

# Social Wellbeing

Regional Sustainability Strategy Policy Options Series | Fall 2010

Social sustainability is about people – individuals, families and the community. The way we plan and build our communities impacts public health and social wellbeing. Urban planning affects residents' activities and behaviours every day – how we get safely to work or school, opportunities for physical activity and recreation, access to nutritious food and clean air and water. With our region's rapidly aging population, policies and practices that facilitate health and wellbeing become even more important.

This is one of nine papers that examines approaches to sustainability in the Capital Regional District (CRD). With a focus on social sustainability, this paper draws the linkages between the natural and physical environment and social wellbeing. It maps out three policy directions – the status quo, moderate change and significant change. The papers follow a similar pattern of sketching out the current context, identifying drivers of change and highlighting practices from elsewhere.

Your feedback is welcome.

## A Regional Context

The notion of wellbeing is central to our concept of health and healthy communities. In the Greater Victoria Wellbeing Survey (2007-2008), wellbeing was measured using a rating scale of satisfaction with life and happiness. Overall, there was a relatively high rate of life satisfaction and happiness in Greater Victoria with an average score of 7.6 – very close to the Canadian average of 7.7. The countries with the highest average scores are Denmark (8.2) and Switzerland (8.0). Overall, life satisfaction and happiness was highest among the young and the old, higher income earners, married and widowed persons, retired persons and homemakers and people living with a spouse.



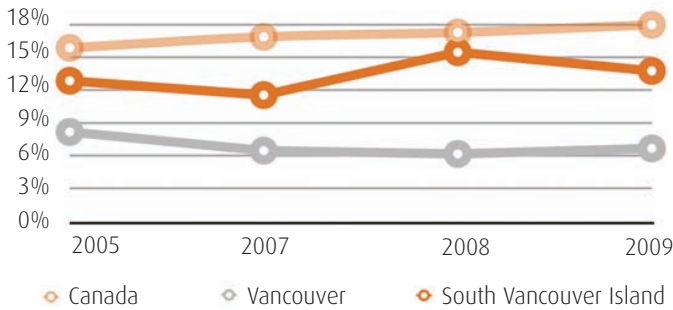
## Determinants of Wellbeing

1. Physical and mental health
2. Time balance
3. Social and community vitality
4. Cultural vitality
5. Material standards
6. Quality of governance
7. Environmental vitality

*Source: Greater Victoria Wellbeing Survey*

Self-reported obesity levels in the South Vancouver Island area were 14% in 2009, comparatively lower than the Canadian average of 18%, yet still higher than the average in the Vancouver area. General obesity levels in the South Island area have increased slightly since 2005.

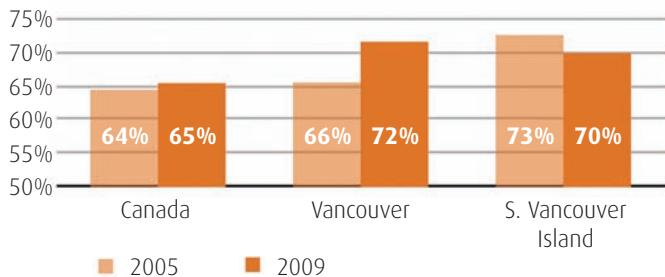
Figure 1: Adult Obesity Rates (Self-reported)



Source: Statistics Canada, Canadian Community Health

In general, residents of South Vancouver Island have reported higher levels of sense of belonging to their local community than Canadians as a whole. Yet the percentage of residents reporting a “strong” level of sense of belonging in the South Vancouver Island area has dropped slightly from 73% in 2005 to 70% in 2009.

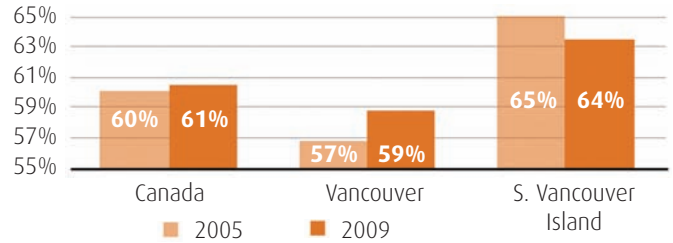
Figure 2: Sense of Belonging to a Local Community (Somewhat Strong or Very Strong), 2005 and 2009



Source: Statistics Canada, Canadian Community Health

Residents in the South Vancouver Island area are more likely to report that their health is excellent or very good compared to their counterparts in Vancouver or Canada as a whole. However, this perception of health has dropped slightly among the area’s respondents between 2005 and 2009.

