

*Towards a Theory of Community Quality of Life*

*Part I: Riverdale, Toronto, Canada*

Dennis Raphael, University of Toronto

Rebecca Renwick, University of Toronto

Brenda Steinmetz, Health Canada

Hersh Sehdev, South Riverdale Community Health Centre

Funding for the *Community Quality of Life Project* was provided by the Jessie Ball duPont Fund of Jacksonville, Florida.

The *Community Quality of Life Project* was a partnership of the Lawrence Heights and South Riverdale Community Health Centres and the University of Toronto. The project was carried out with the assistance of the North York and Toronto Departments of Public Health, the Metropolitan Toronto District Health Council, and the Canadian Mental Health Association National Office. The North York Community House and the Somaliland Women's Organization were community collaborators.

Correspondence to: Dr. Dennis Raphael, Department of Public Health Sciences, University of Toronto, McMurrich Building, Toronto, Ontario, M5S 1A8. Tel: (416) 978-7567; fax: (416) 978-2087; e-mail: [d.raphael@utoronto.ca](mailto:d.raphael@utoronto.ca)

## Abstract

Community members, service providers, and elected representatives within a downtown Toronto community considered factors affecting local quality of life. Common strengths of “caring and friendly people,” “community agencies,” “shops and stores” “low-cost housing,” and “public transportation were identified by community members as were concerns about “crime and safety” and “cutbacks to services”. Among service providers “diversity of the community,” “availability of community agencies and resources,” and the presence of “culturally relevant food stores and services” were identified as strengths while elected representative identified “community activism,” “community agencies and resources,” and “affordable housing” as assets. Both service providers and representatives identified “environmental problems”, “income and employment issues”, and “cuts in services” as threats to the community. Based on these findings a community model of quality of life was constructed and its relation to the social capital literature was considered.

Towards a Theory of Community Quality of Life  
Part I: Riverdale, Toronto, Canada

Overview and Purpose

This paper presents a theory of community quality of life drawn from a community study carried out in Toronto Canada. One of two community case studies carried out, it represented a collaboration among two community health centres, two city public health departments, the local health planning council, the national office of the Canadian Mental Health Association, and the University of Toronto. The purposes, methodology, data analysis and conclusions of these studies were informed by emerging concepts of health and health promotion (World Health Organization, 1986), community-based research (Minkler, 1997), and naturalistic inquiry (Lincoln & Guba, 1985).

After providing the conceptual underpinnings of the approach, the methodology and findings from the first of these two studies are presented. We then present a model of community quality of life based on findings from the Toronto community of Riverdale. The relationship of this model to the “social capital” and similar literatures is explored. We conclude with the implications for community health workers and others concerned with neighbourhood capacity and well-being.

Conceptual Background to the Community Quality of Life Approach

The world views held by researchers define the nature and scope of scientific investigations (Kuhn, 1970). This is especially so in community health research where assumptions about the nature and focus of inquiry are contested (Tesh, 1990) and the role of values in health inquiry is becoming increasingly apparent (Minkler, 1997). In the following sections we “come clean” about our world views concerning community health and how our assumptions shaped our community quality of life studies. These world views and related ideas served as sensitizing concepts (van den Honnaard, 1997) that oriented us in our research.

## World Health Organization (WHO) Concepts of Health and Health Promotion

The WHO defines health as the ability to have and reach goals, meet personal needs, and cope with everyday life (WHO, 1986). Health is supported by the presence and support of social and psychological capacities in addition to physical ones. Health and well-being is the responsibility of a range of sectors in addition to the health sphere.

Health promotion is about people having more control over their lives, and thereby improving their health. Specific health promotion actions involve developing personal skills, creating supportive environments, strengthening communities, influencing governments to enact healthy public policies, and reorienting and improving health services.

The WHO framework emphasises the broader or non-medical determinants of health. The *Ottawa Charter for Health Promotion* (WHO, 1986) outlines peace, shelter, education, food, income, a sound environment, and social justice as necessary for health. Recent work influenced by WHO principles has explored how a society distributes economic resources and provides social safety nets affect health (Kawachi & Kennedy, 1997). Our concern with these broader determinants of health sensitised us to the kinds of issues we wished to explore with community members and provided a template against which we would consider our findings.

## Community-Based Research for the Community

Most academic research appears to have benefited the people doing the project rather than the people who provide information (Oliver, 1990; Woodill, 1992). One way of our avoiding this was to use what is termed participatory or collaborative (Park and Hall, 1993), action-oriented (Woodill, 1992), or interactive (Hancock and Minkler, 1997) approaches. We worked collaboratively with our community partners and provided community members with some immediate benefits such as provision of meals, transportation costs, and child care. In essence, we tried to meet Lincoln's (1996) emerging criteria for quality in research: having the community serve as arbiter of the research project's quality, paying attention to the voice of those we study, possessing critical subjectivity, engaging in reciprocity in the research exercise, considering the sacredness of the relationship with participants, and sharing the perquisites of privilege with those we studied.

## Naturalistic Approach

Finally, we acknowledged that community quality of life would best be understood by seeing it through the eyes of community members, that is, through a naturalistic approach (Bryman, 1986; Lincoln and Guba, 1985). We assumed that community quality of life consisted primarily of the interpretations and meanings assigned to community features by individuals. These constructions would likely be contextualized in time and place and therefore our findings, though not necessarily generalizable, could lead to a series of working hypotheses and a grounded theory of community quality of life. This theory would form the basis for further investigations. Our choice of data collection and analysis methods were consistent with these assumptions. In another paper we contrast our community quality of life approach with those other health-related community approaches such as healthy cities/healthy communities, population health and urban quality indicators (Raphael, et al., 1999). Another publication provides a how-to guide to carrying out this kind of project (Raphael, et al., 1998a)

## Methodology

### Selection of Sites

We identified two geographical entities that could reasonably define an urban community. This set bounds on our case study and identified our unit of study. There were three reasons why we identified community health centres (CHC) as lead agencies that could facilitate our community-based activities. First, CHCs in Ontario are placed to correspond to well-defined and understood neighbourhoods. Second, CHCs have mandates to provide both primary health care and develop community-based health promotion programs. Third, CHCs have specific mandates to identify and respond to the needs of vulnerable populations and usually do so through partnerships with other agencies. Appendix I provides background about the Canadian health care system and the CHC mandate in Ontario.

The seven CHCs we approached all expressed interest in participating. Riverdale and Lawrence Heights were chosen on the basis of their previous work with the University, their contrasting catchment areas, and the proximity of the communities to the university by public transit (university personnel did not own cars). In this paper we describe the Riverdale study and

present a model of community quality of life based on our findings. Another paper will provide the Lawrence Heights findings.

An Advisory Group of community partners helped us establish contacts with community members through local agencies and organizations such as health centres, community centres, schools, seniors residences, churches, parent drop-ins and day care centres. In many cases, we made an initial presentation inviting community members to participate. In other cases, agencies arranged our meetings.

## Participants

We felt that community members, service providers, and elected representatives, while potentially having similar perceptions of community factors affecting quality of life, would have differing ways of conceptualizing them. For example, we expected that community members' perceptions would be more grounded in immediate aspects of their physical and social environments while elected representatives would consider broader societal and policy issues. Similarly, service providers would consider community issues in relation to agency mandates and activities as well as their specific clients. In any event, through such triangulation we would be able to identify areas of congruence as well as divergencies in perceptions, all contributing to our understanding of this community's quality of life.

Our initial focus in Riverdale was on at-risk groups of seniors, youth, and persons with low income, and the service providers who work with them. As the project evolved, it expanded to include New Canadians. In addition, community members were trained to interview other community members to meet the need of the community health centre to consider the views of "unconnected" residents. Elected representatives provided their perceptions of the community.

In Riverdale, 14 focus groups involved 102 community members. There were five groups of adults; three groups of seniors; three groups of youth; and three groups of New Canadians. Eleven service providers and six elected representatives were individually interviewed. In addition, six community members who had been in a focus group were trained to interview 63 of their neighbours and friends. Appendix II provides details concerning participants in the Riverdale community quality of life project. The only participants paid were the community interviewers and

interviewees who received \$10 and \$5 respectively per interview. All groups and interviews were audio-taped.

### Study Process and Questions

Meals were provided for community participants and the usual university ethical protocols of informed consent, voluntary participation, and confidentiality and anonymity were adhered to. Focus group discussions of 45 to 60 minutes were moderated by the first and third authors, and occasionally other university-based members of the team. The participants consisted of both “agency connected” and “agency unconnected” individuals.

