



**CALEDON**  
INSTITUTE OF SOCIAL POLICY

# **Recreation and Resilience**

*by*

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**February 2012**

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## ***Introduction***

Thank you for the invitation to participate in the inaugural National Recreation Summit. It is an honour for me to be asked to speak at this conference.

This meeting is significant because I believe it will help create a better understanding of the value of the work in which you are all engaged. I hope it will raise the profile of the invaluable contribution of recreation to the well-being of both individuals and communities.

My presentation today focuses on three main issues. First, I would like to discuss the burgeoning evidence that highlights *the wide-ranging value of recreation*, which is a fundamental component of social infrastructure. I will then present a framework that I have developed at the Caledon Institute on building *healthy communities*. Finally, I will consider *key actions and policy measures* that can be taken to advance the recreation agenda.

### ***A. Social infrastructure***

As polite Canadians, we use only the “h” word. In fact, Canadians are obsessed with two “h” words: hockey and health. Both have appeared frequently in recent news stories. While I know this is a recreation summit, I will be focusing primarily on health rather than hockey.

We typically speak with pride about our public health care system as a defining factor that makes us unique in the world. Health care ranks consistently high as a priority national concern. It remains a top policy issue as 2014 approaches – the date at which the current health care financing arrangements between the federal and provincial/territorial governments is due to expire.

Over the years, Canada has played a significant role in moving international thinking on health beyond a focus on health care. The report *A New Perspective on the Health of Canadians* and subsequent efforts helped move the conversation to a broader range of factors to which we need to pay attention related to lifestyle and health promotion.

There is now a burgeoning literature and growing international movement on the ‘social determinants of health.’ This body of work carries a clear message: Low income and other social factors have a powerful influence on health. If we want to improve *health* and not just *health care*, we must pay attention to such factors as poverty, housing and social supports.

There is also a crucial body of evidence on the significant impact of the environment on health. We must give credit to Dr. Trevor Hancock, who spoke earlier this week, for his tireless efforts in spearheading the healthy communities movement in this country. Its work focuses on the *quality of the environment* as a vital factor in shaping health and well-being.

I believe that we are finally starting to see greater recognition of this *quality of place* concept. Much of the impetus for this perspective in recent years is coming from – of all sources – the economic literature, which is pointing increasingly to the quality of life as a major driver of economic growth.

Research on the ‘new geography’ argues that in order to thrive in the knowledge economy, communities must pay special attention to factors that relate to lifestyle and cultural choices.

Urban areas and surrounding regions face new demands arising from the need to attract investment and the best possible talent in the world. In order to draw the world-class talent they require to compete economically, regions need to improve their ‘quality of place.’ They must pay far more attention to social and environmental factors than they might have in the past.

Urban areas and surrounding communities are viable as economic regions only to the extent that they have – and are seen to have – a high quality of life. Knowledge workers essentially balance economic opportunity and lifestyle in selecting a place to live and work.

Lifestyle factors appear to be as important as traditional economic factors, such as pay and benefits, in attracting talent. The quality of a region’s lifestyle has as much to do with its success as its business cost structure, taxes and physical location.

This work is consistent with a study of world-class cities, which argues that healthy communities need both magnets and glue. Magnets refer to the factors that attract a flow of external resources – such as new companies and people – to renew and expand skills, and contribute to the economic health of the region.

Magnet factors typically include a healthy and well-educated workforce, clean environment, vibrant business climate, and solid social and cultural infrastructure. Several factors that comprise the magnets of a community – notably its social and cultural infrastructure – also comprise its glue that effectively holds it together.

So what is this glue? What is this social infrastructure that adds so much value to our communities? It includes places and programs. Think of it this way: The four walls of your residence comprise your *house*; the caring relationships within it make it your *home*.

Social infrastructure includes *physical places* like schools, libraries, early childhood centres, parks, playgrounds and recreation centres. While providing the physical places for social purposes, social infrastructure includes *activities* that contribute to positive well-being.

Recreational and cultural programs are the main form of social infrastructure. And their impact is profound, given findings from the burgeoning evidence on the physical, emotional and social benefits of recreation.

For the purposes of our discussion today, ‘recreation’ is a broad concept that includes formal sport, active living such as walking and hiking, and activities such as cultural dance.

The substantial benefits of recreation related to physical health, in particular, are well documented. Physical exercise promotes the optimal performance of all major biological systems – musculoskeletal, cardiovascular, immunologic, neurosensory and gastrointestinal. While recreation benefits the entire population, it is especially important for seniors and young people.

