The human-made surroundings where we live, work, learn, rest and play can either reduce or widen health inequities.\textsuperscript{1,2} As a result, public health professionals have a role to play in raising awareness about the impact of built environments on equity and helping ensure that health equity is a consideration when planning decisions around the built environment.

The National Collaborating Centre for Determinants of Health (NCCDH) has assembled a collection of tools and resources that public health practitioners can use to understand the built environment’s impact on health inequities, as well as actions that can be taken to reduce inequities through the built environment. Resources are grouped according to the four roles found in the NCCDH’s \textit{Public health roles for improving health equity action framework document}.\textsuperscript{2} Despite this categorization, it should be recognized that some resources contain information applicable to multiples roles.

**ASSESS AND REPORT**

The resources below assess and report on how the built environment can contribute to health inequities and/or offer effective strategies to reduce these inequities.\textsuperscript{3}

From *built environment to health inequalities: An explanatory framework based on evidence*

Elena Gelormino, Giulia Melis, Cristina Marietta, Giuseppe Costa. [2015]. [English only].

In this paper, Gelormino, Melis, Marietta and Costa propose an explanatory framework for the impact the built environment has on health equity, based on the findings of a scoping review of evidence.\textsuperscript{4} The proposed framework connects the built environment to health inequities based on the former’s impact on the natural environment, social context and behaviour of individuals and populations. These impacts are those that are unequally distributed and based on an individual or population’s social position. Public health professionals can use the proposed framework as a foundation for policy and decision-making related to the built environment.
HEALTH EQUITY AND THE BUILT ENVIRONMENT: A CURATED LIST

The chief public health officer’s report on the state of public health in Canada 2017 – Designing healthy living
Public Health Agency of Canada. [2017].

Canada’s chief public health officer’s 2017 report raises awareness of the influence that built environments have on health and healthy living.1 The document is divided into sections exploring health trends in Canada’s urban, suburban and rural population; how the built environment can promote physical activity, healthy diets and mental wellness; how the built environment affects different populations, including those experiencing inequity; and how healthy communities can be designed through intersectoral collaboration to improve the health and well-being of Canadians. The report concludes with six calls to action that public health professionals can promote to support the development of healthier built environments. These include “avoid[ing] worsening health inequity when designing and re-designing communities by considering the needs and circumstances of populations experiencing these inequities.”1p43

The built environment: Understanding how physical environments influence the health and well-being of First Nations peoples living on-reserve
Roberta Stout, National Collaborating Centre for Aboriginal Health. [2018].

This report describes how five elements of the built environment influence the health and well-being of First Nations peoples living on reserve: housing, water and wastewater management, food security, active living and transportation.5 The report explains how colonial policies and processes, and the imposition of Western [Eurocentric] built environments, altered previously thriving communities, which contributed to health inequities experienced by present-day First Nations peoples. Steps to address inequities in the on-reserve built environment are identified, including applying the concepts and principles of Indigenous planning, addressing the housing crisis, ensuring clean water and wastewater management, advancing food security and improving the infrastructure for physical activity and road safety.

OTHER USEFUL RESOURCES


• Healthy Canada by Design CLASP. Health equity and community design: what is the Canadian evidence saying [Internet]? [location unknown]: Healthy Canada by Design CLASP. [date unknown] [cited 2018 Sep 14]. 12 p. Available from: www.cip-icu.ca/Files/Healthy-Communities/FACTSHEETS-Equity-FINALenglish.aspx.

MODIFY AND ORIENT INTERVENTIONS

The resources below describe how to modify and orient built environment interventions “with an understanding of the unique needs of populations that experience marginalization.”

Fact sheet: Supporting health equity through the built environment
Environmental Health Services, BC Centre for Disease Control. [2017]. [English only].

