

OPHA – Health and the Built Environment Work Group

Terms of Reference

The Terms of Reference will be reviewed at the first meeting each year and/or as necessary.

1.0 Background

The built environment has an important influence on the health of populations. For instance, the [Public Health Agency of Canada](#) lists the physical environment as one of 12 determinants of health. Moreover, the updated [Ontario Public Health Standards](#) (OPHS) 2018 describes Public Health work as, “Grounded in a population health approach – focused on upstream efforts to promote health and prevent diseases to improve the health of populations and the differences in health among and between groups,” and “Impacting communities by developing healthier built environments, responding to public health emergencies, and promoting social conditions that improve health.” (See What is Public Health? on page 5). Lastly, the OPHS 2018 includes the Built Environment specifically as important areas for consideration within two Program Standards: 1) Chronic Disease Prevention and Wellbeing and 2) Healthy Environments.

The built environment has been described and defined within supporting documents of the OPHS 2018. The [Chronic Disease Prevention Guideline](#) for OPHS 2018 describes the built environment as (see 6.2 Topics for Consideration on page 11):

The built environment is comprised of the buildings, transportation systems, energy systems, open space and agricultural lands that make up and support our communities. There is increasing evidence that the built environment has a direct impact on factors such as: employment; social support networks; and the physical and social environments that influence health and health equity and has been shown to impact physical inactivity, obesity, cardiovascular disease, respiratory disease, and mental illness, risk of injuries, and access to food. It influences our exposure to environmental health hazards such as air pollution and extreme heat. The diverse and changing communities in Ontario are important to consider when thinking about the built environment and its impacts on health.

The [Population Health Assessment and Surveillance Protocol](#) for OPHS 2018 also includes definitions related to the built environment (see Glossary on pages 16):

Physical environment: The physical, chemical, and biological factors within the home, the neighbourhood, and/or the workplace, which are beyond the immediate control of the individual that affect health. Among the most important factors will be air and water quality, waste management (domestic, industrial, hazardous, toxic), other sources of harmful substances (such as heavy metals and persistent chemicals), radiation, housing and other buildings, open spaces, natural or wild areas, global structures, and natural phenomena (such as ozone layer and carbon cycle).

The built environment is an important aspect of the physical environment and comprises urban and building design, land use, the transportation system and the infrastructure that support them. Several important built environment elements relate to walking rates. These elements include proximity to employment, retail, services, and recreation facilities along with other factors such as perceptions of safety, sense of community connectedness and neighborhood aesthetics.

Supportive environments: In a health context, the term supportive environments refer to both the physical and the social aspects of our surroundings. It encompasses where people live, their local community, their homes, where they work and play. It also embraces the framework which determines access to resources for living, and opportunities for empowerment. Thus action to create supportive environments has many dimensions: physical, social, spiritual, economic and political. Each of these dimensions is inextricably linked to the others in a dynamic interaction.

In order to improve the health of Ontarians in both rural and urban communities, there is a need for public health, using a health equity lens, to work with municipalities, planners, developers, provincial ministries, professional organizations and other partners to encourage:

- Walkable communities, including compact development that supports active and public forms of transportation
- Mixed land use
- Development that supports a variety of residential types, including affordable housing
- Buildings that meet the most stringent energy efficiency standards
- Building construction that provides for healthier indoor air quality
- Energy conservation and renewable energy generation (wind, solar, geothermal)
- Adequate separation of incompatible land uses e.g. sensitive uses separated from major sources of air pollution
- Brownfield redevelopment
- Pedestrian, cyclist and motorist safety
- Incorporation of natural and built shade structures into urban design
- Access to green space
- Access to healthy food choices
- Protection of agricultural land and other environmentally sensitive areas
- Protection and conservation of drinking and surface water.
- Complete communities* that encourage physical activity, enhance social connectedness and build social capital.
- Strategies to reduce community exposures to air pollutants e.g. traffic/trip reduction strategies, idle-free zones, drive-thru restrictions and Transportation Demand Management strategies (i.e. carpooling, telecommuting and active transportation)
- Climate change adaptation strategies in urban design e.g. infrastructure resiliency to respond to extreme weather events

** Complete Communities: Places such as mixed-use neighbourhoods or other areas within cities, towns, and settlement areas that offer and support opportunities for people of all ages and abilities to conveniently access most of the necessities for daily living, including an appropriate mix of jobs, local stores, and services, a full range of housing, transportation options and public service facilities. Complete communities are age-friendly and may take different shapes and forms appropriate to their contexts. (Growth Plan for the Greater Golden Horseshoe (2017))*

2.0 Purpose of the Health and the Built Environment Workgroup

To work collaboratively to improve the health of the public as it is impacted by the natural and built environment by building upon initiatives, research and advocacy done in local public health units and/or by other organizations recognized for their expertise in the area of natural and built environment. The work of this Workgroup also aims to complement its member's impact on their local efforts to create and maintain healthy built environments.

