

50th International Making Cities Livable Conference June 23-27, 2013

Dr. David McKeown
Medical Officer of Health





City of Toronto:

- 2.7 million population
- 50% immigrants
- 50% visible minority

Toronto Public Health:

- Municipal Public Health Service Agency
- Board of Health

Top Ten Causes of Death in 1900:

- Flu or Pneumonia
- Tuberculosis
- Gastrointestinal infections
- Heart disease
- Stroke
- Kidney disease
- Accidents
- Cancer
- Dementia
- Diphtheria



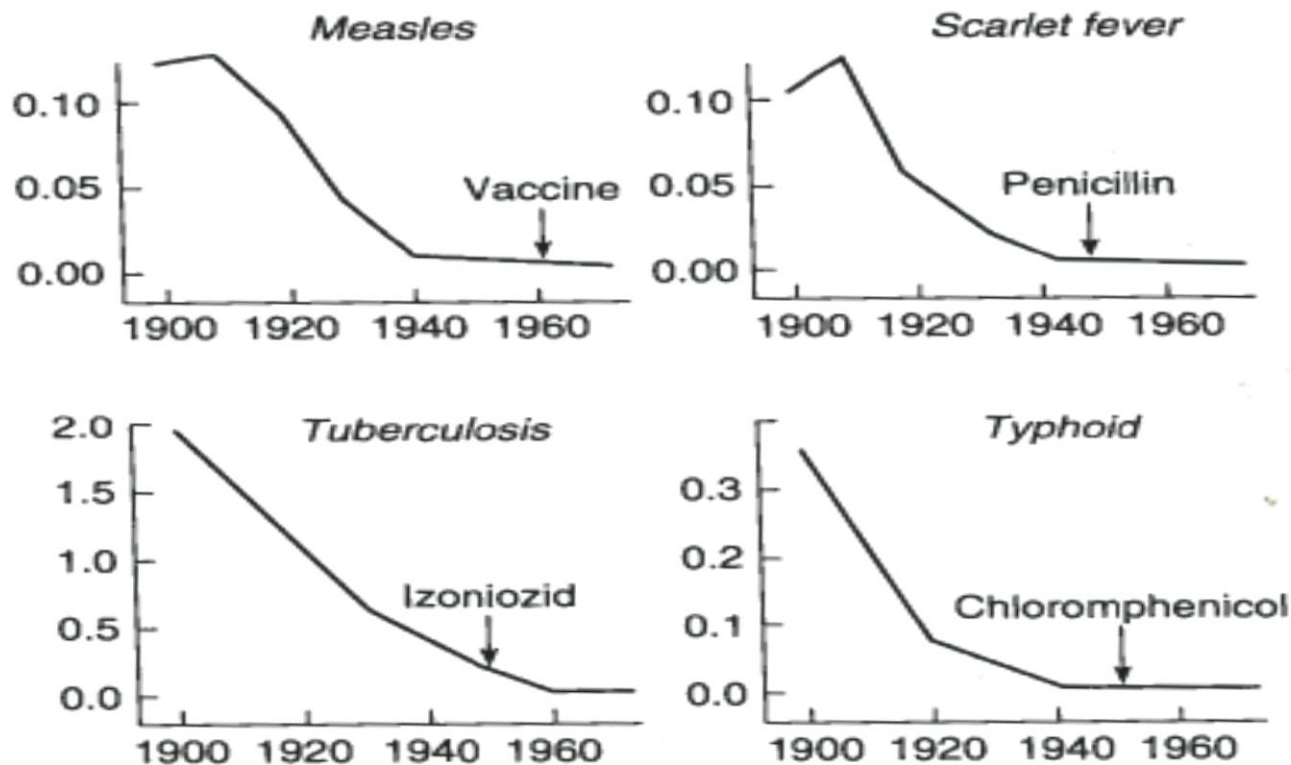


FIGURE 4.2 Fall in the standardized death rate per 1,000 population for four common infectious diseases, in relation to specific medical measures, for the United States.

Source: McKinlay and McKinlay (1977).

Top 10 Causes of Death (2009):

- Heart disease
- Dementia
- Lung cancer
- Stroke
- Cancer of colon
- Respiratory disease
- Diabetes
- Cancer of lymph & blood
- Influenza and pneumonia
- Kidney disease