Elected representatives were individually interviewed by university staff and the service providers by university undergraduate students as part of a course requirement. For these 45-60 minute interviews it was suggested that confidentiality and anonymity could not be guaranteed as readers of reports could probably infer who the contributors were.

Extensive pilot testing indicated that community quality of life issues were best identified through use of questions that rather than asking about “quality of life,” inquired into issues that “help make life good for you.” Therefore, community members in the focus groups and interviews were asked: *What is it about your neighbourhood or community that makes life good for you and the people you care about?* and *What is it about your neighbourhood and community that does not make life good for you and the people you care about?* We also asked about means of coping, and desired services. We asked the service providers and elected representatives similar questions about community residents, and additional questions about agency mandates, and community characteristics. The complete sets of questions are provided as Appendix III. In this paper we focus on the two specific quality of life questions provided above.

### Data Analysis and Member Checking

Focus group discussions and interviews were tape-recorded and used to generate notes and quotations. The constant comparative method as described by Lincoln and Guba (1985) was used to analyse data. The text was broken into units of information that were then combined into themes. The process of categorizing and forming themes was repeated until the best fit between

the data and the interpretive themes was achieved. The themes for each group or individual were written in the form of a three to four page narrative that described what the group or person had said. This process of theme identification involved a team approach of the first and third authors.

### Member Checking

To further verify the data analysis process, the written narratives were provided to participants. This was done for all of the group and individual interviews. In every case, no changes or modifications, outside of a few changes in nuance were suggested and made. For Lincoln and Guba (1985) member checking is the most important means of verifying the analysis in naturalistic inquiry. The validation of all of our write-ups by our participants gives us confidence in our findings.

We then considered the degree of congruence of these themes across each type of participant group (seniors, youth, adults, elected representatives, service providers). At this second step, a few higher order themes were created that integrated the lower order themes. For example, lower order themes of the local “community health care centre,” “community centre”, and “recreation centre” were considered as a “community agencies and resources” theme. Similarly, lower order themes of “loss of jobs”, “unemployment”, and “poverty” were combined into an “employment and income issues” theme. In many cases initial order themes were maintained and contributed to our overall model of community quality of life in Riverdale. This model represents a distillation and integration of all of the key themes identified.

In terms of other Lincoln and Guba’s (1985) concepts of trustworthiness, we spent close to two years within the community (prolonged engagement), had the research team work closely with each other (peer debriefing), and consistently considered emerging themes (persistent observation). As noted, member checking and triangulation were also implemented.

## Findings from the Riverdale Study

### The Community Context

This background information was gathered from the report *Riverdale 2000* (Ali & Suttle, 1994), the result of an earlier community development exercise. *Riverdale* is a downtown



community in the eastern section of Toronto. It contains mixed residential, industrial, and commercial/retail areas with heavy industrial areas in South Riverdale. With a population of approximately 85,000 people, 20% of whom are of Chinese ancestry, Riverdale is diverse in social class and has a large low-income population and many recent immigrants. There are significant concentrations of Chinese, Greek, and Southeast Asians living in areas known as Chinatown, Greektown, and Little India respectively. As compared to Toronto as a whole, Riverdale, and South Riverdale in particular, has a higher percentage of lone parent families with children; more persons with less than a grade nine education; and more families on social assistance (Raphael, Renwick, and Steinmetz, 1998b).

Until the 1960's South Riverdale had a strong industrial economy, yet much of this has closed or moved except for some industries in the Port area. Within Toronto, South Riverdale has the largest concentration of pollution sources from industry, traffic, and waste disposal. In response citizen groups have been instrumental in shutting down large incinerators, and having the largest lead contaminated soil removal in North America carried out. Many of these activities were described in the book *The Power to Make it Happen: Mass-Based Community Organizing, What It is and How it Works*. (Keating, 1975). More recently the project *Riverdale 2000* (Avi & Suttle, 1994) illustrates Riverdale's tradition of citizen activism. The South Riverdale Community Health Centre was formed as a result of citizen pressure to provide medical services and respond to ongoing environmental challenges within the neighbourhood.

#### Common Themes Emerging from Focus Groups and Interviews

There was remarkable congruence of themes across community members. For example, virtually every focus group and interviewee identified supports to quality of life as including "caring and friendly people," "community agencies," "shops and stores" "low-cost housing," and "public transportation." Similarly, "crime and safety" and "cutbacks to services" were a virtually unanimous concern. Other themes that were common across a number of groups included "volunteering at local centres", "cultural and economic diversity," and "community activism" as well as concern about "poverty and unemployment". Of course there were some notable divergencies among groups along the lines of newly arrived immigrants being less connected with

community agencies and resources than long-time residents and poor inner city youth having little positive to say about their neighbourhood except for the “local community centre” and their “friends.” Chinese community members all mentioned the presence of “Chinese food stores.” Some of these areas of divergence, discussed in later sections, will be the subject of future reports.

Service providers and elected representatives had their own way of seeing the community. But again, there was much convergence in their views among themselves and with community members. For example, every service provider commented on the “diversity of the community,” “availability of community agencies and resources,” and the presence of “culturally relevant food stores and services.” Common concerns were also expressed about “service cutbacks” and poverty and unemployment.” Every elected representative identified the common strengths of “community activism,” “community agencies and resources,” and “affordable housing” in addition to “environmental problems”, “income and employment issues”, and threats posed by “cuts in services.” In this paper, our illustration of findings focuses upon the themes from two focus groups of community members, and interviews with the program director of the local community health centre, and the city mayor. We also present findings from our “community members interviewing other community members” study component. As it turns out, these presentations illustrate virtually all of the breadth of information we heard throughout the Riverdale study. The presence of these themes across our focus groups and interviews provides strong evidence of the trustworthiness of our findings. *The write-ups from all of our focus groups and interviews and the full Community, Summary, and Findings Reports for Riverdale are available online at our web site, <http://www.utoronto.ca/qol>.*

#### Community Church Dinner Focus Group

Five community members attended a discussion group held at the local United Church participated. The church discussion group exists to provide supports for low income and potentially vulnerable and isolated community members.

## Strengths and Positive Factors

*Community Agencies and Resources.* The participants knew where to obtain assistance if it was needed. “If you need help in Toronto you can get it but you have to go to the right person or you are lost. You go to a person and they can help you to the right person.” A number of community resources and agencies were mentioned. “WoodGreen Community Centre is good at Carlaw and Queen. People who work at WoodGreen are very good.” The Latvian centre was mentioned as were “little drop in centres” which are in the community. “There is the United Church there that can give you help.” Also mentioned, though not in the immediate neighbourhood were the Yonge Street Mission, the Genesis Centre, and Dixon Hall. “Connections are all around.” Once these resources are known they can connect people to the city councillor, health, and welfare services. “On health, the welfare system, they can tell me where to get classes, and then it is up to me to go from point A to point B.”

*Community Health Centres.* The South Riverdale and East End community health centres were identified as important to community members. One participant who had a stroke commented: “I go every nine weeks to the (East End) Community Health Centre. With my daughter I now go there. I’ve been taking my wife there. We go at the same time. It has been a grand glorious feeling getting the toes looked after.” Another person commented: “They are doing a good job here at the (South Riverdale) Community Health Centre. The community health centre is helping a lot of people, local doctors, they are listening to the people.”

*Neighbourliness.* An important theme is that people are friendly and willing to provide help when it is needed. “I fell once and people stopped and helped me. It was a cold winter day and people called the ambulance. This is when you find out about the little things that neighbours will do for you.” Similarly, the neighbourhood is perceived as one where “people return a smile.” Everyone mentioned being able to get along with people in the community.

*Responsiveness of Community Agencies.* It was believed that community and municipal agencies were responsive to the concerns of community members, including children. “Children talk among themselves, especially those on social services. If they have problems with the snack programs or want to clean things up in the parks, the agencies clue in and help.” These agencies include the Public Health Department and the Children's Aid Society. When one woman had a

problem she went to the City Councillor. “I went to this fellow, told him the problem, and he went to city hall and got help. It was as simple as picking up a phone.”

*Volunteering at Community Centres and Agencies.* Two participants mentioned their volunteer work and contributions they make in the community. “I volunteer occasionally in the community and for those who need help at Pape Recreation Centre where I am on the Centre's Board.” “I used to be on the faculty at Dixon Hall, I sing at WoodGreen United Church.”

### Liabilities and Negative Factors

*Concern About Children and Their Behaviour.* There is a concern about the behaviour of many children in the neighbourhood. “Children are ill-behaved, young girls fool around at the showers [at the recreation centre]. Some listen and some just spit at you.” This kind of behaviour is attributed to poor parenting and poor schooling. “Kids can vandalize and parents will tell you to go another direction if you say anything.” The children's behaviour and vandalism is seen as improving however. “Many children listen to you. Chinese children obey when you tell them to not scream or run around.”

