



HEALTHY COMMUNITY DESIGN

Policy Statements for Official Plans

April 2014

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PREFACE

This document provides a series of suggested policy statements and implementation activities related to land use, community design and public health. The Simcoe Muskoka District Health Unit (SMDHU) offers these suggestions for policy direction in the hope that municipalities adopt them as part of their Official Plans, activities and programs to improve the health of their residents.

Given the diversity and the mix of rural and urban communities within the District of Muskoka and County of Simcoe, these suggestions have been developed to be as versatile as possible. The health unit suggests that incorporating the content of this document should be part of well defined strategies and community engagement processes so that it can fit the physical and social context of the community.

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Ontario's long-term prosperity, environmental health and social well-being depend on wisely managing change and promoting efficient land use and development patterns. Efficient land use and development patterns support sustainability by promoting strong, livable, healthy and resilient communities, protecting the environment and public health and safety, and facilitating economic growth.

(Provincial Policy Statement 2014, Part V, 1.0 Building Strong Healthy Communities)

This Plan is about building complete communities, whether urban or rural. These are communities that are well designed, offer transportation choices, accommodate people at all stages of life and have the right mix of housing, a good range of jobs, and easy access to stores and services to meet daily needs.

(Places to Grow - Growth Plan for the Greater Golden Horseshoe, 2006, Office Consolidation June 2013, p.13)

INTRODUCTION

Municipalities in Ontario face many challenges in planning for growth and development, including: working with changing population projections; developing land for a variety of uses; building to suit the needs of the population; protecting the environment; and planning for economic prosperity and a sustainable future. At the same time, municipalities must ensure their planning decisions protect the health and well-being of their residents.

Land use decisions and the way communities are designed have multiple impacts on people's physical health as well as on their mental health and well-being. The physical form of a community affects the quality of the air they breathe, the types of physical activity choices they make and how they interact with their neighbours. It defines the character of a community, impacts real estate values and tax revenues, impacts the cost of providing services, and influences the community's ability to attract business and residents.

Emerging evidence also demonstrates that the built environment can have even greater health impacts on vulnerable populations including people with lower socioeconomic status, children, youth, the elderly, and people living with disabilities. These differences in health impacts are known as health inequities and they can result from unequal conditions or access to places to live, work, learn, shop for healthy foods, access safe places to play, or access transit or active transportation networks. The built environment affects the overall health of the community in the following ways:

- **Environment** – Community design and transportation planning can impact the quality of our air and water. Vehicle use and distances travelled all influence the amount of vehicle emissions, which are prime sources of air pollution affecting air quality and health. Lower income neighbourhoods may be disproportionately exposed to higher levels of air pollution which can lead to further health impacts on this segment of the population. The design and layout of the built environment impacts water supplies and watersheds and should ensure enough greenspace to allow for a natural and safe hydrological system and ecosystem preservation. Community design also impacts the amount of land taken out of agricultural uses, or its natural state, both of which influence the health of residents.
- **Injury and Safety** – The incidence of fatal and non-fatal injuries as a result of traffic crashes is closely related to vehicle kilometers traveled, automobile speed, traffic volumes, and the design of roadway networks, particularly where vehicles interact with non-motorized transportation modes. Research links these characteristics of travel to the distribution of land uses. Alcohol-related harm is also influenced by the built environment and alcohol outlet density.
- **Physical Activity** – The built environment can either facilitate or constrain the ability of residents to be physically active for either utilitarian or recreational purposes. For example, neighbourhoods that are designed for automobile dependency reduce the viability of active transportation, particularly for children, youth, seniors and others who may be economically or physically disadvantaged, thereby decreasing the overall physical activity levels of the community, and thus its well-being. This may

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contribute to increased rates of heart disease, stroke, diabetes, and some cancers in the population, as well as other negative impacts on mental health and well-being.

- Sun Safety – Skin cancer from exposure to ultraviolet radiation is increasing. Communities that are designed with sun safety in mind and that provide residents with natural and manmade structures for shelter from the sun can decrease health risks associated with sun exposure.
- Food Access – Access to safe, nutritious, affordable and personally acceptable food is considered a key component of health equity and contributes to residents’ overall health, lowering their risk of many chronic diseases. Land use planning can have a profound impact on whether or not residents have ready access to sources of safe and healthy foods. Along with access, land use planning must also consider the protection and conservation of local food production capacity for the long-term sustainability of the local food system.
- Social Cohesion and Well-being – Certain characteristics of the built environment such as a range of housing types, proximity to neighbours and the availability of places to gather can influence how residents feel about themselves and their connection to the community. These characteristics can also have a profound impact on the cohesiveness of a community and the creation of social capital. People’s mental health and overall capacity to “age in place” are both health considerations that are influenced by the level of social cohesion in a community.

Over the past decade, several key policy documents related to land use, development and growth planning in Ontario have come into effect. Two of these — the Provincial Policy Statement (2014) and the Places to Grow - Growth Plan for the Greater Golden Horseshoe (2006, amended 2012), provide clear direction on the creation of healthy and complete communities. The underlying principles within these policy documents are supportive of a municipal vision that addresses the importance of the health of the public.



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These provincial policies are also closely aligned with the goals of the Simcoe Muskoka District Health Unit's Building Healthy Communities initiative. Under this initiative, the health unit is working with partners to:

- 1 Act as a catalyst for change through programs, people and partnerships to achieve a shared vision of a built environment that promotes and protects health.
- 2 Provide strong public health leadership and expert health advice to key stakeholders to influence the design of new and existing communities to be sustainable and supportive of the achievement and maintenance of optimal health.

These goals provided the impetus for the creation of this policy guide in 2010. The purpose of this guide was to provide municipal elected officials, planners, engineers, and other stakeholders and partners in Simcoe Muskoka with suggestions for Official Plan policies and implementation activities to assist municipalities in creating healthy and complete communities while also meeting the provincial policy expectations. This policy guide was updated in 2014 to reflect changes in knowledge and practice in the area of policy statements for Official Plans. The guide has five sections that are based on key health issues impacted by the built environment: Environment; Injury and Safety; Physical Activity and Sun Safety; Food Access; and Social Cohesion and Well-Being. Each section contains an overall health related goal and rationale, a number of related objectives, suggested Official Plan policy statements to help achieve the objectives and a variety of suggested activities for implementation of the policies. Many of the concepts and principles within these sections overlap and it is recommended that municipalities review each section closely for supportive and inter-related policy suggestions.

There are many other procedural, organizational structure, and regulatory mechanisms available to municipalities that can be used to support the Official Plan recommendations defined here. Some of the implementation activities described for each of the sections fall between Official Plan policies and associated work programs. These have been included because of the importance for municipalities to make progress and to see meaningful change in fulfilling the direction and intent of the Official Plan policies. The intent has been to provide suggestions that are closely aligned to typical land use planning activities seen in various municipalities. It will be up to each municipality to consider these suggestions and determine the most effective approach to including them in Official Plans and other municipal planning documents and strategies. Municipalities are encouraged to use the concepts within this document and to freely adapt, amend or revise the wording to suit their particular needs and circumstances. This is by no means a complete list of potential policies and implementation activities and should therefore be viewed as a starting point.