



# IMPROVING HEALTH BY DESIGN IN THE GREATER TORONTO-HAMILTON AREA

A REPORT OF MEDICAL OFFICERS OF HEALTH IN  
THE GTHA\*

- \*GTHA:
- HAMILTON
  - PEEL
  - SIMCOE-MUSKOKA
  - TORONTO

HIGHLIGHTS REPORT  
MAY 2014



# WE HAVE A BIG PROBLEM.

How we live and move impacts our health. Over a period of decades, we have removed physical activity from people’s lives including designing communities that require the use of cars. Currently, obesity and physical inactivity cost the Greater Toronto-Hamilton Area (GTHA) \$4 billion a year. Diabetes-related medical costs attributable to inactivity are over \$550 million each year with over 12,500 new cases of diabetes occurring annually due to inactivity. Building our communities and lives with the motor vehicle at their centre have not only contributed to inactivity, but have resulted in the longest commute times in Canada with an annual economic cost of \$6 billion in lost productivity. Furthermore, traffic-related air pollution is responsible for over 850 premature deaths a year and thousands of hospitalizations.



Over the next 20 years, the population in the GTHA is projected to grow by another 2.2 million people. This is equivalent to adding the populations of the cities of Montreal and Vancouver into the GTHA. How we accommodate this population increase has significant implications for the health and well-being of the public. Without significant action, physical inactivity will continue to add thousands of cases of diabetes and other chronic diseases, commute times will continue to worsen, and traffic-related air pollution and greenhouse gas emissions will increase.

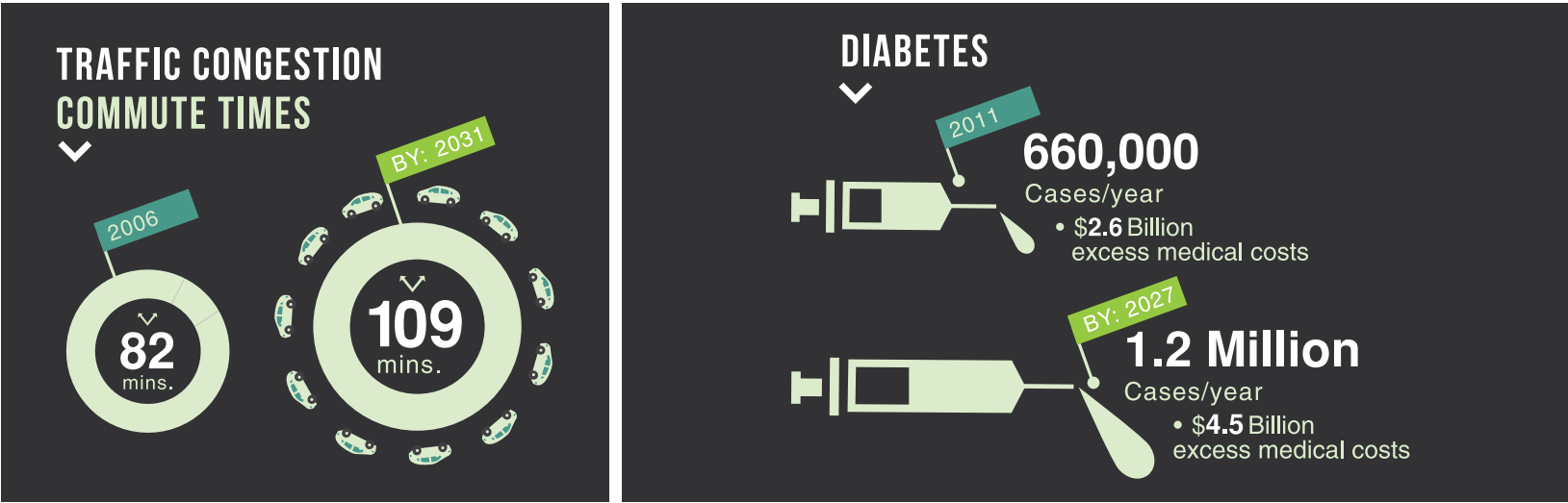
As Medical Officers of Health in the GTHA, we are concerned with, and responsible for, the health of the public. We are providing this call to action to clearly state our perspective that, to protect and promote the health of the public, we must achieve a shift in how we plan communities and the movement of people to increase the use of public transit, and, walking and cycling (active transportation). We need to build physical activity back into people’s lives by making the healthy choice the easy choice.

