Viewpoint
What is the future of public space?
Hidden stories of immigrant suburbs during a global pandemic

The COVID-19 pandemic compelled decision makers to enforce strict physical-distancing and isolation measures in order to ‘flatten the curve’ and contain the spread of the communicable disease. These public-health measures have instigated a global conversation amongst urbanists, planners and policy makers about the future of cities in general, and the implications of the pandemic for urban density and the use of public space in particular (Honey-Rosés et al., 2020). However, absent from this worldwide discussion have been explicit considerations of how to integrate equity and inclusion into these post-COVID-19 urban futures. More specifically, there is a paucity of dialogue on city building and recovery from the perspective of minority groups, and little consideration of how to engage with diverse communities and leverage their knowledge for more equitable and inclusive recovery in local communities. COVID-19 has notably exacerbated urban inequalities among marginalised groups, including racial and religious minorities, immigrants and refugees, low-income families, individuals who are food-insecure, the precariously employed, and homeless and/or precariously housed (Hertel and Keil, 2020; Hou, 2020; Pitter, 2020). Yet there has been little contemplation of how accessibility to suburban public spaces is changing in the era of COVID-19, and specifically how the proliferation of inaccessible public spaces is unequally affecting minority populations in the suburbs.

While governments are moving towards societal reopening and recovery from the pandemic, it is crucial to gain a thorough understanding of the social and spatial needs of underserved and marginalised groups in suburban places. Municipalities must adapt to the global health crisis and engage marginalised communities in future policy making and design of public spaces that are vital to supporting health and well-being. In the following section, we illuminate the ‘hidden stories’ of minority groups in Toronto’s suburbs in order to promote equity-based considerations for public-space use during the COVID-19 recovery stage and in the case of future pandemics.
The exacerbated challenges in immigrant suburbs

Across North America, immigrants are increasingly bypassing the inner city and settling directly in the suburbs, significantly altering suburban social, cultural, political and physical landscapes. In the US, the majority of immigrants (61 per cent) live in suburbs (Singer and Wilson, 2011). In the Toronto region, 50.6 per cent of immigrants have settled in suburban municipalities where visible minority populations are also prominent (Vézina and Houle, 2017). Immigrant and racialised communities present diverse public-space needs encompassing retail spaces, schools, places of worship, community and service centres, parks/green spaces and recreational settings, which collectively reshape suburban spaces with new identities, meanings and senses of community. In North America, conventional car-oriented suburbs were designed to be segregated in land use and by socio-economic status. As a result, they often do not adequately accommodate the needs of diverse populations due to insufficient social and physical infrastructure, such as overcrowded, poorly maintained high-rise residential buildings, poor access to health and social services, jobs, ethnic retail outlets, transit and green space (Lo et al., 2015; Edge et al., 2020), in addition to poor municipal consultation and engagement strategies (Zhuang, 2019). These challenges that already affect immigrants’ settlement, integration and social cohesion in the suburbs (Dean et al., 2018) are being exacerbated by pandemic containment measures.

The COVID-19 crisis has further disrupted the ability of marginalised communities to effectively access opportunities vital to their health and settlement due to social isolation and physical separation. In an effort to ‘flatten the curve’, municipal offices, community hubs and social-service organisations have closed. Immigrants, minorities and low-income residents are disproportionately impacted by such measures due to their high reliance on community hubs (e.g. libraries, community facilities) and social-service organisations (e.g. settlement, language, legal and job training services) that facilitate community support, cultural bonding and social integration. The implications of these closures for marginalised community members is further exacerbated by the shuttering of public space (e.g. parks, trails) in high-density, overcrowded neighbourhoods. These conditions are prominent in Toronto’s inner suburbs where physical distancing has become an elusive privilege.

Toronto has the second-largest high-rise housing stock in North America, featuring 1,189 rental apartment towers (eight storeys and over) with nearly 300,000 units that are home to more than half a million residents, many of whom are immigrants and racialised minorities (Tower Renewal Partnership, 2010). The majority of the units are concentrated in the inner suburbs, where the City of Toronto has identified neighbourhood improvement areas (NIAs) in critical need of infrastructure improvement and investment. Many towers in these neighbourhoods are crowded and poorly maintained, impacting physical and mental health (Edge et al., 2020). Surrounding public space becomes all the more important with quality and access
amplifying or diminishing the impact of housing quality on health (Jones-Rounds et al., 2018).

During the COVID-19 crisis, residents isolating at home within NIAs struggled with physical-space constraints inside their units (e.g. overcrowding with large families), and limited access to outdoor spaces that could help relieve the stress caused by the isolation (Figure 1). While the city has a 300 kilometre-long ravine system weaving through many NIAs, there are insufficient entry points that limit use of the ravines as green lifelines (Figure 2). Additional challenges are experienced by immigrant children, youth, women and seniors, who rely on community services and public spaces within the NIAs that have been closed. Further, many residents are unable to fully isolate because they are working as personal support workers, front-line staff, cleaners or delivery persons, and are often reliant on public transit that may be crowded and operating on a reduced schedule. During the lockdown, significant drops in ridership occurred in most transit systems, yet several bus routes running through the NIAs have continued to struggle with crowding from essential workers increasing the health risks
of riders and drivers (Marshall, 2020). Consequently, the lived experiences of many NIA residents are vastly different from those with access to private yards and vehicles, and less dependence on public infrastructure.

It is also important to note that privately owned public spaces such as places of worship, private schools, and ethnic markets or malls, often serve as important ‘community hubs’ for minority groups by offering a large variety of religious, cultural and community services; options for cultural goods and foods; and spaces for social interaction and leisure activities (Zhuang, 2019) (Figures 3, 4). This adds another layer of complexity for consideration in policy, planning and design of public space within current and post-COVID-19 realities.