In the case of seniors, active living prolongs independent functioning by staving off the diseases typically associated with aging. Physically active older adults tend to be one or two decades younger physiologically than their sedentary counterparts. The evidence is in: Exercise can slow the aging clock.

At the other end of the life spectrum, physical activity has a positive impact on the growth and maturation of children and youth. It is linked to increased muscle strength, bone density, motor fitness and aerobic capacity. Physical activity can help control childhood obesity, reduce elevated blood pressure and improve overall growth.

In addition to healthy bodies, involvement in recreational and cultural activities has been found to contribute to positive mental health. Regular physical activity is linked to improved self-concept and self-esteem, lower stress and anxiety, and fewer depressive symptoms. This is crucial given the recent concern with high rates of youth suicide in Canada.

Young people who participate in recreational activities experience less boredom, which is associated with hopelessness, loneliness and depression. Boredom has also been linked to alcohol use among college and high school students, smoking among high school students, deviant behaviour at school and overeating.

Organized sport provides opportunities to learn from coaches, instructors and mentors. Children who participate on teams acquire valuable leadership skills and improve their social interaction in terms of sharing and cooperation. They tend to interact more positively with friends and perform better in school.

This active involvement in communities at younger ages promotes social connectedness and helps foster the relationships and networks that comprise social capital. There is a wide-ranging literature on the health, social and economic benefits of social capital.

Recreation is also emerging as crucial for families and children deemed to be ‘at risk.’ Recreation, sports and arts programs have been found to help prevent negative social behaviour in youth. These programs are particularly effective in reducing crime among young offenders and lowering the cost of social services and the juvenile justice system.

The Vancouver-based Take a Hike, for example, is an alternative education program. It works with at-risk youth through a unique combination of adventure-based learning, academics,

counselling, and community involvement. At the beginning of the year, the Take a Hike staff meet with each student to assess academic level and set out a plan that will lead to graduation. The outdoor trips reinforce academic lessons. Learning and recreation are intrinsically linked in this approach.

Finally, recreation has been found to have surprisingly positive impact for families grappling with poverty. A study conducted several years ago at McMaster University used a randomized trial to assess the effectiveness of various interventions in helping families on social assistance (also known as ‘welfare’).

The sample of 765 households (involving 1,300 children) headed by single-parent mothers on social assistance were randomly assigned to one of several groups that included public health nurse case management, employment retraining/child care, recreation/skills development and self-directed care.

The study found that recreational services helped ‘at risk’ children on social assistance maintain their social, physical and academic competence at a level equal to other children. Without the services, competence levels actually dropped.

The impact of providing recreational services alone resulted in a 10 percent greater exit from social assistance compared to the parents of children who did not receive this service. Twenty percent of parents whose children received recreational services exited from social assistance after one year. Only ten percent of parents without services left the program after one year. Healthy communities turned out to be, at least in this study, the most powerful driver in moving off welfare.

## ***B. Healthy communities***

If recreation – and social infrastructure more generally – are so important to physical, emotional, social and economic well-being, then how do we ensure that this form of social infrastructure is front and centre on the radar screen? There are many actions to help achieve this objective.

The first step is to embed the notion of invaluable social infrastructure as a core element in our thinking about communities. Recreation and social infrastructure must be acknowledged for what they are – *essential building blocks in healthy communities*.

We need to stop viewing recreation as a set of one-off boutique programs that are sprinkled throughout communities when there are a few extra dollars to spare. Recreation must be embedded in local planning and policies as a vital component of a good quality of life. I would like to present today some work that I believe can help move us in this direction.

I had been asked to develop a framework on communities as part of a project in which the Caledon Institute had been involved for more than 10 years. Vibrant Communities is a pan-Canadian initiative in which 13 communities throughout the country are joined together in a learning partnership seeking local solutions to reduce poverty. Caledon was responsible for the policy and learning components of the work.

The initiative had been grappling with the concept of ‘vibrant communities.’ We were asking – as a pan-Canadian learning partnership – what do community-based groups and organizations actually *do* to build healthy communities? This collective task became part of our ‘communities agenda.’

To help address these questions, we began to explore the concept of resilience, which was emerging in the international literature as a relevant concept on several fronts – including much of the work on sustainable development. It is a concept that speaks to inherent strength in the face of tough circumstances.

I thought that the task would be fairly straightforward: to carry out research on resilience and apply its core elements to assist us in building healthy communities. Not so fast. The concept of resilience turned about to be far more broad-ranging than first thought.