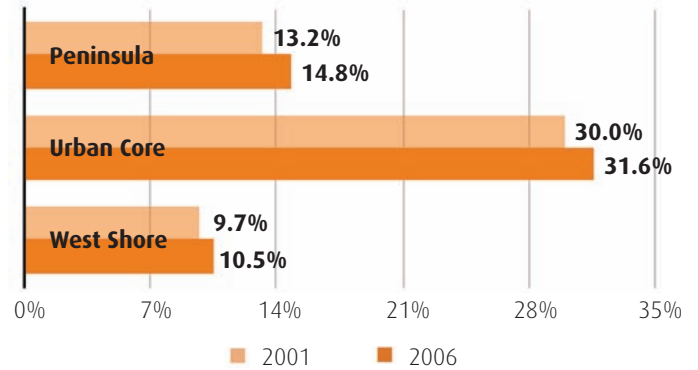
Figure 3: Perception of Health – Very Good or Excellent, 2005 and 2009



Source: Statistics Canada, Canadian Community Health

Between 2001 and 2006, the percentage of the population living within 500 metres of a commercial centre increased from 25% to 26% in the metropolitan area. Each of the sub regions also experienced a slight increase in the share of the population living within walking distance of a commercial node. At the same time, the percentage of dwellings within 500 metres of a commercial centre dropped from 29% to 25% during this period, an indication that more houses are being built in areas with limited access to services.

Figure 4: Population Living Within Walking Distance of a Commercial Centre, 2001 and 2006



Source: Statistics Canada, Census

## Common Themes for Healthy Communities

- Community involvement
- Intersectoral partnerships
- Local government commitment
- Sustainable and green communities
- Safe and livable communities
- Human development

Source: BC Healthy Communities

## What's Driving Government Involvement in Social Wellbeing?

Social sustainability is a new area of focus for the CRD — one that was not directly addressed in the 2003 Regional Growth Strategy (RGS). Yet, many local and international agencies have been actively involved in efforts to develop policies and strategies to tackle issues of health and social wellbeing in our communities. The list of factors, programs and initiatives is lengthy.

**1986** | The Healthy Cities movement was born at a meeting of the World Health Organization and has since grown to include thousands of cities and towns in over 80 countries.

**2000s** | Legislative and policy direction derived from the provincial *Health Act*, *Environmental Management Act*, the Federal/Provincial Accord on Environmental Harmonization and sub-agreement on Canada-wide standards for air quality.

**2003** | The RGS includes policies towards building complete communities.

**2005** | The Union of BC Municipalities in conjunction with the Planning Institute of BC and Ministry of Health identified practical ways that planners, health professionals, elected officials and other key groups could work together to promote healthy communities.

**2005** | The BC Healthy Communities (BCHC) initiative was launched to develop processes that include community learning, engagement, expanding assets and community collaboration. BCHC offers workshops and seed grants to support communities identify and develop community building practices.

**2006** | The Ministry of Healthy Living and Sport and the Ministry of Health Services identified a set of core public health functions that all health authorities are expected to perform. The core functions and health strategies include health improvement; disease, injury and disability prevention; environmental health; and health emergency management.

**2006** | Vancouver Island Health Authority 5-Year Strategic Plan outlines a shift from a health care system focused on managing illness to one that focuses on helping people stay healthy and delivers integrated range of services.

**2007** | The Federal Children's Fitness Tax Credit was established, allowing parents to claim a tax credit up to \$500 expenses from sport and physical activity programs for each child under the age of 16.

**2008** | The BC Healthy Built Environment Alliance was formed to coordinate collaborative efforts for improving population health through policies and practices related to the built environment. BC's Provincial Health Services Authority provides leadership and coordination.

