

MAKING THE CONNECTIONS OUR CITY, OUR SOCIETY, OUR HEALTH

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The Wellesley Institute engages in research, policy and community mobilization to advance population health. To find out more about who we are and what we do, please visit: www.wellelsleyinstitute.com

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Making the Connections Contributors

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Far too often, we don't consider our health until we're talking to a doctor or are in the emergency room. But health is about more than doctors, drugs, and hospitals. Our health isn't only about health care.

Our health and well-being are affected by the elements of our day-to-day lives like our job, where we live, and where we play and hang out: these are called the **social determinants of health**. These are the causes of the causes of poor health, and underlie health inequalities.

Ask yourself:



As you read through these pages, think about how all these social determinants of health are interconnected, and how they collectively influence our health. Also, think about some of the other factors that play an important role in our health – like gender, ethnicity, racism, Aboriginal status, where you were born, or disability.

You may be surprised by some of the connections.

We'll also introduce you to **systems thinking**. This is a way of showing how things that seem unrelated are actually part of a larger, connected system. We'll show you how improving access to education or good housing can affect the health of Torontonians now and in the future.

We ask you to think about how making changes to social determinants of health can make Toronto a healthier city. What role does the city play? How can we make positive changes in our communities to improve the health of Torontonians?

Make the connections to your own community; where do you see opportunities to improve health by improving social determinants?

When you're finished, take a moment to share your comments and ideas with us.



MAKING THE CONNECTIONS: SYSTEMS THINKING Often, we only see one piece of the puzzle. To solve it, we need to have an understanding of the picture as a whole. • Wellesley Institute, 2012. © Wellesley Institute, 2012. www.wellesleyinstitute.com

WHAT IS "SYSTEMS THINKING"?

A system is a set of interacting and interdependent elements that function as whole, whether it be your neighbourhood or an entire society.

Systems thinking argues that in order to understand and change a situation (for example, poor health), we can't address the causes in isolation. To understand and address complexity, we need to see beyond the details of individual trees to the forest as a whole.

Systems thinking is a way of viewing and understanding complex problems holistically and provides us with tools to help us conceptualize, learn, and address complex problems.



Analyzing a situation/problem from various perspectives

WHAT DOES THIS MEAN

FOR OUR HEALTH? When we think about health, we often break problems down and only focus on individual components. This means that we only

look for isolated causes of poor health and blame a single factor.

However, our health is affected by many factors, like education, income, the built environment, communities, health care, food, and housing. These determinants don't occur separately - they interact and change over time, and so does our health. This means that understanding how social determinants of health affect us is critical.

As our society changes, it's important for us to understand that our social and economic conditions today will shape our futures. We need to learn where there are opportunities to make small changes that have long-lasting, positive impacts.

Investing in improving the ways we live, work, and grow can improve our health today, but it also means that we will have a healthier, more just, and more prosperous tomorrow.

That's why it's so important for us to think in systems when it comes to our city, our society, and our health.

COMPLEX WORLD

can be challenging and often these solutions fail or make the problems they are intended to solve worse.

Why? Because complex problems are:

- Difficult and messy to define and understand

Complex problems are also characterised by interdependencies and feedback relationships. This means that there are many moving parts which are tightly connected, and a change in one part can make a difference in many

As our cities, communities and society grow more dynamic, interconnected and complex, the need for systems thinking to solve our problems

THE WELLESLEY INSTITUTE URBAN HEALTH MODEL

WHAT IS THE WELLESLEY URBAN HEALTH MODEL?

The Wellesley Institute, in partnership with the Lupina Foundation, has adopted a systems thinking approach to the social determinants of health and developed a model for the City of Toronto.

The Wellesley Urban Health Model simulates changes in the health of Torontonians by looking at different social determinants of health. It enables users – such as policy makers, health practitioners, researchers and communities – to plan and test scenarios under different assumptions. The model includes the adult population of Toronto, differentiating people by gender, ethnicity and immigration status.

HOW DOES IT WORK?

The model allows you to simulate different scenarios over a timeframe of 40 years, and demonstrates the impact of policy decisions on poor health outcomes such as chronic disease, disability, and death. You have the ability to take action in five areas:

Income/employment (reducing poverty)
 Social cohesion (enhancing community connections)
 Health care access (improving access to family doctors)

 Housing (improving housing conditions)

 Unhealthy behaviour (reducing unhealthy behaviours like smoking).