*Concern About Cuts.* There is a concern about the effects of budget cuts upon these agencies: “Some are closing down. There are problems with some of the bigger places. They were not run during June or July and all of them are trying to cut budgets.”

*Crime and Safety.* There is concern about vandalism and crime. The vandalism is primarily attributed to children. “Vandalism still goes around, young kids break the antennae on the cars. It's primarily by youth, at schools and at the recreation centres. Young kids break in, break the locks at the recreation centre.” One participant had been mugged recently. Additionally, there was a concern from one participant about crime being associated with needle exchange programs. “Needle exchanges bring in the drugs. If you don't give the needles away, then drug dealers are pushed away. We don't want the needles here.”

*Environmental Concerns.* One participant was knowledgeable about environmental issues in the neighbourhood. South Riverdale was formerly an industrial area and has much landfill. “We have major problem with land-fill sites. Down by the Commissioners (plant) and the torn down

gas stations, there are land fills with animals, sewage, and PCB's. Crummy houses were built on land sites. Industrial stuff that was dumped there and is coming up.”

*Racism and Prejudice.* There was concern about prejudice and difficulties expressed by professionals concerning the diversity of the population. “I hear teachers complain of the different kinds of kids... I'm still hearing school teachers saying they can't cope with different kinds of children.” “Kids are told not to attend university even though they have good grades. Racism, this is one of the sad things.”

*Small Businesses Closing.* One participant spoke of how small businesses have been forced to close down by larger chains. “I've seen the little stores close down and the small businesses being put out of business by Knob Hill and Miracle Mart.”

### Community Health Centre Members Focus Group

Six members of the community health centre participated in an evening group. People become members of the health centre by filling out a card that states their commitment to the principle of the health centre acting to work on the personal, community, and social determinants of health through both the provision of responsive primary care and community action. Members receive information updates, can attend the annual general meeting and board meetings, and are eligible to vote for board members. The write-up from this focus group follows.

#### Strengths and Positive Factors

*Churches.* Participants agreed that the many churches in the area were good for the neighbourhood and provided support to community members. Churches are places where people can gather “to talk, think, and deal with something a little bit more spiritual which is very important for a community.” Churches also host many programs that are “socially oriented, health-oriented.” And many churches offer programs for the whole community, not just their members. For example, they have lunches, dinners, drop-ins, support groups, food banks, scouts and guides, and community kitchens.

*Community Agencies and Resources.* Participants noted that many services exist in Riverdale to help people. These include community centres such as Jimmie Simpson Recreation

Centre and WoodGreen Community Centre. There are also many schools in the area, and that was seen as a positive thing for the community. Recreation centres, skating rinks, and swimming pools were also mentioned. The group agreed that the reason that Riverdale is so rich in services could be related to a history of activism in the community, as well as there being a high need for services. Community services were seen as particularly important during times of high unemployment.

*Community Health Centre.* Participants appreciated having the South Riverdale Community Health Centre. Although most of the group did not use the services of the health centre, they described it as being easily accessible and helpful in case of emergency. The health centre is seen as one place people can go to for help with problems. However, one person felt that many people, especially some Chinese members of the community, are not aware of the health centre and how they could access its services. Related to this, people felt that there was a definite need for translation services (e.g., Vietnamese, Chinese) and generally, more services needed to be available in these languages.

*Easy Access to Amenities.* Participants appreciated the many stores and services in the area, although there was a difference of opinion about this depending on whether the person lived in North or South Riverdale. One woman, who lives on Danforth Avenue [north], commented: “I love living in an area that is almost self-sufficient.” She felt that “big stores can kill a sense of community,” while having a number of smaller stores helps to create a sense of belonging. In contrast, someone who lived closer to Queen Street [south] felt that this self-sufficiency in terms of amenities was less evident. “Down on Queen Street, you can either eat breakfast, take the streetcar up to Danforth, or buy antiques.”

*Food and its Availability.* Participants were aware of many initiatives in the community to increase access to healthy, affordable food. For example, mention was made of food buying clubs, community gardens, Partners for Food, the Good Food Box from Foodshare, and the Stone Soup Food Co-op, which has now closed down.

*Helping to Improve the Environment.* The work being done by the *Task Force to Bring Back the Don River* was seen as one concrete way to improve the environment. For example, they have “programs all through the summer that includes walks to help people appreciate the

nature that we have in this city. It's amazing to have this many parks. Cleaning it up, concrete things, not just asking for money, but actually taking a garbage bag and going along the Don River and cleaning it up, which is done every year." Also mentioned were community gardens in the area (such as the one behind the City Adult Learning Centre). These gardens were described as a good way to help people "get back to nature." The gardens help people to "learn to treat nature better, and garden in a very respectful way." Also mentioned was the work being done by the Environment Centre and Community Shared Agriculture.

*Libraries.* The participants were aware of all the public libraries in the neighbourhood. Libraries were seen to enhance quality of life, since they provide the opportunity for people to read more. Literacy was understood as being important to health.

*Low Cost Housing.* Some participants felt that the low-cost housing in the area was a good thing, as it helps to reduce homelessness. There was agreement that there does not seem to be many homeless people in the area. However, one woman mentioned that she was scared of people living in shelters near her home. She has heard fighting and there is a lot of drinking. Seniors buildings were mentioned as well as cooperative housing. "The cooperative housing movement is one of the great strengths and always has been of Riverdale. It's something we would like to keep. We're afraid of losing it."

*Neighbourhood Cultural Diversity.* The group spoke positively about the cultural diversity of Riverdale and of Toronto in general. It was felt that Riverdale benefits from being a part of the City of Toronto and the vibrancy of city life. "The city of Toronto, it's the most diverse in terms of populations of any city in the world. The downtown core of Toronto has more people of different origins than any other city in the world. That I find a very exciting and a great thing."

*Neighbourhood Income and Class Diversity.* The area was seen as an economically diverse one. One person commented that he "has always been fascinated by the working class roots of the area." Some felt that the economic disparity may contribute to crimes such as break-ins: "When you have class diversity, you have people with a lot of needs and you have people with quite a lot to steal, so they're going to get together and that's how they get together."

*Parks.* The group agreed that there is “a lot of good park space” in the area. For example, Withrow Park and Riverdale Park were specifically mentioned. One person felt that many parks in the area are under-used, except by dogs. This may be due to the large amount of broken glass and debris in some parks. It was felt that, bureaucratically, no one is taking responsibility for maintaining the parks, for example the area around the wading pool at Queen Alexandra. One person knew that the parents at the school had taken some initiative to get the City to clean up this area. The Don Valley was also mentioned as an excellent green space and good for outdoor activities such as bicycling and skiing.

*Public Transportation.* The group agreed that public transportation in the area is very good. Accessibility to good public transportation was seen as very important for the community. For cars, the area is also easily accessible by a variety of routes.

*Representatives for Riverdale.* Participants appeared most supportive of the New Democratic Party (NDP), and they spoke highly of the Member of Provincial Parliament. It was also mentioned that the high number of services in the area may reflect that the “NDP fights for its people.” One person noted the contradiction that “politically, the area has been a safe seat for the New Democratic Party (NDP) and home to the Ku Klux Klan at the same time.” Some felt that it was unfortunate that “the NDP seat is not safe anymore.” The local representatives were seen as people to go to for help with certain problems. For example, the City Councillor is helpful for neighbourhood-related concerns, such as parking. The federal Member of Parliament may be approached “if it’s an extremely difficult thing to do, if it costs money.”

#### Contested Issues

*Job Opportunities and Environmental Concerns.* Everyone agreed that it is a good thing for the environment that the Lever Brothers and Colgate factories have closed. However, one person felt that there “is always a dilemma in any society between concern for the environment versus the job opportunities it provides.” Others disagreed: “I don’t believe that there’s a direct conflict between us trying to increase employment opportunities here in our neighbourhood and trying to eliminate pollution or polluters. I don’t think that it’s a contradiction.” Someone else concurred: “It is definitely not a conflict of either we have jobs and pollution or we have no jobs



and no pollution. It doesn't work that way at all." Examples of a neighbourhood community market and the stores on Danforth were cited as examples of small businesses that pollute less than larger ones, create more jobs, and bring services that are useful to the community.

