

Your Health Connection



**simcoe
muskoka**
DISTRICT HEALTH UNIT



Our Right to Walk: Public Health and the Built Environment

October 2008

Charles Gardner

Medical Officer of Health

Presentation Content

The origins of public health – it was all about community design

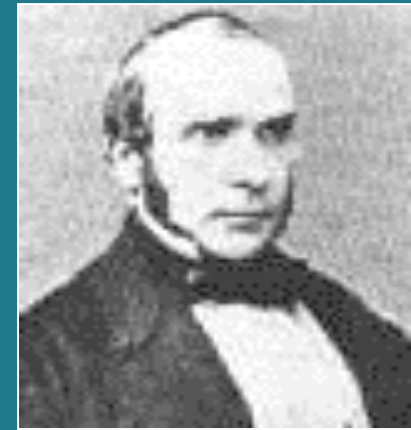
New public health challenges

Walking (and cycling) is beautiful -
Rediscovering the built environment



The Roots of the Public Health Movement

- ◆ Beginnings of public sanitation movement in the 19th century
 - ◆ Municipal water sanitation and sewage systems
 - ◆ Improving incomes, housing, nutrition, working conditions
 - ◆ Infection control practices:
 - ◆ Water and food safety
 - ◆ Health care
 - ◆ Vaccination (smallpox)



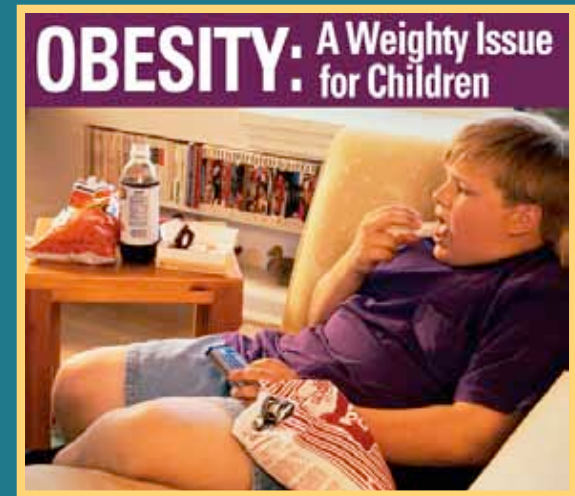
Dr. John Snow, cholera and the Broad St. pump



New Era – New Health (and Environmental, Economic and Quality of Life) Issues



- ◆ Increasing obesity
- ◆ Air quality
- ◆ Motor vehicle collisions
- ◆ Green space depletion
- ◆ Increasing commuting / loss of leisure time
- ◆ Climate change
- ◆ Peak oil – energy security



Some Health Impacts Related to the Built Environment

Precursors:

- ◆ Ability to be physically active
- ◆ Air quality
- ◆ Access to good nutrition
- ◆ Access to safe / secure water



Biomedical outcomes:

- ◆ Obesity
- ◆ Blood pressure
- ◆ Injuries
- ◆ Mental health
- ◆ Mortality



Some Related Broader Determinants of Health

- ◆ Social determinants
 - ◆ civic society, social capital, poverty
- ◆ Security
- ◆ Carbon emissions