The model allows you to see the dynamic and long-term impacts of these actions. For example, you can see what happens to the number of people with chronic illness 10 years from now if we improve people's income, housing, or how connected they feel to their communities. The model shows you how much and how quickly these actions can reduce poor health and death in the City of Toronto.

> The Wellesley Urban Health Model is available for anybody to use.

Scan or go to www.wellesleyinstitute.com and click on "Wellesley Urban Health Model"



HOW CAN IT BE USED?

The Wellesley Institute's goal is to provide a tool that will allow us, our stakeholders, policy-makers, and community partners to ask "what if" questions about policy decisions related to the social determinants of health and to see different courses of action. The model can be used to:

 Advocate for investing in and improving the social determinants of health
 Guide policy development & analysis for the social determinants of health from a systems thinking perspective
 Help build a shared understanding and consensus

 Help build a shared understanding and consensus among diverse groups with differing views on issues
 Facilitate community dialogue about health issues

The Wellesley Institute applies systems thinking tools in various research and knowlege dissemination initiatives including the Wellesley Urban Health Model and in our Making the Connections exhibit.

YOUR HEALTH CARE

Health care is about more than just treating illnesses. It also needs to provide you with care to prevent you from getting sick.

Poor health care can be detrimental to your quality of life and impacts your ability to work and participate in other things that contribute to overall health, like education and community activities.

This is why health care is such an important determinant of health.

WHAT IS HEALTH CARE ACCESS?



Health care access means being able to receive medical care when you need it, whether it's getting an annual physical, getting your child immunized, or treating a health problem.

For health care to be accessible, it must:

Be available where and when you need it

Being able to see a health care provider in your neighbourhood.

Be culturally and linguistically inclusive

Being able to speak to your provider in your own language.

Be there when you need it

Being able to see your family doctor or nurse on the same day.

Be affordable

Having comprehensive public insurance, like the Ontario Health Insurance Program (OHIP).

WHAT IS HEALTH EQUITY?

The goal of health equity strategies is to reduce or eliminate differences in health outcomes that are avoidable, unfair and systematically related to social inequality and other disadvantages.

Approximately **20%** of health care spending in Canada is attributed to poorer health resulting from low income. There are many health inequalities in Ontario. For example:



• The poorest Ontarians are **36%** more likely to experience a heart attack than the richest.



• Over half of the poorest Ontarians didn't see a dentist in the last 12 months. Poor oral health can lead to serious health problems like diabetes and lung disease, not to mention day-to-day pain.



• Ontarians with low education or income are twice as likely to smoke as those with high education or income.

With the right political, economic, and social policies, health inequities can be eliminated. One option to address health inequities is for decision makers to use a **Health Equity Impact Assessment** – a tool that analyzes a program or policy's potential impact on the health of particular groups of people. This can help to design programs that take into account the unique needs of different groups. For example, if a hospital found that language was a barrier to accessing health care for recent immigrants, they could provide translators.

WHY DO IMMIGRANTS BECOME LESS HEALTHY?



When immigrants arrive in Canada, their health, on average, is substantially better than that of people born in Canada. Before coming to Canada, most immigrants have to go through medical testing – this means that the people selected are usually in good health. **97%** of new immigrants say that their health is good, very good, or excellent, compared to **88%** of people born in Canada.

E AFDG

But over time, the health of immigrants slowly worsens. They often lack the basics needed for good health: a good job, a healthy home, access to a family doctor, and so on.

Established immigrants in Canada are twice as likely as people born in Canada to report that their health declines over time and are more likely to become obese and inactive.

COLOUR CODED HEALTH CARE



Many health care providers in Canada don't believe that race plays a role in the care they provide, but we know that racialized Canadians often have worse health outcomes. For example, they are **17%** less likely be checked-in to the hospital than white Canadians, despite having poorer health that would suggest a greater need to be hospitalized. This means that racialized Canadians may not have access to essential health care services when they are sick.

Recent research suggests that living in a racist environment increases the risk of illness for racialized people. Some studies suggest that racialized people experience racism within the health care system, which may reduce their access to health care. Health care providers need to understand the role that race plays in access to care. Many providers have instituted cultural competence and diversity training and policies.



High-quality health care means considering all your needs, including connecting you to organizations that can help you find good housing.