The notion of resilience actually has helped shape two major, but quite different, streams of literature. They relate to *ecology* and to *mental health*.

The ecological literature on resilience is probably the most widely recognized application of the concept. Resilience is the rate at which a system returns to a steady state following some form of disturbance, such as earthquake, tsunami, hurricane or oil spill.

The ecological stream of literature talks about resilience as the ability of a natural system to maintain its structure and function in the face of disruptive force. Its equally important adaptive capacity is the ability to successfully accommodate the impact of change.

The notion of resilience as the ability to cope with natural pressures has been interpreted by some governments as emergency preparedness or disaster planning. *Survival* and *adaptation* are two distinct, but intrinsically linked, components of this concept.

But there is another major body of work with resilience as its foundation. The mental health field is concerned with understanding the characteristics, behaviours, skills and competencies of individuals deemed to be resilient. These are people who have faced great personal challenge and have emerged relatively healthy and strong.

While the ecological interpretation of resilience focuses on natural disturbances, the mental health literature has its own representation of disruptive force – the death of a family member, domestic violence, disability or illness, alcohol or drug abuse, or other threat to emotional stability. Resilience is the ability to cope with these perceived or actual threats.



The mental health literature on resilience goes beyond survival and coping. It implies that the person who withstood difficult circumstances and came out well is actually emotionally stronger as a result. In fact, a consortium of researchers comprising the Global Resilience Project define resilience as not simply bouncing back from adversity – but as the capacity to be strengthened and improved by it.

Whether viewed from an ecological or mental health perspective, there appear to be several core themes embedded in the concept of resilience.

Resilient individuals, families, communities and nations are able to *survive* in the face of ongoing change or imminent threat because of innate strength as well as their capacity to *adapt* effectively to those changes. But beyond mere survival and adaptation, they typically emerge even stronger and healthier as a result. They engage with the identified problem and see opportunity for improvement through their personal struggles. In short, they *thrive*.

The challenge was to figure out how to apply to communities these overarching themes of survival, adaptation, engagement and opportunity. These core components became the main building blocks for thinking about building resilience. In the resilience framework subsequently developed, healthy communities needed to take action in four distinct clusters related to these core areas.

When field testing these concepts, however, a participant noted that in the developed world, survival is less of a problem than the ability to sustain oneself over time. She pointed to the working poor as the prime example of this problem. Her suggestion was to use the term ‘sustenance’ instead of ‘survival.’

The *sustenance cluster* is the first set of activities in support of resilience. It is concerned with basic needs related to nutritious food and decent affordable housing. It also focuses on basic health protections, such as immunization against communicable disease, and with actions that ensure clean air and water.

Adaptation is the second cluster of actions that contribute to resilience. The *adaptation cluster* comprises the group of activities that deal primarily with basic coping skills and capacities.

One of the most important building blocks in the adaptation cluster relates to early childhood development. The literature on child development is rich with evidence on the importance of fostering the qualities of resilience – self-esteem and positive coping mechanisms – at the very early stages of life.

Another component of the adaptation cluster involves the basic proficiencies required in the knowledge economy: literacy, numeracy, basic communications and problem-solving skills. Literacy proficiency, in particular, is essential not just for getting along in the world. It also

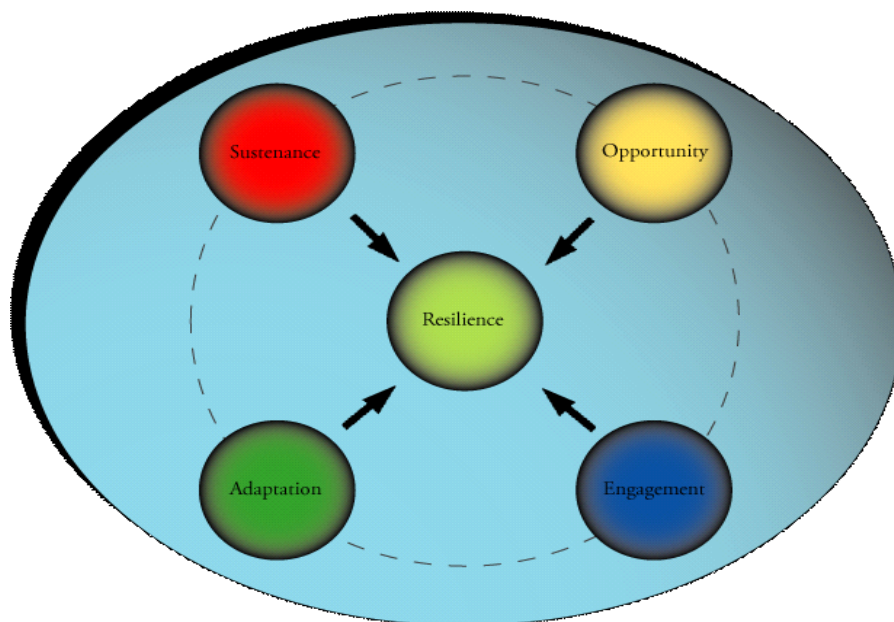
provides the means for participating in all spheres of a community and the nation. It acts as a foundation to the third steppingstone on the pathway to resilience – engagement.