**2008-09** | The Capital Region Wellbeing Survey was conducted with a random sample of residents in the CRD. A total of 2,400 returns were received indicating that social and community vitality, governance and environmental quality to be among the top determinants of wellbeing for residents in the region.

**2009** | New standards for the design and construction of adaptable housing were added to the BC Building Code, e.g. additional accessibility requirements for single-storey suites in new residential multi-unit buildings as well as building entrances and common areas.

**"High density levels make transit accessible to more people, thereby creating a critical mass of transit users. In Canada's urban cities, rates of obesity seem to be lower in neighbourhoods situated closest to downtown areas."**

**"People are more likely to walk when land use is mixed (when shops, schools, workplaces are close to dwellings). One study showed that when neighbourhoods are divided into four quartiles, each quartile increase in mixed land use that facilitates active living was associated with a 12% reduction in the likelihood of obesity."**

*Source: Provincial Health Services Authority, From Strategy to Action (2007)*

**"An age-friendly city encourages active aging by optimizing opportunities for health, participation and security in order to enhance quality of life as people age. In practical terms, an age-friendly city adapts its structures and services to be accessible to and inclusive of older people with varying needs and capacities."**

*Source: World Health Organization, Global Age-Friendly Cities: A Guide*

## What is a Complete Community?

A multiple use urban community that has the full range of facilities and activities necessary to meet typical household needs, such as employment, shopping, personal services, recreation, housing and education. Complete communities are often defined by what they are not -- that is, single use residential areas that serve a largely dormitory function to a larger centre with few local opportunities to meet the broad range of household needs.

*Source: BC Healthy Communities*

# What is “Health”?

“Determinants of Health” refers to the complex set of factors that, together, influence people’s health on individual and groups levels:

- 1. Biological & Behavioural**  
body, physical activity, diet, substance use, sex, genetic make up
- 2. Environmental**  
ecosystems, air and water quality, sustainable local food systems, green space, built environment
- 3. Economic**  
thriving local business, resilience, stable employment, family-friendly workplaces
- 4. Psychological & Spiritual**  
mind, lifestyle choices, sense of belonging, self-esteem, coping skills
- 5. Social**  
gender, education, housing, child care, transportation, food security, social cohesion
- 6. Cultural**  
community identity, arts and culture, diversity, pride, hope, participation

Source: BC Healthy Communities

Figure 5: Healthy Communities Framework



Source: Background Report, CRD Roundtable on the Environment, 2005

Figure 6: Factors Influencing Physical Activity in Communities



Source: Adapted from “Promoting Physical Activity and Active Living in Urban Environments”, WHO.

## Healthy Communities

“The health of a community involves more than the health care system. It is the product of environmental, social and economic policies as well as the actions of community groups, businesses and individual citizens. Health is more than the absence of disease and injury. Health is a basic resource for everyday living; it is part of the quality of our lives. “Quality of Life” implies the opportunity to make choices and to gain satisfaction from living. Health gives people the ability to manage and even change their surroundings. It is a positive concept influenced by our circumstances, beliefs, our culture, and our social, economic and physical environments.”

Source:  
Working Together Toward a Healthy CRD  
(Pamphlet, 2000)

## What's Happening Elsewhere?

In an effort to become sustainable, various regions across the nation are now focused on ways to foster diversity and transition to a socially sustainable community.

### Wellness Walkways | Vancouver, BC

Vancouver's Mount Pleasant neighbourhood has a high demographic of seniors and people with special needs. The neighbourhood was redesigned to increase universal access to the visually impaired, those in wheelchairs and seniors with limited mobility. Streetscapes were retrofitted with curb ramps; extra wide, tinted sidewalks and rest points at corners and mid block.

### Community Transit | Bancroft, ON

A non-profit community based agency, Bancroft Community Transit, uses volunteer drivers to take lower income residents to local doctors, lawyers, counselling, daycare, work placements or to buy daily necessities. Clients are referred by community services agencies such as a women's centre or food bank.