Kids who have access to health care providers in schools are more likely to be healthier and perform better in class.

Having good health care means being able to see the right health care professionals when you're sick and getting back to work sooner.

OUR E Food plays a powerful role in our daily lives. Not enough or not

the right kinds of food shapes whether we'll be healthy or sick. Simply having access to good food isn't as easy as it sounds. The complex web of where our food is cultivated, manufactured, bought and sold all have a profound impact on our day-to-day lives, especially our health.

This is why food security - the ability to access good, affordable food - is such an important determinant of health.



Food and nutrition are essential to good health. When it's hard for people to access nutritious food, it becomes difficult to prevent and manage chronic diseases, like diabetes.

IS THERE HEALTHY FOOD WHERE I LIVE?

28% of adults reporting lowest household incomes experienced food insecurity, more than twice the Ontario average.

"Food insecurity is largely the result of low income and financial insecurity" Public Health Agency of Canada

TORONTO FOOD DESERT MAP Adapted from Martin Prosperity Institute, 2010



It's easier to grab a slice of pizza after a long day if the pizza place is much closer to home than the grocery store. Access to fresh, affordable and healthy food is a growing problem in Toronto. Urban sprawl makes it hard to buy groceries without a car, and inner city congestion leaves little room for farmers' markets. Fried, salty and sugary take-out is a fast solution that really turns into the problem.



Is there healthy food in your neighbourhood?

FOOD AND YOUR HEALTH

People whose diets are deficient in nutrients and healthy variety are:



Food insecurity has also been linked to obesity and childhood developmental problems. People who experience food insecurity are often anxious about where their next meal will come from, or how they'll feed their children. This can be stressful and can lead to mental health problems.

FOOD SECURITY: THE DROUGHT IN CANADA



1 in 10 Canadian households, or 2.7 million Canadians are food insecure, or, worried about where their next bag of groceries or next meal will come from.

It isn't just any 1 person in 10. Canada is rich in agriculture and we pride ourselves on our abundant natural resources and food. In Canada, there is more than enough healthy food for all... theoretically. There are other factors at play when it comes to accessing good, healthy and affordable food.

BREAKFAST FIRST: BATTLING CHILDHOOD HUNGER AND OBESITY WITH THE ONTARIO STUDENT NUTRITION PROGRAM



One in four children in Ontario is clinically obese. Children are finding it hard to focus in the classroom. **41%** of 8th graders in the province skip breakfast.

A consequence of food insecurity is giving up daily breakfast – a small step that has big consequences for our children's health.

Breakfast maintains essential glucose, vitamin B, and other nutrient levels that significantly raise cognitive performance and decrease irritability, aggression, and personality changes. Nutritious morning meals also reduce dietary fat, snacking on sugary foods, and obesity levels.



Food is a social connector and a community builder. It brings people together and celebrates diversity and community.

Those with poor diets have worse health outcomes, longer hospital stays and access health care services more often. Food security reduces the need for medical care.



Reducing the distance that food travels through interventions such as urban gardens means cleaner air for the city and fresh local food that is more affordable and available. Increased greening of our cities also reduces the urban heat island effect and makes our neighbourhoods more liveable.

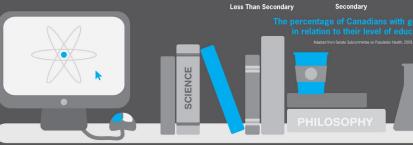
"The question of hunger is not a technical question, it's a political question..." (Oliver De Schute, UN Special Rapporteur, Food)

YOUR EDUCATION

Education plays an important role in people's health and well-being. People with more education generally lead healthier lives than those with less.

Research shows that education leads to good health through access to more opportunities, better living conditions, and better awareness of a healthy lifestyle.

This is why education is such an important determinant of health.





Studies have shown that child nutrition and learning are closely linked. Kids who don't have a healthy start in the morning suffer for it all day. These impacts can follow children throughout their education.

ROADBLOCKS TO EDUCATION

Ontario boasts some of the best universities in the country. So why is it that **1 in 3** adults 25 and up in our province can't make it across the bridge to a higher education?