The *engagement cluster* of actions is concerned with participation in society. This cluster includes initiatives related to culture and recreation as well as contributions of unpaid time through volunteering and participation in decision-making.

The *opportunity cluster* comprises the fourth major group of actions that contribute to resilience. One stream of work in this cluster involves direct investment in work-related skills. Another set of actions involves the creation of economic opportunities within the context of the social economy, which harnesses both private and public capital for social purpose. A third dimension of the opportunities cluster focuses on the creation of assets, through such measures as individual development accounts, learning bonds and home ownership.

Taken together, the four clusters of activity related to *sustenance, adaptation, engagement and opportunity* comprise the *substantive* actions that promote a good quality of life in communities. Resilience requires substantial and diverse activity in all four clusters – both individually and together. Each cluster must be healthy and robust.

## Resilience Framework



There are several reasons why I believe this to be a powerful framework. It basically contains the core components of an equation. The left-hand side of the framework related to sustenance and adaptation comprise the essential *safety net* functions of communities. All citizens must be able to *survive*.

The right-hand side of the framework – its engagement and opportunity functions – is concerned with the *springboard* elements of communities. These actions help ensure that citizens can *thrive*.

Another way to look at this framework is to consider its top and bottom components. Sustenance and opportunity are concerned with essential ‘things’ like food, clothing, shelter, skills, jobs and assets. These focus primarily upon instrumental necessities. Equally important to resilience are the emotional basics that seek to develop personal capacity (adaptation) and to ensure social inclusion (engagement).

Finally, this framework is intended to help us *think differently* about recreation in particular. It positions recreation – a central component of engagement – as a core building block of healthy communities.

But this framework embodies more than a way of thinking. It is also intended to help us *act differently*. It encourages implicitly a more coordinated and collaborative approach by virtue of the conceptualization of each building block as a set of interrelated actions or clusters.

Most community programs have operated in the past as separate entities with few links to anything else. We tend to think about recreation as a set of one-off programs which, despite their tremendous value, have no links to anything else. Of course, this compartmentalized thinking is not unique to recreation.

Both governments and community agencies typically are organized to deal with problems as though these can be segregated into distinct social, health, education and economic needs. Small allocations are directed toward single programs.

The funding process itself often creates mini-constituencies that effectively must compete with each other to survive. Current funding and delivery mechanisms tend to disorganize the community and often add to the dysfunctions we are trying to address.

An approach known as comprehensive community initiatives has emerged both in response to recent practices that have proven ineffective and as a reformulation of approaches to community development that have been tried in the past. Comprehensive efforts require a set of ‘joined up’ actions.

Healthy activity in each of the core clusters of the resilience framework requires that they be linked in two ways. First, they need to be joined up effectively *within the same cluster*. We need to act more coherently and cohesively in what we do. Second, we need to look for possible links *between and among clusters*. Making connections outside traditional clusters provides more opportunity for acting comprehensively. Here are some examples.

*a. Within clusters*

Within the engagement cluster, Play Works is a movement of organizations that promotes investment in youth play and access to recreation. Partners include Parks and Recreation Ontario, the Ontario Physical and Health Education Association, 4-H Ontario, Arts Network for Children and Youth, Sportalliance, the Laidlaw Foundation, Boys and Girls Clubs of Ontario, YMCA Ontario and youth.

Play Works encourages recreation departments to work more closely with children's programs and the Ontario Ministry of Children and Youth Services, in particular, to replace compartmentalized funding with joined-up investment. The project also supports the use of community spaces, such as schools, as play-friendly areas.

Governments are also starting to act more cohesively. Québec en Forme, for example, promotes the adoption of healthy eating habits and a physically active lifestyle by youth up to age 17. The program provides support to communities and organizations creating the conditions that enable healthy eating and active lifestyles.