Photo: Parent, Worldneighbourhoods.com

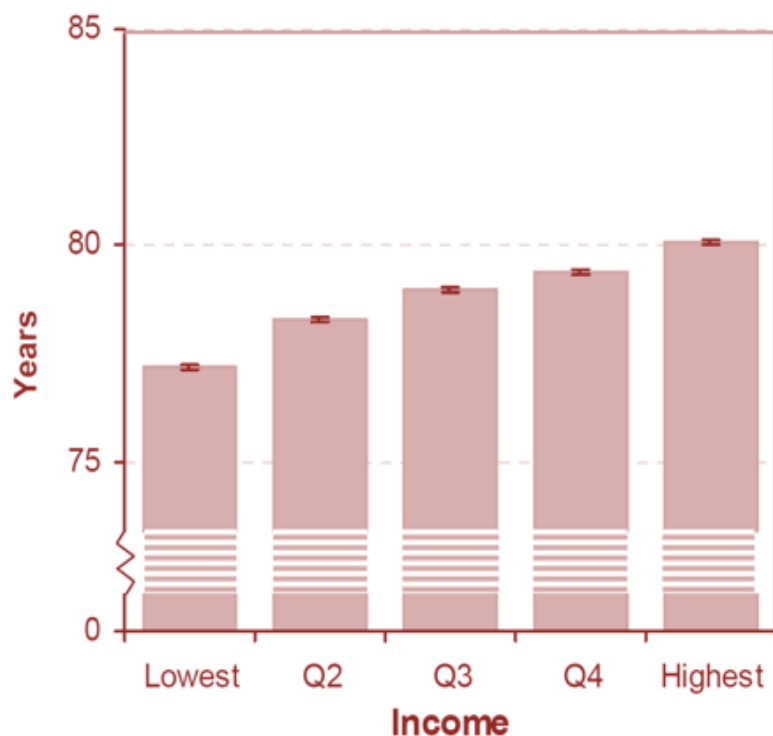
Health Status in Toronto



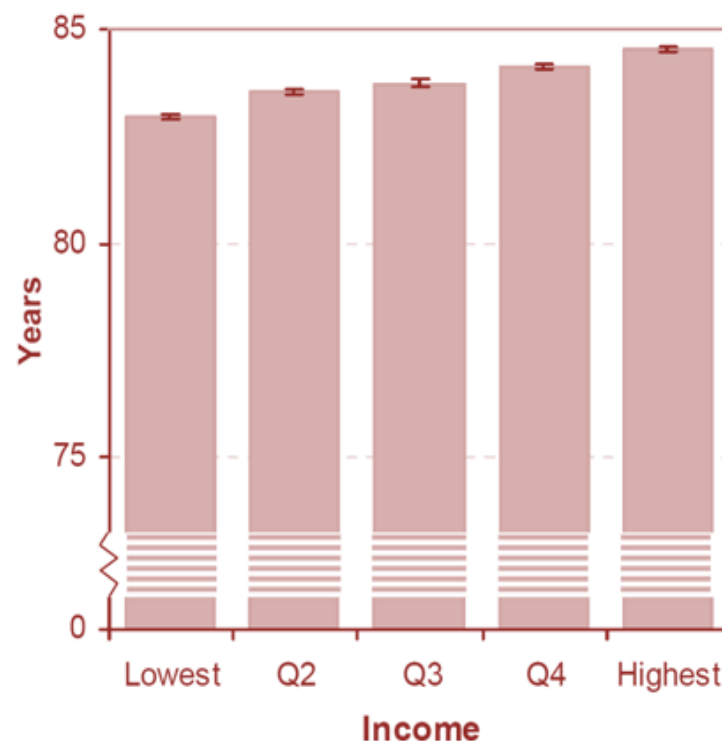
- 40% eat the recommended servings of vegetables and fruits (2008)
- 4 out of 10 adults & 1 in 5 teenagers – overweight (2008)
- 40% of Torontonians met recommended physical activity (2008)

Health Inequities

**Life Expectancy at Birth, by Income¹,
Males, Toronto, 2001, 2003 & 2004
Combined²**

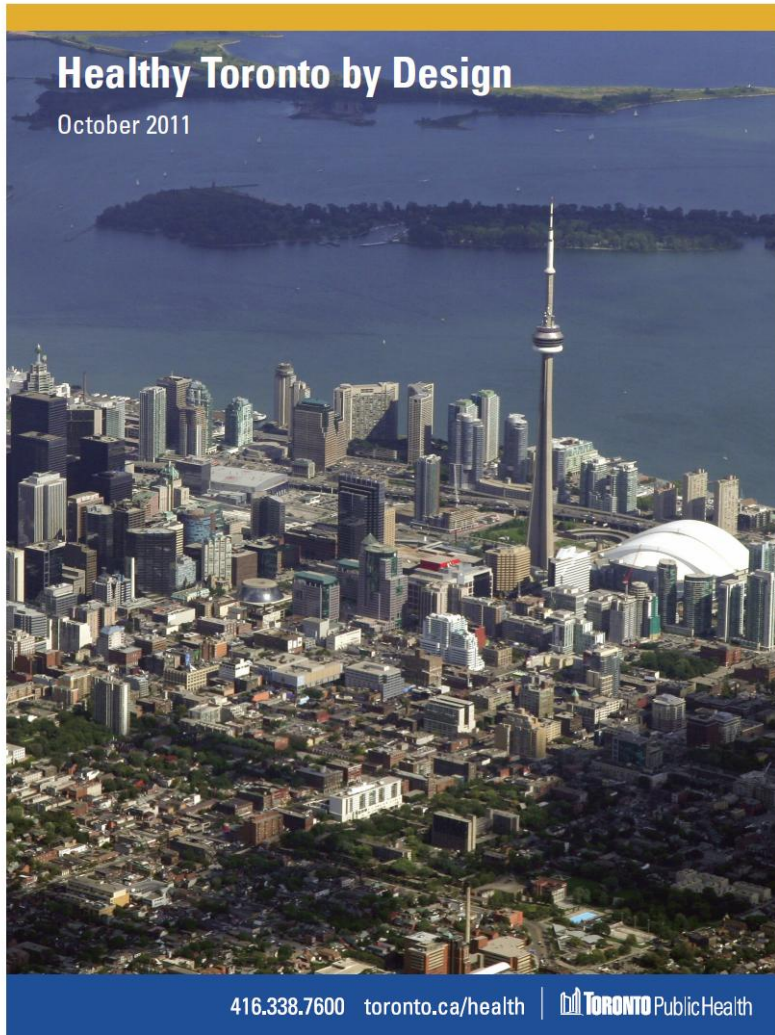


**Life Expectancy at Birth, by Income¹,
Females, Toronto, 2001, 2003 & 2004
Combined²**



¹ Income is the population quintile by proportion of the population below the LICO in census tracts.

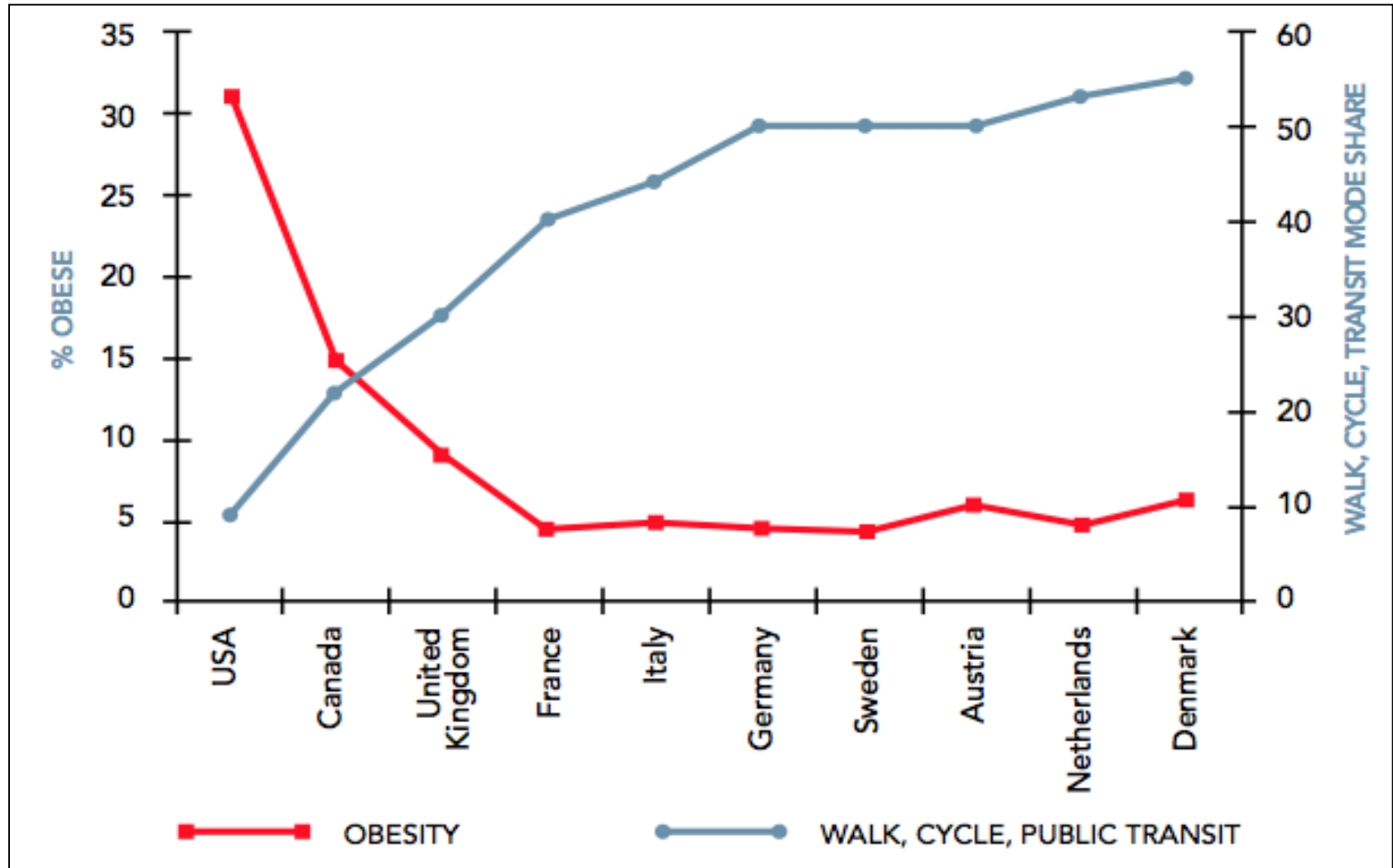
² Mortality data are used from 2001, 2003 and 2004 as these years contain the most current and complete data for postal code. Three years of data are required for this type of analysis.