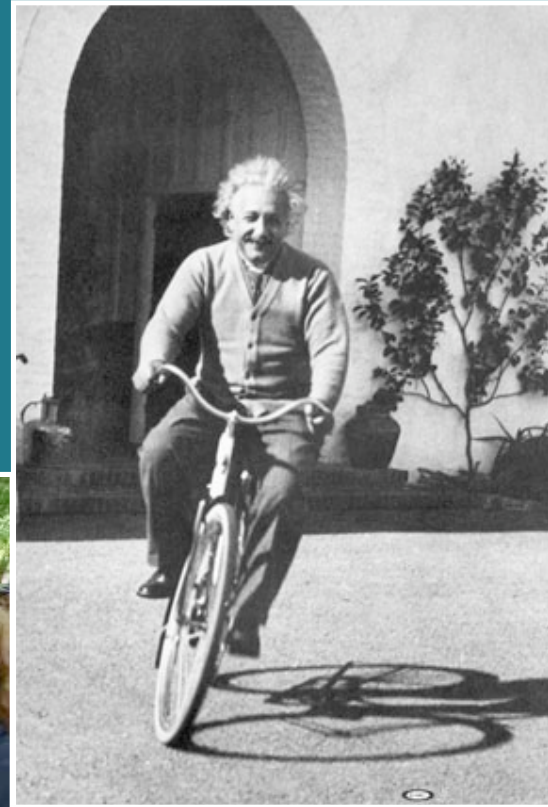


Many have made a connection between the built environment and health

- ◆ The WHO – European transportation and physical activity collaboration
- ◆ Smart Growth movement
- ◆ The OMA – obesity and air quality reports
- ◆ Ontario College of Family Physicians report on Urban Sprawl
- ◆ Chief MOH – Healthy Weights Healthy Lives, 2004
- ◆ Ontario Professional Planners Institute
- ◆ The Province of Ontario – Places to Grow
- ◆ Ministry of Health Promotion – Healthy Eating Active Living (HEAL) Plan
- ◆ Public Health – OPHS



Some Supporters of Active Transportation



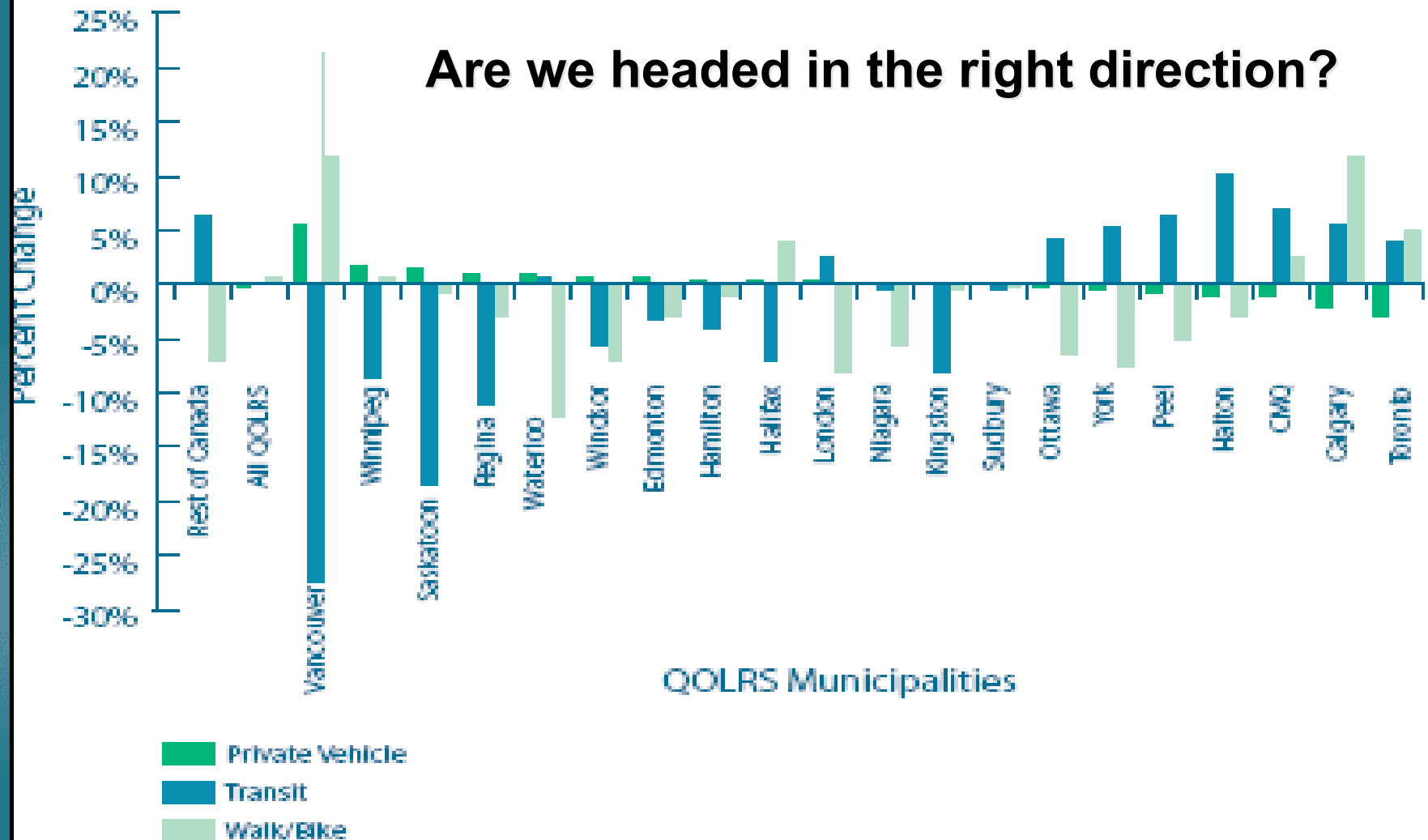
How far do we have to go?