#### Liabilities and Negative Factors

*Crime and Safety.* In regards to safety, perceptions varied depending on one's location in Riverdale. The area near the Danforth was seen to be safe, while there were concerns about safety in the Queen Street area. One woman commented that: "I really like living in area that is so safe. You can walk on Danforth any time of the day or night. It's clean, it's well-lit, it's safe." However, someone else who lived near Queen and Broadview felt it was "pretty frightening" for his two daughters, in part because of the strip club two blocks from their home. These commercial developments were of greater concern than people spending their days in the park near his home and using the community resources there. Someone else did not feel there was enough of a police presence in the area and that when called, they did not arrive quickly enough. Speeding cars were also mentioned as being unsafe.

*Political Situation in Ontario.* Most of the participants seemed displeased with the current Conservative government in Ontario, commenting for example that: "As an area, we're ready to cut our teeth on the Harris agenda. Because it's like a little microcosm of what has really happened everywhere else."

*Poverty and Unemployment.* Participants noted that "over the past year there's more people begging on the Danforth, things are getting worse. There are definitely more people falling through the cracks." Participants saw a relationship between high unemployment in the area and increased violence. "There's a lot of unemployed people here. This a real centre for unemployed people and when you get lots of people who are unemployed there's lots of frustration and there's going to be violence, and there's no question that without services that's going to increase."

*Unwanted and Uncharacteristic Businesses.* One participant spoke of two "significant commercial developments that don't have any relationship to the neighbourhood." These are the local strip club and a local music hall. He felt these establishments "are assaults on the

neighbourhood. I understand that people have to go to nightclubs, but I feel overwhelmed by them. I have to live there.”

### Community Health Centre Program Director

The South Riverdale Community Health Centre was established in 1975 and is a government funded nonprofit corporation with a volunteer Board of Directors. Its 31 staff members include doctors, nurse practitioners, nutritionists, community health promoters, social workers, outreach workers, receptionists, and administrative staff. The health centre’s dual roles are health promotion and prevention activities at the community level, and provision of primary health care at the individual level.

### Community Strengths

*Activist Community.* The Program Director saw Riverdale as a community of activists. Riverdale's history of activism dates back to the 1960s with the Greater Riverdale Movement and is documented in *The Power to Make It Happen* (Keating, 1975). The Director felt that it was people in the community and their involvement that makes the difference: “When I think of Riverdale, I think of activism. People actively involved in trying to make change. It's that mix and that culture of this community that makes life liveable for people here.”

This activism prompted the development of several community agencies and local environmental groups in Riverdale. For example, the need for a meeting place in the community brought about the Ralph Thorton Community Centre. The director felt that people in Riverdale come together to work on community issues such as environmental or economic concerns. The commitment of this activist community is illustrated with the example of the group Greater Riverdale Economic Action Together: “When we organized a meeting, about 50 to 60 people showed up. About 10%, maybe 20%, were service providers, but a lot were residents.”

*Community Agencies and Resources.* The Program Director saw Riverdale’s network of local agencies as a strength. She explained that these agencies were established from the concerns and commitment of local residents. Consequently, the organizations became an integral part of the community itself. As she explained: “This community has worked together in developing

human service infrastructure that is very much geographic to this community. When I think about Riverdale, I think about WoodGreen, Ralph Thornton, Applegrove [community centres], and the South Riverdale Community Health Centre. We've become a part of the history of this community.”

The director compared Riverdale's local network of community agencies to Trevor Hancock's conception of Healthy Communities: “We have all the circles of healthy community right here. You need a vibrant economic group, a group focused on environmental issues, a group that focuses on social service support issues. When all of these groups are vibrant, you have a healthy community right in the middle.”

*Diversity.* The diversity of people in Riverdale was identified as a positive factor of this community. The director described Riverdale as a community with many communities in it. She illustrated the diversity among community members with this statement: “Riverdale has such a mixed bag of people. It’s highly working class. Very economically mixed, intellectually mixed. You have the arts community, the new age community. Large subsidized housing.”

It was mentioned that Riverdale in general and South Riverdale in particular are areas that is attractive to newcomers. The director noted that this attribute may be a positive or negative factor depending on one’s perspective. Newcomers would come to South Riverdale for lower rents of older housing units, and its service network. There also a number of local agencies offering settlement services for newcomers: WoodGreen Community Centre, Riverdale Immigrant Women's Centre, and Eastview Community Centre, among others.

The director explained that ethnic communities in Riverdale also attract and support newcomers by providing a familiar culture, language and foods: “This is one area where you will not have problems trying to eat any kind of food. It speaks to how new communities have been able to make this community home. There's east-end Chinatown, there's India Bazaar, there's Greektown.”

*Environmental Activism.* As a result of being an eastern port and heavy industrial area, South Riverdale has experienced a long history of environmental issues. Subsequently, South Riverdale has a long history of local environmental activism. Much of this environmental activism stems from Canada Metals, the local lead smelter. A number of local groups deal with

environmental issues in Riverdale: “There is the Safe Sewage Committee, Citizens for a Safe Environment, GreenSavers. These are the big ones. Then there's the Save the Don group, and the South Riverdale Community Health Centre itself.”

## Problems and Issues

*Changes in Local Economy: Unemployment and Poverty.* Changes in the local economy have had serious impacts in South Riverdale. The director explained that there were significant job losses when the local economy shifted from heavy industry to service industry: “Over the years, there has been migration of these industries out of this area. We've lost good-paying jobs in this community, and we've got mainly service industry.”

Consequently, lower wages and unemployment have contributed to poverty in South Riverdale. Many families and individuals are struggling to make ends meet. “We have higher than the city's average of families living below the poverty line here. We have a large number of single parent families with children below six in this community. Put those two things together and you've got complex issues.”

*Environmental Health Issues: Poor Housing.* The director described environmental health issues related to poor housing as a significant problem. Residents of a local housing project contacted the community health centre with some of their concerns: “We went to that community almost invited by the residents to address a certain sewage back-up problem in some of the units. We also found asbestos over there.” Through subsequent audits of several units in the housing complex, CHC staff discovered other environmental health concerns: “The windows were very drafty. The heating and ventilation systems, the exhaust hadn't been changed over how many decades. It was directly linked to upper respiratory health issues.”

*Food Access.* The director identified access to affordable, fresh food as a problem in South Riverdale. She described Queen Street in 1989 as having a disproportionately high number of licensed bars and liquor stores, compared to the number of places to purchase fresh food. She explained the dilemma of food access for local residents who must manage on limited incomes: “You have a large population who is poor, who don't have cars. Where do they go to buy their

fresh fruits and vegetables? To the corner store. There was no point in telling people to eat healthy, when they don't have the means to eat healthy.”

*Hate Literature.* An incident that occurred in November 1992 was described, where students at a local high school found hate literature in their lockers.

*Lead problem.* One of the most serious environmental concerns in South Riverdale came from Canada Metals, the local lead smelter. “We are right in the shadow of that here. That big giant spewed out lead.” She explained that local residents were not aware of possible health issues until several years after the emissions began polluting the air: “It was not until the 1970s that we started identifying severe lead poison problems among the children of this area.”

### City Mayor

#### Strengths and Positive Factors

*Activist and Caring Community.* The Mayor felt that one of the most important aspects of Riverdale was the number of activists and caring individuals who live there. “It’s a community of people who have neighbours who care about issues and care about them, and have strategies to deal with challenges and problems.” Why so many activists live in Riverdale was seen as a function of its proximity to the city core, the relatively low cost of housing there in the 60's and 70's and the specific problems the area was faced with. “It has traditionally been a low-cost neighbourhood close to the city core. I think during the 60s and 70s it attracted a certain number of activists who empowered some people and set up some structures. The other set of things were that there were some particular problems, environmental issues, that truly affected everyone in the community. There were issues of lead in the soil; issues of air quality.”

*Volunteer Networks.* One result of these challenges was the development of any number of volunteer networks that exist to improve the quality of life in the community. “The area has a lot of volunteer networks.” These networks work on a range of issues. “Riverdale has a network of people from all facets of the community who came together to develop a sustainable economic strategy for the future. There are also a number of environmental networks such as Citizens for a Safe Environment.” These groups are looking at “environmental issues as means of fostering economic community development.”

*South Riverdale Community Health Centre.* The South Riverdale Community Health Centre was identified as an important contributor to the community. “There is a community health centre that views health within a broad definition. It has been the central point for a lot of community issues and community organizing.” This was especially the case in relation to environmental and other issues. “The South Riverdale Community Health Centre has been very leading edge and has a broad community development component to its dealing with health concerns.”

*Community Organizations and Services.* Another important contributor to the community are the number of community organizations and agencies. In addition to the provision of services, these organizations serve to support the community in a variety of ways. “The Ralph Thornton Community Centre is a place that makes space available for a lot of groups.” The WoodGreen Community Centre, which has been in the neighbourhood for 75 years “started out as a traditional settlement house but has changed over the years in the kinds of programs and the kind of communities it addresses.” The presence of a local community legal clinic was also mentioned.