Who gets to tell the stories?

Decision makers must consider the specific context of suburban public spaces and how marginalised groups use these spaces for essential services, social interactions and community bonding. In non-pandemic situations, municipal policy makers have proven to be relatively uninformed about how to effectively respond to and engage
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Figure 3  Annual Khalsa Day celebrations took place at the site of a Sikh private school and gurdwara before COVID-19
Source: Photo by Zhixi Zhuang

Figure 4  Immigrant seniors practised group exercises at suburban Chinese malls before COVID-19
Source: Photo by Zhixi Zhuang
minority groups in decision making. Insufficient recognition, and/or exclusion, of marginalised communities in municipal outreach, consultation and policy- and decision making processes is widely noted (Poppe and Young, 2015). Greater invisibility of minority groups as a result of COVID-19 distancing measures could further marginalise under-represented communities whose voices are already easily silenced or dismissed during formal institutionalised processes (Amar and Teelucksingh, 2015). This can result in policy measures that predominantly consider the needs of higher-income native-born homeowners, who are residing in lower-density areas, at the expense of others (Poppe and Young, 2015).

It is imperative to assess how physical-distancing measures implemented under government-mandated COVID-19 responses are impacting minority groups’ engagement with their local environment (e.g. public space, neighbourhood, community services) and sense of place. Emphasis should be placed on how these impacts are inequitably distributed across immigrant, racialised and other populations (e.g. by race, gender, age, income, employment, immigration status, etc.), and/or differences in built form (e.g. overcrowded high-rise buildings versus low-density sprawling homes, access to private yard space and community assets/public space). City builders and decision makers should consider the following questions as the pivot of future policy making and design of public space as this unfolds: what are the social and spatial needs of minority communities before, during and after distancing measures are in place? What spaces and places matter for healthy immigrant settlement and social inclusion? What is the impact of physical-distancing measures on minority and marginalised groups? What engagement approaches are effective in including minority groups’ voices in decision-making processes about the future design and use of public space?

Municipalities have an important role to play in helping communities combat increased risks from COVID-19 and their associated impact on geographic and racialised inequities. Poor access to quality public spaces and infrastructure, crowded living conditions and discrimination, including anti-Asian sentiments, collectively undermine opportunities for cultivating belonging and inclusion, leading to further isolation and compromised health of minority populations. It is crucial to improve place-based understanding of how the impacts of COVID-19 differ by race, density/built form, municipal policies and engagement mechanisms, and the availability of services or infrastructure. Municipalities should take this opportunity to reconsider effective engagement strategies that will help improve understanding of minority groups’ narratives, and whether or how the new norm of online platforms for interaction is effective and equitable. This is essential for ensuring that under-represented voices are incorporated into legally mandated public-engagement planning processes in the future.
Applying an equity lens

The dialogue around the future of public space and cities should shift the central focus from built form and density to ensuring inclusive and equitable access to the reorganised public realm for minority populations. As Canadian placemaker and urban equity advocate Jay Pitter notes (2020, para. 30), the post-COVID-19 planning and design framework ‘should be evidence-based and overlap with social determinants of health, such as food security, race, gender and poverty, while being anchored in a strong equity-based placemaking paradigm. It should be co-created through meaningful engagement with urbanists, public health professionals, community members and other stakeholders’.

In alignment with Pitter’s progressive approach, cities around the world should put equity, diversity and inclusion at the centre of the post-COVID-19 dialogue, embedding these principles in policy-making, design and public-engagement processes. We should aim for an equity-based approach to level an uneven playing field by engaging with minority groups to co-create community narratives and solutions. Equitable community engagement brings people into the centre of inclusive city building and this approach is paramount to building community capacity and resilience during COVID-19 recovery. Engaging with immigrants and racialised groups who make up a growing portion of the population and are important city builders is a cornerstone of inclusion and democracy in multicultural societies.

The whole world is anticipating a new normal for cities and human habitats after COVID-19. What will it look like? Hertel and Keil (2020, para. 13) offer a word of warning: ‘Returning to the status quo should not, must not, be an option after COVID-19. Planning needs to be tuned to the demands of a changing reality with opportunities beyond the inequalities, polarizations and fragmentations we have built into our cities in past generations. There is no other way.’

The future of cities and public spaces should be built upon learning from this crisis. We are offering the following reflections. (1) Practitioners and decision makers must assess the needs and experiences of marginalised communities during the pandemic, including how distancing measures and recovery policies impact the everyday lives, sense of belonging, community bonding and use of public space among minority groups. (2) Policy and planning authorities should support diverse, inclusive and equitable civic engagement by centring the lived experiences of the most at-risk populations into municipal engagement and decision-making processes. (3) Adopting culturally appropriate and inclusive approaches (e.g. storytelling, community round tables) will help overcome engagement barriers and unequal power dynamics. And (4) public-health and municipal leaders should evaluate the equity outcomes of their pandemic distancing measures on communicable disease risk and the broader health and well-being of isolated and confined populations.
Public spaces are particularly crucial for ensuring the health and well-being of minority groups, combating social isolation and facilitating a sense of belonging and inclusion. Marginalised voices should be raised and heard to inform the planning and design of accessible and inclusive public spaces for future recovery and city building. Despite the damages, the global pandemic has presented new opportunities to reshape our cities, public spaces and human lives. We should seize the opportunity and carry out equitable, meaningful and inclusive dialogues with diverse communities to co-create a new normal.

References


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