In Ontario, the Healthy Communities Fund makes available support to community partnerships to plan and deliver integrated programs that improve health. The Fund seeks to create a culture of health and well-being, and to build healthy communities through joined-up action.

Active Alberta is a government policy to promote recreation and active living through a coordinated system, involving diverse stakeholders: non-profit organizations, other orders of government, the private sector and citizens. It involves a wide-ranging approach to program design, service delivery and funding in order to produce measurable results on activity levels, health and quality of life.

In September 2011, BC announced an initiative to promote healthier lifestyles and prevent chronic disease. Consultations will take place with local governments over the next few months to help launch *Healthy Families BC*. Provincial health authorities will work with communities to develop plans to make their city or town healthier. Planning can take place in areas such as physical activity, healthy eating, tobacco reduction, healthy built environments and priority populations.

*b. Between clusters*

Joining up between clusters is equally important to coherence and creative approaches. A comprehensive community initiative in the Saint-Michel neighbourhood of Montréal has developed an ambitious revitalization plan that builds on a strong local base.

The neighbourhood had created *Vivre Saint-Michel en santé* in 1999 as part of the healthy communities movement. The community's identity had been built largely on its past role as a dumping ground for garbage, after the closure of huge local quarries.

The renewed vision of the neighbourhood, developed by several hundred citizens, is based on a broad articulation that emerged from a community assembly. Culture and recreation lie at the heart of the neighbourhood plan for economic and social renewal.

Saint Michel has opened a new community centre and is working with the City of Montréal to ensure the presence of active cultural and recreational programming. A place with no programming, in the view of community leaders, actually can create problems rather than produce solutions.

Saint Michel joins up its work between clusters in an interesting way. The neighbourhood is the birthplace of the founder of *Cirque du Soleil*, which has built a circus arts training centre in the community. The company trains young people in circus performance to help keep them off the streets. But it also assists them find employment in *Cirque du Soleil* and other theatrical shows. Their *engagement* has become an important basis for building *opportunity*.

London, Ontario's Strengthening Neighbourhoods Strategy is a five-year strategy initiated by the City of London. It was formulated after meetings with more than 100 community members and organizations. The Strengthening Neighbourhoods Strategy Work Plan links closely to local environmental objectives. The recreation focus in the form of improved walkability, bike lanes, safe road biking and green spaces dovetails well with goals for a cleaner community – joining *engagement* and *sustenance*.

Here's another example of joined-up interventions. One of the first community stories that Caledon ever published was about a shopping plaza called the Dufferin Mall. The mall was experiencing difficulties related to break-ins, robberies and harassment of customers by young people hanging out at the mall. It was becoming increasingly like a fortress with its security cameras, guards and alarms.

One day, a murder was actually committed at the mall. The mall manager decided at that point that he had to take a substantially new approach. A murder was not so good for business.

His first realization was this: The fact that a murder had been committed at the mall was not his problem alone. The plaza happened to be in the catchment area of six schools. Why were the young people hanging out at the mall not in school? Did anyone realize that these young people were missing?

The mall manager convened a meeting to which the six school principals as well as representatives from the multiple community agencies in the area were invited. They were gathered at the table and he said "WE – all of us – have a problem. We have to figure out together how to resolve it."

After considerable discussion and debate, they decided several meetings later to turn the mall into a local hub for the youth. Rather than turning them away (it is not so good for business to turn anyone away), it was preferable to provide a positive safe space – a community hub – that would welcome the young people.

The youth were consulted about their activity preferences. The first action was to create a baseball team. A drama group subsequently was set up along with other programs. The mall as hub helped turn around a bad situation. Recreation became the vehicle through which to tackle a significant social problem.

At the government level, Healthy Child Manitoba joins up efforts between the *adaptation* and *engagement* clusters. It is a long-term cross-departmental strategy to support the healthy development of children and adolescents. Seven departments are working together under the Healthy Child Committee of Cabinet to ensure that all children are physically and emotionally healthy, safe and secure, successful at learning and socially engaged.

Under the strategy, Manitoba Health and Healthy Living partners with Manitoba Education, Citizenship and Youth to support the Healthy Schools initiative. Its six components include healthy eating, physical activity, safety and injury prevention, mental health promotion, healthy sexuality, and substance abuse and addictions.

The Alberta Obesity Strategy launched in September 2011 is another example of joining up among clusters. This comprehensive, five-year plan comprises a set of services, from community programs on active lifestyles and healthy eating to intensive medical intervention that includes bariatric surgery. This comprehensive approach recognizes the complexity of obesity prevention and management.