### Community Gardens | London, ON

The London Community Gardens project has 21 gardens that provide increased access to fresh, nutritious, low-cost food as well as community building, recreation, physical activity and social interaction. Gardeners come from diverse backgrounds and ages, with a majority from lower income households. Land is provided by the City of London, churches and local businesses.

### Transit-Oriented Development | Calgary, AB

The Bridges is a City of Calgary-led development north of downtown. The land was made available to the City after a general hospital was closed. This compact mixed use development is adjacent to an LRT station with pedestrian friendly lighting and pathways, making it convenient and safe. When complete (by 2011), the development is expected to accommodate more than 1,500 multi-family units.

### Global Age-Friendly City | Saanich, BC

Saanich participated in the Global Age-Friendly Cities Project as part of a federally-funded initiative to make large urban centres better places to live for the aging population. Examples of the initiatives undertaken include:

- Municipal facilities upgraded to include ramps, handrails and other accessibility features.
- Zoning bylaw provides mixed use zones for apartments, attached housing, congregate care and home occupation alongside commercial uses.
- Installation of countdown timers at pedestrian crossings at major intersections.
- Zoning bylaw amended to require new apartment buildings and seniors facilities to be built according to adaptable housing regulations, e.g. wider doorways, no step entry ways and reinforced grab walls.
- Participation of older persons on Advisory Committees of Council.

### On the Move to School | QUEBEC

"On the Move to School" is a program initiated in 2005 to improve walking and cycling conditions for elementary school children and raising community interest in the health, environmental and safety aspects of active transportation. A specialist works with each participating school to assess safety problems in the area and identify possible solutions. Then a committee made up of key partners works with the municipality to modify the urban environment of the school and neighbourhood, e.g. by installing bicycle parking facilities or clearing snow off the sidewalks.

### School Greenhouse | NEWFOUNDLAND & LABRADOR

The St. Francis School Greenhouse project was established in 2002 to reactivate a state-of-the-art greenhouse. Students from different schools take part in planting and harvesting fruits and vegetables, preparing food themselves and learning about the relationship between agriculture and food on the table. A youth entrepreneurship program also gets students involved in agriculture and developing their entrepreneurial skills.



### Neighbourhoods that encourage walking, cycling and overall active living typically feature:

- **Urban residential density**
- **A mix of land use**
- **Street connectivity**
- **Recreational facilities (parks, bike lanes)**
- **Street scale design and safety**

*Source: Provincial Health Services Authority, From Strategy to Action (2007)*

## Policy Options: Where Are We Heading?\*

Social wellbeing and health is a new area of planning practice for the CRD. The policy options take, as their starting point, the numerous programs and policy directions promoted by the Vancouver Island Health Authority and the network of agencies promoting healthy, livable communities. The policy options are separated into two areas: age and disability-friendly planning and social determinants of health.

### Age and Disability-Friendly Planning

Building age-friendly communities will accommodate our growing number of seniors and enable our elder residents to live longer, healthier lives and “age in place”. This includes policies and strategies for senior-friendly transportation services and senior-specific housing that is safe and accessible.

Goal	Status Quo	Moderate Change	Significant Change
<b>Facilitate the development of accessible housing for seniors and persons with disabilities.</b>	Municipal bylaws and building code include standards on basic adaptable housing requirements.	Support enhanced adaptable housing (e.g., main floor suite capacity) and universal design features within new developments, rezoning and subdivision applications.	Establish minimum regulations for adaptable housing and universal design features.  Prioritize age appropriate housing in metropolitan core and major centres.
<b>Promote participation, community involvement and independence.</b>	Social advisory councils address issues of inclusion and accessibility.  Community-based education programs towards changing behaviours in personal and community health.	Promote increased public awareness of barriers to participation for seniors and persons with disabilities.  Support partnership opportunities among local and regional groups to enhance community engagement.	Collaborate with stakeholders to address identified gaps/barriers that would support increased independence of persons with disabilities and the elderly (e.g., through program development).
<b>Facilitate ease of access to services and amenities.</b>	Code-based engineering design standards applicable to building and parking accessibility.	Consider urban design standards for streetscapes and amenities that prioritize people’s needs and uses.  Provide age and disability-friendly accessibility standards for transit infrastructure.	Enhance minimum design guidelines for major centres that consider accessibility and access.  Increase direct accessibility for seniors and persons with disabilities through transit routes and infrastructure.  Support mobile businesses and services that allow for “aging in place”.