But it is perhaps in the manner that these agencies operate that is as important as the services they provide. That is, they operate as a means of empowering and supporting the community. As the Mayor commented: “So if you look at a whole range of services in that community, many of them are delivered in a community development kind of model. In most neighbourhoods you may find one or two things that way, but in Riverdale, they are all like that. Which sort of says something about the culture of that area.”

*City of Toronto Funding to Support Community Agencies.* The City of Toronto provides funding for many of these agencies. Recreation centres such as “Jimmy Simpson is a city of Toronto Parks and Recreation Centre. It has a pool, a skating rink, a gym and a lot of different programs all year round.” It also has a number of summer programs and has day care available. “It is totally funded by the City.” “The Ralph Thornton Centre is in a city-owned, historic building. We give core administrative funding to that centre and some support for specific programs.” Other agencies such as “WoodGreen Neighbourhood Centre receive many grants from the City. We give money for their youth employment programs, their Chinese seniors programs, and a range of other programs.”

*City of Toronto Support for Business Improvement Associations.* The City of Toronto provides support to Business Improvement Associations (BIA) across the city. “We have a program with a group of BIAs right across the city to help them with marketing.” In terms of specific projects a BIA might undertake “We have cost sharing with the BIAs for some capital expenditures.” The City also provides some staff support.

In Riverdale the City supports the Queen Street East BIA. One specific initiative has been the significant funding of public art by the City. “They’ve been partners with the city with the installation of public art in the area such as the clock on the [Queen Street] bridge. And the poetry on the corners.” The City assists with the street banners used by the BIA.

## Problems and Issues

*Unemployment and Poverty.* “One of the big problems in Riverdale, particularly in South Riverdale, is the high level of unemployment and poverty. It used to be a very solid working class area with a lot of jobs. There were factories and plants in the area, but many of those have closed.” The Mayor commented that one especially unsettling effect of the high levels of unemployment and poverty had to do with children. “A high level of poverty means there are a lot of young people who are experiencing some degree of hunger. This puts their health and their learning and their futures at risk.”

*Environmental Problems.* Riverdale has had “environmental issues that truly affected everyone in the community. There were issues of lead in the soil; issues of air quality.” The Mayor was referring to the Canada Metals Smelter and the Commissioners Street Garbage Incinerator. There also is a continuing problem with the pollution of the Don River. “The city financially supports the Task Force to Bring Back the Don. It has created a large recreational space for running, walking, cycling trails, and a lot of planting of flowers. We’re in the process of building a staircase that will give access to the space from the South Riverdale community.”

*Quality of Housing.* Housing is seen as an ongoing issue in Riverdale and South Riverdale. While the area is seen as going through a process of gentrification, “Some of the housing stock there is quite in need of restoration and repair.”

*Issues of Settlement.* Toronto is a destination for many recent immigrants and Riverdale is seen as having many new Canadians. “There is a large Chinese community, a large South Asian community. There are issues of settlement.” It is seen as a challenge to meet their needs; especially for those seniors who have arrived quite recently. City agencies provide seniors’ programs for these individuals.

### Results from the Community Interview Project

The purpose of the community interview project was to have community members conduct quality of life interviews with their friends and neighbours. The impetus for this project came from the local community health centre. This allowed us and them to hear the views of other people in the community who may not be connected with agencies or groups. It would also allow us to confirm some of the findings we heard in the group discussions. After a training session each community interviewer asked the person they were interviewing what was it about the neighbourhood or community that help make life good for them and the people they care about and what did not make life good. The interviewers had sheets of paper that allowed them to write up to four lines for each of ten positive and ten negative aspects of the neighbourhood.

In total 63 interviews were carried out: 18 with youth, that is, individuals up until the age of 25, 23 with seniors, individuals 55 years or older, 17 with adults between the ages of 25 and 55 and 5 in Chinese with four adult women and one man. We provide the total number of times an issue was mentioned across the 63 individuals, and when an issue was especially relevant to a particular group of people, this is mentioned. Analysis of the responses was carried out by the first author using a traditional content analysis approach (Robson, 1996).

### Strengths and Positive Factors

In all 45 different aspects of the community were described from the 63 people who participated in the project. These 45 aspects were grouped by the first author into 14 general categories. Many of these aspects were similar to the ideas heard in the community focus groups but some were new.



*Access to Amenities (41 mentions).* This category was concerned with having a variety of restaurants and shopping nearby. These aspects were mentioned by a majority of all groups. All five New Canadians mentioned this issue.

*Activities in the Community (23 mentions).* A number of people identified having things to do in the community as being positive. These include neighbourhood festivals, and activities at nearby centres or in their housing complexes or residences. Specifically mentioned was community dinners that allow neighbours to meet each other. This area was most mentioned by adults and seniors.

*Affordable Neighbourhood (7 mentions).* A number of people mentioned low cost is an important factor making life good for them. This was in specific reference to both services and programs as well as stores.

*Community Agencies and Resources (38 mentions).* Many people mentioned having agencies and resources in the community that provide services. Included within this category were community centres, local churches, facilities for the disabled, responsive local politicians, parent drop-ins, good public services, recreation facilities, and in one case, a special bus for seniors to take them to the local shopping mall. Health-related agencies make up their own category. This area was mentioned by almost all adults, and most youth. Four of five New Canadians mentioned this aspect.

*Culturally Relevant Resources (7 mentions).* All of these references to culturally relevant resources came from New Canadians. All five mentioned being able to shop in Chinatown. Two mentioned being able to get services in Chinese.

*Clean Area (3 mentions).* Two adults and one senior felt the area was clean.

*Convenient Location (5 mentions).* The proximity of Riverdale to other neighbourhoods and downtown was mentioned primarily by seniors.

*Cultural Diversity (8 mentions).* The cultural diversity of the community was mentioned equally across all groups.

*Family and Friends (42 mentions).* A common idea was how having friends and neighbours help to make life good for people. Also mentioned was having relatives and family

nearby. A majority of all groups except the New Canadians spoke of these aspects of the community.

*Health Care Services (12 mentions).* Having health care services was seen as supporting quality of life. Included within this category was the local community health centre, nearby doctors and clinics, as well as hospitals. Most of these mentions were by seniors.

*Housing-Related Issues (38 mentions).* Many people spoke positively of their housing and apartments. Some spoke of their housing as being child-oriented. Some said there was good maintenance and that the laundry room was convenient. Office staff being helpful was mentioned by one person and others spoke of how privacy and quiet were good things. A majority of adults and seniors mentioned these issues.

*Libraries (7 mentions).* Having good libraries was spoken of as supporting quality of life. Four of these responses came from the five New Canadians interviewed.

*Natural Amenities (27 mentions).* A common aspect mentioned was having natural amenities such as parks and trees. People also spoke of the beach area as something that was a positive aspect of the community. This was mentioned by about a third of each group except where four of five New Canadians mentioned it.

*Police and Emergency Services (6 mentions).* Having responsive police and emergency services was mentioned as a positive aspect of the community. This was mentioned most by youth and seniors.

*Public Transportation (38 mentions).* Having good public transportation was mentioned as being important to people. Almost all seniors and New Canadians mentioned this and about half of the other groups.

*Quiet Neighbourhood (8 mentions).* An equal proportion of groups felt that the area was quiet.

*Safety (11 mentions).* An equal proportion of all groups felt safe in the community.

*Schools (12 mentions).* Nearby and good schools was mentioned by people as supporting their quality of life. This was most mentioned by youth; about a half. Having English as a second language classes was also mentioned by one New Canadian.

*Other Mentions.* One senior liked the activist and caring nature of the community. Another senior felt youth were well-behaved.

### Liabilities and Negative Factors

In all 70 different negative aspects of the neighbourhood or community were mentioned by participants. These aspects were categorized into 17 categories.

*Children and Youth Behaviour (25 mentions).* A negative factor mentioned by two individuals was the occurrence of child abuse. More common was concern about parents not watching over their children. Much more common were concerns about youth hanging out on the street and being verbally abusive to adults. Concerns about children were equally likely among the different groups of interviewees.

*Crime and Safety (36 mentions).* People mentioned crime and safety as being a concern. Many people did not feel safe in the community, especially at night. There was also much mention of drugs, break-ins, and fear for personal safety. This concern was distributed across all groups.

*Environmental Issues (18 mentions).* Concern was expressed about bad air in the neighbourhood, and smell from businesses. Three persons spoke of a lack of trees and another about the polluted beaches. This concern was especially relevant for New Canadians where all five were concerned about bad air. The remainder were distributed across all groups.

