperous city that meets the social and economic priorities of the community. It is therefore important to consider health when the City makes policy and program decisions.

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SIGNATURE

Dr. David McKeown Medical Officer of Health

ATTACHMENT

Healthy Toronto by Design (October 2011)

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