Healthy Canada by Design

Peel Public Health Node

CLASP Knowledge Exchange Colloquium: Vancouver, BC
November 24, 2010
The Region of Peel
The Region of Peel

- Rapid Growth – 20,000 people each year
- Uneven Growth – Brampton, Mississauga
- Unique Challenges
  - greenfield (Brampton)
  - intensification (Mississauga)
  - rural (Caledon)

Population growth from 2001-2006 in these areas was 51% to 2383%

- More vehicle trips
- Increasing single occupant vehicle trips
- Increasing physical inactivity levels
Figure DM0: Diabetes Mellitus Prevalence Rate† by Year, Region of Peel and Ontario, 1995/1996 to 2004/2005

<table>
<thead>
<tr>
<th>Year</th>
<th>Peel</th>
<th>Ontario</th>
</tr>
</thead>
<tbody>
<tr>
<td>1995/96</td>
<td>5.9</td>
<td>5.4</td>
</tr>
<tr>
<td>1996/97</td>
<td>6.3</td>
<td>5.7</td>
</tr>
<tr>
<td>1997/98</td>
<td>6.6</td>
<td>6.0</td>
</tr>
<tr>
<td>1998/99</td>
<td>6.8</td>
<td>6.3</td>
</tr>
<tr>
<td>1999/00</td>
<td>7.2</td>
<td>6.6</td>
</tr>
<tr>
<td>2000/01</td>
<td>7.5</td>
<td>6.9</td>
</tr>
<tr>
<td>2001/02</td>
<td>8.0</td>
<td>7.3</td>
</tr>
<tr>
<td>2002/03</td>
<td>8.4</td>
<td>7.6</td>
</tr>
<tr>
<td>2003/04</td>
<td>8.8</td>
<td>8.0</td>
</tr>
<tr>
<td>2004/05</td>
<td>9.2</td>
<td>8.4</td>
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† Age adjusted prevalence rate

Fiscal Year
The Region of Peel

History of Built Environments

Council Direction:

- Comment on development applications
- Develop planning policies for active living
- Advocate for provincial policy

2005

- Develop policy for Regional Official Plan
- Develop policy for Municipal Secondary Plans
- Advocate for provincial policy

2008
The Region of Peel

Healthy Built Environment Initiatives before CLASP

<p>| | |</p>
<table>
<thead>
<tr>
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<tbody>
<tr>
<td>1.</td>
<td>Literature Review</td>
</tr>
<tr>
<td>2.</td>
<td>Conceptual Models on relationship between health and planning</td>
</tr>
<tr>
<td>3.</td>
<td>Peel Health position statement</td>
</tr>
<tr>
<td>4.</td>
<td>Active Transportation Master Plan Steering Committee</td>
</tr>
<tr>
<td>5.</td>
<td>Healthy policy development for Regional and Municipal Official Plan policies</td>
</tr>
<tr>
<td>6.</td>
<td><strong>Comments on Municipal Block and Secondary plans</strong></td>
</tr>
</tbody>
</table>
The Region of Peel

Towards consistent, evidence-informed comments

Narrative, mostly qualitative comments

Evidence-based, mostly quantitative standards (the Health Index)

Application of standards to sites → adjustments to Index based on feasibility

Ongoing refinement (based on evaluation, emerging evidence, etc.)
The Region of Peel

Peel Healthy Development Index

Purpose:
To evaluate development applications in a consistent manner and provide health-based rationale to inform planning decisions.

Process:
1. Review of academic and grey literature
2. Strength of evidence analysis
3. Extensive stakeholder consultation
4. Policy gap analysis
5. Geographic Information Systems (GIS)-based validation analyses
Output:
Index consisting of seven built environment elements:
  – Density
  – Proximity to services and transit
  – Land use mix
  – Street connectivity
  – Road network and sidewalk characteristics
  – Parking
  – Aesthetics and human scale

*Elements* are further broken down into *measures*, many of which are quantitative.
Pilot Testing and Refinement

- **Pilot Test** the targets and ranges in the Healthy Development Index
  - 3 “new-urbanism-type” secondary plan sites
  - 1 “traditional suburb” site in Peel.

- **Refine/calibrate** the Index to reflect each municipal context

- Develop **an implementation plan** unique to each municipal context to integrate the targets and ranges in the Healthy Development Index into existing development approval process.
Through HCBD Grant

Peel Healthy Development Index

**Project Consultants: Gladki Planning Associates**

- **Project Kick-off:** Sept 2010
- **Background Review:** Oct-Nov 2010
- **Methodology for Situational Assessment:** Nov 2010
- **Advisory Committee Meetings:** Ongoing
- **Situational Assessment:** Dec-Jan 2011
- **Key Informant Interviews:** Ongoing
- **Stakeholder Consultation Workshop:** March 2011
- **Recommendations Report:** May 2011
- **Implementation Strategy:** June-July 2011
# Stakeholders