*Harassment (6 mentions).* All the mentions of harassment, except one, were made by youth. These referred to police and security guards where they lived. There was a mention of racist people in the neighbourhood.

*Housing (20 mentions).* The concerns about housing tended to be very specific to the person who was being interviewed. Some people were unhappy with their housing. Other people mentioned alcohol in the recreation room, the building elevator being broken, locked doors, a need for visitors' parking and the water being turned off. These concerns were focused among seniors, youth, and New Canadians.

*Neighbourhood Dirty and Run-Down (26 mentions).* There were a number of different concerns expressed about the state of the neighbourhood. These included comments about animals being loose, dirt, dog excrement, a neighbour feeding birds, noise, and vermin. A number

of people considered the neighbourhood to be run down. These concerns were mainly from seniors and youth. Also, all five New Canadians spoke about this issue.

*Neighbourhood Lacking Activities (11 mentions).* Some felt that there was not enough to do in the neighbourhood. These concerns came primarily from seniors though it was mentioned by some people from the other groups.

*Neighbourhood Lacking Restaurants and Shopping (10 mentions).* Some felt that the local restaurants were of poor quality. Others felt that all the good restaurants closed too early. Some felt that shopping was not nearby enough. One person wished to see an organic food store nearby. Almost all of these mentions came from seniors.

*Neighbourhood Lacking Services (14 mentions).* Some spoke of a poor library, others mentioned a lack of daycare, lack of facilities in general, a need for a recreation centre, or lack of a post office. Also mentioned was health care not being nearby, and the closing of a local hospital. Another person felt that the waiting list for housing was too long. One felt the police responded too slowly. Half of these came from adults. A majority of new Canadians were concerned about services.

*Neighbours (18 mentions).* The complaints about neighbours ranged from being noisy to being unfriendly. Others were not happy with the fighting that took place among people. One person commented there didn't seem to be any community spirit. These concerns were distributed across all groups.

*Parking and Traffic (9 mentions).* Some people felt that there was too much traffic. Others felt that there was not enough parking available. One person wished to see more cross-walks in traffic. These complaints came from youth, adults, and new Canadians.

*Poverty and Cost of Living (3 mentions).* Mentions were concerned with the amount of poverty in the community and the cost of living. Another was concerned about the stereotyping of the poor.

*Reputation of the Neighbourhood (5 mentions).* Four adults and one new Canadian felt that because of subsidized housing the neighbourhood had a bad reputation.

*Public Transportation (4 mentions).* Some people were unhappy with the public transportation. Others felt that new transit was needed and one person felt that Wheel-Trans needed to be improved. Three of these mentions came from seniors.

*Unsavoury People (25 mentions).* Mentioned by people were the presence of beggars and drunks on the street. Also mentioned by some was the presence of “perverts.” These complaints were distributed across groups with the largest number coming from seniors, adults, and New Canadians.

*Unwanted Local Businesses (8 mentions).* Included in this category were complaints about local bars, donut shops, and the local strip bar. These concerns were voiced by adults and seniors.

*Other Concerns.* Three adults did not like the cultural diversity in the neighbourhood. Two seniors were not happy with snow removal. One person complained about bicycles on the sidewalk and local construction. One person was not happy with the local politicians.

#### Summary and Congruence of Findings

There were some similarities as well as differences in the findings from this project with the group discussions. Similarities included an appreciation of the many agencies in the community and the services they provide. Another similar finding was the sense that Riverdale has many amenities such as stores and restaurants. Positives mentioned in the community interviews but not very evident in the group discussion was the importance of housing -- mentioned very often by seniors -- and schools -- mentioned often by youth. Another noted addition was the importance given to family and friends in the community interview project.

There were many similarities in concerns and issues. These included concern about children and youths' behaviour, crime and safety, the environment, and the neighbourhood being dirty and run-down. Things that were new in the community interview project were concerns about housing, the neighbourhood lacking activities and amenities, and specific complaints about neighbours. These new findings suggest that when interviewed alone, people may mention issues not spoken of in groups. Overall, there was much congruence between information received from the two different approaches: the group discussion and community interviews.

### Riverdale Community Quality of Life Model

Based on these and other results from the various focus groups and interviews, a Riverdale Community Quality of Life Model was developed and is presented as Figure 1. All of these boxes can be considered as being interrelated. The model acknowledges the important influence of federal, provincial, and municipal policies upon community well-being. It identifies the important role played by responsive community agencies in promoting community well-being and how such agencies are influenced by municipal and local community members' support. In this community, the presence of citizen coalitions and groups and the characteristics of community members contribute to community quality of life. All of these factors both influence and are themselves influenced by specific community problems. Finally, the physical structure of the neighbourhood, its providing of access to amenities, both man-made and natural, and the availability of public transportation is considered.

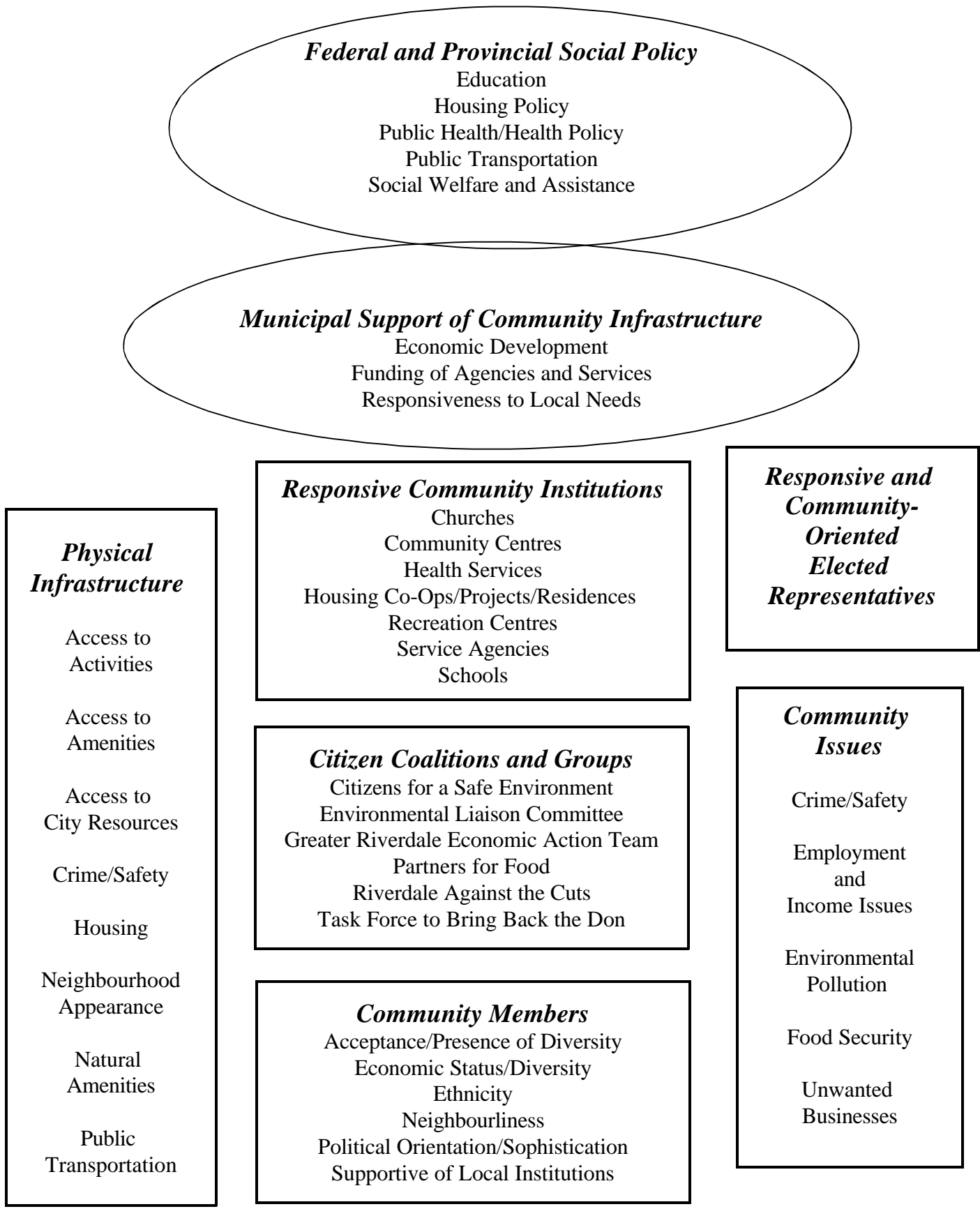


Figure 1: Riverdale Community Quality of Life Model

## Federal and Provincial Social Policy

There was a clear perception that federal and provincial policies affect the quality of life of community residents. These influences were most likely to be raised by the elected representatives, but were commonly discussed by service providers and community members as well. Elected representatives spoken in terms of Riverdale having lost many industrial jobs as a result of increasing economic globalization and the shifting of industry that followed in the wake of the North American Free Trade Agreement. The result of these changes have led to increasing economic disparity in the community. In addition to changes in economic conditions, federal and provincial policies have also impacted negatively on the most vulnerable of Riverdale residents.