There are many other examples of this kind of collaborative work. I believe that the resilience framework presented here and the concepts it embodies can help reposition recreation and reinforce its importance within social infrastructure. Of course, other actions must be taken as well.

### ***C. Proposed actions***

#### ***i. Reposition recreation***

There are likely many different ways to reposition recreation. Caledon has done this in our own work by including it as a vital part of social infrastructure and as a crucial component of the quality of life.

Moreover, recreation is central to engagement, a core function of resilient communities. Several municipalities are using the resilience framework as a planning tool.

I don't believe that there is any single or correct way to reposition recreation. But it *is* essential to have a clear conceptualization that provides a strong foundation to help advance this work. It is also important to consider the role of many sectors and diverse players. Advancing recreation is not a government agenda alone – though there are many links to relevant policy agendas.

## *ii. Embed recreation in relevant policy agendas*

A related action to help raise the profile of recreation is to find ways to embed it in relevant policy agendas. It is clear from the evidence earlier cited, for example, that recreation is a *prescription for health*. But wide-ranging research points to the fact that it is also a *prescription for health care*.

Health care costs are rising exponentially due not – at least directly – to the aging population. Rising costs are linked primarily to the growing incidence of multiple chronic diseases, including heart disease, obesity, diabetes and mental health. The World Economic Forum estimates that five chronic global illnesses – cancer, heart disease, diabetes, respiratory diseases and mental illness – will cost \$47 trillion on a global scale over the next 20 years.

Cancer and heart disease, the two leading causes of death, were responsible for just over half of the 235,217 deaths in Canada in 2007. With diabetes and hypertension on the rise, the prevalence and associated economic burden of these conditions are expected to increase as the population ages.

Obesity is one of the most pervasive and serious of chronic diseases. It is linked to 22 other chronic conditions, including up to 90 percent of all Type 2 diabetes, 80 percent of cardiovascular disease and 30 percent of cancers. The World Health Organization warns that the impact of obesity threatens to overwhelm health care systems.

The dramatic increases in overweight and obesity among Canadians over the past 20 years have been called an epidemic. The most recent figures from 2010 show that about 1 in 4 adults and 1 in 11 children in Canada are obese. The estimated annual cost to Canadian communities is \$4.6 to \$7.1 billion.

The rising incidence of multiple chronic diseases is one of the most complex public health issues facing Canada, and is beyond the health care system alone to resolve. While the risk of developing chronic conditions increases with age, good primary care and prevention play a strong role in managing them and even delaying or preventing their onset.

Fitness and active living have proven to be a powerful antidote to several of these conditions. They actually can help prevent some chronic illnesses or at least reduce their impact if they do occur.

A recent study in the medical journal *Lancet Neurology*, for example, found that people who are physically active are less likely to develop dementia. An estimated 13 percent of Alzheimer cases were likely due to inactivity.

Recreation and active living reduce significantly the risk of coronary heart disease and stroke. They help combat osteoporosis, affecting 25 percent of menopausal women. Recreation

and active living also have been found to reduce diabetes, the fourth major killer disease, and to prevent specific cancers, particularly in the colon, breast and lung.

The health care system would gain immeasurably from reduced costs that would be spent on the medical treatment of these conditions. Recreation and other social determinants of health should figure prominently in any federal-provincial/territorial discussions on health care reform.

### *iii. Remove barriers*

But participation in recreation is often easier said than done. There are many barriers, which are rooted in various factors including accessibility, transportation, information and parental engagement, and affordability.

Affordability is always raised as a problem because it derives from larger financing issues. Recreation and the arts are among the first targets when it comes to government cuts. These areas tend to be funded primarily by municipalities, though some programs receive provincial and federal support while others are sponsored by corporations or community foundations.

Programs that do manage to elude the knife often survive only because users are required to make a private contribution to offset the cost of these social amenities. In fact, the vast majority of recreation departments charge fees for at least some of their programs.

There is no consensus on the impact of user fees. Some economists argue that these are the best way to pay for municipal services and that there is no disproportionate burden on lower-income households.

Others contend that lower-income households pay the price, literally, for user fees. Those who cannot afford the fees participate less in cultural and recreational programs or not at all.

In fact, the evidence appears to show that participation in physical and artistic activities is particularly low and irregular for children from low-income families. The differences are even greater for structured recreation and programs that involve instruction or expensive equipment.

Assuming that user fees do, indeed, deter participation in recreational programs, one policy response is for municipalities to examine their subsidy policies.