\*The Significant Change approach builds upon and enhances the options presented under Moderate Change. The effect is often cumulative, with policies under Moderate Change generally assumed to be included under Significant Change.

## Social and Environmental Determinants to Health

Policy and planning by the CRD can directly and indirectly address many of the social determinants of health, such as promoting active living, facilitating lifestyle options or improving air and water quality and the built environment. The following policy options focus on vulnerable populations, improving accessibility and promoting a healthy built environment.

Goal	Status Quo	Moderate Change	Significant Change
<b>Improve social conditions of vulnerable populations.</b>	Agencies provide early childhood development programs and recreational opportunities.	Expand early childhood development programs as part of community services.	Complete a social needs assessment identifying funding needs, sources, and facilities that meet regional goals.  Prioritize pricing, programming and outreach that targets vulnerable sections of the population.
<b>Promote communities that are safe, socially diverse, openly accessible and livable.</b>	Promote criteria for complete communities and locate seniors/affordable housing within 10-minute walk of a commercial/employment centre, neighbourhood store, recreation facility, school, park, or community garden and proximity to transit.	Support opportunities for active living by promoting development that meets or exceeds criteria for complete communities.  Work with partners to increase public awareness of health, wellness and active living programs.	Coordinate policy development and investment to support complete communities and the principles of healthy communities.
<b>Minimize negative impacts of air quality on human health.</b>	Consider the public health implications stationary and/or mobile sources of emissions when planning new developments.  Existing bylaws that regulate burning.  Regional anti-idling bylaw.	Support policy and design guidelines that address air quality.  Promote public awareness and education of air quality impacts on health.	Establish or enhance minimum requirements for developments to meet guidelines on air quality considerations in site design.
<b>Promote accessibility to transit, amenities and employment.</b>	Municipal guidelines and targets that support increased accessibility.  Incentive programs and minimum criteria for urban development projects and complete communities.	Promote development that meets or exceeds criteria for complete communities, e.g. minimizing auto dependency, increasing accessibility of services.	Municipalities establish requirements for complete communities to increase accessibility.
<b>Address personal safety considerations within the built environment.</b>	Crime Prevention Through Environmental Design (CPTED) included in municipal development policy.	Include CPTED design guidelines and encourage retrofitting of existing developments.  Develop and promote safe routes to schools.	Develop regionally consistent CPTED design guidelines and requirements for all development.

## What Do You Think?

Building healthy complete communities is a fundamental aspect of the region’s planning and policy. As the region’s population ages and evolves, providing access to appropriate housing, transportation and community services will become increasingly important. Other key elements to livability and social wellbeing include arts and recreation programming, protection of the natural environment and having a safe and beautiful public realm.

In the coming years, the CRD is anticipated to play an important role in planning for healthy social communities.

- How do you see the CRD’s role in relation to social wellbeing policy and practice?
- Are we doing enough? Should the policy direction follow the status quo, moderate or significant change approach?
- How can the CRD assist municipalities and partner agencies to promote healthy complete communities?

Notes:

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## Feedback

The CRD values your input in developing the Regional Sustainability Strategy. Please submit your comments on this policy paper via [sustainability@crd.bc.ca](mailto:sustainability@crd.bc.ca).

For in-depth information, **visit [www.crd.bc.ca/sustainability](http://www.crd.bc.ca/sustainability)** to view notices on upcoming consultations, discussion papers, and the overall progress of the Regional Sustainability Strategy.

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## Regional Sustainability Strategy

The CRD, together with member municipalities, stakeholder groups and residents, is working to developing a vision and a planning framework to promote sustainability and create a lasting legacy for future generations. This will lead to the CRD’s first Regional Sustainability Strategy, a broadly ranging document that charts a course to a complete and inclusive community, committed to sustainable practices socially, environmentally, economically and financially.

The Strategy has its foundations in earlier commitments by the CRD Board and member municipalities through the Regional Growth Strategy, adopted in 2003.