The federal and provincial governments are ending their involvement in social housing, affecting those who already living or near to living in poverty. More immediately, the conservative provincial government has cut social services. This has affected those with low incomes, but has, through a ripple effect, impacted local commercial establishments. These reductions have led to increased hunger and will have both short and long-term health consequences for the community. as people become more vulnerable to illness.

Among service providers there is widespread concern about the effects of provincial funding cuts on community services. Some services that have already been capped, and in many instances reduced. They and community members spoke about the effects of welfare cuts on families and children and how it has increased hunger and the need for emergency food services.

## Municipal Support of Community Infrastructure

City of Toronto support of local institutions such as community and recreation centres is an important component of community quality of life. This support was most directly expressed by the elected representatives and service providers. Community members acknowledge this role indirectly through their support and appreciation of local agencies that are city funded. Since this study was conducted, the City of Toronto has been forcibly merged by the province with five other local municipalities to create a “megacity.” There was concern expressed about the willingness of the new megacity authorities to continue this level of community support.

## Responsive Community Institutions

Riverdale residents have access to the many city-wide supports such as social assistance and public health. But additionally, Riverdale has a rich network of community-based agencies and services that include



recreation and community centres, a community health centre, churches, and other organizations. Within these agencies Riverdale residents engage in activities, receive assistance when needed, and work with others to improve the community. All respondents emphasized the roles these organizations play in supporting and improving the community.

Many of these organizations take a community development approach in their activities and build upon the strengths of the community to improve community members' capacities and abilities. These local agencies also work closely with city-wide government institutions such as public health and parks and recreation to improve access to food, address environmental issues, and develop specific initiatives to support youth, seniors and other vulnerable people. From all quarters however, there was concern about the future of these agencies.

### Citizens Coalitions and Groups

Riverdale has a long tradition of community activism that was first documented in the 1975 book *The Power to Make it Happen: Mass-Based Community Organizing, What It Is And How It Works* (Keating, 1975). Some of the various groups, virtually all of which have a high community profile, are listed in Figure 1. A number of factors have contributed to the rich tradition of citizen activism. The community has always been economically diverse and its strong working class background has led to the development of a strong New Democratic Party presence including election of NDP representatives. Residents have had to respond to a series of severe environmental threats including the presence of lead in the soil, air pollution from municipal incinerators. In these efforts they have been supported by the local agencies and elected representatives. Riverdale is an attractive area and its relatively low cost housing has attracted individuals who see themselves as "downtown, progressive citizens."

### Community Members

Many residents have lived in Riverdale for many years and have developed strong links with other residents, and the local agencies. There is also, an acceptance of the cultural and economic diversity of the community and a sensitivity to issues that some residents face. There is supported housing that allows seniors, persons with disabilities, and people recovering from medical and social problems to live in Riverdale. Concern about others shows itself in their assisting in helping neighbours and volunteering with community agencies. Residents know about the work being done by these community agencies and are supportive of their efforts. It is

also noteworthy that many service providers, in their interviews, spoke of the support they receive from community members as they carry out their activities. Concern with government actions and policies was apparent in all of the focus groups and interviews. Community members spoke about the many advocacy groups that are active in the community.

### Physical Infrastructure

Riverdale was described by many community members as a place which has lots of parks. It was also seen as a community that was near a range of natural amenities such as Lake Ontario and the Beach area, the Don Valley, and the Leslie Street Spit, a created nature reserve.

Beyond natural amenities, people in Riverdale are able to access the things they need. When these are not within walking distance, public transit allows them to get where they want. Since Riverdale has numerous shopping areas, people are able to buy almost all the things they need from supermarkets, stores, and shops. People of Chinese descent are able to buy the foods they are used to in Chinatown. Persons of Indian descent can shop in the Little India area. And people of other backgrounds are usually able to find stores that will meet their needs as well. For seniors however, distance to stores and the availability of specific kinds of stores are sometimes problems and the closing of the local post office reflects a general difficulty some seniors have accessing amenities. Some seniors and others are not able to access transportation when they need it. Located within the downtown of a major city, there is access to resources and activities.

There is ongoing concern about crime and safety. Much of the crime is seen as involving youth. In addition, some areas of Riverdale are run-down. Some of the housing is deteriorating and for some, housing is crowded and dirty. While some speak of the area as quiet, others see it as noisy. Some of this has to do with heavy traffic flow which leads to problems of congestion and parking.

### Responsive and Community-Oriented Elected Representatives

The political representatives were highly knowledgeable about Riverdale, its people, its places, and its problems. They knew the history of Riverdale, its many agencies, organizations, and groups, and the issues people face on a day-to-day basis. Another aspect of these elected representatives were their understanding of the forces that act upon communities and their members. They outlined the economic effects upon Riverdale of globalization, discussed the forces within communities that support and inhibit effective action, and specified the

effects upon individuals of the challenges that people face who may be unemployed, of low income, and marginalized or isolated.

These elected representatives have lengthy resumes of effective action within the community. All have been involved, at one time or another, with the many environmental efforts that are part of the history of Riverdale. All have worked to support economic development and reduce unemployment and poverty among Riverdale residents. And the forms that these efforts have taken have included reorienting government policies, forming business/community partnerships, creating innovative employment works projects, and supporting community movements.

### Problems

Riverdale, like many urban communities in North America, has its share of problems. These problems are focussed in three main areas. There are environmental problems in Riverdale. These have been associated with the well-known lead contamination and incinerator fights. Environmental problems persist and centre around issues of bad air and bad water. There are also employment and income issues in Riverdale. These involve ongoing problems of poverty and unemployment. Finally, there are safety and security issues in Riverdale. These focus on concerns about crime, vandalism, and personal safety. Interestingly, it has been the presence of these problems, and community responses to them, that has contributed to what many people see as the good community quality of life in Riverdale.

### Interconnections Among Model Components

There are a number of ways in which these components of community quality of life are interconnected. Being located within the City of Toronto and the wealthiest Canadian province, Ontario, the community has benefitted from a network of well-funded community agencies such as community and recreation centres that are free to all. This has not been the case in other Metropolitan Toronto municipalities where there has been less of a commitment to low costs or free services. There has also been funding support for subsidized housing projects and residences. But as a result of changing federal and provincial policies, and the forced merger of the City of Toronto with other municipalities into a large “megacity,” support for these local institutions is under threat.

The presence of responsive institutions has made Riverdale a place where community-minded individuals have chosen to live. When faced with threats to well-being such as environmental and income issues, these

individuals have been able to draw support not only from each other but also from the local institutions. This process led to the development of self-sustaining citizen groups that continue to influence and educate local residents. And it is through these activities, that the community continues to be maintained and improved and individuals, aware of these aspects, wish to live in Riverdale.

Another inter-relationship is that all four representatives developed their political skills as community activists in the immediate or adjoining city wards. Two representatives actually began their careers as chairs of Citizens for a Safe Environment, a key Riverdale citizen group. Community members choose to live in Riverdale because of the availability of amenities and services, and therefore remain supportive of the presence of such services even when their personal need for them may diminish. Of course all of this is related to the physical infrastructure that supports individuals in their day to day practical and leisure activities. For low income people, the accessibility to day-to-day and natural amenities is especially important. In sum, all of these components by themselves and in interaction with each other have contributed to quality of life among Riverdale residents, both low income and those who are more well-off.

#### Relationship to Social Capital Literature

As the findings about this community emerged, it became apparent that there were implications for the social capital literature. The World Bank (1998) states: “Social capital refers to the institutions, relationships, and norms that shape the quality and quantity of a society's social interactions... Social capital is not just the sum of the institutions which underpin a society – it is the glue that holds them together.” The World Bank distinguishes between two forms of social capital: horizontal and vertical associations. The former are:

*... a set of horizontal associations between people, consisting of social networks and associated norms that have an effect on community productivity and well-being. Social networks can increase productivity by reducing the costs of doing business. Social capital facilitates coordination and cooperation.*

This involves the associations among people that may be formal or informal. In Riverdale there is a rich tradition of both institutional and non-institutional networks. These involve in many instances, advocacy and political activities that may have been initially supported by community agencies and institutions but have gained sustainability. Clearly then, these associations are facilitated by the presence of supportive institutions. These

institutions exist in many cases due to the presence of supportive political institutions. In the Riverdale study, we identified the important role that governments play in supporting communities through the provision of supported housing, funding of agencies and services, and support for local business.