Urban Environments Influence:

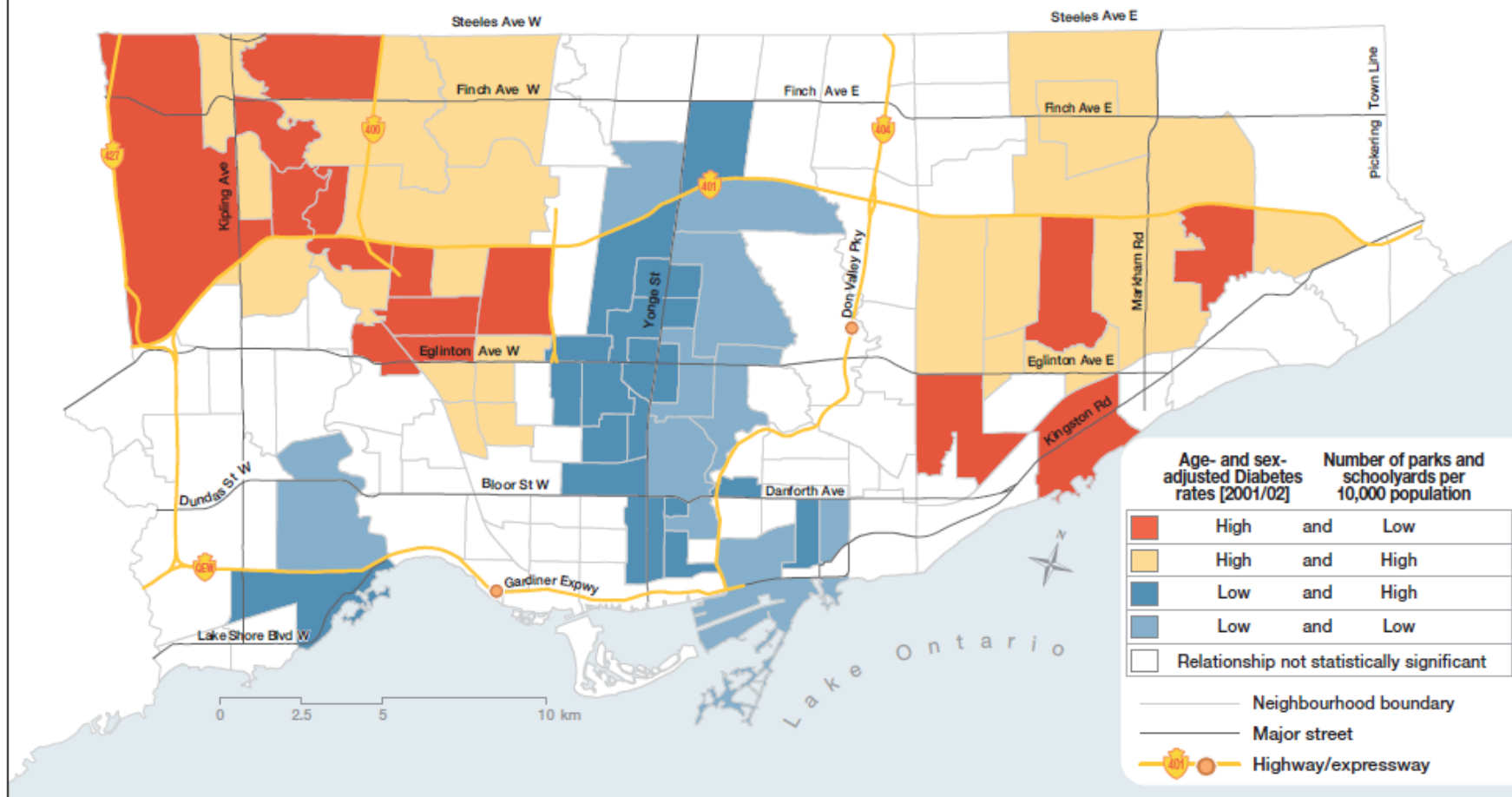
- Levels of physical activity
- Rate of vehicle-related collisions
- Access to nutritious food
- Access to jobs, services,
- Air quality
- Urban heat
- Neighbourhood safety
- Social inclusion

Transportation and Obesity



Diabetes and Green Space Access

Spatial Relationship Between Diabetes Prevalence Rates and Parks and Schoolyards per Capita