Many municipalities provide some form of recreation subsidy to help lower-income families. However, the eligibility criteria are often restrictive or onerous. In some communities, for example, applicants must pay their doctors to complete a medical form in order to qualify for a subsidy worth only about \$50. This practice is also an inappropriate use of the health care system.



On a positive note, the City of Vancouver recently introduced a Leisure Access Card for low-income residents. It allows access to all Park Board public swimming and ice skating sessions as well as use of skates during these sessions. It also offers 50 percent discounts for skate and swim lessons and a variety of facilities. These kinds of positive municipal practices should be documented and shared.

Another response is for municipalities to make available their facilities at low or no charge for parts of the day or week. They can also set up free or low-cost programs. The Canadian Parks and Recreation Association spearheaded in several communities across the country a multi-year national initiative called *Everybody Gets to Play*. The project was organized to help redress the many barriers facing low-income families that wish to participate in recreational activities and programs.

The Kids Recreation-Sunshine Coast project in BC, for example, was part of this *Play* initiative. It engaged the contributions of more than 38 individuals and organizations to organize free programs including fitness classes for high school students, youth dance and Instructor in Training programs for youth. It provided fitness equipment and clothing, and volunteer training instruction for adults. The project also worked to overcome barriers to transportation.

While improved subsidies and lower-cost programs are important responses, they may not be able to supplant user fees, which are merely the tip of a big fiscal iceberg. The fundamental problem derives from the limitations in municipal powers to raise and spend revenue, which are restricted by provincial legislation.

Municipalities have only limited sources of revenue. These include property tax, payments from higher orders of government in lieu of taxes, and fees from various sources such as development charges, permits and admissions, user fees (and parking tickets!).

The fiscal capacity of municipalities does not match their wide-ranging responsibilities. Local governments and regions require substantial funds to make themselves attractive. As earlier described, they need to create both magnets and glue.

Local governments also face increasingly complex social problems, such as high poverty and growing inequality, homelessness and an aging population. Cities still carry much of the load for immigration, the environment, affordable housing, public health, emergency preparedness and public security. But they have neither the funding nor the taxation power to carry out these responsibilities effectively. Alan Broadbent discusses this issue in his book *Urban Nation*.

Municipalities in Ontario struggle with an even greater burden as a result of the disentanglement exercise announced in 1998. The province downloaded many of its responsibilities onto local governments in order to ‘clarify’ and ‘rationalize’ their respective areas of jurisdiction. At least in recent years, Ontario has taken back some of these responsibilities and uploaded the associated costs.

Yet another constraint on local governments is the fact that they are not permitted to run deficits on their operating budgets. All operating costs must be paid without borrowing from the bank. They either must raise property taxes and user fees or cut programs in order to toe the line on spending.

But even if local governments faced none of the newer pressures, they would still be grappling with pressures from the past. The physical hardware of the country – the roads, sewers and bridges – is in serious need of upgrade and repair.

The Alberta Chambers of Commerce and the Certified General Accountants Association of Alberta have argued that the revenues for infrastructure financing are not keeping pace with the expenditure requirement. In 2007, the Federation of Canadian Municipalities pegged the total infrastructure deficit at \$123 billion. The cost of new infrastructure was an estimated \$115 billion at that time.

The vast majority of publicly-owned recreation facilities, in particular, were built between 1965 and 1980. Facilities of this age not only require capital renovation or replacement but they are also more expensive to operate. In 2005-06, the national recreation infrastructure deficit for Canada's arenas, pools and community centres was an estimated \$15 billion – the projected cost to repair or replace existing inventory.

So what are the policy remedies to tackle this big financing problem? Federal and provincial grants play an invaluable role in helping cities close the infrastructure gap. In the 1960s, the percentage of GDP invested in public works was 3 percent. It had dropped to 1.5 percent by 2003.

A positive development on this front took place in 2009 when Ottawa introduced, as part of its two-year Economic Action Plan, a federal Recreation Infrastructure Program worth \$1 billion.

In September 2011, BC announced a \$30 million allocation to communities to give families greater access to recreation facilities. Eligible projects will include sports and fitness facilities, community recreation spaces, trail and walkways, bike paths, playgrounds and other recreational areas. Priority will be given to small communities, many of which lack the capacity to fund this infrastructure.