This support by political institutions for communities can be seen as falling within what the World Bank calls an enabling social and political environment:

*The broadest and most encompassing view of social capital includes the social and political environment that shapes social structure and enables norms to develop. This analysis extends the importance of social capital to the most formalized institutional relationships and structures, such as government, the political regime, the rule of law, the court system, and civil and political liberties. This view not only accounts for the virtues and vices of social capital, and the importance of forging ties within and across communities, but recognizes that the capacity of various social groups to act in their interest depends crucially on the support (or lack thereof) that they receive from the state as well as the private sector.*

It is these state supports that are identified by respondents as being under threat. In a community with many low-income individuals such as Riverdale, these supports are essential to community health and well-being. The presence of these supports and the structures, activities and outcomes that have accrued from them are the reasons why Riverdale, despite its many problems continues to be a community where people wish to live, rather than leave. Clearly, there is an abundance of social capital within this community. The extent to which this social capital can be preserved and itself can serve to influence the future course of the community will be a true test of the social capital concept.

#### References

Ali, Y. and Suttle, A. (1994). *Riverdale 2000: Vision for A Healthy Community*. Toronto: South Riverdale Community Health Centre

Bryman, A. (1988). *Quantity And Quality In Social Research*. Boston: Unwin Hyman.

Hancock, T. and Minkler, M. (1997). Community health assessment or healthy community assessment: Who's community? Who's health? Who's assessment? In M. Minkler, (ed). *Community Organizing And Community Building For Health*, pp. 139-156. New Brunswick, NJ: Rutgers University Press.

Kawachi, I., & Kennedy, B. P. (1997). Socioeconomic determinants of health: health and social cohesion, why care about income inequality. *British Medical Journal*, 314, 1037-1045.

Keating, D (1975). *The power to make it happen : mass-based community organizing: what it is and how it works*. Toronto: Lorimer.

Kuhn, T. (19702). *The Structure of Scientific Revolutions*, 2<sup>nd</sup> edition. Chicago: University of Chicago Press.

Lincoln, Y. S. (1995). Emerging criteria for quality in qualitative and interpretive research. *Qualitative Inquiry*, 1, 275-289.

Lincoln Y. S. and Guba, E. G. (1985). *Naturalistic Inquiry*. Newbury Park CA: Sage.

Minkler, M. (1997). *Community organizing and community building for health*. New Brunswick, NJ: Rutgers University Press.

Oliver, M. (1990). *The Politics of Disablement*. London: MacMillan.

Park, P. and Hall, B. (1993) *Voices Of Change: Participatory Research In The USA And Canada*. Westport, CN: Bergin and Garvey.

Raphael, D., Steinmetz, B., and Renwick, R. (1998a). *How To Carry Out A Community Quality Of Life Project: A Manual*. Toronto: Department of Public Health Sciences.

Raphael, D., Steinmetz, B., and Renwick, R. (1998b). *The People, Places, and Priorities of Riverdale: Findings From the Community Quality of Life Project*. Toronto: Centre for Health Promotion.

[<http://www.utoronto.ca/qol>]

Raphael, D., Steinmetz, B., Renwick, R. et al., (1999). The community quality of life project: A health promotion approach to understanding communities. *Health Promotion International*, 86.

Robson, C. (1994). *Real world research: a resource for social scientists and practitioner-researchers*. Oxford UK: Blackwell.

Tesh, S. (1990). *Hidden Arguments: Political Ideology and Disease Prevention Policy*. Rutgers University Press, New Brunswick, NJ and London.

van den Honnaard, W. (1997). *Working with Sensitizing Concepts*. Thousand Oaks, CA: Sage Publications Press.

Woodill, G. (1992) *Independent Living And Participation In Research: A Critical Analysis*. Toronto: Centre for Independent Living, 205 Richmond Street West.

World Health Organization (1986). *Ottawa Charter on Health Promotion*. Geneva: Author.

World Bank (1998). *Social capital for development web site*. On line at:  
<http://www.worldbank.org/poverty/scapital/>

## Appendix I: Canadian Health Care and the Community Health Centre (CHC) Mandate in Ontario

In Canada, citizens and permanent residents are entitled to a wide range of health care services that are funded through general government revenues. With some exceptions, out-patient services are provided or supervised by physicians in private practice. Hospital care is also an entitlement. The management of health care is a provincial responsibility with each province setting the rates and providing payment for provided services. The federal government however, contributes to health care funding. Also, federal legislation, the Canada Health Act, dictates some conditions under which health care is provided. For example, the Act states that provinces cannot allow physicians to charge rates in excess of what the province provides for health services.

At the level of health service delivery, provincial governments fund a variety of primary health care health sites and venues (e.g., hospitals, clinics, CHCs, and physicians in private practice). Physicians in private practice and hospitals bill the province directly. However, there is also a range of quasi-governmental agencies that receive much of their funding from the provincial governments, but operate at some distance from direct government control. These agencies usually have voluntary boards of directors who are responsible for policy development.

CHCs are funded directly by the provincial government, yet are not directly under day-to-day government control. They are usually established in neighbourhoods that are at-risk for health problems and have a unique mandate of providing primary care to neighbourhood residents and supporting health through local initiatives. Concerning the former, to receive primary care services, residents have the option to visit a local physician or the physicians and nurses at the CHC. Concerning the latter, centres establish nutrition programs for at-risk mothers, working to limit family violence, providing information about sexually transmitted diseases, and work with community partners to address broader community issues. For both these types of activities, their their mandate is to identify community health needs and to respond to these needs. These agencies operate at a neighbourhood level and frequently emphasize and use a community development emphasis. The Riverdale and Lawrence Heights CHCs, exemplify these kinds of centres.



Appendix II: Community Focus Group Discussions and Interviews

*Focus Group Discussions: Adults*

*Church Group I (5 participants)*

*Church Group II (2)*

*CHC Members (6)*

*Literacy Group (5)*

*Women's Healthy Weight Group (3)*

*Focus Group Discussions: Seniors*

*Community Centre Group (9)*

*Seniors' Residence (11)*

*Wellness Group (8)*

*Focus Group Discussions: Youth*

*Community Centre Males (6)*

*Community Centre Females (11)*

*Young Mothers' (6)*

*Focus Group Discussions: New Canadians*

*New Canadian Centre Group (11)*

*New Canadian Centre Group (11)*

*Chinese Women's (8)*

*Individual Interviews with Community Members (63)*

*Youth (18) Seniors (23), Adults (17), New Canadians (5)*

*Interviews with Elected Representatives*

*City Councillor*

*Public School Trustees (2)*

*City Mayor*

*Regional Councillor*

*Provincial Parliament Member*

*Interviews With Service Providers*

Community Development Worker: Seniors Residence

Community Health Promoter: CHC

Community Health Worker: CHC

Community Minister: United Church

Dietitian: CHC

Literacy Coordinator: Community Centre

Manager of Community Support Services: Community Centre

Program Director: CHC

Public Health Nurse: Public Health Department

Teacher: Adult New Canadian Centre

Youth Worker: Community Centre

## Appendix III: Questions Asked in the Community Quality of Life Project

### Questions Asked in Community Focus Groups

*What is it about your neighbourhood or community that makes life good for you and the people you care about?*

*What is it about your neighbourhood and community that does not make life good for you and the people you care about?*

*What are some of the things in this neighbourhood or community that help you cope or manage when you or your family have problems?*

*What would you like to see in this neighbourhood that would help you cope or manage when you have problems? Are there services you would like to see? Programs?*

### Questions Asked of Elected Representatives

*What is it about this neighbourhood or community which makes life good for its members?*

*What are some of the problems that this community has?*

*How do these issues relate to your role as an elected representative?*

*How do you attempt to improve the quality of life of community members?*

*Can you give some examples of things you have done that have been successful? And perhaps not so successful?*

*What are some barriers to these efforts? What helps you carry out these efforts?*

### Questions Asked of Service Providers

*What is it about this neighbourhood or community which makes life good for people like those who attended the community discussion?*

*What are some of the problems which this community has that affects people like those who attended our discussion?*

*How do these issues relate to the mandate and programs of your agency?*

*How does your agency attempt to improve the quality of life of community members like those in our discussion group?*

*Can you give some examples of things your agency is doing that are working well? And perhaps not so well?*

*What are some barriers to carrying out these efforts? What helps you carry out these efforts?*