Supporting greater activity that is woven into daily life has direct implications for how we plan communities. While community design is the primary domain of land use and transportation planners, public health has a responsibility to work with municipal and other partners to create built environments that better support health. Whether from the perspective of health outcomes, traffic congestion, economic productivity, environmental sustainability, municipal infrastructure costs, or shifts in public preferences, there is a convergence of perspectives favouring the achievement of healthy, complete communities that support greater public transit use and active transportation. We therefore support the vision in existing plans,



*Places to Grow* and *The Big Move*, to improve land use and transportation in the GTHA. We estimate that the increase in physical activity and reduction in air pollution resulting from implementation of *The Big Move*, with modest increases in active transportation, would prevent, each year, 338 premature deaths and over 1,000 cases of diabetes. These and other positive health impacts of improvements in the design of our communities provide an additional rationale and urgency for existing proposed solutions to establish healthy, complete communities. Overall, the investment in the public good to achieve greater public transit use and active transportation through healthy, complete communities is greatly outweighed by the positive benefits. However, considering the rate of population growth and chronic disease trends, the current pace of incremental change in land use and transportation planning is insufficient to significantly impact the health of the public.

The scope of the required change is large. The land use and transportation-related laws, policies, processes, incentives and attitudes that favour car dependency were established over a period of several decades. However, the goal is not to create car-free developments, but rather, it is to build communities with a diverse transport system that provides various options including good walking, cycling, public transit, and automobiles. There is no single policy, which if changed, will provide the solution to the current challenge. There are however, a number of opportunities to strengthen current action.



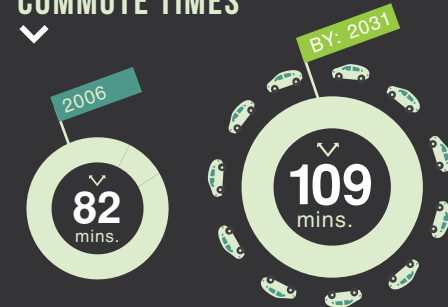
# IMPROVING HEALTH BY DESIGN IN THE GREATER TORONTO-HAMILTON AREA

## 1 THE SITUATION

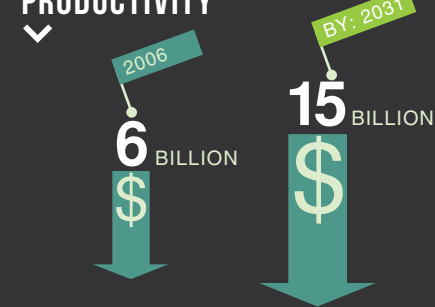
WE HAVE A BIG PROBLEM.

The negative impacts of our built environment are already being felt in multiple ways. With an expected increase of an additional 2.2 million people in the GTHA, unless we change how we design communities, these negative impacts will become even worse.

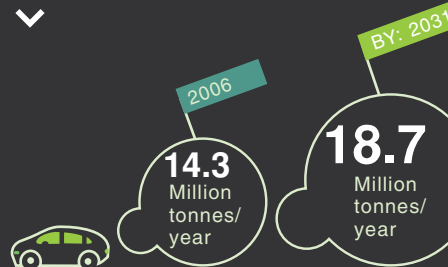
### TRAFFIC CONGESTION COMMUTE TIMES



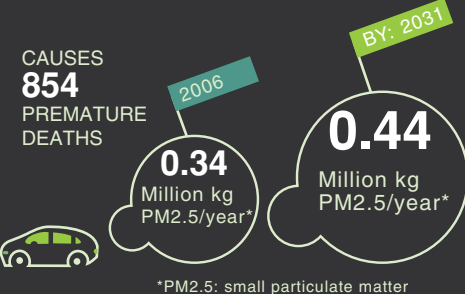
### ECONOMIC COST OF LOST PRODUCTIVITY



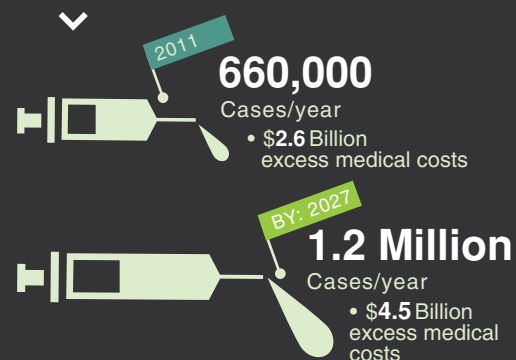
### TOTAL TRANSPORTATION GREENHOUSE GAS EMISSIONS



### TRAFFIC RELATED AIR POLLUTION



### DIABETES



INACTIVITY & OBESITY → \$4 Billion/year  
Direct & indirect costs

INACTIVITY → 12,500  
New cases of Diabetes/year

## 2 CHANGE

INVESTMENT.

Implementing The Big Move and Healthy Complete Communities provides a path to address the problems we face. Achieving the needed improvements in our built environment will require sustained investment and changes in how we design communities.

### THE BIG MOVE

The Big Move is an existing plan for improving transportation and transit in the GTHA.



### HEALTHY COMPLETE COMMUNITIES

Healthy complete communities support walking, cycling and transit use providing convenient access to an appropriate mix of jobs, local services, and a full range of housing and community infrastructure.