<table>
<thead>
<tr>
<th>STAKEHOLDER</th>
<th>RELATIONSHIP</th>
</tr>
</thead>
<tbody>
<tr>
<td>Regional Planning Department (Transportation, Development, Policy Planning)</td>
<td>Project Partners and reps for consultation/advisory committee</td>
</tr>
<tr>
<td>Municipal Planning Departments</td>
<td>Reps for consultation/ advisory committee</td>
</tr>
<tr>
<td>Developers</td>
<td>Reps for consultation</td>
</tr>
<tr>
<td>Planning Consulting Firms</td>
<td>Project consultants (TPP &amp; GPA) &amp; reps for consultation</td>
</tr>
<tr>
<td>Health Researchers</td>
<td>CRICH: Developed evidence-based HDI</td>
</tr>
</tbody>
</table>
Lessons Learned

Multi-sectoral Collaboration

1. Extremely **iterative** process; need communication at all levels
2. Directions may need to change based on **opportunity windows**
3. Continuously **revisit rationale** and overall goals
4. Build **national capacity/interest** to generate **local change**
5. Balance multiple **divergent mandates**
Lessons Learned

Multi-sectoral Collaboration

Partnership building is a two-way street:
Approaching new partners with what you can do for them, in addition to what you want them to do for you. For instance,

- **Statements of support** for policy or site-specific changes (such as dedicated cycling lanes)
- **Speakers** for presentations (such as the MOH)
- **Staff** to participate on workgroups for reviews
- **Funding** for any studies needed during reviews
Policy Development

Successes to date
Policy Development

Creating supportive policies at each level of the planning policy hierarchy

- Planning Act
- Provincial Policy Statement
- Provincial Plans (e.g. P2G)
- Regional Official Plan
- Local Official Plan
- Secondary Plan
- Block Plan
- Plan of Subdivision
- Site Plan
- Zoning bylaw

MACRO

MICRO
Policy Development

Comments to inform 5-year PPS review
Policy Development

Health-promoting Official Plan policies:
ROPA 24, ROPA 25, Caledon OPA 226, Mississauga Draft OP

Zoning bylaw
<table>
<thead>
<tr>
<th>Document</th>
<th>Status</th>
<th>Policy #</th>
<th>Intent</th>
</tr>
</thead>
<tbody>
<tr>
<td>Peel Regional Official Plan Amendment 24</td>
<td>Adopted</td>
<td>7.9.2.9</td>
<td>The Region will prepare an assessment tool to evaluate the public health impacts of development, jointly with the area municipalities</td>
</tr>
<tr>
<td></td>
<td></td>
<td>7.9.2.10</td>
<td>The Region will work jointly with the area municipalities to raise public awareness of the health impacts related to planning through public and private partnerships</td>
</tr>
<tr>
<td>Peel Regional Official Plan Amendment 25</td>
<td>Adopted</td>
<td>7.3.6.2.2</td>
<td>The Region may require health impact studies as part of a complete development application to amend the Regional Official Plan</td>
</tr>
<tr>
<td></td>
<td></td>
<td>7.9.2.3</td>
<td>The Region may develop public health indicators to analyze the effectiveness of Official Plan policies and serve as a basis for policy adjustments</td>
</tr>
<tr>
<td>Caledon Official Plan Amendment 226</td>
<td>Approved</td>
<td>4.1.10.3.2</td>
<td>The Town will participate jointly with the Region of Peel and area municipalities in the preparation of an assessment tool for evaluating the public health impacts of development proposals</td>
</tr>
<tr>
<td></td>
<td></td>
<td>4.1.10.3.3</td>
<td>The Town will work jointly with the Region of Peel and area municipalities to raise awareness of public health issues related to planning</td>
</tr>
<tr>
<td>Mississauga draft Official Plan</td>
<td>Draft</td>
<td>19.3.5</td>
<td>The City may require health impact studies as part of a complete development application</td>
</tr>
<tr>
<td></td>
<td></td>
<td>19.3.7</td>
<td>The City requires all development applications to have regard for public health</td>
</tr>
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</table>
Policy Development

Provision of health comments for individual development applications on a case-by-case basis
RFP: Framework for a Health Background Studies requirement as part of a complete application to amend the Official Plan, amend the Zoning bylaw or to approve a Plan of Subdivision.
Through HCBD Grant

Peel & Toronto Joint Health Background Study

Developing the content and criteria for a health background study to be implemented at the municipal and/or regional levels:

Purpose:
• To develop a framework for municipally-mandated Health Background Studies

• To design the framework to be applicable across a range of different contexts and allow developers to identify and pre-emptively mitigate any potential health hazards associated with their development proposals.
Policy Development

- Planning Act
- Provincial Policy Statement
- Provincial Plans (e.g. P2G)
- Regional Official Plan
- Local Official Plan
- Secondary Plan
- Block Plan
- Plan of Subdivision
- Site Plan

Zoning bylaw

RFP: Test application of Healthy Development Index standards
Successes to date

- Amendments to the Regional and Municipal Official Plans to emphasize links between health and planning.

- Proposed amendments to engineering standards such as road and median width to increase walkability.

- Submission of proposed changes to the Provincial Policy Statement to increase reference to health.

- Submission of proposed additions to the Ministry of Transportation’s Transit Supportive Guidelines to highlight link between transit and health.
Moving forward

Peel Public Health Next Steps

Implementation and evaluation of the Health Background Studies framework and the Healthy Development Index

Market research on neighbourhood preferences of Peel residents

Knowledge Translation activities tied to the national CLASP initiative

Ongoing policy development and creation of policy supports
Questions?

Peel Public Health Node

http://www.peelregion.ca/health/urban