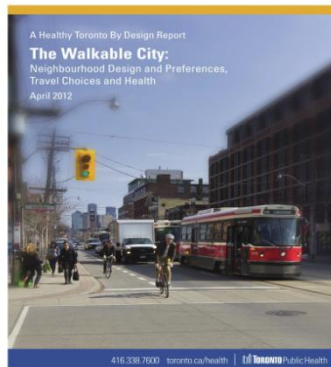
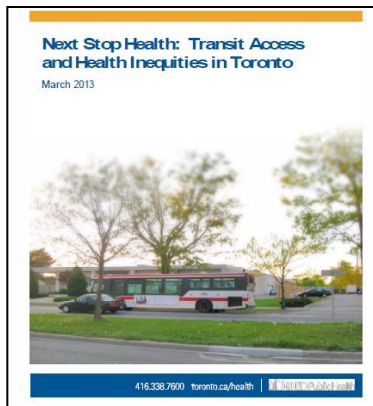
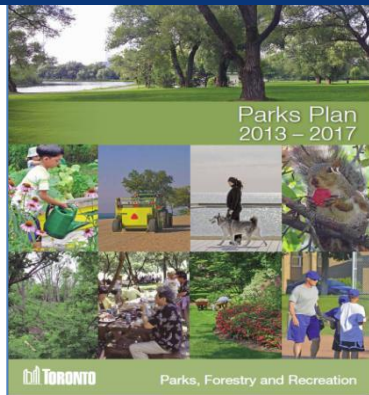
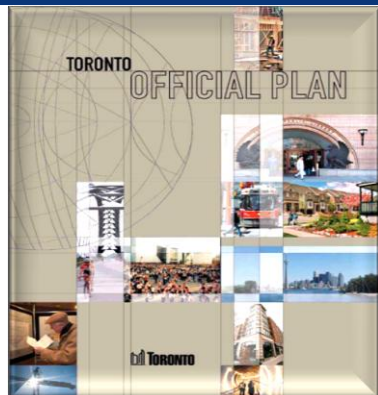




Key Strategies to Create an Active City:

- Higher densities
- Shorter distances to destinations
- Connectivity
- Walkable neighbourhoods
- Cycling & pedestrian infrastructure
- Open spaces and recreational facilities
- Public Transit

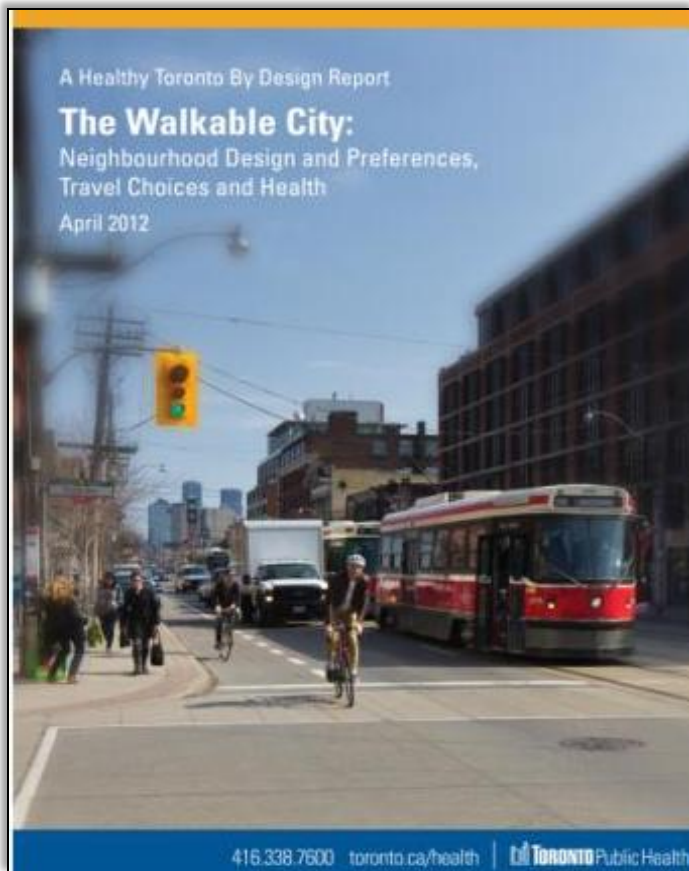




Advancing Health Through:

- Building evidence
- Municipal collaboration
- Civic engagement
- Public policy development

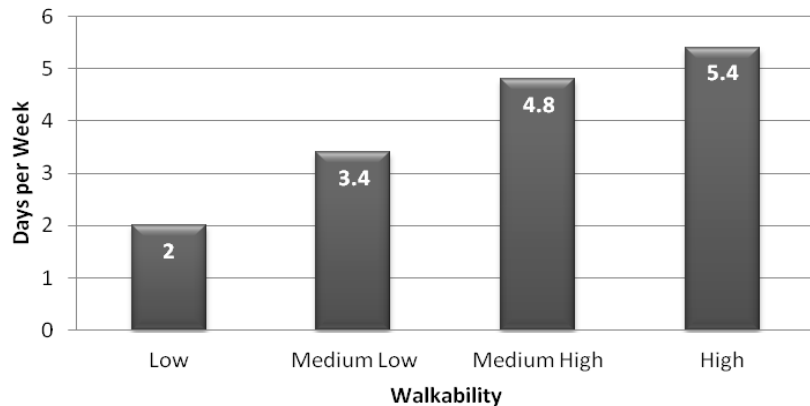
Improving Walking and Cycling



- **Walking** is the number one physical activity
- **Lack of time** is the most common barrier to walking
- **Active transportation**, such as utilitarian walking or cycling, allows people to accomplish two tasks at the same time

Walkable Compared to Less Walkable Neighbourhoods

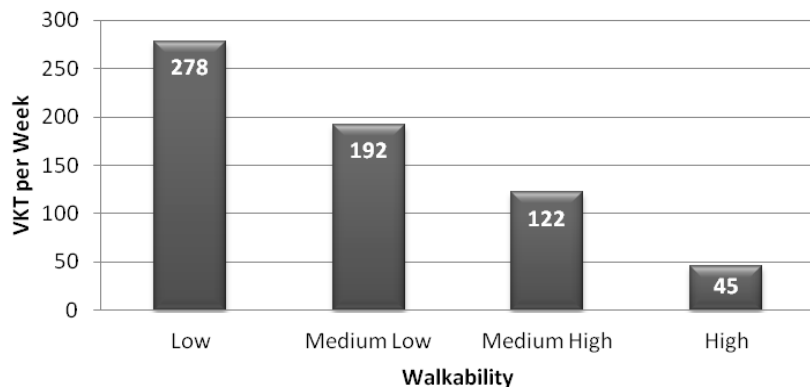
Figure 5: Utilitarian Walking & Walkability - Toronto



Most Walkable vs. Least Walkable Neighbourhoods:

- Utilitarian walking 2.7 times as often
- Use transit 2.5 times as much
- Drive 4 times less often
- Drive 45 vs. 278 km/wk
- BMI – one point lower

Figure 10: Vehicle Kilometres Travelled (VKT) & Walkability - Toronto



Air Pollution Burden of Illness from Traffic in Toronto Problems and Solutions



November 2007

Dr. David McKeown
Medical Officer of Health



Health Equity and Transportation

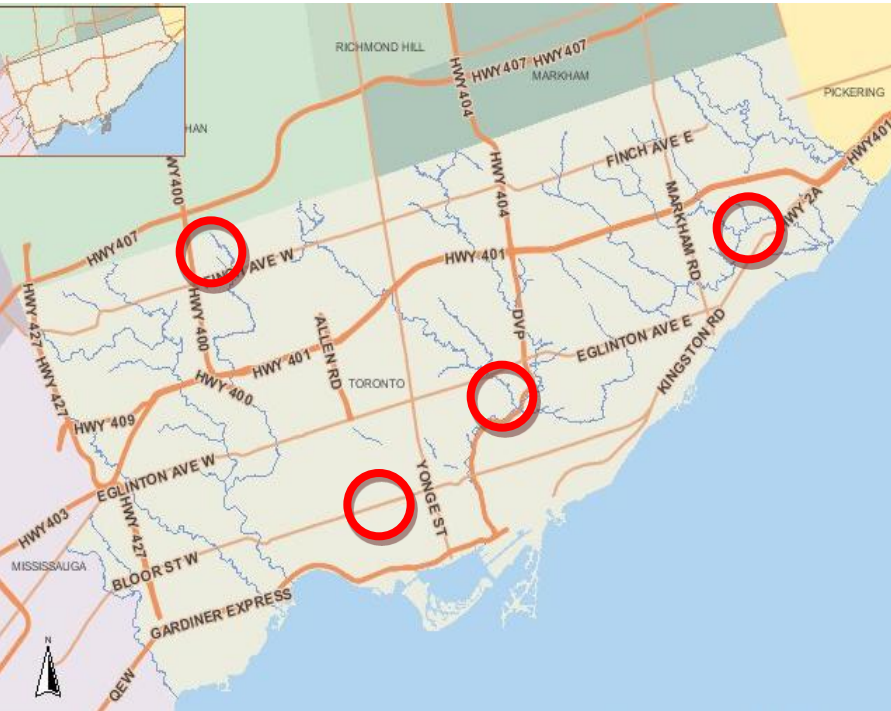


Photo: Ontario Growth Secretariat, Ministry of Infrastructure

- Neighbourhood design has a greater impact on the health and well-being of low income populations
- Walkable & transit-supported neighbourhoods can **reduce health inequities by increasing access** to jobs, health services, food stores and recreational facilities

Goals:

- Demonstrate that active transportation interventions are feasible and effective
- Build strong partnerships and work to improve active transportation in Toronto
- 4 sites selected
 - An area-wide approach is proposed





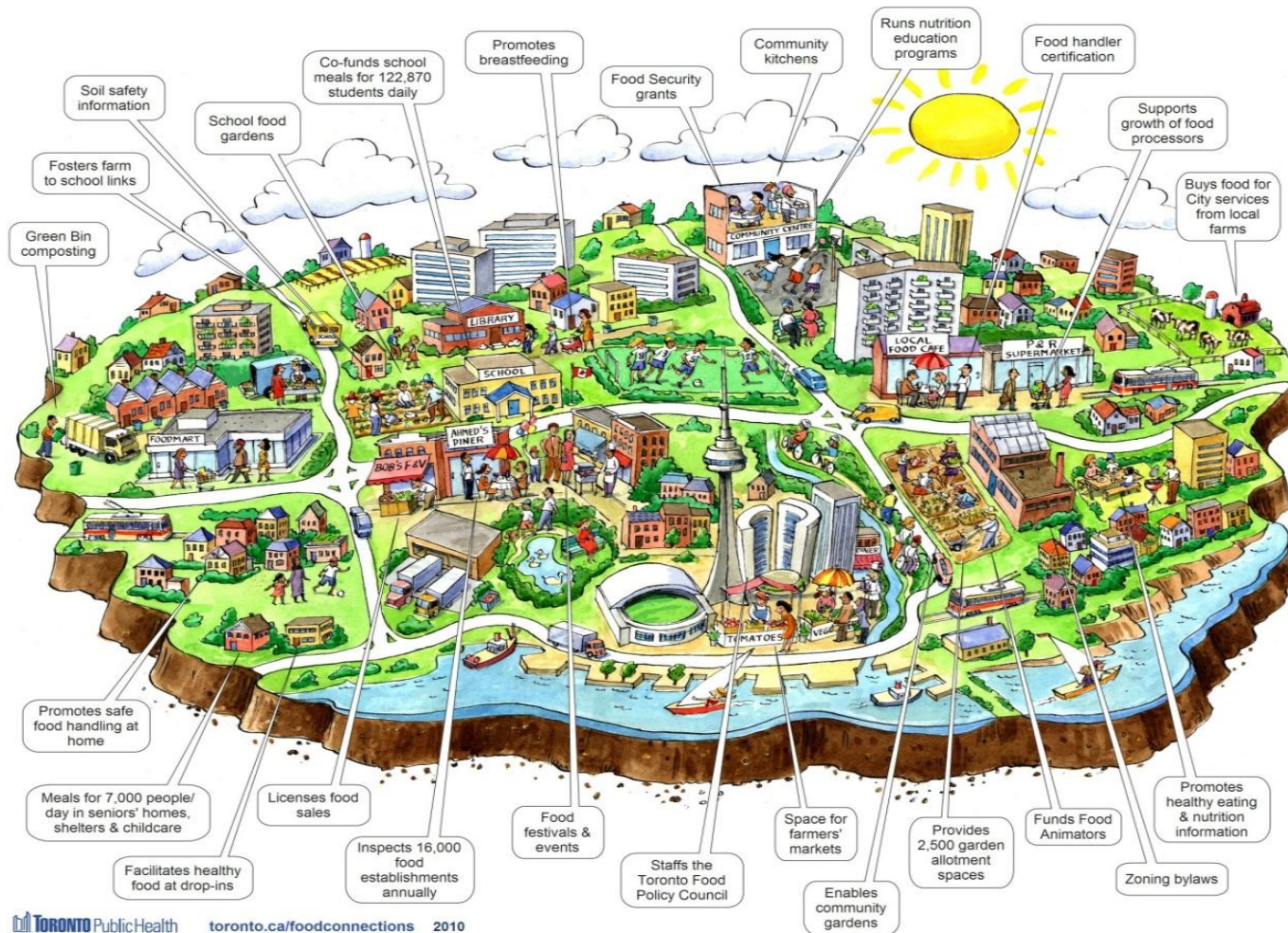
Cultivating Food Connections:

**Toward a Healthy
and Sustainable
Food System
for Toronto**

May 2010

Toronto Food Strategy

25 Food Connections to the City of Toronto



Diverse Suburban Neighbourhoods

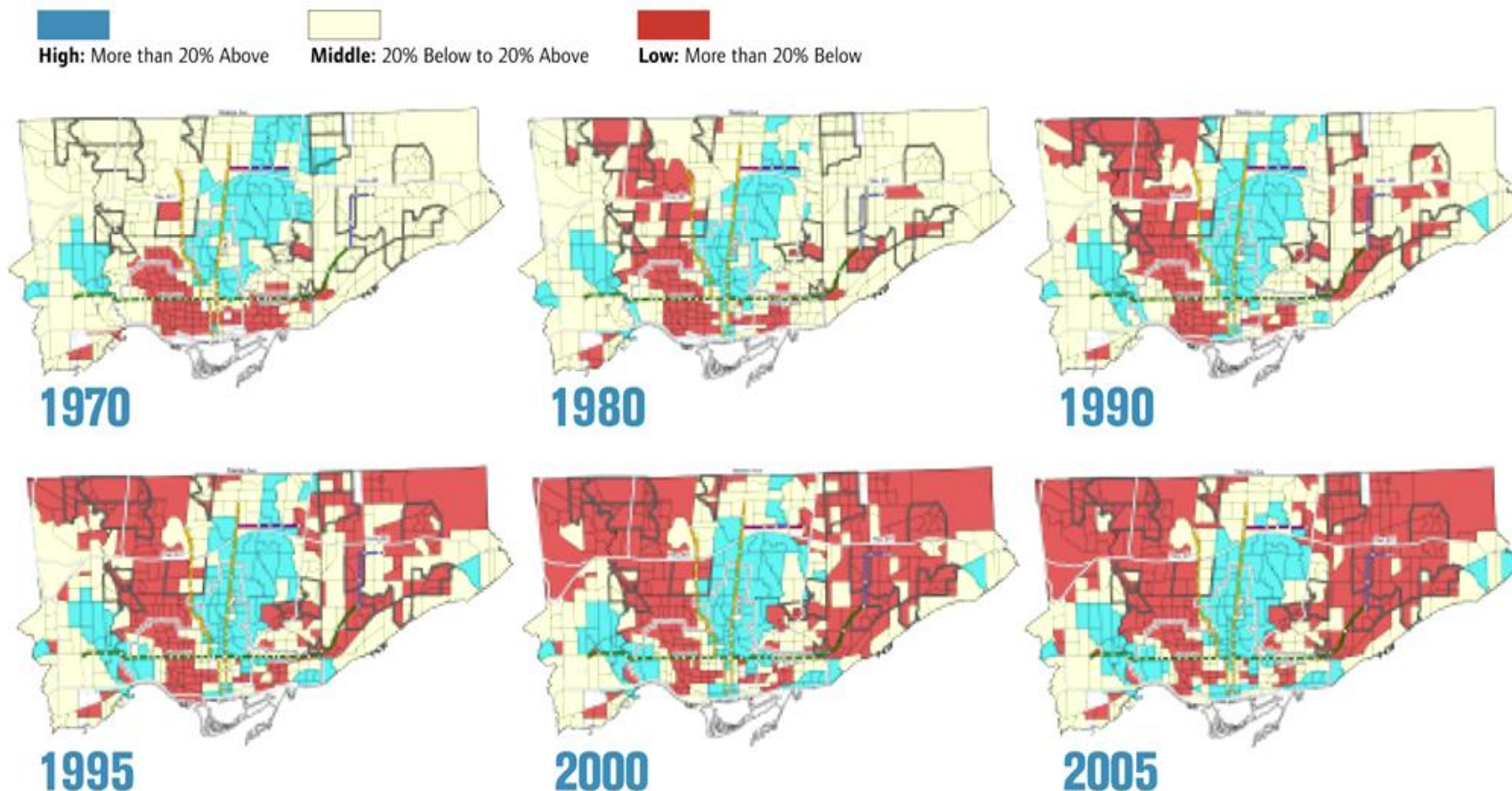


Photo: CUG+R / ERA Architects



Income Distribution in Toronto

AVERAGE INDIVIDUAL INCOME, CITY OF TORONTO, RELATIVE TO THE TORONTO CMA, 1970-2005