Another notable development was the broader federal infrastructure plan, Building Canada, worth \$33-billion from 2007-14. Building Canada consists of a suite of programs to meet infrastructure needs across the country, including a Gas Tax Fund and full rebate of the Goods and Services Tax paid by municipalities. But 2014 is around the corner and new forms of revenue will have to be found unless the agreement is renewed.<sup>1</sup>

Cities require access to an ongoing revenue source, such as piggybacking on existing federal or provincial income taxes. Additional revenues would reduce reliance on property taxes, which are inherently flawed as an instrument for funding cities' long-term needs.

Canadian cities are far more dependent on property taxes than are urban areas in other countries, with about 50 percent of total budgets coming from property owners. In 2002, US municipal governments depended on property taxes for only 27 percent of their total revenue. They have been given a share of sales and income taxes, and receive more in transfer funding from state and federal governments.

While Ottawa can provide additional cash in the form of grants, provinces have the authority to transfer taxation powers and enable municipal governments to control their own finances. The Mayor of Calgary has launched a Cities Matter website to profile these financing concerns.

Yet another funding option is to move away from the current federal preference for targeted tax cuts, such as the children's fitness tax credit that took effect in 2007. Tax cuts increase disposable income primarily for middle- and higher-income families. They afford little or no assistance to lower-income families.

Neither can these measures substitute for investment in both the capital and operating components of a widely available program or service. In the case of recreation, in particular, families cannot possibly build and maintain through their individual contributions essential infrastructure such as parks, trails, fields, arenas, rinks and pools, and the training and payment of qualified staff.

The Alberta Recreation and Parks Association has identified well-designed, safe, functional, inviting recreation and sport facilities, parks and trails as key ingredients in building active, healthy communities. The massive billion-dollar infrastructure deficit requires a consolidated infusion of funds.

In 2007, the Federation of Canadian Municipalities and Big City Mayors Caucus supported the creation of a dedicated recreation infrastructure funding program. The Federal-Provincial/Territorial Ministers responsible for Sport, Physical Activity and Recreation identified sport and recreation infrastructure as their number one priority. But the 2011 *Active Healthy Kids Canada* report assigned a D- (down from a D last year) for Municipal Policies and Regulations. More than 80 percent of municipalities do not require safe walking and biking routes when developing new areas or reconstructing new roads.

Of course, money is a key concern. But the children's fitness tax credit cost an estimated \$115 million in 2010. That money could have been far better spent on infrastructure investments that benefit entire communities – and not just relatively well-off families.

A final policy response is to promote mandatory physical education at school. Only Québec requires physical education in its curriculum until graduation. In all other jurisdictions, physical education becomes optional as early as Grade 8.

*Active Healthy Kids Canada* reports that 44 percent of Canadian children participate in physical education at school one to two days per week, 25 percent have three to four days per week and 22 percent receive daily physical education. The average time in a school week devoted to physical education is less than one hour.

The Play Works Partnership estimates that fewer than 5 percent of Canada's schools have physical education programs that meet minimum standards. This level is among the lowest in the world and is less than 40 percent of the 150 minutes recommended to meet standards for Quality Daily Physical Education.

A related response is to allow the use of schools for a wide range of after-hours activity. The Community Use of Schools Initiative in Ontario is a positive example.

Annual funding enables school boards to reduce the fees that community groups pay for the after-hour use of schools. In addition, not-for-profit groups have free after-school access at 175 designated 'priority schools.' Eligible not-for-profit groups are able to offer more affordable or free programs in communities where the need for access is greatest.

### *All this to say....*

Building healthy communities is a big job that requires the interventions of all orders of government in collaboration with voluntary groups and organizations, and citizens. It involves substantial financing shifts because a serious fiscal imbalance lies at the heart of the problem.

But front-line workers involved in recreation are also in a position to make fundamental changes through the frameworks used to understand the work and plan the interventions. Recreation has far-reaching benefits in itself. But it can also help open the door to broader community change. There is perhaps no better springboard for fostering healthy communities.

I would argue that we are only beginning to understand how to think *strategically* about community building. We are just starting to appreciate the links between *quality of place* and human well-being.

Of course, we need to work on policy instruments at all orders of government. But we can also take significant actions ourselves. If we think differently and act differently, we *can* have an impact.

Through our own interventions, we control many of the levers that can help place recreation in the front – and at the top – of the public agenda.

**Endnote**

1. Bill C-13, *Keeping Canada's Economy and Jobs Growing Act*, recently made permanent the \$2 billion Gas Tax Fund for municipalities. It will help respond to the need for stable, predictable and long-term funding for municipal infrastructure. Despite the advance that the new measure represents, the difference between available funding and infrastructure requirements remains huge.