3.0 Primary Strategies

The Health and the Built Environment Workgroup will focus on the following types of Health Promotion strategies in order to accomplish its purpose:

1. Advocacy (e.g. conducting legislative reviews, preparing and submitting position statements)
2. Policy Development (e.g. sitting on provincial committees)
3. Capacity Building (e.g. collaborating with stakeholder groups/organizations)
4. Research, Professional Development, Knowledge exchange/translation (e.g. peer-sharing and presenting at conferences/workshops)

4.0 Workgroup Participation

There are three ways to participate in the workgroup: Steering Committee, Task Group, and Listserv member. Participation in the Workgroup is open to staff of local public health units in Ontario and members of organizations who collaborate with public health units on issues that affect health outcomes associated with the natural and built environment. Individuals can stay connected to the Workgroup via our Listserv. The workgroup will collaborate with others actively researching and working on health and the built environment issues in Ontario.

5.0 Steering Committee

The Steering Committee is made up of several members from across Ontario who has interests and expertise on natural and built environment issues. The Steering Committee is responsible for ongoing Workgroup tasks and decision making. Efforts will be made to have representation from Public Health Units in the areas of healthy environments, chronic disease prevention, injury prevention and healthy living. All members of the Steering Committee shall be current members of OPHA. The Steering Committee members will take an active role on the workgroup, as described below, in order to fulfill the primary activities outlined earlier in 3.0.

5.1 Co-chairs

The Steering Committee will have two co-chairs responsible for overseeing the Built Environment Workgroup. At least one of the co-chairs must be currently working at a public health unit/department. Co-chairs will represent either the healthy environments, chronic disease prevention, injury prevention or healthy living perspectives of the natural and built environment. The co-chairs will have a two year term which can only be renewed once.

The co-chairs are responsible for calling the meetings, preparing agendas, acting as an intermediary between the Workgroup and the OPHA Executive Director, liaising with other Workgroups on issues which overlap mandates, maintaining a list of Workgroup members, preparing an annual work plan and a list of accomplishments for the OPHA annual report. The chairs also take the lead on matters of interest to the BEWG as they arise.

5.2 Steering Committee Recorder

The recorder is responsible for taking and distributing the minutes. Minutes should be distributed within three weeks of the meeting. This task will be rotated at each meeting. Meetings will be decided quarterly and members are invited to volunteer to sign up for the recorder role well in advance of the meeting using the [schedule available online](#). If a member is unable to fulfill this role, it is up to that individual to find another recorder for the meeting.

5.3 Activities/Duties of Steering Committee members

- Contribute to actions related to the primary activities listed in section 3.0. This may include moving health in an all policy approach by: participating in policy and legislative reviews at the provincial and federal level, leading a new project idea, joining a task group, acting as a liaison for partner projects, cross professional collaboration/consulting with provincial ministries as required e.g. sitting on provincial committees.
- Provide health evidence and sharing expertise related to the natural and built environment in one or more of the following areas: healthy environments, chronic disease/injury prevention, active transportation, physical activity, access to healthy foods, access to green space, age friendly, climate change, land use planning and community design, mental health, health equity, determinants of health, policy analysis, and health promotion.
- Utilizing research, learning and identifying best practices, tools and resources related to the natural and built environment to inform policy and that can be used in day to day practice.
- Support the development of partnerships and networks with stakeholder groups and organizations
- Contribute to annual workgroup activities such as workplan development and reporting, planning webinars
- Providing professional development opportunities for building knowledge and skills for public health professionals

- Presenting at various conferences and workshops
- Attend a minimum of two meetings per year

5.4 Steering Committee Reporting

The Steering Committee co-chairs report to the Executive Director of OPHA and the OPHA board.

6.0 Task Group

Task groups will be created to work on specific projects identified as priorities by the Steering Committee. Each task group will have direct involvement of at least one member of the Steering Committee. Task group members may represent a variety of partner organizations and stakeholder groups. Task group members are encouraged, but not required to be OPHA members. However, the chair of the Task Group must be an OPHA member.

7.0 Steering Committee and Task Group Meetings

Steering Committee meetings will be held quarterly. To demonstrate our commitment to building healthy communities, meetings will be by teleconference or web based conferencing with agendas being sent out two weeks in advance. Face to face meetings will be no more than once per year, with the workgroup identifying ways to offset greenhouse gas emissions from vehicle distance travelled. Task Group meetings will be held according to the needs identified for their projects. Meetings by teleconference are strongly encouraged.

8.0 Listserv

Membership on the Built Environment electronic listserv is open to anyone with an interest in the topic of natural and built environment. Members will have the opportunity to provide input and feedback, as well as receive updates on workgroup activities.

(Terms of Reference initially approved – October 2010; Document Number: 691861- revised July 2013)

Last edited September 17, 2018