Source: THE THREE CITIES WITHIN TORONTO

Income Polarization Among Toronto's Neighbourhoods, 1970-2005

BY J. DAVID HULCHANSKI, UNIVERSITY OF TORONTO

Utilitarian walkability by 1km buffered postal code



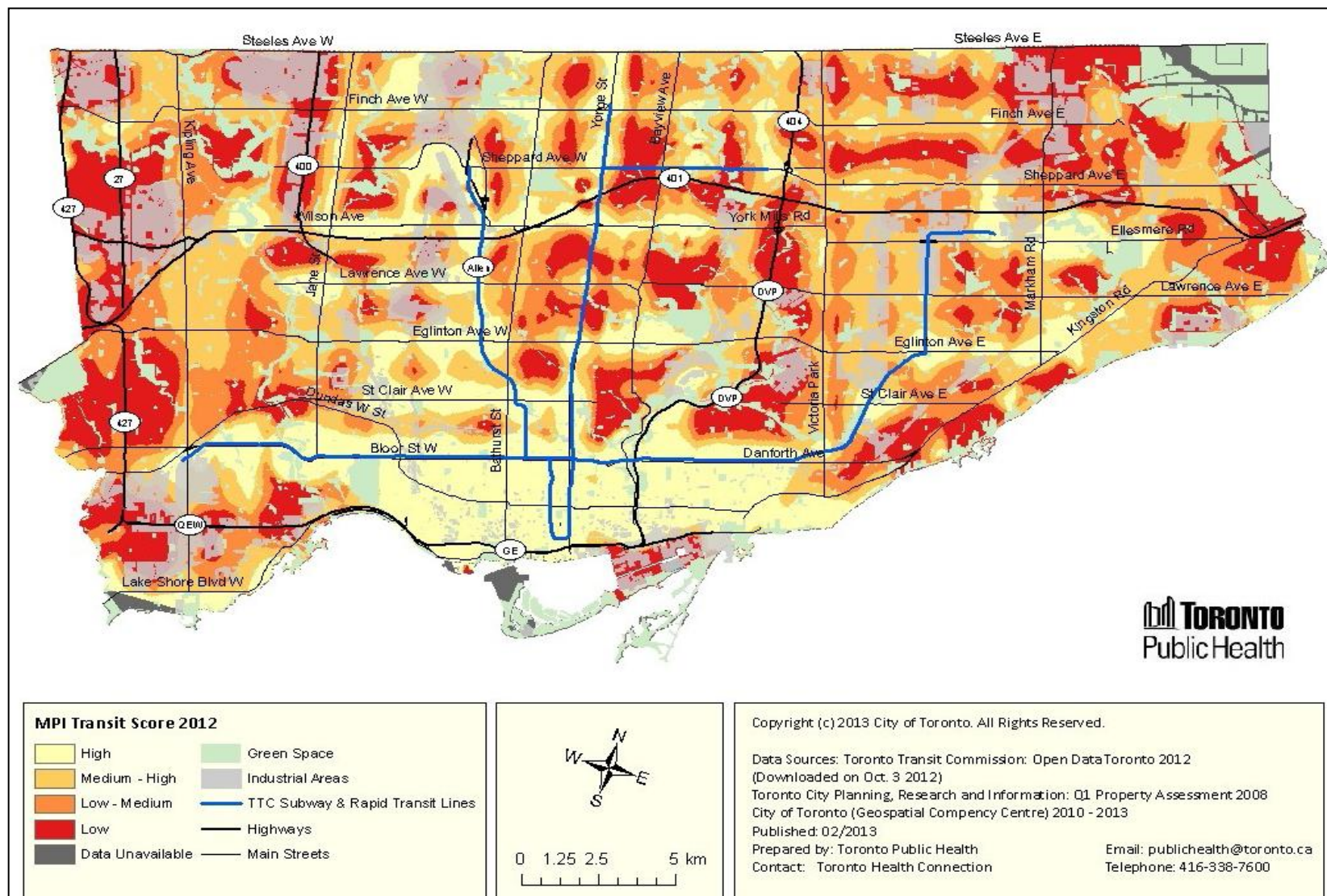
0 1 2 4 Km

Published: January 2012, City of Toronto

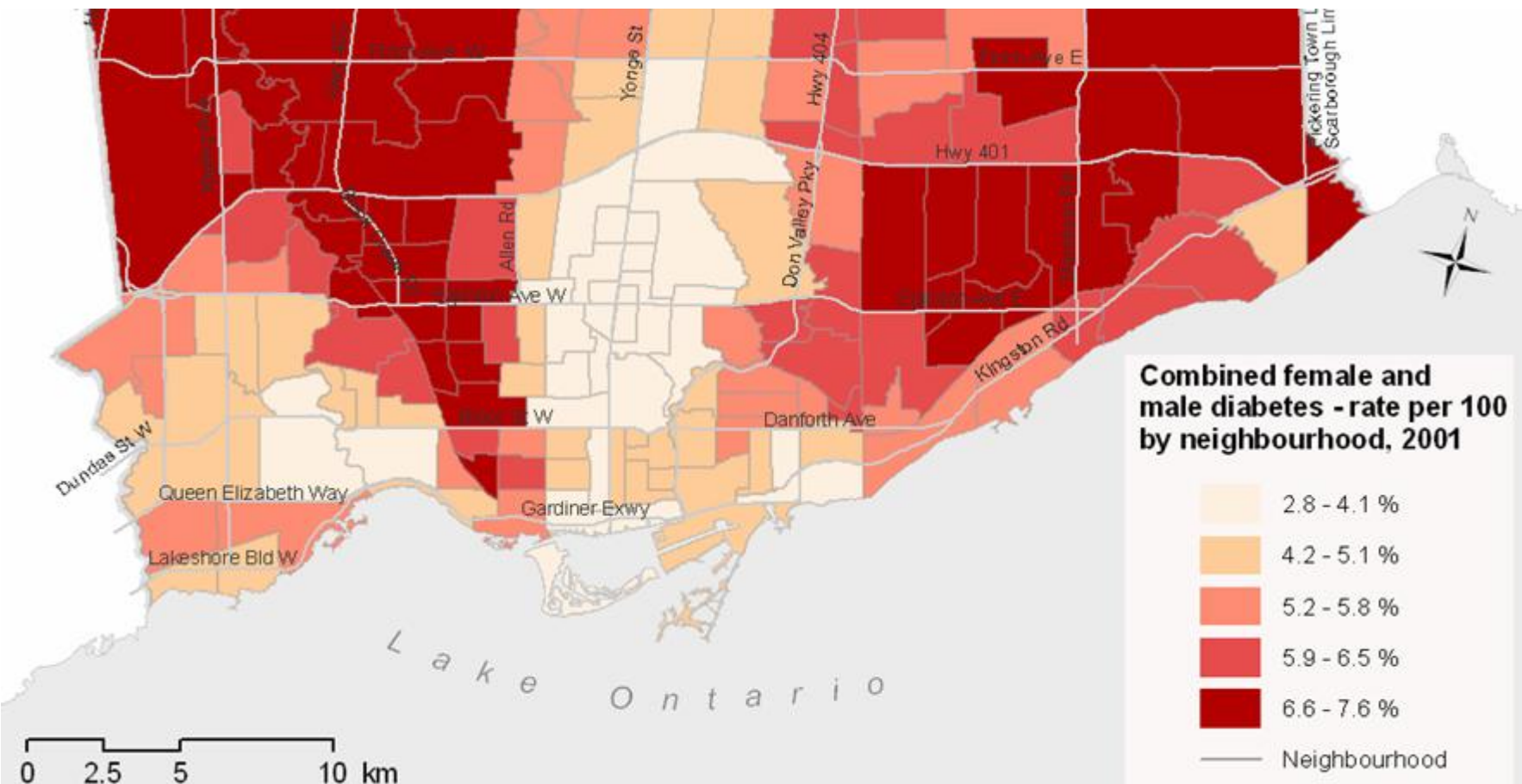
Prepared by: Urban Design 4 Health Ltd. and
Toronto Public Health