Chart 9 Mode of Transportation to/from Work
Commuting modal split to/from work, all QOLRS municipalities, 2001



Source - Statistics Canada, 1996, 2001 Census

Chart 10 Change in Commuter Modal Split
 % Change in proportion of population using private vehicle, transit, walk/bike – ranked by private vehicle, all QOLRS municipalities – 1996-2001



Source: Statistics Canada, 1996, 2001 Census

Inspiring examples from around the world:

- ◆ Paris, Bogota, Stapleton Co, Copenhagen, West Bloor Street Village Toronto, Ottawa
- ◆ Good things happening in Simcoe and Muskoka communities – Healthy Communities Network (Wasaga Beach), Huronia Trails and Greenways, Muskoka trails



Making a Difference: Active Transportation



Copenhagen is well known as a cycling city. Every day, cyclists travel more than 1 million kilometres in the city, using a sophisticated and safe set of cycle tracks and lanes throughout the city (4).



Friday-night skaters in Copenhagen

From: Promoting physical activity and active living in urban environments. The role of local governments. Edwards, P, Tsouros, A, World Health Organization 2006

Making a Difference: Walkable Spaces



Sparks Street, Ottawa

Why are we concerned in Simcoe Muskoka? Why Now?

- ◆ Simcoe Muskoka has a high incidence of preventable disease.
- ◆ Simcoe Muskoka is rapidly growing and developing.
- ◆ How this growth and development happens will dramatically impact on the health of some 500,000 (and more to come) people.
- ◆ There are opportunities to influence how this growth happens.

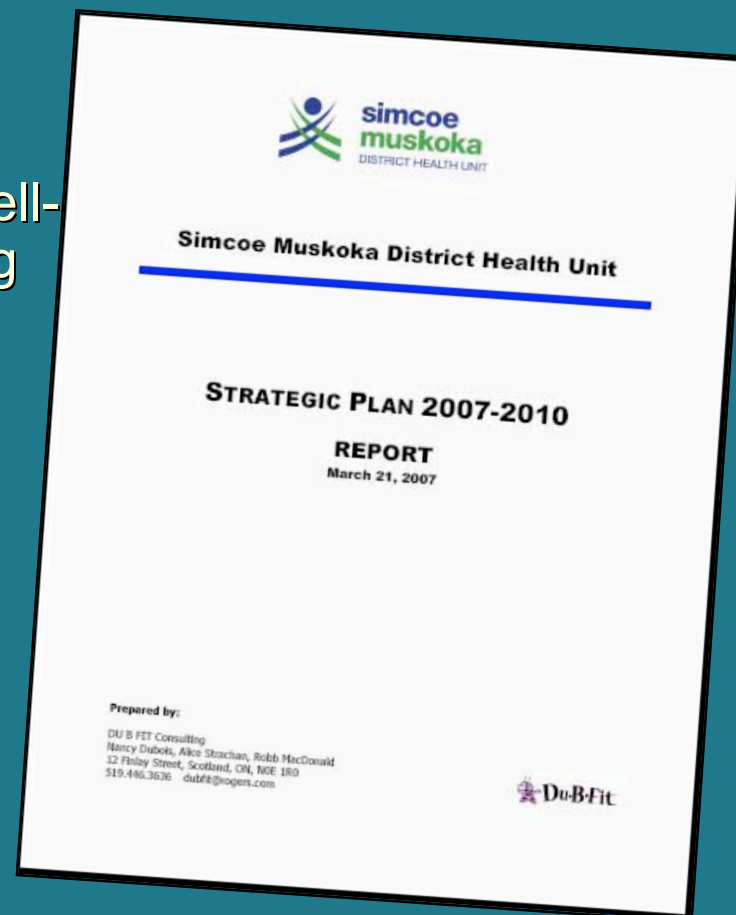


Simcoe Muskoka District Health Unit Strategic Priority #1 Program Outcomes

Emerging Public Health Directions:

1.1 Explored options, identified resources and determined a clear role, which is well-communicated in the following emerging areas of public health:

- The Built Environment and Health
- Social and Economic Determinants of Health
- Environmental Health Hazards
- Mental Health Promotion



Our Modest Proposal

The Impact of the Built Environment on the Health of the Population: A Review of the Review Literature

November 2007

Authors:

Megan Williams, Health Promotion Specialist, Corporate Service,
Myrna Wright, Health Promotion Specialist, Healthy Living Service,
Simcoe Muskoka District Health Unit



For questions about this report contact:

Megan Williams at (705) 721-7520 x 7328

Myrna Wright at (705) 721-7520 x 7360

Recommendations to Address the Health Impacts

- ◆ Make it “walkable” (and “cyclable”)
- ◆ Density – enables the other factors
 - ◆ Set and meet density targets for population and employment
- ◆ Design –
 - ◆ Consider health impacts of community design
 - ◆ Design “Complete Communities”
 - ◆ Centres – vibrant downtown area and sub-centres
 - ◆ Focus on walkability and active transportation with pedestrian amenities (trails, sidewalks, bike lanes, trees, benches)
 - ◆ Reduce Automobile Dependency
 - ◆ Grid – short distances with many linkages vs loops & lollipops

Recommendations to Address the Health Impacts

- ◆ Design – continued
 - ◆ Design with safety in mind (vehicle, pedestrian and cycling)
 - ◆ Design spaces for social interaction and wellbeing
 - ◆ Adequate Food Supply
 - ◆ Ensure Water Quality
 - ◆ Ensure Air Quality

Determining Our Role

- ◆ Participation in Simcoe County Growth Process
 - ◆ MOH Membership on Health and Lifestyles Sub-Committee
 - ◆ Simcoe County Official Plan, and Master Transportation Plan
- ◆ Collaboration with other health units/partners (aPHa, OPHA, OPPI, municipalities, etc.)
 - ◆ World Town Planning Day 2007
 - ◆ aPHa conferences, 2007, 2008





Future Activities

- ◆ Begin implementation of operational plan
- ◆ Build processes and relationships – locally, regionally and provincially
- ◆ Integrate and sustain BHC activities into everyday work of agency
- ◆ Plan for future opportunities

Recent examples of public health work in Ontario to foster healthy community design

- ◆ Education and awareness raising within the public health community
 - ◆ AIPHa conference Feb 2007 and June 2008,
 - ◆ ASPHIO conference May 2008
- ◆ Provincial Public Health Partnerships
 - ◆ alPHA and the Ontario Professional Planners Institute
- ◆ Regional / provincial partnerships
 - ◆ GTA Clean Air Council – Peel, SM, TO
 - ◆ Ontario Healthy Communities Coalition – Peel, SM
- ◆ Healthy design modeling / assessment tool
 - ◆ Peel (with Dr. Larry Frank and Dr. Jim Dunn), Grey Bruce, Haliburton
- ◆ Clean Air Strategies / Plans (including anti-idling)
 - ◆ Peel, TO, Waterloo, Halton
- ◆ Active Transportation Plans / Bicycle Plans / Walking Strategies
 - ◆ Peel, TO, York

More examples of public health work in Ontario to foster healthy community design

- ◆ Green Building Strategies
 - ◆ TO
- ◆ Health Impact Assessment Frameworks / Reports
 - ◆ TO, Waterloo, York
- ◆ Environmental Assessments
 - ◆ York
- ◆ Community Energy Plan
 - ◆ Waterloo, York
- ◆ Sustainability Strategies
 - ◆ York
- ◆ Climate Change Mitigation and Adaptation Plans
 - ◆ TO, York
- ◆ Transit Emissions Reduction / Smart Commute Plans
 - ◆ York

Final Thoughts

- ◆ We were born to move ourselves – it is our right, and for us to assert.
- ◆ The physical and built environment impacts on the population's health in many ways. Much of this relates to supports and barriers to walking.
- ◆ Public health units are re-learning what we have to offer community partners to improve health through community design.





Thank you