56% of graduates have parents who also graduated from university. Children whose parents do not have a post-secondary education perform worse than those of more educated parents. Tuition rates and student debt in Canada are at an all-time high! Ontario has the highest tuition rates in the province. How do we pay for it? Where your kids grow up – your home, your neighbourhood, and your local schools – affect their performance in and beyond the classroom. Do they have proper nutrition? Do they feel like they're being supported by their community and that they have a sense of belonging? Does their school and community celebrate their culture?

What happens to that 1 in 3?

Being less educated contributes to poor health in a number of ways. Canadians who did not complete high school are almost twice as likely to report fair or poor health.

People who are less educated have:

- A higher chance of developing chronic illness.
- A shorter life expectancy.Increased risk for cardiovascular
- disease.
- Higher rates of mental illness.

For example, **1 in 16** Canadians suffer from diabetes and the rates continue to rise. Lack of exercise, poor diet, smoking and stress all raise the risk of developing diabetes. These can be prevented through healthy school programs and policies.

Your education level also impacts the health of your children. Lower levels of education have been correlated to greater risk for premature birth and infant death.

Education increases knowledge of how to make the right choices for better personal health.

13% Percentage of high school graduates who are healthier than non-graduates.

- **11%** Percentage of high school graduates who use preventative medical services more frequently than non-graduates.
- **23%** Percentage of high school graduates who are more aware of healthy lifestyle choices and how to make them than non-graduates.

EARLY CHILDHOOD LEARNING AND CARE MEANS A BETTER FUTURE

Early childhood learning and care has an immense impact on children's health, well-being and development throughout their lives. The first 6 years of a person's life have a substantial influence on their brain development, making access to early learning opportunities critical for every child.

50%

 $1 \mbox{ in } 4$ Canadian children have learning, health or behaviour issues that can compromise their long-term academic success.

"Every dollar spent in ensuring a healthy start in the early years will reduce the long-term social costs associated with health care, addictions, crime, unemployment and welfare. As well, it will ensure Canadian children become better educated, well adjusted and more productive adults." (Dr. David Butler Jones, Chief Public Health Officer of Canada)

LEAVING COMMUNITIES OF YOUTH BEHIND



Not completing high school makes it more likely that young Canadians will experience poor employment and earning potential, higher likelihood of crime, poor health outcomes, drug-use and other unhealthy social behaviours.

Dropout rates are a problem that many communities across Canada face, although some are affected much more than others. The average rate in Canada is **8.5%**, but some vulnerable communities such as Aboriginal youth living off reserves have dropout rates as high as **22.6%**. In general, young males are more likely to drop out than females.

Dropping out of high school has serious social and economic costs. Over **30%** of Canadians who have not completed high school receive income assistance, compared with **6.7%** of those who did.



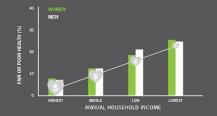
Being educated improves your likelihood of being socially active and positively engaged in your community.

People who have higher education have more opportunities for better housing.

Educated people tend to live healthier lifestyles, reducing their chance of getting sick and needing medical attention. It also means they are well informed of the types of services that are available, which gives them better access to them when they need it.

YOUR EMPLOYMENT AND INCOME Both employment and income affect your living conditions, reserved lifeted a bailed duration is in particular.

HOW IS INCOME RELATED TO HEALTH?



The lower your income, the more likely you are to report that your health is only fair or poor.

Source: Bierman et al., 2009.

mental health, and lifestyle choices. However, it is not just your job or how much money *you* make that affects your health – you are part of a larger equation.

"Our health depends not only on our own income but also on how income is distributed in the place in which we live" (De Maio, 2012).

We all do better in more equal societies.



Having higher education means people have the knowledge and skills necessary to secure employment and make a good income.

YOUR JOB AND HEALTH: HERE TODAY, GONE TOMORROW



Unemployment is not the only thing that can lead to stress and poor health. Not having enough work or juggling multiple jobs can also trigger poor health.

Are you familiar with any of these job scenarios?

- Jobs that are unstable (part-time, casual, contract, or shift-based work)
- Jobs that keep you on call everyday
- Jobs without benefits
- Low-paying jobs
- Jobs that demand long or late hours
- Jobs that require you to travel long distances
- Jobs that don't use or need your qualifications
- Jobs that are not in your field

These types of jobs are called precarious work. They typically come with:

- Low wages
- Limited health and other benefits
- Difficult schedules
- Lack of job security
- Limited opportunity for personal or professional growth

These jobs often make life more unaffordable and stressful, sometimes preventing people from taking care of their health and the health of their family.