Data Sources: City of Toronto Geospatial Competency Centre; MPAC

Access to Public Transit



Diabetes Prevalence in Toronto Neighbourhoods



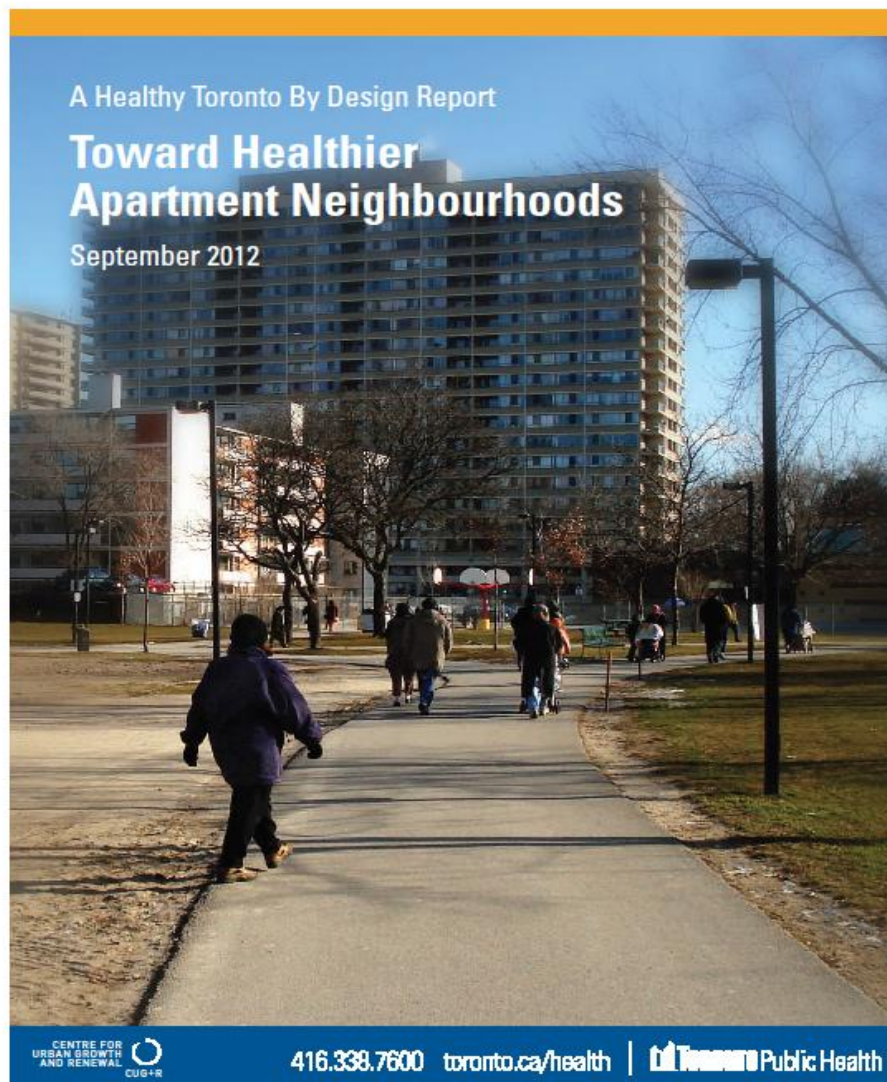
Booth GL, Creatore M, Gozdyra P and Glazier R. Patterns of Diabetes Prevalance, Complications and Risk Factors In: In: Glazier RH, Booth GL, Gozdyra P, Creatore MI, Tynan AM, editors. Neighbourhood Environments and Resources for Healthy Living—A Focus on Diabetes in Toronto: ICES Atlas. Toronto: Institute for Clinical Evaluative Sciences; 2007. p. 23.

Data Source: Ontario Diabetes Database

Apartment Neighbourhoods



Apartment Neighbourhoods



Apartment Neighbourhoods

Improve Apartment Neighbourhoods:

- Commercial activities
- New building structures
- Reallocation of parking space
- Access to green space
- Infrastructure for walking & cycling
- Urban agriculture
- Accessible public space

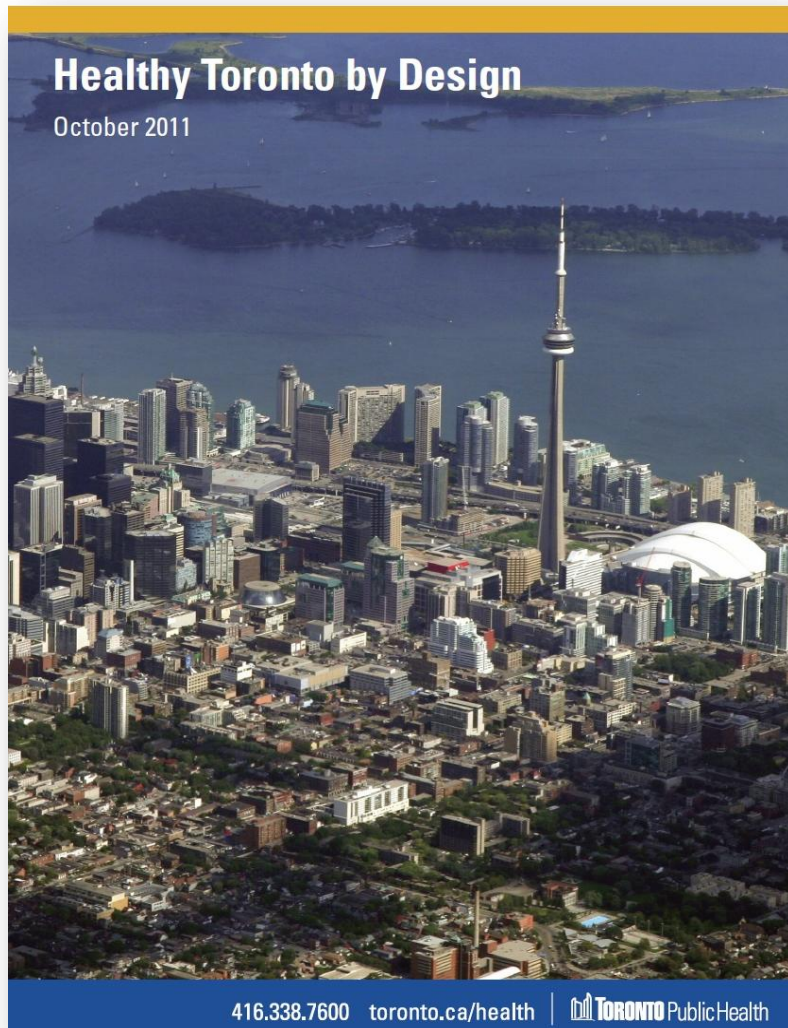
New Residential Apartment Commercial (RAC) Zoning



Photo: CUG+R / ERA Architects



Photo: CUG+R / ERA Architects



"Healthy Cities don't just happen.... They happen by design – through intentional and thoughtful investment and provision of infrastructure, programs and services with health in mind."

www.toronto.ca/health



HEALTHY**CANADA**
by design



 **Toronto**