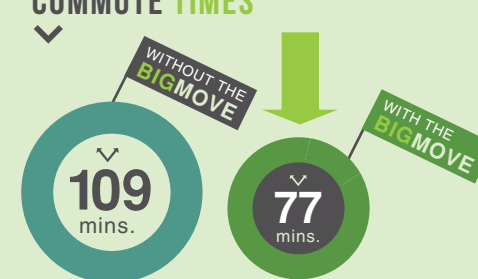


## 3 THE FUTURE

THE BENEFITS.

There are multiple benefits that would be realized with achieving healthy complete communities with greater walking, cycling and use of public transit.

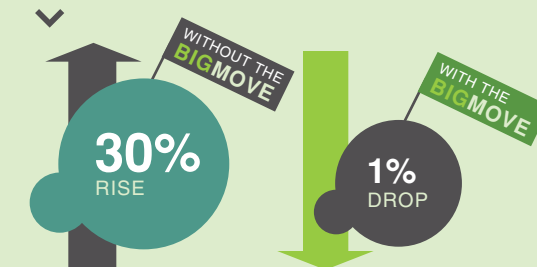
### TRAFFIC CONGESTION COMMUTE TIMES



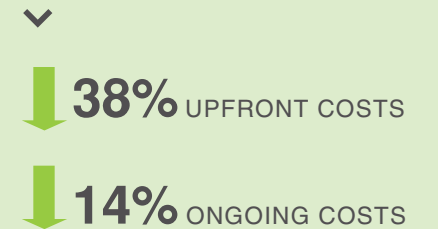
### NET ECONOMIC BENEFIT



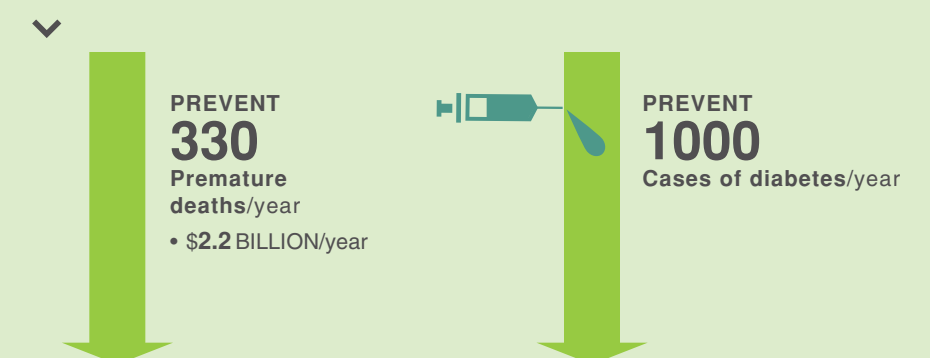
### TOTAL TRANSPORTATION GREENHOUSE GAS EMISSIONS



### REDUCED MUNICIPAL INFRASTRUCTURE COSTS



### INCREASED PHYSICAL ACTIVITY & REDUCED AIR POLLUTION





# THE SOLUTION

There is no single policy which, if changed, would provide the solution to the current challenge. There are however, a number of opportunities to strengthen current actions.

## FUND *THE BIG MOVE*

The GTHA cannot sustainably absorb another 2.2 million people without considerable change in how we plan communities and transportation. A plan already exists to significantly expand public transit infrastructure. It needs to be funded and implemented.

## STRENGTHEN PROVINCIAL POLICIES TO SUPPORT GREATER ACTIVE TRANSPORTATION AND PUBLIC TRANSIT USE

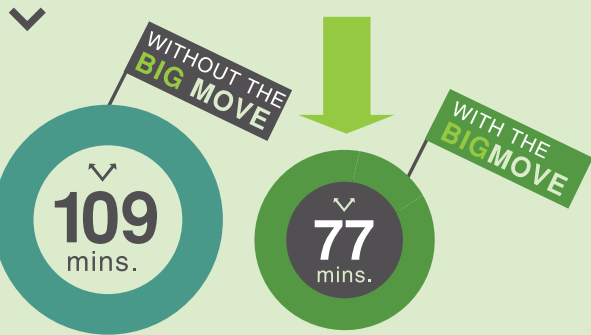
There needs to be a stronger connection between the high-level vision expressed in provincial policies and the local development of communities. There are many provincial transportation and land use planning policies that could better support the achievement of healthy, complete communities involving more walking, cycling and public transit use.

## NORMALIZE THE PLANNING FOR ACTIVE TRANSPORTATION AND PUBLIC TRANSIT USE BY MUNICIPALITIES

Planning for walking, cycling and public transit use should not be an exception to be accommodated as an afterthought or only for recreational purposes. Instead, planning for active transportation and public transit use needs to become as routine as planning for water, sewers, roads and utilities.



### TRAFFIC CONGESTION COMMUTE **TIMES**



### NET ECONOMIC **BENEFIT**