You can still live in poverty even if you are employed. People in this situation are typically concentrated in Toronto suburbs and most commonly work in sales and service occupations.

Recent immigrants were found more likely to work in temporary or part-time jobs, end up in jobs for which they are overqualified and be paid lower wages, than Canadian-born workers.

THE ROLE OF RACE IN SECURING EMPLOYMENT



Race plays a significant role in determining employment opportunities. A study conducted by Oreopoulos & Dechief (2011) in Toronto, Montreal and Vancouver shows how discrimination distorts the job recruitment process. **Job applicants with English sounding names were 35% more likely to receive call backs from employers than those who had resumes with Indian and Chinese names**. This is just one example of racism in the labour market.

A CITY DIVIDED



Health and social problems are worse for everyone in unequal societies – it's not just low- income communities that are negatively affected by income inequality. Things like life expectancy, physical health, community connections, mental health, and child well-being deteriorate when there are large gaps between the poor and the rich.

Over the past 30 years, poverty has increased and moved from the downtown core to the suburbs and middle class neighbourhoods have been disappearing altogether. Low-income Torontonians, particularly **those who are racialized**, recent immigrants, Aboriginal peoples, people with disabilities and single parents, are being pushed to the outskirts of the city where there is little or no access to transit and services.

DID YOU KNOW? Approximately **24%** of the city's population lives in poverty – that is **1 in 4 Torontonians.**

Not only is poverty becoming concentrated within certain communities, the job market itself is changing as well. Today it's much harder to find a permanent full-time job, with health benefits and a pension. Increased temporary and contract positions make the future for many Torontonians uncertain.



People with higher incomes often have better access to primary care, which helps in preventing health problems from becoming urgent.

People who work in secure jobs with regular hours and good wages have more time to interact with their neighbours and participate in community activities.

A good income allows you to purchase healthy, nutritious food, providing the means for maintaining a well-balanced diet.

When neighbourhoods are well-serviced and portrayed as vibrant, healthy and productive, businesses are more likely to locate there and invest in the area, adding economic value.

Income gives you access to education or job training which will most likely increase what you are able to earn in the future. It is estimated that 65% of new jobs over the next five years will require some form of post secondary education.

Good housing is more than just four walls and a roof. Good housing means having a

home that is secure, safe, in good repair and free from infestation and mold. A home that doesn't meet these basic criteria has significant consequences for your health, and unfortunately this is a reality for many Torontonians.

1 in **5** Toronto residents live in housing that they can't afford, is too small for their needs, or is in serious need of repair.



People with higher incomes can afford good quality housing and have more options when choosing where to live

HOUSING AND HOMELESSNESS

This housing and homelessness iceberg illustrates the number of Canadians that are dealing with some kind of housing insecurity, sometimes a few kinds at once. Not all housing insecurity leaves people sleeping outside, it can include perpetual couch surfing, housing that is in really bad repair (broken windows, leaking roofs, infested), or housing that simply has too many people living in it. These are all factors that contribute to inadequate housing in Canada.

There are approximately **12.5** million households in Canada. This means that around **12%** of households are in core housing need and **25%** are living in unaffordable housing.

Source: Wellesley Institute, 2010.

Visible homeless: 150,000 - 300,000 people This is the estimated number of people in Canada who are sleeping on the streets, park benches, over heating graters and in shelters.

Hidden homeless: 450,000 - 900,000 people This includes people that are couch surfing, have short term insecure housing arrangements, or other circumstances where they're not on the street, but don't have their own housing.

Core housing need: 1.5 million households

This includes those who are at risk of being homeless due to the condition of their home, the high cost of their home in relation to their income, or the unsuitability of their housing.

Unaffordable housing: 3.1 million households

Housing being unaffordable may be one of the biggest housing issues in Canada. When households spend more than 30 percent of their income on housing, there is little left over for healthy food, transportation, child care and other basic needs.

WAITING FOR HOUSING



Toronto's affordable housing wait list reached an all-time high in May 2012 of **85,088** households, or **157,216** people - a new record. The previous record was set in April 2012. And the record before that was set in March 2012. In fact, every month since 2008 had set a new record for the number of people waiting for a safe and affordable place to live in our city.

Although the need for affordable housing keeps expanding, why is it that government funding has continued to decline?