This fact sheet identifies evidence-informed principles for built environment interventions to support health equity. It offers two overarching planning principles for building an equity lens into planning processes related to the built environment. Additional equity-integrated, healthy planning principles are identified related to specific built environment features, including neighbourhood design, housing, food systems, natural environments and transportation. This fact sheet is a companion piece to the BC Centre for Disease Control’s Healthy Built Environment Linkages Toolkit, which connects health professionals and others with evidence-informed key messages about built environment design and its impact on population health.

Healthy high streets: Good place making in an urban setting
Institute of Health Equity. [2018]. [English only].

This report synthesizes evidence related to two areas: first, how a city or town’s primary commercial street can negatively affect health and increase health inequities, and, second, how health inequities can be reduced within and between communities through better planning and design of commercial streets. It focuses in how street design, street furniture and the provision of communal spaces can positively influence physical health, mental health and social cohesion. Evidence is assessed related to the following built environment interventions: diversifying the retail offerings, introducing green and blue [fountains, ponds, canals and rivers] infrastructure and creating inclusivity through design [such as traffic calming and street furniture]. The report includes specific recommendations for action directed at public health, local authorities, landscape architects, planners and urban designers.

OTHER USEFUL RESOURCES

PARTNER WITH OTHER SECTORS

The resources below describe how to partner with government and community organizations to advance equity in the built environment.

**Public health and planning 101: An introductory online course for public health and planning professionals to create healthier built environments**

*Ontario Public Health Association. [2016]. [English only].*

This free online course builds cross-disciplinary knowledge between public health and planning professionals to allow them to collaborate more effectively regarding built environments and health. With separate sections tailored for public health practitioners and planners, the course is made up of four modules: (1) Introduction to health and the built environment; (2) Policy, legislations and standards; (3) Roles and responsibilities; and (4) Public health and planning professionals working together. Though developed within the Ontario context, the course contains information applicable and relevant to professionals in other provinces and territories as well.

**Guide sur les environnements favorables aux saines habitudes de vie (SHV) dans les municipalités**

*Direction régionale de santé publique du CIUSSS de Centre-Sud-de-l’Île-de-Montréal, Sophie Paquin and Martine Laurin. [2016]. [French only]*

This guide is designed to support and train public health professionals to work with municipalities and their partners to create built environments that support healthy eating and physical activity. It outlines concrete actions for public health professionals to support municipalities in their efforts to create healthy built environments. Actions for public health include providing data to inform decision-making, supporting project and program evaluation and introducing an equity lens. The guide includes an approach to intersectoral collaboration that public health practitioners can engage to work with municipalities. Though developed within the Quebec context, the guide contains information applicable and relevant to professionals in other provinces and territories as well.

**OTHER USEFUL RESOURCES**

The resources below describe policy approaches to increasing health equity through the built environment.

**Health as the pulse of the new urban agenda**

*World Health Organization.* [2016]. [English only].

The New Urban Agenda, which sets global standards for sustainable urban development, was adopted by the United Nations General Assembly in 2016. To support the implementation of the New Urban Agenda, this report explores how to integrate health into urban planning, investments and policy. Among the various concepts addressed are the application of a “health lens” and the use of intersectoral collaboration for the development of urban policies and programs to promote health equity. Policies from the following areas, which either promote health or create risks, are discussed: transport and mobility, land use planning and landscape design, food systems, energy, housing, clean water and waste management, workplaces and workers’ health, slums and greening.

**Building population health into municipal policy: The use of health impact assessments**

*Lisa Marie Williams.* [2013]. [English only].

This paper from the Wellesley Institute explores the systematic inclusion of health and health equity in the development of municipal policy through tools such as health impact assessments (HIA) and health equity impact assessments (HEIA). The paper provides examples of how HIAs and HEIAs are used in urban planning internationally and within Canada. Strategies for mitigating challenges in applying HIAs in urban planning are identified.

**OTHER USEFUL RESOURCES**


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La version française est également disponible au www.ccnds.ca sous le titre Le cadre bâti et l’équité en santé : liste de lectures essentielles.