WHAT IS GOOD HOUSING?



Housing is one of the most important social determinants of health, yet we still have a long way to go when it comes to ensuring healthy housing for all.

Good housing must be part of a healthy and inclusive neighbourhood where people feel a sense of safety and belonging in their community and physical environment.

Good housing must be affordable, too. Housing is unaffordable when it costs more than **30%** of your income; over **3 million** Canadians pay more than that. With so much being paid for basic housing, there is little money for food, transit, clothing, and other essentials.

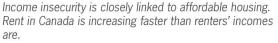
HOW DOES BAD HOUSING MAKE US SICK?



Safe and affordable housing is essential to good health. Poor housing can lead to increased rates of communicable diseases such as tuberculosis, infestations such as lice and bed bugs, and infections such as fungus related to damp conditions. Poor living conditions can lead to serious respiratory conditions like asthma and chronic obstructive pulmonary disease (COPD). Research shows that the risk of severe health issues or disability can increase by **25%** in childhood or early adulthood.

Those who are homeless experience a broader range of health issues than the rest of the population and are 8-10 times more likely to suffer an early death.





Affordable rent means having enough money to go towards other necessities, like healthy food.



Mold, lead, poor heating, bugs and vermin, overcrowding and poor ventilation all have negative impacts on your health. Good housing helps prevent these factors from making you sick. ******YOUR COMMUNITY

We all have our own unique places that we call home and people that we share them with. Although how we experience our community may be different, community belonging is important to everyone's health, happiness, and well-being.

Whether it's people from down the street, two lockers across, at a sports game, or on your computer – how deeply connected you are with your community is an important social determinant of health.



There is a strong association between good housing conditions and a stronger sense of belonging to your community.

WHAT DOES IT MEAN TO BE EXCLUDED?



There are preventable barriers that make feeling part of a community harder for some more than others.

Discrimination like racism and sexism are problems that can leave people feeling isolated. Immigrants and people with disabilities are examples of groups that tend to suffer discrimination in their communities.

Discrimination means little access to opportunities to connect with your peers, such as:

- Participating in activities you enjoy or are skilled at.
- Having access to the things you need to survive, like health care, housing, education, income security, or language services.
- Participating in social and cultural activities.
- Having economic resources and opportunities, like paid work.

People who are **socially excluded**:

- Are more likely to be unemployed or have lower incomes.
- Have less access to health and social services.
- Have less access to education.
- Are often concentrated in specific neighbourhoods that lack the resources needed to build strong communities.

• Are excluded from power – they have little control over the decisions that affect their lives.

WHAT BUILDS BELONGING AND TRUST IN OUR COMMUNITIES?

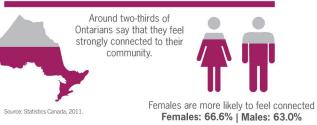
What shapes a particular community is not the same for everyone. Many people feel part of multiple communities.



From big companies to little league soccer, a community emerges when you work towards a common goal. You can connect to a group through shared values, beliefs, passions, and opinions.

The stronger you feel connected to people in your community, the stronger your community becomes.

THE CONNECTION CLIMATE IN CANADA



HEALTHY COMMUNITIES MEAN HEALTHY LIVES

Stronger community connections means a healthier mind.

81% of Canadians who say that they have very strong connections to their community also have excellent or very good mental health versus only **64%** of people with very weak community connections.



Support from your friends, family, peers and neighbours is a universal human need and a factor for good health.

Stronger bonds also means a stronger body.

65% of people with deep community connections report excellent general health versus **51%** of people with very weak community connections.



PERCENTAGE OF CANADIANS WHO FEEL A STRONG OR SOMEWHAT STRONG SENSE OF COMMUNITY BY AGE GROUP

Across Canada, younger and older people feel the closest to their social circles, while 18 to 29 year olds feel more left out in the cold.



12 to 17 18 to 29 30 to 44 45 to 64 65 + Source: Shields, Margot (2008), Community Belonging and Self-Percieved Health, Health Reports, Vol. 19, (No.2)



Providing hubs like libraries not only improves community connections – they can also improve communities' education.

Good community connections can mean better support for vulnerable people, like the elderly, to complete essential tasks like grocery shopping.

People with strong community connections tend to have better physical and mental health than those without, which means reduced need for health care services.

YOUR NEIGHBOURHOOD

resources, services, and support needed to live a long, healthy life. Unfortunately, not all neighbourhoods have been designed in a way that connects people to each other and the services they need, creating unequal access to opportunities. And in this way, our neighbourhoods, or what we call the built environment, affect our health.

The built environment includes all the physical or man-made aspects of our neighbourhoods which allow us to live, play and work, from the houses we live in to the transit routes that connect us. The built environment serves as the foundation for our daily activities and lifestyle choices.



Studies show that strong community connections and a sense of belonging can lead to lower crime rates, which means a safer neighbourhood.

HOW DOES MY NEIGHBOURHOOD AFFECT MY HEALTH?



The built environment, your neighbourhood, shapes your sense of physical safety and connectedness to your community. The quality of where you live, like how clean your parks are, affects your health today, and down the road.

Having more green space in your neighbourhood promotes well-being. Living near green spaces or parks also feels good. Studies show it's even helped people recovery from surgery and illness.

In one of Toronto's densest neighbourhoods, St. James Town, Haque and Sun (2011) found that youth expressed concerns about poor maintenance, damaged equipment and the presence of garbage in their parks. They understand the importance of the built environment, what's in their neighbourhoods, especially places to hang out and play, in providing a safe, likable place to be.

Communities with better-serviced built environments (quality housing, safe transit options and connections) encourage healthy, active lifestyles and attitudes towards health. Rachlis (2007) showed diabetes rates were highest in the northern suburbs of Toronto, including Malvern and Humber Summit. These areas have little or no access to public transit, fresh and healthy food options as well as local services and public spaces.

What's in your neighbourhood matters for your health. This is why the built environment is such an important social determinant of health.

How does your neighbourhood measure up?

NEIGHBOURHOOD DESIGN

When cities decide how to design your neighbourhood, they determine how you access employment, education, health care, and food.



CONNECTED NETWORK

DISCONNECTED NETWORK

I GET AROUND: TRANSPORTATION

0%



Healthy neighbourhood design changes our transportation habits based on: how close or far apart destinations are from each other (**proximity**) and the availability of safe and convenient transit connections between these destinations (**connectivity**).

Proximity + connectivity = walkability

Walkability is how inviting or un-inviting your community is to pedestrians. For some, this means safe streets that lead to well-maintained community spaces while others understand it as bike lanes connecting different places.

Walkable communities provide many health and social benefits. They encourage physical activity, social interaction as well as access to employment, services, and healthy food.

DID YOU KNOW?

2006 levels of walking and cycling in Toronto are estimated to prevent about 120 deaths each year, which is equivalent to total savings anywhere from \$130 million to \$478 million. Collisions involving pedestrians and cyclists in Toronto cost over \$60 million each year.



Good neighbourhood planning and design means the right mix of good, affordable housing.

The built environment creates physical spaces for people to socialize and connect with each other. This can be parks, community centres, public squares, or other shared spaces.

Your neighbourhood can encourage or deter people from accessing education, this is reflected in the presence of well-maintained buildings as well as convenient, safe transit options.

Well designed neighbourhoods include a range of places for people to live and work, which makes it easier to get a job close to home.

Integrating natural or green spaces in the built environment enables people to produce healthy food options (farmers' markets, community gardens, rooftop gardens) or access food from nearby outlets (grocery stores, restaurants).

Healthy neighbourhood design considers the health impacts of green spaces, clean air, and places to be active, all of which decrease our likelihood of chronic disease and result in fewer hospital trips in the future.



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Making the Connections Exhibit

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Making the Connections is an exhibit that walks Torontonians through the social determinants of health found in these pages. It also introduces systems thinking, and encourages people to think about the larger, interconnected society we are a part of and how these interconnections impact our health.

We are interested in exploring opportunities to connect with new or ongoing local community initiatives. If you are interested in hosting the exhibit in your community or organization, or if you would like more information, please contact:

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About The Wellesley Institute

The Wellesley Institute is a Toronto-based non-profit and non-partisan research and policy institute. We focus on developing research, policy and community mobilization to advance population health.

Our mission is to advance population health and reduce health inequities by driving change on the social determinants of health through applied research, effective policy solutions, knowledge mobilization, and innovation, and assisting communities to mobilize around health choices.

Our vision is for a healthier and more equitable Greater Toronto Area for all.

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